

WTTW
"CHICAGO TONIGHT"
MAY 30, 2006, 7:00 P.M.

CAPTIONING PROVIDED BY: CAPTION FIRST, INC.
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>> PHIL PONCE: GOOD EVENING AND WELCOME TO CHICAGO TONIGHT.
I'M PHIL PONCE.
ON THIS TUESDAY, MAY 30TH --
>> I THINK THAT AT THE CLOSURE OF NEXT NOVEMBER, I OUGHT TO HANG
UP THE BOXING GLOVES.
>> PHIL PONCE: FORMER COOK COUNTY PRESIDENT, GEORGE DUNNE DIED
SUNDAY AT THE AGE OF 93.
RICH SAMUELS WILL BE HERE WITH THE STORY OF A MAN WHO WAS, IN
HIS DAY, ONE OF THE MOST POWERFUL FORCES IN LOCAL POLITICS.
>> IT APPEARS THAT BY A MARGIN OF 3-1, THE TAX BREAKS GIVEN
EXCEED THE AMOUNT OF CHARITY PROVIDED IN RETURN.
>> PHIL PONCE: ARE NONPROFIT HOSPITALS DOING ENOUGH FOR
LOW-INCOME AND UNINSURED PATIENTS?
A NEW STUDY CLAIMS THAT HOSPITALS ARE CHEATING POOR PATIENTS OUT
OF THE TREATMENT THEY ARE DO.
THE LEADING HOSPITAL ASSOCIATIONS ARE BLASTING THE REPORT.
ELIZABETH BRACKETT AND HER PANEL WILL TAKE A LOOK.
>>> IT'S NOT JUST LARGE COMPANIES THAT CAN PROFIT FROM THE
GLOBAL ECONOMY.
WE'LL MEET A CHICAGO DENTIST, WHOSE PATIENTS BENEFIT AS A
CHINESE DENTIST, AND AN ENTREPRENEUR.
>>> AND LEROY NEIMAN HAS BECOME ALMOST AS FAMOUS AS SOME OF THE
ATHLETES HE HAS PAINTED.
>>> AND THE EYE-POPPING GRAPHICS AND SOUND EFFECTS IN VIDEO
GAMES ARE MORE POPULAR THAN EVER, BUT THEY ALSO LOVE THE THEME
MUSIC.
CHRISTIAN FARR WILL SHOW US HOW CHICAGO AND THE WORLD ARE
HONORING THIS UNIQUE MUSIC.
≡ [MUSIC] ≡
THEATER CRITIC HEDY WEISS REVIEWS SOME NEW SHOWED AROUND TOWN,
INCLUDING MUSICALS SHE SAYS HAS SOME REAL STAR POWER.
>>> AND DEBRA PICKETT WILL BE HERE WITH SOME COMMENTS ABOUT SOME
INTERESTING POLITICAL THEATER.
>>> ANOTHER STEP IN THE CITY'S QUEST TO GO WIRELESS.
MAYOR DALEY IS CALLING FOR A PROPOSAL FROM PRIVATE COMPANIES TO

STROGER WHO FOUR YEARS LATER IN 1949, BECAME THE PRESIDENT OF THE COOK COUNTY BOARD AND NOW WE ARE WONDERING WHAT IS THE STATUS OF HIS CANDIDACY IN NOVEMBER.

IT'S INTERESTING, PHIL, WHEN YOU LOOK BACK FAR ENOUGH YOU BEGIN TO LOOK INTO THE FUTURE.

>> PHIL PONCE: ONE OF THE THINGS THAT JOHN STROGER JUST SAID, LIFE GOES ON AND PEOPLE ARE WONDERING WHAT LIFE WILL BE LIKE IN THE NEXT COUPLE OF MONTHS, WHETHER OR NOT HE RUNS.

RICH, THANK YOU VERY MUCH.

>>> AND NOW TO ELIZABETH BRACKETT AND WHETHER ILLINOIS HOSPITALS ARE REALLY MEETING THEIR OBLIGATIONS TO THE POOR.

ELIZABETH.

>> ELIZABETH BRACKETT: WELL, A JUST RELEASED STUDY SAID CHICAGO AREA HOSPITALS GET A LOT MORE IN TAX BREAKS THAN THEY GIVE OUT IN CHARITY CARE.

THE STUDY DONE BY THE CENTER FOR TAX AND BUDGET ACCOUNTABILITY FINDS THAT FOR EVERY \$3 IN TAX BREAKS, HOSPITALS DELIVER \$1 IN CHARITY CARE.

BUT HOSPITAL TRADE GROUPS SAY THE STUDY IS DEEPLY FLAWED, SAYING OVERESTIMATES THE TAX BREAKS AND UNDERESTIMATES THE BENEFITS HOSPITALS DO DELIVER.

SO DO HOSPITALS DESERVE THEIR TAX EXEMPT STATUS?

WE'LL ASK OUR PANEL AND THEY ARE KEN ROBBINS, THE PRESIDENT OF THE ILLINOIS HOSPITAL ASSOCIATION, VASYL MARCUS, POLICY AND RESEARCH DIRECTOR OF THE HOSPITAL OF ACCOUNTABILITY PROJECT AND THE SERVICE EMPLOYEES INTERNATIONAL UNION, AND S.I.U. FUNDED THE STUDY WHICH WAS FUNDED BY TAX AND BUDGET ACCOUNTABILITY, AND ANN SPILLANE, SHE'S CHIEF OF STAFF TO THE ILLINOIS ATTORNEY GENERAL, LISA MADIGAN.

WELCOME ALL OF YOU TO CHICAGO TONIGHT.

>> KEN ROBBINS: THANK YOU.

>> PHIL PONCE: VASYL MARCUS, LET'S START WITH YOU.

YOU FOUNDED THIS STUDY.

TELL US WHAT THE BOTTOM LINE THIS STUDY IS.

>> VASYL MARKUS: IT COMPARES THE EXTENDED SIZE OF TAX EXEMPTIONS RECEIVED BY 21 HOSPITALS IN THE CHICAGO AREA TO THE AMOUNT THEY GIVE BACK TO THE COMMUNITY SHOWS THAT THERE'S AN INCREASING AND BIG GAP BETWEEN WHAT HOSPITALS DO AND WHAT WE GIVE HOSPITALS BACK IN THE FORM OF TAX BREAKS.

ESSENTIALLY THE HEADLINES, THE SHORT SUMMARY OF THE STUDY IS THAT FOR EVERY \$3 OF TAX BREAKS, WE ONLY GET \$1 BACK IN THE FORM OF CHARITY CARE AND THE FORM OF HEALTH FOR LOW-INCOME UNINSURED PEOPLE WHO NEED HEALTHCARE WHICH IS WHAT WE EXPECT WHEN WE GRANT THAT TAX EXEMPTION TO THE HOSPITALS.

>> ELIZABETH BRACKETT: I THINK WE HAVE A GRAPHIC.

THE STUDY FOR ACCOUNTABILITY SHOWS THAT HOSPITAL TAX BREAKS, YOU SAID THEY WERE \$325.6 MILLION AND CHARITY CARE AT \$205.2 MILLION.

ALL RIGHT, KEN ROBBINS, YOU DISAGREE WITH THOSE NUMBERS.

TELL ME WHY.

>> KEN ROBBINS: WELL, I THINK THE STUDY IS FLAWED IN ONLY THREE WAYS.

ITS PREMISE, ITS METHODOLOGY AND ITS STATUS.
OTHER THAN THAT, MRS. LINCOLN, HAVE YOU TO ASK HOW THE THEATER
WAS.

>> ELIZABETH BRACKETT: WHY IS IT SO FLAWED?

>> KEN ROBBINS: IT IS FLAWED IN ITS PREMISE, BECAUSE THERE'S
NOTHING IN ILLINOIS CASE LAW IN THE ILLINOIS SUPREME COURT THAT
LIMITS TAX EXEMPT STATUS, ONLY TO HOSPITALS THAT GIVE A CERTAIN
AMOUNT OF CHARITY OR FREE CARE.

THE CASE LAW IS PRETTY CLEAR THAT THE TAX EXEMPT STATUS IS
THERE, AS LONG AS YOU DON'T APPLY IT TO THOSE WHO NEED IT, BUT
THOSE WHO PROVIDE A BEN TO THE COMMUNITY THAT RELIEVE A BURDEN
OF GOVERNMENT.

>> ELIZABETH BRACKETT: WHETHER YOU ARE PROFIT OR
NOT-FOR--PROFIT.

>> KEN ROBBINS: NO, HAVE YOU TO BE A NONE PROFIT.
BY FOCUSING SOLELY ON THE CHARITY CARE PIECE AND IGNORING THE
OTHER ELEMENTS AND TRYING TO ASSURE THE PUBLIC THAT THIS IS ONLY
A FUNCTION OF CHARITY CARE AND NOT COMMUNITY BENEFIT, THIS IS
MISLEADING.

>> ELIZABETH BRACKETT: WOULD YOU AGREE WITH THE NUMBER FOR
CHARITY CARE?

>> KEN ROBBINS: THE NUMBER IS RIGHT BUT IT DOESN'T TAKE INTO
ACCOUNT THE BAD DEBTS THAT THE HOSPITALS HAVE TO FORGIVE FOR
PEOPLE WHO AT THE END OF THE DAY CAN'T PAY FOR THEIR CARE.
IT ALSO DOESN'T TAKE INTO ACCOUNT THE SHORTFALL BETWEEN WHAT
MEDICAID PAYS HOSPITALS TO TREAT POOR PEOPLE AND WHAT IT COSTS
TO TREAT THOSE POOR PEOPLE.

IF YOU TOOK THOSE TWO THINGS ALONE INTO ACCOUNT -- AND WE DON'T
AGREE THOSE ARE THE ONLY THINGS TO TAKE INTO ACCOUNT, BUT IF YOU
TOOK THOSE TWO IN ACCOUNT, HOSPITALS WOULD BE PROVIDING \$100
MILLION MORE IN THAT KIND OF COMMUNITY BENEFIT THAN IS REVEALED
IN THIS PARTICULAR STUDY.

>> ELIZABETH BRACKETT: I THINK WE HAVE A GRAPHIC FOR THAT TOO.
ILLINOIS HOSPITAL ASSOCIATION SAYS HOSPITAL TAX BREAKS \$314.2
MILLION, WHICH IS A LITTLE LESS THAN WHAT THE CENTER'S STUDY
SHOWED AND THEN CHARITY CARE PLUS, MEDICAID SHORTFALL AND HALF
THE BAD DEBT, THAT WOULD BE \$410.4 MILLION AND THEN THE OTHER
COMMUNITY BENEFIT THAT WE HAVEN'T SAID AND ALL TOGETHER THAT
WOULD BE \$1.6 BILLION, WHICH IS FAR MORE THAN THEY ARE GETTING
IN TAX BREAKS.

>> KEN ROBBINS: IT IS A FIVE TO ONE RATIO.

>> ELIZABETH BRACKETT: ANN SPILLANE, LET'S GO TO YOU.

A LOT OF THESE NUMBERS CAME FROM OUT OF YOUR OFFICE REQUIREMENTS
THAT HOSPITALS BEGIN TO REPORT THIS.

WHY DID YOU WANT HOSPITALS TO BEGIN TO REPORT THIS?

>> ANN SPILLANE: WELL, ACTUALLY, THE BILL THAT PROVIDES THAT
HOSPITALS SHOULD REPORT THEIR COMMUNITY BENEFITS WAS NOT A BILL
GENERATED BY ATTORNEY GENERAL MADIGAN'S OFFICE.

IT CAME FROM THE HOSPITAL ASSOCIATION AND THE GENERAL ASSEMBLY
OVER A YEAR AGO.

HOSPITALS DO NOW FILE COMMUNITY BENEFITS REPORTS BUT AS LONG AS
MR. ROBBINS HAS BROUGHT UP THE LAW, I WOULD LIKE TO CHIME IN

HERE.

THE LAW IS CLEAR WE THE LAW IS VERY CLEAR THAT COMMUNITY BENEFITS, THE BROAD STANDARDS THAT THE HOSPITALS WOULD LIKE US TO LOOK AT IS NOT THE STANDARD FOR TAX EXEMPTION. THE STANDARD FOR TAX EXEMPTION IS MUCH MORE LIMITED. CHARITY CARE.

DO HOSPITALS OPERATE PRIMARILY FOR A CHARITABLE PURPOSE? DO THEY PROVIDE CHARITY CARE FOR ALL WHO NEED IT AND HAVE FOUGHT FOR IT?

AND DO THEY CLAIM NO OBSTACLES UNDER RECEIVING T. AND UNDER THAT STANDARD, THE NONPROFIT HOSPITALS OF ILLINOIS DON'T MEET THAT STANDARD.

IT WAS INTERESTING.

A FEW MONTHS AGO --

>> ELIZABETH BRACKETT: THEY DON'T MEET THAT STANDARD BECAUSE OF WHAT IS SAID IN THIS REPORT?

>> ANN SPILLANE: THIS REPORT VALIDATES IT.

WE HAVE SEEN IT THROUGH OUR INVESTIGATIONS AND IN THIS REPORT. FRANKLY WHEN YOU LOOK CLOSELY AT THE DATA, THE AMOUNT OF MONEY THAT THEY RECEIVE IN TAX EXEMPT BENEFITS AND THE CHARITY, NOT THE LARGER COMMUNITY BENEFITS WHICH ARE PROVIDED BY FOR-PROFIT AND NONPROFIT, THEY FALL SHORT.

>> KEN ROBBINS: YOU CAN FOCUS ON CHARITY CARE BUT THE ILLINOIS SUPREME COURT DOES NOT FOCUS ON CHARITY CARE.

I'M PRETTY CONFIDENT THAT I CAN READ A SUPREME COURT DECISION AND UNDERSTAND WHAT IT MEANS AND IT DOES NOT FOCUS SOLELY ON CHARITY CARE.

>> ELIZABETH BRACKETT: WHAT ARE WE ARGUING, WHAT IS CHARITY CARE AND WHAT ARE THE COMMUNITY BENEFITS.

GIVE ME AN EXAMPLE OF HOSPITAL ASSOCIATION THINKS IT SHOULD BE INCLUDED.

>> KEN ROBBINS: THE ATTORNEY GENERAL AND THE LEGISLATION THAT SHE INTRODUCED THIS SPRING THOUGHT SHOULD BE INCLUDED WHICH IS THE DIFFERENCE BETWEEN WHAT MEDICAID PAYS AND WHAT IT COSTS THE HOSPITAL TO PROVIDE THAT MEDICAID PAYMENT, OR IT COULD BE WHAT

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>> ELIZABETH BRACKETT: WELL, THAT SOUNDS LIKE THAT -- THAT SOUNDS REASONABLE, IF A HOSPITAL HAS TO MAKE UP THAT DIFFERENCE BETWEEN WHAT THEY ARE GETTING AND THE DIFFERENCE BETWEEN THE KIND OF CARE THAT THEY ARE GIVING --

>> KEN ROBBINS: AND THAT'S ONE EXAMPLE.

MEDICARE --

>> ELIZABETH BRACKETT: LET'S STOP ON THAT ONE.

VASYL, WHY WOULDN'T THAT BE IN THERE?

THIS IS WHAT HOSPITALS ARE GIVING OUT OF THEIR BUDGET FOR CHARITY?

>> VASYL MARKUS: I THINK THERE'S A SIMPLE STANDARD THAT CAN BE APPLIED HERE THAT'S VIRTUALLY IMPOSSIBLE TO CONTROVERT.

WHAT DO NON-NOT FOR PROFIT HOSPITALS DO THAT IS DIFFERENT FROM FOR-PROFIT HOSPITALS FOR WHICH WE CAN COLLECT TAXED AND PROVIDE MORE HEALTHCARE FOR MORE PEOPLE.

MEDICAID SHORTFALLS ARE EQUALLY EXISTENT IN FOR-PROFIT HOSPITALS

AS WELL AS NON-PRO-PROFIT.

SOME OF THESE OTHER COMMUNITY BENEFITS THAT KEN RAISED ARE -- YOU KNOW, TO ME, IT'S AMAZING THAT THE HOSPITALS ARE TRYING TO ARGUE --

>> ELIZABETH BRACKETT: LIKE WHAT?

>> VASYL MARKUS: THE SALARIES OF INTERNS AND PHYSICIANS. THE AMOUNT OF VOLUNTEER TIME TO THE HOSPITAL IS COUNTED. THE AMOUNT OF VOLUNTEER TIME BY HOSPITAL EMPLOYEES FOR WHICH THEY ARE NOT ON THE CLOCK IS COUNTED AS A COMMUNITY BENEFIT. IF YOU TAKE A LOOK AT WHAT FOR-PROFIT HOSPITALS DON'T DO, ALTHOUGH SOME OF THEM DO THIS TO A CERTAIN EXTENT, IT PROVIDES CHARITY CARE.

IT PROVIDES DISCOUNTED CARE TO UNINSURED PEOPLE.

NOW WITH REGARDS TO THE BILL, THE BILL HAD A FAIRLY HIGH STANDARD AS TO WHAT YOU APPLY FOR CHARITY CARE.

UNDER THOSE CONDITIONS IT'S ABSOLUTELY APPROPRIATE TO GIVE A CREDIT FOR MEDICAID SHORTFALL; HOWEVER, WHEN ALL OF A SUDDEN YOU ARE TALKING ABOUT COMPARING THE SIZE OF THE TAX BREAK TO WHAT TAX EXEMPT HOSPITALS DO THAT NOBODY ELSE DOES, WELL, THAT'S A DIFFERENT STORY.

>> ELIZABETH BRACKETT: LET'S GO BACK TO THE BILL FOR A MINUTE. TELL US WHAT THE PURPOSE OF THIS BILL WAS, WHICH THE ATTORNEY GENERAL INTRODUCED AND THEN PULLED.

>> ANN SPILLANE: WELL, THE PURPOSE OF THE BILL IS TO SETTLE WHAT'S GOING ON IN ILLINOIS LAW RIGHT NOW.

THE CLIMATE IS VERY UNSETTLED FOR HOSPITALS.

I THINK THE HOSPITAL ASSOCIATION WOULD PROBABLY AGREE WITH THAT. CONGRESS IS LOOKING INTO HOW HOSPITALS MEET THEIR STANDARDS FOR TAX EXEMPTION, THE I.R.S. IS LOOKING AT IT.

THERE ARE TWO HOSPITALS THAT ARE WORKING THEIR WAY THROUGH THE SYSTEM IN TERMS OF HAVING THE TAX EXEMPTION REVOKED AND OPPOSING THAT STRENUOUSLY.

WE WOULD ARGUE THAT THIS CURRENT STATE OF THE LAW IS NOT VERY HELPFUL TO HOSPITALS, OR TO THE UNINSURED AND THOSE WHO NEED HELP FROM HOSPITALS.

WHAT ATTORNEY GENERAL MADIGAN IS TRYING TO DO IS TO SAY LET'S TAKE THIS ILLINOIS SUPREME COURT STANDARD WHICH HAS BEEN CLARIFIED OVER AND OVER AGAIN BY THE COURT, AND LET'S TRY TO FLESH THAT OUT A LITTLE MORE.

AND LET'S WORK ON PLACING A LITTLE MORE EMPHASIS ON HOW WE DO THAT, SO THAT THE HOSPITALS WILL HAVE CLARITY AS TO WHAT THEY NEED TO DO AND PATIENTS OF THOSE HOPS WILL HAVE CLARITY AS TO WHAT THEY CAN OBTAIN IN THE WAY OF CHARITABLE CARE BENEFITS.

WHAT HAPPENS OVER THE COURSE OF THE LEGISLATIVE SESSION IS WE BEGAN NEGOTIATES WITH I.H.A.

IT'S INTERESTING TO HEAR MR. ROBBINS NOW SAY THAT THEY ARE HAPPY THE MEDICARE SHORTFALL.

>> KEN ROBBINS: I SAID IF YOU ARE HAPPY WITH IT, WE WILL ACCEPT IT FOR THE PURPOSES OF THIS ARGUMENT.

>> ANN SPILLANE: BUT BY THE END OF THE SESSION, WE LOOK FORWARD TO SITTING DOWN WITH THEM.

WE THINK IT NEEDS TO BE SETTLED MORE.

>> ELIZABETH BRACKETT: WHAT ARE THE HOSPITALS BIGGEST FEARS, THAT THEY WOULD LOSE THEIR TAX EXEMPT STATUS?

>> KEN ROBBINS: WELL, IF THEY LOST THEIR TAX EXEMPT STATUS, OF COURSE THEY WOULD HAVE TO PAY TAXES WHICH IS MONEY THAT CAN'T GO TO PROVIDE HEALTHCARE.

SO IT HAS A PERVERSE EFFECT ON HOSPITALS THAT YOU WOULD WISH TO SPEND MORE ON CHARITY CARE.

IT WOULD MEAN THAT THEY COULD NOT RECEIVE CHARITABLE DONATIONS FROM PEOPLE WHO WOULD WANT TO TAKE A DEDUCTION ON THEIR INCOME TAXES FOR THAT DONATION.

IT WOULD MEAN THAT THEY COULD NOT HELP TO FINANCE THE REINVESTMENT IN THE HOSPITALS WITH TAX EXEMPT BONDS IT WOULD BE A CATASTROPHIC OUTCOME FOR HOSPITALS AND PATIENTS THEY SERVE.

>> ELIZABETH BRACKETT: IS THAT THE GOAL TO HAVE THE TAX EXEMPT STATUS?

>> VASYL MARKUS: OUR GOAL IS FOR THE HOSPITALS TO LIVE UP TO THE STANDARDS THAT WE EXPECT AS TAXPAYERS AND CITIZENS OF SOCIETY.

>> ELIZABETH BRACKETT: WHY IS THAT IMPORTANT TO THE UNION, THE S.E.I.U.?

>> VASYL MARKUS: IT'S IMPORTANT FOR SEVERAL REASONS. FIRST OF ALL, WE ARE THE LARGEST NATION OF HOSPITAL WORKERS. WE HAVE A FIRM BELIEF THAT FRONT-LINE WORKERS NEED TO HAVE A NOISE AND THEIR VOICE IS TIED IN, ENTIRELY, WITH QUESTIONS OF BETTER QUALITY CARE AND BETTER ACCESS FOR THE UNINSURED. YOU KNOW YOU TAKE A LOOK AT --

>> ELIZABETH BRACKETT: HOW WOULD THIS MAKE IT DIFFERENT IN BETTER QUALITY CARE AND HOSPITALS, QUESTIONING THEIR TAX EXEMPT STATUS?

>> VASYL MARKUS: WELL, THE BETTER QUALITY CARE IS THE WORKERS GETTING A VOICE.

AND THAT IS AN EXAMPLE IN NEW YORK STATE, S.E.I.U. REPRESENTS A VAST NUMBER OF HOSPITAL WORKERS IN NEW YORK CITY.

NEW YORK STATE, THE ONLY STATE IN THE NATION FOR WHICH MEDICARE COMPENSATES FULLY FOR THE COST OF CARE WHICH IS SOMETHING KEN WOULD LOVE TO HAVE WITH HIS HOSPITAL.

HIS IDEA THAT FRONT-LINE WORKER ARE EMPOWERED AND HAVE A VOICE AND THAT'S REALLY WHAT WE BELIEVE.

I WANT TO GO BACK QUICKLY TO A POINT MADE ABOUT THESE TAXES WOULD NOT BE USED FOR HEALTHCARE OR TAKING AWAY TAX EXEMPT STATUS WOULD HURT UNINSURED PATIENTS.

ADVOCATE HEALTHCARE SYSTEM, ACCORDING THIS STUDY HAS A GAP OF \$60 MILLION TO GET \$80 MILLION OF TAX BREAK AND ONLY GIVE \$20 MILLION BACK IN TAX BREAKS.

\$60 MILLION IS ROUGHLY -- WE DON'T HAVE THE EXACT FIGURES.

IT'S ROUGHLY 28,000 CHARITY CASES PER YEAR, THAT THE HOSPITALS CAN FUND OR IF YOU LOOK AT IT ANOTHER WAY, AN ADDITIONAL 6,000 FAMILIES OF FOUR THAT COULD BE FULLY COVERED BY HEALTH INSURANCE.

>> ELIZABETH BRACKETT: LET ME HAVE KEN.

>> KEN ROBBINS: I THINK IT'S NO COINCIDENCE THAT THEY WOULD REFER TO ADVOCATE HEALTHCARE.

THEY HAVE MADE ADVOCATE HEALTHCARE THE TARGET OF A CORPORATE CAMPAIGN WHICH SEEKS IT DEMONIZE THE SERVICES THAT THAT HOSPITAL PROVIDES AND I THINK IT'S ENTIRELY UNFAIR. AND THEY ARE HIDING BEHIND THAT CORPORATE CAMPAIGN WHEN THEY TALK ABOUT CHARITY CARE AND PATIENT QUALITY.

IT IS REALLY ABOUT ORGANIZING.

>> ELIZABETH BRACKETT: THERE'S A LOT MORE TO TALK ABOUT BUT UNFORTUNATELY THERE IS NO MORE TIME.

>> ANN SPILLANE: WE WILL HAVE MORE LEGISLATION.

>> ELIZABETH BRACKETT: THANK YOU ALL FOR BEING HERE. THERE'S MORE CHICAGO TONIGHT AHEAD, SO STAY WITH US.

>> PHIL PONCE: STILL TO COME ON CHICAGO TONIGHT, THE SPORTS MINDED PAINTINGS OF LEROY NEIMAN.

AND THE WORLD OF VIDEO GAMES AND CLASSICAL MUSIC COME TOGETHER IN A WORLD PREMIER.

AND MARATHON PRODUCTION OF SHAKESPEARE.

HEDY WEISS LOOKS AT THAT AND MORE.

AND THE SUN TIMES DEBRA PICKETT WILL BE HERE WITH SOME THOUGHTS ON THE FIRST BLAGOJEVICH-TOPINKA DEBATE.

>>> BUT FIRST, IMMIGRATION AND GLOBALIZATION, TWO HOT BUTTON ISSUES IN TONIGHT'S WORLDWIDE CHICAGO SEGMENT, FAWN RING INTRODUCES US TO A MAN WHOSE TOUCHES ON BOTH.

HE WAS AN IMMIGRANT 20 YEARS AGO AND USES GLOBALIZATION TO SERVE HIS IMMIGRANT CLIENTS.

>> FAWN RING: ALONG 26TH STREET IN CHICAGO'S LITTLE VILLAGE NEIGHBORHOOD, MOST OF THE SIGNS ARE IN SPANISH.

MANY RESIDENTS ARE FIRST GENERATION IMMIGRANTS FROM MEXICO AND CENTRAL AMERICA.

THIS DENTIST OFFICE IS ONE OF THEM HERE.

BUT HE'S FROM CHINA.

JIT CHAN SPEAKS ONLY A FEW WORDS OF SPANISH AND HIS PATIENTS SPEAK LITTLE ENGLISH BUT HIS STAFF TRANSLATES FOR HIM.

CHAN HAS A LOT OF EMPATHY FOR HIS PATIENTS.

AS A NEW IMMIGRANT 20 YEARS AGO HE WAS IN A SIMILAR SITUATION.

>> YOU DON'T KNOW WHO ARE ANYMORE.

YEAH, SO IT'S VERY, VERY TOUGH.

>> FAWN RING: IN CHINA, CHAN WAS TRAINED TO BECOME A CARDIAC SURGEON.

HE WAS 26 WHEN HE CAME TO CHICAGO TO LEARN MORE ABOUT WESTERN MEDICINE.

HE LIVED WITH RELATIVES WHO ARE DISTANTLY RELATED TO CHICAGO'S FIRST CHINESE IMMIGRANTS.

BUT AFTER THREE YEARS OF STUDY HE ENTERED DENTISTRY SCHOOL.

AND SHORTLY AFTER GRADUATION, HE BECAME A U.S. CITIZEN.

WHEN CHAN FIRST ARRIVED IN THE U.S. HE FOUND A TUTOR IN UPTOWN.

HE PAIRED WITH STEVE LATER, A VOLUNTEER WHO TOOK CHAN BASIC ENGLISH AND HOW TO GET AROUND CHICAGO.

THEY SOON BECAME FRIENDS.

>> I VIEW CHAN AS SOMEONE WHO IS VERY INDUSTRIOUS.

HE HAD A GOAL AND OBJECTIVE THAT HE WANTED TO MEET AND I HAD VERY LITTLE, IF ANY, SENSE THAT IT WAS, PERHAPS, A DIFFICULT TIME FOR HIM.