The University Medical Center Governing Board Strategic Planning Committee met in the ProVidence Suite, UMC Trauma Building, 5th Floor, Las Vegas, Clark County, Nevada, on Thursday, May 11, 2017, at the hour of 9:00 a.m. The meeting was called to order at the hour of 9:06 a.m. Chair Raney and the following members were present, which constituted a quorum of the members thereof:

**CALL TO ORDER**

Board Members:

Present:
Eileen Raney, Chair
Robyn Caspersen
Michael Saltman
Donald Mackay, MD

Absent:
Renee Franklin (Excused)

Also Present:
Mason VanHouweling, Chief Executive Officer
Tony Marinello, Chief Operating Officer
Terra Lovelin, Board Secretary

**SECTION 1. OPENING CEREMONIES**

**ITEM NO. 1 PUBLIC COMMENT**

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

None present

**ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Strategic Planning Committee meeting on April 6, 2017. (For possible action)**
FINAL ACTION: A motion was made by Member Caspersen that the minutes be approved as recommended. Motion carried by unanimous vote.

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

FINAL ACTION: A motion was made by Member Saltman that the agenda be approved as amended. Motion carried by unanimous vote.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Receive an overview of Accountable Care Organizations (For possible action)

DOCUMENT SUBMITTED: PowerPoint

DISCUSSION: Kayla Hillegass, Management Analyst gave an overview on Accountable Care Organizations (ACO).

ACOs assumes responsibility for cost and quality of care for Medicare patients. They are comprised of providers and payers who provide coordinated high quality care in order to avoid duplication of services and prevent medical errors. ACOs receive shared saving bonuses, along with traditional fee-for-service payments for lowering costs and increasing quality of care for patients.

As of January 1, 2017 there are 480 ACOs participating in the program. Some of the benefits of ACO’s are, cost savings, improvement in patient retention, improved contracting with commercial payers, and many others.

The following are ACOs in Nevada:
- Silver State ACO, PMC
- Accountable Care of NV
- Optum Accountable Care
- Healthcare Partners ACO
- St. Rose Quality Care Network, LLC
- Prime Healthcare ACO
- Renown Accountable Care, LLC

Member Saltman asked why ACOs are needed.

CEO Mason VanHouweling replied that they incentivize clinical alignment to demonstrate savings to Medicare and improve care. The savings get distributed to the ACOs.

Member Caspersen asked if being a member of ACOs fostered better quality care and staff replied that theoretically, it does.

Andrew Chung, Associate Administrator, explained that we have three main programs where we have reimbursement opportunities in ambulatory services. Annual wellness visits are reimbursed by Medicare and those come with a per-
visit reimbursement; we have hired two Nurse Practitioners to provide the services.

The Chronic Care Management (CCM) and Transitional Care Management (TCM) are other reimbursements we get from CMS; we are in the process of outsourcing those.

Chair Raney asked about exclusivity if we sign with a certain ACO. A discussion ensued and a recommendation was made by Mr. VanHouweling and he will have Silver State present at the next committee meeting to demonstrate patient tracking and cost savings.

FINAL ACTION: None taken.

ITEM NO. 5 Receive an update on Telehealth initiatives (For possible action)

DOCUMENT SUBMITTED: Telehealth Update

DISCUSSION: Mr. Chung introduced Jen Celaschi who has joined us from the Cleveland Clinic in Ohio, as the new Director of Ambulatory Services for UMC.

Mr. Chung described the telehealth initiatives such as Zoom video conferencing and virtual appointments. Zoom has a partnership with Epic for video conferencing and both Zoom and WebEx will be looked at further to determine the best solution for patients and doctors.

A video conferencing unit was demonstrated during the meeting and discussion about the cost and licensing ensued.

The 2015 Assembly Bill 292 encourages provision of health care services via telehealth.

Member Caspersen asked for some sort of standardization that can be built into presentations for costs, volumes, reimbursements, etc.

FINAL ACTION: Mr. Chung will bring this proposal back with a cost analysis at the August meeting.

At this time the board members took Item No. 7 out of order due to scheduling.

ITEM NO. 7 Identify emerging issues to be addressed by staff or by the Strategic Planning Committee at future meetings, and direct staff accordingly. (For possible action)

The committee discussed changes to the current goals and initiatives for CEO VanHouweling.
The revised changes are listed below:

1. Create new Annual Strategic Plan for UMC addressing short and long term goals including but not limited to addressing budget, staffing, operations, capital needs and potential changes in reimbursement.

2. Establish at least one physician network UMC utilize for contracting as well as other external strategic relationships and partnerships that support overall Hospital objectives.

3. Achieve a 10 percent increase in market share of commercial and Medicare payers over July 1, 2017 to June 30, 2018.

4. Signed and Board approved Master Affiliation agreement with UNLV.

   - Suggestion: The committee is suggesting to HR to weight strategy goals from 20% to 25%

**FINAL ACTION:** A motion was made by Member Caspersen that the goals be approved as amended. Motion carried by unanimous vote.

For a future meeting Chair Raney would like to see the following topics on the agenda:

1. Occupational Medicine and ED Analysis
2. Expanding Occupational Medicine in the clinics.
3. Review of ACO’s with a presentation by Silver State.

A discussion ensued regarding revising the role and title of the position that Matt Cova recently vacated.

**ITEM NO. 6** Receive a demonstration from staff on Crimson and Intellimed *(For possible action)*

**DOCUMENT SUBMITTED:** None submitted

**DISCUSSION:** Mr. VanHouweling explained that these two programs analyze the market data.

Crimson is a newer product but it does provide market share, just the potential if you keep patients in the network.

Intellimed has incorporated a lot of the features that Crimson includes and is more reasonably priced.

An example of how one would search for a doctor’s patient count and other services performed was demonstrated and rated by Ms. Hillegass.
A discussion ensued regarding how we track patients that are treated initially by UMC doctors.

**FINAL ACTION:** Chair Raney suggested that Mr. VanHouweling and his team make a recommendation to this committee regarding which provider, either Intellimed or Crimson, is more informative. She would also like a follow up discussion on how staff is using the data and a solution as to how we diminish the leakage of patients from our employed doctors.

**COMMENTS BY THE GENERAL PUBLIC:**

At this time, Chair Raney asked if there were any persons present in the audience wishing to be heard on any items not listed on the posted agenda.

**SPEAKER(S):**

There being no further business to come before the Board at this time, at the hour of 11:25 a.m. Chair Raney adjourned the meeting.

**APPROVED:** July 20, 2017
**MINUTES PREPARED BY:** Terra Lovelin