

Meeting Summary
Mandatory Student Fee Advisory Committee
Thursday, November 17, 2016

1. Welcome and Introductions

Committee members and attendees introduced themselves. Per Attachment 1, nine members were present, with three represented by a substitute.

2. Committee Responsibilities and Operations

Jim Kirk reviewed for the Committee the following:

- BOR Business Procedures Manual Section on Fees
- GT Policy Statement and Role of Committee
- Potential changes in GT Policy Statement and SGA by-laws due to change in Student Activity Fee process approved by previous year's committee
- Operational ground rules

3. Review of Current Mandatory Fees

Jim Kirk provided the Committee a brief overview and history of the mandatory fees.

4. FY17 and FY18 Budget and Fee Outlook

Jim Kirk provided a brief budget overview for Fiscal 2018 outlook and referenced the letter from the Chancellor, which provides instructions strictly limiting mandatory fee increases for Fiscal 2018, with few exceptions.

5. Mandatory Fee Presentations

Staff presented overviews of their respective program areas funded by mandatory fees as follows:

- Athletics – Marvin Lewis updated the Committee on the status of the Athletic Fee. The GT Athletic Association is not requesting a fee increase for Fiscal 2018. ([link to presentation](#))
- Health – Suzy Harrington, Vladimir Oge, & Greg Moore updated the Committee on the status of the Student Health Fee and services provided by Stamps Health Services. The presentation included a proposal for a \$7 increase to the Student Health Fee. ([link to presentation](#))
- Transportation – David Williamson and Sherry Davidson updated the Committee on the status of the Transportation Fee and services funded by the fee. The department is requesting a \$3 increase in the Transportation fee. ([link to presentation](#))

NOTE: See Attachment 2 for a list of questions posed by committee and preliminary staff responses.

6. Next Meeting (TBD – week of December 5th)

Submitted by Committee Co-Chair Jim Kirk, 11/28/2016

FISCAL 2017 COMMITTEE TO CONSIDER FISCAL 2018 FEES	
Thursday, November 17, 2016	
Member	Attendance
<u>Students (8 members)</u>	
Nagel Nukuna, Undergraduate Student Body President (UG)	Present
Decker Onken, Vice President of Finance (UG) (Co-Chair, MSFAC)	Present
<i>Benjamin Nickel - attending on behalf of</i> Sujay Peramanu, Vice President of Campus Services (UG)	Present
Shane Mudrinich, Executive Vice President (UG)	Present
David Scripka, Graduate Student Body President (G)	Present
<i>Skanda Prasad - attending on behalf of</i> Quintin Kreth, Executive Vice President (G)	Present
Raunak Bhattacharyya, Treasurer (G)	Present
Sathya Balachander, Vice President of Communication (G)	Present
<u>Faculty and Staff (4 members)</u>	
Jim Kirk, Asst. VP - Inst. Budget Planning & Admin (Co-Chair, MSFAC)	Present
Stephanie Curry, Financial Mgr II, College of Sciences	Present
<i>Mysty Connelly - attending on behalf of</i> Steven Girardot, Associate Vice Provost of Undergrad Education, VP for Undergrad Education	Present
Jonathan Clarke, Associate Professor, Sheller College of Business	Present
<u>Support to Committee:</u>	
Michael Cox, Institute Finance Support Team	
<u>Other Students and Staff in Attendance (Partial List):</u>	
Tina Clonts, Marvin Lewis, Paul Strouts, Tamra Lyons, John Stein, David Williamson, Greg Moore, John Scuderi, Edo Diabaka, Vladimir Oge, Suzy Harrington, Robert Junko, Lance Lunsway, Perry Kchao, Walter Kolis, Daniel Taylor, Barbara Hanschke, Glenn Kurtz	

MSFAC Meeting 1 Questions

NOTE: The responses to the questions on the Health Fee were provided by the Health and Wellness staff. For Transportation the fee committee staff wrote all responses based on discussion in the meeting with the exception of the response to question 6, which was provided by Parking and Transportation staff.

Health

1. Q. What percentage of pharmacy increase would be expected through increase in drug price?
A. The pharmacy would need to increase the price of drugs for non-contractual patients by at least 25 percent to fund a pharmacy technician, without increasing the prices to become noncompetitive.

2. Q. Why “Financial Wellness?” How does this fit into the overall wellness program?
A. As an emerging trend, financial wellness is an integral component of the expanded “Dimensions of Health & Well-Being” concept utilized here at Tech, and by many of our peer institutions. Nationally, 30% of college student report neglecting their studies and/or reducing their class load over financial concerns. As part of a broader resiliency/life skills campaign, financial wellness programs be one of several new “upstream” risk mitigation programs, and would help minimize overall stress by increasing financial literacy and supporting budgeting and personal finance skills.

3. Q. With increase in participants, what is the tipping point for need for new FTEs?
A. While the campus population has increased nearly 40% since FY06, there’ve been no increases to the Health Educators FTE in this 10-year period. Recently established initiatives launched from FY13-FY16 have resulted in an 80% increase in programming participants. Tipping point for new FTEs was reached once population exceeded 23,000 students. The growth of current campus population at approximately 25,000 students, along with demands to address resiliency/life skills, mental health, sexual assault, and alcohol/other drugs on campus, require additional staff to shift from a downstream to upstream approach.

4. Q. Pharmacy Tech priority?
A. Pharmacy prescriptions increased 39 percent from FY13-FY16. To date, Pharmacy prescriptions are up an additional 32 percent over prior year. The risks associated with this level of production include but are not limited to prescribing errors, lower customer satisfaction and pharmacy staff burnout. Despite best efforts to maximize throughput, this level of work cannot be sustained without additional support staff.

5. Q. Incidence of pharmacy errors in the past? What is the scope of those errors, and how this this compare to the commercial pharmacies?
A. Stamps has not recorded any dispensing errors in the past few years; however, pharmacy production levels were also much lower during this period. When an error happens, it usually is the wrong drug or wrong dose. A recent report found that that 75.3% of the errors arose from patients receiving either the wrong drug (43.8%) or the wrong dose (31.5%). In resulting injuries, overdose occurred 13.6% of the time and death, 11.7%. Given the potential adverse effect, we set our dispensing rate error of 0.00 percent.

6. Q. What is the incentive to use STAMPs over CVS for pharmacy needs?
A. Anecdotal and survey responses indicate that convenience, customer service and pricing are factors. Whereas the pharmacy tries to be competitive with all local pharmacies, it is our commitment to providing patient counselling that sets us apart from other pharmacies.

7. Q. Prioritization for all of the Health request items?
A. Response provided after meeting:

Although we have provided our streamlined request, if we have to prioritize, these are thoughts around our top choices.

- The pharmacy tech can possibly be absorbed within the reserves and eventually with an increase in pharmaceutical costs.
- Access and mental health continue to be a need, and while two more care coordinators/case managers would optimize care without adding another psychiatrist, one is necessary.
- As Georgia Tech Health & Well-Being expands both in personnel and in focus and priorities, and as Health Promotion has had no increase in health educators in at least the past 10 years despite an increase in scope, and as we need to shift the focus upstream as continuing to do what we are doing is not sustainable, a minimum of two health educators is necessary.
- So that brings the prioritized request to one care coordinator/case manager and two health educators, or a total request of a \$4.50 increase (recap follows).

<u>Top Priorities:</u>	<u>Other Priorities:</u>
\$1.50 1 care coordinator	\$1.50 1 care coordinator
<u>\$3.00</u> 2 health educators	<u>\$1.00</u> pharmacy technician
\$4.50 total top priorities	\$2.50 total other priorities

8. Q. Explain the structure and difference in responsibilities between the Student Life counselors and psychologist / psychiatrists vs. the services provided by STAMPS psychologists?
- A. Organizationally, Stamps Psychiatry is under Campus Services whereas the Counseling Center (GTCC) is under the Division of Student Affairs. Stamps Psychiatry has medical doctors who can prescribe medications for patients with mental illness. Stamps Psychiatry tends to see the students with more severe and chronic mental issues, while the GTCC tends to see more short term issues. The GTCC has psychologists who provide talking therapy to better manage the day-to-day stressors. Both groups refer to each other and off campus for therapy when the GTCC is full or a student's issues are more severe (out of scope) for the GTCC. Stamps psychiatry follows students for as long as they need and GTCC individual therapy is limited to 16 sessions.

Transportation

1. Q. Is a fee imposed on Faculty or Staff?
- A. No, GT general funds provides funding to Transportation program to cover Faculty, Staff, and visitors ridership. Payment based on approximate ridership vs. students.
2. Q. Explain the discrepancy between BOR form original presented and the figures in the presentation.
- A. The autonomous vehicle project is broken out into a separate line item in the presentation to show that it will not occur without separate dedicated funding separate of student fees. Revised form from Parking and Transportation (P&T) office posted on website the morning of the meeting.
3. Q. With the new Tech Express route running can P&T cut down on the Tech Trolley route?
- A. One trolley has already been pulled off that route. With the new route ridership has actually increased. There are no empty trolleys, and the afternoon peak is still difficult to manage. P&T expects that midtown ridership to continue to grow with new commercial residential buildings and new Coda building going up.
4. Q. Can routes be adjusted to provide more favorable service to grad students? Grad perspective that Green route is neglected in favor of midtown routes. This leads to a situation where Grad students are 1/3 of the population and the perception that they receive less than 1/3 of the services.

- A. P&T has increased green route times. Increasing capacity further is being considered given funding is there. Stingerette serves Home Park, and discounted parking for evening parking is available. P&T is open to feedback from all students.
5. Q. How involved are the students in the Transportation Advisory Committee, and is the graduate student voice heard?
- A. P&T has a hard time getting participants in the committee. Ask the SGA to help get buy-in from the students. Need a sense from the grad students what their priorities are so it can be costed out.
6. Q. If no fee increase is approved, specifically what reductions would take priority?
- A. Without a fee increase, Transportation would need to cut 2,000 annual hours of service from the contract. To put this number into context of what it may mean on a daily basis (assuming the reductions would need to come from the Fall and Spring semesters), Transportation would need to cut 12 hours of weekday service from its schedule
7. Q. What specifically has been the increase in Groome's contract.
- A. Average has been 3.5%. Worked with Groome to maintain, but increase can be up to 5%.
8. Q. Is the path moving forward to expect an increase in fee annually just to maintain current services, and why can't increased enrollment handle underfunding in the future?
- A. Per P&T, yes – in the past deficit have been funded by dipping into reserve funds. That is no longer a sustainable model and increases need to be funded by the students. While increases have averaged 3.5%, the contract is up for renegotiation in 2020 and impact is uncertain. They do have a good relationship with Groome, and it has been a good partnership so far.