

Presentation to The Board of Regents, State of Iowa | September 2023

University of Iowa Health Care

PRESENTATION TO THE BOARD OF REGENTS, STATE OF IOWA September 27-28, 2023

CHANGING MEDICINE.
CHANGING LIVES.®

Agenda

- University of Iowa Stead Family Children's Hospital Kid Captains
- Advancing Patient Care Through Clinical Trials
- Recognizing Excellence in Nursing at UIHC
- Financial Update

Opening Comments

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Denise Jamieson, MD, MPH

Vice President for Medical Affairs & Tyrone D. Artz Dean, Carver College of Medicine

University of Iowa Stead Family Children's Hospital Kid Captains

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Stead Family Children's Hospital Kid Captains





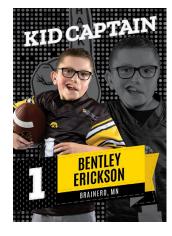




















Clinical Trials: Unique Expertise and Access to Care



Maggie Larson

Urbandale, Iowa

- Diagnosed with rare genetic disorder: metachromatic leukodystrophy (MLD)
- Short life expectancy and no treatment options
- Clinical trial has slowed the progression of the disease and provided improvements in her symptoms and quality of life



Gabby Ford

Fairfield, Iowa

- Diagnosed with brain tumor: hypothalamic pilocytic astrocytoma
- After surgery and chemotherapy treatments, tumor growth continued
- Clinical trial provided a new investigational drug—called DAY101—which has decreased the tumor's size



Advancing Patient Care Through Clinical Trials

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Interventional Clinical Trials and Their Objectives

What is a Clinical Trial?

Interventional Clinical Trial:

A research study that tests an intervention to help answer specific questions about new ways to prevent, diagnose, and treat diseases.

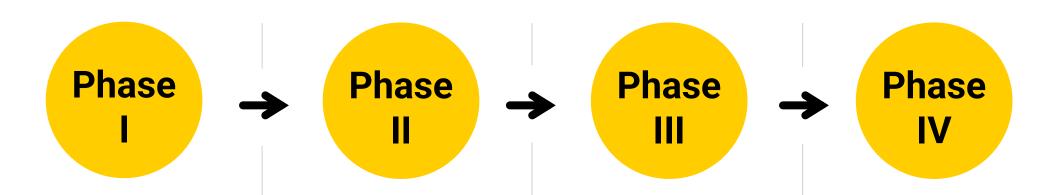
Types of Clinical Trials

Screening: Test the best way to detect the presence of a disease or health condition

Prevention: Seek ways to prevent new onset or return of a disease

Treatment: Test new treatments, combination drugs, or medical procedures

Four Phases of Interventional Clinical Trials





20-80 participants

Focused on safety and side effects of new treatments



100-300 participants

Trials of individuals with the condition to evaluate medical benefits, safety, and side effects of new treatment



1,000-3,000 participants

Compare a new treatment to an existing treatment to determine which is more effective

Surveillance Study

Once treatment is approved by the FDA and is publicly available, continue to study its safety to determine best use

Clinical Trials Benefit Iowans

Clinical trials impact Iowans who participate in them, as well as others who benefit from the treatment after the trial

TOTAL TRIALS AND PARTICIPANT ENROLLMENT BY YEAR					
CALENDAR YEAR	CLINICAL TRIALS ONGOING	NEW PARTICIPANTS ENROLLED			
2018	332	1,249			
2019	392	1,687			
2020	364	1,581			
2021	344	1,343			
2022	309	1,026			
2023 to date	122	318			

Theranostics: A Ground-Breaking Treatment for Cancer

Theranostics is a combination of the terms therapeutics and diagnostics.

Diagnostic phase of theranostics

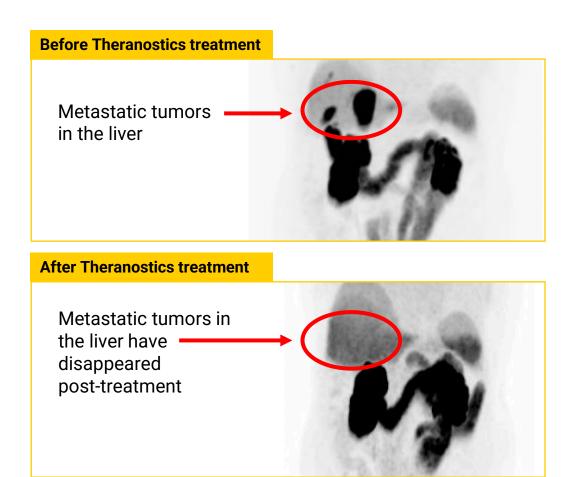
- A radioactive diagnostic drug is injected into a patient's vein
- Specific receptors on cancerous tumor cells are targeted
- Radioactive drug binds to the receptors on cancerous cells
- Tumor then "lights up" on the imaging studies

Therapeutic phase of theranostics

- Following diagnostics, a therapeutic drug is injected
- Drug binds to the same receptors on the cancer cell visible on the imaging studies
- Drug emits therapeutic radiation that kills the cancer cell
- Healthy cells around the tumor receive minimal radiation

Why Use Theranostics?

- Targeted and personalized treatment
- **Improved imaging** minimizes side effects
 - Visual of receptors determines:
 - Expected effectiveness of treatment
 - Appropriate dosing to minimize side effects
- Improved treatment improves results
 - For cancers that are in multiple places, making surgery or radiation ineffective



Theranostics: The Result of Successful Clinical Trials

2018

FDA approval of therapeutic drug, and first theranostics treatment outside of a clinical trial 2022

UI participates in first national clinical trial for a therapeutic drug for **prostate tumors** and first lowa patient treated with this drug

2010 Pediatric trial is published

2001

UI participates in first national clinical trial for **therapeutic drug**

2001-2003

UI is sole site nationwide for a **pediatric clinical trial** for that drug

2012-2017

UI is the first site in the US to treat with **patient-specific doses** for the therapeutic drug 2019

FDA approval of diagnostic drug reduces costs and increases access

2023

UI participates in first national clinical trial for a therapeutic drug for sarcoma tumors

TODAY

Currently 10 active and 5 pending clinical trials in theranostics at UIHC

- Theranostics trials for neuroendocrine tumors
- Theranostics trials for other cancers
- National Institutes of Health grant funding

Recognizing Excellence in Nursing at UIHC

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Kimberly Hunter, DNP, MBA, RN, NEA-BC Interim Associate Vice President, UI Health Care & CEO, UI Hospitals & Clinics

A History of Nursing Excellence

1970s

1980s

1990s

2000s

2010s

2020s

1975

UIHC implements Shared Governance Model

1985

Shared Governance Model popularized across the U.S. with the publication of Shared Governance for Nursing: A Creative Approach to Professional Accountability

1986

Evidence-Based Practice built into UIHC strategic plan

1990

UIHC nurses create lowa Model of Research-Based Practice to Promote Quality Care

1994

First national Evidence-Based Practice conference

1998

UIHC nurses create lowa Model of Evidence-Based Practice to Promote Quality Care

2004

UIHC receives 1st Magnet® designation

2008

UIHC receives 2nd Magnet® designation

2009

UIHC Nurse Residency Program begins

2012

UIHC Nurse Residency Program accredited for the first time

2013

UIHC receives 3rd Magnet® designation

2014

UIHC receives Magnet® Prize award for "Blazing New Trails in Evidence-Based Practice"

2015

UIHC nurses create The lowa Model Revised: Evidence-Based Practice to Promote Excellence in Health Care

2015

UIHC Experienced Nurse Fellowship Program begins

2018

UIHC receives 4th Magnet® designation

2020

Experienced Nurse Fellowship Program accredited for the first time

2023

UIHC receives 5th Magnet® designation

2023

Evidence-Based Practice in Action: Comprehensive Strategies, Tools, and Tips from the University of Iowa Hospitals & Clinics, Second Edition published

Nursing Excellence at UIHC

Shared Governance

- Facilitates nursing staff participation in decisions that affect their practice
- Long history of Shared Governance Model at UIHC



Iowa Model of Evidence-Based Practice

- Guide for processes and clinical decision-making from clinician and systems perspectives
- UIHC nurses developed in the 1990s and continually update
- Framework used globally



Accredited Programs for Nurses New to UIHC

- Nurse Residency Program
 - New nursing graduates
 - 10-year accreditation
- Experienced Nurse Fellowship
 - Experienced nurses new to UIHC
 - Only 6 programs globally





ANCC Magnet® Recognition Program

- Highest award given nationally for excellence in nursing practice
- Given by the American Nurses **Credentialing Center**
- 2023: UIHC received its 5th consecutive Magnet® designation
- Through the Magnet[®] model, organizations empower nurses to reach their true potential



Magnet® Recognition Program is an Elite Designation

- UIHC is the first hospital in Iowa and first hospital in the Big Ten:
 - To receive Magnet[®] designation
 - To receive Magnet[®] designation 5 consecutive times
- Only 10% of U.S. hospitals are designated Magnet® (April 2023)
- Less than 1% of U.S. hospitals have received Magnet® designation 5 or more times (only 47 other hospitals)



2023 Magnet® Recognition

4 exemplars speak to the dedication and unparalleled expertise that sets UI Hospitals & Clinics apart as a center of nursing excellence:

- Advocacy for support of an organizational goal
- Maintaining professional nursing certification rate
- Maintaining BSN or higher degree in nursing
- 4 Safe patient handling program



Financial Update

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Mark Henrichs, CPA, MHA

Associate Vice President & Chief Financial Officer, UI Health Care

THROUGH August 2023

Volume and Financial Highlights

August FY24

Key Volumes

Discharges: + 1.5% vs budget | + 0.6% vs prior year
Patient Days: - 6.3% vs budget | - 5.3% vs prior year
Surgeries: + 4.4% vs budget | + 5.0% vs prior year
Clinic Visits: - 1.8% vs budget | + 7.0% vs prior year

Acuity

Case Mix Index: 2.37

Length of Stay Index

- Adult: 0.99 (July 2023)
- Pediatrics: 0.97 (July 2023)

Gross Patient Revenue

- -1.2% below budget year-to-date
 - Inpatient: -4.8% vs budget
 - Outpatient: +1.6% vs budget

Accounts Receivable

Days in Net AR – 42.2 days

Salary Expenses

3.6% below budget

Non-Salary Expenses

1.9% below budget

Operating Margin

- Actual 9.7% vs goal of 8.9%
- Actual -0.6% vs goal of -1.2% (Without Directed Payment)

Comparative Financial Results

Operating Revenues	Actual	Budget	Prior Year	Variance to Budget	% Variance to Budget	Variance to Prior Year	% Variance to Prior Year
Net Patient Revenue	397.9	407.2	375.4	(9.3)	-2.3%	22.5	6.0%
Directed Payment Revenue	46.4	46.4	54.6	0.0	0.0%	(8.2)	-15.0%
Other Operating Revenue	11.2	10.4	8.9	0.7	6.9%	2.2	24.8%
Net Operating Revenue	455.4	464.1	438.9	(8.6)	-1.9%	16.5	3.8%
Operating Expenses							
Salaries & Wages	180.9	187.7	164.8	(6.8)	-3.6%	16.1	9.8%
General Expenses	207.8	212.3	200.1	(4.4)	-2.1%	7.7	3.8%
Depreciation & Amortization	22.6	22.8	21.4	(0.2)	-0.8%	1.2	5.5%
Total Operating Expenses	411.4	422.8	386.4	(11.4)	-2.7%	25.0	6.5%
Operating Income Operating Margin %	44.1 9.7%	41.3 8.9%	52.5 12.0%	2.8 0.8%	6.8%	(8.4) -2.3%	-16.1%
Operating Income w/o Dir Pmts Operating Margin % w/o Dir Pmts	(2.3) -0.6%	(<mark>5.1)</mark> -1.2%	(<mark>2.1)</mark> -0.5%	2.8 0.7%	54.4%	(0.2) 0.0%	11.1%
Gain (Loss) on Investments Other Non-Operating Gain (Loss)	5.5 (4.5)	7.8 (4.3)	24.4 (3.6)	(2.4) (0.2)	-30.3% -4.1%	(19.0) (0.9)	-77.6% -24.7%
Net Income Net Margin	45.0 9.9%	44.8 9.6%	73.3 16.0%	0.2 0.3%	0.5%	(28.3) -6.1%	-38.6%

Key Metrics

	FY23 Apr YTD	FY24 Aug YTD	Moody's Medians
Financial Operations			
Operating Margin	12.2%	8.8%	1.5%
Financial – Liquidity			
Days Cash on Hand	249	282	262
Financial - Leverage			
Debt to Capitalization	20.1%	19.1%	23.2%

Operating margin without Directed Payment

- FY23 April YTD = 0.5%
- FY24 August YTD = -1.5%



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Thank You









