

Faculty Senate Meeting Wednesday, September 28, 2011 3:30 p.m. - 5:30 p.m. – Adelbert Hall, Toepfer Room

AGENDA

3:30 p.m.	Approval of Minutes from the April 21, 2011 Faculty Senate meeting, <i>attachment</i>	G. Chottiner
	President's and Provost's Announcements	B. Snyder B. Baeslack
	Chair's Announcements	G. Chottiner
3: 35 p.m.	Changes to Health Care Benefits	C. Gregory
4:25 p.m.	Name change for Department of Geological Sciences attachments	R. Harvey
4:35 p.m.	Master of Science in Anesthesia in Washington DC <i>attachments</i>	M. Snider M. Norcia J. Rifici
4:45 p.m.	Report from Development	B. Loessin K. Ridolfi K. Johnson
4:55 p.m.	Report from the Executive Committee	R. Dubin
5:00 p.m.	Report from the Interim Secretary of the Corporation	C. Treml
(5:10p.m.	Optional Introduction to the Senate for New Senators	G. Chottiner)



Faculty Senate Meeting Wednesday September 28, 2011 3:30-5:30 p.m. – Adelbert Hall, Toepfer Room

Members Present

Bruce Averbook Bud Baeslack Timothy Beal Jessica Berg **Ronald Blanton** Ben Brouhard Richard Buchanan Matthias Buck Mark Chance **Gary Chottiner Elizabeth Click** David Crampton **Chris** Cullis **Steven Cummins** Mary Davis William Deal Robin Dubin

Members Absent

Hussein Assaf Lee Blazey Lisa Damato Alfredo Hernandez Raymond Ku

Others Present

Dan Anker Christine Ash Richard Bischoff John Clochesy Donald Feke Carolyn Gregory Amy Hammett Ralph Harvey Ken Johnson **Thomas Egelhoff Karen Farrell** Steven Fox John Fredieu Patricia Higgins **Christine Hudak** Quentin Jamieson Mark Joseph Thomas Kelley Kurt Koenigsberger Alan Levine Deborah Lindell Zheng-Rong Lu Joseph Mansour Laura McNally **Ray Muzic**

G. Regina Nixon John Orlock Daniel Ornt Mary Quinn Griffin

Lara Kalafatis Bruce Loessin Ermin Melle Marilyn Mobley Matthew Norcia Dean Patterson Kaye Ridolfi Joe Rifici Chuck Rozek

Dale Nance Leena Palomo Larry Parker Alan Rocke **Robert Savinell Betsy Short David Singer** Martin Snider **Barbara Snyder** Lee Thompson Susan Tullai-McGuinness **Georgia Wiesner David Wilson** Elizabeth Woyczynski Xin Yu Nicholas Ziats

Julie Redding JB Silvers Sorin Teich George Vairaktarakis

Jamie Ryan Ginger Saha Chris Sheridan John Sideras Lynn Singer Christian Swol Colleen Treml John Wheeler Jeff Wolcowitz

Call to Order

Professor Gary Chottiner, chair, Faculty Senate, called the meeting to order at 3:30 p.m.

Approval of minutes

The minutes of the Faculty Senate meeting of April 21, 2011 were approved as submitted.

Chair's announcements

Prof. Gary Chottiner, chair, Faculty Senate thanked senators for their service on the Faculty Senate.

Changes to Health Care Benefits

Mr. John Wheeler, senior vice president for administration, introduced Ms. Carolyn Gregory, vice president for human resources, who gave a presentation about Case Western Reserve's 2012 Medical Benefits Plan; the presentation is attached to these meeting minutes. In response to rising health care costs, the university will require faculty and staff in 2012 to pay an annual deductible and a 20% co-insurance with annual caps. Prof. Chottiner announced that a copy of the presentation will be posted on the faculty senate website and it will be included as a weblink in the faculty senate newsletter that will be emailed to the faculty that same week. Ms. Gregory met earlier in the month with the Faculty Senate Committee on Faculty Compensation and the Faculty Senate Executive Committee. October information sessions about changes to health care benefits for faculty and staff will be posted on the human resources benefits website.

Name change for Department of Geological Sciences

Prof. Ralph Harvey introduced the proposal from the Department of Geological Sciences to change the name to the Department of Earth, Environmental and Planetary Sciences. The motion passed by the faculty in the College of Arts and Sciences and the department's proposal are attached to these minutes. The Faculty Senate voted to approve the new name; a resolution will be forwarded to the Board of Trustees for final approval.

Master of Science in Anesthesia in Washington DC

Prof. Martin Snider, chair, Committee on Graduate Studies, introduced Prof. Matthew Norcia, executive medical director and Prof. Joseph Rifici, executive director of the Master of Science in Anesthesia program. The program has a satellite location in Houston, TX; they are seeking to add a second satellite location in Washington, DC. Their proposal and a letter of support from the dean of the Medical School are attached to these minutes. The Faculty Senate voted to approve the proposal; a resolution will be forward to the Board of Trustees for final approval.

Report from Development

Mr. Bruce Loessin, senior vice president for university relations and development, introduced Ms. Kaye Ridolfi, associate vice president for institutional development and director of the university's capital campaign. Ms. Ridolfi presented a summary of the fundraising activities to date; the university raised a record amount of funds in fiscal year 2011. The university will make an updated official announcement regarding its fundraising activities at the BlueBash on October 13, 2011.

Report from the Executive Committee

Prof. Robin Dubin said that at the Executive Committee approved the proposals from Department of Geological Sciences and the Master of Anesthesia program for review by the Faculty Senate. The committee also heard a report from the Faculty Senate Committee on Undergraduate Education.

Report from the Interim Secretary of the Corporation

Ms. Colleen Treml, interim general counsel and secretary of the corporation, said the Board of Trustees heard reports from university administrators and approved resolutions for new endowments and new appointments for faculty.

After the meeting was adjourned at 5:00 p.m., Prof. Chottiner met informally with several professors who are serving their first year on the Faculty Senate to explain the Senate's charge and procedures.

APPROVED by the FACULTY SENATE

ELIZABETH H. WOYCZYNSKI SECRETARY OF UNIVERSITY FACULTY



Update on 2012 Medical Benefit Plans Presentation to the Faculty Senate

John Wheeler Carolyn Gregory Jamie Ryan September 28, 2011

A National Issue...



Health care costs will continue their brisk climb



Nation's Health Care Bill To Nearly Double By 2020

The Medical Money Pit

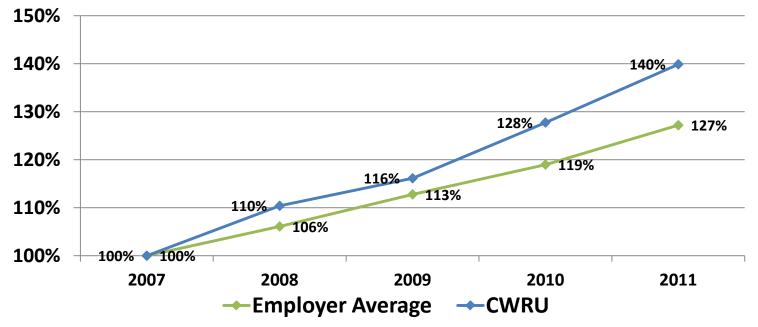


for Americans



... felt keenly here

Cumulative Health Benefit Cost Increases



From 2007 - 2011 our total claims costs climbed **more than 40 percent.**

The increase for all employers nationally : 27 percent.



Status quo is not sustainable

Year	Self-Insured Medical & Rx Paid Claims*	\$ increase over previous quadrennial	% increase over previous quadrennial
2007	\$22.0 million		
2011**	\$31.9 million	\$9.9 million	45.0%
2015**	\$46.0 million	\$14.1 million	44.2%

*Excludes other health insurance costs **Estimates provided by Oswald Companies



Other %-age Increases 2007-2011

Area	% increase
Sponsored Research	4.4
Consumer Price Index	8.1
Our Salaries (Faculty/Staff)	10.0
Higher Education Price Index	10.5
Our Undergraduate Tuition	13.7
Health Care Claims Costs	45.0



Plus, "Cadillac" penalty looming

Effective 2018, **40 percent federal tax** on benefits deemed to be especially generous – that is, those where the annual value of coverage exceeds **\$10,200** for single participant or **\$27,500** for family

Penalty applies per benefit recipient.

August, 2011: **88 percent** of employers reported taking steps <u>**NOW**</u> to control costs in hopes of avoiding or limiting tax.

Impact:

Example: A plan with single coverage costs of 11,200 = 1,000 above the limit Tax is 400×400 of employees with single coverage.

If 2,000 single coverage employees, *tax* = *\$800,000*



What we have done so far

Joined prescription drug purchasing coalition



Added Working Spouse Premium



Added High Deductible option

Closed most expensive medical plan to new entrants



What we have done so far, part 2

Wellness programs





"Exercise & Aging: Quality of Life at all Ages"







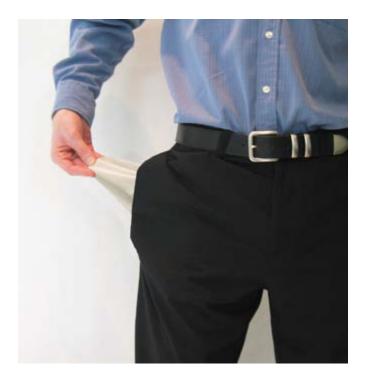
Get "Fit for Life" Program



Fundamental Principles of Changes

I. Participant Priorities*
Choice among providers
Predictability of out-of-pocket costs
Limits on expenses

(*Based on spring HR information sessions and campus-wide survey of faculty and staff that drew 986 responses.)

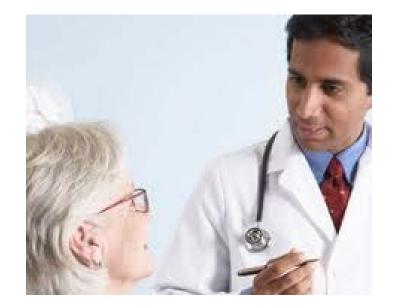




Fundamental Principles of Changes

II. Institutional Priorities

Slow rate of cost growth
Eliminate obstacles to obtaining preventive care
Maintain competitive benefits program (within greater Cleveland and higher education nationally)





Options for CY 2012

1.No change

- University costs climb **10.4 percent = \$3.32M**

What is \$3.32 million?

- **43** positions at \$60,000 each (\$17,700 benefits)
- 84% of <u>all</u> Year 1 Interdisciplinary Alliance Investments
- **119%** of faculty raises in FY 2011



Options for CY 2012

2. Apply cost increase only to monthly premium

	Current PPO Premium		201 PPO Pre	
	Single	Family	Single	Family
Non-Exempt	\$61	\$359	\$150	\$635
Exempt < \$50K	\$71	\$417	\$161	\$698
Exempt \$50K - \$100K	\$74	\$431	\$163	\$714
Exempt > \$100K	\$79	\$460	\$169	\$746



Options for CY 2012

3. Adapt Plan Design to

- Slow rate of cost growth
 - a. Enhance benefits' sustainability
 - b. Take early steps to prepare to avoid "Cadillac" tax

- Encourage use of preventive services

- **a. Early detection saves lives** (Research: 5 steps including breast and colorectal cancer screens can avert 100,000 U.S. deaths per year)
- **b.** And money (\$1 on immunizations saves \$5.30 on direct health care cost)



We chose #3: Design Changes

BUT first, we kept some elements <u>exactly</u> the same.

1. <u>100 percent</u> coverage of select preventive services, i.e.

- Blood pressure screening for adults
- Colorectal cancer screening for adults over age 50
- Breast cancer mammography screening for women over 40
- Immunization vaccines for children from birth to age 18
- **2. Employee share of premiums -** avg 15% single/30% family

3. Co-payments for office visits and prescriptions

- \$20 Primary Care Physician/\$30 Specialty Care Physician
- \$15 generic/\$30 brand formulary/\$60 brand non-formulary



We chose #3: Design Changes (con't)

BUT first, we kept some elements <u>exactly</u> the same.

4. Kaiser HMO

- Remains first dollar coverage after co-payments for services and prescriptions
- No co-payments for preventive services and hospitalizations

5. High Deductible option with Health Savings Account



We chose #3: Design Changes (con't)

The Actual Changes

<u>Eliminate</u> most expensive option (MMO Traditional) Relatively few users Especially high costs for university and participants

Add annual deductible*: \$250 individual/\$500 family

University is an outlier in providing first-dollar coverage other than copayments

* The <u>deductible</u> is the total amount per year that a participant pays before insurance begins to help cover costs.



We chose #3: Design Changes (con't)

Add 20% co-insurance* – with total annual caps:

For participants with salary below \$50K: \$750 individual/\$1,500 family

For participants with salary \$50K and above: *\$1,500 individual/\$3,000 family*

<u>* Co-insurance</u> is the share of insurance costs that one party pays (i.e. a 20% co-insurance means that the participant pays 20% of expenses, while the employer pays the remaining 80%. Once the expenditure cap is reached, the participant pays 0% of individual expenses and the employer pays 100%.



How the New Plan Works

Each calendar year, participant pays 100% of medical costs (<u>except for</u> <u>preventive services</u>) until reaching the annual	Then, participant pays 20% of claim costs, until	Participant's spending reaches coinsurance cap: Salary below \$50K = \$750 individual/	 Employer then covers 100% of all
deductible total:	Employer	\$1,500 family	costs (except
- Individual \$250 - Family \$500	pays 80% of claim costs until	Salary \$50k and above = \$1,500 individual/\$3,000 family	copayments)

Deductible and Co-Insurance are based on <u>network discounted fees</u> – not the charges billed by the service provider or facility



How the new Plan Works

Scenario 1 - Employee with Single Coverage

- 3 office visits
- •1 maintenance prescription

		Current PPO			
	Co-Pay	Deductible	Co-Insurance	Total	
Medical	\$60	\$0	\$0	\$60	
Rx	<u>\$120</u>	<u>\$0</u>	<u>\$0</u>	<u>\$120</u>	
Total	\$180	\$0	\$0	\$180	

	New PPO			
	Co-Pay	Deductible	Co-Insurance	Total
Medical	\$60	\$0	\$0	\$60
Rx	<u>\$120</u>	<u>\$0</u>	<u>\$0</u>	<u>\$120</u>
Total	\$180	\$0	\$0	\$180

Change in Out of Pocket Cost

\$0



How the new PPO Plan Works

Scenario 2 - Employee with Family Coverage

- •9 office visits: 8 to PCP, 1 to SCP
- •3 urgent care visits
- •12 generic prescriptions

	Current PPO			
	Co-Pay	Deductible	Co-Insurance	Total
Medical	\$305	\$0	\$0	\$305
Rx	<u>\$180</u>	<u>\$0</u>	<u>\$0</u>	<u>\$180</u>
Total	\$485	\$0	\$0	\$485
	New PPO			
	Co-Pay	Deductible	Co-Insurance	Total
Medical	\$170	\$500	\$22	\$692
Rx	<u>\$180</u>	<u>\$0</u>	<u>\$0</u>	<u>\$180</u>
Total	\$350	\$500	\$22	\$872

Change in Out of Pocket Cost

\$387



How the new PPO Plan Works

Scenario 3 - Employee with Employee + Spouse Coverage

- •5 office visits
- •2 hospital admissions

•2 maintenance prescriptions: 1 generic, 1 brand

	Current PPO			
	Co-Pay	Deductible	Co-Insurance	Total
Medical	\$600	\$0	\$0	\$600
Rx	<u>\$360</u>	<u>\$0</u>	<u>\$0</u>	<u>\$360</u>
Total	\$960	\$0	\$0	\$960

	New PPO			
	Co-Pay	Deductible	Co-Insurance	Total
Medical	\$600	\$250	\$1,500	\$2,350
Rx	<u>\$360</u>	<u>\$0</u>	<u>\$0</u>	<u>\$360</u>
Total	\$960	\$250	\$1,500	\$2,710

Change in Out of Pocket Cost

\$1,750*

*For Employees with Salary under \$50K: Out of Pocket Cost would be \$1,000



Participant Cost Sharing

	Proposed Plan	Benchmarks
Employee Premiums	15% Single 30% Family	23% Single 31% Family
Out of Pocket Costs for Services	16%	18%
Total Participant Costs	31% Single 46% Family	41% Single 49% Family



Flexible Spending Account

A personal savings account funded by your pre-tax contributions and used to pay qualified health care expenses.

Qualified expenses include:

 Out-of-pocket health insurance costs – e.g., co-payments, deductibles and co-insurance

Contribution limit = \$5,000 in 2012

"Use It or Lose It" Rule: funds cannot be carried over to next year

Grace Period: gives you an extended period – from December 31 to March 15 – to incur qualified expenses



Proposal to Change the Name of the Department of Geological Sciences

The Department of Geological Sciences proposes to change its name to the Department of Earth, Environmental and Planetary Sciences. There are several reasons that this proposed change is requested. First, the name more accurately characterizes the nature of the broad subject matter taught and the research conducted in the Department, and it more accurately reflects the long-term strategic plan of the Department. The Department faculty conduct research and teach courses in the core geological and geophysical science fields, in the planetary sciences and in the environmental sciences. The current name does not reflect this breadth. Even more noteworthy is that the Department houses the Environmental Studies program, but there is no obvious connection between that program and the Department by name. The Department strategic plan calls for development of the planetary and environmental programs to build upon and complement our existing strengths. The proposed name change is one step in the implementation of that plan.

Second, we believe that the current name does not encourage recruitment of students interested in environmental or planetary sciences. By changing the name to include these 'key' words it is our hope that the Department will have a greater visibility to prospective students which will increase recruitment of students to CWRU and to our Department. Finally, changing the name also reflects trends in the discipline. Departments are increasingly dropping the terms 'geology' or 'geological sciences' and including 'environmental' and 'planetary'. This will be discussed in more detail below.

From a historical perspective this is not the first time that the Department has changed its name. At the time of federation the Department of Geology and Geography (WRC) and the Department of Geology and Mineralogy (CIT) were merged into the Department of Geology (CWRU). Seven years later the name was again changed to 'Department of Earth Sciences', partly to reflect the 'non-geology' faculty that were members of the Department following the merger. Five years later, in 1979, it was felt that the new name was not sufficiently 'modern' and it was changed to 'Department of Geological Sciences'. That has been the Department name for the last 32 years.

A general survey of names of departments at comparison institutions (Table 1) shows that there is neither a standard name used by most departments nor are there many departments that have retained the terms 'geology' or 'geological sciences'. For example, of the 15 institutions listed in Table 1, only one has a department with the name 'Department of Geological Sciences' and only 7 have any form of 'geo' in their title, while 11 have the term 'earth' in the department name, 6 have the term 'environmental' in the department name and 5 have the term 'planetary' in the department name.

It will probably be necessary to change the Department code used for course numbering from GEOL to something else. The faculty have no strong preference, but offer two suggestions, EEPS and ERTH as possibilities.

At this time the faculty of the department do not anticipate any substantive changes to the degree programs, only a change in the name of the Department. The degree program names will need to be changed to reflect the new department name on the diplomas.

Institution	Department Name
Johns Hopkins University	Earth and Planetary Sciences
Rochester University	Earth and Environmental Sciences
University of Chicago	Geophysical Sciences
Washington University	Earth and Planetary Sciences
Columbia University	Earth and Environmental Science
Ohio State University	School of Earth Sciences
University of Michigan	Geological Sciences
Caltech	Geological and Planetary Sciences
Duke University School of Environmental and Earth Sciences	
	Earth and Ocean Sciences
Harvard University	Earth and Planetary Sciences
MIT	Earth, Atmospheric and Planetary Sciences
University of Pennsylvania	Earth and Environmental Sciences
Princeton University	Geosciences
Stanford University	Geological and Environmental Sciences
	Geophysics
	Environmental Earth Systems Science
Yale University	Geology and Geophysics

Table 1. Department names at comparable and peer institutions.



Master of Science in Anesthesia Program

Lakeside 2533 11100 Euclid Avenue Cleveland, Ohio 44106-5007

> phone 216.844.8077 fax 216.844.7349

www.anesthesiaprogram.com

Charles Rozek, Ph.D. Dean, School of Graduate Studies Nord Hall 605 10900 Euclid Ave. Cleveland, OH 44106-7027

Dear Dean Rozek,

June 8, 2011

I am writing to you to request your permission to pursue the initiation of a satellite program in Washington, DC, for our Master of Science in Anesthesia (MSA) Program housed within our School of Graduate Studies.

As you may know, we have been educating anesthesiologist assistants (AAs) at Case Western Reserve University since 1971 and the MSA Program was transitioned from the baccalaureate degree to the Master of Science degree in 1987. AAs are mid-level anesthesia care practitioners who work to deliver anesthesia services under the supervision of a physician anesthesiologist. We have opened a satellite program in Houston, TX, in June of 2009 and that program is thriving.

We have a long standing history of quality education of AAs and our program is held in high esteem as we have assumed our place as the preeminent educators of anesthesiologist assistants in the country. We have been approached by members of the DC anesthesiology community to consider extending our network to Washington. Needless to say, Matt Norcia, MD, our Cleveland program's Executive Medical Director, and I were honored and intrigued by the endless potential of establishing this kind of relationship with healthcare facilities and physicians in our nation's capital. The past year has been spent researching many global issues related to feasibility both in Cleveland and in Washington. The people involved in this project feel that it has a huge upside and it is now time to approach the University for formal approval. If approved, we plan to matriculate the first class in June of 2012.

Based on the fact that we have yet to hire any on-site faculty and administrative team, the administrative and curriculum details at the micro level have yet to be determined. At the macro level, the degree offering from CWRU and the curriculum will be exactly the same as Cleveland and Houston. The method of delivery will most likely be a mix of on-site faculty (clinical and didactic) and distance learning with some (% not known yet) didactic courses taught by our Cleveland faculty. Incidentally, all of our current Cleveland didactic faculty are in agreement with this proposal, are employed by the Department of Anesthesiology and are appointed by the School of Medicine. All clinical instruction and simulator instruction (about 70% of the entire curriculum) will be done on-site in Washington. The simulator and operating room clinical resources are ripe and abundant in Washington. I estimate that approximately 10% of the curriculum (40% of the didactic curriculum) will be taught via internet streaming video and CWRU Media Vision by Cleveland faculty. I will know more about the percentages as we commence to identify and hire Washington faculty pending approval of this proposal.

Matt Norcia and I have assumed the positions of Executive Medical Director and Executive Program Director respectively and we will have direct oversight of the Washington program as well as the entire network both now and into the future. We will remain in our rolls within the Cleveland program. We will hire an on-site Washington Medical Director and Program Director and we see our executive rolls diminishing over time as the Washington program grows and develops a robust culture consistent with our Cleveland mission and vision.

For the first several years of the program, Dr. Norcia and I will be directly involved with the admissions process and we will conduct the interview process, gradually integrating the Washington administrative team. Again, we see our roll in the admissions process diminishing with time once we are confident that the Washington administrative team is consistently matriculating applicants of the highest caliber.

The Washington team will be directly responsible for advising students and to track student performance in the classroom and in the operating room. Dr. Norcia and I will closely advise the Washington team on our Cleveland methods and our colleagues in Washington will have access to our Cleveland on-line clinical performance evaluation system and our clinical case log database to help facilitate this process.

I hope that I have adequately explained our proposal to you. Please do not hesitate to contact me at my office, 216.844.3161, or by e-mail, joseph.rifici@UHhospitals.org, if I can be of any assistance. Thank you for your consideration.

Sincerely,

Josh m Refici

Joseph M. Rifici, AA-C, M.Ed. Executive Program Director, Master of Science in Anesthesia Program Assistant Professor of Anesthesiology Case Western Reserve University School of Medicine September 20, 2011

Pamela B. Davis, M.D., Ph.D. Dean Vice President for Medical Affairs Office of the Dean

10900 Euclid Avenue

Cleveland, Ohio 44106-4915 Visitors and Deliveries Biomedical Research Bldg. - Rm. 113 Phone 216.368.2825 Fax 216.368.2820

http://casemed.case.edu

Dear Members of the Executive Committee,

Executive Committee of the Faculty Senate

Case Western Reserve University

I am pleased to submit this letter of support for the expansion of the CWRU School of Medicine Master of Science in Anesthesia (MSA) program to Washington, D.C. The expansion of the program to Houston, Texas, in 2009 continues to meet our expectations. It has confirmed our belief in the potential of an additional satellite because of the program's demonstrated quality, the demand for the MSA degree, and the positive employment outlook for our graduates.

Our reputation as educators of first-rate anesthesiology assistants led members of the Washington, D.C., anesthesiology community to approach us with the idea of establishing a CWRU School of Medicine satellite program there. Under my direction, the members of my leadership team have worked closely with Howard Nearman, M.D., Chair of the Department of Anesthesiology, Matt Norcia, M.D., the program's Executive Medical Director, and Joseph Rifici, AA-C, M.Ed., the Executive Program Director, over the past year to explore the feasibility of this expansion and to determine the educational and logistical components necessary for success. This group created the Washington, D.C., business plan and financial arrangements, which the School of Medicine has approved.

Our plans look promising, so we have committed resources to set up a location and to hire local faculty and staff. Matt Norcia and Joseph Rifici will supervise the Washington, D.C., faculty and staff and oversee the admissions process to ensure that the program and its graduates meet the School of Medicine's high standards. The curriculum will be the same as Cleveland and Houston, and will involve our Cleveland didactic faculty, all of whom are in agreement with the proposed expansion. The expansion will of course require simulator and operating room clinical resources, which are abundant in Washington, D.C., if we choose not to do this internally. We are confident that this satellite will succeed and will reflect the high quality for which CWRU and the School of Medicine are known.

We appreciate your consideration of the proposal.

Sincerely,

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Pamela B. Davis, M.D., Ph.D.



SCHOOL OF MEDICINE CASEWESTERNRESERVE UNIVERSITY

CWRU Master of Science in Anesthesia Program Washington DC Campus FINANCIAL PROSPECTUS

	2012-2013		2013-2014		2014-2015	
Per Student Tuition	\$	96,398.00	\$ 101,217.90	\$	116,507.79	
Capital Investment	\$	500,000.00				
Tution Returns	\$	878,495.40	\$ 2,089,545.05	\$	2,699,037.20	
EXPENSES						
 Faculty & Staff Overhead	\$	966,407.50	\$ 932,419.85	\$	961,482.20	
Operating Expenses	\$	262,306.00	\$ 265,532.28	\$	268,839.21	
Education Expenses	\$	21,560.00	\$ 36,510.00	\$	225,375.00	
Travel & Meetings	\$	65,850.00	\$ 90,750.00	\$	96,000.00	
Marketing & Public Relations	\$	9,950.00	\$ 15,350.00	\$	11,250.00	
Food & Catering	\$	22,950.00	\$ 22,950.00	\$	22,950.00	
Total	\$	1,349,023.50	\$ 1,363,512.13	\$	1,585,896.41	
Subtotal	\$	29,471.90	\$ 726,032.92	\$	1,113,140.79	
Program Financial Position	\$	29,471.90	\$ 755,504.82	\$	1,868,645.61	

Case Western Reserve University Annual Report – June 1, 2011

NCCAA ENTRY LEVEL PASS RATE

Year	Students	Fail	
2005	10	0	
2006	10	0	
2007	14	1	
2008	12	0	
2009	14	0	
2010	13	0	
2011	14	0	
	87	1	

 $\frac{2005-2011 (7 \text{ yrs})}{\text{Exam Failure Rate: 1 out of } 87 = 1.14\%}$

 $\frac{2008-2011 (4 \text{ yrs})}{\text{Exam Failure Rate: 1 out of } 53 = 1.89\%}$

STUDENT ATTRITION

Year	Students	Voluntarily Withdrew	Separated
2005	12	1	1
2006	12	0	2
2007	14	0	0
2008	13	1	0
2009	14	0	0
2010	13	0	0
2011	15	1	0
	93	3	3

 $\frac{2005-2011 (7 \text{ yrs})}{\text{Separation Rate: 3 out of } 93 = 3.2\%}$ Withdrawal Rate: 3 out of 93 = 3.2%Overall Attrition Rate: 6 out of 93 = 6.5%

 $\frac{2008-2011 (4 \text{ yrs})}{\text{Separation Rate: 0 out of } 55 = 0\%}$ Withdrawal Rate: 2 out of 55 = 3.6% Overall Attrition Rate: 2 out of 55 = 3.6%

JOB PLACEMENT

Year	Students	Employed after Graduation
2005	10	10
2006	10	10
2007	14	14
2008	12	12
2009	14	14
2010	13	13
2011	14	14
	87	87

<u>2005-2011 (7 yrs)</u> Job Placement Rate: 87 out of 87 = 100%

 $\frac{2008-2011 (4 \text{ yrs})}{\text{Job Placement Rate: 53 out of 53} = 100\%}$

CASE WESTERN RESERVE UNIVERSITY MASTER OF SCIENCE IN ANESTHESIA PROGRAMS

FEASIBILITY ANALYSIS MATRIX

Description of the Project

1. Identification and exploration of business scenarios.

- Identify alternative scenarios or business models of what the project may entail and how it might be organized.
- Eliminate scenarios and business models that don't make sense.
- Flesh-out the scenario(s) and model(s) that appear to have potential for further exploration.

2. Definition of the project and alternative scenarios and models.

- Outline the general business model (i.e. how the program will make money).
- Include the technical processes, size, location, and physical materials
- Specify the time horizon from the time the project is initiated until it is up and running at capacity.

3. Relationship to the surrounding geographical area.

Identify economic and social impact on local anesthesia communities.

Market Feasibility

1. Industry description.

- Describe the size and scope of the profession, market and/or market segment(s).
- Estimate the future direction of the profession, market and/or market segment(s).
- Describe the nature of the profession, market and/or market segment(s) (stable or going through rapid change and restructuring).
- Identify the life-cycle of the profession, market and/or market segment(s)

2. Competitiveness of profession.

- Investigate profession concentration in proposed market.
- Analyze major competitors.
- Explore barriers/ease of entry of competitors into the market.
- Identify competitiveness of program graduates in local market.

3. Market potential.

- Identify the demand and usage trends of the profession in which the proposed graduates will participate.
- Examine the potential for emerging, niche or segmented market opportunities.
- Assess estimated market usage and potential share of the market or market segment.

4. Enrollment projection.

- Estimate enrollment.
- Identify and assess the accuracy of the underlying assumptions in the enrollment projection.
- Project enrollment under various assumptions (i.e. tuition prices, variable economic conditions).

5. Access to market outlets.

• Identify the potential employers of the matriculates and the associated marketing costs.

Technical Feasibility

1. Determine facility needs.

- Estimate the size and type of educational facilities.
- Investigate the need for related buildings, equipment, and materials.

2. Suitability of educational technology.

- Investigate and compare technology (i.e. simulation learning, interactive classroom, etc.) providers.
- Determine reliability and competitiveness of technology (proven or unproven, state-of-theart).
- Identify limitations or constraints of technology.

3. Availability and suitability of program site.

- Access to clinical rotation sites.
- Access to transportation.
- Access to a qualified employment pool.
- Identify regulatory requirements.
- Explore economic development incentives.
- Explore community receptiveness to having the program located there.

4. Faculty and staff inputs.

- Investigate the availability of labor including wage rates, skill level, etc.
- Assess the potential to access and attract qualified faculty personnel.

Financial Feasibility

1. Estimate the total capital requirements.

- Assess the startup/seed capital needs of the program project and how these needs will be met.
- Estimate capital requirements for facilities, equipment and educational materials.
- Determine replacement capital requirements and timing for facilities and equipment.
- Estimate working capital needs.
- Estimate start-up capital needs until revenues are realized at full capacity.
- Estimate contingency capital needs (construction delays, technology malfunction, market access delays, etc.
- Estimate other capital needs.

2. Estimate equity and credit needs.

- Identify capital availability
- Assess expected financing needs and alternative sources
- Establish debt-to-equity levels.

3. Budget expected costs and returns of various alternatives.

- Estimate expected costs and revenue.
- Estimate the profit margin and expected net profit.
- Estimate the enrollment and expenditures needed to break-even.
- Estimate the returns under various enrollment, costs, and tuition levels. This may involve identifying "best case", "typical", and "worst case" scenarios.
- Assess the reliability of the underlying assumptions of the financial analysis.
- Create a benchmark against program averages and/or competitors.
- Identify limitations or constraints of the economic analysis.
- Determine project expected cash flow during the start-up period.
- Identify project an expected income statement, balance sheet, etc. when reaching full operation.

Organizational/Managerial Feasibility

1. Business structure.

- Outline alternative business model(s) (how the program will make money).
- Identify any potential joint venture partners, alliances or other important stakeholders.
- Identify availability of skilled and experienced faculty.
- Identify availability of consultants and service providers with the skills needed to realize the project, including legal, accounting, industry experts, etc.
- Outline the governance, lines of authority and decision making structure.

2. Program leadership.

- Do the proposed program leadership have the "fire in the belly" required to take the project to completion?
- Do the proposed program leadership have the skills and ability to complete the project?
- What key individuals will lead the project?

Study Conclusions

- Identify and describe alternative business scenarios and models.
- Compare and contrast the alternatives based on their program viability.
- Compare and contrast the alternatives based on the goals of the proposed partnership entity.
- Outline criteria for decision making among alternatives.
- Choosing the most viable business model, developing a business plan and proceeding with creating and operating a program.

CURRICULUM VITAE

SHANE ANGUS, M.S., AA-C Assistant Program Director Assistant Professor

Work Address:	3550 South University Dr UPP South Fort Lauderdale, FL 33328-2003 954-262-1255 Shane.Angus@nova.edu
	Shahe.Angus enova.cuu

Home Address: 2107 NE 16th Ave Wilton Manors, FL 33305 Cell 850-443-8068

Degrees in Higher Education

May 1999	Master of Science in Anesthesiology Case Western Reserve University Cleveland, Ohio	
May 1997	Bachelor of Science in Integrative Biology University of California at Berkeley Berkeley, California	
Professional Experience in Higher Education		
November 2008	Assistant Program Director Anesthesiologist Assistant Program NSU, HPD, College of Allied Health and Nursing	
July 2007	Assistant Professor Anesthesiologist Assistant Program NSU, HPD, College of Allied Health and Nursing	
Professional Experience and Clinical Instructing		
November 2008	Assistant Program Director Nova Southeastern University Anesthesiologist Assistant Program Fort Lauderdale, FL	
July 2007	Assistant Professor Nova Southeastern University Anesthesiologist Assistant Program Fort Lauderdale, FL	

April 2008	Staff Anesthetist Clinical Instructor - Sheridan Anesthesia Memorial Hospitals Sunrise, FL
May 2007	Staff Anesthetist Clinical Instructor - University of Miami, Sylvester Cancer Center University of Miami Miami, FL
August 2006	Staff Anesthetist Clinical Instructor - University of Florida Shands at the University of Florida Gainesville, Florida
August 2005	Staff Anesthetist, Clinical Instructor - Gooding Institute for CRNA's Anesthesia Unlimited, Inc. Panama City Surgery Center Panama City, Florida
May 2004	Staff Anesthetist, Clinical Instructor - Emory Univ. and Case Western Reserve Univ. Cardiac team Georgia Anesthesiologists, P.C. Kennestone Hospital Marietta, Georgia
April 1999	Staff Anesthetist, Clinical Instructor - Emory Univ. and Case Western Reserve Univ. Cardiac team Georgia Anesthesia Alliance, Ltd. Atlanta Medical Center Atlanta, Georgia
Professional Societies	
	American Academy of Anesthesiologist Assistants Florida Academy of Anesthesiologist Assistants American Society of Anesthesiologists Florida Society of Anesthesiologists

Courses Taught

)
a Practice II
a Practice
a

Professional Presentations & Lectures

April 2010	"Clinical Instructors Workshop" "Student Spokesperson Training" AAAA Annual Conference Savannah, GA
April 2009	"Perspectives in Clinical Education" "Clinical Instructors Workshop" "Student Spokesperson Training" AAAA Annual Conference Clearwater, FL
April 2008	"Orientation to the OR and Anesthesia" NSU Surgeon Conference Student Osteopathic Surgical Association Fort Lauderdale, FL
August 2008	"Anesthesia for the Physician Assistant" NSU Physician Assistant Program Fort Lauderdale, FL
May 2007	Anesthesiologist Assistants Practice Environment University of South Florida Tampa, FL

LICENSURE

June 2005	Anesthesiologist Assistant License State of Florida No. AA4
April 2001	Anesthesiologist Assistant License State of Ohio No. 67-00052
May 1999	Physician's Assistant License State of Georgia No. 003346

Professional Meetings

October 2009	American Society of Anesthesiologists Annual Conference One week San Diego, CA
June 2009	Society for Education in Anesthesia Summer Conference Four days Pittsburg, PA
April 2009	American Academy of Anesthesiologist Assistance Annual Conference One week Savannah, GA
October 2009	American Society of Anesthesiologists Annual Conference One week New Orleans, LA
June 2009	Society for Education in Anesthesia Summer Conference Four days Seattle, WA
May 2009	American Society of Anesthesiologists Legislative Conference Five days Washington, DC
April 2009	American Academy of Anesthesiologist Assistance Annual Conference One week Clearwater, FL
March 2009	Teaching Anesthesia Workshop Society for Education in Anesthesia Austin, TX
October 2008	American Society of Anesthesiologists Annual Conference One week Orlando, FL

June 2008	American Society of Anesthesiologists Legislative Conference Five days Washington, DC
June 2008	Florida Society of Anesthesiologist Annual Conference Four Days West Palm Beach, FL
June 2008	Society for Education in Anesthesia Summer Conference Four days Miami, FL
April 2008	American Academy of Anesthesiologist Assistance Annual Conference One week Hilton Head, SC
October 2007	American Society of Anesthesiologists Annual Conference One week San Francisco, CA
June 2007	Florida Society of Anesthesiologist Annual Conference Four Days West Palm Beach, FL
April 2007	American Academy of Anesthesiologist Assistance Annual Conference One week Daytona Beach, FL
October 2006	American Society of Anesthesiologists Annual Conference One week Chicago, IL
Additional conference attendance upon request	

<u>NOVA</u>

- April 2008 NSU Surgeon Conference Student Osteopathic Surgical Association
- April 2008 NSU teaching lecture series

Service to College & University

December, 2008- Current	Board Member and Committee Chair University wide Academic Review Committee Appointed by and report to University Provost, Dr. Frank DePiano
September 2008	Chair, Academic Review Committee – Internal component Huizenga School of Business Appointed by and report to Dr. Frank De Piano
January 2008	Member, Committee on Faculty Recruitment
Current	NSU AA Program
January 2008	Member, Committee on Department Meetings
Current	NSU AA Program
July 2007 Current	Member, Committee on Student Progress HPD, Masters of Health Science Report to Dr. Jodi Clark
July 2007	Chair, Committee on Admissions
Current	NSU AA program
July 2007	Director, Student Clinical Progress
Current	NSU AA program
July 2007	Director, Student Clinical Hours
Current	NSU AA program

Service to Profession

April 2009	Florida Academy of Anesthesiologist Assistants Founding member President
January 2010	Member, ARC-AA (Academic Review Committee – Anesthesiologist Assistant Programs) National Organization that works with CAHEP to credential programs
October 2009	Member, ASA Anesthesiologists Assistance Education and Practice Committee Appointed by Society President
May 2008	Director, Development of Florida Academy of Anesthesiologist Assistants Statewide organization representing AA's in FL
April 2007- Current	Member, AAAA National Affairs Committee National and State AA Laws and Initiatives

April 2005- Current	CoChair, American Academy of Anesthesiologist Assistant Delegate Assembly Represent national regions to the AAAA
April 2003	Chair, AAAA Website Committee Development and Implementation

CERTIFICATION

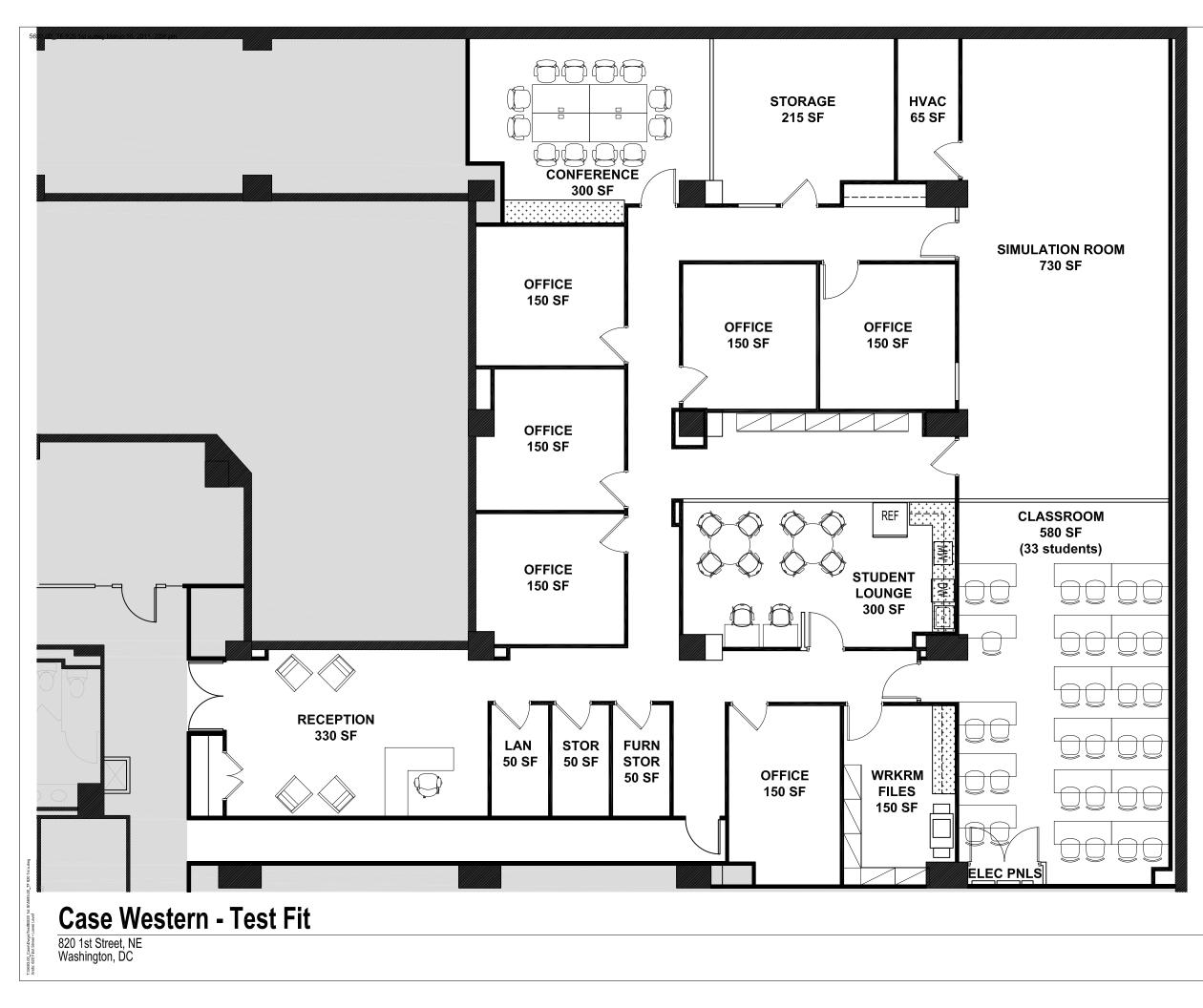
10/99-present	National Commission for Certification of Anesthesiologist Assistants
	Anesthesiologist Assistant - Certified (Certificate Number 413)
10/99-present	Healthcare Provider/BLS
10/99-present	ACLS Provider

<u>Awards</u>

August 2010	Golden apple award class of 2010
August 2009	Golden apple award class of 2009

Additional Information

September 2005	First Anesthesiologist Assistant	to practice in FL	under legislated license



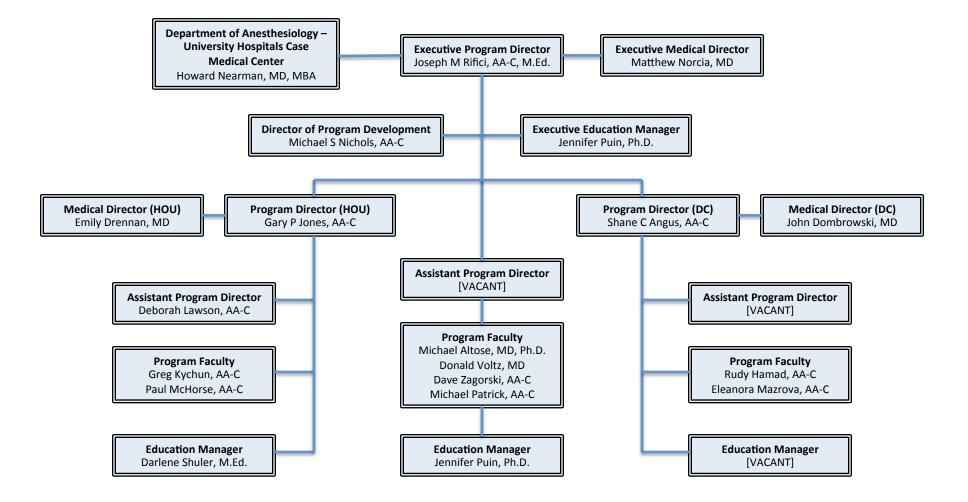
	PROGRAM	PLAN
OFFICE A	2 (175 SF)	2 (150 SF)
OFFICE B	4 (125 SF)	4 (150 SF)
STAFF TOTAL	6	6

	PROGRAM	PLAN
RECEPTION AREA	250 SF	330 SF
COAT CLOSET	15 SF	15 SF
CONF. RM	275 SF	300 SF
CLASSROOM	600 SF	580 SF
SIMULATION ROOM	750SF	730 SF
STUDENT LOUNGE	300 SF	300 SF
WORK RM / COPY AREA	125 SF	150 SF
STORAGE	200 SF	215 SF
HVAC	50 SF	65 SF
LAN ROOM	50 SF	50 SF
FURNITURE STORAGE	50 SF	(2) 50 SF







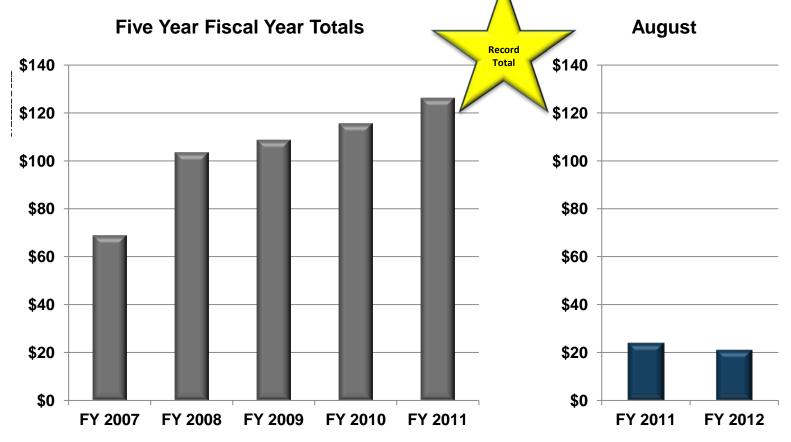


UNIVERSITY CAMPAIGN PLANNING UPDATE



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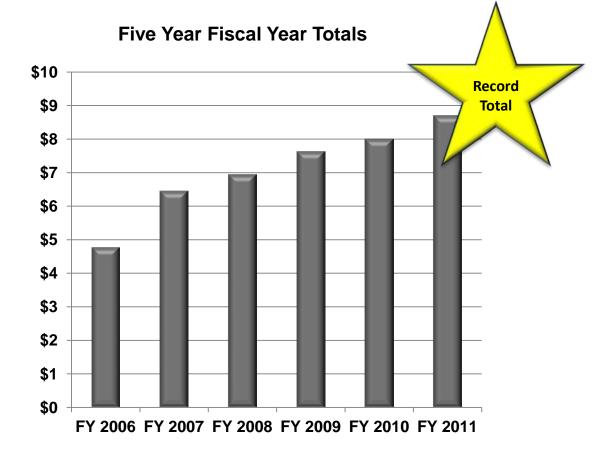
Attainment Comparison Report – August 2010 to August 2011



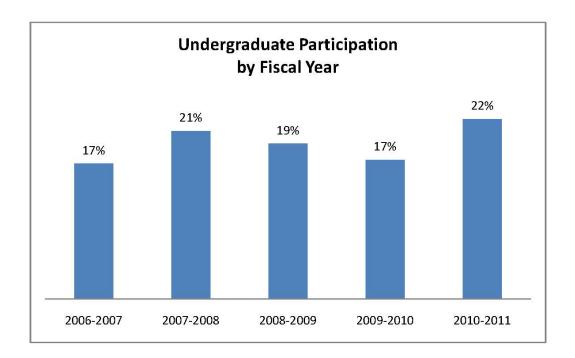


Development and University Relations Committee

Annual Fund Comparison Report – FY2006 to FY2011

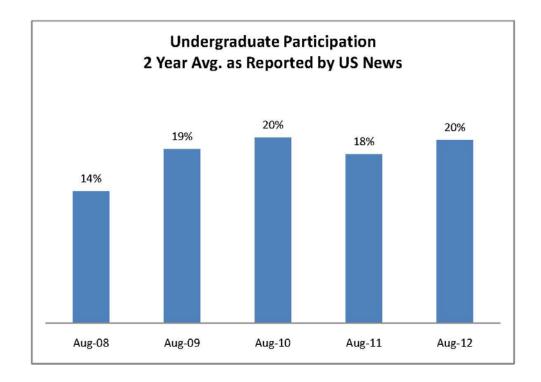








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CWRU Campaign

Progress Towards Goal by School

07/01/2007 - 08/31/2011

	Campaign Goal	Overall Total	Overall % Achieved	Balance
College of Arts and Sciences	\$170,000,000	\$93,643,826	55.08%	\$76,356,174
Case School of Engineering	\$170,000,000	\$87,772,192	51.63%	\$82,227,808
School of Dental Medicine	\$30,000,000	\$25,051,032	83.50%	\$4,948,968
School of Law	\$32,000,000	\$13,225,684	41.33%	\$18,774,316
School of Medicine	\$350,000,000	\$205,457,462	58.70%	\$144,542,538
Weatherhead Sch. of Management	\$60,000,000	\$23,822,570	39.70%	\$36,177,430
School of Nursing	\$35,000,000	\$15,109,010	43.17%	\$19,890,990
Mandel Sch. of Applied Social Sciences	\$30,000,000	\$19,860,865	66.20%	\$10,139,135
University General	\$123,000,000	\$116,191,096	94.46%	\$6,808,904



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The Impact of Capital Campaigns

Comparative Averages	FY2004-2007	FY2008-2011	% CHANGE
Average Attainment	\$80.9M	\$113.4M	+40.2%
Average Cash	\$73.8M	\$84.3M	+14.2%
Average Gift	\$3,707	\$6,084	+64.1%
Cumulative Totals	FY2004-2007	FY2008-2011	% CHANGE
Dollars for Endowment	\$82.9M	\$154.6M	+86.5%
No. of Endowments	238	279	+17.2%
Dollars for Scholarships	\$54.9M	\$74.4M	+35.5%
No. of Professorships	10	20	+100.0%
Dollars of Gifts \$1M +	\$109.4M	\$204.7M	+87.1%



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Public Launch

- LEVERAGE
 - Coordinate the CWRU public launch event with built in programming, investment and participation.
- SHOWCASE
 - Showcase CWRU impact thru our alumni, students and faculty.
- CELEBRATE
 - Provide opportunity to recognize our strongest volunteers, donors and CWRU community to announce this important milestone and energize our campaign.



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The Campaign for Case Western Reserve University



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revel in the unexpected

10.13.2011



BlueBash: A special kickoff to Alumni Weekend

- 7 p.m. Interactive showcase and dessert reception
- 7:45 p.m. Special announcement and concert
- Veale Convocation, Recreation and Athletic Center 2138 Adelbert Road

Creative blue attire optional

For tickets and registration visit case.edu/bluebash, call 800.866.6280 or email bluebash@case.edu











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revel in the unexpected 10.13.2011

BlueBash: A special kickoff to Alumni Weekend

6:45 Doors Open

7 p.m. - Dessert reception and interactive showcase highlighting the innovations of our faculty, staff and students

7:45 p.m. - Announcement by President Barbara R. Snyder, followed by a concert (national artist TBA)

Veale Convocation, Recreation and Athletic Center 2138 Adelbert Road (see map)

For more information, please call 800.866.6280 or email bluebash@case.edu

Generously underwritten by: Bon Appetit, Event Source, Medical Mutual, RCS, University Program Board and University Tickets

Register now >

Next Steps

- Broaden our base through:
 - National and international alumni engagement
 - Annual Fund growth
 - Special gifts
 - Internal campaign



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