

Health Related Institutions Summary of Recommendations - House

Page III-168

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Method of Financing	2016-17 Base	2018-19 Recommended	Biennial Change (\$)	Biennial Change (%)
General Revenue Funds	\$2,810,811,145	\$2,839,195,824	\$28,384,679	1.0%
GR Dedicated Funds	\$205,963,630	\$204,425,407	(\$1,538,223)	(0.7%)
<i>Total GR-Related Funds</i>	<i>\$3,016,774,775</i>	<i>\$3,043,621,231</i>	<i>\$26,846,456</i>	<i>0.9%</i>
Federal Funds	\$0	\$0	\$0	0.0%
Other	\$148,707,334	\$103,450,634	(\$45,256,700)	(30.4%)
All Funds	\$3,165,482,109	\$3,147,071,865	(\$18,410,244)	(0.6%)

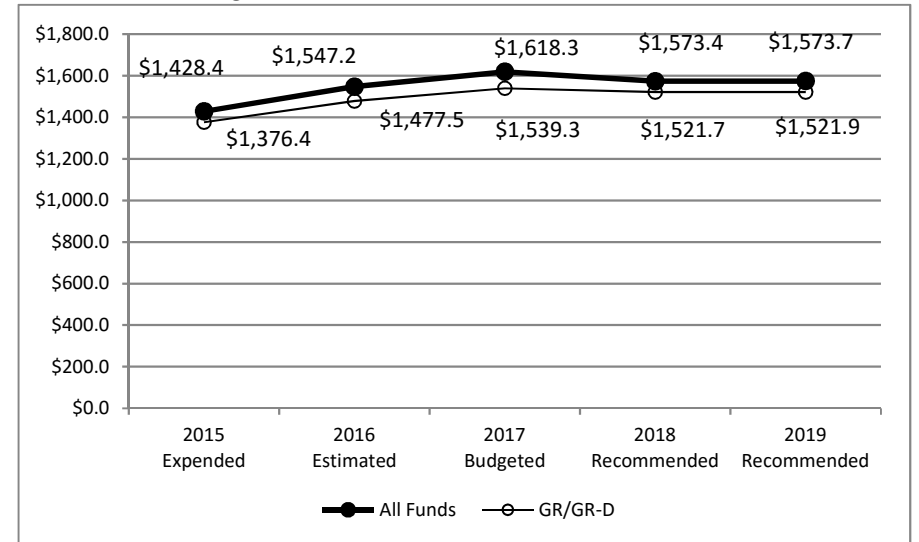
	FY 2017 Budgeted	FY 2019 Recommended	Biennial Change	Percent Change
FTEs	13,330.0	13,030.7	(299.3)	(2.2%)

Agency Budget and Policy Issues and/or Highlights

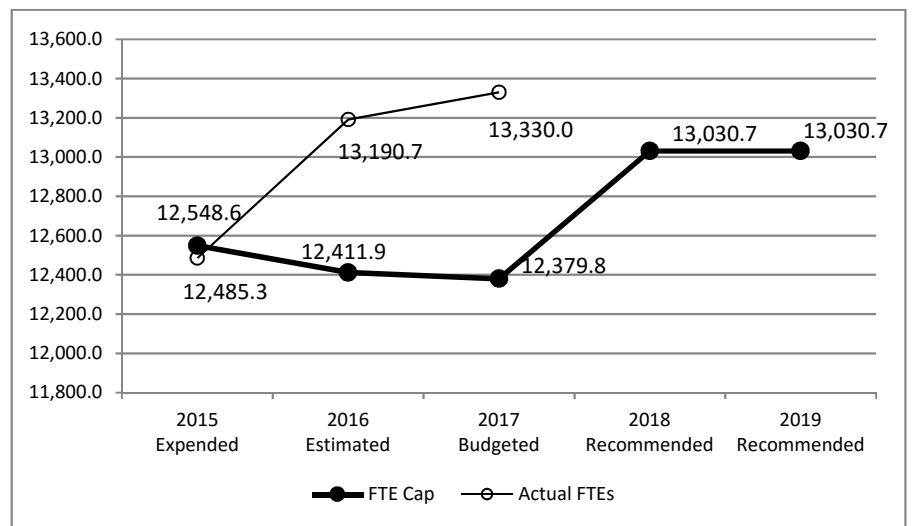
The Health Related Institutions (HRI) Summary of Recommendations packet includes budget and policy recommendations for the ten legacy Health Related Institutions that received formula funding in the 2016-17 biennium as well as the two new medical schools at The University of Texas (UT) at Austin and The University of Texas Rio Grande Valley (UTRGV). Recommendations also include budget and policy recommendations for Baylor College of Medicine, which are reflected in the Texas Higher Education Coordinating Board bill pattern. Funding recommendations for Baylor College of Medicine are not included in the funding recommendations totals included on this page.

The bill pattern for the HRIs (2018-19 Recommended) average about 10.7% of the total available funds for the 2018-19 biennium for the twelve HRIs and medical schools. See HRI Appendix 8 for breakout of each HRI.

Historical Funding Levels (Millions)



Historical Full-Time-Equivalent Employees (FTEs)



Health Related Institutions
Summary of Funding Changes and Recommendations - House

Section 2

Funding Changes and Recommendations for the 2018-19 Biennium compared to the 2016-17 Base Spending Level (in millions)		General Revenue	GR-Dedicated	Federal Funds	Other Funds	All Funds
<i>SIGNIFICANT Funding Changes and Recommendations (each issue is explained in Section 3 and additional details are provided in Appendix A):</i>						
A)	Formula Funding increase to include new medical schools at UT Austin and UTRGV.	\$22.1	\$0.0	\$0.0	\$0.0	\$22.1
B)	Non-formula General Revenue strategy decreases as a result of the institutions' four percent General Revenue base reduction.	(\$27.5)	\$0.0	\$0.0	\$0.0	(\$27.5)
C)	Special items receiving formula funding and items previously certified by the Comptroller as offset by revenue reduced by 10 percent and all other special item funding reduced by 5 percent, excluding Institutional Enhancement and Behavioral Health special items.	(\$27.1)	\$0.0	\$0.0	\$0.0	(\$27.1)
D)	New special item funding for UTHSC Houston to conduct an Integrated Care Study for Veterans with post-traumatic stress disorder.	\$4.0	\$0.0	\$0.0	\$0.0	\$4.0
E)	Tuition revenue bond debt service increase associated with projects authorized in House Bill 100, Eighty-fourth Legislature.	\$56.7	\$0.0	\$0.0	\$0.0	\$56.7
F)	Interagency Contract funding from the Health and Human Services Commission (HHSC) to UTMB for Indigent Health Care Reimbursement reduced by HHSC as a result of the agency's four percent General Revenue base reduction.	\$0.0	\$0.0	\$0.0	(\$8.9)	(\$8.9)

Health Related Institutions
Summary of Funding Changes and Recommendations - House

Section 2

Funding Changes and Recommendations for the 2018-19 Biennium compared to the 2016-17 Base Spending Level (in millions)		General Revenue	GR-Dedicated	Federal Funds	Other Funds	All Funds
<i>OTHER Funding Changes and Recommendations (these issues are not addressed in Section 3 but details are provided in Appendix A):</i>						
G)	Graduate Medical Education formula funding increase due to reallocation of formula funding associated with maintaining General Revenue for legacy HRIs and BCOM (see Item L below).	\$0.2	\$0.0	\$0.0	\$0.0	\$0.2
H)	Decrease related to Board Authorized Tuition estimate for the 2018-19 biennium.	\$0.0	(\$1.2)	\$0.0	\$0.0	(\$1.2)
I)	Decrease in funding from the Tobacco Funds based on earnings estimates provided by the institutions.	\$0.0	\$0.0	\$0.0	(\$36.3)	(\$36.3)
J)	Miscellaneous changes in GRD related to changes in statutory tuition amounts and to incorporate updated tuition estimates.	\$0.0	(\$0.3)	\$0.0	\$0.0	(\$0.3)
TOTAL SIGNIFICANT & OTHER Funding Changes and Recommendations HRI Bill Patterns (in millions)		\$28.4	(\$1.5)	\$0.0	(\$45.3)	(\$18.4)
SIGNIFICANT & OTHER Funding Increases		\$83.0	\$0.0	\$0.0	(\$45.3)	\$37.7
SIGNIFICANT & OTHER Funding Decreases		(\$54.6)	(\$1.5)	\$0.0	\$0.0	(\$56.1)
<i>SIGNIFICANT Funding Changes and Recommendations Included in Texas Higher Education Coordinating Board (THECB) Bill Pattern (explained in Section 3)</i>						
K)	Undergraduate medical education funding reduction for Baylor College of Medicine due to reductions in formula funding rates for all HRIs and a reduction in enrollment.	(\$1.7)	\$0.0	\$0.0	\$0.0	(\$1.7)
L)	Graduate Medical Education funding decrease due to a decrease in the recommended funding rate per medical resident for all institutions.	(\$0.2)	\$0.0	\$0.0	\$0.0	(\$0.2)
TOTAL SIGNIFICANT Funding Changes and Recommendations THECB (in millions)		(\$1.9)	\$0.0	\$0.0	\$0.0	(\$1.9)

NOTE: Totals may not sum due to rounding.

Health Related Institutions Selected Fiscal and Policy Issues - House

1. **Funding Overview for Health Related Institutions (HRIs).** Appropriations for HRIs are composed mainly of General Revenue, General Revenue-Dedicated (GR-D) funds, which are primarily statutory tuition and fee revenue, and Other funds for tobacco endowment earnings. Appropriations are provided to HRIs as lump sum amounts. Unlike other state agencies, higher education institutions are not bound to spend the appropriation within the specified strategy. HRIs also collect non-appropriated funds including designated funds (e.g. designated tuition, interest on local funds, restricted funds, earnings on endowments, contracts, gifts, and grants), auxiliary income, and patient income. These funds are not included in the General Appropriations Act (GAA).

While the General Revenue appropriated to an HRI is sum certain, the appropriation of GR-D funds for statutory tuition is estimated. If tuition revenue collected by an institution is different than the amount appropriated in a biennium, the institution adjusts spending to the revenue collected. Recommended GR-D levels are set based on a tuition estimate provided by the LBB based on the most recent year of tuition collections at an institution.

HRIs are appropriated funding primarily through the following: formula funding, tuition revenue bond debt service, certain hospital and dental clinic operations, special items, and tobacco endowment funds. The funding formulas for HRIs include Instruction and Operations Support, Infrastructure Support, Research Enhancement, Graduate Medical Education, and mission specific funding for The University of Texas M.D. Anderson Cancer Center (UT MD Anderson) and The University of Texas Health Science Center (UTHSC) at Tyler. Each formula is based on different drivers, such as student enrollment or space needs, and for specific purposes. The data is provided by the HRIs to the Texas Higher Education Coordinating Board (THECB). THECB compiles the data and provides the information to the LBB.

In addition, each HRI submits a Legislative Appropriations Request (LAR) for non-formula General Revenue funding. Since formula funding varies each biennium due to changes in the institution's enrollment and other formula drivers, the institutions do not request this funding.

2. **Funding for the New Medical Schools.** In July 2016, both UT Austin Dell Medical School and UTRGV School of Medicine began providing instruction to their inaugural classes of medical students. Recommendations include new budget structure elements for Dell Medical School and UTRGV School of Medicine within UT Austin and UTRGV's bill patterns, respectively, for the 2018-19 biennium. Recommendations incorporate UT Austin Dell Medical School and UTRGV School of Medicine into the HRI formula funding recommendations at the same funding rates as the other ten legacy HRIs. Formula funding recommendations total \$22.3 million in General Revenue and \$1.3 million in statutory tuition for the 2018-19 biennium for the two new medical schools. All other academic programs at UT Austin and UTRGV (including pharmacy, nursing, and allied health) are funded through the General Academic Institution (GAI) formulas. Recommendations for each of the six HRI formulas are discussed in more detail beginning on item 3 of this section.

Background:

Senate Bill 24, Eighty-third Legislative Session, established UTRGV as a GAI comprised of components including a medical school and the Lower Rio Grande Valley Academic Health Center authorized by Texas Education Code Section 74, Subchapter N and Subchapter L, respectively. The Lower Rio Grande Valley Academic Health Center, referred to as the Regional Academic Health Center (RAHC), was previously managed by UTHSC San Antonio and is in the process of being completely transitioned over to the control of UTRGV. THECB approved the UTRGV School of Medicine program proposal in April 2015.

In 2012, Travis County voters approved an increase in property taxes to provide funding support to Central Health for a new medical school at UT Austin and a new teaching hospital. Since 2014, Central Health has guaranteed a \$35 million annual payment to UT Austin Dell Medical School from funding generated by Travis County property taxes. The UT System Board of Regents also committed at least \$25 million in Available University Fund support and maintenance funding to Dell Medical School each year. THECB approved the UT Austin Dell Medical School program proposal in April 2015. UT Austin Dell Medical School is not established in statute.

Formula Funding Methodology. Recommendations maintain total 2016-17 General Revenue for the ten legacy HRIs that received formula funding in the 2016-17 biennium and also fund UT Austin Dell Medical School and UTRGV School of Medicine at the resulting rate for each of the HRI formulas. Recommendations for each of the six HRI formulas are discussed in more detail below (see HRI Appendix 1-2 for formula funding levels for each institution).

3. **Instructions and Operations (I&O) Formula.** Recommendations total \$1,182.0 million in All Funds for the 2018-19 biennium. Additional information on I&O formula funding recommendations is included in the table below.

All Funds	2016-17	2018-19	Difference	Percent Change
I&O Formula Funding				
Legacy HRIs	\$1,170.7 million	\$1,172.4 million	\$1.7 million	0.1%
New Medical Schools	-	\$9.5 million	\$9.5 million	NA
Total	\$1,170.7 million	\$1,182.0 million	\$11.3 million	1.0%
I&O Rate per Weighted FTSE	\$9,829	\$9,531	(\$298)	(3.0%)
Total Weighted FTSEs	57,518.0	59,785.4	2,267.4	3.9%

Recommendations include \$42.3 million for the Small Class Supplement, an increase of \$2.3 million over the 2016-17 biennium. Instructional programs at remote locations and the main campus at UTHSC Tyler with enrollments of less than 200 students at individual campuses receive a small class supplement of \$30,000 per FTSE for dental or medical programs and \$20,000 per FTSE for all other programs. The amount received per student decreases with each additional student added to the program up to 200 students. See HRI Appendix 5 for Small Class Supplement funding levels for each institution.

Recommendations total \$76.4 million in General Revenue for undergraduate medical education (UME) at Baylor College of Medicine, a reduction of \$1.7 million in General Revenue from 2016-17 appropriated amounts. Baylor College of Medicine is authorized to receive funding for UME based on funding provided for The University of Texas Medical Branch at Galveston (UTMB) and The University of Texas Southwestern Medical Center in accordance with Texas Education Code, Section 61.091. Funding for undergraduate medical education is appropriated through THECB's bill pattern. Under statute, THECB "may" contract with Baylor College of Medicine for undergraduate medical education.

Statute relating to undergraduate medical education for Baylor College of Medicine was added in 1971 when there were five accredited public medical schools in Texas. Currently, Texas has eleven accredited medical schools with several new medical schools in various stages of development. The University of Incarnate Word received provisional accreditation for a School of Osteopathic Medicine, which will award Doctor of Osteopathic (D.O.) Medicine degrees and is scheduled to admit its first class in Fall 2017. Texas Christian University (TCU) and UNTHSC are partnering to create a new medical school, which will award Doctor of Medicine (M.D.) degrees, and is scheduled to admit its first class in Fall 2019. UNTHSC currently only has an osteopathic medical school and is prohibited by statute from offering M.D. degrees. Unless statute is amended, the program will not include UNTHSC's name. Two GAI institutions are also in the preliminary stages of developing a new medical school, with University of Houston developing an M.D. degree program and Sam Houston State University developing a D.O. degree program.

4. **Infrastructure Support Formula.** Recommendations total \$267.6 million in All Funds for the 2018-19 biennium. Recommendations fund all HRIs at a rate of \$6.37 annually per predicted square foot. UT M.D. Anderson Cancer Center and UTHSC Tyler were previously funded at a lower rate as the two institutions did not contribute statutory tuition to the Infrastructure formula when it was established. Because both institutions contribute statutory tuition to the Infrastructure formula for the 2018-19 biennium, recommendations fund the two institutions at the same rate as the other HRIs and medical schools. Additional information on Infrastructure Support formula recommendations is included in the table below.

THECB conducted a study to review the space projection model, including an analysis of the methodology used in the current model and recommendations to enhance the accuracy and validity of the space projection determined by the model. The study provides three new options for consideration for the HRI space model. Because there was no consensus among the representatives from the HRIs on a preferred model to recommend, Infrastructure Support formula recommendations are based on current space projection model calculations provided by THECB.

All Funds	2016-17	2018-19	Difference	Percent Change
Infrastructure Support Formula Funding				
Legacy HRIs	\$265.4 million	\$264.1 million	(\$1.3 million)	(0.5%)
New Medical Schools	-	\$3.5 million	\$3.5 million	NA
Total	\$265.4 million	\$267.6 million	\$2.2 million	0.8%
Infrastructure Support Rate	\$6.65 per predicted SF (\$6.26 for MD Anderson and UTHSC Tyler)	\$6.37 per predicted SF (all institutions)		

5. **Research Enhancement Formula.** Recommendations total \$80.6 million in General Revenue for the 2018-19 biennium. This formula provides base funding of \$1,412,500 per year to each institution plus 1.21 percent of the institution's fiscal year 2015 research expenditures as reported to THECB. Recommendations continue to include research conducted by faculty of an HRI under contract with a clinical partner in the formula allocations. Additional information on Research Enhancement formula recommendations is included in the table below.

General Revenue	2016-17	2018-19	Difference	Percent Change
Research Enhancement Formula Funding				
Legacy HRIs	\$74.6 million	\$74.6 million	-	0.0%
New Medical Schools	-	\$6.1 million	\$6.1 million	NA
Total	\$74.6 million	\$80.6 million	\$6.1 million	8.1%
Research Enhancement Rate	1.23% plus base rate of \$1.4 million	1.21% plus base rate of \$1.4 million		

6. **Graduate Medical Education (GME) Formula.** Recommendations total \$74.7 million in General Revenue for the 2018-19 biennium. Additional information on GME formula recommendations is included in the table below.

Baylor College of Medicine receives funding through the GME formula for medical residents in accordance with Texas Education Code, Section 61.097. Recommendations for GME for Baylor College of Medicine total \$15.4 million in General Revenue, a decrease of \$0.2 million from the 2016-17 funding level. Funding for GME at Baylor College of Medicine is appropriated through THECB's bill pattern. See Section 3a for additional information on GME appropriations in Article III.

	2016-17	2018-19	Difference	Percent Change
GME Formula Funding				
Legacy HRIs	\$70.2 million	\$70.4 million	\$0.2 million	0.3%
New Medical Schools	-	\$4.3 million	\$4.3 million	NA
Subtotal without BCOM	\$70.2 million	\$74.7 million	\$4.5 million	6.4%
Baylor College of Medicine	\$15.6 million	\$15.4 million	(\$0.2 million)	(1.3%)
Total with BCOM	\$85.9 million	\$90.1 million	\$4.3 million	5.0%
GME Rate per Resident	\$6,266	\$5,824	(\$441)	(7.1%)
Total Residents	6,853	7,739	886	12.9%

7. **Mission Specific Formulas.** Recommendations maintain 2016-17 General Revenue funding levels for the Cancer Center Operations Formula (mission specific formula for UT M.D. Anderson) and the Chest Disease Center Operations Formula (mission specific formula for UTHSC Tyler). Recommendations total \$264.8 million in General Revenue for the Cancer Center Operations Formula and \$58.4 million for the Chest Disease Center Operations Formula.

Non-Formula Funding

8. **Four Percent General Revenue Base Reductions.** Recommendations include a \$27.5 million General Revenue reduction in non-formula General Revenue strategies due to the four percent base reduction requirement. These non-formula General Revenue strategies include special item funding, unemployment compensation insurance, worker's compensation insurance, lease of facilities, and hospital/dental clinic funding. Formula funding, behavioral health special items, and tuition revenue bond debt service were exempted from the four percent reduction calculation. The manner in which the four percent base reductions was achieved varied by each institution, with some HRIs applying across the board reductions to all eligible strategies while others targeted funding reductions to specific programs. Recommendations are based on the four percent base reductions submitted by each institution.
9. **Special Item Funding.** Recommendations for special item funding total \$415.5 million General Revenue, a reduction of \$50.4 million from the 2016-17 biennium. Recommendations include a reduction of \$23.1 million in General Revenue in addition to the four percent baseline reductions applied to each institution. These recommendations include: (1) maintaining special item funding for behavioral health special items and institutional enhancement; (2) reducing funding for special items that receive formula funding by 10 percent from 2018-19 requested amounts (\$16.0 million); (3) reducing funding for the Economic Development and Technology Commercialization special item at UNTHSC by 10 percent from 2016-17 funding levels (\$0.2 million); and reducing all other special items by 5 percent (\$10.8 million).

Recommendations also include \$4.0 million General Revenue for UTHSC Houston to conduct an integrated care study for veterans with post-traumatic stress disorder, in coordination with the Health and Human Services Commission (see Section 4, Rider Highlights). Appropriations for the Economic Development and Technology Commercialization at UNTHSC was no-costed by the Comptroller of Public Accounts in the 2016-17 biennium due to revenue certification rider language. Recommendations remove revenue certification rider language for this special item for the 2018-19 biennium (see Section 4, Rider Highlights). See HRI Appendix 4 for special item reductions for each institution.

10. **Tuition Revenue Bonds.** Recommendations for tuition revenue bond debt service are provided at 2018-19 requested amounts. The recommended amount of \$292.7 million General Revenue is a \$56.7 million increase over 2016-17 base funding levels due to increased tuition revenue bond debt service associated with

projects authorized in House Bill 100, Eighty-fourth Legislature, Regular Session. See HRI Appendix 6 for 2016-17 base funding levels and 2018-19 requested tuition revenue bond debt service funding for each institution.

11. **Full-Time Equivalent (FTE) Methodology.** Recommendations set the FTE cap at the FY 2016 actual levels for all appropriated FTEs positions adjusted by 1.0 FTE for every \$250,000 increase/decrease of formula funding and special item General Revenue included in the recommendations compared to the 2016-17 biennium. Moving forward, recommendations would maintain this FTE to funding ratio for all subsequent formula funding decisions made during the 85th Legislative Session. See Appendix C for FTE cap recommendations for each institution.

Historically, FTE cap recommendations were set at the lower number between previous fiscal year actual FTE levels (the most recent data available) or the institutions' requested amounts. While the changes for each institution's cap would vary, the total FTE cap using the previous methodology would total 13,340.0 FTEs in FY 2019, an increase of 309.9 FTEs above the recommended FTE cap for FY 2019.

12. **UTMB Indigent Health Care Reimbursement.** Recommendations reduce funding for Medical Branch Hospital funding at UTMB by \$8.9 million in Interagency Contract funding to align with funding recommendations for the Health and Human Services Commission (HHSC). In the 2016-17 biennium, an appropriation of \$4.9 million per year was made to the Department of State Health Services for Indigent Health Care Reimbursement funding for UTMB. Through the consolidation of the health and human services system per Senate Bill 200, Eighty-fourth Legislature, the second year of the appropriation was transferred to HHSC. As part of the agency's four percent base reduction, HHSC reduced Indigent Health Care Reimbursement funding by \$4.5 million per year.

Health Related Institutions
GME Funding Overview - House

Graduate Medical Education Funding. Recommendations for GME funding in Article III total \$196.3 million, an increase of \$34.1 million from 2016-17 appropriated amounts. Recommendations increase GME formula funding by \$4.3 million to fund UT Austin Dell Medical School and UTRGV School of Medicine. The following table provides an overview of recommended funding levels for HRI GME formula funding and GME programs at THECB with a comparison to 2016-17 funding levels.

Program ¹	2016-17 Appropriated	2018-19 Recommended	Difference	Percent Change
Health Related Institutions				
GME Formula Funding ²	\$85.9 million	\$90.1 million	\$4.3 million	(16.6%)
Higher Education Coordinating Board				
GME Expansion ³	\$53.0 million	\$82.8 million	\$29.8 million	56.2%
Family Practice Residency Program ⁴	\$16.8 million	\$16.8 million	-	-
Emergency and Trauma Care Education Partnership Program	\$4.5 million	\$4.5 million	-	-
Primary Care Innovation Grants	\$2.1 million	\$2.1 million	-	-
TOTAL	\$162.3 million	\$196.3 million	\$34.1 million	20.9%

¹ Residency programs can receive funding through multiple programs. For example, a resident can be funded through the Graduate Medical Education Expansion strategy and through the Graduate Medical Education formula.

² The Graduate Medical Education Formula amounts include funds appropriated for graduate medical education at Baylor College of Medicine through the THECB's bill pattern.

³ Recommendations include \$21.8 million in estimated distributions for the Permanent Fund Supporting Graduate Medical Education.

⁴ In the 2016-17 biennium, the Family Practice Residency Program and Emergency and Trauma Care Education Partnership Program were supported by \$12.8 million and \$4.5 million respectively in Trauma Care Account 5111 funds. Recommendations replace Trauma Care Account 5111 funding with General Revenue for the 2018-19 biennium

University of Texas M.D. Anderson Cancer Center
Contracting Highlights - House

Summary of Contracts Awarded 09/01/2014 to 01/17/2017 and Reported to LBB Contracts Database*

(Dollar values rounded to the nearest tenth of a million)

	Number	Total Value	Average Value	% of total
Procurement Contracts	46	\$ 475.9	\$ 10.3	100%

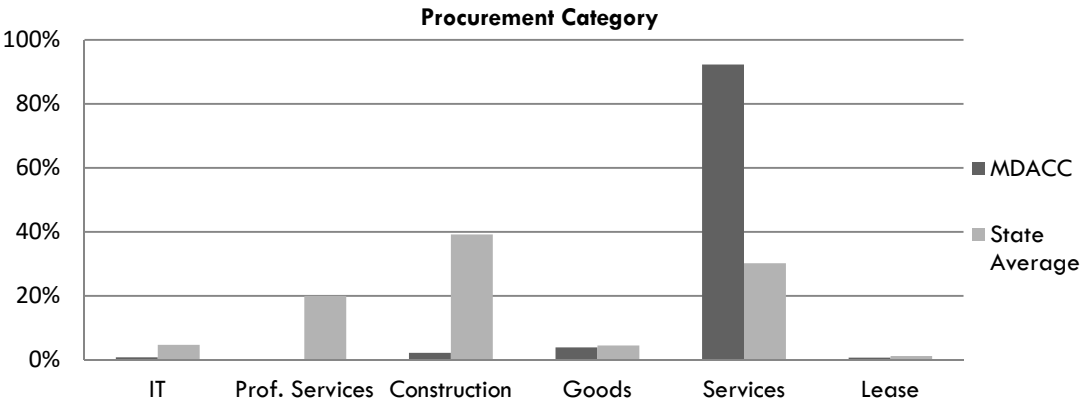
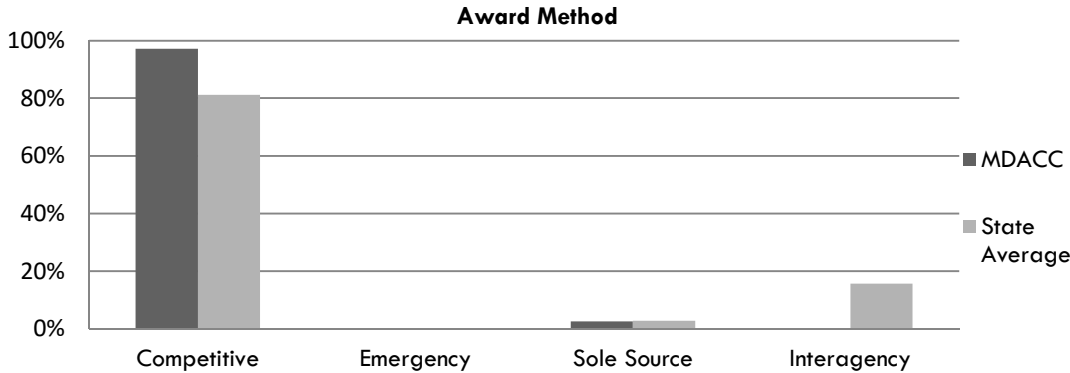
Award Method

Total Competitive Contracts	14	\$ 462.1	\$ 33.0	97.1%
Total Non-Competitive	32	\$ 13.8	\$ 0.4	2.9%
Emergency	2	\$ 1.5	\$ 0.7	0.3%
Sole Source	30	\$ 12.4	\$ 0.4	2.6%
Interagency Agreement	0	\$ -	\$ -	0.0%

Procurement Category

Information Technology	6	\$ 4.0	\$ 0.7	0.8%
Professional Services	1	\$ 0.1	\$ 0.1	0.0%
Construction	6	\$ 10.4	\$ 1.7	2.2%
Goods	12	\$ 18.6	\$ 1.6	3.9%
Other Services	18	\$ 439.3	\$ 24.4	92.3%
Lease/Rental	3	\$ 3.6	\$ 1.2	0.8%

Comparisons with State Averages



*Note: These figures reflect the total value of reported contracts awarded 09/01/2014 to 01/17/2017 and reported to the LBB contracts database. Values can include planned expenditures for subsequent years and represent the amounts contracted which may include funds from sources other than appropriated or General Revenue Funds.

University of Texas M.D. Anderson Cancer Center

Contracting Highlights

(Dollar values rounded to the nearest tenth of a million)

Largest Competitive Contracts Awarded 09/01/14 - 01/17/17	Award Method	Total Value	% Change*	Award Date	Length	Renewals	Vendor
1 Medical and/or Surgical Product Distribution Svcs.	Competitive	\$ 400.0	-	09/01/15	5 years	-	Cardinal Health 200 LLC
2 Credit Card Payment Services	Competitive	\$ 25.0	-	03/02/15	3 years	-	Elavon Inc.
3 Heavy Duty Moveable Casework	Competitive	\$ 10.0	-	02/01/15	2 years	-	AT Villa Inc.
4 Suddath Relocation System of Houston Inc.	Competitive	\$ 5.0	-	02/01/15	3 years	-	Suddath Relocation Systems

Largest Non-Competitive Contracts Awarded 09/01/14 - 01/17/17

1 Professional Services	Sole Source	\$ 2.5	-	01/01/15	3 years	-	Concur Technologies Inc.
2 Product Purchase Agreement	Sole Source	\$ 1.4	-	12/22/14	3 years	-	Belimed Inc.
3 UPS System Maintenance & Repair Services	Sole Source	\$ 1.2	-	10/09/14	2 years	-	M.C. Dean Inc.

Largest Active Contracts from Previous Fiscal Years

1 Scientific Supplies and Equipment Distribution	Competitive	\$ 120.0	-	11/01/13	10 years	-	Fisher Scientific Company
2 Furniture Provider and Furniture Provider Services	Competitive	\$ 10.0	-	01/01/13	4 years	-	OfficeMax North America
3 Phxis Equipment Rental	Competitive	\$ 10.0	-	03/01/13	6 years	-	Carefusion 211 Inc.
4 Sterilizer & Glass Washer Parts & Service	Competitive	\$ 4.0	-	01/01/13	5 years	-	Getinge USA Inc.

*Note: The percent change in contract value between initial award amount and the current contract value. Includes contract amendments and renewals.

Health Related Institutions Rider Highlights - House

The University of Texas Southwestern Medical Center

Modification of Existing Riders

3. **Texas Institute for Brain Injury and Repair.** Rider amended to update the amount of special item funding appropriated to the institute to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).
4. **Center for Regenerative Medicine.** Rider amended to update the amount of special item funding appropriated to the center to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).
5. **Center for Advanced Radiation Therapy.** Rider amended to update the amount of special item funding appropriated to the center to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).

The University of Texas Medical Branch at Galveston

Modification of Existing Riders

5. **Transfer of Appropriations – State Owned Hospitals.** Rider amended to update the amount of intergovernmental transfer funds provided to the Health and Human Services Commission in 2018-19.
10. **Informational Listing – The University of Texas Medical Branch at Galveston Patient Income.** Rider amended to updated estimated patient income collections and estimated FTE positions funded with patient income.

Deleted Riders

10. **Regional Emergency Medical Dispatch Resource Center Pilot Program.** Rider deleted due to the enactment of House Bill 479, Eighty-fourth Legislature, which transferred the regional emergency dispatch resource centers program to the Commission on State Emergency Communications. Therefore, the rider is no longer applicable.

The University of Texas Health Science Center at Houston

New Riders

9. **Integrated Care Study for Veterans with Post-Traumatic Stress Disorder.** Rider added directing UTHSC Houston to conduct an integrated care study for veterans with post-traumatic stress disorder, in coordination with the Health and Human Services Commission (see Section 3, Selected Fiscal and Policy Issues Item 9).

Modification of Existing Riders

5. **Informational Listing – The University of Texas Health Science Center at Houston Patient Income.** Rider amended to updated estimated patient income collections and estimated FTE positions funded with patient income.
8. **Biomedical Informatics Research and Education Expansion.** Rider amended to update the amount of special item funding appropriated to the program to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).

The University of Texas Health Science Center at San Antonio

Modification of Existing Riders

5. **Informational Listing – The University of Texas Health Science Center at San Antonio Patient Income.** Rider amended to updated estimated patient income collections and estimated FTE positions funded with patient income.
6. **Barshop Institute for Longevity and Aging Studies.** Rider amended to update the amount of special item funding appropriated to the institute to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).

The University of Texas M.D. Anderson Cancer Center

Modification of Existing Riders

3. **Transfer of Appropriations – State Owned Hospitals.** Rider amended to update the amount of intergovernmental transfer funds provided to the Health and Human Services Commission in 2018-19.
7. **Rare and Aggressive Breast Cancer Research Program.** Rider amended to update the amount of special item funding appropriated to the program to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).
8. **Informational Listing – The University of Texas M.D. Anderson Cancer Center Patient Income.** Rider amended to updated estimated patient income collections and estimated FTE positions funded with patient income.

The University of Texas Health Science Center at Tyler

Modification of Existing Riders

3. **Transfer of Appropriations – State Owned Hospitals.** Rider amended to update the amount of intergovernmental transfer funds provided to the Health and Human Services Commission in 2018-19.
5. **Informational Listing – The University of Texas Health Science Center at Tyler Patient Income.** Rider amended to updated estimated patient income collections and estimated FTE positions funded with patient income.
8. **Northeast Texas Initiative.** Rider amended to update the amount of special item funding appropriated to the program to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).

Texas A&M University Health Science Center

Modification of Existing Riders

8. **Informational Listing – Texas A&M Health Science Center Patient Income.** Rider amended to updated estimated patient income collections and estimated FTE positions funded with patient income.
10. **Forensic Nursing.** Rider amended to update the amount of special item funding appropriated to the program to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).

- 11. **Healthy South Texas 2025.** Rider amended to update the amount of special item funding appropriated to the program to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).
- 12. **Nursing Program Expansion.** Rider amended to update the amount of special item funding appropriated to the program to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).

University of North Texas Health Science Center

Modification of Existing Riders

- 5. **Texas Missing Persons and Human Identification Program.** Rider amended to update the amount of special item funding appropriated to the program to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).
- 6. **Institute for Patient Safety and Preventable Harm.** Rider amended to update the amount of special item funding appropriated to the institute to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).

Deleted Riders

- 6. **Contingency Appropriations: Economic Development & Technology Commercialization.** Rider deleted to remove the requirement that appropriations for the Economic Development and Technology Commercialization center are contingent on revenue certification by the Comptroller of Public Accounts (see Section 3, Selected Fiscal and Policy Issues Item 9).

Texas Tech Health Sciences Center

Modification of Existing Riders

- 6. **School of Public Health.** Rider amended to update the amount of special item funding appropriated to the institute to align with special item funding recommendations (see Section 3, Selected Fiscal and Policy Issues Item 9).

**Health Related Institutions
Items Not Included in Recommendations - House**

Section 5

		2018-19 Biennial Total			Information Technology Involved?	Contracting Involved?	Estimated Continued Cost 2020-21
		GR & GR-D	All Funds	FTEs			
Institution Budget and Policy Requests Not Included in the Recommendations							
1)	UTMB Hospital Systems Operations Formula. UTMB is requesting to convert appropriations its Health System appropriations (including its Medical Branch Hospital, Chronic Home Dialysis Center, and Support for Indigent Care strategies) to a patient-based formula. The formula would be based on the number primary care, trauma, diabetes, heart/vascular, psychiatry, and telemedicine patients the university serves. For the first biennium, the institution requests the rate be established based on current funding levels so no additional funding is associated with this request for the 2018-19 biennium.	\$0	\$0	0.0	NA	NA	Unknown - dependent on the number of patients served
2)	Dental Clinic Operations Formula. Three institutions receive funding for dental clinic operations: UTHSC Houston, UTHSC San Antonio, and TAMUHSC. These institutions each receive varying amounts of General Revenue funding through the Dental Clinic Operations Strategy, ranging from \$75,972 at TAMUHSC for the biennium to \$1.3 million at UTHSC Houston and \$3.2 million at UTHSC San Antonio. Three institutions request for this funding to be converted into a formula based on a two year average number of patient visits to undergraduate dental students at a School of Dentistry clinic. The proposed rate would be \$45 per visit to cover the current operating losses per visit. Based on patient information submitted by the institutions, this rate and methodology would require an increase in General Revenue funds of \$10.7 million over 2018-19 recommended funding levels.	\$10,745,680	\$10,745,680	0.0	NA	NA	Unknown - dependent on the number of patients served
3)	Biomedical Informatics Instruction and Operations (I&O) Weight Adjustment. UTHSC Houston requests the addition of a new Biomedical Informatics weight of 1.750 in the I&O Formula to better cover the costs related to a biomedical informatics program. Currently, biomedical informatics is categorized as an Allied Health program with a weight of 1.0.	\$2,290,048	\$2,290,048	0.0	NA	NA	Unknown - dependent on enrollment and formula funding rate

**Health Related Institutions
Items Not Included in Recommendations - House**

Section 5

	2018-19 Biennial Total			Information Technology Involved?	Contracting Involved?	Estimated Continued Cost 2020-21
	GR & GR-D	All Funds	FTEs			

Institution Exceptional Items - In Institution Priority Order

The University of Texas Southwestern Medical Center

Note: the institution ranked the first eleven exceptional items as priority 1 in their updated exceptional items submission to the LBB.

1)	General Revenue to restore Primary Care Residency Training reduced in House Bill 1.	\$208,330	\$208,330	2.1	No	No	\$208,330
1)	General Revenue to restore Institute for Nobel/National-Academy Biomedical Research funding reduced in House Bill 1.	\$1,102,970	\$1,102,970	4.9	No	No	\$1,102,970
1)	General Revenue to restore Institute for Innovations in Medical Technology funding reduced in House Bill 1.	\$1,203,788	\$1,203,788	8.1	No	No	\$1,203,788
1)	General Revenue to restore Metroplex Comprehensive Medical Imaging Center funding reduced in House Bill 1.	\$1,003,200	\$1,003,200	5.9	No	No	\$1,003,200
1)	General Revenue to restore Center for Obesity, Diabetes, and Metabolism Research funding reduced in House Bill 1.	\$1,203,834	\$1,203,834	5.6	No	No	\$1,203,834
1)	General Revenue to restore Center for Research of Sickle Cell Disease funding reduced in House Bill 1.	\$200,642	\$200,642	0.7	No	No	\$200,642
1)	General Revenue to restore Texas Institute for Brain Injury and Repair funding reduced in House Bill 1.	\$1,320,000	\$1,320,000	7.4	No	No	\$1,320,000
1)	General Revenue to restore Center for Regenerative Science and Medicine funding reduced in House Bill 1.	\$1,408,000	\$1,408,000	7.7	No	No	\$1,408,000
1)	General Revenue to restore Center for Advanced Radiation Therapy funding reduced in House Bill 1.	\$176,000	\$176,000	0.1	No	No	\$176,000

Health Related Institutions
Items Not Included in Recommendations - House

Section 5

		2018-19 Biennial Total			Information Technology Involved?	Contracting Involved?	Estimated Continued Cost 2020-21
		GR & GR-D	All Funds	FTEs			
1)	General Revenue to restore Regional Burn Care Center funding reduced in House Bill 1.	\$16,720	\$16,720	0.0	No	No	\$16,720
1)	General Revenue to restore Program for Science Teacher Access to Resources funding reduced in House Bill 1.	\$100,320	\$100,320	0.9	No	No	\$100,320
1)	General Revenue to restore Institutional Enhancement funding reduced in House Bill 1.	\$60,800	\$60,800	0.6	No	No	\$60,800
2)	Texas Institute for Brain Injury and Repair - O'Donnell Brain Institute. Additional funding to support the extension of basic discoveries from lab and support the early steps in translational research for new patient therapies.	\$15,000,000	\$15,000,000	75.0	No	No	\$15,000,000
3)	Texas Center for Advanced Radiation Therapy (TCART). Additional funding for TCART to develop a Heavy Ion Research and Treatment Facility for cancer patients.	\$40,000,000	\$40,000,000	75.0	No	No	\$40,000,000
Total - The University of Texas Southwestern Medical Center		\$63,004,604	\$63,004,604	194.0			\$63,004,604
The University of Texas Medical Branch at Galveston							
1)	General Revenue to restore Bio-containment Critical Care Unit funding reduced in House Bill 1.	\$410,000	\$410,000	0.0	No	Yes	\$0
2)	Interagency Contract funding from HHSC for Indigent Health Care Reimbursement reduced in House Bill 1, as Introduced. Funding from General Revenue Dedicated Multicategorical Teaching Hospital Account No. 5049 appropriated to HHSC.	\$0	\$8,930,878	0.0	No	No	\$8,930,878
3)	General Revenue to restore Support for Indigent Care funding reduced in House Bill 1.	\$3,377,560	\$3,377,560	0.0	No	No	\$3,377,560
4)	General Revenue to restore Primary Care Physician Services funding reduced in House Bill 1.	\$6,134,898	\$6,134,898	0.0	No	No	\$6,134,898
5)	General Revenue to restore East Texas Area Health Education Centers funding reduced in House Bill 1.	\$1,858,648	\$1,858,648	0.0	Yes	Yes	\$1,858,648
6)	General Revenue to restore Chronic Home Dialysis Center funding reduced in House Bill 1.	\$1,773,426	\$1,773,426	0.0	No	No	\$1,773,426

Health Related Institutions
Items Not Included in Recommendations - House

Section 5

		2018-19 Biennial Total			Information Technology Involved?	Contracting Involved?	Estimated Continued Cost 2020-21
		GR & GR-D	All Funds	FTEs			
7)	General Revenue to restore Institutional Enhancement funding reduced in House Bill 1.	\$243,968	\$243,968	0.0	No	No	\$243,968
8)	Infectious Disease Research. Funding to support vaccine development and production by the Trans-Texas Vaccine Institute.	\$12,000,000	\$12,000,000	7.0	No	No	\$12,000,000
Total - The University of Texas Medical Branch at Galveston		\$25,798,500	\$34,729,378	7.0			\$34,319,378
The University of Texas Health Science Center at Houston							
<i>Note: the institution ranked the first ten exceptional items as priority 1 in their updated exceptional items submission to the LBB.</i>							
1)	General Revenue to restore Improving Public Health in Texas Communities funding reduced in House Bill 1.	\$952,000	\$952,000	2.4	No	No	\$952,000
1)	General Revenue to restore Heart Disease and Stroke Research funding reduced in House Bill 1.	\$735,680	\$735,680	0.0	No	No	\$735,680
1)	General Revenue to restore Harris County Hospital District funding reduced in House Bill 1.	\$581,544	\$581,544	1.2	No	No	\$581,544
1)	General Revenue to restore World's Greatest Scientist funding reduced in House Bill 1.	\$334,400	\$334,400	1.0	No	No	\$334,400
1)	General Revenue to restore Biomedical Informatics Research and Education Expansion funding reduced in House Bill 1.	\$281,600	\$281,600	1.0	No	No	\$281,600
1)	General Revenue to restore Biotechnology Program funding reduced in House Bill 1.	\$133,760	\$133,760	0.3	No	No	\$133,760
1)	General Revenue to restore Regional Academic Health Center - Public Health funding reduced in House Bill 1.	\$100,320	\$100,320	0.3	No	No	\$100,320
1)	General Revenue to restore Trauma Care funding reduced in House Bill 1.	\$88,000	\$88,000	0.0	No	No	\$88,000
1)	General Revenue to restore Service Delivery in the Valley/Border Region reduced in House Bill 1.	\$75,768	\$75,768	0.0	No	No	\$75,768
1)	General Revenue to restore Institutional Enhancement funding reduced in House Bill 1.	\$48,528	\$48,528	0.0	No	No	\$48,528

Health Related Institutions
Items Not Included in Recommendations - House

Section 5

		2018-19 Biennial Total			Information Technology Involved?	Contracting Involved?	Estimated Continued Cost 2020-21
		GR & GR-D	All Funds	FTEs			
2)	General Revenue funding for amounts reduced to comply with the four percent biennial reduction, which would be used to support dental clinic operations, workers compensation insurance, and unemployment insurance.	\$87,826	\$87,826	0.2	No	No	\$87,826
3)	Women's Health Education and Research Center. Funding to build a collaborative center to recruit talent, conduct research, and provide workforce education to meet the health needs of Texas women.	\$18,000,000	\$18,000,000	30.0	No	No	\$18,000,000
Total - The University of Texas Health Science Center at Houston		\$21,419,426	\$21,419,426	36.4			\$21,419,426
The University of Texas Health Science Center at San Antonio							
1)	Barshop Institute for Aging Studies. Additional funding to expand the institute's Translational Aging Research Program to reach more participants, expand into Military Health, and to sustain a subject registry and repository. The institution also requested unexpended balance authority between fiscal year 2018 and fiscal year 2019.	\$5,000,000	\$5,000,000	10.0	Yes	No	\$5,000,000
2)	Regional Campus - Laredo. Additional funding to support increased student enrollment and to expand educational programs, residency training programs, and residency rotations.	\$2,900,000	\$2,900,000	10.0	No	No	\$2,900,000
3)	Outreach Support - South Texas Programs. Additional funding to support the expansion of the program to include health education programs such as the South Texas Childhood Obesity Initiative and to maintain a data registry system for the South Texas region.	\$3,350,000	\$3,350,000	5.0	Yes	No	\$3,350,000
Total - The University of Texas Health Science Center at San Antonio		\$11,250,000	\$11,250,000	25.0			\$11,250,000
The University of Texas M.D. Anderson Cancer Center							
1)	General Revenue to restore Breast Cancer Research Program funding reduced in House Bill 1.	\$160,000	\$160,000	1.0	No	No	\$160,000
2)	General Revenue to restore Institutional Enhancement and Research Support funding reduced in House Bill 1.	\$375,940	\$375,940	1.0	No	No	\$375,940

Health Related Institutions
Items Not Included in Recommendations - House

Section 5

		2018-19 Biennial Total			Information Technology Involved?	Contracting Involved?	Estimated Continued Cost 2020-21
		GR & GR-D	All Funds	FTEs			
3)	Rare Aggressive Breast Cancer Research Program. Additional funding for the Breast Cancer Research Program to develop a bio-repository of tissue and serum samples from Inflammatory Breast Cancer (IBC) patients and for partnerships with other centers around the world to expand the repository, accelerate development of new therapies, and ultimately improve the health of women with IBC.	\$2,800,000	\$2,800,000	0.0	No	No	\$2,800,000
Total - The University of Texas M.D. Anderson Cancer Center		\$3,335,940	\$3,335,940	2.0			\$3,335,940
The University of Texas Health Science Center at Tyler							
1)	General Revenue to restore Family Practice Residency Program and Support for Indigent Care funding reduced in House Bill 1.	\$188,666	\$188,666	0.0	No	No	\$188,666
2)	Mental Health Workforce Training Program. Additional funding to expand the institution's existing program and research to serve youth and families with mental illness.	\$5,460,000	\$5,460,000	16.0	No	No	\$5,460,000
3)	General Revenue funding for amounts reduced to comply with the four percent biennial reduction, which would be used to support the Northeast Texas Initiative.	\$536,464	\$536,464	0.0	No	No	\$536,464
4)	General Revenue to restore funding to the Northeast Texas Initiative funding reduced in House Bill 1.	\$352,424	\$352,424	0.0	No	No	\$352,424
Total - The University of Texas Health Science Center at Tyler		\$6,537,554	\$6,537,554	16.0			\$6,537,554
Texas A&M University Health Science Center							
1)	General Revenue to restore funding to College Station, Temple, and Round Rock - Medical funding reduced in House Bill 1.	\$4,302,360	\$4,302,360	17.2	No	No	\$4,302,360
2)	General Revenue to restore Irma Rangel College of Pharmacy funding reduced in House Bill 1.	\$648,654	\$648,654	2.6	No	No	\$648,654
3)	General Revenue to restore Institutional Enhancement funding reduced in House Bill 1.	\$178,792	\$178,792	0.7	No	No	\$178,792

Health Related Institutions
Items Not Included in Recommendations - House

Section 5

		2018-19 Biennial Total			Information Technology Involved?	Contracting Involved?	Estimated Continued Cost 2020-21
		GR & GR-D	All Funds	FTEs			
4)	General Revenue to restore Coastal Bend Health Education Center funding reduced in House Bill 1.	\$283,334	\$283,334	1.2	No	No	\$283,334
5)	General Revenue to restore Healthy South Texas 2025 funding reduced in House Bill 1.	\$880,000	\$880,000	7.0	No	Yes	\$880,000
6)	General Revenue to restore Forensic Nursing funding reduced in House Bill 1.	\$176,000	\$176,000	0.7	No	No	\$176,000
7)	General Revenue to restore Nursing Program Expansion funding reduced in House Bill 1.	\$68,000	\$68,000	0.3	No	No	\$68,000
8)	Healthy Texas. Additional funding to support the expansion of the Healthy South Texas program in the existing 27 county service region and to expand the program statewide. The institution also requested unexpended balance authority between fiscal year 2018 and fiscal year 2019.	\$10,000,000	\$10,000,000	37.7	No	Yes	\$10,000,000
9)	General Revenue to restore South Texas Health Center funding reduced in House Bill 1.	\$122,166	\$122,166	0.5	No	No	\$122,166
Total - Texas A&M University Health Science Center		\$16,659,306	\$16,659,306	67.9			\$16,659,306
University of North Texas Health Science Center							
1)	General Revenue to restore Institute for Patient Safety and Preventable Harm funding reduced in House Bill 1.	\$194,464	\$194,464	2.0	No	No	\$194,464
2)	General Revenue to restore Alzheimer's Diagnostic and Treatment Center funding reduced in House Bill 1.	\$59,000	\$59,000	0.5	No	No	\$59,000
3)	General Revenue to restore DNA Laboratory funding reduced in House Bill 1.	\$217,962	\$217,962	2.3	No	No	\$217,962
4)	General Revenue to restore Texas Missing Persons and Human Identification Program funding reduced in House Bill 1.	\$111,718	\$111,718	1.3	No	No	\$111,718
5)	General Revenue funding for amounts reduced to comply with the four percent biennial reduction, which would be used to support existing special items, unemployment insurance, and workers compensation.	\$698,690	\$698,690	0.0	No	No	\$698,690

Health Related Institutions
Items Not Included in Recommendations - House

Section 5

		2018-19 Biennial Total			Information Technology Involved?	Contracting Involved?	Estimated Continued Cost 2020-21
		GR & GR-D	All Funds	FTEs			
6)	General Revenue to restore Economic Development and Technology Commercialization funding reduced in House Bill 1.	\$246,598	\$246,598	0.0	No	Yes	\$246,598
7)	Center for Genome Guided Personalized Medicine. Funding to conduct pharmacogenetic testing to establish optimal drug dosing, avoid adverse drug reactions, and to conduct research to promote patient safety and advance personalized medicine research.	\$8,000,000	\$8,000,000	22.0	No	Yes	\$8,000,000
Total - University of North Texas Health Science Center		\$9,528,432	\$9,528,432	28.1			\$9,528,432
Texas Tech University Health Sciences Center							
1)	General Revenue to restore Institutional Enhancement funding reduced in House Bill 1.	\$641,484	\$641,484	0.0	No	No	\$641,484
2)	General Revenue to restore Integrated Health Network funding reduced in House Bill 1.	\$177,218	\$177,218	2.0	No	No	\$177,218
3)	General Revenue to restore West Texas Area Health Education Center (AHEC) funding reduced in House Bill 1.	\$352,000	\$352,000	2.0	No	Yes	\$352,000
4)	General Revenue to restore Midland Medical Residency funding reduced in House Bill 1.	\$259,736	\$259,736	3.0	No	No	\$259,736
5)	General Revenue to restore Medical Education - Odessa funding reduced in House Bill 1.	\$208,662	\$208,662	2.0	No	No	\$208,662
6)	General Revenue to restore Family and Community Medicine Residency funding reduced in House Bill 1.	\$80,378	\$80,378	1.0	No	No	\$80,378
7)	Telemedicine Wellness Intervention and Triage Referral Project (TWITR). Funding to continue and expand the services provided by the TWITR project, which include screening students at risk for committing school violence and intervening with those students before acts of violence occur.	\$1,750,000	\$1,750,000	8.0	No	No	\$1,750,000

Health Related Institutions
Items Not Included in Recommendations - House

Section 5

		2018-19 Biennial Total			Information Technology Involved?	Contracting Involved?	Estimated Continued Cost 2020-21
		GR & GR-D	All Funds	FTEs			
8)	General Revenue to restore Rural Health Care funding reduced in House Bill 1.	\$136,726	\$136,726	0.0	No	No	\$136,726
9)	General Revenue to restore School of Public Health funding reduced in House Bill 1.	\$317,038	\$317,038	2.0	No	No	\$317,038
10)	General Revenue to restore Physician Assistant Program funding reduced in House Bill 1.	\$105,066	\$105,066	0.5	No	No	\$105,066
11)	General Revenue to restore Cancer Research funding reduced in House Bill 1.	\$321,024	\$321,024	0.0	No	No	\$321,024
12)	Physical Assistant Rural Fellowship Program. Funding to establish a Physician Assistant Rural Fellowship Program to address factors that deter physician assistants from practicing in rural areas.	\$520,000	\$520,000	2.2	No	No	\$520,000
13)	Interprofessional Education Initiative. Funding to establish community engagement programs at each TTUHSC campus to provide enhanced interprofessional education experiences to students and healthcare providers.	\$5,000,000	\$5,000,000	12.0	No	No	\$5,000,000
14)	Family Medicine Accelerated Track (FMAT). Funding to support the FMAT program, a 3-year accelerated family medicine program that eliminates a year from the standard 4-year medical education program.	\$1,450,000	\$1,450,000	5.0	No	No	\$1,450,000
Total - Texas Tech University Health Sciences Center		\$11,319,332	\$11,319,332	39.7			\$11,319,332
Texas Tech University Health Sciences Center at El Paso							
1)	General Revenue to restore Paul L. Foster School of Medicine funding reduced in House Bill 1.	\$7,627,968	\$7,627,968	36.7	No	Yes	\$7,627,968
2)	General Revenue to restore Border Health Care Support - Resident Support funding reduced in House Bill 1.	\$572,048	\$572,048	5.6	No	No	\$572,048
3)	General Revenue to restore South Texas Border Region Health Professional Education Funding reduced in House Bill 1.	\$121,216	\$121,216	1.2	No	No	\$121,216

Health Related Institutions
Items Not Included in Recommendations - House

Section 5

		2018-19 Biennial Total			Information Technology Involved?	Contracting Involved?	Estimated Continued Cost 2020-21
		GR & GR-D	All Funds	FTEs			
4)	General Revenue to restore Institutional Enhancement funding reduced in House Bill1.	\$60,800	\$60,800	0.7	No	No	\$60,800
5)	General Revenue to restore Academic Operations Support - Border Region Development funding reduced in House Bill 1.	\$52,630	\$52,630	0.5	No	No	\$52,630
6)	General Revenue to restore Diabetes Research Center funding reduced in House Bill 1.	\$38,676	\$38,676	0.2	No	No	\$38,676
7)	General Revenue to restore Workers Compensation funding reduced in House Bill 1.	\$9,248	\$9,248	0.0	No	No	\$9,248
Total - Texas Tech University Health Sciences Center at El Paso		\$8,482,586	\$8,482,586	44.9			\$8,482,586
The University of Texas at Austin - Dell Medical School							
	None	\$0	\$0	0.0			\$0
Total - The University of Texas at Austin - Dell Medical School		\$0	\$0	0.0			\$0
The University of Texas Rio Grande Valley - School of Medicine							
1)	General Revenue to restore School of Medicine funding reduced in House Bill 1.	\$6,139,790	\$6,139,790	0.0	No	No	\$6,139,790
2)	School of Medicine. Additional funding to support faculty and staff as well as funding to provide operating funds toward achieving provisional accreditation and in the development of Years 3 and 4 of medical education. Funding will also support clinical sites, partnerships, and additional student support and academic resources.	\$10,000,000	\$10,000,000	22.0	No	No	\$10,000,000
Total - The University of Texas Rio Grande Valley - School of Medicine		\$16,139,790	\$16,139,790	22.0			\$16,139,790
TOTAL Items Not Included in Recommendations		\$206,511,198	\$215,442,076	483.0			\$201,996,348

**Health Related Institutions
HRI Specific Appendices - House**

Table of Contents		
Appendix	Appendix Title	Page
1	Total Formula Recommendations Compared to 2016-17 Base	26
2	Total Formula Recommendations Compared to Formula Drivers	29
3	Recommended General Revenue Compared to 2016-17 Base	32
4	Special Item Funding Compared to 2016-17 GR Base	33
5	Instruction and Operations Formula - Small Class Supplement	34
6	Tuition Revenue Bond Debt Service	35
7	Nursing and Pharmacy Funding Overview	36
8	Percentage of Funds Outside the Bill Pattern	37
9	Summary of Select Funding Outside the HRI Bill Patterns	38

Health Related Institutions
Total Formula Recommendations Compared to 2016-17 Base - House

HRI Appendix 1

Instruction and Operations	Formula General Revenue 2016-17	Formula General Revenue 2018-19	Formula GR Difference	% GR Variance Biennium	Formula GR-D 770 2016-17	Formula GR-D 770 2018-19	Formula GR-D 770 Difference	% GR-D 770 Variance Biennium	Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Total Formula All Funds Difference	% All Funds Variance Biennium
UT Southwestern Medical Center	\$ 104,853,698	\$ 100,984,822	\$ (3,868,876)	-3.7%	\$ 8,330,034	\$ 7,559,210	\$ (770,824)	-9.3%	\$ 113,183,732	\$ 108,544,032	\$ (4,639,700)	-4.1%
UT Medical Branch at Galveston	\$ 128,472,123	\$ 122,590,643	\$ (5,881,480)	-4.6%	\$ 13,647,679	\$ 13,192,931	\$ (454,748)	-3.3%	\$ 142,119,802	\$ 135,783,574	\$ (6,336,228)	-4.5%
UT Health Science Center at Houston	\$ 199,867,653	\$ 202,531,896	\$ 2,664,243	1.3%	\$ 13,596,873	\$ 13,282,442	\$ (314,431)	-2.3%	\$ 213,464,526	\$ 215,814,338	\$ 2,349,812	1.1%
UT Health Science Center at San Antonio	\$ 165,369,115	\$ 160,605,779	\$ (4,763,335)	-2.9%	\$ 8,992,257	\$ 9,003,615	\$ 11,357	0.1%	\$ 174,361,372	\$ 169,609,394	\$ (4,751,978)	-2.7%
UT M.D. Anderson Cancer Center	\$ 6,718,996	\$ 5,490,602	\$ (1,228,394)	-18.3%	\$ 252,542	\$ 1,296,716	\$ 1,044,174	413.5%	\$ 6,971,538	\$ 6,787,318	\$ (184,220)	-2.6%
UT Health Science Center at Tyler	\$ 890,546	\$ 168,645	\$ (721,900)	-81.1%	\$ 98,412	\$ 632,971	\$ 534,558	543.2%	\$ 988,958	\$ 801,616	\$ (187,342)	-18.9%
Texas A&M University Health Science Center	\$ 162,586,380	\$ 164,615,407	\$ 2,029,027	1.2%	\$ 10,958,608	\$ 11,545,773	\$ 587,165	5.4%	\$ 173,544,988	\$ 176,161,180	\$ 2,616,192	1.5%
UNT Health Science Center	\$ 118,875,841	\$ 121,529,802	\$ 2,653,961	2.2%	\$ 10,707,323	\$ 10,321,396	\$ (385,927)	-3.6%	\$ 129,583,164	\$ 131,851,198	\$ 2,268,034	1.8%
Texas Tech University Health Sciences Center	\$ 169,279,900	\$ 174,255,996	\$ 4,976,096	2.9%	\$ 10,396,472	\$ 11,124,348	\$ 727,876	7.0%	\$ 179,676,372	\$ 185,380,344	\$ 5,703,972	3.2%
Texas Tech University Health Sciences Center at El Paso	\$ 34,274,523	\$ 38,415,176	\$ 4,140,653	12.1%	\$ 2,529,721	\$ 3,294,180	\$ 764,459	30.2%	\$ 36,804,244	\$ 41,709,356	\$ 4,905,112	13.3%
UT Austin Dell Medical School ¹	\$ -	\$ 3,764,173	\$ 3,764,173	NA	\$ -	\$ 765,979	\$ 765,979	NA	\$ -	\$ 4,530,152	\$ 4,530,152	NA
UT Rio Grande Valley School of Medicine ¹	\$ -	\$ 4,695,830	\$ 4,695,830	NA	\$ -	\$ 287,338	\$ 287,338	NA	\$ -	\$ 4,983,168	\$ 4,983,168	NA
INSTRUCTION AND OPERATIONS SUBTOTAL	\$ 1,091,188,775	\$ 1,099,648,773	\$ 8,459,999	0.8%	\$ 79,509,921	\$ 82,306,897	\$ 2,796,975	3.5%	\$ 1,170,698,696	\$ 1,181,955,670	\$ 11,256,974	1.0%
Baylor College of Medicine Undergraduate Medical Education ²	\$ 78,012,350	\$ 76,354,880	\$ (1,657,470)	-2.1%	\$ -	\$ -	\$ -	NA	\$ 78,012,350	\$ 76,354,880	\$ (1,657,470)	-2.1%
INSTRUCTION AND OPERATIONS w/ BCOM SUBTOTAL	\$ 1,169,201,125	\$ 1,176,003,653	\$ 6,802,529	0.6%	\$ 79,509,921	\$ 82,306,897	\$ 2,796,975	3.5%	\$ 1,248,711,046	\$ 1,258,310,550	\$ 9,599,504	0.8%
Infrastructure ³	Formula General Revenue 2016-17	Formula General Revenue 2018-19	Formula GR Difference	% GR Variance Biennium	Formula GR-D 770 2016-17	Formula GR-D 770 2018-19	Formula GR-D 770 Difference	% GR-D 770 Variance Biennium	Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Total Formula All Funds Difference	% All Funds Variance Biennium
UT Southwestern Medical Center	\$ 51,077,507	\$ 49,504,530	\$ (1,572,977)	-3.1%	\$ 1,787,073	\$ 1,606,714	\$ (180,359)	-10.1%	\$ 52,864,580	\$ 51,111,244	\$ (1,753,336)	-3.3%
UT Medical Branch at Galveston	\$ 24,436,012	\$ 23,804,378	\$ (631,634)	-2.6%	\$ 2,927,886	\$ 2,804,164	\$ (123,722)	-4.2%	\$ 27,363,898	\$ 26,608,542	\$ (755,356)	-2.8%
UT Health Science Center at Houston	\$ 39,972,281	\$ 39,181,215	\$ (791,066)	-2.0%	\$ 2,916,987	\$ 2,823,189	\$ (93,798)	-3.2%	\$ 42,889,268	\$ 42,004,404	\$ (884,864)	-2.1%
UT Health Science Center at San Antonio	\$ 27,668,483	\$ 25,920,335	\$ (1,748,148)	-6.3%	\$ 1,929,141	\$ 1,913,723	\$ (15,418)	-0.8%	\$ 29,597,624	\$ 27,834,058	\$ (1,763,566)	-6.0%
UT M.D. Anderson Cancer Center	\$ 57,814,806	\$ 62,625,104	\$ 4,810,298	8.3%	\$ 1,177,170	\$ 275,618	\$ (901,552)	-76.6%	\$ 58,991,976	\$ 62,900,722	\$ 3,908,746	6.6%
UT Health Science Center at Tyler	\$ 1,811,426	\$ 2,400,458	\$ 589,032	32.5%	\$ 458,728	\$ 134,538	\$ (324,190)	-70.7%	\$ 2,270,154	\$ 2,534,996	\$ 264,842	11.7%
Texas A&M University Health Science Center	\$ 14,475,114	\$ 14,600,525	\$ 125,411	0.9%	\$ 2,350,990	\$ 2,454,059	\$ 103,069	4.4%	\$ 16,826,104	\$ 17,054,584	\$ 228,480	1.4%
UNT Health Science Center	\$ 8,535,109	\$ 7,767,611	\$ (767,498)	-9.0%	\$ 2,297,081	\$ 2,193,817	\$ (103,264)	-4.5%	\$ 10,832,190	\$ 9,961,428	\$ (870,762)	-8.0%
Texas Tech University Health Sciences Center	\$ 15,501,705	\$ 15,690,023	\$ 188,318	1.2%	\$ 2,230,393	\$ 2,364,485	\$ 134,092	6.0%	\$ 17,732,098	\$ 18,054,508	\$ 322,410	1.8%
Texas Tech University Health Sciences Center at El Paso	\$ 5,503,496	\$ 5,301,763	\$ (201,733)	-3.7%	\$ 542,710	\$ 700,179	\$ 157,469	29.0%	\$ 6,046,206	\$ 6,001,942	\$ (44,264)	-0.7%
UT Austin Dell Medical School ¹	\$ -	\$ 875,032	\$ 875,032	NA	\$ -	\$ 162,810	\$ 162,810	NA	\$ -	\$ 1,037,842	\$ 1,037,842	NA
UT Rio Grande Valley School of Medicine ¹	\$ -	\$ 2,432,130	\$ 2,432,130	NA	\$ -	\$ 61,074	\$ 61,074	NA	\$ -	\$ 2,493,204	\$ 2,493,204	NA
INFRASTRUCTURE SUBTOTAL	\$ 246,795,939	\$ 250,103,104	\$ 3,307,165	1.3%	\$ 18,618,159	\$ 17,494,370	\$ (1,123,789)	-6.0%	\$ 265,414,098	\$ 267,597,474	\$ 2,183,376	0.8%

Health Related Institutions

HRI Appendix 1

Total Formula Recommendations Compared to 2016-17 Base - House

Research³

UT Southwestern Medical Center
UT Medical Branch at Galveston
UT Health Science Center at Houston
UT Health Science Center at San Antonio
UT M.D. Anderson Cancer Center
UT Health Science Center at Tyler
Texas A&M University Health Science Center
UNT Health Science Center
Texas Tech University Health Sciences Center
Texas Tech University Health Sciences Center at El Paso
UT Austin Dell Medical School ¹
UT Rio Grande Valley School of Medicine ¹
RESEARCH SUBTOTAL

Formula General Revenue 2016-17	Formula General Revenue 2018-19	Formula GR Difference	% GR Variance Biennium
\$ 13,085,278	\$ 13,047,676	\$ (37,602)	-0.3%
\$ 6,300,742	\$ 6,202,110	\$ (98,632)	-1.6%
\$ 8,281,830	\$ 8,156,856	\$ (124,974)	-1.5%
\$ 6,577,442	\$ 6,444,580	\$ (132,862)	-2.0%
\$ 20,972,336	\$ 21,707,928	\$ 735,592	3.5%
\$ 3,096,024	\$ 3,119,938	\$ 23,914	0.8%
\$ 5,304,718	\$ 5,033,258	\$ (271,460)	-5.1%
\$ 3,790,946	\$ 3,774,152	\$ (16,794)	-0.4%
\$ 3,757,266	\$ 3,795,008	\$ 37,742	1.0%
\$ 3,395,712	\$ 3,280,786	\$ (114,926)	-3.4%
\$ -	\$ 2,904,830	\$ 2,904,830	NA
\$ -	\$ 3,161,254	\$ 3,161,254	NA
\$ 74,562,294	\$ 80,628,376	\$ 6,066,082	8.1%

Formula GR-D 770 2016-17	Formula GR-D 770 2018-19	Formula GR-D 770 Difference	% GR-D 770 Variance Biennium
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA

Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Total Formula All Funds Difference	% All Funds Variance Biennium
\$ 13,085,278	\$ 13,047,676	\$ (37,602)	-0.3%
\$ 6,300,742	\$ 6,202,110	\$ (98,632)	-1.6%
\$ 8,281,830	\$ 8,156,856	\$ (124,974)	-1.5%
\$ 6,577,442	\$ 6,444,580	\$ (132,862)	-2.0%
\$ 20,972,336	\$ 21,707,928	\$ 735,592	3.5%
\$ 3,096,024	\$ 3,119,938	\$ 23,914	0.8%
\$ 5,304,718	\$ 5,033,258	\$ (271,460)	-5.1%
\$ 3,790,946	\$ 3,774,152	\$ (16,794)	-0.4%
\$ 3,757,266	\$ 3,795,008	\$ 37,742	1.0%
\$ 3,395,712	\$ 3,280,786	\$ (114,926)	-3.4%
\$ -	\$ 2,904,830	\$ 2,904,830	NA
\$ -	\$ 3,161,254	\$ 3,161,254	NA
\$ 74,562,294	\$ 80,628,376	\$ 6,066,082	8.1%

Three Main Formulas

UT Southwestern Medical Center
UT Medical Branch at Galveston
UT Health Science Center at Houston
UT Health Science Center at San Antonio
UT M.D. Anderson Cancer Center
UT Health Science Center at Tyler
Texas A&M University Health Science Center
UNT Health Science Center
Texas Tech University Health Sciences Center
Texas Tech University Health Sciences Center at El Paso
UT Austin Dell Medical School ¹
UT Rio Grande Valley School of Medicine ¹
THREE MAIN FORMULAS TOTAL

Formula General Revenue 2016-17	Formula General Revenue 2018-19	Formula GR Difference	% GR Variance Biennium
\$ 169,016,483	\$ 163,537,028	\$ (5,479,455)	-3.2%
\$ 159,208,877	\$ 152,597,131	\$ (6,611,746)	-4.2%
\$ 248,121,764	\$ 249,869,967	\$ 1,748,203	0.7%
\$ 199,615,040	\$ 192,970,694	\$ (6,644,345)	-3.3%
\$ 85,506,138	\$ 89,823,634	\$ 4,317,496	5.0%
\$ 5,797,996	\$ 5,689,041	\$ (108,954)	-1.9%
\$ 182,366,212	\$ 184,249,190	\$ 1,882,978	1.0%
\$ 131,201,896	\$ 133,071,565	\$ 1,869,669	1.4%
\$ 188,538,871	\$ 193,741,027	\$ 5,202,156	2.8%
\$ 43,173,731	\$ 46,997,725	\$ 3,823,994	8.9%
\$ -	\$ 7,544,035	\$ 7,544,035	NA
\$ -	\$ 10,289,214	\$ 10,289,214	NA
\$ 1,412,547,008	\$ 1,430,380,253	\$ 17,833,246	1.3%

Formula GR-D 770 2016-17	Formula GR-D 770 2018-19	Formula GR-D 770 Difference	% GR-D 770 Variance Biennium
\$ 10,117,107	\$ 9,165,924	\$ (951,183)	-9.4%
\$ 16,575,565	\$ 15,997,095	\$ (578,470)	-3.5%
\$ 16,513,860	\$ 16,105,631	\$ (408,229)	-2.5%
\$ 10,921,398	\$ 10,917,338	\$ (4,061)	0.0%
\$ 1,429,712	\$ 1,572,334	\$ 142,622	10.0%
\$ 557,140	\$ 767,509	\$ 210,368	37.8%
\$ 13,309,598	\$ 13,999,832	\$ 690,234	5.2%
\$ 13,004,404	\$ 12,515,213	\$ (489,191)	-3.8%
\$ 12,626,865	\$ 13,488,833	\$ 861,968	6.8%
\$ 3,072,431	\$ 3,994,359	\$ 921,928	30.0%
\$ -	\$ 928,789	\$ 928,789	NA
\$ -	\$ 348,412	\$ 348,412	NA
\$ 98,128,080	\$ 99,801,267	\$ 1,673,186	1.7%

Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Total Formula All Funds Difference	% All Funds Variance Biennium
\$ 179,133,590	\$ 172,702,952	\$ (6,430,638)	-3.6%
\$ 175,784,442	\$ 168,594,226	\$ (7,190,216)	-4.1%
\$ 264,635,624	\$ 265,975,598	\$ 1,339,974	0.5%
\$ 210,536,438	\$ 203,888,032	\$ (6,648,406)	-3.2%
\$ 86,935,850	\$ 91,395,968	\$ 4,460,118	5.1%
\$ 6,355,136	\$ 6,456,550	\$ 101,414	1.6%
\$ 195,675,810	\$ 198,249,022	\$ 2,573,212	1.3%
\$ 144,206,300	\$ 145,586,778	\$ 1,380,478	1.0%
\$ 201,165,736	\$ 207,229,860	\$ 6,064,124	3.0%
\$ 46,246,162	\$ 50,992,084	\$ 4,745,922	10.3%
\$ -	\$ 8,472,824	\$ 8,472,824	NA
\$ -	\$ 10,637,626	\$ 10,637,626	NA
\$ 1,510,675,088	\$ 1,530,181,520	\$ 19,506,432	1.3%

Health Related Institutions

HRI Appendix 1

Total Formula Recommendations Compared to 2016-17 Base - House

Graduate Medical Education

UT Southwestern Medical Center
UT Medical Branch at Galveston
UT Health Science Center at Houston
UT Health Science Center at San Antonio
UT M.D. Anderson Cancer Center
UT Health Science Center at Tyler
Texas A&M University Health Science Center
UNT Health Science Center
Texas Tech University Health Sciences Center
Texas Tech University Health Sciences Center at El Paso
UT Austin Dell Medical School ¹
UT Rio Grande Valley School of Medicine ¹

Formula General Revenue 2016-17	Formula General Revenue 2018-19	Formula GR Difference	% GR Variance Biennium
\$ 20,751,442	\$ 15,153,110	\$ (5,598,332)	-27.0%
\$ 6,867,024	\$ 6,650,596	\$ (216,428)	-3.2%
\$ 11,465,924	\$ 11,391,038	\$ (74,886)	-0.7%
\$ 9,486,016	\$ 8,735,460	\$ (750,556)	-7.9%
\$ 1,691,694	\$ 1,572,382	\$ (119,312)	-7.1%
\$ 1,040,078	\$ 850,252	\$ (189,826)	-18.3%
\$ 7,806,854	\$ 13,138,130	\$ 5,331,276	68.3%
\$ 3,057,580	\$ 4,810,326	\$ 1,752,746	57.3%
\$ 5,162,798	\$ 5,276,218	\$ 113,420	2.2%
\$ 2,919,738	\$ 2,876,878	\$ (42,860)	-1.5%
\$ -	\$ 3,109,824	\$ 3,109,824	NA
\$ -	\$ 1,153,080	\$ 1,153,080	NA

Formula GR-D 770 2016-17	Formula GR-D 770 2018-19	Formula GR-D 770 Difference	% GR-D 770 Variance Biennium
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA
\$ -	\$ -	\$ -	NA

Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Total Formula All Funds Difference	% All Funds Variance Biennium
\$ 20,751,442	\$ 15,153,110	\$ (5,598,332)	-27.0%
\$ 6,867,024	\$ 6,650,596	\$ (216,428)	-3.2%
\$ 11,465,924	\$ 11,391,038	\$ (74,886)	-0.7%
\$ 9,486,016	\$ 8,735,460	\$ (750,556)	-7.9%
\$ 1,691,694	\$ 1,572,382	\$ (119,312)	-7.1%
\$ 1,040,078	\$ 850,252	\$ (189,826)	-18.3%
\$ 7,806,854	\$ 13,138,130	\$ 5,331,276	68.3%
\$ 3,057,580	\$ 4,810,326	\$ 1,752,746	57.3%
\$ 5,162,798	\$ 5,276,218	\$ 113,420	2.2%
\$ 2,919,738	\$ 2,876,878	\$ (42,860)	-1.5%
\$ -	\$ 3,109,824	\$ 3,109,824	NA
\$ -	\$ 1,153,080	\$ 1,153,080	NA

HEALTH RELATED GME SUBTOTAL

\$ 70,249,148	\$ 74,717,294	\$ 4,468,146	6.4%
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\$ -	\$ -	\$ -	NA
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\$ 70,249,148	\$ 74,717,294	\$ 4,468,146	6.4%
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Baylor College of Medicine Graduate Medical Education²

\$ 15,626,238	\$ 15,420,997	\$ (205,241)	-1.3%
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\$ -	\$ -	\$ -	NA
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\$ 15,626,238	\$ 15,420,997	\$ (205,241)	-1.3%
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HEALTH RELATED + BCOM GME SUBTOTAL

\$ 85,875,386	\$ 90,138,291	\$ 4,262,905	5.0%
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\$ -	\$ -	\$ -	NA
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\$ 85,875,386	\$ 90,138,291	\$ 4,262,905	5.0%
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Cancer Center Operations⁴

UT M.D. Anderson Cancer Center

Formula General Revenue 2016-17	Formula General Revenue 2018-19	Formula GR Difference	% GR Variance Biennium
\$ 264,801,714	\$ 264,801,714	\$ -	0.0%

Formula GR-D 770 2016-17	Formula GR-D 770 2018-19	Formula GR-D 770 Difference	% GR-D 770 Variance Biennium
\$ -	\$ -	\$ -	NA

Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Total Formula All Funds Difference	% All Funds Variance Biennium
\$ 264,801,714	\$ 264,801,714	\$ -	0.0%

CANCER CENTER OPERATIONS SUBTOTAL

\$ 264,801,714	\$ 264,801,714	\$ -	0.0%
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\$ -	\$ -	\$ -	NA
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\$ 264,801,714	\$ 264,801,714	\$ -	0.0%
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Chest Disease Center Operations⁴

UT Health Science Center at Tyler

Formula General Revenue 2016-17	Formula General Revenue 2018-19	Formula GR Difference	% GR Variance Biennium
\$ 58,360,332	\$ 58,360,332	\$ -	0.0%

Formula GR-D 770 2016-17	Formula GR-D 770 2018-19	Formula GR-D 770 Difference	% GR-D 770 Variance Biennium
\$ -	\$ -	\$ -	NA

Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Total Formula All Funds Difference	% All Funds Variance Biennium
\$ 58,360,332	\$ 58,360,332	\$ -	0.0%

CHEST DISEASE CENTER OPERATIONS SUBTOTAL

\$ 58,360,332	\$ 58,360,332	\$ -	0.0%
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\$ -	\$ -	\$ -	NA
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\$ 58,360,332	\$ 58,360,332	\$ -	0.0%
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Health Related Institutions
Total Formula Recommendations Compared to 2016-17 Base - House

HRI Appendix 1

All Formulas	Formula General Revenue 2016-17	Formula General Revenue 2018-19	Formula GR Difference	% GR Variance Biennium	Formula GR-D 770 2016-17	Formula GR-D 770 2018-19	Formula GR-D 770 Difference	% GR-D 770 Variance Biennium	Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Total Formula All Funds Difference	% All Funds Variance Biennium
UT Southwestern Medical Center	\$ 189,767,925	\$ 178,690,138	\$ (11,077,787)	-5.8%	\$ 10,117,107	\$ 9,165,924	\$ (951,183)	-9.4%	\$ 199,885,032	\$ 187,856,062	\$ (12,028,970)	-6.0%
UT Medical Branch at Galveston	\$ 166,075,901	\$ 159,247,727	\$ (6,828,174)	-4.1%	\$ 16,575,565	\$ 15,997,095	\$ (578,470)	-3.5%	\$ 182,651,466	\$ 175,244,822	\$ (7,406,644)	-4.1%
UT Health Science Center at Houston	\$ 259,587,688	\$ 261,261,005	\$ 1,673,317	0.6%	\$ 16,513,860	\$ 16,105,631	\$ (408,229)	-2.5%	\$ 276,101,548	\$ 277,366,636	\$ 1,265,088	0.5%
UT Health Science Center at San Antonio	\$ 209,101,056	\$ 201,706,154	\$ (7,394,901)	-3.5%	\$ 10,921,398	\$ 10,917,338	\$ (4,061)	0.0%	\$ 220,022,454	\$ 212,623,492	\$ (7,398,962)	-3.4%
UT M.D. Anderson Cancer Center	\$ 351,999,546	\$ 356,197,730	\$ 4,198,184	1.2%	\$ 1,429,712	\$ 1,572,334	\$ 142,622	10.0%	\$ 353,429,258	\$ 357,770,064	\$ 4,340,806	1.2%
UT Health Science Center at Tyler	\$ 65,198,406	\$ 64,899,625	\$ (298,780)	-0.5%	\$ 557,140	\$ 767,509	\$ 210,368	37.8%	\$ 65,755,546	\$ 65,667,134	\$ (88,412)	-0.1%
Texas A&M University Health Science Center	\$ 190,173,066	\$ 197,387,320	\$ 7,214,254	3.8%	\$ 13,309,598	\$ 13,999,832	\$ 690,234	5.2%	\$ 203,482,664	\$ 211,387,152	\$ 7,904,488	3.9%
UNT Health Science Center	\$ 134,259,476	\$ 137,881,891	\$ 3,622,415	2.7%	\$ 13,004,404	\$ 12,515,213	\$ (489,191)	-3.8%	\$ 147,263,880	\$ 150,397,104	\$ 3,133,224	2.1%
Texas Tech University Health Sciences Center	\$ 193,701,669	\$ 199,017,245	\$ 5,315,576	2.7%	\$ 12,626,865	\$ 13,488,833	\$ 861,968	6.8%	\$ 206,328,534	\$ 212,506,078	\$ 6,177,544	3.0%
Texas Tech University Health Sciences Center at El Paso	\$ 46,093,469	\$ 49,874,603	\$ 3,781,134	8.2%	\$ 3,072,431	\$ 3,994,359	\$ 921,928	30.0%	\$ 49,165,900	\$ 53,868,962	\$ 4,703,062	9.6%
UT Austin Dell Medical School ¹	\$ -	\$ 10,653,859	\$ 10,653,859	NA	\$ -	\$ 928,789	\$ 928,789	NA	\$ -	\$ 11,582,648	\$ 11,582,648	NA
UT Rio Grande Valley School of Medicine ¹	\$ -	\$ 11,442,294	\$ 11,442,294	NA	\$ -	\$ 348,412	\$ 348,412	NA	\$ -	\$ 11,790,706	\$ 11,790,706	NA
HEALTH RELATED TOTAL	\$ 1,805,958,202	\$ 1,828,259,593	\$ 22,301,392	1.2%	\$ 98,128,080	\$ 99,801,267	\$ 1,673,186	1.7%	\$ 1,904,086,282	\$ 1,928,060,860	\$ 23,974,578	1.3%
Baylor College of Medicine ²	\$ 93,638,588	\$ 91,775,877	\$ (1,862,711)	-2.0%	\$ -	\$ -	\$ -	NA	\$ 93,638,588	\$ 91,775,877	\$ (1,862,711)	-2.0%
HEALTH RELATED + BCOM TOTAL	\$ 1,899,596,789	\$ 1,920,035,470	\$ 20,438,681	1.1%	\$ 98,128,080	\$ 99,801,267	\$ 1,673,186	1.7%	\$ 1,997,724,870	\$ 2,019,836,737	\$ 22,111,867	1.1%

¹ UT Austin Dell Medical School and UT Rio Grande Valley School of Medicine enrolled their inaugural class of medical students in July 2016. The 2018-19 biennium is the first biennium that both institutions are eligible to receive formula funding.

² Appropriations for Baylor College of Medicine are provided through the Higher Education Coordinating Board bill pattern. Undergraduate medical education formula amounts are generally based off formula amounts for UT Southwestern and UTMB.

³ Data elements in the Infrastructure Support formula (predicted square feet) and Research Enhancement Formula (research expenditures) include research conducted by faculty at a clinical partner for all institutions in the 2018-19 biennium formula allocations.

⁴ Special Provisions Relating only to State Agencies of Higher Education, Sec. 28, Rider 9 Mission Specific Support, limits the growth of the mission specific formulas to the average growth in funding for the health related institutions in the I&O formula.

Health Related Institutions
Total Formula Recommendations Compared to Formula Drivers - House

HRI Appendix 2

Instruction and Operations	Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Formula All Funds Difference	% All Funds Variance Biennium
UT Southwestern Medical Center	\$ 113,183,732	\$ 108,544,032	\$ (4,639,700)	-4.1%
UT Medical Branch at Galveston	\$ 142,119,802	\$ 135,783,574	\$ (6,336,228)	-4.5%
UT Health Science Center at Houston	\$ 213,464,526	\$ 215,814,338	\$ 2,349,812	1.1%
UT Health Science Center at San Antonio	\$ 174,361,372	\$ 169,609,394	\$ (4,751,978)	-2.7%
UT M.D. Anderson Cancer Center	\$ 6,971,538	\$ 6,787,318	\$ (184,220)	-2.6%
UT Health Science Center at Tyler	\$ 988,958	\$ 801,616	\$ (187,342)	-18.9%
Texas A&M University Health Science Center	\$ 173,544,988	\$ 176,161,180	\$ 2,616,192	1.5%
UNT Health Science Center	\$ 129,583,164	\$ 131,851,198	\$ 2,268,034	1.8%
Texas Tech University Health Sciences Center	\$ 179,676,372	\$ 185,380,344	\$ 5,703,972	3.2%
Texas Tech University Health Sciences Center at El Paso	\$ 36,804,244	\$ 41,709,356	\$ 4,905,112	13.3%
UT Austin Dell Medical School ¹	\$ -	\$ 4,530,152	\$ 4,530,152	NA
UT Rio Grande Valley School of Medicine ¹	\$ -	\$ 4,983,168	\$ 4,983,168	NA

INSTRUCTION AND OPERATIONS SUBTOTAL	\$ 1,170,698,696	\$ 1,181,955,670	\$ 11,256,974	1.0%
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Baylor College of Medicine Undergraduate Medical Education ²	\$ 78,012,350	\$ 76,354,880	\$ (1,657,470)	-2.1%
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INSTRUCTION AND OPERATIONS w/ BCOM SUBTOTAL	\$ 1,248,711,046	\$ 1,258,310,550	\$ 9,599,504	0.8%
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Infrastructure ³	Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Formula All Funds Difference	% All Funds Variance Biennium
UT Southwestern Medical Center	\$ 52,864,580	\$ 51,111,244	\$ (1,753,336)	-3.3%
UT Medical Branch at Galveston	\$ 27,363,898	\$ 26,608,542	\$ (755,356)	-2.8%
UT Health Science Center at Houston	\$ 42,889,268	\$ 42,004,404	\$ (884,864)	-2.1%
UT Health Science Center at San Antonio	\$ 29,597,624	\$ 27,834,058	\$ (1,763,566)	-6.0%
UT M.D. Anderson Cancer Center	\$ 58,991,976	\$ 62,900,722	\$ 3,908,746	6.6%
UT Health Science Center at Tyler	\$ 2,270,154	\$ 2,534,996	\$ 264,842	11.7%
Texas A&M University Health Science Center	\$ 16,826,104	\$ 17,054,584	\$ 228,480	1.4%
UNT Health Science Center	\$ 10,832,190	\$ 9,961,428	\$ (870,762)	-8.0%
Texas Tech University Health Sciences Center	\$ 17,732,098	\$ 18,054,508	\$ 322,410	1.8%
Texas Tech University Health Sciences Center at El Paso	\$ 6,046,206	\$ 6,001,942	\$ (44,264)	-0.7%
UT Austin Dell Medical School ¹	\$ -	\$ 1,037,842	\$ 1,037,842	NA
UT Rio Grande Valley School of Medicine ¹	\$ -	\$ 2,493,204	\$ 2,493,204	NA

INFRASTRUCTURE SUBTOTAL	\$ 265,414,098	\$ 267,597,474	\$ 2,183,376	0.8%
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Weighted FTSEs 2016-17	Weighted FTSEs 2018-19	Weighted FTSEs Difference	% WTFSEs Variance Biennium
5,757.6	5,694.2	(63)	-1.1%
7,141.5	7,026.3	(115)	-1.6%
10,514.8	10,914.5	400	3.8%
8,695.7	8,804.6	109	1.3%
354.6	356.1	1	0.4%
17.8	14.4	(3)	-19.0%
8,129.5	8,382.2	253	3.1%
6,591.9	6,916.9	325	4.9%
8,442.3	8,989.2	547	6.5%
1,872.2	2,188.1	316	16.9%
-	237.7	238	NA
-	261.4	261	NA

57,518.0	59,785.4	2,267.4	3.9%
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650.0	623.0	(27)	-4.2%
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58,168.0	60,408.4	2,240.4	3.9%
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Predicted Square Feet 2016-17	Predicted Square Feet 2018-19	Predicted Square Feet Difference	% Predicted Sq. Ft. Variance Biennium
3,974,964	4,011,565	36,601	0.9%
2,057,531	2,088,423	30,892	1.5%
3,224,906	3,296,797	71,891	2.2%
2,225,488	2,184,610	(40,878)	-1.8%
4,708,956	4,936,885	227,929	4.8%
181,212	198,964	17,752	9.8%
1,265,179	1,338,562	73,383	5.8%
814,488	781,842	(32,646)	-4.0%
1,333,302	1,417,043	83,741	6.3%
454,623	471,074	16,451	3.6%
-	81,457	81,457	NA
-	195,684	195,684	NA

20,240,649	21,002,906	762,257	3.8%
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Health Related Institutions
Total Formula Recommendations Compared to Formula Drivers - House

HRI Appendix 2

Research³

UT Southwestern Medical Center
UT Medical Branch at Galveston
UT Health Science Center at Houston
UT Health Science Center at San Antonio
UT M.D. Anderson Cancer Center
UT Health Science Center at Tyler
Texas A&M University Health Science Center
UNT Health Science Center
Texas Tech University Health Sciences Center
Texas Tech University Health Sciences Center at El Paso
UT Austin Dell Medical School ¹
UT Rio Grande Valley School of Medicine ¹

Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Formula All Funds Difference	% All Funds Variance Biennium
\$ 13,085,278	\$ 13,047,676	\$ (37,602)	-0.3%
\$ 6,300,742	\$ 6,202,110	\$ (98,632)	-1.6%
\$ 8,281,830	\$ 8,156,856	\$ (124,974)	-1.5%
\$ 6,577,442	\$ 6,444,580	\$ (132,862)	-2.0%
\$ 20,972,336	\$ 21,707,928	\$ 735,592	3.5%
\$ 3,096,024	\$ 3,119,938	\$ 23,914	0.8%
\$ 5,304,718	\$ 5,033,258	\$ (271,460)	-5.1%
\$ 3,790,946	\$ 3,774,152	\$ (16,794)	-0.4%
\$ 3,757,266	\$ 3,795,008	\$ 37,742	1.0%
\$ 3,395,712	\$ 3,280,786	\$ (114,926)	-3.4%
\$ -	\$ 2,904,830	\$ 2,904,830	NA
\$ -	\$ 3,161,254	\$ 3,161,254	NA

RESEARCH SUBTOTAL

\$ 74,562,294	\$ 80,628,376	\$ 6,066,082	8.1%
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Research Expenditures 2016-17	Research Expenditures 2018-19	Research Expenditures Difference	% Research Exp. Variance Biennium
\$ 416,234,597	\$ 422,582,314	\$ 6,347,717	1.5%
\$ 141,002,443	\$ 139,602,067	\$ (1,400,376)	-1.0%
\$ 221,370,328	\$ 220,406,867	\$ (963,461)	-0.4%
\$ 152,227,451	\$ 149,625,265	\$ (2,602,186)	-1.7%
\$ 736,193,431	\$ 780,577,467	\$ 44,384,036	6.0%
\$ 10,994,796	\$ 12,192,062	\$ 1,197,266	10.9%
\$ 100,596,178	\$ 91,284,427	\$ (9,311,751)	-9.3%
\$ 39,186,122	\$ 39,235,790	\$ 49,668	0.1%
\$ 37,819,769	\$ 40,097,941	\$ 2,278,172	6.0%
\$ 23,152,430	\$ 18,841,192	\$ (4,311,238)	-18.6%
\$ -	\$ 3,300,000	\$ 3,300,000	NA
\$ -	\$ 13,900,000	\$ 13,900,000	NA

\$ 1,878,777,545	\$ 1,931,645,392	\$ 35,667,847	1.9%
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Graduate Medical Education

UT Southwestern Medical Center
UT Medical Branch at Galveston
UT Health Science Center at Houston
UT Health Science Center at San Antonio
UT M.D. Anderson Cancer Center
UT Health Science Center at Tyler
Texas A&M University Health Science Center
UNT Health Science Center
Texas Tech University Health Sciences Center
Texas Tech University Health Sciences Center at El Paso
UT Austin Dell Medical School ¹
UT Rio Grande Valley School of Medicine ¹

Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Formula All Funds Difference	% All Funds Variance Biennium
\$ 20,751,442	\$ 15,153,110	\$ (5,598,332)	-27.0%
\$ 6,867,024	\$ 6,650,596	\$ (216,428)	-3.2%
\$ 11,465,924	\$ 11,391,038	\$ (74,886)	-0.7%
\$ 9,486,016	\$ 8,735,460	\$ (750,556)	-7.9%
\$ 1,691,694	\$ 1,572,382	\$ (119,312)	-7.1%
\$ 1,040,078	\$ 850,252	\$ (189,826)	-18.3%
\$ 7,806,854	\$ 13,138,130	\$ 5,331,276	68.3%
\$ 3,057,580	\$ 4,810,326	\$ 1,752,746	57.3%
\$ 5,162,798	\$ 5,276,218	\$ 113,420	2.2%
\$ 2,919,738	\$ 2,876,878	\$ (42,860)	-1.5%
\$ -	\$ 3,109,824	\$ 3,109,824	NA
\$ -	\$ 1,153,080	\$ 1,153,080	NA

HEALTH RELATED GME SUBTOTAL

\$ 70,249,148	\$ 74,717,294	\$ 4,468,146	6.4%
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Baylor College of Medicine Graduate Medical Education ²
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\$ 15,626,238	\$ 15,420,997	\$ (205,241)	-1.3%
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HEALTH RELATED + BCOM GME SUBTOTAL

\$ 85,875,386	\$ 90,138,291	\$ 4,262,905	5.0%
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Medical Residents 2016-17	Medical Residents 2018-19	Medical Residents Difference	% Residents Variance Biennium
1,656	1,301	(355)	-21.4%
548	571	23	4.2%
915	978	63	6.9%
757	750	(7)	-0.9%
135	135	-	0.0%
83	73	(10)	-12.0%
623	1,128	505	81.1%
244	413	169	69.3%
412	453	41	10.0%
233	247	14	6.0%
-	267	267	NA
-	99	99	NA

5,606	6,415	809	14.4%
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1,247	1,324	77	6.2%
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6,853	7,739	886	12.9%
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Health Related Institutions
Total Formula Recommendations Compared to Formula Drivers - House

HRI Appendix 2

Cancer Center Operations⁴	Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Formula All Funds Difference	% All Funds Variance Biennium
UT M.D. Anderson Cancer Center	\$ 264,801,714	\$ 264,801,714	\$ -	0.0%
CANCER CENTER OPERATIONS SUBTOTAL	\$ 264,801,714	\$ 264,801,714	\$ -	0.0%
Chest Disease Center Operations⁴	Total Formula All Funds 2016-17	Total Formula All Funds 2018-19	Formula All Funds Difference	% All Funds Variance Biennium
UT Health Science Center at Tyler	\$ 58,360,332	\$ 58,360,332	\$ -	0.0%
CHEST DISEASE CENTER OPERATIONS SUBTOTAL	\$ 58,360,332	\$ 58,360,332	\$ -	0.0%

TX Cancer Patients 2016-17	TX Cancer Patients 2018-19	TX Cancer Patients Difference	% TX Patients Variance Biennium
70,557	77,580	7,023	10.0%
70,557	77,580	7,023	10.0%
Chest Disease Cases 2016-17	Chest Disease Cases⁴ 2018-19	Chest Disease Cases Difference	% Cases Variance Biennium
135,644	156,364	20,720	15.3%
135,644	156,364	20,720	15.3%

¹ UT Austin Dell Medical School and UT Rio Grande Valley School of Medicine began instruction of their inaugural class of medical students in July 2016. The 2018-19 biennium is the first biennium that both institutions are eligible to receive formula funding.

² Appropriations for Baylor College of Medicine are provided through the Texas Higher Education Coordinating Board bill pattern and will be presented with the Texas Higher Education Coordinating Board's recommendations. The 2018-19 formula allocations are based on the 2016-17 calculation methodology.

³ Data elements in the Infrastructure Support formula (predicted square feet) and Research Enhancement formula (research expenditures) include research conducted by faculty at a clinical partner for all institutions in the 2018-19 biennium formula allocations.

⁴ Special Provisions Relating Only to State Agencies of Higher Education, Sec. 28, Rider 9 Mission Specific Support, limits the growth of the mission specific formula to the average growth in funding for the health related institutions I&O formula.

Health Related Institutions
Recommendations General Revenue Compared to 2016-17 Base - House

HRI Appendix 3

Institution	Total Base General Revenue² 2016-17	4 Percent General Revenue Reduction	TRB Debt Service³ Inc/(Dec)	Formula General Revenue Inc/(Dec)	Special Items Inc/(Dec)	Total General Revenue 2018-19	GR Variance	% GR Variance Biennium
UT Southwestern Medical Center	\$ 312,412,061	\$ (3,671,618)	\$ 6,186,568	\$ (11,077,787)	\$ (4,332,982)	\$ 299,516,242	\$ (12,895,819)	-4.1%
UT Medical Branch at Galveston	\$ 530,386,694	\$ (12,988,006)	\$ 5,246,264	\$ (6,828,174)	\$ (810,595)	\$ 515,006,183	\$ (15,380,511)	-2.9%
UT Health Science Center at Houston	\$ 339,793,209	\$ (1,475,932)	\$ 6,192,393	\$ 1,673,317	\$ 2,056,507	\$ 348,239,494	\$ 8,446,285	2.5%
UT Health Science Center at San Antonio	\$ 269,119,967	\$ (1,376,729)	\$ 6,192,456	\$ (7,394,901)	\$ (931,976)	\$ 265,608,817	\$ (3,511,150)	-1.3%
UT M.D. Anderson Cancer Center	\$ 375,738,804	\$ (260,052)	\$ 5,417,949	\$ 4,198,184	\$ (275,886)	\$ 384,818,999	\$ 9,080,195	2.4%
UT Health Science Center at Tyler	\$ 92,912,552	\$ (536,463)	\$ 1,140,966	\$ (298,780)	\$ (541,090)	\$ 92,677,185	\$ (235,367)	-0.3%
Texas A&M University Health Science Center	\$ 275,843,513	\$ (2,329,243)	\$ 10,031,293	\$ 7,214,254	\$ (4,340,015)	\$ 286,413,243	\$ 10,569,730	3.8%
UNT Health Science Center	\$ 172,523,136	\$ (698,688)	\$ 3,969,086	\$ 3,622,415	\$ (829,744)	\$ 178,586,205	\$ 6,063,069	3.5%
Texas Tech University Health Sciences Center	\$ 248,592,456	\$ (1,491,443)	\$ 9,608,077	\$ 5,315,576	\$ (1,135,632)	\$ 260,889,034	\$ 12,296,578	4.9%
Texas Tech University Health Sciences Center at El Paso	\$ 132,024,747	\$ (2,670,190)	\$ 2,762,864	\$ 3,781,134	\$ (5,812,395)	\$ 130,086,160	\$ (1,938,587)	-1.5%
UT Austin Dell Medical School ¹	\$ -	\$ -	\$ -	\$ 10,653,859	\$ -	\$ 10,653,859	\$ 10,653,859	NA
UT Rio Grande Valley School of Medicine ¹	\$ 61,464,006	\$ -	\$ -	\$ 11,442,294	\$ (6,205,896)	\$ 66,700,404	\$ 5,236,398	8.5%
TOTAL	\$ 2,810,811,145	\$ (27,498,364)	\$ 56,747,916	\$ 22,301,392	\$ (23,159,704)	\$ 2,839,195,826	\$ 28,384,681	1.0%

¹ UT Austin Dell Medical School and UT Rio Grande Valley School of Medicine enrolled their inaugural class of medical students in July 2016. The 2018-19 biennium is the first biennium that both institutions are eligible to receive formula funding.

² 2016-17 Base General Revenue includes FY 2017 TRB Debt Service for TRBs authorized in House Bill 100, Eighty-fourth Legislature, as well as \$8.2 million in unexpended supplemental appropriations to UTMB for a Biocontainment Facility in House Bill 2, Eighty-fourth Legislature.

³ Debt service amounts include the biennialization of debt service in the 2018-19 biennium for tuition revenue bonds authorized in House Bill 100, Eighty-fourth Legislature, and debt service for Texas A&M Health Science Center's Round Rock campus.

Health Related Institutions
Special Item Funding Compared to 2016-17 GR Base - House

Special Item recommendations include a \$50.4 million decrease in General Revenue from 2016-17 base funding levels by the following:

- Formula Funded Special Items are reduced by 10 percent from 2018-19 Base Line requested levels;
- Special item funding at UNTHSC previously certified by the Comptroller as offset by revenue is reduced by 10 percent from 2016-17 funding levels;
- Institutional Enhancement and Behavioral Health special items are maintained at 2018-19 Base Line requested levels; and
- All other special items reduced by 5 percent from 2018-19 Base Line requested levels.

Special Item Funding	Special Item General Revenue Reductions									
	2016-17 GR Special Items ¹	2018-19 Base Line Request	Difference from 2016-17	Formula Funded Special Items	Revenue Neutral Special Items	All Other Items (excl. Institutional Enhancement & Behavioral Health)	New Special Item Funding - House ²	2018-19 Recommended	Difference from 2016-17	Percent Change from 2016-17 Base
UT Southwestern Medical Center	\$ 91,790,442	\$ 88,118,824	\$ (3,671,618)	\$ -	\$ -	\$ (4,332,982)	\$ -	\$ 83,785,842	\$ (8,004,600)	(8.7%)
UT Medical Branch at Galveston	\$ 29,353,294	\$ 16,365,288	\$ (12,988,006)	\$ -	\$ -	\$ (810,595)	\$ -	\$ 15,554,693	\$ (13,798,601)	(47.0%)
UT Health Science Center at Houston	\$ 46,702,638	\$ 45,314,532	\$ (1,388,106)	\$ (672,000)	\$ -	\$ (1,271,493)	\$ 4,000,000	\$ 47,371,039	\$ 668,401	1.4%
UT Health Science Center at San Antonio	\$ 30,347,662	\$ 29,323,574	\$ (1,024,088)	\$ -	\$ -	\$ (931,976)	\$ -	\$ 28,391,598	\$ (1,956,064)	(6.4%)
UT M.D. Anderson Cancer Center	\$ 6,501,310	\$ 6,241,257	\$ (260,053)	\$ -	\$ -	\$ (275,886)	\$ -	\$ 5,965,371	\$ (535,939)	(8.2%)
UT Health Science Center at Tyler	\$ 21,411,580	\$ 20,875,117	\$ (536,463)	\$ -	\$ -	\$ (541,090)	\$ -	\$ 20,334,027	\$ (1,077,553)	(5.0%)
Texas A&M Health Science Center	\$ 58,356,840	\$ 55,662,832	\$ (2,694,008)	\$ (3,542,834)	\$ -	\$ (797,181)	\$ -	\$ 51,322,817	\$ (7,034,023)	(12.1%)
North Texas Health Science Center at Fort Worth	\$ 16,861,034	\$ 16,278,515	\$ (582,519)	\$ -	\$ (246,598)	\$ (583,146)	\$ -	\$ 15,448,771	\$ (1,412,263)	(8.4%)
Texas Tech University Health Sciences Center	\$ 36,592,512	\$ 35,128,813	\$ (1,463,699)	\$ (297,955)	\$ -	\$ (837,677)	\$ -	\$ 33,993,181	\$ (2,599,331)	(7.1%)
Texas Tech University Health Sciences Center at El Paso	\$ 66,523,562	\$ 63,862,620	\$ (2,660,942)	\$ (5,384,448)	\$ -	\$ (427,947)	\$ -	\$ 58,050,225	\$ (8,473,337)	(12.7%)
UT Rio Grande Valley School of Medicine	\$ 61,464,006	\$ 61,397,900	\$ (66,106)	\$ (6,139,790)	\$ -	\$ -	\$ -	\$ 55,258,110	\$ (6,205,896)	(10.1%)
Total Special Item Funding	\$ 465,904,880	\$ 438,569,272	\$ (27,335,608)	\$ (16,037,027)	\$ (246,598)	\$ (10,809,973)	\$ 4,000,000	\$ 415,475,674	\$ (50,429,206)	(10.8%)

¹Includes \$8.2 million of General Revenue supplemental appropriations to UTMB for a Biocontainment Critical Care Unit authorized by House Bill 2, Eighty-fourth Legislature.

²New special item funding for UTHSC Houston for an Integrated Care Study for Veterans with Post-Traumatic Stress Disorder.

Health Related Institutions
Instruction and Operations Formula - Small Class Supplement - House

Institutions	Full Time Student Equivalents 2016-17	Preliminary Full Time Student Equivalents 2018-19	Difference	2016-17 Appropriations	Recommended 2018-19 Appropriations	Difference
UT Southwestern Medical Center	2,168	2,138	(29)	\$ -	\$ -	\$ -
UT Medical Branch at Galveston	3,478	3,361	(117)	1,732,500	1,846,800	114,300
UT Health Science Center at Houston	4,334	4,594	260	6,764,172	7,759,816	995,644
UT Health Science Center at San Antonio	3,500	3,592	91	3,420,138	1,772,908	(1,647,230)
UT M.D. Anderson Cancer Center	355	356	1	-	-	-
UT Health Science Center at Tyler	18	14	(3)	638,750	526,642	(112,108)
Texas A&M University Health Science Center	2,650	2,842	193	13,733,998	16,377,542	2,643,544
UNT Health Science Center	2,671	2,875	204	-	-	-
Texas Tech University Health Sciences Center	5,116	5,394	278	13,716,700	14,026,628	309,928
Texas Tech University Health Sciences Center at El Paso	492	624	132	-	-	-
UT Austin Dell Medical School ¹	-	50	50	-	-	-
UT Rio Grande Valley School of Medicine ¹	-	55	55	-	-	-
TOTAL:	24,781	25,897	1,116	\$ 40,006,258	\$ 42,310,336	\$ 2,304,078

¹UT Austin Dell Medical School and UT Rio Grande Valley School of Medicine enrolled their inaugural class of medical students in July 2016. The 2018-19 biennium is the first biennium that both institutions are eligible to receive formula funding.

Health Related Institutions
Recommendations Tuition Revenue Bond Debt Service - House

HRI Appendix 6

Tuition Revenue Bonds (TRB)	Base 2016	Appropriated 2017	HB 100, 84R 2017 Allocation	Total Base 2017	Requested 2018	Requested 2019	Difference 2018-19 compared to 2016-17 Base
UT Southwestern Medical Center	\$ 12,333,563	\$ 12,332,475	\$ 6,187,656	\$ 18,520,131	\$ 18,520,131	\$ 18,520,131	\$ 6,186,568
UT Medical Branch at Galveston	\$ 17,182,178	\$ 17,184,403	\$ 5,244,039	\$ 22,428,442	\$ 22,428,442	\$ 22,428,442	\$ 5,246,264
UT Health Science Center at Houston	\$ 12,557,418	\$ 12,562,155	\$ 6,187,656	\$ 18,749,811	\$ 18,749,811	\$ 18,749,811	\$ 6,192,393
UT Health Science Center at San Antonio	\$ 9,704,120	\$ 9,708,920	\$ 6,187,656	\$ 15,896,576	\$ 15,896,576	\$ 15,896,576	\$ 6,192,456
UT M.D. Anderson Cancer Center	\$ 5,910,000	\$ 5,913,750	\$ 5,414,199	\$ 11,327,949	\$ 11,327,949	\$ 11,327,949	\$ 5,417,949
UT Health Science Center at Tyler	\$ 2,580,800	\$ 2,577,050	\$ 1,144,716	\$ 3,721,766	\$ 3,721,766	\$ 3,721,766	\$ 1,140,966
Texas A&M Health Science Center ¹	\$ 8,288,398	\$ 8,013,204	\$ 11,137,782	\$ 19,144,427	\$ 18,731,961	\$ 18,732,157	\$ 10,031,293
North Texas Health Science Center at Fort Worth	\$ 7,301,613	\$ 7,307,188	\$ 6,187,656	\$ 13,494,844	\$ 12,384,903	\$ 12,380,640	\$ 3,969,086
Texas Tech University Health Sciences Center	\$ 5,694,730	\$ 5,704,161	\$ 6,205,832	\$ 11,909,993	\$ 13,629,622	\$ 13,583,178	\$ 9,608,077
Texas Tech University Health Sciences Center at El Paso	\$ 6,666,924	\$ 6,668,462	\$ 5,841,147	\$ 12,509,609	\$ 11,007,289	\$ 10,932,108	\$ 2,762,864
Total TRB Debt Service	\$ 88,219,744	\$ 87,971,768	\$ 59,738,339	\$ 147,703,548	\$ 146,398,450	\$ 146,272,758	\$ 56,747,916

¹Debt service amounts include debt service for Texas A&M Health Science Center's Round Rock campus.

Health Related Institutions
Nursing and Pharmacy Funding Overview - House

Funding for all GAI Nursing and Pharmacy Semester Credit Hours through the GAI Instruction and Operations Formula (Annual Rate I&O Rate of \$55.39)

	Total Semester Credit Hours (SCH)	Total Biennial Formula Funding (All Funds)¹
Nursing	400,367	\$ 106,307,668
Pharmacy	54,234	\$ 36,482,766
Total	454,601	\$ 142,790,434

Funding for all GAI Nursing and Pharmacy Semester Credit Hours through the HRI Instruction and Operations Formula (Annual I&O Rate of \$9,531)

	Estimated Full Time Student Equivalents (FTSE)	Total Biennial Formula Funding (All Funds)	Difference Funding in HRI Formula
Nursing	14,108	\$ 306,045,885	\$ 199,738,217
Pharmacy	2,285	\$ 72,735,690	\$ 36,252,925
Total	16,393	\$ 378,781,575	\$ 235,991,142

Funding Comparison - Nursing and Pharmacy Programs at HRIs versus GAIs

	FTSEs/Est. FTSEs	Total Biennial Formula Funding (All Funds)	Average Funding per FTSE	Number of Institutions
HRIs				
Nursing	5,891	\$ 132,278,939	11,228	6
Pharmacy	2,194	\$ 69,842,880	15,917	3
GAIs				
Nursing	14,108	\$ 106,307,668	3,768	25
Pharmacy	2,285	\$ 36,482,766	7,984	3

¹Formula amounts are comprised of General Revenue and General Revenue-Dedicated 770 Funds. For the 2018-19 biennium, the recommended annual All Funds rate for the GAI I&O formula is \$55.39 per WSCH. For the HRI I&O formula, the recommended annual All Funds I&O rate is \$9,531 per FTSE.

²The conversion from SCHs to one estimated FTSE was done through the following methodology:

- 30 Lower Level Undergraduate SCHs equal 1 FTSE
- 20 Upper Level Undergraduate SCHs equal 1 FTSE
- 24 Master's SCHs equal 1 FTSE
- 18 Doctoral SCHs equal 1 FTSE
- 24 Professional Practice SCHs equal 1 FTSE

Health Related Institutions
Percentage of Funds Inside the Bill Pattern - House

HRI Appendix 8

Institutions	Appropriated Sources (Inside the Bill Pattern)	Funding Outside the Institution's Bill Pattern	Total	Percent of Total Inside the Bill Pattern
UT Southwestern Medical Center	\$ 325,495,339	\$ 5,646,837,960	\$ 5,972,333,299	5.5%
UT Medical Branch at Galveston	\$ 549,697,119	\$ 3,793,932,567	\$ 4,343,629,686	12.7%
UT Health Science Center at Houston	\$ 403,256,302	\$ 2,761,674,650	\$ 3,164,930,952	12.7%
UT Health Science Center at San Antonio	\$ 315,608,925	\$ 1,365,716,978	\$ 1,681,325,903	18.8%
UT M.D. Anderson Cancer Center	\$ 403,940,303	\$ 10,085,850,717	\$ 10,489,791,020	3.9%
UT Health Science Center at Tyler	\$ 99,403,710	\$ 308,845,705	\$ 408,249,415	24.3%
Texas A&M University Health Science Center	\$ 324,545,278	\$ 322,358,147	\$ 646,903,425	50.2%
University of North Texas Health Science Center	\$ 205,770,215	\$ 341,187,564	\$ 546,957,779	37.6%
Texas Tech University Health Sciences Center	\$ 295,605,676	\$ 1,015,546,937	\$ 1,311,152,613	22.5%
Texas Tech University Health Sciences Center at El Paso	\$ 141,349,333	\$ 343,330,528	\$ 484,679,861	29.2%
UT Austin Dell Medical School	\$ 11,728,060	\$ 148,469,560	\$ 160,197,620	7.3%
UT Rio Grande Valley School of Medicine	\$ 70,671,608	\$ 94,511,923	\$ 165,183,531	42.8%
Total	\$ 3,147,071,868	\$ 26,228,263,236	\$ 29,375,335,104	10.7%

Health Related Institutions
Summary of Select Funding Outside the HRI Bill Patterns - House

HRI Appendix 9

Program	2014-15 Expended	2016-17 Bud/Est	Notes
Medicaid 1115 Transformation Waiver - Federal Funding			
Uncompensated Care	\$ 89,220,772	\$ 92,101,958	All institutions received Medicaid 1115 Transformation Waiver funding except for UT Austin Dell Medical School.
Delivery System Reform Incentive Program (DSRIP)	\$ 352,078,728	\$ 387,052,926	
Total	\$ 441,299,500	\$ 479,154,884	
Medicaid GME			
Medicaid GME - Federal Funding	\$ 36,533,837	\$ 53,761,546	Medicaid provides funding to support GME programs at the five state-owned hospitals in Texas: UTMB, UT MD Anderson, UTHSC Tyler, UT Southwestern St. Paul, and UT Southwestern Zale Lipshy.
Network Access Improvement Program (NAIP)			
Total NAIP Funding	\$ 23,726,319	\$ 188,172,224	Institutions participating in the program include: UT Southwestern, UTHSC Houston, TAMUHSC, TTUHSC, and TTUHSC El Paso.
Texas Higher Education Coordinating Board Programs			
GME Expansion	\$ 8,162,500	\$ 20,595,833	All institutions except for UT Austin Dell Medical School and UT MD Anderson received GME Expansion funding.
Professional Nursing Shortage Program	\$ 5,025,474	\$ 3,111,137	Institutions participating in the program include: UTMB, UTHSC Houston, UTHSC San Antonio, TAMUHSC, TTUHSC, TTUHSC El Paso, and UTRGV School of Medicine.
Family Practice Residency Program	\$ 4,401,106	\$ 5,908,199	All institutions except for UT Southwestern and UT MD Anderson received Family Practice Residency Program funding.
Trauma Care Program	\$ 3,076,324	\$ 2,909,340	Institutions participating in the program include: UT Southwestern, UTMB, UTHSC Houston, UTHSC San Antonio, UTHSC Tyler, TTUHSC El Paso, UT Austin Dell Medical School, and Baylor College of Medicine.
Primary Care Innovation Grant	\$ 1,183,577	\$ 1,267,083	Institutions participating in the program include: UTMB, UTHSC Houston, UTHSC San Antonio, UNTHSC, TTUHSC, TTUHSC El Paso, UT Austin Dell Medical School, and Baylor College of Medicine.

Health Related Institutions
Summary of Select Funding Outside the HRI Bill Patterns - House

HRI Appendix 9

Program	2014-15 Expended	2016-17 Bud/Est	Notes
Total THECB Program Funding	\$ 21,848,982	\$ 33,791,592	
Cancer Prevention Research Institute of Texas (CPRIT) Grants			
Total CPRIT Grants	\$ 211,227,162	\$ 257,396,580	All institutions received CPRIT grants except for UT Austin Dell Medical School and UTRGV School of Medicine.

Source: Institution data provided to the Legislative Budget Board

Notes:

* Funding for the 1115 Medicaid Transformation Waiver, Medicaid GME, and the Network Access Improvement Program included in the schedule are federal funds only. The state match comes from appropriations or institutional funds. The sources of funds for the non-federal share may include General Revenue, but are determined by institutions and are based on the availability of funds at the time of payment.

** The initial 5-year 1115 Medicaid Transformation Waiver expired on September 30, 2016. The waiver is currently operating under a 15-month extension expiring December 31, 2017. Negotiations for a longer term extension or renewal are ongoing.

**Health Related Institutions
Appendices - House**

Table of Contents		
Appendix	Appendix Title	Page
A	Funding Changes and Recommendations by Strategy	42
B	Summary of Federal Funds	*
C	FTE Highlights	48
D	Performance Measure Highlights	*
E	Summary of Ten Percent Biennial Base Reduction Options	51

* Appendix is not included - no significant information to report

Health Related Institutions
Funding Changes and Recommendations by Strategy -- ALL FUNDS - House

	2016-17 Base	2018-19 Recommended	Biennial Change	% Change
General Revenue Funds	\$2,810,811,145	\$2,839,195,824	\$28,384,679	1.0%
Strategy/Goal		2018-19 Recommended	Comments	
Formula General Revenue		\$1,828,259,593	The recommended formula General Revenue total is an increase of \$22.3 million from the 2016-17 biennium.	
Instruction and Operations		\$1,099,648,773	Recommendations include an increase of \$8.5 million in General Revenue to maintain level 2016-17 General Revenue for the ten legacy HRIs that received formula funding in the 2016-17 biennium and fund the two new medical schools at the same rate.	
Infrastructure Support		\$250,103,104	Recommendations include an increase of \$3.3 million in General Revenue to maintain level 2016-17 General Revenue for the ten legacy HRIs that received formula funding in the 2016-17 biennium and fund the two new medical schools at the same rate.	
Research		\$80,628,376	Recommendations include an increase of \$6.1 million in General Revenue to maintain level 2016-17 General Revenue for the ten legacy HRIs that received formula funding in the 2016-17 biennium and fund the two new medical schools at the same rate.	

Health Related Institutions
Funding Changes and Recommendations by Strategy -- ALL FUNDS - House

2016-17 Base	2018-19 Recommended	Biennial Change	% Change
Graduate Medical Education	\$74,717,294	Recommendations include an increase of \$4.5 million in General Revenue to maintain level 2016-17 General Revenue for the ten legacy HRIs that received formula funding in the 2016-17 biennium and fund the two new medical schools at the same rate.	
Cancer Center Operations	\$264,801,714	Recommendations maintain 2016-17 General Revenue funding levels for the Cancer Center Operations formula.	
Chest Disease Center Operations	\$58,360,332	Recommendations maintain 2016-17 General Revenue funding levels for the Chest Disease Center Operations formula.	
Non-Formula General Revenue	\$1,010,936,229	The recommended non-formula General Revenue is an increase of \$6.1 million from the 2016-17 base amounts.	
Special Items	\$415,475,673	Recommendations decrease special item funding by \$50.4 million.	
Tuition Revenue Bond Debt Service	\$285,399,219	Recommendations fund tuition revenue bond debt service at requested amounts. Tuition revenue bond debt service is an increase of \$56.7 million from 2016-17 base amounts.	
Hospital Operations	\$299,255,554	Recommendations provide funding at 2018-19 requested amounts.	
Unemployment Insurance and Workers' Compensation Insurance	\$3,393,794	Recommendations provide funding at 2018-19 requested amounts.	

Health Related Institutions
Funding Changes and Recommendations by Strategy -- ALL FUNDS - House

2016-17 Base	2018-19 Recommended	Biennial Change	% Change
Facilities Operations	\$7,411,989	Recommendations include funding for debt service at the Texas A&M University Health Sciences Center Round Rock facility and a facility lease for the University of North Texas Health Sciences Center at 2018-19 requested amounts.	

Health Related Institutions
Funding Changes and Recommendations by Strategy -- ALL FUNDS - House

	2016-17 Base	2018-19 Recommended	Biennial Change	% Change
General Revenue Dedicated Funds	\$205,963,630	\$204,425,407	\$ (1,538,223)	(0.7%)

General Comments on General Revenue Dedicated Funding. During the 2016-17 biennium, General Revenue Dedicated appropriations, composed primarily of statutory tuition, totaled \$98.1 million. Appropriated tuition amounts are estimated. The 2016-17 base General Revenue Dedicated amounts reflect actual tuition collections by the institutions. Institutions collected \$121.4 million in statutory tuition, an increase of \$31.1 million over 2016-17 appropriated levels. Recommended General Revenue Dedicated funds for the 2018-19 biennium total \$204.4 million, an increase of \$20.7 million over 2016-17 appropriated levels. Listed below are the General Revenue Dedicated funding changes from recommended 2018-19 amounts from 2016-17 appropriated.

Strategy/Goal	2018-19 Recommended	Comments
Formula General Revenue Dedicated	\$154,287,423	The recommended formula General Revenue Dedicated total is an increase of \$1.7 million from 2016-17 appropriated levels.
Instruction and Operations Formula	\$82,306,897	
Infrastructure Support Formula	\$17,494,370	
Board Authorized Tuition	\$54,486,156	In addition to formula allocated in General Revenue Dedicated funds, the formula strategy recommendations include Board Authorized Tuition increases, which are not used to offset General Revenue in the formula. This is a decrease of \$1.2 million from 2016-17 appropriated levels.

Health Related Institutions
Funding Changes and Recommendations by Strategy -- ALL FUNDS - House

2016-17 Base	2018-19 Recommended	Biennial Change	% Change
Non-Formula General Revenue Dedicated	\$50,137,989	The recommendations include an increase of \$7.6 million over 2016-17 appropriated amounts in statutory tuition. Non-formula General Revenue Dedicated recommendations are in the strategies listed below.	
Staff Group Insurance	\$29,242,331		
Texas Public Education Grants (TPEG)	\$20,601,990	Funding for TPEG comes from the portion of statutory tuition set aside to fund scholarships, and as the total tuition estimate changes, so does the portion set aside for TPEG.	
Dental Loans	\$293,668	Funding reflects the portion of statutory tuition set aside for repayment of student loans subject to eligibility determinations by the Texas Higher Education Coordinating Board.	

Health Related Institutions
Funding Changes and Recommendations by Strategy -- ALL FUNDS - House

	2016-17 Base	2018-19 Recommended	Biennial Change	% Change
Other Funds	\$148,707,334	\$103,450,634	\$ (45,256,700)	(30.4%)
	Strategy/Goal	2018-19 Recommended	Comments	
	Tobacco Funds	\$100,917,420	Recommendations include Tobacco Funds at requested levels, a \$36.3 million decrease from 2016-17 base amounts.	
	Interagency Contracts	\$2,528,886	Recommendations include interagency contracts at requested amounts at the University of North Texas Health Science Center. Recommendations for UTMB decrease funding by \$8.9 million to align with base reductions taken by HHSC.	
	License Plate Revenue	\$4,328	Recommendations include License Plate Revenue funding at requested levels for UT M.D. Anderson.	

Health Related Institutions
FTE Highlights - House

Full-Time-Equivalent Positions	Expended 2015	Estimated 2016	Budgeted 2017	Formula & Special Item GR Inc/(Dec) (in millions)	FTE per \$250,000 Change	Recommended 2018	Recommended 2019
The University of Texas Southwestern Medical Center							
Cap, plus Art. IX Auth.	1,796.5	1,908.0	1,908.0	\$ (19.1)	(76.3)	1,886.7	1,886.7
Actual/Budgeted	1,871.2	1,963.0	1,963.0				
The University of Texas Medical Branch at Galveston							
Cap, plus Art. IX Auth.	2,058.2	1,848.3	1,815.2	\$ (20.6)	(82.5)	1,884.8	1,884.8
Actual/Budgeted	1,941.8	1,967.3	2,070.9				
The University of Texas Health Science Center Houston							
Cap, plus Art. IX Auth.	1,795.9	1,825.9	1,825.9	\$ 2.3	9.0	1,979.2	1,979.2
Actual/Budgeted ¹	1,995.1	1,970.2	2,008.7				
The University of Texas Health Science Center San Antonio							
Cap, plus Art. IX Auth.	2,196.8	2,219.5	2,219.5	\$ (9.7)	(38.8)	2,130.7	2,130.7
Actual/Budgeted	1,969.3	2,169.5	2,169.5				
The University of Texas M.D. Anderson Cancer Center							
Cap, plus Art. IX Auth.	797.7	797.7	797.7	\$ 3.7	14.6	867.4	867.4
Actual/Budgeted	747.7	852.8	797.7				

Health Related Institutions
FTE Highlights - House

Full-Time-Equivalent Positions	Expended 2015	Estimated 2016	Budgeted 2017	Formula & Special Item GR Inc/(Dec) (in millions)	FTE per \$250,000 Change	Recommended 2018	Recommended 2019
The University of Texas Health Science Center Tyler							
Cap, plus Art. IX Auth.	307.0	324.4	324.4	\$ (1.4)	(5.5)	282.0	282.0
Actual/Budgeted ¹	238.5	287.5	314.6				
Texas A&M University Health Science Center							
Cap, plus Art. IX Auth.	1,101.1	1,143.0	1,144.0	\$ 0.5	2.2	1,087.1	1,087.1
Actual/Budgeted ¹	1,039.2	1,084.9	1,099.0				
University of North Texas Health Science Center							
Cap, plus Art. IX Auth.	768.6	816.8	816.8	\$ 2.1	8.4	869.8	869.8
Actual/Budgeted	792.8	861.4	861.4				
Texas Tech University Health Sciences Center							
Cap, plus Art. IX Auth.	1,884.7	1,412.3	1,412.3	\$ 2.7	10.8	1,415.0	1,415.0
Actual/Budgeted ¹	1909.5	1,404.2	1,422.3				
Texas Tech University Health Sciences Center El Paso							
Cap, plus Art. IX Auth.	-	595.5	595.5	\$ (4.7)	(18.8)	628.0	628.0
Actual/Budgeted ¹	-	646.8	647.8				
The University of Texas at Austin							
Cap, plus Art. IX Auth. ²	NA	NA	NA	\$ 10.7	42.6	42.6	42.6

Health Related Institutions
FTE Highlights - House

Full-Time-Equivalent Positions	Expended 2015	Estimated 2016	Budgeted 2017	Formula & Special Item GR Inc/(Dec) (in millions)	FTE per \$250,000 Change	Recommended 2018	Recommended 2019
The University of Texas Rio Grande Valley							
Cap, plus Art. IX Auth. ²	NA	NA	NA	\$ 5.2	20.9	20.9	20.9

Notes: ¹ In previous biennia, the FTE cap for UTHSC Houston, UTHSC Tyler, TAMUHSC, TTUHSC, and TTUHSC El Paso only included FTEs funded with direct appropriations to the institution inside the bill pattern. Recommendations include FTEs funded with all state appropriations in the FY 2018 and FY 2019 cap. The Actual/Budgeted FTEs reflected in this table include FTEs funded with all state appropriations.

² UT Austin Dell Medical School and UTRGV School of Medicine do not have separate FTE caps from the rest of UT Austin and UTRGV, respectively. These FTE changes will be included in the calculation of the total FTE cap with the rest of each General Academic Unit.

The University of Texas Southwestern Medical Center
Summary of Ten Percent Biennial Base Reduction Options - House

Appendix E

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
1)	Across the Board 5 Percent General Revenue Reduction in Special Items	<p>The reduction would be applied proportionately across twelve special items: Primary Care Residency Training Program; Institute for Nobel/National-Academy Biomedical Research; Institute for Innovations in Medical Technology; Metroplex Comprehensive Medical Imaging Center; Center for Obesity, Diabetes, and Metabolism Research; Center for Research of Sickle Cell Disease; Texas Institute for Brain Injury and Repair; Center for Regenerative Science and Medicine; Center for Advanced Radiation Therapy; Regional Burn Care Center; Program for Science Teacher Access to Resources; and Institutional Enhancement.</p> <p>According to the institution, the reduction would impact the services, activities, and outcomes from these special item programs, disproportionately impacting research and education in the basic sciences.</p>	\$4,405,946	\$4,405,946	22.9	\$0	5.0%	Partial
2)	Across the Board 5 Percent General Revenue Reduction in Special Items	<p>The reduction would be applied proportionately across twelve special items: Primary Care Residency Training Program; Institute for Nobel/National-Academy Biomedical Research; Institute for Innovations in Medical Technology; Metroplex Comprehensive Medical Imaging Center; Center for Obesity, Diabetes, and Metabolism Research; Center for Research of Sickle Cell Disease; Texas Institute for Brain Injury and Repair; Center for Regenerative Science and Medicine; Center for Advanced Radiation Therapy; Regional Burn Care Center; Program for Science Teacher Access to Resources; and Institutional Enhancement.</p> <p>According to the institution, the reduction would impact the services, activities, and outcomes from these special item programs, disproportionately impacting research and education in the basic sciences.</p>	\$4,405,936	\$4,405,936	22.9	\$0	5.0%	No
TOTAL, 10% Reduction Options			\$8,811,882	\$8,811,882	45.8	\$0		

Note: The ten percent biennial base reduction target is calculated on an institution's non-formula General Revenue appropriations. Institutions do not request formula General Revenue within the appropriations request.

The University of Texas Medical Branch at Galveston
Summary of Ten Percent Biennial Base Reduction Options - House

Appendix E

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
1)	Reduction/Elimination of Programs	<p>The institution would reduce General Revenue funding for the following special items: Medical Branch Hospitals; Chronic Home Dialysis Center; Primary Care Physician Services; East Texas Area Health Education Centers; Support for Indigent Care; and Institutional Enhancement.</p> <p>According to the institution, a 5 percent reduction in General Revenue would create problems for UTMB, especially in conjunction with reimbursement challenges within the current health care environment. The programmatic impact would likely include the elimination or reduction of the following programs/services: home dialysis; Regional Maternal and Child Health (including clinic closure); ability to support Primary Care growth; operation of a Level 1 trauma service; delivery of unsponsored care; community outreach programs; and research programs requiring large institutional investments. In addition, UTMB would reportedly need to defer recruitment of educational and research faculty, preventing the ability to grow class size. Investments in IT, equipment, and other capital investments would likely be delayed, according to the institution.</p>	\$15,585,609	\$15,585,609	0.0	\$0	5.0%	Partial
2)	Reduction/Elimination of Programs	According to the institution, further reductions in funding would require cuts in Medical Branch Hospital investments and services, in addition to the reductions in programs mentioned in the previous item.	\$15,585,608	\$15,585,608	0.0	\$0	5.0%	No
TOTAL, 10% Reduction Options			\$31,171,217	\$31,171,217	0.0	\$0		

Note: The ten percent biennial base reduction target is calculated on an institution's non-formula General Revenue appropriations. Institutions do not request formula General Revenue within the appropriations request.

**The University of Texas Health Science Center at Houston
Summary of Ten Percent Biennial Base Reduction Options - House**

Appendix E

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
1)	Across the Board 5 Percent General Revenue Reduction in Special Items	<p>The reduction would be applied proportionately across workers compensation, unemployment insurance, and the following eleven existing special items: Dental Clinic Operations; Improving Public Health in Texas Communities; Biomedical Informatics Research and Education Expansion; Regional Academic Health Center - Public Health; Heart Disease and Stroke Research; Biotechnology Program; World's Greatest Scientist; Harris County Hospital District; Service Delivery in the Valley/Border Region; Trauma Care; and Institutional Enhancement.</p> <p>According to the institution, the funding reductions would translate into operational and service delivery constraints in many of the programs supported by these special items. Dental Clinic Operations would reportedly need to reduce its support staff; funding reductions would reduce support levels for dental and dental hygiene students who are being educated in a clinical setting. Regional Academic Health Center-Public Health (RAHC) and Service Delivery in the Valley Border Region programs would need to reduce FTEs given the high percentage of salaries budgeted in these strategies. Funding decreases would reduce administrative support and service delivery at the School of Public Health's Regional campus and in the Valley Border educational and research based programs.</p> <p>According to the institution, reduction in funding for the Harris County Hospital District (HCHD) would lead to reductions in education options Medical School trainees experience at HCHD' LBJ Hospital as well as fewer trainees and a subsequent loss of physicians. World's Greatest Scientist and Heart and Stroke program funding reductions would reportedly impede recruitment efforts for outstanding scientists. Reduction in funding to Institutional Enhancement would reportedly negatively impact the level of programs and service the institution is able to deliver to its students.</p>	\$1,771,118	\$1,771,118	9.6	\$0	5.0%	Partial

**The University of Texas Health Science Center at Houston
Summary of Ten Percent Biennial Base Reduction Options - House**

Appendix E

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
2)	Across the Board 5 Percent General Revenue Reduction in Special Items	<p>The reduction would be applied proportionately across workers compensation, unemployment insurance, and the following eleven existing special items: Dental Clinic Operations; Improving Public Health in Texas Communities; Biomedical Informatics Research and Education Expansion; Regional Academic Health Center - Public Health; Heart Disease and Stroke Research; Biotechnology Program; World's Greatest Scientist; Harris County Hospital District; Service Delivery in the Valley/Border Region; Trauma Care; and Institutional Enhancement.</p> <p>According to the institution, an additional 5 percent reduction would result in reduction in UTHSC Houston's core missions of education, public service, and research, and would likely require downsizing of existing special item programs. Previous cuts, to the extent possible, preserved the core faculty and staff that administer education and health care services in the institution's Dental Clinic Operations, RAHC and Harris County Hospital District endeavors. The second 5 percent increment reduction would directly impact staff as cuts would be absorbed in salaries. Biotechnology program efforts, which include the formation of cross-disciplinary programs and projects related to biotechnology innovation, would be negatively impacted by an additional 5 percent funding reduction. Faculty recruitments funded by Heart and Stroke and World's Greatest Scientist items would be curtailed, limiting the addition of scientists to those previously recruited faculty members who have been involved in recent clinical/translational research advancements.</p>	\$1,771,118	\$1,771,118	9.6	\$0	5.0%	Partial

TOTAL, 10% Reduction Options			\$3,542,236	\$3,542,236	19.2	\$0		
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Note: The ten percent biennial base reduction target is calculated on an institution's non-formula General Revenue appropriations. Institutions do not request formula General Revenue within the appropriations request.

The University of Texas Health Science Center at San Antonio
Summary of Ten Percent Biennial Base Reduction Options - House

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
1)	Across the Board 5 Percent General Revenue Reduction in Special Items	The reduction would be applied proportionately across workers compensation, unemployment insurance, and the following six existing special items: Dental Clinic Operations; Regional Campus - Laredo; Institutional Support for South Texas Programs; San Antonio Life Sciences Institute; Barshop Institute for Longevity and Aging Studies-Alzheimer's Research; and Institutional Enhancement.	\$1,652,075	\$1,652,075	0.0	\$0	5.0%	Partial
2)	Across the Board 5 Percent General Revenue Reduction in Special Items	The reduction would be applied proportionately across workers compensation, unemployment insurance, and the following six existing special items: Dental Clinic Operations; Regional Campus - Laredo; Institutional Support for South Texas Programs; San Antonio Life Sciences Institute; Barshop Institute for Longevity and Aging Studies-Alzheimer's Research; and Institutional Enhancement.	\$1,652,074	\$1,652,074	0.0	\$0	5.0%	No
TOTAL, 10% Reduction Options			\$3,304,149	\$3,304,149	0.0	\$0		

Note: The ten percent biennial base reduction target is calculated on an institution's non-formula General Revenue appropriations. Institutions do not request formula General Revenue within the appropriations request.

The University of Texas M.D. Anderson Cancer Center
Summary of Ten Percent Biennial Base Reduction Options - House

Appendix E

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
1)	5 Percent General Revenue Reduction in Special Items	<p>According to the institution, the reduction in General Revenue for Institutional Enhancement would reduce the special item funding that supports the Physician Scientist Program and the Genomics Core Lab. These funds are used to develop Physician Scientists who are involved in cancer research. The Core Laboratory provides research support internally which would be hindered. Without funding of the program, the institution could lose key personnel who have multiple years of experience in providing genomic support and informatics analysis to multiple groups at MD Anderson.</p> <p>If continuing support from General Revenue is not provided, the program needs would require a shift in funding from non-general revenue sources, which currently support growth in the education, research, and patient care missions of the institution.</p>	\$312,063	\$312,063	0.0	\$0	5.0%	No
2)	5 Percent General Revenue Reduction in Special Items	<p>According to the institution, the reduction in General Revenue for Institutional Enhancement would reduce the special item funding that supports the Physician Scientist Program and the Genomics Core Lab. These funds are used to develop Physician Scientists who are involved in cancer research. The Core Laboratory provides research support internally which would be hindered. Without funding of the program, the institution could lose key personnel who have multiple years of experience in providing genomic support and informatics analysis to multiple groups at MD Anderson.</p> <p>If continuing support from General Revenue is not provided, the program needs would require a shift in funding from non-general revenue sources, which currently support growth in the education, research, and patient care missions of the institution.</p>	\$312,063	\$312,063	0.0	\$0	5.0%	No
TOTAL, 10% Reduction Options			\$624,126	\$624,126	0.0	\$0		

Note: The ten percent biennial base reduction target is calculated on an institution's non-formula General Revenue appropriations. Institutions do not request formula General Revenue within the appropriations request.

The University of Texas Health Science Center at Tyler
Summary of Ten Percent Biennial Base Reduction Options - House

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
1)	Northeast Texas Initiative - 5 percent reduction	According to the institution, funding reductions would negatively impact the Northeast Texas Initiative (NETnet), which provides services to more than 25 school districts and 18 higher education institutions across 50 rural East Texas counties. These public school districts, community colleges, and higher education institutions would lose some of the benefit of shared services and would be required to provide those services on their own.	\$643,756	\$643,756	0.0	\$0	5.0%	Yes
2)	Northeast Texas Initiative - 5 percent reduction	According to the institution, funding reductions would negatively impact the Northeast Texas Initiative (NETnet), which provides services to more than 25 school districts and 18 higher education institutions across 50 rural East Texas counties. These public school districts, community colleges, and higher education institutions would lose some of the benefit of shared services and would be required to provide those services on their own.	\$643,756	\$643,756	0.0	\$0	5.0%	No
TOTAL, 10% Reduction Options			\$1,287,512	\$1,287,512	0.0	\$0		

Note: The ten percent biennial base reduction target is calculated on an institution's non-formula General Revenue appropriations. Institutions do not request formula General Revenue within the appropriations request.

Texas A&M University Health Science Center
Summary of Ten Percent Biennial Base Reduction Options - House

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
1)	Across the Board 5 Percent General Revenue Reduction in Special Items	<p>The reduction would be applied proportionately across workers compensation, unemployment insurance, Dental Clinic Operations, and eight existing special items listed below. According to the institution, the following impacts would occur as a result of the 5 percent funding reduction:</p> <ul style="list-style-type: none"> - Coastal Bend Health Education Center: Education and outreach services to the Coastal Bend area would be reduced. - South Texas Health Center: The development of the Bachelor of Science in Public Health, in partnership with South Texas College, would be negatively impacted and community and public health resources directed to improve health through prevention measures, community health education, and environmental monitoring would be reduced. - Irma Rangel College of Pharmacy: Reductions would negatively impact the College's ability to support its growing class size and address the shortage of pharmacists in the state. - College Station, Temple, and Round Rock - Medical: Funding to maintain faculty and staff needed to support the current class size of 200 students would be reduced. - Forensic Nursing: The salaries for the forensic nursing faculty who are developing, implementing, and leading this program could not be supported. - Healthy South Texas 2025: Funding reductions would negatively impact the study and prevention of diseases in South Texas. - Nursing Program Expansion: It would be difficult to continue paying for staff, faculty, and resources for the Lufkin location. - Institutional Enhancement: Reductions would damage the institution's ability to operate educational outreach through its campuses. The HSC would be unable to support the current growth in its Colleges. 	\$2,795,092	\$2,795,092	12.0	\$0	5.0%	Partial

Texas A&M University Health Science Center
Summary of Ten Percent Biennial Base Reduction Options - House

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
2)	Across the Board 5 Percent General Revenue Reduction in Special Items	<p>The reduction would be applied proportionately across workers compensation, unemployment insurance, Dental Clinic Operations, and eight existing special items: Coastal Bend Health Education Center; South Texas Health Center; Irma Rangel College of Pharmacy; College Station, Temple, and Round Rock - Medical; Forensic Nursing; Healthy South Texas 2025; Nursing Program Expansion; and Institutional Enhancement.</p> <p>According to the institution, the additional 5 percent funding reduction would have similar impacts as the first 5 percent reduction increment described in the previous item.</p>	\$2,795,090	\$2,795,090	23.0	\$0	5.0%	Partial
TOTAL, 10% Reduction Options			\$5,590,182	\$5,590,182	35.0	\$0		

Note: The ten percent biennial base reduction target is calculated on an institution's non-formula General Revenue appropriations. Institutions do not request formula General Revenue within the appropriations request.

**University of North Texas Health Science Center
Summary of Ten Percent Biennial Base Reduction Options - House**

Appendix E

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
1)	Across the Board 5 Percent General Revenue Reduction in All Non-Formula Strategies	<p>The reduction would be applied proportionately across workers compensation, unemployment insurance, lease of facilities, and the following six existing special items: Alzheimer's Diagnostic & Treatment Center; Institute for Patient Safety & Preventable Harm; DNA Laboratory; Economic Development & Technology Commercialization; Texas Missing Persons & Human Identification Program; and Institutional Enhancement.</p> <p>According to the institution, due to the limited number of strategies to which they can apply the reduction, the institution chose to reduce all non-formula strategies which were funded directly by appropriations provided by the Legislature by an equal amount of 5 percent. The institution believes a significant cut to any particular strategy would jeopardize the operational effectiveness of each specific need. Furthermore, all non-formula strategies were impacted by the 4 percent reduction; a further reduction would reportedly have additional adverse impacts on the services, advancements, and outcomes of these programs.</p>	\$838,426	\$838,426	7.0	\$0	5.0%	Partial

University of North Texas Health Science Center
Summary of Ten Percent Biennial Base Reduction Options - House

Appendix E

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
2)	Across the Board 5 Percent General Revenue Reduction in All Non-Formula Strategies	<p>The reduction would be applied proportionately across workers compensation, unemployment insurance, lease of facilities, and the following six special items: Alzheimer's Diagnostic & Treatment Center; Institute for Patient Safety & Preventable Harm; DNA Laboratory; Economic Development & Technology Commercialization; Texas Missing Persons & Human Identification Program; and Institutional Enhancement.</p> <p>According to the institution, due to the limited number of strategies to which they can apply the reduction, the institution chose to reduce all non-formula strategies which were funded directly by appropriations provided by the Legislature by an equal amount of 5 percent. The institution believes a significant cut to any particular strategy would jeopardize the operational effectiveness of each specific need. Furthermore, all non-formula strategies were impacted by the 4 percent reduction; a further reduction would reportedly have additional adverse impacts on the services, advancements, and outcomes of these programs.</p>	\$838,426	\$838,426	7.0	\$0	5.0%	Partial
TOTAL, 10% Reduction Options			\$1,676,852	\$1,676,852	14.0	\$0		

Note: The ten percent biennial base reduction target is calculated on an institution's non-formula General Revenue appropriations. Institutions do not request formula General Revenue within the appropriations request.

**Texas Tech University Health Sciences Center
Summary of Ten Percent Biennial Base Reduction Options - House**

Appendix E

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
1)	Across the Board 5 Percent General Revenue Reduction in Special Items	<p>The reduction would be applied proportionately across workers compensation and the following ten existing special items: Integrated Health Network; Medical Education-Odessa; Physician Assistant Program; School of Public Health; Family and Community Medicine Residency Training Program; Midland Medical Residency; Cancer Research; Rural Health Care; West Texas Area Health Education Center; and Institutional Enhancement.</p> <p>According to the institution, Residency and Physician Assistant Programs, which provide health care access in the Permian Basin and rural communities, could not be sustained at reduced funding levels and would reduce access to health care. Reductions to the School of Public Health would impact the ability to hire the faculty and staff necessary to establish the program.</p> <p>Reductions in funding for Rural Health/West Texas AHEC would affect the ability to reduce health service disparities, health care provider shortages, and barriers to health care access in the West Texas Region. Cancer Research funding reductions would compromise ongoing cancer research, limit the development of new clinical trials and diminish the ability of program investigators to successfully compete for external grant funding.</p> <p>Reductions to the Integrated Health Network would impact the ability to electronically connect the multiple campuses of the institution, decreasing efficiencies created by teaching multiple campuses with one central faculty member. Funding reductions to Institutional Enhancement would impact the core educational and administrative functions of the institution and would force education formula funding to be redirected to support these services.</p>	\$1,789,732	\$1,789,732	10.7	\$0	5.0%	Partial

Texas Tech University Health Sciences Center
Summary of Ten Percent Biennial Base Reduction Options - House

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
2)	Across the Board 5 Percent General Revenue Reduction in Special Items	<p>The reduction would be applied proportionately across workers compensation and the following ten existing special items: Integrated Health Network; Medical Education-Odessa; Physician Assistant Program; School of Public Health; Family and Community Medicine Residency Training Program; Midland Medical Residency; Cancer Research; Rural Health Care; West Texas Area Health Education Center; and Institutional Enhancement.</p> <p>According to the institution, the additional 5 percent funding reduction would have similar impacts as the first 5 percent reduction increment described in the previous item.</p>	\$1,789,730	\$1,789,730	10.7	\$0	5.0%	Partial
TOTAL, 10% Reduction Options			\$3,579,462	\$3,579,462	21.4	\$0		

Note: The ten percent biennial base reduction target is calculated on an institution's non-formula General Revenue appropriations. Institutions do not request formula General Revenue within the appropriations request.

**Texas Tech University Health Sciences Center El Paso
Summary of Ten Percent Biennial Base Reduction Options - House**

Appendix E

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
1)	Across the Board 5 Percent General Revenue Reduction in Special Items	<p>The reduction would be applied proportionately across workers compensation and the following six existing special items: South Texas Border Region Health Professional Education; Academic Operations Support-Border Region; Paul L. Foster School of Medicine; Border Health Care Support-Resident Support; Diabetes Research Center; and Institutional Enhancement.</p> <p>According to the institution, reductions in funding to the Paul L. Foster School of Medicine would impact the institution's ability to maintain basic science educational and research faculty, expand educational programs, and continue agreements with community hospitals, clinics, and other institutions of higher education.</p> <p>Funding reductions to the Border Health-Resident Support, South Texas Professional Education, and Border Support-Academic Expansion programs would reportedly limit health and educational resources and reduce or eliminate expanded clinical services available to the underserved areas of El Paso and the West Texas Border Region.</p> <p>Funding reductions to the Diabetes Research Center would reduce the ability to conduct diabetes research.</p> <p>Funding reductions to Institutional Enhancement and Workers Compensation would negatively impact institution functions, including education and administrative functions and funding support for Workers Compensation Insurance for TTUHSCEP employees, and would force education formula funding to be redirected to support these required services.</p>	\$3,204,230	\$3,204,230	3.8	\$0	5.0%	Partial

Texas Tech University Health Sciences Center El Paso
Summary of Ten Percent Biennial Base Reduction Options - House

Priority	Item	Description/Impact	Biennial Reduction Amounts			Potential Revenue Loss	Reduction as % of Program GR/GR-D Total	Included in Introduced Bill?
			GR & GR-D	All Funds	FTEs			
2)	Across the Board 5 Percent General Revenue Reduction in Special Items	<p>The reduction would be applied proportionately across workers compensation and the following six existing special items: South Texas Border Region Health Professional Education; Academic Operations Support-Border Region; Paul L. Foster School of Medicine; Border Health Care Support-Resident Support; Diabetes Research Center; and Institutional Enhancement.</p> <p>According to the institution, the additional 5 percent funding reduction would have similar impacts as the first 5 percent reduction increment described in the previous item.</p>	\$3,204,230	\$3,204,230	3.8	\$0	5.0%	Partial
TOTAL, 10% Reduction Options			\$6,408,460	\$6,408,460	7.6	\$0		

Note: The ten percent biennial base reduction target is calculated on an institution's non-formula General Revenue appropriations. Institutions do not request formula General Revenue within the appropriations request.