Nevada Medical Center
Business Plan
# Table of Contents

I. Dedication to Eric M. Hilton Nevada Medical Center Founder and Founding Secretary ................................................. 1

II. Executive Summary .................................................................................................................. 2

III. Situation Analysis .................................................................................................................... 6

IV. Vision, Mission and Guiding Principles ................................................................................... 7

   Vision Statement ....................................................................................................................... 7

   Mission Statement ..................................................................................................................... 7

   Guiding Principles ................................................................................................................... 7

V. Organizational Structure .......................................................................................................... 8

   NMC Officers and Board of Directors ....................................................................................... 8

   NMC Advisory Board ............................................................................................................... 8

   Leadership and Management Team .......................................................................................... 8

VI. Nevada Healthcare Sector and Market Analysis ....................................................................... 14

   Demographic Overview .......................................................................................................... 14

   Recovering and Growing Economic Base ............................................................................... 14

   The Southern Nevada Medical Economy .................................................................................. 16

      Access to Care ...................................................................................................................... 16

      Healthcare Professional and Service Supply ....................................................................... 17

      Healthcare Access Rankings ............................................................................................... 18

      Nevada Licensed Physicians ............................................................................................... 19

      Nevada Licensed Nurses ...................................................................................................... 19

      Southern Nevada Full Service Hospitals ............................................................................. 20

      Chronic Disease .................................................................................................................. 21

      Recent Developments Within the Sector ............................................................................. 22

      Current Landscape of the Medical Services Sector ............................................................. 22

VII. Goals, Strategies, and Tactics ................................................................................................. 23


   GOAL 2: Nevada Health Commission (NHC) ........................................................................ 23

   GOAL 3: Eric M. Hilton Center for Healthcare Collaboration and Innovation .................... 24

   GOAL 4: Global Science of Play Institute (GSPI) ................................................................. 25

   GOAL 5: Global Immune System Institute (GISI) ................................................................. 25

VIII. Measurement ......................................................................................................................... 26

IX. Funding & Potential Revenue Sources .................................................................................. 26

   Pro Forma ............................................................................................................................... 26

X. Summary & Conclusion ........................................................................................................... 27

   Addendum I ............................................................................................................................ 29

      NMC Advisory Board ......................................................................................................... 29
I. **Dedication to Eric M. Hilton**  
Nevada Medical Center Founder and Founding Secretary

Eric M. Hilton, a towering figure in local and national philanthropy, died at the age of 83 in 2016. Founder of the Nevada Medical Center and Secretary of its Board of Directors, Mr. Hilton imagined that new and innovative healthcare services for the state would focus on innovation, wellness, and illness prevention. He believed that his vision could be achieved by fostering greater collaboration in the healthcare community.

Mr. Hilton, the youngest son of Conrad N. Hilton, who had a 49-year career with Hilton Hotels, was elected the corporation’s vice-chair in 1993. In that position, he led the corporation’s domestic and international strategic planning and property development. Service in the U.S. Army as a radar specialist during the Korean war interrupted Mr. Hilton’s plan to attend the Cornell University Hotel School, but he was later honored for his many achievements with an Honorary Doctor of Humane Letters from the University of Houston. He also received the American Vocational Association Award of Merit.

A sense of social and community service drove Mr. Hilton. In 2006, along with other community-minded visionaries, he launched the Three Square Food Bank in Las Vegas, Nevada. In the years since, the organization has become a national model. Along with his colleague and friend, Julie Murray, he co-authored *A Place at the Table: How Focused Philanthropy and Community Collaboration Built the Three Square Food Bank*. Mr. Hilton next set his sights on a grander project of improving healthcare services, which culminated with the founding of the Nevada Medical Center.

The Nevada Medical Center Board and leadership team wish to express profound gratitude to Eric M. Hilton, the Conrad N. Hilton Foundation and the Bennett Family Foundation for their charitable investment and trust that enabled the launch of NMC.
II. Executive Summary

Introduction

As a result of the previous successful partnerships between Eric M. Hilton and Julie Murray, in 2012 Mr. Hilton asked Ms. Murray to identify key leaders in the state in order to form a Board of Directors and help launch Nevada Medical Center (NMC). The NMC was incorporated as a Nevada 501(c)(3) non-profit corporation in 2013. The NMC Officers and Board of Directors commissioned a two-year feasibility study funded by the Conrad N. Hilton Foundation. The study was conducted by one of the nation’s most respected healthcare leaders, Dr. Richard Wainerdi, former CEO and President of the Texas Medical Center. Interviews with Nevada’s healthcare, civic, business, and political leaders formed the basis for the 2014 Nevada Medical Center Feasibility Study and Report.

The Feasibility Study, published in October 2014, confirmed the importance of this project. Armed with the information from the study, the NMC Officers and Board of Directors approved the development of a Business Plan to further define the vision, mission, and operational plans. Through focused collaboration and innovation, Las Vegas and all of Nevada can and will be a healthcare change agent.

The NMC is a Nevada non-profit corporation created for the purpose of enhancing the lives of all Nevadans and visitors through improved access to quality healthcare. Despite significant dedication by healthcare professionals, community leaders, and government officials in tackling healthcare deficiencies, Nevada faces issues of high morbidity and continues to rank among the lowest states in the nation in access to affordable, quality healthcare. Fortunately, Nevada has both the resources and the will to improve its national rankings. Addressing these deficits requires meaningful focus on projects with proven transformational ability. As Eric M. Hilton envisioned, the NMC will deliver innovations healthcare services in its efforts to improve health and preventative healthcare.

The NMC will work to improve health and healthcare in Nevada by initially focusing on five core areas:

1. Nevada Healthcare Report Card/Data Portal Project. NMC has developed a collaborative, data-based report card to assess Nevada’s health outcomes and healthcare initiatives. This report card will be generated using extracted metadata records of datasets from the data portal interface. This report card focuses on areas for improvement in the state’s health system performance, including unmet healthcare needs. An expert advisory committee is assisting with identification of specific needs to be included in the NMC Nevada Healthcare Report Card. The healthcare industry has increased access and exposure to data and it is the responsibility of healthcare leaders and entities to ensure that this data is used to make data-driven decisions that positively impact the healthcare landscape. NMC will be impacting the healthcare landscape of the state of Nevada through collaborative approaches that help address Nevada’s greatest needs. The healthcare report card will also ensure that NMC can quantitatively measure and assess several healthcare system and status indicators to maximize the positive impacts of the NMC. The healthcare report card and the underlying data will be used to help advance the healthcare
priorities that guide NMC’s strategic plan so it can maximize resources and provide the greatest value to the community and the state. By providing a statewide “report card” on healthcare, NMC aims to spark more thoughtful conversation and enable better and more extensive collaboration between and among healthcare professionals and providers.

2. **Nevada Health Commission (NHC).** The NHC will bring together public and private experts and stakeholders in the Nevada healthcare system to recommend healthcare priorities for the state using the NMC data reporting site, the Nevada Healthcare Report Card and other appropriate studies. The NHC will meet at least twice each year and report its recommendations to the NMC Board and to the governing bodies, healthcare professionals, healthcare organizations, and entities in Nevada. The NHC will be a permanent forum and will bring together public and private healthcare experts and stakeholders to set priorities and evaluate initiatives that could have the greatest impact on healthcare quality and access to healthcare in Nevada.

3. **Eric M. Hilton Center for Healthcare Collaboration and Innovation.** The Eric M. Hilton Center for Healthcare Collaboration and Innovation will serve as the physical space to fulfill the priorities of the NMC. The Center will have the capacity to house and foster collaborative programs and organizations to fulfill and enhance healthcare-related needs including community spaces for interaction and innovation, such as research, public forums, policy think tanks, seminars and community outreach. It will also feature the space and innovative technology and resources necessary to support wellness programs and for continuing professional education. The Center represents the vision of NMC founder Eric M. Hilton. The Center will also house NMC projects and organizations including: The Global Science of Play Institute (GSPI), the Global Immune System Institute (GISI), the Nevada Health Commission, the Nevada Healthcare Report Card data project and office space for NMC staff and others supporting and working with the NMC.

   To ensure sustainability of the facility and the NMC, the Center will feature a number of recurring revenue opportunities to include, for example, rental income for office space, board rooms and conference space, business meetings and meals and other amenities including broadcast and research facilities. Discussions are underway for the Center to be built in the Las Vegas Medical District near the new UNLV School of Medicine and University Medical Center. The Center will provide a prominent physical structure where the best and brightest healthcare leaders in Nevada, the nation and the world can convene (in person and remotely) to improve communication, create education and training opportunities, and facilitate research and health-related innovations. The Center will encourage and provide for cutting edge wellness programs, community forums, and conferences, as well as provide a setting for collaborative discussions and education and action plans regarding healthcare policy and clinical issues.

4. **Nevada Medical Center Global Science of Play Institute (GSPI).** As part of NMC’s focus on wellness, work will continue with the world’s preeminent interpreters of and experts in the science of play to plan, develop, and implement practical applications of this historically significant and emerging research. GSPI has been joined by the Nevada non-profit Vision 2020...TODAY in the formation and funding of this institute.

   Play has been proven to be essential to cognitive, physical, social, and emotional well-being. Through the Global Science of Play Institute, NMC will help Nevada parents, healthcare providers, businesses, and communities protect and foster play from childhood through adulthood. Although
some may have been raised with the belief that play is frivolous, many studies have shown that what some have regarded as frivolous is in reality play that is physically and mentally beneficial. Play has been shown to be essential to the development of a person at all stages of life. As a result of stimulating physical and mental health, developing good social skills, fostering healthy social connections, and unleashing the joy of achievement, play contributes directly to the welfare of the individual and the community. Play is vital in the role of human development. It allows the developing mind to explore freely, problem solve, express curiosity, be engaged, and teach self-reliance. Self-initiated play nourishes imagination and creativity in children and adults alike and is as much an essential part of our being as is our instinct to survive.

Much like the physical body requires exercise and proper nutrition to maintain optimum balance, so too do humans need to exercise their play instincts to remain mentally sharp, creative, and intellectually sound. The initial play drive appears in infants as they attempt to adapt the physical world to their needs. Preschoolers begin to create playful associations between objects, and school-aged children use play to test the boundaries of physical limits, time, and rules. Adolescents demonstrate play in a variety of ways such as through sports, the arts, music, and overall identity. In adulthood, play is often viewed negatively and is deemed as simply having fun and thus a waste of time and not productive. Though play can be fun, it is also one of the three essential drives – love, play, and work – all of which contribute to the best kind of learning. Jean Piaget wrote: “Play is the answer to the question: How does anything new come about?” And, Carl Jung stated: “The oldest medicine in the universe is enchantment.” NMC, in collaboration with the experts in the science of play, will plan, develop and implement demonstration projects and action plans aimed at different populations and settings. The ultimate goal of the NMC Global Science of Play Institute is to establish pathways to bring play into the cultural consciousness of Nevadans and those who visit Nevada so that it is viewed as a public health necessity.

5. **Nevada Medical Center Global Immune System Institute (GISI).** The human immune system protects the body against disease and other potentially damaging foreign bodies. A substantial body of scientific research and healthcare professionals believe that many of the most common diseases that result in human disability or death (including cancer) are the result of a failed or impaired immune system. There are many scientists and healthcare professionals who believe that the way to prevent these diseases is to measure the status of the immune system and treat the immune system so that it remains strong and capable of protecting the body against disease. Such studies and evaluations should be part of routine physicals. They are not at the present time. One of the GISI projects will involve working with healthcare professionals and entities to provide a forum to develop and implement the physical exam of the future today. The evaluation of the immune system will be just one part of this physical exam. Additional cutting edge healthcare technology will also be part of this exam process that is made possible by the resources of the GISI.

Although some scientists and healthcare professionals are beginning to explore the important role the immune system plays in wellness and disease prevention, the immune system is generally regarded as a complex system that mainstream healthcare has not yet determined how to treat or measure. There are, however, healthcare scientists and professionals who are working, for the most part, independently, on ways to measure and treat the human immune system. It is these individuals and others whom the GISI will bring together.
The NMC will launch the GISI to convene these various experts to advance immunology research and innovation. The GISI will lead the effort to develop non-duplicative approaches to testing and improving the human immune system's ability to prevent many acute and chronic diseases.

Other Considerations

The Nevada Medical Center will continuously develop innovative projects, programs and entities as additional gaps, needs, and opportunities in the healthcare system are identified and resources are assigned.

Every Nevadan should have access to quality, affordable healthcare. The NMC is committed to better understanding our state's healthcare challenges and collaborating to find the most innovative solutions. The NMC Board and Officers are honored to move forward the vision created by Eric M. Hilton and invite you to participate in the realization of a bold, collaborative approach to healthcare.

The following pages outline NMC’s roadmap to achieving success in each of the five core areas.
III. Situational Analysis

As one reviews the data around healthcare and mortality in Nevada, the case for the Nevada Medical Center becomes clear. By encouraging collaborative conversations around our chronic healthcare issues, NMC hopes to inspire change within our system that will lead to better outcomes. By focusing on innovation in preventative healthcare, including wellness programs, immune system function, play science, and other programs, NMC plans to shift the culture increasingly toward the preventative dimension of healthcare.

Victor Fuchs, author of *Who Shall Live*, provides a startling comparison of two states, Utah and Nevada. He writes:

> In the western United States, there are two contiguous states that enjoy about the same level of income and medical care and are alike in many other respects, but their levels of health differ enormously. The inhabitants of Utah are among the healthiest individuals in the United States, while the residents of Nevada are at the opposite end of the spectrum. (Fuchs, 52)

The charts below provided by Dr. Raj Chetty, a Stanford University economist, graphically illustrate the case for the work of NMC, showing the extraordinarily high mortality rate in Nevada. In one especially striking measure, for example, African American females in Southern Nevada have the lowest life expectancy in the nation. What distinguishes Nevada from the surrounding states is the low level of preventative care options, specifically around threats to health that include smoking and abuse of alcohol and drugs, contributing to our high morbidity rates. The case for the NMC is to help change the dynamics of a culture that leads to some of the highest levels of morbidity and mortality in the nation.

![Race Adjusted Expected Age at Death for 40 Year Old Men Bottom Quartile of U.S. Income Distribution](source)

![Race Adjusted Expected Age at Death for 40 Year Old Women Bottom Quartile of U.S. Income Distribution](source)


*Note:* Lighter Colors Represent Areas with Higher Life Expectancy
IV. Vision, Mission and Guiding Principles

**Vision Statement**

To enhance the lives of all Nevadans and those who visit Nevada through improved access to and quality of affordable and innovative healthcare.

**Mission Statement**

To improve Nevada's healthcare system and the health of all Nevadans and those who visit Nevada by promoting and supporting collaboration and innovation in the medical community and by establishing performance metrics and health indicators to identify priorities and measure community success.

**Guiding Principles**

1. Individual and community health should be measured as the sum total of our mental, physical, and spiritual well-being.
2. Core elements of a healthy life include a commitment to wellness, access to qualified healthcare professionals, and a willingness to integrate professional guidance into one's lifestyle.
3. Communities that place an emphasis on health and wellness attract qualified healthcare providers and encourage a healthy lifestyle for both residents and visitors.
4. A healthy approach to life is enjoyable and fulfilling, a playful and curious mind is a healthy mind, and a healthy body results from maintaining a healthy immune system.
5. The health of a community in which its members fully live, work, and play is improved when individuals take an active role and responsibility in maintaining proper health.
6. The NMC Healthcare Report Card will stimulate collaborative conversations around priorities and targeted healthcare needs for its participants and supporters.
7. The NMC will facilitate community health collaboration at the NMC Eric M. Hilton Center for Healthcare Collaboration and Innovation and through the included NMC institutes and programs.
V. Organizational Structure

NMC Officers and Board of Directors

The NMC Officers and Board of Directors are responsible for the governance and fiscal health of the organization. They seek to collaborate with healthcare professionals and community stakeholders, pursue new healthcare opportunities, and initiate innovation in the greater medical community. The Officers and Board of Directors are committed to making a lasting impact on Nevada’s healthcare system. To do so, the Board has maintained the flexibility to expand its membership and to appoint Advisory Committees. These committees may provide oversight to the publication and promotion of the Nevada Healthcare Report Card and community conferences related to the healthcare needs of all Nevadans.

NMC Advisory Board

See Addendum I for list of Advisory Board Members

The NMC Advisory Board consists of a diverse mix of community leaders and professionals and serves to provide non-binding strategic advice to the staff of NMC. The Advisory Board does not have formal authority to govern the organization, but, rather, the Advisory Board members, individually or as a group, serve to make recommendations and/or provide key information and materials to the Board of Directors.

The Advisory Board may evaluate program performance, serve as a community advocate for NMC, gather input from relevant constituencies, provide community feedback and technical expertise, and assist staff in prioritizing activities. Members of the Advisory Board will commit to a one-year term, and may serve up to five years.

Leadership and Management Team

The Officers and Board of Directors have built a management team led by Chief Executive Officer Larry Matheis, a respected healthcare administrator and policy analyst. Julie Murray, CEO and Principal of Moonridge Group, close friend of the late Eric M. Hilton, and the founding CEO of the Three Square project, serves as NMC Strategist and Chief Operating Officer. Mr. Matheis and Ms. Murray oversee daily operations as well as development and implementation of NMC projects.

In addition, University of Nevada, Las Vegas student interns assist with program and project implementation. Finally, the professional staff at Moonridge Group provides assistance for daily operations, development of organizational infrastructure, and NMC Officer, Board and staff support. NMC has engaged two contractors to support business strategy, data development, marketing and public relations, and an external web presence.
John F. O’Reilly, Chairman of the Board

Mr. John F. O’Reilly is Chairman and Chief Executive Officer of O’Reilly Law Group, LLC (OLG). OLG and Mr. O’Reilly provide legal services in a variety of areas with a successful focus on business, real estate, litigation and personal injury matters.

Mr. O’Reilly is also a businessman with substantial experience as the Chairman/CEO and/or board member of New York Stock Exchange companies and various privately owned and nonprofit entities. In addition to serving as the Board Chairman of Nevada Medical Center, he currently serves as Chairman of the University Medical Center of Southern Nevada Governing Board, a member of the UCLA Health System Board, a member of the Community Board of Directors of Wells Fargo Bank Nevada, N.A., Past Chairman of the UNLV Foundation Board, a member of the Advisory Council of the UNLV International Gaming Institute, a member of the MGM Macau Compliance Committee, a member of the Ainsworth Game Technology Compliance Committee, and a member of the Knights of Malta.

Mr. O’Reilly is a past Chairman of the Board of NTS Development Corporation, a non-profit corporation formed to encourage economic development activities at and related to the Nevada Test Site and its affected communities. In addition, he is the Chairman/Founder of Vision 2020... TODAY, Inc., a corporation formed to initiate and participate in the planning process involved in establishing the Southern Nevada Region as the “Global Community of the 21st Century.” Under the leadership of Mr. O’Reilly, Vision 2020, in collaboration with Nevada Medical Center, is instrumental in pursuing a Global Science of Play Institute to study and communicate to the world the practices and benefits of play in public and social environments.

Mr. O’Reilly is also a past Chairman of the Board of Trustees of the Las Vegas Metro Chamber of Commerce and has been a member of or Chairman of its Government Affairs Committee for over 20 years. In addition to his extensive commitment to the Chamber of Commerce, Mr. O’Reilly has been active in various community, church, national and international business and non-profit organizations. Further, he launched the “Random Acts of Kindness Revolution” in Clark County by challenging the bar association and governmental personnel to perform gestures of goodwill toward both residents and visitors to Southern Nevada.

Gard Jameson, Board Treasurer

Dr. Gard Jameson received his undergraduate degree at Stanford University, his MBA from the University of San Francisco, and his PhD from Pacifica Graduate Institute. He spent 25 years as a certified public accountant, working for Deloitte & Touche, Laventhal & Horwath and, most recently, as the Director of Financial Planning at Piercy, Bowler, Taylor & Kern. He is the author of three volumes, Phaethon, epic of the West, and Monkey, epic of China, and Ramayana, epic of India. He teaches Chinese and Indian Philosophy at the University of Nevada, Las Vegas. He is a founding board member and trustee emeritus of the Nevada Community Foundation, a founding board member and chair of...
the Children's Advocacy Alliance, treasurer of Volunteers in Medicine of Southern Nevada, chair of the Interfaith Council of Southern Nevada, board member at The Stillpoint Center for Spiritual Development, The Raymond M. Alf Museum of Life, and The Stanford Center on Longevity. The Jameson family was the recipient of the 2017 Eric M. Hilton Philanthropy Award.

Florence Jameson, MD, Board Member

Dr. Florence Jameson has spent her life dedicated to family, healthcare and community. She attended the UCLA School of Medicine, where she earned her medical degree, and Cedars-Sinai Medical Center, where she did her residency in obstetrics and gynecology. She is a fellow of the American College of Obstetrics and Gynecology.

In 1985, she opened her private practice in Las Vegas and has been a solo practitioner for the past 27 years. She is an advocate for patients, physicians, and community health, having served as a member of the Clark County Medical Society for 27 years and as its past president. She serves as the delegate for the Nevada State Medical Society to the American Medical Association. Her love for patients and medicine has inspired her to strive for quality healthcare for all Nevadans regardless of their economic situation.

Dr. Jameson is founder and CEO of Volunteers in Medicine of Southern Nevada (VMSN), a free health clinic dedicated to providing medical services to the uninsured who would otherwise have no access to medical care. Prior to starting VMSN, she opened a clinic at the Juvenile Justice Center of Southern Nevada to care for incarcerated young girls who would otherwise have no medical care.

Dr. Jameson knows firsthand what a big difference an altruistic medical provider can make. After her father went to prison, her mother struggled to provide for herself and her family. They never went without healthcare because a local physician assured her mother that he would take care of them regardless of their ability to pay. Dr. Jameson vowed someday to “pay it forward.”

Dr. Jameson has been recognized by the community for her extraordinary accomplishments, receiving many awards and recognitions, including: the Sunrise Hospital First Humanitarian Award; the Red Cross Everyday Health Heroes Award, the Harold Lee Feikes Physician of the Year Award for Community Service; Las Vegas Woman Magazine’s Best Doctor Award as voted by fellow physicians; and the Innovator Award by Nevada Business Magazine for Healthcare Heroes.

Cynthia Kiser Murphey, Board Member

Mrs. Cynthia Kiser Murphey is President and Chief Operating Officer for New York-New York, a 2,024-room resort pairing the singular style of New York City with the unique energy of the Las Vegas Strip. In this role, Murphey has been honored to be a part of this exciting, inclusive, “come as you are” property.

Previously, Murphey served as Senior Vice President of Human Resources for MGM Resorts International and was a guiding force in the development of the company’s comprehensive wellness and disease
prevention program. She also played a major role in the negotiation of labor agreements, including the fostering of joint labor management cooperative relationships, and the implementation of diversity initiatives and culture-building programs. Additionally, Murphey served on the Human Resources opening teams for The Mirage in 1989 and MGM Grand in 1993. Murphey proved instrumental in the creation of an in-house corporate university, on-site child development center, and an unmatched benefits package. Murphey is involved in a number of charitable and professional organizations. She currently supports the community by serving as a Trustee for the Hotel Employees and Restaurant Employees International Union Health and Welfare Fund as well as a member of the Healthcare Reform Policy Council. She also proudly serves on the Host Committee for Cirque du Soleil’s One Night for ONE DROP and is the Executive Sponsor for the MGM Resorts Veteran’s Employee Network Group and St. Baldrick’s Foundation. Previously she served as Chairperson for the State of Nevada Academy of Health and on the State of Nevada Governor’s Commission on Medical Education, Research and Training, and Co-Chair for the Health Services Coalition of Southern Nevada. Murphey earned bachelor and master degrees in Hotel Administration from the University of Nevada, Las Vegas, where she has served on the faculty as a part-time professor. She was named UNLV’s “Alumna of the Year” in 2008.

Richard Bryan, Board Member

Former U.S. Senator Richard Bryan focuses his law practice on government relations at the federal, state and local levels, particularly in the area of public land use issues.

Senator Bryan began his legal career in 1964 as a Deputy District Attorney in Clark County, Nevada. Two years later, he was named Clark County’s first Public Defender. Senator Bryan was elected to the Nevada State Assembly in 1968 and re-elected in 1970. He was elected to the State Senate in 1972 and re-elected in 1976. The former prosecutor won his first statewide election as Nevada’s Attorney General, where he played a major role in successfully defending Nevada’s gaming regulatory structure in the federal courts.

In 1982, Senator Bryan was elected to his first of two terms as the Governor of Nevada. Under his leadership as Governor, economic diversification and the attraction of new businesses to Nevada became a priority. In 1988, he was elected to the first of two terms in the U.S. Senate. Senator Bryan was the only Senate member to simultaneously serve on the following U.S. Senate Committees: Finance; Commerce, Science and Transportation; and Banking, Housing and Urban Affairs.
John Miller, Board Member

Mr. John Miller is a Las Vegas native and investment professional, entrepreneur, and consultant to the community banking industry for the last 17 years. Mr. Miller started investment and consulting in the banking and insurance industries with PWH Trust managing a community bank and insurance portfolio for 11 years and growing assets to over $500 million. Mr. Miller was a founding investor and board member of Texas de Novo's Professional Bank and Pioneer Bank, both in Texas. Professional Bank in Dallas sold in 2008, and Pioneer Bank in Austin, where Mr. Miller still serves as a board member, turned 10 years old in May. Pioneer has grown to $1.2 billion through several mergers and organic growth. In California, Mr. Miller served as a board member for Mojave Desert Bank, and still serves on the board of Mission Valley Bancorp in Sun Valley, California. In Utah, Mr. Miller served as a board member for Proficio Bank in Salt Lake City, acting as president of the bank mortgage company. Mr. Miller is a graduate of The University of Notre Dame and a co-founder of Cast Wines in Sonoma county's Dry Creek Valley.

In Nevada Mr. Miller comes home to a full house with his wife, Jaclyn Miller, and four children, Regan 11, Ignatius 9, Xavier 6, and Maverick 2. Mr. Miller is an active minister at St. Viator Catholic Church, Cub Master for Boy Scout Pack 143, and coaches youth soccer for Southern Nevada Soccer Association.

Larry Matheis, NMC Chief Executive Officer

Mr. Larry Matheis served as Executive Director of the Nevada State Medical Association from 1988 to 2013. Mr. Matheis had served previously as the Nevada State Health Administrator responsible for the operations of the Nevada State Health Division (now the Nevada State Public and Behavioral Health Division) from 1986 to 1988. From its creation in 1981, Mr. Matheis served as Executive Director of the non-profit Clark County Coalition Health Systems Agency until he received the appointment to the State Health Division. He was a columnist on senior issues in the Las Vegas Review-Journal for three years and has been a frequent commentator on television and radio programs dealing with healthcare and political issues. He has served on numerous healthcare community, state, and national committees, coalitions and boards and has presented professional papers at dozens of national and state conferences. He serves on the Executive Committee of the Nevada Action Coalition, representing the NMC as the non-nursing partner to a non-profit coalition funded by the Robert Wood Johnson Foundation and the AARP Foundation to implement the Institute of Medicine's Future of Nursing report. He serves as Co-Chair of the Nevada Partnership to Fight Chronic Disease. Mr. Matheis received a “2011 Healthcare Heroes Award for Lifetime Achievement” from the Las Vegas Business Press. In 2014, he received the first Lifetime Achievement Award from the Nevada Public Health Association.
Julie Murray, NMC Chief Operating Officer

Ms. Julie Murray is one of Nevada’s foremost social entrepreneurs, having co-founded the Three Square Food Bank with Eric M. Hilton, co-founded the Las Vegas “I Have a Dream” Foundation, and served on the leadership team to build the Andre Agassi College Preparatory Academy, all which have been designated as national model projects. Ms. Murray has dedicated her life to the practice of using philanthropy strategically and collaboratively in public/private partnerships to create change. She is the founder of Moonridge Group, a consulting firm working with philanthropists locally and globally. Ms. Murray was the co-author with Eric M. Hilton of *A Place at the Table*, and various articles about strategic philanthropy. Ms. Murray serves as Board Chair of The Moonridge Foundation, Board Secretary of the Transforming Youth Recovery Board, and serves on the boards of directors of Catholic Charities, First Friday Foundation and Noah’s Animal House; and as an Emeritus Board member of the University of Nevada, Reno Board of Trustees. Ms. Murray also serves on the Community Advisory Board for the UNLV School of Medicine, and was appointed by the Las Vegas City Manager to serve on the City of Las Vegas’ Downtown Master Planning Steering Committee. Ms. Murray is a member of the Community Board of Directors of Wells Fargo Bank Nevada, and was appointed to the United States Global Leadership Coalition.

Ms. Murray received the 2010 UNLV College of Urban Affairs Alumnus of the Year Award, 2013/2014 Award for Woman of the Year, 2016 Silver State Entrepreneur Award, and the 2017 Senoras of Excellence Award. She is a frequent university lecturer and public speaker about philanthropy. Moreover, the College of Southern Nevada honored Ms. Murray with the “Julie Murray Endowed Scholarship”. Her work has been widely recognized by the media, including a profile in the Los Angeles Times Magazine and other awards and recognition including “The Most Influential Women in Nevada”, “Who’s Who of Nevada”, “Most Influential Nevadan” and Luxury Las Vegas Magazine’s “Influencer”. Ms. Murray was honored for her work in philanthropy at the 2015 JDRF Las Vegas Gala. Ms. Murray received her undergraduate and master’s degrees from UNLV and has three children, Kathleen, Joe and Riley Foley.
VI. Nevada Healthcare Sector and Market Analysis

Demographic Overview

Southern Nevada, including Las Vegas and the surrounding rural areas within Clark County, is home to more than two million people. The region accounts for nearly three-quarters of the statewide population. Historically, Southern Nevada has ranked among the fastest-growing regions in the nation. Its combination of employment opportunities, affordable housing, and warm climate have made it an attractive destination for new residents moving from other states. The influx of residents has supported economic growth by creating new job opportunities, increasing overall income, and generating higher demand for homes and community amenities. Although the region’s growth slowed during the Great Recession and its aftermath, the subsequent economic recovery has returned Southern Nevada to the top ranks of population and employment growth.

Recovering and Growing Economic Base

For the past three years, job growth in Southern Nevada has consistently outpaced national levels. Strong job growth has created 160,200 jobs since the employment low point in early 2011, and total employment in Southern Nevada has already returned to pre-recession levels in 2016. Beyond that
timeframe, the Nevada Department of Employment, Training and Rehabilitation conservatively projects the region to add about 100,000 new jobs by 2024.

Current projections by the Nevada State Demographer estimate that the Clark County population will grow by nearly 360,000 over the next 15 years. That growth alone will generate higher demand for healthcare services throughout the region, but an examination of demographic trends indicate a shift toward an older population that requires an additional level of healthcare services.

### Southern Nevada Economic Indicators (Peak to Present)

<table>
<thead>
<tr>
<th>Southern Nevada</th>
<th>Peak</th>
<th>Present</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Nonfarm Employment</strong></td>
<td>Jan-17 957,500</td>
<td>Jan-17 957,500</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>Unemployment Rate</strong></td>
<td>Dec-98 3.4%</td>
<td>Jan-17 5.1%</td>
<td>-1.7%</td>
</tr>
<tr>
<td><strong>Average Weekly Wages - Private</strong></td>
<td>Q3 16 $921</td>
<td>Q3 16 $921</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>Private Establishments</strong></td>
<td>Q2 16 55,496</td>
<td>Q2 16 55,496</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>Taxable Retail Sales (Billions)</strong></td>
<td>Dec-16 $39.93</td>
<td>Dec-16 $39.93</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>Visitor Volume (Millions)</strong></td>
<td>Jan-17 46.2</td>
<td>Jan-17 46.23</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>Gross Casino Gaming Revenue (Billions)</strong></td>
<td>Oct-07 $10.9</td>
<td>Jan-17 $9.3</td>
<td>-14.7%</td>
</tr>
<tr>
<td><strong>McCarran International Airport Passengers (Millions)</strong></td>
<td>Oct-07 48.0</td>
<td>Feb-17 47.6</td>
<td>-0.8%</td>
</tr>
<tr>
<td><strong>Existing Home Median Closing Price</strong></td>
<td>Oct-06 $290,000</td>
<td>Feb-17 $207,000</td>
<td>-28.6%</td>
</tr>
<tr>
<td><strong>New Home Median Closing Price</strong></td>
<td>Aug-07 $343,937</td>
<td>Feb-17 $329,992</td>
<td>-4.1%</td>
</tr>
</tbody>
</table>

*Values reflect trailing 12-month totals

### Southern Nevada Economic Indicators (Year Over Year)

<table>
<thead>
<tr>
<th>Southern Nevada</th>
<th>Previous Year</th>
<th>Present</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Nonfarm Employment</strong></td>
<td>Jan-16 926,100</td>
<td>Jan-17 957,500</td>
<td>3.4%</td>
</tr>
<tr>
<td><strong>Unemployment Rate</strong></td>
<td>Jan-16 6.5%</td>
<td>Jan-17 5.1%</td>
<td>-1.4%</td>
</tr>
<tr>
<td><strong>Average Weekly Wages - Private</strong></td>
<td>Q3 15 $815</td>
<td>Q3 16 $921</td>
<td>13.0%</td>
</tr>
<tr>
<td><strong>Private Establishments</strong></td>
<td>Q2 15 53,145</td>
<td>Q2 16 55,496</td>
<td>4.4%</td>
</tr>
<tr>
<td><strong>Taxable Retail Sales (Billions)</strong></td>
<td>Dec-15 $39.86</td>
<td>Dec-16 $39.93</td>
<td>0.2%</td>
</tr>
<tr>
<td><strong>Visitor Volume (Millions)</strong></td>
<td>Jan-16 46.2</td>
<td>Jan-17 46.23</td>
<td>0.1%</td>
</tr>
<tr>
<td><strong>Gross Casino Gaming Revenue (Billions)</strong></td>
<td>Jan-16 $9.7</td>
<td>Jan-17 $9.3</td>
<td>-4.2%</td>
</tr>
<tr>
<td><strong>McCarran International Airport Passengers (Millions)</strong></td>
<td>Feb-16 47.6</td>
<td>Feb-17 47.6</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>Existing Home Median Closing Price</strong></td>
<td>Feb-16 $201,000</td>
<td>Feb-17 $207,000</td>
<td>3.0%</td>
</tr>
<tr>
<td><strong>New Home Median Closing Price</strong></td>
<td>Feb-16 $333,705</td>
<td>Feb-17 $329,992</td>
<td>-1.1%</td>
</tr>
</tbody>
</table>

*Values reflect trailing 12-month totals
The Southern Nevada Medical Economy

Access to Care

Across the nation, healthcare is in growing demand as the population ages and Baby Boomers enter later stages of life that require more frequent and more intensive healthcare services. Along with the generational aging trend, Southern Nevada remains an attractive retirement destination. These two factors are reflected in the rising enrollment in Medicare, the federal health insurance program for people aged 65 and older. Between 2008 and 2015, the number of Medicare beneficiaries in Clark County increased by a third, adding nearly 70,000 new beneficiaries. This number will continue to climb over the next 15 years, as a full half of Clark County’s projected population growth is attributed to residents aged 65 and older.

An additional factor in the rising demand for healthcare services in Southern Nevada is the shrinking number of residents without health insurance. More people finding work has played a role in that trend, but the most significant impact was created by implementation of the Affordable Care Act in 2014, which required most Americans to obtain health insurance coverage. The number of people on Medicaid has more than doubled since 2013 and more than 70,000 Nevada residents have obtained health insurance through the state’s insurance marketplace. Greater health insurance coverage, whether through Medicaid or private insurance, generates greater demand for healthcare services, as people are more likely to visit doctors and other healthcare professionals, particularly for preventive care, if they have insurance to help cover costs.

Although Nevada has shown an increase in the number of residents with health insurance, in Clark County, only 75.3 percent of adults between the ages of 18 and 64 and 88.9 percent of children 6 and under had any type of health insurance in 2015, falling short of the Healthy People 2020 target of 100%

<table>
<thead>
<tr>
<th>Nevada Ranks For Leading Causes of Death (2013)</th>
<th>Nevada Rate*</th>
<th>U.S. Rate*</th>
<th>Nevada Rank*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Disease</td>
<td>195.1</td>
<td>169.8</td>
<td>9th</td>
</tr>
<tr>
<td>Cancer</td>
<td>164.7</td>
<td>163.2</td>
<td>24th</td>
</tr>
<tr>
<td>Chronic Lower Respiratory Diseases</td>
<td>54.1</td>
<td>42.1</td>
<td>9th</td>
</tr>
<tr>
<td>Stroke</td>
<td>33.3</td>
<td>36.2</td>
<td>37th</td>
</tr>
<tr>
<td>Influenza/Pneumonia</td>
<td>18.6</td>
<td>15.9</td>
<td>11th (tie)</td>
</tr>
<tr>
<td>Suicide</td>
<td>18.6</td>
<td>12.6</td>
<td>8th</td>
</tr>
<tr>
<td>Alzheimer’s Disease</td>
<td>18.4</td>
<td>23.5</td>
<td>41st</td>
</tr>
<tr>
<td>Diabetes</td>
<td>14.8</td>
<td>21.2</td>
<td>47th</td>
</tr>
<tr>
<td>Kidney Disease</td>
<td>13.3</td>
<td>13.2</td>
<td>26th</td>
</tr>
</tbody>
</table>

*Deaths per 100,000, age-adjusted; Rankings from highest to lowest
Source: Centers for Disease Control and Prevention
percent, and ranking Clark County in the bottom quartile of all U.S. counties. Insurance coverage was especially low among the Hispanic/Latino populations. The relative health of Nevada residents also plays a role in demand for healthcare. The state ranks above the national average among six leading causes of death, including heart disease, chronic lower respiratory diseases such as bronchitis and emphysema, influenza/pneumonia, and suicide.

**Healthcare Professional and Service Supply**

Employment within the Southern Nevada healthcare industry has generally grown along with the community and other industries. However, the healthcare industry proved to be more resilient than most other sectors during the Great Recession and subsequent years of economic downturn that suppressed employment throughout the region. Between 2007 and 2014, private employment excluding healthcare in Southern Nevada fell by about 58,000 jobs, a 7.4 percent decline. By contrast, the healthcare industry grew by 11,500 jobs, a 23.8 percent rise during the same timeframe. No other industry added as many jobs during that period, with the closest being the leisure and hospitality industry’s addition of 5,500 jobs. During the economic downturn, the healthcare industry grew its share of total private employment in Clark County from 5.7 percent to 7.6 percent. Yet even with that progress, the healthcare employment share in Southern Nevada remains well behind the national average of 13.4 percent.

Despite making progress, healthcare employment in the region remains at just 65 percent of the national average. This shortfall is apparent in Nevada’s per-capita rankings for various medical professionals. The state ranks 47th in active physicians, 49th in active patient care physicians, last in medical students, and last in registered nurses.

While the number of healthcare jobs has increased, it has not been enough to meet the demands of a fast-growing population. The University of Nevada, Reno School of Medicine saw that a common feature of licensure trends over the past decade has been substantial growth in the number of licensees for most health professions, yet modest, if little, growth in the number of licensed health professionals per capita. For example, from 2004 to 2014, the number of licensed allopathic physicians (MDs) grew by
1,258, or 34.8 percent. However, the number of licensed MDs per 100,000 residents increased by only 14.9 percent during the same period due to steady population growth.

In Nevada, it is abundantly clear that the health workforce supply falls well short of what is needed to ensure access to basic primary, preventive and specialty services. These deficits will be compounded by an aging healthcare workforce and new demands for medical services generated by population growth, population aging and insurance coverage expansions.

While these figures illustrate the healthcare system's shortcomings in the state and region, they also represent opportunities to improve the availability and quality of healthcare services while strengthening the regional and state economies. The Governor's Office of Economic Development has identified the healthcare industry as an area of opportunity under the state's economic diversification plan and will

### Healthcare Access Rankings

<table>
<thead>
<tr>
<th>Measure</th>
<th>Nevada</th>
<th>US Average</th>
<th>State Ranking</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of primary-care physicians</td>
<td>2,810</td>
<td>-</td>
<td>35</td>
<td>2016</td>
</tr>
<tr>
<td>Number of physicians in any medical specialty</td>
<td>2,858</td>
<td>-</td>
<td>36</td>
<td>2016</td>
</tr>
<tr>
<td>Proportion of residents who were uninsured</td>
<td>11.0%</td>
<td>9.0%</td>
<td>37</td>
<td>2015</td>
</tr>
<tr>
<td>Proportion of residents reporting inability to see doctor due to cost</td>
<td>15.1%</td>
<td>13.3%</td>
<td>40</td>
<td>2015</td>
</tr>
<tr>
<td>Number of hospital beds per 1,000 persons</td>
<td>1.9</td>
<td>2.4</td>
<td>43</td>
<td>2015</td>
</tr>
<tr>
<td>Per capita mental health services expenditures</td>
<td>89.4</td>
<td>119.6</td>
<td>-</td>
<td>FY2013</td>
</tr>
</tbody>
</table>

Source: Kaiser Family Foundation

### Healthcare Employees per 1,000 Residents

- Nevada
- United States

Source: Bureau of Labor Statistics, Census Bureau
## Nevada Licensed Physicians

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Allopathic Physicians</td>
<td>3,616</td>
<td>4,062</td>
<td>4,358</td>
<td>4,590</td>
<td>4,712</td>
<td>4,874</td>
<td>1,258</td>
</tr>
<tr>
<td>Osteopathic Physicians</td>
<td>-</td>
<td>-</td>
<td>448</td>
<td>461</td>
<td>497</td>
<td>536</td>
<td>147</td>
</tr>
<tr>
<td>Physician Assistants</td>
<td>302</td>
<td>264</td>
<td>431</td>
<td>461</td>
<td>517</td>
<td>571</td>
<td>269</td>
</tr>
<tr>
<td>Osteopathic Physician Assistants</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>58</td>
<td>72</td>
<td>90</td>
<td>32</td>
</tr>
</tbody>
</table>

### Number per 100,000 Population

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Allopathic Physicians</td>
<td>150</td>
<td>154.9</td>
<td>159.1</td>
<td>170</td>
<td>171.3</td>
<td>172.3</td>
</tr>
<tr>
<td>Osteopathic Physicians</td>
<td>17.1</td>
<td>16.8</td>
<td>18.4</td>
<td>19.5</td>
<td>21</td>
<td>3.9</td>
</tr>
<tr>
<td>Physician Assistants</td>
<td>10.3</td>
<td>10.1</td>
<td>15.7</td>
<td>17.1</td>
<td>18.8</td>
<td>20.2</td>
</tr>
<tr>
<td>Osteopathic Physician Assistants</td>
<td>2.1</td>
<td>2.6</td>
<td>3.2</td>
<td>1.1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Source:** Nevada State Board of Examiners, Nevada State Demographer’s Office

## Nevada Licensed Nurses

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Nurses</td>
<td>13,972</td>
<td>16,067</td>
<td>17,456</td>
<td>19,025</td>
<td>20,214</td>
<td>21,563</td>
<td>7,591</td>
</tr>
<tr>
<td>Advanced Practitioners of Nursing</td>
<td>355</td>
<td>432</td>
<td>511</td>
<td>588</td>
<td>674</td>
<td>901</td>
<td>546</td>
</tr>
<tr>
<td>Licensed Practical Nurses</td>
<td>2,511</td>
<td>2,690</td>
<td>2,792</td>
<td>1,796</td>
<td>2,857</td>
<td>2,997</td>
<td>466</td>
</tr>
<tr>
<td>Registered Nurse Anesthetists</td>
<td>59</td>
<td>73</td>
<td>71</td>
<td>75</td>
<td>75</td>
<td>86</td>
<td>27</td>
</tr>
<tr>
<td>RNSs with EMS Certification</td>
<td>133</td>
<td>116</td>
<td>128</td>
<td>136</td>
<td>147</td>
<td>124</td>
<td>-9</td>
</tr>
<tr>
<td>Certified Nursing Assistants</td>
<td>5,646</td>
<td>5,855</td>
<td>6,065</td>
<td>6,875</td>
<td>7,223</td>
<td>7,863</td>
<td>2,217</td>
</tr>
</tbody>
</table>

### Number per 100,000 Population

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Nurses</td>
<td>579.6</td>
<td>612.5</td>
<td>637.4</td>
<td>704.5</td>
<td>734.9</td>
<td>762.3</td>
</tr>
<tr>
<td>Advanced Practitioners of Nursing</td>
<td>14.7</td>
<td>16.5</td>
<td>18.7</td>
<td>21.8</td>
<td>24.5</td>
<td>31.9</td>
</tr>
<tr>
<td>Licensed Practical Nurses</td>
<td>104.2</td>
<td>102.6</td>
<td>101.9</td>
<td>103.5</td>
<td>101.9</td>
<td>105.2</td>
</tr>
<tr>
<td>Registered Nurse Anesthetists</td>
<td>2.4</td>
<td>2.8</td>
<td>2.6</td>
<td>2.8</td>
<td>2.7</td>
<td>3</td>
</tr>
<tr>
<td>RNSs with EMS Certification</td>
<td>5.5</td>
<td>4.4</td>
<td>4.7</td>
<td>5</td>
<td>5.3</td>
<td>4.4</td>
</tr>
<tr>
<td>Certified Nursing Assistants</td>
<td>234.2</td>
<td>223.2</td>
<td>221.5</td>
<td>254.6</td>
<td>262.6</td>
<td>278</td>
</tr>
</tbody>
</table>

**Source:** Nevada State Board of Nursing, Nevada State Demographer’s Office
support business creation and growth in that industry to not only provide for a healthier community but also promote economic strength and stability through economic diversity.

Southern Nevada Full Service Hospitals

The healthcare industry in Southern Nevada has grown and evolved with the fast-growing community it serves. Today, the region is home to a comprehensive array of healthcare providers and services that span both the private and public sectors. The region includes 13 acute-care general hospitals, a wide range of ambulatory care providers, and various specialized medical care facilities.

The hospital system includes Clark County-owned University Medical Center, which is home to the region’s only Level I trauma, burn, and kidney transplant centers. Most other area hospitals are owned and operated by Valley Hospital System, Dignity Health, or Sunrise Health System. These systems have recently completed or begun expansions of several locations, including Spring Valley Hospital, St. Rose Dominican Hospital-Siena campus, MountainView Hospital, and Southern Hills Hospital. In addition, Valley Health System has opened a new facility, Henderson Hospital, and Dignity Health will open four new neighborhood hospitals in Southern Nevada by summer 2017.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Doctors</th>
<th>Staff</th>
<th>Patient Beds</th>
<th>Neo-natal</th>
<th>OB/GYN</th>
<th>Pediatrics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boulder City Hospital</td>
<td>225</td>
<td>225</td>
<td>82</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Dignity Health - St. Rose Dominican, Rose de Lima Campus</td>
<td>1300</td>
<td>780</td>
<td>110</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Dignity Health - St. Rose Dominican, Siena Campus</td>
<td>1300</td>
<td>2337</td>
<td>326</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Dignity Health - St. Rose Dominican, San Martin Campus</td>
<td>1300</td>
<td>805</td>
<td>147</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Mesa View Regional Hospital</td>
<td>18</td>
<td>194</td>
<td>25</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>MountainView Hospital</td>
<td>1200</td>
<td>1440</td>
<td>340</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Southern Hills Hospital</td>
<td>800</td>
<td>772</td>
<td>180</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Sunrise Hospital &amp; Medical Center &amp; Sunrise Children's Hospital</td>
<td>1500</td>
<td>3000</td>
<td>690</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>University Medical Center</td>
<td>1252</td>
<td>3814</td>
<td>541</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Centennial Hills Hospital</td>
<td>932</td>
<td>873</td>
<td>190</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Desert Springs Medical Center</td>
<td>1200</td>
<td>815</td>
<td>293</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Henderson Hospital</td>
<td>N/A</td>
<td>600</td>
<td>142</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Spring Valley Hospital</td>
<td>1300</td>
<td>1011</td>
<td>237</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Summerlin Medical Hospital Center</td>
<td>1500</td>
<td>1400</td>
<td>454</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Valley Hospital Medical Center</td>
<td>1122</td>
<td>1350</td>
<td>301</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Mike O’Callaghan Federal Hospital (AF/VA Hospital)</td>
<td>N/A</td>
<td>N/A</td>
<td>114</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>North Las Vegas VA Hospital</td>
<td>N/A</td>
<td>N/A</td>
<td>90</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>North Vista Hospital</td>
<td>N/A</td>
<td>N/A</td>
<td>177</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
**Chronic Disease**

In addition to access to healthcare and lack of healthcare resources, Nevada struggles with the problems and challenges of exploding numbers of residents with chronic disease.

According to the Nevada State Health Division, chronic disease is a large burden to the state. In Nevada, heart disease, stroke, cancer, diabetes and arthritis are among the most common, costly, and preventable of all health problems today. In 2011, the leading causes of chronic disease deaths in Nevada were diseases of the heart, followed by malignant neoplasms, chronic lower respiratory diseases, accidents and cerebrovascular diseases (stroke). Chronic disease is one of the biggest health issues facing the population of Nevada.

Consider these 2011 facts stated in the Nevada State Health Division’s report titled “The Burden of Chronic Disease”:

- At least 1 million adults had at least one chronic illness
- 465,121 adults were living with arthritis, which could increase activity limitations
- 228,185 adults were living with some form of cancer
- 209,661 adults were living with diabetes, which remains one of the leading causes of kidney failure, non-traumatic lower-extremity amputations and blindness in adults, aged 20-74

According to the Centers for Disease Control and Prevention, there are four modifiable health risk behaviors that can greatly influence chronic disease outcomes: physical activity, nutrition, tobacco use and alcohol consumption. The Nevada State Health Division report found these shocking statistics that are directly correlated to these health risk behaviors:

- 60.2 percent of the Nevada adult population is either obese (498,709) or overweight (726,689). Being obese or overweight increases the risk of heart disease, stroke, type-2 diabetes and certain types of cancer that can lead to death.
- 79 percent of the adult population (1,608,079) do not meet the daily recommended aerobic and strength guidelines for physical activity.
- 83 percent of the adult population (1,681,563) reported not eating 5 or more servings of fruit and vegetables per day.
- 22.9 percent of all adults are currently smokers, and in 2009, 17.0 percent of high school students smoked one or more cigarettes in the previous month.
Recent Developments Within the Sector

The need to improve healthcare in Nevada has been recognized from Las Vegas to Carson City. In 2015, Governor Brian Sandoval and the Nevada State Legislature approved funding to establish the first public medical school in Southern Nevada at the University of Nevada, Las Vegas. This new institution will be co-located with University Medical Center as anchors of the Las Vegas Medical District. The first UNLV School of Medicine class is scheduled to begin in fall 2017. Concurrently, Roseman University of Health Sciences, a private institution, recently developed a medical school at its Summerlin campus. When they open, the two new schools will join Touro University, another private college, as providers of medical education.

The Nevada Medical Center will work to enhance ongoing regional efforts and build upon the collaborative environment that has been established through the efforts of other organizations and healthcare industry leaders. The NMC’s mission complements the missions of other many organizations and state leaders, and its initiatives will build upon the progress that has already been made toward improving regional healthcare.

Current Landscape of the Medical Services Sector

Southern Nevada is home to many quality, hardworking and dedicated healthcare professionals, including some of the best medical minds in the country. However, as noted previously, the region suffers from a general shortfall in the overall availability of health and medical services.

Within this environment, two significant experiments in the coalition of medical professionals and facilities in Las Vegas and Henderson are underway. These are the Las Vegas Medical District and Union Village. The growth of the medical industry is key to Southern Nevada’s economic diversification strategy and to improving access to and quality of healthcare throughout the region.

The Las Vegas Medical District seeks to become a premier general medical education, research, and clinical care campus that will catalyze economic development and growth in the city’s economic core. Created in 2002, the Las Vegas Medical District is already home to several premier medical providers and assets. Major assets within the district include University Medical Center, Valley Hospital Medical Center, UNLV’s Shadow Lane Campus, which is home to School of Dental Medicine, and the Cleveland Clinic Lou Ruvo Center for Brain Health. In development is the newly approved UNLV School of Medicine. In total, these facilities provide 860 beds and handle 39,000 inpatient visits and 144,000 outpatient visits every year.

Located in Henderson in another growing part of the Las Vegas Valley, Union Village will be the first integrated health village in the world. It is the largest healthcare binding project in the world and will offer a hospital complex and health center, residential, entertainment and specialty retail space, a vibrant senior retirement community, and a civic and cultural arts center integrated into a master-planned community. Henderson Hospital, which is part of Valley Hospital System, opened in late 2016 as Union Village’s first anchor facility.
VII. Goals, Strategies, and Tactics


Strategy
Develop a healthcare data portal, database and Nevada Healthcare Report Card to define and measure community healthcare needs through data collection and analysis, and proceed with collaborative solutions.

Tactics
1. Execute a web-based data portal to serve as a benchmark for assessment of healthcare needs in Nevada
2. Collaborate with other entities in the community to build action plans to improve healthcare in Nevada
3. Create effective programs and services using multiple data indices to serve the populations in greatest need
4. Analyze healthcare data to determine gaps in the Nevada healthcare system and identify priorities towards bridging the gaps
5. Establish performance metrics through the Nevada Healthcare Report Card to identify priority projects for collaboration
6. Issue an annual Nevada Healthcare Report Card in both digital and printed form
GOAL 2: Nevada Health Commission (NHC)

Strategy
Create a forum for healthcare experts to provide recommendations to the State of Nevada utilizing the Nevada Healthcare Report Card data and other indices

Tactics
1. Engage a diverse group of experts to serve on the NHC
2. Establish guidelines that will govern the work of the commission
3. Convene meetings to address the most pressing healthcare needs of the state
4. Track progress of the work to address the challenges
5. Disseminate results

GOAL 3: Eric M. Hilton Center for Healthcare Collaboration and Innovation

Strategy
Create a center to foster wellness, collaboration and innovation within the healthcare community

Tactics
1. In concert with healthcare and community leaders, identify the projects and components that will comprise the facility
2. Collaborate with healthcare providers and other community leaders to identify revenue opportunities to ensure sustainability of the facility
3. Attempt to secure a strategic location within the Las Vegas Medical District
4. Develop a conference series to facilitate innovative and preventative measures of healthcare
5. Provide space for all present and future NMC programs and entities
6. Launch a capital campaign to generate the funds necessary to construct the center
7. Develop further the existing relationships with University Medical Center and UNLV and work with them to lease the facility to those with whom significant innovations in healthcare can be beneficial
8. Sustain the facility by developing a number of recurring revenue opportunities including, but not limited to, rental income for office space, board rooms and conference space, and other amenities
GOAL 4: Global Science of Play Institute (GSPI)

Strategy
Establish a Global Science of Play Institute in Las Vegas to bring the benefits of play into the consciousness of all Nevadans

Become a forum for collaboration relating to the science of play

Tactics
1. Develop and implement demonstration projects, training, research, and programs relating to the physical and mental benefits of play for individuals, corporations, and educational institutions
2. Work with the GSPI Advisory Committee to aide in the development and execution of the science of play institute
3. Develop a lecture series on the science of play to conduct conferences for healthcare providers and the general public
4. Collaborate with corporations to establish employee onboarding and professional development on the benefits of play on increased work productivity and engagement
5. Host a national conference to bring leading play scientists together from around the globe to conceptualize and further define the essence of play in healthy brain development

GOAL 5: Global Immune System Institute (GISI)

Strategy
Establish a Global Immune System Institute as a forum for leading experts to explore the vital role the immune system plays in overall health and wellness to advance research and innovation towards improved immunity

Tactics
1. Work with healthcare professionals and other entities to provide a forum to develop and implement the physical exam of the future today
2. Develop community conferences and healthcare forums with initial focus on the immune system to educate the community on the importance and role of a healthy immune system
3. Utilize the NMC Healthcare Report Card to identify which predominant healthcare issues relate to immunity in Nevada
4. Establish GISI as a separate non-profit entity
VIII. Measurement

The NMC places a high priority on the measurement, tracking, and reporting of its goals. The NMC non-profit organization will operate with the strategy and efficiency of a for-profit company. A dashboard has been established based on the goals outlined in this plan, and progress is being tracked and reported to the Board and public. By measuring and evaluating the impact of NMC’s priority goals, NMC can ensure support.

Furthermore, the Board consists of experienced healthcare, business and civic leaders, under which several advisory committees exist to provide input and support. These leaders require a focus on measurement and assessment, and the NMC’s experienced staff is well-prepared to deliver. NMC will consider its efforts a success when identified gaps in healthcare needs are identified and reduced. The measurement and reporting of NMC’s progress will be conducted with transparency to its donors and the public.

IX. Funding & Potential Revenue Sources

The Conrad N. Hilton Foundation provided an initial gift of $325,000 to conduct the feasibility study and launch the NMC. The NMC’s current operations are funded by a $1 million contribution from the Conrad N. Hilton Foundation and $1 million from the Bennett Family Foundation. An additional $1 million contribution from the Conrad N. Hilton Foundation is pending the sourcing of $2 million in matching donations. To raise those matching funds, the NMC intends to generate 70 percent from several individual donors, 20 percent from foundations, and 10 percent from corporations.

Pro Forma

In order to sustain its operations, the NMC will secure funding capable of covering its administrative expenses and program costs. To do so, the NMC will pursue a portfolio of diversified funding streams to ensure a steady and predictable pool of resources. This portfolio may include philanthropic efforts, such as gifts, donations, revenue from organizing events and conferences, membership dues, self-generated office rental revenue, and annual contributions through partnerships with state and local public entities. There are preliminary discussions by the Officers and Board of Directors regarding the development of the Eric M. Hilton Center for Healthcare Collaboration and Innovation. Expenses in Year 2 and Year 3 of the Conrad N. Hilton Foundation grant may be amended to reflect potential expenses not to exceed $200,000 per annum. To ensure the success of the NMC, funding will be secured through private donors, grants, and capital campaign initiatives. A database of funding opportunities has been created that includes a diverse mix of revenue sources.
A focused effort is being utilized in the developmental years of the project to ensure the income streams will sustain the project. Given that 71 percent of donations to U.S. non-profits come from individual donors, the emphasis has been placed on this important category. Simultaneously, a strategic approach will be utilized for grant requests to key U.S. foundations focused on healthcare. Public/private partnerships are also an important part of the NMC culture. As such, funding opportunities have been identified from city, county, state, and federal entities. However, one of the most important parts of the financial sustainability of the project is the implementation of recurring revenue streams including rental income, conference fees, lecture fees and other income generating opportunities.

X. Summary & Conclusion

The Nevada Medical Center (NMC) has been and is operating with a clear intention and realistic expectation of being a beneficial resource for the healthcare needs of all Nevadans and those who visit Nevada. In concert with all those who are already providing quality service within our healthcare sector, NMC will strive to further advance a culture of prevention and a focus on wellness. Through collaboration and innovation, and the support of those who believe in and support the NMC commitments to healthcare, the NMC will be a change agent that opens a dynamic space with cooperative dialogue and behaviors that will lead to creative healthcare innovation and outcomes.

NMC believes the strength of the Healthcare Report Card will inspire thoughtful and moving conversation pertaining to the healthcare needs of Nevadans amongst many different healthcare partners both within and outside our community. NMC will provide quality data in a neutral, friendly, and proactive space, and, by doing so, will impart a great service to the entire healthcare sector.

NMC believes that by focusing upon the area of play and leisure science, NMC will bring benefit to people within and beyond our community. NMC partnerships with play-related industries and others provide the kind of research and educational based understandings that lead to better educational outcomes for all grade levels as well as better health and longevity results. NMC, by working with UNLV Medical, Dental, Nursing and other schools, the Southern Nevada Health District, and other healthcare partners, will demonstrate these outcomes with evidence-based best practices. Play Vegas will soon, as a result of the work of NMC and its partners, begin to take on a new meaning with the insightful realization that pure play is healthy.

NMC believes that by giving even greater attention to and understanding of the role of the immune system in our understanding of healthcare, people will begin to shift their focus from reactive patterns of healthcare to proactive, preventative steps in healthcare. The immune system provides a new frontier of healthcare exploration that deserves greater attention. This is particularly true as the NMC explores the ability and opportunity to measure the health of an individual’s immune system and the positive results of a proactive focus on immune system health. The physical exam of the future will be developed by the NMC in concert with healthcare providers and researchers from Nevada and elsewhere in the world of healthcare. NMC will be a significant part of the innovations and progress that will lead healthcare to the
realization and standard of care that will be guided by the belief that the best way to prevent immune deficiency disorders such as cancer is to prevent them by keeping the immune system strong.

NMC believes that the NMC Eric M. Hilton Center for Healthcare Collaboration and Innovation will become a preeminent space designed to: (1) show the efficacy of wellness programs; (2) provide for and enhance collaboration by, between and among health care providers, innovators and researchers from within Nevada and beyond; and, (3) focus on innovative programs to enhance the health of the mind, body and spirit of every individual. Emphasis on areas of opportunity such as the immune system and the power of play and leisure in learning and recreational environments will demonstrate these three points. The demographics of Nevada will enable this Center to be a model demonstration point for these and other programs that will be shared on site and with others remotely. Most importantly, the NMC Eric M. Hilton Center for Healthcare Collaboration and Innovation will show what can happen when a community engages in thoughtful dialogue around its healthcare issues. As the Situational Analysis in this plan sets forth, Nevada and Nevada's healthcare partners have some work to do to bring the State back into alignment with better healthcare outcomes. We know that in Nevada change can happen swiftly when a collaborative spirit emerges. Nevadans have a "can do" attitude. The need to reduce as much as possible our siloed approach to healthcare and to create a more collaborative spirit between all healthcare providers for the benefit of all Nevadans is a need that will be fulfilled, at least in part, by the NMC at and through the Eric M. Hilton Center for Collaboration and Innovation.

The Nevada Medical Center knows this can be done, must be done and will be done. Nevada has a realistic opportunity to play a vital role in changing the world of healthcare.
Addendum I

NMC Advisory Board

1. Gary Ackerman, President, Gaudin Automotive Group; Founder, UNLV Ackerman Center for Autism and Neurodevelopment Solutions
2. Andrew Baca, Corporate Director of Innovation Technology & Strategy, Caesars Entertainment
3. Dr. Anthony Carter, Retired Pediatrician and UMC Chief of Staff
4. Charlene Carter, Tourism, Altour Las Vegas
5. Jeff Civillico, Comedian, Caesars Entertainment; Founder and Chairman of Win-Win Entertainment
6. Kirk Clausen, President, Wells Fargo/Nevada
7. Hans Dorweiler, Retired Gaming Executive
8. Clarence Dunagan IV, M.C. FACEP, Medical Director Emergency Services, Chief of Staff, Mountain View Hospital
9. Dr. Mary Guinan, Professor Emerita, UNLV School of Community Health Sciences; Author
10. Buffie Kerestesi, Philanthropist
11. Tom Kerestesi, Cragin & Pike
12. Howard Lefkowitz, Founder and CEO, One Degree World
13. Terry Murphy, President, Strategic Solutions
14. John Pelletier, Captain, Las Vegas Metropolitan Police Department
15. Rossi Ralenkotter, President & CEO, Las Vegas Convention and Visitors Authority
16. Dr. Neal Rosenberg, Dean, Nevada State College School of Nursing
17. Bruce Spotleson, Director of Corporate Partnership, Vegas PBS
18. John Tippins, Founder & CEO, Northcap
19. Marcia Turner, Chief Administrative Officer, UMC
20. Dr. Robert Ulmer, Dean, UNLV Greenspun College of Urban Affairs
21. Dr. Anne Weisman, Director of Wellness & Integrative Medicine, UNLV School of Medicine
22. Lynn F. Wiesner, Big Dog’s Hospitality Group