

***University Medical Center of Southern Nevada
Governing Board
October 28, 2020***

UMC Emerald Conference Room
Delta Point Building (1st Floor)
901 Rancho Lane
Las Vegas, Clark County, Nevada
Wednesday, October 28, 2020
2:00 PM.

The University Medical Center Governing Board met in regular session, at the location and date above, at the hour of 2:00 PM. The meeting was called to order at the hour of 2:03 PM 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 (Via WebEx)
Donald Mackay, M.D., Vice-Chair
Laura Lopez-Hobbs
Christian Haase
Harry Hagerty (Via WebEx)
Robyn Caspersen (Via WebEx)
Renee Franklin (Via WebEx)
Jeff Ellis (Via WebEx)
Mary Lynn Palenik (Via WebEx)

Ex-Officio Members:

Present:

Dr. Marc Kahn, Dean UNLV
Dr. Frederick Lippmann, Chief of Staff
Barbara Fraser, Ex-Officio

Others Present:

Mason VanHouweling, Chief Executive Officer
Susan Pitz, General Counsel
Jennifer Wakem, Chief Financial Officer
Tony Marinello, Chief Operating Officer
Stephanie Ceccarelli, Board Secretary

SECTION 1. OPENING CEREMONIES

CALL TO ORDER

PLEDGE OF ALLEGIANCE

INVOCATION

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

This concludes the public comment.

ITEM NO. 2 Approval of Minutes of the regular meeting of the UMC Governing Board September 30, 2020. (Available at University Medical Center, Administrative Office) (For possible action)

FINAL ACTION: A motion was made by Member Dr. Mackay that the minutes be approved as amended. The motion was carried by a unanimous vote.

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

Chairman O'Reilly requested that Item 14 be held out for separate discussion.

FINAL ACTION: A motion was made by Member Dr. Mackay that the agenda be approved as amended. The motion was carried by a unanimous vote.

SECTION 2. CONSENT ITEMS

ITEM NO. 4 Approve the October 2020 Medical and Dental Staff Credentialing Activities for University Medical Center of Southern Nevada (UMC) as authorized by the Medical Executive Committee (MEC) on October 27, 2020. (For possible action)

DOCUMENT(S) SUBMITTED:

- October Credentialing

ITEM NO. 5 Approve the Clinical Quality and Professional Affairs Committee's recommendation for approval of the UMC Policy and Procedures Committee's activities from its meetings held on July 22 and August 26, 2020. (For possible action)

DOCUMENT(S) SUBMITTED:

- September Credentialing

ITEM NO. 6 Approve the award of RFP No. 2019-17 Enterprise WAN Network Circuits to Cox QCommunications; authorize the Chief Executive Officer to sign the Commercial Services Agreement and execute any extension options or

service orders within his delegation of authority; and take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- COX Commercial Services Agreement
- COX Disclosure of Ownership

ITEM NO. 7 Ratify the Professional Services Agreement for Neurological Surgery On-Call Coverage with Duke Forage Anson Neurosurgical, LLP signed by the Chief Executive Officer; and authorize the Chief Executive Officer to exercise any extension options. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Duke Forage Anson Neurosurgical Professional Services Agreement

ITEM NO. 8 Ratify the Contract of Services with Hello! Las Vegas Destination Management for COVID-19 Testing Support Services; approve the November 2020 Contract of Services; and authorize the Chief Executive Officer to execute future service orders within his delegation of authority; and take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Hello LV Destination Management Disclosure of Ownership
- Hello LV Destination Deposit Request for May 21, 2020 – June 19, 2020
- Hello LV Destination Contract Services May 16 – June 21, 2020
- Hello LV Destination Deposit Request June 20 – 30, 2020
- Hello LV Destination Staff Deposit Request
- Hello LV Destination Deposit Request for May - June
- Hello LV Destination Contract Services for June
- Hello LV Destination Addendum to Contract Services for July
- Hello LV Destination Contract Services for August
- Hello LV Destination Contract Services for September
- Hello LV Destination Contract Services for October
- Hello LV Destination Contract Services for November

ITEM NO. 9 Approve the Agreement for CPO Migration – Phase 1 between Honeywell International, Inc. and University Medical Center of Southern Nevada; and take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED

- Amendment for CPO Migration Plan Phase 1
- Disclosure of Ownership

ITEM NO. 10 Approve the 340B Pharmacy Services Agreement with Optum Pharmacy 702, LLC and University Medical Center of Southern Nevada; and authorize the Chief Executive Officer to sign the Agreement and execute future amendments that only address pharmacy locations or other non-financial components of this Agreement. *(For possible action)*

DOCUMENT(S) SUBMITTED

- 340B Pharmacy Services Agreement

- ITEM NO. 11 Approve the Professional Services Agreement for Physician Advisor Services with Quality Care Consultants, LLC for utilization, case management and resource management services; and authorize the Chief Executive Officer to sign the Agreement and exercise any extension options. *(For possible action)***

DOCUMENT(S) SUBMITTED

- Quality Care Consultants Professional Services Agreement

- ITEM NO. 12 Recommend for approval by the Board of Hospital Trustees for University Medical Center of Southern Nevada, the Memorandum of Understanding/Sublease Extension with Clark County Real Property Management; and take action as deemed appropriate. *(For possible action)***

DOCUMENT(S) SUBMITTED

- Memorandum of Understanding
- Land Lease Agreement
- Enterprise Interlocal Agreement
- Map

- ITEM NO. 13 Recommend for approval by the Board of Hospital Trustees for University Medical Center of Southern Nevada, settlement of the claim brought by Fely Baria; and authorize the Chief Executive Officer to execute any necessary settlement documents. *(For possible action)***

DOCUMENT(S) SUBMITTED

- Settlement Release

FINAL ACTION: A motion was made by Member Hagerty to approve the Items 4-13 on the Consent Agenda as recommended. Motion carried by unanimous vote.

At this time the Board considered Item 14, which was held out for separate discussion.

- ITEM NO. 14 Approve and recommend for ratification by the Board of Hospital Trustees for University Medical Center of Southern Nevada, in accordance with Clark County Ordinance 3.74.030(12), the Collective Bargaining Agreement between University Medical Center and the Service Employees International Union, Local 1107, effective the date ratified by the Hospital Board of Trustees through June 30, 2024. *(For possible action)***

DOCUMENT(S) SUBMITTED

- Attachment I
- Attachment II
- Attachment III

DISCUSSION: Chair O'Reilly wanted to thank the both the UMC team and the team representing the SEIU for their hard work and commitment in reaching an agreement.

FINAL ACTION: A motion was made by Member Haase to approve the Item 14 on the Consent Agenda as recommended. Motion carried by unanimous vote.

SECTION 3: BUSINESS ITEMS

ITEM NO. 15 Presentation by Silver State ACO of the 2019-2020 shared savings, and direct staff accordingly. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- None

DISCUSSION:

Representatives from Silver State ACO presented a check for \$600,729.00 to the hospital and thanked everyone for their participation with Silver State ACO.

ITEM NO.16 Receive an educational briefing from Maria Sexton, UMC Chief Information Officer, on UMC's Information Security Program; and direct staff accordingly. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- None submitted

DISCUSSION:

Maria Sexton, UMC Chief Information Officer, provided an update on the current state of the information security program we have with IT department. She also reviewed the program core mission and our resiliency and recovery capability.

She emphasized the frequency of cyber attacks and shared that most malware comes from emails. She provided statistics regarding incidents of ransomware transmission, the source of data breaches and average costs associated with these in the healthcare industry.

Ms. Sexton next shared UMC's core mission to safeguard UMC information, monitor and identify threats and quickly respond to recover from any attacks.

She reviewed the current state of the program which includes an incident response plan that has been established and IT support is available 24 hours a day, 7 days a week, 365 days a year. We have established a robust data backup program and have exercises in downtime procedures in place.

Chair O'Reilly asked if anything has been learned from the experience with other hospitals and are any of the security issues mentioned a part of any internal audit program. Ms. Sexton responded that no matter how prepared you may think you are, you are not prepared and this is why the downtime exercises are important. We must make sure that every department knows what downtime truly means. Security controls are in place. We continue to add more substantive tests of our controls regularly.

ITEM NO. 17 Review and approve revisions to the UMC Governing Board Bylaws; and make any changes deemed necessary. (For possible action)

DOCUMENT(S) SUBMITTED:

- UMC Governing Board Bylaws (FINAL)(redline)
- UMC Governing Board Bylaws (FINAL)(clean)
- Revisions to Bylaws – Presentation

DISCUSSION:

None

FINAL ACTION: A motion was made by Member Dr. Mackay to approve Bylaws as recommended. Motion carried by unanimous vote.

ITEM NO.18 Review and approve revisions to the UMC Governing Board Policies and Procedures related to committee responsibilities and membership; and make any changes deemed necessary. (For possible action)

DOCUMENT(S) SUBMITTED:

- UMC Governing Board Policies and Procedures (FINAL)(redline)
- UMC Governing Board Policies and Procedures (FINAL)(clean)
- Appendix A - Board of County Commissioners Rules of Procedure Handbook
- Appendix B - Policies and Procedures
- Revisions to Policies and Procedures

DISCUSSION:

None

FINAL ACTION: A motion was made by Member Caspersen to approve the Policies and Procedures as recommended. Motion carried by unanimous vote.

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)

DOCUMENT(S) SUBMITTED:

- None

DISCUSSION:

Member Dr. Mackay provided a report of the meeting held on Monday, October 5, 2020. The meeting was called to order at 3:00 pm. All members were present and there was no public comment. The minutes from the August 10, 2020 meeting were approved and the agenda was approved.

An update was received from Deb Fox, CNO, on the National Data Base of Nursing Quality Indicators Open Survey and an overview of the journey to Magnet Status. The survey is open from October 4 – 25, 2020 and the participation goal is 90% or better.

An update of the Quality, Safety, Infection and Regulatory issues was provided by Patricia Scott, Executive Director of Clinical Patient Safety.

The Committee members unanimously approved policies and procedures that were approved by the Medical Executive Committee and recommended approval to the Governing Board. The CEO Performance Objectives for FY2021 were discussed and a recommendation was forwarded to the Human Resources and Executive Compensation Committee.

There were no emerging issues, no public comment and the meeting adjourned at 4:20 pm.

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

Member Hagerty provided a report of the meeting held on Thursday, October 8, 9:00 am. There was a quorum in attendance. There was no public comment and the minutes and agenda was approved.

There were updates on changes and progress on the six prioritized service lines. There is increased interest in the use of the newly opened Cardiac Cath Lab. Patient volumes were reviewed in oncology, general surgery, orthopedics, pediatrics and ambulatory.

A report was received on how COVID is affecting the community's attitude toward healthcare facilities and the willingness to accept treatment. He highlighted volume of testing being done throughout the valley and noted the increase in lab capacity to 10k tests per day and a target turn around time of less than 48 hours.

CEO Performance goals for FY2021 were set and a recommendation will be forwarded to the Human Resources and Executive Compensation Committee.

There was no public comment and the meeting adjourned at 10:50am.

ITEM NO. 21 Receive a report from the Governing Board Human Resource and Executive Compensation Committee; and take any action deemed appropriate. *(For possible action)*

Member Ellis provided a report of the meeting held on Monday, October 19, 2:00 pm. There was a quorum in attendance. There was no public comment and the minutes and agenda were approved.

The first order of business was to discuss and approve the 2020-2024 Collective Bargaining Agreement between UMC and the SEIU which was approved by the Governing Board on today's consent agenda.

He added that HR Policy 11, which provides reimbursement for certification, was reviewed and approved by the Committee.

CEO Performance goals for FY2020 were reviewed, as well as the overall CEO performance goals for FY2020 for all committees. They team achieved a 95% out of the 100% for the goals from all committees. Next the HR CEO Goals for FY 2021 were then reviewed.

Emerging issues were discussed regarding ancillary department staffing models and the cost structure of benefits in relation to the county.

No public comment and meeting adjourned at 4:20pm

ITEM NO. 22 Receive a report from the Governing Board Audit and Finance Committee; and take any action deemed appropriate. (For possible action)

Member Caspersen provided a report of the meeting held on Wednesday, October 21, 2020 at 2:00pm. There was a quorum in attendance. There was no public comment and minutes were approved and the agenda was approved.

There was focus on the September financial statements. There were several discussions mainly focusing on cash flows, PPE costs, Federal Supplemental Payments, SWB and impacts from the VSP plan. The Cares Act Funding opportunities were also discussed. All contracts approved and ratified and are part of today's Governing Board consent agenda.

There were no emerging issues, no public comment and the meeting adjourned at 3:25pm.

ITEM NO. 23 Receive the monthly financial report for September FY21; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- September FY21 Financial Report

DISCUSSION:

Jennifer Wakem provided a summary of the financial statements for September FY21.

Total admissions were below prior year roughly 10.5%.

Hospital CMI was 1.93, almost 16% above prior year and Medicare CMI was running high 2.16, almost 19% above prior year.

Inpatient surgeries were above prior year almost 6%. There were 497 outpatient surgeries, almost 3.5% above prior year.

ER visits were almost 21% below prior year. The ED to admission rate was 9%.

Quick care visits were below prior year 30%. All locations were down.

Primary cares were below prior year 2.6%.

The conversation continued regarding the swing in CMI and the affect on coding since the addition of the Epic 3M 360 system.

The summary income statement showed net patient revenue was \$6.2 million above prior year. Operating expenses continue to be a challenge. The month ended with a loss of \$5.2 million. The year to date income statement is at a loss of \$20.8 million. We received no Cares Act Funding for the month of September.

Salaries are below budget and below prior year. This can be attributed to VSP offered to employees. Contract labor was \$1.5 million. Overtime is below budget and below prior year. Ms. Wakem explained benefits were higher in prior year by \$4 million due to the reserve booked for the EIB when longevity went away. VSP impact was discussed. To date, there have been 19 positions replaced at a lower rate. The actual number of replacements will be reviewed monthly.

All other expenses showed supplies were \$11.5 million higher than prior year. Key driver is COVID related. Also 340B replenishment was \$3.4 million. Overall implants were above prior year related to transplants. Roughly \$2.5 million is related to PPE costs. Administration is actively looking for opportunities to lower costs.

Lastly, COVID testing was reviewed with roughly 60K tests performed for the month. The reason for the decrease is because of the federal government testing that took place.

FINAL ACTION: None

ITEM NO. 24 Receive an update on the University of Nevada Las Vegas School of Medicine; and take any action deemed appropriate. (For possible action)

Dean Kahn stated that the virtual site visit for full accreditation occurred Monday and Tuesday. A final report will be received in February and the preliminary report available in one week.

Ground breaking for the new Medical Education Building is scheduled for Thursday morning at 10:00am as a virtual event. Thank you to UMC for assisting in the land donation. The partnership between UNLV and UMC will improve the care in the community and act as a source of economic diversity. The project estimated to take 14 months to complete.

Deb Kuhls is the President of the Clark County Medical Society. Dr. John Fildes was rewarded the Lifetime Achievement Award from the Medical Society.

ITEM NO. 25 Receive an update from the Hospital CEO; and take any action deemed appropriate. (For possible action)

Mr. VanHouweling began by giving an overview of the the visitor policy.

Community testing sites are open 7 days a week for the community, with an average of approximately 2000 tests a day. We are in the process of validating a saliva swab test collection process.

The first TAVR procedure was performed a week ago and the new Cath Lab is in use. Construction is underway for a second Cath Lab. A brief review of dual and en block transplants was reviewed. Phoenix is now live in our Epic branded module.

We are embarking on upgrading to a Beaker in our lab which will be going live soon, creating efficiencies, better documentation, better integration and assist with turnaround times.

The Trauma Building is undergoing a sewer project and the TICU is also being refreshed. Parking lot repaving is also being done.

The 5 Star Nursing designation for 100% compliance with the staffing standards was received from the State of Nevada.

Mr. VanHouweling gave a special thank you and sincere appreciation to all involved in the success of the SEIU negotiations.

A market update was provided regarding other hospital systems – UHS Henderson has purchased 40 acres and will be growing in that market area.

Lastly, thank you to the Experience Department their was a Trick or Treat event sponsored by the hospital. There were 750 children that were able to attend on Saturday.

FINAL ACTION: None

SECTION 4: EMERGING ISSUES

ITEM NO. 26 Identify emerging issues to be addressed by staff or by the Board at future meetings and direct staff accordingly. *(For possible action)*

1. Proposed 2021 Governing Board meeting schedule.
2. Consider any personnel changes to the Board and Committees.
3. Any desired Officer changes for next year.

COMMENTS BY THE GENERAL PUBLIC:

Comments from the general public were called.

No such comments were heard.

There being no further business to come before the Board at this time, at the hour of 3:34 PM, Chair O'Reilly adjourned the meeting.

APPROVED: November 18, 2020

Minutes Prepared by Stephanie Ceccarelli