

The Regents of the University of California

**COMMITTEE ON HEALTH SERVICES  
COMMITTEE ON GOVERNANCE**

November 19, 2015

The Committees on Health Services and Governance met on the above date by teleconference at the following locations: UCSF–Mission Bay Conference Center, San Francisco; 3750 University Avenue, Suite 610, Riverside; and 3110 Main Street, Santa Monica.

Members Present: Representing the Committee on Health Services: Regents Blum, Island, Kieffer, Lansing, Makarechian, Pattiz, Sherman, and Zettel; Ex officio members Lozano, Napolitano, and Varner; Advisory members Brody, Hare, and Schroeder; Staff Advisors Acker and Richmond

Representing the Committee on Governance: Regents Blum, De La Peña, Gould, Island, Kieffer, and Lansing; Ex officio member Varner

In attendance: Regents Davis, Elliott, Gorman, Newsom, Ortiz Oakley, Oved, Reiss, Ruiz, Torlakson, and Wachter, Regent-designate Ramirez, Faculty Representative Chalfant, Secretary and Chief of Staff Shaw, General Counsel Robinson, Chief Compliance and Audit Officer Vacca, Provost Dorr, Executive Vice President and Chief Financial Officer Brostrom, Executive Vice President and Chief Operating Officer Nava, Executive Vice President Stobo, Senior Vice Presidents Henderson and Peacock, Vice Presidents Brown, Budil, Duckett, Humiston, and Sakaki, Chancellors Block, Blumenthal, Gillman, Hawgood, Katehi, Khosla, Leland, Wilcox, and Yang, and Recording Secretary McCarthy

The meeting convened at 8:50 a.m. with Committee on Governance Chair Gould presiding.

**1. APPROVAL OF MINUTES OF PREVIOUS MEETING**

Upon motion duly made and seconded, the minutes of the meeting of September 16, 2015 were approved, Regents Blum, De La Peña, Gould, Island, Kieffer, Lansing, Lozano, Makarechian, Napolitano, Pattiz, Sherman, Varner, and Zettel voting “aye.”<sup>1</sup>

**2. UC HEALTH GOVERNANCE: AMENDMENT OF BYLAW 12.7: COMMITTEE ON HEALTH SERVICES AND STANDING ORDER 100.4: DUTIES OF THE PRESIDENT OF THE UNIVERSITY, AND ESTABLISHMENT OF POLICY ON COMMITTEE ON HEALTH SERVICES**

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<sup>1</sup> Roll call vote required by the Bagley-Keene Open Meeting Act [Government Code §11123(b)(1)(D)] for all meetings held by teleconference.

The President of the University recommended that the Committee on Governance recommend that:

- A. Bylaw 12.4 be amended, as shown in Attachment 1.
- B. Bylaw 12.7 be amended, as shown in Attachment 2.
- C. Standing Order 100.4 be amended, as shown in Attachment 3.
- D. A new Policy on UC Health be adopted, as shown in Attachment 4, to implement the above changes.

[Background material was provided to Regents in advance of the meeting, and a copy is on file in the Office of the Secretary and Chief of Staff.]

Committee on Governance Chair Gould introduced this proposal to improve the governance and enhance the oversight of UC Health. He reviewed prior discussions of the proposal. Input from the Regents had been received at the prior meeting. Committee Chair Gould noted that there are two additional changes to the revised proposal to add the Governor as a member of the modified Committee on Health Services and to correct an error that omitted that one of the Regent members of the Committee would be a member of the Committee on Compensation.

Committee Chair Gould reviewed the proposal's main points. Based on input received from Regents at the prior meeting, the proposal had been changed so that Regents would be the only voting members of the modified Committee on Health Services. Another change was made requiring, for smaller transactions with delegated approval to the campus and the President of the University, the additional approval of the Committee on Health Services Chair or Vice Chair, allowing the Regents to retain substantial oversight, even on more modest transactions. The Committee on Health Services would report to the full Board annually on UC Health transactions of the past three years, the student health centers, and the Student Health Insurance Plan (SHIP). Committee Chair Gould expressed his view that the plan had been improved toward the goals of improving Regents' governance and increasing UC Health's responsiveness to the changing healthcare marketplace.

Chairman Lozano expressed her view that Regents' comments at the prior meeting had been helpful in arriving at an enhanced proposal that would improve the overall operation of UC's medical enterprise.

President Napolitano commented that the healthcare enterprise is one of the University's largest segments. She expressed her support for the proposal, which would enable the Board to provide strategic advice and is supported by all UC chancellors of campuses with medical centers.

Executive Vice President Stobo reviewed changes made to the proposal in response to Regents' concerns expressed at the September meeting and other feedback. The modified

Committee on Health Services would consist of 15 members, including seven Regents. The proposed initial term of the Chair of the Committee was shortened to three years beginning once all Committee members are in place. After that, the terms for the Committee Chair and Vice Chair would be the same as for other Regents' committees.

The Governor was added to the Committee. Three of the seven Regents would be representatives of the Committees on Finance, Grounds and Buildings, and Compensation. Only Regents would be voting members of the Committee; all other members would be non-voting. A representative from the Academic Senate was added to the Committee as a non-voting member. The students may propose a student observer to the Committee. The Committee's responsibility would be to provide strategic oversight of the UC Health clinical enterprise, and oversight of the Student Health and Counseling Centers was specifically delineated as part of the Committee's scope.

Approval of the Chair or Vice Chair of the Committee on Health Services was added to approval of the chancellor and President or her designee for Level 1 delegations of authority for transactions up to the lesser of 1.5 percent of the relevant medical center's total operating revenue or \$25 million for an individual transaction, and up to an annual amount of the lesser of three percent of that medical center's total operating revenue or \$50 million. That delegation would not extend to transactions involving more than one UC health system campus, regardless of the transaction value. Dr. Stobo added that the Executive Vice President for UC Health would regularly brief the Committee on Health Services Committee on systemwide managed care contracts negotiated on behalf of the UC clinical enterprise. Any transaction with significant reputational risk for the University or impact on the clinical strategic plan of UC Health would be brought to the full Board for approval. UC Health-related capital projects otherwise requiring approval of the Committee on Grounds and Buildings or the full Board would first require approval of the Committee on Health Services based on the project's strategic fit with UC Health's overall clinical enterprise. The proposal was changed so that, following approval of the Committee on Health Services, the Committee on Grounds and Buildings would grant final approval or make a recommendation for approval to the full Board, as provided in Bylaw 12.4.

Any decision made under delegated authority would be reported to the full Board at its next meeting. The proposal was changed to add that an annual report of the transactions approved during the previous three years would be presented to the full Board in March of each year, so that the Board can evaluate the outcomes of these transactions. Also a requirement was added that a report of the status of the student health and counseling centers and SHIP would be presented to the full Board each September.

The Committee on Health Services would approve appointments and compensation of UC Health employees whose incomes are derived solely from sources other than State General Funds. The proposal was changed to add that the Committee on Compensation would also develop and review the benchmarking framework for compensation every two years, along with the Committee on Health Services.

Dr. Stobo emphasized that these changes strengthen the proposal and would provide the governance desired by the Board in a rapidly changing healthcare environment.

Committee on Health Services Chair Lansing expressed her enthusiastic endorsement and her view that the proposal had been improved by incorporating input from Regents at the last meeting. The new governance would help UC Health navigate the modern healthcare environment with the proper oversight.

Regent Makarechian asked about the terms of Committee members. Dr. Stobo responded that, after the initial three-year term, the terms of the Chair and Vice Chair would be similar to those of other Regents' committee chairs. The terms of the other members are yet to be decided, but would probably be two or three years. The terms of external advisors would be staggered. Regent Makarechian pointed out that Regents' membership on the Committees on Finance, Compensation, or Grounds and Buildings could change and require a change in the Committee on Health Services. Dr. Stobo agreed that would have to be taken into account.

Regent Makarechian commented that UC Health's capital projects would require ongoing involvement of the Committee on Health Services after the initial approval, for instance if there were changes or cost increases. A system should be developed to ensure the medical centers' ongoing involvement in the execution of these projects. Dr. Stobo commented that establishing approval pathways would make oversight more robust. Regent Makarechian suggested establishing a timeline for developing such procedures.

Regent Makarechian asked about oversight of routine maintenance of UC Health capital projects. Dr. Stobo responded that if the maintenance did not affect the clinical strategic plan, oversight would be through the current existing procedures. Regent Makarechian expressed his view that such responsibility should be clearly defined.

Regent Zettel suggested that external advisors to the modified Committee on Health Services be required to file a California Fair Political Practices Commission Form 700 to avoid possible conflicts of interest. Committee Chair Gould agreed and suggested considering use of the same disclosure requirements that apply to members of the Investment Advisory Group.

Regent Davis asked which committee would have responsibility for litigation settlements and related remediation measures. Dr. Stobo said that responsibility would continue under the Committee on Finance. Regent Davis commented that interests of UC's alumni were not represented on the modified Committee on Health Services.

Regent Blum expressed strong support for the proposal and confidence that small details would be worked out. He cautioned against requiring excessive numbers of reports.

Regent Kieffer also expressed support for the proposal, commenting that a more focused committee would be able to provide better governance.

Regent Elliott commented that, although the proposal was much improved over the one discussed at the prior meeting, he saw no compelling reason to change the current process for approving compensation packages and benchmark frameworks for UC Health

executives, who are some of UC's highest-paid employees. Even though they would be compensated using funds other than State General Funds, the employees are nonetheless UC employees and the funds used for their compensation could be used for other purposes that would benefit UC. Regent Elliott asked for clarification of the source of funds for these employees' benefits and post-retirement benefits. Dr. Stobo responded that the source is clinical revenues. Regent Elliott said he could not recall a compensation package for a UC Health employee being delayed or not approved under current governance procedures. He also expressed concern that this change could lead to requests for approval of other groups of employees' compensation by less than the full Board. He would not support the proposal.

Committee Chair Gould clarified that the benchmarks for UC Health salaries would be approved by both the Committees on Health Services and Compensation. Regent Ortiz Oakley asked how the framework benchmarks would be developed, expressing his view that development of such frameworks should continue to lie with the Committee on Compensation. Dr. Stobo said the Committees on Health Services and Compensation would come together to examine the Market Reference Zones (MRZs) and use that data and other criteria to make rational compensation decisions. Regent Ortiz Oakley asked if approval of the MRZs would continue to be by the Committee on Compensation. Dr. Stobo answered in the affirmative.

Regent Ortiz Oakley asked that the new governance structure for the Committee on Health Services be reviewed by the Regents in one year. Committee Chair Gould agreed.

Regent Ortiz Oakley cautioned about distinguishing compensation paid for with State General Funds from that paid with other funds, and expressed his view that all funds used by the University should be scrutinized by the Regents.

Regent Reiss expressed support for the proposal, noting changes in the healthcare environment. She pointed out that MRZs are compiled using external data. Regent Oved expressed support for the proposal. Regent Pattiz said he supported the proposal, which had been improved in response to input from the Regents. Regent Island expressed enthusiastic support for the proposal and the transparent process used in its development.

Regent Ruiz expressed support for the proposal and asked how it would help improve provision of health care in California. Dr. Stobo advised that UC Health is the third or fourth largest provider of health care in the state and its largest provider of tertiary and quaternary procedures. UC Health also provides care for a significant number of Medi-Cal and uninsured patients. This proposal would enable UC Health to improve its operations to care for the increasing number of patients covered by Medi-Cal as a result of the Affordable Care Act, a major challenge facing the state.

Regent De La Peña emphasized the importance of understanding the interaction of the various governance provisions. He expressed support for the proposal and improvements made in response to Regents' input at the prior meeting.

Upon motion duly made and seconded, the Committee on Governance approved the President's recommendation and voted to present it to the Board, Regents Blum, De La Peña, Gould, Island, Kieffer, Lansing, and Varner voting "aye."

The meeting adjourned at 9:40 a.m.

Attest:

Secretary and Chief of Staff

**Additions shown by underscoring; deletions shown by strikethrough**

BYLAW 12.4

RESPONSIBILITIES OF STANDING COMMITTEES

COMMITTEE ON GROUNDS AND BUILDINGS

The Committee on Grounds and Buildings shall:

- a. Consider matters relating to the grounds and buildings of all campuses, stations, observatories, and other real property of the University used for campus-related purposes as defined in Standing Order 100.4(ff).
- b. Approve plans for improvements, direct the taking of bids, and recommend to the Board the award and execution of construction and equipment contracts, except as otherwise provided in the Standing Orders.
- c. Consider capital improvement requests as defined in Standing Order 100.4(q) and make recommendations in connection therewith to the Board.
- d. Act in an advisory capacity to the President of the University with respect to appointments of such Officers of the University as may be appropriate for consideration by the Committee, as determined by the President.
- e. Require concurrence of the Committee on Health Services as a condition for: (i) approval of plans for improvements; and (ii) recommendations for consideration of capital improvement requests involving UC Health or any of its components.

**Additions shown by underscoring; deletions shown by strikethrough**

BYLAW 12.7

RESPONSIBILITIES OF STANDING COMMITTEES

COMMITTEE ON HEALTH SERVICES

- a. Scope / Jurisdiction: The Committee on Health Services shall be the Standing Committee with primary jurisdiction under Bylaw 10.1 over the following matters:
1. Strategic plans and budgets for the University's clinical enterprise (including the academic medical centers and health systems, non-hospital clinics, and student health and counseling centers)
  2. Patient care quality, cost and access throughout the clinical enterprise;
  3. System-wide UC Health initiatives;
  4. Business transactions primarily arising from or serving the programs and services of UC Health or any of its components, including, but not limited to, all acquisition of physician practices, hospitals, and other facilities, clinical and ancillary services, and participation or membership in joint ventures, partnerships, corporations, or any other entities; and
  5. Appointment and compensation of UC Health executives whose compensation is paid solely from sources other than State general fund support to the University (e.g. clinical revenues, charitable contributions, et al).

The Committee on Health Services may also advise the other Committees as to matters within their primary jurisdiction and/or the Board on all other matters that have a significant impact on UC Health or the University's clinical enterprise.

The Committee on Health Services shall consider proposals for plans for improvements and capital improvement requests involving UC Health or any of its components prior to or concurrent with consideration, recommendation, or approval by the Committee on Grounds and Buildings.

- b. Membership: The Committee shall include ~~six~~ seven<sup>2</sup> voting and eight non-voting members and no additional members.
1. Voting Members: The voting members shall be: seven Regents, including representatives of the Committees on Finance, Grounds and Buildings, and

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<sup>2</sup> The text reflects correction of a typographical error.



Compensation, and the President of the University and the President of the Board, both serving *ex officio*. The Regent members other than the President of the University and the President of the Board shall be nominated by the Committee on Governance and approved by the Board according to the Bylaws and any applicable Regents Policy.

2. Non-Voting Members: The eight non-voting members shall be:
  - i. The senior executive for health affairs in the Office of the President.
  - ii. Two Chancellors, recommended by the President of the University.
  - iii. One member in good standing of the Academic Senate who holds a clinical appointment at one of the University's schools of medicine, recommended by the President of the University.
  - iv. Four additional Advisory Members recommended by the President of the University. Each Advisory Member shall demonstrate expertise in health care delivery management, academic health services, health care mergers and acquisitions, or any other related area of expertise the President of the University and the Board consider relevant to the particular planning and strategy issues affecting UC Health at the time of their appointment. The Advisory Members shall be subject to the same limitations on compensation and policies regarding reimbursement of costs applicable to Regent members, provided that any University employee serving as an Advisory Member shall be entitled to compensation and reimbursement of costs associated with their service on the Committee consistent with applicable University policies regarding compensation and reimbursement of employees.
  
- Each non-voting member, other than the senior executive for health affairs, shall be nominated by the Committee on Governance and approved by the Board consistent with the Bylaws and any applicable Regents Policy governing the nomination and appointment of the Regents members of the Committee.
  
3. Quorum: Four voting members shall constitute a quorum of the Committee. Non-voting members shall not be considered for purposes of establishing a quorum to conduct business. Further, non-voting members may not be counted for purposes of establishing the majority required to approve an action in accordance with Bylaw 7.1.
  
4. Participation in Administrative Committees: Regent members of the Committee on Health Services may participate on standing administrative committees relevant to matters under the jurisdiction of the Committee.

c. Delegated Authority: The Committee on Health Services shall have the following authority:

1. Transactions: The Committee on Health Services is authorized, without further Regents action, to approve transactions, as defined in subsection a.4, otherwise requiring Regents approval that primarily arise from or serve the programs and services of UC Health or any of its components subject to thresholds specified in Regents Policy and reviewed regularly by the Board. Any transaction within the jurisdiction of the Committee, as defined in subsection a.4, and otherwise requiring Regents approval must be reviewed and approved by the Board of Regents, Committee on Health Services, or the Chair or Vice Chair of the Committee on Health Services. Notwithstanding this delegation, whenever a transaction, in the judgment of the President of the University or any sponsoring Chancellor, merits review and approval by the Regents, the transaction shall be approved by the full Board. Nothing in this Section 12.7 shall change any authority that the Committee on Finance may have over: (i) transactions where the predominant share of revenue committed or generated reflects the purchase, sale, or lease of real property; or (ii) the issuance of debt.
2. Compensation: When the appointment of or compensation for an employee serving UC Health or any of its components whose compensation is paid solely from sources other than State general fund support to the University otherwise requires approval from the Regents or a Committee of the Regents, the Health Services Committee shall have jurisdiction and exercise delegated authority to review and approve such appointment and/or compensation without further Regents action. While the Committee on Health Services may advise the Board, the Committee on Compensation shall retain primary jurisdiction over compensation for any employee whose compensation is paid in whole or in part from the State general fund.

Reports to the Board: All actions taken by the Committee pursuant to the authority delegated to the Committee shall be reported to the Board at its next following meeting.

d. Rule of Interpretation: The terms of this Bylaw 12.7 shall prevail over any conflicting provision of the Bylaws, Standing Orders and Regents Policies.

~~The Committee on Health Services shall:~~

- ~~a. Consider and recommend to the Board strategic plans for University clinical enterprise activities and for each academic medical center.~~
- ~~b. Consider and act upon, except as otherwise provided in the Standing Orders, all matters related to business transactions affecting the clinical services of University academic medical centers and schools of health sciences including, but not limited to, acquisition of physician practices, hospitals, and other facilities, clinical and ancillary services, and participation or membership in joint ventures, partnerships, corporations, or any other~~

~~entities, provided that transactions with a total purchase price or other financial commitment in excess of \$5 million per transaction or \$15 million cumulatively per health sciences institution per fiscal year, subject to an overall \$50 million per year limitation, shall be considered and acted upon by the Board. Total purchase price or other financial commitment shall be determined in accordance with generally accepted accounting principles taking into account all consideration including cash paid and the net present value of liabilities assumed or incurred. All action taken by the Committee shall be reported to the Board at its next meeting.~~

- ~~c. Consider and recommend to the Board the academic medical center capital and operating budgets for each fiscal year. Where matters are presented to other committees concerning any aspect of projects included in the capital budget, the item shall also be placed on the agenda of the Committee on Health Services to permit the Committee to review the recommendation in relation to the strategic plan for the affected academic medical center.~~
- ~~d. Consider matters relating to the University hospitals' and student health and counseling clinical programs', including self-insured student health programs, licensure, accreditation, planning, patient care, medical staff matters, quality assurance, and relationships with schools of health sciences.~~
- ~~e. Consider and recommend to the Board policies in connection with the operation and governance of University hospitals and student health and counseling clinical programs, including self-insured student health programs.~~
- ~~f. Review, at appropriate intervals to be determined by the Committee, reports of financial matters relating to each hospital including expenses and revenue by source, patient days and visits, and other pertinent financial data and information and financial planning.~~
- ~~g. Consider developments, including pending legislation, involving significant changes in health care delivery and financing.~~
- ~~h. Act in an advisory capacity to the President of the University with respect to appointments of Directors of University hospitals.~~
- ~~i. As to each University hospital, review at least annually reports submitted by the President of the University and the Chancellor to the Committee relating to licensure, including special services, accreditation, planning, patient care, medical staff matters including quality assurance, and any appropriate corrective action, and relationships with schools of health sciences. The annual report for each University hospital shall set forth separately for the Committee's review:
  - ~~1. a mission statement with attention to the three basic functions of teaching hospitals: patient care, education, and research in the health sciences;~~
  - ~~2. medical staff bylaws;~~~~

~~3. policies and procedures of the campus to implement hospital governing body responsibilities set forth in Title 22 of the California Administrative Code and the Accreditation Manual for Hospitals of the Joint Commission on Accreditation of Hospitals.~~

~~j. Report periodically to the Board concerning the functions and activities of the Committee.~~

**Additions shown by underscoring; deletions shown by strikethrough**

STANDING ORDER 100.4

OFFICERS OF THE UNIVERSITY

DUTIES OF THE PRESIDENT OF THE UNIVERSITY

**Standing Order 100.4: Duties of the President of the University**

100.4 Duties of the President of the University

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Notwithstanding any provision in the Bylaws or Standing Orders to the contrary, including, without limitation, paragraphs (dd)(3) (loans of Corporation funds), (dd)(5) (certain affiliation agreements), (dd)(6) (agreements for the collection of fees), (dd)(9) (assumption of liability), and (oo) (participations) of this Standing Order, the President is authorized to approve and execute on behalf of the Corporation all contracts and documents relating to transactions that primarily arise from or serve the programs and services of UC Health or any of its components, as defined in Bylaw 12.7, where the transaction can reasonably be anticipated to commit or generate up to the lesser of (i) 1.5% of the relevant Medical Center's annual operating revenue for the previous fiscal year, or (ii) \$25 million. This approval authority may be exercised only with the review and approval of the Chair or Vice Chair of the Committee on Health Services, and does not extend to any transaction for a Medical Center that, when combined with other transactions approved by the President under this paragraph (rr) for that Medical Center during the fiscal year, would reasonably be anticipated to commit or generate more than the lesser of (i) 3% of the relevant Medical Center's annual operating revenue for the previous fiscal year, or (ii) \$50 million; nor to any transaction involving more than one Medical Center.

**Additions shown by underscoring; deletions shown by strikethrough**

## REGENTS POLICY

COMMITTEE ON HEALTH SERVICES

- A. Thresholds for Delegation of Authority to Approve Transactions Pursuant to Bylaw 12.7:
1. The Committee on Health Services is authorized, without further Regents action, to approve transactions, as defined in Bylaw 12.7, otherwise requiring Regents approval that primarily arise from or serve the programs and services of UC Health or any of its components when:
    - i. the transaction can reasonably be anticipated to commit or generate up to 3% of the annual operating revenue for the relevant Medical Center(s) as reflected in the audited financial statement(s) for the most recent full fiscal year; and
    - ii. combined with the value of transactions previously approved by the Committee in the relevant fiscal year, the transaction can reasonably be anticipated to commit or generate up to 5% of the annual operating revenue for the relevant Medical Center(s) as reflected in the audited financial statement(s) for the most recent full fiscal year.
  2. The value of a transaction shall be determined on the basis of the cumulative value of UC's direct financial commitment, including both UC cash contributions and debt assumed, or the combined value of any assets or debt sold or otherwise disposed.
- B. Compensation Benchmarks: The Committee on Health Services shall develop a benchmarking framework for use in evaluating compensation proposals that may be approved under Bylaw 12.7. The benchmarking framework shall identify peer institutions against which UC Health competes for high level positions and identify external salary data for positions comparable to those that may be approved by the Committee under Bylaw 12.7. The benchmarking framework shall be reviewed and approved by the Committee on Health Services and the Committee on Compensation at least every two (2) years.
- C. Chancellor Committee Members: To the extent that an item on the agenda for a meeting of the Committee on Health Services primarily or substantially benefits the campus led by a Chancellor member of the Committee on Health Services, the member may present the item as an advocate for the campus but shall not otherwise participate in deliberation by the Committee. This limitation shall not be effective where an item is reasonably anticipated to provide direct benefit to all campuses with medical centers.

D. Conflict of Interest: Advisory Members shall not participate in deliberations of the Committee on any matter in which the member or an immediate family member has a financial interest.

E. UC Health Oversight:

1. Strategic Plan and Budget: The Committee shall report annually to the Board on the UC Health strategic plan and budget at the July meeting.
2. Quality, Cost and Access: The Committee shall oversee development of dashboards assessing quality of care, cost of service, and access to care across the UC Health clinical enterprise, and shall use the dashboards to monitor performance against established benchmarks.
3. Student Health Centers: The Committee shall report annually to the Board on the status of the University's student health and counseling centers and the UC Student Health Insurance Plan at the September meeting.
4. Transaction Review: The Committee shall annually review and assess the transactions approved in the previous three years and report in writing on its assessment to the Board for the March meeting.
5. Health Plan Contracts: The senior executive for health affairs in the Office of the President shall regularly brief the Committee on system-wide managed care and other health plan participation arrangements negotiated on behalf of the UC Health clinical enterprise.

F. Implementation: The amendments to Bylaw 12.7 approved at the November 2015 meeting shall be implemented as soon as practicable thereafter, subject to the following transition provisions:

1. The Chair and Vice-Chair of the Committee as approved by the Board in May, 2015, shall continue in such capacity. The initial term of the Chair shall be three years, extending through June 2019 to coincide with the regular committee appointment cycle.
2. Nothing shall prevent the Committee on Health Services from approving compensation for a proposed hire before completion of the initial benchmarking framework described in Section B above.
3. The provisions of this Section F shall expire on July 1, 2019 and the Secretary and Chief of Staff shall take all actions necessary to remove Section F from Regents Policy \_\_\_\_.