

**UNIVERSITY OF FLORIDA COLLEGE OF MEDICINE**

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**Faculty Compensation Plan**

**July 1, 2010**

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## **INTRODUCTION**

The major goals of the University of Florida (UF) College Of Medicine (COM) faculty compensation plan are to promote and reward individual success in teaching, research, service and patient care through monetary incentives and individual recognition.

The compensation plan covers both clinical and basic science faculty employed by the COM. All faculty employed in salaried, benefits-eligible positions participate except: (1) faculty reporting to COM leadership in Jacksonville (COM faculty employed at the Jacksonville regional campus are covered under a separate compensation plan), (2) OPS and Emeritus faculty, (3) postdoctoral associates and research associates, (4) visiting faculty, (5) Advanced Registered Nurse Practitioners and Physician Assistants, and (6) faculty specifically exempted by the Dean.

A new faculty member who is employed after the first business day of the fiscal year may be included in the plan if the position is included in the department's annual budget and has been given an appropriate assignment and, for clinical faculty, a wRVU target.

This compensation plan is subject to periodic review by the COM Compensation Committee and revision by the Dean to ensure that the goals of the plan are being met. Without revising the plan, incentive payments or other elements of this plan may be suspended in specific cases where the College of Medicine faces financial exigency, as determined by the Dean. Standing research and clinical subcommittees of the Compensation Committee are available to make recommendations to chairs or the Dean, as appropriate, about disputes, conflicts, or questions surrounding faculty compensation.

## **BASE SALARY**

Base salary is a faculty member's fixed contracted salary. Base salary may be adjusted annually in accordance with UF and COM guidelines and based on the faculty member's performance. If performance measures are achieved or exceeded, faculty will be eligible for a base salary increase, incentives, and/or a year-end departmental incentive.

Base salary, also referred to as "Fixed/Contractual Salary Plus Medical Practice Supplement" in the AAMC Faculty Salary Survey, will be subject to an established floor and ceiling, stratified for rank and specialty (EXHIBIT III). A faculty member's base salary cannot be reduced below the AAMC 20<sup>th</sup> percentile, and cannot exceed the AAMC 75<sup>th</sup> percentile. It is the intent of the COM to provide appropriate total compensation without inflating base salary. When annual faculty salary increases are authorized by UF or the COM, faculty above the 75<sup>th</sup> percentile may be granted a payment in lieu of a base salary adjustment. Other external benchmarks in lieu of the AAMC 75<sup>th</sup> percentile ceiling may be used with the approval of the Dean. For basic science

faculty and PhD's in clinical departments, base salary is subject to the AAMC 20<sup>th</sup> percentile floor but not the ceiling.

Total compensation is comprised of base salary, administrative supplements, productivity incentives, year-end departmental incentives, and one time payments. Total compensation may not exceed fair market value. In order to receive an incentive payment, a faculty member must be employed with the College of Medicine in a faculty position through June 30<sup>th</sup> of the current year.

Base salary increases associated with faculty promotions and the UF Salary Pay Plan (SPP) will be made in accordance with University of Florida and COM guidelines.

## **FACULTY ASSIGNMENTS AND PERFORMANCE SCORES**

All faculty are assigned an academic home department responsible for their annual evaluation. If faculty have major responsibility in another area, a Center for example, the home department chair should communicate with the appropriate supervisor from that area regarding the faculty assignment and evaluation.

The department chair, or appropriate designee, must define faculty job expectations and establish full time equivalent (FTE) assignments for each faculty member, as well as performance measures for each assignment. A faculty member's FTE assignments should accurately reflect the work effort of the faculty member. Performance measures appropriate for faculty rank and opportunity are determined with input from the faculty member.

When residents or medical students are present during clinical work, clinical FTE's may be reallocated 80% patient care and 20% teaching to provide credit for instructional activity. For teaching FTE's, instructional hours and number of students taught are used to align FTE with responsibilities. The FTE assigned to research cannot be less than the ratio of all salary paid by research grants and research contracts divided by base salary.

Faculty members with assignment to the Veterans Health Administration (VHA) will be assigned an FTE value that reflects net time commitment to the VHA. VHA appointments are based on 40 hours of work per week, which represents an 8/8ths appointment to the VHA. During scheduled VHA hours, a faculty member cannot participate in COM activities.

At the time of their annual evaluation, faculty members must demonstrate that they met their assigned performance measures for the year. A rating system will be used for performance, assigning a grade for each activity (1 to 5, 5 = best score) and adjusting the score for assigned FTE. The weighted scores for all activities will determine the final performance score as shown in the table below. Grades will be rounded to the nearest tenth decimal place.

Chairs may increase or decrease the grade in any one mission by up to 1.0 point to reflect professionalism, attitude, enthusiasm, willingness to volunteer, attendance at meetings, participation as a team player, and similar characteristics and contributions.

Mission	FTE Percent	Grade	Score
Teaching			
Research			
Service			
Patient Care			
Veterans Health Administration			
Total	100 %		

Faculty are eligible for annual base salary and merit increases, incentives, and year-end departmental incentives based upon the faculty member's total performance score as referenced in the table below. Such increases must be in accordance with UF and COM guidelines.

Faculty who receive an annual evaluation rated at the below performance standard level or at the unsatisfactory performance level are subject to annual reductions in base salary. In such situations, the effective date of base salary reductions will be determined by the Dean.

Overall Performance Score	Outcome
4.5 to 5.0	<b>Outstanding performance.</b> Eligible for base salary and merit increase, incentive, and year-end departmental incentive.*
4.0 to 4.4	<b>Exceeds performance standard.</b> Eligible for base salary and merit increase, incentive, and year-end departmental incentive.*
3.0 to 3.9	<b>Achieves performance standard.</b> Eligible for base salary and merit increase, and incentive.
2.0 to 2.9	<b>Below performance standard.</b> Up to 5 percent base salary reduction. Not eligible for incentive or year-end departmental incentive.
0.0 to 1.9	<b>Unsatisfactory performance.</b> Up to 10 percent base salary reduction. Not eligible for incentive or year-end departmental incentive.

\*Higher performance scores may result in higher merit increases and year-end departmental incentives.

## PERFORMANCE STANDARDS AND EVALUATION

Performance will be tied to academic benchmarks and evaluated by objective data whenever feasible. Departments will develop performance measures for each mission that can be used to benchmark and establish a base score. If a faculty member's assignment changes during the year because of new or altered assignments, such changes must be approved by the Dean and documented in writing to the faculty member.

## TEACHING EVALUATION

Measures of teaching performance are based on data that will be provided by the COM, course, clerkship and residency program directors, and individual faculty members. Productivity is measured in teaching hours, numbers of students taught, service on teaching committees, and development of teaching aids. Teaching productivity should correspond to the FTE assigned to teaching.

Quality is to be measured by student, resident and peer evaluations and by teaching awards. The following table provides a guideline for grading teaching performance.

Grade	Quality
4.5 to 5.0	Recognized for teaching excellence by students, residents, or peers. Demonstrates teaching leadership by distinguished service on UFCOM education committees or as a course, IDP director, clerkship, or residency program director. Responsible for and achieves continuing residency accreditation. Promotes education programs at regional or national meetings. Receives outstanding teaching awards.
4.0 to 4.4	Readily accepts teaching responsibilities, produces materials, and works with others to improve educational programs. Achieves above average performance ratings from students, residents or peers.
3.0 to 3.9	Participates in assigned teaching responsibilities with average performance ratings as identified by students, residents, course or residency program director, IDP director, chair, or Associate Dean for Education.
2.0 to 2.9	Performs below expectation for assigned teaching responsibilities as indicated by poor evaluations from student, resident, or peers, or by failure to perform assignments on time.
0.0 to 1.9	Does not accept teaching responsibilities when asked or accepts with reluctance and/or fails to follow through on assignments.

## INDIVIDUAL TEACHING INCENTIVE

To recognize outstanding performance in teaching, an incentive may be available from the COM Office of the Dean for a select number of educators. Eligible faculty will be nominated from each department and participate in a college-wide competition to receive an incentive. Faculty are selected based on the excellence of their teaching of medical students, residents and fellows, graduate students, post-docs, and mentorship of other faculty.

To qualify for an award of excellence in teaching, candidates must have an teaching grade of 4.5 or better, no grade less than 3.0, and a teaching assignment of at least 15%. If extenuating circumstances exist such that a department chair believes a particular faculty member deserves consideration for the award with less than 15% time assigned to teaching, the nomination can proceed with a request to the selection committee to excuse the 15% teaching assignment requirement. Department chairs and members of the selection committee are not eligible for the teaching incentive.

Each department may nominate one or more faculty meeting the criteria referenced above. The maximum number of nominations by a department will be based on the department's assigned teaching FTE. This number is determined by calculating the sum of the teaching FTE assignment of faculty in each department for the academic year. This total by department is rounded up to the next whole number.

The department chair must approve all nominees and either rank order or categorize those submitted for the incentive awards as outstanding, excellent, or very good. The teaching portion of the department chair's annual evaluation letter will be used to support nominated individuals, or a separate letter from the chair may be issued. As the primary support document, the evaluation letter must include a summary of the candidate's teaching activities, emphasizing teaching accomplishments, and evaluations of medical students, residents and fellows, graduate students, post-docs, and mentored junior faculty. The evaluation letter must also include the candidate's performance grades for all assigned missions. Nominated applicants should review their evaluation letter for completeness prior to submission.

The selection committee will judge teaching excellence based on the quality of teaching, as assessed by teaching and peer evaluations, teaching effort, and a candidate's teaching accomplishments. The committee will determine which of the nominated faculty receive awards, with the goal to select the top 10% of COM educators.

The selection committee shall be comprised of the following individuals:

1. Senior Associate Dean for Education or designee, serves as chair of the selection committee.
2. Associate Dean for Graduate Education.
3. Associate Dean for Medical Education.
4. Associate Dean for Graduate Medical Education.
5. Chair of the College of Medicine Curriculum Committee.
6. Faculty member appointed by Society of Teaching Scholars.
7. Basic Science Department Chair appointed by the Dean.
8. Clinical Department Chair appointed by the Dean.
9. President of the Faculty Council or his/her designee.

**Incentive awards.** The minimum and maximum awards will be determined by funds available. The selection committee may recommend to the Dean the monetary value of the awards.

**Exemplary Teacher Awards.** Faculty receiving incentive awards will be recognized as Exemplary Teachers at the Educational Week Banquet held during the spring semester.



## RESEARCH EVALUATION

Measures of research performance are based on objective data that will be collected by the COM or provided by the individual faculty member. Faculty members with 0.20 FTE or greater assigned to research, or assistant professors during their initial employment for up to five years with 0.30 FTE or greater assigned to research, are expected to have the research portion of their base salary derived from research grants. For these faculty members, grant awards and salary offsets from grants will be used to calculate incentives (as described below) and will determine the research funding component score which will be 60% of the research grade.

The second component (40%) of the grade is research outcomes. Outcome measures are based on conduct and progress of research, publications, presentations, recognized achievements in research, and meeting or exceeding individual annual research goals.

The grade for faculty members with < 0.20 FTE and for assistant professors (in their first five years) with < 0.30 assigned to research will be based solely on research outcomes, including progress toward meeting/exceeding expectations for publications, presentations, and participation in research activities locally or nationally.

The following table provides guidelines for assessing research accomplishments. The department chair or designee will establish specific performance measures for an individual faculty's research FTE, according to rank and opportunity, with faculty input. Research scores will be determined for each of the two components and the final grade will be a weighted average of the research funding (60%) and the research outcomes (40%) category scores.

Grade	Research Funding (60%)	Research Outcomes (40%)
4.5 to 5.0	Supports research FTE* salary on research grants or contracts.	Far exceeds expectations/yearly goals for presentations, publications, patents, and conduct of research. Achieved or building national reputation, e.g., service on study section/research advisory group, visiting professor/invited speaker, or similar peer recognition. Receives research achievement awards.
4.0 to 4.4	Serves as PI or Co-I on research grants with some salary support. Alternatively, has secured 75% or more of research FTE* from grants/contracts or start-up funds.	Exceeds expectations/yearly goals for presentation, publications, patents, and conduct of research. Solid and promising research progress with appropriate handling of problems.

3.0 to 3.9	Meets expectations for grant applications with at least one grant with priority score near funding range or with an improved score on resubmission. Alternatively, has secured 50% or more of research salary from grants/contracts or start up funds.	Submits abstracts, papers and patents as appropriate. Conduct and progress of research is satisfactory and meets expectations.
2.0 to 2.9	Submits/participates in grant applications but with scientific priority scores substantially out of funding range. Has made good effort to secure funding but without success.	Makes no sustained effort to present or submit available work for publication. Conduct and progress of research is slow and does not meet expectations/yearly goals.
0.0 to 1.9	Fails to submit or participate in grant applications with salary support. Fails to obtain funding in a timely manner.	Makes no effort to present or submit available work for publication. Conduct and progress of research is minimal.

\* An individual's support of their research FTE may be less than support of their full salary for those faculty whose salary is above federal grant salary caps (e.g., NIH).

## INDIVIDUAL RESEARCH INCENTIVE

To participate in the individual research incentive, a faculty member must have  $\geq 0.20$  FTE time assigned to research and an assistant professor (for up to five years or until promotion to associate professor, whichever occurs first) must have  $\geq 0.30$  FTE assigned to research. However, department chairs can request approval of the Dean for participation in the individual research incentive by faculty with  $FTE < 0.20$  or by assistant professors with  $FTE < 0.30$  who, in spite of their small amount of time dedicated to research, have obtained grant support for their research salary.

To provide an incentive for faculty to seek salary support from research grants, the percentage of research FTE salary covered by grants will be used to calculate a research incentive according to the table below. For the purpose of the incentive, research salary support will be provided primarily by extramural, peer-reviewed grants. Research grants and research contracts, including industry sponsored research, count towards the research incentive if they specify salary support and are awarded with indirect costs. Salary paid by a research career development award, including VA mentor research training programs, is included in the incentive. For salary offsets to count towards the research incentive, the faculty member must be the principal investigator, co-principal investigator or a co-investigator who has made a significant intellectual contribution to the grant application as determined by the chair after consultation with the principal investigator.

Incentives for grant supported salaries are calculated as a percent of base salary allocated to research per the table below. For faculty whose salary rate exceeds a cap determined by a funding agency (e.g., NIH cap on salary), determination of the research grade and the incentive will be based upon the FTE assigned to the grant (relative to the faculty member's total FTE assigned to research), not the actual amount of funding awarded by the granting agency for that FTE.

Base Salary Covered by Grants Adjusted for Research FTE	Incentive as a Percent of Base Salary Allocated to Research
50% or more	2.0
60% or more	3.0
75% or more	4.5
90% or more	6.0

If a faculty member qualifies for an incentive and the calculated award is less than \$ 250, the actual award he/she would receive is \$ 250.

To provide incentives for newly appointed assistant professors who are developing a research program, recognizing that it is often difficult for these individuals to secure the level of funding indicated above, the following will apply. For up to five years as an assistant professor or until promotion to associate professor, the table below will be used to calculate the faculty member's incentive. To participate in this program, an assistant professor must have  $\geq 30\%$  time assigned to research. (Department chairs can request approval of the Dean for participation in the individual research incentive by assistant professors with FTE < 0.30 who have 20% or more of their research salary supported by grants.)

Base Salary Covered by Grants for qualified Assistant Professors Adjusted for Research FTE	Incentive as a Percent of Salary Allocated to Research
> 20%	2.0
30% or more	3.0
45% of more	4.5
60% or more	6.0

Additional incentives will be given to promote and reward investigator-initiated, peer reviewed, competitive, large-scale research grant/contract awards. To encourage large grants that involve multiple investigators such as Program Projects and Center grants, in which each investigator contributes a separately funded project or a separate project with a dedicated budget, additional research incentives are also provided. Incentives are given for each year of the research

award, for grant/contract expenditures to UF that specify salary support for the principal (PI) or lead investigator and pay indirect costs, in accordance with the table below:

<b>Research Activity</b>	<b>Incentive as Percent of Salary Charged to Research Grant</b>
PI or lead investigator on a competitive, peer-reviewed Program Project, center or comparable multiple grant award, with direct costs greater than \$750,000 per year.	6
PI or lead investigator on a competitive, peer-reviewed training grant, with direct expenditures greater than \$ 100,000 per year.	3
PI or lead investigator on investigator-initiated, competitive, peer-reviewed grant(s), including subproject(s) of a competitive, peer reviewed Program Project, center or other multiple grant award(s) with total direct expenditures: <ul style="list-style-type: none"> <li>&gt; \$100,000 per year</li> <li>&gt; \$500,000 per year</li> <li>&gt; \$1,000,000 per year</li> <li>&gt; \$2,000,000 per year</li> </ul>	4 5 6 7
PI on VA Merit Review Award with direct expenditures of \$ 150,000 and at least a 5/8 appointment to the VHA.  Incentive payments will be pro-rated for grants less than \$ 150,000.	\$1,500

The incentive that accrues to the investigator will be calculated and paid semi-annually based on the actual amount of salary charged against the grants (i.e., if a grant was open for nine months, but salary was charged to the grant for only two months, then only two months of salary offset would be used to calculate the incentive amount). Fringe benefits will not be paid on incentives.

To ensure that balance between assigned departmental missions is maintained, eligibility for the research incentive requires a performance rank of 3.0 or better in all mission categories.

## SERVICE EVALUATION

Service activities in teaching, research, or patient care should be assigned to that mission. Other service activities include such duties as senior/associate/assistant deanships, department chairs, associate/assistant chairs, division chiefs, medical directors, service or educational contract administrators/directors, UF, COM and department committee membership / leadership. Performance measures will be developed by the appropriate supervisor and faculty.

The following table provides a guideline for assessment of service performance.

<b>Service Evaluation</b>	
<b>Grade</b>	
4.5 to 5.0	Serves in key administrative positions with demonstrated leadership as judged from unit operation consistent with budget and respectful of personnel. Demonstrates organizational skills. Serves in elected or appointed administrative position outside UFCOM consistent with its mission.
4.0 to 4.4	Exceeds expectations in most but not all areas. Promotes cooperation with colleagues and clearly supports department and college objectives.
3.0 to 3.9	Meets administrative expectation. Attends meetings and contributes to objectives.
2.0 to 2.9	Accepts responsibilities but performance is lacking. Does not follow through on assignments and demonstrates minimal progress on goals. Often absent from committee meetings.
0.0 to 1.9	Does not accept administrative responsibilities when asked.

## ADMINISTRATIVE SUPPLEMENT

An administrative supplement may be provided for significant administrative responsibilities. Administrative supplements are considered part of a faculty member's base salary. When a faculty member's administrative assignment ends, any administrative supplement associated with that assignment is removed from the faculty member's base salary. One-time payments paid to faculty members for activities such as additional duty or responsibilities are temporary and are not included in base salary.

## PATIENT CARE EVALUATION

Patient care is evaluated on measures of productivity and quality of care. Work relative value units (wRVUs), compared to target, define one performance measure for clinical productivity. For those faculty whose clinical FTE is 0.20 or greater, 75% of the base grade for clinical performance will be assigned by the COM, based on how actual productivity compares to the assigned wRVU target as indicated in the table below.

<b>Clinical Productivity and Quality</b>		
Grade	Productivity (75%)	Quality and Safety (25%)
4.5 to 5.0	Exceeds wRVU target by 25 percent or more	Greatly exceeds performance standards determined at annual evaluation
4.0 to 4.4	Exceeds wRVU target by at least 10 percent	Exceeds performance standards determined at annual evaluation
3.0 to 3.9	Meets expectation	Meets performance standards determined at annual evaluation
2.0 to 2.9	Falls below wRVU target by at least 15 percent	Performs slightly below performance standards determined at annual evaluation
0.0 to 1.9	Falls below wRVU target by 30 percent or more	Fails to meet performance standards determined at annual evaluation

Base grades will be calculated using a sliding scale between 1 and 5 as shown above.

The chair may request an adjustment in the base grade for approved medical leaves of absence or other circumstances beyond the control of an individual faculty member.

The chair assigns 25% of the grade based on quality of care, using measures previously agreed to during the faculty member's annual evaluation meeting. These may include measurable quality markers, a 360 evaluation, collegiality, physician and patient satisfaction surveys, medical record completion, and ongoing professional practice evaluations. Input from the departmental quality officer is anticipated. The timeliness, adequacy, and accuracy of information provided for patient billing may also be considered.

For faculty whose clinical service is supported by salary cost reimbursement from a contract, the grade for this service will be determined based on how well the individual fulfills the terms of the contract, as determined by the chair using assigned performance measures. If such

individuals also have an additional clinical assignment, the overall clinical grade will be proportioned based on FTE assigned to contract versus total clinical FTE.

For faculty with less than 0.20 FTE assigned to patient care activities, the chair will determine a faculty member's grade based on the faculty member achieving his/her assigned performance measures.

## **INDIVIDUAL CLINICAL INCENTIVE**

The chair will define, with input from the faculty member, annual work RVU targets. (In the unusual situation where wRVUs targets are inappropriate, a chair may request the Dean to approve an alternative method of assigning or calculating clinical productivity targets.) In determining the targets, chairs will take into consideration base salary allocated to clinical activities, clinical hours or sessions, historical performance, and opportunity. Assigned wRVUs are expected to be between the 50<sup>th</sup> and 90<sup>th</sup> percentile (adjusted for clinical FTE) for the individual's specialty as defined in the most recent Medical Group Management Association (MGMA) Academic Practice Compensation and Productivity Survey (EXHIBIT IV). MGMA data exclude residents, physician assistants and other secondary providers. When such providers are used or in the discretion of the chair, the assigned wRVU targets may exceed the MGMA limits.

Work RVUs standardize physician services across all types of activities. Work RVUs are converted into net collections using the average ratio of wRVUs to net collections for the appropriate operational unit (department/division/specialty), updated semi-annually. The translation of wRVUs into net revenues is calculated using values appropriate for the type of work performed. Payor mix will influence this conversion factor. Net revenues for this purpose are defined as equal to gross collections less payment of billing refunds, the Dean's tax and Faculty Group Practice costs. The chair must set individual wRVU targets for the faculty as a whole at a level that produces net collections sufficient to cover the cost of the clinical mission of the department and any activities intended to be supported by clinical revenue, as negotiated during the budget process. Specifically, the assigned departmental wRVUs as a whole must cover the approved clinical budget. Any changes in wRVU targets during the year must be approved by the Dean and documented in writing to the faculty member.

To participate in the clinical incentive plan, a faculty member must have at least 20% time assigned to clinical service. (Exception: Faculty supported by career development awards requiring at least 60% time commitment to research may qualify for the clinical incentive with a 0.15 FTE

assigned to clinical service.) Faculty who exceed their assigned wRVU targets are eligible to receive an incentive payment.

The incentive payment is 20% of the product of the number of wRVUs above target multiplied by the departmental/division/specialty average net revenue per wRVU. The 20% may be increased by the Dean contingent on sufficient COM financial resources. The department is allocated 70% (less if the individual incentive increases) and the COM 10%. Payment may be made quarterly or semiannually, and the incentive is based on annual projections. Mid-year incentives will include a holdback of 25%, to be paid at year-end, to spread the incentive over the academic year and to guard against unforeseen adverse financial events in the remainder of the year. Fringe benefits are not paid on clinical incentive awards.

To ensure that balance between assigned departmental missions is maintained, eligibility for clinical incentives requires a performance rank of 3.0 or better in all mission categories.

In circumstances where a group target seems more appropriate than an individual target departments may request approval from the Dean to use a clinical group target.

For faculty with an FTE assignment on clinical contracts based upon a fee for service or fee per encounter, work RVU equivalents will be calculated and credited to faculty. The departmental or divisional average net collections per RVU will be used to determine the work RVU equivalents associated with the clinical contract with fee for services provisions.

Contracts that are based on salary cost reimbursement are excluded from the clinical incentive calculation along with that proportion of the FTE attributed to the contract. Faculty performing at a grade higher than 3.0 for clinical work who do not generate wRVUs (e.g., contracts) may be eligible for year-end departmental incentive based on their overall clinical grade provided they have no grade below a 3.0 on any other mission.



## VETERANS HEALTH ADMINISTRATION

The chair, or appropriate designee (i.e., Chief of Service at the VHA) will evaluate the faculty member with respect to his/her VHA assignments. UF faculty are not compensated by the COM for their VHA work; however, because the close relationship with the VHA is critical to the COM's missions, the College does consider a faculty member's performance of VHA responsibilities in its evaluation of the faculty member and in its compensation plan.

<b>Grade</b>	<b>VHA evaluation</b>
4.5 to 5.0	Outstanding performance in nearly all areas.
4.0 to 4.4	Exceeds expectations in most but not all areas.
3.0 to 3.9	Meets expectation for clinical and/or research service.
2.0 to 2.9	Marginal to inadequate performance.
0.0 to 1.9	Fails to meet responsibilities as presented in job description.

## YEAR-END DEPARTMENT INCENTIVE

At the end of the fiscal year and with the approval of the Dean, a department with an excess of revenues over expenses may allocate funds to pay year-end departmental incentives to faculty members. Faculty eligibility for a year-end departmental incentive requires an overall performance score of 4.0 or higher and no performance grade less than 3.0 in any mission category.

In special situations, a chair can appeal to the Dean to grant a year-end departmental incentive to a faculty member who has made significant contributions to the betterment of the department, even if that faculty member does not have the performance scores that would otherwise qualify him/her for a year-end departmental incentive.

## **ENDOWMENTS**

COM policy permits base salary to be funded with spendable income from appropriate endowments to the extent that it is not covered by other funds (i.e., clinical income, research grants, contracts, etc.). Payments must be consistent with the legal requirements of the endowment.

Deviations from this policy must be approved by the Dean.

## **COMPENSATION PLAN DATABASE**

The COM's Fiscal Services Division is responsible for maintaining the compensation plan database upon which incentives will be calculated and for aligning departmental budgets and FTE assignments with the compensation plan. Clinical and research performance data will be updated on a monthly basis while educational performance will be updated on a semester basis. Faculty may access their individual accounts and monitor their performance toward assigned targets at the following address:

<http://apps.comfs.ufl.edu/compplan>

A Gatorlink identification and password are required to access the compensation plan database.

## **TIMELINE**

The annual evaluation period for faculty members coincides with the fiscal year beginning July 1<sup>st</sup> and ending June 30<sup>th</sup>. The review of clinical productivity data for incentive pay purposes also is based on the fiscal year time frame. The conversion factor for wRVUs to net revenue will be determined quarterly beginning with the start of the fiscal year.

Faculty evaluations are expected to be conducted between July 1<sup>st</sup> and August 15<sup>th</sup>. A faculty letter of evaluation must be issued to each faculty member by August 15<sup>th</sup>. The letter of evaluation must include the faculty member's assignment and performance expectations for the next fiscal year, must be signed by the faculty member, and returned to the COM's Office of the Dean by August 15<sup>th</sup>. The complete timeline for the Compensation Plan is outlined in EXHIBIT VI.

## **RESOLUTION OF CONFLICT AND GRIEVANCES**

Implementation of the compensation plan requires negotiation between a faculty member and his/her chair or designee. In the rare circumstance when a faculty member cannot reach agreement with his/her chair, the faculty member may appeal to the Dean. In addition, faculty members may pursue their concerns/disputes regarding compensation plan issues through the University of Florida's faculty grievance process.

University of Florida College of Medicine  
Faculty Compensation Plan

**PERFORMANCE STANDARDS**

<b>Mission</b>	<b>Measures</b>	<b>Examples</b>
Teaching	<p>Number of instructional hours</p> <p>Teaching productivity</p> <p>Service on college or department education committees</p> <p>Development of teaching aids</p> <p>Serve on national education committees or functions</p> <p>Student/peer evaluations</p> <p>Teaching awards</p> <p>Publication in relevant journals devoted to medical education (such as Academic Medicine)</p> <p>Service on PhD Committees</p> <p>Graduate student mentoring</p> <p>Student exam pass rate</p> <p>Peer mentoring</p>	<p>200 hours teaching students</p> <p>Appropriate for assigned eFTE</p> <p>Member Curriculum Committee “ Medical Selection Committee</p> <p>Develop computer instructional program</p> <p>Chair AAMC section on accreditation</p> <p>Exceed dept average student or resident evaluation scores Achieve satisfactory peer-evaluation</p> <p>Teacher of the Year</p> <p>Achieves X number of publications</p> <p>Chair X number of PhD committees Number of graduate students mentored</p> <p>Pass rate on trainee exams/boards in faculty members specialty area</p> <p>Score on peer (faculty) mentoring evaluation</p>
Research	<p>Research applications submitted</p> <p>Research applications funded</p> <p>Program project or training grant</p> <p>Sponsored clinical trials</p> <p>Study section, research advisory group, local research committee</p> <p>Publications/Presentations</p> <p>Significance of Research</p> <p>Patent applications / awards</p> <p>Licenses/Royalties Awarded</p>	<p>Submit 2 grant proposals</p> <p>Applications funded</p> <p>Submitted or funded</p> <p>Clinical trials funded</p> <p>Member of study section</p> <p>List per university format</p> <p>Number of times work is cited in peer reviewed literature</p> <p>List per university format</p> <p>Number/dollar amount of award</p>

Research	<p>Percentage of salary covered by grants</p> <p>Progress toward meeting research goals (as stated in formalized plan)</p> <p>Research recognition awards and general assessment of research quality</p>	<p>Should have 50% of FTE devoted to research covered by third year</p> <p>List goals achieved</p> <p>Awards received</p>
Service	<p>Department assigned responsibilities</p> <p>Effectiveness in achieving stated goals</p> <p>Compliance</p> <p>UF, COM, and Department committee leadership/service</p> <p>Community service</p> <p>Evidence of leadership</p>	<p>Associate/Assistant chair / Division chief / Medical directors /</p> <p>X% reduction in compliance citations; ACGME milestones achieved; Divisional quality standards achieved</p> <p>Dean's office assignments Institutional Review Board UF Faculty Senate and Committees COM Faculty Council</p> <p>President, Alachua County Medical Society</p> <p>Accomplishment of goals and responsibilities within expected timeframe and fiscal constraints</p>
Clinical	<p>Exceeds target wRVUs</p> <p>Billing</p> <p>Charge Lag Reduction</p> <p>Net collections (including contracts) per c FTE</p> <p>Performance ratings in 360 evaluations</p> <p>Participation in PQRI</p> <p>Referring physician survey</p> <p>Patient satisfaction survey</p> <p>Clinic access: 3rd available appt</p> <p>Scheduled clinic time</p> <p>Clinic cancellations</p> <p>Clinical volume</p> <p>OR/Clinic utilization</p> <p>Length of Stay</p> <p>Readmission reduction</p> <p>PQRI survey</p>	<p>Generate &gt;4,500 wRVUs</p> <p>Provides appropriate billing information on a timely basis</p> <p>Charge lag days &lt; X</p> <p>Generate &gt;\$200,000 net collections</p> <p>360 evaluation score</p> <p>PQRI participation and score</p> <p>Achieve high satisfaction score</p> <p>Patient satisfaction survey score</p> <p>3rd available appt &lt; X days</p> <p>Arrive on time for clinic &gt; 95%</p> <p>Achieve &lt; X% appointment "bump" rate Performs X number of surgical cases/office visits</p> <p>Utilizes X% of assigned OR block time/clinic rooms</p> <p>Achieves target LOS goal</p> <p>Readmission rate &lt; X%</p> <p>Top 1/3 of physicians surveyed</p>

## Examples:

*Example of clinical scoring:*

Dr. Smith (see below) achieved a productivity score of 10% above target, resulting in a clinical productivity grade of 4.0, which is 75% of his clinical score. For quality he achieved average patient satisfaction scores, participated in a PQRI initiative with average scores, and met expectations for clinic attendance resulting in a grade of 3.0, which is 25% of his clinical score. His overall clinical grade is 3.75.  
 $(4.0 \times .75 = 3.0 \text{ plus } 3.0 \times .25 = .75)$

*Example of clinical incentive:*

Dr. Smith has a clinical FTE assignment of 0.60, an average performance rank of 4.0, and a wRVU target of 4,500. The departmental conversion factor of net collections per wRVU is \$72. If Dr. Smith produces 4,950 wRVUs, ten percent above his target, then Dr. Smith would be eligible for an incentive equal to \$6480 (450 wRVUs above target multiplied by \$72/wRVU multiplied by 20%).

*Example of how FTEs are calculated with a VHA appointment:*

A faculty member has an 8/8 appointment to the VHA and works 10 additional hours at a College of Medicine clinic. The FTE appointment at the VHA would be calculated as 40 hours VHA time divided by 50 total hours worked per week or 0.80 FTE for the VHA appointment and 0.20 FTE for the College of Medicine (10 hours College of Medicine/50 total work hours per week).

*Example of research incentive:*

Dr. Avery is an associate professor, who earns a base salary of \$120,000 and has 40% of his time assigned to research. Based on FTE assignment, the portion of his base salary allocated to research is \$48,000. As PI of a peer reviewed, competitive grant with direct costs of \$250,000 per year and indirect costs paid to the University, Dr. Avery has \$ 24,000, 50% of his research salary covered. He earns an incentive for salary offset calculated as 2% of \$48,000, for a total incentive for research of \$960.

*Example of research incentive:*

Dr. Jones is a full professor who earns a base salary of \$200,000 and has 75% of her time assigned to research. Based on FTE assignment, the portion of her base salary allocated to research is \$150,000. Dr. Jones is a Co-PI on an NIH grant that pays \$40,000 of her base salary.

Dr. Jones is also PI of a Program Project grant of \$800,000 a year, with indirect costs, which covers an additional \$50,000 of her base salary. Thus she has \$90,000 of her salary covered by grants, which is 60% of her salary assigned to research. For research salary offset by grants, she will receive an incentive of \$4,500, 3% of her \$150,000 research salary. Plus, for being a PI on the program project grant, she will receive 6% of \$150,000 or \$9000. Her total research incentive is \$13,500.

**COMPENSATION BENCHMARKS**

Clinical Faculty (MD degree)	2008 Benchmark	
	AAMC 20 <sup>th</sup> Percentile	AAMC – 75 <sup>th</sup> Percentile
<b>Anesthesiology</b>		
Assistant professor	208,000	300,000
Associate professor	227,000	330,000
Professor	243,000	349,000
<b>Emergency Medicine</b>		
Assistant professor	173,000	220,000
Associate professor	184,000	245,000
Professor	196,000	264,000
<b>Community Health &amp; Family Medicine</b>		
Assistant professor	125,000	162,000
Associate professor	144,000	179,000
Professor	155,000	208,000
<b>Medicine – Allergy/Immunology</b>		
Assistant professor	89,000	171,000
Associate professor	105,000	194,000
Professor	150,000	229,000
<b>Medicine - Cardiology</b>		
Assistant professor	161,000	292,000
Associate professor	196,000	340,000
Professor	208,000	358,000
<b>Medicine – Dermatology (excluding Mohs Surgery)</b>		
Assistant professor	142,000	266,000
Associate professor	166,000	287,000
Professor	170,000	301,000
<b>Medicine – Dermatology (including Mohs Surgery)</b>		
Assistant professor	177,000	573,000
Associate professor	238,000	524,000
Professor	237,000	418,000

**COMPENSATION BENCHMARKS**

Clinical Faculty (MD degree)	2008 Benchmark	
	AAMC 20 <sup>th</sup> Percentile	AAMC – 75 <sup>th</sup> Percentile
Medicine - Endocrinology		
Assistant professor	108,000	150,000
Associate professor	138,000	183,000
Professor	168,000	240,000
Medicine - Gastroenterology		
Assistant professor	152,000	257,000
Associate professor	184,000	302,000
Professor	201,000	314,000
Medicine - General Internal		
Assistant professor	124,000	166,000
Associate professor	138,000	193,000
Professor	165,000	240,000
Medicine - Geriatrics		
Assistant Professor	122,000	148,000
Associate professor	153,000	181,000
Professor	182,000	235,000
Medicine – Hematology/Oncology		
Assistant professor	138,000	200,000
Associate professor	160,000	250,000
Professor	194,000	301,000
Medicine – Infectious Diseases		
Assistant professor	109,000	144,000
Associate professor	136,000	175,000
Professor	168,000	228,000
Medicine - Nephrology		
Assistant professor	121,000	169,000
Associate professor	154,000	202,000
Professor	185,000	255,000

**COMPENSATION BENCHMARKS**

<b>Clinical Faculty (MD degree)</b>	2008 Benchmark	
	AAMC 20 <sup>th</sup> Percentile	AAMC – 75 <sup>th</sup> Percentile
<b>Medicine – Pulmonary</b>		
Assistant professor	126,000	177,000
Associate professor	157,000	208,000
Professor	182,000	249,000
<b>Medicine - Rheumatology</b>		
Assistant professor	113,000	150,000
Associate professor	132,000	191,000
Professor	165,000	233,000
<b>Neurological Surgery</b>		
Assistant professor	240,000	400,000
Associate professor	259,000	500,000
Professor	257,000	529,000
<b>Neurology</b>		
Assistant professor	116,000	159,000
Associate professor	140,000	194,000
Professor	170,000	238,000
<b>Obstetrics &amp; Gynecology - General</b>		
Assistant professor	150,000	230,000
Associate professor	180,000	269,000
Professor	171,000	333,000
<b>Obstetrics &amp; Gynecology – Gynecologic Oncology</b>		
Assistant professor	200,000	286,000
Associate professor	229,000	353,000
Professor	245,000	413,000
<b>Obstetrics &amp; Gynecology – Maternal and Fetal</b>		
Assistant professor	182,000	275,000
Associate professor	203,000	286,000
Professor	243,000	350,000



**COMPENSATION BENCHMARKS**

Clinical Faculty (MD degree)	2008 Benchmark	
	AAMC 20 <sup>th</sup> Percentile	AAMC – 75 <sup>th</sup> Percentile
<b>Obstetrics &amp; Gynecology – Reproductive Endocrinology</b>		
Assistant professor	157,000	224,000
Associate professor	185,000	280,000
Professor	223,000	314,000
<b>Ophthalmology</b>		
Assistant professor	134,000	224,000
Associate professor	163,000	290,000
Professor	185,000	322,000
<b>Orthopedic Surgery</b>		
Assistant professor	209,000	375,000
Associate professor	252,000	490,000
Professor	260,000	468,000
<b>Otolaryngology</b>		
Assistant professor	175,000	255,000
Associate professor	210,000	326,000
Professor	214,000	369,000
<b>Pathology - Anatomic</b>		
Assistant professor	141,000	183,000
Associate professor	166,000	224,000
Professor	196,000	270,000
<b>Pathology - Clinical</b>		
Assistant professor	132,000	177,000
Associate professor	156,000	211,000
Professor	190,000	280,000
<b>Pathology - Other</b>		
Assistant professor	102,000	162,000
Associate professor	149,000	193,000
Professor	170,000	250,000

**COMPENSATION BENCHMARKS**

Clinical Faculty (MD degree)	2008 Benchmark	
	AAMC 20 <sup>th</sup> Percentile	AAMC – 75 <sup>th</sup> Percentile
<b>Pediatrics – Allergy/Immunology</b>		
Assistant professor	111,000	138,000
Associate professor	139,000	173,000
Professor	155,000	240,000
<b>Pediatrics - Cardiology</b>		
Assistant professor	147,000	208,000
Associate professor	182,000	248,000
Professor	212,000	302,000
<b>Pediatrics – Critical/Intensive Care</b>		
Assistant professor	140,000	190,000
Associate professor	179,000	233,000
Professor	199,000	286,000
<b>Pediatrics - Endocrinology</b>		
Assistant professor	109,000	134,000
Associate professor	130,000	163,000
Professor	155,000	198,000
<b>Pediatrics - Gastroenterology</b>		
Assistant professor	130,000	168,000
Associate professor	166,000	200,000
Professor	182,000	250,000
<b>Pediatrics - General</b>		
Assistant professor	114,000	153,000
Associate professor	128,000	175,000
Professor	153,000	231,000
<b>Pediatrics - Genetics</b>		
Assistant professor	100,000	129,000
Associate professor	116,000	149,000
Professor	147,000	210,000

**COMPENSATION BENCHMARKS**

Clinical Faculty (MD degree)	2008 Benchmark	
	AAMC 20 <sup>th</sup> Percentile	AAMC – 75 <sup>th</sup> Percentile
<b>Pediatrics – Hematology/Oncology</b>		
Assistant professor	119,000	141,000
Associate professor	143,000	179,000
Professor	175,000	231,000
<b>Pediatrics – Infectious Diseases</b>		
Assistant professor	100,000	128,000
Associate professor	121,000	161,000
Professor	150,000	213,000
<b>Pediatrics – Neonatology</b>		
Assistant professor	143,000	197,000
Associate professor	182,000	239,000
Professor	200,000	288,000
<b>Pediatrics – Nephrology</b>		
Assistant professor	112,000	140,000
Associate professor	134,000	166,000
Professor	149,000	219,000
<b>Pediatrics – Neurology</b>		
Assistant professor	128,000	158,000
Associate professor	153,000	193,000
Professor	176,000	244,000
<b>Pediatrics – Pulmonary</b>		
Assistant professor	122,000	153,000
Associate professor	142,000	182,000
Professor	174,000	234,000
<b>Physical Med &amp; Rehabilitation</b>		
Assistant professor	133,000	200,000
Associate professor	152,000	205,000
Professor	167,000	251,000

**COMPENSATION BENCHMARKS**

Clinical Faculty (MD degree)	2008 Benchmark	
	AAMC 20 <sup>th</sup> Percentile	AAMC – 75 <sup>th</sup> Percentile
<b>Psychiatry</b>		
Assistant professor	122,000	167,000
Associate professor	140,000	190,000
Professor	165,000	239,000
<b>Radiation Oncology</b>		
Assistant professor	215,000	317,000
Associate professor	240,000	363,000
Professor	287,000	416,000
<b>Radiology (Interventional)</b>		
Assistant professor	239,000	478,000
Associate professor	274,000	452,000
Professor	273,000	427,000
<b>Radiology (Non-Interventional)</b>		
Assistant professor	220,000	318,000
Associate professor	230,000	337,000
Professor	256,000	363,000
<b>Surgery - General</b>		
Assistant professor	185,000	281,000
Associate professor	204,000	350,000
Professor	219,000	396,000
<b>Surgery - Pediatrics</b>		
Assistant professor	215,000	328,000
Associate professor	286,000	400,000
Professor	339,000	492,000
<b>Surgery - Plastic</b>		
Assistant professor	200,000	355,000
Associate professor	239,000	395,000
Professor	251,000	479,000

**COMPENSATION BENCHMARKS**

Clinical Faculty (MD degree)	2008 Benchmark	
	AAMC 20 <sup>th</sup> Percentile	AAMC – 75 <sup>th</sup> Percentile
<b>Surgery – Thoracic &amp; Cardiovascular Surgery</b>		
Assistant professor	220,000	359,000
Associate professor	277,000	476,000
Professor	300,000	576,000
<b>Surgery - Transplant</b>		
Assistant professor	154,000	275,000
Associate professor	250,000	388,000
Professor	273,000	451,000
<b>Surgery - Urology</b>		
Assistant professor	175,000	280,000
Associate professor	210,000	349,000
Professor	224,000	378,000
<b>Surgery - Vascular</b>		
Assistant professor	209,000	294,000
Associate professor	228,000	353,000
Professor	246,000	388,000

Source: AAMC Report on Medical Faculty Salaries 2007-2008/University of Florida College of Medicine Special Report. Fixed/Contractual Salary plus Medical Practice Supplement, M.D. or Equivalent Faculty, All Medical Schools. Compensation includes salary plus on call, additional duties, and other lump sum payments excluding scholarship, cell phone reimbursement, bonus and incentive payments.

**COMPENSATION BENCHMARKS**

<b>Ph.D. or other doctoral degree In a Clinical Department</b>	2008 Benchmark	
	AAMC 20 <sup>th</sup> Percentile	AAMC – 75 <sup>th</sup> Percentile
Lecturer/Asst in/Assoc In	50,000	75,000
Assistant professor	66,000	95,000
Associate professor	88,000	130,000
Professor	119,000	187,000

<b>Ph.D. or other doctoral degree In a Basic Science Department</b>	2008 Benchmark	
	AAMC 20 <sup>th</sup> Percentile	AAMC – 75 <sup>th</sup> Percentile
Lecturer/Asst in/Assoc In	46,000	NA
Assistant professor	64,000	NA
Associate professor	87,000	NA
Professor	117,000	NA

Source: AAMC Report on Medical Faculty Salaries 2007-2008/University of Florida College of Medicine Special Report. Fixed/Contractual Salary plus Medical Practice Supplement, Ph.D. or Other Doctoral Faculty, All Medical Schools. Compensation includes salary plus on call, additional duties, and other lump sum payments excluding scholarship, cell phone reimbursement, bonus and incentive payments.

**THIS TABLE SHOULD BE  
USED IN SETTING TARGETS  
FOR FISCAL YEAR 2009/2010.**

University of Florida College of Medicine  
Faculty Compensation Plan  
**Medical Group Management Association**  
**Academic Practice Compensation and Productivity Survey 2009 Report**  
**Table 28 Standardized Work RVUs for Academic Faculty to 100%**  
**Billable Clinical Activity**

<b>Department</b>	<b>MGMA 50<sup>th</sup> Percentile</b>	<b>MGMA 90<sup>th</sup> Percentile</b>
Anesthesiology	4,081	20,249
Emergency Medicine	8,671	14,144
Family practice (with OB)	5,670	8,100
Family practice (without OB)	4,588	6,270
Internal Medicine: General	4,249	6,251
Cardiology: Invasive	8,039	11,760
Cardiology: Inv-Intervntnl	9,883	19,774
Cardiology: Noninvasive	7,083	11,043
Dermatology	8,089	12,852
Dermatology: MOHS Surgery	17,847	30,632
Endocrinology/metabolism	4,348	5,895
Gastroenterology	7,780	12,236
Geriatrics	3,773	5,762
Hematology/oncology	4,974	7,625
Infectious Disease	4,243	7,312
Nephrology	5,500	10,011
Oncology (only)	5,239	8,375
Pulmonary medicine	5,636	8,671
Rheumatology	4,053	6,673
Neurology	4,150	8,601
Neurosurgery	11,480	21,259
Ob/Gyn: General	7,644	13,818
Ob/Gyn: Maternal & Fetal	10,142	19,060
Ophthalmology	6,744	15,679
Orthopedic surgery:	9,671	15,960
Otorhinolaryngology	9,237	17,403

University of Florida College of Medicine  
Faculty Compensation Plan  
**Medical Group Management Association**  
**Academic Practice Compensation and Productivity Survey 2009 Report**  
**Table 28 Standardized Work RVUs for Academic Faculty to 100%**  
**Billable Clinical Activity**

Department	MGMA 50 <sup>th</sup> Percentile	MGMA 90 <sup>th</sup> Percentile
Pathology: Anatomic	6,465	11,145
Pathology: Clinical	1,506	7,137
Pediatrics: General	3,865	6,867
Allergy/Immunology	3,630	5,909
Cardiology	5,032	8,342
Critical Care	7,141	13,710
Endocrinology	3,074	5,112
Gastroenterology	4,804	6,370
Genetics	1,926	3,951
Hematology/oncology	3,085	5,637
Infectious Disease	2,075	4,020
Neonatology	9,637	17,480
Neurology	4,028	7,348
Nephrology	3,443	5,500
Pulmonary	3,590	5,756
Psychiatry: General	3,079	5,774
Psychiatry: Child & Adolescent	3,161	6,419
Radiation oncology	9,190	16,101
Radiology: Diagnostic-Invasive	9,064	12,671
Radiology: Diagnostic-Noninvasive	7,134	13,217
Radiology: Nuclear Medicine	5,577	10,314



University of Florida College of Medicine  
Faculty Compensation Plan  
**Medical Group Management Association**  
**Academic Practice Compensation and Productivity Survey 2009 Report**  
**Table 28 Standardized Work RVUs for Academic Faculty to 100%**  
**Billable Clinical Activity**

Department	MGMA 50 <sup>th</sup> Percentile	MGMA 90 <sup>th</sup> Percentile
Surgery: General	7,986	16,125
Surgery: Cardiovascular	9,961	23,263
Surgery: Cardiovascular-Pediatric	12,010	21,970
Surgery: Oncology	7,305	13,346
Surgery: Pediatric	8,780	14,946
Surgery: Plastic & Reconstruction	8,375	16,270
Surgery: Thoracic (primary)	9,612	20,141
Surgery: Transplant	7,996	14,603
Surgery: Trauma	9,226	18,509
Surgery: Trauma-Burn	8,807	19,208
Surgery: Vascular (primary)	10,066	17,355
Urology	8,081	15,623

University of Florida College of Medicine Faculty Compensation Plan  
 University of Florida College of Medicine  
 Faculty Compensation Plan  
**TIMELINE**

Month	Activity
July 1, 2009	Start of fiscal year and faculty evaluation period.
Feb, 2010	Semi-annual individual clinical or research incentive payments to be awarded if approved by the Dean.
April, 2010	Budget goals established for clinical departments for next fiscal year.
May, 2010	Budget process finalized.
June 5, 2010 June 30, 2010	Departments notified of eligible candidates for teaching incentives. End of fiscal year. FY08-09 faculty evaluation period ends.
July 1, 2010 July 9, 2010	Start of fiscal year (FY09-10). Clinical evaluation base grades assigned by COM and distributed to chairs. Departmental wRVU targets distributed to clinical departments.  Annual faculty evaluations conducted for prior fiscal year and assignment of new faculty productivity targets for current fiscal year (due to summer vacation plans, some evaluations may be conducted in June).  Determine size (if any) of departmental year-end Departmental incentive pool and eligible faculty. Date of payments determined by Dean.
Aug 15, 2010	Deadline for chairs to issue annual letters of evaluation to faculty. Faculty letters of FY 09-10 assignment, signed by chair and faculty member, due to Jan Eller's office.
Aug 14, 2010 Sept 15, 2010	Deadline for submission of teaching incentive applications. Recommendation of Teaching Selection Committee due in Dean's office.
Fall semester 2010	Payment of individual clinical, research and teaching incentives as approved by the Dean.
Spring semester 2011	Recognition of Exlempary Teachers