

MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

March 18, 2025 – 2:30 p.m.

Meeting was conducted In-person and via Microsoft Teams

Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107

Red Rock Trail Rooms A and B

MEMBERS PRESENT:

Donna Feliz-Barrows, Chair
Jasmine Coca, First Vice Chair
Sara Hunt, Second Vice Chair
Erin Breen
Ashley Brown
Luz Castro
Marie Dukes

ABSENT:

Scott Black
Brian Knudsen
Blanca Macias-Villa
Jose L. Melendrez

ALSO PRESENT

Steve Messinger, Policy Director, Nevada Primary Care Association

LEGAL COUNSEL:

Edward Wyner, Associate General Counsel

CHIEF EXECUTIVE OFFICER:

Randy Smith

STAFF:

Emily Anelli, Tawana Bellamy, Todd Bleak, Robin Carter, Andria Cordovez Mulet, Xavier Gonzales, Jacques Graham, Sabine Kamm, Ryan Kelsch, Tabitha Johnson, David Kahananui, Cassius Lockett, Cassondra Major, Bernadette Meily, Kimberly Monahan, Luann Province, Emma Rodriguez, Kim Saner, Felicia Sgovio, Justin Tully, Donnie (DJ) Whitaker, Merylyn Yegon

I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada Community Health Center (SNCHC) Governing Board Meeting to order at 2:30 p.m. Tawana Bellamy, Senior Administrative Specialist, administered the roll call and confirmed a quorum. Ms. Bellamy provided clear and complete instructions for members of the general public to call in to the meeting to provide public comment, including a telephone number and access code.

II. PLEDGE OF ALLEGIANCE

III. RECOGNITION

1. Southern Nevada Health District – March Employee of the Month

- Sarah Humphreys

Chair Feliz-Barrows recognized Sarah Humphreys, a Community Health Worker, for receiving the Southern Nevada Health District's March Employee of the Month. Ms. Humphreys was nominated by a Southern Nevada Health District employee outside of the health center. Ms. Bellamy read an excerpt of the nomination into the record. On behalf of the SNCHC Governing Board, the Chair congratulated Ms. Humphreys.

- IV. FIRST PUBLIC COMMENT:** A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to five (5) minutes per speaker. Please clearly state your name and address and spell your last name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

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

- V. ADOPTION OF THE MARCH 18, 2025, MEETING AGENDA** *(for possible action)*

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

A motion was made by Member Coca, seconded by Member Castro, and carried unanimously to approve the March 18, 2025, meeting agenda, as presented.

- VI. CONSENT AGENDA:** Items for action to be considered by the Southern Nevada Community Health Center Governing Board which may be enacted by one motion. Any item may be discussed separately per Board Member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.

- 1. APPROVE MINUTES – SNCHC GOVERNING BOARD MEETING:** February 18, 2025 *(for possible action)*
- 2. Approve CHCA-033 Sexual and Reproductive Health Confidentiality Policy;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
- 3. Approve CHCA-034 Sexual and Reproductive Health Non-Discrimination in the Provision of Services Policy;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
- 4. Approve Update to CHCA-011 Claims Management Policy;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
- 5. Approve Re-credentialing and Renewal of Privileges for Provider;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
 - Chris Mariano, MSN, APRN, CPNP-PC

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

VII. REPORT / DISCUSSION / ACTION

Recommendations from the March 17, 2025 Finance and Audit Committee Meeting

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

Donnie Whitaker, Chief Financial Officer, presented January 2025 Year to date Financial Report, unaudited results as of January 31, 2025.

Revenue

- General Fund revenue (Charges for Services & Other) was \$19.88M compared to a budget of \$19.22M, a favorable variance of \$660K.
- Special Revenue Funds (Grants) were \$3.95M compared to a budget of \$4.75M, an unfavorable variance of \$800K.
- Total Revenue was \$23.84M compared to a budget of \$23.97M, an unfavorable variance of \$130K.

Expenses

- Salary, Tax, and Benefits were \$8.04M compared to a budget of \$8.25M, a favorable variance of \$210K.
- Other Operating Expense was \$15.87M compared to a budget of \$16.30M, a favorable variance of \$430K.
- Indirect Cost/Cost Allocation was \$4.61M compared to a budget of \$4.95M, a favorable variance of \$340K.
- Total Expense was \$28.52M compared to a budget of \$29.48M, a favorable variance of \$960K.

Net Position: was negative \$4.68M compared to a negative budget of \$5.51M, a favorable variance of \$830k.

Ms. Whitaker further reviewed the budget to actuals for the following:

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

Ms. Whitaker further reviewed the patient encounters by department and by clinic. Ms. Whitaker also provided a monthly year to date overview of the revenue and expenses.

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

A motion was made by Member Coca, seconded by Member Breen, and carried unanimously to Accept the January 2025 Year to Date Financial Report, as presented.

SNCHC Governing Board

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

David Kahananui, FQHC Administrative Manager, presented the Fourth Quarter Risk Assessment. Mr. Kahananui advised that as a deemed FTCA organization, the health center is required to conduct one risk assessment per quarter and present the results to the board. Mr. Kahananui advised that in 2024, the Risk Assessment and Mitigation Tool: Obstetric Services was conducted in quarter four. Mr. Kahananui further shared the risk assessment template was provided by ECRI, which is the risk management consulting firm for HRSA. Mr. Kahananui shared the tool looks at many areas related to the operations, administration, and management of our risk for obstetric services.

Mr. Kahananui provided a summary of the findings and shared the action plan, which includes the following three goals:

- Goal 1: Create an Obstetric Services Policy that addresses all components required to resolve the deficiencies identified in the HRSA Risk Assessment and Mitigation Tool: Obstetrics Services.
- Goal 2: Appoint a person to oversee the quality, claims and clinical elements of obstetrics care.
- Goal 3: The Medical Director and Risk Management Committee will create a more definitive plan to identify and reduce obstetric risk.

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

A motion was made by Member Castro, seconded by Member Hunt, and carried unanimously to approve the Fourth Quarter Risk Assessment y, as presented.

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

Mr. Kahananui presented the Fourth Quarter Risk Management Report. Mr. Kahananui reviewed the five CY24 Goals, activities, and performance measure results.

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

A motion was made by Member Breen, seconded by Member Hunt, and carried unanimously to approve the Fourth Quarter Risk Management Report, as presented.

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

Chair Feliz-Barrows called for board reports. There were none.

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

- CEO Comments

Mr. Smith advised that he needs help with recruiting a new board member. Mr. Smith shared that new board member needs to be a male, non-Hispanic Mr. Smith asked for the board's assistances with identifying candidates.

Mr. Smith provided the following updates:

Administrative:

- The dental clinic at Fremont is on an indefinite hold.
- The HRSA Operational Site Visit (OSV) has been tentatively rescheduled to 4/8/25 – 4/10/25.
- The HRSA CY24 UDS annual report requested revisions were submitted on 3/6/25.
- The HRSA onsite Behavioral Health Technical Assistance engagement is scheduled for 3/25/25.
- The HRSA CY26 FTCA redeeming process is underway. The application is due in June 2025.
- The Family Planning Title X CY24 FPAR 2.0 report was successfully submitted on 2/24/25.
- The Family Planning Title X site visit is scheduled for September 2025.

Operations:

- New Appointment Templates – effective April 1st @Decatur & April 7th @Fremont
- Addressing our high number of No-Shows – 58% in February
 - Add more appointment slots
 - Strategic Books
 - Integration Visits – patients receiving more than one service per day
 - Same Day Appointments and Walk-ins
- Changes to Lunches – effective April 1st @Decatur & April 7th @Fremont
 - Increased access to mid-day appointments
 - Smoother operations
- Front Office paperless workflow transition work underway.

Medicaid Growth:

- Welcome Letter and New Patient Packet
 - Most members are assigned by their health plan
- Welcome Call – Creating a welcoming experience
 - Proactive outreach
 - Answer questions
 - Set up appointments
- Health Plan Provider Relations
 - Member Rosters – obtaining new members
 - Data tracking: successful appt, provider, empanelment, etc.
- Quality – HEDIS performance metrics
- Patient Satisfaction – retaining patients

Further to an inquiry from Chair Feliz-Barrows, Mr. Smith shared that for patients who may be afraid of coming to the health center, training and support has been provided to staff on how to best support and use telehealth services as much as possible. Mr. Smith further shared that the no show rate goes beyond what is happening with Medicaid or threats of immigration concerns.

Member Coca shared that she would like to share some ideas with Mr. Smith. Member Coca commenter that she believes there are resources in the community that can help the health center.

Member Coca inquired if the health center has any handouts or referrals from the State of Nevada Welfare. Mr. Smith advised that we could contact them. Mr. Smith further advised we do have resources on site as well.

Mr. Smith advised that if board members know of any potential partners in the community, let him know and he would be happy to speak with them.

Further to an inquiry from Member Hunt, Mr. Smith shared the operational changes that are being implemented in the beginning of April will need four to six weeks of data collection to let us know if we are successful. An update to the Board will be provided in June.

- Legislative Update

Steve Messinger, Policy Director, Nevada Primary Care Association (NVPCA), and Emma Rodriguez, Communications & Legislative Affairs Administrator, provided an update on the current legislative session.

Mr. Messinger provided a brief introduction about the Primary Care Association.

Mr. Messinger further outlined some federal issues and provided an update on some executive orders.

- Two sources of funds for the federal health center program
 - Discretionary funding makes up about 30% and must be appropriated every year
 - Mandatory funding makes the other 70% and is typically for several years
 - Both extended this past Friday through September 2025
- 340B
 - 340B is a discount drug program that provides an estimated 16% more revenue than the federal health center grant.
 - Health centers are supposed to be able to purchase drugs at low cost and be reimbursed at normal cost
 - Insurers and pharmacy benefit managers are trying to capture this revenue, i.e., by paying a lower reimbursement
 - Manufacturers are putting up barriers to prevent their profits from going to other parties
 - Courts have determined that HRSA has no enforcement power
 - Needs Congressional action, but not expected in this Congress
- Federal Issues—Medicaid

Mr. Messinger shared that at the state level in 2023, the total health center revenue amongst FQHCs in Nevada was \$222M. Mr. Messinger further shared 25% or \$56.2M was Medicaid, 18% was Private Insurance, 11% was Medicare, 2% was Other Public, and 2% was Self Pay. Mr. Messinger further provided an overview of the total revenue per patient by payor in 2023 for Medicaid, Medicare, Private Insurance and the Uninsured. Mr. Messinger shared that if we take people off Medicaid and convert them to uninsured, health center's will only get 10% of the revenue they are currently collecting and that is a concern.

Mr. Messinger provided an overview of some Executive Orders:

- DEI, Gender Affirming Care, Climate Resilience, Undocumented immigrants
- All the immediate legal implications of these orders are paused; however, grantees are advised to get these activities out of their workplans

- Expect the possibility of having to comply with these orders as a condition of the health center's federal grant
 - Some interpretations indicate that using "program income" from payers could still be unallowable as part of the grant project

Mr. Messinger further outlined things happening in the Nevada Legislature:

- NVPCA supporting a bill to require manufacturers to continue distributing 340B drugs to contract pharmacies
 - Bill Draft Request (BDR) approved by Interim Commerce and Labor in August meeting
 - NVPCA is working with members, allies, and legislators to be ready when the bill is drafted
 - Our 340B bill did not come out until March 27, 2023
- Primary Care Provider Training Program
 - Seeking to establish a grant to facilitate Graduate Medical Education accreditation in community health centers
 - Follows Arizona model which gets a federal match through Medicaid
 - SB40 Creates the Medicaid Health Care Workforce Account which will allow for appropriations to be matched
 - SB262 Moves GME administration from the Office of Science and Innovation to DHHS

Ms. Rodriguez outlined the six bills that had hearings or have hearing coming up:

- AB315 - Requires applications to participate in Medicaid as a provider to be notarized. (Medicaid)
- AB269 - Revises provisions relating to education. (Health Care Workforce)
- AB186 - Revises provisions governing pharmacists. (Pharmacy)
- SB188 - Establishes procedures to assist certain persons with limited English proficiency in accessing health care in certain circumstances. (Language Access)
- SB250 - Revises provisions relating to health care records. (Electronic Health Records)

Further to an inquiry from Member Hunt, on a bill that requires insurance agencies to turn around claims in a certain amount of time – claims they rejected that was a challenge. Mr. Messinger advised that it is bill AB52 – Revises provisions relating to the payment of claims under policies of health insurance. (BDR 57-367). Mr. Messinger further advised a hearing was held on March 5, 2025. Mr. Messinger shared that NVPCA did not take a position on that bill, and he does not hear about payment delays being a big issue with primary care.

Mr. Smith shared that the revenue cycle manager and staff are always working on billing our accounts receivable and denials to ensure the health center is collecting everything it is contractually entitled to. Mr. Smith further shared that anything Mr. Messinger can do to help would be appreciated. Mr. Messinger advised that he would add it to his priority list.

Member Breen thanked Mr. Messinger for the clarification of what is happening with funding.

Chair Feliz-Barrows also thanked Mr. Messinger for the information.

Further to an inquiry from Member Coca about what federal assistances can the health center get from the legislature. Mr. Messinger shared health centers get FQHC Incubator funds, which is \$1.4M over the biennium or \$700K/per year and is split between all health centers.

Chair Feliz-Barrows thanked Ms. Rodriguez and Mr. Messinger for the update.

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

X. INFORMATIONAL ITEMS

- Community Health Center (FQHC) February 2025 Monthly Report

XI. SECOND PUBLIC COMMENT: A period devoted to comments by the general public, if any, and discussion of those comments, about matters relevant to the Board's jurisdiction will be held. Comments will be limited to five (5) minutes per speaker. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

Seeing no one, the Chair closed the Second Public Comment period.

XII. ADJOURNMENT

The Chair adjourned the meeting at 3:57 p.m.

Randy Smith
Chief Executive Officer - FQHC

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