

Appendix - February 17, 2022 Regular Board of Regents Meeting

UNTS Acronym List

UNTS Acronym List rv 3.3.21

AUDIT AND FINANCE COMMITTEE

Quarterly Financial Update

Quarterly Financial Update - Q1 2022 - Backup

Consolidated Compliance Background Report

Consolidated UNT System Q1 Compliance Background Report

ACT

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LINT SYSTEM





LINT SYSTEM

Q1 Revenue

All \$ presented as thousands

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Q1 Revenue

11.4% increase

Total revenue increased by \$43.3m/11.4%.

Tuition and Fees increased by \$14.3m/9.1% due to increased enrollment;

Sale of Goods and Services increased by \$8.6m/26.9% due to campus reopening;

Grants and Contracts increased by \$2.0m/7.4% due to COVID relief funding.

State Appropriations increased by \$11.3m/9.2% due to 10% appropriations reduction last fiscal year.

Q1 Expenses

3.5% increase

Total expenses increased by \$5.4m/3.5%.

Personnel Costs increased by \$3.6m/3.4% due to higher enrollment support;

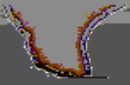
Maintenance & Operation Costs increased by \$1.9m/5.6% due to campus reopening support;

Scholarships and Financial Aid increased by \$0.9m/5.6% due to awards via COVID relief funding.

	FY22 Q1 Budget	FY22 Q1 Actuals	FY21 Q1 Actuals	22 Actuals vs. 21 Actuals Variance (\$000's)	22 Actuals vs. 21 Actuals Variance (%)
REVENUES					
Net Tuition and Fees	161,328	171,171	156,910	14,262	9.1%
Sales of Goods and Services	41,556	40,642	32,037	8,605	26.9%
Grants and Contracts	26,028	29,705	27,659	2,046	7.4%
State Appropriations	132,728	133,406	122,144	11,262	9.2%
All Other Revenue	41,847	46,916	39,820	7,096	17.8%
Total Revenues	403,488	421,840	378,569	43,271	11.4%
EXPENSES					
Personnel Costs	115,225	111,812	108,149	3,663	3.4%
Maintenance & Operation Costs	32,519	28,342	26,425	1,918	7.3%
Scholarships, Exemptions and Financial Aid	20,090	18,240	17,267	974	5.6%
All Other Expenses	8,194	2,583	3,708	(1,125)	-30.3%
Total Expenses	176,029	160,978	155,549	5,429	3.5%
TRANSFERS					
Total Net Transfers	(57,044)	(64,569)	(64,206)	(362)	0.6%
Estimated Budgeted Impact on Fund Balances	170,415	196,294	158,814	37,480	23.6%



LINT SYSTEM





Projected Revenue:

FY22 Revenue projecting \$15m below prior year;

All \$ presented as thousands

Q1 Revenue

16.0% increase

Total revenue increased by \$7.1m/16.0%.

- Tuition and Fees are flat to prior fiscal year;
- Sales of Goods increased by \$0.5m/164.4% due to campus reopening;
- Grants and Contracts increased \$2.6m/90.0% due to COVID relief funding;
- State Appropriations increased by \$3.8m/15.2% due to 10% appropriations reduction last year.

Q1 Expenses

16.3% increase

Total expenses increased by \$2.5m/16.3%.

- Personnel Costs increased by \$0.8m/7.5% in order to support enrollment growth;
- Maintenance & Operations increased \$0.4m/16.3% due to campus reopening;
- Scholarships and Financial Aid increased by \$1.4m/42.8% due to increased CARES funding.

				Variance (\$000's)	Variance (%)
REVENUES					
Net Tuition and Fees	13,244	12,646	12,536	110	0.9%
Sales of Goods and Services	661	811	307	504	164.4%
Grants and Contracts	5,840	5,560	2,926	2,634	90.0%
State Appropriations	29,512	28,996	25,162	3,834	15.2%
All Other Revenue	3,573	3,711	3,662	49	1.3%
Total Revenues	52,830	51,724	44,593	7,131	16.0%
EXPENSES					
Personnel Costs	10,924	10,875	10,119	756	7.5%
Maintenance & Operation Costs	3,341				



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Projected Revenue:

Total Revenue below prior year by \$1m;

Tuition & Fees revenue projecting below prior year by \$2m;



LINT SYSTEM

Q1 Revenue

Total revenue increased by \$0.1m/1.5%.

Sales of Goods and Services slightly decreased;

State Appropriations also slightly decreased;

All Other Revenue increased by \$0.2m due to higher investment income.







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System Administration Compliance & Integrity Program (FY22 Q1)

System Administration Oversight and Accountability

Chancellor U k ‡

System Administration Chief Compliance Officer

Tim Willette

Chancellor's Cabinet/Institutional Executive Compliance Committee

Jamaica Chapple, <i>(Interim)</i> VC-Academic Affairs & Student Success	Dan Tenney, VC-Finance/Chief Financial Officer	Steve Maruszewski, VC-Strategic Infrastructure
Sheraine Gilliam-Holmes, VC-HR & Chief Human Capital Officer	Danetta Bland, Chief Diversity Officer	Jack Morton, VC-Govt Relations & Policy
Chris McCoy, Chief Information Officer	Ninette Caruso, Chief Audit Executive	Alan Stucky, VC-General Counsel
	Paul Corliss, Chief Communications Officer	Tim Willette, Chief Compliance Officer

Compliance Coordinating Committee(s)

Employee Training & Development

Monitoring & Auditing

Investigations & Reporting

Principles of Community/Code of Conduct/Policies & Procedures/Standards

Day-to-Day Operations/Preventive & Corrective Efforts/Works In Progress/Emerging Concerns

SUBMITTED BY
CLA

OVERVIEW

FY2022 Compliance & Ethics Program Projects and Deliverables	Target
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INTRODUCTION

Our main efforts during the quarter included finalizing the annual risk assessment, preparing to assume responsibility for the policy management process, revising policy procedures, and planning for improvements to the monitoring responsibilities of the office. UCE also continued its work in COVID-19 response.

COMPLIANCE PROGRAM

Policies and Procedures

In the first quarter, UCE assumed responsibility for the policy management process. This change in the organization will allow a more focused approach to policy management and an elevated profile for the process. A policy director is in place and familiarizing himself with the university's practices and procedures. Initial plans for the program are already being implemented, which include modifying the policy template to ensure it is accessible, conducting an assessment of out-of-date policies, and maintaining throughput of policies already in process. UCE also revised the policy website to make it more useful for employees and is beginning to gather data on policy access to identify potential issues within the university. Additional reporting to the board is anticipated as that data is gathered over time and reports are developed. In addition to these efforts, the policy director is working with university colleagues to establish a program of marketing communications to improve the visibility of policy changes. This increased visibility is intended to improve compliance with ismure yæee becloe re of i (medi)10.1(ment)-1.1(.t)10.6o

UNT 1st Quarter Compliance Report

Compliance Officer and Compliance Committee

COVID-19 related tasks are not as time consuming as earlier in the pandemic, but continued in the 1st Quarter. Focus shifted to managing testing and containment on campus and planning for the expected winter wave of infections. The university has also begun planning for winding down the pandemic response if the pandemic becomes less severe, as expected.

UCE finalized its annual risk assessment in the quarterly Executive Compliance Committee meeting. No changes were suggested by the Committee and the risk priorities list was approved as presented. One risk priority was added to the list, IT security, and one regarding training was removed

Education and Training

UCE continued to track training across the campus as our suite of required training modules are now in place (see the UNT Training Compliance Snapshot Q1, 2022 in the Appendix, p.9). Faculty completion of the UNT Policies & Title IX training is lower than expected, but we believe that this is an artifact of the training cycle. Many employees are in the window to complete their training at the time the report was compiled.

Effective Communication/Trust Line

UCE received 18 reports for the 1st Quarter (see Q1 Trust Line Reports chart, Appendix, p.7). Fifteen of those reports have been closed. Two cases were substantiated, and additional training was delivered.

UNT 1st Quarter Compliance Report

Auditing and Monitoring

UCE's review of HIPAA covered components at UNT for compliance with the Protected Health Information Privacy policy was still on hold during the quarter. A new compliance analyst began working in the 1st quarter who comes to UNT with a background in HIPAA-related entities. She will be reviewing the work done to date, then develop a plan for completing the HIPAA review in the Spring semester.

FY22 RISK ASSESSMENT- Q1 PROGRESS

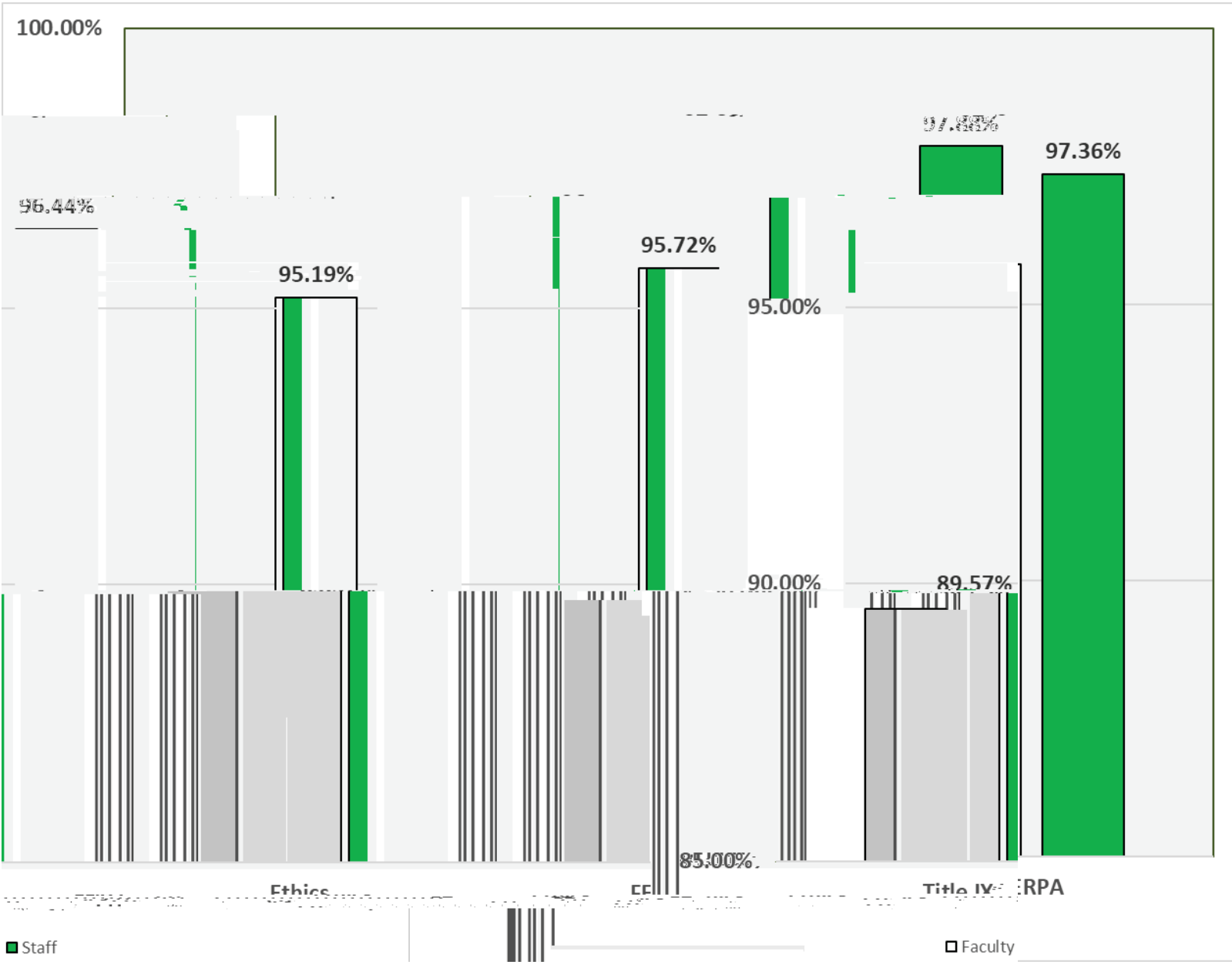
The UNT Compliance Risk Priorities for FY22 are essentially the same as those for FY21. These risk priorities are usually quite complex and span large parts of the organization, and often take several years to establish effective mitigation plans. None of the current priorities present a high risk of imminent failures and all are being addressed appropriately.

FY202

ASSOCIATED CHARTS/AP

FY 2022 UNT Compliance and Ethics Program Maturity

UNT Training Compliance Snapshot Q1, 2022





Quarterly Compliance Report

FIRST QUARTER FY 2022

Submitted by
Desiree Ramirez, CCEP, CHC
Senior Vice President and Chief Integrity Officer



COMPLIANCE REPORT

Integrity-Based Framework

Integrity is a cornerstone of an effective compliance program. The Integrity Framework is a proactive systemic and comprehensive approach that brings together instruments, processes, and structures for fostering integrity and preventing misconduct. The use of an integrity framework can positively influence employee behavior and experience and contribute to creating a positive work environment thus establishing a healthy relationship between the individual and the organization. This subsequently increases the value of the organization's reputation to their partners, stakeholders and the community.

Integrity risk can pose a threat to the reputation and profitability of the institution due to people-related incidents such as misconduct, bullying and sexual harassment, inappropriate use of social media, breaches of privacy, conflicts of interest, fraud and retaliation. This now also encompasses cyber-crime and expectations in response to societal controversies. Integrity risk carries serious consequences for businesses and employees, including fines, civil penalties and criminal charges. This can damage brand and reputation, impact people turnover and company culture. Management of integrity risk has become a critically important element to managing an effective compliance program.

An integrity based framework consists of three essential pillars: (1) instruments (e.g. ethics code, conflict-of-interest policy, whistleblowing arrangements); (2) processes (development planning, implementing, evaluating and adapting); and (3) structure (appointing responsibility and coordination). Management of this framework undertakes activities to address new and emerging risk with both a reactive and proactive approach. These pillars create a framework outline and dimensions:

- I. Determining and defining integrity
- II. Guiding towards integrity
- III. Monitoring integrity
- IV. Enforcing integrity (fair & appropriate procedures and sanctions)
- V. External context (reputation, audit and legal)

An integrity-based framework combines both the rules-based and values-based approaches and ensures the balance of their components within one framework. This drives the program by individual principles, values, leadership, organization expectations of conduct and legal regulations. An integrity-based approach to compliance is an active, conscious approach by HSC that emphasizes responsibility for ethical behavior and commitment to our Code of Culture. By utilizing this proactive approach, we demonstrate the consistency of our values in action with choices and decisions as an institution and individually.



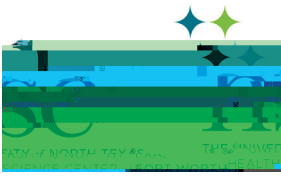


Center for Medicare and Medicaid Services- Federal Register

The Centers for Medicare & Medicaid Services (CMS) released the 2022 Medicare Physician Fee Schedule final rule on November 2. This rule includes updates to payment rates for physicians and other health care professionals for 2022, this included payment cuts for physicians that would go into effect January 1, 2022, unless Congress acted.

On December 7, 2021, the Protecting Medicare and American Farmers from Sequester Cuts Act (S 610) stopped the 3.75% payment cuts to the Medicare physician fee schedule. This cut would have significantly affected reimbursement and payment to HSC Health. Other items within the final rule include the expansion of telehealth for mental health; and clarification of policies on shared visits, critical care and teaching physicians' services. The office of Institutional Integrity and Awareness will conduct its annual Final Rule education and update to our clinical providers in January.

Compliance Program Elements



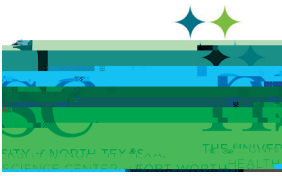
Education and Training

New Employee Training is completed within 30 days of hire. All new employees are expected to complete eight modules and review and attest to the HSC Code of Culture. All employees began their integrity education in early November. This year, the annual Integrity Training Program will include a refresher on specific topics thus reducing training time as compared to previous years; full mandatory training will be administered on a three-year cycle. Additionally, supervisors were provided access to the learning management system's analytics tool to help them review training



Integrity and Awareness Week (Compliance and Ethics Week)

During November 8th-12th, HSC along with many other organizations across the United States and internationally celebrated Integrity and Awareness Week. During that week, time was utilized to reflect on the ongoing commitment to our ethical culture and don't highlight the 7.6% (10.9% behavior) 11 sized to 6



Trust Line Reporting

HSC received four Trust Line calls in the first quarter; with one case closed and three in process. This is a decrease from the last quarter of five calls received; and a decrease from the same timeframe over the last 3 fiscal years. There is no indicated trend, however with the FY21 policy transformation completed and providing more clarity, employees have been empowered to have more information and education about expectations.



Title IX and EO Investigations

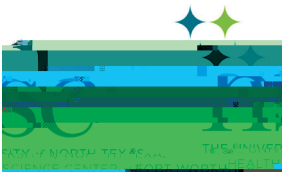
Title IX / Sexual Misconduct Complaint Data

Date	Report of Incident Received	Preliminary Investigation	Formal Investigation	Remediation
Sept 1 - Nov 30	8	6	0	0

- € **Eight incidents reported** to the Title IX Office. HSC lacked jurisdiction for **two** of the **eight** reported incidents.
- € **Six Preliminary Investigation(s) - Three** Sexual Harassment. **One** Sexual Assault (off campus). **Two** complaints found to be outside of Title IX / Sexual Misconduct. **Five** of the **six** preliminary investigations were closed. **One** is pending closure.
- € **Zero Formal Investigations** for this time period.

Date	Report of Incident Received	Sex-Based	Disability-Based	Race-Based
Sept 1 - Nov 30	9	1	6	1

- € **1 Sex based** – reviewed in collaboration with HSC Title IX – closed, no resolution requested
- € **6 disability based** – closed, previously investigated
- € **1 race based** – closed, unresponsive complainant
- € 1 case is currently open pending a formal complaint form – disability based



Conflict of Interest

Completing the Conflict of Interest disclosure form annually ensures that the people of the State of Texas have complete confidence in the integrity of their public servants who adhere to the highest ethical standards and principles of higher education. In order to fulfill this commitment, HSC requires all Employees, including Students paid from sponsored grants, to complete the Annual Conflict of Interest eDisclosure process and certify that they have reviewed and are

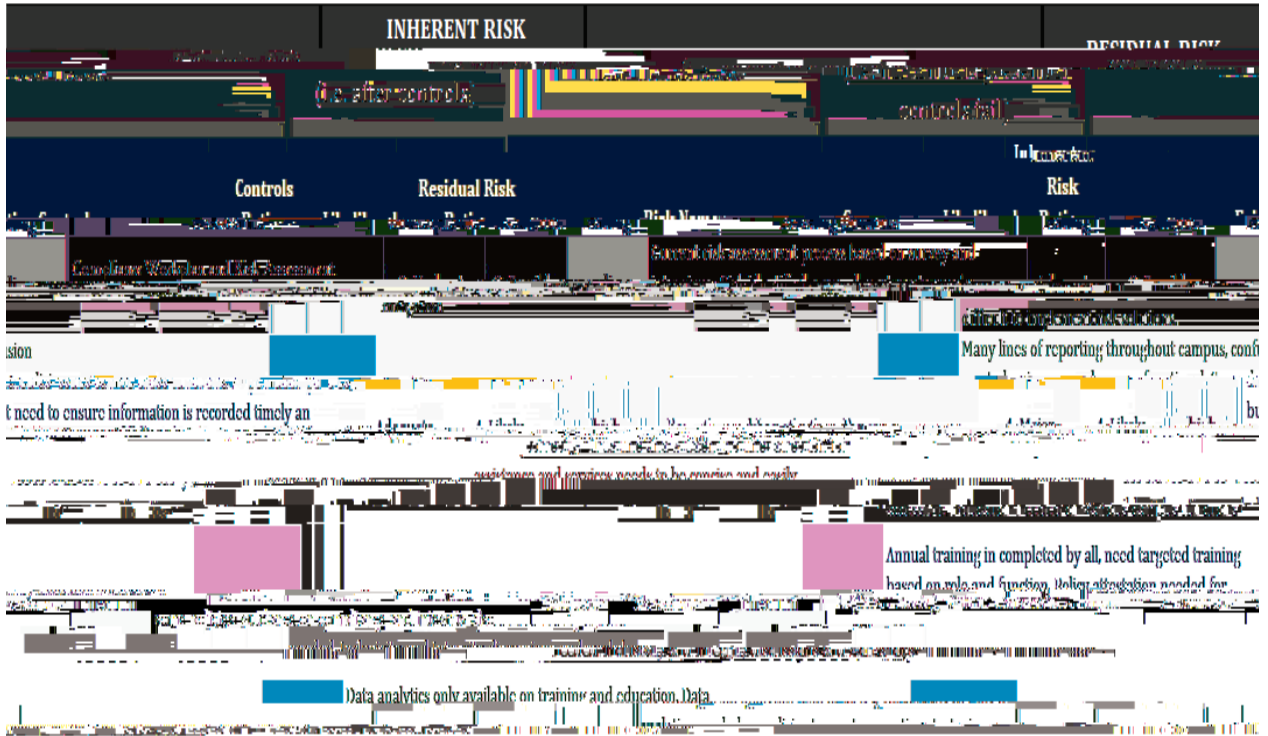


World' Most Ethical (WME) Companies Benchmarks

HSC measured comparably with WME peers in ar



Appendix: FY22 Compliance Workplan



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Compliance Targeted Areas	Commitment & Initiatives
<p>Compliance Targeted Areas</p>	<p>UNT Dallas is committed to the highest ethical standards in its internal/external dealings.</p>
<p>With the introduction of unpoplar's 8-month mass... the records retention management program. s retention management to include, but not res' the number of... records retention...</p>	<p>UNT Dallas is committed to having in place an effective To that end, the OIC is conducting a review of record</p>

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UNT Dallas Compliance & Integrity Program - Campus Structure (FY22 Q1)

Campus Oversight & Accountability
President Bob Mong

Campus Chief Compliance Officer
 Tim Willette

Institutional Executive Compliance Committee

President Bob Mong

Betty Stewart, Provost & EVP

Tim Willette, CCO

Arthur Bradford, CFO & EVP

President's Cabinet
President Bob Mong

Betty Stewart, Provost & EVP

Arthur Bradford, CFO & EVP

Monica Williams, VP-UA

Stephanie Holley,
 VP-SA&S

José da Silva,
 AVP & Dean of Students

Wanda Boyd,
 AVC-EDI/HR Executive Director

Michael Williams,
 Distinguished Leader in Residence

Angie Castillo,
 Executive Assistant to President

Tim Willette,
 Chief Compliance Officer

Compliance Coordinating Committees/Other Operational Committees

Employee Training

Monitoring & Auditing

Reporting/Investigating

Principles of Community/Code of Conduct/Policies & Procedures/Standards

Day-to-Day Operations/Preventive & Corrective/Works In Progress/Emerging Concerns