

Events to Know

February

2 Strategic Planning Town Hall Meeting, noon, MSB 3.001. Faculty, staff and students welcome, to hear about goals and priorities and provide input.

UTMost Interest

Dr. Barbara Murray, Internal Medicine, recently was elected to serve as secretary-treasurer on the three-member executive committee of the 13-member Council for the Infectious Diseases Society of America. She has just recently completed her three-year term as chair of the Program Planning Committee for the Interscience Conference on Antimicrobial Agents and Chemotherapy (ICAAC).

EMPLOYMENT POLICIES CLASS

9 a.m. - noon, Tues., **Feb. 3**, JFB G.734. Contact **David Madrigal**, 713-500-3136.

Super Bowl Spinoffs

Dr. Richard Bradley, Emergency Medicine, will be at the Reliant Center in the role of medical branch director for EMS operations at Reliant Park during the Super Bowl, Sun., **Feb. 1**.



Dr. Richard Bradley relief plan, will be at the Memorial Hermann Hospital Emergency Center during the Super Bowl.

Drs. Dave Robinson, Joanne Oakes, and Shreyas Bhavsar, Emergency Medicine, also will be on hand to provide medical care at Reliant Stadium.

In addition, this past week UT physicians staffed a drop-in medical clinic at the NFL headquarters at the Hilton of the Americas.

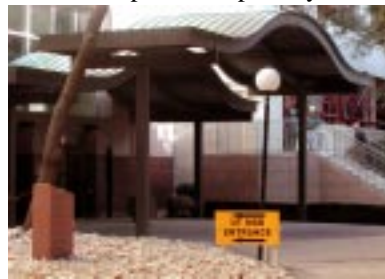
Hard Hat Update

ROSS STERLING TO REOPEN TEMPORARILY AND OTHER CHANGES

The following are construction changes taking place in and around the Medical School:

- 1. Ross Sterling Entrance will reopen temporarily.

On Mon., **Feb. 2**, the Ross Sterling entrance under the breezeway will be reopened temporarily for 4-6 weeks. This entrance will function as before, without power door openers.



Webber Plaza entrance will temporarily close Feb. 4.

The bicycle racks in front of the John Freeman building will be removed in the next week. Ross Sterling is still a construction zone; do not park bikes there.

- 6. Free covered motorcycle parking is available in designated areas of Garage 7, 4, and surface lot B. Motorcycles should be parked in these locations instead of John Freeman. Vehicles are in danger of being hit by delivery and construction vehicles that may need to use this area.

STUDENTS HOLD MEMORIAL SERVICE FOR CADAVERS

With a palpable feeling of gratitude and respect, the Class of 2007 held a memorial service in honor of their first patients Jan. 22 in the Fifth Floor Gallery. The Medical School students' first patients are the cadavers donated through the willed body program and used in the gross anatomy lab during the first semester.

"We are here today to honor our first patients," said first-year student **Sara Donley**. "They have given us a gift of education – one that we will never forget."

In addition to the welcome by Donley, students performed readings and music in honor of their first patients, and **Drs. Len Cleary and Henry Strobel** addressed the group.

Cleary, gross anatomy course director, told the students that much of medical education depends on the altruism of the community. "Over the next years, patients will make their personality and conditions available to you to become better educated. Learn as much as you can to become a skilled practitioner and raise the standard of care."

Strobel, assistant dean for student affairs, said that the cadavers live on as teachers. "The cadavers gave up their bodies for you and your learning, and it is a gift that continues."

Information on the Medical School's willed body program may be found at <http://nba.uth.tmc.edu/willedbody/index.htm>.



MSRDP Annual Meeting**PRACTICE PLAN BOASTS ANOTHER FIRST**

The Medical School practice plan posted another record – a positive margin of \$1.7 million during the first four months of fiscal year 2004.

“This is the first positive margin of the first few months of a year that anyone can remember,” **Dr. James T. Willerson**, president of the UT Health Science Center, told the audience at the annual meeting of the membership of the Medical Service Research and Development Plan (MSRDP) Jan. 20.

“I want to thank all of you here and those who are not here who have helped us get to where we are now. It gives one a lot of optimism,” Willerson added.

Kevin Dillon, health science center executive vice president for finance and business affairs, said several factors contributed to this good news. “Collections were key – in three of these four months we had over \$9 million in collections,” he said, adding that the fee schedule increase that went into effect Sept. 1 also helped a bit. “We’ve also managed expenses better this year than in prior years.”

During this same time in fiscal year 2003, the practice plan, which includes MSRDP and UT Physicians (formerly University Care Plus), had a negative margin of \$3.2 million.

Net collections in the first quarter of FY 2004 in UT Physicians clinics increased 17 percent over last year’s first quarter, with no increase in patient visits for the entire practice. Following completion of the renovation and addition of bariatric surgery at the West Loop UT Physicians clinic, patient visits nearly doubled in fiscal year 2003, reported Diana Browning, assistant vice president for clinical affairs for MSRDP.

Other expanded services undertaken by UT Physicians in 2003 included partnering with Genezen to provide in-office infusions of the drug Remicade, which is used by rheumatology patients; a joint venture

with Memorial Hermann to purchase an interest in the Physician Surgery Center of Houston on Main Street in the Greenpark One building; and leasing imaging capacity from Integrated Diagnostic Centers, which allows UT Physicians to provide MRIs, CTs for their patients at three locations.

“The imaging venture enables us to bill a global fee, and our radiologists are reading the film,” Browning said.

“All of these enterprises are generating incremental revenue for the practice plan. It is expected that these ventures will generate over \$500,000 to the MSRDP on an annualized basis,” said **Andrew Casas**, UT Physicians assistant vice president for business development.

Dr. Michael McKinney, senior executive vice president and chief operating officer of the health science center, talked about the compact between the health science center and UT System, which is being formulated. “The compact is for strategic planning purposes, and we are soliciting input from deans, vice presidents, councils, and town hall meetings,” he said. “The plan has to be finished in March and will be tied to budgeting.”

McKinney offered two ideas for improving the practice plan bottom line – referring patients who truly need referrals to other UT Physicians and changing the payer mix by opening specialized clinics in outreach areas.

MSRDP is the “trust fund” for the university’s clinical services and its board members are the Medical School’s department chairmen and at-large members, who are elected by the faculty. Its executive board consists of the health science center president, three executive vice presidents, the Medical School dean, and the president of UT Physicians. UT Physicians is the business arm of the practice plan.

- D. Brown

RESEARCH COMMITTEE HOSTS PEOPLESOFT DISCUSSION

The Medical School Research Committee, led by **Dr. Jack Byrne**, chairman of Neurobiology and Anatomy, recently held a special meeting to constructively address research concerns regarding the new PeopleSoft purchasing system. Included in the meeting were **Interim Dean Stanley Schultz** along with senior Health Science Center financial and research leadership, including **Drs. Mike McKinney** and **Peter Davies**, **Kevin Dillon** and key staff overseeing the schoolwide transition from TUFIMS to PeopleSoft that began in September.

Members of the committee outlined a long list of problems encountered by faculty and departments that impacts research programs from the development and administration of grants and contracts to the ordering of research laboratory supplies to run the day-to-day business of the research enterprise.

Said Dr. Schultz, “This was an important opportunity to compare notes with our leadership in charge of implementing the new financial system regarding the impact on research programs with a common focus on finding solutions. We are all in this together, and the more we communicate both problems and solutions encountered during the first five months of the new system, the better off we will be.”

While the program admittedly has its limitations, presentations at the meeting outlined an ongoing effort to patch program shortcomings to better support the needs of the academic community. In addition, new staff are being added in areas to facilitate the handling and troubleshooting needs of the program.



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*- From Dr. Stanley Schultz,
Interim Dean, Medical School*

While some of the problems are within PeopleSoft itself, others shortcomings related to training issues and the abilities of personnel within the departments to prepare “clean” vouchers that can be processed without being delayed for revision.

A variety of approaches were outlined to identify what works along with shortcuts that can be communicated to all users of the system. Additionally, careful tracking of the days required to process vouchers has been ongoing and serves as a benchmark for continually improving the speed of handling through the system.

It was agreed that the Research Committee would meet again in 90 days to compare notes on progress being made on both ends to solve the concerns at hand.

- B. Boutwell

Note: Look for a new column, “PeopleSoft,” starting next week in Scoop, to keep the Medical School community abreast of the latest developments.