

Medical Center Caucus of the Faculty Senate

Minutes January 2016

The meeting was called to order by Mark Danielsen at 12:05 PM.

Presentation of Financial Issues, Mary Glasscock

A brief update on the financial status of the Medical Center was presented. Current projections suggest we will at least meet our budget with a likely small surplus. This includes the MedStar gain-share. This year's payment brings us to the \$70M cutoff point where instead of receiving 50% of the profits, GU receives 17%. Negotiations are underway with MedStar to set new rates for the gain-share.

Mary Glasscock presented the financial data that was sent to the AAMC as part of their annual survey of medical centers.

GU is part of the NE region with 27 private medical centers (slide 3). Based on its relationship to the university, the absence of its own hospital and practice plan, GU most closely resembles Quinnipiac , Harvard, Commonwealth Medical College , Brown, and Tufts (slide 4). Mary discussed:

Tuition and fees (slide 5). GU received \$64M in gross tuition from the Medical, Graduate and continuing education programs. It does not take into account the ~\$12M paid to MedStar for teaching. GU is well above average for tuition income due at least partly to the large graduate education program.

Grants and Contracts (slides 6 and 7). GU received \$103M which is on a par with our cohort institutions except for Harvard. It was stated in the meeting that Harvard has about 40-times the number of faculty compared with GUMC.

Transfers from Hospital Funds (slide 8) and strategic support. This was \$29M and was largely the gain-share payment.

Gifts and Endowment (slide 11). GUMC received \$22M compared with the average of \$60M for all medical colleges. Endowment is clearly a weak spot in GUMC's financial picture.

Overview (slide 12)

It should be noted that a slide detailing parental support (support given to the medical center by the university) was also presented but was not made available for release. The AAMC figure was \$13M. However, this is a very misleading number as there are many accounting manipulations used in its construction, and it does not include data from nursing schools. The very varied financial setups of member institutions makes use of this number difficult.

General Discussion

There was a clear consensus that fund raising is problematic at the Medical Center. The Caucus Chair agreed to approach Christopher Augustini about ways to improve fund raising with and with the suggestion to have a separate Medical Center campaign. There was a suggestion that the caucus should ask for the establishment of a quasi-endowment for and money generated above the budget. It was suggested that we should invite the head of fund raising to present to the caucus. The block grant was discussed. Any changes in the block grant are likely to be small.

Budget and Executive committees

Discussion of these committees was tabled due to lack of time.

It was agreed to invite Michael Sachtleben, the new president of the hospital to a caucus meeting this semester.

The meeting adjourned at 1:35 PM.