

Indiana University
UNIVERSITY FACULTY COUNCIL
April 24, 2012
1:30 P.M. - 3:30 P.M. (EST)

IUB: Franklin Hall Room 106
IUE: Whitewater Hall Room 119
IPFW: Helmke Library Room B37
IUPUI: ICTC Building Room 541
IUK: Main Building Room 111
IUN: John W. Anderson Library/Conference Center 115
IUSB: Northside Hall Room 079
IUS: Knobview Hall Room 112

Attendance

MEMBERS: Jean Abshire, Rachel Applegate, Simon Atkinson, Karl Besel, Stephen Burns, Carolyn Calloway-Thomas, Rosanne Cordell, Nancy Eckerman, David Estell, Harold Evans, Tony Fargo, Steve Gerencser, Don Gjerdingen, Clifford Goodwin, John Hassell, Joan Kowolik, Michael McRobbie, Steve Mannheimer, Laverne Nishihara, Yusuf Nur, Nasser Paydar, Mary Popp, Jodi Smith, Fran Squires, David Tataw, Herb Terry, Lesley Walker, William Wheeler, L. Jack Windsor

MEMBERS ABSENT WITH ALTERNATES PRESENT: Charles Bantz, C. Subah Packer

MEMBERS ABSENT: Corey Ariss, Randy Arnold, Ed Berbari, Zachary Berwick, Hall Bjornstad, M. Todd Bradley, LaNita Campbell, Shu Cole, Stanley Davis, Charles Gallmeier, Richard Gunderman, Matthew Guterl, Pat Harbison, Michael Harris, Pamela Ironside, Jorge José, Hitesh Kathuria, Justin Kingsolver, William Lowe, Majorie Manifold, Moira Marsh, Tim Mickleborough, GERALYN Miller, Mary Beth Minick, Lori Montalbano, Michael Nusbaumer, Sandra Patterson-Randles, Una Mae Reck, Lauren Robel, Christopher Rutkowski, Ellen Szarleta, Michael Wartell, Tony White

GUESTS: John Applegate, Craig Dethloff (Faculty Council Office), Joan Hagen, Dan Rives, Neil Theobald

Agenda

1. Agenda Committee Business (25 minutes)
(Professors L. Jack Windsor and Carolyn Calloway-Thomas, Co-Secretaries of the University Faculty Council)
2. Presiding Officer's Business (10 minutes)
(Professor Michael McRobbie, President of Indiana University)

3. Question/Comment Period¹ (10 minutes)
(President McRobbie and Professors Windsor and Calloway-Thomas)
4. UFC Reform Status (20 minutes)
(Professor Simon Atkinson) [ACTION ITEM]
<http://www.indiana.edu/~ufc/docs/circulars/AY12/U6-2012REV2.pdf>
5. IUB and IUPUI Policy on Mergers, Reorganization and Elimination of Academic Units and Programs (20 minutes)
(Professor Rachel Applegate and Herb Terry) [ACTION ITEM]
<http://www.indiana.edu/~ufc/docs/circulars/AY12/U9-2012.pdf>
6. Revised Policy on Financial Conflicts of Interest in Research (10 minutes)
(Professor Steve Burns and Simon Atkinson, Co-Chairs of the Research Affairs Committee) [ACTION ITEM]
<http://www.indiana.edu/~ufc/docs/circulars/AY12/U10-2012.pdf>
7. Update on Benefits (25 minutes)
(Dan Rives, Associate Vice President, University Human Resource Services) [DISCUSSION]

Minutes

MCROBBIE: Alright, let's start with Agenda Committee Business with Jack and Carolyn.

AGENDA ITEM 1: AGENDA COMMITTEE BUSINESS

WINDSOR: Well, I'll go ahead and start. I don't have a lot. Craig received an email this week asking us to put forth the proposal on why ten-month pay individuals can't get that spread over twelve months. We've looked into that at the IUPUI campus. I talked to Dawn Rhodes. She referred me to Dan Rives who referred me to Neil Theobald.

MCROBBIE: And we have Neil here! [laughter]

WINDSOR: Can't they just schedule it individually, just leave it in their bank account? Some people don't want to do that. He told me that there has to be a program written by presumably Brad Wheeler before that could be accomplished. Is that still the case, Neil?

¹ Faculty who are not members of the Faculty Council and who wish to address questions to President McRobbie and co-Secretaries Windsor and Calloway-Thomas should submit their questions to the Faculty Council Office at ufcoff@indiana.edu. Meetings are open to the public. Our documents are available at: <http://www.indiana.edu/~ufc>.

MCROBBIE: Well, why don't we take—I think that question came to that effect, Jack, so why doesn't Neil come up and answer it now? Come up to the table and answer that now.

THEOBALD: I'm just going to add that this question has come up previously as well. There's four issues here, and clearly we can switch to deferring compensation over twelve months if that's a decision we choose to make. The issues are first to go—the reason we do it over ten months is to maximize investment earnings for employees. If you defer your TIAA contribution, TIAA-CREF contribution, from the academic year into the following summer, the funds are in your account for a lesser time, therefore, you have less investment earnings. So that's—that's one of the issues you deal with.

Secondly, there's a fairly significant tax issue here. If you take income earned in the fall of—fall semester, which would be in one tax year, and defer it into the summer of the following year, then that would be considered deferred compensation by the IRS. Now that could be done, but it—it makes a—it makes your taxes more complicated so—and you could end up with tax penalties if it wasn't—wasn't handled appropriately. So it could be done. It's not that that's not a problem, but that's certainly an issue to consider. The IRS does not like income to be deferred into following years for obvious reasons. They want their tax revenue when they—as soon as possible.

Also, the other issue, the third issue is that it would increase benefit costs—it could increase benefit costs. You'd have really two choices. One way to handle this would be simply to defer everything into the following summer. Two-twelfths of your compensation would be deferred into the following summer. Well, right now we pay the health insurance benefits, which is about \$200 million. We pay that as earned. If we were to want to defer those benefits, those payments, into the following summer, they—the insurance holder would want higher payments because they're not getting their money as fast—cash flow issue for them. And finally, simply the other way to handle it, so that you're not dealing with deferring the benefits would be to say okay, let's just defer the salary, but leave the benefits as ten months. That would lead to a lower cash flow for the employee during the year, clearly, because benefits are 30% of compensation. It's not a small number. So if you are paying all of your benefits during a ten-month period, and you're stretching the salary over twelve months, for those ten months, your pay is going to be about 5% less, and then you get a larger paycheck in June or July of the following year. So when we've looked at it in the past, those have been the four issues we've looked at, and the decision has been made that we would continue to pay people in the month that they earned the income, but as I say, if it is a decision of this group that you want to defer—that is certainly—it can be done. It simply has those four shortfalls.

WINDSOR: Thank you, Neil. First time I've heard those four reasons. Question—just—our intent to increase summer attendance, does that affect this at all, how the ten-month people would be paid?

THEOBALD: In other words, could you have your ten-month not be August through May, include June and July as two of your ten months and have different two months? Is that what your question is, Jack?

WINDSOR: Yeah, I mean how will increase in summer enrollment—keeping people here in the summer—affect the way we pay?

THEOBALD: That should be no difficulty. It would simply be your ten months of benefits would be paid over a different ten-month period, but that could be done, yes.

MCROBBIE: Any questions for Neil on this? Steve, I think that is at IUPUI. Steve, yeah?

MANNHEIMER: Yes. Thank you, sir. Question, how much lead time would it require for a faculty member to say well I'm now going to take off January and February, you know, please kick me into June and July, and how much flexibility to change one's mind the following year, or is this the sort of process where once started it's leviathan and glacial?

THEOBALD: No, this should—that's not a major—the technical change of simply paying a different ten months would not be a major change. The change would be if you're trying to defer income from one year to another. That's where it gets complicated.

MANNHEIMER: Thank you.

WINDSOR: Neil, am I correct that we want to go one way or the other, not maintain two ways, right?

THEOBALD: Correct. You'd either have to—for insurance payments. The insurance—I mean, it depends, either you'd have a lot of options here, but in general, you're probably going to have to have everyone defer their ten months over twelve or no one defer their ten months over twelve. I think it would be very difficult to have some of one and some of the other.

WINDSOR: Okay. Thank you.

MCROBBIE: Other questions for Neil? Other questions on this matter for Neil, since this has obviously had some interest with the UFC members? Anybody else like to ask Neil anything on this? Yeah?

MARSH: Not a question, but this is a—this is a perennial thing that has come up. I recall it coming years ago when I was on the Compensation and Benefits Committee, and the answer

was the same then, and the feeling then was this is the sort of thing that a faculty member could conceivably work out with their banker. I love my banker. I'm sure I can—but is that—it says it is a perennial question. Is it something that's worth referring to the Benefits Committee, just to put out a, you know, a handy bulletin on here's how to handle this, you know, here are some tips?

THEOBALD: I think that's a great idea, because simply you could take the money out yourself and create your own deferral.

MARSH: Exactly.

MCROBBIE: Get some investment on it, too. Any other comments on this matter? Okay. Thanks, Neil. I think that was it. I appreciate it, yeah. Jack and Carolyn, anything else?

CALLOWAY-THOMAS: Jack is leading today.

MCROBBIE: Jack?

WINDSOR: The only other thing I have is the emails pertaining to the reorganization and merger of Informatics and School of Library and Information Science. I know that [indistinct comment] said we didn't send a proposal down. Did IUB discuss this? Did they provide you with a plan?

CALLOWAY-THOMAS: We will be having a discussion next Monday—May 1st, whenever May 1st is—

UNKNOWN MALE SPEAKER: Tuesday.

CALLOWAY-THOMAS: —Tuesday? That's when we'll be discussing this issue.

MCROBBIE: Who did you—did you direct that question to me, Jack?

WINDSOR: Yeah.

CALLOWAY-THOMAS: Oh, okay. Sorry.

MCROBBIE: Yeah, this matter is under discussion between Informatics and SLIS and the provost at the moment.

WINDSOR: Yeah, I assume it would pass the core school merger, reorganization, that policy will be used to do this?

MCROBBIE: If you mean—well, yes, yes, that policy will probably be relevant there. It'd certainly have to be. It's a difficult thing being on the cusp of two policies, but I think trying to take what seems to be the appropriate line there would be the best way to proceed.

WINDSOR: Thank you. That's all I have.

MCROBBIE: Okay. Okay, Carolyn?

CALLOWAY-THOMAS: No, I have no business.

AGENDA ITEM 2: PRESIDING OFFICER'S BUSINESS

MCROBBIE: I really have—we actually met fairly recently so I have very little. I do want to say that, I know some members will be interested in this, that the search of General Counsel—I'll be meeting with the final candidates next week, and hope to have a decision to the Trustees at the Trustee meeting at the end of that week. And the provost search is underway. In fact, I meet with the search committee straight after this meeting this afternoon, and I'm hoping, given that it's an internal search, I'm hoping that that search can be done expeditiously. I have no time frame on it, but I have noted that last time it was done in about two months, so we'll see if that can be followed this time or not. I'm also mindful, so I'm sure we all want to get about our business of course today, obviously letting—giving everybody opportunity to talk of whatever they want to talk on, but I'm mindful this is an incredibly busy time of the year for all of us with final exams, and all the other vast number of things that start to mount up towards the end of—the end of an academic year. I'm girding my loins, ready for eleven commencements and eleven commencement speeches, and so it's—we're about to move into an extremely busy and intense period at the end of the academic year, but I expect we'll have record numbers of graduates again.

And I think all of the announcements have been made about commencement speakers and honorary degree recipients, and all the rest of it, so I should say, in that regard, I think with the Honorary Degrees Committee has lifted its work rate, as they say in some areas—football—and so I appreciate the amount of work that's been done. I think to identify some very good honorary degree candidates, and I think that's a very important component of what we do as a university, is to recognize achievement in that way. Okay. Question and answer period. Any—any other questions? I know we really dealt with one question that was on notice. Any—any questions or comments to myself or Carolyn or Jack? Yes, Herb?

AGENDA ITEM 3: QUESTION / COMMENT PERIOD

TERRY: Is Simon up there?

MCROBBIE: He's running late.

TERRY: Okay, then let me say something that he would, I think, say. It pertains to honorary degrees. The Honorary Degree Committee will meet tomorrow. We have one more dossier. Stuff has been sort of dribbling in on it, and we're going to meet on it tomorrow. What that may mean is that if we approve that candidate, you should look for a vote on that candidate by the UFC pretty quickly. So be alert that there may be one more coming your way.

And the other thing I'd like to say just really quickly. I'm mindful of time, too. Is that about two weeks ago, the American Academy of Arts and Sciences elected three members of the Bloomington or IU faculty, and one of those was our president. He's in a distinguished lot. I think there are three other college presidents in his section, and Melinda Gates, for that matter, in that section. It's a good group. It honors leadership in higher education in arts and sciences, and it's rare that—well at least it's unprecedented—it's the first sitting president that we've had to ALS while in office, and I thought that since he commonly announces at Trustee meetings honors and distinctions that perhaps we should honor our presiding officer for his distinction, so that's well done, Michael.

MCROBBIE: Thank you, Herb.

TERRY: Here here.

MCROBBIE: Thank you. [Applause] Thank you. Let me just make a comment. It's very kind of you. I really appreciate it. Thank you, Herb. I—I mean, personal recognition is nice, but I was delighted that—that with the—my other two colleagues who were also elected, that—Scott and Ted, that gives us, I think now twenty-four fellows of the American Academy of Arts and Sciences, and membership in the great learned societies is very important in determining the status and standing of our university and others as well, so overall I think it was very good for the university that we got three. I think our best result for a long, long time, and I'm just hoping I—I think because people know I've been pushing very hard on this, I didn't quite expect it to transpire in this way, but to encourage colleagues to nominate others for membership of the appropriate academies and professional societies in their own disciplines as well. It's going to become increasingly important—it's important now that we have ways of demonstrating the quality of our—of our faculty, and this is one very good way. So thank you again, Herb, yeah. Yes, Jack? I think it's Jack because I can't quite see.

WINDSOR: Yeah. Can you give us an update on the academic directions, the health center campus? I haven't heard a lot about it lately.

MCROBBIE: I believe that—I have not had an update for a while from Dean Brater—Vice President Brater. I believe that's still under deliberation by the health sciences cabinet. Yeah? In fact, I'm meeting with him pretty soon, and I'll get an update, but it probably won't be until next week.

WINDSOR: Thank you.

MCROBBIE: Yeah, any other questions or comments? Okay. Let's move on. Is Simon there, yet?

WINDSOR: No.

MCROBBIE: Let's jump then from four to five to—and defer agenda item four until Simon arrives. Agenda item five, which is IUB and IUPUI policy on mergers, reorganization, etc... of academic units, which will be introduced by, I think by Rachel Applegate and by Herb Terry. Rachel?

AGENDA ITEM 5: IUB AND IUPUI POLICY ON MERGERS, REORGANIZATION AND ELIMINATION OF ACADEMIC UNITS AND PROGRAMS

R. APPLGATE: I'm going to repeat what we talked about last time. As I talked about in the ceremonial [indistinct comment] people had questions about it. This is a proposal—the proposed policy was created to address a gap at IUPUI and IU Bloomington both had policies on merger, organization and elimination, MRE, and yes there are core schools which exist on both campuses, and it's really impossible to change the relationship on one campus, and not affect the other campus, and therefore this policy is fairly straightforward, and it was structured around the Bloomington current policy, which was just updated in, I think, 2009. So that it talks about some of the things that need to [indistinct comment], for example tenure considerations for junior faculty. [indistinct comment] ideas about, for example, your credit towards sabbaticals does not change—their lumped into—do not change, and then the process for getting input if somebody objects [indistinct comment] grievance for that. It envisions a committee that—or a taskforce that will be appointed by the UFC with input from both the IFC and the BFC, which is—parallels the process for the school, for things on just one campus. So a task force created this policy. It had representatives from both core schools and non-core schools from both campuses, and it was pretty unanimous, this particular iteration of the policy, and we had no comments or questions [indistinct comment] after the first reading, which we had last time.

MCROBBIE: Herb?

TERRY: The only thing I'd add is that at our last BFC meeting the same question came up that was posed to President McRobbie. Would this apply to the SLIS/Info reorganization proposed, and Provost Robel's answer was yes, that it would. So, if this passes, it has immediate utility. And it's flexible and designed to be something that can be done reasonably quickly.

MCRORBIE: Any—any questions? This is coming, I think, from a committee. Is it, Herb? So this effectively is coming as a motion for approval. Any other questions or comments for the originators of this motion? Yes, Steve?

MANNHEIMER: Thank you. And this may be splitting hairs or plucking at straws, but the—to the extent an individual faculty member may be reassigned to a department or a program that may not have been, you know, his or her original academic focus, would there—is it necessary, in the committee’s mind, and apparently not, but maybe it just never came up, would it be necessary, would it be judicious to say such reassignment into a different academic focus may involve a change of research focus, a change of scholarship focus, and as such may warrant a delay of the tenure clock, or an extension of it, you know, in some perhaps exceptional cases. I just—was that discussed?

R. APPLGATE: Not for not yet tenured people. It does discuss how people in a new home is a mutual fit of where they’re going, where they’re coming from, and they may not end up happy. It is in there about how someone who is not yet tenured can be judged on their original—against their original criteria or the new criteria.

MANNHEIMER: Well, I...

R. APPLGATE: It doesn’t speak to your particular thing about the tenure clock. One would imagine that that would be handled the way it is now, on a case by case basis.

MCRORBIE: I think—I think such a situation would be obviously looked at very sympathetically. I think people would understand that that would make a—would be a very good case for an extension of the tenure clock.

TERRY: And my comment would be that the—bringing it up in this setting, I think, creates a record that says we expect that it would be considered, and would be treated as one of these things to be dealt with in the middle of paragraph five on the third page, where we’re trying to come up with something as close as possible, fully satisfies all parties, we’ve certainly—that topic, that sentence came up last time. It was the closest approximation that Bloomington could come up with for the idea that we wanted something in here that would say, you try to work out something that’s satisfactory without trying to anticipate every detail of it, the tenure clock extension if it was warranted would, I think, be dealt with the by the vice provost for faculty and academic affairs on the campuses.

MCRORBIE: Okay. Any other comments or questions from anybody because if not I’m going to put the motion? Okay, let me then proceed to the motion which is the approval of this new policy—on this revised policy. All those in favor, signify by saying “aye.” [Aye] Against, same

sign. [Silence] I think that's carried probably—well, it's carried. Carried overwhelmingly. Good. Thanks to Rachel and Herb for their work on that one. Still no Simon?

CALLOWAY-THOMAS: If he doesn't come we can go to Dan...

MCROBBIE: Okay, it's your call. Let's then move—let's keep moving along in order. Agenda item six. And ask Steve. Well, actually, Simon's on that one, too. So we will have to jump to Dan. You're quite right, Carolyn. Dan on benefits. Dan, would you like to—?

CALLOWAY-THOMAS: Oh, he's just arrived.

MCROBBIE: Oh, he just arrived?

CALLOWAY-THOMAS: Yeah.

MCROBBIE: Sorry, sorry. We'll...Simon, Simon, let's—we'll take—there are two items here I think that you're responsible for. Why don't we do agenda item four, which is UFC reform status, first, if that's alright?

AGENDA ITEM 4: UFC REFORM STATUS

ATKINSON: Sure. So the status is that we're waiting for all the campuses to kind of hold their town hall meetings, and let us know that that's been done, and then the—the constitutional reform proposal is ready to go out for an email ballot as soon as the meetings have been held. I think that's it. So I don't know whether Craig knows how many—

CALLOWAY-THOMAS: Yes, we have—I'm happy to report that all of the campuses have had town hall meetings with the exception of IU Kokomo and they are in the process of doing so. So I fully expect that will be done by next week, perhaps? No answer.

ATKINSON: In that case, I believe that there's—Craig is ready to hit the button. It's ready to go out.

WINDSOR: It might be helpful for the president to send out a letter to the faculty about the same time discussing how UFC supported it to move forward to be more productive. I'm trying to take that strategy here, get people to vote quickly, and get it done.

MCROBBIE: Yeah, I'd be happy to do that, Jack, and I'll talk to Craig about the timing of this, and get that done quickly. Happy to do that.

WINDSOR: Thank you.

MCROBBIE: So, Simon, this—this is down as an action item, is that right or...?

ATKINSON: I don't believe that's correct. [indistinct comment] already approved at the previous meeting.

MCROBBIE: That's what I thought. This is really—this is really just a status report, right?

CALLOWAY-THOMAS: Yes.

ATKINSON: Right.

MCROBBIE: So I guess, does anybody have any questions for Simon?

TERRY: What does it take to get it approved? And that's probably more for Craig than for anyone else?

ATKINSON: And so it requires a majority of the faculty, and a majority of the majority of the campuses, and that's just a majority of the faculty who vote, not of the faculty who are eligible to vote. [Laughter]

TERRY: That was what I was worried about. Okay. While I think it would helpful if the president would urge people to vote, I would also vote for the faculty governors leaders on the units to— if that's what we have to do, so...

MCROBBIE: I would hope that they would all show their support. Anything else on this from anybody? Anything else? Okay. The revised policy on financial conflicts of interest. This is going to be Steve and Simon. Steve, do you want to start, or Simon?

AGENDA ITEM 6: REVISED POLICY ON FINANCIAL CONFLICTS OF INTEREST IN RESEARCH

BURNS: So, I'll go ahead, Simon. This again is a requirement that was based upon the universities to change their policies on financial conflicts of interest. The changes you see before you, and were presented at the last UFC meeting, are intended to meet those new requirements. We are—if we don't meet them—we have to have an entire system in place by August 28th, or else our Public Health Service funding is going to be cut off, according to Research Administration, so we have to have the entire system in place—24th, sorry. The conflict of interest committees have reviewed this and brought this to the research affairs committees who have handed it up, and we've also presented it with opportunities for questions. I've received no substantive questions. I don't know if Simon you've gotten any questions or...?

ATKINSON: No.

CALLOWAY-THOMAS: You had some, they just weren't substantive.

BURNS: Individuals requested to know that if they had money that was from a company, but it was through a grant paid through IU whether they had to report that separately under travel, and the answer is no because it goes through the university. There was a question about what happens if somebody's consulting on a grant from another institution. The answer is if that institution has a federal agreement, then we just accept their committees and their policies, but if they don't, they would have to comply with IU's conflict of interest procedures. And that's sort of standard, so...

CALLOWAY-THOMAS: Thank you.

BURNS: And I'll entertain any additional questions as will Simon.

MCRORBIE: Okay. Questions for Steve or Simon? Questions? Alright. No questions. This is coming to us against from a committee, so it doesn't need a move and second. There being no questions on this, any other questions—I'm going to put the motion. All those in favor of adopting this revised policy, signify by saying "aye." [Aye] Against? [Silence] Okay, that's carried, again overwhelmingly. Thanks again to everybody, and thanks to Steve and Simon in particular. Alright. Update on benefits. Dan, why don't you come and join us here.

RIVES: And Joan?

MCRORBIE: Joan, you want to join us, too? Come up here, Joan.

AGENDA ITEM 7: UPDATE ON BENEFITS

RIVES: Good afternoon. There's a handout that I'm going to work from and I'm wondering if they were provided here. Whatever, I'll can just—

CALLOWAY-THOMAS: We don't have copies.

RIVES: Okay, so and in talking with Carolyn and Jack, they thought it was a good idea if I would come talk about the benefits budget. We're going to spend over \$460 million next fiscal year in benefits, and almost \$200 million in healthcare, and they thought it would be good to give you some background and some nuggets because we are talking about the budget process. Joan Hagen is the associate vice president working with Neil Theobald with the budget process, and financial management and payroll and things of that nature as well. So anytime we talk about benefits, we have to sort of talk about the budget. And the first couple slides here, thank you, Steve—though you may want to go and advance it two more clicks. The first couple of slides are just background, and I think you'll find the really neat nuggets toward the end. And don't turn to the last page. [laughter] Now, of course, having said that, I know what you've just done. Benefits are very much managed on the statutory way based on federal and state law. You know, a whole lot of state—I'm sorry, a whole lot of federal regulations from ERISA, the

Department of Labor, and so forth, so we're one institution and unlike many things we do, I just heard a little tidbit about the academic programs, very much by—my words—by schools, but benefits is based on the employer, and so we look at this as an institution, as an employer, and it's really driven by federal and state law, and I put on this page some of the—some ideas of scope. We are—we are maybe the third or fourth largest employer in the state, though we have over forty-thousand employees, when you count just W-2s, there's some idea of our full-time, and part-time, and then our hourly employees. So we're large, and we take advantage of that when we leverage our size to purchase benefits for employees.

On the second page is a breakdown of when I say employees, full-time, part-time, hourly, and our medical residents, and so you know, we have about 17,500 full-time employees, and we have hundreds of part-time employees, and why do I put them on here? Over the years, we've talked about healthcare for part-time, you might not know this, but we actually provide retirement for part-time, so where they may not get healthcare, they get retirement benefits, which is a federal requirement. Our hourly employees, so those seasonal, part-time employees, which we have thousands of, again, if they work more than a thousand hours a year, we're required by a state law to provide retirements benefits. And then our medical residents, an IRS regulation not too long ago really began to classify our residents, for which we have around eleven hundred, now as employees, for the purpose of benefits. Whereas before we wanted to treat them a bit more like students, but now we treat them like employees.

Well, the third page is interesting. We have a lot of non-employees for which we have a fiduciary responsibility for, and we provide coverage to, and frankly the non-employee population is larger than the employee population. I'll give you some idea. We have around 4,500 individuals with retiree status. So based on their age and service to the university, they departed with a certain status, and they get life insurance, tuition assistance, and continuation in some health care plans. They're around 4,500. Dependents, so when you count our employees, and they cover their spouses and children for healthcare, they're around 20,000. So we actually have more dependents than we have employees when you think of certain programs. COBRA, that's the Consolidated Omnibus Reconciliation Act, and essentially it's a continuation of healthcare once you separate or a child ages off or a spouse is no longer a spouse, and it's around five hundred individuals. The very last category is not something that you would think about, but Joan and I think about regularly, these are the former employees with a vested retirement benefit. So you think of the IU retirement plan accounts at TIAA-CREF or Fidelity, and you may leave us, and former faculty who have left us over all those years, they have an account balance, they're still our responsibility. We're not putting new money in the account, but we have a responsibility for managing the account and the vendors and adherence to IRS regulations. I don't—I think we're somewhere around 15,000 to 18,000 in that number.

So, just to give you an idea, there's a very large population that we think of when we work on benefits.

Recall that benefits programs, I'm going to go to the next slide, Steve, and go ahead and hit the button one more time. So a program consists of many plans, and as an institution, we need to attract, retain very high and qualified individuals, and we do this by putting together a program of benefits. And the left-hand side inside is basically programs that are funded by the university, for which I'd like to share with you the budget in a moment. And on the right-hand side are programs from which the employee can purchase, and sometimes they're paying part of the premium, like healthcare. Other times they're paying the full premium. So just to give you an idea of when we say, "program," what's included in a program. And we try to expand this periodically as well, and unless you have questions, I think I'll just go on to the real good meaty stuff.

So, this page, you may not have seen this page before. It's certainly out there mainly sitting with fiscal officers though, and somewhere in early January, Joan and I start putting together numbers together as to how much money do we need to cover the university's expenses for benefits for the upcoming fiscal year, and our departments right now are in the process of finalizing those budgets, so departments and campuses and the university, but in order to do that, in order to build that budget and construct it, they had to know what the benefit cost was going to be, and so we through line by line, building our expected expenses for benefits, and this is a picture of the funding requirement. I'm saying that very carefully—funding requirement, not necessarily the cost of a program. So let me give you one slight example. For life insurance, and we're self-funded for life insurance, there's no way, as good as I am, that I could project the number of people that are going to die, between July [indistinct comment]. So, you know, you go by a five-year trend, and you sort of make a projection, and last year we under projected the number of deaths, and so we have a deficit, so we expect to spend actually—let me back up. It's the other way around. We had fewer deaths than we projected last year, and so the funding requirement, the 4.4 doesn't actually match the expense because I may have had a deficit or a credit the account, but we always keep that deficit and credit within the respected plan, in this case life insurance. Unemployment is going to be about 1.5. Workers comp, so these are on the job injuries both income protection and medical, around \$4 million. Tuition assistance is interesting. What you see is \$2 million going to the payroll tax here. We are going to spend another \$4 million for spouses and children for tuition assistance. We do not have tuition remission. So some universities waive the tuition. The school would simply not collect any money for the employee going to that program. For many years, Indiana University has done this differently. We actually cut the money we pay the school, so the school is not disadvantaged when employees or spouses take courses there, but that's the dollar amount, and—but the federal regulations for the contracts and grants, and Joan knows that so much

better than I, doesn't allow us to put that in the contract and grants, so we have to collect that \$4 million for the spouse and children somewhere else, and actually I'll look to Joan to describe where that is, I'm not actually sure where that comes from.

And I'm going to skip down, and come back to healthcare in a moment since it's such a big one, but 18/20 plan, the \$43 million is what we're collecting in funding. We're beginning to tap the reserve just a little bit. So we're at a—we're getting to the top of that slope of 18/20. In a couple years we'll, between the new people going in the plan, and those coming out, so we'll see that expense begin to drop off a little bit. The IU retirement plans, so those are the accounts, that TIAA-CREF and Fidelity. It's a calculation of salary. So as salary goes up, so does the monies going to the plan. Though we have some shifting of the population, those who have been here longer, higher contribution rate, they're leaving, new faculty coming in, lower contribution rate, so we factor all that in as well.

PERF is the Public Employees Retire Fund for our non-exempt employees, around \$25 million we'll be putting in that plan. And FICA is around \$87 million. It used to be that retirement was the—you could total up retirement and that was the most expensive row on this chart. Some years ago healthcare began to surpass it, and whereas everything else is driven by what do we expect the expense to be, healthcare is driven by the budget process saying the university will spend no more than X amount. So, the \$197 million, \$197.8, is 6% above the current rate of expenditure. And by the way, these are the expenditures starting July 1 for the next twelve months, and that's around \$11.2 million more than we're going to spend this fiscal year, the one that we're finishing. And if you're interested, that's around \$11,400 per employee that we're spending for healthcare, and another way of looking at it, that's around \$4 million a week that we spend on healthcare, and because we're self-funded, my office actually reimburses Anthem and IU Health, and so we know the dollars going out to cover the expenses. Another way of looking at it, and this just to sort of put it in scope, if you took the \$197 million, and I think we have something like 80,000 FTE students, whatever that number is, you get like \$2,000 per full-time equivalent student, and though that's not an empirical way of looking at it, it's sort of an interesting way of looking at it, that when you look at that dollar amount going up every year, how that expense equates to something, and so forth.

Where do we get this money? So, this is tolling over \$460 million plus. Let me stop and ask Joan to pick up the next page because the money doesn't exist in UA². The President doesn't give us the money to cover the expenses. We get the \$460 million from maybe Joan will pick up from there.

HAGEN: Not from me.

² University Administration – *Editor's note.*

RIVES: And that's the next page. You provide the money.

HAGEN: Dan—a lot of the this last slide, the next one to me, and I'll—what I'll do is talk a little bit about the mechanics of how we distribute these costs that Dan has described across the university to departments and schools. Dan talked about how he and I get together each year to develop the benefits charges and costs that the university will bear each year, and this slide shows the resulting payroll tax. I actually call this the pool benefit rates, but I think it's more popularly known as the payroll tax, and that's actually—this is the mechanism for assessing the benefits chart and cost across the university. The calculation for the rate is actually very simple. We take—we add up all of the costs, but Dan primarily projects for the upcoming year, and divide that by the benefitting salaries, or the—the eligible salaries for the costs. We do that for each benefit and retirement plan, and then we aggregate those into these separate salary pools, so we have one set of rates for academic and professional staff, another for support and service staff, and then constrained rate for the hourly with PERF, I think that's FICA and the PERF rate, so employees.

And as Dan mentioned, we charge the benefit rate to grants. So we have some special requirements there. We're held to federal requirements that we can set the rate to collect no more than our actual costs. So we're not allowed to build up a surplus in that as we collect these benefit rates. The—when the rates are finalized, along with the salary policy each year, then they're available for budgeting. The departments and units will budget their salary increases and their benefit rate increases, and the way the rates work is simply that say for fiscal year '13, for academic and professional staff for every \$100 of salaries in that range, we have \$43.34 of benefit costs. Another way to think of that is if you have a new position or a new—a new position posted or a salary increase of \$50,000, along with benefits that totals about \$72,000 when we factor in the benefit costs. So all salaries really have to be thought of along with the associated benefit costs.

Academic areas just budget this along with everything else. They build this into their budget and have to cover and fund these costs with their income. The support units and University Administration typically get a provision for the benefit rate increase, in the assessments in the university tax.

RIVES: To look at the rows, so it's one thing to look at the columns, and those are large enough themselves, but if you look at the trend or the rate of increase year to year, I think it helps to understand why some of the fiscal officers of the university get a little observant and notable about this rate because it's, you know, it's going up sometimes four percentages. The support and service staff, that big jump from last year, the 37.2% to 40—just over 40%, some of that's healthcare, but some of it's the PERF retirement plan. The PERF retirement plan, part of it's the defined benefit plan. When you read in the newspapers, almost every newspaper you pick up

these days with a financial section, defined pension plans—pension plans are—that bank account, that trust, in the last twenty-four months or thirty-six months has taken huge hits, and—but that bank account has a requirement to keep a certain level of funding, and so the state asks that universities, Purdue, IU, and the state to fund that pension by a certain dollar amount, and it went up a full 1.1% to—for the fiscal year coming up. And that thing gets passed directly on to a department, as Joan was describing, plus the cost of healthcare going up as well.

I think there are three plans that we're keeping our eye on the most. Certainly healthcare, and time permitting, I can give you an idea of some things we're working on. PERF, the Public Employees Retirement Fund, is a huge one that we're working on. Not widely known, but Purdue and IU is working together to study is there an alternative, but it's really in early stages. Looking at is there a DC type plan option we can put together to replace that defined benefit, and not have that uncontrolled liability sitting there, so we'll study it. And watching 18/20, and I think 18/20, though, is one of those feel-good types of observations. The enrollment in the next couple years we expect to begin drop off, and the expenses will drop off, and whereas five years ago, or maybe eight years ago, we would have spent time talking about 18/20, we've got it under control. It doesn't—we don't spend time talking about it anymore because it's all reasonable and doable.

So there's sort of a big picture of the budget for benefits. You can sort of see where the expenses are going, and what's going up the fastest, and the payroll tax, the charge to the departments, and so forth. Let me pause, is it appropriate to see if there's any questions?

MCROBBIE: Sure, are there questions for Dan?

RIVES: And Joan.

MCROBBIE: Yes, Herb?

TERRY: I have one. Could you back one slide? You noted the 6% increase in healthcare was decided [indistinct comment]. It's set by the Trustees as I understand it, alright?

RIVES: Yeah, Trustees and senior executives in university.

TERRY: What goes in to deciding what it's going to be for a forthcoming year?

RIVES: That's a good question. You know, it had been running for many years at eight, ten, twelve percent, and the projection there, when Vice President Theobald put together a five-year projection, put the costs out in the next three to four years at almost \$300 million, and almost anybody looking at that projection said that's not sustainable, and so it was—it was capped at something that was perceived to be more reasonable. I'm not exactly sure six, but

you know with tuition going up what it's been going up, four and a half, five, and I'm not the expert there, whatever that number has been, it's slightly more than that, so the revenue coming in—that's the best I can say right now, where the numbers come from, and it may be about half of what it was in the previous years, but it does put the projection along a line that we could probably can sustain.

CALLOWAY-THOMAS: Could you explain to us why the months of July and August are so crucial for health benefits?

RIVES: Very good question, thank you. So we put this budget together, and we know [indistinct comment] for healthcare, we will spend July and August getting our analysis together for the coming January, for medical plans. Everything else is—the variables aren't extreme, and we know what salaries are going up, and that's driving retirement, so some of the variables are fixed, except for compensation, but with medical, the environment around us, the cost of a day in the hospital, the cost of prescription drugs and so forth, we won't really pull all that together until we get to July and August, so it really gets to late August that we really know what our prems, and once we know our premiums, and we know already what the university's contribute, we can decide and put on paper in September what the employee premiums are going to look like for the upcoming January. I think that may be was the timing you were looking for, so I know last year the perception, well the university must have known in January/February what the premiums were going to be in January. We don't. We will not know that until even early September. Think of this, we put a new prescription drug manager this year, MedCo. This was a requirement by the state, that we move to the same prescription drug benefit manager as the state of Indiana. And there's some economies here. That's not all bad, but it was new, and there's new sets of discounts, and—and so we really need to understand the impact of that prescription drug program on our plans, 38,000 individuals being covered, and their utilization, and I need some trend—I need some months to go by for which we got good, valid numbers, and so you can't start too early. And then when we do that, we'll go out and do our negotiations with the Antheims and the MedCos, and other—CIGNA is for dental—regarding administrative fees, so it really is early September when we get all our numbers together.

MCROBBIE: Does anybody else have a question? Steve?

BURNS: Are there changes in the healthcare reform that are going to impact our distribution of part-time workers and costs and things?

RIVES: Very good question. The question was about healthcare reform. So assuming the Supreme Court upholds the administration's healthcare reform, and you know, the day of the week or what newspaper you pick up, but right now we're compliant, so we have done

everything that was necessary for 2012. For 2013, there's not a whole lot that's going to impact us directly. We have to start putting the value on our W-2 forms, and so Joan is working on the whole process to get that done. The Tax Saver Benefit plan, the cap is reduced from where it is now, which is several thousand dollars down to twenty-five hundred. That's not the health savings account. That's not the high deductible health savings, it's only the Tax Saver Benefit, that 125 plan, I apologize for the acronyms, I'm going fast, that gets held as a cap of two thousand five hundred. Or there's a couple other minor things, but we're in good shape for 2013. We've got to keep our eye on 2014, that will be the big year if health care reform goes through. The state exchanges will come into being. Vouchers may become an option. The mandate is to cover full-time employees as defined by thirty hours a week, and we define our full-time employees as forty hours a week or the equivalent thereof, so as we get to June/July of '13, projecting for '14, that's when we'll really—the new University Faculty Council Benefits Committee will be working very diligently to understand that, but right now we're in good shape for 2013.

BURNS: Yeah, I'm thinking in terms of strategies of many units we'll have to change in terms of their employees for the 2014 when that changes, and it may be that the next thing we'll choose will change.

CALLOWAY-THOMAS: So...go on.

MCROBBIE: I'm just going to see, are there any other questions on any of the other campuses for Dan? We have a—yes, go ahead, South Bend?

GERENCSEK: Thank you, this is Stephen Gerencsek from South Bend. Could you say anything about the number of persons who are choosing the high deductible plan, what is the impact of that on the healthcare coverage costs, and what would be the impact upon the contribution from IU to subsidize the high deductible plan and is there a time horizon on that?

RIVES: Very good. Can I ask—oh, thank you, Steve, for moving the slide. It helps to actually have a visual. So, good question. The high deductible plan, this year the enrollment is over 8,000 employees. And actually, we're up to 8,100 as new employees coming in, that's the plan of choice, and one of the values of that plan, it's a comprehensive medical plan, the distinguishing feature, though, it has a savings account attached to it, and that savings account is a true savings account, not like FLEX, not like 125, that the employee didn't actually own, but this is an account for which the employee owns, and that account balance is his or hers, and it carries with them year after year and even into retirement years, so it sort of fits that definition of a consumer driven care. You've got an account balance the member making decisions hypothetically, conceptually based on spending their money.

One reason the university has such high enrollment is we chose to put significant sums of money in that account, so for the individual employee, it's like \$1,200, and for the family it's \$2,400, and we expect to continue that. I think that's one question I've heard periodically, is that just a one-time to get people enrolled. No. Our strategy is that's a really efficient plan, if we look at it historically, it looks like the premium plus the employer contribution still doesn't exceed the premium of the other plans. So we anticipate continuing that, and I would like to do a—and maybe look to the Faculty Benefits Committee to how we can be—do a more robust job in communicating the values of that plan, and as the university doesn't provide subsidized retiree healthcare, this is a huge opportunity for individuals over time to accumulate funds, because you put your own money in the plan as well, and that money is yours. It's tax free. Look, retirement plans are tax deferred. You eventually have to pay taxes on distribution. This account is tax free. The money going in is not taxed. The earnings is not taxed, and the money coming out is not taxed, and so there's really very few, if not any other vehicle like this, and by the way, I don't see it changing with healthcare reform. It seems to be either Democrats or Republican, it's all part of the strategy to manage some of the cost of healthcare, so I don't know if that answers the question, I hope it did.

GERENCSEK: It does, but I think that your confirmation that there's no plans to, in the short term at least, to cut the university contribution to those health accounts will actually encourage more people to participate. I think some people were afraid, if you'll excuse the language, that it might have been a bait-and-switch, that would bring people in and that supplement would disappear in the short term, so your—your assuring us that that won't happen in the short term might increase people's willingness to participate. Thank you.

MCRORBIE: Well, the numbers are pretty prodigious at the moment. Yeah, so people have been very enthusiastic about it. I just want to make sure that we're fair to all the campuses. Someone else's hand at IUPUI?

ATKINSON: No.

MCRORBIE: Sorry, anybody else at any of the other campuses?

NISHIHARA: Yes, just one question from IU East, Laverne. I have not heard anything from our representative on the Benefits Advisory Committee. Are there any plans for that committee to meet, and do work over the summer?

CALLOWAY-THOMAS: Yes. We're meeting once per month. Our next meeting will be on the 14th, I believe, of May.

NISHIHARA: Thank you.

RIVES: Add one item? So, working with Carolyn and Jack, I thought it would be a good idea for us to put our handouts and other material on a website. If you were to go to the University HR website, I think you see it on the homepage, a link, it'll reference University Faculty Council Benefits Committee, and we're putting the handouts and other material there, even this material will eventually be there, so you can get an idea of the presentations and handouts and other documents.

MCROBBIE: Okay. I think it's Carolyn, then Herb. Carolyn, you had a question?

CALLOWAY-THOMAS: Oh, I was going to say you gave us lots of numbers and lots of information, if you were to winnow some of this down, and give us one or two most important take-home things, what would they be.

RIVES: Hmm...the university's spending \$460 million so it's part of a total comp, and as we encourage new individuals to come to IU or stay with IU, I think that total comp picture is important, number one. I think healthcare is still something to keep our eye on along with some retirement benefits, and we have the new University Faculty Council Benefits Committee as an active process to help the University Administration, but also be communicative more to faculty in general. Maybe those are some takeaways.

MCROBBIE: Okay, Herb?

TERRY: Just a quick question. Right after the switch to MedCo, on this campus and I think at some others, there were some faculty and staff that were rather shocked at changes in prescription drug prices before and after. I remember Jim Sherman making an announcement at the BFC meeting, and inviting comments to him, and to you. Is it your sense now that we've been with MedCo for a while that generally that's working out?

RIVES: Well, a lot of those were 8,000 employees moved to the high deductible plan, and they had to pay the prescription drug as part of their deductible, and all of a sudden, they saw that that prescription drug that they were paying five or ten dollars for a month really cost three or four hundred dollars a month, and so the real cost became front and center, and that was a good part of it, so in that way it's a positive thing. Yes.

TERRY: So people not on the high deductible may have been badly hit by this?

RIVES: I don't know that to be totally true. I'd want to investigate to see if that was reality. There were—MedCo has their own preferred drug list, whether something is generic or brand one, brand two. There may have been some changes there, but I don't really have good clear thoughts on that right now.

MCROBBIE: Any other questions for Dan?

UNKNOWN SPEAKER FROM IUPUI: Yeah, if you could summarize by having a cap [indistinct comment] as opposed to not having a cap, what is it, what does that really mean for the employee and his or her healthcare? Is it the rate at which the doctors get paid? What is—

RIVES: —Well, the cap is on the university expenditures, and so we will spend for the plans an excess of \$200 million, and this year the university is covering \$186 point something million; of that expense, the employees are paying the difference. Next year, the university's expense will go up by \$11.2 million, or to that remember I gave you, \$197 point something million. The amount of increase to the employee will depend on the amount of increase to the premiums, and the amount of increase of premiums is driven by two factors. What hospitals and physicians charge, their rate increases, and how much services we consume, and—and like it or not, as each year goes on, we consume more healthcare, and the cost charge by hospitals and physicians goes up as well. Though, lately, hospitals and physicians, that rate of increase has not been going up very much, but what we see is a lot more consumption, and I don't have those charts with me, but we'll be sharing them with the University Faculty Council Benefits Committee, and eventually they'll be on the website. You know, that number of cancers, knee replacements, and so forth and so on, and the treatment, therapy for those kinds of things is quite expensive, and so that's what I call utilization and its increasing. So, I don't think that did a very good job answering your question, but that cap is on what the university expends.

MCROBBIE: Yes?

WINDSOR: It might be helpful to tell people about your three initiatives to keep that [indistinct comment] down.

RIVES: Very good. And a whole lot more to come, and so when you look at the corridor of the cohort group using healthcare, there's like, I'm not going to get this right, but there's something like 14% of the 38,000 members that don't use any healthcare. There's like 1-8%, it looks like 7% that use 56% of the care, of the dollars. And so the corridor's in the middle of the individual that's type one, maybe a type two diabetic, and high blood pressure, many other types of issues. I'm a lay person so don't hold me to the medical terminology, but we are putting in—or we have large populations of employees working with our primary care groups and our communities trying to ease access to primary care, greater access to primary care, more reach in exams, more avoidance of the emergency room if you didn't really need to go to the emergency room, and so forth, and so forth. And, along with that, adding another level of care call care management. Engaging both nurse and pharmacist care managers. They won't be on IU payroll, they'll be on like IU Health payroll, and they would reach out to those individuals, those members, and help them with their chronic and complex medical care cases, and they're not just helping them, they're helping the primary care providers as well. I use the word provider because that could be a physician, a nurse practitioner, or a physician assistant. So

that's one type of program. We've gotten off to a good start in Bloomington, and now we're working with IU Health around—around some twenty-five to thirty primary care sites around the Indianapolis area.

A second initiative, I call transparency. There's a huge variation in price between to just take an MRI. So back to the high deductible plan, where the member needs better information to make a decision where they get care. Certainly, and where there's things that are options, so an MRI is an example. Just in Bloomington per se, there are three facilities that have the magnet for an MRI, and that can vary from, let's take a lower back set of images from several hundred dollars to over a thousand dollars. Well, that's a huge variation for the same magnet, and they're actually sending them all to the same radiologist to be read, and so we want to get that information to the member's hands, and looking at a web-based application where the member, so the employee and/or spouse would log in and get that kind of information available to them, and we're working with Purdue, Cummins and Lilly, and the state, on that particular project.

Another project is a personal health record. So I'll tie this together with getting better information to our members' hands. Personal health records have been around for the last couple years. They're not front end loaded. They're typically voluntary by the member to go in web-based application, log in, it's up to them to put medical histories and documents and so forth, so we would like to enhance this; we're working with a company called No More Clipboard, and they're out of—they're out of Fort Wayne, Indiana. I had to think about—I think about West Lafayette a lot, but Fort Wayne, and what we're attempting to do is to work with MedCo, so MedCo as prescription drug data exists there—import that into PHR, Anthem, IU Health, into the PHR, and the member has a confidential site they can go to to get their medical history, who the providers are, they can put their own contracts in, end of life information and so forth. Maybe record their cholesterol, and other things. Biometrics they'd like to record. So that would be another initiative we're working on as well. So this is a—those are examples of the initiatives that we have under way right now.

MCROBBIE: Behind you.

WHEELER: Thank you. Do you think that the rate of premiums, health care premiums, is going to exceed the rate of increase in salaries?

RIVES: So the question was do I think the rate of increase in premiums will exceed the rate of increase in salaries? So what was the—what's the projected increase in salaries? [Laughter]

WHEELER: Various numbers, 2%, 2½% or something like that?

RIVES: Healthcare is still trending 6, 7, 8%, so I don't know what to tell you about the comparison, but there's still—there's still a positive in trend in healthcare these days, which is why the university is putting 6% increase into its budget, by the way.

WHEELER: So the net result of having a cap [indistinct comment] is that the healthcare cost will be increasing component of one's salary.

MCRROBBIE: Not necessarily because there are things you can do to reduce it personally.

WHEELER: Globally, I mean globally.

MCRROBBIE: If you do nothing.

WHEELER: Most of us really know we can't.

MCRROBBIE: Well, Herb, yes?

TERRY: I hope my memory is right. I think at some recent Trustees meeting, you said you were looking in to extending the drop-in clinics, and sort of thing that we have at Bloomington to other facilities, other campuses. Can you give that an update on...?

RIVES: Well that's when I was talking about primary care. That—

TERRY: —That's part of that.

RIVES: Right, exactly. You know, the—back to the gentleman's question, the high deductible plan last year, the premium actually went down, and though the employee contribution went up, it didn't go up as much as the other plans, so, you know, one strategy employees could engage in the years to come, and I—and I think this is—we have to take ownership on helping employees understand the differentials in value, but I—if the PPO plans, you know, that \$400 PPO plan goes up X percent, like eight or ten percent, and that high deductible plan remains the same or even slightly drops, and I wouldn't just drop that on you if I didn't think that was a possibility, then, an answer to your question is there could actually be lowering of what the employee pays, but there's a different type of plan there as well. But—that remains to be seen to be, honestly, we have to get all the numbers together.

MCRROBBIE: Other questions? Any of the regional campuses? Other campuses? Yes, Steve? Yep?

GERENCSEK: This is Stephen from South Bend. Earlier you mentioned about a website where there would be all this information linked as well as to the UFC Benefits Committee, was that to the main human resources page or—I'm sorry, I just kind of missed that, you went by it quickly,

and maybe you could send that to Craig, and he can send it out to us so we could share it easily with our faculty—with our faculty members.

RIVES: Absolutely, Craig has it. It is off the University—just go to hr.iu.edu, and—

MCRORBIE: —Just send it out, Dan. Yeah, so that... Other—other questions? Any other questions? Any other campus? Any other campus? Alright. No questions here?

CALLOWAY-THOMAS: I have a question, but not related to benefits, but I wanted to ask gently if you would give us an update on the student services, is that possible? Do we have time?

APPLEGATE: Really not much to update. The phase two is complete, getting the comments. Got a lot of good comments. And phase three, which is constructing the detailed models is beginning.

MCRORBIE: Well, with the completion of agenda item seven, we're adjourned, and best wishes to everybody for the next frankly two weeks, and then a period of vacation, or at least the summer period, which is maybe a little less frenetic, although for this summer semester maybe that's become a little bit more frenetic. So thanks to everybody, and I guess we'll be reassembled possibly as a new organization. So we'll see what happens. Thanks everybody. Goodbye. All the best for summer.

MEETING ADJOURNED: 2:48PM