UPG strives to **SUPPORT** our outstanding clinicians and our dedicated UVA Health and University partners, as we:

- Help **FULFILL** the UVA Health mission of transforming health and inspiring hope for all Virginians and beyond, and
- **SHARE** and **SUPPORT** the UVA Health vision to be the nation’s leading public academic health system and a best place to work – while transforming patient care, research, education and engagement within the diverse communities we serve.
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UPG OVERVIEW

Health System Board (HSB) → Board of Visitors (BOV) → UVA President → Provost

Board of Visitors (BOV) → UVA President → Provost

Board of Directors → CEO → President

Medical Center CEO → EVP Health Affairs → School of Medicine Dean

President = Clinical Chair

UPG and SOM dually support the 20 clinical departments.

Linked Tax Status
UPG: 509(a)2
PLT: 509(a)3

Piedmont Liability Trust

*University-Associated Organization
UPG GOVERNANCE COMPOSITION

Board of Directors

Eleven (11) to Thirteen (13) Public Directors: Public Majority

Five (5) At-Large Physician Directors

Four (4) Ex-Officio Members (EVP HA, Dean SOM, CEO, MC, President Medical Staff)

One (1) Advanced Practice Provider

University Presidential Appointee (EVP COO)

Board of Visitors Appointee

Separate Legal Entity, 501(c)3
University-Associated Organization
EXCERPT FROM UPG FOUNDING DOCUMENT: Tax-Exempt Filing (1980)

The Foundation’s purpose is to assist medical education and research and to coordinate and develop superior patient care through a group practice health care provider organization in the academic environment of the University of Virginia School of Medicine and University of Virginia Hospital, known jointly as the University of Virginia Medical Center.

…It is anticipated that the Foundation’s activities will assist the University of Virginia in attracting physicians and other health care professionals of outstanding ability and professional and academic reputation, thereby enhancing both the educational opportunities and the quality of health care available at the Medical Center.

…One of the Foundation’s purposes will be to assist and conduct programs of public charity to benefit patients who might not otherwise be able to afford medical attention.

-Leigh B. Middleditch, Jr. (former UVA BOV member and UPG Board member)
INDEPENDENCE: University-Associated Organization (UAO) STATUS

• UAO status is premised on independence
• Arm’s length transactions are a requirement of Board of Visitors policy: BOV-008
  • Because each UAO is an independent entity, business transactions between the University and a UAO shall be arm’s-length and documented as appropriate.

INDEPENDENCE: STRATEGIC VALUE

• Freedom of Information Act (FOIA)/Open Records
  • UPG is not a “public body”
  • Shields from public scrutiny physician salary information, corporate reserves & department financial information
  • Protects UPG from making public any strategic planning related to programs, locations, and external negotiations
• Not subject to procurement rules
• Risk mitigation to UVA
UPG GOAL

To support UVA physicians + providers as a collaborative UVA Health partner and employer of choice.

UPG has evolved to become a physician-led, administratively supported organization.
UPG SERVICES to the University & Clinician Workforce

- Ensures Daily Advocacy for Faculty & Clinician Perspectives
- Provides Malpractice Insurance through Piedmont Liability Trust
- Provides Pension Plan Oversight & Management
- Actively Manages & Optimizes Clinician Benefits
- Manages UPG’s Real Estate Portfolio
- Provides Clinical Business Analysis & Creation of Business Plans
- Manages Clinical Contracts for both Internal & External Entities (Carilion / CMHMG etc...)
- Provides Clinical Budgeting Support
- Manages the Clinical MOU Funds Flow
- Responsible for Revenue Cycle & Payer Contracting Performance & Accountability
- Value-Based Programs (Practice Innovation) Programming support, contracting & Funds Flow
- Provides IT Support (UPG Funded EPIC Coaches; 3 FTE’s)
- UPG’s Regional Clinical Operations
  * Provide 70% of UVA Health (UVAH)’s Primary Care
  * Nimble (Quick to Respond to Emergent Community Needs – COVID, Respiratory Clinics etc)
- Assists in the Recruitment & Hiring of Clinicians
- Supports Resilience / Well-being Programs (Provider-Builder Dyad, Scribe Support, & the Use of Artificial Intelligence)
- Provides Clinician Priority for Families at the Sharon L. Hostler Child Development Center
- Represents UPG with UVAH Leadership & Internal/External Functions & Audiences
  * UPG is Recognized as 1 of 4 Key UVAH Entities (UPG, Medical Center, School of Medicine, School of Nursing)
  * UPG Physicians & Advanced Practice Providers (APPs) are Voting Members of the UPG Board
  * Monthly Open Forums for UPG Clinicians Produce Quarterly UPG Board Reports
  * Combined UPG-CSEC Meetings Elevate the Priorities of Clinical Staff
RECRUITMENT: UVA-UPG

Assist UVA in attracting physicians and other health care professionals of outstanding ability and high professional and academic standing.

The UVA School of Medicine, in partnership with the University Provost, establishes clinician compensation and generally pays the first $100,000 of faculty compensation. UPG supplements by paying amounts over that threshold, and strengthens the overall package available to the clinical faculty by providing fringe benefits that enhance those provided solely by UVA.
UPG: A Strong and Supportive UVA Health Partner

- UPG provides direct financial support to the academic mission
  - FY23: $40.1M
  - FY22: $35.2M
  - FY21: $32.1M
  - FY20: $31.8M

- In addition, clinical surpluses at UPG fund the creation of University endowments
  - In 2023, UPG funds were used to create two named endowments at the University for a total of $6M. An additional $5.9M of UPG funds were transferred to the University or Medical School Foundation in support of the Clinical Departments. This $11.9M of support is in addition to the $40.1M in direct financial support.
WHO IS UPG?

1000 UVA clinical faculty members are dually employed through UPG and UVA School of Medicine’s clinical departments.

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UPG also employs 191 advanced practice providers and 436 administrative staff.
The following statement of commitment establishes the UVA Physicians Group (UPG) Board of Directors’ position and values with regard to Diversity, Equity, and Inclusion, and provides a foundation for sustained action and accountability in the interest of organizational, institutional and societal growth and transformation.

The UPG Board of Directors unequivocally condemns systemic racism and discrimination of any kind, and stands in support of – and in unity with – all members of our UPG, UVA Health, University and broader communities in shared and determined pursuit of a more equitable future for all.

Our progress is dependent upon the understanding that our collective strength is enhanced by the diversity among us, and our willingness to shed light on past and present injustices and the undercurrent of complacency which propels them.

For centuries, systemic racism and discrimination have found amnesty in our regional and institutional shadows and have been both subtly and overtly woven into our infrastructure. Our society and our health care system have been culturally and materially damaged by pervasive and corrosive inequities which continue today, disproportionately impacting communities of color and other minorities. For the physicians and providers whom we support as the governing body of UPG, social disparities in healthcare are humanized each day by the patients and families who seek clinical care at UVA. It is incumbent upon us to do better by them and for them.

As Dr. Martin Luther King, Jr. observed, “Injustice anywhere is a threat to justice everywhere.” In the spirit of Dr. King’s sentiment and its ongoing relevance to our world, the UPG Board of Directors hereby commits to the following:

• We will endeavor to be explicit and proactive in our discussions on Diversity, Equity, and Inclusion – and to advocate for those who are or may be adversely affected by environmental and systemic racism and other forms of discrimination.

• We will work to help implement the UVA Racial Equity Task Force Recommendation that UVA adopt an equity scorecard within each school and major operational/administrative division, including the Medical Center.

• We will work to expose areas of bias which lie within our purview as the governing body of UPG, and take action to mitigate the damage associated with those systems and policies.

• We will pursue specific and meaningful information and expertise related to social disparities in healthcare, so that we may act collectively to protect and enhance the well-being of vulnerable populations in our community.
UVA PHYSICIANS GROUP BOARD OF DIRECTORS

Statement of Commitment: Diversity, Equity, and Inclusion

• We will partner with the UPG employee-led Diversity, Equity, and Inclusion Advisory Council in its mission to lead internal improvement efforts and effect positive cultural development.
• We will actively seek opportunities and partnerships for meaningful engagement and impact in our external community.
• We will support equitable employment and governance policies and practices which enhance the diversity of UPG so that the workforce (including clinicians) may be more representative of the community it serves.
• We will prioritize diversity across attributes in UPG Board of Directors and Board Committee composition and membership.
• We will collaborate with UPG Executive Leadership to implement sustained accountability measures which aim to evaluate near- and long-term progress in pursuit of UPG Diversity, Equity, and Inclusion.
• We will pursue educational and resource opportunities to help us identify our own roles in perpetuating bias, and which provide information on systemic inequities, so that as a board we may begin to affect consequential change.
• We will act as ambassadors of these cultural ideals within our own spheres of influence.

Like the work ahead of us on a local and global scale, this document will evolve with our circumstances – but our commitment to equity and justice will remain steadfast.
By healing each of us, we help heal all of us.
EX-OFFICIO DIRECTORS:

Wendy Horton, PharmD, MBA  
Chief Executive Officer  
University of Virginia Medical Center

K. Craig Kent, MD  
Executive Vice President for Health Affairs  
University of Virginia

Margaret “Meg” Tracci, MD  
Department of Surgery  
President, Clinical Staff

Melina R. Kibbe, MD  
Dean, UVA School of Medicine  
James Carroll Flippin Professor of Medical Science  
Chief Health Affairs Officer, UVA Health
AT-LARGE PHYSICIAN DIRECTORS:

Li Li, MD  
Professor and Chair, Department of Family Medicine

Peter Netland, MD  
Vernah Scott Moyston Professor and Chair  
Department of Ophthalmology

Mo Nadkarni, MD  
Harry T. Peters Jr. Professor of Medicine  
David A. Harrison Distinguished Education Chief,  
Division of General, Geriatric, Palliative and Hospital Medicine, UVA Health Systems

James Larner, MD  
Professor and Chair, Department of Radiation Oncology

Vanessa H. Gregg, MD  
Assistant Professor and Director, UVA Division of General Obstetrics and Gynecology

ADVANCED PRACTICE PROVIDER DIRECTOR:

Rebekah Compton, DNP  
Department of Family Medicine

UNIVERSITY REPRESENTATIVE DIRECTORS:

Jennifer J. Davis  
Executive Vice President and Chief Operating Officer  
University of Virginia

Victoria Harker  
Executive Vice President and Chief Financial Officer,  
TEGNA Inc
PUBLIC DIRECTORS:

Jeff H. Burton
Claire W. Gargalli
Michael Guthrie
Drew Holzwarth
Sharon Hostler, MD
Mark Lorenzoni
Louise McNamee
Kelli Palmer, PhD
Mark Roberts, CPA
Laura Morgan Roberts, PhD
Gloria P. Rockhold
Scott Syverud, MD
R. Craig Wood
# CLINICAL DEPARTMENT CHAIRS

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<tr>
<th>CLINICAL DEPARTMENT</th>
<th>CLINICAL CHAIR</th>
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<tbody>
<tr>
<td>Anesthesiology</td>
<td>Peggy P. McNaul, MD</td>
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<tr>
<td>Dermatology</td>
<td>Lu Q. Le, MD, PhD</td>
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<tr>
<td>Emergency Medicine</td>
<td>Andrew E. Muck, MD, MBA</td>
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<tr>
<td>Family Medicine</td>
<td>Li Li, MD, PhD, MPH</td>
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<tr>
<td>Medicine</td>
<td>Mitchell H. Rosner, MD</td>
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<td>Neurology</td>
<td>Howard P. Goodkin, MD, PhD</td>
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<tr>
<td>Neurosurgery</td>
<td>Mark E. Shaffrey, MD</td>
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<tr>
<td>OB/GYN</td>
<td>Paola A Gehrig, MD</td>
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<tr>
<td>Ophthalmology</td>
<td>Peter A. Netland, MD, PhD Albert S. Jun, MD, PhD (effective May 6, 2024)</td>
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<tr>
<td>Orthopaedics</td>
<td>Abhinav B. (&quot;Bobby&quot;) Chhabra, MD</td>
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<tr>
<td>Otolaryngology</td>
<td>Stephen Park, MD</td>
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<tr>
<td>Pathology</td>
<td>Christopher Moskaluk, PhD, MBA</td>
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<td>Pediatrics</td>
<td>Madhusmita Misra, MD, MPH</td>
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<tr>
<td>Physical Medicine &amp; Rehabilitation</td>
<td>Robert Wilder, MD</td>
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<tr>
<td>Plastic Surgery &amp; Maxillofacial Surgery</td>
<td>Scott T. Hollenbeck, MD, FACS</td>
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<tr>
<td>Psychiatry &amp; Neurobehavioral Sciences</td>
<td>Anita H. Clayton, MD</td>
</tr>
<tr>
<td>Radiology &amp; Medical Imaging Radiation</td>
<td>Colin Derdeyn, MD</td>
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<tr>
<td>Oncology</td>
<td>James M. Larner, MD</td>
</tr>
<tr>
<td>Surgery</td>
<td>Allan Tsung, MD</td>
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<tr>
<td>Urology</td>
<td>Kirsten L. Greene, MD</td>
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</tbody>
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