MEDICAL SCHOOL
DEPARTMENT OF DERMATOLOGY
UNIVERSITY OF MICHIGAN

Department of Dermatology
University of Michigan

Chairman – John J. Voorhees, MD FRCP
Chief Department Administrator – Michelle Peregord, MBA

October 7, 2016

Tenured Faculty	9	*(2 PhD, 2 MD/PhD, 5 MD)*
Clinical Faculty	17	
Research Faculty	<u>10</u>	
	36	
Residents	24	
Fellows	2	
Staff	95	*(Clinical, Research & Administrative)*

Employee Data

Faculty:
- Employees of University of Michigan Medical School (UMMS)
- Majority of their salary is paid on Medical School Funding.
- Benefits (vacation, sick, retirement) match those of all the other schools/colleges on campus.

Research & Administrative Staff:
- Majority are considered UMMS

Clinical Staff (including Advanced Practice Professionals):
- Considered University of Michigan Health System (UMHS) employees (i.e., hospital or ambulatory care).
- Salary is paid using Ambulatory Care Funding.
- Time off benefits are based on a paid time off (PTO) program.
- Retirement benefits match rate is slightly lower than UMMS rate.

Current Staffing

- Medical Dermatology   23 UMHS
- Day Treatment Center   6 UMHS
- Pediatric Dermatology   ~4 UMHS *(NOT Derm on Peds ACU)*
- Cutaneous Surgery & Oncology   18 UMHS
- Cosmetic   5 UMHS
- Clinical Research   5 UMMS
- Basic Science/Translational Research   21 UMMS
- Residency/Fellowship   2 UMMS
- Administrative*   15 UMMS

* Includes 4 Finance/Procurement, 3 Faculty Support, 2 Project Managers, 1 Communication, 1 Faculty Affairs, 1 HR, 1 Development, 1 Statistician, 1 CDA

University of Michigan Health System (UMHS)

- Has 501(c)(3) non-profit tax exempt status.
- Self-insured for Medical Malpractice
- Hires APPs, Clinic Managers, all Allied Health and covers 50% of CDA and Departmental Finance Manager.
- Provides clinical space in which providers see patients.
- Provides capital equipment for clinic operations.
- Provides stipends for residents.
- Offers annual margin sharing with departments when their ACU meets or exceed various targets such as YOY margin improvement, YOY increase in new patients seen, patient satisfaction, Meaningful Use (MU).

University of Michigan Medical School (UMMS)

- Has 501(c)(3) non-profit tax exempt status.
- All faculty hired by and are members of UMMS.
- New faculty hires, promotions and periodic reviews all handled through UMMS Office of Faculty Affairs.
- May provide some start-up funding for new faculty hires.
- Provides research space (labs and offices) and some faculty offices.
- The Executive Vice President of Medical Affairs (EVPMA) recently took on the additional role of Dean of the UMMS.
- UMMS works closely with UMHS to ensure that we are meeting our tri-partite mission of Patient Care, Education and Research.
- Returns some General Funds to departments based on Teaching and IDCs generated less Research Space.

Payer Mix & WRVUs

Payer Mix:

PAYERS	FY2016	FY2015
BCBS/BCN	35.1%	33.7%
COMMERCIAL/COMMERCIAL HMO	10.0%	10.4%
MEDICAID/MEDICAID HMO	5.2%	5.5%
MEDICARE/MEDICARE ADV	44.6%	44.%
OTHER	0.5%	1.0%
SELF-PAY	4.6%	4.5%

WRVUs:

DIVISIONS	FY2016
MEDICAL DERMATOLOGY	56,285
MOHS SURGERY	51,250
COSMETIC/LASER	13,475
PEDIATRIC DERMATOLOGY	2,910
DAY TREATMENT CENTER	840
OTHER*	11,890
TOTAL	136,650

Includes Inpatient and Melanoma

Productivity Measures & Metrics

*Data from AAMC (Association of American Medical Colleges) and MGMA (Medical Group Management Association) is used to **establish salaries** for each faculty based on track, rank and professional responsibilities.*

***Productivity incentives** for Clinical Faculty is calculated by pulling the charges, WRVUs and RVU payments by provider. Faculty receive a percentage of RVU payments on a monthly or quarterly basis.*

*Some of the **Metrics** Tracked:*
- *Patient Satisfaction*
- *Improved Access – for NP and RV*
- *Cash Flow Margin*
- *NIH Market Share*
- *Percent of graduate medical programs having trainees involved in QI Initiatives*
- *% of staff responding they would recommend their department*
- *Faculty survey ranking for "Please Rate Your Overall Job Satisfaction"*
- *Implementation of a departmental Diversity, Equity and Inclusion (DEI) Plan*
- *Space Productivity (IDC/Research sq ft)*
- *Diagnosis per Claim*
- *Meaningful Use (MU)*

Accomplishments & Challenges

Residency Program:
- ✓ *With 24 residents, our residency program is one of the largest in the nation and per Doximity is ranked #1/Midwest and #6/U.S. by reputation.*
- ➢ *Last year a new program director was named, replacing someone that had that role for close to 30 years.*

Medical Education:
- ✓ *Currently developing a new UMMS curriculum.*
- ➢ *Two faculty were newly named to oversee current M2 and M4 teaching, as well as designing our new curriculum.*

Clinical / Patient Care:
- ✓ *World-class Clinicians.*
- ✓ *Our Multidisciplinary Merkel Cell Carcinoma (MCC) Program has grown into one of the largest MCC program of its kind in the world.*
- ➢ *Many Clinicians not full FTEs, work at VA and/or have funded research.*
- ➢ *Access is 10 to 12 weeks out.*
- ➢ *Salaries well below private industry.*
- ➢ *Increasing competition in the area.*

Research:
- ✓ *Actively recruiting top-notch faculty candidates for functional genomics cutaneous research, melanoma/skin cancer research and aging/photoaging skin research.*
- ➢ *Research space and start-up funding concerns.*

Future Outlook

Academics/Administration:
- *Hire an experienced Education Administrator to help with the Residency Program, development of the new Medical School Curriculum, and increase faculty education requirements (MOC).*
- *Retirements of some of our key faculty and lead administrative positions in UMMS/UMHS will provide unique challenges and opportunities.*

Clinical/Patient Care:
- *Creation of a newly defined Clinical Faculty Track to support hiring "pure" clinicians.*
- *More partnerships/collaborations with other Health Systems.*
- *Roll-out Teledermatology – have had great success at the VA.*
- *MU now becoming MACRA – need to understand implications.*
- *Hiring Advanced Practice Professionals to help improve access.*
- *Hired a new faculty who will create a Multicultural Dermatology Clinic/program.*
- *Promote and grow Pediatric Dermatology.*

Research:
- *Seek alternative funding sources: Industry Sponsored, Foundations, Philanthropy.*
- *Analyzing unfunded and non-productive labs to look for efficiencies and savings.*
- *New Clinical Trials Service Units (CTSU) Initiative by Institution.*