



Budget Request Form FY2012

Department should complete one form for each individual request

Department: Student Health Services

Program, Service, or Operation Requested

Operating Expenses

SSFAB Use Only	
YES	NO

General Description:

Medical supplies, pharmaceuticals, and other operating expenses

Request Type: ☐ Full ☒ Increase ☐ One-Time ☐ Partial/Matching

General Questions:

How does this increase impact students, and what motivated this request (needs, strategic planning, etc.)?

This would result in an increase of \$1.00 or more for the student health fee, which is currently \$71.25. This increase is based on SHS' ongoing management of its dynamic budget which is funded approximately 75% by the student health fee and 25% by fee for service revenue. Fee for service revenue fluctuates and is contingent upon variable patient volume and unpredictable patient medical needs. SHS' ability to pass along cost increases is limited as patients may choose to use services elsewhere, particularly for pharmaceuticals, if prices are too high. Margins for these products are tighter than a few years ago, because SHS' ability to purchase at lower cost is more limited. SHS anticipates cost increases in excess of the national inflation rate; thus these costs could conservatively exceed 3% in both FY11 and FY12.

How do other sources of funding (fundraising, sponsorship, reserves, etc.) been considered? Please explain.

Reserves are not appropriate as these are ongoing costs rather than one-time expenses. SHS strives to maximize fee for service revenue without reducing patient volume.

Generally, what assessment tools will you use to evaluate this program/service?

With a complex electronic patient management system, SHS closely monitors its daily patient volume and fee for service revenue by type of service. SHS also has electronic systems for detailed tracking of pharmaceuticals, medical supplies, and other expenses.

Funding Description:

Total Estimated Cost	\$100,000
Less Estimated Partial/Matching Funds (if applicable)	\$0.00
TOTAL SSFAB INCREASE REQUEST	\$100,000.00

SSFAB Comments/Notes:

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