
LEGISLATIVE APPROPRIATIONS REQUEST
FISCAL YEARS 2026 AND 2027



Submitted to the Office of the Governor, Budget and Policy Division,
and the Legislative Budget Board

THE UNIVERSITY OF TEXAS
M. D. ANDERSON CANCER CENTER

August 2024

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Agency Code: 506	Agency Name: The University of Texas M. D. Anderson Cancer Center.	Prepared By: Tomas Guajardo	Date: August 2024	Request Level: Baseline
<p>For the schedules identified below, the U. T. M. D. Anderson Cancer Center either has no information to report or the schedule is not applicable. Accordingly, these schedules have been excluded from the U. T. M. D. Anderson Cancer Center Legislative Appropriations Request for the 2026-27 biennium.</p>				
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The University of Texas MD Anderson Cancer Center was created by the Texas Legislature in 1941 as a component of The University of Texas System. MD Anderson is one of the nation's original three Comprehensive Cancer Centers designated by the National Cancer Act of 1971 and is one of 57 Comprehensive Cancer Centers today.

U.S. News & World Report's "America's Best Hospitals" survey ranked MD Anderson as the top hospital in the nation for cancer care for 2024-25. The institution has ranked as one of the top two hospitals for cancer care since the magazine began its annual survey in 1990.

MD Anderson's mission is to eliminate cancer in Texas, the nation and the world through outstanding programs that integrate patient care, research and prevention and through education for undergraduate, graduate students, trainees, professionals, employees and the public.

Magnitude of the Cancer Problem

Cancer is the second most common cause of death in the United States. While cancer strikes at any age, 88% of all cancers occur in people age 50 and older. Over 147,000 Texans are estimated to be newly diagnosed with cancer in 2024 and approximately 44,000 Texans are estimated to die of the disease this year.

According to the American Cancer Society, an estimated 18 million Americans are living with a history of surviving cancer. The five-year survival rate for all forms of cancer combined has risen to 69%, up from 49% in the 1970's, meaning more Americans are living with a history of cancer and require medical follow-up. Those not cured are living longer as a result of earlier detection and improved therapies, but they require more medical resources.

Institutional Strategy

In 2021, MD Anderson launched a pivotal, multi-year strategy aimed at making the greatest impact on humanity in the institution's work to end cancer. Developed with direct involvement from front-line cancer fighters and through ideas curated from faculty, MD Anderson's new Strategy is anchored in its mission and grounded in its unwavering commitment to our stakeholders.

The strategy aligns the institution and its resources around three strategic themes: Reach, Breakthroughs and Value. Coupled with a purposefully designed execution framework, the Strategy drives cancer care that is more accessible in the communities that MD Anderson serves, develops high-impact research that improves people's health, and both defines and delivers high-value oncology care. The strategic themes also support signature philanthropy priorities that are deliberately linked to MD Anderson's Strategy.

Each theme contains a series of underlying strategic decisions and actions grounded in the same aspirational principle: to make the greatest impact on humanity to finally end cancer. The aims of each theme along with brief summaries of our progress in certain strategic decisions are provided below:

Reach: Make it easier for the patients and communities we serve to access our expertise to ultimately prevent disease and improve health.

MD Anderson aims to grow the number of Texans served by broadening our physical reach throughout the Texas Medical Center and planned expansion to Austin. We have sustained our virtual reach to patients in and beyond Houston in a manner many have come to expect since the pandemic. From Fiscal Years 2021 through 2023, MD Anderson engaged in 446,000 virtual visits, which is 22% of our total visits for that period. We also have expanded our reach through national and global partnerships. After creating a single national partnership model, we added Ochsner Health and RUSH University System for Health to our Cancer Network Partners. As part of our

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Global Oncology program, a collective approach to ending cancer in low- and middle-income countries, the institution collaborates with governments and mission-aligned organizations to advance cancer education, training, public policy and research initiatives. This year, we announced agreements with the International Atomic Energy Agency and the Pan American Health Organization, and we have more collaborations in progress.

Breakthroughs: Drive high-impact discovery research focused on unmet medical need and accelerate translation into meaningful improvements in health outcomes to become the No. 1 cancer research organization.

Decisions within our Breakthroughs theme include the acceleration and expansion of clinical trials and the building of a world-class data science program. OnCore, our clinical trial management system, was fully implemented in May 2023, leading to improved trial activation timelines and overall cost savings. In addition, we have restructured our Institutional Review Board, enhanced clinical trial availability in Houston-area locations, and explored platforms to match patients to trials. The launch of our Institute for Data Science in Oncology and the creation of five initial focus areas already is helping us learn from our data and patients to drive impactful change.

Value: Set new standards for high-touch, high-value cancer care.

Our teams continue to focus on driving high touch, high value care through the implementation of important initiatives such as goal concordant care. Through this effort, 90% of our Cancer Medicine providers have completed training to help facilitate empathic conversations with patients and their families and nearly 64% of patients complete advanced care planning by their third visit. Our Access Redesign efforts have enabled us to implement tools to increase visibility into the referral and intake process for patients, and now, nearly 85% of new patients are able to receive access to MD Anderson care within three months. In addition, we are implementing a comprehensive patient navigation program across the institution to improve the experience of patients and caregivers as well as providers and staff.

Importantly, MD Anderson is also taking a strategic, forward-looking effort to shape the future of nursing through our Nursing Transformation initiative. The Meyers Institute for Oncology Nursing will support and develop nurses throughout their careers by providing educational, professional and wellness-based resources tailored to cancer care nurses and nurse scientists. Finally, our collective pursuit toward becoming a high reliability organization has enabled us to maintain a five-star rating as well as the No.1 ranking in Patient Safety in Vizient's 2023 rankings.

MISSION OVERVIEW

Patient Care

Since 1944, more than 2 million patients have turned to MD Anderson for cancer care in the form of targeted therapy, surgery, chemotherapy, radiation therapy, immunotherapy or combinations of these and other treatments. MD Anderson pioneered the multidisciplinary approach to treating cancer, bringing together teams of experts across disciplines to collaborate on the best treatment plan for patients. MD Anderson experts focus solely on cancer and are renowned for treating all types, including rare or uncommon diseases.

In FY2023, more than 179,000 patients sought care at MD Anderson and over 37,000 of them were new patients. Over 9,600 patients participated in therapeutic clinical research exploring novel treatments, the largest such cancer program in the nation.

The institution is accredited by the Joint Commission, an organization that ensures patients receive the best and safest health care possible. MD Anderson is among a

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select group of hospitals nationwide who have earned five consecutive Magnet Recognition Program® designations from the American Nurses Credentialing Center . This designation recognizes exceptional professional nursing staff and the ways their practice translates into excellent patient care and quality outcomes .

A significant challenge for MD Anderson is managing growth amid increasing patient demand . The institution must balance the number of patients with the resources available to care for them while accounting for the rising costs of health care . As with all healthcare institutions, MD Anderson faces strong pressures as reimbursements from state and federal programs decline, and commercial and managed care carriers negotiate coverage limits for certain services and payment rates . In FY 2023, MD Anderson provided more than \$319 million in uncompensated care to uninsured and underinsured patients .

The Legislature provides funding to support MD Anderson's primary mission of patient care . It established the Cancer Center Operations Formula designed to support the institution's growth in patient care the same way that the current Health-Related Institutions (HRI) Instruction and Operations (I&O) Formula supports student growth for HRI . Based on Texas cancer patients served each year, the maximum increase in the Operations Formula cannot exceed the average increase in the I&O Formula for all HRI . Sustaining this critical support which recognizes MD Anderson's unique mission is the institution's highest budget priority .

Research

Important scientific knowledge gained in the laboratory is rapidly translated into clinical care at MD Anderson . Our research program is considered one of the most productive efforts in the world aimed solely at cancer . In FY 2023, the institution invested approximately \$1.2 billion in research .

MD Anderson continues to be a leader among its peers in the number of grants awarded and total amount of grant funding from the National Cancer Institute . MD Anderson holds six National Cancer Institute Specialized Programs of Research Excellence (SPORE) grants and one joint SPORE grant in melanoma, gastrointestinal, brain, leukemia, lung, ovarian and hepatocellular cancers . A leader in accelerating progress and increasing access to novel agents for patients, MD Anderson ranks among the top institutions nationwide in revenue derived from IP-related agreements and corporate strategic research alliances . MD Anderson boasts one of the largest and most effective clinical trials programs in the nation, which gives our oncologists years of experience with cancer treatments before the Food and Drug Administration approves them .

The Institute for Applied Cancer Science (IACS) is committed to apply our understanding of mechanisms driving tumor development and maintenance into the development of impactful small-molecule cancer drugs for our patients in need . IACS is part of MD Anderson's Therapeutics Discovery division, a unique group of clinicians, researchers and drug development experts working collaboratively to develop the next generation of targeted, immune- and cell-based therapies . Embedded within the nation's leading cancer center, the Therapeutics Discovery team leverages innovative academic science and clinical excellence to work with the bench at the bedside . Using this approach, IACS works closely with the Moon Shots® and platforms to advance new targeted therapies to patients quickly, safely and effectively .

The Sheikh Khalifa Bin Zayed Al Nahyan Institute for Personalized Cancer Therapy is an international center of clinical excellence focusing on using the latest advances in genetic information to develop safer, more effective treatments for patients on a case-by-case basis, commonly called precision medicine .

Significant Research Accomplishments

Each year, about 187,000 Americans are diagnosed with one of the three main types of blood cancers: leukemia, lymphoma and myeloma, and in each of these diseases our researchers are making exceptional strides . As the examples below show, we often are able to translate our findings into improvements in patient outcomes .

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Non-Hodgkin lymphoma (NHL) is one of the most common cancers in the United States and chronic lymphocytic leukemia (CLL) is the most common type of leukemia in adults. Treating cancer with living engineered cells is a revolutionary approach leading to robust and durable responses. Some of our experts have been focused on using cord blood-derived chimeric antigen receptor (CAR) natural killer (NK)-cell therapy. A 2024 study published in Nature Medicine showed that participants with several variants of these cancers responded to the CAR-NK therapy: complete responses one year after treatment were seen in 83% of patients with low grade-NHL, 50% of patients with CLL and 29% of patients with diffuse large B-cell lymphoma.

Another team is making strides for subset of patients with acute leukemias with specific genetic characteristics (KMT2A rearrangements – which are difficult to treat – or NPM1 mutations, which are the most common genetic alternation in acute myeloid leukemia). These patients have no specifically approved targeted therapies. Our scientists studied the oral medication revemeb, and in 2023 they reported significant activity in the journal Nature with an overall response rate in 53% of participants. Global confirmatory trials are underway.

Vaccines are one of the emerging areas for cancer prevention and treatment. MD Anderson is on the front lines of many different vaccine efforts, including for those at high risk of having their pancreatic or colorectal cancers return. These cancers are frequently driven by the Ras-oncogene making them hard to treat, A 2024 study published in Nature Medicine evaluated response to a lymph node-targeted cancer vaccine called ELI-002 in patients who had pancreatic and colorectal cancers with KRAS mutations. The study showed 84% of participants responded.

Moon Shots Program®

In 2012, MD Anderson embarked on a comprehensive effort to accelerate the pace of converting scientific discoveries into clinical advances and significantly reduce cancer-related mortality and suffering over the next decade. Cancer science has reached a point of conceptual and technological maturity, positioning the field to accelerate and systemize this effort. This program brings together teams of researchers and clinicians to mount comprehensive attacks on major cancers. They work as part of thirteen disease-focused initiatives and ten platforms to support the program's team-science approach and accelerate the translation of data and discoveries for patients' benefit. The program has received \$501 million in private philanthropic commitments and has attracted new grants and contracts in excess of \$777 million. The goal is for all cancers to become Moon Shot efforts.

The James P. Allison Institute & The Institute for Data Science in Oncology

In 2022, MD Anderson launched the James P. Allison Institute, a visionary research and innovation hub within MD Anderson designed to foster groundbreaking science, to develop new treatments and to bring the benefits of immunotherapy to all patients.

The Allison Institute will advance exceptional discovery, translational and clinical research to integrate immunobiology across disciplines and unlock the full potential of science and medicine for human health. The institute builds upon the legacy of its namesake, James P. Allison, Ph.D., who was awarded the 2018 Nobel Prize in Physiology or Medicine for his fundamental discoveries in T cell biology and his invention of ipilimumab, the first immune checkpoint inhibitor to treat cancer.

The Institute for Data Science in Oncology works to unlock the power of data and enable impactful change through data science by using intelligent systems to improve cancer patient safety and quality; streamlining operations to enable continuous monitoring and modeling of operational performance to enhance patient access and scheduling; and predicting outcomes for patients by finding optimal combinations of current and emerging treatments.

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The Institute for Cell Therapy Discovery and Innovation

The development of a cell therapy product is complex and requires integration of multiple disciplines with a common purpose. At MD Anderson, we have proven capability for leadership in the field of cell therapy by developing novel therapies such as genetically modified immune cells such as natural killer (NK) cells and virus specific cytotoxic T-lymphocytes (CTLs).

In late 2024, MD Anderson will launch the Institute for Cell Therapy Discovery and Innovation to emphasize its support and dedication to advancing innovative cell therapies for patients with cancer. We will also strive to broaden the scope of cell therapies beyond cancer, to address debilitating conditions such as autoimmune diseases and infections. Leveraging our extensive understanding in T cell and NK cell biology, cancer immunology and cancer genomics, alongside our expertise in clinical translation, we have assembled a world-class team with significant experience in research, development and manufacturing of cell and gene therapies for clinical application.

Education

In FY 2023, over 5,700 trainees took part in educational programs, including physicians, scientists, nurses and many health professionals. MD Anderson offers degrees in ten bachelor's programs and two master's programs in allied health disciplines in its School of Health Professions, educating 386 students. Notably, 90% of surveyed graduates stayed to work in Texas hospitals and diagnostic labs. This is a critical need area as the demand for allied health professionals increases.

While MD Anderson is proud to fulfill its education mission, the institution must rely on institutionally generated funds and grants to cover most of the costs of its education programs because of the small number of students that qualify for support under the HRI formulas.

More than 1,800 clinical residents and fellows come to MD Anderson each year to receive specialized training in the investigation and treatment of cancer. Over 470 graduate students are working on advanced degrees at the Graduate School of Biomedical Sciences, which MD Anderson operates jointly with UT Health. In addition, over 1,000 research trainees are taught in MD Anderson's laboratories. Accreditation by the Commission on Colleges of the Southern Association of Colleges and Schools affirms MD Anderson as a major teaching institution, recognizing the faculty for their influential role in educating graduate and undergraduate students.

Prevention

MD Anderson continues to set the standard in cancer prevention research and the translation of new knowledge into innovative, multidisciplinary care for patients, survivors and people at average or elevated risk of developing cancer. The Division of Cancer Prevention and Population Sciences is dedicated to eradicating cancer through pioneering research in the roles that biologic, genetic, environmental, behavioral and social factors play in cancer development and investigations of behavioral, surgical, medical and social interventions to prevent or reduce cancer risk.

In the context of the Moon Shots® effort, the institution is increasingly focused on cancer prevention and control programs in policy, education (public and professional) and services in the community through the Cancer Prevention and Control Platform. The Platform develops and implements evidence-based interventions in cancer prevention, screening, early detection and survivorship, to achieve a measurable and lasting reduction in the cancer burden. A significant focus is the impact of tobacco-related illnesses. The use of tobacco is one of the greatest public health menaces of our time, driving approximately 30% of all cancer deaths in the United States.

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This year, almost 500,000 Americans and 8 million people worldwide will die from tobacco-related illnesses.

Motivated by the daily suffering that we witness by patients and their families, a cross-functional team delivered a comprehensive program, called EndTobacco®, that recommends strategic and tactical actions in the areas of policy, education and community-based services that MD Anderson can take to address the tobacco burden within the institution and beyond in organizations and communities across the state, the nation, and the world. EndTobacco® is founded on best practices in tobacco control as established by the Centers for Disease Control and Prevention and the World Health Organization.

Human Resources and Facilities

Employees number over 26,000, including more than 1,900 faculty. MD Anderson was ranked among Forbes' list of "America's Best Large Employers for 2024" and as one of the nation's best places to work by Glassdoor.com. The institution was also recognized in the Forbes 2024 ranking of "the Best Employers for Women." The institution was also recognized in 2024 as one of the "Healthiest Employers in Texas" in recognition for our steadfast commitment to comprehensive wellness initiatives that support our employees' personal and professional wellness as well as programs that contribute to a healthier workplace environment. Additionally, MD Anderson was recognized by the American Heart Association at the Gold level for Healthy Workplace Culture.

MD Anderson is the largest freestanding cancer center in the world. Facilities in the Texas Medical Center (TMC) cover more than 16 million square feet and feature the latest equipment and infrastructure to support growing needs in outpatient and inpatient care, research, prevention and education.

The Keeling Center for Comparative Medicine and Research, located on 375 acres near the City of Bastrop, houses chimpanzees, rhesus monkeys, sheep, cattle, swine, chickens and rodents, and has an international reputation for innovation in breeding and managing many species vital to biomedical research at MD Anderson and all over the U.S. More than 150 personnel, including veterinarians, animal handlers, research technicians and administrative staff conduct research in cancer, HIV, hepatitis, obesity and vaccine development. The campus has earned an international reputation for laboratory animal science and comparative medicine as well as housing, care and re-socializing of chimpanzees.

The TMC3 initiative will enhance collaboration, innovation, translation and commercialization in the Texas Medical Center. The collaborative and commercialization life sciences potential of Houston is underleveraged when compared to smaller cities with fewer institutions and less philanthropic and National Institutes of Health funding. Founding institutions are UT Health, UT MD Anderson Cancer Center, Texas A&M University System and the Texas Medical Center. The recently completed TMC3 Collaborative Building houses MD Anderson and the other academic health care partners, creating a 43,000-square-foot joint research lab comprised of both lab and office/co-working space. The building includes an additional 14,000-square-foot space for strategic initiatives such as the Institute for Data Science in Oncology and the James P. Allison Institute.

Development of the translational research campus in the TMC Mid-Campus and on UT System Research Park is underway, including: four research buildings; collaborative space; shared core labs, office, meeting/conference/education space; building sites for industry; and parking. UT System institutions are building research facilities located in the UT Research Park, and focused on leveraging 2,000 investigators, staff and industry collaborators present in the UT Research Park, with a bridge connecting the South Campus to the TMC Mid-campus.

In 2021, MD Anderson received \$70 million in Capital Construction Assistance Projects (CCAP) revenue bond support for its dedicated research facility in the innovation

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hub. If the state considers CCAPs in the 89th Texas Legislature, we respectfully request consideration of funding to support the construction of a Bioscience Research Facility. A key to developing South Campus as a central hub for research development and innovation, this facility will support work in nearby South Campus Research Building 5 while also supporting our plan to vacate aging research facilities on North Campus to make space for a new inpatient tower. This facility will house a 26,500-cage vivarium—the first step in a long-range plan to consolidate and centralize vivarium space — and create shell space for future projects. MD Anderson has developed local care sites as well as national and international partnerships to deliver its high-quality cancer care outside of the main campus. Houston Area Locations are in communities throughout the greater Houston area.

Houston Area Locations

Greater Houston: League City, West Houston, Sugar Land, The Woodlands, The Woman’s Hospital of Texas (Gynecologic Oncology Clinic), Harris Health System’s Lyndon B. Johnson Hospital (MD Anderson Oncology Program), Northwest Houston (Surgical and Specialty Care)

Cancer Network - Partner Members

Banner MD Anderson Cancer Center (Gilbert, AZ); MD Anderson Cancer Center at Cooper (Camden, NJ); Baptist MD Anderson Cancer Center (Jacksonville, FL); Ochsner MD Anderson Cancer Center (southeastern LA); UT Health San Antonio; Community Health Network MD Anderson Cancer Center (Indianapolis, IN); Rush MD Anderson Cancer Center (Chicago, IL)

International Affiliate

MD Anderson Cancer Center Madrid (Spain)

SIGNIFICANT ACHIEVEMENTS

MD Anderson’s faculty is one of the most esteemed in the nation, including one Nobel Laureate, nine members of the National Academy of Medicine, eight National Academy of Sciences members, six American Academy of Arts and Sciences members and 50 American Association for the Advancement of Science fellows, 15 Association of American Physician members and 33 American Society of Clinical Investigation members.

The Historically Underutilized Business (HUB) and Federal Small Business Program in FY2023 achieved a significant milestone, surpassing \$100MM HUB expenditure for the second consecutive year. This is a testament to our unwavering commitment to the HUB Community. In November 2023, MD Anderson was awarded Corporation of the Year by the Houston Minority Supplier Diversity Council, a recognition that validates our commitment to growing Minority Business Enterprises. Also, in June 2024, MDACC was awarded the Supplier Diversity Champion Award by Subcontractor USA for our Outstanding Commitment to Diversity in Business. Also, the HUB Program Associate Director was awarded the R.A. Wiltz Minority Business Advocate of the Year by the Greater Houston Business Procurement Forum, a recognition for advocating for minorities, women, and service-disabled businesses.

STATE SUPPORT

General Revenue

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The GR appropriation, over \$ 220 million in FY2024, accounted for 3.8% of the total operating budgeted revenues prior to the COVID-19 pandemic, providing critical support for patient care, education, research and infrastructure. The FY 2026-27 request is at 100% of base FY 2024-25 funding with the exception of debt service. MD Anderson maximizes its leveraging of state funding FY 2023, the institution generated \$31.1 additional dollars for cancer patient care, education and research for each \$1 of GR; and \$47.70 in research support for every \$1 of GR from the state for research, illustrating a sound investment for Texas.

Tobacco Settlement Funds

The Legislature established a permanent \$100 million endowment for MD Anderson in 1999. The fund provided \$7.2 million in FY 2024 for tobacco-related research programs. A separate endowment for all HRIs provided \$2.7 million for these purposes. The following programs received settlement funds in FY 2024: \$6.4 million for Cancer Prevention initiatives including: Tobacco Treatment Program; Tobacco Research and Treatment Program; Tobacco Research and Treatment training program; EndTobacco® Program; and Cancer Prevention & Control Platform. It also provides \$1.0 million for Breast Medical Oncology, Molecular Carcinogenesis & Epigenetics, Genomic Medicine and Imaging Physics; and \$2.5 million for Research Equipment.

Required Statement on Criminal History

MD Anderson's policy is to obtain state criminal history information on non-faculty finalists considered for appointment to a security sensitive position and national data on faculty candidates, as allowed by Government Code Sec. 411.094 and Education Code Sec. 51.215. All positions are designated as security sensitive. Criminal background information may not be released or disclosed to any unauthorized person, except on court order.

EXCEPTIONAL ITEMS

1) Institute for Cell Therapy Discovery and Innovation

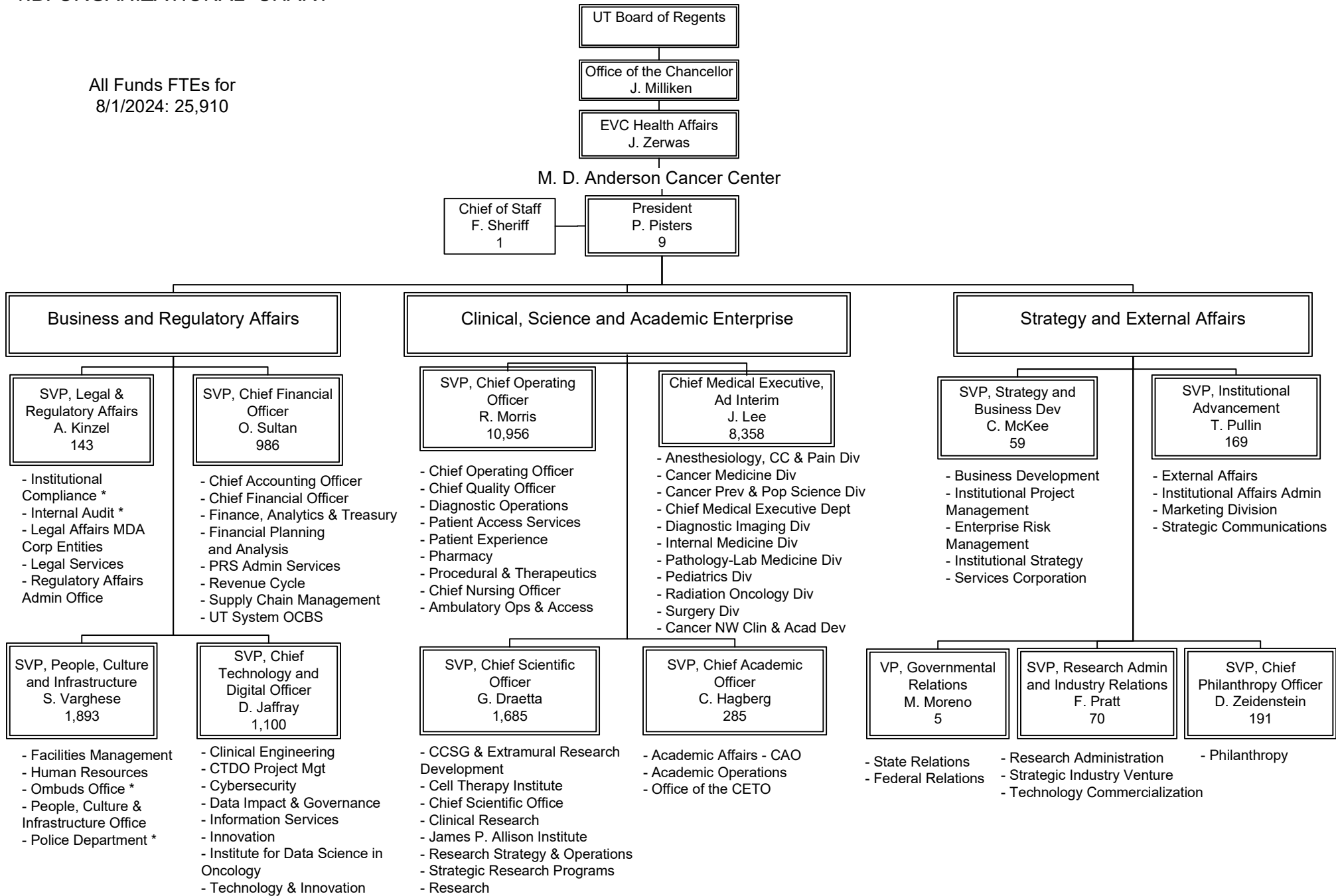
The Institute for Cell Therapy Discovery and Innovation aims to harness its expertise in T cell, B cell and NK cell engineering, along with our profound knowledge of cell therapy research and platforms being developed around the world, to generate immune cell products with a focus on expanding our capabilities beyond cord blood-derived NK cells. Our aim is to deliver targeted cell therapies to patients with cancer that are safe and highly effective. We will accomplish this by capitalizing on our existing platforms to develop novel cell therapies to address the unique challenges presented by different cancer types, thus providing patient benefit and maintaining our global leadership in cell therapy.

This \$30 million, one-time request would provide early funding for research and development, clinical trials and cell therapy manufacturing for potentially much more affordable and accessible cell therapies for patients.

1.B. ORGANIZATIONAL CHART

The University of Texas System

All Funds FTEs for
8/1/2024: 25,910



*These functions have an administrative reporting relationship to the SVP/Chief and a functioning reporting relationship to the President.

Budget Overview - Biennial Amounts
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 Appropriation Years: 2026-27

	GENERAL REVENUE FUNDS		GR DEDICATED		FEDERAL FUNDS		OTHER FUNDS		ALL FUNDS		EXCEPTIONAL ITEM FUNDS	
	2024-25	2026-27	2024-25	2026-27	2024-25	2026-27	2024-25	2026-27	2024-25	2026-27	2026-27	
Goal: 1. Provide Instructional and Operations Support												
1.1.1. Allied Health Professions Training	6,680,844		1,088,063						7,768,907			
1.1.2. Graduate Medical Education	1,898,420								1,898,420			
1.2.1. Cancer Center Operations	303,211,739								303,211,739			
1.3.1. Staff Group Insurance Premiums			49,636	50,997					49,636	50,997		
1.4.1. Texas Public Education Grants			200,819	210,985					200,819	210,985		
Total, Goal	311,791,003		1,338,518	261,982					313,129,521	261,982		
Goal: 2. Provide Research Support												
2.1.1. Research Enhancement	27,901,088								27,901,088			
Total, Goal	27,901,088								27,901,088			
Goal: 3. Provide Infrastructure Support												
3.1.1. E&G Space Support	66,441,706		317,350						66,759,056			
3.2.1. Ccap Revenue Bonds	34,816,748	34,794,398							34,816,748	34,794,398	17,440,000	
Total, Goal	101,258,454	34,794,398	317,350						101,575,804	34,794,398	17,440,000	
Goal: 5. Provide Non-formula Support												
5.1.1. Cord Blood And Cellular Therapy	4,000,000	4,000,000							4,000,000	4,000,000		
5.1.2. Breast Cancer Research Program	4,000,000	4,000,000							4,000,000	4,000,000		
5.2.1. Institutional Enhancement							11,905	4,328	11,905	4,328		
5.3.1. Exceptional Item Request												30,000,000
Total, Goal	8,000,000	8,000,000					11,905	4,328	8,011,905	8,004,328		30,000,000
Goal: 7. Tobacco Funds												
7.1.1. Tobacco Earnings - Ut Md Anderson							15,371,046	15,300,000	15,371,046	15,300,000		
7.1.2. Tobacco - Permanent Health Fund							6,079,400	5,567,468	6,079,400	5,567,468		
Total, Goal							21,450,446	20,867,468	21,450,446	20,867,468		
Total, Agency	448,950,545	42,794,398	1,655,868	261,982			21,462,351	20,871,796	472,068,764	63,928,176		47,440,000
Total FTEs									614.2	614.2		0.0

2.A. Summary of Base Request by Strategy

8/9/2024 9:35:49AM

89th Regular Session, Agency Submission, Version 1

Automated Budget and Evaluation System of Texas (ABEST)

506 The University of Texas M.D. Anderson Cancer Center

Goal / Objective / STRATEGY	Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
1 Provide Instructional and Operations Support					
1 <i>Instructional Programs</i>					
1 ALLIED HEALTH PROFESSIONS TRAINING (1)	3,726,123	3,883,124	3,885,783	0	0
2 GRADUATE MEDICAL EDUCATION (1)	889,512	949,210	949,210	0	0
2 <i>Cancer Center Operations</i>					
1 CANCER CENTER OPERATIONS (1)	140,407,990	151,605,870	151,605,869	0	0
3 <i>Operations - Staff Benefits</i>					
1 STAFF GROUP INSURANCE PREMIUMS	33,718	24,885	24,751	25,246	25,751
4 <i>Operations - Statutory Funds</i>					
1 TEXAS PUBLIC EDUCATION GRANTS	94,134	99,170	101,649	104,190	106,795
TOTAL, GOAL 1	\$145,151,477	\$156,562,259	\$156,567,262	\$129,436	\$132,546

2 Provide Research Support

1 *Research Activities*

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

2.A. Summary of Base Request by Strategy

8/9/2024 9:35:49AM

89th Regular Session, Agency Submission, Version 1

Automated Budget and Evaluation System of Texas (ABEST)

506 The University of Texas M.D. Anderson Cancer Center

Goal / Objective / STRATEGY	Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
1 RESEARCH ENHANCEMENT (1)	12,706,788	13,950,544	13,950,544	0	0
TOTAL, GOAL 2	\$12,706,788	\$13,950,544	\$13,950,544	\$0	\$0
3 Provide Infrastructure Support					
1 Operations and Maintenance					
1 E&G SPACE SUPPORT (1)	34,197,534	33,371,013	33,388,043	0	0
2 Infrastructure Support					
1 CCAP REVENUE BONDS	18,459,611	17,419,549	17,397,199	17,397,199	17,397,199
TOTAL, GOAL 3	\$52,657,145	\$50,790,562	\$50,785,242	\$17,397,199	\$17,397,199
5 Provide Non-formula Support					
1 Research					
1 CORD BLOOD AND CELLULAR THERAPY	1,389,551	2,000,000	2,000,000	2,000,000	2,000,000
2 BREAST CANCER RESEARCH PROGRAM	1,444,000	2,000,000	2,000,000	2,000,000	2,000,000
2 Institutional					

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

2.A. Summary of Base Request by Strategy

8/9/2024 9:35:49AM

89th Regular Session, Agency Submission, Version 1

Automated Budget and Evaluation System of Texas (ABEST)

506 The University of Texas M.D. Anderson Cancer Center

Goal / Objective / STRATEGY	Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
1 INSTITUTIONAL ENHANCEMENT	0	5,741	6,164	2,164	2,164
<u>3</u> <i>Exceptional Item Request</i>					
1 EXCEPTIONAL ITEM REQUEST	0	0	0	0	0
TOTAL, GOAL 5	\$2,833,551	\$4,005,741	\$4,006,164	\$4,002,164	\$4,002,164
<u>7</u> Tobacco Funds					
<u>1</u> <i>Tobacco Earnings for Research</i>					
1 TOBACCO EARNINGS - UT MD ANDERSON	8,895,033	7,117,176	8,253,870	7,650,000	7,650,000
2 TOBACCO - PERMANENT HEALTH FUND	3,320,244	2,716,554	3,362,846	2,783,734	2,783,734
TOTAL, GOAL 7	\$12,215,277	\$9,833,730	\$11,616,716	\$10,433,734	\$10,433,734
TOTAL, AGENCY STRATEGY REQUEST	\$225,564,238	\$235,142,836	\$236,925,928	\$31,962,533	\$31,965,643
TOTAL, AGENCY RIDER APPROPRIATIONS REQUEST*				\$0	\$0
GRAND TOTAL, AGENCY REQUEST	\$225,564,238	\$235,142,836	\$236,925,928	\$31,962,533	\$31,965,643

2.A. Summary of Base Request by Strategy

8/9/2024 9:35:49AM

89th Regular Session, Agency Submission, Version 1

Automated Budget and Evaluation System of Texas (ABEST)

506 The University of Texas M.D. Anderson Cancer Center

Goal / Objective / STRATEGY	Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
METHOD OF FINANCING:					
General Revenue Funds:					
1 General Revenue Fund	212,574,027	224,486,448	224,464,097	21,397,199	21,397,199
SUBTOTAL	\$212,574,027	\$224,486,448	\$224,464,097	\$21,397,199	\$21,397,199
General Revenue Dedicated Funds:					
704 Est Bd Authorized Tuition Inc	97,932	106,346	109,005	0	0
770 Est. Other Educational & General	677,002	710,571	729,946	129,436	132,546
SUBTOTAL	\$774,934	\$816,917	\$838,951	\$129,436	\$132,546
Other Funds:					
802 Lic Plate Trust Fund No. 0802, est	0	5,741	6,164	2,164	2,164
810 Perm Health Fund Higher Ed, est	3,320,244	2,716,554	3,362,846	2,783,734	2,783,734
812 Perm Endow FD UTMD AND, estimated	8,895,033	7,117,176	8,253,870	7,650,000	7,650,000
SUBTOTAL	\$12,215,277	\$9,839,471	\$11,622,880	\$10,435,898	\$10,435,898
TOTAL, METHOD OF FINANCING	\$225,564,238	\$235,142,836	\$236,925,928	\$31,962,533	\$31,965,643

*Rider appropriations for the historical years are included in the strategy amounts.

2.B. Summary of Base Request by Method of Finance
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

8/9/2024 9:35:50AM

Agency code: **506** Agency name: **The University of Texas M.D. Anderson Cancer Center**

METHOD OF FINANCING	Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
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GENERAL REVENUE

1 General Revenue Fund

REGULAR APPROPRIATIONS

Regular Appropriations from MOF Table (2022-23 GAA)

\$199,936,197	\$0	\$0	\$0	\$0
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Regular Appropriations from MOF Table (2024-25 GAA)

\$0	\$220,380,156	\$220,357,806	\$0	\$0
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Regular Appropriations from MOF Table (2026-27 GAA)

\$0	\$0	\$0	\$21,397,199	\$21,397,199
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RIDER APPROPRIATION

Art IX, Sec 17.47 Additional Funding for Formula Funding

\$5,505,869	\$0	\$0	\$0	\$0
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TRANSFERS

SB 8, 3rd Called Session, 87th Legislature, Section 10

\$7,131,961	\$0	\$0	\$0	\$0
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Comments: Proportional share of transfer from THECB for funding associated with SB52 CCAP authorizations

2.B. Summary of Base Request by Method of Finance
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

8/9/2024 9:35:50AM

Agency code: **506** Agency name: **The University of Texas M.D. Anderson Cancer Center**

METHOD OF FINANCING	Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
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GENERAL REVENUE

SUPPLEMENTAL, SPECIAL OR EMERGENCY APPROPRIATIONS

SB 30, 88th Leg, Regular Session

\$8,212,583	\$0	\$0	\$0	\$0
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SB 30, 88th Leg, Regular Session

\$(8,212,583)	\$8,212,583	\$0	\$0	\$0
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SB 30, 88th Leg, Regular Session

\$0	\$(4,106,291)	\$4,106,291	\$0	\$0
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TOTAL, General Revenue Fund

\$212,574,027	\$224,486,448	\$224,464,097	\$21,397,199	\$21,397,199
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TOTAL, ALL GENERAL REVENUE

\$212,574,027	\$224,486,448	\$224,464,097	\$21,397,199	\$21,397,199
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GENERAL REVENUE FUND - DEDICATED

704 GR Dedicated - Estimated Board Authorized Tuition Increases Account No. 704

REGULAR APPROPRIATIONS

Regular Appropriations from MOF Table (2022-23 GAA)

\$65,848	\$0	\$0	\$0	\$0
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2.B. Summary of Base Request by Method of Finance

8/9/2024 9:35:50AM

89th Regular Session, Agency Submission, Version 1

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 506		Agency name: The University of Texas M.D. Anderson Cancer Center				
METHOD OF FINANCING		Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
<u>GENERAL REVENUE FUND - DEDICATED</u>						
	Regular Appropriations from MOF Table (2024-25 GAA)	\$0	\$81,556	\$81,556	\$0	\$0
	<i>BASE ADJUSTMENT</i>					
	Revised Receipts	\$32,084	\$24,790	\$27,449	\$0	\$0
TOTAL,	GR Dedicated - Estimated Board Authorized Tuition Increases Account No. 704	\$97,932	\$106,346	\$109,005	\$0	\$0
770	GR Dedicated - Estimated Other Educational and General Income Account No. 770					
	<i>REGULAR APPROPRIATIONS</i>					
	Regular Appropriations from MOF Table (2022-23 GAA)	\$857,886	\$0	\$0	\$0	\$0
	Regular Appropriations from MOF Table (2024-25 GAA)	\$0	\$662,054	\$662,054	\$0	\$0
	Regular Appropriations from MOF Table (2026-27 GAA)	\$0	\$0	\$0	\$129,436	\$132,546
	<i>BASE ADJUSTMENT</i>					

2.B. Summary of Base Request by Method of Finance
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

8/9/2024 9:35:50AM

Agency code: 506		Agency name: The University of Texas M.D. Anderson Cancer Center				
METHOD OF FINANCING		Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
<u>GENERAL REVENUE FUND - DEDICATED</u>						
	Revised Receipts	\$(180,884)	\$48,517	\$67,892	\$0	\$0
TOTAL,	GR Dedicated - Estimated Other Educational and General Income Account No. 770	\$677,002	\$710,571	\$729,946	\$129,436	\$132,546
TOTAL GENERAL REVENUE FUND - DEDICATED - 704, 708 & 770						
		\$774,934	\$816,917	\$838,951	\$129,436	\$132,546
TOTAL, ALL	GENERAL REVENUE FUND - DEDICATED	\$774,934	\$816,917	\$838,951	\$129,436	\$132,546
TOTAL,	GR & GR-DEDICATED FUNDS	\$213,348,961	\$225,303,365	\$225,303,048	\$21,526,635	\$21,529,745
<u>OTHER FUNDS</u>						
802	License Plate Trust Fund Account No. 0802, estimated <i>REGULAR APPROPRIATIONS</i>					
	Regular Appropriations from MOF Table (2022-23 GAA)	\$2,164	\$0	\$0	\$0	\$0
	Regular Appropriations from MOF Table (2024-25 GAA)	\$0	\$2,164	\$2,164	\$0	\$0

2.B. Summary of Base Request by Method of Finance

8/9/2024 9:35:50AM

89th Regular Session, Agency Submission, Version 1

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 506		Agency name: The University of Texas M.D. Anderson Cancer Center				
METHOD OF FINANCING		Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
<u>OTHER FUNDS</u>						
Regular Appropriations from MOF Table (2026-27 GAA)		\$0	\$0	\$0	\$2,164	\$2,164
<i>UNEXPENDED BALANCES AUTHORITY</i>						
Art III Special Provisions Section 55, UB (2022-23 GAA)		\$6,042	\$0	\$0	\$0	\$0
Art III Special Provisions Section 53, UB (2024-25 GAA)		\$(7,577)	\$7,577	\$0	\$0	\$0
Art III Special Provisions Section 53, UB (2024-25 GAA)		\$0	\$(4,000)	\$4,000	\$0	\$0
<i>BASE ADJUSTMENT</i>						
Revised Receipts		\$(629)	\$0	\$0	\$0	\$0
TOTAL,	License Plate Trust Fund Account No. 0802, estimated	\$0	\$5,741	\$6,164	\$2,164	\$2,164

810 Permanent Health Fund for Higher Education, estimated

REGULAR APPROPRIATIONS

2.B. Summary of Base Request by Method of Finance

8/9/2024 9:35:50AM

89th Regular Session, Agency Submission, Version 1

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 506	Agency name: The University of Texas M.D. Anderson Cancer Center				
METHOD OF FINANCING	Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
<u>OTHER FUNDS</u>					
Regular Appropriations from MOF Table (2022-23 GAA)	\$2,415,604	\$0	\$0	\$0	\$0
Regular Appropriations from MOF Table (2024-25 GAA)	\$0	\$2,561,891	\$2,561,891	\$0	\$0
Regular Appropriations from MOF Table (2026-27 GAA)	\$0	\$0	\$0	\$2,783,734	\$2,783,734
<i>UNEXPENDED BALANCES AUTHORITY</i>					
M.D. Anderson Art III, Rider 5 UB Authority (2022-23 GAA)	\$1,204,387	\$0	\$0	\$0	\$0
M.D. Anderson Art III, Rider 5 UB Authority (2024-25 GAA)	\$(502,901)	\$502,901	\$0	\$0	\$0
M.D. Anderson Art III, Rider 5 UB Authority (2024-25 GAA)	\$0	\$(500,000)	\$500,000	\$0	\$0
<i>BASE ADJUSTMENT</i>					

2.B. Summary of Base Request by Method of Finance
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

8/9/2024 9:35:50AM

Agency code: 506		Agency name: The University of Texas M.D. Anderson Cancer Center				
METHOD OF FINANCING		Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
<u>OTHER FUNDS</u>						
	Revised Receipts - Distribution adjustment	\$146,287	\$72,650	\$221,843	\$0	\$0
	Revised Receipts - Interest	\$56,867	\$79,112	\$79,112	\$0	\$0
TOTAL,	Permanent Health Fund for Higher Education, estimated	\$3,320,244	\$2,716,554	\$3,362,846	\$2,783,734	\$2,783,734
<u>812</u>	Permanent Endowment Fund, UT MD Anderson Cancer Center, estimated					
	<i>REGULAR APPROPRIATIONS</i>					
	Regular Appropriations from MOF Table (2022-23 GAA)	\$6,550,000	\$0	\$0	\$0	\$0
	Regular Appropriations from MOF Table (2024-25 GAA)	\$0	\$6,890,000	\$6,890,000	\$0	\$0
	Regular Appropriations from MOF Table (2026-27 GAA)	\$0	\$0	\$0	\$7,650,000	\$7,650,000
	<i>UNEXPENDED BALANCES AUTHORITY</i>					

2.B. Summary of Base Request by Method of Finance

8/9/2024 9:35:50AM

89th Regular Session, Agency Submission, Version 1

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 506		Agency name: The University of Texas M.D. Anderson Cancer Center				
METHOD OF FINANCING		Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
<u>OTHER FUNDS</u>						
M.D. Anderson Art III Rider 5, UB Authority (2022-23 GAA)		\$2,204,218	\$0	\$0	\$0	\$0
M.D. Anderson Art III Rider 5, UB Authority (2024-25 GAA)		\$(273,306)	\$273,306	\$0	\$0	\$0
M.D. Anderson Art III Rider 5, UB Authority (2024-25 GAA)		\$0	\$(500,000)	\$500,000	\$0	\$0
<i>BASE ADJUSTMENT</i>						
Revised Receipts - Distribution Adjustments		\$340,000	\$350,000	\$760,000	\$0	\$0
Revised Receipts - Interest		\$74,121	\$103,870	\$103,870	\$0	\$0
TOTAL,	Permanent Endowment Fund, UT MD Anderson Cancer Center, estimated	\$8,895,033	\$7,117,176	\$8,253,870	\$7,650,000	\$7,650,000
TOTAL, ALL	OTHER FUNDS	\$12,215,277	\$9,839,471	\$11,622,880	\$10,435,898	\$10,435,898

2.B. Summary of Base Request by Method of Finance

8/9/2024 9:35:50AM

89th Regular Session, Agency Submission, Version 1

Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 506	Agency name: The University of Texas M.D. Anderson Cancer Center				
METHOD OF FINANCING	Exp 2023	Est 2024	Bud 2025	Req 2026	Req 2027
GRAND TOTAL	\$225,564,238	\$235,142,836	\$236,925,928	\$31,962,533	\$31,965,643

FULL-TIME-EQUIVALENT POSITIONS

REGULAR APPROPRIATIONS

Regular Appropriations from MOF Table (2022-23 GAA)	757.9	0.0	0.0	0.0	0.0
Regular Appropriations from MOF Table (2024-25 GAA)	0.0	700.9	700.9	0.0	0.0
Regular Appropriations from MOF Table (2026-27 GAA)	0.0	0.0	0.0	614.2	614.2

RIDER APPROPRIATION

Art IX, Sec 17.47 - Additional Funding for Formula Funding (2022-23 GAA)	44.0	0.0	0.0	0.0	0.0
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UNAUTHORIZED NUMBER OVER (BELOW) CAP

Unauthorized number over (below) the cap	(198.7)	(77.7)	(86.7)	0.0	0.0
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TOTAL, ADJUSTED FTES	603.2	623.2	614.2	614.2	614.2
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NUMBER OF 100% FEDERALLY FUNDED FTEs

2.C. Summary of Base Request by Object of Expense

8/9/2024 9:35:50AM

89th Regular Session, Agency Submission, Version 1
Automated Budget and Evaluation System of Texas (ABEST)

506 The University of Texas M.D. Anderson Cancer Center

OBJECT OF EXPENSE	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
1001 SALARIES AND WAGES	\$183,851,989	\$195,699,357	\$195,697,972	\$5,538,012	\$5,538,012
1002 OTHER PERSONNEL COSTS	\$1,226,389	\$831,009	\$830,875	\$772,392	\$772,897
1005 FACULTY SALARIES	\$13,645,335	\$13,586,943	\$13,586,943	\$1,117,735	\$1,117,735
2001 PROFESSIONAL FEES AND SERVICES	\$474,296	\$448,244	\$448,244	\$354,355	\$354,355
2003 CONSUMABLE SUPPLIES	\$282,402	\$256,692	\$256,692	\$124,990	\$124,990
2004 UTILITIES	\$1,170,662	\$1,087,478	\$1,097,142	\$0	\$0
2005 TRAVEL	\$0	\$6,710	\$0	\$0	\$0
2007 RENT - MACHINE AND OTHER	\$0	\$6,165	\$12,875	\$0	\$0
2008 DEBT SERVICE	\$18,459,611	\$17,419,549	\$17,397,199	\$17,397,199	\$17,397,199
2009 OTHER OPERATING EXPENSE	\$5,413,423	\$3,436,814	\$3,448,223	\$3,116,865	\$3,116,865
4000 GRANTS	\$94,134	\$104,911	\$107,813	\$106,354	\$108,959
5000 CAPITAL EXPENDITURES	\$945,997	\$2,258,964	\$4,041,950	\$3,434,631	\$3,434,631
OOE Total (Excluding Riders)	\$225,564,238	\$235,142,836	\$236,925,928	\$31,962,533	\$31,965,643
OOE Total (Riders)					
Grand Total	\$225,564,238	\$235,142,836	\$236,925,928	\$31,962,533	\$31,965,643

2.D. Summary of Base Request Objective Outcomes

8/9/2024 9:35:51AM

89th Regular Session, Agency Submission, Version 1
Automated Budget and Evaluation system of Texas (ABEST)

506 The University of Texas M.D. Anderson Cancer Center

Goal/ Objective / Outcome	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
1 Provide Instructional and Operations Support					
1 Instructional Programs					
KEY 14 Percent Allied Health Grads Passing Certif/Licensure Exam First Try	95.00%	90.00%	90.00%	90.00%	90.00%
KEY 15 Percent Allied Health Graduates Licensed or Certified in Texas	95.00%	95.00%	95.00%	95.00%	95.00%
2 Cancer Center Operations					
KEY 1 Percent of Medical Residency Completers Practicing in Texas	37.00%	35.00%	35.00%	35.00%	35.00%
KEY 2 Total Uncompensated Care Provided by Faculty	108,578,025.00	110,000,000.00	115,000,000.00	115,000,000.00	115,000,000.00
KEY 4 Administrative (Instit Support) Cost As % of Total Expenditures	2.90%	3.50%	3.50%	3.50%	3.50%
KEY 5 Total Uncompensated Care Provided in State-owned Facilities	218,284,975.00	220,000,000.00	225,000,000.00	225,000,000.00	225,000,000.00
2 Provide Research Support					
1 Research Activities					
KEY 1 Total External Research Expenditures	727,353,974.00	740,000,000.00	750,000,000.00	750,000,000.00	750,000,000.00
2 External Research Expends As % of State Appropriations for Research	4,680.00%	4,700.00%	4,750.00%	4,750.00%	4,750.00%

2.E. Summary of Exceptional Items Request
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

DATE: 8/9/2024
 TIME : 9:35:51AM

Agency code: 506

Agency name: The University of Texas M.D. Anderson Cancer Center

Priority	Item	2026			2027			Biennium	
		GR and GR/GR Dedicated	All Funds	FTEs	GR and GR Dedicated	All Funds	FTEs	GR and GR Dedicated	All Funds
1	Cell Therapy Institute	\$15,000,000	\$15,000,000		\$15,000,000	\$15,000,000		\$30,000,000	\$30,000,000
2	BioSciences Research Facility	\$8,720,000	\$8,720,000		\$8,720,000	\$8,720,000		\$17,440,000	\$17,440,000
Total, Exceptional Items Request		\$23,720,000	\$23,720,000		\$23,720,000	\$23,720,000		\$47,440,000	\$47,440,000

Method of Financing

General Revenue	\$23,720,000	\$23,720,000		\$23,720,000	\$23,720,000		\$47,440,000	\$47,440,000
General Revenue - Dedicated								
Federal Funds								
Other Funds								
	\$23,720,000	\$23,720,000		\$23,720,000	\$23,720,000		\$47,440,000	\$47,440,000

Full Time Equivalent Positions

Number of 100% Federally Funded FTEs

2.F. Summary of Total Request by Strategy
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

DATE : 8/9/2024
 TIME : 9:35:51AM

Agency code: 506 Agency name: The University of Texas M.D. Anderson Cancer Center

Goal/Objective/STRATEGY	Base 2026	Base 2027	Exceptional 2026	Exceptional 2027	Total Request 2026	Total Request 2027
1 Provide Instructional and Operations Support						
<i>1 Instructional Programs</i>						
1 ALLIED HEALTH PROFESSIONS TRAINING	\$0	\$0	\$0	\$0	\$0	\$0
2 GRADUATE MEDICAL EDUCATION	0	0	0	0	0	0
<i>2 Cancer Center Operations</i>						
1 CANCER CENTER OPERATIONS	0	0	0	0	0	0
<i>3 Operations - Staff Benefits</i>						
1 STAFF GROUP INSURANCE PREMIUMS	25,246	25,751	0	0	25,246	25,751
<i>4 Operations - Statutory Funds</i>						
1 TEXAS PUBLIC EDUCATION GRANTS	104,190	106,795	0	0	104,190	106,795
TOTAL, GOAL 1	\$129,436	\$132,546	\$0	\$0	\$129,436	\$132,546
2 Provide Research Support						
<i>1 Research Activities</i>						
1 RESEARCH ENHANCEMENT	0	0	0	0	0	0
TOTAL, GOAL 2	\$0	\$0	\$0	\$0	\$0	\$0
3 Provide Infrastructure Support						
<i>1 Operations and Maintenance</i>						
1 E&G SPACE SUPPORT	0	0	0	0	0	0
<i>2 Infrastructure Support</i>						
1 CCAP REVENUE BONDS	17,397,199	17,397,199	8,720,000	8,720,000	26,117,199	26,117,199
TOTAL, GOAL 3	\$17,397,199	\$17,397,199	\$8,720,000	\$8,720,000	\$26,117,199	\$26,117,199

2.F. Summary of Total Request by Strategy
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

DATE : 8/9/2024
 TIME : 9:35:51AM

Agency code: 506 Agency name: The University of Texas M.D. Anderson Cancer Center

Goal/Objective/STRATEGY	Base 2026	Base 2027	Exceptional 2026	Exceptional 2027	Total Request 2026	Total Request 2027
5 Provide Non-formula Support						
<i>1 Research</i>						
1 CORD BLOOD AND CELLULAR THERAPY	\$2,000,000	\$2,000,000	\$0	\$0	\$2,000,000	\$2,000,000
2 BREAST CANCER RESEARCH PROGRAM	2,000,000	2,000,000	0	0	2,000,000	2,000,000
<i>2 Institutional</i>						
1 INSTITUTIONAL ENHANCEMENT	2,164	2,164	0	0	2,164	2,164
<i>3 Exceptional Item Request</i>						
1 EXCEPTIONAL ITEM REQUEST	0	0	15,000,000	15,000,000	15,000,000	15,000,000
TOTAL, GOAL 5	\$4,002,164	\$4,002,164	\$15,000,000	\$15,000,000	\$19,002,164	\$19,002,164
7 Tobacco Funds						
<i>1 Tobacco Earnings for Research</i>						
1 TOBACCO EARNINGS - UT MD ANDERSON	7,650,000	7,650,000	0	0	7,650,000	7,650,000
2 TOBACCO - PERMANENT HEALTH FUND	2,783,734	2,783,734	0	0	2,783,734	2,783,734
TOTAL, GOAL 7	\$10,433,734	\$10,433,734	\$0	\$0	\$10,433,734	\$10,433,734
TOTAL, AGENCY STRATEGY REQUEST	\$31,962,533	\$31,965,643	\$23,720,000	\$23,720,000	\$55,682,533	\$55,685,643
TOTAL, AGENCY RIDER APPROPRIATIONS REQUEST						
GRAND TOTAL, AGENCY REQUEST	\$31,962,533	\$31,965,643	\$23,720,000	\$23,720,000	\$55,682,533	\$55,685,643

2.F. Summary of Total Request by Strategy
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

DATE : 8/9/2024
 TIME : 9:35:51AM

Agency code: 506 Agency name: The University of Texas M.D. Anderson Cancer Center

Goal/Objective/STRATEGY	Base 2026	Base 2027	Exceptional 2026	Exceptional 2027	Total Request 2026	Total Request 2027
General Revenue Funds:						
1 General Revenue Fund	\$21,397,199	\$21,397,199	\$23,720,000	\$23,720,000	\$45,117,199	\$45,117,199
	\$21,397,199	\$21,397,199	\$23,720,000	\$23,720,000	\$45,117,199	\$45,117,199
General Revenue Dedicated Funds:						
704 Est Bd Authorized Tuition Inc	0	0	0	0	0	0
770 Est. Other Educational & General	129,436	132,546	0	0	129,436	132,546
	\$129,436	\$132,546	\$0	\$0	\$129,436	\$132,546
Other Funds:						
802 Lic Plate Trust Fund No. 0802, est	2,164	2,164	0	0	2,164	2,164
810 Perm Health Fund Higher Ed, est	2,783,734	2,783,734	0	0	2,783,734	2,783,734
812 Perm Endow FD UTMD AND, estimated	7,650,000	7,650,000	0	0	7,650,000	7,650,000
	\$10,435,898	\$10,435,898	\$0	\$0	\$10,435,898	\$10,435,898
TOTAL, METHOD OF FINANCING	\$31,962,533	\$31,965,643	\$23,720,000	\$23,720,000	\$55,682,533	\$55,685,643
FULL TIME EQUIVALENT POSITIONS	614.2	614.2	0.0	0.0	614.2	614.2

2.G. Summary of Total Request Objective Outcomes
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation system of Texas (ABEST)

Date : 8/9/2024
 Time: 9:35:52AM

Agency code: **506** Agency name: **The University of Texas M.D. Anderson Cancer Center**

Goal/ Objective / Outcome

		BL 2026	BL 2027	Excp 2026	Excp 2027	Total Request 2026	Total Request 2027
1	Provide Instructional and Operations Support						
1	<i>Instructional Programs</i>						
KEY	14 Percent Allied Health Grads Passing Certif/Licensure Exam First Try						
		90.00%	90.00%			90.00%	90.00%
KEY	15 Percent Allied Health Graduates Licensed or Certified in Texas						
		95.00%	95.00%			95.00%	95.00%
2	<i>Cancer Center Operations</i>						
KEY	1 Percent of Medical Residency Completers Practicing in Texas						
		35.00%	35.00%			35.00%	35.00%
KEY	2 Total Uncompensated Care Provided by Faculty						
		115,000,000.00	115,000,000.00			115,000,000.00	115,000,000.00
KEY	4 Administrative (Instit Support) Cost As % of Total Expenditures						
		3.50%	3.50%			3.50%	3.50%
KEY	5 Total Uncompensated Care Provided in State-owned Facilities						
		225,000,000.00	225,000,000.00			225,000,000.00	225,000,000.00
2	Provide Research Support						
1	<i>Research Activities</i>						
KEY	1 Total External Research Expenditures						
		750,000,000.00	750,000,000.00			750,000,000.00	750,000,000.00

2.G. Summary of Total Request Objective Outcomes
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation system of Texas (ABEST)

Date : 8/9/2024
 Time: 9:35:52AM

Agency code: **506**

Agency name: **The University of Texas M.D. Anderson Cancer Center**

Goal/ Objective / Outcome

	BL 2026	BL 2027	Excp 2026	Excp 2027	Total Request 2026	Total Request 2027
2 External Research Expends As % of State Appropriations for Research	4,750.00%	4,750.00%			4,750.00%	4,750.00%

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 1 Provide Instructional and Operations Support
 OBJECTIVE: 1 Instructional Programs
 STRATEGY: 1 Allied Health Professions Training

Service Categories:

Service: 19 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026 ⁽¹⁾	BL 2027 ⁽¹⁾
Efficiency Measures:						
KEY 1	Avg Cost of Resident Undergraduate Tuition and Fees for 15 Sch	2,192.00	2,192.00	2,192.00	2,192.00	2,192.00
Explanatory/Input Measures:						
KEY 1	Minority Admissions As % of Total First-Year Admissions (All Schools)	45.60 %	40.00 %	40.00 %	40.00 %	40.00 %
KEY 4	Average Financial Aid Award per Full-Time Student	11,958.00	12,000.00	12,000.00	12,000.00	12,000.00
KEY 5	Percent of Full-Time Students Receiving Financial Aid	68.00 %	67.00 %	67.00 %	67.00 %	67.00 %
Objects of Expense:						
1001	SALARIES AND WAGES	\$1,953,182	\$1,782,129	\$1,782,129	\$0	\$0
1005	FACULTY SALARIES	\$1,772,941	\$1,749,426	\$1,749,426	\$0	\$0
2001	PROFESSIONAL FEES AND SERVICES	\$0	\$67,431	\$67,431	\$0	\$0
2003	CONSUMABLE SUPPLIES	\$0	\$110,674	\$110,674	\$0	\$0
2005	TRAVEL	\$0	\$6,710	\$0	\$0	\$0
2007	RENT - MACHINE AND OTHER	\$0	\$6,165	\$12,875	\$0	\$0
2009	OTHER OPERATING EXPENSE	\$0	\$131,785	\$134,444	\$0	\$0
5000	CAPITAL EXPENDITURES	\$0	\$28,804	\$28,804	\$0	\$0

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 1 Provide Instructional and Operations Support
 OBJECTIVE: 1 Instructional Programs
 STRATEGY: 1 Allied Health Professions Training

Service Categories:

Service: 19 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026 ⁽¹⁾	BL 2027 ⁽¹⁾
TOTAL, OBJECT OF EXPENSE		\$3,726,123	\$3,883,124	\$3,885,783	\$0	\$0
Method of Financing:						
1	General Revenue Fund	\$3,204,403	\$3,340,422	\$3,340,422	\$0	\$0
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$3,204,403	\$3,340,422	\$3,340,422	\$0	\$0
Method of Financing:						
704	Est Bd Authorized Tuition Inc	\$97,932	\$106,346	\$109,005	\$0	\$0
770	Est. Other Educational & General	\$423,788	\$436,356	\$436,356	\$0	\$0
SUBTOTAL, MOF (GENERAL REVENUE FUNDS - DEDICATED)		\$521,720	\$542,702	\$545,361	\$0	\$0
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$0	\$0
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$3,726,123	\$3,883,124	\$3,885,783	\$0	\$0
FULL TIME EQUIVALENT POSITIONS:		9.5	10.7	10.6	10.6	10.6
STRATEGY DESCRIPTION AND JUSTIFICATION:						

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 1 Provide Instructional and Operations Support
 OBJECTIVE: 1 Instructional Programs
 STRATEGY: 1 Allied Health Professions Training

Service Categories:

Service: 19 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026 ⁽¹⁾	BL 2027 ⁽¹⁾
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The Instruction and Operations Formula provides funding for faculty salaries, departmental operating expense, library, instructional administration, student services and institutional support. The formula for this strategy is based on weighted allied health student full time equivalent. The rate per weighted student headcount or full-time equivalent is established by the Legislature each biennium.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

The clinical experience offered by the School of Health Professions prepares students to enter the job market with a wide range of skills and knowledge, so that they can compete for highly sought-after jobs within health care organizations.

EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		<u>BIENNIAL</u>	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
<u>Base Spending (Est 2024 + Bud 2025)</u>	<u>Baseline Request (BL 2026 + BL 2027)</u>	<u>CHANGE</u>	<u>\$ Amount</u>	<u>Explanation(s) of Amount (must specify MOFs and FTEs)</u>
\$7,768,907	\$0	\$(7,768,907)	\$(7,768,907)	Formula funded strategies are not requested in 2026-27
			<u>\$(7,768,907)</u>	Total of Explanation of Biennial Change

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 1 Provide Instructional and Operations Support
 OBJECTIVE: 1 Instructional Programs
 STRATEGY: 2 Graduate Medical Education

Service Categories:

Service: 19 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026 ⁽¹⁾	BL 2027 ⁽¹⁾
Output Measures:						
KEY 1	Total Number of MD or DO Residents	172.00	172.00	172.00	172.00	172.00
Explanatory/Input Measures:						
KEY 1	Minority MD or DO Residents as a Percent of Total MD or DO Residents	12.21 %	12.00 %	12.00 %	12.00 %	12.00 %
Objects of Expense:						
1001	SALARIES AND WAGES	\$334,228	\$343,082	\$343,082	\$0	\$0
1005	FACULTY SALARIES	\$555,284	\$606,128	\$606,128	\$0	\$0
TOTAL, OBJECT OF EXPENSE		\$889,512	\$949,210	\$949,210	\$0	\$0
Method of Financing:						
1	General Revenue Fund	\$889,512	\$949,210	\$949,210	\$0	\$0
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$889,512	\$949,210	\$949,210	\$0	\$0
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$0	\$0
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$889,512	\$949,210	\$949,210	\$0	\$0
FULL TIME EQUIVALENT POSITIONS:		2.7	2.9	2.8	2.8	2.8

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 1 Provide Instructional and Operations Support
 OBJECTIVE: 1 Instructional Programs
 STRATEGY: 2 Graduate Medical Education

Service Categories:

Service: 19 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026 ⁽¹⁾	BL 2027 ⁽¹⁾
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STRATEGY DESCRIPTION AND JUSTIFICATION:

The Graduate Medical Education (GME) formula allocates funding based on the number of medical residents in accredited programs. These funds shall be used to increase the number of resident slots in the State of Texas as well as faculty costs relating to GME.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

Successful GME programs require adequate resources to retain and recruit talented faculty and support staff, provide state-of-the-art facilities and maintain quality training programs. MDACC is committed to enhancing and identifying new sources of funding for these critical elements of its instruction mission.

EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		<u>BIENNIAL</u>	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
<u>Base Spending (Est 2024 + Bud 2025)</u>	<u>Baseline Request (BL 2026 + BL 2027)</u>	<u>CHANGE</u>	<u>\$ Amount</u>	<u>Explanation(s) of Amount (must specify MOFs and FTEs)</u>
\$1,898,420	\$0	\$(1,898,420)	\$(1,898,420)	Formula funded strategies are not requested in 2026-27
			<u>\$(1,898,420)</u>	Total of Explanation of Biennial Change

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 1 Provide Instructional and Operations Support
 OBJECTIVE: 2 Cancer Center Operations
 STRATEGY: 1 Cancer Center Operations

Service Categories:

Service: 22 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026 ⁽¹⁾	BL 2027 ⁽¹⁾
Efficiency Measures:						
2	Net Revenue Per Equivalent Patient Day	6,928.79	6,950.00	7,000.00	7,000.00	7,000.00
Objects of Expense:						
1001	SALARIES AND WAGES	\$135,346,764	\$146,421,908	\$146,421,907	\$0	\$0
1005	FACULTY SALARIES	\$5,061,226	\$5,183,962	\$5,183,962	\$0	\$0
TOTAL, OBJECT OF EXPENSE		\$140,407,990	\$151,605,870	\$151,605,869	\$0	\$0
Method of Financing:						
1	General Revenue Fund	\$140,407,990	\$151,605,870	\$151,605,869	\$0	\$0
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$140,407,990	\$151,605,870	\$151,605,869	\$0	\$0
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$0	\$0
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$140,407,990	\$151,605,870	\$151,605,869	\$0	\$0
FULL TIME EQUIVALENT POSITIONS:		442.0	461.2	454.4	454.4	454.4
STRATEGY DESCRIPTION AND JUSTIFICATION:						

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 1 Provide Instructional and Operations Support
 OBJECTIVE: 2 Cancer Center Operations
 STRATEGY: 1 Cancer Center Operations

Service Categories:

Service: 22 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
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The Cancer Center Operations Formula provides funding for faculty salaries, departmental operating expense, and institutional support. The formula for this strategy is based on the total number of Texas cancer patients served at The University of Texas M. D. Anderson Cancer Center. The rate per Texas cancer patient served is established by the Legislature each biennium. The amount of growth in total funding from one biennium to another may not exceed the average growth in funding for Health Related Institutions in the Instruction and Operations formula for the current biennium.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

Efficient patient care programs require adequate resources to recruit and retain talented faculty and support staff and provide state-of-the-art facilities.

EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		<u>BIENNIAL</u>	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
<u>Base Spending (Est 2024 + Bud 2025)</u>	<u>Baseline Request (BL 2026 + BL 2027)</u>	<u>CHANGE</u>	<u>\$ Amount</u>	<u>Explanation(s) of Amount (must specify MOFs and FTEs)</u>
\$303,211,739	\$0	\$(303,211,739)	\$(303,211,739)	Formula funded strategies are not requested in 2026-27
			<u>\$(303,211,739)</u>	Total of Explanation of Biennial Change

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 1 Provide Instructional and Operations Support
 OBJECTIVE: 3 Operations - Staff Benefits
 STRATEGY: 1 Staff Group Insurance Premiums

Service Categories:

Service: 06 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
Objects of Expense:						
1002	OTHER PERSONNEL COSTS	\$33,718	\$24,885	\$24,751	\$25,246	\$25,751
TOTAL, OBJECT OF EXPENSE		\$33,718	\$24,885	\$24,751	\$25,246	\$25,751
Method of Financing:						
770	Est. Other Educational & General	\$33,718	\$24,885	\$24,751	\$25,246	\$25,751
SUBTOTAL, MOF (GENERAL REVENUE FUNDS - DEDICATED)		\$33,718	\$24,885	\$24,751	\$25,246	\$25,751
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$25,246	\$25,751
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$33,718	\$24,885	\$24,751	\$25,246	\$25,751

FULL TIME EQUIVALENT POSITIONS:

STRATEGY DESCRIPTION AND JUSTIFICATION:

This strategy is to provide proportional share of staff group insurance premiums paid from Other Educational and General funds.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

Staff Group Insurance Premium rates are set through U. T. System.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 1 Provide Instructional and Operations Support

OBJECTIVE: 3 Operations - Staff Benefits

Service Categories:

STRATEGY: 1 Staff Group Insurance Premiums

Service: 06

Income: A.2

Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
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EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		BIENNIAL	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
Base Spending (Est 2024 + Bud 2025)	Baseline Request (BL 2026 + BL 2027)	CHANGE	\$ Amount	Explanation(s) of Amount (must specify MOFs and FTEs)
\$49,636	\$50,997	\$1,361	\$1,361	Driven by estimated changes in benefit proportionality and group insurance counts.
			\$1,361	Total of Explanation of Biennial Change

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 1 Provide Instructional and Operations Support
 OBJECTIVE: 4 Operations - Statutory Funds
 STRATEGY: 1 Texas Public Education Grants

Service Categories:

Service: 20 Income: A.1 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
Objects of Expense:						
4000	GRANTS	\$94,134	\$99,170	\$101,649	\$104,190	\$106,795
TOTAL, OBJECT OF EXPENSE		\$94,134	\$99,170	\$101,649	\$104,190	\$106,795
Method of Financing:						
770	Est. Other Educational & General	\$94,134	\$99,170	\$101,649	\$104,190	\$106,795
SUBTOTAL, MOF (GENERAL REVENUE FUNDS - DEDICATED)		\$94,134	\$99,170	\$101,649	\$104,190	\$106,795
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$104,190	\$106,795
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$94,134	\$99,170	\$101,649	\$104,190	\$106,795

FULL TIME EQUIVALENT POSITIONS:

STRATEGY DESCRIPTION AND JUSTIFICATION:

This strategy represents tuition set aside for the Texas Public Education Grants program as required by Section 56.033 of the Texas Education Code.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 1 Provide Instructional and Operations Support
 OBJECTIVE: 4 Operations - Statutory Funds
 STRATEGY: 1 Texas Public Education Grants

Service Categories:

Service: 20 Income: A.1 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
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EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		BIENNIAL	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
Base Spending (Est 2024 + Bud 2025)	Baseline Request (BL 2026 + BL 2027)	CHANGE	\$ Amount	Explanation(s) of Amount (must specify MOFs and FTEs)
\$200,819	\$210,985	\$10,166	\$10,166	Driven by projected increases in enrollment for the 2026-27 biennium
			\$10,166	Total of Explanation of Biennial Change

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 2 Provide Research Support
 OBJECTIVE: 1 Research Activities
 STRATEGY: 1 Research Enhancement

Service Categories:

Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026 ⁽¹⁾	BL 2027 ⁽¹⁾
Objects of Expense:						
1001	SALARIES AND WAGES	\$7,976,231	\$9,078,901	\$9,078,901	\$0	\$0
1005	FACULTY SALARIES	\$4,730,557	\$4,871,643	\$4,871,643	\$0	\$0
TOTAL, OBJECT OF EXPENSE		\$12,706,788	\$13,950,544	\$13,950,544	\$0	\$0
Method of Financing:						
1	General Revenue Fund	\$12,706,788	\$13,950,544	\$13,950,544	\$0	\$0
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$12,706,788	\$13,950,544	\$13,950,544	\$0	\$0
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$0	\$0
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$12,706,788	\$13,950,544	\$13,950,544	\$0	\$0
FULL TIME EQUIVALENT POSITIONS:		39.2	42.4	41.8	41.8	41.8

STRATEGY DESCRIPTION AND JUSTIFICATION:

The Research Enhancement formula allocates a base amount of \$1,412,500 to each institution in addition to a percentage of the total research expenditures as reported to the Texas Higher Education Coordinating Board. The percent of additional funding above the base is established by the Legislature each biennium. These funds are used to support the research activities of the institution.

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 2 Provide Research Support
 OBJECTIVE: 1 Research Activities
 STRATEGY: 1 Research Enhancement

Service Categories:

Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026 ⁽¹⁾	BL 2027 ⁽¹⁾
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EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

Successful research programs require adequate resources to recruit and retain talented faculty and support staff, provide state-of-the-art facilities and maintain quality training programs. MDACC is committed to enhancing and identifying new sources of funding for these critical elements of its research mission.

EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		<u>BIENNIAL</u>	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
Base Spending (Est 2024 + Bud 2025)	Baseline Request (BL 2026 + BL 2027)	CHANGE	\$ Amount	Explanation(s) of Amount (must specify MOFs and FTEs)
\$27,901,088	\$0	\$(27,901,088)	\$(27,901,088)	Formula funded strategies are not requested in 2026-27
			<u>\$(27,901,088)</u>	Total of Explanation of Biennial Change

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 3 Provide Infrastructure Support
 OBJECTIVE: 1 Operations and Maintenance
 STRATEGY: 1 E&G Space Support

Service Categories:

Service: 10 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026 ⁽¹⁾	BL 2027 ⁽¹⁾
Objects of Expense:						
1001	SALARIES AND WAGES	\$32,966,455	\$32,267,877	\$32,266,493	\$0	\$0
2003	CONSUMABLE SUPPLIES	\$2,544	\$3,602	\$3,602	\$0	\$0
2004	UTILITIES	\$1,170,662	\$1,087,478	\$1,097,142	\$0	\$0
2009	OTHER OPERATING EXPENSE	\$57,873	\$12,056	\$20,806	\$0	\$0
TOTAL, OBJECT OF EXPENSE		\$34,197,534	\$33,371,013	\$33,388,043	\$0	\$0
Method of Financing:						
1	General Revenue Fund	\$34,072,172	\$33,220,853	\$33,220,853	\$0	\$0
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$34,072,172	\$33,220,853	\$33,220,853	\$0	\$0
Method of Financing:						
770	Est. Other Educational & General	\$125,362	\$150,160	\$167,190	\$0	\$0
SUBTOTAL, MOF (GENERAL REVENUE FUNDS - DEDICATED)		\$125,362	\$150,160	\$167,190	\$0	\$0

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 3 Provide Infrastructure Support
 OBJECTIVE: 1 Operations and Maintenance
 STRATEGY: 1 E&G Space Support

Service Categories:
 Service: 10 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026 ⁽¹⁾	BL 2027 ⁽¹⁾
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$0	\$0
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$34,197,534	\$33,371,013	\$33,388,043	\$0	\$0
FULL TIME EQUIVALENT POSITIONS:		103.6	98.3	97.0	97.0	97.0

STRATEGY DESCRIPTION AND JUSTIFICATION:

The Infrastructure Support formula distributes funding associated with plant support and utilities. This formula is driven by the predicted square feet for health related institutions produced by the Texas Higher Education Coordinating Board's Space Projection Model.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

Continuing expansion of MDACC to meet patient care and research demands may impact the strategy. Conversion of obsolete clinic and laboratory areas to provide adequate office space for MDACC faculty and staff may also affect the strategy.

EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		<u>BIENNIAL</u>	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
<u>Base Spending (Est 2024 + Bud 2025)</u>	<u>Baseline Request (BL 2026 + BL 2027)</u>	<u>CHANGE</u>	<u>\$ Amount</u>	<u>Explanation(s) of Amount (must specify MOFs and FTEs)</u>
\$66,759,056	\$0	\$(66,759,056)	\$(66,759,056)	Formula funded strategies are not requested in 2026-27
			\$(66,759,056)	Total of Explanation of Biennial Change

(1) - Formula funded strategies are not requested in 2026-27 because amounts are not determined by institutions.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 3 Provide Infrastructure Support
 OBJECTIVE: 2 Infrastructure Support
 STRATEGY: 1 Capital Construction Assistance Projects Revenue Bond

Service Categories:
 Service: 10 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
Objects of Expense:						
2008	DEBT SERVICE	\$18,459,611	\$17,419,549	\$17,397,199	\$17,397,199	\$17,397,199
TOTAL, OBJECT OF EXPENSE		\$18,459,611	\$17,419,549	\$17,397,199	\$17,397,199	\$17,397,199
Method of Financing:						
1	General Revenue Fund	\$18,459,611	\$17,419,549	\$17,397,199	\$17,397,199	\$17,397,199
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$18,459,611	\$17,419,549	\$17,397,199	\$17,397,199	\$17,397,199
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$17,397,199	\$17,397,199
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$18,459,611	\$17,419,549	\$17,397,199	\$17,397,199	\$17,397,199
FULL TIME EQUIVALENT POSITIONS:						
STRATEGY DESCRIPTION AND JUSTIFICATION:						

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 3 Provide Infrastructure Support
 OBJECTIVE: 2 Infrastructure Support Service Categories:
 STRATEGY: 1 Capital Construction Assistance Projects Revenue Bond Service: 10 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
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The Capital Construction Assistance Projects (CCAP) Revenue Bond strategy is for the debt service on two CCAP bond projects.

The first project was funding of \$70,000,000 towards the Zayed building for personalized cancer care to accommodate the expanding research mission of M.D. Anderson and related programs focused on developing and advancing the most innovative therapeutics, diagnostics, early detection and prevention techniques to combat cancer.

The second project was funding of \$69,897,111 for construction of a life science research, innovation and discovery initiative facility. This new research building is a significant component of the TMC3 life science campus including collaboration of academia, medicine, and life science industry partners.

The FY 2026 and FY 2027 debt service for outstanding CCAP revenue bonds has been requested based on actual CCAP debt service requirements for issued bonds.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		<u>BIENNIAL</u>	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
Base Spending (Est 2024 + Bud 2025)	Baseline Request (BL 2026 + BL 2027)	CHANGE	\$ Amount	Explanation(s) of Amount (must specify MOFs and FTEs)
\$34,816,748	\$34,794,398	\$(22,350)	\$(22,350)	Based on actual, known debt service requirements for 2026-27
			\$(22,350)	Total of Explanation of Biennial Change

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 5 Provide Non-formula Support
 OBJECTIVE: 1 Research
 STRATEGY: 1 Cord Blood and Cellular Therapy Research Program

Service Categories:
 Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
Objects of Expense:						
1001	SALARIES AND WAGES	\$1,089,621	\$1,311,597	\$1,311,597	\$1,311,597	\$1,311,597
1005	FACULTY SALARIES	\$1,692	\$0	\$0	\$0	\$0
2009	OTHER OPERATING EXPENSE	\$298,238	\$688,403	\$688,403	\$688,403	\$688,403
TOTAL, OBJECT OF EXPENSE		\$1,389,551	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
Method of Financing:						
1	General Revenue Fund	\$1,389,551	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$1,389,551	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$2,000,000	\$2,000,000
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$1,389,551	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
FULL TIME EQUIVALENT POSITIONS:		3.4	4.0	3.9	3.9	3.9
STRATEGY DESCRIPTION AND JUSTIFICATION:						

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 5 Provide Non-formula Support
 OBJECTIVE: 1 Research Service Categories:
 STRATEGY: 1 Cord Blood and Cellular Therapy Research Program Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
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Funding currently supports the Cord Blood Bank and Good Manufacturing Laboratory (GMP) with the development and management of critical research protocols for cord blood transplantation and other cellular therapies, including rapid and exciting developments of chimeric antigen receptor (CAR) T cell therapy and CAR natural killer (NK) cell treatments for hematologic and solid tumors. These novel therapeutic approaches harness the body’s own immune system to effectively fight cancers by killing abnormal cells. Cord blood provides a source of stem cells for transplant for minority patients who often have no registered donors. MD Anderson serves an unmet need as 75% of the cord blood units in the bank are of Hispanic, Black or Asian origin and the institution finds units for patients that otherwise would not have donors.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

Additional information for this strategy is available in Schedule 9, Non formula Support.

EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		<u>BIENNIAL</u>	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
Base Spending (Est 2024 + Bud 2025)	Baseline Request (BL 2026 + BL 2027)	CHANGE	\$ Amount	Explanation(s) of Amount (must specify MOFs and FTEs)
\$4,000,000	\$4,000,000	\$0	\$0	Total of Explanation of Biennial Change

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 5 Provide Non-formula Support
 OBJECTIVE: 1 Research
 STRATEGY: 2 Breast Cancer Research Program

Service Categories:
 Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
Objects of Expense:						
1001	SALARIES AND WAGES	\$638,085	\$838,306	\$838,306	\$838,306	\$838,306
1005	FACULTY SALARIES	\$269,857	\$382,359	\$382,359	\$382,359	\$382,359
2001	PROFESSIONAL FEES AND SERVICES	\$113,505	\$227,174	\$227,174	\$227,174	\$227,174
2003	CONSUMABLE SUPPLIES	\$0	\$41,224	\$41,224	\$41,224	\$41,224
2009	OTHER OPERATING EXPENSE	\$422,553	\$510,937	\$510,937	\$510,937	\$510,937
TOTAL, OBJECT OF EXPENSE		\$1,444,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
Method of Financing:						
1	General Revenue Fund	\$1,444,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$1,444,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$2,000,000	\$2,000,000
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$1,444,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
FULL TIME EQUIVALENT POSITIONS:		2.8	3.7	3.7	3.7	3.7

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 5 Provide Non-formula Support
 OBJECTIVE: 1 Research
 STRATEGY: 2 Breast Cancer Research Program

Service Categories:
 Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
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STRATEGY DESCRIPTION AND JUSTIFICATION:

The Breast Cancer Research Program strategy funds programmatic research for Inflammatory Breast Cancer (IBC), a rare and often lethal type of breast cancer, which represents 10% of breast cancer mortality. Our mission is to eliminate IBC from Texas, USA, and the world. We want Texas to continue to be recognized as the preeminent worldwide leader of fighting this rare but deadly disease.

Since it was established in 2007, the "Morgan Welch Inflammatory Breast Cancer (IBC) Research Program and Clinic" at MD Anderson Cancer Center continues to lead the way in diagnosis, treatment, translational research, collaboration, and community education for this aggressive disease.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

Additional information for this strategy is available in Schedule 9, Non formula support.

EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		<u>BIENNIAL</u>	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
Base Spending (Est 2024 + Bud 2025)	Baseline Request (BL 2026 + BL 2027)	CHANGE	\$ Amount	Explanation(s) of Amount (must specify MOFs and FTEs)
\$4,000,000	\$4,000,000	\$0	\$0	Total of Explanation of Biennial Change

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 5 Provide Non-formula Support
 OBJECTIVE: 2 Institutional
 STRATEGY: 1 Institutional Enhancement

Service Categories:

Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
Objects of Expense:						
4000	GRANTS	\$0	\$5,741	\$6,164	\$2,164	\$2,164
TOTAL, OBJECT OF EXPENSE		\$0	\$5,741	\$6,164	\$2,164	\$2,164
Method of Financing:						
802	Lic Plate Trust Fund No. 0802, est	\$0	\$5,741	\$6,164	\$2,164	\$2,164
SUBTOTAL, MOF (OTHER FUNDS)		\$0	\$5,741	\$6,164	\$2,164	\$2,164
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$2,164	\$2,164
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$0	\$5,741	\$6,164	\$2,164	\$2,164

FULL TIME EQUIVALENT POSITIONS:

STRATEGY DESCRIPTION AND JUSTIFICATION:

Funding in this strategy includes funds from the Texas Collegiate License Plate Trust Fund.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

Additional information for this strategy is available in Schedule 9, Non formula support.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 5 Provide Non-formula Support
 OBJECTIVE: 2 Institutional
 STRATEGY: 1 Institutional Enhancement

Service Categories:
 Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
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EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		BIENNIAL	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
Base Spending (Est 2024 + Bud 2025)	Baseline Request (BL 2026 + BL 2027)	CHANGE	\$ Amount	Explanation(s) of Amount (must specify MOFs and FTEs)
\$11,905	\$4,328	\$(7,577)	\$(7,577)	2024-25 biennium includes estimated use of prior year balances related to license plate trust fund scholarships.
			\$(7,577)	Total of Explanation of Biennial Change

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 5 Provide Non-formula Support
 OBJECTIVE: 3 Exceptional Item Request
 STRATEGY: 1 Exceptional Item Request

Service Categories:

Service: 19 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
Objects of Expense:						
2001	PROFESSIONAL FEES AND SERVICES	\$0	\$0	\$0	\$0	\$0
2003	CONSUMABLE SUPPLIES	\$0	\$0	\$0	\$0	\$0
2009	OTHER OPERATING EXPENSE	\$0	\$0	\$0	\$0	\$0
5000	CAPITAL EXPENDITURES	\$0	\$0	\$0	\$0	\$0
TOTAL, OBJECT OF EXPENSE		\$0	\$0	\$0	\$0	\$0
Method of Financing:						
1	General Revenue Fund	\$0	\$0	\$0	\$0	\$0
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$0	\$0	\$0	\$0	\$0
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$0	\$0
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$0	\$0	\$0	\$0	\$0
FULL TIME EQUIVALENT POSITIONS:						
STRATEGY DESCRIPTION AND JUSTIFICATION:						

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 5 Provide Non-formula Support
 OBJECTIVE: 3 Exceptional Item Request
 STRATEGY: 1 Exceptional Item Request

Service Categories:

Service: 19 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
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EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		<u>BIENNIAL CHANGE</u>	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
<u>Base Spending (Est 2024 + Bud 2025)</u>	<u>Baseline Request (BL 2026 + BL 2027)</u>		<u>\$ Amount</u>	<u>Explanation(s) of Amount (must specify MOFs and FTEs)</u>
\$0	\$0	\$0	\$0	Total of Explanation of Biennial Change

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 7 Tobacco Funds
 OBJECTIVE: 1 Tobacco Earnings for Research Service Categories:
 STRATEGY: 1 Tobacco Earnings for The University of Texas MD Anderson Cancer Center Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
Objects of Expense:						
1001	SALARIES AND WAGES	\$3,547,423	\$3,655,557	\$3,655,557	\$3,388,109	\$3,388,109
1002	OTHER PERSONNEL COSTS	\$1,192,671	\$806,124	\$806,124	\$747,146	\$747,146
1005	FACULTY SALARIES	\$1,253,778	\$793,425	\$793,425	\$735,376	\$735,376
2009	OTHER OPERATING EXPENSE	\$2,901,161	\$1,862,070	\$1,862,070	\$1,725,837	\$1,725,837
5000	CAPITAL EXPENDITURES	\$0	\$0	\$1,136,694	\$1,053,532	\$1,053,532
TOTAL, OBJECT OF EXPENSE		\$8,895,033	\$7,117,176	\$8,253,870	\$7,650,000	\$7,650,000
Method of Financing:						
812	Perm Endow FD UTMD AND, estimated	\$8,895,033	\$7,117,176	\$8,253,870	\$7,650,000	\$7,650,000
SUBTOTAL, MOF (OTHER FUNDS)		\$8,895,033	\$7,117,176	\$8,253,870	\$7,650,000	\$7,650,000
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$7,650,000	\$7,650,000
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$8,895,033	\$7,117,176	\$8,253,870	\$7,650,000	\$7,650,000
FULL TIME EQUIVALENT POSITIONS:						

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 7 Tobacco Funds
 OBJECTIVE: 1 Tobacco Earnings for Research Service Categories:
 STRATEGY: 1 Tobacco Earnings for The University of Texas MD Anderson Cancer Center Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
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STRATEGY DESCRIPTION AND JUSTIFICATION:

Funding for this strategy is derived from annual distributions of Permanent Health Funds established Section 63.101 of the Texas Education Code. These are appropriated for research and other programs that are conducted by the institution and that benefit the public health.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

MDACC is committed to leveraging the tobacco funds to enhance and identify new sources of funding for these critical elements of its research mission.

EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		<u>BIENNIAL</u>	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
Base Spending (Est 2024 + Bud 2025)	Baseline Request (BL 2026 + BL 2027)	CHANGE	\$ Amount	Explanation(s) of Amount (must specify MOFs and FTEs)
\$15,371,046	\$15,300,000	\$(71,046)	\$(71,046)	Prior biennium represented prior year balances, interest income and current year distributions.
			\$(71,046)	Total of Explanation of Biennial Change

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 7 Tobacco Funds
 OBJECTIVE: 1 Tobacco Earnings for Research Service Categories:
 STRATEGY: 2 Tobacco Earnings from the Permanent Health Fund for Higher Ed. No. 810 Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
Objects of Expense:						
2001	PROFESSIONAL FEES AND SERVICES	\$360,791	\$153,639	\$153,639	\$127,181	\$127,181
2003	CONSUMABLE SUPPLIES	\$279,858	\$101,192	\$101,192	\$83,766	\$83,766
2009	OTHER OPERATING EXPENSE	\$1,733,598	\$231,563	\$231,563	\$191,688	\$191,688
5000	CAPITAL EXPENDITURES	\$945,997	\$2,230,160	\$2,876,452	\$2,381,099	\$2,381,099
TOTAL, OBJECT OF EXPENSE		\$3,320,244	\$2,716,554	\$3,362,846	\$2,783,734	\$2,783,734
Method of Financing:						
810	Perm Health Fund Higher Ed, est	\$3,320,244	\$2,716,554	\$3,362,846	\$2,783,734	\$2,783,734
SUBTOTAL, MOF (OTHER FUNDS)		\$3,320,244	\$2,716,554	\$3,362,846	\$2,783,734	\$2,783,734
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$2,783,734	\$2,783,734
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$3,320,244	\$2,716,554	\$3,362,846	\$2,783,734	\$2,783,734

FULL TIME EQUIVALENT POSITIONS:

STRATEGY DESCRIPTION AND JUSTIFICATION:

This strategy includes the institution's allocation of the Permanent Health Fund for Higher Education. The purpose of these funds includes medical research, health education or treatment programs.

506 The University of Texas M.D. Anderson Cancer Center

GOAL: 7 Tobacco Funds
 OBJECTIVE: 1 Tobacco Earnings for Research Service Categories:
 STRATEGY: 2 Tobacco Earnings from the Permanent Health Fund for Higher Ed. No. 810 Service: 21 Income: A.2 Age: B.3

CODE	DESCRIPTION	Exp 2023	Est 2024	Bud 2025	BL 2026	BL 2027
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EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

MDACC is committed to leveraging the tobacco funds to enhance and identify new sources of funding for these critical elements of its research mission.

EXPLANATION OF BIENNIAL CHANGE (includes Rider amounts):

<u>STRATEGY BIENNIAL TOTAL - ALL FUNDS</u>		<u>BIENNIAL CHANGE</u>	<u>EXPLANATION OF BIENNIAL CHANGE</u>	
Base Spending (Est 2024 + Bud 2025)	Baseline Request (BL 2026 + BL 2027)		\$ Amount	<u>Explanation(s) of Amount (must specify MOFs and FTEs)</u>
\$6,079,400	\$5,567,468	\$(511,932)	\$(511,932)	The prior biennium represented prior year balances, interest income and current year distribution.
			\$(511,932)	Total of Explanation of Biennial Change

SUMMARY TOTALS:

OBJECTS OF EXPENSE:	\$225,564,238	\$235,142,836	\$236,925,928	\$31,962,533	\$31,965,643
METHODS OF FINANCE (INCLUDING RIDERS):				\$31,962,533	\$31,965,643
METHODS OF FINANCE (EXCLUDING RIDERS):	\$225,564,238	\$235,142,836	\$236,925,928	\$31,962,533	\$31,965,643
FULL TIME EQUIVALENT POSITIONS:	603.2	623.2	614.2	614.2	614.2

3.B. Rider Revisions and Additions Request

Agency Code: 506	Agency Name: The University of Texas M. D. Anderson Cancer Center	Prepared By: Tomas Guajardo	Date: August 2024	Request Level:
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Current Rider Number	Page Number in 2024-25 GAA	Proposed Rider Language
5	III-212	<p>5. Estimated Appropriation and Unexpended Balance. Included in the amounts appropriated above are: (1) estimated appropriations of amounts available for distribution or investment returns out of the Permanent Endowment Fund for The University of Texas M.D. Anderson Cancer Center No. 812 and (2) estimated appropriations of the institution's estimated allocation of amounts available for distribution out of the Permanent Health Fund for Higher Education No.810.</p> <p>a. Amounts available for distribution or investment returns in excess of the amounts estimated above are also appropriated to the institution. In the event that amounts available for distribution or investment returns are less than the amounts estimated above, this Act may not be construed as appropriating funds to make-up the difference.</p> <p>b. All balances of estimated appropriations from the Permanent Endowment Fund for The University of Texas M.D. Anderson Cancer Center No. 812 and of the institution's allocation from the amounts available for distribution out of the Permanent Health Fund for Higher Education No. 810, except for any General Revenue, at the close of the fiscal year ending August 31, 2023 2025, and the income to said fund during the fiscal years beginning September 1, 2023 2025, are hereby appropriated. Any unexpended appropriations made above as of August 31, 2024 2026, are hereby appropriated to the institution for the same purposes for fiscal year 2025 2027.</p> <p><i>M.D. Anderson requests that the dates in the rider be updated for the next biennium.</i></p>
8	III-213	<p>8. Rare and Aggressive Breast Cancer Research Program. Of the amounts appropriated above in Strategy D.1.2, Breast Cancer Research Program, \$2,000,000 in fiscal year 2024 2026 and \$2,000,000 in fiscal year 2025 2027 in General Revenue is for the rare and aggressive breast cancer research program. Its efforts will contribute to improving the diagnostics in patients with breast cancer.</p> <p><i>M.D. Anderson requests that the dates in the rider be updated for the next biennium.</i></p>

4.A. Exceptional Item Request Schedule
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

DATE: **8/9/2024**
 TIME: **9:37:27AM**

Agency code: **506**

Agency name: **The University of Texas M.D. Anderson Cancer Center**

CODE	DESCRIPTION	Excp 2026	Excp 2027
	Item Name: Cell Therapy Institute Item Priority: 1 IT Component: No Anticipated Out-year Costs: No Involve Contracts > \$50,000: No Includes Funding for the Following Strategy or Strategies: 05-03-01 Exceptional Item Request		
OBJECTS OF EXPENSE:			
2001	PROFESSIONAL FEES AND SERVICES	2,000,000	2,000,000
2003	CONSUMABLE SUPPLIES	5,000,000	5,000,000
2009	OTHER OPERATING EXPENSE	7,000,000	7,000,000
5000	CAPITAL EXPENDITURES	1,000,000	1,000,000
TOTAL, OBJECT OF EXPENSE		\$15,000,000	\$15,000,000
METHOD OF FINANCING:			
1	General Revenue Fund	15,000,000	15,000,000
TOTAL, METHOD OF FINANCING		\$15,000,000	\$15,000,000

DESCRIPTION / JUSTIFICATION:

The Institute for Cell Therapy Discovery and Innovation at MD Anderson is dedicated to advancing innovative cell therapies for patients with cancer.

Cell therapy is a unique form of immunotherapy which bolsters the body's immune system to attack cancer cells. MD Anderson has developed a novel form of the treatment with fewer side effects and the capability to produce "off-the-shelf" products, increasing accessibility and reducing the costs of treatment. Our goal is to expand our capabilities beyond cord blood-derived NK cells, to investigate induced pluripotent stem cells (iPSCs), cells that are reprogrammed from cord blood which is derived from the umbilical cord upon labor and deliver, as a new source for readily available NK cells and other immune cells, including T cells, B cells and macrophages. Our aim is to deliver targeted cell therapies to patients with cancer that are safe and highly effective. We will accomplish this by leveraging our existing platform to develop novel cell therapies to address the unique challenges presented by different cancer types, thus providing patient benefit and maintaining our global leadership in cell therapy.

EXTERNAL/INTERNAL FACTORS:

Our approach is grounded in fundamental discoveries, which inform our preclinical and translational efforts. To date, our focus has been on the early clinical development of cell therapies with a focus on Phase 1 and early Phase 2 clinical trials. Moving forward, the institute will advance promising cell therapies from these early phase studies to broader multi-center trials, leveraging the MD Anderson network to increase accessibility. Our goal is to conduct registrational studies that could lead to FDA approval and guide the direction of product development, thereby increasing the value of our cell therapy assets. Our collaboration with MD Anderson's networks is also a means to bring clinical trials to underserved communities.

4.A. Exceptional Item Request Schedule
89th Regular Session, Agency Submission, Version 1
Automated Budget and Evaluation System of Texas (ABEST)

DATE: **8/9/2024**
TIME: **9:37:27AM**

Agency code: **506**

Agency name: **The University of Texas M.D. Anderson Cancer Center**

CODE	DESCRIPTION	Excp 2026	Excp 2027
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In addition, the Institute will serve as a hub to integrate departments that work on cellular therapies. This integration is not limited to clinical trials and will extend to helping faculty bring their innovative pre-clinical concepts to clinical application.

Additional information for this program is available in Schedule 9, Non formula support.

PCLS TRACKING KEY:

4.A. Exceptional Item Request Schedule
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

DATE: **8/9/2024**
 TIME: **9:37:27AM**

Agency code: **506**

Agency name: **The University of Texas M.D. Anderson Cancer Center**

CODE	DESCRIPTION	Excp 2026	Excp 2027
	<p>Item Name: Biosciences Research Facility Item Priority: 2 IT Component: No Anticipated Out-year Costs: Yes Involve Contracts > \$50,000: No</p> <p>Includes Funding for the Following Strategy or Strategies: 03-02-01 Capital Construction Assistance Projects Revenue Bond</p>		

OBJECTS OF EXPENSE:

2008	DEBT SERVICE	8,720,000	8,720,000
TOTAL, OBJECT OF EXPENSE		\$8,720,000	\$8,720,000

METHOD OF FINANCING:

1	General Revenue Fund	8,720,000	8,720,000
TOTAL, METHOD OF FINANCING		\$8,720,000	\$8,720,000

DESCRIPTION / JUSTIFICATION:

The Biosciences Research Facility (BRF) will advance research innovations by consolidating vivarium operations into a state-of-the-art facility on the South Campus. It represents a significant step towards the Master Facilities Framework goal of centralizing approximately 85% of UT MD Anderson's research operations on the South Campus to improve efficiency and facilitate collaboration to drive breakthroughs.

EXTERNAL/INTERNAL FACTORS:

The scope of the project includes the design and construction of a new three-floor building with a partial interstitial (space for mechanical systems) level above Floor 2 and a two-level mechanical penthouse and comprising approximately 269,500 building gross square feet (BGSF) with Floors 1 and 2 being finished-out and Floor 3 (approximately 78,000 BGSF) being left in a shelled condition, to be finished out under a future, separate project. The finish out of Floors 1 and 2 will provide space for approximately 26,500 cages and associated procedure and support rooms as well as limited imaging capabilities.

PCLS TRACKING KEY:

4.A. Exceptional Item Request Schedule
89th Regular Session, Agency Submission, Version 1
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DATE: **8/9/2024**
TIME: **9:37:27AM**

Agency code: **506**

Agency name: **The University of Texas M.D. Anderson Cancer Center**

<u>CODE</u>	<u>DESCRIPTION</u>	<u>Excp 2026</u>	<u>Excp 2027</u>
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DESCRIPTION OF ANTICIPATED OUT-YEAR COSTS :

The continuation of CCAP debt service in future years

ESTIMATED ANTICIPATED OUT-YEAR COSTS FOR ITEM:

<u>2028</u>	<u>2029</u>	<u>2030</u>
\$8,720,000	\$8,720,000	\$8,720,000

4.B. Exceptional Items Strategy Allocation Schedule
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

DATE: 8/9/2024
 TIME: 9:37:27AM

Agency code: 506 Agency name: The University of Texas M.D. Anderson Cancer Center

Code	Description	Excp 2026	Excp 2027
Item Name: Cell Therapy Institute			
Allocation to Strategy: 5-3-1 Exceptional Item Request			
OBJECTS OF EXPENSE:			
2001	PROFESSIONAL FEES AND SERVICES	2,000,000	2,000,000
2003	CONSUMABLE SUPPLIES	5,000,000	5,000,000
2009	OTHER OPERATING EXPENSE	7,000,000	7,000,000
5000	CAPITAL EXPENDITURES	1,000,000	1,000,000
TOTAL, OBJECT OF EXPENSE		\$15,000,000	\$15,000,000
METHOD OF FINANCING:			
1 General Revenue Fund		15,000,000	15,000,000
TOTAL, METHOD OF FINANCING		\$15,000,000	\$15,000,000

4.B. Exceptional Items Strategy Allocation Schedule
 89th Regular Session, Agency Submission, Version 1
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DATE: 8/9/2024
 TIME: 9:37:27AM

Agency code: 506 Agency name: The University of Texas M.D. Anderson Cancer Center

Code	Description	Excp 2026	Excp 2027
Item Name: Biosciences Research Facility			
Allocation to Strategy: 3-2-1 Capital Construction Assistance Projects Revenue Bond			
OBJECTS OF EXPENSE:			
2008	DEBT SERVICE	8,720,000	8,720,000
TOTAL, OBJECT OF EXPENSE		\$8,720,000	\$8,720,000
METHOD OF FINANCING:			
1	General Revenue Fund	8,720,000	8,720,000
TOTAL, METHOD OF FINANCING		\$8,720,000	\$8,720,000

4.C. Exceptional Items Strategy Request
 89th Regular Session, Agency Submission, Version 1
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DATE: 8/9/2024
TIME: 9:37:28AM

Agency Code: **506** Agency name: **The University of Texas M.D. Anderson Cancer Center**

GOAL: 3 Provide Infrastructure Support

OBJECTIVE: 2 Infrastructure Support

Service Categories:

STRATEGY: 1 Capital Construction Assistance Projects Revenue Bond

Service: 10 Income: A.2 Age: B.3

CODE DESCRIPTION	Exp 2026	Exp 2027
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OBJECTS OF EXPENSE:

2008 DEBT SERVICE	8,720,000	8,720,000
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Total, Objects of Expense	\$8,720,000	\$8,720,000
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METHOD OF FINANCING:

1 General Revenue Fund	8,720,000	8,720,000
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Total, Method of Finance	\$8,720,000	\$8,720,000
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EXCEPTIONAL ITEM(S) INCLUDED IN STRATEGY:

Biosciences Research Facility

4.C. Exceptional Items Strategy Request
 89th Regular Session, Agency Submission, Version 1
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DATE: 8/9/2024
TIME: 9:37:28AM

Agency Code: **506** Agency name: **The University of Texas M.D. Anderson Cancer Center**

GOAL: 5 Provide Non-formula Support

OBJECTIVE: 3 Exceptional Item Request

STRATEGY: 1 Exceptional Item Request

Service Categories:

Service: 19 Income: A.2 Age: B.3

CODE DESCRIPTION	Excp 2026	Excp 2027
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OBJECTS OF EXPENSE:

2001 PROFESSIONAL FEES AND SERVICES	2,000,000	2,000,000
2003 CONSUMABLE SUPPLIES	5,000,000	5,000,000
2009 OTHER OPERATING EXPENSE	7,000,000	7,000,000
5000 CAPITAL EXPENDITURES	1,000,000	1,000,000
Total, Objects of Expense	\$15,000,000	\$15,000,000

METHOD OF FINANCING:

1 General Revenue Fund	15,000,000	15,000,000
Total, Method of Finance	\$15,000,000	\$15,000,000

EXCEPTIONAL ITEM(S) INCLUDED IN STRATEGY:

Cell Therapy Institute

6.A. Historically Underutilized Business Supporting Schedule
 89th Regular Session, Agency Submission, Version 1
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Date: **8/9/2024**
 Time: **9:37:28AM**

Agency Code: **506** Agency: **The University of Texas M.D. Anderson Cancer Center**

COMPARISON TO STATEWIDE HUB PROCUREMENT GOALS

A. Fiscal Year - HUB Expenditure Information

Statewide HUB Goals	Procurement Category	% Goal	HUB Expenditures FY 2022			Total Expenditures FY 2022		HUB Expenditures FY 2023			Total Expenditures FY 2023	
			% Actual	Diff	Actual \$	% Goal	% Actual	Diff	Actual \$	FY 2023		
11.2%	Heavy Construction	0.0 %	0.0%	0.0%	\$0	\$0	0.0 %	0.0%	0.0%	\$0	\$0	
21.1%	Building Construction	13.0 %	8.1%	-4.9%	\$3,779,499	\$46,377,051	13.9 %	12.7%	-1.2%	\$8,988,878	\$70,767,859	
32.9%	Special Trade	13.0 %	19.0%	6.0%	\$3,900,539	\$20,476,163	13.9 %	8.6%	-5.3%	\$1,579,149	\$18,341,941	
23.7%	Professional Services	19.0 %	13.4%	-5.6%	\$3,932,589	\$29,258,487	20.8 %	20.2%	-0.6%	\$8,672,726	\$42,918,230	
26.0%	Other Services	20.0 %	9.9%	-10.1%	\$40,070,630	\$404,001,811	19.0 %	9.6%	-9.4%	\$39,955,463	\$415,650,613	
21.1%	Commodities	1.8 %	3.3%	1.4%	\$54,828,203	\$1,679,352,421	4.0 %	3.2%	-0.8%	\$59,231,341	\$1,857,628,827	
	Total Expenditures		4.9%		\$106,511,460	\$2,179,465,933		4.9%		\$118,427,557	\$2,405,307,470	

B. Assessment of Attainment of HUB Procurement Goals

Attainment:

FY22: The agency exceeded our prediction goals in ST and CC category, the agency fell below in BC, PS, and OS. FY23: The agency below in BC, ST, PS, OS and CC category goals.

Applicability:

The "Heavy Construction" category was not applicable to agency operations in either FY2022 or FY2023.

Factors Affecting Attainment:

Extensive efforts were made in FY22 & FY23 to grow the capacity of HUBs: 1) Leadership met with 11 general construction contractors to discuss their commitment to support and encourage subcontracting opportunities to HUB firms, 2.) MDA onboarded three HUB suppliers in lab supplies, computer leasing and maintenance, repair and operations suppliers, 3) sponsored a mentor-protége relationship with an electrical HUB firm, and created our first six-week HUB subcontractor training program. These efforts reflected our HUB expenditure to surpass \$100MM for two consecutive years. Specialized pharmaceutical expenditures of around 46% limit HUB availability, adversely impacting the agency's ability to meet HUB objectives. As a dedicated cancer research and patient care center poses challenges to achieving HUB objectives. Purchases are restricted to clinical and research applications with limited (non-HUB) manufacturers or distributors. Many purchases are made through group purchasing organizations to maximize the value of the funds entrusted to the agency. Specific areas of impact include specialized medical diagnostic equipment, pharmaceuticals, Reagents, and professional health services.

Agency Code: 506 Agency: The University of Texas M.D. Anderson Cancer Center

C. Good-Faith Efforts to Increase HUB Participation

Outreach Efforts and Mentor-Protégé Programs:

MDACC made extensive efforts in FY22 and FY23 to educate and prepare HUB firms more than ever to compete for projects. Executive Leadership met with (eleven) 11 General Construction Contractors to discuss their commitment to support and encourage subcontracting opportunities to HUB firms. We MDACC leveraged the Job Order Contracting (JOC) process to ensure Prime Contractors meet their HUB commitments. MDACC hosted and created the first-ever comprehensive six-week HUB Subcontractor Training Program. The first class of graduates included 26 HUB construction contractors. Also, the institution hosted the first-ever Construction Business Matchmaking event. MDACC presented and/or attended 25 community events in FY22 and FY23. Also, MD Anderson sponsored a mentor-protégé relationship with an electrical HUB firm and a Prime Contractor. We hosted several events on "How to do Business with MD Anderson" to educate and prepare HUB firms to bid on MD Anderson projects.

HUB Program Staffing:

The program has an Associate Director and a senior HUB Coordinator dedicated to increasing HUB participation. The Associate Director's primary activities are to provide oversight of the HUB department, Collaborate with MD Anderson Operational Areas, Manage and Report HUB program Activities, and represent MD Anderson in professional and advocacy organizations. The Sr. HUB Coordinator reviews expenditure data for the HUB report, assists in managing the mentor-protege program, conducts in-house HUB training, and prepares the report for management monthly, along with meeting with HUB firms and providing any information on How to do Business with MD Anderson.

Current and Future Good-Faith Efforts:

MD Anderson continues to conduct a positive and proactive HUB outreach, solicitation, and development program designed to create opportunities and promote HUB participation and utilization in all its procurement processes. Normal distribution of the current bid list to advocacy groups, including Houston Minority Supplier Development Council, Women's Business Enterprise Alliance, Houston Minority Business Administration, and local trade centers for dissemination to their memberships to increase HUB bid participation. Active and regular participants in virtual and in-person HUB marketing and development events, including EXPOs and networking conferences. HUB team participates in prime contractor business reviews and short-list interviews ongoing to increase HUB participation. MD Anderson commits to a good faith effort to increase purchases from, and contract awards to, HUB firms consistent with the state's goals for HUB participation and overall economic development. Opportunities Forecasts are assembled and distributed quarterly to local advocacy groups for distribution to their membership and are provided at external networking events.

University of Texas M. D. Anderson Cancer Center
Estimated Funds Outside the Institution's Bill Pattern
2024-25 and 2026-27 Biennia

	2024-25 Biennium				2026-27 Biennium			
	<u>FY 2024</u> <u>Revenue</u>	<u>FY 2025</u> <u>Revenue</u>	<u>Biennium</u> <u>Total</u>	<u>Percent</u> <u>of Total</u>	<u>FY 2026</u> <u>Revenue</u>	<u>FY 2027</u> <u>Revenue</u>	<u>Biennium</u> <u>Total</u>	<u>Percent</u> <u>of Total</u>
APPROPRIATED SOURCES INSIDE THE BILL PATTERN								
State Appropriations (excluding HEGI & State Paid Fringes)	224,486,448	\$ 224,464,097	\$ 448,950,545		\$ 224,486,448	\$ 224,464,097	\$ 448,950,545	
Tuition and Fees (net of Discounts and Allowances)	816,917	838,951	1,655,868		859,951	881,123	1,741,074	
Endowment and Interest Income	9,839,471	11,622,880	21,462,351		10,435,898	10,435,898	20,871,796	
Sales and Services of Educational Activities (net)	-	-	-		-	-	-	
Sales and Services of Hospitals (net)	-	-	-		-	-	-	
Other Income	5,741	6,164	11,905		2,164	2,164	4,328	
Total	235,148,577	236,932,092	472,080,669	2.9%	235,784,461	235,783,282	471,567,743	2.6%
APPROPRIATED SOURCES OUTSIDE THE BILL PATTERN								
State Appropriations (HEGI & State Paid Fringes)	\$ 15,941,423	\$ 15,980,952	\$ 31,922,375		\$ 15,982,543	\$ 15,982,543	\$ 31,965,087	
Higher Education Assistance Funds	-	-	-		-	-	-	
Available University Fund	-	-	-		-	-	-	
Sales and Services of Hospital (net)	5,842,507,166	6,462,813,518	12,305,320,684		6,656,697,924	6,856,398,861	13,513,096,785	
Other Income	7,250,000	4,911,947	12,161,947		5,059,305	5,211,085	10,270,390	
Endowment and Interest Income	189,353,943	229,731,758	419,085,701		236,623,711	243,722,422	480,346,133	
State Grants and Contracts	4,805	61,588	66,393		61,588	61,588	123,176	
Total	6,055,057,337	6,713,499,763	12,768,557,100	77.1%	6,914,425,071	7,121,376,499	14,035,801,570	77.5%
NON-APPROPRIATED SOURCES								
Tuition and Fees (net of Discounts and Allowances)	1,174,213	1,199,910	2,374,123		1,235,907	1,272,985	2,508,892	
Federal Grants and Contracts	291,836,227	341,694,844	633,531,071		351,945,689	362,504,060	714,449,749	
State Grants and Contracts	44,316,540	39,681,713	83,998,253		40,872,164	42,098,329	82,970,494	
Local Government Grants and Contracts	269,004,586	306,372,747	575,377,333		315,563,929	325,030,847	640,594,777	
Private Gifts and Grants	133,226,886	159,390,492	292,617,378		164,172,207	169,097,373	333,269,580	
Endowment and Interest Income	211,447,900	207,233,898	418,681,798		213,450,915	219,854,442	433,305,357	
Sales and Services of Educational Activities (net)	2,000,000	2,000,000	4,000,000		2,060,000	2,121,800	4,181,800	
Sales and Services of Hospitals (net)	-	-	-		-	-	-	
Professional Fees (net)	481,647,313	520,912,494	1,002,559,807		536,539,869	552,636,065	1,089,175,934	
Auxiliary Enterprises (net)	39,125,568	46,615,624	85,741,192		48,014,093	49,454,516	97,468,608	
Other Income	117,750,000	100,088,053	217,838,053		103,090,695	106,183,415	209,274,110	
Total	1,591,529,233	1,725,189,775	3,316,719,008	20.0%	1,776,945,468	1,830,253,832	3,607,199,301	19.9%
TOTAL SOURCES	\$ 7,881,735,147	\$ 8,675,621,630	\$ 16,557,356,777	100.0%	\$ 8,927,155,000	\$ 9,187,413,613	\$ 18,114,568,614	100.0%

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	Act 2023	Act 2024	Bud 2025	Est 2026	Est 2027
Gross Tuition					
Gross Resident Tuition	572,350	603,089	618,166	633,620	649,461
Gross Non-Resident Tuition	499,885	525,267	538,399	551,859	565,655
Gross Tuition	1,072,235	1,128,356	1,156,565	1,185,479	1,215,116
Less: Resident Waivers and Exemptions (excludes Hazlewood)	0	0	0	0	0
Less: Non-Resident Waivers and Exemptions	(309,653)	(324,795)	(332,906)	(341,229)	(349,760)
Less: Hazlewood Exemptions	(7,450)	(8,000)	(8,200)	(8,405)	(8,615)
Less: Board Authorized Tuition Increases (TX. Educ. Code Ann. Sec. 54.008)	(97,932)	(106,346)	(109,005)	(111,730)	(114,523)
Less: Tuition increases charged to doctoral students with hours in excess of 100 (TX. Educ. Code Ann. Sec. 54.012)	0	0	0	0	0
Less: Tuition increases charged to undergraduate students with excessive hours above degree requirements. (TX. Educ. Code Ann. Sec. 61.0595)	0	0	0	0	0
Less: Tuition rebates for certain undergraduates (TX. Educ. Code Ann. Sec. 54.0065)	0	0	0	0	0
Plus: Tuition waived for Students 55 Years or Older (TX. Educ. Code Ann. Sec. 54.263)	0	0	0	0	0
Less: Tuition for repeated or excessive hours (TX. Educ. Code Ann. Sec. 54.014)	0	0	0	0	0
Plus: Tuition waived for Texas Grant Recipients (TX. Educ. Code Ann. Sec. 56.307)	0	0	0	0	0
Subtotal	657,200	689,215	706,454	724,115	742,218
Less: Transfer of funds for Texas Public Education Grants Program (Tex. Educ. Code Ann. Sec. 56c) and for Emergency Loans (Tex. Educ. Code Ann. Sec. 56d)	(94,134)	(99,170)	(101,649)	(104,190)	(106,795)
Less: Transfer of Funds (2%) for Physician/Dental Loans (Medical Schools)	0	0	0	0	0
Less: Statutory Tuition (Tx. Educ. Code Ann. Sec. 54.051) Set Aside for Doctoral Incentive Loan Repayment Program (Tx. Educ. Code Ann. Sec. 56.095)	0	0	0	0	0
Less: Other Authorized Deduction					
Net Tuition	563,066	590,045	604,805	619,925	635,423
Student Teaching Fees	0	0	0	0	0

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	Act 2023	Act 2024	Bud 2025	Est 2026	Est 2027
Special Course Fees	0	0	0	0	0
Laboratory Fees	0	0	0	0	0
Subtotal, Tuition and Fees (Formula Amounts for Health-Related Institutions)	563,066	590,045	604,805	619,925	635,423
OTHER INCOME					
Interest on General Funds:					
Local Funds in State Treasury	48,815	51,426	52,712	54,030	55,381
Funds in Local Depositories, e.g., local amounts	0	0	0	0	0
Other Income (Itemize)					
Subtotal, Other Income	48,815	51,426	52,712	54,030	55,381
Subtotal, Other Educational and General Income	611,881	641,471	657,517	673,955	690,804
Less: O.A.S.I. Applicable to Educational and General Local Funds Payrolls	(13,907)	(14,260)	(13,857)	(14,273)	(14,701)
Less: Teachers Retirement System and ORP Proportionality for Educational and General Funds	(15,106)	(15,810)	(15,363)	(15,824)	(16,298)
Less: Staff Group Insurance Premiums	(33,718)	(24,885)	(24,751)	(25,246)	(25,751)
Total, Other Educational and General Income (Formula Amounts for General Academic Institutions)	549,150	586,516	603,546	618,612	634,054
Reconciliation to Summary of Request for FY 2019-2021:					
Plus: Transfer of Funds for Texas Public Education Grants Program and Physician Loans	94,134	99,170	101,649	104,190	106,795
Plus: Transfer of Funds 2% for Physician/Dental Loans (Medical Schools)	0	0	0	0	0
Plus: Transfer of Funds for Cancellation of Student Loans of Physicians	0	0	0	0	0
Plus: Organized Activities	0	0	0	0	0
Plus: Staff Group Insurance Premiums	33,718	24,885	24,751	25,246	25,751
Plus: Board-authorized Tuition Income	97,932	106,346	109,005	111,730	114,523
Plus: Tuition Increases Charged to Doctoral Students with Hours in Excess of 100	0	0	0	0	0
Plus: Tuition Increases Charged to Undergraduate Students with Excessive Hours above Degree Requirements (TX. Educ. Code Ann. Sec. 61.0595)	0	0	0	0	0

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	Act 2023	Act 2024	Bud 2025	Est 2026	Est 2027
Plus: Tuition rebates for certain undergraduates (TX Educ.Code Ann. Sec. 54.0065)	0	0	0	0	0
Plus: Tuition for repeated or excessive hours (TX. Educ. Code Ann. Sec. 54.014)	0	0	0	0	0
Less: Tuition Waived for Students 55 Years or Older	0	0	0	0	0
Less: Tuition Waived for Texas Grant Recipients	0	0	0	0	0
Total, Other Educational and General Income Reported on Summary of Request	774,934	816,917	838,951	859,778	881,123

Schedule HE - 1B: Health-related Institutions Patient Related Income

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	Act 2023	Act 2024	Bud 2025	Est 2026	Est 2027
Health-related Institutions Patient Income:					
Medical Patient Income	5,382,654,221	5,875,379,001	6,413,207,497	6,733,867,872	7,070,561,266
Dental Patient Income	0	0	0	0	0
Interest on Funds in Local Depositories	216,963,246	228,968,344	241,637,713	247,678,656	253,870,622
Other (Itemize)					
Other Operating Revenue	4,252,768	5,212,828	6,389,621	6,549,362	6,713,096
Less: OASI Applicable to Other Funds Payroll	(116,468,887)	(129,810,835)	(134,107,564)	(138,130,790)	(142,274,715)
Less: Teachers Retirement System and ORP Proportionality for Other Funds	(126,509,892)	(143,917,154)	(148,680,801)	(153,141,225)	(157,735,461)
Less: Staff Group Insurance Premiums Applicable to Other Funds	(283,113,356)	(188,390,234)	(186,012,164)	(189,732,407)	(193,527,055)
Total, Health-related Institutions Patient Related Income	5,077,778,100	5,647,441,950	6,192,434,302	6,507,091,468	6,837,607,753
Health-related Institutions Patient-Related FTEs	15,751.0	17,132.8	18,029.6	18,961.8	19,940.6

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	Act 2023	Act 2024	Bud 2025	Est 2026	Est 2027
General Revenue Transfers					
Transfer from Coordinating Board for Texas College Work Study Program (2021, 2022, 2023)	0	0	0	0	0
Transfer from Coordinating Board for Professional Nursing Shortage Reduction Program	0	0	0	0	0
Transfer of GR Group Insurance Premium from Comptroller (UT and TAMU Components only)	7,054,095	6,661,066	6,603,051	6,603,051	6,603,051
Less: Transfer to Other Institutions	0	0	0	0	0
Less: Transfer to Department of Health, Disproportionate Share - State-Owned Hospitals (2021, 2022, 2023)	0	0	0	0	0
Other (Itemize)					
Other: Fifth Year Accounting Scholarship	0	0	0	0	0
Texas Grants	55,747	4,805	61,588	61,588	61,588
B-on-Time Program	0	0	0	0	0
Texas Research Incentive Program	0	0	0	0	0
Less: Transfer to System Administration	0	0	0	0	0
GME Expansion	0	0	0	0	0
Subtotal, General Revenue Transfers	7,109,842	6,665,871	6,664,639	6,664,639	6,664,639
General Revenue HEF	0	0	0	0	0
Transfer from Available University Funds (UT, A&M and Prairie View A&M Only)	0	0	0	0	0
Other Additions (Itemize)					
Increase Capital Projects - Educational and General Funds	0	0	0	0	0
Transfer from Department of Health, Disproportionate Share - State-owned Hospitals (2021, 2022, 2023)	0	0	0	0	0
Transfers from Other Funds, e.g., Designated funds transferred for educational and general activities (Itemize)	0	0	0	0	0
Other (Itemize)					
Hazlewood Permanent Fund Support	312	0	0	0	0
Gross Designated Tuition (Sec. 54.0513)	824,444	849,177	874,652	900,892	927,919
Indirect Cost Recovery (Sec. 145.001(d))	138,963,479	143,132,383	147,426,354	151,849,145	156,404,619
Correctional Managed Care Contracts	0	0	0	0	0

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	E&G Enrollment	GR Enrollment	GR-D/OEGI Enrollment	Total E&G (Check)	Local Non-E&G
GR & GR-D Percentages					
GR %	3.50%				
GR-D/Other %	96.50%				
Total Percentage	100.00%				
FULL TIME ACTIVES					
1a Employee Only	9,696	339	9,357	9,696	4,082
2a Employee and Children	3,284	115	3,169	3,284	993
3a Employee and Spouse	1,972	69	1,903	1,972	520
4a Employee and Family	3,507	123	3,384	3,507	1,047
5a Eligible, Opt Out	533	19	514	533	100
6a Eligible, Not Enrolled	475	17	458	475	279
Total for This Section	19,467	682	18,785	19,467	7,021
PART TIME ACTIVES					
1b Employee Only	1,100	38	1,062	1,100	129
2b Employee and Children	362	13	349	362	9
3b Employee and Spouse	168	6	162	168	8
4b Employee and Family	401	14	387	401	13
5b Eligible, Opt Out	52	2	50	52	10
6b Eligible, Not Enrolled	149	5	144	149	118
Total for This Section	2,232	78	2,154	2,232	287
Total Active Enrollment	21,699	760	20,939	21,699	7,308

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	E&G Enrollment	GR Enrollment	GR-D/OEGI Enrollment	Total E&G (Check)	Local Non-E&G
FULL TIME RETIREES by ERS					
1c Employee Only	4,353	152	4,201	4,353	1,693
2c Employee and Children	81	3	78	81	32
3c Employee and Spouse	166	6	160	166	64
4c Employee and Family	73	3	70	73	28
5c Eligible, Opt Out	22	1	21	22	8
6c Eligible, Not Enrolled	41	1	40	41	16
Total for This Section	4,736	166	4,570	4,736	1,841
PART TIME RETIREES by ERS					
1d Employee Only	0	0	0	0	0
2d Employee and Children	0	0	0	0	0
3d Employee and Spouse	0	0	0	0	0
4d Employee and Family	0	0	0	0	0
5d Eligible, Opt Out	0	0	0	0	0
6d Eligible, Not Enrolled	0	0	0	0	0
Total for This Section	0	0	0	0	0
Total Retirees Enrollment	4,736	166	4,570	4,736	1,841
TOTAL FULL TIME ENROLLMENT					
1e Employee Only	14,049	491	13,558	14,049	5,775
2e Employee and Children	3,365	118	3,247	3,365	1,025
3e Employee and Spouse	2,138	75	2,063	2,138	584
4e Employee and Family	3,580	126	3,454	3,580	1,075
5e Eligible, Opt Out	555	20	535	555	108
6e Eligible, Not Enrolled	516	18	498	516	295
Total for This Section	24,203	848	23,355	24,203	8,862

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	E&G Enrollment	GR Enrollment	GR-D/OEGI Enrollment	Total E&G (Check)	Local Non-E&G
TOTAL ENROLLMENT					
1f Employee Only	15,149	529	14,620	15,149	5,904
2f Employee and Children	3,727	131	3,596	3,727	1,034
3f Employee and Spouse	2,306	81	2,225	2,306	592
4f Employee and Family	3,981	140	3,841	3,981	1,088
5f Eligible, Opt Out	607	22	585	607	118
6f Eligible, Not Enrolled	665	23	642	665	413
Total for This Section	26,435	926	25,509	26,435	9,149

Higher Education Schedule 4: Computation of OASI
 89th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

Agency 506 The University of Texas M.D. Anderson Cancer Center

Proportionality Percentage Based on Comptroller Accounting Policy Statement #011, Exhibit 2	2023		2024		2025		2026		2027	
	<u>% to Total</u>	<u>Allocation of OASI</u>	<u>% to Total</u>	<u>Allocation of OASI</u>	<u>% to Total</u>	<u>Allocation of OASI</u>	<u>% to Total</u>	<u>Allocation of OASI</u>	<u>% to Total</u>	<u>Allocation of OASI</u>
General Revenue (% to Total)	3.6768	\$4,446,322	3.4993	\$4,707,706	3.2095	\$4,447,365	3.2095	\$4,580,786	3.2095	\$4,718,210
Other Educational and General Funds (% to Total)	0.0115	\$13,907	0.0106	\$14,260	0.0100	\$13,857	0.0100	\$14,273	0.0100	\$14,701
Health-Related Institutions Patient Income (% to Total)	96.3117	\$116,468,887	96.4901	\$129,810,835	96.7805	\$134,107,564	96.7805	\$138,130,790	96.7805	\$142,274,715
Grand Total, OASI (100%)	100.0000	\$120,929,116	100.0000	\$134,532,802	100.0000	\$138,568,786	100.0000	\$142,725,849	100.0000	\$147,007,625

Higher Education Schedule 5: Calculation of Retirement Proportionality and ORP Differential
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Automated Budget and Evaluation System of Texas (ABEST)

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Description	Act 2023	Act 2024	Bud 2025	Est 2026	Est 2027
Proportionality Amounts					
Gross Educational and General Payroll - Subject To TRS Retirement	1,438,664,370	1,609,904,718	1,658,201,860	1,707,947,916	1,759,186,353
Employer Contribution to TRS Retirement Programs	115,093,150	132,817,139	136,801,653	140,905,703	145,132,874
Gross Educational and General Payroll - Subject To ORP Retirement	246,386,284	247,501,661	254,926,711	262,574,512	270,451,747
Employer Contribution to ORP Retirement Programs	16,261,495	16,335,110	16,825,163	17,329,918	17,849,815
Proportionality Percentage					
General Revenue	3.6768 %	3.4993 %	3.2095 %	3.2095 %	3.2095 %
Other Educational and General Income	0.0115 %	0.0106 %	0.0100 %	0.0100 %	0.0100 %
Health-related Institutions Patient Income	96.3117 %	96.4901 %	96.7805 %	96.7805 %	96.7805 %
Proportional Contribution					
Other Educational and General Proportional Contribution (Other E&G percentage x Total Employer Contribution to Retirement Programs)	15,106	15,810	15,363	15,824	16,298
HRI Patient Income Proportional Contribution (HRI Patient Income percentage x Total Employer Contribution To Retirement Programs)	126,509,892	143,917,154	148,680,801	153,141,225	157,735,461
Differential					
Differential Percentage	1.9000 %	1.9000 %	1.9000 %	1.9000 %	1.9000 %
Gross Payroll Subject to Differential - Optional Retirement Program	70,929,385	71,250,478	73,387,992	75,589,632	77,857,321
Total Differential	1,347,658	1,353,759	1,394,372	1,436,203	1,479,289

Higher Education Schedule 6: Constitutional Capital Funding

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Automated Budget and Evaluation System of Texas (ABEST)

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Activity	Act 2023	Act 2024	Bud 2025	Est 2026	Est 2027
A. PUF Bond Proceeds Allocation	19,388,382	35,596,057	4,900,000	4,900,000	4,900,000
Project Allocation					
Library Acquisitions	0	0	0	0	0
Construction, Repairs and Renovations	14,350,123	32,449,877	2,400,000	2,400,000	2,400,000
Furnishings & Equipment	0	0	0	0	0
Computer Equipment & Infrastructure	0	0	0	0	0
Reserve for Future Consideration	0	0	0	0	0
Other (Itemize)					
PUF Bond Proceeds					
STARS & STARS+	5,038,259	3,146,180	2,500,000	2,500,000	2,500,000
B. HEF General Revenue Allocation	0	0	0	0	0
Project Allocation					
Library Acquisitions	0	0	0	0	0
Construction, Repairs and Renovations	0	0	0	0	0
Furnishings & Equipment	0	0	0	0	0
Computer Equipment & Infrastructure	0	0	0	0	0
Reserve for Future Consideration	0	0	0	0	0
HEF for Debt Service	0	0	0	0	0
Other (Itemize)					

Higher Education Schedule 7: Personnel
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 Automated Budget and Evaluation System of Texas (ABEST)

Date: 8/9/2024
 Time: 9:37:31AM

Agency code: **506** Agency name: **UT MD Anderson Cancer Ctr**

	Actual 2023	Actual 2024	Budgeted 2025	Estimated 2026	Estimated 2027
Part A.					
FTE Postions					
Directly Appropriated Funds (Bill Pattern)					
Educational and General Funds Faculty Employees	59.6	58.9	58.1	58.1	58.1
Educational and General Funds Non-Faculty Employees	543.6	564.3	556.1	556.1	556.1
Subtotal, Directly Appropriated Funds	603.2	623.2	614.2	614.2	614.2
Other Appropriated Funds					
Other (Itemize)	15,751.0	17,132.8	18,029.6	18,961.8	19,940.6
Subtotal, Other Appropriated Funds	15,751.0	17,132.8	18,029.6	18,961.8	19,940.6
Subtotal, All Appropriated	16,354.2	17,756.0	18,643.8	19,576.0	20,554.8
Non Appropriated Funds Employees	7,224.6	7,564.9	7,716.2	7,870.5	8,027.9
Subtotal, Other Funds & Non-Appropriated	7,224.6	7,564.9	7,716.2	7,870.5	8,027.9
GRAND TOTAL	23,578.8	25,320.9	26,360.0	27,446.5	28,582.7

Higher Education Schedule 8A: Capital Construction Assistance Projects Revenue Bond Projects

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Automated Budget and Evaluation System of Texas (ABEST)

DATE: 8/9/2024
TIME: 9:37:31AM

Agency 506 The University of Texas M.D. Anderson Cancer Center

Project Priority:	Project Code:	Capital Construction Assistance Projects Revenue Bond Request	Total Project Cost	Cost Per Total Gross Square Feet
1	1	\$ 100,000,000	\$ 335,000,000	\$ 1,243
Name of Proposed Facility:		Project Type:		
Biosciences Research Facility		New Construction		
Location of Facility:		Type of Facility:		
Texas Medical Center Campus		Research		
Project Start Date:		Project Completion Date:		
09/30/2024		03/30/2028		
Gross Square Feet:		Net Assignable Square Feet in Project		
269,500		159,000		

Project Description

The Biosciences Research Facility (BRF) will advance research innovations by consolidating vivarium operations into a state-of-the-art facility on the South Campus. It represents a significant step towards the Master Facilities Framework goal of centralizing approximately 85% of UT MD Anderson's research operations on the South Campus to improve efficiency and facilitate collaboration to drive breakthroughs.

The scope of the project includes the design and construction of a new three-floor building with a partial interstitial level above Floor 2 and a two-level mechanical penthouse and comprising approximately 269,500 building gross square feet (BGSF) with Floors 1 and 2 being finished-out and Floor 3 (approximately 78,000 BGSF) being left in a shelled condition, to be finished out under a future, separate project. The finish out of Floors 1 and 2 will provide space for approximately 26,500 cages and associated procedure and support rooms as well as limited imaging capabilities.

Higher Education Schedule 8B: Capital Construction Assistance Projects Revenue Bond Issuance History

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Authorization Date	Authorization Amount	Issuance Date	Issuance Amount	Authorized Amount Outstanding as of 08/31/2024	Proposed Issuance Date for Outstanding Authorization	Proposed Issuance Amount for Outstanding Authorization
2001	\$20,000,000	Jan 23 2003	\$20,000,000			
		<i>Subtotal</i>	\$20,000,000	\$0		
2003	\$20,000,000	Nov 4 2004	\$20,000,000			
		<i>Subtotal</i>	\$20,000,000	\$0		
2006	\$40,000,000	Feb 14 2008	\$1,036,000			
		Feb 15 2008	\$1,036,000			
		Aug 15 2008	\$1,417,000			
		Jan 6 2009	\$23,480,000			
		Feb 18 2009	\$1,520,000			
		Aug 3 2009	\$2,813,000			
		Mar 25 2010	\$8,698,000			
		<i>Subtotal</i>	\$40,000,000	\$0		
2015	\$70,000,000	May 10 2016	\$35,000,000			
		Jul 1 2016	\$15,000,000			
		Aug 22 2016	\$20,000,000			
		<i>Subtotal</i>	\$70,000,000	\$0		
2022	\$69,897,111	Apr 20 2023	\$69,897,111			
		<i>Subtotal</i>	\$69,897,111	\$0		

Schedule 8C: CCAP Revenue Bonds Request by Project
 89th Regular Session, Agency Submission, Version 1

Agency Code: **506**

Agency Name: **The University of Texas M.D. Anderson Cancer Center**

Project Name	Authorization Year	Estimated Final Payment Date	Requested Amount 2026	Requested Amount 2027
MDA Building for Personalized Cancer Care	2015	8/15/2027	\$ 10,825,500.00	\$ 9,702,000.00
MDA Life Sciences Research, Innovation, and Disc	2022	8/15/2045	\$ 6,571,699.00	\$ 7,695,199.00
			<u>\$ 17,397,199.00</u>	<u>\$ 17,397,199.00</u>

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Cell Therapy Institute

(1) Year Non-Formula Support Item First Funded:	2026
Year Non-Formula Support Item Established:	2026
Original Appropriation:	\$30,000,000

(2) Mission:

The Institute for Cell Therapy Discovery and Innovation at MD Anderson is dedicated to advancing innovative cell therapies for patients with cancer.

Cell therapy is a unique form of immunotherapy which bolsters the body's immune system to attack cancer cells. MD Anderson has developed a novel form of the treatment with fewer side effects and the capability to produce "off-the-shelf" products, increasing accessibility and reducing the costs of treatment. Our goal is to expand our capabilities beyond cord blood-derived NK cells, to investigate induced pluripotent stem cells (iPSCs), cells that are reprogrammed from cord blood which is derived from the umbilical cord upon labor and deliver, as a new source for readily available NK cells and other immune cells, including T cells, B cells and macrophages. Our aim is to deliver targeted cell therapies to patients with cancer that are safe and highly effective. We will accomplish this by leveraging our existing platform to develop novel cell therapies to address the unique challenges presented by different cancer types, thus providing patient benefit and maintaining our global leadership in cell therapy.

(3) (a) Major Accomplishments to Date:

The main focus of the Institute for Cell Therapy Discovery and Innovation is to create and implement novel methodologies for the generation of immune cells specifically engineered to target cancer. Central to our efforts is the identification of suitable tumor antigens, which are the targets that the engineered immune cells will recognize and become activated by, subsequently eliminating tumor cells. While several cell therapies are currently under investigation for known and validated tumor antigens (see below), the heterogeneity of antigen expression between cancers, potential for unique antigen expression patterns in advanced disease, current lack of targetable tumor antigens for many cancers, etc. make it imperative to comprehensively identify tumor antigen landscapes

We propose to broaden our existing antigen discovery and validation programs to identify novel tumor antigens that can be safely targeted by cell-based therapy. Equally important, it is crucial for the platform to discern and exclude those antigens that have the potential to lead to off-target toxicity, thereby safeguarding the well-being of patients by preventing damage to healthy tissues. Current projects under investigation include: 1. CAR NK Platform, 2. Dual CAR (IL13Ra/EGFRv3-IL-21) NK cells for Glioblastoma, 3. TCR Platform, 4. Pluriceptor Platform, 5. CRISPR Platform. We have successfully activated over 18 clinical trials and anticipate activating another 4-5 by end of year 2024.

(3) (b) Major Accomplishments Expected During the Next 2 Years:

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Multi-center Studies. We will advance promising cell therapies from early phase studies to multi-center studies, with the intention of gaining FDA approval. Going beyond early phase trials to multicenter studies will ensure cell therapies are accessible and affordable to local and non-local patients.

Expanding Repertoire of Engineered Targeting Cells. We will direct efforts towards iPSCs and other immune cells (such as T and B cells and macrophages?) to diversify our therapeutic strategies. Diversifying the cell therapy portfolio beyond cord blood derived NK cells to include T cells, macrophages and other myeloid cells, will ideally generate an unlimited supply of starting cell populations.

Collaboration. Extending our existing collaborations, we will also establish external collaborations with MD Anderson network partners to enhance our research capabilities.

Autoimmunity. Exploring cell therapy applications in autoimmune diseases in addition to our core cancer focus. Generate and build our own master cell bank of iPSCs derived from 'optimal cords' that can be used to manufacture different cell therapy products.

Prioritizing Recruitment. To bolster our research initiatives, recruitment will become a priority.

Mentoring and Education to train the next generation of researchers.

(4) Funding Source Prior to Receiving Non-Formula Support Funding:

Philanthropic/Donors/Grants/Institutional Funds

(5) Formula Funding:

This item does not generate formula funding

(6) Category:

Research Support

(7) Transitional Funding:

N

(8) Non-General Revenue Sources of Funding:

philanthropic/donors/institutional funds

(9) Impact of Not Funding:

Failing to fund this request could lead to delays in clinical trials, which would ultimately affect the delivery of crucial therapies to patients who need them most. Additionally, it's important to recognize that donor funds are often earmarked for specific targets, which can restrict access to certain patient populations. As a result, this limitation adversely impacts the availability of therapies across multiple cancer types.

(10) Non-Formula Support Needed on Permanent Basis/Discontinuu

One time funding

(11) Non-Formula Support Associated with Time Frame:

N/A

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(12) Benchmarks:

By scaling production, we have the potential to drive the cost of NK cell therapy down from a current average cost of \$250,000 per dose to as little as one-tenth that cost. MD Anderson has established the best-in-practice manufacturing process for off-the-shelf NK cell therapy that is accomplished in 15 days. This much quicker process relative to our competitors also allows for scaling, so we can reach populations of patients who otherwise would not have been able benefit from this treatment.

(13) Performance Reviews:

The Executive Advisory Board (EAB) will be fully established during the start-up phase. The EAB will meet annually and provide oversight, guidance, approve direction and monitor progress. Membership of the EAB will be drawn from experts in the field of cell therapy, immunotherapy, cell engineering, and translational research who have made significant contributions to advancing the field and are committed to furthering the Institute's mission .

The Internal Advisory Council (IAC) will be fully established and active during the startup phase. The IAC will meet twice a year and will provide guidance and scientific input on the projects supported by the Institute. Additionally, IAC will review and provide recommendations on achievability and impact of new proposals submitted to the Institute, which is a critical component in guiding and prioritizing the Institutes research and scientific portfolio.

The Pipeline Review Committee (PRC) will be fully established and active during the startup phase. The PRC will meet quarterly and will ensure that R&D projects align with the Institute's overall goals, mission and strategic objectives. Additionally, PRC will help prioritize projects based on potential, impact and clinical advancements.

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Cord Blood & Cellular Therapy Research Program

(1) Year Non-Formula Support Item First Funded:	2002
Year Non-Formula Support Item Established:	2002
Original Appropriation:	\$2,000,000

(2) Mission:

Funding currently supports the Cord Blood Bank and Good Manufacturing Laboratory (GMP) with the development and management of critical research protocols for cord blood transplantation and other cellular therapies, including rapid and exciting developments of chimeric antigen receptor (CAR) T cell therapy and CAR natural killer (NK) cell treatments for hematologic and solid tumors. These novel therapeutic approaches harness the body's own immune system to effectively fight cancers by killing abnormal cells. Cord blood provides a source of stem cells for transplant for minority patients who often have no registered donors. MD Anderson serves an unmet need as 75% of the cord blood units in the bank are of Hispanic, Black or Asian origin and the institution finds units for patients that otherwise would not have donors.

(3) (a) Major Accomplishments to Date:

More than 430,000 cord blood units have been banked from five Houston Hospitals, and 2,963 of those units have been transplanted into patients with no other therapeutic options. This has allowed the team to pioneer the use of novel cord blood-derived cells for cancer treatment. Katy Rezvani MD PhD has developed cord blood natural killer cells genetically manipulated to express a chimeric antigen receptor (CAR) targeting CD19+ tumors. These NK-CAR cells produce impressive responses in leukemia (CLL) and lymphoma patients with no toxicity and an overall response rate of 87%. These results will likely change the standard of care for patients with otherwise fatal cancers, Elizabeth Shpall MD has developed strategies to expand cord blood hematopoietic cells in the laboratory to make the doses higher and thus the recovery faster when transplanted into patients and developed a strategy called fucosylation to enhance the homing of cord blood to the bone marrow. Both have demonstrated more rapid recovery, making the transplants safer from infections and bleeding. The team is now combining expansion and fucosylation to try to make recovery in cord blood patients even faster and developing cord blood tissue-derived mesenchymal stromal cells (MSCs) which can be life-saving when used to treat graft versus host disease (GVHD).

(3) (b) Major Accomplishments Expected During the Next 2 Years:

NK-CAR cells are being developed to target other cancers including acute myelogenous leukemia (AML), T cell leukemia and several solid tumors such as brain lung, pancreas and ovarian cancers. We are combining cord blood expansion and fucosylation to maximally enhance the recovery time of the cells when infused into patients which may allow us to do cord blood transplants as an outpatient. Cord blood tissue-derived MSCs and MSC-derived exosomes will be used for the eradication of GVHD, and to treat cancer patients who have developed cardiac injury from chemotherapy (anthracyclins) and cancer patients who have developed respiratory failure. Additionally, we are developing cord tissue MSCs, and MSC-derived exosomes as vehicles to deliver gene therapy to patients with otherwise fatal tumors such as glioblastoma and pancreatic cancer. We are developing an extremely novel approach to generate umbilical cord derived megakaryocytes (Megs) to make platelets which will address the global platelet shortages in Texas and the rest of the United States.

(4) Funding Source Prior to Receiving Non-Formula Support Funding:

Prior to the budget reductions for FY 2012 - 2013, the MD Anderson Cord Blood Bank received funding from the legislature through the Texas Health and Human Services Commission.

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(5) Formula Funding:

This item does not generate formula funding.

(6) Category:

Research Support

(7) Transitional Funding:

N

(8) Non-General Revenue Sources of Funding:

General Revenue support is instrumental in advancing the field of cord blood transplantation and these funds have been leveraged to generate around \$12 million external funding for the program for the biennium.

(9) Impact of Not Funding:

Inability to continue the cutting edge research which will allow us to treat cancer patients who have very few options. This includes those with refractory cancers for whom we are developing NK-CAR therapies. It also includes cancer patients with refractory Graft vs Host Disease (GVHD) which is often fatal without MSCs as well as cancer patients with chemotherapy induced heart and lung disease, all of whom may be cured with cord tissue derived MSCs.

(10) Non-Formula Support Needed on Permanent Basis/Discontinuu

Permanent Basis

(11) Non-Formula Support Associated with Time Frame:

N/A

(12) Benchmarks:

N/A

(13) Performance Reviews:

The MD Anderson Cord Blood Bank is accredited by the Foundation for the Accreditation of Cellular Therapy (FACT), accepted into the networks of the National Marrow Donor Program (NMDP) and Health Resources and Services Administration (HRSA) and has recently received their FDA Biological license (one of 8 cord banks in the world who have received this license) which moving forward will be required to release clinical cords for transplant in the United States.

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Inflammatory Breast Cancer (IBC) Research Program

(1) Year Non-Formula Support Item First Funded:	2008
Year Non-Formula Support Item Established:	2008
Original Appropriation:	\$2,000,000

(2) Mission:

The Breast Cancer Research Program strategy funds programmatic research for Inflammatory Breast Cancer (IBC), a rare and often lethal type of breast cancer, which represents 10% of breast cancer mortality. Our mission is to eliminate IBC from Texas, USA, and the world. We want Texas to continue to be recognized as the preeminent worldwide leader of fighting this rare but deadly disease.

Since it was established in 2007, the "Morgan Welch Inflammatory Breast Cancer (IBC) Research Program and Clinic" at MD Anderson Cancer Center continues to lead the way in diagnosis, treatment, translational research, collaboration, and community education for this aggressive disease.

(3) (a) Major Accomplishments to Date:

1. Increased annual intake from ~70-90 pts to ~120-140 pts in IBC multi-team and cross campus clinics as planned. Our specialists team meets each IBC patient together in rapid coordinated visits to provide IBC-specific trimodal care (chemotherapy/ targeted therapy/ immunotherapy, surgery, radiation therapy, and planning delayed reconstruction). 2. Expanded Collaborations - Partnered with Dana Farber Cancer Institute and Susan G. Komen. 3. Optimized Clinical Trial Portfolio to open two (2) new immunotherapy-based clinical trials, secured funding for a new trial to target metastatic triple negative IBC, and completed accrual and reporting on the unique IBC microbiome. 4. Expanded IBC Connect Network to 18 institutions including UT programs across Texas; 5. Expanded inter-institutional partnership for IBC Registry database. The clinical database and biorepository are the world's largest registry, now > 1000 patients, from which we presented outcome improvements and opportunities with most up to date therapies. 6. Generated new IBC biospecimen resources and obtained new grants to power pre-clinical research to collaborate and innovate newer mechanisms to cure IBC, and developed a program platform, IBC Metamorphosis, to support and advance focused initiatives to improve breakthroughs. 7. Continued our virtual IBC education seminar for physicians, advocates, and community of 175-200 members to discuss IBC care, collaborate, and innovate.

(3) (b) Major Accomplishments Expected During the Next 2 Years:

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1. Further expand IBC Multi-Team Clinic care across Texas- improved IBC local disease control and survival outcomes led to an annual volume increase to 150-175 patients.
2. Expansion of IBC Clinical Research - We anticipate two (2) new IBC protocols (in development) in 2024, to be activated in 6-12 months and will complete accrual of the multicenter study with potential to revolutionize treatment of HER2+ (low and amplified) IBC by 2026.
3. Advanced pre-clinical breakthroughs. We anticipate announcing breakthroughs in the unique biology of IBC and the role of blood-based biopsies in IBC in the next two years and to advance our understanding of the heterogeneity of IBC through our new collaboration with BostonGene.
4. Expansion of IBC Research Collaborations- expand neoadjuvant study in collaboration with Dana Farber Cancer Center (DFCI).
5. Create data alignment and resource-sharing opportunities to advance IBC team-science collaborations, co-develop protocols, and innovate newer modalities of care.
6. Continued improvement of community outreach efforts and patient and physician education regarding IBC.
7. Continued development of roadmap to connect IBC expertise throughout the MDA and UT System across the State of Texas to enhance trial access and accelerate discovery to reduce the number of patients who suffer with IBC in Texas as a primary goal and further beyond to outside of Texas.

(4) Funding Source Prior to Receiving Non-Formula Support Funding:

None

(5) Formula Funding:

This item does not generate formula funding

(6) Category:

Research Support

(7) Transitional Funding:

N

(8) Non-General Revenue Sources of Funding:

No alternate options at this time.

(9) Impact of Not Funding:

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The consequence of not providing program funding would strongly impact all patients affected by IBC, the general public, state employees, and IBC Connect collaborators across fourteen (14) institutional sites. Additionally, in the absence of State funding, we would not be able to support the infrastructure to continue to educate and engage with institutional teams across multiple locations and the IBC community.

IBC has a median overall survival of only 4.75 years compared to 13.4 years for non-IBC patients. The median age of patients diagnosed with IBC is 5.25 years younger than that of non-IBC patients. Clinically, the program currently has ten (10) ongoing clinical trials with as many as 215 patients. These clinical studies are supported by an additional twenty-eight (28) laboratory studies with 869 patients and four (4) trials under development. If funding were discontinued, these critical patient-based studies would be detrimentally affected because there would not be infrastructure to support the studies. Further, we would fail to capitalize on our strategic positioning through diligent networking and relationship building across our regional and broader Texas network, missing the opportunity to impact IBC patients dramatically. These negative impacts will increase IBC-related mortality in Texas and the USA.

(10) Non-Formula Support Needed on Permanent Basis/Discontinuu

Permanent Basis

(11) Non-Formula Support Associated with Time Frame:

N/A

(12) Benchmarks:

N/A

(13) Performance Reviews:

1. Maintain and expand (goal 160/year) the IBC-specific clinic that is the largest in the world.
 2. Maintain the IBC Registry database of cases, and compare local/regional control rates, survival outcomes, and quality of life outcomes over time.
 3. Generate advanced IBC data and resources available for team science to develop cutting edge IBC research trials and therapies.
 4. Expand IBC partnerships with institutions, focusing on the UT system and local organizations, to expand and strengthen clinical and research collaborations across Texas.
 5. Expand partner site collaborations to increase available data in the IBC registry and patients enrolled at partner sites across Texas and beyond.
 6. Develop the first-ever IBC-specific PROs and gather data on quality-of-life outcomes that will improve over the next two years.
 7. We plan to publish at least four clinically oriented papers based on ongoing clinical trials that will inform current practice within two years.
 8. We expect to publish two paradigm shifting papers that will lead to novel diagnostics and treatments for patients with IBC within next two years.
 9. Enroll > 30 IBC cases per year on protocols to identify better treatments, including a national trial to assess the microbiome in IBC patients for the first time.
 10. Train a minimum of two trainees per year, developing clinical or research expertise to contribute to the future of this disease.
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Institutional Enhancement

(1) Year Non-Formula Support Item First Funded: 2000
Year Non-Formula Support Item Established: 2000
Original Appropriation: \$1,000,000

(2) Mission:

Funding in the Institutional Enhancement strategy only includes funding from the Texas Collegiate License plate trust funds.

(3) (a) Major Accomplishments to Date:

Texas Collegiate License Plate scholarships for MD Anderson School of Health Professions students.

(3) (b) Major Accomplishments Expected During the Next 2 Years:

Texas Collegiate License Plate scholarships for MD Anderson School of Health Professions students.

(4) Funding Source Prior to Receiving Non-Formula Support Funding:

None

(5) Formula Funding:

This item does not generate formula funding

(6) Category:

Institutional Enhancement

(7) Transitional Funding:

N

(8) Non-General Revenue Sources of Funding:

Texas Collegiate License Plate Trust Fund

(9) Impact of Not Funding:

Will impact scholarships for MD Anderson School of Health Profession students.

(10) Non-Formula Support Needed on Permanent Basis/Discontinuation:

Permanent basis

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(11) Non-Formula Support Associated with Time Frame:

N/A

(12) Benchmarks:

N/A

(13) Performance Reviews:

N/A
