

PROGRAM MODIFICATION PROPOSAL FORM

Name of Institution: Medical University of South Carolina

Briefly state the nature of the proposed modification (e.g., adding a new concentration, extending the program to a new site, curriculum change, etc.):

MUSC proposes multiple modifications to its existing Master of Health Administration programs. These are (1) consolidating all tracks to a single MHA degree with two delivery options (online and hybrid); (2) reducing number of credit hours to complete the degree to 49 cr (currently, it is 67 cr for Residential track and 54 for the Executive track); (3) reducing the number of semesters to complete the degree to 5 semesters (which is one fewer than the current Executive track and equal to number for Residential track); (4) providing the ability for students entering the program with relevant experience to waive the final semester which is a practicum course (6 credits) and thus complete the degree in four semesters; (5) 10 courses are omitted; (6) six new courses are added.

Current Name of Program (include degree designation and all concentrations, options, and tracks): MHA; includes Executive track; accelerated Executive track; Exec track Doc pre-prep Clinical; Accelerated Executive MHA [MUSC will submit termination requests for these tracks]

Proposed Name of Program (include degree designation and all concentrations, options, and tracks): MHA with two sites—online and hybrid

Program Designation:

- | | |
|---|--|
| ☐ Associate's Degree | ☒ Master's Degree |
| ☐ Bachelor's Degree: 4 Year | ☐ Specialist |
| ☐ Bachelor's Degree: 5 Year | ☐ Doctoral Degree: Research/Scholarship (e.g., Ph.D. and DMA) |
| ☐ Doctoral Degree: Professional Practice (e.g., Ed.D., D.N.P., J.D., Pharm.D., and M.D.) | |

Does the program currently qualify for supplemental Palmetto Fellows and LIFE Scholarship awards?

- ☐ Yes
☒ No

If No, should the program be considered for supplemental Palmetto Fellows and LIFE Scholarship awards?

- ☐ Yes
☒ No

Proposed Date of Implementation: May 2026

CIP Code: 51.0701

Current delivery site(s) and modes: 50501; 85500; 85750

Proposed delivery site(s) and modes: 85500; 85750

Proposed deleted delivery site(s) and modes: 50501

Program Contact Information (name, title, telephone number, and email address):

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Institutional Approvals and Dates of Approval:

College of Health Professions Leadership Council – 05/19/25
MUSC Education Advisory Council – 07/10/25
MUSC Provost Council – 07/21/25; approved change to program modification 08/25/25

Background Information

Provide a detailed description of the proposed modification, including target audience, centrality to institutional mission, and relation to strategic plan.

MUSC proposes to revise its MHA program to better align the curriculum to provide education that reflects current needs for managing healthcare organizations and to allow students to enroll in either online or hybrid methods of delivery, regardless of their relevant experience. Currently, the *Executive* MHA program (which is offered online) is available only to students with healthcare leadership experience; the proposed modification will allow the online delivery option to be offered to all accepted students interested in healthcare administration, regardless of their prior experience. This aligns with MUSC's strategic plan to reshape the future workforce.

The modified program will be 49 credit hours, regardless of whether courses are taken online or in a hybrid format. Students with healthcare or other relevant leadership experience may be approved to complete the degree requirements without completing the Healthcare Administration Practicum in the final semester of the program. Thus, students can complete the program in five semesters; students with relevant experience in healthcare or administration can complete the program in four semesters, if the final semester is waived.

Students currently enrolled in the Residential (67 credits) and Executive (54 credits) tracks will have the option to transition into the modified MHA program (Hybrid or Online) (49 credits); for those who choose not to transition, a formal Teach-Out Plan will ensure they can complete their original plan of study. Students will have a guaranteed pathway to complete their degree without being required to move to the new 49-credit curriculum, as all course content required under each student's original plan of study will continue to be offered through each student's expected graduation timeline, either by maintaining the same courses or by providing substitutions that deliver the same competencies without adding credit hours. The Department and MHA program leadership, in partnership with Enrollment Management and the College of Health Professions Student Services team, will oversee this process to ensure clear communication, proactive advising, and individualized support and teach-out plans for impacted students.

Collectively, these revisions strengthen the program's alignment with CAHME accreditation standards and thus better equip graduates to manage today's complex health systems. The MHA program directly contributes to MUSC's role as South Carolina's only comprehensive academic health sciences system and its mission to preserve and optimize human life in South Carolina and beyond.

Assessment of Need

Provide an assessment of the need for the program modification for the institution, the state, the region, and beyond, if applicable.

The program modification is needed to improve students' access to enroll in the program.

The MHA program prepares graduates to effectively lead healthcare organizations. South Carolina has significant growth in its healthcare sector. The [South Carolina WIOA Combined State Plan \(PYs 2024–2027\)](#) shows over 6,500 unique job postings for Medical and Health Services. Medical and Health Service Managers is included as a priority occupation in the South Carolina Unified State Plan for Education and Workforce Development for 2024-2025. National forecasts from the [U.S. Bureau of Labor Statistics](#) anticipate a 29% increase in employment for medical and health services managers from 2023 to 2033, significantly higher than the average for all occupations (BLS Healthcare Occupations Outlook).

Because of this need, it is critical that we eliminate barriers to students enrolling in the program. The proposed modifications achieve this by (1) allowing learners with and without health leadership experience to enroll in the program online; (2) allowing those with relevant work experience to complete the program in 4 semesters; and (3) allowing for rolling admissions (students can begin the program in Fall, Spring, or Summer semesters).

Transfer and Articulation

Identify any special articulation agreements for the modified proposed program. Provide the articulation agreement or Memorandum of Agreement/Understanding.

This item is N/A.

Description of the Program

Projected Enrollment						
Year	Fall Headcount		Spring Headcount		Summer Headcount	
	New	Total	New	Total	New	Total
FY27 (AY26-27)	50	50	20	70	10	80
FY28 (AY27-28)	50	130	20	150	10	140*
FY29 (AY28-29)	50	183	20	198	10	158
FY30 (AY29-30)	50	188	20	198	10	158

Disclaimer: This table accounts for modeling based on 40% of students completing the program after five semesters (e.g., four courses per semester), with the remaining 60% completing within nine semesters (e.g., two courses per semester). The first instance of this is marked with an “*”. In Summer FY28, 20 students graduated, and 10 new students started the program.

Explain how the enrollment projections were calculated.

Enrollment projections were developed using a conservative growth model based on key program enhancements, including offering the program online to students without healthcare leadership experience. Additionally, there will be three annual entry points (Fall, Spring, and Summer), enhancing accessibility and flexibility. These changes are designed to expand access for working professionals and increase enrollment capacity each term. Additionally, improvements to curriculum structure and retention strategies are expected to support higher persistence and graduation rates.

Enrollment estimates include an initial enrollment of 25 new online students and 25 new hybrid students in Fall 2026 (and throughout the enrollment projection, we anticipate half of the enrolled students will be online), 10 new online students and 10 new hybrid students in Spring 2027, and 5 new online students and 5 new hybrid students in Summer 2027, with steady growth anticipated in subsequent years. These projections are informed by market trends in graduate healthcare education, internal inquiry and application data, and growing interest among prospective students within South Carolina and nationally. Increased marketing efforts will further support recruitment and visibility.

USC’s MHA is the only other program in South Carolina that is CAHME-accredited. For enrollment projections, we used these comparisons as well:

Institution	2023	2022	2021
Capella University	573	561	535
Charleston Southern University	10	11	5
Columbia College	13	7	9
Florida International University	94	75	77
Liberty University	117	162	77
Medical University of South Carolina	40	58	28
Purdue University Global	208	278	219
South University-Columbia	11	9	15
Southern New Hampshire University	439	320	358
University of Alabama at Birmingham	63	64	60
University of South Carolina - Columbia	19	17	20
Western Governors University	1796	1774	1991

Data Source: *Integrated Postsecondary Education Data System (IPEDS); Online Programs*, Graduate; Degree CIP=51.0701, First Major

We are positing that our enrollment projection (scaled from 80 enrolled students to ~128 enrolled students/year by year 3), while greater than SC schools but less than Capella University, Purdue University Global, Southern NH University, and Western Governor’s University, and comparable to Liberty University, is reasonable because of MUSC’s brand as an academic health science center offering a Health Administration degree. The College of Health Professions has an established and dedicated marketing and recruiting team that has been expanded to support programs in the College with residential, online, and hybrid tracks. For example, the hybrid occupational therapy and physical therapy programs that begin in Fall 2025 have successfully filled cohorts of ~74 students each which equals the respective residential cohort sizes for total cohorts of 140-150 students.

Curriculum

Attach a curriculum sheet identifying the courses required for the program.

The curriculum is appended.

Curriculum Changes

Courses Eliminated from MHA Program	Courses Added to MHA Program	MHA Core Courses Modified
HAP 725 Statistical Analysis in Health	HAP 6XX Introduction to Healthcare Administration	HAP 746 Strategic Management & Marketing
HAP 756 Executive Skills I (<i>Residential only</i>)	HAP 7XX Digital Transformation in Healthcare	
HAP 730 Healthcare Project Management	HAP 7XX Epidemiology, Population Health, and Quality	
HAP 738 Management & Health (<i>Executive only</i>)	HAP 7XX Managing Healthcare: Operations, Quality, and Projects	
HAP 632 Quality Management of Health Care Services	HAP 7XX Quantitative Methods and Evidence-Based Decision Making in Healthcare	
HAP 754 Internship (<i>Residential only</i>)	HAP 7XX Healthcare Administration Capstone	
HAP 620 Healthcare Reimbursement Systems	HAP 800 Healthcare Administration Practicum	
HAP 753 Seminar in Ethical Leadership		
HAP 722 Health Behavior & Epidemiology		
HAP 744 Decision Analytics		
ELEC 1 Elective		
IP ### IP Concentration Course of Choice (<i>Residential only</i>)		

New Courses

List and provide course descriptions for new courses.

New Course	HAP 6XX – Introduction to Healthcare Administration (1 Credit)	This foundational course serves as the entry point to the program and is designed to orient students to the structure, expectations, and competencies of the program. The course introduces core concepts of leadership, professional development, executive skills, and lifelong learning while emphasizing the importance of strategic career planning in the evolving healthcare landscape. Students will complete a baseline assessment of their knowledge and experience and will develop an individualized career development plan to guide their personalized learning journey. The course also explores the value of professional networking and encourages active engagement in regional and national organizations aligned with students' career aspirations. Through reflective activities and goal setting, students will begin to chart a strategic path toward leadership roles in a diverse range of healthcare organizations.
New Course	HAP 7XX – Quantitative Methods and Evidence-Based Decision Making in Healthcare (3 Credits)	This course develops the knowledge, skills, and competencies needed to identify, access, evaluate, and apply high-quality evidence by integrating relevant research, data, and organizational information. Students will apply quantitative methods to analyze financial, operational, quality, and safety -metrics and data; interpret key performance indicators; and benchmark against evidence-based standards. Emphasis is placed on leveraging digital technologies to enhance decision-making. By the end of the course, students will be able to translate data into actionable strategies that drive organizational performance and improve outcomes.
New Course	HAP 7XX – Managing Healthcare: Operations,	This course introduces and examines key concepts in healthcare operations, quality improvement, and project management within dynamic healthcare environments. Students will examine frameworks such as Lean, Six Sigma, and the Institute for Healthcare Improvement (IHI) Model for Improvement, alongside project management

	Quality, and Projects (3 Credits)	principles guided by the Project Management Institute (PMI) standards. Emphasis is placed on using performance metrics, process analysis, and evidence-based methodologies to improve care delivery, patient safety, and organizational efficiency. The course prepares students to lead interdisciplinary teams and manage projects through all phases—from initiation to evaluation. Students will develop the practical skills needed to implement and sustain quality and operational improvements in real-world healthcare settings.
New Course	HAP 7XX – Healthcare Administration Capstone (3 Credits)	This capstone course serves as the formal exit and integrative experience for the program. Students revisit their career development plans, reflect on individual growth toward competency, and reassess baseline knowledge to evaluate learning outcomes. Through reflective activities and goal setting, students chart a plan for continued growth post-program. As the culminating experience, students demonstrate readiness for professional practice through course assignments that require them to synthesize learning and apply competencies gained across the curriculum.
New Course	HAP 7XX – Digital Transformation in Healthcare (3 Credits)	This course introduces and examines the evolving role of digital technologies in modern healthcare systems, including artificial intelligence (AI), machine learning, telehealth, and advanced analytics. Students will explore a variety of clinical and administrative information systems—such as electronic health records and decision support tools—and how they support healthcare operations and delivery. The course emphasizes strategic information systems planning and the critical evaluation of digital solutions to improve quality, efficiency, and patient outcomes. It also addresses interoperability, cybersecurity, and the ethical implications of adopting emerging technologies.
New Course	HAP 720 Epidemiology, Population Health, and Quality (3 Credits)	This course focuses on applying epidemiologic principles to quality and safety initiatives in diverse populations. Addresses health disparities and integrates patient and family-centered care as core to quality measurement.
Course Modification	HAP 746 – Strategic Management and Marketing (3 Credits)	This course provides students with the opportunity to investigate the strategic management and marketing function within health care organizations. It emphasizes the organizational strategic planning process, including the principles and methods of strategic assessment, marketing, administrative decision-making, competitive analysis, market analysis, strategy formulation and selection, implementation and evaluation of strategic actions.
New Course	HAP 800 – Healthcare Administration Practicum (5 Credits)	The Healthcare Administration Practicum is a culminating; real-world field experience designed to integrate and apply knowledge gained throughout the program. This course is primarily intended for students who have limited professional experience in healthcare settings or for those seeking exposure to a new area within healthcare management. The practicum may be waived for students entering the program with healthcare experience, as determined by program criteria established at the time of admission and via a waiver provided by the MHA Division Director. This experience enables students to demonstrate selected healthcare administration competencies through guided practice within a professional setting. Under the mentorship of an experienced healthcare mentor, students will actively engage in a range of management-level activities and may contribute to a targeted project(s) aligned with their career interests. Practicum competencies will be collaboratively selected by the student, preceptor, and/or site to ensure alignment with the shared goals of the student, preceptor, host organization, and in alignment with the program's competency model. Through this immersive, practice-based experience, students will sharpen essential skills in leadership, strategic thinking, and operational management while deepening their understanding of real-world healthcare challenges and opportunities. The practicum promotes reflection, competency development, and professional growth, preparing students to confidently transition into healthcare leadership roles.

Similar Programs in South Carolina offered by Public and Independent Institutions

Identify the similar programs offered and describe the similarities and differences for each program.

Program Name and Designation	Total Credit Hours	Institution	Similarities	Differences
Master of Business Administration: Healthcare Administration (MBA-AH)	36	Anderson University	Business foundation with healthcare concentration	Business core MBA program; not CAHME-accredited
Master of Business Administration: Healthcare Administration (MBA-AH)	36	Benedict College	Business foundation with healthcare specialization	Business core MBA program; not CAHME-accredited
Master of Business Administration: Healthcare Management (MBA-HM)	30	Charleston Southern University	Business foundation with healthcare emphasis	Business core MBA program; not CAHME-accredited
Master of Business Administration: Healthcare Administration (MBA-AH)	36	Columbia International University	Business foundation with healthcare leadership emphasis	Business core MBA program; not CAHME-accredited
Master of Business Administration: Healthcare Management (MBA-HM)	36	Winthrop University	Business foundation with healthcare management emphasis	Business core MBA program; not CAHME-accredited
MHA (traditional and executive)	58 res; 45 exec	Univ South Carolina	CAHME-accredited; full-time and executive options; strong health policy and management focus	Traditional is campus-based; Executive is designed for working professionals
MBA w concentration in healthcare administration	30	Coastal Carolina Univ	Business foundation with healthcare electives; can be completed quickly	Business core MBA program; not CAHME-accredited
Online MBA in healthcare administration	30	USC Aiken	Accelerated online format; focused on healthcare business	Fully online; designed for fast completion (as little as 10 months); not CAHME-accredited.
MBA with concentration in healthcare management	30	South Carolina State Univ	Online format; healthcare-specific business leadership focus	12-month format; emphasis on underserved communities; not CAHME-accredited.
MBA with Healthcare Leadership Concentration	36	Anderson Univ	Business and healthcare management integration	Private university; includes values-based leadership; not CAHME-accredited.
Master of Healthcare Administration (MHA)	36	Columbia College	Online delivery; geared toward working professionals	Private women's college (now coed); flexible pacing; not CAHME-accredited.
MBA in Healthcare Administration	49	South University (Columbia Campus & Online)	Business and healthcare coursework blend	For-profit institution; flexible term starts; not CAHME-accredited.

Faculty

State whether new faculty, staff or administrative personnel are needed to implement the program modification; if so, discuss the plan and timeline for hiring the personnel. Provide a brief explanation of any personnel reassignment as a result of the proposed program modification.

Two new full-time faculty members have been hired following final interviews conducted in August 2025, with anticipated start dates of October 1, 2025. The program currently has two existing full-time faculty members dedicated to the MHA program. Additional instructional needs will be addressed through the use of existing part-time faculty, ensuring flexibility to meet enrollment demand without requiring further immediate full-time hires. Staffing will continue to be reviewed on an annual basis during strategic and budget planning processes.

Resources

Identify new library, instructional equipment and facilities needed to support the modified program.

Library Resources: None additional needed

Equipment:

The proposed modified MHA program will leverage existing institutional infrastructure to deliver its hybrid and online curriculum. MUSC already supports residential, online, and hybrid learners through a robust learning management system (LMS), an electronic library of academic databases, and a suite of instructional technologies and student support services.

No new specialized instructional equipment is required to relaunch the MHA program, as existing classroom resources, university systems, and services are sufficient to support students at scale.

Facilities:

No new facilities are required to relaunch the hybrid and online MHA program, as existing classroom resources, university systems, and services are sufficient to support hybrid and online students at scale.

Impact on Existing Programs

Will the proposed program impact existing degree programs or services at the institution (e.g., course offerings or enrollment)? If yes, explain

☐ Yes

☒ No

Financial Support

	Estimated Sources of Financing for the New Costs					
Category	1st	2nd	3rd	4th	5th	Total
Tuition	1,062,780	682,000	1,202,025	1,346,950	1,346,950	5,640,705.00
Program-Specific Fees	115,215	118,600	164,045	176,710	176,710	751,280.00
Special State Appropriation						-
Reallocation of Existing Funds						-
Federal, Grant, or Other Funding						-
Total	1,177,995	800,600	1,366,070	1,523,660	1,523,660	6,391,985.00
	Estimated New Costs by Year					
Category	1st	2nd	3rd	4th	5th	Total
Program Administration and Faculty and Staff Salaries	728,145	651,628	663,667	675,946	710,869	3,430,255.00
Facilities, Equipment, Supplies, and Materials	37,100	40,050	43,350	46,980	50,973	218,453.00
Library Resources						-
Other (specify)	530,476	391,814	645,135	716,591	719,463	3,003,479.00
Total	1,295,721	1,083,492	1,352,152	1,439,517	1,481,305	6,652,187.00
Net Total (i.e., Sources of Financing Minus Estimated New Costs)	(117,726)	(282,892)	13,918	84,143	42,355	(260,202.00)

Budget Justification

Provide a brief explanation for all new costs and sources of financing identified in the Financial Support table.

The elevated expenses projected in Years 1 and 2 are attributable to three primary factors: program enrollment ramp-up, administrative and central university service costs, and faculty salaries.

1. **Revenue Generation:** The primary source of revenue will be student tuition. Program fees are used to support student learning by covering costs such as embedded academic assessments, required software and simulations, and other instructional resources that enhance the overall quality of the program. These investments ensure students have access to the tools at the beginning of each course and support resources that ensure successful completion of their coursework.
2. **Enrollment Growth:** Enrollment is expected to scale to 158 students by 2030, following an initial build-up period.
3. **Central Service Costs:** As part of the university's Funds Flow model, all programs and colleges incur shared administrative and support service expenses.
4. **Facilities, Equipment, Supplies, and Materials:** Although no new equipment or facilities are required, the year 1 funds requested, \$37,100, are allocated primarily for contractual services, covering initial contractual needs and course (re)development costs leading to program modification and relaunch. In Years 2–5, costs remain consistent in purpose but adjust in scale. Contractual services range from \$27,050 in Year 2 to \$37,973 in Year 5, reflecting ongoing academic and operational support aligned with enrollment growth and inflation. The remaining budgeted amounts support recruitment, conferences, travel, and meals tied to faculty development and program promotion. These recurring costs ensure continued faculty development, program visibility, and operational quality after the initial launch year.
5. **Program Administration and Faculty/Staff Salaries:** Faculty compensation represents the most significant single expenditure and is central to the program's success. During year 1, the Department anticipates hiring or reallocating two faculty members by the program's second year to support and sustain the program. Faculty expenditures are accounted for at the department level and then billed individually to each academic program in which faculty teach, in alignment with established workload allocation practices. Teaching demand will continue to be strategically offset through the use of highly qualified part-time instructors, ensuring both cost efficiency and instructional quality. The hiring of additional full-time faculty will be reevaluated annually as part of the department's strategic planning and budgeting process.

Staff salaries are distributed across all academic programs of the Department. The department's Business Manager is already in place and providing operational oversight of the department and managing staff. A Procurement/Fiscal Analyst position is a replacement and expansion role, replacing the prior Admin Assistant role, with interviews currently underway to identify the next hire. The department created a new HR Manager role to strengthen support for faculty and staff; the selected candidate started in October 2025.

6. **Other:** The costs listed under "Other" reflect standard institutional allocations tied directly to enrollment and revenue. The Administrative & Support (A&S) allocation, which ranges from \$255,712 in Year 2 to \$460,441 in Year 5, represents a proportionate charge based on student enrollment. These funds cover university-level shared services that support the program, including student services, advising, IT infrastructure, compliance, and administrative overhead. The MUSC Investment allocation, set at 17% of program revenue, ensures reinvestment into institutional priorities such as strategic growth, innovation, and infrastructure across the College and University. This allocation ranges from \$136,102 in Year 2 to \$259,022 in Years 4 and 5, scaling with program revenue. Together, these costs represent non-discretionary institutional commitments required for program sustainability and alignment with MUSC financial practices.

Evaluation and Assessment

The Office of Institutional Effectiveness is a central university office that ensures that all academic programs conduct annual evaluations of student learning outcomes and uses results to make changes. The Director of OIE meets with Program Directors to develop the assessment plan with SLOs, measures used, and targets. The centralization of this assessment plan ensures accountability that all plans are completed each year. Every three years, the program is required to show how the results were used to make changes to potentially improve outcomes. This system helps MUSC engage in continuous quality improvement in our academic programs and also assures compliance with SACSCOC standards.

Programmatic assessments will be used for continuous quality improvement of the content in the curriculum. Faculty in the program will review results during an annual faculty retreat whose mission is to ensure program quality. In addition, the MUSC Student Satisfaction Survey (administered every other year) tracks graduating students' self-reported employment prospects (i.e., job in hand; not in hand but in progress; no job prospects at present) and reports these outcomes to program directors. Given the high demand for healthcare professionals and the cost of tracking employment following graduation, MUSC does not have a centralized job placement or tracking service.

The following summary outlines the program and student learning outcomes, assessment methods, and benchmarks for the modified Master of Health Administration. This framework ensures compliance with institutional expectations, CAHME accreditation criteria (required content domains not listed in this figure), and state-level program review standards.

Program Learning Outcomes (PLOs)	Aligned Student Learning Outcomes (SLOs)	Methods of Assessment
PLO1: Evaluate healthcare data, trends, delivery models, and environmental factors to inform strategic and operational decisions aimed at improving quality, access, and cost-effectiveness across the continuum of care.	SLO1: Interpret and analyze healthcare data sets and delivery models to support evidence-based decisions. SLO2: Apply systems and analytical thinking to evaluate healthcare trends and organizational performance. SLO3: Develop recommendations that improve quality, access, or cost-effectiveness across healthcare settings.	Direct and indirect assessments including signature competency-based assignments, applied improvement projects, and capstone evaluations. Benchmark: 80% of students will perform at Competent or above.
PLO2: Analyze and interpret financial, operational, quality, and safety data, including key performance indicators and evidence-based benchmarks, to support decision-making and continuous performance improvement.	SLO1: Interpret financial statements, budgets, and KPIs to inform administrative decisions. SLO2: Apply operations management principles to improve efficiency, quality, and safety. SLO3: Use benchmarking and performance metrics to support strategic and operational planning.	Direct and indirect assessments including signature competency-based assignments, applied improvement projects, and capstone evaluations. Benchmark: 80% of students will perform at Competent or above.
PLO3: Evaluate internal and external environmental factors, and the legal, ethical, economic, and regulatory dimensions that shape the strategic management and policy direction of healthcare organizations.	SLO1: Assess external and internal factors influencing healthcare organizations. SLO2: Apply legal, ethical, and regulatory frameworks to decision-making. SLO3: Evaluate the impact of economic and policy changes on healthcare management.	Direct and indirect assessments including signature competency-based assignments, applied improvement projects, and capstone evaluations. Benchmark: 80% of students will perform at Competent or above.
PLO4: Create innovative, evidence-based solutions and strategies to address organizational challenges, drive change management, and advance quality, access, and cost-effectiveness in healthcare delivery.	SLO1: Design and propose innovative, evidence-based solutions to healthcare challenges. SLO2: Apply change management frameworks to lead organizational transformation. SLO3: Evaluate outcomes of strategic initiatives using quality, access, and cost-effectiveness metrics.	Direct and indirect assessments including signature competency-based assignments, applied improvement projects, and capstone evaluations. Benchmark: 80% of students will perform at Competent or above.

Program Learning Outcomes (PLOs)	Aligned Student Learning Outcomes (SLOs)	Methods of Assessment
PLO5: Apply appropriate communication strategies based on communication goals and audience characteristics.	SLO1: Demonstrate effective communication in written, verbal, and visual presentation formats. SLO2: Tailor communication strategies to diverse audiences and organizational contexts. SLO3: Construct clear, evidence-based arguments to support administrative or clinical recommendations.	Direct and indirect assessments including signature competency-based assignments, applied improvement projects, and capstone evaluations. Benchmark: 80% of students will perform at Competent or above.
PLO6: Evaluate and apply emerging digital technologies to enhance healthcare delivery, inform data analysis and decision-making, and address associated ethical, organizational, and operational considerations.	SLO1: Identify key digital tools and emerging technologies shaping healthcare administration. SLO2: Assess opportunities and risks of AI, analytics, and digital innovations in healthcare delivery. SLO3: Discuss ethical, organizational, and operational implications of digital adoption.	Direct and indirect assessments including signature competency-based assignments, applied improvement projects, and capstone evaluations. Benchmark: 80% of students will perform at Competent or above.

Will any the proposed modification impact the way the program is evaluated and assessed? If yes, explain.

- ☒ Yes
☐ No

This assessment framework maps more directly to CAHME accreditation criteria and requirements.

Will the proposed modification affect or result in program-specific accreditation? If yes, explain; and, if the modification will result in the program seeking program-specific accreditation, provide the institution's plans to seek accreditation, including the expected timeline.

- ☐ Yes
☒ No

The program is already CAHME-accredited; the modifications will ensure that the program is best able to continue accreditation in excellent standing in the future. The modifications have been submitted to CAHME via a Substantive Change notification on Friday, September 5, 2025.

Will the proposed modification affect or lead to licensure or certification? If yes, identify the licensure or certification.

- ☐ Yes
☒ No

Explain how the program will prepare students for this licensure or certification.

If the program is an Educator Preparation Program, does the proposed certification area require national recognition from a Specialized Professional Association (SPA)? If yes, describe the institution's plans to seek national recognition, including the expected timeline.

- ☐ Yes
☒ No

Proposed Modified: Master of Health Administration (MHA)

Total Credit Hours Required: 49

MHA - Curriculum by Year					
Course Name	Credit Hours	Course Name	Credit Hours	Course Name	Credit Hours
YEAR 1					
Fall		Spring		Summer	
HAP 6XX Introduction to Healthcare Administration	1	HAP 7XX Managing Healthcare: Operations, Quality, and Projects	3	HAP 726 Financial Mgmt. for HC Org I	3
HAP 737 Organization Theory and Behavior	3	HAP 746 Strategic Management & Marketing	3	HAP 705 Health Economics	3
HAP 721 Health Care Delivery Systems	3	HAP 740 Human Resource Management	3	HAP 729 Financial Mgmt. for HC Org II	3
HAP 704 Health Policy	3	HAP 7XX Quantitative Methods and Evidence Based Decision Making in Healthcare	3	HAP 720 Epidemiology, Population Health, and Quality	3
Total Semester Hours	10	Total Semester Hours	12	Total Semester Hours	12
YEAR 2					
Fall		Spring			
HAP 735 Health Law & Risk Management	3	HAP 800 Healthcare Administration Practicum (*may be waived)	6		
HAP 7XX Digital Transformation in Healthcare	3				
HAP 7XX Healthcare Administration Capstone	3				
Total Semester Hours	9	Total Semester Hours	6		

Original 54 cr Executive (Hybrid) Curriculum

Year / Term	Course	Title	Credits
Year 1, Summer	HAP 726	Financial Mgmt for HC Org I	3
	HAP 721	Health Care Delivery Systems	3
	HAP 737	Organization Theory and	3
		Semester Total	9
Year 1, Fall	HAP 725	Statistical Analysis in Health	3
	HAP 738	Management & Health	3
	HAP 729	Financial Mgmt for HC Org II	3
		Semester Total	9
Year 1, Spring	HAP 744	Decision Analytics	3
	HAP 735	Health Law & Risk Management	3
	HAP 704	Health Policy	3
		Semester Total	9
Year 2, Summer	HAP 620	Healthcare Reimbursement Systems	3
	HAP 632	Quality Management of Health Care Services	3
	HAP 730	Healthcare Project Management	3
		Semester Total	9
Year 2, Fall	HAP 753	Seminar in Ethical Leadership	3
	HAP 740	Human Resource Management	3
	HAP 705	Health Economics	3
		Semester Total	9
Year 2, Spring	HAP 722	Health Behavior & Epidemiology	3
	HAP 746	Strategic Management & Marketing	3
	ELEC	1 Elective is Required	3
		Semester Total	9
		Curriculum Total	54

Original 67 cr Residential Curriculum

Year / Term	Course	Title	Credits
Year 1, Fall	HAP 737	Organization Theory and	3
	HAP 721	Health Care Delivery Systems	3
	HAP 725	Statistical Analysis in Health	3
	HAP 726	Financial Mgmt for HC Org I	3
	HAP 756	Executive Skills I	1
		Semester Total	13
Year 1, Spring	HAP 705	Health Economics	3
	HAP 729	Financial Mgmt for HC Org II	3
	HAP 730	Healthcare Project Management	3
	HAP 738	Management & Health	3
	HAP 632	Quality Management of Health Care Services	3
		Semester Total	15
Year 1, Summer	HAP 735	Health Law & Risk Management	3
	HAP 754	Summer Internship	10
		Semester Total	13
Year 2, Fall	HAP 620	Healthcare Reimbursement Systems	3
	HAP 704	Health Policy	3
	HAP 740	Human Resource Management	3
	HAP 753	Seminar in Ethical Leadership	3
	IP 711	IP Foundations & TeamSteps	1
	IP ###	IP Concentration Course of Choice	1
		Semester Total	14
Year 2, Spring	HAP 722	Health Behavior and Epidemiology	3
	HAP 744	Decision Analytics	3
	HAP 746	Strategic Management & Marketing	3
	ELEC	1 Elective is Required	3
		Semester Total	12
		Curriculum Total	67