

Gibson D. Lewis Health Science Library

Oral History Interview

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Hailey: Mr. Jensen, thank you for taking time out of your busy schedule to meet with us this morning. I would like if we could to start back in time and go back to a little bit of your prior background and brought you to what was then TCOM or the UNT Health Science Center or however you want to look at.

Jensen: Well, I could start I guess when I finished college. I went to work in governmental affairs. I did some campaign work and move to Washington and worked on a congressional staff and went from there to a campaign for the state senate and was fortunate to have a state senator elected to out of Houston and I moved to Austin to work on his campaign doing legislative issues. And one of the groups that supported us in our campaign was the Texas Osteopathic Medical Association. That was a time in 1981 there was a major battle between the Texas Medical Association and the Texas Osteopathic Medical Association and the board make-up for the Board of Medical Examiners. It was a battle as to whether the osteopathic physicians in Texas would continue to have on the board and not MD's. The MD's wanted just 12 physicians and TOMA knew

that they couldn't politically have those appointed without a statutory requirement and fortunately I worked for the one republican state senator who supported the DO's in that time. Because of that I made some good friendships with the Osteopathic Medical Association physicians that were down there. After that session had ended they offered me a job to come to the association, of which I worked through one session there and then Ralph Woolard and Mike Ford, at that time, hired me to come over and be Director of Development here. And knowing that my mine job would be in Austin trying to help free up somemore state dollars.

Hailey: About what year was this that you came here?

Jensen: I guess I came in about 1984 to 1985.

Hailey: So, you have been here quite a while.

Jensen: I have been here a long time. It lasted longer then I thought.

Hailey: Now if we could, could you track some of the legislative processes that you help bring along the UNT Health Science Center. I guess what it started in 1991 or what earlier?

Jensen: The main job that I have always had is that there are lots of issues that effect the Health Science Center and as the state

institution in Austin. Unfortunately, most of the people don't care about most of those issues, what they care about is the amount of general revenue that gets brought back in to pay pay raises and add additional help. So, that has been a major effort to this institution was to help our budget in the process over the last, however I have been here, 8 to 10 years. Because of that, and because we have been successful thanks to a lot of strong members in the Tarrant County legislative delegation. They have continued to allow our the Texas College of Osteopathic Medicine to grow and prosper over the last few years which allowed us to add enough physicians and enough basic science faculty that we could sell them on the need to make us a health science center with some additional programs because just the medical school itself.

Hailey: What type of programs do you see adding?

Jensen: I think right now for us the sky is the limit. I hope that I think that legislature has been very, very pleased with the fact that when back in the early 70's when Gib Lewis and Betty Ann Douhar and a lot of Tarrant County legislature went to bat to make this a state school. They promised that we would be turn out primary care physicians who turn out the physicians in what the areas of need and we have done that. That has been one thing that we have continued to do and I belief that probably in any growth in the health science center I am hopeful that it continues in that pattern towards primary care or patient care and things that help

the younger served areas of Texas, which has been the strength of this college and the now the Health Science Center.

Hailey: Now this, Health Science Center can only give out the DO degree and will never be able to give out a MD degree. I know that has been a concern.

Jensen: That was, in fact, we put that in the bill to answer a question that one of the state senator raised. The issue of becoming a health science center was never an issue of trying to lose the osteopathic heritage. It had absolutely nothing to do with that. In fact, when the bill was drafted to make us a health science center we continued to make sure that the strengths that had gone into the Texas College of Osteopathic Medicine statute remained in the Health Science Center statute. That is that the President of the Health Science Center will be a DO. SO that will always allow the osteopathic philosophy to continue from the very top. No matter what happens is that we grant the DO degree, we are accredited the American Osteopathic Association that don't accredited MD degree requirements. One of the questions that was raised was whether we were we trying to be a MD institution. I said that that was absolutely not the case and one of the senators asked, and said 'well, maybe we ought to put in the statute the degree programs that you want. So that he knew that we weren't going to try to put an MD program in. I felt that it would be disadvantageous to this institution for us try to put down that we

would in statutory language, we want a PhD in Biochemistry, we want PhD in Anatomy... and then find out that somewhere that biochemistry that we really want a PhD in Molecular Biology and then we would have to go to the legislature and change it and works as the process that all other institutions go through, which is to go to the Coordinating Board and ask them to approve your degree programs. I said well what if we just put down we cannot offer an MD degree and that was acceptable to him. Acceptable to our Board of Regents over there at that time. The Chancellor, the President. This pretty well clarified that the intent of making us a health science center was not to change the osteopathic heritage of this institution.

Hailey: To get the final bill passed, were there any major change that yall had to make that you did not start out with originally?

Jensen: Originally, what and it really amazed me as well as a lot of the legislatures... it seems so simple to me to say that you could pass a one paragraph bill that said 'wherever it says the Texas College of Osteopathic Medicine now is the University of North Texas Health Science Center at Fort Worth. Instead what we got was about a 25 page bill that took every statute that listed the institution and changed it to the University of North Texas, so a lot of people were looking at language that was already in the statutes in one line that were putting it in there. The first thing that we did, we did ask, we went through a special session

when Gib Lewis, who was the sponsor of our original bill, while he was in his last term as speaker, he announced he was leaving, we were in a special session, the special session was over public education. And in Texas unless you are on the Governor's column for a special session, one person in one house of bureau or one senator can raise a point of order against further consideration of the bill, since you are not on the Governor's column. We were willing to risk that, if you say a risk, we were willing to go forward and try to change the name of this institution to allow Gib Lewis to be the sponsor of that, since he had basically been the sponsor of the first bill and had watched over us during his entire time at Austin when he was a member of the House of Representatives and during his bi-terms as Speaker. He agreed to do that and said he that if were going to change the name of this institution he would like to do that. And we took it forward and we had no opposition in any of the committee hearings, no opposition in the House. The Speaker passed it in record time. He, in fact, when it got the floor he passed it, there was not any discussion. He then adjourned the House for 5 minutes so it would be "a new legislative day" and then passed it on third reading. We were out of the House in record time. We went to the Senate and had meeting of the Senate Education Committee and there was no opposition, nobody signed up to testify against it, or for it, as a matter of fact, we as a state institution can only testify on a bill not on it for against it. And then we ran into a problem with a state senator from San Antonio, Senator Criar, Cindy Criar, who is now the County Judge

there, and she felt that this was not the proper time, she felt that we were trying to add a lot of new addition programs through this legislative intent and that would impact on the needs of South Texas in their need for a health science center or addition healthcare programs there. She was able have the sponsor pull it down and it never came to a vote in the house or it never came to a vote in the senate because she said she was going to raise a point of order and kill the bill, which she had a right to do under the Governor's column. So, we when we came back to the regular session we tried to change the language in the bill to assure everyone that we weren't creating new programs with this bill, we were not adding additional things by changing the name and the designation to a health science center. What in essence it allowed us to do was to put in more in statue what we currently are since we already teaching a number of programs whose degrees were granted from North Texas but from here and would allow us to go to coordinating board and have other programs approved by them and back to the legislature to have them funded like every other medical school or health science center has in Texas. So we changed a few words to clarify that but the intent remained the same. One of the issue that upset some of the individuals is we took out the name Texas College of Osteopathic Medicine and we put in the College of Osteopathic Medicine and that allowed for our caption on the bill to stay instead of creating a new institution, it was to changing the name thereof. So, it answered some of the problems that we had in dealing with some of the South Texas members as to

whether we were really trying to create a new institution here that many of them felt were needed in South Texas instead.

Hailey: So Representative Criar then voted for...

Jensen: No, Senator Criar had already been elected as the County Judge and in fact two days after the special session were she killed our bill, she was swearing in as County Judge and resigned from the senate. In all honesty, when we took it back to legislature in the house there was no opposition in the House Higher Education Committee. When we went to the house floor on second reading and on usual days, other than when Gib Lewis pushed it through, you have to a bill read on a day in the house and then they adjourn and you come back the next day for final reading. On the second day there was one house member, Sue Schecter, from Houston that went up and registered as a no vote for it and interesting enough she graduate of the University of North Texas and who's family lives in Cleburne and has visited our Godley clinic. But she felt that, from my understanding is she just felt that we could continue our mission better as the College of Osteopathic Medicine. But on third reading and final passage she did not register a no vote, so we could say that we had unanimous support from the House of Representatives. The Senate prior to that, we had gone to the Education Committee, we ran into some problems with some South Texas Senators, Senator Saparenee from Laredo, thought we were again trying to do things in North Texas

when the needs are tremendous in South Texas. But in the final end, we passed it without any negative votes in the Senate Education Committee, and we passed it from the Senate with the vote 29 to 0 and that is only because two Senators, one of which was a graduate of North Texas who committed to help us but two of them were gone that day, Senator Henderson and Senator Harris, both Republicans who had voiced their support for previously. So, we did pass it and it went to the Governor's desk and she signed on June 6th and officially making us the University of North Texas Health Science Center.

Hailey: So it sounds like that it would have passed on the first go around if Representative

Jensen: Had she not raised the question and said that she alone was going to kill it and she had gone to a number of other Senators trying to get them to stand with her but they all felt that we weren't doing anything underhanded and that it really didn't change the mission of the institution but really put in statutory language. Some of the things we were already doing. She couldn't find anybody, so she stressed to the sponsor, at that time, Mike Moncrief, who then sponsored it in the regular session and in passed it and that she was going to kill it and it was right at the very end of the session, in fact, it was the last day that the senate was in session for the public education bill and he agreed to pull it down instead of having her voice her opposition to it.

Hailey: Have they ever said in South Texas where the medical school would be, if they put one there?

Jensen: No, there is, that is a major fight amongst the South Texas members. I am not sure whether they are going to put a medical school there, as a matter of fact, but there is a question as whether the state needs another medical school and the House Committee on Appropriations that deals with Higher Education is starting there, at the end of this month, they have there first hearing in Hollingen, concerning whether another medical school is needed in South Texas. There has been a lot of testimony about the fact that some states like California don't have a lot of medical schools, but they have a lot of residency programs. And because of the correlation of where you do your residency program is stronger for where you stay then where you do your medical school training. There is a question about whether it would be more beneficial to that community to instead of establishing a medical school, perhaps establish a lot of residency programs that allow students to train down there and then would stay to provide some of the healthcare needs. And there are tremendous healthcare needs in South Texas.

Hailey: We could saturate ourselves with medical schools and not residency programs.

Jensen: There are some that think that we already have we eight in Texas. We probably have more than any other state in nation, seven

state schools and one private, which received a substantial amount of state dollars. Baylor College of Medicine is private but they get a lot of state dollars. Well, there has been every since I have been here, a feeling amongst some of the legislatures that perhaps we ought to close a medical school or two because we are expensive.

Hailey: Hopefully, the UNT won't be one of those...

Jensen: Well, the good thing is I am in Austin so I will know first and get my resume out before everybody else does.

Hailey: You got the inside track. What were some of things that you had to do possibly drum up support in the community here and even possibly, no necessarily in Austin, but what were some other things to do to get support in Austin?

Jensen: Yeah, I think one probably one of the greatest things that goes back to Gib Lewis, Gib was a very popular Speaker and were known as the Speaker's medical school. Because of that we, our institution has friends that helped us that are not directly related to Tarrant County or this institution. For example, when the Speaker was carrying the bill the Speaker did not leave the podium. But one of his top lieutenants, people call him that, Ugo Deranga, who is from Corpus Christi, State Representative, he was chair of the Calendars Committee, which sets the calendars for all the bills that can come to the floor, very, very powerful member

and he has taken us under his wing as well. He is the one that laid out that bill on the house so that we would not receive any South Texas opposition. He is from Corpus and he thought that if he laid out the members from the South Texas area would understand that it was a statewide issue and not a North Texas vs. South Texas. In fact, that same thing happened this last time, Representative Bill Carter, who is the Chairman of the Tarrant County Legislative Delegation and a Republican, passed the bill on second reading, but there was some questions about whether South Texas was concerned about it again so Representative Baranga, who was the co-author of the bill as well as all of the members of the Tarrant County Delegation, except Representative Dole Willis and Representative Kent Grusendorf, those were the only two out of Tarrant County they did not sign on as co-authors, although they supported the bill. But Representative Garanga was a co-author and he got up to pass it on third reading and make sure that everyone knew that was his support for it and then last session, instead of being calendars, Representative Garanga was chairman of the Public Health Committee, so he could talk about the needs in the health area as the chairman of that committee and was very beneficial to us.

Hailey: So, you had the top Texas connection.

Jensen: We tried to have the South Texas connection because we knew that was going to be a problem.

Hailey: It sounds like most of the representatives here, you said the two in the county were for it..

Jensen: Well, they were all for it. They were all for it. What happen was the Tarrant County Delegation in all the years that I have been here, have always been supported of our institution. I guess it started with Gib and Charlie Evans and Mike Milsap, back in the early 80's, late 70's, they were very, very supported of our institution and they have gone on to do other things. But the people that have taken their place have always been supported whether they have been republicans or democrats. Bob McFarlan and Bob Glasco, were two State Senators that both on the Finance Committee, both on the Legislative Budget Board that always fought to make sure that we were funded in an appropriate manner. And when Bob McFarlan left, Senator Chris Harris came in and Senator Harris when he was a house member, following Bob McFarlan into the house seat, he was the one that put in funding to establish our DNA lab here, for almost \$750,000 of which now because, we do 40% of the paternity testing statewide for the attorney general office and it means little over \$125,000 a month into our practice plan that we generate because Chris Harris thought we ought to get into paternity testing and establish a DNA lab here. There is also spin-offs from that, not only is it the financial aspect and the fact that we are helping the attorney general with a tremendous state need, that is establishing the paternity so that fathers that have to pay child support for their children, which takes a

tremendous a tax burden off the State of Texas. But we also, because we have that DNA or working with bone marrow transplants with Cook's Childrens Hospital for children and some other hospitals in that same area with genetic testing that they came directly out of some funds that went in for one reason which was paternity testing, but ended up benefiting the community as a whole.

Hailey: So, we do have a lot, we help the state out in a lot of different ways which makes us marketable for them.

Jensen: I think that is right. I think the greatest thing that our institution has is the amount of our graduates that go into primary care. Go into family practice. We not only lead the state, we are 1, 2, or 3 in the nation depending on which year it is. And that is what every member is pleased with that cause they all have areas that are desperately in need of primary care physicians and then we tend to have some strength of a number of rural senators, because 31% of our graduates practice in towns less than 25,000. We are putting them out in areas of need in Texas and so they are being supported of us when it comes to the budget times and when it comes to things we need like making us a health science center.

Hailey: Why do you think that that was the right time for that initiative to go through. Do you think that was the best time?

Jensen: I do not know, we have talked about this for a number of years, in fact, the plaque that first went on the building that was built in 1978 said North Texas State University Health Science Center Texas College of Osteopathic Medicine, they have always felt that this should be a health science center. I do not know that, I think that the timing was right and we went to just ask Gib Lewis to do it. I do not think that if Gib decided to stay for two more terms we may not have done it yet. But we felt that we could give him that option and it was a last minute deal. I mean the Governor called a special session in for public education and we got the bill drafted and asked him to carry it and he did and then once we lost it by one vote, had we not come back and passed it there would have been a lot of people thinking there was a reason for that. So, it was imperative that we come back now or else there would have been questions as to why we hadn't and perhaps thought about hidden agendas somewhere, of which, there weren't any.

Hailey: So if we would have waited too much pass that at the end of the year it may have been different.

Jensen: It may have been different. A lot of the members, there wasn't that large of a turnover in the house or the senate between that special session and when the regular session started because the new terms took effect by that time. So a lot of people had been familiar with the issue and remember that they voted on it and you know, if you voted for it once in November, what is the difference

in voting on it once in March or February or April, as the case may be. But it was important that we do it now cause otherwise with the big turnover, you got to get back and reeducate everyone as to the need and why this institution felt it was important.

Hailey: At that time, were there some, why do you think it was necessary for the growth and success of TCOM to become a health science center, did you have to push a lot of that with legislatures?

Jensen: We have internal reasons of it and we had external reasons for it. Externally, and one of the things that the Texas College of Osteopathic Medicine has always faced is that especially in our basic science area, the osteopathic profession has never been that strong in research areas. Most of the other osteopathic schools and a lot of them especially, you have to understand the osteopathic profession was private schools until the late 70's, so in a private school without the need or without the desire to increase your federal funding and without the need to impress your state appropriations dollars are being used to match up with federal appropriation dollar, there wasn't a big need in the private schools for them to do a lot of research. They were trying to educate students and graduate good doctors. As the state schools begin to come online in the 70's with Michigan and ourselves Oklahoma, there started to be a stronger emphasis in research, but in all honesty there wasn't that great an effort. I

remember when I came here our research was less than \$1,000,000 in federal funds. Now, ten years later it is close to almost \$20,000,000. We understood to be an academic center or to be strong medical school takes a strong basic science component. One of the problems, I think, some of the our basic science was when they sent in their applications and when they sent in their research programs to NIH or to various foundations or private research labs, the name osteopathic did not really tell what we really were. The name Texas College of Osteopathic Medicine did not show that we had a 20 year relationship with the University of North Texas. A lot of our basic sciences have a joint programs that we have a lot of research people that are getting their PhD's and masters from North Texas, who are working in our labs on research projects, but are not, that does not show through a title or in a name unless somebody happened to know and that was one of the areas that we stress. Internally, as an institution, we knew we needed to do something to increase our bottom line and increase the number of students that we had. The state has been very good to this institution over the past few years, and the problem we have is how much is enough to graduate 400 doctors. Our budget, when I came our budget was about \$19,000,000 a year, and now it is \$27,000,000. That is \$8,000,000 a year, \$16,000,000 over by any, that we receive an addition funds and we are not teaching anymore students then we had when we had \$19,000,000. The question is how much is enough. I think that we were coming up to where we were getting up our cost per student was high, because we couldn't shift some of those funds like the other

health science centers do. For example, if we have nursing program or a pharmacy program or an allied health program we are still only going to need one library, we may need more books in that library, but we still only going to need one library, we still only going to need one library director, we still only are going to need one president. Those are things that if we add another 100 students in an allied health program and bring in, like right now we still only have 75 in our masters and PhD level classes. Part of the cost of the presidency, part of the cost of library, part of the cost of physical plant, part of my salary, can be showed that we are also doing things for those individuals and therefore the cost per student for our institution is not as high. We had to do something that would do that and making us a health science center and allowing us to add those programs was beneficial.

Hailey: You mentioned that 31% of our students that go into towns that have 25,000 people or less, was there some other things that you could mention to the legislature and to other people that make this health science center have different ideas then Texas Tech or the others.

Jensen: Sure. I think, first of all, you have to talk about our primary care. We lead the state in the number of our physicians that go and start residency and practice in primary care. We lead the state when it comes to almost 1/3 of our graduates this last year that went into family practice which is unheard of in medical

schools in Texas or the Nation. We continue to go to that 31% of physicians in towns less than 25,000. Just as importantly as that 31%, 14% of those practice in towns in less than 5,000. So, we have a lot of small areas out there and physicians or community leaders no matter where they are. They are people that you take your kids to when they are sick and they are involved in the rotaries and they are often out on the side lines coaching the football. So a lot of those senators that travel through those areas for reelection and for other purposes, one of the people that they like to meet is their physician and they really help and benefit because a lot of them know that our graduates are out there.

Hailey: So physicians are also a community leader and then a senator comes through that person.

Jensen: There has been many times in the times that I have been Austin that we have benefited because these are some of graduates or some DO's that care about our institutions have worked with legislatures over various issues and take care of them and some instances and that has been beneficial to our institution. Unlike the other medical schools, because with seven MD schools, if you have a MD in your community you don't necessarily think one institution, if you got a DO in your community you think the College of Osteopathic Medicine. We benefited that way, we benefit as well with the osteopathic pack that supports a number of candidates that we credit because we are the College of Osteopathic

Medicine.

Hailey: Where do some of the next legislative steps that you are thinking about the health science center?

Jensen: Well, I think there are a number of issues the institution is looking at. One, we are looking at a College of Public Health or a School of Public Health. We are looking at one a school of public health that deals in more in the preventive and public health care that has been important in a hallmark in the primary care areas of this institution. We are looking, we have had some people from the pharmacists come and ask us about a pharmacy school here. And these are not people that we have solicited, but have come to us. We have had, there is a school of podiatry that has been established but never funded in Texas. They were interested in seeing if we wanted it here. I think probably you will see a tremendous increase in our basic science area we the PhD and master level students. I think that if some of our contracts that we hope work out with the prison system and some of the needs that they have as well as the medical education consortiums that we are a member of here in Tarrant County. You may see some physician assistance, some nurse practitioners programs, maybe in conjunction with somebody else where they grant the degree, perhaps they do a lot of training in our areas. I do not know all the things that are possible. I think that this next legislative session we are probably going to go in and ask for some increased funding for some

faculties so we can increase our residency programs. I think that we were going to try to fund some more residency programs like in Corpus Christi. We are going from seven residency at a program down there to twenty-one. We need to fund that program. We have a strong need to establish some new rural health initiatives. We have not been funded federally for an a head program and perhaps there is some things that is an area of health education program where we put a physician out and then extend in the community where they don't have any physicians. If the feds continue to cut back in that program, perhaps there is some things the state can do that would help us continue to make a rural health care practice attractive to our students.

Hailey: So, you are really trying to bring the students out of the rural areas.

Jensen: Well, that is one of the things that has benefited our college. A lot of the things that the state has tried to mandate medical schools do to increase the number of generalists physicians and increase the number of rural physicians are the things that our college has always done. We always had a third year clerkship where are students went and learned what it is like to be in a general family practice. We have always had a clinic in Godley. We had a clinic in Justin that we closed, but we have always had a rural clinic so they can see what it is like to practice in a rural area. Part of the problem in medical school that are sitting next to a

major teaching hospital is that they don't know that they can practice medicine without all the bells and whistles. Without MRI's and without CAT scans. Those are needed, but if you go to practice in Rising Star, Texas you are not going to have that. But a practice in Rising Star, Texas can be very thrilling and very beneficial to you as an individual and one of the ways of doing that we have a lot of rural preceptorships where we send people to Eden, Texas and Rising Star and Balinger and Mule Shoe where some of our graduates are and they find out that they can practice out there and have a good life and perhaps that is better in raising a family then some of the other things that they have as an option in a large community.

Hailey: So we are definitely keeping a lot of our same focus that we have always had in working with what we know as work now.

Jensen: That is correct.

Hailey: What other challenges do you see that lie ahead for this health science and you as well?

Jensen: I think as an institution as a state institution our challenges are always going to funding. We have got a lot of ideas and a lot of things that probably can be beneficial to the state. But so do a lot people and the dollars in Texas have tighten up considerably and we are about to run out of accounting measures and

accounting tricks to balance the budget in Austin. We have done it for the last four sessions, that I am aware of, that we have tried to go through them and get funding. We have never had a surplus since 1981 was the last year in the State of Texas had a surplus in it's budget. Because of that it is always tight. I would say this next year the estimates going out we will again be \$6 billion dollars in the red. So they have got to come up with ways that \$6 billion dollars, if everyone continued and you took in the new mandates that the federal government sends. So in Texas was have a balanced budget amendment and they have got to come up with that money or they have got to cut more to get to it. That \$6 billion does not include any increases for us, it does not include any of those possibilities I spoke of before. It doesn't include pay raises for the state employees, which has gone a number of year without a significant increase. There a lot of state employees that earn less now then they did when they started ten years ago. I do not know how long good employees are going to stay with that. Health insurance is another problem. You know, we as a state institution we belong to the state insurance burlap, and I sure those rates will go up and if there is not a corresponding dollar amount to you, then that is an additional pay cut. So, we are very aware, from the President on down, that this institution that the problems that a lot of our employees are going through as far as financially that the state hasn't taking care of that and I think that all state institutions in higher education are aware of that and are going to try to do something about that as well.

Hailey: There is always a chance that it could cut some of the budget rather than give us some more money.

Jensen: There is always that chance. But, that, in fact, you know with they traditionally do is give you maybe a flat budget and then take it away in the end. Say we were suppose to save X amount of money and if you don't we can come back in and reduce your budget. So, we have been fortunate each year that there has been a slight increase or sometimes larger increases, we have never had a true major budget cut and I am hopeful that won't happen again this time. Our education has a lot of support in the legislature, they understand the need for it. Medical schools have support as well and we have a strong support of the Tarrant County Delegation that I am sure that going to try to make sure that their institution and their area gets their fair share as well.

Hailey: There are a lot of state institutions to spread the money around in it looks like to me.

Jensen: We spend a money, the legislature spend an enormous amount of money in South Texas last year. At the expense of some institutions in North Texas in West Texas and East Texas. They felt that that was important to do that to get South Texas back on track as far as where there programs are in comparison to the other areas of the state or the regions of the state. But it doesn't hurt that that is a large democratic turn out for the next reelection of the

governor and lieutenant governor that is up for reelection this time and I am sure that had something to do with it as well.

Hailey: You have to take in those political considerations a lot, I guess.

Jensen: You bet, there is isn't any question that there are times in Tarrant County or at our sister institution in Denton, when you have members that are elected that represent the areas where your school is that don't believe that any new taxes are needed or don't support the budget programs. There are times that there penalties are taken out on those institutions.

Hailey: I am curious, now that we have all these changes in place and we are making more changes, how do you see your role in Governmental Affairs changing?

Jensen: I do not know that it will truly change as much. I think it will take more time to explain the need for more programs. I will take the additional time, I am not an expert in anything, so it will take a lot more time of other individuals that are at this campus to go to Austin or go to Washington and try to explain why they feel that our institution is the best one possible to serve that need and that is why it needs to be funded. We do take a lot of people to Austin during the legislative sessions to do testimony and to meet with different committees offering their expertise

everywhere from funding from the Attorney General's child support division, which funds our paternity lab to our physical people who can talk about what we do with our budget to people who have special items that like in computing and some of our needs and how they explain those things. I think the same would hold true if we look at any additional programs or new programs that those individuals will have to go Austin or to Washington depending on where the funding maybe from to deal with that issue.

Hailey: So it is going to take more then just you going back.

Jensen: You bet.

Hailey: It is going to take a crew of people. Mr. Jensen we have covered a lot of ground here this morning. Are there some other areas that you would like to bring up that I haven't mentioned or any final remarks you would like to make in regards to what we have discussed this morning?

Jensen: No, I think that the future is bright, I think that we did the right thing and making this a health science center. I think that with the leadership that is currently here at the institution that it will continue to go into the right direction and never losing sight of what I hope continues to be our primary care mission. I think that that is where our biggest problems maybe, if we try to do all things for everyone that is not what we are

suppose to do. I am reminded and I do not remember who said it but somebody's job, oh, Lee Iococa, when he took over Chrysler, he said the main thing is to keep the main thing the main thing. If we can continue to keep our main thing the main thing I think that the future is bright for this institution.

Hailey: Mr. Jensen, thanks again for taking time out of your busy schedule to meet with us. I know that we have tried on several occasions to get with you and your schedule is busy and I see why after today and I hope that you will continue to keep working as hard as you have for the school. I know that everyone in the school appreciates what you have done. We could not have done a lot of these things without your help and the school owes you a lot for that.

Jensen: Thanks, maybe I can take a tape of this to the budget hearings.

Hailey: Thanks again and have a nice day.