

MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

June 17, 2025 – 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
Sara Hunt, Second Vice Chair
Scott Black
Erin Breen
Ashley Brown
Marie Dukes
Jose L. Melendrez
David Neldberg

ABSENT:

Jasmine Coca, First Vice Chair
Luz Castro
Blanca Macias-Villa

ALSO PRESENT

LEGAL COUNSEL:

Edward Wynder, Associate General Counsel

CHIEF EXECUTIVE OFFICER:

Randy Smith

STAFF:

Emily Anelli, Tawana Bellamy, Todd Bleak, Robin Carter, David Kahananui, Ryan Kelsch, Cassius Lockett, Cassondra Major, Jonas Maratita, Luann Province, Emma Rodriguez, Luscinda Santiago, Kim Saner, Felicia Sgovio, Justin Tully, Donnie (DJ) Whitaker, Merylyn Yegon

I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada Community Health Center (SNCHC) Governing Board Meeting to order at 2:31 p.m. Tawana Bellamy, Senior Administrative Specialist, administered the roll call and confirmed a quorum. Ms. Bellamy provided clear and complete instructions for members of the general public to call in to the meeting to provide public comment, including a telephone number and access code.

II. PLEDGE OF ALLEGIANCE

III. RECOGNITION

1. Southern Nevada Health District – June Employees of the Month

- Jennifer Loysaga

The Governing Board recognized Jennifer Loysaga, Administrative Assistant, as the Southern Nevada Health District's June Employee of the Month. Ms. Bellamy read an excerpt of her nomination into the record. On behalf of the SNCHC Governing Board, the Chair congratulated Ms. Loysaga.

- IV. 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 one, the Chair closed the First Public Comment period.

- V. ADOPTION OF THE JUNE 17, 2025 MEETING AGENDA** *(for possible action)*

Chair Feliz-Barrows called for questions or changed to the agenda. There were none.

A motion was made by Member Hunt, seconded by Member Breen, and carried unanimously to approve the June 17, 2025, meeting agenda, as presented.

- VI. 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:** May 20, 2025 *(for possible action)*

The Chair called for question and there were none.

A motion was made by Member Breen, seconded by Member Neldberg, and carried unanimously to approve the Consent Agenda, as presented.

- VII. REPORT / DISCUSSION / ACTION**

- 1. Receive, Discuss and Approve a Change in Scope for Hours of Operation;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Randy Smith, Chief Executive Officer, presented a Change in Scope for Hours of Operation, requesting a formal adjustment to the health center's Tuesday operating hours. Tuesday mornings from 7:00 a.m. to 9:00 a.m. have been dedicated to essential internal team activities, including communicating updates, reporting, employee recognitions, workflow discussions, policy and process reviews, trainings, and team building. During this time, no patient services are provided.

Mr. Smith noted that while the current board-approved hours and the website indicate a 7:00 a.m. start on Tuesdays, this has led to some complaints from patients.

Mr. Smith proposed changing the Health Center's hours of operation on Tuesdays from 7:00 a.m. to 6:00 p.m. to 9:00 a.m. to 6:00 p.m. This change will be formally requested through HRSA via a Change in Scope. If approved, the new hours of operation would be:

- 7:00 a.m. to 6:00 p.m. – Monday, Wednesday, Thursday, and Friday
- 9:00 a.m. to 6:00 p.m. – Tuesday

Member Melendrez joined the meeting at 2:39 p.m.

The Chair called for questions and there were none.

A motion was made by Member Breen, seconded by Member Hunt, and carried unanimously to approve a Change in Scope for Hours of Operation, as presented.

2. Receive, Discuss and Approve the Patient Origin Report and Change in Catchment Area;
direct staff accordingly or take other action as deemed necessary *(for possible action)*

David Kahananui, Administrative Manager, FQHC, presented the Patient Origin Report and a proposed Change in Catchment Area. Mr. Kahananui began with an overview of the CY 2024 UDS Demographic Data, which helps support the determination of the board's consumer member composition. Key demographic insights included:

- Sex: Data was presented for both male and female patients.
- Ethnicity: Only 2.81% of patient ethnicity data was unknown.
- Race: A significant 30.02% of patients either chose not to disclose their race or it was unreported.
- Income:
 - 8.06% of income data (as a percentage of the 2024 Poverty Guideline) was unknown.
 - Approximately 80% of the health center's patient population was at or below 200% of the federal poverty level.

Mr. Kahananui explained that the high rates of unknown or unreported data for race and income were largely due to technical issues and improper data mapping or recording within the system. Mr. Kahananui assured the board that the IT and informatics divisions are actively working to fix these issues, and future reports should show improved data.

Mr. Kahananui also shared data on Primary Payer Source and Special Population, highlighting that 55.13% of the patient population was uninsured.

Mr. Kahananui then addressed the catchment area, noting that HRSA requires health centers to list zip codes where at least 75% of current patients reside, based on the most recent UDS report.

To meet this requirement, Mr. Kahananui recommended the following changes to SNCHC's catchment area, which would encompass 24 zip codes where 75.1% of SNCHC patients currently reside:

- Add zip code 89081 to the Fremont and mobile unit.
- Add zip codes 89129 and 89148 to the Decatur and mobile unit.
- Remove zip codes 89128 and 89146 from the Decatur and mobile unit.

The Chair called for questions and there were none.

A motion was made by Member Hunt, seconded by Member Breen, and carried unanimously to approve the Patient Origin Report and Change in Catchment Area, as presented.

Member Black joined the meeting at 2:46 p.m.

Member Melendrez left the meeting at 2:47 p.m.

3. Receive, Discuss and Accept the April 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 April 2025 year to date financial report, unaudited results as of April 30, 2025.

Revenue

- General Fund revenue (Charges for Services & Other) was \$29.23M compared to a budget of \$27.47M, a favorable variance of \$1.76M.
- Special Revenue Funds (Grants) were \$5.33M compared to a budget of \$6.78M, an unfavorable variance of \$1.45M.
- Total Revenue was \$34.56M compared to a budget of \$34.25M, a favorable variance of \$314K.

Member Melendrez re-joined the meeting at 2:49 p.m.

Expenses

- Salary, Tax, and Benefits were \$11.56M compared to a budget of \$11.79M, a favorable variance of \$227K.
- Other Operating Expense was \$23.01M compared to a budget of \$23.26M, a favorable variance of \$243K.
- Indirect Cost/Cost Allocation was \$6.56M compared to a budget of \$7.07M, a favorable variance of \$507K.
- Total Expense was \$41.14M compared to a budget of \$42.11M, a favorable variance of \$977K.

Net Position: was negative \$6.58M compared to a budget of negative \$7.87M, a favorable variance of \$1.29M.

Ms. Whitaker presented a detailed review of the budget-to-actuals report for all funds and divisions by type.

Addressing an inquiry from Member Breen regarding a shortfall in state revenue, Ms. Whitaker explained that state revenue fluctuates based on when grants are awarded and how funds are expended. Ms. Whitaker noted that the anticipated revenue included in the budget might be reduced if grants are not fully awarded or do not come through as expected. The team is aware of this as they prepare for budget augmentation.

Ms. Whitaker also reviewed the budget-to-actuals for:

- Percentage of Revenues and Expenses by Department
- Revenues by Department
- Expenses by Department

Ms. Whitaker reported a significant increase in patient encounters: 24,644 for Fiscal Year 2024 and 32,428 for Fiscal Year 2025, representing a 32% year-over-year increase. Ms. Whitaker also provided year-to-date revenue and expenses broken down by department and type.

In response to Member Hunt's question, Ms. Whitaker clarified that the capital expenses for the behavioral health buildout will drop off the budget on June 30, 2025, at the close of the fiscal year. All expenses are cumulative from July 1 to June 30 and will reset on July 1.

Member Breen commended the report, particularly highlighting the remarkable increase in patient numbers at the Fremont location within a single year. Mr. Smith expressed his pride in the team's significant strides over the past year and thanked Member Breen for the recognition.

Member Breen further emphasized the importance of serving this specific patient population, noting the unique needs at the two locations and the potential suffering if the health center was not there. Member Breen suggested the need for public recognition of this vital service.

Member Breen suggested organizing a car seat event for Fremont's patient population who have cars, proposing it could be held in conjunction with a back-to-school event. Mr. Smith is supportive of the idea and asked Ms. Bellamy to collaborate with Member Breen on the details.

Chair Feliz-Barrows called for questions and there were none.

A motion was made by Member Neldberg, seconded by Member Dukes, and carried unanimously to Accept the April 2025 Year to Date Financial Report, as presented.

- VIII. 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)*

Chair Feliz-Barrows commented that she would like to discuss with the board members what they would like to do for staff at both locations during the holidays. She would like an agenda item for this added to an upcoming meeting.

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

- CEO Comments

Mr. Smith provided an update on several key areas, including the recent HRSA report, ongoing health center operations, and new program developments.

Mr. Smith reported that the health center received the final OSV report from the Health Resources and Services Administration (HRSA), confirming that all compliance findings have been cleared. Mr. Smith noted that while significant progress has been made, work is still underway on some items outlined in their action plan.

During the HRSA on-site visit, the review team focused on the health center's governance and documentation, specifically examining the Co-Applicant Agreement. This agreement defines the relationship between the Southern Nevada Health District (SNHD) and the Southern Nevada Community Health Center. Mr. Smith explained that public entities like SNHD cannot

independently become a Federally Qualified Health Center (FQHC); a co-applicant agreement is essential for this designation. Mr. Smith emphasized that HRSA wanted to ensure the board was aware the agreement had been reviewed, and no changes were recommended. To maintain ongoing oversight, Mr. Smith committed to reviewing the co-applicant agreement every three years, prior to each HRSA Operational Site visit, to ensure regular board review.

Additionally, Mr. Smith reported that the health center's bylaws are currently being revised. This revision is based on technical assistance provided during the HRSA Operational Site Visit and aims to enhance the document's readability. SNHD's general counsel has provided recommended changes, and Mr. Smith, Mr. Wynder, and Ms. Bellamy are collaboratively reviewing language pertaining to committees and committee charters. Mr. Smith anticipates presenting these recommended changes to the board in July 2025 for potential approval.

Mr. Smith reported the health center is launching a new service, a therapy support group through its Behavioral Health program. This group is designed to support Ryan White patients and will be offered in both English and Spanish. Mr. Smith shared an informational flyer, also available in both languages. While the initial focus is internal, discussions are underway to expand the group more broadly into the community. Patient surveys have been conducted to gather input on preferred discussion topics and educational content for group therapy sessions.

In response to an inquiry from Member Hunt, Mr. Smith indicated that the health center is exploring opportunities to bill insurance for this new service, with the anticipation of generating some revenue.

Mr. Smith highlighted the significant growth of the Pharmacy program. As patient encounters have increased, so has the volume of prescriptions filled by the pharmacy. Mr. Smith noted that the program has reached an "inflection point." With Dr. Lockett's support, Dr. Bleak, the pharmacy manager, will be relieved of day-to-day clinical responsibilities. A new pharmacist will be hired to backfill this position, allowing Dr. Bleak to dedicate more attention to the administrative aspects of the pharmacy.

Mr. Smith confirmed that the health center's HRSA funding appears to be secure. However, he shared that the future of several other areas remains uncertain, and he outlined current plans for each:

- Title X – Family Planning
- Refugee Health
- Medicaid rule changes

Regarding health center operations, Mr. Smith indicated a continued focus on transitioning from siloed programs to a more integrated primary care model. Mr. Smith acknowledged that some staff may not be entirely pleased with these programmatic changes. Chair Feliz-Barrows commented that she welcomes staff to express their feelings at board meetings, emphasizing the board's desire to hear their perspectives. Members Neldberg and Breen echoed this sentiment.

Finally, Mr. Smith shared the Medicaid Dashboard for May 2025 and a flyer detailing Outreach and In-reach Activities.

Chair Feliz-Barrows called for questions and there were none.

X. INFORMATIONAL ITEMS

- Community Health Center (FQHC) April 2025 Monthly Report

XI. 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.

XII. ADJOURNMENT

The Chair adjourned the meeting at 3:32 p.m.

Randy Smith
Chief Executive Officer - FQHC

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