

MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING November 18, 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: Jasmine Coca, First Vice Chair

Sara Hunt, Second Vice Chair

Rebeca Aceves Erin Breen Ashley Brown

Blanca Macias-Villa Jose L. Melendrez David Neldberg

ABSENT: Donna Feliz-Barrows, Chair

Marie Dukes

ALSO PRESENT

LEGAL COUNSEL: Edward Wynder, Associate General Counsel

CHIEF EXECUTIVE OFFICER: Randy Smith

STAFF: Emily Anelli, Tawana Bellamy, Donna Buss, Robin Carter, Andria Cordovez

Mulet, Jason Frame, David Kahananui, Ryan Kelsch, Cassius Lockett, Cassondra Major, Bernie Meily, Kyle Parkson, Luann Province, Yin Jie Qin, Emma Rodriguez, Felicia Sgovio, Greg Tordjman, Justin Tully, Donnie (DJ)

Whitaker, Merylyn Yegon

I. CALL TO ORDER and ROLL CALL

The Southern Nevada Community Health Center (SNCHC) Governing Board Meeting was called to order at 2:33 p.m. 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 Breen.

IV. RECOGNITION

- 1. Southern Nevada Health District Manager & Supervisor of the Quarter (Q3 and Q4)
 - Bernie Meily
 - Merylyn Yegon

The Governing Board recognized Bernie Meily, Community Health Nurse Manager and Merylyn Yegon, Community Health Nurse Manager as Southern Nevada Health District's Manager & Supervisor of the Quarter (Q3 and Q4). Ms. Bellamy read an excerpt of their nominations into the record. On behalf of the SNCHC Governing Board, the board congratulated Ms. Meily and Ms. Yegon.

Member Coca and Member Aceves congratulated Ms. Meily and Ms. Yegon.

Mr. Smith expressed appreciation for their leadership and noted that nominations originated from their employees.

2. Outgoing Board Member

Luz Castro

Mr. Smith acknowledged the recent departure of Ms. Luz Castro from the Board. Mr. Smith noted that November was Ms. Castro's final month of service and expressed appreciation for her contributions. Ms. Castro joined the Board in November 2022 and played an instrumental role in supporting the health center's growth following its first operational site visit. Mr. Smith conveyed his gratitude for her dedication and leadership over the past three years and shared that he had personally reached out to Ms. Castro to thank her for her service.

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 one, the First Public Comment period was closed.

VI. ADOPTION OF THE NOVEMBER 18, 2025 MEETING AGENDA (for possible action)

There were no questions or changes to the agenda.

A motion was made by Member Coca, seconded by Member Breen, and carried unanimously to approve the changes to the November 18, 2025 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: October 21, 2025 (for possible action)

- 2. Approve Updates to CHCA-005 Behavioral Health Crisis Event and Security

 Communication Policy; direct staff accordingly or take other action as deemed necessary (for possible action)
- **3.** Approve Re-Credentialing and Renewal of Privileges for Providers; direct staff accordingly or take other action as deemed necessary (for possible action)
 - Victoria Allen, APRN I
 - Alireza Farabi, MD
 - Jerry Cade, MD

There were no changes or questions to the Consent Agenda.

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

VIII. REPORT / DISCUSSION / ACTION

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

Revenue

- General Fund revenue (Charges for Services & Other) is \$10.59M compared to a budget of \$9.76M, a favorable variance of \$823K.
- Special Revenue Funds (Grants) is \$1.12M compared to a budget of \$1.91M, an unfavorable variance of \$791K.
- Total Revenue is \$11.71M compared to a budget of \$11.67M, a favorable variance of \$32K.

Expenses

- Salary, Tax, and Benefits is \$3.61M compared to a budget of \$4.15M, a favorable variance of \$541K.
- Other Operating Expense is \$7.87M compared to a budget of \$7.77M, an unfavorable variance of \$105K.
- Indirect Cost/Cost Allocation is \$2.71M compared to a budget of \$3.22M, a favorable variance of \$510K.
- Total Expense is \$14.19M compared to a budget of \$15.13M, a favorable variance of \$946K.

Net Position: is (\$2.48M) compared to a budget of (\$3.46M), a favorable variance of \$978K.

Member Hunt joined the meeting at 2:50 p.m.

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
 - o FY2025 9,219
 - o FY2026 10,901
 - o 18% year-over-year growth
- Month-to-Month Comparisons Year-to-Date revenues and expenses by department and by type.

Member Coca commented that Ms. Whitaker did a good job. Member Coca inquired about the clients attending the Health Center's second location, expressing concern regarding refugees who may be unable to seek services due to suspended Medicaid coverage.

Mr. Smith responded that both the Fremont and Decatur health centers are designed to provide the same core set of services, with minor variations. One such variation is that the Refugee Health Services Program is exclusively offered at Fremont. Clients at Fremont are similar to those at Decatur, primarily seeking primary care services, while also accessing programs such as family planning, sexual health, Ryan White services, and behavioral health. Mr. Smith noted that the behavioral health team has grown significantly, and the behavioral health provider at Fremont has been instrumental in supporting integrated care at that site.

There were no further questions.

A motion was made by Member Coca, seconded by Member Macias-Villa, and carried unanimously to Accept the September 2025 Year to Date Financial Report, as presented.

2. Receive, Discuss and Approve the Southern Nevada Community Health Center Governing Board Committee Memberships; direct staff accordingly or take other action as deemed necessary (for possible action)

Mr. Randy Smith presented the proposed committee memberships for calendar year 2026. Mr. Smith provided a brief review of the descriptions of the existing standing committees noting that each board member must serve on at least one committee and committee membership is capped at three members. Ms. Bellamy contacted board members to gauge interest in participation on the committees.

The board reviewed and discussed the committee membership for calendar year 2026. The Chair also expressed her willingness to serve on additional committees to ensure full participation.

Member Coca reminded board members that, aside from the Finance Committee, which meets monthly, other committees meet less frequently, alleviating concerns about time commitments. Mr. Smith confirmed that committee charters were reviewed and meeting frequency were reduced where possible.

Ms. Bellamy advised of the proposed committee assignments as follows:

CY26 GOVERNING BOARD COMMITTEE					
Executive Committee	Chief Executive Officer Annual Review Committee	Finance and Audit	Quality, Credentialing & Risk Management Committee	Nominations Committee	Strategic Planning Committee
Donna Feliz-Barrows	Dave Neldberg	Marie Dukes	Sara Hunt	Dave Neldberg	Rebeca Aceves
Jasmine Coca	Jose Melendrez	Jasmine Coca	Rebeca Aceves	Jose Melendrez	Jasmine Coca
Sara Hunt	Jasmine Coca	Ashley Brown	Erin Breen	Erin Breen	Erin Breen
		Blanca Macias-Villa			

There were no further questions.

A motion was made by Member Melendrez, seconded by Member Coca, and carried unanimously to approve the Southern Nevada Community Health Center Governing Board Committee Memberships, as presented.

3. Receive, Discuss and Approve the 2026 Governing Board Meeting Schedule; direct staff accordingly or take other action as deemed necessary (for possible action)

Mr. Randy Smith presented the results of the meeting schedule survey conducted by Ms. Bellamy. The survey gathered board members' preferences for meeting days and times. An analysis of responses indicated the existing meeting time works best for most of the board members, which is the third Tuesday of each month from 2:30 p.m. to 4:00 p.m.

Mr. Smith reviewed the proposed meeting schedule for 2026, noting that the December meeting will be held earlier and occur on the second Tuesday, December 8, 2026.

Mr. Smith reminded the board that the next board meeting will be held on December 9, 2025.

Mr. Smith expressed his sincere appreciation to all board members for their commitment and willingness to serve, acknowledging the time and effort each member dedicates despite busy schedules. He reaffirmed his commitment to working collaboratively to ensure the board experience is meaningful and productive, while creating opportunities for in-person engagement when appropriate.

Mr. Smith shared that preliminary discussions have taken place with his team regarding leveraging National Health Center Week in August as a potential occasion for an in-person gathering. This event could also serve as an opportunity to conduct the Chief Executive Officer's annual evaluation earlier in the year. Mr. Smith noted that further dialogue will occur as plans develop.

There were no further questions or concerns from the board.

A motion was made by Member Aceves, seconded by Member Breen, and carried unanimously to approve the 2026 Governing Board Meeting Schedule, as presented.

4. Receive, Discuss and Approve Updates to CHCA-002 Sliding Fee Policy; direct staff accordingly or take other action as deemed necessary (for possible action)

David Kahananui, FQHC Administrative Manager, provided an overview of proposed updates to the CHCA-002 Sliding Fee Policy. Mr. Kahananui noted that the revisions were made to ensure compliance with Title X program requirements and to reinforce the health center's commitment to providing services regardless of a patient's ability to pay.

Key Policy updates include:

 Compliance with Title X Requirements: Added language addressing emancipated and unemancipated minors, specifying that their eligibility for sliding fee discounts will be based on their own resources.

- Definition of Low-Income Individuals: Introduced a new section under procedures to clearly define low-income status.
- Income Verification Process: Incorporated the use of a Certificate of Income to verify income in a manner that avoids creating barriers to care.
- Income Thresholds: Updated thresholds to reflect program-specific requirements:
 - o Family Planning Program: 250% of Federal Poverty Level (FPL)
 - o Ryan White Program: 400% of FPL
 - o Health Center Program Fee: 200% of FPL

Mr. Kahananui emphasized that sliding fee discounts apply uniformly to all patients, regardless of insurance status, and cover all services within the HRSA-approved scope of project.

There were no further questions.

A motion was made by Member Melendrez, seconded by Member Coca, and carried unanimously to approve Updates to CHCA-002 Sliding Fee Policy, as presented.

5. Receive, Discuss and Approve Updates to CHCA-010 Informational and Educational Materials Review and Approval Process; direct staff accordingly or take other action as deemed necessary (for possible action)

Mr. Dave Kahananui, FQHC Administrative Manager, presented proposed updates to the Informational and Educational Materials Review and Approval Process Policy (CHCA 010). Mr. Kahananui noted that approval of this policy will resolve the final Title X program finding from the recent compliance review. Mr. Kahananui advised of the purpose and scope of the policy.

Key policy updates include:

- Policy Title Revision: Updated name to "Informational and Educational Materials Review and Approval Process" for consistency with related policies and procedures.
- Evidence-Based Criteria: Added language requiring materials to be assessed against evidence-based standards.
- Intellectual Property and Grant Acknowledgment: Introduced a review step to ensure materials include proper acknowledgment of intellectual property, data rights, and federal grant support.
- Disclaimer Requirement: Incorporated Title X requirement for disclaimers on all materials and websites funded by Title X, including brochures, flyers, and digital content.
- Advisory Board Representation: Updated language to allow patient representatives to serve as population proxies when the Advisory Board does not meet composition requirements.

Mr. Kahananui emphasized that these updates will enable the health center to begin reviewing all materials for compliance and apply disclaimers where required.

There were no further questions.

A motion was made by Member Melendrez, seconded by Member Neldberg, and carried unanimously to approve Updates to CHCA-010 Informational and Educational Materials Review and Approval Process, as presented.

6. Receive and Discuss the Third Quarter Clinical Performance Measures; direct staff accordingly or take other action as deemed necessary (for possible action)

Felicia Sgovio, Quality Management Coordinator, presented the third-quarter FQHC clinical performance measures. Ms. Sgovio advised that one of the organization's strategic goals for the year is to pursue accreditation as a Patient-Centered Medical Home (PCMH). As part of this process, performance reporting is required at either the clinician or practice level. Based on current progress, the decision was made to share reports at the practice or site-specific level, which will be reflected in the data presented.

Key updates:

- Childhood Immunization Status: Historically, no data was reported for this measure. A new tracker has been implemented to monitor patients who fall within this category.
- Early Entry into Prenatal Care and Birth Weight: These UDS-required measures are being standardized through workflow improvements to capture trimester entry and birth weight data. Manual tracking continues as part of this effort.
- Breast Cancer Screening: Following HRSA reviewer feedback, reporting requirements were clarified, and missed data points are now being captured.
- Tobacco Use Screening and Cessation: Mapping issues previously led to underreporting.
 After corrections, performance improved significantly.

Ms. Sgovio advised the year-over-year comparisons showed improvement across most measures. From Q2 to Q3, notable increases include:

- Depression Screening and Follow-Up Plan: +5.8%
- Weight Assessment and Counseling for Children/Adolescents: +3.6%
- Controlling High Blood Pressure: +2.3%
- Breast Cancer Screening: +2%
- Tobacco Use Screening and Cessation improved from 50.2% to 70%, surpassing the target of 64%.

Ms. Sgovio provided an overview of the following:

- Site comparison data
- 2025 Quality Focus Measures
- Patient Satisfaction Survey results

Ms. Sgovio advised of the Net Promoter Score (NPS), which measures patient satisfaction by asking, "How would you rate the overall care you received from your provider?" on a scale from 0 (worst) to 10 (best). The organization achieved an NPS of 89, reflecting a strong level of patient satisfaction. Additionally, this quarter included the first review of site-specific NPS data, providing valuable insight into performance across locations.

Ms. Sgovio also shared patient comments, noting that feedback continues to be overwhelmingly positive.

Member Coca commented that Ms. Sgovio did a good job and that we like to see good comments from our patients. Member Breen agreed with Member Coca.

No action required.

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)

Member Breen shared details about an upcoming community event, "Save Santa," scheduled for Saturday, December 6, from 11:00 a.m. to 2:00 p.m. at the Boulevard Mall's main court. The event is family-friendly and includes numerous raffles, with prizes such as bicycles and scooters awarded approximately every 15 minutes. Children are encouraged to visit various tables, and organizations are invited to host a table at no cost.

Member Breen further shared that the event also features Santa Claus and a bilingual elf to ensure Spanish-speaking families are accommodated. Parents are welcome to take their own photos with Santa, providing an affordable alternative to traditional holiday photo sessions. Member Breen noted that flyers are available in both English and Spanish and will be shared with board members. She encouraged anyone interested in displaying the flyer or hosting a table to contact her.

Member Breen also provided an update on the "Safe and Warm" initiative, noting that efforts to secure jackets for distribution will intensify in the coming weeks. She will coordinate with Mr. Smith regarding potential press coverage, particularly if commitments are received from local businesses to provide funding. Member Breen expressed interest in hosting a press conference at the Fremont location, as she believes it would be an ideal venue for the jacket distribution event. Additionally, Member Coca may assist with distributing jackets as part of this effort.

X. CEO & STAFF REPORTS (Information Only)

CEO Comments

Mr. Smith shared the following organizational achievements and updates:

- As of October 31, the Health Center has served 11,922 unique patients, surpassing last calendar year's total of 11,501, which was previously a record. This milestone reflects exceptional growth despite a challenging year. With two months remaining, projections indicate the organization may reach 13,000 patients by year-end. For context, in 2022—the CEO's first year—the total number of unduplicated patients served was 7,050, underscoring significant progress in a short period.
- Federal funding for FQHCs, including the National Health Service Corps loan repayment program, has been extended at current levels through January 30, 2026.
- HRSA 340B Program Changes HRSA will pilot a new rebate-based model for 10
 medications in 2026, requiring health centers to pay full cost upfront and seek
 reimbursement later. This change may create cash flow challenges. Dr. Bleak and the
 finance team are analyzing potential financial impacts.
- The Title X project officer has returned following the federal furlough and confirmed receipt of the corrective action plan. Approval of two policies earlier in the meeting addresses audit findings, and remaining steps will be completed promptly.
- A new clinical pharmacist has been hired for the Decatur location, starting December 8th.
 This addition will strengthen pharmacy operations, support medical teams (including PrEP services), and allow Dr. Bleak to focus on administrative and strategic initiatives.
- Recruitment continues for a staff physician at the Fremont site. Efforts include a national search through an employment agency and internal outreach. The goal is to enhance

access to care and provide clinical leadership for mid-level providers, supporting initiatives led by Dr. Carter.

Mr. Smith highlighted that last year marked a significant improvement in employee engagement within the health center, largely due to targeted actions implemented by the management team. Mr. Smith then outlined plans for 2025, which include two short-term goals and one long-term goal:

- Short-Term Goals:
 - Maintain Employee Recognition Program: Each division receives allocated funds to recognize staff through on-the-spot awards and exemplary service awards. The health center uses these funds during monthly all-staff meetings to celebrate achievements. The current year's budget for recognition is approximately \$2,500.
 - 2. Employee Engagement Meetings: Previously, new hires met individually with the CEO to review the FQHC mission and strategic plan. Due to the hiring freeze, this goal has been modified. In 2025, the CEO will meet with employees in small groups to reorient them to the mission, discuss strategic priorities, and gather feedback on successes and areas for improvement.
- Long-Term Goal: Continue advancing initiatives originally developed during the OVS process to strengthen organizational culture and engagement.

Mr. Smith emphasized that these efforts aim to foster a positive work environment, enhance communication, and ensure employees feel valued and connected to the Health Center's mission.

Mr. Smith shared that the Employee Engagement Committee organizes activities throughout the year, including holiday celebrations, and has successfully raised funds to support these initiatives. Management continues to learn from and support the committee, with plans to refine engagement strategies in the coming year.

Mr. Smith also announced details for the Year-End Holiday Party, hosted by the Employee Engagement Committee on Tuesday, December 16, from 1:00 PM to 5:00 PM in the Red Rock conference room. The event will feature a taco bar, Filipino cuisine, games, and activities, providing an opportunity for staff from both sites to gather. Board members are invited to attend, and Ms. Bellamy will follow up to confirm availability. Contributions are welcome but not required as the focus is on celebrating together as a team.

Mr. Smith advised of the following upcoming board activities:

- Marie Dukes will resign in January 2026 due to changes in her availability.
- Former member Father Rafael, also a CPA, is interested in returning. The previous conflict of interest has been resolved. Board members unanimously supported moving his candidacy forward for a vote at the December 9th meeting, following an orientation and application update.
- The next board meeting is on December 9, 2025 and will be virtual.

XI. INFORMATIONAL ITEMS

Community Health Center (FQHC) October 2025 Monthly Report

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 Second Public Comment period was closed.

XIII. ADJOURNMENT

The meeting was adjourned at 3:53 p.m.

Randy Smith Chief Executive Officer - FQHC

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