

AGENDA (REGULAR AND CONSENT)

HOSPITAL AUTHORITY BOARD OF TRUSTEES AND UNIVERSITY BOARD OF TRUSTEES

April 8, 2022

MEDICAL UNIVERSITY HOSPITAL AUTHORITY (MUHA) BOARD OF TRUSTEES REGULAR AGENDA April 8, 2022

101 Colcock Hall

Members of the Board of Trustees

Dr. James Lemon, Chairman Mr. Charles Schulze, Vice-Chairman Ms. Terri R. Barnes The Honorable James A. Battle, Jr. Mr. William H. Bingham, Sr. Dr. W. Melvin Brown III Dr. Henry F. Butehorn III Dr. C. Guy Castles III Dr. Richard M. Christian, Jr. Dr. Paul T. Davis Dr. Donald R. Johnson II Ms. Barbara Johnson-Williams Dr. G. Murrell Smith, Sr. Mr. Michael E. Stavrinakis Thomas L. Stephenson, Esq. Dr. Bartlett J. Witherspoon, Jr.

Trustees Emeriti

Ms. Margaret M. Addison	Dr. Charles B. Thomas, Jr.
Mr. Allan E. Stalvey	Dr. James E. Wiseman, Jr.

ltem 1.	Call to Order	Dr. James Lemon Chairman
ltem 2.	Roll Call	.Mark Sweatman
		Board Secretary
ltem 3.	Date of Next Meeting: May 20, 2022	.Mark Sweatman
		Board Secretary
ltem 4.	Approval of Meeting Minutes	Dr. James Lemon
		Chairman

Approval of the meeting minutes from February 9, 2022, and February 11, 2022, are requested.

Recommendations and Informational Report of the President: Dr. David Cole

Item 5.	General Informational Report of the President	Dr. David Cole
		President
ltem 6.	Other Business	Dr. David Cole
		President

Authority Operations, Quality and Finance Committee: Dr. Murrell Smith, Chair

ltem 7.	MUHA Status Report	Dr. Patrick Cawley
		Chief Executive Officer, MUSC Health
ltem 8.	MUHA Financial Report	Lisa Goodlett
		Chief Financial Officer, MUSC Health
Item 8.1	Capital Reprioritization Request for Approval.	Lisa Goodlett
		Chief Financial Officer, MUSC Health
ltem 9.	COVID-19 Update	Dr. Michael Sweat
		Director, MUSC Center for Global Health
ltem 10.	Quality and Patient Safety Report	Dr. David Bundy
		Chief Quality Officer, MUSC Health-Charleston
ltem 11.	Legislative Update	Mark Sweatman
		Chief, Governmental Affairs
ltem 12.	MUSC Physicians Update	Dr. Eugene Hong
		Chief Physician Executive, MUSC Physicians
ltem 13.	Other Committee Business	Dr. Murrell Smith
		Committee Chair

MUHA and MUSC Physical Facilities Committee: Mr. Bill Bingham, Chair

ltem 14.	MUHA Leases for Approval	Jessica Paul
		Chief Real Estate Officer, MUSC Health
ltem 15.	MUSC Leases for Approval	Jessica Paul
		Chief Real Estate Officer, MUSC Health
ltem 16.	May River Shopping Center Primary Care Fit-Out for A	
		Interim Chief Facilities Officer, MUSC
ltem 17.	College of Nursing First Floor Renovation Project for A	Approval Greg Weigle
		Interim Chief Facilities Officer, MUSC
ltem 18.	MUSC Campus Elevated Walkway Connector Bridges	Project for Approval Greg Weigle
		Interim Chief Facilities Officer, MUSC
ltem 19.	Other Committee Business	Bill Bingham
		Committee Chair

MUHA and MUSC Audit Committee: Mr. Charles Schulze, Acting Chair

ltem 20.	Enterprise Compliance Report	Angela Wertz Director, MUSC Compliance
ltem 21.	KPMG FY2022 External Auditor Entrance Conference	Jennifer Hall Senior Partner, KPMG
ltem 22.	Fees for Agreed Upon Procedure by KPMG	Susan Barnhart Director, Internal Audit
ltem 23.	Report of the Office of Internal Audit	Susan Barnhart Director, Internal Audit
ltem 24.	Other Committee Business	Charles Schulze Acting Committee Chair

Other Business for the Board of Trustees

ltem 25.	Approval of Consent AgendaDr.	James Lemon Chairman
ltem 26.	Executive SessionDr.	James Lemon Chairman
	Upon proper motion and vote, the Board may convene a closed session pursu SC Code Ann. §30-4-70. Although the Board will not vote on any items discus closed session, the Board may return to public session to vote on items discu	ssed in
ltem 27.	New Business for the Board of TrusteesDr.	James Lemon Chairman
ltem 28.	Report from the ChairmanDr.	James Lemon Chairman

MUSC Health - Board Package MUHA - Medical University Hospital Authority Interim Financial Statements

February 28, 2022

Medical University Hospital Authority (MUHA) Statement of Revenues, Expenses and Changes in Net Assets Consolidated	2 - 3
Statements of Net Position Consolidated	5 - 10
Statements of Cash Flows Consolidated	12 - 13
MUHA FASB to GASB Report Consolidated	15

Note:

1) MUHA has recognized CARES stimulus funding as non-operating revenue per GASB guidance.

2) In FY2018, the internal financial statement format was changed to a FASB basis report to appropriately match the income stream of state appropriations and expenses incurred in addition to a presentation format that matches HUD and the credit market expectations.

Medical University Hospital Authority - Consolidated

Statement of Revenues, Expenses and Change in Net Position

For the 8 Month Period Ending - February 28, 2022

Modified FASB Basis

Antual Rescharge Varian Rescharge Varian Number Rescharge Varian			Cur	rent Month			Fiscal Year To Date						
Inter Service Research Splat (17) % Splat (17) % <thsplat %<="" (17)="" th=""> Splat (17) % Spla</thsplat>		Actual			Var %	Fixed Budget	A	ctual	Flex Budget			Fixed Budget	YTD Prior Year
DHH DDU LUD X54.55 STRADES TYRADES TYRADES <thtyrades< th=""> <thtyrades< th=""> TYRAD</thtyrades<></thtyrades<>	Operating Revenues:												
Batel Function Batel Approximation													\$ 1,243,592,433
Other Revenue Statuly 1 28,21,20 1 28,21,20 1 1000 7 11,171													
Subt Apportation 2,292,20 2,293,20 1,298,10 1,200,201 1,273,100 2,266,00 1,255,100 1,255,200													
Total Generating Revenues 5288,895,319 5288,895,319 5288,895,319 5288,895,319 5288,895,310 5288,296,310 5288,296,310 5288,296,310 5288,296,310 5288,296,310 5288,296,310 5288,296,310 5288,296,310 5288,296,310 5288,296,310													
Servers Specified Parsent:							-						, ,
Salara Salara Stransmit Stra	Total operating nevenues	<i>200,033,313</i>	<i>\$250,547,242 \$</i>	25,512,077	12.5270	<i>Ş</i> 243,110,403	φ 2,02	7,221,440	ý 1,555,500,554 ý	07,515,055	4.50%	<i>Ş</i> 1,557,755,650	\$ 1,550,205,455
Beenfis 23,264,813 23,277,84 43,222,277 24,262,411 23,264,813 23,264,813 23,264,813 23,264,813 23,264,813 23,264,813 23,264,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813 23,262,813<	Operating Expenses:												
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purbase 35,797,210				(4,019,003)									
Physikani services 13,23,76 MAYL116 (75,00) 3.38 14,364,00 11,321,31 11,264,131													
Pinnametricials 1.071.48 1.607.48 1.667.77 4.078.11 3.206 3.275.75 1.075.637 1.075.777 0.075 1.075.637 1.075.777 0.075 1.075.637 1.075.777 0.075 1.075.777 0.075 1.075.777 0.075 1.075.777 0.075 0.075.778 0.075 0.075.778 0.075 0.075.778 0.075 0.075.778 0.075.778 0.075.778 0.075.778 0.075.778 0.075.778 0.075.778 0.075.778 0.075.778 0.075.778 0.075.7787													
Retal Repurse Nucleis 15.224,693 15.227,587 22,595 15.227,587	Physician Services			(750,340)			11	1,261,911					99,004,066
Medical supplies 32,55,066 31,786,463 748,463 766,33 24,148 320,804,907 282,835,64 271,063 1-265,611 5.206 284,333 23,934,301 203,943,331 203,943,311 203,943,311	Pharmaceuticals	18,071,488	13,663,677	4,407,811	32.26%	14,273,928	14	0,204,620	120,652,044	19,552,576	16.21%	121,685,775	115,640,725
CVID Supplies 1.366.903 · I.306.903	Retail Pharmaceuticals	16,224,693		3,006,847	22.75%	11,019,861	12	1,354,073		15,327,538	14.46%		76,304,966
Other Supplies 3,33,51.6 3,909,144 (17,51.99 4,51.87 3,396,285 3,74,08,788 4,40,435 (50,51,67) 11.90% 4,265,690 9,44,566 Inurance 3,856,285 984,665 (12,709) 12,977 7,872,03 38,680 4,976 8,005,665 5,313,97 Inurance 3,827,873 3,730,405 97,474 2,515,731 2,257,719 4,706,718 2,757,718 2,757,718 7,872,729 2,869,584 2,782,728 1,783,729,728 3,890,87,88 4,746,931 1,788 2,555,980 2,252,718 3,127,737 3,872,007 5,158,178,728 5,890,87,88 2,890,544 1,783,729,73 3,81,191,28 5,159,021,72,447 5,158,873,007 Interast 5,240,240,466 5,21,02,117 5,158,373 5,81,193,28 5,81,193,28 5,81,184,08 5,11,181,48 5,159,854 5,159,847 5,158,854 5,159,817 5,81,818,40 5,11,118,48 5,159,817 5,88,141,187 5,158,854 5,159,818 5,159,818 5,159,818 5,159,818,18 5,159,118,18 5,159,118,18	Medical Supplies		31,748,463			33,904,092			271,069,953			284,932,333	203,943,916
Utilities 2.181.182 2.783.242 (558.06) -2.037.560 2.037.560 2.037.560 2.037.560 2.037.560 2.037.560 2.037.560 2.037.560 2.037.560 2.037.560 2.037.560 2.037.560 2.037.560 2.037.560 2.037.570 <t< td=""><td>COVID Supplies</td><td>1,306,903</td><td>-</td><td>1,306,903</td><td>0.00%</td><td>-</td><td></td><td>7,372,764</td><td>-</td><td>7,372,764</td><td>0.00%</td><td>-</td><td>29,029,699</td></t<>	COVID Supplies	1,306,903	-	1,306,903	0.00%	-		7,372,764	-	7,372,764	0.00%	-	29,029,699
Insurance 856,590 98,669 98,4699 (127,09) 1.958,907 8,174,073 7,787,093 386,880 4,97 8,006,586 5,120,717 Dther 3,877,877 3,730,405 5,721,53 2,12,61,74 2,606,584 2,788,225 (1,81,7,71) 1,686 2,293,72 1,91,807,723 5,850,784 2,788,728 5,851,787,728 5,850,788 2,788,728 5,851,787,728	Other Supplies	3,733,616	3,909,814	(176,198)	-4.51%	3,956,285	3	7,408,788	42,460,435	(5,051,647)	-11.90%	42,656,940	39,443,669
Leases 3.440.21 3.277.34 52.202 17.18 3.733.41 3.135.729 3.642.999 4.74.491 17.68% 29.56.093 27.21.74 Physical Clinic Expense 2.573.133 2.126.751 446.401 20.99% 2.126.751 17.327.493 17.933.673 15.86.2651 2.758.137 15.86.2651 2.758.137 15.86.2651 2.758.137 15.86.2651 2.758.137 15.86.2651 2.758.137 15.86.2651 2.758.137 15.86.2651 2.758.137 15.86.2651 2.758.13.67 17.878 3.278.47 17.913.673 18.877.203 16.897.203 17.857.178 3.278.47 17.913.673 18.877.203 16.897.203 17.857.178 3.278.47 17.913.673 18.877.203 18.97.203 18.877.203 18.97.203 18.877.203 18.97.203 18.877.203 16.990.84 17.957.178 17.913.673 18.97.203 17.957.178 17.911.978 17.911.978 17.911.978 17.911.978 17.911.978 17.911.978 17.911.978 17.911.978 17.911.978 17.911.978 17.911.978 17.911.978 17.911.9	Utilities	2,181,182	2,739,242	(558,060)	-20.37%	2,823,235	20	0,547,500	20,035,697	511,803	2.55%	20,517,362	14,643,246
other 3,27,249 3,726,405 97,474 2,7215 7,474 2,7215 7,2472 7,7214 2,73133 2,132,731 4,152,701 -6,30% 3,27,249 7,7213,373 1,521,731 1,213,733	Insurance	856,950	984,659	(127,709)	-12.97%	1,055,907	:	8,174,073	7,787,093	386,980	4.97%	8,006,968	5,319,972
Physical clinic typense $\frac{2,77}{513}$ $\frac{2,176}{514}$ $\frac{2,176}{514}$ $\frac{2,176}{514}$ $\frac{1}{514}$ $\frac{1}{514}$ $\frac{1}{5140}$ $\frac{1}{51414}$ $\frac{1}{51414$	Leases	3,840,281	3,277,349	562,932	17.18%	3,733,414	3	1,587,930	26,842,999	4,744,931	17.68%	29,565,093	22,621,744
Total Operating Expenses \$240,240,866 \$221,022,117 \$19,218,749 8.70% \$232,325,418 \$1940,870,075 \$1,851,772,733 \$8,9082,782 4.81% \$1,900,372,447 \$1,538,873,007 EBIDA \$2,86,18,453 \$1,725,212 \$10,693,328 \$9,666,5 16,154,991 \$8,83,51,373 \$8,81,131,002 \$(1,767,729) -2.01% \$7,581,243 \$(83,847,007) Deprecting income (Loss) \$3,932,711 \$3,313,715 \$9,002,707 \$7,581,460 \$(1,152,237) -1.52% \$7,578,75 \$7,164,112 Operating income (Loss) \$1,530,979 \$5,100,949 \$1,0250,000 200,94% \$3,153,628 \$(15,711,098) \$(1,41,39,963)	Other	3,827,879	3,730,405	97,474	2.61%	5,427,239	2	6,069,584	27,882,285	(1,812,701)	-6.50%	34,261,760	16,991,034
Total Operating Expenses \$240,240,866 \$221,022,117 \$19,218,749 8.70% \$232,355,418 \$1,940,870,075 \$1,851,787,233 \$8,062,780 4.81% \$1,900,172,447 \$1,538,87,007 EBDA \$2,861,843 \$17,925,125 \$10,693,328 \$9,666, %16,154,991 \$8,851,877,35 \$8,119,102 \$0,177,729 -2.01% \$7,581,243 \$0,83,44 Depreciation \$3,323,715 \$3,313,715 \$3,313,715 \$9,500,300 200,94% \$1,152,225 \$7,518,460 \$1,152,237 1,52% \$7,578,57 \$7,164,112 Operating Income (Loss) \$15,300,979 \$5,100,949 \$1,0250,030 200,94% \$3,1153,628 \$1,07,11098 \$1,4339,663 \$1,1571,433 11.1% \$45,918,134 \$9,866,642 Operating Income (Loss) \$1,033,013 \$2,201,819 \$1,1524,45 \$11,224,45 \$11,239,463 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,903 \$1,4300,90	Physician Clinic Expense	2,573,153	2,126,751	446,401	20.99%	2,126,751	1	7,327,429	17,913,673	(586,245)	-3.27%	17,913,673	18,897,228
Depredation Interest 9.343,763 9.510,430 5 (166,668) -1.75% 5 573,818,460 5 (1,152,237) -1.52% 5 763,77,657 5 71,641,122 Operating Income (Loss) 5 3.923,711 5 3.313,745 5 609,966 18.41% 5 3.15,7628 5 1.157,139 5 1.157,139 5 1.11% 5 2.6,440,605 5 955,642 -1.52% 5 7.6,377,657 5 7.6,377,657 5 7.6,377,657 5 7.6,41,127 5 2.6,440,605 5 955,642 -1.13% 5 7.6,41,127 5 2.6,440,605 5 1.1571,135 11.11% 5 (4,56,662) -0.73% -0.73% -0.73% -2.35% -6.39% 5 1.4,309,093 5 1.4,309,093 5 1.4,309,093 5 1.4,309,093 5 1.4,309,093 5 1.4,309,093 5 1.4,309,093 5 1.4,309,093 5 1.4,309,093 5 1.4,309,093 5	Total Operating Expenses	\$ 240,240,866	\$ 221,022,117 \$	19,218,749	8.70%	\$ 232,955,418	\$ 1,940	0,870,075	\$ 1,851,787,293 \$		4.81%	\$ 1,900,172,447	\$ 1,538,873,003
Interest § 3.923,711 \$ 3.13,74 \$ 6.0996 1.8.41% \$ 3.411,047 \$ 2.7,396,247 \$ 2.6,40,005 \$ 955,642 3.61% \$ 727,127,20 \$ 2.6,141,372 Operating Income (Loss) 5 15,550,979 \$ 5,100,949 \$ 10,250,030 200,94% \$ 3,513,628 \$ (1,571,1098) \$ (1,413,9,63) \$ (1,571,135) 11.11% \$ (45,918,134) \$ (98,366,042) Operating Margin 5.71% 2.301,819 \$ (1,262,415) -54.84% \$ 2,301,819 \$ (2,8449,056) \$ (1,430,090) \$ (45,927,227) \$ (98,366,042) \$ (43,99,093) \$ (1,337,226) -72.91% \$ (2,84,90,065) \$ 7,574,897 -26,63% \$ (98,366,042) \$ (98,366,042) \$ (43,99,093) \$ (1,337,226) -72.91% \$ (2,84,90,05) \$ 7,574,897 -26,63% \$ (4,78,203) \$ (4,78,203) \$ (4,80,212) \$ (4,80,212	EBIDA	\$ 28,618,453	\$ 17,925,125 \$	10,693,328	59.66%	\$ 16,154,991	\$ 8	6,351,373	\$ 88,119,102 \$	(1,767,729)	-2.01%	\$ 57,581,243	\$ (583,548)
Interest § 3.923,711 \$ 3.13,74 \$ 6.0996 1.8.41% \$ 3.411,047 \$ 2.7,396,247 \$ 2.6,40,005 \$ 955,642 3.61% \$ 727,127,20 \$ 2.6,141,372 Operating Income (Loss) 5 15,550,979 \$ 5,100,949 \$ 10,250,030 200,94% \$ 3,513,628 \$ (1,571,1098) \$ (1,413,9,63) \$ (1,571,135) 11.11% \$ (45,918,134) \$ (98,366,042) Operating Margin 5.71% 2.301,819 \$ (1,262,415) -54.84% \$ 2,301,819 \$ (2,8449,056) \$ (1,430,090) \$ (45,927,227) \$ (98,366,042) \$ (43,99,093) \$ (1,337,226) -72.91% \$ (2,84,90,065) \$ 7,574,897 -26,63% \$ (98,366,042) \$ (98,366,042) \$ (43,99,093) \$ (1,337,226) -72.91% \$ (2,84,90,05) \$ 7,574,897 -26,63% \$ (4,78,203) \$ (4,78,203) \$ (4,80,212) \$ (4,80,212	Depreciation	\$ 9343763	\$ 9.510.430 \$	(166 668)	-1 75%	\$ 9 590 316	\$ 7	4 666 223	\$ 75.818.460 \$	(1 152 237)	-1 52%	\$ 76 377 657	\$ 71 641 124
Operating Income (Loss) \$ 15,350,979 \$ 5,100,949 \$ 10,250,030 200,94% \$ 3,153,628 \$ (14,139,963) \$ (14,571,135) 11.11% \$ (45,918,134) \$ (98,366,041) Operating Margin \$ 7.11% 2,331,819 \$ (1,262,415) -54.84% \$ 2,301,819 \$ 5,163,061 \$ 14,309,093 \$ (1,571,135) 11.11% \$ (45,918,134) \$ (98,366,041) One Time Acquisition Costs \$ 1,039,403 \$ 2,301,819 \$ (1,262,415) -54.84% \$ 2,301,819 \$ (20,874,158) \$ (28,449,056) \$ 7,574,897 -26.63% \$ (60,227,227) \$ (98,366,041) Adjusted Operating Margin 5.32% 1.17% 0.34% -1.03% -1.47% -3.08% -6.39 NonOperating Revenues (Expenses): 646,923 5.256,747 \$ (1,677,685) -563,85 3.129,188 \$ 4,975,921 \$ 18,369,146 \$ (13,393,226) -7.291% \$ 22,306,228 \$ 4,782,037 Investment Income \$ 646,937 -2,256,747 \$ (1,677,685) -2,564,857 5,319,178 203,311 3.82% 5,319,178 3.039,705 3.19,3178 1													
Operating Margin 5.71% 2.13% 1.27% -0.78% -0.73% -0.73% -2.35% -6.39 One Time Acquisition Costs 5 1.039,403 \$ 2.138/1 \$ (1,62,415) -54.84% \$ 2.301,819 \$ 0.75% 0.73% -0.73% -0.73% -2.35% 6.39% 5 Adjusted Operating Income (Loss) \$ 1.039,403 \$ 1.1512,445 411.29% \$ 851,810 \$ (28,449,056) \$ 7,574,897 -26.63% \$ (66,0227,227) \$ (98,366,042) Adjusted Operating Margin 5.32% 1.17% - 0.34% -1.03% -1.47% - <t< td=""><td>increat</td><td><u> </u></td><td><i>y</i> 3,313,743 <i>y</i></td><td>005,500</td><td>10.4170</td><td><i>y</i> 3,411,047</td><td><u> </u></td><td>7,550,247</td><td>÷ 20,440,005 ÷</td><td>555,042</td><td>5.0170</td><td><i>y 27,121,720</i></td><td>\$ 20,141,575</td></t<>	increat	<u> </u>	<i>y</i> 3,313,743 <i>y</i>	005,500	10.4170	<i>y</i> 3,411,047	<u> </u>	7,550,247	÷ 20,440,005 ÷	555,042	5.0170	<i>y 27,121,720</i>	\$ 20,141,575
One Time Acquisition Costs \$ 1,039,403 \$ 2,301,819 \$ (1,262,415) -54.84% \$ 2,301,819 \$ 5,163,061 \$ 14,309,093 \$ (9,146,032) -63.92% \$ 14,309,093 \$ Adjusted Operating Income (Loss) \$ 14,311,576 \$ 2,799,131 \$ \$ 11,512,445 411.29% \$ 851,810 \$ \$ (20,874,158) \$ (28,449,056) \$ 7,574,897 -26.63% \$ (60,227,227) \$ (98,366,042) Adjusted Operating Margin 5.32% 1.17% 0.34% -1.03% -1.47% -26.33% \$ (60,227,227) \$ (98,366,042) NonOperating Revenues (Expense): \$ 889,062 \$ 2,566,747 \$ (1,677,685) -65.36% \$ 3,129,188 \$ 4,975,921 \$ 18,369,146 \$ (13,393,226) -72.91% \$ 22,306,228 \$ 4,782,034 Newstreent Income \$ 889,062 \$ 2,566,747 \$ (1,677,685) -65.36% \$ 3,129,188 \$ 4,975,921 \$ 18,369,146 \$ \$ (13,393,226) -72.91% \$ 22,306,628 \$ 4,782,034 Investment Income \$ 889,062 \$ 2,566,747 \$ (1,677,685) -65.36% \$ 3,129,138 \$ 4,975,921 \$ 18,369,146 \$ \$ 13,389,248 \$ 3,319,178 \$	Operating Income (Loss)	\$ 15,350,979	\$ 5,100,949 \$	10,250,030	200.94%	\$ 3,153,628	\$ (1	5,711,098)	\$ (14,139,963) \$	(1,571,135)	11.11%	\$ (45,918,134)	\$ (98,366,045)
Adjusted Operating Income (Loss) \$ 14,311,576 \$ 2,799,131 \$ 11,512,445 411.29% \$ 851,810 \$ (20,874,158) \$ (28,449,056) \$ 7,574,897 -26.63% \$ (60,227,227) \$ (98,366,044) Adjusted Operating Margin 5.32% 1.17% 0.34% -1.03% -1.47% -3.08% -6.39 NonOperating Revenues (Expenses): Gifts and Grants \$ 889,062 \$ 2,566,747 \$ (1,677,685) -65.36% \$ 3,129,188 \$ 4,975,921 \$ 18,369,146 \$ (13,393,226) -72.91% \$ 22,306,228 \$ 4,782,038 Investment Income (557,273) 49,913 (10,777,14) -2.70% 664,897 5.522,489 5.539,178 203,311 3.829,178 10,397,02 Loss on Disposal of Capital Assets - - - 0.00% - (18,405) (68,955) (19,450) 28.21% (68,955) (21,977,163) 0.00% - 107,564,323 0.00% - 107,564,323 0.00% - (17,97,683) 5.36% 3,478,544 5 26,875,127 5 21,777,163 0.00% - 107,564,323 0.00% - 107,564,323 0.00% </td <td>Operating Margin</td> <td>5.71%</td> <td>2.13%</td> <td></td> <td></td> <td>1.27%</td> <td></td> <td>-0.78%</td> <td>-0.73%</td> <td></td> <td></td> <td>-2.35%</td> <td>-6.39%</td>	Operating Margin	5.71%	2.13%			1.27%		-0.78%	-0.73%			-2.35%	-6.39%
Adjusted Operating Margin 5.32% 1.17% 0.34% -1.03% -1.47% -3.08% -6.39% NonOperating Revenues (Expenses): S 889,062 \$ 2,566,747 \$ (1,677,685) -65.36% \$ 3,129,188 \$ 4,975,921 \$ 18,369,146 \$ (1,339,3226) -72.91% \$ 2,306,228 \$ 4,976,930 Pension OPER Nonemployer Contribution 55.22 466,923 6664,927 (1,77,741) -2.70% 664,897 5,522,489 5,319,178 203,311 3.82% 5,319,178 203,311 3.82% 5,319,178 203,311 3.82% 5,319,178 1039,308 (4,509,602) -1129,36% 399,308 (885,912) (17,974) -2.70% 664,897 (4,110,294) 399,308 (4,509,602) -1129,36% 399,308 (885,912) (17,974) -2.777,163 -2.177,163 -2.177,71,63 -2.177,71,63 -2.21,777,163 0.00% -2.177,71,63 -2.177,71,63 0.00% -2.177,71,63 0.00% -2.177,71,63 0.00% -2.177,71,63 0.00% -2.177,71,63 0.00% -2.177,71,63 0.00% -2.177,71,63 0.00% -2.177,71,63 0.00% -2.177,71,63 0.00%<	One Time Acquisition Costs	\$ 1,039,403	\$ 2,301,819 \$	(1,262,415)	-54.84%	\$ 2,301,819	\$	5,163,061	\$ 14,309,093 \$	(9,146,032)	-63.92%	\$ 14,309,093	\$-
NonOperating Revenues (Expenses): 5 889,062 5 2,566,747 5 (1,677,685) -65.36% 5 3,129,188 5 4,975,921 5 18,369,146 5 (13,393,226) -72.91% 5 22,306,228 5 4,782,037 Pension OPEB Nonemployer Contribution Investment Income (557,273) 49,913 (607,186) -1216.48% 49,913 (4,110,294) 399,308 (4,509,602) -112.36% 399,308 (88,955) (219,163) COVID Funding - - 0.00% - 21,777,163 - 21,777,163 0.00% - 107,561,99 (21,91,63) 13,08,628 64.44% (2,558,182) (10,007) 107,561,99 (21,03,013) 1,308,628 64.44% (2,558,182) (10,007) 107,561,99 (21,03,013) 1,308,628 64.44% (2,558,182) (10,007) 107,561,99 (21,03,013) 1,308,628 64.44% (2,558,182) (10,007) 10,007,85 3,430,353 5 6,000,969 5 (6,460,992) 5 2,239,507 5 </td <td>Adjusted Operating Income (Loss)</td> <td>\$ 14,311,576</td> <td>\$ 2,799,131 \$</td> <td>11,512,445</td> <td>411.29%</td> <td>\$ 851,810</td> <td>\$ (20</td> <td>0,874,158)</td> <td>\$ (28,449,056) \$</td> <td>7,574,897</td> <td>-26.63%</td> <td>\$ (60,227,227)</td> <td>\$ (98,366,045)</td>	Adjusted Operating Income (Loss)	\$ 14,311,576	\$ 2,799,131 \$	11,512,445	411.29%	\$ 851,810	\$ (20	0,874,158)	\$ (28,449,056) \$	7,574,897	-26.63%	\$ (60,227,227)	\$ (98,366,045)
Gifts and Grants \$ 889,062 \$ 2,566,747 \$ (1,677,685) -65.36% \$ 3,129,188 \$ 4,975,921 \$ 18,369,146 \$ (13,393,226) -72.91% \$ 22,306,228 \$ 4,782,034 Pension OPEB Nonemployer Contribution 646,923 664,897 (17,974) -2.70% 664,897 5,522,489 5,319,178 203,311 3.82% 5,319,178 1,039,702 Investment Income (557,773) 49,913 (607,186) -1216.48% 49,913 (4,110,294) 399,308 (4,509,602) -1129.36% 399,308 (885,912) Loss on Disposal of Capital Assets - - 0.00% - (88,405) (68,955) (19,450) 28.21% (68,955) (219,163) Other NonOperating Expenses 558 (290,088) 290,646 -100.19% (365,455) (721,985) (2,030,613) 1,308,628 -64.44% (2,558,182) (972) Debt Issuance Costs (312,138) - (312,138) 0.00% - (479,761) - (479,761) 0.00% - (16,002) Total NonOperating Revenues (Expenses) \$ 748,126 \$ 2,991,470 \$ (2,200,000) - - 0.00% (2,000,000) - - (16,002) \$ 12,461,961 -192.88% <td>Adjusted Operating Margin</td> <td>5.32%</td> <td>1.17%</td> <td></td> <td></td> <td>0.34%</td> <td></td> <td>-1.03%</td> <td>-1.47%</td> <td></td> <td></td> <td>-3.08%</td> <td>-6.39%</td>	Adjusted Operating Margin	5.32%	1.17%			0.34%		-1.03%	-1.47%			-3.08%	-6.39%
Gifts and Grants \$ 889,062 \$ 2,566,747 \$ (1,677,685) -65.36% \$ 3,129,188 \$ 4,975,921 \$ 18,369,146 \$ (13,393,226) -72.91% \$ 22,306,228 \$ 4,782,034 Pension OPEB Nonemployer Contribution 646,923 664,897 (17,974) -2.70% 664,897 5,522,489 5,319,178 203,311 3.82% 5,319,178 1,039,702 Investment Income (557,773) 49,913 (607,186) -1216.48% 49,913 (4,110,294) 399,308 (4,509,602) -1129.36% 399,308 (885,912) Loss on Disposal of Capital Assets - - 0.00% - (88,405) (68,955) (19,450) 28.21% (68,955) (219,163) Other NonOperating Expenses 558 (290,088) 290,646 -100.19% (365,455) (721,985) (2,030,613) 1,308,628 -64.44% (2,558,182) (972) Debt Issuance Costs (312,138) - (312,138) 0.00% - (479,761) - (479,761) 0.00% - (16,002) Total NonOperating Revenues (Expenses) \$ 748,126 \$ 2,991,470 \$ (2,200,000) - - 0.00% (2,000,000) - - (16,002) \$ 12,461,961 -192.88% <td>NonOperating Revenues (Expenses)</td> <td></td>	NonOperating Revenues (Expenses)												
Pension OPEB Nonemployer Contribution 646,923 664,897 (17,974) -2.70% 664,897 5,522,489 5,319,178 203,311 3.82% 5,319,178 1,039,703 Investment Income (557,273) 49,913 (607,186) -1216.48% 49,913 (4,110,294) 399,308 (4,509,602) -1129.36% 399,308 (885,912) Loss on Disposal of Capital Assets - - - 0.00% - (88,405) (19,450) 28.21% (68,955) (219,165) COVID Funding 80,993 - 80,993 0.00% - 21,777,163 - 21,777,163 - 107,536,199 Other NonOperating Expenses 558 (290,088) 290,646 -100.19% (365,455) (771,1985) (2,030,613) 1,308,628 -64.44% (2,558,182) (972) Debt Issuance Costs - - - (312,138) 0.00% - (479,761) - (479,761) 0.00% - (16,002) Total NonOperating Revenues (Expenses) \$ 15,059,702 \$ 5,790,601 \$ 9,269,101 160.07% <t< td=""><td></td><td>¢ 990.0C2</td><td>¢ 2566.747 ¢</td><td>(1 (77 (95)</td><td>CF 2CW</td><td>ć 2 1 20 1 89</td><td>č</td><td>4 075 021</td><td>ć 19.200.140 ć</td><td>(12 202 226)</td><td>72 010/</td><td>ć 22.200.220</td><td>ć 4 792 024</td></t<>		¢ 990.0C2	¢ 2566.747 ¢	(1 (77 (95)	CF 2CW	ć 2 1 20 1 89	č	4 075 021	ć 19.200.140 ć	(12 202 226)	72 010/	ć 22.200.220	ć 4 792 024
Investment Income (557,273) 49,913 (607,186) -1216.48% 49,913 (4,110,294) 399,308 (4,509,602) -1129.36% 399,308 (885,912) Loss on Disposal of Capital Assets - - 0.00% - (88,405) (68,955) (19,450) 28.21% (68,955) (219,163) COVID Funding 80,993 - 80,993 0.00% - 21,777,163 - 21,777,163 0.00% - 107,536,193 Other NonOperating Expenses 558 (290,088) 290,646 -100.19% (365,455) (721,985) (2,030,613) 1,308,628 -64.44% (2,558,182) (977) Debt Issuance Costs (312,138) - (312,138) -0.00% - (479,761) - (479,761) 0.00% - (16,002) Total NonOperating Revenues (Expenses) \$ 15,059,702 \$ 5,790,601 \$ 9,269,101 160.07% \$ 4,330,353 \$ 6,000,969 \$ (6,460,992) \$ 12,461,961 -192.88% \$ 3,869,833 Income (Loss) Before NonOperating Payments to MUSC Affiliates -													
Loss on Disposal of Capital Assets - - - 0.00% - (88,405) (19,450) 28.21% (68,955) (19,450) 28.21% (68,955) (219,163) COVID Funding 80,993 - 80,993 0.00% - 21,777,163 - 21,777,163 0.00% - 107,536,193 Other NonOperating Expenses 558 (290,088) 290,646 -100.19% (365,455) (721,985) (2,00,613) 1,308,628 -64.44% (2,558,182) (97) Debt Issuance Costs (312,138) - (312,138) 0.00% - (479,761) - (479,761) - (160,00) Total NonOperating Revenues (Expenses) \$ 748,126 \$ 2,991,470 \$ (2,243,344) -74.99% \$ 3,478,544 \$ 26,875,127 \$ 21,988,064 \$ 4,887,063 22.23% \$ 25,397,577 \$ 112,235,884 Income (Loss) Before NonOperating Payments to MUSC Affiliates \$ 15,059,702 \$ 5,790,601 \$ 9,269,101 160.07% \$ 4,330,353 \$ 6,000,969													
COVID Funding 80,993 - 80,993 0.00% - 21,777,163 - 21,777,163 0.00% - 107,536,192 Other NonOperating Expenses 558 (290,088) 290,646 -100.19% (365,455) (721,985) (2,030,613) 1,308,628 -64.44% (2,558,182) (97) Debt Issuance Costs (312,138) - (312,138) 0.00% - (479,761) - (479,761) 0.00% - (16,002) Total NonOperating Revenues (Expenses) \$ 748,126 \$ 2,991,470 \$ (2,243,344) -74.99% \$ 3,478,544 \$ 26,875,127 \$ 21,988,064 \$ 4,887,063 22.23% \$ 25,397,577 \$ 112,235,884 Income (Loss) Before NonOperating Payments to MUSC Affiliates \$ 15,059,702 \$ 5,790,601 \$ 9,269,101 160.07% \$ 4,330,353 \$ 6,000,969 \$ (6,460,992) \$ 12,461,961 -192.88% \$ (3,869,833 Non Operating Payments to MUSC Affiliates - - - 0.00% 2,330,3		(557,273)	49,913	(007,180)		49,913	(*						
Other NonOperating Expenses 558 (290,088) 290,646 -100.19% (365,455) (721,985) (2,03,613) 1,308,628 -64.4% (2,558,182) (972) Debt Issuance Costs (312,138) - (312,138) 0.00% - (479,761) - (479,761) 0.00% - (16,002) Total NonOperating Revenues (Expenses) \$ 748,126 \$ 2,991,470 \$ (2,243,344) -74.99% \$ 3,478,544 \$ 26,875,127 \$ 21,988,064 \$ 4,887,063 22.23% \$ 25,397,577 \$ 112,235,884 Income (Loss) Before NonOperating Payments to MUSC Affiliates \$ 15,059,702 \$ 5,790,601 \$ 9,269,101 160.07% \$ 4,330,353 \$ 6,000,969 \$ (6,460,992) \$ 12,461,961 -192.88% (34,829,650) \$ 13,869,833 Non Operating Payments to MUSC Affiliates - - 0.00% (2,000,000) - - - 0.00% (2,000,000) - - 0.00% (2,000,000) - - 0.00% (2,000,000) <td></td> <td>-</td> <td>-</td> <td>-</td> <td></td> <td>-</td> <td>2</td> <td></td> <td>(08,955)</td> <td></td> <td></td> <td>(68,955)</td> <td></td>		-	-	-		-	2		(08,955)			(68,955)	
Debt Issuance Costs (312,138) - (312,138) 0.00% - (479,761) - (479,761) 0.00% - (16,002) Total NonOperating Revenues (Expenses) \$ 748,126 \$ 2,991,470 \$ (2,243,344) -74.99% \$ 3,478,544 \$ 26,875,127 \$ 21,988,064 \$ 4,887,063 22.23% \$ 25,397,577 \$ 112,235,884 Income (Loss) Before NonOperating Payments to MUSC Affiliates \$ 15,059,702 \$ 5,790,601 \$ 9,269,101 160.07% \$ 4,330,353 \$ 6,000,969 \$ (6,460,992) \$ 12,461,961 -192.88% \$ (34,829,650) \$ 13,869,833 Non Operating Payments to MUSC Affiliates - - - 0.00% (2,000,000) - - - 0.00% (2,000,000) - - - 0.00% (2,000,000) - - - 0.00% (2,000,000) - - - 0.00% (2,000,000) - - - 0.00% (2,000,000) - - -	-	,	-				2.		-			-	
Total NonOperating Revenues (Expenses) \$ 748,126 \$ 2,991,470 \$ (2,243,344) -74.99% \$ 3,478,544 \$ 26,875,127 \$ 21,988,064 \$ 4,887,063 22.23% \$ 25,397,577 \$ 112,235,884 Income (Loss) Before NonOperating Payments to MUSC Affiliates \$ 15,059,702 \$ 5,790,601 \$ 9,269,101 160.07% \$ 4,330,353 \$ 6,000,969 \$ (6,460,992) \$ 12,461,961 -192.88% \$ (34,829,650) \$ 13,869,839 Non Operating Payments to MUSC Affiliates - - 0.00% (2,000,000) - - 0.00% (2,000,000) - Change in Net Position \$ 15,059,702 \$ 5,790,601 \$ 9,269,101 160.07% \$ 2,330,353 \$ 6,000,969 \$ (6,460,992) \$ 12,461,961 - 0.00% (2,000,000) -			(290,088)			(305,455)			(2,030,013)			(2,558,182)	
Income (Loss) Before NonOperating Payments to MUSC Affiliates \$ 15,059,702 \$ 5,790,601 \$ 9,269,101 160.07% \$ 4,330,353 \$ 6,000,969 \$ (6,460,992) \$ 12,461,961 -192.88% \$ (34,829,650) \$ 13,869,839 Non Operating Payments to MUSC Affiliates - - 0.00% (2,000,000) -			-			-	<u> </u>		-			-	
Non Operating Payments to MUSC Affiliates - 0.00% (2,000,000) - 0.00% (2,000,000) - Change in Net Position \$ 15,059,702 \$ 5,790,601 \$ 9,269,101 160.07% \$ 2,330,353 \$ 6,000,969 \$ (6,460,992) \$ 12,461,961 -192.88% \$ (36,829,650) \$ 13,869,839	Total NonOperating Revenues (Expenses)	\$ 748,126	\$ 2,991,470 \$	(2,243,344)	-74.99%	\$ 3,478,544	Ş 20	6,875,127	\$ 21,988,064 \$	4,887,063	22.23%	\$ 25,397,577	\$ 112,235,884
Change in Net Position \$ 15,059,702 \$ 5,790,601 \$ 9,269,101 160.07% \$ 2,330,353 \$ 6,000,969 \$ (6,460,992) \$ 12,461,961 -192.88% \$ (36,829,650) \$ 13,869,839	Income (Loss) Before NonOperating Payments to MUSC Affiliates	\$ 15,059,702	\$ 5,790,601 \$	9,269,101	160.07%	\$ 4,330,353	\$	6,000,969	\$ (6,460,992) \$	12,461,961	-192.88%	\$ (34,829,650)	\$ 13,869,839
	Non Operating Payments to MUSC Affiliates	-	-	-	0.00%	(2,000,000)		-	-	-	0.00%	(2,000,000)	-
Total Margin 5.60% 2.42% 0.94% 0.30% -0.33% -1.88% 0.90	Change in Net Position	\$ 15,059,702	\$ 5,790,601 \$	9,269,101	160.07%	\$ 2,330,353	\$	6,000,969	\$ (6,460,992) \$	12,461,961	-192.88%	\$ (36,829,650)	\$ 13,869,839
	Total Margin	5.60%	2.42%			0.94%		0.30%	-0.33%			-1.88%	0.90%

Unaudited - For Management Use 2

Medical University Hospital Authority – Consolidated

Notes to the Interim Financial Statements

Statement of Revenues, Expenses and Changes in Net Assets: YTD February 28, 2022 (Unaudited) Actuals Compared to Fixed Budget

Revenue Explanation: February year-to-date adjusted discharges were unfavorable to budget by 3.9%. Inpatient and outpatient surgeries were unfavorable to budget by 8.9% and 0.7%, respectively. Transplant procedures was favorable to budget by 4.9%. Case Mix Index was favorable 9.7M and Payor Mix shift and Length of Stay were unfavorable \$1.4M and \$1.6M, respectively. Charity care and bad debt expenses were \$33.7M unfavorable to budget. Retail pharmacy revenues were favorable by \$64.9M. Other Revenues were \$10.1M favorable to budget.

Expense Explanation: The salary rate variance was unfavorable to budget by \$27.7M due to clinical staff vacancies driving the use of premium and contract labor.

Unfunded pension expense was favorable \$10.8M year-to-date. Based on the most recent PEBA report, the estimated FY22 impact was \$31.6M favorable for the fiscal year. The favorable position was driven by the improved investment performance in the PEBA Pension Plan.

Purchased Services were unfavorable to budget \$4.0M due to maintenance contracts and other contractual services and budget alignment with physician services.

Pharmaceuticals, not explained by volume, were unfavorable to budget by \$19.6M due to higher COVID and oncology drug costs. Retail pharmacy revenues, net of expenses, were favorable to budget by \$32.4M.

Medical and Other Supplies, not explained by volume, were \$9.2M unfavorable to budget due to an increase in implant prosthetic supplies.

Utilities and Insurance were unfavorable to budget by \$0.2M due to premiums remaining flat for FY22.

Leases and Other were favorable to budget by \$6.2M due to unplanned equipment leases.

Statements of Net Position

Medical University Hospital Authority - Consolidated

Statements of Net Position

February 28, 2022 and June 30, 2021

Assets and Deferred Outflows	As of 2/28/2022 (unaudited)			As of 6/30/2021 (audited)		
Current Assets: Cash and Cash Equivalents Cash Restricted for Capital Projects and Major Programs	\$	405,304,496 71,736,976	\$	399,102,026 35,468,718		
Cash Restricted for COVID-19 Stimulus Funding		21,209,892		34,936,659		
Investments Unrestricted Investments Restricted for Capital Projects and Major Programs		225,535,711 35,987,837		216,099,763 31,600,161		
Patient Accounts Receivable, Net of Allowance for Uncollectible Accounts of approximately \$317,300,000 and \$224,400,000		408,580,028		280,237,834		
Due from Related Parties		8,977,657		1,070,385		
Due from Third-Party Payors		5,749,100		5,382,263		
Due from Joint Ventures and Partnerships		6,243,864		8,557,430		
Other Current Assets		226,329,687		191,093,298		
Total Current Assets	\$	1,415,655,248	\$	1,203,548,537		
Investments Held by Trustees Under Indenture Agreements	\$	65,381,621	\$	63,420,714		
Investments in Joint Ventures and Partnerships		32,833,871		7,006,875		
Other Non-Current Assets Capital Assets, Net		6,719,378 1,041,125,491		9,196,686 965,878,400		
Total Assets	\$	2,561,715,609	\$	2,249,051,212		
Deferred Outflows	\$	730,153,186	\$	741,843,042		
Total Assets and Deferred Outflows	\$	3,291,868,795	\$	2,990,894,254		
	<u></u>	-,,,	<u>_</u>			
Liabilities, Deferred Inflows and Net Position						
Current Liabilities:	ć	100 257 654	ć	22 275 072		
Current Installments of Long-Term Debt Current Installments of Capital Lease Obligations	\$	109,357,654 15,822,221	\$	32,275,873 8,582,452		
Current Installments of Notes Payable		1,590,238		2,158,755		
Short-Term Debt		80,000,000		-		
Advance Medicare Funding		129,138,952		104,156,497		
Accounts Payable		208,864,835		148,507,602		
Accrued Payroll, Withholdings and Benefits		141,086,099		106,967,579		
Other Accrued Expenses		24,983,140		25,603,343		
Unearned Revenue		8,161,931		105,979		
Total Current Liabilities	\$	719,005,070	\$	428,358,080		
Long-Term Debt	\$	678,380,084	\$	700,534,221		
Capital Lease Obligations		116,026,637		73,781,584		
Notes Payable		367,254		1,169,293		
Other Liabilities Net Pension Liability		- 1,149,452,257		78,644,026		
Net OPEB Liability		1,103,179,040		1,174,093,986 1,060,313,034		
Total Liabilities	\$	3,766,410,342	\$	3,516,894,224		
Deferred Inflows	\$	122,481,662	\$	73,644,245		
Total Liabilities and Deferred Inflows	\$	3,888,892,004	\$	3,590,538,469		
Net Position:				<u> </u>		
Net Investment in Capital Assets	\$	131,953,153	\$	162,706,935		
Restricted:						
Under Indenture Agreements Expendable for:		65,381,621		63,420,714		
Capital Projects		23,123,703		45,994,790		
Major Programs		26,137,939		30,798,357		
COVID-19 Stimulus Funding		21,209,892		34,936,659		
Unrestricted (deficit)		(864,829,517)		(937,501,670)		
Total Net Position	\$	(597,023,209)	\$	(599,644,215)		
Total Liabilities, Deferred Inflows and Net Position	\$	3,291,868,795	\$	2,990,894,254		

Unaudited - For Management Use 5

Balance Sheet: As of 02/28/22 (Unaudited) and 06/30/2021 (Audited)

Cash and Cash Equivalents

Unrestricted cash and cash equivalents increased by \$6.2M from June 30, 2021. Significant FY22 events increasing cash include a \$80M RAN received for Midlands working capital, \$21M in DSH UPL payments, \$14.2M in Provider Relief Funds, \$12M in Disproportionate Share Hospital (DSH) and Graduate Medical Education (GME) programs and \$1.2M in Managed Care Organization Teaching payments, and maturity of federal bonds since June 30, 2021.

Bank Balance:	 2/28/2022 Balance
Insured (FDIC & SIPC) Uninsured, uncollateralized by securities held by the pledging institution	\$ 1,739,721
or by its trust departmeth or agent in other than MUHA's name	501,621,720
Total	\$ 503,361,441
Carrying Amount (cash and cash equivalents)	\$ 405,304,496
Restricted Assets (cash and cash equivalents)	 92,946,868
Total	\$ 498,251,364
	 2/28/2022
Investment Income comprises the following:	 Balance
Dividend and interest income	\$ 2,287,371
Realized and unrealized loss on investments	 (6,397,665)
	\$ (4,110,294)

Net Accounts Receivable

Net patient accounts receivable increased \$128.3M from June 30, 2021 due to a positive Case Mix Index and slower collections from payors. February 2022 net accounts receivable days were 54 compared to June 30, 2021 at 45.

Balance Sheet: As of 02/28/22 (Unaudited) and 06/30/2021 (Audited) cont'd

Other Current Assets

The composition of other current assets is as follows:

	2/28/2022		6/30/2021	
		Balance		Balance
Inventory	\$	95,567,052	\$	81,781,383
Other Prepayments		79,555,861		58,144,453
Non-Patient Accounts Receivable		41,024,631		51,167,462
Health Insurance Prepayments		4,732,981		-
Workers' Compensation Prepayments		5,338,410		-
Dental Prepayments		110,752		-
	\$	226,329,687	\$	191,093,298

Medicare and Medicaid owed MUHA \$5.7M, an increase of \$0.4M due to prior year Medicare cost adjustments.

	2	2/28/2022	6/30/2021			
		Balance		Balance		
Medicare/Medicaid Accounts Receivable	\$	5,749,100	\$	5,382,263		

The total net receivable from MSV, MHI, Mainsail, Edgewater and MHP is reflected as a component of due from joint ventures and partnerships, net on the Statement of Net Position.

	2	2/28/2022		6/30/2021
		Balance		Balance
MUSC Health Partners (MHP)	\$	6,973,628	\$	8,993,758
Edgewater Surgery Center		1,031,661		1,179,291
MSV Health Inc (MHI)		206,818		206,950
Mainsail Health Partners		218,309		95,825
MUSC Strategic Ventures (MSV)		(2,186,552)		(1,918,394)
	\$	6,243,864	\$	8,557,430

Advance Medicare Funding

The Authority received \$182.8M in requested Accelerated Medicare Payments in September 2020. The unapplied amount of accelerated Medicare payment requests due within one year are recorded in in the Statement of Net Position as Advanced Medicare funding, with a current portion due \$129.1M as of February 28, 2022.

Accounts Payable

Accounts Payable increased by \$60.4M from June 30, 2021 mainly due to accrued AP.

Balance Sheet: As of 02/28/22 (Unaudited) and 06/30/2021 (Audited) cont'd

Other Accrued Expenses

The composition of other accrued expenses is as follows:

	2/28/2022		6/30/2021
		Balance	 Balance
Accrued Interest	\$	4,324,638	\$ 2,125,593
Amounts due to contractors		1,490,348	329,462
Amounts due to South Carolina Medicaid			
Disproportionate Share Hospital Program		-	2,466,912
Lease Obligation		15,770,382	16,555,368
Other		3,397,772	 4,126,008
	\$	24,983,140	\$ 25,603,343

Unearned Revenue

Unearned revenue increased \$8.1M from June 30, 2021 mainly due to State Appropriations deferral.

Long Term Debt

As of February 28 2022, Current Installments of Long-Term Debt relates to HUD debt for Ashley River Tower (ART), Shawn Jenkins Children's Hospital (SJCH) and the Central Energy Plant (CEP). Current Installments of Notes Payable relate to the note payable for the Sabin Street Energy Plant. A table of outstanding balances by major issuance is listed below:

	2/28/2022	6/30/2021
Project (mo/yr issued)	 Balance	 Balance
SJCH (06/2019)	\$ 295,228,145	\$ 300,880,172
ART (12/2012)	226,224,334	237,330,884
CHS Acquisition (03/2019)	119,499,787	121,894,169
Capital Leases (various - see below)	131,848,858	82,364,035
Lifepoint Acquisition (07/2021)	76,380,000	-
Nexton and CSC (10/2018)	34,567,828	35,058,661
CEP (12/2013)	29,657,506	31,342,241
Edgewater (03/2019)	6,180,138	6,303,968
Sabin Street (04/2013)	1,957,492	2,732,070
Lease Buy-Outs (various)		 595,978
	\$ 921,544,088	\$ 818,502,178

Balance Sheet: As of 02/28/22 (Unaudited) and 06/30/2021 (Audited) cont'd

As of February 28, 2022, capital leases relate to various pieces of equipment and properties. A table of outstanding balances by equipment description is listed below:

	2/28/2022	6/30/2021
Project (month/year issued)	 Balance	Balance
Summey Medical Pavilion (04/2019)	\$ 42,670,628	\$ 43,774,825
Equipment Lease - Charleston (various)	19,127,201	-
Equipment Lease - Midlands (various)	17,214,481	-
Imaging Equipment (01/2019)	16,123,145	16,622,011
Equipment Lease - Regional Health (various)	12,000,000	-
Medical Malls (02/2019)	9,500,748	9,637,113
Patient Monitors (07/2016)	7,613,144	9,635,903
1 Poston Road (10/2021)	5,833,903	-
Cardiovascular Equipment (various)	1,218,795	2,009,808
Ultrasound (various)	282,411	378,556
Property Leases - via acquisition (various)	129,760	-
Computer software (09/2019)	134,642	168,039
Generator (11/2014)	-	121,532
Lab Equip (01/2018)	 -	 16,248
	\$ 131,848,858	\$ 82,364,036

Balance Sheet: As of 02/28/22 (Unaudited) and 06/30/2021 (Audited) cont'd

Annual debt service costs for FY2021 totaled \$119.1M. A table of debt service by major issuance is listed below, as well as by equipment description as it relates to capital leases:

	Monthly
Project (month/year issued)	Debt Service
SJCH (06/2019)	\$ 8,735,376
ART (12/2012)	17,072,863
CHS Acquisition (03/2019)	3,682,454
Capital Leases (various - see below)	15,822,221
Lifepoint Acquisition (07/2021)	76,380,000
Nexton and CSC (10/2018)	687,067
CEP (12/2013)	2,609,449
Edgewater (03/2019)	190,445
Sabin Street (04/2013)	1,590,238
Lease Buy-Outs (various)	-
	\$ 126,770,113
	Monthly
Project (month/year issued)	Debt Service
	<u> </u>

Project (month/year issued)	<u> </u>	ebt Service
Summey Medical Pavilion (04/2019)	\$	1,712,001
Imaging Equipment (01/2019)		2,565,182
Equipment Lease - Charleston (various)		2,663,838
Equipment Lease - Midlands (various)		2,397,454
1 Poston Road (10/2021)		1,695,379
Equipment Lease - Regional Health (various)		619,105
Medical Malls (02/2019)		251,548
Patient Monitors (07/2016)		3,172,462
Cardiovascular Equipment (various)		460,738
Ultrasound (various)		148,243
Property Leases - via acquisition (various)		84,244
Computer Software (09/2019)		52,026
	\$	15,822,221

Pension and Other Post Employment Benefit (OPEB) Liabilities

As of February 28, 2022, the net pension liability decreased by \$24.6M from June 30, 2021.

As of February 28, 2022, the net other post-employment benefit liability increased \$42.9M from June 30, 2021.

Statements of Cash Flows

Statements of Cash Flows

February 28, 2022 and June 30, 2021

	A:	s of 02/28/2022 (unaudited)	A	s of 6/30/2021 (audited)
Cash flows from operating activities:				
Receipts received from patients and third-party payors	\$	1,820,534,560	\$	2,518,918,860
Other cash receipts		101,604,729		55,182,355
Payments to suppliers and employees		(1,874,874,684)		(2,260,225,058)
Net cash provided (used) by operating activities	\$	47,264,605	\$	313,876,157
Cash flows from noncapital financing activities:				
State appropriations	\$	16,075,000	\$	78,033,724
Proceeds from CARES Funding		16,259,755		116,344,785
Proceeds from noncapital grants and gifts		1,038,358		-
Proceeds from revenue anticipation notes		80,000,000		-
Payments of revenue anticipation notes		-		(120,000,000)
Nonoperating expenditures		(721,985)		(3,517,098)
Net cash provided (used) by noncapital financing activities	\$	112,651,128	\$	70,861,411
Cash flows from capital and related financing activities:				
Capital expenditures	\$	(81,110,359)	\$	(91,971,457)
Capital appropriations		-		39,000,000
Capital grants and gifts received		4,411,303		5,882,809
Proceeds from disposal of capital assets		1,500		104,397
Payments of principal on long-term debt		(22,822,911)		(34,269,708)
Proceeds from financing lease		50,000,000		2,263,820
Payment of bond issuance cost		(432,138)		(16,002)
Proceeds of escrow accounts		-		1,748,812
Payments of mortgage insurance premium		(1,590,762)		-
Payments on capital lease obligations		(10,054,127)		(12,842,965)
Proceeds on equipment replacement obligations		538,190		214,542
Interest payments		(24,396,999)		(39,102,602)
Net cash provided (used) by capital and related financing activities	\$	(85,456,303)	\$	(128,988,354)
Cash flows from investing activities:		· · ·		· · ·
Proceeds from sale and maturity of investments	\$	237,921,586	\$	259,764,259
Investment income received		2,220,010		3,691,724
Distributions from joint ventures and partnerships		906,236		-
Purchases of investments		(264,783,371)		(410,251,745)
Contributions to joint ventures and partnerships		(26,733,232)		(4,000,000)
Net cash provided (used) by investing activities	\$	(50,468,771)	\$	(150,795,762)
Net increase (decrease) in cash and cash equivalents		23,990,659		104,953,452
Cash and cash equivalents at beginning of year		479,016,532		374,063,080
Cash and cash equivalents at end of year	\$	503,007,191	\$	479,016,532
			<u> </u>	

Statements of Cash Flows

February 28, 2022 and June 30, 2021

	of 02/28/2022 (unaudited)	As	of 6/30/2021 (audited)
Reconciliation of operating income to net cash provided by operating activities:			
Operating income (loss)	\$ (12,081,917)	\$	(220,327,989)
Adjustments to reconcile operating income to net cash provided by			
operating activities:			
Depreciation and amortization	74,666,223		109,246,214
Provision for uncollectible accounts	152,631,058		257,802,668
Changes in operating assets and liabilities:			
Patient accounts receivable	(280,973,253)		(239,762,871)
Due from (to) third-party payors	(366,837)		14,577,629
Due from (to) joint ventures and partnerships	2,313,565		(5,852,744)
Other current assets	(5,765,922)		(31,951,565)
Accounts payable	62,877,817		50,134,544
Other accrued/prepaid expenses and accrued payroll, withholding and benefits	25,457,066		9,811,566
Advanced Medicare funding, including long-term portion	(53,661,571)		182,800,523
Pension obligations	38,429,650		115,879,115
OPEB obligations	44,363,785		67,208,503
Note payable	-		2,263,820
Related parties, net	(8,129,272)		7,151,721
Unearned revenue	7,504,212		(2,841,155)
Net cash provided by operating activities	\$ 47,264,605	\$	316,139,979
Reconciliation of cash and cash equivalents at end of year to the statement of net position:			
Cash and cash equivalents	\$ 405,304,496	\$	399,102,026
Restricted for capital projects and other programs	92,946,868		70,405,377
Included in investments held by trustees under indenture agreements	 4,755,827		9,509,129
Cash and cash equivalents at end of year	\$ 503,007,191	\$	479,016,532
Noncash transactions:			
Capital assets acquired by capital lease, other financing	\$ 9,373,779	\$	19,839,889
Capital assets and working capital acquired via debt	76,380,000		-
Change in fair value of investments	(6,397,665)		(3,425,652)
Change in capital assets payable	(3,092,856)		(27,740,680)
Pro rata income from joint ventures	-		1,650,084

Crosswalk of Financial Accounting Standards Board (FASB) Income Statement Presentation to Government Accounting Standards Board (GASB)

Medical University Hospital Authority - Consolidated

Statement of Revenues, Expenses and Change in Net Position For the 8 Month Period Ending - February 28, 2022

Modified FASB Basis

Crosswalk from FASB to GASB				FASB						GASB	
			Fiscal	Year To Date					iscal '	Year To Date	
		Actual		Budget	Variance			Actual		Budget	Variance
Operating Revenues:						Operating Revenues:					
Net Patient Service Revenues	Ś	1,635,501,441	Ś	1.647.640.526	-0.74%	Net Patient Service Revenues	Ś	1.635.501.441	Ś	1.647.640.526	-0.74%
Other Revenues - DHS Revenue	Ŷ	49,334,921	Ŷ	45,427,583	8.60%	Other Revenues - DSH Revenue	Ŷ	49,334,921	Ŷ	45,427,583	8.60%
Retail Pharmacy Revenue		249,335,220		184,429,221	35.19%	Retail Pharmacy Revenue		249,335,220		184,429,221	35.19%
Other Revenues		72,662,763		62,537,261	16.19%	Other Revenues		72,662,763		62,537,261	16.19%
State Appropriations		20,387,103		17,719,100	15.06%						
	_										
Total Operating Revenues	\$	2,027,221,448	\$	1,957,753,690	3.55%	Total Operating Revenues	\$	2,006,834,345	\$	1,940,034,591	3.44%
Operating Expenses:						Operating Expenses:					
Salaries Wages	\$	586,961,236	\$	570,742,359	2.84%	Salaries Wages	\$	586,961,236	\$	570,742,359	2.84%
Benefits		190,020,642		199,533,189	-4.77%	Benefits		190,020,642		199,533,189	-4.77%
Pension Expense		38,429,650		49,221,173	-21.92%	Pension Expense		38,429,650		49,221,173	-21.92%
Other Post Employment Benefits		44,363,785		45,121,177	-1.68%	Other Postemployment Benefits		44,363,785		45,121,177	-1.68%
Purchased Services		274,450,527		270,425,485	1.49%	Purchased Services		274,450,527		270,425,485	1.49%
Physician Services		111,261,911		116,747,594	-4.70%	Physician Services		111,261,911		116,747,594	-4.70%
Pharmaceuticals		140,204,620		121,685,775	15.22%	Pharmaceuticals		140,204,620		121,685,775	15.22%
Retail Pharmaceuticals		121,354,073		88,841,567	36.60%	Retail Pharmaceuticals		121,354,073		88,841,567	36.60%
Medical Supplies		285,335,564		284,932,333	0.14%	Medical Supplies		285,335,564		284,932,333	0.14%
COVID Supplies		7,372,764		-	100.00%	COVID-19 Supplies		7,372,764			-100.00%
Other Supplies		37,408,788		42,656,940	-12.30%	Other Supplies		37,408,788		42,656,940	-12.30%
Utilities		20,547,500		20,517,362	0.15%	Utilities		20,547,500		20,517,362	0.15%
Insurance		8,174,073		8,006,968	2.09%	Insurance		8,174,073		8,006,968	2.09%
Leases		31,587,930		29,565,093	6.84%	Leases		31,587,930		29,565,093	6.84%
Other		26,069,584		34,261,760	-23.91%	Other		26,069,584		34,261,760	-23.91%
Physician Clinic Expense		17,327,429		17,913,673	-3.27%	Physician Clinic Expense		17,327,429		17,913,673	-3.27%
Total Operating Expenses	Ś	1,940,870,075	\$	1,900,172,447	2.14%	Total Operating Expenses	\$	1,940,870,074	\$	1,900,172,449	2.14%
EBIDA	Ś	86,351,373			49.96%	EBIDA	s.	65,964,271		39,862,142	65.48%
				57,581,243			·				
Depreciation	\$	74,666,223	\$	76,377,657	-2.24%	Depreciation	\$	74,666,223	\$	76,377,657	-2.24%
Interest Expense	\$	27,396,247	\$	27,121,720	1.01%						
Operating Income (Loss)	\$	(15,711,098)	\$	(45,918,134)	-65.78%	Operating Income (Loss)	\$	(8,701,952)	\$	(36,515,515)	-76.17%
Operating Margin		-0.78%		-2.35%	-66.96%	Operating Margin		-0.43%		-1.88%	-76.96%
One Time Acquisition Costs	\$	5,163,061	\$	14,309,093	-63.92%	One Time Acquisition Costs	\$	5,163,061	\$	14,309,093	-63.92%
					100%						#DIV/0!
Adjusted Operating Income (Loss)	\$	(20,874,158)	\$	(60,227,227)	-65.34%	Adjusted Operating Income (Loss)	\$	(13,865,013)	\$	(50,824,608)	-72.72%
					100%						#DIV/0!
Adjusted Operating Margin		-1.03%		-3.08%	-66.53%	Adjusted Operating Margin		-0.69%		-2.62%	-73.63%
NonOperating Revenues (Expenses):						NonOperating Revenues (Expenses):					
						State Appropriations	\$	20,387,103	Ş	17,719,100	15.06%
Gifts and Grants	\$	4,975,921	Ş	7,152,401	-30.43%	Gifts and Grants		4,975,921		7,152,401	-30.43%
Pension OPEB Nonemployer Contribution		5,522,489		20,473,006	-73.03%	Pension OPEB Nonemployer Contribution		5,522,489		20,473,006	-73.03%
Investment Income		(4,110,294)		399,308	-1129.35%	Investment Income		(4,110,294)		399,308	-1129.35%
		(()		Interest Expense		(27,396,247)		(27,121,720)	1.01%
Loss on Disposal of Capital Assets		(88,405)		(68,955)	-28.21%	Loss on Disposal of Capital Assets		(88,405)		(68,955)	-28.21%
COVID-19 Stimulus Funding		21,777,163		-	100.00%	COVID-19 Stimulus Funding		21,777,163		-	100.00%
Other NonOperating Expenses		(721,985)		(2,558,182)	71.78%	Other NonOperating Expenses		(721,985)		(2,558,182)	71.78%
Debt Issuance Costs		(479,761)			-100.00%	Debt Issuance Costs		(479,761)			-100.00%
Total NonOperating Revenues (Expenses)	\$	26,875,127	\$	25,397,577	5.82%	Total NonOperating Revenues (Expenses)	\$	19,865,984	\$	15,994,958	24.20%
Income (Loss) Before NonOperating Payments	\$	6,000,969	\$	(34,829,650)	-117.23%	Income (Loss) Before NonOperating Payments	\$	6,000,969	\$	(34,829,650)	-117.23%
to MUSC Entities						to MUSC Entities					
NonOperating Payments to MUSC Entities		-		(2,000,000)	100.00%	NonOperating Payments to MUSC Entities		-		(2,000,000)	100.00%
Change in Net Position	\$	6,000,969	\$	(36,829,650)	-116.29%	Change in Net Position	\$	6,000,969	\$	(36,829,650)	-116.29%
Total Margin		0.30%		-1.88%		Total Margin		0.29%		-1.90%	

FACILITIES HOSPITAL AUTHORITY - COLUMBIA LEASE AMENDMENT FOR APPROVAL

APRIL 8, 2022

DESCRIPTION OF LEASE AMENDMENT: This lease agreement is for approximately 61,645 square feet of clinical and office space located at 2001 Laurel Street, Columbia. The purpose of this amendment is to extend the lease term for an additional six months during the property transition to Mainsail. This space is occupied by MUSC Health Heart & Vascular. The current cost per square foot is \$27.34 which is comprised of \$23.60 a square foot base rent and \$3.74 a square foot for taxes and insurance passthroughs. The total monthly rental payment will be \$140,470.30, resulting in a total extension amount of \$842,821.80.

The Medical University Hospital Authority leases 27,872 square feet to MUSC Community Physicians and intends to extend this agreement for an additional six months at a total amount of \$381,010.26.

NEW LEASE AGREEMENT _____ LEASE AMENDMENT _X____

LANDLORD: South Carolina Heath Center, Limited Partnership

LANDLORD CONTACT: Kathy Koenig, Business Manager

TENANT NAME AND CONTACT: MUSC Health Heart & Vascular, Joseph Bernard, Chief Operating Officer - Midlands

SOURCE OF FUNDS: General Operating Funds

LEASE TERMS:

TERM: Six (6) months: [7/1/2022-12/31/2022] AMOUNT PER SQUARE FOOT: \$27.34 TOTAL EXTENDED AMOUNT: \$842,821.80

EXTENDED TERM OPTION: One (1) term, six (6) months

TOTAL AMOUNT OF EXTENDED TERM AND OPTION: \$1,685,643.60

OPERATING COSTS:

 FULL SERVICE _____

 MODIFIED _X___

FACILITIES HOSPITAL AUTHORITY - CHARLESTON LEASE RENEWAL FOR APPROVAL

APRIL 8, 2022

DESCRIPTION OF LEASE RENEWAL: This lease renewal is for 2,316 square feet of office space located at 52 Courtenay Drive, Charleston. The purpose of this lease renewal is to continue to provide office space for Psychiatry & Behavioral Services. The cost per square foot is \$19.63. The monthly rental payment will be \$3,788.51, resulting in an annual lease amount of \$45,462.12. There is no annual rent increase for this property, annual rent shall remain constant throughout the lease term.

The Medical University Hospital Authority further subleases this entire space to the Medical University of South Carolina.

NEW LEASE AGREEMENT _____ RENEWAL LEASE AGREEMENT _X_

LANDLORD: The Medical University of South Carolina Foundation

LANDLORD CONTACT: Stuart Ames, Chief Executive Officer

TENANT NAME AND CONTACT: Psychiatry and Behavioral Services

SOURCE OF FUNDS: General Operating Funds

COMBINED LEASE TERMS: TERM: Five (5) years: [7/1/2022-6/30/2027] AMOUNT PER SQUARE FOOT: \$19.63 TOTAL ANNUALIZED LEASE AMOUNT: \$45,462.12

TOTAL AMOUNT OF LEASE TERM: \$227,310.60

EXTENDED TERM(S): To be negotiated

OPERATING COSTS: FULL SERVICE _____ NET _X___

FACILITIES HOSPITAL AUTHORITY - CHARLESTON LEASE RENEWAL FOR APPROVAL

APRIL 8, 2022

DESCRIPTION OF LEASE RENEWAL: This lease renewal is for 9,000 square feet of space located at 1001-B Michigan Avenue, Charleston. The purpose of this lease renewal is to continue to provide space for MUSC Children's Day Treatment Program. The cost per square foot is \$11.00. The monthly rental payment will be \$8,250.00, resulting in an annual lease amount of \$99,000.00. Rent shall increase to \$11.50 beginning year two.

NEW LEASE AGREEMENT _____ RENEWAL LEASE AGREEMENT _X_

LANDLORD: The Trustees of Riverbend Baptist Church

LANDLORD CONTACT: Lynn Christian, Business Manager

TENANT NAME AND CONTACT: MUSC Children's Day Treatment Program, Dianne Thesing, Directory of Ambulatory Services

SOURCE OF FUNDS: General Operating Funds

COMBINED LEASE TERMS: TERM: Two (2) years: [11/1/2022-10/31/2024] AMOUNT PER SQUARE FOOT: \$11.00 TOTAL ANNUALIZED LEASE AMOUNT Year 1 \$99,000.00 Year 2 \$103,500.00

TOTAL AMOUNT OF LEASE TERM: \$202,500.00

EXTENDED TERM(S): To be negotiated

OPERATING COSTS: FULL SERVICE _____ NET _X___

FACILITIES ACADEMIC LEASE RENEWAL FOR APPROVAL

APRIL 8, 2022

DESCRIPTION OF LEASE RENEWAL: This lease renewal is for 7,962 square feet of office space located at 20 Ehrhardt Street, Charleston. The purpose of this lease is to continue to provide temporary office and swing space for assignment by the MUSC Executive Vice President of Finance & Operations. The cost per square foot is \$6.57. The monthly rental payment will be \$4,359.00, resulting in an annual lease amount of \$52,308.00. There is no annual rent increase for this property, annual rent shall remain constant throughout the lease term.

NEW LEASE AGREEMENT _____ RENEWAL LEASE AGREEMENT _X_

LANDLORD: The Medical University of South Carolina Foundation

LANDLORD CONTACT: Stuart Ames, Chief Executive Officer

TENANT NAME AND CONTACT: MUSC Executive Vice President of Finance & Operations for assignment of temporary office and swing space.

SOURCE OF FUNDS: General Operating Funds

COMBINED LEASE TERMS: TERM: Five (5) years: [7/1/2022-6/30/2027] AMOUNT PER SQUARE FOOT: \$6.57 TOTAL ANNUALIZED LEASE AMOUNT: \$52,308.00

TOTAL AMOUNT OF LEASE TERM: \$261,540.00

EXTENDED TERM(S): To be negotiated

OPERATING COSTS: FULL SERVICE _____ NET _<u>X</u>___

FACILITIES ACADEMIC LEASE RENEWAL FOR APPROVAL

APRIL 8, 2022

DESCRIPTION OF LEASE RENEWAL: This lease renewal is for 75,018 square feet of office and warehouse space located at 4295 Arco Lane, North Charleston. The purpose of this lease is to continue to provide space for MUSC Business Services which includes the University Records Center, Warehouse Operations, University Press and University Surplus. The cost per square foot is \$1.82 (rounded). The monthly rental payment will be \$11,400.00, resulting in an annual lease amount of \$136,000.00. There is no annual rent increase for this property, annual rent shall remain constant throughout the lease term.

NEW LEASE AGREEMENT _____ RENEWAL LEASE AGREEMENT _X_

LANDLORD: The Medical University of South Carolina Foundation

LANDLORD CONTACT: Stuart Ames, Chief Executive Officer

TENANT NAME AND CONTACT: Business Services, John Runyon, Director

SOURCE OF FUNDS: General Operating Funds

COMBINED LEASE TERMS: TERM: Five (5) years: [7/1/2022-6/30/2027] AMOUNT PER SQUARE FOOT: \$1.82 TOTAL ANNUALIZED LEASE AMOUNT: \$136,000.00

TOTAL AMOUNT OF LEASE TERM: \$680,000.00

EXTENDED TERM(S): To be negotiated

OPERATING COSTS: FULL SERVICE _____ NET __X___

FACILITIES HEALTHCARE ESTABLISH PROJECT FOR APPROVAL

April 8, 2022

PROJECT TITLE:	May River Shopping Center Primary Care, Bluffton, SC
PROJECT NUMBER:	TBD
TOTAL ESTIMATED BUDGET:	\$900,000
SOURCE(S) OF FUNDS:	MUHA with Mainsail Reimbursement/Lease

SCOPE OF WORK: This project will fit-out a 2,800 square foot primary care clinic at 3521 Okatie Highway. Tenant improvements are the responsibility of the tenant, with a \$40 per square foot tenant improvement allowance given by the landlord. The primary electrical service has been provided to two panels inside the space, and the primary HVAC unit is existing on the roof.

MUHA Real Estate and Design and Construction engaged JE Dunn Construction for a tour of the space in September to review the potential buildout. JE Dunn, in conjunction with LS3P, then provided an overall design and construction cost estimate of \$982,798. With the inclusion of the TI allowance, this fits within the allocated amount, but additional effort will be made to reduce the construction scope to allow for additional FF&E and contingency.

Design is anticipated to take 10 weeks, permitting 6-8 weeks, and construction approximately 4 months from receiving the permit.

The Mainsail Board of Trustees approved \$900,000 at their September Board meeting.

The MUSC Board of Trustees approved the lease of this space at their February Board meeting.

Overview of Renovated 1st Floor Space: The renovation will provide approximately 5 dedicated exam rooms, with one flexible exam/procedure room. A small lab will be included with all of the other necessary staff and utility support spaces. Finishes in the space will be commensurate with the current MUSC standards.

JUSTIFICATION: MUSC has entered into an agreement with a primary care physician for this market, and this growth aligns with the ISC Committees guidance.

FACILITIES ACADEMIC/RESEARCH ESTABLISH PROJECT FOR APPROVAL

April 8, 2022

PROJECT TITLE:	College of Nursing (CON): 99 Jonathan Lucas Academic Building: 1 st Floor Renovation
PROJECT NUMBER:	TBD
TOTAL ESTIMATED BUDGET:	\$3,710,000
SOURCE(S) OF FUNDS:	CON Reserves (Clinical Funds)

SCOPE OF WORK: This project will renovate the existing ground floor of the College of Nursing (CON) building on Jonathan Lucas Street. The ground floor renovation will consist of approximately 11,000 gross square feet and will include a new accessible lobby for the Nursing Building from Jonathan Lucas at the ground level and an interior stair for access to the 2nd floor. The renovated 1st floor space will allow us to achieve 3 goals:

- Increase student learning space so that we have the ability to manage our current enrollment as well as increase student enrollment in our academic programs, particularly our on-campus ABSN program (from 120 to 160 per class cohort). It will add a number of new flexible classrooms that vary in seat capacity with a maximum to 40, expand our skills lab space, and provide a number of new interactive student-centric learning spaces.
- 2) Provide dedicated space within the college to support our strategic plan goals to promote belonging, enhance 'sense of community' and engagement among and across faculty, staff, and students. As part of the proposed scope of work, we will examine either renovating or moving the current 3rd floor skills lab to the 1st floor. If the design results in the recommendation to move the current skills lab to the 1st floor, the 3rd floor space will be repurposed to support additional student study space or a common area to support community engagement for faculty, staff, and/or students.
- 3) Provide new dedicated but flexible office and multi-functional meeting room space to support our student support services (as we increase our on-campus ABSN enrollment in particular) as well as space for research and practice hubs that support networking, collaboration, and expanded translational research and clinical practice activities through tele-research pods, telehealth and teleprecepting.

Overview of Renovated 1st **Floor Space**: The renovation will provide new ground access to the building, including handicap access as well as same floor access to the elevator tower allowing direct access to the upper 4 floors. The design will employ the use of flexible space whenever possible, as well as provide an open concept environment for students, faculty, and staff to gather for education, training, interacting, eating, and holding meetings – where these spaces do not currently exist in the college.

The renovated 1st floor lobby will feature new student services and lead faculty undergraduate program offices, collaborative gathering areas for the entire college, and serve as a space for students to connect and convene scheduled and impromptu study groups. Such a space will not only support classroom and lecture spaces, but also will be available space for student break-out sessions. To support our research and practice missions, the renovation also will include a 600 square foot sub-dividable research/practice

hub. Finally, to promote CON workforce and student community/esprit de corps and engagement, and provide space to convene workshops, conferences and professional meetings, the renovation will include a 1,200 square foot multifunctional common area adjacent to a kitchen. To support in-person and remote/virtual participation in learning and professional development activities, the renovation will include state-of-the-art AV systems and technologies that support innovative education and learning.

JUSTIFICATION: The University Simulation Center has occupied the 1st floor of the CON building since approximately 2017; upon completion of the new MUSC Simulation Center moving to the Colbert Library this summer, this space will be returned to the CON. Therefore, this renovation represents new square footage to be utilized for the College of Nursing to support its education, research, and clinical missions.

Our main goal is to: Increase student learning space so that we have the ability to manage our current enrollment as well as increase student enrollment in our academic programs, particularly our on-campus ABSN program (from 120 to 160 per class cohort).

The college has reached maximum in-person capacity in our existing classrooms. As we look to expansion of our programs, having sufficient classroom and skills space is an essential step in making this a reality. The 1st floor renovated space will add a number of new flexible classrooms that vary in seat capacity with a maximum to 40, expand our skills lab space, and provide a number of new interactive student-centric learning spaces. The renovated largest new classroom will include a 1,750+ square foot flexible lecture-type hall that can be subdivided into smaller lecture rooms, plus two additional $375\pm$ square foot classrooms or combined to a single classroom. When open, the newest and largest classroom will accommodate a maximum of 40 new seats, allowing us the opportunity to increase ABSN enrollment across three large classrooms and 4 smaller flexible classrooms will accommodate 124 students on the 1st floor. The smaller classrooms can also be reconfigured to expand skills training space needed to accommodate an increase in number of students as well as provide an optimal teaching-learning environment which is not currently provided in the designated 3rd floor skills space. Having flexible learning space will allow our faculty to reconfigure the learning environment based upon courses, learning experiences and skills training, student needs and class sizes.

The College of Nursing (CON) has been strategic over the past 3 years in efforts to increase overall student program enrollment numbers. For example, we have invested in a full-time (1.0 FTE) student recruiter with the goal of maximizing enrollment across all academic programs. We have transitioned to using NursingCAS, a national on-line centralized application system, to aid in program awareness and recruitment of highly qualified applicants to all our programs. We have added two new academic programs including the first in the nation, post-masters' DNP in Palliative Care Across the Lifespan and a post-graduate Certificate program in Psychiatric Mental Health. Our overall student enrollment has increased by 8.7% since academic year (AY) 2018, with a 4% growth occurring between AY2020 and AY2021. The following table shows the growth trend over the past few years. We expect this number to continue to increase over the next few years as recruitment efforts into the Accelerated Bachelors of Science in Nursing (ABSN) and Doctor of Nursing Practice (DNP) programs are amplified in response to nursing workforce shortages; as the negative impacts of COVID-19 decrease and the nursing workforce begins to apply to secondary educational programs; and as the CON establishes and expands our capacity to increase enrollment and our educational partnerships with MUHA and MUSC affiliates.

	2018	2019	2020	2021
ABSN	361	355	353	386
RN-BSN*	42	34	28	26
DNP	224	278	282	276
MSN**	9	3	5	7
PMH Certificate	0	0	0	8
PhD***	32	28	30	23
Total	668	698	698	726

Total CON Enrollment, by Academic Program, 2018-2021

*The effects of COVID on the current nursing workforce has resulted in a decline in enrollment into the RN-BSN program.

**The CON stopped admitting directly into the MSN program in 2017, to align with the national call to have Advanced Practice Nurses enter the workforce at the doctoral level.

***Nationally, there has been a decline in applications into PhD nursing programs as DNP programs proliferated.

The college's continued efforts are in response to the current and predicted South Carolina nursing workforce shortage and part of CON's strategic efforts to support growth for the long-term success of the college. The additional classrooms, skills lab space, and many adaptable learning hubs described in the proposed renovation feasibility study, will allow us to provide the space needed to increase our current on-campus CON student learning environment from approximately 120 maximum to the proposed 160 per admitted cohort in the ABSN program alone. We currently admit twice per year to our ABSN program – this would allow us to increase admission by **80 students per year to our on-campus program**. In addition to the classroom and skills space, we would concomitantly require securing additional: a) clinical placement sites to accommodate required CCNE program learning outcomes, b) adjunct and clinical preceptors, and c) faculty and program support personnel. Specifically, the number of faculty needed to teach didactic, simulation and skills lab, and clinical increases proportionately in accordance to the SC Board of Nursing (SCBON) practice act requirements.

- For example, for every additional 8 ABSN* students enrolled, we need to hire 1 additional clinical instructor per clinical course/ section in Foundations, Med/Surg 1, Psych Mental Health, Pediatrics, Maternal Child, Public Health, Med/Surg 2 totaling 8 new faculty (note: hiring faculty where advanced practice certification is required for specialty courses, such as Psych Mental Health, Pediatrics, and Maternal Child Health, is more challenging).
- Similarly, we would need to secure additional: a) clinical placement sites for each cohort of 8-10 students for the same above courses plus Public Health, and clinical preceptors for capstone clinical experiences in Med/Surg 2.
- In sum, for 40 additional students per cohort (a total of 80 additional students admitted in Fall and Spring), this would require 3.0 FTE's in additional didactic faculty; 2.0 FTE's in Academic Support Team members; and 5.4 FTE's in clinical adjuncts.
- Additionally, 40 students per cohort would require 0.5 FTE for a new Program Coordinator to support student services needs for these additional students.
- The proposed renovation will provide additional office space for the above FTE's directly related to student's instruction and educational support.

*The above is intended as an example, applied only to our ABSN program; similar challenges impact our graduate practice program, but are based upon different SCBON requirements and specialty certifications.

Additionally, with the April 2021 endorsement and roll-out of the new American Association of Colleges of Nursing (AACN, 2021) Essentials, academic nursing is moving toward a new academic model and framework for bachelor's and graduate nursing education using a competency-based approach (https://www.aacnnursing.org/AACN-Essentials). Competency-based education focuses on skills-based training and learning assessments that ensure requisite and leveled competencies upon graduation and will require academic programs to create the necessary learning environments to meet these revised curriculum content standards within the next three years. To address these requirements, particularly as we look to increasing student enrollment in our ABSN program, an important goal of the proposed renovation is to provide additional and larger classroom as well as interactive spaces for learners to engage with one another and faculty, to practice and assimilate skills and complete assessments.

While the proposed renovation would increase ABSN enrollment by 40 students per cohort, we anticipate a conservative ramp-up period in the first two fiscal years after renovation to reach that maximum capacity; therefore, we project 10% annual growth until we reach maximum capacity.

Fiscal Year	Fall Cohort	Fall Increase	Spring Cohort	Spring Increase	Total Increase
FY24	132	12	132	12	24
FY25	145	25	145	25	50
FY26	160	40	160	40	80
FY27	160	40	160	40	80
FY28	160	40	160	40	80

ABSN Student Enrollment Projected Increases

Goal 2: Provide dedicated space within the college to support our strategic plan goals to promote belonging, enhance 'sense of community' and engagement among and across faculty, staff, and students.

Unfortunately, the last CON building renovation design (begun in 2012), did not provide space for interactive student-centric learning; sufficient and optimal skills learning space (the current space does not provide a sink for handwashing and preparation of skills, or adequate storage space for skills equipment and supplies); spaces for students between in-person classes to interact, eat, meet in small groups, or study in a quiet place prior to exams. Students are found sitting on the floor in hallways throughout the building as well as on windowsills. Students' program evaluations consistently identify that the college does not provide space that fosters a sense of community or belonging.

Similarly, these same concerns are expressed by faculty and staff, since there is virtually no space within the college, for them to leave their offices to engage and socialize with one another for lunch, small working meetings, etc. Generally, all classrooms and conference rooms throughout the building are booked throughout the day. In fact, most conference rooms throughout the building are presently being used for on-campus ABSN student testing, clinical pre and post conferences, and skills training, as social distancing guidelines were implemented in response to COVID. Faculty and staff have access to a small workroom on each floor, which also has a sink, refrigerator, and microwave – the *total* multi-purpose space is approximately 5,115 square feet, which is distributed throughout the building on the 2nd through the 5th floors.

Therefore, a key objective of the proposed renovation is to provide dedicated community space with the aim of building a strong sense of a college-wide community. Evidence supports that a sense of community cultivates synergy and elevates productivity in ways that will advance the vision and missions of the college. Toward that purpose, below is a list of goals for how this renovated space will integrate our missions and foster an engaged college community:

- Growth in the CON's academic programs is outpacing the learning environment. In addition to providing the necessary space for learner success, the renovated space would also facilitate the integration of more innovation in a student-centric learning model to include virtual reality training environments and other technology enhancements where appropriate. It is also intended to provide more adequate collaborative and work study spaces to support learner engagement across the educational trajectory.
 - The learning environment needs to align with educational delivery and be spacious enough to accommodate small group learning and interaction. The mode of teaching/learning has shifted from 'the sage on the stage'/passive learning to active learning through in-class, team-based application activities. Students are grouped in pods to accomplish team-based learning and real-time application of course concepts into patient care scenarios, followed by student presentations with class discussion.
- Additionally, the renovated space will include a large open seating area which will provide alternative community space options, such as tables/chairs with power charging stations, smaller spaces which may be used for more private meetings, a cyber-café, and where lockers will be available for students as well as visitors to the college. These community spaces will be adjacent to a new large dual-purpose kitchen, which will be student, faculty, and staff accessible for informal meetings, breaks and meals, and where they may engage with one another. These community spaces provide new opportunities for engagement and promote a sense of belonging across the entire college's team members and students.

Goal 3: Provide new dedicated but flexible office and multi-functional meeting room space to support our student support services (as we increase our on-campus ABSN enrollment in particular) as well as space for research and practice hubs that support networking, collaboration, and expanded translational research and clinical practice activities through tele-research pods, telehealth and tele-precepting. This space utilization is consistent with our current strategic plan mission and priority goals and objectives.

- The proposed renovated space, including classrooms, new skills area, and large and small meeting areas, will allow us to foster and support an expanded and mutually beneficial partnership with MUHA in order to provide a dedicated focus on competency-based education and training as well as to keep pace with technological innovations in health care. The nursing profession is predicated on lifelong learning; thus, learners encompass all individuals from pre-licensure nursing students (ABSN) through practicing acute or ambulatory care nurses and advanced practice providers (APRN's and DNP's) in all care settings.
- Therefore, the renovated space in the CON creates an opportunity for a strategic academic-clinical partnership for the CON and MUHA to develop and implement training programs that ensure that the MUHA nursing workforce maintains necessary competencies for providing quality clinical care through lifelong learning across the continuum from pre-licensure to practicing nurse. These training programs would create an opportunity for additional revenue.

• A renovated space will facilitate opportunities to provide education and training to MUSC nurses who serve in an adjunct clinical faculty role in the CON ABSN programs, particularly necessary as we increase the number of adjunct faculty needed to support the proposed increase in students enrolled.

The renovation will create dedicated modifiable spaces (where none exist at this time) to support practice hubs allowing us to expand clinical practice activities through community engagement, such as use of tele-precepting, used in monitoring our students in community-based courses and learning environments, as well as telehealth used by our DNP faculty. These examples aid in providing healthcare services to rural and underserviced South Carolinians, as well as support our proposed ABSN increase in student enrollment as well as our APRN students in each of our specialty tracks. Expanding practice activity also creates opportunity for additional revenue.

• The majority of the College's research is biobehavioral, and therefore engages patients, families, and caregivers as participants in on-going research studies. This requires space (which currently does not exist or is limited based on study needs), when telehealth is not appropriate, for direct study participant intake, participation and monitoring of the study intervention, and evaluation. In order to address this need, the renovation will therefore also create a research designated hub to support networking and collaboration that furthers the college's interprofessional and translational research mission and priorities and supports funded biobehavioral research project needs. Funded project needs include clinical study participant intake and exam rooms, meeting space for focus groups, study participant interviews, tele-research pods, and the designated space where research collaborators can come together to develop technology-enhanced interventions/applications, such as those being developed in the Technology Applications Center for Healthy Lifestyles, led by Dr. Ken Ruggiero, with the primary goal to reduce chronic disease health disparities affecting the health and well-being of South Carolinians. By designating space to facilitate and encourage research collaboration, with a focus on innovation, there is opportunity for future revenue through new funded projects as well as through intellectual property and technology transfer.

In summary, to adequately accommodate growth in student numbers, meet the Commission on Collegiate Nursing Education (CCNE) accreditation requirements for curriculum content, and support a pipeline of qualified nurses in South Carolina - all through innovative, competency-based training in a modern learning environment - it is imperative that our College strategically expand the utilization of existing space within our building. Addressing the above key goals is critical to not only our continued growth and sustainability in each of our tripartite mission areas (education, research, practice and community), but also in our ability to meet the growing health care needs of all South Carolinians.

FACILITIES ACADEMIC/RESEARCH ESTABLISH PROJECT FOR APPROVAL

DATE: April 8, 2022

PROJECT TITLE:	MUSC Campus Elevated Walkway Connector Bridges
PROJECT NUMBER:	TBD
TOTAL ESTIMATED BUDGET:	\$34,399,710
SOURCE(S) OF FUNDS:	\$24,079,797 – Building Resilient Infrastructure & Communities (BRIC) FEMA Grant
	\$10,319,913 – Non-NIH Federal Grants passed through State of South Carolina

SCOPE OF WORK: This project will construct an elevated connector bridge adjacent to Doughty Street from the 2nd floor of the Ashley River Tower to the 2nd floor of the Bioengineering Building. Connections from this Doughty Street bridge will also be made at the 2nd floors of the Thurmond Gazes Building and the Psychiatric Building. A separate connector bridge will be constructed from the 2nd floor of the College of Nursing Building to the 2nd floor of the Clinical Sciences Building. Once completed all major campus buildings will be connected at the 2nd floor level. This project will also relocate the existing underground swiss log tube system to the new connector bridge. This tube system is essential to hospital lab operations and is compromised by its underground location.

JUSTIFICATION: The Charleston Medical District is spread out over 80 plus acres and is located within the 100-year floodplain, specifically flood zone AE. The entire area is prone to flooding during storm events including hurricanes/tropical storms, heavy rain events, and sometimes even during normal high tide events. Once complete the elevated walkway project will allow patients, care team members, and supplies to move freely from building to building during storm and flood events. This project will connect the entire MUSC Health campus network and provide safe passage to any emergency rooms or adult Level 1 Trauma centers via the helipad located on top of the Sean Jenkins Children's Hospital. As South Carolina's only integrated academic health sciences center and MUSC Health's main campus which includes University Hospital, Ashley River Tower, and Shawn Jenkins Children's Hospital and Pearl Tourville Women's Pavilion, maintaining accessibility and operation for disaster response and recovery is imperative.

MEDICAL UNIVERSITY OF SOUTH CAROLINA BOARD OF TRUSTEES REGULAR AGENDA April 8, 2022

101 Colcock Hall

Members of the Board of Trustees

Dr. James Lemon, Chairman Mr. Charles Schulze, Vice-Chairman Ms. Terri R. Barnes The Honorable James A. Battle, Jr. Mr. William H. Bingham, Sr. Dr. W. Melvin Brown III Dr. Henry F. Butehorn III Dr. C. Guy Castles III Dr. Richard M. Christian, Jr. Dr. Paul T. Davis Dr. Donald R. Johnson II Ms. Barbara Johnson-Williams Dr. G. Murrell Smith, Sr. Mr. Michael E. Stavrinakis Thomas L. Stephenson, Esq. Dr. Bartlett J. Witherspoon, Jr.

Trustees Emeriti

Ms. Margaret M. Addison	Dr. Charles B. Thomas, Jr.
Mr. Allan E. Stalvey	Dr. James E. Wiseman, Jr.

ltem 1.	Call to Order	Dr. James Lemon Chairman
ltem 2.	Roll Call	Mark Sweatman Board Secretary
ltem 3.	Date of Next Meeting: May 20, 2022	Mark Sweatman Board Secretary
ltem 4.	Approval of Meeting Minutes	Dr. James Lemon Chairman

Approval of the meeting minutes from February 9, 2022, and February 11, 2022, are requested.

Recommendations and Informational Report of the President: Dr. David Cole

Item 5.	General Informational Report of the President	Dr. David Cole
		President
ltem 6.	Other Business	Dr. David Cole
		President

Research & Institutional Advancement Committee: Dr. Fritz Butehorn, Acting Chair

ltem 7.	Institutional Advancement Report Vice Preside	Kate Azizi ent for Institutional Advancement
ltem 8.	Office of Research Report	Dr. Lori McMahon Vice President for Research
ltem 9.	Update on Foundation for Research Development Board	Dr. Jesse Goodwin Chief Innovation Officer
ltem 9.1.	Other Committee Business	Dr. Fritz Butehorn Acting Committee Chair

Education, Faculty & Student Affairs Committee: Ms. Barbara Johnson-Williams, Chair

ltem 10.	Provost ReportDr. Lisa Saladin Executive Vice President for Academic Affairs and Provost
ltem 11.	Changes to Academic Tuition & Fees for FY2023Dr. Lisa Saladin Executive Vice President for Academic Affairs and Provost
ltem 12.	Other Committee BusinessBarbara Johnson-Williams Committee Chair

Finance and Administration Committee: Mr. Jim Battle, Chair

Item 13.	MUSC Financial Report Patrick Wamsley Chief Financial Officer, MUSC
ltem 14.	Major Purchase for ApprovalPatrick Wamsley Chief Financial Officer, MUSC
ltem 15.	South Carolina General Obligation Bonds for Approval Chief Financial Officer, MUSC
	A resolution authorizing the issuance of not exceeding \$20,000,000 of General Obligation State Institution Bonds will be presented for approval. The proceeds of the Bonds shall be applied to defray a portion of the costs associated with the construction of the new 75,000 SF College of Health Professions Academic Building; reimburse the University for expenses incurred in anticipation of the issuance of such bonds; and, to pay the costs of issuance of such bonds.
ltem 16.	MUSC Physicians Financial ReportEva Greenwood Chief Financial Officer, MUSC Physicians
ltem 17.	Other Committee BusinessJim Battle Committee Chair

Other Business for the Board of Trustees

ltem 18.	Approval of Consent AgendaDr. James Lemon Chairman
ltem 19.	Executive SessionDr. James Lemon Chairman
	Upon proper motion and vote, the Board may convene a closed session pursuant to SC Code Ann. §30-4-70. Although the Board will not vote on any items discussed in closed session, the Board may return to public session to vote on items discussed.
ltem 20.	New Business for the Board of TrusteesDr. James Lemon Chairman
ltem 21.	Report from the ChairmanDr. James Lemon Chairman

MUSC Board of Trustees Report Institutional Advancement Report March 2022

MHH H

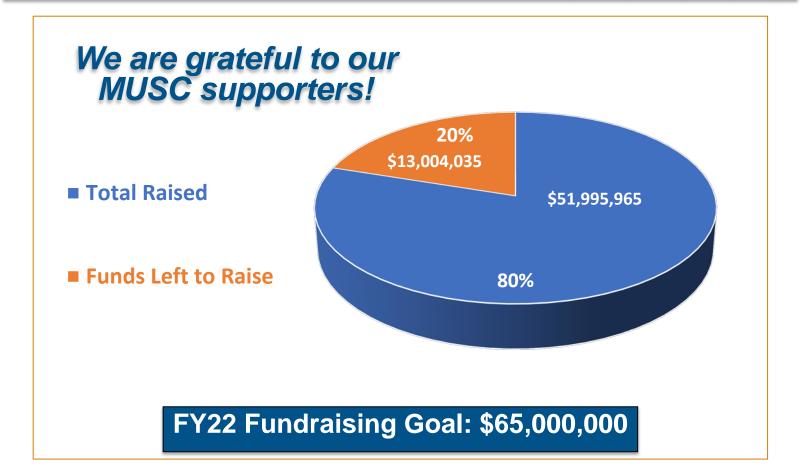
PISHING WESTER

MUSC Health



Changing What's Possible | MUSC.edu

Funds Raised FY22 to Date (as of March 17, 2022)



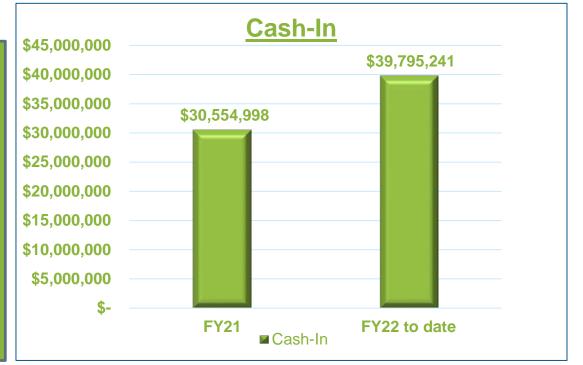


Cash into the MUSC Foundation *unreconciled data from February 28, 2022

We hit our FY22 Cash in Goal!

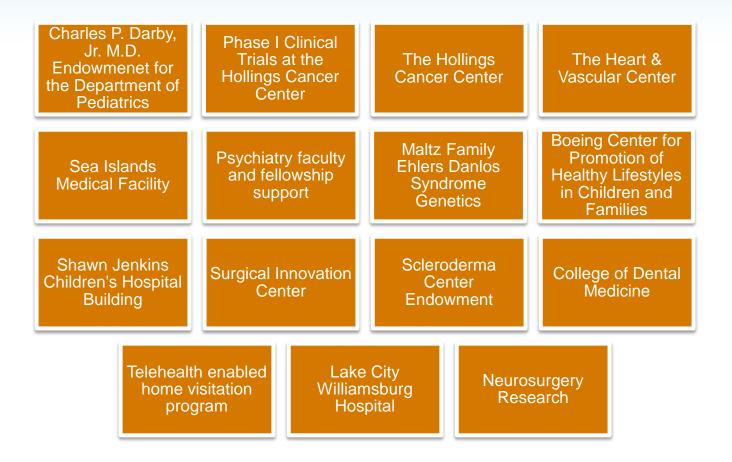
We have brought in \$9,240,243 more cash this year than last year so far!

This is a 30% increase over last year and this is only 8 months into the fiscal year!





MUSC Fundraising Impact (Gifts of 1M+ FY22 to Date)





Medical University of South Carolina								
	Overview of Proposed Schedule of Academic Charges for FY 2023							
College of Dental Medicine	5% tuition increase for Out-of-State Periodontics, MSD and Orthodontics, MSD							
College of Graduate Studies	1 fee decreased							
	New International tuition rate for Master of Science in Cardiovascular Perfusion							
	New program- Master of Genetic Counseling							
College of Health Professions	37% tuition decrease- In and Out-of-State Bachelor of Science in Healthcare Studies							
	1 fee decreased							
	2 new fees added for new Master of Genetic Counseling program							
College of Medicine	Fourth Year FLEX Curriculum .45% tuition decrease In-State .19% tuition decrease Out-of-State							
	1 fee decreased							
	* Per COM, beginning with the Class of 2021, the 4-year MD program costs have been locked at \$141,794 for in-state students and \$248,502 for out-of-state students. These rates are being tracked by class. Any fluctuation in a single year of the fee schedule represents an adjustment within a class's 4-year program costs in order to remain within the locked 4-year rates and to standardize rates across semesters.							
	15% tuition increase in Out of State Undergraduate- BSN Part Time							
College of Nursing	Added Part Time tuition for Undergraduate- RN-BSN							
	No Fee Changes							
	33% tuition decrease for Out-of-State Doctor of Pharmacy (Full and Part Time)							
	New International tuition rate for Doctor of Pharmacy							
College of Pharmacy	Tuition decrease for Out-of State PharmD/MSHI 26% Decrease- Fall Semester Second and Third Year 29% Decrease- Spring Semester Second and Third Year 28% Decrease- Fall Semester Fourth Year							
	Deleting Graduate Certificate Program in Clinical Pharmacy Deleting Out-of-State with Scholarship Tuition							
	1 fee deleted							

THE MEDICAL UNIVERSITY OF SOUTH CAROLINA Monthly Financial Reports Table of Contents For the Eight (8) Month Period Ended February 28, 2022

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Statement of Revenues, Expenses and Changes in Net Position For Affiliated Organizations	7

The Medical University of South Carolina and Affiliated Organizations

Statement of Net Position

As of February 28, 2022				Area Health Education Consortium		CHS velopment
		University				Company
Assets & Deferred Outflows						
Cash and Cash Equivalents	\$	431,048,345	\$	11,025,705	\$	-
Cash and Cash Equivalents - Restricted		31,748,083		-		683,413
State Appropriation Receivable		65,803,617		2,982,048		-
Student Tuition and Fees Receivable		2,040,176		-		-
Student Loan Receivable		11,639,184		-		-
Grants and Contracts Receivable		45,539,553		1,634		-
Capital Improvement Bond Proceeds Receivable		-		-		-
Capital Lease Receivable		-		-		5,269,973
Other Receivables		3,701,283		-		-
Investments		-		-		312,990
Prepaid Items		28,168,275		-		291,180
Capital Assets, net of Accumulated Depreciation		370,951,035		-		-
Due from Hospital Authority		7,999,134		-		-
Due from Other Funds		131,311,188		-		-
Bond Issue Costs				-		_
Derivative Instruments Fair Value / Deferred Outflows		-		-		_
Deferred loss on Debt Refinancing		19,490		_		47,635
Deferred Outflows-Pensions		43,288,893		_		-1,000
Deferred Outflows-OPEB		171,157,636				
Other Assets		-		_		_
	_		_			
Total Assets & Deferred Outflows	\$	1,344,415,892	\$	14,009,387	\$	6,605,191
Liabilities & Deferred Inflows	•	0 754 070	•		<u>^</u>	
Accounts Payable	\$	8,754,672	\$	-	\$	-
Accrued Payroll and Other Payroll Liabilities		21,066,501		-		-
Accrued Compensated Absences		31,891,281		205,450		-
Deferred Revenue		88,646,184		3,784,510		-
Retainages Payable		-		-		-
Long-Term Debt		144,678,920		-		5,450,000
Interest Payable		1,356,949		-		20,438
Deposits Held for Others		3,985,094		102,046		-
Due to Hospital Authority		-		-		-
Due to Other Funds		4,160,529		-		-
Federal Loan Program Liability		11,705,060		-		-
Derivative Instruments Fair Value / Deferred Inflows		-		-		-
Net Pension Liability		503,981,761		-		-
Net OPEB Liability		629,507,524				
Deferred Inflows-Pensions		5,839,132		-		-
Deferred Inflows ORER		51,818,978				
Deferred Inflows-OPEB		51,010,970				
Other Liabilities		44,671,260		-		-
	\$		\$	4,092,006	\$	5,470,438
Other Liabilities	\$	44,671,260	\$	4,092,006 9,917,381	\$	- 5,470,438 1,134,753

The Medical University of South Carolina

Budgeted Funds Comparison to Budget (Expenses Classified by Category)

For the period ending February 28, 2022

SRECNP Bottom Line

For the period ending February 28, 2022		Budget	в	Prorated udget (Note)		Actual		Variance	
Revenues									
Federal Grants & Contracts	\$	146,101,198	\$	97,400,799	\$	94,927,891	\$	(2,472,908)	U
Federal Grants Indirect Cost Recoveries		40,160,347		26,773,565		26,625,223		(148,342)	U
State Grants & Contracts		9,613,629		6,409,086		7,033,184		624,098	F
Private Grants & Contracts		30,399,388		20,266,259		22,775,689		2,509,430	F
Private Grants Indirect Cost Recoveries		5,400,344		3,600,229		4,009,755		409,526	F
Total Grants & Contracts		231,674,906		154,449,938		155,371,742		921,804	F
State Appropriations		119,466,076		79,644,051		79,591,563		(52,488)	U
Tuition and Fees		112,510,653		75,007,102		74,881,174		(125,928)	U
Pass-Through Revenues		118,009,537		78,673,025		67,661,922		(11,011,103)	U
Gifts		17,162,252		11,441,501		16,103,808		4,662,307	F
Transfers from (to) MUSC Physicians		91,669,459		61,112,973		59,119,422		(1,993,551)	U
Sales and Services of Educational Departments		18,855,778		12,570,519		11,888,849		(681,670)	
Sales and Services of Auxiliary Enterprises		14,622,507		9,748,338		8,375,516		(1,372,822)	U
Interest and Investment Income		21,702		14,468		10,297		(4,171)	U
Endowment Income		4,401,640		2,934,427		3,390,318		455,891	F
Miscellaneous		16,880,163		11,253,442		10,163,252		(1,090,190)	U
Miscellaneous - Residents		8,140,000		5,426,667		6,043,661		616,994	F
Authority Revenue		92,200,126		61,466,751		62,050,587		583,836	F
Authority Revenue - Residents		69,717,575		46,478,383		44,444,640		(2,033,743)	U
Intra-Institutional Sales		42,588,049		28,392,033		26,592,753		(1,799,280)	U
Total Other		726,245,517		484,163,680		470,317,762		(13,845,918)	
Total Revenues		957,920,423		638,613,618		625,689,504		(12,924,114)	U
Expenditures	•	~~~~~~~~~~	•	004 005 005	•		•	44 405 500	_
Salaries	\$	336,998,827	\$	224,665,885	\$	213,230,346	\$, ,	F
Miscellaneous Personnel Expenditures		5,011,011		3,340,674		4,264,446		(923,772)	
Fringe Benefits		133,909,134	^	89,272,756	*	85,122,424	*	4,150,332	F
Total Personnel		475,918,972	\$	317,279,315	\$		\$	14,662,099	F
Contractual Services	\$	165,546,428	\$	110,364,285	\$	93,020,654	\$, ,	F
Pass-through Expenditures		118,009,537		78,673,025		67,661,922		11,011,103	
Supplies		56,462,643		37,641,762		38,129,473		(487,711)	
Fixed Charges		54,092,026		36,061,351		36,560,400		(499,049)	
Equipment		8,913,903		5,942,602		5,072,595		870,007	
Travel		3,800,334		2,533,556		684,310		1,849,246	F
Trainee / Scholarships		21,575,690		14,383,793		19,558,610		(5,174,817)	
Other Expenses		6,519,084		4,346,056		1,743,134		2,602,922	
Debt Service		8,294,082	-	5,529,388	•	6,752,129	-	(1,222,741)	
Total Other		443,213,727	\$, ,	\$	269,183,227		26,292,591	
Total Expenditures Other Additions (Deductions)	\$	919,132,699	\$	612,755,133	\$	571,800,443	\$	40,954,690	F
Transfers from(to) Plant Funds		(56,846,519)		(37,897,679)		(40,515,521)		(2,617,842)	
Other Transfers		(30,840,319) 51,690		(37,097,079) 34,460		(40,313,321) (54,364)		(88,824)	
Prior Year Fund Balance Usage		28,170,406		18,780,271		(54,304) 16,054,237		(2,726,034)	
Total Other Additions (Deductions)	\$	(28,624,423)	¢	(19,082,948)	¢		¢		
NET INCREASE (DECREASE) in Fund Balance	<u>پ</u> \$	10,163,301		6,775,537	پ \$	<u>(24,515,648)</u> 29,373,413		(5,432,700) 22,597,876	
Non-Budgeted Items	<u> </u>	,, . .	<u>,</u>	, ,		,,*		, , 9	
Net Unfunded Pension Expense						1,014,283			
Net Unfunded OPEB Expense						(13,151,706)			
Depreciation						(23,673,391)			
Endowment Gains/Losses						3,605,390			
Gain (Loss) on Disposition of Property						(274,512)			
Other Non-Budgeted Items						26,818,673			
SPECNB Bottom Line						22,010,070			

23,712,151

The Medical University of South Carolina

Direct Expenditures on Federal Grants and Contracts (By Responsibility Center) For the 8 Month Period Ending February 28, 2022

Administration	2,311,452
College of Dental Medicine	988,912
College of Graduate Studies	1,517,782
College of Health Professions	5,326,835
College of Medicine	66,868,469
College of Nursing	2,266,603
College of Pharmacy	610,061
Hollings Cancer Center	1,687,120
Library	772,545
Office of Sponsored Programs	21,526
	\$82,371,305

NOTE: The federal direct expenditures shown above were incurred by the University. The federal grant and contract revenue earned to cover these direct expenditures. was \$82,371,305 .

In addition to this federal grant and contract revenue, the University received \$26,625,223 in federal monies to reimburse it for Facilites and Administration (F+A) costs incurred to administer the above federal grants and contracts. \$26,531,457 of the F+A recoveries received is unrestricted which means the University can use it for any of its operating needs. The remaining \$93,766 represents the F+A recoveries on non-research federal grants and contracts. This amount is required to be remitted to the State.

University direct federal expenditures	\$82,371,305
Facilites and Administration costs	\$26,625,223
Federal operating grants and contracts	\$108,996,528

THE MEDICAL UNIVERSITY OF SOUTH CAROLINA

NOTES TO THE FINANCIAL STATEMENTS February 28, 2022

Note 1. Basis of Presentation

This financial statement provides summarized information for The Medical University of South Carolina (MUSC) and its affiliated organizations in discrete columns on the same page. The purpose of this financial report is to provide information that will be helpful to those who must make decisions about MUSC.

Note 2. State Appropriations

State appropriations revenue is prorated evenly over the twelve month period for which the funds are to be spent.

Note 3. Cash and Cash Equivalents - Restricted

Cash and cash equivalents - restricted include bond proceeds, the debt service reserve accounts, and the debt service fund accounts.

Note 4. Capital Assets, Net of Accumulated Depreciation The University's capital assets, net of accumulated depreciation consists of the following:

Construction in progress\$ 30,943,778Projects in progress513,308Land/Bldgs/Equipment/Accumulated depreciation338,980,641

Capital Assets, Net of Accumulated Depreciation

Note 5. Construction in Progress

Construction in progress consists of the following projects and expenditures to date and is included in Capital Assets, Net of Accumulated Depreciation on the Statement of Net Position.

	J	un 30, 2021	Fiscal Y	ear	2022		F	eb 28, 2022
		Balance	Added		Capitalized			Balance
Psych Inst. Chiller #1 Replacement	\$	341,761	\$ 1,151,256	\$		-	\$	1,493,017
Energy Performance Contract		3,898,676	784,338			-		4,683,014
BSB Exterior Envelope Repairs		-	1,516,747					1,516,747
SEI Chiller Replacement		2,343,134	64,761			-		2,407,895
New College of Pharmacy Addition		7,171,858	13,072,144			-		20,244,002
HCC Mechanical Systems		1,129,846	1,697,193			-		2,827,039
BSB AHU #4 and #4A Replacement		38,704	1,335,301			-		1,374,005
Others less than \$1,000,000 (ending balance)		840,007	(4,441,948)			-		(3,601,941)
Total construction in progress	\$	15,763,986	\$ 15,179,792	\$		-	\$	30,943,778

370,437,727

\$

Note 6. Deferred Revenue

The University's deferred revenue consists of the following:

State appropriations	\$ 44,791,923
Grants and contracts	19,344,443
Student tuition and fees	21,541,004
Other	 2,968,814
Total Deferred Revenue	\$ 88,646,184

THE MEDICAL UNIVERSITY OF SOUTH CAROLINA

NOTES TO THE FINANCIAL STATEMENTS February 28, 2022

Note 7. Long Term Liabilities

The University's long term liabilities consist of the following:

Obligations under capital leases	\$ 44,123,077
Higher Ed Refunded Revenue bond payable	17,900,000
State Institution bonds payable	44,895,000
Energy Performance Note Payable	29,746,015
Premium on State Institution bonds payable	7,061,402
Premium on Refunding Revenue Bonds	 953,426
Total Long Term Liabilities	\$ 144,678,920

Note 8. Summary of Net Position

The University implemented GASB Statement No. 68, *Accounting and Financial Reporting for Pensions* in fiscal year 2015 and GASB Statement No. 75, *Accounting and Financial Reporting for Post Employment Benefits Other Than Pensions (OPEB)* in fiscal year 2018. These statements require participating employers to report their proportionate share of the plans' net pension liability and OPEB liabilities, pension and OPEB expense and deferred outflows and inflows. In fiscal year 2021, excluding the GASB 68 and GASB 75 impact, the University's unrestricted net position increased \$2.3 million for a total of \$160.6 million. In fiscal year 2020, excluding the GASB 68 and GASB 75 impact, the University's net position decreased \$7.1 million for a total of \$158.3 million. In fiscal year 2019, excluding the GASB 68 and GASB 75 impact, the University's unrestricted net position increased \$28.2 million for at total of \$165.4 million. In fiscal year 2018, excluding the GASB 68 and GASB 75 impact, the University's unrestricted net position increased \$0.6 million for a total of \$137.2 million.

	Per annual CAFR					
		FY2021	FY2020	FY2019	FY2018	
Net investment in capital assets	\$	256,273,784 \$	273,745,547 \$	290,960,785 \$	318,787,398	
Restricted						
Nonexpendable		93,450,804	92,884,333	91,997,286	91,314,812	
Expendable		172,064,021	119,736,905	113,211,622	99,701,424	
Unrestricted (exclusive of GASB 68 and 75 liabilities)		160,633,515	158,323,021	165,423,830	137,210,133	
Unrestricted (including GASB 68 and 75 liabilities)		(908,652,076)	(868,396,874)	(841,631,771)	(812,662,227)	
Total net position	\$	(226,229,952) \$	(223,707,068) \$	(180,038,248) \$	6 (165,648,460)	

Medical University of South Carolina Summary of Current Debt Obligations

(\$\$ in thousands)

	Original Issue	Purpose	Outstanding & Authorized as of 28-Feb-2022
State Institution Bonds (SIB)			
SIB 2011D	18,950	Deferred maintenance projects	-
SIB 2012B refunding	12,645	Refunding SIB 2001C, 2003D, & 2003J	2,420
SIB 2016D	30,095	Refunding SIB 2001C, 2003D, & 2003J	19,060
		Refunding SIB 2011D & to fund construction	า
SIB 2021D	23,415	of capital projects	23,415
	\$ 146,150		
Current SIB Debt Authorized and	Issued		\$ 44,895
Notes Payable - JEDA	\$ 32,985	Construction of College Health Health Profession facilities	\$ 5,450
Refunding Revenue Bonds, Serie 2017	s 2017 \$ 25,115	Refunding of Higher Ed Revenue Bonds	\$ 17,900
Energy Performance Note Payabl EPNP 02-27-19	e \$30,000	Energy Savings	\$ 29,746

MUSC Affiliated Organizations

Statement of Revenues, Expenses and Changes in Net Position

For the Eight (8) Month Period Ending February 28, 2022

For the Eight (8) Month Period Ending February 28, 2022	Area Health Education Consortium	CHS Development Company
Operating Revenues		
Student Tuition and Fees	\$ -	\$-
Federal Grants and Contracts	494,449	-
State Grants and Contracts	(17,649)	-
Local Government Grants and Contracts	-	-
Nongovernmental Grants and Contracts	50,000	-
Sales and Services to Hospital Authority	130,000	-
Sales and Services of Educational and Other Activities	-	-
Sales and Services of Auxiliary Enterprises	-	-
Interest Income	-	199,054
Other Operating Revenues	64,691	
Total Operating Revenues	721,491	199,054
Operating Expenses		
Compensation and Employee Benefits	2,014,153	-
Pension Benefits		
OPEB Expense		
Services and Supplies	1,486,626	-
Utilities	-	-
Scholarships and Fellowships	3,200	-
Refunds to Grantors	-	-
Interest Expense	-	120,399
Depreciation and Amortization		104,233
Total Operating Expenses	3,503,979	224,632
Operating Income (Loss)	(2,782,488)	(25,578)
Nonoperating Revenues (Expenses)		
State Appropriations	7,569,020	-
State Appropriations - MUHA	-	-
Gifts and Grants Received	-	-
Investment Income	-	-
Interest Expense	-	-
Gain (Loss) on Disposal of Capital Assets	-	-
Transfers From (To) Other State Agencies	-	-
Other Nonoperating Revenues (Expenses), net		
Net Nonoperating Revenues (Expenses)	7,569,020	
Income (Loss) Before Other Revenues, Expenses, Gains, Losses and Transfers	4,786,532	(25,578)
Capital Appropriations	-	-
Capital Grants and Gifts	-	-
Additions to Permanent Endowments	-	-
Transfers From (To) MUSC Physicians (UMA)	-	-
Transfers From (To) AHEC	697	-
Transfers From (To) CHS Development	-	3,722
Transfers From (To) Facilities Corporation		
Increase (Decrease) In Net Position	\$ 4,787,229	\$ (21,856)

ACADEMIC MAJOR PURCHASE FOR BOARD OF TRUSTEES APPROVAL APRIL 8, 2022

Description of Purchase: timsTOF flex LC-MS System to include Imaging StarterKit SpatialOMx as well as SW-License SCiLS Pro Acad

Estimated Cost of Purchase: This purchase is a 5-year lease to own the equipment. Total cost of \$979,468; plus estimated annual maintenance of \$30,000 not included in purchase price. First lease payment of \$325,000 due immediately on order and \$106,600 due 30 business days upon receipt of invoice every July starting July 2022. Last payment will be \$228,068 due July, 2026.

Requisition Number: 155187687

Department Name(s) and UDAK numbers(s):

Department of Cell and Molecular Pharmacology & Experimental Therapeutics

Proteomics SmartState Mehta Proteomics Center of Economic Excel Drake F&A Recovery Mehta Expendable Funds Proteomics Center

MUCR 22510008B295992388
MUCR 226000086659992388
MUCU 2251000233724525
MUCU 2251000264575125

Department Contact Person: Kolette Thomas

Name of Procurement Specialist: Sarah Wall

Method of Purchase: Sole Source

Vendor Name (If Sole Source): Bruker Scientific, LLC

New Purchase <u>X</u> Yes No

New Contract for Existing Services? Yes X No

Extension of Existing Contract?_____Yes_X_No

 Replacement of Existing Item(s)
 X
 Yes
 No

Name of Item(s) Being Replaced: RapifleX MALDI-TOF MS System

Name and Value of Equipment the Requested Purchase Will Be Used in Conjunction With: NA

How Will This Purchase Benefit MUSC: The timsTOF flex mass spectrometer will be used to support ongoing as well as new research projects; therefore, it must have capabilities that are capable with the RapifleX TissueTyper MALDI-TOF mass spectrometer that is currently being used by MUSC researchers. Other key requirements of the system are a MALDI imaging capability combined with the Trapped ion Mobility Separation (tims) and a high resolution QTOF that operates on a single integrated platform. Further, a key requirement is software compatibility with existing data acquisition, analysis and storage capabilities used within the research group.

The RapifleX instrument currently being used by researchers is nearing its limit of functionality due to its high-volume use and sensitivity capabilities. While the RapifleX provides a high-speed MALDI imaging platform, the timsTOF fleX would provide a high-speed imaging platform with increased sensitivity and resolution capabilities, furthering the research efforts and limiting instrument backlog. Thus, the purchase of the timTOF flex instrument is critical in order to maintain the continuity of the research now being conducted.

Why and How This Purchase Will Benefit MUSC By Having a Vendor Provide This Service Vs. MUSC Staff Providing the Service: Bruker Scientific LLC is the sole provider for the timTOF flex LC-MS System.

Academic

Financial Information

Major Purchases Board of Trustees' Approval April 7-8, 2022

Item to be approved for Purchase: lease to own of timsTOF flex LC-MS System to include Imaging StarterKit SpatialOMx and SW-License SCiLS Pro Acad (1yr)

1. Source of Revenue/Savings:

There is a discount of \$199,932 on the quote bringing the price down significantly. Savings will be realized due to the data efficiency of the new equipment.

2. Amount of Revenue/Savings to be generated:

Having this equipment will increase the throughput of sample analysis and make MUSC much more competitive for new and additional funding.

3. Initial cost:

- **a.** Item: \$979,468 lease to own over 5 years; \$325,000 due upon order and \$106,600 due July 2022 through July 2025; \$228,068 due July 2026. The initial payment of \$325,000 is covered by Dr. Mehta's SmartState, F&A and Expendable project. The remaining July payments will be split between Drs. Mehta and Drake's SmartState projects.
- b. Physical Plant Requirements (renovations): none
- 4. Annual costs maintenance approximately \$30,000
- 5. No additional personnel
- 6. **Financial analysis:** Lease to own total price \$979,468 with first lease payment of \$325,000 due immediately on order and \$106,600 are due 30 business days upon receipt of invoice every July starting July 2022. The last lease payment will be \$228,068 due July 2026.

Funding sources:

Smarstate Mehta	8B295-88	\$522,429
Smartstate Drake	86659-88	\$327,234
F&A	23372	\$48,520
Expendable Project	26457	\$81,285

RESOLUTION

REQUESTING THE ISSUANCE OF NOT EXCEEDING TWENTY MILLION DOLLARS (\$20,000,000) OF GENERAL OBLIGATION STATE INSTITUTION BONDS FOR THE MEDICAL UNIVERSITY OF SOUTH CAROLINA PURSUANT TO CHAPTER 107, TITLE 59, CODE OF LAWS OF SOUTH CAROLINA 1976, AS AMENDED

Adopted by

BOARD OF TRUSTEES OF THE MEDICAL UNIVERSITY OF SOUTH CAROLINA

April 8, 2022

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A RESOLUTION

REQUESTING THE ISSUANCE OF NOT EXCEEDING TWENTY MILLION DOLLARS (\$20,000,000) OF GENERAL OBLIGATION STATE INSTITUTION BONDS FOR THE MEDICAL UNIVERSITY OF SOUTH CAROLINA PURSUANT TO CHAPTER 107, TITLE 59, CODE OF LAWS OF SOUTH CAROLINA 1976, AS AMENDED

BE IT RESOLVED BY THE BOARD OF TRUSTEES OF THE MEDICAL UNIVERSITY OF SOUTH CAROLINA IN A MEETING DULY ASSEMBLED:

SECTION 1. <u>Findings of Fact.</u> As an incident to the adoption of this Resolution, the Board of Trustees of The Medical University of South Carolina (the "Board of Trustees"), the governing body of The Medical University of South Carolina (the "University") hereby finds and determines as follows:

(a) This Resolution is adopted by the Board of Trustees pursuant to Title 59, Chapter 107, Code of Laws of South Carolina 1976, as amended (the "Enabling Act").

(b) Pursuant to Section 59-107-40 of the Enabling Act, the Board of Trustees is authorized to make application to the South Carolina State Fiscal Accountability Authority (the "State Authority") for the issuance of General Obligation State Institution Bonds ("State Institution Bonds"), the proceeds of which may be used: (i) to construct, equip and furnish a sixstory, approximately 75,000 square foot building and related improvements on the University's campus (the "Project," as such term is more particularly described in paragraph (c) of this Section 1); (ii) to reimburse the University for expenses incurred in anticipation of the issuance of such bonds; and (iii) to pay the costs of issuance of such bonds.

(c) The Board of Trustees has determined that, in order to accommodate the growth in student numbers and programs, the need for the Project exists, and is anticipated to be used for general University purposes and by the University's College of Health Professions, and will include space for classrooms, office and support space for University faculty and staff, research space, as well as an elevated pedestrian bridge connecting the building to the existing Bioengineering building.

(d) The University estimates that the total cost of the Project will be approximately \$40,000,000. In order to fund a portion of the projected costs of the Project, and taking into account certain other sources, the Board of Trustees desires to make application to the State Authority to issue not exceeding Twenty Million Dollars (\$20,000,000) aggregate principal amount of General Obligation State Institution Bonds (Issued on Behalf of The Medical University of South Carolina) of the State of South Carolina (the "Bonds") pursuant to the Enabling Act, on the basis that a definite and immediate need exists for constructing and furnishing the Project, and therefore for issuing such Bonds. The proceeds of the Bonds shall be applied to defray a portion of the costs of the Project, reimburse the University for expenses incurred in anticipation of the issuance of the Bonds, and to pay the costs of issuance of the Bonds.

(e) Accordingly, this Resolution is adopted pursuant to Section 59-107-40 of the Enabling Act, in order to make formal application to the State Authority for the issuance of the Bonds, the proceeds of which will be used for the purposes set forth in paragraph (d) of this Section 1.

SECTION 2. <u>Application for Issuance of State Institution Bonds.</u> The Board of Trustees hereby makes formal application to the State Authority for funds through the issuance, on or after July 1, 2022, of the Bonds pursuant to the provisions of the Enabling Act, in order that the proceeds thereof may be used for the purposes set forth in paragraph (d) of Section 1 hereof.

SECTION 3. <u>Tuition Fees Received in Previous and Current Fiscal Years.</u> Based on tuition fees as defined in the Enabling Act (a) for the fiscal year July 1, 2020 through June 30, 2021, tuition fees available to pay debt service on State Institution Bonds amounted to the sum of \$5,338,417, and (b) for the current fiscal year July 1, 2021 to the date of adoption of this Resolution, tuition fees available to pay debt service on State Institution Bonds amounted to \$7,155,306.

SECTION 4. <u>Current Schedule of Tuition Fees.</u> The schedule of tuition fees, as defined in the Enabling Act and as now in effect at the University, is as set forth as <u>Exhibit A</u> to this Resolution, which schedule is hereby reaffirmed and approved.

SECTION 5. <u>Maturity Schedule for Bonds.</u> The suggested maturity schedule for the Bonds requested to be issued pursuant to this Resolution is set forth as <u>Exhibit B</u> to this Resolution. Said <u>Exhibit B</u> assumes that the principal amount of the Bonds will be \$20,000,000.

SECTION 6. <u>Debt Service on Outstanding State Institution Bonds.</u> A statement showing all State Institution Bonds heretofore issued on behalf of the University now outstanding and not defeased, together with the annual interest and principal payments to become due thereon, is set forth as <u>Exhibit C</u> to this Resolution.

SECTION 7. <u>Debt Service on Outstanding Bonds Including Bonds Authorized Hereby.</u> A table showing debt service on all State Institution Bonds to be outstanding for the University following the issuance of the Bonds (at an assumed principal amount of the Bonds of \$20,000,000 and at prevailing rates of interest) is set forth as <u>Exhibit D</u> to this Resolution. Upon the issuance of the Bonds, the maximum annual debt service on all State Institution Bonds secured by tuition fees of the University may not be greater than 90% of the tuition fees received by the University for the preceding fiscal year.

A calculation establishing the right of the University to seek the issuance of Bonds to the extent set forth in this Resolution is set forth as $\underline{\text{Exhibit } E}$ to this Resolution.

SECTION 8. Request for Issuance of Bonds and Bond Anticipation Notes.

(a) The State Authority is requested to make the findings required by the Enabling Act and to request the Governor and the State Treasurer to provide for the issuance of the Bonds by the State of South Carolina (the "State"). If the State Treasurer should determine that all or a portion of the proceeds needed to defray the costs of the Project should be funded by the issuance of bond anticipation notes (the "Notes") pursuant to Chapter 17, Title 11 of the Code of Laws of South Carolina 1976, as amended (the "BAN Act") rather than the Bonds and that the issuance of the Notes would be in the best interest of the State under prevailing market conditions or, in light of the subsequent borrowings necessary to finance the completion of the Project, would be more efficient than issuing Bonds at this time, the Governor and the State Treasurer are further requested to effect the issuance of Notes pursuant to the BAN Act. If Notes are issued and if, upon maturity thereof, the State Treasurer should determine that further issuance of Notes rather than the Bonds would be in the best interest of the State under prevailing market conditions, the Governor and the State Treasurer are requested to continue the issuance of Notes, in a principal amount not to exceed \$20,000,000 until the Governor and the State Treasurer determine to issue the Bonds on the basis as aforesaid, and the Bonds are issued.

(b) The Board of Trustees hereby covenants and agrees that the University will, and hereby directs the President and the Secretary to the Board of Trustees of the University to deposit and designate sufficient tuition fees during each fiscal year to satisfy the requirement that debt service on all State Institution Bonds issued on behalf of the University (including the Bonds herein requested) shall not exceed 90% of such tuition fees so deposited and designated. The President and the Secretary of the Board of Trustees are hereby authorized to certify the amount so deposited and designated to the State Authority. In the event this application is submitted to the State Authority, or the Bonds herein requested are delivered, in a fiscal year subsequent to the fiscal year in which this Resolution is adopted, the request herein made is expressly conditioned on such certification being made and showing that debt service on all State Institution Bonds issued on behalf of the University (including the Bonds herein requested) does not exceed 90% of such tuition fees so deposited and designated.

SECTION 9. <u>Covenant to Impose Tuition Fees Sufficient to Pay Bonds</u>. The Board of Trustees hereby covenants and agrees that the schedule of tuition fees now in effect at the University will be revised from time to time and whenever necessary in order to provide the annual principal and interest requirements of all State Institution Bonds now or hereafter to be outstanding, which have been or will be issued on behalf of the University.

SECTION 10. <u>Tax Covenants.</u> To the extent that the State Authority provides for the issuance of Bonds on a federally tax-exempt basis, the University will covenant as follows:

(a) <u>Federal Guarantee Prohibition.</u> The University shall not take any action or permit or suffer any action to be taken if the result of the same would be to cause the Bonds to be "federally guaranteed" within the meaning of Section 149(b) of the Internal Revenue Code of 1986, as amended (the "Code"), and regulations promulgated thereunder (the "Regulations").

Private Business Limitation. The University shall ensure that (i) not in excess of 10% of (b) the amount actually or constructively received from the sale of the Bonds, together with the investment earnings thereon ("Net Proceeds"), is used directly or indirectly in a trade or business carried on by a natural person or in any activity carried on by a person other than a natural person, excluding, however, use by a state or local governmental unit and use as a member of the general public but not use by the federal government of the United States of America or any agency or instrumentality thereof ("Private Business Use"), if, in addition, the payment of more than ten percent of the principal or ten percent of the interest due on the Bonds during the term thereof is, under the terms thereof or any underlying arrangement, directly or indirectly, secured by any interest in property used or to be used for a Private Business Use or in payments in respect of property used or to be used for a Private Business Use or is to be derived from payments, whether or not to the State, in respect of property or borrowed money used or to be used for a Private Business Use; and (ii) in the event that both (a) in excess of five percent of the Net Proceeds are used for a Private Business Use, and (b) an amount in excess of five percent of the principal or five percent of the interest due on the Bonds during the term thereof is, under the terms thereof or any underlying arrangement, directly or indirectly, secured by any interest in property used or to be used for said Private Business Use or in payments in respect of property used or to be used for said Private Business Use or is to be derived from payments, whether or not to the State, in respect of property or borrowed money used or to be used for said Private Business Use, then said excess over said five percent of Net Proceeds used for a Private Business Use shall be used for a Private Business Use related to the governmental use of a portion of the facilities financed with the proceeds of the Bonds and shall not exceed the proceeds used for the governmental use of the portion of the undertaking to which such Private Business Use is related.

(c) <u>Private Loan Limitation.</u> The University shall ensure that not in excess of the lesser of (i) \$5,000,000 or (ii) 5% of the Net Proceeds will be used, directly or indirectly, to make or finance a loan to persons other than state or local government units.

(d) <u>No Arbitrage.</u> The University represents that it does not expect any portion of the proceeds of the Bonds to be used directly or indirectly to acquire higher yielding investments, or to replace funds which were used directly or indirectly to acquire higher yielding investments for other than a "temporary period" as defined in the Code and the Regulations. The University further covenants that it will not intentionally use any portion of the proceeds of the Bonds to acquire higher yielding investments or to replace funds which were used directly or indirectly to acquire higher yielding investments or to replace funds which were used directly or indirectly to acquire higher yielding investments. In making the foregoing representation and covenant, the University understands and intends that words or phrases contained herein have meanings provided therefor under Section 148 of the Code and under the Regulations.

SECTION 11. Secretary to Present Resolution to State Authority. The Secretary to the Board of Trustees is hereby directed to present a certified copy of this Resolution, together with the Exhibits and any certification required by Section 8 to this Resolution, to the State Authority as evidence of the Board of Trustees' formal request for the issuance of the Bonds on behalf of the University, and as evidence that all conditions precedent to the issuance of such Bonds have been met prior to the issuance of the Bonds. The date of application for purposes of the Enabling Act shall be such date as this Resolution and any certificate required by Section 8 hereof is submitted to the State Authority.

SECTION 12. Execution of Closing Documents and Certificates. The Chairman of and the Secretary to the Board of Trustees, and all other officers of the University, are fully authorized and empowered to take such further action and to execute and deliver such closing documents as may be necessary and proper in order to complete the borrowing herein authorized and the action of such officers or any one or more of them in executing and delivering any of such documents in such form as he or they shall approve, is hereby fully authorized. In particular, such officers of the University are authorized to abide by covenants made by or on behalf of the State Authority in connection herewith relating to Sections 9 and 10 hereof or relating to Rule 15c2-12 of the United States Securities and Exchange Commission or relating to Section 11-1-85 of the Code of Laws of South Carolina 1976, as amended.

SECTION 13. <u>Reimbursement Declaration</u>. The University hereby declares its intention to reimburse itself for a portion of the costs of the Project with the proceeds of the Bonds or the Notes, as the case may be, requested to be issued herein. To that end, the Board of Trustees determines and declares as follows:

(a) no funds from any sources other than the Bonds or the Notes, as the case may be, are, or are reasonably expected to be, reserved, allocated on a long-term basis or otherwise set aside by the University pursuant to the budget or financial policies of the University for the financing of the portion of the costs of constructing, equipping and furnishing the Project to be funded with the Bonds or the Notes, as the case may be;

(b) the University reasonably expects that all or a portion of the expenditures incurred for the Project and the issuance of the Bonds or the Notes, as the case may be, will be paid prior to the issuance of the Bonds or the Notes, as the case may be;

(c) the University intends and reasonably expects to reimburse itself for all such expenditures paid by it with respect to the Project prior to the issuance of the Bonds or the Notes, as the case may be, from the proceeds of the Bonds or the Notes, as the case may be, and such intention is consistent with the budgetary and financial circumstances of the University;

(d) all of the costs to be paid or reimbursed from the proceeds of the Bonds or the Notes, as the case may be, will be for costs incurred in connection with the issuance of the Bonds or the Notes, as the case may be, or will, at the time of payment thereof, be properly chargeable to the capital account of the Project (or would be so chargeable with a proper election) under general federal income tax principles; and

(e) this Resolution shall constitute a declaration of official intent under United States Department of the Treasury Regulation Section 1.150-2.

SECTION 14. <u>Law and Place of Enforcement of this Resolution</u>. This Resolution shall be construed and interpreted in accordance with the laws of the State. All suits and actions arising out of this Resolution shall be instituted in a court of competent jurisdiction in the State.

SECTION 15. <u>Effect of Section Headings.</u> The heading or titles of the several Sections hereof are solely for convenience of reference and shall not affect the meaning, construction, interpretation or effect of this Resolution.

SECTION 16. <u>Repeal of Inconsistent Resolutions</u>. All resolutions of the Board of Trustees, and any part of any resolution, inconsistent with this Resolution are hereby repealed to the extent of such inconsistency.

SECTION 17. <u>Effectiveness of this Resolution</u>. This Resolution shall become effective upon its adoption.

Done in meeting duly assembled this 8th day of April 2022.

BOARD OF TRUSTEES OF THE MEDICAL UNIVERSITY OF SOUTH CAROLINA

(SEAL)

Chairman

Attest:

Secretary

EXHIBIT A

THE MEDICAL UNIVERSITY OF SOUTH CAROLINA SCHEDULE OF TUITION FEES IN EFFECT FOR PURPOSES OF SECTIONS 59-107-10 <u>ET SEQ</u>., CODE OF LAWS OF SOUTH CAROLINA 1976, AS AMENDED

Set forth below are the tuition and fees charged by each of the Academic Division's Colleges for resident and non-resident students for the 2021-2022 academic year (excluding the summer term) on an annual basis (except as shown):

Dental Medicine	In-State ¹	Out-of-State ¹
Doctor of Dental Medicine	\$17,150	\$30,000
Dental Scientist Training Program	7,905	7,905
Master of Science in Dentistry - Endodontics	20,338	20,338
Master of Science in Dentistry – Periodontics	3,218	3,716
Master of Science in Dentistry - Orthodontics	3,218	3,716
Master of Science in Dentistry – Digital Dentistry	20,167	20,167
Master of Science in Oral Science	10,285	12,730
Waster of Science in Oral Science	10,285	12,750
Graduate Studies		
Master of Science in Biomedical Sciences	\$ 6,752	\$9,484
Master of Science in Clinical Research	6,887	10,538
Master of Science in Medical Sciences	7,025	10,538
	,,,==0	10,000
Ph.D. Program	7,954	10,686
Health Professions		
Bachelor of Science in Healthcare Studies	\$7,736	\$7,736
Cardiovascular Perfusion	8,149	12,831
Doctor of Nurse Anesthesia Practice - Post-Masters	7,724	7,956
Doctor of Nurse Anesthesia Practice - Post-Baccalaureate	7,724	11,397
Doctor of Mulse Anesthesia Hachee 1 ost Daccalaureate	7,724	11,577
Master in Health Administration-Executive	8,525	9,682
Master in Health Administration-Residential	8,525	12,828
Master of Science in Health Informatics	8,525	8,525
Master of Science in Speech Pathology	8,349	12,465
Master of Science in Physical Assistant Studies	8,274	14,787
Doctor of Health Administration – Health Professional	10,290	10,290
Doctor of Health Administration - Health Administrator	10,290	10,290
Doctor of Health Administration –Interprofessional	6,958	6,958
Doctor of Health Administration- Information Systems	6,958	6,958
Ph. D. in Health and Rehabilitation Science	6,202	6,569
Doctor of Physical Therapy	8,142	12,280
Doctor of Occupational Therapy	8,346	12,465
Medicine		
First Year	\$12,500	\$22,283
Second Year ²	10,800	19,333
Third Year	14,533	24,000
Fourth Year	14,186	25,875

Master of Public Health	6,752	10,538
Nursing		
Undergraduate-BSN	\$ 7,811	\$14,092
Undergraduate-RN-BSN	5,480	5,926
Graduate – DNP	8,116	10,542
Graduate & Ph.D.	8,116	10,332
Pharmacy		
Doctor of Pharmacy-First, Second, Third Years	\$13,413	\$20,028
Doctor of Pharmacy-Fourth Year	11,691	17,505
Doctor of Pharmacy/Master of Science in Health Informatics		
(PharmD/MSHI) – Second & Third Year ²		
Fall Term	18,603	25,926
Spring Term	16,008	22,977
– Fourth Year	14,286	20,454
Graduate Certificate Program in Clinical Pharmacy	55,125	55,125

For the fiscal year ended June 30, 2021, the amount of receipts designated as tuition for state institution bonds purposes was not less than the sum of \$5,338,417. The tuition and fees generated for the 2021 summer term are not included.

For the fiscal year July 1, 2021 to the date of adoption of this Resolution, the amount of receipts designated as tuition for state institution bonds purposes was not less than the sum of \$7,155,306.

The maximum principal and interest debt service payment prior to the issuance contemplated herein is \$4,789,075, which occurs in the fiscal year ending June 30, 2023.

The maximum principal and interest debt service payment after the issuance contemplated herein is anticipated to be \$6,199,474*, which is anticipated to occur in the fiscal year ending June 30, 2024.

^{*} Preliminary, subject to change.

¹All tuition per semester unless otherwise noted

² Annual tuition

EXHIBIT B

THE MEDICAL UNIVERSITY OF SOUTH CAROLINA PRO-FORMA DEBT SERVICE REQUIREMENTS OF NOT EXCEEDING \$20,000,000 STATE OF SOUTH CAROLINA GENERAL OBLIGATION STATE INSTITUTION BONDS, COMPUTED AT PREVAILING RATES OF INTEREST

	New Issue D				
Fiscal Year Ending	 Principal		Interest	Tot	al Debt Service
June 30, 2023	\$ 750,000	\$	638,537	\$	1,388,537
June 30, 2024	780,000		636,199		1,416,199
June 30, 2025	795,000		618,727		1,413,727
June 30, 2026	815,000		600,124		1,415,124
June 30, 2027	835,000		580,320		1,415,320
June 30, 2028	855,000		559,445		1,414,445
June 30, 2029	880,000		537,386		1,417,386
June 30, 2030	900,000		514,066		1,414,066
June 30, 2031	925,000		489,586		1,414,586
June 30, 2032	950,000		464,148		1,414,148
June 30, 2033	980,000		437,453		1,417,453
June 30, 2034	1,010,000		407,171		1,417,171
June 30, 2035	1,040,000		373,639		1,413,639
June 30, 2036	1,080,000		337,239		1,417,239
June 30, 2037	1,120,000		297,819		1,417,819
June 30, 2038	1,160,000		255,595		1,415,595
June 30, 2039	1,205,000		210,587		1,415,587
June 30, 2040	1,255,000		162,628		1,417,628
June 30, 2041	1,305,000		111,550		1,416,550
June 30, 2042	1,360,000		57,392		1,417,392
Total	\$ 20,000,000	\$	8,289,608	\$	28,289,608

^{*} Preliminary, subject to change.

DEBT SERVICE REQUIREMENTS ON ALL STATE INSTITUTION BONDS ISSUED BY THE STATE OF SOUTH CAROLINA ON BEHALF OF THE MEDICAL UNIVERSITY OF SOUTH CAROLINA

Fiscal Year Ending	Principal			Interest	Total Debt Service			
June 30, 2022	\$	-	\$	-	\$	-		
June 30, 2023		3,040,000		1,749,075		4,789,075		
June 30, 2024		3,170,000		1,613,275		4,783,275		
June 30, 2025		2,445,000		1,475,650		3,920,650		
June 30, 2026		2,565,000		1,353,400		3,918,400		
June 30, 2027		2,705,000		1,225,150		3,930,150		
June 30, 2028		2,835,000		1,089,900		3,924,900		
June 30, 2029		2,985,000		948,150		3,933,150		
June 30, 2030		3,105,000		824,900		3,929,900		
June 30, 2031		3,240,000		696,350		3,936,350		
June 30, 2032		2,190,000		561,950		2,751,950		
June 30, 2033		2,270,000		480,850		2,750,850		
June 30, 2034		2,355,000		396,550		2,751,550		
June 30, 2035		2,440,000		308,900		2,748,900		
June 30, 2036		2,530,000		217,900		2,747,900		
June 30, 2037		985,000		123,300		1,108,300		
June 30, 2038		1,010,000		93,750		1,103,750		
June 30, 2039		1,040,000		63,450		1,103,450		
June 30, 2040		1,075,000		32,250		1,107,250		
Total	\$	41,985,000	\$	13,254,750	\$	55,239,750		

SCHEDULE SHOWING PRO-FORMA TOTAL DEBT SERVICE REQUIREMENTS OF ALL GENERAL OBLIGATION STATE INSTITUTION BONDS ISSUED BY THE STATE OF SOUTH CAROLINA ON BEHALF OF THE MEDICAL UNIVERSITY OF SOUTH CAROLINA INCLUDING THE PROPOSED ISSUE OF TWENTY MILLION DOLLARS (\$20,000,000) OF GENERAL OBLIGATION STATE INSTITUTION BONDS COMPUTED AT PREVAILING RATES OF INTEREST

Fiscal Year Ending	Principal		 Interest	Total Debt Service		
June 30, 2022	\$	-	\$ -	\$	-	
June 30, 2023		3,790,000	2,387,612		6,177,612	
June 30, 2024		3,950,000	2,249,474		6,199,474	
June 30, 2025		3,240,000	2,094,377		5,334,377	
June 30, 2026		3,380,000	1,953,524		5,333,524	
June 30, 2027		3,540,000	1,805,470		5,345,470	
June 30, 2028		3,690,000	1,649,345		5,339,345	
June 30, 2029		3,865,000	1,485,536		5,350,536	
June 30, 2030		4,005,000	1,338,966		5,343,966	
June 30, 2031		4,165,000	1,185,936		5,350,936	
June 30, 2032		3,140,000	1,026,098		4,166,098	
June 30, 2033		3,250,000	918,303		4,168,303	
June 30, 2034		3,365,000	803,721		4,168,721	
June 30, 2035		3,480,000	682,539		4,162,539	
June 30, 2036		3,610,000	555,139		4,165,139	
June 30, 2037		2,105,000	421,119		2,526,119	
June 30, 2038		2,170,000	349,345		2,519,345	
June 30, 2039		2,245,000	274,037		2,519,037	
June 30, 2040		2,330,000	194,878		2,524,878	
June 30, 2041		1,305,000	111,550		1,416,550	
June 30, 2042		1,360,000	57,392		1,417,392	
Total	\$	61,985,000	\$ 21,544,358	\$	83,529,358	

^{*} Preliminary, subject to change.

<u>EXHIBIT E</u>

THE MEDICAL UNIVERSITY OF SOUTH CAROLINA PROOF SHOWING COMPLIANCE WITH TITLE 59, CHAPTER 107, CODE OF LAWS OF SOUTH CAROLINA 1976, AS AMENDED

Aggregate of tuition fees received by the University during the current fiscal year ending June 30, 2022	\$ 7,155,306 ¹
Multiplied by	90%
Produces	\$ 6,439,776
Maximum annual debt service on all State Institution Bonds of the University (including the proposed issue of not exceeding Twenty Million Dollars (\$20,000,000) General Obligation State Institution Bonds issued on behalf of the University)	\$ 6,199,474
Margin	\$ 240,302

¹ As of April 8, 2022.

MUSC Physicians and Carolina Family Care

Financial Statements for the

eight month period ending

February 28, 2022

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Unaudited – For Management Use

MUSC Physicians and Carolina Family Care, Inc. (A Component Unit of MUSC) Statement of Revenues, Expenses and Changes in Net Position For the 8 Month Period Ending - February 28, 2022

		Carolina Family Care, Inc.					Total							
	College					Car	rolina Family							
	of Medicine	Corporate	Ambulatory Care	Oth	ner	Care	Primary Care		Other		Total	Total		Total
	Actual	Actual	Actual	Act	ual		Actual		Actual		Actual	Flex Budget		Variance
Operating revenues:														
Net clinical service revenue	\$ 283,745,393	\$ 1,500,000	\$-	\$ 1,8	310,488	\$	15,822,703	\$	665,879	\$	303,544,464	\$ 293,112,744	\$	10,431,720
Supplemental medicaid	35,868,955	-	-		-		2,133,333		-		38,002,289	39,849,423		(1,847,135)
Other operating revenue	3,888,886	3,297,855	1,278	4,0	67,457		2,683,734		573,790		16,118,303	11,881,085		4,237,218
Intercompany transfers	(84,209,355)	25,607,500	55,756,723	2,8	345,132		-		-		-	-		-
Purchased services	68,534,400	594,965	(2,753,610)	1,3	30,181		294,793		2,107,447		71,192,678	73,933,529		(2,740,851)
Grant salary reimb. from MUSC	10,258,452	-	-		30,811		-		-		10,289,263	11,277,914		(988,651)
Total operating revenues	318,086,730	31,000,319	53,004,391	10,0	084,069		20,934,564		3,347,116		439,146,995	430,054,695		9,092,300
Operating expenses:														
Salaries, wages and benefits	230,812,108	26,140,224	18,382,944	5,4	100,217		13,673,218		2,326,521		296,939,220	294,893,631		(2,045,589)
MUSCP reimb. for education and research	60,542,597	-	-	-,	-		-		-		60,542,597	60,542,597		-
Supplies	2,968,523	306,567	24,975,065		15,551		1,798,750		4,770		30,294,330	32,146,208		1,851,878
Contractual services	1,870,355	4,676,459	1,154,700	5	87,155		886,247		761,898		10,756,983	12,409,123		1,652,141
Facility cost and equipment	175,189	784,063	6,262,276	2			1,406,783		97,804		9,043,759	8,727,970		(315,789)
Professional liability insurance	5,229,065	23,042	377		898		280,804		31,405		5,565,591	6,202,552		636,961
Depreciation	-	113,632	2,303,352	4	10,001		199,475		-		3,672,253	4,137,547		465,294
Meals and travel	1,059,023	91,248	21,444	1	.06,867		7,943		6,704		1,293,285	2,390,403		1,097,118
Other expenses	746,959	877,338	9,039		99,761		6,261		6,858		1,746,215	2,570,419		824,204
Faculty and staff recruitment	368,567	118,635	-		74,676		10,580		-		772,458	718,925		(53,533)
Donations - transfer to MUSCF and others	25,100	-	-		-		-		-		25,100	483,333		458,233
MUSCP corporate shared services	-	-	-		-		1,446,318		12,297		1,458,615	1,565,380		106,765
Total operating expenses	303,797,487	33,131,208	53,109,197	7,1	27,471		19,716,378		3,248,257		422,110,406	426,788,088		4,677,682
Operating income (loss)	14,289,244	(2,130,889)	(104,806)	2,9	956,599		1,218,186		98,859		17,036,590	3,266,607		13,769,983
Operating margin	4.5%	(6.9%)	(0.2%)		29.3%		5.8%		3.0%		3.9%	0.8%		
Nonoperating revenue (expenses):														
Investment income	119,638	3,117,891	-	(5,5	573,009)		208		-		(2,335,272)	3,139,024		(5,474,296)
Interest expense	-	(215,599)	-	(1,0)69,529)		-		(2,661)		(1,997,186)	(1,833,563)		(163,623)
Rental income	-	145,881	347,873	4,4	42,825		32,961		-		4,969,539	4,880,092		89,447
Rent expense	-	-	-	(1,0	02,177)		-		-		(1,002,177)	(1,002,177)		-
Gain (loss) on disposal of assets	-	-	25,000		2,000		(60,175)		-		(33,175)	(77,813)		44,638
Total Nonoperating revenue (expenses)	119,638	3,048,172	372,873	(3,1	99,889)		(27,006)		(2,661)		(398,270)	5,105,563		(5,503,833)
Change in net position	\$ 14,408,881	\$ 917,284	\$ 268,067	\$ (2	243,290)	\$	1,191,180	\$	96,198	\$	16,638,320	\$ 8,372,170	\$	8,266,150
Net margin	4.5%	3.0%	0.5%		(2.4%)		5.7%		2.9%		3.8%	1.9%		

Notes:

Financial statements exclude RHN clinics due to MCP transition at 1/30/2022 MUSC Physicians Other includes other Colleges (Nursing CoHP, Dental), Presidents Fund, Rental Properties and Investment Account Carolina Family Care, Inc. Other includes Grace Internal Medicine, Institutional Advancement, and MHA Participant Distribution

Medical University of South Carolina Physicians

Executive Summary For the eight month period ending February 28, 2022

Charges:

- YTD-5% over budget and 13% over last year
- Month of February: 3% over budget and 9% over last year
- Top 5 clinical departments: Pathology and Lab Medicine, Family Medicine, Pediatrics, OB/GYN, Anesthesiology
- Bottom 5 clinical departments: Otolaryngology, Ophthalmology, Radiation Oncology, Emergency Medicine, Dermatology

Payments:

- YTD-3% over budget and 13% over last year
- Month of February: 1% over budget and 12% over last year
- 38 Days in AR and \$77 per wRVU

Income/(Loss):

- \$15.7M Operating Income; 3.8% Operating Margin
 - \$9.4M favorable variance to fixed budget
 - \$16.6M favorable net clinical service revenue
 - (\$1.8M) unfavorable supplemental Medicaid
 - \$0.9M favorable net Health Alliance ACO payment distribution
 - (\$3.1M) hospital bill reduction for Q1-2
 - (\$10.1M) unfavorable salaries, wages & benefits
 - (\$6.6M) Z incentive unbudgeted
 - (\$2.7M) deficit in MUSCP Health Plan
 - \$5M favorable in various expense categories such as supplies, contractual services, and meals and travel

• \$15.4M Net Income; 3.7% Net Margin

- \$3.9M favorable variance to fixed budget
 - (\$6.6M) unrealized/realized loss on investments
 - \$1.1M favorable interest income

Balance Sheet:

- Days cash on hand: 259 days and \$321.1M
- Current ratio: 6.1
- Net Position: \$447.7M; increased by \$20M compared to June 2021

Pension:

• YTD expense: \$28.6M; increased by 11.9% compared to YTD February 2022

MUSC Physicians

(A Component Unit of MUSC) Statement of Revenues, Expenses and Changes in Net Position For the 8 Month Period Ending - February 28, 2022

	Fiscal Year To Date								Prio	r Year To Date	
		Actual		Flex Budget		Variance	Var %		Fixed Budget		Actual
Operating revenues:											
Net clinical service revenue	\$	287,055,881	\$	277,053,553	\$	10,002,328	4	% \$	270,401,341	\$	253,214,354
Supplemental medicaid		35,868,955		37,716,089		(1,847,134)	(5	%)	37,716,089		36,395,421
Other operating revenue		11,255,476		7,244,803		4,010,673	55	%	7,244,803		7,619,913
MUHA reimb. for ambulatory and revenue cycle		1,605,303		1,564,401		40,902	З	%	1,564,401		4,307,613
Purchased services		68,790,438		71,846,513		(3,056,075)	(4	%)	72,237,640		69,547,655
Grant salary reimb. from MUSC		10,289,263		11,277,914		(988,651)	(9	%)	11,277,914		11,045,633
Total operating revenues		414,865,316		406,703,273		8,162,043	2	%	400,442,189		382,130,589
Operating expenses:											
Salaries, wages and benefits		280,939,481		279,150,910		(1,788,571)	(1	%)	270,845,651		250,491,136
MUSCP reimb. for education and research		60,542,597		60,542,597		-	C	%	60,542,597		56,732,603
Supplies		28,490,810		30,250,218		1,759,408	e	%	29,203,236		26,718,048
Contractual services		9,108,837		10,968,033		1,859,196	17	%	10,941,062		9,289,016
Facility cost and equipment		7,539,172		7,138,592		(400,580)	(6	%)	7,098,707		6,004,527
Professional liability insurance		5,253,382		5,867,983		614,601	10	%	5,660,447		4,853,686
Depreciation		3,472,778		3,913,567		440,789	11	%	3,913,567		3,569,815
Meals and travel		1,278,638		2,369,636		1,090,998	46	%	2,305,427		276,995
Other expenses		1,733,096		2,538,594		805,498	32	%	2,528,882		3,696,459
Faculty and staff recruitment		761,878		595 <i>,</i> 906		(165,972)	(28	%)	595,906		296,356
Donations - transfer to MUSCF		25,100		483,333		458,233	95	%	483,333		10,000
Total operating expenses		399,145,770		403,819,369		4,673,599	1	%	394,118,815		361,938,641
Operating income (loss)		15,719,545		2,883,904		12,835,641	445	%	6,323,374		20,191,948
Operating margin		3.8%		0.7%					1.6%		5.3%
Nonoperating revenue (expenses):											
Investment income		(2,335,480)		3,139,024		(5,474,504)	(174	%)	3,139,024		27,025,700
Interest expense		(1,994,525)		(1,831,806)		(162,719)	(9	%)	(1,831,806)		(2,144,258)
Rental income		4,936,578		4,863,940		72,638	1	%	4,863,940		4,932,213
Rent expense		(1,002,177)		(1,002,177)		-	C	%	(1,002,177)		(1,083,357)
Gain (loss) on disposal of assets		27,000		-		27,000	100	%	-		-
CARES Act Provider Relief Fund		-		-		-	C	%	-		(9,790,814)
Total nonoperating revenue (expenses)		(368,604)		5,168,981		(5,537,585)	(107	%)	5,168,982		18,939,483
Change in net position	\$	15,350,942	\$	8,052,885	\$	7,298,057	91	% \$	11,492,356	\$	39,131,431
Net margin		3.7%		2.0%					2.9%		10.2%

Notes:

Supplemental medicaid includes accrued reduction of \$1.8M

Other operating revenue includes \$2.4M MHA participant distribution (unbudgeted) and \$1.6M College of Medicine miscellaneous income accrual Purchased services includes the Hospital bill reduction of \$3.1M for Q1 and Q2 FY22 and MHA participant distribution of \$652K to CFC,

MUHA and MUSC (unbudgeted)

Salary, wages and benefits: \$6.6M Z accrual unbudgeted; \$2.7M deficit in MUSCP Health Plan; \$823K MHA participant distribution unbudgeted Contractual services underbudget in multiple categories: Purchased outside services \$1M, Software maintenance \$645K and Dues/subscriptions \$206K Facility cost and equipment: \$661K West Campus roof repair (budgeted \$517K, spread based on history)

Faculty recruitment fees related to Chief of Gastroenterology/Hepatology & Hollings Cancer Center Deputy Director & Program Co-Leader Investment income includes unrealized/realized loss on investment of \$7.3M in February; Interest income overbudget \$1.1M

MUSC Physicians

(A Component Unit of the Medical University of South Carolina)

Statement of Net Position

ASSETS

		February 28, 2022		June 30, 2021		Variance	
Current Assets:							
Cash and investments	\$	321,128,011	\$	343,265,033	\$	(22,137,022)	
Receivables:							
Patient services - net of allowances for							
contractual adjustments of \$155,155,489							
bad debts of \$25,657,341		53,795,748		49,070,745		4,725,003	
Due from the Medical University of South Carolina		4,764,693		32,536,800		(27,772,107)	
Due from the Medical University Hospital Authority		4,227,856		4,883,822		(655,966)	
Due from the Medical University Foundation		291,910		854,141		(562,230)	
Due from Carolina Family Care, Inc.		6,330,183		4,656,305		1,673,878	
Note receivable from CFC/MHP		843,310		100,310		743,000	
Investment / Advancements consolidated CFC		32,270,000		32,270,000		-	
Due from Comprehensive Psychiatric Services		7,827		17,327		(9,499)	
Due from MSV		-		733,232		(733,232)	
Prepaid rent - MUSC Foundation		338,226		338,226		-	
Other current assets		33,789,181		5,626,886		28,162,295	
Total Current Assets		457,786,945		474,352,826		(16,565,880)	
Noncurrent assets:							
Capital assets:							
Land		22,999,986		22,999,986		-	
Buildings		51,956,947		51,956,947		-	
Furniture and equipment		29,266,389		28,960,305		306,084	
Leasehold improvements		63,145,874		59,855,236		3,290,638	
Rental buildings under capital lease		13,989,600		13,989,600		-	
Computer software		14,213,945		14,213,945		-	
Accumulated depreciation and amortization		(94,835,847)		(90,809,366)		(4,026,481)	
Prepaid rent - MUSC Foundation		4,833,010		5,213,856		(380,846)	
Other assets		4,240,000		5,470,000		(1,230,000)	
Net OPEB Asset		1,504,745		1,504,745		-	
Investment in partnerships		7,321,697		7,772,020		(450,323)	
Total noncurrent assets		118,636,345		121,127,274		(2,490,928)	
Total Assets		576,423,291		595,480,100		(19,056,808)	
Deferred outflows of resources:							
Deferred refunding cost		6,930,887		7,840,185		(909,298)	
Deferred outflows-OPEB		26,711		26,711		-	
Total deferred outflows		6,957,598		7,866,896		(909,298)	
Total Assets and Deferred Outflows	\$	583,380,889	\$	603,346,996	\$	(19,966,107)	

Notes:

Cash and Investments: Advanced Medicare payment recoupment of \$9.6M in FY22, received \$10.1M STP Q1 FY22 in February,

and February loss on investments of \$7.3M

Due from MUSC variance is due to receipt of FY21 Supplemental Medicaid payments received in FY22; balance includes Q4 FY21 DHHS \$4.1M Note receivable increased due to \$743K promissory note with CFC for repayment of lab equipment

Due from MSV: Linac receivable of \$733K reclassed to due from MUHA

Other current assets variance is due to FY22 Supplemental Medicaid accrual \$36M and FY22 Envolve rebate accrual \$449K

Leasehold Improvements include new projects: ERP, Whitfield Tract and Parkshore Renovations

Other Assets - (Noncurrent) decrease in collateral deposit for Swap

(A Component Unit of the Medical University of South Carolina)

Statement of Net Position

LIABILITIES

February 28, 2022		June 30, 2021	Variance	
Current Liabilities:				
Accounts payable	\$ 3,616,902	\$ 7,892,080	\$ 4,275,177	
Accrued interest payable	139,668	141,612	1,944	
Accrued payroll	20,239,575	37,268,240	17,028,665	
Accrued payroll withholdings	10,917,690	12,257,318	1,339,628	
Accrued pension contribution	2,482,312	2,136,569	(345,742)	
Unapplied cash - patient services	7,174,526	3,371,283	(3,803,243)	
Other accrued liabilities	12,727,252	16,950,290	4,223,038	
Due to Medical University of South Carolina	7,475	242,378	234,902	
Due to Medical University Hospital Authority	10,078,128	12,360,670	2,282,541	
Due to MUSC Health Alliance	(49,536)	4,719,371	4,768,907	
Accrued compensated absences	3,287,934	3,197,751	(90,183)	
Capital leases	320,969	320,969	-	
Bonds payable	4,015,000	4,015,000		
Total current liabilities	74,957,895	104,873,529	29,915,634	
Noncurrent Liabilities:				
Accrued compensated absences	2,788,752	2,788,752	-	
Capital leases	411,172	690,792	279,620	
Bonds payable	52,625,000	56,140,000	3,515,000	
Deferred inflows-OPEB	881,457	881,457	-	
Fair value of derivative instruments	3,967,166	5,573,961	1,606,795	
Total noncurrent liabilities	60,673,547	66,074,962	5,401,415	
Total liabilities	135,631,442	170,948,491	35,317,049	
NET POSITION				
Invested in capital assets, net of related debt	69,813,684	69,813,684	-	
Unrestricted (deficit)	377,935,762	362,584,821	(15,350,942)	
Total Net Position	447,749,447	432,398,505	(15,350,942)	
Total Liabilities, Inflows & Net Position	\$ 583,380,889	\$ 603,346,996	\$ 19,966,107	

Notes:

Accounts payable FY22 balance includes infusion accrual of \$2.4M; reversal of FY21 AP accruals of \$5.7M in FY22

Accrued payroll FY22 balance includes Y and Z incentive accruals of \$16.6M (salary + fringe); reversal of FY21 Y and Z incentives of \$30.2M in FY22

Accrued payroll withholdings FY22 & FY21 balance includes FICA employer withholding being deferred (1/2 of original balance remaining) Other accrued liabilities balance includes: deferred revenue from receipt of Advanced Medicare Payments \$2M (\$9.6M recouped in FY22), Hospital bill reduction accrual \$1.8M, American Rescue Plan funds \$1.8M, R Transfers accrual \$1.5M and Centene shared savings \$1M, and \$2.6M IBNR Liability

Due to MUHA FY21 balance included project costs related to Nexton, Lab Modernization, Chuck Dawley

Due to/from MHA: \$4.7M transfer of CMMI program funds in November

Rutledge Tower debt is approximately \$55.4M, including the swap valued at \$4M

Carolina Family Care, Inc. Including Carolina Primary Care Physicians & MUSC Health Partners

Executive Summary

For the eight month period ending February 28, 2022

Charges-CFC:

- YTD-14% over budget and 25% over last year
- Month of February: 16% over budget and 21% over last year

Payment-CFC:

- YTD-0% versus budget and 24% over last year
- Month of February: 0% versus budget and 28% over last year
- 28 Days in AR and \$79 per wRVU

Income/(Loss):

- Year to Date: \$1.3M Net Income; 5.3% Net Margin
 - \$1.1M favorable variance to fixed budget
 - \$246K favorable net clinical service revenue
 - \$574K favorable other operating revenue MUSC Health Alliance distribution
 - \$289K favorable salaries at Charleston
 - (\$238K) unfavorable salary accrual for MUSC Health Alliance distribution

Balance Sheet:

- Current ratio: 0.77
- Net Position: (\$2.7M); increased by \$1.6M compared to June 2021
- Assets decreased \$1.6M compared to June 2021
 - \$2.7M decrease in cash and cash equivalents
 - \$2.6M decrease in receivables (decrease in RHN receivables)
 - \$3M increase in other current assets Supplemental Medicaid accrual
 - \$0.5M increase in lab equipment
- Liabilities decreased \$3M compared to June 2021
 - \$0.6M increase in accounts payable
 - (\$5.9M) decrease in accrued payroll (removal of RHN payroll)
 - (\$1.2M) decrease in accrued payroll withholdings
 - \circ \$2.6M increase in Due to MUHA RHN / RHN Settlement
 - \$1.7M increase in Due to UMA
 - \$.7M increase in Note payable to UMA for CFC lab equipment
 - \$.9M decrease in accrued compensated absences removal of RHN vacation accrual

Carolina Family Care, Inc.

Including Carolina Primary Care Physicians and MUSC Health Partners

Statement of Net Position

ASSETS

		February 28, 2022		June 30, 2021		Variance	
Current Assets:							
Cash and cash equivalents	\$	3,035,789	\$	5,803,109	\$	(2,767,319)	
Receivables:							
Patient services - net of allowances for							
contractual adjustments of \$15,477,393							
bad debts of \$5,577,195		6,042,631		8,661,767		(2,619,136)	
Due from the Medical University of South Carolina		-		2,116		(2,116)	
Due from the Medical University Hospital Authority		235,440		447,963		(212,523)	
Due from MSV		536,348		62,860		473,488	
Other current assets		3,539,323		511,674		3,027,650	
Total Current Assets		13,389,532		15,489,489		(2,099,956)	
Noncurrent assets:							
Capital assets:							
Furniture and equipment		1,608,959		1,361,934		247,025	
Leasehold improvements		2,678,566		2,678,566		-	
Computer software		46,563		46,563		-	
Accumulated depreciation and amortization		(2,297,688)		(2,537,707)		240,019	
Investment in partnerships		209,000		209,000		-	
Total noncurrent assets		2,245,399		1,758,355		487,044	
Total Assets	\$	15,634,931	\$	17,247,843	\$	(1,612,912)	

Notes:

Other current assets variance due to Supplemental Medicaid accrual Furniture and equipment variance due to purchase of lab equipment

Statement of Net Position

LIABILITIES

	Febr	uary 28, 2022	Ju	ne 30, 2021	Variance
Current Liabilities:					
Accounts payable	\$	1,523,833	\$	848,229	\$ (675,605)
Accrued payroll		438,098		6,364,259	5,926,161
Accrued payroll withholdings		1,360,843		2,511,633	1,150,790
Unapplied cash - patient services		(96,956)		817,291	914,247
Other accrued liabilities		1,279,636		846,910	(432,726)
Due to Medical University of South Carolina		58,795		24,235	(34,560)
Due to Medical University Hospital Authority		52,594		60,843	8,249
Due to MUHA - RHN / RHN Settlement		5,501,230		2,922,717	(2,578,513)
Due to UMA		6,330,183		4,656,305	(1,673,878)
Note Payable to UMA		843,310		100,310	(743,000)
Note Payable to MSV		403,412		200,751	(202,661)
Due to MUSC Health Alliance		(155,803)		228,805	384,607
Accrued compensated absences		29,758		886,936	 857,178
Total current liabilities		17,568,932		20,469,221	 2,900,289
Noncurrent Liabilities:					
Accrued compensated absences		723,048		723,048	 -
Total noncurrent liabilities		723,048		723,048	 -
Total liabilities		18,291,980		21,192,269	 2,900,289
NET POSITION					
Capital stock and Additional paid-in capital		32,270,000		32,270,000	-
Invested in capital assets, net of related debt		1,549,355		1,549,355	-
Unrestricted (deficit)		(36,476,403)		(37,763,781)	 (1,287,378)
Total Net Position		(2,657,048)		(3,944,426)	 (1,287,378)
Total Liabilities, Inflows & Net Position	\$	15,634,931	\$	17,247,843	\$ 1,612,912

Notes:

Accounts payable FY22 balance includes corporate credit card payable \$1.4M and accrued medical supplies \$141K

Accrued payroll decrease due to payment of FY21 RHN wRVU bonuses in FY22 and reversal of RHN salary accruals

Accrued payroll withholdings FY22 and FY21 balance includes FICA Employer Withholding being deferred (1/2 of original balance remaining) Other accrued liabilities includes American Rescue Plan funds \$1M and corporate income taxes payable \$107K

Note payable to UMA: increase due to promissory note of \$743K for lab equipment

Note payable to MSV: Line of credit was increased by \$200K and fully disbursed in FY22

MUSC Health Alliance: \$229K transfer of CMMI program funds in November

Carolina Family Care, Inc.

Including Carolina Primary Care Physicians and MUSC Health Partners

Statement of Net Position

ASSETS

	Febr	uary 28, 2022	Ju	ne 30, 2021	Variance
Current Assets:					
Cash and cash equivalents	\$	3,035,789	\$	5,803,109	\$ (2,767,319)
Receivables:					
Patient services - net of allowances for					
contractual adjustments of \$15,477,393					
bad debts of \$5,577,195		6,042,631		8,661,767	(2,619,136)
Due from the Medical University of South Carolina		-		2,116	(2,116)
Due from the Medical University Hospital Authority		235,440		447,963	(212,523)
Due from MSV		536,348		62,860	473,488
Other current assets		3,539,323		511,674	 3,027,650
Total Current Assets		13,389,532		15,489,489	 (2,099,956)
Noncurrent assets:					
Capital assets:					
Furniture and equipment		1,608,959		1,361,934	247,025
Leasehold improvements		2,678,566		2,678,566	-
Computer software		46,563		46,563	-
Accumulated depreciation and amortization		(2,297,688)		(2,537,707)	240,019
Investment in partnerships		209,000		209,000	 -
Total noncurrent assets		2,245,399		1,758,355	 487,044
Total Assets	\$	15,634,931	\$	17,247,843	\$ (1,612,912)

Notes:

Other current assets variance due to Supplemental Medicaid accrual Furniture and equipment variance due to purchase of lab equipment

Statement of Net Position

LIABILITIES

	Febru	uary 28, 2022	June 30), 2021	Variance
Current Liabilities:					
Accounts payable	\$	1,523,833	\$	848,229	\$ (675,605)
Accrued payroll		438,098	6	,364,259	5,926,161
Accrued payroll withholdings		1,360,843	2	,511,633	1,150,790
Unapplied cash - patient services		(96,956)		817,291	914,247
Other accrued liabilities		1,279,636		846,910	(432,726)
Due to Medical University of South Carolina		58,795		24,235	(34,560)
Due to Medical University Hospital Authority		52,594		60,843	8,249
Due to MUHA - RHN / RHN Settlement		5,501,230	2	,922,717	(2,578,513)
Due to UMA		6,330,183	4	,656,305	(1,673,878)
Note Payable to UMA		843,310		100,310	(743,000)
Note Payable to MSV		403,412		200,751	(202,661)
Due to MUSC Health Alliance		(155,803)		228,805	384,607
Accrued compensated absences		29,758		886,936	 857,178
Total current liabilities		17,568,932	20	,469,221	 2,900,289
Noncurrent Liabilities:					
Accrued compensated absences		723,048		723,048	 -
Total noncurrent liabilities		723,048		723,048	
Total liabilities		18,291,980	21	,192,269	 2,900,289
NET POSITION					
Capital stock and Additional paid-in capital		32,270,000	32	,270,000	-
Invested in capital assets, net of related debt		1,549,355	1	,549,355	-
Unrestricted (deficit)		(36,476,403)	(37	,763,781)	 (1,287,378)
Total Net Position		(2,657,048)	(3	,944,426)	 (1,287,378)
Total Liabilities, Inflows & Net Position	\$	15,634,931	\$ 17	,247,843	\$ 1,612,912

Notes:

Accounts payable FY22 balance includes corporate credit card payable \$1.4M and accrued medical supplies \$141K

Accrued payroll decrease due to payment of FY21 RHN wRVU bonuses in FY22 and reversal of RHN salary accruals

Accrued payroll withholdings FY22 and FY21 balance includes FICA Employer Withholding being deferred (1/2 of original balance remaining) Other accrued liabilities includes American Rescue Plan funds \$1M and corporate income taxes payable \$107K

Note payable to UMA: increase due to promissory note of \$743K for lab equipment

Note payable to MSV: Line of credit was increased by \$200K and fully disbursed in FY22

MUSC Health Alliance: \$229K transfer of CMMI program funds in November

Carolina Family Care, Inc.

(Including Carolina Primary Care Physicians and MUSC Health Partners) Statement of Revenues, Expenses and Changes in Net Positior For the 8 Month Period Ending - February 28, 2022

	ice Internal Medicine	Other Entities	Carolina Family Care		CFC Total
	(1)	(2)	 (3)	S	Sum of (1)-(3)
Operating revenues:					
Net clinical service revenue	\$ 614,846	\$ 51,033	\$ 15,822,703	\$	16,488,583
Supplemental medicaid	-	-	2,133,333		2,133,333
Other operating revenue	-	573,790	2,683,734		3,257,523
Purchased services	 -	 2,107,447	 294,793		2,402,241
Total operating revenues	614,846	2,732,270	20,934,564		24,281,680
Operating expenses:					
Salaries, wages and benefits	-	2,326,521	13,673,218		15,999,739
Supplies	103	4,667	1,798,750		1,803,520
Contractual services	756,232	5,666	886,247		1,648,146
Depreciation	-	-	199,475		199,475
Facility cost and equipment	51,120	46,684	1,406,783		1,504,587
Professional liability insurance	-	31,405	280,804		312,209
Meals and travel	-	6,704	7,943		14,647
Faculty and staff recruitment	-	-	10,580		10,580
MUSCP corporate shared services	12,297	-	1,446,318		1,458,615
Other expenses	 -	 6,858	 6,261		13,119
Total operating expenses	819,752	2,428,505	19,716,378		22,964,635
Operating income (loss)	(204,906)	303,765	1,218,186		1,317,045
Operating margin	(33.3%)	11.1%	5.8%		5.4%
Nonoperating revenue (expenses):					
Investment income	-	-	208		208
Interest expense	-	(2,661)	-		(2,661)
Rental income	-	-	32,961		32,961
Gain (loss) on disposal of assets	 -	 -	 (60,175)		(60,175)
Total nonoperating revenue (expenses)	-	(2,661)	(27,006)		(29,667)
Change in net position	\$ (204,906)	\$ 301,104	\$ 1,191,180	\$	1,287,378
Net margin	(33.3%)	11.0%	5.7%		5.3%

Notes:

Financial statements exclude RHN clinics due to MCP transition at 1/30/2022

(1) Funding from MSV Line of credit in the amount of \$400K has been received in FY21 and FY22;

accumulated fund balance of (\$420K)

(2) Other non-Primary Care entities:

- \$313K MHA Participant Distribution - \$574K distributed, (\$261K) salaries and benefits

- Other column also includes the following entities which are fully funded: Tidelands Multispecialty, Hampton Regional, Modern Minds, Charleston Cardiology, Centerspace and Heartland Physician Recruitment; East Cooper Radiology and Tidelands Neurosciences (closed in FY21) includes run off collections

Carolina Family Care, Inc.

(Including Carolina Primary Care Physicians and MUSC Health Partners) Regional Health Network Statement of Revenues, Expenses and Changes in Net Position For the 8 Month Period Ending - February 28, 2022

	FOR	ne a month Peri	oa Enaing - Febru	ary 20, 2022			l
	Florence	Marion	Chester	Lancaster	RHC	RHN Integ. Costs	RHN Consol.
	Actual	Actual	Actual	Actual	Actual	Actual	Actual
Operating revenues	(1)	(2)	(3)	(4)	(5)	(6)	Sum of (1)-(6)
Operating revenues: Net clinical service revenue	\$ 24,516,590	\$ 3,413,946	\$ 1,925,707	\$ 5,623,238	ć	\$ -	\$ 35,479,480
	2,560,340	393,767	380,851	5 5,025,258 726,794	Ş -	Ş -	4,061,753
Supplemental medicaid Purchased services	(1,037,353)	7,453	(13,207)	53,834	- 38,875	- 785,480	4,061,753 (164,918)
Total operating revenues	26,039,578	3,815,166	2,293,351	6,403,866	38,875		39,376,315
Operating expenses:							
Salaries, wages and benefits	30,971,709	4,281,708	1,649,548	9,047,065	4,899,326	673,811	51,523,168
Supplies	1,009,314	89,673	24,469	180,814	-	9,355	1,313,624
Contractual services	4,341,068	602,908	958,963	982,775	-	101,014	6,986,727
Facility cost and equipment	1,600,429	171,283	184,220	596,516	3,780		2,556,855
Professional liability insurance	957,579	226,092	112,754	380,441	331,182		2,008,047
Meals and travel	3,574	-	-	1,319	-	-	4,893
Faculty and staff recruitment	20,091	-	-	1,948	-	-	22,038
MUSCP corporate shared services	649,082	88,383	208,043	182,130	-	-	1,127,638
Other expenses	57,909	31,246	2,530	7,545	-	674	99,903
Total operating expenses	39,610,754	5,491,293	3,140,527	11,380,552	5,234,288	785,480	65,642,894
Operating income (loss)	(13,571,177)	(1,676,127)	(847,176)	(4,976,686)	(5,195,413) -	(26,266,578)
Nonoperating revenue (expenses):							
Rental income	1,400	-	-	-	-	-	1,400
Total nonoperating revenue (expenses)	1,400	-	-	-	-	-	1,400
RHN provider practice strategic support	13,569,777	1,676,127	847,176	4,976,686	-	-	21,069,765
Salary reimbursement for RHCs	-	-	-	-	5,195,413	-	5,195,413
Change in net position	\$ - 5	\$ -	\$ -	\$ -	\$-	\$ -	\$ -

Notes:

RHN clinics transitioned to MCP at 1/30/2022.

Purchased services in operating revenues includes Medical Directorships, FCALL payments, other salary reimbursements

Salary Reimbursement for RHCs: Regional Health Clinics are fully reimbursed for salaries and other expenses by MUHA. Income is not recognized but reimbursed directly to MUHA.

FY2022 MUSCP Due to/Due From As of 2/28/22

	Outstanding	
	Balance	Notes
. MUSCP/MUHA		
MUSCP due from MUHA	\$4,227,856	February recurring: \$2M Epic Collections; \$.6M Leadership costs; \$.3M RHN Hospital Bill; \$.3M Parkshore; \$.2M Revenue Cycle
MUSCP due to MUHA	(\$10,063,128)	February recurring: \$5.5M Epic Collections; \$.8M IS costs; \$1.8M Ambulatory \$.6M Billing agreements
Net Amount Due	(\$5,835,272)	
. MUSCP/MUSC		
MUSCP due from MUSC	\$4,764,693	Balance consists of \$4.1M remaining FY21 STP accrual
MUSCP due to MUSC	(\$7,475)	Balance consists of monthly recurring activity
Net Amount Due	\$4,757,218	
. CFC/MUHA		
Net Amount Due	\$182,470	Balance consists of monthly recurring activity
. CFC/MUHA - RHN		
Total RHN accounts-Due from (to) MUHA	(\$5,501,229)	Net Advance from MUHA for RHN expenses: includes AR Accrual
. CFC/MUSC		
Net Amount Due	(\$58,763)	Balance consists of monthly recurring activity
. MHP/MUHA		
Net Amount Due	\$0	Balance consists of monthly recurring activity
. MHP/MUSC		
Net Amount Due	(\$33)	Balance consists of monthly recurring activity
. MSV		
CFC due from MSV	(\$34,776)	Balance consists of monthly recurring activity
MHP due from MSV	\$571,124	\$.5M Modern Minds billing

FY2022 MUSCP Consolidated Approved Unbudgeted Expenses As of 2/28/22

Unbudgeted Capital Projects	Amount
Whitfield Tract	\$ 1,000,000
Imaging Sectra PACS system	1,070,662
Notable Digital platform	544,861
Nexton MOB ultrasound machine	72,706
Various equipment under \$50K	169,615
Total	\$ 2,857,844
Unbudgeted Operating Expenses	Amount
OneMUSC	\$ 1,250,000
Provost Office marketing efforts (fully funded)	800,000
Select Health Bonus	400,000
Emergency Department Chair search	173,000
Recruitment fees: Chief of Gastroenterology & Hepatology	133,000
Diversity Office support	105,699
Project Lego/Helix genomics initiative	83,000
Moncks Corner Pediatrics acquisition	80,000
HCC digital marketing tool (fully funded)	 64,000
Total	\$ 3,088,699
Total FY22 Approved Unbudgeted Expenses	\$ 5,946,543

MEDICAL UNIVERSITY HOSPITAL AUTHORITY (MUHA) BOARD OF TRUSTEES CONSENT AGENDA April 8, 2022 101 Colcock Hall

Authority Operations, Quality and Finance Committee: Dr. Murrell Smith, Chair

Consent Agenda for Approval

Item 29. Appointments, Reappointments and Delineation of Privileges.....Dr. Carrie Herzke *Chief Medical Officer, MUHA*

Consent Agenda for Information

ltem 30.	MEC Minutes	Dr. Carrie Herzke
		Chief Medical Officer, MUHA
ltem 31.	Contracts and Agreements	Annette Drachman General Counsel

MUHA and MUSC Physical Facilities Committee: Mr. Bill Bingham, Chair

Consent Agenda for Information

ltem 32.	MUHA and MUSC FY2022 Active Projects >\$250,000	Greg Weigle
		Interim Chief Facilities Officer, MUSC
ltem 33.	MUSC Facilities Contracts Awarded	Greg Weigle
		Interim Chief Facilities Officer, MUSC

Other Business for the Board of Trustees: Dr. James Lemon, Chair

Consent Agenda for Approval

ltem 34.	Revisions to the MUHA Board of Trustees Bylaws	Dr. James Lemon
		Chairman

Board of Trustees Credentialing Subcommittee February 2022 The Medical Executive Committee reviewed the following applicants on 2.16.22 and recommends approval by the Board of Trustees Credentialing Subcommittee effective 2.28.2022

Changes in Privileges	Activo	Nourogurgery	Charlester Div
Alejandro Marin Spiotta, M.D.	Active	Neurosurgery	Charleston Div
Elizabeth Rogers Johnson, F.N.P.	Allied Health	Radiology	Charleston Div
Cristy L. Blackmon, F.N.P	Allied Health- Colleague- Other	Obstetrics & Gynecology	Charleston Div
Madeline Hillsman, P.A.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Charleston Div
Cole Alan Winburn, M.P.A.S.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Charleston Div
Initial Appointment and Clinical Privile	-		
Abdullah Khalifah Almehbash, M.D.	Active Provisional	Emergency Medicine	Charleston Div
Bhishamjit Singh Chera, M.D.	Active Provisional	Radiation Oncology	Charleston Div
Jan Marie Griffin, M.B.,B.Ch.	Active Provisional	Medicine	Charleston Div
Kevin Paul Horn, M.D.	Active Provisional	Radiology	Charleston Div
Carol Gainey Bledsoe Jones, M.D.	Active Provisional	Pediatrics	Charleston Div
Teresa Catherine Rice, M.D.	Active Provisional	Surgery	Charleston Div
Mason Ray Ruthford, M.D.	Active Provisional	Pediatrics	Charleston Div
James William Greyard, M.D.	Provisional Affiliate- Colleague- Other	Anesthesiology	Regional Division
Bonnie Parker McTyre, M.D.	Provisional Affiliate- Colleague- Other	Pediatrics	Regional Division
Caitlin Brooke Tidwell, M.D.	Provisional Affiliate- Colleague- Other	Emergency Medicine	Regional Division
Jimmy Lee Turner, II, M.D.	Provisional Affiliate- Colleague- Other	Emergency Medicine	Regional Division
Michael Zhadkevich, M.D.	Provisional Affiliate- Colleague- Other	Surgery	Regional Division
Jessica Carolann Burt, P.A.C.	Provisional Allied Health	Psychiatry	Charleston Div
Caitlin Elizabeth Crabtree, M.P.A.S.	Provisional Allied Health	Radiology	Charleston Div
Jeannie Marie Dodd, CNP	Provisional Allied Health	Pediatrics	Charleston Div
Robert T Eliason, C.R.N.A.	Provisional Allied Health	Anesthesiology	Charleston Div
Christopher Blake Frazier, C.R.N.A.	Provisional Allied Health	Anesthesiology	Charleston Div
Eleanor Grace Hardy, P.A.C.	Provisional Allied Health	Medicine	Charleston Div
Nicole McCauley, FNP-BC	Provisional Allied Health	Medicine	Charleston Div
Zachary Hill Robbins, FNP	Provisional Allied Health	Neurosurgery	Charleston Div
Kelli Margaret Shilts, P.A.C.	Provisional Allied Health	Otolaryngology	Charleston Div
Kellie Lee Boeggeman, F.N.P.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
Anthony Robert Broderick, A.P.R.N.	Provisional Allied Health- Colleague- Other	Pediatrics	Regional Division
Mykenzi Alexis Gibbs, P.A.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
Donna M Granger, C.R.N.A.	Provisional Allied Health- Colleague- Other	Anesthesiology	Regional Division
Virginia I Hall, F.N.P.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
Christopher Carlton Hooks, P.A.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
Karen Darlene Jones, F.N.P.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
Stacey Sue Kerr, P.A.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
Joseph J Kukucka, F.N.P.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
Nicole Yajaira Ortiz, P.A.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
Megan Smith Oxford, F.N.P.	Provisional Allied Health- Colleague- Other	Family Medicine	Regional Division
Debra Johndon Prosser, M.S.N.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
Jillian Rengel, MSN	Provisional Allied Health- Colleague- Other	Emergency Medicine	-
Melissa L Rowland, FNP-BC	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
Roy H Smith, D.N.P.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
Shelley Grainger Stevens, P.A.	Provisional Allied Health- Colleague- Other	U	Regional Division
Samuel E Wachter, F.N.P.	Provisional Allied Health- Colleague- Other	Emergency Medicine	Regional Division
	8	Emergency Medicine	Regional Division
Lauren Grace Owens Williams, F.N.P. Bruce K Williams, MSN	Provisional Allied Health- Colleague- Other Provisional Allied Health- Colleague- Other	Pediatrics Emergency Medicine	Regional Division
	Provisional Allieu Health- Colleague- Other	Emergency Medicine	Regional Division
Reappointment and Clinical Privileges	Activo	Dodiatrica	Charles 1 - El
Cameron Gram Anderson, M.D.	Active	Pediatrics	Charleston Div
David Jefferson Cole, M.D.		Surgery	Charleston Div
Loopin Louonthal Cander MAD	Active		
Leonie Leventhal Gordon, M.D.	Active	Radiology	Charleston Div
Kathie Lynn Hermayer, M.D.	Active Active	Radiology Medicine	Charleston Div
Kathie Lynn Hermayer, M.D. John Michael Kaczmar, M.D.	Active Active Active	Radiology Medicine Medicine	Charleston Div Charleston Div
Kathie Lynn Hermayer, M.D. John Michael Kaczmar, M.D. Anne Hawk LeClercq, M.D.	Active Active Active Active	Radiology Medicine Medicine Dermatology	Charleston Div Charleston Div Charleston Div
Kathie Lynn Hermayer, M.D. John Michael Kaczmar, M.D.	Active Active Active	Radiology Medicine Medicine	Charleston Div Charleston Div

U. Joseph Schoepf, M.D. Heather Nicole Simpson, M.D. Nicole Sunderland Anderson, M.D. Ann Louise Quinn Bogard, M.D. Kelly Anne Holes-Lewis, M.D. Virginia Paige Litz, D.O. Perry Victor Halushka, M.D. John A. Schnorr, M.D. Ernest McIntosh Atkinson, M.D. Darniya Powe Belton, M.D. Mohamad Hussein Bourji, M.D. Temujin Tom Chavez, M.D. Ivan Chernev, M.D. William Arthur Chinery, M.D. Eduardo Albana Donato, Jr., M.D. Cecil Edward Floyd, M.D. Marion Logan Gibbons, M.D. Parakkat Gopalakrishnan, M.D. James Mark Harris, M.D. Shauna Elyse Hemingway, M.D. Michael Hsueh-Ching Hsia, M.D. Iris Diana Ignacio, M.D. Bradlee Allexia Johnson, M.D. Gregory Hugh Jones, M.D. Abdallah Kamouh. M.D. Wassef Karrowni, M.D. Benjamin Wade Lamb, M.D. Siddharth Malhotra, M.D. Gangatharan Mathisuthan, M.D. Lorrie Mello-Shropshire, M.D. Albert Durant Mims, M.D. Roberto A Miranda, M.D. Iris Marie Floyd Norris, M.D. Aran Marino O'Malley, M.D. Elijah Daniel Owens, M.D. Mark Stephen Pack, M.D. Swapna Paladugu, M.D. Gregory R Palutsis, M.D. Hudnall Weaver Paschal, M.D. Jennifer Christy Patchett, M.D. Joseph James Pierce, III, M.D. Larry Deon Rabon, M.D. Ossama Abdul Rahman, M.D. Manver Razick, M.D. Brandie Andrews Reynolds, M.D. Mark Dozier Roberts, M.D. Anne Marie Samaha, M.D. Vincent Stephen Scott, M.D. Fadi Seif, M.D. Mark Stephen Steadman, Sr., M.D. Samuel Rogers Stone, M.D. Emily McDaniel Stonerock, M.D. Charles Edward Stonerock , M.D. Germina Suffrant, M.D. Chadwick Van Thomas, M.D. Charles Eric Wooten, M.D. Vera Zaraket, M.D. Rami Zebian, M.D. Mohamad Zein, M.D. Michael Joseph Lyons, M.D. Eloise J. Prijoles, M.D.

Active Active **Active Provisional** Active Provisional Active Provisional Active Provisional Administrative/Honorary Affiliate Affiliate- Colleague- Other **Provisional Affiliate Provisional Affiliate**

Radiology Medicine **Radiation Oncology** Otolaryngology Psychiatry Psychiatry Medicine **Obstetrics & Gynecology** Family Medicine Pediatrics Medicine Medicine Orthopaedics Pediatrics Medicine Surgery Pediatrics Surgery Surgery **Obstetrics & Gynecology** Urology **Family Medicine** Urology Surgery Medicine Medicine Family Medicine Surgery Medicine Pediatrics Family Medicine Family Medicine **Family Medicine** Orthopaedics Neurology Surgery Family Medicine Orthopaedics **Family Medicine Obstetrics & Gynecology** Medicine Urology Medicine Medicine **Family Medicine** Pediatrics **Family Medicine Obstetrics & Gynecology** Medicine **Family Medicine Family Medicine Obstetrics & Gynecology** Surgery **Obstetrics & Gynecology** Surgery **Radiation Oncology** Medicine Medicine Medicine Pediatrics Pediatrics

Charleston Div Charleston Div Charleston Div Charleston Div **Charleston Div** Charleston Div **Charleston Div** Charleston Div **Regional Division Regional Division** Charleston Div **Charleston Div**

Richard Curtis Rogers, M.D. Steven Albert Skinner, M.D. Elliot Seth Stolerman, M.D. Alvin Carin Abinsay, M.D. Ramzy Al Hourany, M.D. Malik E. Ashe, Sr., M.D. Geoffrey Coates-Wynn, M.D. Robert Louis DeGrood, M.D. Michael McCall Miller, D.O. Karim Nazer, M.D. Lindsay Marie Amerman, F.N.P. Sudie E Back, Ph.D., M.S. Kristin Rebecca Calandra, P.A. Ashley Lynn Early, LISW-CP Amanda Elizabeth Hare , D.N.P. Brittany Graham McCabe, C.R.N.A. Cynthia Cupit Swenson, Ph.D. Mark T. Wagner, Ph.D. Mara Palmateer Anderson, A.P.R.N. Stantrenetta Akeya Harrold, A.P.R.N. Gail L Nestor-Loo, LCSW Brian J Sherman, Ph.D. **END OF ROSTER**

Provisional Affiliate Provisional Affiliate Provisional Affiliate Provisional Affiliate- Colleague- Other Allied Health **Provisional Allied Health Provisional Allied Health** Provisional Allied Health Provisional Allied Health

Pediatrics Pediatrics Pediatrics Medicine Medicine **Family Medicine** Orthopaedics Surgery **Emergency Medicine** Medicine Neurosurgery Psychiatry **Emergency Medicine** Pediatrics Neurology Anesthesiology Psychiatry Neurology Medicine Department of Nursing Psychiatry Psychiatry

Charleston Div **Charleston Div Charleston Div Regional Division Charleston Div Charleston Div** Charleston Div **Charleston Div** Charleston Div

Board of Trustees Credentialing Subcommittee March 2022

The Medical Executive Committee reviewed the following applicants on March 16, 2022 and recommends approval by the Board of Trustees Credentialing Subcommittee effective March 28, 2022

Medical Ctaff Initial Annaintment and Clinical Drivilance

Medical Staff Initial Appointment and Clinical Privileges						
William Greer Albergotti, III, M.D.	Active Provisional	Otolaryngology				
Christian Brenes Vega, D.D.S.	Active Provisional	Oral & Maxillofacial				
Carrie Anne-Gilbert Herzke, M.D.	Active Provisional	Medicine				
Caroline Yasmin Nardi, M.D.	Active Provisional	Psychiatry				
Jason Gabriel Newman, M.D.	Active Provisional	Otolaryngology				
Frank Richard Voss, M.D.	Active Provisional	Orthopaedics				
Olga Blakley, M.D.	Provisional Affiliate- Colleague- Other	Anesthesiology	Employed Regional Division			
Ahmad Tayyab Haq, M.D.	Provisional Affiliate- Colleague- Other	Medicine	Employed Regional Division			
	Medical Staff Reappointment and C	linical Privileges				
Anne Lintzenich Andrews, M.D.	Active	Pediatrics				
Jason Robert Buckley, M.D.	Active	Pediatrics				
Theresa Margaret Cuoco, M.D.	Active	Medicine				
Mary Margaret Dugan, M.D.	Active	Pediatrics				
Alan Christopher Finley, M.D.	Active	Anesthesiology				
John Wyatt Gnann, Jr., M.D.	Active	Medicine				
Mahsa Javid, M.D., M.A., Ph.D.	Active	Surgery				
David Thor Johnson, M.D.	Active	Radiology				
Evgenia Kagan, M.D.	Active	Medicine				
Michael Stephen Marotta, M.D.	Active	Anesthesiology				
Fletcher Thompson Penney, M.D.	Active	Medicine				
Richard Rissmiller, Jr., M.D.	Active	Medicine				
Catherine Dawson Tobin, M.D.	Active	Anesthesiology				
Michael Eric Ullian, A.B., M.D.	Active	Medicine				
Adrian Bennet Van Bakel, M.D.	Active	Medicine				
Jordan Lane Foutch, M.D.	Active Provisional	Pediatrics				
Kathleen Marie Jackson, M.D.	Active Provisional	Pediatrics				
Arman Kilic, M.D.	Active Provisional	Surgery				
Martha Mappus Munden, M.D.	Active Provisional	Radiology				
Edward Davis Tarnawa, M.D.	Active Provisional	Obstetrics & Gynecology				
Antwana Sharee Wright, M.D.	Active Provisional	Surgery				
Michael John Slowey, M.D.	Affiliate	Obstetrics & Gynecology				
D. Walter Hiott, M.D.	Affiliate - Colleague	Psychiatry				
Sara S Cathey, M.D.	Provisional Affiliate	Pediatrics				
Evan Franklin Ekman, M.D.	Provisional Affiliate- Colleague- Other	Orthopaedics	Employed Regional Division			
Wael Ghalayini, M.D.	Provisional Affiliate- Colleague- Other	Medicine	Employed Regional Division			
John Alexander Johnson, M.D.	Provisional Affiliate- Colleague- Other	Medicine	Employed Regional Division			
Jonathan Kevin Millard, M.D.	Provisional Affiliate- Colleague- Other	Emergency Medicine	Employed Regional Division			
Steven H Nathanson, M.D.	Provisional Affiliate- Colleague- Other	Emergency Medicine	Employed Regional Division			
Ashley Waynette Primus, M.D.	Provisional Affiliate- Colleague- Other	Medicine	Employed Regional Division			
Amangeldi Rahmanov, M.D.	Provisional Affiliate- Colleague- Other	Medicine	Employed Regional Division			
Cynthia Marie Wesley, M.D.	Provisional Affiliate- Colleague- Other	Obstetrics & Gynecology	Employed Regional Division			
Med	lical Staff Reappointment and Change	e in Clinical Privileges				

None

medical Staff Reappointment and Change in Clinical Privilege

	Medical Staff Change in Pri	vileges	
Elizabeth Anne Genovese, M.D.	Active	Surgery	Add Administration of
Joshua Joel Visserman, M.D.	Provisional Affiliate CFC	Family Medicine	Add Administration of
Pro	fessional Staff Initial Appointment ar	nd Clinical Privileges	
Matthew Bogart, FNP	Provisional Allied Health	Medicine	
Rachel Anne Cage, C.R.N.A.	Provisional Allied Health	Anesthesiology	
Anna Elizabeth Chesson, C.R.N.A.	Provisional Allied Health	Anesthesiology	
Ashton Elizabeth Getchell, P.A.C.	Provisional Allied Health	Otolaryngology	
Jennifer Marie Reitman, AGAC-NP	Provisional Allied Health	Medicine	
Savannah Michelle Weeks, R.D.	Provisional Allied Health	Psychiatry	
Steven Robert Cumberledge, FNP	Provisional Allied Health CFC	Family Medicine	
Kelley N Evans, C.R.N.A.	Provisional Allied Health- Colleague-	Anesthesiology	Employed Regional Division

Susannah Neal Graham, P.A.	Provisional Allied Health- Colleague-	Surgery	Employed Regional Division
Tylar Stein Lee, B.S., M.P.A.S.	Provisional Allied Health- Colleague-	Surgery	Employed Regional Division
Nathan Emory Smith, C.R.N.A.	Provisional Allied Health- Colleague-	Anesthesiology	Employed Regional Division
Sharon E Whelahan, C.R.N.A.	Provisional Allied Health- Colleague-	Anesthesiology	Employed Regional Division
Yvannah Garcia Willis, P.A.	Provisional Allied Health- Colleague-	Surgery	Employed Regional Division
Patricia Ajoa Yeboah, F.N.P.	Provisional Allied Health- Colleague-	Surgery	Employed Regional Division
P	rofessional Staff Reappointment an	d Clinical Privileges	
Robin T Buchanan, C.R.N.A.	Allied Health	Anesthesiology	
Kelley E. Deaton, P.N.P.	Allied Health	Pediatrics	
Laura Nicole Dority, R.D.	Allied Health	MUHA Dietetic Services	
Sara Colbert Edmondson, N.P.	Allied Health	Surgery	
Angela Sczypta McKeta, P.A.	Allied Health	Pediatrics	
Laura L Milligan, F.N.P.	Allied Health	Medicine	
Angela D Moreland , Ph.D.	Allied Health	Psychiatry	
Michael Cameron Schroeder, C.R.N.A.	Allied Health	Anesthesiology	
Kathern Vaughn Sowards, C.R.N.A.	Allied Health	Anesthesiology	
Ethan Brody Clontz, P.A.C.	Provisional Allied Health	Neurosurgery	
Patrick Duffy, Jr., Psy.D.	Provisional Allied Health	Psychiatry	
Angie Powers, A.P.R.N.	Provisional Allied Health	Department of Nursing	
Bethany Bryn Zanetti, P.A.C.	Provisional Allied Health	Medicine	
Alexandria Faile Ingram, F.N.P.	Provisional Allied Health- Colleague-	Medicine	Employed Regional Division
Brittany Leigh Smith, P.A.	Provisional Allied Health- Colleague-	Emergency Medicine	Employed Regional Division
Pro	ofessional Staff Reappointment and	Change in Privileges	
None			
	Professional Staff Change in	n Privileges	
Carolyn Friedland Wahl, A.G.N.PC,	Allied Health	Anesthesiology	Dept chg from Surg to ANE
Elizabeth Verdier Dougherty, N.P.	Provisional Allied Health	Medicine	Add Biopsy Priv
END OF ROSTER			

Medical Executive Committee Presiding: Dr. Phillip Warr Date: November 17, 2021 Meeting Place: MS Teams Recording: Sarah de Barros Meeting Time: 7:30 am Adjournment: 8:15 am	Members: Dr. Andrews, Dr. Baliga, Dr. Basco, N. Brahney, Dr. Baliga, Dr. Cina ,Dr. Clark, Dr Dr. DuBois, Dr. Edwards, M. Fulton, Patti Hart, Dr. Kocher, Dr. Kowalenko, Dr. Mack, Dr. N Rep.), Dr. S. Patel (Resident Rep.), Dr. Russell, Dr. Salgado, S. Scarbrough, Dr. M. Scheurer, Dr. Bundy, Dr. Carroll, Dr. Costello, Dr. Crawford, Dr. Hong, Lois Kerr, Dr. Eddy, David Mcle Dr. Streck, Dr. Zaas, Dr. Zwerner	IcSwain, Dr. Melro Dr. Warr Dr. Atz,	oy (Resident Dr. Brendle, . D Scheurer,
Agenda/Topic	Debate & Discussion	Conclusions	Recommendation/ Follow-Up What/When/Who
Executive Session	n/a	n/a	
Review of Minutes	Minutes from June MEC meeting approved	Information	Approved
Credentials Committee • Dr. Edwards	Nora Brahney reported the following: Board Certification Exemption Requests: 0 Medical Staff Initial Appointment and Clinical Privileges: 68 Medical Staff Reappointment and Clinical Privileges: 57 Medical Staff Reappointment and Change in Clinical Privileges: 2 Medical Staff Change in Privileges: 0 Professional Staff Initial Appointment and Clinical Privileges: 0 Professional Staff Reappointment and Clinical Privileges: 0 Professional Staff Reappointment and Clinical Privileges: 0 Professional Staff Reappointment and Change in Privileges: 0 Professional Staff Reappointment and Change in Privileges: 0 Professional Staff Changes in Privileges: 0	MEC recommends the Board Certification Exemption Requests for Board of Trustees approval.	Approved
GME Report • Dr. Clyburn	 Continuing to work of food after hours for House Staff. There are options for the Main Hospital, but Shawn Jenkins and ART continue to be a challenge. There are new ACGME requirements that maternity and paternity leave for Residents be funded. The requirements are six weeks of funded leave and cannot be required to use up vacation time. Policies are being developed that will be shared with this group in the future. 	Information	

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Quality Report • Dr. Bundy	• Dr. Bundy shared the attached Chief Quality Officer update presentation with the group. A hard copy accessible in the MEC file.	Information	21_11_17 MEC Bundy.pptx
Communication's Report • Dr. Warr	• Dr. Warr shared the attached Chief Medical Officer update presentation with the group. A hard copy accessible in the MEC file.	Information	MEC-CMO Update11.17.21.ppt:
Nursing Report • Patti Hart	• Patti Hart shared the attached Chief Nursing Officer update presentation with the group. A hard copy accessible in the MEC file.	Information	11.17.21 Med Executive Committee
New Business CTM Support Work 	Dr. Mack will present at a later date.	Information	
Consent Items			
Policies (Consent)	Policies for Approval:IPC-012 Risk-Based MSSA/MRSA Screening and Infection Prevention Interventions C-025Time-Out (Universal Protocol) PolicyC-207 Medical and Nursing Care in the High-Risk Infectious Disease Unit (HRID)C-125 Organ Donation After Cardiopulmonary DeathC-179 Pediatric Anticoagulation ManagementC-074 Resident SupervisionC-078 Medication OrdersSection#MM Medication Distribution to Non-Pharmacy AreasPC-86 Liberation from Invasive Positive Pressure Ventilation	Information	Approved

Standing Orders (Consent)	Standing Orders for Approval:Storm Eye OMP.RN.LPN Intake 3.18.21Rheumatology LabsSinus Center Standing orders for IV startSinus Center Medication RefillsSpine Center Holding Area Standing OrderPediatric Pre Liver Transplant Evaluation TPediatric Liver Transplant Evaluation PROTPediatric Liver Post Transplant Lab and ProtOrthopedics-Medication RefillsClinic EKGs Peds Cardiology Standing OrderCardiovascular Clinics Medication Renewa	Testing FOCOL Docedure PROTOCOL	Information	Approved
Other Consent Items	Cardiovascular Clinics ECG Standing Order		N/A	
(Consent) Data & Service Reports (Consent)	Data reports reviewed:	Service reports reviewed:	Information	
Subcommittee Minutes (Consent)	 Moderate Sedation HIMC Credentials Committee 	1	Information	
Adjournment 8:15 am	The next meeting of the Medical Executive	e Committee will be December 15, 2021 at 8:30	am via TEAMS.	1

Elizabeth Mack, MD, Secretary of the Medical Staff

Medical Executive Committee Presiding: Dr. Phillip Warr Date: December 15, 2021 Meeting Place: MS Teams Recording: Phillip Warr Meeting Time: 7:30 am Adjournment: 8:35 am	Members present: To be updated prior to the January MEC meeting Members excused: Guests:		
Agenda/Topic	Debate & Discussion	Conclusions	Recommendation/ Follow-Up What/When/Who
Executive Session	n/a	n/a	
Review of Minutes	Minutes from November MEC meeting approved	Information	Approved
Joint Commission Readiness • Lois Kerr	Lois Kerr reported Joint Commission made a surprise visit Monday, December 6th for cause 		MEC December 15.pptx
Credentials Committee • Dr. Edwards	Nora Brahney reported the following: Board Certification Exemption Requests: 0 Monthly credentialing roster presented. No controverseys.	MEC recommends the approval of roster to the Board of Trustees	Approved
New Business • Nora Brahney	Medical Staff Office 2022 My Quest Lessons	MEC approved the lessons for 2022.	Medical Staff Office 2022 Mandatory My (
GME Report • Dr. Clyburn	VA Tracking for reimbursement	Information	
Quality Report • Dr. Bundy	 Scorecard COVID-19 Joint Commission Blood Supply 	Information	21_12_15 MEC Bundy.pptx

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"...discovery, subpoena, or introduction into evidence in any civil action..."***

Communication's Report • Dr. Warr	 Dr. Warr shared the attached Chier group. A hard copy accessible in th 	Information	MEC-CMO Update12.15.21.pptx	
Nursing Report • Patti Hart	 Patti Hart shared the attached Chie group. A hard copy accessible in the 	Information	12.15.21 MEC Hart presentation (1).pptm	
Consent Items				
Policies (Consent)	Policies for Approval:• C-169 Communication Process for Inpatients with Life Limiting Illness• CH-SOP-COVID EpiPen Anaphylaxis Protocol EpiPen• C-025 Time-Out (Universal Protocol) Policy• C-040 Consultations		Information	Approved
Standing Orders (Consent)	 Standing Orders for Approval: Prescription Refill Protocol- Pain M Orthopedics-Non-Operative Fracture 	-	Information	
Other Consent Items (Consent)	n/a		N/A	
Data & Service Reports (Consent)	Data Reports:Admit Transfer ReportAdmit Transfer Report FY 19YTD Census Report 2018-2019Handy Hygiene July 2019 YTD	 <u>Service reports reviewed:</u> Discharge Summary Turnaround Time Discharge Detail Turnaround Time by Physician 	Information	
Subcommittee Minutes (Consent)		Information		
Adjournment 8:35 am	The next meeting of the Medical Executive Committee will be January 19, 2022 at 7:30 am via TEAMS.			

Elizabeth Mack, MD, Secretary of the Medical Staff

Medical Executive Committee Presiding: Dr. Phillip Warr Date: January 19, 2022 Meeting Place: MS Teams Recording: Elaine Jenkins Meeting Time: 7:30 am Adjournment: 8:35 am	Members present: To be updated prior to the January MEC meeting Members excused: Guests:		
Agenda/Topic	Debate & Discussion	Conclusions	Recommendation/ Follow-Up What/When/Who
Executive Session	n/a	n/a	
Review of Minutes	Minutes from December MEC meeting approved	Information	Approved
New Business • Grant Goodrich	 Policy C-224: "Treatments that are ineffective or harmful (with proposed changes)" Policy C-169: "Communication Process for Inpatients with Life Limiting Illness" Guidelines for the treatment of individuals who are 46XX with Congenital Adrenal Hyperplasia. A hard copy accessible in the MEC file. 	Discussion	Overview of C-224 and C-163.pptx
Credentials Committee • Dr. Edwards	Monthly credentialing roster presented. No controverseys.	MEC recommends the approval of roster to the Board of Trustees	Approved
GME Report • Dr. Clyburn	 Thank the hospital/health system for supporting/approving resident's salaries Radiation/oncology has an in person/virtual site visit today Inline for a clear visit/learning environment visit and may have one at any time. 	Information	
Quality Report • Dr. Bundy	SHIELD has rolled out this week	Information	

Communication's Report • Dr. Warr	• Dr. Warr shared the attached Chief Medical Officer update presentation with the group. A hard copy accessible in the MEC file.	Information	MEC-CMO Update1.19.22.pptx
Joint Commission Readiness • Lois Kerr	 Lois Kerr reported Introduction Kim Denty- New Manager of Accreditation & Regulatory Program A hard copy accessible in the MEC file. 	Information	MEC January 19th.pptx
Consent Items			
Policies (Consent)	 Policies for Approval: C-146 Medication Reconciliation A-015A Vendor Representation Access to Procedural Service Departments A-031 Family Presence and Visitation C-075B Central Venous Line, Insertion, Care and Maintenance in Children's Hospital C-092 Criteria for Telemetry Monitoring C-061 Medication Administration C-171 Scope of Anesthesia Services C-169 Communication Process for Inpatients with Life Threatening Illness This was on hold from last month pending Grant Goodrich's attendance at MEC. 	Information	Approved
Standing Orders Standing Orders for Approval: • Lab Requirements Pulmonary Standing Order • Chronic Care Management Care Plan COPD • Chronic Care Management Care Plan Hypertension • Chronic Care Management Care Plan Diabetes • Chronic Care Management Care Plan Heart Failure/CAD • OB Standing Orders • Adult Heart Post Transplant HCV Donor Positive Organ Orders • Adult Heart Post Transplant Lab Orders • Adult Heart Post Transplant Heart Catheterization Orders • Adult Heart Post Transplant Evaluation Orders • Adult Heart Pre Transplant Evaluation Orders • Adult Heart Pre Transplant Evaluation Orders		Information	Approved

	 Adult Liver Pre Transplant Evaluati Adult Liver Post Transplant Acute L Adult Liver Post Transplant HCC Or Adult Liver Post Transplant Chronic Adult Liver Pre Transplant Screenir Adult Occlusion Line Management 			
Other Consent Items (Consent)	n/a		N/A	
Data & Service Reports (Consent)	Data Reports:Admit Transfer ReportAdmit Transfer Report FY 19YTD Census Report 2018-2019Handy Hygiene July 2019 YTD	 Service reports reviewed: Discharge Summary Turnaround Time Discharge Detail Turnaround Time by Physician 	Information	
Subcommittee Minutes (Consent)	 Infection Control Committee Ethics Committee CDI/Coding Quality Executive Committee 	 Pharmacy & Therapeutics HIMC Committee Credentials Committee 	Information	
Adjournment 8:31 am	The next meeting of the Medical Executive	Committee will be February 23, 2022 at 7:30 am	via TEAMS.	

Elizabeth Mack, MD, Secretary of the Medical Staff

Medical Executive Committee Presiding: Dr. Robert Cina Date: February 16, 2022 Meeting Place: MS Teams Recording: Elaine Jenkins Meeting Time: 7:30 am Adjournment: 7:52 am	 Members present: Dr. Andrews, Dr. Atz, Dr. Basco, Dr. Boylan, N. Brahney, Dr. Bundy, Dr. Cina, Dr. Clyburn, Dr. DiSalvo, H. Dorr, Dr. DuBois, Dr. Edwards, V. Fairbairn, M. Field, Dr. Herzke, Dr. Hong, D. Krywko, L. Kerr, Dr. Mack, J. Melroy, Dr. Russell, Dr. Salgado, S. Scarbrough, Dr. D. Scheurer Members excused: Dr. Baliga, Dr. Brendle, Dr. Carroll, Dr. Clark, Dr. Costello, Dr. Crawford, M. Fulton, P. Hart, M. Kocher, L. Leddy, Dr. Reeves, Dr. M. Scheurer, Dr. Streck, Dr. Zaas, Dr. Zwerner, S. Patel, Guests: K. Denty 				
Agenda/Topic	Debate & Discussion	Conclusions	Recommendation/ Follow-Up What/When/Who		
Executive Session	n/a	n/a			
Review of Minutes	Minutes from January 19, 2022 MEC meeting approved	Information	Approved		
Credentials Committee • Dr. Edwards	Monthly credentialing roster presented. No controverseys or exceptions.	MEC recommends the approval of roster to the Board of Trustees	Approved		
GME Report • Dr. Clyburn	 Still working with VA leadership to clarify new rules regarding VA duty hrs reporting Planning for orientation 	Information			
Quality Report • Dr. Bundy	 Shared Quality and Safety Pillar Scorecard Shared Charleston Area COVID-19 Impact- Omicron surge IMPROVE Updates- Various Action Plans Joint Commission 	Information	22_02_16 MEC Bundy.pptx		
Communication's Report • Dr. Herzke	Introduction	Information			
Joint Commission Readiness Lois Kerr 	Lois Kerr reported Joint Commission Update 	Information			

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Consent Items				
Policies (Consent)	Emulsion – ILE • C-050 Care at the End of Life	on utrition – PN – and Intravenous Lipid ge, and Handling of Human Milk	Information	Approved
Standing Orders (Consent)	 6612 Oxygen Titration Standir 4643 In-basket Standardizatio 8553 Guidelines for Surgical Ir 8551 Standing Orders – Vascu 	o Albumin of Breath ant HCV Positive Organ Orders ng Order on nterventions for Patients with CAH lar Surgery NEW Patients lar Surgery ESTABLISHED Patients ment ay Testing	Information	Approved
Data & Service Reports (Consent)			Information	
Subcommittee Minutes (Consent)	Committee minutes: Credentials Committee		Information	
Adjournment 7:52 am	The next meeting of the Medical Executive	Committee will be March 16, 2022 at 7:30 am vi	a TEAMS/In Person	

Elizabeth Mack, MD, Secretary of the Medical Staff

AGREEMENTS ENTERED INTO BY THE MEDICAL UNIVERSITY HOSPITAL AUTHORITY SINCE THE FEBRUARY 2022 MEETING OF THE BOARD OF TRUSTEES

Hospital Services - Any contract involving the exchange of Hospital services either for money or other services.

Managed Care - The Medical Center has entered a Managed Care Agreement with the following:

BlueChoice – Medicaid Humana Choice Care Mecost CVS Caremark Network Services X4 Select Health of South Carolina Humana Military Cigna Medcost South Carolina Department of Social Services BCBSSC Medicaid Branches of DHHS Humana Choice Care Molina Centers for Medicare & Medicaid Services

Transplant Agreements - For the institution(s) listed below, the Medical Center Transplant Unit agrees to provide tissue typing and transplantation to those patients who are medically suitable and to follow those patients in the transplant clinic at MUSC.

Transfer Agreements - MUHA agrees to accept the admission of individuals requiring specialized care and meet certain criteria from the following facilities:

Doctors Hospital of Augusta Keresh Long Term Care Center Fresenius Medical Care Spring Street Senior Housing OPCO, LLC

Affiliation Agreements -

Coker University Marist College Central Piedmont Community College

Shared Services Agreements -

				Mar	rch 2022								
		MU	SC Approved	F	Y22 Funding	Fu	unds Committed	Ва	lance to Finish	A/E	Contractor	Status	Projected Final
Proj #	Description		Budget				to Date						Completion
	PENDING APPROVAL												
MUHA FY2	2 APPROVED CAPITAL PROJECTS												
210047	Siemens - Cath Lab 11 & 12 (Construction)	\$	812,250	\$	812,250	\$	752,010	\$	60,240	Liollio	Chastain	Design	June 2022
	Siemens - RT R&F X-Ray (Construction)	\$	141,075	\$	141,075	\$	-	\$	141,075			Pending	Pending
220015	Siemens - RT 1st Floor 3T Skyra MRI (Construction)	\$	513,000	\$	513,000	\$	-	\$	513,000	LS3P	TBD	Design	Pending
210048	Siemens - UHE 2nd NES 6th Floor (Construction)	\$	1,150,000	\$	1,150,000	\$	1,092,865	\$	57,135	Josie Abrams	Stenstrom	Design	March 2022
220016	Siemens - ART CT 3rd Floor Angio Room 1 Replacement (Construction)	\$	213,750	\$	213,750	\$	-	\$	213,750		TBD	Design	June 2022
220017	Siemens - ART X-Ray Luminos Agile Max RF Room 2 (Construction)	\$	81,000	\$	81,000	\$	27,051	\$	53,949	LS3P	TBD	Design	June 2022
220017	Siemens - UH R&F X-Ray Luminos Agile Max (Construction)	\$	81,000	\$	81,000	\$	27,051	\$	53,949	LS3P	TBD	Design	June 2022
220017	Siemens - UH R&F X-Ray Ysio Max (Construction)	\$	81,000	\$	81,000	\$	27,051	\$	53,949	LS3P	TBD	Design	June 2022
	Siemens - UH 5th Floor Pheno (Construction)	\$	598,500	\$	598,500	\$	79,795	\$	518,705	Doyle / DWG	TBD	Design	Enabling Projects
220021	Siemens - ART ERCP Phase 2 + Holding (Construction)	\$	878,750	\$	878,750	\$	84,312	\$	794,438	Compass 5	TBD	Design	June 2022
210029	Siemens - UHE 5th Floor Room 3 (Construction)	\$	-	\$	-	\$	130,054	\$	-	Doyle Architecture	Stenstrom	Construction	March 2022
210041	UHE Air Handler Unit 3	\$	600,000	\$	600,000	\$	560,585	\$	39,415	RMF	Triad Mechanical	Construction	March 2022
220022	RT Air Handler Unit 2-2	\$	75,000	\$	75,000	\$	52,500	\$	22,500	BR+A	NA	Design	Design Only
150437	UHE Cooling Tower Phase I	\$	2,150,000	\$	2,150,000	\$	2,051,219	\$	98,781	MECA	Triad Mechanical	Construction	May 2022
210054	UH - 8E NSICU Expansion (Construction)	Ś	1,750,000	Ś	1,750,000	Ś	1,099,761	Ś	650 239	Compass 5	Stenstrom	Construction	April 2022
	UH 5E Renovation for SSICU (Construction)	Ś	1,500,000		1,500,000				1,390,000		TBD	Design	September 2022
	CSB Hyperbaric Unit (Construction)	Ś	600,000		600,000		,		, ,	McMillan Pazdan Smith	Branks	Bidding	April 2022
	RT Oncology H&N Expansion (Construction)	Ś	600,000	·	600,000	·	-	Ś	,	McMillan Pazdan Smith	TBD	On Hold	On Hold
	Therapies PT/OT Health West Clinic Phase 2 (Construction)	ŝ	30,000	Ś	30,000			Ś	,	Josie Abrams		On Hold	On Hold
	ART BMT Expansion (Philanthropy)	\$	1,000,000	\$	1,000,000		24,350	\$	975,650		NA	Pending	Pending
	Total	\$	12,855,325	\$	12,855,325	\$	6,633,604	\$	6,351,775				

						_		
University /	Active Project List > \$250,000	April 2022						
Project #	Description	MUSC Approved	Funds Committed to	Balance to Finish	A/E	Contractor	Status	Projected Final Completion
Approved F	Projects							
9834	IOP Chiller # 2 Replacement	\$2,500,000	\$1,910,834	\$589,166	MECA	McCarter	Construction	June 2022
9835	Energy Performance Contract	\$30,000,000	\$27,500,000	\$2,500,000	Ameresco	Ameresco	Construction	June 2022
9840	BSB Envelope Repairs	\$7,000,000	\$4,677,000	\$2,323,000	REI	Hawkins	Construction	December 2022
9844	HCC 3rd Floor Renovations	\$4,500,000	\$426,280	\$4,073,720			Design	June 2023
9845	BSB Replace AHU 5 and 3 with new AHU	\$1,200,000	\$289,000	\$911,000			Bidding	December 2022
9846	Pharmacy Addition/Innov Instruc Classroom Renov	\$58,000,000	\$51,263,000	. ,	Compass 5	Whiting Turner	Construction	October 2022
9847	HCC Mechanical Systems Replacement	\$3,500,000	\$3,400,000	\$100,000		CR Hipp	Construction	June 2022
9848	BSB Replace AHU #4 and #4A (serve animal area)	\$1,700,000	\$1,588,500	\$111.500		Triad	Construction	June 2022
9851	BSB AHU #1 Replacement	\$5,800,000	\$5,344,000	\$456,000		CR Hipp	Construction	December 2022
9852	MUSC Combined Heat & Power Facility	\$1,500,000	\$1,500,000	. ,	Ameresco	CKTipp	Design	TBD
9854	CoHP President Street Academic Building	. , ,	\$532,000	\$39,468,000			0	
	Ŭ	\$40,000,000	. ,	. , ,			Design	May 2024
51335	BSB Chiller #6 Replacement	\$1,500,000	\$114,000	\$1,386,000	-		Bidding	December 2022
51356	HCC Generator #3 Replacement	\$3,000,000	\$188,000	\$2,812,000			Design	TBD
51357	HCC Lab Air System Replacement	\$1,300,000	\$5,000	\$1,295,000			Schematic Design	TBD
51358	Campus Elevators Modernization	\$4,300,000		\$4,300,000			Design Award Pends	TBD
51359	IOP Cooling Tower Upgrade	\$1,800,000	\$950,000	\$850,000	RMF	McCarter	Construction Award Pends	December 2022
51360	HCC 4th Floor Roof Replacement	\$1,300,000	\$1,210,000	\$90,000	BEE	Bone Dry	Construction	June 2022
50095	T-G Humidifier Replacement	\$700,000	\$515,000	\$185,000	RMF	Triad	Construction	June 2022
50098	BSB Heat Exchanger Replacement	\$350,000	\$241,000	\$109,000	RMF	Triad	Construction	August 2022
50100	IOP Sleep Lab	\$990,000	74,595	\$915,405	Liollio		HOLD per COM	TBD
50121	Quad F Building Roof Replacement	\$600,000	\$500,000	\$100,000		Bone Dry	Construction	June 2022
50122	CSB Fuel Tanks Replacement	\$990,000	\$800,000	\$190,000		JB Petroleum	Construction	June 2022
50123	CODM Clinics Building Cooling Tower Upgrade	\$980,000	\$71,000	\$909,000			Design	TBD
50124	CSB Cooling Tower Piping Upgrade	\$300,000	\$24,000	\$276,000			Design	TBD
50126	Miscs Research Hoods Phoenix Control Upgrades	\$450,000	\$282,000	\$168,000		Hoffman	Construction	June 2022
	DDB Air Cooled Chiller Replacement	\$450,000	\$414,000	\$36,000		McCarter	Construction	December 2022
50131	University Facilities Condition Assessment	\$741,504	\$721,504	\$20,000			Design	June 2022
50133	CSB Suite 215/216 Renovations	\$660,000	\$33,200	\$626,800		Satchell	Construction Award Pends	December 2022
50134	CSB Exterior Envelope Brick Repairs	\$500,000	\$63,000	\$437,000			Design	TBD
	Quad E AHU 5, 6, & 7 Replacement	\$450,000	\$43,000	\$407,000	RMF		Design	TBD
50145	CSB Wound Care Renovations	\$500,000	\$463,000	\$37,000		Branks	Construction	June 22

MEDICAL UNIVERSITY OF SOUTH CAROLINA PROFESSIONAL SERVICES FOR REPORTING APRIL 7, 2022

MUSC Indefinite Delivery Releases

GWA, Inc.

\$182,701.00

Hollings Cancer Center Generator #3 Replacement Phase 2 Services

IDQ Contracts

LS3P Associates LTD

Provide architectural services on an as-needed basis over a two year period throughout the campus. Individual projects not to exceed \$200,000. Services are not to exceed \$500,000 over a two year period.

Liollio

Provide architectural services on an as-needed basis over a two year period throughout the campus. Individual projects not to exceed \$200,000. Services are not to exceed \$500,000 over a two year period.

McMillan Pazdan Smith

Provide architectural services on an as-needed basis over a two year period throughout the campus. Individual projects not to exceed \$200,000. Services are not to exceed \$500,000 over a two year period.

Compass 5 Partners, LLC

Provide architectural services on an as-needed basis over a two year period throughout the campus. Individual projects not to exceed \$200,000. Services are not to exceed \$500,000 over a two year period.

GWA, Inc.

Provide electrical engineering services on an as-needed basis over a two year period throughout the campus. Individual projects not to exceed \$200,000. Services are not to exceed \$500,000 over a two year period.

DWG, Inc. Consulting Engineers

Provide electrical engineering services on an as-needed basis over a two year period throughout the campus. Individual projects not to exceed \$200,000. Services are not to exceed \$500,000 over a two year period.

RMF Engineering, Inc.

Provide electrical engineering services on an as-needed basis over a two year period throughout the campus. Individual projects not to exceed \$200,000. Services are not to exceed \$500,000 over a two year period.

MEDICAL UNIVERSITY OF SOUTH CAROLINA CONSTRUCTION CONTRACTS FOR REPORTING APRIL 07,2022

MUSC General Construction Projects	
Triad Mechanical Contractors, Inc.	\$208,322.00
BSB Heat Exchanger Replacement	
Branks General Contractors LLC	\$462,900.00
CSB Wound Care Renovation	
Whiting Turner Contracting Company	\$84,549.71
New College of Pharmacy Addition & Innovative Instructional Rede	esign
Hipp, C.R., Construction Co., Inc.\$.BSB AHU #1 (West Side) Replacement	4,954,000.00



Bylaws of the Medical University Hospital Authority Board of Trustees

169 ASHLEY AVENUE CHARLESTON, SOUTH CAROLINA 29425 April 2, 2020April 8, 2022

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FOREWORD

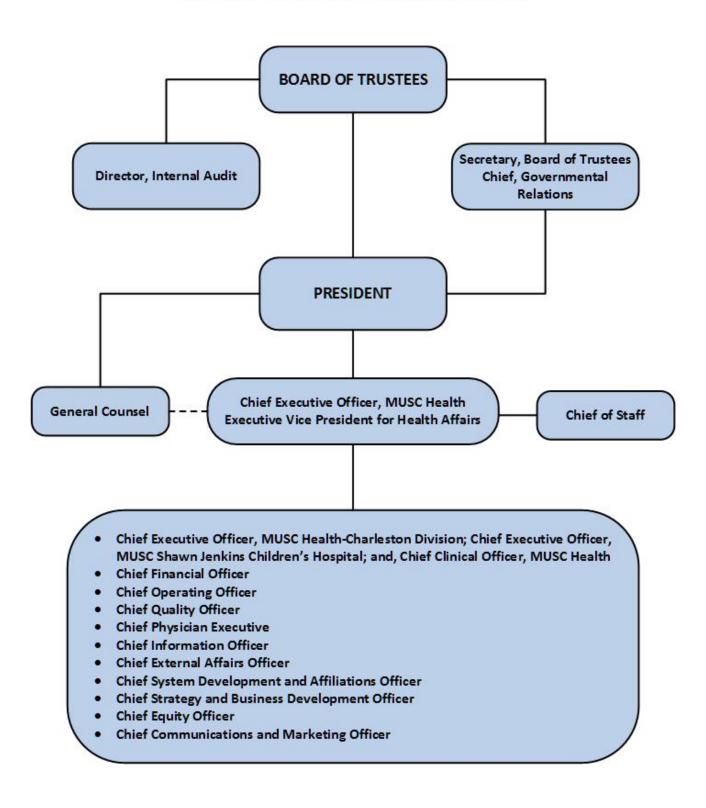
1. The Medical University Hospital Authority (MUHA) does not discriminate on the basis of race, color, religion, sex, age, national origin, disability, veteran status, genetic information, sexual orientation or gender identity in the administration of admission policies, educational policies, financial aid, employment, or any other University activity, except where sex is a bona fide occupational qualification.

2. Since the English language contains no singular pronoun which includes both sexes, wherever a masculine term appears in this document it signifies both genders.

3. The meetings of the Board of Trustees are held in conformance with the Freedom of Information Act as amended, S.C. Code Ann. § 30-4-10, *et seq*.

MEDICAL UNIVERSITY HOSPITAL AUTHORITY CENTRAL ADMINISTRATION ORGANIZATION

(As referenced in the MUHA Board of Trustees Bylaws)



BYLAWS OF THE MEDICAL UNIVERSITY HOSPITAL AUTHORITY BOARD OF TRUSTEES

Section I. Powers and Duties of the Board of Trustees

(A) The final authority and responsibility for the governance of the Medical University Hospital Authority (the "Authority," MUHA, or the Medical Center), its hospitals and clinics (the "Medical Center"), the outreach programs, and ancillary functions are vested in the Board of Trustees of the Authority in accordance with the statutes of the State of South Carolina pertaining thereto.

(B) The Board of Trustees, directly or through its authorized committees, shall establish the general policies of the Authority, shall define its general program of educational activity, shall annually at or before its August meeting fix and approve the Authority's application for State appropriations, if any, and shall approve the budget for the next fiscal year.

(C) The Board of Trustees avoids conflict of interest. Any Trustee having a potential or perceived conflict of interest should make a full disclosure of the facts to the Chairman and should refrain from voting, participating or influencing a decision on the matter. The minutes of the meeting should reflect that disclosure was made and the member abstained from voting.

(D) The Board of Trustees shall name the principal officers of the Authority as prescribed in Section V of these Bylaws, but it may delegate to those elected officers the employment of subordinate officers and employees.

(E) The Board of Trustees shall review or review and revise these Bylaws at least every four (4) years or earlier if a material change occurs.

Section II. Meetings of the Board of Trustees

(A) **Regular Meetings.** Regular meetings of the Board of Trustees shall be held on the second Friday of February, April, August, October, and December, and on the day before the commencement of the Medical University of South Carolina, provided that the place and/or time of any regular meeting may be changed by the Chairman of the Board of Trustees. Any change in the date, place and/or time of any regular meeting shall be publicly noticed in accordance with S.C. Code of Laws §30-4-80.

(B) Special Meetings.

(1) Special meetings of the Board of Trustees may be called at the will of the Chairman; or

(2) Upon the written request of three or more members, the Chairman shall call a special meeting of the Board.

At least 24-hour's notice of any such meeting shall be given to the members of the Board of Trustees. The 24-hour's notice will not apply to emergency meetings in accordance with S.C. Code of Laws §30-4-80. Special meetings of the Board of Trustees may be in person, or via teleconference or videoconference. Trustees must be in attendance in person, or via teleconference or videoconference to vote on an action item at a Special Meeting. The vote will occur publicly, either by written ballot, roll call or other electronic means approved by a majority of the Trustees in attendance at the time of the vote.

(C) **Agenda.** Prior to each regular meeting of the Board of Trustees and with the notice of any special meeting, the Secretary of the Board shall include a proposed agenda and pertinent information for the meeting. Any changes to the agenda shall be done in accordance with S.C. Code of Laws §30-4-80.

(D) **Quorum.** A majority of the elected and ex-officio voting Trustees shall constitute a quorum.

(E) **Voting.** Except as otherwise specifically provided herein, all matters coming before the Board or a committee thereof for determination shall be determined by a majority of the members present by voice acclamation. Upon request of any Board or committee member, a vote by the Board or committee, as applicable, shall be by a call of the roll and results of such roll call vote shall be recorded in the minutes of the Board or committee.

(F) **Order of Business.** The order of business for all meetings of the Board of Trustees shall be as follows:

(1) Roll call.

(2) Corrections and approval of all minutes of regular and special Board and Committee meetings not previously approved.

(3) Reports and recommendations of the President, who may at his discretion call upon other officials of the Medical Center for reports on their areas of authority.

(4) Reports of standing committees.

(5) Reports of special committees.

- (6) Old business.
- (7) New business.

(G) **Rules of Order.** Except as charged by specific rules and regulations of the Board of Trustees, the current edition of *Robert's Rules of Order* shall constitute the rules of parliamentary procedure applicable to all meetings of the Board and its several Committees.

Section III. Officers of the Board of Trustees

(A) **Ex-Officio Chairman**. The Governor of the State of South Carolina is the voting ex-officio Chairman of the Board of Trustees and he shall preside at those meetings of the Board which he attends. The Governor's designee will vote for the Governor in his absence.

(B) **Chairman.** The Chairman of the Board of Trustees of the Medical University of South Carolina shall serve as the Chairman of the Board of Trustees of the Authority. The Chairman shall:

(1) Preside at all meetings at which the ex-officio Chairman does not preside,

- (2) Appoint all board committees not otherwise provided for,
- (3) Be an ex-officio member of all standing committees of the Board,
- (4) Execute all legal documents and instruments on behalf of the Board, and
- (5) Represent the Board in making any budget requests to the General Assembly of the State.

The Chairman of the Board shall be the official spokesman of the Board.

(C) **Vice Chairman.** The Vice Chairman of the Board of Trustees of the Medical University of South Carolina shall serve as the Vice Chairman of the Board of Trustees of the Authority. The Vice Chairman shall perform the duties of the Chairman in his absence, disability, or unavailability.

(D) Secretary.

(1) The Secretary of the Board of Trustees of the Medical University of South Carolina shall serve as the Secretary of the Board of Trustees of the Authority. The Secretary shall also serve as Secretary of all committees of the Board.

(2) Duties. It is the duty of the Secretary to arrange for all Board meetings and to act as Secretary to all Board committees, to keep records and minutes of Board actions, to review and prepare proposed revisions to the Bylaws of the Board every four (4) years or earlier if a material change occurs, and to complement the links with the President. In this role, the Secretary's primary responsibility is to the Board members. **SPECIFICALLY, THE SECRETARY WILL:**

(a) Prepare agenda, place requests in proper format for Board meetings and Board action, record minutes of all meetings, and mail notices and other information to Trustees;

(b) Assist the Board in reviewing, and prepare proposed revisions to, the bylaws of the Board every four (4) years or earlier if a material change occurs. Upon completion of the review by the Board, incorporate all adopted amendments, and submit changes to other parts of the bylaws which are reasonably implied by the adopted amendments;

(c) Obtain necessary legal opinions pertaining to the Board of Trustees as an entity and to individual members in their official capacities;

(d) Receive all direct correspondence, reports, telephone calls, etc., for the Board. Formulate proposed actions and communicate results to the Chairman and Board members;

(e) Relay to the President requests received by Board members from constituents;

(f) Make all arrangements for meetings of the Board of Trustees and committees; make travel accommodations and meal arrangements, including social functions when appropriate;

(g) Keep all records of Board actions taken via mail or telephone between meetings;

(h) Process the Board of Trustees including supplies, printing, binding, travel, subsistence and per diem;

(i) Take care of routine correspondence on behalf of the Chairman and Board members;

(j) Provide copies of minutes of Board of Trustees meetings to members and other addressees as appropriate;

(k) Arrange for screening of the General Assembly's daily calendars and journals, proposed legislation, relevant newspapers, and other information sources. Report pertinent information to the Board and to the President;

(I) Keep a log of term of office and appropriate filing duties and procedures for Trustee members;

(m) Insure compliance with the requirements of the South Carolina Freedom of Information Act as it pertains to Board meetings and records; and

(n) Ensure that the Chairman of the Board of Trustees fills certain seats on affiliate boards, as specified by the affiliates' Bylaws. As such positions become available all Board members will be made aware of the open seat prior to the Chairman appointing an individual to fill the seat. Where two or more seats are available on an affiliate board consideration shall be given to filling the slots with one professional and one lay person from the Board of Trustees.

(E) Internal Auditor.

(1) The Internal Auditor of the Medical University of South Carolina shall serve as the Internal Auditor of the Authority. The Board directs that the Internal Auditor's position and its support staff shall report and be accountable directly to the Board of Trustees. It is further directed that the Board of Trustees of the Medical University of South Carolina shall be responsible for managing the Internal Auditor's tenure and for setting the financial budget for the Internal Audit Department, including salaries, operational expenses, and support costs.

(2) Duties. The Internal Auditor is responsible for managing a professional Internal Audit Department to provide analyses, appraisals, recommendations, counsel, and information concerning the activities reviewed to management, and ultimately to the Board of Trustees.

(3) The Internal Auditor is also responsible for providing the Board of Trustees with information about the adequacy and effectiveness of the organization's system of internal control and the quality of performance.

(4) The Internal Auditor will assist the Audit Committee of the Board of Trustees in carrying out its duties as stated in Section IV(D)(3) of these Bylaws.

(5) The Internal Auditor will assist the Audit Committee in the selection, oversight, and evaluation of the External Auditor.

(F) **Trustees Emeriti.** The Board of Trustees of the Medical University Hospital Authority may recognize a former trustee for loyal, dedicated and significant service to the Authority. Trustee Emeritus status will be granted when a former Board member is nominated in writing by a current Board member and elected by a two-thirds majority vote. To be eligible, the former Board member must have served at least eight (8) consecutive years or have been awarded an honorary degree by the Medical University of South Carolina.

Trustees Emeriti will be elected for life. Trustees Emeriti will be non-voting, ex-officio members who are not reimbursed from appropriated funds. These Board Members will be invited to all Board functions and events and will provide support for the Authority as knowledgeable friends and ambassadors.

Section IV. Committees of the Board.

(A) **Standing Committees.** In addition to such special committees as from time to time may be appointed or elected by the Board of Trustees, there shall be the following standing committees:

- (1) Audit
- (2) Operations, Quality and Finance
- (3) Physical Facilities

(B) **Organization and Terms of Office.** All standing committee assignments shall be made by the Chairman of the Board of Trustees from the membership of the Board within 30 days following the August meeting each even numbered year. Their terms of service shall be for two (2) years. Each standing committee shall be composed of a minimum of three (3) members. Each standing committee shall elect its own chairman from its members by a majority vote taken by voice acclamation at the first committee meeting following the August meeting of the Board at which a Board Chairman is elected, excluding special elections, or at the first regular meeting of a new standing committee. Upon request of any standing committee member, a vote by the committee shall be by call of the roll and results of such roll call vote shall be recorded in the minutes of the Authority or the Medical

University of South Carolina Boards when the same committee (e.g., Physical Facilities, Audit) serves both entities.

(C) Quorum. A majority of the membership of any standing committee shall constitute a quorum.

(D) **Powers and Duties of Standing Committees.** The standing committees shall have the following powers and duties:

(1) Audit Committee.

(a) The Audit Committee shall concern itself with assisting the Board of Trustees in discharging its fiduciary and stewardship obligations relative to the reliability and integrity of 1) systems of internal control, 2) accounting practices, 3) annual reporting,
4) internal and external audit processes, 5) management of business exposures and 6) compliance with legal, regulatory, and ethical requirements.

(b) The Committee will provide an open avenue of communication among the internal and external auditors, management, and the Board. The full Board will continue to have complete access to management and the Internal Audit department and may continue to request the Internal Audit department to review areas of concern to them.

(c) The role of the Committee is oversight. It is not the duty of the Committee to prepare financial statements or to conduct audits to independently verify management's representations or to determine that the financial statements are complete and fairly present the financial condition of MUHA. These are the responsibilities of management and the external auditors.

(d) The Audit Committee has the full authority to review/investigate any matter or activity within the scope of its responsibilities. It shall have direct access to management, Internal Audit, Legal Counsel and any other members of or resources within MUHA and its affiliated organizations. All employees shall be directed to cooperate as requested by members of the Committee. The Committee shall also have the resources and authority to retain special legal, accounting, or other experts it deems necessary in the performance of its responsibilities.

(e) In accordance with Section IV(B) of these bylaws, the Chairman of the Board shall appoint the Audit Committee members, all of whom shall be Trustees, and the Committee members will elect one individual to serve as Committee Chairman. Each member of the Committee, including the Chairman, shall be independent and by reason of education or experience possess such degree of financial literacy as required to oversee the performance of the internal and external auditors, review MUHA's financial statements, and otherwise faithfully execute the role of the Audit Committee set forth in the bylaws. At least one member of the Committee should have appropriate experience with internal controls, an understanding of applicable accounting principles, the application of such principles in preparing or auditing financial statements, and an understanding of audit committee functions. (f) Members of the Committee shall uphold their duty of care by attending and participating in meetings, strengthening his or her understanding of the institution and its operations, maintaining professional skepticism, addressing appropriate subjects, gathering adequate facts, making reasonable and prudent inquiries before making a decision, and seeking outside counsel when necessary.

(g) The Audit Committee shall meet at least two times per year. Internal Audit will coordinate the Committee's agenda in consultation with the Committee Chair. All Board members are encouraged to attend and participate in the Audit Committee meeting.

(h) The Committee will set the appropriate tone in communicating the importance of internal control and direct management to establish appropriate internal controls.

(i) The Management Development and Compensation Sub-Committee shall be a subcommittee of the Audit Committee and reports to the Board through the Audit Committee.

- i. The Management Development and Compensation Sub-Committee shall ensure that executive management and employees of the entities receive compensation that is market-level competitive, supports achieving the entities' strategic objectives, and is relevant to the individual's annual job performance while being sensitive to funding availability and longer term budget goals. The subcommittee will review all policy matters related to evaluation and compensation of the President, the Vice Presidents, the Administrators, the Secretary of the Board (collectively "Executive Leadership"), and any other positions the subcommittee may decide. The sub-committee will make recommendations to the Board via the Audit Committee regarding these matters. The sub-committee will assist the Board in determining a compensation package for the President and advise the President regarding appropriate compensation structures for other members of Executive Leadership.
- ii. The sub-committee shall review, at least annually, MUHA's assessment of potential candidates for promotion (Key Employees) to, at a minimum, a Vice President, Administrator, or other senior executive position designated by the Board. The assessment should identify candidates potential for promotion, professional development needed to address perceived deficiencies in a candidate's preparedness for promotion, or other actions to develop a "deep bench" of potential MUHA leaders. The sub-committee shall assist the President in determining appropriate professional development assistance for the MUHA Key Employees and in determining the best approaches to providing that assistance. The sub-committee shall review, at least annually, the Management Development plans in place and planned to ensure that all employees are encouraged to continuously improve their professional capabilities.

- iii. As with other standing committees, members of this sub-committee will be appointed by the Chairman of the Board of Trustees and is not limited to members of the Audit Committee. The Chairman of the Audit Committee will serve as chairman of this sub-committee.
- iv. The Management Development and Compensation Sub-Committee shall meet as needed. All Board members are encouraged to attend and participate in the sub-committee meetings.
- v. No offer of compensation, whether written or oral, subject to the review of the Management Development and Compensation Sub-Committee shall be effective as binding on the entities without the required approval(s).

(j) The Committee shall report to the Board on all financial matters in its area of concern.

(2) Operations, Quality and Finance Committee.

(a) The principal objectives of the Authority and the Medical Center, to include all hospitals and clinics, the outreach programs, and all services rendered to all patients, are to support the tri-part mission of the Medical University of South Carolina and the Medical University Hospital Authority including:

- i. To deliver direct health services as a corollary to the primary objective of education and to establish a medical center for the needs of the State of South Carolina, and
- ii. To improve the organization and delivery of the health care system to society as a demonstration of responsibility, in conjunction with the appropriate State professional organizations.

(b) In order to implement these objectives, the Operations, Quality and Finance Committee shall concern itself with the operations of the Medical Center, to include all hospitals and clinics, the outreach programs, and all services rendered all patients. This Committee will recommend and seek Board approval for necessary outpatient clinics in off-campus locations. With Board approval, these recommendations will be forwarded to the Physical Facilities Committee.

(c) In like manner, the planning of hospital services; the organizational structure for the delivery of health care; human, financial, and informational resources of the Medical Center and related activities to include the development and approval of the budget, and all other specific financial and contractual matters, quality of care, quality assurance mechanisms, credentials review and privilege delineation, and review of the Committee's performance annually are also responsibilities of this Committee.

(d) The Executive Medical Director of the Medical Center, or his designee, shall report quality assurance findings to the Operations, Quality and Finance Committee at each meeting. This report shall include quality indicators, departmental activities and mechanisms for resolving patient care problems. The quality assurance findings of the Operations, Quality and Finance Committee shall be reported to and acted upon by the full Board of Trustees. These reports should include activities related to hospital-wide quality assurance.

(e) The Operations, Quality and Finance Committee shall review the recommendation of the President for the CEO, MUSC Health-Charleston Division, and the recommendation of the Executive Medical Director of the Authority for the medical staff and department chairmen and shall make its recommendations thereon to the Board of Trustees.

(f) The Operations, Quality and Finance Committee shall concern itself with the broad financial overview of the Authority, as well as with the operation, routine care, and maintenance of the existing physical facilities of the Authority. Specific financial details for physical facilities will be provided in the Physical Facilities Committee of the Board of Trustees.

(g) The Committee shall especially concern itself with such matters as procurement, accounting, budgeting, and information systems.

(h) The Committee shall concern itself with the financial and fiscal policies and procedures of the Authority.

(i) The Committee will assist the Audit Committee in setting the appropriate tone in communicating the importance of internal control and directing management to establish appropriate internal controls.

(j) The proposed annual budget for the Authority shall be prepared by the appropriate Authority officers for review by the Committee.

(k) The Committee shall concern itself with personnel policies and personnel administrative programs to achieve satisfactory quality, productivity, and morale of personnel of the Authority.

(I) The Committee will make appropriate and timely reports and recommendations to the Board of Trustees which, upon approval by the Board of Trustees, shall become established policy.

(3) Physical Facilities Committee.

(a) The Physical Facilities Committee shall concern itself with the real property and improvements thereto of the Medical Center. It shall be responsible for prioritizing and implementing all development plans for Authority properties and their improvements. It shall solicit, evaluate, and select suggestions and proposals from administration,

consultants, and other professionals relating to the development and capital improvements of the physical facilities and make recommendations to the Board of Trustees. This Committee will only be concerned with capital projects exceeding cost limits specified in approved Board policies. This Committee shall assume full responsibility of the Medical University Hospital Authority Facility Plan, to include, but not be limited to, 1) selecting architects, engineers and other related professionals; 2) prioritizing all requests for facilities; 3) conducting feasibility studies; and 4) reviewing major renovations required for the installation of equipment.

(b) To help carry out the duties of the Physical Facilities Committee, the Committee Chairman can appoint one member of the Physical Facilities Committee and two members of the Board of Trustees at large as a separate project committee for each major building project for architect/engineer and related construction professionals selections. There may be multiple project committees with different Trustees functioning concurrently for different projects. A project committee is an active part of the Physical Facilities Committee and serves at the supervision, control and direction of the Physical Facilities Committee. The Physical Facilities Committee Chair shall take into account any expertise or experience of Board members and of their willingness to serve on a committee for a specific project.

(c) The Committee shall be familiar with and report to the Board of Trustees preliminary details of costs associated with various developments and improvements of physical facilities.

(d) The Committee shall be charged with the responsibility of all Board matters relating to the physical properties of the Authority; the design and location of new buildings, master planning, and improvements or remodeling of buildings and all other matters having to do with the preservation of the Authority's physical facilities. It shall report to the Board of Trustees with its recommendations thereon and on all contracts relating to new construction, capital improvements, and major repairs/renovations to existing buildings and grounds.

(e) The Committee will establish a formal mechanism decreeing the time and appropriate ceremony to formally accept any completed project.

(f) At each Board meeting, the CEO of MUSC Health or his designee will update the Physical Facilities Committee on 1) construction progress, 2) budgetary increases on construction/facility improvements, and 3) all change orders to date.

(g) Once the Physical Facilities Committee accepts and prioritizes capital project(s) for development, the project(s) will be forwarded to the Operations, Quality and Finance Committee of the Board of Trustees for funding consideration. The Operations, Quality and Finance Committee will have the responsibility for seeking appropriate funding in consideration of the Authority's budgetary status, bonding requirements and other financial requirements or restrictions of the Authority. In accordance with approved

Board policies, the Operations, Quality and Finance Committee will make recommendations for approval of expenditures to the full Board.

(h) The Committee shall report to the Board on all financial matters in its area of concern.

Section V. The Officers and Administration of the Authority.

(A) **The President.** The Chief Executive Officer of the Authority shall be its President who shall be the President of the Medical University of South Carolina.

(1) The President shall have and exercise full executive powers over the Authority and its related operations within the framework of the policies established by the Board of Trustees.

(2) More specifically, the President shall be charged with the organization of the administrative and professional personnel of the Authority and the method of selecting the personnel, subject only to the limitations imposed by these bylaws, South Carolina laws, and applicable State policies and procedures. He shall be the medium of formal communication between the Board of Trustees and the administrative organization of the Authority and also the official spokesman of the Authority except as to matters within the special province of the Board of Trustees, in which realm the Chairman of the Board of Trustees shall be the official spokesman. The President, with his appropriate executive officers and the appropriate committees, shall prepare or receive and forward all requisite reports, budgets, and presentations to public agencies and to the Board of Trustees of the Authority.

(3) The President shall present to the Board of Trustees an organizational chart showing divisions, departments, and lines of reporting and command in the administrative organization of the Authority. After approval of such organizational chart, any changes shall be made only after the proposed change has been approved by the Board.

(B) **Chief Executive Officer, MUSC Health and Executive Vice President for Health Affairs**. By and with the advice of the President and/or appropriate standing committee, the Board of Trustees shall elect the Executive Vice President for Health Affairs and CEO of MUSC Health and approve his total compensation package and subsequent changes thereto. The Executive Vice President of Health Affairs of the Authority will be elected by a majority vote of the Trustees. Trustees must be present to vote. The vote shall be by signed written ballot unless a Board member requests a vote by call of the roll prior to initial distribution of the ballots. The results of such roll call vote shall be recorded in the minutes of the Board.

(1) The CEO, MUSC Health and Executive Vice President for Health Affairs is administratively responsible to the President and Board for all Authority functions and shall exercise overarching control and responsibility for clinical service delivery of the Authority, as well as, human, financial, informational resources and related activities. The CEO, MUSC Health and Executive Vice President for Health Affairs is expected to align strategically with the Executive Vice President of Academic Affairs and Provost related to the development and implementation of joint initiatives to ensure overall alignment of mission and vision and shall ensure that MUSC Health provides a supportive environment for high quality, sophisticated clinical teaching and research programs carried out by MUSC faculty. This officer shall formulate policies with respect to the clinical, educational and research activities of MUSC Health and is expected to align strategically with the Dean of the College of Medicine and Vice President for Medical Affairs for all College of Medicine clinical activities as well as MUSC Physicians.

- (1) The Vice President for Health Affairs is administratively responsible to the President for the MUSC clinical enterprise and jointly serves as the Chief Executive Officer of the clinical enterprise (MUSC Health). As Vice President, this officer shall report to the President for all clinical matters as they relate to MUSC Health. Associated duties as Vice President for Health Affairs include responsibility for the activities of MUSC Health including purview over the organizations as they relate to the total program of the Medical University.
- (2) Except as otherwise provided in these bylaws, the officers and administrators of the Authority shall report to and through this officer to the President.
- (3) This officer shall be responsible for the development and implementation of joint initiatives to ensure overall alignment of mission and vision and shall ensure that MUSC Health provides a supportive environment for high quality, sophisticated clinical teaching and research programs carried out by MUSC faculty. This officer shall formulate policies with respect to the educational and research activities of MUSC Health and shall submit such policies to the Board of Trustees for approval.

(C) **Chief Executive Officer (CEO), MUSC Health-Charleston Division.** By and with the advice of the President and the <u>Executive</u> Vice President for Health Affairs and CEO of MUSC Health, and/or appropriate standing committee, the Board of Trustees shall elect the CEO, MUSC Health-Charleston Division and approve his total compensation package and subsequent changes thereto. The CEO, MUSC Health-Charleston Division, will be elected by a majority vote of the Trustees. Trustees must be present to vote. The vote shall be by signed written ballot unless a Board member requests a vote by call of the roll prior to initial distribution of the ballots. The results of such roll call vote shall be recorded in the minutes of the Board.

(1) The CEO, MUSC Health-Charleston Division is administratively responsible to the <u>Executive</u> Vice President for Health Affairs and CEO of MUSC Health for Authority functions and services that it provides and shall exercise control and responsibility for human, financial, and informational resources of the Authority and related activities. Except as otherwise provided in these bylaws, the officers and administrators of the Charleston Division shall be appointed by and report to and through this officer to the <u>Executive</u> Vice President for Health Affairs and CEO, MUSC Health.

Section VI. The Executive Medical Director and Medical Staff.

(A) **Executive Medical Director.** The CEO, MUSC Health-Charleston Division in collaboration with the <u>Executive</u> Vice President for Health Affairs and CEO of MUSC Health will recommend a candidate(s) for the position of Executive Medical Director of the Authority to the President for approval. At the discretion of the CEO of MUSC Health-Charleston Division, the responsibilities of the Executive Medical Director of the Authority and the executive Medical Director of the Authority to the responsibilities of the Executive Medical Director of the Authority may be divided between a Chief Medical Officer and a Chief Quality Officer, each of whom shall be subject to the same recommendation and approval procedure set forth

hereinabove. The Board of Trustees delegates the general responsibility and authority for the operation of the Authority's Charleston Division, patient care programs, and related activities of the Authority 's Charleston Division to the CEO of MUSC Health-Charleston Division, under whom specific responsibility and authority for the patient care programs are assigned to the Executive Medical Director of the Authority's Charleston Division. The responsibility and authority delegated in this matter by the Board of Trustees are intended to provide for administrative actions as may be deemed necessary or appropriate to the proper and effective conduct of patient care and related programs.

(B) Medical Staff.

(1) The Board shall create a medical staff organization to be known as the Medical Staff of the MUSC Medical Center, whose membership shall be comprised of professional healthcare providers (i.e., physicians, dentists, osteopaths, etc.), who are privileged to attend patients in the Medical Center. The selection of the Medical Staff and department chairmen is made by the Board of Trustees upon the recommendation of the Executive Medical Director of the Medical Center with the review and recommendation of the Operations, Quality and Finance Committee. The Medical Staff shall propose and adopt bylaws for its internal governance, as specified in the Medical Staff Bylaws, which shall be effective when approved by the Board. According to Joint Commission standards, neither the Board of Trustees nor the Medical Staff can unilaterally amend the Medical Staff Bylaws or Rules and Regulations. These bylaws shall set forth the policies by which the Medical Staff exercises and accounts for its delegated authority and responsibilities. The bylaws shall include a mechanism for review of decisions, including the right to be heard at each step of the process, when requested by a member of the Medical Staff. Whenever the Board does not concur with the Medical Staff recommendation relative to appointment and clinical privileges, there must be a provision in the bylaws for a review of the recommendation by a joint committee of the Medical Staff and the Board before a final decision is reached by the Board.

(2) While the medical care provided to the patients in the Medical Center is the ultimate responsibility of the Board of Trustees, it is the policy of the Board of Trustees to delegate this function, insofar as is legally permissible, to the Medical Staff. Thus, the Medical Staff is responsible for the delivery of health services, for keeping pace with advances in medical science, for evolving new concepts of improved organization and for promoting better health care, education, and research. Nevertheless, the Board shall review the efforts of the Medical Center. In addition, the Board of Trustees shall have the final authority on all appointments, reappointments, and other changes in the Medical Staff, the granting of clinical privileges, disciplinary actions, including a provision for the termination of professional healthcare providers that are members of the Medical Staff in a medico-administrative position in the Medical Center in accordance with procedures as established in the Medical Staff Bylaws, and all matters relating to professional competency.

Section VII. Appeals to the Board.

(A) **Medical Staff.** The right of appeal to the Board of Trustees by any member of the Medical Staff of the Medical Center or the administration is a right recognized by the Board and shall be exercised in

accordance with the respective grievance procedures for the Medical Staff as approved by the Board of Trustees as outlined in the Medical Staff Bylaws.

(B) **Administrative Personnel.** With respect to administrative personnel, the Board of Trustees, in its sole discretion, may grant a review of any adverse administrative action. However, if this review is granted, the Board shall not be required to conduct a hearing or hear arguments but shall review the record of any proceedings.

Section VIII. Certain Income Tax Exemption Purposes Matters.

(A) **General**. In addition to the other purposes of the Authority as set forth in the Authority's enabling legislation which is codified under South Carolina Code Ann. § 59-123-10 et seq., and other purposes set forth below, the Authority is constituted so as to attract substantial support from contributions, directly or indirectly, from a representative number of persons in the community in which it operates and other sources which are appropriate under the applicable provisions of the Internal Revenue Code of 1986, as amended ("Code"), governing income tax exempt organizations, and has not been formed for pecuniary profit or financial gain, and no part of the assets, income, or profits of the Authority is or shall be distributable to, or inure to the benefit of, its trustees or officers except to the extent permitted under the applicable laws of South Carolina, and the applicable provisions of the Code governing income tax exempt organizations. No substantial part of the activities of the Authority shall be the carrying on of propaganda, or otherwise attempting to influence legislation; and the Authority shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office. Notwithstanding any other provisions of the Authority's enabling legislation, which is identified above, the Authority shall not carry on any other activities not permitted to be carried on (i) by a corporation exempt from federal income tax under Code section 501(c)(3) or (ii) by a corporation, contributions to which are deductible under Code section 170(c).

(B) The funds or assets of the Authority shall not be distributed or otherwise made available to any organization or entity other than the State of South Carolina and its agencies and instrumentalities (including, without limitation, The Medical University of South Carolina), unless such funds or assets are transferred or exchanged in accordance with applicable South Carolina law; and in return for goods or services of equal value or unless such funds or assets are distributed or otherwise made available in furtherance of a scientific, educational, or charitable purpose, or for the purpose of lessening the burdens of government, qualifying as exempt under the aforementioned provisions of the Code.

Section IX. Requirements of Section 242 of National Housing Act, As Amended.

(A) The Authority shall provide on a nonprofit basis hospital facilities and services for the care and treatment of persons who are acutely ill who otherwise require medical and related services of the kind customarily furnished most effectively by hospitals, pursuant to Section 242 of the National Housing Act, as amended.

(B) The Authority shall have the power to mortgage or otherwise hypothecate its real and personal property and to do and perform all acts reasonably necessary to accomplish the purposes of the Authority including the execution of a Regulatory Agreement with the Secretary of Housing and Urban Development, acting by and through the Federal Housing Commissioner, and of such other instruments and undertakings as may be necessary to enable the Authority to secure the benefits of financing with the assistance of mortgage insurance under the provisions of the National Housing Act. Such Regulatory Agreement and other instruments and undertakings shall remain binding upon the Authority, its successor and assigns, so long as a mortgage on the Authority's property is insured or held by the Secretary of Housing and Urban Development.

(C) So long as a mortgage on the Authority's property is insured or held by the Secretary of Housing and Urban Development, these provisions within the Authority's Bylaws may not be amended without the prior written approval of the said Secretary.

(D) In the event of a conflict between any of the provisions of these Bylaws and any of the provisions of the Note, Mortgage, Security Agreement, or the Regulatory Agreement (the "HUD Loan Documents"), the provisions of the HUD Loan Documents shall govern and be controlling in all aspects.

(E) The Authority may adopt Bylaws at any regular meeting of the Authority or at any special meeting called for that purpose, so long as they are not inconsistent with these Articles or with the Regulatory Agreement between the Authority and the Secretary of Housing and Urban Development.

Section X. Amendment.

These bylaws may be amended at any regular meeting of the Board of Trustees by a favorable vote of at least two-thirds of the members present and voting, but the proposed amendment must first have been stated in writing and sent to each member of the Board at least 15 calendar days prior to such meeting.

Revisions: June 16, 2000, October 12, 2001, December 12, 2003, February 13, 2004, April 7, 2006, April 11, 2008, April 9, 2010, December 14, 2012, August 9, 2013, April 11, 2014, October 9, 2014, October 9, 2015, December 9, 2016, <u>April 2, 2020April 8, 2022</u>.

MEDICAL UNIVERSITY OF SOUTH CAROLINA (MUSC) BOARD OF TRUSTEES CONSENT AGENDA April 8, 2022 101 Colcock Hall

Research & Institutional Advancement Committee: Dr. Fritz Butehorn, Acting Chair

Consent Agenda for Information

Item 22. Amended & Restated Bylaws for the Institute for Applied Neurosciences Inc.,Dr. Fritz Butehorn Acting Committee Chair

Education, Faculty & Student Affairs Committee: Ms. Barbara Johnson-Williams, Chair

Consent Agenda for Approval

Item 23. Endowed ChairDr. Lisa Saladin Executive Vice President for Academic Affairs and Provost

> <u>College of Medicine</u> **Robert Labadie, MD, PhD,** Professor and Chair in the Department of Otolaryngology-Head and Neck Surgery, for appointment to the Paul R. Lambert, M.D. Endowed Chair in Otolaryngology-Head and Neck Surgery, effective April 8, 2022.

Jason G. Newman, M.D., Professor in the Department of Otolaryngology-Head and Neck Surgery, for appointment to the Wendy and Keith Wellin Endowed Chair in Head and Neck Surgery, effective March 1, 2022.

Ozgur Sahin, Ph.D., Professor in the Department Biochemistry and Molecular Biology, for appointment to the SmartState Endowed Chair in Lipidomics and Drug Discovery, effective May 1, 2022.

Item 24. Distinguished University ProfessorDr. Lisa Saladin Executive Vice President for Academic Affairs and Provost

> <u>College of Medicine</u> **B. Joseph Elmunzer, M.D.,** Professor in the Department of Medicine, for appointment as a Distinguished University Professor, effective April 8, 2022.

Item 25. Change in Faculty StatusDr. Lisa Saladin Executive Vice President for Academic Affairs and Provost

College of Medicine

S. David McSwain, M.D. from Professor to Adjunct Professor, in the Department of Pediatrics, Division of Pediatric Critical Care, effective February 14, 2022.

ltem 26.	Faculty AppointmentsDr. Lisa Saladin
	Executive Vice President for Academic Affairs and Provost

College of Medicine

Dual appointment for **Prince Mohan Anand, M.D.,** as Clinical Associate Professor in the Department of Surgery, Division of Transplant Surgery (Regional-Lancaster), effective February 1, 2022. Dr. Anand's primary appointment rests in the Department of Medicine, Division of Nephrology (Regional-Lancaster).

Carrie Herzke, M.D., M.B.A., as Associate Professor, on the Clinician Educator track, Department of Medicine, Division of Hospital Medicine, effective February 7, 2022.

Dual appointment for **Marcelo Hochman**, **M.D.**, as Professor, in the Department of Surgery, Division of Plastic Surgery, effective March 1, 2022. Dr. Hochman's primary appointment rests in the Department of Otolaryngology-Head and Neck Surgery.

Albert A. Maniscalco, M.D. as Clinical Associate Professor, in the Department of Medicine, Division of Nephrology, effective December 20, 2021.

Jason G. Newman, M.D., as Professor with tenure, in the Department of Otolaryngology-Head and Neck Surgery, effective March 1, 2022. He will also hold the Wendy and Keith Wellin Endowed Chair in Head and Neck Surgery.

John V. Pastore, M.D., M.B.A., as Clinical Professor, in the Department of Pediatrics, Division of Hospital Medicine, effective May 1, 2022.

Dual appointment for **Krisha Patel, M.D**. as Professor, in the Department of Surgery, Division of Plastic Surgery, effective January 1, 2022. Dr. Patel's primary appointment rests in the Department of Otolaryngology-Head and Neck Surgery.

Patricia A. Resick, Ph.D., as Adjunct Professor, in the Department of Psychiatry and Behavioral Sciences, effective February 1, 2022.

Ozgur Sahin, Ph.D., as Professor, on the Academic Investigator track, in the Department Biochemistry and Molecular Biology, effective May 1, 2022. He will also hold the SmartState Endowed Chair in Lipidomics and Drug Discovery.

Frank R. Voss, M.D., as Associate Professor, on the Clinician Educator track, in the Department of Orthopaedics and Physical Medicine, effective April 1, 2022.

A. Marissa Wolfe, D.V.M., as Associate Professor, on the Clinician Educator track, in the Department of Comparative Medicine, effective January 24, 2022.

Yuan Zhai, M.D., Ph.D., as Professor, on the Academic Investigator track, in the Department of Surgery, Division of Transplant Surgery, effective July 1, 2022.

ltem 27.	Affiliate Faculty AppointmentsDr. Lisa Saladin
	Executive Vice President for Academic Affairs and Provost
	<u>College of Medicine</u> David E. Hall, M.D., as Affiliate Professor, in the Department of Pediatrics, Division of General Pediatrics, retroactive to December 1, 2021.
	Desmond P. Kelly, M.D., as Affiliate Associate Professor, in the Department of Pediatrics, Division of Developmental/Behavioral Pediatrics, effective March 1, 2022.
	Emily P. Lowell, Ph.D ., as Affiliate Associate Professor, in the Department of Pediatrics, Division of Developmental/Behavioral Pediatrics, effective March 1, 2022.
ltem 28.	Emerita/EmeritusDr. Lisa Saladin
	Executive Vice President for Academic Affairs and Provost
	<u>College of Health Professions</u> Walter Jones, PH.D., from Professor to Professor Emeritus, in the Department of Healthcare Leadership and Management, effective September 1, 2022.
	Craig A. Velozo, Ph.D., from Professor to Professor Emeritus, in the Department of Rehabilitation Sciences, Division of Occupational Therapy, effective July 1, 2022.
	<u>College of Medicine</u> Dhan Kuppuswamy, Ph.D., from Associate Professor to Professor Emeritus, in the Department of Medicine, Division of Cardiology, effective February 8, 2022.
	Sally E. Self, M.D., from Professor to Professor Emerita, in the Department of Pathology and Laboratory Medicine, effective to May 2, 2022.
	<u>College of Dental Medicine</u> Samuel Theodore McGill, DMD., from Professor to Professor Emeritus, in the Department of Oral Rehabilitation, effective July 1, 2019.
ltem 29.	Faculty TenureDr. Lisa Saladin Executive Vice President for Academic Affairs and Provost
	<u>College of Medicine</u> Jason G. Newman, M.D., as Professor with tenure, in the Department of Otolaryngology-Head and Neck Surgery, effective March 1, 2022. He will also hold the Wendy and Keith Wellin Endowed Chair in Head and Neck Surgery.
ltem 30.	Faculty PromotionsDr. Lisa Saladin Executive Vice President for Academic Affairs and Provost
	Academic Affairs Faculty – effective July 1, 2022
	From Associate Professor to Professor Jean Gudenas, MLIS, AHIP, Academic Affairs Faculty

From Assistant to Associate Professor Christine Andresen, MLS, MIT, Academic Affairs Faculty Monique Hill, MSW, Academic Affairs Faculty Casey O'Neill, PhD, Academic Affairs Faculty Bennie H. Reynolds, III, PhD, Academic Affairs Faculty Tabitha Samuel, MLIS, Academic Affairs Faculty

College of Nursing Promotions – effective July 1, 2022

From Assistant Professor to Associate Professor, Educator/Clinician Track Carrie Cormack, DNP, APRN, CPNP-PC, Department of Nursing Amy Williams, DNP, APRN, CPNP-PC, Department of Nursing

<u>From Assistant Professor to Associate Professor, Educator/Researcher Track</u> **Michelle Nichols, PhD, RN,** Department of Nursing

College of Dental Medicine Promotions – effective July 1, 2022

From Assistant Professor to Associate Professor, Academic Clinician track Raymond A. Kessler, DMD, Department of Oral Rehabilitation Theodore D Ravenel V, DMD, Department of Oral Rehabilitation

<u>From Assistant Professor to Associate Professor, Non-Clinical Educator track</u> Joni D. Nelson, PhD, MS, Department of Stomatology; Dual: Department of Public Health Sciences, College of Medicine

College of Health Professions Promotions – effective July 1, 2022

From Associate Professor to Professor, Academic Researcher Track Mark Bowden, PT, PhD, Department of Rehabilitation Sciences, Division of Physical Therapy

<u>From Associate Professor to Professor, Academic Educator Track</u> Jillian Harvey, MPH, PhD, Department of Healthcare Leadership and Management Annie Simpson, PhD, Department of Healthcare Leadership and Management Gretchen Seif, DPT, Department of Rehabilitation Sciences, Division of Physical Therapy

From Assistant to Associate Professor, Academic Educator Track Cristina Smith, OTD, OTR/L, Department of Rehabilitation Sciences, Division of Occupational Therapy John Duncan Williams, MHA, PhD, Department of Healthcare Leadership and Management

College of Medicine Promotions – effective July 1, 2022

<u>From Associate Professor to Professor, Academic Investigator track</u> **Kelly C. Harris, Ph.D.,** Department Otolaryngology – Head and Neck Surgery <u>From Associate Professor to Professor, Academic Clinician track</u> **Anne L. Andrews, MD,** Department of Pediatrics, Division of General Pediatrics **Katherine R. Sterba, PhD, MPH**, Department of Public Health Sciences Bethany Jacobs Wolf, PhD, Department of Public Health Sciences

From Associate Professor to Professor, Clinician Educator track Jeremy R. Burt, MD, Department of Radiology and Radiological Science Robert L. Grubb, III, MD, Department of Urology Karen J. Hartwell, MD, Department of Psychiatry and Behavioral Sciences Fernando A. Herrera, Jr., MD, Department of Surgery, Division of Plastic Surgery Ashli Karin O'Rourke, MD, Department of Otolaryngology – Head and Neck Surgery Maria Aurora Posadas Salas MD, Department of Medicine, Division of

Maria Aurora Posadas Salas, MD, Department of Medicine, Division of Nephrology

Christopher M. Pruitt, MD, Department of Pediatrics, Division of Pediatric Emergency Medicine

<u>From Clinical Associate Professor to Clinical Professor, Modified track</u> **Elizabeth A. Higgins, MD**, Department of Medicine, Division of General Internal Medicine

<u>From Assistant Professor to Associate Professor, Academic Investigator track</u> **Xingbao Li, MD, MSCR**, Department of Psychiatry and Behavioral Sciences Paula S. Ramos, PhD, Department of Medicine, Division of Rheumatology; Dual, Department of Public Health Sciences

<u>From Assistant Professor to Associate Professor, Academic Clinician track</u> **Alana Marie Rojewski, PhD,** Department of Public Health Sciences

From Assistant Professor to Associate Professor, Clinician Educator track

Chirantan Banerjee, MD, Department of Neurology Natalie Barnett, MD, Department of Anesthesia and Perioperative Medicine Alison K. Chapman, MD, Department of Pediatrics, Division of Neonatology Samuel Lewis Cooper, MD, MSCR, Department of Radiation Oncology Erin M. Forster, MD, MPH, Department of Medicine, Division of Gastroenterology and Hepatology

Renuka Miriam George, MD, Department of Anesthesia and Perioperative Medicine

Mileka R. Gilbert, MD, PhD, Department of Pediatrics, Division of Pediatric Rheumatology

Heather Y. Hughes, MD, MPH, Department of Medicine, Division of Infectious Diseases

W. Ennis James, IV, MD, Department of Medicine, Division of Endocrinology Mahsa Javid, MBBChr, MA, DPhil, Department of Surgery, Division of Oncologic & Endocrine Surgery

Aundrea E. Loftley, MD, Department of Medicine, Division of Endocrinology James E. Madory, DO, Department of Pathology and Laboratory Medicine Claire Anne MacGeorge, MD, MSCR, Department of Pediatrics, Division of General Pediatrics

Robert A. Moran, MBBChr, Department of Medicine, Division of Gastroenterology and Hepatology

Karim M. Soliman, PhD, MBBCh, MSc, Department of Medicine, Division of Nephrology; Dual, Department of Surgery, Division of Transplant Surgery

From Research Assistant Professor to Research Associate Professor, Modified track

Ralph Claude Ward, Jr., PhD, Department of Public Health Sciences Royce R. Sampson, MSN, RN, CRA, Department of Psychiatry and Behavioral Sciences

<u>From Clinical Assistant Professor to Clinical Associate Professor, Modified track</u> **Stephanie Kirk, PharmD,** Department of Medicine, Division of Infectious Diseases **Oana M. Nicoara, MD,** Department of Pediatrics, Division of Pediatric Nephrology

Virginia L. Richards, MD, Department of Pathology and Laboratory Medicine **Rachael T. Zweigoron, MD**, Department of Pediatrics, Division of General Pediatrics

Deanna Vroman, MD, Department of Medicine, Division of General Internal Medicine

Phillip D. Warr, MD, Department of Medicine, Division of Hospital Medicine

<u>From Affiliate Assistant Professor to Affiliate Associate Professor</u> **Robert A. Clifford, MD**, Department of Pediatrics, Division of General Pediatrics **Manjakkollai P. Veerabagu, MD**, Department of Medicine, Division of Gastroenterology and Hepatology (AnMed Health-Anderson)

Other Business for the Board of Trustees: Dr. James Lemon, Chair

Consent Agenda for Approval

Item 31.	Revisions to the MUSC Board of Trustees Bylaws	Dr. James Lemon
		Chairman

AMENDED & RESTATED

BYLAWS

OF

INSTITUTE FOR APPLIED NEUROSCIENCES, INC.

ARTICLE I GENERAL

Section 1.1. Name. The corporate name of this organization is the Institute for Applied Neurosciences, Inc. (the "*Institute*"), and may from, time to time, be included in the trade name of its sole member, MUSC Foundation for Research Development ("*FRD*"), which is ______.

Section 1.2. <u>Registered Office</u>. The registered office of the Institute shall be located in South Carolina, or such other place as may be designated by FRD.

Section 1.3. <u>Principal Office</u>. The principal office of the Institute shall be located at the same address as the registered office or such other place as may be designated by the Board of Directors of the Institute (as defined in Section 4.1) or FRD.

Section 1.4. <u>Other Offices</u>. The Institute may have offices at such other places within or outside of the state of South Carolina, as the Board of Directors may determine from time to time or as the activities of the Institute may require.

ARTICLE II PURPOSES, AUTHORITY, AND LIMITATIONS

Section 2.1. <u>Purposes</u>. The Institute is organized exclusively for charitable, educational and scientific purposes, including, for such purposes, the making of distributions to FRD, The Medical University of South Carolina ("MUSC"), its supported organizations, permissible beneficiaries, and as permitted, to organizations which qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or the corresponding section of any future United States internal revenue law (also referred to herein as the "*Code*"). The Institute is and is organized, and at all times shall be operated, exclusively for the benefit of, or to carry out the purposes of MUSC, and its supporting organization FRD.

Section 2.2. <u>Sole Member</u>. Unless the Articles on file at the South Carolina Secretary of State are otherwise amended to establish additional classes of membership, with any rights, preferences, or limitations associated therewith, as described and provided in these bylaws

(the "*Bylaws*"), the sole member of the Institute shall be FRD. The purposes, for which the Institute are organized, include the provision of scientific research and investigation and to otherwise support MUSC's mission. In furtherance thereof, the Institute is additionally established to support, benefit, promote, and aid its sole member, FRD, and MUSC and its supporting organizations, affiliates, programs, and activities.

Section 2.3. <u>Authority</u>. Except as may be limited by the Articles, these Bylaws, and applicable law, the Institute will have such powers as are now or may hereafter be granted corporations under the South Carolina Nonprofit Corporation Act of 1994, as amended, Chapter 31, Title 33, S.C. Code (the "*Nonprofit Act*"), including the authority:

- (a) To sue and be sued, complain, and defend in its corporate name;
- (b) To have a corporate seal, which may be altered at will, and to use it, or a facsimile of it, by impressing or affixing or in any other manner reproducing it;
- (c) To make and amend bylaws not inconsistent with the Articles or with the laws of the State for regulating and managing the affairs of the Institute;
- (d) To purchase, receive, lease, or otherwise acquire, and own, hold, improve, use, and otherwise deal with, real or personal property or any legal or equitable interest in property, wherever located, for the benefit of FRD;
- (e) To sell, convey, mortgage, pledge, lease, exchange, and otherwise dispose of all or any part of its property;
- (f) To purchase, receive, subscribe for, or otherwise acquire, own, hold, vote, use, sell, mortgage, lend, pledge, or otherwise dispose of, and deal in and with, shares or other interest in or obligations of any entity;
- (g) To make contracts and guaranties, incur liabilities, borrow money, issue notes, bonds, and other obligations, and secure any of its obligations by mortgage or pledge of any of its property, franchises, or income;
- To lend money, invest and reinvest its funds, and receive and hold real and personal property as security for repayment, except as limited by Section 33-31-832 of the Nonprofit Act;
- To be a promoter, partner, trustee, member, associate, or manager of any partnership, joint venture, trust, or other entity. When acting as a trustee of a trust in which it has a beneficial interest, the Institute is not conducting a trust business with regard to that trust for purposes of Section 34-21-10 of the Nonprofit Act;

- (j) To conduct its activities, locate offices, and exercise the powers granted by the Nonprofit Act within or without the State;
- (k) To elect or appoint directors, officers, employees, and agents of the Institute, define their duties, and fix their compensation;
- (1) To pay pensions and establish pension plans, pension trusts, and other benefit and incentive plans for any or all of its current or former directors, officers, employees, and agents;
- (m) To make donations not inconsistent with law for the public welfare or for charitable, religious, scientific, or educational purposes and for other purposes that further the interest of the Institute;
- (n) To accept gifts, devises, and bequests on behalf of itself, FRD, or MUSC, subject to any conditions or limitations, contained in the gift, devise, or bequest so long as the conditions or limitations are not contrary to the Nonprofit Act or the purposes for which the Institute is organized;
- (o) To carry on a business;
- (p) To construct buildings and other improvements to real property;
- (q) To establish investment policies and procedures and to establish endowment funds;
- (r) To acquire, construct, and operate facilities for the benefit of the Institute, FRD, or MUSC;
- (s) To assist, collaborate, and work with any tax-exempt organization which is established for the support and benefit of FRD and/ or MUSC, on projects, activities, and endeavors for the benefit or support of FRD and/ or MUSC; and
- (t) To have and exercise all other authorities necessary to carry out its purposes and to perform all other acts as permitted by law to a nonprofit corporation under the laws of the State; provided, however, that the Institute shall not engage in any activity not permitted by a tax-exempt organization pursuant to Section 501(c)(3) of the Code.

Section 2.4. <u>Prohibition Against Private Inurement</u>. No part of net earnings shall inure to the benefit of or be distributable to its directors, officers, other private

individuals or organizations organized and operating for a profit except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes as hereinabove stated.

Section 2.5. <u>Additional Limitations</u>. No substantial part of the activities of the organization shall be the carrying on of propaganda or otherwise attempting to influence legislation, and the organization shall not participate or intervene in, including the publishing or distributing of statements, any political campaign on behalf of or in opposition to any candidate for public office.

Section 2.6. <u>Exempt Activities</u>. Notwithstanding any other provision of these Bylaws, the Institute shall not carry on any activities not permitted by an organization exempt under Section 501(c)(3) of the Internal Revenue Code and its regulations as they now exist or as they may be amended, or by an organization, contributions to which are deductible under Section 170(c)(2) of the Code and regulations as they now exist or as they may be amended.

Section 2.7. <u>Operating Policies, Procedures and Guidelines</u>. From time to time, the Board may enact policy statements intended to support and promote the most efficient day-to-day operation of the Institute. Policy statements adopted by the Board shall become effective upon adoption and shall remain in force until amended or revoked by future actions of the Board. In the event of conflict between policies of FRD and the Board, the policies of FRD will control.

ARTICLE III MEMBER

Section 3.1. <u>Member</u>. As defined in Section 33-31-140(a)(23) of the SC Nonprofit Act, FRD is the sole member of the Institute. As may be permitted by the Articles, these Bylaws and applicable law, FRD may subsequently establish additional classes of membership within the Institute with such rights, preferences and limitations associated with any such class as determined by FRD Board in its sole discretion.

Section 3.2. <u>Meetings</u>. In its capacity as member, FRD shall hold an annual meeting of the Institute (the "*Annual Meeting*"), where the Chair and the Treasurer shall report to the board of directors of FRD (the "*FRD Board*") on the activities and financial condition of the Institute. Additional regular and special meetings of FRD, in its capacity as member of the Institute, shall take place at such times and places as shall be determined by FRD in accordance with the Nonprofit Act.

Section 3.3. <u>Authority of Member</u>. The power and authority of FRD as the sole

member of the Institute shall be as expressly provided in the Articles, these Bylaws, and applicable law. The authority and power of FRD, as member of the Institute, shall be exercised through action or decision of either (1) the FRD Board or (2) the chief executive officer of FRD. Notwithstanding the foregoing, such actions and decisions as contemplated in Section 3.4 below may only be exercised by the Member, acting by and through the FRD Board.

Section 3.4 <u>Required Approval of the Member for Certain Actions</u>. Notwithstanding anything to the contrary herein or otherwise, the following actions and decisions on behalf of the Institute shall require the approval of the FRD Board in accordance with the then-current Bylaws of FRD and applicable law:

- (a) Authorizing the merger, consolidation, reorganization, restructuring or dissolution of the Institute;
- (b) Authorizing, agreeing or completing the sale, lease, exchange or mortgage of all or substantially all of the Institute's properties or assets;
- (c) Amending, deleting, modifying or otherwise changing the Articles or these Bylaws;
- (d) Establishing any additional class of membership in the Institute, with any rights, preferences, or limitations associated therewith;
- (e) Appointing or removing Directors to the Board of the Institute;
- (f) Establishing, amending, restating, modifying, terminating, or waiving any material agreement between the Institute and FRD, in whole or in part;
- (g) Changing the name of the Institute;
- (h) Changing the fiscal year of the Institute;
- (i) Authorizing distributions of support from the Institute to FRD or MUSC, its supported organizations or permissible beneficiaries;
- (j) Initiating bankruptcy proceedings on behalf of the Institute, dissolving the Institute, or liquidating the assets of the Institute; and
- (k) Approving the annual operating budget of the Institute.

Section 3.5. <u>No Member Liability</u>. FRD is not, as such, personally liable for the acts, debts, liabilities, or obligations of the Institute.

ARTICLE IV BOARD OF DIRECTORS

Section 4.1. <u>General Powers/ Authority</u>. The FRD Board shall serve, ex officio, as the board of directors of the Institute (the "*Board*" or the "*Board of Directors*," and each individual thereon, a "*Director*") and the FRD Board shall additionally exercise all powers and authority of FRD as sole member of the Institute.

Section 4.2. <u>Term of Office</u>. Each Director shall serve for such length of time as permitted in the bylaws of FRD (the "*FRD Bylaws*").

Section 4.3. <u>**Removal.**</u> Any individual removed as Director of FRD shall automatically be removed as a Director of the Institute.

Section 4.4. <u>Resignation</u>. Any Director may resign at any time by serving written notice to the Chair or Secretary. Such resignation shall take effect at the time specified therein or, if no time is specified, upon receipt of the notice.

Section 4.5. <u>Vacancies</u>. A vacancy of a Director from the Board may be filled in accordance with the FRD Bylaws.

Section 4.6. <u>Compensation/Expenses</u>. No Director shall by reason of office be entitled to receive any salary or compensation, but nothing herein shall be construed to prevent a Director from receiving any compensation from the organization for duties other than as a Director.

Section 4.7. <u>Exculpation of Directors</u>. No Director shall be liable to anyone for any acts on behalf of the Institute nor any admission with respect to the Institute committed by such Director except for such Director's own willful, wanton, or gross negligence pursuant to Section 33-31-834 of the Nonprofit Act.

ARTICLE V MEETINGS OF DIRECTORS

Section 5.1. <u>**Regular Meetings.**</u> The Board shall hold regular meetings according to such schedule and at such times and places as the Board may fix by resolution or otherwise.

Section 5.2. <u>Special Meetings</u>. Special meetings of the Board may be called by or at the request of the Chair of the Institute or by any two Directors through the delivery of such request to the Chair of the Institute. Such meetings may be held at the time and place

fixed by the person or persons calling the meeting.

Section 5.3. <u>Notice of Meetings</u>. Notice of the time and place of regular meetings shall be served either personally or by mail not less than ten (10) nor more than forty (40) days before the regular meeting upon each person who is a member of the Board. Notice of a special meeting must state the time, place and purpose or purposes thereof and shall be served personally or by mail upon each member of the Board not less than two (2) nor more than forty (40) days before such meeting. Any Director may waive the notice requirements of any such meeting. Attendance by a Director at a meeting shall constitute a waiver of notice of such meeting, except where a Director attends a meeting for the express purpose of objecting to the transaction of any business because the meeting is not lawfully called.

Section 5.4. <u>**Quorum.</u>** At any meeting of the Board, the presence of a majority of the Directors in office immediately before the meeting shall constitute a quorum for transaction of business at any meeting of the Board. In the absence of any quorum or when a quorum is present, a meeting may be adjourned from time to time by a vote of the majority of the Directors without notice other than by announcement at the meeting and without further notice to any absent Director.</u>

Section 5.5. <u>Manner of Acting</u>. Except as otherwise provided in these Bylaws or as required by South Carolina law, the act of the majority of the Directors present in person at a meeting at which a quorum is present shall be the act of the Board. No voting of Directors by proxy shall be permitted.

Section 5.6. <u>Informal Action by All Directors</u>. Any action required by law to be taken at a meeting of the Board, or any action that may be taken at the meeting of the Board or of any committee of the Board may be taken without a meeting, if a consent in writing, setting forth the action so taken, shall be signed by <u>all</u> of the Directors entitled to vote on the subject thereof. Such consent shall have the same force and effect as a unanimous vote of the Board and shall be recorded with the minutes of the Institute.

Section 5.7. <u>Meeting by Video-Conference, Telephone, and other</u> <u>Communication Means</u>. Directors may participate in and hold a meeting by means of telephone conference, video conferencing, or similar communications equipment by means of which all persons participating in the meeting can hear each other. Participation in such a meeting shall constitute presence in person at the meeting, except where a person participates in the meeting for the express purpose of objecting to the transaction of any business on the grounds that the meeting is not lawfully called or convened.

Section 5.8. <u>Order of Business</u>. At regular meetings of the Board, the Chair, with the approval of the Board, may prescribe the order of business.

ARTICLE VI Officers

Section 6.1. <u>Officers and Duties</u>. The officers of FRD as provided in the FRD Bylaws, including the Chair, Vice Chair, Secretary, and Treasurer, shall serve, ex officio, as the officers of the Institute.

Section 6.2. <u>Officer Term</u>. Each officer shall hold office for such length of time as provided in the FRD Bylaws.

Section 6.3. <u>Vacancies</u>. In the case of a resignation of an officer, the removal of an officer, or for any other reason, a successor officer shall be appointed to complete the then-current officer term in accordance with the FRD Bylaws.

Section 6.4. <u>Resignations</u>. Any officer may resign at any time by serving written notice to the Chair or the Secretary. Such resignation shall take effect at the time specified therein or, if no time is specified, upon receipt of the notice by the Chair or the Secretary.

Section 6.5. <u>Removal</u>. Any officer may be removed from such position in accordance with the FRD Bylaws.

Section 6.6. <u>Compensation/ Expenses</u>. No officer shall by reason of office be entitled to receive any salary or compensation, but nothing herein shall be construed to prevent an officer from receiving any compensation from the organization for duties other than as an officer of the Board.

ARTICLE VII Advisory Boards & Committees

Section 7.1. <u>Advisory Boards, Standing, Ad Hoc, and Special Committees</u>. The Board of Directors or the Chair may establish such advisory boards, standing committees, special committees, and ad hoc committees, as each shall from time to time determine. Each advisory board and committee so established shall be tasked with a mission, which is consistent with the charitable purpose of the Institute. Each advisory board and committee shall be composed of such persons, whether Directors or not, who will add some additional knowledge, expertise, or experience of value to such committee. The Chair shall appoint all individuals to serve on each committee on an annual basis, unless these Bylaws expressly specifies the appointment of specific individuals to a committee or the Board reserves such power of appointment in the establishment of the committee.

Section 7.2. Ex-officio Committee Members. The Chair shall serve as an ex-

officio, non-voting member of all committees, on which the Chair does not serve as a regular voting member.

Section 7.3. <u>Term of Office</u>. Each member of a committee shall serve as a member until the final meeting of the Board of Directors for the fiscal year and until a successor is appointed unless the committee shall be sooner terminated.

Section 7.4. <u>Committee Chair</u>. A chair shall be appointed to each committee by the Chair.

Section 7.5. <u>Vacancies</u>. Vacancies in the membership of any committee may be filled by appointments made in the same manner as provided in the case of the original appointments.

Section 7.6. <u>Quorum</u>. A majority of the whole committee shall constitute a quorum and the act of a majority of the members present at a meeting at which a quorum is present shall be the act of the committee.

Section 7.7. <u>Rules</u>. Subject to the requirements of this Article VII, each committee may adopt rules for its own governance not inconsistent with these Bylaws.

ARTICLE VIII AMENDMENTS

Section 8.1. <u>Bylaws</u>. The FRD Board, in its discretion and from time to time, may amend, restate, modify or otherwise change the Articles of Incorporation and these Bylaws. The Board of Directors of the Institute may, from time to time, recommend to FRD Board amendments, restatements, modifications or changes to these Bylaws.

Provided, however, that notwithstanding anything to the contrary contained herein or otherwise, for as long as FRD is a recognized affiliate of MUSC and the sole member of the Institute, the provisions of Sections 2.1, 2.2, and Articles III, VIII, X, and XII of these Bylaws, or the Conflict of Interest Policy attached hereto as Appendix A may not be amended, restated, altered, or repealed without the written consent of MUSC evidenced by the signature of the secretary of its board of trustees. In addition, notice of any proposed amendment, restatement, alteration, or repeal of all or any portion of the Bylaws, including a copy thereof, shall be given, in writing, to the secretary of the board of trustees of MUSC, concurrently with notice to the Board of Directors of FRD, and copy to the Office of General Counsel of MUSC.

ARTICLE IX

FINANCES AND REPORTS

Section 9.1. <u>Funds</u>.

- (a) The current funds of the Institute shall be deposited in such bank or banks, in such types of accounts, and subject to such deposit and withdrawal procedures as may be directed by the Board of Directors by resolution. Reserve funds of the Institute shall be invested in such kinds and types of securities as may be directed by the Board of Directors by resolution, subject to the provisions of these Bylaws.
- (b) The Board of Directors may from time to time provide procedures for the establishment of special or designated funds to be administered by the Board of Directors under the condition of their creation in accordance with the Articles of Incorporation and these Bylaws.

Section 9.2. <u>Income and Disbursements</u>. All income, including contributions, received by FRD shall be deposited by the Treasurer, or the Treasurer's delegate, in a special account or accounts in such banks, trust companies, or other depositaries as the Board of Directors may select. All disbursements shall be made under a proper authority of the Board of Directors. All contributions to and disbursements from FRD shall be recorded by the Treasurer, or the Treasurer's delegate, and such records shall be subject to examination at any reasonable time, upon request, by any Director.

Section 9.3. <u>Operating Budget</u>. An itemized statement of the proposed operating income and expenditures for the following year shall be prepared by and for the Board, pursuant to the leadership of the Chair and the Treasurer, prior to the commencement of each fiscal year of the Institute; and a copy of such budget shall be provided to the secretary of the board of trustees of MUSC prior to the commencement of each fiscal year of the Institute. The operating budget shall be approved by the FRD Board, and thereafter, such budget shall be the authorization for expenditures for operating expenses of the Institute subject to subsequent changes made by the FRD Board.

Section 9.4. <u>Checks, Drafts, Etc</u>. All checks, drafts, or orders for the payment of money, notes, or other evidences of indebtedness issued in the name of the Institute shall be signed by such officer or officers, agent or agents of the Institute and in such manner as shall from time to time be provided by resolution of the Board. In the absence of such provision by the Board such instrument shall be signed by the chief executive officer of FRD, the Chair, the Vice Chair, Treasurer and countersigned by one of the foregoing or such other officer as the Board may designate.

Section 9.5. <u>Audit</u>. A qualified firm of certified public accountants may be designated, from time to time, and at the discretion of FRD, as auditors prior to the Institute's close of business for each fiscal year to audit and examine the books of account of the

Institute, and to certify and report in writing to the Board and FRD the annual balances and condition of such books as prepared at the close of the fiscal year.

Section 9.6. <u>Fiscal Year</u>. The fiscal year of the Institute shall end on June 30 but may be changed by FRD Board, in its sole discretion.

Section 9.7. <u>Reports; Other Information</u>.

- (a) A detailed annual report of the work and financial condition of the Institute, including any audited financial statement and management letter, shall be submitted jointly by FRD and the Institute on an annual basis to the secretary of the board of trustees of MUSC, following its approval by the FRD Board.
- (b) By the last day of the fifth month following the close of the tax year, FRD and the Institute shall provide a written notice to the president of MUSC and the chair of the MUSC board of trustees, describing the type and amount of support provided by FRD and the Institute to MUSC during the prior tax year, a copy of FRD's and the Institute's Form 990 that were most recently filed as of the date the notification is provided; and a copy of each supporting organizations' governing documents, as most recently amended, to the extent not previously provided.
- (c) All books and records of the Institute shall be available for review and/or audit by MUSC, or any person acting on its behalf.

ARTICLE X CONFLICT OF INTEREST

The Board shall implement and enforce the Conflict of Interest Policy attached to these Bylaws as <u>Appendix A</u>.

ARTICLE XI

INDEMNIFICATION

Section 11.1. <u>Expenses and Liabilities</u>. To the maximum extent permitted by the Nonprofit Act, the Institute shall indemnify each of its member, Directors, officers and Agents against expenses, judgments, fines, settlements and other amounts actually and reasonably incurred in connection with any proceeding arising by reason of the fact that any such person is or was an agent of the Institute. For purposes of this Article, an "Agent" of the Institute includes any person who is or was a director, officer, employee, or other agent of the Institute; or is or was serving at the request of the Institute as a director, officer,

employee, partner, joint venturer, trustee, or similar position.

Section 11.2. <u>Advance of Expense</u>. To the extent permitted by law, the Institute shall advance expenses incurred or to be incurred by a Director, officer, or Agent in connection with any proceeding arising by reason of the fact that said person was or is a Director, officer, or Agent of the Institute, provided said advance is authorized by the Board and permitted by law.

Section 11.3. <u>Insurance</u>. The Board may adopt a resolution authorizing the purchase and maintenance of insurance on behalf of any Director, officer, or Agent of the Institute against any liability asserted against or incurred by such persons in such capacity or arising out of their status as such, whether or not the Institute would have the power to indemnify such persons against that liability under the provisions of this Article.

ARTICLE XII DISSOLUTION

Upon dissolution of the Institute, the remaining assets of the Institute shall be distributed in accordance with the Institute's Articles, these Bylaws, and applicable law.

ARTICLE XIII RESTRICTION

The Institute may, with the approval of the Board, receive as its sources of income, gifts, bequests from wills, and restricted and unrestricted use of monies or properties of any kind or description from any and all sources, but no gift, bequest or devise of any such property shall be received and accepted if it be for other than charitable purposes as limited to and including charitable, scientific, literary, or other educational purposes within the meaning of those terms as used in Section 501(c)(3) of the Internal Revenue Code or as shall, in the opinion of the Board or FRD, jeopardize the federal income tax exemption of the Institute pursuant to Section 501(c)(3) of the Internal Revenue Code.

ARTICLE XIV Separate and Independent Organization

Although the intention of the Institute is to cooperate, augment and aid, in the ways previously enumerated, the mission and programs of MUSC, FRD, and any other nonprofit exempt organization(s) within the meaning of Section 501(c)(3) of the Internal Revenue Code organized for the support and benefit of MUSC, it is here and now to be clearly stated

that the Institute is a separate and independent organization to be operated under its own charter and articles of incorporation as laid down in the law of South Carolina for this and similar nonprofit corporations.

ARTICLE XV General Provisions

Section 15.1. <u>Seal</u>. The Institute shall be authorized to adopt a seal in circular form for its use.

Section 15.2. <u>General</u>. The regulation of the business and conduct of the affairs of the Institute will conform to federal and state income tax laws and any other applicable federal and state law, including, but not limited to, the Nonprofit Act. In the interpretation of these Bylaws, wherever reference is made to the United States Code, the Code or Treasury Regulations thereunder, the Nonprofit Act, the South Carolina Code or any other statute, or to any section thereof, such reference will be construed to mean such code, act, laws, statutes, or section thereof, and the regulations thereunder, as the case may be, as heretofore or hereafter amended or supplemented or as superseded by laws or regulations covering equivalent subject matter.

Section 15.3. <u>Governing Law</u>. These Bylaws are executed and delivered in the State of South Carolina and they will be governed by, construed and administered in accordance with the laws of the State of South Carolina.

Section 15.4. <u>Plan of Implementation</u>. Upon the adoption of these Amended and Restated Bylaws, the Institute shall follow the plan of implementation, a true copy of which is attached hereto and incorporated herein as <u>Appendix B</u>, in order to transition the Board composition from the prior bylaws to these Amended and Restated Bylaws. Upon the completion of the Plan of Implementation as provided in <u>Appendix B</u>, this section 15.4 and <u>Appendix B</u> shall terminate and thereafter be deleted from these Bylaws in their entirety.

* * *

APPENDIX A

TO THE

BYLAWS OF

INSTITUTE FOR APPLIED NEUROSCIENCES, INC.

CONFLICTS OF INTEREST POLICY

ARTICLE I Purpose

The purpose of this conflicts of interest policy is to protect the interest of the Institute for Applied Neurosciences, Inc. (hereinafter the "*Corporation*") when it is contemplating entering a transaction or arrangement that might benefit the private interest of an officer or director of the Corporation. This policy is intended to supplement but not replace Sections 33-31-831 or 33-31-832 of the South Carolina Code or other applicable state laws governing conflicts of interest applicable to the Corporation.

ARTICLE II Definitions

1. Interested Person.

Any director, officer, or member of a committee with Board-delegated powers who has a direct or indirect Financial Interest, as defined below, is an Interested Person.

2. <u>Financial Interest</u>.

A person has a Financial Interest if the person has, directly or indirectly, through business, investment, or family:

- a. an ownership or investment in any entity with which the Corporation has a transaction or arrangement;
- b. a compensation arrangement with the Corporation or with any entity or individual with which the Corporation has a transaction or arrangement; or

c. a potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which the Corporation is negotiating a transaction or arrangement.

Compensation includes direct and indirect remuneration as well as gifts or favors that are substantial in nature.

For purposes of clarity, a Financial Interest shall not be deemed to include the acquisition or ownership by an Interested Party, solely as a passive investor with no involvement in the operation of the business, of no more than two percent (2%) of the ownership of a corporation, partnership, company, or other entity whose stock or ownership interest is publicly traded on a national securities exchange, the NASDAQ Stock Market or over-the-counter.

A Financial Interest is not necessarily a conflict of interest. Under Article III, Section 2, a person who has a Financial Interest may have a conflict of interest only if the appropriate Board or committee decides that a conflict of interest exists.

ARTICLE III Procedures

1. <u>Duty to Disclose</u>.

In connection with any actual or possible conflict of interest, an Interested Person must disclose the existence of any Financial Interest of the Interested Person and all material facts to the Directors and members of committees with Board-delegated powers considering the proposed transaction or arrangement.

2. <u>Determining Whether a Conflict of Interest Exists.</u>

After disclosure of the Financial Interest and all material facts, and after any discussion with the Interested Person, the Interested Person shall leave the Board or committee meeting while the determination of a conflict of interest is discussed and voted upon. The remaining Board or committee members shall decide if a conflict of interest exists.

3. <u>Procedures for Addressing the Conflict of Interest.</u>

- a. An Interested Person may make a presentation at the Board or committee meeting, but after such presentation, the Interested Person shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement that results in the conflict of interest.
- b. The Chair of the Board or the chair of the committee shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the

proposed transaction or arrangement. In the event that the Chair is in a position of conflict, the Vice-Chair will assume the foregoing responsibility.

- c. After exercising due diligence, the Board or committee shall determine whether the Corporation can obtain a more advantageous transaction or arrangement with reasonable efforts from a person or entity that would not give rise to a conflict of interest.
- d. If a more advantageous transaction or arrangement is not reasonably attainable under circumstances that would not give rise to a conflict of interest, the Board or committee shall determine by a majority vote of the disinterested directors whether the transaction or arrangement is in the Corporation's best interest and for its own benefit and whether the transaction is fair and reasonable to the Corporation and shall make its decision as to whether to enter into the transaction or arrangement in conformity with such determination.

4. Violations of the Conflicts of Interest Policy.

- a. If the Board or committee has reasonable cause to believe that a member has failed to disclose an actual or possible conflict of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose.
- b. If, after hearing the response of the member and making such further investigation as may be warranted in the circumstances, the Board or committee determines that the member has in fact failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

ARTICLE IV Records of Proceedings

The minutes of the Board and all committees with Board-delegated powers shall contain:

- a. The names of the persons who disclosed or otherwise were found to have a Financial Interest in connection with an actual or possible conflict of interest, the nature of the Financial Interest, any action taken to determine whether a conflict of interest was present, and the Board's or committee's decision as to whether a conflict of interest in fact existed.
- b. The names of the persons who were present for discussions and votes relating to the transaction or arrangement, the content of the discussion, including any alternatives to the proposed transaction or arrangement, and a record of any votes taken in connection therewith.

ARTICLE V Compensation Committees

A voting member of any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the Corporation for services is precluded from voting on matters pertaining to that member's compensation.

ARTICLE VI Annual Statements

Each director, principal officer, and member of a committee with Board-delegated powers shall annually sign a statement which affirms that such person—

- a. has received a copy of the Conflicts of Interest Policy,
- b. has read and understands the policy,
- c. has agreed to comply with the policy, and
- d. understands that the Corporation is a charitable organization and that in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

ARTICLE VII Periodic Reviews

To ensure that the Corporation operates in a manner consistent with its charitable purposes and that it does not engage in activities that could jeopardize its status as an organization exempt from federal income tax, periodic reviews shall be conducted. The periodic reviews shall, at a minimum include the following subjects:

- a. Whether compensation arrangements and benefits are reasonable and are the result of arm's-length bargaining.
- b. Whether transactions with parties are properly recorded, reflect reasonable payments for goods and services, further the Corporation's charitable purposes and do not result in inurement or impermissible private benefit.

ARTICLE VIII Use of Outside Experts

In conducting the periodic reviews provided for in Article VII, the Corporation may, but need not, use outside advisors. If outside experts are used, their use shall not relieve the Board of its responsibility for ensuring that periodic reviews are conducted.

Robert F Labadie, MD, PhD Abbreviated Curriculum Vitae Professor 843-792-7161 labadie@musc.edu

Personal Information

No activities entered.

Contact Information

Office Number: RT1130 Office Building: P.O. Box MSC 550 Street 1: 135 Rutledge Ave Street 2: Charleston, South Carolina 29425

Degrees

Degree	Discipline	Institution	City	State or Province	Nation	Year Conferred	Title of Dissertation or Thesis	
M.S.	Management in Health Care		. 12 No. 1, 201 (p. 140			2013		
M.D.	Medicine	University of Pittsburgh				1996		
Ph.D.	Engineering	University of Pittsburgh				1996		
B.S.	Mechanical Engineering	University of Notre Dame				1988		

Post-Graduate Training

Туре	Institution	Specialty	Begin Month/Year	End Month/Year
Internship	University of North Carolina Hospitals	General Surgery	June 1996	June 1997
Residency	University of North Carolina Hospitals	Otolaryngology - Chief Resident	June 2000	June 2001
Residency	University of North Carolina Hospitals	Otolaryngology	June 1997	June 2000

Additional Training

Start Date	End Date	Institution	Specialty	Туре
2011-09- 01	2011-12- 31	Belmont University	Mini MBA	Course
2001-04- 19	2001-04- 21	Carolina Ear Institute	Temporal Bone	Course
2000-12- 01	2000-12- 31	Med-El® Investigators Meeting and Research Forum	Med-El® Investigators Meeting and Research Forum	Forum
1999-12- 9	1999-12- 31	Med-El® Split Electrode Meeting	Med-El® Split Electrode Meeting	Course
1999-11- 12	1999-11- 13	Advances in Skull Base Surgery;	Advances in Skull Base Surgery	Course

1999-07-	1999-08-	Raising the Standard in Endoscopic Sinus	Raising the Standard in Endoscopic Sinus	Course
31	01	Surgery	Surgery	

Certifications

Organization Name	Type of Certification	Specialty	Sub- Specialty		Effective Date	Expiration Date (if none, see note above)	Lifetime Board Certification
American Board of Otolaryngology	Board Certification			16780	2002	2022	

Professional Licensures

Title	Month / Year Originally Conferred	Month/Year Expires	Organization	State of Issue	Country for International Issue	Number (if applicable)	Type Description
Tennessee Medical License	January 2001				ykan da ada ang kang kang kang kang kang kang kang	MD35159	al e color e o acter a constante color de la constante de la constante de la constante de la constante de la c

MUSC Rank and Promotion History

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Professor	Medical University of South Carolina	College of Medicine	Otolaryngology - Head and Neck Surgery		2022-01-01	

Non-MUSC Rank and Promotion History

Faculty Rank	Institution/Organization	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Assistant Professor	Vanderbilt University Medical Center	<u>,, 7, , , , , , , , , , , , , , , , </u>			2001	
Assistant Professor	Vanderbilt University Medical Center		Biomedical Engineering		2005	
Associate Professor	Vanderbilt University Medical Center		Biomedical Engineering		2007	
Associate Professor with Tenure	Vanderbilt University Medical Center		Otolaryngology-Head and Neck Surgery		2007	
Professor	Vanderbilt University Medical Center		Biomedical Engineering		2013	
Professor with Tenure	Vanderbilt University Medical Center		Otolaryngology-Head and Neck Surgery		2013	

Jason Newman, MD Abbreviated Curriculum Vitae V1 Professor

newmajas@musc.edu

Degrees

1997	M.D., Medicine, Thomas Jefferson University
1993	B.A., Biology and Society, Cornell University

Post-Graduate Training

Fellowship, University of Pennsylvania, Head and Neck Surgery/Oncology and Microvascular Surgery, July 2004, June 2005

Internship, Pennsylvania Hospital, General Surgery, July 1997, June 1998

Residency, New York Presbyterian Hospital of Columbia and Cornell and Memorial Sloan Kettering Cancer Center, Otolaryngology, July 1999, June 2002

Residency, Manhattan Eye, Ear & Throat Hospital, Otolaryngology, July 1998, June 1999

Certifications

American Heart Association, Type of Certification: Life Suppoort, Specialty: BLS, Certification Number: N/A, Effective Date: 2004

American Heart Association, Type of Certification: Life Support, Specialty: ACLS, Certification Number: N/A, Effective Date: 2004

American Board of Otolaryngology, Type of Certification: Board Certification, Certification Number: N/A, Effective Date: 2003-05-09, Expiration Date (if none, see note above): 2026-04-01

Professional Licensures

Pennsylvania Medical License, Month / Year Originally Conferred: April 2004

MUSC Rank and Promotion History

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
	Medical University of South Carolina	College of Medicine	Otolaryngology - Head and Neck Surgery		2022-03-01	

Faculty Rank	Institution/Organization	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Assistant Professor of Otorhinolaryngology	Head and Neck Surgery at the Hospital of the University of Pennsylvania				2005- 01-01	2014- 12-31
Assistant Professor of	University of Pennsylvania School of		2005-	2014-		
Otorhinolaryngology	Medicine		01-01	12-31		
Assistant Professor of			2011-	2014-		
Otorhinolaryngology			01-01	12-31		

Otorhinolaryngology		01-01	
Professor of	Pennsylvania Hospital	2020-	
Otorhinolaryngology	Hospital of the University of Pennsylvania	01-01	
Professor of	Head and Neck Surgery at the	2020-	
Professor of Otorhinolaryngology	University of Pennsylvania School of Medicine	2020- 01-01	
Associate Professor of Otorhinolaryngology	Head and Neck Surgery at the Hospital of the University of Pennsylvania	2014- 01-01	2020- 12-31
Associate Professor of Otorhinolaryngology	University of Pennsylvania School of Medicine	2014- 01-01	2020- 12-31
Associate Professor of Otorhinolaryngology	Pennsylvania Hospital	2014- 01-01	2020- 12-31

Ozgur Sahin, PhD Abbreviated Curriculum Vitae Professor sahin@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

2008	Ph.D., Molecular Genome Analysis, German Cancer Research Center and University of Heidelberg
2005	M.Sc., International Molecular and Cellular Biology, Middle East Technical University
2002	B.Sc., Molecular Biology and Genetics, Middle East Technical University

Post-Graduate Training

No activities entered.

Additional Training

No activities entered.

Certifications

No activities entered.

Professional Licensures

No activities entered.

MUSC Rank and Promotion History

Professor, Medical University of South Carolina, College of Medicine, Biochemistry and Molecular Biology, 2022-05-01

Non-MUSC Rank and Promotion History

Instructor, UT MD Anderson Cancer Center, Molecular and Cellular Oncology, 2012-01-01, 2013-08-31 Associate Professor, University of South Carolina, Drug Discovery and Biomedical Sciences, 2017-10-01 Associate Professor, (Docentlik) from the Higher Education Council of Turkey (YOK), 2017 Assistant Professor, Bilkent University, , 2013, 2018

Badih Joseph Elmunzer, MD, MSc Abbreviated Curriculum Vitae Professor 843-876-4261 elmunzer@musc.edu

Personal Information

No activities entered.

Contact Information

Office Number: 275 Office Building: P.O. Box MSC 702 Street 1: Thurmond Gazes - 30 Courtenay Drive Street 2: Charleston, South Carolina 29425

Degrees

2002 M.D., Medicine, University of Miami School of Medicine, Florida, United States
1998 B.S., Biology, University of Miami, Florida, United States

Post-Graduate Training

Post-Doctorate, University Hospitals Case Medical Center, Cleveland, OH, Special Fellow in Developmental Endoscopy and Natural Orifice Transluminal Endoscopic Surgery (NOTES) research, August 2007, December 2007

Post-Doctorate, University of Michigan Medical Center, Ann Arbor, MI, Fellow in Gastroenterology and Advanced Endoscopy, July 2005, June 2008

Post-Doctorate, University of Texas-Southwestern Medical Center, Parkland Memorial Hospital, Dallas, TX, Resident in Internal Medicine, July 2002, June 2005

Additional Training

No activities entered.

Certifications

American Board of Internal Medicine, Gastroenterology, Effective Date: 2008

American Board of Internal Medicine, Effective Date: 2005

Professional Licensures

South Carolina Medical License - MD 36694

Michigan Medical License 4301084830

MUSC Rank and Promotion History

Adjunct Associate Professor, Medical University of South Carolina, College of Medicine, Medicine, Gastroenterology & Hepatology, 2014-06-01, 2014-06-30

Professor, Medical University of South Carolina, College of Medicine, Medicine, Gastroenterology & Hepatology, 2018-07-01

Associate Professor, Medical University of South Carolina, College of Medicine, Medicine, Gastroenterology & Hepatology, 2014-07-01, 2018-06-30

Non-MUSC Rank and Promotion History

Lecturer, University of Michigan, Internal Medicine, Gastroenterology, 2008-07-01, 2011-03-01

S. David McSwain, MD Abbreviated Curriculum Vitae V1 Professor 843-876-0506 mcswains@musc.edu

Degrees

2002	M.D., Medicine, University of North Carolina Medical School, North Carolina, United States
2001	M.P.H., Health Policy and Administration, University of North Carolina, North Carolina, United States
1997	B.S., Biology and Psychology, Duke University, North Carolina, United States

Post-Graduate Training

Fellowship, Duke University Medical Center, Pediatric, July 2006, June 2009 Internship, University of North Carolina Hospital, Internal Medicine/Pediatrics, July 2002, June 2003 Residency, University of North Carolina Hospital, Internal Medicine/Pediatrics, July 2003, June 2006

Certifications

The Council for Six Sigma Certification, Type of Certification: Yellow Belt Certification, Certification Number: , Effective Date: 2016-12-12

IT Infrastructure Library Foundation, Type of Certification: Certificate in IT Service Management, Certification Number: , Effective Date: 2017-10-20

American Board of Preventative Medicine, Type of Certification: Board Certification, Specialty: Clinical Informatics, Certification Number: 31-18561, Effective Date: 2021-01-01

American Board of Pediatrics, Type of Certification: Board Certification, Specialty: General Pediatrics, Certification Number: 86963, Effective Date: 2006-10-24

American Board of Pediatrics, Type of Certification: Board Certification, Specialty: Pediatric Critical Care Medicine, Certification Number: 1784, Effective Date: 2011

American Board of Internal Medicine, Type of Certification: Board Certification, Specialty: General Internal Medicine, Certification Number: , Effective Date: 2006-09-08, Expiration Date (if none, see note above): 2016-12-31

Professional Licensures

South Carolina Medical License, Month / Year Originally Conferred: September 2009, South Carolina Board of Medical Examiners, South Carolina, 31811

North Carolina Medical License, Month / Year Originally Conferred: July 2002, Month/Year Expires: June 2010, North Carolina Medical Board, North Carolina

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Assistant Professor	Medical University of South Carolina	College of Medicine	Pediatrics	Pediatric Critical Care	2009-08-17	2014-12-31
Associate Professor	Medical University of South Carolina	College of Medicine	Pediatrics	Pediatric Critical Care	2015-01-01	2021-12-31
Professor	Medical University of South Carolina	College of Medicine	Pediatrics	Pediatric Critical Care	2022-01-01	2022-02-14

Adjunct	Medical University of	College of	Pediatrics	Pediatric	2022-02-15	2022-06-30
Professor	South Carolina	Medicine		Critical Care		

Faculty	Institution/Organization	College	Department	Division	Effective Start Date of	Effective End Date of
Rank					Rank	Rank

Prince Anand, MD Abbreviated Curriculum Vitae V1 Clinical Associate Professor mohanp@musc.edu

Degrees

2004

M.D., Medicine, Medical University of Pleven

Post-Graduate Training

Fellowship, Columbia University Medical Center, Renal/Pancreas Transplant , July 2013, June 2014 Post-Doctorate, Columbia University Medical Center, Nephrology Fellow, July 2011, June 2013 Post-Doctorate, Columbia University Medical Center, Renal/Pancreas Transplant Fellow, July 2013, January 2099 Post-Doctorate, New York Hospital Queens, Internal Medicine Residency, June 2007, June 2011 Post-Doctorate, New York Hospital Queens, Chief Medical Resident, June 2010, June 2011

Certifications

American Board of Internal Medicine, Nephrology, Effective Date: 2013 American Board of Internal Medicine, Effective Date: 2010

Professional Licensures

South Carolina Medical License, Month / Year Originally Conferred: January 2016, Month/Year Expires: October 2016 Pennsylvania State License, Month / Year Originally Conferred: Ongoing New York Medical License, Month / Year Originally Conferred: Ongoing Indiana Medical License, Month / Year Originally Conferred: Ongoing

MUSC Rank and Promotion History

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Assistant Professor	Medical University of South Carolina	College of Medicine	Medicine	Nephrology	2014-08-01	2016-10-31
Clinical Associate Professor	Medical University of South Carolina	College of Medicine	Medicine	Nephrology	2021-09-01	

Faculty Rank	Institution/Organization	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Instructor	Columbia University Medical Center		Medicine		2013-07-01	2014-07-31
Clinical Associate Professor of Medicine	Geisinger Commonwealth Medical School				2018-03-01	

Carrie Herzke, MD, MBA Abbreviated Curriculum Vitae V1 Associate Professor herzke@musc.edu

Degrees

2017	M.B.A., Business Administration, Carey School of Business, Johns Hopkins
2004	M.D., Medicine, Medical College of Virginia
2000	B.A., History, University of Virginia

Post-Graduate Training

Residency, Duke University Medical Center, Internal Medicine-Pediatrics, July 2004, June 2008

Certifications

American Board of Pediatrics Hospital Medicine , Type of Certification: Board Certification , Certification Number: N/A, Effective Date: 2009 American Board of Pediatrics, Type of Certification: Board Certification , Certification Number: N/A, Effective Date: 2008 American Board of Internal Medicine , Type of Certification: Board Certification, Certification Number: N/A, Effective Date: 2008

Professional Licensures

Maryland Medical License , Month / Year Originally Conferred: PRESENT 2008

MUSC Rank and Promotion History

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Associate Professor	Medical University of South Carolina	College of Medicine	Medicine	Hospital Medicine	2022-02-07	

Faculty Rank	Institution/Organization	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Assistant Professor	, Johns Hopkins				2009	

Marcelo L. Hochman, MD Abbreviated Curriculum Vitae Affiliate Professor hochman@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

1985	M.D., Medicine, University of Texas, San Antonio, Texas, United States
1981	B.A., Biology, University of Texas at Austin, Texas, United States

Post-Graduate Training

Fellowship, Washington University, Facial Plastic and Reconstructive Surgery, July 1990, June 1991 Fellowship, Arkansas Children's Hospital, Cleft Lip and Palate/Vascular Birthmarks, July 1990, June 1991 Fellowship, St Louis University, Facial Plastic and Reconstructive Surgery, July 1990, June 1991 Residency, Stanford University Medical Center, Otolaryngology-Head and Neck Surgery, July 1985, June 1990

Additional Training

No activities entered.

Certifications

American Board of Otolaryngology, Type of Certification: Board Certification, Specialty: Head and Neck Surgery, Certification Number: N/A, Effective Date: 1990-10-02, Lifetime Board Certification: Yes

American Board of Facial plastic and Reconstructive Surgery , Type of Certification: Board Certification, Certification Number: N/A, Effective Date: 1997-07-01, Lifetime Board Certification: Yes

Professional Licensures

South Carolina Medical License, Month / Year Originally Conferred: December 1991, Month/Year Expires: June 2023, 15785

MUSC Rank and Promotion History

Affiliate Professor, Medical University of South Carolina, College of Medicine, Otolaryngology - Head and Neck Surgery, 2020-07-01, 2023-06-30

Affiliate Professor, Medical University of South Carolina, College of Medicine, Surgery, Plastic Surgery, 2022-03-01, 2023-06-30

Affiliate Assistant Professor, Medical University of South Carolina, College of Medicine, Otolaryngology - Head and Neck Surgery, 2018-07-01, 2020-06-30

Clinical Assistant Professor, Medical University of South Carolina, College of Medicine, Otolaryngology - Head and Neck Surgery, 2000-08-01, 2018-06-30

Non-MUSC Rank and Promotion History

Clinical Instructor, Washington University, Otolaryngology-Head and Neck Surgery, 1990-01-01, 1991-12-31 Clinical Instructor, St. Louis University, Otolaryngology-Head and Neck Surgery, 1990-01-01, 1991-12-31 Clinical Instructor, University of Arkansas for Medical Sciences,, Otolaryngology-Head and Neck Surgery, 199101-01, 1991-12-31

Associate Professor, University of Arkansas for Medical Sciences, Dermatology, 1998-01-01, 1999-12-31

Assoc. Professor with Tenure, University of Arkansas for Medical Sciences, Otolaryngology-Head and Neck Surgery, Facial Plastic and Reconstructive Surgery , 1998-01-01, 1999-12-31

Albert Anthony Maniscalco, MD Abbreviated Curriculum Vitae V1 Clinical Associate Professor 843-792-4123 manisca@musc.edu

Degrees

1966	M.D., Medicine, New York Medical College, New York, United States
1962	B.S., Biology, University of Notre Dame, Indiana, United States

Post-Graduate Training

Post-Doctorate, Duke University Medical Center, Fellowship in Nephrology under Dr. Roscoe Robinson, September 1972, September 1974

Post-Doctorate, St. Vincent's Hospital & Medical Center, New York, NY, Rotating Internship, September 1966, September 1967

Post-Doctorate, St. Vincent's Hospital & Medical Center, New York, NY, Junior Assistant Resident in Medicine, September 1967, September 1968

Post-Doctorate, St. Vincent's Hospital & Medical Center, New York, NY, Assistant Resident in Medicine, September 1968, September 1969

Post-Doctorate, St. Vincent's Hospital & Medical Center, New York, NY, Chief Resident in Medicine, September 1969, September 1970

Certifications

American Board of internal Medicine: Nephrology, Effective Date: 1976 American Board of Internal Medicine, Effective Date: 1972

Professional Licensures

South Carolina New York

MUSC Rank and Promotion History

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Clinical Assistant Professor	Medical University of South Carolina	College of Medicine	Medicine	Nephrology	2010-01-01	2019-06-30
Clinical Associate Professor	Medical University of South Carolina	College of Medicine	Medicine	Nephrology	2019-07-01	2020-02-09
Clinical Associate Professor	Medical University of South Carolina	College of Medicine	Medicine	Nephrology	2021-12-13	

Non-MUSC Rank and Promotion History

Faculty Rank Institution/Organization College Department Division Effective Start Date of Rank Effective End Date of Rank

Jason Newman, MD Abbreviated Curriculum Vitae V1 Professor

newmajas@musc.edu

Degrees

1997	M.D., Medicine, Thomas Jefferson University
1993	B.A., Biology and Society, Cornell University

Post-Graduate Training

Fellowship, University of Pennsylvania, Head and Neck Surgery/Oncology and Microvascular Surgery, July 2004, June 2005

Internship, Pennsylvania Hospital, General Surgery, July 1997, June 1998

Residency, New York Presbyterian Hospital of Columbia and Cornell and Memorial Sloan Kettering Cancer Center, Otolaryngology, July 1999, June 2002

Residency, Manhattan Eye, Ear & Throat Hospital, Otolaryngology, July 1998, June 1999

Certifications

American Heart Association, Type of Certification: Life Suppoort, Specialty: BLS, Certification Number: N/A, Effective Date: 2004

American Heart Association, Type of Certification: Life Support, Specialty: ACLS, Certification Number: N/A, Effective Date: 2004

American Board of Otolaryngology, Type of Certification: Board Certification, Certification Number: N/A, Effective Date: 2003-05-09, Expiration Date (if none, see note above): 2026-04-01

Professional Licensures

Pennsylvania Medical License, Month / Year Originally Conferred: April 2004

MUSC Rank and Promotion History

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Professor	Medical University of South Carolina	College of Medicine	Otolaryngology - Head and Neck Surgery		2022-03-01	

Faculty Rank	Institution/Organization	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Assistant Professor of Otorhinolaryngology	Head and Neck Surgery at the Hospital of the University of Pennsylvania				2005- 01-01	2014- 12-31
Assistant Professor of Otorhinolaryngology	University of Pennsylvania School of Medicine				2005- 01-01	2014- 12-31
Assistant Professor of Otorhinolaryngology	Pennsylvania Hospital				2011- 01-01	2014- 12-31

Associate Professor of	Pennsylvania Hospital	2014-	2020-
Otorhinolaryngology		01-01	12-31
Associate Professor of	University of Pennsylvania School of	2014-	2020-
Otorhinolaryngology	Medicine	01-01	12-31
Associate Professor of Otorhinolaryngology	Head and Neck Surgery at the Hospital of the University of Pennsylvania	2014- 01-01	2020- 12-31
Professor of	University of Pennsylvania School of	2020-	
Otorhinolaryngology	Medicine	01-01	
Professor of Otorhinolaryngology	Head and Neck Surgery at the Hospital of the University of Pennsylvania	2020- 01-01	
Professor of Otorhinolaryngology	Pennsylvania Hospital	2020- 01-01	

John V Pastore, MD, MBA **Abbreviated Curriculum Vitae** Clinical Professor pastorej@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

2020	M.B.A., Business Administration, State University of NewYork at Buffalo School of Management
1995	M.D., Medicine, St. George's University School of Medicine
1991	B.S., Biology, Fordham University

Post-Graduate Training

Residency, State University of New York at Buffalo The Women and Children's Hospital of Buffal, General Pediatrics, July 1995, June 1998

Additional Training

No activities entered.

Certifications

American Board of Pediatrics, Type of Certification: Board Certification, Specialty: Pediatrics, Certification Number: 65382, Effective Date: 1998-10-30, Expiration Date (if none, see note above): 2022-12-15

Professional Licensures

South Carolina Medical Board, Month / Year Originally Conferred: February 2022, 87253 New York Medical License, Month / Year Originally Conferred: November 2001

MUSC Rank and Promotion History

Clinical Professor, Medical University of South Carolina, College of Medicine, Pediatrics, General Pediatrics, 2022-05-01

Non-MUSC Rank and Promotion History

Volunteer Faculty, State University of New York at Stony Brook, Pediatrics, 2002-01-01, 2004-12-31 Clinical Associate Professor, Jacobs School of Medicine and Biomedical Sciences, Pediatrics, 2018-01-01 Clinical Associate Professor, John R. Oishei Children's Hospital of Buffalo, Pediatrics, 2018-01-01 Clinical Assistant Professor, Jacobs School of Medicine and Biomedical Sciences, Pediatrics, 2005-01-01, 2018-12-31

Krishna G. Patel, MD, PhD Abbreviated Curriculum Vitae V1 Professor 843-792-8299 patelkg@musc.edu

Degrees

2002	M.D., Ph.D., Medicine and Molecular Medicine, Medical College of Georgia, Georgia, United States
1994	B.A., History, Columbia University in the City of New York, New York, United States

Post-Graduate Training

Post-Doctorate, University of California, Davis Medical Center, Facial Plastic and Reconstructive Surgery Fellowship, September 2007, September 2008

Post-Doctorate, University of North Carolina Hospitals, Resident, September 2003, September 2007

Certifications

Otolaryngology-Head and Neck Surgery, Effective Date: 07/2008 Facial Plastic and Reconstructive Surgery, Effective Date: 06/2011

Professional Licensures

South Carolina California

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MUSC Rank and Promotion History

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Assistant Professor	Medical University of South Carolina	College of Medicine	Otolaryngology - Head and Neck Surgery		2008-08-18	2015-06-30
Associate Professor	Medical University of South Carolina	College of Medicine	Otolaryngology - Head and Neck Surgery		2015-07-01	2020-12-31
Professor	Medical University of South Carolina	College of Medicine	Otolaryngology - Head and Neck Surgery		2021-01-01	
Professor	Medical University of South Carolina	College of Medicine	Surgery	Plastic Surgery	2022-01-01	

Faculty	Institution/Organization	College	Department	Division	Effective Start Date of	Effective End Date of
Rank					Rank	Rank

Patricia A Resick, PhD Abbreviated Curriculum Vitae V1 Adjunct Professor resick@musc.edu

Degrees

1976	B.A., Kent State University
	Ph.D., Clinical Psychology
1974	M.A., University of Georgia

Post-Graduate Training

No activities entered.

Certifications

American Board of Professional Psychology, Specialist in Cognitive and Behavioral Therapy, Type of Certification: American Board of Professional Psychology, Certification Number: N/A, Effective Date: 2010

Professional Licensures

Psychologist and Health Service Provider State of North Carolina, Month / Year Originally Conferred: February 2015, 4745

Psychologist and Health Service Provider State of Missouri, Month / Year Originally Conferred: October 1981, Month/Year Expires: December 2015, R0078

MUSC Rank and Promotion History

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Adjunct Professor	Medical University of South Carolina	College of Medicine	Psychiatry and Behavioral Sciences		2022-02-01	2022-06-30

Faculty Rank	Institution/Organization	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Assistant-Assocate Professor	University of South Dakota	allan i dhetadh stakadhar			1976-01-01	1980-12-31
Associate Professor	University of Missouri-St. Louis				1981-01-01	1987-12-31
Professor	University of Missouri-St. Louis				1987-01-01	2006-12-31
Curators' Professor	University of Missouri-St. Louis				2000-01-01	2006-12-31
Professor of Psychology	Boston University				2004-01-01	2013-12-31
Professor of Psychiatry	Boston University School of Medicine				2004-01-01	2014-12-31
Adjunct Professor	Duke University Medical Center				2013-08-01	2014-12-31

Professor of	Duke University Medical	2014-01-01
Psychiatry	Center	

Ozgur Sahin, PhD Abbreviated Curriculum Vitae Professor sahin@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

2008	Ph.D., Molecular Genome Analysis, German Cancer Research Center and University of Heidelberg
2005	M.Sc., International Molecular and Cellular Biology, Middle East Technical University
2002	B.Sc., Molecular Biology and Genetics, Middle East Technical University

Post-Graduate Training

No activities entered.

Additional Training

No activities entered.

Certifications

No activities entered.

Professional Licensures

No activities entered.

MUSC Rank and Promotion History

Professor, Medical University of South Carolina, College of Medicine, Biochemistry and Molecular Biology, 2022-05-01

Non-MUSC Rank and Promotion History

Instructor, UT MD Anderson Cancer Center, Molecular and Cellular Oncology, 2012-01-01, 2013-08-31 Associate Professor, University of South Carolina, Drug Discovery and Biomedical Sciences, 2017-10-01 Associate Professor, (Docentlik) from the Higher Education Council of Turkey (YOK), 2017 Assistant Professor, Bilkent University, , 2013, 2018

Frank R Voss, MD March 2021 - March 2022 Abbreviated Curriculum Vitae Assistant Professor vossf@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

Degree	Discipline	Institution	City	State or Province	Nation	Year Conferred	Title of Dissertation or Thesis
M.D.	Medicine	Harvard Medical School				1986	
B.S.	Biochemistry	Brown University				1982	

Post-Graduate Training

Туре	Institution	Specialty	Begin Month/Year	End Month/Year
Fellowship	Rush-Presbyterian - St. Luke's Medical Center	Joint Replacement	July 1992	June 1993
Residency	Harvard Combined Orthopaedic Program	Orthopaedic Surgery	July 1988	June 1992
Residency	Brigham and Women's Hospital	General Surgery	July 1986	June 1988

Additional Training

Start Date	End Date	Institution	Specialty	Туре
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Certifications

Organization Name	Type of Certification	Specialty	Sub- Specialty	Certification Number	Effective Date	Expiration Date (if none, see note above)	Lifetime Board Certification
American Board of Orthopaedic Surgery	Board Certification			N/A	1995- 07-13	2025-12-31	

Professional Licensures

Title	Month / Year Originally Conferred	Month/Year Organizatio Expires	n State of Issue	Country for International Issue		Type Description
South Carolina Board of Medical Examiners	September 1993	June 2023			16790	

Faculty	Institution	College	Department	Division	Effective Start	Effective End
Rank					Date of Rank	Date of Rank

Associate	Medical University of	College of	Orthopaedics and	2022-04-01
Professor	South Carolina	Medicine	Physical Medicine	

Faculty Rank	Institution/Organization	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Instructor	M1 Teaching - Anatomy				1994	2000
Instructor	M1 and M2 Problem Based Learning Small Group Leader				2003	2011

Marissa Wolfe, DVM **Abbreviated Curriculum Vitae** Associate Professor 843-876-5205 wolfea@musc.edu

Personal Information

No activities entered.

Contact Information

Office Number: STB 643 Office Building: P.O. Box MSC 777 Street 1: Thurmond Gazes - 30 Courtenay Drive Street 2: Charleston, South Carolina 29425

Degrees

2011	D.V.M., Veterinary Medicine, University of Georgia, College of Veterinary Medicine, Georgia, United States
2005	B.S., Biology, University of South Carolina, South Carolina, United States

Post-Graduate Training

Post-Doctorate, University of Michigan, Unit for Laboratory Animal Medicine, Postdoctoral Research Fellow, September 2011, September 2014

Additional Training

No activities entered.

Certifications

USDA National Veterinary Accreditation #062370

Professional Licensures

Michigan Veterinary License #6901010417

MUSC Rank and Promotion History

Associate Professor, Medical University of South Carolina, College of Medicine, Comparative Medicine, 2022-01-24

Assistant Professor, Medical University of South Carolina, College of Medicine, Comparative Medicine, 2014-07-07, 2019-11-12

Non-MUSC Rank and Promotion History

No activities entered.

Yuan Zhai, MD, PhD Abbreviated Curriculum Vitae Professor zhaiy@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

1998	Ph.D., Transplant Immunology, University of Wisconsin-Madison
1991	M.S., Biochemistry, Tsinghua University
1988	B.M., Medicine, Bejing Medical University

Post-Graduate Training

Post-Doctorate, University of Oxford Sir William Dunn School of Pathology, Medicine, July 2001, June 2002 Post-Doctorate, University of California-Los Angeles School of Medicine, Surgery, July 1998, June 2001

Additional Training

No activities entered.

Certifications

No activities entered.

Professional Licensures

No activities entered.

MUSC Rank and Promotion History

Professor, Medical University of South Carolina, College of Medicine, Surgery, Transplant Surgery, 2022-07-01

Non-MUSC Rank and Promotion History

Professor-in-Residence, UCLA School of Medicine, 2016-01-01 Associate Professor-in-Residence, UCLA School of Medicine, 2010-01-01, 2016-12-31 Adjunct Associate Professor, UCLA School of Medicine, 2009-01-01, 2010-12-31 Adjunct Assistant Professor, UCLA School of Medicine, 2003-01-01, 2009-12-31

David E Hall, MD Abbreviated Curriculum Vitae V1 Affiliate Professor halldav@musc.edu

Degrees

1976	M.D., Medicine, University of Chicago, Pritzker School of Medicine
1972	B.A., University of Missouri

Post-Graduate Training

Fellowship, Johns Hopkins University, General Pediatrics Academic Development Program, January 1979, December 1981

Internship, Johns Hopkins Hospital, Pediatrics,, January 1976, December 1977

Residency, Johns Hopkins Hospital, Pediatrics,, July 1977, June 1979

Certifications

American Board of Pediatrics , Type of Certification: Board Certification , Certification Number: 27456 , Effective Date: 1982

Professional Licensures

Tennessee Medical License , Month / Year Originally Conferred: January 2013 South Carolina Medical License , Month / Year Originally Conferred: January 2020 Ohio Medical License , Month / Year Originally Conferred: January 2010 Maryland Medical License, Month / Year Originally Conferred: January 1977 Georgia Medical License , Month / Year Originally Conferred: January 1992

MUSC Rank and Promotion History

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Affiliate Professor	Medical University of South Carolina	College of Medicine	Pediatrics	General Pediatrics	2021-12-01	2024-06-30

Faculty Rank	Institution/Organization	College D	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Assistant Professor	Johns Hopkins University School of Medicine				1991	1992
Assistant Professor	Emory University School of Medicine				1992	1994
Associate Clinical Professor	Emory University School of Medicine				1998	2010
Professor, Clinical Pediatrics	University of Cincinnati School of Medicine				2010	2013
Professor, Clinical Pediatrics	Vanderbilt University School of Medicine	f			2013	2020

Desmond P Kelly, MD Abbreviated Curriculum Vitae Adjunct Associate Professor kellydp@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

1977

M.B., Ch.B., Medicine and Surgery, Cape Town Medical School

Post-Graduate Training

Fellowship, University of Maryland, Developmental-Behavioral Pediatrics , March 2022, March 2022

Fellowship, University of North Carolina School of Medicine, Developmental-Behavioral Pediatrics , March 2022, March 2022

Residency, Southern Illinois University School of Medicine, Pediatrics, March 2022, March 2022

Additional Training

No activities entered.

Certifications

American Board of Pediatrics, Type of Certification: Board Certification, Specialty: General Pediatrics, Certification Number: 36137, Effective Date: 1987-01-01

American Board of Pediatrics, Type of Certification: Board Certification, Specialty: Developmental-Behavioral Pediatrics, Certification Number: 146, Effective Date: 2002-01-01

Professional Licensures

South Carolina Medical License, Month / Year Originally Conferred: January 1995

MUSC Rank and Promotion History

Adjunct Associate Professor, Medical University of South Carolina, College of Medicine, Pediatrics, Developmental-Behavioral Pediatrics, 2022-03-01, 2025-06-30

Non-MUSC Rank and Promotion History

Professor , University of South Carolina School of Medicine , Pediatrics, 2019-07-01 Clinical Professor, Clemson University, School of Health Research, 2014-11-01

Emily Lowell, PhD Abbreviated Curriculum Vitae Affiliate Associate Professor Iowellem@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

2011	Ph.D., Psychology, University of South Carolina
2008	M.A., Psychology, University of South Carolina
2006	B.S., Psychology, University of Maryland

Post-Graduate Training

Internship, Developmental Pediatrics Clinic, University of South Carolina School of Medicine, Psychology, August 2010, June 2011

Internship, Pediatric Infectious Disease Clinic, Psychology, August 2010, June 2011

Internship, Richland School District Two, Psychology, August 2010, June 2011

Additional Training

No activities entered.

Certifications

National Association of School Psychologists, Type of Certification: Board Certification, Certification Number: 41633, Effective Date: 2016-12-16, Expiration Date (if none, see note above): 2023-12-31

Professional Licensures

South Carolina Board of Examiners in Psychology, Month / Year Originally Conferred: December 2012, Month/Year Expires: November 2023, 1244

MUSC Rank and Promotion History

Affiliate Associate Professor, Medical University of South Carolina, College of Medicine, Pediatrics, Developmental-Behavioral Pediatrics, 2022-03-01, 2025-06-30

Non-MUSC Rank and Promotion History

Assistant Professor of Clinical Pediatrics, Prisma Health Midlands, 2011-08-01

MUSC MEDICAL UNIVERSITY of SOUTH CAROLINA

Medical University of South Carolina COLLEGE OF HEALTH PROFESSIONS ABBREVIATED CURRICULUM VITAE

Name:			Date:	3/15/2022	
	Jones	Walter		Joseph	
	Last	First		Middle	
Citizenship and/or	r Visa Status:	U.S. citizen			
Office Address:	DHLM, 151 Rutledge A	Ave., Building B, MSC 962	Telephone:	843-792-8464	1
E 1	Charleston, SC 29425-	9620			
Education: (Bacca	alaureate and above)				
Institution		Years Attended	Degree/Date	Field of Study	
Pennsylvania State	e University	1970-1974	B.A. / 1974	Political Science	
University of Wisco		1974-1975	M.A. / 1975	Political Science	
University of Wisco		1975-1980	Ph.D. / 1980	Political Science	
Medical University	of South Carolina	1989-1990	MHSA / 1990	Health Administrat	tion
Graduate Medical	Training: (Chronological)				
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Internship		Pla	<u>ce</u>		<u>Dates</u>
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Residencies or Po	ostdoctoral:	<u>r id</u>	<u>ce</u>		<u>Dates</u>
Board Certification	n:			Date:	
				Date:	
Licensure:				Date:	
				Date.	
				Date:	
	ents: (Begin with initial appoin	tment)			
	ents: <i>(Begin with initial appoin</i> <u>Rank</u>	tment) Institution			
Faculty appointme	Rank Visiting Instructor	Institution Purdue University		Date: <u>Department</u> Dept. of Political Sc	
Faculty appointme	Rank Visiting Instructor Acting Assistant Professor	Institution Purdue University University of Oklahoma		Date: Department Dept. of Political Sc Dept. of Political Sc	ience
Faculty appointme Years 1978-1979 1979-1980 1980-1987	Rank Visiting Instructor	Institution Purdue University		Date: <u>Department</u> Dept. of Political Sc	ience
Faculty appointme <u>Years</u> 1978-1979 1979-1980 1980-1987 1987-1990	RankVisiting InstructorActing Assistant ProfessorAssistant ProfessorAssociate Professor	Institution Purdue University University of Oklahoma Memphis State Universi Memphis State Universi	ity	Date: Department Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc	ience ience ience
Faculty appointme <u>Years</u> 1978-1979 1979-1980 1980-1987 1987-1990 1990-1995	RankVisiting InstructorActing Assistant ProfessorAssistant ProfessorAssociate ProfessorAssociate Professor	Institution Purdue University University of Oklahoma Memphis State Universi Memphis State Universi Medical University of Sc	ity ity puth Carolina	Date: Dept. of Political Sc Dept. of Health Sen	ience ience ience
Faculty appointme <u>Years</u> 1978-1979 1979-1980 1980-1987 1987-1990	RankVisiting InstructorActing Assistant ProfessorAssistant ProfessorAssociate Professor	Institution Purdue University University of Oklahoma Memphis State Universi Memphis State Universi	ity ity puth Carolina	Date: Department Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc	ience ience ience
Faculty appointme Years 1978-1979 1979-1980 1980-1987 1987-1990 1990-1995 1995-present	RankVisiting InstructorActing Assistant ProfessorAssistant ProfessorAssociate ProfessorAssociate ProfessorProfessor	Institution Purdue University University of Oklahoma Memphis State Universi Memphis State Universi Medical University of Sc Medical University of Sc	ity ity puth Carolina	Date: Department Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Health Sen DHLM	ience ience ience vices Admin.
Faculty appointme <u>Years</u> 1978-1979 1979-1980 1980-1987 1987-1990 1990-1995	RankVisiting InstructorActing Assistant ProfessorAssistant ProfessorAssociate ProfessorAssociate ProfessorProfessor	Institution Purdue University University of Oklahoma Memphis State Universi Memphis State Universi Medical University of Sc	ity ity puth Carolina	Date: Dept. of Political Sc Dept. of Health Sen	ience ience ience vices Admin.
Faculty appointme Years 1978-1979 1979-1980 1980-1987 1987-1990 1990-1995 1995-present	RankVisiting InstructorActing Assistant ProfessorAssistant ProfessorAssociate ProfessorAssociate ProfessorProfessor	Institution Purdue University University of Oklahoma Memphis State Universi Memphis State Universi Medical University of Sc Medical University of Sc	ity ity puth Carolina	Date: Department Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Health Sen DHLM	ience ience ience vices Admin.
Faculty appointme Years 1978-1979 1979-1980 1980-1987 1987-1990 1990-1995 1995-present	RankVisiting InstructorActing Assistant ProfessorAssistant ProfessorAssociate ProfessorAssociate ProfessorProfessor	Institution Purdue University University of Oklahoma Memphis State Universi Memphis State Universi Medical University of Sc Medical University of Sc	ity ity puth Carolina	Date: Department Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Health Sen DHLM	ience ience ience vices Admin.
Faculty appointme Years 1978-1979 1979-1980 1980-1987 1987-1990 1990-1995 1995-present	RankVisiting InstructorActing Assistant ProfessorAssistant ProfessorAssociate ProfessorAssociate ProfessorProfessor	Institution Purdue University University of Oklahoma Memphis State Universi Memphis State Universi Medical University of Sc Medical University of Sc	ity ity puth Carolina	Date: Department Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Health Sen DHLM	ience ience ience vices Admin.
Faculty appointme Years 1978-1979 1979-1980 1980-1987 1987-1990 1990-1995 1995-present	RankVisiting InstructorActing Assistant ProfessorAssistant ProfessorAssociate ProfessorAssociate ProfessorProfessor	Institution Purdue University University of Oklahoma Memphis State Universi Memphis State Universi Medical University of Sc Medical University of Sc	ity ity puth Carolina	Date: Department Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Health Sen DHLM	ience ience ience vices Admin.
Faculty appointme Years 1978-1979 1979-1980 1980-1987 1987-1990 1990-1995 1995-present	RankVisiting InstructorActing Assistant ProfessorAssistant ProfessorAssociate ProfessorAssociate ProfessorProfessor	Institution Purdue University University of Oklahoma Memphis State Universi Memphis State Universi Medical University of Sc Medical University of Sc	ity ity puth Carolina	Date: Department Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Political Sc Dept. of Health Sen DHLM	ience ience ience vices Admin.

MUSC MEDICAL UNIVERSITY of SOUTH CAROLINA

Medical University of South Carolina COLLEGE OF HEALTH PROFESSIONS ABBREVIATED CURRICULUM VITAE

Velozo Last	Craig			
	First		A Middle	
	USA		Midule	
151-B Rutledge	Avenue, CHP B330, MSC 962	Telephone:	_(843) 792-	9912
	29425			
,	Years Attended	Degree/Date	Field of Study	
Joly Cross	1074-1077	BA/1977	Psychology	
ity School of Medicine, S		BS/1984		herapy
ens, Ohio	1977-1981	MS/1981	Experimental P	sychology
ens, Ohio	1981-1984	Ph.D./1984	Experimental P	sychology
Training: (Chronologica		<u>1Ce</u>		Dates
stdoctoral:	Pla	<u>ICE</u>		Dates
: Occupational Thera	pist, Registered (No. 537266)		Date:	1985
			Date:	
Licensed Occupation	nal Therapist, State of South Card	olina (No. 4246)		2013
nto. (Pagin with initial	annointmont)	······	Date.	
Rank AssistantAssociate	Institution			erapy
	sor University of Florida		Occupational Th	erapy
Full Professor	Medical University of S	outh Carolina	Occupational Th	erapy
	ofessor		Date: Aug	ust, 2013
	Charleston, SC laureate and above) Holy Cross sity School of Medicine, S ens, Ohio ens, Ohio Training: (Chronologica stdoctoral:	151-B Rutledge Avenue, CHP B330, MSC 962 Charleston, SC 29425 Jaureate and above) Years Attended Holy Cross 1974-1977 ity School of Medicine, St. 1974-1977 isity School of Medicine, St. Intraining: (Chronological) Pla stdoctoral: Pla Istoctoral: Iticensed Occupational Therapist, Registered (No. 537266) Licensed Occupational Therapist, State of South Card Inst: (Begin with initial appointment) Rank Associate /Full Professor University of Illinois at O	151-B Rutledge Avenue, CHP B330, MSC 962 Telephone: Iaureate and above Years Attended Degree/Date Holy Cross 1974-1977 BA/1977 Bity School of Medicine, St. 1977-1981 MS/1981 ens, Ohio 1977-1981 MS/1981 ens, Ohio 1977-1981 MS/1984 ens, Ohio 1981-1984 Ph.D./1984 Training: (Chronological) Place Stdoctoral: Isocompatibility of Size (No. 537266) Licensed Occupational Therapist, Registered (No. 537266) Licensed Occupational Therapist, State of South Carolina (No. 4246) Institution AssistantAssociate Institution Professor University of Illinois at Chicago Professor University of Florida	151-B Rutledge Avenue, CHP B330, MSC 962 Telephone: _(843) 792- laureate and above) Years Attended Degree/Date Field of Study toly Cross 1974-1977 BA/1977 Psychology occupational 1982-1984 BS/1984 Occupational Therapist, Registered (No. 537266) Date: Licensed Occupational Therapist, State of South Carolina (No. 4246) Date: Date: Date: Noiressor Institution University of Illinois at Chicago Department Professor University of Florida Occupational Therapist, Occupational Therapist, of Florida Department

Dhandapani Kuppuswamy, PhD Abbreviated Curriculum Vitae V1 Associate Professor 843-876-5069 kuppusd@musc.edu

Degrees

1984	Ph.D., University of Madras, India, India
1979	M. Phil., Biochemistry, University of Madras, India, India
1975	B.Sc., Chemistry and Mathematics and Physics, University of Madras, India, India

Post-Graduate Training

- Post-Doctorate, Mount Sinai School of Medicine, New York, Post-Doctoral Fellow, Department of Biochemistry, September 1984, September 1986
- Post-Doctorate, University of Madras, India, Junior Research Fellow, Council of Scientific and Industrial Research, September 1981, September 1982
- Post-Doctorate, University of Madras, India, Senior Research Fellow, Council of Scientific and Industrial Research, September 1982, September 1984

Certifications

No activities entered.

Professional Licensures

No activities entered.

MUSC Rank and Promotion History

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Assistant Professor	Medical University of South Carolina	College of Medicine	Medicine	Cardiology	1994-01-17	2001-06-30
Associate Professor	Medical University of South Carolina	College of Graduate Studies			1995-04-12	2022-02-07
Associate Professor	Medical University of South Carolina	College of Medicine	Medicine	Cardiology	2001-07-01	2022-02-07
Professor	Medical University of South Carolina	College of Medicine	Medicine	Cardiology	2022-02-08	

Faculty	Institution/Organization	College	Department	Division	Effective Start Date of	Effective End Date of
Rank					Rank	Rank

Sally E. Self, MD Abbreviated Curriculum Vitae V1 Professor 843-792-3215 selfs@musc.edu

Degrees

1978	M.D., Medicine, Vanderbilt University, Tennessee, United States
1974	B.A., Mathematics and Molecular Biology, Vanderbilt University, Tennessee, United States

Post-Graduate Training

Post-Doctorate, Medical University of South Carolina, Fellow in Immunopathology, July 1984, June 1986 Post-Doctorate, Medical University of South Carolina, Resident in Anatomic Pathology, July 1978, June 1982 Post-Doctorate, Medical University of South Carolina, Resident in Laboratory Medicine, July 1982, June 1984

Certifications

American Board of Pathology - Immunopathology, Effective Date: 1985 American Board of Pathology - Anatomic and Clinical Pathology, Effective Date: 1984 American Board of Pathologist, Effective Date: 2013

Professional Licensures

South Carolina State Board of Medical Examiners, South Carolina License #9365

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Instructor	Medical University of South Carolina	College of Medicine	Pathology and Laboratory Medicine	16-2003270-0023	1987-01-01	1988-06-30
Assistant Professor	Medical University of South Carolina	College of Medicine	Pathology and Laboratory Medicine		1988-07-01	1996-06-30
Assistant Professor	Medical University of South Carolina	College of Medicine	Microbiology and Immunology		1993-12-01	1996-06-30
Associate Professor	Medical University of South Carolina	College of Medicine	Pathology and Laboratory Medicine		1996-07-01	2003-06-30
Associate Professor	Medical University of South Carolina	College of Dental Medicine	Pathology and Laboratory Medicine		1996-07-01	2003-06-30
Associate Professor	Medical University of South Carolina	College of Medicine	Microbiology and Immunology		1996-07-01	2003-01-01
Professor	Medical University of South Carolina	College of Dental Medicine	Pathology and Laboratory Medicine		2003-07-01	2022-05-01
Professor	Medical University of South Carolina	College of Medicine	Pathology and Laboratory Medicine		2003-07-01	2022-05-01
Professor	Medical University of South Carolina	College of Medicine	Pathology and Laboratory Medicine		2022-05-02	

NON-MUSC KANK AND PROMOTION HISTORY

Faculty	Institution/Organization	College	Department	Division	Effective Start Date of	Effective End Date of
Rank					Rank	Rank

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General Minor - C	
Graduate Medical Training: (Chronological)	Datas
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<u>Place</u>	Dates
Residencies or Postdoctoral:	
Board Certification:	Date:
	Date:
	Date: Date:
icensure: SC E	Date: 1975
	Date:
	Date: Date:
aculty appointments: <i>(Begin with initial appointment)</i>	
Years Rank Institution Departme	
002-2005 Clnical Instructor MUSC - CDM Stomatolog	
005-2008 Instructor MUSC - CDM Oral Rehal	
005-2008 Instructor MUSC - CDM Oral Rehal 008-2011 Assistant Professor MUSC - CDM Oral Rehal	
005-2008InstructorMUSC - CDMOral Rehal008-2011Assistant ProfessorMUSC - CDMOral Rehal	
2005-2008 Instructor MUSC - CDM Oral Rehal 2008-2011 Assistant Professor MUSC - CDM Oral Rehal	
2005-2008 Instructor MUSC - CDM Oral Rehal 2008-2011 Assistant Professor MUSC - CDM Oral Rehal	
005-2008 Instructor MUSC - CDM Oral Rehal 008-2011 Assistant Professor MUSC - CDM Oral Rehal 011-present Associate Professor MUSC - CDM Oral Rehal	2002
005-2008InstructorMUSC - CDMOral Rehal008-2011Assistant ProfessorMUSC - CDMOral Rehal	2002

Jason Newman, MD Abbreviated Curriculum Vitae V1 Professor

newmajas@musc.edu

Degrees

1997	M.D., Medicine, Thomas Jefferson University
1993	B.A., Biology and Society, Cornell University

Post-Graduate Training

Fellowship, University of Pennsylvania, Head and Neck Surgery/Oncology and Microvascular Surgery, July 2004, June 2005

Internship, Pennsylvania Hospital, General Surgery, July 1997, June 1998

Residency, New York Presbyterian Hospital of Columbia and Cornell and Memorial Sloan Kettering Cancer Center, Otolaryngology, July 1999, June 2002

Residency, Manhattan Eye, Ear & Throat Hospital, Otolaryngology, July 1998, June 1999

Certifications

American Heart Association, Type of Certification: Life Suppoort, Specialty: BLS, Certification Number: N/A, Effective Date: 2004

American Heart Association, Type of Certification: Life Support, Specialty: ACLS, Certification Number: N/A, Effective Date: 2004

American Board of Otolaryngology, Type of Certification: Board Certification, Certification Number: N/A, Effective Date: 2003-05-09, Expiration Date (if none, see note above): 2026-04-01

Professional Licensures

Pennsylvania Medical License, Month / Year Originally Conferred: April 2004

MUSC Rank and Promotion History

Faculty Rank	Institution	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Professor	Medical University of South Carolina	College of Medicine	Otolaryngology - Head and Neck Surgery		2022-03-01	

Faculty Rank	Institution/Organization	College	Department	Division	Effective Start Date of Rank	Effective End Date of Rank
Assistant Professor of			2005-	2014-		
Otorhinolaryngology			01-01	12-31		
Assistant Professor of			2005-	2014-		
Otorhinolaryngology			01-01	12-31		
Assistant Professor of Otorhinolaryngology	Pennsylvania Hospital				2011- 01-01	2014- 12-31

Associate Professor of Otorhinolaryngology	Pennsylvania Hospital	2014- 2020- 01-01 12-31
Associate Professor of Otorhinolaryngology	University of Pennsylvania School of Medicine	2014- 2020- 01-01 12-31
Associate Professor of Otorhinolaryngology	Head and Neck Surgery at the Hospital of the University of Pennsylvania	2014- 2020- 01-01 12-31
Professor of Otorhinolaryngology	University of Pennsylvania School of Medicine	2020- 01-01
Professor of Otorhinolaryngology	Head and Neck Surgery at the Hospital of the University of Pennsylvania	2020- 01-01
Professor of Otorhinolaryngology	Pennsylvania Hospital	2020- 01-01



Bylaws of the Medical University of South Carolina Board of Trustees

179 ASHLEY AVENUE CHARLESTON, SOUTH CAROLINA 29425 DECEMBER 13, 2019April 8, 2022

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FOREWORD

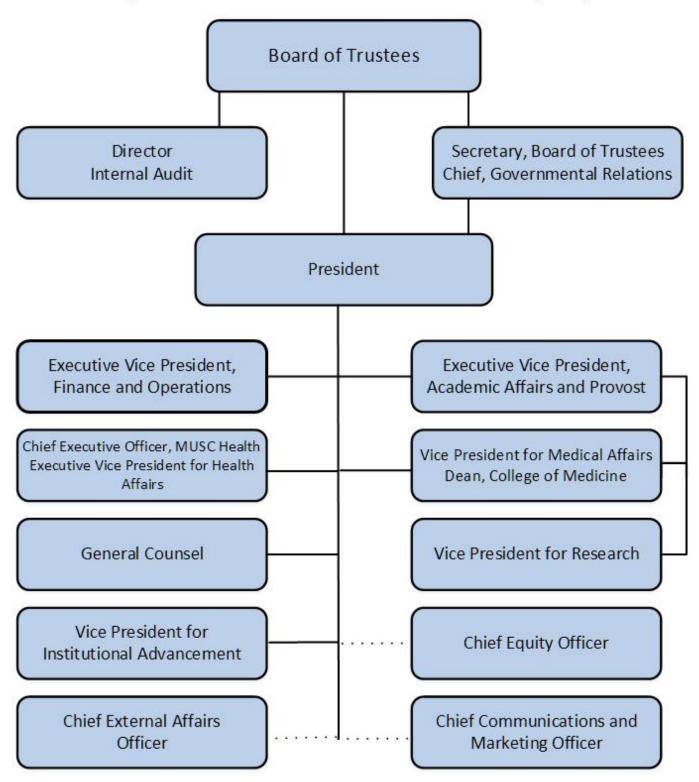
1. The Medical University of South Carolina does not discriminate on the basis of race, color, religion, sex, age, national origin, disability, veteran status, genetic information, sexual orientation or gender identity in the administration of admission policies, educational policies, financial aid, employment, or any other University activity, except where sex is a bona fide occupational qualification.

2. Since the English language contains no singular pronoun which includes both sexes, wherever a masculine term appears in this document it signifies both genders.

3. The meetings of the Board of Trustees are held in conformance with the Freedom of Information Act as amended, SC Code Ann. §30-4-10, *et seq.*

MEDICAL UNIVERSITY OF SOUTH CAROLINA CENTRAL ADMINISTRATION ORGANIZATION

(As referenced in the MUSC Board of Trustees Bylaws)



BYLAWS OF THE MEDICAL UNIVERSITY OF SOUTH CAROLINA BOARD OF TRUSTEES

Section I. Powers and Duties of the Board of Trustees.

(A) The final authority and responsibility for the governance of the Medical University of South Carolina (MUSC), its colleges, the outreach programs, and ancillary functions are vested in the Board of Trustees of the Institution in accordance with the statutes of the State of South Carolina pertaining thereto.

(B) The Board of Trustees, directly or through its authorized committees, shall establish the general policies of the University, shall define its general program of educational activity, shall annually at or before its August meeting, fix and approve the University's application for State appropriations, and shall approve the budget for the next fiscal year.

(C) The Board of Trustees avoids conflict of interest. Any Trustee having a potential or perceived conflict of interest should make a full disclosure of the facts to the Chairman and should refrain from voting, participating or influencing a decision on the matter. The minutes of the meeting should reflect that disclosure was made and the member abstained from voting.

(D) The Board of Trustees shall name the principal officers of the University as prescribed in Section V of these Bylaws, but it may delegate to those elected officers the employment of subordinate officers and employees.

(E) The Board of Trustees shall confer appropriate degrees in medicine, dental medicine, pharmacy, nursing, health professions, and graduate studies in related health fields. These degrees shall be conferred upon students and such other persons as the Board of Trustees deems qualified to receive them.

(F) The Board of Trustees may confer honorary degrees to individuals deemed appropriate and worthy by a majority vote of the Board.

(G) The Board of Trustees shall review or review and revise these Bylaws at least every four (4) years or earlier if a material change occurs.

Section II. Meetings of the Board of Trustees.

(A) **Regular Meetings**. Regular meetings of the Board of Trustees shall be held on the second Friday of February, April, August, October, and December and on the day before the Commencement Exercises, provided that the place and/or time of any regular meeting may be changed by the Chairman of the Board of Trustees. Any change in the date, place and/or time of any regular meeting shall be publicly noticed in accordance with S.C. Code of Laws §30-4-80.

(B) Special Meetings.

(1) Special meetings of the Board of Trustees may be called at the will of the Chairman; or

(2) Upon the written request of three or more members, the Chairman shall call a special meeting of the Board.

At least 24-hour's notice of any such meeting shall be given to the members of the Board of Trustees. The 24-hour's notice will not apply to emergency meetings in accordance with S.C. Code of Laws §30-4-80. Special meetings of the Board of Trustees may be in person, or via teleconference or videoconference. Trustees must be in attendance in person, or via teleconference or videoconference to vote on an action item at a Special Meeting. The vote will occur publicly, either by written ballot, roll call or other electronic means approved by a majority of the Trustees in attendance at the time of the vote.

(C) **Agenda**. Prior to each regular meeting of the Board of Trustees and with the notice of any special meeting, the Secretary of the Board shall include a proposed Agenda and pertinent information for the meeting. Any changes to the agenda shall be done in accordance with S.C. Code of Laws §30-4-80.

(D) Quorum. A majority of the elected and ex-officio voting Trustees shall constitute a quorum.

(E) **Voting.** Except as otherwise specifically provided herein, all matters coming before the Board or a committee thereof for determination shall be determined by a majority of the members present by voice acclamation. Upon request of any Board or committee member, a vote by the Board or committee, as applicable, shall be by a call of the roll and results of such roll call vote shall be recorded in the minutes of the Board or committee.

(F) Order of Business. The order of business for all meetings of the Board of Trustees shall be as follows:

(1) Roll call.

(2) Corrections and approval of all minutes of regular and special Board and Committee meetings not previously approved.

(3) Reports and recommendations of the President of the University, who may at his discretion call upon other officials of the University for reports on their areas of authority.

(4) Reports of standing committees.

- (5) Reports of special committees.
- (6) Old business.
- (7) New business.

(G) **Rules of Order**. Except as charged by specific rules and regulations of the Board of Trustees, the current edition of *Robert's Rules of Order* shall constitute the rules of parliamentary procedure applicable to all meetings of the Board and its several Committees.

Section III. Officers of the Board of Trustees.

(A) **Ex-Officio Chairman**. The Governor of the State of South Carolina is the voting ex-officio Chairman of the Board of Trustees and he shall preside at those meetings of the Board which he attends. The Governor's designee will vote for the Governor in his absence.

(B) **Chairman**. Biennially (every even-numbered year), at its August meeting, by a majority vote, the Board of Trustees shall elect from its membership a Chairman to serve for a term of two years or until his successor is elected. Trustees must be present to vote. The vote shall be by signed written ballot unless a Board member requests a vote by call of the roll prior to initial distribution of the ballots. The results of such roll call vote shall be recorded in the minutes of the Board.

Should the office of Chairman of the Board become vacant or should the Chairman suffer disability that obviously would be of an extended duration, a special election shall be held for a new Chairman. Such election shall take place at the second Board meeting within four months following such an eventuality. No Chairman shall be eligible to succeed himself after he has served two consecutive terms as the Chairman of the Board. The Chairman shall:

- (1) Preside at all meetings at which the ex-officio Chairman does not preside,
- (2) Appoint all board committees not otherwise provided for,
- (3) Be an ex-officio member of all standing committees of the Board,
- (4) Execute all legal documents and instruments on behalf of the Board, and
- (5) Represent the Board in making its budget requests to the General Assembly of the State.

The Chairman of the Board shall be the official spokesman of the Board.

(C) **Vice Chairman**. At the same time, by a like method and for a like term of office as the Chairman, the Board of Trustees shall elect from its membership a Vice Chairman to perform the duties of the Chairman in his absence, disability, or unavailability.

(D) Secretary.

(1) A Secretary of the Board of Trustees shall be elected by a majority of the Board to serve at the will of the Board. Trustees must be present to vote. The vote shall be by signed written ballot unless a Board member requests a vote by call of the roll prior to initial distribution of the ballots. The results of such roll call vote shall be recorded in the minutes of the Board.The Secretary need not be a member of the Board and may be an officer or employee of the institution in another capacity. The Secretary shall also serve as Secretary of all committees of the Board.

(2) Duties. It is the duty of the Secretary to arrange for all Board meetings and to act as Secretary to all Board committees, to keep records and minutes of Board actions, to review and

prepare proposed revisions to the bylaws of the Board every four (4) years or earlier if a material change occurs, and to complement the links with the President. In this role, the Secretary's primary responsibility is to the Board members. **SPECIFICALLY, THE SECRETARY WILL:**

(a) Prepare agenda, place requests in proper format for Board meetings and Board action, record minutes of all meetings, and mail notices and other information to Trustees;

(b) Assist the Board in reviewing, and prepare proposed revisions to, the bylaws of the Board every four (4) years or earlier if a material change occurs. Upon completion of the review by the Board, incorporate all adopted amendments, and submit changes to other parts of the bylaws which are reasonably implied by the adopted amendments;

(c) Obtain necessary legal opinions pertaining to the Board of Trustees as an entity and to individual members in their official capacities;

(d) Receive all direct correspondence, reports, telephone calls, etc., for the Board. Formulate proposed actions and communicate results to the Chairman and Board members;

(e) Relay to the President requests received by Board members from constituents;

(f) Make all arrangements for meetings of the Board of Trustees and committees, make travel accommodations and meal arrangements, including social functions when appropriate;

(g) Keep all records of Board actions taken via mail or telephone between meetings;

(h) Process the Board of Trustees expenses including supplies, printing, binding, travel, subsistence and per diem;

(i) Take care of routine correspondence on behalf of the Chairman and Board members;

(j) Provide copies of minutes of Board of Trustees meetings to members and other addressees as appropriate;

(k) Arrange for screening of the General Assembly's daily calendars and journals, proposed legislation, relevant newspapers, and other information sources. Report pertinent information to the Board and to the President;

(I) Keep a log of term of office and appropriate filing duties and procedures for Trustee members;

(m) Insure compliance with the requirements of the South Carolina Freedom of Information Act as it pertains to Board meetings and records; and

(n) Ensure that the Chairman of the Board of Trustees fills certain seats on affiliate boards, as specified by the affiliates' Bylaws. As such positions become available; all Board members will be made aware of the open seat prior to the Chairman appointing an individual to fill the seat. Where two or more seats are available on an affiliate board, consideration shall be given to filling the slots with one professional and one lay person from the Board of Trustees.

(E) Internal Auditor.

(1) The Internal Auditor shall be elected by a majority of the Board of Trustees to serve at the will of the Board. Trustees must be present to vote. The vote shall be by signed written ballot unless a Board member requests a vote by call of the roll prior to initial distribution of the ballots. The results of such roll call vote shall be recorded in the minutes of the Board. The Board directs that the Internal Auditor's position and its support staff shall report and be accountable directly to the Board of Trustees of the Medical University of South Carolina. It is further directed that the Board of Trustees for the Medical University of South Carolina shall be responsible for managing the Internal Auditor's tenure and for setting the financial budget for the Internal Audit Department, including salaries, operational expenses, and support costs.

(2) Duties. The Internal Auditor is responsible for managing a professional Internal Audit Department to provide analyses, appraisals, recommendations, counsel, and information concerning the activities reviewed to management, and ultimately to the Board of Trustees.

(3) The Internal Auditor is also responsible for providing the Board of Trustees with information about the adequacy and effectiveness of the organization's system of internal control and the quality of performance.

(4) The Internal Auditor will assist the Audit Committee of the Board of Trustees in carrying out its duties as stated in Section IV(D)(5) of these Bylaws.

(5) The Internal Auditor will assist the Audit Committee in the selection, oversight, and evaluation of the External Auditor.

(F) **Trustees Emeriti**. The MUSC Board of Trustees may recognize a former trustee for loyal, dedicated and significant service to the University. Trustee Emeritus status will be granted when a former Board member is nominated in writing by a current Board member and elected by a two-thirds majority vote. To be eligible, the former Board member must have served at least eight (8) consecutive years or have been awarded an honorary degree by the Medical University of South Carolina.

Trustees Emeriti will be elected for life. Trustees Emeriti will be non-voting, ex-officio members who are not reimbursed from appropriated funds. These Board members will be invited to all Board functions and events and will provide support for the University as knowledgeable friends and ambassadors.

Section IV. Committees of the Board.

(A) **Standing Committees**. In addition to such special committees as from time to time may be appointed or elected by the Board of Trustees, there shall be the following standing committees:

- (1) Audit
- (2) Education, Faculty and Student Affairs
- (3) Finance and Administration
- (4) Physical Facilities
- (5) Research and Institutional Advancement

(B) **Organization and Terms of Office**. All standing committee assignments shall be made by the Chairman of the Board of Trustees from the membership of the Board within 30 days following the August meeting each even numbered year. Their terms of service shall be for two (2) years. Each standing committee shall be composed of a minimum of three (3) members. Each standing committee shall elect its own chairman from its members by a majority vote taken by voice acclamation at the first committee meeting following the August meeting of the Board at which a Board Chairman is elected, excluding special elections, or at the first regular meeting of a new standing committee. Upon request of any standing committee member, a vote by the committee shall be by call of the roll and results of such roll call vote shall be recorded in the minutes of the Committee. Board members may only serve as Chairman of more than one standing committee of the University or the Medical University Hospital Authority (MUHA) Boards when the same committee (e.g., Physical Facilities, Audit) serves both entities.

(C) Quorum. A majority of the membership of any standing committee shall constitute a quorum.

(D) **Powers and Duties of Standing Committees**. The standing committees shall have the following powers and duties:

(1) Audit Committee.

(a) The Audit Committee shall concern itself with assisting the Board of Trustees in discharging its fiduciary and stewardship obligations relative to the reliability and integrity of 1) systems of internal control, 2) accounting practices, 3) annual reporting, 4) internal and external audit processes, 5) management of business exposures, and 6) compliance with legal, regulatory, and ethical requirements.

(b) The Committee will provide an open avenue of communication among the internal and external auditors, management, and the Board. The full Board will continue to have complete access to management and the Internal Audit department and may continue to request the Internal Audit department to review areas of concern to them.

(c) The role of the Committee is oversight. It is not the duty of the Committee to prepare financial statements or to conduct audits to independently verify management's representations or to determine that the financial statements are complete and fairly present the financial condition of MUSC and its affiliates. These are the responsibilities of management and the external auditors.

(d) The Audit Committee has the full authority to review/investigate any matter or activity within the scope of its responsibilities. It shall have direct access to management, Internal Audit, Legal Counsel and any other members of or resources within MUSC and its affiliated organizations. All employees shall be directed to cooperate as requested by members of the Committee. The Committee shall also have the resources and authority to retain special legal, accounting, or other experts it deems necessary in the performance of its responsibilities.

(e) In accordance with Section IV(B) of these bylaws, the Chairman of the Board shall appoint the Audit Committee members, all of whom shall be Trustees, and the Committee members will elect one individual to serve as Committee Chairman. Each member of the Committee, including the Chairman, shall be independent and by reason of education or experience possess such degree of financial literacy as required to oversee the performance of the internal and external auditors, review MUSC's financial statements, and otherwise faithfully execute the role of the Audit Committee set forth in the bylaws. At least one member of the Committee should have appropriate experience with internal controls, an understanding of applicable accounting principles, the application of such principles in preparing or auditing financial statements, and an understanding of audit committee functions.

(f) Members of the Committee shall uphold their duty of care by attending and participating in meetings, strengthening his or her understanding of the institution and its operations, maintaining professional skepticism, addressing appropriate subjects, gathering adequate facts, making reasonable and prudent inquiries before making a decision, and seeking outside counsel when necessary.

(g) The Audit Committee shall meet at least two times per year. Internal Audit will coordinate the Committee's agenda in consultation with the Committee Chair. All Board members are encouraged to attend and participate in the Audit Committee meeting.

(h) The Committee will set the appropriate tone in communicating the importance of internal control and direct management to establish appropriate internal controls.

(i) The Management Development and Compensation Sub-Committee shall be a subcommittee of the Audit Committee and reports to the Board through the Audit Committee.

i. The Management Development and Compensation Sub-Committee shall ensure that executive management and employees of the entities receive compensation that is market-level competitive, supports achieving the entities' strategic objectives, and is relevant to the individual's annual job performance while being sensitive to funding availability and longer term budget goals. The sub-committee will review all policy matters related to evaluation and compensation of the President, the Vice Presidents, the Deans, the Secretary of the Board (collectively "Executive Leadership"), and any other positions the sub-committee may decide. The sub-committee will make recommendations to the Board via the Audit Committee regarding these matters. The sub-committee will assist the Board in determining a compensation package for the President and advise the President regarding appropriate compensation structures for other members of Executive Leadership.

- ii. The sub-committee shall review, at least annually, MUSC's assessment of potential candidates for promotion (Key Employees) to, at a minimum, a Vice President, Dean, or other senior executive position designated by the Board. The assessment should identify candidates' potential for promotion, professional development needed to address perceived deficiencies in a candidate's preparedness for promotion, or other actions to develop a "deep bench" of potential MUSC leaders. The sub-committee shall assist the President in determining appropriate professional development assistance for the MUSC Key Employees and in determining the best approaches to providing that assistance. The sub-committee shall review, at least annually, the Management Development plans in place and planned to ensure that all employees are encouraged to continuously improve their professional capabilities.
- iii. As with other standing committees, members of this sub-committee will be appointed by the Chairman of the Board of Trustees and is not limited to members of the Audit Committee. The Chairman of the Audit Committee will serve as chairman of this sub-committee.
- iv. The Management Development and Compensation Sub-Committee shall meet as needed. All Board members are encouraged to attend and participate in the sub-committee meetings.
- v. No offer of compensation to any position included under (ii.) above, whether written or oral, subject to the review of the Management Development and Compensation Sub-Committee shall be effective as binding on the entities without the required approval(s).

(j) The Committee shall report to the Board on all financial matters in its area of concern.

(2) Education, Faculty and Student Affairs Committee.

(a) The Education, Faculty and Student Affairs Committee shall concern itself with the formation of policy regarding matters affecting the quality, character, extent and relative standards in instruction and research.

(b) Also, the Committee shall concern itself with the formation of policy affecting student life, welfare, and morale.

(c) The Committee shall concern itself with the faculty organization, quality, effectiveness, welfare, and morale.

(d) The Committee shall create, with approval of the Board, multi-specialty group practice plan(s) whose membership shall be comprised of qualifying faculty and employees of the University. These practice plan(s) will develop administrative board(s) and bylaws for approval by the MUSC Board of Trustees. Faculty members shall have but one annual contract which shall accurately reflect their activities and compensation from MUSC, MUHA, Veterans Administration, clinical practice plan, and all other approved sources. Such compensation shall be considered part of the total MUSC compensation package and shall, pursuant to law, receive prior approval by the President and/or the Board of Trustees.

(e) The Education, Faculty and Student Affairs Committee will make appropriate and timely reports and recommendations to the Board of Trustees which, upon approval by the Board of Trustees, these shall become established policy of the Board.

(f) The Committee, whenever needed, shall make available to the Board reports and recommendations regarding grants and scholarships from trust funds and endowments. Upon approval by the Board of Trustees, these recommendations shall become established policy. The Committee shall also report to the Board the recipients of such grants and scholarships.

(g) The Committee shall report to the Board on all financial matters in its areas of concern.

(3) Finance and Administration Committee.

(a) The Finance and Administration Committee shall concern itself with the broad financial overview of the University, as well as with the operation, routine care, and funding of maintenance of the existing physical facilities of the University. Specific financial details will be provided in the other respective standing committees of the Board of Trustees.

(b) The Committee shall especially concern itself with such matters as procurement, accounting, budgeting, and information systems.

(c) The Committee will concern itself with the financial and fiscal policies and procedures of the University.

(d) The annual requests for appropriation and the proposed annual budgets shall be prepared by the appropriate University officers for review by the Committee.

(e) The Committee shall concern itself with personnel policies and personnel administrative programs to achieve satisfactory quality, productivity, and morale of personnel of the University.

(f) The Committee will assist the Audit Committee in setting the appropriate tone in communicating the importance of internal control and directing management to establish appropriate internal controls.

(g) The Committee will make appropriate and timely reports and recommendations to the Board of Trustees which, upon approval by the Board of Trustees, shall become established policy of the Board.

(4) Physical Facilities Committee.

(a) The Physical Facilities Committee shall concern itself with the real property and improvements thereto of the Medical University of South Carolina and its affiliates. It shall be responsible for prioritizing and implementing all development plans for University properties and their improvements. It shall solicit, evaluate, and select suggestions and proposals from administration, consultants, and other professionals relating to the development and capital improvements of the physical facilities and make recommendations to the Board of Trustees. This Committee will only be concerned with capital projects exceeding cost limits specified in approved Board policies. This Committee shall assume full responsibility of the MUSC Facility Plan, to include, but not limited to, 1) selecting architects, engineers, and other related professionals; 2) prioritizing all requests for facilities; 3) conducting feasibility studies; and 4) reviewing major renovations required for the installation of equipment.

(b) To help carry out the duties of the Physical Facilities Committee, the Committee Chairman can appoint one member of the Physical Facilities Committee and two members of the Board of Trustees at large as a separate project committee for each major building project for architect/engineer and related construction professionals selections. There may be multiple project committees with different Trustees functioning concurrently for different projects. A project committee is an active part of the Physical Facilities Committee and serves at the supervision, control, and direction of the Physical Facilities Committee. The Physical Facilities Committee Chair shall take into account any expertise or experience of Board members and of their willingness to serve on a committee for a specific project.

(c) The Committee shall be familiar with and report preliminary details of costs associated with various developments and improvements of physical facilities to the Board of Trustees.

(d) The Committee shall be charged with the responsibility of all Board matters relating to the physical properties of the University; the design and location of new buildings, master planning, improvements or remodeling of buildings, and all other matters having to do with the maintenance of the University's physical facilities. It shall report to the Board of Trustees with its recommendations thereon and on all contracts relating to new construction, capital improvements, and major repairs/renovations to existing buildings and grounds.

(e) The Committee will establish a formal mechanism decreeing the time and appropriate ceremony to formally accept any completed project.

(f) At each Board meeting, the Executive Vice President for Finance and Operations or his designee (i.e., the Director of Engineering and Facilities) will update the Physical Facilities Committee on: 1) construction progress, 2) budgetary increases on construction/facility improvements, and 3) all change orders to date.

(g) Once the Physical Facilities Committee accepts and prioritizes capital project(s) for development, the project(s) will be forwarded to the Finance and Administration Committee of the Board of Trustees for funding consideration. The Finance and Administration Committee will have the responsibility of seeking appropriate funding in consideration of the University's budgetary status, bonding requirements, and other financial requirements or restrictions of the University. In accordance with approved Board policies, the Finance and Administration Committee will make recommendations for approval of expenditures to the full Board.

(h) The Committee shall report to the Board on all financial matters in its area of concern.

(5) Research and Institutional Advancement Committee.

(a) The Research and Institutional Advancement Committee shall concern itself with the development, promotion, and stimulation of research efforts of the University and the development, promotion, execution, and management of the institutional advancement programs of the University.

(b) The Committee shall make reports and recommendations to the Board of Trustees on institutional advancement, research advancement, animal care, and the establishment and maintenance of research facilities.

(c) The Committee will recommend and seek Board approval for necessary changes to academic facilities as determined by the academic community within the University. The Committee will recommend to the Physical Facilities Committee any changes, deletions or additions to the physical plant for their consideration.

(d) The Committee shall study and report to the Board of Trustees on future opportunities for academic development. This Committee shall be directly and specifically interested in fundraising, both in the private and public sectors, in order to provide future revenues for academic and operational needs of the University.

(e) The Committee shall be concerned with external affairs matters including, but not limited to governmental relations, both state and federal, and the University's efforts in industrial recruitment.

(f) The Committee shall concern itself with the identification, cultivation, solicitation, and stewardship of leadership philanthropy to ensure the maximization of private investment in the University's academic, research, and clinical care programs.

(g) The Committee shall recommend to the Board of Trustees appropriate policies and/or programs required to achieve these objectives and shall report to the Board on the implementation, performance, and progress in these areas.

(h) In addition, the Committee shall report to the Board on all financial matters in its areas of concern.

(i) The Research and Institutional Advancement Committee will make appropriate and timely reports and recommendations to the Board of Trustees which upon approval by the Board of Trustees, shall become established policy of the Board.

Section V. The Officers and Administration of the University.

(A) **The President**. The Chief Executive Officer of the University shall be its President who shall be elected by the Board of Trustees to serve at the will of the Board at a rate of remuneration specified by the Board. Trustees must be present to vote. The President will be elected by a majority vote of the Trustees. The vote shall be by signed written ballot unless a Board member requests a vote by call of the roll prior to initial distribution of the ballots. The results of such roll call vote shall be recorded in the minutes of the Board.

(1) The President shall have and exercise full executive powers over the University and its related operations within the framework of the policies established by the Board of Trustees.

(2) More specifically, the President shall be charged with the organization of the administrative and professional personnel of the University and the method of selecting personnel, subject only to the limitations imposed by these bylaws, South Carolina laws, and applicable State policies and procedures. He shall be the medium of formal communication between the Board of Trustees and the faculty and administrative organization of the University and also the official spokesman of the University except as to matters within the special province of the Board of Trustees, in which realm the Chairman of the Board of Trustees shall be the official spokesman. The President, with his appropriate executive officers and the appropriate committees, shall prepare or receive and forward all requisite reports, budgets, and presentations to public agencies and to the Board of Trustees of the University.

(3) The President shall present to the Board of Trustees an organizational chart showing divisions, departments, and lines of reporting and command in the instructional and administrative organization of the University. After approval of such organizational chart, any changes shall be made only after the proposed change has been approved by the Board.

(B) **Other Executive Officers**. By and with the advice of the President and/or appropriate standing committee, the Board of Trustees shall elect and approve the total compensation packages and subsequent changes thereto of the following additional executive officers. Other executive officers will

be elected by a majority vote of the Trustees. Trustees must be present to vote. The vote shall be by signed written ballot unless a Board member requests a vote by call of the roll prior to initial distribution of the ballots. The results of such roll call vote shall be recorded in the minutes of the Board.

(1) Executive Vice President for Academic Affairs and Provost. This officer is administratively responsible to the President for all academic matters. In the absence of the President of the University, he shall act as the Chief Executive Officer. He is responsible for the coordination of planning for education and research and shall formulate plans to implement policy approved by the President and the Board of Trustees. The deans of all colleges and the directors of the academic support units shall report to and through this officer to the President of the University. Associated duties include responsibilities for overseeing the educational and clinical activities of the MUSC affiliates (those organizations that are included as component units in MUSC's financial statements), except those affiliates who are part of the clinical enterprise, including but not limited to University Medical Associates (UMA) and the Medical University Hospital Authority (MUHA), collectively referred to as MUSC Health, and the Medical University of South Carolina Foundation (MUSCF), including purview over the organizations as they relate to the total program of the Medical University.

The Chief Executive Officers of the MUSC affiliates, except the MUSC Health entities and MUSC Foundation will report to the Executive Vice President for Academic Affairs and Provost.

(2) **Executive Vice President for Finance and Operations**. This officer is administratively responsible to the President for financial and administrative matters. He shall have immediate oversight of all general and financial operations of the University and responsibility for the physical facilities of the University. All financial and administrative support services of the University shall report to and through him to the President of the University. This officer shall be the financial advisor to the President and the Board of Trustees and serve as Treasurer of the University. This officer serves as chief of staff for the President.

(3) Chief Executive Officer, MUSC Health and Executive Vice President for Health Affairs. The Vice President for Health Affairs is administratively responsible to the President for the MUSC clinical enterprise and jointly serves as the Chief Executive Officer of the clinical enterprise (MUSC Health). As Vice President, this officer shall report to the President for all clinical matters as they relate to MUSC Health. . Associated duties as Vice President for Health Affairs include responsibility for the activities of MUSC Health, including purview over the organizations as they relate to the total program of the Medical University. This officer shall be responsible for the development and implementation of joint initiatives to ensure overall alignment of mission and vision and shall ensure that MUSC Health provides a supportive environment for high quality, sophisticated clinical teaching and research programs carried out by MUSC faculty. This officer shall formulate policies with respect to the educational and research activities of MUSC Health and shall submit such policies to the Board of Trustees for approval. The CEO, MUSC Health and Executive Vice President for Health Affairs is administratively responsible to the President and Board for all Authority functions and shall exercise overarching control and responsibility for clinical service delivery of the Authority, as well as, human, financial, informational resources and related activities. The CEO, MUSC Health and Executive Vice President for Health Affairs is

expected to align strategically with the Executive Vice President of Academic Affairs and Provost related to the development and implementation of joint initiatives to ensure overall alignment of mission and vision and shall ensure that MUSC Health provides a supportive environment for high quality, sophisticated clinical teaching and research programs carried out by MUSC faculty. This officer shall formulate policies with respect to the clinical, educational and research activities of MUSC Health and is expected to align strategically with the Dean of the College of Medicine and Vice President for Medical Affairs for all College of Medicine clinical activities as well as MUSC Physicians.

(4) Dean, College of Medicine, and Vice President for Medical Affairs. The Dean is the Chief Academic Officer for the College of Medicine (COM) and reports directly to the Executive Vice President for Academic Affairs and Provost for all COM academic and research activities. All department chairs in the COM report to the Dean. In the role of Vice President for Medical Affairs, he is expected to align strategically with the CEO, MUSC Health System for all COM clinical activities, and is ultimately accountable to the President of MUSC. The Dean, COM and Vice President for Medical Affairs, is responsible for the vision setting, strategic planning, oversight and investment for education and research in the COM and integration and alignment of the COM clinical mission with the MUSC Health System. As Vice President for Medical Affairs, he serves in critical clinical leadership roles within the MUSC Health System through direct supervision of COM clinical chairs, as a member of the strategic decision making body for the University (President's Council), as a member of the MUSC Health System committees, and serving to monitor and enforce MUSC Health System clinical performance standards.

(54) Vice President for Institutional Advancement. This officer is administratively responsible to the President and has immediate oversight in the procurement of private funds for the development of the University's projected and long-range plans. This officer shall have the responsibility for the Office of Development, the Office of Alumni Affairs, and for overseeing development activities of the Medical University of South Carolina Foundation, of which he may serve as vice president. This officer is also responsible for the management of the University's Board of Visitors.

(65) Vice President for Research. This officer serves as the institution's Chief Research Officer and is responsible for defining and implementing strategies to advance the research mission of the Medical University of South Carolina. The Vice President for Research reports directly to the Executive Vice President for Academic Affairs and Provost. This officer has oversight of research administrative offices supporting the University's research enterprise, including the Office of Research and Sponsored Programs, Office of Research Development, and the Office of Research Integrity. This officer oversees and supports research policy development, sponsored program administration (pre-award), and research compliance and safety. Responsibilities include monitoring institutional extramural and intramural research funding, assuring compliance with research integrity and risk protection guidelines, and coordinating research strategic planning. This officer provides input and expertise in research resource utilization including facilities development and management.

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Section VI. The Faculty.

(A) **Employment**. The President of the University is responsible to the Board of Trustees for the qualitative and quantitative performance of the faculty. Therefore, the President is vested with the power to select the membership of the faculty. He shall appoint the instructional staff of the University. Upon recommendation of the President, the Board of Trustees shall appoint the following:

- (1) Deans
- (2) Associate Professor (regular, adjunct, or clinical)
- (3) Professor (regular, adjunct, or clinical)
- (4) Any faculty position to tenured rank.

(B) **Organization of the Faculty**. All members of the instructional staff of the University shall be embraced in one or more organizations within the University faculty. This will allow the Administration and the Board of Trustees to have the benefit of the aid and advice of the faculty in those matters which are the special concern of the faculty. Such matters include curricula, leaves of absence, sabbatical leaves, termination of employment, and academic matters of concern to both faculty and students. It will also facilitate communication and understanding among the faculty, the administration, and the Board of Trustees.

The Faculty Senate of the Medical University acts as the sole representative body for organizing and executing the business of the faculty submitted to it by members of the faculty, the administration, or the Senate itself. The Senate advises the administration and the faculty in matters pertaining to the faculty.

(C) **Faculty Privileges and Immunities**. The rules, regulations, conditions, and definitions of such matters of faculty concern as tenure, leaves of absence, outside practice, conflict of interest, and the presentation of grievances shall be clearly set forth by the Board and established as policies of the University. These policies and procedures are documented in the Faculty Handbook, which is made available to all members of the faculty and others concerned. The Faculty Handbook is subject to periodic revision, with changes reviewed and approved by the Board of Trustees, upon the recommendation of the Faculty Senate and the Administration.

Until all students of the South Carolina College of Pharmacy (SC-COP) have matriculated, and the SC-COP ceases to exist, the SC-COP will have a separate Faculty Handbook which will be created by the administration and faculty of the College subject to approval by the Board of Trustees of the Medical University of South Carolina and the University of South Carolina. Once created and approved, this handbook will pertain to all faculty of the South Carolina College of Pharmacy. When acting on behalf of the MUSC College of Pharmacy, the faculty of the MUSC College of Pharmacy will abide by the MUSC Faculty Handbook.

Section VII. Appeals to the Board.

(A) **Faculty.** The right of appeal to the Board of Trustees by any member of the faculty or the administration is a right recognized by the Board and shall be exercised in accordance with the

respective grievance procedures for the faculty as set forth in the MUSC Faculty Handbook and approved by the Board of Trustees.

(B) **Administrative Personnel.** With respect to administrative personnel, the Board of Trustees, in its sole discretion, may grant a review of any adverse administrative action. However, if this review is granted, the Board shall not be required to conduct a hearing or hear arguments but shall review the record of any proceedings.

Section VIII. Board of Visitors.

(A) Membership.

(1) The members of the Board of Visitors shall be elected by vote of the Board of Trustees upon nominations made by members of the Board of Trustees to the President of the Medical University of South Carolina.

(2) Nominations for membership on the Board of Visitors shall be made as follows:

(a) The two (2) members of the Board of Trustees from each of the seven (7) Congressional Districts shall each make two (2) nominations which may be from the state or outside the state. The voting ex-officio member (or his designee) and the at-large trustee may nominate from the state or outside the state.

(b) The voting ex-officio member (or his designee) and the at-large trustee of the Board shall each submit two (2) nominations. Members Emeriti may also submit one (1) nomination each.

(c) All nominations shall be sent to the President of the Medical University four (4) weeks prior to each December meeting of the Board of Trustees.

(3) Terms of appointment shall be two (2) years with appointments made biennially (once every two (2) years). Any vacancy that may occur from time to time shall be filled by the Board of Trustees.

(B) **Duties**. The Board of Visitors shall be oriented as to the purposes, goals and objectives of the Medical University. They shall, through the orientation process, become familiar with the University's assets, capabilities, services, desires, and needs. They shall be encouraged to assist actively in obtaining support morally, fiscally, and politically to accomplish the University's purposes, goals and objectives. Other specific duties may be assigned from time to time as the Board of Trustees may direct.

(C) The Board of Visitors shall be advisory in nature and will be considered an extension of the development efforts of the University.

(D) **Expenses**. Reimbursement for transportation, parking, and room and board, allowed by the state or accordance with appropriate policy, may be requested by and paid to each Board of Visitors member for each official trip.

Section IX. Amendment.

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These bylaws may be amended at any regular meeting of the Board of Trustees by a favorable vote of at least two-thirds of the members present and voting, but the proposed amendment must first have been stated in writing and sent to each member of the Board at least 15 calendar days prior to such meeting.

Revisions: October 1992, October 14, 1994, October 10, 1998, February 11, 2000, December 8, 2000, October 12, 2001, February 13, 2004, April 7, 2006, April 11, 2008, April 9, 2010, December 14, 2012, April 11, 2014, October 9, 2014, May 14, 2015, October 9, 2015, December 9, 2016, April 14, 2017, December 13, 2019.