



UNMC Planning Information and Quality Indicators

April 2014





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April 2014

prepared for the
Chancellor's Strategic Planning Retreat

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prepared by
UNMC Office of Budget and Fiscal Analysis



Chancellor's Message

The UNMC Planning Information and Quality Indicators is prepared annually for the Chancellor's Strategic Planning Retreat. This is an excellent resource full of facts and figures from the prior year, information and accomplishments of our programs and our major strategic and operational initiatives for the coming year.

This information is gathered from across the entire campus and is prepared for all of our community. I would like to thank the many faculty and staff who contribute to, and help produce, this extensive document. It is a great teamwork project.

This resource provides a clear snapshot of the breath and scope of our activities in education, research and clinical care – both regionally and on the national and international stage. It outlines the broad impact we have and highlights how we fulfill our mission of being the academic medical center for the State of Nebraska.

The accomplishments herein are a testament to our faculty, staff, students and supporters and their commitment to making UNMC one of the nation's elite academic health science centers. I am honored to share this information with you.

Jeffrey P. Gold, M.D.
Chancellor, University of Nebraska Medical Center



Preface

This 16th annual edition of UNMC Planning Information and Quality Indicators is organized into 13 sections. The first section summarizes four major initiatives: Research and Clinical Program Development, Clinical Enterprise, Teaching Methodologies, and Facility and Construction Projects for FY 2015. The second section highlights UNMC's quality indicators, national rankings and accreditations. The next seven sections provide information relative to UNMC's critical success factors for education, research, health care and community partnerships, global education and research, cultural competence, economic growth, and employee loyalty and wellness. The final four sections provide supporting information concerning finances, infrastructure, compliance strategies, and Nebraska's economic and political situation as well as federal education and health issues. Those seeking more extensive historical information should consult the various UNMC offices and other sources referenced in this report.

Information regarding UNMC's quality and institutional performance is included throughout this booklet. Twelve key quality indicators are listed on pages 5 and 6. These pages present standards, desired outcomes, status, change from prior year and subjective performance ratings for all indicators.

The Assistant Vice Chancellor for Planning and Budget appreciates the cooperation and assistance of the Chancellor and his staff, the Vice Chancellors for Academic Affairs, Business & Finance, External Affairs and Research and their staffs, the Deans of the Colleges of Dentistry, Medicine, Nursing, Pharmacy, and Public Health and their staffs, the School of Allied Health Professions, the Office of Institutional Research, the Office of Budget and Fiscal Analysis, Graduate Medical Education, Behavioral

Health Center of Nebraska, Continuing Education, IPE Curriculum and Evaluation Committee, Online Worldwide Executive Committee, the McGoogan Library of Medicine, Government Relations, Public Relations, Alumni Association, International Health and Medical Education, Asia Pacific Rim Development Program, International Studies and Programs, Human Resources, Student Services, the Center for Reducing Health Disparities, Faculty Senate, Academic Services, Financial Compliance and Cost Analysis, Facilities Management and Planning, UNMC LiveGreen, Information Technology Services, the Compliance Office, Printing Services, UN Central Administration, University of Nebraska Foundation, UNeMed, The Nebraska Medical Center, Nebraska Pediatric Practice, UNMC Physicians, and others who assisted in compiling this data.

Readers are invited to send comments and suggestions for next year's edition to Dorothy Panowicz, editor.



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UNMC Mission, Vision and Values

Mission

The mission of the University of Nebraska Medical Center is to improve the health of Nebraska through premier educational programs, innovative research, the highest quality patient care, and outreach to underserved populations.



Vision

The partnership of UNMC and The Nebraska Medical Center will be a world-renowned health sciences center that:

- Delivers state-of-the-art health care;
- Prepares the best-educated health professionals and scientists;
- Ranks among the leading research centers;
- Advances our historic commitment to community health;
- Embraces the richness of diversity to build unity;
- Creates economic growth in Nebraska.

Values

Faculty, staff and students of UNMC will:

- Emphasize quality and have high expectations for performance;
- Pursue excellence in an ethical manner;
- Foster an environment of learning and communication;
- Respect individuals for their cultures, contributions and points of view;
- Support the mission and vision of UNMC in the best interests of our customers;
- Promote individual accountability for organizational success.



Strategic Framework

UNMC Strategic Plan and University Strategic Framework

UNMC's Strategic Plan advances and extends the University of Nebraska Strategic Framework.

Investing in Nebraska's Future

The University's Strategic Planning Framework, Investing in Nebraska's Future, establishes six overarching goals to guide university-wide and campus planning. In summary form these goals are:

- To provide Nebraskans access to high quality, affordable higher education.
- To build and sustain high quality programs that emphasize excellent teaching.
- To help build a competitive workforce for Nebraska's knowledge-based economy.
- To be internationally competitive in research and scholarly activity.
- To engage with citizens, businesses, agriculture and communities throughout the state.
- To be cost effective and accountable.

UNMC Strategic Plan

Building on the foundation of UNMC's mission, vision, and values, UNMC's Strategic Plan focuses on seven critical success factors (CSF):

- Be learning-centered in education.
- Increase prominence as a research health science center.
- Advance community/campus partnerships for health.
- Create a culturally competent organization.
- Advance biomedical technologies to improve health, to create economic growth in Nebraska, and to diversify UNMC revenues.
- Sustain employee loyalty, satisfaction and wellness.
- Position UNMC to prosper during health care reform.

Goals, action steps, milestones, leaders, teams and measures are included for each CSF. The UNMC Intranet keeps the campus informed about the plan and progress in achieving strategic planning goals.



Living the Brand

Our Brand

UNMC, with its four-pillared mission, is a vital force in Nebraska.

Four brand values help power UNMC in its vital mission of education, research, patient care and outreach.

These four brand values — leadership, commitment to excellence, working together, and a trusted resource — describe UNMC and highlight the medical center’s commitment to Nebraska and beyond.

UNMC’s faculty and staff embody commitment to excellence. From educators, researchers and clinicians, to plumbers, office clerks and accountants, our workforce is diverse and vital to fulfilling our mission — to improve the health of Nebraskans.

Resources

An internal branding resources page includes file downloads of all visual elements of the brand, publication design templates for campus use, links to the UNMC brand book and University identity guidelines, a web style guide and the online photo gallery of professional images for campus use.



The UNMC Vital Thank ‘U’ program recognizes employees who demonstrate UNMC’s brand values.





Executive Summary

Strategy establishes overarching objectives and defines direction. It positions organizations to thrive in complex, uncertain external environments and guides organizational alignment. Effective strategic planning combines a compelling vision with an astute analysis of the present and of possible futures. This report highlights critical internal and external indicators that frame UNMC's strategic opportunities in education, research, patient care and outreach. It explains major strategic initiatives and documents UNMC's institutional performance and quality indicators. Key external information is provided regarding the University, UNMC Physicians, The Nebraska Medical Center, the University of Nebraska Foundation, the State of Nebraska and relevant federal research, education and health policies.

Major Initiatives for FY 2015

UNMC will continue its pursuit to be one of the nation's top academic health science centers. Toward that end, the campus community will, in the coming year, advance the following initiatives:

RESEARCH AND CLINICAL PROGRAM DEVELOPMENT

- The success of the Healthier Nebraska Initiative and the Lozier Center for Pharmacy Sciences and Education and Center for Drug Discovery will be dependent on the quality of the faculty and programs that are housed in these facilities. UNMC will undertake an aggressive program to recruit new faculty to new and existing programs. This will expand our ability to educate our students, conduct research and provide the latest patient care.

THE CLINICAL ENTERPRISE

- A major strategic goal of UNMC for 2014 is the clinical and financial integration of UNMC Physicians, The Nebraska Medical Center and the Bellevue Medical Center. This will be substantially

complete in 2014. The next steps are critical to our long-term success.

- The implementation of the new clinical enterprise will include changes internally in governance management and operations as well as external changes with the Regional Provider Network and the Accountable Care Alliance.
- The major strategic goals for UNMC in its relationship with the clinical enterprise are to ensure that the Colleges and Institutes are optimally integrated into the clinical enterprise for education, research and patient care.

TEACHING METHODOLOGIES

- The educational world is undergoing significant changes in how students are taught. UNMC has to change its instructional methodologies to provide students with the optimum environment to learn in a fashion that fits their style and expectations. UNMC began introducing flipped classrooms and massive open online courses (MOOCs) as well as simulation experiences. The



Executive Summary



future will be in virtual reality, apps for smart phones and more sophisticated simulation technology. Our faculty must prepare to meet the technology needs and expectations of incoming students.

THE HEALTHIER NEBRASKA INITIATIVE

- The construction of the Fred & Pamela Buffett Cancer Center has begun in earnest. Foundation work has begun on the Suzanne and Walter Scott Cancer Research Tower and the C.L. Werner Cancer Hospital. They will be ready for occupancy in 2017. This is the largest project in the history of UNMC, consisting of a 108-bed cancer inpatient hospital, 98-laboratory research tower and an outpatient facility dedicated to oncology patients. This will be a major initiative until the project is completed.
- The Ambulatory Care project will be located on Leavenworth Street and provide a broad range of primary care and specialty services to our patients. The project is in the planning phase with construction expected to begin late 2014.
- The Nursing and Allied Health Education Center in Kearney will grow the UNMC Nursing program in Kearney and provide space for the School of Allied Health Professions to expand many of its programs to Kearney. The groundbreaking was held on April 4, 2014, with occupancy expected in the fall of 2015.

- The final component of this initiative is the construction of a dedicated nursing building at the University of Nebraska-Lincoln. This will allow the College of Nursing to expand to better address the expected upcoming nursing shortage.

THE LOZIER CENTER FOR PHARMACY SCIENCES AND EDUCATION AND CENTER FOR DRUG DISCOVERY

- This building will replace the current College of Pharmacy space and greatly enhance its educational and research capacity. Construction will begin in late spring 2014 and the building will be ready for occupancy in 2015.

Quality Indicators

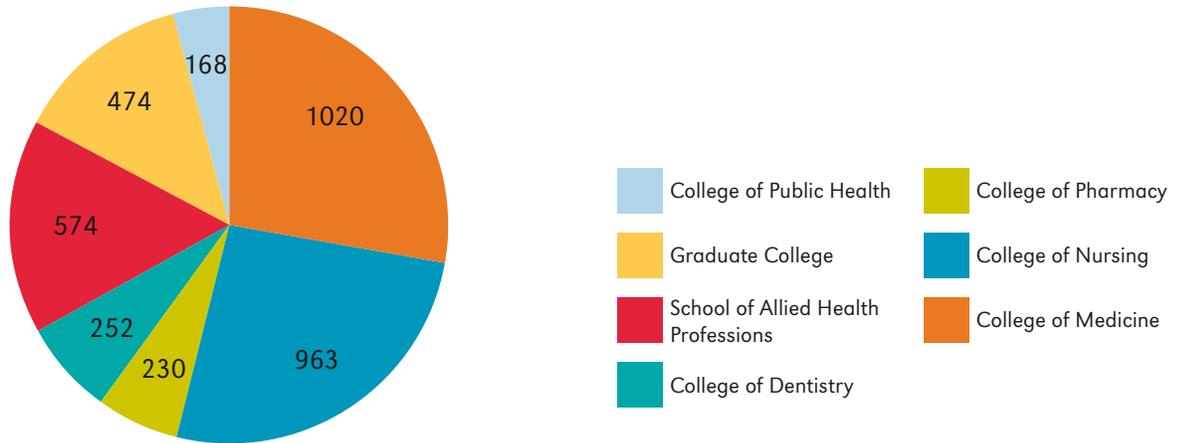
UNMC uses 12 summary indicators to highlight institutional performance and quality and to evaluate year-to-year improvements. These 12 Executive Summary indicators, and their components, are displayed in a grid that lists: the indicators, the pages for the supporting detail, UNMC’s standards of performance and desired outcomes, current quality status, changes from prior year and a subjective summary quality rating.

Most indicators remained fairly stable in 2013. External research funding is projected to increase in 2014 by 13.5% and UNMC’s NIH ranking increased from 84th to 82nd. UNeMed license revenue decreased from \$2.3 million to \$1.6 million. UNMC-P patient volume declined slightly. TNMC also showed a slight decline in volume. Positive changes included another very successful year with energy cost reductions and the start of construction of the Fred & Pamela Buffett Cancer Center – Suzanne and Walter Scott Research Tower and the Central Utility Plant Expansion. Additionally, planning is underway for expansion of the Student Life Center and East Utility Plant.

Education

UNMC’s 2013 fall enrollment was 3,681, including 508 house officers. The total enrollment includes 2,355 women and 1,326 men. Budgeted net tuition amounts to \$33.5 million, or 5.0% of the total revenue budget.

FALL 2013 ENROLLMENT



UNMC’s enrollment has increased 13.7% since 2009 and its students, in general, continue to meet or exceed the national means on licensure, certification and board exams. In 2013, 50 College of Medicine graduates stayed in Nebraska for their first year of residency compared to 49 in 2012.

The High School Alliance, which began in FY 2011, continues to bring 55 high school students from varying educational and socioeconomic backgrounds to campus daily to introduce them to the health professions. The program has a high school graduation rate of 100% for the first two years, and all of the program’s graduates have advanced to post-secondary education or are still attending high school.

Our pipeline programs reached 1,481 students in 2012-13. These programs encourage diverse studies across the State of Nebraska to consider health professions careers.

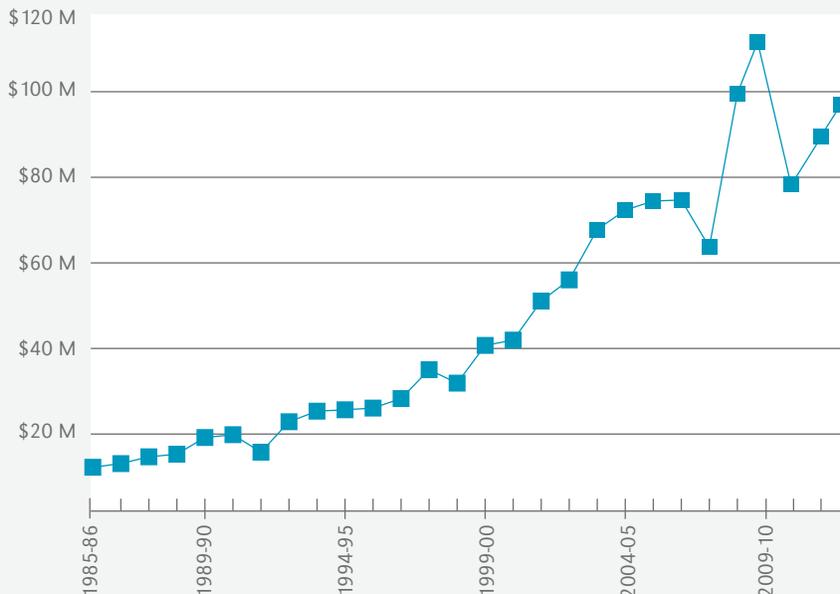
Research

During FY 2013, 239 investigators received a total of 425 research grants or contracts for a total of \$94.1 million. This is an increase of 6% from the prior year.

Noteworthy this year are the increases in NIH ranking for the College of Nursing from 26th to 22nd and the College of Pharmacy from 27th to 24th.

UNMC raised its overall NIH ranking from 84th to 82nd which is significant particularly given the difficult

NET RESEARCH FUNDING



During FY 2013, 239 investigators received a total of 425 research grants or contracts for a total of \$94.1 M. This is an increase of 6% from the prior year.



Executive Summary

funding environment, the federal sequestration of NIH funding, and the actual decrease of \$5.2M in NIH funds awarded.

A new page this year on Growing Grants – Large and Small, discusses collaborative research hubs, mentoring junior investigators and attracting new researchers.

Health Care and Community

UNMC, UNMC Physicians and the Children’s Specialty Physicians are committed to delivering state-of-the-art health care in partnership with our primary affiliates – The Nebraska Medical Center, Children’s Hospital & Medical Center and Omaha VA Medical Center. The following pages summarize the status of the clinical enterprise and health care reform, as well as the array of services provided in relation to patient and physician satisfaction indicators.

As Nebraska’s public academic health center, UNMC works to improve community health through extensive involvement with the urban and rural communities of Nebraska. UNMC graduates make up the majority of rural Nebraska health care providers, and the Rural Health Opportunities Program (RHOP) recruits and supports college students interested in rural practice.

Global Engagement

UNMC continues to expand its global engagement through international education, research and patient care. We have strong institutional partnerships in China, Oman, Russia and India. UNMC and UNeMed established an entity in China to support ongoing activities and new opportunities. During 2013, 96 UNMC students participated in global health experiences of lengths between one week and nine months in 18 different countries. In total, 812 international personnel from six continents and

59 countries work and study on UNMC sponsored programs and visas.

Cultural Competence and Diversity

Cultural competence involves building an organization where all people feel good about being there. UNMC recognizes racial, ethnic and class disparities in health outcomes and works to address care delivery and educational barriers that contribute to those disparities. The theme of “Inclusive Excellence” spans our traditional commitment to expanding diversity, our current cultural competence initiatives and our commitment to create a truly cosmopolitan campus. These activities include: robust recruitment activities that focus on the uniqueness of potential students, mentoring to improve faculty and student retention, and expanded training and involvement for all UNMC staff. UNMC carries its commitment to inclusive excellence and cultural competence into the community through programs such as the High School Alliance, Summer Medical and Dental Education Program, the agreement with the Chinese Scholarship Council, the Nursing Diversity Scholarship Award and the annual Culturefest event.

Economic Growth

UNMC’s broad approach to economic development includes: educating health professionals and scientists, creating jobs through externally funded research and facilities construction and commercializing technology. UNMC’s \$94.1 million of externally funded research expenditures supported more than 1,400 well-paying jobs across the state.

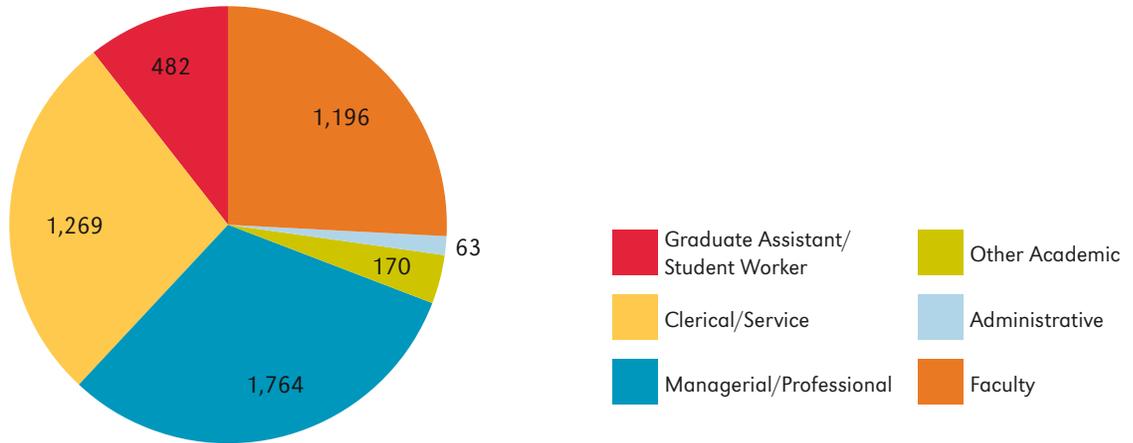
Multiple units within UNMC collaborate with each other and with outside industry and businesses to take UNMC’s cutting-edge scientific discoveries from the bench to the marketplace. During FY 2013, UNeMed

The total economic impact of UNMC and The Nebraska Medical Center to Nebraska is well over \$3.2 billion annually. UNMC and the hospital supported more than 19,300 jobs throughout the state in FY 2013.

COMBINED WORKFORCE

UNMC, UNMC Physicians, Nebraska Pediatric Practice and The Nebraska Medical Center employ a combined workforce of 11,270. Together, they represent one of the largest employers in the state.

EMPLOYMENT, FEBRUARY 2014



earned over \$1.6 million in license revenue and filed 107 new patent applications. These figures represent a decrease of almost 30% in license revenue while almost 23% more patents were applied for than the previous year.

Employees

UNMC employs 4,944 people, with an FTE of 4,193. Personnel costs amounted to 65.19% of expenditures based on total operating expenditures from all funding sources through February 28, 2014. For the second year in a row, 67% of benefits-eligible employees participated in the year's University health risk assessment, over double the participation rate in 2009.

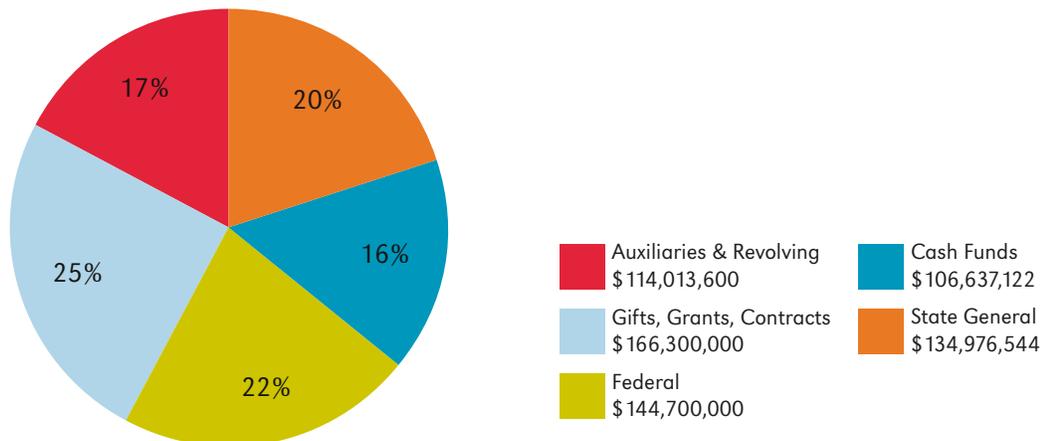
The "taking your next step at UNMC" retention and new employment recruitment campaign was launched in October 2013. Reinforcing the value and opportunities associated with a career at UNMC is the goal of the campaign.

Financial Strength

The combined FY 2013 budget for UNMC, the hospital and UNMC Physicians is \$1.7 billion.

UNMC is 79.8% self-supporting. UNMC's FY 2014 operating budget is \$666.6 million, of which \$396.3 million, or 60%, is designated for instruction and research. The State provides \$135.0 million, or 20.2%,

REVENUE BUDGET FY 2013-14

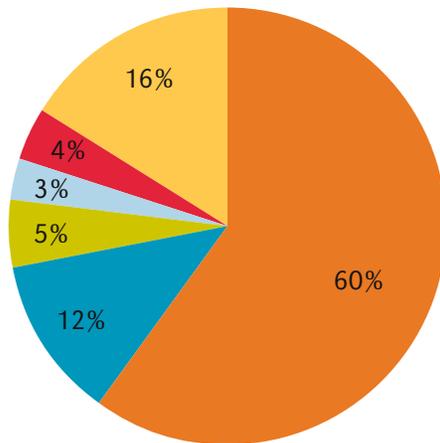


Together, UNMC, UNMC Physicians and The Nebraska Medical Center have an operating budget of more than \$1.7 billion.



Executive Summary

EXPENSE BUDGET FY 2013-14



Aux./Ind. Operations \$109,248,540	Academic/Student Support \$35,535,396
Physical Plant Operations \$22,931,222	Public Service \$80,055,853
Institutional Administration \$22,558,066	Instruction & Research \$396,298,189

of UNMC’s revenues. (This does not include Nebraska Research Initiative funding, which is included in the Central Administration budget). UNMC’s primary sources of self-support are clinical revenues generated by UNMC Physicians, the Children’s Specialty Physicians, Omaha VA Medical Center and The Nebraska Medical Center; research grants and contracts; and gifts and University of Nebraska Foundation support.

Infrastructure (Facilities, Information Technology and Library):

Facilities

Facilities Management and Planning (FMP) is currently managing seven major construction projects at UNMC in Omaha, Lincoln and Kearney. Energy initiatives continued to maintain decreased energy consumption by 22% in 2013 which offset load additions with the completion of the Truhlsen Eye Institute. Initiatives planned for 2014 and 2015 are projected to lower energy by an additional 20%.

Sustainability awareness has been increased through the deployment of almost 700 additional recycling bins



MAJOR PROJECTS UNDER CONSTRUCTION

The Fred & Pamela Buffett Cancer Center - Suzanne and Walter Scott Research Tower
\$110 million

Lozier Center for Pharmacy Sciences and Education and Center for Drug Discovery
\$35 million



for plastics and metals. New and updated facilities and improved campus infrastructure support research growth, expanding patient care, recruitment of quality faculty and enhanced student education. Technicians continue to work in a zone maintenance structure to improve service and more effectively manage costs.

Committed donors are financing the continued growth of UNMC's campus. They are funding the construction and design of the Building a Healthier Nebraska Initiatives, the new Lozier Center for Pharmacy Sciences and Education and Center for Drug Discovery and the next stage of the Truhlsen Eye Institute.

Information Technology

UNMC Information Technology Services (ITS) provides secure enterprise-wide data, voice and video support for patient care, research education and outreach. In 2013, there were 196 classrooms with technology, up from just 17 in 2000. There are currently 49 ITS applications under development (14 research, 14 academic, 11 administrative, 11 infrastructure).

Library

The McGoogan Library of Medicine is UNMC's electronic gateway to global collections of research and educational resources. The McGoogan Library is harnessing the power of technology to train new health care professionals, to improve patient outcomes, to leverage research and to maximize UNMC's return on information resources.

Compliance

Compliance requirements never end, and they never remain constant. This section documents FY 2014 compliance accomplishments and presents FY 2015 compliance goals.

State and Federal: Economy, Politics, Demographics and Federal Relations

Omaha and Nebraska weathered the recession better than the United States in general. Housing prices remained relatively stable and unemployment has fallen from a high of 6% to the current rate of 3.6% in February, 2014.

Nebraska legislative issues of interest to UNMC this session included LB 764 with \$1.8 million for pediatric cancer funding, which has been signed into law. LB 887, which would have extended health benefits to uninsured Nebraskans was stalled in the Unicameral. The reductions in NIH and other research funding and the need to increase funding for graduate medical education are crucial to UNMC and the health of Nebraskans. If research funding declines, it will have a detrimental impact on our ability to maintain our research mission. Without increased funding for graduate medical education, it will make it more difficult to train the future physician workforce for Nebraska.

MAJOR INITIATIVES TAB

MAJOR INITIATIVES TAB

RESEARCH AND CLINICAL PROGRAM DEVELOPMENT



The success of the Healthier Nebraska Initiative and the Lozier Center for Pharmacy Sciences and Education and Center for Drug Discovery will be dependent on the quality of the faculty and programs housed in these facilities.

UNMC will undertake an aggressive program to recruit faculty to new and existing programs. This will expand our ability to educate our students, conduct research and provide the latest patient care.

During the coming months, campus leaders will continue to define the programs and areas of excellence within these facilities and campus units. Faculty will be recruited as needed to implement the programs and fulfill the vision. Work already has begun related to such areas as research and the clinical enterprise.



THE CLINICAL ENTERPRISE



- A major strategic goal of UNMC for 2014 is the clinical and financial integration of UNMC Physicians, The Nebraska Medical Center and the Bellevue Medical Center. This will be substantially complete in 2014. The next steps are critical to our long-term success.
- The implementation of the new clinical enterprise will include changes internally in governance management and operations. The major strategic goals for UNMC in its relationship with the clinical enterprise is to ensure that the Colleges and Institutes are optimally integrated into the clinical enterprise for education, research and patient care.
- The Performance Improvements Initiatives that target quality, patient experience, work environment and margin improvement are core to the success of the clinical enterprise.
- The clinical enterprise has identified as critical items:
 - Recruiting and program growth for the Cancer Center, Ambulatory Care Facility and the Bellevue Medical Center
 - The reorganization of the Bellevue Medical Center to a non-profit entity
 - The branding of the clinical enterprise
 - The Fred & Pamela Buffett Cancer Center
 - Main campus and Village Pointe ambulatory projects
 - The relationship with Madonna Rehabilitation Hospital
 - The Accountable Care Alliance
 - Regional strategies, including the Regional Provider Network

TEACHING METHODOLOGIES



The educational world is undergoing significant changes in how students are taught. UNMC has to change its instructional methodologies to provide students with the optimum environment to learn in a fashion which fits their style and expectations.

UNMC has introduced flipped classrooms and massive open online courses (MOOCs), as well as simulation experiences. The future will be in virtual reality, apps for smart phones and more sophisticated simulation technology. Our faculty must prepare to meet the technology needs and expectations of incoming students.

As part of a strategic initiative to enhance on-campus learning, campus leaders have challenged faculty to develop a blended approach that uses e-modules and e-courses coupled with flipped classrooms. The goal is to be a national leader in blended (online integrated with face-to face) classrooms.

Campus leaders also have a vision to create an interprofessional teaching academy that enables UNMC to become a leader in teaching innovation. With support from the Vice Chancellor for Academic Affairs and an interprofessional steering committee, the long-term goals include:

- Being a leader in innovation in interactive e-Learning for students;
- Being leaders in the research of pedagogy;
- Continued improvement in the quality of teaching on campus; and
- Development of an e-Learning laboratory that helps faculty redesign courses.

A fledgling e-Learning laboratory has been started inside McGoogan Library, where faculty can redesign or develop new e-Learning modules and courses. The goal is to grow the resource lab into a future e-Learning center of excellence and provide a full spectrum of audio and video capabilities, instructional design consultation and computing resources.

In May 2013, the University of Nebraska announced its intent to partner with Coursera, a leading provider of massive open online courses (MOOCs), to expand access to the University's rich course content and talented faculty to significantly more individuals via distance learning. Meanwhile, the University of Nebraska Online Worldwide remains NU's primary platform for providing distance education. Online Worldwide provides access to more than 130 online degree, certificate and endorsement programs offered by the four campuses.

FACILITY AND CONSTRUCTION PROJECTS FY 2015



The Healthier Nebraska Initiative

FRED & PAMELA BUFFETT CANCER CENTER

The construction of the Fred & Pamela Buffett Cancer Center has begun in earnest. Foundation work has begun on the Suzanne and Walter Scott Cancer Research Tower and the C.L. Werner Cancer Hospital. They will be ready for occupancy in 2017. This is the largest project in the history of UNMC, consisting of a 108-bed cancer inpatient hospital, 98-laboratory research tower and an outpatient facility dedicated to oncology patients. This will be a major initiative until the project is completed.

THE AMBULATORY CARE PROJECT

The Ambulatory Care project will be located on Leavenworth Street and provide a broad range of primary care and specialty services to our patients. The project is in the planning phase with construction expected to begin late 2014.

THE NURSING AND ALLIED HEALTH EDUCATION CENTER AT UNIVERSITY OF NEBRASKA AT KEARNEY

The Nursing and Allied Health Education Center in Kearney will grow the UNMC Nursing program in Kearney and provide space for the School of Allied Health Professions to expand many of its programs to Kearney (physician assistant, physical therapy, clinical laboratory science, medical nutrition, radiography and diagnostic medical sonography). The groundbreaking was April 4, 2014. Occupancy is expected in the fall of 2015.

COLLEGE OF NURSING - LINCOLN DIVISION BUILDING

The final component of this initiative is the construction of a dedicated nursing building at the University of Nebraska-Lincoln. This will allow the College of Nursing in Lincoln to expand to better address the expected upcoming nursing shortage.

THE LOZIER CENTER FOR PHARMACY SCIENCES AND EDUCATION AND CENTER FOR DRUG DISCOVERY

This building will replace the current College of Pharmacy space and greatly enhance its educational and research capacity. Construction will begin in late spring 2014; the building will be ready for occupancy in 2015.

CAMPUS INFRASTRUCTURE IMPROVEMENTS

Strategic energy initiatives are a priority. This project will provide expanded capacity for the new facilities and improvements to continue the program of energy cost reductions on campus.

QUALITY INDICATORS TAB

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QUALITY INDICATORS

INDICATOR	PAGE(S)	STANDARDS	QUALITY STATUS	CHANGE FROM PRIOR YEAR	SUBJECTIVE PERFORMANCE RATING
1. Certification/ licensure exams	14	Desired Outcomes 100% pass rate; UNMC exceed the median performance	Pass rates at 95% for MD Step 1, 99% for MD Step 2, 100% for Pharmacy, 99% for DDS Part 2, and 87% for BSN	Declined Continuing Continuing Stable Declined	Very good
2. Research funding and NIH rankings	29-31	Increase funding annually and improve NIH rankings	Net research awards increased by 6.4% NIH research awards declined by 8.5% COM's ranking above minimum desired	Improved Declined Stable	Very Good
3. Health care delivery and patient satisfaction	40	≥ 85% patient and physician satisfaction <i>Increasing volume and market share</i>	UNMCP patient satisfaction score 90.3 Patient activity stable - slight growth TNMC Market Share Local 24.8%	Stable Stable Stable	Good
4. Rural activities	24	≥ 60% rural practitioners from UNMC <i>Rural education sites and outreach</i>	Over 70% of NE rural physicians, pharmacists, dentists, PAs, nurse practitioners & clinical nurse specialists are UNMC graduates	Continuing	Excellent
5. Minority recruitment and retention	47-54	≥ peer group diversity rates (several peers are in larger cities with larger minority populations) <i>Culturally competent environment</i>	Minority (under-represented minority) %tages F/T Faculty -- 17.5% (3.7%) All Employee -- 17.4% (6.2%) Students -- 11.8% (5.1%)	Stable Stable Decline	Good
6. Economic growth and technology commercialization	55-56	Economic impact: UNMC, UNMC-P & Hospital <i>combined direct and indirect employment</i> \$2 M of UNeMed income by 6/30/2010 <i>Omaha & Nebraska economic growth</i> <i>Scientific and health care benefits</i>	\$3.2 billion in FY 2013 Approximately 19,300 (11,270 direct) \$1.6 M FY 2013 revenue (29.4% decrease) Strong research & construction funding Advances in basic & clinical science	Stable Increase Declined Improved Stable	Excellent
7. Employee loyalty, satisfaction, and wellness	57-63	90% retention rates Greater than 70% remain employed for 3 years or more <i>Health risk assessment participation</i> Strong employee satisfaction survey results	92% employee retention 72% employed 3 years or more Fourth year completion rate of 67% (52%) Employee engagement 71%	Stable Stable Stable Improved	Excellent
8. Financial strength	65-71	≥ 4% non-general fund growth ≥ 4% growth in prior year net assets <i>Fund facilities and program goals</i>	4.0% growth in non-general fund revenue 9.3% growth in 6/30/12 net assets	Declined Improved	Very good
9. Infrastructure	73-79	Meet annual construction and technology objectives <i>Implement facilities and ITS master plans</i>	Energy management upgrades Cancer Campus advancing IT infrastructure renovation	Improved Improved Improved	Excellent

INDICATOR	PAGE(S)	STANDARDS	QUALITY STATUS	CHANGE FROM PRIOR YEAR	SUBJECTIVE PERFORMANCE RATING
10. Strategic objectives/ leadership	--	> 75% accomplishment of objectives	See Strategic Plan progress report	Stable	Excellent
	4	<i>Campus participation and community support and involvement</i>	Strong community support	Stable	
	43-46		Building a Healthier Nebraska	Stable	
			Global engagement expanding and strong	Stable	
11. Compliance effectiveness	81	Satisfactory external compliance reviews	Satisfactory external evaluations	Stable	Very good
		<i>Compliance processes that advance UNMC's mission and vision</i>	Compliance improvements implemented and continuing	Stable	
12. Comprehensive national rankings	7	National recognition for academic programs, research activities and clinical services <i>High US News and World Report rankings for academic programs and nationally recognized clinical services</i>	Primary Care ranked 6th	Stable	Excellent
			Rural Medicine - 9th	Improved	
			TNMC ranked #1 in Nebraska	Stable	
			1 specialty nationally ranked	Declined	
			8 specialties ranked as high performing	Improved	

CHANGES FROM PRIOR YEAR

Improved = higher indicator value
 Continuing - The value continues to meet or exceed the desired outcome
 Stable = no significant change from prior year
 Declined = lower indicator values

OVERALL SUBJECTIVE RATINGS:

Outstanding = far exceeds standards and desired outcome; maintain exceptional quality
 Excellent = exceeds standards and desired outcome; maintain and improve excellent quality
 Very Good = close to standard and desired outcome; minor improvement required
 Good = somewhat below expectations; improvement required
 Fair = clearly below expectations; major improvement required



NATIONAL EDUCATIONAL AND HEALTH CARE RANKINGS

US News and World Report

America's Best Graduate Schools 2015	Ranking	US News & WR # of Colleges/ Programs	Ranking Factors
College of Medicine -- Research - 2014 ranking	64	153	Research activity, peer assessment, residency directors' assessment, student selectivity, mean MCAT, mean undergrad GPA, acceptance rate, faculty/student ratio
College of Medicine -- Rural Health - 2014 ranking	9	153	
Medical Schools -- Primary Care - 2014 ranking	6	153	Proportion of graduates entering primary care specialties, peer assessment, residency directors' assessment, primary care entrance rate, student selectivity, mean MCAT, mean undergrad GPA, acceptance rate, faculty/student ratio
Nursing (Master's) - 2011 ranking	36	467	For nursing (Master's), Physician Assistant and Physical Therapy programs - "Rankings are based solely on the results of peer assessment surveys sent to deans, other administrators, and/or faculty at accredited degree programs or schools in each discipline."
Physical Therapy (Master's/Doctorate) - 2012 ranking	34	201	
Physician Assistant (Master's) - 2011 ranking	16	130	
College of Pharmacy - 2012 ranking	32	125	Based on academic quality of doctoral program
College of Dentistry	(a)	56	a) CODs have not responded to the surveys since the early 1990's
College of Public Health			New college - not ranked by <i>US News & World Report</i>

US News & World Report Rankings

The Nebraska Medical Center	Ranked #1 in Nebraska	
The Nebraska Medical Center	Ranked Nationally in Cancer	
The Nebraska Medical Center	Ranked in 8 "High-Performing" Specialties	Specialties include: ear, nose & throat; gastroenterology; geriatrics; nephrology; neurology & neurosurgery; orthopaedics; pulmonology; urology

EXTERNAL ACCREDITATIONS

CAMPUS UNIT	DEPARTMENT/PROGRAM	ACCREDITING BODY	NEXT ACTION
Institutional	University of Nebraska Medical Center	North Central Association of Colleges & Schools	2016-17
Allied Health	Cytotechnology	American Society of Cytopathology	2014
Allied Health	Clinical Laboratory Science	National Accrediting Agency for Clinical Laboratory Sciences	2019
Allied Health	Medical Nutrition Education	American Dietetic Association	2018
Allied Health	Perfusion Science	Accreditation Committee-Perfusion Education	2015
Allied Health	Physical Therapy	Commission on Accreditation in Physical Therapy Education (CAPTE)	2014
Allied Health	Physician Assistant Studies	Accreditation Review Committee on Education for Physician Assistant	2017
Allied Health	Radiation Science Technology – Medical Sonography – Nuclear Medicine Technology – Radiation Therapy – Radiography -- Magnetic Resonance Imaging	Joint Review Committee on Education in – Diagnostic Medical Sonography – Nuclear Medicine Technology – Radiologic Technology – Radiologic Technology -- Radiologic Technology	2015 2018 2015 2015 2019
Dentistry	College of Dentistry	Commission on Accreditation of the American Dental Association	2014
Medicine	College of Medicine	Liaison Committee on Medical Education	Pending
Medicine	Graduate Medical Education	Council for Graduate Medical Education	2013
Medicine	Continuing Medical Education	Accreditation Council for Continuing Medical Education	2014
Medicine	Comparative Medicine	Association for Assessment and Accreditation of Laboratory Animal Care	Pending
Nursing	College of Nursing	Commission on Collegiate Nursing Education	2019
Nursing	Continuing Education in Nursing	American Nurses Division of Credentialing Center Association	2016
Pharmacy	College of Pharmacy	American Council on Pharmacy Education	2020
Pharmacy	Pharmacy Residency Program	Health Systems of Pharmacists	2014
Public Health	College of Public Health	Council on Education for Public Health	2016

Graduate Medical Education Accreditations by Department Accreditation Council for Graduate Medical Education (ACGME)*

DEPARTMENT	STATUS	LAST AWARDED
Institutional Review	Favorable	2013
Anesthesia	Accredited	2009
Emergency Medicine	Accredited	2006
Family Practice - Omaha	Accredited	2011
Family Practice - Rural	Accredited	2010
Internal Medicine	Accredited	2006
Adult Infectious Disease	Init. Accred.	2012
Cardiovascular Disease	Accredited	2006
Interventional Cardiology	Accredited	2006
Clinical Cardiac Electrophysiology	Accredited	2006
Gastroenterology	Accredited	2006
Hematology/Oncology	Accredited	2008
Nephrology	Accredited	2009
Pediatrics/Medicine	Accredited	2010
Pulmonary/Critical Care	Accredited	2006
Geriatrics	Accredited	2006
Endocrinology & Metabolism	Accredited	2006
Rheumatology	Accredited	2009
Sleep Medicine	Accredited	2008
Medical Genetics	Accredited	2012
Medicine/Pediatrics	Accredited	2009
Neurology (CU/NU Program)	Accredited	2010

DEPARTMENT	STATUS	LAST AWARDED
Neurosurgery	Accredited	2008
Obstetrics/Gynecology	Accredited	2011
Ophthalmology	Accredited	2009
Orthopedics (CU/NU Program)	Accredited	2008
Otolaryngology	Accredited	2010
Pathology	Accredited	2010
Hematopathology	Accredited	2008
Pediatrics (CU/NU Program)	Accredited	2010
Pediatric Cardiology	Init. Accred.	2012
Pediatric Gastroenterology	Accredited	2010
Pediatric Infectious Disease	Accredited	2010
Pediatric Pulmonology	Init. Accred.	2012
Pediatric Surgery	Init. Accred.	2013
Diagnostic Radiology	Accredited	2008
Interventional Radiology	Accredited	2008
Pediatric Radiology	Accredited	2008
Radiation Oncology	Init. Accred.	2012
Surgery	Accredited	2012
Plastic Surgery	Accredited	2012
Transplant Hepatology	Init. Accred.	2013
Urology	Accredited	2007
Oral Surgery **	Approval	2009

*ACGME is changing their accreditation process in 2013. Accreditation is moving from 5 years to 10 years.

**American Dental Association
CU/NU Program - Creighton University and UNMC Program
Init. Accred. = Initial Accreditation

A complete list of accreditations is available at http://www.unmc.edu/academicaffairs/accrediting_agencies.htm.

Provided by the UNMC Office of Institutional Research

EDUCATORS TAB

EDUCATORS TAB

ADMISSIONS STATISTICS 2010-13

	TOTAL (a, b)	NEBRASKA RESIDENTS	NON- RESIDENTS	MALE	FEMALE	MINORITY (c)	UNDER- REPRESENTED MINORITY (d)	RURAL NEBRASKA (e)
2013								
Applications Filed	5,318	1,932	3,386	2,200	3,019	797	371	381
Accepted	1,478	1,090	380	422	1,051	180	103	230
% Accepted	28%	56%	11%	19%	35%	23%	28%	60%
Entered	1,381	1,046	335	390	991	159	90	224
2012								
Applications Filed	5,376	1,818	3,558	2,265	3,069	1,414	281	415
Accepted	1,539	1,056	483	467	1,071	270	91	297
% Accepted	29%	58%	14%	21%	35%	19%	32%	72%
Entered	1,340	932	408	415	925	230	75	273
2011								
Applications Filed	5,383	2,059	3,324	2,087	3,282	777	328	423
Accepted	1,425	1,082	344	386	1,042	167	91	348
% Accepted	26%	53%	10%	18%	32%	21%	28%	82%
Entered	1,247	963	284	347	900	144	74	319
2010								
Applications Filed	5,531	2,292	3,239	2,117	3,414	1,306	-	373
Accepted	1,508	1,157	351	375	1,133	170	-	270
% Accepted	27%	50%	11%	18%	33%	13%	-	72%
Entered	1,355	1,035	320	346	1,009	148	-	255

a) Information is for fall semester of each year listed, some numbers have been updated and may not match prior years' reports.

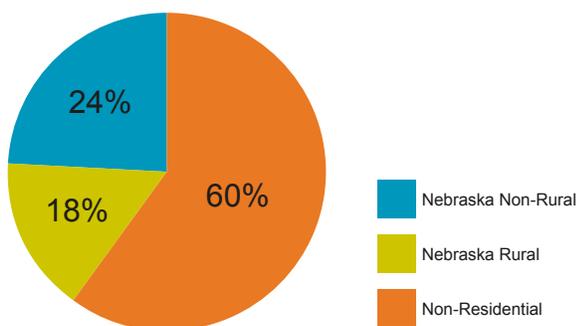
b) Demographic information not always provided by applicants. The numbers for gender, ethnicity, and residency do not always add up to total applications.

c) Minority includes Asian, Black, Hispanic, and Native American, Native Hawaiian/Other Pacific Islander, and Unknown and Two or More races.

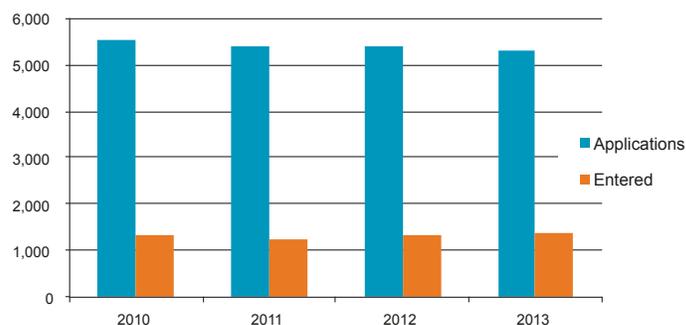
d) Under-represented minority includes Black, Hispanic, Native American, Native Hawaiian/Other Pacific Islander, and Unknown and Two or More races. Not reported in 2010.

e) Rural Nebraska indicates applicants/students from counties with population of 25,000 or less.

Entering Students 2013



Entering Students 2010-2013



COMPARISON OF ACADEMIC YEAR (RESIDENT) TUITION AND MANDATORY FEES

UNMC vs. Peer Group Average (Excluding UNMC)

PROGRAM	2011-12 PEER GROUP AVERAGE	2011-12 PEER AVERAGE INCREASE	2011-12 UNMC	UNMC RANK	2012-13 PEER GROUP AVERAGE	2012-13 PEER AVERAGE INCREASE	2012-13 UNMC	UNMC RANK	2013-14 PEER GROUP AVERAGE	2013-14 PEER AVERAGE INCREASE	2013-14 UNMC	UNMC RANK
Undergraduate	\$9,570	5.7%	\$6,746	7-8	\$9,974	4.2%	\$7,008	7-8	\$9,989	0.2%	\$7,008	7-8
Graduate	\$10,337	1.3%	\$7,074	8-9	\$11,251	8.8%	\$7,344	8-9	\$11,602	3.1%	\$7,344	8-9
Nursing Undergraduate	\$10,094	7.9%	\$8,403	7-10	\$11,040	9.4%	\$8,733	8-10	\$11,012	-0.3%	\$8,860	9-10
Nursing Graduate	\$12,656	4.7%	\$10,664	7-10	\$13,627	7.7%	\$11,052	7-10	\$14,278	4.8%	\$11,179	7-10
Medicine	\$30,107	2.4%	\$27,441	9-10	\$30,685	1.9%	\$28,567	8-10	\$31,604	3.0%	\$28,495	8-10
Dentistry (a)	\$29,173	-0.1%	\$23,178	8-9	\$29,813	2.2%	\$24,134	8-9	\$31,763	6.5%	\$24,624	8-9
Pharmacy	\$22,094	4.0%	\$18,303	9-9	\$22,059	-0.2%	\$18,871	8-9	\$23,219	5.3%	\$18,999	8-9
UNMC Tuition Increase Rate			5%*				3.75%**				0%	

(dollar amounts in table also include mandatory fees, which changed by fixed dollar amounts)

Peer Group includes: U of Colorado Health Science Center, U of Minnesota, U of Tennessee--Memphis, Ohio State U, U of Iowa, U of Kansas Medical Center, U of Illinois--Chicago, U of Oklahoma Health Science Center and U of Kentucky

Source: Budget Request Supplemental Forms

UNMC rank is UNMC's position relative to total number of peer programs with 1 being the most expensive.

a) UNMC Dentistry includes fall and spring tuition, registration fees, library fees, and student fees, but does not include summer tuition and books and instruments. Peer data may not be entirely comparable.

*In FY 2011-12 special tuition increases were implemented for UNMC's College of Dentistry (DDS program only, first, second, and third years), and College of Public Health (professional programs, first year) to enhance education by hiring additional faculty members.

**In FY 2012-13 special tuition increases were implemented for UNMC's College of Dentistry (DDS program only, all years), and College of Public Health (professional programs, first year and second years) to enhance education by hiring additional faculty members.



GPA AND ENTRANCE EXAM SCORES OF MATRICULANTS IN UNMC EDUCATIONAL PROGRAMS - 2011-2013

National Data are in Parenthesis ()

PROGRAM	2011	2012	2013
School of Allied Health Professions			
Clinical Perfusion GPA	3.35	3.49	3.30
Physician Assistant GPA	3.75	3.78	3.72
Physical Therapy GPA	3.78	3.70	3.79
Medical Nutrition Education GPA	3.54	3.65	3.70
Cytotechnology GPA	3.25	3.00	3.00
Clinical Laboratory Science GPA	3.37	3.37	3.31
Radiography GPA	3.76	3.60	3.55
Computer Tomography/MRI GPA	3.41	3.48	
Computer Tomography GPA			3.43
Magnetic Resonance Imaging GPA			3.39
Diagnostic Medical Sonography GPA	3.47	3.62	3.45
Nuclear Medicine Technology GPA	3.16	3.40	3.38
Radiation Therapy GPA	3.56	3.47	3.53
College of Dentistry			
Dentistry GPA	3.86	3.80	3.76
Dentistry DAT	19 (20)	20 (19)	19 (19)
Dental Hygiene GPA	3.45	3.57	3.55
College of Medicine			
Medicine GPA	3.75	3.77 (3.68)	3.74 (3.69)
Medicine MCAT verbal	9.8 (9.8)	9.6 (9.8)	9.9 (10)
Medicine MCAT phys.	9.7 (10.4)	10.2 (10.5)	10.2 (10.6)
Medicine MCAT biol.	10.6 (10.8)	10.7 (10.9)	10.5 (10.8)
College of Nursing			
Undergraduate Nursing GPA	3.64	3.70	3.62
Graduate GPA*			3.86
College of Pharmacy			
Pharmacy GPA	3.42	3.62	3.55
Pharmacy PCAT	61.0	65.3 (52.6)	65.0 (57.8)
Graduate College			
GPA	3.58	3.53	3.47
GRE - Verbal**	488	465	153
GRE - Quantitative**	728	680	157
GRE - Analytical Writing	3.3	3.5	4.5
College of Public Health			
GPA	3.50	3.48	3.59
GRE - Verbal**	479	490	500/153
GRE - Quantitative**	628	610	680/153
GRE - Analytical Writing	3.8	3.6	4.0

* Graduate Nursing GPA was included with Graduate College prior to 2013

** GRE changed their scoring scale from 200-800 for Verbal and Quantitative to 130-170 in August 2011. They are still reporting both scores.

Provided by UNMC Office of Institutional Research

ENROLLMENT STATISTICS

GENDER, RACE, ETHNICITY, AGE AND COLLEGE

Fall Enrollment

ENROLLMENT STATISTICS												
Fall	Total	Male	Female	Alien	Black	Asian	Hispanic	American Indian/ Alaskan Native	White	Native Hawaiian/ Pacific Islander	Unknown and Two or More Races	
				(a)	(b)							
2013	3,681	1,326	2,355	291	71	167	107	8	2,957	2	78	
		36.0%	64.0%	7.9%	1.9%	4.5%	2.9%	0.2%	80.3%	0.05%	2.1%	
2012	3,655	1,305	2,350	280	85	171	98	20	2,938	3	60	
		35.7%	64.3%	7.7%	2.3%	4.7%	2.7%	0.5%	80.4%	0.08%	1.6%	
2011	3,626	1,235	2,391	259	69	168	93	15	2,987	2	33	
		34.1%	65.9%	7.1%	1.9%	4.6%	2.6%	0.4%	82.4%	0.06%	0.9%	

a) Alien = foreign, non-immigrant

b) Hispanic = Puerto Rican, Mexican, Cuban, Central and South American and other Spanish Cultures

Enrollment by Age Category

AGE	2011	%	2012	%	2013	%
18-19	10	0.3	4	0.1	5	0.1
20-21	316	8.7	301	8.2	294	8.0
22-24	1,158	31.9	1,089	29.8	1,057	28.7
25-29	1,232	34.0	1,247	34.1	1,301	35.3
30-34	461	12.7	507	13.9	549	14.9
35-39	200	5.5	207	5.7	189	5.1
40-49	173	4.8	212	5.8	204	5.5
50-64	75	2.1	86	2.4	81	2.2
65+/ Unk	1	0.0	2	0.1	1	0.0
Total	3,626		3,655		3,681	

Enrollment by College

COLLEGE	2011	2012	2013
College of Dentistry	249	253	252
College of Medicine	499	523	512
House Officers	477	489	508
School of Allied Health	393	522	549
College of Nursing	1182	993	963
College of Pharmacy	244	235	230
College of Public Health	115	147	168
Graduate Studies	445	462	474
Visiting - Undergrad Non Degree	22	31	25
Total Enrollment	3,626	3,655	3,681

Nursing headcount decreased in 2012-13, with no resulting decline in student credit hours, due to curriculum change.

DEGREES AWARDED 2009-2013

YEAR	B.S.	POST B.S. CERTIFICATE	M.S.	POST M.S. CERTIFICATE	PROFESSIONAL	PH.D.	TOTAL
(a)	(b)		(c)		(d,e)		
2013	646 (194)	12	423 (117)	21	294	42	1,438
2012	749 ^f (137)	11	577 (420)	18	269	40	1,664
2011	611 (236)	11	536 (370)	20	254	39	1,471
2010	616 (220)	12	581 (416)	10	277	34	1,530
2009	554 (199)	14	575 (349)	8	261	46	1,458

a) Year includes the May graduates plus graduates from the previous August and December.

b) BS Degrees include degrees awarded to military PA students, listed in ().

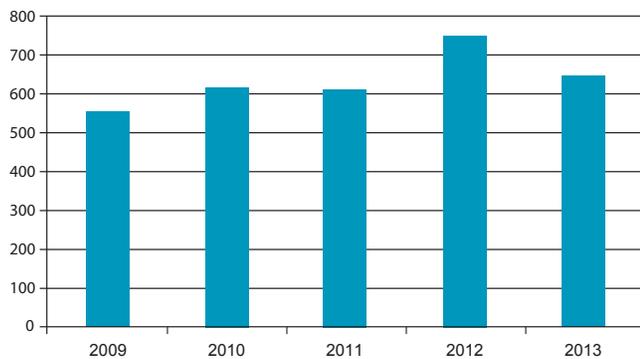
c) MS Degrees awarded to Distance Learning PA students, listed in ().

d) The DPT is a professional degree, first awarded at UNMC in 2004. At this time, IPEDS does not consider the DPT to be a professional degree, although that is how it is counted at UNMC.

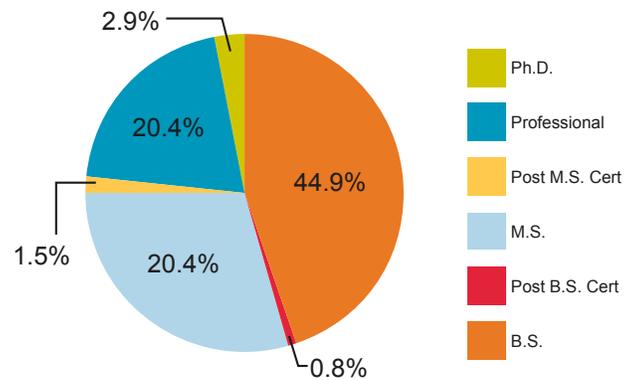
e) The Doctor of Nursing Practice (DNP) was added in 2013.

f) There are more BS degrees in 2012 because the CON graduated classes from two separate curriculums.

**B.S. Degrees Awarded
2009-2013**



**Degrees Awarded
2013**

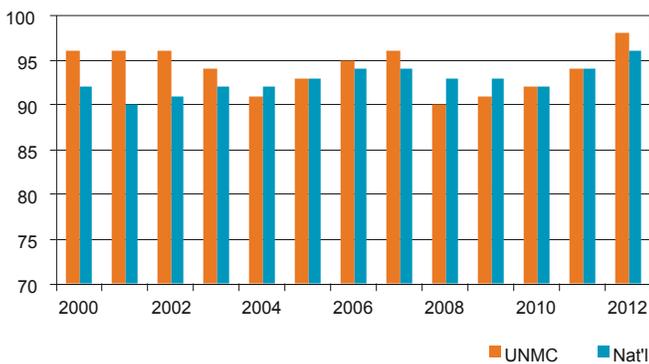


PERFORMANCE OF STUDENTS ON LICENSURE, CERTIFICATION OR BOARD EXAMS

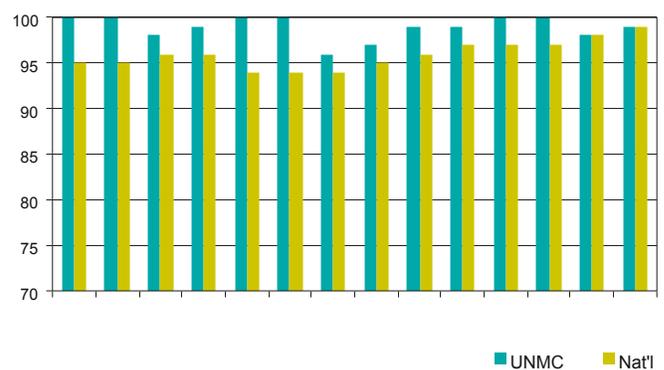
	2011				2012				2013			
	Fail %		Mean Score		Fail %		Mean Score		Fail %		Mean Score	
	UNMC	Nat'l	UNMC	Nat'l	UNMC	Nat'l	UNMC	Nat'l	UNMC	Nat'l	UNMC	Nat'l
Allied Health												
Clinical Laboratory Science	3	20	542	487	0	16	550	499	0	16	561	502
Clinical Perfusion	9	17.1	148	132	0	19	157	145	0	NA	162.5	NA
Computed Tomography	0	NA	NA	NA	0	NA	NA	NA	0	NA	NA	NA
Cytotechnology	0	7	689	549	0	4.8	700	540	16	10	615	535
Diagnostic Medical Sonography	0	31.0	NA	NA	0	30	NA	NA	0	30	NA	NA
Magnetic Resonance Imaging	0	NA	80	80	0	NA	88	NA	0	17.4	87	82
Medical Nutrition	0	13	33	28	16.7	16	28	28	0	15	31	28
Nuclear Medicine	0	8.6	83	78	0	11.8	87	78	0	NA	82	NA
Physical Therapy	0	10.7	674	651	10.4	11.1	653	652	2	9.8	689	674
Physician Assistant	2	9	667	574	5	7	487	501	2	6	532	NA
Radiation Therapy	0	9.7	87	83	0	9	88	83	0	9.8	88	82
Radiography	0	7.3	87	85	0	7	90	85	0	10.4	86	84
College of Dentistry												
DDS Part 1	0	5.7	84	82	2	NA	NA	NA	4	NA	NA	NA
DDS Part 2	2.3	5.9	83	80	0	NA	NA	NA	2	NA	NA	NA
Dental Hygiene	0	4	84	83	0	NA	NA	NA	0	NA	NA	NA
College of Medicine												
MD Step 1	6	6	222	225	2	4	227	227	5	4	224	258
MD Step 2	0	3	240	233	2	2	239	238	1	1	242	238
College of Nursing												
BSN	4.5	10.1	NA	NA	7.2	9.7	NA	NA	13	15.7	NA	NA
College of Pharmacy												
	0	5.8	112	103	0	2.8	107	103	0	3.4	109	104

The scores are based upon information received by 3/6/2014.

Pass Rates on MD Step 1



Pass Rates on MD Step 2



FIRST YEAR RESIDENCIES - CLASS OF 2013

LOCATION OF FIRST YEAR RESIDENCY POSITIONS	
Arizona	5
California	7
Colorado	2
Florida	2
Illinois	8
Iowa	6
Indiana	1
Kansas	4
Louisiana	1
Massachusetts	3
Michigan	3
Minnesota	2
Missouri	3
Nebraska	50 38% staying in Nebraska
Nevada	1
New York	3
North Carolina	2
North Dakota	1
Ohio	5
Oklahoma	5
Oregon	1
Pennsylvania	2
South Carolina	2
South Dakota	1
Tennessee	1
Texas	2
Utah	3
Wisconsin	3
Deferring for one year	1
Total	130

FIRST YEAR SPECIALTIES	
ANES	4
EMED	8
*FMED	20
*FMED/PRCA	7
*IMED	21
*IMED PRE	7
*IMED/PRCA	3
*MED PEDS	3
NEUR	2
NSUR	3
*OBGY	6
ORTH	4
OTOL	3
PATH	3
*PEDS	12
*PED PRE	1
PSYC-FMED	6
SURG	6
SURG PRE	7
TRANS	3
Deferring for one year	1
Total	130

*Primary Care 80
% of class 62%

UNMC RESIDENCY PROGRAMS BOARD PASS RATE

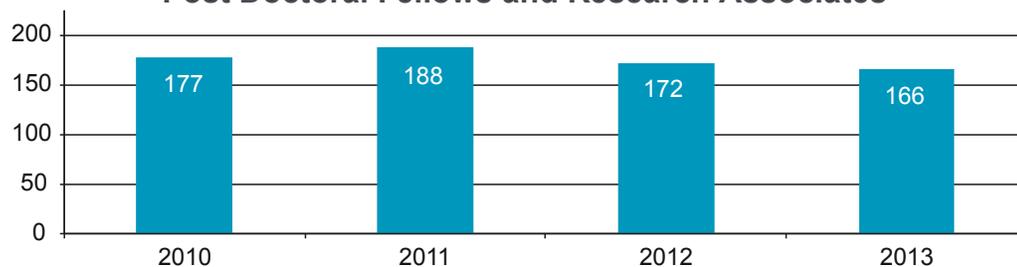
Program	Period	Pass Rate
Anesthesiology	2007-2011	82%
Emergency Medicine		
Oral	2008-2012	97%
Qualifying Exam	2008-2012	94%
Family Medicine -Omaha	2008-2010	89%
Family Medicine -Rural	2008-2010	88%
Family Medicine -Lincoln	2008-2010	100%
Internal Medicine	2010-2012	98%
Internal Medicine/Pediatrics	2008-2012	80%
Neurology	2010-2011	91%
Neurosurgery (Oral)	2006-2012	86%
OB/GYN	2010-2012	100%
Ophthalmology	2006-2010	89%
Oral Surgery	2000-2013	94%
Orthopedics		
Part I	2008-2012	95%
Part II	2008-2012	91%
Otolaryngology	2010-2012	100%
Pathology	2008-2012	100%
Pediatrics	2008-2012	79%
Plastic Surgery		
Stage I	2008-2011	100%
Stage II	2008-2011	100%
Radiology (Oral)	2007-2011	100%
Surgery		
Qualifying Exam	2008-2012	75%
Certifying Exam	2008-2012	77%
Urologic Surgery (Part 1)	2010-2012	100%

Board testing is different for each specialty. Some residency programs have both oral and written boards, taken at much different times; some specialties have just one exam. Some residency program graduates may qualify to take the written boards immediately after completing the residency program but not be able to take the oral boards until two years later. Other specialties may require that written boards occur during residency training and the oral portion taken within one year of completion of training. Not only the requirements, but the timing, differ. The data above is pulled from the Accreditation Council for Graduate Medical Education web site, the accreditation body for graduate medical education. They report board pass rates for different periods of time to account for the various requirements. Not only is the information more accurate, it is also a reflection of the differences amongst specialties.

POST DOCTORAL FELLOWS AND RESEARCH ASSOCIATES

	2010	2011	2012	2013	# POSTDOCS WHO LEFT IN 2011	# POSTDOCS WHO LEFT IN 2012	# POSTDOCS WHO LEFT IN 2013
PostDocs by Department							
Biochemistry and Molecular Biology	17	17	13	10	4	5	3
Cellular & Integrative Physiology	8	11	10	6	1	3	5
COD-Oral Biology/Surgical Specialties	3	4	3	4	1	2	1
COPH-Health Service		1	1	1			
Eppley	13	13	12	13	2	5	3
ER Medicine	1	1	1	1			
Genetics, Cell Biology & Anatomy	3	7	4	3		1	2
Internal Medicine	7	8	6	4	1	3	2
Munroe-Meyer Institute	10	14	13	15	5	11	9
Nursing							
Obstetrics/Gynecology		2	1	1		1	
Ophthalmology	3	5	4	8	1	1	
Orthopedic Surgery		1				1	
Pathology/Microbiology	10	9	10	5	3	4	4
Pharmaceutical Sciences	16	14	12	23	6	9	5
Pharmacology & Experimental Neuroscience	11	4	9	5	3	1	4
Physical Therapy		1				1	
Radiology							
Radiation Oncology	1	1				1	
Surgery	5	2	1		2		1
UNeMed		2	3	3			1
Total PostDocs	108	117	103	102	29	49	40
Senior Research Associates	11	23	23	22			
Research Associates	58	48	46	42			
Total PostDocs/Research Associates	177	188	172	166			
# of Citizens	48	54	50	47			
# of Immigrants	16	18	17	22			
# of Non-resident Aliens	113	116	105	97			
	177	188	172	166			
Placement							
Academic					6	9	14
Government							5
Industry					1	5	
UNMC Faculty					4	7	2
Accepted Another Post-Doctoral Position						6	6
Other					16	19	9
No Information					2	3	4
					29	49	40

Post Doctoral Fellows and Research Associates



Provided by UNMC Office of Institutional Research and Graduate Medical Education Office

BEHAVIORAL HEALTH EDUCATION CENTER OF NEBRASKA (BHECN)

Background

BHECN was created by the Nebraska Legislature in April 2009 to address the shortage of trained behavioral health providers in rural and underserved areas. BHECN's mission is to enhance the behavioral health of the people of Nebraska by improving the numbers, accessibility, and competence of the Nebraska behavioral health workforce through the collaboration of academic institutions, providers, governmental agencies, and communities.

Rural Workforce Initiative

- Established the BHECN Ambassador Program to “grow our own” future mental health professionals in rural Nebraska. The program introduced high school, college, and professional students to careers in mental health.
- The Ambassador Program attracted 286 pre-professional students. Over half of the students express interest in future mental health careers.

Primary Care Integration

- The 2013 Children's mental health bill invited BHECN to train teachers and primary care providers to recognize common mental disorders in children. The pilot sites will include Omaha, Columbus, and the western Nebraska Panhandle.
- 18 graduate students in psychology, psychiatric advanced practice nursing, counseling, and therapy are embedded in primary care clinics statewide.



Abby Stewart (Norfolk) joined the BHECN Ambassador Program as a high school senior and is now a pre-med freshman at Wayne State College. Her goal is to become a child psychiatrist in northeast Nebraska.

Interprofessional Education

- 2,482 mental health students and professionals participated in BHECN mental health training on topics such as new diagnostic criteria (DSM-5), use of behavioral health in the primary care setting, and distance technology.
- BHECN funded 660 trainees to participate in treatment teams and case conferences at two interprofessional clinical training sites; the Lasting Hope Recovery Center and Community Alliance.

Telehealth Access

- BHECN's psychiatry residents delivered 386 telehealth sessions at 20 rural sites across Nebraska.
- Telehealth connected patients and providers from rural nursing homes, community health centers, and clinics to mental health expertise.

Future Strategic Directions

- Rural workforce programs at BHECN's newly created office at the University of Nebraska Kearney (UNK).
- Rural exposure of psychiatry residents through required rotations in Kearney, North Platte, Hastings or Scottsbluff.
- Innovative online training for providers, teachers and the community.
- Toolkit for recruiting and retaining the best behavioral health trainees in Nebraska communities.



Counties impacted through BHECN's rural workforce initiatives, primary care integration activities, interprofessional education, and telehealth program

CONTINUING EDUCATION

The mission of the UNMC Center for Continuing Education (CCE) is to enhance the continuing professional development of healthcare professionals within Nebraska, the region, and the nation through premier educational programs. Accredited by the Accreditation Council on CME, the CCE provides continuing education programming that is structured around five areas:

1. **Outreach** – In FY 12-13, through CCE's Outreach Program, UNMC faculty provided 37 educational events on various topics in Type 2 Diabetes and Infectious Diseases. Nearly 400 healthcare providers in Nebraska and the region participated in one or more of the Outreach opportunities.
2. **Emergency Medical Services** – The Center for Continuing Education is one of the largest American Heart Association training programs in Nebraska. During FY 12-13, 2,400 BLS, 500 PALS, 650 ACLS and 2,000 Heart Saver Cards were issued. In addition, over 2,500 high school students and Boy Scouts received instruction in CPR and first aid.
3. **Regularly Scheduled Series** – A total of 55 regularly scheduled series were offered in FY 12-13 (grand rounds, case conferences, M&M, etc.). These series reached 862 physicians and 1,145 other health professionals within UNMC.
4. **Clinical Medicine and Enduring Materials** – In FY 12-13, the Center sponsored over 500 live and enduring material activities, including 331 courses related to the EPIC implementation. Other activities included the 20th Annual Gifford Truhlsen Conference, a DSM-5 Update, a national lecture series on Stable Ischemic Heart Disease, a national Lymphoma Rounds program, and a Microvascular Surgery course.
5. **Faculty Development** – The UNMC faculty development program encourages educational scholarship, enhances teaching skills, develops leadership skills, and provides tools for professional growth and development. In FY 12-13, 327 learners participated in one or more of 23 offerings.

CME continues to respond to a national shift from traditional lectures programs to educational endeavors that focus on quality improvement and patient safety, and align educational activities with specific institutional issues of the clinical enterprise (i.e., medication errors, quality measures, and broader public health issues).



Emerging Efforts

- The CCE is now an ex-officio member of the COM's Graduate Medical Education Committee. This relationship enabled CCE to offer two activities on the implementation of ACGME's Next Accreditation System during FY 12-13 and one program in FY 13-14. Additional activities related to NAS and GME faculty needs are being planned.
- To continue to build external relationships with outside organizations and other academic health centers, such as grant support of approximately \$1.1 million from a collaboration with the Federation of State Medical Boards for a national education program related to ER-LA Opioid REMS.
- To continue to strengthen collaborations within UNMC such as BHECN, marketing/outreach within TNMC, other academic CME programs and external organizations.
- To work with the Clinical Enterprise, and thus lay the groundwork to become an ABMS-approved sponsor for Maintenance of Certification Part IV activities under the Portfolio program.

INTERPROFESSIONAL EDUCATION

“Interprofessional education occurs when students from two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes. Once students understand how to work interprofessionally, they are ready to enter the workplace as a member of the collaborative practice team. This is a key step in moving health systems from fragmentation to a position of strength.”

World Health Organization, 2010, “Framework for action on interprofessional education & collaborative practice.”

UNMC’s interprofessional education (IPE) program encourages students to learn with peers from other medical professions. A wide variety of campus activities are currently in place and many more are in development.

This year, faculty and student representatives participated in a half-day retreat to plan the future direction of IPE on campus. Attendees took part in small group sessions and discussed topics including curriculum, evaluation, and faculty development. In the coming months, the IPE curriculum committee will review the results from each small group session, and develop a strategic plan for IPE with both short- and long-term goals, objectives and outcomes. This plan will be shared with the campus as a whole.

During the 2012-2013 academic year, funding awards from MedEdPORTAL and University of Nebraska Kelley grants provided over \$50,000 of support for ongoing campus IPE research and educational design. Additionally, 2012 was the second year of a four-year, \$1 million dollar Reynolds

Foundation grant to the Division of Geriatrics, intended to encourage the growth of IPE and other innovative curricular methods for student education in geriatrics.

Established and ongoing IPE activities include twice-yearly campus-wide IPE days for all first-year students, numerous interprofessional service learning opportunities coordinated by the College of Public Health, and student-run SHARING clinics which provide primary and specialty care to those in need.

Activities in the planning stages include a semester-length health literacy e-Learning course which will include both online and in-person components for students in interprofessional teams, and the establishment of a new, national IPE journal.

More information about IPE at UNMC, including the 2013 Annual Report, is available at <http://www.unmc.edu/academicaffairs/ipe.htm>.

“With the way the practice of medicine is moving, students are going to be seeing greater emphasis placed on a team-based approach to patient care. This approach to medicine not only provides for the most comprehensive care for a patient, but also the most compassionate care. The role that UNMC is taking by positioning itself as a leader in interprofessional education is incredibly forward-thinking and will set up our students for great success in the professional world for many years to come.”

Austin Person, Medical Student and Chair, IPE Student Subcommittee

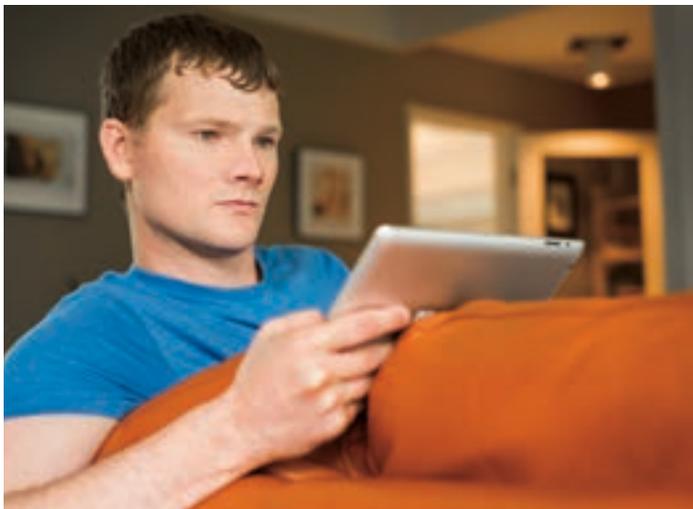


UNMC E-LEARNING STRATEGY

Identified as a major strategic initiative, the enhancement of campus e-Learning has been a major focus for 2013. The following steps have been taken:

- Rishi Desai, M.D., Medical Director of the Khan Academy, gave the keynote speech at the 2013 UNMC Strategic Planning Retreat highlighting the new online learning environment.
 - Dele Davies, M.D., Howard Liu, M.D., Tom Birk and Paul Larsen, M.D. have attended several e-Learning conferences and meetings including:
 - The Harvard University Teaching Academy and Simulation Laboratories
 - EdX
 - The Coursera Partners Conference
 - The Gates Foundation
 - The Multi-State New Models Conference at Georgia Tech
 - More than 20 campus-wide and external presentations have been given by Dr. Davies on “**The Future of Health Science Education**” to heighten awareness, seek input from faculty and explain the necessity of this strategic initiative.
 - A **MOOC Faculty Development Symposium** was held on campus on August 23, 2013, with over 200 participants either on-site or via offsite streamlining. Participants included UNMC, UNO and UNL faculty.
 - A campus-wide **e-Learning Steering Committee** has been established consisting of the Vice Chancellor for Academic Affairs, the Associate Deans of Academic Affairs, Information Technology and Library Personnel, the Director of Faculty Development, a student representative and the Director of UN Online Worldwide.
 - An **external advisory committee** has been established consisting of Drs. Prober, Stanford University, Dr. Schroeder, the University of Illinois, and Dr. Fenwick, Senior Vice President Elsevier Journals to help guide our vision and give critical guidance on national trends.
- 
- Partnerships have been established with UNO College of Information Science and Technology – for IT student support for the e-Learning laboratory and for help with gamification and the UNO College of Communications, Fine Arts and Media – for actors for e-modules.
 - An **e-Learning Webpage** has been established at www.unmc.edu/cce/elearn.
 - A Request for Applications (RFA) for UNMC e-Learning modules and courses resulted in four new interdisciplinary e-courses and 20 new e-modules were selected for funding (<http://www.unmc.edu/news.cfm?match=11829>). These courses and modules will be completed by June 30, 2014.
 - The **UNMC Laboratory for e-Learning** was established on November 1, 2013, in the McGoogan Library for faculty to produce e-Learning modules.

DISTANCE LEARNING



A variety of distance learning opportunities are available at UNMC through the School of Allied Health Professions, the College of Public Health and the College of Nursing. Students in each of these programs must meet the same requirements for admission to the programs as their campus counterparts and complete course work taught by the same faculty as students on campus in the program. In the 2012-2013 academic year, there were 579 students enrolled in these programs at UNMC – a 70% increase in students from 2011-2012.

	2011-12		2012-13	
	# of courses offered	# of students	# of courses offered	# of students
College of Nursing	6	153	6	80
College of Public Health	6	9	6	54
School of Allied Health Professions	52	180	63	445
Total	64	342	75	579

The School of Allied Health Professions provides four degree advancement options where students can earn an advanced degree in their discipline completely online while remaining in their current employment and community. Students in turn can gain professional advancement and use their increased knowledge to upgrade the services offered to patients in their community. The programs offering this option include Clinical Laboratory Science, Radiation Science Technology, Clinical Perfusion and Physician Assistant. Students in these programs must already have an entry level degree in their discipline and be practicing in the discipline.

The College of Public Health offers two Professional Certificates online in Emergency Preparedness and Public Health. They also offer a Master's degree in Emergency Preparedness as well as the Master's degree in Public Health with concentrations in Biostatistics, Environmental and Occupational Health and Public Health Practice – all completely online.

The College of Nursing offers the RN to BSN advancement program, which allows registered nurses with an associate degree or diploma in nursing to complete a Bachelor of Science degree in nursing completely online.

UNMC continues collaboration and networking for distance learning with the other University of Nebraska campuses through University of Nebraska Online Worldwide (UNOW). This affiliation allows the University of Nebraska as a whole, and each NU campus, a broader online presence. Additionally, UNOW is leading the efforts for all NU distance programs to meet the state authorization requirements so these programs can continue to offer course work and degrees to students in all states.

One major focus in the past year has been on military and veteran students. UNMC has supported the "Got Your 6" campaign, which is designed to recognize US veterans and military families as civic assets and leaders and provide opportunities for them to enhance their skills and transition their military experiences to civilian life. UNMC and the other NU campuses produced a Veteran Video Project to promote our participation in and support of the national campaign. UNMC was again named a Military Friendly School for the third straight year by Military Advanced Education, as well as by the Victory Media group. This honor places UNMC in the top 20% of all schools nationwide.

GRADUATE STUDIES

UNMC Graduate Studies had 474 students enrolled in 15 graduate programs during the fall of 2013. Highlights include:

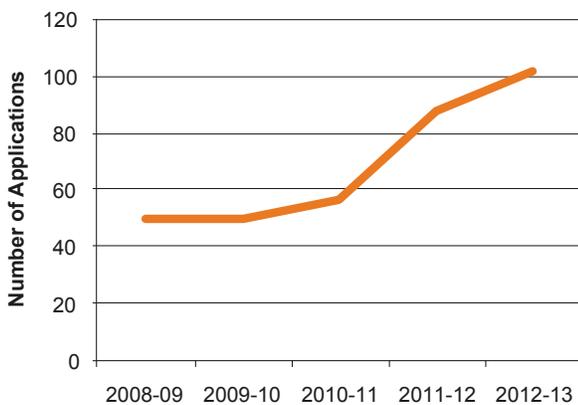
- Dramatic increase in demand for the internal UNMC Graduate Fellowship Awards. UNMC fellowships awarded to support graduate students have been revamped to encourage more external NIH T - institutional training grants and F - individual training grants type applications by reducing the number of years of the internal awards to two years from three.
- Implementing a new campus database along with the IT department. Called Sequidor, it tracks the progress and outcomes of all UNMC graduate trainees and post-doctoral fellows.
- A seminar series for graduate students and mentors in writing NIH F applications is being offered twice a year.
- An external advisor was brought in to simulate a mock NIH T-type training grant review session.
- A panel of experienced faculty members reviewed applications of students and faculty submitting F and T applications to the NIH, giving constructive feedback before submission of applications.
- Pre-award boilerplate information has been created for some sections of the T grants to allow ease of submission.
- The Graduate Studies Office has compiled a list of external funding opportunities both within and outside the NIH to ensure all UNMC graduate students have access to these awards.
- Based on a clearly identified need for greater



involvement of our UNMC alumni, a Graduate Studies Alumni Chapter was established.

- The very first Graduate Studies Matriculation Ceremony was established in 2013.
- Pamela Carmines, PhD was appointed Assistant Dean for Assessments and Engagement to develop close relationships with undergraduate universities which may serve as pipeline schools for students to UNMC graduate programs.
- Based on local and national demand by graduates and employees to expand the training experiences of our graduate students, a course on entrepreneurship was introduced in conjunction with UNeMed.
- A Graduate Student Handbook has been developed with student input and is available online.
- A new UNMC Bioinformatics Graduate Training Program is being offered in conjunction with the University of Nebraska Omaha.

Applications for Graduate Fellowship Awards, 2008-09 to 2012-13



RURAL HEALTH DELIVERY AND EDUCATION

	RHOP GRADUATES	% PRACTICING IN NE	OF THOSE PRACTICING IN NE, PRACTICING IN RURAL NE
Medicine*	87	72%	65%
Dentistry/Dental Hygiene	88	58%	82%
Pharmacy	72	71%	53%
Nursing	17	77%	85%
Allied Health	156	62%	82%
Total	420	65%	73%

*Excludes physicians in residency training

Rural is defined as non-urban communities not in the Omaha, Lincoln or South Sioux City areas



Since 1990, 420 students have graduated from the UNMC Rural Health Opportunities Program (RHOP). Currently, 65% of the graduates practice in Nebraska. Of those practicing in Nebraska, 73% practice in a rural setting. Through the Rural Health Education Network (RHEN), most UNMC students experience a rural rotation at some point in their education.

In 2013, there were 649 job shadowing experiences coordinated by Area Health Education Centers (AHECs) for a total of 3,361 hours of shadowing. AHECs offered a Veteran's Mental Health Continuing Education Program funded by Health Resources and Services Administration (HRSA) for first responders and primary care providers live and via telehealth to 171 participants.

We had a total of 1,382 SEPA (Science Education Partnership Award funded by National Institutes of Health) contacts documented for 2013. We coordinated and participated in community activities and curriculum instruction, provided in-service and multiple-day teacher workshops, as well as summer camps for middle school students. We have partners in Native American reservations in Nebraska and South Dakota (Winnebago, Macy, Santee, Rosebud, Sisseton, and Yankton tribes). We also partner with the Ponca Tribe of Nebraska and the Native Indian Centered Education program at Omaha Public Schools to provide opportunities for their students.

In 2013, there were 465 students who participated in six rural regional 8th Grade Science Meets sponsored by the AHECs and the Coalition for Life Saving Cures. In June, 59 students from 28 Nebraska schools attended the 21st Annual State Science Meet at UNMC sponsored by RHEN (Rural Health Education Network).

Established in 2005, the Great Plains Public Health Leadership Institute (PHLI) is a year-long competency-based training program of the Office of Public Health Practice. The Great Plains PHLI is designed for established and emerging leaders in organizations in the region whose primary mission is to improve the health and well-being of populations and communities. There have been 151 graduates of the Great Plains PHLI, 119 of them from 20 Nebraska counties. In 2013, PHLI supported the training of 300 rural public health professionals to attend continuing public health education sessions and had six student placements with rural public health organizations.

The UNMC-based Central States Center for Agricultural Safety and Health (CS-CASH) is one of nine CDC/NIOSH-funded agricultural health and safety centers, serving Nebraska and six surrounding states since 2011. Its outreach program focused on hearing and respiratory protection through video, emails sent to 14,000 farmers in seven states, 57 presentations and a demonstration at the SciFest Fair in Omaha reaching 2,500 students.

HIGH SCHOOL ALLIANCE

The mission of the UNMC High School Alliance is to immerse highly motivated secondary students from varying educational and socioeconomic backgrounds into an environment which will introduce them to health professions leading to a more diverse Nebraska workforce.

The UNMC High School Alliance opened its doors to its first class in 2010-2011 and it continues to bring 55 high school students to our academic medical center every weekday afternoon for an entire school year. Students are taught by UNMC faculty, receive high school credit, and in some cases college credit, for the courses they take. The students complete the program with a greater understanding of science and health topics, the specific steps to accomplish their career goals, and are better prepared to enter post-secondary education.

The UNMC High School Alliance by the Numbers

- Twenty metro area public high schools have participated in the program.
- Ten different public school districts have participated.
- Nearly 40% of all students who attend the program qualify for free or reduced lunch.
- Male students comprise 30% and female students comprise 70% of the program's participants.
- 131 students, both juniors and seniors, have graduated from the program.
- Of the 131 students, 114 have graduated from high school; all of which have enrolled in an institution of higher learning. Note: The other 17 participants are currently seniors in high school.
- Of graduating students, 7% have enrolled in two-year academic institutions while the remaining 93% are enrolled in four-year institutions.
- Over 130 UNMC faculty, staff, and graduate students have been involved with the program.
- Eighty UNMC graduate and professional students have served as mentors, developed curriculum or taught classes.



Jasmin Samano (Omaha South) and Megan Martin (Bellevue East) study microorganisms in their Infectious Diseases class.



Ashlie Nelson, certified high school teacher listens to Danny Dooling (Westside), Ruby Hickman (Westside) and Naomi Samuel (Westside) discuss how to measure lung capacity in their Biomedical Research class.

MCGOOGAN LIBRARY OF MEDICINE

The McGoogan Library continues to respond with expanded access to electronic resources.

- Replaced 90,000 print serials volumes with electronic access.
- Expanded access to a publisher journal package, which reduced interlibrary loan demand.
- Responded to student's need by purchasing more anatomical models.
- Provided full-text access to the 25 most cited journals in 2012 and 94% of the top 248 cited journals.
- Increased electronic book collection by 44%.
- Added three new databases and nine journals requested by faculty.

Other achievements in 2013 include:

- Completed a three year partnership with the Nebraska Library Commission's Broadband Technology Opportunities Program (BTOP) grant at the end of June. As a partner of the BTOP project, the Library provided instruction on how to locate quality consumer health information via new computers and Internet connections to public libraries across the state. During the grant period the McGoogan Library visited 33 BTOP libraries traveling over 5,800 miles.
- Established a systematic review search service. Three systematic reviews were published and eleven more reviews are in progress.
- Participated in 49 education or outreach activities through community visits, institutional visits, exhibits, and webinars.
- Continued to support the Fontenelle Elementary School with new books for the school's library collection.
- Received large research collection from the estate of the late Wolf Wolfensberger, Ph.D. (1934-2011). This collection deals with caring for, treatment of, and socialization of people with disabilities.

In 2014, the McGoogan Library will:

- Evaluate student needs of the library's physical space through surveys and focus groups.
- Continue supporting the e-Learning Oversight Committee.
- Enhance DigitalCommons@UNMC, an online repository of scholarly work produced or owned by University of Nebraska Medical Center.
- Integrate evaluation and assessment into all library activities.

MCGOOGAN LIBRARY OF MEDICINE VITAL INFORMATION RESOURCES 2011 - 2013

LIBRARY USE	2011	2012	2013
Person's entering library	101,733	96,506	89,963
Reference Interactions	9,458	7,371	10,706
Article Delivery (including lending, borrowing, document delivery and open access titles)	23,415	22,273	22,475
Education Sessions	1,998	840	1,293
Circulation of Library Materials	15,332	13,803	11,511
Database Searches (e.g. MEDLINE, UpToDate)	1,018,899	1,329,831	1,364,832
E-Journal Page Views	610,623	576,188	629,709
E-Book Page Views	45,990	72,642	123,386

EXPENDITURES	2011	2012	2013
Materials Expenditures	\$1,353,609	\$1,619,032	\$2,031,901

COLLECTION HIGHLIGHTS	2011	2012	2013
E-Journals	1,879	7,819	10,158
E-Books	1,716	1,808	2,610
Media (e.g. Audiovisual, Anatomical Models)	2,560	2,587	2,564
Print Books	84,524	82,872	76,388
Print Serials	157,947	144,365	50,140
Special Collections	4,591	4,656	4,484
Databases (e.g. MEDLINE, UpToDate)	36	36	39

FACULTY DEVELOPMENT

Overview

- Assistant and Associate professors represent 2/3 of all participants
- 82% of presenters are local faculty and staff
- 46 faculty attended The Essential Guide for New Faculty Success

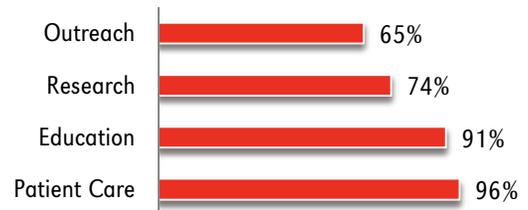
23
activities offered

801
registered faculty

Integrating Technology to Improve Teaching

- All UNMC campuses have access to live online participation in faculty development events
- In 2013, 265 faculty utilized the online platform to attend faculty development events from Scottsbluff to Lincoln
- Faculty development partnered with UNMC's e-Learning Steering Committee to distribute \$120,000 to UNMC faculty innovators blending online modules with a live classroom activity

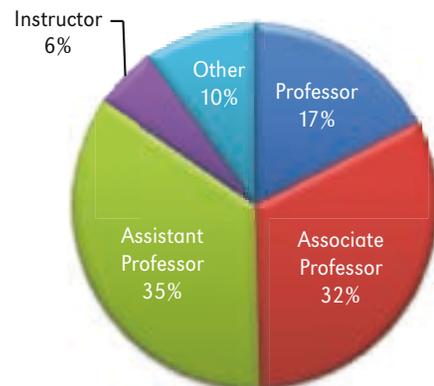
Activities in Relation to UNMC's Mission



Building Longitudinal Faculty Communities

- Carrie Elzie, PhD (COM) and Teresa Hartman, MLS (McGoogan Library) launched a monthly interprofessional meeting of scholars interested in e-Learning
- Faculty Development created an online directory of resources for course production on its website including resources from UNMC (e-Learning Laboratory) and UNO (gamification, acting)
- Faculty Development convened the first meeting of educational planners across campus to coordinate local and national speakers and establish a common listserv

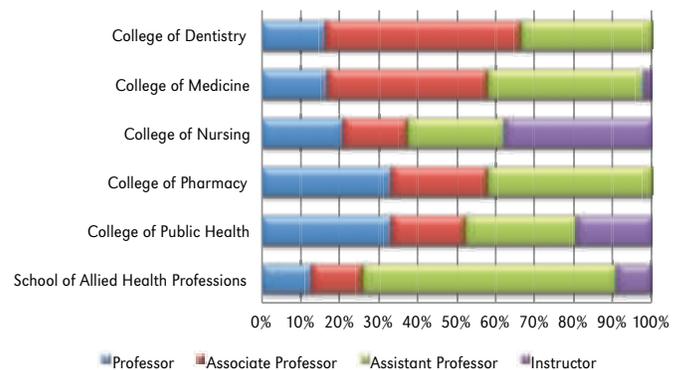
Total UNMC Attendees by Rank



Future Directions

- Launch annual reunion of all leadership program graduates (1999-2013)
- Engage UNMC campuses beyond Omaha through live presentations and improved distance learning technology
- Develop a newsletter to celebrate faculty educational and career development achievements

Attendees by College



Howard Liu, MD, Director of UNMC Faculty Development, is a child and adolescent psychiatrist. He is also the clerkship director in the Department of Psychiatry and the medical director for the Behavioral Health Education Center of Nebraska (BHECN).

FACULTY MENTORING

“The delicate balance of mentoring someone is not creating them in your own image, but giving them the opportunity to create themselves.”

Steven Spielberg

The Faculty Mentoring Program was established in Academic Affairs in 2013 to assist the colleges, School of Allied Health Professions (SAHP), and institutes of UNMC in the development of mentorship programs for their junior faculty members.

Vision:

- To enhance and sustain the career success of the faculty of the University of Nebraska Medical Center.

Mission and Goals

- Facilitation and attainment of individual faculty career goals
- Professional development of faculty
- Increased job satisfaction of faculty
- Long-term faculty retention
- Improved work-life balance for faculty
- Prevention of faculty burnout
- Documentation of faculty mentoring success.

Outreach: Two workshops were presented in August, 2013, on faculty mentoring at the new faculty orientation program. During the fall and winter of 2013-2014, meetings were held with all deans, Institute leaders, Executive Leadership teams from each college and the SAHP, and with most Department Chairs of the College of Medicine to discuss the importance of and opportunities for mentorship of their junior faculty members.



Planning: A mentoring website is currently under development that will provide information on the importance of mentoring to UNMC and its faculty, discuss the process of mentorship, how to select a mentor, provide training on being a mentor or a mentee/protégé, and include recent literature references that can be utilized by the faculty for just-in-time education regarding the process of mentoring. In addition, links to other academic and public websites for mentoring will be included.

Emerging efforts:

- Establishment of oversight committees for mentoring within each College
- Development of recognition awards for outstanding mentors
- Development of documented mentoring outcomes to assess each mentoring program at UNMC
- Mentoring workshops as requested at UNMC
- Assistance with mentor-mentee/protégé matching

RESEARCH TAB

RESEARCH TAB

TOTAL RESEARCH AWARDS 1998-2013 PER REGENTS REPORT

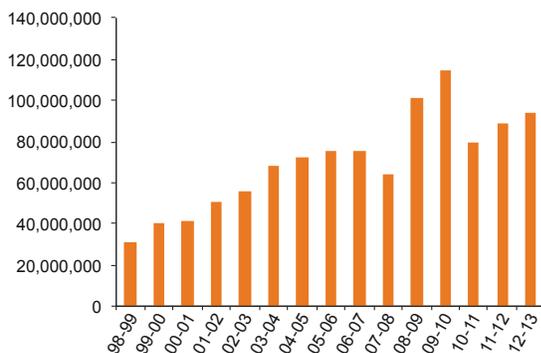
FISCAL YEAR	AMOUNT	INCREASE/ DECREASE	# INVESTIGATORS	# RESEARCH GRANTS
Net Awards				
1998-99	\$30,930,623	-9%	184	360
1999-00	\$40,051,252	29%	176	327
2000-01	\$41,328,292	3%	179	379
2001-02	\$50,775,191	23%	195	395
2002-03	\$55,896,392	10%	208	362
2003-04	\$68,068,921	22%	205	404
2004-05	\$72,764,843	7%	227	427
2005-06	\$74,951,631	3%	226	399
2006-07	\$75,199,879	0%	238	428
2007-08	\$63,819,775	-15%	220	392
2008-09	\$100,929,069	58%	242	487
2009-10	\$115,024,194	14%	255	498
2010-11	\$79,703,053	-31%	244	409
2011-12	\$88,902,488	12%	248	443
2012-13	\$94,109,544	6%	239	425
2013-14*	\$106,000,000	13%	<i>projected</i>	

*FY 2013-14 projection based on first 6 months of activity.

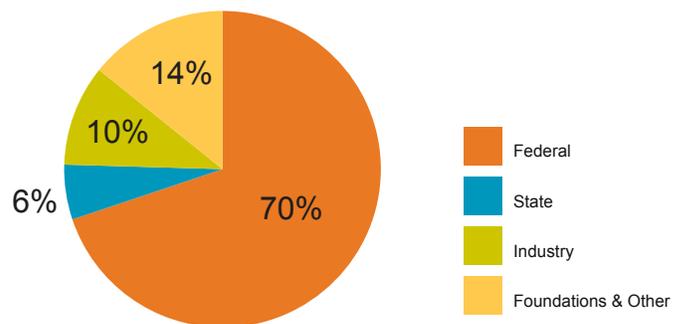
Net Research Funding Categories

	FY 11-12	FY 12-13	Percent Change
Federal	\$63,492,947	\$65,736,189	4%
State	\$3,492,067	\$5,280,115	51%
Industry	\$8,072,539	\$9,714,973	20%
Foundations & Other	<u>\$13,844,935</u>	<u>\$13,378,266</u>	-3%
Total	\$88,902,488	\$94,109,543	6%

UNMC Net Research Awards



Net Research Funding Categories FY 2013-2014



NATIONAL INSTITUTES OF HEALTH FUNDING AND RANKINGS

National Institutes of Health Research Funding and College Rank Federal Fiscal Year Ending September 30, 2013

COLLEGE	DENTISTRY	MEDICINE (a)	NURSING	PHARMACY	PUBLIC HEALTH	UNMC TOTAL (c)
2013 Rank	32nd	66th	22nd	24th	23rd	82nd
2012 Rank	26th	64th	26th	27th	23rd	84th
Total Colleges (b)	65	141	75	136	53	2331
2013 NIH Funding	\$1,347,783	\$42,626,264	\$1,824,009	\$4,028,253	\$6,674,245	\$56,500,554
2012 NIH Funding	\$2,308,373	\$47,780,523	\$1,710,439	\$3,446,815	\$6,502,288	\$61,748,438
Increase (Decrease)	(\$960,590)	(\$5,154,259)	\$113,570	\$581,438	\$171,957	(\$5,247,884)
% Change	-41.61%	-10.79%	6.64%	16.87%	2.64%	-8.50%

a) College of Medicine includes Allied Health, Eppley Institute, and Munroe-Meyer Institute

b) # Total Colleges based on # reported accredited programs (ADA, LCME, AACP, ASPH); CON uses # Schools of Nursing with NIH funding reported in the NIH RePORT

c) UNMC total compares UNMC NIH funding against "all organizations" (Academic Health Science Centers, Other Academic, Hospitals and Corporate entities) reported by the NIH as receiving funds during the federal fiscal year reported.

TOTAL EXTRAMURAL FUNDING BY COLLEGE^(a) UNMC FISCAL YEAR JULY 1 – JUNE 30

Colleges	2012	2013	% Change
College of Medicine	\$51,656,524	\$57,564,374	11.4%
College of Dentistry	\$2,603,219	\$3,145,175	20.8%
College of Nursing	\$1,800,899	\$1,788,526	(0.7%)
College of Pharmacy	\$8,674,595	\$6,549,508	(24.5%)
College of Public Health	\$8,008,114	\$11,035,082	37.8%
Eppley Cancer Center	\$12,411,263	\$10,279,106	(17.2%)
Munroe Meyer Institute	\$3,156,443	\$3,347,834	6.1%
School of Allied Health Professions	\$112,479	\$399,938	255.6%

a) Excluding VA Funding

COLLEGE OF MEDICINE DEPARTMENTS^(a) RANKED BY NIH FUNDING FEDERAL FISCAL YEAR ENDING SEPTEMBER 30

Department	2012 Rank	2013 Rank	2013 NIH Funding
Physical Med & Rehab (MMI & SAHP)	1	2	\$2,830,019
Pharmacology	6	12	\$11,042,639
Emergency Medicine	12	28	\$349,896
Genetics	24	31	\$4,666,090
Physiology	34	36	\$4,676,055
Surgery	52	43	\$1,902,532
Ophthalmology	36	49	\$919,757
Pathology	29	49	\$2,745,332
Internal Medicine/Medicine (b)	37	57	\$9,709,565
Obstetrics & Gynecology	47	59	\$230,894
Biochemistry	43	60	\$2,807,775
Radiation-Diagnostic/Oncology	47	65	\$148,609
Pediatrics	52	72	\$555,293

a) Rank among the 141 LCME Accredited Programs

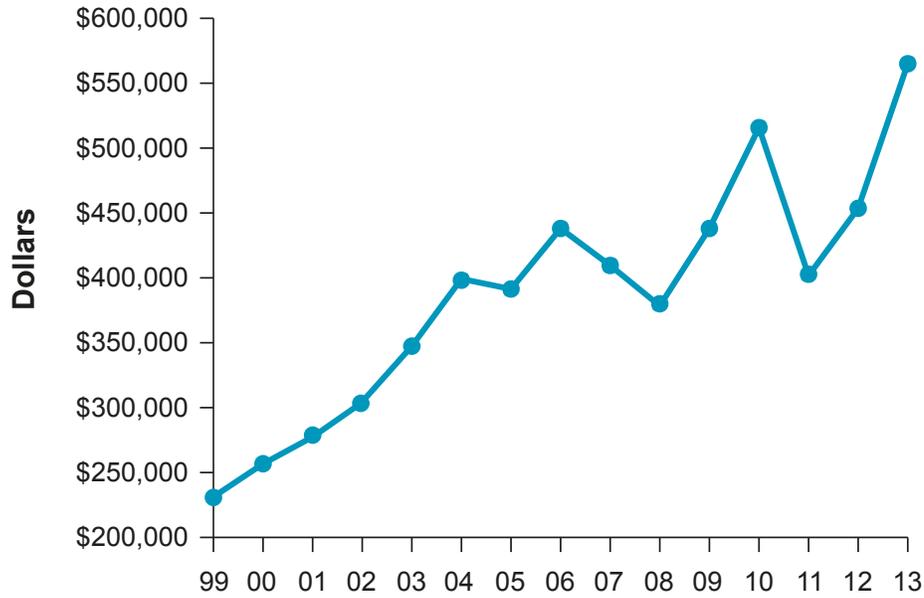
b) Internal Medicine/Medicine includes UNMC Internal Medicine Department & Eppley Cancer Institute

Departments without NIH funding are unranked (Anesthesiology, Family Medicine, Neurological Sciences, Orthopaedic Surgery, Otolaryngology, Psychiatry)

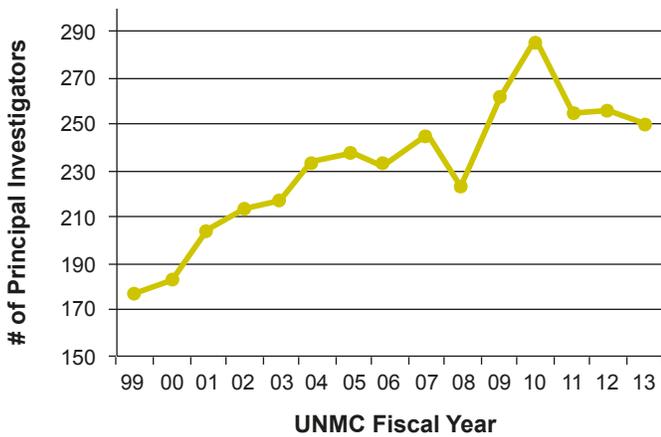
Provided by UNMC Vice Chancellor for Research

AVERAGE AWARDS AND FUNDED INVESTIGATORS

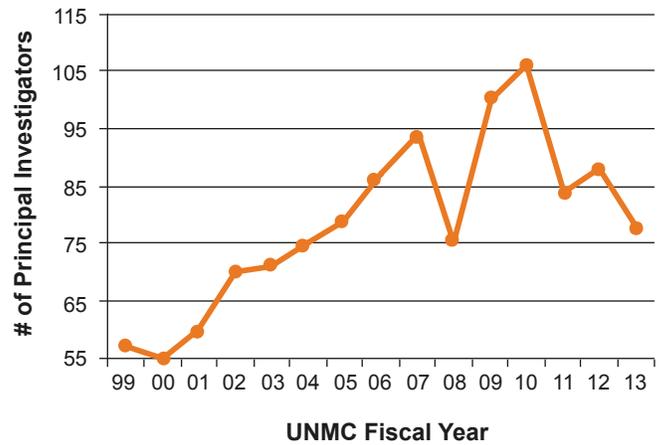
Average Dollars per NIH Award



Funded Principal Investigators All Funding Sources



Funded Principal Investigators NIH



RESEARCH STRATEGY

UNMC has experienced a steady increase in NIH and total funded research despite recent “sequestration” and flat research funding. We have focused on five general strategies to grow our research portfolio:

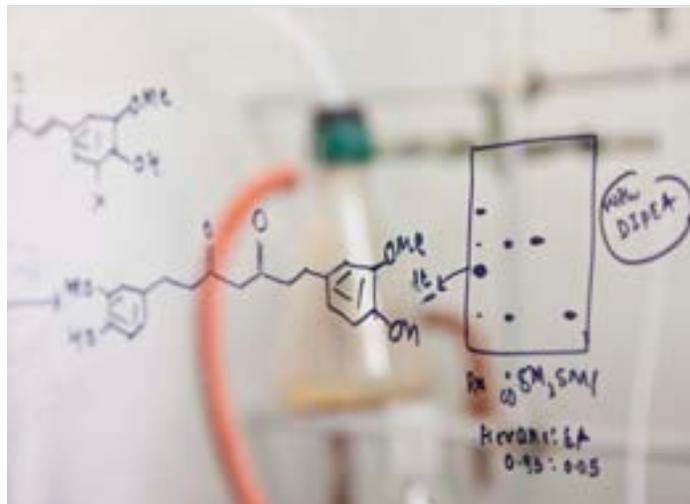
1. Recruit top funded investigators and leaders.

Many of our largest funded programs resulted from recruitment of funded leaders. Increasingly, we plan to target faculty who will bring new expertise to complement our established strategic planning areas.

2. Expand translational teams. Teams are critical to developing innovative approaches required for competitive grant applications as well as speeding translation. A number of collaborative pilot grant programs and a recent Research Interest Group initiative are designed to incentivize team development.

3. Diversify our funding portfolio. NIH continues to have a flat budget so we are focusing on other sources and mechanisms to fund and grow our research, including the following:

- *Public health research.* The College of Public Health has access to and expertise that makes them more competitive for different funding sources. The College of Public Health and other colleges will benefit from even more inter-college collaborations.
- *Department of Defense (DoD) with the National Strategic Research Institute (NSRI).* In its first year, the NSRI was wildly successful in attracting new research contracts. We have opportunities to build on that base.
- *Comparative Effectiveness Research (CER).* The Patient Centered Outcomes Research Institute (PCORI) is authorized to receive an estimated \$3.5 billion for patient-centered research through 9/30/19. Dr. Islam in UNMC’s College of Public Health received Nebraska’s first PCORI grant last year. We plan to recruit a leader for CER with new Program of Excellence monies and are invigorating a collaborative primary care practice based research network as a resource for new proposals.
- *SBIR/STTR grants.* The State of Nebraska provides incentives for new product and company development, and Small Business Innovation Research (SBIR) and Small Business Technology Transfer Research (STTR) awards are under-utilized to develop products. UNeMed, our technology transfer unit, with its Innovation Accelerator program, assists investigators apply for these and other funds to develop technology.



- *Bioengineering collaborations.* Working with UNL and UNO, as well as other universities, we have actively pursued new research collaborations.
 - *Training grants.* The Vice Chancellor for Academic Affairs has tasked the Graduate College to consider and develop thematic training programs that will better facilitate collaborative research and funded training grants.
 - *Large grant programs.* Center grants provide resources to support our core resources, grow mentors and sustainable research programs. We are actively looking for focus areas we can compete for new program project and center grants.
 - *Commercial opportunities.* We encourage partnerships with industry for basic science, technology development, and to conduct clinical trials.
- 4. Mentor grant writers.** We are creating or expanding programs that will assist faculty find the mentors they need. These include mentoring grants, a Grant Boot Camp, an Academic Affairs position focused on faculty mentoring, and mock study sections.
- 5. Streamline research processes.** We want to increase research process efficiency to improve productivity by establishing metrics that measure and track those processes, improved orientation with the first UNMC Research Handbook and web-based resources, electronic applications for review of regulatory processes linked to research (e.g., IRB and IACUC), and streamlined contracting through UNeHealth.

RESEARCH RESOURCES

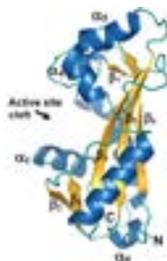
New Resources

- Dr. Mudgapalli was hired to establish the Research Information Technology Office to fulfill research IT needs, including research data storage solutions and infrastructure support for investigators and research cores.
- The Clinical Research Center was renovated, resulting in a 3,300 sq. ft. outpatient unit with a reception area, intake, procedure, exam, and laboratory spaces.
- The Nebraska Biobank became operational and is collecting 500 samples per week.
- The UNMC Research Handbook was launched in 2014 to guide researchers through processes such as submitting grant proposals, navigating regulatory processes, and locating resources in a web-ready format which is available at: www.unmc.edu/vcr.

New Instrumentation

UNMC was awarded more than \$1.2 million for new equipment during 2013.

- A Nebraska Research Initiative (NRI) award funded an upgrade to a Protein Simple “Peggy Sue” for high-throughput western analysis able to process up to 96 samples at a time in 11 hours. The Peggy Sue performs western assays by separating proteins either by size or by charge using only nanogram quantities of antibody without blotting and is housed in the Protein Structure Core Facility in DRC-1.
- Two biological irradiators, one for small animals and one for cells, were obtained via NRI funding. This equipment makes it possible to target tumors in animals the same way stereotactic systems target tumors in humans and to perform large scale irradiation of cell cultures for subsequent analysis of biomolecular changes such as post-translational modification by mass spectrometry. One irradiator is housed in the DRC animal care facility, the second is sited in a new tissue culture core facility in DRC-2, level 5.
- A Small Angle X-ray Scattering (SAXS) System was acquired by leveraging an NRI award with funds from the Nebraska NIH-INBRE program, the Fred & Pamela Buffett Cancer Center NIH Support Grant (CCSG) and the Office of Research. This instrument allows structural information to be obtained from molecules in solution, without the need to obtain a purified crystal and is housed in the Eppley Institute Structural Biology Facility.



- The Nebraska Bankers Association funded an F-scan Versa Tek portable balance stability sensor system and a Microwave Synthesizer. Located in the Clinical Movement Analysis Lab, the F-scan Versa Tek will support remote monitoring of physical activity for a variety of research studies. The Microwave Synthesizer, located in the College of Pharmacy, will support medicinal chemists making new drugs by improving throughput and reducing reaction time, thus increasing yield and purity. Importantly, microwave-assisted synthesis methods are “green” as they allow use of water in place of hazardous and expensive organic solvents.

Did you know?

- The research space metric, based on three years past research expenditures, has increased from \$245/sq. ft. in 2012 to \$298/sq. ft. in 2013.
- Core facility advisory committees have been reorganized to improve college and department representation.
- Support from NRI and large NIH grant programs like CoBRE, INBRE and CCSG cover 50% of translational core facility operating costs.



NATIONAL STRATEGIC RESEARCH INSTITUTE UPDATE

DOD University Affiliated Research Center (UARC)

2013 concludes the first full year of UNMC as part of the Department of Defense's (DOD) newest UARC, the National Strategic Research Institute (NSRI). A sole source contract between the US Strategic Command (USSTRATCOM) and the University of Nebraska, NSRI was established to conduct research and development activities for the DOD in specific areas. These "core competencies" are related to the USSTRATCOM mission of combating weapons of mass destruction including: Detection of Chemical and Biological Weapons; Passive Medical Defenses and Countermeasures; Nuclear Forensics; Consequence Management; and Space and Cyber law. The NSRI has an authorized funding ceiling of \$84 million for the 5-year term of the contact. The October 2013 government shutdown and budget uncertainties driven by sequestration hit DOD research budgets decisions and subsequently resulted in a delayed contracting of UARC projects and task orders with reduced budgets. Despite these hurdles, UNMC now has contracts with NSRI valued at more than \$6 million.

NSRI Detection of Chemical & Biological Weapons



NSRI Passive Medical Defenses Against WMD

Marketing UNMC Expertise and Services

Strategies used to raise awareness of UN system capabilities to DOD agencies include visits by UNMC faculty and staff to DOD agencies, partnering with other entities on DOD contracts (such as Texas A&M and Quintiles), responding to DOD competitive funding solicitations known as Broad Agency Announcements (BAA) and attending major DOD

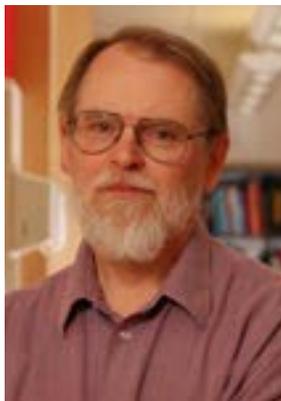
medical operational and R&D conferences. The BAA solicitation process requires 2-3 page white papers and the Quad Chart format for proposal review and selection. Since this process is often unfamiliar to academic biomedical scientists, the Office of Research provides assistance to researchers in the preparation of these materials.

NSRI Contracts to UNMC

CUSTOMER	PROJECT	PI	AWARDED OR IN PROCESS
USSTRATCOM	Research initiative for Next Generation Anthrax Vaccine	K. Bayles	\$703,135
	Nanogel-based Bio-agent Sensing System	S. Vinogradov	\$616,835
	Bio-Agent Sensing System Alternatives	S. Vinogradov	\$112,011
	Bio-Surveillance Baseline Assessment Support	A. Sambol	\$234,045
Defense Threat Reduction Agency	Lyophilization of Bioscavenger	S. Hinrichs	\$2,000,000
United States Army Medical Research Institute of Infectious Diseases	Bot Inhibitor	K. Bayles	\$1,900,000
Landstuhl Regional Medical Center	Telemedicine in Remote Locations	B. Boedeker	\$250,347
	Tele-PreOp Medicine Clinic	B. Boedeker	\$220,443
Chemical Biological Medical System Command	Vaccine Adjuvant Formulations	J. Talmadge	\$249,607
Department of Defense	Microbial Field Forensics	A Hewlett	\$35,635
USAF School of Aerospace Medicine Force Health Protection Technology	<i>Francisella tularensis</i> Differentiation Assays	M. Larson	\$140,093
		Total	\$6,462,151

GROWING GRANTS— LARGE AND SMALL

Large program and center grants become collaborative research “hubs”, support critical resources, mentor junior investigators, and attract new researchers to UNMC. Led by nationally-recognized investigators, large grants market our expertise nation-wide. NIH Centers of Biomedical Research Excellence (CoBRE) grants are particularly strategic because they grow funded investigators through mentorship and support of junior faculty as well as create new or support existing infrastructure.



Two CoBRE grants were renewed this year. Tatiana Bronich, PhD, College of Pharmacy, leads the Nebraska Center for Nanomedicine, which develops and uses nanomedicines to improve drug and gene delivery. Keith Johnson, PhD, College of Dentistry, leads the Nebraska Center for Cellular Signaling CoBRE, which was also re-funded. This Center brings researchers from diverse areas together to study cell adhesion, cell motility and cancer biology.



Howard Fox, MD, PhD directs the Chronic HIV Infection and Aging in the NeuroAIDS (CHAIN) Center and obtained new funding as the director of the data coordinating center for the National NeuroAIDS Tissue Consortium. This national resource for investigators conducting NeuroAIDS research provides scientific leadership, management, expertise, bioinformatics and information systems infrastructure, statistical and epidemiology expertise to

scientists working to identify the mechanisms involved in HIV disease of the central and peripheral nervous systems.

Junior faculty often find that obtaining first, independent funding takes longer than they expect and junior investigators often need different types of support. Some of the resources that the Vice Chancellors for Research and Academic Affairs are working on together for this group are described below.

- An on-line Research Handbook describes research processes and resources for all investigators (www.unmc.edu/vcr).
- A Grant Writing Boot Camp held in March with segments posted on-line.
- The Research Editorial Office is available to help new and established investigators.
- Research Interest Groups are being formed to help new investigators find mentors.
- Rowen Zetterman, MD, Academic Affairs, was appointed Director of Faculty Mentorship Development on July 1, 2013.

“New Investigators” are honored at the Distinguished Scientist Award Ceremony each year. The following investigators have received their first independent funding from a national source, excluding mentored grants in fiscal year 2013 and were recognized this spring:

- Pankaj Singh, PhD, Eppley
- Cheng Wang, PhD, COM
- Aimin Peng, PhD, COD
- Stephen Obaro, MBBS, PhD, COM
- Katherine Jones, PhD, School of Allied Health Professions

HEALTH CARE AND COMMUNITY TAB

HEALTH CARE AND COMMUNITY TAB

CLINICAL ENTERPRISE UPDATE

Clinical Enterprise Culture Work

With the formation of the clinical enterprise, it is vital that a collaborative approach is used to establish the right organizational culture. Enterprise-wide culture transformation involves defining ideal state cultural values and behaviors, assessing our current cultural strengths and challenges, and then determining specific actions necessary to achieve our desired future state culture. Through a series of workshops, the clinical enterprise leadership team and physician leaders are being engaged to define the prototype for the future culture values and behaviors of the clinical enterprise. Input will be gathered from colleagues across the clinical enterprise through focus groups to provide input on the prototype of cultural values.

A clinical enterprise culture survey has been deployed for the purpose of gaining a detailed understanding of the current culture. Participants include all colleagues of TNMC, UNMCP, BMC, and individuals in UNMC's College of Medicine who spend their time in a clinical setting. The future-state culture design sessions with leaders are in progress and planned to be concluded by the end of April and the roadmap for implementation is planned to be developed by the end of May.

Fred & Pamela Buffett Cancer Center

Work continues to progress at the construction site as planned and Kiewit will begin pouring concrete soon. The equipment planning team has done extensive work to maximize negotiating leverage for major equipment; market conditions are extremely favorable for these acquisitions. Equipment buys are being coordinated for all the major projects.

Operationally, the team is working on patient experience enhancements, and piloting many improvements in the clinical areas. We have a very engaged patient advisory group, and are getting feedback from this group in all areas of decision making. We are also working on physician recruitment and program development in targeted areas.

Main Campus and Village Pointe Ambulatory Projects

The Main Campus project will consist of a three-story 100,000 square foot ambulatory care facility on the main campus. The second project will create an outpatient surgical center and expanded radiology and clinic services in an existing medical office building at Village Pointe. These projects will require \$49.4 million and \$19.3 million in funding from the clinical enterprise, respectively.

An expert in ambulatory surgery center design is being engaged to consult on this project. Paul Straub, UNMC Engineering Project Manager, has been selected to manage the construction portion of the project.

For the Village Pointe project, an Outpatient Surgery End User group is being established to include representation from surgery, anesthesia, and central sterilization as well as other departments as needed. We are also developing the design process for the clinics, pharmacy, and radiology.



Performance Improvement (PI) Initiatives

The 45 work streams in the current improvement wave submitted design plans that were reviewed, improved and approved the last week of January, 2014. These work streams are now in detail design. The work product of detail design will be a benefits realization schedule and implementation plan for FY 2015. The focus of the planning is quality, patient experience, work environment and specific margin improvement. The target impact is \$10.2 million in FY 2014, growing to \$33.3 million in future years.

Regional Provider Network (RPN)

The strategic goals of the RPN are: 1) to share best practices to improve the quality of care in our region; 2) reduce the cost of delivering care through shared services and best practices; and 3) develop favorable positioning of participating providers for value-based reimbursement. A CEO Search Committee has been formed and Witt Kieffer has been engaged to conduct a national search for the CEO of the RPN.

The founding provider organizations of the RPN include The Nebraska Medical Center, Methodist Health System, BryanHealth in Lincoln, Fremont Area Medical Center, Faith Regional Health System in Norfolk, Columbus Hospital, Mary Lanning Healthcare in Hastings, Great Plains Regional Health System in North Platte, and Regional West Medical Center in Scottsbluff. In addition to the nine founding health systems, 43 critical access hospitals have signed letters of interest to pursue participation in the RPN.

Brand Strategy for the Clinical Enterprise

Given the family of brand identities within and connected to the clinical enterprise, there is a strategic opportunity to streamline and strengthen how our collective brand identity is projected to our internal and external stakeholders. To expedite our study and development of recommendations, we have engaged a team of three nationally recognized experts.

Relationship with Madonna Rehabilitation Hospital (MRHS)

In early 2014, Madonna approached Bellevue Medical Center (BMC) management about leasing the 4th floor of the hospital (36 beds), which is currently not utilized on a regular basis. Strategic benefits of this relationship include improved transitions of care, improved capacity management of acute care beds at The Nebraska Medical Center and Bellevue Medical Center, and synergistic opportunities in education and research.



Bellevue Medical Center (BMC)

Before the end of December 2013, BMC bought back all outstanding shares that were owned by independent physicians. As of December 20th, the two remaining shareholders are TNMC and UNMC-P. BMC is now exempt from property tax for 2014 and moving forward. Annual tax savings from BMC's not-for-profit status are projected at \$3.2 million.

Madonna's lease will also provide an annual positive financial impact of \$1.5 million.

Negotiations are underway with the landlord of BMC and we anticipate an additional positive annual impact of roughly \$3.0 million.

Accountable Care Alliance (ACA)

Participation notices have been gathered and membership established in the ACA. Physician participation notices have been received and the current response rate stands at 73% for the enterprise and 78% for the Methodist Health System. Total provider enrollment is at 1,219 with 879 specialists and 340 primary care providers.

Population health data validation and testing of analytics has been successful. Candidates have been identified for the staff who will work closely with ACA physician leadership on supporting the care redesign working groups.

The medical management executive team has been formed, with representation from specialists and primary care providers across both health systems. The executive team will identify opportunities for care improvement through the population risk management tool, and will charter physician-led care redesign working groups to develop standards and workflows to increase high value care.

Feedback is being sought from employers in the Omaha metro area regarding their employee health plans to gain insights on how they will be approaching health care in the years to come. Feedback from these meetings will help to inform ACA products and services moving forward.

The ACA is conducting consumer market research to support the development of a new brand identity. A final recommendation for the new brand is targeted for the end of June 2014.

HEALTH CARE AND ACADEMIC HEALTH CENTERS

Healthcare Workforce

The Nebraska Legislature approved LR 22, a resolution focused on health planning for the State. LR 22 seeks to bring together stakeholders to work together with the shared objectives of controlling health care costs and improving health care quality. Led by the Legislature's Health and Human Services Committee and the Banking, Commerce and Insurance Committee, it created a group called Partnership Towards Nebraska's Health Care System Transformation. The Committee's goal is to bring together policymakers and stakeholders at all levels - state and local governments, public and private insurers, health care delivery organizations, employers, specialty societies, consumer groups, patients - to work together to control health care costs and improve health care quality.

The goals of the partnership are to provide a comprehensive review of Nebraska's health care delivery, cost, and coverage demands; engage partners in dialogue, roundtable discussions, and public policy discourse; develop a framework for health care system transformation to meet public health, workforce, delivery, and budgetary responsibilities; and develop cooperative strategies and initiatives for the design, implementation, and accountability of services to improve care, quality, and value while advancing the overall health of Nebraskans.

More than 160 participants attended the initial day-long conference that was held at UNMC to discuss the future of Nebraska health care and begin a discussion of formulating the state's health agenda for the next 15 years. Additional conferences are being planned for 2014.

UNMC Center for Agriculture Safety and Health

The UNMC Central States Center for Agriculture Safety and Health is one of nine Agricultural Health Centers which focuses exclusively on health and safety research in agriculture. The UNMC Ag Safety and Health Center's research focuses on topics particularly important to Nebraska's farmers and ranchers including ways to improve the air quality in animal confinement operations to help avoid respiratory diseases among livestock operators, hearing protection, and equipment roll-over protections. It is a multi-campus center that provides direct research benefit to the agriculture industry. The center is funded through the CDC by the National Institute of Occupational Safety and Health (NIOSH).

Pilot Programs to Improve Delivery Systems

Federal law offers funding for pilot programs to test innovative ways to reduce delivery costs while maintaining the delivery of quality health care. These include Accountable Care Organizations (ACO) and Medical Home delivery models that could align health care providers and offer incentives to

reduce the rate of health care cost growth while improving quality of care. It is important that pilots include academic health centers and the additional costs associated with Graduate Medical Education (GME) in pilot programs. With repeated efforts to cut GME funding, academic health centers must be assertive in participating in the pilot programs. Members of the State Legislature have also expressed interest in examining ways to improve the health care delivery system as part of a healthy state planning effort.

Comparative Effectiveness Research

NIH has prioritized funding for research to identify Comparative Effectiveness Research (CER) and treatments that are more effective at reducing the cost of care without diminishing the quality of care. Congress created the Patient-Centered Outcomes Research Institute (PCORI) as an independent organization to fund research to fund CER. UNMC's designation as a clinical trial site for Quintiles Corporation positions UNMC well to participate in CER.

Accountable Care Act Implementation

The Nebraska Legislature debated legislation (LB 887) that would have allowed uninsured citizens earning between 100-133% (\$11,400-\$15,856 for an individual) of the federal poverty level to qualify for a subsidy, on a sliding scale, to purchase a private insurance policy. The bill did not advance and died.

The proposal included provisions such as a 2% contribution from the low income wage earner unless they participate in a wellness program and a \$75 dollar copay for any visit to an emergency room for nonemergency services. In addition, the legislation includes a clause for the Legislature to review the program if the Federal government does not provide at least 90% reimbursement for the new expanded Medicaid population. The decision could have a financial impact on providers because the Supreme Court ruling on Medicaid Expansion did not change the 75% reduction in the Disproportionate Share Payments (DSH) to hospitals that the ACA law will reduce as hospitals begin to receive revenue from an increased number of insured patients. With about 58% of the College of Medicine annual budget generated from clinical revenues from The Nebraska Medical Center, Children's Hospital and Clinics, it is important that patients have private or public insurance to pay for their medical expenses to reduce the more than \$60 million in uncompensated care incurred annually by our hospital partners.

Expands the 340B Drug Discount Program

The ACA law expands eligibility for the 340B drug discount program to critical access hospitals, which typically serve the most seriously ill patients. The expansion of the 340B drug discount purchases assists in reducing the cost of pharmaceuticals.

UNMC Physicians and The Nebraska Medical Center

HEALTH CARE VOLUME, MARKET SHARE AND PATIENT SATISFACTION

UNMC PHYSICIANS CLINIC VISITS	FY 2013 ACTUAL	FY 2014 BUDGETED
Primary Care	128,486	130,722
Specialty Care	226,083	287,008

THE NEBRASKA MEDICAL CENTER ACTIVITY	FY 2013 ACTUAL	FY 2014 BUDGETED
Source - Census Days File (Excludes Newborns)		
Discharges	23,060	22,000
Patient Days	128,480	120,190
Average Length of Stay	5.6	5.5

THE NEBRASKA MEDICAL CENTER VOLUME AND MARKET SHARE	FY 2013 ACTUAL	FY 2014 BUDGETED
	(a)	
Market Share for Local Market*	24.8%	Data
*Local - Douglas and Sarpy Counties and Iowa		not
Market Share for Regional Special Care Market**	39.7%	available
**Regional - Exclude Douglas and Sarpy Counties and Iowa a) includes Bellevue Medical Center		

THE CLINICAL ENTERPRISE PATIENT SATISFACTION	FY 2013 % SCORE	
Measures: patients' overall satisfaction with their health care experience	UNMC Physicians Mean Score	Academic Comparison Percentile Rank
Overall UNMC Physicians Mean Score	90.3%	54th
TNMC Overall Inpatient Satisfaction (HCAHPS)	72.6%	58th
BMC Overall Inpatient Satisfaction (HCAHPS)	72.7%	59th



COMMUNITY ENGAGEMENT

Community engagement permeates the mission of all UNMC colleges and units.

We reach thousands of Nebraskans each year through Science Cafes, the Speakers Bureau, the Food Drive and other efforts. In addition, UNMC outreach clinics operate throughout Nebraska to serve patients with needs that only specially trained experts can meet. And, we work collaboratively with local physicians and health care providers to bring the latest treatments to people, right in their hometown.

UNMC's goal is to improve the health and welfare of the community by:

- Providing health care services to underserved populations,
- Offering resources and enhancing the educational opportunities of UNMC students,
- Expanding opportunities for diverse students to become health professionals, and
- Working collaboratively with other agencies and organizations to provide programs and services to residents of the community.

UNMC engages the community through various initiatives including:

SCIENCE CAFÉS

Begun in February 2009, the UNMC Science Cafés involve a face-to-face conversation with a scientist about current science topics. Open to everyone, they take place in casual settings like pubs and coffeehouses. A science café's casual meeting place, plain language and inclusive conversation create a welcoming and comfortable atmosphere for people with no science background. For more information, visit www.unmc.edu/sciencecafe.



Provided by UNMC Public Relations

ANNUAL UNITED WAY DRIVE

Each year, UNMC employees are encouraged to participate in the annual United Way Drive. This past year, the UNMC drive netted more than \$143,000 for the United Way and the agencies it serves.

SPEAKERS BUREAU

UNMC's Speakers Bureau offers community groups across Nebraska a resource of experts for meetings and conferences. Contact Public Relations to tap into the expertise of university faculty members for presentations and discussions at no cost. Our volunteer speakers come from many areas, including cancer research, stem cell research and biosecurity preparedness. In the last fiscal year, more than two dozen speakers spoke to audiences totaling nearly 1,000 people.

SHARING CLINIC

The five UNMC SHARING clinics strive to enhance the well-being of the greater community by providing high-quality, low-cost health care to those in need. The original SHARING Clinic opened in 1997 and continues to serve patients weekly at the UNMC Specialty Care Center. Another weekly clinic, RESPECT, opened in 2001 and treats patients for sexually transmitted diseases. The GOODLIFE Clinic opened in 2005 and primarily serves patients with diabetes. In 2011, the VISION Clinic opened to provide basic ophthalmology services. SHARING also partners with the SHARING Dental Clinic, housed at the College of Dentistry in Lincoln. The clinics provide approximately 1,200 patient visits per year. With students from 12 professions working in the clinics, SHARING offers a multidisciplinary educational setting while empowering patients and instilling the values of service and compassion in UNMC students.

SERVICE LEARNING ACADEMY

UNMC's service learning experiences, facilitated by the Interprofessional Service Learning Academy, are one way that students from various colleges and units can use their classroom skills and engage with community organizations. Among the service learning projects are:

- Bridge to Care – refugee health and education;
- Do JuSTIce – jail STI screening, treatment, and education;
- EMPOWER – domestic violence awareness and health education;
- Finding a Voice – homelessness, art and recovery; and
- Decreasing the Donor Deficit – bone marrow donation awareness.

ALUMNI RELATIONS

About the UNMC Alumni Association

In 2010, the UNMC Alumni Association was incorporated as a 501c3 non-profit organization. The creation of the UNMC Alumni Association brought together nine professional chapters under one umbrella.

Highlights of 2014 UNMC Alumni Association activities include:

- Hosting the thirty-first John S. Latta Lecture focusing on hepatitis C and patient safety
- Helping plan the first UNMC Graduate Studies Honors Convocation
- Hosting the first College of Nursing all alumni reunion in Scottsbluff, NE
- Continuing to update alumni contact information to improve outreach to all graduates



UNMC Alumni Association By the Numbers

- 13 % growth in alumni social media reach from February 2013 to February 2014
- 750 Number of participants in alumni outreach events in calendar year 2013
- 3,432 Number of members in a UNMC Alumni Association chapter



Alumni Reunion Weekend

Each year, the UNMC Alumni Association welcomes alumni and their guests back to campus for class parties, tours, conversation with the UNMC deans, education sessions and the celebration and awards banquet. Since 2007, over 1,600 alumni have returned to UNMC to reunite with their classmates and see how campus has grown. In 2013, the School of Allied Health Professions hosted its first all-school reunion. Over 150 alumni, faculty, staff and guests attended at least one SAHP reunion event during the two days of activities, held July 19-20, 2013.



Top Five States Where UNMC Alumni Live

Source: Raiser's Edge Database

1. Nebraska 10,000
2. Texas 1,524
3. California 1,170
4. Colorado 1,099
5. Iowa 861

Photo captions (Top to Bottom):

Members of the College of Nursing Class of 1968 gather at alumni reunion weekend.

Physical therapy students receive their white coats; sponsored by UNMC alumni.

College of Medicine Alumni Chapter board treasurer Dennis Strauss, MD '68 with alumni association M4 scholarship recipients.

Provided by UNMC Alumni Association

GLOBAL TAB

GLOBAL TAB

UNMC'S GLOBAL STRATEGY

UNMC's global mission is to promote health through excellence in education, research, outreach and care by creating accountable and strategic partnerships.

In June 2009, University of Nebraska President J.B. Milliken articulated the University of Nebraska's plan for a global university which emphasized:

- Recruiting talented international students and offering study abroad programs
- Supporting international relationships for faculty
- Increasing research collaborations
- Developing strategic partnerships for mutual economic benefit.

UNMC has had active international collaborations since the 1970s, with a marked increase in activity in the last decade. The reasons are compelling:

- The 2011 US census states approximately 185,000 people living in Nebraska speak any one of 116 non-English languages as their first language.
- Omaha and Lincoln have about 9,500 immigrant students, and the number is growing statewide.
- Nebraska's global export shipments of merchandise in 2011 totaled \$7.6 billion.
- UNMC has more than 800 international students and scholars. More than 16% of our faculty has international origins, and the number of student exchanges increase annually.

UNMC must prepare our students to succeed at home and abroad in different cultures. This can be accomplished through study abroad and by having international students on campus. We must also compete globally for intellectual talent (both research and clinical). Faculty exchanges and joint clinical and research projects enhance our reputation, competitiveness, and success.



The UNMC Global Strategic Plan for 2012-2017 addresses the following issues:

- Focus/Scope—What countries with whom to partner and what programs to offer.
- Infrastructure—Single point of contact and what services to offer.
- Risk Identification—Liability and intellectual property issues.
- Branding—How to present ourselves within the University, to the community and internationally.
- Revenue Enhancement—How to partner with business NGOs and other universities and what ventures to pursue.

GLOBAL EDUCATION AND RESEARCH

UNMC's global mission is to promote health through excellence in education, research, outreach and care by creating accountable and strategic partnerships.

2013 Activity Highlights of International Health and Medical Education (IHME)

- IHME directed document processing for an ever-increasing international participant population (812 participants in 2013), representing 59 countries, dominated by China and India. This included the initiation of a required registration process for all international visitors to the UNMC campus.
- For the second year, UNMC offered a separate new-student orientation for incoming international students. The orientation is planned jointly by Academic Affairs and IHME.
- UNMC offered tax preparation assistance to the international participant population, with nearly 100 individuals participating.
- Ninety-six UNMC students participated in global health experiences, ranging in length from one week to nine months in 18 countries. The most popular countries for these student experiences were Nicaragua (21), Jamaica (21), Peru (10), and China (9).
- IHME and the Student Alliance for Global Health organized the 6th Midwestern Global Health Conference, held December 7 at the Sorrell Center on the UNMC campus, attracting approximately 50 attendees.
- UNMC offered four-week Medical Spanish/Global Health courses that took place in Leon, Nicaragua during February, April, June, July, and October. Thirteen students completed the course in 2013.



UNMC's institutional co-sponsor in Nicaragua is Universidad Cristiana Autonomo-Nicaragua.

- The Student Alliance for Global Health sponsored two week-long medical service trips to Jamaica and Nicaragua. Also offered were two-short-term Medical Spanish courses and monthly speakers on global health. The 2013 SAGH philanthropy project was the UNMC international ophthalmology activities to prevent global blindness.
- The medical doctor observer program with Andhra Pradesh, India continued. Over 100 Indian physicians have participated in this program.
- UNMC is expanding its presence in China and Oman by offering exchanges and training opportunities through the School of Allied Health Professions and the College of Nursing.

2013 Asia Pacific Rim Development Program (APRDP) Summary and Accomplishments



EDUCATION

Exchange has become a two-way street, now reaching South Korea, which speaks highly of UNMC's reputation and its presence in the Asia Pacific Rim

- Increase in quality & number of applicants recruited, accepted
 - Enrollment for fall 2013: 14 new Chinese Scholarship Council (CSC) members (8 PhD, 1 Joint MD/PhD, 1 Joint-Training, 1 MD, 2 PharmD, 1 Visiting Scholar)
 - Participated at CSC conference and fairs in Beijing, Harbin, and Shanghai and conducted presentations at 10 Chinese institutions

- Accepted for fall 2014: 30 new CSC members (12 PhD, 5 Joint-Training, 2 MD, 5 PharmD, 3 DPT, 1 DDS, 2 Visiting Scholars)
- APRDP short-term clinical / research exchange programs (10 have returned to UNMC for graduate or doctoral programs)
- Since 2006: more than 120 CSC members recruited (23 have graduated or completed programs, returning to China or becoming postdoctoral scholars)
- Exchange has become a two-way street.
 - Clinical medicine exchange between UNMC and SJTUSM/Tongji University (13 MD students exchanged + 3 UNMC students currently rotating in China—5 returned to UNMC; 85 total since 2005)
 - Clinical nursing exchange between UNMC and SJTUSM/Tongji University (16 nursing students exchanged—1 returned to UNMC; 68 total since 2006)
 - APRDP Summer Research Program (16 students, one 8-12 week rotation—5 returned to UNMC; 75 total since 2005)
 - Master of Public Health Program: one graduated in 2013 (six since 2010)
 - Medical Education Faculty Training at UNMC of six Tongji University faculty members
 - Student Exchange Agreement signed between University of Nebraska Medical Center, USA and Seoul National University College of Medicine, Republic of Korea
- Enhanced two important collaborations: Family Medicine, Physical Therapy
 - Collaboration in Family Medicine and Physical Therapy with Tongji University in Shanghai is furthered through several strategic meetings in China
 - Fifteen physicians from Shanghai and Xi'an attended the Second US-Sino Family Medicine Leadership Course at UNMC
 - Established Sino-US Joint Department of Family Medicine with Tongji University in Shanghai, where six UNMC faculty members received joint appointments
 - Family Medicine Symposia in Shanghai, Xi'an and Xiangyang with more than 300 trainees each

RESEARCH

- Focused on Joint Research in Translational Research Project
 - Ophthalmology joint research project with People's Tenth Hospital in Shanghai



- Increased UNMC students' international experience
 - Ninth Annual International Student Research Forum at Griffith University in Brisbane, Queensland, Australia, with 10 UNMC student presenters and 3 faculty members
- Promoted research faculty exchange
 - Joint Research Symposia in Beijing and Shanghai with 100 attendees each, as well as 5 UNMC presenters
 - Joint Research grant with Ruijin Hospital (SJTUSM in Shanghai) on stem cell therapy, 2 million RMB for 4 years
 - Creation of research collaboration database

BUSINESS DEVELOPMENT

- UNMC technology patent transfer signing in Chengdu
- Furthered development of UNMC-WOFE China, "A Wholly Owned Foreign Entity of UNeMed Corporation", a UNMC-China company under preparation in Shanghai
- New Health Science initiative in Hainan, China

INTERNATIONAL PERSONNEL ON UNMC SPONSORED PROGRAMS

- The international participant population in 2013 (812) is almost 2.4 times greater than in 2002-03 (335).
- Six continents are represented: Asia, Africa, Australia, Europe, North America, and South America.
- Fifty-nine different countries are represented.
- Participants from China (292) and from India (289) account for 581 of the 812 total participants, or 72% of UNMC's international participant population.
- The largest geographical/ethnic areas represented are the Asia Pacific Rim with 325 and Central Asia with 319. These areas comprise 79% of the total participants.
- Participants from Asia (696) represent 86% of the total.
- Other major geographical/ethnic areas represented:
 - Europe – 48
 - Middle East – 24
 - Latin America – 15
 - Africa - 48
 - Canada – 12

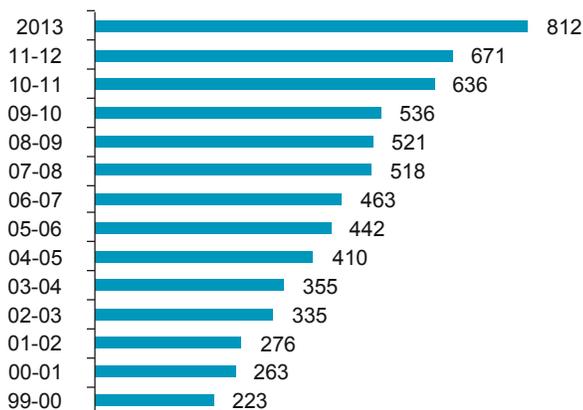
From UNMC's 2013 International Participant Population Annual Report

International Participation at UNMC

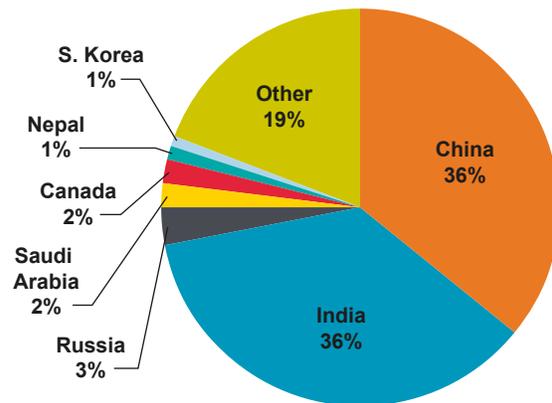
Afghanistan	1	Ecuador	1	Ireland	5	Nigeria	8	Sri Lanka	4
Australia	1	Egypt	11	Israel	4	Norway	5	Taiwan	2
Bangladesh	1	El Salvador	1	Italy	1	Pakistan	8	Tajikistan	2
Botswana	1	Ethiopia	1	Japan	9	Paraguay	2	Thailand	3
Brazil	4	France	4	Jordan	1	Philippines	1	Turkey	9
Cameroon	1	Georgia	3	Kenya	4	Portugal	1	UAE	1
Canada	12	Germany	1	Lebanon	1	Romania	2	Ukraine	1
Chile	1	Ghana	2	Libya	9	Russia	22	United Kingdom	11
China	292	Greece	3	Mexico	4	Saudi Arabia	16	Uzbekistan	2
Columbia	1	India	289	Morocco	2	Singapore	6	Vietnam	1
Cuba	1	Indonesia	2	Nepal	12	South Korea	12	Zambia	1
Denmark	1	Iran	1	Netherlands	1	Spain	3		

*These figures do not reflect visitors at UNMC with B1/B2 visas.

Fourteen Year Graph of International Activity



Top Seven Countries



CULTURAL COMPETENCY/DIVERSITY TAB

CULTURAL COMPETENCY/DIVERSITY TAB

UNMC AND COMPARATIVE DIVERSITY DATA

UNMC	NONRES. ALIEN	ASIAN	NATIVE	BLACK	HISPANIC	NATIVE	WHITE	UNKNOWN/ TWO OR	TOTAL	MINORITY (note a)	UNDER-	WOMEN
			HAWAIIAN/ PAC ISLAND	NOT HISP.		AMERICAN	NOT HISP.	MORE RACES			REPRESENTED MINORITY (note b)	
Full-time Faculty (inc. Admins. who hold academic rank, 10/01/13)	42	154	1	19	19	2	884	1	1,122			488
	3.7%	13.7%	0.1%	1.7%	1.7%	0.2%	78.8%	0.1%	100.0%	17.5%	3.7%	43.5%
Asst Prof & Above (no Admin or NRA, only tenured/HP Appt-LB 389, 10/01/13)		104	0	10	13	1	528	1	657			221
		15.8%	0.0%	1.5%	2.0%	0.2%	80.4%	0.2%	100.0%	19.6%	3.7%	33.6%
	NONRES. ALIEN	ASIAN	NATIVE HAWAIIAN/ PAC ISLAND	BLACK NOT HISP.	HISPANIC OR LATINO	AMER. IND./ AK NATIVE	WHITE NOT HISP.	UNKNOWN/ TWO OR MORE RACES	TOTAL			
All Employees (Workforce Analysis - see exclusions on next pg, 10/01/13)		392	5	119	87	10	2,954	11	3,578			2,166
		11.0%	0.1%	3.3%	2.4%	0.3%	82.6%	0.3%	100.0%	17.4%	6.2%	60.5%
	NONRES. ALIEN	ASIAN	NATIVE HAWAIIAN/ PAC ISLAND	BLACK	HISPANIC	AMER. IND./ AK NATIVE	WHITE	UNKNOWN/ TWO OR MORE RACES	TOTAL			
Students Fall, 2013 (see Education section)	291	167	2	71	107	8	2,957	78	3,681			2,355
	7.9%	4.5%	0.05%	1.9%	2.9%	0.2%	80.3%	2.1%	100.0%	11.8%	5.1%	64.0%
Peer Comparisons												
Faculty LB 389 peers, 2012 Full and part-time	1,152	3,127	15	893	929	107	21,202	596	28,021			9,783
	4.1%	11.2%	0.05%	3.2%	3.3%	0.4%	75.7%	2.1%	100.0%	20.2%	6.9%	34.9%
Students at peer institutions (IPEDS, Fall, 2012)	20,590	15,767	251	10,973	12,907	750	145,493	13,548	220,279			114,443
	9.3%	7.2%	0.1%	5.0%	5.9%	0.3%	66.0%	6.2%	100.0%	24.6%	11.3%	52.0%
All NE higher education students (IPEDS, Fall, 2012)	4,371	3,311	248	7,637	8,473	1,128	105,815	8,634	139,617			77,224
	3.1%	2.4%	0.2%	5.5%	6.1%	0.8%	75.8%	6.2%	100.0%	21.1%	12.5%	55.3%
US CENSUS (notes c & d)		ASIAN	NATIVE HAWAIIAN/ PAC ISLAND	BLACK	HISPANIC OR LATINO	AM INDIAN ALASKA NAT	WHITE NOT HISP.	UNKNOWN/ TWO OR MORE RACES	TOTAL			WOMEN
Douglas County (531,265)		3.0%	0.1%	11.7%	11.6%	1.2%	71.5%	2.5%	101.6%			50.8%
Nebraska (1,868,516)		2.0%	0.1%	4.8%	9.7%	1.3%	81.4%	1.9%	101.2%			50.3%
United States (316,128,839)		5.1%	0.2%	13.1%	16.9%	1.2%	63.0%	2.4%	101.9%			50.8%

a) Asian, Native Hawaiian and Pacific Islander, Black, Hispanic, Native American, Unknown and Two or More Races.

b) Native Hawaiian and Pacific Islander, Black, Hispanic, Native American, and Unknown and Two or More Races.

c) Differences in UNMC and Census categories preclude direct comparisons. Census populations shown in parenthesis.

d) Census estimates are from U.S. Census Bureau Quick Facts, 2012 (Douglas Co.) and 2013 (Nebraska and United States), racial/ethnic breakdowns from 2012. Totals are not exactly 100% due to rounding.

Note: Outside Sources = IPEDS and US Census websites

WORK FORCE ANALYSIS SUMMARY

FEMALE (as of 10/01/13)										
UNIT	TOTAL	TOTAL MINORITY	TOTAL	WHITE-NOT HISPANIC/LATINO	BLACK-NOT HISPANIC/LATINO	HISPANIC OR LATINO	ASIAN-NOT HISPANIC/LATINO	AMERICAN INDIAN OR ALASKA NATIVE	NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	TWO OR MORE RACES - NOT HISPANIC/LATINO
Academic Affairs	89	10 11.2%	64 71.9%	58 65.2%	2 2.2%	0 0.0%	3 3.4%	1 1.1%	0 0.0%	0 0.0%
Allied Health Sciences	72	4 5.6%	57 79.2%	54 75.0%	1 1.4%	0 0.0%	2 2.8%	0 0.0%	0 0.0%	0 0.0%
Business & Finance	366	45 12.3%	145 39.6%	126 34.4%	10 2.7%	6 1.6%	2 0.5%	1 0.3%	0 0.0%	0 0.0%
Chancellor's Office	37	5 13.5%	24 64.9%	21 56.8%	0 0.0%	1 2.7%	0 0.0%	1 2.7%	0 0.0%	1 2.7%
College of Dentistry	237	28 11.8%	149 62.9%	132 55.7%	4 1.7%	5 2.1%	6 2.5%	1 0.4%	0 0.0%	1 0.4%
College of Medicine	1707	355 20.8%	1003 58.8%	846 49.6%	40 2.3%	17 1.0%	97 5.7%	1 0.1%	0 0.0%	2 0.1%
College of Nursing	207	13 6.3%	188 90.8%	178 86.0%	4 1.9%	2 1.0%	4 1.9%	0 0.0%	0 0.0%	0 0.0%
College of Pharmacy	92	32 34.8%	38 41.3%	26 28.3%	3 3.3%	0 0.0%	9 9.8%	0 0.0%	0 0.0%	0 0.0%
College of Public Health	142	45 31.7%	86 60.6%	65 45.8%	5 3.5%	6 4.2%	9 6.3%	0 0.0%	1 0.7%	0 0.0%
Eppley Institute	125	37 29.6%	64 51.2%	45 36.0%	1 0.8%	2 1.6%	13 10.4%	0 0.0%	0 0.0%	1 0.8%
Information Technology	118	10 8.5%	34 28.8%	31 26.3%	1 0.8%	1 0.8%	1 0.8%	0 0.0%	0 0.0%	0 0.0%
Munroe-Meyer	307	33 10.7%	259 84.4%	232 75.6%	7 2.3%	8 2.6%	11 3.6%	1 0.3%	0 0.0%	0 0.0%
Research	79	7 8.9%	57 72.2%	50 63.3%	2 2.5%	2 2.5%	3 3.8%	0 0.0%	0 0.0%	0 0.0%
UNMC Total % of Total	3578	624 17.4%	2166 60.5%	1864 52.1%	80 2.2%	50 1.4%	160 4.5%	6 0.2%	1 0.0%	5 0.1%
UNMC Physicians* % of Total	1171	170 14.5%	835 71.3%	722 61.7%	39 3.3%	43 3.7%	22 1.9%	3 0.3%	2 0.2%	4 0.3%

FEMALE								
	TOTAL	TOTAL MINORITY	TOTAL	WHITE -NON HISPANIC	BLACK -NON HISPANIC	HISPANIC	ASIAN OR PACIFIC ISLANDER	NATIVE AMERICAN/ALASKAN
Nebraska Pediatric Practice** % of Total	147	25 17.0%	122 83.0%	56 38.1%	2 1.4%	0 0.0%	4 2.7%	1 0.7%

*503 employees are counted both as UNMC and UNMC Physicians employees, counts are effective on 12/31/2013.

**147 employees are counted both as UNMC and Nebraska Pediatric Practice employees, counts are effective on 01/01/2014.

Report includes regular full-time and part-time employees. Report does not include temporary employees or individuals in the following employee subgroups: House Officers, Graduate Assistants, Student Workers, Volunteers W/O Pay, or Retirees.

MALE (as of 10/01/13)

UNIT	TOTAL	WHITE-NOT HISPANIC/ LATINO	BLACK-NOT HISPANIC/ LATINO	HISPANIC OR LATINO	ASIAN-NOT HISPANIC/ LATINO	AMERICAN INDIAN OR ALASKA NATIVE	NATIVE HAWAII OR OTHER PACIFIC ISLANDER	TWO OR MORE RACES - NOT HISPANIC/ LATINO
Academic Affairs	25 28.1%	21 23.6%	3 3.4%	0 0.0%	0 0.0%	0 0.0%	0 0.0%	1 1.1%
Allied Health Sciences	15 20.8%	14 19.4%	0 0.0%	0 0.0%	1 1.4%	0 0.0%	0 0.0%	0 0.0%
Business & Finance	221 60.4%	195 53.3%	17 4.6%	8 2.2%	0 0.0%	0 0.0%	0 0.0%	1 0.3%
Chancellor's Office	13 35.1%	11 29.7%	0 0.0%	0 0.0%	0 0.0%	1 2.7%	1 2.7%	0 0.0%
College of Dentistry	88 37.1%	77 32.5%	0 0.0%	0 0.0%	11 4.6%	0 0.0%	0 0.0%	0 0.0%
College of Medicine	704 41.2%	506 29.6%	12 0.7%	21 1.2%	160 9.4%	2 0.1%	2 0.1%	1 0.1%
College of Nursing	19 9.2%	16 7.7%	0 0.0%	1 0.5%	1 0.5%	0 0.0%	0 0.0%	1 0.5%
College of Pharmacy	54 58.7%	34 37.0%	0 0.0%	1 1.1%	19 20.7%	0 0.0%	0 0.0%	0 0.0%
College of Public Health	56 39.4%	32 22.5%	4 2.8%	2 1.4%	15 10.6%	0 0.0%	1 0.7%	2 1.4%
Eppley Institute	63 50.4%	43 34.4%	0 0.0%	1 0.8%	19 15.2%	0 0.0%	0 0.0%	0 0.0%
Information Technology	84 71.2%	77 65.3%	3 2.5%	2 1.7%	1 0.8%	1 0.8%	0 0.0%	0 0.0%
Munroe-Meyer	48 15.6%	42 13.7%	0 0.0%	1 0.3%	5 1.6%	0 0.0%	0 0.0%	0 0.0%
Research	22 27.8%	22 27.8%	0 0.0%	0 0.0%	0 0.0%	0 0.0%	0 0.0%	0 0.0%
UNMC Total	1412	1090	39	37	232	4	4	6
% of Total	39.5%	30.5%	1.1%	1.0%	6.5%	0.1%	0.1%	0.2%
UNMC Physicians*	336	279	8	12	32	0	0	5
% of Total	28.7%	23.8%	0.7%	1.0%	2.7%	0.0%	0.0%	0.4%

MALE

	TOTAL	WHITE -NON HISPANIC	BLACK -NON HISPANIC	HISPANIC	ASIAN OR PACIFIC ISLANDER	NATIVE AMERICAN/ ALASKAN
Nebraska Pediatric Practice**	84	66	4	4	10	0
% of Total	57.1%	44.9%	2.7%	2.7%	6.8%	0.0%

BUILDING A MORE INCLUSIVE UNMC COMMUNITY

The University of Nebraska Medical Center maintains a strong commitment to diversity and inclusion and the valuing of diverse ideas, thoughts, and perspectives. UNMC seeks to build on this commitment and continuously develops, implements, and assesses its strategies to improve the diversity of faculty, staff, and students. Fostering intercultural understanding, community engagement and an atmosphere of support and respect for all is fundamental to creating and maintaining a campus of academic excellence.

Student Successes

UNMC PIPELINE PROGRAMS

UNMC recognizes that a key component to diversity is the building of a strong pipeline to our academic programs. Pipeline programs focus on enhancing opportunities for a wide cadre of students from diverse backgrounds to enter careers in the health professions and health sciences. We have created explicit links from one program to the next, moving students from youth programs through to admission to UNMC. Students in programs such as the Health Sciences High School Alliance talk with students in a Youth Learning Center Program to encourage their interest in Science. Students in college level programs talk with students in the High School Alliance about opportunities in undergraduate programs.

OTHER UNMC UNDERGRADUATE PROGRAMS

INBRE is aimed at creating a biomedical research infrastructure that provides research opportunities for undergraduate students and serves as a pipeline for those students to continue into graduate research.

Nebraska/Virginia Alliance is a unique partnership between unlikely partners to address the national need to diversify the healthcare and research workforce.



Number of Students
2012-2013 Academic Year

YOUTH LEARNING CENTER

K-8	632
8th Grade Health Science Meet	35
High School	225

UNMC PROGRAMS

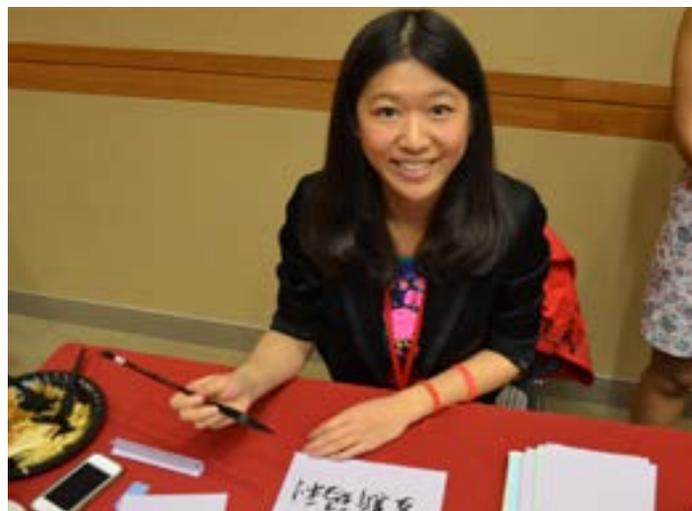
High School Alliance	55
Health Career Day	185

UNDERGRADUATE PROGRAMS

Guaranteed and Early Admission Programs (NU-Paths, Rural Health Opportunities Program, Public Health Early Admission Student Track)	174
Summer Medical Dental Education Program	80
Summer Undergraduate Research Program	95

Faculty and Staff Engagement

- UNMC staff is comprised of 60.5% females and 17.4% minorities (as of October 1, 2013).
- Forty-one percent of UNMC's 1,033 full-time faculty members are female. Women account for 70% of instructors, 48% of assistant professors, 39% of associate professors and 22% of professors. Challenges remain in the recruitment of under-represented faculty and students.
- UNMC's fourth annual Culture Fest event was attended by over 500 faculty, staff and students. The event celebrates UNMC's rich diversity and showcases campus and local talent and resources. The event includes food from local ethnic restaurants, displays and exhibits, and cultural performances.
- UNMC and The Nebraska Medical Center coordinated the annual Martin Luther King, Jr. program that was held on January 20, 2014. UNMC employee, Ira Combs, was the guest speaker whose address was "King, Health Care and His Letter from Birmingham Jail." Over 125 employees attended the event that was also open to the public.
- UNMC was a Career Exploration Post in October 2013 for the Avenue Scholars Foundation program. Twenty-five high school students attended the after-school program hosted at UNMC. The health career post, aimed at students interested in health care, exposed participants to the healthcare environment, professionals in the field, and allowed them to experience through interactive activities, like a tour of the Clinical Simulation Lab, some of what the career field entails.
- UNMC's Public Relations department continues to provide communication support for UNMC's diversity initiatives and campus events such as:
 - Global Health Student and Faculty Advisory Committee
 - Participation in the planning and execution of International Week
 - Serving on the graduate student planning committee for the HOLI Festival of Colors which celebrates an ancient Hindu festival
 - Presenting to the CON on Native American health and spirituality
 - Presenting to the Student Alliance for Global Health.





Community Engagement

- Latinas, Tabaco y Cáncer Latinas, Tabaco y Cáncer (LTC)** was founded in 2005 and is an ongoing community-based holistic health promotion program targeted towards monolingual Spanish-speaking immigrant women who commit to fight tobacco and prevent cancer and other tobacco related illnesses. The program focuses on building community capacity to address health issues. The members communication skills are strengthened through a journaling/reflection exercise, educational presentations on topics affecting Latinas' health, among them: tobacco and alcohol prevention, breast cancer, cardiovascular disease, diabetes, mental health, healthy nutrition and physical activity, spirituality, IPV, sharing of personal stories, and more. The group maintains a presence on social media through a Facebook group and Twitter page.
- Esperanza y Mejor Vida (Hope & Better Life)** is an evidence-based intervention on chronic disease self-management that was provided to adult Latinas living in the Omaha and Lincoln urban areas who are 50 and older. The program follows the Stanford Chronic Disease Self-Management Program (DSMP) that focus on problems that are common to those suffering from chronic conditions. The program is collaboration between UNMC Center for Reducing Health Disparities (CRHD) and El Centro de Las Americas in Lincoln, Nebraska. Some topics to be covered include: (1) the effects of chronic conditions such as fatigue, depression, isolation, anger, and frustration; (2) communication within the family and with healthcare providers; (3) poor nutrition and lack of physical activity; (4) decision-making processes, (5) learning to read labels of food products and medications, (6) the importance of support, and (7) learning how to value themselves where they are in life.
- Smokeless Diva** is a drag pageant hosted by the CRHD and the Metro Omaha Tobacco Action Coalition (MOTAC) in collaboration with Flixx Lounge, a downtown Omaha gay bar. The pageant winner is selected to advocate for tobacco-free lifestyles throughout the year of their reign. Smokeless Diva 2013, Tygra Slarii worked on "taking the diva out of the smoke" and participated in four community events throughout the year. Additionally, she made many LGBT community appearances speaking against tobacco. According to the most recent 2014 U.S. Surgeon General Report, Health Consequence of Smoking: 50 Years of Progress, LGBT people spend \$7.9 billion on tobacco products every year. Furthermore, the LGBT community smokes at a rate 68% higher than the general population.
- El Encuentro de La Mujer Sana (Healthy Woman Summit)** was held on May 16, 2013, at Mahoney State Park. The summit was sponsored by representatives of the Center for Reducing Health Disparities and El Centro de Las Americas from Lincoln. It brought together



grassroots community women from Omaha and Lincoln to share in a day of health education and screenings, empowerment, and sisterhood. Over 85 women, 40 kids, and 15 community agencies participated in the summit which was facilitated completely in Spanish and featured targeted health information for Latinas. Funding was provided through a grant from the Department of Health and Human Services, Office of Women's Health.

- **Migrant Farmworker Health Study** is a research project that was funded by the Central States Center for Agricultural Safety & Health to explore mental health and stress among Latino migrant farmworkers in Nebraska. Latino migrant farmworkers are one of the most disadvantaged populations in the United States, and this study is the beginning of exploring how living and working conditions in Nebraska can be improved. A Migrant Health Task Force was formed by the research team from the Center for Reducing Health Disparities and various community partners to help guide the study's implementation and create a "think tank" regarding migrant farmworker health in Nebraska. From May through September, the research team hosted community meetings with over 200 Latino migrant farmworkers across our state in five different counties. The community meetings focused on what is health research, its importance, and provided an overview of the study.
- **The Power to End Stroke (American Heart Association and CRHD).** The CRHD faculty and staff serve on over 30 community board of directors, including the American Heart Association. This year CRHD partnered with the AHA Power Ambassadors to organize the 5th Annual Power Walk to raise awareness in the African American community about the risk factors for stroke. Participants walked two miles from Fontenelle Park through the neighborhood to Adams Park.
- **Youth Violence must stop in Omaha.** The CRHD was funded by the Omaha Historical Society to develop a coalition and standard approach to reduce gang/street violence in South and North Omaha. Community forums and focus groups with families, policy makers, ex-gang members, community leaders, youths and youth advocates were conducted to discuss the root causes of violence in Omaha. Linking violence to health equity reveals how preventing violence is an important factor of any effort to achieve health equity and create healthy communities.
- **Community Clinics & Health Fairs.** The CRHD conducted a flu vaccine campaign to vaccinate the indigent and those without access to primary care providers. Over 360 flu shots were given. The CRHD also provides health screening and participates in many community health fairs including those at churches,



supermarkets, beauty/barber shops, and other locations. This year over 700 people were screened for high blood pressure and diabetes. CRHD also staffs a weekly clinic and screenings at the Lighthouse Wellness Center, which offers hypertension, diabetes and cancer screening along with screening for STD and HIV.

- **Community Youth Programs.** Youth Expression of Health (YEOH) This program is a training program for youth established by youth and adults in North Omaha for the specific purpose of informing youth about health issues and potentially guiding young people towards the healthcare field.
- **Youth Research Summer Intern Program (SIP).** This program is a nine week program for minority and underserved youth interested in health careers. This year there were nine students who worked approximately 24 hours per week on various health-related projects.
- **CRHD Community Health and Wellness Team.** In 2013, the CRHD launched the community health and wellness team to offer individualized health and wellness screening to community partners engaged in health disparity efforts. The Center leveraged the medical expertise in the Center (two medical doctors, one nurse practitioner and one registered nurse) to launch the pilot project at Avenue Scholars. Over 20 employees received health and wellness assessments.

INTERNATIONAL STUDENT AMBASSADOR PROGRAM

As a result of multiple international initiatives, UNMC is home to a diverse community of students, faculty and staff. A total of 264 international students are pursuing a degree or are enrolled in a formal academic program at UNMC. This number represents students from 28 different countries. As in previous years, students from China and India make up the largest component of our international population.

During the past year UNMC has focused on facilitating international student adjustment to life in Omaha and education in the United States. The 2013 launch of the UNMC International Student Ambassador Program was successful. Forty three current UNMC international students volunteered to participate in the program. These students were paired with incoming international students. Students exchanged emails before arrival and then met each other at an informal potluck during International Student Orientation. Students and faculty from across the campus brought food from their own culture to share with the incoming students.

An evaluation of the program found that over 75% of the participating international students felt the program was extremely helpful. The ambassadors also found reward in the program. One student commented,

I am a second year international student. I understand the nervousness when someone first comes to live and study in a strange country. So I want to help new students to overcome the culture shock.

In 2013, UNMC expanded the International Student Orientation to four days. Days were shortened to reduce fatigue and time allotted to important topics was expanded. The students were given extra time to become familiar with the campus and a chance to meet with their ambassadors.

In August the second edition of the International Student Handbook was published. Multiple people contributed to the revision, including a pharmacy student who provided a reference tablet of English names for common Chinese over-the-counter medications. The handbook is now being distributed to visiting faculty, house officers and others across campus.



ECONOMIC GROWTH TAB

ECONOMIC GROWTH TAB



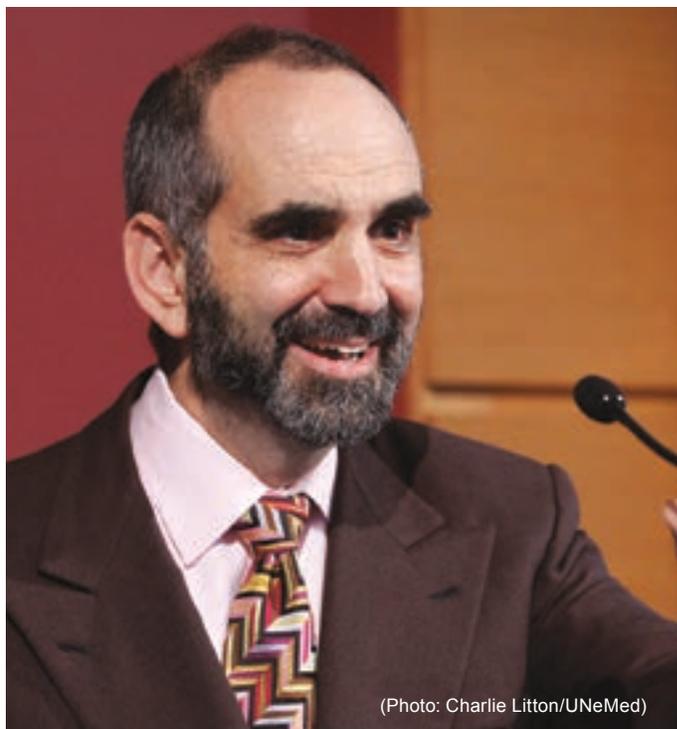
the science of innovation

UNeMed Corporation is the technology transfer office for the University of Nebraska Medical Center, helping faculty, students and staff move their innovations and discoveries from their laboratories and notebooks to the marketplace where they can contribute to a healthier world.

UNeMed—a for-profit company owned by the Board of Regents of the University of Nebraska—has established itself as a national leader among technology transfer offices, reaching far above and beyond the traditional role of licensing technologies and filing patent applications.

MISSION

UNeMed improves healthcare by fostering innovation, advancing biomedical research and engaging entrepreneurs and industry to commercialize novel technologies.



(Photo: Charlie Litton/UNeMed)

Renowned UNMC researcher Howard Gendelman, M.D., was named Innovator of the Year at UNeMed's annual Innovation Awards Ceremony on Oct. 10, 2013. "There's going to be many hurdles," Dr. Gendelman said during his acceptance speech. "It takes not smarts, but determination to get over those hurdles."

Activities

All UNMC innovations—such as new drug candidates, medical devices, and diagnostics—are evaluated for their scientific and commercial potential by UNeMed's experienced group of expert staff.

UNMC employees first disclose their inventions and discoveries to UNeMed, which then works to identify and collaborate with non-university commercial partners to fully develop those innovations into market-ready products and solutions that improve public health.

After evaluating a new discovery's patentability and marketability, UNeMed then protects the technology in various ways. Confidential disclosure agreements and material transfer agreements are developed; and patent, copyright or trademark applications are filed.

UNeMed then develops a marketing plan to identify and establish a commercial partnership for the technology. These technologies can also be used to form a new startup company that can ultimately help improve the local and state economies.

YEAR	GROSS REVENUE	SPONSORED RESEARCH	LICENSES ISSUED	IP RELATED AGREEMENTS	INVENTIONS EVALUATED	PATENT APPLICATIONS
2006	\$293,388	n/a*	7	245	34	14
2007	\$914,201	\$128,800	13	249	68	36
2008	\$1,208,347	\$241,808	12	281	69	69
2009	\$3,161,618	\$2,134,905	14	270	64	55
2010	\$2,155,024	\$145,205	17	313	56	36
2011	\$1,511,066	\$44,982	8	332	98	79
2012	\$2,307,508	\$38,408	19	340	106	87
2013	\$1,628,010	\$572,775	22	405	66	107

*UNeMed did not begin tracking sponsored research agreements until 2007.

Economic Impact

UNeMed's work goes far beyond the primary mission of "fostering innovation" at UNMC. UNeMed also takes seriously its role in education, facilitating and hosting numerous workshops or seminars throughout the year, including its annual Innovation Week celebration. UNeMed also created and delivered a new graduate level course on bioscience innovation at UNMC last fall.

But UNeMed has made an even greater impact by establishing itself as a community leader in economic development. The expanded role not only helps push UNMC innovation further down the development line, but also helps the University of Nebraska Medical Center's larger mission of contributing jobs and economic value to the state of Nebraska.

During its tenure, UNeMed has helped UNMC researchers, faculty, staff and students create 48 new businesses based on their inventions and discoveries. Those new companies bring more than just prestige to the University, but high-tech industry jobs and resources to the community.

In October 2013, UNeMed shined a bright light on a handful of recent startups that spun out of UNMC innovation. At its first-ever Startup Demonstration Day, UNeMed featured eight recent startups. Five of those featured startups have already generated \$20 million in angel investments and other commitments as they work to translate the research discoveries into products that improve healthcare.

Here's a closer look at some of the new companies adding to Omaha's growth and economic development:

Startup Roundup

ELEGANT INSTRUMENTS LLC

Two students, Anna Brynskikh Boyum, Ph.D. (UNMC) and Tom Frederick (UNL), founded this Omaha startup based on a more useful and specialized laboratory tool that could better arm researchers at labs everywhere. Together they started Elegant Instruments, a development company that creates and commercializes innovative biomedical technologies to advance health care and biomedical research with better tools for the laboratory.

RADUX DEVICES LLC

Radux Devices is developing two UNMC inventions from Greg Gordon, M.D., that improve radiation protection and decrease orthopedic stress for physicians. The devices also improve workflow and operating table management in endovascular/fluoroscopy suites.

PROMMUNE INC.

Prommune is an early stage biotechnology company focused on the human and veterinary medicine applications of a novel therapeutic strategy for fighting infections by awakening the body's own natural immune defenses. Host-directed immunotherapy, or HDI, is induced by a

structurally engineered peptide known as EP67. Prommune's EP67 selectively engages and activates the cell population responsible for innate immunity — the body's first line of defense against bacterial, viral and fungal infections.

PROTRANSIT NANOTHERAPY LLC

Founded by UNeMed entrepreneur-in-residence, Gary Madsen, Ph.D., ProTransit Nanotherapy is a seed stage company focused on delivering medication with unique nanoparticles that are nontoxic and biodegradable. The nanoparticles stabilize the drug, have a slow-release profile and can penetrate cell membranes to deliver powerful medications where they can be most effective. The first of several applications of this technology will be delivering antioxidant enzymes in sunscreens and cosmetics to deep layers of skin where it can help prevent premature wrinkles, age spots and even cancer.

TRAK SURGICAL INC.

A surgical tool company built around an innovative software and bone saw package, Trak Surgical could change the way joint replacement surgeries are performed. The device is a next generation handheld surgical tool that



the science of innovation

REACHING NEW HEIGHTS

Although the number of new invention disclosures was down from a record year in 2012, UNeMed boosted performance in most other significant measures. In fiscal 2013, UNeMed set new record marks in issued licenses (22) and agreements (405); and the 105 patent applications are the most since 2004 when 117 were filed. And the amount of sponsored research exploded from \$38,408 in 2012 to \$572,775 in 2013— the second largest amount since UNeMed started tracking the measure in 2007.

uses software and guidance systems that may completely eliminate the need for expensive jigs and the specialized staff needed for current orthopedic surgeries.

VIRTUAL INCISION CORP.

Founded in 2006, Virtual Incision Corp. is a startup company developing miniature robotic devices that are placed inside the body during laparoscopic surgery. VI surgical robots are introduced through laparoscopic ports using a special insertion device. Once inside, the robots are controlled by the surgeon and enable complex procedures to be performed with minimally invasive techniques.

MOTOMETRIX

Motometrix is an early stage company formed around technology developed by a biomechanics researcher at the University of Nebraska at Omaha. The technology uses high-level mathematics to measure nearly imperceptible changes in a person's posture to detect concussion and when individuals have recovered from concussion. The system could also help assess the risk of fall for the elderly and provide an early diagnosis of a variety of diseases, such as Parkinson's and Alzheimer's.

EMPLOYEE LOYALTY TAB

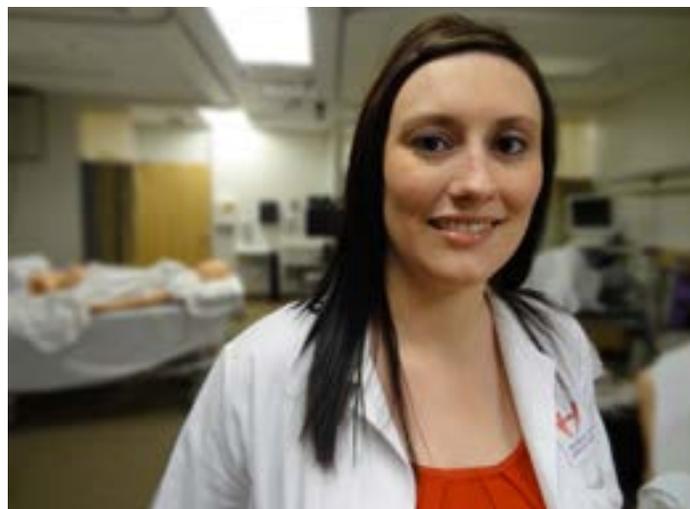
EMPLOYEE LOYALTY TAB

EMPLOYEE GROWTH

12 Year Employment Growth

UNMC experienced sustained growth during the first twelve years of the 21st century, with an increase of 23.2% in regular employees and an increase of 26.9% in total overall employment.

When growth is viewed by primary occupational activity, the greatest growth is in the faculty category (38.0%), followed by the technical/paraprofessional category (34.5%), which includes non-faculty research positions. This reinforces the fact that most growth was the result of increased activity in research, patient care, and education. Administrative and support categories showed smaller growth or declines over the twelve year period.



EMPLOYMENT GROWTH 2002 THROUGH 2013

	January 2002		December 2013		Total Difference	
	Count	% Total	Count	% Total	Count	% Growth
Regular Full and Part-Time Employees	3,336	100.0%	4,111	100.0%	775	23.2%
Total Employment*	3,890	100.0%	4,936	100.0%	1,046	26.9%

* Total employment includes full and part-time regular employees plus temporary full and part-time employees, graduate assistants and student workers.

EMPLOYMENT GROWTH BY PRIMARY OCCUPATIONAL ACTIVITY ACTIVE REGULAR FULL- AND PART-TIME EMPLOYEES

	January 2002		December 2013		Total Difference	
	Count	% Total	Count	% Total	Count	% Growth
Clerical/Secretarial	505	15.1%	511	12.4%	6	1.2%
Executive/Administrative	74	2.2%	70	1.7%	-4	-5.4%
Faculty	968	29.0%	1,336	32.5%	368	38.0%
Professional/Managerial (non-faculty)	1,405	42.1%	1,758	42.8%	353	25.1%
Service Maintenance	149	4.5%	163	4.0%	14	9.4%
Skilled Crafts	87	2.6%	74	1.8%	-13	-14.9%
Technical/Paraprofessional	148	4.4%	199	4.8%	51	34.5%
Total	3,336	100.0%	4111	100.0%	775	23.2%

EMPLOYEE RECRUITMENT CAMPAIGN

Human Resources and Public Relations, with the professional guidance of David Day Associates, developed a new employment recruitment campaign that was implemented in October 2013.

The theme centers on “taking your next step at UNMC” and loving your job “every step of the way.” Whether it’s a current employee or a prospective one, a career at UNMC is stimulating and influential. “Stepping implies positive forward motion, energy, impact and growth (personal, professional, organizational and community-wide).

The campaign ties to the internal Vital Campaign, “Every step at UNMC is Vital” to the organization, to the greater community, to personal growth and to breakthroughs for life. The approach emphasizes the values associated with the UNMC branding initiative: **Leadership, Commitment to Excellence, Trusted Resource and Teamwork.**

To keep the campaign memorable and consistent four distinct action steps were developed that brings the “Step into your career at UNMC” campaign messages to life:

1. **STEP IN:** **We are trusted** to help people take groundbreaking steps every day and it’s time to make yours. **Commit to excellence** with UNMC.
2. **STEP OUT:** **Discover your potential to work with strong leaders** and improve lives at UNMC. Your part in the bigger picture begins with one step
3. **STEP FORWARD:** Walk in step with the most **trusted leaders in medicine, research and education.** Get growing with UNMC.
4. **STEP UP:** **We work together** to take quality of life to the next level. Step up to a rewarding challenge and make the most of your strengths with UNMC.

As was the case with the “I work here – maybe you should too” recruitment theme, the STEP campaign is oriented toward not only external recruits, but also those already employed at UNMC. The goal is to reinforce the value and opportunities associated with a career at UNMC.



UNIVERSITY OF NEBRASKA MEDICAL CENTER unmc.edu

STEP UP

EVERY STEP AT UNMC IS VITAL.

We are leaders in our community.
Follow in the footsteps of compassionate, hardworking people to make the most of your strengths at UNMC.

Elevate your possibilities at
jobs.unmc.edu

Breakthroughs for life.
UNMC is an Affirmative Action Equal Employment Opportunity Employer, including an equal opportunity employer of protected veterans and individuals with disabilities.

UNMC
UNIVERSITY OF NEBRASKA
Medical Center

EMPLOYEE ENGAGEMENT, RETENTION AND WELLNESS

UNMC is committed to creating a culture that builds employee engagement and retention and promotes wellness.

Human Resources Activities

- The Management Series graduated 46 managerial professional staff in May 2013. The current program began in October 2013 with 48 staff enrolled. This highly successful eight-month series provides supervisors, managers and administrators necessary tools to become effective leaders.
- Foundations for Success is a four-month series that provides an opportunity for 38 office service employees to acquire knowledge and skills to enhance job performance, maximize career potential and bring value to UNMC.
- A total of 282 new employees participated in the 2013 New Employee Orientation program.
- Human Resources and Public Relations planned and launched the third annual UNMC Spirit Week October 28-31, 2013 to celebrate employees, students, and faculty and the vital role they play in delivering UNMC's mission and vision.
- Human Resources administered the 2013 Engagement Survey on line in March 2013. UNMC Response rate was 67%; UNMC Engagement rate was 71% (above Kenexa benchmark of 69%). Executive Summary with unit detail of engagement survey results were communicated personally with each dean or unit leader. Leaders shared information received with direct reports and proceeded accordingly to improve engagement.
- HR promoted and administered the following Reward and Recognition programs: Service Award Dinner, Gold U Award, Silver U Award, Thank U Medallions and Vital Pins. In 2013, there were 4 recipients of the Gold U Award; 103 employees received the Silver U Award; 6,747 Thank U Medallions were mailed; 406 Vital Pins were awarded and 355 employees were recognized at the Service Award Dinner for their loyalty and tenure at UNMC.
- Staffing launched the "Step Up" campaign in October 2013. The theme centers on "taking your next step at UNMC" and loving your job "every step of the way". Whether for a current employee or a prospective one, a career at UNMC is stimulating and influential. "Stepping" implies positive forward motion and energy. The campaign ties to the internal Vital Campaign, "Every step at UNMC is Vital" to the organization, to the greater community, to personal growth and to breakthroughs for life. The approach will emphasize the values associated with UNMC branding initiative: Leadership, Commitment to Excellence, Trusted Resource and Teamwork.
- Records and HRIT designed and implemented the on-line UNMC HR SAP Resource Guide which provides detail instructions on how to process all Human Resources personnel actions.
- Coordinated UNMC's Professional Day Celebration at the Truhlsen Campus Event Center that was attended by more than 250 office service employees.
- Provided targeted training programs in FMLA and ADA attended by 222 managers.
- Launched two Learn@Lunch series attended by over 600 employees which included Individual Leadership: Discovering your Inner Strength (3 sessions) and Innovation and Putting Diversity of Thought to Work (3 sessions)
- Coordinated the Annual Culture Fest event held in April 2013. Culture Fest celebrates UNMC's rich diversity and was attended by over 500 faculty, staff and students.



- The Faculty/Employee Assistance Program continues to provide confidential services to assist faculty, employees and their families address personal or work-related problems.
- The Wellness Center continues to conduct an annual Health Risk Assessment (HRA) “Wellstream” during benefits open enrollment period with the annual completion rates having increased from 31% in 2009 to 67% in 2013.
 - Of the 23 modifiable risk factors reported in the HRA, eight of them showed improvements by either one or two percent. The number of employees reporting inadequate activity levels decreased by 2% for a second year in a row.
 - A five-year health promotion plan and timeline based on the results of the annual HRA has been completed and continues to serve as a strategic plan and timeline to improve wellness initiatives and outcomes.
 - Walking Works Challenge – 341 employees participated in the eight-week program.
- The Center for Healthy Living continues to promote, register and oversee intramural leagues for UNMC employees and students. League participation for 2013 is listed below:

TYPES OF LEAGUES	NUMBER OF PARTICIPANTS
Basketball	109
Volleyball	318
Softball	87
Golf	102
Broomball	95
Faculty Badminton	15
International Week Table Tennis Tournament	55

- Fourteen fitness classes were offered at the Center for Healthy Living during 2013 having an average of ten classes per week and averaging ten participants per class.
- Current membership at the Center for Healthy Living is 524 employees and 2,471 students.
- Student and employee events are held in the Center for Healthy Living’s gymnasium, including the Pharmacy and Physical Therapy Career Days, Student Fundraising Activities, New Student Orientation, and the 8th Grade Science Fair.
- The Center for Healthy Living organized three campus blood drives with 177 donations.
- The Fitness Specialist conducted 67 personalized fitness consultations.

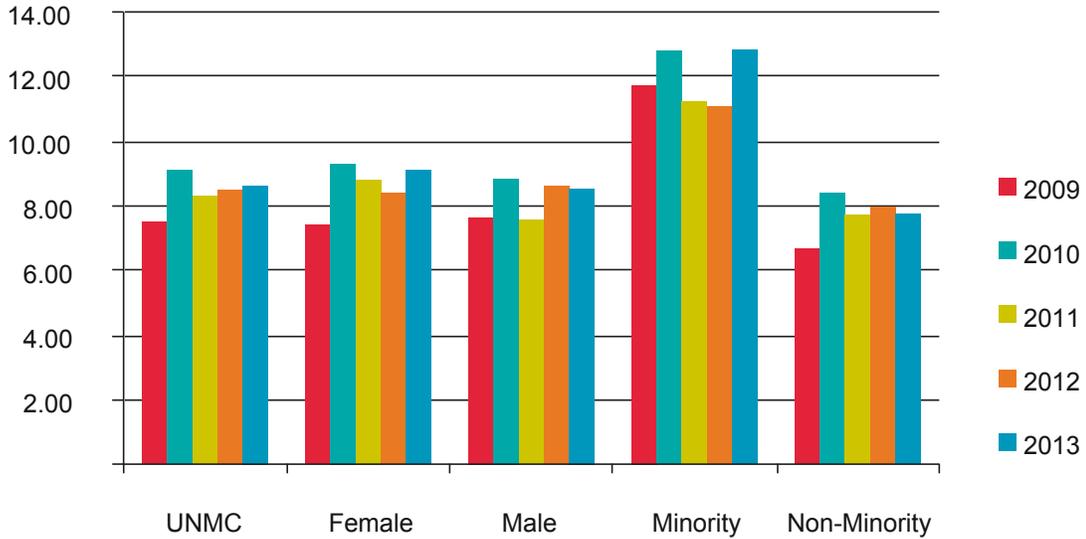


- The Wellness Center assisted with the planning of the Parkinson’s Skate-A-thon on January 10 – 11 which raised \$20,000 for Parkinson’s disease.
- Off-campus special events include Corporate Cycling Challenge – 146 riders from the Medical Center rode a total of 3,594 miles, American Lung Association Corporate Cup Run/Walk – had 32 participant, the Race for a Cure and the Owl Ride.
- The UNMC Child Development Center continues to provide a program that not only meets UNMC employees’ children’s physical needs, but also encourages activities in a loving and accepting atmosphere. The center just completed remodeling.
- HR assisted the ten UNMC graduate students at the 9th Annual International Student Research Forum at Griffith University on the Gold Coast Campus in Queensland, Australia in October.

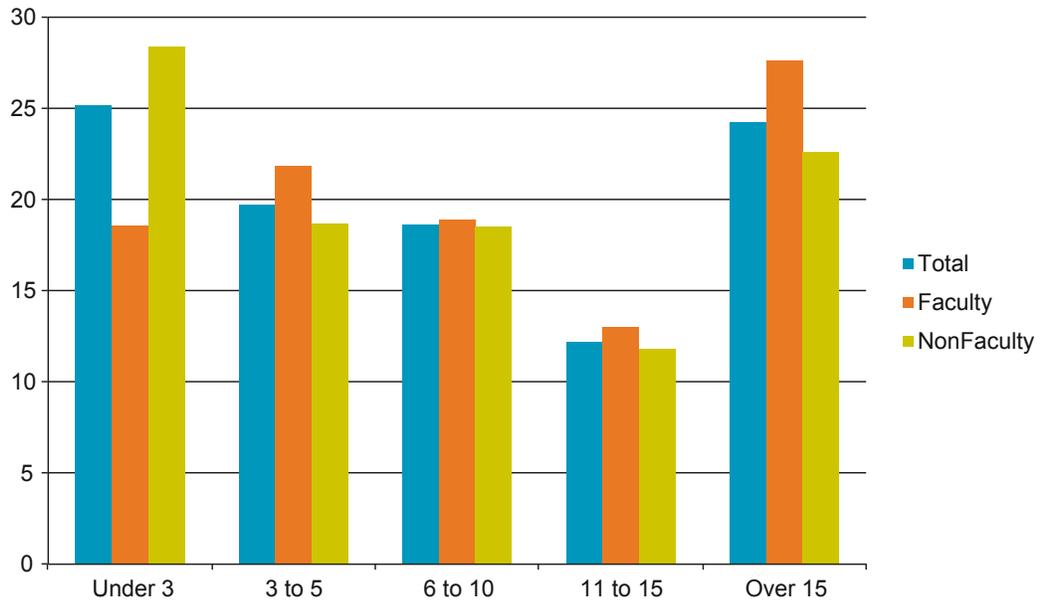
EMPLOYEE TURNOVER AND LENGTH OF SERVICE

The first graph compares turnover* rates by year for all employees**, and for employees grouped by gender and by minority status. The second graph displays length of service at UNMC for all employees**, and for employees grouped by faculty and by non-faculty.

Turnover Rates by Category



Average Length of Employment



*Turnovers include resignations, retirements, appointment expirations, terminations and deaths

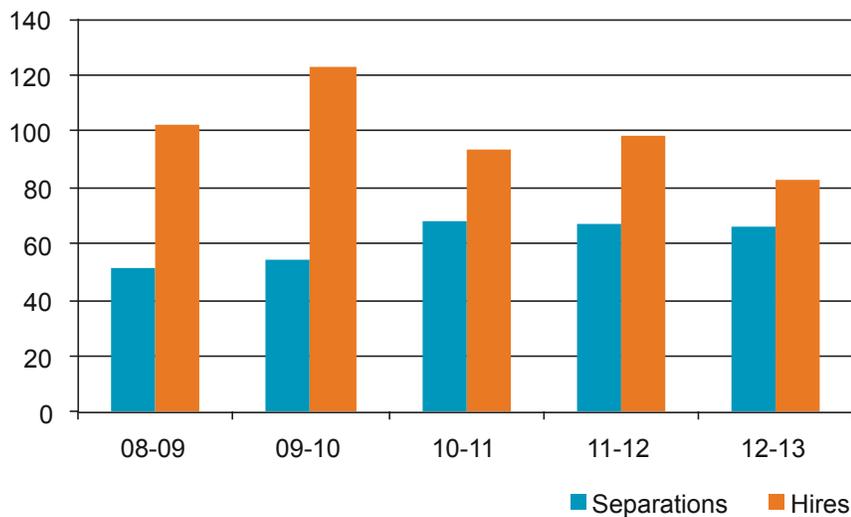
**House officers not included.

FACULTY TURNOVER

COLLEGE/INSTITUTE	2008-09	2009-10	2010-11	2011-12	2012-13
Chancellor/Library of Medicine	0%	0%	0%	0%	8%
College of Dentistry	5%	5%	5%	4%	4%
College of Nursing	6%	2%	6%	6%	6%
College of Pharmacy	3%	0%	0%	8%	14%
College of Public Health	11%	18%	6%	8%	4%
Eppley Institute	7%	8%	5%	10%	5%
College of Medicine	6%	6%	8%	6%	7%
Munroe Meyer Institute	3%	6%	6%	12%	6%
School of Allied Health Professions*	-	5%	3%	7%	2%
Total UNMC Campus	5.5%	5.3%	6.6%	6.5%	6.4%

*School of Allied Health Professions was included in College of Medicine through FY 2008-09

Faculty Turnover Comparison



Separations include resignations, retirements, appointment expirations, terminations and deaths

Faculty Turnover Comparison

	08-09	09-10	10-11	11-12	12-13
Separations	51	54	68	67	66
Hires	102	123	93	98	83

Increase in number of female faculty for 5-year period:	
New hires	214
Resignation	115
Net Gain	99

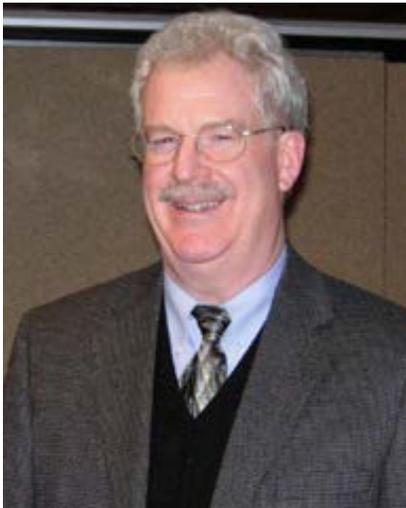
Increase in number of male faculty for 5-year period:	
New hires	286
Resignation	194
Net Gain	95

Increase in number of minority faculty for 5-year period:	
2008	78
2013	124
Net Gain	46

OMBUDSMAN



An Ombudsman for the UNMC campus was established in 1998 as part of the response to equity issues and concerns at that time. Under the leadership of Chancellor William Berndt, and with input from the Faculty Senate, Human Resources and the Office of Student Counseling, Ombudsman members were appointed by the Chancellor to work with faculty, staff and students. Although membership on the Ombudsman has changed over the past 16 years, questions involving many of the same issues continue to arise. Susan Swindells, M.B.B.S., Professor of Internal Medicine – Infectious Disease and noted HIV/AIDS researcher, was appointed as Faculty Ombudsman to take over from Myrna Newland, M.D. who retired June 30, 2013. David Carver, Ph.D. continues in his position as the Ombudsman for the students and residents. Broad areas include behavior issues, benefits, academic concerns, sexual orientation, termination, offensive materials, gender issues, performance issues, harassment and outplacement. Another category is “information only.” More information about the Ombudsman is available on the web.



FINANCIAL STRENGTH TAB

FINANCIAL STRENGTH TAB

COMBINED FINANCIAL STRENGTH

University of Nebraska Medical Center, UNMC Physicians and The Nebraska Medical Center

	UNMC & UNMC PHYSICIANS (a)	TNMC (b)	(THOUSANDS) COMBINED (c)	
ASSETS AND LIABILITIES, JUNE 30, 2013				
Current Assets	339,743	389,486	729,229	
Noncurrent Capital and Other Assets	895,572	481,256	1,376,828	
Total Assets	1,235,315	870,742	2,106,057	
Liabilities	131,122	277,249	408,371	
Net Assets	1,104,193	593,493	1,697,686	
2013 OPERATING HIGHLIGHTS				
Total Revenues and Transfers	704,214	812,778	1,516,992	
Total Expenses	640,325	787,894	1,428,219	
Excess of Revenues over Expenses	63,889	24,884	88,773	
Other changes in Net Assets	35,460	5,015	40,475	
Increase in Net Assets	99,349	29,899	129,248	
Net Assets at Beginning of Year	1,004,844	572,549	1,577,393	
Net Assets at End of Year	1,104,193	602,448	1,706,641	
2014 Operating Budgets				
	UNMC (d)	UNMC Physicians (e)	TNMC (f)	Combined
State General Fund	134,976			134,976
Grants, Contracts and Gifts	311,000			311,000
Patient and Professional Services Revenue	35,126	215,856	788,147	1,039,129
Tuition, Auxiliaries and Other Income	185,525	2,041	7,315	194,881
Total Revenue Budget	666,627	217,897	795,462	1,679,986
Personal Services	331,319	135,700	344,510	811,529
Operating Expenses & Anticipated Awards	335,308	75,331	428,848	839,487
Total Operating Expense	666,627	211,031	773,358	1,651,016
Revenue Over Expense	0	6,866	22,104	28,970

a) UNMC & UNMC Physicians 2012-13 per blended audit report, including UNMC, UNMC Physicians, and UDA. UNeMed is no longer included in the blended financials.

b) The Nebraska Medical Center 2012-13 is per audit.

c) Operating amounts combined without eliminating interorganizational transfers.

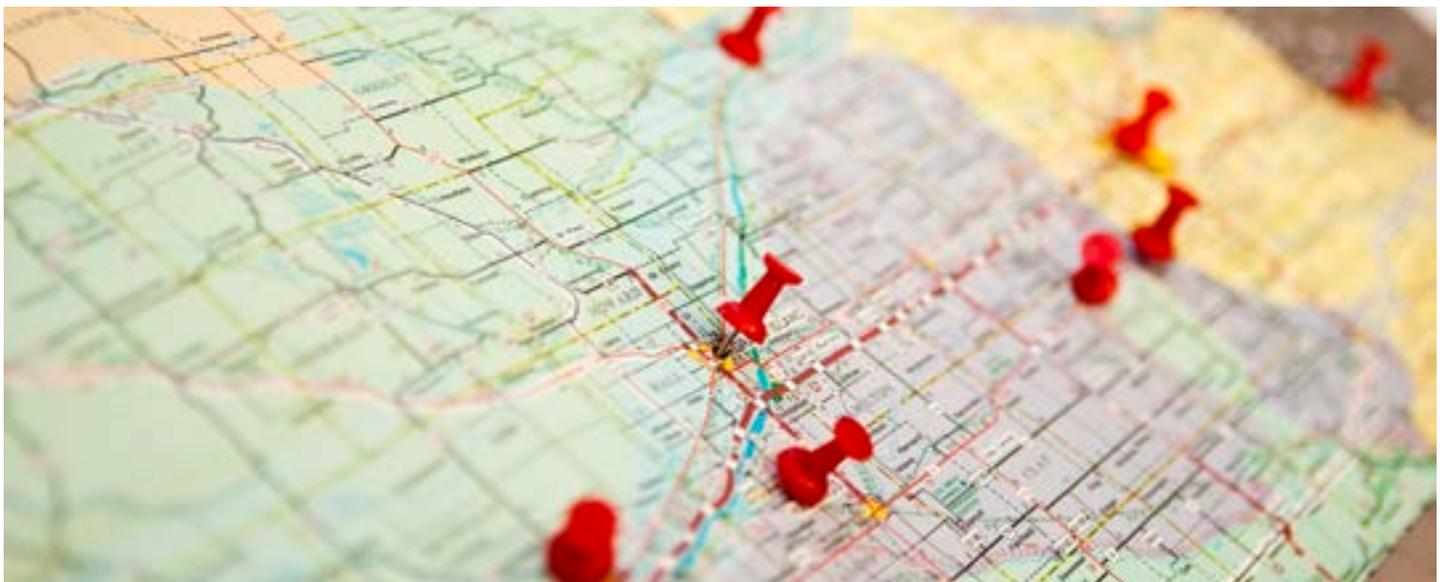
d) UNMC budget per 2013-14 University General Operating Budget.

e) UNMC Physicians Consolidated Revenue and Expense Budget for FY14.

f) TNMC budget per FY 2014 TNMC Budget Executive Summary.

UNMC SUMMARY FINANCIAL INDICATORS

	FY 2012	FY 2013	FY 2014
Growth in state general fund appropriation (State support underpins key instructional and operational activities.)	1.5%	2.1%	3.7%
Growth in non-state general fund revenues (Non-state support includes gifts, grants, contracts, professional fees, transfers from The Nebraska Medical Center, and auxiliary operations. These funds support the majority of UNMC's research and service activities. See next note.)	3.7%	7.7%	4.0%
Ratio of non-state general fund revenues to total revenues (As with most public research institutions, UNMC is "state-assisted" not "state-funded." While UNMC seeks to increase its state funding, an increasing ratio of non-state funding demonstrates entrepreneurial success. It may also indicate increasing level of risk, depending on the stability of the non-state funding sources.)	78.8%	79.7%	79.8%
Beginning of year ratio of current assets to current liabilities (This ratio measures liquidity or the ability to meet short-term financial obligations. A ratio of 2.0 or above is generally considered to be reasonable.)	2.9	3.6	3.2
Prior year growth in net assets (This ratio measures total economic return and growth in UNMC financial capacity to achieve its mission; positive growth is expected.)	7.8%	2.4%	9.9%
University credit ratings Moody's Standard and Poor's (Moody's describes its Aa rating as "high quality by all standards." S&P's assigns an AA rating to those with "very strong capacity to meet financial commitments.")	Aa1 AA	Aa1 AA	Aa1 AA



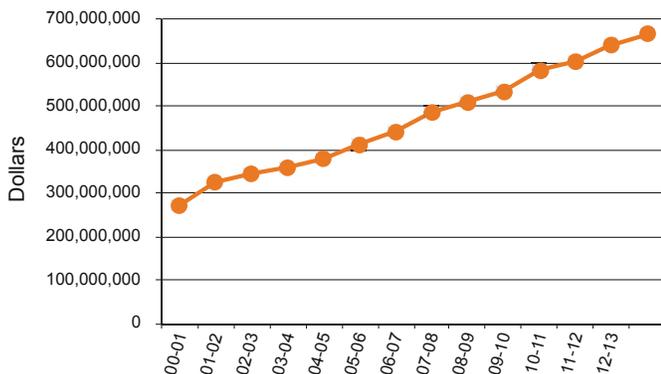
GENERAL FUND, STATE-AIDED AND TOTAL BUDGET 2000-01 THROUGH 2013-14

YEAR	GENERAL FUND	STATE-AIDED BUDGET	TOTAL BUDGET	GENERAL FUND AS % OF TOTAL BUDGET
2000-01	\$87,414,459	\$122,952,534	\$272,052,534	32.1%
2001-02	\$93,690,463	\$148,549,053	\$328,049,053	28.6%
2002-03	\$99,196,841	\$153,762,045	\$345,262,045	28.7%
2003-04	\$95,089,086	\$156,450,262	\$359,617,262	26.4%
2004-05	\$97,923,813	\$164,705,961	\$382,366,211	25.6%
2005-06	\$101,365,977	\$175,237,576	\$416,461,246	24.3%
2006-07	\$108,619,726	\$186,653,338	\$444,853,338	24.4%
2007-08	\$114,982,346	\$200,188,464	\$485,943,464	23.7%
2008-09	\$122,476,053	\$213,461,149	\$511,789,349	23.9%
2009-10	\$126,893,695	\$223,650,642	\$534,748,342	23.7%
2010-11	\$125,708,136	\$228,070,631	\$583,743,531	21.5%
2011-12	\$127,556,718	\$235,023,354	\$602,523,354	21.2%
2012-13	\$130,209,072	\$240,223,071	\$641,623,071	20.3%
2013-14	\$134,976,544	\$248,627,266	\$666,627,266	20.2%

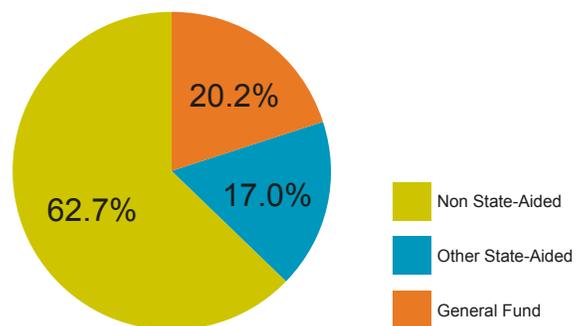
State-aided funds include state general fund, tuition, investment income, indirect cost reimbursement, patient revenue, state cigarette tax, and state tobacco settlement funds.

Total Budget is as of July 1 and does not include Nebraska Research Initiative funding or Legislative budget reductions.

Total UNMC Budget

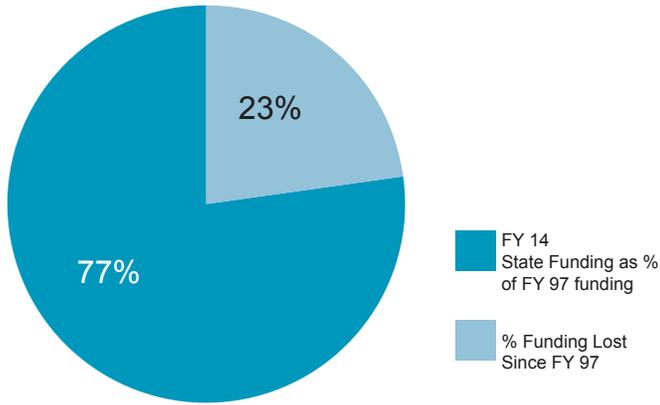


**UNMC Budget by Funding
FY2013-2014**

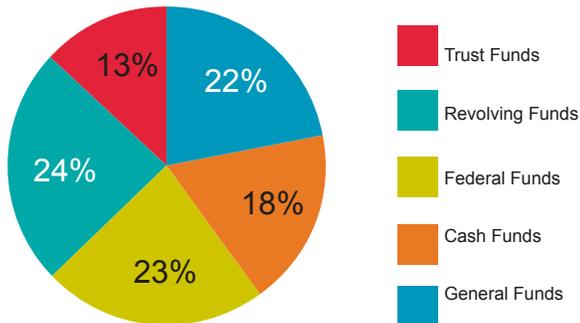


STATE AND UNIVERSITY BUDGETS

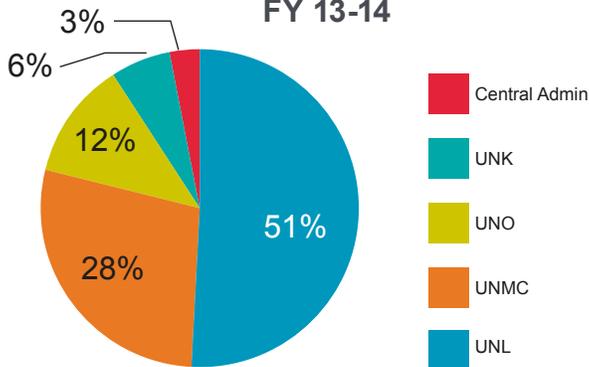
Share of State Funding Lost from FY 97 to FY 14



University Revenue Budget by Source FY 13-14



University Expense Budget by Campus FY 13-14



UNIVERSITY GENERAL FUNDS AS SHARE OF STATE GENERAL FUNDS (AS OF JULY 1)

96-97	17.6%	100%
97-98	17.3%	98%
98-99	16.0%	91%
99-00	16.0%	91%
00-01	15.9%	90%
01-02	15.6%	89%
02-03	15.7%	89%
03-04	14.7%	84%
04-05	14.4%	82%
05-06	14.3%	81%
06-07	14.3%	81%
07-08	14.3%	81%
08-09	14.1%	80%
09-10	14.8%	84%
10-11	14.5%	82%
11-12	14.2%	81%
12-13	13.7%	78%
13-14	13.5%	77%

UNIVERSITY REVENUE BUDGET BY SOURCE JULY 1, 2013

General Funds	\$516,914,676
Cash Funds	413,631,591
Federal Funds	535,296,056
Revolving Funds	569,923,284
Trust Funds	317,844,807
Total	\$2,353,610,414

UNIVERSITY EXPENSE BUDGET BY CAMPUS JULY 1, 2013

UNL	\$1,189,325,272
UNMC	666,627,266
UNO	292,577,383
UNK	139,185,631
Central Admin	65,894,862
Total	\$2,353,610,414

UNIVERSITY OF NEBRASKA FOUNDATION STATEMENT OF ACTIVITIES

Mission: The University of Nebraska Foundation, an independent 501c(3) corporation, encourages private financial support of the University of Nebraska from individuals, corporations and other foundations. It oversees the distribution of these gifts and of the interest earned on its endowed funds. Gifts to the foundation add a margin of excellence over and above the appropriate level of state support and are not intended to replace state funds.

	2010-11 (MILLIONS)	2011-12 (MILLIONS)	2012-13 (MILLIONS)
SOURCES OF FUNDS			
Gifts, bequests and life insurance proceeds	\$172.1	\$165.0	\$236.7
Investment income	30.0	31.2	36.9
Change in value of split-interest agreements	0.2	1.6	0.6
Realized gain (loss) on investments	49.0	22.0	32.9
Unrealized gain (loss) on investments	120.7	(24.5)	61.8
Total	\$372.0	\$195.2	\$368.9
USE OF FUNDS			
Academic programs	\$30.4	\$38.4	\$44.8
Student assistance	23.6	18.0	21.4
Faculty assistance	5.1	4.6	4.7
Research	7.1	7.3	6.7
Museum, library and fine arts	5.1	3.1	2.4
Campus and building improvements	57.9	51.3	93.9
Alumni associations	1.0	1.0	0.8
Deferred compensation	0.0	0.0	0.0
Subtotal	\$130.2	\$123.7	\$174.7
Management and fundraising	20.9	21.9	20.5
Other operating expenses	11.1	11.0	9.5
Total Use of Funds	\$162.1	\$156.6	\$204.7
Increase (decrease) in net assets	209.9	38.6	164.1
Plus: beginning net assets	1,217.7	1,427.6	1,466.3
Ending net assets	\$1,427.6	\$1,466.3	\$1,630.4

UNIVERSITY OF NEBRASKA FOUNDATION UNMC STATEMENT OF ACTIVITIES

	2010-11 (MILLIONS)	2011-12 (MILLIONS)	2012-13 (MILLIONS)
SOURCES OF FUNDS			
Gifts & Pledges	\$69.5	\$24.2	\$117.0
USE OF FUNDS			
Academic support	\$4.3	\$6.4	\$5.1
Student assistance	1.8	1.8	1.8
Faculty assistance	2.4	2.1	2.1
Research	3.4	4.2	3.6
Museum, library & fine arts	0.2	0.2	0.3
Campus & building improvements	21.0	4.1	34.5
Alumni associations	0.2	0.2	0.2
Total Disbursements to UNMC	\$33.4	\$18.9	\$47.5

UNIVERSITY OF NEBRASKA FOUNDATION



The University of Nebraska Foundation's mission is to advance the University of Nebraska. Thanks to the generosity of our donors, the impact on students, faculty, our communities and the world is profound.

For one UNMC student, scholarship support means more than just graduating with less debt.

"It means when I consider a specialty I can think about what I love, what I'm good at. What can I excel at and give my patients the absolute best care," said Paige Lundy, a third year medical student and scholarship recipient. "I want to thank the donors from the bottom of my heart because they're going to make me a better doctor."

Through the foundation's Campaign for Nebraska: Unlimited Possibilities — the most ambitious in its history — more than 84,100 donors have committed \$1.649 billion to advance the university. The nine-year campaign, which surpassed its \$1.2 billion goal in 2012, will conclude December 31.

Of these totals, **16,419 donors** have given **\$527,011,058** to support UNMC priorities. Gifts have benefited numerous capital projects that have physically transformed the campus. Donor support has impacted other UNMC programs, including:

Student Support	\$22.4 million
Faculty Support	\$30.6 million
Research	\$40.9 million
Academic Program Support	\$57.7 million

Specifically, UNMC benefactors have established 679 new funds or supported existing funds. Nearly 30% of these donors are Medical Center graduates and 57% are first-time donors to UNMC. Their gifts have resulted in numerous benefits for the Medical Center, such as:

Mary and Dick Holland Regenerative Medicine Program: The Hollands' gift supports an emerging field of research that gives hope to those seeking treatment for incurable diseases. This funding strengthens UNMC's efforts to recruit kidney, gastrointestinal and neural-cell experts to the program.

Fred & Pamela Buffett Cancer Center Programs of Excellence Fund: With funding for the building project committed, the foundation now is focused on a \$100 million campaign for the Fred & Pamela Buffett Cancer Center which will greatly influence cancer care in Nebraska. Gifts, including recent commitments from Union Pacific and Mutual of Omaha, will strengthen the ability to attract and/or retain the brightest clinical physicians and researchers, to be at the leading edge of developing and deploying the latest precision treatments, and to compete at an international level for research funding that advances the biomedical revolution and spawns increased economic growth.

The Charles R. O'Malley Chair for Radiation Science Technology Education: The Charles R. O'Malley Trust established the first endowed chair in the School of Allied Health Professions with funding that helps advance teaching and research in the Radiation Science Technology Education program. The trust also provided a matching gift opportunity that led to the creation of four endowed professorships in the school.

Dr. Wayne and Eileen Ryan Surgical Simulation Suite: The Ryans' support made possible a simulated surgical suite that is the most technologically advanced in the country, allowing UNMC to become a regional training and testing site for medical students.

Roy W. and Mary L. Pearson Research Fund: Knowing firsthand the devastation of macular degeneration Roy and Mary Pearson made plans through their estate to support ophthalmic research at UNMC. Following Mary's passing last year, the Pearson Research Fund was established to help advance promising research in macular degeneration.

Evelyn Van Ert McCarty Scholarship: Established by family and friends of a longtime Nebraska nurse, this scholarship honors Evelyn Van Ert McCarty's memory and provides scholarship support to deserving UNMC College of Nursing students.

Carruth J. Wagner, M.D. Scholarship and Faculty Prize in Public Health: The foundation carrying the name of distinguished UNMC alumnus Dr. Carruth Wagner established honors supporting students and faculty in the College of Public Health. Several student scholarships and a faculty prize are awarded each year to recognize outstanding leaders in the college.

Dr. Byron and Mary Virginia Weeth Endowed Chair in Dentistry: The gift enabled the College of Dentistry to endow its first \$1 million faculty chair and expand its research focus in oral cancer.

College of Pharmacy White Coat Fund: Pharmacy graduates have generously supported the college's annual white coat ceremony, a rite of passage for new pharmacy students as they enter the profession. The college's alumni have embraced the opportunity to support new students and their alma mater by sponsoring white coats.

UNMC Health Science Education Complex Fund for Excellence: A gift from Phelps Memorial Health Center supports the university's efforts to provide continuing education opportunities for nursing and allied health professionals, helping enhance the health care community in south central Nebraska.

Statistics as of December 31, 2013.



CAMPAIGN for
NEBRASKA
UNIVERSITY of NEBRASKA FOUNDATION

The University of Nebraska Foundation remains focused on reaching the fundraising goals for unmet UNMC priorities and new opportunities that arise. To speak with a member of the foundation's UNMC development team, please call 402-502-0300.

INFRASTRUCTURE TAB

INFRASTRUCTURE TAB

2006-2015 UNMC FACILITIES DEVELOPMENT PLAN GOALS

	SIZE (SQ. FT.)	FUNDING (MILLIONS)	STRATEGIC ALIGNMENT	STATUS
PROVIDE FACILITIES TO ACHIEVE CAMPUS VISION AND STRATEGIC GOALS				
GROW RESEARCH:				
Fred & Pamela Buffett Cancer Center – Suzanne and Walter Scott Research Tower	252,000	\$110.0	Basic and translational research focused on developing treatments for cancer and related diseases.	Construction in progress.
Lozier Center for Pharmacy Sciences and Education and Center for Drug Discovery	85,000	\$35.0	Basic and translational research labs focused on treatments for infectious diseases, replace COP education space, dean's office.	Utilities relocation in progress. Building construction start in May 2014.
EXPAND PATIENT CARE:				
Ambulatory Care Facility (TNMC Project)	105,000	\$56.5	Outpatient surgery and clinical services	Design in progress. Construction starts late 2014.
Fred & Pamela Buffett Cancer Center – Outpatient and Inpatient Care	325,000	\$213.0	Clinical care, clinical research, education programs.	Project construction in progress. In service early 2017.
RENEW EDUCATION SPACE:				
College of Nursing – Lincoln Division	45,525	\$17.5	New building to replace leased space and to increase capacity to address shortage of nurses.	Project approved by BOR; design and construction start pending funding.
Lozier Center for Pharmacy Sciences and Education and Center for Drug Discovery (see above)				
College of Nursing – Kearney Division & Allied Health Professions	44,000	\$19.0	Facilities to replace current space and to increase capacity to address shortage of nurses and allied health professionals.	Construction start scheduled for May 2014.
DEVELOP FUTURE CAMPUS CONFIGURATION				
40th and Leavenworth Intersection Improvements	N/A	\$.49	Improves access to Truhlsen Eye Institute site and parking south of Leavenworth.	In service.
IMPROVE CAMPUS QUALITY AND EFFECTIVENESS				
Central Utility Plant Expansion	6,400	\$1.6	Expand chilled water production capacity across campus.	Under construction.
Wittson Hall infrastructure Renovation LB605	Levels 2, 3, 4	\$7.3	Updates fire egress and renews mechanical infrastructure to extend building service life.	In service.
East Utility Plant Addition	4,220	\$8.0	Increase emergency generating capacity.	Planning in progress.
Student Life Center Expansion	6,525	\$6.0	Renovate and enlarge fitness center.	Planning in progress.
Strategic Energy Initiatives	N/A	\$18.1	Utility plant and building efficiency improvements to achieve substantial energy savings.	Ongoing.
Joint Campus Traffic & Parking Plan Update		TBD	Develops plan to align traffic and parking with facilities development for Fred & Pamela Buffett Cancer Center, etc.	Project planning and programming in progress.

UNMC SPACE FACTS

	# OF BLDGS.	GROSS SQ. FT.	# RESEARCH LABS	LAB SQ. FT.	ACRES
UNMC-Omaha	50	3,278,057	376	418,623	117
TNMC-Omaha	13	1,212,516			29
UNMCP-Leased Space on Campus	5	102,993			
Subtotal	68	4,593,566	376	418,623	146
UNMC Parking Structures	4	986,050			
TNMC Parking Structures	6	735,477			
Subtotal	10	1,721,527			
UNMC-Other					
Omaha	10	114,110			
Lincoln	2	151,602	7	7,993	
Norfolk	1	35,000			
Kearney	1	12,513			
Scottsbluff	2	11,000			
Subtotal	16	324,225	7	7,993	
TNMC -Off Campus	4	195,086			
UNMCP - Off Campus	10	174,688			14
Bellevue Medical Center	2	432,305			21
Subtotal	16	802,079			35
Grand Total	110	7,441,397	383	426,616	181

NEW CONSTRUCTION

(not included in totals above)

Fred & Pamela Buffett Cancer Center					
Research Building		252,000	98	91,499	
Hospital Building		325,000			
Lozier Center for Pharmacy Sciences and Education and Center for Drug Discovery		85,000	14	18,435	
Ambulatory Care Facility		105,000			
Student Life Center Addition and Renovation		6,525			
Total New Construction		773,525	112	109,934	

SUSTAINABILITY INITIATIVES

UNMC increased the awareness of sustainability efforts on campus and engaged staff, faculty and students on energy and sustainability related issues. LiveGreen continues to drive multiple initiatives on campus.

UNMC completed its Sustainability Master Plan (SMP) in December 2013. This 10-year document outlines short- and long-term strategies to save energy and natural resources, reduce emissions, and reduce material waste on campus. The SMP has calculated baseline numbers, employee/student engagement and behavior changes, infrastructure changes, and measurable goals. UNMC anticipates once achieved, a reduction in expenses will drive more than \$1 million per year in savings.

In November 2013, UNMC deployed almost 700 new recycling bins around campus to aid in the collection of plastic and metal. This created a campus standard for this type of collection, as well as clear signage on what is collected in these bins. This fulfilled the most common request of LiveGreen from students and employees. December 2013 recycling of metal and plastic compared to December of 2012 has already increased by 39% (Figure 1).

LiveGreen also instituted a campaign to get campus researchers to understand the importance of closing their fume hood sashes. Face-to-face meetings and educational emails coupled with stickers on the fume hoods and rewards for compliance were piloted and then implemented in the Durham Research Center, Durham Research Center II, and Lied Transplant Center. This behavior change, along with upcoming infrastructure changes, can significantly reduce the number of air changes needed in a space and subsequent energy required to maintain and move that air, while keeping occupants safe (Figure 2).

In April 2013 UNMC and TNMC came together to celebrate Earth Day and Arbor Day with a weeklong slate of activities. A tree planting kickoff ceremony was held, which was attended by the local media (Figure 3). The campus was given multiple educational opportunities through LiveGreen and UNMC websites and speakers. In addition, 165 pairs of used eye glasses were collected to be donated to people in need, as well as 8,480 pounds of electronic equipment and single use batteries to be recycled and personal documents to be shredded. This collection prevented 11 metric tons of carbon dioxide from entering the atmosphere (emission equivalent 1,230 gallons of gas) (Figure 4).



Figure 1



Figure 3



Figure 2



Figure 4

STRATEGIC ENERGY & INFRASTRUCTURE INITIATIVES

UNMC continues to implement the Strategic Energy Initiatives targeting a 25% reduction in energy consumption and demand by 2015, compared to the 2010 baseline. Projections based on energy simulations of planned and proposed projects in both UNMC and TNMC buildings estimate a total energy reduction of more than 40% by the end of 2015.

On May 7, 2013, UNMC and The Nebraska Medical Center broke ground on the \$323 million Fred & Pamela Buffett Cancer Center. Figure 1 is a current rendering of the new facility. The complex will include the Suzanne and Walter Scott Cancer Research Tower, the C.L. Werner Cancer Hospital and a multidisciplinary cancer outpatient center. The complex consists of 607,000 square feet designed and constructed within the main campus core. The complex will be extremely energy intensive requiring approximately 3,500 tons of chilled water, 3,450 kW of emergency power and 30 MBTU of heating capacity.



Figure 1

In June of 2013, UNMC held a ceremonial groundbreaking for the Lozier Center for Pharmacy Sciences and Education and Center for Drug Discovery. Figure 2 is a current rendering of the new facility. This high intensity laboratory consists of 85,000 square feet and will be located at 40th and Emile Street. This building will require 1,500 tons of chilled water, 1,600 kW of emergency generation and 15 MBTU of heating capacity.



Figure 2

Efforts are well underway to plan, design and renovate the utility system to meet current and future campus growth. UNMC and The Nebraska Medical Center have joined efforts to upgrade the remaining energy management systems on campus including the Clarkson Tower. The primary funding source comes from the Nebraska Energy Office through an allocation of \$6.2 million in Qualified Energy Conservation Bonds proving the capital at a near 0% interest over 15 years. This effort is projected to reduce energy consumption on campus by another 20% as compared to the 2013 baseline.

UNMC starts construction in May 2014 on a new 6,500 square foot addition to the East Utility Plant located at 40th and Dewey. This project adds two new 2000 kW standby-rated diesel generator sets along with installation of three new concrete encased 4160V feeder circuits from 40th and Dewey Avenue to the Fred & Pamela Buffett Cancer Center located at 44th and Dewey Avenue.

INFORMATION TECHNOLOGY SERVICES

ITS... implementing technology for UNMC's Future

ITS is responsible for infrastructure, support services, and systems which play a vital role in UNMC's education, research, patient care and outreach missions. ITS designs and manages a robust, comprehensive technology infrastructure shared by UNMC and the clinical enterprise; and partners with the University of Nebraska and the State of Nebraska to provide cost efficient disaster recovery solutions.

Advancing UNMC's Strategic e-Learning Initiatives

ITS is an integral partner in advancing UNMC's e-Learning initiatives. *Highlights include:*

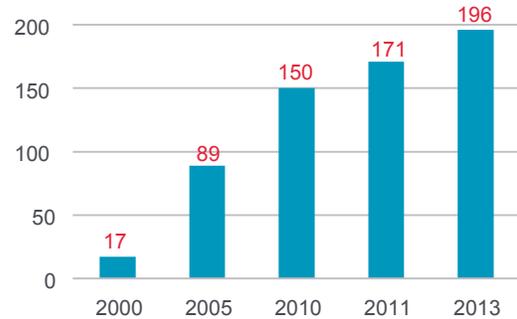
- Designs and supports technology-rich classroom spaces.
- Participates in the annual e-Learning module Request for Assistance (RFA) review and selection process.
- Serves on the UNMC e-Learning Oversight Committee.
- Designed and implemented the e-Learning Development Laboratory.
- Co-chairs the EPIC educational use pilot project.
- Offers learning opportunities for faculty (recent topics included Blackboard, Echo360 and Educause).
- Provides consulting and design services for multimedia classrooms technologies.
- Provides educational instructional design and faculty development services.

Essential Applications for UNMC's Mission

ITS provides essential application development for UNMC's unique research, academic and campus business functions to streamline workflow, increase efficiency and meet the ever increasing compliance requirements. *Highlights include:*

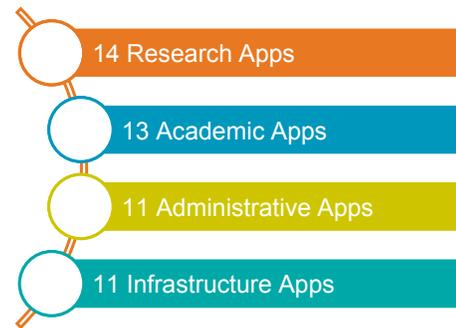
- core lab scheduling and billing
- comparative medicine management
- IRB, IACUC and IBC research administration
- Academic Department Information System (ADIS) for faculty records, publications, human resource records, clinical billing, productively reports, CVs
- Interfaces to national application services for programs in medicine, physician assistant, pharmacy, dentistry, nursing, public health, physical therapy and dietetics.
- Financial metrics for administrators
- Accounts receivable

Classrooms with Technology



1,000 Blackboard courses
110 Weekly classroom recordings

Number of Applications Currently Under Development



Telehealth

UNMC delivered over 1,300 telehealth consultations in 2013

Telehealth Outreach Presence

ITS offers a variety of video conferencing systems and support services. *Highlights include:*

- Delivers geriatric psychiatric consultations to 17 nursing homes via secured desktop video conferencing.
- Offers interactive grand rounds for a number of specialties.
- Partners with the State of Nebraska Probation Services to deliver secure video conferencing to 51 probation and reporting offices.
- Provides day-to-day video conferencing support services for 12 hospitals and two public health departments in the Northeast Nebraska Partnership.

Information Security

- ITS is the information security office for members of the Affiliated Covered Entity (ACE) which today includes UNMC, The Nebraska Medical Center, UNMC Physicians, Bellevue Medical Center, University Dental Associates (UDA), and Children's Specialty Physicians. Information security objectives are to provide data confidentiality, data integrity and system availability.

Simplifying Access

- In 2013, UNMC became a member of Internet 2 InCommon to simplify access to other higher education institutions, research organizations, government agencies and participating vendor sites. This enables UNMC faculty, staff and students to use their UNMC ID and password to log into these systems.
- UNMC is also the first in the country to receive Bronze status through self-attestation. Bronze certification is comparable to the National Institute of Standards and Technology (NIST) Assurance.

Mission Critical Infrastructure

ITS provides comprehensive infrastructure support services for UNMC and its healthcare partners which include network design and deployment; telecommunications; data center operations; video services; information security compliance and planning; help desk customer support; and internet/intranet hosting services.

DATA CENTER FAST FACTS

3700 Monitored Devices
670 Virtual Servers
1200 Physical Servers

Disaster recovery site for the University of Nebraska and the State of Nebraska.

The UNMC primary data center has diverse fiber entrances, FEMA hardened walls, multiple campus and emergency power feeds and redundant UPS systems. In order to keep up with the campus expansion, a major electrical and mechanical upgrade project is underway. Upon completion Uninterruptible Power Supply capacity will be tripled to support UNMC and its healthcare partners.

A CAMPUS ON THE MOVE

- Designs and implements voice, video and data infrastructure and multimedia solutions.
- Coordinates all voice and data connectivity.
- Current projects include the Lozier Center for Pharmacy Sciences and Education and Center for Drug Discovery, Fred & Pamela Buffett Cancer Center, and the Nursing and Allied Health Education Center at the University of Nebraska at Kearney.

Information Security

Implements industry best practices to protect UNMC's technology resources and meet regulatory compliance.

UNMC NetID and Password can be used to access:

- NCBI (National Center for Biotechnology Information)
- Cayuse424
- e2Campus Alert Notification
- UNO Blackboard
- BOX for research
- Educause
- On-the-Hub for personal software purchases

Infrastructure Facts

- Campus-wide wireless connectivity supports guest, secured and medical device access.
- Powerful, redundant network infrastructure.
- 6500 mobile devices registered for corporate email access.
- Hub site for the Nebraska Telehealth Network connecting 106 area hospitals and public health departments.
- Internet I and Internet 2.
- Wide Area Network to Nebraska Poison Control, Village Pointe, Bellevue Medical Center, Children's Hospital and off-site clinics.
- Secured remote access.
- Email, instant messaging, mobile devices.
- Utilize Network Nebraska to serve UNMC's 500 mile campus.
- Net+ Services for cost savings.

COMPLIANCE TAB

COMPLIANCE TAB

COMPLIANCE STRATEGY

UNMC is committed to assuring compliance with applicable federal and state laws and University policies. In FY 2014-15 UNMC will focus on implementing systems to meet regulatory requirements related to health care reform, new clinical care integration initiatives and research affiliations.

FY 2013-14 Accomplishments

- Appointed Export Control Officer who implemented export control program across UNMC including implementing software to screen employees, students and classify commodities; conducted education programs and implemented review procedures in high-risk departments; implemented required technology control plans for National Strategic Research Institute (NSRI) projects, and created an export control website
- Achieved ALION human subjects research protection accreditation
- Implemented Health Insurance Portability and Accountability Act (HIPAA) HITECH amendments
- Implemented annual electronic disclosure of financial interest reporting for all faculty, researchers and senior staff
- Renewed The Nebraska Medical Center Blood Bank radioactive material license
- Developed and implemented online Unit/College Financial and Personnel Metrics
- Successfully completed tri-annual Association for Assessment and Accreditation of Laboratory Animal Care International (AAALAC) site visit
- Reviewed and fully calculated Comparative Medicine billing rates in compliance with NIH Animal Research Facility guidelines
- Completed testing of unqualified use for the Suzanne and Walter Scott Cancer Research Center for tax exempt bonds issuance
- Created compliant DoD costing and invoicing financial processes for the NSRI
- Implemented fringe benefit rates in July 2013 approved by federal government resulting in improved costing compliance and efficiency in sponsored awards

FY 2014-15 Goals

- Implement online sponsored programs compliance education courses for administrators, principal investigators and others
- Develop a human subjects research protection policy on providing incident findings and research results, including genetic testing results, to research subjects
- Develop research data sharing agreements with other academic medical centers
- Implement research data management plan
- Submit 5-year license renewal application for the UNMC Broadscope radioactive material license
- Implement the new "Physical Protection of Category 1 and Category 2 Quantities of Radioactive Material" regulations at UNMC
- Submit license renewal application for The Nebraska Medical Center Nuclear Medicine & Brachytherapy programs (renewed every 5 years)
- Complete revision of UNMC Chemical Safety Manual
- Develop checklist for export control determinations on unknown and newly developed chemicals and pharmaceutical products
- Collaborate with International Healthcare to implement export control compliance program for visiting students and scholars
- Submit fringe benefit rate proposal for sponsored programs based on actual FY 2014 costs
- Implement new Clery/Violence against Women Act (VAWA) reporting requirements
- Design a cost effective animal care program for the Suzanne and Walter Scott Cancer Research Tower to include an animal imaging center
- Implement HIPAA infrastructure for Accountable Care Alliance and Regional Provider Network
- Implement Payment Card Industry amendments
- Ensure compliance requirements are fully integrated into the One Team clinical enterprise

NEBRASKA / FEDERAL TAB

NEBRASKA / FEDERAL TAB

ECONOMIC OUTLOOK

Global

“Global activity strengthened during the second half of 2013, as anticipated in the October 2013 World Economic Outlook (WEO). Activity is expected to improve further in 2014-15, largely on account of recovery in the advanced economies. Global growth is now projected to be slightly higher in 2014, at around 3.7 percent, rising to 3.9 percent in 2015.”

- *International Monetary Fund, World Economic Outlook, Jan. 21, 2014*

United States

“After a frustratingly slow recovery from the severe recession of 2007 to 2009, the economy will grow at a solid pace in 2014 and for the next few years, CBO projects. Real GDP (output adjusted to remove the effects of inflation) is expected to increase by roughly 3 percent between the fourth quarter of 2013 and the fourth quarter of 2014 -- the largest rise in nearly a decade. Similar annual growth rates are projected through 2017. Nevertheless, CBO estimates that the economy will continue to have considerable unused labor and capital resources (or “slack”) for the next few years. Although the unemployment rate is expected to decline, CBO projects that it will remain above 6.0 percent until late 2016.”

- *Congressional Budget Office, February 4, 2014*

Midwest

“The overall index for the Rural Mainstreet Economy indicates that the areas of the nation highly dependent on agriculture and energy experiencing slow, to no growth over recent months. Slight upturns in agriculture commodity prices over the past several months have yet to boost the Rural Mainstreet Economy. We will need to see additional increases in farm commodity prices to push the agriculture based economy back into healthy growth territory such as was experienced in 2012 and early 2013.”

- *Mainstreet Economy, March 20, 2014, Ernie Goss, Creighton University*



Nebraska

“The recovery, however, will be less robust in Nebraska. With its low unemployment rate, Nebraska has less far to bounce back during recovery. Ongoing modernization in Nebraska’s farm economy will also limit the pace of growth. Job growth will be steady but the rate of growth will be below the national average. Non-farm income will grow steadily. Farm income will drop in 2014 before stabilizing.”

- *UNL Bureau of Business Research, January, 2014*

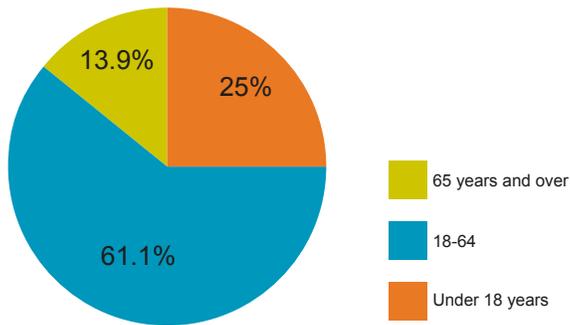
Key Economic Growth Rates

	NONFARM EMPLOYMENT	NONFARM PERSONAL INCOME (NOMINAL)	NET FARM INCOME (NOMINAL)
2013	0.9%	3.3%	-7.6%
2014	1.1%	4.1%	-7.3%
2015	1.0%	3.8%	2.0%
2016	1.1%	3.7%	0.0%

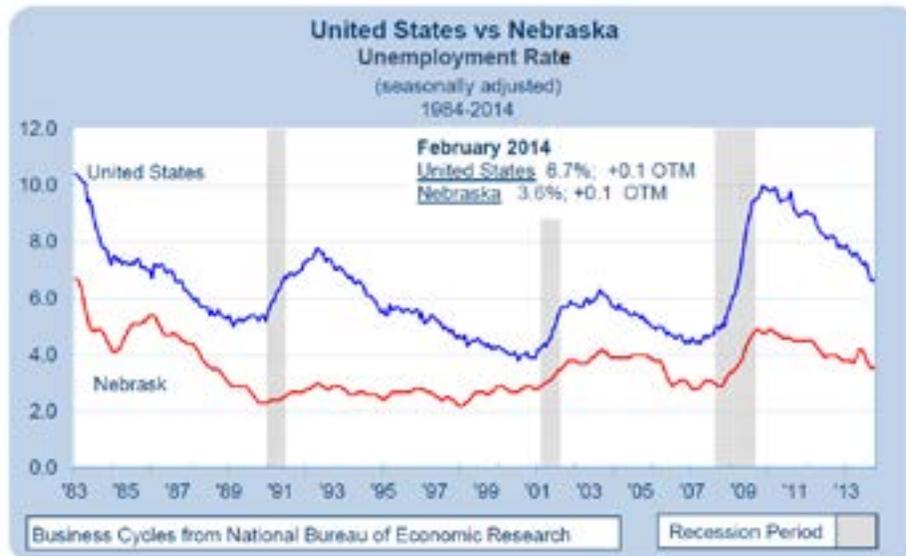
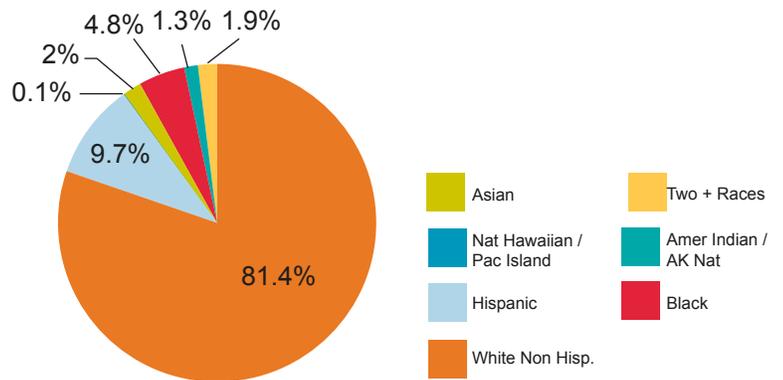
POPULATION CHARACTERISTICS OF NEBRASKA

		POPULATION ESTIMATES									
TOTAL INCREASE 2004-2013	GEOGRAPHIC AREA	2013 Estimate	2012 Estimate	2011 Estimate	April 1, 2010	July 1, 2009	July 1, 2008	July 1, 2007	July 1, 2006	July 1, 2005	July 1, 2004
		Nebraska	1,868,516	1,855,525	1,842,234	1,826,341	1,796,619	1,781,949	1,769,912	1,760,435	1,751,721
7.3%	% Increase from previous yr	0.7%	0.7%	0.9%	1.7%	0.8%	0.7%	0.5%	0.5%	0.5%	0.5%
	United States	316,128,839	313,914,040	311,587,816	308,747,508	307,006,550	304,374,846	301,579,895	298,593,212	295,753,151	293,045,739
7.9%	% Increase from previous yr	0.7%	0.7%	0.9%	0.6%	0.9%	0.9%	1.0%	1.0%	0.9%	0.9%

Age Estimates of Nebraskans, 2012



Nebraska Residents by Race, 2013



UNIVERSITY LEGISLATIVE ISSUES

The second session of the 103rd Legislature convened on January 8 and will adjourn April 17, 2014. Short sessions (60 working days) are historically spent on deficit appropriations, carryforward legislation from the previous session and introducing new legislation.

The Nebraska Economic Forecasting Advisory Board met February 28 and boosted its forecast for 2014-15 by \$99 million. The Board's forecast could provide some flexibility for the Legislature in looking at priorities. Legislative priorities include tax reform, prison reform, groundwater definitions, education and state park maintenance. Governor Heineman's priority is to reduce the tax burden on Nebraska's citizens. The Appropriations Committee presented its budget package on March 7, the 39th day of the current session, and the full Legislature must pass the budget on or before the 50th day, scheduled for March 26. The committee projected the cash reserve at \$696 million; leaving the Legislature \$91 million to divide up for other spending or for tax cuts.

UNMC priority bills include:

LB 764: Appropriate funds for pediatric cancer research at UNMC

LB 812 & LB 960: Terminate the Inheritance tax and change inheritance tax rates

LB 887: Adopt the Wellness in Nebraska Act

LB 901: Psychology internships through Behavioral Health Educational Center

LB 907: Create the Nebraska Center of Justice Research

LB 916: Eliminate practice agreements and change provisions for nurse practitioners

LB 764 transfers \$1.8 million from the Cash Reserve Fund to the General Fund on or before July 1, 2014. The bill then appropriates that \$1.8 million to the University of Nebraska Board of Regents for pediatric cancer research at the University of Nebraska Medical Center. The bill was introduced by Senator Conrad and was amended into and passed as part of LB 905e the deficit bill.

LB 812, introduced by Senator Hansen, eliminates the inheritance tax for beneficiaries of decedents that die on or after January 1, 2015. The bill remains in the Revenue Committee as of April 1.

LB 960, introduced by Senator Carlson, would adjust the inheritance tax rates for lineal decedents down from 13% to 7% and in all other cases, down from 18% to 9%. The purpose is to let those inheriting receive more proceeds from the decedents. The bill remains in the Revenue Committee as of April 1.

LB 887, introduced by Senator Campbell, would provide healthcare coverage to approximately 55,000 uninsured and underinsured newly eligible individuals, age 19 through 65, between 0 and 133% of the federal poverty



limit, who are not otherwise qualified for Medicaid, through a Medicaid expansion demonstration waiver. The bill was placed on General File on February 26 and is Senator Campbell's priority bill. This bill did not have enough votes to stop a filibuster and advance.

LB 901, introduced by Senator McGill, provides funding for five doctoral-level psychology internships in the first year with an increase to ten by the third year. The program will be coordinated by the Nebraska Medical Center Behavioral Health Education Center of Nebraska (BHECN) and the Munroe-Meyer Institute (MMI). Senator McGill's priority bill was passed on March 27 and signed by Governor Heineman on April 2.

LB 907, introduced by Senator Ashford, establishes the Nebraska Center on Justice Research to advise the Legislature on policy, evidence-based programs, mental health needs and to conduct assessments on Nebraska's justice system. A Judiciary Committee priority bill, LB 907 was passed on April 10.

LB 916, introduced by Senator Crawford, provides for the removal of the integrated practice agreement to bring the Nurse Practitioner Act in line with the future of collaborative models of healthcare. Senator Watermeier's priority bill was placed on Final Reading on April 9.

2014 FEDERAL ISSUES



Important Federal Issues for the 113th Congress

NATIONAL INSTITUTES OF HEALTH (NIH) FUNDING

NIH is the primary federal agency that funds medical research and is the source of about 88% of the total federal research funding that the University of Nebraska Medical Center (UNMC) obtains through competitive awards. Annual funding for NIH has lagged behind the rate of biomedical inflation, resulting in fewer research proposals being funded. The FY 14 omnibus bill included \$29.9 billion for NIH. In FY 15 the Administration proposes NIH receive \$30.1 billion, which will not cover the rate of biomedical inflation. UNMC recommends NIH be funded at \$32 billion in FY 15.

IMPACT OF SEQUESTRATION CONTINUES

The 2013 sequestration cuts were felt severely by the Public Health Training Centers, which is funded by Health Resource Service Administration (HRSA). The 38 centers across the nation strengthen the technical, scientific, and leadership of current and future public health professionals. Despite a successful program that helps alleviate the shortage of public health workers, sequestration cut one year from four year projects, resulting in an 83% cut from FY 13 funding to FY 14 funding. UNMC advocates for restoring funding for the Public Health Training Centers in FY 15. UNMC research felt the FY 13 sequester cuts. In the 3rd quarter of 2013 UNMC had received about 11% fewer NIH grant awards and about \$6.8 million less in funding, compared to the same point in previous years. With sequestration and the partial shutdown of the federal government, UNMC experienced a

number of delays in the review and award of competitive grant submissions. The delays forced UNMC to identify temporary limited university funding for researchers. Continuing annual sequestration cuts could reduce UNMC research funding. Just as important, it will again reduce the chances for young researchers to obtain competitive awards. In some cases it will deter them from a science research career.

INSTITUTIONAL DEVELOPMENT AWARD (IDEA) PROGRAM

More than 50% of all NIH awards go to institutions in six states. NIH's Institutional Development Award Program (IDeA) provides opportunities for Nebraska and 22 other states to develop research infrastructure to improve their ability to compete for NIH funds. In 2011, NIH reorganized its institutes and moved the IDeA program under the Institute of General Medicine. The IDeA program provides over \$15 million annually to Nebraska for research centers and developing the science workforce. Research and student opportunities work together in this unique program. The University of Nebraska and state colleges work together to give Nebraska students the chance to shape their futures in healthcare and science careers. The Administration proposed funding IDeA at its current level of \$273.3 million in FY 15. UNMC encourages the IDeA program be funded in FY 15 at \$310 million.

HEALTH PROFESSIONS TRAINING (TITLE VII) & NURSING EDUCATION (TITLE VIII)

UNMC relies on Title 7 (health professions) and Title 8 (nursing) funding from the Public Health Service Act to support educational programs that train professionals in areas where there are workforce shortages and to provide cost-effective care in underserved rural and some urban areas of Nebraska that lack sufficient health care services.

Title 7 (health professions) funds in Nebraska are used for physician assistant training, pediatric dentistry, public health training, medical assistants, dental assistants, Area Health Education Centers (AHEC) and mental and behavioral health graduate psychology programs. The Title 7 funds to Nebraska have been cut by around 40% from the \$3.8 million in FY 10 to the \$1.6 million received in FY 13. For FY 15 the Administration budget proposes cutting Title 7 by \$30.5 million to \$214.9 million. UNMC encourages Title 7 be funded at least at a level of \$245.4 million in FY 15.

Title 8 funds to Nebraska have dropped by about 40% from their FY 10 level of \$2.3 million to \$1.4 million in FY 13. Those funds support nursing education, the nurse faculty loan program and nurse anesthetist traineeships. UNMC urges Title 8 be funded at a minimum level of \$223.8 million in FY 15.



MEDICARE AND MEDICAID PROVIDER REIMBURSEMENT

The ongoing Sustainable Growth Rate (SGR) problem also affects students. The reimbursement cut to physicians will likely again be postponed to March 2015. While the repeated band aids avoid deep cuts in services to Medicare patients, it also creates a climate of uncertainty for future physicians who may be skeptical about accepting Medicare patients not knowing if they will be reimbursed fairly when they start their practice of medicine. UNMC advocates that an equitable replacement reimbursement plan be adopted this calendar year.



GRADUATE MEDICAL EDUCATION (GME)

GME has been repeatedly targeted in recent years as a source of potential cost savings for the federal government. Ironically, this has occurred when it is universally acknowledged that there is a shortage of physicians and GME is the pipeline for our nation's future physicians. UNMC opposes attempts to decrease the indirect payment of GME because it will reduce payments to The Nebraska Medical Center (TNMC) by at least \$1 million annually and more importantly will likely reduce the number of residencies available in Nebraska. TNMC/UNMC received about \$24 million in FY 13 for GME. Fewer residencies in the state means that more medical graduates will need to leave Nebraska which reduces the chance that they will return to work in Nebraska after their residency is completed. UNMC opposes reductions to GME.

SOURCES TAB

SOURCES TAB

SOURCES OF INFORMATION

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