MINUTES
MEDICAL UNIVERSITY HOSPITAL AUTHORITY
BOARD OF TRUSTEES MEETING
April 11, 2013

The Board of Trustees of the Medical University Hospital Authority convened Thursday, April 11, 2013 with the following members present: Thomas L. Stephenson, Esquire, Chairman; Dr. James E. Wiseman, Jr., Vice Chairman; Dr. Stanley C. Baker, Jr.; Mr. William H. Bingham, Sr.; Dr. Cotesworth P. Fishburne, Jr.; Dr. Harold W. Jablon; Dr. Donald R. Johnson II; Mr. William B. Hewitt; Dr. E. Conyers O’Bryan, Jr.; Dr. Thomas C. Rowland, Jr; Mr. Charles W. Schulze; The Honorable Robin M. Tallon and Dr. Charles B. Thomas, Jr.

The following administrative officials were present: Dr. Raymond S. Greenberg, President; Dr. Mark Sothmann, Vice President for Academic Affairs and Provost; Dr. Etta Pisano, Vice President for Medical Affairs, and Dean, College of Medicine; Ms. Lisa Montgomery, Executive Vice President for Finance and Operations; Dr. Pat Cawley, Vice President for Clinical Operations and Executive Director, MUHA; Dr. Frank Clark, MUHA; Vice President for Information Technology and CIO, Mr. Jim Fisher, Vice President for Development.

Item 1. Call to Order-Roll Call.

There being a quorum present, Chairman Stephenson called the meeting to order. Ms. Celeste Jordan called the roll.

Item 2. Secretary to Report Date of Next Meeting.

The date of the next regularly scheduled meeting is Thursday, May 16, 2013.

Item 3. Approval of Minutes of the Regular Meeting of the Medical University Hospital Authority of February 7, 2013.

Board Action: It was moved that the Minutes be approved. The motion was seconded, voted on and unanimously carried.

Mr. Stephenson stated that since the board members had attended the committee meetings earlier in the day and had heard reports in the committees, the Committee Chairs only need bring forth the items that need board approval.

RECOMMENDATIONS AND INFORMATIONAL REPORTS OF THE PRESIDENT

OLD BUSINESS: None.

NEW BUSINESS:
Item 4. **General Informational Report of the President.**

Dr. Greenberg provided his report of activities and noted it had been a busy time. He stated that the retreat to be held on Friday would convene at 9 a.m. and there would be two internal presenters: Dr. Bruce Obviagele and Dr. Carolyn Britten. In addition, Mr. Bruce Bailey, CEO of Georgetown Hospital would make a brief presentation on the partnership MUSC is developing with them as well as a presentation by Dr. Danielle Scheurer on the Palliative Care Initiative.

**Recommendation of Administration:** That the report be received as information.

**Board Action:** Received as information.

Item 5. **Other Business.**

Dr. Greenberg presented a resolution for approval. The resolution recognizes the wellness efforts of MUSC.

**Board Action:** A motion was made, seconded and unanimously voted to approve the resolution.

MEDICAL UNIVERSITY HOSPITAL AUTHORITY OPERATIONS AND FINANCE COMMITTEE. CHAIRMAN: DR. STANLEY C. BAKER, JR. (Detailed committee minutes are attached to these minutes).

OLD BUSINESS: None.

NEW BUSINESS:

Item 6. **MUSC Medical Center Status Report.**

**Statement:** Report presented to committee.

**Recommendation of Administration:** That the report be received as information.

**Recommendation of Committee:** That the report be received as information.

**Board Action:** Received as information.
Item 7. **MUSC Medical Center Financial and Statistical Report.**

**Statement:** Report presented to committee.

**Recommendation of Administration:** That this report be received as information.

**Recommendation of Committee:** That this report be received as information.

**Board Action:** Received as information.

Item 8. **Report on Quality and Patient Safety.**

**Statement:** Report presented to committee.

**Recommendation of Administration:** That this report be received as information.

**Recommendation of Committee:** That this report be received as information.

**Board Action:** Received as information.

Item 9. **Report of the Vice President for Medical Affairs and Dean, College of Medicine.**

**Statement:** A request to change the MUSC “Children’s Hospital” logo to “The Children’s Hospital of South Carolina” was presented for approval.

**Recommendation of Administration:** That the change to the logo be approved.

**Recommendation of Committee:** That the change to the logo be approved.

**Board Action:** A motion was made, seconded and unanimously voted to approve the change to the logo.

Item 10. **Update on MUSC Physicians.**

**Statement:** The following items were presented for approval:

Department of Medicine-Nephrology Clinic to provide immediate and comprehensive nephrology services to the Beaufort, SC community, by expanding outpatient clinics, providing full dialysis coverage of the DCI unit,
and complete support of Beaufort Memorial Hospital consults and call overage.

Department of Anesthesia and Perioperative Medicine to purchase a Transthoracic Echocardiography Simulator at a cost of $90,415.50. The Department would like to utilize this technology to train residents, fellows and faculty in basic and advanced TEE and TTE.

North Charleston expansion proposal of $450,000 to up-fit existing third floor for use by Primary Care.

Recommendation of Administration: That these items be approved as presented.

Recommendation of Committee: That these items be approved as presented.

Board Action: A motion was made, seconded and unanimously voted to approve the items as presented.

**Item 11. Legislative Update.**

Statement: Report presented to committee.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

**Item 12. Other Committee Business.** None

**Item 13. Medical University Hospital Authority Appointments, Reappointments and Delineation of Privileges (Consent Item).**

Statement: An updated list of appointments, reappointments and delineation of privileges to the medical staff were presented for approval.

Recommendation of Administration: That the appointments, reappointments and delineation of privileges to the medical staff be approved.

Recommendation of Committee: That the appointments, reappointments and delineation of privileges to the medical staff be approve.
Board Action: A motion was made, seconded and unanimously voted to approve the list of appointments, reappointments and delineation of privileges to the medical staff.

Item 14. Amendment and Resolution – Special Health Alternative Retirement Plan (SHARP) (Consent Item).

Statement: A resolution authorizing an amendment to Medical University Hospital Authority’s Special Health Alternative Retirement Plan (SHARP) was presented. The changes to the plan are IRS required and do not increase benefits costs under the plan. This was reviewed by the committee and recommended for approval.

Recommendation of Administration: That the resolution be approved.

Recommendation of Committee: That the resolution be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the resolution.

Item 15. Medical Executive Committee Minutes (Consent Item).

Statement: Contracts and Agreements which have been signed since the last board meeting were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

Item 16. Medical Center Contracts and Agreements (Consent Item).

Statement: Contracts and Agreements which have been signed since the last board meeting were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.
MEDICAL UNIVERSITY HOSPITAL AUTHORITY PHYSICAL FACILITIES COMMITTEE. CHAIRMAN: MR. WILLIAM H. BINGHAM, SR. (Detailed committee minutes are attached to these minutes).

OLD BUSINESS: None.

NEW BUSINESS:

Item 17. Facilities Procurements/Contracts Proposed.

Statement: The following was presented for approval:

Lease renewal of 6,522 square feet of clinical space located on the first floor of the Ashley/Rutledge Parking Garage. Total cost of lease including extended terms: $150,772.

Recommendation of Administration: That the lease renewal be approved.

Recommendation of Committee: That the lease renewal be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the lease renewal as presented.

Item 18. Resolution Pertaining to a Lease-Purchase Agreement of Equipment to Relocate the Energy Plant of the Main Hospital and Children's Hospital.

Statement: The following was presented for approval:

A resolution which would authorize the execution of a lease-purchase agreement pursuant to the State Master Lease Program in an amount not to exceed $22 million. The acquisition of this equipment by the Hospital Authority is needed in order to replace and relocate the Energy Plan of the Main Hospital and the Children’s Hospital.

Recommendation of Administration: That the resolution be approved.

Recommendation of Committee: That the resolution be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the resolution as presented.

Item 19. Update on Projects.

Statement: No report.
Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

**Item 20. Other Committee Business.** None

**Item 21. Facilities Contracts Awarded (Consent Item).**

Statement: Facilities Contracts awarded since the last meeting were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

MEDICAL UNIVERSITY HOSPITAL AUTHORITY AUDIT COMMITTEE. CHAIRMAN: MR. WILLIAM B. HEWITT. (Detailed committee minutes are attached to these minutes).

**OLD BUSINESS:** None.

**NEW BUSINESS:**

**Item 22. Entrance Conference with KPMG.**

Statement: Reported to committee.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

**Item 23. Report of the Office of Internal Audit.**

Statement: Reported to committee.

Recommendation of Administration: That this report be received as information.
Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

Item 24. Other Committee Business. None.

OTHER BUSINESS FOR THE BOARD OF TRUSTEES:

Item 25. Approval of Consent Agenda.

Statement: Approval of the Medical University Hospital Authority consent agenda was requested.

Recommendation of Administration: That the consent agenda be approved.

Board Action: It was moved, seconded and unanimously voted that the consent agenda be approved

Item 26. New Business for the Board of Trustees.

None.

Item 27. Report from the Chairman.

There being no further business, the Hospital Authority meeting was adjourned and the University Board of Trustees meeting was convened.

Respectfully submitted,

Hugh B. Faulkner III
Secretary

/wcj
Attachments
RESOLUTION

Whereas in 2010, the American Hospital Association developed a comprehensive report entitled, *A Call to Action: Creating a Culture of Health*, highlighting the critical role hospitals play in their communities, including creating a culture of health as reflected in the national goals found in Healthy People 2020, and becoming accountable for overall population health;

Whereas it is estimated that health care expenditures in the United States neared $2.6 trillion in 2010, with health care costs for chronic disease treatment account for over 75% of national health expenditures and employer-sponsored health coverage for family premiums increasing by 97% since 2002;

WHEREAS 40% of U.S. primary care doctors and 36% of US medical students do not meet federal physical activity guidelines and evidence suggests that physically inactive doctors are less likely to provide exercise counseling to patients and provide less credible role models for the adoption of healthy behaviors;

WHEREAS the Medical University of South Carolina (MUSC) is a public institution of higher learning the purpose of which is to preserve and optimize human life in South Carolina and beyond, and MUSC is dedicated to providing leadership to the state in efforts to promote health and prevent disease;

NOW THEREFORE, BE IT KNOWN that the MUSC Board of Trustees resolves that:

1. MUSC is committed to creating a culture of wellness and will provide resources and support necessary to ensure that these commitments can be realistically achieved.

2. MUSC will utilize the intellectual capital of the organization to create a cohesive and collaborative force in health promotion that will provide opportunities to positively impact the health of students, faculty and staff, as well as members of the broader community.

3. MUSC leaders involved in health promotion, education, research and disease prevention will collaborate to establish individual, shared and organizational health and wellness goals; encourage coordination and collaboration both internally and with the external environment; and obtain commitment to excellence.

4. MUSC is committed to ensuring a healthy food environment for all those associated with the organization.
5. MUSC encourages its employees during breaks to participate in healthy activities such as preventative screenings and assessments, physical activity, weight management, tobacco cessation, healthy food and stress management.

6. MUSC will pursue the integration of built environment and green spaces that promote healthy behaviors and lifestyles such as design strategies that encourage access to healthy food (garden collaborative), opportunities for physical activity, stress management and reduce risk of accidents and injury.

7. MUSC will commit to environmental stewardship and sustainability on our campus, in our medical institutions, and in the larger community of which we are a part.

8. MUSC will maintain a tobacco free campus and support the City of Charleston Smoke Free Medical District through education, enforcement, advocacy and cessation services and will serve as a resource to other organizations seeking to create tobacco-free policies and programs.

9. MUSC will promote collaborations with private, nonprofit, and philanthropic business partners across South Carolina through economic development opportunities and participation in programs related to health promotion, education, research and practice.

Approved by the MUSC Board of Trustees on the 11th of April in the year Two Thousand and Thirteen.

Thomas L. Stephenson
Chairman

Date
The meeting was called to order by Dr. Stanley Baker, Chair at 10:45 a.m.

**Item 6. Medical University Hospital Authority Status Report**

Dr. Patrick Cawley presented the Hospital Authority Status report.

**MUHA Goals** - Under the “Service” pillar we have 5/7 HCAHPS in the green; under “Quality,” our Hand Hygiene is in the green at 90%; Ideal Care goal is 3.5 and we are currently at 2.44: Mortality 58th; Readmissions are 12.64% (goal is 11.8%); We are in the “green” for CLABSI, Core Measures and Culture of Safety.

**MUSC Performance** Excellence - Dr. Cawley announced the name that has been given to the cost improvement efforts is “MUSC Performance Excellence,” to signify ownership. MUSC Performance Excellence has seven major sections. This is the $100 million improvement plan. It includes focusing on: Huron recommendations; procedure center standardization; quality/cost/value, palliative care, access enhancement, GME funding, and patient copays/waivers. Plans are to provide an update at each Board meeting. In addition to focusing on costs, strategic growth, population health and Epic are very important to financial performance of the medical Center. The projected financial opportunity from Huron is approximately $58 million. Dr. Cawley shared the Performance Excellence report card that tracks progress. To date we are in mostly in the green, except under 340b which was due a contracting issue that has now been resolved.
First 100 days – Dr. Cawley stated that he has been in “listening mode.” He has held approximately 50 individual meetings with department chairs and SL leaders. In these meetings, there have been remarkably consistent themes. The top two things that we need to continue to maintain are quality and collegiality. The number one thing that has come out in these interviews is that we have to do a better job of accountability among all staff. Other areas that we need to work on include improving our financial performance; increasing alignment between hospital and physicians and increasing communication. Fears include the hospital not integrating and micromanaging. The main “action” mode right now is focusing on Performance Excellence, communication and clinical enterprise integration.

Key positions - Dr. Cawley ended by discussing the positions of CMO, CQO and COO. Bart Sachs, MD, will serve as the Interim Chief Medical Officer.

Action: Report received as information.

Item 7. Medical University Hospital Authority Financial and Statistical Report

Mr. Steve Hargett reported on the Authority’s financial status as of February 2013. Operating margin and days cash on hand have decreased and A/R Days are flat. Debt Service coverage ratio is up due to the $30 million that was previously held in a reserve fund that is no longer needed under our new refinance which allowed us to pay down debt. Main reasons for the decrease in the days cash on hand include: reduction in long-term debt; Sabin Street Energy Plant; payments to the university; Epic related expenses and Medicaid reimbursement. Net patient revenue is up 2.64% from the same period last year. Inpatient census is up <1% - driven by a slight increase in length of stay. OR cases are up 1.9%. Outpatient visits are up 1%. Average case mix index increased from 1.73 to 1.8 when compared to the same time last year.

Action: Report received as information.

Item 8. Report on Quality and Patient Safety

Mr. Chris Rees gave a report on “South Carolina Care: The Journey to High Reliability.” MUSC joined with six other hospitals in the state to form SC Safe Care, a journey to become a highly reliable organization – an organization that is preoccupied with failure with a goal of zero harm for our patients. A High Reliability Self-assessment tool was completed that identified our “opportunities”. Chris reported that in addition, 2400 employees just completed a Culture of Safety Survey; over 2400 employees have received training on performance improvement methodology; and over 100 projects have been completed with a projected savings of >$900,000. MUHA is implementing a “Just Culture” where we will hold people accountable for “at risk behavior”. Over 350 leaders will be receiving further Just Culture training.
Dr. Bart Sachs gave a report on MUSC Performance in “Meaningful Use” of Electronic Health Record (EHR), a government incentive program to promote use of IT in healthcare. Dr. Sachs reported that through March we have received cash payments of $3.5 million. Our future payments are heavily dependent on implementation of Epic enterprise wide.

Action: Reports received as information.

**Item 9. Report of the Vice President for Medical Affairs and Dean, College of Medicine**

Dr. Etta Pisano gave an update on College of Medicine activities in the areas of Clinical Affairs, Education, Research and Administration. 270 doctors who are employed or affiliated with MUSC were named Best Docs for 2012-13 by Best Docs Inc. MUSC was named Best Hospital by the *City Paper*. Dr. Pisano highlighted the joint decision making that is evident at the weekly Clinical Leadership meeting – setting goals together, developing a common dashboard, developing enterprise wide profit/loss statements and developing plans to share in the profit or loss. Dr. Pisano gave an update on recruitment efforts for the following positions: Chair, Pediatric Neurosurgery, Chair, Family Medicine and Chair, Pathology. In the area of admissions to the College of Medicine, there were 3,561 applicants (567 out of state); 407 were interviewed with a projected class size of 168.

Action: Report received as information.

Dr. Pisano requested approval to change the MUSC “Children’s Hospital” logo to “The Children’s Hospital of South Carolina.”

Action: Recommend approval.

**Item 10. Update on MUSC Physicians**

Dr. Phil Costello requested approval of the following:

Department of Medicine-Nephrology Clinic to provide immediate and comprehensive nephrology services to the Beaufort, SC community, by expanding outpatient clinics, providing full dialysis coverage of the DCI unit, and complete support of Beaufort Memorial Hospital consults and call coverage.

Department of Anesthesia and Perioperative Medicine to purchase a Transthoracic Echocardiography Simulator at a cost of $90,415.50. The Department would like to utilize this technology to train residents, fellows and faculty in basic and advanced TEE and TTE.

North Charleston expansion proposal of $450,000 to up-fit existing third floor for use by Primary Care.
Funding for the Perry Halushka student scholarship in 2013 for a qualified South Carolina resident.

Matching contributions up to a maximum of $50,000 for 2013 Year Campaign

Financial funding of five additional personnel to support clinical research and

Action: Recommend approval.

Item 11. Legislative Update

Mr. Bo Faulkner and Mr. Mark Sweatman gave an update on the progress of the telemedicine bill.

Action: Report received as information.

Item 12. Other Committee Business

No items

CONSENT ITEMS FOR APPROVAL

Item 13. Medical University Hospital Authority Appointments and Reappointments and Delineation of Privileges.

Credentialing rosters from January and February were presented to the committee. The rosters have been approved by the appropriate hospital committees and the Medical Executive Committee.

Action: Recommend approval

Item 14. Amendment and Resolution – Special Health Alternative Retirement Plan (SHARP)

A resolution authorizing an amendment to Medical University Hospital Authority’s Special Health Alternative Retirement Plan (SHARP) was presented. The changes to the plan are IRS required and do not increase benefits costs under the plan. This was reviewed by the committee and recommended for approval.

Action: Recommend approval
CONSENT ITEMS FOR INFORMATION

Item 15. Medical Executive Committee Minutes

The minutes from the January and February meetings were presented and reviewed by the committee.

Action: Received as information.

Item 16. Medical Center Contracts and Agreements

The contracts and agreements entered into since the last meeting of the Board have been reviewed.

Action: Received as information.

There being no further business, the committee adjourned at 12:40 pm

Jane L. Scutt

Jane L. Scutt
AMENDMENT NEEDED FOR SPECIAL RETIREMENT PLAN  
TO COMPLY WITH FEDERAL TAX LEGISLATION

KEY POINTS

The Medical University Hospital Authority adopted the Special Healthcare Alternative Retirement Plan (SHARP) in July 2002.

The MUSC Physicians (UMA) and Hospital Authority leadership advocated implementation of the SHARP to minimize burden on Ambulatory Care employees who were required to transfer to the Authority payroll in July 2002. The State Retirement System authorized the Authority to implement the SHARP.

The SHARP, unlike the State Retirement Plan, does not require an employee contribution. The Authority’s employer contribution to SHARP for which employees can become vested is the same as the State’s Optional Retirement Plan.

A SHARP amendment is required as referenced in the attached. These technical changes are IRS required and do not increase benefit costs under the plan.

Operationally the SHARP has been in compliance with the IRS regulation change; however, formal approval of an amendment to the plan is needed by the Board of Trustees.
A RESOLUTION

AUTHORIZING AN AMENDMENT TO THE MEDICAL UNIVERSITY HOSPITAL AUTHORITY’S SPECIAL HEALTHCARE ALTERNATIVE RETIREMENT PLAN

WHEREAS, the Authority sponsors the Special Healthcare Retirement Plan, has reserved authority to amend the Plan, and desires to exercise such authority as required in connection with the Internal Revenue code of 1986, as amended.

NOW THEREFORE BE IT RESOLVED, that the Medical University Hospital Authority does hereby authorize and ratify the execution of an IRS-required Amendment of the Special Healthcare Alternative Requirement Plan, as presented at this meeting, a copy of which may be attached to the minutes of this meeting.

FURTHER RESOLVED, that each officer of the Medical University Hospital (acting alone or jointly) is hereby authorized, empowered and directed to execute such documents, and take such action, in connection and consistent with the preceding resolution, as each such officer deems necessary or appropriate, and any and all such action and execution already undertaken is hereby ratified.

[Signature]

Secretary, Medical University Hospital Authority Board of Trustees

[Date]
IRS-REQUIRED AMENDMENT OF THE
SPECIAL HEALTHCARE ALTERNATIVE RETIREMENT PLAN

THIS AMENDMENT (this “Amendment”), amending the Special Healthcare Alternative Retirement Plan (the “Plan”), is made this 22nd day of January, 2013, by the Medical University Hospital Authority (the “Company”).

WITNESSETH:

WHEREAS, the Company sponsors the Plan, has requested an IRS determination letter relating to the Plan, and pursuant to that determination letter request the IRS has requested certain Plan amendments; and

WHEREAS, the Company has reserved the authority to amend the Plan, and desires to exercise such authority pursuant to the IRS’ above-mentioned request for a Plan amendment.

NOW, THEREFORE, the Company does hereby take the following action in connection with the Plan:

1. Plan Amendment.

   a. Effective as of March 28, 2005, Sections 5.5 and 5.6 of the Plan are hereby amended so as to delete the reference to “$5,000,” and in lieu thereof substitute the term “$1,000.”

   b. The plan is hereby amended so as to delete Sections 1.23, 1.51, 1.52 and 1.53, and in lieu thereof, the following shall appear:

      1.23 [RESERVED]

      1.51 [RESERVED]

      1.52 [RESERVED]

      1.53 [RESERVED]

2. Capitalized Terms. The capitalized terms set forth in this Amendment shall have the same meaning as provided under the Plan.

3. Effect of Amendment. Except as otherwise expressly provided in this Amendment, the Plan shall remain and continue in full force and effect, subject to applicable authority to amend from time to time, and/or terminate, the Plan.
4. Amendment is Part of Plan. This Amendment shall be considered to be a part of the Plan, as if the Plan's amendment set forth in this Amendment were reflected in the Plan document.

IN WITNESS WHEREOF, the Company has executed this Amendment on the date first above-written.

COMPANY:

Medical University Hospital Authority.

By: [Signature]

Its Authorized Representative
### Board of Trustees Credentialing Subcommittee - January 2013

The Medical Executive Committee reviewed the following applicants on January 16, 2013 and recommends approval by the Board of Trustees Credentialing Subcommittee, effective January 28, 2013

<table>
<thead>
<tr>
<th>Name</th>
<th>Specialties</th>
</tr>
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<tbody>
<tr>
<td>Andrea Meredith Rinn, D.O.</td>
<td>Active Provisional Medicine</td>
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<tr>
<td>Bruce I. Ovbiagele, MD</td>
<td>Active Provisional Neurosciences</td>
</tr>
<tr>
<td>Andrew M. Atz, M.D.</td>
<td>Active Pediatrics</td>
</tr>
<tr>
<td>Clive D. Brock, M.B.,Ch.B., Ch.B.</td>
<td>Active Family Medicine</td>
</tr>
<tr>
<td>Joseph Robert Cantey, M.D.</td>
<td>Active Medicine</td>
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<tr>
<td>Louis E. Costa, M.D., D.M.D.</td>
<td>Affiliate Otolaryngology</td>
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<tr>
<td>Philip Costello, M.D.</td>
<td>Active Radiology</td>
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<tr>
<td>Alexei O. DeCastro, M.D.</td>
<td>Active Provisional Family Medicine</td>
</tr>
<tr>
<td>Valerian L. Fernandes, M.D.</td>
<td>Active Medicine</td>
</tr>
<tr>
<td>Bruce M. Frankel, M.D.</td>
<td>Active Neurosciences</td>
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<tr>
<td>Donald L. Fylastra, M.D.</td>
<td>Active Obstetrics &amp; Gynecology</td>
</tr>
<tr>
<td>Steven Steuer Glazier, M.D.</td>
<td>Active Neurosciences</td>
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<tr>
<td>Kelly Grogan, M.D.</td>
<td>Active Anesthesiology</td>
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<tr>
<td>Marta T. Hampton, M.D.</td>
<td>Affiliate - Refer &amp; Follow Dermatology</td>
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<tr>
<td>Russell A. Harley, M.D.</td>
<td>Active Pathology &amp; Lab. Med.</td>
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<tr>
<td>Thomas B. Harper, III, M.D.</td>
<td>Affiliate - Refer &amp; Follow Pediatrics</td>
</tr>
<tr>
<td>Grady H. Hendrix, M.D., A.B.</td>
<td>Active Medicine</td>
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<tr>
<td>Cynthia Lea Hipp, D.D.S., M.S.C.R</td>
<td>Active O &amp; M Surgery</td>
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<tr>
<td>Anthony M. Hlavacek, M.D., M.S.C.R</td>
<td>Active Pediatrics</td>
</tr>
<tr>
<td>Christine Anne Holmstedt, D.O.</td>
<td>Active Neurosciences</td>
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<td>Florence N. Hutchison, M.D.</td>
<td>Active Medicine</td>
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<td>Thomas E. Keane, M.D.</td>
<td>Active Urology</td>
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<td>John C. Kulze, III, M.D.</td>
<td>Affiliate - Refer &amp; Follow Ophthalmology</td>
</tr>
<tr>
<td>James F Mooney, III, M.D.</td>
<td>Active Orthopaedic Surgery</td>
</tr>
<tr>
<td>Roger B. Newman, M.D.</td>
<td>Active Obstetrics &amp; Gynecology</td>
</tr>
<tr>
<td>Terrence X. O'Brien, M.D., M.S.</td>
<td>Active Medicine</td>
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<tr>
<td>Pamela Jean Pride, M.D.</td>
<td>Active Medicine</td>
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<tr>
<td>Dilip M. Purohit, M.D.</td>
<td>Active Pediatrics</td>
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<tr>
<td>Charles H. Raine, III, M.D.</td>
<td>Affiliate - Refer &amp; Follow Medicine</td>
</tr>
<tr>
<td>Michael Patrick Ramsay, M.D., J.D.</td>
<td>Active Medicine</td>
</tr>
<tr>
<td>Anil G. Rao, M.D.</td>
<td>Active Radiology</td>
</tr>
<tr>
<td>Julius Sagel, M.B., Ch.B.</td>
<td>Affiliate Medicine</td>
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<tr>
<td>Steven A. Sahn, M.D.</td>
<td>Active Medicine</td>
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<tr>
<td>Richard A. Saunders, M.D.</td>
<td>Active Ophthalmology</td>
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<tr>
<td>John J Schaefer, III, M.D.</td>
<td>Active Anesthesiology</td>
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<tr>
<td>Frederick M. Schaffer, M.D.</td>
<td>Affiliate - Refer &amp; Follow Pediatrics</td>
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<tr>
<td>Claudio J Schonholz, M.D.</td>
<td>Active Radiology</td>
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<tr>
<td>Sara E. Schuh, M.D., M.P.H.</td>
<td>Active Pediatrics</td>
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<tr>
<td>Roy Brumby Sessions, M.D.</td>
<td>Affiliate - Refer &amp; Follow Otolaryngology</td>
</tr>
<tr>
<td>Ibrahim F. Shatat, M.D., M.S.</td>
<td>Active Pediatrics</td>
</tr>
<tr>
<td>Edwin A. Smith, M.D.</td>
<td>Active Medicine</td>
</tr>
<tr>
<td>Name</td>
<td>Status</td>
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<tr>
<td>Kenneth McRae Spicer, M.D., Ph.D.</td>
<td>Active</td>
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<tr>
<td>Robert D. Stapleton, M.D.</td>
<td>Affiliate</td>
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<tr>
<td>Frank Crawford Stewart, III, B.S., M.D.</td>
<td>Active</td>
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<tr>
<td>Celia Carolyn Thiedke, M.D.</td>
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</tr>
<tr>
<td>Melanie B. Thomas, M.D., M.S., B.A.</td>
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<tr>
<td>James Peter VanDorsten, M.D.</td>
<td>Active</td>
</tr>
<tr>
<td>David T. Vroman, M.D.</td>
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</tr>
<tr>
<td>Carol L. Wagner, M.D.</td>
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</tr>
<tr>
<td>John L. Waller, M.D.</td>
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</tr>
<tr>
<td>Robert C. Weaver, M.D.</td>
<td>Active - Refer &amp; Follow</td>
</tr>
<tr>
<td>George Frederick Worsham, Jr., M.D.</td>
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</tr>
<tr>
<td>Michael R. Zile, M.D.</td>
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</tr>
</tbody>
</table>

**Medical Staff Change in Privileges**

<table>
<thead>
<tr>
<th>Name</th>
<th>Status</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keith Borg, M.D., Ph.D.</td>
<td>Active</td>
<td>Pediatrics</td>
</tr>
<tr>
<td>Jennifer Michele Braden, M.D.</td>
<td>Active</td>
<td>Pediatrics</td>
</tr>
<tr>
<td>Ryan Butts, M.D.</td>
<td>Active</td>
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</tr>
<tr>
<td>Joel B. Cochran, D.O.</td>
<td>Active</td>
<td>Pediatrics</td>
</tr>
<tr>
<td>Terry Carlyle Dixon, M.D., Ph.D.</td>
<td>Active</td>
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</tr>
<tr>
<td>Joseph V. Dobson, M.D.</td>
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<tr>
<td>Melissa Campbell Evans, M.D.</td>
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</tr>
<tr>
<td>David M. Habib, M.D.</td>
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</tr>
<tr>
<td>Geoffrey Edwin Hayden, M.D.</td>
<td>Active Provisional</td>
<td>Medicine</td>
</tr>
<tr>
<td>Benjamin F. Jackson, M.D.</td>
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<td>Pediatrics</td>
</tr>
<tr>
<td>Kathy Lehman-Huskamp, M.D.</td>
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<td>Pediatrics</td>
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<tr>
<td>Steven David McSwain, M.D., M.P.H</td>
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</tr>
<tr>
<td>William Scott Russell, M.D.</td>
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<tr>
<td>Lancer A. Scott, M.D.</td>
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<td>Medicine</td>
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<tr>
<td>David Stanley Sosnouski, M.D.</td>
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<td>Sarah Elizabeth Sterner, M.D.</td>
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<tr>
<td>Ganga Lakshmi Srinivas, B.B.S.</td>
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<tr>
<td>Frederick W. Tecklenburg, M.D.</td>
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<tr>
<td>Mary Olivia Titus, M.D.</td>
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<tr>
<td>Rachel Elizabeth Tuuri, M.D.</td>
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<tr>
<td>Jana K Upshaw, M.D.</td>
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</tr>
<tr>
<td>Sally A. Webb, M.D.</td>
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<td>Pediatrics</td>
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**Professional Staff Initial Appointment and Privileges**

<table>
<thead>
<tr>
<th>Name</th>
<th>Status</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>Karen Frances Hilbert, A.P.R.N.</td>
<td>Provisional Allied Health</td>
<td>Obstetrics &amp; Gynecology</td>
</tr>
<tr>
<td>Virginia A. Rueger, A.P.R.N.</td>
<td>Provisional Allied Health</td>
<td>Psychiatry</td>
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</table>

**Professional Staff Reappointment and Privileges**

<table>
<thead>
<tr>
<th>Name</th>
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</thead>
<tbody>
<tr>
<td>Leslie Sykes Ancrum, C.R.N.A., BSN</td>
<td>Allied Health</td>
<td>Anesthesiology</td>
</tr>
<tr>
<td>Carol M. Burns, A.P.R.N.</td>
<td>Allied Health</td>
<td>Psychiatry</td>
</tr>
<tr>
<td>Christine Coe, C.R.N.A., M.H.S.</td>
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<tr>
<td>Christopher James Devine, C.R.N.A.</td>
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<tr>
<td>Sarah Elizabeth Enoch, C.R.N.A.</td>
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<tr>
<td>Christine D. Hamolia, B.S.N., M.S.</td>
<td>Allied Health</td>
<td>Psychiatry</td>
</tr>
<tr>
<td>Gary Howard Hoeffler, C.R.N.A.</td>
<td>Allied Health</td>
<td>Obstetrics &amp; Gynecology</td>
</tr>
<tr>
<td>Leonora S. Horton, C.N.M., M.S., Ph.D.</td>
<td>Allied Health</td>
<td>Obstetrics &amp; Gynecology</td>
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</table>
Phillip Greg Ivy, C.R.N.A.
Susan Knight, Ph.D.
Rita F. Meyers, C.R.N.A.
Ashley B. Phillips, F.N.P.
Jennifer Flynn Reeves, P.A.C., M.P.A.S.
Kenneth J. Ruggiero, Ph.D.
Elizabeth Jane Santa Ana, Ph.D.
Milton Joseph Seymour, III, C.R.N.A.
Anthony Michael Sloan, C.R.N.A.
Margaret Ann Stark, R.N., C.R.N.A.
Janelle Lee Wagner, Ph.D.
Susan Zayac, MSN, F.N.P.
Margaret K. Brothers, F.N.P.

Allied Health
Allied Health
Provisional Allied Health
Allied Health
Allied Health
Allied Health
Allied Health
Allied Health
Allied Health - R&F
Allied Health
Allied Health
Anesthesiology
Psychiatry
Anesthesiology
Medicine
Surgery
Psychiatry
Psychiatry
Anesthesiology
Anesthesiology
Anesthesiology
Pediatrics
Anesthesiology
Medicine

Professional Staff Change in Privileges

Allied Health
Neurosciences
Allied Health
Pediatrics

Change of department and supervising physician
Change of supervising physician and patient population
### Medical Staff Initial Appointment and Privileges

<table>
<thead>
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<th>Position</th>
<th>Specialty</th>
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<tr>
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### Medical Staff Reappointment and Change in Privileges

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<td>Active</td>
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<td>Addition of core procedures</td>
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<td>Giving up privileges not related to practice</td>
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<td>Addition of Moderate Sedation</td>
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### Professional Staff Initial Appointment and Privileges

<table>
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<tbody>
<tr>
<td>Professional Staff Reappointment and Privileges</td>
<td>Psychiatry</td>
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</table>
Mary S. Deas, M.S.W.
Margaret P. Diamond, A.N.P.
Helen Elizabeth Furtado, C.R.N.A.
Karen Sue Garn, P.A., B.S., A.A.S.
Susan King, M.S.W.
Jennifer Koonce, A.C.N.P.
Patricia Mathias, P.A.C., M.P.A.S.
Kellie Ham McLain, ANP
Lynn Morton-Epps, MSW
Austin O'Malley, MA
Lauree Gail Pearson, MSN, N.N.P.
Ann Peterson, A.N.P., MSN
Bridgette Anne Pidel, P.A., B.S.
Adam Pratt, P.A.C.
Anna Jayne Roberts, M.S.W.
Regan W. Saxton, C.R.N.A.
Anne Carlene Speaks, MSN, N.N.P.
F. Mayson Stewart, M.A.
James Scott Truelove, M.S.W.
Debra Wallace, B.S., M.S.W.
Cameron M. Williams, M.S.W.
Patricia Yost, M.S.W.

Gabrielle L. Poole, P.A.C.

Professional Staff Reappointment and Privileges (cont.)

Provisional Allied Health
Allied Health
Allied Health
Provisional Allied Health
Allied Health
Provisional Allied Health
Allied Health
Allied Health
Allied Health
Allied Health
Provisional Allied Health
Allied Health
Provisional Allied Health
Allied Health
Provisional Allied Health
Allied Health
Allied Health
Provisional Allied Health
Allied Health

Professional Staff Change in Privileges
Provisional Allied Health
Orthopaedic Surgery

Addition of privileges required for current practice
Medical University Hospital Authority  
Physical Facilities Committee  
April 11, 2013  
Minutes

Attendees:  
Mr. William H. Bingham, Chair  
Dr. Stanley C. Baker  
Dr. Cotesworth P. Fishburne, Jr.  
Mr. William B. Hewitt  
Dr. Harold W. Jablon  
Dr. Donald R. Johnson II  
Dr. E. Conyers O'Bryan, Jr.  
Dr. Thomas C. Rowland, Jr.  
Mr. Charles W. Schulze  
Thomas L. Stephenson, Esquire  
The Honorable Robin M. Tallon  
Dr. Charles B. Thomas, Jr.  
Dr. James E. Wiseman, Jr.  
Dr. Raymond S. Greenberg  
Dr. Frank Clark  
Ms. Annette Drachman  
Ms. Susie Edwards  
Mr. Dennis Frazier  
Mr. Bob Marriott  
Ms. Lisa Montgomery  
Dr. Etta Pisano  
Dr. Darlene Shaw  
Dr. Mark Sothmann

Mr. Bingham called the meeting to order.

REGULAR Items

Item 17  Facilities Procurements/Contracts Proposed.

Mr. Dennis Frazier presented the following lease for approval:

Lease renewal of 6,522 square feet of clinical space located on the first floor of the Ashley/Rutledge Parking Garage. Total cost of lease including extended terms: $150,772.

Recommendation of Committee: That the lease be approved.

Item 18  Resolution Pertaining to a Lease-Purchase Agreement of Equipment to Relocate the Energy Plant of the Main Hospital and Children’s Hospital.

Mr. Steve Hargett presented a resolution which would authorize the execution of a lease-purchase agreement pursuant to the State Master Lease Program in an amount not to exceed $22 million. The acquisition of this equipment by the Hospital Authority is needed in order to replace and relocate the Energy Plant of the Main Hospital and the Children’s Hospital.

Recommendation of Committee: That the resolution be approved.

Item 19  Update on Projects.

No update.

Recommendation of Committee: Received as information.
Item 20  Other Committee Business.  None

CONSENT Items for Information:

Item 21  Facilities Contracts Awarded

The facilities contracts since the last board meeting were presented for information.

Recommendation of Committee:  That this report be received as information.

With no further business, the meeting was adjourned.

Respectfully submitted,

Celeste Jordan
FACILITIES
HOSPITAL AUTHORITY
LEASE RENEWAL
FOR APPROVAL

APRIL 12, 2013

DESCRIPTION OF LEASE RENEWAL: This lease renewal is for 6,522 square feet of clinical space located on the first floor of the Ashley/Rutledge Parking Garage. This lease renewal will continue to provide clinical space for Physical Therapy and Occupational Therapy Services. The per square foot rate of this lease is $11.56 (rounded). The monthly rental rate will be $6,282.17 (rounded), resulting in an annual lease amount of $75,386.00.

This property is owned by the CHS Development Company and leased in its entirety to the Medical University of South Carolina; which subleases 6,522 square feet to the Medical University Hospital Authority.

NEW LEASE AGREEMENT _____
RENEWAL LEASE AGREEMENT __X__

LANDLORD: Medical University of South Carolina

LANDLORD CONTACT: Rachel Jones, Leasing Manager, 792-5996

TENANT NAME AND CONTACT: Therapeutic Services, Sally Potts, Director, 792-4821

SOURCE OF FUNDS: Hospital General Operating Funds

LEASE TERMS:

TERM: One (1) year [7/1/2013-6/30/2014]

AMOUNT PER SQUARE FOOT: $11.56

ANNUALIZED LEASE COST: $75,386.00

TOTAL COST OF RENEWAL TERM: $75,386.00

EXTENDED TERM(S): One (1) term, one (1) year [7/1/2014-6/30/2015]

TOTAL AMOUNT OF EXTENDED TERM: $75,386.00

TOTAL AMOUNT INCLUDING EXTENDED TERMS: $150,772.00

OPERATING COSTS:

FULL SERVICE ___

NET __X__
A RESOLUTION

AUTHORIZING THE EXECUTION OF A LEASE-PURCHASE AGREEMENT PURSUANT TO THE STATE MASTER LEASE PROGRAM IN AN AMOUNT NOT TO EXCEED $22,000,000, RELATING TO THE ACQUISITION OF CERTAIN EQUIPMENT BY THE MEDICAL UNIVERSITY HOSPITAL AUTHORITY, AUTHORIZING THE EXECUTION OF OTHER NECESSARY DOCUMENTS, AND OTHER MATTERS RELATING THERETO.

FINDINGS OF FACT

As an incident to the adoption of this Authorizing Resolution (the "Resolution") and the entering into of a lease/purchase transaction described herein, the Board of Trustees of the Medical University Hospital Authority hereby finds:

A. The Medical University Hospital Authority (the "Authority") is a duly constituted agency and a political subdivision of the State of South Carolina.

B. The Board of Trustees of the Authority (the "Board of Trustees") has determined that there is an immediate need for the acquisition of certain equipment to replace and relocate the Energy Plant of the Main Hospital and Children's Hospital which is presently located within the flood plain of Charleston, as shown on Exhibit A attached hereto (the "Equipment"). The total cost of the Equipment is estimated to be $21,013,940.

C. Section 1-1-1020 of the Code of Laws of South Carolina 1976, as amended, provides that the Office of State Treasurer is authorized to provide financing arrangements under the Master Lease Program administered by the Office of State Treasurer (the "Master Lease Program") on behalf of the Authority.

D. The Director of Finance of the Authority has submitted a financing request under the Master Lease Program to finance the Equipment (the "Financing Request"). The Financing Request has been approved by the Office of State Treasurer.

E. Prior to finalizing the lease financing for the purchase of the Equipment, the Authority intends to pay all or a portion of the costs of Equipment and intends to reimburse itself from a portion of the proceeds of the lease financing. Treasury Regulation Section 1.150-2 promulgated under the Internal Revenue Code of 1986, as amended, provides for the reimbursement of such expenditures from the lease financing under certain conditions.

NOW, THEREFORE BE IT RESOLVED BY THE BOARD OF TRUSTEES OF THE AUTHORITY, AS FOLLOWS:

1. The Financing Request is hereby ratified, confirmed and approved and the Authority is hereby authorized to enter into a lease/purchase transaction under such terms and conditions as the Director of Finance deems appropriate to effectuate the financing in an amount not to exceed $22,000,000 ("Lease Amount") for the cost of the Equipment.

2. The President, Vice President for Clinical Operations and Executive Director, and Chief Financial Officer of the Authority (each an "Authorized Officer" and collectively, "Authorized Officers") are hereby authorized to enter into such agreements and execute such documents on behalf of the Authority
Authority as necessary for such financing, including an Equipment/Lease Purchase Agreement, an Acquisition Fund Agreement and any other documents necessary to secure such funds on behalf of the Authority to finance the Equipment. The Authorized Officers are each severally authorized and directed to take such acts, pay such costs and execute such other documents as are deemed appropriate and advisable to carry out the intent of this Resolution or to comply with the documents related to the lease/purchase transaction authorized by this Resolution.

3. Pursuant to Treasury Regulation Section 1.150-2 promulgated under the Internal Revenue Code of 1986, as amended, the Authority confirms its intention, as declared by its Chief Financial Officer at the Board of Trustees’ meeting on February 7, 2013, and as reflected in the Board of Trustees’ Minutes of such meeting, to reimburse itself from proceeds under the lease/purchase transaction authorized herein for expenditures relating to the purchase of the Equipment, which it pays for with its own funds not more than 60 days prior to the date of such official declaration of intent at the Board of Trustees’ meeting on February 7, 2013. The Authority expects the reimbursement to be funded in an amount not exceeding the Lease Amount. The Authority acknowledges the following: (i) any such reimbursement must be made not later than eighteen months after the later of the date on which the expenditure to be reimbursed is paid or the date on which the Equipment is placed in service or abandoned, but in no event more than three years after the date on which the expenditure to be reimbursed was paid; (ii) each of the costs to be reimbursed is of a type that is properly chargeable to a capital account or would be chargeable to a capital account with a proper election to do so; (iii) the Authority’s expectation to reimburse itself for costs of the Equipment which they pay before receiving the proceeds from the lease/purchase transaction authorized herein is reasonable; (iv) the Authority does not have a pattern of failing to reimburse itself for expenditures, which it has made and with respect to which resolutions similar to this Resolution have been adopted; (v) the funds applied to the temporary payment of the costs of the Equipment are needed on a long-term basis for other purposes and are not, therefore, available for the permanent payment of the Equipment costs; and (vi) no other funds of the Authority are reserved or otherwise set aside for the payment of costs of the Equipment for which reimbursement is expected.

4. All acts heretofore taken by the Board of Trustees or an Authorized Officer and any person authorized to act on behalf the Board of Trustees or an Authorized Officer, which acts have been authorized by this Resolution, are hereby severally ratified, confirmed, approved and adopted on behalf of the Authority.

5. This Resolution shall take effect immediately.
DONE IN MEETING DULY ASSEMBLED, this 11th day of April, 2013.

MEDICAL UNIVERSITY HOSPITAL AUTHORITY

[Signature]
Name: Thomas L. Stephenson
Title: Chairman

(SEAL)

Attest:

[Signature]
Name: Hugh B. Faulkner
Title: Secretary
CERTIFIED COPY OF AUTHORIZING RESOLUTION

I, the undersigned being the duly qualified and acting Secretary of the Board of Trustees of the Medical University Hospital Authority, do hereby certify that attached hereto is a copy of the Authorizing Resolution, enacted by the Board of Trustees at a meeting duly called and held on April 12, 2013, at which a quorum was present and acting throughout, which Resolution has been compared by me with the original thereof, and that such Resolution has been duly enacted and has not been modified, amended or repealed and is in full force and effect on and as of the date hereof in the form attached hereto.

IN WITNESS WHEREOF, I have hereunto set my hand this 11th day of April, 2013.

MEDICAL UNIVERSITY HOSPITAL AUTHORITY

(SEAL)

[Signature]

Name: Hugh B. Faulkner
Title: Secretary
Medical University Hospital Authority
Audit Committee
April 11, 2013
Minutes

Attendees:

Mr. William B. Hewitt, Chair
Dr. Stanley C. Baker
Mr. William H. Bingham, Sr.
Dr. Cotesworth P. Fishburne, Jr.
Dr. Harold Jablon
Dr. Donald R. Johnson II
Dr. E. Conyers O’Bryan, Jr.
Dr. Thomas C. Rowland, Jr.
Mr. Charles W. Schulze
Thomas L. Stephenson, Esquire
The Honorable Robin M. Tallon
Dr. Charles B. Thomas, Jr.
Dr. James E. Wiseman, Jr.

Mr. Hugh B. Faulkner
Dr. Raymond S. Greenberg
Ms. Susan H. Barnhart
Dr. Frank Clark
Dr. Phil Costello
Ms. Annette Drachman
Mr. Jim Fisher
Ms. Lisa Montgomery
Dr. Etta Pisano
Dr. Darlene Shaw
Dr. Mark Sothmann

Mr. Hewitt called the meeting to order.

**REGULAR Items**

**Item 22. Entrance Conference with KPMG.**

Mr. Milford McGuirt, Partner with KPMG, presented the 2013 External Audit Plan for MUSC, MUHA and MUSC Physicians. He presented a summary of professional services to be provided during the audit. He reviewed KPMG’s audit approach; timing of fieldwork, audit and focus areas. He also provided updates on higher education and healthcare industry as well as other regulatory and technical accounting updates.

Recommendation of Committee: That the report be received as information.

**Item 23. Report of the Office of Internal Audit.**

Ms. Susan Barnhart had distributed the results of internal audit reports and there being no questions, the reports were received as information.

Recommendation of Committee: That the report be received as information

**Item 24. Other Committee Business.** None

Respectfully Submitted,

Celeste Jordan