



**Medical Affairs Advisory Committee
Meeting Minutes**

Meeting Date: October 16, 2024

Circulated: 12/5/2024

Approved: 12/11/2024

Present: Shahzad Mian (Chair), Lindsay Admon, Katherine Gold, Naomi Laventhal, Ann Marshall (FSO, Coordinator), Zack Ouellette (Office of EVPMA, Admin), Sara Pasquali, Soumya Rangarajan (SACUA liaison), Marschall Runge (Executive VP for Medical Affairs), Carol Shannon, Emily Stoneman, Patricia Tillman-Meakins

Absent: Nancy Allee, Jennifer Romano, Lauren Smith

Presenters:

- David C. Miller, MD, MPH, President, U-M Health & Executive Vice Dean of Clinical Affairs, Professor of Urology
- Quinta Vreede, MHSA, Chief Administrative Officer, MM, Chief of Staff, Office of VP for Medical Affairs

Meeting Topic: Vision and plan for new Michigan Medicine leadership; medical campus growth plans Vision 2035

1. Chair Shahzad Mian called the meeting to order and the minutes from the prior meeting were approved.
2. Dr. David Miller presented on Michigan Medicine's (MM) future leadership and direction:
 - MM's mission is to serve Michigan and the world. The clinical enterprise is foundational and allows for financial sustainability, with both data and stories being important for measuring impact. Partnerships are essential to this mission and include a coordinated clinical statewide network, such as the Neuro Care Network in Lansing. Key metrics include access, safety, quality, length of stay, and faculty engagement. MM's goal is to provide the best clinical delivery system while also offering wider access to high-level care. This includes being intentional about the alignment of the clinical and academic mission and creating new opportunities in these areas (e.g. with NIH), while also celebrating MM's research contributions, such as biomedical research.
3. Discussion covered the following topics:
 - A question was asked about the combining/splitting of the roles of EVP for Medical Affairs, Michigan Medicine CEO, and Dean, with remarks made about the rapid rate of change for Academic Medical Centers (AMC), the role of dean with working closely with chairs, the role of clinical funds in supporting AMCs, and the consideration of peer institutions such as Emory.
 - There was discussion about how MM can better invest in communities, i.e. MAAC faculty shared their experience of working with seriously ill patients within contexts where profit is not possible. Potential models and/or examples include Packard Health, Marygrove Learning Community, MC3, the possibility of offering one instance of EPIC, and Survival Flight.
 - Faculty expressed an interest in Federally Qualified Health Care Systems (FQHC), e.g. in Hamilton, MI, as well as related issues regarding primary care and referrals to specialty care. MM could pursue care models that emphasize annual wellness visits and better support for patients with high pharmacy costs and high utilization of in-hospital care.
 - A question was asked about how women and children are part of MM's mission. MM is considering a strategic plan for the children's hospital, e.g. issues of high occupancy for acute in-patient pediatric care, MM's pediatric cardiac surgery care, needs for additional space, and partnering with Sparrow and Trinity Health.
 - There was discussion about the NICU at UM Health-Sparrow and about how a non-profit model compares to a business model. Faculty shared that it can feel like they're "building a plane as we fly it."
 - The Michigan Medicine Chelsea Health Center and its primary care services was briefly discussed.



4. The Strategic Vision 2034 & Campus Plan 2050 with Quinta Vreede was postponed until a future meeting.

Respectfully submitted,

Ann Marshall, Faculty Governance Coordinator