Medical Education Progress Report



Spring, 2007

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I. MEDICAL EDUCATION EXPANSION IN THE STATE UNIVERSITY SYSTEM OF FLORIDA AND PURPOSE OF THE REPORT

The Board of Governors (BOG) began an extensive review of Medical Education over three years ago, commencing in December 2003. As part of its review, the BOG received advice and counsel from the Council for Education Policy, Research, and Improvement's November 2004 "Medical Education Needs Analysis" (CEPRI Report), and considers it to be a cornerstone and blueprint for addressing Florida's future healthcare needs in a manner that is comprehensive, logical, action-oriented, collaborative, and expectant of tangible commitments on the parts of the Legislature, Board of Governors, and State University System.

The review identified a significant shortage in Florida's physician workforce, for which the BOG noted the State must be proactive in planning for the future healthcare needs of its citizens. Several strategies were identified in the CEPRI Report and as part of the BOG review, and the BOG ultimately drafted a vehicle to signify its support and suggestions for addressing this State need, as well as encouraging other appropriate bodies and constituents to support these efforts, namely the Resolution with Regard to the Future of Medical Education in Florida.

The purpose of this report is to provide an update on goals identified as part of the review. The update includes university-reported information on several measures from the two universities authorized to implement new medical schools. In addition, detail is provided regarding development of a long-term Legislative Budget Request for State University System Medical Education.

II. RESOLUTION ON MEDICAL EDUCATION

On March 23, 2006, the Board of Governors passed the "Resolution with Regard to the Future of Medical Education in Florida" ("Resolution"), which encouraged the collaboration of all interested parties in order to comprehensively address Florida's most urgent healthcare needs through the enhancement of medical education and related areas. The Resolution aimed to delineate the challenges and opportunities identified during the lengthy consideration of Medical Education, as well as set forth specific action items to advance Medical Education. As part of the Resolution, the Board of Governors approved implementation of Doctor of Medicine degree programs at both Florida International University and the University of Central Florida, and included several statements of potential collaboration between itself and the Florida Legislature, each essential to a successful comprehensive statewide plan. The Board of Governors transmitted the Resolution, CEPRI Report, and economic impact studies and tax revenue information, to the Legislature and Governor's Office, as a first step in mobilizing a statewide effort to address Florida's

physician shortage. For reference purposes, the full text of the resolution is included as **Appendix A**. Each action item set forth in the Resolution, and its current status, is identified in Table 1 below:

Table 1 Status of Resolution Action Items

ACTION ITEM FROM RESOLUTION	STATUS
1. The Board of Governors approves the comprehensive approach to medical education as set forth above and in the CEPRI Report.	Approved March 23, 2006.
2. The Board of Governors approves Florida International University's request for a medical school and will support the University as it seeks approval from the Florida Legislature, as required by 1004.03(3), Florida Statutes.	Approved by BOG on March 23, 2006, and BOG supported legislative approval during 2006 Legislative Session, in which the medical school was approved. Implementation Planning is underway.
3. The Board of Governors approves the University of Central Florida's request for a medical school and will support the University as it seeks approval from the Florida Legislature, as required by 1004.03(3), Florida Statutes.	Approved by BOG on March 23, 2006, and BOG supported legislative approval during 2006 Legislative Session, in which the medical school was approved. Implementation Planning is underway.
4. The Board of Governors will not seek funding with regard to the FIU and UCF medical education programs approved above during the 2006 Legislative Session, beyond any matters already contained in its current 2006-07 Legislative Budget Request.	☑ The BOG did not amend its LBR to include any matters specific to medical school implementation during 2006 Legislative Session.
5. The Board of Governors has and will continue to seek, and will request that the Legislature provide, full funding of the current unfunded medical school expanded enrollments and related needed facilities at the existing medical schools within the State University System and the FAU/UM medical partnership and state funding of additional residencies, as expeditiously as possible.	BOG Request to Legislature made as part of transmission of documents in #6 below in April, 2006, and in presentations to the Legislature. <i>Notes:</i> "Current, unfunded, expanded" enrollments at UF and USF were funded during the 2006 Session (UF – 37 students, \$1,106,300; USF – 58 students, \$1,734,200). FSU continues growth and program ramp-up, and received funds from Legislature to continue expansion of external sites. FAU requests received favorably during 2006 Session (a portion of which was received in non-recurring funds, and thus has been added to this year's request as recurring), and continues to pursue opportunities for residency expansion through Boca Raton Community Hospital (it has a first review with ACGME in March – if all goes well they will admit first residents in 2009, who will practice in Florida in 2011), as presented to the BOG. Support continues for SUS and external efforts to pursue state funding of additional residency positions. Existing institutions continue willingness to be responsive to enrollment expansion,

although further expansion will require significant facilities investment. Efforts to enhance availability of residency positions are currently receiving support in State and Federal Legislatures. Federally, Senator Nelson (with 3 cosponsors) is sponsoring a bill (S.588) to help address the growing physician workforce problem by bringing more medical residents to Florida and other states with shortages, in recognition of the concept advanced by the CEPRI Report that doctors tend to remain in the area where they do their graduate medical education training, and increasing the number of residents is essential to increasing the physician workforce. The bill will expand the number of physician training positions in 24 states with shortages, including Florida, by increasing the cap on Medicaresupported medical residents. This is primarily supported by the fact that the number and geographical distribution of federally-supported medical residents do not reflect recent population growth or shifts. If passed, Florida hospitals would gain 347 new positions - more than any other state. On 2/14/07, the bill was read twice and referred to the Senate Committee on Finance. There is an identical bill in the House (H.R.1093), sponsored by Representative Meek and 11 co-sponsors. On 2/15/07, the bill was referred to Committees on Ways and Means & Energy and Commerce. On 2/27/07, it was referred to the Subcommittee on Social Security. Discussions are currently underway with state legislators to discuss ways to support the above Federal Legislation and other state initiatives to further enhance undergraduate and graduate medical education.

6. The Board of Governors directs staff to transmit to the Legislature a copy of this resolution, the CEPRI Report with a view toward implementation of the programs it contains, and the economic impact studies prepared by consultants for UCF and FIU, along with the supplemental tax information. The Board of Governors requests that the Legislature undertake an evaluation of the tax revenue to be generated by the above medical schools in order to create new state revenue sources, if appropriate, to support the ongoing needs of these medical education programs, residencies, and expanded enrollments associated with all of the state's medical education programs. The Board of Governors further requests that the Legislature undertake any other such appropriate actions to ensure that the annual State University System funding allocation from the Legislature for other educational programs and

☑ BOG Staff transmitted to the Legislature, on April 3, 2006, all of the information as directed, as well as an explanatory letter stating the BOG position with regard to requests of the Legislature. Additionally, there is currently a bill in the Florida Legislature (HB 877, sponsored by Homan) that is responsive to many tenets of the CEPRI Report and the Resolution, including the need for a reliable and accurate Physician Workforce Database, continued development of strategies to increase residency positions and requisite funding (on both state and federal levels), support for utilization and enhancement of incentive programs such as the Florida Health Service Corps and Medical Education Reimbursement and Loan Repayment Program, and generally encouraging the collaboration between appropriate non-governmental and governmental entities (including BOG/Chancellor), among others. It encourages a statewide effort at addressing Florida physician workforce shortage through establishment of an office within the Department of Health charged with coordinating the statewide effort, mobilizing related programs already existing within DOH, and serving as a liaison between the various interested parties.

priorities will not be adversely affected by the substantial funding toward medical education. 7. The Board of Governors directs staff to develop, in conjunction with the University of Central Florida and Florida International University, a program of accountability measures addressing expenditures, expanded physician workforce, graduate medical education, direct and indirect economic development outcomes, or other measures, as appropriate, to be approved and continually evaluated by	Ongoing. Continued development of program will take place as programs move toward and beyond implementation. The current progress update is included within this report.
the Board of Governors. 8. The Board of Governors finds that it will not consider any future requests for medical schools, professional programs, or doctoral programs unless such requests are consistent with the Board of Governors' Strategic Plan, as it is modified from time to time, and are submitted in accordance with the Board's process for program approval.	The Board of Governors continues to selectively consider only those new doctoral or professional academic degree proposals that are consistent with its Strategic Plan and submitted in accordance with the established process for program approval.

III. IMPLEMENTATION ACCOUNTABILITY FOR NEW MEDICAL SCHOOLS

A. System of Accountability

1. Purpose

The Resolution directed that a program of accountability be developed for implementation of the new medical schools at FIU and UCF, to ensure that both institutions remain on track for successful implementation, while maintaining consistency with the approved proposals.

2. Involvement and Process

In consultation with not only UCF and FIU, but also Florida State University (FSU) as it had most recently implemented a College of Medicine, initial measures of accountability and related strategies for success were discussed, and reporting elements and timelines were identified. Continued discussion on accountability and statewide strategic planning for expansion of medical education and related issues, has included the Council of Florida Medical School Deans, Florida Medical Association and its Graduate Medical Education Committee, Florida Osteopathic Medical Association, Department of Health,

University Representatives, Statutory Teaching Hospital Representatives, Safety Net Hospital Representatives, and Liaison Committee on Medical Education (LCME) Representatives, among others. Continued collaborative statewide efforts to meet the goals of the Resolution remain ongoing.

3. Elements Informing the Accountability System

Due to timelines and restrictions, some measures identified in the Resolution present short-term reporting difficulties. Thus, it was determined that progress on LCME Accreditation measures is currently most integral to ensuring the success of the medical schools. Further, without such progress, and ultimately successful implementation, the medical schools cannot realize the projected positive impact on Resolution priority areas, namely increasing Florida's physician workforce, enhancing graduate medical education opportunities, and creating positive impact on economic development.

The system will consist of two phases, each with elements appropriate to stage of development. Phase I (Planning and Development) will track those elements essential to attainment of preliminary accreditation, and monitor status on certain portions of the BOG-approved degree proposal. **Phase I Elements include:** 1) LCME Minimum Requirements; 2) Timelines; 3) Adherence to Proposal and Implementation Plan; 4) Acquisition of Public & Private Funds; 5) Financial Plans & Expenditures; and 6) Facilities & Construction.

Phase II will track those elements essential to attainment of provisional and full accreditation, monitor status on certain portions BOG-approved degree proposal, and ensure consistency with State need and physician workforce efforts. Prior to receipt of preliminary accreditation, any progress on the measures will be monitored for consistency with accreditation expectations and appropriateness to stage of development. **Phase II Elements include:** 1) Provisional and Full Accreditation Status Updates; 2) Expanded Physician Workforce Impact; 3) Graduate Medical Education Monitoring; 4) Direct/ Indirect Economic Development Outcomes Tracking; and 5) Continued Phase I elements and other measures, as appropriate.

Below is a brief explanation of each element, followed by narrative comments from Florida International University and the University of Central Florida regarding progress on that element.

B. Phase I Elements - Planning & Development

1. LCME Accreditation

The first element tracks progress toward LCME Accreditation. It consists of a 3-stage transitional process (described in Table 2 below), which is only available to those programs that have <u>not</u> admitted or enrolled any students. Programs that enroll students without preliminary or provisional accreditation are ineligible for consideration until the educational program is complete (i.e., at least one class of students has graduated). Additional information is provided as **Appendix B**.

Table 2
Description of LCME 3-Stage Accreditation Process

Initiation of the Review	In order to initiate the review, programs must contact the LCME Secretariat for advice and consultation. The process formally begins when the Institutional CEO submits a written request and the application fee (\$25,000).
Stage 1: Consideration for Preliminary Accreditation	Upon receipt of written request and payment of the application fee, programs receive instructions from the Secretariat on planning a self-study and completing a Modified Medical Education Database, which provide documentation of elements deemed to be essential prerequisites to admission of a charter class. Checklists outlining the minimum requirements, as well as institutional progress on the requirements, are provided as Appendix B . Prior to receiving preliminary accreditation status, programs MUST NOT : 1) Recruit OR advertise for students; 2) Solicit or collect application fees; 3) Collect application information; 4) Initiate a process for reviewing admissions applications; 5) Schedule interviews for potential matriculants; or 6) Issue letters of admission. Programs engaging in any of the above forfeit their eligibility for consideration as a new program and may not apply for LCME Accreditation until at least one class has graduated. The LCME Secretariat staff members are available, at the school's request, to provide feedback on drafts of the modified database and self-study summary report during their development, to ensure that the information is complete and accurate. Once the documentation has been completed, it will be forwarded to the LCME for review at its next scheduled meeting, at which time the LCME will determine if sufficient progress in planning has been made to authorize an on-site visit. A report of the site visit will then be reviewed by the LCME to decide whether preliminary accreditation should be granted. If the program does not enroll a charter class within two years of receiving preliminary accreditation, it must reapply as a new program and pay a reapplication fee of \$10,000.
Stage 2: Evaluation for Provisional Accreditation	After receiving preliminary accreditation <u>and</u> admitting a charter class, programs update the self-study and complete additional sections of the medical education database. Site visits are scheduled to take place before the midpoint of the second year curriculum, at which point progress in implementation of the educational program and planning status for later stages of program is ascertained. If LCME determines the program to be in full compliance with all

	relevant accreditation standards, provisional accreditation will be granted. If substantial noncompliance issues exist that can be resolved within a relatively limited period of time, LCME may continue the program's preliminary accreditation status for another year.
STAGE 3: Evaluation for Full Accreditation	After receipt of provisional accreditation, the program updates the self-study and completes any remaining portions of the Medical Education Database. The Secretariat will schedule a full accreditation survey to take place late in the third year or early in the fourth year of the curriculum. If LCME determines the program to be in full compliance with all accreditation standards, full accreditation status is awarded for the balance of the 8-year term (beginning when the program was granted initial accreditation status).

SOURCE: Rules of Procedure, Liaison Committee on Medical Education; August 2005 edition; Revised February 2007

FIU and UCF were asked to provide narrative comments detailing their progress on LCME Accreditation, as well as complete the corresponding checklist (**Appendix B**). The narrative responses, by corresponding heading, are below.

FLORIDA INTERNATIONAL UNIVERSITY

The formal request for evaluation of the new medical school along with the application was submitted to the LCME in January, 2007. Since then FIU has been preparing the documents which will be submitted to the LCME for preliminary accreditation. In developing this extensive documentation FIU has formed 17 committees, as outlined by the LCME's components of the planning self-study report, made up of staff, BOD, BOT and external members of the community. FIU expects to have the initial draft of this self-study documentation by April, 2007.

LCME Committees	<u>Chair</u>
Governance & Administration	John Rock
Academic Environment	George Walker
Educational Objectives	Joe Leigh Simpson
Structure of the Educational Program	Joe Leigh Simpson
Teaching & Evaluation	Joe Leigh Simpson
Curriculum Management	Joe Leigh Simpson
Evaluation of Program Effectiveness	Joe Leigh Simpson
Admissions	Sanford Markham
Student Services	Sanford Markham
The Learning Environment	Sanford Markham
Faculty Numbers, Qualifications and Functions	Joe Leigh Simpson
Personnel Policies	Joe Leigh Simpson
Faculty Governance	Joe Leigh Simpson
Finances	Liane Martinez
General Facilities	Alex Zyne

University of Central Florida

The University of Central Florida has implemented a plan to submit its LCME documentation (database and self-study document) in mid-April 2007 so that LCME can review the document at its June 2007 meeting and make the determination that UCF is sufficiently prepared for a site visit to occur between the months of October to December, 2007. The schedule allows UCF a second opportunity for submitting the LCME documents and still meets the October to December site visit deadline. The following dates for the site visit have been proposed by LCME Secretariat and UCF administration is currently reviewing these options: October 28-30, November 18-20, or December 2-4. The decision for preliminary accreditation would be made at the February 2008 LCME meeting.

UCF has made significant progress toward the LCME Preliminary Accreditation requirements and building relationships with the community. The university has made two visits to Washington DC to meet with the LCME Secretariat, paid the \$25,000 initiation fee, appointed the founding dean, initiated the discussions with Orlando Regional Healthcare System and Florida Hospital to develop affiliation agreements, met with many community leaders in healthcare, initiated the hiring of the senior administrators, course directors (faculty), and three student affairs directors (admissions, registrar, and financial aid), constituted a curriculum committee, developed the curriculum structure for the first two years, hired the architect and construction manager for the College of Medicine Learning Resource Center (instructional building and library), initiated the building program development, and implemented a plan and established self-study teams to complete the LCME preliminary database and self-study to meet the April 13 submission date. The following provides additional details on actions that have been taken since the approval of the MD program at UCF:

- June 9, 2006: Terry Hickey, UCF Provost and Executive VP, assigns Julia Pet-Armacost, Assistant Vice President, to support the implementation of the College of Medicine
- July 25, 2006: Terry Hickey and Julia Pet-Armacost meet with the LCME Secretariat in Washington D.C. to discuss timelines and process
- June 2006 present: Facilities planning meetings regarding construction plans for the Health Sciences Campus at Lake Nona
- July 2006: UCF launches UCF Health Sciences Website: http://med.ucf.edu/
- August 23-24, 2006: UCF brings in consultant, Michael Whitcomb, to assist with planning efforts

- August 24 October 5, 2006: UCF constitutes its initial MD Program Curriculum Committee
- September 19, 2006: Search Committee interviews medical college dean candidates
- October 6, 2006: First meeting of the MD Program Curriculum Committee with Michael Whitcomb and additional meetings to discuss instructional building elements and faculty procedures.
- October 10, 2006: Dean candidate, Deborah German, interviews at UCF
- October 20, 2006: MD Program Curriculum Committee develops plan for reviewing curricula at selected medical schools
- October 23, 2006: UCF tours the new medical school facilities at Florida State University
- October 25, 2006: Deborah German is named the Dean of the College of Medicine
- November 7-8, 2006: Deborah German meets with student affairs, facilities planning, community relations, faculty relations, college deans, graduate studies, and the curriculum committee
- November 8, 2006: MD Program Curriculum Committee members present overviews of selected curricula
- November 27, 2006: MD Program Curriculum Committee meets to critique curricula from other medical schools and begin discussion of the mission and guiding principles for the College of Medicine
- November 30, 2006: Deborah German starts as the founding dean at UCF
- November 30, 2006: Deborah German and Julia Pet-Armacost participate in the Landscape Master Plan for Lake Nona
- December 1, 2006: Initial plans begin for developing temporary facilities and contingency space for the College of Medicine at University Towers.
- December 10, 2006: UCF staff members visit Tufts Medical School
- December 11, 2006: Deborah German meets with the Seminole County Delegation
- December 12, 2006: Deborah German meets with the Orange County Delegation
- December 14, 2006: Deborah German meets with the Florida Public Health Association
- December 15, 2006: MD Program Curriculum Committee reviews information from trip to Tufts, discusses simulation initiative, mission statement, and curriculum
- January 3, 2007: LCME (Association of American Medical Colleges) receives \$25,000 from UCF to initiate the LCME preliminary accreditation process
- January 9, 2007: Deborah German meets with the Central Florida Partnership on Health Disparities
- January 10, 2007: Deborah German meets with John Reed, Burnham Institute
- January 11, 2007: UCF receives LCME Database Forms and Self-Study Planning Guide
- January 12, 2007: MD Program Curriculum Committee meets with Myra Hurt, former interim dean at FSU, to discuss process for development of new medical school and curriculum content
- January 16-30, 2007: UCF Initiates Searches for senior leadership (Executive Director for Development, Associate Dean for Student Affairs, Associate Dean for

- Faculty and Academic Affairs, Associate Dean for Finance and Administration); three directors (Admissions, Registrar, Financial Aid), and five faculty members (course directors).
- January 17, 2007: Deborah German meets with East Orlando Chamber of Commerce
- January 18, 2007: Deborah German meets with the Winter Park Health Foundation
- January 19, 2007: Deborah German presents keynote speech at the Orlando Regional Chamber of Commerce Leadership Retreat
- January 22, 2007: Curriculum committee members meet with recent MD graduates at the MD Anderson Cancer Center to discussion curriculum design
- January 25, 2007: Deborah German meets with the Economic Development Commission
- January 26, 2007: MD Program Curriculum Committee meets to discuss overview of the Registrar's visit to Vanderbilt and attendance at the AAMC conference for student records personnel. Julia Pet-Armacost provides overview of LCME process and content of the LCME database and Robert Armacost facilitates discussion about curriculum structure.
- January 26, 2007: LCME planning team organization (responsibility matrix) and action plan is developed with a submission target date of the database and self study to LCME of April 13, 2007
- January 29, 2007: Visit by consultant, Mike Whitcomb, to discuss curriculum design and LCME schedule
- January 30, 2007: Deborah German, Julia Pet-Armacost, and Robert Armacost go to Washington DC to meet with the LCME Secretariat and discuss the preliminary accreditation schedule and standards
- February 2, 2007: MD Program Curriculum Committee discusses LCME requirements, curriculum structure, learning outcomes, and curriculum schematic
- February 5-9, 2007: Meetings with the LCME preliminary database Section Coordinators and self study teams (Section I-Institutional Setting, Section II-Education Program, Section III-Medical Students, Section IV-Faculty, Section V-Education Resources, Section VI-Course Forms) to review schedule and deliverables.
- February 6, 2007: Deborah German meets with the Orange County Health Department
- February 7, 2007: Deborah German meets with leadership from Celebration Health
- February 9, 2007: LCME support Web site is launched (http://www.fctl.ucf.edu/medschool/)
- February 9, 2007: MD Program Curriculum Committee continues discussion of program learning outcomes, reviews draft curriculum schematic for the UCF MD program, course modules, and schedule of work products needed to meet the April 13 submission date.
- February 12, 2007: Review of candidates for Associate Dean for Faculty and Academic Affairs, and Associate Dean for Finance and Administration
- *February 13, 2007: First meeting with hospitals to negotiate affiliation agreement.*
- February 13, 2007: Deborah German meets with physician leaders of Orlando Regional Healthcare System

- February 14, 2007: First College of Medicine Learning Resource Center program meeting
- February 14, 2007: Board of Trustees Workshop on the financing plan for Lake Nona Campus
- February 15, 2007: Deborah German meets with physician leadership of the Seminole County Medical Society
- February 16, 2007: MD Program Curriculum Committee reviews final form for curriculum schematic and teams are assigned to develop the course modules and required course forms for preliminary accreditation.
- February 20, 2007: Course Worksheet Templates are submitted by course module teams (course description, course learning outcomes, required disciplines) and continued discussion about mission, vision, values, and goals
- February 28, 2007: Second College of Medicine Learning Resource Center program committee meeting to discuss elements of the building.
- March 2, 2007: MD Program Curriculum Committee module teams submit course requirements maps, contributions to LCME standards, links to program objectives, and course module template 2 (instruction hours and methods of evaluation).
- March 2, 2007: Initial drafts for 30% of the standards in the LCME database are received and initial draft of MD program catalog/handbook is submitted.

2. Timeline & Updates to Proposed Timeline

Each university was asked to provide an up-to-date and detailed timeline for program implementation, including all LCME-related issues, as well as provide corresponding narrative comments, including any changes from the timeline originally approved by the BOG. Visual representations of the timelines are attached as **Appendix C**. The narrative responses are below.

FLORIDA INTERNATIONAL UNIVERSITY

FIU expects to adhere to the timeline outlined in the original proposal with slight variations in two areas. Based on the funding request decision made by the BOG, the initial class will begin in Fall of 2009 instead of Fall 2008. In addition, the College of Medicine will reach its full capacity of 480 students by year 2015-16, one year earlier than originally planned. The following table indicates these variations.

1st Year	Original Plan	Cumulative	Current Plan	Cumulative HC
HC		HC		Current Plan
2009-10	36	36	40	40

2010-11	66	102	40	80
2011-12	78	180	80	160
2012-13	102	282	120	280
2013-14	120	366	120	360
2014-15	120	420	120	440
2015-16	120	462	120	480

UNIVERSITY OF CENTRAL FLORIDA

The MD Program proposal was submitted on September 14, 2005 with a planned presentation to the Board of Governors in November and approval expected at that time. The presentation was postponed by the BOG to allow additional time for study and took place on January 19, 2006. The MD program was approved by the BOG on March 23, 2006. Legislative approval took place on May 18, 2006; several months later than originally planned.

The original timeline submitted in the proposal was based on an anticipated January approval date and has necessarily shifted by about six months. In addition, at the time of the submission of the proposal, LCME had not yet established its process and timeline for new and developing medical schools. A meeting with LCME in July 2006 clarified the schedule and resulted in a decision to shift the schedule for admitting the first class by one-year from Fall 2008 to Fall 2009.

At the time of proposal presentation in January 2006, UCF had received a major gift of land and private donor pledges to build the medical college at the new location in Lake Nona. The construction schedule has been adjusted to accommodate a starting class of students in Fall 2009.

Listed below is an excerpt from the original implementation plan that was submitted as part of the proposal in September 2005. A third column has been added to the table showing the shift in the schedule that has resulted. A more detailed implementation schedule in Microsoft Project format is given in Appendix C and now forms the basis of all future plans.

UCF Timeline for Implementation of Program, A	fter Approval for l	Implementation
Activity	Original Date	Revised Date
Architectural designs completed on Burnett College of Biomedical Sciences Building	Fall 2005	Spring 2006
Presentation to BOG of M.D. degree program (scheduled)	November 2005	January 19, 2006
Search begins for dean of College of Medicine	Spring 2006	Late Summer

UCF Timeline for Implementation of Program, A		
Activity	Original Date	Revised Date
		2006
Dean hired	July 2006	December 2006
Facilities planning begins on College of Medicine instructional building, architectural designs completed	Summer 2006	January 2007
Associate and assistant deans and department chairs hired	Fall 2006	April 2007
Detailed discussions with hospitals on residencies and practice plan	Fall 2006	Spring – Fall 2007
Admissions Office formed, staff hired. Other offices such as Financial Aid, Student Services, Research and Development added during remainder of year.	End of Fall 2006	Spring 2007
Recruiting efforts begin with medical career fairs every fall and medical days every spring.	End of Fall 2006	Spring 2008
Faculty hiring continues with 2 basic science and 4 clinical science faculty	2006	Spring-Summer 2007
Instructional building construction begins	Fall 2006	January 2008
Curriculum refinements made	Spring 2007	Spring – Summer 2007
Curriculum and other faculty committees formed	Spring 2007	Spring 2007
Request by President to LCME for provisional preliminary accreditation	August 2007	January 2007
Admissions process begins with the American Medical College Application Service (AMCAS)	Fall 2007	Spring 2008
Research building construction finished	Fall 2007	April 2009
Faculty hiring continues with 2 faculty hired on existing lines, 5 new basic science faculty hired, and 6 new clinical science faculty hired	2007	Fall 2008
LCME provides consultation site visit to assist with early planning for accreditation	Fall 2007	January 2007
UCF prepares Medical Education Database and sends to LCME for review	Late Fall 2007	April 13, 2007
LCME grants provisional preliminary accreditation based upon database and survey team report	Spring 2008	February 2008
Applications reviewed and admissions decisions made for Fall 2008 2009 enrollment date	Spring 2008	Fall 2008
Instructional building completed	Summer 2008	June 2009
First class starts with 40 students	Fall 2008	August 2009

3. Adherence to Proposal & Updates to Implementation Plan

Each university was asked to provide information evaluating their level of adherence to the original proposal approved by the BOG. If any changes were made to the originally proposed and approved information, the universities were

asked to provide detailed explanations for why the changes took place, current status, and steps being taken to address the changes, were provided. Finally, if there were changes to the original information, the universities were asked to explain any potential impact to the implementation timeline. The narrative responses are below.

FLORIDA INTERNATIONAL UNIVERSITY

The proposal submitted to the BOG was created in the absence of the medical school dean and thus there may be some deviations from the original proposal. FIU is currently addressing the integration of the university infrastructure, establishing the medical school administration and developing the student curriculum. Thus far, the founding Dean and Associate Deans for student affairs, clinical affairs, and academic affairs have been hired or selected. We have now identified Jackson Health Systems as our primary public affiliate. An affiliation agreement is being developed with The Public Health Trust (Jackson) and is scheduled to be presented at their upcoming Public Health Trust Committee meeting on March 14th and the full Board meeting in late April. In addition we continue to have discussions with a number of private partners referenced in the original proposal. We anticipate completion of affiliation agreements by late Fall 2007.

University of Central Florida

No changes other than those schedule changes described in the preceding section are anticipated. The number of anticipated students, faculty and administrative staff, donor pledges, and economic benefit meet or exceed the goals set in the proposal. Both Florida Hospital and the Orlando Regional Healthcare System are developing affiliation agreements with the UCF College of Medicine as proposed, however, the details of the affiliation agreements with the hospitals are still under negotiation and will likely differ in detail from what was described in the proposal.

4. Acquisition of Funds - Public Dollars, Private Donations, & Matching Funds

Each university was asked to provide narrative comments regarding the acquisition of medical school-specific funds, both public and private, and provide responses to the following issues:

- 1) the amount of medical school-specific public funds proposed, requested, received, and utilized;
- the amount of each private donation originally projected in proposal (or presented to the BOG), its source, and for what purpose the donation was to be utilized;

- 3) the actual amount of private donations received to-date, and from what source;
- 4) the amount of private donations utilized to-date, and for what purpose;
- 5) the amount of matching funds proposed, requested, received, and utilized;
- 6) if originally proposed amount of private donations has not yet been received, explain steps being taken to replace the funds and how non-receipt may impact implementation; and
- 7) list any other anticipated private donations that have not yet been received.

Additional information is attached as **Appendix D**. The narrative responses are below.

FLORIDA INTERNATIONAL UNIVERSITY

- 1) Funding for the Medical School is expected to be specifically appropriated in the current legislative session to begin in 2007-08. FIU is requesting \$5.4M in recurring funds. No specific Medical School funds have been allocated to date. As of January 31st, 2007 some non-specific Medical School funds have been used primarily for recruiting of the College of Medicine executive staff, including the Dean and the Executive Associate Deans.
- 2) FIU's budget noted a private contribution of \$20 million that would be used for facilities expansion required for the College of Medicine's research enterprise. This \$20 million was not received. Considering that the funds were not intended for instruction, operation, or needs associated with accreditation, the College of Medicine start-up is on target for Fall 2009. Three associate deans, including an Executive Associate Dean of Academic Affairs who is a member of the Institute of Medicine, have been hired. A process for creating the accreditation self study is underway and we expect to complete affiliation agreements with the public partner by March 2007 and with private partners by Fall 2007. Each of these partnerships should produce an additional revenue stream for the College of Medicine and contributions to its endowment
- 3) Since receiving approval for the College of Medicine, FIU has obtained widespread local support, as is evidenced by our Founders Program, for which in the last two months alone, 26 entities and individuals have committed \$50,000 each (details found in Appendix D). Our expectations are that the Founder's Program will raise a target of over \$5 million by the end of this year. This response from these donors has encouraged us to launch a \$100 million campaign (including match) for the College of Medicine.
- 4) No private donations have been used to date.

- 5) No matching funds have been requested to date.
- 6) Though not included in the original proposal, but mentioned as a possibility during FIU's presentation to the BOG, an anticipated \$5 million donation for scholarships has been pursued. It is the intent of the donor that these funds will be awarded within the next 60 days, at which time FIU will apply for a \$5 million State Match.
- 7) FIU is concentrating its fundraising efforts on obtaining endowment funds for chair positions that would be part of the recruitment package for the chairpersons of the major departments. Such endowments will enhance our ability to continue to hire distinguished academic leaders. Currently, we have five active proposals to provide endowments for these five critical academic positions. We expect to conclude negotiations for these this spring.

University of Central Florida

- 1) No funds were specifically proposed or requested for 2006-2007. However, in the 2006-2007 Legislative Appropriation Bill, UCF received a \$3 million allocation to support of life sciences. To date, \$467,907.39 dollars have been utilized to support the College of Medicine for consultations, hiring processes, dean's salary, salaries for administrative assistants and coordinators, supplies and materials related to the medical college, the \$25,000 LCME initiation fee, and travel costs.
- 2) The original proposal stated the UCF would obtain additional funding of \$20 million (over the \$10 million already pledged for the Biomedical Research Center) from private sources to build the facilities (research, instructional, and office space for the medical college and a medical library) for the medical school and UCF would not request additional PECO dollars for that purpose. The following is an excerpt from the proposal (please note that the items in brackets were added for clarity, since this is an excerpt):

"Funding for the construction of the expanded [Biomedical research] facility has been obtained from a \$10 million private gift from the Burnett family, a \$10 million matching state fund, and \$22 million from the UCF capital budget (PECO). This facility will provide 133,000 additional net square feet of space and will be available in 2007. This building will supply the research space for the [both] College of Medicine [and the Burnett College of Biomedical Sciences].

Space requirements for support of the medical program will call for an additional instructional building of 120,000 square feet. This building will house the administrative and faculty offices of the program as well as instructional space (lecture and laboratory), the medical library,

admissions, and student services offices. The projected cost of the building is estimated to be \$40 million, for which the university will seek private funding support from the community of \$20 million, and then use a Courtelis state match of \$20 million. The total for construction of the two buildings is [estimated in September 2005 to be] \$82 million."

Note that since the submission of the proposal in September 2005, the construction costs for the Biomedical Research building have escalated. UCF is honoring its commitment to not request additional PECO dollars and is in the process of developing a financing plan using indirect overhead recovery as repayment. The process for obtaining financing is described more fully under the financial plans section of this report.

3) The donations and sources to date are provided in the Table below:

Burnett College of Biomedical Sciences Center Fund	12,500,000.00	Corporation	12/20/06	910000079
Submit for Match	12,500,000.00			
acility: Medical Campus Capital Campaign				
Medical Campus Capital Campaign	250,000.00	Corporation	05/18/06	960005021
Medical Campus Capital Campaign	400,000.00	Corporation	05/25/06	960000146
Medical Campus Capital Campaign	1,000,000.00	Corporation	06/12/06	960001145
Medical Campus Capital Campaign	200,000.00	Corporation	06/22/06	000006243
Medical Campus Capital Campaign	250.00	Individual	06/30/06	000003642
Medical Campus Capital Campaign	250.00	Individual	06/30/06	000004978
Medical Campus Capital Campaign	200,000.00	Corporation	07/19/06	000006418
Medical Campus Capital Campaign	300,000.00	Corporation	08/28/06	92000008
Medical Campus Capital Campaign	250,000.00	Corporation	09/05/06	96000489
Medical Campus Capital Campaign	250,000.00	Government	11/02/06	91000012
Medical Campus Capital Campaign	100,000.00	Government	11/08/06	91000008
Medical Campus Capital Campaign	133,333.33	Corporation	11/13/06	94000053
Medical Campus Capital Campaign	100.00	Individual	11/27/06	96000320
Medical Campus Capital Campaign	25,000.00	Corporation	11/27/06	00000643
Medical Campus Capital Campaign	50,000.00	Government	11/27/06	92000061
Medical Campus Capital Campaign	100,000.00	Individual	11/29/06	00000573
Medical Campus Capital Campaign	100,000.00	Individual	11/29/06	92000045
Medical Campus Capital Campaign	200,000.00	Corporation	12/05/06	96000000
Medical Campus Capital Campaign	50,000.00	Corporation	12/11/06	96000265
Medical Campus Capital Campaign	82.50	Individual	12/15/06	96000541
Medical Campus Capital Campaign	250,000.00	Corporation	12/18/06	96000461
Medical Campus Capital Campaign	200,000.00	Corporation	12/19/06	96000137
Medical Campus Capital Campaign	200,000.00	Corporation	12/19/06	96000137
Medical Campus Capital Campaign	250,000.00	Individual	12/30/06	00000632
Medical Campus Capital Campaign	333,000.00	Corporation	01/19/07	94000053
Medical Campus Capital Campaign	200,000.00	Corporation	01/19/07	00000621
Medical Campus Capital Campaign	50.00	Individual	01/18/07	20070002
Medical Campus Capital Campaign	50.00	Individual	02/05/07	96000320
	5,042,115.83			
Total Burnett Biomedical Research Building				
and the Medical College Building	17,542,115.83			

In the proposal to the Board of Governors, UCF was originally projecting pledges of \$30 million (including the \$10 million Burnett gift already pledged) as seen in FBOG Table 2M of the proposal. The pledges actually received prior to March 2006 amounted to \$37.1 million excluding the land donation. Additional pledges of \$150,000 have come in beyond the pledges made prior to March 2006 and UCF is continuing to receive pledges. The lead gift of \$12.5 million from Tavistock Group

was received by UCF prior to December 31, 2006.

For the College of Medicine Learning Resource Center, the \$24.7 million in donations, plus the Matching State Funds as provided under the Courtelis Matching Funds Program of \$23.1 (note that \$1.6 million is made up of government grants and is not eligible for State Match), will provide the University with over \$48 million for the building. As of December 31, 2006 the University has collected over \$5 million in cash from pledged receipts with approximately \$4.5 in Courtelis Matching Funds, awaiting approval by the Florida Legislature. The balance of the expected pledges and the state matching funds is shown below, along with expected receipt of the Courtelis Matching Funds. Construction is scheduled to begin in January 2008 and be completed by May 2009.

COLLEGE OF MEDICINE LEARNING RESOURCE CENTER

	D ('	26.11	Funds
	Donation Receipt	Matching Grant*	Available for Disbursement
On Hand as of <u>12/31/06*</u>	\$4,841,666		\$400,000
7/1/2007		\$4,441,666	
11/1/2007			\$8,883,332
12/31/2007	\$6,441,666		\$600,000
7/1/2008		\$5,841,666	
11/1/2008			\$11,688,332
12/31/2008	\$6,041,667		\$450,000
7/1/2009		\$5,591,667	
11/1/2009			\$11,183,334
12/31/2009	\$5,008,333		\$250,000
7/1/2010		\$4,758,333	
11/1/2010			\$9,516,666
12/31/2010	\$2,808,333		
7/1/2011		\$2,808,333	
11/1/2011			\$5,616,666

 $^{{}^{\}star}$ note that additional funds were received in January.

For the Burnett Biomedical Research Building that will house research faculty from both the Burnett College of Biomedical Sciences and the College of Medicine, the university received the \$12.5 million gift prior to January 2007 and has also requested and expects the Legislature to appropriate \$12.5 million of Courtelis Matching Funds to be included in the State of Florida FY 2007/2008 Budget (July 1,

- 2007). Receipt of Courtelis State Match funding is expected by November 1, 2007. Construction is scheduled to begin in April, 2007 and be completed by April, 2009.
- 4) As of February 20, 2007, no private donations have been utilized and only existing PECO funds have been spent on the Biomedical Research Building for architectural and planning purposes. In addition, \$400,000 of government grants already received for the medical college has been allocated for architectural and planning purposes for the College of Medicine building. Matching funds for FY 07/08 for the Burnett Biomedical Research and the College of Medicine buildings have been requested.
- 5) The amount of matching funds proposed, requested, received, and utilized, is as follows:

5A) Matching funds for the Biomedical Research Building

Proposed: FY 08/09 \$2,500,000. Requested: FY 07/08 \$ \$1,160,667 Requested: FY 07/08 \$12,500,000

Received (not yet utilized): FY 06/07: \$6,423,500

Total Bio Medical: \$22,584,167.

5B) Matching funds for College of Medicine Building (note that the dollars shown are estimates)

Proposed: FY 11/12 \$2,888,333 Proposed: FY 10/11 \$4,758,333 Proposed: FY 09/10 \$5,591,667 Proposed: FY 08/09 \$4,681,000 Requested: FY 07/08 \$4,109,016 Total Medical School: \$22,028,349.

5. Financial Plans & Expenditure Information

Each university was asked to provide narrative comments regarding its approved financial business plan and all expenditures made for planning or implementation of its medical school, as well as attach the plan, if approved. If the financial plan had not yet received appropriate university-level approval, the university was advised to indicate such, provide a timeline for approval, and submit the financial plan immediately following its approval. The narrative responses are below.

FLORIDA INTERNATIONAL UNIVERSITY

FIU is currently developing a financial plan, which will be submitted as part of the LCME self-study documents. This plan will include revenues and expenditures for the next 3 years. Once this plan is completed a copy will be forwarded to the BOG.

Expenses attributed to the implementation of the College of Medicine as of January 31, 2007 are approximately \$475,000. The primary use of the expenditures to date was for accreditation consultants and the recruiting and hiring of the senior management for the College of Medicine which includes the Dean and three Executive Associate Deans.

University of Central Florida

This section is divided into two parts: 1) Financial Plan for Construction; and 2) College of Medicine Operating Budget.

Financial Plan for Construction:

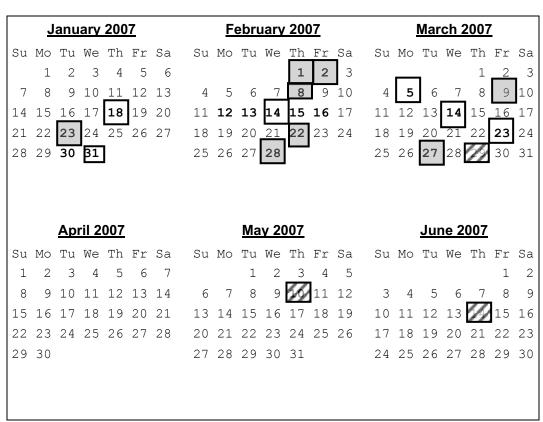
The table below summarizes the expenditures to-date for construction of the buildings at Lake Nona:

BIO MEDICAL RESEARCH FACILITY LOCATED ON HEALTH SCIENCES CAMPUS AT LAKE NONA				
ENCUMBRANCES and EXPENDITURES TO-DATE (3/2/07)				
Architectural/ Engineering (HOK)	\$5,560,133			
Permits	\$25,140			
Construction (Whiting Turner)	\$6,121,418			
Construction Planning	\$878,758			
Subtotal	\$12,585,449			
MEDICAL SCHOOL INSTRUCTIONAL and HEALTH SCIENCES LIBRARY LOCATED ON HEALTH SCIENCES CAMPUS AT LAKE NONA				
ENCUMBRANCES and EXPENDITURES TO-DATE (3/2/07)				
Architectural/ Engineering (Hunton Brady)	\$149,800			
Construction Planning (Centex)	\$35,995			
Subtotal	\$185,795			

The complete financial plan for construction has not yet been finalized and approved. The construction of the two buildings at the Health Sciences Campus at Lake Nona will require financing arrangements due to the timing of the receipt of the private donations over a five-year period and an anticipated shortfall in construction dollars for the Burnett Biomedical Research building due to cost escalation. The plan and schedule below shows the process that UCF is going through to seek appropriate approvals:

Health Sciences Campus Financing Approval Process Schedule

Denotes proposed dates for BOT member involvement (e.g., presentations, conference calls, or workshops)
Denotes when materials would be sent or received
Denotes scheduled BOG meetings – May 10 is the targeted date for BOG approval



Note: Materials to BOG must go out at least six weeks prior to the scheduled meeting.

<u>Ianuary 18</u>: Finance Committee Construction Update: Talk about what is coming (need for financing), critical dates (BOG approval prior to July 1 and critical construction dates), Seek input on proposed process and proposed schedule.

<u>January 23</u>: Send conference call materials to BOT Finance Committee on RFP for Bank Line of Credit

<u>Ianuary 31</u>: BOT Finance Committee Conference Call: Provide general overview of financing plan and seek approval to send out the RFP (to get necessary detail to support the financing plan document)

<u>February 1</u>: Distribute RFPs for Bank Line of Credit

<u>February 2</u>: Send Workshop materials to BOT

February 8: Pre-proposal conference

<u>February 14, 8:30 – 11:30</u>: BOT (full board) Workshop. Provide overview of campus plan for UCF Health Sciences Campus at Lake Nona, update on the College of Medicine, and overview of the financing plan for Phase I. Seek approval for DSO

February 22: Responses to RFPs are due

February 28: Analysis and Recommendations are completed and submitted to BOT

<u>March 5</u>: BOT Finance Committee Conference Call: To obtain concurrent to proceed with the underwriters.

March 6: Send Workshop materials to BOT

March 9: Submit draft materials to BOG staff in preparation for May 10th BOG meeting.

<u>March 14</u>: BOT Workshop to precede the main BOT meeting. Detailed review of the financing plan. Test if the BOT is ready to vote on approval of the Line of Credit and Adoption of Authorizing Resolution for Bonds to go to BOG

March 23: Date held for BOT Conference call, if approvals do not take place on the 14th

<u>March 27</u>: Submit finalized financing Plan resolution for Bond Financing to the BOG staff

May 10: Presentation of resolution to Board of Governors for approval.

<u>Iune 14</u>: Alternate date for Board of Governors approval of resolution.

College of Medicine Operating Budget:

UCF received a special allocation of \$3 million in support of life sciences. The following table provides a detail of the expenditures to-date from the \$3 million allocation for 2006-2007.

PERSONNEL EXPENDITURES			
	FACULTY	\$84,291.18	
	ADMIN AND PROF	\$6,513.40	
	UNIV SUP PERSONNEL SYSTEM	\$3,982.25	
	SOCIAL SECURITY MATCHING	\$7,258.21	

	STATE RETIREMENT	\$383.38
	OPTIONAL RET PLAN MATCHING	\$9,470.94
	PRETAX ADMIN ASSESSMENTS	\$11.46
	STATE HEALTH EMPL CONTR	\$1,211.56
		\$(50.00)
	UCF 494007M0009	\$396.16
	STATE LIFE EMPLOYERS CONTR	\$190.27
	TEMPORARY EMPLOYMENT	\$3,200.00
	SOCIAL SECURITY MATCH	\$46.40
Subtotal		\$116,815.21
	CONSULTING SERVICES	
	Korn/Ferry International	\$273,377.00
	Myra Hurt	\$956.71
	Whitcomb MD, Michael E	\$17,075.88
Subtotal		\$291,409.59
	OPERATING EXPENSES	
	Association of American Medical Colleges	\$25,000.00
	TRAVEL OUT OF STATE	\$1,643.18
	Operating Expenses	\$33,039.41
Subtotal		\$59,682.59
Grand Total		\$467,907.39

6. Facilities, Construction, & PECO

As part of the proposal process, both institutions indicated that no *new* PECO funds would be requested to construct the facilities needed to implement the medical schools. Each indicated a significant amount of private donations that would be utilized for this purpose. The universities were asked to provide narrative comments on the following, for which the narrative is below:

- 1) type of facilities being built to support the Medical School;
- 2) funding status related to facilities (funding projected, received, utilized);
- 3) construction status;
- 4) adherence to proposal and timeline; and
- 5) contingency plans, if the necessary funds are not received.

FLORIDA INTERNATIONAL UNIVERSITY

1) The Molecular Biology Building (renamed the Nursing and Health Sciences Building), which was referenced in our original proposal, will have instructional, research and administrative space.

- 2) FIU has received all PECO funding (\$20M) for the above referenced building.
- 3) The programming for this building has begun and it is expected to be ready for occupancy by December 2009. The current HLS complex will be retrofitted for use as the initial instructional facility. We expect to raise funding for space expansion that would be required when enrollment reaches 480 students.
- 4) This building adheres to the original proposal in all aspects.
- 5) All funds for this building have been received.

University of Central Florida

1) Two buildings are envisioned to support the medical program, The College of Medicine Learning Resource Center and the Burnett Biomedical Research building. The College of Medicine Learning Resource Center, an approximate 100,000 square foot building, which will house the College of Medicine administrative offices, will contain a medical library, laboratories, learning resources, office space, and classrooms. The building is estimated to cost approximately \$43 million. The Burnett Biomedical Sciences Building will consist of 198,000 square feet of labs and office space. Two floors of the Burnett building, with an estimated cost of \$25 million (\$12.5 million of gifted funds and \$12.5 million in matching funds) will be used to house the basic science faculty who will have instruction responsibilities for the MD degree program. The total project cost is estimated as over \$100 million.

Approximately two months after the submission of the medical program proposal to the Board of Governors, the Tavistock Group pledged to donate a 50-acre site in Lake Nona and \$12.5 million in support of a medical college at UCF. Subsequent to this lead gift, the university received commitments for over \$100 million (including the state matching funds) to support the construction of medical college facilities at the Lake Nona site. The 50-acre site at Lake Nona has now been designated the UCF Health Sciences Campus at Lake Nona and will afford UCF the opportunity to not only build a new medical college but also expand its existing instructional and research activities in health-related fields.

The Biomedical Research Building, which received PECO funding last year, was originally shown as the Bio-Medical Science Center in the 2006 appropriation bill, and was slated to be constructed on the main campus of the University of Central Florida. On December 21, 2006, UCF submitted a formal request to the Chancellor to move this building to the Lake Nona site. The Board of Governors approved UCF's request at its January 25th meeting.

1A) Type of facilities being built to support Burnett Biomedical Research building:

- Research Labs
- Vivarium space
- Administrative space
- Mechanical Floor for building supporting systems
- 1B) Type of facilities being built to support College of Medicine Learning Resource Center:
 - Medical library
 - Instructional space
 - Administrative space
 - Simulation center
 - Faculty offices
 - Information technologies data support
 - Building and campus support space
- 2) The funding for the College of Medicine Learning Resource Center will be through private donations and associated Courtelis matching funds. The funding for the Burnett Biomedical Research building will be through a combination of PECO funds, private donations and the associated Courtelis matching funds, and the issuance of a bond secured by overhead return from sponsored research (currently going through appropriate approvals described earlier).
 - 2A) Biomedical Research building
 - \$10,031,048 FY 2005-2006 (PECO)
 - \$11,868,952 FY 2006-2007 (PECO)
 - \$12,847,000 FY 2006-2007 (\$6,423,500 Donations + Matching Funds)
 - \$ 2,321,334 FY 2007-2008 (\$1,160,667 Donations + Matching Funds)
 - \$25,000,000 FY 2007-2008 (\$12,500,000 Donation + Matching Funds)
 - \$ 5,000,000 FY 2008-2009 (\$2,500,000 Donation + Matching Funds)
 - \$67,068,334 Total
 - *June 2007: Issuance of a bond to build out the remaining portion of the building.*
 - 2B) College of Medicine Learning Resource Center building (Approximate: details pending approval of line of credit)
 - \$8,218,032 Funding Year 2007-2008
 - \$34,781,968 Funding Year 2008-2009
 - **\$43,000,000** Total
- 3) Construction Status
 - 3A) Bio Medical Research Construction Status;
 - *A/E and CM selection (Complete)*
 - Program development (Complete 2006)

- Conceptual and advanced Schematics (April to Aug 2006 complete)
- design development (Sept 2006 to Jan 2007 complete)
- *construction documents* 50% (Feb 2007 complete)
- Phase 1 Guaranteed Maximum Price (GMP) (Feb 2007 complete)
- *Phase 1 early site work (March 2007 on schedule)*
- Phase 2 Guaranteed Maximum Price (GMP) (April 2007)
- Construction documents 100% (July 2007)
- Phase 3 Guaranteed Maximum Price (GMP) (July 2007)
- Construction (April 2007-April 2009, 24 months)
- 3B) Medical School Construction status;
 - *A/E and CM selection (December 2006 Complete)*
 - *Program development (February to March 2007 in progress)*
 - Conceptual and advanced Schematics (April to May 2007)
 - Design development (June to July 2007)
 - Construction documents 50% (August to September 2007)
 - Early site work Guaranteed Maximum Price (GMP) (Sept. to October 2007)
 - Construction documents 100% (October to November 2007)
 - *Guaranteed maximum price (GMP) (December 2007)*
 - Construction (January 2008 June 2009; 18 months)
- 4) The Biomedical Research and College of Medicine buildings are both on schedule as presented above.
- 5) If sufficient funding for the Biomedical Research building is not received, then the plan is to shell some of the research space until sufficient funds are secured. The building has been planned in three phases (as shown above in the construction schedule) to plan for this contingency.

If sufficient funding is not received for the College of Medicine Learning Resource Center, we will use existing space within the University Towers building, which is located in the Research Park adjacent to the UCF campus. Space in this building is currently being renovated to house the College of Medicine faculty and administration until the building is completed at Lake Nona. Contingency space is also planned in the University Towers building to teach the first year of the curriculum in case the building at Lake Nona is delayed. The building at Lake Nona will also have a phased construction plan that will allow space to be shelled in the event that there is a funding shortfall.

C. Phase II Elements - Post-Implementation

1. Impact on Expanded Physician Workforce

As indicated in the proposals, as well as the CEPRI Report, an outcome of increasing the physician workforce was a primary impetus behind approval of

new medical schools. However, enrollment cannot be considered until preliminary accreditation is granted, so *tracking of this element will begin at a later date*. Each institution will be asked to report on factors such as: 1) projected enrollment growth as presented in proposal; 2) number of applicants, accepted applicants, matriculants (by race/ethnicity, gender, resident status); 3) Number of Faculty Members (by race/ethnicity, gender, rank); 4) Faculty/ Student Ratio; 5) and if the institution is participating in any external efforts to expand Florida's physician workforce.

2. Graduate Medical Education

In recognition of the CEPRI Report's assessment that graduate medical education opportunities in Florida need to be increased in order for the State to have a positive impact on the physician workforce, each institution was asked as part of the approval process to indicate how it might contribute to development of increased residency opportunities in Florida. At an appropriate point of program development, institutions will be asked to report as to progress on this measure. However, due to implementation issues, *this measure will not be tracked until a later date*. Each institution will be asked to report on factors such as: 1) Proposed and Actual number of residency positions each assists in establishing for the state; 2) Proposed and Actual Anticipated Partnerships in Residency Provision; 3) Proposed and Actual Funding for Residency Positions; 4) and if the institution is participating in any external efforts to expand Florida's Graduate Medical Education opportunities.

3. Direct & Indirect Economic Development Outcomes

As part of the approval process, each institution prepared and submitted an Economic Impact Statement. The outcomes for this will not be realized until implementation has taken place. As such, *tracking for this element will begin at a later date*. The institutions will also be asked to report if they are participating in any external efforts to positively impact economic development outcomes.

The measures above will be formally tracked during Phase II. In the meantime, the universities were asked to narrative comments confirming alignment with accreditation expectations and detailing any preliminary progress made to-date on the elements. The universities were also asked to indicate if the institution has been involved in any efforts external to medical school implementation meant to address physician workforce shortage, increase graduate medical education opportunities or funding, or ascertain/develop/impact direct or indirect economic development outcomes. The narrative responses are below.

FLORIDA INTERNATIONAL UNIVERSITY

We are continuing discussions with our potential private partners on plans to begin or expand residency programs. These plans will further develop as we work to construct affiliation and operating agreements with these partners (as detailed on point B3). FIU's goal of increasing residency programs and participation remains central to our development of the medical school initiative.

University of Central Florida

UCF confirms that it will adhere to all accreditation expectations. UCF will not advertise or recruit students until it has received preliminary accreditation. UCF confirms that open and honest communication with the Board of Governors will continue concerning the progress made toward accreditation and details of other elements related to the implementation of the College of Medicine.

Since the approval of UCF College of Medicine, the movement toward the vision of developing a medical cluster at Lake Nona has proceeded very rapidly. In recognition of the shared vision of creating a medical cluster at Lake Nona, the Burnham Institute chose to locate its new Florida initiative adjacent to the UCF Health Sciences Campus at Lake Nona, the University of Florida announced its intent to build a research facility adjacent to the Burnham Institute and the UCF Health Sciences Campus at Lake Nona, and discussions are ongoing with several healthcare providers to build hospitals in close proximity to the UCF Health Sciences Campus at Lake Nona. Nemours Foundation announced its decision to select Lake Nona for its proposed free-standing Children's Hospital pending approval of the certificate of need. Furthermore, the Veterans Affairs Secretary Jim Nicholson has selected Lake Nona as the new home of a half-billion-dollar medical complex.

In addition, UCF's dean along with all of the other medical school deans in Florida have banded together to support legislation that would expand residency training in Florida and 23 other states where physician shortages are predicted. If passed, Florida hospitals would gain 347 new residency positions.

IV. LONG-TERM LEGISLATIVE BUDGET REQUEST DEVELOPMENT

As part of the multi-pronged comprehensive plan for expansion of medical education, each medical program was asked to submit potential long-term requests to support the Resolution. The operating and fixed capital outlay plans submitted and adopted by the Board last summer is attached as **Appendix E**.

Each university was asked a series of questions regarding its plans as presented to the Board. These questions and responses helped clarify each university's medical education plans. Also, as referenced on pages 4 and 5 of this report, as well as the preceding section, the Colleges of Medicine continue to take steps to be responsive to the intent of the Resolution.

The University of Central Florida and Florida International University will continue with the funding implementation of the two new medical schools identified in their original medical school submissions. Florida Atlantic University's medical partnership with the University of Miami is on track and will be completed in 2008-09.

The University of Florida will be at capacity with an entering class of 135 students (total enrollment of 540 students) after 2008-09. Although the UF would like to expand its entering class to 180 students, this cannot be done until a new facility is constructed.

Currently, the University of South Florida is at capacity with 480 students. Before additional students can be added, a new facility would need to be constructed. The enrollment expansion identified in Appendix E is contingent on a new facility being constructed.

Florida State University is continuing implementation of its medical education plan with full capacity of 480 students expected in 2010-11. The Board approved a 2007-08 request for the replacement of non-recurring funds for clinical training sites at Daytona Beach and Immokalee. FSU's request to replace non-recurring funds for clinical training sites at Panama City and Ft. Pierce were requested by FSU, but not adopted by the Board.

The Governor's recommended budget for 2007-08 included planning funds for UCF and FIU. In addition, full funding was requested for the FAU medical partnership with the UM. As this report was being developed, the Legislature had not acted on any medical education budget request issues.

All plans submitted by the universities will be reviewed and updated as necessary this Summer, in preparation for the 2008-2009 budget cycle.

V. CONCLUSION

As efforts continue to develop and gain momentum with the goal of addressing the State's physician workforce shortage, it is important to reflect on the strategies identified within the Resolution, as well as what is already taking place in the State University System in furtherance of the Resolution. This Progress Report is meant to provide the Board of Governors with a status update on several areas of the Resolution, with particular emphasis on the progress of and

accountability for implementation of the two new medical schools approved by the Board of Governors. Also, by way of continued development of a long-term Legislative Budget Request specific to Medical Education, it is possible to strategically set the course for success well into the future.

The initiatives addressed in this report remain consistent with, and continue to build upon, the tenets of the CEPRI Report, which the Board of Governors acknowledged as a cornerstone and blueprint for addressing Florida's future healthcare needs in a comprehensive, logical, action-oriented, and collaborative manner. Further, collaborations continue with other interested stakeholders to advance the goals of the CEPRI Report, as well as those of the Board of Governors.

Similar progress updates will periodically take place as we move into the future and continue to advocate for the proactive planning for the future healthcare needs of Florida's citizens. This will enable the Board of Governors to remain at the forefront of Medical Education, and continue to assess the ways in which it might effect a positive impact on Florida's physician workforce and Medical Education, in general.

Appendix A: Resolution with Regard to the Future of Medical Education in Florida

Resolution With Regard to the Future of Medical Education in Florida

- WHEREAS, the Board of Governors finds that Florida's future healthcare service needs are a joint responsibility among multiple stakeholders including hospitals, other healthcare-providing institutions, academic accrediting bodies, Florida's postsecondary institutions and, critically, the Florida Legislature; and
- WHEREAS, the Board of Governors recognizes that virtually all potential actions to expand medical education have significant cost implications, the funding for which would need to be approved and provided by the Florida Legislature, and further, that any program leading to a degree offered as a credential for a license under Florida Law must be approved by the Florida Legislature pursuant to 1004.03(3), Florida Statutes; and
- WHEREAS, the Board finds that there is a shortage of physicians in Florida, particularly in certain geographical areas; that Florida's historical reliance on a large importation of physicians from other parts of the United States and beyond is not in the best interests of the public for the long-term; that, left unattended, this shortage will not diminish; and that, accordingly, Florida, a growing and dynamic state, must be proactive in planning for the future healthcare needs of its citizens; and
- WHEREAS, the Board finds that, historically and currently, access to medical education for fully qualified Floridians has been limited by the number of seats in Florida's existing medical schools; and
- WHEREAS, the Board finds that the policy of the State with respect to medical education must be a comprehensive approach, including at least the elements contained in this resolution, in order to meet the healthcare needs of Floridians; and
- WHEREAS, the Board finds, along with virtually all stakeholders, that creating more medical residencies is a first and immediate priority for Florida's healthcare system, and therefore urges the Florida Legislature to work with the Board, the existing medical schools, and all other appropriate bodies and constituents to increase and fund an appropriate number of additional high-quality residencies affiliated with those medical schools through existing or new programs in order to attract and retain more Florida medical school graduates, including access to those from underserved populations; and
- WHEREAS, the Board finds that institutions providing residency programs must be encouraged to periodically review their residency programs, making adjustments to ensure that residencies are in specialties that meet the needs of

the population and that attract and retain new physicians, including access to those from underserved populations; and

- WHEREAS, in addition to the creation of high-quality residencies, as a matter of policy the Board encourages the Legislature to consider providing funding for the existing Florida Health Service Corps and the Medical Education Reimbursement and Loan Repayment Program or by other means, to consider changes in law, as appropriate, that would incent Florida medical school graduates to practice in rural and other underserved areas, and to provide changes to our liability system such that new physicians can afford insurance and be able to enter the practice of medicine with the highest levels of professionalism without the overlay of financial insecurity and which will encourage those physicians to remain in the state long-term; and
- WHEREAS, the Board supports and encourages cost-efficient plans for expanding current medical education programs in the State University System, including the FAU/UM medical partnership, subsequent to the Board's formal approval, and as a priority matter requests the Legislature to fully fund all current enrollments and future expanded enrollments and needed associated facilities; and
- WHEREAS, the Board finds that, in addition to its findings set forth above, the two medical school proposals submitted by the University of Central Florida ("UCF") and Florida International University ("FIU") will create a source of high-quality jobs in their respective regions; that they will serve as growth engines for cutting-edge life sciences research and businesses; that the quality of life can be improved for the general population and surrounding areas; and that the growth will generate significant increases in state and local taxes annually that will support infrastructure needs and the ongoing operation of the two medical schools as presented; and
- WHEREAS, the Board encourages the Legislature to evaluate the sources of these increased taxes to optimize the capture and use of these revenues by the state as needed to support the continued operation of these medical education programs and their ancillary needs; and
- WHEREAS, it is the finding of the Board of Governors after extensive deliberation, testimony, and consideration, that Florida International University has performed the requisite feasibility and need-and-demand studies; planning and cost projections; analysis of current capabilities and resources; receipt of significant private funding commitments and continued exploration of such future private commitments; developed alliances and partnerships with appropriate hospitals and other institutions for high-quality residencies; and demonstrated return on investment in the form of regional economic

development to warrant the Board's concurrence that this institution is positioned and stands ready to add to Florida's future medical education by implementing a high-quality school of medicine; and

- WHEREAS, it is the finding of the Board of Governors after extensive deliberation, testimony, and consideration, that the University of Central Florida has performed the requisite feasibility and need-and-demand studies; planning and cost
- projections; analysis of current capabilities and resources; receipt of significant private funding commitments and continued exploration of such future private commitments; developed alliances and partnerships with appropriate hospitals and other institutions for high-quality residencies; and demonstrated return on investment in the form of regional economic development to warrant the Board's concurrence that this institution is positioned and stands ready to add to Florida's future medical education by implementing a high-quality school of medicine; and
- WHEREAS, the Board received advice and counsel from the Council for Education Policy, Research and Improvement's November 2004 "Medical Education Needs Analysis" (CEPRI Report) and considers it to be a cornerstone and blueprint for addressing Florida's future healthcare needs in a manner that is comprehensive, logical, action-oriented, collaborative, and expectant of tangible commitments on the parts of the Legislature, the Board of Governors, and the State University System.
- NOW THEREFORE BE IT RESOLVED that the Board of Governors takes the following action:
- 1. The Board of Governors approves the comprehensive approach to medical education as set forth above and in the CEPRI Report.
- 2. The Board of Governors approves Florida International University's request for a medical school and will support the University as it seeks approval from the Florida Legislature, as required by 1004.03(3), Florida Statutes.
- 3. The Board of Governors approves the University of Central Florida's request for a medical school and will support the University as it seeks approval from the Florida Legislature, as required by 1004.03(3), Florida Statutes.
- 4. The Board of Governors will not seek funding with regard to the FIU and UCF medical education programs approved above during the 2006 Legislative Session, beyond any related matters already contained in its current 2006-07 Legislative Budget Request.

- 5. The Board of Governors has and will continue to seek, and will request that the Legislature provide, full funding of the current unfunded medical school expanded enrollments and related needed facilities at the existing medical schools within the State University System and the FAU/UM medical partnership and state funding of additional residencies, as expeditiously as possible.
- 6. The Board of Governors directs staff to transmit to the Legislature a copy of this resolution, the CEPRI Report with a view toward implementation of the programs it contains, and the economic impact studies prepared by consultants for UCF and FIU, along with the supplemental tax information. The Board of Governors requests that the Legislature undertake an evaluation of the tax revenue to be generated by the above medical schools in order to create new state revenue sources, if appropriate, to support the ongoing needs of these medical education programs, residencies, and expanded enrollments associated with all of the state's medical education programs. The Board of Governors further requests that the Legislature undertake any other such appropriate actions to ensure that the annual State University System funding allocation from the Legislature for other educational programs and priorities will not be adversely affected by the substantial funding toward medical education.
- 7. The Board of Governors directs staff to develop, in conjunction with the University of Central Florida and Florida International University, a program of accountability measures addressing expenditures, expanded physician workforce, graduate medical education, direct and indirect economic development outcomes, or other measures, as appropriate, to be approved and continually evaluated by the Board of Governors.
- 8. The Board of Governors finds that it will not consider any future requests for medical schools, professional programs, or doctoral programs unless such requests are consistent with the Board of Governors' Strategic Plan, as it is modified from time to time, and are submitted in accordance with the Board's process for program approval.

PASSED AND ADOPTED by the Board of Governors of the State of Florida at a public meeting thereof duly called and held this 23rd day of March 2006.

Appendix B: LCME Minimum Requirements Checklists

LCME ACCREDITATION MINIMUM REQUIREMENTS CHECKLIST

FLORIDA INTERNATIONAL UNIVERSITY

	<u>Initiation of Review</u>									
	Program has contacted Secretariat for advice and consultation									
$\overline{\boxtimes}$	CEO of institution has submitted a written request to the Secretariat									
	Institution must pay the appropriate application fee of \$25,000									
	Program has utilized Secretariat staff for consultation to facilitate the orderly									
	development of program and full understanding of process and standards									
	<u>Institutional Setting</u>									
	For medical schools operating as part of a university, formal delineation of the									
	relationship between the medical school and the parent university									
	Definition of the governance structure of the medical school, including the composition and terms of membership of any governing board (<i>In Development</i>)									
	Development of a job description for the dean, with approval of the description from									
	appropriate university authorities									
	Appointment of founding dean									
l —	Appointment of senior leadership within the dean's staff, particularly in the areas of									
	academic affairs, student affairs, hospital relationships, and administration and finance									
	(Academic, Clinical, Student Affairs Appointed, Finance & Administration Recruiting) Appointment of administrative leadership (e.g., department chairs or their equivalent)									
	for academic units that will have major responsibilities for medical student education,									
	especially in those disciplines to be taught during the two years of the curriculum (<i>To be</i>									
	Recruited)									
	Chartering of the major standing committees of the medical school, particularly those									
	dealing with the curriculum, student advancement, admissions, and faculty promotion &									
	tenure (Curriculum Committee chartered in October 2006, others in development)									
	Educational Program									
	Definition of overall objectives for the educational program									
	Creation of a working plan for the curriculum as a whole, consistent with the educational									
	objectives									
	Detailed layout of the first year of study, including required courses and content, and									
	identification of the resources needed for the delivery of required courses (In									
	Development, faculty are needed) Specification of the types of teaching and student evaluation methods best suited for the									
	Specification of the types of teaching and student evaluation methods best suited for the achievement of educational objectives (<i>In Development</i>)									
	Design of a system for curriculum management and review (In Development)									
	Design of a system for educational program evaluation, including the designation of									
	outcome measures to indicate the achievement of overall educational objectives (<i>In</i>									
	Development – FIU has some program review in place)									

	Medical Students
	Clearly defined admissions policies and selection criteria (In Development)
	Adequate resources to assure essential student services in the areas of academic counseling, financial aid, health services, and personal counseling (In Development)
	Written standards and procedures for the evaluation, advancement, and graduation of students and for disciplinary action, including appeal mechanisms to assure due process (<i>In Development</i>)
	Standards of conduct for the teacher-learner relationship, including written policies for addressing violations of such standards (<i>In Development – FIU will leverage existing policies in place</i>)
	<u>Faculty</u>
	Written policies and procedures for faculty appointment, promotion, and tenure (<i>In Development – drafting faculty handbook</i>)
	Hiring of sufficient faculty to provide the first year of instruction for the medical education program, and other faculty as needed for the implementation of institutional plans regarding medical student admissions, curriculum planning and management, and achievement of other missions or goals (<i>To be Recruited</i>)
	A recruitment plan and timetable for hiring faculty to deliver the second year of the educational program (<i>In Development</i>)
	Educational Resources
	Budgets and supporting financial resources for the first five years of operation (<i>In Development</i>)
	Classroom space and supporting educational infrastructure for the first year of instruction (<i>In Development</i>)
	Plans for providing classroom space and any supporting educational infrastructure for the second year of study (<i>In Development</i>)
	Library and information technology services appropriate to the needs of the school for educational, research, and patient care (<i>In Development</i>)
\boxtimes	Identification of clinical teaching sites (<i>Primary affiliation with Jackson Health Center in progress</i>)

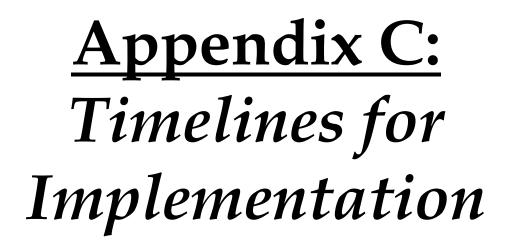
LCME ACCREDITATION MINIMUM REQUIREMENTS CHECKLIST

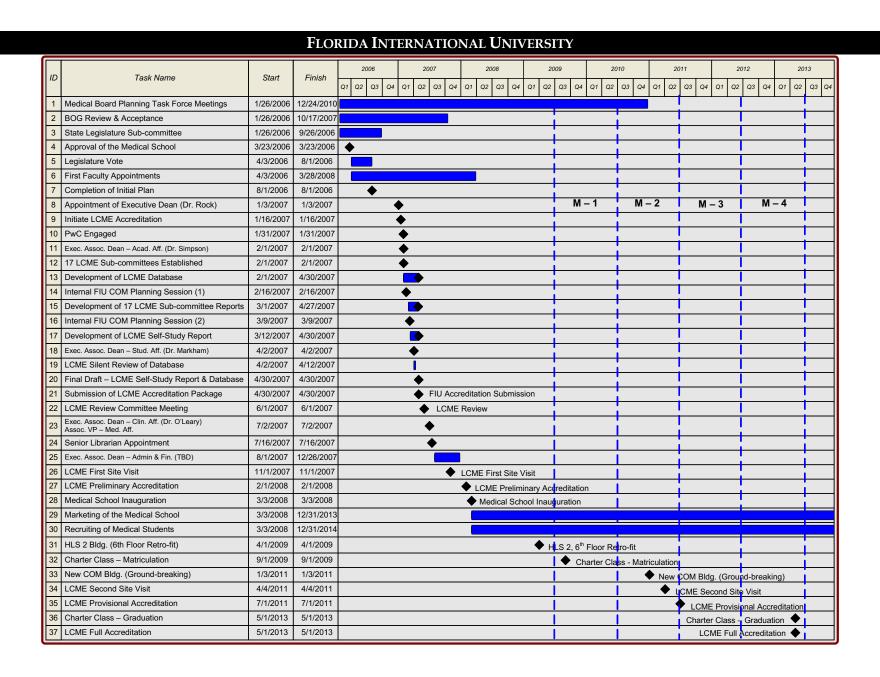
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UNIVERSITY OF CENTRAL FLORIDA

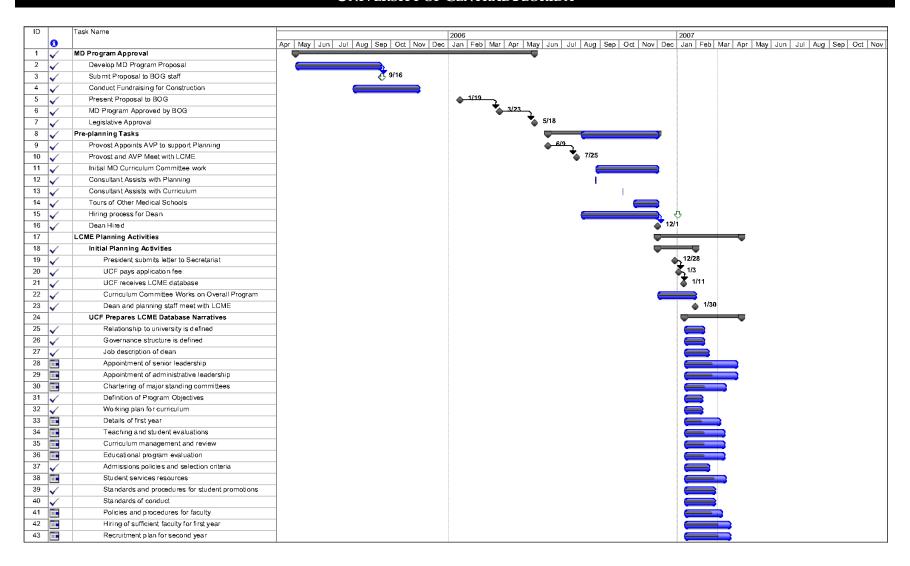
	<u>Initiation of Review</u>									
	Program has contacted Secretariat for advice and consultation									
	CEO of institution has submitted a written request to the Secretariat									
	Institution must pay the appropriate application fee of \$25,000									
	Program has utilized Secretariat staff for consultation to facilitate the orderly									
	development of program and full understanding of process and standards									
	Institutional Setting									
\boxtimes	For medical schools operating as part of a university, formal delineation of the relationship between the medical school and the parent university									
	Definition of the governance structure of the medical school, including the composition									
	and terms of membership of any governing board									
	Development of a job description for the dean, with approval of the description from appropriate university authorities									
	Appointment of founding dean									
	Appointment of senior leadership within the dean's staff, particularly in the areas of									
	academic affairs, student affairs, hospital relationships, and administration and finance									
	Appointment of administrative leadership (e.g., department chairs or their equivalent) for academic units that will have major responsibilities for medical student education, especially in those disciplines to be taught during the two years of the curriculum									
	Chartering of the major standing committees of the medical school, particularly those dealing with the curriculum, student advancement, admissions, and faculty promotion & tenure									
	Educational Program									
	Definition of overall objectives for the educational program									
	Creation of a working plan for the curriculum as a whole, consistent with the educational objectives									
	Detailed layout of the first year of study, including required courses and content, and									
	identification of the resources needed for the delivery of required courses									
	Specification of the types of teaching and student evaluation methods best suited for the									
	achievement of educational objectives									
	Design of a system for curriculum management and review									
	Design of a system for educational program evaluation, including the designation of outcome measures to indicate the achievement of overall educational objectives									
	Medical Students									
	Clearly defined admissions policies and selection criteria									

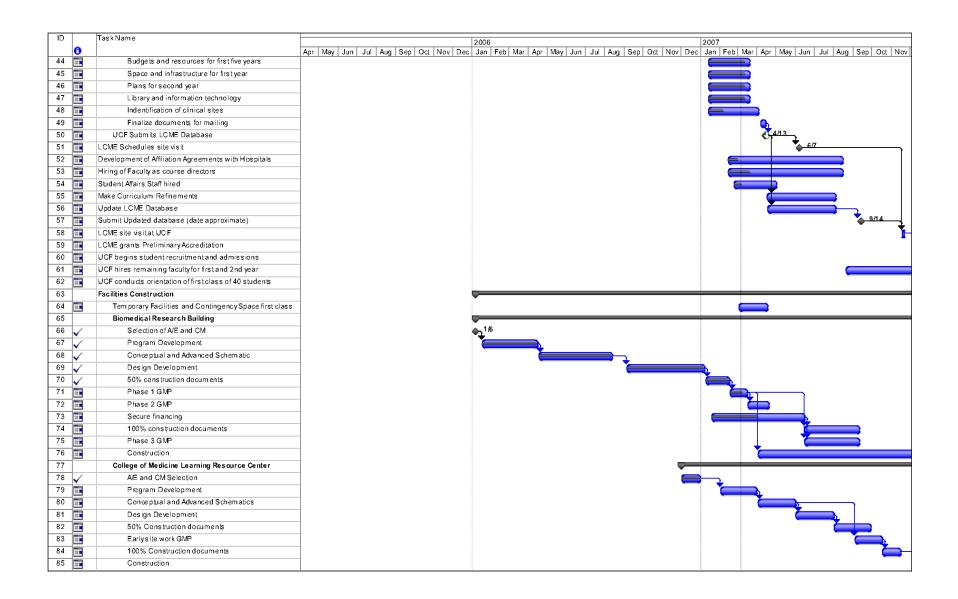
	Adequate resources to assure essential student services in the areas of academic counseling, financial aid, health services, and personal counseling
\boxtimes	Written standards and procedures for the evaluation, advancement, and graduation of students and for disciplinary action, including appeal mechanisms to assure due process
\boxtimes	Standards of conduct for the teacher-learner relationship, including written policies for addressing violations of such standards
	<u>Faculty</u>
	Written policies and procedures for faculty appointment, promotion, and tenure
	Hiring of sufficient faculty to provide the first year of instruction for the medical education program, and other faculty as needed for the implementation of institutional plans regarding medical student admissions, curriculum planning and management, and achievement of other missions or goals.
	A recruitment plan and timetable for hiring faculty to deliver the second year of the educational program
	Educational Resources
	Budgets and supporting financial resources for the first five years of operation
	Classroom space and supporting educational infrastructure for the first year of instruction
	Plans for providing classroom space and any supporting educational infrastructure for the second year of study
	Library and information technology services appropriate to the needs of the school for educational, research, and patient care
	Identification of clinical teaching sites

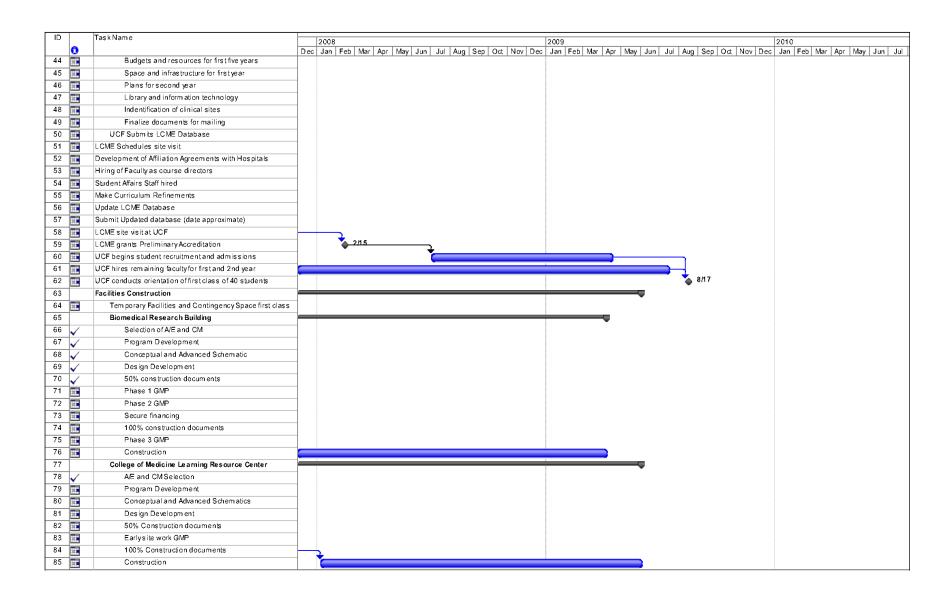




UNIVERSITY OF CENTRAL FLORIDA







Appendix D: Acquisition of Funds (Public, Private, & Matching Funds)

FLORIDA INTERNATIONAL UNIVERSITY

Status of Funds Acquisition

Type of Funds	Purpose of Funds	Amount Projected in Proposal (or Anticipated, if not included in proposal)	Amount Received	Amount Utilized To Date	Status Notes
(e.g., Private Donation)	(e.g., Facility Construction)	(e.g., \$5)	(e.g., \$3)	(e.g., \$0)	(e.g., Still in Planning Phase. Anticipate utilizing in May 2007)
Donors:					
North Dade Medical Foundation, Inc.	Scholarships	\$5M	\$0	\$0	Committee Approval
Blue Cross & Blue Shield of Florida	Operating	\$50K	\$0	\$0	Executed Agreement
Caruncho, Joseph	Operating	\$50K	\$10K	\$ 0	Executed Agreement
FIU Alumni Assoc.	Operating	\$50K	\$0	\$ 0	Executed Agreement
FIU Council of 100	Operating	\$50K	\$0	\$0	Executed Agreement
Guerra, Armando	Operating	\$50K	\$0	\$ 0	Executed Agreement
Guillama-Alvarez, Noel	Operating	\$50K	\$0	\$ 0	Executed Agreement
Horstmyer, Jeffery, MD	Operating	\$50K	\$0	\$0	Executed Agreement
Johnson, Dany Garcia	Operating	\$50K	\$0	\$0	Executed Agreement
Lawernce , Kahn	Operating	\$50K	\$0	\$0	Executed Agreement
Landon, Kirk	Operating	\$50K	\$10	\$0	Executed Agreement
Maidique, Modesto	Operating	\$50K	\$0	\$0	Executed Agreement
Parker, David	Operating	\$50K	\$0	\$0	Executed Agreement
Rock, John	Operating	\$50K	\$0	\$0	Executed Agreement
Spack, Theodore	Operating	\$50K	\$0	\$ 0	Executed Agreement
Adams, Nelson III	Operating	\$50K	\$0	\$0	Firm Verbal Agreement
Beraja Medical Institute	Operating	\$50K	\$ 0	\$ 0	Firm Verbal Agreement
The Costa Foundation, Michael Mendez	Operating	\$50K	\$0	\$0	Firm Verbal Agreement
Gomez, Fausto	Operating	\$50K	\$0	\$0	Firm Verbal Agreement
Hantman, Perla	Operating	\$50K	\$0	\$0	Firm Verbal Agreement
Lopez, Miriam	Operating	\$50K	\$0	\$ 0	Firm Verbal Agreement
Quantum Group (3)	Operating	\$150K	\$0	\$ 0	Firm Verbal Agreement
Preferred Medical Plan/ Tamara Meyerson	Operating	\$50K	\$0	\$0	Firm Verbal Agreement
Prescott, Gene	Operating	\$50K	\$0	\$0	Firm Verbal Agreement
Steinberg, Gregg	Operating	\$50K	\$0	\$0	Firm Verbal Agreement
Expected Public Funds:					
State Appropriations	Operating	\$5.4M	\$0	\$0	Requested
State Matching Funds	Scholarships	\$5M	\$0	\$0	Pending receipt of North Dade Medical Foundation

UNIVERSITY OF CENTRAL FLORIDA

Status of Funds Acquisition

Type of Funds	Purpose of Funds	Amount Projected in Proposal (or Anticipated, if not included in proposal)	Amount Received	Amount Utilized To Date (March 5, 2007)	Status Notes
(e.g., Private Donation)	(e.g., Facility Construction)	(e.g., \$5)	(e.g., \$3)	(e.g., \$0)	(e.g., Still in Planning Phase. Anticipate utilizing in May 2007)
Legislative	Support	Not		\$468,807.39	Anticipate
Appropriation	Health		included in \$3 Million		Utilizing
	Sciences	proposal			balance
Private	College of	\$20 million			Submitted in
Donations	Medicine	Over five	\$4,642,115.83	\$0	January
	Building	Years	Ψ1,012,113.03	ΨΟ	For State
	Construction				Matching
Government	College of	Part of the			Anticipate
Grants	Medicine	above	\$400,000	\$0	using in March
	Building	\$20 million	Ψ400,000	φ0	- July
	Construction				- July
Private Donation	Biomedical	Part of the			Submitted in
	Research	above	\$12.5 million	\$0	
	Building	\$20 million	φ12.3 HHHH0N	φυ	January for
	Construction				State Matching

Appendix E: Long-term Legislative Budget Request

STATE UNIVERSITY SYSTEM Projected Incremental State Funding for UF, USF, FSU & FAU Medical Education 2007-08 to 2018-19

Spring Costs: Spring Costs	2018-19	2017-18	2016-17	2015-16	2014-15	2013-14	2012-13	2011-12	2010-11	2009-10	2008-09	2007-08	PROGRAM
Square S													
S418,600 S448,500 S40, \$9,889,004 \$9,889,004 \$9,889,004 \$0 \$0 \$0 \$0 \$0 \$0 \$0													
Total Sy,859,204 Sy,889,104 S0 S0 S0 S0 S0 S0 S0													
Students (Incremental)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	90	\$0	\$0			
Students (Total) 525 540	0												
USF Medical School ²	540	540	540	540	540	540	540	540	540	540			
Vish Medical School													
Operating Costs: Quality Medical Education S7,365,899 S7,365,8								\$15,000,000	\$30,000,000	\$17,000,000			HSC Education/Simul.Bldg.
Quality Medical Education S7,365,899 S7,365,899 S7,365,899 S3,602,000 S													
Students (Incremental)											#7 005 000	#7.005.000	
Total \$7,365,899 \$7,365,899 \$3,602,000 \$3,602,000 \$3,602,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0							¢2 602 000	\$2 602 000	¢2 602 000	¢2 602 000	\$7,365,899	\$7,365,899	
Students (Incremental)	\$0	\$0	\$0	\$0	\$0	\$0					\$7 365 899	\$7 365 899	
Students (Total)	0												_
BOG Medical Expansion S9,240,318 \$64,909,020 \$35,000,000 \$1,000,000	800	800	800	800	800	800	800		640	560	480	480	
FSU Medical School													
FSU Medical School Coperating Costs: Clinical Training Sites (Daytona Beach & Immokalee) Total \$2,451,269 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$												\$9,240,318	
Clinical Training Sites (Daytona Beach & Immokalee)									\$1,000,000	\$8,008,506	\$1,039,737		HSC Maj. Renov./Rem. Lab/Class
Clinical Training Sites (Daytona Beach & Immokalee)													FSU Medical School
Total \$2,451,269 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$													
Total \$2,451,269 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0													
Students (Incremental) 39 60 44 16 0 0 0 0 0 0 0 0 0 0 Students (Total) 360 420 464 480 480 480 480 480 480 480 480 480 48	\$0		¢٥	¢٥	¢٥	0.9	0.9	¢٥	0.2	<u>¢</u> 0	e 0		· · · · · · · · · · · · · · · · · · ·
Students (Total) 360 420 464 480 480 480 480 480 480 480 480 480 48	0												_
College of Medicine Central FL \$2,500,000 FAU/UM Medical Partnership³ Operating Costs: Replace 2006-07 Non-recurring Funds Year 3 Phase-in Funds \$2,100,000 Final Year Phase-in Funds \$3,300,000	480												
College of Medicine Central FL \$2,500,000 FAU/UM Medical Partnership³ Operating Costs: Replace 2006-07 Non-recurring Funds \$2,100,000 Year 3 Phase-in Funds \$2,600,000 Final Year Phase-in Funds \$3,300,000													Fixed Capital Outlay Costs:
Operating Costs: Replace 2006-07 Non-recurring Funds \$2,100,000 Year 3 Phase-in Funds \$2,600,000 Final Year Phase-in Funds \$3,300,000												\$2,500,000	
Operating Costs: Replace 2006-07 Non-recurring Funds \$2,100,000 Year 3 Phase-in Funds \$2,600,000 Final Year Phase-in Funds \$3,300,000													FAU/UM Medical Partnership ³
Year 3 Phase-in Funds \$2,600,000 Final Year Phase-in Funds \$3,300,000													Operating Costs:
Final Year Phase-in Funds \$3,300,000													
												\$2,600,000	
Tatal	# 0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,300,000 \$3,300,000	\$4,700,000	Final Year Phase-in Funds Total
1 otal \$4,700,000 \$3,300,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 0												_
Students (Total) 96 128 192 256 256 256 256 256 256 256 256 256 25	256												,

Fixed Capital Outlay Costs:

¹ Enrollment increases based on the June 2006 5 year enrollment plan. ² Enrollment increases based on the June 2005 5 year enrollment plan. ³ Based on original plan submitted by FAU and approved by the BOG.

STATE UNIVERSITY SYSTEM Projected Total State Funding for UCF & FIU Medical Education 2007-08 to 2018-19

PROGRAM	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19
UCF College of Medicine ⁴ Operating Costs: Medical School Implementation Students (Incremental) Students (Total)	\$4,707,531 0 0	\$9,351,890 0 0	\$14,467,646 40 40	\$17,672,044 60 100	\$17,876,286 80 180	\$16,615,903 100 280	\$18,101,115 80 360	\$19,787,953 60 420	\$20,166,221 40 460	\$19,006,710 20 480	\$18,356,710 0 480	\$18,188,960 0 480
Fixed Capital Outlay Costs: Laboratory Instr Bldg.(FECG) Medical School Library(FECG)	\$4,109,016	\$18,890,984 \$4,000,000										
FIU College of Medicine ⁵ Operating Costs: Medical School Implementation Students (Incremental) Students (Total)	\$5,471,895 0	\$11,667,795 0	\$17,128,615 36 36	\$18,439,426 66 102	\$17,670,875 78 180	\$19,724,773 102 282	\$21,687,632 84 366	\$21,232,114 54 420	\$21,510,726 42 462	\$21,174,383 18 480	\$21,231,733 0 480	\$20,316,733 0 480

Fixed Capital Outlay Costs:

None.

FECG - Facility Enhancement Challenge Grant Matching. FCO based on the 5 year CIP. updated: 1/22/07

 ⁴ Based on original plan submitted by UCF.
 ⁵ Based on original plan submitted by FIU.