



# UMC Strategic Planning Committee

Thursday, August 15, 2024 9:00 a.m.

UMC Trauma Building - Providence Suite - 5th Floor

Las Vegas, NV 89102

## AGENDA

**University Medical Center of Southern Nevada**  
UMC GOVERNING BOARD STRATEGIC PLANNING COMMITTEE  
August 15, 2024 9:00 a.m.  
800 Hope Place, Las Vegas, Nevada  
UMC Trauma Building, Providence Suite (5<sup>th</sup> Floor)

Notice is hereby given that a meeting of the UMC Governing Board Strategic Planning 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 <https://notice.nv.gov/>, and at University Medical Center 1800 W. Charleston Blvd. Las Vegas, NV (Principal Office).**

- The main agenda is available on University Medical Center of Southern Nevada's website <http://www.umcsn.com>. For copies of agenda items and supporting back-up materials, please contact Stephanie Ceccarelli, Board Secretary, at (702) 765-7949. The Strategic Planning Committee may combine two or more agenda items for consideration.
- Items on the agenda may be taken out of order.
- The Strategic Planning 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 Strategic Planning Committee to be routine and may be acted upon in one motion. Most agenda items are phrased for a positive action. However, the Strategic Planning 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 Strategic Planning 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 Strategic Planning Committee meeting on June 13, 2024. *(For possible action)*

3. Approval of Agenda. *(For possible action)*

## **SECTION 2: BUSINESS ITEMS**

4. Receive a report regarding UMC Service Line Performance Overview; and direct staff accordingly. *(For possible action)*
5. Review and discuss the FY24 Organizational Performance Goals as it relates to the subject matter relevant to the Strategic Planning Committee and make a recommendation to the Human Resources and Executive Compensation Committee; and take action as deemed appropriate. *(For possible action)*
6. Finalize proposed Organizational Performance Goals for FY25 related to the Strategic Planning Committee and make a recommendation to the Human Resources and Executive Compensation Committee; and take action as deemed appropriate. *(For possible action)*

## **SECTION 3: EMERGING ISSUES**

7. Identify emerging issues to be addressed by staff or by the Board at future meetings; and direct staff accordingly. *(For possible action)*

## **SECTION 4. CLOSED SESSION**

8. Go into closed session pursuant to NRS 450.140(3) to discuss new or material expansion of UMC's health care services and hospital facilities.

## **COMMENTS BY THE GENERAL PUBLIC**

**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 STRATEGIC PLANNING 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.**

**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 Strategic Planning Committee  
June 13, 2024**

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UMC Providence Suite  
Trauma Building, 5<sup>th</sup> Floor  
800 Hope Place  
Las Vegas, Clark County, Nevada  
Thursday, June 13, 2024  
9:00 a.m.

The University Medical Center Governing Board Strategic Planning Committee met at the time and location listed above. The meeting was called to order at the hour of 9:00 a.m. by Chair Hagerty and the following members were present, which constituted a quorum of the members thereof:

**CALL TO ORDER**

**Board Members:**

**Present:**

Harry Hagerty, Chair  
Dr. Don Mackay  
Robyn Caspersen  
Renee Franklin (Via WebEx)  
Mary Lynn Palenik (Via WebEx)

**Absent:**

Chris Haase (Excused)

**Also Present:**

Tony Marinello, Chief Operating Officer  
Jennifer Wakem, Chief Financial Officer  
Chris Jones, Executive Director of Support Services  
Ron Roemer, Director of Clinical Trials Research and Compliance  
Shana Tello, Academic and External Affairs Administrator  
Jessica Dragna, Academic Affiliation Analyst  
Maria Sexton, Chief Information Officer  
Susan Pitz, General Counsel  
Stephanie Ceccarelli, Board Secretary

**SECTION 1. OPENING CEREMONIES**

**ITEM NO. 1 PUBLIC COMMENT**

Chair Hagerty asked if there were any persons present in the audience wishing to be heard on any item on this agenda. No such comments were heard.

**ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Strategic Planning Committee meeting on May 2, 2024. (For possible action)**

**FINAL ACTION:** A motion was made by Member Mackay that the minutes be approved as presented. Motion carried by unanimous vote.

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

FINAL ACTION: A motion was made by Member Mackay that the agenda be approved as recommended. Motion carried by unanimous vote.

**SECTION 2. BUSINESS ITEMS**

**ITEM NO. 4 Receive an update regarding the clinical trials from Ron Roemer, Director of Clinical Trials Research and Compliance; and direct staff accordingly. (For possible action)**

DOCUMENT SUBMITTED:

- Service Line Update

DISCUSSION:

Ron Roemer, Director of Clinical Trials Research and Compliance, reviewed the clinical trials structure and research benefits at UMC.

Mr. Roemer explained the research structure, which includes the Principal Investigator (PI), the institution, engagement and the funded research being conducted.

Chair Hagerty asked who owns the data that comes from a clinical trial study. Mr. Roemer responded that the sponsor owns the data. This means that although UMC may be involved in doing the study, the data ultimately belongs to the sponsor.

Investigator types include employed physicians, contracted employees, privileged employees and UNLV affiliated staff members.

Funding sources come from Industry, Federal, Not-For-Profit, and Investigator Initiated. Grant charges range from 30% - 55% depending on the type of study to support the research. Non-profits charge 10%. Investigator initiated protocols are written by the investigator and is the responsibility of the investigator, not the patient or UMC.

Mr. Roemer explained the benefits of research, which includes reimbursements, incremental business, reputation of the facility, as well as patient access to physicians, which is at no cost to patients and readmission rates are reduced. The discussion continued regarding achieving Center of Excellence status by driving research through clinical trials and attracting specialty physicians.

In recent years, CMS has assumed costs for routine care in research. UMC conducts a reimbursement analysis to determine whether services are paid by Medicare/Medicaid or the sponsor. Budget development comes from the reimbursement analysis and the budget is then negotiated and finalized. Patients are not billed for research procedures. Mr. Roemer reviewed an example of the prospective reimbursement analysis and budget development process related to establishing clinical trials.

Mr. Roemer provided a review of the regulations and compliance associated in performing clinical trials, which includes the Sunshine Act, obtaining a National Clinical Trial Number, CMS Clinical Trial Policy, Stark and Anti-Kickback laws and False Claims Act. He noted there could be hefty fines for non-compliance.

A discussion ensued regarding the clinical and financial benefits of performing clinical trials.

Chairman Hagerty asked if there is a particular service line at UMC that could be a focus for clinical trials. Ms. Roemer responded that the service lines that could provide clinical trial opportunities would be in oncology, cardiology, orthopedics, as well as in the quick care and primary care clinic settings. There was continued discussion regarding establishing more clinical trial opportunities at UMC.

**FINAL ACTION TAKEN:**

None taken.

**ITEM NO. 5 Receive an update regarding Medical District progress; and direct staff accordingly. (For possible action)**

**DOCUMENT SUBMITTED:**

-PowerPoint Presentation

**DISCUSSION:**

Next, Ms. Jessika Dragna, Academic Affiliation Analyst, provided a high level update on the recent activities in the Medical District and UMC's continued leading role in the growth of the Medical District.

Current operating facilities, as well as those in future development, including multi-family housing, hotels, restaurants and more were discussed. UMC attends stakeholder meetings regularly to provide input for new services.

The Las Vegas Medical District is in the process of creating the following projects:

- Southern Nevada's first and only Bioscience Incubator Lab,
- a Civic Plaza Project – Class A office and retail development featuring office space and state of the art technology, and
- Let's Go Maryland Parkway transportation project, which will provide a more efficient bus transit route between the airport and the Las Vegas Medical District. UMC has been involved in route planning and coordination of the bus stops. Expected completion of the transit project is in the fall of 2026.
- The Las Vegas 2050 Master Plan for the Charleston area will address a wide range of topics including housing, parks, amenities, transit, jobs and education. This plan will guide growth in the area for the next 25 years. UMC has been involved in key discussions regarding this project focusing on a life that is equitable, resilient, healthy, livable and innovative to improve quality of life for all residents.

The Las Vegas Medical District Public Art Plan aims to create a connection between the city of Las Vegas and the downtown medical health care community. There are two projects near Wellness Way and the Charleston Underpass that

have been completed or are currently in process. There are 4 more art projects coming soon to the area, which will include a combination of murals, sculptures and signage. These projects will be in the area of Rancho Gateway, Pahor Drive, Wellness Way Gateway and Shadow Lane.

Next, Ms. Dragna provided legislative updates. UMC is a part of the Las Vegas Legislative Committee. Focus areas for the legislative session include physician licensure, "Any Willing Provider" Law, Restrictive Covenants/Non-Competes for providers/physician and Licensure process for healthcare workers. UMC has been a part of the Children Mental Health Action Coalition to focus on mental health. Highlights from recent meetings were provided. Shana Tello provided public comment advocating for the children of Nevada.

The City has been a good partner with the progress in the District.

FINAL ACTION TAKEN:

None taken.

**ITEM NO. 6 Receive a report regarding updated UMC 5-Year Financial Plan; and direct staff accordingly. (For possible action)**

DOCUMENT SUBMITTED:

- PowerPoint Presentation

DISCUSSION:

Jennifer Wakem began the update on the 5-Year Financial Plan and reminded the Committee that this is an organizational goal for 2024. She explained what into creating the 5-year plan beginning with the budget for FY25, which is the base year and projections for the next 5-years.

Initiatives and assumptions were discussed. Ms. Wakem noted in supplemental payments that UMC opted out of DSH payments and switched to the Directed Payment program. These are projected out at the program level. She noted that the county will pay the IGTs. These fees will need to increase in FY26.

Initiatives and assumptions built into the budget that affect patient revenue include:

- New Rehab unit in FY26 with 28 beds
- \$5M per year estimated Managed Care increase- better contracts
- New OP Pharmacy in FY26
- New Liver Transplant service in FY26
- New QC/PC opening each year starting in 2026

There was continued discussion regarding how the rehab service will affect length of stay and if the bed count is adequate. The goal of the rehab center is to keep patients within the UMC network. Ms. Wakem mentioned that the new director of Managed Care will be starting on Monday.

Chair Hagerty asked what lessons were learned from the quick care and primary care locations that have not met expectations. Mr. Marinello responded about the challenges that the team has experienced and lessons learned to not over promise and under deliver.

Next, the Committee reviewed the cost management moving forward which included the phase out of longevity payments to employees, depreciation of Epic implementation and the Nellis rent will go away.

Key indicators were presented as informational. Length of stay will be going up in FY26 due to the rehab patient stay.

The summary income statement showed an increase of gross and net patient revenue. Net patient revenue as a percent of gross is approximately 18%. Operating revenue will be over \$1 billion starting in FY25. Earnings for the budget year is \$38.7 million.

Chair Hagerty noted modest improvements in revenue and operating expense can have an impact on profit. Annually there should be a focus on the margin areas that deliver more revenue and less expense.

The cash flow statement shows cash should remain steady. The County will continue to provide \$5 million in capital subsidy.

Capital plan was next broken down year over year. The total for FY25 is \$76 million. A discussion continued regarding the strategic plans for the round in the south towers and the replacement of rooms. There is continued discussion regarding future building plans, to include a parking garage and additional rooms.

Member Caspersen asked if modernization capital costs are included into the budget. Mr. Marinello responded that the costs are included. There was continued discussion regarding ongoing facilities modernization, capital costs and financing.

Chair Hagerty asked what the process is for the 5-year plan. The hope is that this becomes the roadmap of growth for the organization. The committee would like to review updates to the 5-year plan semi-annually as a tool, and to encourage staff to be proactive and monitor changes regularly.

FINAL ACTION TAKEN:

No action taken

**ITEM NO. 7 Receive an update on the FY25 Proposed Organizational Performance Goals related to the UMC Governing Board Strategic Planning Committee; and direct staff accordingly. (For possible action)**

DOCUMENT SUBMITTED:

- PowerPoint Presentation

- 1. Continue to deliver improved clinical and financial outcomes in the existing 5 service lines.**



2. **Develop business plan and Proforma for the expansion of 4<sup>th</sup> and 5<sup>th</sup> floor trauma building, to include specialty services for continuity of care**
3. **Continue to play a leading role in the development of the Las Vegas Medical District**
4. **Enhance Strategic Initiatives in furtherance of the Academic Health Center**
5. **Expand physician employment to eliminate costly PSA coverage contracts**
6. **Achieve Comprehensive Stroke Certification**

The discussion began by determining which goals would be related to strategy and which are financial or operational. Chair Hagerty suggested items related to physician employment contracts are not necessary strategic.

Continue to deliver improved clinical and financial outcomes in the existing 5 service lines would be consistent with the focus of the committee.

The medical district initiative will continue without having it as a strategic priority.

Chair Hagerty would like to see fewer, but more impactful goals and suggests keeping goals 1, 2, 4 and 6 from the above list. The other two goals mentioned would continue to be a priority and should be discussed regularly.

Member Franklin agrees stroke is important from a strategic standpoint, but was not sure if it is just the certification or something else we would strive for.

Chair Hagerty responded that the goal is to be to reach Center of Excellence certification. Mr. Marinello added that the next target level is the Comprehensive Stroke level from the Joint Commission. The goal would be to achieve the highest level.

The wording should be continue on the path by achieving comprehensive stroke certification.

Member Palenik asked if there are qualifiers to achieve this goal.

The team will refine the language of the goals and circulate them to the committee members.

The Committee is in agreement with the four goals as presented subject with finalized language:

1. **Continue to deliver improved clinical and financial outcomes in the existing 5 service lines.**
2. **Develop business plan and Proforma for the expansion of 4<sup>th</sup> and 5<sup>th</sup> floor trauma building, to include specialty services for continuity of care**
3. **Enhance Strategic Initiatives in furtherance of the Academic Health Center**
4. **Achieve Comprehensive Stroke Certification (*subject to change in wording*)**

FINAL ACTION: A motion was made by Chair Hagerty that the goals be approved as presented, subject to the finalization of the language of the goals. Motion carried by unanimous vote.

**SECTION 3: EMERGING ISSUES**

**ITEM NO. 9 Identify emerging issues to be addressed by staff or by the Board at future meetings; and direct staff accordingly. (For possible action)**

DISCUSSION:

None

FINAL ACTION TAKEN:

No action taken

**COMMENTS BY THE GENERAL PUBLIC:**

Comments from the general public were called for. No such comments were heard.

At the hour of 10:34 a.m., the Committee adjourned.

APPROVED:

MINUTES PREPARED BY: Stephanie Ceccarelli, Board Secretary

**UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA  
GOVERNING BOARD STRATEGIC PLANNING COMMITTEE  
AGENDA ITEM**

<b>Issue:</b> UMC Service Line Performance Overview	<b>Back-up:</b>
<b>Petitioner:</b> Tony Marinello, Chief Operating Officer	
<b>Recommendation:</b>  <b>That the Governing Board Strategic Planning Committee receive a report regarding UMC Service Line Performance Overview; and direct staff accordingly. <i>(For possible action)</i></b>	

**FISCAL IMPACT:**

None

**BACKGROUND:**

The Committee will receive an update regarding UMC's Service Line Performance data.

Cleared for Agenda  
August 15, 2024

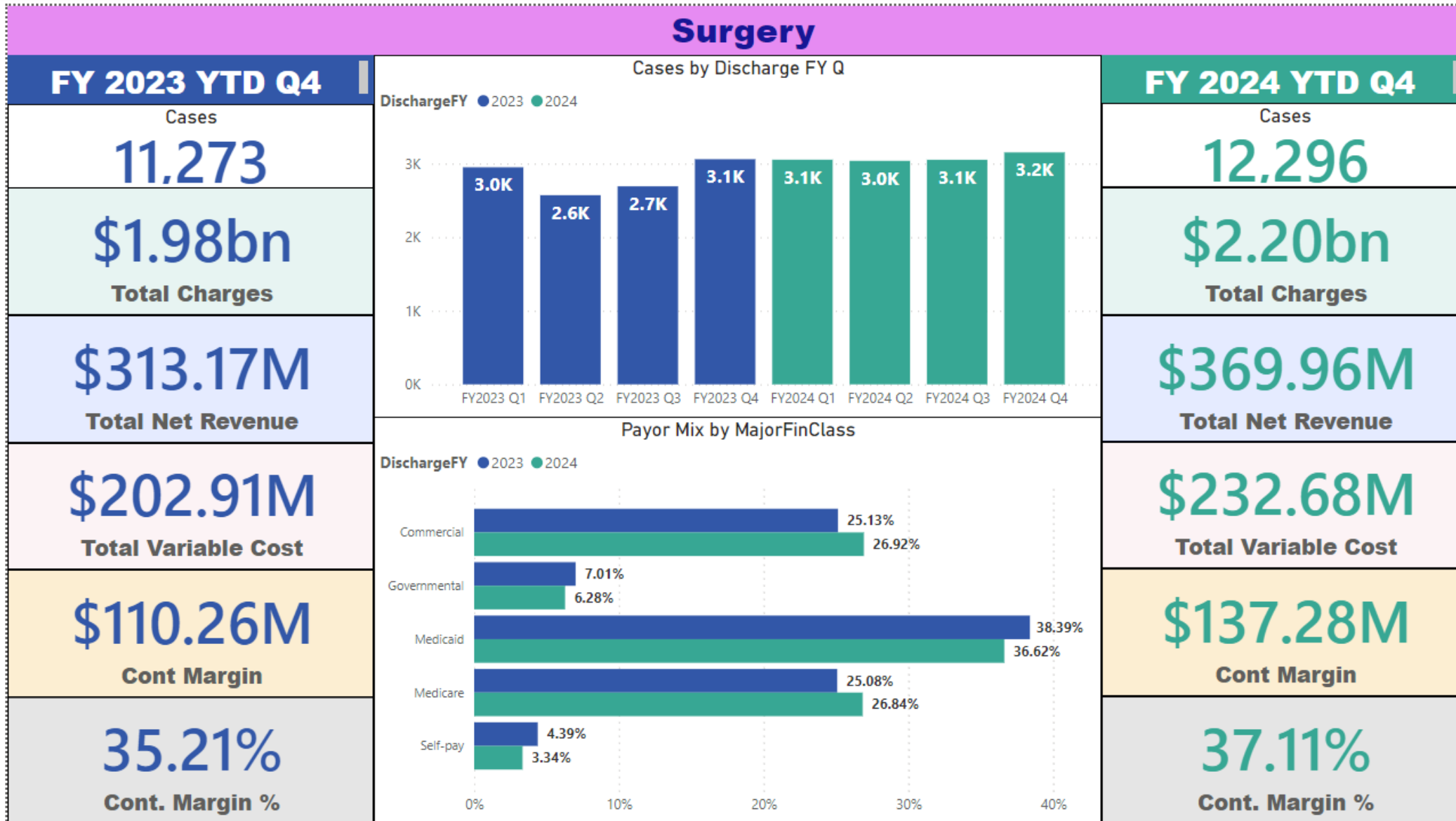
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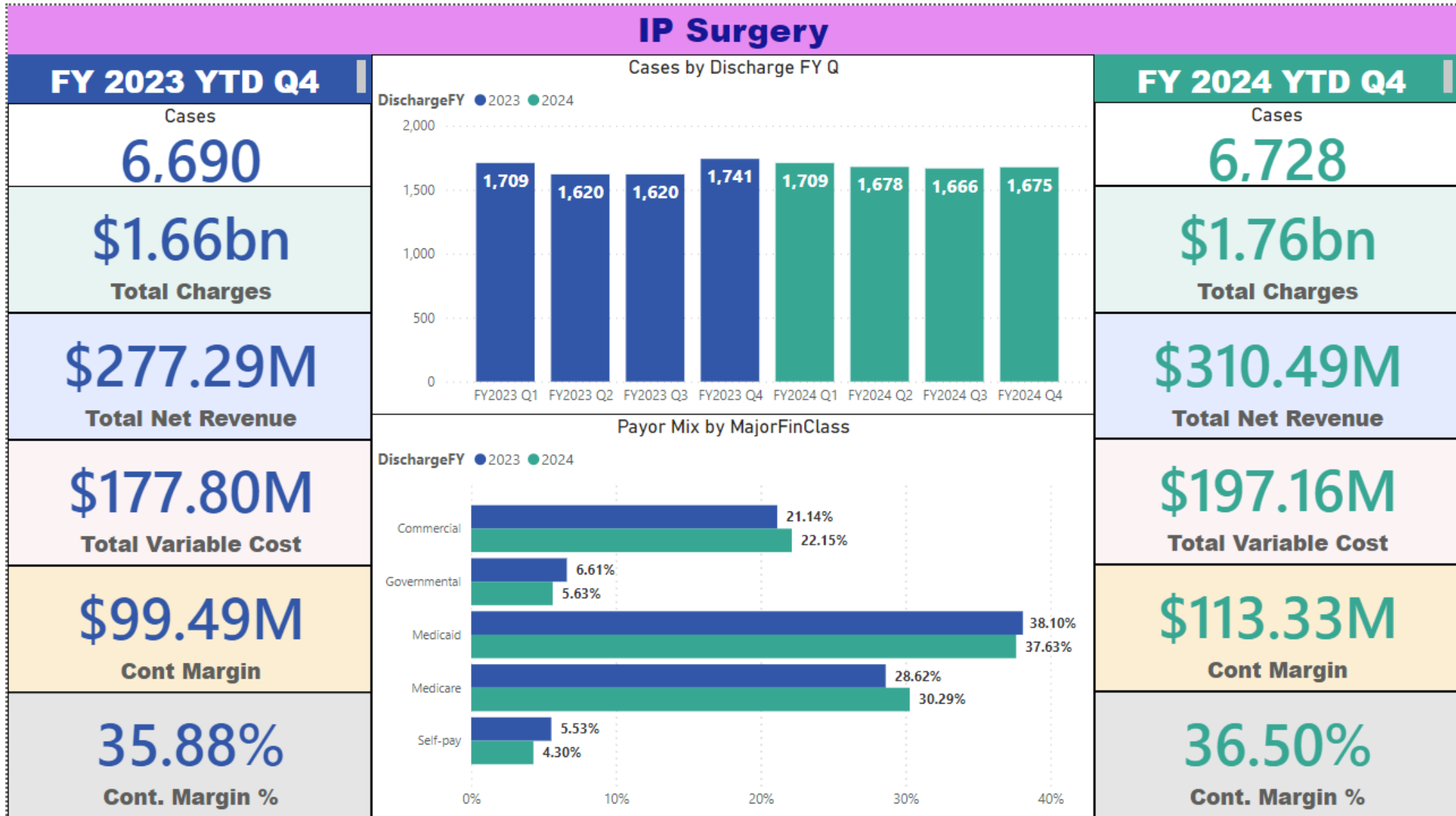
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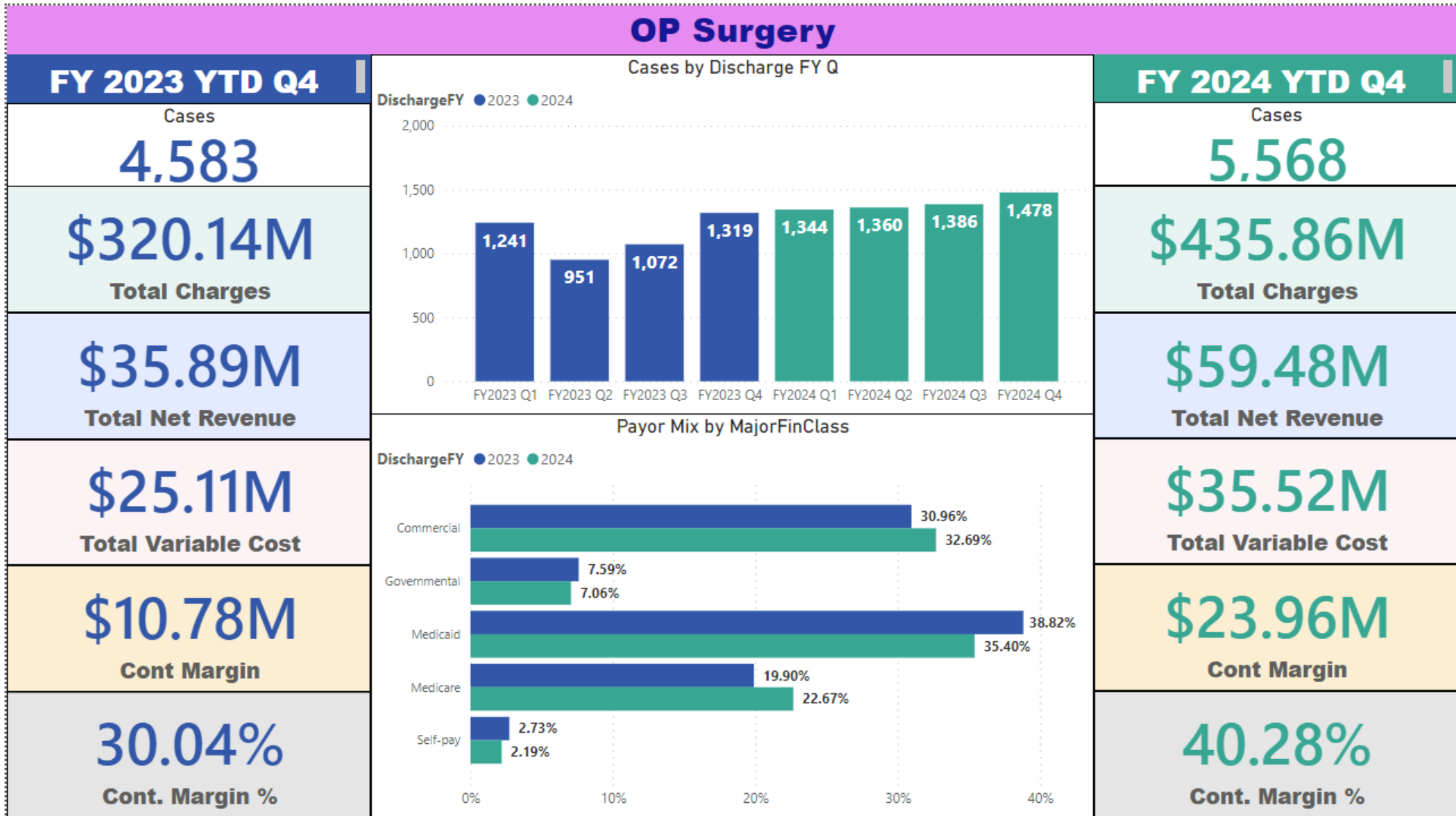


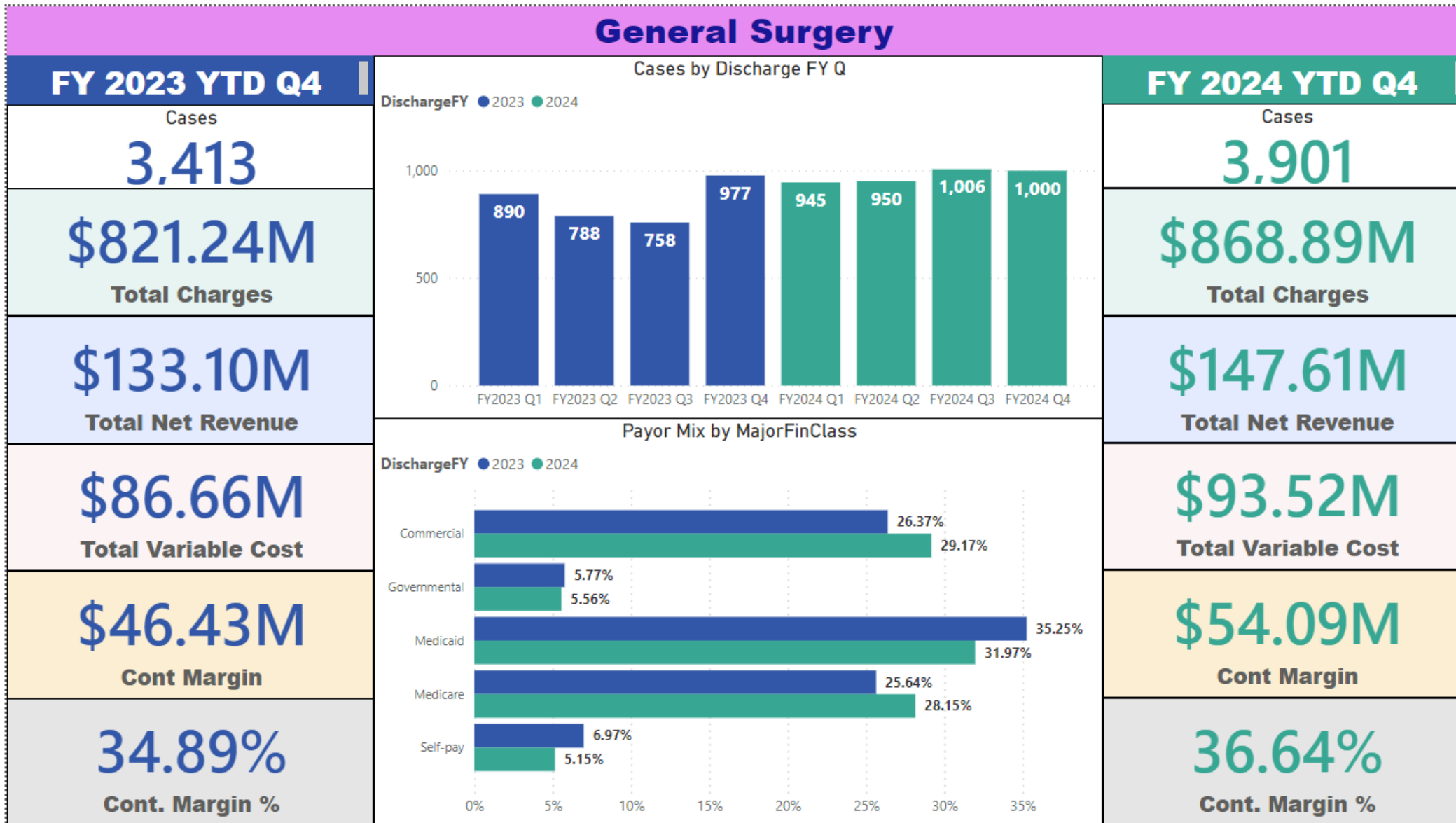
# Strategy Committee Service Line Update

August 15, 2024

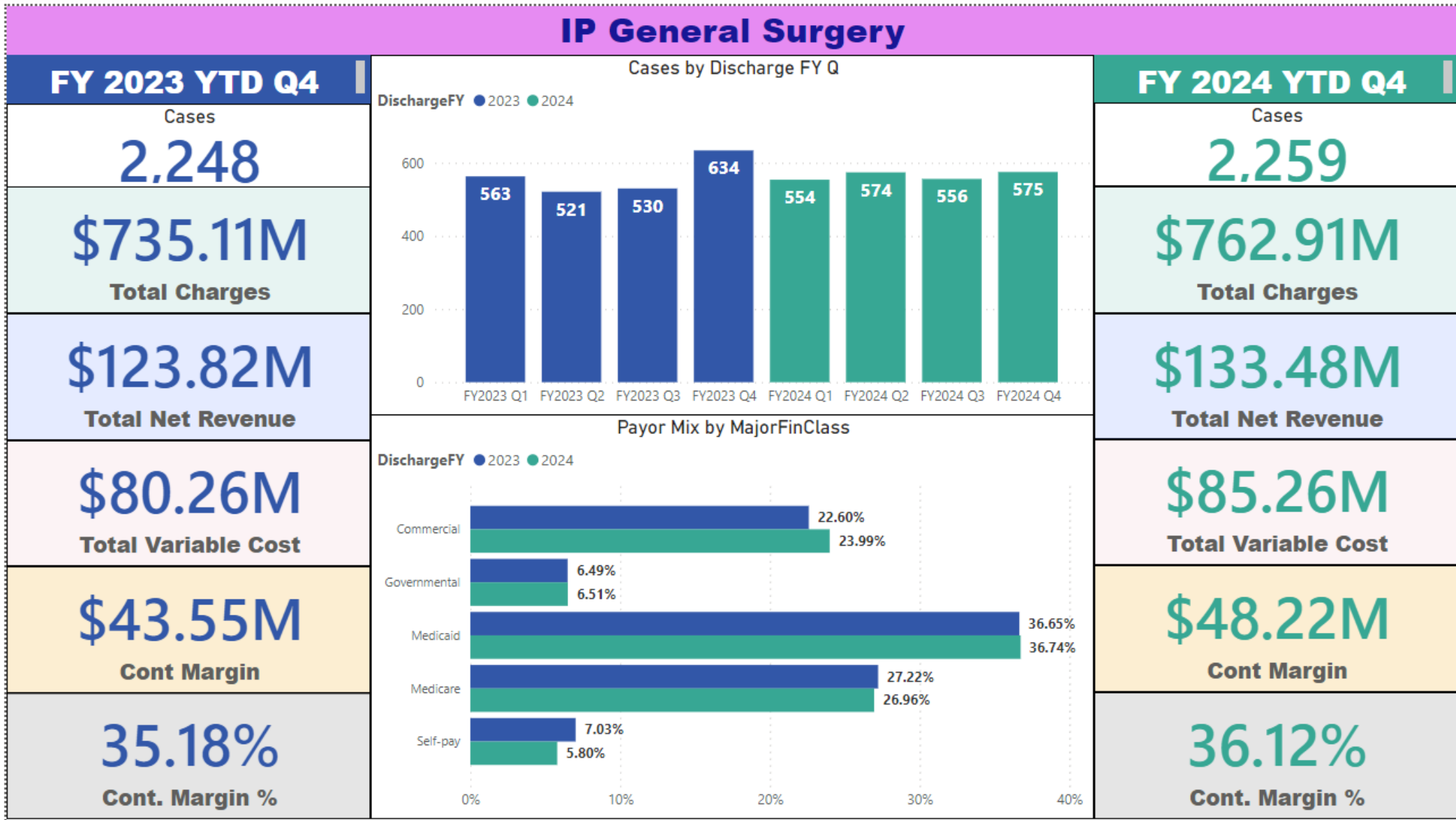


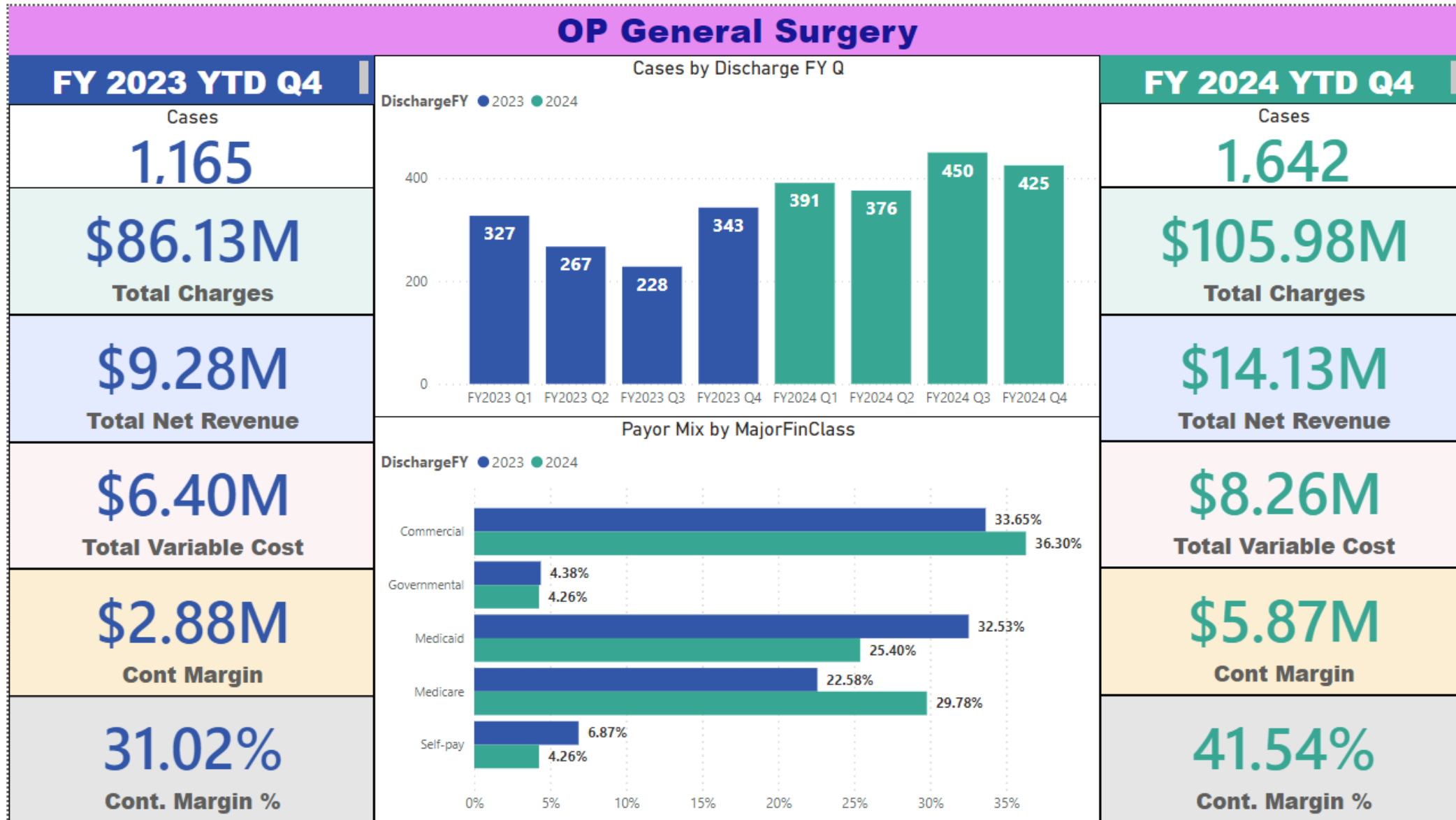












### Operational Update

- Establishment of guidelines and implementation of corrective actions pertaining to perioperative documentation and KPI initiatives
  - FCOT has risen to 60-62% consistently for April, May, and June (up by 17% compared to Q3)
    - Majority of factors have improved with the exception of “surgeon late”
      - Action Plan – formulating a data-driven FCOT corrective action policy, from similar sized academic institutions
  - Room Turnover Times at 30 minutes (meeting goal). Will continue to improve
    - Daily afternoon huddles to prepare for next days’ cases and implemented a dedicated EVS team
  - 24 hr. Cancellations on average 16 % for same-day cancellations. Goal is industry standard of 5% or less
    - Team doing a deep data dive to find root cause
- Surgical Site Infection Committee formed (multi-disciplinary)
  - Institution of evidence-based protocols to decrease surgical site infection rates and hospital-acquired pressure injuries
- Creation of multi-disciplinary task force for pre-operative risk stratification and patient safety initiatives on-going
- Collaboration with industry to increase and diversify robotic surgery application and volume
  - Robotic volume increase seen (up 30% over PY, up 13% over PQ, and up 23% over PM)
  - Robotic usage (General Surgery 70%, GYN 27%, and Other Service 3%)
- Refining EMR and IT data collection and utilization of current capabilities to streamline OR workflow

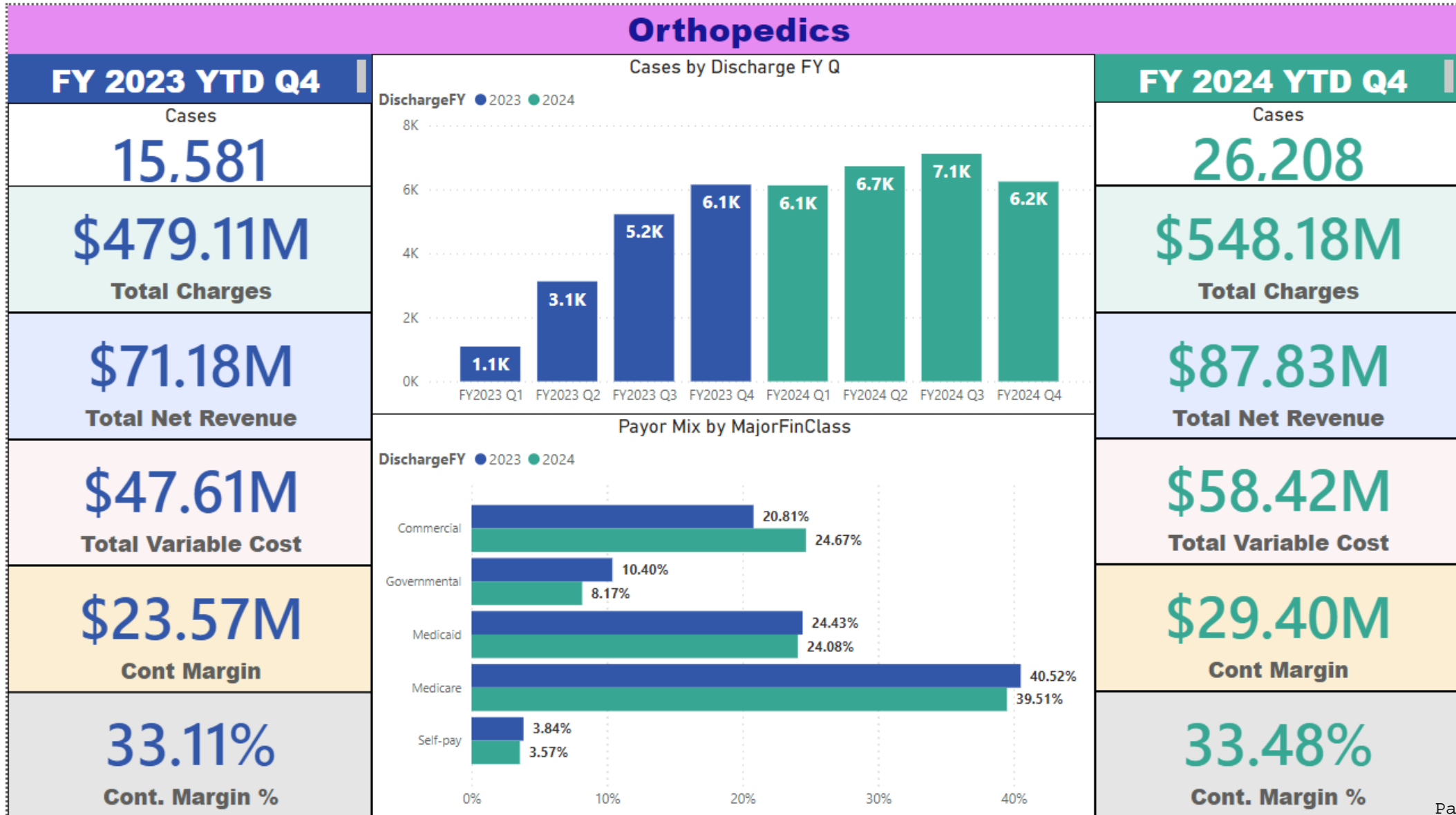
### Strategic Next Steps

- Phase II OR renovation – OR 15 & 16 (Heart Rooms) completed June 2024
- Submitted Phase III OR renovation Capital Request – Remaining OR's (rooms 1, 2, 3, 4, 9, 10, 11 and 17)
  - Update of electrical capabilities, ceilings, plumbing, airflow, and square footage expansion in 4 of the rooms
- Adding a 3<sup>rd</sup> Heart Team due to increased volumes
- Refinement and promotion of evidence-based staff research projects and education initiatives that originate within and promote our organization
  - The OR department will be submitting eight abstracts to the UMC Research Empowerment Day (and plan to submit these for publication in peer journals in the future)

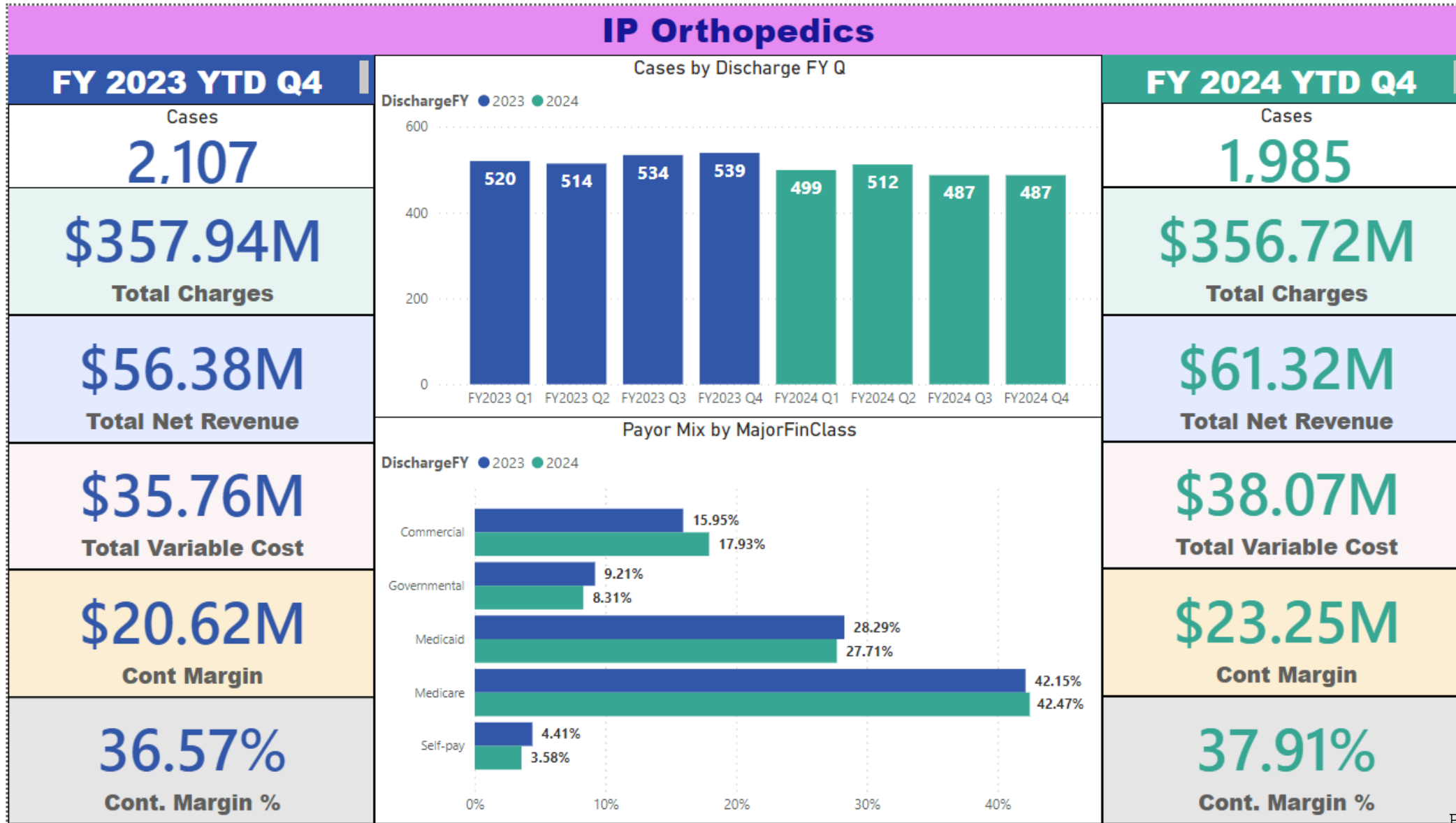
### Technology Strategy

- LeanTaas Platform for OR efficiency – Evaluation period ended and the system did not meet the needs of the organization
- EndoSoft GI Platform chosen - Physician Champion: Dr. Gordon Ohning
- Evaluation of Symani Robotic System and 3D Exoscope for micro-surgery, vascular procedures and reconstruction service lines
- Preparation to submit capital request for an additional Intuitive Robot (DaVinci 5)

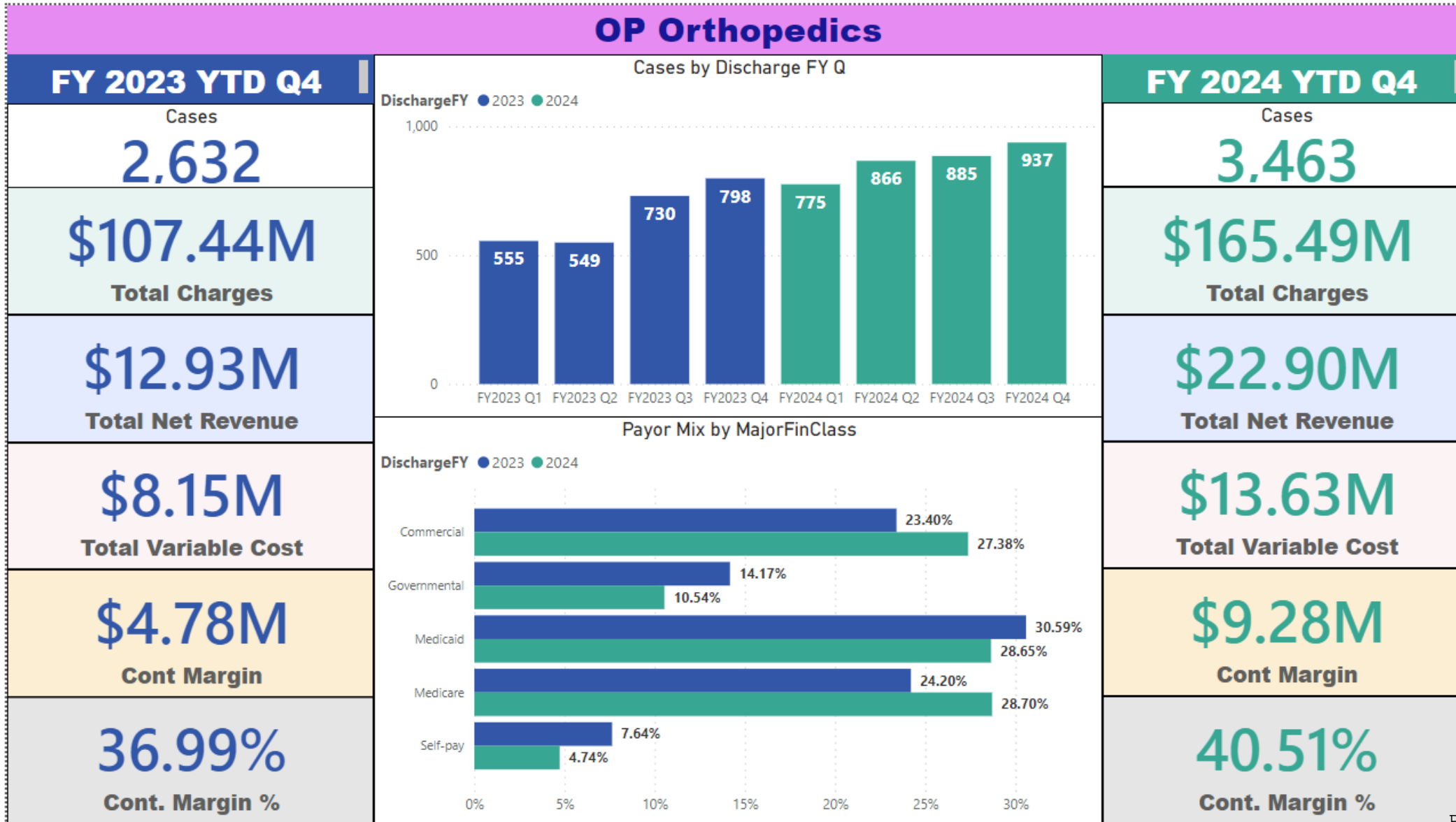
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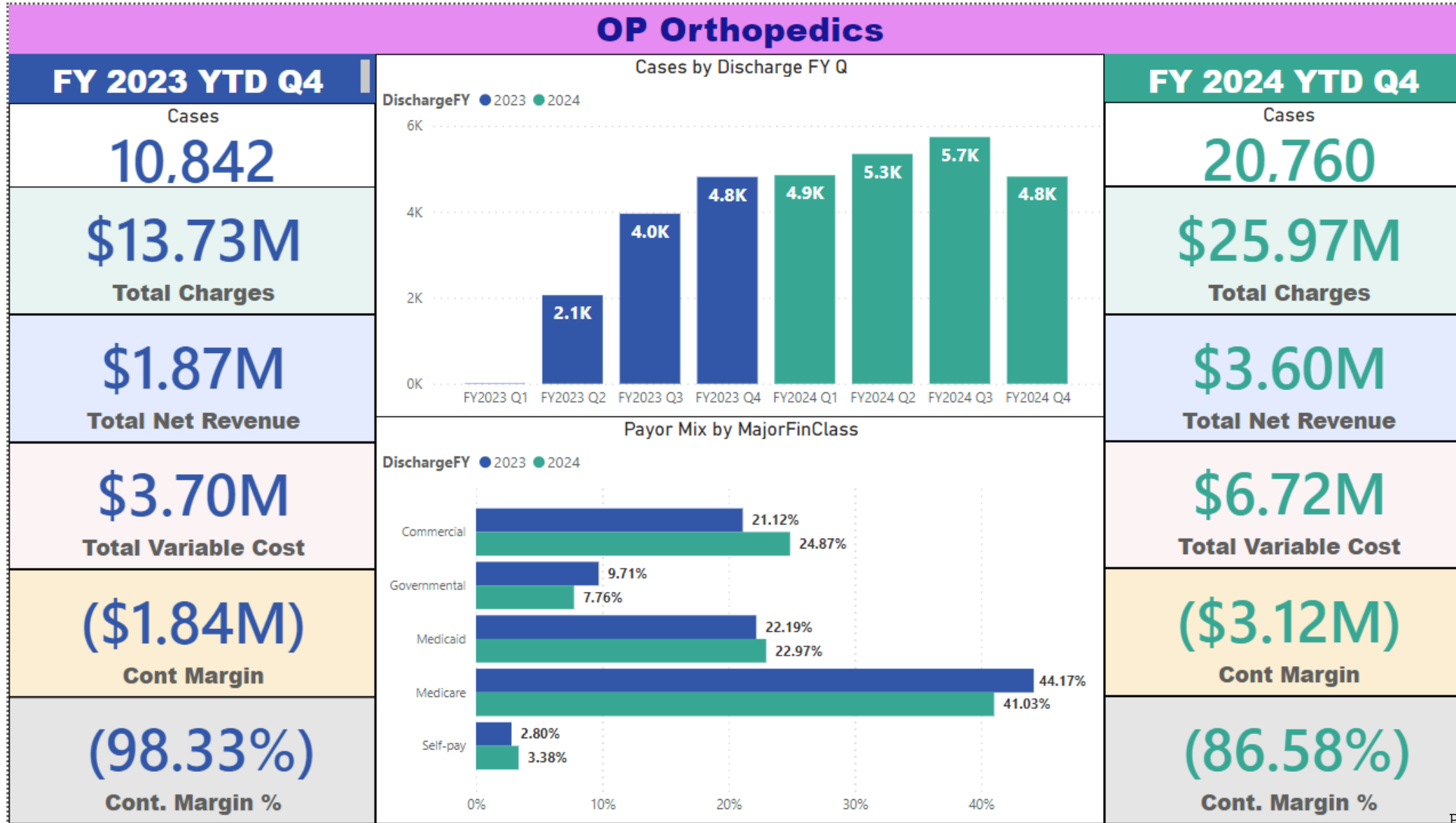
ORTHO HOPS IP



ORTHO HOPS OP



## ORTHO CLINIC





## Service Line Update

### Operational Update

- Total Hip/Knee Arthroplasty: 66 in Q4 (62 in Q3)    Total Shoulder Arthroplasty: 9 in Q4 (6 in Q3)
  - Integrative Joint Camp Class attendance is 78% (up 26%). Dr. Hansen is a champion requiring all of his patients attend
  - Early Ambulation is 97%
  - Regional block for Total Hip/Knee is 82%
  - Discharge home is 87%
  - Length of Stay at 2.2 days (Benchmark of 1.98)
- Build completed for Dashboard/Reports for Orthopedic & Spine Center AAOS
- Now sending PROMIS, HOOS Jr., and KOOS Jr. via EPIC and on paper electronic version of the pre and post-surveys in MyChart

### Expense Control and Revenue Enhancement

- Ortho Nurse Navigator working with physicians on alternative dressing
- Working with new Case Management Director to ensure case management and DME are met timely
- CFO/Materials Manager working with Arthrex Vendor on new contract

### Strategic Next Steps

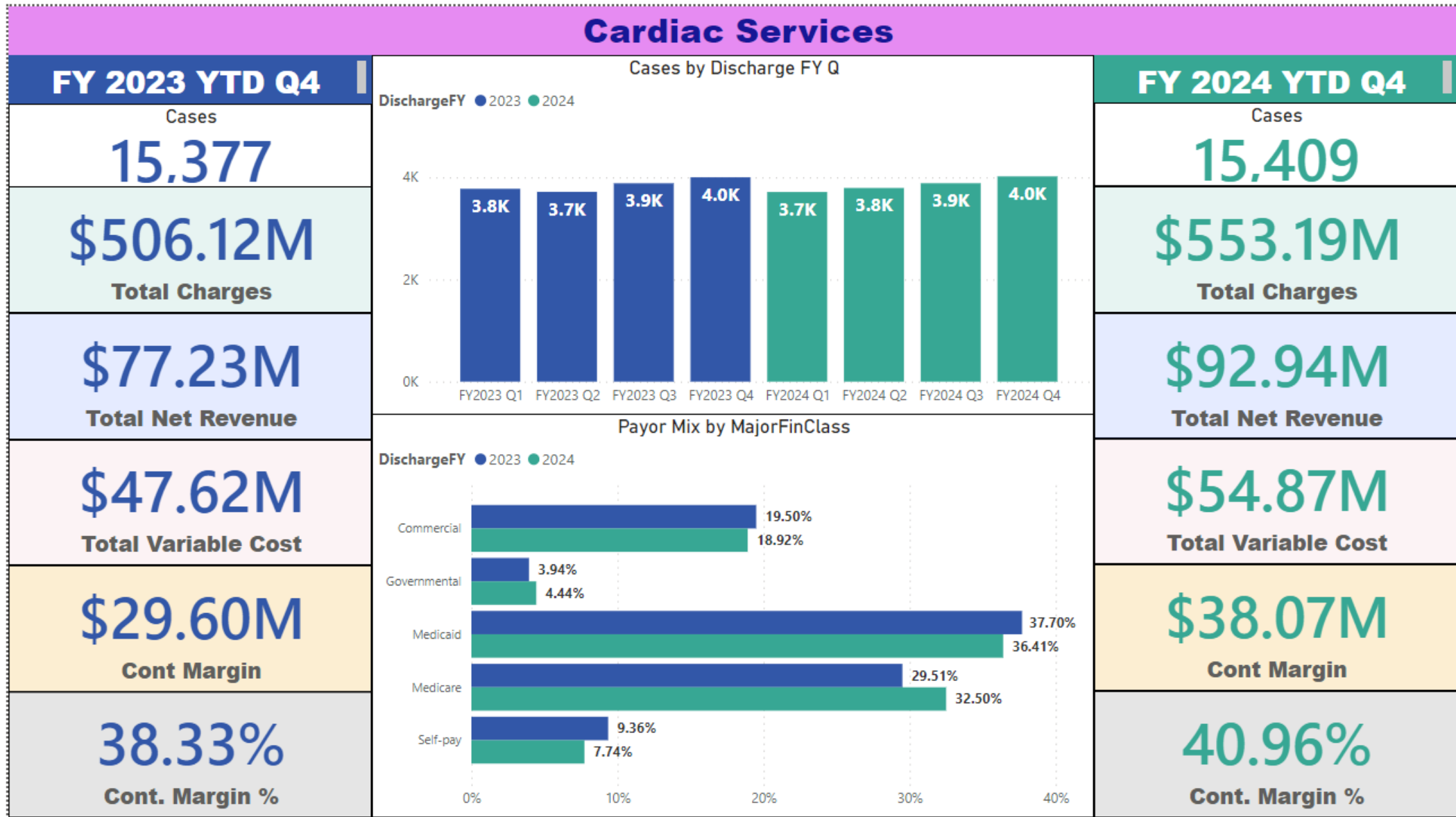
- Work with Business Development Officer to enhance the Orthopedic Program
- Apply for Hip/Knee Advanced Certification
- Monthly Orthopedic Program meeting to review data, processes and areas for improvement for Surgical Services
- Adding a Spanish class for Pre-op Joints

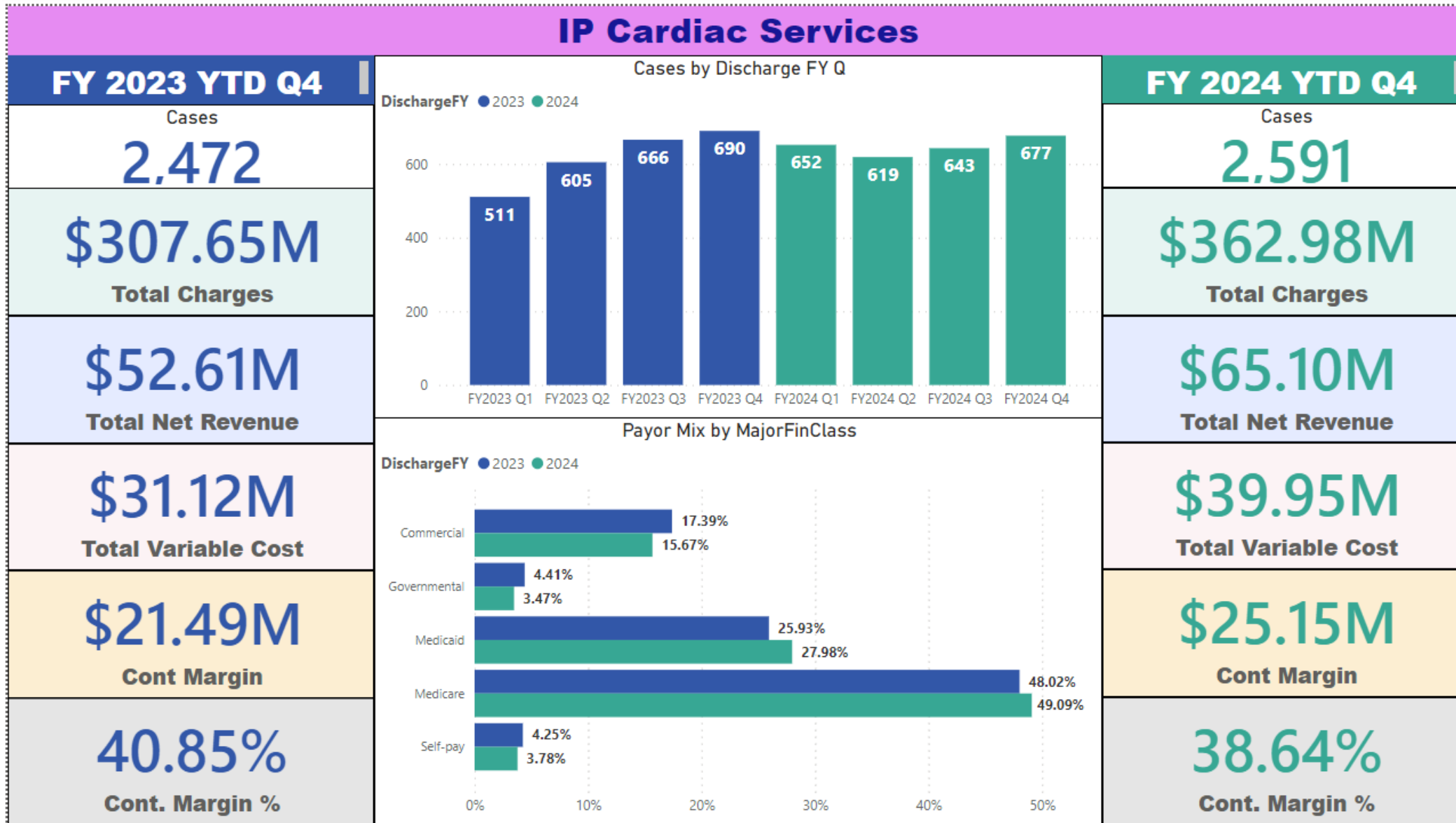
### Operational Update

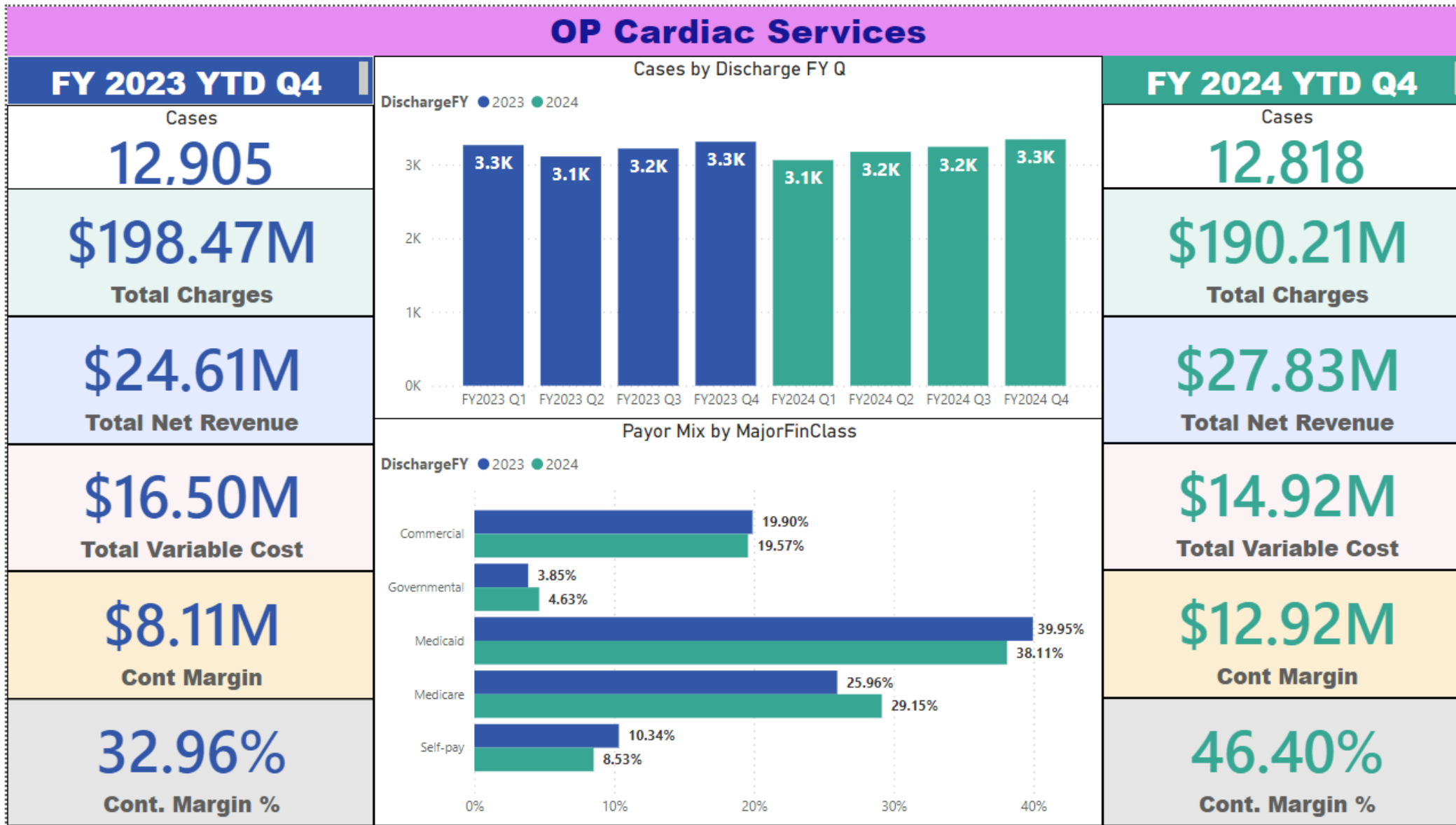
- Total number of Providers:
  - 12 Surgeons, including one trauma fellow
  - 1 Non-operating physician
  - 4 APNs
- Orthopedic and Spine Institute of UMC Clinic (last 12 months):
  - Total Visits: 20,760 up 9,918 (PY 10,842)
  - No Show Rate: 13.2% (down 0.2%) Goal <10%
  - Calls received: 81,447 (119% increase in call volume) Call volume for July 2024: 7,066 compared to 2023: 4,800
  - Call Abandonment rate: 13% goal <10%
    - Department fully staffed in July and the abandonment rate dropped to 6.1%
- Second location opened at Rancho Clinic

### Strategic Next Steps

- Adding 2 new triage physicians to the clinic: First in September, second one starting in October
- Adding a new Trauma surgeon in December and a Pediatric Trauma surgeon in November
- Refresh of present Ortho building to be completed by mid-November
- Reviewing the potential usage of Lied Building to expand Ortho in late October.
- Continuing search for Ambulatory Surgery Center (ASC)







### Operational Update

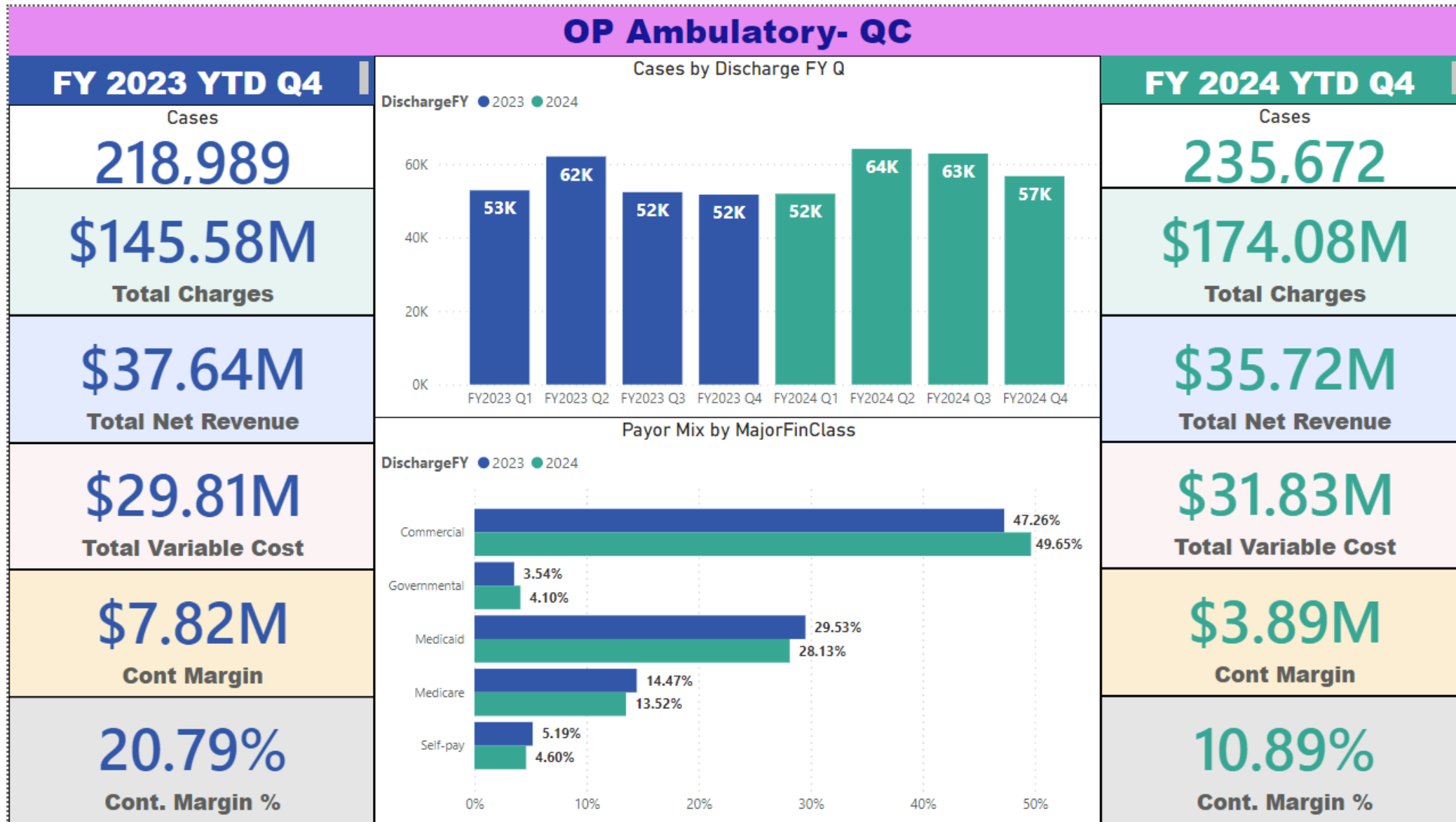
- Cath Lab volume averaging 215 per month. Now limited only by lack of procedure rooms.
- TAVR Program - 110 cases performed to date.
- Watchman (LAAO) - 99 procedures performed as of 6/30/24
- Structural Heart program exceeding first year expectations with TAVR, Watchman and now PASCAL
- 3<sup>rd</sup> Cath Lab Procedure Room completed. Recovery space will be completed August 28

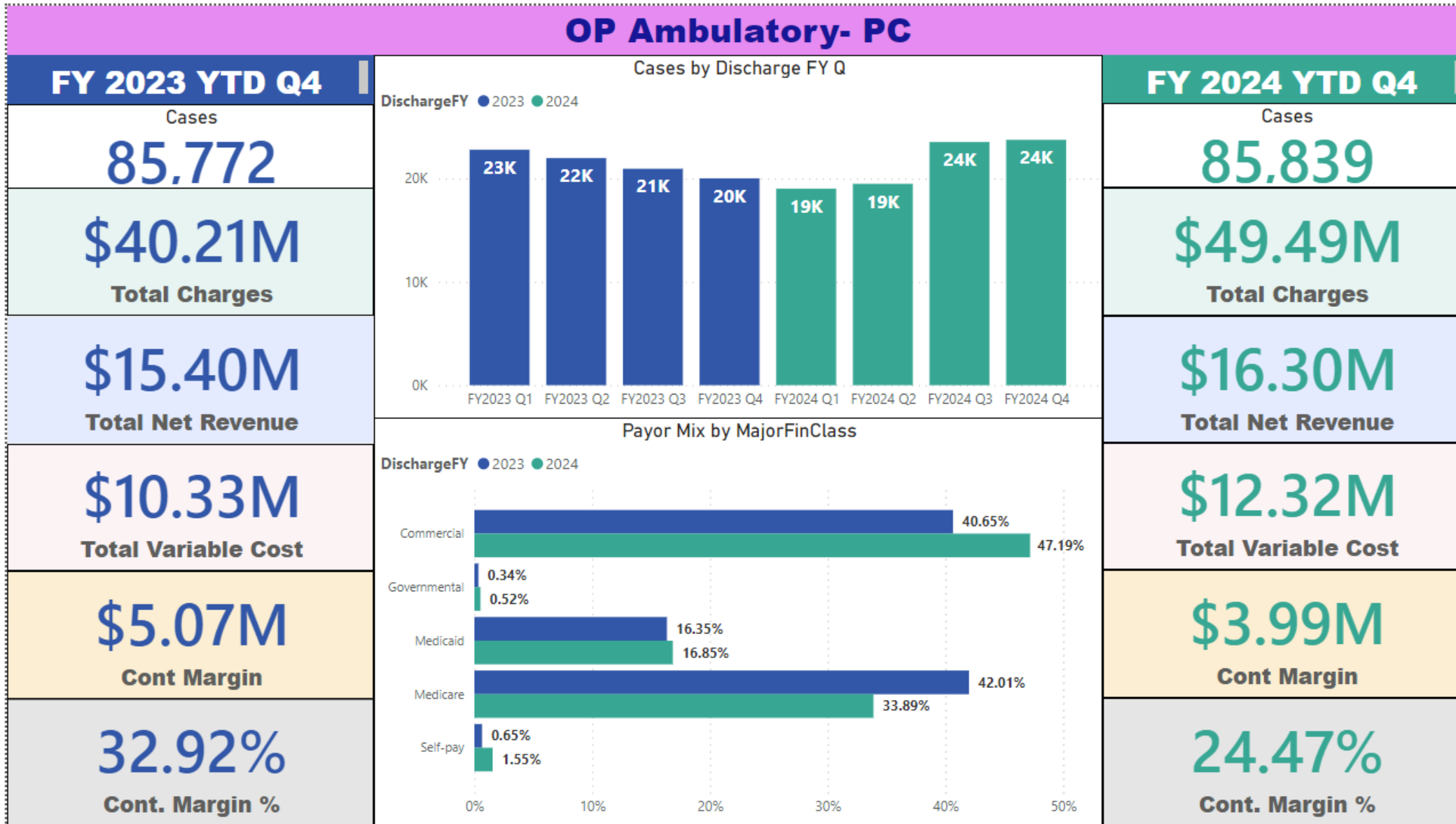
### Expense Opportunities

- Qualified for and expect \$80K in rebates.
- Renegotiate current contracts with vendors to increase per case profit without a compromise to patient safety.
- Service line to include new procedures. Starting Renal Ablations (for HTN) and Sleep Apnea procedures in August 2024
- New EP system will reduce procedure cost and time. Negotiating volume-based agreement to decrease up-front capital

### Strategic Next Steps

- Work with Materials Management to replace inventory system, resulting in cost efficiency, enhanced productivity, scalability and utilization management
- Work with cardiologists to decrease time for patient work-ups
- Launch Marketing Campaign in November 2024
- Provide peripheral procedures to attract vascular surgeons and provide support to Interventional Radiology







## Service Line Update

### Operational Update

- Primary Care/Quick Care volumes
  - PC – 23,733 visits 14% below budget, –Sunset and Nellis both closed for 1 week for repairs, YOY Volume flat
  - QC – 54,550 visits 23% below budget - Sunset and Nellis both closed for 1 week for repairs, YOY Volume up 7%
- POS collections FY24 Q4 - \$1,300,814
- PC schedule utilization rate – 76%
- No Show rate – 13% (goal of <10%)
- Referrals per month – 15,536

### Expense Opportunities

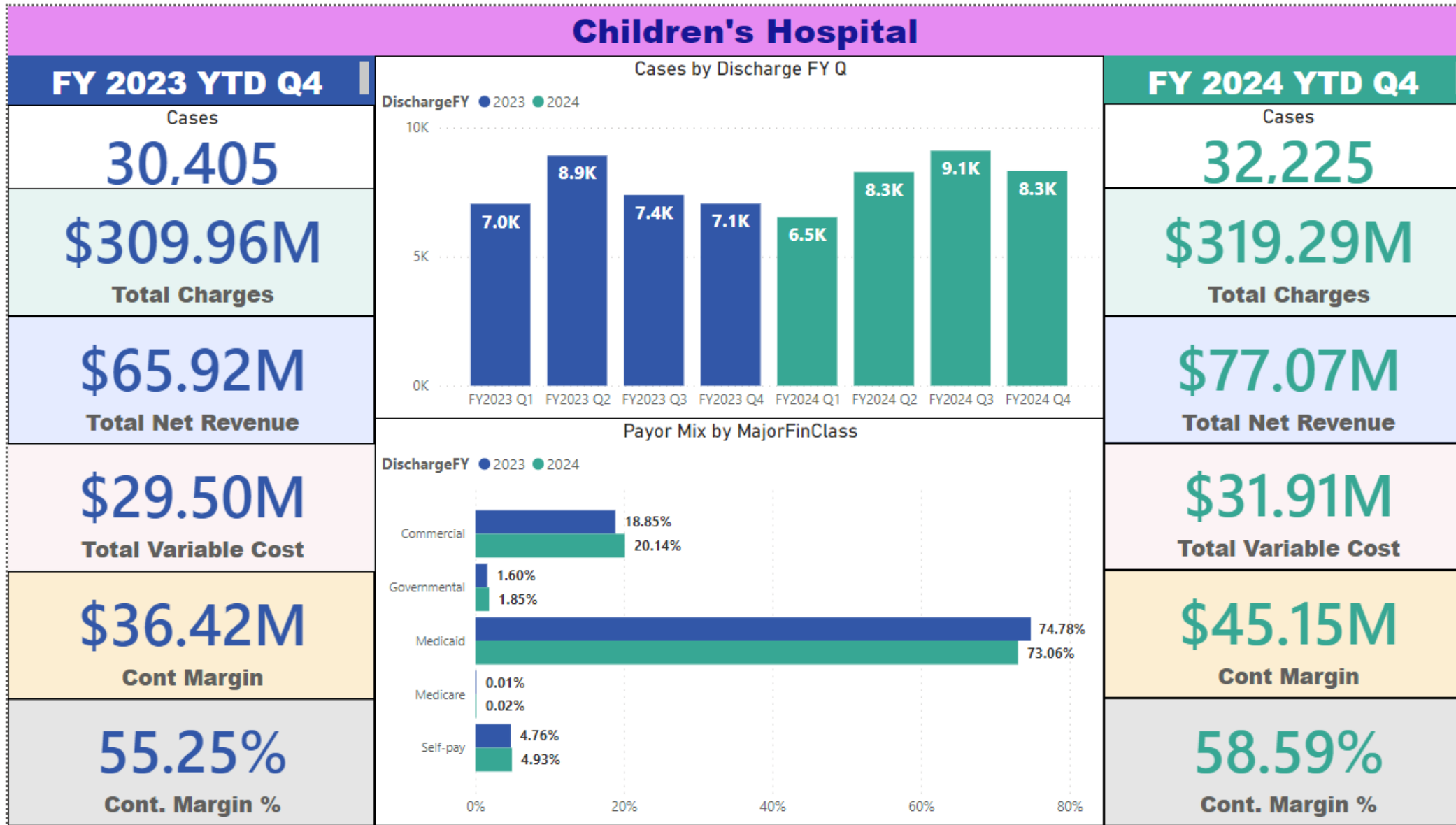
- Increase Value Based Care incentive payments
  - CCM Vendor Master Agreement completed. Estimated 90-day process to onboard
  - Increase Annual Wellness and Comprehensive Exam visits
  - Close gaps in care
  - Increase Star Ratings

### Strategic Next Steps

- Laughlin - Telemedicine
- Expand PC/QC Footprint – Southern Highlands expansion to be complete in December.
- Digital Arrivals – patient to self-register and check-in using a self-service kiosk

### Technology Strategy

- Ticket scheduling – provider creates order for next visit, order triggers email, text and MyChart reminders
- E-Visit allows patients to communicate electronically with provider (E-visit will be billed) – *This is live!*
- Enable Epic On My Way in Urgent Care – allows patients to see wait time in QC and make an “appointment”
  - This capability will be live with the opening of the Southern Highlands Quick Care (Jan 25)
- Hello World SMS appointment reminders, billing notifications, and status notifications to families/friends for patient’s in surgery – *This is live!*
- Open scheduling to allow current and prospective patients to self-schedule appointments from web site link with Go live at end of the year
- Overhaul of Kiosks in each clinic – allows patients to be more self-sufficient in the registration process
- E-Check in and self-arrival for new and existing patients
- Implementation of Payer Platform will decrease denials and improve prior authorization process



## IP Children's Hospital

**FY 2023 YTD Q4**

Cases

**2,274**

**\$158.23M**

**Total Charges**

**\$38.50M**

**Total Net Revenue**

**\$19.60M**

**Total Variable Cost**

**\$18.90M**

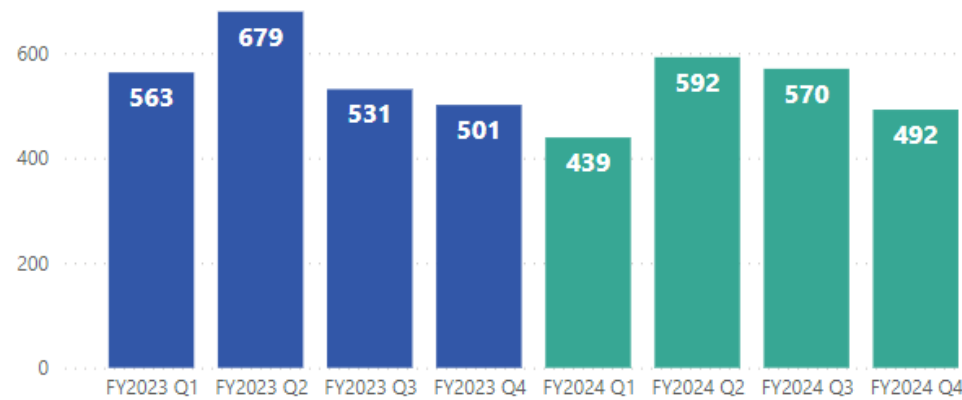
**Cont Margin**

**49.10%**

**Cont. Margin %**

Cases by Discharge FY Q

DischargeFY ● 2023 ● 2024



**FY 2024 YTD Q4**

Cases

**2,093**

**\$155.71M**

**Total Charges**

**\$41.09M**

**Total Net Revenue**

**\$19.82M**

**Total Variable Cost**

**\$21.27M**

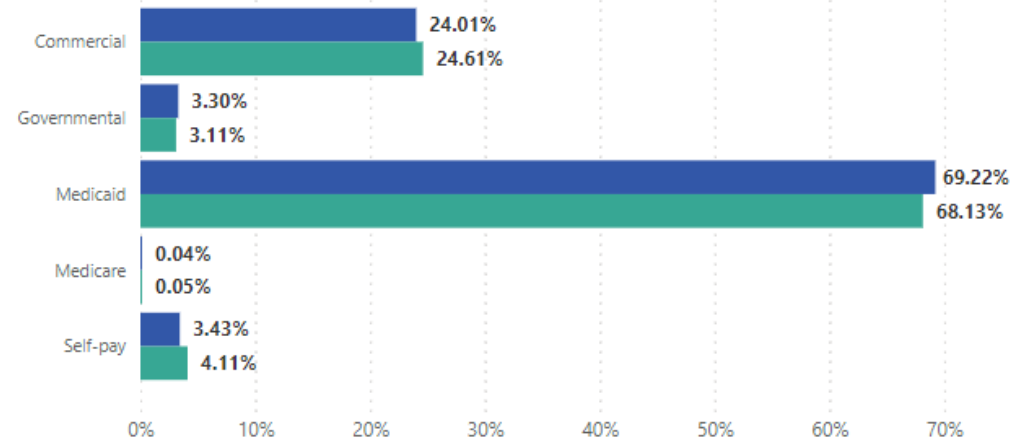
**Cont Margin**

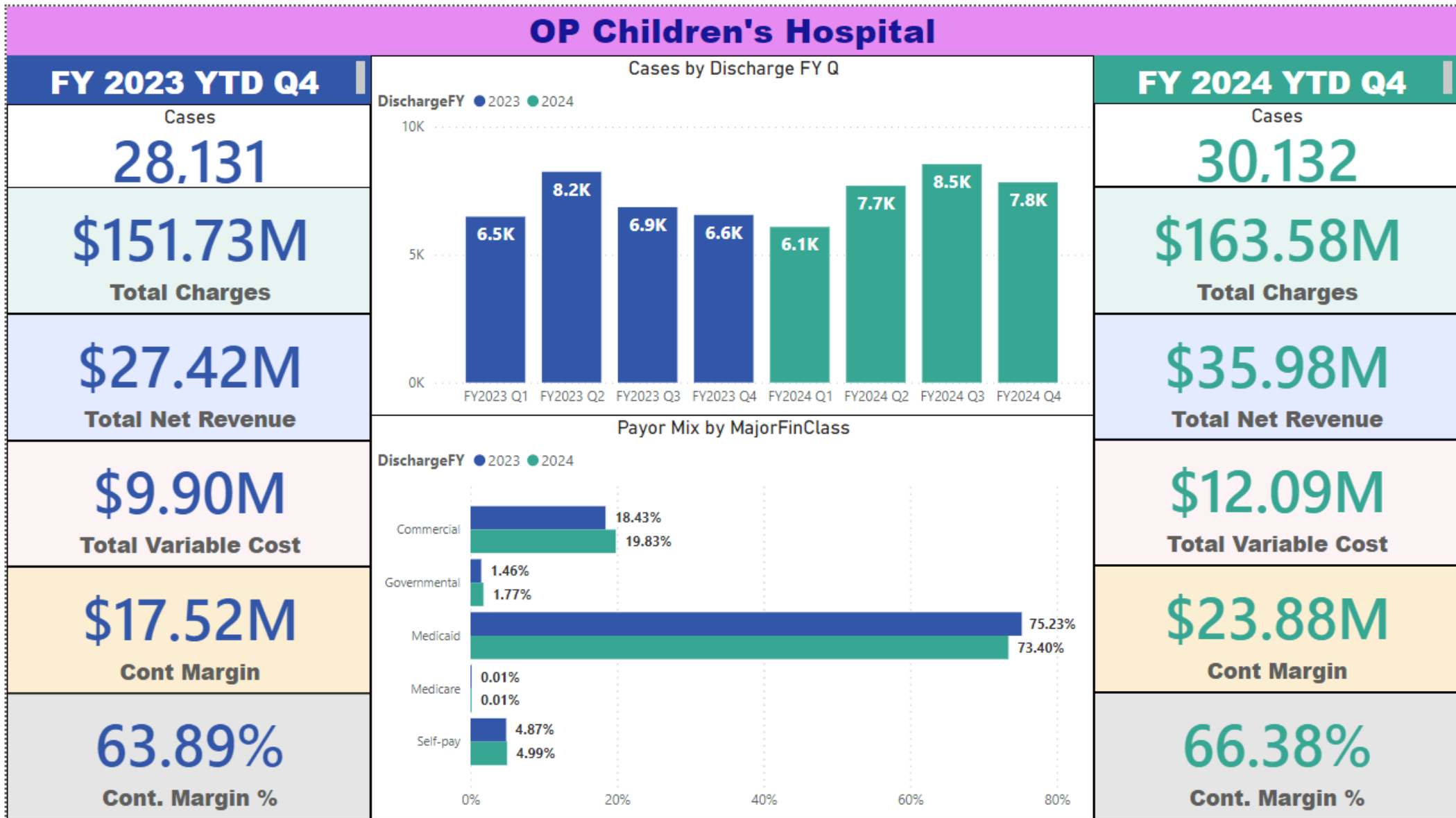
**51.77%**

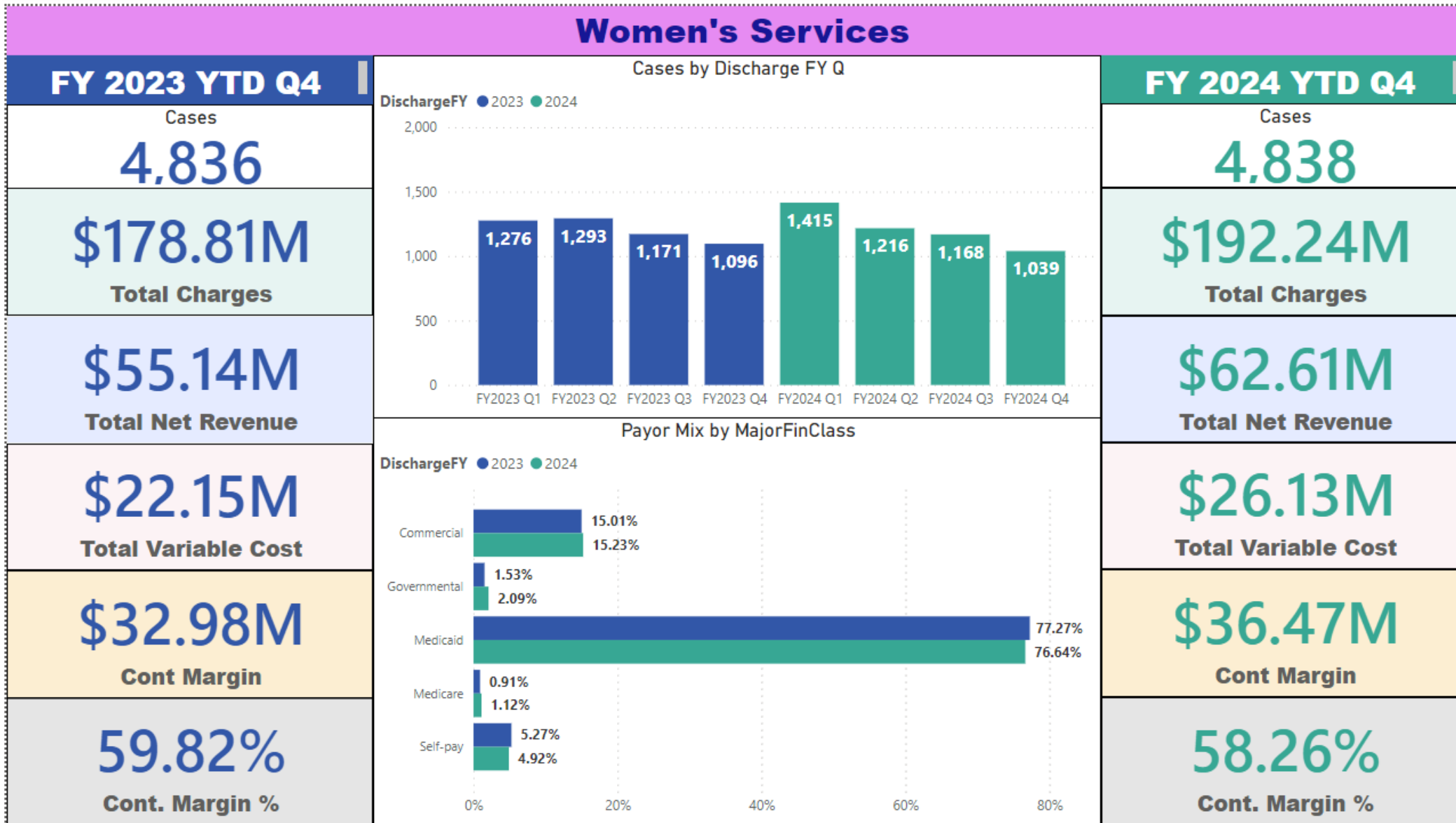
**Cont. Margin %**

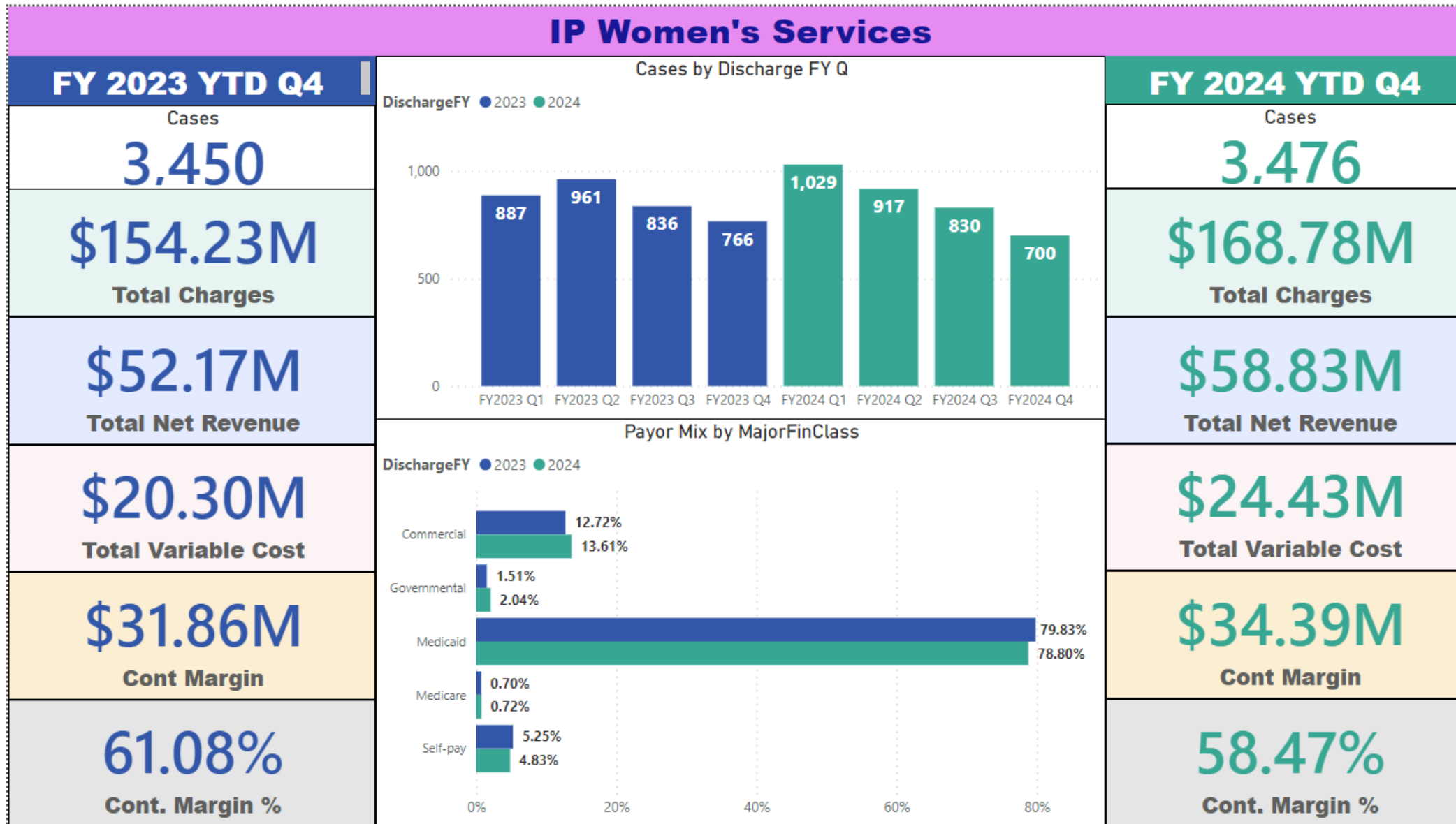
Payor Mix by MajorFinClass

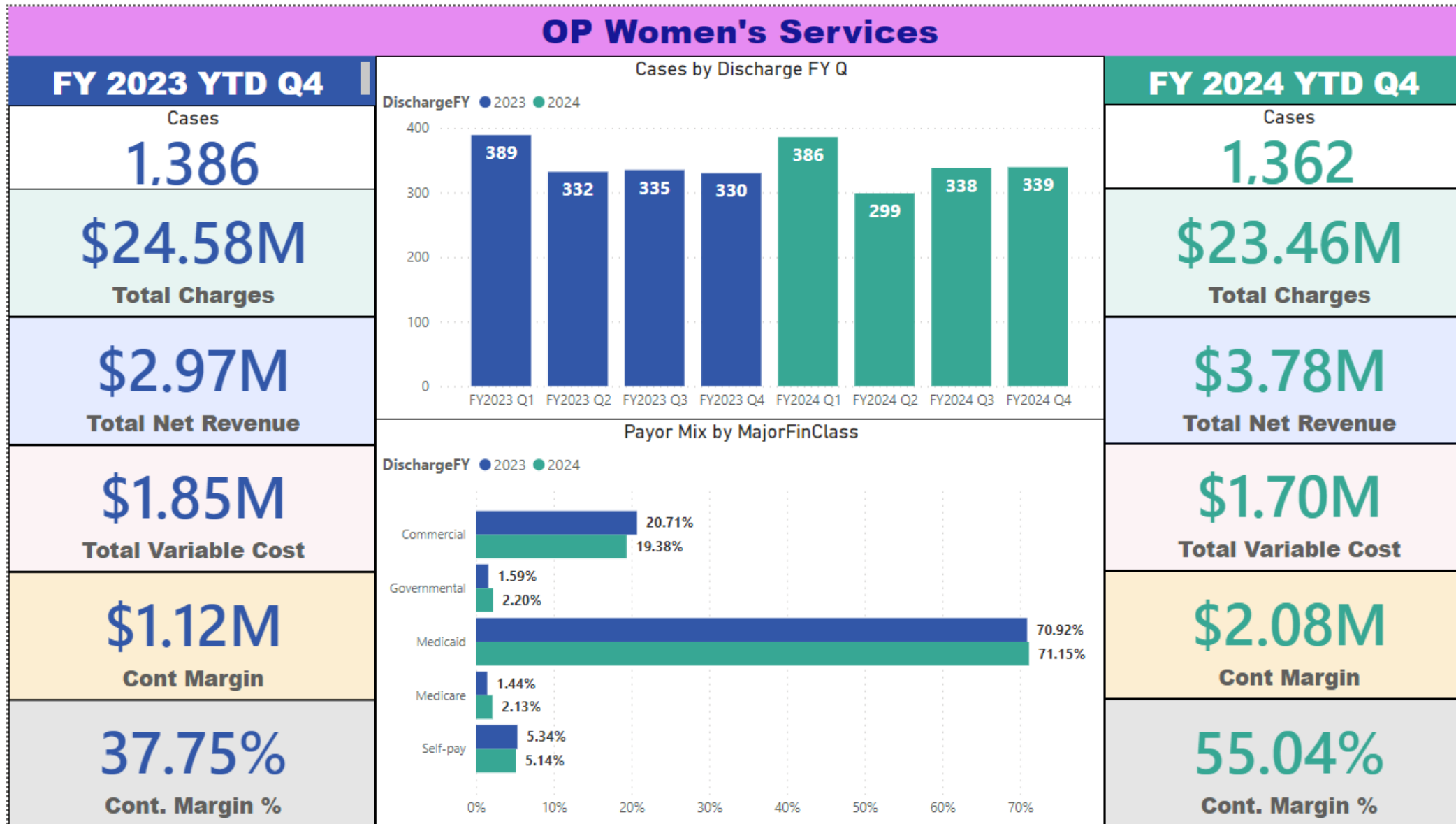
DischargeFY ● 2023 ● 2024













## Service Line Update

### Operational Update

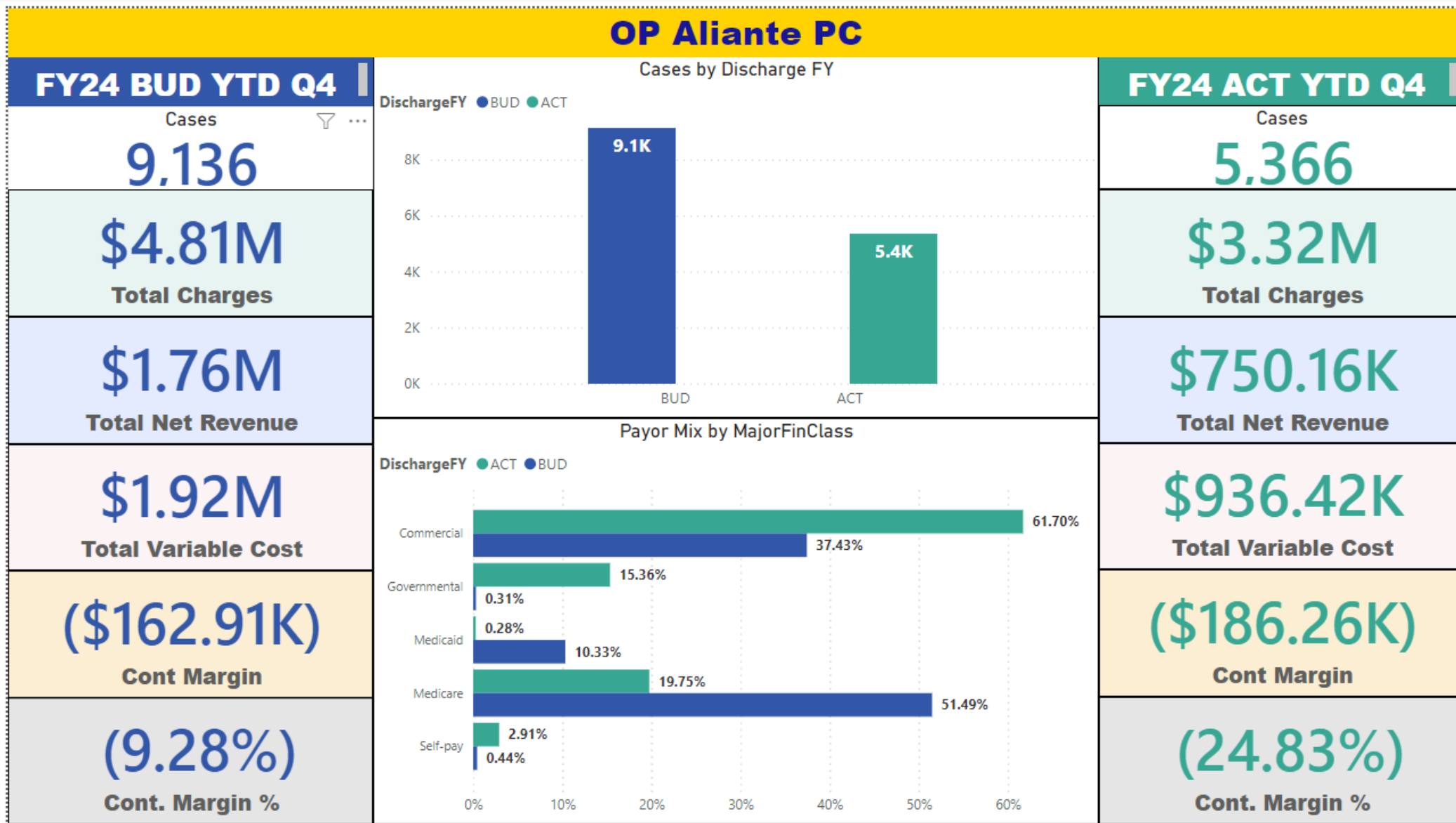
- Safe Sleep performance improvement project continues in Pediatrics
  - Perinatal and NICU are Safe Sleep Gold Certified (the only Gold Certification in Nevada)
- Child Life is now fully staffed and serving all of Maternal Child in addition to Burn, Trauma and Pediatric ED
- Pediatrics implementing iPads with games and Disney+ for distribution to inpatient pediatric patients while hospitalized
- NICU reunion for NICU graduates scheduled for October 26, 2024 at the Clark County Amphitheater

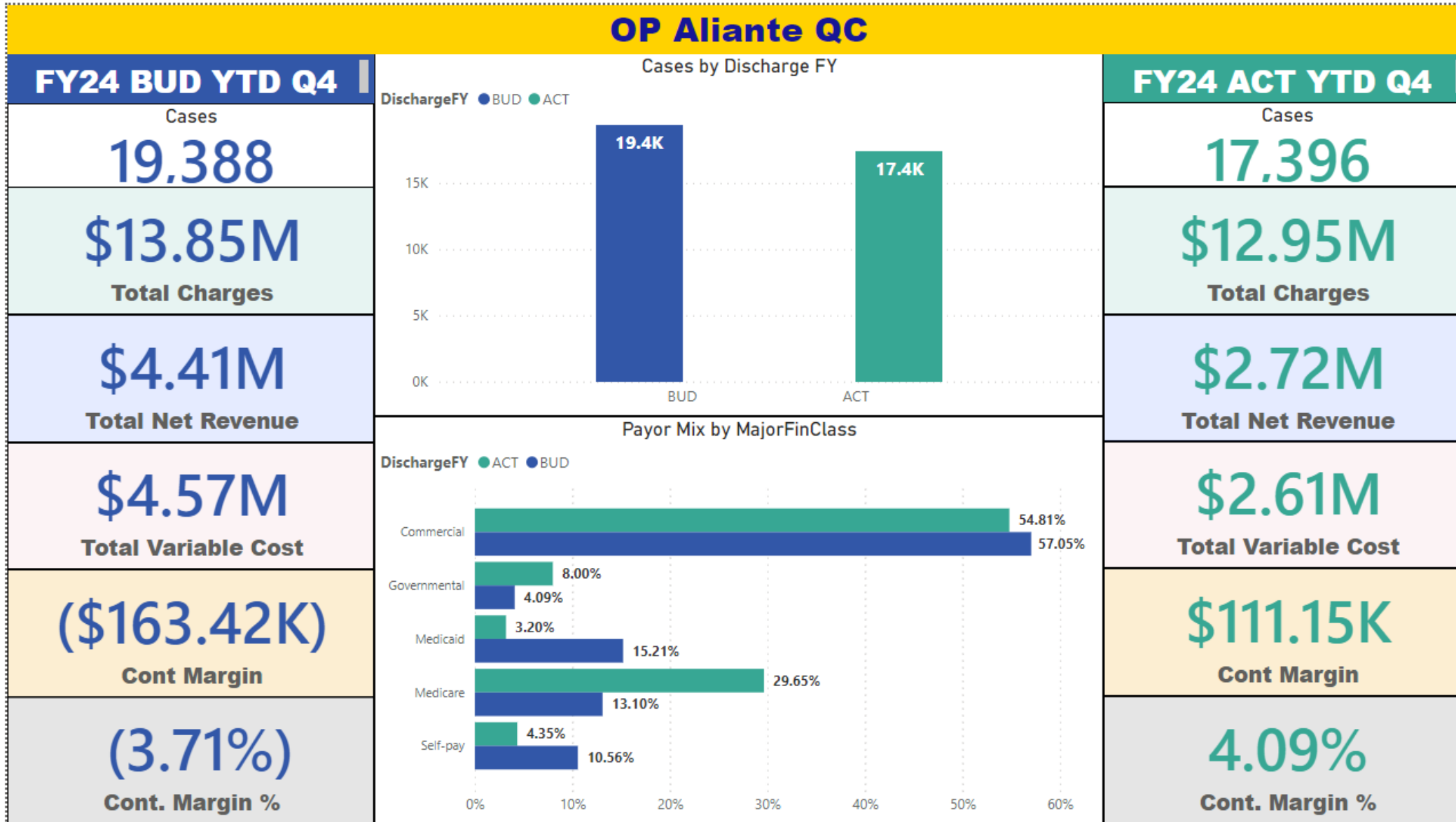
### Revenue Enhancement

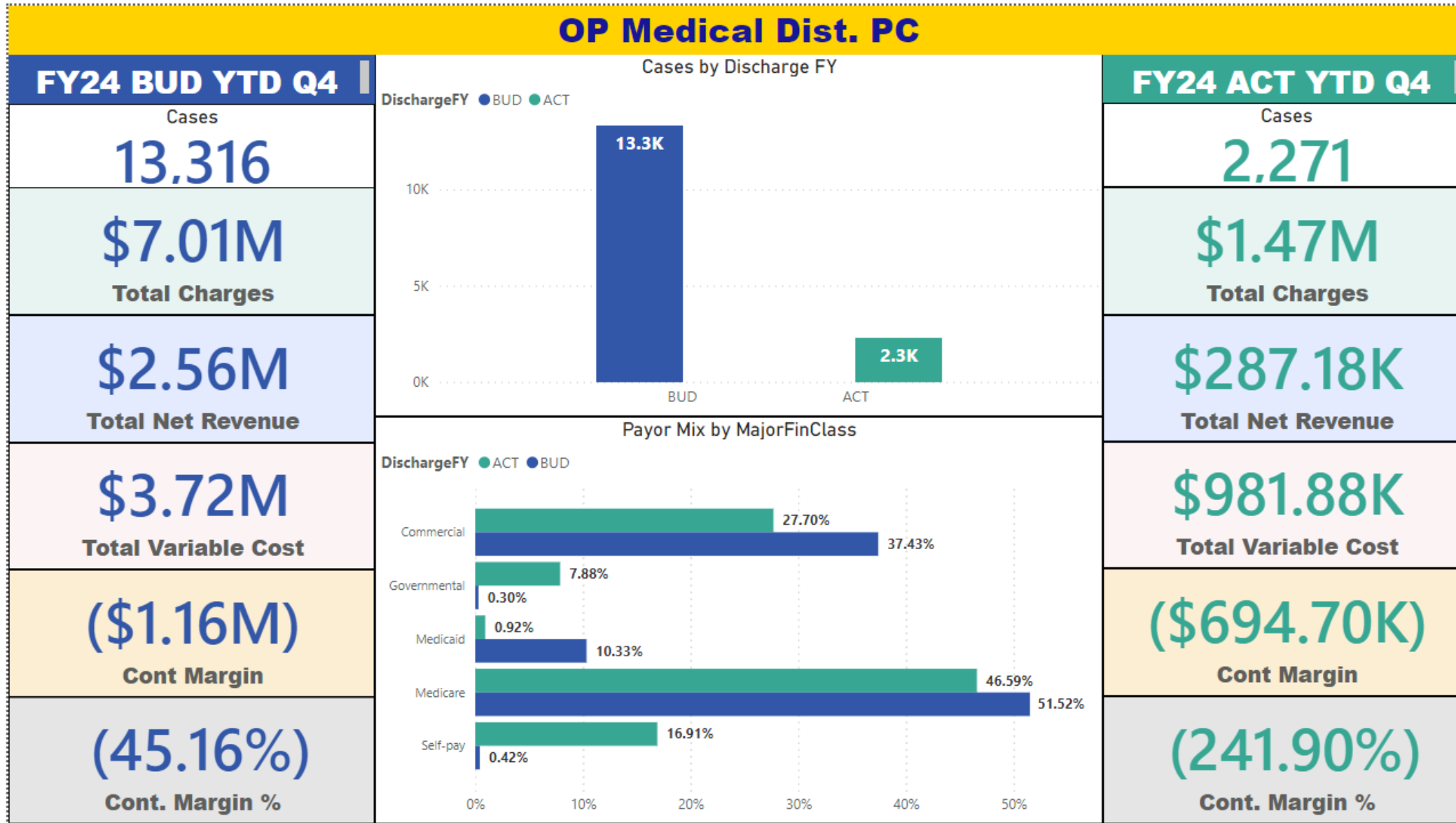
- Increase delivery volumes
- Maternal Child units continue to focus on the reduction of overtime
- Antepartum Testing approved and EPIC build is ongoing. EPIC build is also occurring for Perinatal D&C and other outpatient procedures

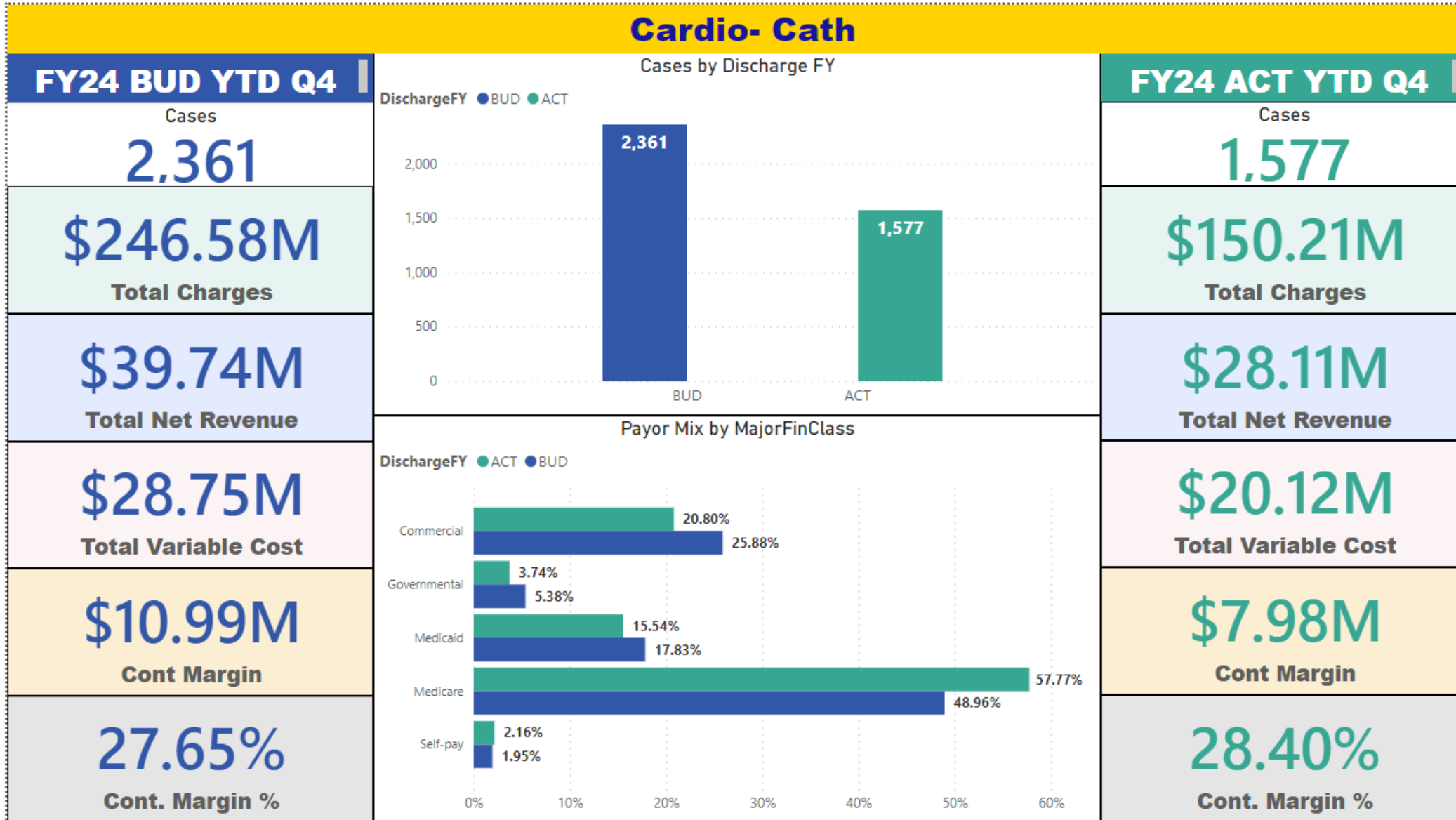
### Strategic Next Steps

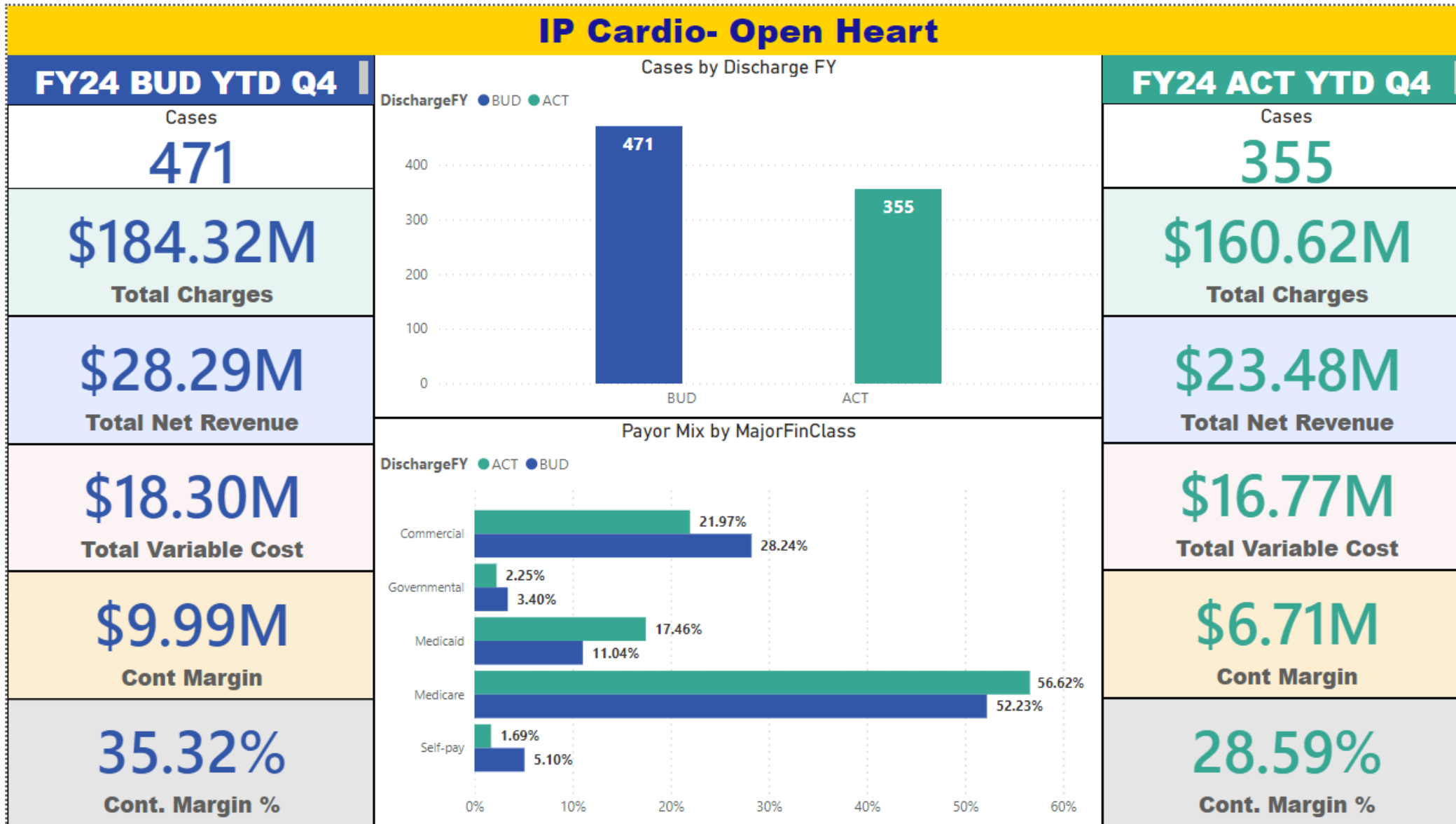
- Pediatric interdisciplinary team exploring a standardized treatment algorithm for asthma that improve outcomes
- Enhance Women's and Children's service line with Pediatric Transplants
- A Maternal Child Diabetic Educator has been hired
- Increase census of antenatal patients on the unit and encourage these patients to deliver at UMC
- Perinatal working with surgery to move D&Cs and some Tubal Sterilizations to the 7<sup>th</sup> Floor OR's

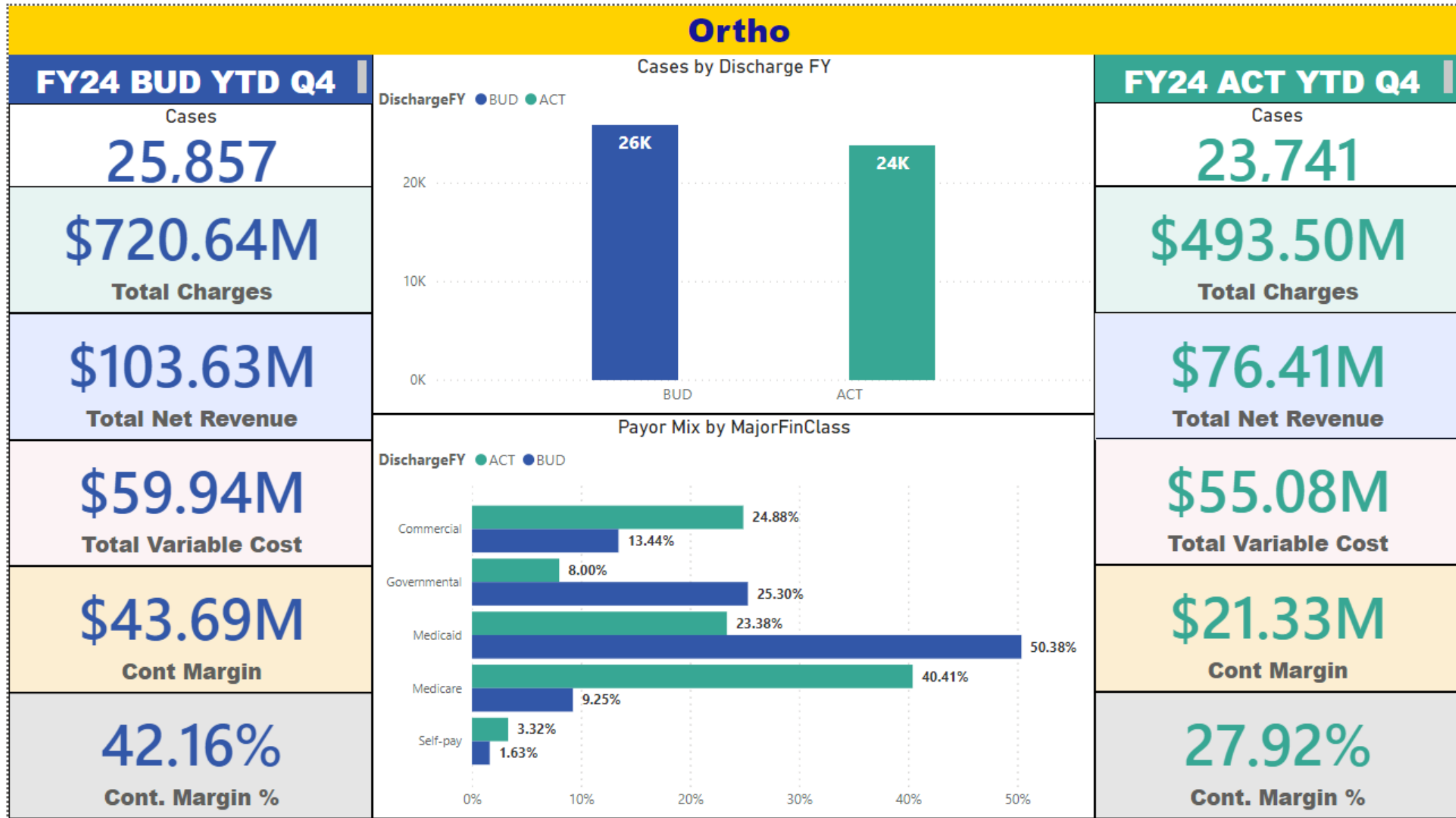


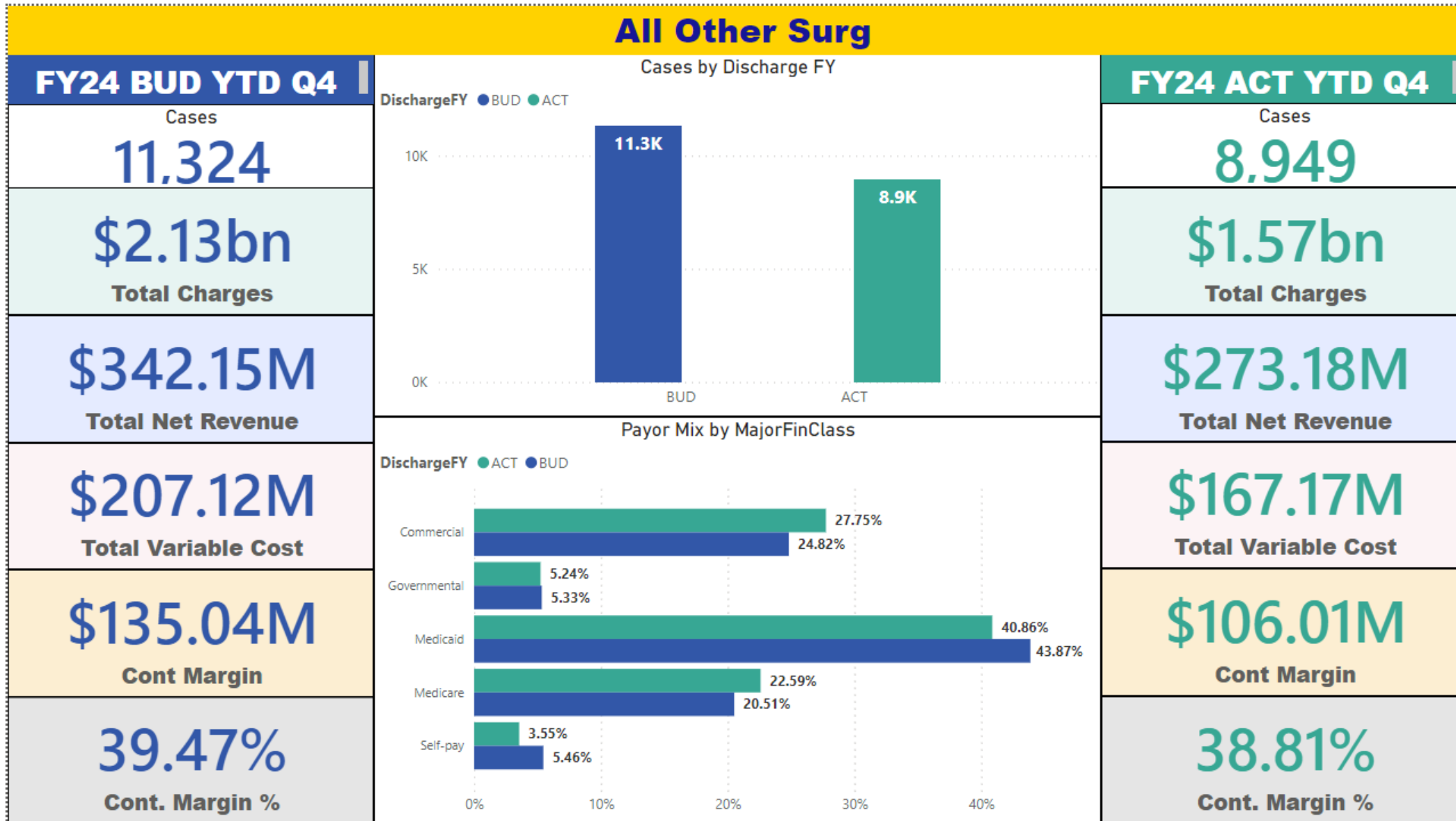














**UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA  
GOVERNING BOARD STRATEGIC PLANNING COMMITTEE  
AGENDA ITEM**

<b>Issue:</b> <b>FY24 Organizational Performance Goals</b>	<b>Back-up:</b>
<b>Petitioner:</b> Tony Marinello, Chief Operating Officer	
<p><b>Recommendation:</b></p> <p><b>That the Governing Board Strategic Planning Committee review and discuss the FY24 Organizational Performance Goals as it relates to the subject matter relevant to the Strategic Planning Committee and make a recommendation to the Human Resources and Executive Compensation Committee; and take action as deemed appropriate. <i>(For possible action)</i></b></p>	

**FISCAL IMPACT:**

None

**BACKGROUND:**

The Committee will discuss and finalize the FY24 Organizational Performance Goals.

Cleared for Agenda  
August 15, 2024

Agenda Item #

**5**



FY 24  
Organizational Goals  
August 15, 2024

1. Continue to deliver improved clinical and financial outcomes in the existing 5 service lines and develop a business plan for 2 other service lines that will be critical to help UMC deliver an important service line to the community going forward.
2. Continue to play a leading role in the Medical District.
3. Expand physician employment model- decrease expenses and capture additional market share.
4. Expand upon the five-year financial plan for UMC Enterprise to include consolidated income statement cash flow statement and facility wide capital plan. The plan will be detailed down to the service line level and within service lines will forecast volumes, revenue.
5. To enhance Strategic Initiatives in furtherance of the Academic Health Center.

# Organizational Performance Goal #1



## FY 24 Strategic Planning Committee

FY24 Goal	Cont. Margin			Cont. Margin %		
Service Line	FY23	FY24	Variance	FY23	FY24	Variance
Ambulatory	\$12,893,075	\$7,879,240	(\$5,013,835)	24.31%	15.15%	(9.16%)
Cardiac Services	\$29,603,557	\$38,064,295	\$8,460,738	38.33%	40.96%	2.62%
Children and Women Services	\$69,408,348	\$81,629,247	\$12,220,899	57.33%	58.44%	1.11%
General Surgery	\$46,433,147	\$54,088,415	\$7,655,267	34.89%	36.64%	1.76%
Orthopedics	\$23,567,339	\$29,404,540	\$5,837,201	33.11%	33.48%	0.37%
<b>Total</b>	<b>\$181,905,466</b>	<b>\$211,065,737</b>	<b>\$29,160,271</b>	<b>39.93%</b>	<b>40.58%</b>	<b>0.66%</b>

# Organizational Performance Goal #2



FY24 Continue to play a leading role in the Medical District

- UMC continues to be one of the leaders in the Medical District
- UMC participates in all LVMD stakeholder, legislative, and mental health group meetings
- UMC appointed to be the hospital representative to the Vegas Biotech group
- UMC participates in the Downtown Vegas Alliance meetings.
- UMC works with the City of LV in relation to Infrastructure Construction Phasing Plan
- UMC collaborates with project developers to provide insight and recommendations for needed services
- UMC ReVITALize Project has enhanced the aesthetics of the Medical District

# Organizational Performance Goals #3

## FY 24 Expand Physician Employment Model – Decrease Expenses and Capture Additional Market Share

- Radiologist Employment
  - 7 Interventional Radiologists Employed
  - Employed 20 Diagnostic Radiologists
- Employed 21 Internal Medicine Providers – Inpatient Hospitalist Medicine
- Employed 45 Emergency Medicine Providers
- Employed Specialty Physician for Surgical Services

# Organizational Performance Goal #4

## FY24 Expand upon the five-year financial plan for UMC Enterprise

Expand upon the five-year financial plan for UMC Enterprise to include consolidated income statement cash flow statement and facility wide capital plan. The plan will be detailed down to the service line level and within service lines will forecast volumes, revenue.

- Plan was presented June 13<sup>th</sup> Strategy Committee and was agreed upon
- Committee suggested that this becomes the roadmap for growth
- The committee would like to review updates to the 5-year plan on a semi-annually basis

# Organizational Performance Goal #5

FY24 To enhance Strategic Initiatives in furtherance of the Academic Health Center

- Approved GME Master Agreements with UNLV
- Rheumatology Fellowship with UNLV
- Joined Association of American Medical Colleges (AAMC)
- Joint Leadership Meetings (Monthly)
- Created Internal Academic Affairs Department
- Developed bimonthly Resident Newsletter
- Dental Anesthesia Residency CODA approval to start in July 2025
- Pediatric Rotation UNLV/UMC Related to Social Determinants of Health/Patient Eligibility
- New School Affiliation Agreements: Nursing, Pharmacy, Paramedic Program, Respiratory, Coders
- Office of Military Medicine Training Expansion: Radiology and Pharmacy



**UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA  
GOVERNING BOARD STRATEGIC PLANNING COMMITTEE  
AGENDA ITEM**

<b>Issue:</b> <b>FY25 Organizational Performance Goals</b>	<b>Back-up:</b>
<b>Petitioner:</b> Tony Marinello, Chief Operating Officer	
<p><b>Recommendation:</b></p> <p><b>That the Governing Board Strategic Planning Committee Finalize proposed Organizational Performance Goals for FY25 related to the Strategic Planning Committee and make a recommendation to the Human Resources and Executive Compensation Committee; and take action as deemed appropriate. <i>(For possible action)</i></b></p>	

**FISCAL IMPACT:**

None

**BACKGROUND:**

The Committee will have a discussion and finalize the proposed FY25 Organizational Performance Goals.

Cleared for Agenda  
August 15, 2024

Agenda Item #

**6**



FY 25 Organizational  
Projected Performance  
Objectives  
August 15, 2024

- 1. Continue to deliver improved clinical and financial outcomes in the existing 5 service lines.**
- 2. Finalize Rehab Business Plan and Proforma for the expansion of 4<sup>th</sup> and 5<sup>th</sup> floor trauma building and submit through approval process**
- 3. Enhance Strategic Initiatives in furtherance of the Academic Health Center**
- 4. Continue on the Journey to Achieve Comprehensive Stroke Certification**

**UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA  
GOVERNING BOARD STRATEGIC PLANNING COMMITTEE  
AGENDA ITEM**

<b>Issue:</b> <b>Emerging Issues</b>	<b>Back-up:</b>
<b>Petitioner:</b> Tony Marinello, Chief Operating Officer	
<p><b>Recommendation:</b></p> <p><b>That the Strategic Planning Committee identify emerging issues to be addressed by staff or by the Strategic Planning Committee at future meetings; and direct staff accordingly. <i>(For possible action)</i></b></p>	

**FISCAL IMPACT:**

None

**BACKGROUND:**

None

Cleared for Agenda  
August 15, 2024

Agenda Item #

7

**UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA  
GOVERNING BOARD STRATEGIC PLANNING COMMITTEE  
AGENDA ITEM**

<b>Issue:</b> <b>Closed Session</b>	<b>Back-up:</b>
<b>Petitioner:</b> Tony Marinello, Chief Operating Officer	
<b>Recommendation:</b>  <b>That the Strategic Planning Committee go into closed session pursuant to NRS 450.140(3) to discuss new or material expansion of UMC's health care services and hospital facilities.</b>	

**FISCAL IMPACT:**

None

**BACKGROUND:**

None

Cleared for Agenda  
August 15, 2024

Agenda Item #

**8**