



AGENDA
(REGULAR AND CONSENT)

HOSPITAL AUTHORITY BOARD OF TRUSTEES
AND
UNIVERSITY BOARD OF TRUSTEES

February 9, 2024

MEDICAL UNIVERSITY HOSPITAL AUTHORITY (MUHA) BOARD OF TRUSTEES
REGULAR AGENDA
February 9, 2024
101 Colcock Hall

Members of the Board of Trustees

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

Trustees Emeriti

Mr. Allan E. Stalvey Dr. Charles B. Thomas, Jr. Dr. James E. Wiseman, Jr.

- Item 1. Call to OrderDr. James Lemon
Chairman

- Item 2. Roll Call Katherine Haltiwanger
Board Secretary

- Item 3. Date of Next Regular Meeting – April 12, 2024 Katherine Haltiwanger
Board Secretary

- Item 4. Approval of Meeting MinutesDr. James Lemon
Chairman

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

- Item 5. General Informational Report of the President Dr. David Cole
President

- Item 6. Other Business..... Dr. David Cole
President

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

- Item 7. MUSC Health Status Report Dr. Patrick Cawley
Chief Executive Officer, MUSC Health

- Item 8. MUHA Consolidated Financial Report Dr. Patrick Cawley
Chief Executive Officer, MUSC Health

- Item 9. Capital Funding Requests for Approval Dr. Patrick Cawley
Chief Executive Officer, MUSC Health

- Item 10. Creation of Not-for-Profit Entity Dr. Patrick Cawley
Chief Executive Officer, MUSC Health

- Authorization to create a not-for-profit entity for the purposes of transitioning the former tRMC employee pension plan will be presented for approval.

- Item 11. Quality and Patient Safety Report..... Dr. Danielle Scheurer
Chief Quality Officer, MUSC Health

- Item 12. Governmental Affairs Report Mark Sweatman
Chief, Governmental Affairs

- Item 13. College of Medicine Update Dr. Terry Steyer
Dean, College of Medicine and VP for Medical Affairs

- Item 14. Other Committee Business..... Dr. Murrell Smith
Committee Chair

MUHA and MUSC Physical Facilities Committee: Terri Barnes, Chair

- Item 15. MUHA Sublease Renewal for Approval..... Jessica Paul
Chief Real Estate Officer, MUSC Health

- Item 16. MUSC Lease-Out for Approval..... Jessica Paul
Chief Real Estate Officer, MUSC Health

- Item 17. MUSC Establish Projects for Approval..... David Attard
Chief Facilities Officer, MUSC

- Item 18. Other Committee Business..... Terri Barnes
Committee Chair

MUHA and MUSC Audit, Compliance & Risk Committee: Tom Stephenson, Chair

- Item 19. Enterprise Risk Management Reece Humphreys
Director, Enterprise Risk Management

- Item 19.1 Internal Audit Report..... Susan Barnhart
Director, Internal Audit

- Item 20. Other Committee Business..... Tom Stephenson
Committee Chair

Other Business for the Board of Trustees

Item 21. Approval of Consent Agenda.....Dr. James Lemon
Chairman

Item 22. Executive SessionDr. James Lemon
Chairman

Upon proper motion and vote, the Board may convene a closed session pursuant to SC Code Ann. §30-4-70. Although the Board will not vote on any items discussed in closed session, the Board may return to public session to vote on items discussed.

Item 23. New Business for the Board of TrusteesDr. James Lemon
Chairman

Item 24. Report from the ChairmanDr. James Lemon
Chairman

MUSC Health - Board Package
MUHA - Medical University Hospital Authority
Interim Financial Statements
December 31, 2023

Medical University Hospital Authority (MUHA)

Statement of Revenues, Expenses and Changes in Net Assets

Consolidated

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Statements of Net Position

Consolidated

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Statements of Cash Flows

Consolidated

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Medical University Hospital Authority - Consolidated

Statement of Revenues, Expenses, and Change in Net Position

For the 6 Month Period Ending - December 31, 2023

Modified FASB Basis (in thousands)

| | Current Month | | | | Fiscal Year To Date | | | | |
|---|------------------|-------------------|-----------------|-----------------|---------------------|--------------------|------------------|-----------------|--------------------|
| | Actual | Fixed Budget | Variance | Var % | Actual | Fixed Budget | Variance | Var % | YTD Prior Year |
| Operating Revenues | | | | | | | | | |
| Net Patient Service Revenue | \$275,267 | \$266,862 | \$8,405 | 3.15% | \$1,630,658 | \$1,593,992 | \$36,666 | 2.30% | \$1,420,700 |
| DSH & Other Medicaid Directed Payments | 45,894 | 8,879 | 37,015 | 416.87% | 164,319 | 53,275 | 111,044 | 208.44% | 32,979 |
| Retail Pharmacy Revenue | 55,902 | 47,076 | 8,826 | 18.75% | 320,968 | 280,852 | 40,116 | 14.28% | 245,417 |
| Other Revenue | 16,407 | 12,612 | 3,795 | 30.09% | 106,451 | 76,171 | 30,280 | 39.75% | 40,976 |
| State Appropriations | 7,966 | 5,357 | 2,609 | 48.70% | 39,803 | 32,141 | 7,662 | 23.84% | 18,934 |
| Total Operating Revenues | \$401,435 | \$340,786 | \$60,649 | 17.80% | \$2,262,198 | \$2,036,430 | \$225,768 | 11.09% | \$1,759,006 |
| Operating Expenses | | | | | | | | | |
| Salaries Wages | \$110,801 | \$110,363 | \$438 | 0.40% | \$664,580 | \$650,798 | \$13,781 | 2.12% | \$553,075 |
| Benefits | 35,719 | 37,852 | (2,133) | -5.64% | 217,959 | 223,172 | (5,213) | -2.34% | 168,737 |
| Purchased Services | 53,984 | 47,553 | 6,430 | 13.52% | 294,239 | 285,847 | 8,392 | 2.94% | 243,141 |
| Physician Services | 17,531 | 16,474 | 1,057 | 6.41% | 102,093 | 99,189 | 2,904 | 2.93% | 80,601 |
| Pharmaceuticals | 26,029 | 20,887 | 5,142 | 24.62% | 148,628 | 124,736 | 23,892 | 19.15% | 111,952 |
| Retail Pharmaceuticals | 31,643 | 23,361 | 8,282 | 35.45% | 172,455 | 138,338 | 34,117 | 24.66% | 121,212 |
| Medical Supplies | 46,237 | 45,094 | 1,143 | 2.54% | 274,811 | 270,045 | 4,766 | 1.76% | 233,591 |
| Other Supplies | 5,345 | 5,376 | (31) | -0.57% | 37,132 | 31,969 | 5,164 | 16.15% | 26,549 |
| Utilities | 3,069 | 3,446 | (376) | -10.92% | 22,093 | 20,645 | 1,449 | 7.02% | 18,767 |
| Insurance | 909 | 1,670 | (761) | -45.57% | 8,561 | 9,821 | (1,260) | -12.83% | 8,848 |
| Leases | 1,996 | 2,610 | (614) | -23.52% | 13,827 | 15,501 | (1,674) | -10.80% | 27,475 |
| Other | 22,150 | 5,795 | 16,356 | 282.25% | 87,763 | 35,811 | 51,951 | 145.07% | 22,178 |
| Total Operating Expenses | \$355,412 | \$320,479 | \$34,933 | 10.90% | \$2,044,139 | \$1,905,870 | \$138,269 | 7.25% | \$1,616,124 |
| EBIDA | \$46,023 | \$20,307 | \$25,716 | 126.64% | \$218,059 | \$130,560 | \$87,499 | 67.02% | \$142,882 |
| Depreciation | \$14,017 | \$13,076 | \$941 | 7.20% | \$88,785 | \$78,454 | \$10,332 | 13.17% | \$57,791 |
| Interest | 3,378 | 3,538 | (160) | -4.52% | 19,836 | 21,229 | (1,394) | -6.56% | 19,897 |
| Operating Income (Loss) | \$28,628 | \$3,693 | \$24,935 | 675.26% | \$109,438 | \$30,877 | \$78,561 | 254.43% | \$65,194 |
| Operating Margin | 7.13% | 1.08% | | | 4.84% | 1.52% | | | 3.71% |
| NonOperating Revenue (Expenses) | | | | | | | | | |
| Gifts and Grants | \$86 | \$321 | (\$236) | -73.32% | \$1,451 | \$1,928 | (\$477) | -24.76% | \$16,206 |
| Noncash Pension and Other Post Employment Benefits | (16,181) | (14,503) | (\$1,678) | 11.57% | (89,639) | (87,016) | (\$2,623) | 3.01% | (87,584) |
| Investment Income | 7,243 | 917 | 6,326 | 689.72% | 17,341 | 5,503 | 11,838 | 215.14% | (807) |
| Loss on Disposal of Capital Assets | 10 | 2 | 8 | 349.25% | 389 | 14 | 376 | 2704.45% | 14 |
| Other NonOperating Revenues (Expenses) | (11) | 63 | (74) | -117.77% | 1,018 | 376 | 642 | 170.64% | (6) |
| Debt Issuance Costs | - | - | - | 0.00% | - | - | - | 0.00% | (20) |
| Total NonOperating Revenues (Expenses) | (\$8,853) | (\$13,199) | \$4,346 | -32.93% | (\$69,440) | (\$79,195) | \$9,755 | -12.32% | (\$72,198) |
| Income (Loss) before NonOperating Payments to MUSC Affiliates | \$19,775 | (\$9,506) | \$29,281 | -308.02% | \$39,998 | (\$48,318) | \$88,316 | -182.78% | (\$7,004) |
| Non Operating Payments to MUSC Affiliates | - | - | - | 0.00% | - | - | - | 0.00% | - |
| Change in Net Position | \$19,775 | (\$9,506) | \$29,281 | -308.02% | \$39,998 | (\$48,318) | \$88,316 | -182.78% | (\$7,004) |
| Total Margin | 4.93% | -2.79% | | | 1.77% | -2.37% | | | -0.40% |
| Operating Cash Flow Margin | 12.45% | 5.30% | | | 9.66% | 5.75% | | | 7.87% |

Unaudited - For Management Use

Medical University Hospital Authority – Consolidated

Notes to the Interim Financial Statements

Statement of Revenues, Expenses and Changes in Net Assets: YTD December 31, 2023 (Unaudited)

Actuals Compared to Fixed Budget

Revenue Explanation: December year-to-date net patient service revenues were favorable to budget by 2.3%, or \$36.7M. Inpatient surgeries were unfavorable to budget by 10.2%, and outpatient surgeries were unfavorable to budget by 11.0%. Transplant procedures were unfavorable to budget by 26.6%. Case Mix Index was favorable \$7.6M and Payor Mix shift was favorable \$10.8M.

Changes in the Medicaid Reimbursement Program - FY24 the State of South Carolina implemented a directed payment program for Medicaid patients who participate with managed care organizations. The plan was approved by CMS and requires an annual approval. The program is based on average commercial rates for inpatient services. The focus of the program (HAWQ) is healthcare, access, workforce and quality. The current disproportionate share program will remain available for use with lower levels of funding. In October 2023, MUHA received approximately \$120M related to the first round of HAWQ. Revenues recognized year-to-date for HAWQ funding total \$137.7M.

Retail pharmacy revenues were favorable by \$40.1M due to continued growth and expansion into other markets.

Other Revenues were \$30.3M favorable to budget due to 340B revenues and quality achievement payments.

State Appropriations were \$7.7M favorable to budget due to Sickle Cell and Behavioral Health funding.

Expense Explanation: Salaries and wages were unfavorable to budget by \$13.8M. Benefits were favorable to budget \$5.2M.

Purchased Services were unfavorable to budget \$8.4M due to dietary, maintenance and contractual services.

Physician Services were unfavorable to budget \$2.9M due to timing of expenses associated with College of Medicine.

Pharmaceuticals, not explained by acuity and volume, were unfavorable to budget by \$14.4M due to increased productivity in 340B programs, Ambulatory and Radiologic departments. Retail pharmacy revenues, net of expenses, were \$6.0M favorable to budget.

Medical and Other Supplies, not explained by acuity and volume, were \$8.5M unfavorable to budget due to increased purchases in central supply locations in Ashley River Tower and Main hospitals in Charleston.

Utilities, insurance, leases, and other expenses were unfavorable to budget by \$0.5M.

DSH & Other Medicaid Directed Tax Payments were unfavorable to budget by \$48.2M.

Statements of Net Position

Medical University Hospital Authority - Consolidated

Statements of Net Position (in thousands)

December 31, 2023 and June 30, 2023

| Assets and Deferred Outflows | As of 12/31/2023 (unaudited) | As of 06/30/2023 (audited) |
|--|---------------------------------|-------------------------------|
| Current Assets: | | |
| Cash and Cash Equivalents | \$ 342,894 | \$ 226,907 |
| Cash Restricted for Capital Projects and Major Programs | 98,318 | 65,454 |
| Cash Restricted for COVID-19 Stimulus Funding | 686 | 686 |
| Investments Unrestricted | 323,217 | 314,581 |
| Patient Accounts Receivable, Net of Allowance for Uncollectible Accounts of approximately \$462,900 and \$379,500 | 476,377 | 482,149 |
| Due from Related Parties | 3,012 | - |
| Due from Third-Party Payors | 32,139 | 41,805 |
| Due from Joint Ventures and Partnerships | 1,304 | - |
| Other Current Assets | 338,763 | 270,987 |
| Total Current Assets | \$ 1,616,710 | \$ 1,402,569 |
| Investments Held by Trustees Mortgage Reserve Fund | \$ 82,796 | \$ 77,066 |
| Investments in Joint Ventures and Partnerships | 62,816 | 32,816 |
| Other Non-Current Assets | 4,827 | 6,205 |
| Capital Assets, Net | 1,203,732 | 1,234,773 |
| Total Assets | \$ 2,970,881 | \$ 2,753,429 |
| Deferred Outflows | \$ 884,121 | \$ 886,798 |
| Total Assets and Deferred Outflows | \$ 3,855,001 | \$ 3,640,227 |
| Liabilities, Deferred Inflows and Net Position | | |
| Current Liabilities: | | |
| Current Installments of Long-Term Debt | \$ 36,453 | \$ 69,570 |
| Current Installments of Capital Lease Obligations | 24,175 | 42,801 |
| Current Installments of Notes Payable | 7,041 | 7,816 |
| Due to Related Parties | - | 7,854 |
| Due to Joint Ventures and Partnerships | - | 791 |
| Accounts Payable | 242,316 | 249,132 |
| Accrued Payroll, Withholdings and Benefits | 173,636 | 140,098 |
| Other Accrued Expenses | 66,455 | 30,172 |
| Unearned Revenue | 99,418 | - |
| Total Current Liabilities | \$ 649,494 | \$ 548,234 |
| Long-Term Debt | \$ 656,655 | \$ 650,310 |
| Capital Lease Obligations | 220,741 | 240,943 |
| Notes Payable | 15,743 | 18,823 |
| Other Liabilities | 29,774 | 24,718 |
| RMC Net Pension Liability | 26,752 | 28,322 |
| Total MUHA Liabilities | \$ 1,599,159 | \$ 1,511,350 |
| Net Pension Liability (obligation of the state of SC) | 1,301,984 | 1,257,093 |
| Net OPEB Liability (obligation of the state of SC) | 1,089,412 | 1,045,764 |
| Total Liabilities | \$ 3,990,555 | \$ 3,814,207 |
| Deferred Inflows | \$ 446,377 | \$ 446,937 |
| Total Liabilities and Deferred Inflows | \$ 4,436,932 | \$ 4,261,144 |
| Net Position: | | |
| Net Investment in Capital Assets | \$ 250,280 | \$ 192,995 |
| Restricted: | | |
| Under Indenture Agreements | 82,796 | 77,066 |
| Expendable for: | | |
| Capital Projects | 70,098 | 57,172 |
| Major Programs | 45,282 | 37,925 |
| COVID-19 Stimulus Funding | 686 | 686 |
| Unrestricted (deficit) | (1,031,074) | (986,762) |
| Total Net Position | \$ (581,932) | \$ (620,918) |
| Total Liabilities, Deferred Inflows and Net Position | \$ 3,855,001 | \$ 3,640,227 |

Unaudited - For Management Use

MEDICAL UNIVERSITY HOSPITAL AUTHORITY – Consolidated

Balance Sheet: As of 12/31/2023 (Unaudited) and 06/30/2023 (Audited) - (in thousands)

Cash, Cash Equivalents and Investments

Unrestricted cash and cash equivalents increased by \$116.0M from June 30, 2023. Significant FY2024 events impacting cash include receipt of \$120M Health Access, Workforce, and Quality (HAWQ) Medicaid payment, \$33M payoff of CSC building debt, and \$30M Tidelands capital call.

| The Authority's cash balance is as follows: | 12/31/2023 Balance | 6/30/2023 Balance |
|--|-----------------------|----------------------|
| Insured (FDIC & SIPC) | \$ 2,000 | \$ 2,000 |
| Uninsured, uncollateralized by securities held by the pledging institution or by its trust dept or agent in other than MUHA's name | \$ 451,825 | \$ 323,839 |
| Total | <u>\$ 453,825</u> | <u>\$ 325,839</u> |
| Carrying Amount (cash and cash equivalents) | \$ 342,894 | \$ 226,907 |
| Restricted (cash and cash equivalents) | 99,004 | 66,140 |
| Total | <u>\$ 441,898</u> | <u>\$ 281,168</u> |

The Authority has unrestricted available cash of \$666.1M as detailed below

| | | |
|----------------------------|-------------------|-------------------|
| Cash and cash equivalents | \$ 342,894 | \$ 226,907 |
| Investments - unrestricted | 323,217 | 314,581 |
| Total | <u>\$ 666,111</u> | <u>\$ 541,488</u> |

| Fixed Income Securities: | 12/31/2023 Balance | 6/30/2023 Balance |
|--|-----------------------|----------------------|
| Fannie Mae | \$ 28,096 | \$ 14,980 |
| Federal Home Loan Bank | 206,265 | 144,943 |
| Federal Farm Credit Bank | 114,716 | 113,711 |
| Dreyfus Treasury Securities | 830 | 663 |
| Federal Home Loan Mortgage Corporation | - | 33,567 |
| Intl Bk Recon & Development | - | 9,801 |
| Federal National Mortgage Association | 53,228 | 52,209 |
| FED Farm CRD Discount NT | - | 18,716 |
| | <u>\$ 403,136</u> | <u>\$ 388,590</u> |

| Investment Income comprises the following: | 12/31/2023 Balance | 6/30/2023 Balance |
|---|-----------------------|----------------------|
| Dividend and interest income | \$ 11,596 | \$ 11,421 |
| Realized and unrealized loss on investments | 5,745 | 2,210 |
| | <u>\$ 17,341</u> | <u>\$ 13,631</u> |

MEDICAL UNIVERSITY HOSPITAL AUTHORITY – Consolidated

Balance Sheet: As of 12/31/2023 (Unaudited) and 06/30/2023 (Audited) - (in thousands)

Net Patient Accounts Receivable

Compared to December year-to-date fiscal year 2023, Net Patient Service Revenue increased by \$210.0M, or 14.8%. Gross patient charges increased by \$1.2B, or 18.2%, for the comparison period due to increases in patient activity and comprehensive rate. Net revenue related to the Health Access, Workforce, and Quality (HAWQ) and Disproportionate Share Hospital (DSH) programs administered by the State Department of Health and Human Services increased for the comparison period to \$164.3M from \$33.0M.

Payor class percentages changed between Medicaid, and Medically indigent/self-pay/other; all other payor classes remained relatively stable as shown in the table below.

| | 12/31/2023 Balance | 6/30/2023 Balance |
|-----------------------------------|-----------------------|----------------------|
| Blue Cross | 28% | 29% |
| Medicare | 35% | 34% |
| Medicaid | 12% | 16% |
| Private insurance/managed care | 15% | 15% |
| Medically Indigent/self-pay/other | 10% | 6% |
| | <u>100%</u> | <u>100%</u> |

Other Current Assets

The composition of other current assets is as follows:

| | 12/31/2023 Balance | 6/30/2023 Balance |
|---------------------------------|-----------------------|----------------------|
| Inventory | \$ 110,131 | \$ 104,414 |
| Other Prepayments | 115,140 | 83,509 |
| Non-Patient Accounts Receivable | 110,165 | 82,818 |
| Lease Receivable | 3,405 | 297 |
| Accrued Interest | 11 | 11 |
| Unapplied Cash - Grant Payments | (88) | (62) |
| | <u>\$ 338,763</u> | <u>\$ 270,987</u> |

Other Non-Current Assets

The composition of other non-current assets is as follows:

| | 12/31/2023 Balance | 6/30/2023 Balance |
|---------------------------------------|-----------------------|----------------------|
| Maintenance Contracts | \$ 3,598 | \$ 4,954 |
| Dept of Veterans Affairs Prepaid Rent | 1,228 | 1,251 |
| | <u>\$ 4,827</u> | <u>\$ 6,205</u> |

MEDICAL UNIVERSITY HOSPITAL AUTHORITY – Consolidated

Balance Sheet: As of 12/31/2023 (Unaudited) and 06/30/2023 (Audited) - (in thousands)

Third Party Payors

Medicare and Medicaid owes MUHA \$32.1M, a decrease of \$9.7M due to prior year Medicaid cost settlements.

| | 12/31/2023 Balance | 6/30/2023 Balance |
|---------------------------------------|-----------------------|----------------------|
| Medicare/Medicaid Accounts Receivable | \$ 32,139 | \$ 41,805 |

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

Joint Ventures & Partnerships

| | 12/31/2023 Balance | 6/30/2023 Balance |
|-------------------------------|-----------------------|----------------------|
| Edgewater Surgery Center | \$ 2,707 | \$ 1,599 |
| MSV Health Inc (MHI) | 241 | 241 |
| Mainsail Health Partners | 1,179 | 914 |
| MUSC Strategic Ventures (MSV) | (2,801) | (3,563) |
| | \$ 1,304 | \$ (791) |

Deferred Outflows

| | 12/31/2023 Balance | 6/30/2023 Balance |
|--------------------------------|-----------------------|----------------------|
| Pension | \$ 329,775 | \$ 331,504 |
| Other Post-Employment Benefits | 541,469 | 541,469 |
| Refunding bond amortization | 12,877 | 13,826 |
| | \$ 884,121 | \$ 886,798 |

Accounts Payable

Accounts Payable decreased by \$6.8M from June 30, 2023.

| | 12/31/2023 Balance | 6/30/2023 Balance |
|------------------|-----------------------|----------------------|
| Accounts Payable | \$ 242,316 | \$ 249,132 |

Other Accrued Expenses

The composition of other accrued expenses is as follows:

| | 12/31/2023 Balance | 6/30/2023 Balance |
|----------------------------|-----------------------|----------------------|
| Accrued HAWQ | \$ 45,161 | \$ - |
| Other | 12,879 | 18,946 |
| Advance from third party | 5,333 | 8,000 |
| Accrued Interest | 2,616 | 2,604 |
| Amounts due to contractors | 465 | 623 |
| | \$ 66,455 | \$ 30,172 |

MEDICAL UNIVERSITY HOSPITAL AUTHORITY – Consolidated

Balance Sheet: As of 12/31/2023 (Unaudited) and 06/30/2023 (Audited) - (in thousands)

Unearned Revenue

Unearned revenue increased by \$99.4M from June 30, 2023 due to Health Access, Workforce, and Quality (HAWQ), Disproportionate Share Hospital (DSH), Telemedicine, Statewide Health, and Health Solutions revenue.

| | 12/31/2023 Balance | 6/30/2023 Balance |
|--|-----------------------|----------------------|
| DSH & Other Medicaid Directed Payments | \$ 74,943 | \$ - |
| Statewide/Behavioral Health Innovation | 11,175 | - |
| Telemedicine | 6,225 | - |
| MUSC Health Solutions | 4,500 | - |
| Cost Settlement | 2,480 | - |
| Other | 95 | - |
| | <u>\$ 99,418</u> | <u>\$ -</u> |

Long Term Debt

As of December 31, 2023, Current Installments of Long-Term Debt relates to HUD debt for Ashley River Tower (ART), Shawn Jenkins Children’s Hospital (SJCH) and the Central Energy Plant (CEP). Current Installments of Notes Payable relate to the Sabin Street Energy Plant. A table of outstanding balances by major issuance is listed below:

| Project (mo/yr issued) | 12/31/2023 Balance | 6/30/2023 Balance |
|--|-----------------------|----------------------|
| SJCH (06/2019) | \$ 278,971 | \$ 283,511 |
| Capital Leases (various - see below) | 244,916 | 263,669 |
| ART (12/2012) | 194,536 | 203,348 |
| CHS Acquisition (03/2019) | 112,663 | 114,565 |
| Lifepoint Acquisition (07/2021) | 76,317 | 77,399 |
| Nexton and Consolidated Service Center (10/2018) | - | 33,695 |
| CEP (12/2013) | 24,796 | 26,156 |
| Imaging Equipment (01/2019) | 18,585 | 18,585 |
| Edgewater (03/2019) | 5,827 | 5,925 |
| 1 Poston Road (10/2021) | 2,475 | - |
| Patient Monitors (07/2016) | 1,724 | 3,412 |
| | <u>\$ 960,808</u> | <u>\$ 1,030,263</u> |

MEDICAL UNIVERSITY HOSPITAL AUTHORITY – Consolidated

Balance Sheet: As of 12/31/2023 (Unaudited) and 06/30/2023 (Audited) - (in thousands)

As of December 31, 2023, capital leases relate to various pieces of equipment and properties. A table of outstanding balances by equipment description is listed below:

| Project (month/year issued) | 12/31/2023 Balance | 6/30/2023 Balance |
|---|-----------------------|----------------------|
| Charleston Property Lease (various) | \$ 94,696 | \$ 97,988 |
| Charleston Equipment Lease (various) | 48,459 | 54,497 |
| Summey Medical Pavilion (04/2019) | 40,725 | 40,931 |
| RHN & Midlands Equipment Lease (various) | 26,889 | 32,426 |
| RHN & Midlands Property Lease (various) | 14,634 | 17,952 |
| Subscription-based Technology Agreement - ERP (10/22) | 9,890 | 9,890 |
| Medical Malls (02/2019) | 8,986 | 9,151 |
| Cardiovascular Equipment (03/2020) | 577 | 686 |
| Computer software (09/2019) | 37 | 65 |
| Ultrasound (03/2019) | 21 | 84 |
| | \$ 244,916 | \$ 263,669 |

Annual debt service costs for FY2023 totaled \$113M. A table of debt service by major issuance is listed below, as well as by equipment description as it relates to capital leases:

| Project (month/year issued) | Current Installments Principal |
|--------------------------------------|-----------------------------------|
| Capital Leases (various - see below) | \$ 24,175 |
| ART (12/2012) | 18,017 |
| SJCH (06/2019) | 9,329 |
| CHS Acquisition (03/2019) | 3,890 |
| Imaging Equipment (01/2019) | 3,581 |
| CEP (12/2013) | 2,800 |
| CEP (12/2013) | 1,724 |
| Lifepoint Acquisition (07/2021) | 2,216 |
| 1 Poston Road (10/2021) | 1,736 |
| Edgewater (03/2019) | 201 |
| | \$ 67,670 |

MEDICAL UNIVERSITY HOSPITAL AUTHORITY – Consolidated

Balance Sheet: As of 12/31/2023 (Unaudited) and 06/30/2023 (Audited) - (in thousands)

| Project (month/year issued) | Current Installments Principal |
|---|-----------------------------------|
| Charleston Equipment Lease (various) | \$ 8,365 |
| Charleston Property Lease (various) | 6,014 |
| RHN & Midlands Equipment Lease (various) | 3,102 |
| RHN & Midlands Property Lease (various) | 2,500 |
| Subscription-based Technology Agreement - ERP (10/22) | 2,253 |
| Summey Medical Pavilion (04/2019) | 1,263 |
| Medical Malls (02/2019) | 396 |
| Cardiovascular Equipment (03/2020) | 225 |
| Computer Software (09/2019) | 37 |
| Ultrasound (03/2019) | 21 |
| | \$ 24,175 |

Pension and Other Post Employment Benefit (OPEB) Liabilities

As of December 31, 2023, the net pension liability, inclusive of RMC, increased by \$43.3M from June 30, 2023.

As of December 31, 2023, the net other post-employment benefit liability increased by \$43.6M from June 30, 2023.

Deferred Inflows

Deferred inflows decreased by \$0.6M compared to June 30, 2023. The following breakdown is below:

| | 12/31/2023 Balance | 6/30/2023 Balance |
|--------------------------------|-----------------------|----------------------|
| Pension | \$ 11,631 | \$ 11,619 |
| Other Post-Employment Benefits | 428,068 | 428,068 |
| Equipment | 3,422 | 3,992 |
| Property Leases | 3,257 | 3,259 |
| | \$ 446,377 | \$ 446,937 |

Statements of Cash Flows

MEDICAL UNIVERSITY HOSPITAL AUTHORITY - Consolidated

Statements of Cash Flows - (in thousands)

December 31, 2023 and June 30, 2023

| | As of 12/31/2023 | As of 6/30/2023 |
|--|-------------------------|------------------------|
| | (unaudited) | (audited) |
| Cash flows from operating activities: | | |
| Receipts received from patients and third-party payors | \$ 2,131,382 | \$ 3,369,024 |
| Other cash receipts | 180,697 | 84,291 |
| Payments to suppliers and employees | (2,049,475) | (3,418,388) |
| State appropriations | 37,786 | 59,723 |
| Net cash provided (used) by operating activities | <u>\$ 300,390</u> | <u>\$ 94,651</u> |
| Cash flows from noncapital financing activities: | | |
| Proceeds from CARES Funding | \$ - | \$ 45,720 |
| Proceeds from noncapital grants and gifts | 1,451 | 5,339 |
| Payments of revenue anticipation notes | - | (80,000) |
| Nonoperating revenues | 1,018 | (5,926) |
| Net cash provided (used) by noncapital financing activities | <u>\$ 2,469</u> | <u>\$ (34,866)</u> |
| Cash flows from capital and related financing activities: | | |
| Capital expenditures | \$ (46,668) | \$ (127,040) |
| Capital appropriations | 15,000 | - |
| Capital grants and gifts received | - | 14,862 |
| Proceeds from disposal of capital assets | 389 | 45,417 |
| Payments of principal on long-term debt | (55,344) | (89,954) |
| Proceeds from financing debt | - | 4,271 |
| Payments of bond issuance cost | - | (20) |
| Payments of mortgage insurance premium | - | (805) |
| Payments on lease obligations | (21,264) | (33,909) |
| Proceeds on equipment replacement obligations | - | 803 |
| Interest payments | (19,096) | (42,299) |
| Net cash provided (used) by capital and related financing activities | <u>\$ (126,982)</u> | <u>\$ (228,673)</u> |
| Cash flows from investing activities: | | |
| Proceeds from sale and maturity of investments | \$ 113,500 | \$ 179,000 |
| Investment income received | 12,468 | 15,267 |
| Purchases of investments | (123,005) | (213,410) |
| Contributions to joint ventures and partnerships | (30,000) | - |
| Net cash provided (used) by investing activities | <u>\$ (27,037)</u> | <u>\$ (19,143)</u> |
| Net increase (decrease) in cash and cash equivalents | 148,840 | (188,033) |
| Cash and cash equivalents at beginning of year | 296,765 | 484,798 |
| Cash and cash equivalents at end of year | <u>\$ 445,605</u> | <u>\$ 296,765</u> |

**CAPITAL REQUESTS
FEBRUARY 8, 2024**

MUSC HEALTH CHARLESTON

| | | |
|----------|---|-------------------|
| Item #1 | ART Replace Filtrace chillers for AHU 6 | 1,000,000 |
| Item #2 | Sonosite Ultrasounds - Phase 1 Fleet Replacement/New Requests | 400,000 |
| Item #3 | Echo Machine Replacement | 500,000 |
| Item #4 | Pediatric Burn Gym, SJCH | 500,000 |
| Item #5 | ART BMT Expansion (Philanthropy Equipment) | 675,000 |
| Item #6 | SJCH Rehab Bed & Gym Addition (State Grant) | 900,000 |
| Item #7 | SJCH Optimization Projects (State Grant) | 2,000,000 |
| Item #8 | TCU Med Psych Unit (State Grant) | 1,570,000 |
| Item #9 | UH Med Surg Unit 8D/7B upfit | 250,000 |
| Item #10 | Radiology Upgrade UH 3rd Floor CT (Currently shell space) | 1,200,000 |
| Item #11 | ART IR CT Radiology (Construction) | 725,000 |
| Item #12 | Path & Lab Automated Machine | 300,000 |
| Item #13 | H&V Heart Lung Machines | 636,000 |
| | SUBTOTAL \$ | 10,656,000 |

MUSC HEALTH PEE DEE

| | | |
|----------|----------------------------------|------------------|
| Item #14 | Inpatient Rehab Gym Construction | 1,100,000 |
| | SUBTOTAL \$ | 1,100,000 |

MUSC HEALTH CATAWBA

| | | |
|----------|---------------------------|------------------|
| Item #15 | Lancaster SPD Enhancement | 1,000,000 |
| Item #16 | Anesthesia Machines | \$ 466,000 |
| | SUBTOTAL \$ | 1,466,000 |

MUSC HEALTH MIDLANDS

| | | |
|----------|---|------------------|
| Item #17 | Defibrillators | 1,100,000 |
| Item #18 | Anesthesia Machine Replacement | 600,000 |
| Item #19 | SCDC Inpatient Unit and Endoscopy Suite | 4,400,000 |
| Item #20 | Hybrid OR Expanded Scope | 1,000,000 |
| | SUBTOTAL \$ | 7,100,000 |

GRAND TOTAL \$ 20,322,000

**FACILITIES
HOSPITAL AUTHORITY - CHARLESTON
SUBLEASE RENEWAL
FOR APPROVAL**

FEBRUARY 8, 2024

DESCRIPTION OF LEASE RENEWAL: This sublease renewal is for 28,047 square feet of clinical and office space located at 135 Cannon Street, 2nd & 4th Floors, Charleston. The purpose of this lease renewal is to continue to provide space for Women's Health Services, Hospital Marketing and Centering for Pregnancy. The rent per square foot is \$24.15 (rounded). The total monthly rental payment will be \$56,441.49, resulting in an annual lease amount of \$677,297.88. Rent amount will remain constant throughout the lease term.

This property is owned by the MUSC Foundation and leased entirely by the Medical University of South Carolina which subleases a portion of space to the Medical University Hospital Authority.

NEW LEASE AGREEMENT _____
RENEWAL LEASE AGREEMENT X

LANDLORD: Medical University of South Carolina

LANDLORD CONTACT: Rick Anderson

TENANT NAME AND CONTACT: Medical University Hospital Authority, Patrick Cawley

SOURCE OF FUNDS: Women's Health, Marketing, Centering Pregnancy

SUBLEASE TERMS:

TERM: Five (5) years: [4/1/2024 – 3/31/2029]

TOTAL AMOUNT PER SQUARE FOOT: \$24.15

TOTAL ANNUALIZED LEASE AMOUNT: \$677,297.87

TOTAL AMOUNT OF LEASE TERM: \$3,386,489.40

EXTENDED TERM(S): One (1) term, five (5) years

OPERATING COSTS:

FULL SERVICE _____

NET X

**FACILITIES
ACADEMIC
LEASEOUT TENANT IMPROVEMENTS
FOR APPROVAL**

FEBRUARY 8, 2024

DESCRIPTION OF TENANT IMPROVEMENTS: The Medical University of South Carolina entered into a Ground Lease for 81 Gadsden Street with The Ronald McDonald House Charities of Charleston, South Carolina (RMH) at the Tenant beginning on May 3, 1982, and ending August 31, 2074. In 2017 the agreement was amended to include permissions for tenant improvements which would allow RMH to expand their existing facility to increase family support for patients of the Charleston Medical District. The purpose of this expansion will be to continue to serve the families of critically ill children. RMH currently turns away 550 family requests annually.

These improvements must meet all local and State requirements for approvals. MUSC is in support of the RMH initiative to expand their footprint on the Charleston Peninsula and will work with the Department of Administration for project approval.

Improvement Details

- Size- 58,000 square feet
- 53 bedrooms - all with their own dedicated bathrooms.
- Classroom, separate play areas, laundry facilities, kitchen on each floor
- Major storm and earthquake sustaining capabilities, generators, and mechanical systems for flooding scenarios
- Parking spaces 22 for staff, volunteers, donors
- Construction plans finalized and environment testing to be done in 2024
- Construction estimated to begin early 2025

It is requested that the MUSC Board of Trustees approve this expansion initiative of the Ronald McDonald House.

FACILITIES
ACADEMIC/RESEARCH
ESTABLISH PROJECT
FOR APPROVAL
February 2024

PROJECT TITLE: Wellness Center Building Chiller

PROJECT NUMBER: TBD

TOTAL ESTIMATED BUDGET: \$250,000

SOURCE(S) OF FUNDS: Operations Budget

SCOPE OF WORK: A 200-ton Air Cooled Chiller supports the Wellness Center primary cooling system. This unit has exceeded its useful life due to the environment conditions that has accelerated the deterioration of the unit. This Air Cooled Chiller supports 95% of the Wellness Center facility. Currently, we are operating at 45% capacity and will not be able to support the facility this coming summer season in this current operational state. This request is to replace the existing Air Cooled Chiller with a compatible unit with environmental protection coating to extend the life of the new unit.

The building will be fully occupied for the duration of the project to ensure continued care for patients, staff, and visitors. All work will be performed during normal working hours.

JUSTIFICATION: The current Air Cooled Chiller will not be able to support normal operation of the Wellness Center Facility during the upcoming 2024 summer temperatures. This chiller supports 95% of the total building environment.

FACILITIES
ACADEMIC/RESEARCH
ESTABLISH PROJECT
FOR APPROVAL
DATE: February 2024

PROJECT TITLE: HCC 3rd Floor Lobby

PROJECT NUMBER: TBD

TOTAL ESTIMATED BUDGET: \$488,981

SOURCE(S) OF FUNDS: Foundation and Department Funds

SCOPE OF WORK: A preliminary design and budget have been established for the renovation and modernization of 2,575 square feet of the 3rd floor lobby for mammography services at the MUSC Hollings Cancer Center. The project will create a seamless transition from the new Phase 1 Clinic; update lobby patient waiting furniture, graphics, and orientation of space; and reorient patient reception for the north and south corridors to improve functionality and line of sight to waiting areas.

The building will be fully occupied for the duration of the project to ensure continued care for patients, requiring the majority of the work to be performed outside normal working hours.

JUSTIFICATION: The lobby is currently outdated and does not reflect the appropriate professional level of care provided at this institution. This renovation will improve the operational safety and efficiency of the building by creating a seamless transition from the new Phase 1 clinic while improving the patient experience throughout the care continuum.

**MEDICAL UNIVERSITY OF SOUTH CAROLINA (MUSC) BOARD OF TRUSTEES
REGULAR AGENDA
February 9, 2024**

Members of the Board of Trustees

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

Trustees Emeriti

Mr. Allan E. Stalvey Dr. Charles B. Thomas, Jr. Dr. James E. Wiseman, Jr.

- Item 1. Call to OrderDr. James Lemon
Chairman

- Item 2. Roll CallKatherine Haltiwanger
Board Secretary

- Item 3. Date of Next Regular Meeting – April 12, 2024Katherine Haltiwanger
Board Secretary

- Item 4. Approval of Meeting MinutesDr. James Lemon
Chairman

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

- Item 5. Other Business..... Dr. David Cole
President

Research and Institutional Advancement Committee: Dr. Melvin Brown, Interim Chair

- Item 6. Election of Committee ChairDr. James Lemon
Chairman

- Item 7. Office of Research ReportDr. Lori McMahon
Vice President for Research

- Item 8. MUSC Foundation Update..... Stuart Ames
Chief Executive Officer, MUSC Foundation

Item 9. Other Committee Business.....Dr. Melvin Brown
Interim Committee Chair

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

Item 10. Provost Report.....Dr. Lisa Saladin
Executive Vice President for Academic Affairs and Provost

Item 11. 2024 Commencement Speaker & Honorary Degree Recipient for ApprovalDr. Lisa Saladin
Executive Vice President for Academic Affairs and Provost

Item 12. Other Committee Business..... Barbara Johnson-Williams
Committee Chair

Finance and Administration Committee: Jim Battle, Chair

Item 13. MUSC Financial Report..... Patrick Wamsley
Chief Financial Officer, MUSC

Item 14. MUSC Physicians Financial ReportFred Borelli
Chief Financial Officer, MUSC Physicians

Item 15. Other Committee Business..... Jim Battle
Committee Chair

Other Business for the Board of Trustees

Item 16. Board Self-Assessment SurveyDr. James Lemon
Chairman

Item 17. Approval of Consent Agenda.....Dr. James Lemon
Chairman

Item 18. Executive SessionDr. James Lemon
Chairman

Upon proper motion and vote, the Board may convene a closed session pursuant to SC Code Ann. §30-4-70. Although the Board will not vote on any items discussed in closed session, the Board may return to public session to vote on items discussed.

Item 19. New Business for the Board of TrusteesDr. James Lemon
Chairman

Item 20. Report from the ChairmanDr. James Lemon
Chairman

THE MEDICAL UNIVERSITY OF SOUTH CAROLINA
Monthly Financial Reports
Table of Contents
For the Six (6) Month Period Ended December 31, 2023

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| University Budgeted Funds Comparison to Budget | 2 |
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| Summary of Current Debt Obligations and Analysis of Available Bonded Debt Capacity | 5 |
| Statement of Revenues, Expenses and Changes in Net Position For Affiliated Organizations | 6 |

The Medical University of South Carolina and Affiliated Organizations
Statement of Net Position
As of December 31, 2023

| | University | Area Health Education Consortium | CHS Development Company |
|--|-------------------------|--|-------------------------------|
| Assets & Deferred Outflows | | | |
| Cash and Cash Equivalents | \$ 379,452,463 | \$ 6,309,932 | \$ - |
| Cash and Cash Equivalents - Restricted | 43,762,149 | - | 778,012 |
| State Appropriation Receivable | 113,680,357 | 10,160,834 | - |
| Student Tuition and Fees Receivable | 40,918,482 | - | - |
| Student Loan Receivable | 11,194,647 | - | - |
| Grants and Contracts Receivable | 89,907,607 | 901,044 | - |
| Capital Improvement Bond Proceeds Receivable | - | - | - |
| Lease Receivable | 12,977,557 | - | 2,131,619 |
| Other Receivables | 1,392,590 | - | - |
| Investments | - | - | 1,867,961 |
| Prepaid Items | 4,960,825 | - | - |
| Capital Assets, net of Accumulated Depreciation | 446,361,698 | - | - |
| Due from Hospital Authority | 26,838,651 | - | - |
| Due from Other Funds | 124,682,506 | - | - |
| Bond Issue Costs | - | - | - |
| Derivative Instruments Fair Value / Deferred Outflows | - | - | - |
| Deferred loss on Debt Refinancing | - | - | 12,742 |
| Deferred Outflows-Pensions | 70,438,929 | - | - |
| Deferred Outflows-OPEB | 136,019,172 | - | - |
| Other Assets | - | - | - |
| Total Assets & Deferred Outflows | \$ 1,502,587,633 | \$ 17,371,810 | \$ 4,790,334 |
| Liabilities & Deferred Inflows | | | |
| Accounts Payable | \$ 12,963,610 | \$ 12,185 | \$ - |
| Accrued Payroll and Other Payroll Liabilities | 29,191,010 | - | - |
| Accrued Compensated Absences | 33,164,333 | 208,238 | - |
| Deferred Revenue | 131,018,097 | 6,669,927 | - |
| Retainages Payable | 2,072,496 | - | - |
| Long-Term Debt | 87,022,460 | - | 3,685,000 |
| Lease Liability | 79,167,797 | - | - |
| SBITA Liability | 4,444,936 | - | - |
| Interest Payable | 650,583 | - | 41,456 |
| Deposits Held for Others | 3,097,314 | - | - |
| Due to Hospital Authority | - | - | - |
| Due to Other Funds | 25,727,225 | - | - |
| Federal Loan Program Liability | 11,363,527 | - | - |
| Derivative Instruments Fair Value / Deferred Inflows | - | - | - |
| Net Pension Liability | 562,757,654 | - | - |
| Net OPEB Liability | 389,572,399 | - | - |
| Deferred Inflows-Leases | 12,976,570 | - | - |
| Deferred Inflows-Pensions | (29,788,434) | - | - |
| Deferred Inflows-OPEB | 294,186,165 | - | - |
| Other Liabilities | 24,436,363 | - | - |
| Total Liabilities & Deferred Inflows | \$ 1,674,024,105 | \$ 6,890,350 | \$ 3,726,456 |
| Net Position | (171,436,472) | 10,481,460 | 1,063,878 |
| Total Liabilities & Deferred Inflows and Net Position | \$ 1,502,587,633 | \$ 17,371,810 | \$ 4,790,334 |

The Medical University of South Carolina
 Budgeted Funds Comparison to Budget (Expenses Classified by Category)
 For the period ending December 31, 2023

| | Budget | Prorated Budget (Note) | Actual | Variance | |
|--|-----------------------|---------------------------|-----------------------|-----------------------|----------|
| Revenues | | | | | |
| Federal Grants & Contracts | \$ 164,661,333 | \$ 82,330,667 | \$ 92,034,739 | \$ 9,704,072 | F |
| Federal Grants Indirect Cost Recoveries | 41,945,395 | 20,972,698 | 21,800,793 | 828,095 | F |
| State Grants & Contracts | 13,720,460 | 6,860,230 | 6,297,169 | (563,061) | U |
| Private Grants & Contracts | 34,711,984 | 17,355,992 | 21,227,840 | 3,871,848 | F |
| Private Grants Indirect Cost Recoveries | 5,412,922 | 2,706,461 | 4,204,932 | 1,498,471 | F |
| Total Grants & Contracts | 260,452,094 | 130,226,048 | 145,565,473 | 15,339,425 | F |
| State Appropriations | 119,743,190 | 59,871,595 | 58,502,486 | (1,369,109) | U |
| Tuition and Fees | 110,813,870 | 53,590,233 | 54,279,337 | 689,104 | F |
| Pass-Through Revenues | 90,728,707 | 45,364,354 | 27,651,857 | (17,712,497) | U |
| Gifts | 26,539,132 | 13,269,566 | 9,891,717 | (3,377,849) | U |
| Transfers from (to) MUSC Physicians | 108,407,539 | 54,203,770 | 53,214,368 | (989,402) | U |
| Sales and Services of Educational Departments | 16,478,145 | 8,239,073 | 10,087,249 | 1,848,176 | F |
| Sales and Services of Auxiliary Enterprises | 17,029,102 | 8,514,551 | 7,143,029 | (1,371,522) | U |
| Interest and Investment Income | 2,734 | 1,367 | 491,974 | 490,607 | F |
| Endowment Income | 3,512,583 | 1,756,292 | 938,990 | (817,302) | U |
| Miscellaneous | 21,367,933 | 10,683,967 | 7,406,552 | (3,277,415) | U |
| Miscellaneous - Residents | 8,000,000 | 4,000,000 | 4,000,000 | - | F |
| Authority Revenue | 97,297,041 | 48,648,521 | 58,760,539 | 10,112,018 | F |
| Authority Revenue - Residents | 80,594,740 | 40,297,370 | 40,297,370 | - | F |
| Intra-Institutional Sales | 35,881,640 | 17,940,820 | 16,183,259 | (1,757,561) | U |
| Total Other | 736,396,356 | 366,381,479 | 348,848,727 | (17,532,752) | U |
| Total Revenues | 996,848,450 | 496,607,527 | 494,414,200 | (2,193,327) | U |
| Expenditures | | | | | |
| Salaries | \$ 383,700,295 | \$ 191,850,148 | \$ 191,004,715 | \$ 845,433 | F |
| Miscellaneous Personnel Expenditures | 4,412,854 | 2,206,427 | 1,849,118 | 357,309 | F |
| Fringe Benefits | 155,286,068 | 77,643,034 | 82,309,427 | (4,666,393) | U |
| Total Personnel | \$ 543,399,217 | \$ 271,699,609 | \$ 275,163,260 | \$ (3,463,651) | U |
| Contractual Services | \$ 186,498,979 | \$ 93,249,490 | \$ 91,309,340 | \$ 1,940,150 | F |
| Pass-through Expenditures | 90,728,707 | 45,364,354 | 27,651,857 | 17,712,497 | F |
| Supplies | 67,149,771 | 33,574,886 | 32,590,592 | 984,294 | F |
| Fixed Charges | 52,502,351 | 26,251,176 | 26,669,118 | (417,942) | U |
| Equipment | 10,853,692 | 5,426,846 | - | 5,426,846 | F |
| Travel | 5,062,259 | 2,531,130 | 3,227,951 | (696,821) | U |
| Trainee / Scholarships | 24,988,679 | 12,494,340 | 11,943,200 | 551,140 | F |
| Other Expenses | 7,092,110 | 3,546,055 | 10,206,990 | (6,660,935) | U |
| Debt Service | 9,142,267 | 4,571,134 | 4,571,134 | - | F |
| Total Other | \$ 454,018,815 | \$ 227,009,411 | \$ 208,170,182 | \$ 18,839,229 | F |
| Total Expenditures | \$ 997,418,032 | \$ 498,709,020 | \$ 483,333,442 | \$ 15,375,578 | F |
| Other Additions (Deductions) | | | | | |
| Transfers from(to) Plant Funds | (22,849,494) | (11,424,747) | (11,962,247) | (537,500) | U |
| Other Transfers | (11,926) | (5,963) | 10,296 | 16,259 | F |
| Prior Year Fund Balance Usage | 31,353,166 | 15,676,583 | 15,118,091 | (558,492) | U |
| Total Other Additions (Deductions) | \$ 8,491,746 | \$ 4,245,873 | \$ 3,166,140 | \$ (1,079,733) | U |
| NET INCREASE (DECREASE) in Fund Balance | \$ 7,922,164 | \$ 2,144,380 | \$ 14,246,898 | \$ 12,102,518 | F |
| Non-Budgeted Items | | | | | |
| Net Unfunded Pension Expense | | | 1,097,948 | | |
| Net Unfunded OPEB Expense | | | (4,593,839) | | |
| Depreciation | | | (18,314,397) | | |
| Endowment Gains/Losses | | | (1,151,688) | | |
| Gain (Loss) on Disposition of Property | | | 63,082 | | |
| Other Non-Budgeted Items | | | 7,966,937 | | |
| SRECNP Bottom Line | | | (685,059) | | |

THE MEDICAL UNIVERSITY OF SOUTH CAROLINA
NOTES TO THE FINANCIAL STATEMENTS
December 31, 2023

Note 1. *Basis of Presentation*

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

Note 2. *State Appropriations*

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

Note 3. *Cash and Cash Equivalents - Restricted*

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

Note 4. *Capital Assets, Net of Accumulated Depreciation*

The University's capital assets, net of accumulated depreciation consists of the following:

| | |
|---|-----------------------|
| Construction in progress | \$ 39,985,327 |
| Land/Bldgs/Equipment/Accumulated depreciation | 406,376,371 |
| Capital Assets, Net of Accumulated Depreciation | <u>\$ 446,361,698</u> |

Note 5. *Construction in Progress*

The itemized construction-in-progress will be updated in future months.

Note 6. *Deferred Revenue*

The University's deferred revenue consists of the following:

| | |
|--------------------------|-----------------------|
| State appropriations | \$ 68,789,986 |
| Grants and contracts | 19,545,846 |
| Student tuition and fees | 40,160,494 |
| Other | <u>2,521,771</u> |
| Total Deferred Revenue | <u>\$ 131,018,097</u> |

THE MEDICAL UNIVERSITY OF SOUTH CAROLINA
NOTES TO THE FINANCIAL STATEMENTS
December 31, 2023

Note 7. *Long Term Liabilities and Leases*

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

| | |
|--|-----------------------|
| Lease Liability | \$ 79,167,797 |
| Higher Ed Refunded Revenue bond payable | 16,255,000 |
| State Institution bonds payable | 38,945,000 |
| Energy Performance Note Payable | 25,842,903 |
| Premium on State Institution bonds payable | 5,393,692 |
| Premium on Refunding Revenue Bonds | <u>585,865</u> |
| Total Long Term Liabilities and Leases | <u>\$ 166,190,257</u> |

Note 8. *Summary of Net Position*

The University implemented GASB Statement No. 68, *Accounting and Financial Reporting for Pensions* in fiscal year 2015 and GASB Statement No. 75, *Accounting and Financial Reporting for Post Employment Benefits Other Than Pensions (OPEB)* in fiscal year 2018. These statements require participating employers to report their proportionate share of the plans' net pension liability and OPEB liabilities, pension and OPEB expense and deferred outflows and inflows. In fiscal year 2023, excluding the GASB 68 and GASB 75 impact, the University's unrestricted net position increased \$17.9 million for a total of \$218.1 million. In fiscal year 2022, excluding the GASB 68 and GASB 75 impact, the University's net position increased \$39.6 million for a total of \$200.2 million. In fiscal year 2021, excluding the GASB 68 and GASB 75 impact, the University's unrestricted net position increased \$2.3 million for at total of \$160.6 million. In fiscal year 2020, excluding the GASB 68 and GASB 75 impact, the University's unrestricted net position decreased \$7.1 million for a total of \$158.3 million.

| | Per annual CAFR | | | |
|--|-------------------------|-------------------------|-------------------------|-------------------------|
| | <u>FY2023</u> | <u>FY2022</u> | <u>FY2021</u> | <u>FY2020</u> |
| Net investment in capital assets | \$ 272,606,591 | \$ 264,898,753 | \$ 256,273,784 | \$ 273,745,547 |
| Restricted | | | | |
| Nonexpendable | 96,695,036 | 94,737,549 | 93,450,804 | 92,884,333 |
| Expendable | 248,944,820 | 204,093,027 | 172,064,021 | 119,736,905 |
| Unrestricted (exclusive of GASB 68 and 75 liabilities) | 218,124,473 | 200,247,718 | 160,633,515 | 158,323,021 |
| Unrestricted (including GASB 68 and 75 liabilities) | <u>(1,001,836,676)</u> | <u>(961,299,272)</u> | <u>(908,652,076)</u> | <u>(868,396,874)</u> |
| Total net position | <u>\$ (165,465,756)</u> | <u>\$ (197,322,225)</u> | <u>\$ (226,229,952)</u> | <u>\$ (223,707,068)</u> |

Medical University of South Carolina
Summary of Current Debt Obligations

(\$\$ in thousands)

| | Original Issue | Purpose | Outstanding & Authorized as of 31-Dec-2023 |
|---|-------------------|---|--|
| State Institution Bonds (SIB) | | | |
| SIB 2012B refunding | 12,645 | Refunding SIB 2001C, 2003D, & 2003J | 835 |
| SIB 2016D | 30,095 | Refunding SIB 2005A & convert BAN | 17,165 |
| SIB 2021D | <u>23,415</u> | Refunding SIB 2011D & to fund construction of capital projects | <u>20,945</u> |
| | <u>\$ 66,155</u> | | |
| Current SIB Debt Authorized and Issued | | | <u>\$ 38,945</u> |
| Notes Payable - JEDA | <u>\$ 32,985</u> | Construction of College Health Health Profession facilities | <u>\$ 3,685</u> |
| Refunding Revenue Bonds, Series 2017 | | | |
| 2017 | <u>\$ 25,115</u> | Refunding of Higher Ed Revenue Bonds | <u>\$ 16,255</u> |
| Energy Performance Note Payable | | | |
| EPNP 02-27-19 | <u>\$ 30,000</u> | Energy Savings | <u>\$ 25,843</u> |

The Medical University of South Carolina and Affiliated Organizations
Statement of Revenues, Expenses and Changes in Net Position
For the Six (6) Month Period Ending December 31, 2023

| | <u>University</u> | <u>Area Health Education Consortium</u> | <u>CHS Development Company</u> |
|---|----------------------|---|--|
| Operating Revenues | | | |
| Student Tuition and Fees | \$ 54,279,337 | \$ - | \$ - |
| Federal Grants and Contracts | 113,835,532 | 817,726 | - |
| State Grants and Contracts | 6,297,169 | - | - |
| Local Government Grants and Contracts | 43,914 | - | - |
| Nongovernmental Grants and Contracts | 25,388,858 | 70,997 | - |
| Sales and Services to Hospital Authority | 91,105,300 | - | - |
| Sales and Services of Educational and Other Activities | 18,024,752 | - | - |
| Sales and Services of Auxiliary Enterprises | 7,143,029 | - | - |
| Interest Income | - | - | 57,745 |
| Other Operating Revenues | 11,406,552 | 28,562 | - |
| Total Operating Revenues | 327,524,443 | 917,285 | 57,745 |
| Operating Expenses | | | |
| Compensation and Employee Benefits | 275,163,260 | 1,187,183 | - |
| Pension Benefits | (252,404) | - | - |
| OPEB Expense | 4,631,478 | - | - |
| Services and Supplies | 140,252,181 | 1,204,226 | - |
| Utilities | 9,498,995 | - | - |
| Scholarships and Fellowships | 11,943,200 | - | - |
| Refunds to Grantors | - | - | - |
| Interest Expense | - | - | 41,456 |
| Depreciation and Amortization | 18,389,183 | - | 8,453 |
| Total Operating Expenses | 459,625,893 | 2,391,409 | 49,909 |
| Operating Income (Loss) | (132,101,450) | (1,474,124) | 7,836 |
| Nonoperating Revenues (Expenses) | | | |
| State Appropriations | 58,502,486 | 6,669,927 | - |
| State Appropriations - MUHA | 19,714,354 | - | - |
| Gifts and Grants Received | 10,774,900 | - | - |
| Investment Income | 491,974 | - | - |
| Interest Expense | (1,633,847) | - | - |
| Gain (Loss) on Disposal of Capital Assets | (149,395) | - | - |
| Transfers From (To) Other State Agencies | - | - | - |
| Other Nonoperating Revenues (Expenses), net | (10,287,500) | - | - |
| Net Nonoperating Revenues (Expenses) | 77,412,972 | 6,669,927 | - |
| Income (Loss) Before Other Revenues, Expenses, Gains, Losses and Transfers | (54,688,478) | 5,195,803 | 7,836 |
| Capital Appropriations | - | - | - |
| Capital Grants and Gifts | - | - | - |
| Additions to Permanent Endowments | 778,755 | - | - |
| Transfers From (To) MUSC Physicians (UMA) | 53,214,368 | - | - |
| Transfers From (To) AHEC | - | - | - |
| Transfers From (To) CHS Development | 10,296 | - | (10,296) |
| Transfers From (To) Facilities Corporation | - | - | - |
| Increase (Decrease) In Net Position | \$ (685,059) | \$ 5,195,803 | \$ (2,460) |

MUSC Physicians and Carolina Family Care

**Interim Financial Statements
For the six month period ending
December 31, 2023**

| | |
|---|------------|
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Unaudited – For Management Use

MUSC Physicians and Carolina Family Care, Inc.
(A Component Unit of MUSC)
Statement of Revenues, Expenses and Changes in Net Position
For the 6 Month Period Ending - December 31, 2023

| | MUSC Physicians | | | | Carolina Family Care, Inc. | | Total | | |
|--|----------------------------|--------------------|------------------------|-----------------------|--|-------------------|---------------------|-----------------------|---------------------|
| | College of Medicine Actual | Corporate Actual | Ambulatory Care Actual | Other Actual | Carolina Family Care Primary Care Actual | Other Actual | Total Actual | Total Fixed Budget | Total Variance |
| Operating revenues: | | | | | | | | | |
| Net clinical service revenue | 244,903,265 | - | - | 3,647,214 | 14,022,325 | 536,360 | 263,109,164 | 256,542,034 | 6,567,130 |
| Supplemental medicaid | 24,052,550 | - | - | - | 1,600,000 | - | 25,652,550 | 25,634,943 | 17,607 |
| Other operating revenue | 4,932,927 | 1,775,019 | 3,554 | 1,763,609 | 2,237,126 | 1,296,820 | 12,009,053 | 13,296,214 | (1,287,161) |
| Intercompany transfers | (69,047,328) | 17,575,461 | 54,369,733 | (2,897,866) | - | - | - | - | - |
| Purchased services revenue | 66,310,088 | 3,797,052 | 1,723,231 | 6,975,559 | 1,152,719 | 2,418,457 | 82,377,106 | 83,009,428 | (632,322) |
| Grant salary reimb. from MUSC | 8,667,298 | - | - | 123,973 | - | - | 8,791,271 | 7,276,807 | 1,514,465 |
| Total operating revenues | 279,818,799 | 23,147,532 | 56,096,518 | 9,612,488 | 19,012,170 | 4,251,637 | 391,939,144 | 385,759,425 | 6,179,719 |
| Operating expenses: | | | | | | | | | |
| Salaries, wages and benefits | 207,915,936 | 16,767,271 | 17,536,880 | 8,813,488 | 11,952,782 | 2,703,127 | 265,689,484 | 267,955,138 | 2,265,654 |
| MUSCP reimb. for education and research | 53,735,496 | - | - | 63,275 | - | - | 53,798,770 | 53,798,770 | - |
| Supplies | 651,437 | 220,711 | 25,773,642 | 247,221 | 1,958,056 | 17,368 | 28,868,435 | 27,575,082 | (1,293,352) |
| Contractual services | 4,506,355 | 5,384,441 | 1,484,576 | 509,501 | 648,430 | 365,440 | 12,898,744 | 13,425,320 | 526,576 |
| Purchased services | - | 5,437,368 | 4,613,175 | 2,166,498 | 873,588 | 148,566 | 13,239,196 | 14,512,991 | 1,273,796 |
| Facility cost and equipment | 69,068 | 588,076 | 4,642,298 | (1,415,433) | 1,139,363 | (609,681) | 4,413,692 | 5,354,833 | 941,141 |
| Professional liability insurance | 4,343,708 | 9,863 | 1,787 | 7,242 | 172,481 | 3,918 | 4,538,999 | 4,683,464 | 144,465 |
| Depreciation | - | 66,753 | 2,258,200 | 2,680,774 | 123,384 | 701,012 | 5,830,123 | 5,359,482 | (470,642) |
| Meals and travel | 1,423,582 | 83,036 | 24,408 | 422,672 | 13,196 | 21,560 | 1,988,454 | 2,403,771 | 415,317 |
| Other expenses | 53,667 | 7,641 | 9,795 | 31,150 | 9,588 | 32,397 | 144,238 | 871,612 | 727,374 |
| Faculty and staff recruitment | 529,837 | 75,021 | 12,714 | 151,878 | 22,016 | 170,894 | 962,360 | 902,133 | (60,227) |
| Donations - transfer to MUSCF | 200,000 | - | - | 405,000 | - | - | 605,000 | 405,000 | (200,000) |
| MUSCP corporate shared services | - | - | - | - | 1,257,187 | 1,807 | 1,258,994 | 1,289,155 | 30,161 |
| Total operating expenses | 273,429,087 | 28,640,182 | 56,357,476 | 14,083,263 | 18,170,072 | 3,556,409 | 394,236,489 | 398,536,752 | 4,300,263 |
| Operating income (loss) | 6,389,712 | (5,492,650) | (260,958) | (4,470,775) | 842,098 | 695,228 | (2,297,344) | (12,777,327) | 10,479,982 |
| Operating margin | 2.3% | (23.7%) | (0.5%) | (46.5%) | 4.4% | 16.4% | (0.6%) | (3.3%) | |
| Nonoperating revenue (expenses): | | | | | | | | | |
| Donations - transfer to MUSCF | - | - | - | (6,787,720) | - | - | (6,787,720) | - | (6,787,720) |
| Investment income | 288,307 | 5,602,767 | - | 3,841,516 | 123 | - | 9,732,713 | 3,515,749 | 6,216,964 |
| Interest expense | - | (208,352) | (8,965) | (1,512,946) | - | (32,120) | (1,762,383) | (1,619,626) | (142,756) |
| Rental income | - | 98,235 | 269,923 | 3,245,291 | 32,913 | 128 | 3,646,490 | 3,638,082 | 8,408 |
| Rent expense | - | - | - | (771,459) | - | - | (771,459) | (771,459) | - |
| Total Nonoperating revenue (expenses) | 288,307 | 5,492,650 | 260,958 | (1,985,318) | 33,036 | (31,992) | 4,057,641 | 4,762,745 | (705,104) |
| Change in net position | \$ 6,678,019 | - | \$ - | \$ (6,456,093) | \$ 875,135 | \$ 663,236 | \$ 1,760,297 | \$ (8,014,581) | \$ 9,774,878 |
| Net margin | 2.4% | 0.0% | 0.0% | (67.2%) | 4.6% | 15.6% | 0.4% | (2.1%) | |

Notes:

MUSC Physicians Other includes other Colleges (Nursing CoHP, Dental), Presidents Fund, Rental Properties, Investment Account and Funded Leadership Carolina Family Care, Inc. Other includes MHA Population Health, CFC Community Physicians, and Funded Leadership

Medical University of South Carolina Physicians

Executive Summary

For the six-month period ending December 31, 2023

Charges:

- **YTD: 3% over budget and 6% over last year**
- Month of December: 4% over budget and 5% over last year
- Top clinical departments (% over budget): Infusion, Emergency Medicine, Ophthalmology, Path & Lab, Otolaryngology

Payments:

- **YTD: 4% over budget and 9% over last year**
- Month of December: 2% over budget and 5% over last year
- Top clinical departments (% over budget): Infusion, Emergency Medicine, Ophthalmology, Otolaryngology, Orthopedics
- 35.7 days in AR as of December 2023 and 35.6 days in AR as of June 2023
- \$87 per wRVU as of December 2023 and \$85 per wRVU as of June 2023

Income/(Loss):

- **(\$3.8M) Operating Loss; (1%) Operating Margin**
 - \$10.1M favorable variance to fixed budget
 - \$6.5M net clinical service revenue
 - \$3.6M favorable other patient revenue: \$1.8M Surgery PSA (unbudgeted) and \$1M Citadel (bolus payment)
 - \$2.9M favorable Epic revenue
 - (\$1.5M) other operating revenue
 - (\$1.0M) College of Medicine under budget: (\$0.8M) Pediatrics and (\$0.7M) Psychiatry
 - \$1.5M grant salary reimbursement
 - \$1.3M salaries, wages and benefits
 - \$3.1M College of Medicine under budget: \$1.2M Anesthesiology, \$0.9M Otolaryngology and \$0.8M Psychiatry
 - Over budget departments: (\$0.6M) funded leadership, (\$0.5M) Corporate and (\$0.5M) Hollings Cancer Center
 - \$2.2M favorable various expenses
 - \$1M purchased services: \$1.1M Enterprise Funding (Helix and Notable) under budget - timing
 - \$0.9M facility cost and equipment: Parkshore \$0.3M - due to timing of HVAC replacement, North Area \$0.2M - due to timing of equipment lease payments, West Campus \$0.1M - due to timing of Phase II opening
 - (\$0.9M) supplies: Infusion (\$2.0M) over budget (higher acuity cases), Ambulatory Care \$1.0M under budget (West Campus Phase II opening and Women Center's timing of purchases)
 - \$0.7M other expenses
- **\$4M Nonoperating Income**
 - (\$0.7M) unfavorable variance to fixed budget
 - (\$6.8M) President's Fund transfer to MUSC Foundation – unbudgeted
 - \$4.5M unrealized/realized gain on investments – unbudgeted
- **\$0.2M Net Income; 0% Net Margin**
 - \$9.4M favorable variance to fixed budget

Balance Sheet:

- Days cash on hand: 146 days
- Net Position: \$439.8M; increased by \$0.2M compared to June 2023

MUSC Physicians

(A Component Unit of MUSC)

Statement of Revenues, Expenses and Changes in Net Position
For the 6 Month Period Ending - December 31, 2023

| | Fiscal Year To Date | | | | Prior Year To Date |
|---|---------------------|----------------|--------------|--------|--------------------|
| | Actual | Fixed Budget | Variance | Var % | Actual |
| Operating revenues: | | | | | |
| Net clinical service revenue | \$ 248,550,479 | \$ 242,042,651 | \$ 6,507,828 | 3% | \$ 227,330,767 |
| Supplemental medicaid | 24,052,550 | 24,034,943 | 17,607 | 0% | 23,362,428 |
| Other operating revenue | 8,475,108 | 10,005,367 | (1,530,259) | (15%) | 6,587,292 |
| Purchased services revenue | 78,805,930 | 78,727,132 | 78,798 | 0% | 56,255,730 |
| Grant salary reimb. from MUSC | 8,791,271 | 7,276,807 | 1,514,465 | 21% | 8,408,577 |
| Total operating revenues | 368,675,337 | 362,086,899 | 6,588,438 | 2% | 321,944,795 |
| Operating expenses: | | | | | |
| Salaries, wages and benefits | 251,033,575 | 252,360,188 | 1,326,613 | 1% | 224,911,216 |
| MUSCP reimb. for education and research | 53,798,770 | 53,798,770 | - | 0% | 51,019,824 |
| Supplies | 26,893,011 | 25,978,824 | (914,187) | (4%) | 24,279,498 |
| Contractual services | 11,884,874 | 12,486,446 | 601,573 | 5% | 7,937,105 |
| Purchased services | 12,217,041 | 13,239,725 | 1,022,684 | 8% | - |
| Facility cost and equipment | 3,884,010 | 4,751,660 | 867,650 | 18% | 5,535,394 |
| Professional liability insurance | 4,362,600 | 4,476,133 | 113,533 | 3% | 3,985,892 |
| Depreciation | 5,005,727 | 4,529,066 | (476,661) | (11%) | 2,863,362 |
| Meals and travel | 1,953,698 | 2,379,404 | 425,706 | 18% | 1,464,025 |
| Other expenses | 102,253 | 812,455 | 710,202 | 87% | 1,039,740 |
| Faculty and staff recruitment | 769,450 | 850,828 | 81,378 | 10% | 559,681 |
| Donations - transfer to MUSCF | 605,000 | 405,000 | (200,000) | (49%) | - |
| Total operating expenses | 372,510,008 | 376,068,499 | 3,558,491 | 1% | 323,595,737 |
| Operating income (loss) | (3,834,670) | (13,981,600) | 10,146,929 | 73% | (1,650,942) |
| Operating margin | (1.0%) | (3.9%) | | | (0.5%) |
| Nonoperating revenue (expenses): | | | | | |
| Donations - transfer to MUSCF | (6,787,720) | - | (6,787,720) | (100%) | - |
| Investment income | 9,732,590 | 3,515,343 | 6,217,247 | 177% | 6,261,790 |
| Interest expense | (1,730,263) | (1,577,296) | (152,967) | (10%) | (1,587,375) |
| Rental income | 3,613,448 | 3,604,977 | 8,472 | 0% | 3,702,393 |
| Rent expense | (771,459) | (771,459) | - | 0% | (741,016) |
| Total nonoperating revenue (expenses) | 4,056,596 | 4,771,564 | (714,968) | (15%) | 7,635,791 |
| Change in net position | \$ 221,926 | \$ (9,210,035) | \$ 9,431,961 | 102% | \$ 5,984,848 |
| Net margin | 0.1% | (2.5%) | | | 1.9% |

Notes:

Operating revenue:

-Net clinical service revenue: \$3.6M favorable other patient revenue: \$1.8M Surgery (unbudgeted) and \$1M Citadel (bolus payment);
\$2.9M favorable Epic revenue

-Other operating revenue: (\$1.0M) College of Medicine under budget: (\$0.8M) Pediatrics and (\$0.7M) Psychiatry

Operating expense:

-Salary, wages and benefits: \$3.1M College of Medicine under budget: \$1.2M Anesthesiology, \$0.9M Otolaryngology, \$0.8M Psychiatry;
offset by over budget departments: (\$0.6M) funded leadership, (\$0.5M) Corporate, (\$0.5M) Hollings Cancer Center

-Supplies: Infusion (\$2.0M) over budget - due to higher acuity cases, Ambulatory Care \$1.0M under budget - due to West Campus Phase II opening
and Women Center's timing of purchases

-Purchased Services: \$1.1M Enterprise Funding (Helix and Notable) under budget - due to timing

-Facility cost and equipment under budget: Parkshore \$0.3M - due to timing of HVAC replacement, North Area \$0.2M - due to timing of
equipment lease payments, West Campus \$0.1M - due to timing of Phase II opening

-Donations - transfer to MUSCF: Transfer from College of Medicine - Department of Medicine (unbudgeted)

Nonoperating revenue:

-Donations - transfer to MUSCF: Transfer from President's Fund

-Investment income: unbudgeted \$4.5M unrealized/realized gain on investments and (\$0.3M) loss on swap

MUSC Physicians

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

Statement of Net Position

ASSETS

| | <u>December 31, 2023</u> | <u>June 30, 2023</u> | <u>Variance</u> |
|--|--------------------------|-----------------------|------------------------|
| Current Assets: | | | |
| Cash and investments | \$ 301,506,300 | \$ 315,574,142 | \$ (14,067,843) |
| Receivables: | | | |
| Patient services - net of allowances for contractual adjustments and bad debt of \$196,984,965 | 57,025,305 | 55,810,725 | 1,214,580 |
| Due from the Medical University of South Carolina | 5,093,191 | 33,661,147 | (28,567,956) |
| Due from the Medical University Hospital Authority | 17,569,278 | 26,996,199 | (9,426,920) |
| Due from the Medical University Foundation | 159,831 | 1,265,181 | (1,105,350) |
| Due from Carolina Family Care, Inc. | 4,324,364 | 3,411,551 | 912,813 |
| Note receivable from CFC/MHP | 756,003 | 756,003 | - |
| Investment / Advancements consolidated CFC | 32,270,000 | 32,270,000 | - |
| Due from Comprehensive Psychiatric Services | 4,525 | (15,111) | 19,635 |
| Due from MCP | 724,245 | 592,744 | 131,501 |
| Due from MUSC Health Alliance | 743,803 | 1,065,645 | (321,843) |
| Lease receivable | 2,388,737 | 2,388,737 | - |
| Other current assets | 29,934,465 | 4,817,209 | 25,117,255 |
| Total Current Assets | <u>452,500,045</u> | <u>478,594,172</u> | <u>(26,094,128)</u> |
| Noncurrent assets: | | | |
| Capital assets: | | | |
| Land | 17,034,537 | 17,034,537 | - |
| Buildings | 52,199,050 | 52,199,050 | - |
| Furniture and equipment | 33,862,148 | 32,930,389 | 931,759 |
| Leasehold improvements | 72,030,975 | 66,601,815 | 5,429,160 |
| Rental buildings under capital lease | 13,989,600 | 13,989,600 | - |
| Computer software | 14,774,652 | 14,774,652 | - |
| Right of use assets | 22,144,945 | 22,144,945 | - |
| Subscription assets | 8,156,645 | 8,156,645 | - |
| Accumulated depreciation and amortization | (116,355,333) | (110,578,146) | (5,777,187) |
| Lease receivable | 2,800,228 | 3,991,734 | (1,191,506) |
| Other assets | 100,000 | 100,000 | - |
| Investment in partnerships | 2,620,387 | 3,353,397 | (733,009) |
| Fair value of derivative instruments | 911,784 | 1,259,931 | (348,146) |
| Total noncurrent assets | <u>124,269,617</u> | <u>125,958,547</u> | <u>(1,688,929)</u> |
| Total Assets | <u>576,769,663</u> | <u>604,552,719</u> | <u>(27,783,057)</u> |
| Deferred outflows of resources: | | | |
| Deferred refunding cost | 4,515,886 | 5,169,336 | (653,451) |
| Deferred outflows-OPEB | 581,138 | 581,138 | - |
| Total deferred outflows | <u>5,097,024</u> | <u>5,750,474</u> | <u>(653,451)</u> |
| Total Assets and Deferred Outflows | <u>\$ 581,866,686</u> | <u>\$ 610,303,194</u> | <u>\$ (28,436,507)</u> |

Notes:

Current assets:

-Cash and Investments: FY23 YE incentive payments of (\$34.8M) and FY24 incentive payments of (\$13.7M);

FY23 DHHS funds and FY23 Q3 STP received of \$23.6M; realized/unrealized gain on investments of \$4.5M

-ST Other current assets: accrual of FY24 STP payments \$24M; FY24 COM income accruals \$3M; reversal of year end accruals (\$1M)

Noncurrent assets:

-Leasehold Improvements: includes projects: West Campus Phase II (FY24 balance increase of \$4.3M) and East Cooper Otolaryngology

MUSC Physicians

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

Statement of Net Position

LIABILITIES

| | <u>December 31, 2023</u> | <u>June 30, 2023</u> | <u>Variance</u> |
|--|--------------------------|-----------------------|----------------------|
| Current Liabilities: | | | |
| Accounts payable | \$ 968,393 | \$ 5,555,514 | \$ 4,587,122 |
| Accrued interest payable | 219,713 | 201,826 | (17,886) |
| Accrued payroll | 19,933,052 | 40,490,601 | 20,557,549 |
| Accrued payroll withholdings | 2,599,127 | 140,716 | (2,458,410) |
| Accrued pension contribution | 5,265,636 | 1,499,373 | (3,766,262) |
| Unapplied cash - patient services | 10,522,034 | 9,701,187 | (820,847) |
| Other accrued liabilities | 9,599,967 | 7,086,548 | (2,513,419) |
| Due to Medical University of South Carolina | 365,503 | 2,916,376 | 2,550,873 |
| Due to Medical University Hospital Authority | 15,414,265 | 19,812,241 | 4,397,976 |
| Accrued compensated absences | 6,103,852 | 6,103,852 | - |
| Lease liability | 3,020,911 | 3,020,911 | - |
| Subscription liability | 641,227 | 641,227 | - |
| Bonds payable | 4,195,000 | 4,195,000 | - |
| Total current liabilities | <u>78,848,677</u> | <u>101,365,372</u> | <u>22,516,696</u> |
| Noncurrent Liabilities: | | | |
| Lease liability | 9,727,127 | 11,238,101 | 1,510,973 |
| Subscription liability | 2,908,164 | 2,908,164 | - |
| Bonds payable | 44,405,000 | 47,820,000 | 3,415,000 |
| Deferred inflows-leases | 5,040,116 | 6,255,881 | 1,215,765 |
| Deferred inflows-OPEB | 633,852 | 633,852 | - |
| Net OPEB liability | 473,427 | 473,427 | - |
| Total noncurrent liabilities | <u>63,187,687</u> | <u>69,329,425</u> | <u>6,141,738</u> |
| Total liabilities | <u>142,036,364</u> | <u>170,694,797</u> | <u>28,658,434</u> |
| NET POSITION | | | |
| Invested in capital assets, net of related debt | 73,658,007 | 73,658,007 | - |
| Unrestricted (deficit) | 366,172,315 | 365,950,390 | (221,926) |
| Total Net Position | <u>439,830,322</u> | <u>439,608,397</u> | <u>(221,926)</u> |
| Total Liabilities, Inflows & Net Position | <u>\$ 581,866,686</u> | <u>\$ 610,303,194</u> | <u>\$ 28,436,507</u> |

Notes:

Current liabilities:

-Accrued payroll: FY24 balance includes Y incentive (salary + fringe) accruals of (\$16.2M); reversal of \$34.8M FY23 year-end accruals

-Rutledge Tower JEDA Bond Balance is approximately \$46.2M

**Carolina Family Care, Inc.
Including MUSC Health Partners**

Executive Summary

For the six-month period ending December 31, 2023

Charges-CFC:

- **YTD: 2% over budget and 9% over last year**

Payment-CFC:

- **YTD: 2% over budget and 13% over last year**
- 16.5 Days in AR as of December 2023 and 23.5 Days in AR as of June 2023
- \$112 per wRVU as of December 2023 and \$106 per wRVU as of June 2023

Income/(Loss):

- **\$1.5M Operating Income; 6.6% Operating Margin**
 - \$0.3M favorable variance to fixed budget
 - \$0.2M favorable other operating revenue
 - \$913K MHA Upstream ACO PMPM payments over budget; (\$643K) CFC Primary Care under budget - (\$289K) timing of new clinics opening, (\$185K) new provider support, (\$178K) PCMH
 - (\$0.7M) unfavorable purchased services revenue
 - (\$329K) Modern Minds, (\$206K) MCP funded leadership, and (\$96K) Hampton Regional Medical Center (funded clinics; revenue offset by expenses)
 - \$0.9M favorable salaries
 - \$604K funded clinics: \$366K MCP funded leadership under budget, \$328K Modern Minds under budget, and (\$128K) Midlands MUHA over budget (unbudgeted)
 - \$485K CFC Primary Care under budget (faculty vacancies; timing of new clinics)
- **\$1.5M Net Income; 6.6% Net Margin**
 - \$0.3M favorable variance to fixed budget

Balance Sheet:

- Current ratio: 0.8
- Net Position: \$2.1M; increased by \$1.5M compared to June 2023

Carolina Family Care, Inc.
(Including MUSC Health Partners)
Statement of Revenues, Expenses and Changes in Net Position
For the 6 Month Period Ending - December 31, 2023

| | Fiscal Year To Date | | | | Prior Year To Date |
|---|---------------------|---------------|------------|--------|--------------------|
| | Actual | Fixed Budget | Variance | Var % | Actual |
| Operating revenues: | | | | | |
| Net clinical service revenue | \$ 14,558,685 | \$ 14,499,382 | \$ 59,303 | 0% | \$ 13,970,691 |
| Supplemental medicaid | 1,600,000 | 1,600,000 | - | 0% | 1,600,000 |
| Other operating revenue | 3,533,946 | 3,290,848 | 243,098 | 7% | 2,226,246 |
| Purchased services revenue | 3,571,176 | 4,282,296 | (711,120) | (17%) | 3,542,535 |
| Total operating revenues | 23,263,807 | 23,672,526 | (408,719) | (2%) | 21,339,473 |
| Operating expenses: | | | | | |
| Salaries, wages and benefits | 14,655,909 | 15,594,950 | 939,041 | 6% | 14,415,447 |
| Supplies | 1,975,424 | 1,596,258 | (379,165) | (24%) | 1,242,765 |
| Contractual services | 1,013,870 | 938,873 | (74,997) | (8%) | 1,384,776 |
| Purchased services | 1,022,155 | 1,273,266 | 251,111 | 20% | - |
| Depreciation | 824,396 | 830,416 | 6,019 | 1% | 155,554 |
| Facility cost and equipment | 529,682 | 603,174 | 73,491 | 12% | 1,192,404 |
| Professional liability insurance | 176,399 | 207,331 | 30,932 | 15% | 193,830 |
| Meals and travel | 34,756 | 24,367 | (10,389) | (43%) | 19,415 |
| Faculty and staff recruitment | 192,910 | 51,305 | (141,605) | (276%) | 52,451 |
| MUSCP corporate shared services | 1,258,994 | 1,289,155 | 30,161 | 2% | 1,223,816 |
| Other expenses | 41,985 | 59,157 | 17,172 | 29% | 21,579 |
| Total operating expenses | 21,726,481 | 22,468,253 | 741,772 | 3% | 19,902,038 |
| Operating income (loss) | 1,537,326 | 1,204,273 | 333,053 | 28% | 1,437,435 |
| Operating margin | 6.6% | 5.1% | | | 6.7% |
| Nonoperating revenue (expenses): | | | | | |
| Investment income | 123 | 406 | (283) | (70%) | 199 |
| Interest expense | (32,120) | (42,330) | 10,211 | 24% | (32,921) |
| Rental income | 33,042 | 33,105 | (64) | (0%) | 13,648 |
| Total nonoperating revenue (expenses) | 1,045 | (8,819) | 9,864 | 112% | (19,073) |
| Change in net position | \$ 1,538,371 | \$ 1,195,454 | \$ 342,917 | 29% | \$ 1,418,362 |
| Net margin | 6.6% | 5.0% | | | 6.6% |

Operating revenue:

- Net clinical service revenue: \$125K Grace Internal Medicine over budget (unbudgeted); (\$70K) CFC Primary Care under budget
- Other operating revenue: \$913K MHA Upstream ACO PMPM payments over budget; (\$643K) CFC Primary Care under budget - (\$289K) timing of new clinics opening, (\$185K) new provider support, (\$178K) PCMH
- Purchased services revenue under budget: (\$329K) Modern Minds, (\$206K) MCP funded leadership, and (\$96K) Hampton Regional Medical Center (funded clinics; revenue offset by expenses)

Operating expense:

- Salaries and benefits: \$604K funded clinics: \$366K MCP funded leadership under budget, \$328K Modern Minds under budget, and (\$128K) Midlands MUHA over budget (unbudgeted); \$485K CFC Primary Care under budget (faculty vacancies; timing of new clinics)
- Supplies: (\$245K) reversal of FY23 Henry Schein accrual and (\$84K) Park West Primary Care over budget
- Purchased services: \$383K MHA Upstream under budget (due to unspent funds) and \$85K West Campus EDS under budget (clinic has not opened); (\$185K) Leadership allocation over budget (UMA Ambulatory leadership allocation)

Carolina Family Care, Inc.

Including MUSC Health Partners

Statement of Net Position**ASSETS**

| | <u>December 31, 2023</u> | <u>June 30, 2023</u> | <u>Variance</u> |
|--|--------------------------|----------------------|---------------------|
| Current Assets: | | | |
| Cash and cash equivalents | \$ 2,659,523 | \$ 3,412,200 | \$ (752,676) |
| Receivables: | | | |
| Patient services - net of allowances for contractual adjustments and bad debt of \$4,023,996 | 1,865,926 | 2,280,402 | (414,476) |
| Due from the Medical University of South Carolina | 14,179 | 21,711 | (7,533) |
| Due from the Medical University Hospital Authority | 195,456 | 817,033 | (621,577) |
| Due from MCP | 1,022,496 | (119,048) | 1,141,544 |
| Due from MUSC Health Alliance | 245,115 | 1,067,962 | (822,848) |
| Due from MSV | 1,113,996 | 316,605 | 797,391 |
| Lease receivable | 20,699 | 20,699 | - |
| Other current assets | 2,744,945 | 513,044 | 2,231,901 |
| Total Current Assets | <u>9,882,335</u> | <u>8,330,608</u> | <u>1,551,726</u> |
| Noncurrent assets: | | | |
| Capital assets: | | | |
| Furniture and equipment | 1,620,679 | 1,620,679 | - |
| Leasehold improvements | 3,950,815 | 2,584,733 | 1,366,081 |
| Computer software | 46,563 | 46,563 | - |
| Right of use assets | 9,162,238 | 9,162,238 | - |
| Accumulated depreciation and amortization | (6,260,888) | (5,436,492) | (824,396) |
| Lease receivable | 34,784 | 45,026 | (10,242) |
| Investment in partnerships | 209,000 | 209,000 | - |
| Total noncurrent assets | <u>8,763,190</u> | <u>8,231,747</u> | <u>531,443</u> |
| Total Assets | <u>\$ 18,645,525</u> | <u>\$ 16,562,355</u> | <u>\$ 2,083,170</u> |

Notes:Current assets:*-Other current assets: variance due to Supplemental Medicaid accrual*Noncurrent assets:*-Leasehold Improvements: includes projects: Park West relocation*

Carolina Family Care, Inc.
Including MUSC Health Partners

Statement of Net Position

LIABILITIES

| | <u>December 31, 2023</u> | <u>June 30, 2023</u> | <u>Variance</u> |
|--|--------------------------|----------------------|-----------------------|
| Current Liabilities: | | | |
| Accounts payable | \$ 127,819 | \$ 230,322 | \$ 102,503 |
| Accrued interest payable | 5,044 | 5,320 | 277 |
| Accrued payroll | 634,804 | 1,383,437 | 748,633 |
| Accrued payroll withholdings | 944,704 | 172,941 | (771,762) |
| Unapplied cash - patient services | 1,229,231 | 551,468 | (677,762) |
| Other accrued liabilities | 1,176,792 | 1,160,766 | (16,027) |
| Due to Medical University of South Carolina | 24,388 | 38,908 | 14,520 |
| Due to Medical University Hospital Authority | 104,337 | 390,759 | 286,421 |
| Due to UMA | 4,324,364 | 3,411,551 | (912,813) |
| Note Payable to UMA | 756,003 | 756,003 | - |
| Note Payable to MSV | 432,790 | 432,790 | - |
| Accrued compensated absences | 839,616 | 839,616 | - |
| Lease liability | 1,325,172 | 1,325,172 | - |
| Total current liabilities | <u>11,925,062</u> | <u>10,699,052</u> | <u>(1,226,010)</u> |
| Noncurrent Liabilities: | | | |
| Lease liability | 4,569,289 | 5,240,125 | 670,836 |
| Deferred inflows-leases | 53,607 | 63,983 | 10,376 |
| Total noncurrent liabilities | <u>4,622,896</u> | <u>5,304,108</u> | <u>681,212</u> |
| Total liabilities | <u>16,547,958</u> | <u>16,003,160</u> | <u>(544,798)</u> |
| NET POSITION | <u>2,097,566</u> | <u>559,195</u> | <u>(1,538,371)</u> |
| Total Liabilities, Inflows & Net Position | <u>\$ 18,645,525</u> | <u>\$ 16,562,355</u> | <u>\$ (2,083,170)</u> |

Notes:

Current liabilities:

-Accrued payroll: reversal of \$335K FY23 year-end physician/APP bonus accruals

Carolina Family Care, Inc.
(Including MUSC Health Partners)
Statement of Revenues, Expenses and Changes in Net Position
For the 6 Month Period Ending - December 31, 2023

| | MHA Population Health | CFC Community Physicians | Other Departments | CFC Primary Care | CFC Total |
|---|--------------------------|-----------------------------|----------------------|---------------------|--------------|
| Operating revenues: | | | | | |
| Net clinical service revenue | - | 348,708 | 187,652 | 14,022,325 | 14,558,685 |
| Supplemental medicaid | - | - | - | 1,600,000 | 1,600,000 |
| Other operating revenue | 1,296,820 | - | - | 2,237,126 | 3,533,946 |
| Purchased services revenue | 257,274 | - | 2,161,183 | 1,152,719 | 3,571,176 |
| Total operating revenues | 1,554,094 | 348,708 | 2,348,835 | 19,012,170 | 23,263,807 |
| Operating expenses: | | | | | |
| Salaries, wages and benefits | 379,703 | 243,812 | 2,079,612 | 11,952,782 | 14,655,909 |
| Supplies | - | 1,147 | 16,221 | 1,958,056 | 1,975,424 |
| Contractual services | - | 316,651 | 48,790 | 648,430 | 1,013,870 |
| Purchased services | - | 553 | 148,014 | 873,588 | 1,022,155 |
| Depreciation | - | - | 701,012 | 123,384 | 824,396 |
| Facility cost and equipment | - | 57,662 | (667,343) | 1,139,363 | 529,682 |
| Professional liability insurance | - | - | 3,918 | 172,481 | 176,399 |
| Meals and travel | 43 | - | 21,517 | 13,196 | 34,756 |
| Faculty and staff recruitment | - | - | 170,894 | 22,016 | 192,910 |
| MUSCP corporate shared services | - | 1,807 | - | 1,257,187 | 1,258,994 |
| Other expenses | - | 22,973 | 9,424 | 9,588 | 41,985 |
| Total operating expenses | 379,746 | 644,605 | 2,532,058 | 18,170,072 | 21,726,481 |
| Operating income (loss) | 1,174,348 | (295,897) | (183,223) | 842,098 | 1,537,326 |
| Operating margin | 75.6% | (84.9%) | (7.8%) | 4.4% | 6.6% |
| Nonoperating revenue (expenses): | | | | | |
| Investment income | - | - | - | 123 | 123 |
| Interest expense | - | - | (32,120) | - | (32,120) |
| Rental income | - | - | 128 | 32,913 | 33,042 |
| Total nonoperating revenue (expenses) | - | - | (31,992) | 33,036 | 1,045 |
| Change in net position | \$ 1,174,348 | \$ (295,897) | \$ (215,215) | \$ 875,135 | \$ 1,538,371 |
| Net margin | 75.6% | (84.9%) | (9.2%) | 4.6% | 6.6% |

Notes:

CFC Community Physicians:

- (\$242K) Mt Pleasant Community PM&R operating loss
- (\$120K) Gastro operating loss
- \$82K Grace Internal Medicine operating income
- (\$13K) Wound Care operating loss

Other Departments:

- (\$118K) Community Corporate Executive costs operating loss
- (\$30K) GASB 87 Leases Impact
- (\$22K) Institutional Advancement
- (\$11K) Group Health deficit to be transferred to UMA
- Other column also includes the following entities which are fully funded: Tideland Multispecialty, Modern Minds, Centerspace, MCP Leadership, and MUHA Midlands

**FY2024 MUSCP Consolidated Approved Unbudgeted Expenses
As of 12/31/23**

| Unbudgeted Capital Projects | Amount |
|---|-------------------|
| Olympus Strobes/Scopes @ North Specialty Laryngology | \$ 291,916 |
| Sciton Joule X Laser Platform @ Health East Cooper Plastics | 425,754 |
| Total | \$ 717,670 |

| Unbudgeted Operating Expenses | Amount |
|--|---------------------|
| Bishop Gadsden Primary Care Office | \$ 16,000 |
| MUSC Housestaff Recruitment Initiative | 180,000 |
| IOP Clinic Relocation | 295,000 |
| Mobile MRI Unit - Health East Cooper | 822,000 |
| Total | \$ 1,313,000 |

| | |
|--|---------------------|
| Total FY24 Approved Unbudgeted Expenses | \$ 2,030,670 |
|--|---------------------|

MEDICAL UNIVERSITY HOSPITAL AUTHORITY (MUHA) BOARD OF TRUSTEES
CONSENT AGENDA
February 9, 2024
101 Colcock Hall

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

Consent Agenda for Approval

- Item 25. MUSC Health Charleston Division Appointments, Reappointments, and Delineation of Privileges.....Dr. Carrie Herzke
Chief Medical Officer, MUHA

- Item 26. MUSC Health Regional Health Network (RHN) Appointments, Reappointments, and Delineation of Privileges Dr. Michael Foster
President, RHN Unified Medical Staff

Consent Agenda for Information

- Item 27. MUSC Health Charleston Division MEC Minutes.....Dr. Carrie Herzke
Chief Medical Officer, MUHA

- Item 28. Contracts and Agreements..... Annette Drachman
General Counsel

MUHA and MUSC Physical Facilities Committee: Ms. Terri Barnes, Chair

Consent Agenda for Information

- Item 29. MUSC FY2024 Active Projects >\$250,000David Attard
Chief Facilities Officer, MUSC

- Item 30. MUSC Facilities Contracts AwardedDavid Attard
Chief Facilities Officer, MUSC

MUHA and MUSC Audit, Compliance, and Risk Committee: Mr. Tom Stephenson, Chair

- Item 31. Annual Conflict of Interest Report William Land
MUSC Conflict of Interest Officer

Board of Trustees Credentialing Subcommittee December 2023
The Medical Executive Committee reviewed the following applicants on December 20, 2023
and recommends approval by the Board of Trustees Credentialing Subcommittee effective December 28, 2023

| Charleston Medical Staff Initial Appointment and Clinical Privileges | | |
|---|------------------------------|---|
| Raymond Keels Allen Jr, MD | Pathology & Lab Med | Active |
| Kaitlyn Maureen Boggs, MD | Pediatrics | Active |
| Kristin Capone, MD | Pediatrics | Active |
| Camille Carre, MD | Pediatrics | Active |
| Julia Fayanne Chen, MD | Surgery | Active |
| Graciela B De Jesus, MD | Dermatology | Active |
| Wendy Lyn C Estrellado-Cruz, MD | Pediatrics | Active |
| Matthew Jonathan Graves, MD | Anesthesiology | Active |
| William Gabriel Hawkins, MD | Surgery | Active |
| Thomas Harold Kelly, MD | Radiology | Active |
| Santosh Nagaraju, MBBS | Surgery | Active |
| Vishnu Vardhan Reddy Naravadi, MD | Medicine | Active |
| Erin Lewis Nichols, DMD | Hospital Dental Services | Active |
| Manoraj Ratnaraj, MD | Family Medicine | Active |
| Katherine Evangelia Renne, DMD | Hospital Dental Services | Active |
| Bryan Keith Tolliver, MD | Psychiatry | Active |
| Yara Younan, BS, MD | Radiology | Active |
| Charleston Medical Staff Reappointment and Clinical Privileges | | |
| Lisa Marie Baych, MD | Medicine | Provisional Affiliate - Colleague - Other |
| Ryan Jeffrey Beyer, MD | Medicine | Active Provisional |
| Laurence Steven Blumenthal, MD | Medicine | Affiliate - Colleague |
| Sarah Weiss Book, MD | Psychiatry | Active |
| Harry St Clair Clarke Jr, MD | Urology | Active |
| William Joel Cook, MD | Dermatology | Active |
| Theresa Sullivan Gonzales, DMD | Oral & Maxillofacial Surgery | Active Provisional |
| Stephen Greer, DO | Surgery | Provisional Affiliate |
| Airody Keshava Hebbar, MD | Family Medicine | Active |
| Mary Noreen Sagedy Herring, MD | Neurology | Active |
| Leon Buffaloe Jr, MD | Medicine | Affiliate - Colleague - Other |
| Philip Sinato Jr, MD | Psychiatry | Affiliate - Colleague |
| Edward Mark Kantor, MD | Psychiatry | Active |
| Janice Dixon Key, MD | Pediatrics | Active |
| Michelle Duchesneau Lally, MD | Pediatrics | Active |
| Diana Lynn McDaniel Mullis, MD | Psychiatry | Active |
| Farzad Nourollah-Zadeh, DMD | Oral & Maxillofacial Surgery | Provisional Affiliate |
| James Caldwell Oates, MD | Medicine | Active |
| Daniel York Reuben, MD | Medicine | Active |
| Ellen Carrie Riemer, MD | Pathology & Lab Med | Active |
| James Russell Roberts, MD | Pediatrics | Active |
| Emil Anthony Ty Say, MD | Ophthalmology | Active |
| Sally Elizabeth Self, MD | Pathology & Lab Med | Active |
| Renee Danielle Straub, MD | Dermatology | Active |
| Hayley Barnett Walter, MD | Medicine | Active Provisional |
| Graham Walter Warren, MD | Radiation Oncology | Active |
| Charleston Medical Staff Change in Privileges | | |
| Russell Chapin, MD | Radiology | Active, Adding Orangeburg Campus |
| Saeed Elojeimy, MD | Radiology | Active, Adding Orangeburg Campus |
| Lauren Florillo, MD | Radiology | Active, Adding Orangeburg Campus |
| Andrew Hardie, MD | Radiology | Active, Adding Orangeburg Campus |
| Kevin Horn, MD | Radiology | Active, Adding Orangeburg Campus |
| Freddie Hughes, MD | Radiology | Active, Adding Orangeburg Campus |

| | | |
|--|-------------------------|----------------------------------|
| William Rieter, MD | Radiology | Active, Adding Orangeburg Campus |
| Sandra Rutigliano, MD | Radiology | Active, Adding Orangeburg Campus |
| Nicholas Shaheen, MD | Radiology | Active, Adding Orangeburg Campus |
| Charleston Professional Staff Initial Appointment and Clinical Privileges | | |
| Sheeneque Christel Bailey, NP | Psychiatry | Allied Health |
| Eve Elise Barna, PA | Family Medicine | Allied Health |
| Heather Rose Barraco, RD | MUHA Dietetic Services | Allied Health |
| Kiara Shene Baylock, FNP-BC | Medicine | Allied Health |
| Amanda Grace Beverly, AGAC-NP | Anesthesiology | Allied Health |
| Megan Cosgrove Bolick, NP | Surgery | Allied Health |
| Amanda Maiello Booth, RD | MUHA Dietetic Services | Allied Health |
| Misti Lee Borgestad, CNM | Obstetrics & Gynecology | Allied Health |
| Jessica Lynn Brown, PAC | Medicine | Allied Health |
| Tessa Joy Corio, PA | Family Medicine | Allied Health |
| Gwen Nicole Croce, CRNA | Anesthesiology | Allied Health |
| Robert David Cromley, CRNA | Anesthesiology | Allied Health |
| Susan Elena Ersig, NP | Medicine | Allied Health |
| Megan Ann Foxe, RD | MUHA Dietetic Services | Allied Health |
| Cynthia Leigh Foxx, APRN | Neurology | Allied Health |
| Brooke Alexandra Freeman, PA | Neurology | Allied Health |
| Sally Ann Geese, APRN | Surgery | Allied Health |
| Madison Taylor Gilinsky, NP | Medicine | Allied Health |
| Jesse Machaela Grady, FNP | Pediatrics | Allied Health |
| Jessica Marie Hatfield, PA | Medicine | Allied Health |
| Sarah Frances Heard, NP | Family Medicine | Allied Health |
| Abigail Hebron, RD | MUHA Dietetic Services | Allied Health |
| Virginia L Knight, FNP-BC | Family Medicine | Allied Health |
| Danielle Yvonne Lee, RD | MUHA Dietetic Services | Allied Health |
| Jennifer Lynn Lewey, FNP | Medicine | Allied Health |
| Natasha Renee Lewis, MSN | Medicine | Allied Health |
| Courtney Faith Miller, NP | Pediatrics | Allied Health |
| Danielle Christine Mushinsky, RD | MUHA Dietetic Services | Allied Health |
| Christine Denise Nazario, MSN | Neurosurgery | Allied Health |
| Eden Rose Picow, FNP-C | Orthopaedics | Allied Health |
| Braden Roark, PA | Surgery | Allied Health |
| Haley Schmidt, RD | MUHA Dietetic Services | Allied Health |
| Riley Nicole Steinman, CRNA | Anesthesiology | Allied Health |
| Taraka Taylor-Moultrie, LISW-CP | Psychiatry | Allied Health |
| Ashtyn Danielle Turner, PA | Radiology | Allied Health |
| Myranda Murphy Valyear, PA | Anesthesiology | Allied Health |
| Christine H Williams, ACNP | Surgery | Allied Health |
| Elizabeth-Anne Bennett Winter, PA | Medicine | Allied Health |
| Juliana Taylor Wishnia, RD | MUHA Dietetic Services | Allied Health |
| Emily McMahon Young, DNP | Pediatrics | Allied Health |
| Linsie Zhang, MPAS | Dermatology | Allied Health |
| Charleston Professional Staff Reappointment and Clinical Privileges | | |
| Allyson Leigha Armstrong, FNP | Family Medicine | Allied Health |
| Garrett Nelson Bell, PAC | Medicine | Allied Health |
| Erika Leigh Bell, PAC | Medicine | Allied Health |
| Jeffrey J Borckardt, PhD | Psychiatry | Allied Health |
| Jennifer L Cannon, CRNA | Anesthesiology | Allied Health |
| Ryan Francis Carature, PA | Emergency Medicine | Provisional Allied Health |
| Brock Anthony Chamberlain, PA | Orthopaedics | Provisional Allied Health |
| Sheresa C Christopher, PhD | Psychiatry | Allied Health |
| Savannah Kemp Cole, FNP | Medicine | Allied Health |
| Kara R Cole, ANP | Medicine | Allied Health |

| | | |
|--|------------------------|---|
| Mollie Wharton Dadin, LISW-CP | Pediatrics | Allied Health |
| Eleta Lazar Donelan, PAC | Surgery | Allied Health |
| Julianne Eckert, CRNA | Anesthesiology | Provisional Allied Health |
| Emily D Gottfried, PhD | Psychiatry | Allied Health |
| Katelyn J Haarer, PA | Orthopaedics | Provisional Allied Health |
| Elizabeth Tallon Harding, PAC | Medicine | Allied Health |
| Lakeisha Shunte Henderson, APRN | Medicine | Allied Health - Colleague - Other |
| Mary A Johnson, MSN | Pediatrics | Allied Health |
| Cheryl Elizabeth Kerrigan, PNP | Pediatrics | Allied Health |
| Dean Gaines Kilpatrick, PhD | Psychiatry | Allied Health |
| Benjamin Francis King, PAC | Surgery | Allied Health |
| Kimberly K Kruse, PsyD | Neurology | Provisional Allied Health |
| Amanda Allen Littleton, NP | Medicine | Allied Health |
| Patrick Michael McNeal, PAC | Emergency Medicine | Allied Health |
| Starr Loadholt Murphy, APRN | Medicine | Provisional Allied Health |
| Riley Alexandra Nikolychik, LISW-CP | Psychiatry | Provisional Allied Health |
| Jared Allen Nix, PAC | Neurosurgery | Allied Health |
| Donna Brown Parker, NNP | Pediatrics | Provisional Allied Health |
| Katherine Pfeninger, NP | Medicine | Allied Health CFC - Colleague |
| Erin Lee Phlegar, PAC | Psychiatry | Allied Health |
| Jason Michael Richard, CRNA | Anesthesiology | Provisional Allied Health - Colleague - Other |
| Tara Lynn Scharadin, APRN | Radiology | Allied Health |
| Amy Jo Schmoll, CRNA | Anesthesiology | Allied Health |
| Amber Lynn Thompson, PA | Neurosurgery | Allied Health |
| Naomi Faye Walker, PNP | Orthopaedics | Provisional Allied Health |
| Judy R Walling, FNP | Medicine | Allied Health |
| Briann Nicole Weishar, RD | MUHA Dietetic Services | Provisional Allied Health |
| Charleston Professional Staff Change in Privileges | | |
| Angela Dempsey, RD | MUHA Dietetic Services | Allied Health |
| Amy Merwarth, RD | MUHA Dietetic Services | Allied Health |
| Michael Lee Thompson, AGNP-C | Surgery | Provisional Allied Health |
| Orangeburg Medical Staff Initial Appointment and Clinical Privileges | | |
| Suzanna Dotson, MD | Medicine | Active - Remote |
| Cedric Fisher, MD | Medicine | Active - Remote |
| Priya Patel, MD | Psychiatry | Active - Remote |
| Sunil Rameshbhai Patel, MD | Medicine | Active – Remote |
| Zaid Mohamed Khair Jadaan Shmaisani, MD | Medicine | Active – Remote |
| Rachel Anazia, MD | Anesthesiology | Active - Remote |
| Cherryl Premdass, MD | Medicine | Active - Remote |
| Orangeburg Professional Staff Initial Appointment and Clinical Privileges | | |
| BryAna Gillespie, CRNA | Anesthesiology | Allied Health - Remote |
| Ademola Salami, CRNA | Anesthesiology | Allied Health - Remote |
| Julia Anna Keefe, CRNA | Anesthesiology | Allied Health - Remote |
| END | | |

Board of Trustees Credentialing Subcommittee January 2024
The Medical Executive Committee reviewed the following applicants on January 17, 2024
and recommends approval by the Board of Trustees Credentialing Subcommittee effective January 28,
2024

Charleston Medical Staff Initial Appointment and Clinical Privileges

| | | |
|------------------------------|-------------------|--------|
| Edward Robeson Tinsley, MD | Family Medicine | Active |
| Vanessa Louise Hernandez, OD | Interdisciplinary | Active |
| Benjamin Eric Jewett, MD | Neurology | Active |
| Madhura Ganga Navada, MD | Neurology | Active |
| Santosh Nagaraju, MD | Surgery | Active |

Charleston Medical Staff Reappointment and Clinical Privileges

| | | |
|------------------------------------|------------------|---|
| John Barnard Adams, MD | Urology | Active Provisional |
| William Thomas Basco Jr, MD | Pediatrics | Active |
| Kathy Siegfried Bolus, MD | Medicine | Affiliate CFC - Colleague |
| Cara Rhodes Bostrom, MD | Medicine | Provisional Affiliate - Colleague - Other |
| Allison Ross Eckard, MD | Pediatrics | Active |
| Harriet Belding Eldredge-Hindy, MD | Radiation | Active |
| Robert William Harrington Jr, MD | Family Medicine | Active |
| James Joseph Hill III, MD | Family Medicine | Active Provisional |
| Kimberly Shelley Jackson, MD | Family Medicine | Affiliate CFC - Colleague |
| Marc Robert Katz, MD | Surgery | Active |
| Karen Licorish Keane, DO | Pediatrics | Active Provisional |
| Richard Mahlon Kline Jr, MD | Surgery | Affiliate |
| Angela C LaRosa, MD | Pediatrics | Active |
| Christine Melnyk Litwin, MD | Pathology & Lab. | Active |
| Frances Elizabeth Logan Penn, MD | Pediatrics | Active Provisional |
| Christine Canivan MD, | Family Medicine | Active Provisional |
| David Taplin Marshall, MD | Radiation | Active |
| Gwen Ann Minzes, DO | Pediatrics | Active Provisional |
| Edward Douglas Norcross, MD | Surgery | Active |
| Matthew John Nutaitis, MD | Ophthalmology | Active |
| Gurpur Shashidhar Pai, MD | Pediatrics | Active |
| Andrea Meredith Rinn, DO | Medicine | Active |
| Andrea C Sartori, PhD | Neurology | Active Provisional |
| Richard Michael Silver, MD | Medicine | Active |
| John Berhart Sperry Jr, MD | Pediatrics | Affiliate |
| Rachel Lee Sturdivant, MD | Medicine | Active |
| Andrea Pickens Summer, MD | Pediatrics | Active |
| Dezmond Bernard Sumter, MD | Family Medicine | Provisional Affiliate - Colleague - Other |
| John Marcus Wharton, MD | Medicine | Active |
| Jared Adam White, BS | Surgery | Active |

Charleston Medical Staff Change in Privileges

| | | |
|-----------------|-----------------|--------|
| Eugene Hong, MD | Family Medicine | Active |
|-----------------|-----------------|--------|

Charleston Professional Staff Initial Appointment and Clinical Privileges

| | | |
|-------------------------------|----------------|---------------|
| Alexi Alikakos, PA | Surgery | Allied Health |
| Christina Rae Bannister, RD | MUHA Dietetic | Allied Health |
| Emily Patricia Bass Smoot, RD | MUHA Dietetic | Allied Health |
| Amy J Berry, RD | MUHA Dietetic | Allied Health |
| Catherine Amy Bilbo, RD | MUHA Dietetic | Allied Health |
| Megan Squires Brewer, CRNA | Anesthesiology | Allied Health |
| Kylie Madison Deice, RD | MUHA Dietetic | Allied Health |

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|--|-----------------|---|
| Irene Erich, RD | MUHA Dietetic | Allied Health |
| Jane Hannosh Fleming, RD | MUHA Dietetic | Allied Health |
| Katelyn Ferguson Flowers, RD | MUHA Dietetic | Allied Health |
| Rebecca Christine Fuller, RD | MUHA Dietetic | Allied Health |
| Vanessa Giocondo, RD | MUHA Dietetic | Allied Health |
| Sara Jayne Hendrix, RD | MUHA Dietetic | Allied Health |
| Traci Carole Kennedy, NP | Surgery | Allied Health |
| Meredith Kolvey, RD | MUHA Dietetic | Allied Health |
| Madison Rene Locke, RD | MUHA Dietetic | Allied Health |
| Marisa Lombardo, PA | Surgery | Allied Health |
| Mollie Caroline McConahay, RD | MUHA Dietetic | Allied Health |
| Amy Terese Micek, CRNA | Anesthesiology | Allied Health |
| Silvana Saleme Mooney, NP | Medicine | Allied Health |
| Amanda Librizzi Muth, CPNP | Pediatrics | Allied Health |
| Lindsey Danielle Phillips, PA | Surgery | Allied Health |
| Cathy Ricker, RD | MUHA Dietetic | Allied Health |
| Allison Marie Rohrer, RD | MUHA Dietetic | Allied Health |
| Natalie Rucks, RD | MUHA Dietetic | Allied Health |
| Emily Jean Ryttse, NP | Medicine | Allied Health |
| Dawn Marie Smalls, DNP | Medicine | Allied Health |
| Andrea Paula Stress, DNP | Medicine | Allied Health |
| Alice Gray Deloache Tollison, RD | MUHA Dietetic | Allied Health |
| Kennedy August Vorwaller, NP | Anesthesiology | Allied Health |
| Amanda Leigh Wyatt Welch, RD | MUHA Dietetic | Allied Health |
| Jessica Rodriguez-West, DNP | Pediatrics | Allied Health |
| Charleston Professional Staff Reappointment and Clinical Privileges | | |
| Laura Cavicchi Anderson, FNP | Pediatrics | Provisional Allied Health |
| Grace Elizabeth Baker, APRN | Medicine | Allied Health |
| Mary K Colliton, NNP | Pediatrics | Allied Health |
| Tina Louise Davis, CRNA | Anesthesiology | Allied Health |
| Frank Duffin Jr, DNP | Anesthesiology | Provisional Allied Health |
| Holland Elizabeth Erisman, APRN | Medicine | Allied Health |
| Anna Maria Evans, NP | Emergency | Provisional Allied Health - Colleague - Other |
| Megan Gilson, APRN | Medicine | Provisional Allied Health |
| Suellen Hawkins, MSW | Medicine | Allied Health |
| Sarah Elizabeth Kratzer, DNP | Family Medicine | Allied Health CFC - Colleague |
| Kathleen Law, FNP | Medicine | Allied Health |
| Cynthia D Lawrimore, FNP | Family Medicine | Allied Health - Colleague - Other |
| Kiersten LeBar, DNP | Pediatrics | Provisional Allied Health |
| Christina Diane Lester, PNP | Pediatrics | Provisional Allied Health |
| James Harold Mahaffee, CRNA | Anesthesiology | Allied Health |
| Colleen Anne Manning, PA | Radiology | Allied Health |
| Jessica Anne Martissa, PAC | Medicine | Allied Health |
| Matthew Maynard, PhD | Radiation | Allied Health |
| Regan Rouse McKinney, CRNA | Anesthesiology | Allied Health |
| Alice F Michaux, CRNA | Anesthesiology | Allied Health |
| Mackensie Nicole Miller, RD | MUHA Dietetic | Provisional Allied Health |
| Theresa Lynn Morgan, CRNA | Anesthesiology | Allied Health |
| Miranda Elizabeth Moss, FNP | Pediatrics | Provisional Allied Health |
| Jessica Thi Nguyen-Fisher, APRN | Pediatrics | Allied Health |
| Kimberly K Owens, APRN | Family Medicine | Allied Health - Colleague - Other |
| Helen Abigail Pritcher, APRN | Surgery | Allied Health |

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| Margaret McClain Ramsden, ANP | Surgery | Allied Health |
| Laurie D Rump, FNP | Surgery | Allied Health |
| Sarah Murphy Simmons, CRNA | Anesthesiology | Provisional Allied Health |
| Amy Leatherman Smith, CRNA | Anesthesiology | Allied Health |
| Brooke Nicole Smith, APRN | Medicine | Allied Health |
| Benjamin Noah Sokol, CRNA | Anesthesiology | Allied Health |
| Amy Margaret-Marie Sved, FNP | Family Medicine | Allied Health - Colleague - Other |
| Jilian McAlum Thomas, PA | Family Medicine | Provisional Allied Health - Colleague - Other |
| Michael Lee Thompson, AGNP-C | Medicine | Provisional Allied Health |
| Jillian L Tortorigi, NNP | Pediatrics | Allied Health |
| Samuel Vance Tripp, CRNA | Anesthesiology | Allied Health |
| Katherine Grace Vincent, DNP | Pediatrics | Allied Health |
| Charleston Professional Staff Change in Privileges | | |
| Jennifer Preston, PA | Medicine | Allied Health |
| Orangeburg Medical Staff Initial Appointment and Clinical Privileges | | |
| Joshua B Coney, MD | Medicine | Active - Remote |
| Jonathan Brandon, MD | Radiology | Telemedicine By-Proxy |
| Albert C Lockhart, MD | Medicine | Active - Remote |
| Sarah Campos Monell, MD | Medicine | Active - Remote |
| Benjamin Cooper, MD | Radiology | Telemedicine By-Proxy |
| Chris Corner, CRNA | Radiology | Telemedicine By-Proxy |
| Travis Downes, MD | Radiology | Telemedicine By-Proxy |
| Erik Eadie, MD | Radiology | Active - Remote |
| Allison Fraum, DO | Radiology | Telemedicine By-Proxy |
| Scott Glasser, MD | Radiology | Telemedicine By-Proxy |
| Christopher Hartness, MD | Radiology | Telemedicine By-Proxy |
| Christine Kassis, MD | Radiology | Telemedicine By-Proxy |
| Jennifer Kemp, MD | Radiology | Telemedicine By-Proxy |
| Craig Kornbluth, MD | Radiology | Telemedicine By-Proxy |
| Adam Kowalksi, MD | Radiology | Telemedicine By-Proxy |
| Annie Lim, DO | Radiology | Telemedicine By-Proxy |
| Matthew Lynn, MD | Radiology | Telemedicine By-Proxy |
| Keir Marshall, MD | Radiology | Telemedicine By-Proxy |
| Alexandra McKenzie, MD | Radiology | Telemedicine By-Proxy |
| Arash Momeni, MD | Radiology | Telemedicine By-Proxy |
| Dipti Nevrekar, MD | Radiology | Telemedicine By-Proxy |
| Vincent Nolan Irish, MD | Radiology | Active - Remote |
| Michael Oakes, MD | Radiology | Telemedicine By-Proxy |
| Sunil Patel, MD | Medicine | Active - Remote |
| Viral Patel, DO | Radiology | Telemedicine By-Proxy |
| Christopher Pettis, MD | Radiology | Telemedicine By-Proxy |
| Sajal Pokharel, MD | Radiology | Telemedicine By-Proxy |
| Jesus Sanchez Contreras, MD | Radiology | Telemedicine By-Proxy |
| Marc Sarti, MD | Radiology | Telemedicine By-Proxy |
| Matthew Schmitz, MD | Radiology | Telemedicine By-Proxy |
| Barry Schoelch, DO | Radiology | Telemedicine By-Proxy |
| Zaid Shmaisani, MD | Medicine | Active - Remote |
| George Sotereanos, DO | Radiology | Telemedicine By-Proxy |
| Veronica Sue, MD | Radiology | Telemedicine By-Proxy |
| Andrew Weinberger, MD | Radiology | Telemedicine By-Proxy |
| John Wendel, MD | Radiology | Telemedicine By-Proxy |
| Lauren Williams, MD | Medicine | Active - Remote |
| Renee B Thomas, MD | Pathology & Lab. | Active - Remote |
| Orangeburg Professional Staff Initial Appointment and Clinical Privileges | | |
| Alyson Eastep, CRNA | Anesthesiology | Allied Health - Remote |

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|-----------------------|-----------------|------------------------|
| Tiffany L Gethers, NP | Family Medicine | Allied Health - Remote |
| Matthew I Giddens, PA | Emergency | Allied Health - Remote |
| Arika Y Spells, PA | Emergency | Allied Health - Remote |
| Stacy W Weaver, PA | Medicine | Allied Health - Remote |
| Jennifer Weigt, NP | Medicine | Allied Health - Remote |

MUSC HEALTH PEE DEE - Credentialing Applications - DECEMBER 2023

MUSC HEALTH FLORENCE

| Practitioner name | Practice Name | Specialty | Status Request |
|--|----------------------|------------------------------|----------------------------|
| Initial Appointment and Clinical Privileges | | | |
| Morris Frederick Gitter, M.D. | MUSC Florence | Emergency Medicine | Active |
| Anne Meredith Kroman, D.O., Ph.D. | MUSC Florence | Cardiology | Active |
| Thomas Walter Phillips, Jr., M.D. | MUSC Florence | Anesthesiology | Active |
| Robert James Searles, D.O. | MUSC Florence | Anesthesiology | Active |
| Brian Conner, D.O. | MUSC Florence | Emergency Medicine | Active |
| Chad Joshua Rosen, M.D. | MUSC Florence | Anesthesiology | Active |
| Moses Elijah Udoh, M.D. | MUSC Florence | Hospital Medicine | Active |
| Ward Curtis Worthington, III, M.D., B.A. | MUSC Florence | Neurosurgery | Active |
| Christian Westcott Zoeller, M.D. | MUSC Florence | Emergency Medicine | Active |
| Jessica Ann Reveia, A.A.S., BSN, MSN, FNP | MUSC Florence | Cardiology | Allied Health Practitioner |
| Katreashe Moltak Watson, C.R.N.A. | MUSC Florence | Anesthesiology | Allied Health Practitioner |
| David B Coston, C.R.N.A. | MUSC Florence | Anesthesiology | Allied Health Practitioner |
| Chelsie Leonna McDaniel, N.P. | MUSC Florence | Hospitalist | Allied Health Practitioner |
| Patrick Wayne Turner, C.R.N.A. | MUSC Florence | Anesthesiology | Allied Health Practitioner |
| Hannah Brooke Woods, P.A. | MUSC Florence | OB-GYN | Allied Health Practitioner |
| Reappointment and Clinical Privileges | | | |
| Scott Hagood Allen, M.D. | MUSC Florence | Radiology | Active |
| Alecia Rosemarie Anyim, M.D., M.B.A. | MUSC Florence | Hospitalist | Active |
| William Norris Boulware, M.D., MACP | MUSC Florence | Internal Medicine | Active |
| John J Chomyn, M.D. | MUSC Florence | Radiology | Active |
| Stephen Richard Christian, M.D. | MUSC Florence | Radiology | Active |
| W Shawn Conwell, M.D. | MUSC Florence | Radiology | Active |
| Jesse Thomas Cox, Jr., M.D. | MUSC Florence | Pediatrics | Active |
| Patrick Kerry Denton, M.D. | MUSC Florence | Orthopaedic Surgery | Active |
| Eduardo Albana Donato, Jr., M.D. | MUSC Florence | Internal Medicine | Active |
| Cecil Edward Floyd, M.D. | MUSC Florence | Gen Surgery | Active |
| Steven Barry Glassman, M.D. | MUSC Florence | Radiology | Active |
| Joseph Ellsworth Harlan, Jr., M.D., M.B.A. | MUSC Florence | Pediatrics | Active |
| James Mark Harris, M.D. | MUSC Florence | Gen Surgery | Active |
| Robert Joseph Healy, Jr., M.D. | MUSC Florence | Neurology | Active |
| Samuel Crawford Hill, IV, M.D. | MUSC Florence | Radiology | Active |
| Mary Beth Lewis, M.D. | MUSC Florence | Radiology | Active |
| Shawn Patrick McKay, M.D. | MUSC Florence | Otolaryngology | Active |
| Cheney Mell Meiere, Jr., M.D. | MUSC Florence | Radiology | Active |
| Sharon Szukala Mitchell, M.D. | MUSC Florence | Pathology | Active |
| Barnett Edward O'Dell, Jr., M.D. | MUSC Florence | Obstetrics & Gynecology | Active |
| Peter Pius O'Kelly, M.D. | MUSC Florence | Urology | Active |
| Gregory R Palutsis, M.D., B.S. | MUSC Florence | Orthopaedic Surgery | Active |
| Noel Lange Phipps, M.D. | MUSC Florence | Radiology | Active |
| Brandie Andrews Reynolds, M.D. | MUSC Florence | Family Medicine | Active |
| Abraham Eric Rowson, M.D. | MUSC Florence | Hospitalist | Active |
| Inderpal Singh, M.D. | MUSC Florence | Nephrology | Active |
| Stephan Klaus Stamato, M.D., M.B.B.S. | MUSC Florence | Radiology | Active |
| Lane Arne Wilner, M.D. | MUSC Florence | Hospitalist | Active |
| Michael Todd Adams, C.R.N.A., M.S.N. | MUSC Florence | Anesthesiology | Allied Health Practitioner |
| Latosha Epps, N.P., MSN | MUSC Florence | Hospitalist | Allied Health Practitioner |
| Susanne Renee Owens, C.R.N.A., M.S.N., BSN | MUSC Florence | Anesthesiology | Allied Health Practitioner |
| Ernest Singletary, Jr., C.R.N.A. | MUSC Florence | Anesthesiology | Allied Health Practitioner |
| Miranda Driggers Thomas, F.N.P., BSN | MUSC Florence | Obstetrics & Gynecology | Allied Health Practitioner |
| Jessica Devon Wiggins, P.A.C. | MUSC Florence | Emergency Medicine | Allied Health Practitioner |
| Natasha Alicia Williams, N.P. | MUSC Florence | Hospitalist | Allied Health Practitioner |
| John Joseph Daly, Jr., M.D. | MUSC Florence | Radiology | Consulting |
| Christopher Woodruff Degn, M.D. | MUSC Florence | Radiology | Consulting |
| Russell Lamar Derrick, M.D., B.S. | MUSC Florence | Radiology | Consulting |
| Elizabeth Ann Kelley, M.D. | MUSC Florence | Radiology | Consulting |
| Paul Makoto Kuperman, M.D. | MUSC Florence | Radiology | Consulting |
| Jeffrey Scott Lackey, M.D. | MUSC Florence | Radiology | Consulting |
| Gregory Scott Mencken, M.D. | MUSC Florence | Radiology | Consulting |
| Faith May Oliver, D.D.S. | MUSC Florence | Pediatric Dentistry -Surgery | Consulting |
| Steven Todd Pirttima, M.D. | MUSC Florence | Radiology | Consulting |
| Joshua Brian Tew, M.D. | MUSC Florence | Radiology | Consulting |
| Richard John Wunder, M.D. | MUSC Florence | Radiology | Consulting |
| Telemedicine: Appointments | | | |
| Joan Marie Cain, F.N.P. | MUSC Florence | Tele-Palliative | Tele By Proxy |
| Brooke Nicole Smith, A.P.R.N. | MUSC Florence | Tele-Palliative | Tele By Proxy |
| Resignations | | | |

| Brian Hanna MD - Family Medicine | | | |
|--|---------------|----------------------|----------------------------|
| Suzin Duwaik MD - Hospitalist | | | |
| Barbara Sarb DO - Neurology | | | |
| MUSC HEALTH MARION | | | |
| Practitioner name | Practice Name | Specialty | Status Request |
| Initial Appointment and Clinical Privileges | | | |
| Morris Frederick Gitter, M.D. | MUSC Marion | Emergency Medicine | Active |
| Brian Conner, D.O. | MUSC Marion | Emergency Medicine | Active |
| Moses Elijah Udoh, M.D. | MUSC Marion | Hospitalist | Active |
| Christian Westcott Zoeller, M.D. | MUSC Marion | Emergency Medicine | Active |
| Chelsie Leonna McDaniel, N.P. | MUSC Marion | Hospitalist | Allied Health Practitioner |
| Patrick Wayne Turner, C.R.N.A. | MUSC Marion | CRNA | Allied Health Practitioner |
| Reappointment and Clinical Privileges | | | |
| Christo Courban, M.D. | | Emergency Medicine | Active |
| Eyad Husam Nazer, M.D. | | Hospitalist | Active |
| Kim Ann James, A.C.N.P | | Hospitalist | Allied Health Practitioner |
| Brittney Lael McClannahan, C.R.N.A. | | Anesthesiology | Allied Health Practitioner |
| Susanne Renee Owens, C.R.N.A., M.S.N., BSN | | Anesthesiology | Allied Health Practitioner |
| W Shawn Conwell, M.D. | | Radiology | Consulting |
| Christopher Woodruff Degn, M.D. | | Radiology | Consulting |
| Evan Heyward Lee, M.D. | | Anesthesiology | Courtesy |
| Telemedicine Status : Telemedicine Appointments | | | |
| Joan Marie Cain, F.N.P. | MUSC Marion | Tele-Palliative | Tele By Proxy |
| Brooke Nicole Smith, A.P.R.N. | MUSC Marion | Tele-Palliative | Tele By Proxy |
| Resignations | | | |
| Suzin Duwaik MD - Hospitalist | | | |
| MUSC HEALTH BLACK RIVER | | | |
| Practitioner name | Practice Name | Specialty | Status Request |
| Initial Appointment and Clinical Privileges | | | |
| Morris Frederick Gitter, M.D. | MUSC BRMC | Emergency Medicine | Active |
| Brian Conner, D.O. | MUSC BRMC | Emergency Medicine | Active |
| William Scott Kellogg, M.D. | MUSC BRMC | Medicine | Active |
| Moses Elijah Udoh, M.D. | MUSC BRMC | Medicine | Active |
| Christian Westcott Zoeller, M.D. | MUSC BRMC | Emergency Medicine | Active |
| Chelsie Leonna McDaniel, N.P. | MUSC BRMC | Hospital Medicine | Allied Health Practitioner |
| Patrick Wayne Turner, C.R.N.A. | MUSC BRMC | Anesthesiology | Allied Health Practitioner |
| Telemedicine Status : Telemedicine Appointments | | | |
| Joan Marie Cain, F.N.P. | MUSC BRMC | Tele-Palliative | Tele By Proxy |
| Brooke Nicole Smith, A.P.R.N. | MUSC BRMC | Tele-Palliative | Tele By Proxy |
| Resignations | | | |
| Daniel Koele, PA - Emergency Medicine | | | |
| MUSC HEALTH CATAWBA - Credentialing Applications - DECEMBER 2023 | | | |
| MUSC HEALTH LANCASTER | | | |
| Practitioner name | Practice Name | Specialty | Status Request |
| Initial Appointment and Clinical Privileges Status : Active | | | |
| Samuel A. Adefeyisan, M.D. | MUSC Col. | Anesthesia | Active |
| Gary Lee Dove, M.D. | MUSC Kershaw | Anesthesia | Active |
| Bang Chau, M.D. | MUSC | Emergency Medicine | Active |
| Dino P. Massoglia, M.D., Ph.D. | Weatherbyby | Radiology | Active |
| Initial Appointment and Clinical Privileges Status : Allied Health Practitioner | | | |
| David B. Coston, C.R.N.A. | Contracted | CRNA | AHP |
| David K. Machungo, C.R.N.A. | Contracted | CRNA | AHP |
| Craig R. Urbanke, C.R.N.A. | Contracted | CRNA | AHP |
| Melissa L. Bernard, C.R.N.A. | Midwest | CRNA | AHP |
| Cheryl D. Walter, C.R.N.A. | Midwest | CRNA | AHP |
| Initial Appointment and Clinical Privileges Status : Consulting | | | |
| Rajinder Parmar, M.D. | Contracted | Gastroenterology | Consulting |
| George A. Trivette, M.D. | Southeast Rad | Radiation Oncology | Consulting |
| Initial Appointment Telemedicine Status : Telemedicine | | | |
| Joan Marie Cain, FNP | MUSC | Tele-Palliative Care | Teled-By Proxy |
| Brooke N. Smith, FNP | MUSC | Tele-Palliative Care | Teled-By Proxy |
| Jonathan Ross Lena, M.D. | MUSC | Tele-Neurology | Teled-By Proxy |
| Reappointment and Clinical Privileges Status : Active | | | |
| Marcus S. Briones, M.D. | MUSC | Orthopaedics | Active |
| Sonia Chaudhary, M.D. | MUSC | Medicine-Clinic | Active |
| Marion L. Gibbons, M.D. | MUSC | Pediatrics | Active |
| Robert Edward Bell, M.D. | Contracted | Anesthesia | Active |
| Brendan T. Doherty, M.D. | Carolina Rad | Radiology | Active |
| Reappointment and Clinical Privileges Status : Telemedicine Consulting | | | |
| Russell Lamar Derrick, M.D. | Carolina Rad | Tele-Radiology | Consulting |

| Reappointment Telemedicine Status : Telemedicine By Proxy | | | |
|--|--|----------------------|---------------------|
| Kimberly P. Kicielinski, M.D. | MUSC | Tele-Neurology | Teled-By Proxy |
| Change in Privilege | | | |
| James Holler, PA-C | Additional Privilege- Femoral Central Line Placement | | |
| Extension of Temporary Privileges from Chester Providers | | | |
| Siddharth Malhotra, MD | General Surgery / Addition of Vascular Privileges | | |
| Evan Ekman, MD | Orthopedics | | |
| Joshua Rosenthal, PA-C | General Surgery (Supervised by Dr. Siddharth Malhotra) | | |
| Evthokia Thompson, PA-C | Orthopedics (Supervised by Dr. Evan Ekman) | | |
| Candace Aguiar, CRNA | CRNA | | |
| Odis Brandon Owen, CRAN | CRNA | | |
| MUSC HEALTH CHESTER | | | |
| Practitioner name | Practice Name | Specialty | Status Request |
| Initial Appointment and Clinical Privileges Status : Active | | | |
| Samuel A. Adefeyisan, M.D. | MUSC Col. | Anesthesiology | Active |
| Gary Lee Dove, M.D. | MUSC Kershaw | Anesthesiology | Active |
| Bang Chau, M.D. | MUSC | Emergency Medicine | Active |
| Dino Peter Massoglia, MD | Weatherby | Radiology | Active |
| Initial Appointment and Clinical Privileges Status : Ambulatory/Rural Health Care | | | |
| Sara A. Horne, F.N.P. | MUSC | Medicine | AHP Amb. Rural Hlth |
| Initial Appointment and Clinical Privileges Status : Allied Health Practitioner | | | |
| David B Coston, C.R.N.A. | Contracted | CRNA | AHP |
| David K. Machungo, C.R.N.A. | Contracted | CRNA | AHP |
| Craig R. Urbanke, C.R.N.A. | Contracted | CRNA | AHP |
| Cheryl D. Walter, C.R.N.A. | Midwest | CRNA | AHP |
| Melissa L. Bernard, C.R.N.A. | Midwest | CRNA | AHP |
| Initial Appointment and Clinical Privileges Status : Telemedicine by Proxy | | | |
| Brooke N. Smith, F.N.P. | MUSC | Tele-Palliative Care | Teled-By Proxy |
| Joan Marie Cain, F.N.P. | MUSC | Tele-Palliative Care | Teled-By Proxy |
| Jonathan Ross Lena, M.D. | MUSC | Tele-Neurology | Teled-By Proxy |
| Reappointment and Clinical Privileges Status : Active | | | |
| Matthew R. Meier, M.D. | MUSC | Emergency Medicine | Active |
| Marcus S. Briones, M.D. | MUSC | Orthopedics | Active |
| Sonia Chaudhary, M.D. | MUSC | Medicine | Active |
| Scott Hagood Allen, M.D. | Carolina Rad | Radiology | Active |
| David Darrell Arrington, M.D. | Carolina Rad | Radiology | Active |
| Stephen R. Christian, M.D. | Carolina Rad | Radiology | Active |
| William Ong Chu, M.D. | Carolina Rad | Radiology | Active |
| W Shawn Conwell, M.D. | Carolina Rad | Radiology | Active |
| Brendan T. Doherty, M.D. | Carolina Rad | Radiology | Active |
| Geoffrey T. Gilleland, M.D. | Carolina Rad | Radiology | Active |
| Steven B. Glassman, M.D. | Carolina Rad | Radiology | Active |
| Samuel Crawford Hill, IV, M.D. | Carolina Rad | Radiology | Active |
| Joshua C. Leighton, M.D. | Carolina Rad | Radiology | Active |
| Mary Beth Lewis, M.D. | Carolina Rad | Radiology | Active |
| Cheney M. Meiere, Jr., M.D. | Carolina Rad | Radiology | Active |
| Noel Lange Phipps, M.D. | Carolina Rad | Radiology | Active |
| Stephan K. Stamato, M.D. | Carolina Rad | Radiology | Active |
| Julie Scott Webster, M.D. | Carolina Rad | Radiology | Active |
| Reappointment and Clinical Privileges Status : Allied Health Practitioner | | | |
| James T. Holler, III, P.A-C | MUSC | Emergency Medicine | AHP |
| Reappointment and Clinical Privileges Status : Consulting | | | |
| Russell Lamar Derrick, M.D. | Carolina Rad | Tele-Radiology | Consulting |
| Reappointment Telemedicine Status : Telemedicine - By Proxy | | | |
| Sarah Suzanne Kuhn, M.D. | DMH | Tele-Psychiatry | Teled-By Proxy |
| Alejandro Marin Spiotta, M.D. | MUSC | Tele-Neurology | Teled-By Proxy |
| Kimberly P. Kicielinski, M.D. | MUSC | Tele-Neurology | Teled-By Proxy |
| MUSC HEALTH MIDLANDS - Credentialing Applications - DECEMBER 2023 | | | |
| MUSC HEALTH COLUMBIA | | | |
| Practitioner name | Practice Name | Specialty | Status Request |
| Initial Appointment and Clinical Privileges | | | |
| Lense Tessema Duresso, M.D. | Apogee Physicians | Hospitalist | Active |
| Michael Vernon Horner, Jr., M.D. | MUSC Health Emergency Medicine | Emergency Medicine | Active |
| Robert Mester, M.D. | MUSC Health Anesthesiology | Anesthesiology | Active |
| Robert Searles, M.D. | MUSC Health Anesthesiology | Anesthesiology | Active |
| Ryan E Chassereau, C.R.N.A., B.S. | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Melissa Lynette Bernard, C.R.N.A. | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Sarah Marie Finch, C.R.N.A., M.S.N., B.S.N. | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Coston, David B., C.R.N.A. | MUSC Health Anesthesiology | Anesthesiology | AHP |

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| Erin Elizabeth Goff, P.A., B.S. | MUSC Health Cardiothoracic Surgery | Cardiovascular and Thoracic Surgery | AHP |
| Charnele V Jackson, F.N.P. | MUSC Health Emergency Medicine | Emergency Medicine | AHP |
| Gerri A Kukucka, F.N.P., M.S.N. | MUSC Health Emergency Medicine | Emergency Medicine | AHP |
| David Kabata Machungo, C.R.N.A. | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Daniel Armand Martin, BSN, C.R.N.A. | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Michael McGowan, C.R.N.A. | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Odin Brandon Owen, C.R.N.A. | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Joan Marie Cain, F.N.P. | MUSC Telehealth | Tele-Palliative | By Proxy |
| Brooke Nicole Smith, A.P.R.N. | MUSC Telehealth | Tele-Palliative | By Proxy |
| Reappointment and Clinical Privileges | | | |
| M Todd Alderson, M.D., MD, MBA | MUSC Health Heart & Vascular | Cardiovascular Disease | Active |
| Benjamin B Blackmon, Jr., M.D., M.B.A. | MUSC Health Anesthesiology | Anesthesiology | Active |
| Brandon Eric Brown, M.D. | MUSC Health Heart & Vascular | Cardiovascular Disease | Active |
| Himadri Dasgupta, M.D. | MUSC Health Heart & Vascular | Cardiovascular Disease | Active |
| Charlie Wayne Devlin, M.D. | MUSC Health Heart & Vascular | Cardiovascular Disease | Active |
| Glen Noble Dougherty, Jr., M.D. | MUSC Health Heart & Vascular | Cardiovascular Disease | Active |
| Michael Cameron Foster, M.D. | MUSC Health Heart & Vascular | Cardiovascular Disease | Active |
| Venkateshwar K Gottipaty, M.D., Ph.D. | MUSC Health Heart & Vascular | Clinical Cardiac Electrophysiology | Active |
| Norma Marie Khoury, M.D. | MUSC Health Heart & Vascular | Cardiovascular Disease | Active |
| Bashir Ahmad Lone, M.D. | MUSC Health Heart & Vascular | Interventional Cardiology | Active |
| Himaxi Maisuria, M.D., MD, FACC | MUSC Health Heart & Vascular | Cardiovascular Disease | Active |
| James Huger Richardson, M.D. | MUSC Health Heart & Vascular | Cardiovascular Disease | Active |
| Paul Anthony Zimmermann, M.D. | MUSC Health Heart & Vascular | Clinical Cardiac Electrophysiology | Active |
| Matthew Thomas Beauregard, P.A. | MUSC Health Heart & Vascular | Cardiovascular Disease | AHP |
| Caroline Marvin Bedingfield, C.R.N.A., BSN | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Cynthia R. Evans, A.C.N.P | Columbia Nephrology | Nephrology | AHP |
| Roy A Harvey, C.R.N.A., M.H.S., B.S.N. | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Kathleen I Riggan, M.S.N., BSN | MUSC Health Heart & Vascular | Cardiovascular Disease | AHP |
| Jennifer D Templeton, P.A. | South Carolina ENT | Otolaryngology | AHP |
| Joseph Robert Canteley, M.D. | MUSC Telehealth | Infectious Diseases | By Proxy |
| Alyssa Ashley Gitter, D.N.P., A.P.R.N., FNP-BC | MUSC Telehealth | Infectious Diseases | By Proxy |
| Kimberly Price Kicielinski, M.D., M.S.P.H. | MUSC Telehealth | Neurosurgery | By Proxy |
| Cassandra Danielle Salgado, M.D., M.S. | MUSC Telehealth | Infectious Diseases | By Proxy |
| Alejandro Marin Spiotta, M.D. | MUSC Telehealth | Neurological Surgery | By Proxy |
| Charles Spencer Teixeira, D.O. | MUSC Telehealth | Infectious Diseases | By Proxy |
| Change in Privileges | | | |
| Cambron, Donna, NP | MUSC Health Columbia | Palliative Care | AHP |
| Bidwell, Katrina, MD | MUSC Health Heart & Vascular | Cardiology | Active |
| Proctoring | | | |
| Davis, Nathan, M.D. | MUSC Health Neurosurgery | Neurosurgery | Active |
| Resignations | | | |
| Stephen Ray C.R.N.A. | MUSC Health Anesthesiology | Anesthesiology | AHP |
| William Deeter M.D. | Prisma Health Upstate Radiology | TeleRadiology | By Proxy |
| Ashley Seier, P.A. | South Carolina ENT | Otolaryngology | AHP |
| Susan Caudle, P.A. | MUSC Health Cardiothoracic | Cardiovascular and Thoracic Surgery | AHP |
| Ernest Stokes, P.A. | MUSC Health Cardiothoracic | Cardiovascular and Thoracic Surgery | AHP |
| Robert Kabakjian, P.A. | South Carolina ENT | Otolaryngology | AHP |
| MUSC HEALTH KERSHAW | | | |
| Practitioner name | Practice Name | Specialty | Status Request |
| Initial Appointment and Clinical Privileges | | | |
| Yalamanchili, Shankar MD | MUSC Health Kershaw Senior Retrea | Psychiatry | Active |
| Gomillion, Angelan NNP | MUSC Health Kershaw Women's Ce | Neonatology | AHP |
| Johnson, Mary Helen MD | MUSC Health Kershaw Women's Ce | Pediatrics | Active |
| Bernard-Tillman, Melissa CRNA | MUSC Midlands Health Anesthesiolo | Anesthesiology | AHP |
| Finch, Sarah CRNA | MUSC Midlands Health Anesthesiolo | Anesthesiology | AHP |
| Coston, David B., C.R.N.A. | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Homer, Jr., Michael MD | MUSC Midlands Health Anesthesiolo | Emergency Medicine | Active |
| Machungo, David CRNA | MUSC Midlands Health Anesthesiolo | Anesthesiology | AHP |
| McGowan, Michael CRNA | MUSC Midlands Health Anesthesiolo | Anesthesiology | AHP |
| Cain , Joan NP | MUSC Telehealth | Tele-Palliative | AHP |
| Smith, Brooke APRN | MUSC Telehealth | Tele-Palliative | AHP |

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| Sturkie, Joseph, PA | MUSC Midlands Health Emergency | Emergency Medicine | AHP |
| Reappointment and Clinical Privileges | | | |
| Chang, Binyue (Kittie) MD | Apogee Physicians, MUSC Midlands Health | Hospitalist | Active |
| Blind, Kenneth PA | MUSC Health Kershaw Emergency Dept | Emergency Medicine | AHP |
| Harvey, Roy CRNA | MUSC Midlands Health Anesthesiology | Anesthesiology | AHP |
| Kitchen, Katie CRNA | MUSC Midlands Health Anesthesiology | Anesthesiology | AHP |
| Change in Privileges | | | |
| Lowry, Tara NNP | MUSC Health Kershaw Women's Center | Neonatology | AHP |
| Proctoring | | | |
| Mullins, Julie MD | MUSC Health Women's Center Lugoff | OB/GYN | Active |
| Mullins, Julie MD | MUSC Health Women's Center Lugoff | OB/GYN | Active |
| Gomillion, Angelan NNP | MUSC Health Kershaw Women's Ce | Neonatology | AHP |
| Resignations | | | |
| Forrestall, Selene | MUSC Midlands Health Anesthesiology | Anesthesiology | AHP |
| Ray, Stephen C.R.N.A. | MUSC Midlands Health Anesthesiology | Anesthesiology | AHP |
| Deeter, William M.D. | Prisma Health Upstate Radiology | TeleRadiology | By Proxy |
| Kabakjian, Robert P.A. | South Carolina ENT | Otolaryngology | AHP |
| Seier, Ashley P.A. | South Carolina ENT | Otolaryngology | AHP |

MUSC HEALTH PEE DEE - Credentialing Applications - January 2024

MUSC HEALTH FLORENCE

| Practitioner name | Practice Name | Specialty | Status Request |
|---|---------------|------------------------|----------------|
| Initial Appointment and Clinical Privileges; | | | |
| Michael Halligan, M.D., B.A. | MUSC Florence | Cardiothoracic Surgery | Active |
| Greg Frederick Hertwig, M.D. | MUSC Florence | Anesthesiology | Active |
| Lance R. Hoover, M.D. | MUSC Florence | Anesthesiology | Active |
| Ioannis Karamelas, M.D. | MUSC Florence | Neurosurgery | Active |
| Fatima Memon, M.D., M.P.H | MUSC Florence | Radiology | Active |
| Deepu Sasikumaran Ushakumari, M.D. | MUSC Florence | Anesthesiology | Active |
| Andrew Thomas Scrima, B.S., M.D. | MUSC Florence | Radiology | Consulting |
| Ethan Turner, P.A. | MUSC Florence | Emergency Medicine | Allied Health |
| Laurel Diane Johnson, C.R.N.A., M.S.N. | MUSC Florence | CRNA | Allied Health |
| Benjamin Eric Jewett, M.D. | MUSC Florence | Tele-Neuro-Stroke | Tele By-Proxy |
| George Sotereanos, D.O. | MUSC Florence | Tele-Psychiatry | Tele By-Proxy |

MUSC HEALTH MARION

| Practitioner name | Practice Name | Specialty | Status Request |
|---|---------------|--------------------|----------------|
| Initial Appointment and Clinical Privileges; | | | |
| Lance R. Hoover, M.D. | MUSC Marion | Anesthesiology | Active |
| Fatima Memon, M.D., M.P.H | MUSC Marion | Radiology | Active |
| Andrew Thomas Scrima, B.S., M.D. | MUSC Marion | Radiology | Active |
| Deepu Sasikumaran Ushakumari, M.D. | MUSC Marion | Anesthesiology | Active |
| Ethan Turner, P.A. | MUSC Marion | Emergency Medicine | Allied Health |
| Laurel Diane Johnson, C.R.N.A., M.S.N. | MUSC Marion | Anesthesiology | Allied Health |
| Benjamin Eric Jewett, M.D. | MUSC Marion | Tele Neuro-Stroke | Tele By-Proxy |
| George Sotereanos, D.O. | MUSC Marion | Tele-Psychiatry | Tele By-Proxy |

MUSC HEALTH BLACK RIVER

| Practitioner name | Practice Name | Specialty | Status Request |
|---|---------------|-------------------|----------------|
| Initial Appointment and Clinical Privileges; | | | |
| Lance R. Hoover, M.D. | MUSC BRMC | Anesthesiology | Active |
| Fatima Memon, M.D., M.P.H | MUSC BRMC | Radiology | Active |
| Andrew Thomas Scrima, B.S., M.D. | MUSC BRMC | Radiology | Consulting |
| Laurel Diane Johnson, C.R.N.A., M.S.N. | MUSC BRMC | CRNA | Allied Health |
| Benjamin Eric Jewett, M.D. | MUSC BRMC | Tele Neuro-Stroke | Tele By-Proxy |
| George Sotereanos, D.O. | MUSC BRMC | Tele-Psychiatry | Tele By-Proxy |

MUSC HEALTH CATAWBA - Credentialing Applications - January 2024



MUSC HEALTH LANCASTER

| Practitioner name | Practice Name | Specialty | Status Request |
|---|---------------------|----------------------|------------------|
| Initial Appointment and Clinical Privileges; Status : Active | | | |
| Jennifer Ruth Cranny, M.D. | Weatherby | Radiology | Active |
| Neil Leslie Goldberg, M.D. | Weatherby | Radiology | Active |
| Fatima Memon, M.D. | Carolina Radiology | Radiology | Active |
| Initial Appointment and Clinical Privileges; Status : Allied Health Practitioner | | | |
| Ademola A Salami, C.R.N.A. | Weatherby | CRNA | AHP |
| Wendy A. Hall, CST, CSFA | MUSC | Cert Surg First Asst | AHP |
| Initial Appointment and Clinical Privileges; Status : Consulting | | | |
| Erik Preston Eadie, M.D. | ARK Staffing | Tele-Radiology | Consulting |
| Reappointment and Clinical Privileges; Status : Active | | | |
| Christopher T. Jones, M.D. | Charlotte Ent | Otolaryngology | Active |
| Gregory S. Parsons, M.D. | Charlotte Ent | Otolaryngology | Active |
| Robert E. Thomas, Jr., M.D. | York Pathology | Pathology | Active |
| Reappointment and Clinical Privileges; Status : Allied Health | | | |
| Mary J. Ochieng, C.R.N.A. | Contracted | CRNA | AHP |
| Benjamin M. Pugh, C.R.N.A. | Contracted | CRNA | AHP |
| Reappointment and Clinical Privileges; Status: Consulting | | | |
| Erik Thor Bendiks, M.D. | Apex Orthopaedics | Orthopaedics | Consulting |
| James W. Greyard, M.D. | Contracted | Anesthesia | Consulting |
| Fernando A. Navarro, M.D. | Contracted | General Surgery | Consulting |
| Aaron Tyler Wild, M.D. | Southeast Radiology | Radiation Oncology | Consulting |
| Reappointment Telemedicine; Status : Courtesy | | | |
| Brandon S. Percival, D.P.M. | Carolina Podiatry | Podiatry | Courtesy |
| Reappointment Telemedicine; Status : Telemedicine By Proxy | | | |
| Sarah S. Kuhn, M.D. | DMH | Tele-Psychiatry | Consulting |
| Sonal Bhatia, M.D. | MUSC | Tele-Stroke/Neuro | Telemed-By Proxy |
| Benjamin E. Jewett, M.D. | MUSC | Tele-Stroke/Neuro | Telemed-By Proxy |
| Alejandro M. Spiotta, M.D. | MUSC | Tele-Stroke/Neuro | Telemed-By Proxy |
| Temporary Privileges | | | |
| Joshua Kyle Rosenthal, P.A.C. | MUSC | General Surgery | Temporary |
| Evthokia S. Thompson, P.A.C. | MUSC | Orthopaedics | Temporary |
| Evan Ekman, MD | MUSC | Orthopaedics | Temporary |




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|---|---|--------------------------------------|-----------------------|
| Siddharth Malhotra, MD | MUSC | General Surgery | Temporary |
| Change in Privilege | | | |
| Nicole R. McKenzie, PA-C | Additional Privileges in Emergency Medicine | | |
| MUSC HEALTH CHESTER | | | |
| Practitioner name | Practice Name | Specialty | Status Request |
| Initial Appointment and Clinical Privileges; Status : Active | | | |
| Jennifer Ruth Cranny, M.D. | | Radiology | Active |
| Fatima Memon, M.D. | Carolina Radiology | Radiology | Active |
| Initial Appointment and Clinical Privileges; Status : Ambulatory/Rural Health Care | | | |
| Ariane U. Lieberman, M.D. | MUSC | Cardiology | Active–Ambul/Rural |
| Initial Appointment and Clinical Privileges; Status : Allied Health Practitioner | | | |
| Ademola A Salami, C.R.N.A. | Weatherby | CRNA | AHP |
| Initial Appointment and Clinical Privileges; Status : Consulting | | | |
| Adam Gregory Back, M.D. | MUSC | NeuroSurgery | Consulting |
| Erik Preston Eadie, M.D. | ARK Staffing | Tele-Radiology | Consulting |
| Reappointment and Clinical Privileges; Status : Telemedicine by Proxy | | | |
| Sonal Bhatia, M.D. | MUSC | Tele-Stroke/Neuro | Telemed- By Proxy |
| Benjamin E. Jewett, M.D. | MUSC | Tele-Stroke/Neuro | Telemed- By Proxy |
| Change in Privilege | | | |
| Nicole R. McKenzie, PA-C | Additional Privileges in Emergency Medicine | | |
| MUSC HEALTH MIDLANDS - Credentialing Applications - January 2024 | | | |
| MUSC HEALTH COLUMBIA | | | |
| Practitioner name | Practice Name | Specialty | Status Request |
| Initial Appointment and Clinical Privileges | | | |
| Yvette Denise Page-Turner, B.S., M.D. | MUSC Health Anesthesiology | Anesthesiology | Active |
| Jessica Jackson Rueb, M.D. | Southern Urogynecology, LLC | Urology | Active |
| April U Smith, C.R.N.A., BSN | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Corey Elizabeth Brom, P.A. | Apogee Physicians | Hospitalist | AHP |
| Allison Griffin Carpio, A.C.N.P | Columbia Nephrology | Nephrology | AHP |
| Jonathan David Lee, F.N.P. | Apogee Physicians | Hospitalist | AHP |
| Melissa Webber Richardson, N.P., BSN | MUSC Health Heart and Vascular | Cardiovascular Disease | AHP |
| Cheryl Diane Walter, C.R.N.A. | MUSC Health Anesthesiology | Anesthesiology | AHP |
| Benson Chuckwuemeka Okeiyi, M.D | Apogee Physicians | Hospitalist | Active |
| Georgina Dorriane Muth-Maurelli, N.P. | MUSC Health Heart and | Cardiovascular Disease | RHC |
| Matthew Clay Chappell, M.D. | Primary Health Outpatient Radiology | Teleradiology | By Proxy |
| Benjamin Eric Jewett, M.D. | MUSC Center for Telehealth | Teleneurology | By Proxy |
| Reappointment and Clinical Privileges | | | |
| Edward Gerald Barton, M.D. | IntraNerve | Clinical Neurophysiology | Active |
| Anna Lee Bouknight, M.D. | Palmetto ENT & Allergy | Otolaryngology | Active |
| Solomon Nakhisa Chesoni, M.D. | MUSC Health Heart and Vascular | Cardiovascular Disease | Active |
| Janaki Emani, M.D. | SC ENT, Allergy & Sleep Medicine | Otolaryngology | Active |
| Abhishek Haritha, M.D. | Prisma Health Radiology | Radiology | Active |
| Kevin K. Nahigian, M.D. | Carolina Shoulder and Knee Specialists | Orthopaedic Surgery | Active |
| Jack Edward Neil, M.D. | MUSC Health Anesthesiology | Anesthesiology | Active |
| Frank Kenneth Noojin, III, M.D. | Prisma Health Orthopedics | Orthopaedic Surgery, Sports Medicine | Active |
| Robert Puchalski, M.D. | SC ENT, Allergy & Sleep Medicine | Otolaryngology | Active |
| Joseph Anthony Sciarrino, M.D. | SC ENT, Allergy & Sleep Medicine | Otolaryngology | Active |
| Natalie Vercillo Sciarrino, M.D. | SC ENT, Allergy & Sleep Medicine | Otolaryngology | Active |
| Tab Eugene Thompson, M.D., M.B.A., B.Sc. | Palmetto ENT & Allergy | Otolaryngology | Active |
| Caitlin Tidwell, M.D. | MUSC Health Emergency Medicine | Emergency Medicine | Active |
| David Macy Vidrine, M.D. | SC ENT, Allergy & Sleep Medicine | Otolaryngology | Active |
| Amanda Suzanne Clark, F.N.P., MSN, FNP-BC | MUSC Health Primary Care | Internal Medicine | AHP |
| Krystene Lynn Helgeson, P.A. | Apogee Physicians | Hospitalist | AHP |
| Caroline Garrison Raymond, P.A. | MUSC Health Heart and Vascular | Cardiovascular Disease | AHP |
| Alan Howard Brill, M.D. | Dr. Allan H. Brill's Office | Otolaryngology | Courtesy |
| Chad Bjorn Gunnlaugsson, M.D. | Southeastern ENT, Allergy and Sleep Disorders Institute | Otolaryngology | Courtesy |
| Jonathan Douglas King, M.D. | CENTA Medical Group | Otolaryngology | Courtesy |
| J Smythe Rich, III, M.D. | Rich Plastic Surgery | Otolaryngology | Courtesy |

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| Scott William Thompson, M.D. | Carolina Eye, EAR, Nose & Throat | Otolaryngology | Courtesy |
| Jeffrey Felice Liubicich, M.D. | QLER Solutions | Telepsychiatry | By Proxy |
| Change in Privileges | | | |
| Gregory Stephen Penny, M.D., B.S. | MUSC Health Orthopedics | Orthopaedic Surgery | Active |
| Robert Blair Razick, M.D. | MUSC Health Emergency Medicine | Emergency Medicine | Active |
| Proctoring | | | |
| Davis, Nathan, M.D. | MUSC Health Neurosurgery | Neurosurgery | Active |
| MUSC HEALTH KERSHAW | | | |
| Practitioner name | Practice Name | Specialty | Status Request |
| Initial Appointment and Clinical Privileges | | | |
| Page-Turner, Yvette MD | MUSC Midlands Health Anesthesiology | Anesthesiology | Active |
| Sparkman, Tametha CRNA | MUSC Midlands Health Anesthesiology | Anesthesiology | AHP |
| Jewett, Benjamin MD | MUSC Telehealth | Tele-Neurology | By Proxy |
| Reappointment and Clinical Privileges | | | |
| Sidhom, Victor MD | Apogee Physicians | Hospitalist | Active |
| Change in Privileges | | | |
| Mullins, Julie MD | MUSC Health Women's Center Lugoff | OB/GYN | Active |
| Proctoring | | | |
| Mullins, Julie MD | MUSC Health Women's Center Lugoff | OB/GYN | Active |
| Gomillion, Angelan NNP | MUSC Health Kershaw Women's | Neonatology | AHP |

MEDICAL EXECUTIVE COMMITTEE

| <p>Medical Executive Committee Presiding: Dr. Marc Heincelman Date: November 15, 2023 Meeting Place: MS Teams Recording: Sarah de Barros Meeting Time: 7:30 am Adjournment: 8:32 am</p> | <p>Members: Dr. Basco, Dr. Boylan, Dr. Bundy, Dr. Cina, Dr. Clark, Dr. Craig, Dr. Crookes, K. Denty, Dr. DiSalvo, Dr. Edwards, Dr. Eiseman, V. Fairbairn, M. Fulton. Dr. Herzke, Dr. Heincelman, L. Infinger, Brenda Kendall-Bailey, L. Kerr, Jessica Johnson, Kiersten Leban, J. Melroy, Dr. Munden, Dr. Reeves, Dr. Russell, Dr. Salgado, Dr. D. Scheurer, Dr. M. Scheurer, Dr. Talley, Dr. Zukas, Dr. Andrews, Dr. Atz, Dr. Baliga, Dr. Steyer, Dr. Carroll, Dr. Costello, T. Crawford, M. Field, Dr. Hong, M. Kocher, D. Krywko, L. Leddy, Dr. Mack, S. Patel, Dr. Reeves, Dr. Streck</p> <p>Guests: Patricia Combs, Meghan Thomas</p> | | |
|--|--|---|--|
| Agenda/Topic | Debate & Discussion | Conclusions | Recommendation/ Follow-Up What/When/Who |
| Executive Session | n/a | n/a | |
| Review of Minutes | Minutes from October Medical Executive Committee meeting approved | Approval | Approved |
| <p>Credentials Committee</p> <ul style="list-style-type: none"> • Dr. Edwards | <p>Monthly credentialing roster presented.</p> <p>130 Files to review:</p> <ul style="list-style-type: none"> - 44 Initial Appointments - 74 Reappointments - 12 Changes in privileges - No Controversaries | <p>MEC recommends the approval of roster to the Board of Trustees</p> | Approved |
| <p>GME Report</p> <ul style="list-style-type: none"> • Dr. Talley | <ul style="list-style-type: none"> - Residents Moonlighting - Needs to be logged in as a part of their 80-hour work week - This does not apply to VISA holders or PGY 1 Residents - Policy is currently under revision | Information | |
| <p>Quality Report</p> <ul style="list-style-type: none"> • Dr. Bundy | <p>See attached Presentation</p> <ul style="list-style-type: none"> - Scorecard Review - Leapfrog - OPPE/FPPE | Information |  11.15.23 Quality Update - Bundy.ppt |
| <p>Communications Report</p> <ul style="list-style-type: none"> • Dr. Herzke | <p>See Attached Proposed Waiver Policy</p> <ul style="list-style-type: none"> - The CHS ByLaws that give direction for “waivers” - In special cases where a need exists, an exception to these qualifications can be made, only after the applicant has demonstrated competency to the satisfaction of the Department Chairperson has attested either in a written or oral format for MEC approval. | Information |  MEC CMO Update 11.15.23.pptx |

MEDICAL EXECUTIVE COMMITTEE

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|---|---|---|---|
| | | | |
| Nursing Update <ul style="list-style-type: none"> Brenda Kendall-Bailey | See Attached Presentation <ul style="list-style-type: none"> Wins Leader Announcements Quality Pillar - CAUTI & CLABSI Rates Improving Finance – Nursing Incentive/Bonuses Finance – Travelers People Pillar – Recruitment and Retention | Information |  11.15.23 MEC Nursing Update-LR. |
| New Business <ul style="list-style-type: none"> Patricia Combs | See the attached Blood Product Utilization Committee Report Presentation <ul style="list-style-type: none"> Total Blood Utilization FY14-Present Day Red Blood Cell Transfusions Platelet Utilization FY14 – Current Day AABB Comparison Current Patient Blood Management What Accumen Brings to MUSC | |  Path and Lab Med Exec Presentation 11 |
| New Business <ul style="list-style-type: none"> Meghan Thomas | See the attached MUSC-Charleston POCUS Credentialing Proposal <ul style="list-style-type: none"> MUSC POCUS Steering Committee Members Proposal Credentialed Providers Non-Credentialed Providers (who don't want credentials) Non-Credentialed Providers (who do want to be credentialed) | |  POCUS credentialing MEC 1 |
| Consent Items | | | |
| Policies <i>(Consent)</i> | <u>Policies for Approval:</u> <ul style="list-style-type: none"> None presented this month | | |
| Standing Orders <i>(Consent)</i> | <u>Standing Orders for Approval:</u> <ul style="list-style-type: none"> | | |
| Data & Service Reports <i>(Consent)</i> | <u>Data Reports:</u> ○ | <u>Service reports reviewed:</u> | Information |



MEDICAL EXECUTIVE COMMITTEE

| | | | | |
|---|--|--|---------------------------|--|
| Subcommittee Minutes <i>(Consent)</i> | <u>Committee Minutes:</u> <ul style="list-style-type: none">○ Can be located and viewed in the MUSC BOX under MEC | | <i>Information</i> | |
| Adjournment 8:32 am | The next meeting of the Medical Executive Committee will be December 20, 2023 at 7:30 am via TEAMS | | | |




Mark Heincelman, M.D.

Marc Heincelman, MD, Secretary of the Medical Staff

MEDICAL EXECUTIVE COMMITTEE

| Medical Executive Committee Presiding: Dr. Marc Heincelman Date: December 20, 2023 Meeting Place: MS Teams Recording: Sarah de Barros Meeting Time: 7:30 am Adjournment: 8:30 am | Members: Dr. Basco, Dr. Boylan, Dr. Bundy, Dr. Cina, Dr. Clark, Dr. Craig, Dr. Crookes, K. Denty, Dr. DiSalvo, Dr. Edwards, Dr. Eiseman, V. Fairbairn, M. Fulton. Dr. Herzke, Dr. Heincelman, L. Infinger, Brenda Kendall-Bailey, L. Kerr, Jessica Johnson, Kiersten Leban, J. Melroy, Dr. Munden, Dr. Reeves, Dr. Russell, Dr. Salgado, Dr. D. Scheurer, Dr. M. Scheurer, Dr. Talley, Dr. Zukas, Dr. Andrews, Dr. Atz, Dr. Baliga, Dr. Steyer, Dr. Carroll, Dr. Costello, T. Crawford, M. Field, Dr. Hong, M. Kocher, D. Krywko, L. Leddy, Dr. Mack, S. Patel, Dr. Reeves, Dr. Streck Guests: Kristin Wise, Michelle Hudspeth | | |
|---|---|--|--|
| Agenda/Topic | Debate & Discussion | Conclusions | Recommendation/ Follow-Up What/When/Who |
| Executive Session | n/a | n/a | |
| Review of Minutes | Minutes from November Medical Executive Committee meeting approved | Approval | Approved |
| Credentials Committee <ul style="list-style-type: none"> • Dr. Edwards | Monthly credentialing roster presented. 147 Files to review: <ul style="list-style-type: none"> - 68 Initial Appointments - 62 Reappointments - 12 Changes in privileges - No Controversaries | MEC recommends the approval of roster to the Board of Trustees | Approved |
| GME Report <ul style="list-style-type: none"> • Dr. Talley | <ul style="list-style-type: none"> - HIPAA compliance violation from dropping a patient list on the ground in transit. Will be reminding our residents, students and faculty that and these lists should be care for and respected, guarded at all costs. | Information | |
| Perioperative/QAPI Report <ul style="list-style-type: none"> • Dr. Crookes | See attached Presentation <ul style="list-style-type: none"> - ACS QVP Standards- Next Steps - Peri-Operative Quality Scorecard - Morbidity Summary Report - COVID Update - NPO Policy Updates and Clarification | Information |  MEC Peri-Op December 2023.pptx |
| Communications Report <ul style="list-style-type: none"> • Dr. Herzke | See Attached Slide <ul style="list-style-type: none"> - Diversion Declaration Work Flow | Information |  MEC CMO Update 12.20.23.pptx |

MEDICAL EXECUTIVE COMMITTEE

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|---|--|---------------------------|---|
| <p>Nursing Update</p> <ul style="list-style-type: none"> • Brenda Kendall-Bailey | <p>See Attached Presentation</p> <ul style="list-style-type: none"> - Wins - Leader Announcements - Service Wins - Nursing Recruitment Update - Charleston Inpatient-Patient Falls - Fall Action Plan | <p><i>Information</i></p> |  12.20.23 MEC Nursing Update.ppt |
| <p>Regulatory Update</p> <ul style="list-style-type: none"> • Kim Denty | <ul style="list-style-type: none"> - DHEC visit from a patient complaint and Orangeburg regarding the ED - Orangeburg complaint unsubstantiated - Surprise mock Joint Commission survey last week - Actual Joint Commission showed up during mock survey for two reasons: MSO Office and understaffing | | |
| <p>New Business</p> <ul style="list-style-type: none"> • Dr. Kristin Wise | <p>See the attached Non-Surgical Blood Consent Revision</p> | |  MEC Blood Consent 12.20.24.pptx |
| <ul style="list-style-type: none"> • Dr. Michelle Hudspeth | <p>See the attached Administrative Ordering Rights in EPIC</p> | |  Admin Ordering Rights.docx |
| <ul style="list-style-type: none"> • Tawnya Roscoe | <p>Annual Credentialed Staff OurDay Lessons</p> | | |
| <ul style="list-style-type: none"> • Dr. Robert Cina | <p>Medical Staff Resolution to Support Childrens Surgery Verification</p> | | |

MEDICAL EXECUTIVE COMMITTEE

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|---|---|---|--------------------|--|
| Consent Items | | | | |
| Policies <i>(Consent)</i> | <u>Policies for Approval:</u> <ul style="list-style-type: none"> • 8766 SYS – Respiratory Assess and Treatment Protocol – Adults • C-019 - SYS - Identification and Management of Patients at Risk for Suicide • C-022 - SYS - Restraint and Seclusion • C-233 SYS - MUSC Adult Web-based Intravenous Insulin Infusion Calculator (IVIIC) • C-023 SYS - Withholding/Withdrawing Life-Sustaining Treatment | | | |
| Standing Orders <i>(Consent)</i> | <u>Standing Orders for Approval:</u> <ul style="list-style-type: none"> • CHS-Ortho Standing Orders • CHS - Adult Gastrointestinal/Bariatric Surgery Ambulatory Refill | | | |
| Data & Service Reports <i>(Consent)</i> | <u>Data Reports:</u> <ul style="list-style-type: none"> ○ | <u>Service reports reviewed:</u> | Information | |
| Subcommittee Minutes <i>(Consent)</i> | <u>Committee Minutes:</u> <ul style="list-style-type: none"> ○ Can be located and viewed in the MUSC BOX under MEC | | Information | |
| Adjournment 8:32 am | The next meeting of the Medical Executive Committee will be January 17, 2023 at 7:30 am via TEAMS | | | |

Mark Heincelman, M.D.

Marc Heincelman, MD, Secretary of the Medical Staff

**AGREEMENTS ENTERED INTO BY THE MEDICAL UNIVERSITY HOSPITAL
AUTHORITY SINCE THE DECEMBER 2023 MEETING OF
THE BOARD OF TRUSTEES**

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

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

- AETNA X2
- BCBSSC X3
- DST Health Solutions, LLC
- Humana Choice Care X2
- Medicaid Branches of DHHS
- UHC
- United Behavioral Health X2

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

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

- Aiken Regional Medical Center
- HopeHealth Inc
- ISD Renal, Inc.
- National Disaster Medical System (NDMS)
- The Oaks of Orangeburg (fka The Methodist Oaks)

Affiliation Agreements –

- Campbell University, Incorporated
- Clafin University
- Clafin University
- Clinton College
- Fielding Graduate University
- Lancaster County School District
- Laramie County Community College
- Laurel Business Institute, Inc. d/b/a Laurel Institute of Technology
- Lenoir Community College
- Lowcountry Regional EMS Council Inc.
- Miller-Motte College
- Newberry College
- Northern Kentucky University
- Orangeburg Consolidated School District Five Charter High School for Health Professions
- Tender Care Training Center
- The Palmetto School of Ultrasound

Touro University
UNIVERSITY OF KENTUCKY
Virginia College - Columbia Campus
Virtual Learning Institute, LLC d/b/a Neurodiagnostic Technology Institute
Carmichael Medical Training, LLC
Delaware Technical and Community College
Southern Illinois University (Board of Trustees)
University of Findlay

Clinical Services Agreements –

Carolina Autotransfusion, Inc.
Olympus America Inc.
Patient Pathways, LLC
Scope International USA, Inc.
Society for Vascular Surgery Patient Safety Organizations LLC

Consulting Contracts over \$50k –

Cleverly & Associates
Executive Consulting, LLC d/b/a ECG Management Consultants
HR&A Advisors
iMethods, LLC
Jim Pope

**MEDICAL UNIVERSITY OF SOUTH CAROLINA
CONSTRUCTION CONTRACTS
FOR REPORTING
February 8, 2024**

MUSC General Construction Projects:

| | |
|--|-----------------|
| E2 Development IOP 3 rd Floor Renovation | \$ 385,591.00 |
| J Davis Construction Inc. CON 1 st Floor Renovation | \$ 2,380,415.00 |
| McCarter Mechanical Inc. MRE Chiller 1 and Controls Replacement | \$ 1,226,829.00 |
| Metro Electric Company, Inc. CSB First Floor Electrical Switchgear Replacement | \$ 1,115,000.00 |

Other Contracts:

CM-R Contracts

| | |
|--|------------------|
| Thompson-Turner Construction CoHP President Street Academic Building | \$ 59,561,668.00 |
|--|------------------|

**MEDICAL UNIVERSITY OF SOUTH CAROLINA
PROFESSIONAL SERVICES
FOR REPORTING
February 8, 2024**

MUSC Indefinite Delivery Releases:

| | |
|--------------------------------------|--------------|
| RMF | \$ 68,700.00 |
| BSB Motor Control Center Replacement | |

Professional Service Contracts:

| | |
|---|---------------|
| SMHa, Inc. | \$ 111,762.00 |
| CoHP President Street Academic Building | |

| | |
|---|--------------|
| SMHa, Inc. | \$ 74,338.00 |
| CoHP President Street Academic Building | |

IDQ Contracts:

Coast Architects, Inc.

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

Compass 5 Partners, LLC

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

Liollo

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

McMillan Pazdan Smith

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

MUSC Conflict of Interest Annual Report FY 2023

The intent of the subject report is to summarize the results of the MUSC FY 2023 annual conflict of interest (COI) disclosure reporting cycle. Salaried MUSC employees and investigators involved in research activities on MUSC’s behalf must complete a conflict of interest disclosure at the time of hire and annually thereafter, with the information disclosed corresponding to the preceding twelve (12) months. In addition, employees are required to update their disclosure within 30 days if a new business/financial interest or outside activity develops, or an existing interest/activity changes, during the year.

Employees are required to disclose every potential circumstance where the employee or a family member (defined to include parents, spouse, siblings, children, stepchildren, and grandchildren) “receives [a] personal financial benefit or economic interest” related to a role the employee (or family member) holds that could or be perceived to:

- Inappropriately influence their judgment;
- Compromise their ability to fulfill their duties at MUSC; or,
- Potentially be a detriment to any MUSC Enterprise related action.

The intent of the COI disclosure process is to document all active, non-MUSC related business/financial relationships or outside activities in the following categories:

| Business/Financial Relationship Disclosure Categories |
|--|
| Advisory Board/Committee |
| Consulting |
| Equity (privately held entity) |
| Intellectual Property |
| Leadership Role |
| Royalties |
| Speaking |
| Stock (publicly held entity) |
| Other (e.g., unrelated part time employment, etc.) |

2023 COI Disclosure Cycle Data Summary

| Entity | Total Annual Disclosure Respondents* | COI Eligible Disclosure Respondents* | Total Employees Reporting Business/Financial Relationship | Total Individual Business/Financial Relationships Reported |
|-----------------|--------------------------------------|--------------------------------------|---|--|
| MUSC/University | 4,816 | 4,254 | 483 (10%) | 1,176 |
| MUHA | 3,281 | 2,879 | 113 (3.4%) | 173 |
| MUSCP/UMA | 673 | 590 | 19 (2.8%) | 45 |
| Total | 8,770 | 7,723 | 615 (7%) | 1,394 |

* - Total disclosure respondent count includes employees subject to the annual disclosure process (i.e., "COI Eligible"; exempt/salaried employees and investigators involved in research activities) as well as employees providing a disclosure but not subject to the annual disclosure process (i.e., non-exempt/hourly). During the FY 2023 Disclosure Cycle, 99.3% of subject employees (i.e., "COI Eligible") provided an annual disclosure in compliance with MUSC policy.

2023 Reported Business/Financial Relationships – Value Range

| Value Range | 2023 |
|---------------------|-------------|
| \$0 - \$4,999 | 70% |
| \$5,000 - \$24,999 | 18% |
| \$25,000 - \$49,999 | 5% |
| \$50,000 - \$74,999 | 2% |
| \$75,000 - \$99,999 | 1% |
| >\$100,000 | 4% |

2023 Business/Financial Relationship Disclosure Categories

| Business/Financial Relationship Disclosure Categories | 2023 |
|--|-------------|
| Advisory Board/Committee | 13% |
| Consulting | 32% |
| Equity (privately held entity) | 12% |
| Intellectual Property | 6% |
| Leadership Role | 5% |
| Royalties | 5% |
| Speaking | 10% |
| Stock (publicly held entity) | 9% |
| Other (e.g., unrelated part time employment, etc.) | 8% |

2023 Research Conflict of Interest Reviews

The MUSC Conflict of Interest Office conducted 910 research and sponsored project related reviews during FY 2023.

Additional 2023 Conflict of Interest Initiatives

The Conflict of Interest Office collaborated with applicable MUSC Enterprise stakeholders to initiate the implementation of a new COI disclosure submittal/tracking program. The intent of the COI disclosure system upgrade is improved integration with existing/interrelated MUSC Enterprise systems, facilitate system technical support, and improved data analysis/reporting. It is anticipated that full implementation of the new COI disclosure system will be completed during FY 2024.

Due to the expanding footprint and associated activities of the MUSC Enterprise, the COI Office initiated the review/update of the Research Conflict of Interest (RCOI) and University Conflict of Interest (UCOI) committees' charters and associated membership composition in order to: ensure the effective administration of existing COI related policies/procedures; recommend new and/or revised policies or



Conflict of Interest Office

22 WestEdge Street

Suite 300

Charleston, SC 29403

<https://web.musc.edu/about/coi>

procedures; ensure legal compliance; and, protect institutional credibility, integrity, and public trust across the enterprise. It is anticipated that the RCOI and UCOI committee charter updates will be finalized during FY 2024, pending senior leadership approval.

MEDICAL UNIVERSITY OF SOUTH CAROLINA (MUSC) BOARD OF TRUSTEES
CONSENT AGENDA
February 9, 2024
101 Colcock Hall

Research & Institutional Advancement Committee: Dr. Melvin Brown, Interim Chair

Consent for Information

- Item 21. Institutional Advancement Report Kate Azizi
Vice President for Institutional Advancement

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

Consent Agenda for Approval

- Item 22. Endowed Chair Appointments Dr. Lisa Saladin
Executive Vice President for Academic Affairs and Provost

College of Dental Medicine

Mark Miller, DMD, M.D., FACS, Associate Dean for Hospital Affairs, Oral and Maxillofacial Surgery (OMFS) residency program director and Associate Professor for the James B. Edwards College of Dental Medicine, for appointment to the Faculty Endowed Chair, effective February 9, 2024.

College of Medicine

Shikhar Mehrotra, Ph.D., Professor in the Department of Surgery for appointment to the Robert K. Stuart, M.D. Distinguished Chair in Hematology/Oncology, effective February 9, 2024.

- Item 23. Faculty Tenure Dr. Lisa Saladin
Executive Vice President for Academic Affairs and Provost

College of Medicine

William G. Hawkins, M.D., as Professor with Tenure on the Academic Clinician track, in the Department of Surgery, Division of Surgical Oncology, effective January 1, 2024. Dr. Hawkins will hold the A. R. Folk Endowed Chair and serve as Deputy Director of the Hollings Cancer Center, Director of Strategic Growth and Clinical Research in the MUSC Oncology ICCE, and the Vice Chair of Clinical Affairs within the Department of Surgery.

- Item 24. Faculty Appointments Dr. Lisa Saladin
Executive Vice President for Academic Affairs

College of Dental Medicine

Luis C. Yepes, DDS, as Associate Professor on the academic clinician tenure track in the Department of Biomedical and Community Health Sciences, Division of Emergency Services, effective January 4, 2024.

College of Medicine

Uwe Blecker, M.D., MHM, as Clinical Professor, in the Department of Pediatrics, Division of Pediatric Gastroenterology, effective March 1, 2024.

Anna Kristin Brady M.D., Associate Professor, on the Clinician Educator track, in the Department of Medicine, Division of Pulmonary and Critical Care, effective January 1, 2024.

Wendy Lyn C. Estrellado-Cruz, M.D., Clinical Associate Professor, in the Department of Pediatrics, Division of Pediatric Pulmonary, Allergy and Immunology, effective November 1, 2023.

William G. Hawkins, M.D., as Professor with Tenure on the Academic Clinician track, in the Department of Surgery, Division of Surgical Oncology, effective January 1, 2024. Dr. Hawkins will hold the A. R. Folk Endowed Chair and serve as Deputy Director of the Hollings Cancer Center, Director of Strategic Growth and Clinical Research in the MUSC Oncology ICCE, and the Vice Chair of Clinical Affairs within the Department of Surgery.

Amarendra K. Neppalli, M.D., Clinical Associate Professor, in the Department of Medicine, Division of Hematology/Oncology, effective January 2, 2024.

Item 25. Professor Emerita / EmeritusDr. Lisa Saladin
Executive Vice President for Academic Affairs and Provost

College of Medicine

Peter P. Cotton, M.D., Professor Emeritus, in the Department of Medicine, Division of Gastroenterology and Hepatology, effective January 5, 2024.

Thomas E. Keane, MBBCh, Professor Emeritus in the College of Medicine, Department of Urology, effective December 31, 2023.

College of Health Professions

Willette Burnham-Williams, Ph.D., MEd, Professor Emerita in the Department of Health Studies, effective December 31, 2023.

Item 26. PromotionsDr. Lisa Saladin
Executive Vice President for Academic Affairs and Provost

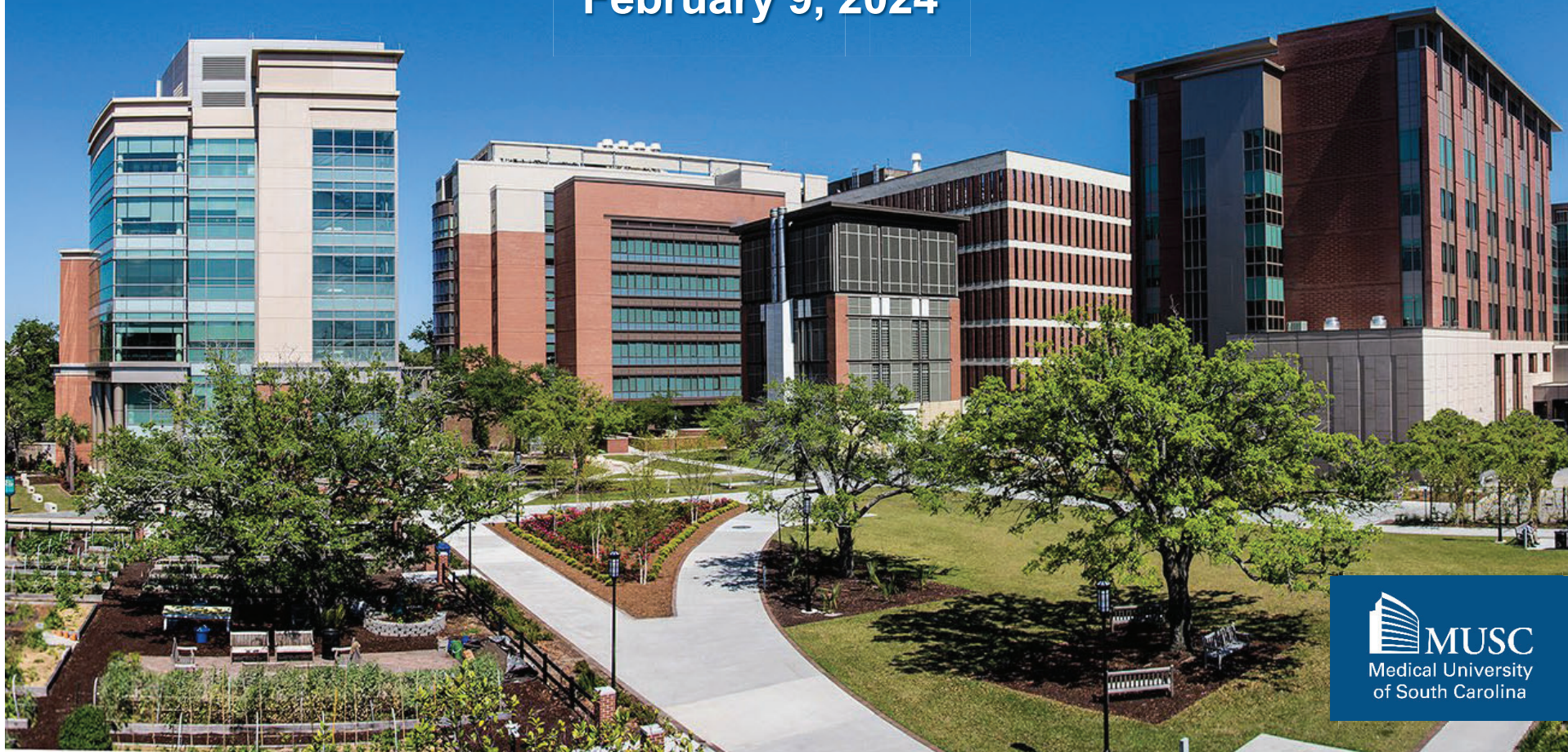
College of Dental Medicine

Robert A. Lowe, DDS, from Assistant Professor to Associate Professor in the Department of Reconstructive and Rehabilitation Sciences, effective July 1, 2024.

Item 27. Revised Honor Code Policy for Approval.....Dr. Lisa Saladin
Executive Vice President for Academic Affairs and Provost

MUSC Board of Trustees Institutional Advancement Update

February 9, 2024



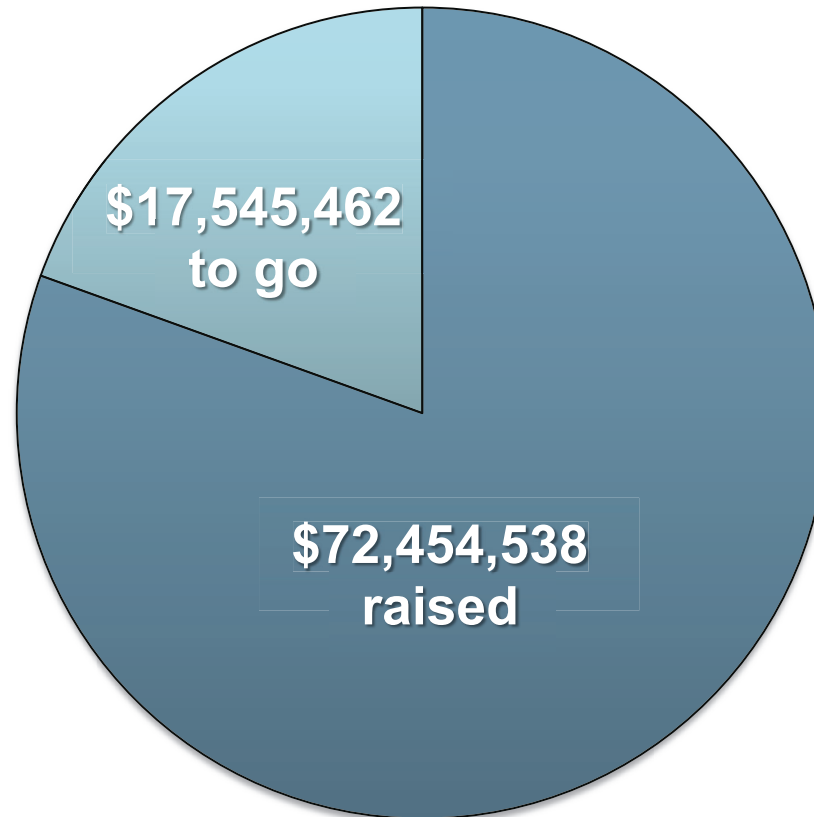
Goal 1: Raise \$90 million

FY24 progress as of January 22, 2024

Goal:
\$90,000,000

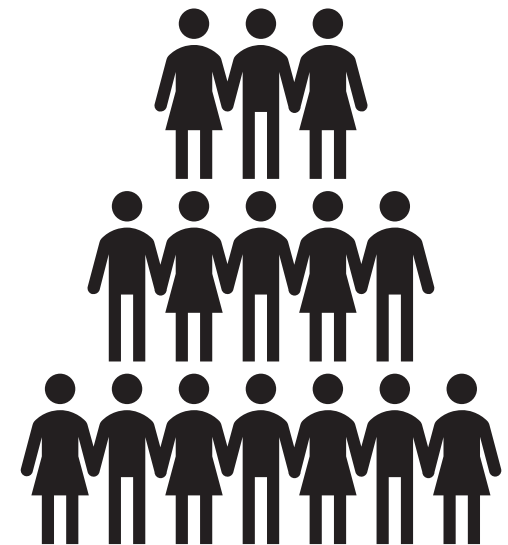
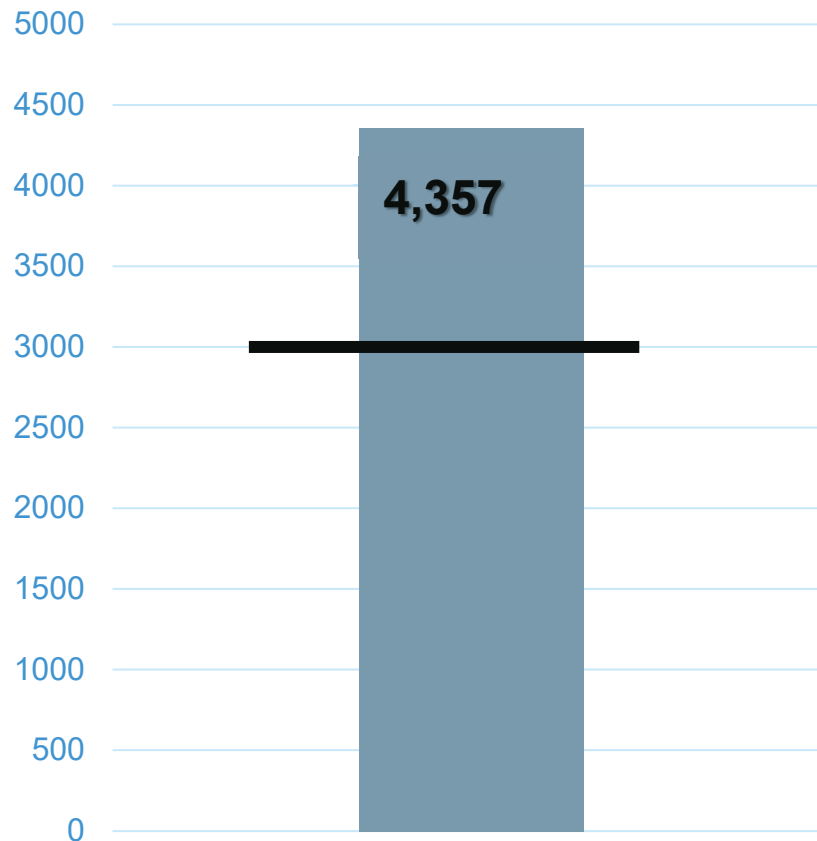
Achieved:
\$72,454,538

Progress to
Goal: 81%



Goal 2: Increase # of New Donors by 3,000

FY24 progress as of January 22, 2024



Progress to Goal:
145%

Medical University of South Carolina
COLLEGE OF DENTAL MEDICINE
ABBREVIATED CURRICULUM VITAE

Date: 3/20/23

Name: Miller Mark _____
Last First Middle

Citizenship and/or Visa Status: US

Office Address: 173 Ashley Avenue, BSB 453D Telephone: (270) 994-4565
Charleston, SC 29425

Education: (Baccalaureate and above)

| <u>Institution</u> | <u>Years Attended</u> | <u>Degree/Date</u> | <u>Field of Study</u> |
|--|-----------------------|--------------------|-----------------------|
| <u>Univ of FL College of Medicine</u> | <u>2014</u> | <u>MD</u> | <u>Medicine</u> |
| <u>Univ of KY College of Dentistry</u> | <u>1998</u> | <u>DMD</u> | <u>Dentistry</u> |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Graduate Medical Training: (Chronological)

| | <u>Place</u> | <u>Dates</u> |
|---|---|------------------|
| Internship <u>ACGME Accredited Services</u> | <u>University of FL, Jacksonville, FL</u> | <u>2014-2015</u> |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

| | <u>Place</u> | <u>Dates</u> |
|--|---|------------------|
| Residencies or Postdoctoral: <u>OMFS</u> | <u>University of FL, Jacksonville, FL</u> | <u>2009-2016</u> |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

| | | |
|-----------------------------|---|--------------------------|
| Board Certification: | <u>Diplomate American Board of Oral & Maxillofacial Surgery</u> | Date: <u>2018</u> |
| | <u>(CAQ) Certificate of Added Qualification in Pediatric Craniomaxillofacial Surgery/</u> | Date: _____ |
| | <u>American Board of Oral & Maxillofacial Surgery</u> | Date: <u>2021</u> |
| | _____ | Date: _____ |

| | | |
|-------------------|--------------------------------|--------------------------|
| Licensure: | <u>Texas Medical License</u> | Date: <u>2017</u> |
| | <u>Texas Dental License</u> | Date: <u>2017</u> |
| | <u>Florida Medical License</u> | Date: <u>2016</u> |
| | _____ | Date: _____ |

Faculty appointments: (Begin with initial appointment)

| <u>Years</u> | <u>Rank</u> | <u>Institution</u> | <u>Department</u> |
|--------------|-------------|--------------------|-------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

First Appointment to MUSC: Rank Associate Professor **Date:** 7/1/23

Shikhar Mehrotra, PhD
Abbreviated Curriculum Vitae
Professor
(843) 792-9195
mehrotr@musc.edu

Personal Information

Country of Origin: India
Languages: English, Hindi

Contact Information

No activities entered.

Degrees

| | |
|------|--|
| 2001 | Ph.D., Immunology, Sanjay Gandhi Postgraduate Institute of Medical Sciences, India |
| 1996 | M.Sc., Microbiology, Avadh University, India |
| 1994 | B.Sc., Chemistry and Botany and Zoology, Avadh University, India |

Post-Graduate Training

Post-Doctorate, University of Connecticut Health Center, Postdoctoral Fellow, September 2001, September 2006

Additional Training

No activities entered.

Certifications

No activities entered.

Professional Licensures

No activities entered.

MUSC Rank and Promotion History

Research Assistant Professor, Medical University of South Carolina, College of Medicine, Surgery, General Surgery, 2006-10-01, 2007-07-31

Professor, Medical University of South Carolina, College of Medicine, Surgery, General Surgery, 2021-01-01

Professor, Medical University of South Carolina, College of Medicine, Microbiology and Immunology, 2021-01-01

Associate Professor, Medical University of South Carolina, College of Medicine, Surgery, General Surgery, 2012-01-01, 2020-12-31

Associate Professor, Medical University of South Carolina, College of Medicine, Microbiology and Immunology, 2012-07-01, 2020-12-31

Associate Professor, Medical University of South Carolina, College of Graduate Studies, 2008-11-03

Assistant Professor, Medical University of South Carolina, College of Medicine, Surgery, General Surgery, 2007-08-01, 2011-12-31

Non-MUSC Rank and Promotion History

No activities entered.

William Hawkins, MD
Abbreviated Curriculum Vitae
Professor
hawkinwi@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

| | |
|------|--|
| 1995 | M.D., Medicine, SUNY at Stony Brook School of Medicine |
| 1991 | B.S., Biology, State University of New York at Stony Brook |

Post-Graduate Training

Fellowship, Memorial Sloan-Kettering Cancer Center, Surgical Oncology, July 2002, June 2004
Fellowship, Memorial Sloan-Kettering Cancer Center, Surgery Research, July 1998, June 2000
Residency, Massachusetts General Hospital, Surgery, July 2000, June 2002
Residency, Deaconess-Harvard Surgical Service, Surgery, July 1995, June 1998

Additional Training

2015-01-01, 2015-12-31, Olin School of Business, Washington University in St. Louis, Academic Medical Leadership Program, Training

Certifications

American Board of Surgery, Type of Certification: Board Certification, Specialty: Surgery, Certification Number: 48590, Effective Date: 2003-10-29, Expiration Date (if none, see note above): 2024-12-31

Professional Licensures

Missouri Medical License, Month / Year Originally Conferred: July 2004, Month/Year Expires: January 2025, 2004005490
Illinois Medical License, Month / Year Originally Conferred: June 2021, Month/Year Expires: July 2026, 036.158340

MUSC Rank and Promotion History

Non-MUSC Rank and Promotion History

Professor (Tenure), Washington University School of Medicine, Surgery, 2014-01-01
Associate Professor, Washington University School of Medicine, Surgery, 2009-01-01, 2014-12-31
Assistant Professor, Washington University School of Medicine, Surgery, 2004-01-01, 2009-12-31

Uwe Blecker, MD
Abbreviated Curriculum Vitae
Clinical Professor
blecker@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

| | |
|------|--|
| 1992 | M.H.M, Hospital Medicine, Vrije Universiteit Brussel |
| 1990 | M.D., Medicine, Vrije Universiteit Brussel |
| 1986 | B.S., Medical Sciences, Vrije Universiteit Brussel |

Post-Graduate Training

Fellowship, Vrije Universiteit Brussel , Pediatric Gastroenterology , December 1994, August 1995
Fellowship, University of Chicago, Pediatric Gastroenterology, July 1994, November 1994
Fellowship, Hahnemann University Hospital , Pediatric Gastroenterology , July 1993, June 1994
Residency, Free University of Brussels, Pediatrics , July 1990, June 1993

Additional Training

No activities entered.

Certifications

American Heart Association, Type of Certification: Life Support, Specialty: PALS, Certification Number: N/A, Effective Date: 2023-04-24, Expiration Date (if none, see note above): 2025-04-24
American Heart Association, Type of Certification: Life Support, Specialty: BLS, Certification Number: N/A, Effective Date: 2022-08-01, Expiration Date (if none, see note above): 2024-08-01
American Board of Pediatrics, Type of Certification: Board Certification, Specialty: Pediatric Gastroenterology, Certification Number: 729, Effective Date: 2003-08-13, Expiration Date (if none, see note above): 2024-02-15
American Board of Pediatrics, Type of Certification: Board Certification, Specialty: Pediatrics, Certification Number: 69366, Effective Date: 2000-10-24, Expiration Date (if none, see note above): 2024-02-15

Professional Licensures

Louisiana Medical License, Month / Year Originally Conferred: March 1996, MD.11619R
Georgia Medical License, Month / Year Originally Conferred: December 2013, 071096
Florida Medical License, Month / Year Originally Conferred: August 2019, ME142129

MUSC Rank and Promotion History

Non-MUSC Rank and Promotion History

Visiting Professor , University of Texas Medical Branch, Pediatrics, 2005-01-01, 2005-12-31
Professor , The University of Arizona Health Sciences Center , Pediatrics, 2000-08-01, 2001-02-01

Professor , Drexel University , Pediatrics, 2001-03-01, 2002-04-30

Professor, Mayo College of Medicine, 912020

Professor, West Virginia University Health Sciences Center, Pediatrics and Medicine , 2008-05-01

Professor, The University of Mississippi Medical Center, Pediatrics, 2014-07-01, 2015-11-30

Professor, Tulane University School of Medicine , Pediatrics, 2015-12-01, 2018-06-30

Courtesy Professor, University of Florida , Pediatrics, 2020-03-01

Clinical Professor, Florida State University, Pediatrics, 2021-02-01

Associate Professor , Thomas Jefferson University , Pediatrics, 1998-07-01, 2000-08-31

Associate Professor, Louisiana State University School of Medicine, Pediatrics, 1996-07-01, 1998-07-31

Adjunct Professor, The University of Utah , Pediatrics, 2017-06-01, 2020-01-31

Anna Brady, MD
Abbreviated Curriculum Vitae
Associate Professor
bradyan@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

2010 M.D., Medicine, Cleveland Clinic Lerner College of Medicine, Case Western Reserve University
2005 B.S., Biochemistry, Case Western Reserve University
B.A., Spanish, Case Western Reserve University

Post-Graduate Training

Fellowship, University of Washington, Medicine, 2014, 2017
Internship, Hospital of the University of Pennsylvania, Internal Medicine, 2010, 2011
Residency, Hospital of the University of Pennsylvania, Internal Medicine, 2011, 2013

Additional Training

No activities entered.

Certifications

No activities entered.

Professional Licensures

Oregon License, Month / Year Originally Conferred: April 2017, Month/Year Expires: December 2023, Oregon,
MD1182231

MUSC Rank and Promotion History

Associate Professor, Medical University of South Carolina, College of Medicine, Medicine, Pulmonary & Critical
Care Medicine, 2024-01-01

Non-MUSC Rank and Promotion History

Associate Professor, OHSU, 2023-07-01, 2023-12-31
Assistant Professor, OHSU, 2017-08-01, 2023-06-30

Wendy Lyn Estrellado-Cruz, MD
Abbreviated Curriculum Vitae
Clinical Associate Professor
estralla@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

1991 M.D., Medicine, Far Eastern University-Dr. Nicanor Reyes Medical Foundation
1987 B.S., Medical Technology , Far Eastern University

Post-Graduate Training

Clinical Practice Pathway , Children's Mercy Hospital , Sleep Medicine , July 2008, June 2010
Fellowship, Children's Hospital of Chicago, Pediatric Pulmonary , July 2003, July 2005
Fellowship, Jackson Memorial Medical Center , Pediatric Pulmonary, July 2002, June 2003
Internship, Rizal Medical Center , Rotating Internship, July 1991, June 1992
Residency, Philippine General Hospital, Pediatric , July 1996, June 1998
Residency, Children's Hospital of Philadelphia , Pediatric, August 2005, July 2007
Residency, Luisiana District Hospital, Medicine, July 1993, June 1995

Additional Training

No activities entered.

Certifications

American Board of Pediatrics , Type of Certification: Board Certification, Specialty: Pulmonology, Certification Number: 843, Effective Date: 2008-01-01, Expiration Date (if none, see note above): 2025-12-31
American Board of Pediatrics, Type of Certification: Board Certification, Specialty: Sleep Medicine, Certification Number: 171, Effective Date: 2011-01-01, Expiration Date (if none, see note above): 2032-12-31

Professional Licensures

Missouri Medical License, Month / Year Originally Conferred: March 2007, 2007008746
Kansas Medical License, Month / Year Originally Conferred: December 2007, 04-32820

MUSC Rank and Promotion History

Non-MUSC Rank and Promotion History

Assistant Professor , Kansas University Medical Center , 2020-01-01
Assistant Professor , Kansas City, School of Medicine , University of Missouri, Pediatrics , 2007-01-01

William Hawkins, MD
Abbreviated Curriculum Vitae
Professor
hawkinwi@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

| | |
|------|--|
| 1995 | M.D., Medicine, SUNY at Stony Brook School of Medicine |
| 1991 | B.S., Biology, State University of New York at Stony Brook |

Post-Graduate Training

Fellowship, Memorial Sloan-Kettering Cancer Center, Surgical Oncology, July 2002, June 2004
Fellowship, Memorial Sloan-Kettering Cancer Center, Surgery Research, July 1998, June 2000
Residency, Massachusetts General Hospital, Surgery, July 2000, June 2002
Residency, Deaconess-Harvard Surgical Service, Surgery, July 1995, June 1998

Additional Training

2015-01-01, 2015-12-31, Olin School of Business, Washington University in St. Louis, Academic Medical Leadership Program, Training

Certifications

American Board of Surgery, Type of Certification: Board Certification, Specialty: Surgery, Certification Number: 48590, Effective Date: 2003-10-29, Expiration Date (if none, see note above): 2024-12-31

Professional Licensures

Missouri Medical License, Month / Year Originally Conferred: July 2004, Month/Year Expires: January 2025, 2004005490
Illinois Medical License, Month / Year Originally Conferred: June 2021, Month/Year Expires: July 2026, 036.158340

MUSC Rank and Promotion History

Non-MUSC Rank and Promotion History

Professor (Tenure), Washington University School of Medicine, Surgery, 2014-01-01
Associate Professor, Washington University School of Medicine, Surgery, 2009-01-01, 2014-12-31
Assistant Professor, Washington University School of Medicine, Surgery, 2004-01-01, 2009-12-31

Amarendra Kumar Neppalli, MD
Abbreviated Curriculum Vitae
Assistant Professor
843-792-4271
neppalli@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

2009 M.S., Public Health, Missouri State University, Missouri, United States
2006 M.D., Medicine, Osmania Medical College

Post-Graduate Training

Post-Doctorate, LSU Health Shreveport, Residency in Internal Medicine, September 2009, September 2012
Post-Doctorate, LSU Health Shreveport, Fellowship in Hematology/Oncology, September 2012, September 2015
Post-Doctorate, Stanford University, Fellowship in Blood and Marrow Transplant, September 2015, September 2016

Additional Training

No activities entered.

Certifications

American Board of Internal Medicine Subspecialty; Medical Oncology, Effective Date: Board Eligible
American Board of Internal Medicine Subspecialty; Hematology. Certified, Effective Date: Exp 2025
American Board of Internal Medicine, Effective Date: Exp 2022

Professional Licensures

The Medical Board of California Certificate # A135664
SC Board of Medical Examiners, Month / Year Originally Conferred: April 2016
Louisiana State Board of Medical Examiners Certificate # MD205544
District Columbia, License , Month / Year Originally Conferred: October 2022, MD210002871

MUSC Rank and Promotion History

Assistant Professor, Medical University of South Carolina, College of Medicine, Medicine, Hematology/Oncology,
2016-08-04, 2022-11-15

Non-MUSC Rank and Promotion History

Associate Professor, The George Washington University , 2022-11-01

Peter B. Cotton, MD
Abbreviated Curriculum Vitae
Professor
843-876-4269
cottonp@musc.edu

Personal Information

Country of Origin: United Kingdom

Contact Information

No activities entered.

Degrees

| | |
|------|---|
| 1971 | M.D., Medicine, Cambridge University |
| 1963 | M.B., B.Chir, Medicine and Surgery, St. Thomas' Hospital and Medical School M.A., Cambridge University |
| 1960 | B.A., Cambridge University |

Post-Graduate Training

Post-Doctorate, London, Southampton and Birmingham, Intern and Junior Resident appointments, September 1963, September 1966

Post-Doctorate, St. Thomas' Hospital and Medical School London, Registrar and Senior Registrar, September 1966, September 1973

Additional Training

No activities entered.

Certifications

Membership Royal College of Physicians (MRCP London), Effective Date: 1966

Diploma of Child Health, Effective Date: 1965

Accreditation in Gastroenterology (RCP London), Effective Date: 1970

Professional Licensures

South Carolina, USA

North Carolina, USA

California, USA (honorary)

British General Medical Council

MUSC Rank and Promotion History

Professor, Medical University of South Carolina, College of Medicine, Medicine, Gastroenterology & Hepatology, 2024-01-05

Professor, Medical University of South Carolina, College of Medicine, Medicine, Gastroenterology & Hepatology, 1994-07-01, 2024-01-04

Professor, Medical University of South Carolina, College of Graduate Studies, 2000-12-20

Non-MUSC Rank and Promotion History

Senior Lecturer in Medicine, The Middlesex Hospital and Medical School, London, 1973-09-01

Professor of Medicine, Duke University, North Carolina, USA, Department of Medicine, 1987-09-01

Thomas E. Keane, MBBCh
Abbreviated Curriculum Vitae
Professor
(843) 792-5347
keanet@musc.edu

Personal Information

No activities entered.

Contact Information

No activities entered.

Degrees

1981 M.B.,B.Ch., Medicine, University College Dublin, Ireland

Post-Graduate Training

Post-Doctorate, Duke University Med. Center, Durham, NC, Urology Research Fellow, September 1988, September 1989

Post-Doctorate, Duke University Med. Center, Durham, NC, Urology Resident, Prof. David Paulson, September 1989, September 1993

Post-Doctorate, N. Tees General Hospital, Cleveland, UK, Surgical Registrar, GU/General Surgery, Mr. H.B. Devlin, September 1986, September 1988

Post-Doctorate, Intern, Medicine/Surgery, Professor: N.O. Higgins, September 1981, September 1982

Post-Doctorate, Surgical Registrar, Casualty Officer, Senior House Officer, September 1983, September 1986

Post-Doctorate, University College Dublin, National University of Ireland, Anat. Demonstratorship, September 1982, September 1983

Additional Training

No activities entered.

Certifications

No activities entered.

Professional Licensures

South Carolina License #23137

Georgia License # 037586

MUSC Rank and Promotion History

Professor, Medical University of South Carolina, College of Medicine, Urology, 2002-05-01

Professor, Medical University of South Carolina, College of Graduate Studies, 2012-08-29

Non-MUSC Rank and Promotion History

Assistant Professor, Emory University, Department of Urology, 1993-08-01, 1997-04-01

Medical University of South Carolina
COLLEGE OF HEALTH PROFESSIONS
ABBREVIATED CURRICULUM VITAE

Date: 05/04/2011

Name: Burnham Willette Sharp
Last First Middle

Citizenship and/or Visa Status: U.S.A.

Office Address: MUSC – HSC Telephone: 843-792-2146
45 Courtenay Dr. SW 213, MSC 975
Charleston, SC 29425-9750

Education: (Baccalaureate and above)

| <u>Institution</u> | <u>Years attended</u> | <u>Degree/Date</u> | <u>Field of Study</u> |
|-------------------------------------|-----------------------|--------------------|--------------------------------|
| <u>University of South Carolina</u> | <u>2004-2010</u> | <u>PhD</u> | <u>Higher Education Admin.</u> |
| <u>University of South Carolina</u> | <u>1993-1997</u> | <u>ME</u> | <u>Education</u> |
| <u>Trinity College</u> | <u>1972-1976</u> | <u>BA</u> | <u>English</u> |
| | | | |
| | | | |

Graduate Medical Training: (Chronological)

| <u>Internship</u> | <u>Place</u> | <u>Dates</u> |
|-------------------|--------------|--------------|
| | | |
| | | |

| <u>Residencies or Postdoctoral:</u> | <u>Place</u> | <u>Dates</u> |
|-------------------------------------|--------------|--------------|
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Board Certification: _____ Date: _____
 _____ Date: _____
 _____ Date: _____

Licensure: _____ Date: _____
 _____ Date: _____
 _____ Date: _____
 _____ Date: _____

Faculty appointments: (Begin with initial appointment)

| <u>Years</u> | <u>Rank</u> | <u>Institution</u> | <u>Department</u> |
|--------------|-------------|--------------------|-------------------|
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First Appointment to MUSC: Rank _____ Date: _____

Summary of Honor Code Policy Updates (Proposed 02/09/2024)

Section IV. Violations of the Honor Code Policy

F. **Deceit** has been updated to Lying

Section V. The Honor Council at MUSC

A. **Purpose & Organization:** updated language on confidentiality

J. **Training:** updated to communicate that “confidentiality” is reiterated during training

Section VI. Procedures for Resolving Reported Violations of the Academic Integrity Policy

A. **General Principles Governing the Resolution of Reported Violations:** references new reporting system and initial report assessment

J. **Formal Hearing:** new statement on the involvement of attorneys in formal hearings

Section VIII. Appeal

J. **Petition to Select Panel for Review:** updated language for clarity and precision



Student Policy

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|---|--|---|--|
| Section # ** NA | Policy # U-STU-001 | Honor Code <u>Policy</u> | |
| Responsible Department: Education and Student Life | | | |
| Date Originated 10/12/2001 | Last Reviewed 08/14/2020 02/09/2024 | Last Revised 08/14/2020 02/09/2024 | Effective Date* 08/14/202002/09/2024 |

Printed copies are for reference only. Please refer to the electronic copy for the official version.

I. Preamble

The Honor Code Policy is the foundation and bulwark of academic integrity at the Medical University of South Carolina ("MUSC").

Students enter MUSC to become part of a noble profession. An important part of that development is a commitment to the integrity and ethical standards of that profession.

The central purpose of the Honor Code Policy is to sustain and protect an environment of mutual respect and trust in which students can enjoy the freedom to develop their intellectual and personal potential. The Honor Code Policy depends upon the willingness of every individual to adhere to the basic principles of academic integrity and agree never to behave unfairly or dishonestly in academic work, or tolerate those who do. Only through a mutual commitment to maintaining this high standard can students at MUSC enjoy the benefits of a community that is marked by honesty and integrity.

The Honor Code Policy both promotes and requires an atmosphere of trust in which students tell the truth, live honestly, advance on individual merit, and demonstrate deep respect for others in the academic, clinical, and research communities. The Honor Code Policy is administered by and for the members of the MUSC community, and it depends on cooperation and support from each community member.

II. Applicability and Dissemination of the Honor Code Policy

Every student at MUSC is bound by the Honor Code Policy, upon acceptance for admission.

Each student will be required by the University to sign on ~~his or her~~their offer of admission form that ~~he or she~~they knows as an enrolled student "I will be held accountable for all aspects of the current student Honor Code Policy; and prior to being allowed to register, I will have read and will abide by the Honor Code Policy."

At the beginning of the academic year, the entering class will hold a meeting at which one or more Honor Council Representatives will review the Honor Code Policy. It is the responsibility of the Honor Council to ensure that this presentation is thorough and useful to the MUSC community, and to provide a mechanism for answering questions concerning the Honor Code Policy.

Each student is responsible for being knowledgeable about and complying with all policies and procedures in the MUSC Bulletin, the handbook for the program in which the student is enrolled, and all other applicable University policies. A claim of ignorance of any relevant policies and procedures will not be accepted as an excuse for violating them. The University reserves the right to amend or supplement student policies at any time with notice to students as deemed appropriate by the University. In most circumstances, students will be held accountable to the policy in effect at the time of the occurrence in question.

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| Policy Number: U-STU-001 | Effective Date: 08/14/2020 <u>02/09/2024</u> |

The current Honor Code Policy, Honor Council, and Honor Code Policy Violations are available in The Bulletin at www.musc.edu/honorcode.

III. Honor Code Policy Scope; Interaction with Other Codes and Rules

A. Scope and Application

The Honor Code Policy applies to all aspects of academic integrity at MUSC. Any conduct that adversely affects the integrity of any academic work at MUSC may be found to be a violation of the Honor Code Policy. For purposes of the Honor Code Policy, "academic work" refers to all work or activity that may have a bearing on a student's grade or progress toward a degree, including all academic assignments, all examinations, all clinical work, and any other aspect of instruction, evaluation, or testing.

B. Coordination with Other Rules and Proceedings

Students at MUSC are also subject to other rules and regulations, including but not limited to codes of conduct and standards of professionalism adopted by the University or the student's College; copyright policies and other standards concerning use of intellectual property; and applicable law. On occasion, the same conduct may be a violation of both the Honor Code Policy and of one or more of these other standards. Honor Council proceedings will not normally be delayed pending other proceedings concerning the same conduct, including external criminal proceedings, although the MUSC Provost may determine in exceptional circumstances that such a delay is appropriate. Determinations made or sanctions imposed under the Honor Code Policy will not be subject to change because of the outcome of any other proceeding.

If a report relates to research integrity, MUSC's policy on research integrity must be followed. Whenever research integrity (e.g., fabrication, falsification or plagiarism in proposing, performing, or reviewing research or reporting research results) may be involved in a report, the University faculty advisor shall notify MUSC's Research Integrity Officer. Research integrity policies may in certain circumstances (in compliance with federal law) require sequestering of the data before any notification to the Student in Question takes place. In such cases the Office of Research Integrity will investigate and determine if the matter should be handled by their office. Any matters determined by the Office of Research Integrity that involve research integrity will not be handled by the Honor Council. If the Office of Research Integrity does not deem the report to be research integrity related then the matter will be referred back to the Honor Council.

Each student is responsible for being knowledgeable about and complying with all policies and procedures in the MUSC Bulletin, the handbook for the program in which the student is enrolled, and all other applicable University policies. A claim of ignorance of any relevant policies and procedures will not be accepted as an excuse for violating them. The University reserves the right to amend or supplement student policies at any time with notice to students as deemed appropriate by the University. In most circumstances, students will be held accountable to the policy in effect at the time of the occurrence in question.

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C. Reporting by Faculty

Faculty members who suspect that conduct constituting a violation of the Honor Code Policy occurred in academic work overseen by them are required to ~~immediately~~ report the violation to the Honor Council within seven days of discovery. The matter will be handled in accordance with MUSC's Honor Code Policy, rather than direct action by the faculty member. The faculty will honor the decision and sanction imposed by the Honor Council related to the suspected violation. The faculty retain the responsibility for assessing the quality of the academic work using an objective assessment. If the Honor Council determines no violation occurred the objective grade for the assignment will be upheld.

IV. Violations of the Honor Code Policy

Conduct adversely affecting the integrity of any academic work at or for MUSC violates the Honor Code Policy. While this Honor Code Policy cannot spell out every possible offense, the following examples are intended to describe the primary categories of Honor Code Policy violations and to assist in interpreting the standard of "adversely affecting the integrity of academic work."

- A. **Plagiarism**, defined as presenting the words, work, processes, or ideas of another as one's own in academic work, without proper acknowledgement of the source. Examples include doing the following without proper acknowledgement of the source: copying or closely paraphrasing text or distinctive nomenclature; using facts, figures, graphs, charts or other information or presentations of information; submission of academic work prepared in whole or in part by someone else (including a commercial vendor).
- B. **Cheating**, defined as the giving or receiving of unauthorized aid in academic work, and any attempt to gain an unfair advantage in academic work. Examples include copying another student's work; unauthorized use of notes or devices; unauthorized possession, dissemination, or use of examination questions or similar materials such as prior examinations; soliciting, giving, or receiving unauthorized aid.
- C. **Unauthorized Group Work**, defined as collaboration with any other person on academic work, where such collaboration is not permitted.
- D. **Multiple Submission**, defined as submitting the same academic work for credit more than once, without authorization.
- E. **Tampering with Academic Records or Materials**, defined as making pertinent academic materials unavailable to others; altering or tampering with grades, academic or attendance records, or examinations; and/or altering, damaging, or interfering with notes or laboratory or similar experiments or projects.

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F. ~~Deceit~~**Lying**, defined as ~~deliberately~~ making untrue or deceitful statements to obtain an advantage in academic work. ~~Examples include misleading others in order to obtain unauthorized answers or materials for academic work, and untruth concerning attendance at classes or other course related events. "Deceit" also includes any untrue statement in connection with an Honor Code~~Academic Integrity Policy investigation or proceeding.

G. **Attempt**, defined as an attempt to commit an act that would violate the Honor Code Policy.

G.H. **Failure to Report**, defined as failing to report a known violation of the Honor Code Policy.

V. **The Honor Council at MUSC**

A. **Purpose and Organization**

The goal of the Honor Council is to instill and maintain a culture of honor and academic integrity at MUSC. The Honor Council is responsible for educating members of the MUSC community on the meaning and importance of the Honor Code Policy, and for promoting and exhibiting high standards of character and professional ethics. Creation and maintenance of a culture of honor requires the personal involvement and commitment of all members of the MUSC community – students, faculty, administrators, and others who participate in the life of the University.

The Honor Council is also responsible for administering the process for determining responsibility for alleged ~~infractions-violations~~ of the Honor Code Policy, as set forth in this document. This includes investigating reported ~~infractions-violations~~ and conducting hearings. ~~The proceedings associated with the Academic Integrity~~Honor Code Policy are confidential. Students and faculty on the Honor Council sign an "Oath of Understanding and Confidentiality" in which each member promises to that safeguard the confidentiality of Honor Council proceedings defines the work of the council as confidential. Maintaining confidentiality is a core competency of professionalism. The proceedings associated with the Academic Integrity Policy are confidential. A member (students and faculty) of the Honor Council who is suspected of violating this confidentiality requirements provision will be placed on suspension from the Honor Council pending review immediately. Upon receipt an allegation that a member has failed to safeguard the confidentiality of an Honor Council proceeding, Following the suspension, the University Co-Advisors of the Honor Council will refer student members suspected of violating the confidentiality requirements to their college's professionalism committee. consult legal counsel and review the evidence of breach of confidentiality and make a determination. If the the student member is found to have violated this rule of confidentiality, they will dismissed from the Honor Council and may be subject to additional disciplinary action as determined by the applicable

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~~professionalism committee. Following the determination, student members who violate this provision will be subject to the Professional Standards and Conduct for Students Policy, and Faculty members who are suspected of violating the confidentiality requirements will be referred to the dean of their college for further investigation-violate this provision will be subject to discipline, up to and including termination in accordance with the Faculty Handbook. If a faculty member is found to have violated this rule of confidentiality, they will be dismissed from the Academic Integrity Council Honor Council.~~

In addition, the Honor Council is responsible for ensuring that the Honor process remains vital and responsive. The Honor Council is responsible for identifying issues and trends surrounding the Honor Code Policy and the hearing process, for facilitating the sharing of ideas and insights concerning the Honor process gained from experiences throughout MUSC, and for taking the lead in proposing needed changes to the Honor Code Policy. The Honor Council shall develop and periodically update training materials concerning the Honor Process for Honor Council Representatives and for the entire MUSC community.

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B. Composition

The Honor Council shall be composed of Student Representatives and Faculty Representatives (together, the "Representatives"), each of whom shall be eligible to vote in all Honor Council meetings and to sit as voting members of Hearing Panels selected for resolution of reported violations. The Honor Council shall also have Faculty Advisors, who will have voice and vote in Honor Council meetings, and who act as neutral advisors in proceedings for the resolution of reported violations.

Each College within the University shall select the following to serve on the Honor Council for a given academic year: (i) at least six but not more than twelve Student Representatives; (ii) at least two but not more than four Faculty Representatives; and (iii) one Faculty Advisor. At least two but no more than four Faculty Representatives will be appointed from among the Academic Affairs faculty.

In addition, MUSC's Provost or the Provost's designee may appoint one or more University Advisors who will have voice but no vote in Honor Council meetings and in Appeal Panel meetings.

C. Selection and Terms of Service

Student Representatives: Each College will develop and administer specific guidelines, consistent with the provisions of this Honor Code Policy, for the election by that College's students of that College's Student Representatives to the Honor Council. A College may determine whether to allocate one or more Student Representative positions to specific programs within the College. The election guidelines shall include

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specification of the term of office. It is permissible, but not required, for Student Representatives to be elected near the beginning of their first academic term at MUSC, for a term equal to their entire expected enrollment. The guidelines shall also specify a procedure, in the event a Student Representative does not complete his or her term, for selection of a successor Student Representative to complete the remainder of the term.

Faculty Representatives: The Dean of each College and Chair of the Academic Affairs Faculty appoint Faculty Representatives to the Honor Council. Such appointments shall occur in or around April, to select Faculty Representatives for the coming academic year. Faculty Representatives must be full-time faculty members of the College in question. Faculty Representatives serve a three-year term, except that the Dean or AAF Chair may make shorter appointments to create staggered terms, and Faculty Representatives may serve multiple consecutive terms. In the event a Faculty Representative does not complete his or her term, the Dean or Chair of AAF shall appoint a replacement to serve the remainder of the term.

Faculty Advisors: The Dean of each College appoints one Faculty Advisor to the Honor Council. Such appointments shall occur in or around April of the academic year preceding the academic year when the appointment in question shall commence. Faculty Advisors must be full-time faculty members of the College in question. Faculty Advisors serve a three-year term, and may serve multiple consecutive terms. In the event a Faculty Advisor does not complete his or her term, the Dean shall appoint a replacement to serve the remainder of the term.

University Advisors: The Provost or the Provost's designee appoints one or more University Advisors. Such appointments shall occur in or around April of the academic year preceding the academic year when the appointment in question shall commence. University Advisors must be either full-time faculty members or full-time members of MUSC's administration. University Advisors serve a three-year term, and may serve multiple consecutive terms.

Removal of Representatives and Advisors: A Student Representative who leaves MUSC for any reason, misses two or more meetings or assigned hearings in an academic year without an appropriate excuse (as determined by the President), fails to undergo Honor Council training, is placed on professional or academic probation, or is found to have violated the Honor Code [Policy](#) will be automatically removed from the Honor Council. Further, Student Representatives can be removed from the Honor Council by a two-thirds majority vote of the Honor Council.

The Dean of the College in question or Chair of AAF may remove any Faculty Representative or Faculty Advisor from the Honor Council.

The Provost, or the Provost's designee charged with appointing University Advisors, may remove any University Advisor to the Honor Council.

Each student is responsible for being knowledgeable about and complying with all policies and procedures in the MUSC Bulletin, the handbook for the program in which the student is enrolled, and all other applicable University policies. A claim of ignorance of any relevant policies and procedures will not be accepted as an excuse for violating them. The University reserves the right to amend or supplement student policies at any time with notice to students as deemed appropriate by the University. In most circumstances, students will be held accountable to the policy in effect at the time of the occurrence in question.

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D. Officers

The Honor Council officers are a President, an Executive Vice President, and six Vice Presidents (one Vice President from each College). These officers, all of whom serve on the Executive Committee of the Honor Council, are elected from among the Student Representatives by a simple majority of the current Student Representatives present and voting at a meeting called for that purpose. The College Vice Presidents are elected from among the Student Representatives by a simple majority. All of these officers shall have at least one year of experience on the Honor Council before taking office.

President: The President presides at all meetings of the Honor Council and performs all duties common to this office. The President is responsible for overseeing all Honor Council activities and ensuring that all required steps of the process have been delegated to a member of the Honor Council and carried out. The President may appoint committees from among the Representatives and Faculty Advisors as appropriate.

The President administers the following oath to new Student and Faculty Representatives, Faculty Advisors, and University Advisors:

I do solemnly promise to uphold the MUSC Honor Code [Policy](#) and the policies of the Honor Council, to safeguard the confidentiality of Honor Council proceedings, and to perform the duties of my office to the best of my ability.

Executive Vice President: The Executive Vice President assumes the duties of the President in the event of the President's absence or incapacity.

Vice Presidents: The Honor Council shall elect one Vice President from each College of MUSC.

Executive Committee: The Executive Committee consists of the President, the Executive Vice President, and the Vice Presidents. The members of the Executive Committee shall serve as advisors and resources to all members of the Honor Council concerning the Honor Code [Policy](#) and Honor Code [Policy](#) processes. The Chair of each Formal Hearing Panel shall be appointed by the President from among the members of the Executive Committee, except that the President shall not Chair a Formal Hearing Panel. The appointed Chair shall be a student in the College of the Student in Question, unless all students on the Executive Committee from that College are unavailable, or prevented from serving by a conflict of interest, bias, or some other extraordinary circumstance. The Executive Committee, after obtaining advice from the Faculty Advisors, shall make a formal recommendation to the Honor Council on any proposed amendments to this Honor Code [Policy](#).

Each student is responsible for being knowledgeable about and complying with all policies and procedures in the MUSC Bulletin, the handbook for the program in which the student is enrolled, and all other applicable University policies. A claim of ignorance of any relevant policies and procedures will not be accepted as an excuse for violating them. The University reserves the right to amend or supplement student policies at any time with notice to students as deemed appropriate by the University. In most circumstances, students will be held accountable to the policy in effect at the time of the occurrence in question.

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The term of each student officer position is one academic year. Officers may serve two or more consecutive terms, if elected.

E. Role of Faculty Representatives

The primary role of Faculty Representatives is service as voting members on Reasonable Cause Conference Panels and Formal Hearing Panels. Faculty Representatives may also attend all meetings of the Honor Council, and may vote in such meetings on all matters other than election of officers. However, Faculty Representatives are not required to attend Honor Council meetings and Faculty Representatives are not considered for purposes of determining a quorum at Honor Council meetings.

F. Role of Faculty Advisors

Faculty Advisors occupy a unique role within the Honor system. They are expected to remain neutral and to offer unbiased advice and sound judgment and wisdom to all participants in the system, with the goal of promoting and protecting the core aim of academic integrity at MUSC. For this reason, those selected to serve as Faculty Advisors should normally have previous experience with the Honor system, as well as a firm commitment to MUSC and to the Honor Code [Policy](#).

Faculty Advisors attend all meetings of the Honor Council, and may speak and vote in such meetings on all matters other than election of officers. Faculty Advisors are included for purposes of determining a quorum at Honor Council meetings. One Faculty Advisor will be appointed as the Faculty Advisor for the matter whenever there is a report of a possible violation. The Faculty Advisor appointed for the matter will be from the College of the Student in Question, unless unavailable, or prevented from serving by a conflict of interest or some other extraordinary circumstance. Additionally, Faculty Advisors can serve the role of Faculty Members, serving on Reasonable Cause Conference and Formal Hearing panels, when needed, as long as they do not come from the college of the Student in Question.

Faculty Advisors serve generally as a resource for Honor Council Representatives, including Investigators, who may consult with the Faculty Advisors concerning Honor Council duties and procedures. The Faculty Advisor appointed for the matter will preside over the Reasonable Cause Conference for that matter, unless unavailable. The Faculty Advisor appointed for the matter will be available to all parties for consultation, and will attend the Formal Hearing in an advisory capacity. The Faculty Advisor at the Formal Hearing does not have a vote, but may provide advice on procedure, including during deliberations. The Faculty Advisor will not provide advice or express opinions on whether the Student in Question violated the Honor Code Policy, nor on the appropriate sanction.

Each student is responsible for being knowledgeable about and complying with all policies and procedures in the MUSC Bulletin, the handbook for the program in which the student is enrolled, and all other applicable University policies. A claim of ignorance of any relevant policies and procedures will not be accepted as an excuse for violating them. The University reserves the right to amend or supplement student policies at any time with notice to students as deemed appropriate by the University. In most circumstances, students will be held accountable to the policy in effect at the time of the occurrence in question.

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Faculty Advisors are expected to serve as liaisons between the Deans of the Colleges and the Honor Council, to ensure clear communications.

Faculty Advisors shall also be available and identified as a resource for students with questions or concerns about the Honor Code [Policy](#). This includes students who are considering reporting a possible Honor Code [Policy](#) violation, as well as students who have been reported for a suspected violation. Faculty Advisors shall be available to such students at any time during the process, but a Faculty Advisor consulted by a Student in Question shall not serve as an advocate for the student, and should caution the Student in Question that the Faculty Advisor is neutral and impartial, and so may also be consulted by Investigators or Hearing Panel members on the matter. While Faculty Advisors should exercise discretion in conveying information they receive during the Honor Process, communications to a Faculty Advisor are not confidential.

G. Role of University Advisors

University Advisors attend all meetings of the Honor Council, with voice but no vote. However, University Advisors are not considered for purposes of determining a quorum at Honor Council meetings.

University Advisors attend meetings of Appeal Panels, with voice but no vote. University Advisors are responsible for retention and custody of documents of the Honor Council.

H. Role of MUSC’s General Counsel

The General Counsel of MUSC or the General Counsel’s designee is available to the Honor Council for consultation, including interpretation of this Honor Code [Policy](#) and provision of relevant legal advice. The General Counsel or designee may attend any meeting or hearing provided for in this Honor Code [Policy](#) to provide appropriate legal advice.

I. Meetings

The provisions of this subsection relate to all meetings of the Honor Council as a body. They do not apply to the procedures for resolution of reported violations of the Honor Code [Policy](#), which are addressed in the following section.

- A. Each April, the sitting Honor Council President shall call a meeting to elect Honor Council officers (President, Executive Vice President, Vice Presidents) for the coming academic year, and to conduct such other business as may be before the Honor Council.
- B. At the beginning of each of the fall term and the spring term, soon after each College has completed Student Representative elections, the President shall call a meeting of the Honor Council to (i) induct the new Student and Faculty

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Representatives and Faculty Advisors and familiarize them with the functions of the Honor Council; (ii) to receive and discuss the report on reported violations during the previous semester, as described hereinafter; and (iii) to conduct such other business as may be before the Honor Council. New Representatives and Faculty Advisors may be inducted before they undergo training, but may not participate in a Reasonable Cause Panel or a Formal Hearing Panel until they have been trained.

- C. For each term, the Executive Vice President during that term shall provide to the Honor Council a written report of all final dispositions during that semester of reported violations of the Honor Code Policy, for discussion at a meeting at the beginning of the following term. The report shall describe the reported violation, identify the College of the Student in Question, state whether the matter went to a Formal Hearing, and describe the determination and sanction. All names are to be redacted from this report. This report shall be maintained by or within the University Provost's office, or in such other appropriate location as may be determined from time to time by the University Advisors, for use in training, analysis, and establishing guidelines for panels in selecting sanctions.
- D. After the Honor Council has reviewed this report, the Executive Vice President shall prepare a summary that provides in aggregate the number of reported violations, the number of hearings, and the number of violations found. This aggregate report shall not contain names and shall not identify the College in which each reported violation occurred. The Executive Vice President shall post this aggregate report to an appropriately secure site accessible to the MUSC community.
- E. Additional meetings may be called, with ten days' notice, by the President, by any three members of the Executive Committee, or by any five Representatives.
- F. A quorum is present if the aggregate number of Student Representatives and Faculty Advisors present at the meeting equals one-half or more of the total aggregate number of Student Representatives and Faculty Advisors serving on the Honor Council. Honor Council meetings are closed to all persons other than Representatives, Faculty Advisors, University Advisors, and MUSC's General Counsel as appropriate.
- G. From time to time as appropriate, the Honor Council shall discuss and make recommendations concerning training of Honor Council Representatives and Faculty Advisors, education of the University community concerning the Honor system, creation of training materials and forms for Honor Council use, and changes to Honor Council procedures or this Honor Code Policy. The President may appoint committees from among the Representatives and Faculty Advisors to study and make recommendations regarding any such matters. The Executive Committee, with the advice of the Faculty Advisors, shall make a formal

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recommendation to the Honor Council regarding any proposed amendment to the Honor Code [Policy](#).

H. Minutes of each Honor Council meeting shall be taken by a staff member or independent contractor provided by MUSC for that purpose, and shall be maintained by the University Advisors in accordance with the provisions of this Honor Code [Policy](#).

H. _____

J. Training

The Honor Council shall provide training as needed for new Representatives. ~~Confidentiality requirements of the Honor Council will be stressed during training and an Oath of Understanding and Confidentiality- will be reviewed.~~ Representatives must complete a training session before serving on a Reasonable Cause Panel or a Formal Hearing Panel. Training will normally be provided once or twice per academic year, preferably near the beginning of an academic term. ~~Maintaining confidentiality is a core competency of professionalism. The proceedings associated with the Academic Integrity Policy are confidential. Students and faculty on the Academic Integrity Council sign an "Oath of Understanding" that defines the work of the council as confidential. See V. Honor Council at MUSC, A. Purpose & Organization, p. 4.~~

K. Document Retention and Custody

The University Advisors are responsible for the retention and custody of documents relevant to the Honor process, including any documents specified for retention in this Honor Code Policy, and other relevant documents as determined by the University Advisors. The University Advisors shall have discretion to select a location and medium for storage of such documents and, in consultation with MUSC's General Counsel, shall determine retention periods and destruction protocols. Documents related to resolution of reported violations shall be retained for the longest of (i) three years; (ii) the duration of the student's enrollment at MUSC; or (iii) any retention period imposed by MUSC or the Provost. Records related to reported violations shall be treated as confidential, and shall be shredded or otherwise rendered inaccessible when the retention period is over. Examples of documents to be retained by the University Advisors for the Honor Council include meeting minutes, reports on handling of reported violations, records of amendments to this Honor Code [Policy](#), training materials and other guides for students and/or Honor Council Representatives and Advisors, and records of resolution of reported violations.

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VI. Procedures for Resolving Reported Violations of the Honor Code Policy

A. General Principles Governing the Resolution of Reported Violations

A. Proceedings are not adversarial, and shall be conducted in a manner that preserves the educational tone of the proceedings and furthers the purposes of the Honor Code Policy.

B. Reports of suspected Honor Code violations are submitted via Maxient, via Maxient located here at Report an Honor Code Violation | MUSC. --The report is promptly assessed by the Honor Council University Co-advisors under the criteria set forth in the Honor Code Policy. Reports that do not meet the criteria of the Honor Code Policy will be referred to the respective dean or dean's designee.

A. B-C. The Student in Question is presumed not to have committed a violation, unless the preponderance of the evidence presented at the hearing makes it appear more probable than not that the student violated the Honor Code Policy.

C-D. Reports of violations of the Honor Code Policy should be resolved promptly. All parties shall use their best efforts to meet the timeframes set forth herein for resolution of a reported violation. However, with the exception of the deadlines for filing an appeal of a determination by a Hearing Panel and for petitioning the Select Panel to review the determination of an Appeal Panel, the time requirements are guidelines only. Due to the nature of MUSC's environment, some delays may be unavoidable. The Honor Council President or the Chair of the Hearing Panel shall allow reasonable extensions in light of this environment, with the goal of promoting both fairness, consideration to all participants, and prompt resolution. Delays will not normally provide grounds for dismissal of the report of the violation. Only gross and inexcusable delays, which are solely the fault of the Honor Council, may serve as grounds for dismissal. A request for dismissal on such grounds must be made in writing to the Dean of the College of the Student in Question, who shall have the sole authority to grant such a dismissal. Similarly, the failure of the Student in Question to meet a reasonable schedule set by the Honor Council President may provide grounds to proceed to the next step of the process, with or without that student's participation.

D-E. Whenever a time period is given in "working days," calculation of the time period shall exclude weekends and holidays recognized by MUSC. However, absent extraordinary circumstances as determined by the President of the Honor Council, non-holiday weekdays after the end of the term shall count as working days, so that a matter commenced during a given academic term should not normally be stayed until the beginning of the following term.

E-F. In making appointments at every stage of the proceedings (including appointing the Chair, Faculty Advisor, Investigators, Reasonable Cause Panel, Hearing

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Panel, and Appeal Panel), the President shall take reasonable steps to avoid any conflict of interest or appearance of bias or impropriety, and to ensure that such roles are rotated equitably among the Honor Council.

F.G. All participants in the Honor Code Policy process shall maintain confidentiality to the maximum extent possible. Absolute confidentiality is not possible, as witnesses must be identified and interviewed, and others in the MUSC community may have a legitimate need to know about a matter. All aspects of the written record received or maintained by the Honor Council shall be treated as confidential, except for documents that are otherwise generally available. All proceedings of the Honor Council, including the Reasonable Cause Conference, the Formal Hearing, and any hearing on appeal, are closed to persons other than those specified in the Honor Code Policy, unless the President of the Honor Council or the Chair of the particular proceeding makes an exception for good cause. Other than recordings specified in this Honor Code Policy, no person may make an audio or video recording of any Honor Council proceeding. Witnesses and other participants are not to discuss the proceeding or their testimony. Representatives of the Honor Council shall not discuss pending or resolved cases with persons outside the Honor Code Policy process who have no legitimate need to know about a matter. It is also recognized that some participants in, and some aspects of, the Honor Code Policy process may be subject to laws concerning disclosure or confidentiality, such as the Family Educational Rights and Privacy Act ("FERPA") and the South Carolina Freedom of Information Act ("FOIA").

G.H. All notices and communications provided for herein may be delivered either electronically or on paper.

B. Reporting an Infraction Alleged Violation

The Honor Council will not act on an alleged infraction-violation without a formal report. Such a formal report must be submitted through the official online reporting portal. See XIII. References: Report an Honor Code Violation | MUSC. in writing, signed by the person making the report, Reports of Honor Code Policy violations will be delivered to the a Representative of Honor Council, who will provide the report to the President of the Honor Council. The report shall contain at least the following information:

- A. Name of the person believed to have violated the Honor Code Policy (herein, the "Student in Question").
- B. Description of the alleged violation, including time, date, ~~and location,~~ and other objective information-
- C. Description of the reporting person's knowledge-understanding of the alleged violationevents.

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D. Identification of other witnesses and potential evidence.

The Honor Council will take reasonable steps to maintain the confidentiality of the report, recognizing that investigation will inevitably require some disclosure of the reported violation, including disclosure in some form to the Student in Question.

The reporting person should refrain from discussing any aspect of the report with persons not connected with the Honor Council proceeding.

If a possible violation of the Honor Code Policy is reported to the Honor Council after the Student in Question has been awarded a degree, the President of the Honor Council shall inform the University Provost of the report.

C. **Appointment of Chair and Faculty Advisor**

Within one working day of receipt of a report of a possible violation, the President shall appoint a Chair of the Hearing Panel (the "Chair") for the matter from among the Executive Vice President and the Vice Presidents. The President shall also designate a Faculty Advisor for the matter; the Chair and the Faculty Advisor will be from the College of the Student in Question (or one of the student's Colleges if the student is pursuing a joint degree), unless one or both is unavailable or has a conflict of interest, or there is some other extraordinary circumstance making such appointments impracticable.

If the Faculty Advisor for the matter is not the Faculty Advisor from the College of the Student in Question, the President shall also notify the Faculty Advisor for the College or Colleges (if the student is pursuing a joint degree) of the Student in Question.

The Faculty Advisor for the matter will notify the Dean of the affected College or Colleges of the report, without including any details of the case other than the reported student's name, to allow coordination of any other relevant proceedings.

D. **Notification of Student in Question**

Within two working days of his or her appointment as Chair, the Chair shall notify the Student in Question, in writing, of the substance of the alleged violation. This notification shall inform the Student in Question that a Reasonable Cause Conference will be set after completion of the investigation. The notification shall refer the Student in Question to this Honor Code Policy for a full statement of procedures, and shall provide the online address of this Honor Code [Policy](#). The notification shall state that only the President, the Chair, or the Faculty Advisor appointed to the matter is authorized to respond on behalf of the Honor Council to questions from the Student in Question about the process. If the Student in Question voluntarily acknowledges violating the Honor Code Policy in the manner specified, the Honor Council will proceed directly to the Sanctions Phase of the Formal Hearing. Investigators will investigate and present these findings during the Sanctions Phase.

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E. Investigation

Upon receipt of a report of a possible violation, the President shall appoint two Investigators from among the Student Representatives of the Honor Council.

The Investigators are responsible for collecting available evidence, interviewing witnesses, obtaining signed witness statements from witnesses unavailable to appear at a hearing, and interviewing the Student in Question. (As noted below, absent extraordinary circumstances evidence at a Formal Hearing should come either from witnesses or in the form of signed witness statements, plus any documents, recordings, or other exhibits.) Investigators will remind all interviewed witnesses to maintain confidentiality regarding the matter. Investigators should also remind witnesses that the Student in Question will be informed of the investigation and of the evidence discovered, including any written witness statements. The Student in Question is not required to discuss the matter with the Investigators, and the Student in Question's decision not to respond to Investigators will not be considered evidence of a violation.

The Investigators will be responsible for presenting all pertinent findings, including evidence of additional Honor Code Policy violations found during the investigation that were not previously reported to the Honor Council, during the Reasonable Cause Conference and presenting all evidence and witnesses at any Formal Hearing. The goal of the Investigators shall be to uncover the truth and to protect MUSC's Honor Code Policy. The Investigators are not prosecutors, but advocates for the Honor System.

If, at any point in the process, an Investigator is determined to have a bias or conflict of interest, the President shall remove that Investigator and appoint a replacement.

F. Procedure upon Student's Withdrawal

Proceedings under the Honor Code Policy will normally proceed to resolution if the Student in Question has withdrawn from the University. However, the President of the Honor Council may terminate proceedings before resolution if the President determines there is no reason to complete the process. Withdrawal from the course in which the reported conduct occurred will not be grounds to halt proceedings.

G. Reasonable Cause Conference

After completion of the investigation, the Chair shall set a Reasonable Cause Conference and notify the Student in Question. Normally, the Reasonable Cause Conference will take place within seven working days of appointment of the Investigators. The Chair may extend this period. The purpose of the Reasonable Cause Conference is to determine whether the investigation indicates that a reasonable person could conclude that the Student in Question engaged in conduct constituting a violation of the Honor Code Policy, thus warranting a Formal Hearing before a Hearing Panel of the Honor Council.

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The President shall appoint a Reasonable Cause Panel, consisting of three voting Representatives, plus the Faculty Advisor previously appointed to the matter (or a substitute Faculty Advisor, if the appointed Faculty Advisor is unavailable). The Faculty advisor shall preside over the Reasonable Cause Conference but shall not vote or express an opinion on the merits of the matter. The three voting Representatives shall be one Faculty Representative and two Student Representatives, who shall not include (i) the Chair previously appointed by the President for the entire matter; (ii) the Investigators; (iii) the Student in Question, if a Representative of the Honor Council; or (iv), any Representative who is a witness in the proceeding.

If a reported violation involves two or more students and some of the same facts or conduct, the President, Chair and Faculty Advisor assigned to the case will decide whether the matters will be referred to a single Reasonable Cause Panel or to multiple panels.

At the Reasonable Cause Conference, the Investigators will present a balanced summary of the results of their investigation, including any evidence suggesting no violation occurred. The Reasonable Cause Conference is not a full hearing, and it will normally proceed on the basis of the Investigators' report of the investigation; ~~neither the Accuser nor~~ witnesses will ~~not~~ appear, ~~and the Investigators are not required to present all witness statements.~~ No record or recording of the Reasonable Cause Conference shall be made or retained.

The Student in Question may be present at the Reasonable Cause Conference. The Student in Question is allowed to make a statement in the Reasonable Cause Conference after the Investigators' presentation but is not required to do so. The Student in Question does not have the right to bring an advisor to the Reasonable Cause Conference, as the purpose of the Reasonable Cause Conference is not to establish responsibility, but simply to determine whether sufficient evidence exists to proceed to a Formal Hearing.

Following presentations and statements, the Student in Question and the investigators will leave the Conference and the Reasonable Cause Panel will deliberate and vote. If any one of the three Representatives votes in favor of proceeding, the matter will proceed to a Formal Hearing. If there are multiple violations, the panel members will vote on each separately, and only those violations voted in favor of proceeding will be presented at the formal hearing.

The Faculty Advisor for the Reasonable Cause Conference will promptly notify the Chair, the President of the Honor Council, and the Dean of the College or Colleges in question of the outcome of the vote. The Chair shall inform the Student in Question of the outcome of the vote, in writing, within three working days of the Reasonable Cause Conference.

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If the matter was dismissed by the Reasonable Cause Conference, the Faculty Advisor shall gather all materials related to the investigation and forward them to the University Advisors for retention in accordance with the provisions of this Honor Code Policy.

If the matter was not dismissed by the Reasonable Cause Conference, the Faculty Advisor shall retain all materials related to the investigation, and the matter shall proceed as set forth hereinafter.

H. Acceptance of Responsibility by the Student

If the Student in Question voluntarily acknowledges violating the Honor Code Policy in the manner specified, the matter shall proceed to a hearing for the purpose of determining a sanction only.

I. Prehearing Procedures

1. Notice to Student in Question. The Chair's written notice to the Student in Question that the matter will proceed to a Formal Hearing shall include the date of the Formal Hearing, which shall normally be within ten working days of this notice, the location of the Formal Hearing, a concise summary of the charges, and a reminder that the Formal Hearing will proceed even if the Student in Question does not appear. The notification shall also provide the Student in Question with a list of Honor Council Representatives ~~selected for the Hearing Panel~~, to give the student the opportunity to identify potential conflicts of interest or bias.
2. Appointment of Hearing Panel. Promptly after the President is notified that the Reasonable Cause Conference resulted in reference for a Formal Hearing, the President shall appoint and identify to the Chair six additional Representatives of the Honor Council, to serve with the Chair as the Hearing Panel to conduct the Formal Hearing. The Hearing Panel shall consist of five Student Representatives (including the Chair), with at least two from the College of the Student in Question (counting the Chair if from that College), and two Faculty Representatives, with at least one from the College of the Student in Question. The requirement of Representatives from the College of the Student in Question is waived to the extent that unavailability, conflicts, bias, or other extraordinary circumstances prevent satisfaction of that requirement. If the Student in Question is pursuing a joint degree, the two Student Representatives and one Faculty Representative to be selected from the student's College may be selected from either or both of the Colleges of the joint degree. The Hearing Panel shall not include (i) any Representative who served as an Investigator in the matter; (ii) any Representative who served on the Reasonable Cause Panel; (iii) the Student in Question, if a Representative of the Honor Council; or (iv) any Representative who is a witness in the proceeding.

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A Representative who is appointed to a Hearing Panel shall promptly notify the President if that Representative concludes for any reason that ~~he or she~~they cannot provide a fair hearing of the matter, so that the President may appoint a replacement.

3. Reported Violations Involving Two or More Students. If it is determined there is Reasonable Cause for two or more students to go to Formal Hearings for reported violations that involve some of the same facts or conduct, the President, Chair and Faculty Advisor assigned to the case will decide whether the matters will be referred to a single Hearing Panel or to multiple Hearing Panels. If such a matter is referred to a single Hearing Panel, the President, Chair and Faculty Advisor assigned to the case will decide whether the matters will be resolved in a single Formal Hearing, or in multiple Formal Hearings.
4. Option to Be Excused from Academic Work. If a matter is sent to a Formal Hearing, the Student in Question shall have the option ~~to request of~~ being excused from any tests, assignments, clinical work, or examinations from receipt of such notice through conclusion of the Formal Hearing. While reasonable efforts will be made to avoid having exercise of this option affect the Student in Question's progress, the academic progress committee (or program level director in the absence of an academic progress committee) of the student's College shall have full and absolute discretion to determine whether and to what extent any such decision not to participate in academic work will delay the Student in Question's academic progress.
5. Removal from Certain Activities. At the discretion of the Dean or Deans of the College of the Student in Question, that student may be removed from some or all classes and/or clinical work for a period commencing at any time after the report of the suspected violation until 48 hours following notification of the decision of the Formal Hearing Panel (or the decision of the Reasonable Cause Panel if the matter does not proceed to a Formal Hearing) if the Dean determines that such participation creates a reasonable risk of danger to patients, faculty, other students, or the University. In making such a removal decision, the Dean shall inform the Student in Question of the reasons for the planned action and shall give the Student in Question an opportunity to provide a response. In cases in which the Dean determines that health or safety concerns make this exchange impracticable before the removal decision is implemented, the Dean shall inform the Student in Question of the reasons and allow the Student in Question to respond as soon after removal as is practicable.
6. Adequate Time to Prepare. The Student in Question will be given reasonable and adequate time to prepare for the Formal Hearing. If the Student in Question wishes additional time to prepare, the student shall make such request in writing to the Chair of the Hearing Panel, who shall rule upon it promptly.

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7. **Materials.** The Chair shall coordinate with the Investigators on the matter to provide the Student in Question with the following materials at least 72 hours prior to commencement of the Formal Hearing: (i) copies of all documents, including witness statements, that may be presented at the Formal Hearing; (ii) identification of all witnesses who may be called by the Investigators, with a reasonable summary of the expected testimony of each; (iii) access to any documents or non-documentary evidence that may be presented at the Formal Hearing. Any documents that constitute the “education records” (as that term is defined under FERPA) of a student other than the Student in Question shall be redacted to remove such students’ names and other identifying information before being provided to the Student in Question, while ensuring that the Student in Question is not unfairly disadvantaged by the removal of names of witnesses. The Chair and the Investigators should consult with the General Counsel of

MUSC as needed to make such determinations. The Student in Question shall treat all information provided under this paragraph as confidential, disclosing it only to advisors and witnesses, after directing such persons to keep the materials confidential.

If the Student in Question is a distance student or engaged in a learning experience outside the Charleston area and cannot meet with the faculty advisor to review materials before the formal hearing, the faculty advisor may release the confidential materials electronically to the student for them to view. The student must sign the confidentiality release form just as they would if they came in person before access is granted to materials.

8. **Witnesses.** Both the Student in Question and the Investigators may call witnesses to the Formal Hearing. Members of the MUSC community are expected to cooperate with such requests, as part of their obligations under the Honor Code Policy; the Chair or the President will remind such witnesses of this obligation if required. Signed witness statements may be presented in the Formal Hearing in lieu of live testimony.

The person calling a witness (the Student in Question or the Investigators) is responsible for notifying ~~his or her~~their witnesses of the time and location of the Formal Hearing. The Student in Question will provide a written list of all witnesses ~~he or she~~they will call to the Chair at least 48 hours prior to the Formal Hearing.

Absent a showing of extraordinary circumstances, the Student in Question will be limited to four character witnesses (that is, witnesses whose testimony does not relate to whether the Student in Question violated the Honor Code Policy).

9. **Potential Bias.** At least 48 hours prior to the Formal Hearing, the Student in Question shall identify in writing to the President of the Honor Council any

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members of the Honor Council whom the Student in Question believes are biased, have a conflict of interest, or are otherwise unable to provide a fair hearing. This statement shall include the reasons that the disqualification of each such Representative is sought. The President shall review this statement and shall remove from the Hearing Panel, and appoint a replacement for, any Representatives whom the President concludes cannot provide a fair hearing. ~~Any replacement Representative shall be promptly identified to the Student in Question.~~

10. Determination by Faculty Advisor of Prior Violations and Sanctions. Before the Formal Hearing, the Faculty Advisor appointed to the matter shall determine whether the Student in Question had previously been determined to have violated the Honor Code Policy. The Faculty Advisor shall not provide that information to the Hearing Panel before the Sanctions Phase of the Formal Hearing.

J. Formal Hearing

1. Timing. The Formal Hearing by the Hearing Panel will normally take place within ten working days of notification of the Student in Question of the results of the Reasonable Cause Conference. This time limit may be extended by the Chair of the Panel for good cause.
2. Participation of Panel and Quorum. All members of the Hearing Panel are expected to participate in the Formal Hearing. A quorum, consisting of at least four Student Representatives (including the Chair) and one Faculty Representative, is required in order to begin a Formal Hearing. Once present, Hearing Panel members shall remain present for the entire Formal Hearing, and must do so in order to vote.

A Faculty Advisor must also be present. If the appointed Faculty Advisor is not able to participate in the Formal Hearing, the President may designate a replacement from among the Faculty Advisors to the Honor Council.

3. Participation by Video Conference. ~~Up to two Representatives may participate in the Formal Hearing by video conference, provided that the technology is approved by MUSC and allows all persons participating to communicate concurrently with one another and to participate effectively, allows the Representative participating remotely to see witnesses, and allows those physically present at the Formal Hearing to see the remote participants. Unless the Chair is a distance student and unable to attend, the Chair should not participate in a Formal Hearing by video conference. The Faculty Advisor should not participate in a Formal Hearing by video conference.~~

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~~The Student in Question may choose whether to participate by video conference~~

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~~or in person, unless the exercise of that choice has the effect of unduly delaying the Formal Hearing.~~

~~Witnesses may appear by video conference if they have good reason to do so, as determined by the Chair.~~

~~Recognizing the event that the university is closed or under modified operations (for reasons including but not limited to pandemics, hurricanes, state or national emergencies, or other extraordinary circumstances) Formal Hearings may be conducted by electronic means, provided that the technology is approved by MUSC, allows all persons participating to communicate concurrently with one another and to participate effectively, and so long as each participant can hear and be heard. The preference in electronic means being a video conference when feasible.~~

~~This circumstance negates the requirement for an in-person Formal Hearing which only two members may join virtually. This determination may be made by the Honor Council President, Executive Vice President, or a combination of the Chair and Faculty Advisor.~~

~~All Reasonable Cause Conferences, Formal Hearings, and Appeals Hearings may be conducted by technology authorized by MUSC Information Solutions and the Honor Council. Individuals participating virtually must be able to communicate concurrently with one another and each participant must be able to hear and be heard. In normal circumstances, it is expected that electronic means should include live video and that participants' cameras should be turned on during proceedings.~~

~~MUSC provides each community member with authorized telecommunications software. Individuals are responsible for obtaining a satisfactory internet connection when participating from off campus.~~

4. Recording. An audio recording and transcription of all portions of the Formal Hearing other than the Hearing Panel's deliberation shall be made. All hearings will be transcribed by a stenographer present during the hearing at the cost of the College of the Student in Question. The official case file will have one transcribed copy of the hearing. The recording and transcription shall be delivered to the University Advisors for retention as provided herein, along with other documentation related to the matter. No other person may record any portion of the Formal Hearing, or any other proceeding hereunder. The recording will be destroyed upon receipt of the official stenographer's transcription of the hearing and after the time for appeal is over. If no violation is found by the Honor Council, the recording will be destroyed and no transcript will be made and retained of the hearing.

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5. Presence of the Student in Question; Advisors. The Student in Question is not required to participate in the Formal Hearing or to testify or present evidence. The decision of the Student in Question not to participate, or not to testify, will not be construed as an admission of a violation. However, such a decision shall not prevent the Formal Hearing from proceeding. In that event, a plea of “no violation” is entered for the Student in Question, and the Formal Hearing shall proceed.

Once present, the Student in Question is expected to remain present throughout the hearing. But that student's decision to leave will not prevent completion of the Formal Hearing.

~~The Student in Question has the right to be accompanied by one advisor support person of their choice who will serve as a consultant for the students. The advisor support person is a current member of the MUSC community (for example a faculty member, currently enrolled student, or administrator). Honor Council/Academic Integrity Council hearings are student-driven proceedings and, as such, attorneys are not permitted in the hearing to represent or advise the Student in Question students are encouraged to advocate for themselves. The student may confer with their advisor support person during the Formal Hearing, but the Student in Question's advisor support person may not address the Hearing Panel or pose questions to witnesses. The Chair may instruct the Student in Question to consult with the advisor support person only during certain times, or may otherwise restrict consultation, if consultation with the advisor support person is unduly delaying the proceedings.~~

The Student in Question has the right to be accompanied by one support person of their choice who will serve as a consultant for the students. The support person is a current member of the MUSC community (for example a faculty member, currently enrolled student, or administrator). Honor Council hearings are student-driven proceedings and, as such, students are encouraged to advocate for themselves. The student in question may confer with their support person during the Formal Hearing, but the Student in Question's support person may not address the Hearing Panel or pose questions to witnesses. The Chair may instruct the Student in Question to consult with the support person only during certain times, or may otherwise restrict consultation, if consultation with the support person is unduly delaying the proceedings. As this is an academic and not an adversarial process, attorneys in almost all instances are not permitted in the hearing to represent or advise the Student in Question at Hearing. However, attorneys will be permitted to participate in hearings in cases where the Student in Question's alleged Honor Code violation arises from a criminal charge. Any costs associated with legal representation will be the responsibility of the Student in Question.

6. Role of the Chair. The Chair of the Hearing Panel presides over the Formal Hearing, rules on issues of admissibility of evidence, decides appropriateness of questioning, and otherwise controls the proceeding.

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In presiding over the Formal Hearing, the Chair shall ensure decorum, and the opportunity for the Student in Question to present a reasonable defense. Formal rules of evidence do not apply to the Formal Hearing, but the Chair may exclude evidence or argument that is not likely to be trustworthy, that is cumulative, or that is unduly abusive or disruptive without probative impact. Signed witness statements may be considered.

When the Chair convenes the Formal Hearing, the Chair shall instruct all participants in their respective roles and charge all participants to maintain strict confidentiality concerning the matter.

The Chair administers the following pledge to each person presenting testimony during the Formal Hearing, immediately prior to his or her testimony:

“I, _____, will tell the truth in relation to the inquiry about which I am to give testimony. I further affirm that all matters relative to this hearing shall be held in strictest confidence.”

7. Two Phases of the Hearing. The Formal Hearing shall be divided into two phases: a Determination Phase, focused on whether the Student in Question violated the Honor Code Policy, and a Sanction Phase, focused on the appropriate sanction.
8. The Determination Phase
 - a. *Reading of Charges.* The Hearing Panel Chair commences the Formal Hearing by reading aloud a statement of the violations alleged to have been committed by the Student in Question.
 - b. *Plea.* The Student in Question replies to the statement by acknowledging the violations or by pleading “no violation.”

If the Student in Question acknowledges all of the alleged violations, the hearing shall proceed directly to the Sanctions Phase.

Otherwise, the Determination Phase shall proceed.

 - c. *Opening Statements.* The Investigators will present an opening statement outlining the information gathered and conclusions drawn in their investigation. The Student in Question may then make an opening statement.
 - d. *Presentation of Evidence.* After opening statements are concluded, the Investigators will present evidence concerning the reported violation.

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Normally, evidence shall consist of live witnesses, signed witness statements (including electronic signatures), and other documentary or non-documentary evidence that the Chair determines is reasonably reliable. Normally, Investigator summaries of the investigation will not constitute evidence, except as to background or undisputed points. However, the Formal Hearing is not bound by rules of evidence, and the Chair may make exceptions and admit other forms of evidence, offered by Investigators or by the Student in Question, when the Chair determines such evidence is reasonably reliable and the exception is appropriate. The Student in Question will have the right to ask questions of all witnesses presented.

After the Investigators have presented all of their evidence, the Student in Question may present evidence, including live witnesses, signed witness statements, and other documentary and non-documentary evidence. The Student in Question may testify.

Witnesses will normally be admitted to the hearing only to testify, and will leave after testifying. Members of the Hearing Panel may question witnesses, and may direct questions to the Investigators.

Evidence that the Student in Question has been found responsible in the past for a separate violation of the Honor Code [Policy](#) or any similar rule or regulation, provided that the violation is not relevant to the alleged violation at issue, shall not be admitted during the Determination Phase. Similarly, character witnesses, penalties imposed by a professor, and other evidence not related to whether a violation occurred should not be presented during the Determination Phase.

- e. *Closing Statements.* The Investigators will make a closing statement, after which the Student in Question may make a closing statement.
- f. *Deliberations and Vote.* After closing statements, the Hearing Panel will retire to discuss and decide the case. These discussions will not be recorded. The Faculty Advisor may be present during deliberations to provide procedural advice, but will not express opinions on the merits of the decision and will not vote. The Investigators are not to be present for or participate in deliberations, nor do they vote. If during deliberations the Hearing Panel has a question for the Investigators or the Student in Question, that communication shall take place in the presence of both the Investigators and the Student in Question. The Hearing Panel will vote by secret ballot upon whether the Student in Question violated the Honor Code [Policy](#) in the manner charged. Ballots shall be tabulated by the Chair (or the Chair's designee if the Chair is participating remotely) and shall not be retained. Any Representative

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participating remotely shall convey his or her vote privately to the Chair or the Chair's designee. If multiple possible violations were presented at the Formal Hearing, each shall be voted on separately. A vote that the student violated the Honor Code Policy indicates that the Representative voting concludes that the evidence presented at the hearing makes it appear

more probable than not that the student violated the Honor Code Policy. Seventy-five percent or more of the Representatives on the Hearing Panel participating in the Formal Hearing and eligible to vote must vote to find a violation in order to render a determination that a violation occurred. Any smaller number voting to find responsibility will result in a determination of no violation.

Bearing in mind the event that the university is closed and Formal Hearings are conducted by electronic means, it is recommended that the Hearing Panel discuss and decide the case using the voice feature rather than using a chat feature. The chat feature cannot be used to disclose confidential information, including deliberations.

~~Requests w~~hen ~~votes are being~~ held by electronic means, each member of the Hearing Panel for the Formal Hearing will email the faculty advisor their vote when voting upon whether the Student in Question violated the Honor Code Policy in the manner charged.

- e. g. *Reading of the Decision.* The Chair will reconvene all participants in the Formal Hearing (excluding witnesses) and will read aloud the decision concerning responsibility to the Student in Question. If no violation is found, the Formal Hearing shall be concluded and the Chair will adjourn the hearing. If a violation is found, the Formal Hearing shall continue to the Sanction Phase. The Chair may consider a recess (not to exceed 30 minutes) before the Sanction Phase, if appropriate.

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9. The Sanction Phase

- a. If the Student in Question voluntarily acknowledges violating the Honor Code Policy in the manner specified prior to the Reasonable Cause Conference and the case proceeds directly to the Sanctions Phase of the Formal Hearing the investigators will present all evidence collected at the beginning of the Sanctions Phase. The proceedings will then continue as outlined below.

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f.b. *Statements and Evidence in Mitigation.* The Student in Question shall be given the opportunity to make any statements in mitigation or explanation to the Hearing Panel, and to present character witnesses or similar testimony relevant to the sanction. Subject to the discretion of the Chair, no more than four character witnesses may be called by the Student in Question.

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g.c. *Statement from Investigators.* The Investigators shall then have the opportunity to address the student in question's presentation concerning sanctions.

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h.d. *Information on Prior Violations.* The Faculty Advisor shall then inform the Hearing Panel of any prior violation by the Student in Question of the Honor Code Policy. The Student in Question shall have the opportunity to comment to the Hearing Panel on this information.

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i.e. *Deliberations and Vote.* The Hearing Panel will retire to discuss and determine a sanction or sanctions. This deliberation is subject to the same rules as the deliberation concerning responsibility, and shall apply the standards set forth in the following subsection. The Chair is responsible to put the panel's proposed sanction(s) in writing and review them with the hearing panel to confirm a full understanding of the proposed sanction(s) prior to a final vote. The Faculty Advisor must confirm that sanctions are feasible within the context of the program. A simple majority vote of the members of the Hearing Panel participating in the Formal Hearing and eligible to vote is required to impose a sanction; provided, however, that ~~expulsion-dismissal~~ must be approved by seventy-five percent or more of the members of the Hearing Panel participating in the Formal Hearing and eligible to vote.

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j.1. *Sanctions.* In determining a sanction to be imposed on a student determined to have violated the Honor Code Policy, the Hearing Panel may consider (i) the severity and flagrancy of the violation; (ii) premeditation and intent, or lack thereof; (iii) whether the student was previously determined to have violated the Honor Code Policy; (iv) the student's truthfulness and contrition; (v) the student's ability to abide by the Honor Code Policy and succeed in the future; (vi) other mitigating circumstances deemed strongly relevant by the Hearing Panel.

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Upon consideration of the factors set forth above, the Hearing Panel may impose an appropriate sanction, or combination of sanctions. Appropriate sanctions include, but are not limited to: formal reprimand; resubmission or repetition of the affected work;

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sessions at the Center for Academic Excellence; a zero or F on the affected assignment or examination; probation, to be noted on the student's transcript during the term of the probation, and which may affect severity of sanction for any future violation; failure of the affected course with a grade of "XF"; ineligibility for a period of time to hold elected or appointed positions at MUSC; suspension for one or more upcoming semesters; ~~expulsion~~dismissal.

Prior formal findings of Honor Code Policy violations involving the Student in Question may be considered during the sanction phase.~~The sanction for a second or subsequent violation of the Honor Code should normally be more severe than the sanction for a first violation of similar magnitude.~~

In general, the existence of an Honor Code Policy violation will be noted on the transcript of the Student in Question. If the sanction required action by the Student in Question or was designed to last for a certain duration, the transcript notation would be removed upon successful completion of the action and/or elapse of the period in question. If the sanction required action by the Student in Question or was designed to last for a certain duration, the transcript notation will be removed upon successful completion of the action and/or elapse of the period in question, and any remaining grade of XF will be changed to NP or 0.0. A student will not be allowed to graduate while sanctions are still in place.

k.2. Reading of the Sanction Decision. The Hearing Panel Chair will reconvene all participants in the Formal Hearing (excluding witnesses) and will read aloud the sanction to the Student in Question. The Chair will also inform the Student in Question of the option to appeal in accordance with this Honor Code Policy. The Chair will then adjourn the hearing.

VII. K. Procedures After the Formal Hearing; Record Retention and Reporting

A.1. **Notification to President.** Promptly after the Formal Hearing, the Chair of the Hearing Panel shall inform the President of the Honor Council of the determination and sanction, if any.

B. **Written Notice.** Within two working days of the conclusion of the Formal Hearing, the Chair will deliver to the Student in Question a written notification of the Honor Council's decision regarding each charge and the sanctions imposed, with a copy to the relevant Dean or Deans for implementation. ~~The Dean shall provide written notification (formal Dean's letter) to notify the Registrar to ensure~~

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~~that appropriate notation is made on the student's transcript.~~ Additionally, the Dean of that student's college ~~or~~ the Dean's designee is responsible for keeping all information regarding the outcome of the hearing and any imposed sanctions confidential. This information should be disseminated to relevant faculty at the discretion of the Dean, and only such information that is necessary for faculty to carry out their duties in relation to relevant sanctions should be revealed.

- C. **Gathering and Retention of Record.** The Advisor will gather all documentary evidence, investigative reports, notes, and other records of the investigation and Formal Hearing, including the audio recording of the Formal Hearing, and forward them to the University Advisors for retention in accordance with the provisions of this Honor Code Policy.
- D. **Access to Records.** During the period prior to the deadline for submitting an appeal, the Student in Question shall be given reasonable access to the recording of the Formal Hearing and to all materials introduced at the Formal Hearing. If the Student in Question is a distance student or engaged in a learning experience outside the Charleston area and cannot meet with the faculty advisor to review materials before the formal hearing, the faculty advisor may release the confidential materials electronically to the student for them to view. The student must sign the confidentiality release form just as they would if they came in person before access is granted to materials.
- E. **Preparation of Summary.** The Chair shall prepare a written summary of the matter (with all names deleted). The Chair shall provide this summary to the Executive Vice President, for use in conjunction with the Executive Vice President's written report of all final dispositions during that semester of reported violations of the Honor Code Policy. A copy of the summary shall be maintained by or within the University Provost's office, or in such other appropriate location as may be determined from time to time by the University Advisors, for future reference and other use in administering the Honor Code Policy.
- F. **Satisfaction of Sanctions.** The Student in Question shall notify the relevant Dean in writing when the terms of the sanctions have been met. The Dean or Deans shall verify sanctions are complete and notify the Registrar (formal Dean's letter) in writing within two weeks (fourteen calendar days) of such notice if the transcript notation is to be removed.

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VIII.VII. **Appeal**

- A. **Submitting the Appeal.** A Student in Question determined in a Formal Hearing to have violated the Honor Code Policy may appeal the decision by submitting a written appeal to the President of the Honor Council. The written appeal must be submitted to the President of the Honor Council within one week (seven calendar days) of receipt by the Student in Question of written notice of the outcome of the Formal Hearing from the

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Chair. The President shall promptly notify the Faculty Advisor and Dean of the College or Colleges of the Student in Question of the appeal.

If the Student in Question does not submit a timely appeal, the decision of the Honor Council at the Formal Hearing shall be final.

- B. **No Appeal of Finding of No Violation.** There is no appeal from a finding that the Student in Question did not violate the Honor Code Policy.
- C. **Stay of Sanctions.** A timely appeal will have the effect of staying all sanctions pending resolution of the appeal. Accordingly, absent a determination by the Dean of extraordinary circumstances, in the event of a sanction of suspension, expulsiondismissal, or another sanction that would prevent the Student in Question from completing or participating in academic work, the Student in Question shall be allowed to continue classes and clinical work during pendency of the appeal. If the appeal process involves the grade in a course that is a prerequisite for a course in the following term, and if the Student in Question enrolls in such a course (the "Subsequent Course") while the appeal process is still ongoing, the Student in Question will be withdrawn from the Subsequent Course if the appeal process results in a failing grade in the prerequisite course.

The time to complete a sanction that includes a deadline (such as receiving education or writing a paper) will be stayed during the appeal. Any grades potentially affected by the sanction shall be entered as "incomplete" during the appeal. Under no circumstances may the Student in Question graduate until the matter and all appeals have been resolved.

- D. **Grounds for Appeal.** On appeal, the Student in Question bears the burden of establishing that an error has occurred. The Student in Question's written appeal must specify in detail the basis or bases for the appeal. The only recognized grounds for appeal are:
 - A. A procedural error occurred that significantly affected the outcome of the Formal Hearing.
 - ~~B.~~ B. There was demonstrable prejudice or bias on the part of an ~~Honor Council~~Academic Integrity CouncilHonor Council Representative who voted in the Formal Hearing.
 - ~~B-C.~~ B-C. New information exists, not available at the time of the Formal Hearing, which would have significantly affected the outcome of the Formal Hearing.
 - ~~C-D.~~ C-D. The sanction is extraordinarily disproportionate to the violation.

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~~D-E.~~ No reasonable person could conclude, on the basis of the evidence presented, that a violation occurred.

- E. **The Appeal Panel.** Promptly after the President receives an appeal; the President shall appoint an Appeal Panel to decide the appeal. The Appeal Panel shall consist of three Student Representatives from the Executive Committee (including either the President or the Executive Vice President) and two Faculty Advisors. The President or Executive Vice President shall chair the Appeal Panel. The Appeal Panel shall not include (i) any Representative who served as an Investigator in the matter; (ii) any Representative who conducted the Reasonable Cause Conference; (iii) the Student in Question, if a Representative of the Honor Council; (iv) any Representative who is a witness in the proceeding; (v) any Representative who was on the Hearing Panel; or (vi) any Faculty Advisor originally appointed to the matter, or who participated in the Formal Hearing or Reasonable Cause Conference.
- F. **Advisors to the Appeal Panel.** At least one of the University Advisors shall serve as advisor to the Appeal Panel, with a right to attend any meeting of the Appeal Panel, and voice but no vote.
- G. **Deciding the Appeal.**
- A. The Appeal Panel shall normally meet to decide the appeal within one week of appointment by the President. The Chair of the Appeal Panel may distribute the Student in Question's appeal and relevant portions of the record of the Formal Hearing to members of the Appeal Panel prior to this meeting.
- B. An appeal is not a rehearing, and the Appeal Panel will not, other than in exceptional circumstances as determined in the Appeal Panel's discretion, receive testimony. If the Appeal Panel does take testimony, the Student in Question and the Investigators are permitted to be present during that testimony; the Appeal Panel may decide whether to allow questions from those parties.
- ~~C. The Student in Question has the right to be accompanied by one advisor who is a current member of the MUSC community (for example a faculty member, currently enrolled student, or administrator). Attorneys are not permitted in the appeals hearing to represent or advise the Student in Question unless they have been arrested or criminally charged related to the Academic Integrity charge being investigated. The Student in Question's advisor may not address the appeals panel or pose questions to student in question or investigator. The Chair may instruct the Student in Question to consult with the advisor only during certain times, or may otherwise restrict consultation, if consultation with the advisor is unduly delaying the proceedings.~~
- C. The Student in Question has the right to be accompanied by one ~~advisor~~ (support person?) who is a current member of the MUSC community (for

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~~example a faculty member, currently enrolled student, or administrator). The Student in Question's advisor (support person ?) may not address the appeals panel or pose questions to student in question or investigator. As this is an academic and not an adversarial process, attorneys are not permitted in the hearing to represent or advise the Student in Question at the Appeal Hearing. However, attorneys will be permitted to participate in appeal hearings in cases where the Student in Question's alleged Honor Code -violation arises from a criminal charge. Any costs associated with legal representation will be the responsibility of the Student in Question. The Chair may instruct the Student in Question to consult with the advisor only during certain times, or may otherwise restrict consultation, if consultation with the advisor is unduly delaying the proceedings.~~

- D. The Appeal Panel will decide the appeal on the basis of the Record of the Formal Hearing and the contents of the appeal notice of the Student in Question, along with any additional evidence the Appeal Panel elects to receive.

~~E. —Appeal panels may be conducted by electronic means. All members of the Appeal Panel shall be present. Up to two members may participate by video conference. All Reasonable Cause Conferences, Formal Hearings, and Appeals Hearings may be conducted by technology authorized by MUSC Information Solutions and the Honor Council. Individuals participating virtually must be able to communicate concurrently with one another and each participant must be able to hear and be heard. In normal circumstances, it is expected that electronic means should include live video and that participants' cameras should be turned on during proceedings. MUSC provides each community member with authorized telecommunications software. Individuals are responsible for obtaining a satisfactory internet connection when participating from off campus.~~

~~Recognizing the event that the university is closed or under modified operations (for reasons including but not limited to pandemics, hurricanes, state or national emergencies, or other extraordinary circumstances) meetings of Appeal Panels may be conducted by electronic means, provided that the technology is approved by MUSC, allows all persons participating to communicate concurrently with one another and to participate effectively, and so long as each participant can hear and be heard. The preference in electronic means being a video conference when feasible.~~

~~This circumstance clarifies the requirement for the presence of Appeal Panel members to include presence either corporally or by means of electronic equipment so long as each member can hear and be heard, with video conference being preferred when feasible. This negates the limitation that only two members may participate virtually. This determination may be made by the~~

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~~Honor Council President, Executive Vice President, or a combination of the Chair and Faculty Advisor.~~

All decisions of the Appeal Panel shall be made by a simple majority vote of those members present and voting; provided, however, that a decision to change the sanction to ~~expulsion~~dismissal must be approved by seventy-five percent or more of the members of the Appeal Panel participating in the appeal and eligible to vote. The Appeal Panel will take one of the following four actions:

- ~~F.E.~~ A. Affirm the decision of the Hearing Panel in all respects.
- ~~G.F.~~ B. Uphold the finding of a violation but change the sanction. The Appeal Panel may impose a more lenient sanction or a more stringent sanction.
- ~~H.G.~~ C. Overturn the determination that a violation occurred.
- ~~I.H.~~ D. Remand the matter to the Hearing Panel for further appropriate proceedings (such as, for example, consideration of new evidence).

H. **Communication of Decision.** The Appeal Panel shall provide a written decision that concisely explains the basis for its decision. This written decision shall be transmitted to the Student in Question, to the *Honor Council President, and to the Dean of the College or Colleges in question within four working days of the meeting of the Appeal Panel. The Dean, and the Honor Council President* in the event of a remand, will implement the decision of the Appeal Panel, unless it is overturned by the Select Panel as described below.

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I. **Gathering and Retention of Record.** The Chair of the Appeal Panel will gather all documentary evidence, investigative reports, notes, and other records of the appeal, and forward them to the University Advisors for retention in accordance with the provisions of this Honor Code Policy.

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J. **Petition to Select Panel for Review.** The decision of the Appeal Panel will normally be final but the student in question may petition the Provost, to convene a ~~However, in extraordinary cases a~~ Select Panel consisting of the Provost and the Deans of two of the Colleges, who have~~has~~ the discretion to review an Appeal Panel's decision. To ask this Select Panel to consider reviewing an Appeal Panel decision, the Student in Question must deliver a written petition to the Provost. This written petition must be received by the Provost within one week (seven calendar days) of transmittal to the student of the decision of the Appeal Panel, and the petition must specify in detail the clear error or ~~extraordinary~~ circumstance that warrants review.

Upon receipt of a petition, the Provost will appoint two Deans (neither of whom shall be from the College of the Student in Question) to form the Select Panel with the Provost. The Select Panel is not obligated to review the matter, ~~but~~ has the discretion to do so if two of the three members of the Select Panel conclude that the petition presents a clear

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~~error or circumstance~~extraordinary issues that may have a significant impact on the Student in Question, the Honor Code process, or MUSC. The Provost will inform the Student in Question and the relevant Deans and Faculty Advisors within ~~one week~~a reasonable amount of time after~~of~~ receipt of the petition whether the matter will be reviewed.

If the Select Panel does not review the matter, then the decision of the Appeal Panel shall stand and shall not be subject to further appeal. If the Select Panel does accept the matter for review, the Select Panel shall thereafter review the record and conduct any such further inquiry as it may deem desirable.

A vote of at least two members of the Select Panel is required to reverse or alter the decision of the Appeal Panel. The Select Panel shall issue a written decision that affirms or alters the decision of the Appeal Panel. The decision of the Select Panel shall be final and is not appealable. All sanctions are stayed pending the Select Panel's decision, as described in Section VIII.C. above.

e.VIII. Amendment of the Honor Code Policy

Any currently enrolled student or full-time faculty member of MUSC may propose amendments to the Honor Code Policy. A proposed amendment must be submitted in writing to the President of the Honor Council. Proposed amendments shall be initially considered by the Executive Committee which, with the advice of the Faculty Advisors, shall make a formal recommendation to the Honor Council concerning whether the proposed amendment should be adopted, either as submitted or with modifications.

To be adopted, a proposed amendment must receive each of the following approvals, in the following order. Any change to an amendment at any point in the approval process will necessitate new approval by anybody having voted on the proposal before that change was introduced.

- ~~I.A.~~A. The proposed amendment(s) must first be approved by majority vote of the Honor Council in a duly called meeting.
- ~~A.B.~~B. The proposed amendment(s) must then be approved by majority vote of the MUSC Student Government Association in a duly called meeting.
- ~~B.C.~~C. The proposed amendment(s) must then be approved by majority vote of the University Education Advisory Committee and Student Affairs Advisory Council~~ommittee~~.
- ~~C.D.~~D. The proposed amendment(s) must then be approved by majority vote of the voting members of the Provost's Council.
- ~~D.E.~~E. The proposed amendment(s) must finally be approved by majority vote of the MUSC Board of Trustees.

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Unless an effective date is specified in the adopted amendment, the amendment shall become effective on the first day of the academic semester immediately following approval by majority vote of the MUSC Board of Trustees, and shall apply to any conduct by a student occurring after the effective date.

The University Advisors shall maintain a record of all adopted amendments to the Honor Code Policy, with effective dates, and shall see that amendments are promptly reflected on the online version of the Honor Code Policy.

Amendment History: Board Approved - October 12, 2001; Revision 07/21/2016; Revision 10/26/2017; Board Approved Revision 04/13/18; Board Approved Revision 10/11/19; Board Approved Revision 08/14/2020; Board Approved Revision 02/09/2024;

Amendments to the Honor Code Policy may occur during the course of the year.

IX. Definitions for the purposes of this policy

Source – authors that are human or technology/machine generated

X. Related Policies

Professional Standards and Conduct for Students Policy (with link)
Faculty Handbook (with link)

XI. Applicable Laws and/or Regulations (not intended to be all inclusive)**

XII. References:

Honor Code website: <https://education.musc.edu/students/enrollment/bulletin/honor-code>

Reporting a violation via the Maxient website: <https://education.musc.edu/students/enrollment/bulletin/honor-code/reporting-a-violation>

XIII. Distribution and Communication Plan

XIV. Appendices

*Policies become effective on the date of publication

**If not applicable, enter N/A

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