

Minutes are intended to note (a) the date, time and place of the meeting; (b) those members of the public body who were present and those who were absent; and (c) the substance of all matters proposed, discussed and/or action was taken on. Minutes are not intended to be a verbatim report of a meeting. An audiotape recording of the meeting is available for inspection by any member of the public interested in a verbatim report of the meeting. These minutes are not final until approved by the Board of Regents at the March 2015, meeting.

**BOARD OF REGENTS* and its
HEALTH SCIENCES SYSTEM COMMITTEE
NEVADA SYSTEM OF HIGHER EDUCATION**

Student Union, Ballroom A
University of Nevada, Las Vegas
4505 S. Maryland Parkway, Las Vegas
Friday, December 5, 2014

Members Present: Mr. James Dean Leavitt, Chair
Dr. Mark W. Doubrava, Vice Chair
Dr. Andrea Anderson
Dr. Jason Geddes
Ms. Allison Stephens
Mr. Michael B. Wixom

Other Regents Present: Mr. Rick Trachok

Others Present: Dr. Marcia Turner, Vice Chancellor, Health Sciences
Mr. Vic Redding, Vice Chancellor, Finance and Administration
Mr. Nicholas Vaskov, System Counsel and Director of
Real Estate Planning
Mr. Donald D. Snyder, President, UNLV
Dr. Marc A. Johnson, President, UNR
Dr. Barbara Atkinson, UNLV-SOM
Dr. Thomas L. Schwenk, UNSOM-UNR
Dr. Tameca Ulmer, Nevada Office of Minority Health

Faculty senate chairs in attendance were Dr. Joe Grzymiski, DRI; Mr. Eric March, System Administration; and Mr. Chuck Price, UNR. No student body presidents were in attendance.

For others present, please see the attendance roster on file in the Board office.

Chair James Dean Leavitt called the meeting to order at 8:09 a.m. with all members present.

1. Information Only-Public Comment – None.

2. Information Only-University of Nevada, Las Vegas School of Medicine (Agenda Item #4) – Dr. Barbara Atkinson, Planning Dean of the UNLV School of Medicine, provided an update on the UNLV School of Medicine activities and initiatives (*Ref. HSS-4 on file in the Board office*).

Dean Atkinson reported there was a Memorandum of Understand (*MOU*) between UNLV and the Clark County Commissioners to reserve 10 acres of land in the City of Las Vegas' Medical District, across from Valley Hospital adjacent to the Shadow Lane Campus, for the UNLV School of Medicine.

Dean Atkinson said an advisory board was formed with the first and second meetings held in November and December 2014. Graduate Medical Education (*GME*) and the forthcoming legislative session were the top priority discussions. The sub-committees of the advisory board are: Legislative, Philanthropy, and Accreditation Curriculum and Student Affairs.

Dean Atkinson stated there is recruitment for the initial core leadership for the education programs and Student Affairs. Dr. Samuel Parish has accepted the position of Senior Associate Dean for Student Affairs and Student Admissions along with two others who will be joining in faculty leadership positions.

Dean Atkinson said an official update letter is being sent to a variety of people monthly, including the Governor's office, by request.

Dean Atkinson reported UNLV is starting a capital campaign of which the medical school is a major part. A UNLV retreat was attended by 100 people, including the deans and leadership for all the schools, to look at the issues relating to the campaign. Individual philanthropy for the School of Medicine is being driven by a plan for private commitments. She is hoping to have more information to report within the next two months.

Dean Atkinson stated an official request called the *Substantive Change in Program*, which is an addition – basically the School of Medicine – was sent to the Northwest Commission on Colleges and Universities (*NWCCU*). She was pleased to have been contacted by the *NWCCU* saying it was an excellent proposal.

Chair Leavitt expressed his appreciation for all of Dean Atkinson's work. Chair Leavitt is pleased about the enthusiasm of the advisory board. Chair Leavitt was contacted by the Chair of the Clark County Commissioners, Steve Sisolak, who offered strong support for the *MOU* in high hopes of the UNLV School of Medicine's success.

3. Approved-Minutes (Agenda Item #2) – The Committee recommended approval of the minutes from the September 5, 2014, meeting (*Ref. HSS-2 on file in the Board office*).

Regent Geddes moved approval of the minutes from the September 5, 2014, meeting. Regent Stephens seconded. Motion carried.

4. Information Only-Chair's Report (Agenda Item #3) – Chair Leavitt provided general remarks and updated the Committee regarding health sciences planning and development efforts.

Chair Leavitt thanked members of the Board, and noted the importance of the MOU with Clark County regarding development in the Shadow Lane area. He also mentioned the importance of a statewide approach for the expansion of medical education in Reno and Las Vegas. Vice Chair Doubrava agreed with Chair Leavitt's comments.

5. Information Only-University of Nevada School of Medicine (UNSOM) – Dr. Thomas L. Schwenk, Dean, UNSOM, and Vice President, Division of Health Sciences, UNR, provided an update on UNSOM activities and initiatives (*Ref. HSS-5 on file in the Board office*).

Dean Schwenk noted that in the Southern Nevada area the Henderson clinic has high visibility, continues to grow, and is doing very well. He reported approval was received for pulmonary critical care followed by a match of three outstanding fellows. Unfortunately, a temporary stop was put on the launch of the orthopaedic surgery residency scheduled to begin the summer of 2015. The residency was accredited, but recruitment challenges have caused the delay in the program start date.

Dean Schwenk continues to meet with new UMC leadership to discuss the overall commitment to residency training and the possible reconfiguration of some programs.

Dean Schwenk said because of budgetary issues UMC closed some of its outpatient operations. Dean Schwenk reported UNSOM has taken over the operation for some of them, in particular pediatrics, and it was done so well and seamlessly some patients did not realize there was a change.

Regarding Reno, Dean Schwenk reported there continues to be operational discussions under the existing contracts with Renown Regional Medical Center. Recruitment of a joint chair of pediatrics and chief of pediatrics is being explored. Residency with St. Mary's Regional Medical Center is progressing well. Dean Schwenk said there has been development of a new plan for offering clinical services on campus for older adults including various specialty areas such as frailty, cognitizant memory loss and general geriatric services.

5. Information Only-University of Nevada School of Medicine (UNSOM) – (continued)

Concerning Statewide, Dean Schwenk reported the overhaul continues on the third and fourth year curriculum, which is particularly important and timely given the build-up of the clinical teaching capacity on the Reno campus to develop a link with new areas of clinical teaching.

Dean Schwenk reported the implementation of the full Practice Management and Clinical Electronic Medical Record (EMR) IT system has gone as well as could be expected but, there were some patient billing errors. Productivity is returning to normal levels and physicians are beginning to become comfortable with the system. A physician productivity-based compensation plan has been long coming. Now that the EMR and Practice Management system has launched, the data can be developed to be more actionable, containing a real-time source of information to adjust physician salaries.

Dean Schwenk stated tele-health outreach continues to grow, only limited by the ability to compensate specialists who can attribute their time to provide consultation and compensation of the primary care physicians in the rural communities who take time from practice to participate in some of the teaching sessions. He said the Physicians Assistant program continues to move along towards a site visit in 2016. An excellent location has been identified on the Redfield campus on the south part of the valley.

Dean Schwenk said there has been a substantial restructuring of the governance management system for the Public Health Laboratory – by statute it reports to him and he has assigned it to Dr. Trudy Larson, Director of Community Health Sciences. The Public Health Laboratory has opened up fresh discussions with the state about new testing and public health contracts which can be made available to the Public Health Laboratory and expand services to the state dramatically.

Regent Stephens would like to hear more about expanding the BS-MD program and other pipeline premedical programs. Dean Schwenk is interested in developing a much more robust pipeline. He felt reaching into high schools to have pre-medical clubs, presentations and fairs would help. The post-baccalaureate program is in the early stages. The program takes undergraduate students who have great potential, but not quite the numbers, and gives them a boost of very intensive bi-medical teaching and exam preparation to help become competitive. He explained the BS-MD program is where the School of Medicine, in partnership with the University of Nevada, Reno, offers a seven-year accelerated pathway for a small number of motivated, mature, high school seniors intending to pursue a career in medicine. If these students do well they bypass the application process and go straight into medical school.

Regent Stephens asked if there was a plan to overcome the issue of being a non-degree seeking program and how financial aid plays into the post-baccalaureate program. Dean Schwenk introduced Dr. Melissa Piasecki, Senior Associate Dean for Academic Affairs, UNSOM, who explained the program was in a start-up phase with a small participation of between two and five students. In terms of the degree element it can give the student a

5. Information Only-University of Nevada School of Medicine (UNSOM) – (continued)

grade point average (*GPA*) boost depending on performance. The *GPA* gets factored into the undergraduate *GPA* because it is not a degree program. Dr. Piasecki continued if it was a degree program, staff could not work with the student's *GPA* in the same way, but because it is not a degree program it can cause hardships in terms of financial aid. Dr. Piasecki said new ways of supporting the post-baccalaureate program are being investigated. Regent Stephens requested more information and continued updates so the information can be shared with other NSHE institutions. Vice Chair Doubrava felt the post- baccalaureate program is fantastic because it allows students to continue with school and demonstrate improvements showing some scholarship and excellence. He said it may be a good time to work on scholarships.

Vice Chair Doubrava understood and can appreciate the complexity of the billing software. He is aware of the complications with the number of providers and the different locations. Vice Chair Doubrava clarified when speaking about the clinical facility that it is in reference to the Henderson location. Dean Schwenk agreed it was the Henderson location. Vice Chair Doubrava asked if it would be possible for the Committee to see a list of different locations in southern Nevada and to see when the leases expire. He would like to synchronize some leases, expressing concern about the eight year lease for UNSOM at 1701 W. Charleston Blvd. in Las Vegas. He thought it sends a message to the southern Nevada contingent to ask at what pace the UNLV School will be developed and a message to the northern contingent who might feel it could take 10 to 15 years. Vice Chair Doubrava wondered if there would be a meeting in the middle. He felt it would be wise for the Regents to be aware of what locations are in southern Nevada.

6. Information Only-University of Nevada School of Medicine (UNSOM) – Dean Schwenk provided an update on the UNSOM clinical practice plan operations, finances, and future plans (Ref. HSS-6 on file in the Board office).

Dean Schwenk believed the topic was incredibly important and suggested the Committee might want a presentation with more detail at a later date. Chair Leavitt recommended an annual report either in December or July. Dean Schwenk suggested it be reported every December. Dr. Marcia Turner, Vice Chancellor of Health Sciences, proposed working with Dean Schwenk and Dean Atkinson to bring back the concept for the Committee.

Dean Schwenk felt it important to address the structural and philosophical issues that underpin the financial performance. The UNSOM Faculty Practice Plan update (*on file in the Board office*) was supplied in advance of the meeting. Dean Schwenk explained practice plans are very iconic in medical schools and the coin of the realm because of serving at least three purposes: 1) to have control of the medical school's clinical practice for the sake of providing opportunities for physician faculty members to practice developing approaches to clinical practice, quality and safety measures; 2) provides the teaching substrate for the medical school; 3) provides financial cross-subsidy if one has a margin in the clinical practice to cross-subsidize academic activities in some

6. Information Only-University of Nevada School of Medicine (UNSONM) – (continued)

circumstances. He thought the first two played out well and continue to be important, but the third has become very problematic for fundamental structural reasons. Dean Schwenk felt some operational issues were rectified with a couple of good years of financial performance on an operational basis but, not all the fundamental structural defects were solved.

Dean Schwenk said the plan started for the reasons described and was mainly a primary care plan in the north of only primary care disciplines. He felt this was important to point out because primary care never makes money – it barely makes money in the private sector, and does not make money in the academic sector because academic practices have a whole infrastructure – legal, financial, compliance, and operational which is extremely expensive. Most private practices do not function in the same way and, because the medical school is a state entity, there are various types of compliance and regulatory oversights which make it very difficult to run these practices. The only way to have a chance is by having much more pilot immunity specialties which are only located in the south. Historically, the plan did alright over time, some was initially processed from the north to the south and subsequently cross-subsidized from the south to the north, then the plans were split financially. The south has continued to do fairly well, but the north has increasing trouble. The north was supported to some extent by various types of state support and Center for Medicare and Medicaid Services (CMS) and GME funding which declined substantially from the state. The decrease of funding exposed the operational weakness of the plan in the north, which was always there.

Dean Schwenk continued the Mojave Mental Health System has become a major problem. Mojave is very large in the south, with a smaller contingent in the north, and serves an incredibly complex and sick population no one else serves. The state needs Mojave to be successful, but this does not translate to adequate reimbursement, which is why there is a financial loss of \$1.7 million on mental health repayment. The system is very volatile with its money fluctuation, which is what actually harmed the plan most. Dean Schwenk thought money would be lost because of the EMR launch, which went relatively well, but Mojave toppled the entire operation.

Dean Schwenk stated the major issue is service to government funded and Medicaid/Medicare patients. Community physicians believe it is our job to service these patients, but it makes it difficult to run a business. The EMR launch took a hit and the cost is loaded on to the practice plan. Medicaid reimbursement is poor and the plan, fundamentally, is not constructed properly with regard to hiring specialties traditionally supporting the practice plans. The plan in the north is small with the south being somewhat larger, but still quite modest. He pointed out there are practice plans generating \$500 million per year with 2,000 physicians.

6. Information Only-University of Nevada School of Medicine (UNSONM) – (continued)

Dean Schwenk outlined future planning:

- the north needs to be completely re-constructed
- develop an affiliation agreement with Renown in order to become subsidized
- Mojave Mental Health System needs an overhaul in its reimbursement structure
- data and more sophisticated compensation plans have to account for financial productivity and patient quality and safety, and
- continue to diversify with clinic operations like the one in Henderson

Chair Leavitt requested the Committee speak to him regarding specifics for the agenda. He will speak with Vice Chancellor Turner to determine what areas require more information.

7. Information Only-Nevada Office of Minority Health – Dr. Tameca Ulmer, Ed.D., Program Manager for the Nevada Office of Minority Health, provided an overview of the mission and focus of the Office of Minority Health and some of its key programs, including efforts to promote cultural competency.

Dr. Ulmer highlighted key points of the Office of Minority Health:

- State-wide offices in the north and south
- Help to advance health equity
- Reduces health disparities
- Improves health outcomes
- Includes all racial and ethnic minorities in Nevada
- Builds partnerships and collaborations
- Makes sure services are being utilized and voices are being heard
- Increase access to care
- Takes the obstacles away

Dr. Ulmer is presently working on a grant received from the Federal Health and Human Services' office which is in two parts; 1) the Affordable Care Act Enrollment in Education, and 2) the Culturally and Linguistically Appropriate Services Standard (CLASS) which focuses on interacting with the health practitioner side working with nurses, doctors, front office staff.

Chair Leavitt would like to have Dr. Ulmer return in a year and give the Committee a progress update.

8. Information Only-Health Sciences System – Vice Chancellor Turner provided an update on Health Sciences System activities and initiatives since the last meeting of the Committee, including an update on the TMCC and WNC Career Connect programs, and the TMCC and CSN Community Health Worker Pilot program.

Vice Chancellor Turner provided an update on the progress of the Community Health Worker Pilot Program, complimenting TMCC and CSN for their efforts in designing and deploying the program. She also cited TMCC and WNC, in partnership with the Department of Education, Training and Rehabilitation (DETR) Vocational Rehabilitation Services and NSHE Disability Resources Centers, for their efforts in creating programs for students.

Vice Chancellor Turner recognized the contributors at CSN, TMCC and WNC, feeling it was important to acknowledge those who helped make the programs happen. Chair Leavitt felt this was an example of the synergies and benefits of having institution partners. He reinforced Vice Chancellor Turner's congratulations to all those involved.

8. New Business – None.
- 9 Information Only-Public Comment – None.

The meeting adjourned at 9:07 a.m.

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