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Board Meeting: 8/25/2022
Austin, Texas

Christina Melton Crain, Chairman
R. Steven Hicks
Jodie Lee Jiles
Janiece Longoria
Nolan Perez
Stuart W. Stedman

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Adjourn	<i>4:30 p.m.</i>		

1. **U. T. System Board of Regents: Discussion and appropriate action regarding Consent Agenda items, if any, assigned for Committee consideration**

RECOMMENDATION

The proposed Consent Agenda items assigned to this Committee are [Items 40 - 66](#).

2. **U. T. Southwestern Medical Center: Request to approve the honorific naming of a new campus road servicing the U. T. Southwestern north campus as "Paul M. Bass Way"**

RECOMMENDATION

The Chancellor concurs in the recommendation of the Executive Vice Chancellor for Health Affairs, the Vice Chancellor for External Relations, Communications, and Advancement Services, and the institutional president that the U. T. System Board of Regents approve the honorific naming of a new campus road servicing the U. T. Southwestern north campus as "Paul M. Bass Way."

BACKGROUND INFORMATION

In recognition of the long history of leadership and support by the late Paul M. Bass to the institution, U. T. Southwestern requests approval to name a new campus road in his honor. Initially, this road will provide access to the new Outpatient Cancer Care Building from Harry Hines Boulevard. In the longer term, the road will serve as a major conduit for access to the new Pediatric Campus to be constructed in partnership with Children's Health System of Texas. The street is located across from the main entrance to William P. Clements Jr. University Hospital and will, in time, serve as a gateway to a major portion of the U. T. Southwestern Medical Center campus. In 2008, the Board of Regents approved the renaming of the then recently acquired Exchange Park complex as the "Paul M. Bass Administrative and Clinical Center."

With plans in place to demolish that existing building to make way for the new Pediatric Campus, naming of "Paul M. Bass Way" will ensure that the contributions of Mr. Bass are acknowledged and honored well into the future. His connections to U. T. Southwestern were significant and his legacy will last in a way that is unrivaled. From 1995 to 2008, Mr. Bass served as Chairman of Southwestern Medical Foundation. His leadership resulted in hundreds of millions of dollars in philanthropic support for U. T. Southwestern. He also served as Chairman of the Board of Zale Lipshy University Hospital and St. Paul University Hospital (predecessor to Clements University Hospital) when both were private 501(c)3 entities. He played a pivotal role in the complex negotiations and visionary thinking that enabled U. T. Southwestern to acquire both hospitals.

His civic involvement and contributions reached beyond U. T. Southwestern and left a lasting imprint on the Dallas community. He served in the United States Air Force, served as Chairman of the Board of Managers of Parkland Hospital, was a member of the Dallas Citizens Council, served as chairman of the Finance Committee of the State Fair of Texas, and was on the board of Phoenix Houses of Texas. He was also active in the Salesmanship Club of Dallas for more than 41 years and was honored with numerous awards and honors both during his life and posthumously.

His contributions to advance U. T. Southwestern Medical Center, his longtime service to the community, and his generous gifts of time, expertise, and financial support continue to make a powerful impact on health care and health education in Texas.

This naming proposal is consistent with the Regents' *Rules and Regulations*, Rule 80307, relating to honorific namings to recognize extraordinary contributions.

3. **U. T. Health Science Center - Houston: Approval to establish a Master of Science in Anesthesia degree program and discussion and appropriate action regarding proposed tuition and fee rates**

RECOMMENDATION

The Chancellor concurs in the recommendation of the Executive Vice Chancellor for Health Affairs, the Executive Vice Chancellor for Business Affairs, and the institutional president that authorization, pursuant to Regents' *Rules and Regulations*, Rule 40307, related to academic program approval standards, be granted to:

- a. establish a Master of Science in Anesthesia degree program at U. T. Health Science Center - Houston;
- b. approve new tuition and fees of \$1,080 per semester credit hour (SCH) for Resident Tuition and the rate of \$1,896/SCH for Non-Resident Tuition, effective Fall 2023; and a new Other General Authorization Fee for the Simulation Lab at the rate of \$400 per semester; and
- c. submit the proposal to the Texas Higher Education Coordinating Board for review and appropriate action.

BACKGROUND INFORMATION

Program Description

U. T. Health Science Center - Houston seeks to develop an Anesthesiologist Assistant educational program at the master's degree level offering a Master of Science in Anesthesia (M.S.A.) through the Department of Anesthesiology at the McGovern Medical School. The strong educational foundations of such a program will be grounded in a team approach to anesthesia patient care, in which an anesthesiologist concurrently supervises anesthesiologists or residents-in-training. As the ability of the Anesthesiologist Assistant to practice is predicated on the medical direction of an anesthesiologist, a successful M.S.A. degree program at U. T. Health Science Center - Houston will integrate within the learning continuum of the Department of Anesthesiology – a relationship paradigm for which the institution is particularly suited.

The American Society of Anesthesiologists (ASA) endorses the Anesthesia Care Team (ACT) model in providing anesthesia care. The ACT model includes the delegation of patient monitoring, care, and other appropriate tasks by the physician to non-physicians. Delegation is defined by the physician anesthesiologist and must be consistent with state law, regulations, and medical staff policy. Although selected tasks may be delegated to qualified members of the ACT, overall responsibility for the team's actions and patient safety ultimately rests with the physician anesthesiologist. Anesthesiology Assistants (CAAs) and Nurse Anesthetists (CRNAs) are used interchangeably within the Anesthesia Care Team. In settings where both nurse anesthetists and anesthesiologist assistants are used within the ACT, job descriptions are interchangeable, salaries are comparable for experience, and reimbursement from Medicare,

Medicaid, Tricare, and private insurers are identical. CMS recognizes both CAAs and CRNAs as non-physician anesthetists. Both providers commonly practice in the operating room but also function in other facilities requiring anesthetic care, such as GI endoscopy suites, dental offices, and radiological procedural rooms.

The key differences between the two providers lie in their training backgrounds. Nurse practitioners and physician assistants are similarly comparable healthcare providers. A CRNA is essentially a nurse practitioner specifically trained in anesthesia care and a CAA is a physician assistant specifically trained in anesthesia care. CRNAs have a nursing background requiring at least one year of full-time work in an acute care setting, whereas CAAs have a premedical background (similar to the prerequisites required for medical school). Nurse anesthesia education, program accreditation, national certification, and recertification are regulated and governed exclusively by national and state nursing bodies and boards. Anesthesiologist Assistant programs require an affiliation with an accredited medical school that meets ACGME standards for anesthesia physician residency education. Physician anesthesiologist involvement is required in all aspects of CAA education and training, program accreditation, national certification, and recertification. CAAs practices are regulated and governed locally through the state’s medical board or state medical practice acts.

The proposed M.S.A. program will offer students a curriculum that integrates didactic learning and clinical training to prepare them for a career as an anesthesia care provider. A minimum of 99 semester credit hours will be required for the completion of the M.S.A. Students will receive didactic instruction from expert U. T. Health Science Center - Houston faculty encompassing relevant topics ranging from medical physiology to medical ethics. Students will receive the benefits of learning through various teaching platforms such as problem-based learning discussions, flipped classroom sessions, and traditional lectures. Instructors will train M.S.A. students in a state-of-the-art simulation lab focusing on both technical and non-technical skills to prepare for the rigors of the perioperative environment. Students will complete a minimum of 2,000 hours of clinical training in various health care environments with exposure to unique and complex surgical procedures by the world’s leading medical experts.

Need and Student Demand

The proposed U. T. Health Science Center - Houston program will be the 18th M.S.A. program in the country and the second in Houston. The closest program in proximity would be the one existing at the Houston campus of Case Western Reserve University (a private out-of-state institution). The Case Western Reserve University program location in Houston is an offsite learning location of the main Case Western Reserve University in Cleveland, Ohio. The proposed master’s program at U. T. Health Science Center - Houston McGovern Medical School will be the first public M.S.A. program offered by a Texas higher education institution.

U. T. Health Science Center - Houston M.S.A. Enrollment Projections

	Year 1	Year 2	Year 3	Year 4	Year 5
Total New Students	28	30	32	34	36
Attrition	3	3	3	4	4
Cumulative Headcount	25	52	81	86	89
Full Time Student Equivalent	25	52	81	86	89
Graduates			25	27	29

Studies indicate that the United States is currently experiencing a significant anesthesia provider shortage that will persist, with some regional variability, well past 2030. The projected shortage is particularly prevalent in the Midwest section of the country. As mid-level anesthesia care providers, Anesthesia Assistants may be one of the solutions to this crisis. The American Society of Anesthesiologists is proactively working with the American Academy of Anesthesiologist Assistants to increase the number of practicing Anesthesia Assistants in the U.S.

There is a ready need for Anesthesia Assistant educational programs in the State of Texas and the Houston area, as well as nationwide. A burgeoning and healthy citizenry, an underserved target market, and an identifiable way to reach said market provide a substantial opportunity for U. T. Health Science Center - Houston to fill a void in the provision of high-quality anesthetist training. The Bureau of Labor Statistics estimates that job growth for all physician extender positions, including anesthesiology assistants, will be a robust 30% through 2030.

Evidence of Consultation with Students, Faculty, and Staff regarding Proposed Changes

Since this is a new program, we do not have any current students enrolled. However, discussions with faculty, staff, and executive leadership have been met with favor.

Program Quality

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) determines the standard for Master of Science in Anesthesia programs. Working in conjunction with the National Commission for Certification of Anesthesiologist Assistants (NCCAA), CAAHEP outlines the core structure needed for accreditation of M.S.A. programs to recommend core educational content and assess graduates on this material. A self-study report for subsequent examination by the CAAHEP's Accreditation Review Committee for Anesthesiology Assistants (ARC-AA) will be prepared and submitted after the matriculation of the first class in the new M.S.A. program.

U. T. Health Science Center - Houston has a long tradition of excellence in medical education and research. Seeking to expand upon that mission, the McGovern Medical School and its Department of Anesthesiology seek to develop an Anesthesiologist Assistant educational program at the master's degree level.

The Department of Anesthesiology employs over 110 faculty physician anesthesiologists, 44 nurse anesthetists, and 42 anesthesiology assistants. Faculty provide clinical expertise at multiple sites in both ambulatory and inpatient settings, including Memorial Hermann Hospital – Texas Medical Center, Memorial Hermann Surgery Center – Texas Medical Center, the Memorial Hermann Heart and Vascular Institute – Texas Medical Center, Harris County Health System's Lyndon B. Johnson Hospital, as well as in specialized pain management clinics. The Department ranks 19th in the nation for research in anesthesiology, with over \$26 million in grant funding.

The anesthesiology residency program is one of the largest in the country, training 110 physician residents and 15 physician fellows annually. In addition to hands-on clinical training in the operating room, residents' education is supplemented with dedicated didactic presentations from experienced faculty, weekly oral board practice with the department's five oral board

examiners, departmental grand rounds, sub-specialty didactic lecture series, and regular simulation sessions. The training program also includes fellowships in cardiovascular, pediatrics, obstetrics, regional, neuroanesthesia, trauma, and critical care.

The M.S.A. program will structure its faculty instructors and staff similar to other programs in the nation and pursuant to the requirements set by the CAAHEP’s ARC-AA. A physician medical director and an anesthesiology assistant program director are key requirements of an M.S.A. program. The program will consist of three educational components: didactic curriculum, clinical instruction, and simulation education. Program faculty will consist of five core faculty Anesthesiologists and nine support faculty anesthesiologists who will primarily provide clinical instruction. Core faculty will be supported by five anesthesiologist assistant faculty members who will assist with foundational instruction (anatomy, physiology, pharmacology, airway, instrumentation, machines, monitors, and life support training) and simulation experiences.

The program will primarily use current faculty to support this program. A nationwide search will be conducted for the program director. Due to the immediacy and critical nature of practicing anesthesia, faculty members cannot simultaneously provide anesthesia care while providing classroom instruction. To protect the program faculty’s education efforts, the department will hire two new faculty anesthesiologists and three anesthesiology assistants to supplement the clinical workload. The goal is to expand the M.S.A. program to a maximum of 40 students annually by year five. The expansion plan will require the hiring of additional core and support faculty. By the fifth year, the M.S.A. program plans to have employed eight core Anesthesiologists, eight Anesthesiologist Assistants, and 15 support faculty who will provide clinical instruction in general anesthesia, pediatrics, intensive care, cardiovascular anesthesia, and obstetrical anesthesia.

Revenue and Expenses

While no current public institutions in the State of Texas offer a master’s degree program for anesthesiology assistants, the Department of Anesthesia benchmarked tuition and fee rates against the similarly approved graduate-level Anesthesiologist Assistant programs, both public and private to U. T. Health Science Center - Houston. Starting Fall 2023, the proposed resident tuition is requested at \$1,080 per semester credit hour and the non-resident tuition rate is requested at \$1,896 per semester credit hour, in addition to an Other General Authorization Fee in the amount of \$400 per semester for the Simulation Lab. The proposed Other General Authorization Fee will help to offset costs related to maintaining hardware and software equipment for the M.S.A. program simulation lab. This proposed fee is not dissimilar from the fees assessed for students enrolled in the McGovern Medical School (Simulation and Skills Fee of \$1,150/year for M.D. students) or Cizik School of Nursing (Simulation Fee of \$350/semester) that also have equipment and software maintenance needs.

	Tuition and Fees Comparison	
	Residents	Non-Residents
Statutory Tuition/SCH:	\$50	\$458
Designated Tuition/SCH:	\$980	\$980
Differential Tuition/SCH	\$50	\$458
Other General Authorization Fee/Semester:	\$400	\$400
TOTAL TUITION AND FEES:	\$1,080/SCH + \$400/Semester	\$1,896/SCH + \$400/Semester

The resident cost of tuition/fees for the M.S.A. degree program completion will total approximately \$111,283 for a 29-month program. The non-resident cost of tuition/fees for the M.S.A. degree program completion will total approximately \$192,067 for a 29-month program. U. T. Health Science Center - Houston's mandatory fees for all students include the Information Technology Access Fee: \$40/semester; Graduation Fee: \$100/one time charge in last semester; Student Services Fee: \$591.75/year. These mandatory fees were used in the calculation for total cost of the U. T. Health Science Center - Houston M.S.A. degree program. Case Western Reserve University, a private institution based in Cleveland, Ohio, offers this program locally in Houston for a 24-month program. The tuition/fee cost for completion of the Case Western Reserve University program totals \$146,660. Being a private institution there is not a non-resident tuition rate.

Projected enrollment, expenses, and revenue related to the proposed tuition and fees are:

Projected Enrollment	5-Year Total
Total Number of Students (cumulative headcount over five years)	89
Projected Expenses	5-Year Total
Faculty	
Salaries	\$ 5,961,740
Cost of Benefits	\$ 1,013,496
Staff & Administration	
Administrative Staff Salaries	\$ 811,024
Cost of Benefits	\$ 275,748
Other Expenses	
Equipment	\$ 1,293,500
Facilities	\$ 781,390
Supplies and Materials	\$ 877,178
Total Expenses	\$ 11,014,076
Projected Revenue	5-Year Total
From Student Enrollment	
Formula Funding	\$ 1,672,714
Tuition and Fees	\$ 12,562,445
From Institutional Funds	
Institutional Support (for facility build-out)	\$ 1,000,000
Total Revenue	\$ 15,235,159

Coordinating Board Criteria

The proposed program meets all applicable Coordinating Board criteria for a new Master of Science in Anesthesiology degree program.

4. **U. T. System: Approval to distribute a portion of The University of Texas System Professional Medical Liability Benefit Plan premium returns and approve rates for the Plan**

RECOMMENDATION

The Chancellor concurs in the recommendation of The University of Texas System Professional Medical Liability Benefit Plan (Plan) Management Committee, chaired by the Vice Chancellor and General Counsel, and comprised of the Chair, the Executive Vice Chancellor for Health Affairs, the Executive Vice Chancellor for Academic Affairs, and the Executive Vice Chancellor for Business Affairs, after consultation with Milliman, Inc., actuary for the Plan, that:

- a. overall premium rates remain unchanged; and
- b. \$6 million in premiums be returned to the participating U. T. institutions based on a methodology that considers each institution's losses.

BACKGROUND INFORMATION

With the implementation of tort reform in 2003, the Plan Management Committee (Committee) has consistently recommended significant reductions in total Plan assets to bring the reserve levels to those generally accepted by the industry. The Committee continues balancing Plan revenue from premiums charged and investment income with adequate capitalization from which to pay Plan claims, reserves for future claims, and administrative expenses. As part of this effort, Plan premiums were significantly reduced for several years immediately following tort reform adoption, and since 2007, the premium rates have either been reduced or unchanged. However, Plan premiums are adjusted annually for institutional loss experience.

For the coming year, the Committee recommends maintaining overall premiums at the current rates. Based on Plan investment income and efficient management of claims, the Committee recommends a return to the contributing institutions of \$6 million so that excessive reserves are not maintained. The combination of unchanged rates along with this distribution should still allow for adequate capitalization of the Plan.

The methodology for distribution of \$6 million to participating institutions considers the proportion of each institution's payment into the Plan as well as each institution's loss experience. Thus, those institutions with higher claims receive lower distributions.

Since there are remaining funds previously designated for U. T. institution efforts in patient safety enhancement through collaborative projects, as identified by the Executive Vice Chancellor for Health Affairs, no additional funds are recommended for such purposes for this fiscal year.

Exhibit 1
The University of Texas System Professional Medical Liability Benefit Plan
Proposed Distribution of Plan Returns
 FY 2022

<i>Institution</i>	<i>Premium Paid</i>	<i>Claims Expense</i>	<i>Net Contribution Amount</i>	<i>Rebate based on Net Contribution</i>
	<i>2020-2022 (3 year)</i>	<i>2020-2022 (3 year)</i>	<i>3 Yr (Premium - Expenses)</i>	<i>FY 2022</i>
UT Arlington	8,441	-	8,441	2,091
UT Austin	741,104	459,501	281,603	69,755
UT Dallas	6,012	-	6,012	1,489
UT El Paso	7,233	-	7,233	1,792
UT Permian Basin	748	-	748	185
UT Rio Grande Valley	1,316,660	79,937	1,236,723	306,346
UT San Antonio	5,715	-	5,715	1,416
UT Tyler	5,454	-	5,454	1,351
UTSWMC	8,201,810	2,729,362	5,472,448	1,355,569
UTMB	4,939,236	3,047,527	1,891,709	468,591
UTHSCH ¹	12,176,945	3,778,419	8,398,526	2,080,381
UTHSCSA	5,399,006	1,856,912	3,542,094	877,405
UTMDACC	4,152,298	1,606,221	2,546,077	630,683
UTHSCT	856,712	37,415	819,297	202,946
Subtotal	\$ 37,817,374	\$ 13,595,294	\$ 24,222,080	\$ 6,000,000

¹ UTHSCH Premium includes FY19 premium adjustment collected from the Med Foundation in FY20.

TOTAL DISTRIBUTION FY 2022

\$ 6,000,000

TOTAL DISTRIBUTION FY 2020-2022

\$ 18,000,000

5. **U. T. System: Update on new academic and research programs at U. T. institutions**

DISCUSSION

Chancellor Milliken and Executive Vice Chancellor for Health Affairs John M. Zerwas, M.D., will provide a brief update on new academic and research programs at U. T. institutions.