# BOARD OF REGENTS BRIEFING PAPER

1. Agenda Item Title: Differential Fee Proposal for Executive Masters in

Health Administration, UNLV

**Meeting Date:** March 3-4, 2016

#### 2. BACKGROUND & POLICY CONTEXT OF ISSUE:

The Executive Master of Health Administration (EMHA) is a new program that is anticipated to become fully self-sustaining in three years by including the proposed differential fees with other UNLV mandatory fees. Executive degree programs targeting health care professionals have grown significantly across the country to better accommodate professionals with less flexibility in their schedules. Although the program is higher in cost compared to the traditional program at UNLV, it is significantly lower than the national average for comparable programs. Participants must have a minimum of three years of experience in administrative or managerial health care positions (hospital departmental managers, large physician group practice managers), five years of professional experience such as clinicians or technologists, or be health care professionals with terminal degrees in health care (e.g., MD, DDS, and DNP). For a detailed description of the proposal, including student feedback, enrollment projections, projected revenue and expenditures, and other Board required responses, see attached EMHA Differential Fee Proposal. This is being brought to the Board in March outside of the normal fee cycle because the program has not been approved by the Academic, Research and Student Affairs Committee. The requested differential program fee is dependent upon approval from the Academic, Research and Student Affairs Committee at its March 3, 2016 meeting.

#### 3. SPECIFIC ACTIONS BEING RECOMMENDED OR REQUESTED:

UNLV President Len Jessup requests approval of the proposed differential fee for the Executive Masters in Health Administration, a new program beginning enrollment in summer 2016.

#### 4. IMPETUS (WHY NOW?):

The online EMHA is designed to meet a growing need for healthcare professionals that are looking to broaden their knowledge base as they seek upper-level leadership positions in healthcare organizations. Use of a differential fee will allow this program to become self-sustaining. It is designed for experienced healthcare administrators and professional individuals whose schedules do not give them the flexibility of completing degree requirements in a traditional academic setting. The health care market place is expanding significantly, and many health care organizations provide tuition reimbursement for their employees. This demand creates motivation for health care professionals to seek out quality programs and therefore, creates a demand for online programs. Online executive programs are expanding across the country targeting this market. Currently, there is strong evidence that health care professionals are enrolling in more expensive online private institutions because there is not a public institution in Nevada offering comparable programs that fit their schedule.

#### 5. BULLET POINTS TO SUPPORT REQUEST/RECOMMENDATION:

- The current Masters in Health Administration (MHA) has been successful, granting more than 115 degrees since 2009 and the EMHA program, including the differential fee, augments the current MHA degree by targeting health care professionals with experience in the field.
- The EMHA is a higher cost online program designed specifically for working experienced healthcare administrators and professionals whose schedules don't necessarily fit within the traditional classroom setting.
- There is strong evidence from healthcare executives that their employees are opting for higher cost private institutions to obtain a Masters degree.
- Many inquiries have been received regarding the availability of this type of program, and the higher cost of
  this program has not been viewed as a deterrent.

Revised: June 2010

#### 6. POTENTIAL ARGUMENTS AGAINST THE REQUEST/RECOMMENDATION:

• The online program is more costly than the in-class version and requires a differential fee to be successful.

# 7. ALTERNATIVE(S) TO WHAT IS BEING REQUESTED/RECOMMENDED:

• One possible alternative to differential tuition fees is higher program fees to offset costs.

#### 8. COMPLIANCE WITH BOARD POLICY:

	Consistent With Current Board Policy: Title # Chapter # Section #
	Amends Current Board Policy: Title # Section #
X	Amends Current Procedures & Guidelines Manual: Chapter # 7 Sections # 9 and #10
	Other:
X	Fiscal Impact: Yes No <u>X</u>
	Explain:

Revised: June 2010

# **Executive Masters Healthcare Administration (EMHA)**

Differential Fee Proposal for March 2016 Board of Regents agenda

#### I. Justification for Differential Tuition:

The Executive Master of Healthcare Administration (EMHA) program is a new program that is anticipated to become fully self-sustaining in three years by including the proposed differential fees with other UNLV mandatory fees. We are proposing a program that will cost \$26,925 for in-state students and \$31,677 for the out-of-state residents. The tuition and fees will cover a five semester program (2 summer semesters, 2 fall semesters, and 1 spring semester). The EMHA students will be required to complete 36 credits which is used in the tables below to calculate the Per Student fees. The proposed fee breakdown is as follows:

#### (1) UNLV Current Mandatory Fees plus the Proposed Differential Fee

Type Fee	Per Credit Fee	Per Semester Fee	Amount	Total for Program
Per Credit Registration Fee	\$264.00		36 Credits	\$9,504
Differential Fee	\$400.00		36 Credits	\$14,400
UNLV mandatory fees	\$46.00		36 Credits	\$1,656
	Total Differential Fees for EMHA Program			\$25,560

#### (2) UNLV mandatory per semester fees

Type Fee	Per Credit Fee	Per Semester Fee	Amount	Total for Program
UNLV mandatory per semester fees	0	\$266	5 semester	\$1,330
	Total Program Fees for EMHA Program			\$1,330

UNLV also charges a one-time \$35 new student fee which is included in the program total of \$26,925 for resident students.

The School of Community Health Sciences currently offers a 45 credit hour "residential" MHA program in the Department of Health Care Administration and policy. The executive online version of this degree (EMHA) will target working professionals from around the state and nation who meet the proposed admission standards, primarily based on work experience, and who will be attracted to an affordable degree that better meets their work environment. By providing an online experience with two on-campus cohort meetings, we anticipate that candidates will choose to complete their online degree at a well-known and well respected institution such as UNLV than at a higher cost private institution

The current MHA program is a blend of full-time and part-time students with a variety of academic and professional experience who are seeking a position into entry- to mid-level profession in health care administration. Students take courses designed to give them a comprehensive view of the healthcare organizations including the internship where they can gain first-hand managerial experience.

The EMHA online program is designed for people with a minimum of 3 years of experience in administrative or managerial health care positions (e.g, risk management department director, burn unit director), 5 years of professional experience, or health care professionals with terminal degrees in health care (e.g., MD, DDS, and DNP). EMHA students have a deep understanding

Page **1** of **11** 

# **Executive Masters Healthcare Administration (EMHA)**

Differential Fee Proposal for March 2016 Board of Regents agenda

of health care functions, but are looking to broaden their knowledge base as a way of advancing their careers into positions with cross-functional responsibilities. The EMHA is more strategic than operational, candidates to candidates become leaders in their organizations by making them more knowledgeable about the various types of health administration information that may come across their desk.

The different goals of the MHA and EMHA programs will attract different kinds of students. MHA students tend to be younger, typically between 22 and 35 years of age. They are generally new college graduates or young working professionals. We anticipate the age range for the EMHA students to be 30 to 45 years. The EMHA students must hold supervisory positions, have some responsibility over health care operations, and must have at least five years of professional experience and/or three years of direct managerial experience.

The educational experience for the two groups will be different. MHA students can be either full-time or part-time, typically take 1-4 courses per semester on campus or online during traditional UNLV Academic Year (Fall/Spring). They also have the option of taking online courses during the summer. Summer courses are particularly advantageous to part-time students because it allows them to complete the degree sooner. The program also requires an internship that allows them to gain exposure in a health care organization. The internship is important for those students without health care managerial experience in order to help them land an administrative or managerial position in the health care industry. They often complete their degree with 45-48 credits in two to four years as their schedule permits. There are typically about 25 students in a class.

The EMHA will admit student cohorts who will take all of their courses as a group. We initially propose a cohort of 10 students in the first year, but expect to build that cohort to 20 students by the third year of the program. They take all of their courses online and convene on campus for up to four days, depending on the semester. We plan to hold these meetings during semester breaks (summer and winter) when regular UNLV classes are not being held. The on-campus meetings will be intensive in-class lectures in preparation for upcoming classes as well as group activities and presentations. The EMHA will require students to complete the required 36 credits in five terms (2 summer terms, 2 fall terms, and 1 spring term). Because of their work experience, an internship is not required. Technical courses, such as biostatistics and research methods which are currently required for the MHA will be omitted from the EMHA.

Recognizing that students in the EMHA program are busy professionals, the fees will help pay for special services for students to handle all of the logistics for students participating in the program. The fees will cover breakfast and lunch during their on campus meetings, parking passes, and graduation requirements. These special services will be handled by the EMHA staff so the students need only focus on their education. Although costs of textbooks are not covered in the differential fees, the program will make sure order all text materials for the students and make sure that all materials are available prior to the start of the class. Those EMHA students attending the intensive sessions from out of town will also be required to handle their own travel plans, although the EMHA staff will be prepared to provide them with assistance. Also, the EMHA program depends a great deal on group projects and class discussions. These activities will require state-of-the art classroom technology and software. The expenses of these activities will be covered through the proposed program fee.

Another difference between the current MHA and the EMHA will be the way the capstone

Page **2** of **11** 

# **Executive Masters Healthcare Administration (EMHA)**

Differential Fee Proposal for March 2016 Board of Regents agenda

course is organized. Although both degrees require the completion of a capstone experience, MHA students are required to participate in regular classroom meetings for additional lectures and case studies. Students are divided into teams and those teams are assigned a major strategic management case study and present their findings at the end of the semester in an inclass setting. The EMHA students are expected to critically examine an issue within their respective organization and present possible solutions. They will present their projects real time during a live teleconference. To assure that teleconference meetings stream seamlessly and in high quality resolution, some of the fees will be used to purchase and maintain teleconference equipment that will upgrade current SCHS facilities.

#### **Student Involvement:**

To help us determine demand and expectations for the EMHA, current regular MHA students were involved in this EMHA planning process. The department held two focus groups of current MHA students. The first group met September 21, 2015. Health Care Administration Department Chair, Chris Cochran, met with 6 MHA students in their capstone course. These are students finishing their degree and scheduled to graduate in December, 2015. A second group of 18 students met September 22, 2015, conducted by the Associate Dean, Jay Shen, during their classroom meeting for HCA 719, Health Care Operations and Quality Management. These are students in their second year and scheduled to graduate in Spring of 2016. Both groups discussed the proposal for the proposed executive MHA program and their comments are valuable.

Students were asked about the fees being proposed for the EMHA and all felt that the fees were reasonable. Some students indicated that had such a program been available for them and if they had met the criteria proposed based on work experience, that they would have selected the EMHA. Some commented, and it was reinforced during the focus group, that the differential fees being requested were very fair since many health care administration professionals pursue graduate degrees at private higher education institutions that cost much more than the program proposed by the UNLV HCAP EMHA. Some students commented that when they looked into MHA programs with a preference to online, that the cost of the current local online programs was prohibitive. Two students also indicated that this program will also be valuable to local health care professionals who have limited local choices, but who currently choose higher cost institutions due to their work requirements and the potential for tuition reimbursement by their employer.

When asked whether the fees were within reason even though the number of credits was less than their degree, all felt that the fees were very reasonable. All of the students indicated that the program was making the right decision in pursuing this new degree.

When asked which courses the program should consider eliminating to accommodate the reduced hours, most suggested that EAB 703 Biostatistics, HCA 702/EAB 705 Epidemiology, and/or HCA 715 Research Methods should be dropped and agreed that the internship, HCA 793, would not be necessary for this group. The students also liked the format for proposed campus visits.

#### Other Activities of the Fee Review Process

The UNLV HCAP program has been poised for developing the Executive MHA since the

Page **3** of **11** 

# **Executive Masters Healthcare Administration (EMHA)**

Differential Fee Proposal for March 2016 Board of Regents agenda

announcement was made by UNLV President Len Jessup discussing new programs to meet high demand areas. In its April 2015 Advisory Board meeting, faculty and board members, who include most of the region's hospital CEOs and other senior health care leaders, were asked what was needed to attract their employees into graduate education. Several board members stated the convenience of online instruction offered by non-traditional programs was an attraction for many of their employees instead of the more traditional classroom setting. Because of inflexible work schedules, these employees were inclined to select these higher cost non-traditional programs. The ability to complete a master degree quickly was considered more of a priority to the employee than cost. Since many area health care providers allow tuition assistance, employees might be more likely to enroll in higher cost programs such as Roseman University or University of Phoenix because they offer accelerated degrees. The online environment offered in those types of programs is also an advantage.

The department chair also discussed the concept of the EMHA in separate discussions with four hospital senior management officials who stated that having a higher cost executive MHA program in Las Vegas can be attractive to local health care professionals who want an accelerated program with on-line classes due to their busy schedules. In addition, they said that having such a program at a well-known university such as UNLV would be preferable to most employees than the other options available to them in Las Vegas.

The program was also discussed with staff of the Las Vegas Visitors and Convention Bureau who cited ease of access to Las Vegas from other parts of the country could be an advantage over other programs available across the country.

Faculty in the HCAP department investigated other executive MHA programs across the country such as the University of Alabama Birmingham, Virginia Commonwealth University, University of Southern California, California State Long Beach, and George Washington University. All are higher cost than the proposal submitted by the HCAP program. Most of them offer lower tuition fees for out-of-state students than the on campus programs. The HCAP program used this information in proposing a tuition schedule that is higher for out-of-state students than in-state students, but lower than traditional non-resident tuition. We estimate that these competitive fees, coupled with the convenience of access to Las Vegas for on campus meetings, which most of these programs also require, will make UNLV very competitive in attracting health care professionals not only in Nevada but also from across the country.

#### II. Special Course Fees:

There are no special course fees associated with the existing Masters of Health Administration program, and none are being proposed for the EMHA program.

The EMHA program will be supported by a combination of state expenditure allocation and differential fee revenue.

# **Executive Masters Healthcare Administration (EMHA)**

Differential Fee Proposal for March 2016 Board of Regents agenda

#### III. High Demand Programs:

#### **Program Enrollments**

The EMHA proposes to admit students once a year with classes beginning in the summer with an on campus meeting held between the Spring and Summer 2 schedules. Since the program is 18 months long, during the summer and fall semesters 2 cohorts will be in session by year 2 and during the spring semester only 1 cohort will be in session. The chart below shows the projected enrollment numbers per semester for the first five years. Ten students are expected to be enrolled in the first class, 2016, 15 students are expected to be enrolled each year for the next three years, and 20 students are expected to be enrolled in the fifth year, 2020.

		2016-17	2017-18	2018-19	2019-20	2020-21
<b>Annual Admission</b>		10	15	15	15	20
Headcount						
	Summer	10	25	30	30	35
	Fall	10	25	30	30	35
	Spring	10	15	15	15	15
Semester Credit Hou	ırs (SCH)					
	Summer	60	150	180	180	210
	Fall	90	225	270	270	315
	Spring	60	90	90	90	90
Total Annual SCH		210	465	540	540	615

#### **Program Demand**

UNLV's Department of Health Care Administration has provided a traditional MHA program since 2009 and to date has awarded 115 degrees. The EMHA proposal augments the current MHA degree by targeting health care professionals with experience in the field, while the residential MHA will continue to focus on those students who do not meet the experience requirements or who prefer the traditional education setting. The Health Care Administration and Policy Department expects the current MHA degree to be an accredited degree by 2018 which will likely increase applicants to that degree. The EMHA is designed specifically for those professionals whose schedules don't necessarily fit within the in-class structure because of their work responsibilities. Because of the work experience EMHA participants will bring to the program, the number of credits required for this degree will be reduced in comparison to the traditional MHA degree. Accelerated or reduced credit programs are the norm for most executive degree programs.

By providing an online instructional environment, the program is expected to be popular with working professionals both within and outside of Las Vegas. The curriculum will also include intensive in-person sessions (summer and winter), up to four days each, prior to the start of each semester. The on-campus meetings will provide students with the opportunity to meet and interact with members of their cohort (and faculty) and develop professional relationships with

# **Executive Masters Healthcare Administration (EMHA)**

Differential Fee Proposal for March 2016 Board of Regents agenda

their peers that will serve them for the rest of their careers. It is anticipated that this program will draw local, national and international professionals who see the potential of a quality education at the University of Nevada Las Vegas that fits their busy schedule while also interacting with their cohort amid the excitement of Las Vegas as a backdrop. The program fits local market strategies that focus on using Las Vegas as a draw for medical tourism by setting in place executive education in the health care field. The cost of the program, discussed later in this proposal, is designed to entice professionals from around the country, creating a competitive enrollment process that can attract high performing students.

The opportunities for recruitment and potential market for this program is extensive and include students with degrees in health care administration work in hospitals, large group physician practices, long term care organizations, and managed care and insurance, to name only a few. In 2015, jobs in the Nevada health care market increased by 24.5% over the previous 10 years, encompassing the period that included the state's economic recession, according to Economic Modeling Specialists, Inc., Las Vegas. Although this market includes clinical positions, many of these individuals may be interested in moving into administrative and executive health care management.

According to the Bureau of Labor Statistics (BLS), the number of health care managers in the U.S. is expected to grow by 23% by 2022. This is considered by the Bureau to be "much faster than average". Median income reported by the BLS for this group is \$88,850 per year (based on a report of 315,000 in the labor force). Forbes Magazine lists the MHA as "the eighth best Master's degree". Senior level executives in the health care industry have significantly higher earnings. Average total cash compensation, including bonuses and incentives, for all hospital executive titles (54 job positions) in 2014 was \$319,400, a 2.3% increase from \$312,300 for those same titles in 2013. Among the 25 titles, CEOs earned the most, with an average total cash compensation of \$719,536. For physician executives, the median income in 2014 was \$325,000. Opportunities for higher earnings provide incentives for individuals seeking a degree in the EMHA. Health care executives with a master's degree report a 25% higher income than those with only a bachelor's degree. It is also quite evident that the recruitment of high quality students to the EMHA will also build an important pipeline that is capable of significant philanthropic giving.

In the U.S., there were more than 6,341 hospitals in 2013 (AHA). Despite the recession experienced throughout the country beginning in 2008, the reported number of FTEs beds in U.S. hospitals grew from 9.84 in 2008 to 10.5 in 2010.

(http://www.managedcaredigest.com/DigitalDigests/2012\_2013HospSysDigest/files/assets/basi c-html/page13.html). In Nevada alone, there are 43 acute and post-acute care facilities. In the urban settings of Southern Nevada and Washoe/Carson region, hospitals range from 200-750 beds. Moreover, many of the local hospitals are affiliated with large health care systems that can be useful as a market component. Universal Health Care, the parent company of the Valley Health System in Las Vegas, plans to open a new acute care medical center in 2016. Universal Health Systems, the parent company of the Valley Health Systems, operates more than 225 acute care and behavioral health hospitals across the U.S. and internationally. Dignity Health recently completed construction of a new patient tower at their St. Rose Sienna campus adding 96 beds and expects to hire 600 new employees. Dignity Health system operates three hospitals in the Las Vegas market and has 39 acute care hospitals and 250 ancillary care facilities in Nevada, California and Arizona. The Hospital Corporation of America, which owns Sunrise, Mountain View and Southern Hills medical centers encompasses 165 hospitals and 115 surgery centers located in 20 states and London. The HCAP program and the School of

# **Executive Masters Healthcare Administration (EMHA)**

Differential Fee Proposal for March 2016 Board of Regents agenda

Community Health Sciences has a long working relationship with all of the hospitals in the Las Vegas market. The HCAP Advisory Board includes CEOs and senior executives from all of the hospital systems mentioned above as well as University Medical Center of Southern Nevada.

Besides hospitals, HCAP has relationships with other major health care employers in Southern Nevada including Healthcare Partners, Southwest Medical Associates and their parent company United Health Care, the VA health care network and Fundamentals Health. The program has worked with numerous other health care providers around Las Vegas and Nevada as well.

The program can also provide a vital opportunity for mid- and upper-level managers in rural health care settings where programs for educational advancement in this field are in short supply or non-existent. The remoteness of rural hospitals and other health care facilities in the western U.S. makes access to larger metropolitan institutions, where traditional academic resources are available, much more difficult.

While degrees earned by executives in health care can be varied, the MHA degree is one of the most recognized degrees for health care executives and senior level administrators. It doesn't just provide the instruction necessary for business, but it relates it to the industry by applying a business acumen specifically related to health care. The curriculum provided by the EMHA includes areas of interest for health care administrators and professionals such as health care policy and regulation, financial management and accounting, health information systems, quality improvement and patient safety, performance improvement and operations, strategy and program development, human resources and organizational management, and leadership in changing health care environments. The program can also serve as a spring board for combining future certificate programs in areas such as health information technology, patient experience, predictive analytics, and performance improvement. Admission into the program requires a signed "Corporate Sponsorship Agreement" from the student's employer acknowledging the EMHA's schedule and the company's commitment to allow the student to participate. Very often while still in the program, students are offered promotions and new opportunities within their organizations. After graduation, 30%-40% of students make a transition either within their organization or to a new company at higher leadership levels.

#### Number of applicants that can be admitted in any semester:

The maximum number of students accepted per cohort will be 20. The program proposes an initial enrollment of 10 students, but the program proposes phasing in larger enrollment cohorts as the program expands. Students will be accepted annually in the summer.

# **Executive Masters Healthcare Administration (EMHA)**

Differential Fee Proposal for March 2016 Board of Regents agenda

#### IV. High Cost Programs:

The information in the table below compares the average cost per Annual Average Full Time Equivalent (AAFTE) student for the differential fee program to the average cost per AAFTE student for the entire institution. The information presented for the EMHA program represents cost per student for the entire 18-month program.

	Cost per AAFTE	Program Cost rank at UNLV
Institutional Average	\$11,418	
ЕМНА	\$26,925	3

#### v. Projected Revenues and Expenditures:

The \$400 per credit EMHA differential fee is expected to produce about \$246,000 per year in revenue at maturity in FY21, this assumes an incoming cohort of 20 and 615 total credits per year. It should be noted that the new EMHA program will be supported by a combination of differential fees and state funding.

5-Year Projection of Differential Fee Revenue vs EHMA Primary Program Expenditures (based on Annual SCH, page 5)

	FY17	FY18	FY19	FY20	FY21
No. Students					
- Enrollment	10	15	15	15	20
- Total	10	25	30	30	35
- Graduation			10	15	20
Differential Fee \$400/ credit	\$84,000	\$186,000	\$216,000	\$216,000	\$246,000
Expenditure					
- Financial Aid (15% of Differential Fee)	\$10,800	\$27,000	\$32,400	\$32,400	\$36,900
- Program director	\$87,100	\$88,842	\$90,619	\$92,431	\$94,280
- Marketing	\$10,000	\$10,000	\$10,000	\$15,000	\$15,000
- Faculty extra-teaching pay	\$30,000	\$30,000	\$30,000	\$30,000	\$50,000
- 1 Tenure track faculty		\$100,500	\$100,500	\$100,500	\$100,500
Total expenditure	\$137,900	\$256,342	\$263,519	\$270,331	\$296,680

The differential fee will be mainly used to cover the personnel expenses and marketing expenses. The personnel expenses include salaries and fringe benefits of a newly created Program Director and a new tenure track faculty position, as well as the existing faculty's extrateaching loads associated with the EMHA program.

Other planned use of the Executive MHA Differential Fee would cover general support for

Page **8** of **11** 

# **Executive Masters Healthcare Administration (EMHA)**

Differential Fee Proposal for March 2016 Board of Regents agenda

operating the program, including the following:

- Professional staff and fringe benefits for the management and coordination of the EMHA program
- Personnel Training/Conferences
- Career services including executive coaching
- EMHA Cohort Photography
- Program advertising and recruitment expenses
- EMHA alumni events
- EMHA alumni and student directory
- Computer tablet and software
- Student tutors
- All student course materials including cases, course packs, simulations, and logoed items
- Updating computer software

#### Distribution of Differential Fees - Effective Summer 2016

Executive Masters of Health Administration Distribution of Differential Fee - Effective Summer 2016					
Percent of Generated Category Total Fees*					
Graduate Financial Aid  Non-Consumable Course Fee Offset	15% 0%	36,900			
Program Related Expenditures	85%	209,100			
Total projected differential fee revenue 100% 246,000					
* assume program at maturity in FY21: 615 credits					

# **Executive Masters Healthcare Administration (EMHA)**

Differential Fee Proposal for March 2016 Board of Regents agenda

#### VI. Proposed Fee:

- a. The differential fees will go into effect for the first class, Cohort 16, beginning Summer 2016.
- b. Differential fees apply to courses as designated below:

Discipline	Course Prefix	Course Level	Amount (per credit hour)
Executive MHA	ЕМНА	700 and above	\$400.00

Appendix: Course List of the MHA Program

Assume EMHA courses will use updated prefix EMHA (36 Credits)

Courses for the 36 credit core	Number	Credits
US Health Care System: Programs, Policies and Politics	HCA 701	3
Epidemiology in Health Services Management	HCA 702	3
Management of Health Care Organizations and Systems	HCA 703	3
Health Care Finance and Accounting	HCA 716	3
Human Resources Management of Health Care Organizations	HCA 717	3
Health Care Economics	HCA 718	3
Operations and Quality Management of Health Services	HCA 719	3
Information Systems in Health Services Management	HCA 720	3
Advanced Health Care Finance	HCA 721	3
Strategic Management of Health Services	HCA 730	3
Health Care Law and Ethics for Managers	HCA 761	3
HCA Capstone	HCA 779	3
Total		36

# **Executive Masters Healthcare Administration (EMHA)**

Differential Fee Proposal for March 2016 Board of Regents agenda

# Section 9. <u>Differential Program Fees</u>

Program	Course Prefix	Course Level	<u>Amount</u>	Effective Date
University of Nevada	Las Vegas			
Architecture	AAD, AAE, ABS, AAL, LAND, AAI, AAP	300-400	\$156.75/credit	Spring 2012
Architecture	AAE, AAD	500-700	\$239.50/credit	Spring 2012
Business	MBA, FIN, MKT, MGT	500-700	\$100.00/credit	Spring 2012
Executive MBA	EMBA	700	\$236/credit	Fall 2015
Executive MHA	ЕМНА	700	\$400/credit	Summer 2016
Marriage & Family Therapy	MFT	700 and above	\$177.50/credit	Fall 2015
Nursing	NURS	300-400	\$156.75/credit	Spring 2012
Nursing	NURS	500-700	\$239.50/credit	Spring 2012
Physical Therapy	DPT	500-700	\$239.50/credit	Spring 2012
Social Work	SW	700	\$125.00/credit	Fall 2012
Urban Leadership	ULD	700	\$150.00/credit	Fall 2012
Engineering	CEE, CEM, CPE, CS, EE, EGG, ME	300-400	\$40.00/credit	Fall 2014
Engineering	CEE, CEM, CS, ECG, ME	600-700	\$20.00/credit	Fall 2014
Graphic Design and Media	GRC	300-400	\$156.75/credit	Fall 2014
University of Nevada,	<u> </u>			
Business	ACC, BADM, BUS, ENT, GAM, FIN, IS, MGT, MKT	600-700	\$100.00/credit	Fall 2011
Engineering	BME, ENGR, CHE, CEE, CPE, CS, EE, GE, ME,	300-400	\$42.50/credit	Fall 2012*
Engineering	BME, ENGR, CHE, CEE, CPE, CS, EE, GE, ME,	300-400	\$85.00/credit	Fall 2013*
Engineering	BME, ENGR, CHE, CEE, CPE, CS, EE, GE, ME,	600-700	\$50.00/credit	Fall 2012*
Engineering	BME, ENGR, CHE, CEE, CPE, CS, EE, GE, ME,	600-700	\$100.00/credit	Fall 2013*
Nursing	NURS	300-400**	\$156.75/credit	Spring 2014
Nursing	NURS	500-700***	\$239.50/credit	Spring 2014
Nevada State College	)			
, and the second	NURS	ALL NURS courses	\$141.75/credit	Fall 2015
Truckee Meadows Co				
_	NURS****	100-200	\$60.00/credit	Fall 2014
Western Nevada Colle				
Nursing N	NURS****	100-200	\$60.00/credit	Fall 2015

# PROPOSED REVISION – PROCEDURES & GUIDENLINES MANUAL CHAPTER 7, SECTION 9 DIFFERENTIAL PROGRAM FEES

Additions appear in boldface italics; deletions are [stricken and bracketed]

# Section 9. <u>Differential Program Fees</u>

Program	Course Prefix	Course Level	<u>Amount</u>	Effective Date	
University of Nevada I	_as Vegas				
Architecture	AAD, AAE, ABS, AAL, LAND, AAI, AAP	300-400	\$156.75/credit	Spring 2012	
Architecture	AAE, AAD	500-700	\$239.50/credit	Spring 2012	
Business	MBA, FIN, MKT, MGT	500-700	\$100.00/credit	Spring 2012	
Executive MBA	EMBA	700	\$236/credit	Fall 2015	
Executive MHA	ЕМНА	700	\$400/credit	Summer 2016	
Marriage & Family Therapy	MFT	700 and above	\$177.50/credit	Fall 2015	
Nursing	NURS	300-400	\$156.75/credit	Spring 2012	
Nursing	NURS	500-700	\$239.50/credit	Spring 2012	
Physical Therapy	DPT	500-700	\$239.50/credit	Spring 2012	
Social Work	SW	700	\$125.00/credit	Fall 2012	
Urban Leadership	ULD	700	\$150.00/credit	Fall 2012	
Engineering	CEE, CEM, CPE, CS, EE, EGG, ME	300-400	\$40.00/credit	Fall 2014	
Engineering	CEE, CEM, CS, ECG, ME	600-700	\$20,00/credit	Fall 2014	
Graphic Design and Media	GRC	300-400	\$156.75/credit	Fall 2014	
University of Nevada, Reno					
Business	ACC, BADM, BUS, ENT, GAM, FIN, IS, MGT, MKT	600-700	\$100.00/credit	Fall 2011	
Engineering	BME, ENGR, CHE, CEE, CPE, CS, EE, GE, ME, MINE, MSE, MET	300-400	\$85.00/credit	Fall 2013	
Engineering	BME, ENGR, CHE, CEE, CPE, CS, EE, GE, ME, MINE, MSE, MET	600-700	\$100.00/credit	Fall 2015	
Nursing	NURS	300-400**	\$156.75/credit	Spring 2014	
Nursing	NURS	500-700***	\$239.50/credit	Spring 2014	
Nevada State College					
Nursing	NURS	ALL NURS courses	\$141.75/credit	Fall 2015	
Great Basin College					
Nursing	NURS*****	100-200	\$70.00/credit	Fall 2016	
Truckee Meadows Co					
Dental Hygiene	DH	100-200	\$88.25/credit	Fall 2016	
Nursing	NURS****	100-200	\$60.00/credit	Fall 2014	
Western Nevada College					
Nursing	NURS****	100-200	\$60.00/credit	Fall 2015	
Rev. 58 (12/15)					

Rev. 58 (12/15) Chapter 7, Page 11

- \*\*Does not include NURS 300, which is a required pre-requisite course for the nursing program. Does not include NURS 430, which is an elective course not required in any of the nursing programs.
- \*\*\*Does not include NURS 700-level courses required for the Doctor of Nursing Practice Program curriculum. Does not include NURS 630, which is an elective course not required in any of the nursing programs.
- \*\*\*\*All NURS courses excluding NURS 130 (CNA) and NURS 140 (Medical Terminology).
- \*\*\*\*\*All NURS courses excluding NURS 129 (Basic Nursing Skills) and NURS 130 (Certified Nursing Assistant).
- \*\*\*\*\*\*All NURS courses excluding NURS 130 (CNA), NURS 285 & NURS 290 (Selected Topics in Nursing) and NURS 300 and higher courses (Bachelor Degree Program Courses). (Added 12/10; A. 4/11, 12/11, 11/12, 6/13, 12/13, 3/14, 12/14, 3/15, 12/15)