

FACULTY COUNCIL SCHULICH SCHOOL OF BUSINESS

A regular meeting of the Schulich Faculty Council for the 2021-22 academic year will be held remotely via Zoom on Friday February 4th 2022 from 12:00pm – 1:30pm.

AGENDA

| 1. | Welcome & Chair's Remarks | Page |
|----|----------------------------|------|
| 2. | Dean's Remarks (Recording) | |
| 3. | PhD/GBC/UBS Updates | |

- **4.** Budget Consultation Session Fall-Winter 2021-22 (President & Vice-Chancellor Rhonda 2-41 Lenton, Provost & Vice-President Academic Lisa Philipps, and Vice-President Finance & Administration Carol McAulay) (12:30pm 1:15pm)
- 5. Adjournment

CONSENT AGENDA

A consent agenda item is deemed to be approved unless, at any moment before or during the meeting, a member of the Faculty Council of the Schulich School of Business advises the chair of his or her request to debate it.

| 1. | Communications a) For Information: Senate Synopses (2021.11.25, 2021.12.16) | Page |
|----|-----------------------------------------------------------------------------|---------|
| 2. | EMBA Program Committee | |
| | a) Course Change | |
| | 1. EMBA 6620 4.0 Healthcare Strategy (credit value) | 42-55 |
| | b) New Course Proposals | |
| | 1. EMBA 6255 2.0 Innovation in the Social-Digital Era | 56-64 |
| | 2. EMBA 6285 2.0 Value Creation and Capture in Healthcare | 65-78 |
| | 3. EMBA 6295 1.0 Healthcare's Global Marketplace | 79-86 |
| | 4. EMBA 6325 2.0 Value Creation in Biopharmaceuticals | 87-102 |
| 3. | Minutes of the Last Meeting: 2021.12.10 | 103-106 |

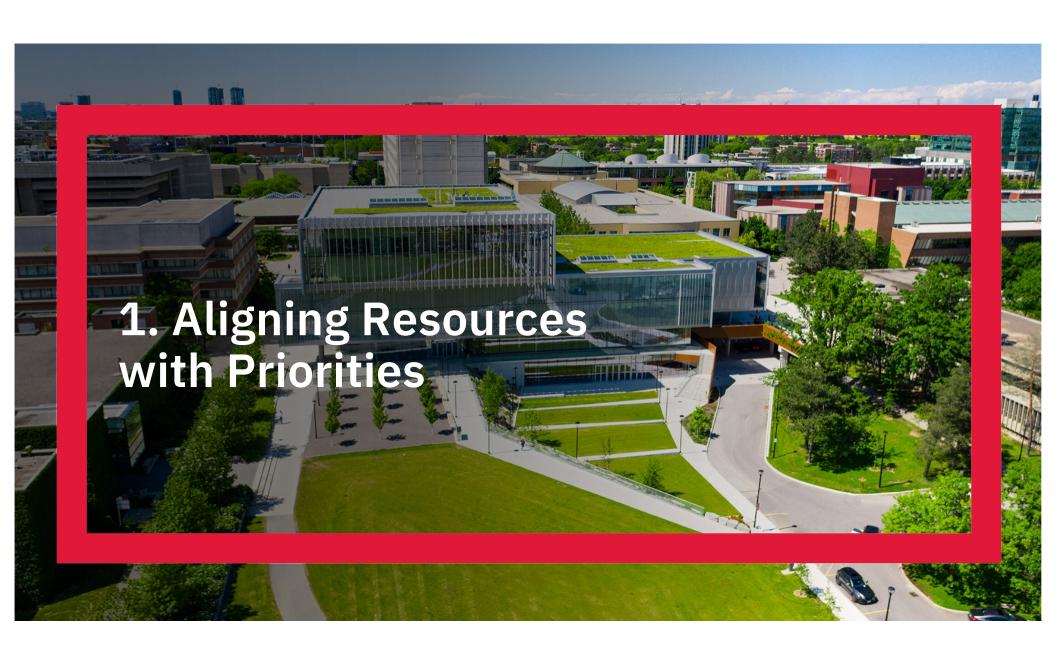
Upcoming Meeting Dates for 2021-2022:

| Schulich Executive Committee: | Schulich Faculty Council: |
|-------------------------------|---------------------------|
| Friday February 25, 2022 | Friday, March 11, 2022 |
| Friday April 8, 2022 | Friday, April 22, 2022 |



Agenda

- 1. Aligning resources with priorities
- 2. Community priorities highlighted in previous years
- 3. Strategic investments in 2021-22
- 4. Multi-year budget plan 2021-22, 2022-23, 2023-24
- 5. SHARP Budget Model
- 6. Community feedback
 - Priorities for strategic investments



Context

- SHARP Budget intended to:
 - o increase transparency around revenue and expenditures
 - o align resources to our Academic Plans e.g., 2020-2025 UAP: *Building α Better Future*
- Annual budget consultations since 2018
- 2021-22 budget:
 - recovery budget utilizing positive carry forwards
 - seeking opportunities to advance UAP and community priorities
- COVID-19 and a safe return to campus
- Federal and Provincial government challenges and priorities





Budget Consultations

- Since 2018-19, annual budget consultations have been undertaken each Fall-Winter to provide the community with an:
 - Overview of York's finances
 - Update of the current budget
 - o Opportunity to provide input about the budget process and priority areas for investment
- In 2020-21, sixteen sessions were held with Faculty Councils, employee groups, student groups and a Presidential Town Hall asking for community input on budget priorities for 2021-22 and beyond.
- In total, 1,800 community members attended the consultations.
- The input is an integral part of developing annual budgets and shared back with the community in the following year.



What we heard – Community Priorities for Investment

February 2021

February 2020 (at the end of 2020-21 cycle of consultations) (at the end of 2019-20 cycle of consultations)

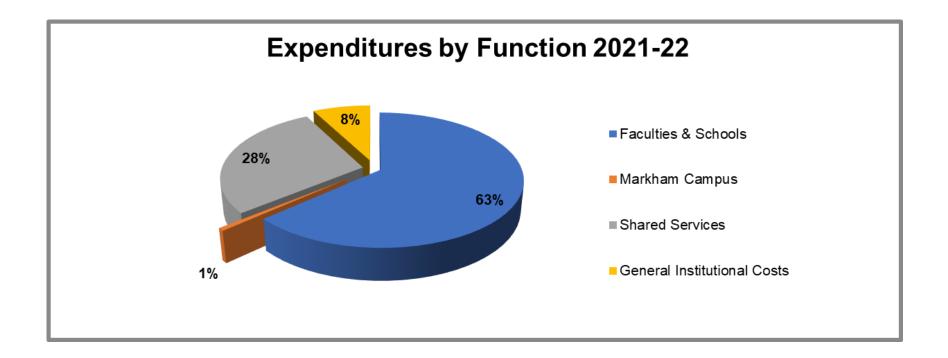
Performance metrics SHARP Government Advocacy Student experience Innovation

graduate students



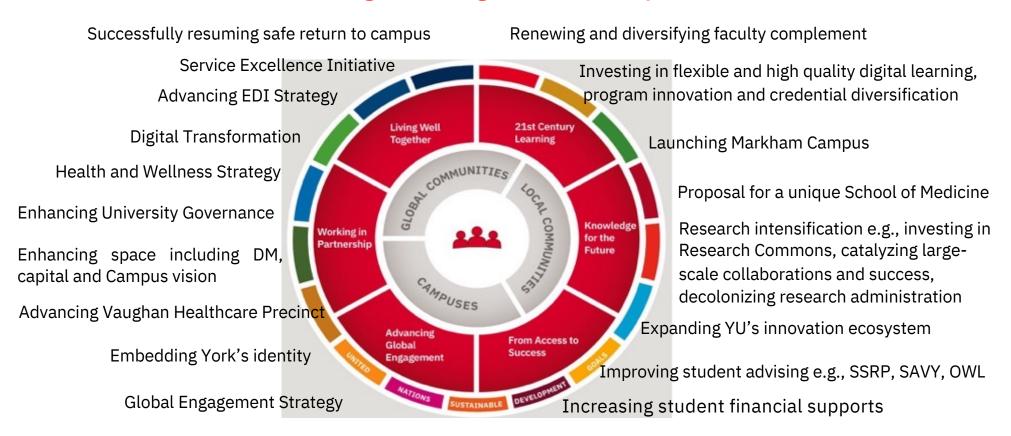


The University invests in strategic priorities collectively





Investments in the 2021-2022 Budget Plan Aligned to University Academic Plan Priorities



SDG Challenge - Sustainability Strategy, Climate Solutions, Energy Plan, DEM, CIFAL York, Inequality



Advancing the UAP 2020-2025: Safe and Successful Gradual Return to Our Campuses/21st Century Learning

Planning for increased activities on our campuses aligned with UAP goals, while also maintaining robust *remote* teaching, learning and work, requires a range of supports to students, faculty, and staff in 2021-22, including:

- 1. \$10M for bursaries to international students to support access and continued academic progress in light of financial challenges
- 2. \$4.1M for core network infrastructure repairs and upgrades supporting blended teaching, learning and remote work options
- 3. \$10M for pandemic-related expenses such as HyFlex classrooms, COVID screening tools and testing kits, additional PPE required, EWB staff, etc.
- 4. \$2.3M to mitigate technology risks, e.g. extra servers and licences, secondary power supplies, alternate remote access systems, enhanced eClass, outdoor WiFi, extended laptop borrowing program, etc.
- 5. Additional energy costs to implement 24-7 ventilation and upgrade air filters for improved circulation in buildings
- 6. Supports for remote teaching and learning (additional staffing in Teaching Commons, Faculties)
- 7. No increase for international tuition fees in 2021-22 (the previous multi-year budget assumed a 5% tuition fee increase in 2021-22 equivalent to \$12M)
- 8. No increase in tuition fees for domestic out-of-province students in 2021-22 deferring consideration of the government framework's flexibility allowing a 3% tuition increase for OOP

YORK 👢

21st Century Learning - Renewing and Diversifying Faculty

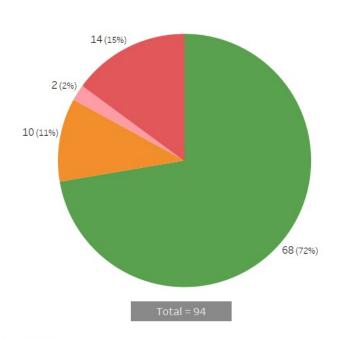
| | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
|-----------------------------|---------|---------|---------|---------|
| New Hires | | | | |
| Tenure Track | 74 | 95 | 82 | 98 |
| CLAs | 13 | 19 | 1 | 0 |
| Total | 87 | 114 | 83 | 98 |
| Retirements/Departures | | | | |
| Tenure Track | 38 | 44 | 30 | 26 |
| CLAs | 18 | 8 | 14 | 8 |
| Total | 56 | 52 | 44 | 34 |
| In-Year Increase (Decrease) | | | | |
| Tenure Track | 36 | 51 | 52 | 72 |
| CLAs | (5) | 11 | (13) | (8) |
| Total | 31 | 62 | 39 | 64 |

Salary costs of faculty complement generally reside in the Faculties where the appointments are made; the central University Fund and Provost's Office have also committed bridge funding to support faculty complement renewal, dedicated equity hiring, Markham hiring, and strategic research hires.

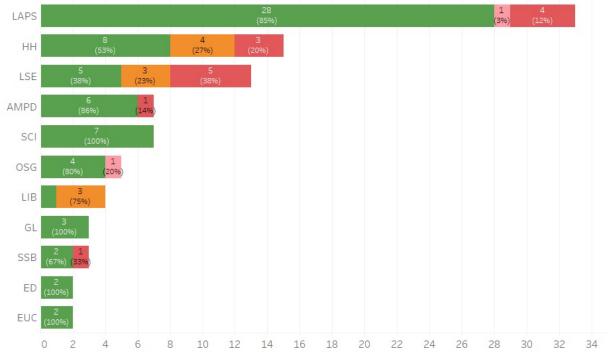


Status of 2021-22 Tenure Track Appointments (Preliminary Data)

Institutional 21-22 Status of Appointments









Made to Date

13



Complement Recovery – <u>Tenure Stream Faculty Complement (Heads), 2002-03 to 2021-22</u> (Preliminary Data) (October 1 to October 1) (excluding Librarians)





Knowledge for the Future

- \$3.2M in 2021-22, 2022-23 and 2023-24 from the University Fund to strengthen research priorities, including:
 - Building on areas of interdisciplinary research strength support for 6 to 7 research clusters at \$150K each for 3 years
 - Supporting emerging areas of research leadership by securing large-scale funding i.e., catalyst initiative
 - Advancing EDI through scholarship, research and related creative activities
- 2. \$3M from the Office of the Provost, matched by a further \$3M from the University Fund, providing bridge funding for faculty complement growth and renewal, specifically pertaining to research amplification (intended to support up to 40 strategic hires for three years each at \$50K annually)
- 3. \$3M to address shortfall in the operating budget including new and existing research staff positions
- 4. An additional \$1M in base funding each year to the Office of the VPRI for research intensification initiatives across the University e.g., ability to support requests for required matching funds



Markham Campus

The University's largest capital project to open in Fall 2023.

Funded from multiple sources – contributions from the City of Markham and York Region, external donations, debentures issued in April 2020, and a contribution from the University Fund in 2019-20.

At steady state, the campus will attract approximately 4,200 students and generate an annual surplus, enabling the new campus to re-pay its early year deficits, invest in its own renewal, and financially contribute to the institution overall.

The University has developed a 10-year operating budget for the new campus, incorporated into the Budget Plan.

The pre-opening and initial years of Markham's operations allow for deficit spending as it builds towards break-even. Work is underway to identify opportunities for Markham to achieve break-even as early as possible, while also investing appropriately in the campus's long-term success.



From Access to Success: Student Financial Supports

- \$6.3M, \$9.7M and \$13.1M in 2021-22, 2022-23 and 2023-24 have been committed respectively to ensure our student financial assistance offerings remain competitive and responsive to student needs, including:
 - Improved entrance scholarships to domestic students recognizing academic excellence
 - A higher volume of domestic and international bursaries
 - A new Tentanda Via award to students demonstrating fortitude, resilience, and commitment to sustainable development
- Expansion of student awards will continue beyond the three-year Budget Plan in alignment with student needs, our Strategic Enrolment Management approach, the financial context, and the University's academic priorities.



Living Well Together: Pursuing Equity, Diversity and Inclusion

- To diversify faculty complement, build capacity for research success of diverse scholars, and support York's Indigenous and Anti-Black Racism Frameworks and action plans:
- 23 authorized new faculty position hires 15 Black scholars, 1 BIPOC, 7 Indigenous
 - Appointed to start in 2021-22 12 Black, 1 BIPOC, and 5 Indigenous scholars
- \$650K in 2021-22 to seed projects advancing Black, Indigenous, and other equity scholarship, research and related creative activities
- Appointments of an Associate Vice President Indigenous and Associate Vice President Equity (in progress)
- 4 new Equity Officer positions to support EDI initiatives in Faculties



Living Well Together: Renewing our Virtual Environment

Build an integrated IT environment that enhances service delivery, supports faculty, staff and students, and resolves complexities, by investing:

- \$120M for a new Student System Renewal Program (SSRP) replacing outdated legacy systems multi-year project expected to conclude in 2025-26 and funded from a combination of capital reserves (\$41M) and the central University Fund (\$79M)
- 2. \$2.2M for system transformation within Human Resources
- 3. \$2M in 2021-22 for technology renewal in classrooms
- \$1M in 2021-22 for expanding award-winning Student Virtual Assistant at York (SAVY) providing 24 7 student navigational support (enhancing student advising)
- 5. \$1.2M in additional base funding to cybersecurity for technical expertise and firewall licenses

To address technical deficits in a more sustained and systemic way, the University is developing a long-term plan which will include an increased annual funding program for the replacement of hardware and software in line with industry standards and refresh life-cycles.



Living Well Together: Renewing our Physical Space

| | 2021-22 | 2022-23 | 2023-24 | |
|----------------|---------|---------|---------|---------------------------------------------------------------------------------|
| | | \$M | | |
| Internal Funds | 12.5 | 13.2 | 13.6 | From Faculty budget envelopes, central University Fund, and re-purposed reserve |
| External Funds | 5.7 | 6.4 | 5.7 | From Provincial Facility Renewal Program (FRP) |
| TOTAL | 18.2 | 19.6 | 19.3 | |

Two key priority projects underway, identified from prior year community consultations and working groups:

- 1. Classroom renewal \$20M over three years, 2019-2022
- 2. Washroom renewal \$13.5M over three years, 2019-2022

These were approved in 2019 as five-year projects and accelerated to three years due to low occupancy on campus in 2020-21.

The University has a \$653M deferred maintenance backlog which will be addressed through a long-term plan currently under development.



Renewing our Physical Environment: Major Capital Projects

Board-approved capital projects currently underway to advance the academic, research and student success/experience priorities, including (in order of expected completion):

- \$11.2M for enhancements to the Lions Stadium (targeted completion November 2021)

 Funded by the University's capital reserves
- \$72.7M for a new building for the School of Continuing Studies (March 2022)
 Funded by the School of Continuing Studies
- \$7.5M for a modernization of the Faculty of Education's facilities (May 2022)

 Funded by the Faculty of Education
- \$10M for a new building for the Goldfarb Gallery at York University (March 2023)

 Funded by external donations and the University Fund
- \$48.5M for expansion of the Sherman Health Science Research Centre, including a Neuroscience Facility and additional office space (Fall 2023)

Funded by the University's capital reserves, external debentures, CFI, and an internal loan with the Faculty of Health

 \$31.3M for a two-story addition to Vari Hall for the Faculty of Liberal Arts & Professional Studies (July 2024)

Funded by the Faculty of Liberal Arts & Professional Studies

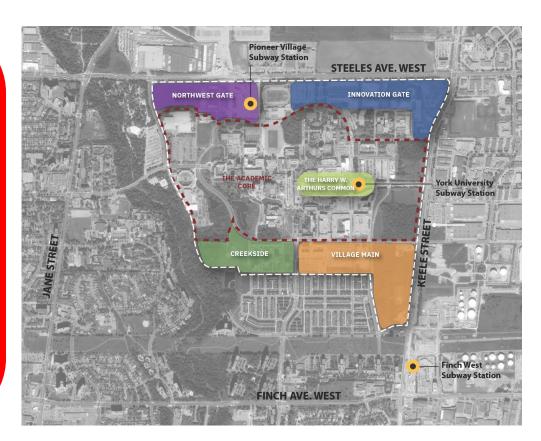


Major capital priority projects – approved in principle by the Board in May 2021 pending funding

| PROJECT | PROJECT SUMMARY | APPROXIMATE SIZE | APPROXIM ATE COST | CURRENT STATUS |
|-----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|----------------------|------------------------------------------------------------------|
| iHive Building (updated from 2 nd Science and Engineering Building) | To accommodate growth in Science and Engineering programs and interdisciplinary research with emphasis on the Internet of Things (IOT), Space Engineering, Smart Cities, Mechatronics, and Automation Technologies. Additional science and engineering programs, as well as interdisciplinary space for large-scale University research projects and Organized Research Units (ORUs) | 250,000 sf (new construction) | \$200M | Functional program to be updated |
| Scott Library Improvements (updated program) | Replacement of book stacks with compact, automated book retrieval increasing floor capacity and allowing expanded student study and lounge space, new makerspace, and other collaborative opportunities. Second elevator in an unused shaft will increase circulation and reduce existing traffic bottlenecks. | 206,000 sf (renovated space), 28,000 sf (new construction) over 5 levels | \$110M | Functional program and conceptual design complete |
| Central Square Revitalization and New Vision (new) | Modernization of Central Square to improve access and services to students, and to revitalize the space to reflect institutional priorities, including sustainability and indigeneity. Create a better sense of place by unifying the needs of multiple stakeholders including LA&PS, Division of Students, Food Services, and Scott Library. Create new flexible multi-use areas, increase student spaces, accessibility, sustainability, and heritage. | 254,900 sf renovated space over 3 levels | \$179.1M | Functional program and conceptual design complete |
| Student Services Hub (new) | Central access point for students at the heart of the Keele Campus. State of the art coordinated and adaptable student service model, combining transactional services with learning and developmental opportunities across the student journey, augmented with technology. | 46,600 renovated space over 2 levels | \$26.7M | Functional program complete |

Campus Vision: Four New Neighbourhoods

York University's Keele Campus is where university and city, academia and industry, people and culture meet and thrive. That energy will soon extend from Keele's historic academic core into four new neighbourhoods, nurturing a dynamic, flourishing, and complete community, and modelling the university's best and most innovative thinking. The results will demonstrate York's commitment to community well-being and environmental stewardship – to Living Well Together





Campus Vision – Draft Goals & Principles

Informing the 'Vision'

- Rooted in Place
- Distinctly "York U"
- Community Well Being
- Complete Community
- > A Well-Connected Campus
- Sustainability & Resilience
- Experiential Learning & Academic Research

Guiding Implementation

- Land Retention
- Optimize Mission Value
- Responsiveness
- Engagement
- Market and Social Acuity



Supporting the UAP – Optimizing Mission Value

Inherent Land Value



Inherent Land Value

Community Goals and Benefits



Revenue



Wellness



Research



Recreation/ Athletics



Affordable Housing



Long-term Care & Seniors Housing



Sustainable Initiatives



Childcare

Goal is to enhance UAP priorities through projects that might be aligned with broader community needs/opportunities and/or through generating revenue for academic investment



Next Steps

- Campus Vision and Strategy (CVS) informed by community consultations including Faculty Councils, brought forward for consideration end of 2021 Board of Governors cycle
- Approval of the CVS in November will provide a strong basis for:
 - o meaningful and respectful Indigenous engagement
 - o broader engagement with on-campus community members and interest groups
 - o renewed engagement with our external neighbours (including Black Creek & Jane Finch community groups, for example)
 - o discussions with government to convey our intentions and highlight potential alignment with government objectives
- Important implementation considerations will include:
 - o engaging with academic colleagues for timely input to ensure potential teaching and/or research opportunities are identified as part of any project formulation process
 - identifying how the CVS can support the University's long-term financial/capital strategic plans
 - prioritizing projects which best align University strategic objectives with market opportunities



Meeting the SDG Challenge

Action the University's commitment to social responsibility and excellence in cross-disciplinary thinking by investing in the key areas of the UN SDG framework:

- 21st c Learning
 - o A UN-sponsored Centre, CIFAL (*Centre International de Formation des Acteurs Locaux*), providing cross-sectoral training and development programs to advance the UN's SDGs
 - Support for a newly defined Faculty of Environmental and Urban Change (supports all priorities)
 - o Inclusion in curriculum e.g., Cross Campus Capstone Classroom (C4)
- Knowledge for the Future
 - Research catalyst fund supporting SDG projects
 - Expanded York Innovation Ecosystem supporting entrepreneurship, SMEs
 - o Potential for Living Lab/Climate Solutions (linked to 21st c Learning)
- Access to Success
 - o Increasing student support including the new *Tentanda Via* award, to build leadership related to the SDGs
- Living Well Together
 - o Carbon neutral by 2049
 - Promoting EDI through complement, dedicated student awards, research supports, access strategies, to reduce
 27 inequalities

Faculty/Unit Level Strategic Supports from University Fund

| Commitment | 2021-22 | \$M 2022-23 | 2023-24 |
|----------------------------------------------|---------|----------------|---------|
| Faculty Support * | 7.2 | 1.7 | 1.5 |
| Research Support | 3.2 | 1.5 | 1.5 |
| Student Services Support | 7.5 | 9.7 | 13.1 |
| Markham | 0.7 | 0.7 | 0.2 |
| Congress 2023 | 0.2 | 0.8 | |
| Technology | 6.9 | 13.8 | 12.0 |
| Support for non revenue generating Divisions | 2.5 | 0.3 | 0.3 |
| COVID-19 - Return to Campus Fund ** | 5.0 | | |
| Capital Projects | 5.5 | 2.0 | 0.0 |
| TOTAL | 38.6 | 30.5 | 28.6 |

* In addition, under SHARP 1.0 the University Fund has been contributing \$15M each year towards the Hold Harmless provided to the Faculties (total Hold Harmless amounted to \$40M with the balance provided from LAPS/Health and SHARP Tax). Beginning in 2022-23 under SHARP 2.0, the University Fund will provide Operating Support to those Faculties experiencing challenges aligning their revenues and expenses in a more tailored way, supported by current data and recovery plans.

** The budgeted commitment from the UF was intended to be reevaluated mid-year, and has been increased to \$10M to address emerging needs





Recovery Budget with Planned In-year Deficits

- Planned in-year deficits based on:
 - o strategic draw-down of positive carry forward over the approved 2020-2021 budget
 - o incurred Markham costs through to opening and steady state
- Carry forward growth due to last year's enrolment contingencies not needed:
 - o significant enrolment contingencies planned in 2020-2021 due to uncertainty associated with the pandemic
 - o increased student course loads and other factors mitigated drop in first year admit
- Retain some level of contingency for 2021-22 in light of:
 - o international enrolment uncertainties
 - o need to assess stability of course loads
- Reassess enrolment contingency requirements when registrations are complete to determine if further acceleration (or slow-downs) are warranted
- Utilize positive carry forwards in Divisions/Faculties/University Fund to:
 - o Support recovery as needed including Faculty operating
 - o Advance the UAP through strategic opportunities



Operating Budget approved by the Board of Governors in June 2021

| Sudget S | | | 2020-21 | | 2021-22 2022-23 | | 2023-24 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------------------------------------------------------|----------|---------|-----------------|----------|---------|
| Covernment Operating Grants 306.3 309.9 305.9 304.7 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 305.8 | | | Budget | Actuals | Budget | Budget | Budget |
| Student Fees 742.2 741.3 762.0 838.7 914.0 | | Operating Revenues | | | | | |
| Student Fees 742.2 741.3 762.0 838.7 914.0 | (1) | Government Operating Grants | 306.3 | 309.9 | 305.9 | 304.7 | 305.8 |
| Grints and Student Fees Subtotal 1,048.5 1,051.2 1,067.9 1,143.4 1,219.9 | (2) | | 742.2 | 741.3 | 762.0 | 838.7 | 914.0 |
| Investment Income 12.9 18.5 8.9 6.1 4.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 | (2) | Grants and Student Fees Subtotal | 1,048.5 | 1,051.2 | 1,067.9 | 1,143.4 | 1,219.9 |
| Other Recoveries 47.8 36.9 38.0 41.6 42.3 70.14 70.14 70.14 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 70.15 | | Funding from Donations, Endowments, & Trusts | 7.9 | 7.6 | 6.5 | 6.5 | 6.5 |
| Total Operating Revenues 1,117.2 | | Investment Income | 12.9 | 18.5 | 8.9 | 6.1 | 4.7 |
| Contingencies Enrolment Contingency (38.4) (23.6) (22.0) (42.3) (59.0) | | Other Recoveries | 47.8 | 36.9 | 38.0 | 41.6 | 42.3 |
| Enrolment Contingency (38.4) - (22.0) (42.3) (59.0) | | Total Operating Revenues | 1,117.2 | 1,114.1 | 1,121.2 | 1,197.6 | 1,273.3 |
| International Tuition Offset (16.0) (23.6) | (2) | Contingencies | | | | | |
| Total Contingencies (54.4) (23.6) (22.0) (42.3) (59.0) Total Operating Revenues, Net of Contingencies 1,062.8 1,090.5 1,099.3 1,155.3 1,214.3 Operating Expenditures Salaries and Wages 627.1 599.2 650.8 675.3 704.9 Employee Benefits 150.8 140.9 154.6 159.4 166.1 10.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 150.0 | (3) | Enrolment Contingency | (38.4) | - | (22.0) | (42.3) | (59.0) |
| Total Operating Revenues, Net of Contingencies 1,062.8 1,090.5 1,099.3 1,155.3 1,214.3 | , | International Tuition Offset | (16.0) | (23.6) | <u> </u> | <u> </u> | - |
| Caperating Expenditures Salaries and Wages 627.1 599.2 650.8 675.3 704.9 | | Total Contingencies | (54.4) | (23.6) | (22.0) | (42.3) | (59.0) |
| Salaries and Wages | | Total Operating Revenues, Net of Contingencies | 1,062.8 | 1,090.5 | 1,099.3 | 1,155.3 | 1,214.3 |
| Employee Benefits 150.8 140.9 154.6 159.4 166.1 Operating Costs 158.2 109.8 159.4 174.0 183.7 Scholarships and Bursaries 81.0 73.3 99.7 94.3 99.4 Taxes and Utilities 24.8 18.5 26.2 26.0 27.7 Interest on Long-Term Debt 24.9 25.0 25.1 25.3 25.6 Total Operating Expenditures 1,066.9 966.7 1,115.9 1,154.3 1,207.4 In Year Surplus/(Deficit) for Operating Fund, Before Transfers (4.1) 123.8 (16.6) 1.0 6.9 Transfers to Restricted Funds (51.1) (90.5) (42.7) (41.2) (48.1) Transfers to Other Funds (5.8) (7.0) (5.3) (4.5) (3.6) Total Transfers to Other Funds (5.8) (7.0) (5.3) (4.5) (3.6) Total Transfers to Restricted Funds (60.9) (102.0) (52.0) (49.1) (54.8) In Year Surplus/(Deficit) for Operating Fund, Before GAAP Adj. (65.0) 21.8 (68.6) (48.1) (47.9) GAAP Adjustments Remeasurement of Employee Benefit Plans - 54.7 | | Operating Expenditures | | | | | |
| Employee Benefits | (4) | Salaries and Wages | 627.1 | 599.2 | 650.8 | 675.3 | 704.9 |
| Scholarships and Bursaries 81.0 73.3 99.7 94.3 99.4 Taxes and Utilities 24.8 18.5 26.2 26.0 27.7 Interest on Long-Term Debt 24.9 25.0 25.1 25.3 25.6 Total Operating Expenditures 1,066.9 966.7 1,115.9 1,154.3 1,207.4 In Year Surplus/(Deficit) for Operating Fund, Before Transfers (4.1) 123.8 (16.6) 1.0 6.9 Transfers to Restricted Funds Transfers to Capital Fund (51.1) (90.5) (42.7) (41.2) (48.1) Transfers to Capital Fund (3.9) (4.6) (4.0) (3.4) (3.2) Transfers to Other Funds (5.8) (7.0) (5.3) (4.5) (3.6) Total Transfers to Restricted Funds (60.9) (102.0) (52.0) (49.1) (54.8) In Year Surplus/(Deficit) for Operating Fund, Before GAAP Adj. (65.0) 21.8 (68.6) (48.1) (47.9) GAAP Adjustments 54.7 - | (1) | Employee Benefits | 150.8 | 140.9 | 154.6 | 159.4 | 166.1 |
| Taxes and Utilities 24.8 18.5 26.2 26.0 27.7 Interest on Long-Term Debt 24.9 25.0 25.1 25.3 25.6 Total Operating Expenditures 1,066.9 966.7 1,115.9 1,154.3 1,207.4 In Year Surplus/(Deficit) for Operating Fund, Before Transfers (4.1) 123.8 (16.6) 1.0 6.9 Transfers to Restricted Funds | | Operating Costs | 158.2 | 109.8 | 159.4 | 174.0 | 183.7 |
| Interest on Long-Term Debt 24.9 25.0 25.1 25.3 25.6 Total Operating Expenditures 1,066.9 966.7 1,115.9 1,154.3 1,207.4 In Year Surplus/(Deficit) for Operating Fund, Before Transfers (4.1) 123.8 (16.6) 1.0 6.9 Transfers to Restricted Funds | | Scholarships and Bursaries | 81.0 | 73.3 | 99.7 | 94.3 | 99.4 |
| Total Operating Expenditures 1,066.9 966.7 1,115.9 1,154.3 1,207.4 | | Taxes and Utilities | 24.8 | 18.5 | 26.2 | 26.0 | 27.7 |
| Transfers to Restricted Funds Transfers (4.1) 123.8 (16.6) 1.0 6.9 | | Interest on Long-Term Debt | 24.9 | 25.0 | 25.1 | 25.3 | 25.6 |
| Transfers to Restricted Funds Transfers to Capital Fund (51.1) (90.5) (42.7) (41.2) (48.1) Transfers to Ancillary Fund (3.9) (4.6) (4.0) (3.4) (3.2) Transfers to Other Funds (5.8) (7.0) (5.3) (4.5) (3.6) Total Transfers to Restricted Funds (60.9) (102.0) (52.0) (49.1) (54.8) In Year Surplus/(Deficit) for Operating Fund, Before GAAP Adj. (65.0) 21.8 (68.6) (48.1) (47.9) GAAP Adjustments - 54.7 - - - - Remeasurement of Employee Benefit Plans - 54.7 - - - - GAAP Adjustments - 54.7 - - - - - In Year Surplus/(Deficit) for Operating Fund (65.0) 76.5 (68.6) (48.1) (47.9) Opening Accumulated Surplus/(Deficit) for Operating Fund 240.3 240.3 316.8 248.1 200.1 | | Total Operating Expenditures | 1,066.9 | 966.7 | 1,115.9 | 1,154.3 | 1,207.4 |
| Transfers to Capital Fund (51.1) (90.5) (42.7) (41.2) (48.1) Transfers to Ancillary Fund (3.9) (4.6) (4.0) (3.4) (3.2) Transfers to Other Funds (5.8) (7.0) (5.3) (4.5) (3.6) Total Transfers to Restricted Funds (60.9) (102.0) (52.0) (49.1) (54.8) In Year Surplus/(Deficit) for Operating Fund, Before GAAP Adj. (65.0) 21.8 (68.6) (48.1) (47.9) GAAP Adjustments - 54.7 - - - GAAP Adjustments - 54.7 - - - In Year Surplus/(Deficit) for Operating Fund (65.0) 76.5 (68.6) (48.1) (47.9) Opening Accumulated Surplus/(Deficit) for Operating Fund 240.3 240.3 316.8 248.1 200.1 | | In Year Surplus/(Deficit) for Operating Fund, Before Transfers | (4.1) | 123.8 | (16.6) | 1.0 | 6.9 |
| Transfers to Ancillary Fund (3.9) (4.6) (4.0) (3.4) (3.2) Transfers to Other Funds (5.8) (7.0) (5.3) (4.5) (3.6) Total Transfers to Restricted Funds (60.9) (102.0) (52.0) (49.1) (54.8) In Year Surplus/(Deficit) for Operating Fund, Before GAAP Adj. (65.0) 21.8 (68.6) (48.1) (47.9) GAAP Adjustments - 54.7 - - - - GAAP Adjustments - 54.7 - - - - In Year Surplus/(Deficit) for Operating Fund (65.0) 76.5 (68.6) (48.1) (47.9) Opening Accumulated Surplus/(Deficit) for Operating Fund 240.3 240.3 316.8 248.1 200.1 | | Transfers to Restricted Funds | | | | | |
| Transfers to Other Funds (5.8) (7.0) (5.3) (4.5) (3.6) Total Transfers to Restricted Funds (60.9) (102.0) (52.0) (49.1) (54.8) In Year Surplus/(Deficit) for Operating Fund, Before GAAP Adj. (65.0) 21.8 (68.6) (48.1) (47.9) GAAP Adjustments - 54.7 - - - - GAAP Adjustments - 54.7 - - - - In Year Surplus/(Deficit) for Operating Fund (65.0) 76.5 (68.6) (48.1) (47.9) Opening Accumulated Surplus/(Deficit) for Operating Fund 240.3 240.3 316.8 248.1 200.1 | | Transfers to Capital Fund | (51.1) | (90.5) | (42.7) | (41.2) | (48.1) |
| Total Transfers to Restricted Funds (60.9) (102.0) (52.0) (49.1) (54.8) In Year Surplus/(Deficit) for Operating Fund, Before GAAP Adj. (65.0) 21.8 (68.6) (48.1) (47.9) GAAP Adjustments - 54.7 - - - GAAP Adjustments - 54.7 - - - In Year Surplus/(Deficit) for Operating Fund (65.0) 76.5 (68.6) (48.1) (47.9) Opening Accumulated Surplus/(Deficit) for Operating Fund 240.3 240.3 316.8 248.1 200.1 | | Transfers to Ancillary Fund | (3.9) | (4.6) | (4.0) | (3.4) | (3.2) |
| In Year Surplus/(Deficit) for Operating Fund, Before GAAP Adj. (65.0) 21.8 (68.6) (48.1) (47.9) GAAP Adjustments Remeasurement of Employee Benefit Plans - 54.7 | | Transfers to Other Funds | (5.8) | (7.0) | (5.3) | (4.5) | (3.6) |
| GAAP Adjustments Remeasurement of Employee Benefit Plans - 54.7 - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - <t< td=""><td></td><td>Total Transfers to Restricted Funds</td><td>(60.9)</td><td>(102.0)</td><td>(52.0)</td><td>(49.1)</td><td>(54.8)</td></t<> | | Total Transfers to Restricted Funds | (60.9) | (102.0) | (52.0) | (49.1) | (54.8) |
| Remeasurement of Employee Benefit Plans - 54.7 - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - | | In Year Surplus/(Deficit) for Operating Fund, Before GAAP Adj. | (65.0) | 21.8 | (68.6) | (48.1) | (47.9) |
| GAAP Adjustments - 54.7 - - - In Year Surplus/(Deficit) for Operating Fund (65.0) 76.5 (68.6) (48.1) (47.9) Opening Accumulated Surplus/(Deficit) for Operating Fund 240.3 240.3 316.8 248.1 200.1 | | GAAP Adjustments | | | | | |
| In Year Surplus/(Deficit) for Operating Fund (65.0) 76.5 (68.6) (48.1) (47.9) Opening Accumulated Surplus/(Deficit) for Operating Fund 240.3 240.3 316.8 248.1 200.1 | | Remeasurement of Employee Benefit Plans | - | 54.7 | - | - | - |
| Opening Accumulated Surplus/(Deficit) for Operating Fund 240.3 240.3 316.8 248.1 200.1 | | GAAP Adjustments | <u> </u> | 54.7 | - | - | |
| | | In Year Surplus/(Deficit) for Operating Fund | (65.0) | 76.5 | (68.6) | (48.1) | (47.9) |
| (5) Closing Accumulated Surplus/(Deficit) for Operating Fund 175.3 316.8 248.1 200.1 152.2 | | Opening Accumulated Surplus/(Deficit) for Operating Fund | 240.3 | 240.3 | 316.8 | 248.1 | 200.1 |
| | (5) | Closing Accumulated Surplus/(Deficit) for Operating Fund | 175.3 | 316.8 | 248.1 | 200.1 | 152.2 |



Key Budget Assumptions

- 1. Government grants Strategic Mandate Agreement (SMA3) with government
- Student fees:
 - Tuition fees frozen for 2021-2022
 - o Government's tuition framework for domestic students expected this academic year
 - Market factors for international students
 - o Enrolment contracts with the Faculties
- 3. Enrolment contingencies risk analysis with the Faculties
- 4. Salaries and benefits collective agreements



Closing accumulated balances – (5)

The closing accumulated surplus in the Operating Budget for 2020-21 was \$316.8M, comprising:

| | ≯M |
|----------------------------------------------------|-------|
| 1. Balances in the Divisions and Faculties | 138.0 |
| 2. Balances in General Institutional (GI) reserves | 128.3 |
| 3. Balance in the University Fund | 50.9 |
| 4. Markham | (0.4) |
| TOTAL | 316.8 |

NOTES:

- 1. Balances distributed across the Faculties, Administrative Units, and the School of Continuing Studies and available to them for investing in priorities.
- 2. To meet various institution-wide financial obligations, e.g. pension special payments and post-employment benefits, collective agreement funding, insurance provisions, HR provisions, and a \$25M contingency reserve.
- 3. The remaining, uncommitted balance of the University Fund, available for use in future years to support institutional priorities.
- 4. Pre-opening deficit (debenture interest)





SHARP budget model – external review

Conducted in Fall 2019 by an external panel, who issued a report and recommendations for improvement in Winter 2020 across five main areas:

- 1. Planning & Budgeting (sequencing of budget cycles, enhancing the accountability of shared services areas)
- 2. Hold Harmless (allocating support funds to certain Faculties in a non-formulaic way, moving away from 2013-14 as the point-in-time basis for the calculation)
- 3. University Fund (ensuring the UF is of sufficient size to support strategic priorities)
- 4. Governance (clarifying the roles of budget councils)
- 5. Other considerations (conducting ongoing reviews of cost drivers, re-considering the formula being utilized for interfaculty teaching, reviewing space costing)

In 2020-21, proposals were developed to address each of the recommendations, and advice/input obtained from the President, Vice-Presidents and Faculty Deans

SHARP 2.0 is being implemented 2022-23



SHARP 2.0 – key elements

- 1. Budget Cycle and Accountability:
 - Enrolment planning over longer time horizon
 - Multi-year budgets approved by Board each April, before entering the new fiscal year
 - Service Tables for revenue-generating areas and shared services providers to discuss priorities, needs, resources, and service levels

2. Hold Harmless:

Hold Harmless amounts that were automatically provided to the Faculties based on 2013-14 replaced by transparent method of support based on current data where needed, and reviewed annually

3. University Fund:

• 8% annual contributions from the revenue-generating areas (Faculties, School of Continuing Studies, Ancillary Services) for a sustainable, predictable UF to support institutional strategic priorities

4. Governance:

- Two distinct Councils providing advice to the President
 - o University Fund Council* on time-limited strategic requests of Faculties and Units for University Fund support
 - o Budget Council** on base budget requests of shared services Units

5. Interfaculty Revenue Sharing:

New framework being developed by a Working Group for implementation in 2023-24

*Chaired by the Provost. Membership – VPFA, VPRI, four Resource Faculty Deans representing large and small Faculties, and professional Schools

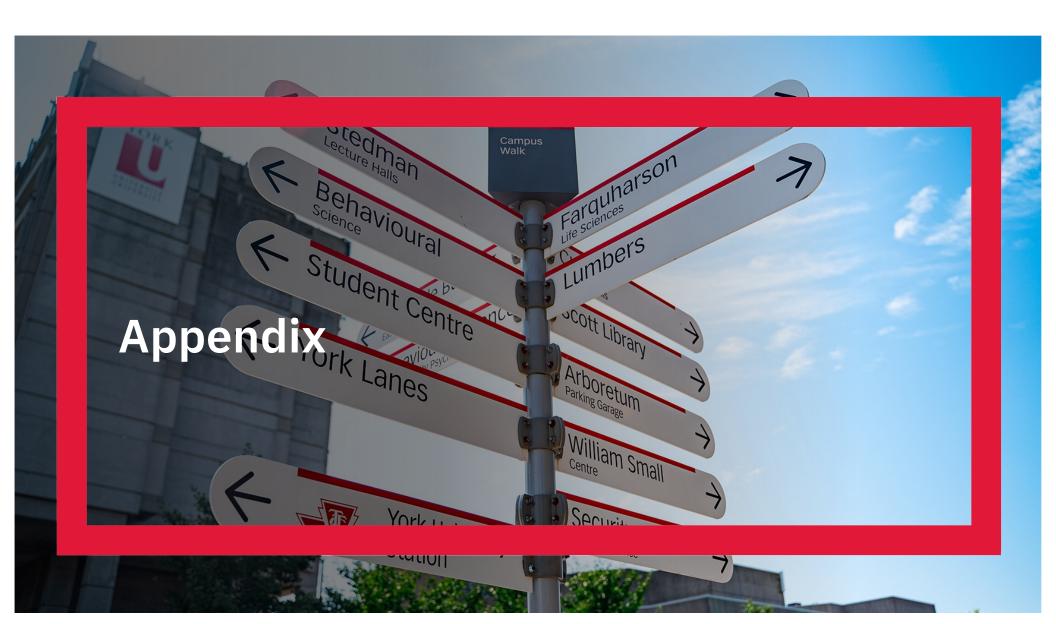
^{**} Chaired by the President. Membership – Divisional VPs, all Resource Faculty Deans, Executive Director of the School for Continuing Studies YORK

SHARP Website

https://www.yorku.ca/sharp/



Feedback – What should be prioritized for investment in the next multi-year budgets?



| | Comr | nitments (\$ | M) |
|-----------------------------------------------------------------------------------------------|---------|--------------|---------|
| | 2021-22 | 2022-23 | 2023-24 |
| Faculty Support | | | |
| Faculty Complement Renewal | 2.7 | 0.2 | 0.1 |
| Black Faculty Hires (Glendon, AMPD, EUC) | 0.5 | 0.5 | 0.5 |
| Faculty of Environmental and Urban Change (EUC) - Start-Up Support | 4.0 | | |
| Strategic Faculty Initiatives | | 1.0 | 1.0 |
| | 7.2 | 1.7 | 1.5 |
| Research Support | | | |
| Electronic CV Management System | 0.2 | 0.2 | 0.2 |
| Investment in Strategic Research Plan | 1.0 | | |
| National Centre of Excellence (NCE) | 0.2 | 0.2 | 0.2 |
| Large-Scale Research Initiatives | 1.1 | 1.1 | 1.1 |
| Equity, Diversity and Inclusion in Research - funding for research by Indigenous and Black so | | | |
| 1. ,, | 3.2 | 1.5 | 1.5 |
| Student Services Support | 0.2 | 2.0 | |
| International recruitment | 0.6 | | |
| Digital Program Marketing | 0.3 | | |
| York International | 0.3 | | |
| Scholarship Funding Top-Up | 6.3 | | |
| Enhanced Student Awards Program | 0.5 | 9.7 | 13.1 |
| Emanced Stadent Awards Flogram | 7.5 | 9.7 | 13.1 |
| Martin | 7.5 | 9.7 | 13.1 |
| Markham | 0.5 | 0.5 | |
| Markham Campus - Provost's Office | 0.5 | 0.5 | 0.0 |
| Markham Campus - VPRI (Yspace) | 0.2 | 0.2 | 0.2 |
| | 0.7 | 0.7 | 0.2 |
| Congress 2023 | 0.2 | 0.8 | |
| | | | |
| Technology | | | |
| Student System Renewal Program (SSRP) | | 12.0 | 12.0 |
| Information Technology projects (network infrastructure, SAVY, Data Warehouse, Office | | | |
| 365) | 5.8 | 0.7 | |
| HR System Transformation | 1.1 | 1.1 | |
| | 6.9 | 13.8 | 12.0 |
| Support for non revenue generating Divisions | | | |
| Equity, People & Culture - hiring an AVP, Indigenous; hiring a Community Health and Safety | | | |
| (Nursing) Manager | 0.5 | 0.3 | 0.3 |
| Advancement Division - Convocation top-up; CRM system | 0.9 | | |
| President's Division (top-up funding for Secretariat, Office of the Counsel, Communications | | | |
| & Public Affairs, AGYU) | 1.1 | | |
| | | | |
| | 2.5 | 0.3 | 0.3 |
| | | | |
| COVID-19 - return to campus fund | 5.0 | | |
| · · · · · · · · · · · · · · · · · · · | 5.0 | 0.0 | 0.0 |
| Capital Projects and Renovations | | | |
| Classroom Technology Renewal | 2.0 | | |
| Incremental Funding for Deferred Maintenance | 3.5 | | |
| York Art Gallery project | 3.3 | 2.0 | |
| Total California California | 5.5 | 2.0 | 0.0 |
| | 5.5 | 2.0 | 0.0 |
| | | | |

University Fund commitments - detailed



Course Change Proposal – Healthcare Strategy

The following information is required for all course change proposals at the undergraduate and graduate level. To facilitate the review/approval process, please use the headings below (and omit the italicized explanations below each heading).

1. Program

Kellogg-Schulich Executive MBA Program

2. Course Number and Credit Value

EMBA 6620 4.00

3. Course Title

a) Long Course Title

Healthcare Strategy

b) Short Course Title

Healthcare Strategy

4. Existing Pre-requisites/Co-Requisites

N/A

5. Type of Course Change (indicate all that apply)

| | in course number |
|---|------------------------------------------------------------------------------------------------------------------------------------------|
| ✓ | in credit value (provide course outline) |
| | in course title (provide course outline; short course titles may be a maximum of 40 characters, including punctuation and spaces) |
| | in course description (provide course outline; short course descriptions may be a maximum of 60 words, written in present tense) |
| | in learning objectives/outcomes (please append the program's existing learning outcomes as a separate document) |
| | in integration (provide statement of approval from other program) |
| | in cross-listing (provide statement of approval from other program) |
| | in pre/co-requisite |
| | expire course |
| | other (please specify) |

6. Effective Session of Proposed Change(s)

Winter 2022

7. Academic Rationale

The reduction in credits is motivated by a somewhat reduced number of classes, readings and deliverables for this year's edition of the course, which make it equivalent to 3.0 rather than 4.0 credits.

8. Proposed Course Information

| Existing Course Information Proposed Course Information | |
|---------------------------------------------------------|-------------------|
| (Change from) | (Change to) |
| Course Credits: 4 | Course Credits: 3 |
| | |
| | |

| Originato | or | |
|-----------------------|-------------------------------------------------------------------|--------------------------------------------------------|
| Originati | • | |
| | | |
| | Craig Garthwaite | |
| • | Signature | Date |
| | | |
| | Craig Garthwaite Name | Area or Specialization |
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| <u>Approva</u> | <u>ls:</u> | |
| | Specialization | d about the second |
| i nave rev | viewed this change form and I support the propose | d changes to the course. |
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| | | |
| | Matthias Kipping | January 12, 2022 |
| • | Signature | Date |
| | | |
| | Matthias Kipping Name | Kellogg-Schulich Executive MBA Area or Specialization |
| | | And of Openialization |
| Degree F I have re | Program viewed this change form and I support the propo | osed changes to the course. |
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| | Matthias Kipping | January 12, 2022 |
| | Signature | Date |
| | | |
| | Matthias Kipping Name of Program Director | Kellogg-Schulich Executive MBA Program |
| | Traine of Flogram Director | riogiani |
| | | |

9.

Consultation

N/A

Program CommitteeThis course change has received the approval of the relevant Program Committee.

| Marcia Annisette | January 12, 2022 |
|-------------------------|--------------------------------|
| Signature | Date |
| | |
| Marcia Annisette | Kellogg-Schulich Executive MBA |
| Name of Committee Chair | Committee |

Required Attachments

| For changes in the number of credits, course title or course description, please attach the |
|---------------------------------------------------------------------------------------------|
| Schulich course outline (which must conform to program norms; see the Program |
| Assistant for details). |

☐ For cross-listed / integrated courses, please include a signed statement of agreement from the director of the other graduate course / other degree program.

Send to

Send an electronic copy of all forms and attachments, and forward emails of support from other faculty members, to the appropriate program committee secretary.

Northwestern Kellogg

STRT 945X: Healthcare Strategy

Winter 20212 Syllabus

Primary Faculty Contact

Professor Craig Garthwaite

4231 Global Hub (847) 491-2509

e-mail: c-garthwaite@kellogg.northwestern.edu

Additional Teaching Faculty

Professor Adam Koppel Neeraj Chopra Managing Director, Bain Capital Life Science

Professor Griffin Myers

Chief Medical Officer, Oak Street Healthcare

Professor Kaveh Safavi

Senior Managing Director of Global Health, Accenture

COURSE OVERVIEW AND OBJECTIVES

The fundamental question of strategy is both simple and difficult: "How can a firm make long-run profits?" As you have discussed in your other strategy classes at Kellogg, the answer to this question is far more complicated than simply raising revenue or cutting costs. Firms face fundamental trade-offs and deal with a variety of legal and economic constraints that limit their ability to earn long run profits.

In 2018, the U.S. healthcare sector accounted for approximately 18 percent of GDP. This economic activity involves a diverse set of industries with public, nonprofit, and for-profit buyers and sellers. Many firms in this industry while united by the provision of healthcare goods and services have meaningfully different business models that require distinct models and frameworks for strategic success. For example, the business model of a large payer or provider is economically distinct from that of a biopharmaceutical or medical device firm.

That said, the success of all of these types of firms are increasingly intertwined. Payers and providers must understand the supply chain for devices and pharmaceuticals. Similarly, providers must understand how they can uniquely create value in order to capture value in negotiations with payers and patients. Biopharmaceutical firms must understand how payers consider value as they set premiums and determine utilization management – which are critical inputs to understanding potential market size. Furthermore, increasingly complex products require partnerships between providers and pharmaceutical manufacturers. These include not only for the administration developments such as CAR-T and gene therapy as well as working with providers to identify patients with unique genetic profiles that make them available for precision medicine such as for Loxo's oncology products that target patients with a TRK gene fusion.

Firms operating in the U.S. healthcare sector face additional difficulties that at times require sector specific strategies. For example, the government represents a near majority of spending, customers rarely directly pay for services, quality is difficult to observe, information is not commonly held across market participants, and value is often best provided by a coordinated set of economic actors that face different incentives. Together, these features (and many others) make developing and maintaining profit maximizing strategies quite difficult. Further complicating matters, many firms in the health sector are non-profit organizations whose explicit goal to maximize social value while competing directly with for-profit firms.

Recent industry changes have only increased the need to better understand the entire healthcare ecosystem. Vertical integration, value-based contracts, and potentially disruptive entrants have led to both firms with entirely new sets of assets and novel partnerships intended to create and capture value. Success in the changing market requires both understanding important institutional details and have frameworks for taking in new information and developing profitable courses of action.

The aim of this course is to build upon your existing courses and frameworks to provide the tools necessary for crafting successful strategies for firms operating in the U.S. health sector. As a participant, you will be introduced to the key strategic problems facing the complete set of healthcare organizations and to develop strategic frameworks that can be applied in a variety of settings.

In addition, this course will explicitly cover recent health reform efforts and how those can represent both opportunities and threats for participants in a variety of markets. This will involve a variety of more policy related topics and questions than might be found in a strategy class focusing on a different sector.

TEACHING APPROACH

In order to best prepare you for future success in healthcare, this course will be co-taught by a combination of Kellogg academic faculty and clinical faculty who are currently leading organizations across the healthcare sector.

Regardless of the professor, the course will combine both lecture and case discussion formats. Because the aim of the course is build your own critical and analytical thinking abilities, you will spend much of your time preparing for and engaging in class discussion. These will include longer cases and shorter examples of firms that currently confronting the theoretical course concepts.

Many of our discussions will be based on both large and small business cases. Cases tend not to have a single, tidy solution. However, there are always better and worse answers, and valid and invalid inferences. Cases never contain all the information you would like to have to make a decision—in this way, they are very much like real life. You may find it frustrating to be pushed to make a decision or take a stand when you are not sure whether it is the right one; this is the nature of real-world business decision-making. Cases often offer conflicting information. They will require you to make judgment calls. This kind of ambiguity is also a feature of real-world business decisions, particularly in a field such as health which almost uniquely combines the uncertainty of the business and policy world.

COURSE MEETING DATES SUMMARY

Throughout the course we will move between content related to the broad application of the economics of strategy to the healthcare sector and more focused modules that "drill down" on particular concepts or topics of importance to success in this sector. The table below provides a high-level summary of course meeting times and topics for discussion. More detail on readings and content for each day is provided below.

| <u>Date</u> | <u>Time</u> | Professor | <u>Content</u> |
|--------------------------|--------------------------|------------------|-------------------------------------------------------------------|
| Thursday January, 13 | 9:00am - 12:30pm | Craig Garthwaite | Value Creation and Capture in The United States Healthcare Sector |
| Thursday, January 13 | 1:30pm - 5:00pm | Neeraj Chopra | Module 1a: Value Creation in Digital Healthcare |
| Friday, January 15 | <u>2:00pm – 5:00pm</u> | Craig Garthwaite | Added Value in Healthcare |
| Sunday, January 16 | 9:00am - 1:00pm | Craig Garthwaite | Competitive Advantage in Healthcare |
| Thursday, February 105th | 2:00pm PT – 5:00pm PT | Neeraj Chopra | Module 1b: <u>Value Capture in Digital Healthcare</u> |
| Tuesday, February 22 | 6:00pm – 9:00pm via ZOOM | Craig Garthwaite | In-Class Student Debates and Boundaries of the Healthcare Firm |
| Tuesday, March 1 | 6:00pm – 9:00pm via ZOOM | Craig Garthwaite | Boundaries of the Healthcare Firm |

PREPARATION

Preparing for class discussion means more than just reading the case. There is no explicit preparation task to do as you read the material for the course, but it is a good idea always to be asking yourself, "Do I believe this argument? Where else does it apply? When would this approach not be useful?"

If for some reason you are not prepared for class, the faculty expect you to let us know before class. We know that you are juggling work, other classes and other commitments; you don't need to give a detailed explanation of excuse. However, if you haven't told us otherwise, then you have implicitly committed to be ready to contribute to the class if we should call on you.

READINGS

A course packet, which includes the cases on the syllabus, is required. This course packet is available from the Xanedu.

In addition to the Xanedu course packet, this course also relies on a large number of mandatory readings from the popular press. These readings are available in a PDF packet that you could download from the Course Canvas website.

ADDITIONAL COURSE MATERIALS

The following materials will be posted on the course's Canvas website.

- Course announcements: We will use the Canvas site to post course-related announcements and reminders. As a result, you should check the site regularly. If there is something critical to which we need to draw your attention, we will also email you.
- Assignments: The website will contain the group case assignments, the individual case assignments, and the preparation questions for each case.
- Slides and handouts from class: Anything we hand out in class will be posted on Canvas. If you
 miss something or lose something, you can find it there. These will also be posted to the "Modules"
 section of Canvas.

DELIVARABLES

Lincoln Douglas Debate: 20%

On the Friday February 5th, we will have an in-class debate about important issues in healthcare strategy. Specifically, your team will be asked to prepare to participate in a debate covering one of the following question:

Option 1: Resolved: Biosimilar products should be allowed to be automatically substituted for the reference biologic product in the same was as generic small molecule products.

Option 2: Resolved: Accountable Care Organizations (ACOs) will emerge as an effective method of meaningfully controlling healthcare costs.

During the first week of class, you will organize yourself into groups of no more than six members that are interested in debating one of these two options.

The debates will follow a modified "Lincoln-Douglas" debate format that is described in detail in a reading on the Canvas site. For each debate, the affirmative and alternative teams will be chosen at random. In addition, two teams will be selected to be judges (one team will be chosen randomly from the pool of affirmative teams and the other from the pool of alternative teams). At the formal close of the debate, the judges will vote on the winning team.

All teams will be asked to turn in a memorandum—not to exceed 1,200 words of text, including figures, graphs, or tables, but excluding footnotes (roughly 3 pages)—that (a) summarizes the team's opening argument, the contentions it intends to make, and the logic, reasoning, and evidence used to support the contentions; (b) rebuts the points that a team arguing the opposing position would be likely to make. Each memorandum must be turned in at the beginning of class and should indicate the word count (again, including figures, graphs, and tables). All teams will be graded based on the quality of the arguments and debate points in their memorandum. There is no restriction on the sources that you can access for the debate. However, please be sure to footnote your sources.

Short Assignments for each digital health module (20%):

This will be a relatively short written assignment (approximately 1,500 – 2000 words). This assignments will require you to apply a variety of course concepts (as well as concepts you have learned in other core classes at Kellogg) to digital healthcare specific question.

Final Exam: 40%

The final exam is a 100-minute timed exam to be downloaded and completed by March 7, 2020. The exam will consist of short essays and one longer essay and/or analysis of an article/case.

Class Preparation and Participation: 20%

The class participation grade provides you with an *added* incentive to prepare for class—the value of your own learning should be the primary incentive. Case discussions work well as learning tools when everyone participates.

Your participation will be graded on quality, not volume. You should provide insights, observations, inferences, or conclusions that not only express your viewpoint, but *also* defend your analysis. Your comment should be relevant to the topic at hand, and should advance the discussion. A simple opinion or viewpoint is not very valuable without any justification. We value comments that respond to, elaborate on, lend support to, contradict, or correct a comment by one of your classmates. Counter-productive comments include opinions without a justifying argument, pure repetition of previous point, and rambling, vacuous or disparaging comments.

Discussion constitutes a large portion of our class time; you will have ample opportunity to participate. **We will cold call in class,** both to give you an incentive to prepare for class, and to make sure the class discussion does not collapse to a handful of students.

DAY-BY-DAY SCHEDULE

January 13 (Thursday) 9:00am - 12:30pm

The United States Healthcare Sector and the Affordable Care Act (ACA)

- D. Leonardt, "Making Healthcare Better," New York Times, 11/3/2009.
- A. Gwande, "The Cost Conundrum," New Yorker, 6/1/2009

BACKGROUND READING (these articles will not be formally discussed but you may find them useful)

- OBAMACARE HBS CASE #9-714-029
- "The Hospital Industry," Health Economics, Jay Battacharya, Timothy Hyde and Peter Tu, 2014.
 - We will cover this reading in more depth during Session 2, but if you have little familiarity with these issues it would be good to skim this article now

Value Creation and Capture in Healthcare

 A. Jacobs, "Crisis Looms in Antibiotics as Drug Makers go Bankrupt," New York Times, December 26, 2019

January 13 (Thursday) 1:30pm - 5:00pm

Module 1a: Value Creation in Digital Healthcare [PROFESSOR NEERAJ CHOPRA]

- DIGITAL HEALTH INDUSTRY CATEGORIZATION (PDF)
- Top Five Digital Health Technology Trends (PDF)

January 14 (Friday) 2:00pm - 5:00pm

Added Value in Healthcare

Added Value in Pharmaceutical Industry

- L. Johnson, "Lipitor became world's top-selling drug despite uncertain beginning," Associated Press, Dec 28, 2011.
- J. Rocgkoff, "How Pfizer Set the Cost of its New Drug at \$9,850 Per Month," Wall Street Journal, Dec. 9, 2015.

Added Value Health Care Services

- A. Wilde Matthews, T. McGinty, M. Evans, "How Much Does a C-Section Cost? At One Hospital, Anywhere From \$6,241 to \$60,584," Wall Street Journal, Feb 11, 2021.
- M. Evans, "What Employers Pay Hospitals Varies Widely, Study Finds," New York Times, May 9, 2019
- R. Weldon, "Trying to Revive H.M.O.s, but Without Those Scarlet Letters," New York Times, 2/28/2016.

BACKGROUND READING (these readings are not required)

- T. Gryta, ""What is a 'Pharmacy Benefit Manger," Wall Street Journal, July 21, 2011.
- "Follow the Pill: Understanding the U.S. Commercial Pharmaceutical Supply Chain" Kaiser Family Foundation
 - Note: This article is a little bit old, so don't pay much attention to the market statistics. However, its
 description of the activities of the various firms is the most accurate I have found. It will be useful for
 students without a strong understanding of how both products and money move between various firms in
 the pharmaceutical market.

Industry Analysis

The Hospital Industry

 D. Armstrong, "A Surgeon Earns Riches, Enmity By Plucking Profitable Patients," Wall Street Journal, 8/2/2005.

BACKGROUND READING (these readings are not required)

- "The Hospital Industry," Health Economics, Jay Battacharya, Timothy Hyde and Peter Tu, 2014.
 - We will be covering the dynamics of the hospital industry during this class. This texthook chapter is too long to assign in total, but hased on your familiarity with the U.S. Hospital sector you may find parts of it useful. I leave it to your discretion to skim and/or read the sections that you might find useful.

Commented [CG1]: Different reading

January 16 (Sunday) 9:00am - 1:00pm

• PRICING THE PRICELESS: COVERING TRANSFORMATIONAL THERAPIES AT HARVARD PILGRIM HEALTH PLAN (621-059-PDF-ENG)

Competitive Advantage

DaVita and the Dialysis Market

• RENAL CARE IN THE UNITED STATES (KELLOGG CASE)

February 10 (Thursday) 9:00am - 1:00pm [N SAN FRANCISCO]

Module 1b: Value Creation in Digital Healthcare [PROFESSOR NEERAJ CHOPRA]

- 10 reasons why digital transformations fail (PDF)
- 6 reasons for digital transformation (Dx) project failure in 2021 (PDF)
- Transformer in chief: The new chief digital officer, McKinsey, 2015. (https://www.mckinsey.com/business-functions/people-and-organizational-performance/our-insights/transformer-in-chief-the-new-chief-digital-officer)
- No Hiding From Digital Disruption, Act In Lockstep (https://www-forbes-com.cdn.ampproject.org/c/s/www.forbes.com/sites/tomokoyokoi/2021/05/04/no-hiding-from-digital-disruption-act-in-lockstep/amp/)
- THE FIVE STAGES OF THE CHIEF DIGITAL OFFICER—AND WHY THEY OFTEN FAIL (PDF)

February 22 (Tuesday) 6:00pm - 9:00pm, VIA ZOOM

Sustainability of Competitive Advantage

- AMGEN INC: PURSUING INNOVATION AND IMITATION (A): HBS CASE: 714424-PDF-ENG
- E. Silverman, "As Hep-C Sales Decline, Wall Street wonders what Gilead does for its next act," STATNews, July 26, 2016.
- S. Chen, M. Cortez, and J. Hopkins, "Gilead Tries to Repeat Home Run With \$11.9 Billion Kite Deal," Bloomberg, Aug 28, 2017

BACKGROUND READING (these readings are not required)

- "Pharmaceuticals and the Economics of Innovation," Health Economics, Jay Battacharya, Timothy Hyde and Peter Tu, 2014.
- M. O'shea and C. Mikson, "The Hatch-Waxman Act: still critical, still in flux," *The National Law Journal*, vol. 27, no. 70.

In-Class Student Debates

March 1 (Tuesday) 6:00pm - 9:00pm, VIA ZOOM

Boundaries of the Firm

- M. McWilliams et al., "Early Performance of Accountable Care Organizations in Medicare," New England Journal of Medicine, June 16, 2016.
- M. McWilliams et al., "Medicare Spending after 3 Years of the Medicare Shared Savings Program," New England Journal of Medicine, Sep 30 2018
- CMS DIRECT CONTRACTING DOCUMENT https://innovation.cms.gov/innovation-models/direct-contracting-model-options
- L. Ramsey, "The CEO of CVS Health just gave us one key example that shows how it plans to use if 10,000 pharmacies to upend healthcare," *Business Insider*, November 7, 2019.
- Z. Tracer and L. Ramsey Pflanzer, "Walmart is opening health clinics, but that's just the start.
 We got the full story from the exec leading its push into the \$3.5 trillion US healthcare industry,"
 Business Insider, Sep 11, 2019.
- J. Tozzi, "UnitedHealth's Recipe for Lower Costs: Send Patients to Its Own Doctors," Bloomberg, Mar 2, 2020.

New Course Proposal: EMBA 6255 2.0 Innovation in the Social-Digital Era

1. Program: Kellogg-Schulich Executive MBA

2. Course Number: EMBA 6255

3. Credit Value: 2.0

4. Long Course Title: "Viral": Creating and Spreading Innovation in the Social-Digital Era

5. Short Course Title: Innovation in the Social-Digital Era

6. Effective Session: Winter 2022

7. Calendar (Short) Course Description:

The course examines how to create innovation that will become widely popular quickly ("viral", "trend"), and discusses several key success factors that contribute to the creation and success of innovations in the new social-digital era, applicable to all types of innovations – products, services, tech, behaviours, etc. It will integrate case studies and new research findings along with discussions, hands-on implementation.

8. Expanded Course Description:

This course asks why certain types of innovation become popular and 'viral' while others fail and disappear. What are the characteristics that can create viral innovation or a "trend"? What factors affect social adoption of this type of innovation? Is there a special type people, groups, organizations, or communities that influence the impact and spread of certain innovations more than others? How do you make the story itself go viral? What is the psychological mechanism that makes people adopt an innovation and tell others (or not)? The course examines how to create innovation that will become widely popular quickly ("viral", "trend"), and discusses several key success factors that contribute to the creation and success of innovations in the new era, applicable to all types of innovations – products, services, tech, behaviors, etc. It integrates current case studies, examples, practical models, theories and new research findings along with discussions, actual hands-on implementation (in groups as well as individually), and guest speakers who have created such "viral epidemics" in their fields. There is no need to prepare for the course – except igniting curiosity and attending classes.

9. Course Learning Outcomes:

Students will acquire knowledge and skills related to:

- Understanding why certain types of innovation become popular and 'viral' while others fail and disappear.
- Identifying the key success factors that contribute to the creation and success of innovations in this fast-paced social-digital era.
- Creating innovative products, services, tech etc. that become widely popular quickly.

10. Rationale:



A new generation of innovations has emerged and it is spreading more quickly and intensely than ever. "Viral" products, technologies, behaviors, ideas that spread like wildfire like Zoom, AI, Spotify, Bots, "Me Too" campaign, Slime, Bitcoin, Veganism, Co-Working spaces, WFH (work from home), many of which have created big businesses and have major social impacts in our time. The course is addressed to those who would like to create such impactful innovations, including executives wishing to create and spread an innovative inner-organizational behavior amongst their colleagues/employees, a corporate or a startup wanting to create product innovation that quickly spreads amongst customers — whether B2C or B2B, a person wishing to create a "viral" social-impact movement in their community, or a parent wishing to spread a certain behavior in his kids' school. This includes most if not all of the EMBA students.

11. Evaluation:

Assessment will be based on (i) attendance and class participation in discussions (10%), (ii) individual case studies reflections (25%), (iii) a group assignment on viral trend identification and prediction (15% pass/fail) and (iv) a group case study presentation based on the analysis of a successful viral product/behavior/service (50%).

12. Integrated Courses:

NOT integrated

13. Crosslisted Courses:

NOT crosslisted

14. Faculty Resources:

This course will be offered annually as a global elective by our partner, the Kellogg-Recanati International Executive MBA program at the Coller School of Management of Tel Aviv University (TAU). It will be taught Dr. Liraz Lasry, who specializes on business, professional and personal growth of C-level Executives, Investors and Seasoned Entrepreneurs. Dr. Lasry is a popular Lecturer at Tel-Aviv University's MBA and Executive programs, as well as at NYU and Columbia University. She is a TEDx speaker and an international Public Speaker, and a personal advisor to top C-level Executives, investors, seasoned entrepreneurs, VCs, and corporates around the world. She is also the founder of the XPAND Executive Retreat and the co-owner of 'Founders Kite Club' European community of experiences entrepreneurs, investors and executives.

15. Physical Resources:

Classes for this course will be held in an intensive 5-day format (remote or in-person) at the Coller School of Management of Tel Aviv University, which will provide all the necessary physical resources.

16. Bibliography and Library Statement:

The course relies mainly on case studies, recent research findings as well as guest speakers. All the relevant readings will be provided to our students participating in this course through the Learning Management System of the Kellogg-Recanati International Executive MBA program, to which they will be given access before, during and after the course, as needed. If necessary, our students can access additional relevant material via the York University Library, as per the attached Library Statement.



SUBJECT: Library Statement for EMBA 6255: "Viral": Creating and Spreading Innovation in the Social-Digital Era

FROM: Angie An, Teaching & Learning Librarian / Business Liaison Librarian

DATE: December 20, 2021

EMBA 6255: 'Viral': Creating and Spreading Innovation in the Social-Digital Era

York University Libraries (YUL) will be able to support the proposed course, EMBA 6255: 'Viral': Creating and Spreading Innovation in the Social-Digital Era. This course examines how to create innovation that will become widely popular quickly, and discusses several key success factors that contribute to the creation and success of innovations in the new era. YUL has a strong collection of print and electronic periodicals, books, and business databases that will help students conduct relevant secondary research when they complete their field projects.

1. Required / Suggested Course Readings & Course Reserves Support

All the required readings for this course will be supplied by Kellogg-Recanati Executive MBA program, YUL is pleased to assist with requests for extra readings.

2. Resources for Course Assignments

YUL's collections will be able to support this course work. The following is a list of recommended resources:

Books & eBooks

Searching the library's catalogue using subject headings such as *Digital inclusion*, *Digital gap*, *Digital social innovation*, *Diffusion of innovations*, *Social innovation* and *Technological innovations* shows that YUL has a strong number of print and eBooks on the overarching course topics. Many of the books are available electronically, while the majority of the print books are located at the Peter F. Bronfman Business Library and the Scott Library.

Scholarly, Trade/Industry, and Newspaper Articles

YUL's Omni search interface can be used to locate scholarly, trade, and newspaper articles from many disciplines. The <u>Omni search guide</u> provides instructions on how to best use this discovery layer to find relevant articles.

Research Guides

Students will be able to learn more about the databases the library subscribes to by using <u>YUL's</u> <u>well-developed research guides</u>. These guides provide a curated list of the best resources to use for specific research tasks.

3. Research Help & Consultation Support

Students will have access to <u>research help and consultation services</u>. Students can email the Peter F. Bronfman Business library (bronfref@yorku.ca), use the online chat service, and book a Zoom consultation with a <u>business librarian</u>.



'Viral':

Creating and Spreading Innovation in the Social-Digital Era

KR 25

January 2-6, 2022

Course Instructor:

Dr. Liraz Lasry

(Liraz@LirazLasry.com)

Dr. Liraz Lasry specializes on business, professional and personal growth of C-level Executives, Investors and Seasoned Entrepreneurs.

Dr. Lasry is a popular Lecturer at Tel-Aviv University's MBA and Executive programs, as well as at NYU and Columbia University. She is a TEDx speaker and an international Public Speaker, and a personal advisor to top C-level Executives, investors, seasoned entrepreneurs, VCs, and corporates around the world. Dr. Lasry is also the founder of the XPAND Executive Retreat and the co-owner of 'Founders Kite Club' European community of experiences entrepreneurs, investors and executives.

Full Bio can be found at the end of the syllabus.

Teaching Assistant: Mrs. Maya Goldstein

(mayagold.tau@gmail.com)

Course Overview and Objective:

A new generation of innovations has emerged - and it is spreading more quickly and intensely than ever. "Viral" products, technologies, behaviors, ideas that spread like wildfire. Just think about Zoom, AI, Spotify, Bots, "Me Too" campaign, Slime, Bitcoin, Veganism, Co-Working spaces, WFH (work from home), wearing masks and keeping social distance - or protesting it. Tech, Product and Behavioral 'epidemics' that create the biggest business - and social - impacts of our time.

Wouldn't we all like to create such impactful epidemics? Whether it's an executive wishing to create and spread an innovative inner-organizational behavior amongst her colleagues/employees, a corporate or a startup wanting to create product innovation that quickly spreads amongst customers - whether B2C or B2B, a person wishing to create a "viral" social-impact movement in his/her community, or a parent wishing to spread a certain behavior in his kids' school.



Why do certain types of innovation become popular and 'viral' while others fail and disappear? What are the characteristics that can create viral innovation or a "trend"? What factors affect social adoption of this type of innovation? Is there a special type people, groups, organizations, or communities that influence the impact and spread of certain innovations more than others? How do you make the story itself go viral? What is the psychological mechanism that makes people adopt an innovation and tell others (or not)?

The course examines how to create innovation that will become widely popular quickly ("viral", "trend"), and discusses several key success factors that contribute to the creation and success of innovations in the new era, applicable to all types of innovations - products, services, tech, behaviors, etc.

COURSE FORMAT AND COURSE PREPARATION

We will integrate current case studies, examples, practical models, theories and new research findings along with discussions, actual hands-on implementation (in groups as well as individually), and guest speakers who have created such "viral epidemics" in their fields. There is no need to prepare for the course - except igniting curiosity and attending classes.

Reading:

Recommended:

- https://hbr.org/2019/01/can-biometrics-predict-a-viral-marketing-campaign
- https://www.researchgate.net/publication/318894208 What is Contagious Exploring why content goes viral on Twitter A case study of the ALS Ice Buck et Challenge
- https://www.forbes.com/sites/theyec/2020/03/24/the-six-ingredients-for-a-successful-viral-marketing-campaign/#1c0dccd94f86
- https://www.msi.org/wp-content/uploads/2020/06/MSI_Report_10-114.pdf
- https://hbr.org/2016/05/research-the-link-between-feeling-in-control-and-viral-content
- https://faculty.wharton.upenn.edu/wp-content/uploads/2014/12/Beyond-Viral.pdf
- https://www.forbes.com/sites/forbesagencycouncil/2020/01/15/14-socialmarketing-campaigns-that-ruled-2019/#354de9c4126f
- https://hbr.org/2014/04/when-controversy-sparks-buzz-and-when-it-doesnt
- https://hbsp.harvard.edu/product/BH713-PDF-ENG?itemFindingMethod=Search
- https://hbr.org/2016/03/branding-in-the-age-of-social-media



Assignment and Assessment:

| Assignment Type | Maximum points | Due date |
|---------------------------------------------|----------------|-----------|
| Group In-Class Assignment | 15 (pass/fail) | 2.01.2022 |
| Group Case Study presentation | 50 | 6.01.2022 |
| Individual Reflections on Case Studies | 25 | 9.01.2022 |
| Individual Participation & Attendance score | 10 (5+5) | - |

ASSESSMENT

1. Viral Trend Identification and Prediction - Group Assignment (15% pass/fail)

You will be assigned a specific example of a successful product/ service/ behavior/ idea, and asked to analyze whether it is a "viral" phenomenon in accordance with the definitions presented and discussed in class, as well as predict whether it will become more viral and to what extent (what type of "Trend").

This is an in-class assignment, to be submitted at the end of the first class via Moodle, (2.01.2022).

2. Analyzing a successful viral product/behavior/service - Group Case Study Presentations (50%)

You will be asked to analyze a successful viral "trend" A to Z according to the principles and tools presented in class. You will have the options to choose a topic from a list, or choose something else you are particularly curious about, professional, or personally (subject to my approval).

Group preparation for the final presentations shall be required. Specific detailed instructions shall be provided in the "assignments" section on Moodle.

3. Case Studies Reflections - Individual Assignment (25%)

After the end of the day of the last session you will be asked to submit, for each case study presented in class, at least one idea for increasing the "viral-ness" of the product/behavior analyzed. To be submitted via Moodle. Deadline: latest 9/1/22.

4. Attendance and Class Participation in Discussions (10%=5%+5%)

Attendance points will be based on physical attendance or zoom attendance with an open camera.

Please note that participation points will be based on the quality of the comments and not their quantity (though active lively participation is most welcomed and much encouraged!).



Topics and Schedule

| Day | Topic | Date | Time |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|
| 1 | Introduction, defining foundational concepts and prediction What makes something contagiously popular? What is a "viral" or "trendy" product/ behavior/ service/ tech? How do new things spread? What is the lifecycle of viral innovations? What different kind of viral epidemics/trends are there? Can we predict them, and if so - how? | 2.01.2022 | 2* 1.5hrs |
| 2 | The Product/Idea What makes products/ideas "stick"? Properties, characteristics, and qualities of things that create fast/exponential social adoption | 3.01.2022 | 2* 1.5hrs |
| 3 | How to spread your product/idea within and between different groups? Social factors and motives in adoption and abandonment: Social groups and social proliferation, effects of groups, characteristics of groups and social roles in facilitation of "viral" What makes people adopt/abandon something - and tell others? Individual psychological causes and motives in adoption, abandonment, and word of mouth | 4.01.2022 | 2* 1.5hrs |
| 4 | Viral storytelling workshop What makes stories go viral? The art of VIRAL storytelling - a hands-on workshop | 5.01.2022 | 2* 1.5hrs |
| 5 | Case Studies Presentations and Summary | 6.01.2022 | 2* 1.5hrs |



Full Professor Bio

Dr. Liraz Lasry specializes on business, professional and personal growth of C-level Executives, Investors and Seasoned Entrepreneurs. She is doing so on several levels:

Executive Education - Dr. Lasry holds a Ph.D. in Business from the Coller Graduate School of Business, Tel Aviv University. One of her PhD advisors was the world-renowned behavioral economist Prof. Dan Ariely (Duke University). Liraz holds several academic positions: she is a popular Lecturer at Tel-Aviv University's MBA and Executive programs, as well as at NYU and Columbia University. She is also the developer of a popular executive training program and is formerly the associate academic manager of the Global MBA program at Tel-Aviv University (Sofaer IMBA).

Public Speaking - Dr. Lasry is a TEDx speaker and an international Public Speaker. She is often invited to give talks, workshops or weekend retreats on conferences or corporate management events, with many international executives, investors and corporate as her clients, some of which are Checkpoint, Intel, Microsoft, Thailand's national innovation accelerator, Johnson and Johnson, HP, and more. Main topics include Creating Viral Trends | Storytelling | Branding | Personal Branding | Spreading Innovation | Creativity | Executive Personal Growth | Inspiration.

Personal and strategic advisor - Dr. Lasry is a personal and strategic advisor to top C-level Executives, investors, seasoned entrepreneurs, VCs, and corporates around the world. She also sits on several boards and is a judge at several innovation competitions.

Founder of Executive Retreats - Dr. Lasry is the founder of the XPAND Executive Retreat - a unique retreat format customized for personal and professional growth of C-level executives, high-impact investors, and leading entrepreneurs. Liraz is also co-owner of 'Founders Kite Club' - a German company (GMBH) that brings together a European community of experiences entrepreneurs, investors, and executives for professional and personal growth.

Liraz is a passionate kite surfer, a beginner wave surfer and free diver, world traveler and a painter whose paintings have been exhibited and sold around the world.

More information can be found on https://www.lirazlasry.com/en/homepage/

New Course Proposal: EMBA 6285 2.0 Value Creation and Capture in Healthcare

1. Program: Kellogg-Schulich Executive MBA

2. Course Number: EMBA 6285

3. Credit Value: 2.0

4. Long Course Title: Value Creation and Capture in Healthcare

5. Short Course Title: Value Creation and Capture in Healthcare

6. Effective Session: Winter 2022

7. Calendar (Short) Course Description:

This course is a study of value creation and capture in US healthcare delivery. The focus of the course is on healthcare services and the provision of care to patients, primarily in the American context but with applicability to global markets. The objective is to understand how the healthcare system is organized and managed and how it might be improved.

8. Expanded Course Description:

Value in healthcare is the quality and experience of the health outcome divided by the price. This course is a study of value creation and capture in US healthcare delivery. As such, the focus of the course is on healthcare services and the provision of care to patients, primarily focusing on the American context but with applicability to global markets. The objective is to understand how the healthcare system is organized (or not) and managed (or not) so that value can be created and captured through the delivery of care.

The course is organized into two parts: value creation and value capture. It will begin with an overview of the US healthcare system to understand the underlying economics of the industry and the dynamics that exist in a complex market. From there it will explore the infrastructure and mechanics that drive the industry throughout the value chain. Much of this is strategic, though the course also will explore, in specific examples, the minutia to highlight opportunities for innovation in the market. The last section of the course will focus on value capture and new business models that are changing the landscape of care delivery.

9. Course Learning Outcomes:

Students will acquire knowledge and skills related to:

- Understanding how the US healthcare system is organized and managed.
- Identifying the infrastructure and mechanism driving the value chain in healthcare.
- Considering opportunities for innovation and new business models that help improve value creation and capture in care delivery.

10. Rationale:

The healthcare sector is an important and growing part of the economy in all highly developed countries (and increasingly in developing countries), and not only since the Covid-19 pandemic. A significant and growing number of the Kellogg-Schulich Executive MBA students are directly involved in healthcare or work in closely related areas and are



looking to extend their career there, while others might consider building one in the sector. The proposed course will allow them to learn about the US healthcare system and the way it creates and captures value and innovates. It will provide an important background (positive or negative) for the strategic and organizational decisions not only in the US itself, but also in Canada and elsewhere.

11. Evaluation:

Assessment will be entirely on an individual basis and consists of (i) class participation, with a focus on the level of preparation and the quality of contributions (35%); (ii) an Individual case assignment, with details posted on Canvas (15%); and (iii) a final take-home exam (50%).

12. Integrated Courses:

NOT integrated

13. Crosslisted Courses:

NOT crosslisted

14. Faculty Resources:

This course will be offered annually as a global elective by our partner, the Kellogg School of Management of Northwestern University. It will be taught by <u>Dr. Griffin Myers</u>, a board-certified physician who is a co-founder and Chief Medical Officer of Oak Street Health, a growing organization of value-based primary care centers serving adults on Medicare headquartered in Chicago. Dr. Myers is a BS graduate of Davidson College, has an MBA from the University of Chicago Booth School of Business, and an MD from the University of Chicago Pritzker School of Medicine. He was previously a Clinical Fellow at the Harvard Medical School as well as a Project Leader at The Boston Consulting Group. He is currently, among others, a Research Associate at Harvard Medical School, an Adjunct Instructor of Emergency Medicine at Northwestern University's Feinberg School of Medicine, and an Adjunct Lecturer of Health Enterprise Management at Kellogg.

15. Physical Resources:

Classes for this course will be held over two weekends at the Evanston and San Francisco campuses of the Kellogg School of Management of Northwestern University, which will provide all the necessary physical resources. (If required due to the pandemic, some or all classes might be held remotely.)

16. Bibliography and Library Statement:

The textbook for the course is P. Kongstvedt, *Essentials of Managed Health Care*, 6th ed., Jones & Bartlett Learning (2012). There are additional readings for each of the classes, which will be provided to our students who are registered for this course through the Canvas Learning Management System of the Kellogg School of Management, to which they will be given access before, during and after the course, as needed. If necessary, our students can draw on additional relevant material via the York University Libraries, as per the attached Library Statement.



MEMORANDUM Peter F. Bronfman Business Library

SUBJECT: Library Statement for EMBA 6285:

Value Creation and Capture in Healthcare

FROM: Kris Joseph

Business Librarian

DATE: January 11, 2022

EMBA 6285: Value Creation and Capture in Healthcare is offered as a 2-credit global elective for the Kellogg-Schulich EMBA program, with instruction provided by the Kellogg School of Management of Northwestern University.

1. Textbook Support

The course textbook is P. Kongstvedt's *Essentials of Managed Health Care*, 6th ed. (2012). YUL does not currently own a copy of this edition of the textbook, but the 1st through 4th editions are available in print from the Scott Library on the Keele Campus. This textbook is not available in electronic format from the publisher.

Existing copies of the textbook can be placed on reserve, shortening the loan period and increasing accessibility for students who do not purchase their own copy; this can be done by submitting a course reserve request using YUL's online system (http://reserves.library.yorku.ca/).

2. Additional Readings and Resources

All other readings noted in the course description are being provided by the instructor, who will post them on Canvas.

Books & eBooks

In addition to previous editions of the course textbook, students may rely on the York University Libraries' existing collection of books related to delivery of healthcare in the United States. Approximately a dozen of these titles are available online in electronic form. Registered students also have direct access to the complete collections of 15 other Ontario postsecondary libraries through our Collaborative Futures partnership, and these titles may be requested through the York library catalogue.

Articles, Data, and Statistics

Since EMBA 6285 does not require students to write term papers or conduct original research, and since the course is offered over an intensive three-week period, it is unlikely that students will require in-depth assistance or resources from the Libraries. However, interested students may take advantage of databases, data, and other materials offered through research guides such as:

- Health Studies and Global Health: https://researchguides.library.yorku.ca/health
- Business: https://researchguides.library.yorku.ca/business
- The Business Research at York Toolkit (BRYT): https://bryt.library.yorku.ca

3. Research Help & Consultation Support

Students will have access to research help and consultation services through the Bronfman Business Library. Drop-in research help services, which include telephone, email, instant messaging, and in-person help, are offered six days a week. Additionally, students can book an in-depth consultation with a business librarian. More information about these services can be found on this webpage: https://www.library.yorku.ca/web/bbl/ask-a-question/

Northwestern University

Kellogg School of Management

Value Creation and Capture in Healthcare HCAK-951-5 (0.5 Credit) Winter 2022 Griffin Myers, M.D., M.B.A., F.A.C.E.P.
griffin.myers@northwestern.edu
griffinrmyers@gmail.com
https://www.linkedin.com/in/griffin-myers/

Syllabus - Posted: 01062022

Students can find useful resources for safety and security, academic support, and mental and physical health and well-being on the NU help <u>website</u> and <u>app</u>.

Table of Contents

Course Introduction

Required Material

Course Overview

Course Procedures

Grading

Guests

Office Hours

Use of Devices in Class

Attendance

Class Schedule

Course Introduction

A. Required Material

a. Textbook: Kongstvedt, P. Essentials of Managed Health Care, 6th Ed., Jones & Bartlett Learning, 2012. N.B., This is a great text book. I realize that it is not short and this is a busy weekend with multiple courses. For the purposes of the course, it will be sufficient that you skim those readings, understanding the introductions and conclusions and focusing on the

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figures. This is a great way to get the most out of the time you put into this textbook.

That said, for those intending to build and/or extend a career in healthcare management, you should invest some time before, after, or during the course to engage with this material. Success in this field requires an attention to detail that is described in this text.

b. Articles: As noted below.

B. Course Overview

a. Overview

i. Value in healthcare is the quality and experience of the health outcome divided by the price. This course is a study of value creation and capture in U.S. healthcare delivery. As such, the focus of the course is on healthcare services and the provision of care to patients, primarily focusing on the American context but with applicability to global markets. We will not, beyond the occasional mention, be discussing ancillary industries or other inputs/products such as pharmaceuticals, durable medical equipment, or long-term care. Our objective is to understand how the healthcare system is organized (or not) and managed (or not) so that we can create and capture value through the delivery of care.

b. Organization

i. The course is organized into two parts: value creation and value capture. We will begin with an overview of the U.S. healthcare system to understand the underlying economics of the industry and the dynamics that exist in a complex market. From there we will explore the infrastructure and mechanics that drive the industry throughout the value chain. Much of this is strategic, though we will explore, in specific examples, the minutia to highlight opportunities for innovation in the market. The last section of the course will focus on value capture and new business models that are changing the landscape of care delivery.

c. Requirements

i. The course applies to the case situations some of the concepts and techniques learned in Competitive Strategy (Business 42001), thus that course is required. This course also places a strong emphasis on presentation and discussion skills. It will be important to explain your positions or arguments to each other and to try to argue for the implementation of your recommendations. Believe it or not, we will talk a bit about risk management and thus some familiarity with the techniques or concepts of option pricing may be helpful.

C. Course Procedures

a. This course is designed to be a time-consuming and challenging course. Unless you have the time to do 3-5 hours of reading per week, I strongly recommend not taking the course. For each week's reading assignment we will have an in-class quiz over the entirety of the week's required reading. This includes the first meeting. The quizzes will focus on the important concepts and implications of the reading, therefore memorization is unlikely to help; you must have read the material and thought about it to perform well on the quizzes.

D. Grading

- a. Grading will be based upon:
 - i. Final Exam (50%): The final examination will count for 50% of the final grade. The final examination will be an individual, take home exam. The final exam will be available after the final class session. It will be due by 11:59 PM CT on Friday, March 4, 2022. There will be no exceptions to this schedule for anyone.
 - ii. Individual case assignment (details posted on Canvas) (15%)
 - iii. Class Participation (35%): Class attendance is expected, and students are encouraged to contribute to class discussion. Participation is the key to a lively class. Class participation provides the opportunity to practice speaking and persuasive skills, as well as the ability to listen. Comments that are vague, repetitive, unrelated to the current topic, disrespectful of others, or without sufficient foundation will be evaluated negatively. What matters is the quality of one's contributions to the class discussion, not the number of times one speaks. It is my hope that all students in the course are judged to be outstanding contributors as below. The following are Guidelines for evaluating class participation:
 - Outstanding Contributor: Contributions in class reflect exceptional preparation. Ideas offered are always substantive, and provide one or more major insights as well as direction for the class. Challenges are well substantiated and persuasively presented. If this person were not a member of the class, the quality of

- Syllabus Posted: 01062022
- discussion would be diminished markedly. (Contribution at this level earns the full 50% of the 50% possible.)
- Good Contributor: Contributions in class reflect thorough preparation. Ideas offered are usually substantive, provide good insights, and sometimes direction for the class. Challenges are well substantiated and often persuasive. If this person were not a member of the class, the quality of discussion would be diminished. (Contribution at this level earns 45% of the pm 50% possible.)
- 3. Adequate Contributor: Contributions in class reflect satisfactory preparation. Ideas offered are sometimes substantive, provide generally useful insights but seldom offer a new direction for the discussion. Challenges are sometimes presented, fairly well substantiated, and are sometimes persuasive. If this person were not a member of the class, the quality of discussion would be diminished somewhat. (Contribution at this level earns 35% of the 50% possible.)
- 4. Non-Participant: This person says little or nothing in class. Hence, there is not an adequate basis for evaluation. If this person were not a member of the class, the quality of discussion would not be changed. (Contribution at this level earns 25% of the 50% possible.)
- 5. Unsatisfactory Contributor: Contributions in class reflect inadequate preparation. Ideas offered are seldom substantive, provide few if any insights, and never a constructive direction for the class. Integrative comments and effective challenges are absent. If this person were not a member of the class, valuable air-time would be saved. (Contribution at this level earns 0% of the 50% possible.)
- iv. Requests for regraded may be submitted and considered, however students should be aware that new grades based upon a regrading assessment may go up or down.
- v. Note: Students cannot take this course pass/fail.

E. Guests

a. It is my policy to invite guests with relevant expertise to class in occasional course meetings. This is subject to change.

F. Office Hours

a. I will do my best to accommodate requests for office hours, including virtual office hours. Please email me with at least 5 days notice. Please be flexible in meeting over the phone or via Skype/video call.

Syllabus - Posted: 01062022

G.Use of Devices in Class

a. While I welcome the use of technology to support learning, the mere presence of devices tends to negatively affect the quality of discussion. Please do your best to use devices to the benefit of the discussion and not for other priorities. If you are expecting a call, be sure your device is on silent. Better yet, reschedule the call. As a courtesy and out of respect for patient privacy, I can assure you that other healthcare professionals in the room who, like myself, may receive an urgent/emergent call from a patient, will do the same.

H. Attendance

a. Attendance in all sessions is expected. Given the nature of the participation grade, missing a session, especially in such a short course, is likely to materially negatively impact a student's grade.

Class Schedule

Schedule is given by week with required reading and cases as noted.

Schedule

| | Title | Day | Date | Time | Location |
|----|-----------------------------------------------|----------|-------------|------------|----------|
| 1a | Introduction to Value Creation in Health Care | Saturday | 15 Jan 2022 | 1:00 PM CT | Chicago |
| 1b | Economics of Care Delivery | Saturday | 15 Jan 2022 | 2:45 PM CT | Chicago |

| 2a | Introduction of Health Insurance and Managed Health Care & Network Contracting and Provider Payment | | | | |
|----|-----------------------------------------------------------------------------------------------------|----------|-------------|-------------|------------------|
| | | Tuesday | 25 Jan 2022 | 6:00 PM CT | Zoom |
| 2b | Management of Utilization and Quality & Sales, Finance, and Administration | | | | |
| | | Tuesday | 25 Jan 2022 | 7:45 PM CT | Zoom |
| 3a | Special Markets & Laws and Regulations | | | | |
| | | Tuesday | 8 Feb 2022 | 6:00 PM CT | Zoom |
| 3b | New Models of Value Creation | Tuesday | 8 Feb 2022 | 7:45 PM CT | Zoom |
| 4a | New Models of Value Creation (Continued) | Friday | 11 Feb 2022 | 1:00 PM PT | San Francisco |
| 4b | Introduction to Value Capture in Health Care | Friday | 11 Feb 2022 | 2:30 PM PT | San Francisco |
| 5a | Economics of Value-based Care Models | Saturday | 12 Feb 2022 | 9:00 AM PT | San Francisco |
| 5b | New Models for Value Capture | Saturday | 12 Feb 2022 | 10;45 AM PT | San Francisco |

Readings & Discussion Topics

| | Title | Readings | Discussion Topics |
|----|-----------------------------------------------------|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1a | Introduction to Value Creation in Health Care | - Course Syllabus | Course Introduction How to Be Successful in This Course & Later Objectives of a Healthcare System Value in Healthcare Healthcare Value Chain Aggregates Price Mechanisms & Market Failures |

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| 1b | Economics of Care Delivery | - Kongstvedt, Preface | - Prices & Costs - Employment (Provider Deep Dive) - Payers, Providers, and the Distinction - "Is health insurance?" - On Market Failures and the Affordable Care Act |
|----|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2a | Introduction of Health Insurance and Managed Health Care & Network Contracting and Provider Payment | - Kongstvedt, Part II - Kongstvedt, Part III - Kongstvedt, Part III, Chapters 7-8 | - History of Managed Care - Insurance Markets - Types of (Actuarial) Products - Governance & Management - Delegated Services - Fee-for-service: A Deep Dive - Variation - Utilization & Prices - Benefit Design - Demand Management - Utilization Management - Clinical Care - PICO Model - Disease Management - (Complex) Case Management - MLR |
| 2b | Management of Utilization and Quality & Sales. Finance, and Administration | - Kongstvedt, Part III, Chapters 9-15 - Kongstvedt, Part IV | - Principles of Working with or Managing Physicians - Provider Quality Measurement: Theory & Practice - Part D (Quickly) - Behavioral Health - Quality Improvement - Accreditation - Marketing & Sales (Retail & Consumer Trends) - Persistency - Claims 201: IBNR & Timing |
| 3a | Special Markets & Laws and Regulations | - Kongstvedt, Parts V & VI - Kongstvedt, Glossary - Mirror, Mirror 2017: International Comparison Reflects Flaws and Opportunities for Better U.S. Health Care (https://interactives.commonwealthfund.org/2017/july/mirror-mirror/) | Introduction to Medicare Advantage Medicare Advantage Bidding & Payments Risk Adjustment Global Managed Care Values & Healthcare "System" Design |

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| | | - Carroll, A. Frakt, A. The Best Health Care System in the World: Which One Would You Pick?, The New York Times, September 18, 2017 (https://www.nytimes.com/interactive/201 7/09/18/upshot/best-health-care-system-country-bracket.html) | |
|----|----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| 3b | New Models of Value Creation | - Gawande A. The Cost Conundrum. The New Yorker. June 1, 2009. (https://www.newyorker.com/magazine/2 009/06/01/the-cost-conundrum) - Gawande A. The Hot Spotters. The New Yorker. January 24, 2011. (https://www.newyorker.com/magazine/2 011/01/24/the-hot-spotters) - Schroeder, S. We can do betterimproving the health of the American people. New England Journal of Medicine, 2007;357:1221-8. (https://www.nejm.org/doi/full/10.1056/N EJMsa073350) | - A Framework for Value Creation - Service Innovation |
| 4a | New Models of Value Creation (Continued) | - Gawande A. Letting Go. The New Yorker. August 2, 2010. (https://www.newyorker.com/magazine/2 010/08/02/letting-go-2) - Gawande A. Big Med. The New Yorker. August 13, 2012. (https://www.newyorker.com/magazine/2 012/08/13/big-med) | Service IntegrationOperational EnhancementPerformanceIncentive Optimization |
| 4b | Introduction to Value Capture in Health Care | - Quinn, K. The 8 Basic Payment Methods in Health Care, Annals of Internal Medicine. 2015;163:300-306. (https://mfprac.com/web2019/07literature/ e/literature/Health_Costs/Payment_Quinn.pdf) | - Pricing & Value Capture - Histogram of Spend & Linear Model & Implications |

Syllabus - Posted: 01062022

Economics of 5a Value-based Care Models

- Medicare Payment Advisory Commission. Report to the Congress, 2020. See pages 365-402.
- (http://medpac.gov/docs/default-source/r eports/mar20 entirereport sec.pdf?sfvrs n=0)
- "Medicare Advantage Achieves Cost-Effective Care and Better Outcomes for Beneficiaries with Chronic Conditions Relative to Fee-for-Service Medicare," Avalere, July 2018. (https://img04.en25.com/Web/AvalereHe alth/%7B914072d2-41c3-4645-84e0-2ac 8f761be2e%7D BMA Report.pdf)
- Mandal AK, et al. "Value-Based Contracting Innovated Medicare Advantage Healthcare Delivery and Improved Survival," Am J manag Care, 2017;23(2).

(https://www.aimc.com/journals/issue/20 17/2017-vol23-n2/value-based-contracti ng-innovated-medicare-advantage-healt hcare-delivery-and-improved-survival)

- Huckfeldt PJ, "Less Intense Postacute Care. Better Outcomes For Enrollees In Medicare Advantage Than Those In Fee-For-Service," Health Affairs 36, no.1 (2017):91-100.

(https://www.ncbi.nlm.nih.gov/pmc/article s/PMC5521268/)

- Curto V, et al. "Healthcare spending and utilization in public and private Medicare," NBER 23090, January 2017. (https://www.nber.org/papers/w23090)

- Medicare Advantage as a Laboratory: FFS, PPO, HMO, Capitation
- Match Capture with Creation
- Bundles & IPUs
- Medicare for All: Solving for the Hospitals 123%
- Direct Contracting
- Principles of Value-based Care

5b Value Capture

- New Models for | Harvard Business School Case: Oak Street Health: A New Model of Primary
 - Porter, M. What is value in healthcare? New England Journal of Medicine, 23 December 2010.

(http://vbhcprize.com/wp-content/upload s/2014/03/Porter-What-is-value-in-health

- Case Discussion: Oak Street Health
- Covid-19
- Implications of Value-based Models
- Course Wrapup

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New Course Proposal: EMBA 6295 1.0 Understanding Healthcare's Global Marketplace

1. Program: Kellogg-Schulich Executive MBA

2. Course Number: EMBA 6295

3. Credit Value: 1.0

4. Long Course Title: Understanding Healthcare's Global Marketplace

5. Short Course Title: Healthcare's Global Marketplace

6. Effective Session: Winter 2022

7. Calendar (Short) Course Description:

This course complements other courses in healthcare by providing frameworks that will help participants effectively navigate the global healthcare marketplace, which requires that firms simultaneously assess the fundamental viability of business opportunities across a number of markets to determine whether the often large, fixed, and sunk investments in growth have the potential to generate sufficient returns.

8. Expanded Course Description:

Effectively navigating the global healthcare marketplace requires that firms simultaneously assess the fundamental viability of business opportunities across a number of markets. This can help to determine whether the often large, fixed, and sunk investments in growth have the potential to generate sufficient returns. This course is designed to address this growing need by enhancing existing coursework in Health Strategy and Health Economics by familiarizing participants with two key frameworks that will help them apply earlier coursework in new contexts: (i) the comparative health system framework which provides a structured analysis of any health care market globally and can be used for rich and developing countries independent of any particular political or regulatory context; and (ii) The Desirability, Feasibility, Viability (DFV) framework, which can be used to evaluate any new business, regardless of industry or geography. Given the unique attributes of the healthcare sector, the comparative health system framework is a critical input for the DFV framework when it is used in any healthcare context.

9. Course Learning Outcomes:

Students will acquire knowledge and skills related to:

- Applying framework to assess the structure and function of healthcare systems globally.
- Developing the judgement necessary to identify the elements of a healthcare system that define a marketplace for a product or service.
- Conducting a comprehensive assessment of a specific business opportunity for expansion from the US to a non-US market.
- Succinctly articulating a point of view in a brief written narrative or short persuasive presentation.

10. Rationale:



Healthcare companies often consider growth opportunities outside the country where the business was started. Unlike many industries that offer a global marketplace for one good or service produced in one country yet consumed in many, healthcare is a multidomestic marketplace. Countries have similar attributes across healthcare systems but offer discreet marketplaces that require a deep understanding of the local healthcare system and the product-to-market fit opportunity. While this is to some extent true with any product market, the vast differences in the very nature of commerce for healthcare (i.e., who is the customer, how are product decisions made, who can enter or exit the market, the intensely personal nature of the product and its interaction with cultural norms) makes it imperative that firms deeply understand how value is created and captured in each market. This course therefore allows students who have taken other electives in healthcare to extend their knowledge from the US healthcare system to other systems around the world.

11. Evaluation:

Assessment will be based on (i) class engagement (20%), consisting of active participation through questions, answers, and group activities; and (ii) an individual written narrative 1000-word executive summary (80%) of a market entry strategy for a Hospital at Home business to one of the following countries: Canada, Australia, Germany, Netherlands, Switzerland, or Brazil.

12. Integrated Courses:

NOT integrated

13. Crosslisted Courses:

NOT crosslisted

14. Faculty Resources:

This course will be offered annually as a global elective by our partner, the Kellogg School of Management of Northwestern University. It will be taught by Adjunct Lecturer of Health Enterprise Management <u>Kaveh Safa</u>vi, M.D., J.D., who is a senior managing director at Accenture responsible for leading, developing and driving a growth strategy for providers, health insurers, and public and private health systems across the globe. Before joining Accenture, Dr. Safavi. was chief medical officer of Thompson Reuters' health businesses, vice president of medical affairs at United Healthcare and had leadership roles at HealthSpring, Humana, and, most recently, Cisco. He has published numerous papers and is often quoted on healthcare issues in various media publications.

15. Physical Resources:

Classes for this course will be held during one weekend at the Evanston campus of the Kellogg School of Management of Northwestern University, which will provide all the necessary physical resources. (They will be held remotely, if necessary).

16. Bibliography and Library Statement:

All the relevant readings will be provided to our students participating in this course through the Canvas Learning Management System of the Kellogg School of Management, to which they will be given access before, during and after the course, as needed. If necessary, our students can access additional relevant material via the York University Libraries, as per the attached Library Statement.



MEMORANDUM Peter F. Bronfman Business Library

SUBJECT: Library Statement for EMBA 6295:

Understanding Healthcare's Global Marketplace

FROM: Kris Joseph

Business Librarian

DATE: January 11, 2022

EMBA 6295: Understanding Healthcare's Global Marketplace is offered as a 1-credit elective for the Kellogg-Schulich EMBA program, with instruction provided by the Kellogg School of Management of Northwestern University over one weekend.

1. Course Readings Support

All the readings outlined in the course syllabus will be supplied by the instructor through the Kellogg School of Management's Canvas system. If for any reason these resources are not accessible, however, most of the designated materials are available online through York University Library's existing journal subscriptions and book collections.

2. Additional Readings and Resources

Given the short timeline for the course, it is unlikely that students will be able to do indepth research for the Executive Summary Memo that serves as its major deliverable. It will be critical for students to be able to conduct rapid research on individual companies, industries, and international markets, making several of our existing research guides crucial:

- Company Research: https://researchguides.library.yorku.ca/companyresearch
- Industry Research: https://researchquides.library.yorku.ca/industryresearch
- Market Research: https://researchquides.library.vorku.ca/marketingresearch

All these guides emphasize sources for company and analyst reports that will make it easy for students to collect and synthesize information rapidly. These reports include information directly related to the *Desirability, Feasibility, Viability (DFV)* framework that forms the core of the course.

3. Research Help & Consultation Support

Students will have access to research help and consultation services through the Bronfman Business Library, and these services are available at generous hours during the weekend. More generally, drop-in research help services, which include telephone, email, instant messaging, and in-person help, are offered six days a week. More information about these services can be found on this webpage: https://www.library.yorku.ca/web/bbl/ask-a-question/

Understanding Healthcare's Global Marketplace

HCAK-928-5

Winter 2022 Friday, January 14: 9am – 1pm Saturday, January: 9 am – 12pm

Instructor Kaveh Safavi MD JD Phone (847) 702-4010 (m)

E-mail kaveh.safavi@kellogg.northwestern.edu (preferred)

LinkedIn kavehsafavi

Office Hours By appointment available by phone and Zoom

COURSE DESCRIPTION

Healthcare companies often consider growth opportunities outside the country where the business was started. Unlike many industries that offer a global marketplace for one good or service produced in one country yet consumed in many; healthcare is a multidomestic marketplace. Countries have similar attributes across healthcare systems but offer discreet marketplaces that require a deep understanding of the local healthcare system and the product-to-market fit opportunity. While this is to some extent true with any product market, the vast differences in the very nature of commerce for healthcare (i.e., who is the customer, how are product decisions made, who can enter or exit the market, the intensely personal nature of the product and its interaction with cultural norms) makes it imperative that firms deeply understand how value is created and captured in each market.

That said, effectively navigating the global healthcare marketplace requires that firms simultaneously assess the fundamental viability of business opportunities across a number of markets. This can help to determine whether the often large, fixed, and sunk investments in growth have the potential to generate sufficient returns.

This class is designed to address this growing need by enhancing your existing coursework in Health Strategy and Health Economics by adding the following skills:

- A framework to assess the structure and function of healthcare systems globally.
- The judgement necessary to identify the elements of a healthcare system that define a marketplace for a product or service; and

- The ability to conduct a comprehensive assessment of a specific business opportunity for expansion from the US to a non-US market using a new business evaluation framework.
- The ability to succinctly articulate a point of view in a brief written narrative or short persuasive presentation

You will be exposed to two key frameworks that will help you apply earlier coursework in new contexts. These include:

- The comparative health system framework which provides a structured analysis of any health care market globally. This framework can be used for rich and developing countries independent of any particular political or regulatory context.
- The Desirability, Feasibility, Viability (DFV) framework used to evaluate any new business, regardless of industry or geography. DFV has been used by businesses to evaluate new product market opportunities across many sectors beyond healthcare. Given the unique attributes of the healthcare sector, the comparative health system framework is a critical input for the DFV framework when it is used in any healthcare context.

Work product will focus on a succinct and thoughtful executive summary memorandum and brief persuasive oral presentations like what would be expected for an investment committee exercise.

Course material, announcements and readings will all be available on Canvas

COURSE REQUIREMENT

Written Executive Summary Memo of Market entry strategy (80%)

For your class assignment you will each be asked to pick from one of the following countries: Canada, Australia, Germany, Netherlands, Switzerland, or Brazil and prepare a written narrative executive summary (1000 words max) of your market entry strategy for a Hospital at Home business.

Grading Rubric for final written assignment: (20 pts possible)

Analysis: does the paper reflect creativity and insight? (5 pts. max)

Evidence: Is the conclusion backed by well-chosen evidence? (5 pts. max) Structure: Is the paper logically coherent and persuasive? (5 pts. max)

Style: Is the paper professional in style, grammar, spelling, punctuation, and on time? (5 pts.

max)

Class Engagement (20%)

Students will be expected to participate actively through your questions, answers, and group activities. Students may be called on at random to apply concepts acquired through class discussion or outside reading. Emphasis will be placed on quality of the contribution rather than quantity of participation

COURSE SCHEDULE

Day 1 – The Comparative Health System and DFV Frameworks

The comparative health system framework is a tool for understanding a countries health system. The framework offers a set of questions about the organization of core elements of the health care system, including Public Sector Structure, Private Sector Stewardship, Financing Models (risk pooling, sources of capital, etc.), Service Provision for Types of Service (essential, discretionary, support service, social service etc.), Innovation (IP, R&D, technology diffusion, risk/benefit policy etc.), Client Focus (role of customer and competition etc.), and Leadership and Ethics (role of licensure, view on skills/employment, etc.). This framework provides a structure for comparing the US to a non-US market as part of a geographic market expansion strategy for a US based healthcare services business.

You will also be exposed to DFV framework is adapted from Roger Martin's *The Design of Business, 2009 HBR press.* It has three main criteria for evaluation of new business ideas and new market entry:

- Desirability askes "do customers want it" and speaks to the demand side of the equation. For healthcare that includes understanding how citizens perceive the quality and access of healthcare services.
- **2. Feasibility** speaks to "can it be built" and wide-ranging factors from do we have the scientific and technological capabilities to is the organizations governance, talent base or capital structure correct for this endeavor.
- **3. Viability** speaks to "is this economically sustainable" and are there customers who can and could pay enough to make the business possible. Are there other sources of money or partnership models that could make the business endure?

This framework is well suited for making early decisions to narrow the funnel of many possible ideas into a few ideas. It can also be used by a business to evaluate market opportunities for taking an existing business into an entirely new market where the offering may need to be tailored to the new market as well as the business model and routes to market.

The goal of this week will be to prepare you to take a country and study the health system through the lens of the comparative framework and then identify the salient factors that may

influence the product-to-market fit for geographic expansion using a DFV approach. You will be given an opportunity to select from five non-US countries to apply the framework to expansion of a Hospital at Home business for the written assignment at the conclusion of day 2.

Group Exercises:

Students will participate in 2 group exercises during this class:

The first will be to apply the comparative framework to a non-US company to determine how to best position a business for market entry across the dimensions of access, affordability, or effectiveness

The second will be to identify critical elements of health system for business expansion

Day 2 – Culture Maps and Market Expansion of Hospital at Home Business

Understanding of how citizens perceive the quality and access of healthcare services is critically important for understanding a countries health system. Equally important is understanding intercultural norms that impact business dealings. This week we will examine factors that impact citizens expectations of their healthcare system. We will also consider Erin Meyer's Culture Map as part of the consideration for applying a DFV framework to a market entry strategy.

The students will learn about a business developed for the US market with the question of how to expand to a new market outside the US. The class will offer a detailed understanding of the Hospital at Home business and how the US market has reacted to the business as well as what business model adaptations have needed to take place in the US. We will also explore how some other countries have incorporated the Hospital at Home service concept. These examples will show how the clients, business models and route to markets all vary for the same clinical service innovation depending on the health system of that country

Group Exercise:

There will be one exercise where you will be asked to propose a market entry strategy for hospital at home business developed for the United States into the United Kingdom.

Readings:

Health Systems in the Developing world: Kevin Schulman, Muhammad Pate, Gary Carbell HBS teaching note

https://hbsp.harvard.edu/product/316112-PDF-ENG?Ntt=&itemFindingMethod=Search

How Health Insurance Design Affects Access to Care and Costs, by Income, in Eleven Countries; *Health Affairs*; December 2010 https://doi.org/10.1377/hlthaff.2010.0862

Getting the Price Right: How Some Countries Control Spending in a Fee-for-Service System. *Health Affairs*; November 2020

https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2019.01804

Health Care Prices as Signals

Health Service Research; December 2021

https://onlinelibrary.wiley.com/doi/epdf/10.1111/1475-6773.13878

International comparison of US vs other rich country citizens around satisfaction with access and cost sharing: <u>Understanding What Makes Americans Dissatisfied with Their Health Care System: An International Comparison</u>

https://www.healthaffairs.org/doi/10.1377/hlthaff.2015.0978

Navigating the Cultural Minefield, Erin Meyer HBR May 2014

https://hbr.org/2014/05/navigating-the-cultural-minefield

Why the EU's Covid Vaccination Programme Went Wrong, The Economist, April 3rd, 2021 https://www.economist.com/briefing/2021/03/31/why-the-eus-covid-19-vaccination-programme-went-wrong

Design Thinking: How Thinking Like a Designer Can Create a Sustainable Advantage. Chapter 3 from Roger Martin, The Design of Business, Roger Martin, Harvard Business School Press November 2009 https://hbsp.harvard.edu/product/5497BC-PDF-ENG?itemFindingMethod=Other

Waste in the US Health Care System: *Estimated Costs and Potential for Savings;* JAMA. 29019: 322(15):1301-1509. Shrank et.al.

https://jamanetwork.com/journals/jama/fullarticle/2752664

Hospital-Level Care at Home for Acutely III Adults, Levine, DM et.al., *Annals of Internal Medicine*, January 21, 2020.

https://www.acpjournals.org/doi/10.7326/M19-0600

New Course Proposal: EMBA 6325 2.0 Value Creation and Capture in Biopharmaceuticals

1. Program: Kellogg-Schulich Executive MBA

2. Course Number: EMBA 6325

3. Credit Value: 2.0

4. Long Course Title: Value Creation and Capture in Biopharmaceuticals

5. Short Course Title: Value Creation in Biopharmaceuticals

6. Effective Session: Winter 2022

7. Calendar (Short) Course Description:

This course aims to provide a framework for combining the tools students have learned in other areas and applying them to the world of biopharmaceuticals. Success in biopharmaceuticals requires combining elements of science, economics, finance, and strategy into a cohesive plan, with the exact combination of these assets differing across firms based on their stage of the value chain.

8. Expanded Course Description:

While the biopharmaceutical sector has many unique features, the fundamental question for strategy in this sector remains that same as for all others: "How can a firm earn long-run profits?" Learning how to answer this question will be the primary aim of this course. Success in biopharmaceuticals requires combining elements of science, economics, finance, and strategy into a cohesive plan. The exact combination of these assets will differ across firms based on their stage of the value chain – but certain fundamental facts remain important for all players in the industry. This is a distinctly "big picture" course. The goal is to provide a framework for combining the tools students have learned in other areas and applying them to the world of biopharmaceuticals. To be successful in this course, students must spend time actively thinking about the issues. There is no module to download, no formula to memorize, and no answer to find in the book. This course is about building reasoning skills.

9. Course Learning Outcomes:

Students will acquire knowledge and skills related to:

- Understanding how success in biopharmaceuticals requires combining elements and work with actors from science, economics, finance, and strategy.
- Applying select tools from previous courses to create value for humanity through biopharmaceuticals and capture part of it.
- Building analytical and critical thinking abilities by considering and integrating a large number of different perspectives.

10. Rationale:

The healthcare sector represents a unique part of the economy where firms have the ability to create massive value for all of humanity and capture a portion of the value as profits for



themselves and their investors. This is perhaps most true in the area of biopharmaceuticals where private firms work in concert with a variety of different actors to develop new medications and treatments that both cure and manage diseases that have responsible for untold death and suffering. As the pace of science has progressed, we are now able to address a variety of conditions that heretofore have plagued humankind. This course should be of interest to those of our students who are working or want to pursue a career in healthcare or adjacent sectors. It is part of the "Healthcare Deep Dive" and has to be taken in conjunction with EMBA 6620 3.0 Healthcare Strategy.

11. Evaluation:

Assessment will be based on (i) class participation (15%), with a focus on the relevance and quality of contributions; (ii) two individual case assignments (30% and 15%); and (iii) two group assignments, based on the analysis of investment decisions (20% each).

12. Integrated Courses:

NOT integrated

13. Crosslisted Courses:

NOT crosslisted

14. Faculty Resources:

This course will be offered annually as a global elective by our partner, the Kellogg School of Management of Northwestern University. It will be taught by <u>Craig Garthwaite</u>, who is s the Herman R. Smith Research Professor in Hospital and Health Services, a Professor of Strategy, and the Director of the Program on Healthcare at Kellogg. He is an applied economist whose research examines the business of healthcare with a focus on the interaction between private firms and public policies. He holds a B.A. and a Masters in Public Policy from the University of Michigan and a PhD in Economics from the University of Maryland, and publishes widely in academic and popular outlets. The course is taught jointly with <u>Adam M. Koppel</u>, who is Managing Director of Bain Capital Life Sciences and also Adjunct Lecturer of Health Enterprise Management at Kellogg. He holds an AB and AM in History and Science from Harvard University, an MD and PhD in Neuroscience from the University of Pennsylvania School of Medicine, and an MBA from Wharton School, and previously worked at McKinsey and Biogen.

15. Physical Resources:

Classes for this course will be taught in a blended format, with the first part held over two virtual Zoom sessions and the second part in-person during a class weekend at the San Francisco campus of the Kellogg School of Management of Northwestern University, which will provide all the necessary physical resources.

16. Bibliography and Library Statement:

The main readings for the course, including the case studies, will be contained in a course pack that registered students will be able to download. Participants can access additional mandatory readings, mainly from the popular press, from the Canvas Learning Management System of the Kellogg School of Management, to which our students will be given access before, during and after the course, as needed. If necessary, our students can draw on further relevant material via the York University Libraries, as per the attached Library Statement.



MEMORANDUM Peter F. Bronfman Business Library

SUBJECT: Library Statement for EMBA 6325:

Value Creation and Capture in Biopharmaceuticals

FROM: Kris Joseph

Business Librarian

DATE: January 11, 2022

EMBA 6325: Value Creation and Capture in Biopharmaceuticals is offered as a 2-credit global elective for the Kellogg-Schulich EMBA program, with instruction provided by the Kellogg School of Management of Northwestern University.

1. Course Readings Support

Students in this course will be using case studies as their primary source for readings and discussion and will be required to purchase materials through the following link: https://www.study.net/kellogg/.

Additional readings will be provided through Kellogg School of Management's Canvas system, but in the event these readings are inaccessible, almost all material will be available from popular press sources. Paywalled or subscription-based materials are available through York University Library's wide-ranging newspaper and periodical subscriptions, including comprehensive press and media databases like *Factiva*.

2. Additional Resources

Most materials required for analysis will be provided as course material, but assignments for the class may be supported by more in-depth research on the companies examined in the course: Gilead, Atea, and Vertex Pharmaceuticals. All three companies are publicly traded and have extensive documentation available in the form of company filings, financials, shareholder reports, and analyst reports. Sources for these materials are readily accessible through our Company Research guide (https://researchguides.library.yorku.ca/companyresearch), with the library's subscriptions to Mergent Online, Mergent Investext, Lexis Securities Mosaic, and Marketline Advantage likely proving to be of the most value.

Additional databases, data, and other materials may be located with resources in the following subject guides:

- Health Studies and Global Health: https://researchguides.library.yorku.ca/health
- Business: https://researchquides.library.vorku.ca/business
- The Business Research at York Toolkit (BRYT): https://bryt.library.yorku.ca

3. Research Help & Consultation Support

Students will have access to research help and consultation services through the Bronfman Business Library. Drop-in research help services, which include telephone, email, instant messaging, and in-person help, are offered six days a week. Additionally,

students can book an in-depth consultation with a business librarian. More information about these services can be found on this webpage: https://www.library.yorku.ca/web/bbl/ask-a-question/



HCAK-960-5 Value Creation and Capture in Biopharmaceuticals Winter 2022

Professor
Craig Garthwaite
4231 Global Hub
(847) 491-2509
c-garthwaite@kellogg.northwestern.edu

Professor Adam Koppel akoppel@baincapital.com

Course overview and objectives

The healthcare sector represents a unique part of the economy where firms have the ability to create massive value for all of humanity and capture a portion of the value as profits for themselves and their investors. This is perhaps most true in the area of biopharmaceuticals where private firms work in concert with a variety of different actors to develop new medications and treatments that both cure and manage diseases that have responsible for untold death and suffering. As the pace of science has progressed, we are now able to address a variety of conditions that heretofore have plagued humankind.

While the biopharmaceutical sector has many unique features, the fundamental question for strategy in this sector remains that same as for all others: "How can a firm earn long-run profits?" Learning how to answer this question will be the primary aim of this course. A glib answer would to "develop products that work and sell them for more than it took to make them." This is true, but provides little useful guidance for managers in this sector.

Success in biopharmaceuticals requires combining elements of science, economics, finance and strategy into a cohesive plan. The exact combination of these assets will differ across firms based on their stage of the value chain – but certain fundamental facts remain important for all players in the industry.

This is a distinctly "big picture" course. The goal is not to equip you with a lot of very specific analytical tools or institutional details. You have already developed many of these tools and learned these details in other courses. Instead, our aim is to provide a framework for combining together the tools you have learned in other areas and applying them to the world of biopharmaceuticals.

To be successful in this course, you must spend time actively thinking about the issues. There is no module to download, no formula to memorize, and no answer to find in the book. This course is about building your reasoning skills. Not preparing for class or expecting to passively absorb the material will do you about as much good as watching an exercise class. That said, this course will use and build on tools developed in your finance and strategy classes. If you don't feel comfortable with those tools, this may not be the time for you to take this course.

Course Meeting Dates and Format

This course is being taught across all of Kellogg's degree granting MBA platforms. The room will include students from our 1Y, 2Y, MMM, MBAi, EWP, and EMBA programs. This is an intentional decision to maximize the number of perspectives in the room and best replicate the types of cross functional teams (in terms of seniority and skillset) that you will work with in the biopharmaceutical sector.

The course will still be taught in a traditional Kellogg format that combines lectures, case studies and discussions. The number of students in the room reflects the wealth of different experiences that we believe will support robust classroom discussions.

To facilitate this unique combination of students, this course will have a combination of synchronous virtual courses and in-person sessions. These virtual sessions will operate in the same general format as an in-person course where students are expected to be prepared and actively engage in the case discussions and lectures. To facilitate this, the **online sessions will employ large amounts of cold calling.** We will also take advantage of various advantages an online format has over in-person learning – in particular the use of **breakout rooms to facilitate collaboration** and the inclusion of **various industry experts as guest speakers.**

The course schedule is detailed below. **Please note that the in-person sessions will be held on a single weekend in San Francisco.** Students are responsible for arranging for transportation to these courses and for housing expenses – though Kellogg will arrange for a block of rooms at a hotel. This is part of Kellogg's "Healthcare Deep Dive" program where the course will be paired with various networking events and panels with alumni and

industry leaders in the Bay Area. **As part of this course, you are expected to attend that other events of the Deep Dive.**

Course Scheduling and Format

| Course Session Date and Time | | Location |
|------------------------------|------------------------------------------------|-------------------|
| Virtual Session #1 | ession #1 Tuesday, January 18, 2022, 6-9pm CDT | |
| Virtual Session #2 | Tuesday, February 1, 2022, 6-9pm CDT | Zoom |
| In-person #1 | Friday, February 11, 2022, 9am-12pm PT | San Francisco, CA |
| In-person #2 | Saturday, February 12, 2022 1pm-5pm PT | San Francisco, CA |
| In-person #3 | Saturday, February 13, 2022 9am-12pm PT | San Francisco, CA |

Teaching approach

Because the aim of the course is to build your own critical and analytical thinking abilities, you will spend much of your time preparing for and engaging in class discussion.

Many of our discussions will be based on business cases – both large and small. These cases are intended to provide concrete examples from the world of business the illustrate how firms are grappling with the concepts that we present in this course.

Cases tend not to have a single, tidy solution. However, there are always better and worse answers, and valid and invalid inferences. Cases *never* contain all the information you would like to have to make a decision—in this way, they are very much like real life. You may find it frustrating to be pushed to make a decision or take a stand when you are not sure whether it is the right one; this is the nature of real-world business decision-making.

Cases also often offer conflicting information. They will require you to make judgment calls. This kind of ambiguity is also a feature of real-world business decisions. **These calls will often require to combine the tools you have learned in your finance classes with the frameworks and concepts you learned in your strategy classes**. Together, these concepts will help guide you to a profit maximizing decision.

Preparation

Preparing for a case discussion means more than just reading the case. Each case assignment will include several preparation questions. I suggest reviewing these questions before reading the case.

There is no explicit preparation task to do as you read the conceptual readings from the textbook or articles, but it is a good idea always to be asking yourself, "Do I believe this argument? Where else does it apply? When would this approach not be useful?"

If for some reason you are not prepared for class, I expect you to let me know before class. I know that you are juggling work, other classes and other commitments; you don't need to give me an explanation. However, if you haven't told me otherwise, then you have implicitly committed to be ready to contribute to the class if I should call on you.

Readings

A course packet, which includes the cases on the syllabus, is required. This course packet is available from the following link: https://www.study.net/kellogg/.

In addition to the study.net course packet, this course also relies on a large number of readings from the popular press that are mandatory. These readings are available in on the Canvas website.

Additional Course Materials

The following materials will be posted on the course's Canvas website.

- **Course announcements:** We will use the Canvas site to post course-related announcements and reminders. As a result, you should check the site regularly. If there is something critical to which we need to draw your attention, we will also email you.
- **Assignments:** The website will contain the group case assignments, the individual case assignments, and the preparation questions for each case.
- **Slides and handouts from class:** Anything we hand out in class will be posted on Canvas. If you miss something or lose something, you can find it there. These will also be posted to the "Modules" section of Canvas.

Assignments and Assessment

Group Assignments (40%)

You have been assigned to a study group for you group assignments in this class. Together with this group you will be preparing investment recommendations regarding two biopharmaceutical firms.

The first of these analyses is a market analysis of Vertex Pharmaceuticals in 2010. **This** analysis is due before the second class session on February 2, 2022. Materials for this

assignment can be found on the Canvas website. You will be asked to write a 2-3 page single spaced memo detailing your analysis of the investment decision. Exhibits and figures are not part of the page count for this assignment. This assignment accounts for 20 percent of your final grade.

You second group assignment will be due before class on February 12, 2022. As a group you will be completing an evaluation of Atea pharmaceuticals – an early-stage firm looking to develop a small molecule treatment for Covid-19. Your assignment will consist of a 2-3 page investment committee memo and Powerpoint deck detailing your recommendation. In class on February 12, you will be paired with another group and you must deliver your investment pitch. Your presentation should take approximately 20 minutes. The other group you are paired with will then have 10 minutes to ask questions about your deck (we will randomly assign groups to these two roles). The memo and Powerpoint deck are worth 20 percent of your final grade.

Individual Assignments (45%)

This course has two primary individual assignments that will be used for evaluation.

The first assignment is a case analysis of the Gilead case. **This case assignment is due before the start class on February 12, 2022.** You will be asked to analyze Gilead's purchase of Immunomedics. As part of this assignment, you will be asked to compare and contrast this acquisition with previous acquisitions by Gilead. You will also be asked to compare this purchase to other potential strategic options that the firm could have pursued. This assignment accounts for 30 percent of your final grade.

The second assignment is a shorter case analysis of the Celgene case. This should be a 1-2 page writeup and detailed case questions are available via Canvas. This assignment is also due before class on February 12, 2022. This is worth 15 percent of your final grade.

Participation (15%)

The class participation grade provides you with an *added* incentive to prepare for class—the value of your own learning should be the primary incentive. Case discussions work well as learning tools when everyone participates.

Your participation will be graded on quality, not volume. You should provide insights, observations, inferences, or conclusions that not only express your viewpoint, but *also* defend your analysis. Your comment should be relevant to the topic at hand, and should advance the discussion. A simple opinion or viewpoint is not very valuable without any justification. I value comments that respond to, elaborate on, lend support to, contradict, or correct a comment by one of your classmates. Counter-productive comments include

opinions without a justifying argument, pure repetition of previous point, and rambling, vacuous or disparaging comments.

Discussion constitutes a large portion of our class time; you will have ample opportunity to participate. **We will cold call in class,** both to give you an incentive to prepare for class, and to make sure the class discussion does not collapse to a handful of students.

In order to assist in preparation for discussion, for each session I will post some preparation questions. These are posted to the "Assignments" section of the Canvas website. The purpose of these questions is to prepare you for the material we will cover in class. At a minimum, everyone in class should be prepared to answer all of the discussion questions handed out in advance.

Contact Information

Professor Garthwaite is the corresponding instructor for this course, i.e. the individual who can be most easily reached about questions related to the course. You can reach him by email at c-garthwaite@kellogg.northwestern.edu. He is also available for online appointments. You can use Outlook's scheduling assistant to check his calendar. If you want to meet with him to discuss course material, check his calendar for availability, use the "Meeting Request" feature to propose a 15-minute meeting, and wait for him to respond. Note that this feature is also available through Outlook Web Access. If he cannot accommodate your requested time, he will propose a new one. Please email him with other questions. By far, the most effective way to reach Professor Garthwaite is by email.

Classroom Etiquette

Students are expected to respect Kellogg's Code of Student Etiquette at all times. Students who are attending class in person are expected to strictly follow the socially distanced learning guidelines that have been distributed by the school. **Masks must be worn at all times in this course.** If students are not wearing their masks appropriately, we will leave the class for five minutes.

In addition, please carefully review the course document on hybrid classroom norms that is available via the Canvas website.

Academic Integrity

Students are expected to respect Kellogg's Honor Code at all times. The first point of the Kellogg Honor Code is "not to seek an unfair advantage over other students, including but not limited to giving or receiving unauthorized aid during completion of academic requirements." The consequences of cheating can be failing an assignment or the course, or suspension or dismissal from the university.

Assignments

Written case assignments are expected to be the efforts solely of the individual or group turning them in. For individual assignments, you may use discussion with classmates to brainstorm issues, evaluate alternative approaches, and consider the merits of recommendations. Use your own judgment to identify the important issues, to construct arguments and to develop correct conclusions. The same rules apply to groups for group case assignments. The group should not consult the Internet, friends at other business schools, or people who have taken the course already.

Plagiarism

The members of any academic community are expected not to present as their own ideas or material from other sources. Northwestern's academic integrity guidelines state: "A conscientious writer always distinguishes clearly between what has been learned from others and what he or she is personally contributing to the reader's understanding." See http://www.northwestern.edu/uacc/plagiar.html for more information.

If you use text that is **exactly, mostly, or even partially someone else's words**, it needs to be attributed to that source and the quoted portion needs to be in quotation marks. If you use text that is **paraphrased** from another source, it needs to be attributed. This applies even if it something you yourself wrote that was handed in as an assignment or published elsewhere.

We **strongly** recommend against the practice of cutting and pasting from a source into a "working document" that will eventually become the final document handed in, unless you insert the appropriate quotation marks and citations at the same time. This is especially true for group assignments where another group member may not realize that something you put into the document needs a citation.

In the context of this course, it is acceptable to refer to concepts, frameworks, and analytical tools from the readings or class lectures without citation. You may also *refer* to the material in cases without citations. However, do not quote or paraphrase analysis from another source and present it as your own. All written assignments **will be cross-referenced against existing published work.** No credit will be given for any assignment in which there is any evidence of plagiarism.

Instances of plagiarism will be reported to the honor code committee.

Unauthorized Recordings

Class sessions will be recorded in Zoom and made available to class participants. Unauthorized student recording of classroom or other academic activities (including advising sessions or office hours) is prohibited. Unauthorized recording is unethical and may also be a violation of University policy and state law. Students requesting the use of assistive technology as an accommodation should contact Accessible NU. Unauthorized use of

classroom recordings – including distributing or posting them – is also prohibited. Under the University's Copyright Policy, faculty own the copyright to instructional materials – including those resources created specifically for the purposes of instruction, such as syllabi, lectures and lecture notes, and presentations. Students cannot copy, reproduce, display, or distribute these materials. **Students who engage in unauthorized recording, unauthorized use of a recording, or unauthorized distribution of instructional materials will be referred to the appropriate University office for follow-up.**

Schedule of Course Readings

Tuesday, January 18, 2022 - 6-9pm CT [ZOOM]

<u>Guest Speaker:</u> Geoff Porges, Director of Therapeutics Research, Diversified Biopharma, SVB Leerlink

Pricing and Competition in Biopharmaceuticals

- C. Johnson and B. Dennis, "How an \$84,000 drug got its price: 'Let's hold our position ... whatever the headlines'," *Washington Post*, December 1, 2015
- "New Pricing Marks Potential HCV Treatment Landscape Revolution," *Healio*, Jan 1, 2018.
- J. Aleccia, B. Feder Ostrov and D. Gordon Blankinship, "Pharma Sells States On 'Netflix Model' To Wipe Out Hep C. But At What Price?," *Kaiser Health News*, Oct 25, 2019
- C. Rowland, "There's a lot of screaming into the void': Toddler's parents battle for coverage of \$2.1 million gene therapy," *Washington Post*, July 10, 2019.
- C. Rowland, "High fives and sobs greet UnitedHealthcare's reversal of denials for gene therapy," *Washington Post*, July 18, 2019.

Biogen and Aduhelm

- P. Belluck and R. Robbins, "F.D.A. Approves Alzheimer's Drug Despite Fierce Debate Over Whether It Works," *New York Times*, June 7, 2021.
- L. *Cooper*, "Eli Lilly to Seek FDA Approval for Alzheimer's Drug," *Wall Street Journal*, Jun 24, 2021.

Tuesday, February 1, 2022 - 6-9pm CT [ZOOM]

Guest Speaker: Ian Smith, former CFO, Vertex Pharmaceuticals

VERTEX GROUP CASE DUE BEFORE CLASS

• VALUING A PIPELINE: VERTEX PHARMACEUTICALS (Available via Canvas)

Multiple Sclerosis Mini-Case

- B. Koskie, "Multiple Sclerosis: Facts, Statistics, and You," *Healthline*.
- K. Blankenship, "Does competition equal lower prices? MS drugs defied cost logic as challengers swarmed in," *Fierce Pharma*, Aug 29, 2019
- Weintraub, "FDA greenlights generics of Novartis' \$3B MS star Gilenya amid legal fight,"
 Fierce Pharma, Dec 6, 2019
- Liu, "J&J nabs FDA nod for Ponvory, joining Novartis, Bristol Myers in crowded MS market," *FiercePharma*, March 19, 2021.
- Liu, "Sanofi/Principia Biopharma," Fierce Pharma, Jan 19, 2021.

Structure of the Pharmaceutical Industry

- J. Rockoff, "Big Pharma, Short on Blockbusters, Outsources the Science," *Wall Street Journal*
- C. Grant, "What Is Ailing the Drug Industry?," Wall Street Journal, June 22, 2018
- J. Strassburg and S. Woo, "Oxford Developed Covid Vaccine, Then Scholars Clashed Over Money," *Wall Street Journal*, Oct. 21, 2020
- J. Hopkins, "Pfizer Goes It Alone to Expand Vaccine Business Beyond Covid-19 Pandemic," Wall Street Journal, March 23, 2021

Cerevel Mini-Case

- C. Kellaher, "Pfizer, Bain Capital Create Company Focused on Nervous System Diseases," Wall Street Journal, October 23, 2018
- D. Garde, "A startup spun out of Pfizer just got \$103 million to develop experimental drugs Big Pharma won't," *STATNews*, Sept. 25, 2017
- J. Mast and M. Gelman, "Adding \$445M, Tony Coles and his big Pfizer neuro spinout hitch a ride to Wall Street on Perceptive's SPAC," *Endpoints*, July 30, 2020.

Friday, February 11, 2022 - 9:00am - 12:00pm PT [IN PERSON IN SAN FRANCISCO]

Guest Speaker: Liz Bhatt, Chief Business & Strategy Officer at Applied Molecular Transport and former COO Achaogen

Clinical Trial Strategy

- "Bristol-Myers Squibb Announces Top-Line Results from CheckMate -026, a Phase 3 Study of Opdivo (nivolumab) in Treatment-Naïve Patients with Advanced Non-Small Cell Lung Cancer," BMS Press Release
- "Pembrolizumab versus Chemotherapy for PD-L1–Positive Non–Small-Cell Lung Cancer," New England Journal of Medicine, Nov 10, 2016.

Background Reading on Clinical Trials

- A MANAGERIAL PERSPECTIVE ON CLINICAL TRIALS (709033-PDF-ENG)
 - This document is intended to provide you with some broad background on clinical trials from a strategic perspective. We won't be discussing it directly, but it should help with you discussion of clinical trials overall.

Antibiotics Mini-Case

- Jacobs, "Crisis Looms in Antibiotics as Drug Makers Go Bankrupt," New York Times, December 25, 2019
- D. Roland, "Antibiotic Makers Struggle, Hurting War on Superbugs," Jan 5, 2020.
- M. Perros, "Wanted: better policies and incentives to revitalize R&D for new antimicrobial drugs," *STAT News*, October 15, 2019.

Deal Structure

- CELGENE: BUSINESS DEVELOPMENT AND DISTRIBUTED RESEARCH (620014-PDF-ENG).
- A. Feuerstein, "Agios sells cancer business to French drug maker for up to \$2 billion, will now focus on inherited diseases," *STATNews*, December 21, 2020.

Saturday, February 12, 2022 - 1:00pm - 5:00pm PT [IN PERSON IN SAN FRANCISCO]

Guest Speaker: John Milligan, former President and CEO, Gilead Sciences, Inc.

GILEAD INDIVIDUAL CASE DUE BEFORE CLASS

Case: Gilead (TO BE WRITTEN, ALMOST DONE)
Case: Atea (TO BE WRITTEN, JUST STARTED)

Sunday, February 13, 2022 - 9:00am - 12:00pm PT [IN PERSON IN SAN FRANCISCO]

Case: CELGENE, 218094-PDF-ENG

Revisiting Atea

- N. Taylor, "Roche to pay Atea \$350M for ex-U.S. rights to COVID-19 antiviral," *FierceBiotech*, October 22, 2020
- "Atea Pharmaceuticals Provides Update and Topline Results for Phase 2 MOONSONG Trial Evaluating AT-527 in the Outpatient Setting," October 19, 2021.
- "Merck and Ridgeback's Investigational Oral Antiviral Molnupiravir Reduced the Risk of Hospitalization or Death by Approximately 50 Percent Compared to Placebo for Patients with Mild or Moderate COVID-19 in Positive Interim Analysis of Phase 3 Study," October 1, 2021.

Platform Valuation

- J. Bell, "Moderna founder's next big play in RNA raises \$440 million," *Bio Pharma Dive,* Aug 30, 2021



FACULTY COUNCIL SCHULICH SCHOOL OF BUSINESS MINUTES OF MEETING

A regular meeting of the Schulich Faculty Council for the 2021-2022 academic year was held on Friday December 10th 2021 at 10:30am via Zoom.

In Attendance:

Chair: C. Graham Vice-Chair: L. Zhu Secretary: E. Rush Assistant: L. Da Silva

Voting Members of Faculty Council Present:

| Senior Admin | D. Zwick, M. Annisette, K. Kanagaretnam, D. Matten, T. Noseworthy | | | | |
|----------------|------------------------------------------------------------------------------|--|--|--|--|
| ACTG | M. Bamber, C. Cho, A. Mawani, L. Thorne, V. Trivedi | | | | |
| ARTM | T. McQueen, K. Rogers | | | | |
| BSUS | | | | | |
| ECON | A. Coutts, I. Henriques, B. Wolf (ret.) | | | | |
| ENTR | G. Kistruck | | | | |
| FINE | M. Cao, M. Dong, P. Foroughi, Y. Larkin, M. Milevsky, P. Shum Nolan, Y. Tian | | | | |
| MKTG | A. Campbell, P. Darke, M. Giesler, A. Joshi, E. Veresiu | | | | |
| ORGS | C. Bell, I. Hideg, W. Shen, K. Tasa | | | | |
| OMIS | D. Oppong-Tawiah | | | | |
| PLCY | P. Aulakh, A. Madhok, M. Majzoubi, C. McMillan, T. Peridis, W. Sheremata | | | | |
| PROP | J. Clayton, A. Devine, J. McKellar (ret.) OTHER: X. Li (Lib) | | | | |
| Voting CPM's 8 | Voting CPM's & Director of 601 A. Mustapha, H. Sinker | | | | |
| Student Reps | A. Kakkar (UBS), J. Lam (PhD), T. Rashid (GBC) | | | | |

Voting Members of Faculty Council Absent/Regrets:

| T. Anand (UBS) | B. Eberlein | A. Kecskes | D. Neu | G. Saxton |
|---------------------|----------------------|---------------------|-------------------|-------------------|
| E. Auster | J. Everett | H. Kim | L. Ng | J. Tan |
| KH. Bae | M. Farjoun | M. Kipping | C. Oliver (ret.) | M. Valente |
| T. Beechy (ret.) | E. Fischer | M. Kristal | G. Packard | M. Voronov |
| R. Belk | B. Gainer (ret.) | F. Lazar | Y. Pan | S. Weiss |
| A. Bhanich-Supapol | B. Graham (alum) | M. Levesque | J. Patel (UBS) | E. Westney (ret.) |
| I. Bicer | I. Holzinger | G. Li | R. Phillips | L. Wright (ret.) |
| J. Chung | D. Horváth | Z. Li | E. Prisman | S. Yeomans |
| W. Cook (ret.) | S. Hsu | B. Lyons | S. Qu | J. Zemans (ret.) |
| A. DeCarufel (ret.) | R. Imanirad | I. Macdonald (ret.) | M. Rice | H. Zhu (GBC) |
| Y. Deutsch | R. Irving (ret.) | R. McClean (ret.) | H. Rosin (Ret.) | |
| V. Dhingra | D. Johnston | N. Mead | J. Rungtusanatham | |
| A. Diamant | M. Kamstra | G. Morgan (ret.) | A. Rzeznik | |
| D. Dimick (ret.) | R. Karambayya (ret.) | N. Nasseri (UBS) | P. Sadorsky | |

Leaves and Sabbaticals:

| M. Biehl | J. Darroch | L. Hillcoat | R. Shao |
|----------|------------|-------------|---------|
| A. Sirsi | T. Wesson | | |

Non-Voting Members of Faculty Council Present

| D. Barret | S. Friedman | Y. Massop | S. Tenn |
|-----------------------|--------------------|--------------------|-----------------|
| S. Calahan | L. Ginsberg | R. Mayer | A. Thomson |
| C. Carder | P. Grant | T. Medcof | E. Vanderheyden |
| M. Cernea | A. Gravel | C. Mueller (guest) | K. Welsby |
| W. Craddock | L. Jackson | M. Orlan | D. Woticky |
| S. E. Dankner (guest) | B. Kha | L. Pan | F. Zandi |
| P. Deonandan | P. Macdonald | J. Pinto | |
| J. Fayt | M. Machado | P. Safai (guest) | |
| A. Ferreira | N. Machado (guest) | N. Sutherland | |

Non-Voting Members of Faculty Council Absent:

| W. Al-Hussaini | D. Elsner | H. Koren-Cohen | A. Narbe | R. Ross |
|----------------|----------------|----------------|-----------------|-------------|
| P. Barter | E. Farrell | L. Lakats | Z. Necas | C. Sicoli |
| M. Bhutani | A. Fisher | D. Lennox | C. Niederwanger | S. Sigel |
| E. Caprioni | T. Gosse | R. Lynn | C. Partland | T. Stubbs |
| J-M. Clark | A. Harris | D. Mak | B. Pasquali | C. Sullivan |
| T. D'Agostino | M. Hastings | К. Мара | G. Pau | T. Tolias |
| G. Deans | R. Hines | G. Milavsky | P. Pivato | N. Verma |
| L. De Wilde | J. Jeyakumaran | J. Morgan | J. Pokrajac | A. Welsh |
| P. Dillon | G. Klar | M. Morriello | S. Pulver | C. Zhuang |
| K. Ellis | A. Konson | R. Moy | E. Roman | |

1. Welcome and Chair's Remarks

The meeting was called to order at 10:33am and the land acknowledgment was read out by the Chair. Consent agenda item 4e, the revised MPC mandate, was brought off the consent agenda so an amendment could be made (see point 3 below).

2. PhD/GBC/UBS Initiatives

Representatives of the three student bodies provided updates on their activities throughout the Fall term as well as their efforts to support their peers in the face of uncertainty from the pandemic.

3. Amendment to Revised MPC Mandate

A motion was put forward by M. Annisette and seconded by C. Bell to amend the revised MPC mandate to add the Director, Global Relations to the committee membership. The motion was approved.

4. Return to Campus Information Session

Parissa Safai, Special Advisor to the President for Academic Continuity Planning and COVID-19 Response, delivered a presentation on the university's planning around COVID and the return to campus in the Winter 2022 term. A. Mustapha spoke about topics such as classroom cleaning and IT updates and M. Annisette spoke about relevant academic policies. GBC President T. Rashid presented the results of a survey of masters-level students' preferences regarding course delivery formats. For details please contact GBCPresident@schulich.yorku.ca.

5. Return to Campus Open Discussion

A motion was put forward by C. Bell and seconded by A. Joshi to move to a committee of the whole to have an open discussion around the upcoming return to campus in the Winter term. No items were formally reported back to the committee once the discussion concluded.

6. Adjournment

A motion to adjourn was moved, seconded and approved. The meeting adjourned at 12:00pm.

The following items were approved by consent:

- 1. Communications
 - a) For Information: Senate Synopsis (2021.10.28)
- 2. Committee for Equity and Community (CEC)
 - a) Revised Committee Mandate
 - b) Committee Workplan for 2021-2022
- 3. BBA/iBBA Program Committee (M. Valente)
 - a) New Course Proposals
 - 1. ECON 4050 3.00 Behavioural Economics Insights: Consumers, Businesses, and Markets (*I. Henriques*)
 - b) Course Changes
 - 1. ECON 4220 3.00 Macroeconomics and the Supply Side (retirement)
 - 2. MGMT 2060 3.00 Business and Society (enrolment cap increase)
 - c) Revised Committee Mandate
- 4. Master Programs Committee (M. Annisette)
 - a) Master of Business Analytics (MBAN) (D. Johnston)
 - 1. Course Change: MBAN 5110 Predictive Modelling I (title and co-requisite)
 - b) Master of Management in Artificial Intelligence (MMAI) (D. Johnston)
 - 1. Course Change: MMAI 5040 3.0 Business Applications of Artificial Intelligence I (course description)

- c) Joint Master of Business Administration and Juris Doctor (MBA/JD) (P. MacDonald)
 - 1. **Program Change** (admission requirements)
- d) Master of Business Administration (MBA) (A. Joshi)
 - 1. New Course Proposal
 - a. BSUS 5200 3.00 Business and Sustainability (M. Valente)
 - 2. Specialization Changes
 - a. SOCM Specialization Retirement (M. Annisette)
 - b. PUBL Specialization Retirement (M. Annisette)
 - 3. Course Changes (M. Annisette)
 - a. BSUS 6600 3.00 Sustainability and Carbon Finance (retirement)
 - b. ENTR 6635 3.00 International Entrepreneurship (retirement)
 - c. PUBL 6000 3.00 Strategic Management in the Public Sector (retirement)
 - d. PUBL 6100 3.00 Strategy Field Study (retirement)
 - e. PUBL 6140 3.00 Business and Government (retirement)
 - f. PUBL 6150 3.00 Comparative Public Policy (retirement)
 - g. PUBL 6200 3.00 Canadian Public Law (retirement)
 - h. PUBL 6800 3.00 Program Evaluation (retirement)
 - i. SGMT 6730 3.00 Business Strategies in China (retirement)
- **5. EMBA Program Committee** (M. Annisette / M. Kipping)
 - a) New Course Proposals
 - 1. EMBA 6195 2.0 Innovating for Social Impact
 - 2. EMBA 6235 2.0 Startup in the Making An Entrepreneur's and VC's Perspectives
 - 3. EMBA 6245 2.0 Future Proofing Brands
 - 4. EMBA 6265 2.0 Leveraging Collaboration for Innovation
 - 5. EMBA 6275 2.0 Doing Magic with Data
 - 6. EMBA 6315 2.0 Growing Businesses Growing People
- 6. Minutes of the Last Meeting: 2021.11.05