

UNIVERSITY OF FLORIDA COLLEGE OF MEDICINE

Faculty Compensation Plan

July 1, 2012 to June 30, 2013

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INTRODUCTION

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

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 work Relative Value Unit (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 modified in specific cases where the College of Medicine fails to meet its budget targets, as determined by the Dean. To encourage flexibility and creativity in compensation arrangements, the Dean may approve departmental compensation plans which differ from the terms of this compensation plan.

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.

Base salary, also referred to as "Fixed/Contractual Salary Plus Medical Practice Supplement" in the Association of American Medical Colleges (AAMC) Faculty Salary Survey, will be subject to an

established floor and ceiling, stratified for rank and specialty (EXHIBIT A). A faculty member's base salary cannot be reduced below the AAMC 20th percentile, and cannot exceed the AAMC 75th percentile, except as noted below. 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 75th percentile may be granted a payment in lieu of a base salary adjustment. Other external benchmarks in lieu of the AAMC 75th 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 20th 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 30th of the current year.

Base salary increases will be made in accordance with UF and COM guidelines, including increases associated with faculty promotions.

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.

COMPENSATION SCORE

Based on annual evaluations and performance, department chairs will assign faculty a compensation score in each mission area of assigned time to calculate a total compensation score as indicated in the table below. Scores are assigned on a 5 point scale, where 0 to 1.9 is unsatisfactory, 2.0 to 2.9 is below performance standards, 3.0 to 3.9 is for achieving performance standards, and 4.0 to 5.0 is for exceeding performance standards. Chairs will adjust the patient care compensation score plus/minus 25 percent based on the patient safety and quality metrics referenced in that section. Compensation scores may relate to evaluation grades, but may also differ as compensation scores are primarily productivity-based.

Mission	FTE Percent	Compensation Score	FTE Adjusted Compensation Score
Teaching			
Research			
Service			
Patient Care			
Veterans Health Administration			
Total compensation score	100 %		

Faculty are eligible for annual merit increases when authorized by UF, incentives, and year-end departmental incentives based upon the faculty member’s total compensation score according to the table below. Faculty who receive a total compensation score below 3.0 will be subject to annual reductions in base salary. In such situations, the effective date of base salary reductions will be determined by the Dean.

Total Compensation Score	Outcome
4.0 to 5.0	Exceeds performance standard. Eligible for merit increase, incentives, and year-end departmental incentive.*
3.0 to 3.9	Achieves performance standard. Eligible for merit increase and incentives.*
2.0 to 2.9	Below performance standard. Base salary will be reduced up to 5 percent. Not eligible for incentives or year-end departmental incentive.
0.0 to 1.9	Unsatisfactory performance. Base salary will be reduced up to 10 percent. Not eligible for incentive or year-end departmental incentive.

*Higher performance scores may result in higher merit increases and year-end incentive.

PATIENT SAFETY AND QUALITY

To emphasize the importance of patient safety and quality as a distinct faculty responsibility, clinical compensation scores will reflect safety and quality of care delivered. The patient care compensation score will be adjusted \pm 25 percent, based on departmentally determined safety and quality metrics, to align the faculty incentives with the current strategic plan of the UF & Shands Academic Health Center, and to reward high quality and safe patient care.

Each department determines its quality metrics. These metrics are reviewed by the Patient Quality and Safety Executive Committee (comprised of all physician directors of quality (PDQ) and Shands hospital leadership), and are expected to accurately reflect individual performance in this area. Performance on these metrics will be used to determine the quality component of the faculty compensation score.

Examples of metrics that may be measured by a department include meeting Physician Quality Reporting Initiative (PQRI) metrics, patient satisfaction evaluations, core measures, and effectiveness measures such as the Surgical Care Improvement Project. In addition, effective physician leadership is a key to improving and sustaining a safe patient care environment, and evidence of effective leadership will be factored into the quality metrics for each faculty. Examples include serving as a unit based physician leader within a highly effective clinic or hospital unit, managing a quality project with measurable positive results and or effectively serving as a PDQ are all examples of physician leadership.

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 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 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 best 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. Director of the Physician Assistant Program.
6. Basic Science Department Chair appointed by the Dean.
7. Clinical Department Chair appointed by the Dean.
8. 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.

INDIVIDUAL RESEARCH INCENTIVE

To participate in the individual research incentive, a faculty member must have ≥ 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 ≥ 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 Veterans Affairs (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 for each category of the proportion of research FTE covered by grant funding, as indicated in the table below. For example, if a faculty has .6 FTE assigned to research and .3 FTE (or 50%) is covered by grants, the incentive will be calculated as 2% of the .6 salary allocated to research. For faculty whose salary rate exceeds a cap determined by a funding agency (e.g., NIH cap on salary), determination of the “salary covered” 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. Likewise, the incentive will be calculated as a percentage of the salary excluding non-research related administrative supplements allocated to the research FTE, not the actual salary covered because of the granting agency’s cap.

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 or lead investigator (PI) and pay indirect costs, in accordance with the table below:

Research Activity	Incentive as Percent of Salary Charged to Research Grant
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"> > \$100,000 per year > \$500,000 per year > \$1,000,000 per year > \$2,000,000 per year 	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 based on the amount of base salary excluding non-research related administrative supplements allocated to the research FTE, not the salary capped by a granting agency. 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 compensation score of 3.0 or better in all assigned mission categories.

INDIVIDUAL CLINICAL INCENTIVE

The chair will define, with input from the faculty member, annual wRVU targets. (If wRVU 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. 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. Assigned wRVUs targets are generally expected to be between the 50th and 90th percentile (adjusted for clinical FTE) for the individual's specialty. MGMA and UHC are both acceptable benchmark standards to be used as a guide in setting wRVU targets, but additional variables such as the overall working environment and wRVU opportunity, which may include working with residents and other healthcare providers also need to be considered when setting wRVU targets and may result in targets higher or lower than industry survey limits. MGMA benchmarks will be used by the COM's Financial Services Division to determine minimum wRVU target requirements to participate in and qualify for clinical incentives, unless a department provides advance notice to Financial Services, along with supporting documentation requesting to use an alternative benchmark.. Any benchmarks other than MGMA or UHC will require prior approval of Financial Services and the COM Compensation Committee. Unless approved in advance by Financial Services, a department must use the selected organization's benchmark data for all faculty members within the department.

Work RVUs (wRVUs) standardize physician services across all types of activities. Work RVUs (wRVUs) are converted to 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 collections is calculated using values appropriate for the type of work performed. Payor mix will influence this conversion factor. Net collections for this purpose are defined as equal to gross collections less payment of refunds.

To participate in the clinical incentive plan, a faculty member must have at least 20% FTE 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 the wRVUs above target multiplied by the departmental/division/specialty average net collections per wRVU. The 20% may be increased by the Dean contingent upon sufficient COM financial resources. The department is allocated 70% (less if the individual incentive increases) and the COM 10%. 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 compensation score of 3.0 or better in all assigned 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, wRVU equivalents will be calculated and credited to faculty. The departmental or divisional average net collections per RVU will be used to determine the wRVU 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, but may be incentivized according to section below on endowments and contracts.

ENDOWMENTS AND CONTRACTS

COM policy permits base salary to be funded with spendable income from appropriate endowments or contracts to the extent that it is not covered by other funds (i.e., clinical income, research grants, etc.). Payments must be consistent with the legal requirements of the endowment or contract. At the Chair's discretion, when department funds are available, as part of consideration in determining an appropriate departmental incentive, the chair may consider the faculty member's efforts in personally obtaining and maintaining an endowment or contract. By way of illustration, when department funds are available after paying all other calculated incentives and a chair determines consideration of faculty effort in obtaining a gift or contract that provides salary offsets, the chair may consider an incentive of 1.0 percent for 20% salary savings or more, 1.5 percent for 50% salary savings or more, 2.25 percent for 75% salary savings or more, and 3.0 percent for 90% or more salary savings to the department. Other types of gifts or contracts will be evaluated individually.

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 after paying all other calculated incentives, and dependent upon the overall excess of revenues over expenses of the College, may allocate funds to pay year-end departmental incentives to faculty members. Chairs may use this incentive to reward those faculty receiving high evaluations for quality of clinical care and patient safety, obtaining endowments or contracts, or other activities which improve a department's financial performance.

Faculty eligibility for a year-end departmental incentive requires a total compensation score of 4.0 or higher and no score less than 3.0 in any assigned 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 scores that would otherwise qualify him/her for a year-end departmental incentive.

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.

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.

TIMELINE

The annual evaluation period for faculty members coincides with the fiscal year beginning July 1st and ending June 30th. 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. The complete timeline is below.

Month	Activity
July 1	Start of fiscal year and faculty evaluation period.
Jan/Feb	Budget goals, discussion with individual faculty, specifically wRVU targets and research funding.
Feb	Semi-annual individual clinical or research incentive payments to be awarded if approved by the Dean.
Spring semester	Recognition of Exemplary Teachers
April	Budget goals established for clinical departments for next fiscal year.
May	Budget process finalized.
June	Departments notified of eligible candidates for teaching incentives.
June	End of fiscal year. FY faculty evaluation period ends.
July 1 July 15	Start of fiscal year. Clinical evaluation base compensation scores 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	Deadline for chairs to issue annual letters of evaluation to faculty. Faculty letters of next FY assignment, signed by chair and faculty member, due to Jan Eller's office.
Aug 15 Sept 15	Deadline for submission of teaching incentive applications. Recommendation of Teaching Selection Committee due in Dean's office.
Fall semester	Deadline for compensation letters to faculty as established by the Dean. Payment of individual clinical, research and teaching incentives as approved by the Dean.

University of Florida College of Medicine
Faculty Compensation Plan
Compensation Benchmarks
for
Faculty in Clinical Department with MD Degree

Department/Specialty	Percentile	Rank		
		Assistant Professor	Associate Professor	Professor
Anesthesiology: General	20th	\$220,000	\$240,000	\$245,000
	75th	\$320,000	\$344,000	\$363,000
Anesthesiology: Pain Management	20th	\$224,000	\$242,000	\$284,000
	75th	\$293,000	\$323,000	\$346,000
Anesthesiology: Pediatric	20th	\$225,000	\$255,000	\$268,000
	75th	\$322,000	\$371,000	\$390,000
Dermatology (excluding Mohs Surgery)	20th	\$160,000	\$191,000	\$213,000
	75th	\$271,000	\$310,000	\$340,000
Dermatology: Mohs Surgery	20th	\$263,000	\$243,000	\$308,000
	75th	\$388,000	\$675,000	\$601,000
Allergy/Immunology-Med.	20th	\$115,000	\$118,000	\$168,000
	75th	\$185,000	\$212,000	\$246,000
Cardiology: Invasive Interventional-Med.	20th	\$227,000	\$254,000	\$278,000
	75th	\$406,000	\$415,000	\$449,000
Cardiology: Invasive Non-interventional-Med.	20th	\$201,000	\$215,000	\$225,000
	75th	\$334,000	\$345,000	\$353,000
Cardiology: Non-invasive-Med.	20th	\$168,000	\$192,000	\$215,000
	75th	\$275,000	\$298,000	\$343,000
Critical/Intensive Care-Med.	20th	\$154,000	\$176,000	\$208,000
	75th	\$263,000	\$240,000	\$327,000
Endocrinology-Med.	20th	\$118,000	\$138,000	\$171,000
	75th	\$165,000	\$199,000	\$258,000
Gastroenterology-Med.	20th	\$173,000	\$200,000	\$219,000
	75th	\$278,000	\$347,000	\$375,000
General Internal Medicine	20th	\$134,000	\$150,000	\$178,000
	75th	\$185,000	\$216,000	\$268,000

University of Florida College of Medicine
Faculty Compensation Plan
Compensation Benchmarks

for
Faculty in Clinical Department with MD Degree

Geriatrics-Med.	20th	\$126,000	\$152,000	\$180,000
	75th	\$164,000	\$198,000	\$240,000
Hematology/Oncology-Med.	20th	\$152,000	\$180,000	\$215,000
	75th	\$225,000	\$265,000	\$329,000
Hospital Medicine	20th	\$150,000	\$163,000	\$193,000
	75th	\$188,000	\$202,000	\$277,000
Infectious Disease-Med.	20th	\$118,000	\$144,000	\$180,000
	75th	\$154,000	\$183,000	\$245,000
Nephrology-Med.	20th	\$132,000	\$159,000	\$199,000
	75th	\$182,000	\$220,000	\$272,000
Pulmonary-Med.	20th	\$142,000	\$170,000	\$191,000
	75th	\$206,000	\$235,000	\$281,000
Rheumatology-Med.	20th	\$115,000	\$141,000	\$171,000
	75th	\$160,000	\$192,000	\$252,000
Other Medicine	20th	\$109,000	\$153,000	\$179,000
	75th	\$224,000	\$261,000	\$313,000
OB/GYN: General	20th	\$172,000	\$195,000	\$185,000
	75th	\$259,000	\$275,000	\$324,000
OB/GYN: Gynecologic Oncology	20th	\$203,000	\$248,000	\$267,000
	75th	\$278,000	\$423,000	\$443,000
OB/GYN: Maternal & Fetal	20th	\$197,000	\$225,000	\$262,000
	75th	\$314,000	\$351,000	\$369,000
OB/GYN: Reproductive Endocrinology	20th	\$176,000	\$203,000	\$215,000
	75th	\$255,000	\$321,000	\$356,000
OB/GYN: Other OB/GYN	20th	\$160,000	\$178,000	\$200,000
	75th	\$249,000	\$280,000	\$320,000
Pathology: Anatomic	20th	\$155,000	\$186,000	\$221,000
	75th	\$204,000	\$243,000	\$293,000
Pathology: Clinical	20th	\$145,000	\$174,000	\$204,000
	75th	\$194,000	\$233,000	\$293,000

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for
Faculty in Clinical Department with MD Degree

Pathology: Other Pathology	20th	\$123,000	\$140,000	\$180,000
	75th	\$192,000	\$226,000	\$272,000
Adolescent Medicine	20th	\$118,000	\$143,000	\$157,000
	75th	\$134,000	\$171,000	\$235,000
Allergy/Immunology-Peds.	20th	\$125,000	\$140,000	\$162,000
	75th	\$149,000	\$193,000	\$254,000
Child & Adolescent Psychiatry	20th	\$145,000	\$148,000	\$193,000
	75th	\$183,000	\$216,000	\$246,000
Critical/Intensive Care-Peds.	20th	\$164,000	\$191,000	\$227,000
	75th	\$210,000	\$255,000	\$292,000
Emergency Medicine-Peds.	20th	\$142,000	\$180,000	\$198,000
	75th	\$200,000	\$223,000	\$247,000
Endocrinology-Peds.	20th	\$119,000	\$136,000	\$165,000
	75th	\$142,000	\$174,000	\$215,000
Gastroenterology-Peds.	20th	\$145,000	\$171,000	\$195,000
	75th	\$175,000	\$218,000	\$268,000
General Pediatrics	20th	\$121,000	\$138,000	\$163,000
	75th	\$165,000	\$184,000	\$250,000
Genetics-Peds.	20th	\$115,000	\$132,000	\$150,000
	75th	\$141,000	\$163,000	\$219,000
Hematology/Oncology-Peds.	20th	\$128,000	\$151,000	\$185,000
	75th	\$149,000	\$188,000	\$252,000
Hospital Medicine-Peds.	20th	\$128,000	\$144,000	\$164,000
	75th	\$157,000	\$184,000	\$210,000
Infectious Disease-Peds.	20th	\$111,000	\$127,000	\$160,000
	75th	\$133,000	\$163,000	\$230,000
Neonatology	20th	\$152,000	\$185,000	\$205,000
	75th	\$205,000	\$249,000	\$294,000

University of Florida College of Medicine
Faculty Compensation Plan
Compensation Benchmarks
for
Faculty in Clinical Department with MD Degree

Nephrology-Peds.	20th	\$121,000	\$144,000	\$172,000
	75th	\$145,000	\$182,000	\$239,000
Neurology-Peds.	20th	\$139,000	\$162,000	\$175,000
	75th	\$175,000	\$201,000	\$232,000
Pediatric Cardiology	20th	\$160,000	\$196,000	\$234,000
	75th	\$207,000	\$259,000	\$326,000
Pulmonary-Peds.	20th	\$129,000	\$152,000	\$176,000
	75th	\$162,000	\$195,000	\$235,000
Rheumatology-Peds.	20th	\$125,000	\$143,000	\$180,000
	75th	\$156,000	\$166,000	\$216,000
Other Pediatrics	20th	\$115,000	\$140,000	\$177,000
	75th	\$170,000	\$214,000	\$305,000
Diagnostic Radiology: Total	20th	\$243,000	\$259,000	\$280,000
	75th	\$357,000	\$370,000	\$391,000
Diagnostic Radiology: Interventional	20th	\$270,000	\$304,000	\$294,000
	75th	\$412,000	\$462,000	\$425,000
Diagnostic Radiology: Non-interventional	20th	\$238,000	\$253,000	\$279,000
	75th	\$343,000	\$347,000	\$385,000
Nuclear Medicine	20th	\$214,000	\$244,000	\$250,000
	75th	\$359,000	\$314,000	\$344,000
Radiation Oncology	20th	\$230,000	\$277,000	\$283,000
	75th	\$340,000	\$382,000	\$441,000
Other Radiology	20th	\$262,000	\$269,000	\$290,000
	75th	\$406,000	\$404,000	\$436,000
General Surgery	20th	\$192,000	\$238,000	\$238,000
	75th	\$300,000	\$363,000	\$416,000
Neurosurgery	20th	\$269,000	\$320,000	\$273,000
	75th	\$496,000	\$557,000	\$605,000
Orthopaedic Surgery	20th	\$231,000	\$275,000	\$276,000
	75th	\$430,000	\$515,000	\$514,000

University of Florida College of Medicine
Faculty Compensation Plan
Compensation Benchmarks
for
Faculty in Clinical Department with MD Degree

Pediatric Surgery	20th	\$250,000	\$304,000	\$364,000
	75th	\$385,000	\$453,000	\$574,000
Plastic Surgery	20th	\$214,000	\$225,000	\$268,000
	75th	\$376,000	\$418,000	\$475,000
Surgical Oncology	20th	\$200,000	\$201,000	\$230,000
	75th	\$255,000	\$333,000	\$337,000
Thoracic & Cardiovascular Surgery	20th	\$250,000	\$299,000	\$340,000
	75th	\$417,000	\$582,000	\$651,000
Transplant Surgery	20th	\$206,000	\$257,000	\$309,000
	75th	\$308,000	\$432,000	\$506,000
Trauma/Critical Care Surgery	20th	\$209,000	\$259,000	\$257,000
	75th	\$300,000	\$357,000	\$405,000
Urology	20th	\$213,000	\$231,000	\$259,000
	75th	\$309,000	\$382,000	\$434,000
Vascular Surgery	20th	\$230,000	\$281,000	\$289,000
	75th	\$310,000	\$420,000	\$460,000
Emergency Medicine	20th	\$189,000	\$203,000	\$217,000
	75th	\$241,000	\$264,000	\$288,000
Family Medicine	20th	\$135,000	\$150,000	\$163,000
	75th	\$173,000	\$192,000	\$210,000
Neurology	20th	\$129,000	\$155,000	\$180,000
	75th	\$180,000	\$212,000	\$253,000
Ophthalmology	20th	\$138,000	\$174,000	\$199,000
	75th	\$233,000	\$310,000	\$350,000
Otolaryngology	20th	\$190,000	\$215,000	\$241,000
	75th	\$283,000	\$337,000	\$392,000
Physical Medicine & Rehabilitation	20th	\$138,000	\$155,000	\$190,000
	75th	\$209,000	\$214,000	\$262,000

University of Florida College of Medicine
Faculty Compensation Plan
Compensation Benchmarks
for
Faculty in Clinical Department with MD Degree

Psychiatry	20th	\$136,000	\$152,000	\$174,000
	75th	\$184,000	\$206,000	\$259,000

University of Florida College of Medicine
 Faculty Compensation Plan
 Compensation Benchmarks
 for
 Faculty with PhD or Other Doctoral Degree

Rank

Ph.D. or other doctoral degree in a Clinical Department	Percentile	Rank			
		Instructor	Assistant Professor	Associate Professor	Professor
	20th	\$53,000	\$70,000	\$92,000	\$128,000
	75th	\$80,000	\$100,000	\$138,000	\$200,000

Rank

Ph.D. or other doctoral degree in a Basic Science Department	Percentile	Rank			
		Instructor	Assistant Professor	Associate Professor	Professor
	20th	\$46,000	\$67,000	\$91,000	\$124,000
	75th	\$64,000	\$97,000	\$125,000	\$190,000