
THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT TYLER ACCOUNTABILITY PROFILE

ABOUT UT HEALTH SCIENCE CENTER-TYLER

Mission:

To serve East Texas and beyond through excellent patient care and community health, comprehensive education, and innovative research.

UT HSC-Tyler's achievements include:

- Designation by the Texas Legislature in 2003 as the East Texas Center for Rural Geriatric Studies (now called the Center for Healthy Aging).
- Recognition for its care of cardiac and stroke patients by the American Heart Association/American Stroke Association's "Get With the Guidelines" program.
- Designation by the Texas Nurses Association in September 2006 as a "Nurse-Friendly" hospital.
- Providing a toll-free infectious disease consulting service to all Texas physicians and health care agencies.
- Receiving almost \$8 million from the NIH to study lung scarring which kills about 40,000 Americans each year.
- Being one of just 15 organizations to receive the first Children's Environmental Health Excellence Award from the Environmental Protection Agency. The award was given to UT HSC-Tyler's Southwest Center for Pediatric Environmental Health which educates health professionals and community groups about environmental health issues and their impact on children's health.

Education. Although UT HSC-Tyler does not grant degrees, it does provide strong leadership in the areas of graduate and post-graduate education, residency training, and continuing medical education for area physicians, nurses, and allied health professionals. UTHSCT has combined faculties and facilities with Stephen F. Austin State University to create graduate programs in Biotechnology and Environmental Science; students receive a master's degree from SFA. There are 21 residents in UTHSCT's Family Medicine Residency Program, which is a three-year, fully accredited residency training program. UT HSC-Tyler also offers residency training through its Occupational Medicine Residency and Pharmacy Programs.

Patient Care. UT HSC-Tyler serves more than 166,000 outpatient visits at its hospital, Emergency Care Center, and at more than 20 clinics. UTHSCT physicians are experts at treating chronic obstructive pulmonary disease, emphysema, asthma, and tuberculosis.

Research. At UTHSCT's Center for Pulmonary & Infectious Disease Control and Texas Lung Injury Institute, researchers work to further understand respiratory damage, disease, diagnosis and treatment. UT HSC-Tyler continues to increase its research expenditures, with more than \$13.5 million for FY 2007. From FY 2002 to FY 2007, UTHSCT's NIH funding increased by 129 percent, while total NIH funding increased by only 11.5 percent over the same time. This means that UTHSCT's share of NIH funding has increased among all higher education institutions, all medical schools, and all awards.

STUDENT SUCCESS

Although UT HSC-Tyler does not grant degrees, it does provide strong leadership in the areas of graduate and post-graduate education, residency training, and continuing medical education for area physicians, nurses, and allied health professionals. UTHSCT has combined faculties and facilities with Stephen F. Austin State University to create graduate programs in Biotechnology and Environmental Science; students receive a master's degree from SFA. There are 21 residents in UTHSCT's Family Medicine Residency Program, a three-year, fully accredited residency training program. UT HSC-Tyler also offers residency training through its Occupational Medicine Residency and Pharmacy Programs.

FACULTY, RESEARCH, AND TECHNOLOGY TRANSFER

Faculty Headcount

	Fall 2003	2007
Total	110	94
Other Prof'l	110	94
% Female	30.9%	26.6%
White	74.5%	63.8%
African-Am.	1.8%	4.3%
Hispanic	3.6%	4.3%
Asian-Am.	20.0%	27.7%

UTHCT does not have Tenured or Tenure-Track faculty

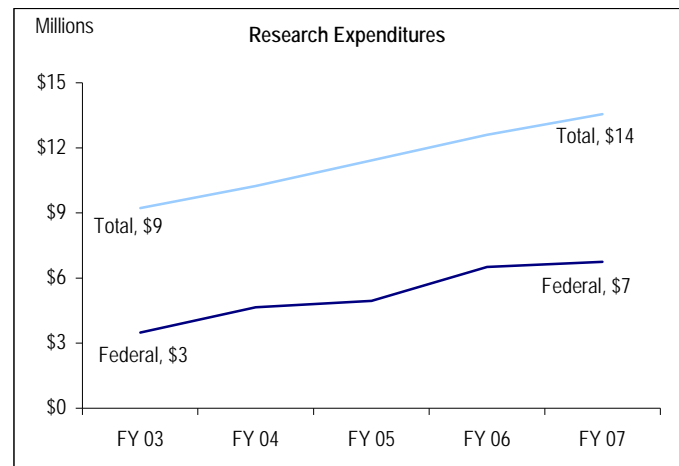
Faculty From fall 2003 to fall 2007, the number of faculty declined by 16 (14.5%). Almost two-thirds of faculty were White in 2007, down from three-quarters in 2003. The proportion of Asian-American faculty increased by almost eight points to 27.7 percent. Proportions of African-American and Hispanic faculty also increased to 4.3 percent. The proportion of female faculty declined more than four points to 26.6 percent.

Research In FY 2007, 32 of 35 FTE faculty (91%) at UT HSC-Tyler were principle investigators on 54 extramural grants. This is a 25 point increase since FY 2003. UT HSC-Tyler's total research expenditures for FY 2007 were \$13.6 million, a 47 percent increase over FY 2003. This total included more than \$6.7 million in federal research funding, a 93 percent increase over FY 2003.

Federal dollars made up one half of UTHSCT's research expenditures for FY 2007 and were the largest single source of research expenditures for UTHSCT. Grants from the NIH made up more than 87 percent (\$5.8 million) of that federal funding. UTHSCT's NIH funding has grown by 129 percent from FY 2002 to FY 2007. NIH total awards increased by 11.5 percent over this same period and awards to medical schools increased by 15.3 percent.

The growth of research expenditures at UT HSC-Tyler is especially significant given the decline in number of faculty. The ratio of research expenditures to FTE tenured/tenure-track faculty has increased by 77 percent since FY 2003 to \$144,151, indicating a research active and productive faculty.

UT HSC-Tyler has 52,812 square feet of space for research, not including clinical trials. This is 562 square feet per FTE faculty; faculty conduct \$257 of research expenditures (including clinical trials) per square foot of research space.



Technology Transfer UTHSCT's technology transfer enterprise is in its initial phases. Over the last five years, UTHSCT has reported seven new invention disclosures, one patent issued, one license and option executed, and \$105 thousand in gross revenue from intellectual property.

UT HSC-Tyler has worked closely with the Tyler Chamber of Commerce and the Economic Development Council to develop a biotechnology incubator on property adjacent to the campus.

HEALTH CARE

With more than 20 outpatient clinics, a hospital, and an Emergency Care Center, faculty at UT HSC-Tyler handled 166,539 outpatient visits and more than 2,926 hospital admissions and 14,822 hospital days in FY 2006.

In 2005-06, the campus had 24 residents in two accredited programs. Residents in the programs are receiving education and experience as medical professionals. At the same time, they are contributing to the health of this underserved region.

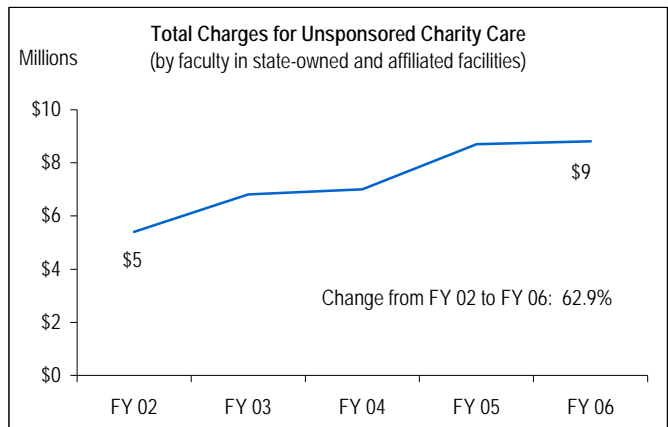
Twenty percent of the more than 190,000 people – and around 28 percent of both the African-American and the Hispanic populations – in the Tyler area were uninsured. In FY 2006, UT HSC-Tyler had \$9 million in unsponsored charity care charges, a 63 percent increase over FY 2002.

For FY 2007, UTHSCT's inpatient satisfaction ratings improved two points to 87.9 percent. Satisfaction rates for the emergency room increased slightly and patient satisfaction with the medical practice decreased slightly, both within the 88-89 percent range.

Clinical and Hospital Care by UTHSCT Faculty

	FY 02	FY 06	% Change
SO Hospital Admissions	3,805	2,926	-23.1%
SO&A Hospital Days	29,021	14,822	-48.9%
Outpatient Visits in SO&A Facilities	140,473	166,539	18.6%
Charity Care in SO&A Facilities	\$5 M	\$9 M	62.9%
Charity Care at UTHSCT hospitals	\$19 M	\$31 M	67.1%
Gross Patient Charges per FTE Clinical Faculty	\$503,005	\$402,954	-19.9%
Net Patient Revenues per FTE Clinical Faculty	\$162,769	\$105,369	-35.3%

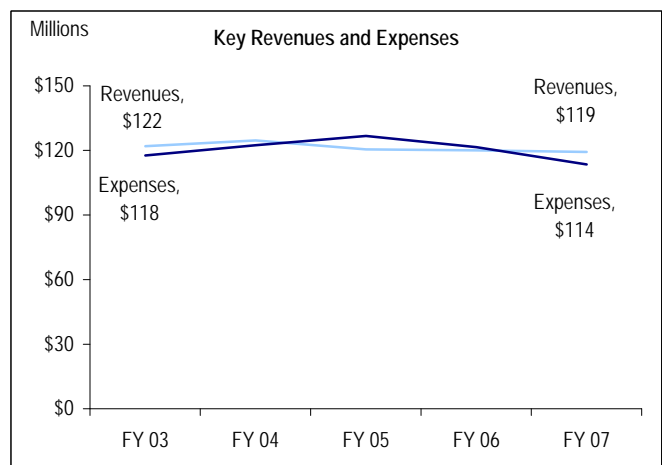
Notes: SO = State-Owned SO&A = State-Owned & Affiliated



RESOURCES, EFFICIENCY, AND PRODUCTIVITY

UT HSC-Tyler's revenues have declined by 2 percent since FY 2003. This trend was led by declines in revenues from sales and services of hospitals and other and a decrease in nongovernment grants and contracts. Expenses declined by more than 3 percent, caused primarily by decreases related to hospitals and clinics and auxiliary expenses.

With respect to clinical care, UTHSCT is a small, rural provider in an extremely competitive health care market in East Texas. The UT Health Science Center at Tyler does not have traditional students, but its research and educational activities continue to experience growth. The challenges faced by UTHSCT in clinical care require that the institution operate differently than larger academic medical centers, which are located in major markets and/or have more diversified revenue streams. Keeping this in mind, UTHSCT is proud that it has positive operating margins under these circumstances, and fully expects to continue to achieve its budget target.



Administrative costs have risen by almost 20 percent since FY 2003, and the proportion of total expenses has increased by 1.5 points to 8.5 percent. UTHSCT has reduced its energy use by 5 percent since 1997 and by 17 percent since 2002.

Philanthropy At \$1.5 million, total donor support for UT HSC-Tyler had increased 87 percent over FY 2003, although it was down from its five-year high (\$4.8 million) in FY 2005. This increase was led by significant increases from all sources. Most significantly, gifts from individuals, which made up the largest share of total gifts, had the second-largest proportional increase (190%) and the largest dollar increase. UTHSCT's total giving was 4 percent of E&G for FY 2007.

Donor Support (thousands)			
	FY 2003	FY 2007	% Change
Individuals	\$276	\$799	189.5%
Foundations	\$447	\$564	26.2%
Corporate	\$68	\$87	27.9%
Others	\$2	\$30	1400.0%
Total	\$793	\$1,480	86.6%

The value of UTHSCT's endowment has increased by 56 percent. As of August 31, 2007, the value of the endowment was \$44.1 million.

UT HSC-Tyler Peer Comparison

	UT HSC-Tyler	Broadlawns Med Ctr, Des Moines, IA	LSU HCSD-Long Med Ctr, Baton Rouge, LA	LSU HCSD-Chabert Med Ctr, Houma, LA	LSU HCSD-Univ Med Ctr, Lafayette, LA	MHS-Memorial Hospital, Pembroke, FL	Natividad Med Ctr, Salinas, CA	U of South Alabama Med Ctr, Mobile, AL
Staffed Beds	109	89	134	82	99	149	159	112
Discharges	3,378	4,205	5,646	5,040	4,533	6,687	7,957	5,904
Inpatient Days	24,836	17,429	32,980	22,530	24,207	28,681	28,923	37,133
Emergency Dept.	8,887	27,724	36,215	25,377	25,484	34,506	31,868	29,813
Emgcy Dept. % of Total	7%	23%	27%	19%	19%	26%	29%	53%
All Other Outpatient #	111,482	90,883	100,126	108,287	107,492	97,372	78,008	26,043
All Other Outpatient %	93%	77%	73%	81%	81%	74%	71%	47%
Discharges by Payer Source								
Medicare - \$	1,871	864	391	855	390	3,332	869	1,235
Medicare - %	55%	21%	7%	17%	9%	50%	11%	21%
Medicaid - \$	380	1,150	1,969	2,209	1,471	844	4,846	1,043
Medicaid - %	11%	27%	35%	44%	32%	13%	61%	18%
Commercial - \$	557	357	136	275	192	1,703	1,612	1,015
Commercial - %	16%	8%	2%	5%	4%	25%	20%	17%
Self-Pay - \$	570	1,834	3,150	1,701	2,480	808	630	2,611
Self-Pay - %	17%	44%	56%	34%	55%	12%	8%	44%
TOTAL	3,378	4,205	5,646	5,040	4,533	6,687	7,957	5,904
Gross Charges by Payer Source								
Medicare - \$	\$87,807,588	\$12,095,124	\$10,468,380	\$21,132,517	\$9,591,697	\$104,635,672	\$44,411,907	\$38,551,422
Medicare - %	52%	14%	8%	20%	12%	38%	16%	23%
Medicaid - \$	\$18,806,576	\$16,131,089	\$36,765,180	\$35,046,795	\$23,458,439	\$30,298,228	\$151,271,384	\$27,068,087
Medicaid - %	11%	19%	28%	34%	29%	11%	54%	16%
Commercial - \$	\$34,602,407	\$6,807,067	\$5,108,070	\$6,063,493	\$3,805,509	\$97,412,124	\$50,246,404	\$36,871,313
Commercial - %	21%	8%	4%	6%	5%	35%	18%	22%
Self-Pay - \$	\$27,105,935	\$49,306,779	\$77,234,142	\$42,365,183	\$44,318,058	\$43,606,993	\$33,801,858	\$66,269,892
Self-Pay - %	16%	58%	60%	40%	55%	16%	12%	39%
TOTAL	\$168,322,506	\$84,340,059	\$129,575,772	\$104,607,988	\$81,173,703	\$275,953,017	\$279,731,553	\$168,760,714
Net Revenues by Payer Source								
Medicare - \$	\$24,532,207	\$8,369,571	\$4,530,980	\$8,471,953	\$4,869,702	\$26,833,583	\$20,503,558	\$21,660,876
Medicare - %	29%	12%	6%	15%	8%	32%	20%	26%
Medicaid - \$	\$3,671,396	\$11,132,381	\$60,226,170	\$44,410,508	\$49,561,997	\$6,443,015	\$55,494,690	\$14,069,154
Medicaid - %	4%	16%	76%	78%	84%	8%	54%	17%
Commercial - \$	\$15,938,105	\$3,058,316	\$997,984	\$2,729,756	\$1,395,654	\$45,239,074	\$12,445,198	\$21,059,128
Commercial - %	19%	4%	1%	5%	2%	54%	12%	25%
Self-Pay - \$	\$1,907,424	\$8,637,244	\$375,015	\$560,068	\$551,508	\$1,564,136	\$1,629,032	\$9,199,650
Self-Pay - %	2%	12%	0%	1%	1%	2%	2%	11%
State/Local Subs - \$	\$37,467,516	\$39,630,842	\$13,324,463	\$678,736	\$2,482,405	\$3,265,202	\$13,547,928	\$17,478,437
State/Local Subs - %	45%	56%	17%	1%	4%	4%	13%	21%
TOTAL	\$83,516,648	\$70,828,354	\$79,454,612	\$56,851,021	\$58,861,266	\$83,345,010	\$103,620,406	\$83,467,245

Notes on residency programs and research at these institutions: Broadlawns Medical Center: Family Medicine Residency Program; no Research. LSU – Earl K. Long Medical Center: Several Residency Programs, including Family Medicine; no Research. LSU – Leonard J. Chabert Medical Center: Several Residency Programs, including Family Practice-through LSUHSC New Orleans; Clinical Research in cardiology, endocrinology, and other. LSU – University Medical Center: Several Residency Programs, including Family Practice; no Research. Memorial Hospital at Pembroke: No Residency Programs; no Research. Natividad Medical Center: Family Medicine Residency Program, no Research. University of South Alabama Medical Center: Medical School, plus several Residency Programs, including Family Medicine; Several Research Programs, including Biochemistry and Molecular Biology, Cell Biology and Neuroscience, Microbiology and Immunology.

