AGENDA

University Medical Center of Southern Nevada
UMC GOVERNING BOARD STRATEGIC PLANNING COMMITTEE
February 6, 2020 9:00 a.m.
800 Hope Place, Las Vegas, Nevada
UMC Trauma Building, ProVidence Suite (5th 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 in the following locations:

University Medical Center 1800 W. Charleston Blvd. Las Vegas, NV (Principal Office)	CC Government Center 500 S. Grand Central Pkwy. Las Vegas, NV	Third Street Building 309 S. Third St. Las Vegas, NV	Regional Justice Ctr 200 Lewis Ave., 1st Fl Las Vegas, NV
City of Las Vegas 495 S. Main St. Las Vegas, NV	City of Henderson 240 Water St. Henderson, 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 Kayla Hillegass, Management Analyst, at (702) 383-3810. The Strategic Planning Committee may combine two or more agenda items for consideration.
- Items on the agenda may be taken out of order.
- The Strategic Planning Committee may remove an item from the agenda or delay discussion relating to an item at any time.
- Consent Agenda - All matters in this sub-category are considered by the Strategic Planning Committee to be routine and may be acted upon in one motion. Most agenda items are phrased for a positive action. However, the Strategic Planning Committee may take other actions such as hold, table, amend, etc.
- Consent Agenda items are routine and can be taken in one motion unless a Strategic Planning Committee member requests that an item be taken separately. For all items left on the Consent Agenda, the action taken will be staff's recommendation as indicated on the item.
- Items taken separately from the Consent Agenda by Committee members at the meeting will be heard in order.

SECTION 1. OPENING CEREMONIES

CALL TO ORDER

1. Public Comment

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

2. Approval of minutes of the regular meeting of the UMC Governing Board Strategic Planning Committee meeting on September 19, 2019. *(For possible action)*

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

SECTION 2. BUSINESS ITEMS

4. Receive a report regarding UMC Service Line Performance and Market Dynamics; and direct staff accordingly. *(For possible action)*

5. Receive a report regarding Service Line Forecasting and Market Growth; and direct staff accordingly. *(For possible action)*

6. Receive an update regarding FY20 CEO Performance Goals related to the UMC Governing Board Strategic Planning Committee; and direct staff accordingly. *(For possible action)*

7. Receive a report regarding UNLV School of Medicine Strategic Plan; and direct staff accordingly. (*For possible action)*

SECTION 3: EMERGING ISSUES

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

SECTION 4. CLOSED SESSION

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

COMMENTS BY THE GENERAL PUBLIC

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

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

UMC ADMINISTRATION KEEPS THE OFFICIAL RECORD OF ALL PROCEEDINGS OF UMC GOVERNING BOARD 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
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
Thursday December 4, 2019
9:00 a.m.

The University Medical Center Governing Board Strategic Planning Committee met at the time and location listed above. The meeting was called to order at the hour of 9:01 a.m. by Chair Hagerty and the following members were present, which constituted a quorum of the members thereof:

CALL TO ORDER

Board Members:

Present:
Harry Hagerty, Chair
Renee Franklin – Via Phone
Dr. Mackay
Christian Haase
Robyn Caspersen
Mary Lynn Palenik- Via Phone

Absent:
None

Also Present:
Mason VanHouweling, Chief Executive Officer
Tony Marinello, Chief Operating Officer
Jennifer Wakem, Chief Financial Officer
Danita Cohen, Chief Experience Officer
Deb Fox, Chief Nursing Officer
Lonnie Richardson, Chief Information Officer
Susan Pitz, General Counsel
Vick Gill, Associate Administrator
Kayla Hillegass, Management Analyst
Terra Lovelin, Board Secretary

SECTION 1. OPENING CEREMONIES

ITEM NO. 1 PUBLIC COMMENT

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

None.

DRAFT

ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Strategic Planning Committee meeting on October 17, 2019. *(For possible action)*

Harry Hagerty noted change to the minutes that Mason VanHouweling was not present at last meeting. October minutes were edited to reflect changes.

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

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

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

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive a report regarding UMC service line performance; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED: Service Line Update

DISCUSSION: Vick Gill presented a service line update on to the committee. There is no updated Q3 market share information to share with the committee at this time. Vick and board members shared key initiatives each service line subcommittee has achieved over the past year.

Cardiovascular services expecting the opening of the Cath/EP lab in February 2020. UMC is currently marketing the recent recognition from U.S. News & World Report as a high preforming hospital in health failure care.

In pediatric services, UMC will have new increased rates for PICU/NICU starting January 1st, 2020 which will benefit this service due to our current payor mix. Harry Hagerty asked if these rate changes will improve commercial rates as well. Vick Gill stated that rate changes will only effect Medicaid fee for service reimbursement. Additionally, UMC is currently recruiting for the ACNO position.

Surgical Services have implemented a new block policy requiring 80% of utilization. A new value analysis team has been assembled to monitor HPG compliance and supply costs. New service offerings, technology, and equipment are being looked at to support surgical services.

The oncology team is closely monitoring admits to ensure patient meets inpatient criteria to ensure proper level of care. Robyn Caspersen states that UMC has an opportunity to work with community providers and identify potential oncology outpatient opportunities.

FINAL ACTION TAKEN: None taken.

DRAFT

ITEM NO. 5 Receive a report regarding UMC Ambulatory Division; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED: Ambulatory Division Update

DISCUSSION: Tony Marinello provided an update on current Ambulatory operations and future strategic opportunities, including potential expansion of clinics, services, operating hours, and weekend appointments. Quick Care and Primary Care volumes continue to steadily grow and provide great care to the Las Vegas community.

FINAL ACTION TAKEN: No action taken

ITEM NO. 6 Receive a report regarding UMC clinical, operational, financial and information technology software contracts; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED: Information Technology Contracts Report

DISCUSSION: Lonnie Richardson presented an update on UMC's current contracts and the longevity due to a request from Harry Hagerty in Audit and Finance. During contract negotiations, UMC considers how critical a system is to operations of the hospital and creates a transitional period that would allow UMC to export data to another system if a term of contract is needed.

FINAL ACTION TAKEN: No action taken

ITEM NO. 7 Receive a report regarding UMC Capital Plan; and direct staff accordingly. (*For possible action)*

DOCUMENT SUBMITTED: Capital Status Update

DISCUSSION: Vick Gill presented a status update on FY20 capital allocation and UMC's creation of a formal capital committee for approval.

Robyn Caspersen is interested in UMC administration reviewing the contract summary provided to board members for potential approval so that they may have a more comprehensive understanding of the need for approval, vendor selection, etc.

Harry Hagerty expressed that he would like for UMC administration to provide governing board members with updates on potential major capital investments and contracts the team is internally working on prior to their final approval.

FINAL ACTION TAKEN: No action taken

DRAFT

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)*

Mason VanHouweling updated the committee that the Governor and UNLVSOM have announced donors for the medical school building. Due to UMC's land transfer agreement, UNLV has until 2021 to produce substantial building plans and have construction started.

COMMENTS BY THE GENERAL PUBLIC:

Comments from the general public were called for prior to going into closed session. No such comments were heard.

At the hour of 10:12 a.m., the committee voted on a motion made by Dr. Mackay to go into closed session.

There being no further business to come before the committee this time, at the hour of 10:55 a.m. Chair Hagerty adjourned the meeting.

SECTION 4. CLOSED SESSION

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.

APPROVED:

MINUTES PREPARED BY: Kayla Hillegass, Management Analyst

DRAFT

Q3 2019 Market Share Update

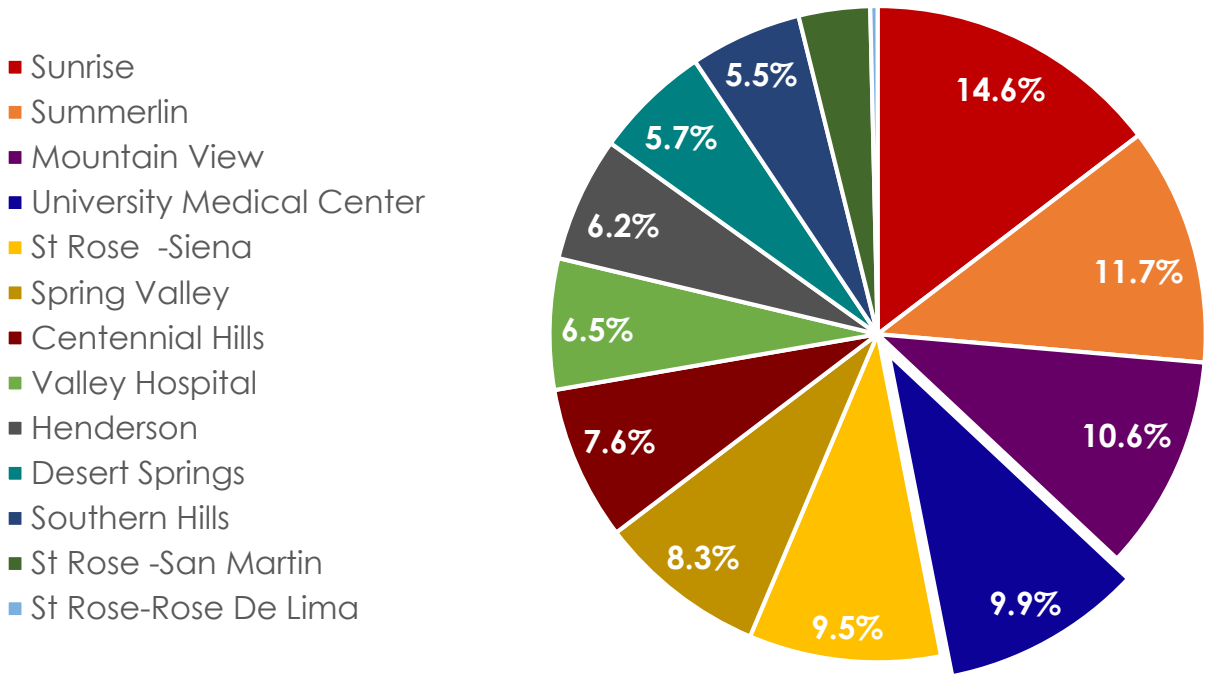
Strategy Committee

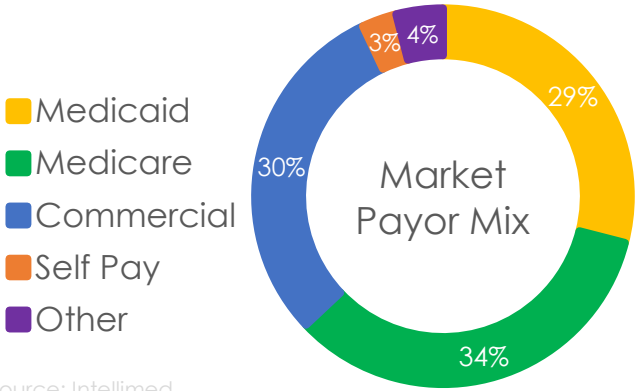
February 2020

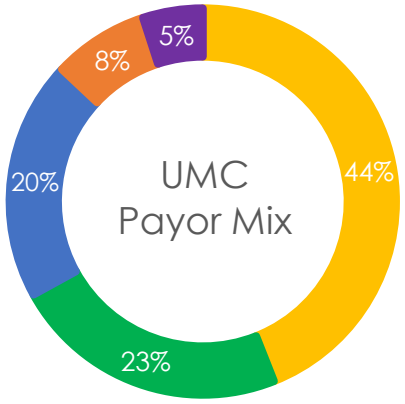
Market Share

University Medical Center Market Share Analysis

2018 Q4 – 2019 Q3
Inpatient Market Share (Volume)

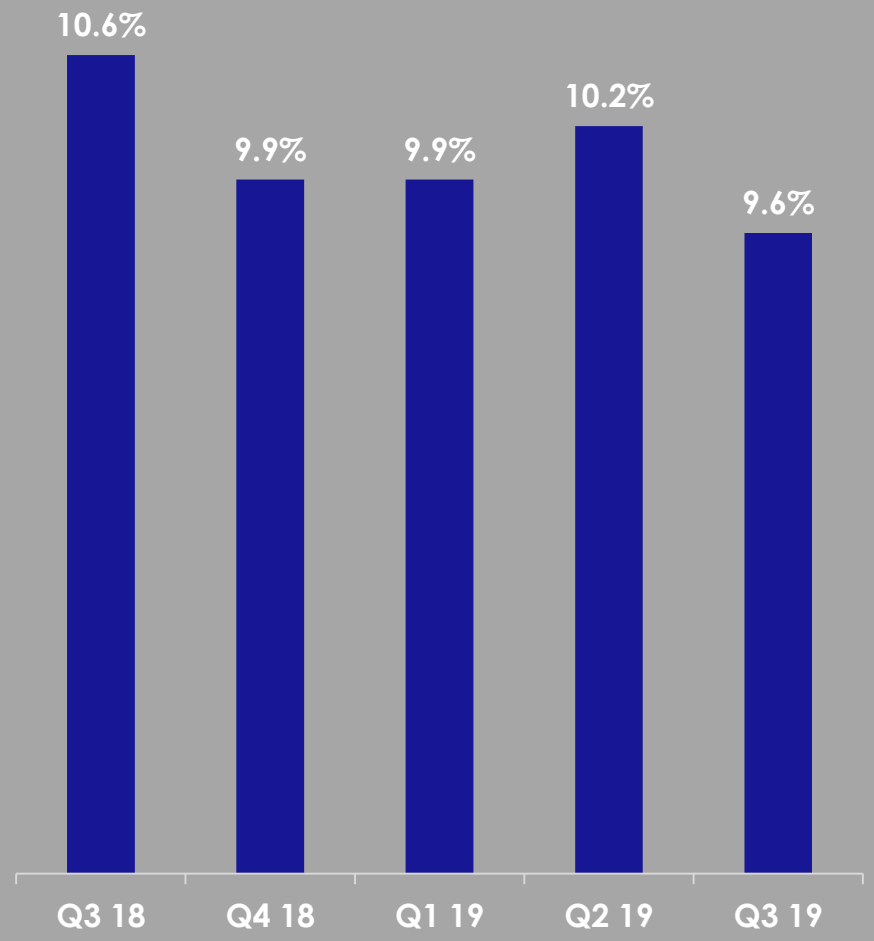






Source: Intellimed

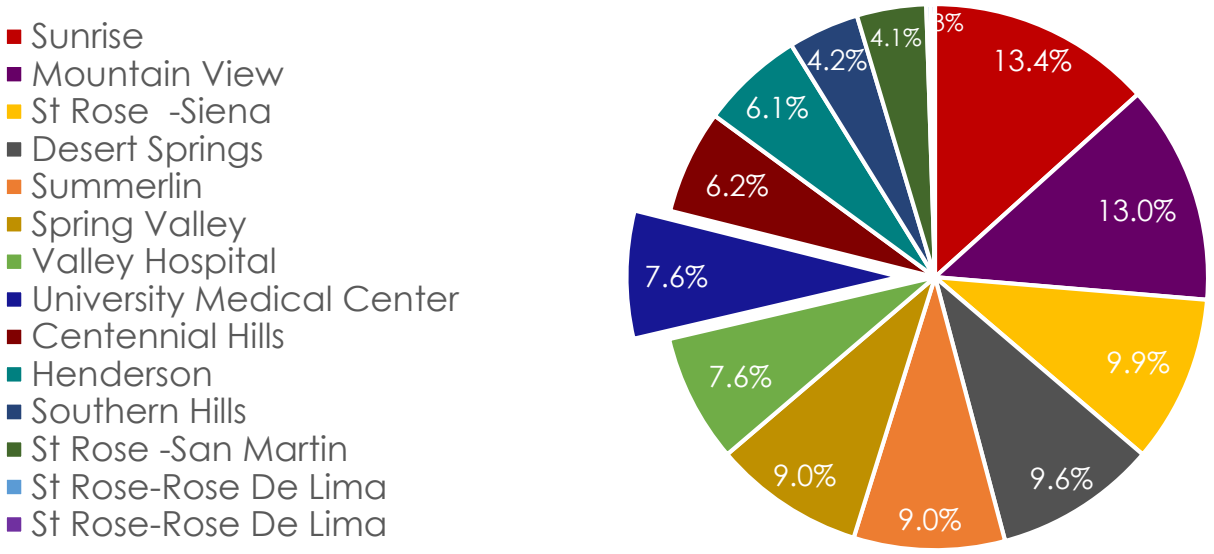
Quarter Comparison

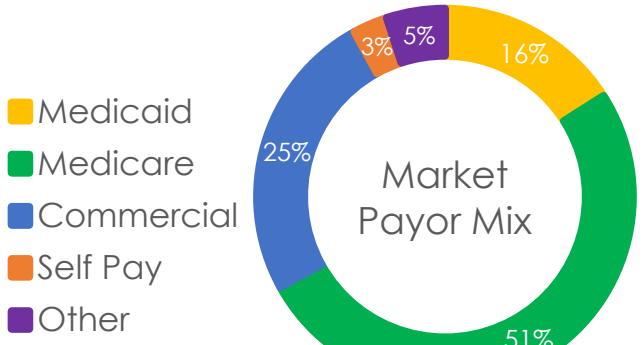


Cardiovascular Services

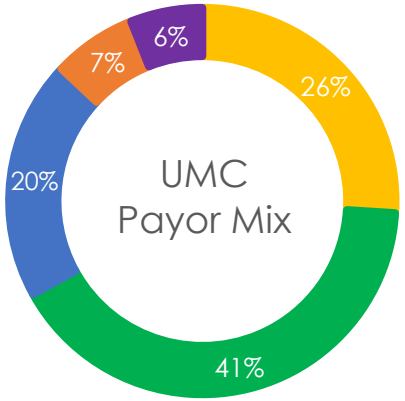
Market Share Analysis

2018 Q4 – 2019 Q3
Inpatient Cardiovascular Services
Market Share (Volume)





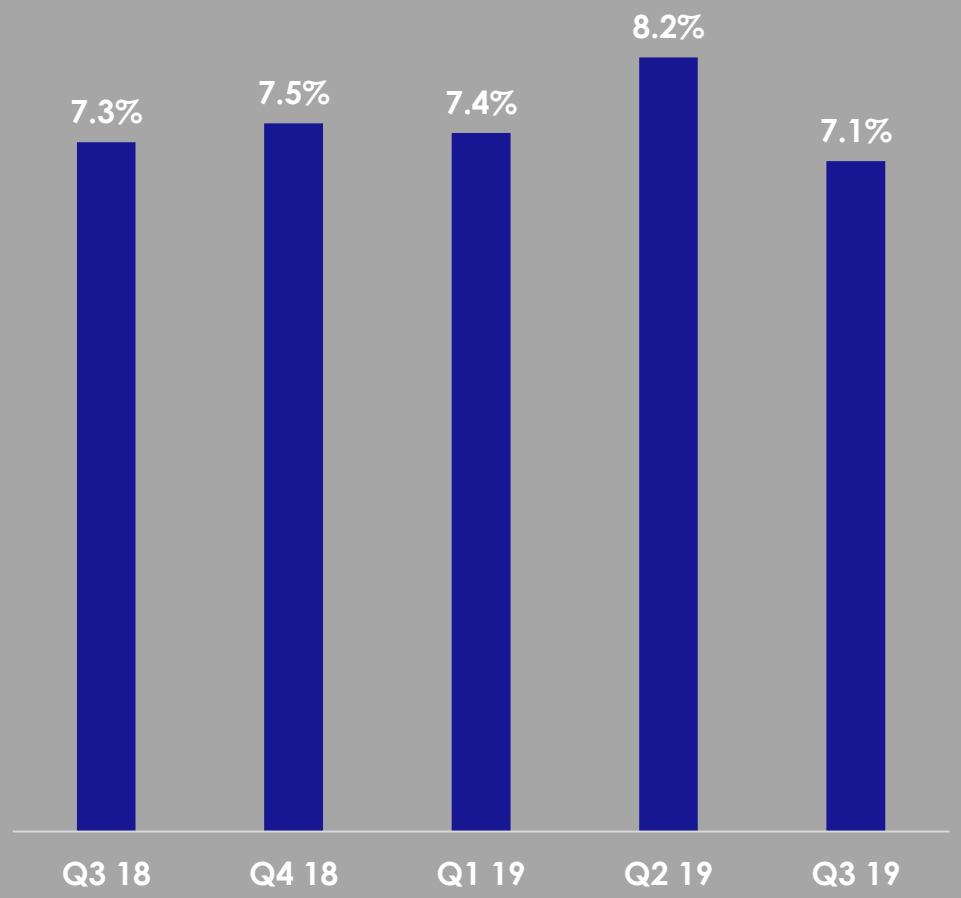
Market Payor Mix



UMC Payor Mix

Source: Intellimed

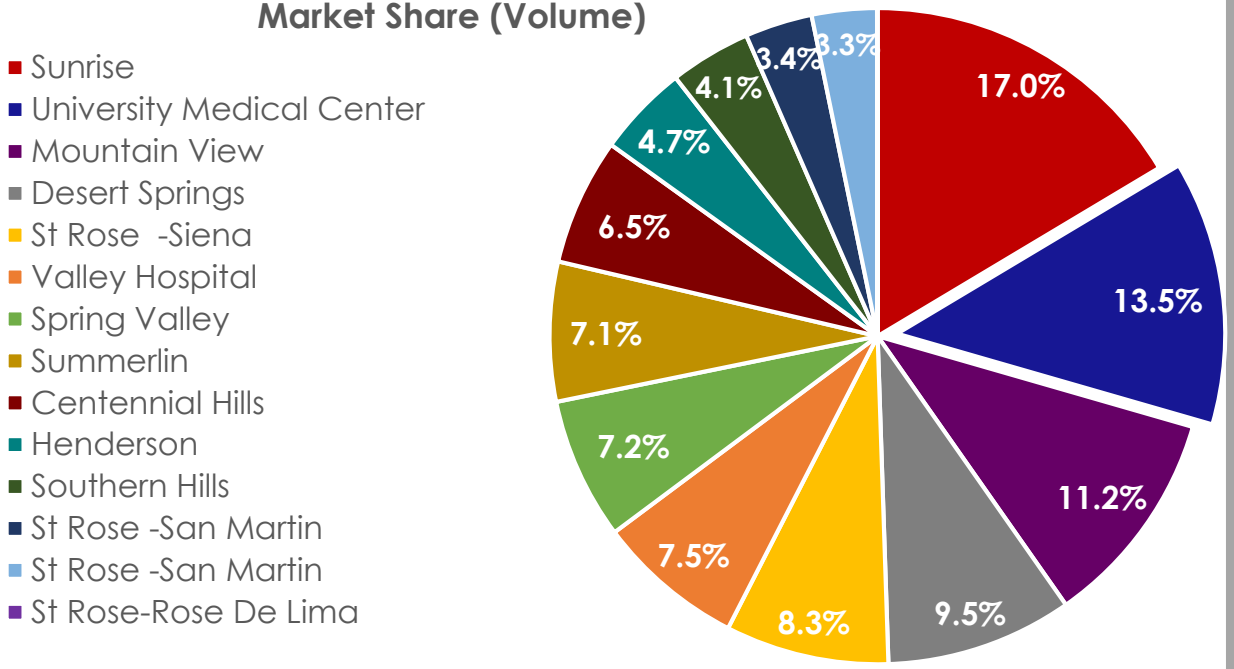
Quarter Comparison

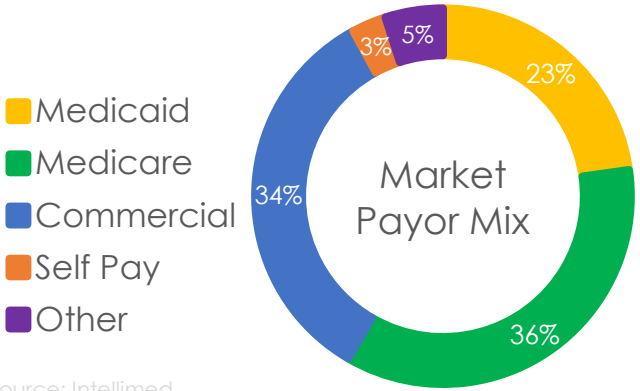


Surgical Services

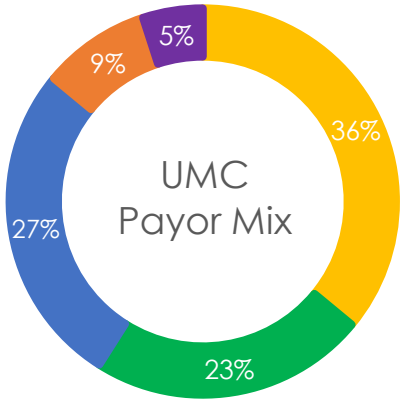
Market Share Analysis

Q4 2018 – 2019 Q3
Inpatient Surgical Services
Market Share (Volume)





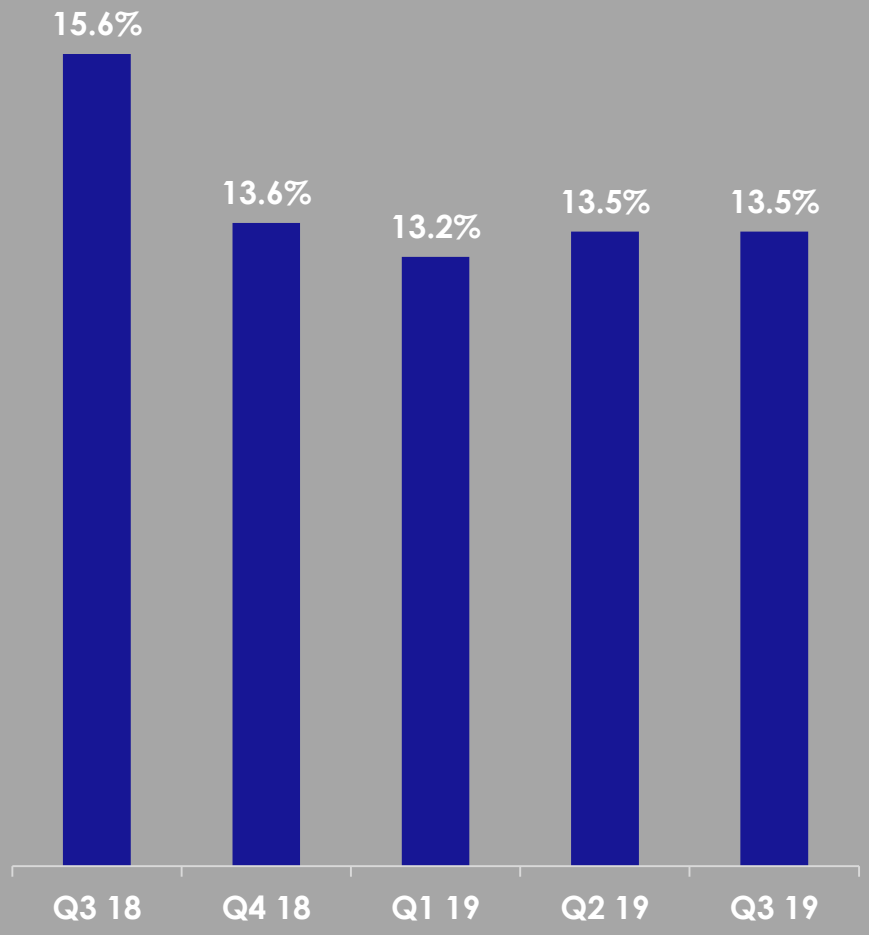
Market Payor Mix



UMC Payor Mix

Source: Intellimed

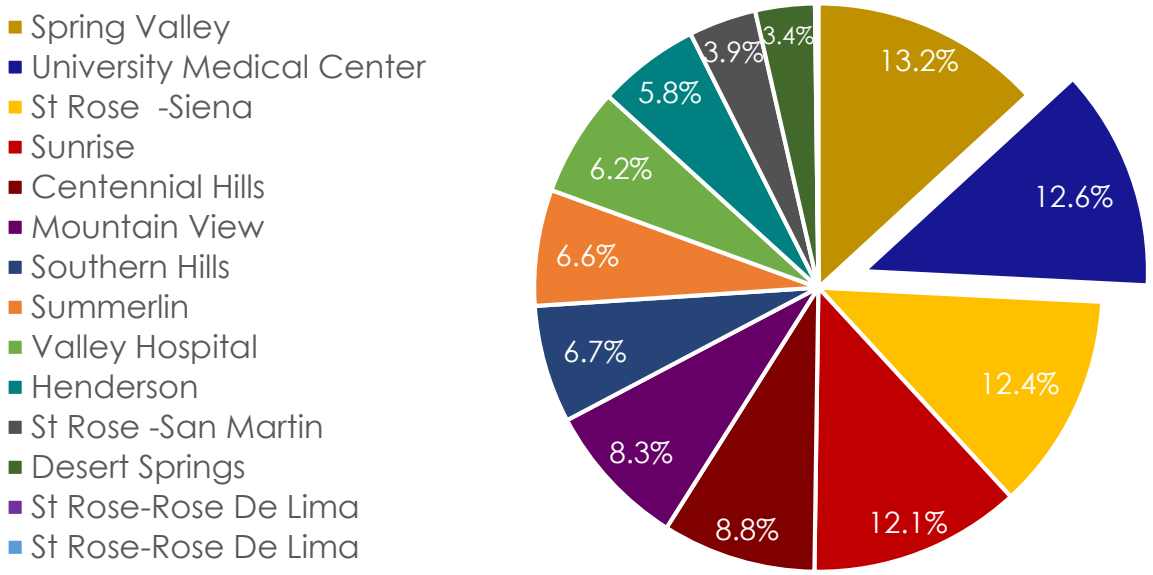
Quarter Comparison

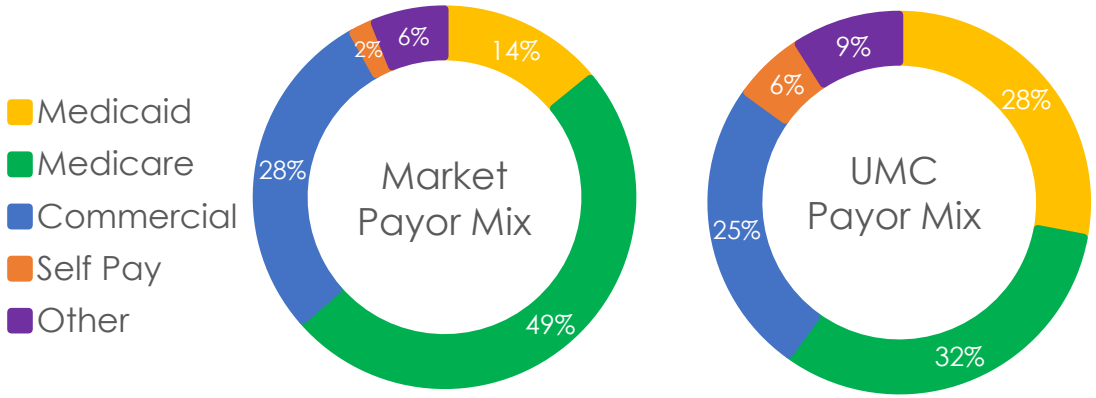


Orthopedics

Market Share Analysis

Q4 2018 – Q3 2019
Inpatient Orthopedics Services
Market Share (Volume)





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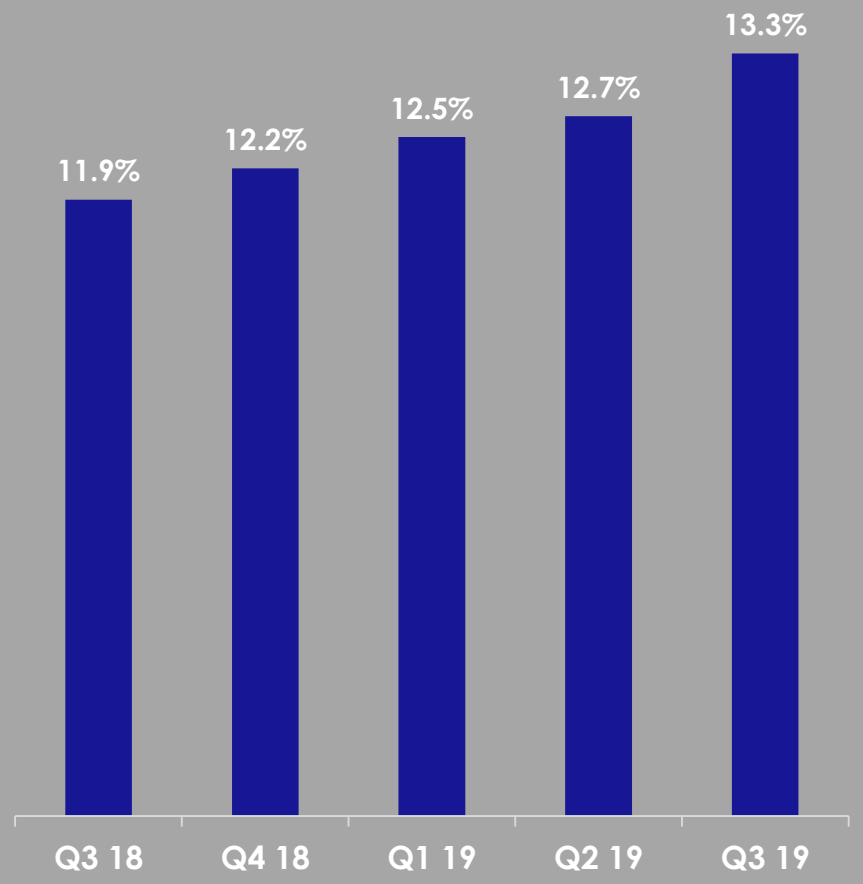
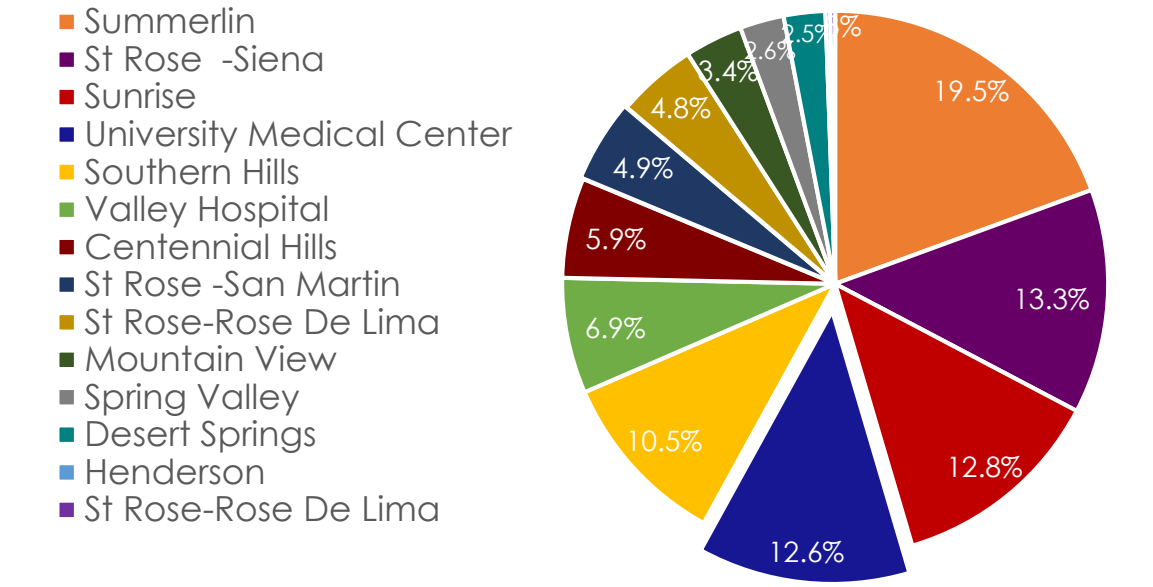
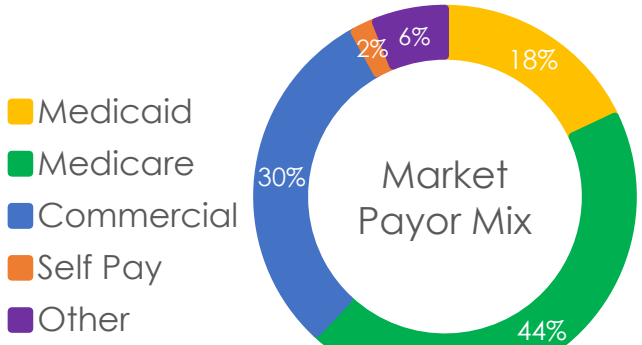


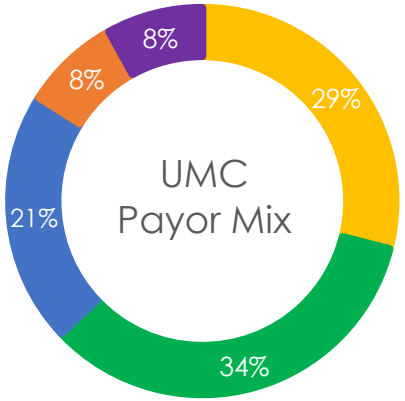
Oncology

Market Share Analysis

Q4 2018 – Q3 2019
Inpatient Oncology Services
Market Share (Volume)

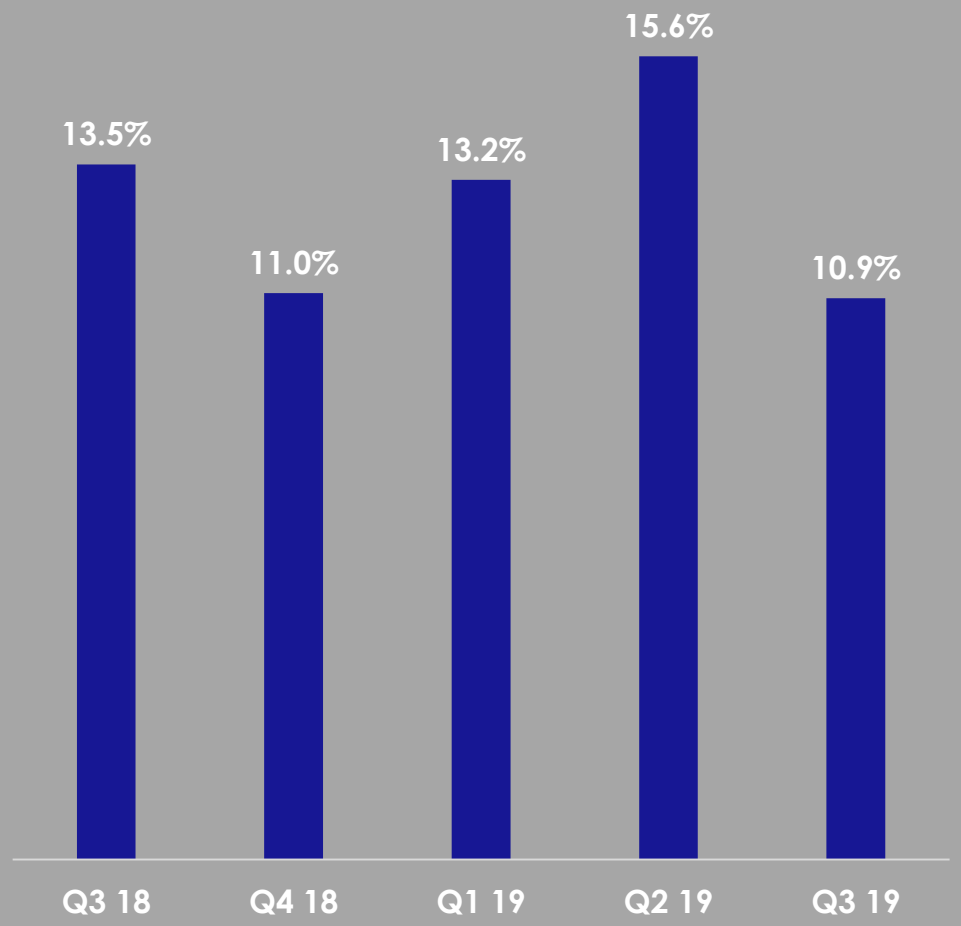






Source: Intellimed

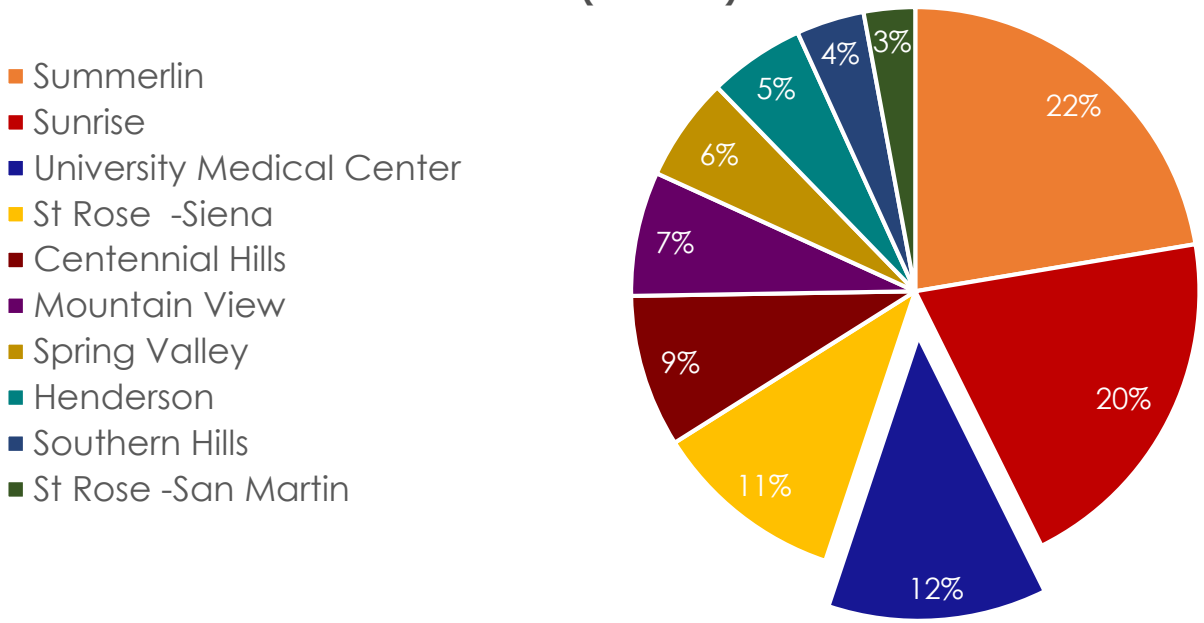
Quarter Comparison

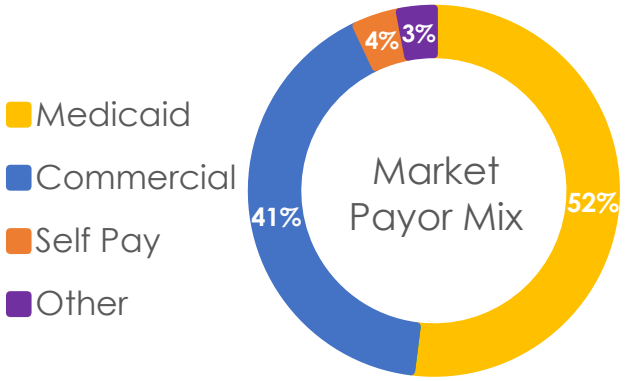


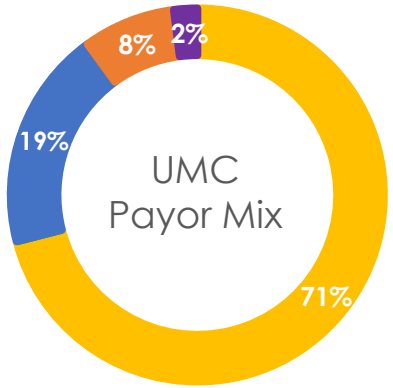
Pediatrics

Market Share Analysis

Q4 2018- Q3 2019
Inpatient Pediatrics Services
Market Share (Volume)

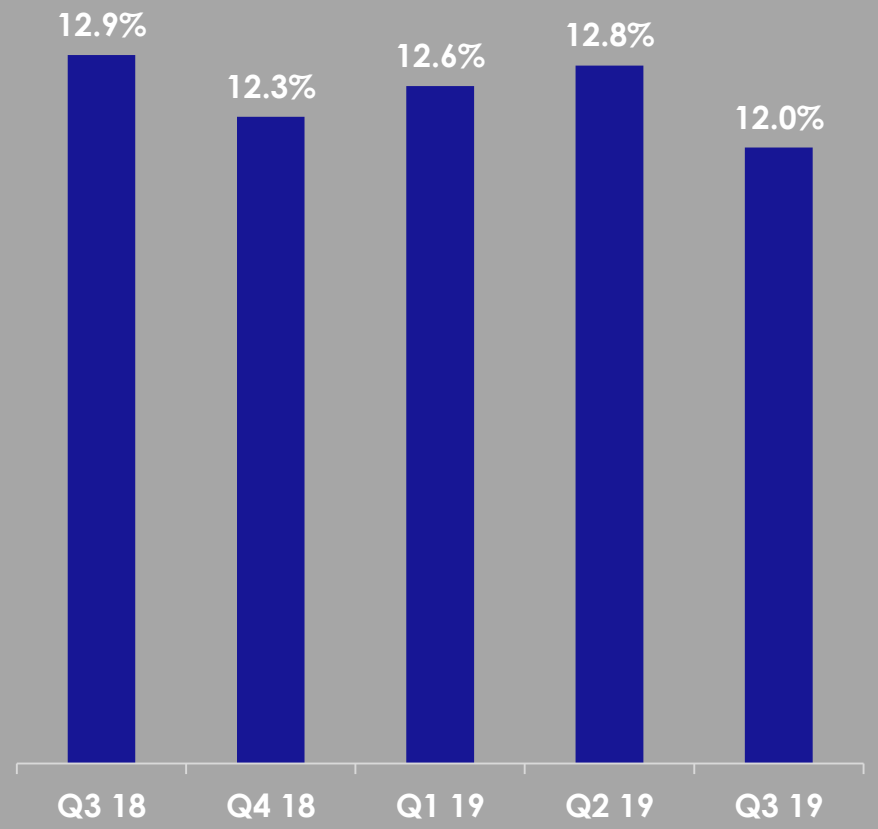






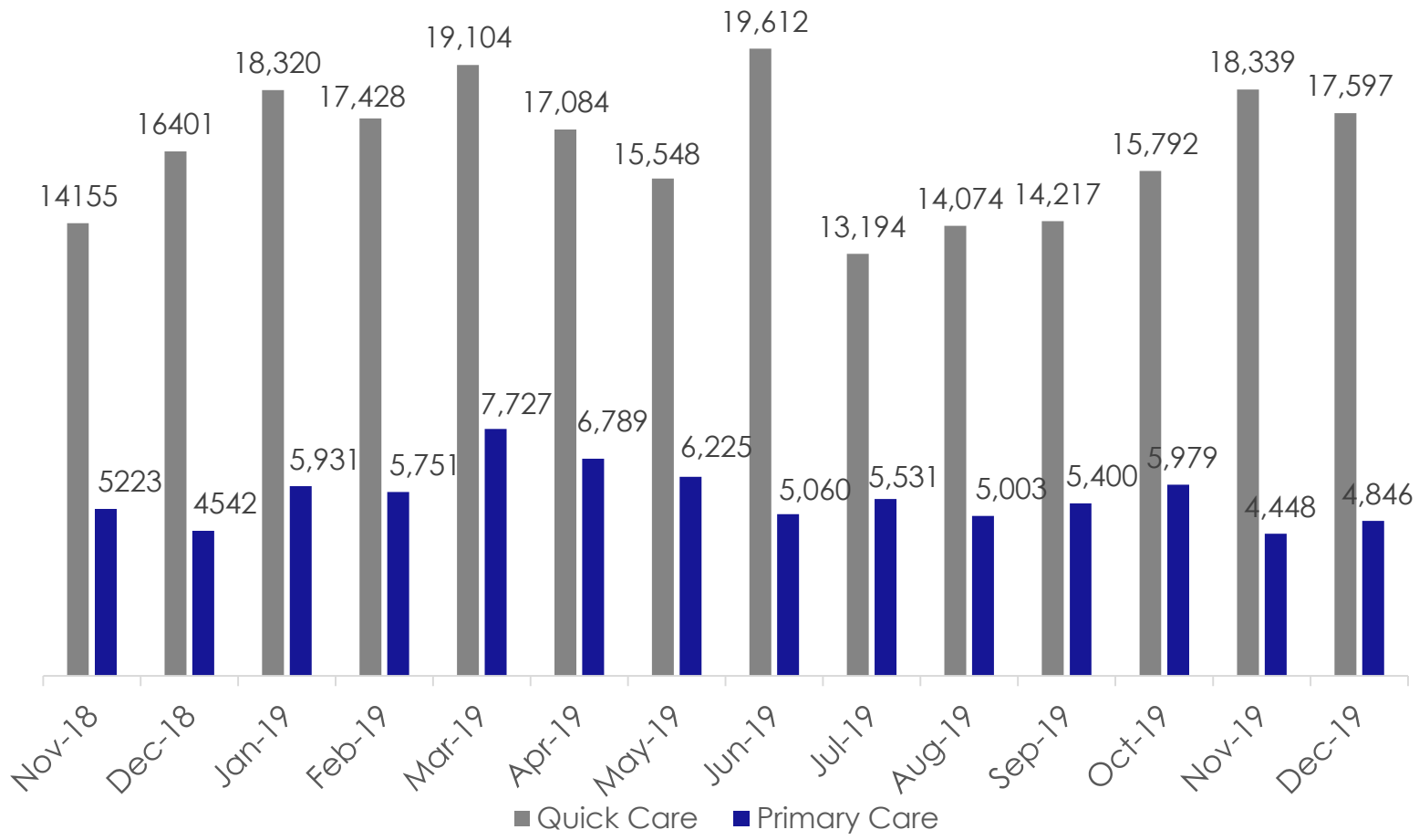
Source: Intellimed

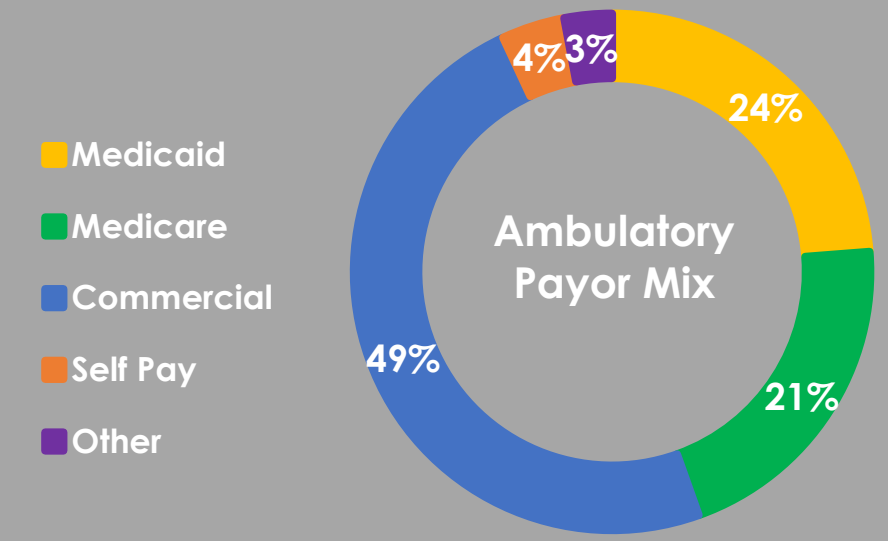
Quarter Comparison



Ambulatory

Trending Ambulatory Volumes by Month





Source: Kauffman Hall via Decision Support

Las Vegas Hospital System Activity

UMC
UNIVERSITY MEDICAL CENTER

2020 Market Demographic

Strategy Committee

February 2020

Market Growth

Clark County Inpatient Services Growth Estimate

Service Line	2018 Volume Estimate	2023		2028	
		Volume Forecast	Percent Growth	Volume Forecast	Percent Growth
Neurosurgery	1,629	1,964	20.5%	2,291	40.6%
Other Trauma	1,899	2,142	12.8%	2,484	30.8%
General Medicine	81,897	92,256	12.6%	105,187	28.4%
Urology	3,009	3,333	10.8%	3,763	25.1%
Neurology	9,496	10,335	8.8%	11,837	24.7%
Orthopedics	14,301	15,251	6.6%	17,060	19.3%
General Surgery	15,974	17,016	6.5%	18,761	17.5%
Oncology/Hematology	6,552	6,941	5.9%	7,669	17.0%
Thoracic Surgery	1,263	1,363	7.9%	1,462	15.7%
Obstetrics	30,406	32,292	6.2%	34,699	14.1%
Neonatology	28,724	30,353	5.7%	32,347	12.6%
ENT	2,410	2,402	-0.3%	2,620	8.7%
Cardiac Services	23,353	22,437	-3.9%	25,227	8.0%
Spine	5,383	5,449	1.2%	5,811	7.9%
Gynecology	2,572	2,515	-2.2%	2,680	4.2%
Vascular Services	3,847	3,605	-6.3%	3,901	1.4%
Ophthalmology	270	260	-3.9%	271	0.2%
Rehabilitation (Acute Care)	2,439	1,378	-43.5%	1,178	-51.7%
Total Inpatient Estimation	235,934	251,737	6.7%	279,705	18.6%

Source: Advisory Board

Market Growth

Clark County Outpatient Services Growth Estimate

Service Line	2018 Volume Estimate	2023		2028	
		Volume Forecast	Percent Growth	Volume Forecast	Percent Growth
Endocrinology	4,960	7,748	56.2%	9,150	84.5%
Thoracic Surgery	1,571	2,203	40.3%	2,711	72.6%
Podiatry	90,340	124,267	37.6%	151,440	67.6%
Urology	95,834	131,733	37.5%	160,409	67.4%
Orthopedics	250,003	336,584	34.6%	396,666	58.7%
Neurosurgery	5,536	7,188	29.8%	8,775	58.5%
Spine	8,212	11,050	34.6%	12,974	58.0%
Neurology	97,972	129,306	32.0%	153,587	56.8%
Vascular	76,739	98,933	28.9%	120,093	56.5%
ENT	206,346	259,754	25.9%	317,686	54.0%
Pain Management	63,687	82,650	29.8%	97,739	53.5%
Gastroenterology	168,484	216,266	28.4%	255,341	51.6%
Ophthalmology	513,326	651,343	26.9%	769,396	49.9%
Nephrology	50,521	62,973	24.6%	75,570	49.6%
Pulmonology	170,143	213,861	25.7%	251,671	47.9%
Dermatology	348,157	427,802	22.9%	501,303	44.0%
General Surgery	49,550	60,818	22.7%	70,393	42.1%
Cardiology	581,477	693,872	19.3%	817,857	40.7%
Physical Therapy/Rehabilitation	1,536,375	1,874,821	22.0%	2,152,026	40.1%
Lab	2,429,698	2,928,852	20.5%	3,361,029	38.3%
Radiology	1,856,140	2,136,462	15.1%	2,422,990	30.5%
Psychiatry	826,728	969,381	17.3%	1,059,447	28.1%
Trauma	65,504	73,754	12.6%	81,861	25.0%
Oncology	12,453	14,019	12.6%	15,479	24.3%
Gynecology	75,073	82,595	10.0%	88,728	18.2%
Obstetrics	33,735	35,755	6.0%	38,385	13.8%
Total Outpatient Estimation	17,355,655	20,603,789	18.7%	23,527,249	35.6%

Source: Advisory Board

Market Growth

Clark County Primary Care Services Growth Estimate

Service Line	2017 Volume Estimate	2022		2027	
		Volume Forecast	Percent Growth	Volume Forecast	Percent Growth
Internal Medicine	867,558	1,019,691	17.5%	1,182,446	36.3%
General & Family Medicine	1,198,118	1,376,196	14.9%	1,567,292	30.8%
Obstetrics & Gynecology	399,480	440,608	10.3%	486,795	21.9%
Pediatrics	641,426	692,772	8.0%	747,017	16.5%
Total Primary Care Estimator	3,106,583	3,529,266	13.6%	3,983,550	28.2%

Source: Advisory Board