

### UMC Human Resources and Executive Compensation Committee

Monday, November 10, 2025 - 2:00 p.m.

**Delta Point Building** 

Sapphire Conference Room - 1st Floor

Las Vegas, NV

### **AGENDA**

### **University Medical Center of Southern Nevada**

UMC GOVERNING BOARD
HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE
November 10, 2025 2:00 p.m.
901 Rancho Lane Las Vegas, Nevada
Delta Point Building, Sapphire Conference Room (1st Floor)

Notice is hereby given that a meeting of the UMC Governing Board Human Resources and Executive Compensation Committee has been called and will be held at the time and location indicated above, to consider the following matters:

This meeting has been properly noticed and posted online at University Medical Center of Southern Nevada's website http://www.umcsn.com and at Nevada Public Notice at <a href="https://notice.nv.gov/">https://notice.nv.gov/</a>, and at 901 Rancho Lane. Las Vegas, NV

- The main agenda is available on University Medical Center of Southern Nevada's website <a href="http://www.umcsn.com">http://www.umcsn.com</a>. For copies of agenda items and supporting back-up materials, please contact Stephanie Ceccarelli, Board Secretary, at (702) 765-7949. The Human Resources and Executive Compensation Committee may combine two or more agenda items for consideration.
- Items on the agenda may be taken out of order.
- The Human Resources and Executive Compensation Committee may remove an item from the agenda or delay discussion relating to an item at any time.
- Consent Agenda All matters in this sub-category are considered by the Human Resources and Executive Compensation Committee to be routine and may be acted upon in one motion. Most agenda items are phrased for a positive action. However, the Committee may take other actions such as hold, table, amend, etc.
- Consent Agenda items are routine and can be taken in one motion unless a Committee member requests that an item be taken separately. For all items left on the Consent Agenda, the action taken will be staff's recommendation as indicated on the item.
- Items taken separately from the Consent Agenda by Committee members at the meeting will be heard in order.

### **SECTION 1. OPENING CEREMONIES**

#### CALL TO ORDER

### 1. Public Comment

PUBLIC COMMENT. This is a period devoted to comments by the general public about items on *this* agenda. If you wish to speak to the Committee about items within its jurisdiction but not appearing on this agenda, you must wait until the "Comments by the General Public" period listed at the end of this agenda. Comments will be limited to three minutes. Please step up to the speaker's podium, clearly state your name and address and please *spell* your last name for the record. If any member of the Committee wishes to extend the length of a presentation, this will be done by the Chair, or the Committee by majority vote.

- 2. Approval of minutes of the regular meeting of the UMC Governing Board Human Resources and Executive Compensation Committee meeting on August 25, 2025. (For possible action)
- 3. Approval of Agenda. (For possible action)

### **SECTION 2. BUSINESS ITEMS**

- 4. Receive an educational update on 2026 employee health insurance benefits and practices; and direct staff accordingly. (For possible action)
- 5. Review and discuss the FY26 Turnovers & Hires report; and take action as deemed appropriate. (For possible action)
- 6. Review and discuss the CHRO Updates; and take action as deemed appropriate. (For possible action)
- 7. Review and discuss the Physician/Non-Physician Provider Traditional Compensation and Benefits Plan; and recommend for approval by the UMC Governing Board; and take action as deemed appropriate. (For possible action)

### **SECTION 3. EMERGING ISSUES**

8. Identify emerging issues to be addressed by staff or by the UMC Governing Board Human Resources and Executive Compensation Committee at future meetings; and direct staff accordingly. (For possible action)

### **COMMENTS BY THE GENERAL PUBLIC**

A period devoted to comments by the general public about matters relevant to the Committee's jurisdiction will be held. No action may be taken on a matter not listed on the posted agenda. Comments will be limited to three minutes. Please step up to the speaker's podium, clearly state your name and address and please **spell** your last name for the record.

### All comments by speakers should be relevant to the Committee's action and jurisdiction.

UMC ADMINISTRATION KEEPS THE OFFICIAL RECORD OF ALL PROCEEDINGS OF UMC GOVERNING BOARD HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE. IN ORDER TO MAINTAIN A COMPLETE AND ACCURATE RECORD OF ALL PROCEEDINGS, ANY PHOTOGRAPH, MAP, CHART, OR ANY OTHER DOCUMENT USED IN ANY PRESENTATION TO THE BOARD SHOULD BE SUBMITTED TO UMC ADMINISTRATION. IF MATERIALS ARE TO BE DISTRIBUTED TO THE COMMITTEE, PLEASE PROVIDE SUFFICIENT COPIES FOR DISTRIBUTION TO UMC ADMINISTRATION AND LEGAL COUNSEL.

THE COMMITTEE MEETING ROOM IS ACCESSIBLE TO INDIVIDUALS WITH DISABILITIES. WITH TWENTY-FOUR (24) HOUR ADVANCE REQUEST, A SIGN LANGUAGE INTERPRETER MAY BE MADE AVAILABLE (PHONE: 765-7949).

### University Medical Center of Southern Nevada Governing Board Human Resources and Executive Compensation Committee Monday, August 25, 2025

Emerald Conference Room Delta Point Building, 1st Floor 901 Rancho Lane Las Vegas, Clark County, Nevada Monday, August 25, 2025 2:00 p.m.

### **CALL TO ORDER**

The University Medical Center Governing Board Human Resources and Executive Compensation Committee met at the time and location listed above. The meeting was called to order at the hour of 2:00 p.m. by Chair Laura Lopez-Hobbs and the following members were present, which constituted a quorum of the members thereof:

### Committee Members:

Laura Lopez-Hobbs Renee Franklin Dr. Donald Mackay Bill Noonan (WebEx)

### Absent:

None

### Others Present:

Mason Van Houweling, Chief Executive Officer Tony Marinello, Chief Operating Officer Jennifer Wakem, Chief Financial Officer Deb Fox, Chief Nursing Officer Ricky Russell, Chief Human Resources Officer Rosalind Bob, Director of Human Resources Susan Pitz, General Counsel Stephanie Ceccarelli, Board Secretary

### **SECTION 1. OPENING CEREMONIES**

### ITEM NO. 1 PUBLIC COMMENT

Chair Lopez-Hobbs asked if there were any persons present in the audience wishing to be heard on the item listed on this agenda.

None present.

## ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Human Resources and Executive Compensation meeting on July 14, 2025. (For possible action)

### FINAL ACTION:

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A motion was made by Member Mackay that the minutes be approved as recommended. Motion carried by unanimous vote.

### ITEM NO. 3 Approval of Agenda (For possible action)

### FINAL ACTION:

A motion was made by Member Franklin that the agenda be approved as recommended. Motion carried by unanimous vote.

### **SECTION 2. BUSINESS ITEMS**

ITEM NO. 4 Review and discuss changes to various HR policies and procedures; and make a recommendation for approval by the UMC Governing Board; and take action as deemed appropriate. (For possible action)

### DOCUMENTS SUBMITTED:

- Various Policies and Procedures

### **DISCUSSION**:

Ricky Russell, Chief Human Resources Officer, provided a high-level overview of changes to the Human Resources Policies and Procedures. The following changes will be effective on or around September 1<sup>st</sup> 2025:

- 1. Recruitment and Selection Program
  - Modified language to require proof of licensure/certification within 7 days of expiration
- 2. Position Classification and Compensation Plans
  - Modified language to require proof of licensure/certification within 7 days
- 3. Performance Evaluation Program
  - Added language to require sign-off of review within 30 days
- 4. Disciplinary Hearing Process
  - Clarified language around time limits, and added limits to receipt of monetary awards

There was a brief continued discussion to clarify the verbiage related to the monetary award and whether it considered back pay or an award.

### FINAL ACTION:

A motion was made by Member Franklin that the amendments to the Policies and Procedures be approved as recommended and recommend approval to the UMC Governing Board. Motion carried by unanimous vote.

ITEM NO. 5 Discuss, score, and approve the Human Resources and Executive Compensation Committee Organizational Performance Goals for FY25; and make a recommendation for approval by the UMC Governing Board; and take action as deemed appropriate. (For possible action)

### DOCUMENTS SUBMITTED:

PowerPoint – FY25 HR Performance Goals

### **DISCUSSION**:

Goal 1: In conjunction with the Employee Experience department, design and implement a new employee onboarding experience, which includes a new employee onboarding guide, revision of the existing new hire orientation, and revision of the existing 1st year check-in survey process.

This goal was met. Mr. Russell commented on the onboarding guide that has been established and the orientation changes that were implemented.

Goal 2: By February 1, 2025, design a plan to automate internal transfers/onboarding using NeoGov, SAP and other systems, with implementation by June 30, 2025.

This goal was met. As of June, all internal classification transfers are now processed through this system.

Goal 3: For FY25 reduce per-diem turnover from the FY24 All Employee (48.26%) & RN (40.72%) categories by at least 2% each.

This goal was not achieved. Mr. Russell reviewed the statistics for both metrics, which displayed the impacts on the results, and discussed the challenges in improving the statistics. There was continued discussion regarding the turnover related to per diem employees.

Goal 4: From September 1, 2024 through June 30, 2025, no more than 10% of the total eligible Annual Reviews due will be issued to an employee more than 60 days after due date.

This goal was met. Of the 4,600 employees, only 458 or 9.96% of the annual reviews were past due for more than 60 days, which is less than the target. Mr. Russell reminded the committee that the process of calculations changed multiple times during the year.

Goal 5: With the support of clinical education and the DEI Committee implement the distribution of cultural competence materials and applicable resources during NHO and to P/D hires.

This goal was met. New hire materials were updated to include materials in the orientation packets for both full-time and per-diem employees.

Mr. Russell stated that 16% of the allotted 20% of the goal related to the HR Committee was achieved.

### FINAL ACTION:

A motion was made by Member Franklin to award 16% of the 20% achievement of the goals met by Human Resources and Executive Compensation and

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recommend approval by the UMC Governing Board. Motion passed with a unanimous vote.

## ITEM NO. 6 Discuss the overall Organizational Performance Goals Outcomes for FY25; and make a recommendation for approval by the UMC Governing Board; and take action as deemed appropriate. (For possible action)

### **DOCUMENTS SUBMITTED:**

PowerPoint

### **DISCUSSION**:

The combined committee goals were submitted to the HR Committee and reviewed. The combined total percentage for the achievement from all committees was 93.25%.

The Committee agreed that this was a positive outcome, highlighting the accomplishments of the entire hospital staff. A brief discussion followed about specific metrics that will be emphasized throughout the year.

### FINAL ACTION:

A motion was made by Member Franklin to award 93.25% achievement of the organizational goals and recommend approval by the UMC Governing Board. Motion passed with a unanimous vote.

ITEM NO. 7 Review and discuss the CEO bonus and merit increase for FY25; and make a recommendation for approval by the UMC Governing Board; and subsequent ratification by the Board of Hospital Trustees for the University Medical Center of Southern Nevada; and take action as deemed appropriate. (For possible action)

### **DOCUMENTS SUBMITTED:**

PowerPoint

### **DISCUSSION:**

There was a distinction made between the CEO bonus and achievement of the aforementioned goals.

Mr. Van Houweling reviewed the hospital's year-end successes and accomplishments, including the legislative session, becoming a GME sponsoring institution, construction, and the Revitalize project, as well as the addition of employed doctors. He highlighted achievements in the journey toward Magnet and Pathways to Excellence, along with the addition of DNV Accreditation.

Highlights continued by reviewing achievements from each department throughout the year, including hospital Operations, Quality, Nursing, Finance, Human Resources, Information Technology, and Experience departments.

Member Franklin commented on the importance of the Lean Six Sigma program and the culture change it can have on the organization. At this time, Mr. Russell introduced HR team members.

Mr. Van Houweling also mentioned that UMC was awarded Best of Las Vegas Gold, Silver, and bronze medals in several categories.

Mr. Russell outlined the potential merit increase percentages and the fiscal impact on the base salary. He shared that the typical increase in FY25 for non-management was 6.6%, which included 2.6% COLA, 1.5% salary adjustment, and average merit of 2.5%. There was discussion regarding the average increase received by all employees.

Mr. Russell shared the total CEO compensation based on market data from the Mercer Report. The 25% percentile for CEO base salary is \$1.4 million. Total cash is approximately \$1.2 million. The current salary for the UMC CEO is approximately \$200K below the 25<sup>th</sup> percentile.

The Committee continued with a lengthy discussion regarding the competition within in the labor market and providing balance within the market, as a county entity.

Chair Lopez-Hobbs felt 7% was a reasonable award.

Member Franklin inquired about the management increase and the Mercer report for other organizations. Mr. Russell replied that the management increase was roughly 6%. He did not have data on the leadership merit pool, but he mentioned that Mercer uses 4% to adjust the scale for executives and 2.5% for benefits, which aligns with industry standards. There was extensive discussion regarding the Mercer data report and the process by which the County receives benefits.

Member Franklin was in agreement with the 7% award.

Member Mackay was in agreement with the 7% award.

Member Noonan felt 8% would be appropriate but agrees with the 7% total.

After lengthy discussion, the Committee agreed to an award of the percentage equal to \$60K.

### **FINAL ACTION**:

A motion was made by Member Noonan to recommend the UMC Governing Board award a CEO merit increase equal to the percentage \$60K of the CEO's base salary and recommend ratification to the UMC Board of Hospital Trustees. Motion carried by majority vote.

### ITEM NO. 8 Review and discuss the Human Resources and Executive Compensation Committee's proposed Organizational Goals for FY26; and make a

### recommendation for approval by the UMC Governing Board; and take action as deemed appropriate. (For possible action)

### **DOCUMENTS SUBMITTED:**

- FY26 Preliminary Goals

### DISCUSSION:

Mr. Russell reviewed the following proposed goals for FY26:

- **Goal 1:** Reduce 1st year voluntary turnover (FT/PT/PD) by at least 1.0% (target ≤ 17.92%).
- **Goal 2:** Research and recommend to the UMC Executive Team the implementation of a grievance tracking system by January 1, 2026.
- **Goal 3:** Utilizing the Lean Six Sigma trained UMC employees, identify and implement process improvement initiatives that lead to at least \$250,000 in savings to the organization in FY26.
- **Goal 4:** No later than March 1, 2026, redesign the existing Leadership Bootcamp curriculum to include at least 50% professional development content, and lead the first revised curriculum no later than June 30, 2026.
- **Goal 5:** Offer at least one professional development opportunity each quarter of FY26 for all employees to help enhance their soft skills and prepare them for potential other UMC opportunities.

### **FINAL ACTION:**

A motion was made by Member Franklin to approve the HR goals for FY26 and recommend to the Governing Board for approval as recommended. Motion passed with a unanimous vote.

## ITEM NO. 9 Review and discuss the overall FY26 Organizational Performance Goals, make a recommendation for approval by the UMC Governing Board; and take action as deemed appropriate. (For possible action)

### **DOCUMENTS SUBMITTED:**

PowerPoint

### **DISCUSSION:**

The Committee briefly reviewed and approved all of the Organizational Goals for FY26 received from all committees.

### **FINAL ACTION**:

A motion was made by Member Franklin to approve overall UMC Organizational Goals for FY26 and recommend to the Governing Board for approval. Motion passed with a unanimous vote.

### **SECTION 3. EMERGING ISSUES**

ITEM NO. 10 Identify emerging issues to be addressed by staff or by the UMC Governing Board Human Resources and Executive Compensation Committee at future meetings; and direct staff accordingly. (For possible action)

Discussion:

Review and receive market data of M-Plan structure and percentages.

### **COMMENTS BY THE GENERAL PUBLIC:**

At this time, Chair Lopez-Hobbs asked if there were any persons present in the audience wishing to be heard on any items not listed on the posted agenda.

SPEAKERS(S): None

There being no further business to come before the Committee at this time, at the time of 3:38 p.m. Chair Lopez-Hobbs adjourned the meeting.

Approved:

Minutes Prepared by: Stephanie Ceccarelli

# UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA GOVERNING BOARD HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE AGENDA ITEM

Issue:	Educational Update – 2026 Employee Health Insurance Benefits	Back-up:
Petitioner:	Kendrick Russell, CHRO	Clerk Ref.#
	Resources and Executive Compensation Committee will receive an edu ployee health insurance benefits and practices; and direct staff ac	-

### **FISCAL IMPACT:**

None

### **BACKGROUND:**

Will review the 2026 employee health insurance benefit offerings to UMC employees. This discussion will include a review of the premiums paid by employees and the company.

Cleared for Agenda November 10, 2025



# The Highest Level of Care in Nevada



# Human Resources and Executive Compensation Committee

Educational Update: 2026 EE Health Benefits

November 2025

### Health Plan Info



- Plans are designed and managed by Clark County
- Plans are available to benefits eligible employees within all of the Clark County entities
- Plans are self-funded
- UMR (a division of United Healthcare) is the TPA
- UMC has a seat on the CCSF Group Insurance Executive Board

# Health Coverage



	PPO	EPO
Deductible	\$0 (Tier 1) \$500/\$1,000 (Tier 2) \$1,500/\$3,000 (Tier 3)	\$0
Max out of pocket	\$4,000/\$8,000 (Tier 1&2) \$11,500/\$23,000 (Tier 3) RX = \$2K/\$4K	\$4,000 EE \$8,000 Family RX = \$2K/\$4K
Primary Care Visit	\$10 (Tier1) \$25(Tier2) 40% coinsurance (Tier3)	\$10 (Tier1) \$30(Tier2) Not covered (Tier 3)
Urgent Care	\$20 (Tier 1) 20% coinsurance (Tier 2) 40% coinsurance (Tier 3)	\$20 (AII)

## Health Coverage



	PPO	EPO
ER	\$100 +20% coinsurance (Tier 1) \$350 +20% coinsurance (Tier 2) \$100 +20% coinsurance (Tier 3)	\$500 (all)
Behavioral Health	\$10 (Tier 1) \$25 (Tier 2) \$300 (Tier 3)	\$10 (Tier 1) \$30 (Tier 2) Not covered (Tier 3)
RX	\$12 – Retail / \$24 Mail Order (generic) 20% coinsurance (preferred brand) 30% coinsurance (specialty)	\$25 – Retail / \$62.50 mail order (generic) \$75 – Retail / \$187.50 mail order (preferred) 30% coinsurance (specialty)
Hospital Stay	10% coinsurance (Tier 1) \$100+20% coinsurance (Tier 2) \$750+40% coinsurance (Tier 3)	No charge (Tier 1) \$500 per day+\$2,500 (Tier 2) Not covered (Tier 3)

## 2026 Rates



			PPO		
	EE Cost Per Month	ER Cost Per Month	Total	2025 EE #'s	Annual UMC Cost*
EE Only	\$48.20	\$575.36	\$623.56	1169	\$8,071,150
EE + Child	\$283.04	\$858.47	\$1,141.51	445	\$4,584,229
EE + Family	\$441.23	\$1,189.16	\$1,630.39	497	\$7,092,150
EE + Spouse	\$300.44 \$866.41 \$1,166.85		\$1,166.85	235	\$2,499,676
				2,346	\$22,247,205

<sup>\*</sup> Annual costs are estimates based on a snapshot in time

## 2026 Rates



			ЕРО		
	EE Cost Per Month	ER Cost Per Month	Total	2025 EE #'s	Annual UMC Cost*
EE Only	\$51.74	\$669.48	\$721.22	555	\$4,458,736
EE + Child	\$320.25	\$1,000.36	\$1,320.61	258	\$3,097,114
EE + Family	\$490.65	\$1,409.26	\$1,899.91	313	\$5,293,180
EE + Spouse	\$341.10	\$1,009.16	\$1,350.26	105	\$1,271,541
				1,231	\$14,120,571

<sup>\*</sup> Annual costs are estimates based on a snapshot in time

# UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA GOVERNING BOARD HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE AGENDA ITEM

Issue:	FY25 Close Out - UMC Turnovers & Hires update	Back-up:
Petitioner:	Kendrick Russell, CHRO	Clerk Ref. #
	ation:  Resources and Executive Compensation Committee will review and dia Hires report; and take action as deemed appropriate. (For possible ac	

### **FISCAL IMPACT:**

None

### **BACKGROUND:**

UMC monitors turnovers and hires monthly, and reports the data to the hospital leadership team. This data is reported to the Human Resources and Executive Compensation Committee at least once per quarter.

Cleared for Agenda November 10, 2025

### FY2026

	112020													
UNIVERSITY MEDICAL SERVES		July '25	Aug '25	Sept '25	Oct '25	Nov '25	Dec '25	Jan '26	Feb '26	Mar '26	Apr '26	May '26	June '26	FY2026 TOTALS
TERMINATIONS / TURNOVER														
	FT/PT	44	33	42										119
	Per-Diem	44	24	25										93
	Total All Terms	88	57	67	0	0	0	0	0	0	0	0	0	212
All Employee	Voluntary Turnover FT/PT	0.85%	0.45%	0.48%										1.78%
	YOY Comparison	0.86%	0.67%	0.86%	0.75%	1.12%	0.39%	0.55%	0.66%	0.53%	0.39%	0.58%	0.95%	8.31%
	1st Year Voluntary T/O - (FT/PT/PD)	15.00%	16.67%	15.09%										15.63%
	RN	11	9	4										24
	Voluntary Turnover	0.61%	0.17%	0.26%										
Carve Outs	APP	0	2	0										2
FT/PT	Voluntary Turnover	0.00%	2.06%	0.00%										2.06%
	Physician	0	0	1										0.0577
	Voluntary Turnover	0%	0%	0.48%										0.0048
														,

Turnover:

Voluntary Turnover: Does not include retirement, death, LT end, VOL in Leiu of term, or PRN

RN Turnover & Data: Includes RN bedside acute care, RN ambulatory, Charge RN | - does not include case management, nurse navigator, management, APPs, LPNs, educators, nurse auditor, etc.

					TER	RM TYPI	E				
All Employee FT/PT	Voluntary	70.00%	51.5%	42.0%							55%
	Involuntary	11.60%	21.2%	19.0%							17%
	Fail Prob	4.70%	0.0%	2.0%							2%
	Retirement	14.00%	24.2%	2.0%							13%
	Other (layoff/etc)	0.00%	3.0%	35.0%							13%

### FY2026

						1 1 2	2020							
		July '25	Aug '25	Sept '25	Oct '25	Nov '25	Dec '25	Jan '26	Feb '26	Mar '26	Apr '26	May '26	June '26	FY2026 TOTALS
HIRES														
	FT & PT	34	29	39										102
All Employee	PRN/PD	15	22	26										63
(Includes RN)	Total All Hires	49	51	65	0	0	0	0	0	0	0	0	0	165
	Net Hire Ratio	0.61%	0.89%	0.97%										2.47%
	FT & PT	9	4	19										32
RN Only	PRN/PD	3	1	3										7
	Total RN Hires	12	5	22	0	0	0	0	0	0	0	0	0	39
					Emplo	yee Co	unts							
All EE			RN (Included in all EE data)			APP (Included in all EE data)			Employed Physician (Included in all EE data)					
			Total EEs		To	otal RNs		Tot	al APPS				Tota	l Physicians
<b>PT/FT</b> 3769			FT/PT 1141			<b>FT/PT</b> 97			FT/PT				207	
<b>P/D</b> 786			P/D	2	35	P/D	2	24		P/D	•		53	
Total 4555 1376			376		1	21					260			

	July	A	August	September	October	November	December
Total # left 1/in 1 year		21	14	16			
Total # hired in month		140	84	106			
Tunover %		15.00%	16.67%	15.09%	#DIV/0!	#DIV/0!	#DIV/0!

# UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA GOVERNING BOARD HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE AGENDA ITEM

Petitioner: Ricky Russell, CHRO  Recommendation:  The Human Resources and Executive Compensation Committee review and discuss the CHRO Updates; and take action as deemed appropriate. (For possible action)	Issue:	CHRO Update	Back-up:						
The Human Resources and Executive Compensation Committee review and discuss the CHRO	Petitioner:	Ricky Russell, CHRO	Clerk Ref. #						
	The Human	The Human Resources and Executive Compensation Committee review and discuss the CHRO							

**FISCAL IMPACT:** 

None

**BACKGROUND:** 

CHRO Updates

Cleared for Agenda November 10, 2025

## CHRO UPDATES



- -FY26 Org Goals HR Status Update
- New E/LR Analyst
- -CornerStone Succession Planning Implementation
- -Misc.

# UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA GOVERNING BOARD HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE AGENDA ITEM

Issue:	Revise the Physician & Non-Physician Provider Traditional Compensation and Benefits Plan	Back-up:
Petitioner:	Kendrick Russell, CHRO	Clerk Ref. #

### **Recommendation:**

That the Human Resources and Executive Compensation Committee review and discuss the revisions of the Physician & Non-Physician Provider Traditional Compensation and Benefits Plan, which includes updating appendix 2 pursuant to an FMV for Radiology, and minor revisions to other existing compensation plan language, and make a recommendation for approval by the UMC Governing Board; and take action as deemed appropriate. (For possible action)

#### **FISCAL IMPACT:**

Per Physician "Not to Exceed Increase amount"					
	Core Faculty Faculty		Non-Academic		
Program Director	\$ 59,321	n/a	n/a		
Associate Program Director	\$ 137,569	n/a	n/a		
Diagnostic Radiologist	\$ 155,639	\$ 183,448	\$ 94,07		
Interventional Radiologist	\$ 155,021	\$ 155,021	\$ 50,53		
NeuroInterventional Radiologist	\$ 114,201	\$ 114,201	\$ 85,33		
Night Differential (\$50/hr.)					
three 12-hour shifts per night	\$ 657,000				
APP	n/a	n/a	\$ 48,255		

### **BACKGROUND:**

The substantive changes to this Compensation Plan are:

- 1. Revised the Work Schedules language on page 2 to reflect an average of 15 shifts per month.
- 2. Revised Appendix 2 (page 9) pursuant to an FMV that was conducted for Radiology Provider classifications.
  - Modified base salary ranges for all classifications
  - Created designations for Core Faculty and Faculty to support the Radiology Residency Program
  - Added night shift differential
- 3. We anticipate the revisions to be effective on January 1, 2026, and will cover existing and future employees within the identified classifications.

Cleared for Agenda November 10, 2025

### 2025

PHYSICIAN AND NON-PHYSICIAN PROVIDER TRADITIONAL COMPENSATION AND BENEFITS PLAN



### UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA

# PHYSICIAN AND NON-PHYSICIAN PROVIDER TRADITIONAL COMPENSATION AND BENEFITS PLAN

Revision Effective Date: January 1, 2026
Original Implementation Date: July 1, 2023

Mason Van Houweling - Chief Executive Officer

UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA ("UMC")
PHYSICIAN AND NON-PHYSICIAN PROVIDER TRADITIONAL COMPENSATION AND BENEFITS
PLAN (the "Compensation Plan")

### Compensation Plan and Employees Covered

This Compensation Plan identifies the compensation and benefits structure for Physician and Non-Physician provider employees in the following classifications:

Medical Director, Anesthesiologist	Medical Director, Radiologist
Anesthesiologist - Obstetric, General/OR, Pediatric, CVT, Trauma	Certified Registered Nurse     Anesthetists (CRNA)
Radiologist – Diagnostic,     Interventional, Neurointerventional	Radiology APP
<ul> <li>Medical Director, General Medicine Hospitalist</li> <li>General Medicine Hospitalist</li> </ul>	Hospitalist APP
<ul><li>Medical Director, Emergency Physician</li><li>Emergency Physician</li></ul>	

Such employees will be referred to as "employee" or "employees" in this document. This document replaces all previous communications regarding Physician and Mid-Level compensation and benefits under an existing compensation model or an employee's offer of employment letter; provided however, the terms and conditions of the employee's at-will employment agreement, if any, shall control in the event of a conflict between the two documents.

University Medical Center retains the rights to add, modify, or eliminate any compensation or benefit contained within this plan document with the final approval of the UMC Governing Board and/or in accordance with the terms and conditions of the employee's contract for employment.

### Fair Labor Standards Act (FLSA) Exemption:

Employees covered by this plan document are not authorized overtime compensation under the FLSA due to their professional exemption.

### **At-Will Employment:**

All employees covered by this plan document are considered At-Will and will serve at the pleasure of the Chief Executive Officer.

### **Voluntary Resignation:**

All employees covered by this plan document are encouraged to provide a minimum of sixty (60) days notice of a voluntary resignation.

### Compensation and Benefits

### Compensation:

During the term of employment, Physicians and Non-Physician Providers shall be eligible for a compensation package at a rate consistent with the pay ranges listed in the Appendices, as may be amended from time to time. The Appendices further sets forth a compensation package that will not exceed the 75<sup>th</sup> percentile (or 90<sup>th</sup> percentile when factors such as shortages or otherwise hard-to-fill positions justify) based upon national and regional physician and midlevel compensation survey benchmarks (e.g., Sullivan Cotter, MGMA).

Unless modified by the provisions of this Compensation Plan and/or at-will employment agreement, employees will be granted the same benefits provided through the Human Resources Policies and Procedures.

The employee's base salary shall be re-evaluated bi-annually (i.e., every other year), consistent with the methodology set forth above.

The CEO (or designee) may authorize bonuses (e.g., sign-on, relocation, etc.), subject to existing UMC Human Resources Policies and Procedures, and provided it is consistent with fair market value.

### **Work Schedules:**

All full & part-time Physicians and Non-Physician Providers are salaried, exempt employees, while per-diem are hourly, non-exempt employees. Work schedules are determined based on a designated Full Time Equivalent (FTE) status. Employees designated as less than a 1.0 FTE are eligible for salary and benefits prorated based on FTE status. Employees are expected to be available to work their full, designated FTE status.

Unless otherwise set forth on the applicable service line Appendix, Employee's work schedules will be set by the Practice Plan Administrator or designee or as set forth in any at-will employment agreement or signed offer letter. Except as otherwise set forth herein, it is anticipated that full-time employees will work a minimum of fifteen (15) shifts per month, while part-time will work a minimum of seven (7) shifts per month. Notwithstanding the minimum shift requirement, it is understood that based on the length of a calendar month, and service line specific scheduling requirements, the fifteen (15) shift requirement is an approximate amount and may be spread over a two-month period (or as much as five (5) pay periods) and the same will not violate the requirements under this section.

### Extra Shift/Hours Compensation:

In the event an employee works in excess of their regular and on-call shifts he or she shall be entitled to the additional shift compensation set forth in the Appendices. Additionally, in the event an employee is required to stay over a scheduled shift more than two (2) hours, the employee will receive additional hourly compensation consistent with their regular hourly rate of compensation for hours above and beyond the scheduled shifts. *Example:* Employee works 12.5 hours in a 10-hour scheduled shift will entitle such employee to two and one half hours of additional pay at the next regularly scheduled pay period.

With the exception of per-diem status employees, any excess time less than the two-hours over the scheduled shift does not entitle the employee to any additional hourly compensation.

### On-Call Coverage:

Physicians and Non-Physician Providers, who provide on-call coverage, may receive additional shift compensation at the rates set forth in the Appendices, for on-call coverage over and above a pre-determined amount, as set forth by the Medical Director, or in the employee's offer of employment letter or At-Will contract for employment. An employee who is on unrestricted call, who is called to return to the facility to perform work, will receive callback pay consistent with the rates set forth in the Appendices.

### **Annual Evaluations:**

Employee performance will be evaluated on an annual basis. The annual evaluation cycle shall be based on fiscal year (July 1 - June 30). All Compensation Plan employees shall have a common review date of September 1<sup>st</sup> unless otherwise established by the CEO. Employees under this Compensation Plan are not subject to merit or cost of living increases as their compensation is subject to bi-annual (i.e., every other year) fair market value reviews consistent with the terms of this Compensation Plan and their employment agreement.

### Consolidated Annual Leave (CAL) / Administrative Leave Days (ALDs):

The Chief Executive Officer (or designee) shall determine if a Physician Provider classification covered by this Compensation & Benefits Plan will:

- 1. Accrue CAL in accordance with the hospital's standard human resources policies & procedures; or,
- 2. Participate in the ALD program as defined below.

### **Physicians**

Physician Providers in a classification designated to participate in the ALD program will not accrue CAL as set forth in the hospital's Human Resources Policies and Procedures. Instead, each part-time or full-time Physician Provider under this Compensation Plan designated as such shall receive Administrative Leave Days (ALDs).

Appropriate use of ALDs include sick days, and leave of absences. ALDs do not roll over year to year, may not be converted to compensation, transferred to other ineligible classifications or statuses, nor are they paid out upon separation of employment. Requests to use ALDs shall be submitted to the Medical Director (or designee) over the service line.

ALDs will be awarded on a pro-rated basis upon the first year of hire. Thereafter, the employee will receive their allotment of ALDs each January 1st. Eligible employee's under this Compensation Plan will receive ALDs as follows:

Employment Status*	# Regularly scheduled shifts per month	# of ALDs
Part-Time	Up to 14	7
	15-19	15
Full-Time	Up to 19	15
	20+	30

<sup>\*</sup> an Employee's employment status is determined by UMC Human Resources and is set forth in the applicable offer letter/contract of employment.

An employee's time-off may differ in accordance with their at-will employment agreement. Physicians accruing CAL upon final approval and implementation of this September 1, 2023 Compensation Plan will retain any accrued CAL time and will be required to exhaust such time prior to the use of any ALDs. CAL accrued prior to implementation of this September 1, 2023 Compensation Plan may not be converted to compensation, nor is it paid out upon separation of employment.

### Non-Physician Providers

Full & part-time Non-Physician Providers (e.g., CRNAs) under this Compensation Plan will continue to accrue and use CAL consistent with the hospital's Human Resources Policies and Procedures.

### Extended Illness Bank (EIB):

Eligible employees under this Compensation Plan will accrue Extended Illness Bank (EIN) as set forth in hospital's Human Resources Policies and Procedures. The rules governing the use of EIB leave time shall be consistent with those set forth by Human Resource Policies and Procedures.

### Miscellaneous Leaves:

Miscellaneous Leaves, such as jury/court duty, military leave, bereavement leave, family leave, etc., are administered in accordance with Human Resources Policies and Procedures.

### Group Insurance:

UMC provides medical, dental, and life insurance to all eligible employees covered by this plan. To be eligible for group insurance, an employee must occupy a regular budgeted position and work the required hours to meet the necessary qualifying periods associated with the insurance program.

Employees will have deducted each pay period an approved amount from their compensation for employee insurance, or other elected coverages. Amounts are determined by UMC and approved by the UMC Governing Board. Rules governing the application and administration of insurance benefits shall be consistent with those set forth by Human Resource Policies and Procedures.

### Retirement:

Employees are covered by the Nevada Public Employees Retirement System. UMC pays the employee's portion of the retirement contribution under the employer-pay contribution plan in the manner provided for by NRS Chapter 286. Any increases in the percentage rate of the retirement contribution above the rate set forth in NRS 286.421 on May 19, 1975, shall be borne equally by UMC and the employee in the manner provided by NRS 286.421. Any decrease in the percentage rate of the retirement contribution will result in a corresponding increase to each employee's base pay equal to one-half (1/2) of the decrease. Any such increase in pay will be effective from the date the decrease in the percentage rate of the retirement contribution becomes effective. Retirement contribution does not include any payment for the purchase of previous credit service on behalf of any employee.

### Continuing Medical Education (CME):

UMC will pay a \$2,500 CME stipend (Stipend), less appropriate withholdings each calendar year in January, for a qualified employee upon the employee's execution of UMC's CME Stipend Attestation form. The Stipend is available to a UMC employed licensed independent provider including, but not limited to, physician, nurse practitioner, physician assistant, CRNA, and dentist. At its sole discretion, UMC may identify other independent providers that qualify for the Stipend. Qualified employees may also request up to 40 hours of paid release time each calendar year to attend CME related activities. Approval of such time is at the sole discretion of UMC leadership.

All training, travel, and lodging must be pre-approved by the Chief Operating Officer, Medical Director, and such other person(s) as may be required by the COO and Medical Director pursuant to the hospital's training and travel policy. In the event an employee is on leave or FMLA, the employee is not eligible to take CME release time.

### Conflict of Interest:

Physicians are expected to comply with applicable Medicare and Medicaid and other applicable federal, state, and/or local laws and regulations, as-well-as, hospital policies and procedures and Medical and Dental Staff Bylaws. In so doing, it is emphasized that each employee must refrain from using his/her position as a UMC employee to secure personal gain and/or endorse any particular product or service. This includes seeking or accepting additional employment or ownership in a business outside UMC that represents a conflict of interest as defined in the Ethical Standards Policy.

The referral of patients to individuals or practices which compete with or do not support UMC is considered a conflict of interest. However, it is understood that patients have the right to choose where to be referred upon full disclosure by the attending physician of all relevant information. All referrals must go through the UMC Referral Office where they will be processed accordingly.

All other provisions of the conflict of interest policy shall be as defined and described in the Human Resources Policy and Procedures Manual titled Ethical Standards and the UMC Medical and Dental Staff Bylaws.

### Professional Standards:

Quality and safe patient care and the highest professional standards are the major goals of UMC and its facilities. To that end, UMC agrees to make every reasonable effort to provide a work environment that is conducive to allowing employees to maintain a professional standard of quality, safe patient care, and patient confidentiality. Employees shall be required to conduct themselves in a professional manner at all times.

UMC is a teaching facility. To that extent, physician employees may be required to supervise or cosign medical records for mid-level providers or residents who are in a recognized residency program, such as the UNLV School of Medicine Residency Program.

UMC shall provide interpretive services in designated exam rooms. Physician employees are required to use the interpretive services provided through UMC.

No Physician employee shall unreasonably and without good cause fail to provide care to patients. Any patient complaint received in writing shall be administered pursuant to UMC Administrative Policy, as modified from time to time. The employee shall be required to meet with the Patient Advocate and/or the Medical Director so that a response, if any, may be prepared. The affected employee shall receive a copy of any written response. If any discipline is administered, just cause standards and the appropriate sections of the Human Resources Policies and Procedures Manual shall apply.

All Physicians will follow the UMC Code of Conduct for Corporate Compliance. This includes completing a Medicare Enrollment Application – Reassignment of Medicare Benefits (CMS-855R) form.

UMC is an equal opportunity employer and will not tolerate discrimination on the basis of race, color, religion, sex, national origin, age, disability, sexual orientation, gender identity or expression, and/or genetic information in employment. In accordance with state and federal laws, the UMC Governing Board is committed to an Equal Opportunity, Affirmative Action and Sexual Harassment Policy to prohibit unlawful discrimination.

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Pursuant to Nevada Revised Statutes Chapter 41, UMC will indemnify an employee whose acts or omissions are within the course and scope of their employment and will thereafter continue to cover (without cost to the employee) the employee under the hospital's self-funded insurance policy. As such, each employee is covered for professional liability and general liability purposes, in accordance with Chapter 41 of the Nevada Revised Statutes, by the certificate of insurance and statement of indemnification.

Appendix 1\*

Anesthesiology - Pay Grades/Ranges & Additional Compensation

Position	Base Salary Range <sup>1</sup>	Additional Work Shift Rate⁵	Additional On- Call Shift Rate <sup>2</sup>	Call-Back Rate <sup>3</sup>	Per-Diem Rate <sup>4</sup>		
	SPECIALTY – Anesthesia						
Medical Director	\$524,160-	N/A	N/A	N/A	N/A		
Wedical Director	\$744,640	IN/A	IN/A	IN/A	IN/A		
Compred / OR	\$468,000-		\$36.00 p/h.		\$327.00 p/h		
General / OR	\$673,920				φ321.00 p/11		
Dodietrie	\$468,000-		\$35.00 p/h.		\$327.00 p/h		
Pediatric	\$673,920				\$327.00 p/11		
Tuanina	\$491,400-	CCo regular	\$38.00 p/h.	EEs hourly	\$242.00 p/b		
Trauma	\$707,616	EEs regular		rate if on-	\$343.00 p/h		
O.D.	\$468,000-	hourly rate	\$36.00 p/h.	call and called back	227 00 m/h		
ОВ	\$673,920				327.00 p/h		
OVT	\$515,840-		\$40.00 p/h.	to facility	\$220.00 p/b		
CVT	\$678,080				\$329.00 p/h		
CDNA	\$162,240-		\$17.00 p/h.		\$140.00 p/b		
CRNA	\$235,040				\$140.00 p/h		

<sup>\*</sup>Appendix 1 may be amended from time to time, with Board approval, to reflect new employment physician specialties based upon compensation rates that are consistent with FMV.

<sup>&</sup>lt;sup>1</sup> Based on years of experience

<sup>&</sup>lt;sup>2</sup> On-call unrestricted shifts in excess of the number required per agreement – **note:** If an employee is placed on a restricted call shift (i.e., where employee is required to be onsite) the employee will be paid at their standard base hourly rate of pay.

<sup>&</sup>lt;sup>3</sup> EE must be on an On-call shift and called to return to facility to perform work

<sup>&</sup>lt;sup>4</sup> Applicable only to those hired into a per-diem classification

<sup>&</sup>lt;sup>5</sup>See extra shift/hours on page 2 of this document

### Appendix 2\*

### Radiology - Pay Grades/Ranges & Additional Compensation

Position/Specialty	Base Salary Range	Additional Work Shift Rate <sup>5</sup>	Additional On-Call Shift Rate <sup>6</sup>	Call-Back Rate <sup>7</sup>	Per Diem Rate <sup>8</sup>
Program Director <sup>1</sup>	\$602,208- \$876,158	See below	See below	See below	N/A
Associate Program Director <sup>2</sup>	\$536,640 - \$805,020	See below	See below	See below	N/A
Core Faculty <sup>3</sup>					
Diagnostic Radiologist	\$454,884 - \$794,033		\$54.25 p/h		N/A
Interventional Radiologist	\$525,174 - \$794,611	EEs Regular Hourly Rate	\$55.77 p/h	EEs hourly rate if on-call and	N/A
Neuro-IR Radiologist	\$470,331- \$807,137	of Pay	\$58.33 p/h	called back to facility	N/A
Night Differential9	\$50 p/h		N/A	,	N/A
Faculty <sup>4</sup>					
Diagnostic Radiologist	\$495,214 - \$821,842		\$54.25 p/h		N/A
Interventional Radiologist	\$576,540 - \$822,493		\$55.77 p/h		N/A
Neuro-IR Radiologist	\$514,842- \$836,585	EEs Regular	\$58.33 p/h	EEs hourly rate if	N/A
Night Differential9	\$50 p/h	Hourly Rate	N/A	on-call and	N/A
Non-Academic		of Pay		called back to	
Diagnostic Radiologist	\$537,544 - \$800,946		\$54.25 p/h	facility	\$401 p/h
Interventional Radiologist	\$627,906 - \$811,844		\$55.77 p/h		\$411 p/h
Neuro-IR Radiologist	\$559,353 - \$810,947		\$58.33 p/h		\$403 p/h
Night Differential <sup>9</sup>	\$50 p/h		N/A		\$50 p/h
APP	\$128,122 - \$190,901		\$13.00 p/h		\$81 p/h

<sup>\*</sup>Appendix 2 may be amended from time to time, with Board approval, to reflect new employment physician specialties based upon compensation rates that are consistent with FMV.

<sup>&</sup>lt;sup>1</sup> The Program Director compensation is based upon a 0.6 Clinical FTE (CFTE) and the remainder of the 1.0 FTE being dedicated to academic/administrative time. At a 0.6 CFTE, the Program Director will be responsible for nine (9) shifts per month. Note, compensation is subject to adjustment if the Program Director's specialty differs from neurointerventional radiology or interventional radiology.

<sup>&</sup>lt;sup>2</sup> The Associate Program Director compensation is based upon a 0.7 Clinical FTE (CFTE) and the remainder of the 1.0 FTE being dedicated to academic/administrative time. At a 0.7 CFTE, the Associate Program Director will be responsible for eleven (11) shifts per month. Compensation is subject to adjustment if Associate Program Director's specialty differs from diagnostic radiology.

<sup>&</sup>lt;sup>3</sup> Core Faculty compensation is based upon a 0.8 Clinical FTE (CFTE) and the remainder of the 1.0 FTE in the specialties identified in the categories listed. Core faculty is responsible for 13 clinical shifts per month.

<sup>&</sup>lt;sup>4</sup> Faculty compensation is based upon a 0.9 Clinical FTE (CFTE) and the remainder of the 1.0 FTE in the specialties identified in the categories listed. Faculty is responsible for the full complement of 15 clinical shifts per month.

<sup>&</sup>lt;sup>5</sup>See extra shift/hours on page 2 of this document

<sup>&</sup>lt;sup>6</sup> On-call unrestricted shifts in excess of the number required per agreement – **note:** If an employee is placed on a restricted call shift (i.e., where employee is required to be onsite) the employee will be paid at their standard base hourly rate of pay.

<sup>7</sup> EE must be on an On-call shift and called to return to facility to perform work

<sup>&</sup>lt;sup>8</sup>Applicable only to those hired into a per-diem classification. The hourly rates listed are not-to-exceed amounts.

Night Shift differential paid an additional \$50 per hour above the employee's regular hourly rate of pay for shifts starting at or after 7:00pm.

### Appendix 2\*

### Including to show prior appendix for demonstration only

### Radiology - Pay Grades/Ranges & Additional Compensation

Position/Specialty	Base Salary Range <sup>1</sup>	Additional Work Shift Rate <sup>5</sup>	Additional On- Call Shift Rate <sup>2</sup>	Call-Back Rate <sup>3</sup>	Per-Diem Rate <sup>4</sup>
		SPECIALTY - Rac	diology		
Medical Director	Based on specialty <sup>6</sup>	N/A	N/A	N/A	Based on specialty <sup>6</sup>
Diagnostic Radiologist	\$477,179 - \$706,867		\$41.67 p/h	EEs hourly	\$294 p/h
Interventional Radiologist	\$511,856 - \$761,311	EEs regular hourly rate	\$41.67 p/h	rate if on- call and	\$336 p/h
Neurointerventional Radiologist	\$497,909- \$725,609		\$58.33 p/h	called back to	\$338p/h
APP	\$122,667 - \$154,050		\$13.00 p/h	facility	\$67 p/h

<sup>\*</sup>Appendix 2 may be amended from time to time, with Board approval, to reflect new employment physician specialties based upon compensation rates that are consistent with FMV.

<sup>&</sup>lt;sup>1</sup> Offers are based on years of experience.

<sup>&</sup>lt;sup>2</sup> On-call unrestricted shifts in excess of the number required per agreement – **note:** If an employee is placed on a restricted call shift (i.e., where employee is required to be onsite) the employee will be paid at their standard base hourly rate of pay.

<sup>&</sup>lt;sup>3</sup> EE must be on an On-call shift and called to return to facility to perform work

<sup>&</sup>lt;sup>4</sup> Applicable only to those hired into a per-diem classification

<sup>&</sup>lt;sup>5</sup>See extra shift/hours on page 2 of this document

<sup>&</sup>lt;sup>6</sup> The Medical Director will be hired under their specialty classification range. They will receive additional compensation based on the number of hours they are expected to work as a Medical Director for that month. Generally, this will be set at 20 hours per month, and the hourly rate will range from \$303-\$395 based on specialty.

# Appendix 3\*

# **Hospitalist - Pay Grades/Ranges & Additional Compensation**

Position	Base Salary Range <sup>1</sup>	Additional Work Shift Rate <sup>5</sup>	Additional On- Call Shift Rate <sup>2</sup>	Call-Back Rate <sup>3</sup>	Per-Diem Rate⁴		
	SPECIALTY – General Medicine						
GM Medical Director	\$306,000 - \$358,368	N/A	N/A	N/A	N/A		
GM Hospitalist	\$285,000 - \$327,767	EEs regular	N/A	EEs hourly rate if on-	EEs Hourly		
GM APP	\$126,040- \$147,841	hourly rate	N/A	call and called back to facility	Rate plus 15%		

<sup>\*</sup>Appendix 3 may be amended from time to time, with Board approval, to reflect new employment physician specialties based upon compensation rates that are consistent with FMV.

<sup>&</sup>lt;sup>1</sup> Based on years of experience

<sup>&</sup>lt;sup>2</sup> On-call unrestricted shifts in excess of the number required per agreement – **note:** If an employee is placed on a restricted call shift (i.e., where employee is required to be onsite) the employee will be paid at their standard base hourly rate of pay.

<sup>&</sup>lt;sup>3</sup> EE must be on an On-call shift and called to return to facility to perform work

<sup>&</sup>lt;sup>4</sup> Applicable only to those hired into a per-diem classification

<sup>&</sup>lt;sup>5</sup>See extra shift/hours on page 2 of this document

# Appendix 4\*

#### **Emergency Medicine - Pay Grades/Ranges & Additional Compensation**

Position	Base Salary Range <sup>1</sup>	Additional Work Shift Rate <sup>5</sup>	Additional On- Call Shift Rate <sup>2</sup>	Call-Back Rate <sup>3</sup>	Per-Diem Rate <sup>4</sup>
	SPE	CIALTY – Emergei	ncy Medicine		
EM Medical	\$315,732-				N/A
Directors	\$486,303				IN/A
(FT) EM Physician	\$315,732-				
	\$437,672	EEs regular	N/A	N/A	PT EEs
(PT) EM Physician	\$207,452-	hourly rate		IN/A	
(1456 hrs.) **	\$323,983				Hourly Rate plus 15%
EM APP	\$109,652-				pius 1570
CIVI APP	\$177,252				

<sup>\*</sup>Appendix 4 may be amended from time to time, with Board approval, to reflect new employment physician specialties based upon compensation rates that are consistent with FMV.

<sup>\*\*</sup>Part-time employment is determined to be 1456 hours /0.7 FTE (182 8-hour shifts annually).

<sup>&</sup>lt;sup>1</sup> Based on years of experience

<sup>&</sup>lt;sup>2</sup> On-call unrestricted shifts in excess of the number required per agreement – **note:** If an employee is placed on a restricted call shift (i.e., where employee is required to be onsite) the employee will be paid at their standard base hourly rate of pay.

<sup>&</sup>lt;sup>3</sup> EE must be on an On-call shift and called to return to facility to perform work

<sup>&</sup>lt;sup>4</sup> Applicable only to those hired into a per-diem classification

<sup>&</sup>lt;sup>5</sup>See extra shift/hours on page 2 of this document

# 2025

PHYSICIAN AND NON-PHYSICIAN PROVIDER TRADITIONAL COMPENSATION AND BENEFITS PLAN



# UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA

# PHYSICIAN AND NON-PHYSICIAN PROVIDER TRADITIONAL COMPENSATION AND BENEFITS PLAN

Revision Effective Date: January 1, 2026 Original Implementation Date: July 1, 2023

Mason Van Houweling - Chief Executive Officer

UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA ("UMC")
PHYSICIAN AND NON-PHYSICIAN PROVIDER TRADITIONAL COMPENSATION AND BENEFITS
PLAN (the "Compensation Plan")

# Compensation Plan and Employees Covered

This Compensation Plan identifies the compensation and benefits structure for Physician and Non-Physician provider employees in the following classifications:

Medical Director, Anesthesiologist	Medical Director, Radiologist
Anesthesiologist - Obstetric, General/OR, Pediatric, CVT, Trauma	Certified Registered Nurse     Anesthetists (CRNA)
Radiologist – Diagnostic,     Interventional, Neurointerventional	Radiology APP
<ul> <li>Medical Director, General Medicine Hospitalist</li> <li>General Medicine Hospitalist</li> </ul>	Hospitalist APP
<ul><li>Medical Director, Emergency Physician</li><li>Emergency Physician</li></ul>	

Such employees will be referred to as "employee" or "employees" in this document. This document replaces all previous communications regarding Physician and Mid-Level compensation and benefits under an existing compensation model or an employee's offer of employment letter; provided however, the terms and conditions of the employee's at-will employment agreement, if any, shall control in the event of a conflict between the two documents.

University Medical Center retains the rights to add, modify, or eliminate any compensation or benefit contained within this plan document with the final approval of the UMC Governing Board and/or in accordance with the terms and conditions of the employee's contract for employment.

# Fair Labor Standards Act (FLSA) Exemption:

Employees covered by this plan document are not authorized overtime compensation under the FLSA due to their professional exemption.

# **At-Will Employment:**

All employees covered by this plan document are considered At-Will and will serve at the pleasure of the Chief Executive Officer.

# **Voluntary Resignation:**

All employees covered by this plan document are encouraged to provide a minimum of sixty (60) days notice of a voluntary resignation.

# Compensation and Benefits

# Compensation:

During the term of employment, Physicians and Non-Physician Providers shall be eligible for a compensation package at a rate consistent with the pay ranges listed in the Appendices, as may be amended from time to time. The Appendices further sets forth a compensation package that will not exceed the 75<sup>th</sup> percentile (or 90<sup>th</sup> percentile when factors such as shortages or otherwise hard-to-fill positions justify) based upon national and regional physician and midlevel compensation survey benchmarks (e.g., Sullivan Cotter, MGMA).

Unless modified by the provisions of this Compensation Plan and/or at-will employment agreement, employees will be granted the same benefits provided through the Human Resources Policies and Procedures.

The employee's base salary shall be re-evaluated bi-annually (i.e., every other year), consistent with the methodology set forth above.

The CEO (or designee) may authorize bonuses (e.g., sign-on, relocation, etc.), subject to existing UMC Human Resources Policies and Procedures, and provided it is consistent with fair market value.

# Work Schedules:

All full & part-time Physicians and Non-Physician Providers are salaried, exempt employees, while per-diem are hourly, non-exempt employees. Work schedules are determined based on a designated Full Time Equivalent (FTE) status. Employees designated as less than a 1.0 FTE are eligible for salary and benefits prorated based on FTE status. Employees are expected to be available to work their full, designated FTE status.

Unless otherwise set forth on the applicable service line Appendix, Employee's work schedules will be set by the Practice Plan Administrator or designee or as set forth in any at-will employment agreement or signed offer letter. Except as otherwise set forth herein, it is anticipated that full-time employees will work a minimum of fifteen (15) shifts per month, while part-time will work a minimum of seven (7) shifts per month. Notwithstanding the minimum shift requirement, it is understood that based on the length of a calendar month, and service line specific scheduling requirements, the fifteen (15) shift requirement is an approximate amount and may be spread over a two-month period (or as much as five (5) pay periods) and the same will not violate the requirements under this section.

# Extra Shift/Hours Compensation:

In the event an employee works in excess of their regular and on-call shifts he or she shall be entitled to the additional shift compensation set forth in the Appendices. Additionally, in the event an employee is required to stay over a scheduled shift more than two (2) hours, the employee will receive additional hourly compensation consistent with their regular hourly rate of compensation for hours above and beyond the scheduled shifts. *Example:* Employee works 12.5 hours in a 10-hour scheduled shift will entitle such employee to two and one half hours of additional pay at the next regularly scheduled pay period.

With the exception of per-diem status employees, any excess time less than the two-hours over the scheduled shift does not entitle the employee to any additional hourly compensation.

# On-Call Coverage:

Physicians and Non-Physician Providers, who provide on-call coverage, may receive additional shift compensation at the rates set forth in the Appendices, for on-call coverage over and above a pre-determined amount, as set forth by the Medical Director, or in the employee's offer of employment letter or At-Will contract for employment. An employee who is on unrestricted call, who is called to return to the facility to perform work, will receive callback pay consistent with the rates set forth in the Appendices.

#### **Annual Evaluations:**

Employee performance will be evaluated on an annual basis. The annual evaluation cycle shall be based on fiscal year (July 1 - June 30). All Compensation Plan employees shall have a common review date of September 1<sup>st</sup> unless otherwise established by the CEO. Employees under this Compensation Plan are not subject to merit or cost of living increases as their compensation is subject to bi-annual (i.e., every other year) fair market value reviews consistent with the terms of this Compensation Plan and their employment agreement.

# Consolidated Annual Leave (CAL) / Administrative Leave Days (ALDs):

The Chief Executive Officer (or designee) shall determine if a Physician Provider classification covered by this Compensation & Benefits Plan will:

- 1. Accrue CAL in accordance with the hospital's standard human resources policies & procedures; or,
- 2. Participate in the ALD program as defined below.

#### **Physicians**

Physician Providers in a classification designated to participate in the ALD program will not accrue CAL as set forth in the hospital's Human Resources Policies and Procedures. Instead, each part-time or full-time Physician Provider under this Compensation Plan designated as such shall receive Administrative Leave Days (ALDs).

Appropriate use of ALDs include sick days, and leave of absences. ALDs do not roll over year to year, may not be converted to compensation, transferred to other ineligible classifications or statuses, nor are they paid out upon separation of employment. Requests to use ALDs shall be submitted to the Medical Director (or designee) over the service line.

ALDs will be awarded on a pro-rated basis upon the first year of hire. Thereafter, the employee will receive their allotment of ALDs each January 1st. Eligible employee's under this Compensation Plan will receive ALDs as follows:

Employment Status*	# Regularly scheduled shifts per month	# of ALDs
Part-Time	Up to 14	7
	15-19	15
Full-Time	Up to 19	15
	20+	30

<sup>\*</sup> an Employee's employment status is determined by UMC Human Resources and is set forth in the applicable offer letter/contract of employment.

An employee's time-off may differ in accordance with their at-will employment agreement. Physicians accruing CAL upon final approval and implementation of this September 1, 2023 Compensation Plan will retain any accrued CAL time and will be required to exhaust such time prior to the use of any ALDs. CAL accrued prior to implementation of this September 1, 2023 Compensation Plan may not be converted to compensation, nor is it paid out upon separation of employment.

#### Non-Physician Providers

Full & part-time Non-Physician Providers (e.g., CRNAs) under this Compensation Plan will continue to accrue and use CAL consistent with the hospital's Human Resources Policies and Procedures.

# Extended Illness Bank (EIB):

Eligible employees under this Compensation Plan will accrue Extended Illness Bank (EIN) as set forth in hospital's Human Resources Policies and Procedures. The rules governing the use of EIB leave time shall be consistent with those set forth by Human Resource Policies and Procedures.

#### Miscellaneous Leaves:

Miscellaneous Leaves, such as jury/court duty, military leave, bereavement leave, family leave, etc., are administered in accordance with Human Resources Policies and Procedures.

# Group Insurance:

UMC provides medical, dental, and life insurance to all eligible employees covered by this plan. To be eligible for group insurance, an employee must occupy a regular budgeted position and work the required hours to meet the necessary qualifying periods associated with the insurance program.

Employees will have deducted each pay period an approved amount from their compensation for employee insurance, or other elected coverages. Amounts are determined by UMC and approved by the UMC Governing Board. Rules governing the application and administration of insurance benefits shall be consistent with those set forth by Human Resource Policies and Procedures.

#### Retirement:

Employees are covered by the Nevada Public Employees Retirement System. UMC pays the employee's portion of the retirement contribution under the employer-pay contribution plan in the manner provided for by NRS Chapter 286. Any increases in the percentage rate of the retirement contribution above the rate set forth in NRS 286.421 on May 19, 1975, shall be borne equally by UMC and the employee in the manner provided by NRS 286.421. Any decrease in the percentage rate of the retirement contribution will result in a corresponding increase to each employee's base pay equal to one-half (1/2) of the decrease. Any such increase in pay will be effective from the date the decrease in the percentage rate of the retirement contribution becomes effective. Retirement contribution does not include any payment for the purchase of previous credit service on behalf of any employee.

# Continuing Medical Education (CME):

UMC will pay a \$2,500 CME stipend (Stipend), less appropriate withholdings each calendar year in January, for a qualified employee upon the employee's execution of UMC's CME Stipend Attestation form. The Stipend is available to a UMC employed licensed independent provider including, but not limited to, physician, nurse practitioner, physician assistant, CRNA, and dentist. At its sole discretion, UMC may identify other independent providers that qualify for the Stipend. Qualified employees may also request up to 40 hours of paid release time each calendar year to attend CME related activities. Approval of such time is at the sole discretion of UMC leadership.

All training, travel, and lodging must be pre-approved by the Chief Operating Officer, Medical Director, and such other person(s) as may be required by the COO and Medical Director pursuant to the hospital's training and travel policy. In the event an employee is on leave or FMLA, the employee is not eligible to take CME release time.

#### Conflict of Interest:

Physicians are expected to comply with applicable Medicare and Medicaid and other applicable federal, state, and/or local laws and regulations, as-well-as, hospital policies and procedures and Medical and Dental Staff Bylaws. In so doing, it is emphasized that each employee must refrain from using his/her position as a UMC employee to secure personal gain and/or endorse any particular product or service. This includes seeking or accepting additional employment or ownership in a business outside UMC that represents a conflict of interest as defined in the Ethical Standards Policy.

The referral of patients to individuals or practices which compete with or do not support UMC is considered a conflict of interest. However, it is understood that patients have the right to choose where to be referred upon full disclosure by the attending physician of all relevant information. All referrals must go through the UMC Referral Office where they will be processed accordingly.

All other provisions of the conflict of interest policy shall be as defined and described in the Human Resources Policy and Procedures Manual titled Ethical Standards and the UMC Medical and Dental Staff Bylaws.

#### Professional Standards:

Quality and safe patient care and the highest professional standards are the major goals of UMC and its facilities. To that end, UMC agrees to make every reasonable effort to provide a work environment that is conducive to allowing employees to maintain a professional standard of quality, safe patient care, and patient confidentiality. Employees shall be required to conduct themselves in a professional manner at all times.

UMC is a teaching facility. To that extent, physician employees may be required to supervise or cosign medical records for mid-level providers or residents who are in a recognized residency program, such as the UNLV School of Medicine Residency Program.

UMC shall provide interpretive services in designated exam rooms. Physician employees are required to use the interpretive services provided through UMC.

No Physician employee shall unreasonably and without good cause fail to provide care to patients. Any patient complaint received in writing shall be administered pursuant to UMC Administrative Policy, as modified from time to time. The employee shall be required to meet with the Patient Advocate and/or the Medical Director so that a response, if any, may be prepared. The affected employee shall receive a copy of any written response. If any discipline is administered, just cause standards and the appropriate sections of the Human Resources Policies and Procedures Manual shall apply.

All Physicians will follow the UMC Code of Conduct for Corporate Compliance. This includes completing a Medicare Enrollment Application – Reassignment of Medicare Benefits (CMS-855R) form.

UMC is an equal opportunity employer and will not tolerate discrimination on the basis of race, color, religion, sex, national origin, age, disability, sexual orientation, gender identity or expression, and/or genetic information in employment. In accordance with state and federal laws, the UMC Governing Board is committed to an Equal Opportunity, Affirmative Action and Sexual Harassment Policy to prohibit unlawful discrimination.

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Pursuant to Nevada Revised Statutes Chapter 41, UMC will indemnify an employee whose acts or omissions are within the course and scope of their employment and will thereafter continue to cover (without cost to the employee) the employee under the hospital's self-funded insurance policy. As such, each employee is covered for professional liability and general liability purposes, in accordance with Chapter 41 of the Nevada Revised Statutes, by the certificate of insurance and statement of indemnification.

<u>Appendix 1\*</u>
Anesthesiology - Pay Grades/Ranges & Additional Compensation

Position	Base Salary Range <sup>1</sup>	Additional Work Shift Rate <sup>5</sup>	Additional On- Call Shift Rate <sup>2</sup>	Call-Back Rate <sup>3</sup>	Per-Diem Rate⁴
		SPECIALTY - And	esthesia		
Medical Director	\$524,160-	N/A	N/A	N/A	N/A
Wedical Director	\$744,640	14/7 (	14/73	14/73	14/7 (
General / OR	\$468,000-		\$36.00 p/h.		\$327.00 p/h
General / OK	\$673,920				φ327.00 p/11
Pediatric	\$468,000-		\$35.00 p/h.		\$327.00 p/h
Pediatric	\$673,920			EEs hourly	φ321.00 p/11
Trauma	\$491,400-	EEs regular	\$38.00 p/h.	rate if on-	\$343.00 p/h
ITaulila	\$707,616	hourly rate		call and	ψ343.00 p/11
ОВ	\$468,000-	Hourly rate	\$36.00 p/h.	called back	327.00 p/h
ОВ	\$673,920			to facility	327.00 p/11
СУТ	\$515,840-		\$40.00 p/h.		\$329.00 p/h
CVI	\$678,080				φ329.00 p/11
CDNA	\$162,240-		\$17.00 p/h.		\$140.00 p/h
CRNA	\$235,040				φι40.00 μ/Π

<sup>\*</sup>Appendix 1 may be amended from time to time, with Board approval, to reflect new employment physician specialties based upon compensation rates that are consistent with FMV.

<sup>&</sup>lt;sup>1</sup> Based on years of experience

<sup>&</sup>lt;sup>2</sup> On-call unrestricted shifts in excess of the number required per agreement – **note**: If an employee is placed on a restricted call shift (i.e., where employee is required to be onsite) the employee will be paid at their standard base hourly rate of pay.

<sup>&</sup>lt;sup>3</sup> EE must be on an On-call shift and called to return to facility to perform work

<sup>&</sup>lt;sup>4</sup> Applicable only to those hired into a per-diem classification

<sup>&</sup>lt;sup>5</sup>See extra shift/hours on page 2 of this document

#### Appendix 2\*

#### Radiology - Pay Grades/Ranges & Additional Compensation

Position/Specialty	Base Salary Range	Additional Work Shift Rate <sup>5</sup>	Additional On-Call Shift Rate <sup>6</sup>	Call-Back Rate <sup>7</sup>	Per Diem Rate <sup>8</sup>
Program Director <sup>1</sup>	\$602,208- \$876,158	See below	See below	See below	N/A
Associate Program Director <sup>2</sup>	\$536,640 - \$805,020	See below	See below	See below	N/A
Core Faculty <sup>3</sup>					
Diagnostic Radiologist	\$454,884 - \$794,033		\$54.25 p/h		N/A
Interventional Radiologist	\$525,174 - \$794,611	EEs Regular Hourly Rate	\$55.77 p/h	EEs hourly rate if on-call and	N/A
Neuro-IR Radiologist	\$470,331- \$807,137	of Pay	\$58.33 p/h	called back to facility	N/A
Night Differential9	\$50 p/h		N/A	,	N/A
Faculty <sup>4</sup>					
Diagnostic Radiologist	\$495,214 - \$821,842		\$54.25 p/h		N/A
Interventional Radiologist	\$576,540 - \$822,493		\$55.77 p/h		N/A
Neuro-IR Radiologist	\$514,842- \$836,585	EEs Regular	\$58.33 p/h	EEs hourly rate if	N/A
Night Differential9	\$50 p/h	Hourly Rate	N/A	on-call and	N/A
Non-Academic		of Pay		called back to	
Diagnostic Radiologist	\$537,544 - \$800,946		\$54.25 p/h	facility	\$401 p/h
Interventional Radiologist	\$627,906 - \$811,844		\$55.77 p/h		\$411 p/h
Neuro-IR Radiologist	\$559,353 - \$810,947		\$58.33 p/h		\$403 p/h
Night Differential <sup>9</sup>	\$50 p/h		N/A		\$50 p/h
APP	\$128,122 - \$190,901		\$13.00 p/h		\$81 p/h

<sup>\*</sup>Appendix 2 may be amended from time to time, with Board approval, to reflect new employment physician specialties based upon compensation rates that are consistent with FMV.

<sup>&</sup>lt;sup>1</sup> The Program Director compensation is based upon a 0.6 Clinical FTE (CFTE) and the remainder of the 1.0 FTE being dedicated to academic/administrative time. At a 0.6 CFTE, the Program Director will be responsible for nine (9) shifts per month. Note, compensation is subject to adjustment if the Program Director's specialty differs from neurointerventional radiology or interventional radiology.

<sup>&</sup>lt;sup>2</sup> The Associate Program Director compensation is based upon a 0.7 Clinical FTE (CFTE) and the remainder of the 1.0 FTE being dedicated to academic/administrative time. At a 0.7 CFTE, the Associate Program Director will be responsible for eleven (11) shifts per month. Compensation is subject to adjustment if Associate Program Director's specialty differs from diagnostic radiology.

<sup>&</sup>lt;sup>3</sup> Core Faculty compensation is based upon a 0.8 Clinical FTE (CFTE) and the remainder of the 1.0 FTE in the specialties identified in the categories listed. Core faculty is responsible for 13 clinical shifts per month.

<sup>&</sup>lt;sup>4</sup> Faculty compensation is based upon a 0.9 Clinical FTE (CFTE) and the remainder of the 1.0 FTE in the specialties identified in the categories listed. Faculty is responsible for the full complement of 15 clinical shifts per month.

<sup>&</sup>lt;sup>5</sup>See extra shift/hours on page 2 of this document

<sup>&</sup>lt;sup>6</sup> On-call unrestricted shifts in excess of the number required per agreement – **note:** If an employee is placed on a restricted call shift (i.e., where employee is required to be onsite) the employee will be paid at their standard base hourly rate of pay.

<sup>7</sup> EE must be on an On-call shift and called to return to facility to perform work

<sup>&</sup>lt;sup>8</sup>Applicable only to those hired into a per-diem classification. The hourly rates listed are not-to-exceed amounts.

Night Shift differential paid an additional \$50 per hour above the employee's regular hourly rate of pay for shifts starting at or after 7:00pm.

# Appendix 3\*

# **Hospitalist - Pay Grades/Ranges & Additional Compensation**

Position	Base Salary Range <sup>1</sup>	Additional Work Shift Rate <sup>5</sup>	Additional On- Call Shift Rate <sup>2</sup>	Call-Back Rate <sup>3</sup>	Per-Diem Rate⁴		
	SPECIALTY – General Medicine						
GM Medical Director	\$306,000 - \$358,368	N/A	N/A	N/A	N/A		
GM Hospitalist	\$285,000 - \$327,767	EEs regular	N/A	EEs hourly rate if on-	EEs Hourly		
GM APP	\$126,040- \$147,841	hourly rate	N/A	call and called back to facility	Rate plus 15%		

<sup>\*</sup>Appendix 3 may be amended from time to time, with Board approval, to reflect new employment physician specialties based upon compensation rates that are consistent with FMV.

<sup>&</sup>lt;sup>1</sup> Based on years of experience

<sup>&</sup>lt;sup>2</sup> On-call unrestricted shifts in excess of the number required per agreement – **note:** If an employee is placed on a restricted call shift (i.e., where employee is required to be onsite) the employee will be paid at their standard base hourly rate of pay.

<sup>&</sup>lt;sup>3</sup> EE must be on an On-call shift and called to return to facility to perform work

<sup>&</sup>lt;sup>4</sup> Applicable only to those hired into a per-diem classification

<sup>&</sup>lt;sup>5</sup>See extra shift/hours on page 2 of this document

# Appendix 4\*

# **Emergency Medicine - Pay Grades/Ranges & Additional Compensation**

Position	Base Salary Range <sup>1</sup>	Additional Work Shift Rate⁵	Additional On- Call Shift Rate <sup>2</sup>	Call-Back Rate <sup>3</sup>	Per-Diem Rate <sup>4</sup>
	SPE	CIALTY – Emerger	ncy Medicine		
EM Medical	\$315,732-				N/A
Directors	\$486,303				IN/A
(FT) EM Physician	\$315,732-				
	\$437,672	EEs regular	N/A	N/A	PT EEs
(PT) EM Physician	\$207,452-	hourly rate		IN/A	Hourly Rate
(1456 hrs.) **	\$323,983				plus 15%
EM APP	\$109,652-				pius 1370
EIVI AFF	\$177,252				

<sup>\*</sup>Appendix 4 may be amended from time to time, with Board approval, to reflect new employment physician specialties based upon compensation rates that are consistent with FMV.

<sup>\*\*</sup>Part-time employment is determined to be 1456 hours /0.7 FTE (182 8-hour shifts annually).

<sup>&</sup>lt;sup>1</sup> Based on years of experience

<sup>&</sup>lt;sup>2</sup> On-call unrestricted shifts in excess of the number required per agreement – **note:** If an employee is placed on a restricted call shift (i.e., where employee is required to be onsite) the employee will be paid at their standard base hourly rate of pay.

<sup>&</sup>lt;sup>3</sup> EE must be on an On-call shift and called to return to facility to perform work

<sup>&</sup>lt;sup>4</sup> Applicable only to those hired into a per-diem classification

<sup>&</sup>lt;sup>5</sup>See extra shift/hours on page 2 of this document

# UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA GOVERNING BOARD HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE AGENDA ITEM

Issue:	Emerging Issues	Back-up:				
Petitioner:	Ricky Russell, Chief Human Resource Officer	Clerk Ref. #				
That the Hur be addressed	Recommendation:  That the Human Resources and Executive Compensation Committee identify emerging issues to be addressed by staff or by the UMC Governing Board Human Resources and Executive Compensation Committee at future meetings; and direct staff accordingly. (For possible action)					

**FISCAL IMPACT:** 

None

**BACKGROUND:** 

None

Cleared for Agenda November 10, 2025