

MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

October 21, 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
Jasmine Coca, First Vice Chair
Rebeca Aceves
Luz Castro
Marie Dukes
Blanca Macias-Villa
Jose L. Melendrez
David Neldberg

ABSENT:

Sara Hunt, Second Vice Chair
Erin Breen
Ashley Brown

ALSO PRESENT

LEGAL COUNSEL:

Edward Wynder, Associate General Counsel

CHIEF EXECUTIVE OFFICER:

Randy Smith

STAFF:

Chelle Alfaro, Heather Anderson-Fintak, Emily Anelli, Tawana Bellamy, Andria Cordovez Mulet, Richard Hazeltine, David Kahananui, Cassondra Major, Luann Province, Yin Jie Qin, Emma Rodriguez, Felicia Sgovio, 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 2:30 p.m. Tawana Bellamy, Senior Administrative Specialist, administered the roll call. A quorum was not established.

II. PLEDGE OF ALLEGIANCE

III. OATH OF OFFICE

Ms. Bellamy administered the Members' Oath of Office to Member Feliz-Barrows, Member Aceves and Member Melendrez.

Members Dukes joined the meeting at 2:32 p.m.

Member Macias-Villa joined the meeting at 2:32 p.m.

Quorum was established at 2:32 p.m.

Member Melendrez joined the meeting at 2:34 p.m.

Member Castro joined the meeting at 2:35 p.m.

- 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 OCTOBER 21, 2025 MEETING AGENDA *(for possible action)*

The Chair called for questions or changes to the agenda. There were none.

A motion was made by Member Coca, seconded by Member Macias-Villa, and carried unanimously to approve the changes to the October 21, 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:** September 16, 2025 *(for possible action)*

- 2. Approve Updates to CHCA-009 Laboratory and Diagnostic Imaging Tracking Policy;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

The Chair called for any items to be removed from the Consent Agenda for separate discussion. No items were requested for removal.

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

VII. REPORT / DISCUSSION / ACTION

Recommendations from the October 8, 2025 Chief Executive Officer (CEO) Annual Review Committee Meeting

- 1. Receive, Discuss and Approve the FY25 Evaluation Results of the Chief Executive Officer (CEO);** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Dave Kahananui, FQHC Administrative Manager presented the results of the CEO's annual evaluation, which is a HRSA-required activity. Mr. Kahananui shared the Health Center Governing Board is responsible for assessing the CEO's performance and achievement of project objectives. The CEO Annual Review Committee supports this process by providing

feedback and support to the Governing Board. The evaluation tool included five scored questions (rated 1–5, with 5 being outstanding) and two narrative questions. Each question carried different weight.

Mr. Kahananui advised of the following results.

Questions	Weighted	Average Score
Q1: The CEO consistently demonstrates equitable and fair treatment of SNCHC employees, contractors, and volunteers.	15%	4.71
Q2: The CEO consistently provides thorough administrative leadership and oversight of SNCHC's compliance with HRSA program requirements.	40%	4.43%
Q3: The CEO ensures that the SNCHC has a viable long-range strategy to achieve its mission and utilizes data to measure progress towards achieving programmatic, clinical, and financial goals.	15%	4.43%
Q4: The CEO appropriately utilizes financial and utilization data to ensure SNCHC is maximizing budgetary and human resources to achieve health center goals.	15%	4.43%
Q5: The CEO properly represents SNCHC in the community and fosters the establishment of new community partners and develops existing partnerships.	15%	4.43%
Overall Score	4.48	

Mr. Kahananui advised that Mr. Smith overall score is 4.48 on a scale of 1 being poor to 5 being outstanding.

Mr. Kahananui further advised the committee discussed future improvements to the evaluation process, particularly regarding anonymity and accountability, as current methods limit follow-up and participation tracking.

Member Melendrez commented that he sincerely thanks Mr. Smith and the entire staff for their phenomenal work. Despite the current challenges, their dedication and performance have been commendable.

Member Coca thanked Mr. Smith and thought it was a really good evaluation overall. The board thinks highly of you. Thank you for all your hard work and that of your team.

Chair Feliz-Barrows expressed concern regarding board participation in the CEO evaluation process. Chair Feliz-Barrows noted that while 10 surveys were distributed, only 7 were returned. As this is a required HRSA activity, she emphasized the importance of full participation and accountability.

A motion was made by Member Coca, seconded by Member Melendrez, and carried unanimously to approve the FY25 Evaluation Results of the Chief Executive Officer, as presented.

- 2. Receive, Discuss and Approve the Chief Executive Officer's FY26 Goals;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Smith presented the proposed CEO goals for Fiscal Year 2026 to the board. Mr. Smith noted that these goals were previously reviewed by the CEO Annual Review Committee and are aligned with the health center's strategic priorities. A total of nine goals were outlined, categorized under Quality, Access, Administration, and Finance.

Mr. Smith proposed a revision to the original goal of Obtaining Patient-Centered Medical Home (PCMH) accreditation. Mr. Smith shared that based on further discussions with the team and consultant, he recommended modifying the goal to "Complete the first required check-in for PCMH accreditation by June 30, 2026." This adjustment reflects a more realistic timeline while maintaining momentum toward full accreditation by the end of calendar year 2026.

The Chair called for questions or comments and there were none.

A motion was made by Member Coca, seconded by Member Luz, and carried unanimously to approve the Chief Executive Officer's FY26 Goals, as amended.

SNCHC Governing Board

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

Yin Jie Qin, Controller, presented the unaudited financial summary as of August 31, 2025, covering revenue, expenses, and net position.

Revenue

- General Fund revenue (Charges for Services & Other) is \$6.51M compared to a budget of \$6.51M, a favorable variance of \$3K.
- Special Revenue Funds (Grants) is \$835K compared to a budget of \$1.27M, an unfavorable variance of \$437K.
- Total Revenue is \$7.35M compared to a budget of \$7.78M, an unfavorable variance of \$434K.

Expenses

- Salary, Tax, and Benefits is \$2.49M compared to a budget of \$2.77M, a favorable variance of \$280K.
- Other Operating Expense is \$5.50M compared to a budget of \$5.18M, an unfavorable variance of \$324K.
- Indirect Cost/Cost Allocation is \$1.86M compared to a budget of \$2.14M, a favorable variance of \$290K.
- Total Expense is \$9.84MM compared to a budget of \$10.09M, a favorable variance of \$246K.

Net Position: is (\$2.49M) compared to a budget of (\$2.31M), an unfavorable variance of \$189K.

Ms. Qin also reviewed detailed fund and division comparisons, highlighting key variances:

- Pass-Through Revenue: Budget included eight (8) grant-funded eligibility workers not hired due to federal changes.
- Supplies: Increased due to higher patient encounters and pharmacy costs.

- Travel & Training: August expenses reflect upfront registration costs for provider and administrator training.

Ms. Qin continued to provide an overview of the following:

- Revenue & Expenses by Department: Pharmacy accounted for the largest share, followed by Family Planning and Primary Care.
- Refugee Health: 96% decline in patient encounters year-over-year due to reduced demand and prior period write-offs.
- Ryan White Program: Delayed reimbursements and unfilled grant-funded positions impacted revenue.
- Behavioral Health: Transitioned to general fund support following the end of the FY25 Incubator Grant.
- Patient Encounters: Overall FQHC encounters increased 18% year-over-year, with Primary & Preventive Care up 62% and Refugee Health down 96%.

Comparative charts and tables were presented, including monthly and year-to-date revenue and expense trends.

Member Coca inquired about the 100% grant-funded positions, Ms. Qin noted they were eligibility workers.

The Chair called for further questions and there were none.

A motion was made by Member Coca, seconded by Member Dukes, and carried unanimously to approve the August 2025 Year to Date Financial Report, as presented.

4. Receive, Discuss and Approve the Insulin and Epinephrine Fee Structure Policy; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Todd Bleak, Pharmacy Services Manager presented the proposed Insulin and Epinephrine Fee Structure Policy, drafted by the Pharmacy Finance Work Group in response to an executive order. The policy ensures compliance with 340B pricing requirements for health centers, specifically for insulin and injectable epinephrine.

Dr. Bleak shared the executive order, now included in the health center's continuation grant, mandates that health centers receiving 340B pricing cannot charge patients more than the acquisition cost plus a nominal administration fee. This applies to patients below 200% of the federal poverty level who are uninsured, have high unmet deductibles, or face high cost-sharing. The policy sets a maximum dispensing fee equal to Medicaid's rate but allows for lower, flat fees to simplify pricing for patients and staff. All insulin and epinephrine products will have uniform pricing across the health center.

The Chair inquired whether it remains policy that no patient is denied medication regardless of ability to pay. Mr. Bleak commented that is correct and confirmed that the health center was already in compliance with this standard prior to the executive order. The new policy formalizes this practice to ensure transparency for patients. Mr. Bleak added that the fee scale will be updated in the next annual revision to include the insulin and epinephrine fees.

The Chair called for questions or comments and there were none.

A motion was made by Member Melendrez, seconded by Member Coca, and carried unanimously to approve the Insulin and Epinephrine Fee Structure Policy, as presented.

5. Review and Discuss Committee Memberships; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Smith reminded the board that it is time to review and update committee memberships in preparation for calendar year 2026. Ms. Bellamy prepared a summary of current committee assignments for CY2025, along with a quick-reference guide outlining each committee's meeting frequency, composition, and ex officio roles.

Mr. Smith noted that the updated committee charters, recently approved by the board, clarify that the Board Chair serves as an ex officio member of all committees and all board members are welcome to attend any committee meeting, though only assigned members may vote. Mr. Smith advised that board members will receive a request to select at least one committee to join for the upcoming year. While members may serve on more than one committee, the goal is to maintain three members per committee to support quorum and effective participation.

Member Melendrez inquired whether the full board should be involved in the Chief Executive Officer annual evaluation process, referencing practices from other councils and boards where all members participate to ensure comprehensive input. Mr. Smith confirmed that this topic had been previously discussed within the CEO Annual Review Committee and offered to revisit the matter during agenda item seven (7). Member Melendrez expressed flexibility regarding the timing of further discussion.

The Chair suggested that a full board meeting should be scheduled prior to the committee's presentations to allow for broader discussion. The Chair recommend moving the timeline up by one month to accommodate this. Mr. Smith noted that this could be addressed under Item seven (7), which relates to increasing board participation and engagement. Mr. Smith clarified that the committee assignments shared earlier were for informational purposes in preparation for upcoming selections.

The Chair called to have Item number 7 was heard out of order for further discussion.

7. Review and Discuss Opportunities for Increased Board Member Participation; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Smith led a discussion on strategies to enhance board member engagement, aligning with a proposed FY26 goal to increase board governance capacity. Key points included the following:

Virtual vs. In-Person Meetings

While virtual meetings have ensured consistent quorum, Mr. Smith noted a trade-off in reduced engagement and relationship-building. Mr. Smith encouraged consideration of more in-person interactions.

CEO Annual Evaluation Process

Mr. Smith addressed concerns about the anonymous nature of the CEO evaluation, which limits the ability to follow up on unclear or inconsistent feedback. Mr. Smith emphasized the importance of board input and suggested exploring ways to maintain anonymity while allowing for clarification when needed. Mr. Smith also noted that full board participation in this HRSA required activity has historically been low and encouraged making participation a formal requirement. Mr. Smith commented that the board may want to consider codifying this in the bylaws or in some other formal documentation.

CEO and Board Member Check-Ins

Mr. Smith addressed the need to strengthen communication and support with board members. Mr. Smith proposed scheduling individual check-ins with board members throughout the year to discuss effectiveness, build rapport, ensure understanding of the health center's financials, and any additional needs.

Board Retreats

Mr. Smith reflected on the success of the October 2024 board retreat and suggested holding similar events every other year to foster deeper engagement and strategic planning.

Mr. Smith concluded by inviting board feedback on these ideas and whether further discussion or action is desired.

The Chair emphasized the importance of discussing meeting formats, particularly the balance between in-person and virtual attendance. The Chair recommended alternating monthly between virtual and in-person meetings. Alternatively, all meetings could be held virtually, with one in-person meeting every quarter to ensure everyone comes together. This quarterly meeting would also include the CEO's evaluation.

Member Melendrez expressed appreciation for the virtual meeting option, noting that due to current traffic conditions and his schedule, attending in-person meetings during the day is challenging. Member Melendrez suggested that when the CEO's annual evaluation is scheduled, it could be planned as a special, dedicated meeting and a two-hour session so board members can prepare accordingly.

Member Macias-Villa agreed with Member Melendrez, noting that the meeting time falls in the middle of the day, which is challenging due to childcare responsibilities. Member Macias-Villa emphasized the value of virtual meetings and suggested that quarterly in-person meetings would be more manageable than alternating monthly. Member Macias-Vill further shared that having a clear plan would help with coordination, and the virtual option remains very beneficial.

Member Coca inquired about how many meetings board members are expected to attend annually, whether virtual or in person, and if attendance requirements are considered. Mr. Smith responded that board members are expected to attend all meetings, as updated in the bylaws, which allow for a limited number of approved absences.

Edward Wynder, Associate General Counsel, added that HRSA requires board members to be actively engaged, it does not define how that is. Mr. Wynder emphasized that board members are expected to attend all meetings, acknowledging that occasional absences may be excused.

Mr. Wynder noted that it is the board's responsibility to assess when a member is unable to participate meaningfully and, in such cases, consider identifying a replacement. Member Coca agreed and emphasized the importance of overall engagement.

Member Coca expressed support for making the CEO evaluation process non-confidential and asked when a decision would be made regarding that approach. Mr. Smith responded that the matter could be brought forward for discussion at a future meeting. Member Coca also voiced her support for conducting board member check-ins throughout the year.

Member Coca inquired whether engaging with multiple board members outside of a formal meeting could be considered a meeting, referencing her experience on a task force. She shared her interest in discussing ideas with Mr. Smith via text or email but was uncertain about the applicable rules. Mr. Wynder clarified that the Open Meeting Law prohibits a majority of board members from convening outside of a properly noticed meeting, as the law is designed to have the board's decision-making process public. Mr. Wynder further clarified that while one-on-one conversations or informal lobbying are permissible, forming a consensus outside of a public meeting enters a gray area and may present issues. Further, as long as such discussions do not constitute a quorum, limited interactions between members are allowed.

Member Coca commented that the board retreat was very helpful, as some of the board members had not met in person before. Mr. Smith advised that with enough planning, we can make this part of our regular process whether that is annual or every other year.

Mr. Smith expressed deep appreciation for the board members' commitment, acknowledging that serving on the board is voluntary. Mr. Smith emphasized the importance of maintaining quorum at each monthly meeting to remain in compliance, noting that the meeting schedule was previously adjusted to allow flexibility in rescheduling if needed.

Mr. Smith also shared that his team is open to exploring alternative meeting times, whether earlier in the morning or later in the evening and shortening meeting durations to better accommodate members' schedules. Mr. Smith reiterated the importance of retaining virtual meeting options and emphasized that all suggestions are being considered with the goal of strengthening board capacity and ensuring a positive experience for all members.

The Chair asked board members to provide staff with their preferred meeting days and times, and to indicate whether they are open to early morning meetings, in-person gatherings, or prefer virtual meetings. The Chair suggested meeting virtually most of the time, with in-person meetings a few times a year, especially for the CEO annual evaluation and a potential retreat.

The Chair recommended avoiding October through December for a board retreat due to holidays and proposed planning a retreat in January or February. Member Coca agreed, noting that while she does not mind October, she supports the January or February timeframe, as it aligns with the start of the new year and allows time to assess upcoming developments.

Mr. Smith acknowledged the points raised and shared by the board members and that he would engage his team to begin planning a retreat and return with realistic options. Mr. Smith suggested reconvening the CEO Annual Review Committee in the near future to discuss the evaluation process.

6. Review and Discuss Governing Board Calendar Year 2026 Meeting Schedule; direct staff accordingly or take other action as deemed necessary (*for possible action*)

Mr. Smith shared the board is currently meeting on the third Tuesday of each month at 2:30 PM, with the exception of December, which falls on the second Tuesday. Mr. Smith explained that a survey will be sent to all board members to gather input on preferred meeting days and times and discussed at the next meeting to finalize the meeting schedule for calendar year 2026.

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*)

There were no board reports.

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

- Title X Onsite Visit Audit Update

Mr. Kahananui reported that the recent Title X on-site audit resulted in a strong overall compliance score of 96.5%, with 82 out of 85 criteria met. Areas needing improvement included project administration and financial accountability.

- Project Administration: The team must update its policy to ensure all Title X-funded materials include the required Health and Human Services disclaimer.
- Financial Accountability: Policy revisions are needed to address how unemancipated minors are considered for services and to implement a process for verifying client income.

Mr. Kahananui shared that the next steps include submitting a response plan by October 28, 2025, despite challenges due to furloughs on the Title X side. As we are required to implement what are changes are within 60 days of submission.

Member Coca inquired about how the status of emancipated minors is verified, specifically whether documentation such as a court order is required to confirm emancipation. Mr. Wynder advised there are a few conditions, but the primary one is the court order.

- CEO Comments

Mr. Smith reported that the non-competing continuation funding application for year three of the Health Center grant has been submitted, covering February 2026 through January 2027. Next year, the team will prepare for a more competitive service area competition. Mr. Smith shared positive news regarding Title X, including approval of unobligated carryover funds and recognition of best practices by the review team.

Additional updates included:

- Completion of a Rural Health Transformation funding survey in partnership with the Nevada Primary Care Association.
- Approval of a change in scope request to reassess the behavioral health PPS rate, which initially came in significantly lower than expected.

- Hosting Representative Susie Lee at the Decatur site, highlighting the Health Center's work.
- Upcoming participation in the Nevada Healthcare Forum, where Mr. Smith will serve as a panelist discussing community health.

Mr. Smith shared details about the upcoming SNCHC holiday party, scheduled for December 16th from 1:00 to 6:00 PM. The Employee Engagement Committee has raised over \$1,300 toward the estimated \$2,000 budget, with plans for themed food and activities. Board members are invited to attend and will receive RSVP details from Ms. Bellamy. For those interested in contributing, donation information will also be provided. Mr. Smith praised the committee's efforts, highlighting the employee-led nature of the event and its role in fostering team spirit and celebration.

Mr. Smith provided a recap of upcoming board activities related to the conflict of interest forms, committee assignments, meeting schedule survey, and the holiday party.

Mr. Smith thanked the board for their engagement and reaffirmed his commitment to making participation manageable and meaningful.

X. INFORMATIONAL ITEMS

- Community Health Center (FQHC) September 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 3:58 p.m.

Randy Smith
Chief Executive Officer - FQHC

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