



STRATEGIC PLAN 2021 2025

At Texas A&M Health, service is at the core of what we do. Each of our colleges was built on the same responsibility to our community. By meeting the needs of the disadvantaged, the vulnerable and those in most need, we have answered that calling.

However, the world around us is rapidly changing, and health care is no exception. It requires innovative solutions to profound challenges and tough questions. That, above all, means health care education, research and practice should be nimble, collaborative and fit for austere environments. We have more work to do.

We're not different, but we are doing things differently at Texas A&M Health. By embracing lived experiences, building strong partnerships, focusing our research growth, reflecting the diversity of our state, and improving how and where we deliver care, we will separate ourselves from the pack. It's a new way of caring for health. We call it VISION360.

SERVICE
is at the core
of what we do



WE ARE TEXAS A&M HEALTH

OUR ORIGINS and history point clearly to a commitment to serve the underserved. We were created to diminish health disparities and deliver high-quality health care and wellness across the practices of dentistry, medicine, nursing, pharmacy and public health.

OUR VISION is to become one of the leading research-intensive, innovation-driven health science centers in the nation, and to develop individual institutes and centers that are transformative in their impact on human health.

OUR MISSION is to improve human health and quality of life—with a special attention to the underserved—across the state, around the nation and throughout the world by achieving excellence in education, discovery, clinical care and health promotion.

ORGANIZATIONAL EFFECTIVENESS

LEAN, EFFICIENT, RESPONSIVE AND SUSTAINABLE

As a health science center, we want to take the administrative and bureaucratic burdens off of our colleges and institutes so they can focus on serving the people of Texas. The role of Texas A&M Health is to make us more than the sum of our parts. We will do this by building strong internal and external partnerships, improving financial accountability, incentivizing creativity, innovation and collaboration, and making this a great place to work.

TEN-YEAR VISION

Be the best place to work for staff and faculty and the partner of choice for health science matters across Texas A&M, The Texas A&M University System and beyond. Become a national exemplar of diversity, equity and inclusion.

THREE-TO-FIVE-YEAR GOAL

Redesign our business model to support growth, including a robust clinical enterprise, diversification of revenues, enhanced diversity, equity and inclusion, and increased efficiency and effectiveness.

STRATEGIES

STRONG PARTNERSHIPS

BUILD THE CAPABILITIES TO ACHIEVE OUR OBJECTIVES THROUGH PARTNERSHIPS.
ESTABLISH SHARED FUNCTIONS TO SUPPORT THE COLLEGES AND INSTITUTES.

FINANCIAL DISCIPLINE

IMPROVE FINANCIAL ACCOUNTABILITY AND INTEGRATED BUDGETING.

- Align budget and administrative structures and processes to increase accountability.
- Create an approval process for new projects and a review process for ongoing initiatives.
- Reassess use of research space and faculty productivity policies and governance.

REVENUE DIVERSIFICATION

BUILD THE CLINICAL ENTERPRISE.
LAUNCH A TEXAS A&M HEALTH PHILANTHROPY PROGRAM.
INCREASE EXTRAMURAL RESEARCH FUNDING.
GROW ENROLLMENT.
ADOPT A PRICING STRATEGY FOR CONTINUING EDUCATION.

DIVERSE AND INCLUSIVE CULTURE

REFLECT THE DIVERSITY OF TEXAS.
SUPPORT THE MENTAL HEALTH AND WELL-BEING OF FACULTY, STAFF AND STUDENTS.



We will be
**MORE THAN
THE SUM OF
OUR PARTS**





CORE MISSION **EDUCATION**

ACTIVATE INDIVIDUALIZED PATHWAYS, CURRICULAR INNOVATION AND ENHANCED INTERPROFESSIONAL TRAINING.

Expectations for health science professionals are changing. Society is demanding better, more flexible and less expensive ways to train professionals and graduates, and also expects those students to reflect the growing diversity of the population. By embracing and acting on trends in higher education, we can distinguish ourselves from other health science centers.

● **TEN-YEAR VISION**

Be the health professional colleges and schools of choice for diverse students committed to becoming leaders in interprofessional settings.

● **THREE-TO-FIVE-YEAR GOAL**

Create more personalized professional training opportunities to position graduates as leaders in emerging health care delivery models.

● **STRATEGIES**

IMPERATIVE DEVELOP NEXT-GENERATION INTERPROFESSIONAL EDUCATION (IPE).

- Link IPE to a health priority of concern to the state of Texas.
- Create longitudinal service-learning opportunities across the colleges.
- Create cross-college training in core competencies.

OPTIMIZE RELATIONSHIPS WITH HIGH-QUALITY LEARNING SITES.

- Create a Texas A&M Health professional learning council.
- Establish “account teams” for major relationships.
- Develop a Texas A&M Health learning site database.

CREATE MORE PERSONALIZED PROFESSIONAL TRAINING.

- Develop online, asynchronous, focused educational tracks/modules offered to all colleges.
- Develop more dual-degree options and professional training options that are either accelerated or extended.
- Co-fund faculty who cut across Texas A&M Health and Texas A&M.



We must offer more flexible and less expensive **TRAINING**



Glimpses of our future **LEARNER**

SPARKED BY AN INTERPROFESSIONAL LEARNING EXPERIENCE in her first year of medical school at Texas A&M, Maria entered a dual degree program that allowed her to earn an MD and MPH degree in four years. She matched in a new psychiatric residency training program with an emphasis on telehealth located in South Texas. She now enjoys a fulfilling career providing clinical care while leading research on mental health disparities in Texas.

CORE MISSION RESEARCH

FOCUS THE FULL RANGE OF CUTTING-EDGE SCIENCE ON DIVERSE HEALTH CARE CHALLENGES.

Advancing our mission to improve health—particularly for the underserved and marginalized populations—will require the Texas A&M Health research enterprise to go to the next level. By building on meaningful convergence between the research strengths and interests of Texas A&M Health and other colleges at the university, we can realize our research potential through the full translational continuum, from basic science to clinical applications to population health.

TEN-YEAR VISION

Rank among the top three health science centers in Texas with regard to research impact.

RESEARCH THEMES

- CANCER
- INFECTIOUS DISEASES
- NEUROBIOLOGY, COGNITION AND BEHAVIOR
- BIOMARKERS AND DISEASE PREVENTION
- HEALTH DISPARITIES
- WOMEN'S HEALTH AND SEX DIFFERENCES

STRATEGIES

IMPERATIVE BUILD CAPABILITIES FOR CLINICAL RESEARCH AND COMMERCIALIZATION.

ADVANCE THEMATICALLY FOCUSED RESEARCH PARTNERSHIPS WITH TEXAS A&M UNIVERSITY AND THE TEXAS A&M UNIVERSITY SYSTEM.

CREATE “PROOF OF CONCEPT” BUSINESS PLANS FOR RESEARCH THEMES.

PRIORITIZE OUR RESEARCH INVESTMENTS, BOTH ONGOING AS WELL AS IN THE FUTURE, BASED ON THE MOST PROMISING THEMES THAT ALIGN WITH THE STRATEGIC PRIORITIES OF THIS PLAN.

ENHANCE THE CULTURE OF RESEARCH MENTORSHIP.

WORK CLOSELY WITH TEXAS A&M SYSTEM PARTNERS.

THREE-TO-FIVE-YEAR GOAL

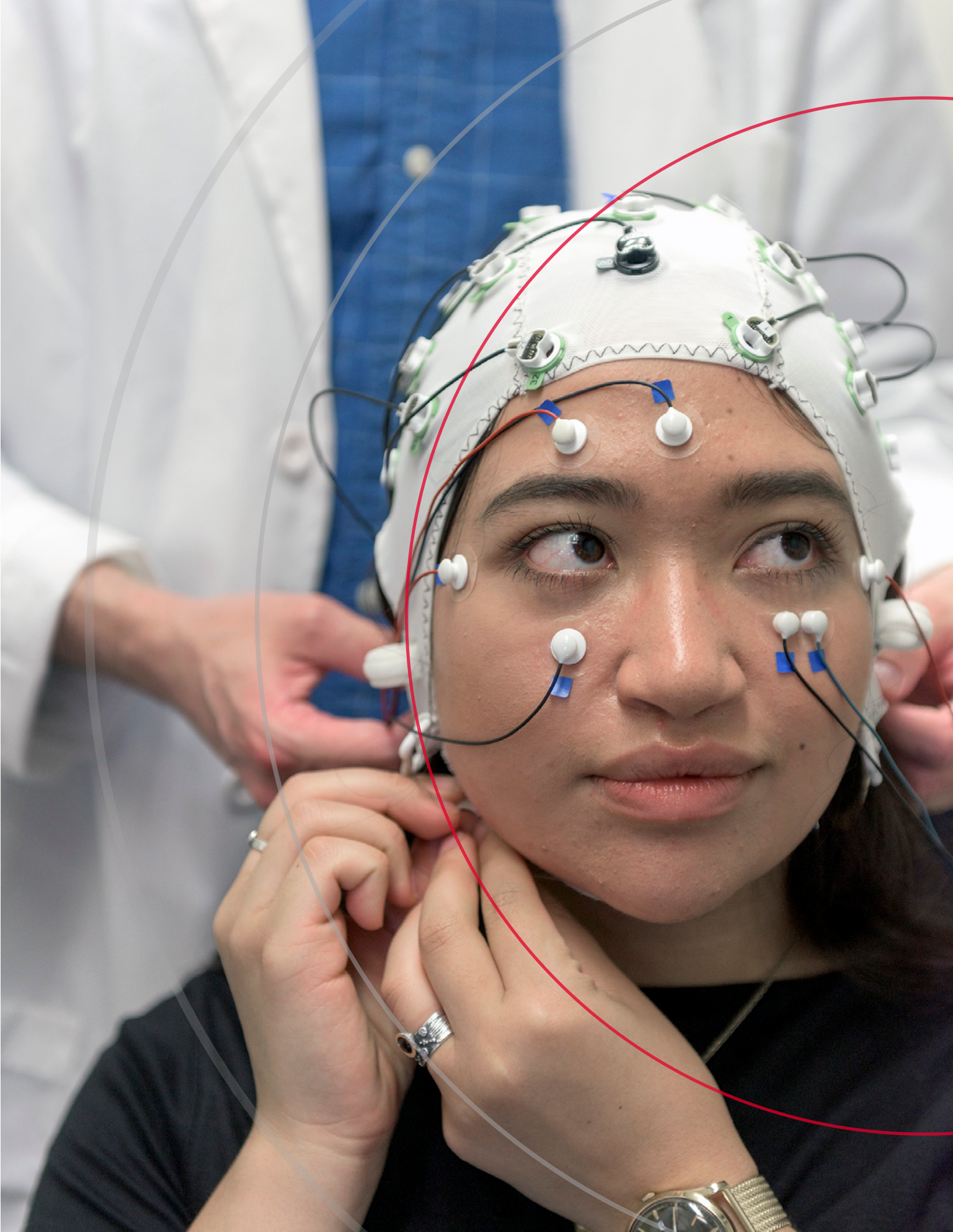
Grow interdisciplinary basic and translational research within Texas A&M Health and in collaboration with health-oriented researchers across Texas A&M.



We can realize our research potential
RANK IN THE TOP 3 IN TEXAS

Glimpses
of our future
RESEARCHER

MAX WAS A NEW, JUNIOR FACULTY MEMBER drawn to Texas A&M by the inspiring interdisciplinary research of a faculty member and a team of colleagues from the colleges of agriculture, medicine, pharmacy and science. With collaborators from across Texas A&M and support from his start-up package, Max quickly attained his first and second NIH RO-1 grants, continuing research focused on mRNA technologies for vaccine development. Together with multiple collaborators across Texas A&M University—strongly supported by the technology transfer and clinical trial offices—Max's group developed a novel mRNA technology that ultimately proved critical in the development of the first vaccine for glioblastoma.





CORE MISSION **CARE DELIVERY**

ESTABLISH DIGITALLY-ENABLED, MULTIDISCIPLINARY TEAMS THAT IMPROVE HEALTH CARE ACCESS AND RESPONSIVENESS.

We have the opportunity to build something new at Texas A&M Health. Unencumbered by a hospital and an entrenched system of care, we can lay the foundation for patient-focused, digitally enabled, economically viable clinical practices that improve access to care.

● **TEN-YEAR VISION**

Be an essential partner for innovative care delivery solutions serving all populations in Texas.

● **THREE-TO-FIVE-YEAR GOAL**

Create an economically viable network of practices and community affiliations to support our distributed educational model and to increase access to care.

● **STRATEGIES**

IMPERATIVE ESTABLISH A COLLABORATIVE CLINICAL INFRASTRUCTURE THAT IS SUSTAINABLE AND SCALABLE.

- Build a clinical practice organization that provides administrative services to the colleges.
- Expand telehealth services and the digital health platform.
- Develop a practice track for faculty of all colleges.
- Structure faculty incentives to encourage clinical engagement.

EXPAND OUR CLINICAL PARTNERSHIPS.

INCREASE PRACTICE LOCATIONS AND SERVICES OFFERED.

- Transform existing clinical sites into viable practices.
- Expand health care services offered in newly created rural health clinics and open three to five additional clinic sites over the coming years.
- Implement a team-based, collaborative community health practice approach to care delivery.
- Develop business, clinical and academic partnerships with FQHCs for specific services.
- Acquire or affiliate with specialty practices as strategically appropriate.
- Investigate the possibility of offering student and employee health services throughout the Texas A&M System.
- Investigate the the possibility of developing a concierge medicine program in Bryan-College Station.
- Investigate innovative models of care delivery incorporating new technologies, such as precision medicine, and new ways to expand access to care in austere medical environments.

PROVIDE TECHNICAL ASSISTANCE AND SERVICES TO PROMOTE POPULATION AND COMMUNITY HEALTH.



Glimpses
of our future
PATIENT

AT AGE 61, DOROTHY BEGAN EXPERIENCING INCREASING fatigue, blurred vision and a persistent mouth sore that would not heal. She saw a nurse practitioner at a Texas A&M clinic near her home who found that Dorothy's blood glucose was elevated. She was started on an oral medication for type 2 diabetes. A high-resolution telehealth consultation with a dental school faculty member in Dallas, and a biopsy in the primary care clinic, confirmed that her mouth lesion was not cancerous. With telehealth assistance from a Texas A&M nutritionist based in College Station and a wearable sensor and web-based application developed and commercialized by Texas A&M pharmacy and engineering researchers, Dorothy and her care team better managed her overall health.

CORE MISSION **COMMUNITY ENGAGEMENT**

EXPAND ENGAGEMENT IN WAYS THAT EMBRACE LIVED EXPERIENCE.

Traditionally, our community engagement commitments have been to rural Texas. In this plan, we will expand these commitments to include poor and marginalized communities in urban areas in which we will have an increasing presence as we grow our educational, research and clinical footprint. We will also grow our commitment to engaging with for-profit and nonprofit stakeholders who seek to collaborate with us to improve health care in Texas.

● **TEN-YEAR VISION**

Be a national leader in improving the health of underserved and marginalized communities and in reducing the disparities that characterize our health care system.

● **THREE-TO-FIVE-YEAR GOAL**

Broaden the geographic scope of our community engagement programs and increase the range of partnerships we create.

● **STRATEGIES**

IMPERATIVE EXPAND THE GEOGRAPHIC FOCUS OF OUR COMMUNITY ENGAGEMENT PROGRAMS.

ESTABLISH A LOCUS OF ACCOUNTABILITY AND INCENTIVES FOR FACULTY TO ENGAGE IN COMMUNITY-BASED EDUCATION, RESEARCH AND SERVICE ACTIVITIES.

DEVELOP JOINT COMMUNITY ENGAGEMENT PROGRAMS WITH OTHER CENTERS IN TEXAS A&M.

CREATE PARTNERSHIPS WITH FOR-PROFIT AND NONPROFIT STAKEHOLDERS.



We will
COLLABORATE
with for-profit
and nonprofit
stakeholders

Glimpses
of our future
PARTNER

AUSTIN, AN 8-YEAR-OLD BOY who lives in a small Central Texas town, visited a Texas A&M Health mobile clinic with his mother. A nursing student took his history and a medical student performed a full check-up under supervision. They concluded that Austin has asthma. Austin's mother said they didn't have insurance and couldn't afford doctor visits and prescriptions. The supervising medical professor referred her to a Texas A&M Health Family Care provider in a near-by city who could see them through telehealth and connected her with an onsite representative from Chip and Medicaid. A community health worker at the mobile clinic scheduled a home-visit by the Texas A&M Asthma Education team. After a number of these referrals, the team began to realize that Austin was one of many asthma cases identified at this mobile clinic. Public health researchers investigated and discovered a dangerous level of air pollutants in the area. They connected with the local government and organizations to lay out a plan for solving the problem.



IMPLEMENTATION 5-YEAR PLAN

● KEY IMPERATIVES	● YEAR 1 APR–AUG FY21	● YEAR 2 FY22	● YEAR 3–5 FY23–25
● ORGANIZATIONAL EFFECTIVENESS LEAN, EFFICIENT, RESPONSIVE AND SUSTAINABLE	<ul style="list-style-type: none">• Formulate a space and faculty productivity policy.• Review budget processes and policies.• Create an executive level diversity, equity and inclusion (DEI) position.• Outline five-year partnership goals.• Initiate a philanthropic campaign.• Launch shared services for pre-award grant writing and biostatistics.• Launch mental health and well-being programs.	<ul style="list-style-type: none">• Begin space and faculty productivity policy implementation.• Launch new budget processes and policies.• Invest in growing enrollment based on school-specific growth plans.• Submit special item proposal to state biannual planning process.	<ul style="list-style-type: none">• Complete space and faculty productivity policy implementation.
● EDUCATION DEVELOP NEXT-GENERATION INTERPROFESSIONAL EDUCATION	<ul style="list-style-type: none">• Initiate cross-college competency training modules.• Create a learning site council, account teams and supporting databases.• Establish criteria for co-funded faculty.• Sequence new educational tracks and degree options to launch.	<ul style="list-style-type: none">• Launch a problem-based learning IPE program.• Establish planning grants and technical assistance for new residencies, fellowships and advanced practice programs.	<ul style="list-style-type: none">• Establish planning grants and technical assistance for new residencies, fellowships and advanced practice programs.• Initiate coordinated longitudinal IPE service learning program.• Implement additional educational tracks.• Begin implementation of the first new educational track.• Begin implementation of the first new dual-degree option.• Begin implementation of the first accelerated or extended degree option.
● RESEARCH BUILD CAPABILITIES FOR CLINICAL RESEARCH AND COMMERCIALIZATION	<ul style="list-style-type: none">• Complete a business plan for a clinical trials office (CTO).• Increase human health-specific expertise for the Texas A&M Innovation Office.• Create proof-of-concept business plans for research task forces.• Develop a faculty recruitment plan aligned with faculty productivity policy.	<ul style="list-style-type: none">• Initiate business development functions and advisory committees for the CTO.• Operationalize thematic research partnerships.• Prioritize research investments.• Conduct faculty recruitment.• Finalize the expectations statement on research mentorship.	<ul style="list-style-type: none">• Implement a regulatory science core and a subject recruitment program.• Launch new clinical research partnerships.
● CARE DELIVERY ESTABLISH A SUSTAINABLE AND SCALABLE CLINICAL INFRASTRUCTURE	<ul style="list-style-type: none">• Launch a clinical practice organization.• Build a faculty practice track and clinical incentive program.• Transform existing clinical sites to viable and profitable practices.• Develop a faculty recruitment plan.• Establish a plan for Aggie Concierge Care.	<ul style="list-style-type: none">• Expand the clinical practice organization.• Sequence new partnerships with which to build.• Add new practice sites and services.• Initiate planning for student and employee health services.	<ul style="list-style-type: none">• Launch new clinical partnerships.• Launch technical assistance services for population and community health.
● COMMUNITY ENGAGEMENT EXPAND THE GEOGRAPHIC FOCUS OF OUR COMMUNITY ENGAGEMENT PROGRAMS	<ul style="list-style-type: none">• Designate a community engagement lead.• Develop a business plan for community engagement initiative.	<ul style="list-style-type: none">• Design and launch community engagement grant program.• Develop joint community engagement programs with another school.• Staff enhanced partnership capabilities.	<ul style="list-style-type: none">• Launch joint community engagement programs.

FINANCIAL PLAN

This strategic plan breaks even, anticipating revenues and expense reductions of approximately \$91.5 million and investments of approximately \$90 million. As new faculty hires ramp up over five years, return on investment and margin improves. This improvement will continue beyond the five-year time frame of this plan. The financial plan¹ is designed to enumerate the investments required to realize our strategic vision, as well as the incremental revenues and expenses associated with our plan. Our financial objectives are to diversify our revenue sources to reduce our historical reliance on state funds.

CURRENT CONTEXT: PROJECT OPERATING DEFICITS

In recent years, startup funds from previous leadership have been used to subsidize an ongoing operating deficit. Several assumptions drive current projections of the deficit, including the reversal of past decisions to reduce medical school enrollment, the expected growth of the College of Medicine student body to 250 students by 2025, and ongoing improvements in operating efficiency. While these changes will reduce the operating deficit over time, startup funds will still be needed to balance the budget.

REVENUE AND COST SAVINGS

Our estimate of \$91.5 million in revenue growth and cost savings depend on the following assumptions:

INITIATIVE	SOURCES	KEY ASSUMPTIONS	DATA SOURCE
Research faculty hiring	\$28M	<ul style="list-style-type: none">30 research faculty hired over 5 yearsAverage annual grant expectations for new faculty: \$1M for professor, \$500K for associate, \$250K for assistantProfessor and associate faculty ramp up to meet grant expectations over 4 years and assistant faculty ramp up to meet grant expectations over 5 years	<ul style="list-style-type: none">AVP of researchCurrent faculty NIH grantsManatt analysis
Clinical revenue growth	\$30M	<ul style="list-style-type: none">Grow clinical revenues to 10% of total revenues to approximately \$35M by year 5 (FY19 baseline of \$25M)Cumulative revenue growth of \$10M through various initiatives: (1) clinical efficiencies, (2) new rural clinics, (3) student and faculty health services, (4) FQHCs and other partnerships, (5) concierge medicine	<ul style="list-style-type: none">SVP and COOCFOAVP of clinical initiatives
Administrative savings	\$12M	<ul style="list-style-type: none">Central administration retirementsCB1 lease savings 20% in FY22Travel savingsEnergy savings audit/plan—AmerescoCopier rentals	<ul style="list-style-type: none">CFO
Faculty salary coverage	\$9M	<ul style="list-style-type: none">15% of research investments will be generated from increased faculty research productivity\$9M over 5 years (\$1M in Yr 2, \$2M in Yr 3, \$3M in Yr 4, and \$3M in Yr 5)	<ul style="list-style-type: none">SVP and COOTexas A&M Health research investigators by entityManatt analysis

¹The financial plan does not include any Texas A&M University or Texas A&M System funds. Some portion of the investments required may be funded in collaboration with Texas A&M University and the Texas A&M University System. The numbers depicted in the table of sources and uses are rounded and consequently may not add up.

REVENUE AND COST SAVINGS (cont'd)

INITIATIVE	SOURCES	KEY ASSUMPTIONS	DATA SOURCE
Increased indirect cost recovery	\$2M	<ul style="list-style-type: none">Higher indirect cost recovery from grants that are related to research task forces\$500,000/year over years 2-5	<ul style="list-style-type: none">AVP of research
Philanthropic campaign	\$50M	<ul style="list-style-type: none">5-year philanthropic campaign to be launched in FY22	<ul style="list-style-type: none">Texas A&M Health

INVESTMENTS

Our estimate of \$90 million invested over five years depends on the following assumptions:

INITIATIVE	SOURCES	KEY ASSUMPTIONS	DATA SOURCE
RESEARCH			
Research faculty hiring	\$45M	<ul style="list-style-type: none">30 research faculty hired over 5 years10 professors, 10 associates, 10 assistantsPackages: \$3M professor, \$1M associate, \$500K assistantPackage payout over 5 yearsSalary: \$250K professor, \$150K associate, \$115K assistant24% benefits	<ul style="list-style-type: none">AVP of researchSAO workforce summary documentCFO and finance teamManatt analysis
Clinical trials office and data science	\$7.5M	<ul style="list-style-type: none">\$1.5M/year over 5 yearsAdditional investments to support research task force business plans\$1M/year over years 2-5	<ul style="list-style-type: none">AVP of research
Research task forces	\$4M	<ul style="list-style-type: none">Additional investments to support research task force business plans\$1M/year over years 2-5	<ul style="list-style-type: none">AVP of research
Research pilot and bridge grants	\$5M	<ul style="list-style-type: none">\$1M/year over 5 years	<ul style="list-style-type: none">Manatt analysis
Grant writing support	\$2M	<ul style="list-style-type: none">3 FTEs hired over the first two years of the plan	<ul style="list-style-type: none">Manatt analysis
CARE DELIVERY			
Clinical faculty hiring	\$11M	<ul style="list-style-type: none">15 clinical faculty with staggered hiring over 5 years (physician level)5 at associate and 10 at assistant levelSalary: \$280K, \$240K	<ul style="list-style-type: none">CFOSAO workforce summary documentManatt analysis



See the detailed plan, view progress, connect and
provide feedback: **health.tamu.edu/vision360**

🕒 **VISION360** reflects the hard work and creativity of countless faculty, staff and students from across Texas A&M Health who participated in planning retreats, workgroup meetings, interviews, brainstorming sessions and previews for more than six months. To all who participated, your investment of time and passion is valued and appreciated.