

**University Medical Center of Southern Nevada  
Governing Board Joint Meeting  
May 25, 2022**

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UMC Emerald Room  
901 Rancho Lane, Suite 180  
Las Vegas, Clark County, Nevada  
Wednesday, May 25, 2022  
2:00 p.m.

The University Medical Center Governing Board met for a Joint Meeting of the UMC Board of Hospital Trustees and Governing Board, at the location and date above, at the hour of 2:00 p.m. The meeting was called to order at the hour of 2:02 p.m. by Chair O'Reilly. The following members were present, which constituted a quorum of the members thereof:

**CALL TO ORDER**

**Board Members:**

**Present:**

John O'Reilly, Chair  
Donald Mackay, M.D., Vice-Chair - Via WebEx  
Robyn Caspersen  
Laura Lopez-Hobbs  
Christian Haase  
Harry Hagerty – Via WebEx  
Mary Lynn Palenik - Via WebEx  
Jeff Ellis - Via WebEx

**Hospital Board of Trustees Present:**

Marilyn Kirkpatrick  
Tick Segerblom  
Justin Jones  
Jim Gibson  
Ross Miller

**Ex-Officio Members:**

Barbara Fraser  
Meena Vohra, Chief of Staff  
Marc Kahn, M.D., Dean of Kirk Kerkorian School of Medicine at UNLV

**Absent:**

Renee Franklin  
William McCurdy II  
Michael Naft

**Also Present:**

Mason VanHouweling, Chief Executive Officer  
Susan Pitz, General Counsel  
Lisa Logsdon, County Counsel  
Stephanie Ceccarelli, Board Secretary

## **SECTION 1. OPENING CEREMONIES**

### **CALL TO ORDER**

### **PLEDGE OF ALLEGIANCE**

### **INVOCATION**

*A motivational video presentation was shared with the Board Members reflecting the service provided to the community at University Medical Center.*

### **ITEM NO. 1 PUBLIC COMMENT**

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

Speakers: None

### **ITEM NO. 2 Approval of Minutes of the meeting of the UMC Governing Board held on April 27, 2022. (Available at University Medical Center, Administrative Office) (For possible action)**

FINAL ACTION: A motion was made by Member Hobbs that the minutes be approved as recommended. Motion carried by unanimous vote of the UMC Governing Board.

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

FINAL ACTION: A motion was made by Member Hobbs that the agenda be approved as amended. Motion carried by unanimous vote including both UMC Governing Board and Hospital Board of Trustees.

## **SECTION 2. CONSENT ITEMS**

### **ITEM NO. 4 Approve the May 2022 Medical and Dental Staff Credentialing Activities for University Medical Center of Southern Nevada (UMC) as authorized by the Medical Executive Committee (MEC) on May 24, 2022; and take action as deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- Credentialing Packet

### **ITEM NO. 5 Approve the Agreement with STERIS, Inc. for Surgical Lights and Equipment Booms for the Integrated OR Room project; authorize the CEO to sign any future change orders within his delegated authority; or take action as deemed appropriate. (For possible action)**

DOCUMENTS SUBMITTED:

- OR Renovation Project Package
- Disclosure of Ownership

- ITEM NO. 6    Approve the Fourth Amendment to the Master Agreement, Amendment to Customer Order 1000101759, and related Order Forms with CareFusion Solutions, LLC; or take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- Fourth Amendment to Master Agreement
- Amendment to Customer Order 1000101759 – Redacted
- Amendment to Customer Order 1000220096 – Redacted
- Amendment to Customer Order 1000220739 - Redacted
- Implementation Timeline
- Disclosure of Ownership

- ITEM NO 7    Approve the Client Services Agreement for Core Measures and Other Registries Abstraction Services with DASpecialists, LLC; authorize the Chief Executive Officer to execute amendments or renewal options within his delegation of authority; or take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- Client Services Agreement
- Business Associate Agreement
- Transfer Letter QDS
- Disclosure of Ownership

- ITEM NO 8    Approve the award for RFP No. 2022-01 Early Out Self-Pay Pre-Collection Services to CMRE Financial Services, Inc. d/b/a Healthcare Revenue Management Group (HRMG); approve the RFP No. 2022-01 Service Agreement; authorize the Chief Executive Officer to exercise any extension options; or take action as deemed appropriate. *(For possible action)***

DOCUMENT(S) SUBMITTED:

- Service Agreement

- ITEM NO 9    Award RFP No. 2022-09 Ophthalmology On-Call Services to various physicians, and authorize the Chief Executive Officer to sign the Professional Services Agreements for Individual Ophthalmology On-Call Coverage and exercise any extension options; or take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- Professional Services Agreement – Group On-Call
- Professional Services Agreement – Individual On-Call

- ITEM NO. 10    Approve the Amendment 3 to Agreement with Terminix International Company Limited Partnership d/b/a Terminix Commercial for pest control services; or take action as deemed appropriate. *(For possible action)***

DOCUMENTS SUBMITTED:

- Amendment 3 to Agreement
- Disclosure of Ownership

**ITEM NO. 11 Approve and ratify the Service Agreement with JMB Construction Inc. for 7<sup>th</sup> Story Tower Re-Feed Construction Services; or take action as deemed appropriate. (For possible action)**

DOCUMENTS SUBMITTED:

- Services Agreement
- Disclosure of Ownership

FINAL ACTION:

A motion was made by Member Caspersen to approve Items 4 - 11 on the Consent agenda listed above as recommended. Motion carried by unanimous vote of the UMC Governing Board Members.

**SECTION 3: BUSINESS ITEMS**

**ITEM NO. 12 Welcome introductions and update from the Board of Hospital Trustees Chair, Governing Board Chair and Hospital CEO; and take any action deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- None

DISCUSSION: John O'Reilly welcomed everyone to the Joint Meeting of the Governing Board and Hospital Board of Trustees.

Tick Segerblom, Acting Chair for the Hospital Board of County Commissioners, thanked the Hospital Board and the other Commissioners and UMC staff for inviting them here today. He commended administration for all that has been accomplished at UMC.

Chairman O'Reilly stated that the diversity of the UMC Governing Board has been a significant element of success and it has been a privilege serving on the Board and working with the hospital.

**ITEM NO. 13 Receive an educational presentation from Richard Whitley, Director, and Kyra Morgan, Chief Biostatistician, for the Nevada Department of Health and Human Services – State of Nevada, regarding an overview of Nevada Medicaid Insurance; and take any action deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- PowerPoint Presentation

DISCUSSION: Richard Whitley, Director of Department of Health and Human Services and Kyra Morgan, State Biostatistician, provided a high level review of the Medicaid Cost Driver Analysis for the state of Nevada.

Nevada Medicaid serves as the largest payor of insurance in Nevada. In 2021 the program experienced a year over year caseload growth of approximately 33.5% and approximately 40% of its members use healthcare and approximately

60% of births are Medicaid. The cost driver data was broken down by plan, service category, geography, age and gender.

A recurring theme is that cost per utilizer/unit cost is driving YOY cost growth across all segments of the population. Increases in utilization are also present, which is driven by increases in enrollment.

As utilization returns to normal, we will likely see these themes compound into higher annual cost growth trends. As the public health emergency unwinds, and we return to traditional redetermination cycles, membership is expected to decline. This could also result in higher annual costs growth trends.

Future reports are needed to better understand health conditions and case mix.

There was continued discussion regarding the costs of pharmacy drugs and Medicaid rates and cost savings and reimbursements. Cost comparisons from other states are being reviewed.

Mr. Van Houweling asked if expansion of MCOs in the state has been helpful in controlling costs and creating more availability in providers.

Mr. Whitley responded that the number of MCOs has increased from 2 to 4 and this does add choice for the consumer.

A discussion ensued regarding the fee for service for disabled, the cost effectiveness provided through managed care and the cost incurred by fee for service for the state, as well as out of state care incurred costs.

A parallel analysis is being worked on that reviews payments from all payors statewide.

**ITEM NO. 14 Receive an informational presentation from Jayme Ching, Nurse Practitioner, regarding Human Trafficking and Interventions at UMC; and take any action deemed appropriate. (For possible action)**

**DOCUMENT(S) SUBMITTED:**

- PowerPoint Presentation

**DISCUSSION:** Jayme Ching, Nurse Practitioner, provided a high level educational overview of human trafficking and interventions at UMC. Ms. Ching began her discussion by providing background of how she became involved in monitoring this activity and how to recognize it.

Studies show that up to 88% of trafficking victims access health care during their trafficking situation. She stressed that every patient should be screened. Staff awareness and barriers were reviewed, as well as what indicators to look for with trafficking victims.

In 2019, Nevada had 239 reported cases of human trafficking. Between the years of 2011 to 2019, there were 922 child victims identified and out of that number only 40% were reported as runaway.

Next, she provided a review of what UMC is doing system wide to mitigate this activity. A human trafficking taskforce was started in January, which includes community resources and inter-professional collaboration. Additional resources regarding human trafficking is available on the UMC Intranet.

Ongoing staff education and training is being rolled out hospital wide to benefit the organization, as well as the community.

A discussion ensued regarding the victims identified that are from Nevada or are known locally.

**ITEM NO. 15 Review and discuss the Governing Board 2022 Action Plan, to include a presentation regarding the ReVITALize Façade Project at UMC; and take any action deemed appropriate. (For possible action)**

DOCUMENTS SUBMITTED:

- PowerPoint Presentation

DISCUSSION: Patrick Burrus, Grand Canyon Project Manager, provided an overview of the ReVITALize Façade Project with UMC. The goal as the project manager is to mitigate risks as the project moves forward.

The construction approach for this project was reviewed. This is a CMAR profile project. Mr. Burrus explained the work that is done during the pre-construction phase of the project.

Commissioner Kirkpatrick asked about the financing of the project. Mr. Van Houweling explained the project was delayed due to the COVID-19 pandemic.

Chair O'Reilly added that the funding is available for this project.

Mr. Burrus continued that Martin-Harris was chosen as a vendor through the RFP process in April.

Renderings of the façade from the viewpoint of Charleston and Shadow Lane were shown. Mr. Burrus provided a visual tour of the planned upgrades and enhancements to the façade around the campus of UMC, which included a look at the improved signage, parking lots, landscaping, healing gardens and pedestrian walkways. Images presented also showed the enhanced LED lighting that will showcase the hospital.

The discussion continued regarding the funding for the improvement project and where the funds came from. Mr. Van Houweling added that the funding will come from UMC dollars.

It was clarified for the Commissioners that they would not have to take any action today on the preconstruction project, as it is within the delegation of the UMC Governing Board for approval.

- ITEM NO. 16 Approve the RFP No. 2022-02 ReVITALize UMC Façade Project to Martin-Harris Construction, LLC for preconstruction services as the Construction Manager at Risk; approve the Standard Form of Agreement Between Owner and Construction Manager as Constructor and the General Conditions of the Contract for Construction; or take action as deemed appropriate. (For possible action)**

DOCUMENTS SUBMITTED:

- Martin-Harris Construction Agreement

DISCUSSION:

Chair O'Reilly asked Susan Pitz, General Counsel, to provide a brief synopsis of what was being voted on today and who would need to vote.

Ms. Pitz stated that it is within the Governing Board delegation for preconstruction services to be provided by Martin-Harris and only the UMC Governing Board members need to vote on this item today.

This agreement is for a term of 3-months, NTE approximately \$91K. Over the next 90-days, Martin-Harris will provide recommendations regarding the phasing of the project, which will go through the normal Committee and Governing Board approval process and will ultimately go before the BOT for approval. UMC may terminate this contract phase with convenience upon 7-days notice.

FINAL ACTION: A motion was made by Member Haase to approve the award of RFP as recommended. Motion carried by unanimous vote by UMC Governing Board Members.

Member Caspersen added that the Audit and Finance Committee approved this item at their meeting held on May 18, 2022.

- ITEM NO. 17 Receive a report from the Governing Board Human Resources and Executive Compensation Committee; and take any action deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- PowerPoint Presentation

DISCUSSION:

At this time, Chair O'Reilly provided brief background of all of the Members of the HR Committee.

Kurt Houser, Chief Human Resource Officer provided a brief overview of the committee's duties, recent accomplishments and 2022 HR goals. Some accomplishments include:

- Developed first ever staffing standards in cooperation with Audit and Finance Committee

- Developed first ever Centralized Resource Pool to meet patient care needs at optimal cost
- Submits annual organizational performance goals to align results to mission, vision, and values
  - Navigated COVID Human Resources Policies and Procedures
  - Creatively supported staff quality of life with no pandemic related layoffs or furloughs
- Voluntary Separation Program (VSP)
- Hired over 2,300 employees since 2020 (start of COVID). Over 20% of staff were internal hires.

There are 5 HR goals set for FY2022. Two of the goals are in response from the 2021 employment engagement survey to improve low scores in the survey and design framework for a leadership plan to improve scores. The next survey is in 2023. Other goals are to decrease the average time to hire metric to less than 70 days, implement market adjustments and demonstrate success in moving MPLAN level employees, using the 9-box tool, toward upper level/management succession.

Commissioner Segerblom inquired if there are any diversity goals or tracking programs. Mr. Houser responded that we did have an implicit bias goal last year.

FINAL ACTION: None taken

**ITEM NO 18 Receive a report from the Governing Board Strategic Planning Committee; and take any action deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- None Submitted

At this time, Chair O'Reilly provided brief background of all of the Members of the Strategic Planning Committee.

DISCUSSION: Member Hagerty provided a brief overview of the committee's duties, activities and goals.

The strategic direction of UMC, along with the Kirk Kerkorian School of Medicine, is to become the leading academic medical center of Southern Nevada. Six service lines have been identified to help UMC be the leader for southern Nevada, with continued focus on the Children's Hospital.

Essential to the alignment with UMC is the medical school. Member Hagerty continued by identifying other tangible services that could help aid UMC in reaching short and long term goals.

Member Hagerty provided a list of qualitative and well as quantitative improvements experienced recently. In several service lines, there are many cases being brought to UMC as a result of capital investments in areas like cardiology due to the technology that has been brought to the hospital. Ambulatory services have grown with the addition of telehealth.

Recent discussions regarding what the hospital of the future looks like, has sparked discussions regarding the use of more technology and remote care. The capital that is spent going forward would be used to move UMC forward to the future.

FINAL ACTION: None taken

**ITEM NO 19 Receive a report from the Governing Board Clinical Quality and Professional Affairs Committee; and take any action deemed appropriate. (For possible action)**

At this time, Chair O'Reilly provided brief background of all of the Members of the Clinical Quality and Professional Affairs Committee.

DOCUMENT(S) SUBMITTED:

- PowerPoint Presentation

DISCUSSION: Patty Scott, Quality Patient Safety & Regulatory Officer provided a brief overview of the committee's duties and goals.

The charter of the committee is to establish the framework necessary to promote a culture of quality, safety, accountability, and reliability that includes:

- Identification of objective measures to monitor and evaluate the quality and safety of care/services that aim to:
  - Ensure reliable processes
  - Decrease variation and defects
  - Focus on improved outcomes
  - Use evidence to ensure safe and effective care / service delivery
  - Ensure improvements are sustained
- Collaboration with organizational leaders and front line staff to identify opportunities for improvement, mitigate risk, and implement actions
- Identification of priorities for improvement and frequency of data collection
- Enhance continuous learning of the organization in the improvement and sustainment of processes and system design
- Identify emerging issues with the potential to affect quality, safety, and experience of patient care

The committee is centered around 3 main areas, improving quality and safety, patient experience and regulatory compliance.

Ms. Scott next reviewed the 2022 Quality/Safety goals.

Improvements and sustainment were listed and include: Promoting a culture of quality, safety, accountability and reliability, redesign of the workplace violence program, reducing hospital acquired safety events and infections and improve the patient experience.

In regulatory accomplishments, UMC had successful Joint Commission, blood bank, and stroke surveys and we have implemented electronic solution for policy/procedure management with streamlined workflow & reduction of policies/procedures.

FINAL ACTION: None taken

**ITEM NO. 20 Receive a report from the Governing Board Audit and Finance Committee; and take any action deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- PowerPoint Presentation

At this time, Chair O'Reilly provided brief background of all of the Members of the Audit and Finance Committee.

DISCUSSION: Member Caspersen provided a brief overview of the committee's duties and accomplishments.

The Audit and Finance committee is responsible for reviewing and evaluating financial results, plans and audits of UMC.

Some of the tasks the committee is involved with is:

- Preparation of annual operating and capital budgets
- Periodic financial reports, audits (internal and external)
- Financial aspects of the strategic plans of UMC and coordinating issues of strategy with the Strategic Planning Committee.

Goals:

- To meet or exceed fiscal year budgeted income from operations
- Actual SWB per Adjusted Patient Day is less than \$2,267 or Actual SWB as a percentage of net patient revenue is less than 63.23%

Some of the accomplishments include:

- 8 Annual operating and capital budgets from FY15 to FY22
- 96 Monthly Financial Reports
- 980 contracts (Average of 10 per month)
- Replaced Electronic Health Record selection, installation, implementation and optimization (104 EHR Modules)
- Implemented Electronic Contract Software (Ntracts) and Scheduling Software for Clinicians (Shift Hound)
- Kaufman Hall (Axiom) software contract for budgeting, financial analysis, and reporting
- County funding reduced \$60M since the inception of the Audit and Finance committee
- Recipient of the 2017 CASHMAN Good Governance Award

Clinical improvements, service line enhancements and facility modernization items were listed.

There was a discussion with County CFO, Jessica Colvin, to discuss County and finance matters. No action was taken, but there was discussion regarding the timing and receipt of federal supplemental payments, the process of how federal

supplemental payments work, cash flow management opportunities and capital financing options.

Chair O'Reilly commented on the electronic health record system that was replaced with Epic and despite past challenges, UMC has been successful.

FINAL ACTION: None taken

**ITEM NO. 21 Receive monthly financial report from the Chief Financial Officer for April and year-to-date FY22; and take any action deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- April FY 2022 Year to Date Financials

DISCUSSION: Jennifer Wakem provided a summary of the Fiscal Year 2022 financials.

There were 18,104 admissions, which is above budget 4%. AADC was 645 ALOS was approximately 7 days. This creates a challenge and opportunity for improvement. The volume of post-acute facilities and labor shortages are creating challenges with the patient length of stay. There are 32 patients that have been at UMC more than 3 months. We are actively working to solve this problem. There were 7,941 inpatient surgeries and approximately 4,800 outpatient surgeries. Transplants were at 116 and there were 91,140 ER visits year to date.

Summary income statement before depreciation and amortization was positive \$ 19.4 million on a budgeted loss of \$16.9 million.

Salaries Wages and Benefits showed over \$400 million spent. This increase is due to patient volume, but also because of the rate spend due to overtime and contract labor.

Supplies are over budgeted \$8 million primarily due to increased volumes, inflation and supply chain challenges.

Lastly, Ms. Wakem reviewed a list of eligibility and financial services offered to assist patients with healthcare benefits, as well as value-add benefits.

FINAL ACTION: None

**ITEM NO. 22 Receive an update from the Dean of the Kirk Kerkorian, School of Medicine at UNLV; University of Nevada Las Vegas School of Medicine; and take any action deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- None

DISCUSSION: Dean Kahn provided highlights from the Kirk Kerkorian School of Medicine.

The school just held its 2<sup>nd</sup> graduation. There were 55 new doctors in the graduating class, 41% of the graduating class will remain in Nevada. He added that southern Nevada is short in residency positions in southern Nevada. The school is taking advantage of grants to apply for new programs. Funding has been released to increase the number of residency positions. GME remains a crisis in our community.

Construction is almost complete on the new Medical Education building. It is under budget and ahead of schedule, due to be complete late summer, early fall of this year. The school is working on financing for an ambulatory clinic and a research center.

Dean Kahn stated that the program to bring medical care to schools has been finalized. He added that we are here to care for the community. Funding has been received for 2 mobile clinics.

Finally, the partnership between UMC and the Kirk Kerkorian School is essential to the community. He commented on the need for comprehensive cancer care center here to UMC.

FINAL ACTION: None

**ITEM NO. 23 Receive an update from the Hospital CEO; and take any action deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- PowerPoint Presentation

Mr. Van Houweling shared statistics of how UMC compares to other hospitals in the nation.

He provided the following national statistics:

There are 5,438 hospitals in the nation

- 2, 960 are not for profit
- 1, 228 are for profit
- 951 are government owned hospitals
- 1,100 teaching hospitals

UMC is referred to as an essential hospital, public hospital, teaching hospital and a safety net hospital for the Las Vegas community.

UMC provides the highest level of care in the state and is the only Level 1 Trauma Center, Designated Pediatric Trauma Center, Verified Burn Care Center and only Transplant Center. Campus statistics of emergency services, quick and primary care and online care was provided.

The bed capacity for UMC sits among the top 50 hospitals; we have 9 quick cares, 7 primary cares (16 clinics) and we are continuing to grow. A new clinic

will be opening in Aliante and we are looking to expand in other areas. He shared a slide which showed service lines of UMC as compared to other like hospitals and the services that are provided.

UMC holds a C leapfrog safety grade and a 2 star HCAHPS patient satisfaction rating. Lastly, the income from operations as compared to other facilities was provided.

FINAL ACTION: None

**SECTION 4: EMERGING ISSUES**

**ITEM NO. 24 Identify emerging issues to be addressed by staff or by the Board at future meetings; and direct staff accordingly. *(For possible action)***

Acting Chair Segerblom thanked the Board and staff for the invitation to attend today's meeting.

**COMMENTS BY THE GENERAL PUBLIC:**

FINAL ACTION: None

There being no further business to come before the Board at this time, at the hour of 4:57 p.m. Chair O'Reilly adjourned the meeting.

Minutes Prepared by: Stephanie Ceccarelli

APPROVED: June 29, 2022