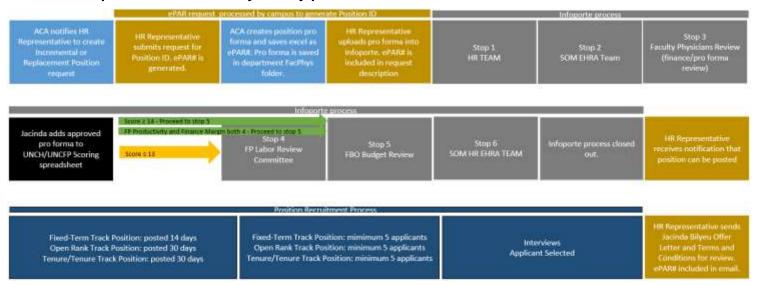


## **FACULTY**

## Position request workflow for any faculty paid on clinical funds:



#### **Pro Formas:**

- 1. Click here to access the most recent pro forma.
- 2. Name your pro forma as the epar# provided to you by your HR rep and save in your department FacPhys folder.
- 3. Your business case on the pro forma will be shared with the hospital to justify the hire. Provide succinct details on why this position is mission critical.

## **Infoporte Upload:**

- 1. Faculty requests should contain 1 attachment: pro forma
- 2. The comments section must include the epar# and should match the name of the uploaded pro forma.

#### **Scoring Spreadsheet:**

1. Scoring spreadsheet <u>found here</u>. Anything 14 and above or 4/4 for productivity and margin will bypass FP LRC. All others must be presented by the ACA to FP LRC.

#### Offer Letter:

- 1. Template for offer letter and terms and conditions found here.
- 2. HR representative or designee must email Jacinda Bilyeu offer letter and terms and conditions for review prior to extending final offer. Please include hiring vacancy ID in email.

## **FACULTY SUBMISSION COMMON ERRORS**

### Top Reasons your pro forma gets sent back:

- Not adding ~10% incentives
- Not reviewing receipt/wRVU
- Not completing the cFTE/FTE
- Conflicting names/info used on the position questionnaire in the "for modeling" vs "brief justification"
- Ramp different on position questionnaire vs proforma tabs

### Top Reasons your Offer Letter gets sent back:

- Using the wrong template
  - Correct template found <u>here</u>
- Requesting a sign-on bonus with no justification.
  - Each sign on bonus request (capped at 10% base salary) must have department justification sent via email. This justification is reviewed by FP President and SOM HR, so the approval timeline is extended any time a sign-on is included.
- Hiring into a tenure or tenure track position but department excluded nominated clinical professor paragraph.
  - Every tenure or tenure track hire must have this paragraph, even if it's an internal hire and the
    packet will be submitted well in advance. The template has this language.
- Requesting ramp up with no metrics.
  - Measurable mission based targets must be included in the ramp up. The template has this language. Ramp up also requires SOM HR approval, so the approval timeline is extended any time a ramp is included.
- Including moving expenses that are greater than \$15k SOM cap.

## **FACULTY LABOR REVIEW CRITERIA**

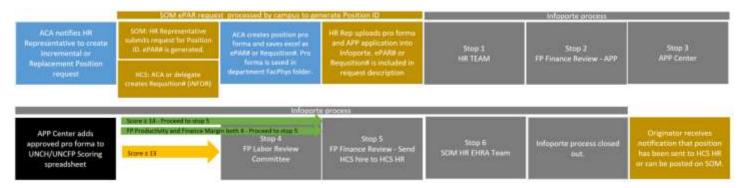
	Replacement	Incremental Budgeted	Incremental Unbudgeted
Patient Facing (proformas needed for all positions)	Financial Margin both score 4	Approve if score is ≥14 Approve if FP Productivity and Financial Margin both score 4 Present at LRC if score ≤13	Present at LRC. Business case must include how unbudgeted expense will be covered

Promotions Supplements	Approved. Route in Infoporte	
FTE Increase	Budget Neutral: Approved. Route in Infoporte Budget Variance: Present at LRC. Route in Infoporte. Jacinda will schedule ACA to present	
Faculty Funded on Non- Clinical \$  Approved if funding source is non-clinical. Route in Infoporte Present at LRC with justification if any effort is funded by clinical revenue		

12/8/2022

#### **APPs**

### Position request workflow for any APP (HCS or SOM):



### **APP Application:**

1. Application found here.

#### **Pro Formas:**

- 1. Click here to access the most recent pro forma.
- 2. Name your pro forma as the epar# (SOM) or Requisition # (HCS iNFOR) provided to you by your HR rep and save in your department FacPhys folder.
- 3. Your business case on the pro forma will be shared with the hospital to justify the hire. Provide succinct details on why this position is mission critical.

## **Infoporte Upload:**

- 1. APP requests should contain 2 attachments: pro forma and APP Application
- 2. <u>Upload both documents</u> into the new infoporte route APP Hiring Request
- 3. The comments section must include the epar# (SOM) or Requisition # (HCS iNFOR) and should also match the name of the uploaded pro forma.

#### **Scoring Spreadsheet:**

1. Scoring spreadsheet <u>found here</u>. Anything 14 and above or 4/4 for productivity and margin will bypass FP LRC. All others must be presented by the ACA to FP LRC.

#### **APP SUBMISSION COMMON ERRORS**

## Top Reasons your pro forma gets sent back:

- Not adding ~10% incentives
- Not reviewing receipt/wRVU
- Not completing the cFTE/FTE

12/8/2022

- Conflicting names/info used on the position questionnaire in the "for modeling" vs "brief justification"
- Ramp different on position questionnaire vs proforma tabs

## Top Reasons for Delay/Return of APP Applications:

- Incomplete fields on application
- Not signed by associated hospital VP
- Not enough information provided about clinical roles and responsibilities

## **APP LABOR REVIEW CRITERIA**

Replacement Incremental Budgeted Incremental Unbudgeted Approve if score is ≥14 Approve if score is ≥14 **Patient Facing** Present at LRC. Business Approve if FP Productivity and Approve if FP Productivity and (Application + proforma case must include how needed for all positions -Financial Margin both score 4 Financial Margin both score 4 unbudgeted expense will submit to APP Center) Present at LRC if score ≤13 Present at LRC if score ≤13 be covered

APPs Funded on Non-Clinical S

Approved if funding source is non-clinical. Route to APP Center.

Present at LRC with justification if any effort is funded by clinical revenue