



University of Iowa Health Care

***Presentation to
The Board of Regents, State of Iowa
September 20, 2011***

- Opening Remarks (Robillard)
- Operational and Financial Performance (Kates, Fisher)
- Strategic Plan Update (Robillard et al.)



Opening Remarks

Jean Robillard, MD
Vice President for Medical Affairs



Operating and Financial Performance Update

Ken Kates, Chief Executive Officer
UI Hospitals & Clinics

Ken Fisher, Associate Vice President for Finance
and Chief Financial Officer

Volume Indicators

July 2010 through June 2011



Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Discharges	29,987	29,349	28,968	638	2.2% ○	1,019	3.5% ●
Patient Days	196,482	185,140	182,820	11,342	6.1% ●	13,662	7.5% ●
Length of Stay	6.56	6.25	6.26	0.31	4.9% ●	0.30	4.8% ●
Average Daily Census	538.31	507.23	500.88	31.07	6.1% ●	37.43	7.5% ●
Surgeries – Inpatient	11,215	11,070	10,907	145	1.3% ○	308	2.8% ●
Surgeries – Outpatient	15,487	14,312	14,279	1,175	8.2% ●	1,208	8.5% ●
Emergency Treatment Center Visits	56,409	52,682	51,866	3,727	7.1% ●	4,543	8.8% ●
Outpatient Clinic Visits	778,789	787,435	753,823	(8,646)	-1.1% ○	24,966	3.3% ●
Case Mix	1.7878	1.7780	1.7802	0.0098	0.6%	0.0076	0.4%
Medicare Case Mix	1.9822	2.0271	2.0271	(0.0449)	-2.2%	(0.0449)	-2.2%

Greater than 2.5% Favorable
 Neutral
 Greater than 2.5% Unfavorable

Discharges by Type

July 2010 through June 2011



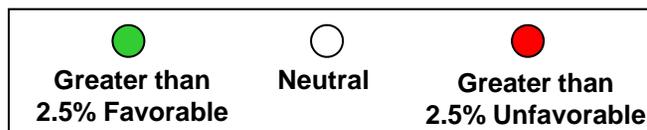
Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Adult Medical	10,236	9,593	9,749	643	6.7% ●	487	5.0% ●
Adult Surgical	13,409	13,457	12,818	(48)	-0.4% ○	591	4.6% ●
Adult Psych	1,610	1,647	1,759	(37)	-2.2% ○	(149)	-8.5% ●
<i>Subtotal – Adult</i>	<i>25,255</i>	<i>24,698</i>	<i>24,326</i>	<i>557</i>	<i>2.3% ○</i>	<i>929</i>	<i>3.8% ●</i>
Pediatric Medical	3,225	3,156	3,139	69	2.2% ○	86	2.7% ●
Pediatric Surgical	163	184	158	(21)	-11.2% ●	5	3.2% ●
Pediatric Critical Care	809	849	835	(40)	-4.7% ●	(26)	-3.1% ●
Pediatric Psych	535	463	510	72	15.4% ●	25	4.9% ●
<i>Subtotal – Pediatrics w/o newborn</i>	<i>4,732</i>	<i>4,651</i>	<i>4,642</i>	<i>81</i>	<i>1.7% ○</i>	<i>90</i>	<i>1.9% ○</i>
Newborn	1,408	1,357	1,318	51	3.8% ●	90	6.8% ●
TOTAL w/o Newborn	29,987	29,349	28,968	638	2.2% ○	1,019	3.5% ●

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Greater than 2.5% Favorable	Neutral	Greater than 2.5% Unfavorable

Discharge Days by Type

July 2010 through June 2011

Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Adult Medical	60,552	56,120	56,269	4,432	7.9% ●	4,283	7.6% ●
Adult Surgical	71,072	67,814	65,976	3,258	4.8% ●	5,096	7.7% ●
Adult Psych	20,571	19,256	19,817	1,315	6.8% ●	754	3.8% ●
<i>Subtotal – Adult</i>	<i>152,195</i>	<i>143,190</i>	<i>142,062</i>	<i>9,005</i>	<i>6.3% ●</i>	<i>10,133</i>	<i>7.1% ●</i>
Pediatric Medical	17,202	15,526	14,928	1,676	10.8% ●	2,274	15.2% ●
Pediatric Surgical	1,359	1,524	1,268	(165)	-10.8% ●	91	7.2% ●
Pediatric Critical Care	21,875	19,849	19,251	2,026	10.2% ●	2,624	13.6% ●
Pediatric Psych	4,085	3,471	3,745	614	17.7% ●	340	9.1% ●
<i>Subtotal – Pediatrics w/o newborn</i>	<i>44,521</i>	<i>40,369</i>	<i>39,192</i>	<i>4,152</i>	<i>10.3% ●</i>	<i>5,329</i>	<i>13.6% ●</i>
Newborn	3,108	3,052	2,945	56	1.8% ○	163	5.5% ●
TOTAL w/o Newborn	196,716	183,559	181,254	13,157	7.2% ●	15,462	8.5% ●



Average Length of Stay by Type

July 2010 through June 2011



Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Adult Medical	5.92	5.85	5.77	0.07	1.1% ○	0.14	2.5% ○
Adult Surgical	5.30	5.04	5.15	0.26	5.2% ●	0.15	3.0% ●
Adult Psych	12.78	11.69	11.27	1.08	9.3% ●	1.51	13.4% ●
Subtotal – Adult	6.03	5.80	5.84	0.23	3.9% ●	0.19	3.2% ●
Pediatric Medical	5.33	4.92	4.76	0.41	8.4% ●	0.58	12.2% ●
Pediatric Surgical	8.34	8.30	8.03	0.04	0.4% ○	0.31	3.9% ●
Pediatric Critical Care	27.04	23.39	23.06	3.65	15.6% ●	3.99	17.3% ●
Pediatric Psych	7.64	7.49	7.34	0.15	2.0% ○	0.29	4.0% ●
Subtotal – Pediatrics w/o newborn	9.41	8.68	8.44	0.73	8.4% ●	0.97	11.4% ●
Newborn	2.21	2.25	2.23	(0.04)	-1.9% ○	(0.03)	-1.2% ○
TOTAL w/o Newborn	6.56	6.25	6.26	0.31	4.9% ●	0.30	4.8% ●

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Greater than 2.5% Favorable	Neutral	Greater than 2.5% Unfavorable

Outpatient Surgeries – by Clinical Department

July 2010 through June 2011



Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Cardiothoracic	69	73	75	(4)	-6.0% ●	(6)	-8.0% ●
Dentistry	588	591	604	(3)	-0.5% ○	(16)	-2.6% ●
Dermatology	42	59	58	(17)	-29.2% ●	(16)	-27.6% ●
General Surgery	2,556	2,214	2,230	342	15.5% ●	326	14.6% ●
Gynecology	778	780	777	(2)	-0.2% ○	1	0.1% ○
Internal Medicine	3	8	8	(5)	-63.2% ●	(5)	-62.5% ●
Neurosurgery	471	475	485	(4)	-0.8% ○	(14)	-2.9% ●
Ophthalmology	3,254	3,171	3,130	83	2.6% ●	124	4.0% ●
Orthopedics	3,779	3,482	3,454	297	8.5% ●	325	9.4% ●
Otolaryngology	2,428	2,184	2,185	244	11.2% ●	243	11.1% ●
Radiology – Interventional	32	45	46	(13)	-28.9% ●	(14)	-30.4% ●
Urology w/ Procedure Ste.	1,487	1,229	1,227	258	20.9% ●	260	21.2% ●
Total	15,487	14,312	14,279	1,175	8.2% ●	1,208	8.5% ●

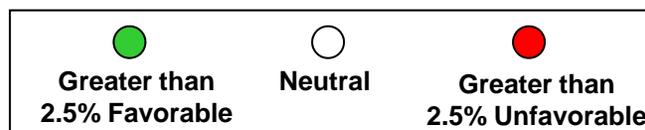
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Greater than 2.5% Favorable	Neutral	Greater than 2.5% Unfavorable

Inpatient Surgeries – by Clinical Department

July 2010 through June 2011



Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Cardiothoracic	1,107	1,209	1,191	(102)	-8.4% ●	(84)	-7.1% ●
Dentistry	123	128	126	(5)	-3.8% ●	(3)	-2.4% ○
General Surgery	3,184	2,801	2,760	383	13.7% ●	424	15.4% ●
Gynecology	766	812	800	(46)	-5.6% ●	(34)	-4.3% ●
Neurosurgery	1,642	1,649	1,625	(7)	-0.4% ○	17	1.0% ○
Ophthalmology	141	127	123	14	11.0% ●	18	14.6% ●
Orthopedics	2,675	2,715	2,674	(40)	-1.5% ○	1	0.0% ○
Otolaryngology	744	691	681	53	7.6% ●	63	9.3% ●
Radiology – Interventional	110	218	215	(108)	-49.6% ●	(105)	-48.8% ●
Urology w/ Procedure Ste.	723	720	712	3	0.4% ○	11	1.5% ○
Total	11,215	11,070	10,907	145	1.3% ○	308	2.8% ●



Emergency Treatment Center

July 2010 through June 2011

Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
ETC Visits	56,409	52,682	51,866	3,727	7.1% ●	4,543	8.8% ●
ETC Admits	14,757	13,676	13,463	1,081	7.9% ●	1,294	9.6% ●
Conversion Factor	26.2%	26.0%	26.0%		0.8% ○		0.8% ○
ETC Admits / Total Admits	49.3%	46.8%	46.6%		5.4% ●		5.7% ●

●	○	●
Greater than 2.5% Favorable	Neutral	Greater than 2.5% Unfavorable

Clinic Visits by Clinical Department

July 2010 through June 2011

Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget		Variance to Prior Year	% Variance to Prior Year	
Anesthesia	14,978	16,834	16,115	(1,856)	-11.0%	●	(1,137)	-7.1%	●
CDD	8,172	7,714	7,385	458	5.9%	●	787	10.7%	●
Clinical Research	10,443	11,711	11,211	(1,268)	-10.8%	●	(768)	-6.9%	●
Dermatology	25,956	26,327	25,203	(371)	-1.4%	○	753	3.0%	●
ETC	56,409	52,682	51,866	3,727	7.1%	●	4,543	8.8%	●
Employee Health Clinic	16,679	15,319	14,665	1,360	8.9%	●	2,014	13.7%	●
Family Care Center	88,599	98,606	94,397	(10,007)	-10.1%	●	(5,798)	-6.1%	●
General Surgery	23,604	24,468	29,363	(864)	-3.5%	●	(5,759)	-19.6%	●
Heart and Vascular	37,038	34,547	2,903	2,491	7.2%	●	34,135	1,175.9%	●
Hospital Dentistry	13,829	12,706	12,164	1,123	8.8%	●	1,665	13.7%	●
Internal Medicine	105,563	102,899	121,302	2,664	2.6%	●	(15,739)	-13.0%	●
Neurology	16,776	18,744	17,944	(1,968)	-10.5%	●	(1,168)	-6.5%	●
Neurosurgery	8,942	9,514	9,108	(572)	-6.0%	●	(166)	-1.8%	○
Obstetrics/Gynecology	75,170	78,325	74,982	(3,155)	-4.0%	●	188	0.3%	○
Ophthalmology	65,811	66,659	63,814	(848)	-1.3%	○	1,997	3.1%	●
Orthopedics	59,471	58,952	56,436	519	0.9%	○	3,035	5.4%	●
Otolaryngology	27,951	29,064	27,823	(1,113)	-3.8%	●	128	0.5%	○
Pediatrics	43,584	41,868	40,081	1,716	4.1%	●	3,503	8.7%	●
Primary Care Clinic North	21,556	19,150	18,333	2,406	12.6%	●	3,223	17.6%	●
Psychiatry	41,897	43,772	41,904	(1,875)	-4.3%	●	(7)	0.0%	○
Urology	15,802	16,953	16,229	(1,151)	-6.8%	●	(427)	-2.6%	●
Other	558	620	595	(62)	-9.9%	●	(37)	-6.2%	●
Total	778,789	787,435	753,823	(8,646)	-1.1%	○	24,966	3.3%	●



Greater than 2.5% Favorable



Neutral



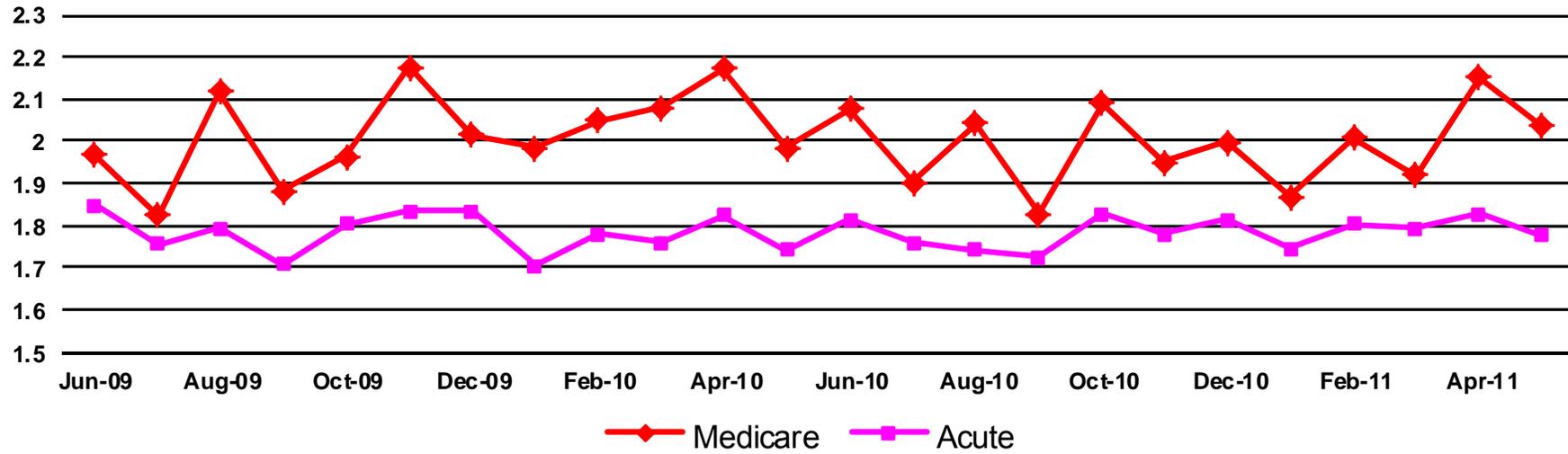
Greater than 2.5% Unfavorable

Clinic Visits by Clinical Department

Five-year Comparison

	FY 2007	FY 2008	FY 2009	FY 2010	FY 2011
Anesthesia	16,885	16,458	14,628	16,115	14,978
Center for Disabilities and Development	6,471	7,000	7,503	7,385	8,173
Clinical Research	7,611	7,829	8,302	11,211	10,443
Dermatology	23,203	24,503	24,826	25,203	25,956
Emergency Treatment Center	38,378	43,681	49,460	51,866	56,409
Employee Health Clinic	15,199	16,577	16,284	14,665	16,679
Family Care Center	102,216	99,518	97,409	94,397	88,599
General Surgery	18,219	18,002	17,802	20,370	23,604
Heart and Vascular	30,424	31,798	32,842	35,521	37,038
Hospital Dentistry	22,220	23,043	23,400	12,164	13,829
Internal Medicine	83,703	84,801	92,247	97,677	105,563
Primary Care Clinic North	6,365	8,026	15,066	18,333	21,556
Neurology	15,663	15,404	16,746	17,944	16,776
Neurosurgery	8,707	8,784	9,081	9,108	8,942
Obstetrics & Gynecology	65,288	65,581	71,418	74,982	75,170
Ophthalmology & Visual Sciences	61,275	63,422	66,981	63,814	65,811
Orthopaedics	51,524	51,895	53,688	56,436	59,471
Otolaryngology	28,439	27,107	27,949	27,823	27,951
Pediatrics-UIHC	31,164	33,688	38,674	40,081	43,584
Psychiatry	39,315	39,021	41,527	41,904	41,897
Urology	15,246	15,252	15,903	16,229	15,802
Other	563	576	576	595	558
Total	688,078	701,966	742,312	753,823	778,789

Case Mix Index



UIHC Comparative Financial Results

Fiscal Year to Date June 2011 (Preliminary)



Dollars in Thousands

NET REVENUES:	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Patient Revenue	\$986,354	\$958,862	\$899,706	\$27,492	2.9%	\$86,648	9.6%
Other Operating Revenue	48,428	48,533	46,675	(105)	-0.2%	1,753	3.8%
Total Revenue	\$1,034,782	\$1,007,395	\$946,381	\$27,387	2.7%	\$88,401	9.3%

EXPENSES:

Salaries and Wages	\$492,857	\$498,700	\$465,811	(\$5,843)	-1.2%	\$27,046	5.8%
General Expenses	410,358	405,429	376,840	4,928	1.2%	33,518	8.9%
Operating Expense before Capital	\$903,215	\$904,130	\$842,651	(\$915)	-0.1%	\$60,564	7.2%
Cash Flow Operating Margin	\$131,567	\$103,265	\$103,730	\$28,302	27.4%	\$27,837	26.8%
Capital- Depreciation and Amortization	70,063	73,076	74,812	(3,013)	-4.1%	(4,749)	-6.3%
Total Operating Expense	\$973,278	\$977,206	\$917,463	(\$3,928)	-0.4%	\$55,815	6.1%

Operating Income	\$61,504	\$30,189	\$28,918	\$31,315	103.7%	\$32,586	112.7%
Operating Margin %	5.9%	3.0%	3.1%		2.9%		2.8%
Gain (Loss) on Investments	31,409	16,118	28,608	15,291	94.9%	2,801	9.8%
Other Non-Operating	(12,842)	(6,208)	(5,172)	(6,634)	106.9%	(7,671)	148.3%
Net Income	\$80,070	\$40,099	\$52,353	\$39,972	99.7%	\$27,717	52.9%
Net Margin %	7.6%	3.9%	5.4%		3.7%		2.2%

UIHC Comparative Financial Results

June 2011 (Preliminary)



Dollars in Thousands

NET REVENUES:	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Patient Revenue	\$92,513	\$79,391	\$78,879	\$13,122	16.5%	\$13,634	17.3%
Other Operating Revenue	3,666	4,043	4,345	(377)	-9.3%	(679)	-15.6%
Total Revenue	\$96,179	\$83,434	\$83,224	\$12,745	15.3%	\$12,955	15.6%

EXPENSES:

Salaries and Wages	\$41,911	\$41,213	\$37,913	\$698	1.7%	\$3,998	10.5%
General Expenses	40,319	34,276	36,873	6,043	17.6%	3,446	9.3%
Operating Expense before Capital	\$82,230	\$75,489	\$74,786	\$6,741	8.9%	\$7,444	10.0%
Cash Flow Operating Margin	\$13,949	\$7,945	\$8,438	\$6,004	75.6%	\$5,511	65.3%
Capital- Depreciation and Amortization	5,910	6,090	5,540	(180)	-3.0%	370	6.7%
Total Operating Expense	\$88,140	\$81,579	\$80,326	\$6,561	8.0%	\$7,814	9.7%

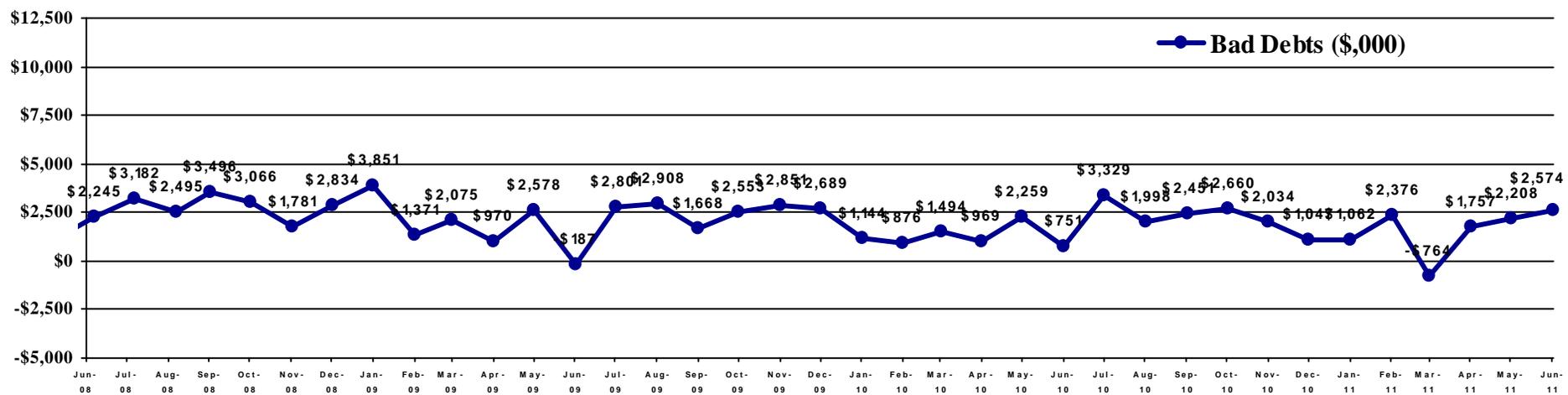
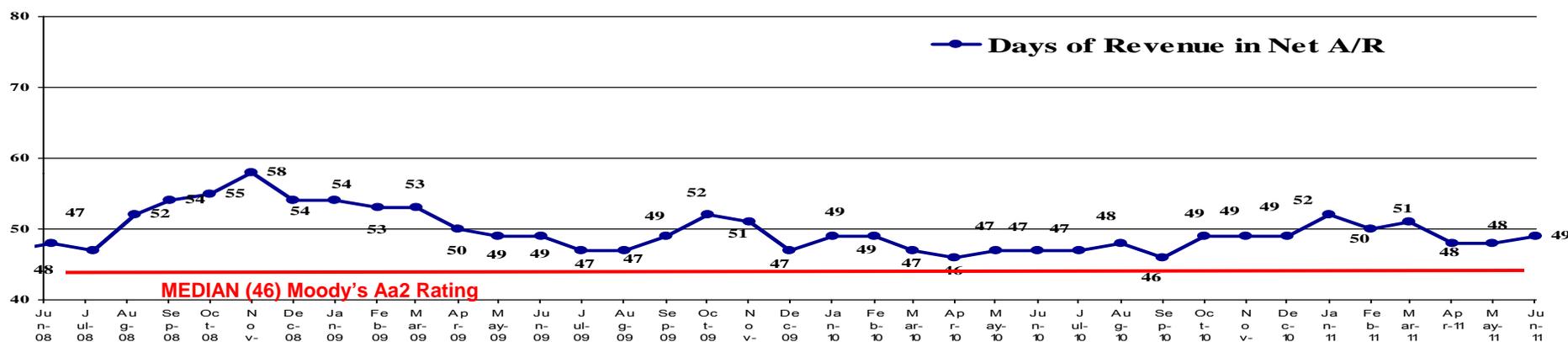
Operating Income	\$8,039	\$1,855	\$2,898	\$6,184	333.4%	\$5,141	177.4%
Operating Margin %	8.4%	2.2%	3.5%		6.2%		4.9%
Gain (Loss) on Investments	(6,528)	1,338	110	(7,866)	-588.0%	(6,639)	-6,023.6%
Other Non-Operating	(6,448)	(517)	(410)	(5,931)	1,146.3%	(6,038)	1,473.1%
Net Income	(\$4,938)	\$2,675	\$2,598	(\$7,613)	-284.6%	(\$7,536)	-290.1%
Net Margin %	-5.9%	3.2%	3.1%		-9.1%		-9.0%

Comparative Accounts Receivable

at June 30, 2011



	June 30, 2009	June 30, 2010	June 30, 2011
Net Accounts Receivable	\$121,515,935	\$117,737,680	\$136,477,870
Net Days in AR	49	47	49



Volume Indicators

July 2011

Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Discharges	2,637	2,640	2,622	(3)	-0.1% ○	15	0.6% ●
Patient Days	16,828	15,587	16,221	1,241	8.0% ●	607	3.7% ●
Length of Stay	6.08	6.03	6.27	0.04	0.7% ○	(0.19)	-3.0% ●
Average Daily Census	542.84	502.81	523.26	40.03	8.0% ●	19.58	3.7% ●
Surgeries – Inpatient	918	976	934	(58)	-5.9% ●	(16)	-1.7% ○
Surgeries – Outpatient	1,248	1,264	1,267	(16)	-1.3% ○	(19)	-1.5% ○
Emergency Treatment Center Visits	5,282	4,847	4,722	435	9.0% ●	560	11.9% ●
Outpatient Clinic Visits	63,883	68,593	64,348	(4,710)	-6.9% ●	(465)	-0.7% ○
Case Mix	1.6745	1.7780	1.7587	(0.1035)	-5.8%	(0.0842)	-4.8%
Medicare Case Mix	1.8002	1.9900	1.9022	(0.1898)	-9.5%	(0.1020)	-5.4%

● Greater than 2.5% Favorable	○ Neutral	● Greater than 2.5% Unfavorable
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Discharges by Type

July 2011



Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Adult Medical	909	878	928	31	3.6% ●	(19)	-2.0% ○
Adult Surgical	1,181	1,265	1,137	(84)	-6.6% ●	44	3.9% ●
Adult Psych	129	117	150	12	10.0% ●	(21)	-14.0% ●
<i>Subtotal – Adult</i>	<i>2,219</i>	<i>2,260</i>	<i>2,215</i>	<i>(41)</i>	<i>-1.8%</i> ○	<i>4</i>	<i>0.2%</i> ○
Pediatric Medical	291	278	277	13	4.7% ●	14	5.1% ●
Pediatric Surgical	8	18	18	(10)	-55.5% ●	(10)	-55.6% ●
Pediatric Critical Care	72	75	75	(3)	-4.0% ●	(3)	-4.0% ●
Pediatric Psych	47	37	37	10	27.1% ●	10	27.0% ●
<i>Subtotal – Pediatrics w/o newborn</i>	<i>418</i>	<i>408</i>	<i>407</i>	<i>10</i>	<i>2.5%</i> ●	<i>11</i>	<i>2.7%</i> ●
Newborn	154	156	142	(2)	-1.3% ○	12	8.5% ●
TOTAL w/o Newborn	2,637	2,640	2,622	(3)	-0.1% ○	15	0.6% ○

●	○	●
Greater than 2.5% Favorable	Neutral	Greater than 2.5% Unfavorable

Discharge Days by Type

July 2011

Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Adult Medical	4,927	5,043	5,200	(116)	-2.3% ○	(273)	-5.3% ●
Adult Surgical	6,308	5,476	5,645	832	15.2% ●	663	11.7% ●
Adult Psych	1,446	1,685	1,739	(239)	-14.2% ●	(293)	-16.8% ●
<i>Subtotal – Adult</i>	<i>12,681</i>	<i>12,204</i>	<i>12,584</i>	<i>477</i>	<i>3.9% ●</i>	<i>97</i>	<i>0.8% ○</i>
Pediatric Medical	1,175	1,753	1,810	(578)	-33.0% ●	(635)	-35.1% ●
Pediatric Surgical	87	69	71	18	26.5% ●	16	22.5% ●
Pediatric Critical Care	1,827	1,640	1,693	187	11.4% ●	134	7.9% ●
Pediatric Psych	261	266	275	(5)	-2.0% ○	(14)	-5.1% ●
<i>Subtotal – Pediatrics w/o newborn</i>	<i>3,350</i>	<i>3,729</i>	<i>3,849</i>	<i>(379)</i>	<i>-10.2% ●</i>	<i>(499)</i>	<i>-13.0% ●</i>
Newborn	335	372	321	(37)	-10.0% ●	14	4.4% ●
TOTAL w/o Newborn	16,031	15,933	16,433	98	0.6% ○	(402)	-2.4% ○

●	○	●
Greater than 2.5% Favorable	Neutral	Greater than 2.5% Unfavorable

Average Length of Stay by Type

July 2011

Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Adult Medical	5.42	5.40	5.60	0.02	0.4% ○	(0.18)	-3.2% ●
Adult Surgical	5.34	4.77	4.96	0.57	12.0% ●	0.38	7.6% ●
Adult Psych	11.22	11.24	11.59	(0.02)	-0.2% ○	(0.38)	-3.2% ●
Subtotal – Adult	5.72	5.47	5.68	0.25	4.5% ●	0.03	0.6% ○
Pediatric Medical	4.04	6.31	6.53	(2.27)	-36.0% ●	(2.49)	-38.2% ●
Pediatric Surgical	10.88	3.82	3.94	7.05	184.5% ●	6.93	175.7% ●
Pediatric Critical Care	25.39	21.88	22.57	3.51	16.1% ●	2.82	12.5% ●
Pediatric Psych	5.57	7.20	7.43	(1.63)	-22.6% ●	(1.86)	-25.0% ●
Subtotal – Pediatrics w/o newborn	8.02	9.14	9.46	(1.12)	-12.3% ●	(1.44)	-15.2% ●
Newborn	2.18	2.39	2.26	(0.21)	-8.8% ●	(0.19)	-3.0% ●
TOTAL w/o Newborn	6.08	6.03	6.27	0.05	0.8% ○	(0.19)	-3.0% ●

●	○	●
Greater than 2.5% Favorable	Neutral	Greater than 2.5% Unfavorable

Outpatient Surgeries – by Clinical Department

July 2011



Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Cardiothoracic	3	6	5	(3)	-46.3% ●	(2)	-40.0% ●
Dentistry	60	48	47	12	25.9% ●	13	27.7% ●
Dermatology	7	4	7	3	97.0% ●	-	0.0% ○
General Surgery	184	210	220	(26)	-12.2% ●	(36)	-16.4% ●
Gynecology	78	64	73	14	21.2% ●	5	6.8% ●
Internal Medicine	2	0	0	2	●	2	●
Neurosurgery	43	38	55	5	12.7% ●	(12)	-21.8% ●
Ophthalmology	264	273	283	(9)	-3.2% ●	(19)	-6.7% ●
Orthopedics	273	315	269	(42)	-13.3% ●	4	1.5% ○
Otolaryngology	210	201	199	9	4.7% ●	11	5.5% ●
Radiology – Interventional	1	3	3	(2)	-66.7% ●	(2)	-66.7% ●
Urology w/ Procedure Ste.	123	104	106	19	18.1% ●	17	16.0% ●
Total	1,248	1,264	1,267	(16)	-1.3% ○	(19)	-1.5% ○

●	○	●
Greater than 2.5% Favorable	Neutral	Greater than 2.5% Unfavorable

Inpatient Surgeries – by Clinical Department

July 2011

Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Cardiothoracic	112	95	98	17	17.3% ●	14	14.3% ●
Dentistry	13	11	12	2	22.6% ●	1	8.3% ●
General Surgery	267	275	245	(8)	-2.9% ●	22	9.0% ●
Gynecology	55	66	69	(11)	-17.1% ●	(14)	-20.3% ●
Neurosurgery	155	142	137	13	9.5% ●	18	13.1% ●
Ophthalmology	11	16	19	(5)	-32.2% ●	(8)	-42.1% ●
Orthopedics	185	236	243	(51)	-21.7% ●	(58)	-23.9% ●
Otolaryngology	55	64	59	(9)	-14.3% ●	(4)	-6.8% ●
Radiology – Interventional	6	9	7	(3)	-36.7% ●	(1)	-14.3% ●
Urology w/ Procedure Ste.	59	61	45	(2)	-2.8% ●	14	31.1% ●
Total	918	976	934	(58)	-5.9% ●	(16)	-1.7% ○

●	○	●
Greater than 2.5% Favorable	Neutral	Greater than 2.5% Unfavorable

Emergency Treatment Center

July 2011

Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
ETC Visits	5,282	4,847	4,722	435	9.0% ●	560	11.9% ●
ETC Admits	1,419	1,323	1,277	96	7.2% ●	142	11.1% ●
Conversion Factor	26.9%	27.3%	27.0%		-1.6% ○		-0.7% ○
ETC Admits / Total Admits	54.9%	50.5%	49.1%		8.8% ●		11.9% ●

●	○	●
Greater than 2.5% Favorable	Neutral	Greater than 2.5% Unfavorable

Clinic Visits by Clinical Department

July 2011

Operating Review (YTD)	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget		Variance to Prior Year	% Variance to Prior Year	
Anesthesia	1,059	1,295	1,334	(236)	-18.2%	●	(275)	-20.6%	●
CDD	652	661	646	(9)	-1.4%	○	6	0.9%	○
Clinical Research	1,013	903	978	110	12.2%	●	35	3.6%	●
Dermatology	1,890	2,625	2,026	(735)	-28.0%	●	(136)	-6.7%	●
ETC	5,278	4,847	4,722	431	8.9%	●	556	11.8%	●
Employee Health Clinic	1,487	1,442	1,321	45	3.1%	●	166	12.6%	●
Family Care Center	6,908	8,548	6,949	(1,640)	-19.2%	●	(41)	-0.6%	○
General Surgery	2,047	2,040	2,175	7	0.3%	○	(128)	-5.9%	●
Heart and Vascular	3,009	3,201	2,990	(192)	-6.0%	●	19	0.6%	○
Hospital Dentistry	1,328	1,072	1,095	256	23.9%	●	233	21.3%	●
Internal Medicine	8,872	9,126	8,439	(254)	-2.8%	●	433	5.1%	●
Neurology	1,383	1,450	1,278	(67)	-4.6%	●	105	8.2%	●
Neurosurgery	675	773	749	(98)	-12.7%	●	(74)	-9.9%	●
Obstetrics/Gynecology	6,211	6,498	6,443	(287)	-4.4%	●	(232)	-3.6%	●
Ophthalmology	5,459	5,915	5,872	(456)	-7.7%	●	(413)	-7.0%	●
Orthopedics	4,646	5,141	4,770	(495)	-9.6%	●	(124)	-2.6%	●
Otolaryngology	2,388	2,416	2,294	(28)	-1.2%	○	94	4.1%	●
Pediatrics	3,642	3,768	3,852	(126)	-3.3%	●	(210)	-5.5%	●
Primary Care Clinic North	1,442	1,863	1,540	(421)	-22.6%	●	(98)	-6.4%	●
Psychiatry	3,037	3,622	3,469	(585)	-16.1%	●	(432)	-12.5%	●
Urology	1,320	1,337	1,267	(17)	-1.3%	○	53	4.2%	●
Other	137	49	139	88	178.2%	●	(2)	-1.4%	○
Total	63,883	68,593	64,348	(4,710)	-6.9%	●	(465)	-0.7%	○



Greater than 2.5% Favorable

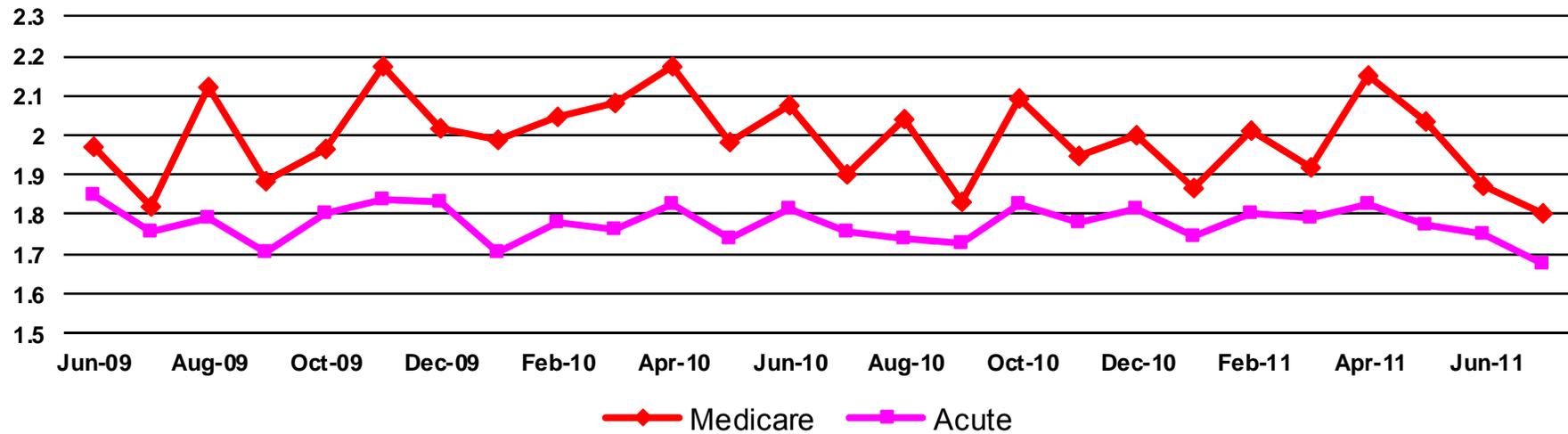


Neutral



Greater than 2.5% Unfavorable

Case Mix Index



UIHC Comparative Financial Results

July 2011



Dollars in Thousands

NET REVENUES:	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Patient Revenue	\$83,174	\$86,864	\$79,279	(\$3,690)	-4.2%	\$3,895	4.9%
Other Operating Revenue	3,882	4,003	3,689	(121)	-3.0%	193	5.2%
Total Revenue	\$87,056	\$90,867	\$82,968	\$3,811	-4.2%	\$4,088	4.9%

EXPENSES:

Salaries and Wages	\$44,793	\$46,653	\$39,597	(\$1,860)	-4.0%	\$5,197	13.1%
General Expenses	35,491	35,495	33,876	(4)	0.0%	1,615	4.8%
Operating Expense before Capital	\$80,284	\$82,148	\$73,473	(\$1,864)	-2.3%	\$6,811	9.3%
Cash Flow Operating Margin	\$6,772	\$8,719	\$9,495	(\$1,947)	-22.3%	(\$2,723)	-28.7%
Capital- Depreciation and Amortization	5,581	5,624	5,740	(43)	-0.8%	(160)	-2.8%
Total Operating Expense	\$85,865	\$87,772	\$79,213	(\$1,907)	-2.2%	\$6,652	8.4%

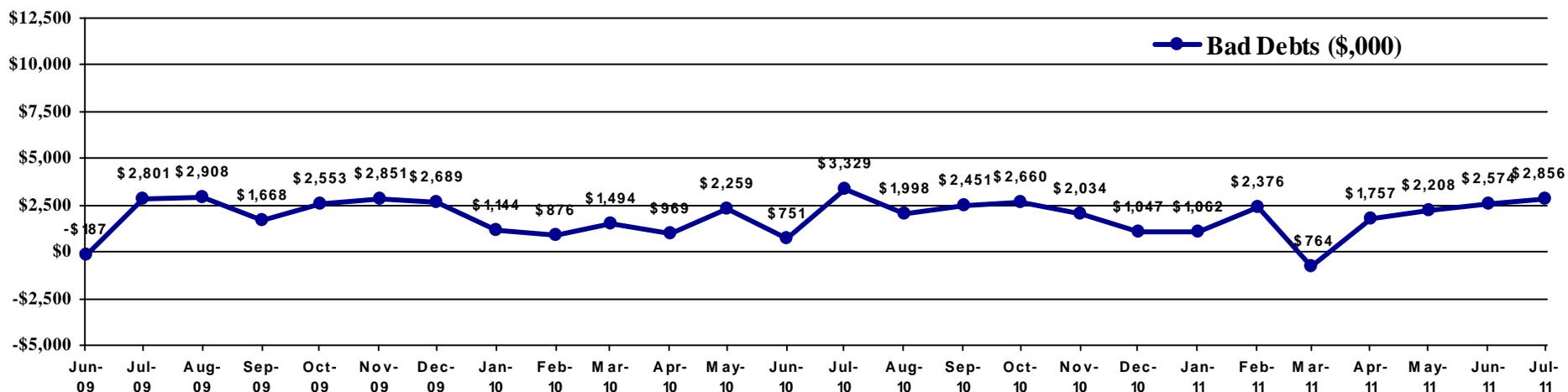
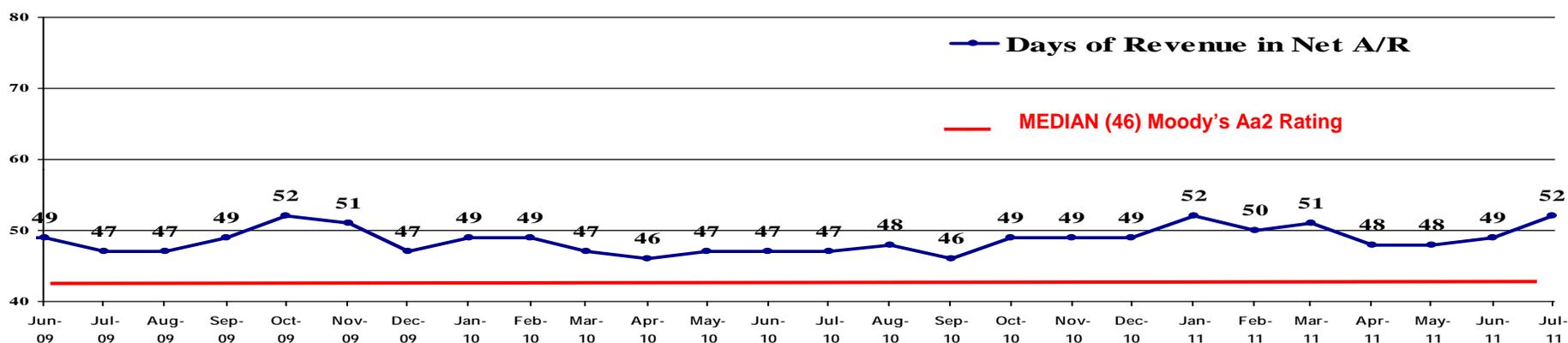
Operating Income	\$1,191	\$3,095	\$3,754	(\$1,903)	-61.5%	(\$2,563)	-68.3%
Operating Margin %	1.4%	3.4%	4.5%		-2.0%		-3.1%
Gain (Loss) on Investments	2,293	1,831	7,789	463	25.3%	(5,495)	-70.6%
Other Non-Operating	(248)	(437)	(298)	189	-43.2%	50	-16.6%
Net Income	\$3,236	\$4,488	\$11,245	(\$1,252)	-27.9%	(\$8,009)	-71.2%
Net Margin %	3.6%	4.9%	12.4%		-1.2%		-8.8%

Comparative Accounts Receivable

at July 31, 2011



	June 30, 2010	June 30, 2011	July 31, 2011
Net Accounts Receivable	\$117,737,680	\$136,477,870	\$143,520,078
Net Days in AR	47	49	52



Benchmarking our Performance



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List of UHC Comparison Hospitals



<u>Hospital Name</u>	<u>City</u>	<u>State</u>
Barnes-Jewish Hospital	St. Louis	Missouri
Baystate Medical Center	Springfield	Massachusetts
Brigham & Women's Hospital	Boston	Massachusetts
Cedars-Sinai Medical Center	Los Angeles	California
Emory University Hospital Midtown	Atlanta	Georgia
Denver Health	Denver	Colorado
Duke University Medical Center	Durham	North Carolina
Emory University Hospital	Atlanta	Georgia
Froedtert Hospital (& Medical College of Wisconsin)	Milwaukee	Wisconsin
Georgetown University Hospital	Washington, D.C.	
Greenville Memorial Hospital	Greenville	South Carolina
Harborview Medical Center (University of Washington Medical Center)	Seattle	Washington
Howard University Hospital	Washington, D.C.	
Johns Hopkins Hospital	Baltimore	Maryland
Loyola University Medical Center	Chicago	Illinois
Massachusetts General Hospital	Boston	Massachusetts
Medical College of Georgia	Augusta	Georgia
Medical University of South Carolina	Charleston	South Carolina
The Methodist Hospital System	Houston	Texas
Penn State Milton S. Hershey Medical Center	Hershey	Pennsylvania
New York University Langone Medical Center	New York	New York
Oregon Health & Science University	Portland	Oregon
The Ohio State University Medical Center	Columbus	Ohio
Parkland Health & Hospital System	Dallas	Texas
Pitt County Memorial Hospital	Greenville	North Carolina
Rush University Medical Center	Chicago	Illinois
Shands Jacksonville	Jacksonville	Florida
Shands at the University of Florida	Gainesville	Florida
St. Luke's Episcopal Hospital	Houston	Texas
University of Minnesota Medical Center, Fairview	Minneapolis	Minnesota
NewYork-Presbyterian Hospital	New York	New York
Stony Brook University Medical Center	Stony Brook	New York

<u>Hospital Name</u>	<u>City</u>	<u>State</u>
State University of New York Upstate Medical University	Syracuse	New York
Thomas Jefferson University Hospital	Philadelphia	Pennsylvania
University of Illinois Medical Center at Chicago	Chicago	Illinois
University of Kentucky Hospital	Lexington	Kentucky
University of Missouri Hospital and Clinics	Columbia	Missouri
University of New Mexico Hospital	Albuquerque	New Mexico
Hospital of the University of Pennsylvania	Philadelphia	Pennsylvania
University of Alabama at Birmingham Hospital	Birmingham	Alabama
University of Arkansas for Medical Sciences (UAMS) Medical Center	Little Rock	Arkansas
UC Davis Medical Center	Sacramento	California
UC San Diego Medical Center	San Diego	California
UC San Francisco	San Francisco	California
University Medical Center	Tucson	Arizona
University of Chicago Medical Center	Chicago	Illinois
University of Colorado Hospital	Aurora	Colorado
University of Kansas	Kansas City	Kansas
University of Michigan Health System	Ann Arbor	Michigan
University of Mississippi Medical Center	Jackson	Mississippi
University of Toledo Medical Center	Toledo	Ohio
University of Utah Hospitals and Clinics	Salt Lake City	Utah
University of Virginia Health System	Charlottesville	Virginia
University of Wisconsin Hospital and Clinics	Madison	Wisconsin
University of Louisville	Louisville	Kentucky
University of Connecticut John Dempsey	Farmington	Connecticut
Vanderbilt	Nashville	Tennessee
Vanderbilt University Hospital	Nashville	Tennessee
Virginia Commonwealth University Health System	Richmond	Virginia
Wake Forest University Baptist Medical Center	Winston Salem	North Carolina
Washington Hospital Center	Washington, D.C.	
West Virginia University Hospitals	Morgantown	West Virginia
Wishard Health Services	Indianapolis	Indiana
William Beaumont Hospital	Royal Oak	Michigan

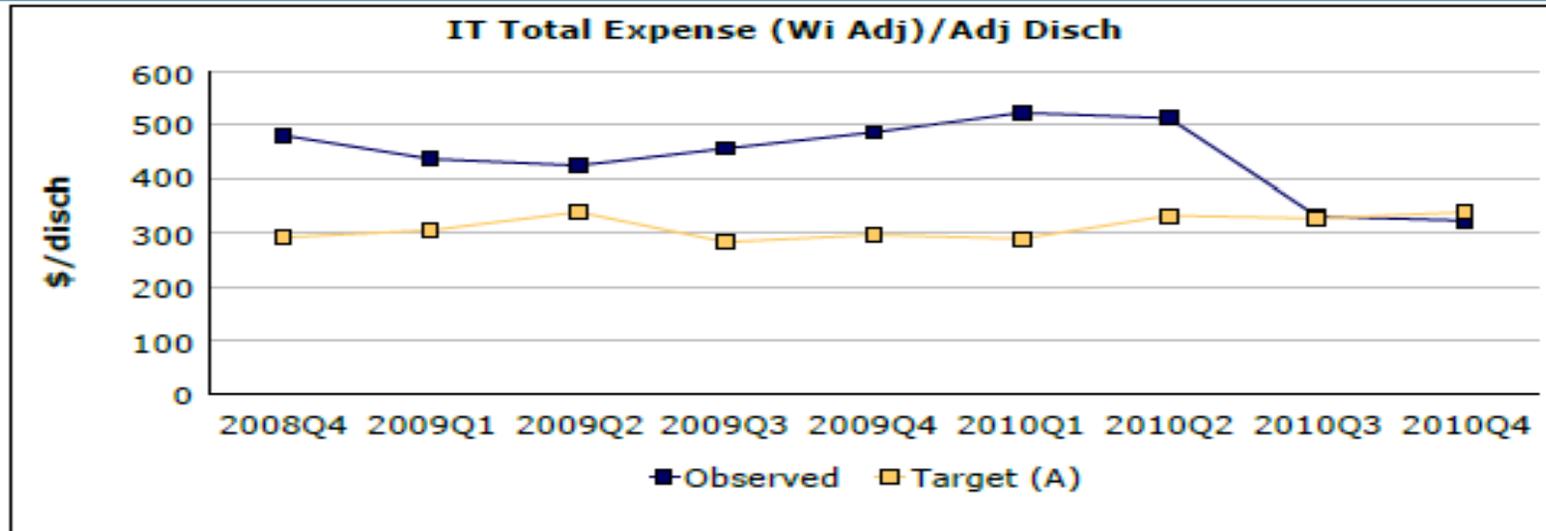
Department Specific Benchmarking

Department Specific-ODB		Performance	Rank
Surgical Services Total Expense (WI Adj)/Case	(\$/case)		22/ 57
IT Total Expense (Wi Adj)/Adj Disch	(\$/disch)		10/ 43
Laboratory Services (Clinical Operation) Total Expense (WI Adj)/CMI-Weighted Lab Adjusted Disch	(\$/disch)		31/ 58
Facilities Operations Total Expense (WI Adj)/1000 Gross Sq Ft Maintained	(\$/1000 sq ft)		23/ 55
Fiscal Services Total Expense (WI Adj)/Adj Disch	(\$/disch)		15/ 64
Materials Management Total Expense (WI Adj)/Adj Disch	(\$/disch)		1/ 62
IP Nursing Total Exp (WI Adj)/CMI-Adj Equiv Pat Day	(\$/equiv day)		4/ 48
IP Pharm Total Expense AWI Adj per PIS Wgtd Disch	(\$/disch)		20/ 50
Food and Nutritional Services Total Expense (WI Adj)/ART Meal Equivalent	(\$/meal equiv)		15/ 40
Imaging Total Expense (WI Adj)/Amb Pay Class	(\$/APC)		4/ 52
Cardiology Total Expense (WI Adj)/Amb Pay Class	(\$/APC)		2/ 52
ED Total Expense (WI Adj)/Visit	(\$/visit)		3/ 64

Legend	
	Substantially Worse than Target Range
	Worse than Target Range
	Within Target Range
	Substantially Better than Target Range
	No Data From Your Institution
	Outlier

IT Total Expense

(Wage Index Adjusted)/Adjusted Discharge

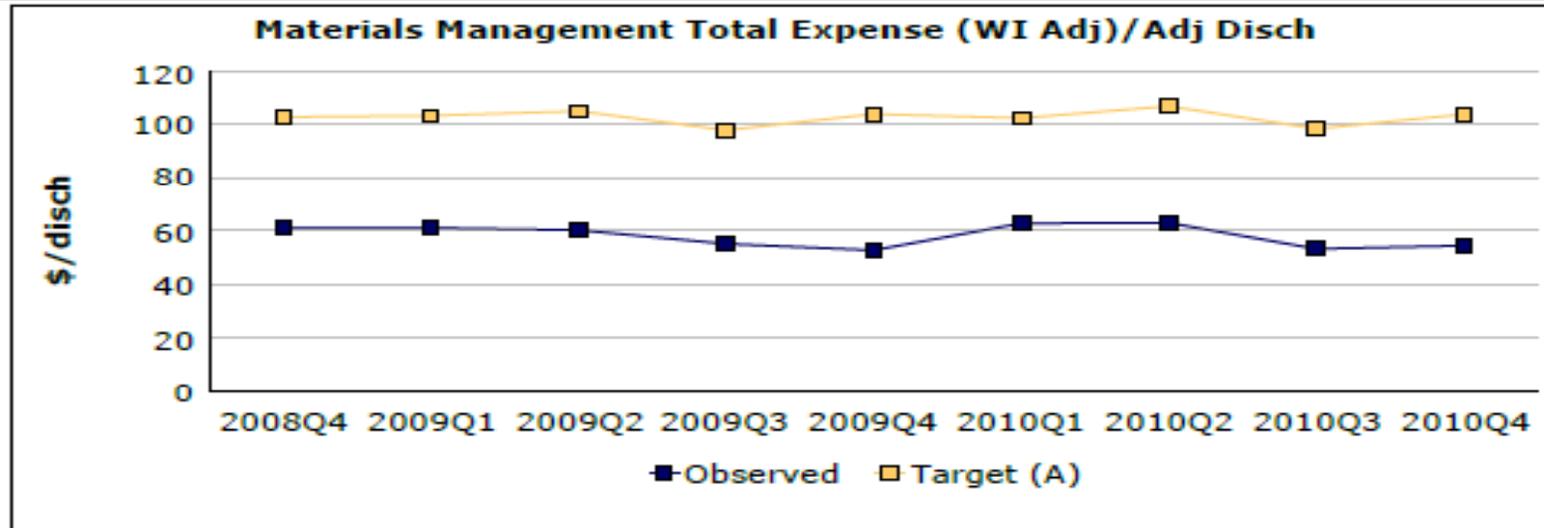


Current Quarter UHC Top 10 in This Metric	IT Tot Exp/Adj Disch	IT Labor Exp/Adj Disch	IT Other Direct Exp/Adj Disch	IT Exp as % Hosp Op Exp	Maintain Fully Op Electronic Med Rec
WASHDCHOSP	110.07	⊙⊙	⊙⊙	0.64	
TOLEDO	124.31	⊙	⊙⊙	0.94	
SHANDS_JACKSONVILLE	198.98	⊙	⊙⊙	1.46	
UCSD	229.79	⊙	⊙⊙	1.42	Y
TJEFFERSON	232.67	⊙	⊙	1.20	Y
COLORADO	300.95	⊙	⊙	1.77	Y
WESTVIRGINIA	304.17	⊙	⊙⊙	1.90	Y
MCLWEST	312.55	⊙⊙		1.72	
ARIZONA	317.91	⊙	⊙	2.41	Y
IOWA	323.61	⊙	⊙	1.84	Y

Definition - IT Total Expense (WI Adj)/Adj Disch

Information Technology Total Expense (Wage Index Adjusted)/Adjusted Discharge. From the Information Technology department. Does not include the expense for physicians, residents, and interns on the hospital payroll as well as physician/provider professional fee expense. The target is the UHC 25th percentile.

Materials Management Total Expense (Wage Index Adjusted)/Adjusted Discharge



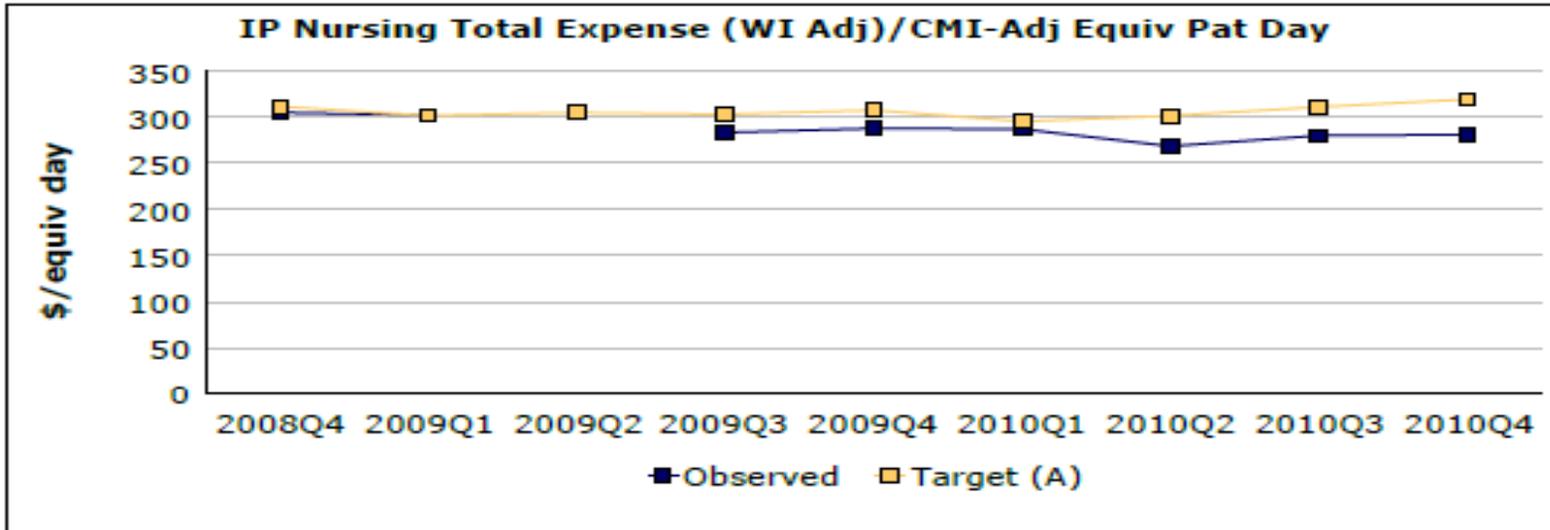
Current Quarter UHC Top 10 in This Metric	Mat Mgmt Tot Exp/Adj Disch	Mat Mgmt Labor Exp/Adj Disch	Mat Mgmt Other Exp/Adj Disch	Sup Exp less Drugs % Net Oper Rev	Sup Exp less Drugs/CMI Adj Disch
IOWA	54	⊙	⊙⊙	⊙⊙	⊙
MARYLAND	58	⊙⊙	⊙	⊙⊙	
LOUISIANA	59	⊙	⊙	⊙	⊙⊙
UTMB-HEALTH	59	⊙	⊙⊙	⊙⊙	⊙⊙
BEAUMONT-ROYALOK	63	⊙⊙	⊙	⊙⊙	⊙⊙
RWJOHNSON	70	⊙	⊙	⊙⊙	
WISCONSIN	72	⊙	⊙	⊙⊙	⊙
PARKLAND	80	⊙	⊙	⊙⊙	⊙
ARIZONA	81	⊙	⊙	⊙⊙	
DENHEALTH	82	⊙	⊙	⊙	⊙⊙

Definition - Materials Management Total Expense (WI Adj)/Adj Disch

Materials Management Total Expense (Wage Index Adjusted)/Adjusted Discharge. From the Materials Management functional roll-up. Does not include the expense for physicians, residents, and interns on the hospital payroll as well as physician/provider professional fee expense. The target is the UHC 25th percentile.

IP Nursing Total Expense

(Wage Index Adjusted)/Adjusted Discharge



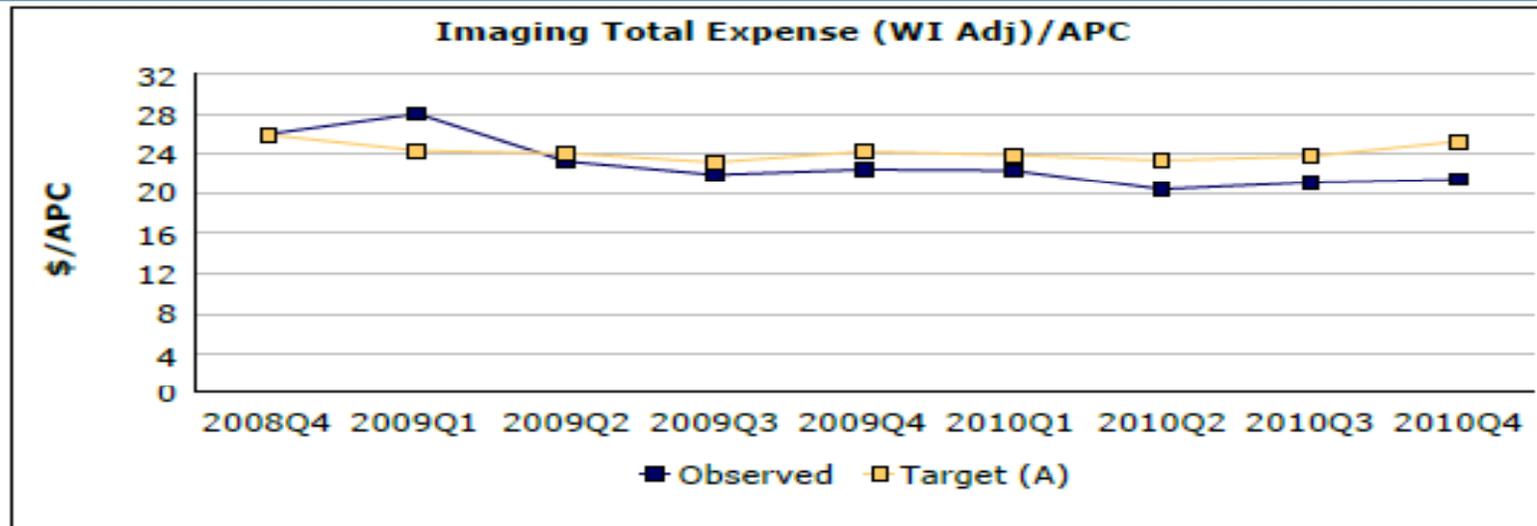
Current Quarter UHC Top 10 in This Metric	IP Nurse Tot Exp/CMI-Adj Equiv Pat Day	IP Nurse Labor Exp/Equiv Pat Day	IP Nurse Med Sup Exp/Equiv Pat Day	LOS O/E Ratio
EMORY	263	⊙⊙	⊘	⊙⊙
WAKEBAPTIST	267	⊙⊙	⊙⊙	⊙
UTAH	279	⊙⊙	⊙⊙	⊙
IOWA	280	⊙⊙	⊙⊙	
TJEFFERSON	286	⊙⊙	⊘	
STLUKEHOUSTON	290	⊙	⊘	
BEAUMONT-ROYALLOAK	300	⊙	⊙⊙	⊙
SHANDS_JACKSONVILLE	301	⊙	⊙	⊙
ARKANSAS	311	⊙	⊘	⊙
TOLEDO	312	⊙	⊙⊙	⊙

Definition - IP Nursing Total Expense (WI Adj)/CMI-Adj Equiv Pat Day

Inpatient Nursing Total Expense (Wage Index Adjusted)/ CMI-Adjusted Equivalent Patient Day. From the Inpatient Nursing functional roll-up. Does not include the expense for physicians, residents, and interns on the hospital payroll as well as physician/provider professional fee expense. The target is the UHC 25th percentile.

Imaging Total Expense

(Wage Index Adjusted)/Adjusted Discharge



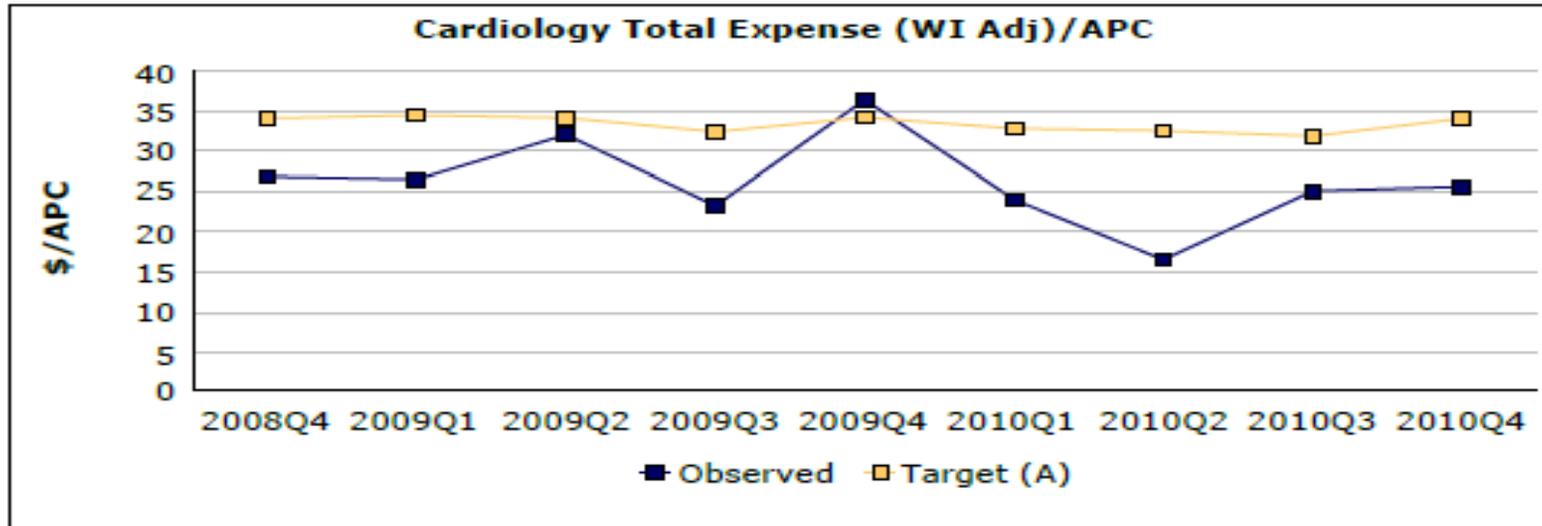
Current Quarter UHC Top 10 in This Metric	Imaging Tot Exp/APC	Imaging Labor Exp/APC	Imaging Med Sup Exp/APC	Tot Exp/Adj Disch	IP Proc/Disch
DENHEALTH	18.8	⊙⊙	⊙	⊙⊙	2.8
ARKANSAS	19.4	⊙⊙	⊙	⊙⊙	3.8
STONYBROOK	19.7	⊙	⊙	⊙⊙	3.9
IOWA	21.4	⊙	⊙	⊙⊙	3.9
BEAUMONT-ROYALOK	21.6	⊙	⊙	⊙⊙	3.3
UKCHANDLER	22.5	⊙⊙	⊙	⊙	⊙
VANDERBILT	22.5	⊙	⊙	⊙	4.5
TJEFFERSON	22.7		⊙	⊙	4.4
PARKLAND	23.4		⊙	⊙	3.2
ARIZONA	23.5		⊙	⊙	3.6

Definition - Imaging Total Expense (WI Adj)/APC

Imaging Total Expense (Wage Index Adjusted)/APC. From the Imaging functional roll-up. Does not include the expense for physicians, residents, and interns on the hospital payroll as well as physician/provider professional fee expense. The target is the UHC 25th percentile.

Cardiology Total Expense

(Wage Index Adjusted)/Adjusted Discharge

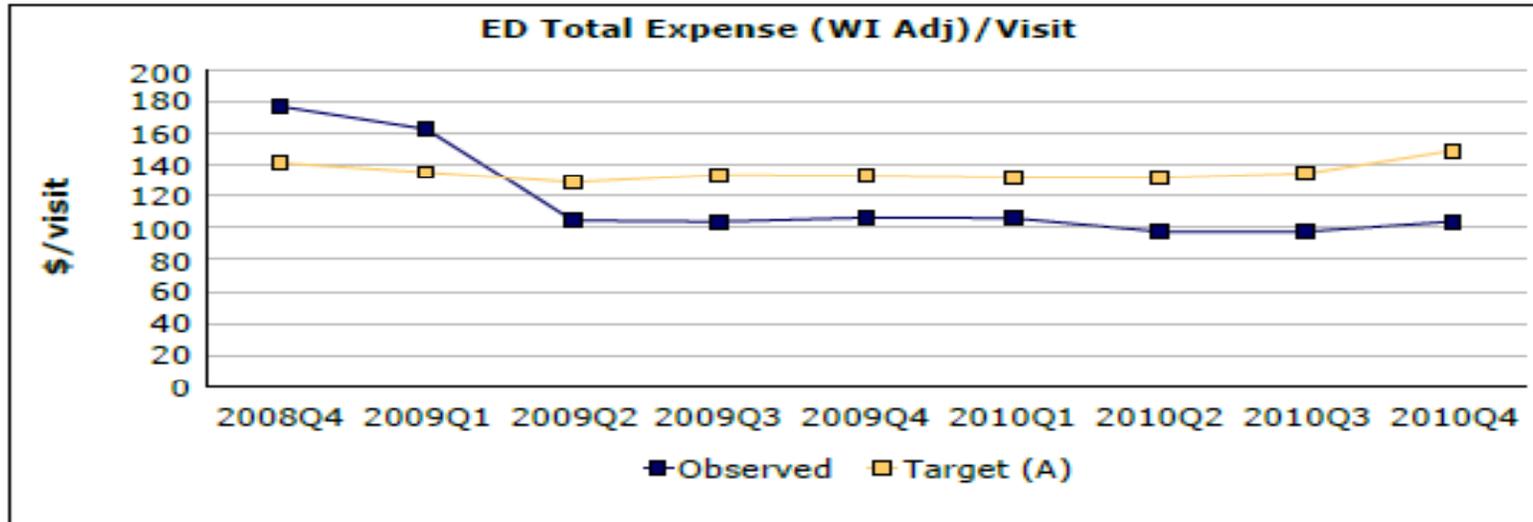


Current Quarter UHC Top 10 in This Metric	Cardio Tot Exp/APC	Supply Exp Excl Drugs/CMI Adj-Dischg	Supply Exp Excl CMI Adj-Dischg	Supply Exp Excl Drugs/Net Op Rev
MISSOURI	24.6	⊙	⊙	⊙⊙
IOWA	25.6	⊙	⊙	⊙⊙
LOUISVILLE	27.2	⊙	⊙	⊙⊙
MINNESOTA	29.2			⊙⊙
LOUISIANA	30.5	⊙⊙	⊙	⊙
SHANDS_JACKSONVILLE	30.7	⊙⊙	⊙⊙	⊙⊙
WISCONSIN	31.3	⊙		⊙⊙
WAKEBAPTIST	31.9	⊙	⊙	⊙⊙
SHANDS_UF	32.1		⊙	⊙⊙
MISSISSIPPI	32.3	⊙	⊙	⊙⊙

Definition - Cardiology Total Expense (WI Adj)/APC
 Cardiology Total Expense (Wage Index Adjusted)/APC. From the Cardiology functional roll-up. Does not include the expense for physicians, residents, and interns on the hospital payroll as well as physician/provider professional fee expense. The target is the UHC 25th percentile.

ED Total Expense

(Wage Index Adjusted)/Adjusted Discharge



Current Quarter UHC Top 10 in This Metric	ED Tot Exp/Visit	ED Labor Exp/Visit	ED Sup Exp/Visit	ED LOS	Walkout Rate
PARKLAND	90	⊙⊙	⊙⊙	⊖	⊖
FLETCHER	97	⊙⊙	⊙⊙	⊖	⊖
IOWA	104	⊙⊙	⊙	⊙⊙	⊖
WESTVIRGINIA	112	⊙⊙	⊙	⊙	⊙⊙
ECAROLINA	119	⊙⊙	⊙	⊙⊙	⊙
WAKEBAPTIST	123	⊙⊙	⊙⊙	⊙⊙	⊙
ARKANSAS	124	⊙⊙	⊙	⊙	
HOWARD	133	⊙	⊙⊙	⊖	
EMORY_MIDTOWN	139	⊙	⊙	⊖	⊖
UNIVHOSP-UMDNJ	139	⊙	⊙	⊖	

Definition - ED Total Expense (WI Adj)/Visit
Emergency Department Total Expense (Wage Index Adjusted)/Visit. Does not include the expense for physicians, residents, and interns on the hospital payroll as well as physician/provider professional fee expense. The target is the UHC 25th percentile.



UI Health Care Strategic Plan Update

Jean Robillard, MD
Vice President for Medical Affairs

UI Health Care Strategic Plan



UI Health Care Strategic Plan - FY 2010-2012 (reviewed and updated July 2010)



Mission

Changing Medicine. Changing Lives.

Vision

World Class People. World Class Medicine. For Iowa and the World.

Values

I CARE. Innovation, Collaboration, Accountability, Respect, Excellence.

Clinical Quality & Service Goal	Research Goal	Education Goal	People Goal	Diversity Goal	Growth and Finance Goal
Provide world class healthcare and service to optimize health for everyone.	Advance world class discovery through excellence and innovation in biomedical and health services research.	Develop world class health professionals and scientists through excellent, innovative and humanistic educational curricula for learners at every stage.	Foster a culture of excellence that values, engages and enables our workforce.	Create an environment of inclusion where individual differences are respected and all feel welcome.	Optimize a performance-driven business model that assures financial success.
Accountable Leaders	Accountable Leaders	Accountable Leaders	Accountable Leaders	Accountable Leaders	Accountable Leaders
Ken Kates & Craig Syrop	Paul Rothman Michael Apicella, Pat Winokur, Gery Rosenthal	Paul Rothman Peter Densen, Mark Wilson, Christopher Cooper, LouAnn Montgomery	Jana Wessels Ann Williamson	Benita Wolff All Other Accountable Leaders	Ken Fisher, Ken Kates, Paul Rothman Kevin Collins
Strategies	Strategies	Strategies	Strategies	Strategies	Strategies
<ul style="list-style-type: none"> Lead efforts to improve health, access, quality and reduce fragmentation in the health care delivery system in collaboration with other health sciences colleges and community partners. Ensure that clinical services are provided with a seamless, integrated and patient-centered focus. Maximize current operational efficiency and expand clinical capacity to address immediate and long-term needs. Implement business plans for programmatic priorities: <ul style="list-style-type: none"> Cancer Children's Services Heart and Vascular Neurosciences Transplant Women's Health Other emerging areas of clinical focus, including aging and age-related diseases. Develop processes to effectively implement evidence-based quality and safety initiatives. Lead efforts to ensure that all UI Health Care clinicians receive appropriate professional training on culturally competent care. 	<ul style="list-style-type: none"> Identify areas of excellence in basic research in which to prioritize future growth and development. Integrate genomics with clinical care. Expand existing research that disseminates and implements evidence-based practices into routine clinical practice settings. Improve and grow scientific infrastructure. Expand existing 'bench to bedside to community' research (CTSA). Promote development of new clinical and translational research programs that are strategically aligned with clinical programmatic priorities. Nurture the development of high quality, high reward interdisciplinary scientific programs. Recruit, develop, and retain a diverse cadre of world class investigators and support their academic development. Collaborate with other UI Colleges and CTSA Consortium. 	<ul style="list-style-type: none"> Recruit, develop and retain diverse world class faculty and students. Continue the evolution of an innovative curriculum through competency and evidence-based learning across a continuum of undergraduate, graduate and continuing medical education. Limit medical student debt. Recognize and reward excellence in teaching. Cultivate critical thinking, an environment of curiosity and life-long learning, a spirit of inquiry, a passion for excellence. Implement cultural competency and related diversity educational initiatives into the curriculum for all trainees. Develop world class international medical educational programs in targeted areas. Utilize interdisciplinary education in collaboration with other health sciences colleges to train health professionals and instill a team approach to patient care. Continue to play a key role in training allied health professionals for Iowa. Facilitate learning through the innovative application of information technologies. 	<ul style="list-style-type: none"> Seek, hire and retain outstanding people including individuals from groups traditionally under-represented in academic medicine. Ensure that all UI Health Care employees receive appropriate training regarding UI Health Care diversity goals and values. Engage staff and encourage strong personal responsibility, accountability and empowerment directed toward achieving organizational goals. Define performance expectations for all. Develop and promote programs that recognize and reward excellence. Foster an environment of continual learning, innovation and collaboration. 	<ul style="list-style-type: none"> Provide a range of diversity education, cultural enrichment and accreditation programs for members of the UI Health Care community. Develop and implement innovative, effective recruiting and pipeline initiatives geared towards under-represented groups. Nurture a culture of respect and equal opportunity. Each Accountable Leader will advance diversity in each strategy. 	<ul style="list-style-type: none"> Ensure a sound financial position of clinical programs. Grow in scope, depth and volume in clinical programmatic priority areas. Assure a sound financial position of non-clinical programs. Devote appropriate resources, facilities and equipment to assure the success of clinical, education and research strategies. Develop a culture of philanthropy.
Tactics	Tactics	Tactics	Tactics	Tactics	Tactics
<ul style="list-style-type: none"> Develop effective, collaborative relationships with local communities using outreach, telemedicine and other tactics. Develop and implement UI Service and Operational Excellence. Fully implement the Quality and Safety work plans in process. Integrate residents and fellows into UI Service and Operational Excellence and Quality and Safety initiatives. Decrease length of stay. Continue the work of the OR Efficiency task force. Continue to develop and refine the Transfer Center. Improve efficiency and access in Ambulatory Care Clinics. Fully integrate Medical Directors into the clinical operations. Develop and implement performance-based, medical home model of primary care for targeted populations. Explore becoming an Accountable Care Organization. 	<ul style="list-style-type: none"> Flex/Build the Pappagh Biomedical Institute. Renovate lab space in Medical Laboratories. Utilize existing open space at Outdale for incubation. Focus DEO recruits and resources on Strategic Priorities: Cancer, Heart, Neuroscience and Health Service Outcomes. Develop and implement FUTURE Program. Improve Bioinformatics and IT infrastructure. Implement integrated DNA, blood and tissue procurement system. Initiate Neurosciences Institute. Facilitate collaboration between basic scientists and clinicians for submission of PHSI transitional grants. Improve infrastructure for human subjects research. 	<ul style="list-style-type: none"> Increase scholarships. Improve integration of UGME, OSCP, GME and OME. Develop and deliver an excellent educational experience to residents and fellows. Implement annual review/retirements with departments. Respond to LIME and ACGME accreditation recommendations for residency and fellowship programs. Consider strategic affiliations with international medical education programs. Develop and implement FUTURE Program. Continue development of the Branch Campus. Evaluate the potential to increase medical school class size and allied health programs. Maintain diversity in each entering class, with particular focus on those groups under-represented in medicine. 	<ul style="list-style-type: none"> Develop plan and budget for Staff Climate/Satisfaction Survey. Develop and implement a unified rewards & recognition program. Develop and implement plan for state of the art recruiting and on-boarding processes. Continue bridging funding program for research faculty retention. 	<ul style="list-style-type: none"> Phase I of this approach is the implementation of the strategies articulated in the Diversity Plan for CCOM 2009-2012. Phase II Years 2011-2012: Develop plan for UHC and UIP focusing on opportunities identified in the baseline assessment. Exploit the development of a shared services office to lead enterprise-wide diversity efforts. 	<ul style="list-style-type: none"> Implement Cost Moderation plan. Implement tactical business plans for clinical programmatic priority areas. Plan/build off-site ambulatory care facilities. Plan/build UI Children's Hospital. Plan/build/renovate main campus facilities resulting in all private rooms. Develop and implement CARTS model. Reorganize administrative structures in CCOM. Focus finances on strategic priorities. Develop unified clinical incentive plan. Expand the philanthropic base.
Resources and Processes	Resources and Processes	Resources and Processes	Resources and Processes	Resources and Processes	Resources and Processes
<ul style="list-style-type: none"> Continue to develop the full capabilities of Epic to facilitate quality/safety and enhance professional and consumer relationships, including UI Carolink and MyChart. Training and Development Marketing and Communications Policy and Practice changes 	<ul style="list-style-type: none"> Develop the full capabilities of Epic to facilitate innovation in research. Provide training and support for faculty and staff to incorporate translational research into clinical practice. 	<ul style="list-style-type: none"> Develop the full capabilities of Epic to facilitate education. Provide training and support for "learners" to understand and implement patient-centered care and services. 	<ul style="list-style-type: none"> Training and Development Communications Policy and Practice changes 	<ul style="list-style-type: none"> Support for Diversity programs, services and activities 	<ul style="list-style-type: none"> Data-driven business planning Robust financial and performance-reporting systems
Metrics	Metrics	Metrics	Metrics	Metrics	Metrics
<ul style="list-style-type: none"> Patient and Referring Physician Satisfaction Inpatient and Outpatient Throughput Length of stay, most third available outpatient appointments Main OR site status, number of OR cases per room Evidence-based quality metrics JCAHO/CMS Core measures Ventilator Associated Pneumonia & Central Line Blood Stream Infection rates Medication errors that cause harm Satisfaction of Critical Access Hospital and Outreach partners Performance measures for patient-centered care for targeted populations 	<ul style="list-style-type: none"> Number and dollar amount of extramurally funded projects Number and dollar amount of clinical trials Number and dollar amount of program project and other collaborative grants Recruitment and retention of a diverse faculty as measured by annual demographic data on the composition of UI Health Care faculty Increase in "optimal" rankings for the diversity recruitment and retention plan on NIH grant reviews Number of patents, royalties, licensing agreements Research revenue per net square foot Percent of faculty salaries offset by grant support 	<ul style="list-style-type: none"> # of hours/faculty devoted to education efforts as logged in participation database Applications, admissions, and yield including increased GPA and MCAT scores and diversity of applicants and admitted students USMLE scores Match results, all available CCOM slots filled Student evaluations of curriculum and instruction to include residents and fellows % increase in annual student debt compared to national benchmarks and prior year Placements of graduates, short term and long term National rankings of graduate programs and professional schools Success in student diversity retention initiatives Increase in positive data from OSAC-commissioned minority focus groups 	<ul style="list-style-type: none"> Faculty and staff engagement, satisfaction and loyalty Success in retention initiatives measured by demographic data on the composition of our new/faculty, staff, administrators by department, with measures of turnover by gender, age, race/ethnicity, educational achievement and other factors USMLE scores Match results, all available CCOM slots filled Student evaluations of curriculum and instruction to include residents and fellows % increase in annual student debt compared to national benchmarks and prior year Placements of graduates, short term and long term National rankings of graduate programs and professional schools Success in student diversity retention initiatives Increase in positive data from OSAC-commissioned minority focus groups 	<ul style="list-style-type: none"> Recruitment and retention of a diverse workforce/student population as measured by annual demographic data on the composition of UI Health Care students, residents, faculty, staff and post doctoral scholars Success in retention initiatives measured by demographic data on the composition of our new/faculty, staff, administrators by department, along with measures of turnover by gender and race/ethnicity Climate and diversity as measured by UI Health Care climate survey compared to other AAMCs Providers' ability to deliver culturally competent and sensitive patient care as measured by patient satisfaction surveys 	<ul style="list-style-type: none"> Volume for inpatient and outpatient services (total admissions, outpatient clinic visits, ETC visits and surgical cases) Volume for clinical programmatic priority areas Performance against fixed operating budget UHC and UIP operating margin % Facility projects on budget, on schedule CARTS model productivity factor Annual fundraising productivity Philanthropic goal of \$50MM by the end of fiscal year 2013 Comprehensive community benefit reporting Bond rating

Scorecard - Overall

UI Health Care Strategic Plan Scorecard	FY10 Actual	FY 11 Target	FY11 Actual YTD	vs. FY10	vs. Target
Overall					
Honor Roll for Best Hospitals by US News and World Report	Ranked in 10 specialties	Honor Roll	Ranked in 9 specialties		
Children's Hospitals by US News and World Report	Ranked in 3 specialties	Honor Roll	Ranked in 10 specialties		
Public Medical Schools ranking in Research by US News and World Report	10th	Top 10	9th		
Overall Medical School ranking in Research by US News and World Report	27th	Improve	26th		
Public Medical Schools Primary Care ranking by US News and World Report	10th	Top 10	9th		
Overall Medical Schools Primary Care ranking by US News and World Report	10th	Improve	10th		
NIH Funding among Public Medical Schools	12th	Top 10	Not yet available		
Moody's Bond Rating	Aa2 rated	Maintain Aa2	Aa2		

-  Better than
-  Less than
-  No change
-  Not yet available

Scorecard – Clinical Quality & Service

UI Health Care Strategic Plan Scorecard	FY10 Actual	FY 11 Target	FY11 Actual	vs. FY10	vs. Target
Clinical Quality and Service					
Patient Satisfaction: a) Adult b) Pediatric	a) 39 th percentile b) 38 th percentile	90 th percentile	a) 57 th percentile b) 69 th percentile (current quarter)	 	 
Surgery Care Improvement Project (SCIP) Antibiotic Timing, Selection & Discontinuation (appropriate antibiotic administration)	96%	98%	97% (FY11 Q1-Q2)		
Operating Room - first case on time starts (main OR)	90%	95%	92% (current quarter)		
Transfer Center - Avg. time from initial call to patient placement confirmation	91 minutes	120 minutes	91 minutes (current quarter)		

KEY

 Better than

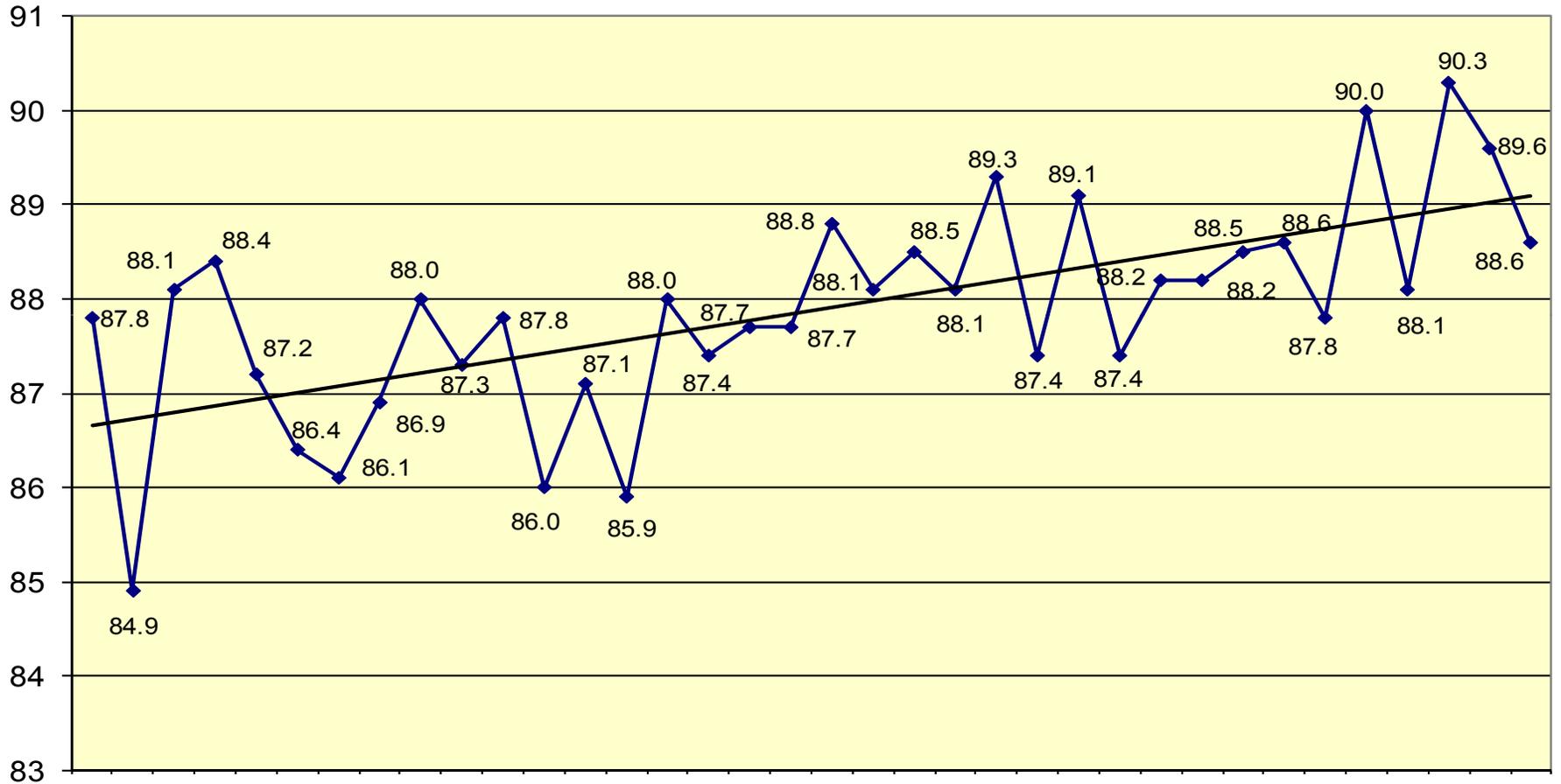
 Less than

 No change

 Not yet available

Patient Satisfaction – Adult Hospital

Adult Inpatient - Likelihood to Recommend

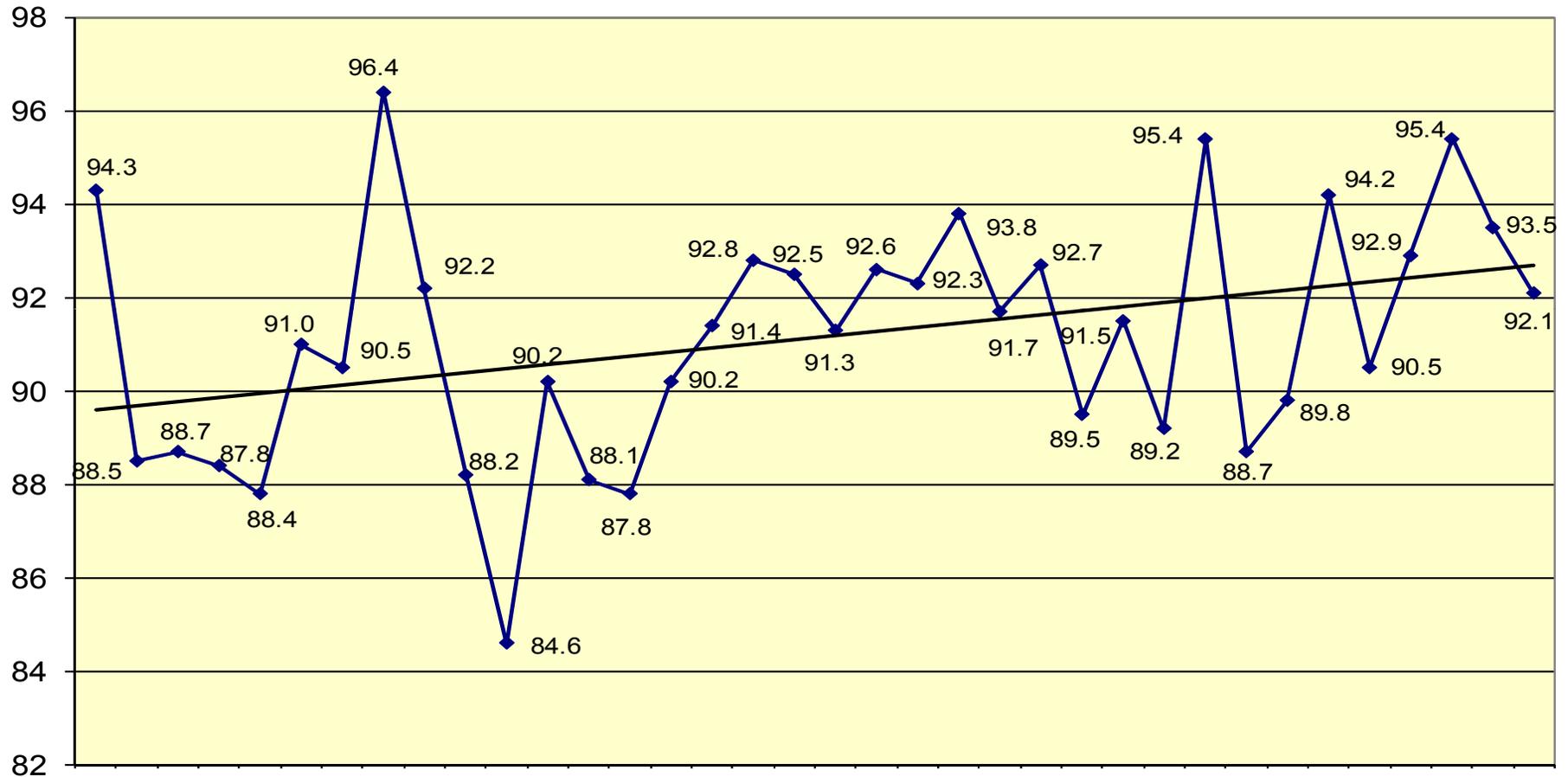


◆ Mean Score

Mean Score of 93.2 = 90th Percentile

Patient Satisfaction – Children’s Hospital

Pediatric Inpatient - Likelihood to Recommend



—●— Mean Score

Mean Score of 97.8 = 90th Percentile

Scorecard – Research

UI Health Care Strategic Plan Scorecard	FY10 Actual	FY 11 Target	FY11 Actual	vs. FY10	vs. Target
Research					
Number and dollar amount of extramurally funded projects	\$228.1M	5% increase	229.5M		
Research revenue per net square foot	\$488/NSF	Increase	\$496		
Percent of extramurally funded faculty research effort	25%	35%	25%		

KEY

 Better than

 Less than

 No change

 Not yet available

Scorecard – Education

UI Health Care Strategic Plan Scorecard	FY10 Actual	FY 11 Target	FY11 Actual YTD	vs. FY10	vs. Target
Education					
Increase applications for medical school	3,410	Increase applicants	3,555		
Mean MCAT scores: Verbal Reasoning, Physical Sciences, Biological Sciences, Writing Sample	32	Improve	33		
Increase GPA of accepted applicants	3.77	Improve	3.78		
Limit % increase in annual student debt compared to national benchmarks and prior year	UI Class of 2009 average \$136K; National average \$156K	Maintain below national average	UI Class of 2010 average \$136K; National average \$156K		

KEY

 Better than

 Less than

 No change

 Not yet available

Scorecard – People

UI Health Care Strategic Plan Scorecard	FY10 Actual	FY 11 Target	FY11 Actual YTD	vs. FY10	vs. Target
People					
Develop plan and budget for Staff Climate/Satisfaction Survey	In process	Develop plan in FY11 Budget in FY12	Plan developed, New direction adopted		
Develop and implement plan for improved recruiting and on-boarding processes	In process	Develop plan in FY11 Implement in FY12	In process		
Design and implement a unified program for reward and recognition	In process	Develop plan in FY11 Implement in FY12	Successful Completion		

KEY

-  Better than
-  No change

-  Less than
-  Not yet available

Scorecard – Diversity

UI Health Care Strategic Plan Scorecard	FY10 Actual	FY 11 Target	FY11 Actual YTD	vs. FY10	vs. Target
Diversity					
Recruitment and retention of a diverse workforce/student population as measured by annual demographic data on the composition of UI Health Care students, residents, faculty, staff and post doctoral scholars.	In process	Implement CCOM plan in FY11	CCOM plan completed		
Develop a structure to lead enterprise-wide diversity, respect and inclusion efforts to address increasingly diverse faculty, staff and patient populations.	In process	Develop plan in FY11	Leadership retreat held; Plan to develop detailed strategy in process		

KEY

 Better than

 Less than

 No change

 Not yet available

Scorecard – Growth and Finance

UI Health Care Strategic Plan Scorecard	FY10 Actual	FY 11 Target	FY11 Actual	vs. FY10	vs. Target
Growth and Finance					
Admissions (excl. Normal Newborn and OP Observation)	28,873	29,248	29,946		
UIHC Operating Margin %	2.9%	3.0%	5.92% prelim.		
UIP Operating Margin %	6.85%	2.9%	5.1% prelim.		
Outpatient Clinic Visits (including ETC and Hosp Dentistry)	753,823	787,435	778,789		
Surgical Cases (inpatient and outpatient)	24,272	24,468	25,736		
Philanthropic goal of \$500M by the end of FY 2013	\$78M	\$86M	\$81.3M		

KEY

 Better than

 Less than

 No change

 Not yet available

Scorecard – Overall – Targets for FY12

UI Health Care Strategic Plan Scorecard	FY11 Actual	FY 12 Target
Overall		
Honor Roll for Best Hospitals by US News and World Report	Ranked in 9 specialties	Honor Roll
Children's Hospitals by US News and World Report	Ranked in 10 specialties	Honor Roll
Public Medical Schools ranking in Research by US News and World Report	9th	Top 10
Overall Medical School ranking in Research by US News and World Report	26 th	Improve
Public Medical Schools Primary Care ranking by US News and World Report	9 th	Top 10
Overall Medical Schools Primary Care ranking by US News and World Report	10 th	Improve
NIH Funding among Public Medical Schools	12 th	Top 10
Moody's Bond Rating	Aa2 rated	Maintain Aa2

Scorecard – Clinical Quality & Service – FY12



UI Health Care Strategic Plan Scorecard	FY11 Actual	FY12 Target
Clinical Quality and Service		
Patient Satisfaction: a) Adult b) Pediatric c) Outpatient	a) 57 th percentile b) 69 th percentile c) 28 th percentile	90 th percentile
CMS Core Measure - Heart Failure Discharge Instructions	83% last reported quarter	>97%
Operating Room - first case on time starts (main OR)	92%	95%
Transfer Center - Avg. time from initial call to patient placement confirmation	91 minutes	90 minutes
Readmission Rate	12.5%	9.9%
Length of stay (observed/expected)	1.42	≤1.0

Scorecard – Research – FY12 Targets



UI Health Care Strategic Plan Scorecard	FY11 Actual	FY12 Target
Research		
Number and dollar amount of extramurally funded projects	\$229.5M	Maintain
Research revenue per net square foot	\$496	Maintain
Percent of extramurally funded faculty research effort	25%	Maintain

Scorecard – Education – FY12 Targets

UI Health Care Strategic Plan Scorecard	FY11 Actual	FY12 Target
Education		
Increase applications for medical school	3,555	Maintain
Mean MCAT scores: Verbal Reasoning, Physical Sciences, Biological Sciences, Writing Sample	33	Maintain
Increase GPA of accepted applicants	3.78	Maintain
Limit % increase in annual student debt compared to national benchmarks and prior year	UI Class of 2010 average \$136K; National average \$156K	Maintain below national average

Scorecard – People - FY 12 Targets

UI Health Care Strategic Plan Scorecard	FY11 Actual	FY12 Target
People		
Develop and implement plan for improved recruiting process	In process	Reduce time to hire
Develop and implement plan for improved on-boarding of staff	In process	100% of new staff will complete new orientation within 60 days of hire
Develop and deliver Service Excellence training to all staff	In process	Complete training for additional 4,000 staff members in FY12 (approx. half the workforce will then be trained)

Scorecard – Diversity – FY 12 Targets

UI Health Care Strategic Plan Scorecard	<u>FY11 Actual</u>	<u>FY12 Target</u>
Diversity		
Develop a structure to lead enterprise-wide diversity, respect and inclusion efforts to address increasingly diverse faculty, staff and patient populations.	Leadership retreat held; Plan to develop detailed strategy in process	Develop enterprise-wide structure; make significant progress in the plan
Recruit permanent Associate Dean for Cultural Affairs & Diversity in the CCOM	Interim leader appointed	Complete recruitment

Scorecard – Growth and Finance – FY12 Targets



UI Health Care Strategic Plan Scorecard	FY11 Actual	FY12 Target
Growth and Finance		
Admissions (excl. Normal Newborn and OP Observation)	29,946	30,003
UIHC Operating Margin %	5.92%	4.0%
UIP Operating Margin %	5.1%	2.8%
Outpatient Clinic Visits (including ETC and Hosp Dentistry)	778,789	868,771
Surgical Cases (inpatient and outpatient)	25,736	26,086
Philanthropic goal of \$500M by the end of FY 2013	\$81.26M	\$86M