UMC Strategic Planning Committee Meeting

Thursday, August 27, 2026 10:00 am

Emerald Conference Room - 1st Floor

901 Rancho Lane

Las Vegas, NV 89102

AGENDA

University Medical Center of Southern Nevada
UMC GOVERNING BOARD STRATEGIC PLANNING COMMITTEE
August 27, 2026 10:00 a.m.
901 Rancho Lane, Las Vegas, Nevada
Delta Point Building, Emerald Conference Room (1st 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 901 Rancho Lane, Las Vegas, NV.

- 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 the minutes from the regular meetings of the UMC Governing Board Strategic Planning Committee on June 25, 2026 and the special meeting held on August 13, 2026. (For possible action)

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

SECTION 2: BUSINESS ITEMS

4. Receive a presentation from Vick Gill, Business Development Officer, regarding Salaries, Wages, and Benefits (SWB); and direct staff accordingly. (For possible action)

5. Receive a report regarding UMC Market Share; and direct staff accordingly. (For possible action)

6. Review and discuss the selection of the Priority Service Lines as they relate to the FY27 Strategic Planning Committee's Organizational Performance Goals; and direct staff accordingly. *(For possible action)*

7. Review and discuss the FY27 Organizational Performance Goals as they relate to the Strategic Planning Committee; and make a recommendation to the Human Resources and Executive Compensation Committee; and take any action deemed appropriate. *(For possible action)*

SECTION 3: 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.

SECTION 4: EMERGING ISSUES

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

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).

UMC Providence Suite
Delta Point Building, 1st Floor
901 Rancho Lane
Las Vegas, Clark County, Nevada
Thursday, June 25, 2026
10:00 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 10:04 a.m. by Chair Palenik and the following members were present, which constituted a quorum of the members thereof:

CALL TO ORDER

Board Members:

Present:
Mary Lynn Palenik, Chair
Harry Hagerty (Via Teams)
Christian Haase (Via Teams)
Renee Franklin (Via Teams)

Absent:
Dr. John Fildes (Excused)

Also Present:
Mason Van Houweling, Chief Executive Officer
Tony Marinello, Chief Operating Officer
Jennifer Wakem, Chief Financial Officer
Chris Jones, Executive Director of Support Services
Susan Pitz, General Counsel
Stephanie Ceccarelli, Board Secretary
B & P Advertising Representatives
Kayla Hillegass, Business Development Officer (Via Teams)

SECTION 1. OPENING CEREMONIES

ITEM NO. 1 PUBLIC COMMENT

Chair Palenik 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 April 9, 2026. *(For possible action)*

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

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive education from Danita Cohen, Chief Experience Officer, supported by B&P Advertising, regarding UMC's Marketing Plan; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
- PowerPoint Presentation

DISCUSSION:

Danita Cohen, Chief Experience Officer, along with representatives of B&P Advertising provided an overview of the marketing strategy for UMC.

Ms. Cohen began by providing an overview of UMC's marketing strategy. Our advertising philosophy is to use bold, attention-grabbing creativity to reach the target audience. Operating in an increasingly competitive market where our audience is inundated with advertisements nearly 24/7, UMC works tirelessly to elevate our brand within the community by providing the highest level of care in the community.

Various media platforms are used, including digital platforms, social media, television, and billboards. Key campaigns focus on multiple service lines, including primary and quick care, online care, cardiovascular, orthopedics, women's and children's, and more. Ms. Cohen highlighted the many media platforms used in the community for these services. Slides and videos highlighting advertising campaigns for each of the service lines were reviewed and discussed.

B&P works collaboratively with our internal team to produce larger campaigns and to identify the purpose and meaning behind each campaign. B&P ensures that ads are properly targeted and are scheduled to maximize impact in the community.

UMC's Experience Team manages hundreds of creative projects each year, including all internal campaigns, event materials, service line brochures, patient handouts, web pages and many other materials. Savings are achieved by utilizing an in-house team of public relations experts, eliminating the need for a separate PR retainer.

A discussion ensued regarding branding, social media strategies, and audience tracking. The Committee was very pleased with the advertising campaigns presented.

FINAL ACTION TAKEN:

None taken.

ITEM NO. 5 Review the preliminary Enterprise Strategic Plan; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
- Service Line Update

DISCUSSION:

Tony Marinello, Chief Operating Officer, began the discussion with a high-level overview of the strategic plan.

University Medical Center is dedicated to elevating the level of care for the community through the highest caliber of quality of care within a premier Academic Health Center, advancing clinical excellence, education, and innovation to address the changing needs of Southern Nevada, all sustained by disciplined fiscal stewardship. Through an integrated healthcare delivery system, we provide an unrivaled patient experience that sets us apart from every healthcare system in Southern Nevada. The mission, vision, and values were reviewed.

Member Franklin suggested that the mission, vision, and values be visible for patients to review as a reminder of what UMC offers the community.

Mr. Marinello continued by highlighting UMC's medical services, achievements, and certifications. UMC's footprint across the valley was also discussed.

The integrated strategic model will focus on a performance-driven approach, with the goal of improving access, driving growth, and enhancing high-impact service lines. This will reinforce UMC's role as Clark County's essential safety-net provider and leading academic health center. The key strategic initiatives were reviewed.

Jennifer Wakem, Chief Financial Officer, reviewed the use and framework of the Strata/SG2 Service Line. UMC has implemented Strata Decision Support, which will leverage the SG-2 service line methodology to align clinical, operational and financial performance through the service line. Ms. Wakem explained SG-2 enables integrated inpatient and outpatient service line reporting, improving transparency and comparability across the enterprise, and like facilities, performance management, growth strategy, and resource allocation. Each service line will have defined strategic initiatives tied to growth, access, quality, and financial performance, creating a clear link between operations and financial outcomes.

The Magnificent Seven, top-performing service lines, were introduced based on data received from Strata. These include General Surgery, Orthopedics, Neuroscience, Infectious Disease, General Medicine, Cardiology, and Burns and Wound Care. UMC will prioritize reporting and strategic execution for these seven service lines, as they are key drivers of contribution margin, market share growth, and clinical excellence. A discussion ensued regarding the steps in gathering the appropriate data based on statistics received through Strata.

Christopher Jones, Executive Director of Support Services, provided an overview of performance signals, financial data, and operational performance data for each

service line. Actionable updates and measurable expected outcomes were reviewed for each service line, along with strategic growth opportunities. Chair Palenik noted that this format will help establish goals moving forward.

The discussion continued with a review of UMC's revenue enhancement strategy, with supplemental payments, the revenue cycle, payor strategy, and expected outcomes.

FINAL ACTION TAKEN:

None taken.

ITEM NO. 6 Review and discuss the proposed FY27 Operational Performance Goals; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
-PowerPoint Presentation

DISCUSSION:

The following goals were reviewed for FY27.

GOAL 1: FINANCIAL SUSTAINABILITY & SERVICE LINE PERFORMANCE (25%)
• Operating Income meets or exceeds the approved FY2027 budget
• Contribution Margin growth exceeds FY2026 baseline
• Market Share improves over FY2026 baseline
• Case/Volume growth exceeds FY2026 baseline
• Fixed Expense growth remains below revenue growth

•GOAL 2: ACCESS, THROUGHPUT & CAPACITY OPTIMIZATION (25%)

• Length of Stay improves versus FY2026 baseline
• ED Throughput improves versus FY2026 baseline
• Primary Care access improves versus FY2026 baseline
• Quick Care access improves versus FY2026 baseline
• Telemedicine completion rate improves versus FY2026 baseline
• Transfer acceptance rate improves versus FY2026 baseline

GOAL 3: LAUNCH AI PLATFORM TRIAL IN ORTHOPEDIC CLINIC (25%)

•Ambient Listening – voice recognition
•Call Center
•Referrals
•Upon successful implementation, we will expand throughout the enterprise-Next step: Quick Care/PC

•GOAL 4: STRATEGIC GROWTH, ACADEMIC MISSION & INFRASTRUCTURE (25%)

•ED Residency Program implementation milestones achieved within year 1
•Orthopedic Residency Program implementation milestones achieved year 1
•Inpatient Rehabilitation project milestones projected to be completed Q1 Calendar year 202
•Parking Garage project milestones achieved, projected to be completed 11/2027
•Facility modernization milestones achieved Tower Project to be completed April 2028.
•Continue to focus on Master plan tower replacement

There was a discussion regarding how the goals would be weighed individually. The team will review the goals and bring them back to the Committee in August for final review.

A brief discussion ensued regarding holding a special meeting in August to finalize the FY26 goals.

FINAL ACTION TAKEN:

None taken.

ITEM NO. 7 Discuss Strategic Planning Committee priorities for CY2026; and direct staff accordingly. *(For possible action)*

DISCUSSION:

Chair Palenik briefly reviewed the six priority items for the committee, which are all on track.

FINAL ACTION TAKEN:
No action taken

SECTION 3: EMERGING ISSUES

ITEM NO. 8 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.

There being no further business to come before the committee this time, at the hour of 12:29 p.m.

APPROVED:

MINUTES PREPARED BY: Stephanie Ceccarelli, Board Secretary

University Medical Center of Southern Nevada
Governing Board Strategic Planning Committee
Special Meeting
August 13, 2026

UMC Emerald Conference Room
Delta Point Building, 1st Floor
901 Rancho Lane
Las Vegas, Clark County, Nevada
Thursday, August 13, 2026
10:00 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 10:07 a.m. by Chair Palenik and the following members were present, which constituted a quorum of the members thereof:

CALL TO ORDER

Board Members:

Present:
Mary Lynn Palenik, Chair
Harry Hagerty (Via Teams)
Christian Haase (Via Teams)

Absent:
Dr. John Fildes (Excused)

Also Present:
Mason Van Houweling, Chief Executive Officer
Tony Marinello, Chief Operating Officer
Jennifer Wakem, Chief Financial Officer
Chris Jones, Executive Director of Support Services
Vick Gill, Business Development Officer
Emelia Allen, Assistant General Counsel
Stephanie Ceccarelli, Board Secretary

SECTION 1. OPENING CEREMONIES

ITEM NO. 1 PUBLIC COMMENT

Chair Palenik 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 Agenda *(For possible action)*

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

SECTION 2. BUSINESS ITEMS

ITEM NO. 3 Review, discuss, and score the outcomes of the FY26 Organizational Performance Goals as they relate to the Strategic Planning Committee; and make a recommendation to the Human Resources and Executive

Compensation Committee; and take any action deemed appropriate. *(For possible action)*

DOCUMENT SUBMITTED:
- PowerPoint Presentation

DISCUSSION:

Mr. Marinello reviewed the final outcomes of the following FY26 organizational goals:

1. **Continue to improve clinical and overall financial outcomes in the existing five service-focused Service Line Reviews of the Strategic Planning Committee.**
   This goal was met overall, despite lower financial outcomes in quick cares and primary care locations and women's and children's services. Member Hagerty inquired about the variance at the quick care locations. Mr. Marinello responded that the freestanding ER locations affect quick care volumes. Clinical improvements for each of the service lines were reviewed.

2. **Work on adding, implementing, and measuring a sixth focused service line review for Interventional Radiology.**
   This goal was met. Mr. Jones highlighted the achievements in the service line year-over-year in net revenue, variable cost, and contribution margin.

3. **Scope and analyze the establishment of a liver care service, including the future potential growth into liver transplant.**
   This goal was met. Mr. Marinello highlighted the opening of the liver care Clinic for low acuity patients in October 2025. There have been 73 new patients to date. Potential growth in the service line was reviewed briefly.

4. **Enhance strategic initiatives to support the Academic Health Center.**
   This goal was met. Mr. Marinello highlighted the robust list of the achievements, including academic software implementation, launching the Radiology Residency program, and crafting the new Master Agreement between UMC and UNLV.

5. **Determine the next step(s)of UMC's Master Plan and secure appropriate funding for the first phase.**
   This goal was met. There has been progress made with the approval of the first phase of the master plan.

At this time, the Committee discussed and scored each goal, noting challenges, opportunities for improvement, and overall achievements.

Regarding goal 3, Member Haase asked whether there is still an opportunity to establish this service line. Mr. Van Houweling would like to discuss this topic further with the committee and provide a presentation at a future meeting.

Chair Palenik calculated a total of 92% for goal achievement but suggested rounding up to 95% overall. The committee unanimously agreed to the 95% award.

FINAL ACTION TAKEN:

A motion was made by Member Hagerty to award 95% of the FY26 Strategic Planning Organizational Goals and to recommend approval to the Human Resources and Executive Compensation Committee. Motion passed unanimously.

ITEM NO. 4 Review and discuss the FY27 Organizational Performance Goals as they relate to the Strategic Planning Committee; and make a recommendation to the Human Resources and Executive Compensation Committee; and take any action deemed appropriate. *(For possible action)*

DOCUMENT SUBMITTED:
-PowerPoint Presentation

DISCUSSION:

Chair Palenik began a brief overview regarding the proposed FY27 goals. There are 4 goals, each weighing at 25%.

Member Hagerty requested that this item be tabled and discussed at the regularly scheduled August meeting.

FINAL ACTION TAKEN:

A motion was made by Member Haase to table the discussion of the FY27 goals and to review them at the regularly scheduled August 27th meeting. The motion passed unanimously.

SECTION 3: EMERGING ISSUES

ITEM NO. 5 Identify emerging issues to be addressed by staff or by the Board at future meetings; and direct staff accordingly. *(For possible action)*

DISCUSSION:

Mr. Marinello thanked Chair Palenik for her assistance and guidance.

Chair Palenik would like the team to provide their thought process in determining the focus service lines.

FINAL ACTION TAKEN:

No action taken

COMMENTS BY THE GENERAL PUBLIC:

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

There being no further business to come before the committee this time, at the hour of 11:29 p.m.

APPROVED:

MINUTES PREPARED BY: Stephanie Ceccarelli, Board Secretary

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

Issue: **Education Update**	**Back-up:**
Petitioner: Tony Marinello, Chief Operating Officer	
Recommendation: **That the Governing Board Strategic Planning Committee receive a presentation from Vick Gill, UMC Business Development Officer, regarding Salaries, Wages and Benefits (SWB); and direct staff accordingly.** ***(For possible action)***	

FISCAL IMPACT:

None

BACKGROUND:

The Committee will receive education on salaries, wages and benefits related to strategic planning.

Cleared for Agenda
August 27, 2026

Agenda Item #

4


UMC
UNIVERSITY MEDICAL CENTER
SWB Presentation
Strategic Planning Committee
8/27/2026
Vick S. Gill, FACHE
HOPE
UMC
1800

WHY SWB MATTERS STRATEGICALLY?

What's included in SWB?

- Base salaries for management, clinical, and administrative staff
- Hourly wages, Overtime pay, and shift differentials
- Payroll taxes (Social Security, Medicare, unemployment taxes)
- Health, dental, and vision insurance
- Retirement plan contributions
- Paid time off
- Workers' compensation insurance
- Employee education and training benefits

BENEFITS PACKAGE

- **100% Employer-Paid Pension:** Fully funded participation in the Nevada Public Employees Retirement System (NVPERS)- **36.75%**
- **No Social Security Tax:** Employees retain more of their paycheck through higher net take-home pay (6.2%)
- **No Nevada State Income Tax:** Additional financial advantage versus many U.S. markets
- **Consolidated Annual Leave (CAL):** Immediate accrual of combined vacation, holiday, sick, and personal leave
- **11-12 Paid Holidays Annually**
- **Extended Illness Bank (EIB):** Dedicated leave bank for extended medical absences
- **Comprehensive Medical, Dental, Vision, and Prescription Coverage**
- **Public Service Loan Forgiveness (PSLF):** Eligible public employer for federal student loan forgiveness

CURRENT SWB LANDSCAPE

	Actual	Budget	Variance	% Variance	
Salaries	$39,712,833	$39,135,717	$577,117	1.47%	🔴
Benefits	$19,457,565	$19,373,735	$83,830	0.43%	🔴
Overtime	$1,236,841	$724,766	$512,076	70.65%	🔴
Contract Labor	$1,125,609	$1,416,672	($291,063)	(20.55%)	🟢
TOTAL	**$61,532,848**	**$60,650,889**	**$881,959**	**1.45%**	🔴
Paid FTEs	**3,985**	**3,894**	**91**	**2.34%**	🔴
Paid FTEs (Flex)	**3,985**	**3,885**	**100**	**2.58%**	🔴
SWB per FTE	**$15,441**	**$15,576**	**($135)**	**(0.87%)**	🟢
SWB/APD	**$3,175**	**$3,060**	**$116**	**3.78%**	🔴
SWB % of Net	**65.68%**	**69.23%**	**-**	**(3.55%)**	🟢
AEPOB	**6.37**	**6.09**	**0.29**	**4.69%**	🔴

- Annual merit increases and cost of living cost adjustments are driving increases in annual SWB
- 67% as a percentage of Net Revenue are SWB (FY26)
- 44.7% benefit load on FTE salary

Source: UMC July 2026 Financials

MARKET COMPETITIVENESS

Are we positioned to attract and retain talent?

- Market benchmarking with market adjustments
- Competitive position within Clark County healthcare market
  - Only able to hire Clark County residents (Coding, EPIC, and IT)
- Hard-to-fill positions
- Recruitment challenges (Radiology, Anesthesia, Hepatology, Pediatric Subspecialty)
- Retention trends (13% FT 1st Year turnover)
- Specialty staffing (Urology, ENT)
- Leadership pipeline (Succession Planning)

STRATEGIC WORKFORCE INVESTMENT

Access

- Ability to staff patient care areas
- Expanded service lines (new/existing and Primary and QuickCare)

Quality

- Reduced Turnover
- Experienced workforce
- Better clinical outcomes

Financial Performance

- Reduced contract labor
- Lower turnover costs
- Improved productivity

Culture

- Employee engagement
- Employer of choice positioning

RISKS AND OPPORTUNITIES

Risks

- Labor Shortages
- Benefit inflation
- Market wage pressure
- Workforce burnout

Opportunities

- Real-time productivity with UKG (previously retrospective)
- Workforce planning initiatives through organizational alignment and technology & healthcare trends
- Retention programs
- Career pathway development
- Leadership pipelines

FUTURE DIRECTION & SUCCESS MEASURES

Focus Areas

- Workforce productivity in real-time with accountability
- SWB growth and sustainability
- Workforce organization and alignment
- Recruitment effectiveness
- Retention improvement
- Talent pipeline development

KPIs

- SWB as a % of net revenue (target: 66%, stretch: 64%)
- Contract labor utilization (2-3% of total nursing/clinical worked hours)
- Overtime utilization (2-3% of total worked hours)
- Time to fill specialty positions
- Turnover and vacancy rates


UMC
UNIVERSITY MEDICAL CENTER
Advanced Scheduling &
Productivity Reporting

From Volume to Schedule

How patient volume flows through staffing planning to a generated schedule

1

Volume Workload Planning

How much volume do we expect?

Budget, Plan & Actual volume by date and shift — the expected census demand.

2

Staffing Matrix

How many staff do we need?

Converts volume levels into staffing requirements by job and shift.

3

Workload Planner

What demand was calculated?

Shows staffing requirements by job, shift & date for managers to review and adjust.

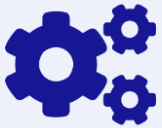
4

Shift Template Profile

What shifts can be created?

Defines the available shift templates and their start / end times.

5



Schedule Generation Strategy

How are shifts created?

Rules that turn demand, requirements & templates into open shifts.

RESULT **Generate Schedule**

Volume → Staffing Matrix → Workload Planner → Shift Templates → Generation Strategy

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

Issue: **UMC Market Share Report**	**Back-up:**
Petitioner: Tony Marinello, Chief Operating Officer	
Recommendation: **That the Governing Board Strategic Planning Committee receive a report regarding UMC Market Share; and direct staff accordingly.** ***(For possible action)***	

FISCAL IMPACT:

None

BACKGROUND:

The Committee will receive an update regarding performance in the market share.

Cleared for Agenda
August 27, 2026

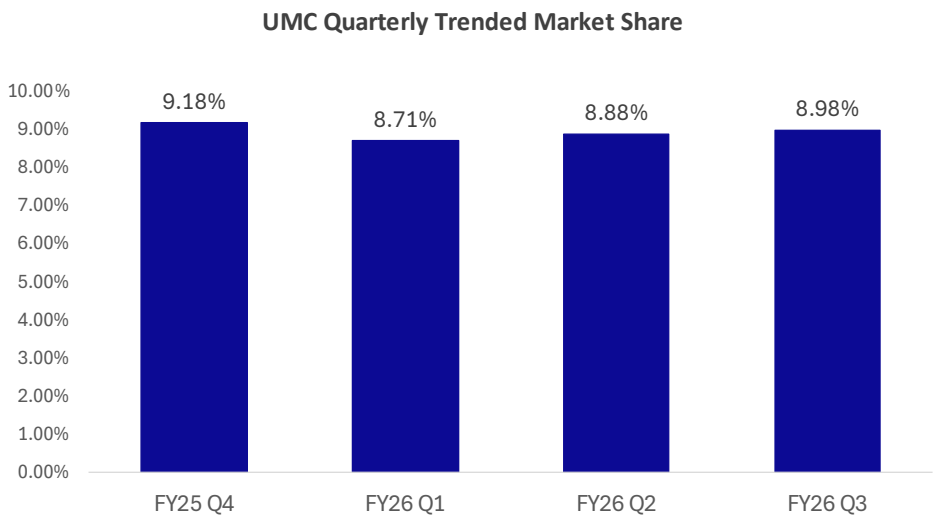
Agenda Item #

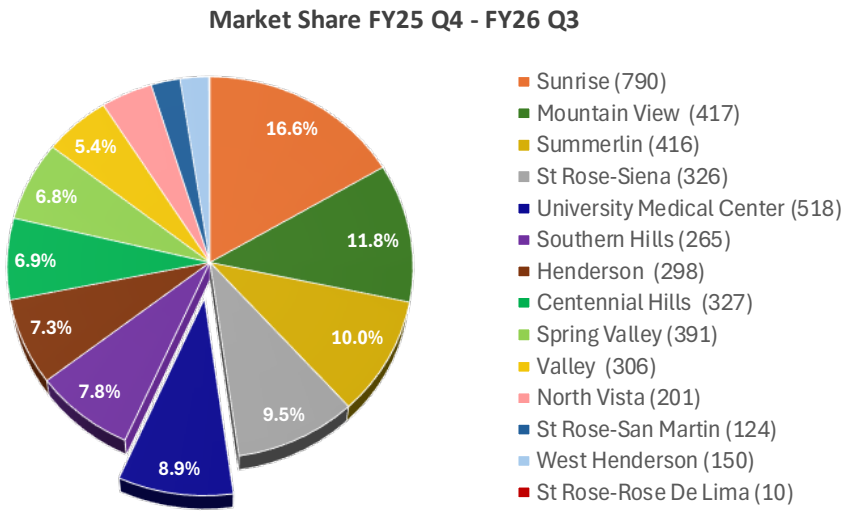
5


UMC
UNIVERSITY MEDICAL CENTER
Market Share
Q4 FY25 – Q3 FY26
August 27, 2026
HOPE
UMC
1800

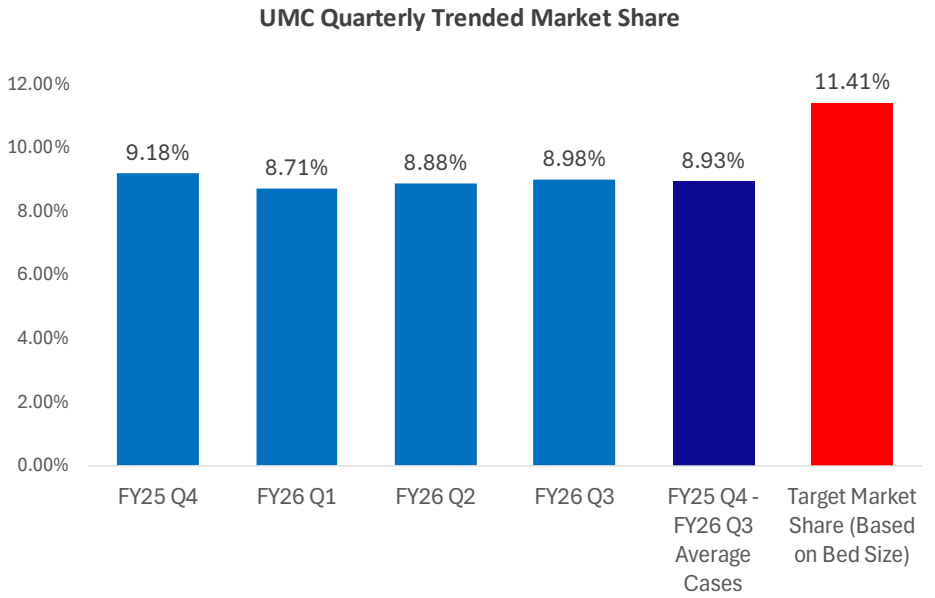
UMC Inpatient Market Share

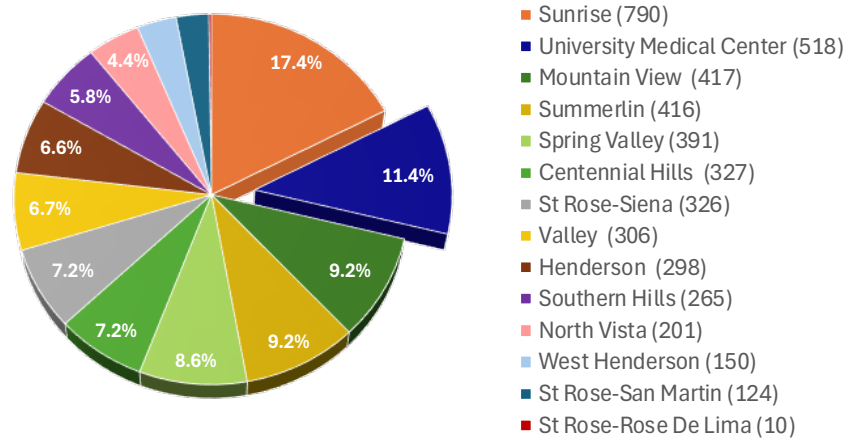
Market Position & Growth Opportunity

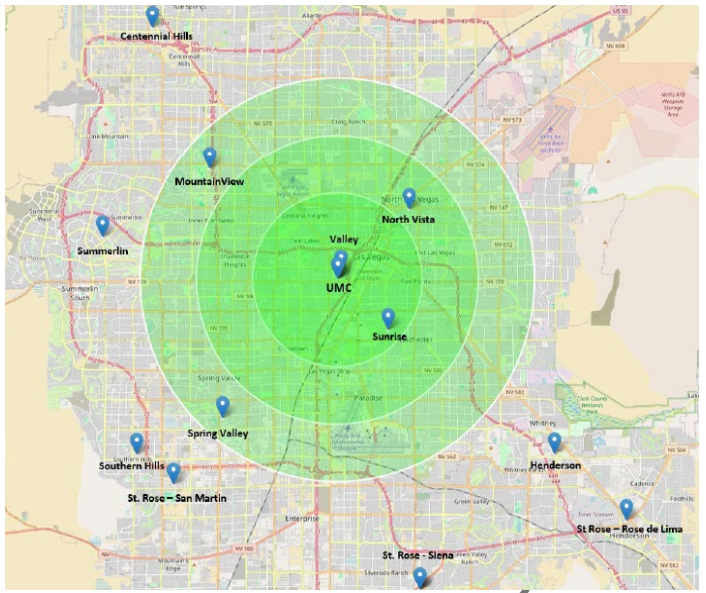




Measure	Value
Market position	5
Average Case Market Share	8.9%
Bed-Size Fair Share Target	11.4%
Fair Share Gap	(2.5 pts)
FY29 Target	11.4%







UMC Inpatient Market Share

Market Position & Growth Opportunity

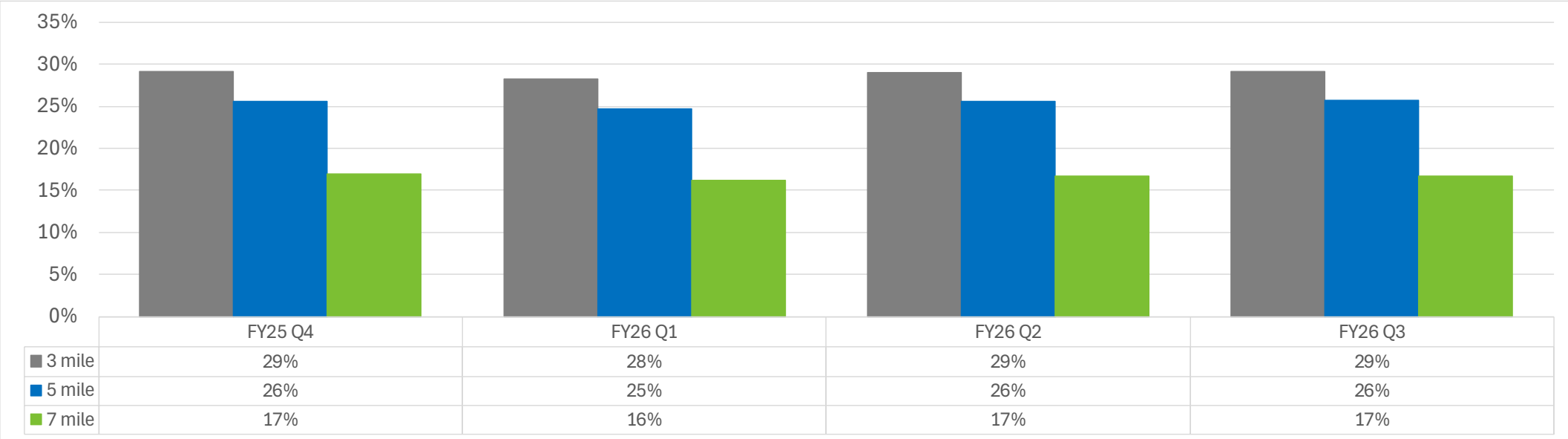
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	29%	43%	37%	40%	34%
Medicare	36%	32%	37%	35%	39%
Commercial	25%	17%	16%	15%	18%
Self Pay	3%	4%	4%	3%	3%
Other	7%	4%	6%	7%	6%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	28%	42%	36%	38%	32%
Medicare	36%	31%	37%	35%	39%
Commercial	25%	18%	16%	15%	19%
Self Pay	3%	5%	4%	4%	3%
Other	8%	5%	7%	8%	7%

Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 mile	29%	28%	29%	29%
5 mile	26%	25%	26%	26%
7 mile	17%	16%	17%	17%

CARDIOLOGY

Market Position & Growth Opportunity

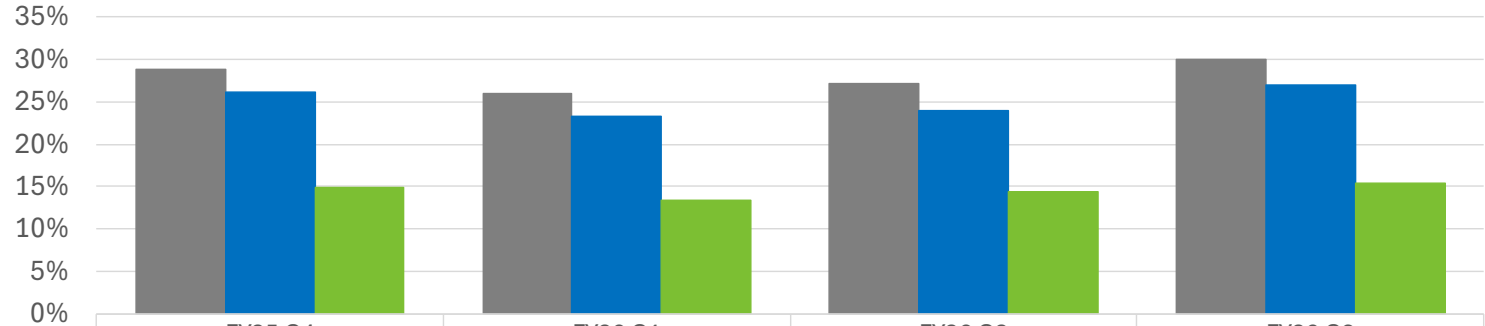
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	18%	26%	28%	29%	22%
Medicare	51%	49%	47%	45%	51%
Commercial	20%	18%	17%	16%	17%
Self Pay	3%	4%	3%	3%	2%
Other	9%	3%	5%	7%	7%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	16%	25%	25%	28%	20%
Medicare	51%	51%	47%	44%	52%
Commercial	20%	17%	19%	18%	18%
Self Pay	3%	4%	3%	2%	2%
Other	10%	3%	6%	9%	7%

Cardiology Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	29%	26%	27%	30%
5 Mile	26%	23%	24%	27%
7 Mile	15%	13%	14%	15%

Measure	Value
Market Position	6
Average Case Market Share	7.9%
FY29 Target	

VASCULAR

Market Position & Growth Opportunity

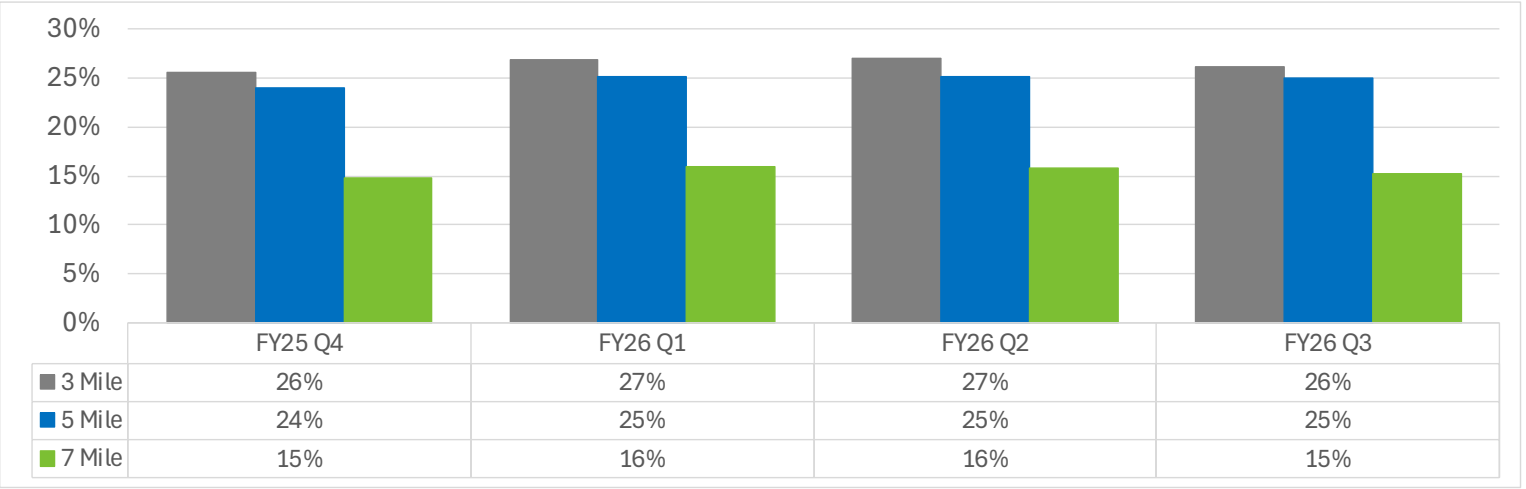
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	18%	26%	25%	26%	20%
Medicare	55%	53%	57%	55%	58%
Commercial	18%	15%	10%	10%	14%
Self Pay	2%	2%	3%	3%	2%
Other	7%	3%	5%	6%	7%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	18%	31%	24%	23%	19%
Medicare	53%	47%	51%	51%	56%
Commercial	18%	18%	11%	11%	13%
Self Pay	3%	2%	5%	5%	4%
Other	8%	3%	8%	9%	7%

Vascular Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	26%	27%	27%	26%
5 Mile	24%	25%	25%	25%
7 Mile	15%	16%	16%	15%

Measure	Value
Market position	3
Average Case Market Share	9.2%
FY29 Target	

NUEROSCIENCES

Market Position & Growth Opportunity

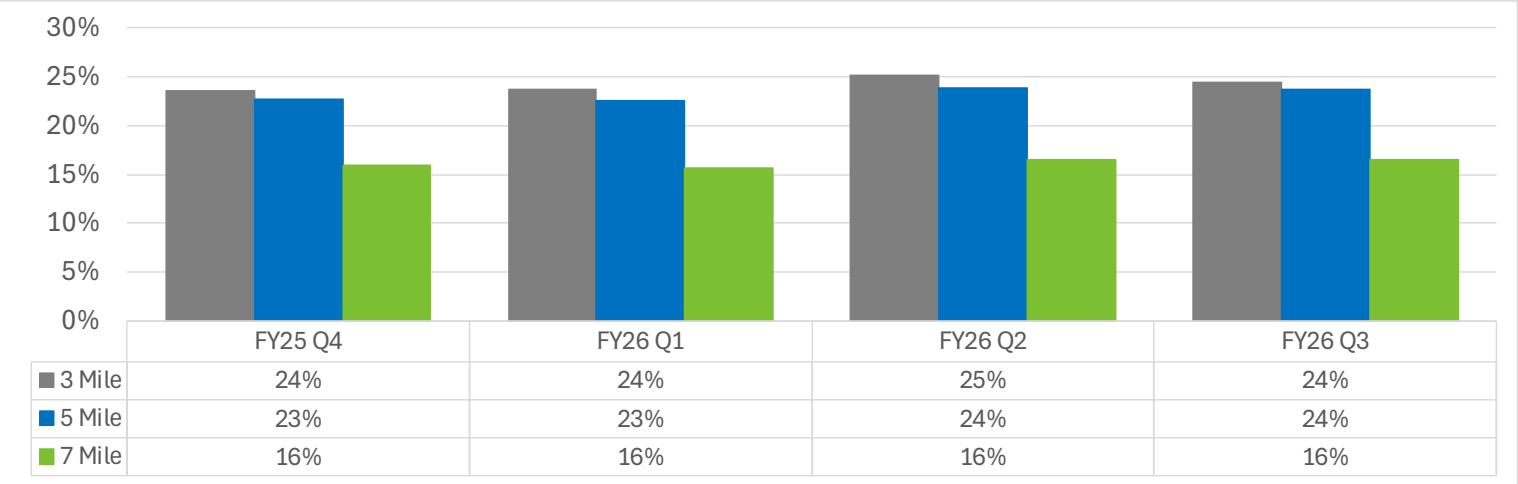
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	21%	37%	26%	27%	23%
Medicare	48%	37%	47%	46%	51%
Commercial	20%	15%	15%	15%	17%
Self Pay	3%	4%	4%	4%	3%
Other	8%	8%	7%	7%	7%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	19%	30%	25%	26%	22%
Medicare	49%	38%	46%	46%	51%
Commercial	20%	19%	17%	16%	17%
Self Pay	3%	4%	3%	3%	3%
Other	9%	9%	8%	9%	7%

Neurosciences Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



Measure	Value
Market position	3
Average Case Market Share	9.7%
FY29 Target	

ORTHOPEDICS

Market Position & Growth Opportunity

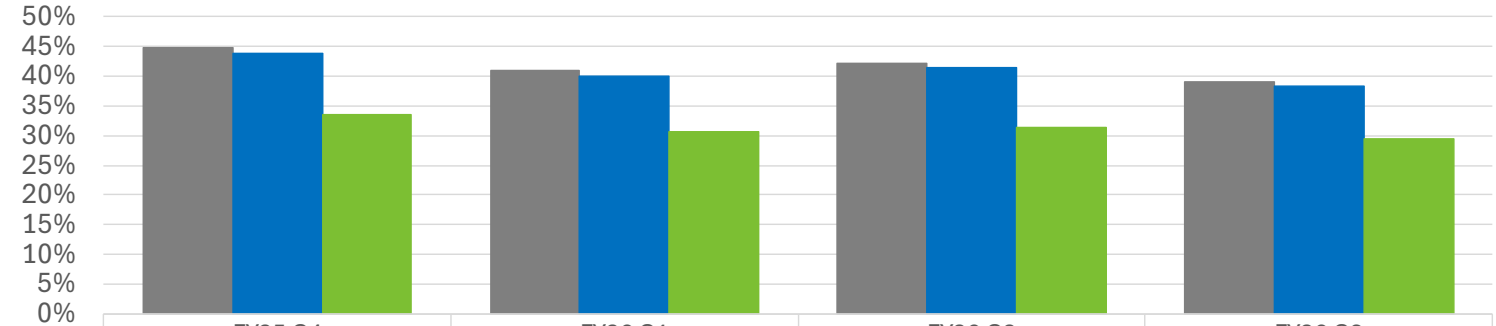
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	18%	32%	22%	23%	19%
Medicare	51%	39%	46%	46%	53%
Commercial	19%	20%	20%	20%	17%
Self Pay	3%	3%	5%	5%	4%
Other	9%	6%	7%	7%	6%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	16%	30%	21%	21%	17%
Medicare	54%	38%	51%	50%	56%
Commercial	16%	20%	16%	16%	15%
Self Pay	2%	4%	3%	3%	3%
Other	11%	9%	9%	9%	9%

Orthopedics Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	45%	41%	42%	39%
5 Mile	44%	40%	41%	38%
7 Mile	34%	31%	31%	29%

Measure	Value
Market position	2
Average Case Market Share	19.2%
FY29 Target	

SPINE

Market Position & Growth Opportunity

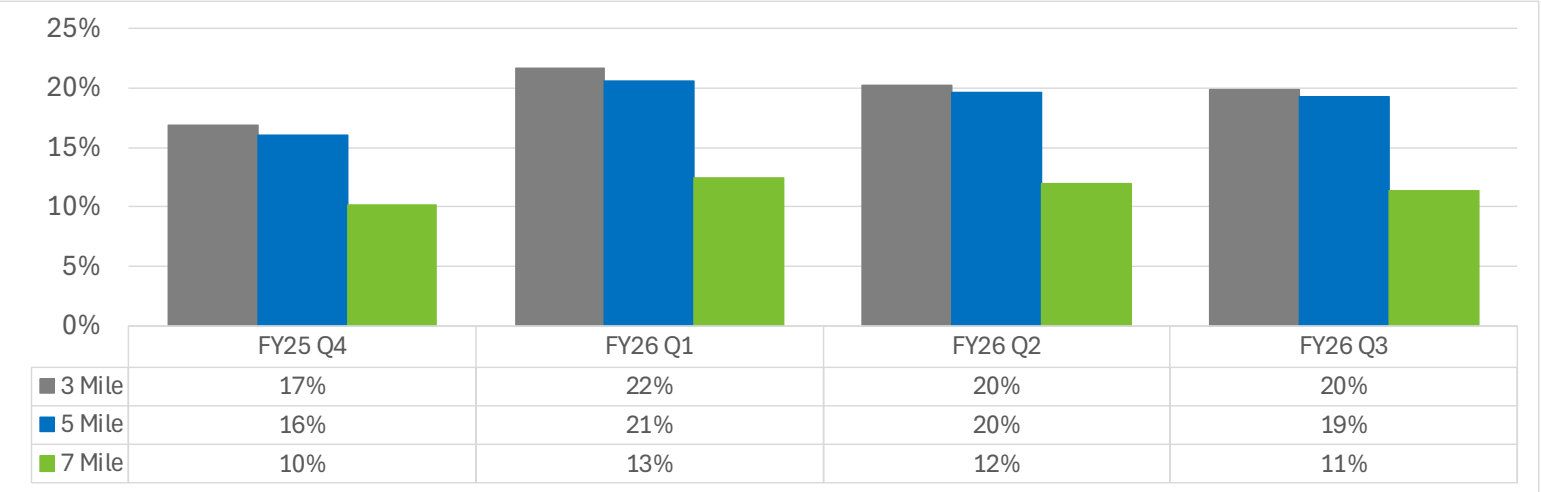
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	15%	32%	20%	20%	17%
Medicare	48%	45%	51%	50%	51%
Commercial	22%	20%	16%	16%	17%
Self Pay	2%	1%	4%	4%	3%
Other	13%	2%	9%	9%	12%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	13%	27%	21%	21%	17%
Medicare	46%	46%	42%	41%	43%
Commercial	23%	17%	19%	19%	22%
Self Pay	2%	1%	3%	4%	3%
Other	16%	9%	15%	15%	15%

Spine Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	17%	22%	20%	20%
5 Mile	16%	21%	20%	19%
7 Mile	10%	13%	12%	11%

Measure	Value
Market position	8
Average Case Market Share	6.2%
FY29 Target	

BURNS AND WOUNDS

Market Position & Growth Opportunity

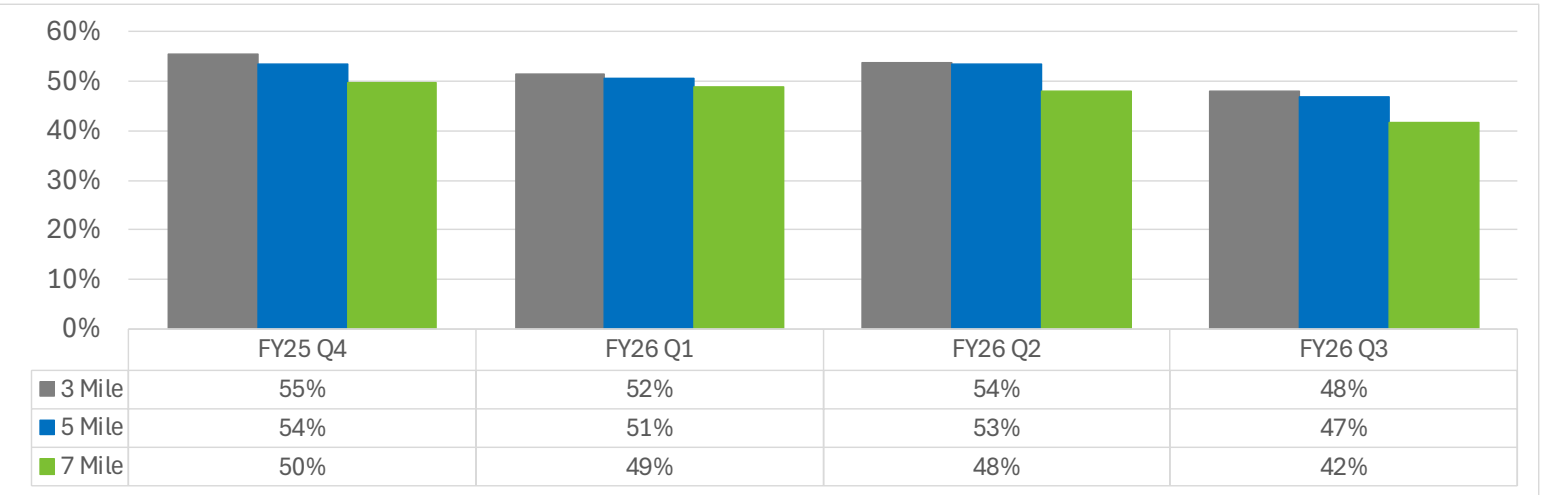
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	38%	48%	38%	40%	38%
Medicare	32%	20%	33%	32%	38%
Commercial	16%	20%	11%	10%	9%
Self Pay	5%	5%	6%	6%	5%
Other	10%	9%	13%	12%	10%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	38%	48%	45%	45%	41%
Medicare	33%	23%	30%	29%	33%
Commercial	15%	16%	10%	10%	12%
Self Pay	3%	3%	5%	5%	4%
Other	11%	10%	10%	11%	11%

Burns and Wounds Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	55%	52%	54%	48%
5 Mile	54%	51%	53%	47%
7 Mile	50%	49%	48%	42%

Measure	Value
Market position	1
Average Case Market Share	39.7%
FY29 Target	

ENT

Market Position & Growth Opportunity

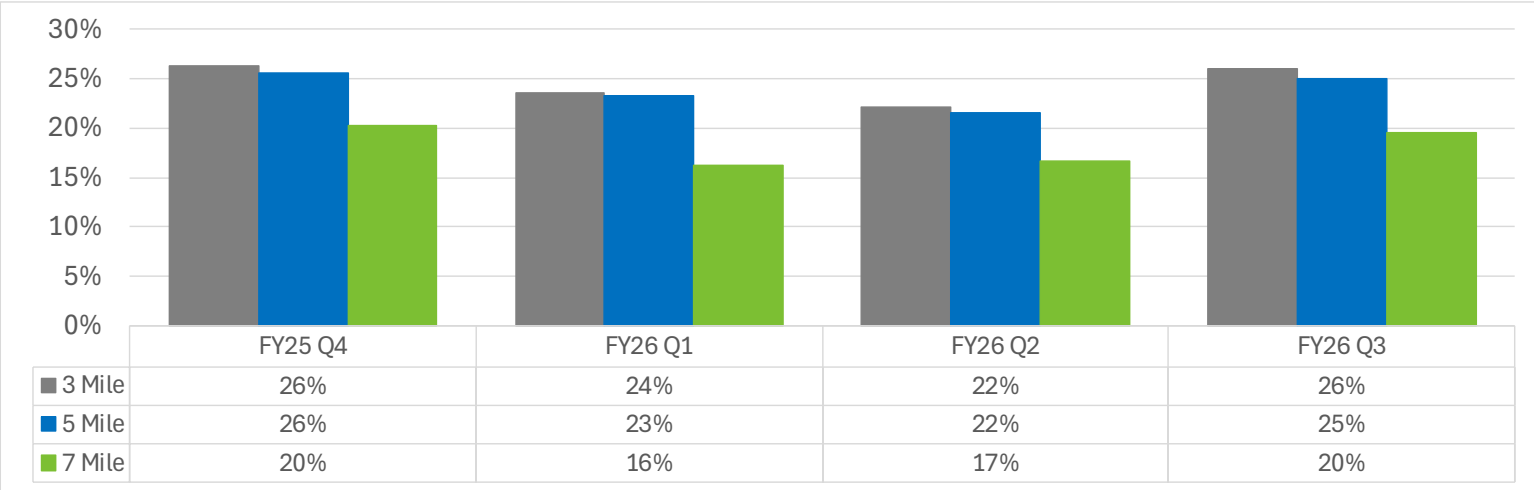
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	26%	46%	31%	31%	27%
Medicare	36%	34%	34%	33%	37%
Commercial	29%	16%	21%	22%	24%
Self Pay	5%	2%	9%	9%	8%
Other	5%	2%	4%	5%	5%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	29%	52%	42%	41%	35%
Medicare	30%	9%	22%	22%	28%
Commercial	31%	26%	25%	25%	25%
Self Pay	4%	11%	5%	5%	5%
Other	6%	2%	5%	7%	7%

ENT Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



Measure	Value
Market position	3
Average Case Market Share	8.8%
FY29 Target	

GENERAL SURGERY

Market Position & Growth Opportunity

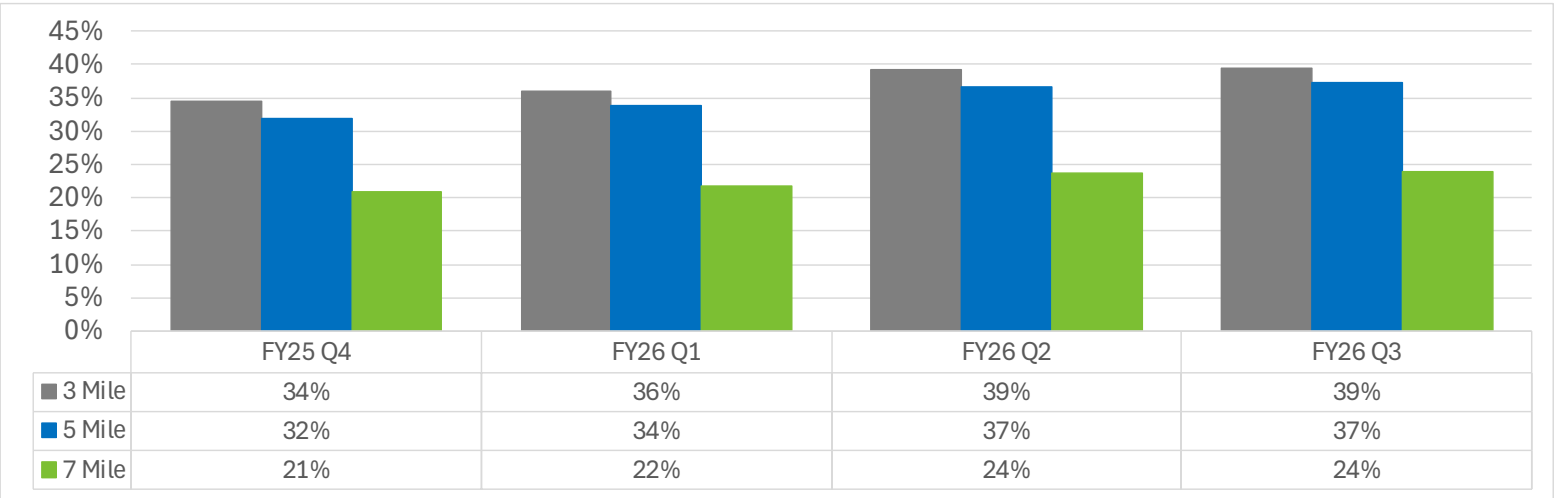
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	22%	43%	33%	33%	25%
Medicare	40%	27%	39%	39%	44%
Commercial	27%	21%	17%	17%	22%
Self Pay	3%	5%	4%	4%	3%
Other	8%	4%	7%	7%	6%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	22%	38%	32%	33%	25%
Medicare	40%	26%	36%	34%	43%
Commercial	25%	23%	20%	20%	22%
Self Pay	4%	8%	5%	4%	4%
Other	9%	5%	8%	9%	7%

General Surgery Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	34%	36%	39%	39%
5 Mile	32%	34%	37%	37%
7 Mile	21%	22%	24%	24%

Measure	Value
Market position	2
Average Case Market Share	12.4%
FY29 Target	

OPTHALMOLOGY

Market Position & Growth Opportunity

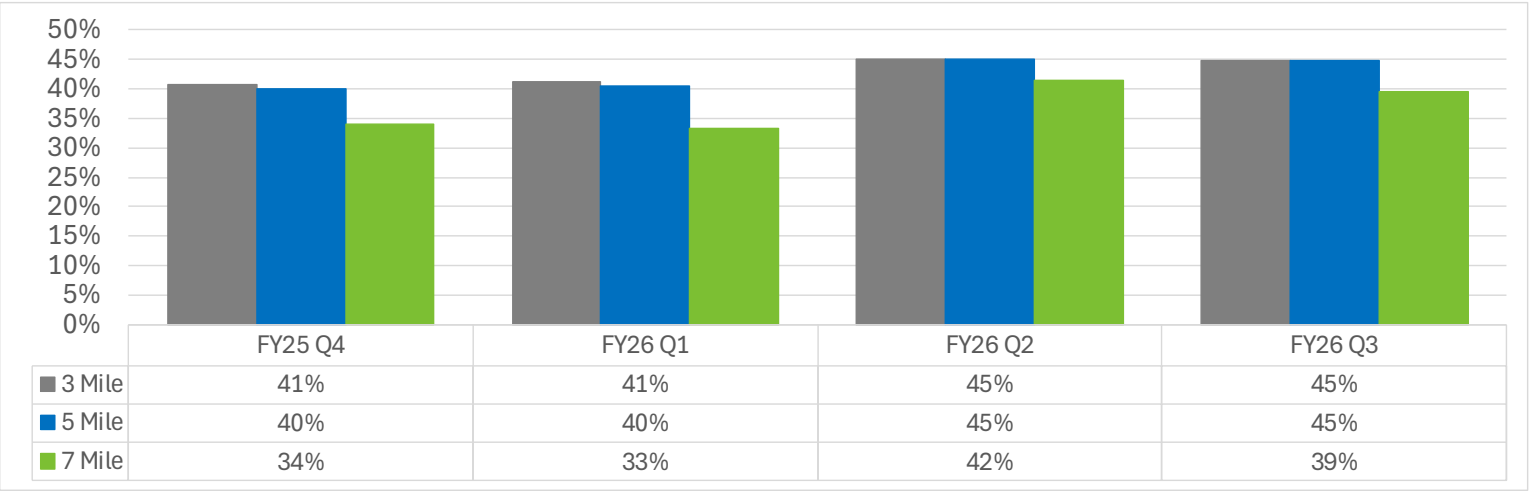
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	35%	50%	38%	40%	44%
Medicare	19%	15%	21%	20%	15%
Commercial	36%	20%	31%	30%	33%
Self Pay	5%	10%	3%	3%	3%
Other	5%	5%	7%	7%	5%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	30%	50%	24%	24%	20%
Medicare	28%	10%	41%	41%	43%
Commercial	32%	33%	24%	24%	26%
Self Pay	4%	3%	3%	3%	4%
Other	6%	3%	8%	8%	7%

Ophthalmology Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	41%	41%	45%	45%
5 Mile	40%	40%	45%	45%
7 Mile	34%	33%	42%	39%

Measure	Value
Market position	1
Average Case Market Share	24.3%
FY29 Target	

UROLOGY

Market Position & Growth Opportunity

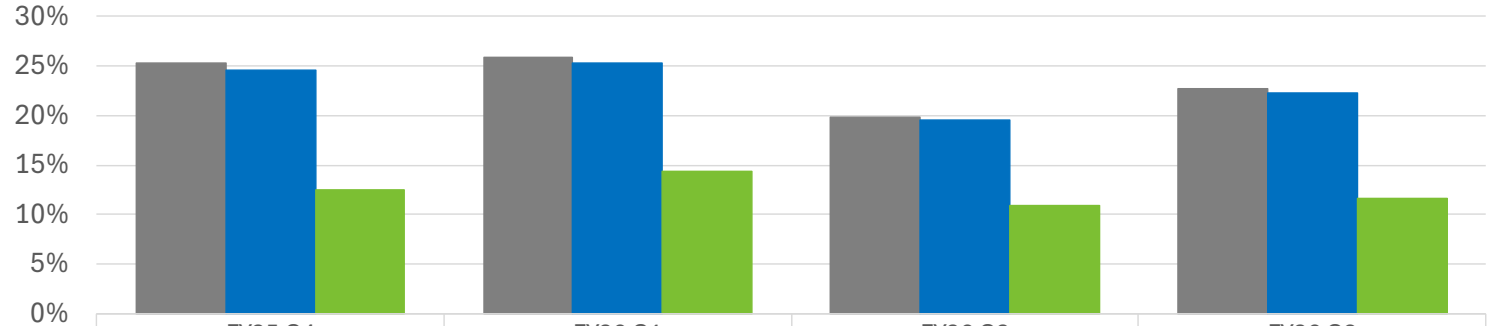
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	17%	29%	27%	27%	22%
Medicare	41%	36%	35%	36%	40%
Commercial	31%	26%	23%	22%	26%
Self Pay	3%	10%	3%	3%	3%
Other	8%	0%	11%	12%	8%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	20%	33%	23%	23%	22%
Medicare	39%	24%	39%	39%	41%
Commercial	28%	29%	21%	21%	22%
Self Pay	4%	12%	5%	5%	6%
Other	8%	2%	12%	12%	8%

Urology Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	25%	26%	20%	23%
5 Mile	25%	25%	20%	22%
7 Mile	12%	14%	11%	12%

Measure	Value
Market position	8
Average Case Market Share	6.4%
FY29 Target	

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

Issue: **Proposed FY27 Performance Goals**	**Back-up:**
Petitioner: Tony Marinello, Chief Operating Officer	

Recommendation:

That the Governing Board Strategic Planning Committee review and discuss the selection of the Priority Service Lines as they relate to the FY27 Strategic Planning Committee's Organizational Performance Goals; and direct staff accordingly. ***(For possible action)***

FISCAL IMPACT:

None

BACKGROUND:

The Committee will receive an update regarding the proposed FY27 performance goals.

Cleared for Agenda
August 27 2026

Agenda Item #
6

Service Line Prioritization Matrix August 2026

Service Line Group Prioritization Matrix

Organizational Performance Goals

SG2 Service Line Key

SG2 Group	SG2 Service Line
Women's Health	Breast Health, Gynecology, Obstetrics
Orthopedics	Orthopedics
Cardiovascular	Cardiology, Vascular
Surgery	Burns and Wounds, ENT, General Surgery, Ophthalmology, Urology
Behavioral Health	Behavioral Health
Cancer	Cancer
Medicine	Allergy and Immunology, Dermatology, Endocrine, Gastroenterology, General Medicine, Genetics, Hematology, Hepatology, Infectious Disease, Nephrology, Pulmonology, Rheumatology
Neonatology / Normal Newborn	Neonatology, Normal Newborn
Neurosciences	Neurosciences
Spine	Spine
Other	Not Assigned

Organizational Performance Goals

SG2 Proposed Top 5 Service Lines

SG2 Group	SG2 Service Line
Orthopedics	Orthopedics
Cardiovascular	Cardiology, Vascular
Surgery	Burns and Wounds, ENT, General Surgery, Ophthalmology, Urology
Neurosciences	Neurosciences
Spine	Spine

UMC Service Line Group Prioritization Matrix

This framework intentionally balances mission, financial sustainability, growth opportunity, and organizational capability so that no single factor determines prioritization.

		IMPORTANCE (Value to UMC)																STRATEGIC TIMING				
		Mission Related Criterion						Current Value		Future Value				Executability				Horizon				
		Mission Alignment		Community Need		Academic Value		Operating Income		Fair Share Opportunity		Population Growth		Workforce Feasibility		Capital Efficiency		Immediacy				Weighted Total
		Weight	20%	Weight	15%	Weight	10%	Weight	15%	Weight	0%	Weight	5%	Weight	10%	Weight	5%	Weight	5%			85%
		How does the Service Line align with the mission (1=Low, 3=Moderate, 5=Core)		*Does this service line fulfill a market gap or Level 1 Trauma requirement? (1=Limited, 3=Moderate, 5=Critical)*		*How well does it align in a teaching hospital? (1=Minimal, 3=Moderate, 5=Essential)*		*What is the profitability of the Service Line? (1=Loss, 3=Moderate, 5=Top)*		*What is the gap between fair share and market share? (1=Small, 3=Moderate, 5=Large)*		*What is demand expected to be based on demographics? (1=Declining, 3=Stable, 5=Rapid)*		*Are the right resources already existing? (1=Supplement, 3=Stretched, 5=Adequate)*		*Do we have adequate capital to properly support this service line? (1=Limited, 3=Sufficient, 5=Robust)*		*How urgent is this? What is the impact if Service Line is not initiated now? (1=Deferred, 3=Planned, 5=Immediate)*				
SG2 Service Line Group	**SG2 Service Line**	***Raw Score***	***Weighted Score***	***Raw Score***	***Weighted Score***	***Raw Score***	***Weighted Score***	***Raw Score***	***Weighted Score***	***Raw Score***	***Weighted Score***	***Raw Score***	***Weighted Score***	***Raw Score***	***Weighted Score***	***Raw Score***	***Weighted Score***	***Raw Score***	***Weighted Score***	***IMPORTANCE***	***URGENCY***	***COMBINED TOTAL Importance + Urgency*** *1 (Low) - 10 (High)*	***RANKING***
[Sample Scoring]	[Sample Scoring]	5	1	5	0.75	2	0.2	3	0.45	5	0	4	0.2	5	0.5	1	0.05	1	0.05	3.15	0.05	**3.2**	---
Behavioral Health	Behavioral Health	5	1	5	0.75	3	0.3	5	0.75		0	3	0.15	1	0.1	5	0.25	1	0.05	3.3	0.05	**3.94**	**19**
Cancer	Cancer	5	1	5	0.75	3	0.3	1	0.15		0	3	0.15	1	0.1	3	0.15	3	0.15	2.6	0.15	**3.24**	**26**
Cardiovascular	Cardiology	5	1	5	0.75	5	0.5	3	0.45		0	3	0.15	5	0.5	5	0.25	5	0.25	3.6	0.25	**4.53**	**5**
Cardiovascular	Vascular	5	1	5	0.75	5	0.5	1	0.15		0	3	0.15	5	0.5	5	0.25	5	0.25	3.3	0.25	**4.18**	**14**
Medicine	Allergy and Immunology	1	0.2	1	0.15	3	0.3	1	0.15		0	3	0.15	5	0.5	3	0.15	1	0.05	1.6	0.05	**1.94**	**27**
Medicine	Dermatology	1	0.2	1	0.15	3	0.3	1	0.15		0	1	0.05	1	0.1	1	0.05	1	0.05	1	0.05	**1.24**	**29**
Medicine	Endocrine	5	1	3	0.45	5	0.5	5	0.75		0	3	0.15	3	0.3	5	0.25	3	0.15	3.4	0.15	**4.18**	**14**
Medicine	Gastroenterology	5	1	5	0.75	5	0.5	5	0.75		0	3	0.15	5	0.5	5	0.25	5	0.25	3.9	0.25	**4.88**	**1**
Medicine	General Medicine	5	1	3	0.45	5	0.5	3	0.45		0	3	0.15	5	0.5	5	0.25	5	0.25	3.3	0.25	**4.18**	**16**
Medicine	Genetics	1	0.2	1	0.15	1	0.1	5	0.75		0	3	0.15	1	0.1	3	0.15	1	0.05	1.6	0.05	**1.94**	**28**
Medicine	Hematology	3	0.6	3	0.45	5	0.5	5	0.75		0	3	0.15	3	0.3	3	0.15	3	0.15	2.9	0.15	**3.59**	**24**
Medicine	Hepatology	5	1	3	0.45	5	0.5	1	0.15		0	3	0.15	5	0.5	5	0.25	5	0.25	3	0.25	**3.82**	**21**
Medicine	Infectious Disease	5	1	3	0.45	5	0.5	3	0.45		0	3	0.15	5	0.5	5	0.25	5	0.25	3.3	0.25	**4.18**	**17**
Medicine	Nephrology	5	1	3	0.45	5	0.5	5	0.75		0	3	0.15	5	0.5	5	0.25	5	0.25	3.6	0.25	**4.53**	**6**
Medicine	Pulmonology	5	1	5	0.75	5	0.5	1	0.15		0	3	0.15	5	0.5	5	0.25	5	0.25	3.3	0.25	**4.18**	**18**
Medicine	Rheumatology	3	0.6	3	0.45	5	0.5	5	0.75		0	3	0.15	1	0.1	3	0.15	3	0.15	2.7	0.15	**3.35**	**25**
Neonatology/Normal Newborn	Neonatology	5	1	5	0.75	5	0.5	5	0.75		0	3	0.15	5	0.5	5	0.25	5	0.25	3.9	0.25	**4.88**	**2**
Neonatology/Normal Newborn	Normal Newborn	5	1	3	0.45	5	0.5	5	0.75		0	3	0.15	5	0.5	5	0.25	3	0.15	3.6	0.15	**4.41**	**11**
Neurosciences	Neurosciences	5	1	5	0.75	5	0.5	3	0.45		0	3	0.15	5	0.5	5	0.25	5	0.25	3.6	0.25	**4.53**	**7**
Orthopedics	Orthopedics	5	1	5	0.75	5	0.5	3	0.45		0	3	0.15	5	0.5	5	0.25	5	0.25	3.6	0.25	**4.53**	**8**
Other	Not Assigned		0		0		0		0		0		0		0		0		0	0	0	**0.00**	**30**
Spine	Spine	5	1	5	0.75	5	0.5	5	0.75		0	3	0.15	5	0.5	5	0.25	5	0.25	3.9	0.25	**4.88**	**3**
Surgery	Burns and Wounds	5	1	5	0.75	5	0.5	3	0.45		0	3	0.15	3	0.3	5	0.25	5	0.25	3.4	0.25	**4.29**	**12**
Surgery	ENT	5	1	5	0.75	5	0.5	1	0.15		0	3	0.15	5	0.5	5	0.25	5	0.25	3.3	0.25	**4.18**	**19**
Surgery	General Surgery	5	1	5	0.75	5	0.5	3	0.45		0	3	0.15	5	0.5	5	0.25	5	0.25	3.6	0.25	**4.53**	**9**
Surgery	Ophthalmology	5	1	5	0.75	5	0.5	5	0.75		0	3	0.15	5	0.5	5	0.25	5	0.25	3.9	0.25	**4.88**	**4**
Surgery	Urology	5	1	5	0.75	5	0.5	1	0.15		0	3	0.15	3	0.3	5	0.25	5	0.25	3.1	0.25	**3.94**	**20**
Women's Health	Breast Health	5	1	3	0.45	5	0.5	1	0.15		0	3	0.15	5	0.5	5	0.25	3	0.15	3	0.15	**3.71**	**23**
Women's Health	Gynecology	5	1	3	0.45	5	0.5	1	0.15		0	3	0.15	5	0.5	5	0.25	5	0.25	3	0.25	**3.82**	**22**
Women's Health	Obstetrics	5	1	3	0.45	5	0.5	5	0.75		0	3	0.15	5	0.5	5	0.25	5	0.25	3.6	0.25	**4.53**	**10**

Blue cells require your input.

Key

SG2 Service Line Group	SG2 Service Line Subgroups
Women's Health	Breast Health, Gynecology, Obstetrics
Orthopedics	Orthopedics
Cardiovascular	Cardiology, Vascular
Surgery	Burns and Wounds, ENT, General Surgery, Ophthalmology, Urology
Behavioral Health	Behavioral Health
Cancer	Cancer
Medicine	Allergy and Immunology, Dermatology, Endocrine, Gastroenterology, General Medicine, Genetics, Hematology, Hepatology, Infectious Disease, Nephrology, Pulmonology, Rheumatology
Neonatology / Normal Newborn	Neonatology, Normal Newborn
Neurosciences	Neurosciences
Spine	Spine
Other	Not Assigned

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

Issue: **FY2026 Performance Goals**	**Back-up:**
Petitioner: Tony Marinello, Chief Operating Officer	

Recommendation:

That the Governing Board Strategic Planning Committee review and discuss the FY27 Organizational Performance Goals as they relate to the Strategic Planning Committee; and make a recommendation to the Human Resources and Executive Compensation Committee; and direct staff accordingly. ***(For possible action)***

FISCAL IMPACT:

None

BACKGROUND:

The Committee will receive an update regarding the FY26 performance goals.

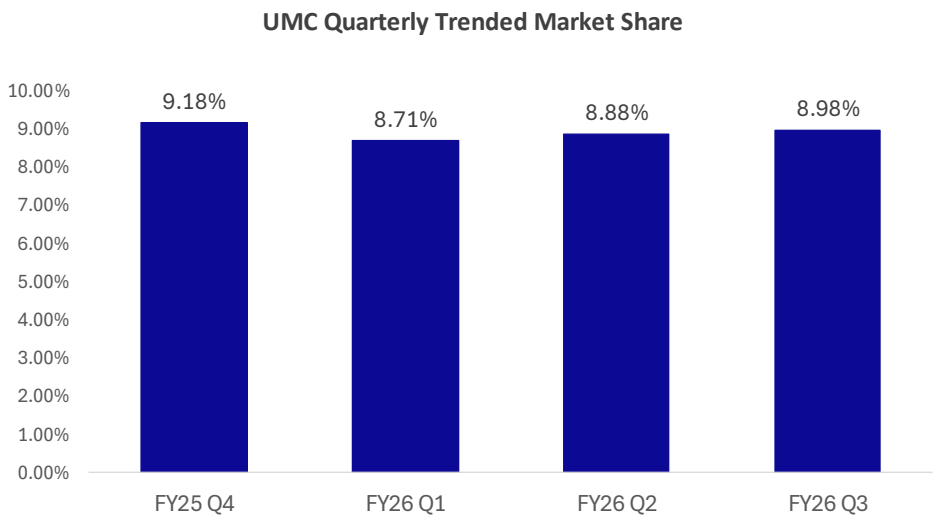
Cleared for Agenda
August 27, 2026

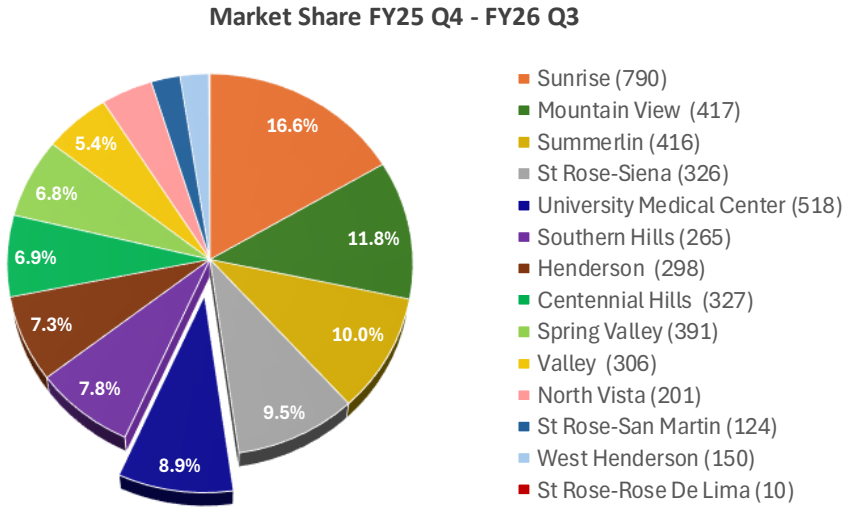
Agenda Item #
7


UMC
UNIVERSITY MEDICAL CENTER
Market Share
Q4 FY25 – Q3 FY26
August 27, 2026
HOPE
UMC
1800

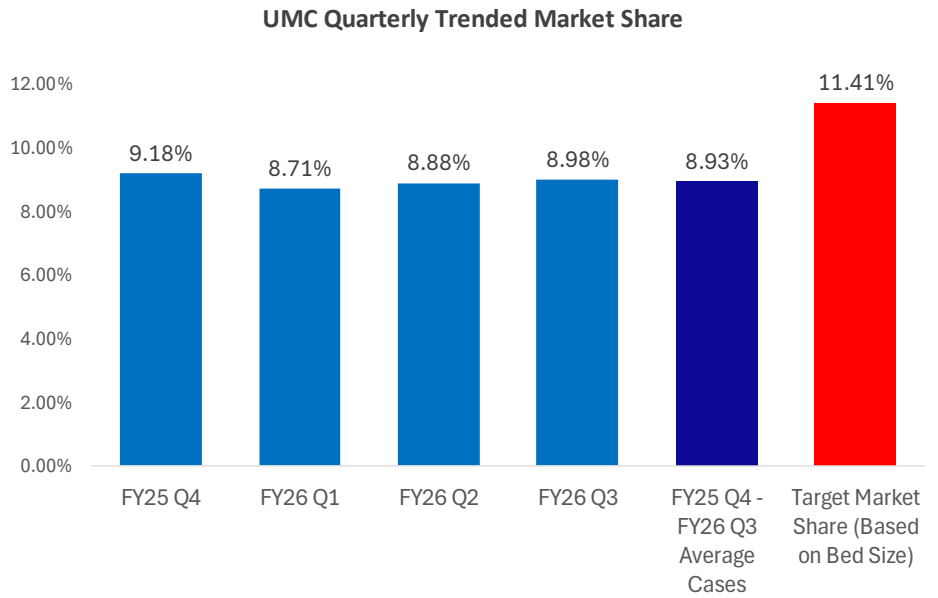
UMC Inpatient Market Share

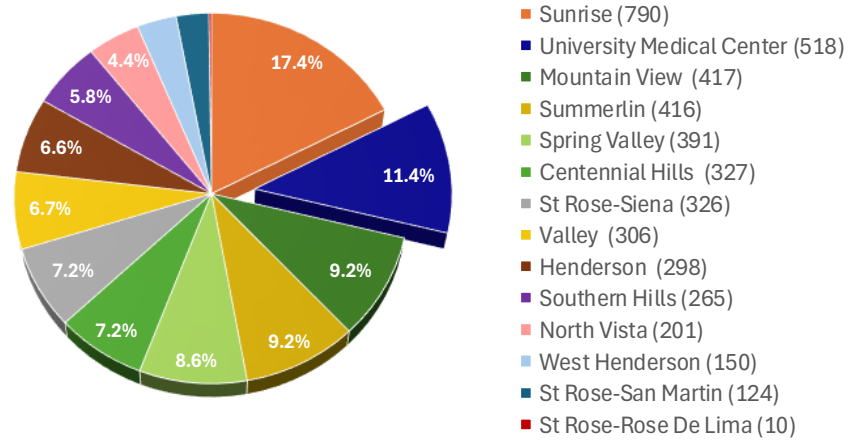
Market Position & Growth Opportunity

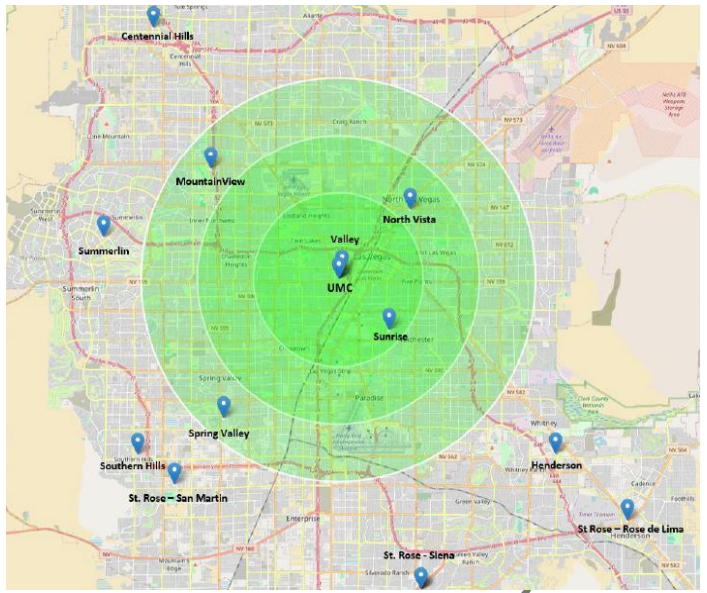




Measure	Value
Market position	5
Average Case Market Share	8.9%
Bed-Size Fair Share Target	11.4%
Fair Share Gap	(2.5 pts)
FY29 Target	11.4%







UMC Inpatient Market Share

Market Position & Growth Opportunity

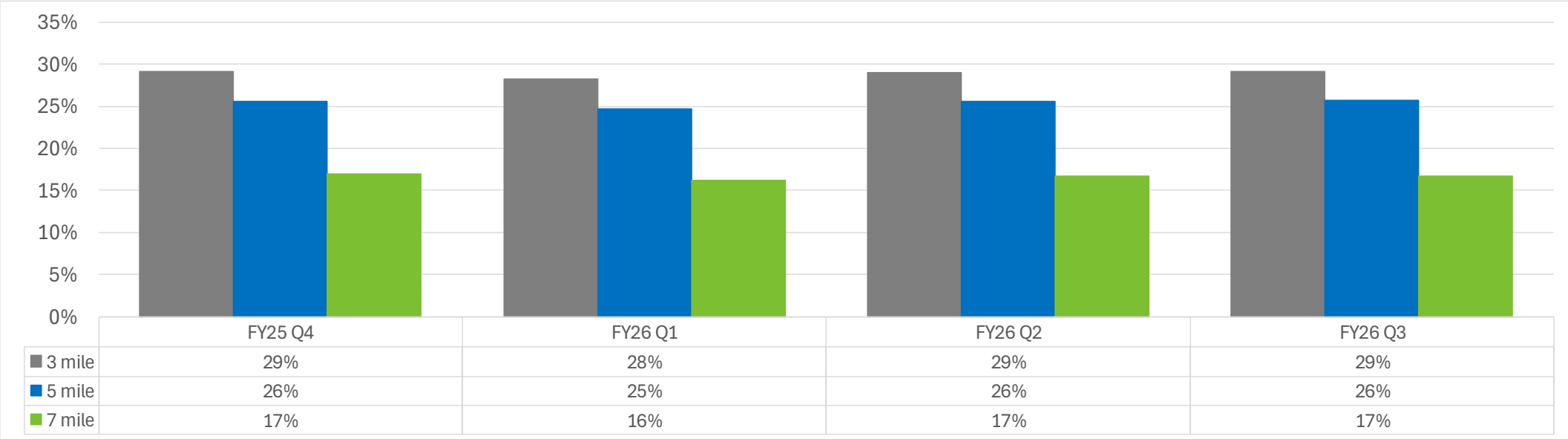
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	29%	43%	37%	40%	34%
Medicare	36%	32%	37%	35%	39%
Commercial	25%	17%	16%	15%	18%
Self Pay	3%	4%	4%	3%	3%
Other	7%	4%	6%	7%	6%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	28%	42%	36%	38%	32%
Medicare	36%	31%	37%	35%	39%
Commercial	25%	18%	16%	15%	19%
Self Pay	3%	5%	4%	4%	3%
Other	8%	5%	7%	8%	7%

Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 mile	29%	28%	29%	29%
5 mile	26%	25%	26%	26%
7 mile	17%	16%	17%	17%

CARDIOLOGY

Market Position & Growth Opportunity

UMC UNIVERSITY MEDICAL CENTER

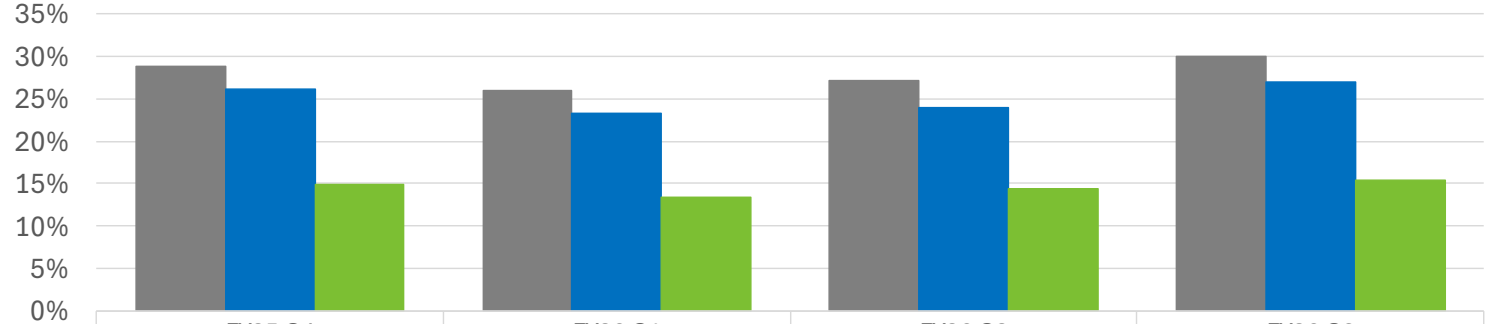
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	18%	26%	28%	29%	22%
Medicare	51%	49%	47%	45%	51%
Commercial	20%	18%	17%	16%	17%
Self Pay	3%	4%	3%	3%	2%
Other	9%	3%	5%	7%	7%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	16%	25%	25%	28%	20%
Medicare	51%	51%	47%	44%	52%
Commercial	20%	17%	19%	18%	18%
Self Pay	3%	4%	3%	2%	2%
Other	10%	3%	6%	9%	7%

Cardiology Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	29%	26%	27%	30%
5 Mile	26%	23%	24%	27%
7 Mile	15%	13%	14%	15%

Measure	Value
Market Position	6
Average Case Market Share	7.9%
FY29 Target	

VASCULAR

Market Position & Growth Opportunity

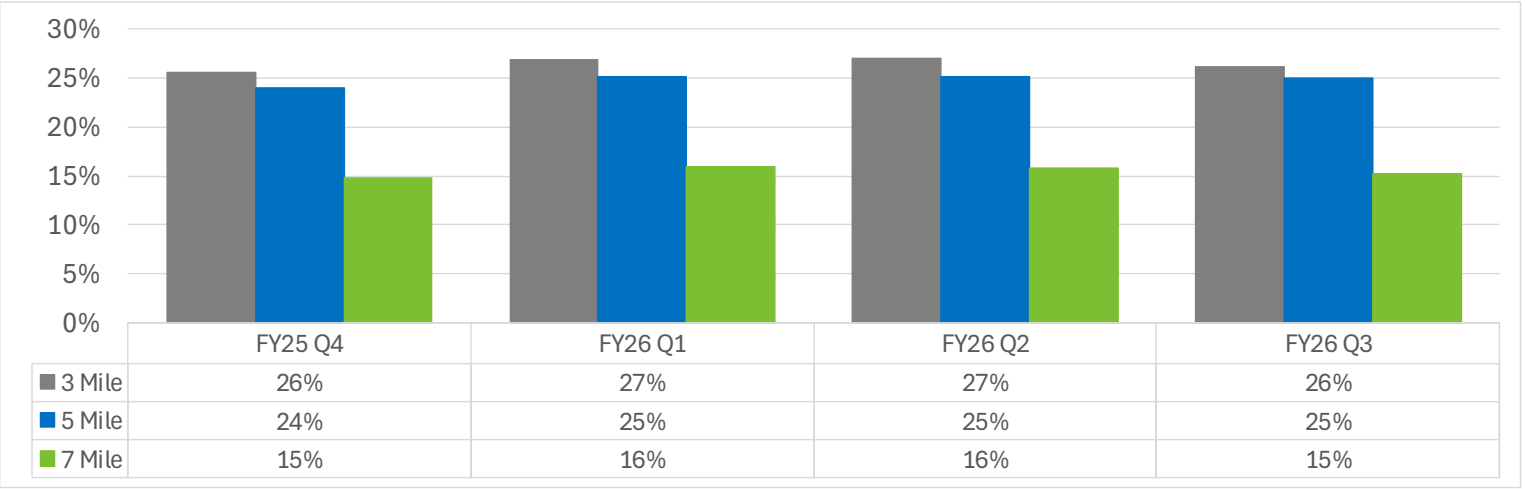
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	18%	26%	25%	26%	20%
Medicare	55%	53%	57%	55%	58%
Commercial	18%	15%	10%	10%	14%
Self Pay	2%	2%	3%	3%	2%
Other	7%	3%	5%	6%	7%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	18%	31%	24%	23%	19%
Medicare	53%	47%	51%	51%	56%
Commercial	18%	18%	11%	11%	13%
Self Pay	3%	2%	5%	5%	4%
Other	8%	3%	8%	9%	7%

Vascular Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	26%	27%	27%	26%
5 Mile	24%	25%	25%	25%
7 Mile	15%	16%	16%	15%

Measure	Value
Market position	3
Average Case Market Share	9.2%
FY29 Target	

NUEROSCIENCES

Market Position & Growth Opportunity

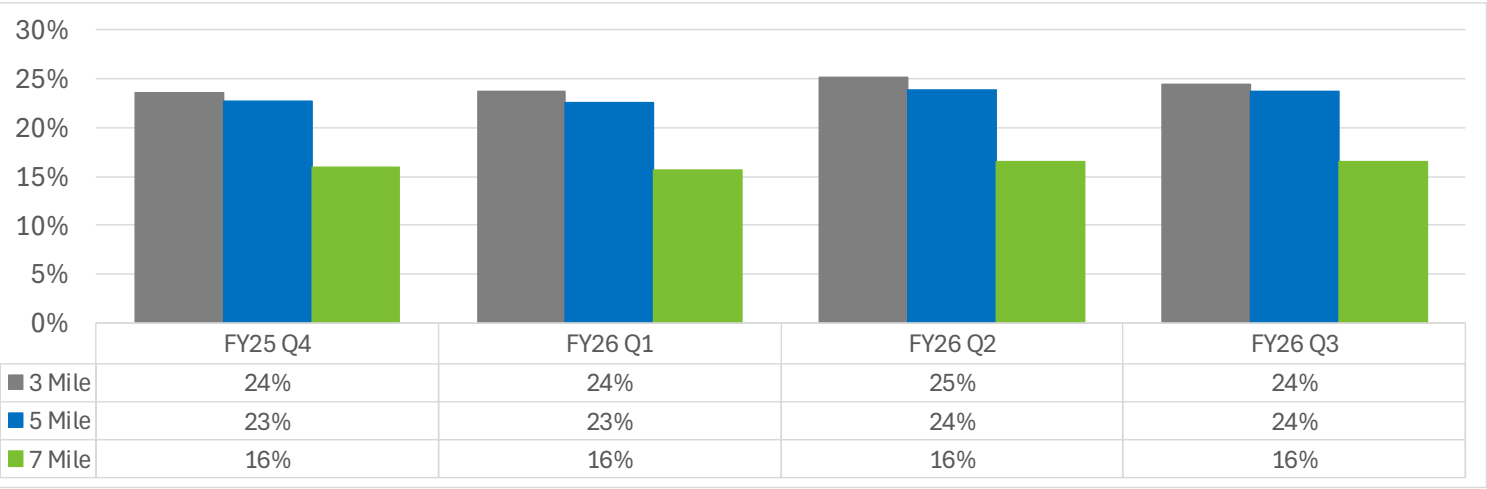
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	21%	37%	26%	27%	23%
Medicare	48%	37%	47%	46%	51%
Commercial	20%	15%	15%	15%	17%
Self Pay	3%	4%	4%	4%	3%
Other	8%	8%	7%	7%	7%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	19%	30%	25%	26%	22%
Medicare	49%	38%	46%	46%	51%
Commercial	20%	19%	17%	16%	17%
Self Pay	3%	4%	3%	3%	3%
Other	9%	9%	8%	9%	7%

Neurosciences Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	24%	24%	25%	24%
5 Mile	23%	23%	24%	24%
7 Mile	16%	16%	16%	16%

Measure	Value
Market position	3
Average Case Market Share	9.7%
FY29 Target	

ORTHOPEDICS

Market Position & Growth Opportunity

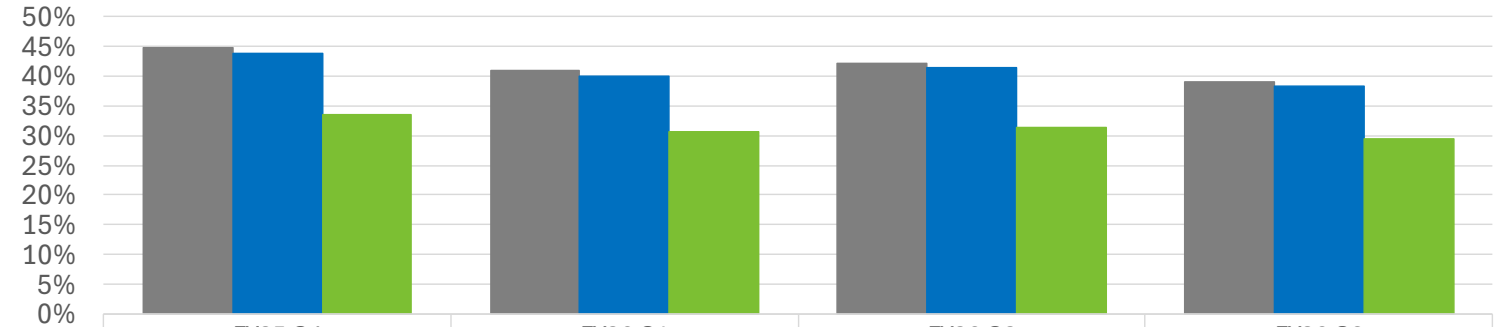
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	18%	32%	22%	23%	19%
Medicare	51%	39%	46%	46%	53%
Commercial	19%	20%	20%	20%	17%
Self Pay	3%	3%	5%	5%	4%
Other	9%	6%	7%	7%	6%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	16%	30%	21%	21%	17%
Medicare	54%	38%	51%	50%	56%
Commercial	16%	20%	16%	16%	15%
Self Pay	2%	4%	3%	3%	3%
Other	11%	9%	9%	9%	9%

Orthopedics Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	45%	41%	42%	39%
5 Mile	44%	40%	41%	38%
7 Mile	34%	31%	31%	29%

Measure	Value
Market position	2
Average Case Market Share	19.2%
FY29 Target	

SPINE

Market Position & Growth Opportunity

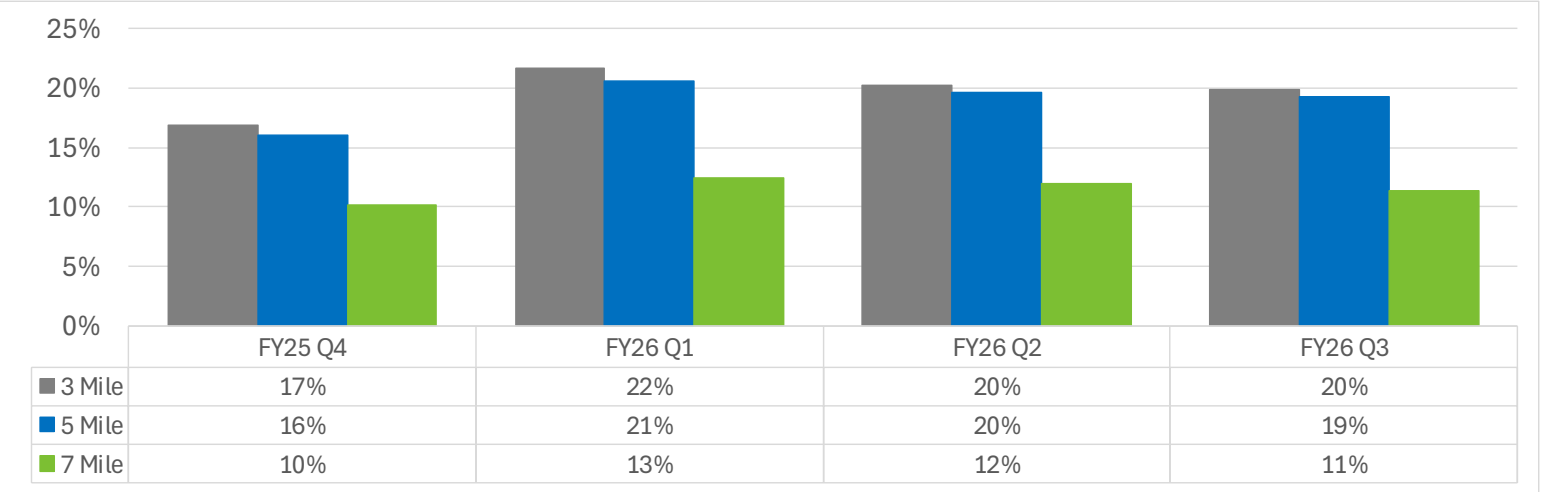
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	15%	32%	20%	20%	17%
Medicare	48%	45%	51%	50%	51%
Commercial	22%	20%	16%	16%	17%
Self Pay	2%	1%	4%	4%	3%
Other	13%	2%	9%	9%	12%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	13%	27%	21%	21%	17%
Medicare	46%	46%	42%	41%	43%
Commercial	23%	17%	19%	19%	22%
Self Pay	2%	1%	3%	4%	3%
Other	16%	9%	15%	15%	15%

Spine Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	17%	22%	20%	20%
5 Mile	16%	21%	20%	19%
7 Mile	10%	13%	12%	11%

Measure	Value
Market position	8
Average Case Market Share	6.2%
FY29 Target	

BURNS AND WOUNDS

Market Position & Growth Opportunity

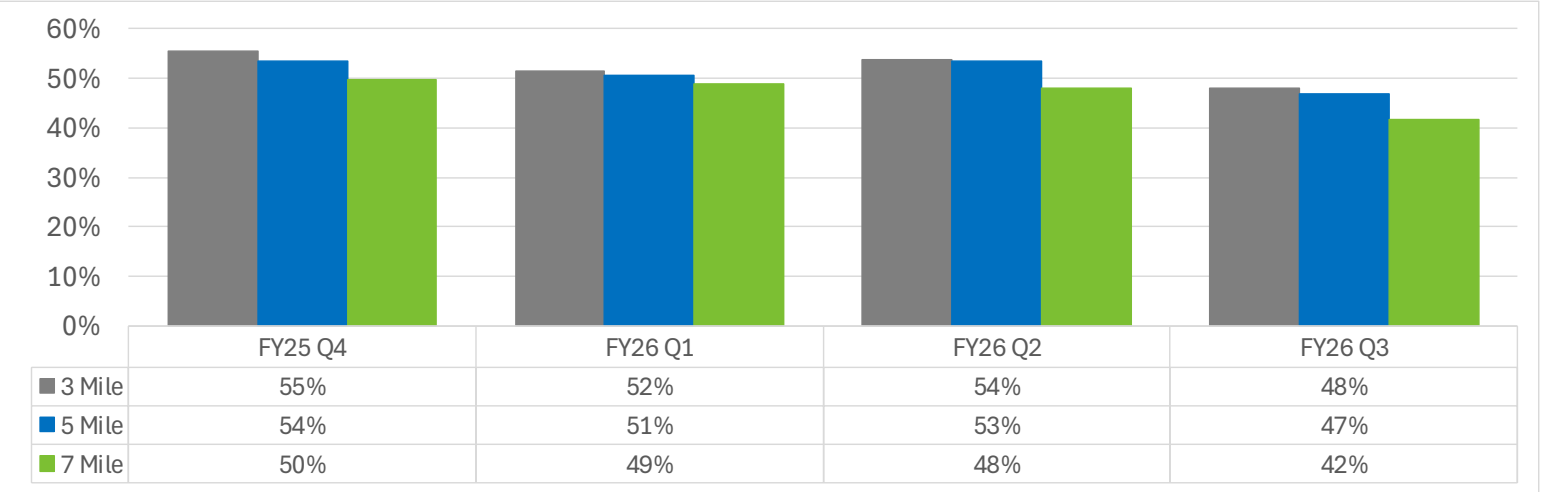
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	38%	48%	38%	40%	38%
Medicare	32%	20%	33%	32%	38%
Commercial	16%	20%	11%	10%	9%
Self Pay	5%	5%	6%	6%	5%
Other	10%	9%	13%	12%	10%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	38%	48%	45%	45%	41%
Medicare	33%	23%	30%	29%	33%
Commercial	15%	16%	10%	10%	12%
Self Pay	3%	3%	5%	5%	4%
Other	11%	10%	10%	11%	11%

Burns and Wounds Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	55%	52%	54%	48%
5 Mile	54%	51%	53%	47%
7 Mile	50%	49%	48%	42%

Measure	Value
Market position	1
Average Case Market Share	39.7%
FY29 Target	

ENT

Market Position & Growth Opportunity

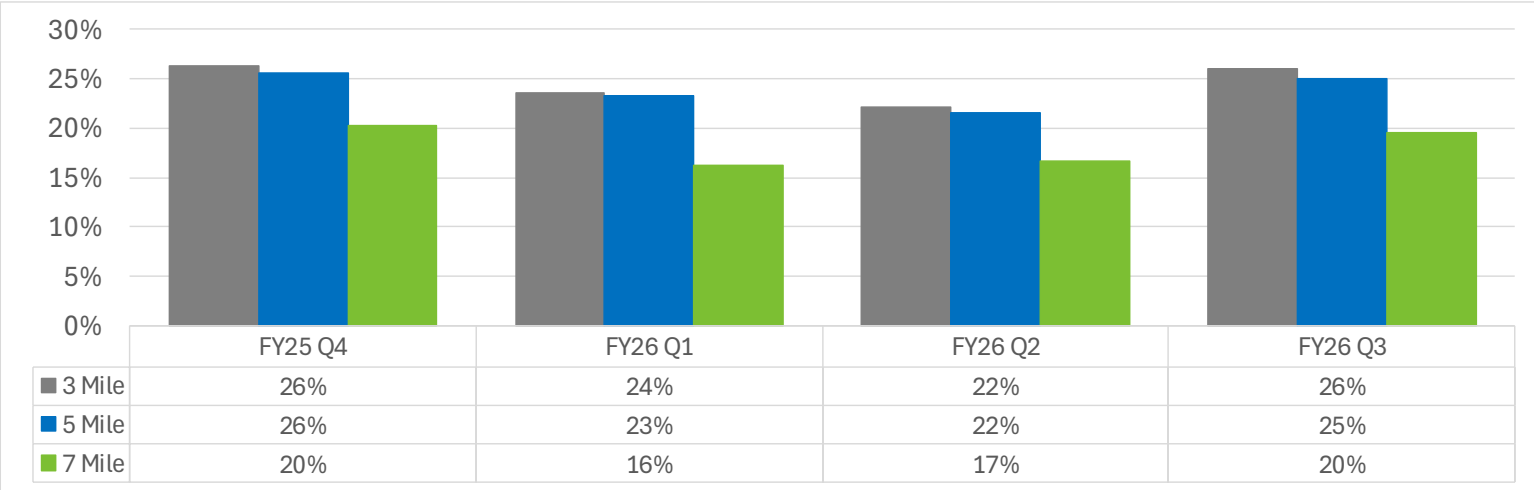
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	26%	46%	31%	31%	27%
Medicare	36%	34%	34%	33%	37%
Commercial	29%	16%	21%	22%	24%
Self Pay	5%	2%	9%	9%	8%
Other	5%	2%	4%	5%	5%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	29%	52%	42%	41%	35%
Medicare	30%	9%	22%	22%	28%
Commercial	31%	26%	25%	25%	25%
Self Pay	4%	11%	5%	5%	5%
Other	6%	2%	5%	7%	7%

ENT Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



Measure	Value
Market position	3
Average Case Market Share	8.8%
FY29 Target	

GENERAL SURGERY

Market Position & Growth Opportunity

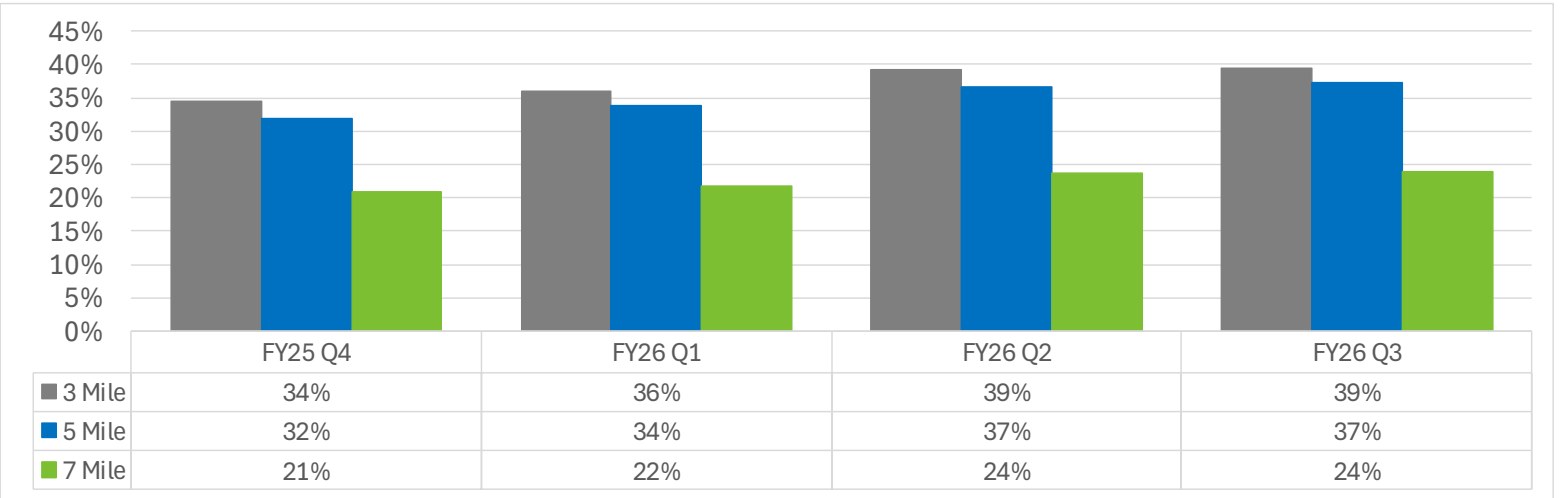
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	22%	43%	33%	33%	25%
Medicare	40%	27%	39%	39%	44%
Commercial	27%	21%	17%	17%	22%
Self Pay	3%	5%	4%	4%	3%
Other	8%	4%	7%	7%	6%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	22%	38%	32%	33%	25%
Medicare	40%	26%	36%	34%	43%
Commercial	25%	23%	20%	20%	22%
Self Pay	4%	8%	5%	4%	4%
Other	9%	5%	8%	9%	7%

General Surgery Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	34%	36%	39%	39%
5 Mile	32%	34%	37%	37%
7 Mile	21%	22%	24%	24%

Measure	Value
Market position	2
Average Case Market Share	12.4%
FY29 Target	

OPTHALMOLOGY

Market Position & Growth Opportunity

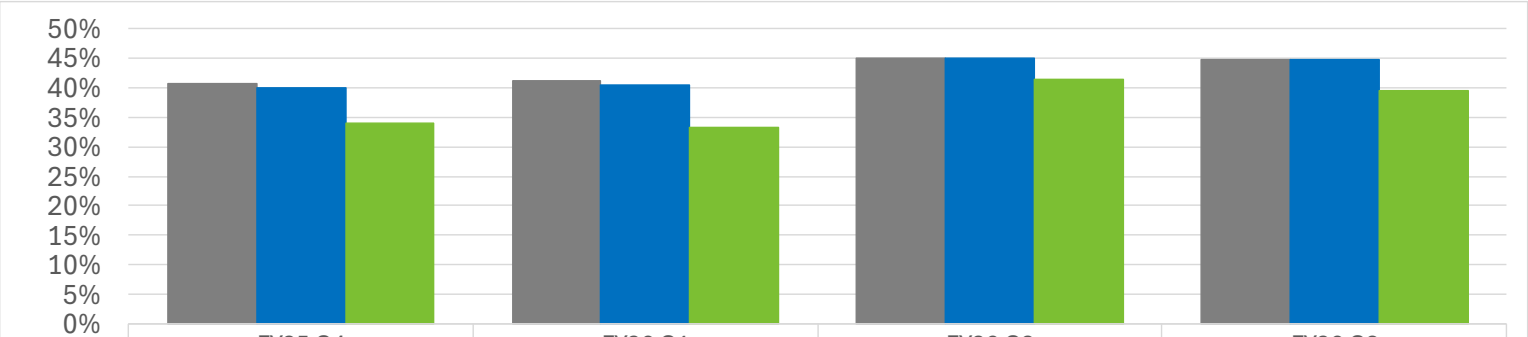
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	35%	50%	38%	40%	44%
Medicare	19%	15%	21%	20%	15%
Commercial	36%	20%	31%	30%	33%
Self Pay	5%	10%	3%	3%	3%
Other	5%	5%	7%	7%	5%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	30%	50%	24%	24%	20%
Medicare	28%	10%	41%	41%	43%
Commercial	32%	33%	24%	24%	26%
Self Pay	4%	3%	3%	3%	4%
Other	6%	3%	8%	8%	7%

Ophthalmology Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	41%	41%	45%	45%
5 Mile	40%	40%	45%	45%
7 Mile	34%	33%	42%	39%

Measure	Value
Market position	1
Average Case Market Share	24.3%
FY29 Target	

UROLOGY

Market Position & Growth Opportunity

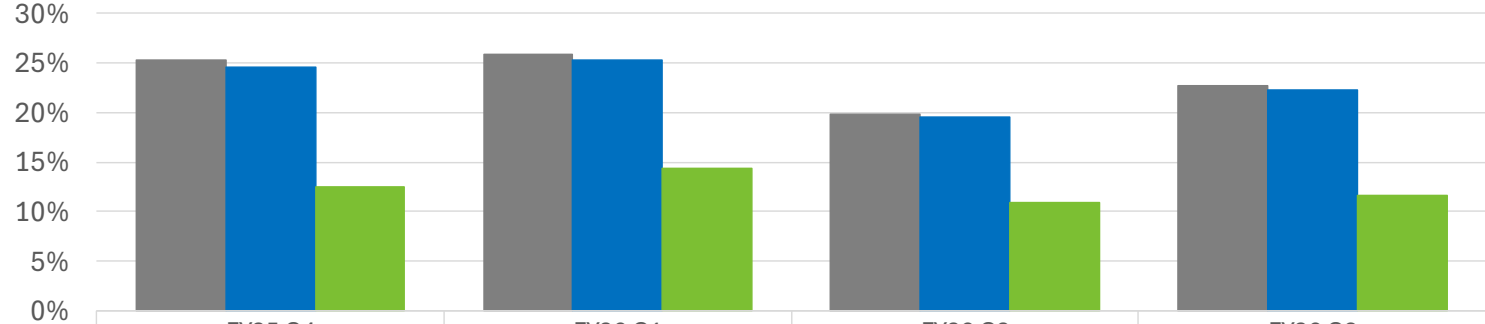
FY25 Q4 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	17%	29%	27%	27%	22%
Medicare	41%	36%	35%	36%	40%
Commercial	31%	26%	23%	22%	26%
Self Pay	3%	10%	3%	3%	3%
Other	8%	0%	11%	12%	8%

FY26 Q3 Payor Mix

Payor Mix	LV Overall Market	UMC Overall	Market 3-Mile	Market 5-Mile	Market 7-Mile
Medicaid	20%	33%	23%	23%	22%
Medicare	39%	24%	39%	39%	41%
Commercial	28%	29%	21%	21%	22%
Self Pay	4%	12%	5%	5%	6%
Other	8%	2%	12%	12%	8%

Urology Quarterly Market Share by Proximity to UMC FY25 Q4 - FY26 Q3



	FY25 Q4	FY26 Q1	FY26 Q2	FY26 Q3
3 Mile	25%	26%	20%	23%
5 Mile	25%	25%	20%	22%
7 Mile	12%	14%	11%	12%

Measure	Value
Market position	8
Average Case Market Share	6.4%
FY29 Target	

Service Line Prioritization Matrix August 2026

Service Line Group Prioritization Matrix

Organizational Performance Goals

SG2 Service Line Key

SG2 Group	SG2 Service Line
Women's Health	Breast Health, Gynecology, Obstetrics
Orthopedics	Orthopedics
Cardiovascular	Cardiology, Vascular
Surgery	Burns and Wounds, ENT, General Surgery, Ophthalmology, Urology
Behavioral Health	Behavioral Health
Cancer	Cancer
Medicine	Allergy and Immunology, Dermatology, Endocrine, Gastroenterology, General Medicine, Genetics, Hematology, Hepatology, Infectious Disease, Nephrology, Pulmonology, Rheumatology
Neonatology / Normal Newborn	Neonatology, Normal Newborn
Neurosciences	Neurosciences
Spine	Spine
Other	Not Assigned

Organizational Performance Goals

SG2 Proposed Top 5 Service Lines

SG2 Group	SG2 Service Line
Orthopedics	Orthopedics
Cardiovascular	Cardiology, Vascular
Surgery	Burns and Wounds, ENT, General Surgery, Ophthalmology, Urology
Neurosciences	Neurosciences
Spine	Spine


UMC
UNIVERSITY MEDICAL CENTER
Proposed Organizational Goals FY27
August 27, 2026
HOPE
UMC
1800

FY27 Strategic Planning Committee Goals

GOAL 1: SERVICE-LINE FINANCIAL AND CLINICAL PERFORMANCE (25%)

Improve the financial and clinical performance of the five FY2027 priority service-line groups using the normalized FY2026 results as the baseline.

GOAL 2: ACCESS, THROUGHPUT, AND CAPACITY (25%)

Optimize capacity through efficient throughput management and improve timely access to care through measurable improvements in emergency and ambulatory performance.

GOAL 3: ENTERPRISE STRATEGY AND SERVICE-LINE GOVERNANCE (25%)

Secure Governing Board approval of an integrated FY2027-FY2029 enterprise strategic plan and begin execution through standardized service-line, accountable ownership, and performance reporting every two months.

GOAL 4: STRATEGIC GROWTH, ACADEMIC MISSION, AND INFRASTRUCTURE (25%)

Achieve the Board-approved FY2027 milestones for strategic growth, the Academic Health Center, and priority capital projects.

FY27 Strategic Planning Committee Goals

GOAL 1: SERVICE-LINE FINANCIAL AND CLINICAL PERFORMANCE (25%)

- **Improve the financial and clinical performance of the five FY2027 priority service-line groups using the normalized FY2026 results as the baseline.**

MEASURES

- Increase the combined contribution margin of the five-priority service-line groups in FY2027 compared to FY2026 total of $371M
- Manage the combined operating loss of the five-priority service-line groups in FY2027 over the prior fiscal year, FY2026 loss of $14.7M
- Achieve or exceed the Board-approved FY2027 clinical quality, patient outcome, or performance target established for each priority service-line group.
- Develop and approve a comprehensive written strategic action plan for each priority service-line group by October 31, 2026, through the Strategy Committee and provide progress updates to the Strategic Planning Committee every 2 months.

FY 27 Strategic Planning Committee Goals

GOAL 2: ACCESS, THROUGHPUT, AND CAPACITY (25%)

- **Optimize capacity through efficient throughput management and improve timely access to care through measurable improvements in emergency and ambulatory performance.**

MEASURES

- Appoint an accountable **ED provider leader** by **September 1, 2026**, and achieve FY2027 ED throughput targets.
  - Reduce ED LWBS/Elopement rate from **2.5% to 2.0%**.
  - Data source is through EPIC
- Launch the **24/7 same-day care center** by **November 2, 2026**, within the approved budget.
  - Meet approved **volume and contribution margin targets** during the first eight months of operation.

FY 27 Strategic Planning Committee Goals

GOAL 3: ENTERPRISE STRATEGY AND SERVICE-LINE GOVERNANCE (25%)

- **Secure Governing Board approval of an integrated FY2027-FY2029 enterprise strategic plan and begin execution through standardized service-line, accountable ownership, and performance reporting every two months.**

MEASURES

- Secure Governing Board approval of the **integrated FY2027-FY2029 enterprise** strategic plan by December 31, 2026.
- Complete standardized strategies for all five-priority service-line groups by November 30, 2026.
- Assign an Executive Sponsor and Governing Board Liaison to each service line by September 30, 2026.
- Implement service-line dashboards reporting financial, clinical, market, access, workforce, and capital metrics every two months.
- Align and document the **FY2027–FY2029 Capital Plan** with strategic priorities and service-line objectives.
- Develop and implement a marketing plan aligned with strategic goals, including measurable ROI metrics.
- Deploy approved AI and digital access solutions to improve coding and documentation accuracy, call center performance, referral completion, and patient access outcomes.

FY 27 Strategic Planning Committee Goals

GOAL 4: STRATEGIC GROWTH, ACADEMIC MISSION, AND INFRASTRUCTURE

- **Achieve the Board-approved FY2027 milestones for strategic growth, the Academic Health Center, and priority capital projects.**

MEASURES

- **Inpatient Rehabilitation**
  - Achieve all approved FY2027 scope, budget, financing, and schedule milestones.
  - Maintain project costs within the approved budget and provide quarterly Board updates.
- **Parking Garage / Master Plan**
  - Achieve Board-approved design, financing, and construction milestones.
  - Maintain project timeline and budget targets.
- **Tower Modernization:** Maintain construction progress within the approved budget and timeline.
- **Academic Health Center**
  - Obtain successful ACGME site visit for the Sponsoring Institution.
  - Governor's GME Grant compliance and adherence to reporting milestones to ensure full reimbursement.
- **Ambulatory Surgery Center:** Secure ambulatory surgery center location, acquisition, or agreement.
  - Present business plan, proforma and transition of OP procedures to ASC and backfill of IP cases
  - Improve inpatient OR capacity and access for higher-acuity cases.

Proposed Organizational Goals FY27 (Weighting)

August 27, 2026

Organizational Performance Goals

FY27 Strategic Planning Goal Weighting

Goal	Allocation Within the Goal
Goal 1	Financial 40% (20% CM, 20% OI) Clinical/Quality 40% (collectively) Plans/Reporting 20%
Goal 2	LWBS 35% Same-Day Care 30% Other ED Throughput 35%
Goal 3	Enterprise Strategic Plan 30% Service-Line /Ownership 25% Dashboards 20% Organizational Alignment 15% AI/Digital Outcomes 10%
Goal 4	Each of the Five Measures 20%

Organizational Performance Goals

FY27 Strategic Planning Attainment And Goal Credit

Attainment	Credit
Measure not achieved	0%
Approved threshold or partial milestone achieved	50%
FY2027 target achieved	100%
Preapproved stretch target achieved	125%
Credit is applied to the weight assigned to each measure. Measures without an approved stretch target are capped at 100% credit.	

Organizational Performance Goals

FY27 Strategic Planning Committee Goals

GOAL 1 – EVALUATION CRITERIA

Contribution Margin, FY2026 Normalized Baseline: $371M			Credit
Threshold:	$13.5 M	$384.5 M (90% of the approved target)	50%
Target:	$15.0 M	$386.0 M (100% of the approved target)	100%
Stretch:	$16.5 M	$387.5 M (110% of the approved target)	125%

Operating Income, FY2026 Normalized Baseline: ($14.7M)			Credit
Threshold:	$14, 931,734	(90% of the approved target)	50%
Target:	$14,961,040	(100% of the approved target)	100%
Stretch:	$14,992,575M	(at least 110% of the approved target)	125%

FY27 Strategic Planning Committee Goals

GOAL 1 – EVALUATION CRITERIA – *continued*

Clinical and Quality	**Credit**
Threshold: Three of five groups achieve their approved targets	50%
Target: Four of five groups achieve their approved targets	100%
Stretch: All five groups achieve their approved targets	125%

Plans and Reporting	**Credit**
Threshold: Written action completed for at least three of the five priority groups	50%
Target: Written action completed for all five groups by October 31, 2026, with reports provided every two months	100%
Stretch: Not applicable; maximum credit 100%	N/A

FY27 Strategic Planning Committee Goals

GOAL 2 – EVALUATION CRITERIA

LWBS/Elopement	Achieve	Credit
Threshold	2.3%	50%
Target	2.0%	100%
Stretch	1.8%	125%

Same-Day Care	Achieve	Credit
Threshold	Opens within 30 days of the approved date achieves at least 90% budget volume	50%
Target	Opens by November 2, 2026, target within the approved budget, achieves the budgeted volume and contribution margin	100%
Stretch	Opens by October 24, 2026, remains within budget, and achieves 110% of both budgeted volume and contribution margin during the measurement period	125%

FY27 Strategic Planning Committee Goals

GOAL 2 – EVALUATION CRITERIA – *continued*

ED Throughput Arrival to Disposition (Current Baseline 190 Minutes)	**Achieve**	**Credit**
Threshold: Planned improvement partially achieved.	176 Minutes	50%
Target: Achieve the planned improvement target.	160 Minutes	100%
Stretch: Achieve the target or exceed the planned improvement.	144 Minutes	125%

Organizational Performance Goals

FY27 Strategic Planning Committee Goals

GOAL 3 – EVALUATION CRITERIA

Enterprise Strategy	Achieve	Credit
Threshold	Enterprise strategic plan approved by the Governing Board	50%
Target	Plan approved and all first-year initiatives assigned owners, milestones, and measures	100%
Stretch	Target achieved and at least 90% of first-year milestones due by June 30 are completed on time	125%

Dashboards	Achieve	Credit
Threshold	At least four of the scheduled dashboards are produced	50%
Target	Dashboards are produced every two months	100%
Stretch	Target achieved and documented corrective action is initiated within 30 days for at least 90% of materially off-target measures	125%

FY27 Strategic Planning Committee Goals

GOAL 3 – EVALUATION CRITERIA – *continued*

AI and Digital	**Achieve**	**Credit**
Threshold	Implemented	50%
Target	*Adoption rate of 75%*	100%
Stretch	Adoption rate of 100%	125%

Service-Line Ownership	**Achieve**	**Credit**
Threshold	Standardized plans completed and owners assigned to at least three priority groups	50%
Target	Standardized plans completed and executive owners and Board liaisons assigned for all five priority groups by the approved dates	100%
Stretch	Not applicable; maximum of 100% credit	N/A

FY27 Strategic Planning Committee Goals

GOAL 3 – EVALUATION CRITERIA – *continued*

Plan Alignment	Achieve	Credit
Threshold	Alignment documented of one of the plans (capital or marketing) with the enterprise strategic plan	50%
Target	Alignment of both the capital plan and the marketing plan with the enterprise strategic plan	100%
Stretch	Not applicable; maximum credit 100%	N/A

FY27 Strategic Planning Committee Goals

GOAL 4 – EVALUATION CRITERIA

Academic Health	Achieve	Credit
Threshold	Awarded Governor's GME grant for the Radiology residency program ($2.1M)	50%
Target	Comply with all reporting requirements and successfully submit for quarterly requests to receive full reimbursement	100%
Stretch	Apply to and secure $2M in the second round of the Governor's GME grant	125%

FY27 Strategic Planning Committee Goals

GOAL 4 – EVALUATION CRITERIA

Academic Health	Achieve	Credit
Threshold	Sponsoring Institution - Achieve Accreditation with no more than two citations with ACGME site visit	50%
Target	Achieve Full Accreditation with ACGME site visit	100%
Stretch	Achieve Full Accreditation with ACGME site visit no citations or Areas for Improvement	125%

FY27 Strategic Planning Committee Goals

GOAL 4 – EVALUATION CRITERIA

Ambulatory Surgery Center	Achieve	Credit
Threshold	Present the business plan and proforma by September 30, 2026	50%
Target	Secure Location Purchase or Lease	100%
Stretch	Obtain licensure, inspections, Code Compliance, and Epic build. ASC operational by June 30, 2027	125%

Inpatient Rehabilitation	Achieve	Credit
Threshold	Guaranteed Maximum Price (GMP) completed by October 1, 2026	50%
Target	Construction to begin by March 31, 2027	100%
Stretch	Construction to begin by February 14, 2027	125%

FY27 Strategic Planning Committee Goals

GOAL 4 – EVALUATION CRITERIA – *continued*

Parking Garage	**Achieve**	**Credit**
Threshold	Take Construction GMP Agreement to A&F, full GB, and BCC	50%
Target	Begin construction by April 30, 2027	100%
Stretch	Begin construction by March 31, 2027	125%

Tower Modernization	**Achieve**	**Credit**
Threshold	Completion of Phase 5 out of 10 by June 30, 2027	50%
Target	Completion of Phase 6 out of 10 by June 30, 2027	100%
Stretch	Completion of Phase 7 or greater by June 30, 2027	125%

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

Issue: **Closed Session**	**Back-up:**
Petitioner: Tony Marinello, Chief Operating Officer	
Recommendation: **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.**	

FISCAL IMPACT:

None

BACKGROUND:

None

Cleared for Agenda
August 27, 2026

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

Issue: **Emerging Issues**	**Back-up:**
Petitioner: Tony Marinello, Chief Operating Officer	
Recommendation: **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.** ***(For possible action)***	

FISCAL IMPACT:

None

BACKGROUND:

None

Cleared for Agenda
August 27, 2026

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