

## MINUTES

### SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

January 20, 2026 – 2:30 p.m.

Meeting was conducted In-person and via Microsoft Teams

**Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107**  
**Red Rock Trail Rooms A and B**

#### **MEMBERS PRESENT:**

Donna Feliz-Barrows, Chair  
Jasmine Coca, First Vice Chair  
Sara Hunt, Second Vice Chair  
Rebeca Aceves  
Erin Breen  
Ashley Brown  
Jose L. Melendrez  
David Neldberg  
Father Rafael Pereira

#### **ABSENT:**

Marie Dukes  
Blanca Macias-Villa

#### **ALSO PRESENT**

Dawn Gentsch, Program Consultant, Nevada Primary Care Association,  
Donna Laffey

#### **LEGAL COUNSEL:**

Edward Wynder, Associate General Counsel

#### **CHIEF EXECUTIVE OFFICER:**

Randy Smith

#### **STAFF:**

Emily Anelli, Chelle Alfaro, Tonia Atencio, Tawana Bellamy, Robin Carter, Andria Cordovez Mulet, Ferron DelaCruz, Liliana Dominguez, Jose Garcia-Jorge, Sarah Humphreys, Raychel Holbert, David Kahananui, Josie Llorico, Cassius Lockett, Jennifer Loysaga, Mariel Marcos, Bernadette Meily, Jacquelin Merino, Ronaliz Ordona, Kyle Parkson, Luann Province, Yin Jie Qin, Wei Ren, Emma Rodriguez, Felicia Sgovio, Ronny Soy, Justin Tully, Donnie (DJ) Whitaker, Rosanna Woods, Merylyn Yegon

#### **I. CALL TO ORDER and ROLL CALL**

The Southern Nevada Community Health Center (SNCHC) Governing Board Meeting was called to order at 2:30 p.m. Ms. Tawana Bellamy, Senior Administrative Specialist, administered the roll call and confirmed a quorum.

#### **II. PLEDGE OF ALLEGIANCE**

### III. OATH OF OFFICE

Ms. Bellamy administered the Members' Oath of Office to Member Father Rafael.

### IV. RECOGNITION

1. **Southern Nevada Health District – Manager of the Year 2025**
  - Bernie Meily
2. **Southern Nevada Health District – Employee of the Year 2025**
  - Sarah Humphreys
3. **Southern Nevada Health District – Employee of the Month – January 2026**
  - Rona Ordona
4. **Southern Nevada Community Health Center's Employee Engagement Committee**
  - Christopher Cooper, Ferron DelaCruz, Liliana Dominguez, Jina Fernandez, Jose Garcia-Jorge, Jennifer Loysaga, Mariel Marcos
5. **Las Vegas TGA Part A HIV/AIDS Program – Clark County – Certificate of Quality Improvement Leadership**
  - Ronny Soy and Brennen O'Toole

*Member Aceves joined the meeting at 2:36 p.m.*

The Governing Board recognized all award recipients. Ms. Bellamy presented excerpts from their nominations and acknowledgments for the official record. On behalf of the SNCHC Governing Board, the Chair extended congratulations to each of the honorees.

### V. FIRST PUBLIC COMMENT: A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to five (5) minutes per speaker. Please clearly state your name and address and spell your last name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

Seeing no public comment was presented online or in person, the Chair closed the First Public Comment period.

### VI. ADOPTION OF THE JANUARY 20, 2026 MEETING AGENDA *(for possible action)*

The Chair called for questions or comments on the agenda. There were none.

*A motion was made by Father Rafael, seconded by Member Coca, and carried unanimously to approve the January 20, 2026 meeting agenda, as presented.*

### VII. CONSENT AGENDA: Items for action to be considered by the Southern Nevada Community Health Center Governing Board which may be enacted by one motion. Any item may be discussed

separately per Board Member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.

- 1. APPROVE MINUTES – SNCHC GOVERNING BOARD MEETING:** December 9, 2025 (for possible action)
- 2. Approve Revisions to the Behavioral Health Crisis Event and Security Communication Policy;** *direct staff accordingly or take other action as deemed necessary (for possible action)*
- 3. Approve Revisions to the Late Arrivals, No-Shows, and Same Day Cancellations Policy;** *direct staff accordingly or take other action as deemed necessary (for possible action)*
- 4. Approve Initial Credentialing and Privileges for Provider;** *direct staff accordingly or take other action as deemed necessary (for possible action)*
  - Rachel Pena, Clinical Pharmacist
- 5. Approve Re-Credentialing and Renewal of Privileges for Providers;** *direct staff accordingly or take other action as deemed necessary (for possible action)*
  - Josefina Ascano, APRN II
  - Rosanne Sugay, MD, MPH, AAHIVS

The Chair inquired if there were any items on the Consent Agenda that board members wanted to remove for further discussion. There were no requests.

*A motion was made by Member Melendrez, seconded by Father Rafael, and carried unanimously to approve the Consent Agenda, as presented.*

## **VIII. REPORT / DISCUSSION / ACTION**

- 1. Receive, Discuss and Accept the November 2025 Year to Date Financial Report;** *direct staff accordingly or take other action as deemed necessary (for possible action)*

Donnie (DJ) Whitaker, Chief Financial Officer, presented the November 2025 Year to Date Financial Report from July 1, 2025 through November 30, 2025 with the following key highlights:

### **Revenue**

- General Fund revenue (Charges for Services & Other) is \$16.33M compared to a budget of \$16.28M, a favorable variance of \$50K.
- Special Revenue Funds (Grants) is \$2.02M compared to a budget of \$3.18M, an unfavorable variance of \$1.16M.
- Total Revenue is \$18.35M compared to a budget of \$19.46M, an unfavorable variance of \$1.11M.

### **Expenses**

- Salary, Tax, and Benefits is \$5.88M compared to a budget of \$6.91M, a favorable variance of \$1.03M.

- Other Operating Expense is \$11.91M compared to a budget of \$12.95M, a favorable variance of \$1.04M.
- Indirect Cost/Cost Allocation is \$4.36M compared to a budget of \$5.36M, a favorable variance of \$1.00M.
- Total Expense is \$22.16M compared to a budget of \$25.22M, a favorable variance of \$3.06M.

**Net Position:** is (\$3.81M) compared to a budget of (\$5.77M), a favorable variance of \$1.96M.

**All Funds/Divisions by Type - Budget to Actual**

- Quarterly write-offs were booked for accounts greater than 12 months old.
- Positive variances linked to cost savings in salaries and pharmacy supplies.
- PPS rate adjustments generated additional revenue about \$554,444.
- Pharmacy revenue is behind budget but offset by lower pharmacy expenditures.

Ms. Whitaker further advised of the following:

- Percentage of Revenues and Expenses - by Department
- Revenues by Department - Budget to Actuals
- Expenses by Department - Budget to Actuals
- Patient Encounters - By Department
  - FY2025 – 15,411
  - FY2026 – 17,716
  - 15% year-over-year growth
- Month-to-Month Comparisons - Year-to-Date revenues and expenses by department and by type.

Father Rafael commended staff, noting the excellent report and strong performance relative to the budget. Father Rafael asked for an update on billing, collections, and accounts receivable, noting that bringing billing in-house had been a significant achievement. Ms. Whitaker reported that performance remains strong. Ms. Whitaker noted that other revenue reflects WRAP from the PPS rate and credited the Revenue Cycle Manager, Donna Buss, for effectively managing this process and advancing related strategic goals.

Ms. Whitaker added that the team is actively addressing insurer denials and recovering payments, with stronger oversight than when billing was outsourced. The goal is to keep accounts within 60 days, and Ms. Buss closely monitors any exceptions. Overall, collections and reporting have improved.

Father Rafael then asked whether, in the future, the Board could receive information on projected write-offs, including amounts expected to be uncollectible. Ms. Whitaker responded that staff would provide that information at a future meeting.

The Chair called for further questions and there were none.

*A motion was made by Father Rafael, seconded by Member Coca, and carried unanimously to accept the November 2025 Year to Date Financial Report, as presented.*

**2. Receive and Discuss the Fiscal Year 2025 Final Financial Results; direct staff accordingly or take other action as deemed necessary (for possible action)**

Ms. Whitaker presented the Final Fiscal Year 2025 Financial Results, as of June 20, 2025, unaudited, with the following highlights.

**Revenue**

- General Fund revenue (Charges for Services & Other) is \$40.32M compared to a budget of \$35.50M, a favorable variance of \$4.82M.
- Special Revenue Funds (Grants) is \$6.03M compared to a budget of \$7.39M, an unfavorable variance of \$1.36M.
- Total Revenue is \$46.36M compared to a budget of \$42.89M, a favorable variance of \$3.47M.

**Expenses**

- Salary, Tax, and Benefits is \$13.75M compared to a budget of \$13.87M, a favorable variance of \$116K.
- Other Operating Expense is \$27.24M compared to a budget of \$29.18M, a favorable variance of \$1.94M.
- Indirect Cost/Cost Allocation is \$7.94M compared to a budget of \$8.43M, a favorable variance of \$489K.
- Total Expense is \$48.93M compared to a budget of \$51.48M, a favorable variance of \$2.55M.

**Net Position:** is (\$2.57M) compared to a budget of (\$8.59M), a favorable variance of \$6.02M.

Randy Smith, Chief Executive Officer, FQHC noted that the initial budget projected a loss of approximately \$13 million before two subsequent augmentations. Mr. Smith emphasized that the final financial performance was exceptionally strong, due in part to some one-time revenue occurrences. Mr. Smith highlighted that the results reflect strong financial stewardship by the leadership team, including efforts to maximize revenue and ensure the organization collected all funds owed. Mr. Smith thanked Ms. Whitaker and the team for their work.

The Chair called for further questions from the board and there were none.

**3. Receive and Discuss the Patient-Centered Medical Home (PCMH) Overview; direct staff accordingly or take other action as deemed necessary (for possible action)**

Dawn Gentsch, Consultant, Nevada Primary Care Association presented the Patient-Centered Medical Home (PCMH) Overview. Ms. Gentsch provided a brief overview of the Patient-Centered Medical Home model and Southern Nevada Community Health Center's progress toward national recognition through the National Committee for Quality Assurance (NCQA).

Ms. Gentsch explained that PCMH is a primary care delivery model focused on comprehensive, coordinated, accessible, and patient-centered care. The model aligns closely with existing FQHC requirements including UDS, OSV, FTCA, and quality improvement expectations. Approximately 80% of FQHCs nationally are recognized as PCMHs.

NCQA recognition requires meeting 39 core criteria and earning 25 elective credits, supported through documented policies, procedures, reports, and patient examples. The Health Center has already completed a gap analysis, established a work plan, and begun assembling required evidence.

*Member Breen joined the meeting at 3:16 p.m.*

Ms. Gentsch provided an overview of the projected recognition timeline.

- First NCQA Review: June 2026
- Second Review: September 2026
- Full Recognition: By end of 2026

Ms. Gentsch highlighted that the Health Center is well positioned for success and noted the benefits of PCMH recognition, including improved patient outcomes, higher satisfaction, and strong alignment with value-based care. She concluded by offering ongoing support and inviting questions from the Board.

The Chair called for questions regarding Ms. Gentsch's presentation and there were none.

### **PCMH Work Plan**

Ms. Felicia Sgovio reviewed the Health Center's PCMH work plan and progress. Ms. Sgovio reported that the plan includes all 39 core criteria and 22 selected elective criteria, totaling 34 elective credits, which exceeds the NCQA requirement. Transfer credits available through pre-validated vendors are also incorporated.

Each criterion has an assigned lead and supporting team members responsible for documentation, workflow development, and evidence preparation. A timeline column indicates whether each item is slated for Virtual Review 1 or Virtual Review 2. Completed items are shaded; active or pending tasks remain unshaded.

Ms. Sgovio reported current progress:

- 13 core criteria completed
- 10 elective criteria completed, with several more in progress.

Member Coca asked whether the organization's electronic health record systems could support the extensive data requirements. Ms. Sgovio confirmed that both ECW and Azara Population Health already contain the necessary functions and data points. As pre-validated NCQA vendors, these systems also provide transfer credits, reducing the need for additional tools or system enhancements.

Mr. Smith expressed his appreciation to Ms. Gentsch for her presentation and comprehensive overview of the PCMH model. Mr. Smith noted that Ms. Gentsch has been an invaluable resource to the organization and shared that he first met her when he began in his role. Mr. Smith stated that the PCMH journey has been significant for the Health Center and that he is enthusiastic about the progress being made. Mr. Smith added that additional updates will be provided to the Board as work continues throughout the year.

The Chair called for further questions and there were none.

**IX. BOARD REPORTS:** The Southern Nevada District Board of Health members may identify and comment on Health District related issues. Comments made by individual Board members during this portion of the agenda will not be acted upon by the Southern Nevada District Board of Health unless that subject is on the agenda and scheduled for action. *(Information Only)*

There were no reports from board members.

**X. CEO & STAFF REPORTS *(Information Only)***

- **CEO Comments**

Mr. Smith reported that the Health Center served 13,305 unique patients last calendar year who received a visit from a licensed independent practitioner, including medical and behavioral health providers. Mr. Smith noted it represents the highest patient volume in the organization's history, surpassing the previous year's record. Mr. Smith commended staff for achieving this despite operational challenges, including a hiring freeze and reduced workforce.

Mr. Smith highlighted several key program achievements:

- Same-day and walk-in access: These services continue to perform strongly and have helped mitigate no-show rates associated with traditional appointment scheduling. Expansion of this model remains a strategic focus.
- Integrated care: The team has strengthened integration between medical, behavioral health, and nutritional services, enabling patients to address multiple needs during a single visit.
- Care team capacity: Despite reduced staffing, improvements in workflow efficiency, supported by the Medical Director and site managers, have increased capacity and maintained high performance.

Mr. Smith reported the Health Center experienced a 7% increase in Medicaid patients served compared to the previous year. Although the organization fell slightly short (52 visits) of its goal for a 5% increase in Medicaid visits; it still achieved 104% of the prior year's total. Mr. Smith emphasized that lessons learned will inform continued efforts to balance payer mix, grow insured membership, and close preventive care gaps for existing patients, which aligns with PCMH principles.

Mr. Smith reported that 2026 began with uncertainties similar to 2025, including the possibility of a federal government shutdown. Both mandatory and discretionary Health Center Program funds are at risk. Mr. Smith shared he participated in virtual meetings with Nevada's congressional delegation, alongside the Nevada Primary Care Association and other FQHCs, to advocate for sustained federal support.

Mr. Smith announced that the Health Center received a six-month Notice of Award last week, providing short-term stability as federal budget decisions remain pending. However, Title X funding remains uncertain. The current grant period ends March 31<sup>st</sup>, and renewal guidance has not yet been issued. In the absence of formal instructions, staff submitted the required application using last year's guidance through Grant Solutions to ensure continuity.

Mr. Smith reported that the 340B Pharmacy Rebate Pilot has been placed on hold following a recent lawsuit. HRSA initially planned to appeal the ruling but has since withdrawn the appeal. Dr. Bleak will present a more detailed update at the next Board meeting.

Mr. Smith advised that The State of Nevada has been awarded \$180 million through the Rural Health Transformation Funds, with Federally Qualified Health Centers (FQHC) included as eligible recipients. Mr. Smith noted that the Nevada Primary Care Association will have representation on the Rural Health Transformation Steering Committee, ensuring FQHC interests are included in statewide planning discussions.

Member Coca inquired about the dollar amount of the Title X award. Mr. Smith stated that the award represents six months of the annual allocation, totaling slightly more than \$500K.

Member Coca inquired about which court filed the lawsuit related to the 340B Pharmacy Rebate Pilot. Mr. Smith responded that Dr. Bleak will provide a full update at the next Board meeting, but his current understanding is that the lawsuit was filed by a hospital association and was related to administrative process concerns.

Member Coca inquired about the funding source for recent advertising efforts and noted that she had seen one of the advertisements and thought it was great. Mr. Smith stated that he would follow up on the funding source used for the previous advertisement, which the organization had an opportunity to participate in. Mr. Smith further shared that a new behavioral health advertisement is being developed and that the upcoming campaign will be funded through the health center.

Father Rafael requested an update on the status of mental and behavioral health services, including information on capacity and availability. Mr. Smith stated that he will ask Tabitha Johnson to provide a report at a future meeting.

Father Rafael inquired about the Finance Committee and its meeting schedule. Mr. Smith responded that the committee charters were recently updated and confirmed that staff will provide him with the information outlining how often the committee meets.

**XI. INFORMATIONAL ITEMS**

- Community Health Center (FQHC) Monthly Report (Nov 2025 / Dec 2025)

**XII. SECOND PUBLIC COMMENT:** A period devoted to comments by the general public, if any, and discussion of those comments, about matters relevant to the Board's jurisdiction will be held. Comments will be limited to five (5) minutes per speaker. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote. Seeing no one, the Chair closed the Second Public Comment period.

**XIII. ADJOURNMENT**

The meeting was adjourned at 3:36 p.m.

Randy Smith  
Chief Executive Officer - FQHC

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