



Strategic Planning Committee - Special Meeting

Thursday, August 13, 2026 10:00 am

Emerald Conference Room

Delta Point Building, 1st Floor

901 Rancho Lane

Las Vegas, NV 89102

AGENDA

**University Medical Center of Southern Nevada
UMC GOVERNING BOARD STRATEGIC PLANNING COMMITTEE
Special Meeting**

August 13, 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 Agenda. (*For possible action*)

SECTION 2: BUSINESS ITEMS

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)*
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)*

SECTION 3: EMERGING ISSUES

5. 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).

**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, 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. <i>(For possible action)</i>	

FISCAL IMPACT:

None

BACKGROUND:

The Committee will finalize the FY26 performance goals.

Cleared for Agenda
August 13, 2026

Agenda Item #

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Service Line Goals

August 13, 2026



FY26 Strategic Planning Committee Goals

1. Continue to improve clinical and overall financial outcomes in the existing five service-focused Service Line Reviews of the Strategic Planning Committee
2. Work on adding, implementing, and measuring a sixth focused service line review for Interventional Radiology
3. Scope and analyze the establishment of a liver care service, including the future potential growth into liver transplant
4. Enhance strategic initiatives to support the Academic Health Center
5. Determine the next step(s) of UMC's Master Plan and secure appropriate funding for the first phase

Goal #1: FY26 vs FY25 Contribution Margin

FY26 Goal	Cont. Margin			Cont. Margin %		
Service Line	FY26	FY25	Variance	FY26	FY25	Variance
UMC Quick Care PC	\$1,063,690	\$1,885,589	(\$821,899)	2.06%	3.55%	(1.49%)
Cardiac Services	\$32,639,687	\$23,024,298	\$9,615,389	29.52%	22.62%	6.90%
Children and Women Services	\$60,844,337	\$65,490,531	(\$4,646,195)	44.36%	46.20%	(1.83%)
General Surgery	\$65,944,571	\$57,497,322	\$8,447,249	43.34%	42.26%	1.08%
Orthopedics	\$52,059,473	\$47,331,309	\$4,728,164	34.28%	32.94%	1.34%
Total	\$212,551,757	\$195,229,049	\$17,322,708	35.23%	33.87%	1.36%

- Continue to improve clinical and overall financial outcomes in the existing five focused service line reviews of the Strategic Planning Committee

FY26 Clinical Improvements

1. **UMC PC QC:** MyChart Messaging (Medical Advice by Providers) from patients improved from 86% to 92%
2. **Cardiac Services:** Elevated from Silver to Platinum Status (2 Step jump), through American College of Cardiology
3. **Children and Women's Services:** Patients with hypertension disorders received education increase 80% to 100% . It's going to be a state directed payment requirement.
4. **General Surgery:** Post operative pain management increased from 73% to 86%
5. **Orthopedics:** Enhanced Recovery After Surgery (ERAS) 60% to 80%

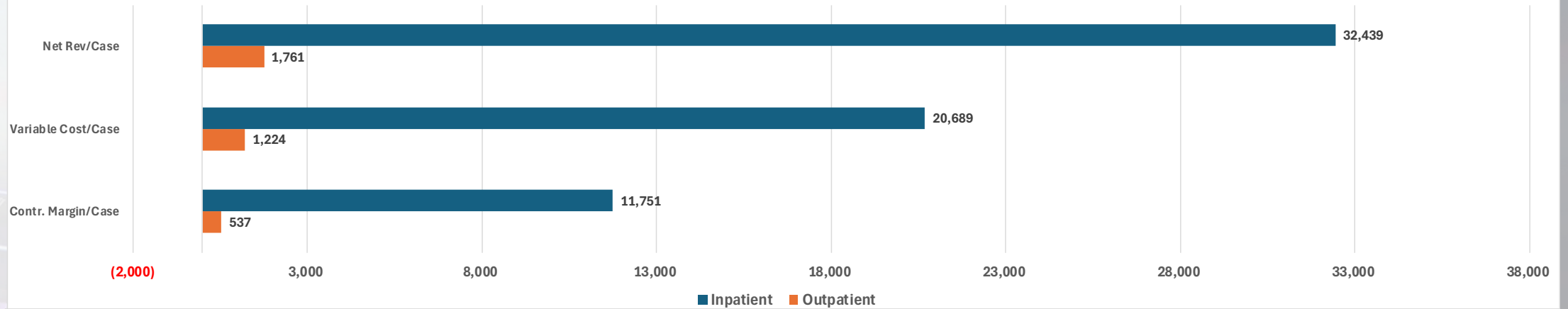
Goal #2: FY26 vs FY25 Contribution Margin – Interventional Radiology

FY26 Goal	Cont. Margin			Cont. Margin %		
Service Line	FY26	FY25	Variance	FY26	FY25	Variance
Interventional Radiology	\$20,102,473	\$13,503,288	\$6,599,185	36.02%	33.53%	2.49%

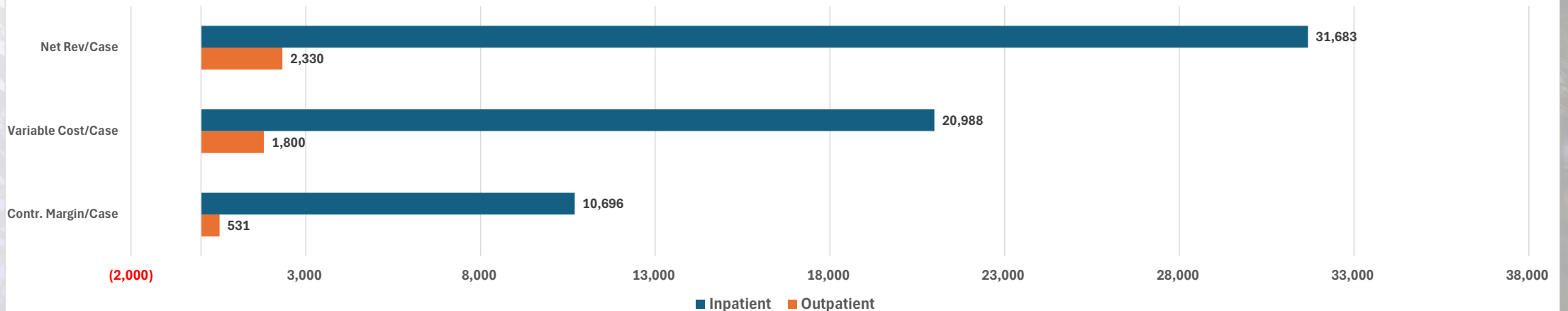
- Work on adding, implementing, and measuring a sixth focused service line review for interventional radiology

Goal #2: FY26 vs FY25 Interventional Radiology

INTERVENTIONAL RADIOLOGY - CASE ANALYSIS - FY2026 YTD



INTERVENTIONAL RADIOLOGY - CASE ANALYSIS - FY2025 YTD



- **YOY Net Revenue/Case**
- **YOY Variable Cost/Case**
- **YOY Contribution Margin/Case**

- **Inpatient: \$756 Outpatient: (\$569)**
- **Inpatient: (\$299) Outpatient: (\$576)**
- **Inpatient: \$1,055 Outpatient: \$6**

Goal #3: Scope and analyze the establishment of a Liver Care Service, including the future potential growth into liver transplant

Liver Care Service

- Soft opening of the Liver Care Clinic for low acuity patients on October 8, 2025
- Sharing clinic space with the existing Transplant Clinic
- Clinic twice a week with the UMC Nurse Practitioner w/ new NP starting soon
- Dr. Manne (UNLV) began covering half-days on Tuesdays in April 2026. 73 new patients have been seen to date with 123 visits
- Liver scanner arrived and in use on March 31, 2026

Potential Growth to Liver Transplant

- Completed comprehensive financial proforma for expansion into liver transplant
- Next steps is to review prior to presenting to GB for approval

Goal #4: Enhance Strategic Initiatives to further the Academic Health Center

- Academic Software Implementation – Resident Management Suite in January 2026
- Radiology Residency Program – Completed in FY26 , Residents started July 1st
- UNLV/UMC Master Agreement – Crafted New Master Agreement, in effect, July 1, 2026
- Academic Affiliation Portfolio Expansion – Simulation Lab agreement with the VA
- Expanded Military Medicine Specialty Training
- Resident Recognition Campaign & Academic Affairs Newsletter – Launched 2026
- Dental Anesthesia Program – 6 Residents
- Academic Summit - June 29, 2026, success (14 universities participated)
- GME Governor's Grant – \$2.1M Awarded June 2026
- CSN Partner Celebration Event – March 2026
- ACGME Conference – attended in February 2026
- Joint Military Civilian Partnership Summit – May 2026

Goal #5: Determine the next step(s) of UMC's Master Plan and secure appropriate funding for the first phase

- Continued progress has been made with the approval of the Master Plan
- Inpatient Rehab and Parking Garage Phase 1 Approved
- Financing, the CEO and CFO are working directly with the County Manager, and the CFO
- The CEO has been working with the County Commissioners and is awaiting further Guidance

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

Issue: Proposed FY2027 Performance Goals	Back-up:
Petitioner: Tony Marinello, Chief Operating Officer	
Recommendation: 3. 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 take any action deemed appropriate. <i>(For possible action)</i>	

FISCAL IMPACT:

None

BACKGROUND:

The Committee will discuss and finalize proposed goals related to the FY27 Organizational Performance goals.

Cleared for Agenda
August 13, 2026

Agenda Item #

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Proposed Organizational Goals FY27 August 13, 2026



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:

- Improve FY 2027 combined contribution-margin over the prior year for the five service-line groups.
- Improve FY 2027 combined operating income over the prior year for the five service-line groups.
- Achieve the Board-approved FY2027 clinical or quality target established for each priority service-line group.
- Complete a written action plan for each priority group by October 2026 Strategy Committee and report progress to the Strategic Planning Committee every two months.

FY27 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, ambulatory, and referral performance.

MEASURES:

- Reduce the ED left-without-being-seen (LWBS/Elopement) rate from 2.5% to 2%.
- Open the 24/7 same-day care location by November 2, 2026, within the Board-approved budget.
- Achieve the approved volume and contribution-margin targets for its first eight months of operation.
- Designate an accountable ED provider leader by September 1, 2026, and achieve the approved FY2027 ED throughput targets.
- Facilitate referral out-migration whenever possible, based on patient choice, insurance, and prior specialist.

FY27 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 owner and Governing Board liaison to each of the hospital's five service-line groups by September 30, 2026.
- Implement dashboards every two months covering approved financial, clinical, market, access, workforce, and capital measures for each priority group. (TBD dependent on resources)
- Document alignment of the capital plan
- Develop a marketing plan that aligns with the enterprise strategic plan. (Marketing ROI)
- Implement the approved AI Solution and digital-access initiatives to achieve the defined FY2027 improvements in coding/documentation accuracy, call-center performance, or referral completion.

FY27 Strategic Planning Committee Goals

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.

MEASURES:

- Inpatient Rehabilitation: achieve approved FY2027 scope, budget, schedule, and financing milestones.
- Parking Garage/Master Plan: achieve the Board-approved FY2027 design, financing, and construction milestones.
- Academic Health Center: complete the FY2027 residency-program transfers required under the UMC/UNLV agreement and achieve the approved FY2027 residency, affiliation, and grant milestones.
- Tower Modernization: achieve the Board-approved FY2027 scope, budget, design, and schedule milestones.
- Ambulatory Surgery Center: Secure surgery center to decompress inpatient operating rooms and shift to the appropriate setting.

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

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

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 25% Referrals 25% Other ED Throughput 15%
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%

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.	

FY27 Strategic Planning Committee Goals

GOAL 1 – EVALUATION CRITERIA

Improve Contribution Margin, YOY, FY2026 Normalized Baseline:	Credit
Threshold: 3%	50%
Target: 5%	100%
Stretch: 7%	125%

Improve Operating Income, YOY FY2026 Normalized Baseline:	Credit
Threshold: 3%	50%
Target: 5%	100%
Stretch: 7%	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 September 30, 2026, with reports provided every two months	100%
Stretch: Not applicable; maximum credit 100%	N/A

FY27 Strategic Planning Committee Goals

LWBS	Q4 Avg LWBS	Credit
Threshold	2.3%	50%
Target	2.0%	100%
Stretch	<2.0%	125%
Same-Day Care Location	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*

Referral Completion	Completion Rate	Credit
Threshold: Achieve 90% of the planned percentage-point improvement	75%	50%
Target: Achieve the approved FY2027 referral-completion rate	80%	100%
Stretch: Exceed the target by 2 percentage points	82%	125%
ED Throughput (define the improvement, e.g., discharge time, ED LOS?)	Plan	Credit
Threshold: Achieve 90% of the planned improvement		50%
Target: Achieve 100% of the planned improvement		100%
Stretch: Achieve 110% or more of the planned improvement)		125%

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% ¹⁴

FY27 Strategic Planning Committee Goals

GOAL 3 – EVALUATION CRITERIA – *continued*

AI and Digital	Achieve	Credit
Threshold	Approved pilots implemented	50%
Target	Pilots implemented and achieve the approved productivity, accuracy or access improvement	100%
Stretch	Achieve 110% of the approved improvement target	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	¹⁵ N/A

FY27 Strategic Planning Committee Goals

GOAL 3 – EVALUATION CRITERIA – *continued*

AI and Digital	Achieve	Credit
Threshold	Approved pilots implemented	50%
Target	Pilots implemented and achieve the approved productivity, accuracy or access improvement	100%
Stretch	Achieve 110% of the approved improvement target	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	¹⁶ 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

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
Academic Health	Achieve	Credit
Threshold	Residency transfers completed	50%
Target	Residency transfers plus all approved affiliation and grant milestones completed	100%
Stretch	Target achieved and UMC secures grant funding or additional accredited residency positions above the approved FY2027 target (\$ or #)	125%

FY27 Strategic Planning Committee Goals

GOAL 4 – EVALUATION CRITERIA – *continued*

Ambulatory Surgery Center	Achieve	Credit
Threshold	Feasibility and financial analysis completed	50%
Target	Recommendation presented by the approved date and, if approved, FY2027 site-selection milestone completed	100%
Stretch	Target achieved and the next Board-authorized due-diligence or transaction milestone is completed within FY2027	125%

**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. <i>(For possible action)</i>	

FISCAL IMPACT:

None

BACKGROUND:

None

Cleared for Agenda
August 13, 2026

Agenda Item #

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