University Medical Center of Southern Nevada
Governing Board Strategic Planning Committee
April 6, 2023

UMC ProVidence Suite
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
Thursday, April 6, 2023
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
Dr. Don Mackay
Renee Franklin
Robyn Caspersen (Via WebEx)
Christian Haase (Via WebEx)
Mary Lynn Palenik (Via WebEx)

Absent:

Also Present:
Tony Marinello, Chief Operating Officer
Jennifer Wakem, Chief Financial Officer
Chris Jones, Executive Director of Support Services
Maria Sexton, Chief Information Officer
Dr. Luis Medina-Garcia, Medical Director of Telemedicine Services
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 2, 2023 *(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:

Mr. Marinello began the discussion with a review of the Service Line Performance. Financial data will be provided at the next meeting. He added that the goal moving forward is to have the hospital sub-committees provide a more detailed summary of statistics from each service line.

First Case On-Time Start is up 12% and more improvement is expected going forward. Room turnaround time is 36 minutes, but the goal is 30 minutes. Scheduling changes are in process to ensure patient are on time. OR volume has increased 6%. He added that 15-16 operating rooms are being used daily. A service line specific charge nurse has been added to assist with workflow. Strategic next steps include OR expansion and relaunch of the Perioperative committee. In technology, AI platform has been added for Perioperative optimization for data efficiency. Capital request for Mindray ultrasound was approved in March.

In Orthopedic services, as of February 1st, 5 OR rooms have been blocked for scheduled Ortho with the ability to expand. EPIC Bones module will go-live April 18th. UMC will apply for the Joint Commission for the Gold Standard Center of Excellence for Orthopedics. There have been over 6,700 patients have been seen to date at the Ortho Clinic since November 1, 2022. A lengthy discussion ensued regarding increased clinic capacity, physician coverage, patient volume and improved structure of the service line.

Expense control and revenue enhancement highlights included a pilot program for a dedicated Case Manager and focus on Spine and Ortho implant cost reductions. The Ortho call center go-live date was April 3rd. There was discussion regarding the process to make sure that the call-center process is efficient.

Cardiac services are strong, greater than 180 per month the TAVR cases have fully transitioned to the Cath lab from the OR. Minimally invasive CT surgery and additional cardiac anesthesia coverage are in place. In revenue enhancement, streamline intake process for outside facilities, including UMC Quick Care and Primary Care locations. In the next step, the new Cath Lab has been approved and the GE Ultrasound is coming in April.

Women's and Children's hospital is piloting the use of a children's dashboard in the pediatric ED for all behavioral health children and UMC has been working with the foundation to update the pediatric units. In revenue enhancement, managers are managing the charges and supply usage. We are enhancing the service lines in pediatric transplants and antepartum testing and refining the children's hospital on the master plan.

The Aliante PC and QC has opened and there have been nearly 1,000 patients seen to date. Yelp and google scores have increased YOY as more responses have been received and HCAHPS scores increased from 60 to 84% in patient satisfaction. We are up to 4 stars in Google scores. Revenue enhancement highlights include prepayment discounts; UMC received a Bronze award from Epic and we are in the 25th percentile for pre service collections. Go-live in Stanson Health was March 28th and there has been improvement in the RAF scores. There was an increase of 30% in shared savings with Molina and Silver Summit. A 5-year MOU was signed with Mammovan.

The strategic next steps include the refresh of 2 clinics per year; Peccole and Summerlin are on track for 2023. Southern Highlands location expansion is under way. There has been an increase in self-schedule via MyChart; Online Care will be an available feature to expand available services. There was continued discussion regarding the benefits of patient online care.

Telehealth services have seen 7,700 visits with a 98% patient satisfaction rate and 5 star reviews. The upgrade for primary care has been completed and a marketing plan is in process. Expense opportunities and strategic next steps were discussed. Virtual First clinics and telemedicine booths plans are being developed. A push to increase message response in MyChart is a goal to increase patient satisfaction. There was continued discussion regarding opportunities to improve in our service to the community.

FINAL ACTION TAKEN:

None taken.

ITEM NO. 5 Receive an update regarding overall competitive landscape related to healthcare activity; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
-PowerPoint Presentation

DISCUSSION:

Mr. Marinello provided a high level overview on the changes in the competitive market.

HCA facilities: Sunrise Health announced that it has acquired The Burn and Reconstructive Center located on campus; this will treat adult and pediatric patients.

Mountainview has seen a change in management and they are now offering Interventional Neurology to stroke to patients who arrive via ambulance. Tony explained the service.

Sunrise Health is expanding locations throughout the valley. CareNow clinics now have 18 locations. Maps of the Sunrise Health System and CareNow locations were shown.

Dignity Health: Masks are optional. Work has begun on expansion and relocation of their pediatric ER facilities. They have 1 urgent care clinic, 4 primary care clinics and multiple specialty locations. Map of the locations throughout the valley was shown. The focus is on the specialty clinics.

UHS Health System: Desert Springs closed on March 11th with 970 employees laid off. There are still free standing ER locations available.

Valley Health Physician Alliance service was reviewed; there are 9 locations throughout Southern Nevada.

There was continued discussion regarding future expansion moving toward ambulatory. Due to the increase of the population per capita, hospital growth in targeted areas is necessary, but new quick care and primary care locations are essential for patients to have access to care outside of the emergency rooms.

Dr. Luis Medina-Garcia added, in the absence of more beds at hospital locations, digital care is a new option for patients. Relationships with various consumer digital platforms in digital care is becoming a reality. A lengthy discussion ensued regarding digital health care and how we can take advantage of the new opportunity. The Committee would like to see what future trends are like for UMC and what initiatives we are putting in place now to keep up with the digital platforms.

Lastly, the Committee reviewed a comparison of the number of area hospital surgical suites.

FINAL ACTION TAKEN:

None taken.

ITEM NO. 6 Discuss FY2024 initiatives for the 2024 budget; and direct staff accordingly. *(For possible action)*

DOCUMENT SUBMITTED:
- None

DISCUSSION:

Jennifer Wakem reviewed the FY24 proposed budget service line initiatives in ambulatory, cardiac services, orthopedics and all other surgeries. In totality, $6.9 million would be added to the budget. A list of action plans for each of the Fab 4 service lines was reviewed.

The FY24 budget initiative for Ambulatory includes Southern Highlands primary care expansion and adding a new quick care, a full year of Aliante QC/PC, adding a new Lied Continuity Clinic and incentive payment increases. The budget impact adds nearly 53K in visits and $10.6 million in net patient revenue. Income from ops is over $300K.

In Cardiology, the initiative includes building a 3rd Cath lab, increasing Cath cases and open heart surgeries. Length of stay is calculated based on historical data for these types of cases. Gross revenue is $131 million and net patient revenue is $17 million, total income from ops is $3.4 million.

The Orthopedic initiative is includes a physician employment model for a full year, increasing Ortho surgery cases and clinic visits. LOS would run about 8 days. Net patient revenue increase $4.9 million. There was a brief discussion regarding why the LOS is so long and Ms. Wakem commented that this is an opportunity to improve. Mr. Marinello added that the driver is more trauma related than elective. Skilled nursing and rehab placement is also an issue.

The initiative for all other surgeries is full year employment model for anesthesia, plus increased surgery cases. Net patient revenue approximately $24 million and total income from ops is $2.1 million.

Lastly, a sample of profitability was shown comparing actual to budget; it will be shown at future meetings.

FINAL ACTION TAKEN:

No action 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:

1. Addition of a rehab facility or step down facility care
2. Candida Auris infections

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, at the hour of 10:51 a.m.

APPROVED: June 7, 2023

MINUTES PREPARED BY: Stephanie Ceccarelli, Board Secretary