

**University Medical Center of Southern Nevada
Governing Board Strategic Planning Committee
April 11, 2019**

UMC ProVidence Suite
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
Thursday, April 11, 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 9:00 a.m by Chair Hagerty and the following members were present, which constituted a quorum of the members thereof:

CALL TO ORDER

Board Members:

Present:

Harry Hagerty, Chair
Robyn Caspersen
Christian Haase
Dr. Mackay
Mary Lynn Palenik

Absent:

David Straus, Ex-Officio (Excused)
Renee Franklin (Excused)

Also Present:

Tony Marinello, Chief Operating Officer
Marcia Turner, Chief Administrative 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
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.

ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Strategic Planning Committee meeting on February 7, 2019. *(For possible action)*

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

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

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

SECTION 2. BUSINESS ITEMS

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

DOCUMENT SUBMITTED:

- CY 2018 Market Share Analysis

DISCUSSION:

Vick Gill, Associate Administrator explained that UMC did see a decrease in admissions of about 6% This was partly due to a natural reduction in admissions but also due to a better management of patients and not admitting those that do not need admitting.

Chair Hagerty asked Mr. Gill if he could show a bar chart of gains and losses so we can see our competitors market share. Mr. Gill replied that we have this information and we can definitely show it that way.

Acute hospital bed share was shown and UMC has 12.4% of the beds, which makes UMC second in the market.

UMC is 7th in the market in Cardiology services with 6.8%. Mountain View, Sunrise, St. Rose Sienna, Desert Springs, Summerlin, Spring Valley and Valley all precede UMC.

For General Surgery, UMC is second in the market with 11.8%. It was noted that UMC had a 50% decrease in volume.

In the orthopedics category, UMC is up 4% and has 12.4% of the market share; right behind the number one provider, Spring Valley with 15.1%. We want to drive elective procedures to help increase these numbers.

Chair Hagerty asked why the hospitals we are used to seeing in the top range of this category are not present in this data today.

Mr. Gill explained that other hospitals are focusing on different kinds of surgeries and capturing the more specific categories such as shoulder surgeries.

For oncology UMC is third in market share with 12.7%, behind Summerlin and Mountain View. There has been a higher level of scrutiny on this category looking at whether these types of procedures should be done on an outpatient side rather than inpatient.

Tony Marinello, Chief Operating Officer stated that the ambulatory numbers look great and our Quick Cares are doing extremely well.

As far as the pediatric service line goes, UMC is third in the market with 12.6%, behind Summerlin and Sunrise. We have had a slight decrease in market share from Quarter 3 of 2018.

FINAL ACTION TAKEN: None taken.

ITEM NO. 5 Receive an update regarding UMC service line committees; and direct staff accordingly. (For possible action)

DOCUMENT SUBMITTED:
-None submitted

DISCUSSION: Chair Hagerty updated the committee on the Cardiology Service Line Committee.

The big issue is with the new cath lab and the capacity issues they are facing with the current lab. We have physicians that want to bring patients here but they can't due to capacity issues.

Other issues were mentioned and include the need for dedicated cardio OR's but due to infrastructure and aging, it is prohibitive to do these things now.

The team is also looking at the possibility of providing valve replacements with a catheter. This is a very innovative and a better procedure for the patient recovery wise. Only three hospitals are providing this service.

Member Caspersen provided an update on the Oncology Service Line Committee and stated that a SWOT analysis is needed to determine what UMC's strengths and weaknesses are with regards to outpatient services.

Member Palenik provided an update on the Pediatric Service Line Committee.

She felt the meeting went very well and the committee discussed developing common language to make sure everyone is on the same page. UMC is significantly higher in acuity in the Pediatrics' department. One of the department's goals is to educate every parent who has a child at UMC with the knowledge they need. UMC has earned a bronze award for the Safe Sleep program, which provides 100% education to anyone in the Children's Hospital.

There is a need to identify how many beds there are in the pediatrics market. UMC's Children's Hospital is at capacity. We need to consider the drivers that lead people to come to UMC and how we increase it. The committee would also like to look at the marketing aspect with regards to the location and how people get to the right floor of the hospital.

Dr. Mackay provided an update from the Orthopedic Service Line Committee.

Jim Wagner is the new Operating Room Business manager and brings a lot of experience to the table. There is a new Perioperative Council. The surgical cases represent just inpatient cases so they are hoping to get more data for outpatient cases.

Member Haase provided an update on the Ambulatory Service Line Committee.

The committee went over the specifics of the ambulatory market, UMC's locations and where expansion is needed. Most of the information that was discussed will be presented by Mr. Marinello today.

Jennifer Wakem added that her team is working on creating P&L statements for each of the service lines so the committee can see financial details.

FINAL ACTION TAKEN: None taken

ITEM NO. 6 Receive a presentation regarding UMC's strategic plan; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:

-UMC Strategic Line Template

DISCUSSION: Mr. Gill showed the committee an example of a template that could be used for each service line and for the overall strategic plan.

Member Caspersen commented that each of these service lines should have a three year look and nothing further out due to how fast everything is changing.

Chair Hagerty suggested that UMC look out ten years due to the large financial investment that will be made with our infrastructure.

FINAL ACTION: None taken

ITEM NO. 7 Receive a presentation regarding strategic initiatives in the Operating Room; and direct staff accordingly. (For possible action)

DOCUMENT SUBMITTED:

- Joint Perioperative Operational Council Update

DISCUSSION: Deb Fox provided an update on what is occurring within perioperative services.

In late 2017 UMC engaged the Greeley company to do a comprehensive review on perioperative services.

The team looked at everything from case scheduling and management, anesthesia services, staffing adequacy, governance, cost/case, communication and various other services.

A committee was created from this assessment, Joint Physician-UMC Perioperative Operational Committee.

This committee is recognized by the MEC and UMC as a hospital committee with surgeon and anesthesia representation. This committee meets twice a month from 6:30 AM to 7:30 AM.

Some accomplishments that have come from this committee are block schedule modifications, agreed upon definitions, review of emergent, urgent and elective case add-ons and agreed upon data sources of truth.

Surgeon report cards are now available so surgeons can see where they are at performance wise. The focus is now on market share and decreasing inpatient elective surgery volume.

Member Caspersen asked how many items are left on the list that Greeley suggested be done and Ms. Fox replied that they are over 70 percent through the recommendations.

FINAL ACTION: None taken

ITEM NO. 8 Receive a report regarding UMC's Ambulatory Services; and direct staff accordingly. (For possible action)

DOCUMENT SUBMITTED:

- Ambulatory Update

DISCUSSION: Mr. Marinello updated the committee on UMC's ambulatory clinics.

Commercial payor is at 54%, followed by Medicaid at 25%, Medicare at 10% and other at 11%.

Overall average net revenue/encounter on the Primary Care side is \$72 and \$118 on the Quick Care side.

FY19 Q1 vs FY18 Q1 volumes were shown. Primary care grew 44% and Quick Care grew 21.5%. These increases are due to extended hours, additional providers and new locations.

FINAL ACTION: None taken

ITEM NO. 9 Receive report regarding Trauma Centers; and direct staff accordingly. (For possible action)

DOCUMENT SUBMITTED:

- None submitted

DISCUSSION: Gail Yedinak, Management Analyst announced that AB317, which is the trauma bill was thrown out and a new bill has been drafted. This new bill puts more power and authority in the state to determine the need for a trauma center.

There are currently 4 local hospitals applying for trauma designations.

The Balanced Billing bill was also heard yesterday.

FINAL ACTION: None taken

SECTION 3: EMERGING ISSUES

ITEM NO. 10 Identify emerging issues to be addressed by staff or by the Board at future meetings; and direct staff accordingly. (For possible action)

Chair Hagerty would like to know what Medicare for all means for us.

COMMENTS BY THE GENERAL PUBLIC:

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

SPEAKER(S): None

There being no further business to come before the Board at this time, at the hour of 10:57 a.m. Chair Hagerty adjourned the meeting.

APPROVED: June 6, 2019

MINUTES PREPARED BY: Terra Lovelin