

MEMORANDUM

Date: February 17, 2026

To: Southern Nevada Community Health Center Governing Board

From: Randy Smith, MPA, Chief Executive Officer, FQHC *RS*

Cassius Lockett, PhD, District Health Officer *JL*

Subject: Community Health Center FQHC Chief Executive Officer Report – January 2026

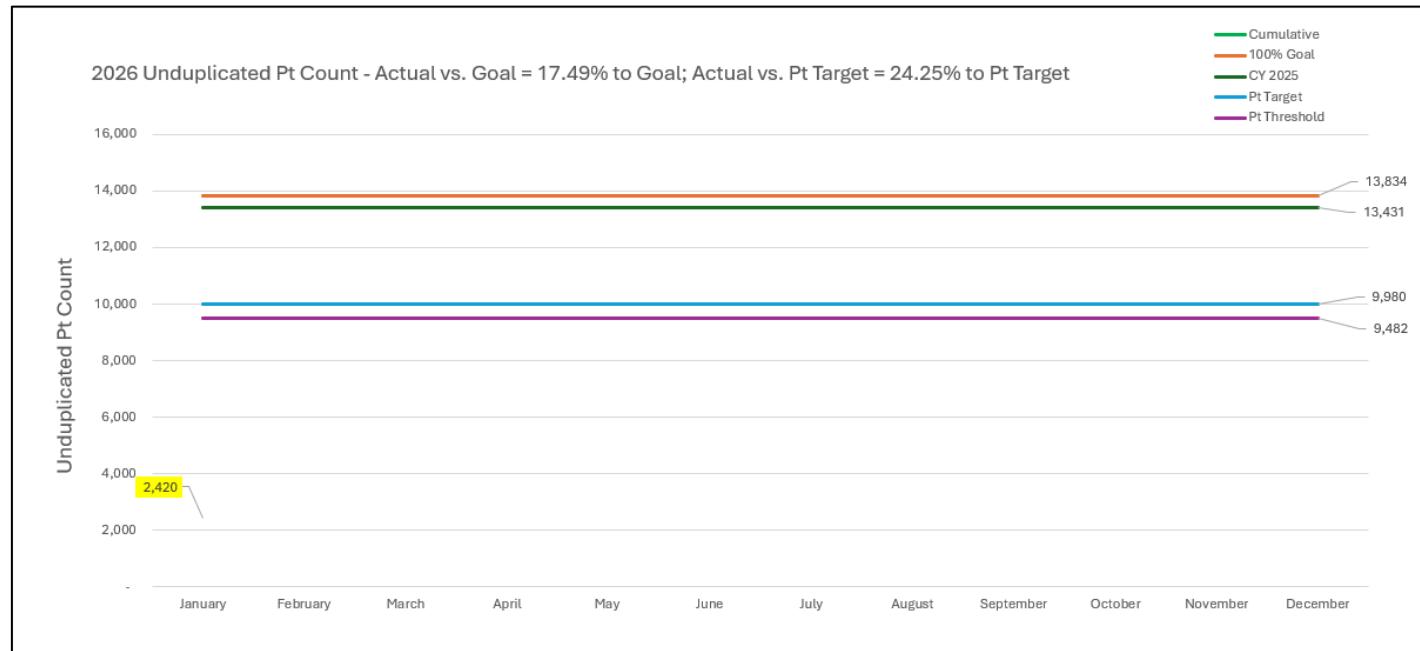
Division Information/Highlights: The Southern Nevada Community Health Center, a division of the Southern Nevada Health District, mission is to serve residents of Clark County from underserved communities with appropriate and comprehensive outpatient health and wellness services, emphasizing prevention and education in a culturally respectful environment regardless of the patient's ability to pay.

January Highlights - Administrative

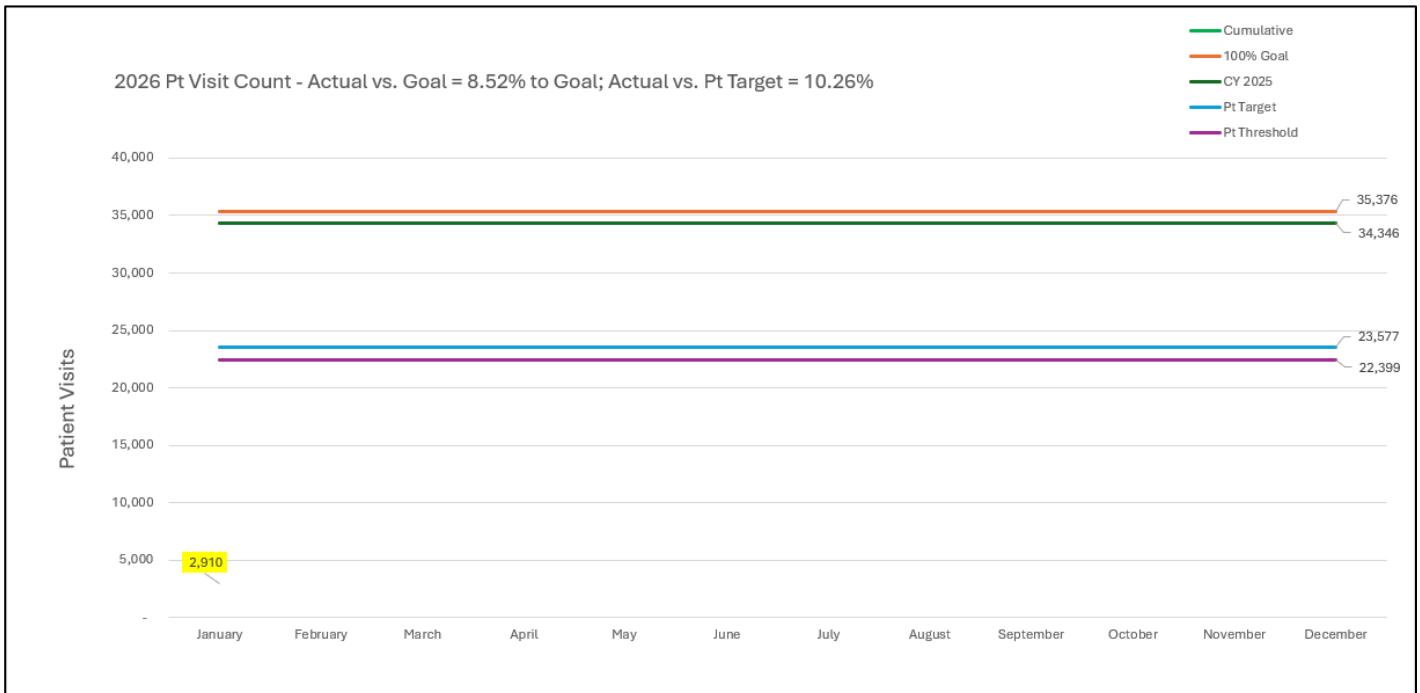
- Behavioral health access up 27% year-over-year.
- Primary care access up 26% year-over-year.
- Pharmacy encounters up 21% year-over-year.
- 2,538 empaneled Medicaid members; most members ever assigned to SNHD/SNCHC.
- Current Title X funding expires on 3/31/26. Awaiting guidance and notification of new funding period.
- Patient Center Medical Home (PCMH) transformation activities ongoing.
- Title X CY25 Family Planning Annual Report submitted.
- CY25 Uniform Data Systems (UDS) report ongoing.
- Recruitment for a doctor for the Fremont Public Health Center ongoing.
- One Community Health Worker in the Ryan White program awarded SNHD's January 2026 Employee of the Month.

Access

Unduplicated Patients – January 2026



Patient Visits Count – January 2026



Provider Visits by Program and Site – January 2026

| Facility | Program | JAN '26 | JAN '25 | JAN YoY % | FY26 YTD | FY25 YTD | FY YTD YoY% |
|-------------------|--------------------------|--------------|--------------|--------------|---------------|---------------|----------------|
| Decatur | Family Health | 729 | 608 | 17% | 5,476 | 4,152 | 24% |
| Fremont | Family Health | 541 | 419 | 23% | 3,370 | 2,404 | 29% |
| Total | Family Health | 1,270 | 1,027 | 19% | 8,846 | 6,556 | 26% |
| Decatur | Family Planning | 147 | 177 | -20% | 925 | 1,113 | -20% |
| Fremont | Family Planning | 128 | 172 | -34% | 1,152 | 909 | 21% |
| Total | Family Planning | 275 | 349 | -27% | 2,077 | 2,022 | 3% |
| Decatur | Sexual Health | 578 | 532 | 8% | 3,797 | 3,532 | 7% |
| Fremont | Sexual Health | 139 | 170 | -22% | 795 | 889 | |
| ASEC | Sexual Health | | | | 0 | 113 | |
| Total | Sexual Health | 717 | 702 | 2% | 4,592 | 4,534 | 1% |
| Decatur | Behavioral Health | 159 | 133 | 16% | 1,225 | 836 | 32% |
| Fremont | Behavioral Health | 160 | 101 | 37% | 998 | 797 | |
| Total | Behavioral Health | 319 | 234 | 27% | 2,223 | 1,633 | 27% |
| Decatur | Ryan White | 225 | 253 | -12% | 1,633 | 1,576 | 3% |
| Fremont | Ryan White | 35 | 31 | 11% | 185 | 174 | |
| Total | Ryan White | 260 | 284 | -9% | 1,818 | 1,750 | 4% |
| FQHC Total | | 2,841 | 2,596 | 9% | 19,556 | 16,495 | 16% |

Pharmacy Services

| | 26-Jan | 25-Jan | | FY26 YTD | FY25 YTD | | % Change YOY |
|--|--------|--------|---|----------|----------|---|-----------------|
| Client Encounters (Pharmacy) | 1,738 | 1,392 | ↑ | 11,889 | 9,809 | ↑ | 21.2% |
| Prescriptions Filled | 3,247 | 2,438 | ↑ | 22,066 | 16,304 | ↑ | 35.3% |
| Client Clinic Encounters (Pharmacist) | 40 | 67 | ↓ | 394 | 411 | ↓ | -4.1% |
| Financial Assistance Provided | 26 | 24 | ↑ | 100 | 224 | ↓ | -55.4% |
| Insurance Assistance Provided | 42 | 10 | ↑ | 101 | 68 | ↑ | 48.5% |

- A. Dispensed 3,247 prescriptions for 1,738 patients.
- B. Pharmacists completed 40 patient clinic encounters.
- C. Assisted 26 patients with obtaining medication financial assistance.
- D. Assisted 42 patients with receiving insurance approvals.

Medicaid Managed Care Organization (MCO)

| Medicaid MCO | Current # Of Medicaid Pts Empaneled |
|--------------|-------------------------------------|
| Anthem | 221 |
| Caresource | 591 |
| HPN | 1,476 |
| Molina | 162 |
| SilverSummit | 88 |
| Total | 2,538 |

Empanelment Growth YoY - 2025 v 2026 11%

2025 # of MCD Undup Pt Goal 3170

YTD # of MCD Undup Pts Seen 443

% of Unduplicated Pts to Goal 13.97%

of Medicaid Pts Assigned to SNCHC 2,538

2025 # of MCD Visits Goal 4255

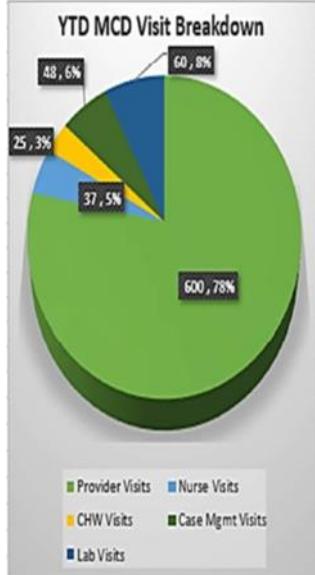
YTD # of MCD Visits Completed 600

% of Medicaid Pts Visits to Goal 14.10%

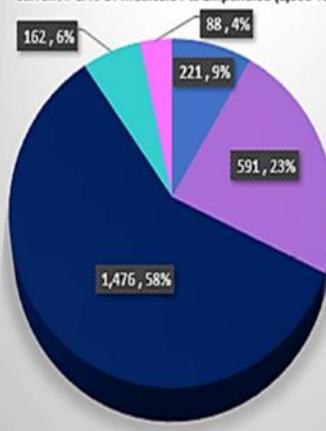
Average # of Medicaid visits per undup pt 1.35

| Unduplicated MCD Pts Seen YTD |
|-------------------------------|
| Anthem 111 |
| Caresource 35 |
| HPN 132 |
| Molina 61 |
| SilverSummit 68 |
| Nevada Medicaid 36 |
| Total 443 |

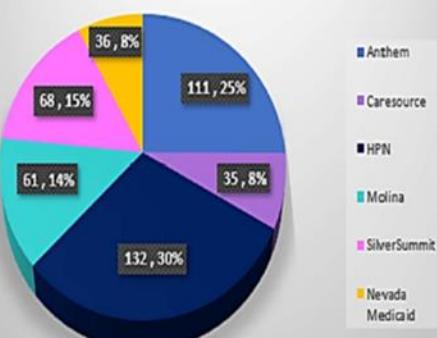
| YTD MCD Visit Breakdown |
|-------------------------|
| Provider Visits 600 |
| Nurse Visits 37 |
| CHW Visits 25 |
| Case Mgmt Visits 48 |
| Lab Visits 60 |
| Total Visits 770 |



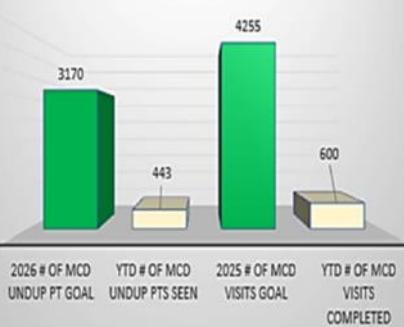
Current # & % Of Medicaid Pts Empaneled (2,538 Total)



Current # & % Of Unduplicated Medicaid Pts Seen by Payer (443 Total)



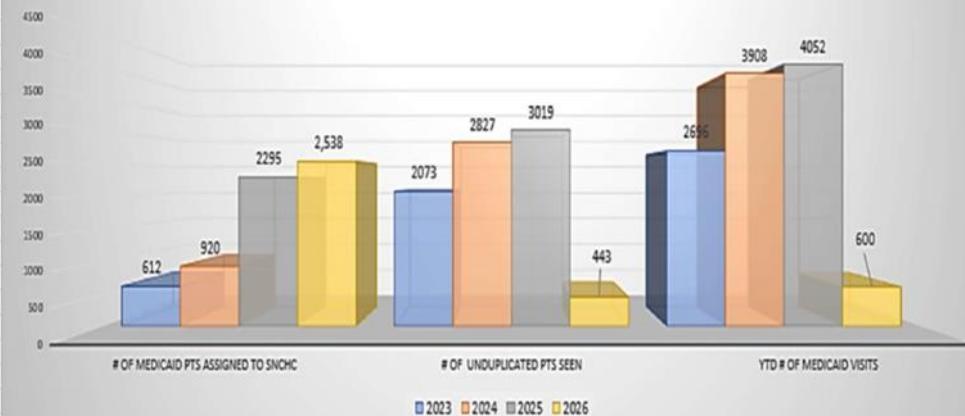
2025 MCD Undup Pts & MCD Visits Goals vs Actuals



2025 vs 2026 MCD Pt Count & Visit Comparison January



MCD Empanelment, Undup Pt, & Visit Count YOY Comparison



■ 2023 ■ 2024 ■ 2025 ■ 2026

| Calendar Year | 2023 | 2024 | 2025 | 2026 | Change | Change |
|---|---------|---------|---------|--------|--------|--------|
| # of Medicaid Pts Assigned to SNCHC | 612 | 920 | 2295 | 2,538 | | |
| # of Unduplicated Pts Seen | 2073 | 2827 | 3019 | 443 | | |
| Goal of Medicaid Visits | 2831 | 4104 | 4255 | | | |
| YTD # of Medicaid Visits | 2696 | 3908 | 4052 | 600 | | |
| % of Medicaid Pts Seen to Goal | #DIV/0! | 138.04% | 101.68% | 13.97% | | |
| Average # of Medicaid visits per undup pt | 1.30 | 1.38 | 1.34 | 1.35 | | |

Behavioral Health Services

- A. The Behavioral Health Psychiatric Nurse Practitioner celebrated their five-year anniversary with the Health District and was recognized in the presence of their colleagues.
- B. The Behavioral Health Team completed coding training facilitated by a coding expert.
- C. The Behavioral Health Team received training on the Chronic Care Management (CCM) module and has initiated patient enrollment.

Family Planning Services

- A. Current Title X budget period concludes on March 31, 2026. Awaiting instructions from the Office of Population Affairs on the submission of a non-competing continuous grant application.
- B. Family Planning program access was down 27% in January and is up 3% year-over-year. Program team administrators and clinical staff are working with SNHD's Quality Improvement and Accreditation Program Manager on a quality improvement project to increase access to care. This project is ongoing.
- C. The Title X CY25 Family Planning Annual Report was submitted to the Office of Population Affairs.

HIV / Ryan White Care Program Services

- A. The Ryan White program received 63 referrals between January 1st and January 31st. There were two (2) pediatric clients referred to the Medical Case Management in January, and the program received two (2) referrals for a pregnant women living with HIV during this time.
- B. There were 786 service encounters provided by the Ryan White Linkage Coordinator, Eligibility Worker, Care Coordinators, Nurse Case Managers, Community Health Workers, and Health Educator. There were 415 unique clients served under these programs in January.
- C. The Ryan White ambulatory clinic provided a total of 467 visits in the month of January, including 26 initial provider visits, 197 established provider visits including three (3) tele-visits to established patients. Additionally, there were 26 nursing visits and 221 lab visits provided. There were 52 Ryan White services provided under Behavioral Health by licensed mental health practitioners and the Psychiatric APRN during the month of January. There were 12 Ryan White clients seen by the Registered Dietitian under Medical Nutrition services in January.
- D. The Ryan White clinic provides Rapid StART services, with a goal of rapid treatment initiation for newly diagnosed patients with HIV. The program continues to receive referrals and accommodate clients on a walk-in basis. There were eight (8) patients seen under the Rapid StART Program in January.

FQHC-Sexual Health Clinic (SHC)

- A. The Sexual Health Clinic (SHC) clinic provided 614 unique services to 571 unduplicated patients for the month of January.
- B. There are currently more than 100 patients receiving injectable treatment for HIV prevention (PrEP).
- C. The SHC continues to collaborate with UMC on referrals for evaluation and treatment of neurosyphilis. The SHC is collaborating with the PPC - Sexual Health and Outreach Prevention Programs (SHOPP) on the Gilead FOCUS grant to expand express testing services for asymptomatic patients and provide linkage to care for patients needing STI, Hepatitis C or HIV treatment services. The SHC continues to refer pregnant patients with syphilis and patients needing complex STI evaluation and treatment to PPC SHOPP for nurse case management services.

Refugee Health Program (RHP)

Refugee Health Program for the month of January.

| | |
|---|-----------|
| Client required medical follow- up for Communicable Diseases | - |
| Refugee Health Screening for Ova and Parasites (positive tests) | 3 |
| Referrals for TB issues | 0 |
| Referrals for Chronic Hep B | 0 |
| Referrals for STD | 0 |
| Pediatric Refugee Exams | 5 |
| Clients encounter by program (adults) | 11 |
| Refugee Health Screening for January 2026 | 16 |
| Total for FY25-FY26 | 28 |

Outreach/In Reach Activity

There was no outreach events reported in January 2026.

| | |
|---------------------------------------|------------------------------|
| Number of events | 0 – Outreach 0 – In reach |
| Number of people reached | 0 |
| Number of people linked to the clinic | 0 |
| Number of hours dedicated to outreach | 0 |

Eligibility and Insurance Enrollment Assistance

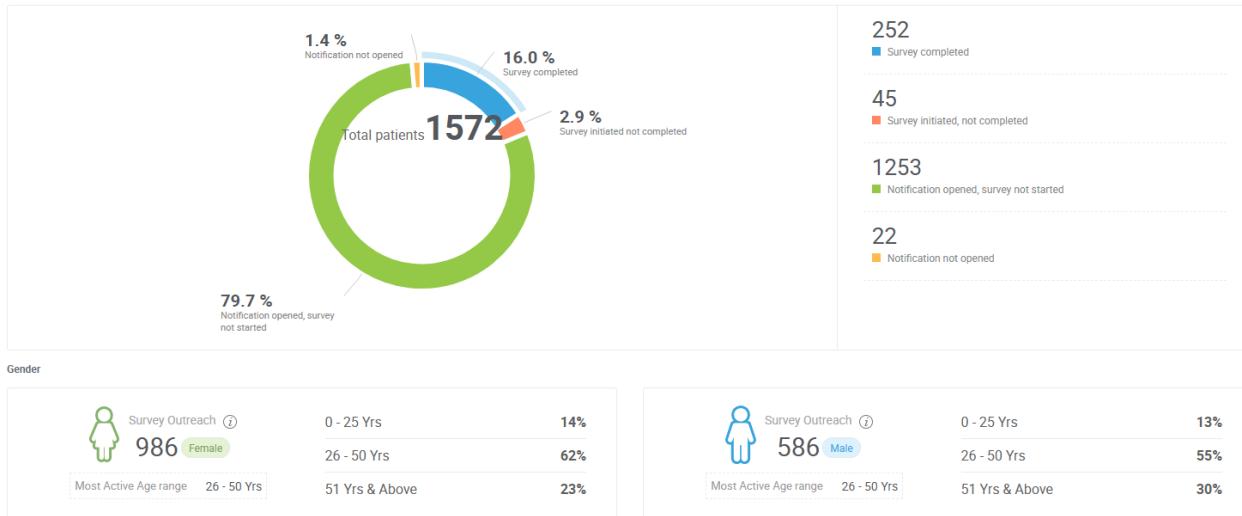
Patients in need of assistance continue to be identified and referred to community partners for help with determining eligibility for insurance and assistance with completing applications. Partner agencies are collocated at both health center sites to facilitate warm handoffs for patients in need of support.

Patient Satisfaction: See attached survey results.

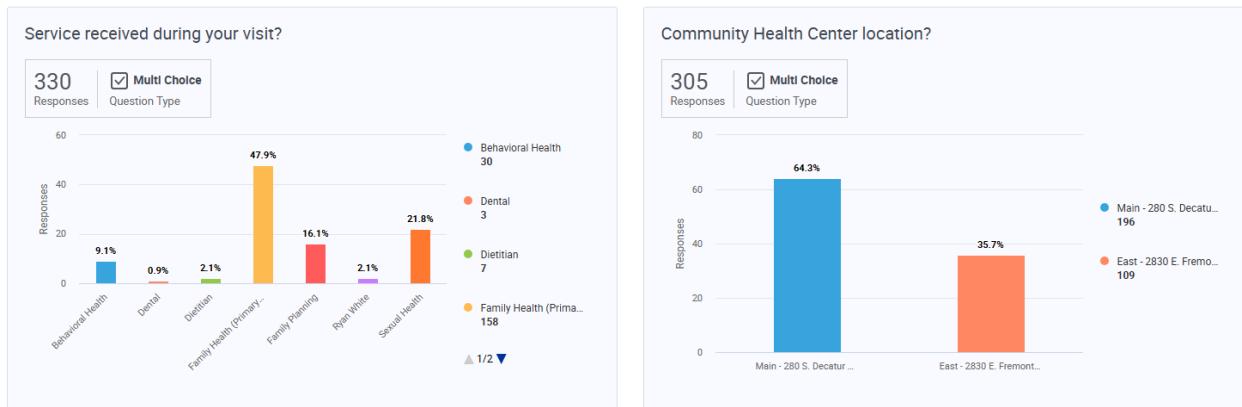
SNCHC continues to receive generally favorable responses from survey participants when asked about ease of scheduling an appointment, waiting time to see their provider, care received from providers and staff, understanding of health care instructions following their visit, hours of operation, and recommendation of the Health Center to friends and family.

Southern Nevada Community Health Center Patient Satisfaction Survey – January 2026

Overview

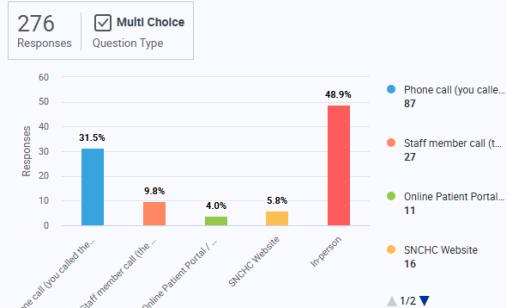


Service and Location

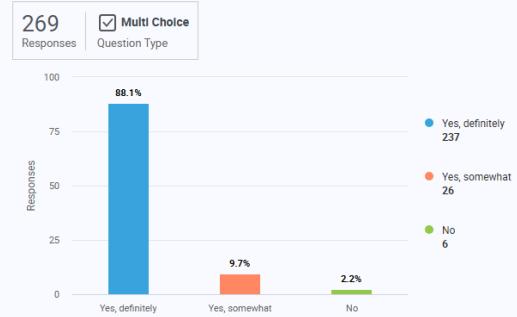


Provider, Staff, and Facility

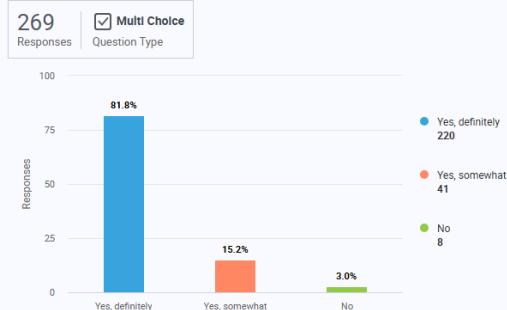
Thinking about your most recent visit, how did you make an appointment?



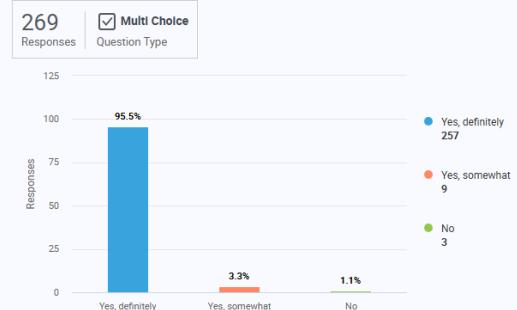
Thinking about your recent visit, was it easy to schedule an appointment?



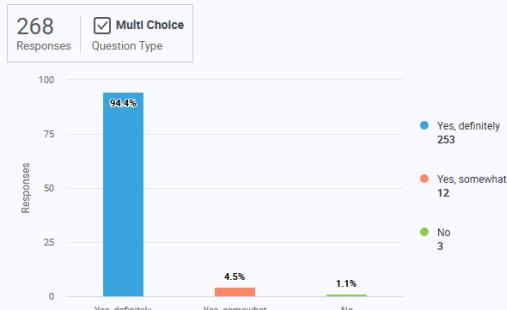
Was the recent visit as soon as you needed?



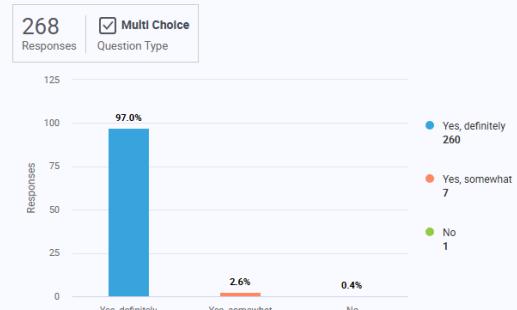
Did the provider explain things in a way that was easy to understand?



Did the provider listen carefully to you?



Did the provider show respect for what you had to say?





How would you rate the overall care you received from your provider, where 0 is the worst and 10 is the best?

268

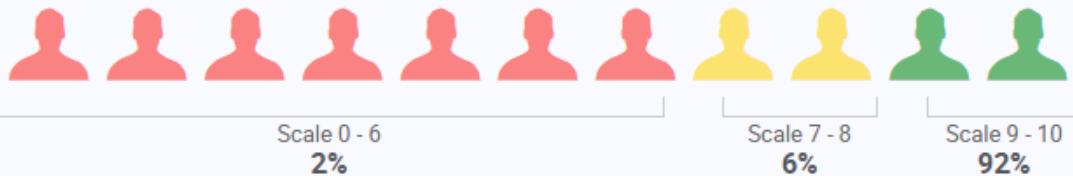
Responses

123 Numbers

Question Type

90

Net Promoter Score (NPS)



6

Scale 0 - 6

15

Scale 7 - 8

247

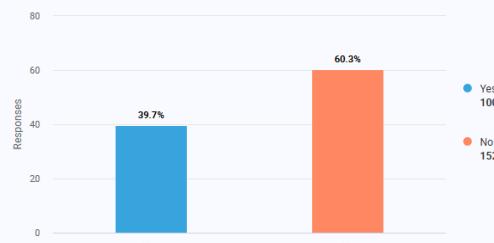
Scale 9 - 10

General Information

Do you have health insurance?

252 Responses

Multi Choice



How did you hear about us?

263 Responses

Multi Choice

