University Medical Center of Southern Nevada
Governing Board Strategic Planning Committee
April 3, 2025

UMC Providence Suite
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
Thursday, April 3, 2025
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 9:02 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
Robyn Caspersen
Dr. Donald Mackay (Via WebEx)
Christian Haase (Via WebEx)
Mary Lynn Palenik (Via WebEx)

Absent:
None

Also Present:
Mason Van Houweling, Chief Executive Officer (Via WebEx)
Tony Marinello, Chief Operating Officer
Jennifer Wakem, Chief Financial Officer
Chris Jones, Executive Director of Support Services
Danita Cohen, Chief Experience Officer
Susan Pitz, General Counsel
Stephanie Ceccarelli, 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. 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 February 6, 2025. *(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 recommended. Motion carried by unanimous vote.

SECTION 2: BUSINESS ITEMS

ITEM NO. 4 Receive a report regarding UMC Service Line Performance Overview; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
- Service Line Update

DISCUSSION:

Chris Jones, Executive Director of Support Services, reviewed the Service Line Updates for general surgery, orthopedics, cardiology, women's and children's and ambulatory.

Overall general surgery volumes for inpatient and outpatient were up 10%. Charges, revenue, and contribution margins remained consistent with the previous quarter's statistics. Case mix is favorable.

Chairman Hagerty asked if there is a capacity metric with regards to available surgical hours and if they are being monitored. Mr. Marinello responded that an analysis has been done, and it is being monitored by staff.

Ms. Franklin agreed that it is important to monitor and calculate the utilization and turnover times, in an effort to optimize and increase capacity and improve efficiency.

The Committee continued by discussing the key drivers in year-over-year case increases by service lines. Mr. Marinello responded that the key driver is robotics in general surgery, urology, and GYN services. General surgery operational updates, strategic next steps, and expense controls were reviewed, highlighting goals, action plans, and utilization improvements.

Mr. Marinello highlighted the substantial growth of the robotic surgical cases at UMC over previous quarters. A discussion ensued regarding case growth in robotic surgeries, the improved technology in the Da Vinci Robot, cost savings, and increased patient satisfaction.

Although orthopedic volumes are up quarter over quarter, primarily in clinic locations, the contribution margin decreased slightly due to the addition of employed physicians during the year. Operational updates remained consistent with the previous quarter. Mr. Marinello highlighted that joint classes are at 77%.

Staff reviewed the demographics of the outpatient orthopedic clinics by age, as requested by the Committee at the previous meeting.

Cardiac showed an increase in volumes for inpatient and outpatient services. Chairman Hagerty commented that there is capacity for approximately 300 cases per month. Staff is implementing strategies to improve outreach and scheduling processes. Updates for this service line were reviewed, highlighting the first renal denervation procedure at UMC. The 3rd Cath lab is fully open and operational, averaging over 200 cases per month. TAVR and Watchman procedures continue to show growth. Expense opportunities, marketing campaign promotions, and the next steps in service line expansion were discussed briefly.

Ambulatory volumes year over year are down for the quick care locations. Charges and revenue are good, and the contribution margin is up. Operational updates highlighted primary care self-scheduling at 73%, and the quick care statistic for patients who left without being seen was at an impressive 0.02%. The Committee asked if there was information regarding returning patients. Staff will track these statistics.

The Committee suggested comparing the standards for messages received in MyChart for 48 and 24-hour responses and possibly adjusting the standard. Strategic next steps and technology were reviewed.

There was continued discussion regarding pediatric services in underserved communities, as it relates to ambulatory and emergency department locations.

Children's hospital volumes were good overall, primarily in outpatient services. Charges and revenue were good, but the contribution margin was down. Although deliveries are down, net revenue remains flat. Mr. Marinello highlighted initiatives, including a Diabetic Educator for pediatric patients and mothers, dedicated parking spaces for OB doctors, and reserved patient rooms for ER patients. There is now a dedicated Business Development Officer assigned to this service line.

FINAL ACTION TAKEN:

None taken.

ITEM NO. 5 Receive an update on FY25 Operational Performance Goals; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
-PowerPoint Presentation

DISCUSSION:

Mr. Marinello provided an update on the Strategic Planning Committee Organizational Goals.

The following goals were discussed. All goals are currently on target and on track to be met.

1. **Continue to deliver improved clinical and financial outcomes in the existing 5 service lines.**

2. **Finalize Rehab Business Plan and Proforma for the expansion of 4th and 5th floor trauma building and submit through approval process.**

3. **Enhance Strategic Initiatives in furtherance of the Academic Health Center.**

4. **Continue on the Journey to Achieve Comprehensive Stroke Certification.**

The team would like to discuss the rehab expansion plan and Proforma at a future Audit and Finance meeting, and a brief conversation ensued regarding the timeline to bring it to Audit and Finance for discussion and approval.

Mr. Jones stated that the dental residency will begin in the next few months. UMC has been awarded 1.67 FTEs in the pediatric slots. UMC has been approved as a sponsoring institution and UMC has applied for a radiology residency program. A site visit is anticipated before the end of the fiscal year.

Currently, UMC has the Primary Stroke Certification and is on track to achieve Comprehensive Stroke Center Certification by June 2025.

Chairman Hagerty asked what will change operationally because of this certification and what can be done to drive awareness within the community. Mr. Marinello responded that an education campaign will be provided to EMS and medical staff. The committee suggested that the Governing Board be educated on this program once certification is received.

FINAL ACTION TAKEN:

None taken.

ITEM NO. 6 **Receive an update from Danita Cohen, Chief Experience Officer on Physician Engagement Initiatives; and direct staff accordingly. *(For possible action)***

DOCUMENT SUBMITTED:
-PowerPoint Presentation

DISCUSSION:

Danita Cohen, Chief Experience Officer, provided an update on physician recruitment at UMC.

UMC offers a dedicated team of three Physician Experience Coordinators who focus their efforts on physician outreach, retention, and support in the following three areas:

1. Surgical Services, the UMC Cardiovascular Center, Transplantation;
2. UMC Children's Hospital, UMC Women & Newborn Care Center, UMC Lions Burn Care Center; and
3. UMC Orthopedic & Spine Institute, Ambulatory Care, Employed Practice Groups

There was continued discussion regarding how orthopedic services are driven to UMC. The committee asked how the effectiveness of physician referrals are tracked and measured. The team can pull the data to share with the committee at a future meeting. It was noted that the physician survey is done annually.

Targeted community physician outreach to external physicians increases awareness of services at UMC. This includes educational programs, provider meetings, and tours. Employed physicians are provided with knowledge about in-hospital services and referral practices. The team maintains relationship management/physician retention through daily rounding and gathering feedback, offering concierge-level support, and communicating with clinical leadership and staff. Marketing materials, organized physician onboarding, collaboration with business development officers, and a data-driven approach promote opportunities for growth.

Lastly, Ms. Cohen reviewed the core service lines at UMC, and the specific focus areas promoted for each service line at UMC. A lengthy discussion ensued regarding opportunities for refinement in the recruitment process of physicians, patient throughput, and patient satisfaction at UMC.

FINAL ACTION TAKEN:

None taken.

SECTION 3: EMERGING ISSUES

ITEM NO. 7 Identify emerging issues to be addressed by staff or by the Board at future meetings; and direct staff accordingly. *(For possible action)*

DISCUSSION:

At future meetings, the Committee would like an update at a future meeting on the following:

1. Benefits of Renal Denervation procedure to treat hypertension.
2. How is UMC building patient relationships with Primary Care Physicians?

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, the meeting adjourned at the hour of 11:25 a.m.

APPROVED: June 12, 2025
MINUTES PREPARED BY: Stephanie Ceccarelli, Board Secretary