



**SOUTHERN NEVADA**  
*Community*  
**HEALTH CENTER**

# SNCHC FY25 Accomplishments

**Randy Smith**  
**Chief Executive Officer**  
**Southern Nevada Community Health Center**  
**September 16, 2025**

# SNCHC FY25 Accomplishments

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1. As of June 30, 2025, 14,729 unduplicated patients served.
  - 22% year-over-year increase
2. As of June 30, 2025, 48,372 unique encounters conducted.
  - 36% year-over-year increase
    - Licensed Independent Provider (medical & behavioral health) visits: 32,184
    - Nurse visits: 10,588
    - Lab visits: 5,600
3. As of June 30, 2025, 17,800 unique patients served in the pharmacy.
  - 11% year-over-year increase
4. As of June 30, 2025, 30,342 prescriptions were filled.
  - 29% year-over-year increase

# SNCHC FY25 Accomplishments

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1. Recruited and onboarded three new board members.
2. Hosted an inaugural board retreat.
3. Hired and onboarded a new Medical Director.
4. Hired and onboarded a new Advanced Practice Registered Nurse.
5. Hired and onboarded a new Quality Management Coordinator.
6. Ongoing participation of the FQHC CEO on the Nevada Primary Care Association Board of Directors.
  - Member of the Finance and Policy Committees
7. Ongoing participation in a Health Center Controlled Network.
8. Successfully received Federal Tort Claims Act (FTCA) redeeming.
9. Successfully completed the Health Resources and Services Administration Operational Site Visit audit with no findings.

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10. Successfully completed Ryan White part A and B program audits with no findings.
11. Successfully completed Vaccines for Children audits at Decatur and Fremont with no findings.
12. Successfully completed Nevada Family Planning program audit with no findings.
13. Successfully completed a CLIA Laboratory audit.
14. Created and implement a new health center wide three-year strategic plan.
15. Revised the health center's mission and vision statements.
16. Formally added substance use disorder, psychiatry, infectious disease, and nutrition services to the health center's scope of work.
17. Opened a new Behavioral Health clinic at Decatur.
18. New intern opportunities provided in behavioral health and administration.

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19. Employee fundraising program established by the Employee Engagement Committee.
20. Significant year-over-year employee engagement improvement realized through the Organization Vital Survey.
21. Seven health center staff members recognized as SNHD Employees of the Month.
22. Inaugural SNHD Employee of the Year awarded to a health center staff member.
23. Revised the health center wide annual training program and tracking process.
24. Updated credentialing and privileging requirements and processes for clinical staff.
25. Revised quarterly risk assessment reporting processes and documentation.
26. Restructured leadership meetings and implemented new standard KPIs.
27. Established a plan and commenced work for achieving Patient Centered Medical Home accreditation.

# SNCHC FY25 Accomplishments

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- 28. Optimized sexual health access through the closure of an under performing site.
- 29. Increased utilization of refugee health services.
- 30. Expanded access to care through the implementation of stagger lunches and midday patient appointments.
- 31. Increased access to care through the standardization appointment templates.
- 32. Implemented cross training of providers in multi specialties.
- 33. Implemented new workflows to mitigated revenue loss resulting from changes to the Gilead assistance program.
- 34. Multiple quality improvement projects completed (BH, FP, & RW).
- 35. Purchased and commenced training on the eCW CCM module.

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- 36. New clinical care gaps workflows established.
- 37. Redesigned clinical space at the Decatur and Fremont health centers.
- 38. Created and implemented patient education videos.
- 39. Completed provider specific coding training.
- 40. Implemented a new Provider Peer Review process.
- 41. Launched a new behavioral health led Ryan White support group.
- 42. New integrated behavioral health workflows created and implemented.
- 43. Started a pharmacist led PREP service at Fremont.
- 44. Completed HRSA technical assistance training for primary care behavioral health integration.
- 45. Year-over-year improvement in seven clinical performance measures.

# SNCHC FY25 Accomplishments

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- 46. Implemented minor office procedures.
- 47. Enhanced linkage to care for Hep-C patients.
- 48. Cultivated relationships with other SNHD divisions for referrals and coordination of care for mutual patients.
- 49. Designed and implemented a new PREP clinic workflows.
- 50. Implemented new workflows and tracking for in reach and outreach activities.
- 51. Created and implemented a new patient welcome packet.
- 52. New Same Day Clinics established.
- 53. New electronic patient registrations workflows established.



# SNCHC FY25 Accomplishments

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- 54. Created a new Medicaid Dashboard.
- 55. Refined the revenue calculation model for improved budgeting.
- 56. Increased the number of empaneled Medicaid patients by 140% (898 to 2,159).
- 57. Established new relationships and meeting cadences with payer provider relations departments.
- 58. Lowered lab expenses by negotiating better rates with Quest Diagnostic.
- 59. Finalized the Prospective Payment System rates for medical and behavioral health services.
- 60. Received \$1.9 million in retroactive Medicaid reimbursement.
- 61. Awarded a new grant budget period for the Health Center program.

# SNCHC FY25 Accomplishments

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62. Improved financial stability by increasing revenue and reducing expenditures, resulting in exceeding financial performance compared to the original FY25 budget.

- Total revenue for FY25 was \$46.5 million, representing a 30% year-over-year increase.
- Improved net position by 160% versus the original FY25 budget.

63. Implemented a new Sliding Fee Discount schedule.

- Total sliding fee adjustments for 2024 equal \$4.9 million, an increase of 41% year-over-year.

# Outcome of FY25 Goals



Pursue Patient Centered Medical Home (PCMH) accreditation



Increase the number of unique patients serviced by 3%



Improve daily access to care (visits) by 3%



Optimize and expand services at the Fremont location – SHC/RW/RH



Improve financial stability – Increase the number of Medicaid patients served by 5%



Enhance integrated Behavioral Health services and optimize new clinic at Decatur



Build a dental clinic at Fremont and develop an operational plan



Maintain HRSA Compliance

# Thank you!

# Questions?

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Randy Smith  
Chief Executive Officer