



UNIVERSITY of WASHINGTON

FY2024 Operating Budget Development Narrative Prompts

[School of Medicine/Seattle]

Section 1: Programmatic & Academic Vitality Narratives

Text submitted within this section **will** be published to OPB's Annual Budget Development website

Where possible, you are encouraged to leverage published materials already created

- 1) Please briefly summarize your unit's/campus's strategic plan and how your FY24 operating budget proposal (as submitted in Workday Adaptive Planning) connects to your campus/unit strategic plan. *Word Limit: 500*

The UW Medicine mission is to improve the health of the public through continued excellence and improvements in patient care, research, and education. The FY24 budget for the SoM reflects the ongoing efforts of our 31 departments and our central SoM Programs to meet this mission. All budgets reflect the increased compensation costs for FY24 merit and the ongoing challenges of increased labor costs for both faculty and staff salaries and inflationary pressures.

In the research environment, the SoM remains focused on providing and managing research space to allow for continued growth in key areas of research. The SoM has seen significant growth in the last two years due to additional COVID-19 related research and has budgeted for the FY22 and FY23 levels of research to continue in FY24. Overall, the research space available is a constraint on further growth as the SoM lacks available research space. Furthermore, existing research space in the Health Sciences building is aging and suboptimal for world class research and recruitment of faculty. The SoM looks forward to the opening of the W27 facility, which will assist with research space constraints for IPD and BBI units.

Our FY24 budget for education reflects our general stable level of student enrollment in the M.D. degree program, our other professional educational programs (Medex / Physical Therapy / Lab Tech training program / etc.), and graduate and undergraduate classes. We would note, our M.D. degree program is evaluating class expansion starting in FY25 or FY26 for Alaska and Idaho cohorts.

Clinically, the SoM budget reflects constrained hiring to meet only strategic needs of the health system. The School's budget includes those clinical faculty who have UW salary funded by clinically activity, with a significant portion of the faculty salary captured in the UWP and/or CUMG budgets which are not included in the School's budget.

The School is actively engaged in the UW Medicine Mission Forward initiative. At this time, future impacts from Mission Forward work as to the School have not been determined, and our FY24 budget reflects only what is known as of submission.

- 2) Building on the responses your campus/unit submitted during the FY23 annual review cycle ([posted here](#)), how has your unit/campus integrated the themes and goals of [the 2022 – 2026 UW Diversity Blueprint](#) into your campus's/unit's ongoing work to take actions towards access, inclusion, and equity? *Word Limit: 750*



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As noted in FY23 annual review, The SoM has a long track record of focus on Equity, Diversity and Inclusion (EDI). The SoM has a highly distributed and embedded EDI effort across the SoM which starts at each department, large units and within major education, research and training programs within the SoM. As follows is a brief overview of the historical and ongoing efforts within and across the SoM:

- All departments and or large units to consider development of EDI committees to further embed and advance our EDI efforts throughout the SoM. The SoM has over 50 EDI committees functioning across the SoM's 31 Departments, Dean's Office, large educational programs, large graduate training programs, major research programs, and large administrative units.*
- The medical school accreditation process (LCME) has long embedded EDI components in its evaluation process with the goal to create a diverse physician workforce that reflects our community. This has pushed medical schools into evaluating EDI at all levels including recruitment of students, learning environment for students, and faculty composition. In recruiting M.D. degree students, with the focus of the West Waiver on in-state students, the SoM has made a significant improvement in its recruitment of Underrepresented in Medicine (URM) candidates as well as those with disadvantaged backgrounds and will continue to use the Waivers in support of ongoing diverse recruitment efforts. We wanted to highlight that the West Waivers have been an excellent tool for the SoM. These efforts in the Medical School program are long standing and are ongoing.*
- The Graduate Medical Education (GME) programs have nationally pushed for similar initiatives as the LCME and our local GME programs have pushed to develop EDI-focused efforts for recruitment, learning environment and faculty leadership for the programs as well as affinity groups that reach across all GME programs.*
- In FY19, our Biomedical Research chairs launched an initiative to review our recruitment and learning environment for graduate students and post-doctoral students in our educational and research environment. This has been well received and all the programs and departments have been working hard to address concerns; they look to improve the recruitment process for both graduate students and faculty and to address the learning environment.*
- UW Medicine launched our Office of Healthcare Equity in July 2020, which provides system-wide leadership in support of our mission to improve the health of the public and promote equity, diversity and inclusion across all of our clinical, research and learning environments. This office consolidated existing programs under a single office to more effectively advance this work across UW Medicine, including the SoM. UW Medicine aspires to be a national leader in healthcare equity for all patients; creating a diverse and inclusive workplace; and improving the learning environment in the classroom, clinical, and research settings. In FY21, the Office of Healthcare Equity launched a new extensive training program for EDI which has been rolled out to all employees within UW Medicine, with a focus on leaders. In FY22, UW Medicine launched a bias incident reporting tool and an equity impact review tool, which provides a structured way to incorporate an equity lens into decision making and policy development. In FY23, EDI training was rolled out to all employees in UW Medicine.*
- In FY23, the SoM launched an equity work group focused on equity in compensation and career advancement/promotion for our faculty.*

Financial Commitments related to EDI



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- *The financial commitment to the UW Medicine Office of Healthcare Equity was \$3.4M in FY23 and are evaluating modest program expansion in FY24 and will benefit all units within UW Medicine including the SoM.*
- *The majority of the SoM financial commitment to EDI is distributed throughout the SoM and embedded in the units and departments; it is reflected in their decisions to support EDI via local EDI committees as well as captured in the recruitment, career and professional development and retention decisions made to improve EDI in the overall staffing for each unit as well as the learning and working environment.*
- *In FY23, the SoM created and recruited an Assistant Dean for Underrepresented in Medicine and Science (URMS) Career Development to support the careers and well-being of our URMS faculty.*



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Section 3: Tuition Based Program Rate Recommendations - Narrative Section

Text submitted within this section **will** be published to OPB's Annual Budget Development website

-- If applicable to your unit. If not applicable, simply leave this section blank --

Responses to the questions below are required for each tuition category that your unit/campus recommends adjusting (as submitted to OPB by 2/1/23). **Please note question #7 is required for any programs for which no tuition increase is requested.** If you are recommending changes for multiple tuition categories, please differentiate your responses within each question.

- 1) Please explain why each proposed change is needed and how your unit/campus will use new incremental tuition revenue increases or absorb incremental tuition revenue losses. *Word Limit: 500*

The SoM is roughly 63% of all tuition (see below) – an increase is needed to cover merit/promotion of faculty under ABB. The SoM traditionally would increase 3% to provide funding under the ABB model to fund merit, benefits and promotions. The 3% doesn't fully cover merit at 2%, if benefits also go up. The 3% increase has been to also ensure tuition remains close to benchmarks, however UW tuition has reach 107% of national/regional benchmark comparison over the last 4 years.

Please note, the SoM did a 0% increase in tuition for FY23, however, we added a new summer quarter before the start of Year 1 and increased the Year 2 summer tuition level, which increased all future student's tuition burden but not those who were entering 3rd or 4th year in FY23.

With the planned 2% faculty merit increase for Fall 2023, the SoM is proposing a 3% increase in tuition to fund merit, while trying to remain close to benchmark tuition.

FY22 -- ABB Final (from FY23 Tuition Projection)			W/ Summer Estimated	
	ABB revenue	% of Total	ABB revenue + Summer	% of Total
Undergrad	\$ 9,218,408	28%	\$ 9,218,408	24%
Other	\$ 4,744,537	14%	\$ 4,744,537	12%
MD	\$ 19,385,301	58%	\$ 19,385,301	63%
MD -- Summer	N/A		\$ 4,808,828	
	\$ 33,348,246	100%	\$ 38,157,074	100%

- 2) Explain whether and how each proposed change will affect peer comparisons and/or whether a market analysis was conducted. *Word Limit: 500*

We do an annual Medical School Tuition Analysis to compare to peer institutions – we focus on West Coast / Public and Private. The 3% tuition increase has kept the UW SoM at the 107% of comparable institutions.



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- 3) Tuition and fee increases have a disproportionate impact on low-income students. Please comment on how each fee change will affect student debt loads, and specifically how the program will offset this impact. *Word Limit: 550*

Any increase in tuition will increase student debt load;; accordingly we are cautious in our tuition increases. Our medical school graduates are experiencing an annual increase in average debt of approximately \$6k/year for the last five years (debt was \$28k higher on average for FY22 graduates vs. FY17 graduates). It should be noted, we have added a 3rd year of medical student summer tuition in FY16 (it was summer session B before year 2 and tuition was set at \$6k/year) which increased student tuition over the last 5 years and increased the debt.

The SoM has for several years approved tuition waivers to support recruitment of medical students which is to assist those from backgrounds with limited resources and to assist in recruitment of a diverse medical school class. The SoM has approved five full waivers annually since the waiver program was started. To maximize recruitment and to extend the benefits to maximum number of students, the SoM has awarded ten 50% waivers annually to incoming students (10 of the 160 new students in Washington state cohort annually). The tuition waivers are applied over all four years of medical school.

The SoM also has 10 out of state waiver, which reduce tuition to instate levels. The SoM uses these waivers to also assist with EDI recruitment efforts.

- 4) Describe whether you expect the proposed tuition rate(s) to result in any substantial changes to enrollment (including a change in the resident/nonresident composition) or to the volume of waivers awarded. *Word Limit: 250*

No change in enrollment planned in FY24. The State of Alaska has been in discussion about expansion in FY25 or FY26. Additionally, Idaho has inquired about possible FY25 or FY26 expansion, discussions remain preliminary at this time.

- 5) For each proposed change, please explain what would happen if the change were not implemented (e.g. deficit, loss of staff positions, etc.). If a proposed change is part of a plan to eliminate a current deficit, please indicate that. *Word Limit: 250*

SoM would lack ability to fund merit. Accordingly, would need to reduce costs on existing state funding to offset the impact of the merit funding requirement for tenured faculty. Based on 2% merit, this is estimated in the \$1.5M range.

- 6) For each tuition category that you have proposed changing, please discuss your unit/campus's overall tuition rate strategy for the next 3-5 years. In your response, please explain whether and how your long-term strategy connects to "market" rates (e.g. where do you want to be, rate wise, compared to peers?) *Word Limit: 250*

Goals is to maintain tuition at or near market average – while balancing need to fund merit and tuition under ABB model of UW.



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- 7) If you are not planning to increase tuition for any program, please respond to the following: Generally, small, inflationary increases (1-2% annually) are preferred over no increase or large increases every few years. Please answer the following questions for each program where no increase is requested. *Word Limit: 250*
- a) Please explain why this program's rate does not warrant an increase by describing the program's financial position, structure, peer comparisons, or other relevant information.
 - b) What do you currently anticipate annual rate change requests will be for the next two years?



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Section 4: Communication with Faculty & Student Stakeholders

*Text submitted within this section **will** be published to OPB's Annual Budget Development website*

-- If applicable to your unit. If not applicable, simply leave this section blank --

Communication of your unit's/campus's annual review materials, including your proposed FY24 operating budget, narrative responses and tuition rate recommendations is an important and necessary component of the UW's budget development process. Your responses to the questions below will be documented and included as part of the FY24 operating budget development review materials provided to Executive Leadership of the UW. **It is expected that all unit/campus review and consultative processes are completed by the March 17, 2023 due date.**

- 1) Please indicate the date that FACULTY leadership within your unit/campus was consulted and provided the opportunity to provide input as part of this budget planning exercise

Has been scheduled for last week in March 2023

- 2) Please list a point of contact for your FACULTY leadership (name and UW email address).

- *Aarti Bhat, Associate Professor, Department of Pediatrics*
aartib@uw.edu

- 3) Please indicate the date that STUDENT leadership within your unit/campus was consulted and provided the opportunity to provide input as part of this budget planning exercise.

March 7, 2023 – 5PM

- 4) Please list a point of contact for your STUDENT leadership (name and UW email address).

The two co-chairs of the medical student association this year are:

- a. Virkimal Dhaliwal - virkimal@uw.edu
- b. Darcie Caldwell - darciejc@uw.edu

- 5) Enrolled students affected by tuition rate increases should be consulted on proposed increases before proposals are finalized. Please describe when and how students were consulted and summarize the feedback they provided regarding EACH of your tuition recommendations.

- *Dr. Allen, our Vice Dean for Academic, Rural and Regional Affairs held the annual meeting with medical school leadership team to discuss the SoM proposal to increase tuition 3% for FY24. As part of the discussion, it was noted the increase goes to support increased costs in SoM for merit and inflationary costs to the M.D. degree program and additional program support. The students acknowledged the need*



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for salary increases for faculty. However, they shared that students as a group feel they pay too much in tuition and would prefer tuition not be raised or preferably decreased.

- *We would also like to share, that we began meeting annually meet with the student leadership each winter (starting in 2020) to discuss how tuition funds are spent within the M.D. degree program and that tuition doesn't fully cover the cost of education as its supplemented by state funds. We will continue to work to provide students with information about how tuition directly supports the Medical School program.*