



MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

January 16, 2024 – 2:30 p.m.

Meeting was conducted In-person and via WebEx Event
Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107
Red Rock Trail Rooms A and B

MEMBERS PRESENT:

Jose L. Melendrez, Chair – Consumer Member (*via Webex*)
Donna Feliz-Barrows, Vice-Chair – Consumer Member (*in person*)
Jasmine Coca – Community Member (*in person*)
Brian Knudsen – Consumer Member (*via Webex*)
Erin Breen – Community Member (*via Webex*)
Luz Castro – Consumer Member (*via Webex*)
Blanca Macias-Villa – Consumer Member (*via Webex*)
Sara Hunt – Community Member (*in person*)

ABSENT:

Scott Black – Community Member, City of North Las Vegas

ALSO PRESENT: LEGAL COUNSEL:

Edward Wyner, Associate General Counsel

CHIEF EXECUTIVE OFFICER:

Randy Smith, CEO

STAFF:

Tawana Bellamy, Andria Cordovez Mulet, Fermin Leguen, Cassius Lockett, Randy Smith, Donnie (DJ) Whitaker, Kim Saner, Tabitha Johnson, Todd Bleak, Donna Buss, David Kahananui, Yin Jie Qin, Merylyn Yegon, Cassondra Major, Jonas Maratita, Jonna Arqueros, Justin Tully, Maya Holmes, Ronique Tatum-Penegar, Rubin Saavedra, Greg Tordjman, Randolph Lockett

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, Administrative Specialist, administered the roll call and confirmed a quorum.

II. PLEDGE OF ALLEGIANCE

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

- III. 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.

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.

Seeing no one, the Chair closed the First Public Comment portion.

IV. ADOPTION OF THE JANUARY 16, 2024 MEETING AGENDA *(for possible action)*

A motion was made by Member Feliz-Barrows, seconded by Member Castro and carried unanimously to approve the January 16, 2024 Meeting Agenda, as presented.

V. 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 19, 2023** *(for possible action)*
- 2. Approve Credentialing and Privileging of Providers Rubin Saavedra, MD and Josefina Ascano, APRN II;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

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

VI. REPORT / DISCUSSION / ACTION

Recommendations from the January 10, 2024 Quality, Credentialing & Risk Management Committee

- 1. Review, Discuss and Approve the Fourth Quarter Quality and Risk Management Reports;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Randy Smith, Chief Executive Officer, provided an overview of the Quality report. Mr. Smith further advised that Cassondra Major, the Quality Management Coordinator, was promoted to Clinical Office Supervisor overseeing the front office staff and functions.

David Kahananui presented the CY23 Risk Management Report. Mr. Kahananui shared that he was working on the CY24 report and will share the results of that report at a future meeting.

A motion was made by Member Feliz-Barrows, seconded by Member Breen, and carried unanimously to approve the Fourth Quarter Quality and Risk Management Reports, as presented.

SNCHC Governing Board

- 2. Receive, Discuss and Accept the November 2023 Year-To-Date Financial Report;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Donnie (DJ) Whitaker, Chief Financial Officer provided an overview of the November 2023 Year-To-Date Financial report as of November 30, 2023.

A motion was made by Member Feliz-Barrows, seconded by Member Breen, and carried unanimously to accept the November 2023 Year to Date Financial Report, as presented.

VII. 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.

VIII. EXECUTIVE DIRECTOR & STAFF REPORTS (Information Only)

- CEO Comments

There were no CEO comments.

- Overview of Medication Costs and 340B Program

Todd Bleak, Pharmacy Services Manager provided an overview of the 340B program and medication costs.

Further to an inquiry from Member Coca regarding Congress to decide on the legislation, Dr. Bleak shared that since 2010 there has been fifty different pieces of legislation introduced regarding changes to the 340B program and none of them have passed and he was not confident about federal changes any time soon.

- Highlights from the December 2023 Operations Report

Mr. Smith introduced the new Medical Director, Dr. Rubin Saavedra. Dr. Saavedra shared a brief summary of his work experience.

Mr. Smith provided some highlights from the December 2023 Operations report. Mr. Smith also introduced Tabitha Johnson as the new Behavioral Health Manager.

Mr. Smith further provided an overview of two additional goals for the Governing Board to consider for the Chief Executive Officer. Chair Melendrez commented that the goals looked great.

Further to an inquiry from Member Hunt regarding the payer mix, Mr. Smith advised that we have eligibility workers that are evaluating those that are uninsured to see if they are Medicaid eligible.

Further to an inquiry from Member Hunt, Mr. Smith shared that clients are referred for assistance in determining eligibility for the ACA insurance plans. Mr. Smith further shared that those clients are also eligible to be placed on the sliding fee schedule.

Further to an inquiry from Member Coca, Mr. Smith advised that patients are identified as uninsured at the time of the appointment, during the screening and if it is an established patient, we already have their information when we are checking them in.

Mr. Smith commented that it would be great to have Mr. Kahananui provide a presentation regarding how patients are identified as uninsured at a future meeting.

Further to an inquiry from Member Hunt regarding a new location at an existing or new site, Mr. Smith shared that there have been some initial conversations, and we have internal resources to help us with that.

Further to an inquiry from Member Feliz-Barrows regarding the HRSA grant opportunity, Mr. Smith shared if we were to pursue this opportunity, we would need to serve at least 75% of the existing unduplicated patients served by that service area. The existing number served there is about 8,000, which would mean that we would need to be serving an additional 6,000 patients and that the goal seem very much within the realm of possibility because we are already graphically in proximity to those patients. Mr. Smith further shared that he feels comfortable that we can do this.

Further to an inquiry from Member Coca regarding clinic hours, Mr. Smith shared that at Decatur the hours are Monday to Thursday, 8 a.m.-6 p.m. and at Fremont, Tuesday to Friday, 8 a.m.-6 p.m. Mr. Smith advised that he is working with the team to increase access in the mornings that would allow us to open at 7 a.m. Mr. Smith further advised that he would seek approval from the board to add the hours to both sites at the February meeting.

Further to an inquiry from Member Coca, Mr. Smith shared patients would be able to fill their prescription at either location, regardless of where they received the service.

IX. INFORMATIONAL ITEMS

- Community Health Center (FQHC) December Operations Reports

X. 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.

XIII. ADJOURNMENT

The Chair adjourned the meeting at 3:42 p.m.

Randy Smith
Chief Executive Officer - FQHC

/tab

AGENDA

SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

January 16, 2024 – 2:30 p.m.

Meeting will be conducted In-person and via Webex Event
Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107
Red Rock Trail Rooms A and B

NOTICE

WebEx Event address for attendees:

<https://snhd.webex.com/snhd/j.php?MTID=m6cb1b2fd34b62e1f2baa6ac2c5cb3d81>

To call into the meeting, dial (415) 655-0001 and enter Access Code: 2556 806 6560

For other governmental agencies using video conferencing capability, the Video Address is:
25568066560@snhd.webex.com

NOTE:

- Agenda items may be taken out of order at the discretion of the Chair.
- The Board may combine two or more agenda items for consideration.
- The Board may remove an item from the agenda or delay discussion relating to an item on the agenda at any time.

I. CALL TO ORDER & ROLL CALL

II. PLEDGE OF ALLEGIANCE

III. 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. 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. **There will be two public comment periods. To submit public comment on either public comment period on individual agenda items or for general public comments:**

- **By Webex:** Use the link above. You will be able to provide real-time chat-room messaging, which can be read into the record by a Community Health Center employee or by raising your hand during the public comment period, a Community Health Center employee will unmute your connection. Additional Instructions will be provided at the time of public comment.
- **By email:** public-comment@snchc.org For comments submitted prior to and during the live meeting. Include your name, zip code, the agenda item number on which you are commenting, and your comment. Please indicate whether you wish your email comment to be read into the record during the meeting or added to the backup materials for the record. If not specified, comments will be added to the backup materials.
- **By telephone:** Call (415) 655-0001 and enter access code 2556 806 6560. To provide public comment over the telephone, please press *3 during the comment period and wait to be called on.

IV. ADOPTION OF THE JANUARY 16, 2024 AGENDA *(for possible action)*

V. **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 19, 2023 (*for possible action*)

2. **Approve Credentialing and Privileging of Providers Rubin Saavedra, MD and Josefina Ascano, APRN II;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

VI. REPORT / DISCUSSION / ACTION

Recommendations from the January 10, 2024 Quality, Credentialing & Risk Management Committee

1. **Review, Discuss and Approve the Fourth Quarter Quality and Risk Management Reports;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

SNCHC Governing Board

2. **Receive, Discuss and Accept the November 2023 Year-To-Date Financial Report;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

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

VIII. CEO & STAFF REPORTS (*Informational Only*)

- CEO Comments
- Overview of Medication Costs and 340b Program
- Highlights from the December 2023 Operations Report

IX. INFORMATIONAL ITEMS

- Community Health Center (FQHC) December Operations Reports

X. **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. **See above for instructions for submitting public comment.**

XI. ADJOURNMENT

NOTE: Disabled members of the public who require special accommodations or assistance at the meeting are requested to notify Tawana Bellamy or Andria Cordovez Mulet in Administration at the Southern Nevada Health District by calling (702) 759-1201.

THIS AGENDA HAS BEEN PUBLICLY NOTICED on the Southern Nevada Health District's Website at <https://snhd.info/meetings>, the Nevada Public Notice website at <https://notice.nv.gov>, and a copy will be provided to any person who has requested one via U.S mail or electronic mail. All meeting notices include the time of the meeting, access instructions, and the meeting agenda. For copies of agenda backup material, please contact Tawana Bellamy or Andria Cordovez Mulet at 280 S. Decatur Blvd, Las Vegas, NV, 89107 or dial (702) 759-1201.

MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING December 19, 2023 – 2:30 p.m. Meeting was conducted via WebEx Event

- MEMBERS PRESENT:** Donna Feliz-Barrows, Vice-Chair – Consumer Member
Jasmine Coca – Community Member, Catholic Charities of Southern Nevada
Brian Knudsen – Consumer Member
Blanca Macias-Villa – Consumer Member
Sara Hunt – Community Member
- ABSENT:** Jose L. Melendrez, Chair – Consumer Member
Luz Castro – Consumer Member
Erin Breen – Community Member, UNLV Vulnerable Road Users Project
Scott Black – Community Member, City of North Las Vegas
- ALSO PRESENT:**
- LEGAL COUNSEL:** Heather Anderson-Fintak, General Counsel
- EXECUTIVE DIRECTOR:** Fermin Leguen, MD, MPH, District Health Officer
- STAFF:** Tawana Bellamy, Andria Cordovez Mulet, Randy Smith, Donnie (DJ) Whitaker, Yin Jie Qin, Edward Wyner, Jonas Maratita, Kyle Parkson, Justin Tully

I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada Community Health Center (SNCHC) Governing Board Meeting to order at 2:32 p.m. Tawana Bellamy, Administrative Secretary, administered the roll call and did not confirm a quorum.

Heard out of order.

III. PLEDGE OF ALLEGIANCE

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. OATH OF OFFICE

The Oath of Office was administered to member Blanca Macias-Villa.

Heard out of order.

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. CHIEF EXECUTIVE OFFICER & STAFF REPORTS (Information Only)

- CEO Comments
There were no CEO comments.
- Highlights from the November 2023 Operations Report
Mr. Smith presented highlights from the November 2023 Operations report.

*Member Coca joined the meeting at 2:38 p.m.
Ms. Bellamy confirmed a quorum.*

- 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 portion.

V. ADOPTION OF THE DECEMBER 19, 2023 MEETING AGENDA (for possible action)

A motion was made by Member Hunt, seconded by Member Knudsen and carried unanimously to approve the December 19, 2023 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:** November 21, 2023 (for possible action)
2. **Petition #01-24: Approve the amendment to extend the lease agreement between All Saints' Episcopal Church (ASEC) and Southern Nevada Community Health Center (SNCHC) for one year to December 31, 2024.** direct staff accordingly or take other action as deemed necessary (for possible action)
3. **Approve Credentialing and Privileging of Providers Rosanne Sugay, MD, MPH, AAHIVS and Victoria Allen, APRN I;** direct staff accordingly or take other action as deemed necessary (for possible action)

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

VII. REPORT / DISCUSSION / ACTION

1. **Receive, Discuss and Accept the October 2023 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 October 2023 Year to Date Financial report as of October 31, 2023 with the following highlights.

- Total Actual FQHC Revenue was \$10.2M
- Total Actual Salaries and Benefits Expenses was \$3.8M
- Total Actual Other Operating Expenses was \$5.6M
- Total Indirect Cost Allocations and Transfers In/Out Actual was \$2.3M

- Budgeted Net position was negative \$2.3M, Actual Net Position was negative \$1.6M and positive variance was \$714K
- Patient Encounters by Department – Year-Over-Year Comparison
 - FY2023 Total: 9,850
 - FY2024 Total: 9,199
- Patient Encounters by Clinic
 - Decatur (Main) – FY2023: 9,004, FY2024: 7,805 – 13% decrease
 - Fremont – FY2023: 846, FY2024: 1,394 – 65% increase (opened August 30, 2023)

Ms. Whitaker further reviewed the Revenue and Expenses by Department and the Report by Categorization, which explains what was included in each statement category.

A motion was made by Member Knudsen, seconded by Member Hunt, and carried unanimously to accept the October 2023 Year-To-Date Financial Report, as presented.

- 2. Review, Discuss and Approve the Update of the Executive Director Title to the Chief Executive Officer in the Governing Board Bylaws;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

Randy Smith advised the current bylaws identify the HRSA project director position title as the executive director. The board approved Mr. Smith as the new project director with the chief executive officer title at the November Governing Board meeting . Mr. Smith shared that staff have gone through the process of identifying where executive director title was used in the bylaws and replaced them with chief executive officer title. Mr. Smith further requested the board to consider and approve the changes to the bylaws.

A motion was made by Member Coca, seconded by Member Knudsen, and carried unanimously to approve the changes to the Executive Director title to Chief Executive Officer in the Governing Board Bylaws, as presented.

X. INFORMATIONAL ITEMS

- Community Health Center (FQHC) November Operations Reports

- 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.

XII. ADJOURNMENT

The Chair adjourned the meeting at 3:03 p.m.

Randy Smith
Chief Executive Office, FQHC

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Governing Board Meeting

January 16, 2024

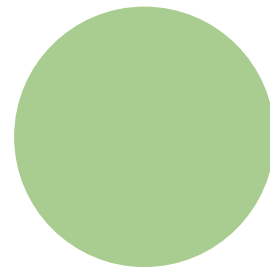


SOUTHERN NEVADA
Community
HEALTH CENTER

AT THE SOUTHERN NEVADA HEALTH DISTRICT



Quality Report



Cassandra Major, MBA, CHW I, CPC, NCMA

Clinical Office Supervisor

January 10, 2024

Quality Measure Focus Data

January – December

- Controlling High Blood Pressure: 63.2% (50.84%)
- Poor Controlled Hemoglobin A1c (HbA1c): 38.5% (41.45%)
- HIV Screening: 77.2% (52.55%)
- HIV Linkage to Care: 91.1% (94.69%)
- Tobacco Use Screening and Cessation Intervention: 45.0% (0.14%)

() = 2022 UDS

Preventative Screenings Data

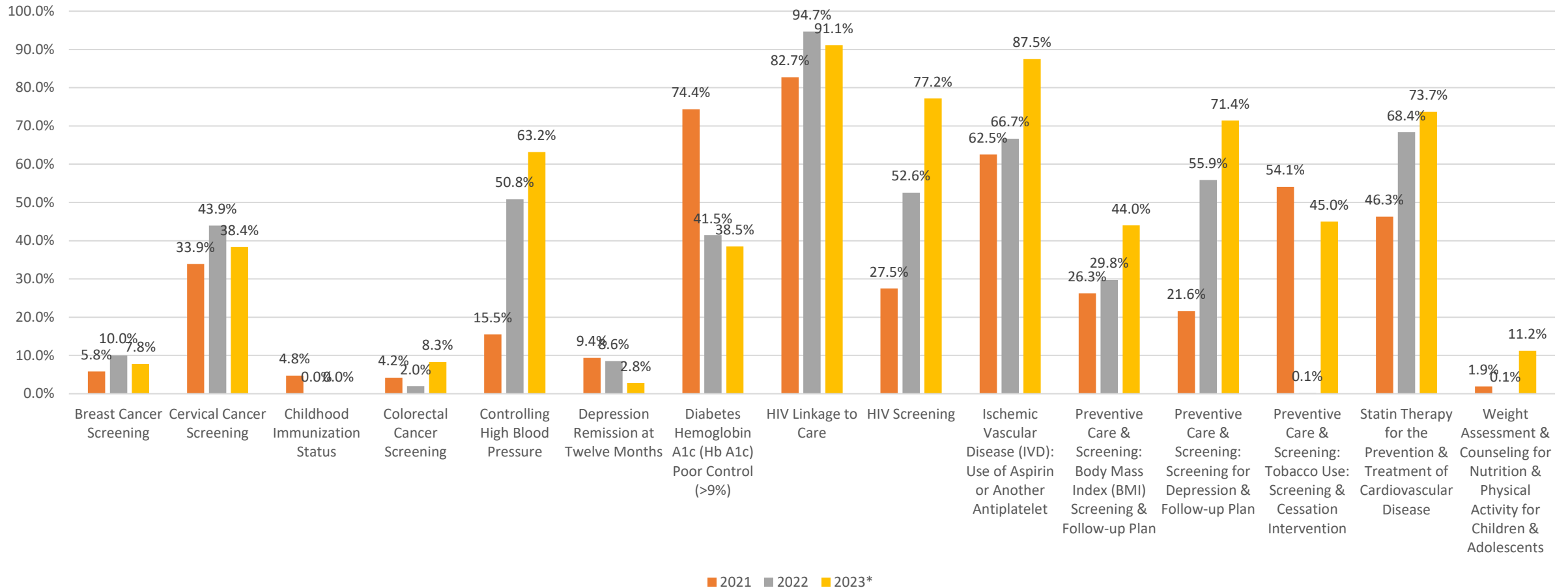
January – December

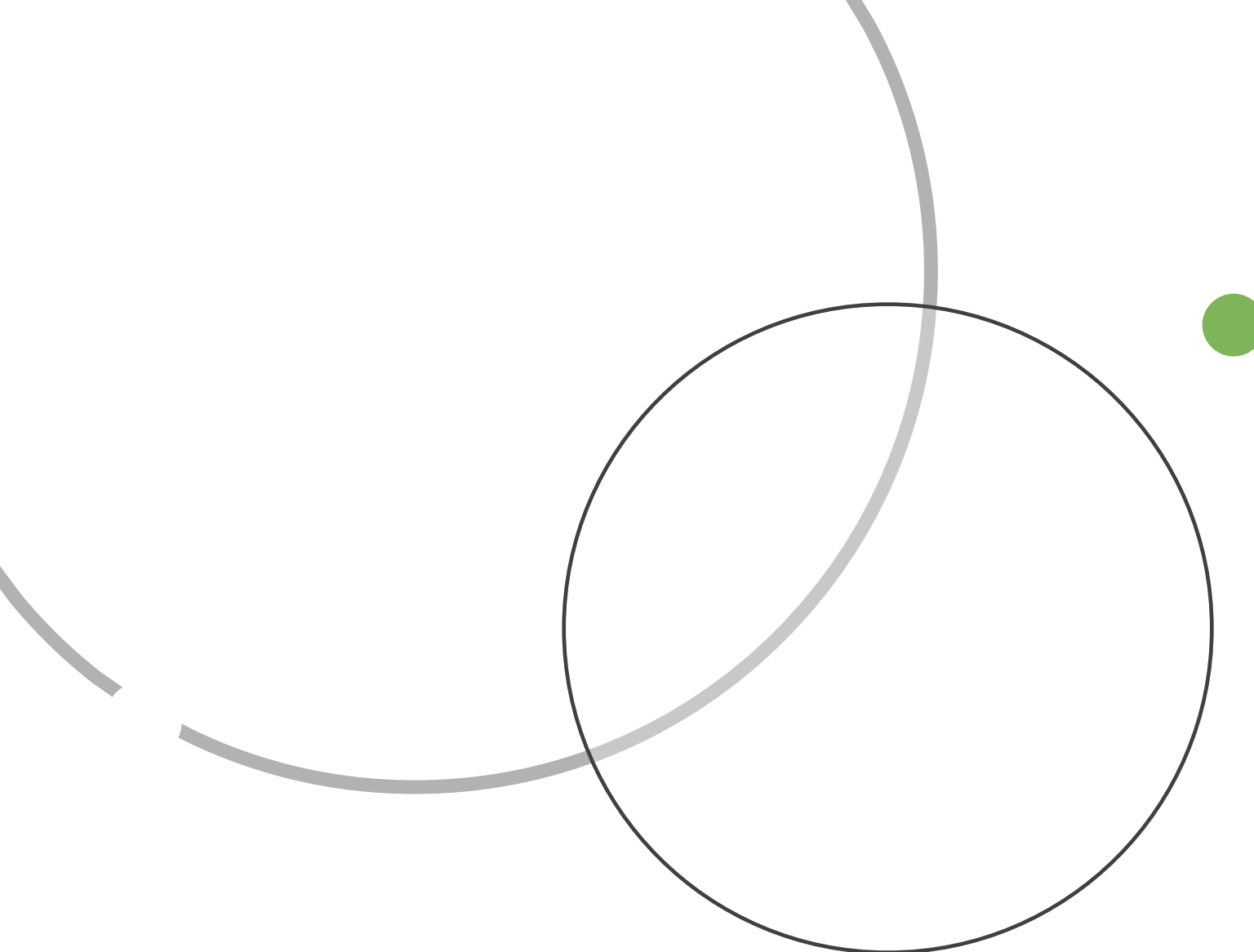
- BMI Screen & Follow-up
 - 44.0% (29.76%)
- Cervical Cancer Screen
 - 38.4% (43.94%)
- Colorectal Cancer Screen
 - 8.3% (1.96%)
- Depression Screen
 - 71.4% (55.88%)

() = 2022 UDS

Year by Year Comparison

UDS Measures

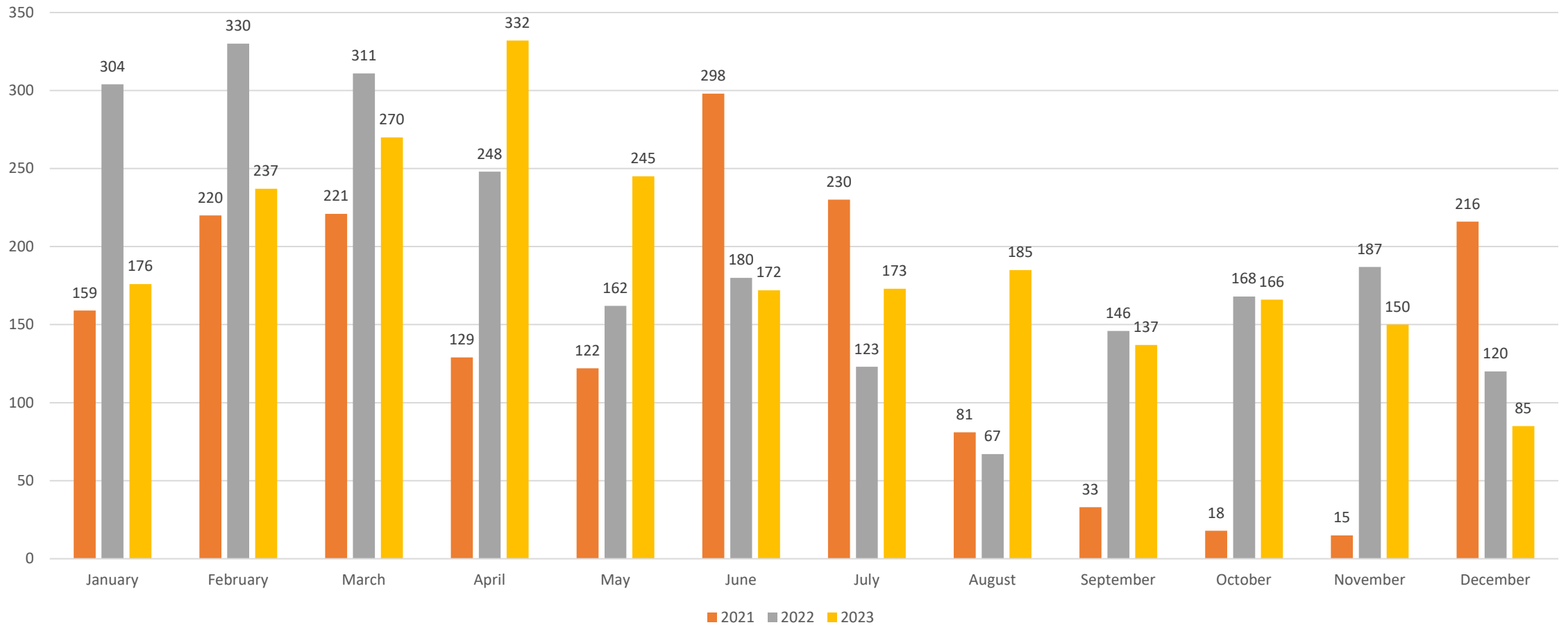




Survey

Participation Responses

Survey Participation Rates



Net Promoter Score

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

94
Responses

123 Numbers
Question Type

79
Net Promoter Score (NPS)



4
Scale 0 - 6

12
Scale 7 - 8

78
Scale 9 - 10

October

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

156
Responses

123 Numbers
Question Type

87
Net Promoter Score (NPS)



4
Scale 0 - 6

12
Scale 7 - 8

140
Scale 9 - 10

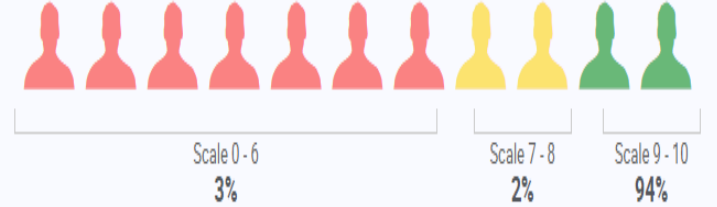
November

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

89
Responses

123 Numbers
Question Type

91
Net Promoter Score (NPS)



3
Scale 0 - 6

2
Scale 7 - 8

84
Scale 9 - 10

December

Risk Management

David Kahananui, FQHC Administrative Manager



CY23 Risk Management Report

CY23 Goals	CY22 Baseline	CY23 Activities (What, Who, When)	CY23 Performance
# of Medication Errors			
Goal #1: Reduce medication errors to 0.	Seven (7) errors	<ul style="list-style-type: none"> Implementation of the vaccine administration training and competency checklist, which is reviewed one by one during employee evaluation, and updated by the supervisor annually. Annual vaccine administration training every September organized and facilitated by the Vaccine Coordinator. 	Q1: 0 Q2: 1 Q3: 1 Q4: 1 CY23: 3 Result: 4 fewer in CY23 than in CY22
# of Bluebird responses under 2 Minutes			
Goal #2: Reduce delayed response time for Dr. Bluebird events by 50% year over year.	5 bluebird incidents – 25% of which had a delayed response time at or longer than 2 minutes	<ul style="list-style-type: none"> Clinical staff and Chief Nurse are working to revise the current policy for medical events, that will include training for staff responding to medical events. This is currently in process and should be ready for presentation in Q3. Inspect and verify the crash carts are labeled and stocked with supplies. Mapping of AEDs and provide biannual training for use of AEDs when BLS licenses are renewed. 	Q1: 7/7 < 2-minute response Q2: 6/6 < 2-minute response Q3: 6/6 < 2-minute response Q4: 5/6 < 2-minute response CY23: 24/25 < 2-minute response Result: 4% late responses in 2023 vs. 25% late responses in 2022
# of Employee Injuries			
Goal #3: Reduce the number of physical safety findings by 5%.	12 findings and 17 recommendations made from a legal and liability institute, who performed a safety and security assessment in Sept of 2022 1 employee injury in 2022	<ul style="list-style-type: none"> Director of Facilities and Security organized the train the trainer program for safety and security, and de-escalation, which will occur in Q3 of 2023. Working with a vendor to update internal and external camera coverage. This is currently in progress and should be complete by Q3. Director of Facilities and Security and the Safety Officer will organize a way to monitor safety and security on a regular basis by Q3. 	Q1: 1 Q2: 0 Q3: 1 Q4: 0 CY23: 2 Result: 2 employee injuries in CY23 vs. 1 in CY22
# of Incident Reports Completed			
Goal #4: Improve the reporting of actual or potential incidents.	15 total incidents reported in CY22	<ul style="list-style-type: none"> FQHC Operations Officer to review and revised as needed the current Incident Reporting policy and procedure. – June 2023 FQHC Quality Improvement Coordinator to review and revise as needed the current Incident Reporting form. – June 2023 FQHC Operations Officer to facilitate the completion of division-wide training on the current/revised Incident Reporting policy, procedure, and form. – July 2023 	Q1: 16 Q2: 9 Q3: 18 Q4: 22 CY23: 65 Result: 65 incident reports submitted in CY23 vs 15 incident reports in CY22 333% increase in reporting



Questions?

Request to accept the Fourth Quarter Quality and Risk Management Report and Approve Recommendation to the SNCHC Governing Board on January 16, 2024.



Financial Report

Results as of November 30, 2023

All Funds/Divisions

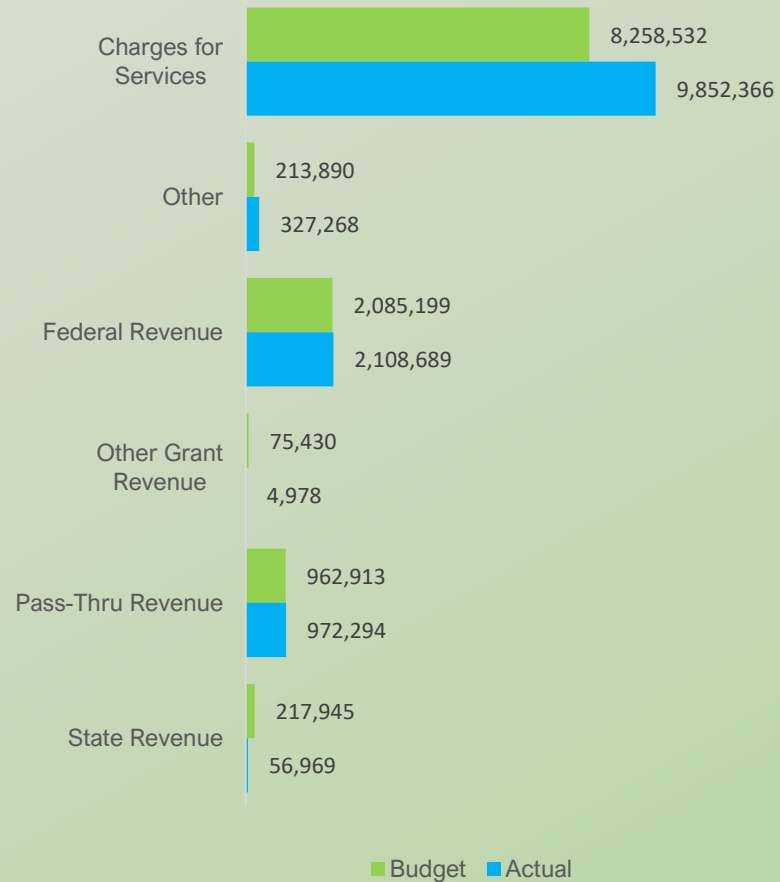
Activity	Budget as of November	Actual as of November	Variance	%	
Charges for Services	8,258,532	9,852,366	1,593,834	19%	
Other	213,890	327,268	113,378	53%	
Federal Revenue	2,085,199	2,108,689	23,490	1%	
Other Grant Revenue	75,430	4,978	(70,452)	-93%	1
Pass-Thru Revenue	962,913	972,294	9,381	1%	
State Revenue	217,945	56,969	(160,976)	-74%	1
Total FQHC Revenue	11,813,909	13,322,564	1,508,655	13%	
Salaries	3,827,896	3,575,396	(252,500)	-7%	} 2
Taxes & Fringe Benefits	1,696,185	1,581,508	(114,677)	-7%	
Travel & Training	39,403	15,530	(23,872)	-61%	
Total Salaries & Benefits	5,563,484	5,172,434	(391,050)	-7%	
Supplies	5,459,457	6,951,970	1,492,513	27%	3
Capital Outlay	4,167	34,399	30,233	726%	
Contractual	925,852	417,899	(507,953)	-55%	4
Total Other Operating	6,389,476	7,404,268	1,014,792	16%	
Indirect Costs/Cost Allocations	2,814,572	1,389,582	(1,424,990)	-51%	} 5
Transfers IN	(591,564)	(225,631)	365,932	-62%	
Transfers OUT	572,334	225,631	(346,703)	-61%	
Total Transfers	2,795,343	1,389,582	(1,405,760)	-50%	
Net Position	(2,934,393)	(643,720)	2,290,673	-78%	

NOTES:

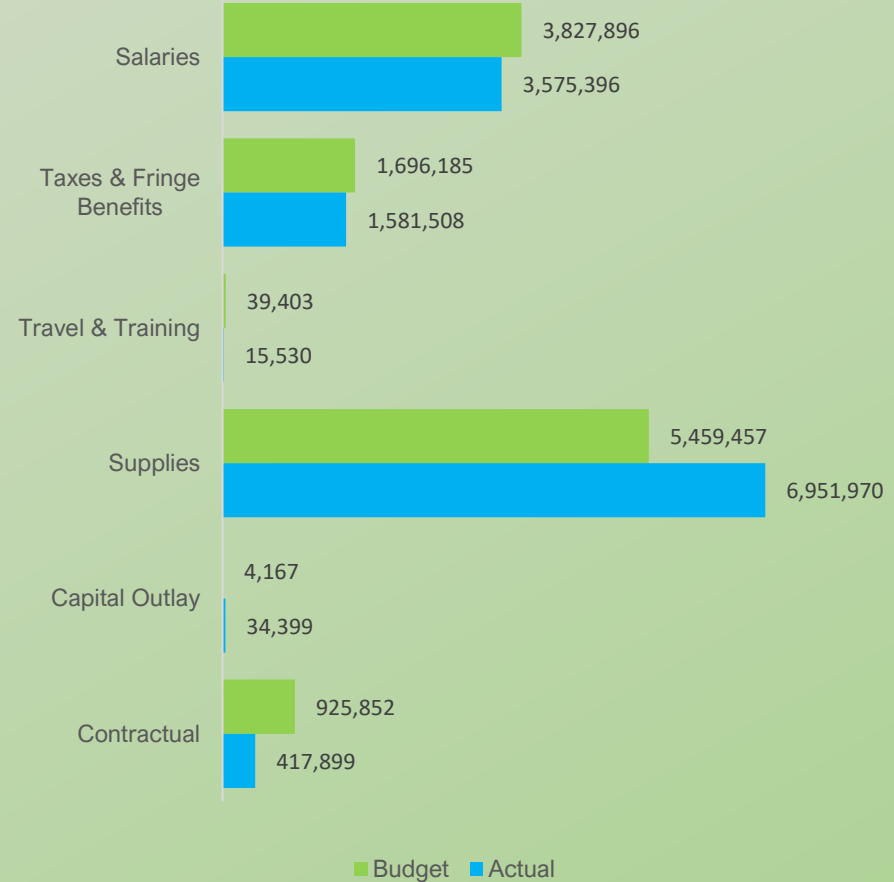
- 1) GRANT REVENUE IS LAGGING BUDGET EXPECTATIONS DUE TO DELAYED EXPENDITURE OF AWARDS.
- 2) EMPLOYMENT BUDGET INCLUDES ANTICIPATED FY24 HIRING OF MULTIPLE POSITIONS (MEDICAL DIRECTOR, PHARMACIST, PHARMACY TECHNICIAN) WHICH WERE NOT FILLED AS OF NOVEMBER 2023.
- 3) PHARMACY MEDICATIONS CONTINUE TO DRIVE INCREASED SUPPLIES EXPENSE DUE TO INCREASED PATIENT ENCOUNTERS AND MEDICATION INFLATION.
- 4) SIGNIFICANT BUDGETED CONTRACTS FOR THE YEAR HAVE NOT BEGUN AS OF NOVEMBER 2023.
- 5) BUDGET WILL BE UPDATED TO REFLECT THE REVISED COST ALLOCATION IN THE JANUARY AUGMENTATION.

Revenues & Expenses

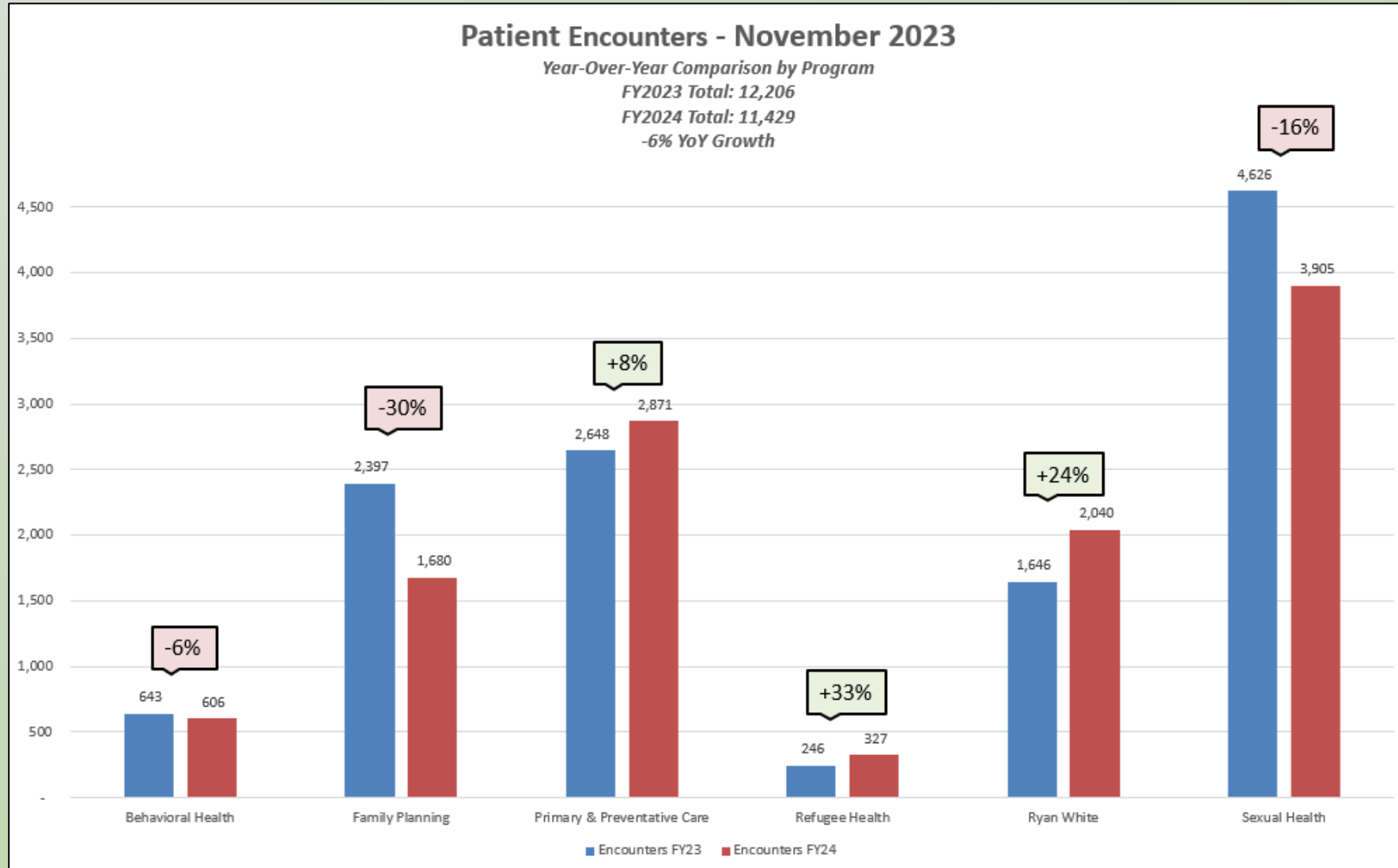
FQHC Total Revenue by Type



FQHC Total Expense by Type

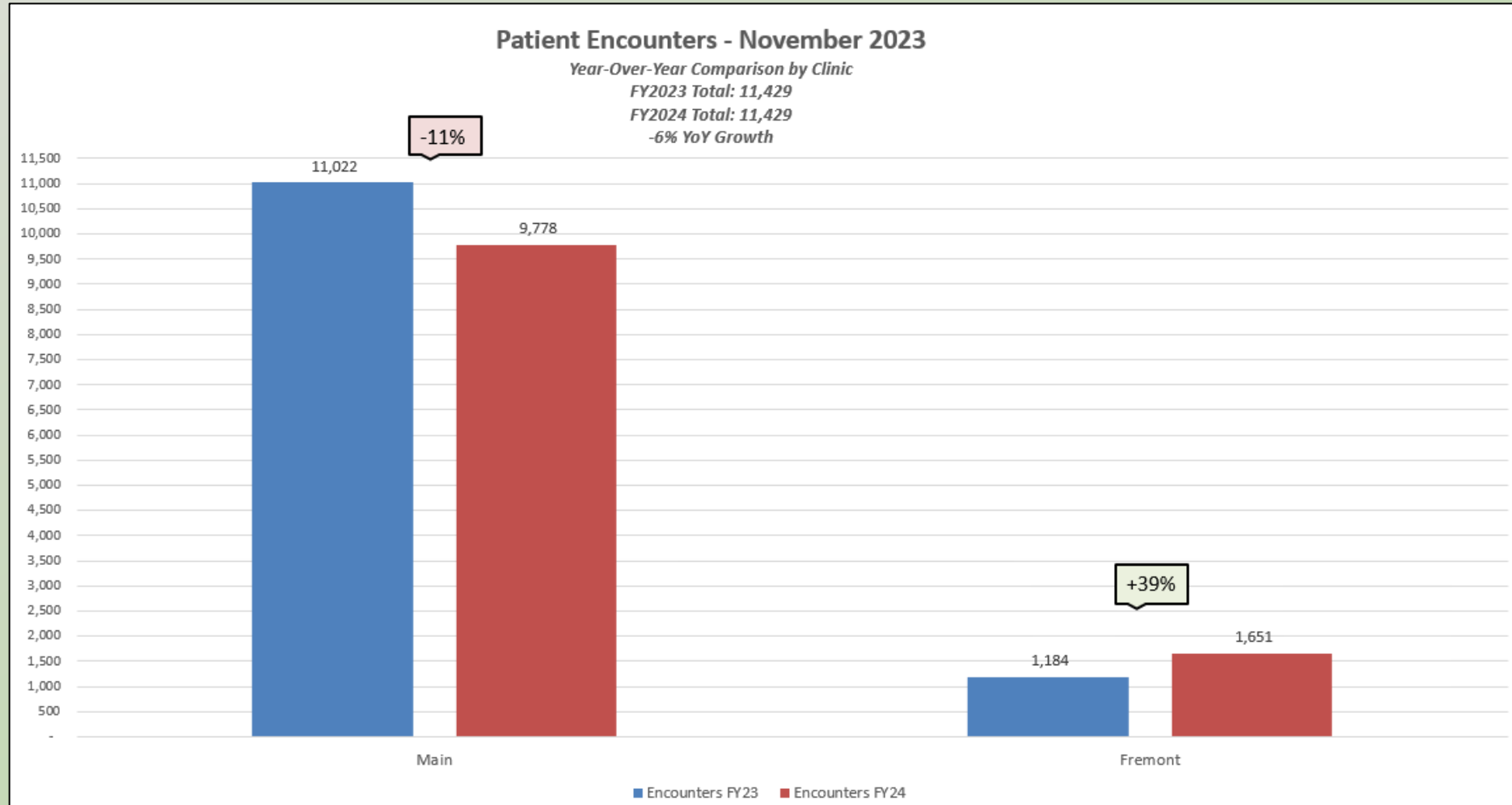


Patients Encounters by Department



NOTE: SEXUAL HEALTH WAS MOVED TO FQHC IN JULY 2023 (FISCAL YEAR 2024). PRIOR YEAR DATA IS ACTIVITY FROM DEPARTMENT WHILE UNDER SNHD PRIMARY AND PREVENTATIVE CARE.

Patients Encounters by Clinic



NOTE: FREMONT CLINIC OPENED ON AUGUST 30TH, 2022.

Revenue by Department

Department	Budget as of November	Actual as of November	Variance	%
Charges for Services, Other, Wrap				
Family Planning	189,497	175,492	(14,005)	-7%
Pharmacy	6,203,188	8,752,845	2,549,657	41%
Oral Health (Dental)	62,047	-	(62,047)	-100%
Primary Care	820,109	175,403	(644,706)	-79%
Ryan White	170,637	161,219	(9,418)	-6%
Refugee Health	52,973	49,235	(3,738)	-7%
Behavioral Health	216,466	70,909	(145,557)	-67%
Administration	208,882	327,268	118,386	57%
Sexual Health	548,624	467,263	(81,361)	-15%
OPERATING REVENUE	8,472,423	10,179,634	1,707,212	20%
Grants				
Family Planning	933,261	778,939	(154,322)	-17%
Pharmacy	-	-	-	0%
Oral Health (Dental)	-	-	-	0%
Primary Care	1,394,935	1,091,571	(303,364)	-22%
Ryan White	895,739	1,150,406	254,667	28%
Refugee Health	105,695	94,954	(10,741)	-10%
Behavioral Health	-	-	-	0%
Sexual Health	11,857	27,060	15,203	128%
SPECIAL REVENUE	3,341,486	3,142,930	(198,556)	-6%
TOTAL REVENUE	11,813,909	13,322,564	1,508,655	13%

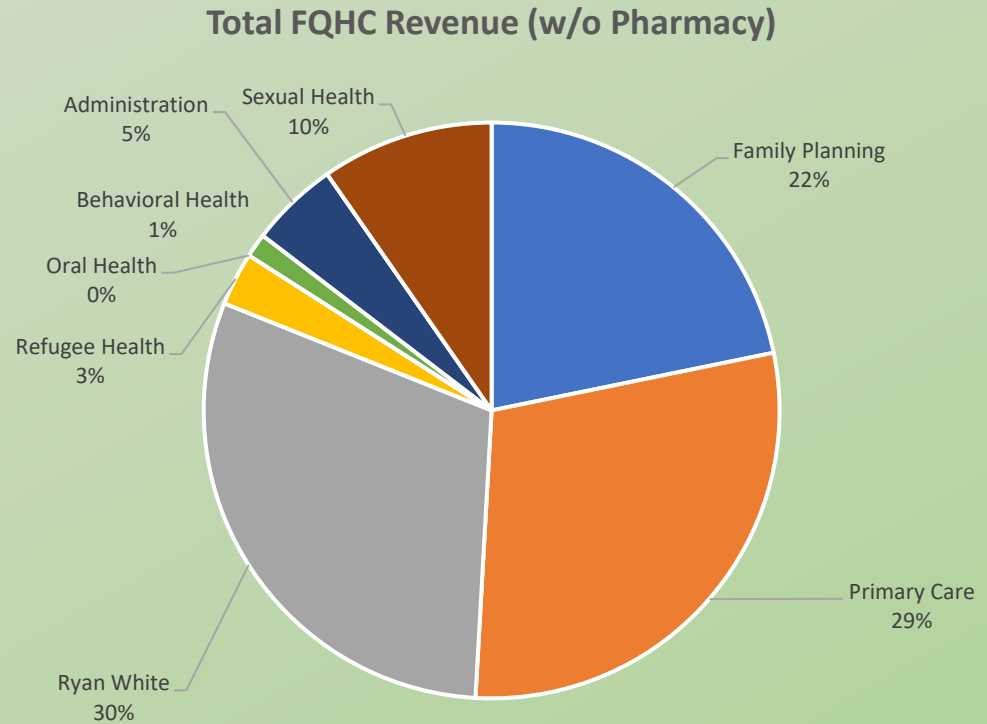
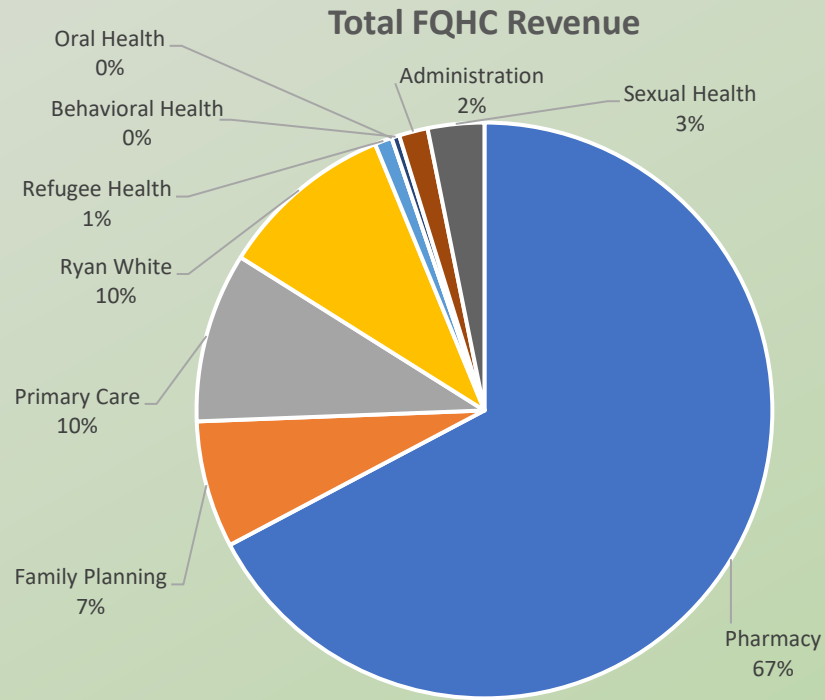
- 1
- 2
- 3
- 4
- 5
- 4
- 6
- 7
- 6
- 7

NOTES:

- 1) ADDITIONAL PATIENT ENCOUNTERS ARE DRIVING MORE REVENUE AND REIMBURSABLE EXPENSES VIA THE PHARMACY. BUDGET WILL BE INCREASED IN AUGMENTATION.
- 2) SERVICES NOT YET OPERATIONAL IN NOVEMBER 2023.
- 3) PATIENT VOLUME LAGGING EXPECTATIONS DUE TO OPEN POSITIONS LIMITING CAPACITY. ABOVE AVERAGE PATIENT "NO SHOWS" IN FY24 IMPACTING SCHEDULING.
- 4) PATIENT VOLUME LAGGING EXPECTATIONS DUE TO LESS-THAN-EXPECTED DEMAND. ABOVE AVERAGE PATIENT "NO SHOWS" IN FY24 IMPACTING SCHEDULING.
- 5) WRAP REVENUE FROM STATE POSTED TO ADMINISTRATION "OTHER REVENUE" CATEGORY SINCE IT IS NOT BROKEN DOWN BY PROGRAM/CLAIM WHEN PAID BY STATE.
- 6) GRANT REVENUES ARE TRAILING BUDGET DUE TO PENDING ONBOARDING OF GRANT-FUNDED POSITIONS AND ASSOCIATED REVENUE AND REIMBURSABLE EXPENSES.
- 7) NO BUDGETED GRANT ACTIVITY FOR FY 2024.

Revenue by Department

(With and without Pharmacy)



Expenses by Department

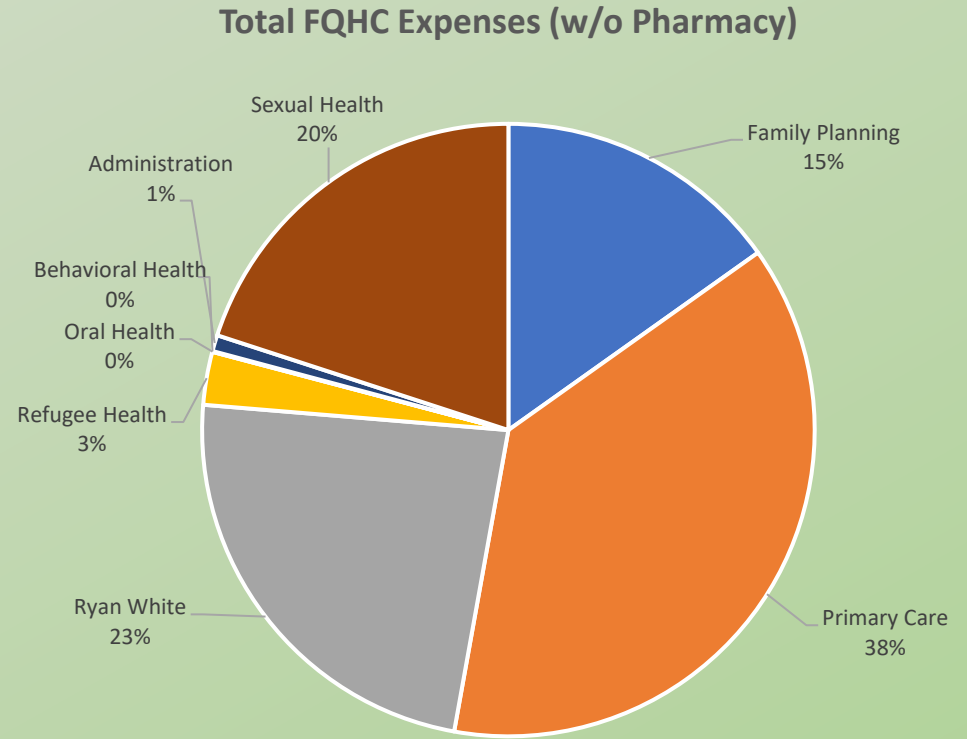
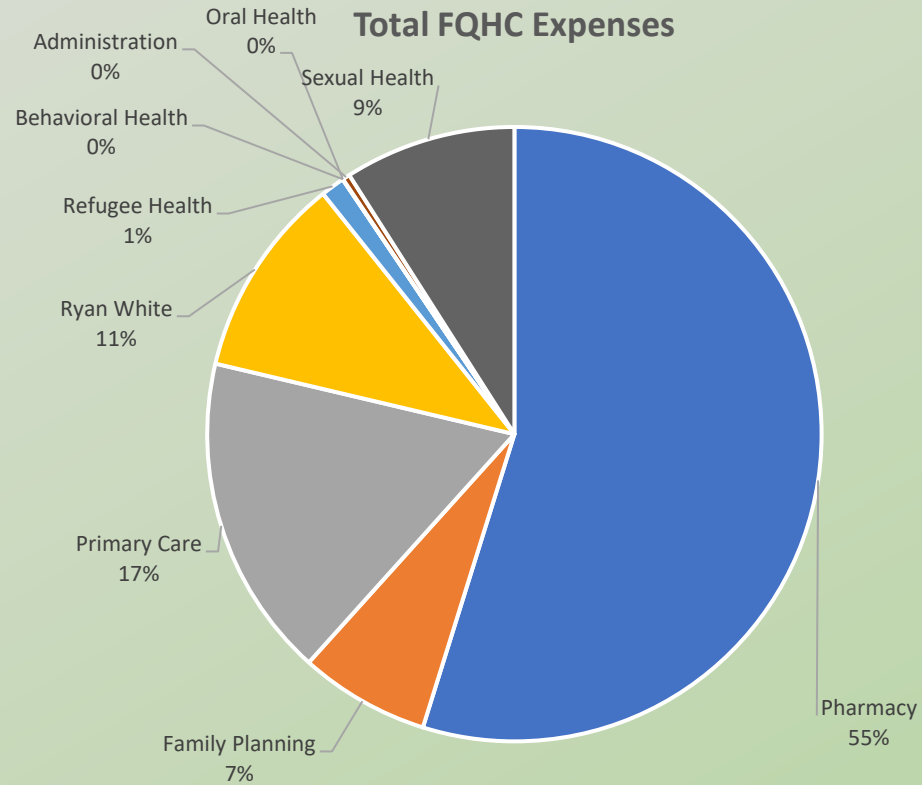
Department	Budget as of November	Actual as of November	Variance	%
Employment (Salaries, Taxes, Fringe)				
Family Planning	786,382	708,776	(77,606)	-10%
Pharmacy	224,537	133,306	(91,231)	-41%
Oral Health (Dental)	-	-	-	0%
Primary Care	2,199,753	1,882,568	(317,184)	-14%
Ryan White	1,028,766	1,222,004	193,238	19%
Refugee Health	74,543	133,311	58,768	79%
Behavioral Health	139,657	2,381	(137,275)	-98%
Administration	94,634	44,113	(50,521)	-53%
Sexual Health	975,810	1,030,444	54,634	6%
Total Personnel Costs	5,524,081	5,156,904	(367,177)	-7%
Other (Supplies, Contractual, Capital, etc.)				
Family Planning	255,422	153,009	(102,413)	-40%
Pharmacy	4,955,731	6,760,600	1,804,869	36%
Oral Health (Dental)	23,004	-	(23,004)	-100%
Primary Care	878,673	258,264	(620,410)	-71%
Ryan White	119,301	112,514	(6,788)	-6%
Refugee Health	72,777	25,483	(47,294)	-65%
Behavioral Health	5,250	-	(5,250)	-100%
Administration	33,765	4,500	(29,265)	-87%
Sexual Health	84,955	105,430	20,475	24%
Total Other Expenses	6,428,878	7,419,798	990,920	15%
Total Operating Expenses	11,952,959	12,576,702	623,743	5%
Indirect Costs/Cost Allocations	2,814,572	1,389,582	(1,424,990)	-51%
Transfers IN	(591,564)	(225,631)	365,932	-62%
Transfers OUT	572,334	225,631	(346,703)	-61%
Total Transfers & Allocations	2,795,343	1,389,582	(1,405,760)	-50%
TOTAL EXPENSES	14,748,302	13,966,284	(782,018)	-5%

NOTES:

- 1) EXPENSES ARE TRAILING BUDGETED EXPECTATIONS DUE TO GRANT-FUNDED, REIMBURSABLE EXPENSES NOT YET SPENT/OPERATIONALIZED. BH STILL ACTIVELY RECRUITING FOR OPEN POSITION AND RESERVING PORTION OF BUDGET UNTIL THE BH CENTER IS COMPLETED.
- 2) SERVICES NOT YET OPERATIONAL IN NOVEMBER 2023.
- 3) ADDITIONAL STAFF ASSIGNED TO BH TO INCREASE SERVICE OFFERINGS.
- 4) PHARMACY MEDICATIONS CONTINUE TO DRIVE INCREASED SUPPLIES EXPENSE DUE TO INCREASED PATIENT ENCOUNTERS AND MEDICATION INFLATION.

Expenses by Department

(With and Without Pharmacy)



Financial Report Categorization

Statement Category – Revenue	Elements
Charges for Services	Fees received for medical services provided from patients, insurance companies, Medicare, and Medicaid.
Other	Medicaid MCO reimbursements (the wrap), administrative fees, and miscellaneous income (sale of fixed assets, payments on uncollectible charges, etc.).
Grants	Reimbursements for grant-funded operations via Local, State, Federal, and Pass-Through grants.

Statement Category – Expenses	Elements
Salaries, Taxes, and Benefits	Salaries, overtime, stand-by pay, retirement, health insurance, long-term disability, life insurance, etc.
Travel and Training	Mileage reimbursement, training registrations, hotel, flights, rental cars, and meeting expenses pre-approved, job-specific training and professional development.
Supplies	Medical supplies, medications, vaccines, laboratory supplies, office supplies, building supplies, books and reference materials, etc.
Contractual	Temporary staffing for medical/patient/laboratory services, subrecipient expenses, dues/memberships, insurance premiums, advertising, and other professional services.
Property	Fixed assets (i.e. buildings, improvements, equipment, vehicles, computers, etc.)
Indirect/Cost Allocation	Indirect/administrative expenses for grant management and allocated costs for shared services (i.e. Executive leadership, finance, IT, facilities, security, etc.)



AT THE SOUTHERN NEVADA HEALTH DISTRICT



Thank you.

BOARD REPORTS

The Southern Nevada Community Health Center Governing Board members may identify and comment on Health Center related issues or ask a question for clarification. Comments made by individual Board members during this portion of the agenda will not be acted upon by the Southern Nevada Community Health Center Governing Board unless that subject is on the agenda and scheduled for action.

Chief Executive Officer Comments

Randy Smith

Chief Executive Officer - FQHC

340B PROGRAM OVERVIEW

Todd Bleak, Pharm.D., MBA
Manager of Pharmacy Services

OBJECTIVES

- Intent & Requirements
- Stakeholders
- Impact
- Challenges
- Outlook

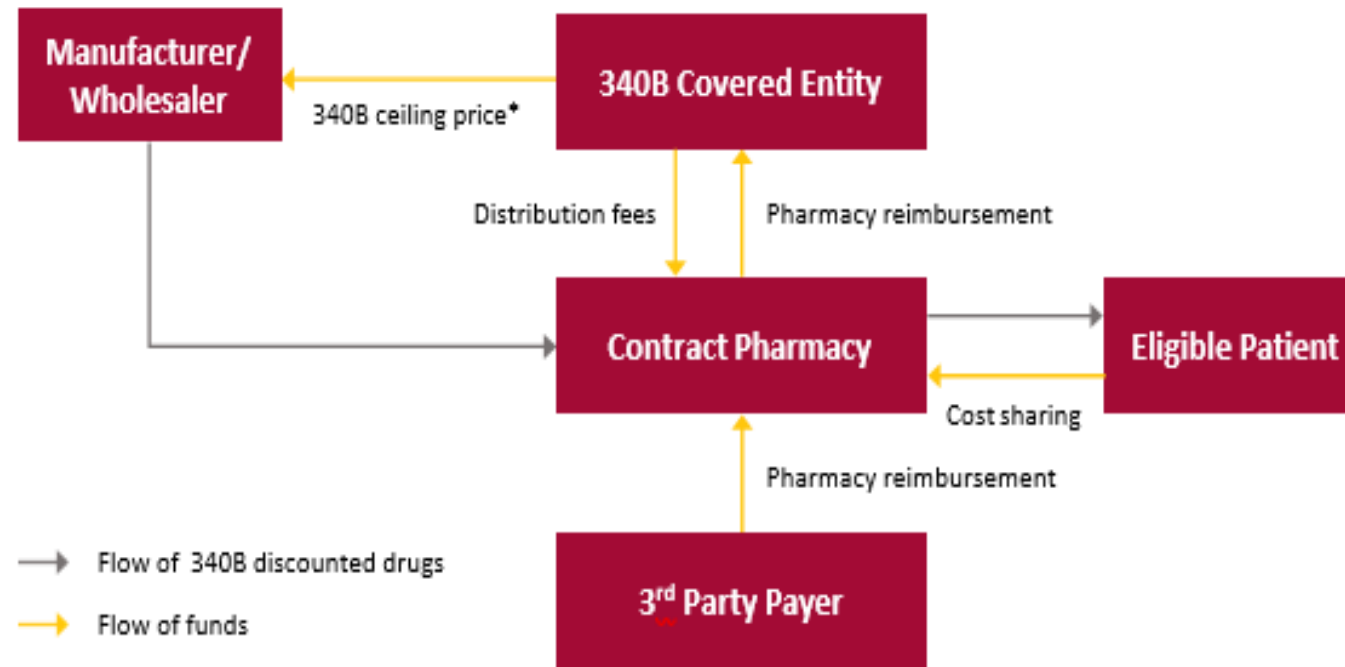
INTENT & REQUIREMENTS

- Intent: “to stretch scarce Federal resources as far as possible, reaching more eligible patients and providing more comprehensive services.”
- Requires drug manufacturers that participate in Medicaid programs to offer certain outpatient drugs to “covered entities” at discounted prices
- Establishes a ceiling price based on a statutory formula
- Prices propriety (20-50% off retail)
- Covered entities compliance (i.e., patient, provider, payer)

STAKEHOLDERS

- Covered Entities (CE)
 - DSH – government & non-profit contract hospitals
 - Children's, Free-standing Cancer, Sole Community, Rural Referral Centers
 - FQHCs & look-alikes
 - Federal grantees (e.g., TB clinics, Ryan White, Title X, STD clinics, Black Lung clinics, ADAP programs)
- Drug Manufacturers
- HRSA
- Prime Vendor Program – Apexus
- Contract Pharmacies

340B FLOW OF FUNDS/DRUGS

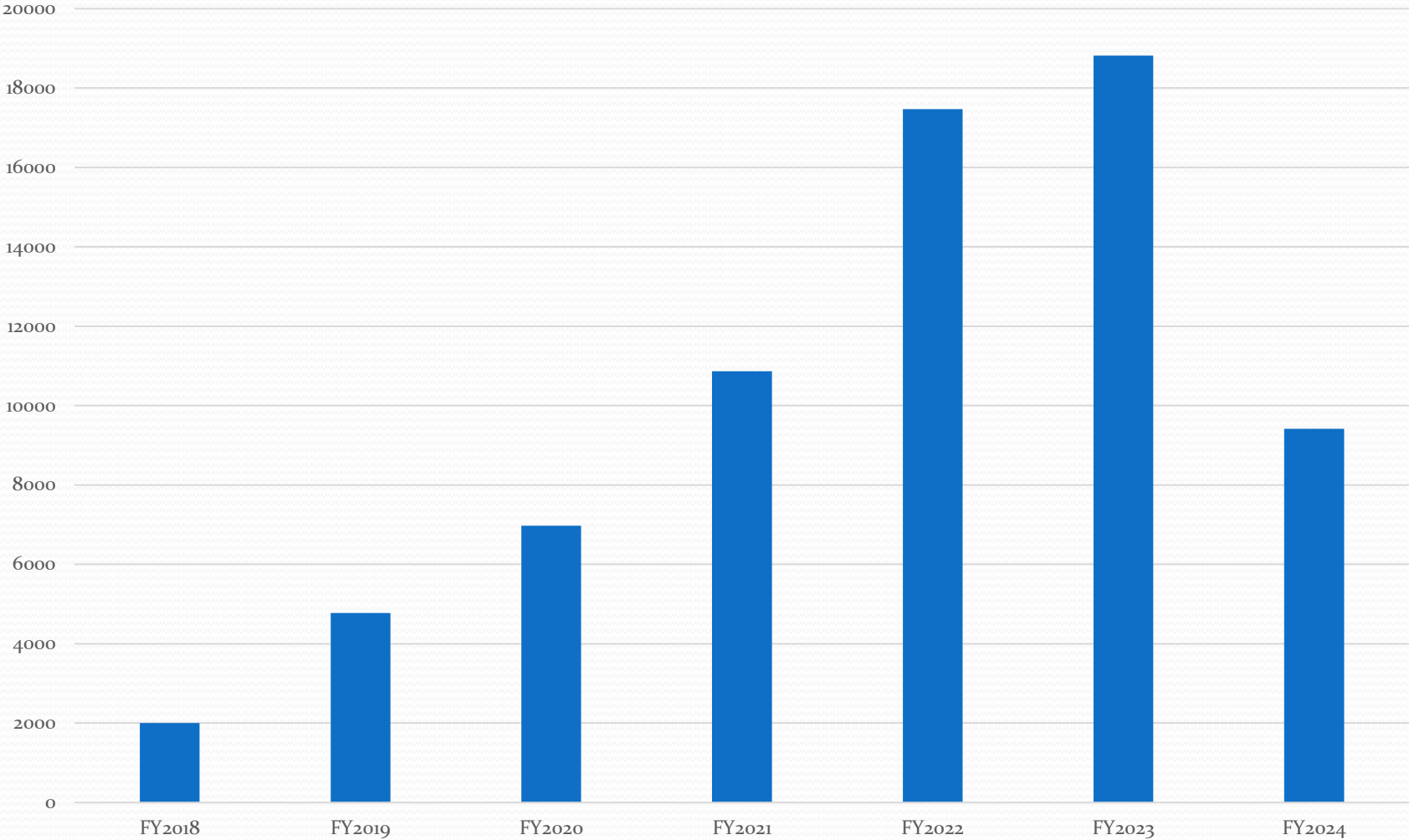


Notes: Adapted from Drug Channels Institute. Flow of funds has been simplified to capture the primary elements of the 340B flow of funds. A more detailed version is available from the Drug Channels Institute: <https://www.drugchannels.net/2019/08/heres-how-pbms-and-specialty-pharmacies.html>. *The 340B ceiling price is the maximum a covered entity should pay for 340B discounted drugs, but covered entities can negotiate prices below the ceiling price.

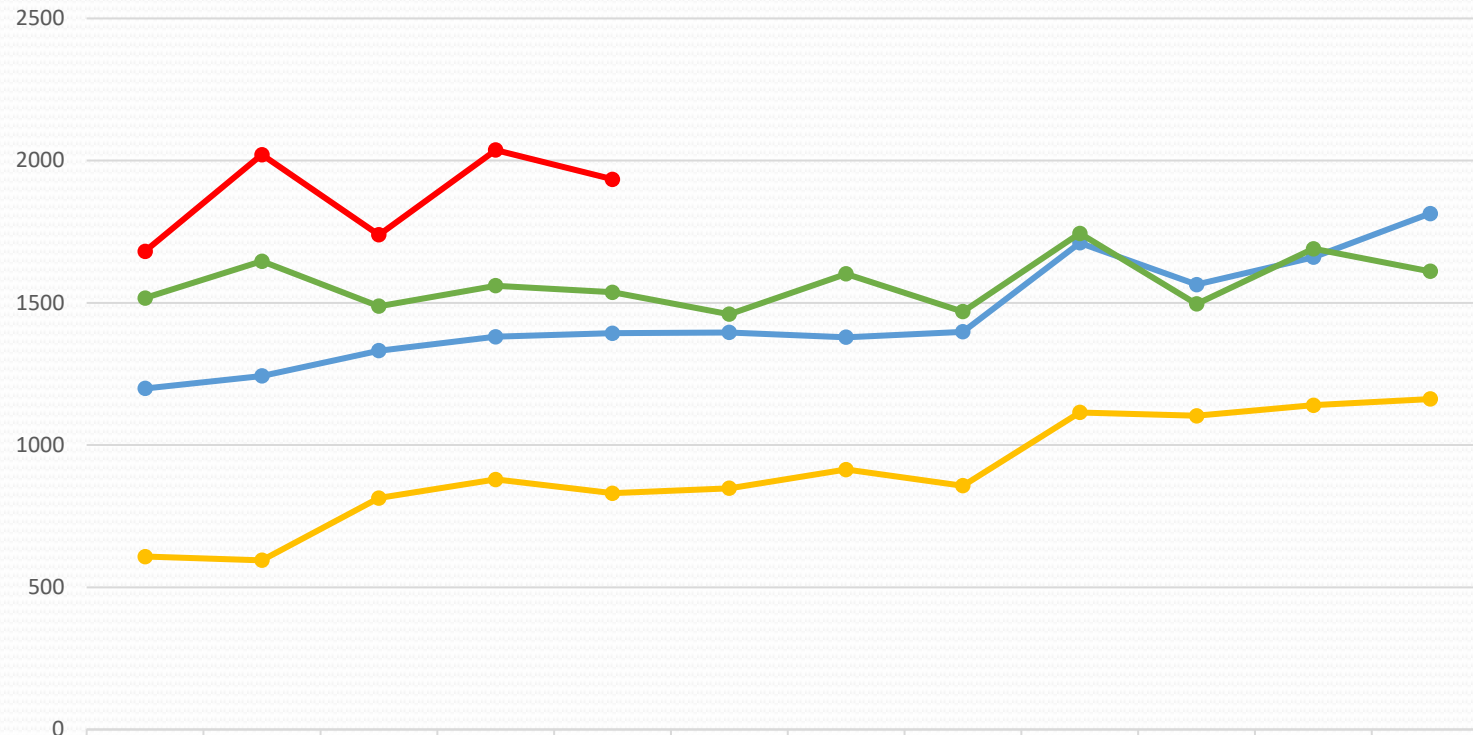
GROWTH & IMPACT

- 340B sales \$44B in FY2021 – 7.2% of U.S. drug market
- 23.8% annual increase 2015-2021
- 75% FY2021 purchases by DSH
- SNHD FY21-FY23 340B
 - \$32M drug purchases
 - \$44M total revenue
 - \$11.7M gross margin

SNCHC Pharmacy Prescriptions



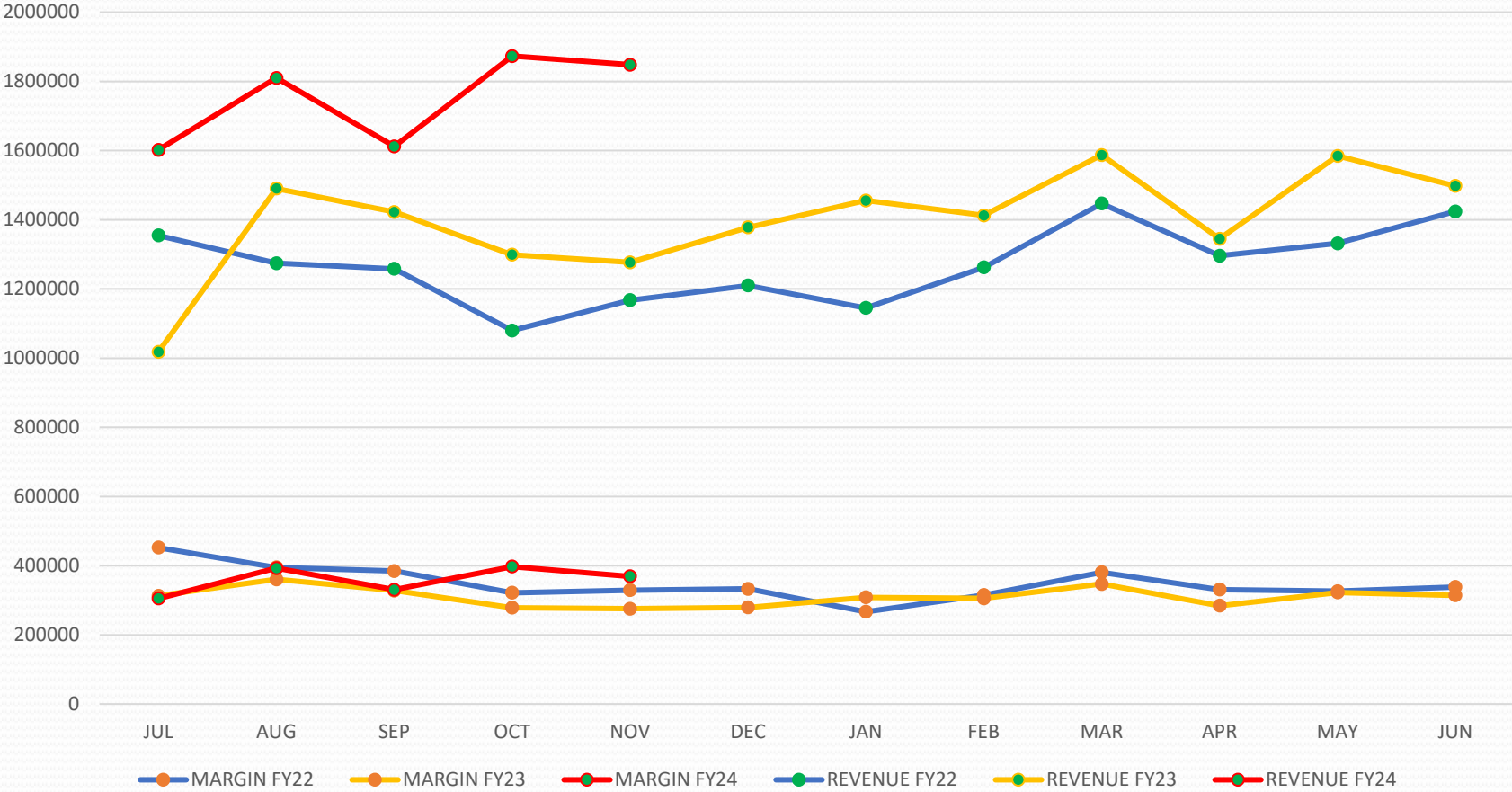
SNCHC PHARMACY VOLUME FY2021-FY2024



	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
Prescriptions FY21	608	595	814	879	831	848	914	857	1115	1103	1140	1162
Prescriptions FY22	1199	1243	1332	1381	1393	1396	1379	1398	1711	1564	1660	1814
Prescriptions FY23	1517	1646	1488	1560	1537	1460	1602	1469	1744	1496	1690	1611
Prescriptions FY24	1,681	2,021	1,739	2,037	1,934							

340B PHARMACY REVENUE/MARGIN

FY22 vs. F23 vs F24



CHALLENGES

- Vague legislative language and lack of change
- Limited oversight, regulatory authority by HRSA
- Ongoing litigation
- Manufacturer restrictions on contract pharmacies
- Manufacturer assistance decreased reimbursements
- Payer discriminatory reimbursement
- Criticism of use of 340B income by CE

SNCHC BENEFITS/CHALLENGES

- Benefits
 - SNHC pharmacies
 - Low-cost medications
 - Additional revenue
- Challenges
 - Potential legislative changes
 - Compliance burden
 - Shrinking margins

OUTLOOK & DIRECTION

- Protect 340B Act
- 340C proposed legislation
- NV Legislation: AB434 to prevent discriminatory reimbursement by PBMs and insurers – signed into law June 2023.
- SNCHC growth potential

Questions?



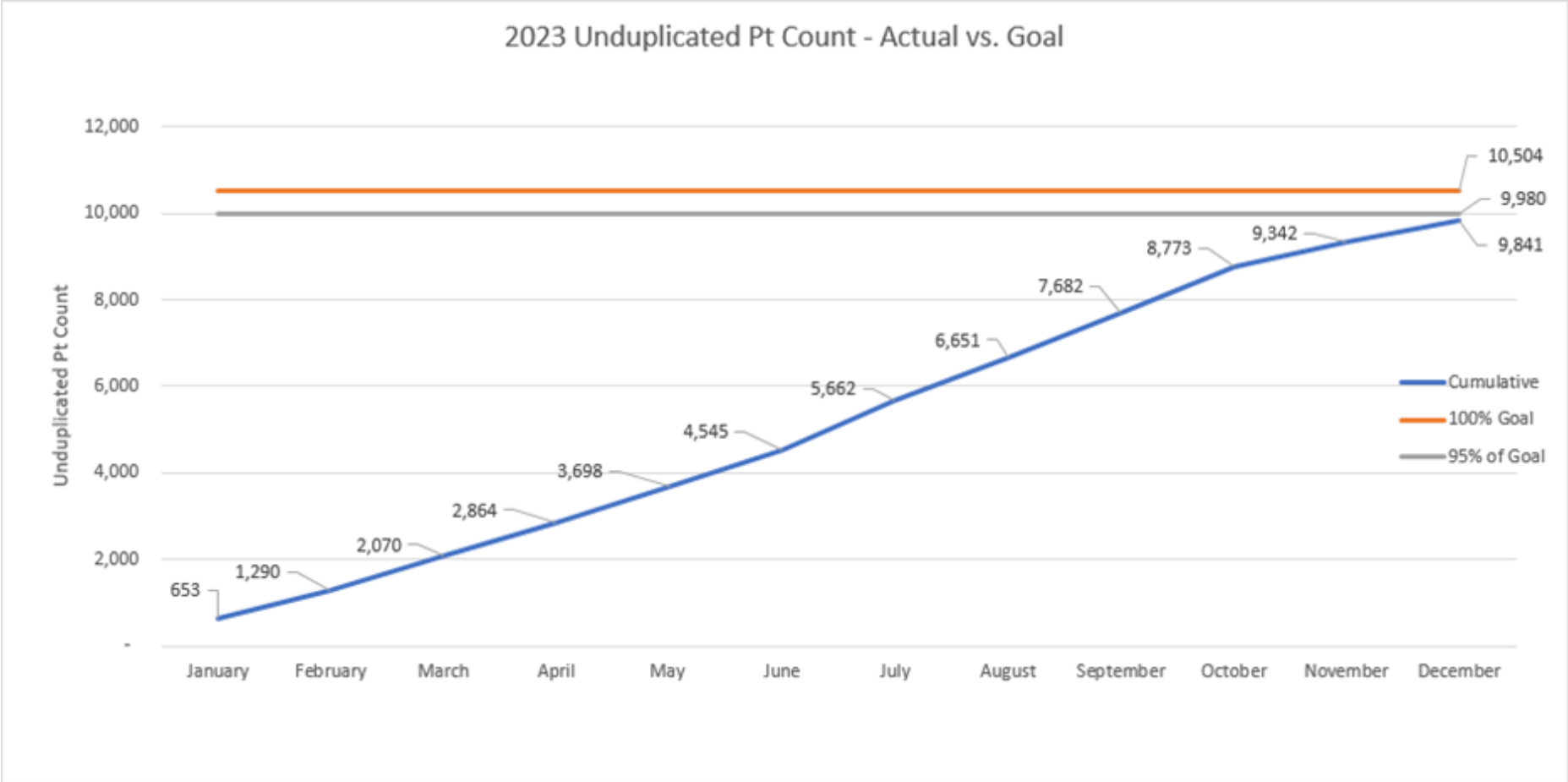
December 2023 Operations Report Highlights

Randy Smith, Chief Executive Office - FQHC

Administrative Update

- **HRSA Service Area Competition grant award successful. New three funding and continued designation for SNCHC as a FQHC from 2.1.24 – 1.31.27.**
- HRSA approved the change to the Health Center Project Director with an effective date of 11.21.23.
- The new Behavioral Health Manager started on 1.2.24.
- The new Clinical Services Supervisor started on 1.2.24.
- A new Clinical Pharmacist for Fremont has been hired with a start date of 1.22.24.
- Ryan White services began at Fremont on 1.5.24.
- Sexual Health services are scheduled to commence at Fremont on 1.16.24.
- Refugee Health access enhance project underway.
- Business Office and IT teams preparing for annual UDS report for calendar year 2023.
- Operations and IT teams preparing for an upgrade to a newer version of eCW (more complex this year).

Unduplicated Patients



Additional Governing Board Goals for the CEO

- Maintain compliance for SNCHC's HRSA Health Program grant by ensuring No Program Conditions are placed on the health center's award.
- Improve financial sustainability by increasing the number of Medicaid visits from 5,443 (FY23) to 5,876 by December 31, 2024, as measured by SNCHC's Payer Mix report.

HRSA Service Area – Additional Area Competition

- \$5,370,500 annually to fund 2 recipients @ approximately \$2,685,250 per grant per year) for up to 3 years.
- Target population = 8,074, must achieve 75% by 12/31/25.
- Of the 28 listed zip codes in the area, twenty-one overlap with SNCHC's current service area.
- Three ZCTAs that are not included in our area: one that covers Pahrump, one just east of Pahrump and west of Clark County, and one that's adjacent to Pahrump on the north side.
- Must open one new fixed site clinic operating 40 hours per week (within 120 award or 12/1/24).
- Must provide medical, behavioral health, and enabling services
- Two step grant submission process;
 - February 20, 2024
 - March 20, 2024
- Grant development meeting scheduled for January 17th
- Project period: 8/1/24 – 7/31/2027



Thank you.



AT THE SOUTHERN NEVADA HEALTH DISTRICT

MEMORANDUM

Date: January 16, 2024

To: Southern Nevada Community Health Center Governing Board

From: Randy Smith, Chief Executive Officer, FQHC *RS*
Fermin Leguen, MD, MPH, District Health Officer *FL*

Subject: Community Health Center FQHC Operations Officer Report – December 2023

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.

December 2023 Highlights

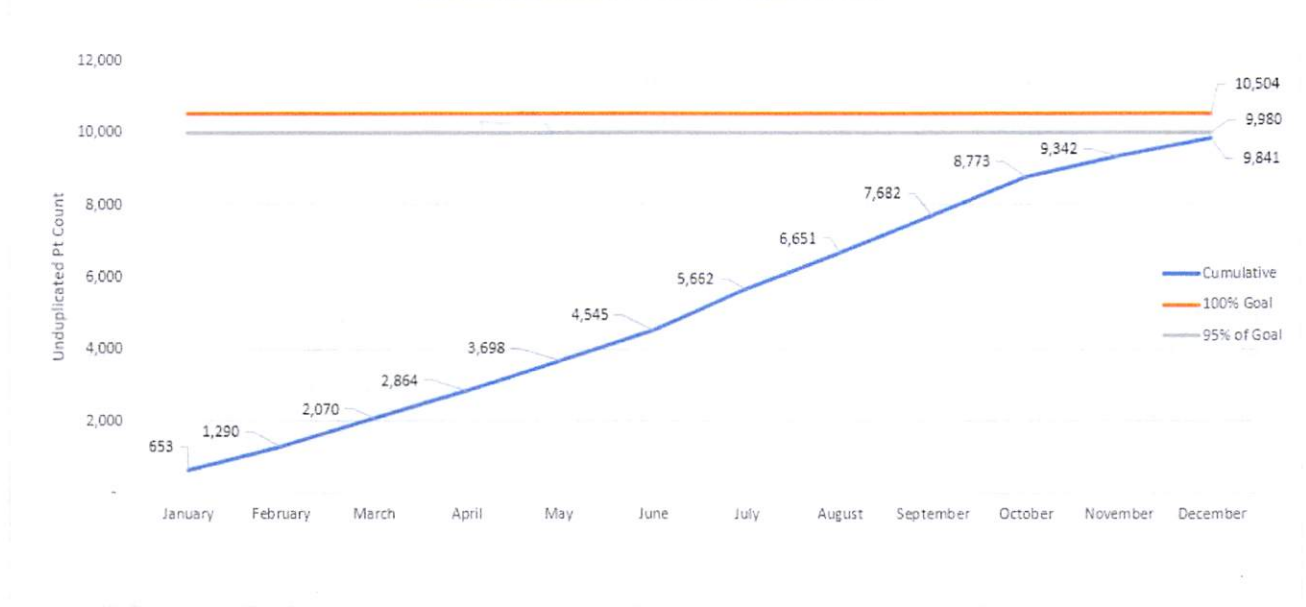
Administrative

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- Business Office and IT teams preparing for annual UDS report for calendar year 2023.
- Operations and IT teams preparing for an upgrade to a newer version of eCW.

Access

Unduplicated patient through December.

2023 Unduplicated Pt Count - Actual vs. Goal



Facility	Program	DEC '23	DEC '22	DEC YoY %	FY24 YTD	FY23 YTD	FY YTD YoY%
Decatur	Behavioral Health	94	123	-24%	726	784	-7%
Decatur	Ryan White	162	177	-8%	1,267	999	27%
Decatur	Family Health	306	127	141%	2,215	1,480	50%
Fremont	Family Health	115	155	-26%	780	603	29%
Total	Family Health	421	282	49%	2,995	2,083	44%
Decatur	Family Planning	119	113	5%	806	1,421	-43%
Fremont	Family Planning	60	114	-47%	449	558	-20%
Total	Family Planning	179	227	-21%	1,255	1,979	-37%
ASEC	Sexual Health	99	107	-7%	743	605	23%
Decatur	Sexual Health	536	483	11%	3,375	3,515	-4%
Total	Sexual Health	635	590	8%	4,118	4,120	0.0%
Grand Total		1,491	1,399	7%	10,361	9,965	4%

Pharmacy Services

	Dec-22	Dec-23		FY23	FY24		% Change YTD
Client Encounters (Pharmacy)	1,076	1,198	↑	6,913	7,949	↑	15.0%
Prescriptions Filled	1,460	1,629	↑	9,208	11,041	↑	19.9%
Client Clinic Encounters (Pharmacist)	24	23	↓	264	190	↓	-28.0%
Financial Assistance Provided	5	16	↑	41	102	↑	148.8%
Insurance Assistance Provided	-	1	↑	7	27	↑	285.7%

- A. Dispensed 1,629 prescriptions for 1,198 clients.
- B. Pharmacist completed 23 client clinic encounters.
- C. Assisted 16 clients to obtain medication financial assistance.
- D. Assisted 1 client with insurance approvals.

HIV / Ryan White Care Program Services

- A. The Ryan White program received 62 referrals between December 1st and December 31st. There were three (3) pediatric clients referred to the Medical Case Management program in December and the program received one (1) referral for a pregnant woman living with HIV during this time.
- B. There were 611 total service encounters in the month of December provided by the Ryan White program (i.e., Linkage Coordinator, Eligibility Workers, Nurse Case Managers, Community Health Workers, Registered Dietitian and Health Educator). There were 303 unduplicated clients served under these programs in December.
- C. The Ryan White ambulatory clinic had a total of 328 visits in the month of December: 23 initial provider visits, 131 established provider visits, including 15 tele-visits (established clients). There were 17 nurse visits and 154 lab visits. There were 16 Ryan White clients seen under Behavioral Health by the Licensed Clinical Social Worker and the Psychiatric APRN during the month of December.
- D. The Ryan White clinic continues to implement the Rapid stART project, which has 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 14 patients enrolled and seen under the Rapid stART program in December.

FQHC-Sexual Health Clinic (SHC)

- A. The FQHC-Sexual Health Clinic (SHC) clinic provided 1,038 encounters to 812 unduplicated patients for the month of December. There were 148 unduplicated patients seen at the All-Saints Episcopal Church (ASEC) Outreach Clinic. There are currently 115 patients receiving injectable treatment for HIV prevention (PrEP).
- B. The FQHC-SHC is participating in a research project in collaboration with the University of San Diego, California (UCSD) looking at STI's as a tool for HIV prevention. The FQHC-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) with 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.

- C. The SHC staff continues to see patients for Mpox evaluation and referral for vaccine.

Refugee Health Program (RHP)

Services provided in the Refugee Health Program for the month of December 2023.

	Adults	Children
Total Scheduled	78	14
Cancelled	6	0
No Show	11	0
Total Seen	61	14

Eligibility and Insurance Enrollment Assistance

As a team, the Eligibility Workers submitted a total of 36 applications for the month of November. A new outsourcing process was established and is being used for the overflow of referrals.

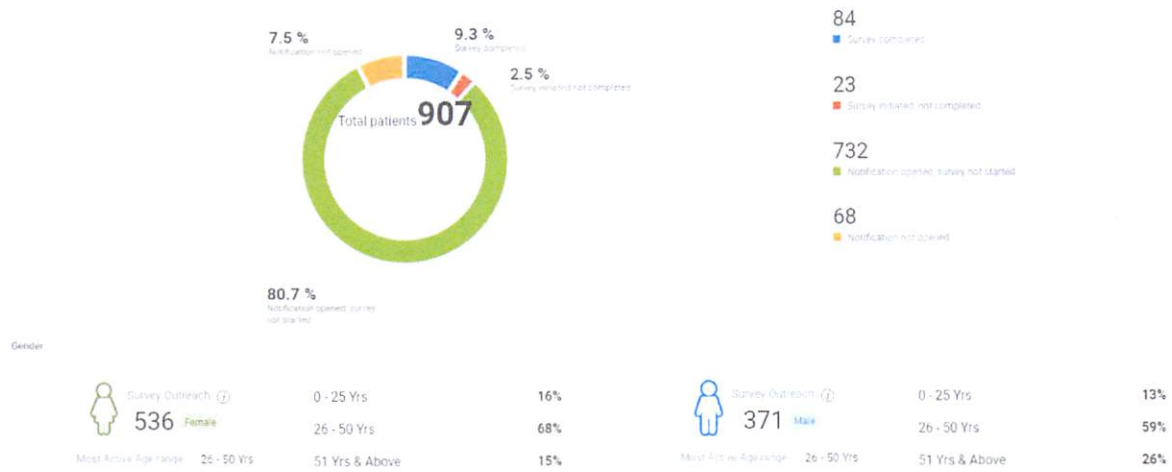
Applications	Status
9	Approved
2	Denied
21	Pending

Patient Satisfaction: See attached survey results.

The Health Center continues to receive generally favorable responses from survey participants when asked about ease of scheduling an appointment, wait 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.

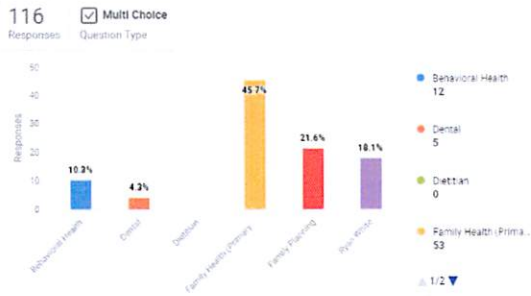
Patient Satisfaction Survey

Overview

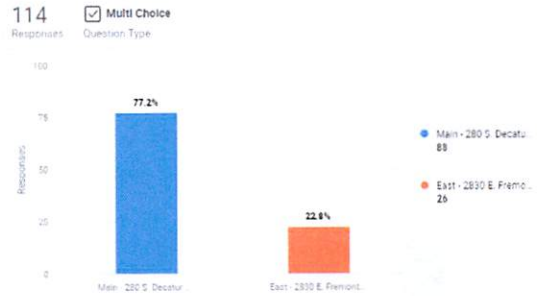


Service and Location

Service received during your visit?

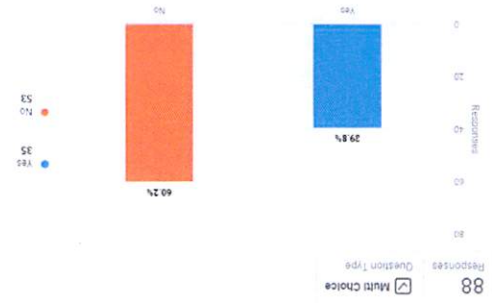


Community Health Center location?

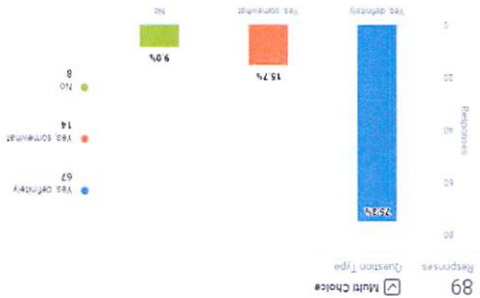


Provider, Staff and Facility

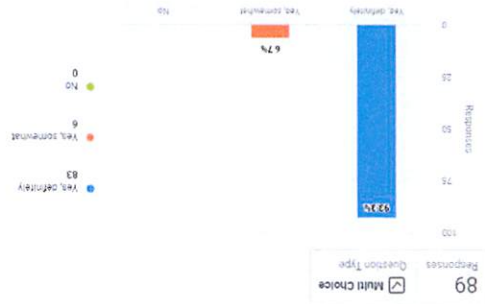
Was your most recent visit for an illness, injury or condition that needed care right away?



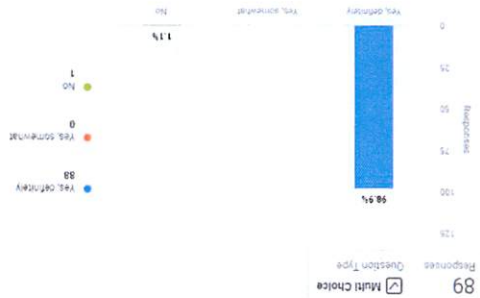
Was the recent visit as soon as you needed?



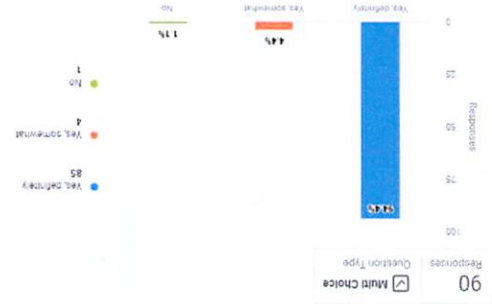
During your most recent visit, did this provider explain things in a way that was easy to understand?



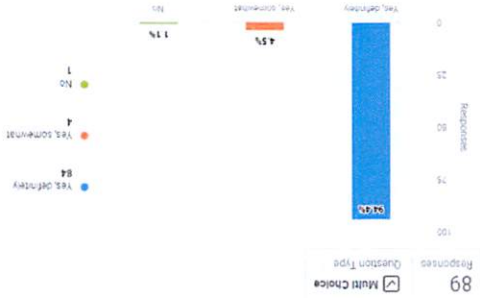
During your most recent visit, did this provider listen carefully to you?



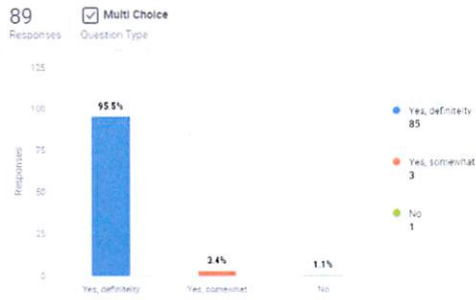
During your most recent visit, did this provider show respect for what you had to say?



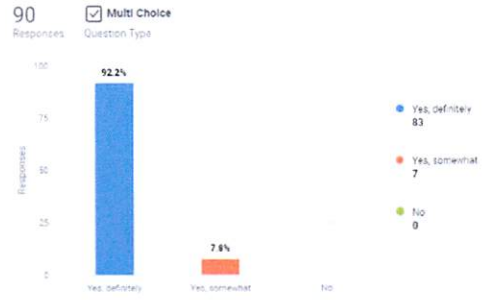
During your most recent visit, did this provider spend enough time with you?



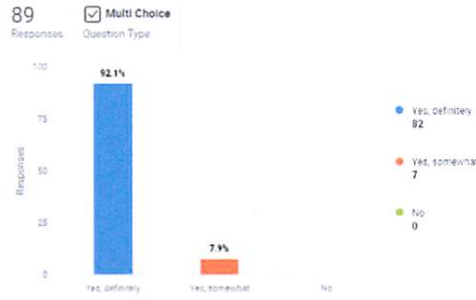
Thinking about your most recent visit, were the staff as helpful as you thought they should be?



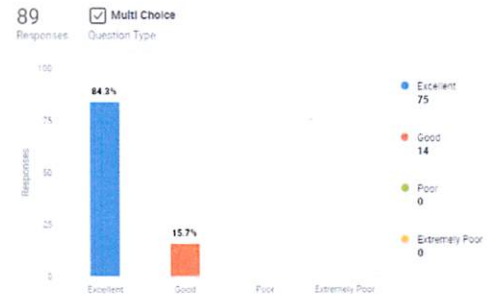
Thinking about your most recent visit, did the staff treat you with courtesy and respect?



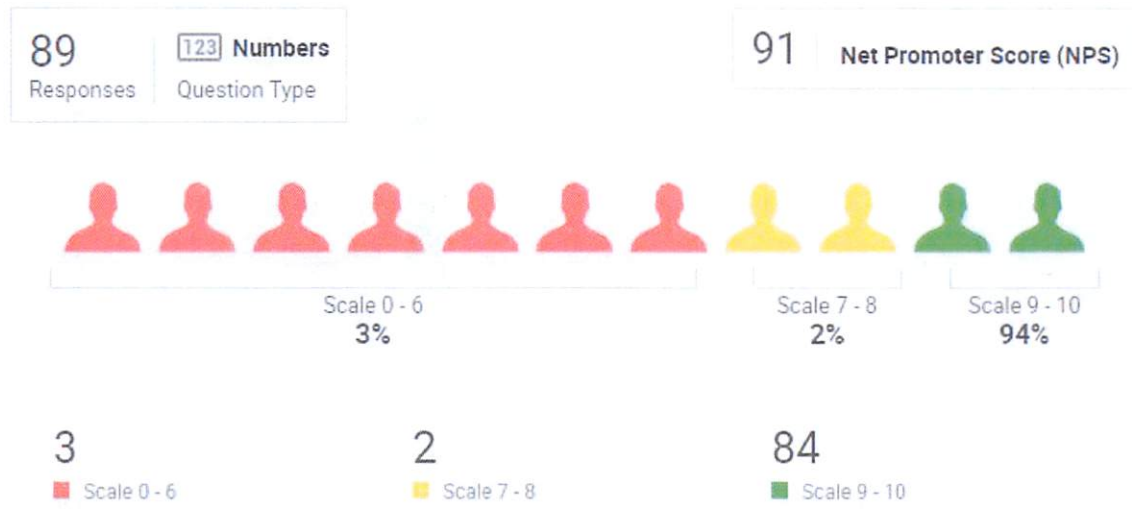
Thinking about your recent visit, was it easy to schedule an appointment?



Thinking about the facility, how was the overall cleanliness and appearance?

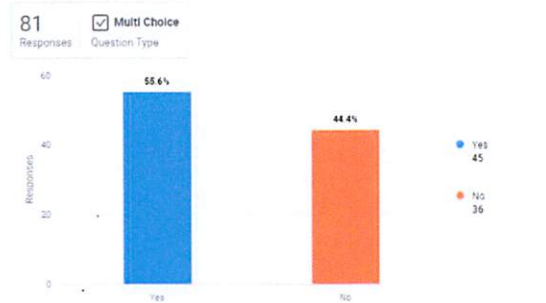


How would you rate the overall care you received from your provider, where 0 is the worst and 10 is the best?



General Information

Do you have health insurance?



How did you hear about us?

