

FY 2025 Budget Performance Review
775-OSU Medical Authority & Trust

Version Revision 01
 Lead Administrator: Eric Polak

Date submitted revised 12.8.2023
 Lead Financial Officer: Eric Polak

Agency Mission

The mission and purposes of the Oklahoma State University Medical Authority are to serve as teaching and training facilities for students enrolled at the Oklahoma State University Center for Health Sciences, to acquire and provide a site for conducting medical and biomedical research by faculty members of the Oklahoma State University Center for Health Sciences and to provide care for the patients of Oklahoma State

Division and Program Descriptions

Division or Program Number and Name
Provision of State Match
Deans GME pass-through
Residency Program Support
Strategic Plan Implementation
Mental Health Hospital Construction
Grants & Contracts
Agency Administration

FY'24 Budgeted Department Funding By Source

Dept. #	Department Name	Appropriations	Federal	Revolving	Local ¹	Other ²	Total
1100001	Provision of State Match	\$6,061,229					\$6,061,229
1100001	Deans GME pass-through	\$28,927,141					\$28,927,141
1100001	Residency Program Support	\$11,898,771					\$11,898,771
1100001	Strategic Plan Implementation	\$15,171,048					\$15,171,048
1100001	Mental Health Hospital Construction			\$2,000,000		\$56,000,000	\$58,000,000
1100001	Grants & Contracts					\$50,000,000	\$50,000,000
1100001	Agency Administration	\$290,000					\$290,000
1100001	Legislative Directive/Pass-throughs	\$16,000,000					\$16,000,000
Total		\$78,348,189	\$0	\$2,000,000	\$0	\$106,000,000	\$186,348,189

1. Please describe source of Local funding not included in other categories:
 2. Please describe source(s) and % of total of "Other" funding if applicable for each department: State ARPA awards

FY'23 Carryover by Funding Source

Class Fund #	Carryover Class Fund Name	Appropriations	Federal	Revolving	Local ¹	Other ²	Total
193	General Revenue Fund	\$284,388					\$284,388
290	OSUMA Disbursing Fund			\$10,597,030			\$10,597,030
							\$0

1. Please describe source of Local funding not included in other categories:
 2. Please describe source(s) and % of total of "Other" funding if applicable:

What changes did the agency make between FY'23 and FY'24?

- 1.) Are there any services no longer provided because of budget cuts?
 No
- 2.) What services are provided at a higher cost to the user?
 n/a
- 3.) What services are still provided but with a slower response rate?
 n/a
- 4.) Did the agency provide any pay raises that were not legislatively/statutorily required?
 n/a

FY'25 Requested Funding By Department and Source

Dept. #	Department Name	Appropriations	Federal	Revolving	Other ¹	Total	% Change
1100001	Provision of State Match	\$6,061,229	\$0	\$0	\$0	\$6,061,229	0.00%
1100001	Deans GME pass-through	\$28,927,141	\$0	\$0	\$0	\$28,927,141	0.00%
1100001	Residency Program Support	\$11,898,771	\$0	\$0	\$0	\$11,898,771	0.00%
1100001	Strategic Plan Implementation	\$15,171,048	\$0	\$0	\$0	\$15,171,048	0.00%
1100001	Mental Health Hospital Construction	\$0	\$0	\$15,000,000	\$0	\$15,000,000	-74.14%
1100001	Grants & Contracts	\$0	\$0	\$0	\$110,000,000	\$110,000,000	120.00%
1100001	Agency Administration	\$290,000	\$0	\$0	\$0	\$290,000	0.00%
1100001	Legislative Directive/Pass-throughs	\$16,000,000	\$0	\$0	\$0	\$16,000,000	0.00%
1100001	OSUMC Expansion Funding	\$30,000,000					
1100001	Residency Expansion Funding	\$2,000,000					
Total		\$110,348,189	\$0	\$15,000,000	\$110,000,000	\$203,348,189	9.12%

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1. Please describe source(s) and % of total of "Other" funding for each department:

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FY'25 Top Five Operational Appropriation Funding Requests

Request by Priority	Request Description	Appropriation Request Amount (\$)
Request 1:	Capital Funding for OSUMC Expansion Project	\$30,000,000
Request 2:	Residency Program Expansion	\$2,000,000
Request 3:		
Request 4:		
Request 5:		
Top Five Request Subtotal:		\$32,000,000
Total Increase above FY-24 Budget (including all requests)		\$ 32,000,000
Difference between Top Five requests and total requests:		\$0

Does the agency have any costs associated with the Pathfinder retirement system and federal employees?

no

How would the agency be affected by receiving the same appropriation for FY '25 as was received in FY '24? (Flat/ 0% change)

Will have to scale back and shell planned space in the hospital expansion

How would the agency handle a 2% appropriation reduction in FY '25?

cut residency program funding and reduce joint hires with the VA

Is the agency seeking any fee increases for FY '25?

	Fee Increase Request (\$)	Statutory change required? (Yes/No)
Increase 1		
Increase 2		
Increase 3		

What are the agency's top 2-3 capital or technology (one-time) requests, if applicable?

Description of request in order of priority	Appropriated Amount (\$)	Submitted to LRCPC? (Yes/No)
Priority 1		no
Priority 2		
Priority 3		

Federal Funds

CFDA	Federal Program Name	Agency Dept. #	FY 24 budgeted	FY 23	FY 22	FY 21	FY 20

Federal Government Impact

1.) How much federal money received by the agency is tied to a mandate by the Federal Government?	n/a
2.) Are any of those funds inadequate to pay for the federal mandate?	n/a
3.) What would the consequences be of ending all of the federal funded programs for your agency?	n/a
4.) How will your agency be affected by federal budget cuts in the coming fiscal year?	n/a
5.) Has the agency requested any additional federal earmarks or increases?	n/a

FY 2024 Budgeted FTE

Division #	Division Name	Supervisors	Non-Supervisors	\$0 - \$35 K	\$35 K - \$70 K	\$70 K - \$100K	\$100K+
n/a							
Total		0	0	0	0	0	0

FTE History by Fiscal Year

Division #	Division Name	FY 2024 Budgeted	FY 2024 YTD	FY 2023	FY 2022	FY 2021	FY 2016
n/a							
Total		0.0	0.0	0.0	0.0	0.0	0.0

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Performance Measure Review					
Program Name	FY 2023	FY 2022	FY 2021	FY 2020	FY 2019
Provision of State Match	Achieved	Achieved	Achieved	Achieved	Achieved
Deans GME pass-through - ACGME Accreditation	100%	100%	100%	100%	94%
Residency Program Support - Medicare VBP Total Performance Score	n/a	26.909	26.125	25.170	22.170

Revolving Funds (200 Series Funds)			
Please provide fund number, fund name, description, and revenue source	FY'21-23 Avg. Revenues	FY'21-23 Avg. Expenditures	June '23 Balance
Fund number: Fund name			
Describe fund purpose and revenue source			

FY 2024 Current Employee Telework Summary						
List each agency location, then report the number of employees associated with that location in the teleworking categories indicated. Use "No specified location" to account for remote employees not associated with a site. Use actual current employees (headcount), not budgeted or actual FTE.			Full-time and Part-time Employees (#)			
Agency Location / Address	City	County	Onsite (5 days onsite, rarely remote)	Hybrid (2-4 days onsite weekly)	Remote (1 day or less weekly onsite)	Total Employees
n/a						0
Total Agency Employees						0