

**University Medical Center of Southern Nevada
Governing Board Audit and Finance Committee Meeting
December 10, 2025**

Emerald Conference Room
Delta Point Building, 1st Floor
901 Rancho Lane
Las Vegas, Clark County, Nevada

The University Medical Center Governing Board Audit and Finance Committee met 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 Robyn Caspersen and the following members were present, which constituted a quorum.

CALL TO ORDER

Board Members:

Present:

Robyn Caspersen
Harry Hagerty (via Teams)
Bill Noonan
Mary Lynn Palenik
Christian Haase (via Teams)

Absent:

None

Others Present:

Mason Van Houweling, Chief Operating Officer
Tony Marinello, Chief Operating Officer
Jennifer Wakem, Chief Financial Officer
Deb Fox, Chief Nursing Officer
Doug Metzger, Controller
Susan Pitz, General Counsel
Lia Allen, Assistant General Counsel - Contracts
Stephanie Ceccarelli, Board Secretary

SECTION 1. OPENING CEREMONIES

ITEM NO. 1 PUBLIC COMMENT

Committee Chair Caspersen asked if there were any public comments to be heard on any item on this agenda.

Speaker(s): None

ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Audit and Finance Committee meeting on November 12, 2025. (For possible action)

A motion was made by Member Noonan to approve the minutes as presented. Motion carried by a majority vote.

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

A motion was made by Member Noonan to approve the agenda as presented. Motion carried by unanimous vote.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive monthly and year-to-date financial report for October FY26; and direct staff accordingly. (For possible action)

DOCUMENTS SUBMITTED:

- October FY26 Financial Report

DISCUSSION:

Admissions were 2.5% below budget. Adjusted average daily census was 361 and ALOS was 5.69. Hospital CMI was 1.94 and Medicare was 1.93. There were 840 inpatient surgery cases and outpatient surgeries were above budget by 25 cases. There were 12 transplants and total ER visits were 335 patients above budget. ED to admission/observation was at 21.81%. Quick care volumes were 6.7% below budget and primary cares were below budget 9%. There were 361 telehealth visits. Ortho visits were up 731 cases and there were 118 deliveries. The Crisis Stabilization Center received 132 patients, and the outpatient infusion clinic saw 476 patients.

Member Noonan asked whether quick care locations were down in total or whether specific locations were showing a decrease. Ms. Wakem responded that Enterprise, Blue Diamond, and Sunset are the key drivers. Mr. Marinello added that there is competition in the area surrounding the Blue Diamond location. The conversation continued with the density of free-standing healthcare clinics in those areas.

Key stats trended were compared to the 12-month average. Observation cases increased. Length of stay was 5.59. Transplant cases were at a record low with 12 cases. Ortho had a record high with 3,400 visits.

Inpatient payor mix trends were consistent with prior months with the exception of Medicaid, which dropped 1.2%. Payor mix by type was presented as informational.

The October income statement showed net patient revenue \$1.3 million above budget. Other revenue was down by \$900K due to 340B revenue. Ms. Wakem reminded the committee of reimbursements from the county for losses from the Crisis Stabilization Center. As of October, the county has subsidized approximately \$3 million in losses from CSC operations. Management is working on initiatives to minimize losses.

Total operating revenue was above budget \$380K. Operating expenses were below budget \$1.9 million. EBIDTA was \$3.7 million on a budget of \$1.6 million, exceeding budget.

Income statement year to date, net patient revenue is below budget \$5.8 million and other revenue was down \$2.4 million. Total operating revenue was below budget \$8.2 million. Operating expenses were down \$10.7 million.

EBIDTA was \$7.7 million on a budget of \$6.4 million, \$1.2 million above budget.

Salaries, wages, and benefits for October were reviewed. Although slightly over budget \$130 K, overtime is down significantly. Contract labor is up slightly, but this is being monitored. SWB per FTE is up slightly.

Chair Caspersen asked what is contributing to the decrease in overtime and how this is impacting staff. Ms. Wakem commented on the efforts to manage overtime in a positive way. There was a continued discussion regarding the management of the overtime trend related to patient volumes.

All other expenses were below budget by \$2.1 million, primarily due to supplies and 340B revenue.

Financial indicators were discussed in profitability, labor, liquidity, and cash collections. Net to gross was slightly under budget, labor and liquidity were in the green. The point-of-sale cash collection goal was 92.9%.

Ms. Wakem provided an update on the FY26 organizational goals and noted progress. The goal related to denial reduction and documentation accuracy has been a challenge. Management will discuss this documentation with staff to maintain compliance. There was continued discussion regarding documentation compliance and efforts to improve the length of stay.

Next, the Committee discussed concerns related to cash flow. Approximately \$50 million was received in supplemental payments. There was continued discussion regarding the reporting of investing activities of internally designated cash. The balance sheet was reviewed briefly.

FINAL ACTION TAKEN:

None

ITEM NO. 5 Receive an update report from the Chief Financial Officer; and direct staff accordingly. (For possible action)

DOCUMENTS SUBMITTED:

- None

DISCUSSION:

Ms. Wakem provided the following updates:

Medicare Cost Report:

The annual Medicare Cost Report was filed in November. The reporting came in higher than what was budgeted by \$2.8 million, due to a grant award and organ acquisition cost.

BDO Single Audit Report:

Guidance has been received and the auditors will begin working on the single audit.

DSH Audit Report:

The audit for FY22 was finalized in October. There were no overpayments noted. There will be reporting of FY23 next year.

New Supplemental Payment Program:

The team is working to resolve and clarify matters related to this new program. The ACA Premium Subsidies are set to expire at the end of the year, and this is also being monitored.

Chair Caspersen:

The team thanked Chair Caspersen for her leadership, support, and guidance as chair of the Audit and Finance Committee. This will be her last Audit and Finance meeting.

FINAL ACTION TAKEN:

None taken

ITEM NO. 6 Review and recommend for approval by the Governing Board the Lease Agreement and Service Agreement with PNC Bank and FujiFilm Healthcare Americas Corporation; authorize the Chief Executive Officer to execute extensions and amendments; or take action as deemed appropriate. (For possible action)

DOCUMENTS SUBMITTED:

- Lease and Service Agreement
- PNC - Disclosure of Ownership
- FujiFilm Disclosure of Ownership

DISCUSSION:

This request seeks to establish a 48-month lease and service agreement for endoscopic scopes and video imaging equipment, as well as upgrade the existing equipment used in endoscopy.

FINAL ACTION TAKEN:

A motion was made by Member Noonan to approve the agreement and make a recommendation to the Governing Board to approve the agreement. Motion carried by unanimous vote.

ITEM NO. 7 Review and recommend for approval by the Governing Board the Master Purchasing Agreement with Vocera Communications, Inc.; authorize the Chief Executive Officer to execute extensions and amendments; or take action as deemed appropriate. (For possible action)

DOCUMENTS SUBMITTED:

- Master Purchase Agreement - Redacted
- Disclosure of Ownership

DISCUSSION:

This is a new 36-month purchasing agreement with Vocera to create a quieter and more healing environment for patient care. Wearable badges will enhance the safety of UMC's staff, simplify care coordination, and improve overall workflow efficiency by implementing a single, enterprise-wide communication and alert management platform. Additionally, this effort supports UMC's goal of achieving Magnet Status.

Through this agreement, UMC will receive the smart badges, 36-month subscription for the Vocera platform, implementation, warranty, and training. Implementation will begin after approval.

A discussion ensued regarding the capabilities of this technology and communication platform, as well as how it will be utilized hospital wide. Ms. Fox explained the security aspects of the system and how HIPAA is protected.

Chair Caspersen asked whether there would be an extension of services after 36 months and whether more equipment would be required. Ms. Allen responded that the subscription would be renewed after 36 months.

A lengthy discussion ensued about whether this equipment has transcription capabilities. Ms. Fox responded that records will still need to be documented, but this will enable seamless interfacing between nurses and physicians, improving staff responsiveness. The built-in security system will ensure staff safety.

The Committee would be interested in a demonstration of this equipment and how it works.

FINAL ACTION TAKEN:

A motion was made by Member Noonan to approve the agreement and to make a recommendation to the Governing Board to approve the agreement. Motion carried by unanimous vote.

ITEM NO. 8 **Review and recommend for award by the Governing Board the RFQ No. 2025-06 Renal Dialysis Coordinator Services to Patient Pathways, LLC; approve the RFQ No. 2025-06 Service Agreement; authorize the Chief Executive Officer to execute the extension options and future amendments within his yearly delegation of authority; or take action as deemed appropriate. (For possible action)**

DOCUMENTS SUBMITTED:

- Services Agreement

DISCUSSION:

In July 2025, a notice of interest was issued allowing companies to express interest in participating in a request for qualifications for Renal Dialysis Coordinator Services.

The agreement with the vendor specifies an approximate 48 to 72-hour turnaround time, allowing timely patient discharge from the hospital.

The vendor will coordinate the placement of patients needing kidney dialysis with local clinics and at the patient's location of choice. This is a 3-year agreement with a 30-day termination notice.

FINAL ACTION TAKEN:

A motion was made by Member Noonan to approve the agreement and to make a recommendation to the Governing Board to approve the agreement. Motion carried by unanimous vote.

ITEM NO. 9 **Review and recommend for award by the Governing Board RFSOQ No. 2025-08 Professional Placement Services to multiple placement agencies; approve the RFSOQ No. 2025-08 Placement Services Agreements; authorize the Chief Executive Officer to exercise any extension options and execute any applicable candidate referral forms; or take action as deemed appropriate. (For possible action)**

DOCUMENTS SUBMITTED:

- Various Vendor Professional Placement Services Agreements
- Disclosure of Ownership

DISCUSSION:

In October, a Request for Statements of Qualification was issued, inviting companies to express interest in professional placement services for professional and non-professional staff at UMC. Of the 25 respondents, 17 agencies were selected for their placement services.

This is a 3-year agreement with 2 one-year renewal options and termination upon 30 days' notice.

The Committee inquired about compensation for vendors based on performance and whether UMC has used any of the approved respondents. Ms. Allen responded that many of the respondents have been used previously at UMC, and that compensation is based on who fills the position. These matters are managed by Human Resources.

FINAL ACTION TAKEN:

A motion was made by Member Noonan to approve the agreements and to make a recommendation to the Governing Board to approve the agreements. Motion carried by unanimous vote.

ITEM NO. 10 **Review and recommend for approval by the Governing Board the Third Amendment to License Agreement with Zynx Health Incorporated for clinical decision support solutions; or take action as deemed appropriate. (For possible action)**

DOCUMENTS SUBMITTED:

- License Agreement – 3rd Amendment
- Disclosure of Ownership

DISCUSSION:

This amendment extends the license for software modules for the clinical decision support solutions for 5 years.

FINAL ACTION TAKEN:

A motion was made by Member Noonan to approve the amendment and to make a recommendation to the Governing Board to approve the amendment. Motion carried by unanimous vote.

SECTION 3: EMERGING ISSUES

ITEM NO. 11 Identify emerging issues to be addressed by staff or by the Audit and Finance Committee at future meetings; and direct staff accordingly. (For possible action)

None

At this time, Chair Caspersen asked if there were any public comment to be heard on any items not listed on the posted agenda.

COMMENTS BY THE GENERAL PUBLIC:

SPEAKERS(S): None

FINAL ACTION TAKEN:

At the hour of 3:02 p.m., the meeting was adjourned.

MINUTES APPROVED: January 21, 2026

Minutes Prepared by: Stephanie Ceccarelli