

AGENDA ITEM BRIEFING

Submitted by: Mark A. Welsh III, Interim President
Texas A&M University

Subject: Establishment of the Texas A&M University Institute for Healthcare Access

Proposed Board Action:

Establish the Texas A&M University Institute for Healthcare Access within the Texas A&M University Health Science Center (TAMHSC) at Texas A&M University (Texas A&M).

Background Information:

Texas A&M and the TAMHSC propose the establishment of the *Texas A&M University Institute for Healthcare Access (TAMU HAI or HAI)*, based in Fort Worth, to develop and lead interdisciplinary programs at Texas A&M to expand access to health and healthcare in Texas and throughout the nation. TAMU HAI will be created and operated within the TAMHSC and represent a partnership between the School of Medicine and the School of Law. The institute will also work closely with other schools within the TAMHSC, the Bush School of Government & Public Service, and other academic units at Texas A&M to connect people and advance programs that further access to healthcare and improvement of individual and community health through research, education and service.

The goal of TAMU HAI is to make a difference in health and healthcare across Texas, with applicability to other states and the nation as a whole. “Access” to health and healthcare means providing more services and support to more people in more communities and doing so in many cases at lower individual and aggregate costs. Better access means more efficient care and better health, which over time correlates with improved education, greater economic opportunity and longer lives.

TAMU HAI will expand and anchor Texas A&M’s capacity to assist the state and educate and serve its citizens in making informed public policy decisions about health and healthcare. HAI will target opportunities for research, education, outreach, and community service benefiting individual and population health. It will engage these opportunities in collaboration with other Texas A&M colleges and schools, including (but not limited to) Medicine, Law, Nursing, Public Health, Government & Public Service, Engineering, Business, Education & Human Development, Pharmacy, and Dentistry. HAI will work closely with existing TAMHSC programs and initiatives, including those connecting bioscientific discovery with clinical care delivery, targeting rural and underserved communities, and working “upstream” to promote wellness and prevent disease. HAI’s work will be purposefully interprofessional and interdisciplinary, match the broad geographic distribution of Texas A&M across the state, and connect conventional clinical services and health insurance coverage to underlying social and environmental conditions that can have strong preventive and curative effects.

Agenda Item No. 6.30
Agenda Item Briefing

TAMU HAI will have a mission to “Establish the preeminent forum to challenge conventional thinking, inspire decision-makers, engage stakeholders, and generate breakthrough advances in access to healthcare and health. Change conversations at the community, state, and national levels to shed more light, generate less heat, and bring people together in pursuit of the common good. Gather the best ideas and the most effective individuals and groups to devise, promote, and implement innovation in healthcare operations, professional education and training, financing, and public policy that helps narrow the gap between health needs and available, affordable services. Focus and amplify the impact of Texas A&M’s faculty and partners in promoting healthcare access through research, teaching, and service, including in rural Texas.”

TAMU HAI will pursue four primary organizational functions: (1) place-based clinical and community service, (2) collaborative research, (3) interdisciplinary and interprofessional education, and (4) convening and communication.

A&M System Funding or Other Financial Implications:

Support from the TAMHSC through the Chancellor’s Research Initiative (CRI) in the amount of \$6 million will be provided in the first five years of the institute to support physical facilities, additional personnel, and costs associated with institute activities. The HAI is expected to generate revenue for the life of the institute to offset its costs of staffing and core operations, primarily through grants, contracts and educational activities.

Strategic Plan Imperative(s) this Item Advances:

TAMU HAI will advance The Texas A&M University System (A&M System) strategic imperatives 1 through 5 through its research, educational, outreach, and service activities. HAI’s interdisciplinary educational and training initiatives will expand the range and diversity of affordable pathways available to students to gain instruction and experiences that will prepare them for new roles and successful careers in a large, dynamic sector of the economy (imperatives 1, 2, and 3). HAI will also support and enhance Texas A&M’s research portfolio in biomedical innovation, health and environment (imperative 4), and develop and assist services that address the health and healthcare needs of the people of Texas and help build its economy (imperative 5).

Agenda Item No. 6.30

TEXAS A&M UNIVERSITY

Office of the President

August 8, 2023

Members, Board of Regents
The Texas A&M University System

Subject: Establishment of the Texas A&M University Institute for Healthcare Access

I recommend adoption of the following minute order:

“The Texas A&M University Institute for Healthcare Access is hereby established as an organizational unit of the Texas A&M University Health Science Center at Texas A&M University.”

Respectfully submitted,

[ORIGINAL SIGNED BY]

Mark A. Welsh III
Interim President

Submission Recommended:

[ORIGINAL SIGNED BY]

Indra Reddy, Ph.D.
Interim Chief Operating Officer and Vice President
Texas A&M University Health Science Center

Approval Recommended:

[ORIGINAL SIGNED BY]

John Sharp
Chancellor

Approved for Legal Sufficiency:

[ORIGINAL SIGNED BY]

Ray Bonilla
General Counsel

[ORIGINAL SIGNED BY]

Billy Hamilton
Deputy Chancellor and
Chief Financial Officer

[ORIGINAL SIGNED BY]

James R. Hallmark, Ph.D.
Vice Chancellor for Academic Affairs

TEXAS A&M UNIVERSITY
Texas A&M University Institute for Healthcare Access
EXECUTIVE SUMMARY

1. *Rationale for the Creation of the Institute*

Texas A&M University (Texas A&M) proposes establishment of the Texas A&M University Institute for Healthcare Access (TAMU HAI or HAI), to be located in Fort Worth, as an organizational unit of the Texas A&M University Health Science Center (TAMHSC), to lead interdisciplinary health policy research, advance interdisciplinary education, and innovate clinical/community partnerships across colleges and schools at Texas A&M, in order to expand access to health and healthcare in Texas and nationally.

“Access” to health and healthcare means providing more services and support to more people in more communities and doing so, in many cases, at lower individual and aggregate costs. Better access means better health, which over time correlates with improved education, greater economic opportunity and longer lives. Inefficiency in healthcare structures and processes retards access, as does injustice. Impediments to healthcare access include lack of availability, lack of affordability, and lack of acceptability – each of which may reflect problems with information, innovation, workforce, geographic distribution, private resources, or public investments. Market competition, governance, professionalism, public trust, and accountability all require creative engagement from multiple perspectives for healthcare access to meaningfully improve. The HAI will approach healthcare access pragmatically, seeking opportunities for public benefit across a portfolio of potential issues, recruiting and assisting educational leaders and scientific innovators throughout Texas A&M, and building momentum for change by introducing existing stakeholders to new participants and perspectives.

A visible commitment to healthcare access through the HAI will honor Texas A&M’s and the TAMHSC’s original vision of educating health professionals to serve rural communities challenged by limited human resources and physical infrastructure. The HAI will expand and anchor Texas A&M’s capacity to assist the state in making informed public policy decisions about health and healthcare and in educating and serving its citizens.

2. *General Description of the Institute and its Mission and Goals*

HAI will target opportunities for research, education, outreach, and community service benefiting individual and population health. It will be created and operated within the TAMHSC, represent a partnership between the School of Medicine and the School of Law, and work closely with the other schools within the TAMHSC (Dentistry, Nursing, Pharmacy, and Public Health), the School of Veterinary Medicine & Biomedical Sciences, and the Bush School of Government & Public Service. It will also collaborate with other Texas A&M colleges and schools, including (but not limited to) Engineering, Business, and Education & Human Development. HAI will work closely with existing TAMHSC programs and initiatives, including those connecting bioscientific discovery with clinical care delivery, those targeting rural and underserved communities, and those working “upstream” to promote wellness and prevent disease. Because of the centrality of clinical operations (i.e., patient care) to strategic planning and performance for academic health centers, HAI will align and integrate its research and policy initiatives with TAMHSC’s evolving clinical enterprise. HAI’s work will be purposefully interprofessional and interdisciplinary, incorporate the voices and perspectives of new generations of health professionals and the people they serve,

match the broad geographic distribution of Texas A&M across the state, and connect conventional clinical services and health insurance coverage to underlying social and environmental conditions that can have strong preventive and curative effects.

2.1 Texas A&M University Institute for Healthcare Access Vision and Mission

VISION: National prominence in framing and advancing solutions to the most significant problems that hinder access to timely, effective, affordable healthcare for individuals and communities.

MISSION: Establish the preeminent forum to challenge conventional thinking, inspire decision-makers, engage stakeholders, and generate breakthrough advances in access to healthcare and health. Change conversations at the community, state, and national levels to shed more light, generate less heat, and bring people together in pursuit of the common good. Gather the best ideas and the most effective individuals and groups to devise, promote, and implement innovation in healthcare operations, professional education and training, financing, and public policy that helps narrow the gap between health needs and available, affordable services. Focus and amplify the impact of Texas A&M's faculty and partners in promoting healthcare access through research, teaching, and service, including in rural Texas.

2.2 Relationship to Existing Texas A&M Programs

HAI will identify and work closely with existing educational, research and service programs, at TAMHSC and elsewhere within Texas A&M, that touch on healthcare access and the improvement of individual and population health. These include (but are not limited to) the Rural and Community Health Institute, the Telehealth Institute, the Digital Health Initiative, Engineering Medicine (EnMed), the Institute of Data Science, Global One Health, the Center for Genomic and Precision Medicine, and the Office of Interprofessional Education and Research. Through its Faculty Fellows (see Section 3.2), its convening and outreach activities, and its research and educational collaborations, HAI will build a visible network of individuals and groups that highlights synergies among them and inspires collaboration, creativity and innovation. Where HAI's participation helps attract attention and resources, HAI will assist researchers and educators in existing programs, as well as their sponsoring colleges, schools and departments.

3. Faculty and Staff Associated with the Institute

3.1 Core Faculty and Staff

William Sage, MD, JD will be the Faculty Director of TAMU HAI. A national authority on health law and policy, Dr. Sage is a tenured professor in Texas A&M's medical and law schools, a professor by courtesy in the Bush School of Government & Public Service at Texas A&M, an associate vice president in TAMHSC, and a Permanent Fellow of the Hagler Institute for Advanced Study.

From 2006-2022, Dr. Sage held professorships in law and medicine at the University of Texas at Austin, where he also served as vice provost for health affairs. He was a tenured professor at Columbia Law School and has been a visiting professor at Yale, Harvard and NYU. Dr. Sage is an elected member of the National Academy of Medicine, for which he recently completed terms of service on the Board on Health Care Services and the Committee on the Future of Nursing 2020-2030. Dr. Sage also is an elected member of the American Law Institute.

Dr. Sage serves on a Healthcare System and Value Research study section for the Agency for Healthcare Research and Quality, is a Fellow of the Hastings Center on bioethics, and is an editorial board member of *Health Affairs*. He has written over 200 articles and has authored or edited four books, including the Oxford Handbook of U.S. Health Law (2016). He holds an undergraduate degree in biochemical sciences from Harvard College, medical and law degrees with honors from Stanford University, and an honorary doctorate from Universite Paris Descartes.

Keegan Warren, JD, LLM joined the TAMHSC in 2023 and will serve as the Executive Director of HAI. She brings lived experience and a civil justice lens to bear on health and wellness, specializing in non-medical cost drivers and health equity. An attorney and Federally Qualified Health Center (FQHC) director with nearly two decades of senior management experience spanning health and human services, she is a national expert on integrating medical and social services through medical-legal partnership, a care delivery model that leverages legal expertise to advance individual and population health.

Ms. Warren's research and writing apply an epidemiological perspective to legal interventions as a concrete means for addressing social determinants of health and reducing health disparities. She has worked with community health centers and medical clinics to refine their approach to non-medical drivers of health and to identify institutional policies that may be inadvertently worsening disparities and raising costs. She has experience helping various stakeholders navigate professional values around confidentiality and privacy to facilitate patient-centered data-sharing across sectors. Her expertise includes policy surveillance on targeted access issues, ranging from treating opioid use disorder in carceral settings to securing favorable 340B prescription drug pricing, to improving county-level hospital districting and regional professional competitive dynamics.

Ms. Warren is a veteran of the Army National Guard and a member of the Order of St. Joan of Arc, the highest civilian award given by the Army Armor and Cavalry Associations. She served on the National Academy of Medicine's (NAM) Committee on Integrating Social Care, recently completed service as an NAM Emerging Leader in Health and Medicine Scholar, and began a three-year term on the NAM Board on Health Care Services. She is a former adjunct professor at the University of Texas at Austin School of Law and McCombs School of Business and a lecturer at its School of Design and Creative Technologies. Ms. Warren earned her Master of Laws in Health Law and Policy from Southern Illinois University, her Doctor of Jurisprudence from the University of Texas at Austin, and her Bachelor of Arts in Spanish, International Relations, and Latin American studies from the University of Arkansas.

Susan Rudd Bailey, MD, special assistant for strategic projects to the Dean of the Texas A&M University School of Medicine, will be part of the HAI's leadership team. A past president of the American Medical Association (AMA), Dr. Bailey has paved the way for many Aggie physicians, particularly women. Her medical school graduation class of 1981 was the charter class at the then College of Medicine, and Dr. Bailey was the first woman accepted to the college. She completed her residency in general pediatrics and her fellowship in allergy/immunology at Minnesota's Mayo Graduate School of Medicine. Along with her academic appointment, she continues the private practice of pediatric allergy/immunology in Fort Worth.

In 1999, Dr. Bailey was appointed to the Texas A&M University System Board of Regents by Governor George W. Bush, marking the first time a female former student had held the position. Before rising to the AMA presidency, she was the president of the Tarrant County Medical Society and the 145th president of the Texas Medical Association (TMA). She previously served as

speaker and vice speaker of the TMA's House of Delegates and chaired the TMA Council on Communication and the TMA and AMA Medical Student sections.

Bryn S. Esplin, JD, Instructional Associate Professor of Humanities in Medicine in the School of Medicine, will be core faculty of the HAI. Professor Esplin recently rejoined Texas A&M from the University of North Texas Health Science Center, where she directed the Medical Ethics and Professional Identity curriculum and oversaw interprofessional activities within the health science center, including in the College of Pharmacy and the Physician Assistant Studies program, as well as with the University of Texas at Arlington's School of Social Work. She also serves as an Advance Care Planning Consultant for the Cleveland Clinic, where she completed her Advanced Bioethics Fellowship.

Professor Esplin's scholarly and research interests are centered around clinical ethics, patient safety and health law, and her pedagogy emphasizes the social, legal and ethical aspects of medical decision-making, ensuring trainees are exposed to and embrace all stakeholder perspectives to maximize patient safety, health outcomes and access. She is a frequent speaker at both national and international conferences in Bioethics, Health Law, and Medical Humanities, and her scholarship has appeared in numerous peer-reviewed journals, including Harvard's Health and Human Rights Journal, the Psychiatric Times, the American Journal of Bioethics, and Neuroscience. Professor Esplin earned a bachelor's degree with honors in Rhetoric from the University of California, Berkeley, and a law degree from the William S. Boyd School of Law at the University of Nevada-Las Vegas.

3.2 Faculty Fellows

HAI will recruit Faculty Fellows to build visibility and engagement with a range of schools and departments at Texas A&M relevant to the institute's mission and success. Faculty Fellows will have demonstrated prior commitment to research, education and service involving healthcare access and will confirm their interest in collaborations consistent with HAI's vision. Designation as a Faculty Fellow will provide faculty with collaborative opportunities, technical assistance, and a voice in HAI strategic planning. Drawing on its start-up funds, HAI will make seed funding for promising projects available to Faculty Fellows on a competitive basis annually, with award decisions made by the Internal Steering Committee (see Section 8) following advisory peer review. An initial class of 20 Faculty Fellows has been identified by the proposed HAI leadership team in consultation with relevant academic leaders and other subject matter experts at Texas A&M.

4. Core Activities

HAI will approach healthcare access pragmatically, building a flexible portfolio of issues and activities that offer the potential for transformative impact. A central premise of HAI engagement is that most of the challenges to healthcare access are neither new nor unsolvable. Rather, the conversations around them – among policymakers, stakeholder groups, and the broader public – have become stuck.

Consider access issues involving the healthcare workforce. A persistent shortage of primary care, for example, has largely been discussed as a maldistribution of physician specialists rather than a challenge of empowering health professionals of many sorts to perform primary care functions under varying demographic circumstances. Similarly, nurse staffing challenges for hospitals have been discussed in terms of shortage and retention from the institution's perspective, rather than in terms of attractive working conditions and professional opportunities from the nurse's perspective.

Through its activities, HAI will reframe and reposition questions with the goal of restarting and reinvigorating those conversations, increasing the probability of meaningful progress.

Intergenerational thinking about multi-generational workplaces is a potential conversation-changer for many issues involving healthcare access. Five identifiable generations currently coexist in a typical workplace for the first time in history. Millennials comprise the majority, with Gen Z growing quickly in the future workforce. This complex and changing demographic landscape is not well understood by health professionals, healthcare organizations, educational institutions, and policymakers. How to adapt workplaces, train the next generation of physicians and other health professionals, and ensure access to safe, high-quality care for patients – who also represent multiple, mixed and changing generations – are urgent concerns.

American healthcare is often inattentive to generational change because of its seniority-based professional hierarchies, traditional deference to physician control by governmental policymakers, and heavily lobbied public funding of technology and other sources of supply through established interest groups. Healthcare workforce policy discussions, for example, do not routinely incorporate insights regarding generational aspects of career initiation, mobility, duration, satisfaction, and individual and organizational performance. HAI will elicit and examine generational differences in the provision and receipt of care and in the maintenance and improvement of health (see section 4.2).

TAMU HAI will pursue four primary organizational functions: place-based clinical and community service; collaborative research; interdisciplinary and interprofessional education; and convening and communication. The framing and potential activities of each function are described in the following.

4.1 Place-Based Clinical and Community Service

HAI will have the capacity and expertise to engage healthcare access directly through both existing sites of clinical care delivery and broader community partnerships. These activities will target geographic areas with limited availability of services or identifiable care-related or health-related needs that remain unmet. Because of the centrality of clinical operations (i.e., patient care) to strategic planning and performance for academic health centers, HAI will align and integrate its service, research and educational initiatives with TAMHSC’s evolving clinical enterprise. HAI will be well-positioned to assist the TAMHSC with developing or enhancing clinical partnerships between Texas A&M’s health professional schools and hospitals, clinics and health systems. Collaborations with these clinical care organizations, and with health insurance payers and health innovation companies, will take both the institute’s mission and TAMHSC’s goals into account (e.g., in rural health and military medicine).

Integrating “social care” with clinical services will be an initial focus of the institute, including through the medical-legal partnership (MLP) model. MLP incorporates lawyers’ expertise into healthcare settings to help clinicians, case managers and social workers address structural problems at the root of many health inequities and, thereby, advance individual and population health. MLP has been endorsed or treated fully favorably by the American Bar Association, the American Medical Association, the American Academy of Pediatrics, the American Hospital Association, the National Academy of Medicine, and the Academy of Arts & Sciences.

Over 500 clinics and hospitals in the United States have attorneys, paralegals and legal assistants as part of their healthcare team. Almost half of all MLPs are in hospitals, including approximately three dozen children’s hospitals. Four of every ten MLPs are in community health clinics that treat

the medically underserved. Other MLPs are in veterans' clinics or academic healthcare settings. Every state except South Dakota has at least one MLP, and Texas is tied with Florida for the fifth most MLPs.

MLPs have been shown to have a significant impact on access to care, including reducing hospital admissions for persons with chronic illnesses and avoiding unnecessary healthcare expenditures. MLPs follow a national I-HELP™ model of concrete interventions that can remediate unmet legal needs known to be health-harming as an integrated aspect of delivering health care. I-HELP encompasses the following five domains: Income and Insurance; Housing and Utilities; Education and Employment; Legal Status; and Personal and Familial Stability.

HAI will help to expand the scope, scale and policy impact of an existing academic medical-legal partnership involving the Law School, which serves Cook Children's Hospital in Fort Worth and will work to replicate similar service collaborations elsewhere in Texas. As the institute's MLP work progresses, HAI will seek to anchor a consortium of all Texas MLPs and connect that consortium to the institute's research, education and outreach activities.

4.2 Collaborative Research

HAI will expand and support Texas A&M's prominence in health policy research, health services research, health informatics research, and other areas relevant to the institute's mission and vision. The institute's start-up funds (see Section 6) will help support its initial research activities. HAI will also perform and assist with instructional research (see Section 4.3) related to the institute's innovations in interdisciplinary and interprofessional education, which will be externally funded through grants and contracts.

A central research commitment for HAI, based on the expertise and experience of its leadership team and its strong relationships with data scientists at Texas A&M, is to create and curate novel data sets connecting medical, social and legal services that are targeted on identifying and testing strategies for access improvement. Start-up funding for this work is available (see Section 6), which will enable HAI to obtain extramural research support for large, continuing projects. One of the institute's longer-term goals is to attract and secure ambitious, center-level external funding for what HAI intends to be the nation's leading research group on access to integrated clinical and social care through medical-legal partnerships.

HAI researchers will look for gaps in information that limit options and will attempt to fill those gaps with data reflecting fresh perspectives. Intergenerational health access is an area of focus for HAI's initial research portfolio, to be supported by the institute's start-up funds. For example, research already underway in collaboration with qualitative researchers from the School of Education & Human Development examines the impact of generational change on healthcare education and care delivery practice – from the perspectives, experiences, and career plans of physicians and nurses of different generations – through focus groups with practicing and supervising health professionals, plus key informant interviews with known experts.

The project aims to achieve four objectives: understanding physicians' and nurses' current perceptions of their personal experiences of learning professional practice from their seniors; exploring physicians' and nurses' experiences working with younger generations of health professionals and professional trainees; exploring physicians' and nurses' experiences of providing healthcare to patients of different generations; and identifying significant events and trends that affected each generation's professional identity and care practices over time. A pilot study will

conduct six to eight focus groups with physician alumni of Texas A&M's medical school, with each focus group including physicians in a specific age range.

HAI's research activities will assist TAMHSC and Texas A&M components, as they pursue goals of developing promising health policy researchers and recruiting established researchers, including members of the National Academies of Science, Engineering, and Medicine. HAI is well-positioned to support these efforts at several Texas A&M campuses and locations, including in Dallas/Fort Worth and Washington, DC. HAI's leadership team will help current research leaders at TAMHSC, many of whom have limited experience outside basic science research, in creating or improving pathways for appointment, promotion, and funding for health policy researchers.

4.3 Interdisciplinary and Interprofessional Education

HAI will develop and implement a curricular platform for interdisciplinary and interprofessional education to advance the HAI's mission and benefit Texas A&M schools and departments that incorporate healthcare policy into their educational programming. The platform will be broadly inclusive of Texas A&M's educationally diverse, geographically distributed students and the faculty teaching them, and will take advantage of the proximity of Texas A&M's Washington, DC facility to national health policy experts and policymakers. Professor Esplin will lead HAI's educational activities under the supervision of the Faculty Director and the Executive Director.

Consistent with Texas A&M's rules and processes, HAI will promote and support cross-listed course offerings taught jointly by the institute's core faculty and its Faculty Fellows. Initial interdisciplinary bridging efforts across Texas A&M include (but are not limited to) a health law and policy class offered jointly by the Law School and the Bush School; a medical advocacy class offered jointly by the Law School and the School of Medicine; a biomedical innovation and healthcare access class jointly offered by the Law School and the EnMed program; a legal epidemiology class offered jointly by the Law School and the School of Public Health; and a forensic law class offered jointly by the Law School and the School of Nursing.

HAI will develop and partner certificate programs and continuing education activities in various disciplines and areas related to healthcare access. Some certificate programs and continuing education activities will contribute to the financial sustainability of HAI's educational initiatives (see section 7) through fees. HAI will seek external training grants, where appropriate, and engage in instructional research on its innovative interdisciplinary and interprofessional teaching methods and outcomes to be funded by external grants and contracts.

4.4 Convening and Communication

Outreach and communication are core activities of HAI, furthering its mission to introduce new and different perspectives to public conversations about healthcare access that have become entrenched or otherwise not productive. As part of its research portfolio (section 4.2) and in less formal ways, HAI will engage individuals and communities through focus groups and similar techniques to elicit facts and opinions and surface examples of both challenges and solutions. HAI will also seek to collaborate with local healthcare professionals and community leaders, and clarify and document potential best practices, including by connecting community-based work on access with the work of researchers. HAI will use multiple channels to convey ideas and information to the public, highlighting insights from its portfolio of collaborative projects. HAI will sponsor conferences on health policy issues, offer internal training sessions for collaborating Texas A&M colleges, schools and departments, provide training for TAMHSC clinical affiliates and community partners, and host interdisciplinary workshops to showcase the work of Faculty

Fellows (section 3.2). The HAI leadership will meet regularly to discuss strategy and staffing regarding convening and communication activities.

4.5 Institute Operations

The operations of the institute, including budgeting and facilities, will be led by the Executive Director. HAI will be housed initially in the A&M System's Burnett Plaza location in downtown Fort Worth and remain there until space assigned to the HAI at the Texas A&M-Fort Worth campus becomes available. Core faculty and staff will be co-located, with adequate provision for conferences and workspace for visiting faculty members from across Texas A&M, researchers under consideration by Texas A&M for recruitment, and other collaborators.

5. *Impact on Education and Training of Students*

TAMU HAI is committed to educating Texas A&M students and health professions trainees across disciplines, working with multiple geographic sites, and applying principles of interdisciplinary and interprofessional education. As described in Section 4.3, Professor Esplin will oversee the development of a collaborative curriculum and an instructional platform for working with academic programs training health professionals (e.g., Medicine, Nursing, Pharmacy, Public Health, Dentistry, Psychology, Nutrition) and other fields relating to healthcare access (e.g., Law, Government & Public Service, Engineering, Computer Science, Business).

6. *Resource Requirements*

Support from the TAMHSC through the Chancellor's Research Initiative (CRI) in the amount of \$6 million will be provided in the first five years to support physical facilities, additional personnel, and costs associated with institute activities described in Section 4. The HAI is expected to generate revenue for the institute's life to offset its costs of staffing and core operations, primarily through grants, contracts and educational activities.

7. *Sources and Future Expectations of Financial Support*

Start-up support to be provided by the TAMHSC and revenue generation are described in Section 6. TAMHSC clinical affiliates (e.g., community hospitals) are expected to provide continuing support from patient care revenues for medical-legal partnerships and similar community health activities. Federal (e.g., Agency for Healthcare Research and Quality), state and private foundation grants or contracts are expected to provide continuing support for HAI research and conferences/educational activities. HAI will also pursue philanthropic funding from donors and foundations, with the support of the Texas A&M Foundation.

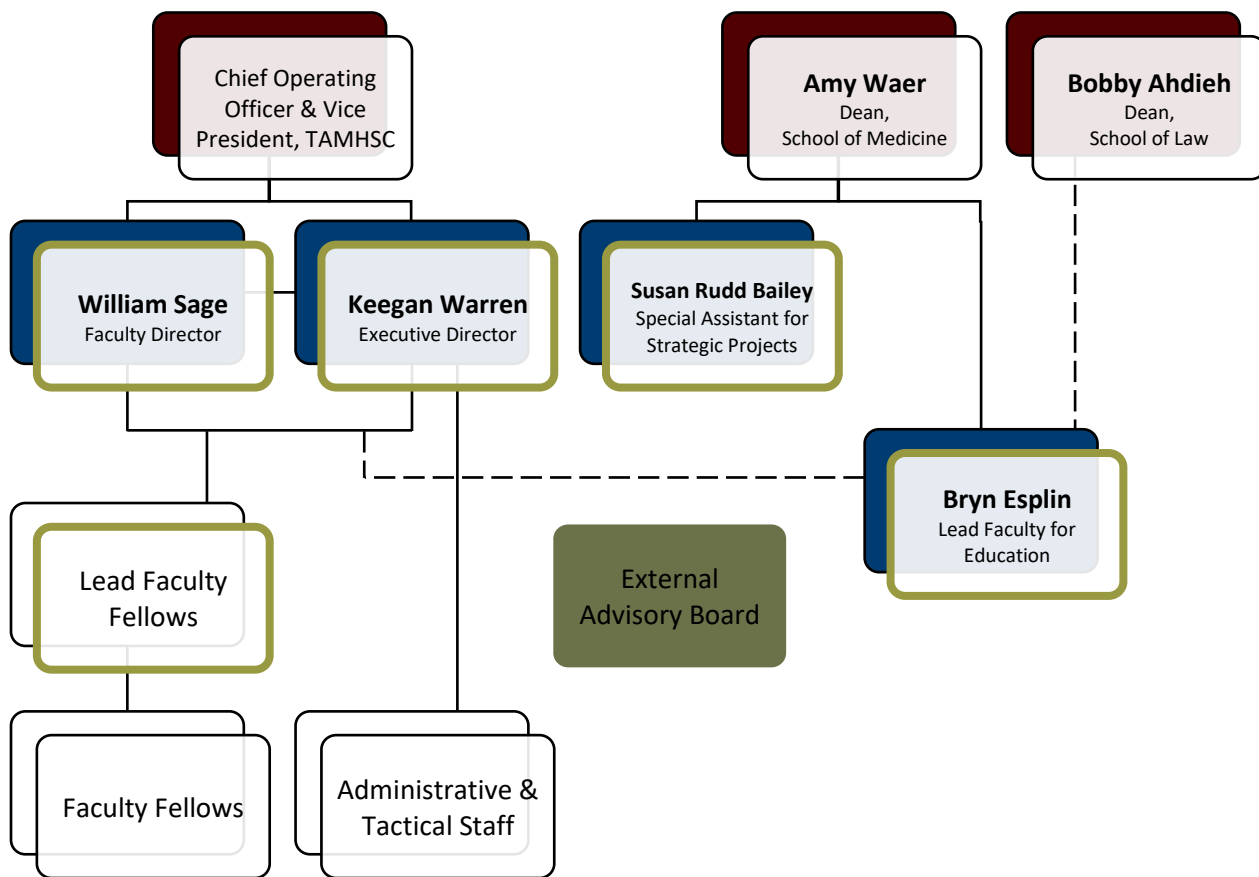
8. *Governance and Advisory Structure*

The Faculty Director will report to the TAMHSC Chief Operating Officer and Vice President. The Executive Director will report to the Faculty Director. The Faculty Director and the Executive Director's primary responsibility will be to oversee the administration and strategic planning of TAMU HAI and the principal initiatives of the institute. The Faculty Director and the Executive Director will direct the overall operations of TAMU HAI to ensure consistency with both the mission and values of the institute and the priorities and policies of Texas A&M, including with respect to fundraising, research support and community engagement.

Within TAMU HAI, there will be a leadership team consisting of the Faculty Director, the Executive Director, the special assistant for strategic projects to the Dean of the School of

Medicine (Dr. Bailey), and the lead faculty member for education (Professor Esplin). Additional staff overseeing event planning and basic administration will report to the Executive Director. An Internal Steering Committee will be created, composed of the HAI leadership team and selected HAI Faculty Fellows (see Section 3.2) distributed across relevant TAMHSC and Texas A&M academic components, following A&M System and Texas A&M requirements. Additionally, an External Advisory Board will be created, following A&M System and Texas A&M requirements. External Advisory Board members may be individuals with proven careers in education, legislation, regulation, ethics, business, healthcare, technology, community-based organizations or research relevant to healthcare access. Both the Steering Committee and the External Advisory Board will meet regularly.

8.1 Organizational Chart



LEGEND



9. Mechanisms for Periodic Review

The TAMU HAI will be reviewed in accordance with policies established for institutes and centers (i.e., A&M System Policy [11.02, Creation of Centers and Institutes](#), A&M System Regulation [11.02.01 Management and Evaluation of Centers and Institutes](#), and Texas A&M Standard Administrative Procedure [11.02.99.M0.01, Centers and Institutes](#)). An Administrative Council consisting of the TAMHSC Chief Operating Officer and Vice President and Deans of the Schools of Medicine and Law will formally meet annually to review the overall conduct of the TAMU HAI

and to ensure the Faculty Director and the Executive Director are carrying out their responsibilities to meet institute goals and comply with A&M System and Texas A&M requirements for reviewing centers and institutes. The Internal Steering Committee will conduct internal reviews annually, following the Administrative Council review. A summary of each Administrative Council review and subsequent reports from internal reviews will be shared with the Texas A&M Vice President for Research, who may provide comments and/or recommendations as to improvements or other actions that may be indicated.