<table>
<thead>
<tr>
<th>#</th>
<th>2017 Year</th>
<th>Theme</th>
<th>Subcategory</th>
<th>Description</th>
<th>Timetable</th>
<th>Project</th>
<th>Estimated Number of Benefits (in May 2017)</th>
<th>Estimated Investment Required ($)</th>
</tr>
</thead>
<tbody>
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<td>Build &amp; Embed</td>
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<tr>
<td>5</td>
<td>1st</td>
<td>Core</td>
<td>Facilities &amp; Land</td>
<td>McDonnell</td>
<td>Short-term</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
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<td>McDonnell</td>
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<td>Short-term</td>
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Note: All numbers 12, 20, 28 and 29 do not exist in this table due to the team’s discussions and adjustments. All numbers could be retained for ranking and tracking purposes.
Partnerships, Support & Services

Agreements may have clauses which don't allow changes.

Partnerships

Support from community and health and wellness centers, private organizations, foundations, civic, non-profit organizations, sales forces, etc.

Partnerships

Provide support to development initiatives, public relations, fund raising, conflict management, volunteer opportunities.

Partnerships

Support for development initiatives, public relations, fund raising, conflict management, volunteer opportunities.

Partnerships & Support

Support for community and health and wellness centers, private organizations, foundations, civic, non-profit organizations, sales forces, etc.

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<table>
<thead>
<tr>
<th>#</th>
<th>BOTF Team</th>
<th>Theme</th>
<th>Category</th>
<th>Sub-category (elimination, reduction, expansion, consolidation)</th>
<th>Description</th>
<th>Timeline</th>
<th>Pros</th>
<th>Cons</th>
<th>Notes/Assumptions</th>
<th>Estimated Annual Range of Savings ($)</th>
<th>Estimated Annual Range of Revenue Potential ($)</th>
<th>Estimated Investment Required ($)</th>
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<tbody>
<tr>
<td>42</td>
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<td>Renegotiation or Reallocation</td>
<td>Personnel &amp; Payroll</td>
<td>Reallocation</td>
<td>Renegotiate the fringe benefit rate for employees who opt out of health care.</td>
<td>Mid-term</td>
<td></td>
<td></td>
<td>Est: Level of complexity to make the change may be significant.</td>
<td>None</td>
<td>None</td>
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</tbody>
</table>


This is a moot point. Since the fringe benefit rates are fixed with predetermined rates that are negotiated each year, the university precludes any shifting of fringe benefit health care. The actual rate calculation is based on a percentage of budget (state, federal, and institutional). After the close of the fiscal year, the "actual" rates are calculated to determine the cost based on what actually happened that year. The "actual" rate calculation is based on the total budget (state, federal, institutional) and which is a rate or under-recovery of fringe benefit costs. To avoid future rate calculation, therefore increasing or decreasing future costs, if enrollment rates change, it is appropriate. From the employee perspective, employees are not charged for health care if they do not enroll in health care. None. None. None.