



MINUTES

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH FINANCE COMMITTEE MEETING

March 23, 2026 – 3:00 p.m.

Meeting was conducted via Microsoft Teams

MEMBERS PRESENT: Scott Nielson – Chair – At-Large Member, Gaming
Nancy Brune – Council Member, City of Las Vegas
Marilyn Kirkpatrick – Commissioner, Clark County
Shondra Summers-Armstrong – Council Member, City of Las Vegas

ABSENT: April Becker – Commissioner, Clark County

ALSO PRESENT: N/A
(In Audience)

LEGAL COUNSEL: Heather Anderson-Fintak, General Counsel

EXECUTIVE SECRETARY: Cassius Lockett, PhD, MS, District Health Officer

STAFF: Adriana Alvarez, Emily Anelli, Todd Bleak, Daniel Burns, Donna Buss, Joe Cabanban, Andria Cordovez Mulet, Jason Frame, Xavier Gonzales, Victoria Harding, Horng-Yuan Kan, Annie Lin, Kimberly Monahan, Brian Northam, Yin Jie Qin, Alexis Romero, Chris Saxton, Karla Shoup, Jennifer Sizemore, Randy Smith, Renee Trujillo, DJ Whitaker, Edward Wynder, Lourdes Yapjoco

I. **CALL TO ORDER AND ROLL CALL**

Chair Nielson called the meeting to order at 3:04 p.m. Andria Cordovez Mulet, Executive Assistant, administered the roll call and confirmed a quorum. Ms. Cordovez Mulet provided clear and complete instructions for members of the general public to call in to the meeting to provide public comment, including a telephone number and access code.

II. **PLEDGE OF ALLEGIANCE**

III. **FIRST PUBLIC COMMENT:** A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to two (2) 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 this portion of the meeting.

IV. ADOPTION OF THE MARCH 23, 2026 MEETING AGENDA *(for possible action)*

A motion was made by Member Kirkpatrick, seconded by Member Summers-Armstrong, and carried unanimously to approve the March 23, 2026 Agenda as presented.

V. CONSENT AGENDA

1. APPROVE MINUTES/FINANCE COMMITTEE MEETING: February 24, 2026 *(for possible action)*

A motion was made by Member Kirkpatrick, seconded by Member Brune, and carried unanimously to approve the March 23, 2026 Consent Agenda as presented.

VI. REPORT / DISCUSSION / ACTION

1. Receive and Discuss the SNHD Federal Poverty Level (FPL) guidelines and Approve Recommendations to the Southern Nevada District Board of Health on March 26, 2026; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Randy Smith, Chief Executive Officer – FQHC, presented the update to the Federal Poverty Level (FPL) guidelines. Mr. Smith advised that the FPL guidelines changed annually in January, with 2026 seeing an increase of 2.7% to the Consumer Price Index (CPI) from 2024 and 2025. The guidelines were used to adjust the sliding fee schedules.

A motion was made by Member Kirkpatrick, seconded by Member Brune, and carried unanimously to adopt the Update Federal Poverty Level Guidelines, as presented, and recommend adoption of same to the Southern Nevada District Board of Health at its meeting on March 26, 2026.

2. Receive and Discuss the SNHD Clinical Sliding Fee Schedules and Approve Recommendations to the Southern Nevada District Board of Health on March 26, 2026; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Mr. Smith advised that offering Sliding Fee Schedules, for qualifying patients, was a requirement for HHS, HRSA and various other pass-through grants. Mr. Smith confirmed that patients were seen regardless of their ability to pay and are not sent to collections to recover outstanding payments. Mr. Smith advised that the Health Center uses federal poverty guidelines, based on family size and annual income, to determine placement on the sliding fee schedule. Individuals and families with incomes at or below 100% of the federal poverty level receive a full discount, though a nominal fee may be assessed in some cases. Family Planning (Title X) and the Ryan White Program do not permit the collection of nominal fees.

Further to an inquiry from Chair Nielson regarding the 33% reduction in collections from the previous year, Mr. Smith explained that the 2024 data reflected a partial year of implementation, including a catch-up period with collections from late 2023, which contributed to the reported 33%. Mr. Smith also noted that improved front office training and support have strengthened the Health Center's ability to collect payments at the point of care during patient check-in, contributing to improved performance.

Further to an inquiry from Member Summers-Armstrong, Mr. Smith advised that a write-off does not affect a patient's credit report.

Member Brune asked whether available data could distinguish between full and partial payments at the point of service and whether the system flagged patients who were unable to pay due to specific circumstances. Mr. Smith responded that he would need to follow up on the system's reporting capabilities related to distinguishing partial versus full payments. He explained that front office staff can see outstanding balances at check-in and request payment when possible; if payment was not made, balances were billed through patient statements. Mr. Smith noted that the Health District continued to provide care regardless of a patient's ability to pay and acknowledged that some patients had multiple encounters without payment. Outstanding balances were written off after 12 months in accordance with policy.

Member Kirkpatrick raised concerns about the long-term stability of the FQHC, questioning efforts to improve the payor mix and highlighting rising insurance costs. She noted potential unintended system-wide impacts of sliding fee scales and expressed concern about reliance on Medicaid funding, emphasizing the county's financial strain and the need to explore alternative approaches, including greater engagement with commercial providers. Mr. Smith outlined current strategies to strengthen financial sustainability by increasing Medicaid participation. Efforts include deepening partnerships with Medicaid managed care organizations (MCOs), proactively engaging newly assigned members, and addressing preventive care gaps. These initiatives have resulted in measurable growth, including increases in Medicaid enrollment and visit volume. Dr. Lockett reinforced the focus on expanding Medicaid enrollment while ensuring sufficient provider capacity to meet demand. He noted ongoing efforts to balance patient volume, improve payor mix, and expand services, including pediatrics, to support long-term sustainability.

Member Brune requested detailed demographic and geographic data on patients served under the federal grant, including age, race, ethnicity, and location. She emphasized the importance of using this data to inform policy decisions, support legislative advocacy, and better understand community needs and resource allocation. Mr. Smith confirmed that some demographic data was available and noted that the primary population served consisted of uninsured or underinsured adults ages 19–65 who often lack other access to care. He indicated that additional data from the recently filed UDS report could be compiled and shared to provide further insights. Member Summers-Armstrong supported the request for more detailed data and asked for further breakdowns of patients' insurance status, including whether individuals were uninsured, covered by Medicaid, or underinsured through private plans. She also inquired about referral sources, outreach strategies, and opportunities to connect underserved populations to care earlier. Mr. Smith described existing outreach efforts, including health fairs and partnerships with Medicaid MCOs, which often assign patients based on geography. He reported significant growth in patient volume, serving over 13,000 unique patients last year, despite staffing challenges and a partial hiring freeze. He also highlighted operational improvements, including expanded same-day and walk-in access to reduce no-show rates and improve patient engagement.

Mr. Smith outlined efforts to expand the pediatric service line at the Decatur site, including creating a more child- and family-friendly environment and increasing provider capacity to serve pediatric patients. He reported early progress and highlighted a proposal to offer low-

cost sports physicals in coordination with back-to-school activities to attract new patients. The \$20 fee was set at a nominal level to improve access and encourage utilization, particularly as these services were often not covered by private insurance.

A motion was made by Member Summers-Armstrong, seconded by Member Brune, and carried unanimously to accept the SNHD Clinical Sliding Fee Schedules, as presented, and recommend approval of same to the Southern Nevada District Board of Health at its meeting on March 26, 2026.

3. Receive and Discuss the SNHD Clinical Master Fee Schedule and Approve Recommendations to the Southern Nevada District Board of Health on March 26, 2026; direct staff accordingly or take other action as deemed necessary *(for possible action)*

DJ Whitaker, Chief Financial Officer, and Donna Buss, Revenue Cycle Manager, presented the proposed updates to the Clinical Master Fee Schedule.

Ms. Whitaker advised that the Billing Fee Schedule was reviewed annually to add new fees or to adjust existing fees based on analysis within the market. Ms. Whitaker further advised that uninsured individuals would see minimal or no impact of the proposed changes, based on the availability of the sliding fee schedules. Ms. Whitaker outlined the review methodology and the proposed changes. Ms. Whitaker outlined there were proposed changes to 247 fees, with 20 being new fees.

Member Kirkpatrick raised concerns about rising health insurance costs and questioned whether the physician fee reports account for broader insurance cost trends. Ms. Buss explained that physician fee data was based on local zip code-level information. Member Kirkpatrick reiterated concern that fee-setting practices may be contributing to overall cost increases. Dr. Lockett explained that fees were set around the 60th percentile to balance competitiveness while avoiding the highest charges, noting the challenge of maintaining this balance as insurance costs rise. Member Summers-Armstrong emphasized that the Health District primarily serves low-income and uninsured populations and was not a primary driver of cost increases, attributing rising costs to large MCOs and market consolidation, while underscoring the importance of maintaining access to affordable care to prevent public health issues. Member Kirkpatrick clarified that she supported access efforts, but emphasized the need for broader discussions on insurance affordability. Chair Nielson reiterated that fee schedules were primarily designed for payors and insurance companies, while many patients receive reduced or no-cost services. Dr. Lockett added that revenue was driven more by payor mix and reimbursement structures than by charges alone. Ms. Buss further clarified that sliding fee adjustments were also applied to underinsured patients with high deductibles to help reduce their financial burden.

A motion was made by Member Kirkpatrick, seconded by Member Summers-Armstrong, and carried unanimously to accept the Clinical Master Fee Schedule Updates, as presented, and recommend approval of same to the Southern Nevada District Board of Health at its meeting on March 26, 2026.

4. Receive and Discuss the FY2027 Budget and Approve Recommendations to the Southern Nevada District Board of Health on March 26, 2026; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Ms. Whitaker presented the FY2027 Budget, which begins on July 1, 2026 and ends on June 30, 2027, with the following:

Overview:

- Staffing for FY2027 was projected to remain the same compared to FY2026 Augmented budget of 871.4 FTE.
- General Fund revenues were projected at \$124.4M, an increase of \$1.7M from FY2026 augmented budget.
- Special Revenue Fund (Grants) decreased to \$42.5M, a decrease of \$14.0M from FY2026 augmented budget.
- General Fund expenditures were projected at \$127.4M, an increase of \$5.3M from FY2026 augmented budget.
- Special Revenue Fund (Grants) expenditures were projected at \$48.0M, a decrease of \$14.3M from FY2026 augmented budget.
- Capital Projects Fund expenditures were projected at \$2.3M, a decrease of \$1.0M from FY2026 augmented budget

Revenues – General & Grants Fund

- FY2027 Clark County Property Tax revenue was expected at \$43.7M, an increase of \$2.2M or 5% compared to \$41.5M from FY2026.
- Total General Funds Revenue increased from \$122.7M to \$124.4M, a \$1.7M or 1.0% increase from FY2026 Augmentation.
- Special Revenue Funds decreased from \$56.5M to \$42.5M, a reduction of \$14.0M including conclusion of Senate Bill 118 (\$8.9M) and other lab expansion funding (\$1.3M) as well as expiration of the State Opioid Response (\$2.0M) funding and general reductions in other grant expenditures compared to the FY2026 Augmentation.

Member Kirkpatrick raised concerns about the sustainability of property tax revenue, noting decline in county recordings and building permits and warning that growth has fallen below historical trends seen prior to 2007. She urged caution in budgeting and asked for clarification on the specific county account providing the revenue. Dr. Lockett acknowledged the concern and indicated he would follow up with additional information.

Expenditures – General Fund

- General Fund employee salaries and benefits for FY2027 total \$84.3M, an increase of \$5.5M or 15% from FY2026 Augmentation.
 - FY2027 budget includes a full year of salaries and benefits for approximately 75 vacant positions (in active recruitment, pending or hold status) that were included in the FY2026 Augmented budget at a reduced expenditure level to reflect the partial year remaining. Changes in the status of the positions will be included in future augmentation.
 - FY2027 budget also reflects the move of 13.59 FTE from Senate Bill 118 to General Fund due to the expiration of the funding.
- General Fund Pharmacy Medical supplies decreased from \$28.4M to \$25M, a decrease of \$3.4M or 12%

Expenditures – Grant Fund

- Special Revenue Fund FY2027 expenses decreased from \$62.3M to \$47.4M including conclusion of Senate Bill 118 (\$8.9M) and other lab expansion funding (\$1.3M) as well as expiration of the State Opioid Response (\$2.0M) funding and general reductions in other grant expenditures compared to the FY2026 Augmentation.
- PHI Grant revenue is estimated at \$6.1M in FY2027. Anticipated FTE total is 40.2 positions with estimated salaries & benefits of \$5.1M.

Ms. Whitaker further reviewed the:

- Revenues vs. Expenditures combined by Division, and excluding cost allocation
- Personnel by Division, comparing FY2026 and FY2027
- Capital Improvement Projects
- Three Fiscal Year Activity – General Fund, Special Revenue Fund, Capital Projects Fund, Bond Reserve Fund, and Internal Service Fund

Chair Nielson expressed concern that the Health District’s financial structure appeared to be trending in an unsustainable direction. Ms. Whitaker responded that management was currently controlling expenditures through measures such as a hiring freeze, careful position management, and contingency planning, while also monitoring uncertain funding sources like grants, which may be temporary. Chair Nielson indicated that difficult decisions may be necessary in the near future if funding levels do not stabilize, particularly as grant funding changed. Member Brune shared similar concerns about the declining fund balance and requested historical context on prior fund balance levels to better understand trends and inform proactive decision-making. Ms. Whitaker clarified that, despite reductions, the fund balance remained above the required minimum of 16.67%, though it did not yet account for potential cost-of-living or merit increases, and noted that past periods of lower balances resulted in layoffs and reductions. Member Kirkpatrick emphasized the importance of maintaining a sustainable balance while continuing to provide services, noting past efforts to stabilize finances without layoffs. She cautioned, however, that uncertainty around future funding required ongoing vigilance. Chair Nielson concluded by reiterating concern about the downward trend in fund balance as the organization transitioned from pandemic-era funding to a more normalized financial environment, emphasizing the need to closely monitor trends during upcoming negotiations. Ms. Whitaker added that declining grant funding, including the loss of COVID-related and ELC funds, was a key factor contributing to the trend, and that staffing and budget decisions were being carefully managed in response.

A motion was made by Member Kirkpatrick, seconded by Member Brune, and carried unanimously to accept the FY2027 Budget, as presented, and recommend approval of same to the Southern Nevada District Board of Health at its meeting on March 26, 2026.

5. Receive and Discuss the Financial Report, as of December 31, 2025; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Donnie (DJ) Whitaker, Chief Financial Officer, presented the Financial Report, as of December 31, 2025, related to the Revenues, Expenses, and Net Position (December 31, 2025 – Unaudited).

No action was taken.

VII. 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 two (2) 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 this portion of the meeting.

VIII. ADJOURNMENT

The Chair adjourned the meeting at 5:01 p.m.

Cassius Lockett, PhD, MS
District Health Officer/Executive Secretary
/acm



AGENDA

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH FINANCE COMMITTEE

MARCH 23, 2026 – 3:00 P.M.

Meeting will be conducted via Microsoft Teams

NOTICE

Microsoft Teams:

<https://events.teams.microsoft.com/event/a31dc74d-1417-4478-a804-ff847d7dd347@1f318e99-9fb1-41b3-8c10-d0cab0e9f859>

To call into the meeting, dial (702) 907-7151 and enter Phone Conference ID: 852 606 137#

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 AND 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 two (2) minutes per speaker. Please clearly state your name 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. **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 Teams:** Use the meeting controls at the top of the screen and select the Raise Hand icon. When called upon, select the Microphone icon to unmute yourself.
- **By telephone:** Call 702-907-7151 and when prompted to provide the Meeting ID, enter 852 606 137#. Press *5 to raise your hand. When called upon, press *6 on your phone keypad to unmute yourself.
- **By email:** public-comment@snhd.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.

IV. ADOPTION OF THE MARCH 23, 2026 AGENDA *(for possible action)*

V. CONSENT AGENDA: Items for action to be considered by the Southern Nevada District Board of Health 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/FINANCE COMMITTEE MEETING:** February 24, 2026 *(for possible action)*

VI. REPORT / DISCUSSION / ACTION

- 1. Receive and Discuss the SNHD Federal Poverty Level (FPL) guidelines and Approve Recommendations to the Southern Nevada District Board of Health on March 26, 2026;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
- 2. Receive and Discuss the SNHD Clinical Sliding Fee Schedules and Approve Recommendations to the Southern Nevada District Board of Health on March 26, 2026;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
- 3. Receive and Discuss the SNHD Clinical Master Fee Schedule and Approve Recommendations to the Southern Nevada District Board of Health on March 26, 2026;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
- 4. Receive and Discuss the FY2027 Budget and Approve Recommendations to the Southern Nevada District Board of Health on March 26, 2026;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
- 5. Receive and Discuss the Financial Report, as of December 31, 2025;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

VII. 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 two (2) 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.**

VIII. ADJOURNMENT

NOTE: Disabled members of the public who require special accommodations or assistance at the meeting are requested to notify the Administration Office 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 the Administration Office at 280 S. Decatur Blvd., Las Vegas, NV 89107 or (702) 759-1201.



MINUTES

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH FINANCE COMMITTEE MEETING

February 24, 2026 – 11:00 a.m.

Meeting was conducted via Microsoft Teams

- MEMBERS PRESENT:** Scott Nielson – Chair – At-Large Member, Gaming
April Becker – Commissioner, Clark County
Nancy Brune – Council Member, City of Las Vegas
Shondra Summers-Armstrong – Council Member, City of Las Vegas
- ABSENT:** Marilyn Kirkpatrick – Commissioner, Clark County
- ALSO PRESENT:** N/A
(In Audience)
- LEGAL COUNSEL:** Heather Anderson-Fintak, General Counsel
- EXECUTIVE SECRETARY:** Cassius Lockett, PhD, MS, District Health Officer (*absent*)
- STAFF:** Emily Anelli, Tawana Bellamy, Daniel Burns, Victoria Burris, Andria Cordovez Mulet, Jason Frame, Xavier Gonzales, Horng-Yuan Kan, Kimberly Monahan, Brian Northam, Yin Jie Qin, Larry Rogers, Alexis Romero, Randy Smith, DJ Whitaker, Edward Wynder, Lourdes Yapjoco

I. CALL TO ORDER AND ROLL CALL

Chair Nielson called the meeting to order at 11:08 a.m. Andria Cordovez Mulet, Executive Assistant, administered the roll call and confirmed a quorum. Ms. Cordovez Mulet provided clear and complete instructions for members of the general public to call in to the meeting to provide public comment, including a telephone number and access code.

II. PLEDGE OF ALLEGIANCE

- III. 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 this portion of the meeting.

IV. **ADOPTION OF THE FEBRUARY 24, 2026 MEETING AGENDA** *(for possible action)*

A motion was made by Member Brune, seconded by Member Summers-Armstrong, and carried unanimously to approve the February 24, 2026 Agenda as presented.

V. **CONSENT AGENDA**

1. **APPROVE MINUTES/FINANCE COMMITTEE MEETING:** November 19, 2025 *(for possible action)*

A motion was made by Member Brune, seconded by Member Becker, and carried unanimously to approve the February 24, 2026 Consent Agenda as presented.

VI. **REPORT / DISCUSSION / ACTION**

1. **Receive and Discuss the FY2026 Budget Augmentation and Approve Recommendations to the Southern Nevada District Board of Health on February 26, 2026;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Donnie (DJ) Whitaker, Chief Financial Officer, presented the resolutions regarding the budget augmentation, as follows:

- Resolution #01-26 – Increasing the General Fund Budget by \$4,856,172, from \$117,309,423 to \$122,165,595
 - The decrease in total revenue sources (FY2026) in the General Fund budget is 1,566,700 will reduce resources to the FY2026 SNHD General Fund Budget.
- Resolution #02-26 – Decreasing the Grant Fund (Special Revenue) by \$8,363,702, from \$70,661,216 to \$62,297,514
 - With the increase of FY2025 end fund balance to the Grant Fund (Special Revenue) was \$39,372, from adopted \$82,081 to actual \$121,453. The FY2026 total adopted budget revenue is \$61,881,567 and has decreased to \$56,495,488, a difference of \$5,386,079 to align with year-to-date actual amounts.
- Resolution #03-26 – Increasing the Capital Fund by \$493,191, from \$2,811,000 to \$3,304,191
 - With the increase in FY2025 end fund balance to the Capital Fund is \$570,882, from adopted \$2,999,600 to actual \$3,570,482. The FY2026 total adopted budget revenue is \$109,559 and contains no change.

Further to an inquiry from Chair Nielson regarding vacant positions, Ms. Whitaker confirmed that the small change noted with personnel was due to budgeting for positions that became vacant, explaining that vacancies remained in the expense budget and employee count. Ms. Whitaker noted that the Health District's staffing level was previously above 800, but due to the current hiring freeze, caused reductions to that number. If the hiring freeze is lifted, the Health District wanted to ensure that the positions were accounted for and within appropriations. Member Summers-Armstrong requested clarification on whether the 70 previously referenced positions remain budgeted. Ms. Whitaker confirmed they did, and that funding was still available should hiring resume. She added that expenditure savings from the

first half of the fiscal year were already accounted for, and the remaining fiscal year's budget included the costs of those 70 positions from January forward.

A motion was made by Member Summers-Armstrong, seconded by Member Brune, and carried unanimously to approve Petition #27-26 related to the Budget Augmentation to the Southern Nevada Health District (i) General Fund (Resolution #01-26), (ii) Special Revenue Fund (Resolution #02-26), and (iii) Capital Fund (Resolution #03-26) Budget for the Fiscal Year Ending June 30, 2026, as presented, to meet the mandatory financial requirements of NRS 354.598005, and recommend approval of same to the Southern Nevada District Board of Health at its meeting on February 26, 2026.

- VII. 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 this portion of the meeting.

VIII. ADJOURNMENT

The Chair adjourned the meeting at 11:37 a.m.

Cassius Lockett, PhD, MS
District Health Officer/Executive Secretary
/acm



UPDATE TO FEDERAL POVERTY LEVEL

RANDY SMITH
CHIEF EXECUTIVE OFFICER – FQHC
SOUTHERN NEVADA COMMUNITY HEALTH CENTER

MARCH 26, 2026

Tied to Federal Poverty Guidelines

The Federal Poverty Guidelines are published annually by Department of Health and Human Services (HHS) in the Annual Update of the HHS Poverty Guidelines

Rates reflects the 2.7% increase to the CPI-U for Calendar Year 2024 and 2025

- Updated annually to account for last calendar year's increase in prices as measured by the Consumer Price Index
- Publish Date of January 15, 2026

After adjusting for inflation, the following guidelines are rounded and adjusted to standardize the differences between family sizes

Federal Poverty Levels 2026

% of Federal Poverty Level (FPL)	0-100%		>100% to 150%		>150% to 175%		>175% to 200%		Primary Care/SHC >200%
Program Code	P-0		P-1		P-2		P-3		P-4
**Family Size	Equal to or Between		Equal to or Between		Equal to or Between		Equal to or Between		Equal to or Above
1	0	\$ 15,960	\$ 15,961	\$ 23,940	\$ 23,941	\$ 27,930	\$ 27,931	\$ 31,920	\$ 31,921
2	0	\$ 21,640	\$ 21,641	\$ 32,460	\$ 32,461	\$ 37,870	\$ 37,871	\$ 43,280	\$ 43,281
3	0	\$ 27,320	\$ 27,321	\$ 40,980	\$ 40,981	\$ 47,810	\$ 47,811	\$ 54,640	\$ 54,641
4	0	\$ 33,000	\$ 33,001	\$ 49,500	\$ 49,501	\$ 57,750	\$ 57,751	\$ 66,000	\$ 66,001
5	0	\$ 38,680	\$ 38,681	\$ 58,020	\$ 58,021	\$ 67,690	\$ 67,691	\$ 77,360	\$ 77,361
6	0	\$ 44,360	\$ 44,361	\$ 66,540	\$ 66,541	\$ 77,630	\$ 77,631	\$ 88,720	\$ 88,721
7	0	\$ 50,040	\$ 50,041	\$ 75,060	\$ 75,061	\$ 87,570	\$ 87,571	\$ 100,080	\$ 100,081
8	0	\$ 55,720	\$ 55,721	\$ 83,580	\$ 83,581	\$ 97,510	\$ 97,511	\$ 111,440	\$ 111,441

**More than 8 persons, add \$5,680 of allowable income for each additional person per year.

Federal Poverty Levels 2026

Family Planning: >200%			Ryan White: >200%				
P-4: >200% to 250%		P-5: >250%	P-4: >200% to 300%		P-5: >300% - 400%		P-6: >400%
Equal to or Between		Equal to or Above	Equal to or Between		Equal to or Between		Equal to or Above
\$ 31,921	\$ 39,900	\$ 39,901	\$ 31,921	\$ 47,880	\$ 47,881	\$ 63,840	\$ 63,841
\$ 43,281	\$ 54,100	\$ 54,101	\$ 43,281	\$ 64,920	\$ 64,921	\$ 86,560	\$ 86,561
\$ 54,641	\$ 68,300	\$ 68,301	\$ 54,641	\$ 81,960	\$ 81,961	\$ 109,280	\$ 109,281
\$ 66,001	\$ 82,500	\$ 82,501	\$ 66,001	\$ 99,000	\$ 99,001	\$ 132,000	\$ 132,001
\$ 77,361	\$ 96,700	\$ 96,701	\$ 77,361	\$ 116,040	\$ 116,041	\$ 154,720	\$ 154,721
\$ 88,721	\$ 110,900	\$ 110,901	\$ 88,721	\$ 133,080	\$ 133,081	\$ 177,440	\$ 177,441
\$ 100,081	\$ 125,100	\$ 125,101	\$ 100,081	\$ 150,120	\$ 150,121	\$ 200,160	\$ 200,161
\$ 111,441	\$ 139,300	\$ 139,301	\$ 111,441	\$ 167,160	\$ 167,161	\$ 222,880	\$ 222,881

**More than 8 persons, add \$5,680 of allowable income for each additional person per year.



Questions?

MOTION

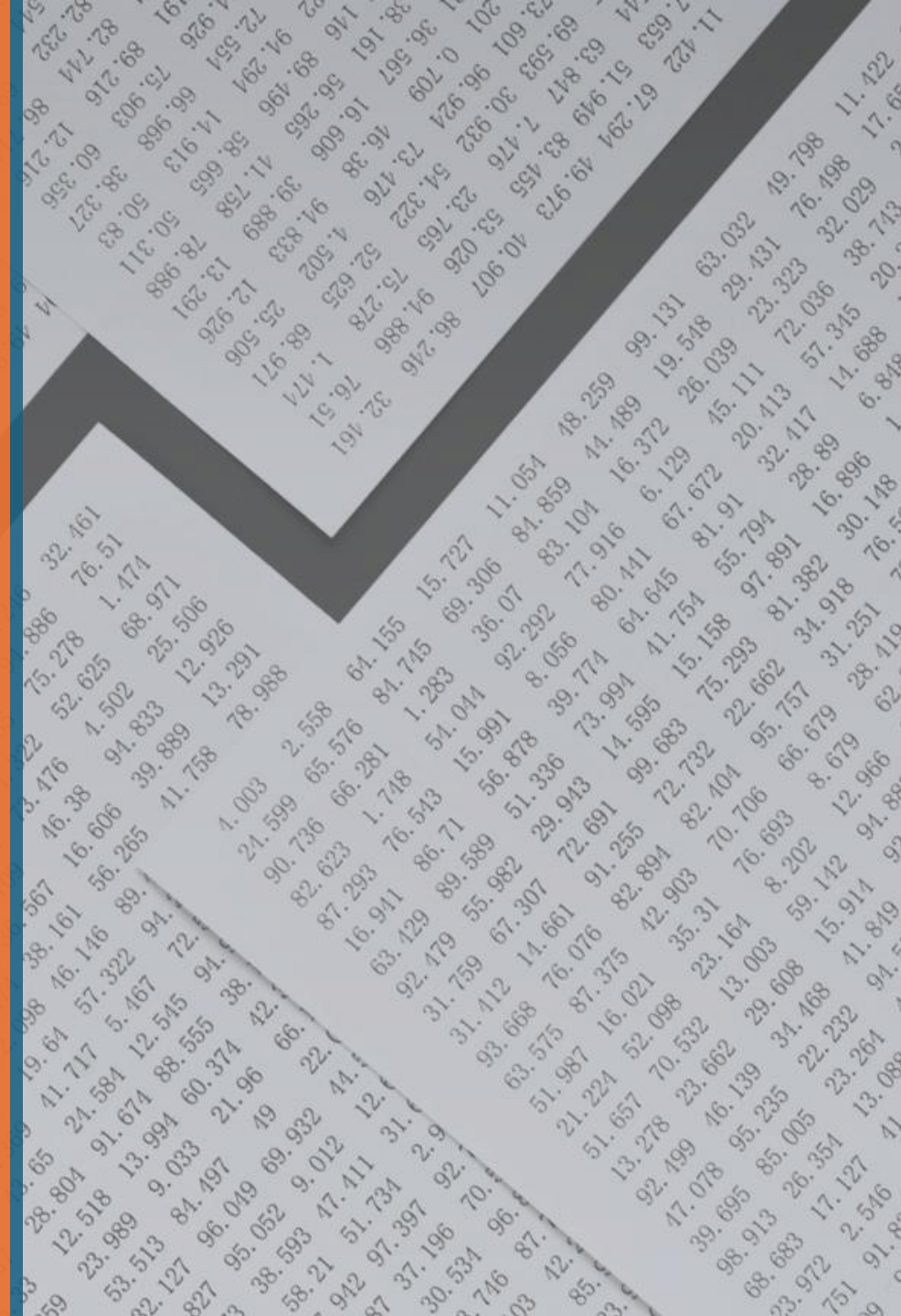
Motion to Accept the Recommendations from the Finance Committee and Adopt the Federal Poverty Level (FPL) guidelines, as presented.



CLINICAL SLIDING FEE SCHEDULE

RANDY SMITH
CHIEF EXECUTIVE OFFICER - FQHC
SOUTHERN NEVADA COMMUNITY HEALTH CENTER

MARCH 26, 2026



Sliding Fee Schedule Requirement

Offering a Sliding Fee Schedule for Qualifying Patients is a Requirement



HEALTH AND HUMAN
SERVICES (HHS)



HEALTH RESOURCES
AND SERVICES
ADMINISTRATION
(HRSA)



OTHER PASS-THROUGH
GRANTS

HRSA Sliding Fee Program Requirements

Authority Section 330(k)(3)(G) of the PHS Act; 42 CFR 51c.303(f), 42 CFR 51c.303(g), 42 CFR 51c.303(u), 42 CFR 56.303(f), 42 CFR 56.303(g), and 42 CFR 56.303(u)

- ***The health center must operate in a manner such that no patient shall be denied service due to an individual's inability to pay.***
- The health center must **prepare a schedule of fees or payments for the provision of its services consistent with locally prevailing rates** or charges and **designed to cover its reasonable costs of operation** and must prepare a **corresponding schedule of discounts [sliding fee discount schedule (SFDS)]** to be applied to the payment of such fees or payments, **by which discounts are adjusted on the basis of the patient's ability to pay.**

HRSA Sliding Fee Program Requirements

Authority Section 330(k)(3)(G) of the PHS Act; 42 CFR 51c.303(f), 42 CFR 51c.303(g), 42 CFR 51c.303(u), 42 CFR 56.303(f), 42 CFR 56.303(g), and 42 CFR 56.303(u)

- The health center must establish systems for [sliding fee] eligibility determination. (**SNCHC: FPG, Family Size and Annual Income**)
- The health center's schedule of discounts must provide for:
 - A **full discount to individuals and families** with annual incomes at or below those set forth in the most recent Federal Poverty Guidelines [100% of the FPG], **except that nominal charges for service may be collected from such individuals and families where imposition of such fees is consistent with project goals**; and
 - No sliding fee discount to individuals and families with annual incomes greater than twice those set forth in such Guidelines [200% of the FPG].
 - *Title X – Family Planning and Ryan White have higher thresholds.*

HRSA Billing & Collection Requirements

Authority Section 330(k)(3)(E), (F), and (G) of the PHS Act; and 42 CFR 51c.303(e), (f), and (g) and 42 CFR 56.303(e), (f), and (g)

- The health center must assure that any **fees or payments required** by the center for health care services will be reduced or waived to **assure that no patient will be denied such services due to an individual's inability to pay for such services.**
- The health center **must make and continue to make every reasonable effort to secure payment for services from patients**, in accordance with health center fee schedules and the corresponding schedule of discounts
 - \$38,865 collected from payments initiated through statements in CY25 (FQHC & PPC).
 - 33% decrease in collection compared to CY24.

Sliding Fee Program in Action

- Patients are eligible to be placed on the Sliding Fee Discount Schedule based on their **annual household income** and **family size**;
- Based on a patient's placement on the schedule, a sliding fee charge is created and billed to the patient at the point of care;
- Patients are asked to make a payment;
- Patient either make a full payment, partial payment or no payment;
- **ALL patients are seen regardless of their ability to pay**;
- Patients with outstanding payment balances are sent a billing statement with a request to pay;
- **Any outstanding payment balances after 12 months are written off as bad debt**;
- Patients are **NOT** sent to collections to recover outstanding payments.
- Patients receive personalized support from the health center's onsite partners to screen for insurance eligibility and for assistance with submitting applications to enroll in Medicaid.

Sliding Fee Discount Schedule Analysis

Determine if the Nominal and Sliding Fee charges are comparable with the local prevailing market.


- Comparative analysis of Nominal and Sliding Fee charges among Nevada FQHCs

Assess if the Nominal and Sliding Fee charges present a financial barrier to accessing care.

- Patient surveys

\$6.764 million in sliding fee write offs in CY2025

- 28% increase from CY24



Market Study of Fees for FQHCs in Nevada

Nine (9) Health Centers queried in March 2026. They include:

- All for Health, Health for All
- Canyonlands Healthcare
- Firstmed Health & Wellness
- First Person Care Clinic
- Hope Christian Health Center
- Nevada Health Centers
- North East Medical Services
- Northern Nevada Hopes
- Safe Harbor Medical

Black = Same as SNCHC
 Green = Lower than SNCHC
 Red = Higher than SNCHC

2026 Sliding Fee Discount Market Study

Highlighted = Price increased since 2024

FQHCs & LALs	SNCHC	A	B	C	D	E	F	G	H	I
Lowest Slide Scale Fee	\$0 - \$20	\$20	\$10	\$0	\$35	\$40	\$35	\$10	\$40	\$40
Highest Slide Scale Fee	\$55	\$100	\$50	\$75	\$100	\$70	\$95	Unknown	\$70	Unknown
Full Price Fee	\$200	\$120	\$240	\$120	\$125	\$200	Ala Carte-billed after visit	Ala Carte-billed after visit	\$150	\$150

2026 SFS Patient Survey

Sliding Fee Program Patient Survey -2026 (156 Surveys)	Decatur Fremont		Total	%
	(73)	(83)		
Question				
1. Are you enrolled or enrolling in the sliding fee discount program?*				
a. Yes, enrolled	33	50	83	54%
b. Yes, enrolling	12	5	17	11%
c. No, not enrolled/enrolling	12	11	23	15%
d. No, not interested in the program	3	3	6	4%
e. No, have health insurance	11	14	25	16%
2. If so, do you think the fees are reasonable for the services provided by SNCHC?				
a. Strongly Agree	30	46	76	51%
b. Agree	30	18	48	32%
c. Neutral	14	11	25	16%
d. Disagree	0	0	0	0%
e. Strongly Disagree	0	1	1	1%
3. Does the sliding scale fee make it easier to access services at the health center?				
a. Yes	63	73	136	93%
b. No	8	3	11	7%
4. Have you ever cancelled an appointment due to lack of funds to pay the discounted fee?				
a. Yes	15	13	28	19%
b. No	55	67	122	81%
5. Would you refer others to the Health Center knowing we have a sliding fee discount program available?				
a. Strongly Agree	41	61	102	67%
b. Agree	21	15	36	24%
c. Neutral	8	5	13	8%
d. Disagree	0	1	1	1%
e. Strongly Disagree	1	0	1	1%

2026 had 154 patients participate in the survey. This represents a 33% increase in the number of respondents in 2026 compared to 2025. Not all patients surveyed answered every question.

Primary Care Sliding Fee Schedule

Income % of the Federal Poverty Level	100% or below	>100% to 150%	>150% to 175%	>175% to 200%	>200%
Program Code	P0	P1	P2	P3	P4
Slide Discount %	Nominal Fee	82.5%	77.5%	72.5%	0%
Provider Visit Fees	\$20	\$35	\$45	\$55	\$200
Nurse Visit ONLY Fees	\$4	\$7	\$9	\$11	\$40
* Sports Physical	\$20	\$20	\$20	\$20	\$20

Sexual Health Sliding Fee Schedule

Income % of the Federal Poverty Level	100% or below	>100% to 150%	>150% to 175%	>175% to 200%	>200%
Program Code	P0	P1	P2	P3	P4
Slide Discount %	Nominal Fee	82.5%	77.5%	72.5%	0%
Provider Visit Fees	\$20	\$35	\$45	\$55	\$200
Nurse Visit ONLY Fees	\$4	\$7	\$9	\$11	\$40

Family Planning Sliding Fee Schedule

Income % of the Federal Poverty Level	100% or below	>100% to 150%	>150% to 175%	>175% to 200%	>200% to 250%	>250%
Program Code	P0	P1	P2	P3	P4	P5
Slide Discount %	Nominal Fee	82.5%	77.5%	72.5%	70%	0%
Provider Visit Fees	\$0	\$35	\$45	\$55	\$60	\$200
Nurse Visit ONLY Fees	\$0	\$7	\$9	\$11	\$12	\$40

Ryan White Sliding Fee Schedule

Income % of the Federal Poverty Level	100% or below	>100% to 150%	>150% to 175%	>175% to 200%	>200% to 300%	>300% to 400%	>400%
Program Code	P0	P1	P2	P3	P4		
Slide Discount %	Nominal Fee	82.5%	77.5%	72.5%	0%	0%	0%
Provider Visit Fees	\$0	\$35	\$45	\$55	\$200	\$200	\$200
Nurse Visit ONLY Fees	\$0	\$7	\$9	\$11	\$40	\$40	\$40
No charges beyond ___% of pt.'s gross annual income	0%	5%	5%	5%	7%	10%	N/A

Pharmacy Sliding Fee Schedule

Income % of the Federal Poverty Level	100% or below	>100% to 150%	>150% to 175%	>175% to 200%	>200%
Program Code	P0	P1	P2	P3	P4
Current Medications (up to 30-day supply)	\$7	\$12	\$17	\$22	Full cost/\$22
Proposed Medications (up to 30-day supply)	\$9	\$12	\$17	\$22	Full cost/\$22

Pharmacy Supplies, PEP and PREP

Flat Fee Items	CURRENT	PROPOSED
PREP Generic	\$12	\$12
Epi-Pens	\$7/12/17/22/24	\$35
Insulin vials	\$10	\$15
Insulin pens	\$10	\$10
Glucose meter	\$20	\$20
Test strips (50)	\$10	\$10
Syringes (100)	\$10	\$10
Lancets (100)	\$5	\$10
DOXY PEP	-	\$9

Questions?

Motion to Approve the Clinical Sliding Fee Schedules, as presented.





SOUTHERN NEVADA
Community
HEALTH CENTER

AT THE SOUTHERN NEVADA HEALTH DISTRICT



Updates to SNHD Clinical Master Fee Schedule

DONNIE (DJ) WHITAKER
CHIEF FINANCIAL OFFICER

MARCH 26, 2026

Clinical Master Fee Schedule Review

The billing fee schedule is reviewed annually to add new fees or adjust existing fees.

Annual review of fees allows for changes on a consistent basis to stay consistent with the local medical community prevailing rates. These regular fee updates position SNHD for the potential benefit of increased reimbursement from contracted insurances and Medicare.

Uninsured patients will see minimal, or no impact based on the availability of the sliding fee or point of care discount.

Clinical Master Fee Review Methodology

Compare all fees currently utilized in SNHD operations to fees established in the Clark County local healthcare community (Source: The Physician Fees Report 2026).

Identify existing fees lower than 60th percentile of reported fees for further review. Add new fees anticipated to be utilized in 2026.

Propose fee changes based on comparison of current fees to 60th percentile of reported fees and Medicare reimbursement rate.

If there are fees not represented in the Physician Fees Report, an analysis of direct and indirect costs for services, medications or other ancillary costs is completed to form a basis for the fees.

These methods ensure SNHD is positioned to receive the fullest reimbursement possible from payers. Proposed changes to individual fees are included in Exhibit A (247 fees total with 20 new fees). All other fees on the billing fee schedule remain the same.

“Qualifying G-Codes have been set to the approved PPS rate to support shadow billing, effective 1/1/2026”

REFERENCES

The complete SNHD billing fee schedule is included in the meeting materials.

The complete master billing fee schedule that includes all Current Procedural Terminology (CPT) codes available for billing can be furnished upon request. SNHD only utilizes a small percentage of this entire schedule.

EXHIBIT A

2026 PROPOSED CHANGES TO SNHD BILLING FEE SCHEDULE

CPT CODE	Description	Current Rate	Proposed New Fee
	Integumentary		
11104	PUNCH BX SKIN SINGLE LESION	\$ 248.00	\$ 300.00
11105	PUNCH BX SKIN EA SEP/ADDL	\$ 126.00	\$ 149.00
11106	INCAL BX SKN SINGLE LES	\$ 273.00	\$ 286.00
11200	REMOVAL OF SKIN TAGS	\$ 180.00	\$ 217.00
11300	SHAVE TRUNK <0.5 CM	\$ 214.00	\$ 231.00
11301	SHAVE TRUNK 0.6-1 CM	\$ 252.00	\$ 262.00
11302	SHAVE TRUNK 1.1-2 CM	\$ 275.00	\$ 285.00
11303	SHAVE TRUNK >2 CM	\$ 317.00	\$ 320.00
11306	SHAVE S-N-H 0.6-1 CM	\$ 214.00	\$ 230.00
11307	SHAVE S-N-H 1.1-2 CM	\$ 251.00	\$ 258.00
11308	SHAVE S-N-H >2 CM	\$ 253.00	\$ 269.00
11310	SHAVE F-E-E-N-L-M <0.5 CM	\$ 242.00	\$ 258.00
11311	SHAVE F-E-E-N-L-M 0.6-1 CM	\$ 276.00	\$ 286.00
11312	SHAVE F-E-E-N-L-M 1-2 CM	\$ 287.00	\$ 290.00
11900	INJECTION INTO SKIN LESIONS	New Fee	\$ 132.00
11981	Implant - Insertion	\$ 315.00	\$ 339.00
11982	Implant - Removal	\$ 326.00	\$ 346.00
11983	Implant Removal and Reinsertion	\$ 497.00	\$ 514.00
15780	ABRASION TREATMENT OF SKIN	New Fee	\$2,632.00

	Female Genital		
57410	PELVIC EXAMINATION	\$ 296.00	\$ 298.00
58300	IUD Insertion	\$ 280.00	\$ 294.00
58301	IUD Removal	\$ 267.00	\$ 279.00
	Radiology		
71046	X-RAY EXAM CHEST 2 VIEWS - 26	\$ 131.00	\$ 166.00
76376	3D RENDER W/O POSTPROCESS-26	\$ 23.58	\$ 51.00
	Pathology & Laboratory		
80074	Acute Hepatitis Panel w/reflex	\$ 592.00	\$ 710.00
81001	URINALYSIS- AUTO W/SCOPE	\$ 41.00	\$ 55.00
82040	ASSAY OF SERUM ALBUMIN	\$ 22.00	\$ 26.00
82435	ASSAY OF BLOOD CHLORIDE	\$ 11.00	\$ 19.00
82947	Glucose Quantitative Blood	\$ 24.00	\$ 25.00
83036	Hemoglobin Glycosylated A1c	\$ 83.00	\$ 88.00
83540	ASSAY OF IRON	\$ 42.00	\$ 45.00
83690	ASSAY OF LIPASE	\$ 59.00	\$ 72.00
83718	HDL	\$ 41.00	\$ 42.00
83721	LDL	\$ 37.00	\$ 38.00
84075	ASSAY ALKALINE PHOSPHATASE	\$ 23.00	\$ 29.00

84132	ASSAY OF SERUM POTASSIUM	\$ 28.00	\$ 30.00
84155	ASSAY OF PROTEIN	\$ 20.00	\$ 28.00
84295	ASSAY OF SERUM SODIUM	\$ 30.00	\$ 36.00
84450	TRANSFERASE (AST) (SGOT)	\$ 38.00	\$ 44.00
84460	ALANINE AMINO (ALT) (SGPT)	\$ 44.00	\$ 49.00
84478	ASSAY OF TRIGLYCERIDES	\$ 40.00	\$ 50.00
84520	ASSAY OF UREA NITROGEN	\$ 22.00	\$ 29.00
84550	ASSAY OF BLOOD/URIC ACID	\$ 45.00	\$ 49.00
85027	COMPLETE CBC- AUTOMATED	\$ 45.00	\$ 46.00
86141	C-REACTIVE PROTEIN- HS	\$ 72.00	\$ 78.00
86480	Quantiferon	\$ 325.00	\$ 396.00
86480	Quantiferon Prof. Comp (26)	\$ 67.00	\$ 73.00
86705	HEP B CORE ANTIBODY- IGM	\$ 121.00	\$ 152.00
86706	Hepatitis B surface Ab- qualitative	\$ 89.00	\$ 103.00
86769	SARS-COV-2 COVID-19 ANTIBODY	\$ 77.00	\$ 83.00
86803	Hep C- Rapid- Oraquick	\$ 148.00	\$ 170.00
87340	HEPATITIS B SURFACE AG- EIA	\$ 87.00	\$ 99.00
87389	HIV-1 antigen- with HIV-1 and HIV-2 antibodies- single result	\$ 126.00	\$ 127.00
87491	Chlamydia- Detection by Amplified Probe Technique	\$ 120.00	\$ 122.00
87522	HEPATITIS C- RNA- QUANT	\$ 608.00	\$ 669.00
87591	Neisseria gonorrhoeae- Detection by Amplified Probe Technique	\$ 121.00	\$ 122.00
87624	HPV (AMP)	\$ 148.00	\$ 153.00
88164	Cytopathology- slides- cervical or vaginal/V- MANUAL	\$ 77.00	\$ 89.00

	Immuunizations/Vaccines		
90380	Respiratory syncytial virus (RSV) monoclonal antibody	\$ 941.00	\$ 988.00
90381	Respiratory syncytial virus (RSV) monoclonal antibody	\$ 941.00	\$ 1,001.00
90460	IMADM ANY ROUTE 1ST VAC/TOX	\$ 57.00	\$ 62.00
90461	INADM ANY ROUTE ADDL VAC/TOX	\$ 41.00	\$ 46.00
90471	Admin Fee 1st Vaccine	\$ 60.00	\$ 64.00
90472	Admin Fee Each Additional Vaccine (IM or SQ)	\$ 37.00	\$ 41.00
90593	CHIKUNGUNYA VACC RECOMB IM	New Fee	\$ 330.00
90611	JYNNEOS	\$ 280.00	\$ 467.00
90619	Meningococcal MenACWY MenQuadfi	\$ 309.00	\$ 352.00
90620	Meningococcal (MenB-4C-Bexsero)	\$ 381.00	\$ 422.00
90621	Meningococcal (MenB-FHbhp- Trumenba)	\$ 345.00	\$ 415.00
90632	Hepatitis A (Adult)	\$ 164.00	\$ 185.00
90633	Hepatitis A (Child)	\$ 92.00	\$ 99.00
90636	Hepatitis A & B (Twinrix)	\$ 233.00	\$ 254.00
90644	Meningococcal C/Y-HIB PRP	\$ 12.00	\$ 56.00
90647	Hib PRP-OMP	\$ 74.00	\$ 78.00
90648	Hib PRP-T	\$ 67.00	\$ 71.00
90649	HPV- quadrivalent	\$ 276.00	\$ 284.00
90650	HPV- bivalent	\$ 308.00	\$ 316.00
90651	HPV9- Gardasil	\$ 483.00	\$ 552.00

90653	Fluad TIV (2025-2026)	\$ 111.00	\$ 118.00
90661	Flucelvax TIV Pre-Filled syringe (2025-2026)	\$ 66.00	\$ 71.00
90670	Pneumococcal (Pevnar 13)	\$ 424.00	\$ 432.00
90671	PCV15 (Vaxneuvance)	\$ 465.00	\$ 494.00
90672	Influenza-live- intranasal- quadrivalent	\$ 62.00	\$ 69.00
90675	Rabies	\$ 647.00	\$ 747.00
90677	PCV20 (Pevnar 20)	\$ 542.00	\$ 597.00
90678	Respiratory syncytial virus (RSV)- vaccine- bivalent	\$ 536.00	\$ 618.00
90679	RSV Vaccine	\$ 470.00	\$ 533.00
90680	Rotavirus- Pentavalent	\$ 202.00	\$ 215.00
90681	Rotavirus- Monovalent (Rotarix)	\$ 259.00	\$ 275.00
90684	PCV21 (Capvaxive)	\$ 344.00	\$ 590.00
90687	Influenza- Quad Inj Prsve 0.25 (1 dose)	\$ 40.00	\$ 43.00
90691	Typhoid- VICPs	\$ 226.00	\$ 244.00
90694	VACC AIIV4 NO PRSRV (Fluad) 0.5ML IM	\$ 105.00	\$ 111.00
90696	DTaP-IPV VACCINE Quadracel	\$ 137.00	\$ 153.00
90697	DTaP-IPV-HepB-Hib - PFS	\$ 281.00	\$ 338.00
90698	DTaP- Hib- IPV (Pentacel)	\$ 218.00	\$ 237.00
90700	DTaP - Daptacel	\$ 74.00	\$ 79.00
90707	MMR	\$ 170.00	\$ 187.00
90710	MMRV	\$ 468.00	\$ 518.00
90713	IPV (Polio)	\$ 82.00	\$ 90.00
90714	Td (Tenivac) Preserve Free	\$ 74.00	\$ 82.00

90715	Tdap	\$ 104.00	\$ 113.00
90716	Varicella (chicken pox)	\$ 283.00	\$ 323.00
90717	Yellow Fever	\$ 325.00	\$ 332.00
90723	DTaP-Hep B- IPV (Pediarix)	\$ 201.00	\$ 214.00
90732	Pneumococcal (Pneumovax 23)	\$ 238.00	\$ 268.00
90734	Meningococcal (MCV4) Menactra	\$ 277.00	\$ 304.00
90738	Japanese encephalitis IM	\$ 520.00	\$ 539.00
90739	HEP B VACC ADULT 2 DOSE IM	\$ 280.00	\$ 319.00
90744	Hepatitis B (Child)	\$ 82.00	\$ 86.00
90746	Hepatitis B (Adult)	\$ 170.00	\$ 189.00
90750	Zoster- recombinant (Shingrix)	\$ 348.00	\$ 389.00
90756	Flu- MDCK- W/Preservative Quad MDV	\$ 62.00	\$ 66.00
	Medicine/Behavioral Health		
90791	PSYCH DIAGNOSTIC EVALUATION	\$ 269.00	\$ 270.00
90792	PSYCH DIAG EVAL W/MED SRVCS	\$ 365.00	\$ 392.00
90833	PSYTX PT&/FAM W/E&M 30 MIN	\$ 73.40	\$ 149.00
90834	PSYTX PT&/FAMILY 45 MINUTES	\$ 176.00	\$ 179.00
90836	PSYTX PT&/FAM W/E&M 45 MIN	\$ 93.04	\$ 192.00
90837	PSYTX PT&/FAMILY 60 MINUTES	\$ 206.00	\$ 211.00
90840	PSYTX CRISIS EA ADDL 30 MIN	\$ 117.00	\$ 130.00
90845	PSYCHOANALYSIS	\$ 217.00	\$ 228.00

90846	FAMILY PSYTX W/O PATIENT	\$ 104.35	\$ 201.00
90847	FAMILY PSYTX W/PATIENT	\$ 107.97	\$ 209.00
90849	MULTIPLE FAMILY GROUP PSYTX	\$ 36.99	\$ 134.00
90853	GROUP PSYCHOTHERAPY	\$ 28.33	\$ 75.00
90865	NARCOSYNTHESIS	\$ 174.16	\$ 388.00
90870	ELECTROCONVULSIVE THERAPY	\$ 180.87	\$ 387.00
90880	HYPNOTHERAPY	\$ 111.89	\$ 183.00
92551	Audiometry/screening test- pure tone- air only	\$ 42.00	\$ 43.00
92567	TYMPANOMETRY	\$ 64.00	\$ 65.00
94640	Nebulizer/Inhalation Treatment	\$ 59.00	\$ 64.00
94760	Pulmonary Diagnostic Testing/Pulse Oximetry - Single determination	\$ 20.00	\$ 22.00
97597	ACTIVE WOUND CARE/20 CM OR <	\$ 210.00	\$ 235.00
97598	ACTIVE WOUND CARE > 20 CM	\$ 119.00	\$ 135.00
97802	MEDICAL NUTRITION- INDIV- IN	\$ 73.00	\$ 76.00
97803	MED NUTRITION- INDIV- SUBSEQ	\$ 62.00	\$ 69.00
98000	SYNCH AUDIO-VIDEO NEW SF 15	New Fee	\$ 171.00
98001	SYNCH AUDIO-VIDEO NEW LOW 30	New Fee	\$ 370.00
98002	SYNCH AUDIO-VIDEO NEW MOD 45	New Fee	\$ 532.00
98003	SYNCH AUDIO-VIDEO NEW HI 60	New Fee	\$ 717.00
98004	SYNCH AUDIO-VIDEO EST SF 10	New Fee	\$ 129.00
98005	SYNCH AUDIO-VIDEO EST LOW 20	New Fee	\$ 250.00
98006	SYNCH AUDIO-VIDEO EST MOD 30	New Fee	\$ 335.00
98007	SYNCH AUDIO-VIDEO EST HI 40	New Fee	\$ 531.00
98008	SYNCH AUDIO-ONLY NEW SF 15	New Fee	\$ 123.00

98009	SYNCH AUDIO-ONLY NEW LOW 30	New Fee	\$ 196.00
98010	SYNCH AUDIO-ONLY NEW MOD 45	New Fee	\$ 309.00
98011	SYNCH AUDIO-ONLY NEW HIGH 60	New Fee	\$ 373.00
98012	SYNCH AUDIO-ONLY EST SF 10	New Fee	\$ 111.00
98013	SYNCH AUDIO-ONLY EST LOW 20	New Fee	\$ 178.00
98014	SYNCH AUDIO-ONLY EST MOD 30	New Fee	\$ 279.00
98015	SYNCH AUDIO-ONLY EST HIGH 40	New Fee	\$ 342.00
98016	BRIEF COMUNICAJ TECH-BSD SVC	\$ 16.00	\$ 40.00
98961	SELF-MGMT EDUC/TRAIN- 2-4 PT	\$ 68.00	\$ 70.00
98962	SELF-MGMT EDUC/TRAIN- 5-8 PT	\$ 47.00	\$ 50.00
99000	Collection of Other Lab Spec	\$ 22.00	\$ 27.00
99080	SPECIAL REPORTS	\$ 30.00	\$ 36.00
99213	E&M Established Outpatient Expanded Problem Focused	\$ 200.00	\$ 204.00
99214	E&M Established Outpatient - Detailed Problem Focused	\$ 293.00	\$ 295.00
99242	Office Consultation Level 2	\$ 270.00	\$ 271.00
99243	Office Consultation Level 3	\$ 395.00	\$ 405.00
99244	Office Consultation Level 4	\$ 557.00	\$ 565.00
99245	Office Consultation Level 5	\$ 760.00	\$ 802.00
99381	Preventive Medicine- New patient- <1 Year Old	\$ 242.00	\$ 249.00
99382	Preventive Medicine- New patient- 1-4 Years Old	\$ 253.00	\$ 262.00

99383	Preventive Medicine- New patient- 5-11 Years Old	\$ 258.00	\$ 269.00
99384	Preventive Medicine- New patient- 12-17 Years Old	\$ 283.00	\$ 288.00
99385	Preventive Medicine- New patient- 18-39 Years Old	\$ 322.00	\$ 330.00
99386	Preventive Medicine- New patient- 40-64 Years Old	\$ 354.00	\$ 365.00
99387	Preventive Medicine- New patient- 65 Years Old	\$ 359.00	\$ 363.00
99391	Preventive Medicine- Established patient- <1 Year Old	\$ 221.00	\$ 227.00
99392	Preventive Medicine- Established patient- 1-4 Years Old	\$ 230.00	\$ 239.00
99393	Preventive Medicine- Established patient- 5-11 Years Old	\$ 228.00	\$ 234.00
99394	Preventive Medicine- Established patient- 12-17 Years Old	\$ 248.00	\$ 256.00
99395	Preventive Medicine- Established patient- 18-39 Years Old	\$ 276.00	\$ 283.00
99396	Preventive Medicine- Established patient- 40-64 Years Old	\$ 288.00	\$ 300.00
99397	Preventive Medicine- Established patient- 65+ Years Old	\$ 303.00	\$ 315.00
99402	Preventative- Risk Reduction Counseling- Approx 30 Min.	\$ 160.00	\$ 170.00
99404	Preventative- Risk Reduction Counseling- Approx 60 Min.	\$ 198.00	\$ 231.00
99406	Tobacco counseling/3-10 min	\$ 35.00	\$ 38.00
99423	OL DIG E/M SVC 21+ MIN	\$ 126.00	\$ 130.00
99492	1ST PSYC COLLAB CARE MGMT	\$ 157.75	\$ 406.00
99494	1ST/SBSQ PSYC COLLAB CARE	\$ 64.23	\$ 228.00
	Medical & Supplies		
A4267	Condoms (Male) (1 pk = 12)	\$ 0.51	\$ 1.00
A6250	Antibiotic Ointment (Bacitracin Zinc) Packet	\$ 0.09	\$ 27.00
A6250	Silver Sulfadiazine 1% cream	\$ 0.27	\$ 27.00

	Professional Services/Procedures		
G0008	ADMN FLU VAC NO FEE SCHED SAME DAY	\$ 35.00	\$ 44.00
G0009	ADMN PNEUMCOC VAC NO FEE SCHED DAY	\$ 35.00	\$ 52.00
G0010	ADMN HEP B VAC NO FEE SCHD SAME DAY	\$ 35.00	\$ 54.00
G0101	CA Screen/Breast Exam	\$ 58.00	\$ 104.00
G0102	PROS CANCER SCR; DIGTL RECTAL EXAM	\$ 25.00	\$ 51.00
G0108	DM OP SLF-MGMT TRN SRVC IND-30 MIN	\$ 58.00	\$ 130.00
G0109	DM SLF-MGMT TRN SRVC GRP-30 MIN	\$ 16.00	\$ 59.00
G0410	GRP PSYCH NOT FAM PAR HOS 45-50 MIN	New Fee	\$ 416.00
G0270	MED NUT TX; REASSESS W/PT EA 15 MIN	\$ 34.00	\$ 54.00
G0271	MED NUT TX REASSESS GRP EA 30 MIN	\$ 18.00	\$ 21.00
G0402	INIT PREV PE LTD DUR 1ST 12 MOS MCR	\$ 176.00	\$ 338.00
G0438	ANNUAL WELLNES VST; PERSNL PPS INIT	\$ 176.00	\$ 356.00
G0439	ANNUAL WELLNESS VST; PPS SUBSQT VST	\$ 139.00	\$ 266.00
G0444	ANNUAL DEPRESSION SCREENING 15 MIN	\$ 20.00	\$ 42.00
G0446	ANN F2F INT BEHV TX CV DZ IND 15 MN	\$ 28.00	\$ 52.00
G0466	FQHC VISIT NEW PATIENT	\$ 244.00	\$ 405.00
G0467	FQHC VISIT ESTABLISHED PATIENT	\$ 244.00	\$ 405.00
G0468	FQHC VISIT IPPE/AWV	\$ 244.00	\$ 405.00
G0469	FQHC VISIT MENTAL HEALTH NEW PT	\$ 240.00	\$ 173.00
G0470	FQHC VISIT MENTAL HEALTH ESTAB PT	\$ 240.00	\$ 173.00
G2010	Remot image submit by pt	\$ 14.00	\$ 51.00

G2025	Telehealth	\$ 97.00	\$ 121.00
G8598	Aspirin 325mg (ASA)	\$ 0.02	\$ 11.00
H0002	Alcohol and/or drug screenin	\$ 35.00	\$ 77.00
	Drugs/Devices Administered Oral and other Methods		
H0033	Other Preventive Medicine- Directly Observed Therapy	\$ 6.00	\$ 36.00
J0561	Bicillin 1.2 mil Long Acting	\$ 14.19	\$ 33.00
J0561	Bicillin 2.4 LA Long Acting	\$ 14.19	\$ 66.00
J0561	Penicillin G benzathine (LA) 600-000 u/mL (100-000 per unit)	\$ 14.19	\$ 66.00
J0696	Ceftriaxone 250mg/mL- IM	\$ 13.04	\$ 20.00
J0696	Ceftriaxone 500mg/mL- IM	\$ 14.57	\$ 40.00
J1050	Medroxyprogesterone 150mg/ml IM	\$ 59.42	\$ 150.00
J1100	Dexamethasone sodium phosphate 10mg/ml INJ	\$ 39.32	\$ 170.00
J1100	Dexamethasone sodium phosphate 4mg/ml INJ	\$ 12.84	\$ 170.00
J1200	Diphenhydramine HCl 50mg/mL Inj	\$ 0.86	\$ 7.00
J1580	Gentamicin 80 mg/ml 2ML	\$ 1.17	\$ 14.00
J1580	Gentamicin 80mg/mL 2ML	\$ 1.17	\$ 14.00
J1741	Ibuprofen 200mg CAP	\$ 0.06	\$ 30.00
J1885	Ketorolac tromethamine 30mg/mL INJ	\$ 1.85	\$ 20.00
J1885	Ketorolac tromethamine 60mg/2mL INJ	\$ 3.04	\$ 40.00
J2405	Ondansetron 4mg/2mL INJ (the code is 1 unit)	\$ 0.49	\$ 12.00
J3420	Vitamin B12 (Cyanocobalamin) 1000 mg INJ	\$ 7.69	\$ 20.00

J7620	Iprat-Albut 0.5-3(2.5)mg/3mL	\$ 2.03	\$ 5.00
J7620	Ipratropium BR 0.02% SOLN	\$ 1.55	\$ 5.00
J7296	Kyleena- 19.5 mg	\$ 1,272.00	\$ 1,916.00
J7297	IUD Device - Liletta	\$ 1,303.00	\$ 1,439.00
J7298	IUD Device - Mirena	\$ 1,272.00	\$ 1,809.00
J7300	IUD Device - Paragard	\$ 1,184.00	\$ 1,559.00
J7301	IUD Device - Skyla	\$ 1,059.00	\$ 1,512.00
J7307	Implant Device - Nexplanon	\$ 1,271.00	\$ 1,668.00
J7510	PREDNISOLONE 15mg/5mL SOLN. ORAL	\$ 0.42	\$ 6.00
J7613	Albuterol Sul 2.5mg/3mL SOLN	\$ 1.17	\$ 12.50
J7626	Budesonide 0.5mg/2mL INH SUSP	\$ 9.75	\$ 10.00
J8501	Levofloxacin Tab 500 MG 50 CT	\$ 3.40	\$ 16.00
Q0091	Pap Smear	\$ 74.00	\$ 97.00
Q0163	Diphenhydramine 25mg CAP	\$ 0.02	\$ 5.00
S3620	NEWBORN METABOLIC SCREENING PANEL	\$ 5.00	\$ 127.00
S4993	Birth Control Pills - Trinessa (28 tabs)	\$ 27.90	\$ 35.00
S4993	Emergency Birth Control - Plan B	\$ 32.07	\$ 35.00
S4993	NEW DAY TAB 1.5MG 1 NSTR@	\$ 32.83	\$ 35.00
T1013	Sign Lang/Oral Interpreter	\$ 23.00	\$ 39.00
11305	SHAVE S-N-H <0.5 CM	\$ 170.00	\$ 172.00

Questions?

*Motion to Approve Clinical Master Fee Schedule,
as presented.*



CPTCODE	Description	Fee
10060	I&D Abscess	\$ 426.00
10061	I&D ABSCESS COMP/MULTIPLE	\$ 941.00
10080	DRAINAGE OF PILONIDAL CYST	\$ 908.00
10081	I&D PILONIDAL CYST COMP	\$ 1,830.00
10120	Foreign Body- SKIN- Simple	\$ 599.00
11104	PUNCH BX SKIN SINGLE LESION	\$ 248.00
11105	PUNCH BX SKIN EA SEP/ADDL	\$ 126.00
11106	INCAL BX SKN SINGLE LES	\$ 273.00
11200	REMOVAL OF SKIN TAGS	\$ 180.00
11300	SHAVE TRUNK <0.5 CM	\$ 214.00
11301	SHAVE TRUNK 0.6-1 CM	\$ 252.00
11302	SHAVE TRUNK 1.1-2 CM	\$ 275.00
11303	SHAVE TRUNK >2 CM	\$ 317.00
11305	SHAVE S-N-H <0.5 CM	\$ 1,765.00
11306	SHAVE S-N-H 0.6-1 CM	\$ 214.00
11307	SHAVE S-N-H 1.1-2 CM	\$ 251.00
11308	SHAVE S-N-H >2 CM	\$ 253.00
11310	SHAVE F-E-E-N-L-M <0.5 CM	\$ 242.00
11311	SHAVE F-E-E-N-L-M 0.6-1 CM	\$ 276.00
11312	SHAVE F-E-E-N-L-M 1-2 CM	\$ 287.00
11313	SHAVE F-E-E-N-L-M >2 CM	\$ 340.00
11730	REMOVAL OF NAIL PLATE	\$ 297.00
11732	REMOVE NAIL PLATE- ADD-ON	\$ 114.00
11750	REMOVAL OF NAIL BED	\$ 555.00
11900	INJECTION INTO SKIN LESIONS	New Fee
11981	Implant - Insertion	\$ 315.00
11982	Implant - Removal	\$ 326.00
11983	Implant Removal and Reinsertion	\$ 497.00
12001	Laceration repair- simple (site- size): 2.5 cm or less	\$ 551.00
15780	ABRASION TREATMENT OF SKIN	New Fee
15851	REMOVAL OF SUTURES	\$ 164.00
16000	Burn Care- Initial	\$ 404.00
17110	DESTRUCT LESION- 1-14	\$ 305.00
17111	DESTRUCT LESION- 15 OR MORE	\$ 305.00
20610	DRAIN/INJECT- JOINT/BURSA	\$ 343.00
36415	Collection of Venous Blood	\$ 24.00
36416	Collection of Capillary Blood	\$ 23.00
41899	DENTAL SURGERY PROCEDURE	\$ 286.00
57410	PELVIC EXAMINATION	\$ 296.00
58300	IUD Insertion	\$ 280.00
58301	IUD Removal	\$ 267.00
69209	Cerumen removal w/o instrument	\$ 49.00
69210	Cerumen removal w/ instrument	\$ 137.50

71046	X-RAY EXAM CHEST 2 VIEWS	\$ 131.00
72040	X-RAY EXAM OF NECK SPINE	\$ 125.00
76376	3D RENDER W/O POSTPROCESS	\$ 23.58
80048	BASIC METABOLIC PANEL	\$ 56.00
80051	ELECTROLYTE PANEL	\$ 53.00
80053	COMPREHEN METABOLIC PANEL	\$ 95.00
80061	LIPID PANEL	\$ 137.00
80069	RENAL FUNCTION PANEL	\$ 75.00
80074	Acute Hepatitis Panel w/reflex	\$ 592.00
80076	Hepatic Function Panel (Liver Panel)	\$ 48.00
80305	DRUG TEST PRSMV DIR OPT OBS	\$ 55.00
81001	URINALYSIS- AUTO W/SCOPE	\$ 41.00
81002	UA Dipstick	\$ 21.00
81025	Urine Pregnancy Test	\$ 40.00
82040	ASSAY OF SERUM ALBUMIN	\$ 22.00
82044	Microalbumin	\$ 23.00
82150	ASSAY OF AMYLASE	\$ 52.00
82247	BILIRUBIN- TOTAL	\$ 32.00
82248	BILIRUBIN- DIRECT	\$ 35.00
82270	Hemoccult - Clia	\$ 25.00
82310	ASSAY OF CALCIUM	\$ 29.00
82374	ASSAY- BLOOD CARBON DIOXIDE	\$ 10.00
82435	ASSAY OF BLOOD CHLORIDE	\$ 11.00
82465	Cholesterol Serum Whole Blood Total	\$ 34.00
82565	ASSAY OF CREATININE	\$ 31.00
82947	Glucose Quantitative Blood	\$ 24.00
83036	Hemoglobin Glycosylated A1c	\$ 83.00
83540	ASSAY OF IRON	\$ 42.00
83655	Lead - Clia	\$ 53.00
83690	ASSAY OF LIPASE	\$ 59.00
83718	ASSAY OF LIPOPROTEIN	\$ 41.00
83721	ASSAY OF BLOOD LIPOPROTEIN	\$ 37.00
83735	ASSAY OF MAGNESIUM	\$ 60.00
83986	ASSAY OF BODY FLUID ACIDITY	\$ 15.00
84075	ASSAY ALKALINE PHOSPHATASE	\$ 23.00
84100	ASSAY OF PHOSPHORUS	\$ 35.00
84132	ASSAY OF SERUM POTASSIUM	\$ 28.00
84155	ASSAY OF PROTEIN	\$ 20.00
84295	ASSAY OF SERUM SODIUM	\$ 30.00
84450	TRANSFERASE (AST) (SGOT)	\$ 38.00
84460	ALANINE AMINO (ALT) (SGPT)	\$ 44.00
84478	ASSAY OF TRIGLYCERIDES	\$ 40.00
84520	ASSAY OF UREA NITROGEN	\$ 22.00
84550	ASSAY OF BLOOD/URIC ACID	\$ 45.00

85014	HEMOCULT	\$ 12.00
85018	Hemoglobin - Clia	\$ 23.00
85025	COMPLETE CBC W/AUTO DIFF WBC	\$ 46.00
85027	COMPLETE CBC- AUTOMATED	\$ 45.00
86141	C-REACTIVE PROTEIN- HS	\$ 72.00
86308	Mononucleosis	\$ 29.00
86317	Hepatitis B surface Ab- quantitative	\$ 66.00
86403	Strep A	\$ 39.00
86480	Quantiferon	\$ 325.00
86580	Tuberculosis Skin Testing	\$ 32.90
86592	RPR- non treponemal qualitative	\$ 50.00
86593	RPR titer- non-treponemal quantitative	\$ 50.00
86701	HIV-1ANTIBODY	\$ 46.00
86702	HIV-2 antibody (Multispot)	\$ 126.00
86703	HIV-1 and HIV-2 antibody- single result (EIA)	\$ 65.00
86704	HEP B CORE ANTIBODY- TOTAL	\$ 123.00
86705	HEP B CORE ANTIBODY- IGM	\$ 121.00
86706	Hepatitis B surface Ab- qualitative	\$ 89.00
86708	HEP A ANTIBODY- TOTAL	\$ 140.00
86709	HEP A ANTIBODY- IGM	\$ 85.00
86769	SARS-COV-2 COVID-19 ANTIBODY	\$ 77.00
86780	Syphilis IgG antibody (treponemal)	\$ 71.00
86803	Hep C- Rapid- Oraquick	\$ 148.00
87071	Gonorrhea Culture- Isolation and Presumptive Identification	\$ 120.00
87077	N. gonorrhoeae Culture- Confirmatory Identification	\$ 151.00
87210	Smear- Wet Mount for Inf Agents	\$ 23.00
87340	HEPATITIS B SURFACE AG- EIA	\$ 87.00
87389	HIV-1 antigen- with HIV-1 and HIV-2 antibodies- single result	\$ 126.00
87390	HIV-1 AG- EIA	\$ 80.00
87490	CHYLM D TRACH- DNA- DIR PROBE	\$ 91.00
87491	Chlamydia- Detection by Amplified Probe Technique	\$ 120.00
87521	HEPATITIS C- RNA- AMP PROBE	\$ 487.00
87522	HEPATITIS C- RNA- QUANT	\$ 608.00
87536	HIV-1- DNA/RNA- QUANT	\$ 489.00
87563	M. GENITALIUM AMP PROBE	\$ 139.00
87591	Neisseria gonorrhoeae- Detection by Amplified Probe Technique	\$ 121.00
87624	HPV (AMP)	\$ 148.00
87661	TRICHOMONAS VAGINALIS AMPLIF	\$ 135.00
87804	Influenza - Clia	\$ 43.00
87806	HIV - 1/2	\$ 83.00
87807	RSV - Clia	\$ 43.00
87808	Trichomonas Vaginalis - Clia	\$ 48.00
87905	SNHD Bacterial Vaginosis	\$ 40.00
88150	Pap Smear	\$ 65.00

88164	Cytopathology- slides- cervical or vaginal/V- MANUAL	\$ 77.00
90380	Respiratory syncytial virus (RSV) monoclonal antibody	\$ 941.00
90381	Respiratory syncytial virus (RSV) monoclonal antibody	\$ 941.00
90382	RSV - Enflonsia PFS	\$ 941.00
90460	IMADM ANY ROUTE 1ST VAC/TOX	\$ 57.00
90461	INADM ANY ROUTE ADDL VAC/TOX	\$ 41.00
90471	Admin Fee 1st Vaccine	\$ 60.00
90472	Admin Fee Each Additional Vaccine (IM or SQ)	\$ 37.00
90480	ADMN SARSCOV2 VACC 1 DOSE	\$ 40.00
90611	JYNNEOS	\$ 280.00
90619	Meningococcal MenACWY MenQuadfi	\$ 309.00
90620	Meningococcal (MenB-4C-Bexsero)	\$ 381.00
90621	Meningococcal (MenB-FHbhp- Trumenba)	\$ 345.00
90622	Influenza- High Dose Seasonal	\$ 87.00
90625	Cholera- live oral	\$ 431.00
90632	Hepatitis A (Adult) VAQTA	\$ 164.00
90633	Hepatitis A (Child) VAQTA	\$ 92.00
90636	Hepatitis A & B (Twinrix)	\$ 233.00
90644	Meningococcal C/Y-HIB PRP	\$ 12.00
90647	Hib PRP-OMP	\$ 74.00
90648	Hib PRP-T	\$ 67.00
90649	H PAPILOMA VACC 3 DOSE IM	\$ 276.00
90650	HPV TYP BIVAL 3 DOSE IM	\$ 308.00
90650	HPV- bivalent	\$ 308.00
90651	HPV9- Gardasil	\$ 483.00
90653	Fluad TIV (2025-2026)	\$ 111.00
90661	Flucelvax TIV Pre-Filled syringe (2025-2026)	\$ 66.00
90670	Pneumococcal (Pevnar 13)	\$ 424.00
90671	PCV15 (Vaxneuvance)	\$ 465.00
90672	Influenza-live- intranasal- quadrivalent	\$ 62.00
90675	Rabies	\$ 647.00
90677	PCV20 (Pevnar 20)	\$ 542.00
90678	Respiratory syncytial virus (RSV)- vaccine- bivalent	\$ 536.00
90679	RSV Vaccine	\$ 470.00
90680	Rotavirus- Pentavalent	\$ 202.00
90681	Rotavirus- Monovalent (Rotarix)	\$ 259.00
90684	PCV21 VACCINE IM	\$ 344.00
90687	Influenza- Quad Inj Prsve 0.25 (1 dose)	\$ 40.00
90691	Typhoid- ViCPs	\$ 226.00
90694	VACC AIIV4 NO PRSRV (Fluad) 0.5ML IM	\$ 105.00
90696	DTAP-IPV VACCINE Quadracel	\$ 137.00
90697	DTAP-IPV-HIB-HEPB VACCINE IM	\$ 281.00
90698	DTaP- Hib- IPV (Pentacel)	\$ 218.00
90700	DTaP - Daptacel	\$ 74.00

90702	DT	\$ 120.00
90707	MMR	\$ 170.00
90710	MMRV	\$ 468.00
90713	Polio (IPV)	\$ 82.00
90714	Td Grifols	\$ 74.00
90715	Tdap Boostrix	\$ 104.00
90716	Varicella (chicken pox)	\$ 283.00
90717	Yellow Fever	\$ 325.00
90723	DTaP-Hep B- IPV (Pediatrix)	\$ 201.00
90732	Pneumococcal (Pneumovax 23)	\$ 238.00
90734	Meningococcal (MCV4) Menactra	\$ 277.00
90738	Japanese encephalitis IM	\$ 520.00
90739	HEP B VACC ADULT 2 DOSE IM	\$ 280.00
90744	Hepatitis B (Child)	\$ 82.00
90746	Hepatitis B (Adult)	\$ 170.00
90747	Hepatitis B (Recombinant) 40mcg/mL	\$ 289.00
90750	Zoster- recombinant (Shingrix)	\$ 348.00
90756	Flu- MDCK- W/Preservative Quad MDV	\$ 62.00
90791	PSYCH DIAGNOSTIC EVALUATION	\$ 269.00
90792	PSYCH DIAG EVAL W/MED SRVCS	\$ 365.00
90832	PSYTX PT&/FAMILY 30 MINUTES	\$ 138.00
90833	PSYTX PT&/FAM W/E&M 30 MIN	\$ 73.40
90834	PSYTX PT&/FAMILY 45 MINUTES	\$ 176.00
90836	PSYTX PT&/FAM W/E&M 45 MIN	\$ 93.04
90837	PSYTX PT&/FAMILY 60 MINUTES	\$ 206.00
90838	PSYTX PT&/FAM W/E&M 60 MIN	\$ 234.00
90839	PSYTX CRISIS INITIAL 60 MIN	\$ 243.00
90840	PSYTX CRISIS EA ADDL 30 MIN	\$ 117.00
90845	PSYCHOANALYSIS	\$ 217.00
90846	FAMILY PSYTX W/O PATIENT	\$ 104.35
90847	FAMILY PSYTX W/PATIENT	\$ 107.97
90849	MULTIPLE FAMILY GROUP PSYTX	\$ 36.99
90853	GROUP PSYCHOTHERAPY	\$ 28.33
90865	NARCOSYNTHESIS	\$ 174.16
90870	ELECTROCONVULSIVE THERAPY	\$ 180.87
90880	HYPNOTHERAPY	\$ 111.89
91304	COVID-19 Novavax PFS	\$ 193.00
91319	COVID-19 Pfizer (5yr - 11yr)	\$ 85.00
91320	COVID-19 Pfizer 12+	\$ 130.00
91321	SPIKEVAX (COVID-19 Vaccine- mRNA)- Pediatric 6 MO - 11 years	\$ 176.00
91322	SPIKEVAX COVID-19 Vaccine- 0.5 mL PFS 12Y and Up	\$ 169.00
92551	Audiometry/screening test- pure tone- air only	\$ 42.00
92567	TYMPANOMETRY	\$ 64.00
93000	ECG w/interpretation	\$ 85.00

93040	ECG- Rhythm Strip	\$ 76.00
94010	SPIROMETRY	\$ 135.00
94060	Spirometry- Pre and Post	\$ 233.00
94640	Nebulizer/Inhalation Treatment	\$ 59.00
94664	Nebulizer - demo/eval of pt use	\$ 126.00
94760	Pulmonary Diagnostic Testing/Pulse Oximetry - Single determination	\$ 20.00
96110	ASQ (developmental screening)	\$ 59.00
96127	BRIEF EMOTIONAL/BEHAV ASSMT	\$ 22.00
96161	CAREGIVER HEALTH RISK ASSMT	\$ 22.00
96372	Therapeutic IM/SC Injection	\$ 65.00
96381	ADMN RSV MONOC ANTB IM NJX	\$ 65.00
97597	ACTIVE WOUND CARE/20 CM OR <	\$ 210.00
97598	ACTIVE WOUND CARE > 20 CM	\$ 119.00
97802	MEDICAL NUTRITION- INDIV- IN	\$ 73.00
97803	MED NUTRITION- INDIV- SUBSEQ	\$ 62.00
97804	MEDICAL NUTRITION- GROUP	\$ 55.00
98000	SYNCH AUDIO-VIDEO NEW SF 15	New Fee
98001	SYNCH AUDIO-VIDEO NEW LOW 30	New Fee
98002	SYNCH AUDIO-VIDEO NEW MOD 45	New Fee
98003	SYNCH AUDIO-VIDEO NEW HI 60	New Fee
98004	SYNCH AUDIO-VIDEO EST SF 10	New Fee
98005	SYNCH AUDIO-VIDEO EST LOW 20	New Fee
98006	SYNCH AUDIO-VIDEO EST MOD 30	New Fee
98007	SYNCH AUDIO-VIDEO EST HI 40	New Fee
98008	SYNCH AUDIO-ONLY NEW SF 15	New Fee
98009	SYNCH AUDIO-ONLY NEW LOW 30	New Fee
98010	SYNCH AUDIO-ONLY NEW MOD 45	New Fee
98011	SYNCH AUDIO-ONLY NEW HIGH 60	New Fee
98012	SYNCH AUDIO-ONLY EST SF 10	New Fee
98013	SYNCH AUDIO-ONLY EST LOW 20	New Fee
98014	SYNCH AUDIO-ONLY EST MOD 30	New Fee
98015	SYNCH AUDIO-ONLY EST HIGH 40	New Fee
98016	BRIEF COMUNICAJ TECH-BSD SVC	\$ 16.00
98960	SELF-MGMT EDUC & TRAIN- 1 PT	\$ 69.00
98961	SELF-MGMT EDUC/TRAIN- 2-4 PT	\$ 68.00
98962	SELF-MGMT EDUC/TRAIN- 5-8 PT	\$ 47.00
99000	Collection of Other Lab Spec	\$ 22.00
99070	Vandazole Vaginal Gel TUBE	\$ 135.43
99080	SPECIAL REPORTS	\$ 30.00
99173	Vision screen- Bilateral	\$ 28.00
99174	Vision screen- bilateral- Instrument based with remote analysis and report	\$ 52.00
99177	Vision screen- bilateral- Instrument based with on-site analysis	\$ 28.00
99188	Fluoride Varnish Administered (Medical)	\$ 45.00
99202	E&M New Outpatient - Expanded Problem Focused	\$ 175.00

99203	New Patient Detailed Problem Focused	\$ 281.00
99204	E&M New Outpatient Comprehensive Problem	\$ 429.00
99205	E&M New Outpatient- Very Comprehensive Problem Focused	\$ 568.00
99211	E&M Established Outpatient - RN Only	\$ 68.00
99212	E&M Established Outpatient - Problem Focused	\$ 129.00
99213	E&M Established Outpatient Expanded Problem Focused	\$ 200.00
99214	E&M Established Outpatient - Detailed Problem Focused	\$ 293.00
99215	E&M Established Outpatient - Comprehensive Problem Focused	\$ 431.00
99242	Office Consultation Level 2	\$ 270.00
99243	Office Consultation Level 3	\$ 395.00
99244	Office Consultation Level 4	\$ 557.00
99245	Office Consultation Level 5	\$ 760.00
99341	HOME V- NP FOCUSED	\$ 123.00
99342	HOME V- NP EXPANDED	\$ 313.00
99344	HOME V- NP COMREH	\$ 345.00
99345	HOME V- NP HI COMP	\$ 391.00
99347	HOME V- EP FOCUSED	\$ 107.00
99348	HOME V- EP EXPANDED	\$ 337.00
99349	HOME V- EP DETAILED	\$ 268.00
99350	HOME V- EP COMPREHEN	\$ 377.00
99381	Preventive Medicine- New patient- <1 Year Old	\$ 242.00
99382	Preventive Medicine- New patient- 1-4 Years Old	\$ 253.00
99383	Preventive Medicine- New patient- 5-11 Years Old	\$ 258.00
99384	Preventive Medicine- New patient- 12-17 Years Old	\$ 283.00
99385	Preventive Medicine- New patient- 18-39 Years Old	\$ 322.00
99386	Preventive Medicine- New patient- 40-64 Years Old	\$ 354.00
99387	Preventive Medicine- New patient- 65 Years Old	\$ 359.00
99391	Preventive Medicine- Established patient- <1 Year Old	\$ 221.00
99392	Preventive Medicine- Established patient- 1-4 Years Old	\$ 230.00
99393	Preventive Medicine- Established patient- 5-11 Years Old	\$ 228.00
99394	Preventive Medicine- Established patient- 12-17 Years Old	\$ 248.00
99395	Preventive Medicine- Established patient- 18-39 Years Old	\$ 276.00
99396	Preventive Medicine- Established patient- 40-64 Years Old	\$ 288.00
99397	Preventive Medicine- Established patient- 65+ Years Old	\$ 303.00
99401	Preventative- Risk Reduction Counseling- Approx 15 Min.	\$ 87.00
99402	Preventative- Risk Reduction Counseling- Approx 30 Min.	\$ 160.00
99403	Preventative- Risk Reduction Counseling- Approx 45 Min.	\$ 450.00
99404	Preventative- Risk Reduction Counseling- Approx 60 Min.	\$ 198.00
99406	Tobacco counseling/3-10 min	\$ 35.00
99407	Tobacco counseling></div>10 min	\$ 68.00
99421	OL DIG E/M SVC 5-10 MIN	\$ 93.02
99422	OL DIG E/M SVC 11-20 MIN	\$ 93.02
99423	OL DIG E/M SVC 21+ MIN	\$ 126.00
99492	1ST PSYC COLLAB CARE MGMT	\$ 157.75

99494	1ST/SBSQ PSYC COLLAB CARE	\$ 64.23
99606	Medications Management Therapy	\$ 41.00
99607	Medications Management Therapy Addl 15min	\$ 41.00
99608	Medications Management Therapy	\$ 41.00
A4266	Diaphragm Device	\$ 109.00
A4267	Condoms (Male) (1 pk = 12)	\$ 0.51
A6250	Antibiotic Ointment (Bacitracin Zinc) Packet	\$ 0.09
A6250	Silver Sulfadiazine 1% cream	\$ 0.27
D0120	PERIODIC ORAL EXAMINATION	\$ 44.00
D0140	LTD ORAL EVALUATION - PROBLEM FOCUS	\$ 43.00
D0145	ORAL EVALUATION- PT < 3YRS	\$ 41.00
D0150	COMP ORAL EVALUATION - NEW/EST PT	\$ 52.00
D0190	Screening of Patient	\$ 41.00
D0191	ASSESSMENT OF A PATIENT	\$ 44.00
D0210	INTRAORL - CMPL SERIES CODE 70320	\$ 83.00
D0220	INTRAORL-PERIAPICAL 1 FILM 70300	\$ 25.00
D0230	INTRAORL-PERIAPICAL EA ADD FILM	\$ 20.00
D0240	INTRAORAL - OCCLUSAL FILM	\$ 15.00
D0270	BITEWING - SINGLE FILM	\$ 12.00
D0272	BITEWINGS - TWO FILMS	\$ 28.00
D0273	BITEWINGS - THREE FILMS	\$ 41.00
D0274	BITEWINGS - FOUR FILMS	\$ 45.00
D0601	CARIES RISK ASSESS DOC FIND LOW RSK	\$ 5.00
D0602	CARIES RISK ASSESS DOC FIND MOD RSK	\$ 5.00
D0603	CARIES RISK ASSESS DOC FIND HI RSK	\$ 5.00
D1110	PROPHYLAXIS - ADULT	\$ 75.00
D1120	PROPHYLAXIS - CHILD	\$ 75.00
D1206	TOPICAL FLUORIDE VARNISH	\$ 53.00
D1330	ORAL HYGIENE INSTRUCTIONS	\$ 1.00
D1351	Dental Sealant - per tooth	\$ 37.00
D1352	PREV RSN REST MOD HIGH CARIES RISK	\$ 11.00
D1353	SEALANT REPAIR - PER TOOTH	\$ 25.00
D1354	INTERIM CARIES ARRESTING MED APPLIC	\$ 13.00
D2330	RESIN COMPOS - ONE SURFACE ANTERIOR	\$ 116.00
D2331	RESIN COMPOS - 2 SURFACES ANTERIOR	\$ 132.00
D2332	RESIN COMPOS - 3 SURFACES ANTERIOR	\$ 169.00
D2335	RSN COMPOS-4></div> SURF/W/INCISAL ANG	\$ 211.00
D2391	RESIN COMPOS - 1 SURFACE POSTERIOR	\$ 146.00
D2392	RESIN COMPOS - 2 SURFACES POSTERIOR	\$ 186.00
D2393	RESIN COMPOS - 3 SURFACES POSTERIOR	\$ 227.00
D2394	RESIN COMPOS - 4/MORE SURFACES POST	\$ 273.00
D2740	CROWN - PORCELAIN/CERAMIC SUBSTRATE	\$ 769.00
D2751	CROWN-PORCELN FUSD PREDOM BASE METL	\$ 755.00
D2791	CROWN - FULL CAST PREDOM BASE METL	\$ 328.00

D3110	PULP CAP - DIRECT	\$ 53.00
D3120	PULP CAP - INDIRECT	\$ 56.00
D3220	TX PULPOT-CORONL DENTNOCEMENTL JUNC	\$ 138.00
D4341	Periodontal scaling & root	\$ 155.00
D4342	PERIODONTAL SCALING & ROOT PLAN 1-3 TEETH	\$ 130.00
D4346	Scalling in Presence of Generalized Moderate or Severe Gingival Inflammation	\$ 277.00
D4355	Full mouth debridement	\$ 112.00
D4381	Localized delivery of antimicrobial agent - per tooth	\$ 105.00
D4910	Periodontal maint procedures	\$ 103.00
D5110	COMPLETE DENTURE - MAXILLARY	\$ 1,103.00
D5120	COMPLETE DENTURE - MANDIBULAR	\$ 1,104.00
D5130	IMMEDIATE DENTURE - MAXILLARY	\$ 1,148.00
D5140	IMMEDIATE DENTURE - MANDIBULAR	\$ 1,149.00
D5211	MAX PARTIAL DENTURE - RESIN BASE	\$ 1,109.00
D5212	MAND PARTIAL DENTUR - RESIN BASE	\$ 1,111.00
D5213	MAX PART DENTUR-CAST METL W/RSN	\$ 1,172.00
D5214	MAND PART DENTUR- CAST METL W/RSN	\$ 1,175.00
D5410	ADJUST COMPLETE DENTURE - MAXILLARY	\$ 41.00
D5411	ADJUST COMPLETE DENTUR - MANDIBULAR	\$ 41.00
D5421	ADJUST PARTIAL DENTURE - MAXILLARY	\$ 41.00
D5422	ADJUST PARTIAL DENTURE - MANDIBULAR	\$ 41.00
D5650	ADD TOOTH EXISTING PARTIAL DENTURE	\$ 165.00
D5750	RELINE COMPLETE MAXILLARY DENTURE	\$ 266.00
D5751	RELINE COMPLETE MANDIBULAR DENTURE	\$ 266.00
D5820	INTERIM PARTIAL DENTURE	\$ 205.00
D5821	INTERIM PARTIAL DENTURE	\$ 205.00
D7140	EXTRAC ERUPTED TOOTH/EXPOSED ROOT	\$ 128.00
D7210	SURG REMOVAL ERUPTED TOOTH	\$ 201.00
D9311	Consultation with a Medical Health Care Professional	\$ 95.00
D9430	Office Visit for Observation (during regularly scheduled hours)	\$ 69.00
D9991	Dental Case Management - Addressing appointment compliance barriers	\$ 15.00
D9992	Dental Case Management - Care Coordination	\$ 31.00
D9993	Dental Case Management - Motivational Interviewing	\$ 15.00
D9994	Dental Case Management - patient education to improve oral health literacy	\$ 15.00
G0008	ADMN FLU VAC NO FEE SCHED SAME DAY	\$ 35.00
G0009	ADMN PNEUMCOC VAC NO FEE SCHED DAY	\$ 35.00
G0010	ADMN HEP B VAC NO FEE SCHD SAME DAY	\$ 35.00
G0101	CA Screen/Breast Exam	\$ 58.00
G0102	PROS CANCER SCR; DIGTL RECTAL EXAM	\$ 25.00
G0108	DM OP SLF-MGMT TRN SRVC IND-30 MIN	\$ 58.00
G0109	DM SLF-MGMT TRN SRVC GRP-30 MIN	\$ 16.00
G0270	MED NUT TX; REASSESS W/PT EA 15 MIN	\$ 34.00
G0271	MED NUT TX REASSESS GRP EA 30 MIN	\$ 18.00
G0344	Welcome to Medicare Exam	\$ 275.00

G0366	ECG w/ Welcome to Medicare exam	\$ 29.00
G0402	INIT PREV PE LTD DUR 1ST 12 MOS MCR	\$ 176.00
G0410	GRP PSYCH NOT FAM PAR HOS 45-50 MIN	New Fee
G0438	ANNUAL WELLNES VST; PERSNL PPS INIT	\$ 176.00
G0439	ANNUAL WELLNESS VST; PPS SUBSQVT VST	\$ 139.00
G0444	ANNUAL DEPRESSION SCREENING 15 MIN	\$ 20.00
G0446	ANN F2F INT BEHV TX CV DZ IND 15 MN	\$ 28.00
G0447	Obesity Counseling (15 mins face-to-face)	\$ 60.00
G0466	FQHC VISIT NEW PATIENT	\$ 405.00
G0467	FQHC VISIT ESTABLISHED PATIENT	\$ 405.00
G0468	FQHC VISIT IPPE/AWV	\$ 405.00
G0469	FQHC VISIT MENTAL HEALTH NEW PT	\$ 310.00
G0470	FQHC VISIT MENTAL HEALTH ESTAB PT	\$ 310.00
G2010	Remot image submit by pt	\$ 14.00
G2025	Telehealth	\$ 97.00
G8598	Aspirin 325mg (ASA)	\$ 0.02
H0002	Alcohol and/or drug screenin	\$ 35.00
H0033	Other Preventive Medicine- Directly Observed Therapy	\$ 6.00
J0131	Acetaminophen 120mg SUPPOS. ORAL	\$ 0.33
J0131	Acetaminophen 160mg/5ml. LQ. ORAL	\$ 0.44
J0131	Acetaminophen 325mg CAP TAB. ORAL	\$ 0.01
J0170	Epinephrine 1mg/ml INJ. VIAL	\$ 15.40
J0558	Penicillin G benz/G procaine (CR) 2.4 mil u/2mL (100-000 per unit)	\$ 132.46
J0561	Bicillin 1.2 mil Long Acting	\$ 14.19
J0561	Bicillin 2.4 LA Long Acting	\$ 14.19
J0561	Penicillin G benzathine (LA) 600-000 u/mL (100-000 per unit)	\$ 14.19
J0696	Ceftriaxone 250mg/mL- IM	\$ 13.04
J0696	Ceftriaxone 500mg/mL- IM	\$ 14.57
J1050	Medroxyprogesterone 150mg/ml IM	\$ 59.42
J1100	Dexamethasone sodium phosphate 10mg/ml INJ	\$ 39.32
J1100	Dexamethasone sodium phosphate 4mg/ml INJ	\$ 12.84
J1200	Diphenhydramine HCl 50mg/mL Inj	\$ 0.86
J1580	Gentamicin 80 mg/ml 2ML	\$ 1.17
J1741	Ibuprofen 200mg CAP	\$ 0.06
J1885	Ketorolac tromethamine 30mg/mL INJ	\$ 1.85
J1885	Ketorolac tromethamine 60mg/2mL INJ	\$ 3.04
J2020	Linezolid 100/5ml	\$ 287.30
J2020	Pretomanid Tab 200 MG	\$ 647.78
J2405	Ondansetron 4mg/2mL INJ (the code is 1 unit)	\$ 0.49
J2405	Ondansetron ODT 4mg TAB	\$ 19.60
J2550	Promethazine HCl 25mg/mL (inj code is 50mg)	\$ 31.43
J3301	Triamcinolone acetonide 40mg/mL INJ (10mg per unit)	\$ 8.73
J3420	Vitamin B12 (Cyanocobalamin) 1000 mg INJ	\$ 7.69
J3490	Capastat Injectable (1gr = 10ml)	\$ 227.51

J3490	Paser 4gm	\$ 6.85
J7296	Kyleena- 19.5 mg	\$ 1,272.00
J7297	IUD Device - Liletta	\$ 1,303.00
J7298	IUD Device - Mirena	\$ 1,272.00
J7300	IUD Device - Paragard	\$ 1,184.00
J7301	IUD Device - Skyla	\$ 1,059.00
J7307	Implant Device - Nexplanon	\$ 1,271.00
J7510	PREDNISOLONE 15mg/5mL SOLN. ORAL	\$ 0.42
J7613	Albuterol Sul 2.5mg/3mL SOLN	\$ 1.17
J7620	Iprat-Albut 0.5-3(2.5)mg/3mL	\$ 2.03
J7620	Ipratropium BR 0.02% SOLN	\$ 1.55
J7626	Budesonide 0.5mg/2mL INH SUSP	\$ 9.75
J7627	Budesonide 1mg/2mL INH SUSP	\$ 20.31
J8499	Avelox 400mg	\$ 32.15
J8499	Azithromycin 500mg	\$ 13.70
J8499	Cycloserine 250mg	\$ 68.75
J8499	Diphenhydramine 12.5mg/5ml LQ	\$ 0.02
J8499	Doxycycline 100mg	\$ 0.21
J8499	Ethambutol 100mg	\$ 8.43
J8499	Ethambutol 400 mg	\$ 1.16
J8499	Ethionamide 250 mg	\$ 5.83
J8499	Hurricane Gyno-Gel	\$ 7.61
J8499	Ibuprofen 100mg/5mL LQ ORAL	\$ 0.03
J8499	INH 300 MG 100CT	\$ 9.42
J8499	Isoniazid 100mg	\$ 0.13
J8499	Isoniazid 300mg	\$ 0.44
J8499	Levaquin 250mg	\$ 14.79
J8499	Levaquin 500mg	\$ 17.68
J8499	Levaquin 750mg	\$ 31.74
J8499	Linezolid 600mg Tab	\$ 151.05
J8499	Metronidazole 500 mg	\$ 5.71
J8499	Moxifloxacin 400 mg Tab	\$ 27.51
J8499	Mycobutin 150mg	\$ 15.40
J8499	Mylanta	\$ 0.09
J8499	Priftin 150mg	\$ 4.01
J8499	Pyrazinamide 500mg	\$ 2.52
J8499	Rifamate (rifampin and isoniazid) 150/300mg	\$ 62.53
J8499	Rifampin 150mg	\$ 17.42
J8499	Rifampin 300mg	\$ 14.42
J8499	Streptomycin 1 gram VIAL	\$ 82.24
J8499	TB Rifapentine 150mg	\$ 4.01
J8499	Vitamin B-6 25 MG	\$ 1.10
J8499	Vitamin B-6 50mg	\$ 0.02
J8499	Zyvox 600mg	\$ 11.28

J8501	Levofloxacin Tab 500 MG 50 CT	\$ 3.40
PHYEX	SNHD General Physical	\$ 91.00
Q0091	Pap Smear	\$ 74.00
Q0144	Zithromax 1 gm powder	\$ 123.50
Q0163	Diphenhydramine 25mg CAP	\$ 0.02
Q3014	TELEHEALTH ORIG SITE FACILITY FEE	\$ 77.00
Q4026	CAST SPL HIP SPICA ADULT FIBRGLS	\$2,100.00
S3620	NEWBORN METABOLIC SCREENING PANEL	\$ 5.00
S4993	Birth Control Pills - Trinessa (28 tabs)	\$ 27.90
S4993	Emergency Birth Control - Plan B	\$ 32.07
S4993	NEW DAY TAB 1.5MG 1 NSTR@	\$ 32.83
T1013	Sign Lang/Oral Interpreter	\$ 23.00
TBCB1	TBCB1 CHARGE	\$ 100.00
TBCB2	TBCB2 CHARGE	\$ 200.00
U0002	Covid-19 lab test non-cdc	\$ 100.00



FY 2026-2027 Budget Presentation

(July 1, 2026 to June 30, 2027)

Finance Committee Meeting

March 24, 2026



BUDGET PURPOSE

NRS 354.472

Purposes of Local Government Budget and Finance Act.

- (a) To establish standard methods and procedures for the preparation, presentation, adoption and administration of budgets of all local governments.
- (b) To enable local governments to make financial plans for programs of both current and capital expenditures and to formulate fiscal policies to accomplish these programs.
- (c) To provide for estimation and determination of revenues, expenditures and tax levies.
- (d) To provide for the control of revenues, expenditures and expenses in order to promote prudence and efficiency in the expenditure of public money.
- (e) To provide specific methods enabling the public, taxpayers and investors to be apprised of the financial preparations, plans, policies and administration of all local governments.

OVERVIEW

Staffing:

Staffing for **FY27** is projected to be **871.4** FTE compared to FY 2026 Augmented budget of 871.4 FTE.

Revenues:

General Fund revenues is projected at **\$124.4M** in **FY27** an increase of \$1.7M from FY26 augmented budget.

Special Revenue Fund (Grants) decrease to **\$42.5M** in **FY27** a decrease of \$14.0M from FY26 augmented budget.

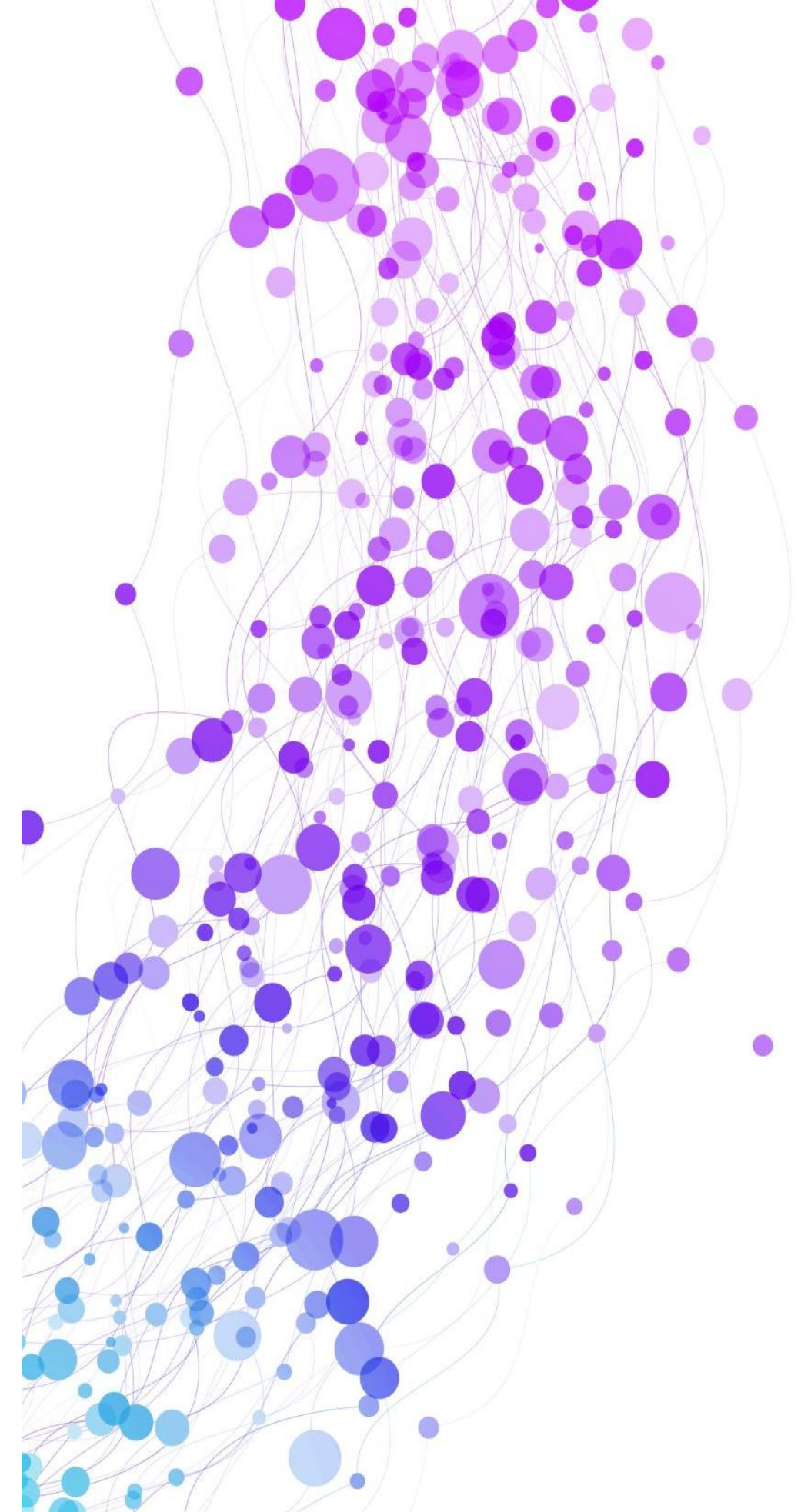
Expenditures:

General Fund expenditures is projected at **\$127.4M** in **FY27**, an increase of \$5.3M from FY26 augmented budget.

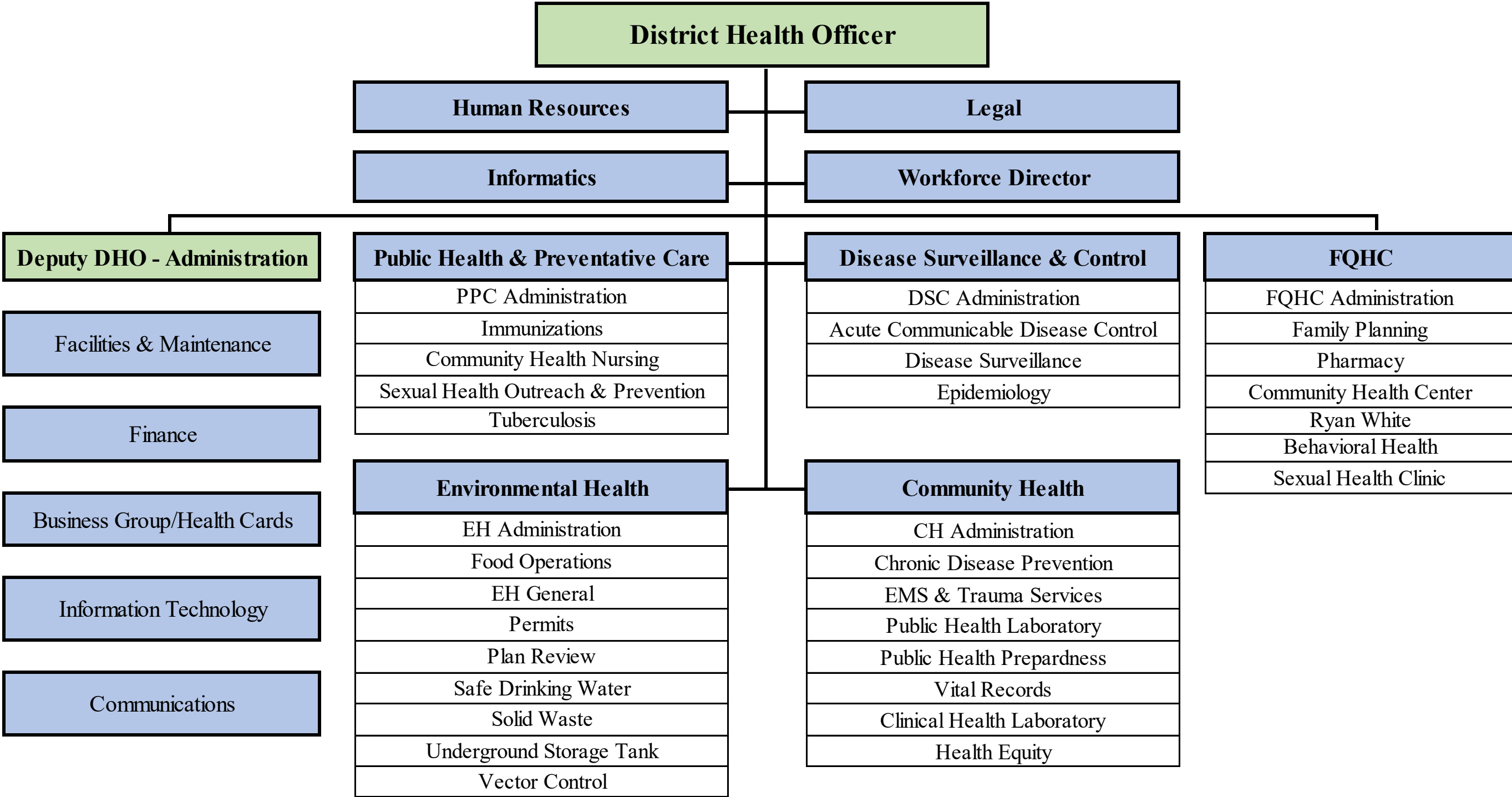
Special Revenue Fund (Grants) expenditures is projected at **\$48.0M** in **FY27**, a decrease of \$14.3M from FY26 augmented budget.

Capital:

Capital Projects Fund expenditures is projected at **\$2.3M** in **FY27**, a decrease of \$1.0M from FY26 augmented budget



SNHD ORGANIZATION CHART



District Health Officer

Human Resources

Legal

Informatics

Workforce Director

Deputy DHO - Administration

Public Health & Preventative Care

Disease Surveillance & Control

FQHC

Facilities & Maintenance

- PPC Administration
- Immunizations
- Community Health Nursing
- Sexual Health Outreach & Prevention
- Tuberculosis

- DSC Administration
- Acute Communicable Disease Control
- Disease Surveillance
- Epidemiology

- FQHC Administration
- Family Planning
- Pharmacy
- Community Health Center
- Ryan White
- Behavioral Health
- Sexual Health Clinic

Finance

Environmental Health

Community Health

Business Group/Health Cards

- EH Administration
- Food Operations
- EH General
- Permits
- Plan Review
- Safe Drinking Water
- Solid Waste
- Underground Storage Tank
- Vector Control

- CH Administration
- Chronic Disease Prevention
- EMS & Trauma Services
- Public Health Laboratory
- Public Health Preparedness
- Vital Records
- Clinical Health Laboratory
- Health Equity

Information Technology

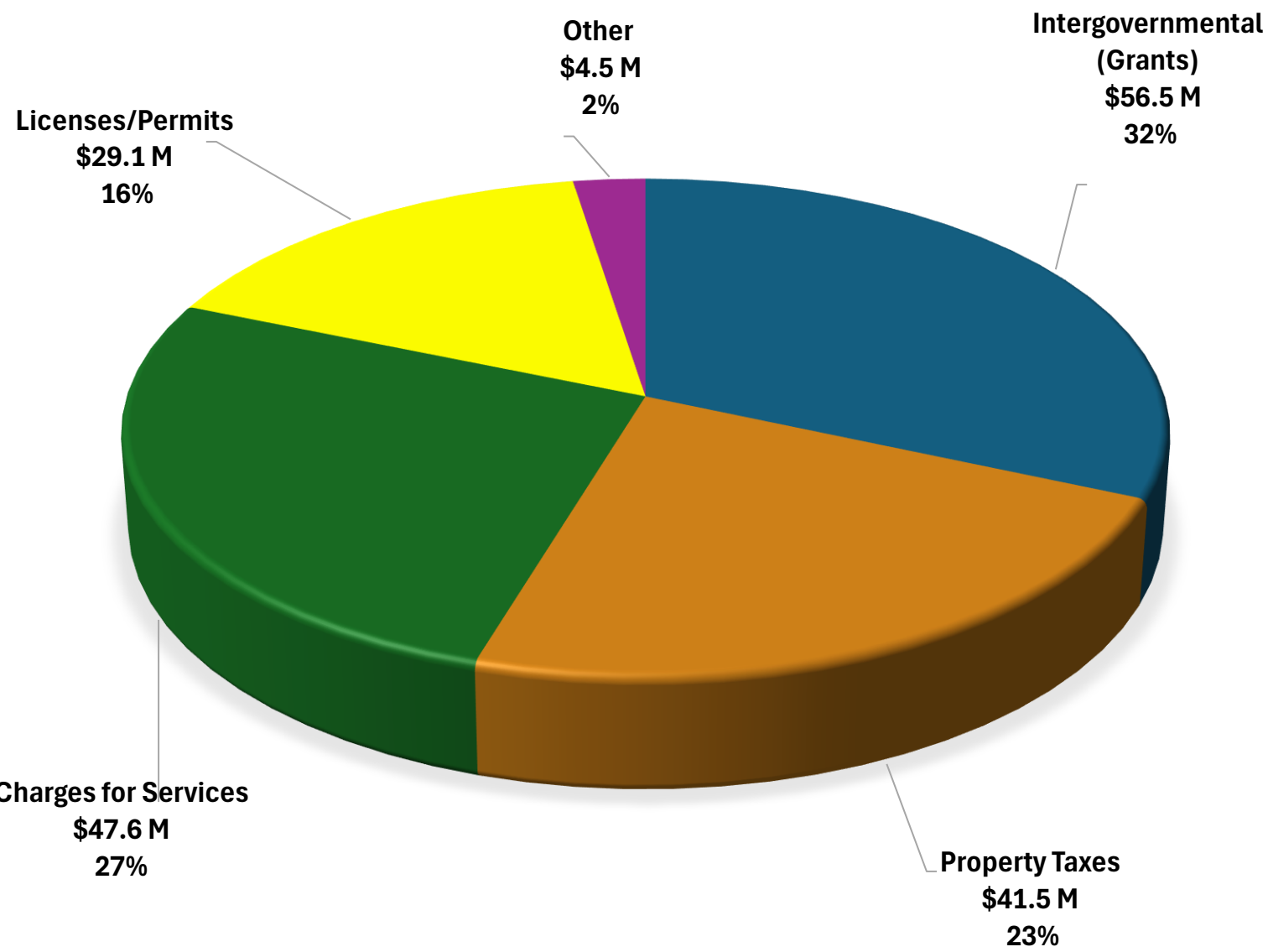
Communications

REVENUES

COMBINED GF & SRF REVENUES BY SOURCE – COMPARISON

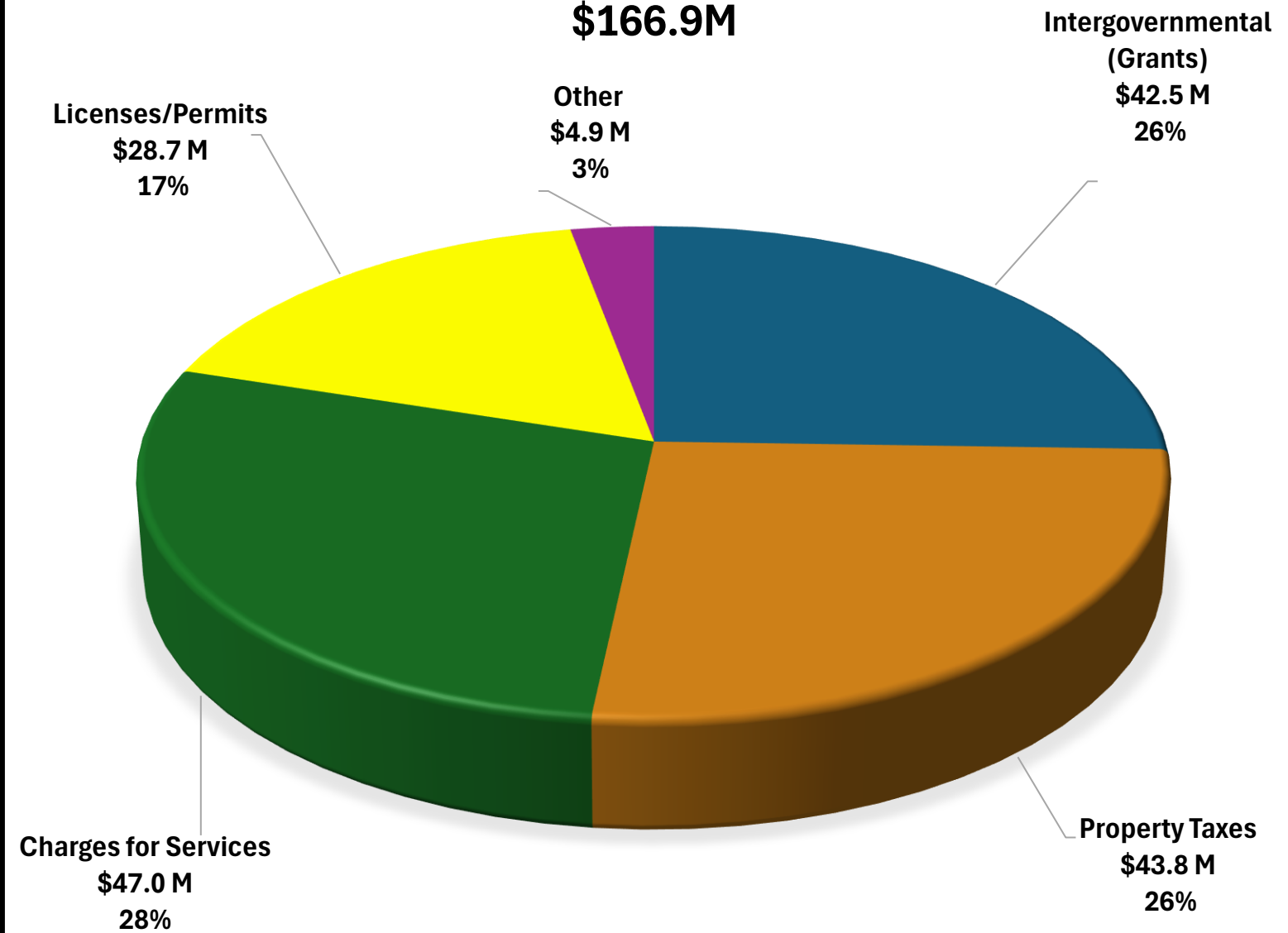
FY2026 AUGMENTED BUDGET

REVENUE
\$179.2M



FY2027 PROPOSED BUDGET

REVENUE
\$166.9M



% Percentages are based on total revenue.

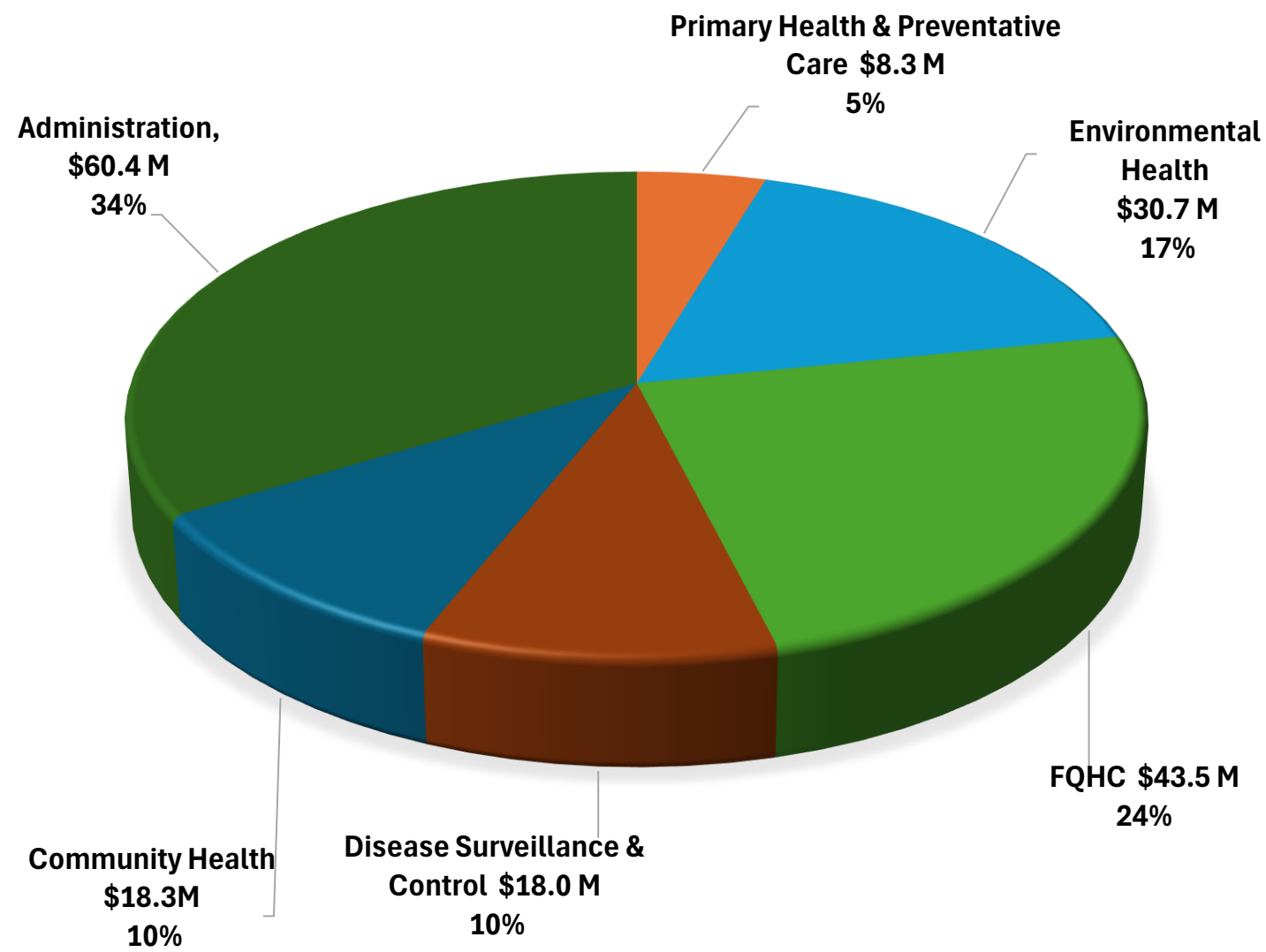
**Does not include Transfers In

REVENUES

COMBINED REVENUES BY DIVISION – COMPARISON

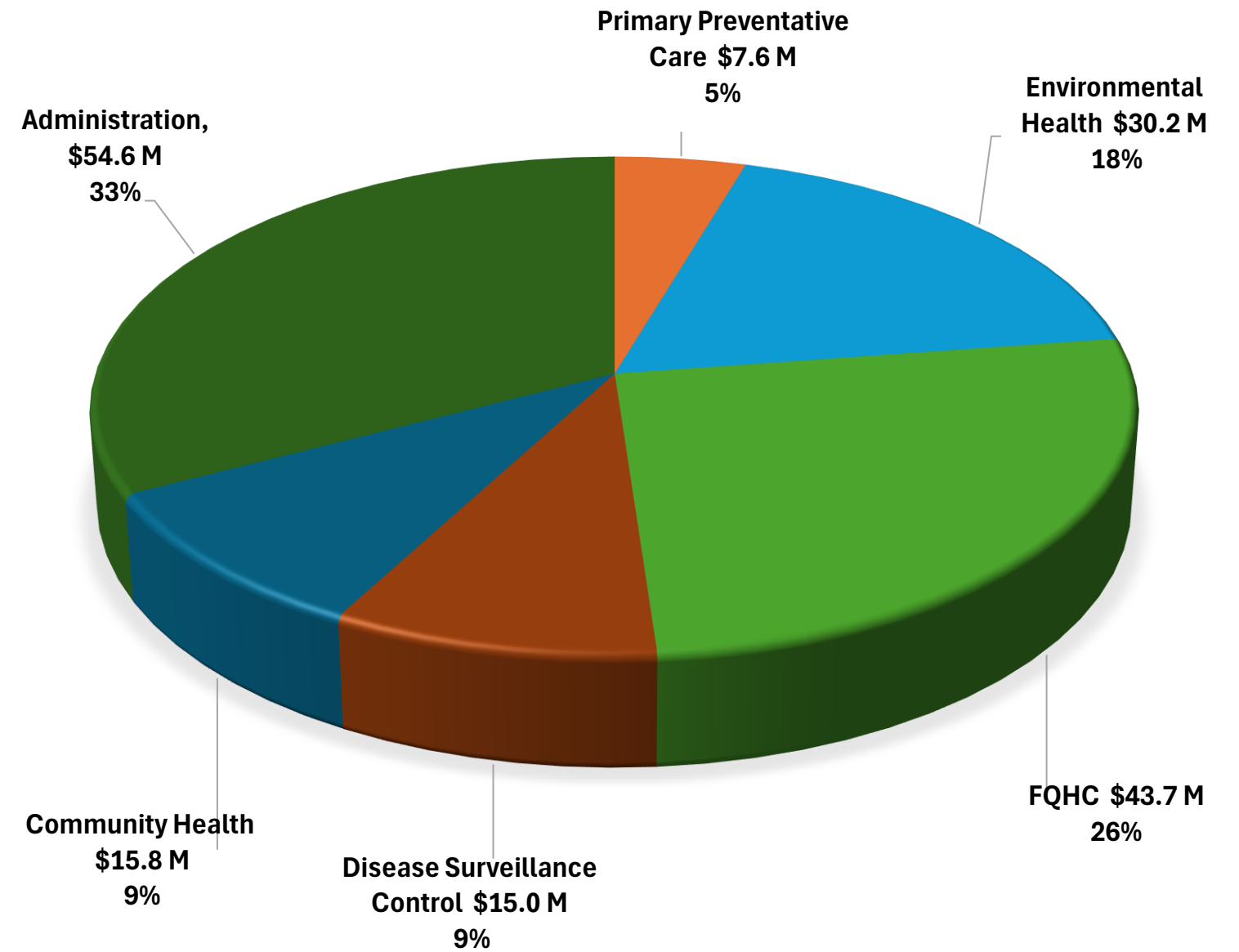
FY2026 AUGMENTED BUDGET

REVENUE
\$179.2M



FY2027 PROPOSED BUDGET

REVENUE
\$166.9M



% Percentages are based on total revenue.

**Does not include Transfers In

REVENUES

GENERAL & GRANTS FUND

FY 2027 Clark County Property Tax revenue is expected at \$43.7M, an increase of \$2.2M or 5% compared to \$41.5M from FY2026.

Total General Funds Revenue increased from \$122.7M to \$124.4M, a \$1.7M or 1.0% increase from FY2026 Augmentation.

Special Revenue Funds decreased from \$56.5M to \$42.5M, a reduction of \$14.0M including conclusion of Senate Bill 118 (\$8.9M) and other lab expansion funding (\$1.3M) as well as expiration of the State Opioid Response (\$2.0M) funding and general reductions in other grant expenditures compared to the FY2026 Augmentation.

EXPENDITURES

COMBINED EXPENSES BY SOURCE – COMPARISON

FY2026 AUGMENTED BUDGET

EXPENSE
\$184.5M

Contractual
\$20.0 M
11%

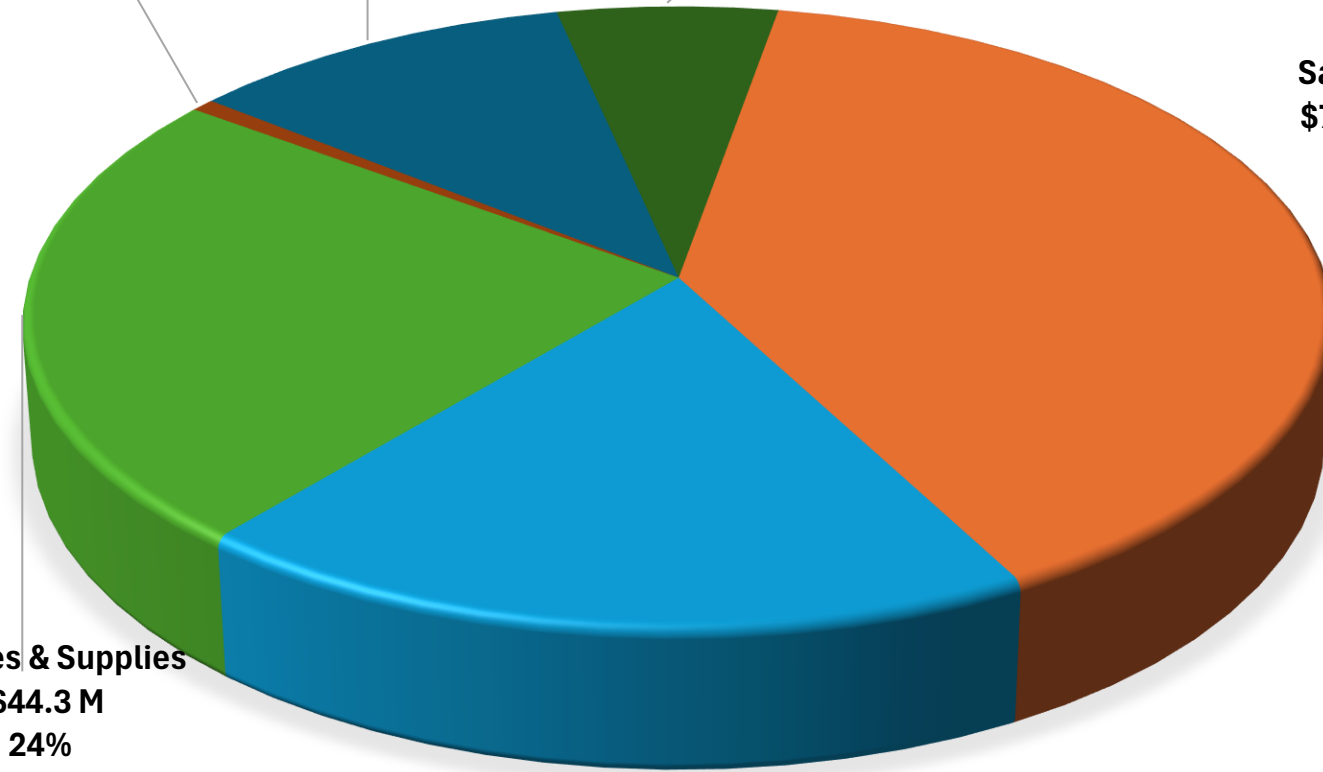
Capital
\$11.4 M
6%

Travel \$1.2 M
1%

Salaries
\$72.8 M
39%

Services & Supplies
\$44.3 M
24%

Taxes & Benefits
\$34.8 M
19%



FY2027 PROPOSED BUDGET

EXPENSE
\$175.4

Travel \$1.0 M
0%

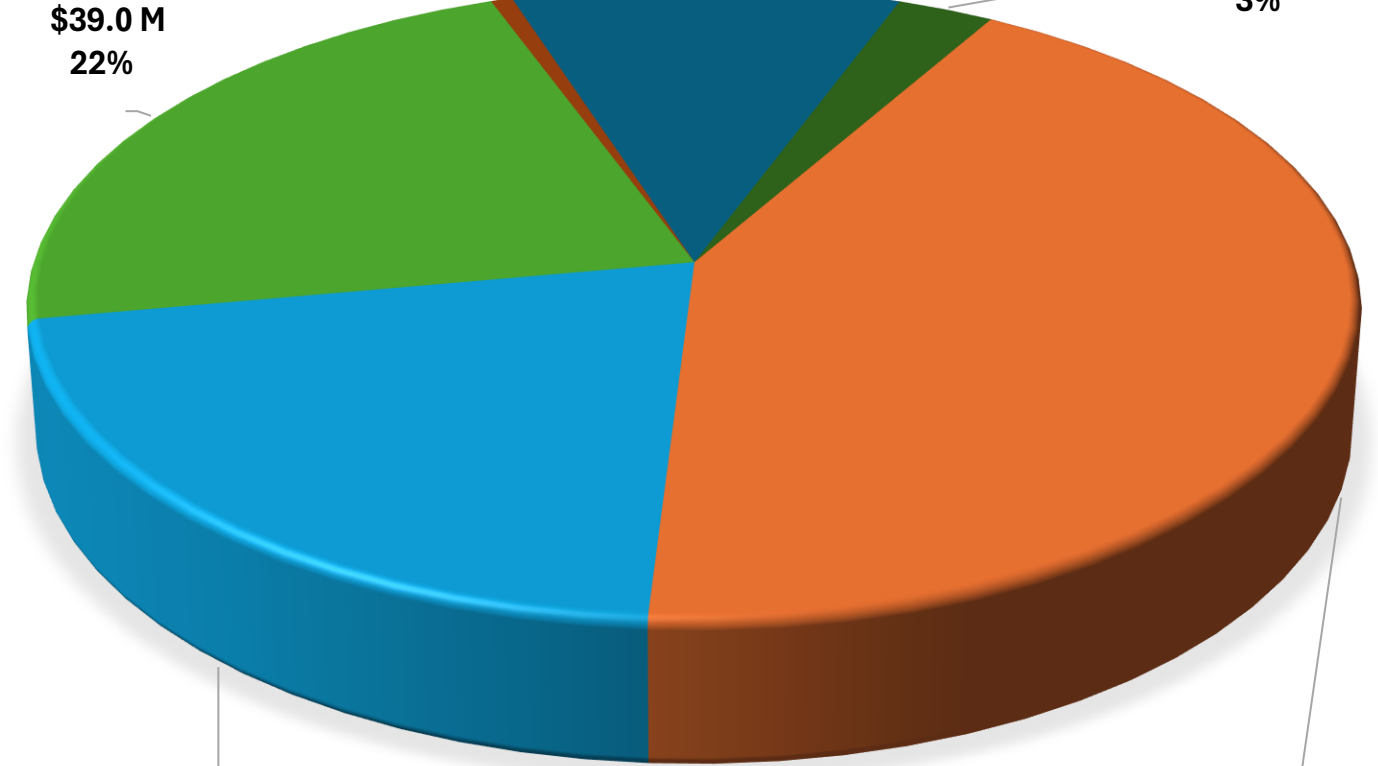
Contractual, \$18.8 M
11%

Capital
\$4.7 M
3%

Services & Supplies
\$39.0 M
22%

Taxes & Benefits
\$37.1 M
21%

Salaries
\$74.8 M
43%



\$ Amounts are based on total expense.

**Does not include cost allocations

**Does not include Transfers between GF and SRF .

**Does not include Transfers Out to Capital of \$3M and \$2.5M, respectively.

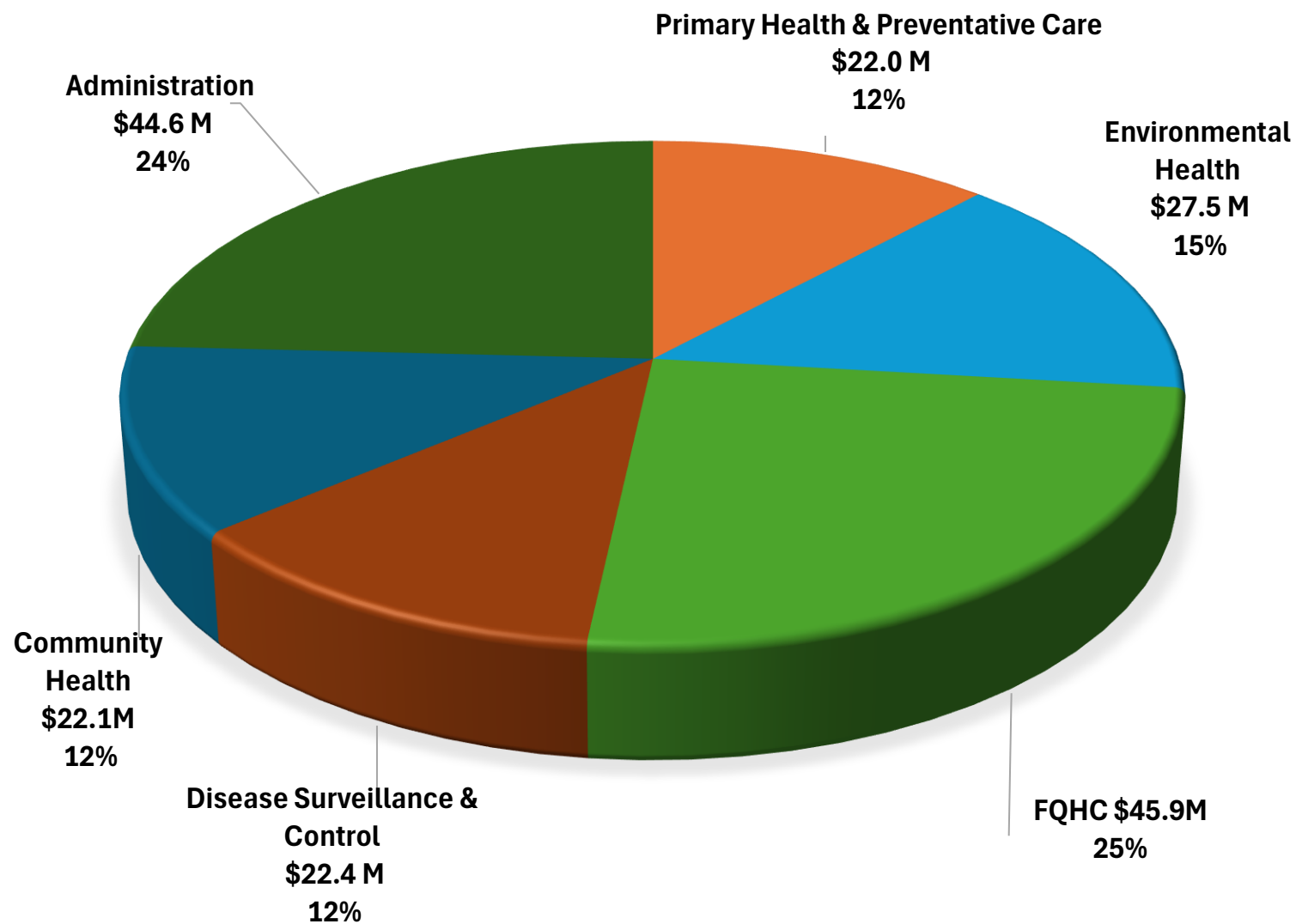
EXPENDITURES

COMBINED EXPENSES BY DIVISION – COMPARISON

FY2026 AUGMENTED BUDGET

EXPENSE

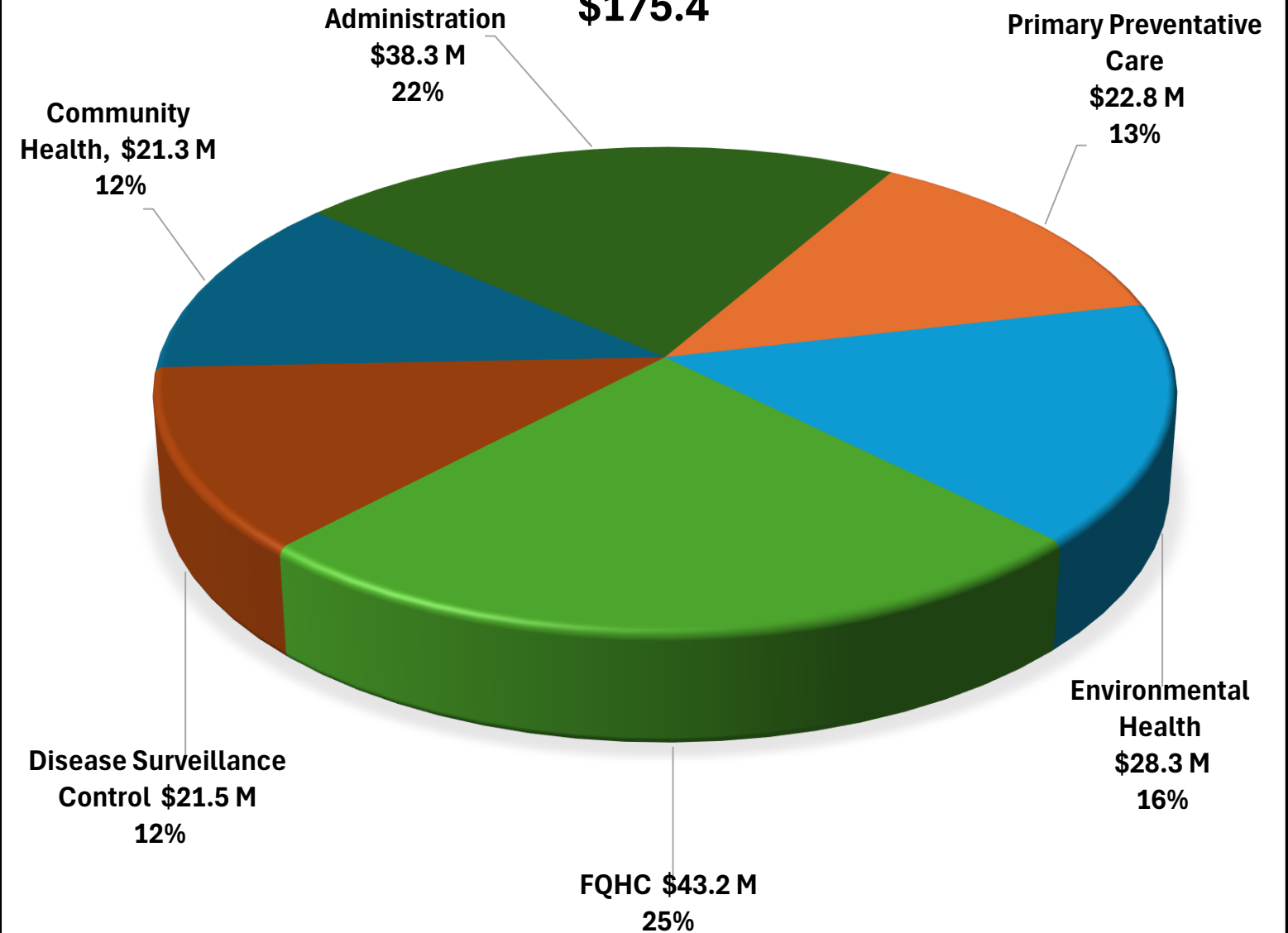
\$184.5



FY2027 PROPOSED BUDGET

EXPENSE

\$175.4



\$ Amounts are based on total expense.

**Does not include Cost Allocations

**Does not include Transfers between GF and SRF.

**Does not include Transfers Out to Capital of \$3M and \$2.5M, respectively.

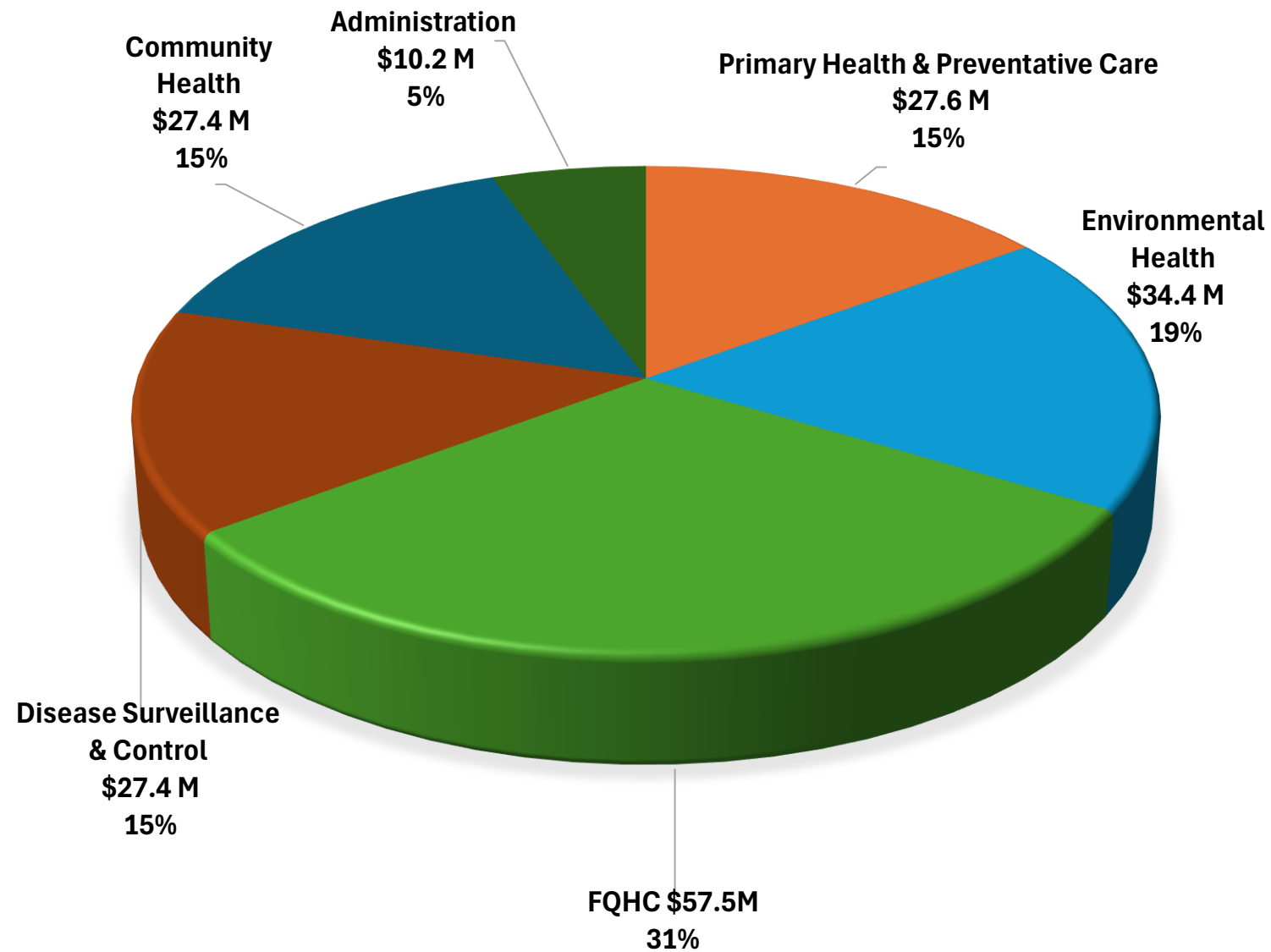
EXPENDITURES

COMBINED EXPENSES BY DIVISION – COMPARISON

FY2026 AUGMENTED BUDGET

EXPENSE

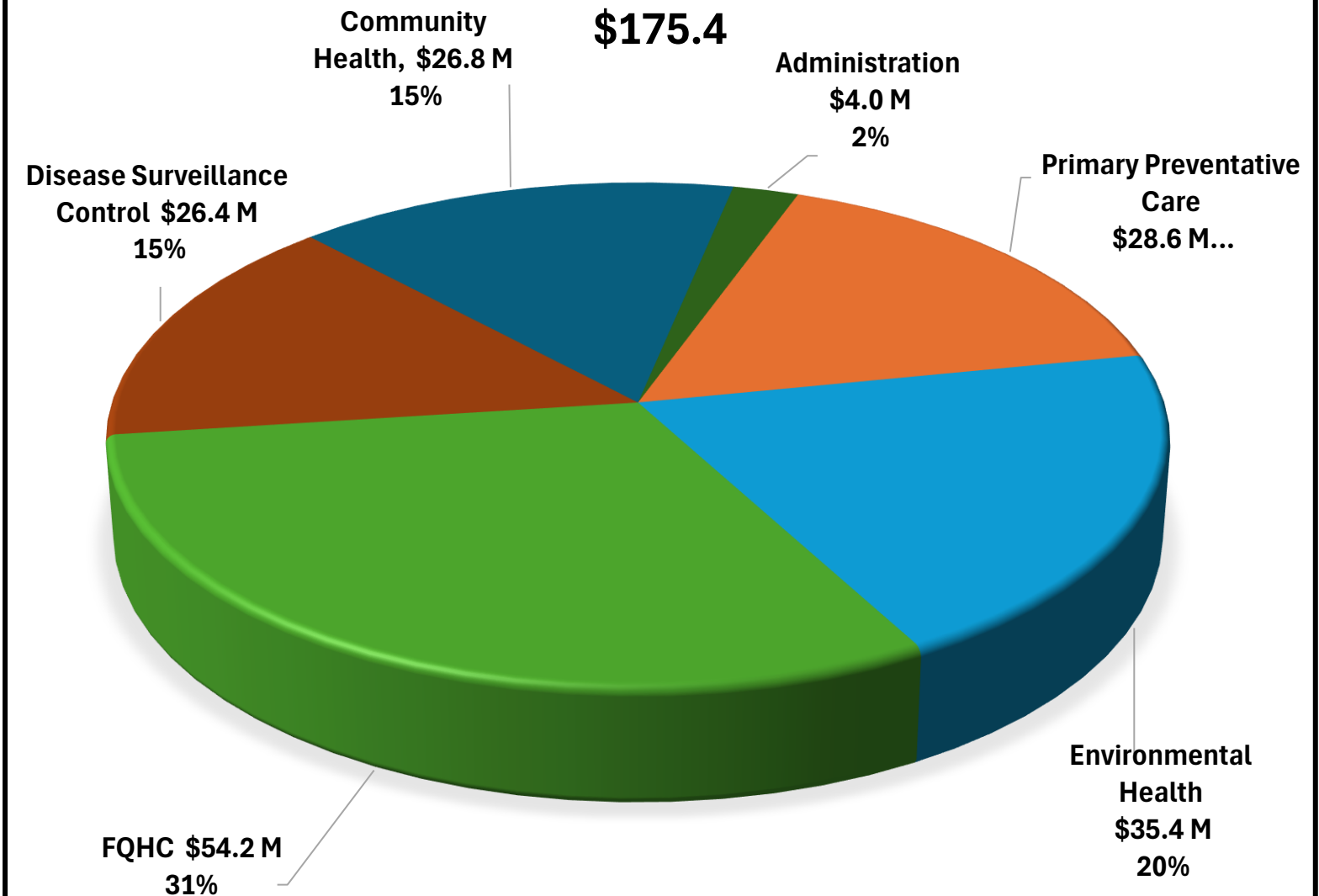
\$184.5M



FY2027 PROPOSED BUDGET

EXPENSE

\$175.4



\$ Amounts are based on total expense.

**Does not include Transfers between GF and SRF.

**Does not include Transfers Out to Capital of \$3M and \$2.5M, respectively.

EXPENDITURES

GENERAL FUND HIGHLIGHTS

General Fund employee salaries and benefits for FY27 total \$84.3M, an increase of \$5.5M or 15% from FY26 Augmentation.

-FY27 budget includes a full year of salaries and benefits for approximately 75 vacant positions (in active recruitment, pending or hold status) that were included in the FY26 Augmented budget at a reduced expenditure level to reflect the partial year remaining. Changes in the status of the positions will be included in future augmentation.

-FY27 budget also reflects the move of 13.59 FTE from Senate Bill 118 to General Fund due to the expiration of the funding.

General Fund Pharmacy Medical supplies decreased from \$28.4M to \$25M, a decrease of \$3.4M or 12%

EXPENDITURES

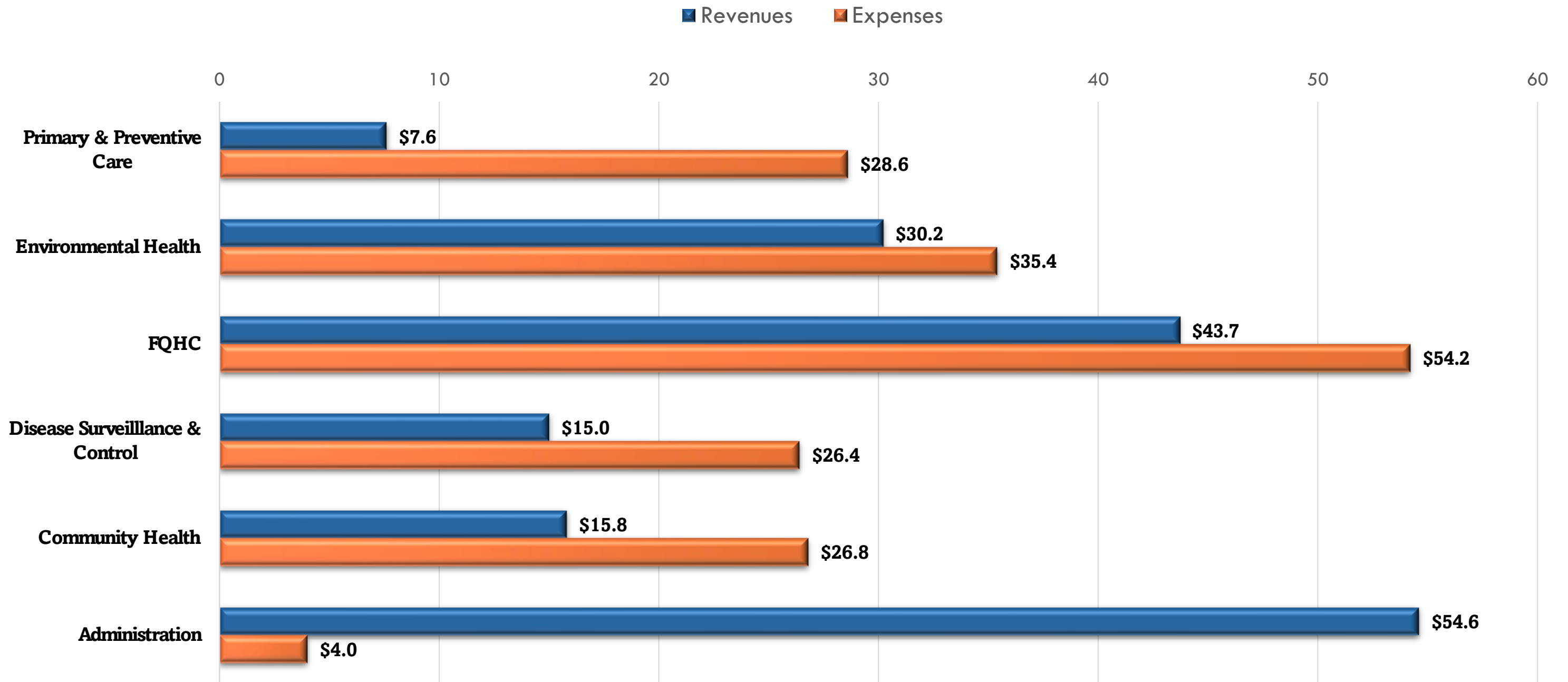
GRANTS FUND HIGHLIGHTS

Special Revenue Fund FY27 expenses decreased from \$62.3M to **\$47.4M** including conclusion of Senate Bill 118 (\$8.9M) and other lab expansion funding (\$1.3M) as well as expiration of the State Opioid Response (\$2.0M) funding and general reductions in other grant expenditures compared to the FY2026 Augmentation.

PHI Grant revenue is estimated at **\$6.1M in FY27**. Anticipated FTE total is 40.2 positions with estimated salaries & benefits of \$5.1M.

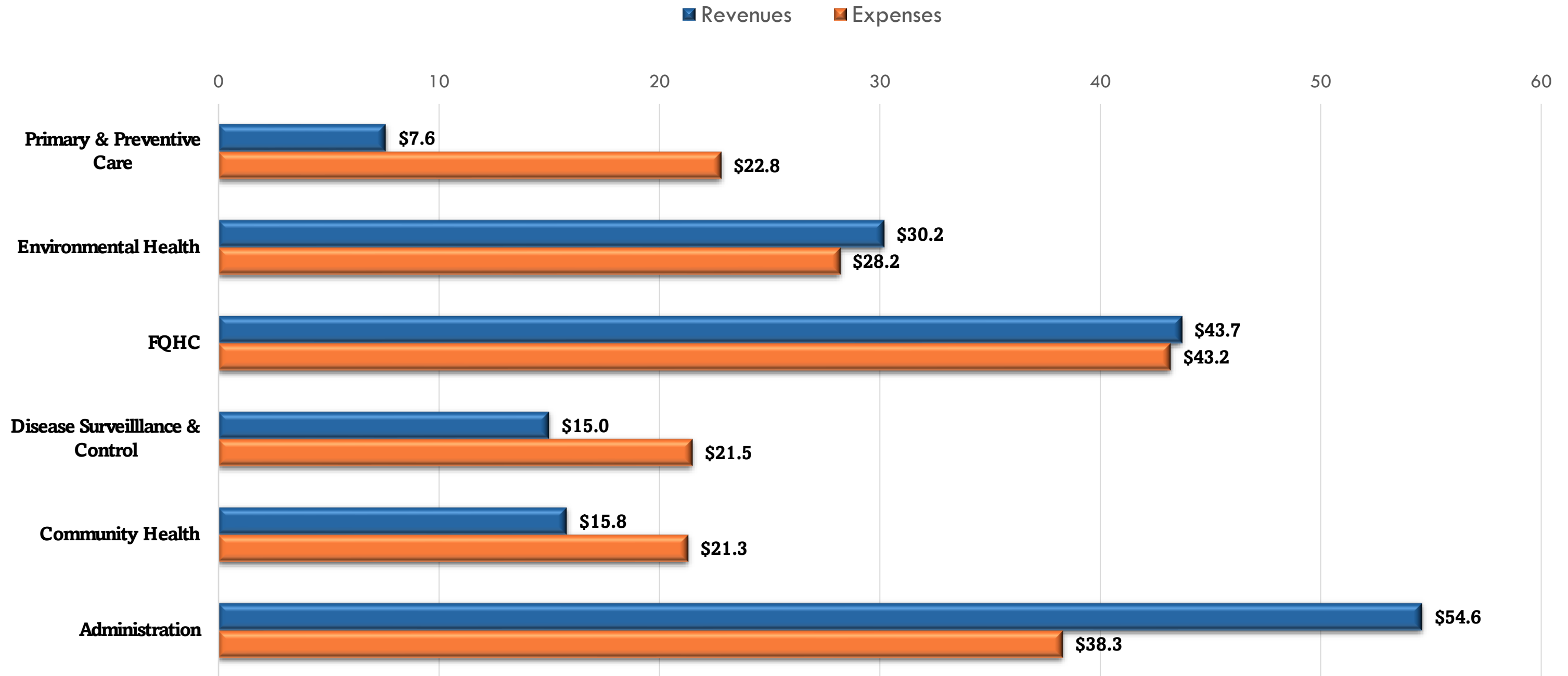
REVENUES VS. EXPENDITURES

COMBINED FUNDS BY DIVISION



REVENUES VS. EXPENDITURES

COMBINED FUNDS BY DIVISION – *EXCLUDES COST ALLOCATIONS*



**Does not include cost allocations

PERSONNEL

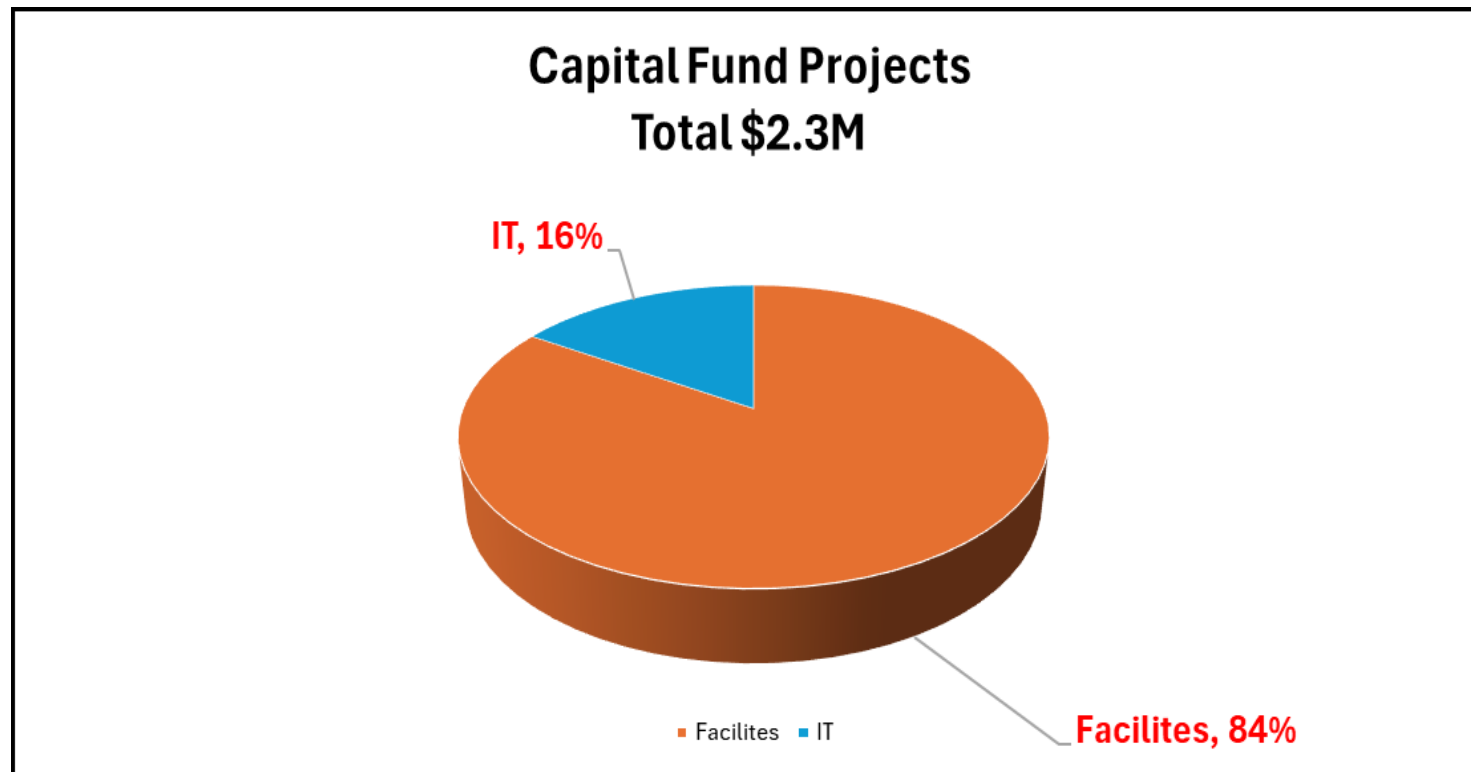
Southern Nevada Health District FY27 FTE Count					
FY26 FTE Counts	2025/2026	2025/2026	2025/2026	2026/2027	FTE Change
Division	Actuals	Adopted	Amended	Proposed	FY26 AM vs FY27
Public Health & Preventive Care ⁽¹⁾	107.6	114.0	120.1	119.1	-1.0
Environmental Health ⁽²⁾	199.3	205.0	205.0	206.0	1.0
FQHC	111.1	126.5	119.5	119.5	0.0
Disease Surveillance & Control ⁽³⁾	118.4	132.0	135.0	121.0	-14.0
Community Health ⁽⁴⁾	97.3	103.0	99.0	100.0	1.0
Administration ⁽⁵⁾	184.4	192.0	192.8	205.8	13.0
Total:	818.1	872.5	871.4	871.4	0.0

Division	FY2026 Amended		FY 2027 Proposed		Change	
	General Fund	Special Revenue	General Fund	Special Revenue Fund	General Fund	Special Revenue Fund
Public Health & Preventive Care	78.2	41.9	80.1	39.0	1.8	-2.8
Environmental Health	194.1	10.9	195.6	10.4	1.5	-0.5
FQHC	87.0	32.5	88.8	30.7	1.8	-1.8
Disease Surveillance & Control	48.9	86.2	58.2	62.8	9.4	-23.3
Community Health	47.2	51.9	47.1	52.9	-0.05	1.05
Administration	173.4	19.4	186.2	19.5	12.8	0.2
Grand Total	628.7	242.7	656.0	215.4	27.3	-27.3

1. Reduction of 1 Clinical Health Worker
2. Addition of 1 Environmental Health Specialist
3. Transfer of 14 Informatics FTE from Disease Surveillance & Control to Administration
4. Addition of 1 Medical Lab Tech in Public Health Lab
5. Transfer of 14 Informatics FTE to Administration from Disease Surveillance & Control and reduction of 1 vacant IT Software Engineer

CAPITAL FUND

FY2027 CAPITAL IMPROVEMENT PROJECTS



Capital Improvement Projects			
	FY26 Amended	FY27 Proposed	Change
Facilities			
Improvements	1,986,831	1,575,000	(411,831)
Equipment	16,360	328,500	312,140
Vehicles	-	-	-
Total	2,003,191	1,903,500	(99,691)
IT			
Computer Hardware/Software	1,082,000	58,000	(1,024,000)
Equipment	187,000	301,000	114,000
Professional Services	32,000	-	(32,000)
Total	1,301,000	359,000	(942,000)
Total Capital Improvement Projects	3,304,191	2,262,500	(1,041,691)

GENERAL FUND

THREE FISCAL YEAR ACTIVITY

General Fund	FY25 Actual	FY 26 Amended	FY 27 Proposed
Beginning Fund Balance	54,872,828	65,128,565	53,853,012
Revenues	122,837,881	122,692,068	124,387,507
Expenditures/Other Uses	112,582,144	133,967,621	138,357,270
Change in Fund Balance	10,255,737	(11,275,553)	(13,969,763)
Ending Fund Balance	65,128,565	53,853,012	39,883,249
<i>Includes \$3M contingency, cost allocations and transfers out to Special Revenue and Capital Project funds for FY2027</i>			

SPECIAL REVENUE FUND

THREE FISCAL YEAR ACTIVITY

Special Revenue	FY25 Actual	FY 26 Amended	FY 27 Proposed
Beginning Fund Balance	82,081	121,453	121,453
Revenue/Other	50,358,044	62,297,514	47,954,477
Expenditures/Other Uses	50,318,672	62,297,514	47,954,477
Change in Fund Balance	39,372	-	-
Ending Fund Balance	121,453	121,453	121,453
<i>Includes cost allocation and transfers in from General Fund</i>			

CAPITAL PROJECTS FUND

THREE FISCAL YEAR ACTIVITY

Capital Projects	FY25 Actual	FY 26 Amended	FY 27 Proposed
Beginning Fund Balance	2,730,175	3,570,482	3,375,851
Revenue/Other	2,202,104	3,109,559	2,616,113
Expenditures/Other Uses	1,361,797	3,304,191	2,262,500
Change in Fund Balance	840,307	(194,631)	353,613
Ending Fund Balance	3,570,482	3,375,851	3,729,464
<i>Includes transfers from General Fund</i>			

BOND RESERVE FUND

THREE FISCAL YEAR ACTIVITY

Bond Reserve Fund	FY25 Actual	FY 26 Amended	FY 27 Proposed
Beginning Fund Balance	3,042,808	3,215,801	3,312,421
Revenue/Other	172,993	96,620	135,000
Expenditures/Other Uses	-	-	-
Change in Fund Balance	172,993	96,620	135,000
Ending Fund Balance	3,215,801	3,312,421	3,447,421

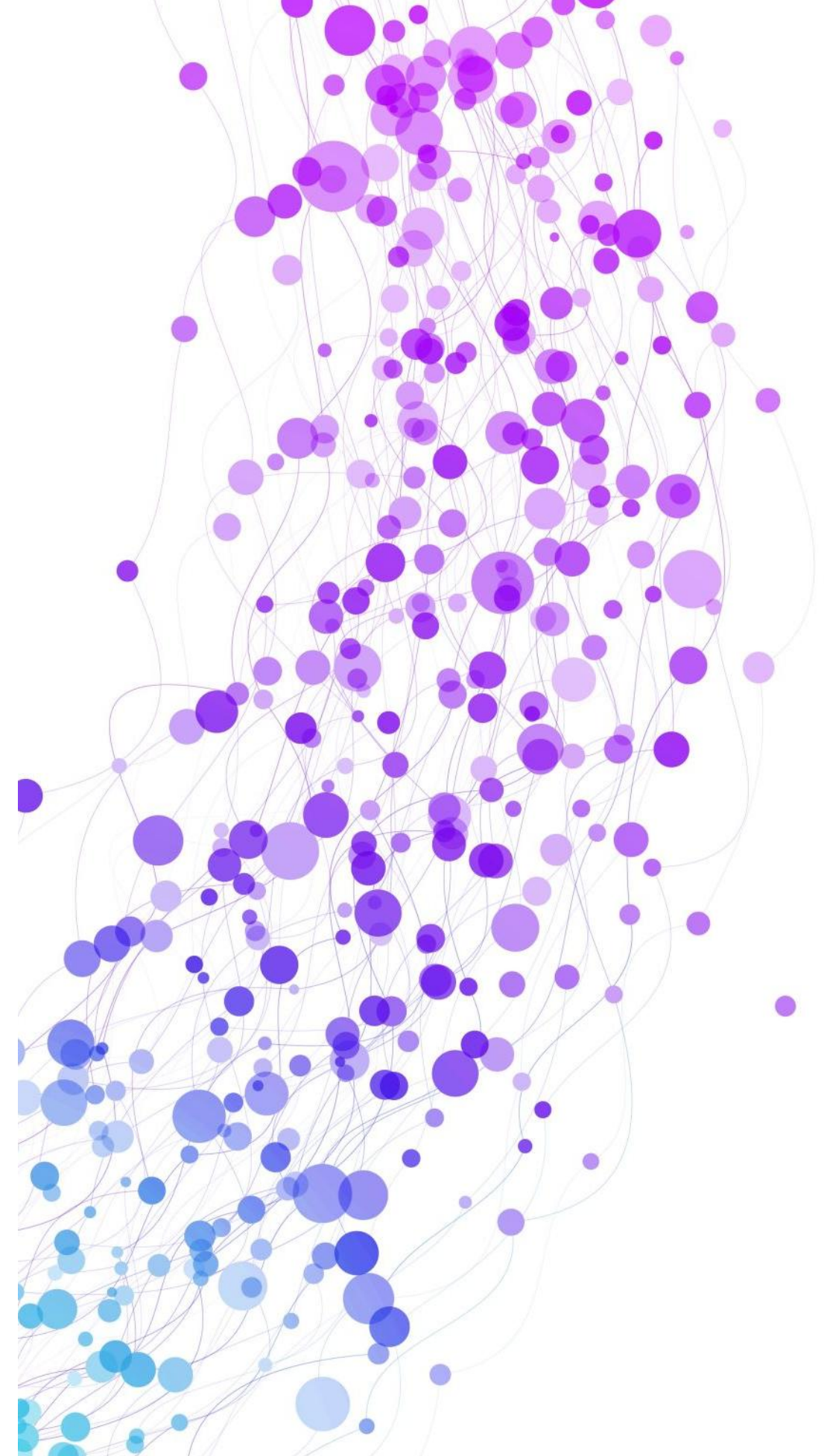
INTERNAL SERVICE FUND

THREE FISCAL YEAR ACTIVITY

Internal Service Fund	FY25 Actual	FY 26 Amended	FY 27 Proposed
Beginning Fund Balance	91,295	93,376	94,170
Revenues	2,081	794	2,000
Expenditures	-	-	-
Change in Fund Balance	2,081	794	2,000
Ending Fund Balance	93,376	94,170	96,170

RECOMMENDATION

- Approval of the FY 2027 budget as presented.
- To be submitted to Clark County on or before April 1, 2026 pending further instructions.





QUESTION AND ANSWER

SNHD INTERIM FINANCIAL REPORT

(UNAUDITED)

As of December 2025

(Includes Adopted Budget Approved March 2025)

Summary of Revenues, Expenses, and Net Position

(as of December 31, 2025 – Unaudited)

Revenues

- General Fund revenue (Property Taxes, Charges for Services, Licenses/Permits & Other) is \$69.37M compared to a budget of \$60.79M, a favorable variance of \$8.58M.
- Special Revenue Funds (Grants) is \$22.08M compared to a budget of \$30.94M, an unfavorable variance of \$8.86M.
- Total Revenue is \$91.45M compared to a budget of \$91.73M, an unfavorable variance of \$0.28M.

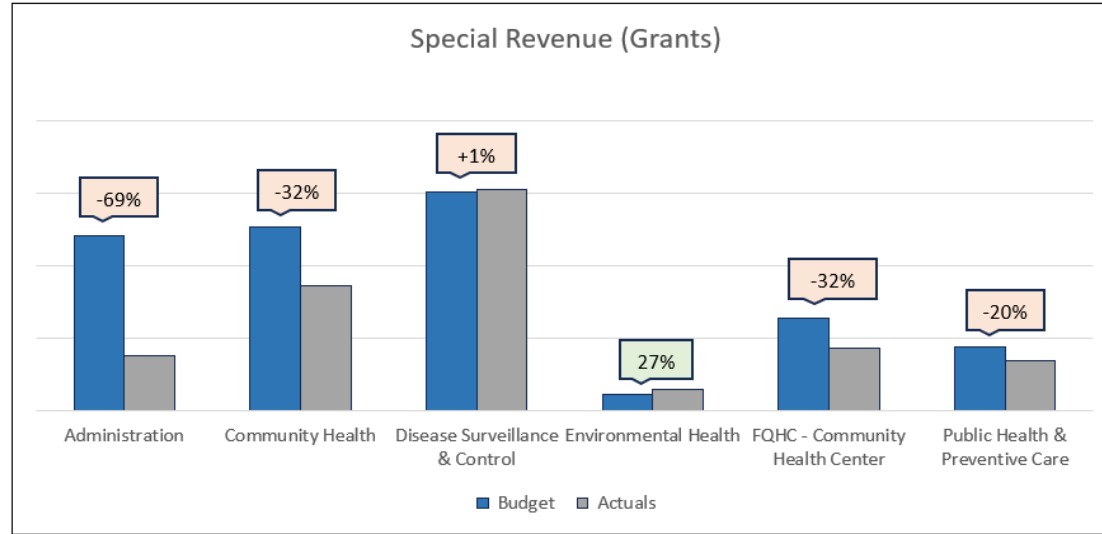
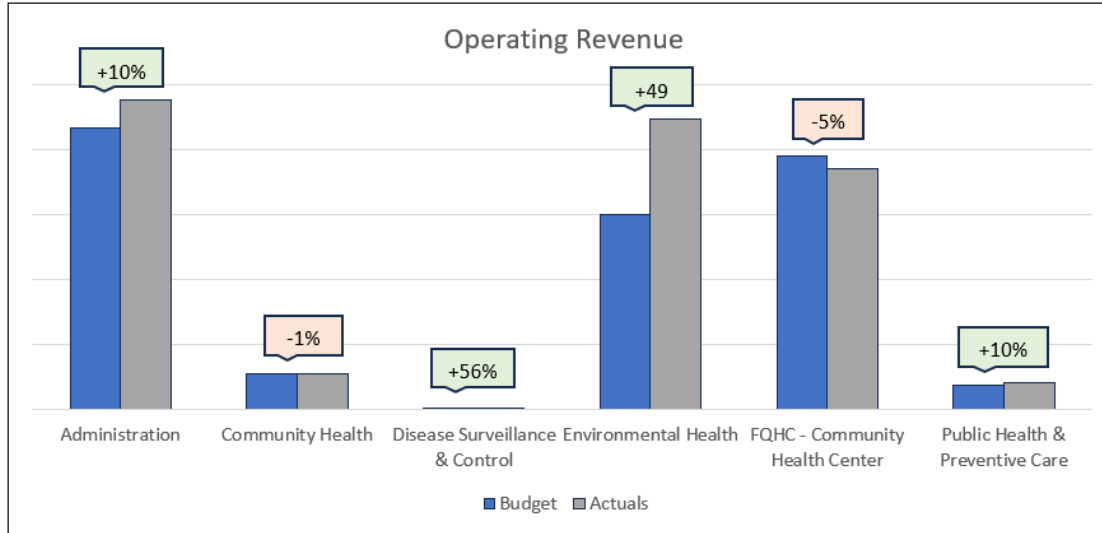
Expenses

- Salary, Tax, and Benefits is \$53.16M compared to a budget of \$55.75M, a favorable variance of \$2.59M.
- Other Operating Expense is \$30.22M compared to a budget of \$38.24M, a favorable variance of \$8.02M.
- Total Expense is \$83.38M compared to a budget of \$93.99M, a favorable variance of \$10.61M.

Net Position: is \$8.07M compared to a budget of (\$2.26M), a favorable variance of \$10.33M. (See Notes for Revenues and Expenses).

REVENUES

(as of December 31, 2025 – Unaudited)



Division	Budget as of Dec 2025	Actual as of Dec 2025	Variance Favorable (Unfavorable)	% +/-
Operating Revenue (Charges, Fees, Taxes, etc.)				
Administration	\$ 21,698,988	\$ 23,825,548	\$ 2,126,560	10%
Community Health	2,741,364	2,705,036	(36,328)	-1%
Disease Surveillance & Control	15,000	23,450	8,450	56%
Environmental Health	14,959,761	22,311,298	7,351,537	49%
FQHC - Community Health Center	19,532,376	18,485,387	(1,046,989)	-5%
Public Health & Preventive Care	1,839,675	2,021,594	181,919	10%
SUBTOTAL	\$ 60,787,163	\$ 69,372,313	\$ 8,585,150	14%
Special Revenue (Grants)				
Administration	\$ 7,219,887	\$ 2,248,332	\$ (4,971,556)	-69%
Community Health	7,565,193	5,140,084	(2,425,109)	-32%
Disease Surveillance & Control	9,026,280	9,140,381	114,101	1%
Environmental Health	693,124	878,567	185,443	27%
FQHC - Community Health Center	3,817,516	2,583,302	(1,234,214)	-32%
Public Health & Preventive Care	2,618,784	2,086,811	(531,973)	-20%
SUBTOTAL	\$ 30,940,783	\$ 22,077,476	\$ (8,863,307)	-29%
TOTAL REVENUE	\$ 91,727,946	\$ 91,449,789	\$ (278,157)	0%

NOTES:

- 1) DUE TO TIMING. ANNUAL FOOD PERMIT REVENUES BILLED ON JULY 1ST (~70% OF ANNUAL REVENUE FOR ENVIRONMENTAL HEALTH). OTHER MAJOR REVENUE BILLING WILL BE RECORDED IN JANUARY 2026.
- 2) MAJOR GRANT SPENDING FOR LAB EXPANSION TO OCCUR Q4 FY2026.
- 3) TERMINATED GRANT EXPENSES INCLUDED IN ADOPTED BUDGET WILL BE ADJUSTED IN AUGMENTATION.
- 4) FY26 ADOPTED BUDGET INCLUDED UNFILLED 100% GRANT FUNDED POSITIONS. THESE WERE REMOVED DURING AUGMENTATION.

*GENERAL FUND AND SPECIAL REVENUE FUNDS ONLY

Revenues by Category

(as of December 31, 2025 – Unaudited)

REVENUE BY CATEGORY	Administration	Community Health	Disease Surveillance & Control	Environmental Health	FQHC	Public Health & Preventive Care	TOTALS BY CATEGORY
<i>Licenses & Permits</i>	\$ -	\$ 128,985	\$ -	\$ 22,125,548	\$ -	\$ -	\$ 22,254,533
<i>Property Taxes</i>	20,754,210	-	-	-	-	-	20,754,210
<i>Charges for Services</i>	1,478,180	2,576,051	20,000	-	16,988,805	1,368,958	22,431,993
<i>Intergovernmental</i>	2,248,332	5,140,084	9,140,381	878,567	2,583,302	2,086,811	22,077,476
<i>Investment Earnings</i>	1,442,813	-	-	-	-	-	1,442,813
<i>Other</i>	150,346	-	3,450	185,750	1,496,582	652,626	2,488,755
<i>Contributions</i>	-	-	-	-	-	10	10
TOTALS BY DEPT	\$ 26,073,880	\$ 7,845,120	\$ 9,163,831	\$ 23,189,865	\$ 21,068,689	\$ 4,108,405	\$ 91,449,789

*GENERAL FUND AND SPECIAL REVENUE FUNDS ONLY

Revenue Categorization

General Fund

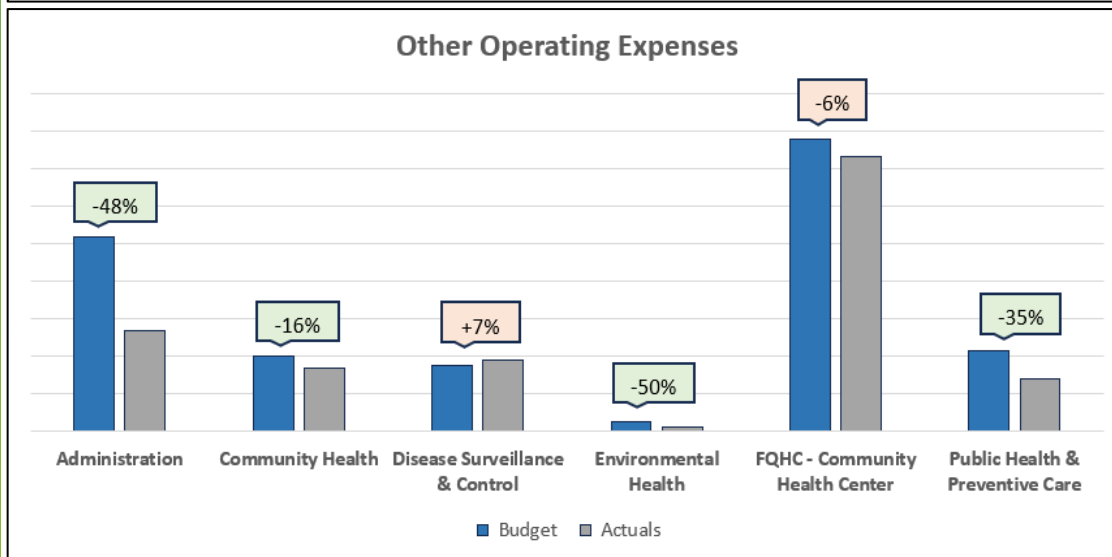
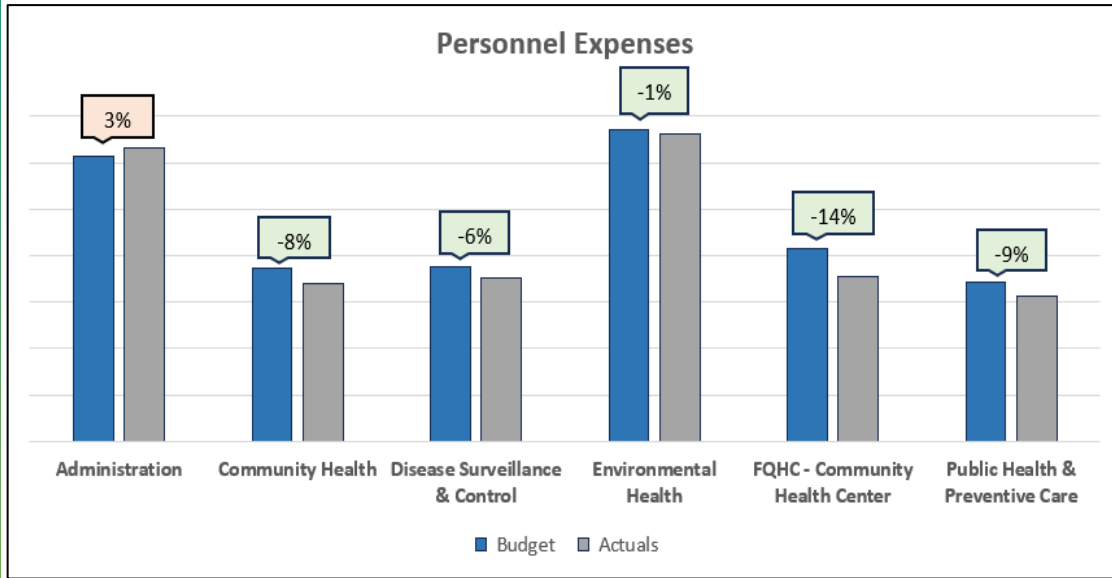
- *Property tax* – includes revenue from Clark County for property tax received.
- *Licenses/Permits* – includes revenue from Annual Fees, Plan Reviews, other regulatory fees.
- *Charges for Services* – includes revenue from Insurance billing, Medicaid, Birth & Death Certificates, etc.
- *Other Revenue* – includes revenues from Admin Fees, Investment Interest, Misc. Income, etc.

Special Revenue Fund

- *Federal Revenue* – includes direct federal grant revenue from U.S. Dept. of Health and Human Services, U.S. Dept. of Agriculture, and U.S. Dept. of Homeland Security
- *Pass-Thru Revenue* – includes revenue passed thru from NV Dept. of Health and Human Services, UNLV, and Clark County
- *State-Revenue* – includes state revenue for FQHC-related grants
- *Other Revenue* – includes revenue from Clark County grants

EXPENSES

(as of December 31, 2025 – Unaudited)



Division	Budget as of Dec 2025	Actual as of Dec 2025	Variance Favorable (Unfavorable)	% +/-
Employment (Salaries, Taxes & Benefits)				
Administration	\$ 12,255,065	\$ 12,663,061	\$ (407,996)	3%
Community Health	7,430,769	6,818,110	612,659	-8%
Disease Surveillance & Control	7,493,770	7,021,798	471,972	-6%
Environmental Health	13,408,100	13,270,224	137,876	-1%
FQHC - Community Health Center	8,297,310	7,124,394	1,172,916	-14%
Public Health & Preventive Care	6,860,589	6,267,006	593,583	-9%
SUBTOTAL	\$ 55,745,603	\$ 53,164,593	\$ 2,581,010	-5%
Other (Supplies, Contractual, Capital)				
Administration	\$ 10,351,745	\$ 5,391,582	\$ 4,960,162	-48%
Community Health	4,025,663	3,380,860	644,802	-16%
Disease Surveillance & Control	3,517,830	3,765,194	(247,364)	7%
Environmental Health	520,533	262,655	257,879	-50%
FQHC - Community Health Center	15,535,845	14,650,343	885,502	-6%
Public Health & Preventive Care	4,288,101	2,768,944	1,519,157	-35%
SUBTOTAL	\$ 38,239,717	\$ 30,219,579	\$ 8,020,138	-21%
Total Operating Expenses	\$ 93,985,320	\$ 83,384,172	\$ 10,601,148	-11%
Indirect Costs/Cost Allocations	\$ 0	\$ 325	\$ (325)	0%
Transfers IN	(4,389,825)	(2,268,849)	(2,120,975)	-48%
Transfers OUT	4,389,825	2,268,849	2,120,975	-48%
Total Transfers & Allocations	\$ 0	\$ 325	\$ (325)	0%
TOTAL EXPENSES	\$ 93,985,320	\$ 83,384,497	\$ 10,600,823	-11%

NOTES:

- 1) MAJORITY OF LAB EXPANSION CAPITAL EXPENSES ANTICIPATED TO OCCUR IN Q4 FY26.
- 2) VACCINE EXPENSES WERE LOWER THAN ANTICIPATED FOR THE ELAPSED PERIOD AND WILL BE REVIEWED DURING THE AUGMENTATION
- 3) DOES NOT INCLUDE TRANSFERS OUT OF \$3M TO CAPITAL PROJECTS FUND

*GENERAL FUND AND SPECIAL REVENUE FUNDS ONLY

Expenses by Category

(as of December 31, 2025 – Unaudited)

EXPENSE BY CATEGORY	Administration	Community Health	Disease Surveillance & Control	Environmental Health	FQHC	Public Health & Preventive Care	TOTALS BY CATEGORY
<i>Salaries</i>	\$ 8,475,062	\$ 4,586,286	\$ 4,715,000	\$ 8,974,462	\$ 4,797,545	\$ 4,234,590	\$ 35,782,945
<i>Taxes & Benefits</i>	4,187,352	2,231,824	2,307,445	4,295,762	2,326,849	2,032,416	17,381,649
<i>Contractual</i>	4,203,908	1,567,732	1,481,837	91,570	671,690	236,286	8,253,024
<i>Indirect/Cost Allocation</i>	(15,530,075)	2,324,683	2,542,756	3,210,561	5,307,939	2,144,460	325
<i>Supplies</i>	238,554	1,715,915	2,215,474	56,164	13,951,107	2,482,082	20,659,295
<i>Property</i>	917,120	59,823	-	-	-	-	976,943
<i>Travel & Training</i>	32,001	37,390	67,883	114,920	27,546	50,576	330,317
TOTALS BY DEPT	\$ 2,523,921	\$ 12,523,654	\$ 13,330,395	\$ 16,743,440	\$ 27,082,677	\$ 11,180,411	\$ 83,384,497

*GENERAL FUND AND SPECIAL REVENUE FUNDS ONLY

Expense Categorization

Expenses (All Funds)

- *Salaries* – includes expenses associated with employee compensation such as salaries, overtime, longevity, etc.
- *Taxes & Fringe Benefits* – includes expenses associated with the employer-paid portion of FICA/Medicare, Health Insurance, Life Insurance, 100% employer-paid retirement (NVPERS), etc.
- *Capital Outlay* – includes expenses associated with capital purchases such as equipment, computer software/hardware, furniture, etc.
- *Contractual* – includes expenses associated with contractual agreements such as professional services, subscriptions, computer software, maintenance, etc.
- *Supplies* – includes expenses associated with Medical Supplies, Vaccines, Lab Supplies, office supplies, etc.
- *Indirect Costs/Cost Allocations* – SNHD Overhead rate is 25.25%. Indirect costs associated with special revenue funds are recovered generally at the allowed 15% de minimis rate. Cost Allocations make up the remaining 10.25%. NOTE: The de minimis rate for federal grants increased from 10% to 15% effective October 1, 2024.
- *Transfers In* – funds transferred into special revenue fund from the general fund.
- *Transfers Out* – funds transferred out of the general fund into other funds.

Other Governmental Funds

(as of December 31, 2025 – Unaudited)

Other Governmental Funds	Budget as of Dec 2025	Actual as of Dec 2025	Variance Favorable (Unfavorable)	% +/-
Revenue				
Capital Projects	\$ 54,780	\$ 99,510	\$ 44,731	82%
Bond Reserve	48,310	53,840	5,530	11%
Total Revenue	\$ 103,090	\$ 153,351	\$ 50,261	49%
Transfers In	3,000,000	3,000,000	-	100%
Total Revenue & Transfers In	3,103,089.68	3,153,350.54	50,260.86	2%
Expenses				
Capital Projects				
Facilities	\$ 755,000	\$ 30,760	\$ (724,240)	-96%
Information Technology	650,500	255,570	(394,930)	-61%
Total Expenses	\$ 1,405,500	\$ 286,330	\$ (1,119,170)	-80%
Revenue Less Expenses	\$ 1,697,590	\$ 2,867,021	\$ 1,169,431	69%

Summary of Assets, Liabilities, and Fund Balance

Southern Nevada Health District
 Summary of Assets, Liabilities, and Fund Balance
 12/31/2025 (Unaudited)

	General Fund	Special Revenue Fund	Other Governmental Funds	Total Governmental Funds
Assets				
Total assets	73,977,295	18,934,445	10,495,940	103,407,687
Liabilities				
Total liabilities	3,773,439	18,812,992	842,636	23,429,075
Fund Balances				
Nonspendable	4,886,763	2,028	-	4,888,791
Restricted	-	766,129	-	766,129
Committed	1,000,000	-	-	1,000,000
Assigned	9,719,910	-	9,653,304	19,373,214
Unassigned	54,597,184	(646,703)	-	53,950,481
Total fund balances *	70,203,857	121,453	9,653,304	79,978,614

* Reconciling items as of 06/30/25 for reductions in net position for government activity of \$(107,379,182) for pension liability, compensated absences liability, leases and subscription assets and post-employment benefits liability are not included in this total which would result in a \$(27,400,568) total balance.



QUESTIONS?