



MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

March 30, 2022 – 2:00 p.m.

Meeting was conducted via Webex Event

MEMBERS PRESENT: Brian Knudsen – Chair, Consumer Member
Jose L. Melendrez – First Vice-Chair, Consumer Member
Scott Black – Community Member, City of North Las Vegas
Erin Breen – Community Member, UNLV Vulnerable Road Users Project
Scott Garrett – Consumer Member (*Call-in User 4*)
Father Rafael Pereira – Community Member, All Saints Episcopal Church
Aquilla Todd – Consumer Member (*Call-in User 3*)

ABSENT: Timothy Burch – Second Vice-Chair, Community Member, Clark County
Gary Costa – Community Member, Golden Rainbow
Lucille Scott – Consumer Member
Duprice Scruggs – Consumer Member

ALSO PRESENT: None
(In Audience)

LEGAL COUNSEL: Heather Anderson-Fintak, General Counsel

EXECUTIVE SECRETARY: Fermin Leguen, MD, MPH, District Health Officer

STAFF: Andria Cordovez Mulet, Jennifer Fennema, Rich Hazeltine, David Kahananui, Theresa Ladd, Cassius Lockett, Randy Smith, Karen White, Edward Wynder

I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada Community Health Center Governing Board Meeting to order at 2:01 p.m. Andria Cordovez Mulet, Executive Assistant, administered the roll call and confirmed a quorum.

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 the First Public Comment portion.

INTRODUCTION

The Chair recognized Randy Smith as the new FQHC Operations Officer. Mr. Smith provided the Governing Board with a brief background on his experience with Federally Qualified Health Centers (FQHCs).

Member Melendrez joined the meeting at 2:03 p.m.

IV. ADOPTION OF THE MARCH 30, 2022 MEETING AGENDA (for possible action)

A motion was made by Member Garrett, seconded by Member Breen and carried unanimously to approve the March 30, 2022 Agenda, as presented.

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/COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING:
February 24, 2022 and March 24, 2022 (for possible action)

A motion was made by First Vice-Chair Melendrez, seconded by Member Garrett and carried unanimously to approve the March 30, 2022 Consent Agenda, as presented.

VI. REPORT / DISCUSSION / ACTION

1. Receive and Approve Recommendations from the March 22, 2022 Finance & Audit Committee meeting regarding the Southern Nevada Community Health Center FY23 Budget: direct staff accordingly or take other action as deemed necessary (for possible action)

Karen White, Chief Financial Officer, provided an overview of the FY23 Budget, with the following highlights:

- Budget increased by 9.95% to \$21,670,487 in combined General Fund and Grant Revenue
- Expenditures increased by 11.20% to \$26,557,444
- Grant Funding increased by 22%
- Net decrease of (3) FTE's

Specifically, Ms. White advised that the General Fund Revenue increased by 4.27% and the Special Revenue Fund (Grant Revenue) increased by 22.07%, and the General Fund Expenditures increased by 7.32% and the Special Revenue Fund (Grant Revenue) increased by 22.07%.

Father Rafael commended staff on the budget and forecast process, along with the internal controls and reporting.

A motion was made by Father Rafael, seconded by Chair Knudsen, and carried unanimously to accept the recommendation from the Finance & Audit Committee and approve the FY23 Budget, as presented.

2. Receive and Approve Recommendations from the March 22, 2022 Finance & Audit Committee meeting regarding the Billing Fee Schedule Updates: direct staff accordingly or take other action as deemed necessary (for possible action)

Ms. White provided the Clinical Billing Fee Schedule Update and advised that, as there was a more comprehensive review done last year, this year there were only a few fees that needed to be updated, which are mostly new codes or fees that have not been used in the past. Ms. White outlined the updated fees for primary care services and medications and confirmed that patients on the sliding fee scale pay between \$7 and \$22 for medications. Ms. White further outlined two new vaccines that the Community Health Center will start to offer.

Father Rafael inquired whether there was any improvement in billing and collection, now that the billing is in-house. Ms. White advised that it was too early to see improvements.

Chair Knudsen provided a summary of recent discussion at the Southern Nevada District Board of Health regarding the cost of medication. Chair Knudsen advised that a recommendation was made that the Health District physicians, as applicable and as appropriate with their medical training and knowledge, prescribe the generic medication, unless there was something contraindicative, before the name brand medication.

A motion was made by Chair Knudsen, seconded by Father Rafael, and carried unanimously to accept the recommendation from the Finance & Audit Committee and approve the Clinical Billing Fee Schedule Updates.

3. Receive and Approve Recommendations from the March 22, 2022 Finance & Audit Committee meeting regarding the February Financial Report; direct staff accordingly or take other action as deemed necessary (for possible action)

Ms. White provided the February Financial Report and advised that the YTD Actuals to the YTD Budget for Revenues was at 18% and the YTD Actuals to the YTD Budget for Expenses was at - 91%.

Chair Knudsen inquired as to the impact of not spending grant funds within the timeframe. Ms. White advised that if funds are unspent, a no-cost extension is submitted to provide additional time to spending the funds.

Ms. White advised that a comparison was completed on the zip codes from the HRSA Form 5B and the zip codes of the patients of the Community Health Center. Ms. White outlined that the two locations (Main and Bonanza) with assigned service areas provided service to 81% of the Community Health Center's total patients in 2021 (calendar year). The remaining less than 20% either live outside of the assigned service areas or did not provide the information.

A motion was made by Chair Knudsen, seconded by Member Black, and carried unanimously to accept the recommendation from the Finance & Audit Committee and approve the February Financial Report, as presented.

4. Receive, Discuss and Approve the Application for the Change in Scope for the East Las Vegas location at 2830 Fremont Street, Las Vegas; direct staff accordingly or take other action as deemed necessary (for possible action)

David Kahananui, Senior FQHC Manager, presented an overview of HRSA's application process for a change in scope to add 2830 Fremont Street, Las Vegas as a permanent site with full scope of services. Mr. Kahananui advised that construction should be completed in June. The HRSA application is to be submitted before April 30th and approval should be received in May, to start providing services in June. The hours of operations will mirror the Decatur location. The following services will be provided at the East Las Vegas location: Primary Care, Family Planning, Ryan White, Infectious Disease, Behavioral/Mental Health, VFC and Private Immunizations, PEP & PrEP, 340b Pharmacy, and Dental.

Further to an inquiry from Member Breen as to the Bonanza location, Dr. Leguen advised that it was anticipated that Community Health Center services would be moved from the Bonanza location to the Fremont location. The Bonanza location would continue to offer the immunization program and other clinical programs, that are not related to the Community Health Center. This was due to the logistical challenges of having different programs in one location. The intention of the Fremont location was to be fully dedicated to the Community Health Center, as opposed to a hybrid that currently exists at the Decatur location.

Member Breen inquired as to whether the Community Health Center offers transportation assistance, such as bus passes, to patients for appointments. Mr. Kahananui advised that there were several grants that have funded multiple bus pass options and staff are currently in the

process of an agreement with Lyft/Uber. Mr. Kahananui further advised that the Fremont location will have a bus stop in front of the parking lot of the building.

A motion was made by Chair Knudsen, seconded by First Vice-Chair Melendrez, and carried unanimously to approve the commencement of the Application for the Change in Scope for the East Las Vegas location at 2830 Fremont Street, Las Vegas.

5. Receive, Discuss and Accept February Operational Report; direct staff accordingly or take other action as deemed necessary (*for possible action*)

Mr. Kahananui presented the February Operational Report. Mr. Kahananui advised that the Health Center's New Access Point (NAP) Grant was awarded through October 31, 2020, at which point the Service Area Competition Grant was awarded through January 31, 2024, and the noncompeting continuation was approved. The Health Center conducted 892 visits by HRSA's definition in February 2022, with a no-show rate of 25.97%, which is slightly lower than national Health Center averages. Mr. Kahananui outlined that there was a 63.4% conversation rate of patients referred to eligibility assistance. Mr. Kahananui proceeded with highlighting the results of the Patient Satisfaction Surveys. With respect to COVID-19, Mr. Kahananui outlined that the Health Center continued to administer the vaccine, perform testing and participated in a new anti-viral medication program. Mr. Kahananui continued with an update on funding opportunities, behavioral health, accepted insurance and marketing efforts.

Member Melendrez inquired as to the outreach efforts with the Latino community and suggested that staff reach out to Peter Guzman at the Latin Chambers.

Member Black inquired whether there was an opportunity for the Community Health Center to have an internship program with various colleges and universities for the upcoming behavioral health program. Mr. Kahananui advised that the Health District currently has a residency program and the Community Health Center could be in a position to handle an internship program as well.

A motion was made by Chair Knudsen, seconded by Member Breen, and carried unanimously to accept the February Operational 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**)

Member Melendrez requested a coordinated effort with other different groups on their community efforts. Member Melendrez advised that there were many different community groups that are all working towards the same goal. He further suggested a community calendar to put all community events and activities to ensure attendance. This would allow room for growth and opportunities to reach more people in the community. Dr. Leguen advised that he would request that the Chief Communications Officer start working on this.

VIII. EXECUTIVE DIRECTOR & STAFF REPORTS (Information Only)

- Executive Director Comments

Dr. Leguen recognized Mr. Kahananui's contribution and continued commitment to the Community Health Center. With the addition of Mr. Smith to the Community Health Center, Dr. Leguen advised that it was important to the promotion and growth of the Community Health Center.

Dr. Leguen advised that the Human Resources Department continues to work on the recruitment of additional physicians, which has been difficult. There is a plan to post in the local media and to utilize social media to reach local physicians.

Dr. Leguen concluded that HRSA will stop payments for COVID-19 testing and vaccination. This will need to be monitored very closely and then, based on the demand and the financial situation, a determination will have to be made if there is not a solution from the federal government.

- IX. 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 portion.

XIII. ADJOURNMENT

The Chair adjourned the meeting at 2:57 p.m.

Fermin Leguen, MD, MPH
District Health Officer/Executive Secretary/CHC Executive Director

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MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

February 24 – 2:00 p.m.

Meeting was conducted via Webex Event

MEMBERS PRESENT:

Brian Knudsen – Chair, Consumer Member
Jose L. Melendrez – First Vice-Chair, Consumer Member
Scott Black – Community Member, City of North Las Vegas
Erin Breen – Community Member, UNLV Vulnerable Road Users Project
Gary Costa – Community Member, Golden Rainbow
Scott Garrett – Consumer Member (*Call-in User 4*)
Father Rafael Pereira – Community Member, All Saints Episcopal Church
Aquila Todd – Consumer Member (*Call-in User 2*)

ABSENT:

Timothy Burch – Second Vice-Chair, Community Member, Clark County
Lucille Scott – Consumer Member
Duprice Scruggs – Consumer Member

ALSO PRESENT:

None

(In Audience)

LEGAL COUNSEL:

Heather Anderson-Fintak, General Counsel

EXECUTIVE SECRETARY:

Fermin Leguen, MD, MPH, District Health Officer

STAFF:

Donna Buss, Andria Cordovez Mulet, Michael Johnson, David Kahananui, Theresa Ladd, Cassius Lockett, Gabriela Montaldo, Kyle Parkson, Ronique Tatum-Penegar, Karen White, Edward Wynder

I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada Community Health Center Governing Board Meeting to order at 2:02 p.m. Andria Cordovez Mulet, Executive Assistant, administered the roll call and confirmed a quorum.

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 the First Public Comment portion.

IV. ADOPTION OF THE FEBRUARY 24, 2022 MEETING AGENDA (for possible action)

A motion was made by First Vice-Chair Melendrez, seconded by Member Breen and carried unanimously to approve the February 24, 2022 Agenda, as presented.

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/COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING:** January 27, 2022 *(for possible action)*

A motion was made by First Vice-Chair Melendrez, seconded by Father Rafael and carried unanimously to approve the January 27, 2022 Consent Agenda, as presented.

VI. **REPORT / DISCUSSION / ACTION**

1. **Receive and Discuss the Single Audit Report from Eide Bailly and Accept Recommendations from the February 22, 2022 Finance & Audit Committee meeting:** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Karen White, Chief Financial Officer, presented the highlights of the Single Audit Report from Eide Bailly (**Attachment #1**). Ms. White advised that the full Audit was provided that includes the Independent Auditors Report (issued November 17, 2021), Auditors Report on Government Auditing Standards (issued November 17, 2021), and the Single Audit Report (issued February 15, 2022). The salient points outlined were:

- Total Federal Expenditures included in the SEFA - \$59,249,774
- Three Programs Audited – (i) Coronavirus Relief Fund, (ii) Epidemiology & Lab capacity, and (iii) FEMA Public Assistance Disaster Grants
- Non non-compliance issues
- Highest type of report offered – unmodified
- No difficulties encountered
- No misstatements were identified
- No disagreements with management

A motion was made by First Vice-Chair Melendrez, seconded by Father Rafael, and carried unanimously to accept the recommendation from the Finance & Audit Committee and accept the Single Audit Report from Eide Bailly, as presented.

2. **Receive and Discuss January Financial Report and Accept Recommendations from the February 22, 2022 Finance & Audit Committee meeting:** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Ms. White provided the January Financial Report (**Attachment #2**). Ms. White started with an update on the HRSA site visit regarding:

- Patient Board members
- Requirement for patient Board members to have a visit within the last 24 months, after June 30, 2020
- Immunization clinic does not qualify as a visit
- Three patient Board members; two were prior to June 30, 2020 so unless they come in before June they will not be considered patient Board members
- Requirement of 51% of the Board must be patients
- The visits may be telehealth visits
- Individuals may visit the Health Center even if they have an existing relationship with a primary care provider

Ms. White advised that staff will be sending out information to the Governing Board regarding Board member characteristics. Ms. White advised that the site visit reviewers will assess compliance of

patient Board members by reviewing billing records, particularly the name, date of visit and CPT code (what type of visit); personal information will be redacted. Dr. Leguen directed Mr. Kahananui and his team to verify the information provided by Ms. White regarding the number of Board members who are current patients at the Health Center, and their medical office visits during that period.

Member Black joined the meeting at 2:19 p.m.

Ms. White advised that from the chart presented there appeared to be a difference from the budget and YTD actuals, which was do the budget augmentation in January 2022 and how it spread through the rest of the year.

Member Costa joined the meeting at 2:20 p.m.

Father Rafael inquired as to Other Expenses and requested additional details. Ms. White advised that it was mainly cost allocation and will provide additional information next month.

A motion was made by Erin Breen, seconded by First Vice-Chair Melendrez, and carried unanimously to accept the recommendation from the Finance & Audit Committee and approve the January Financial Report, as presented.

3. Receive and Discuss the Updated Clinical Sliding Fee Discount Scale and Sliding Fee Policy and Accept Recommendations from the February 22, 2022 Finance & Audit Committee meeting; direct staff accordingly or take other action as deemed necessary (*for possible action*)

Ms. White provided an Update to the Clinical Sliding Fee Discount Scale (**Attachment #3**). Ms. White advised that offering a Sliding Fee Schedule for qualifying patients was a requirement for HHS, HRSA and various other pass-through grants. Ms. White advised that the Sliding Fee Schedule was tied to Federal Poverty Guidelines that normally changes every year in January; there was an increase of 4.7%. Ms. White advised that the Governing Board was required to review the Sliding Fee Discount Scale annually.

- Primary Care: Sliding Fees range from \$20 to \$55, then Full Charge for incomes 200% above FPG
- Family Planning: Sliding Fees range from \$0 to \$60, then Full Charge for incomes 250% above FPG
- Ryan White: Sliding Fees range from \$0 to \$55, then Full Charge for incomes 200% above FPG
- Ryan White Limits:
 - Equal to and below 100% - No Charge to Patients
 - Over 100% up to and equal to 200% of FPG, patient pays no more than 5% of their total income
 - Over 200% and up to and equal to 300% of FPG, patient pays no more than 7% of their total income
 - Over 300% of FPG, patients pay no more than 10% of their total income
- More than 8 persons, add \$4,540 of allowable income for each additional person

Ms. White outlined that last year the Health Center changed from a percentage of charges to a flat fee and advised that with the change to a flat fee, the Health Center is now collecting 83% of what is owed by self-pay patients, as opposed to 42%.

Father Rafael requested clarification on the Federal Poverty Guidelines and inquired how patients prove their income.

Chair Knudsen advised of an earlier conversation regarding the Federal Poverty Guidelines and the possibility of questioning the federal government about how they establish the percentage of poverty. Ms. White advised that there was a suggestion to have the Health District's lobbyists reach out to the Nevada Primary Care Association.

A motion was made by Chair Knudsen, seconded by First Vice-Chair Melendrez, and carried unanimously to accept the recommendation from the Finance & Audit Committee and approve the Updated Clinical Sliding Fee Discount Scale and Sliding Fee Policy, as presented.

4. **Receive, Discuss and Accept January Operational Report**; direct staff accordingly or take other action as deemed necessary (*for possible action*)

Mr. Kahananui presented the January Operational Report. (**Attachment #4**) Mr. Kahananui advised that the Health Center's New Access Point (NAP) Grant was awarded through October 31, 2020, at which point the Service Area Competition Grant was awarded through January 31, 2023, and the noncompeting continuation was approved. The Health Center conducted 835 visits by HRSA's definition in January 2022, which didn't include nurse visits, immunization visits, COVID testing nor vaccinations. Ms. Kahananui advised that the no show rate for January 2022 was 25.34%, which is slightly lower than national Health Center averages. Mr. Kahananui outlined that there was a 63.4% conversation rate of patients referred to eligibility assistance. Mr. Kahananui proceeded with highlighting the results of the Patient Satisfaction Surveys. With respect to COVID-19, Mr. Kahananui outlined that the Health Center continued to administer the vaccine, perform testing and participate in a new anti-viral medication program. Mr. Kahananui continued with an update on funding opportunities, behavioral health, accepted insurance and marketing efforts.

A motion was made by Chair Knudsen, seconded by First Vice-Chair Melendrez, and carried unanimously to accept the January Operational Report, as presented.

5. **Receive, Discuss and Accept the Southern Nevada Health District Ethical Standards Policy (ADM-019)**; direct staff accordingly or take other action as deemed necessary (*for possible action*)

Heather Anderson-Fintak, General Counsel, outlined that the Governing Board must approve any Health District policies that affect the Community Health Center and provided a brief overview of the Ethical Standards Policy.

A motion was made by Chair Knudsen, seconded by First Vice-Chair Melendrez, and carried unanimously to approve the Southern Nevada Health District Ethical Standards Policy, as presented.

6. **Receive, Discuss and Accept the Southern Nevada Health District PHS Financial Conflict of Interest Policy (ADM-094)**; direct staff accordingly or take other action as deemed necessary (*for possible action*)

Ms. Anderson-Fintak further outlined that the Health District developed a process and policy related to financial conflicts of interest and provided a brief overview of the PHS Financial Conflict of Interest Policy.

A motion was made by Chair Knudsen, seconded by First Vice-Chair Melendrez, and carried unanimously to approve the Southern Nevada Health District PHS Financial Conflict of Interest Policy, as presented.

7. **Receive, Discuss and Accept the Southern Nevada Community Health Center FQHC Credentialing & Granting Privileges/Onboarding Policy**; direct staff accordingly or take other action as deemed necessary (*for possible action*)

Ms. Anderson-Fintak continued to outline that the Human Resources Department was responsible for the credentialing and privileging for employees and provided a brief overview of the Credentialing & Granting Privileges/Onboarding Policy.

A motion was made by Chair Knudsen, seconded by Member Breen, and carried unanimously to accept the Southern Nevada Community Health Center FQHC Credentialing & Granting Privileges/Onboarding Policy, 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***)

VIII. **EXECUTIVE DIRECTOR & STAFF REPORTS (Information Only)**

- Executive Director Comments

Dr. Leguen advised that the Health Center will hire a consultant to assist with the HRSA Operational Site Visit. Dr. Leguen further advised that staff was in the process of developing a Strategic Plan for the Health Center and once initial steps have been developed, the Governing Board will be engaged for input. Further, the Health Center was in the process of hiring additional providers. Dr. Leguen further advised that the permanent East Las Vegas facility on Fremont Street is behind schedule due to issues with supply chain and availability of workers and is now expected to be finalized by May 2022.

Chair Knudsen requested that dates for the HRSA Operational Site Visit. Ms. White advised that it has been scheduled for June 28, 29 and 30, 2022 and was currently scheduled as a virtual visit.

- IX. **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 portion.

XIII. **ADJOURNMENT**

The Chair adjourned the meeting at 3:06 p.m.

Fermin Leguen, MD, MPH
District Health Officer/Executive Secretary/CHC Executive Director

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REPORT OVERVIEW FROM EIDE BAILLY

- REPORTING PACKAGE INCLUDES THREE AUDIT REPORTS
 - INDEPENDENT AUDITORS REPORT – ISSUED NOVEMBER 17, 2021
 - AUDITOR’S REPORT GOVERNMENT AUDITING STANDARDS – ISSUED NOVEMBER 17, 2021
 - SINGLE AUDIT REPORT – ISSUED FEBRUARY 15, 2022

SINGLE AUDIT OVERVIEW EIDE BAILLY

- TOTAL FEDERAL EXPENDITURES INCLUDED IN THE SEFA
 - \$59,249,774
- THREE PROGRAMS WERE AUDITED
 - CORONAVIRUS RELIEF FUND – CFDA 21.019
 - EPIDEMIOLOGY & LAB CAPACITY – CFDA 93.323
 - FEMA PUBLIC ASSISTANCE DISASTER GRANTS – 97.036
- SCHEDULE OF FINDINGS AND QUESTIONED COSTS
 - NO NONCOMPLIANCE ISSUES IDENTIFIED RELATED TO FEDERAL PROGRAMS
- TYPE OF REPORT ISSUED
 - UNMODIFIED


REQUIRED COMMUNICATIONS WITH GOVERNANCE EIDE BAILLY

- THIS COMMUNICATION IS AN ADDENDUM TO THE REQUIRED COMMUNICATIONS PRESENTED IN NOVEMBER 2021
- NO SIGNIFICANT DIFFICULTIES ENCOUNTERED DURING THE SINGLE AUDIT
- NO MISSTATEMENTS WERE IDENTIFIED AS A RESULT OF OUR SINGLE AUDIT PROCEDURES
- NO DISAGREEMENTS WITH MANAGEMENT

WRAP UP

- QUESTIONS????



The background of the slide is a light gray gradient with several realistic water droplets of various sizes scattered across it. The droplets have highlights and shadows, giving them a three-dimensional appearance.

SOUTHERN NEVADA COMMUNITY HEALTH CENTER FEBRUARY 22, 2022

KAREN WHITE, CPA, CFO

SNCHC FINANCE ACTIVITIES UPDATE

- UPDATE ON HRSA SITE VISIT
- SLIDING FEE SCHEDULE –
- SLIDING FEE POLICY – UPDATED
- AUDIT REPORT
- FQHC JANUARY 2022

HRSA SITE VISIT UPDATE

- PATIENT BOARD MEMBERS
- MUST HAVE A VISIT WITHIN THE LAST 24 MONTHS AFTER: JUNE 30, 2020
- WE CURRENTLY HAVE 3 PATIENT BOARD MEMBERS BUT TWO WERE PRIOR TO JUNE 30, 2020 SO UNLESS THEY COME IN BEFORE JUNE THEY WILL NOT BE CONSIDERED PATIENT BOARD MEMBERS.
- REQUIREMENT IS: 51% OF THE BOARD MUST BE PATIENTS. CURRENTLY 11 BOARD MEMBERS
- 6 BOARD MEMBERS MUST BE PATIENTS.

BOARD MEMBER VERIFICATION

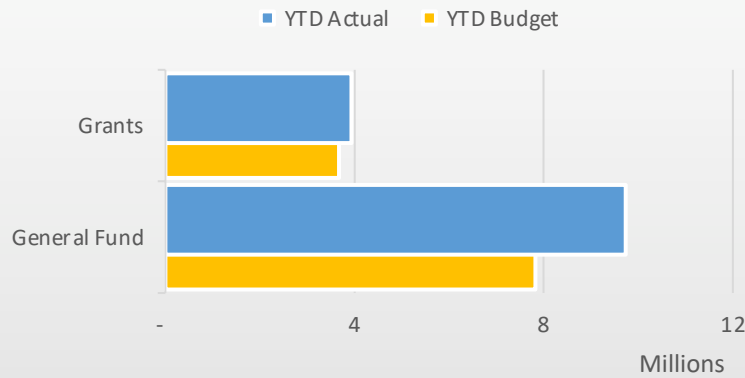
- THE SITE VISIT TEAM WILL VERIFY THAT BOARD MEMBERS ARE PATIENTS.
- THEY WILL LOOK AT BILLING RECORDS; YOUR NAME, VISIT DATE (S), CPT CODE
- EVERYTHING ELSE WILL BE REDATED
- THEY WILL **NOT** LOOK AT YOUR DATA OF BIRTH OR YOUR DIAGNOIS.

SLIDING FEE SCHEDULE - UPDATE

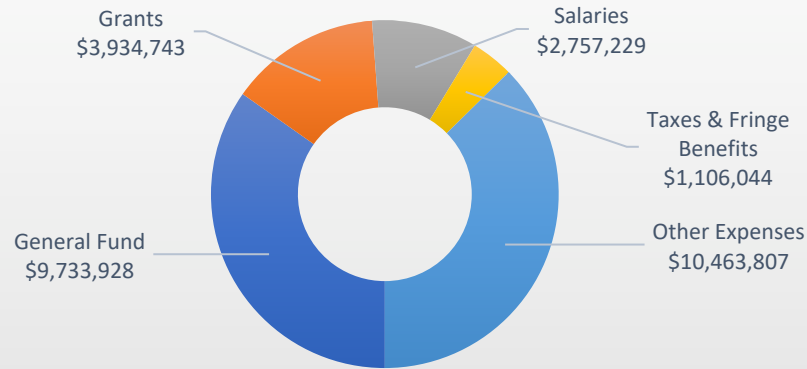
- THE SLIDING FEE SCHEDULE IS TIED TO THE FEDERAL POVERTY GUIDELINES PUBLISHED ANNUALLY BY DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS) IN THE ANNUAL UPDATE OF THE HHS POVERTY GUIDELINES
- UPDATED ANNUALLY TO ACCOUNT FOR LAST CALENDAR YEAR'S INCREASE IN PRICES AS MEASURED BY THE CONSUMER PRICE INDEX
- 2022 RATES REFLECT THE 4.7% IN THE CPI-U FROM CALENDAR YEAR 2020 AND 2021
- SEPARATE PP TO SHARE

FQHC – JANUARY 2022

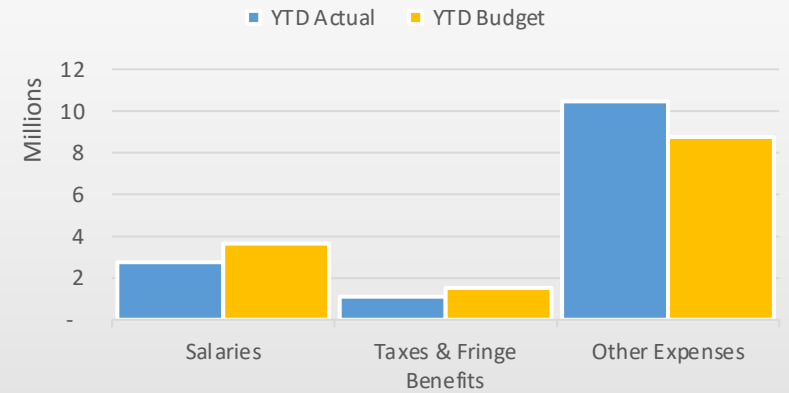
FQHC YTD Actual - Budget to Actual Revenue
January 2021



FQHC YTD Actual - Revenue and Expenses
January 2021



FQHC YTD Actual - Budget to Actual Expenses
January 2021



FQHC - SNCHC, Combined Funds

Revenues & Expenses

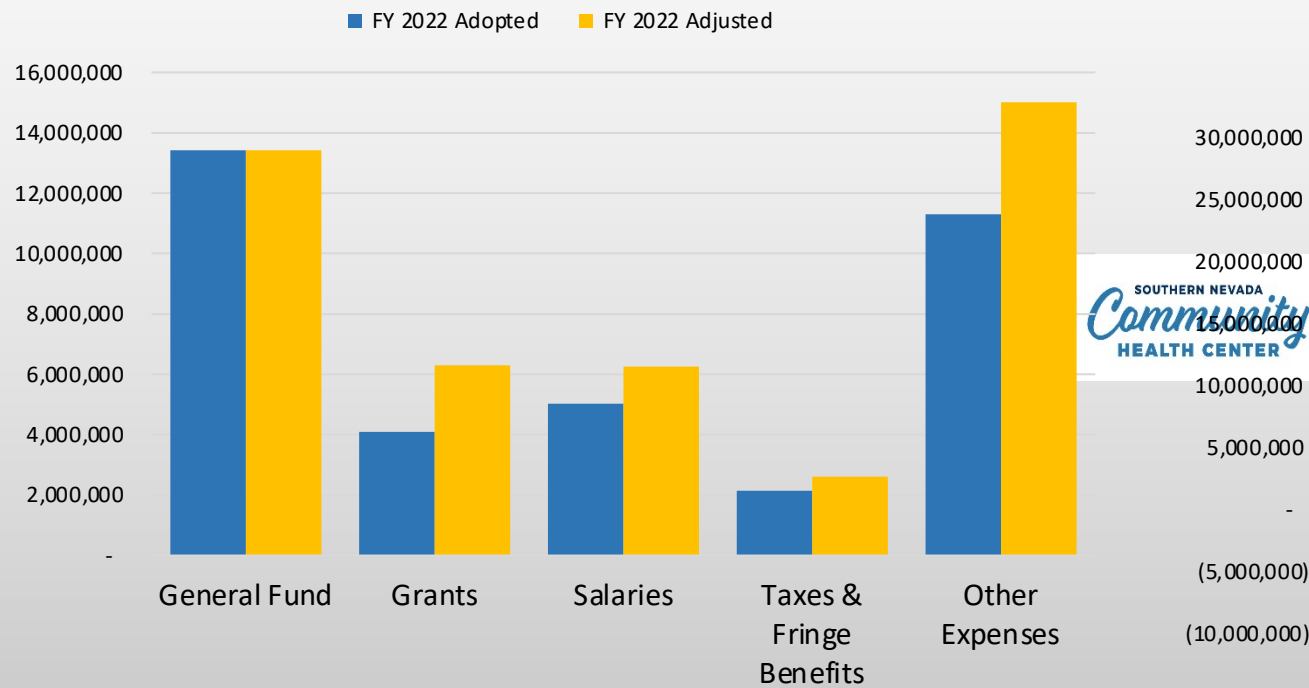
Interim Unaudited Report

January 2022

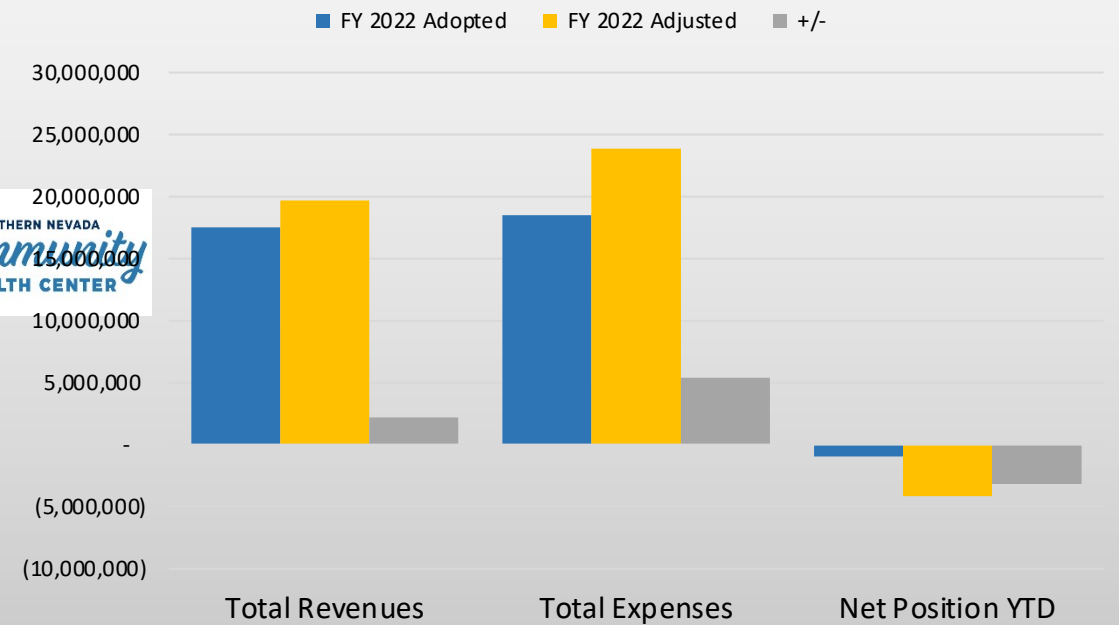
	Description	FY 2022 Adjusted	Adjustments	FY2022 Current Budget	YTD Budget	YTD Actual	Variance	% YTD Actuals to YTD Budget	Notes
Revenue	Revenues								
Revenue	General Fund	13,413,863	-	13,413,863	7,824,753	9,733,928	1,909,175	24%	
Revenue	Grants	6,294,818	-	6,294,818	3,671,977	3,934,743	262,766	7%	
Revenue	Total Revenues	19,708,681	-	19,708,681	11,496,731	13,668,671	2,171,941	19%	
Expense	Expenses								
Expense	Salaries	6,258,551	-	6,258,551	3,650,821	2,757,229	(893,593)	-24%	
Expense	Taxes & Fringe Benefits	2,608,287	-	2,608,287	1,521,501	1,106,044	(415,456)	-27%	
Expense	Other Expenses	15,014,937	-	15,014,937	8,758,713	10,463,807	1,705,093	19%	
Expense	Total Expenses	23,881,775	-	23,881,775	13,931,036	14,327,080	396,044	3%	
Net Position	Net Position YTD	\$ (4,173,094)	\$ -	\$ (4,173,094)	\$(2,434,305)	\$ (658,408)	\$ 1,775,897	-73%	

FQHC - FY2022 ADOPTED BUDGET COMPARED TO AUGMENTED BUDGET AS OF JANUARY 2022

FQHC - FY2022 Adjusted Budget



FQHC - FY2022 Adjusted Budget Revenue vs Expenses



WRAP UP

- QUESTIONS????





UPDATE TO SLIDING FEE DISCOUNT SCHEDULE

February 2022

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

Tied to Federal Poverty Guidelines

The Sliding Fee Schedule is tied to the Federal Poverty Guidelines published annually by Department of Health and Human Services (HHS) in the Annual Update of the HHS Poverty Guidelines

- Updated annually to account for last calendar year's increase in prices as measured by the Consumer Price Index
- Publish Date of January 12, 2022

2022 Rates reflects the 4.7% increase to the CPI-U from Calendar Year 2020 and 2021

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

Primary Care

Sliding Fees
range from
\$20 to \$55

Full Charge for
incomes 200%
above FPG

Family Planning

Sliding Fees
range from
\$0 to \$60

Full Charge for
incomes 250%
above FPG

Sexual Health Clinic

Sliding Fees
range from
\$20 to \$60

Full Charge for
incomes 250%
above FPG

Ryan White

Sliding Fees
range from
\$0 to \$55

Full Charge for
incomes 200%
above FPG

Ryan White Limits

Equal to and below 100% - No Charge to Patients

Over 100% up to and equal to 200% of FPG, patient pays no more than 5% of their total income

Over 200% and up to and equal to 300% of FPG, patient pays no more than 7% of their total income

Over 300% of FPG, patients pay no more than 10% of their total income

Application for Sliding Fee Requires:

- Income Information – Must Provide Proof of Income to Determine the Sliding Fee Scale Level
 - Income Status, Employment Status, Homeless, or Self-Employed
 - Patient and/or Partner Weekly Income Before Taxes
 - Living With Parents
- Identify All Other Types of Income, Such As:
 - Alimony
 - Child Support
 - Social Security, etc
- How Many People are Supported by This Income?

% of Poverty Level	100%	
Program Code	P-0	
Family Size	Equal to or Between	
1	0	\$ 13,590
2	0	\$ 18,310
3	0	\$ 23,030
4	0	\$ 27,750
5	0	\$ 32,470
6	0	\$ 37,190
7	0	\$ 41,910
8	0	\$ 46,630

0-100% of
Federal Poverty
Guidelines

Primary Care	\$20
Family Planning	\$0
Sexual Health Clinic	\$20
Ryan White	\$0

% of Poverty Level	Over 100% to 150%	
Program Code	P-1	
Family Size	Equal to or Between	
1	\$ 13,591	\$ 20,385
2	\$ 18,311	\$ 27,465
3	\$ 23,031	\$ 34,545
4	\$ 27,751	\$ 41,625
5	\$ 32,471	\$ 48,705
6	\$ 37,191	\$ 55,785
7	\$ 41,911	\$ 62,865
8	\$ 46,631	\$ 69,945

100-150% of Federal Poverty Guidelines

Primary Care	\$35
Family Planning	\$35
Sexual Health Clinic	\$35
Ryan White	\$35
*No more than 5% of patient's gross annual income	

% of Poverty Level	Over 150% to 175%	
Program Code	P- 2	
Family Size	Equal to or Between	
1	\$ 20,386	\$ 23,783
2	\$ 27,466	\$ 32,043
3	\$ 34,546	\$ 40,303
4	\$ 41,626	\$ 48,563
5	\$ 48,706	\$ 56,823
6	\$ 55,786	\$ 65,083
7	\$ 62,866	\$ 73,343
8	\$ 69,946	\$ 81,603

150-175% of Federal Poverty Guidelines

Primary Care	\$45
Family Planning	\$45
Sexual Health Clinic	\$45
Ryan White	\$45
*No more than 5% of patient's gross annual income	

% of Poverty Level	Over 175% to 200%	
Program Code	P-3	
Family Size	Equal to or Between	
1	\$ 23,784	\$ 27,180
2	\$ 32,044	\$ 36,620
3	\$ 40,304	\$ 46,060
4	\$ 48,564	\$ 55,500
5	\$ 56,824	\$ 64,940
6	\$ 65,084	\$ 74,380
7	\$ 73,344	\$ 83,820
8	\$ 81,604	\$ 93,260

175-200% of Federal Poverty Guidelines

Primary Care	\$55
Family Planning / Sexual Health Clinic	\$55
Sexual Health Clinic	\$55
Ryan White	\$55
*No more than 5% of patient's gross annual income	

% of Poverty Level	Over 175% to 200%	
Program Code	P-3	
Family Size	Equal to or Between	
1	\$ 23,784	\$ 27,180
2	\$ 32,044	\$ 36,620
3	\$ 40,304	\$ 46,060
4	\$ 48,564	\$ 55,500
5	\$ 56,824	\$ 64,940
6	\$ 65,084	\$ 74,380
7	\$ 73,344	\$ 83,820
8	\$ 81,604	\$ 93,260

Primary Care 200%+
of Federal Poverty
Guidelines

Primary Care	Full charges
Family Planning	\$60
Sexual Health Clinic	\$60
Ryan White	Full charges
*No more than 7% of patient's gross annual income may be charged each calendar year	

Family Planning &
Sexual Health Clinic
200%+ of Federal
Poverty Guidelines

% of Poverty Level	Over 200%		
Program Code	P-4 Over 200% to 250%		P-5 Over 250% FP
Family Size	Equal to or Between		Equal to or Above
1	\$ 27,181	\$ 33,975	\$ 33,976
2	\$ 36,621	\$ 45,775	\$ 45,776
3	\$ 46,061	\$ 57,575	\$ 57,576
4	\$ 55,501	\$ 69,375	\$ 69,376
5	\$ 64,941	\$ 81,175	\$ 81,176
6	\$ 74,381	\$ 92,975	\$ 92,976
7	\$ 83,821	\$ 104,775	\$ 104,776
8	\$ 93,261	\$ 116,575	\$ 116,576
Family Planning	\$60		Full Charges
Sexual Health Clinic	\$60		Full Charges

Ryan White 200%+ of Federal Poverty Guidelines

% of Poverty Level	Ryan White - Over 200%+		
Program Code	P-4 Over 200% to 300%		P-5 Over 300%+
Family Size	Equal to or Between		Equal to or Above
1	\$ 27,181	\$ 40,770	\$ 40,771
2	\$ 36,621	\$ 54,930	\$ 54,931
3	\$ 46,061	\$ 69,090	\$ 69,091
4	\$ 55,501	\$ 83,250	\$ 83,251
5	\$ 64,941	\$ 97,410	\$ 97,411
6	\$ 74,381	\$ 111,570	\$ 111,571
7	\$ 83,821	\$ 125,730	\$ 125,731
8	\$ 93,261	\$ 139,890	\$ 139,891
Ryan White	<p style="text-align: center;">Full Charges</p> <p>*No more than 7% of patient's gross annual income may be charged each calendar year</p>		<p style="text-align: center;">Full Charges</p> <p>*No more than 10% of patient's gross annual income</p>



Last year we changed from a % of charges for the sliding fee to a flat rate for patients in the sliding fee program.



Prior to this change we were collecting 42% of what was owed to us for self pay patients.



After the change to a flat rate; we are now collecting 83% of what is owed for self pay patients.

Sliding Fee Flat
Rate verses, a
% of charges

Update

Questions?



February 24, 2022
Operational Report
for Jan 2022

Health Resources and Services Administration (HRSA) Awards

- ▶ New Access Point (NAP) Grant period was through 10/31/2020.
- ▶ Service Area Competition (SAC) Grant was awarded through 1/31/2024.
 - ▶ Noncompeting Continuation submitted and approved through 1/31/2023

January 2022 Patient Counts

- ▶ SNCHC conducted 835 visits by HRSA's definition in January 2022. (Not including COVID testing, nor vaccinations.)
- ▶ The no show rate for January 2022 including cancellations was 25.34%, which is slightly lower than national Health Center averages.



Eligibility Assistance

- ▶ In January 2022 The Health Center had a 63.4% conversion rate of patients who were referred to Eligibility services, whose insurance, food, housing, and hardship benefit applications were successfully submitted versus the 54.3% conversion rate of 2021.



Patient Satisfaction Survey Highlights

- ▶ 162 Patient Satisfaction Surveys - Representing 19.4% of patients seen, completed a survey in January 2022:
- ▶ How did you hear about us?
 - ▶ Friends and/or family - 38.7%
 - ▶ Referral from another provider or resource - 16.8%
 - ▶ Search engine (e.g. Google) - 5.8%
 - ▶ SNHD website - 20.0%
 - ▶ Social media - 1.9%
 - ▶ Other ads - 16.8%



Patient Satisfaction Survey Highlights

Ease of scheduling an appointment

- 96.7% Positive
- 3.3% Average
- 0% Poor

Wait time to see provider

- 97.4% Positive
- 2.6% Average
- 0% Poor

Care received from providers and staff

- 99.3% Positive
- .7% Average
- 0% Poor

Understanding of health care instructions following your visit

- 98% Positive
- 2% Average
- 0% Poor

Recommendation of our health center to friends and family

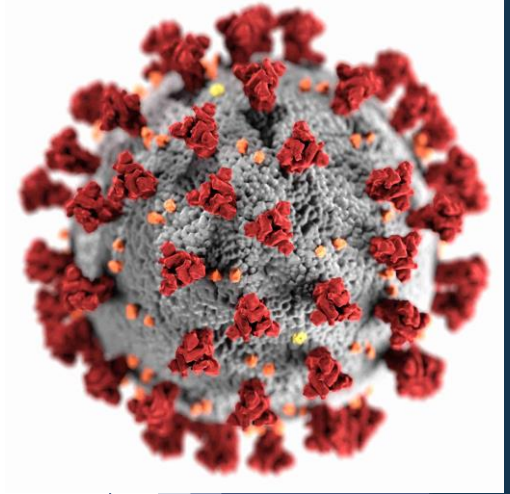
- 98.6% Positive
- 1.4% Average
- 0% Poor



COVID Update

▶ Updates include:

- ▶ ARPA Funding for Health Centers (President Biden's American Rescue Plan Act through his Health Center COVID-19 Vaccination Program.)
 - ▶ Offering J&J, Moderna, and Pfizer - Monday through Friday
- ▶ Since May 3, 2021, SNCHC has administered 37,773 doses of COVID-19 vaccine.
 - ▶ In January 2022, 3,853 doses were administered, 745 of which were for pediatric patients aged 5-11.
- ▶ SNCHC has conducted a grand total of 84,576 COVID-19 tests since the pandemic began in April of 2020.
 - ▶ 8,363 COVID-19 tests were conducted in January 2022
 - ▶ Positivity Rate was the highest of the pandemic in January at 54.04%
- ▶ SNCHC is participating in a new anti-viral medication program also to treat COVID in patients age 65+ and/or patients with co-morbidities at higher risk who are symptomatic.
- ▶ SNCHC distributed 4,000 face masks, 2,265 at home rapid COVID test kits to the community, and just applied to also distribute N95 masks.



Funding Opportunity Updates

▶ Applications in Process for Funding Opportunities include:

- ▶ Ryan White Capacity Building for Telehealth (\$150,000) - **Granted**
- ▶ FPNV_22 - Family Planning Nevada (\$450,000 each yr. for 2 yrs.) - **Granted**
- ▶ HCNAP Noncompeting Continuation for 2022 (\$650,000) - **Granted**
- ▶ HCNAP_PCHP Amendment (\$66,000 for 1 yr.) - **Granted**
- ▶ ARPA Health Center COVID-19 Vaccine grant from April 2021 through March of 2023 (\$2,826,500) - **Granted**
- ▶ ARPA Capital/Construction (\$600,474) - **Granted**
 - ▶ BH/MH Buildout and ELV Equipment for Full Scope services
- ▶ Health Plan of Nevada Community Catalyst - (\$250,000) - **Granted**
 - ▶ **NCE Granted - HNP Wants to award SNCHC more this year**
- ▶ Title X 2022 through 2027 (\$98,000,000) - **grant submitted pending decision**
- ▶ Title X Telehealth Grant (\$700,000) - **grant submitted pending decision**
- ▶ Ryan White B - Case Mgmt and NM Case Mgmt - **grant submitted pending decision**
- ▶ FP and HCNAP NCEs - **grants submitted pending decisions**
- ▶ Ryan White Renewal 2022 - 2025 (Amount TBD) - **grant writing in process**



Other Updates

▶ Updates include:

- ▶ CIS was approved by HRSA to bring ELV into the full scope of SNCHC services.
 - ▶ ELV Relocated to Bonanza until new Fremont location opens
 - ▶ Oral Health Infrastructure to begin later this year in collaboration with UNLV School of Dental Medicine
- ▶ North Las Vegas Community Correctional Center, and the Deputy City Attorney of the City of Las Vegas
 - ▶ Bus passes and care coordination - possibly a new Uber/Lyft agreement coming to also provide support.
- ▶ HPN is partnering with SNCHC to improve Women's Health among minorities and will be doing some press to promote. HPN has expressed their desire to fund SNCHC for another year.
 - ▶ Las Vegas Paiute Tribe is subgrantee.
- ▶ Grant Deliverables, Reporting, Spend downs, Amendments, Closeouts, and grant management for Title X, FPNV, COVID, Ryan White, Primary Care, UDS collection and reporting, Ending HIV Epidemic, and Mobile Clinic activities are all ongoing.
- ▶ UDS Report Submission was due Feb 15th but submitted on Feb 11th.



Behavioral Health Update

Where We Are

- ▶ Have one Psych APRN for light counseling, medication management and Medication Assisted Treatment
- ▶ Hired an LCSW- credentialing is under way, but she is seeing self-pay pts, and we are converting insured pts into self-pay when they need the services now.
- ▶ Referring Patients out when we cannot offer services needed.
- ▶ Second LCSW emailed first week of February declining offer
 - ▶ Process has begun to get another LCSW recruited.
- ▶ Second Psych APRN has been identified for hire when patient demand requires.
- ▶ Still recruiting for a Psychiatrist.
- ▶ Office Space may become an issue, but we are collaborating with other departments to make room for therapy services.
 - ▶ Grant application for a construction buildout for Behavioral Health Center was submitted.
- ▶ Staff training is ongoing.
- ▶ 6 Providers now DATA Waived and MAT trained to manage pts with substance abuse needs.



Public Education Campaign Plans for 2022

- ▶ Transit – \$25,000
- ▶ Digital Billboards – \$40,000
- ▶ Door hangers – \$2,000
- ▶ Rack cards – \$4,000
- ▶ Sanitizer wipes and hand sanitizer stations – \$22,500
- ▶ Meadows Mall ads – \$8,740
- ▶ Las Vegas Review-Journal – \$40,000
- ▶ El Tiempo – \$10,000
- ▶ SNCHC – half page \$500 x 10 Wednesday insertions = \$5,000
- ▶ FPC – half page \$500 x 10 Wednesday insertions = \$5,000
- ▶ Pull-up banners Assorted topics – \$1,000
- ▶ Posters - Assorted topics – \$1,000
- ▶ Google Search Ads - \$10,000
- ▶ Google Display Ads \$10,000
- ▶ Social Media Ads - \$25,000



Questions





February 24, 2022
Operational Report
for Jan 2022



MINUTES

SOUTHERN NEVADA COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING

March 24 – 2:00 p.m.

Meeting was conducted In-person and via WebEx Event

Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107
Red Rock Trail Rooms A and B

MEMBERS PRESENT: Brian Knudsen – Chair, Consumer Member (*via WebEx*)
Jose L. Melendrez – First Vice-Chair, Consumer Member (*via WebEx*)
Scott Black – Community Member, City of North Las Vegas (*via WebEx*)
Erin Breen – Community Member, UNLV Vulnerable Road Users Project (*via WebEx*)
Father Rafael Pereira – Community Member, All Saints Episcopal Church (*via WebEx*)

ABSENT: Timothy Burch – Second Vice-Chair, Community Member, Clark County
Gary Costa – Community Member, Golden Rainbow
Scott Garrett – Consumer Member
Lucille Scott – Consumer Member
Duprice Scruggs – Consumer Member
Aquilla Todd – Consumer Member

ALSO PRESENT: None

(In Audience)

LEGAL COUNSEL: Heather Anderson-Fintak, General Counsel

EXECUTIVE SECRETARY: Fermin Leguen, MD, MPH, District Health Officer

STAFF: Cory Burgess, Aracely Calderon, Andria Cordovez Mulet, Loriza Chongtai, Christian Hilario, David Kahananui, Theresa Ladd, Cassius Lockett, Cassandra Major, Kyle Parkson, Leo Vega, Karen White, Edward Wynder

I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada Community Health Center Governing Board Meeting to order at 2:15 p.m. There was a lack of quorum.

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 the First Public Comment portion.

IV. ADOPTION OF THE MARCH 24, 2022 MEETING AGENDA (for possible action)

Due to a lack of quorum, no action was taken.

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/COMMUNITY HEALTH CENTER GOVERNING BOARD MEETING:
February 24, 2022 (for possible action)

Due to a lack of quorum, no action was taken.

VI. REPORT / DISCUSSION / ACTION

1. Receive and Approve Recommendations from the March 22, 2022 Finance & Audit Committee meeting regarding the Southern Nevada Community Health Center FY23 Budget; direct staff accordingly or take other action as deemed necessary (for possible action)

Due to a lack of quorum, no action was taken.

2. Receive and Approve Recommendations from the March 22, 2022 Finance & Audit Committee meeting regarding the Billing Fee Schedule Updates; direct staff accordingly or take other action as deemed necessary (for possible action)

Due to a lack of quorum, no action was taken.

3. Receive and Discuss February Financial Report and Accept Recommendations from the March 22, 2022 Finance & Audit Committee meeting; direct staff accordingly or take other action as deemed necessary (for possible action)

Due to a lack of quorum, no action was taken.

4. Receive, Discuss and Approve the Application for the Change in Scope for the East Las Vegas location at 2830 Fremont Street, Las Vegas; direct staff accordingly or take other action as deemed necessary (for possible action)

Due to a lack of quorum, no action was taken.

5. Receive, Discuss and Accept February Operational Report; direct staff accordingly or take other action as deemed necessary (for possible action)

Due to a lack of quorum, no action was taken.

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

There were no items noted.

VIII. EXECUTIVE DIRECTOR & STAFF REPORTS (Information Only)

- Executive Director Comments

Dr. Leguen advised that Randy Smith will be joining the Health Center on March 30, 2022 at the new FQHC Operations Officer. Mr. Smith has several years of experience at health centers in California.

Further, Dr. Leguen advised that the Health Center is still working on the vaccination campaign and providing support in the community at testing sites.

Dr. Leguen advised that today marks World TB Day and the Health Center participates in activities on the prevention of tuberculosis as part of the Refugee Program.

Chair Knudsen requested that Governing Board members have an opportunity to meet Mr. Smith shortly after he joins the Health Center. Dr. Leguen advised that introduction meetings are being scheduled for Mr. Smith to meet members of the Leadership Team at the Health District and meetings will be scheduled for Governing Board members as well.

Further to a request from Chair Knudsen, Dr. Leguen advised that, earlier in the month, the Health District was awarded accreditation status through the Public Health Accreditation Board (PHAB). This milestone accomplishment is official recognition that SNHD meets the rigorous standards of PHAB, which works to advance and transform public health practice by championing performance improvement, strong infrastructure, and innovation. Accreditation means that SNHD is committed to continuous quality improvement so that it can meet our community's needs as effectively as possible. Initial Accreditation start date was in 2016; the Action Plan was received in 2019 and, due to the pandemic, an extension to respond was granted, and all documentation was submitted to PHAB on January 4, 2022. There has been an enormous amount of time, work, dedication and support put into the entire process starting from 2016 to present day. Dr. Leguen advised that the Health District is the third accredited health district in Nevada, along with Washoe County and Carson City, and that the State of Nevada Health Department was in the process of applying for accreditation status.

Chair Knudsen advised that he was currently enrolled in a course for FQHC chairs and that some of the challenges the Health Center was experiencing, particularly related to quorum, was common with other health centers.

Dr. Leguen advised that the Health Center was also exploring accreditation related to the quality of service that is provided to patients and working with the Nevada Primary Care Association.

As there was still a lack of quorum, Ms. Anderson-Fintak thanked the members in attendance and suggested that the meeting be re-scheduled. Dr. Leguen confirmed that there was a HRSA requirement for the Governing Board to meet each month. Due to Open Meeting Law requirements, the Governing Board members in advised provided their availability for a meeting on March 30, 2022 at 2:00 p.m. The Chair requested that staff contact the remaining Governing Board members for their availability.

Further, a suggestion was made whether meetings should be held earlier in the month.

- IX. 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 portion.

XIII. ADJOURNMENT

The Chair adjourned the meeting at 2:29 p.m.

Fermin Leguen, MD, MPH
District Health Officer/Executive Secretary/CHC Executive Director

/acm

DRAFT



SOUTHERN NEVADA
Community
HEALTH CENTER

AT THE SOUTHERN NEVADA HEALTH DISTRICT

FQHC FY 2022-2023 Budget
(July 1, 2022 to June 30, 2023)

FQHC FY2023 Budget Highlights

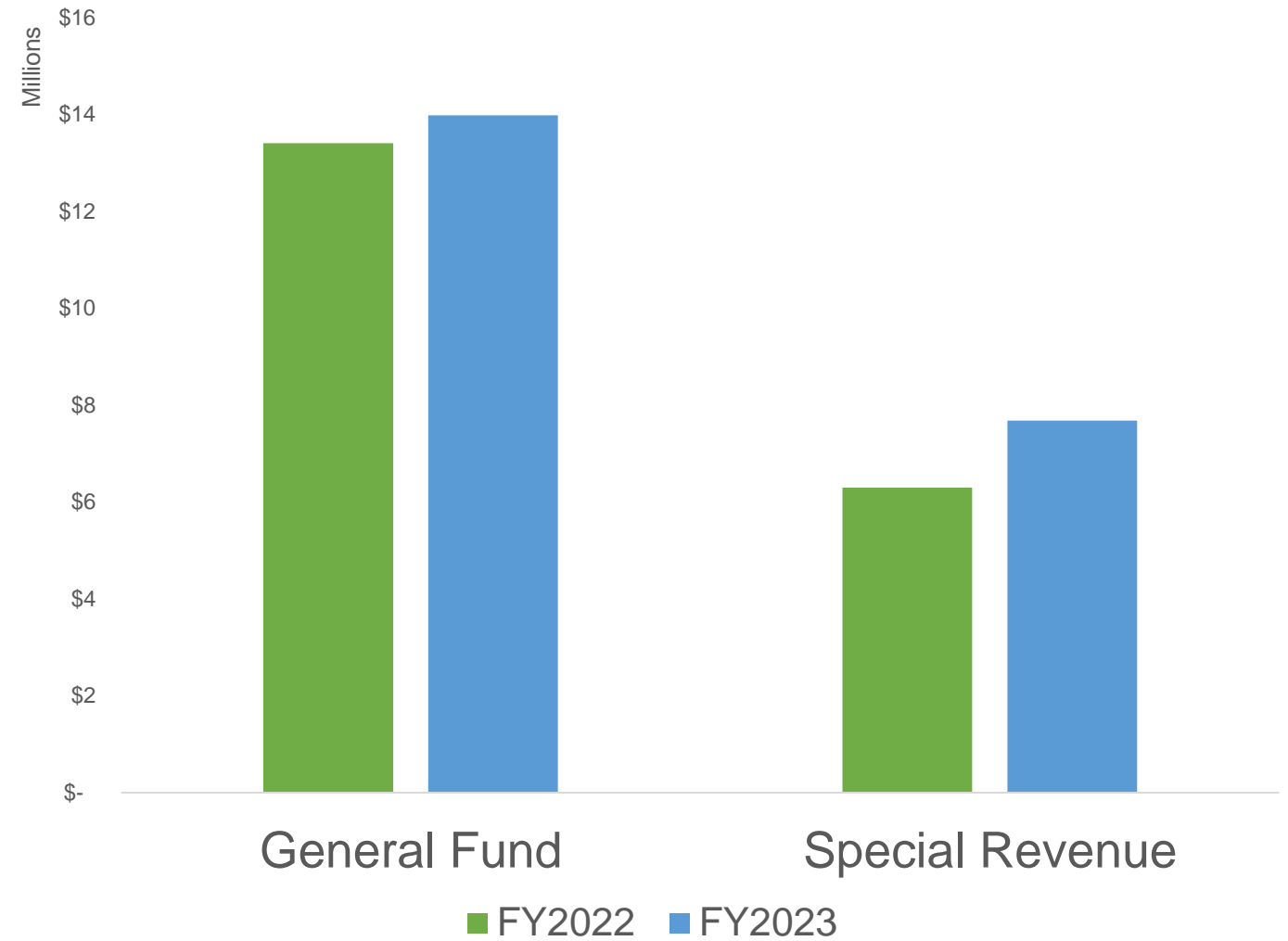
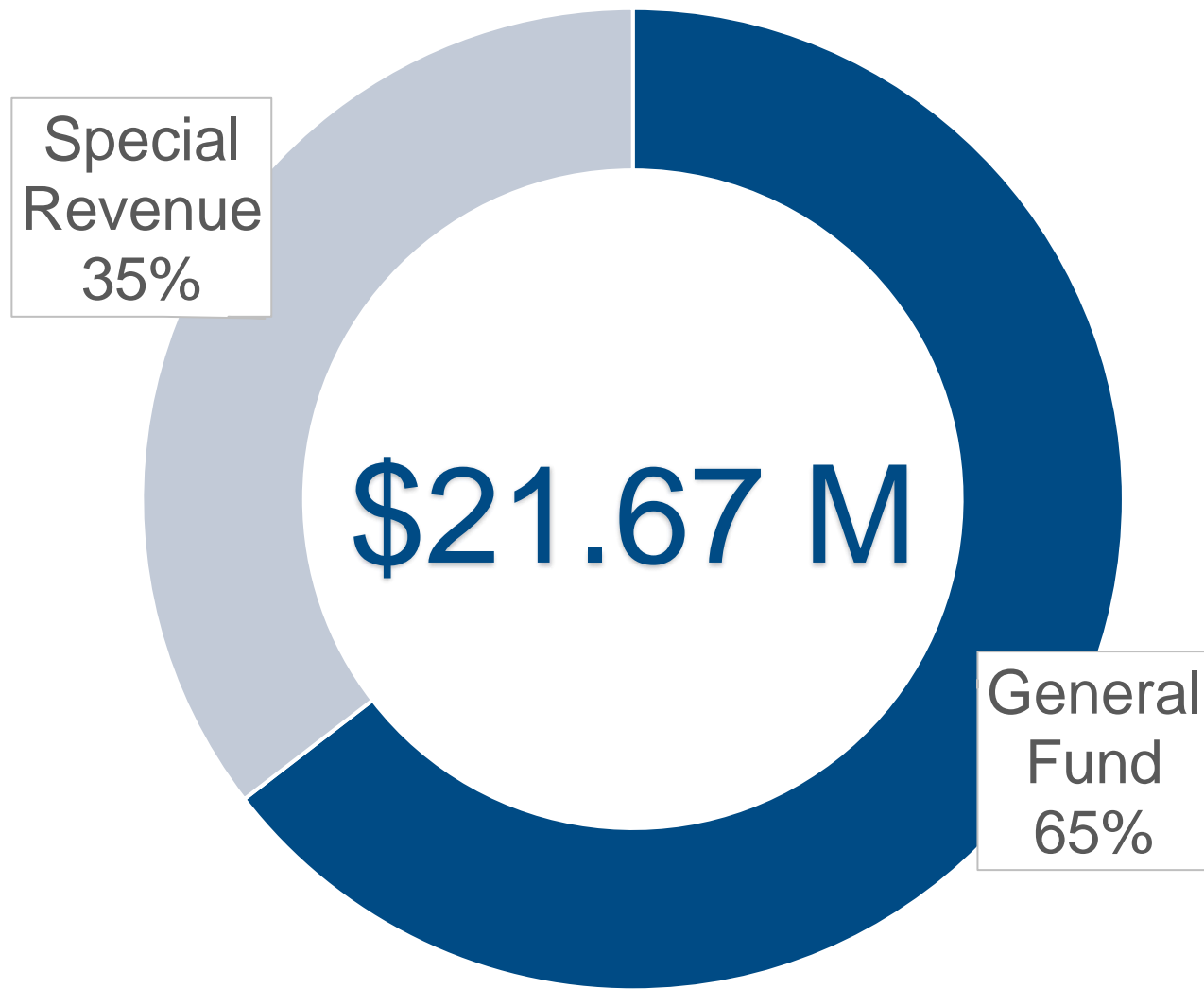
The budget for FQHC Increased by 9.95% to \$21,670,487 in combined General Fund and Grant Revenue

FQHC Expenditures increased by 11.20% to \$26,557,444

22% Increase in Grant Funding for FY2023

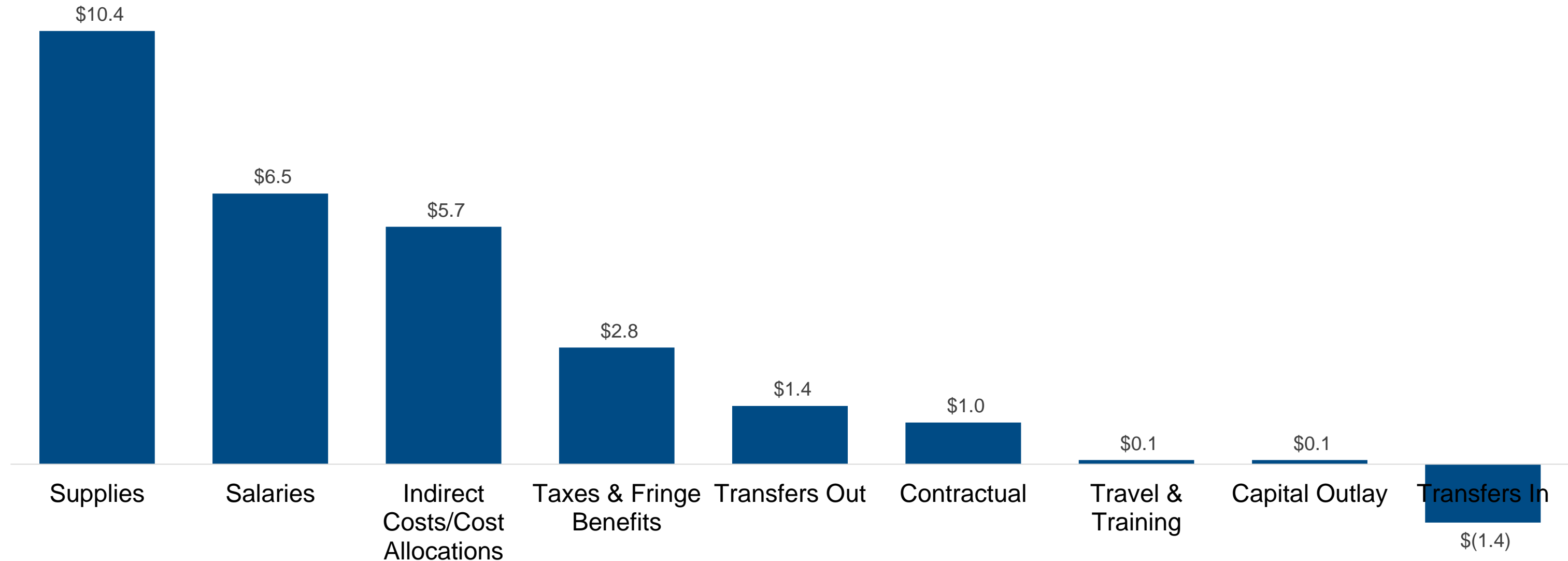
Net Decrease of (3) FTE's

FQHC – FY2023 Budget Revenue



	FY2022	FY2023	Increase	% Increase
General Fund	\$ 13,413,863	\$ 13,986,563	\$ 572,700	4.27%
Special Revenue	\$ 6,294,818	\$ 7,683,924	\$ 1,389,106	22.07%
	\$ 19,708,681	\$ 21,670,487	\$ 1,961,806	9.95%

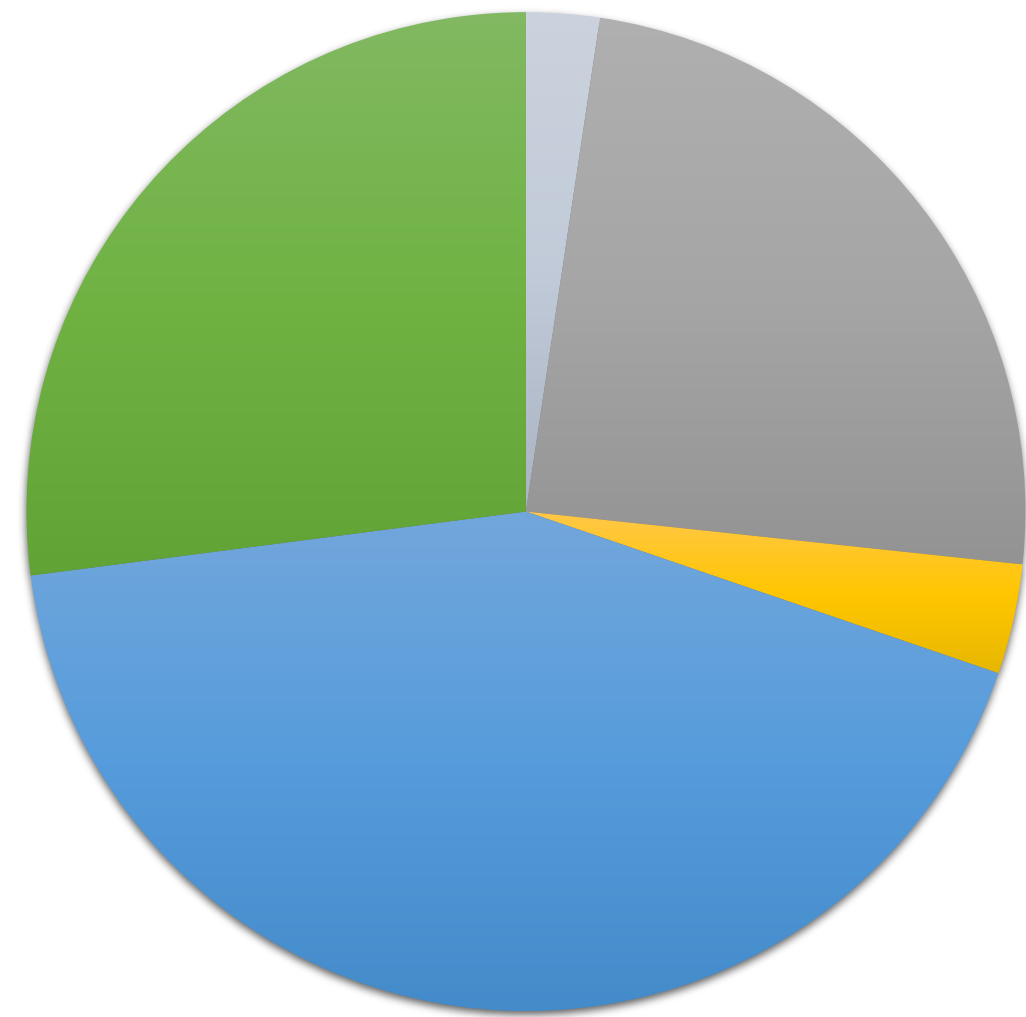
FQHC – FY2023 Budget Expenditures



	FY2022	FY2023	Increase	% Increase
General Fund	\$ 17,586,957	\$ 18,873,520	\$ 1,286,563	7.32%
Special Revenue	\$ 6,294,818	\$ 7,683,924	\$ 1,389,106	22.07%
	\$ 23,881,775	\$ 26,557,444	\$ 2,675,669	11.20%

FQHC – FY2023 FTE's by Program

FY2023 FQHC FTE's



- Behavioral Health
- Family Planning
- Pharmacy
- Primary Health Clinic
- Ryan White

FQHC Program:

	FY2022	FY2023	Net Change
Behavioral Health	3.00	2.00	-1.00
Family Planning	23.50	20.50	-3.00
Pharmacy	3.00	3.00	0.00
Primary Health Clinic	33.00	36.00	+3.00
Ryan White	23.80	22.80	-1.00



SOUTHERN NEVADA
Community
HEALTH CENTER

AT THE SOUTHERN NEVADA HEALTH DISTRICT

QUESTIONS & DISCUSSION

Updates to SNCHC Fee Schedule



SNCHC Governing Board Meeting
March 24, 2022

Fee schedule review

- Last year a more comprehensive review of the fee schedule.
- This year there are only a few fees that need to be updated.
- These are mostly new codes or fees that have not used in the past.

CPT/HCPCS	Description	Full fee schedule	Proposed New Fees
Primary care services			
●			
99381	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$184.00
99382	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$189.00
99383	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$191.00
99384	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$210.00
99385	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$240.00
99386	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$269.00
99387	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$274.00
99394	PERIODIC PREVENTIVE MED EST PA	\$172.00	\$186.00
99395	PERIODIC PREVENTIVE MED EST PA	\$172.00	\$209.00
99396	PERIODIC PREVENTIVE MED EST PA	\$172.00	\$225.00
99397	PERIODIC PREVENTIVE MED EST PA	\$172.00	\$235.00
81025	Urine Pregnancy Test	\$17.00	\$34.00
87808	Trichomonas Vaginalis	\$17.00	\$45.00
87905	Bacterial Vaginosis	\$17.00	\$37.00
87389	IAAD IA HIV-1 AG W/HIV-1 & HIV-2 AM	\$39.00	\$43.00
J7300	IUD Device - Paragard	\$492.00	\$568.00
J7301	IUD Device - Skyla	\$486.00	\$550.00
J7297	IUD Device - Liletta	\$104.00	\$200.00
	The IUD are covered by the FP grant so patients in FP are not charged		

Office Visits



Medications

CPT/HCPCS	Description	Full fee schedule	Proposed New Fees
Medications			
Q0144	Azithromycin Powder 1gm	24.94	28.30
S4993	Birth Control Pills - Apri (28 tabs)	26.12	29.41
S4993	Birth Control Pills - Aviane (28 tabs)	30.10	33.13
S4993	Birth Control Pills - Nora - B (28 tabs)	31.60	34.54
S4993	Birth Control Pills - Sprintec (28 tabs)	27.59	30.78
S4993	Birth Control Pills - Tri Lo Sprintec (28 tabs)	125.56	122.35
S4993	Birth Control Pills - Tri-Sprintec (28 tabs)	27.90	36.46
J8499	Cefixime 400mg	23.69	23.82
J0696	Ceftriaxone sodium 500mg INJ	0.00	14.17
J3490	Clotrimazole Vaginal Cream (1%)	5.56	8.84
J8499	Cycloserine 250mg	62.18	66.88
J1050	DepoProvera 150mg/mL IM	83.76	57.75
S4993	Emergency Birth Control - Plan B	33.38	31.20
J8499	Fluconazole 150mg	29.82	15.87
J8499	Linezolid 600 mg Tab	157.22	146.94
J1050	Medroxyprogesterone 150mg/ml IM	83.76	57.80
J8499	Moxifloxacin 400 mg Tab	23.30	26.76
J8499	Metronidazole 500 mg		5.55
J3490	Metronidazole Vaginal Gel TUBE	3.96	23.28
S4993	NEW DAY TAB 1.5MG 1 NSTR@	39.53	31.94
J8499	Streptomycin 1gram VIAL	80.25	80.00
99070	Vandazole Vaginal Gel TUBE	139.56	135.43
J8499	Vitamin B-6 50mg	0.01	0.02
J2001	Xylocaine-Mpf 1% VIAL	2.10	6.96
Q0144	Zithromax 1 gm powder	126.16	123.50
J8499	Zyvox 600mg	274.26	10.97

Patients on the sliding fee
Scale pay between \$7 and \$22



New
Vaccines

	CPT/HCPCS	New Fees
PCV15 (Vaxneuvance)	90671	420.00
PCV20 (Prevnar 20)	90677	450.00

Discounts are offered to uninsured patients.

(VFC for children 0-18 years and 317 for adults 19 years and older)



SOUTHERN NEVADA
Community
HEALTH CENTER

AT THE SOUTHERN NEVADA HEALTH DISTRICT

QUESTIONS & DISCUSSION

SNHD - FQHC

February Financials

March 2022

FQHC – February Financials

FQHC - SNCHC, Combined Funds

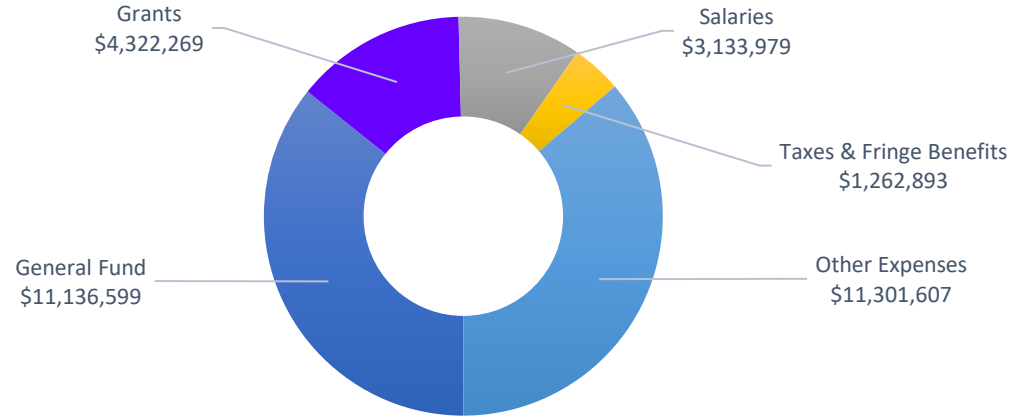
Revenues & Expenses

Interim Unaudited Report

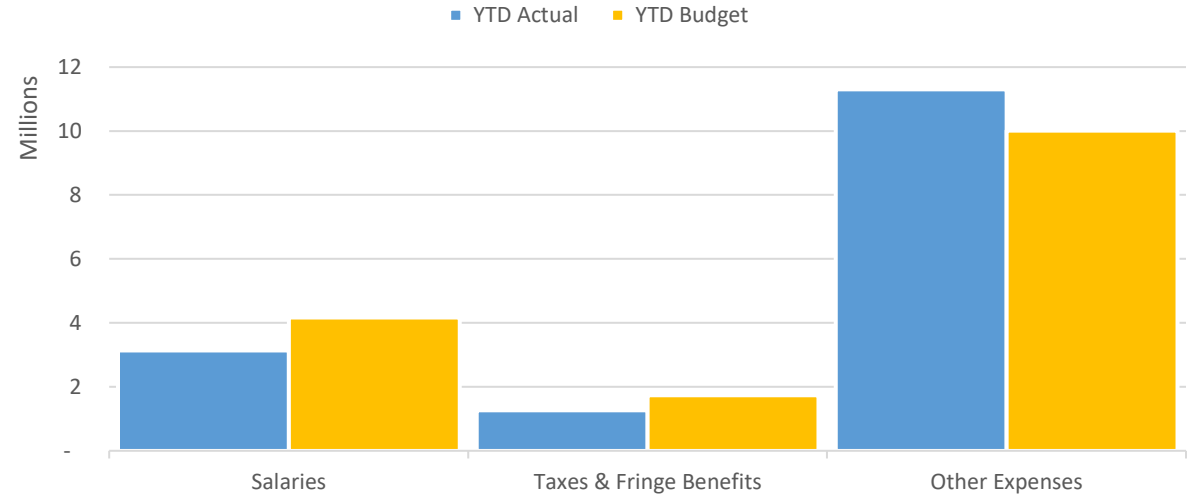
February 2022

Description	<u>FY 2022 Adopted</u>	<u>Adjustments</u>	<u>FY2022 Current Budget</u>	<u>YTD Budget</u>	<u>YTD Actual</u>	<u>Variance</u>	<u>% YTD Actuals to YTD Budget</u>
Revenues							
Charges for Services	13,413,863	-	13,413,863	8,942,575	11,136,599	2,194,024	25%
Grants	6,294,818	-	6,294,818	4,196,545	4,322,269	125,724	3%
Total Revenues	19,708,681	-	19,708,681	13,139,121	15,458,868	2,319,747	18%
Expenses							
Salaries	6,258,551	-	6,258,551	4,172,367	3,133,979	(1,038,389)	-25%
Taxes & Fringe Benefits	2,608,287	-	2,608,287	1,738,858	1,262,893	(475,965)	-27%
Supplies	9,043,617	-	9,043,617	6,029,078	7,208,746	1,179,668	20%
Travel & Training	84,801	-	82,801	55,201	30,532	(24,668)	-45%
Contractual	764,257	-	764,257	509,505	1,021,941	512,436	101%
Capital Outlay	20,420	-	20,420	13,613	-	(13,613)	-100%
Cost Allocations	5,103,842	-	5,103,842	3,402,561	3,040,388	(362,173)	13%
Total Expenses	23,881,775	-	23,881,775	15,921,183	15,698,478	(222,705)	-1%
Net Position YTD	\$ (4,173,094)	\$ -	\$ (4,173,094)	\$ (2,782,063)	\$ (239,611)	\$ 2,542,452	-91%

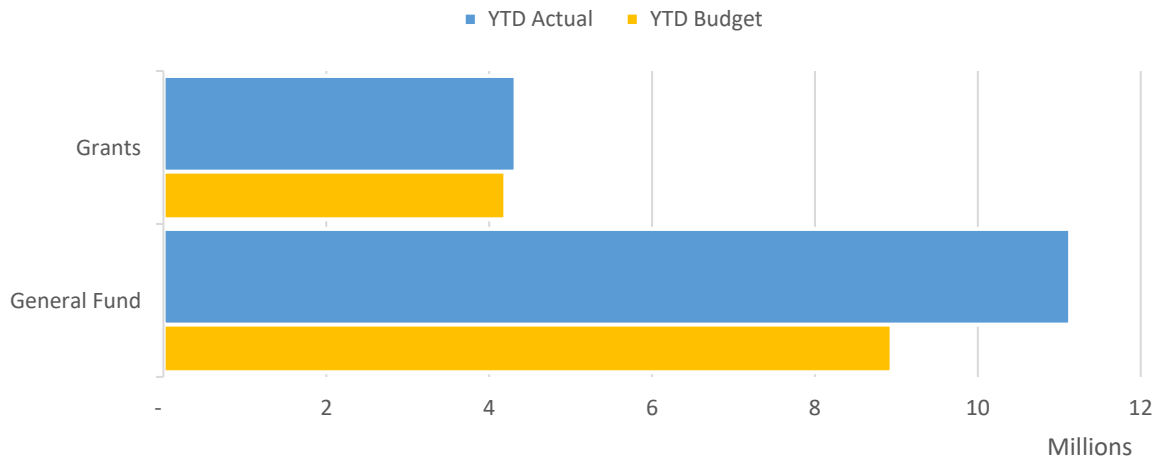
FQHC YTD Actual - Revenue and Expenses February 2022



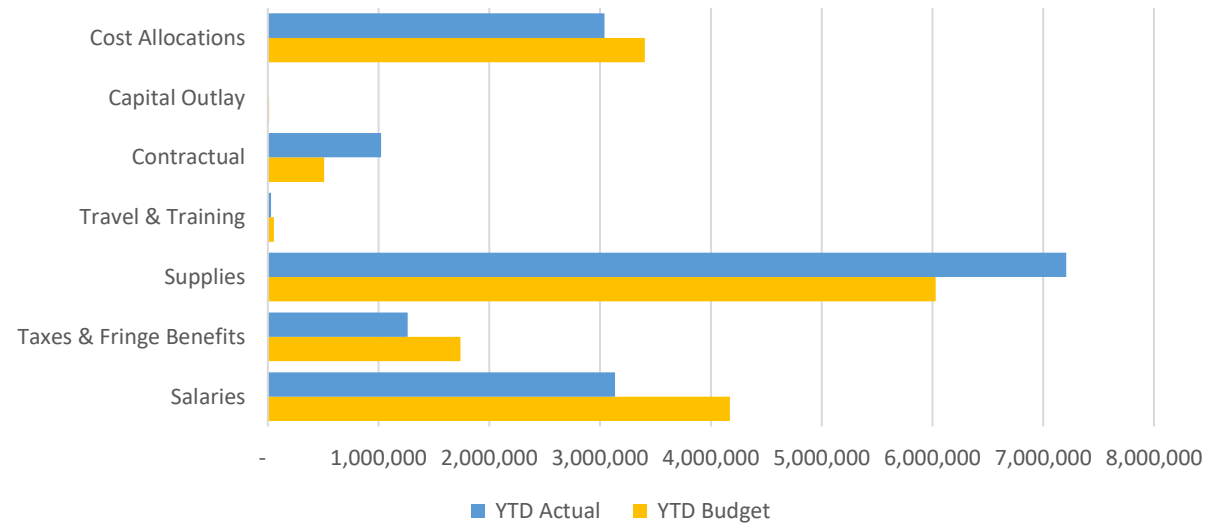
FQHC YTD Budget to Actual Expenses February 2022



FQHC YTD Budget to Actual Revenue February 2022



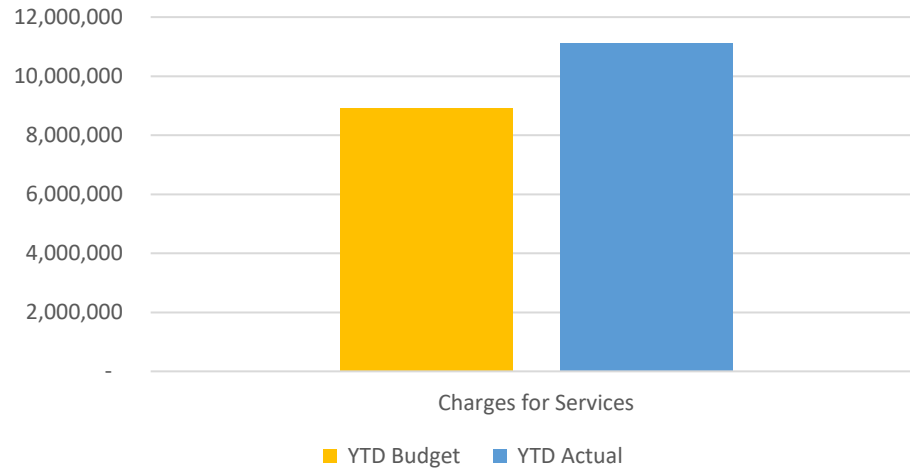
Detail Expenses Year to Date



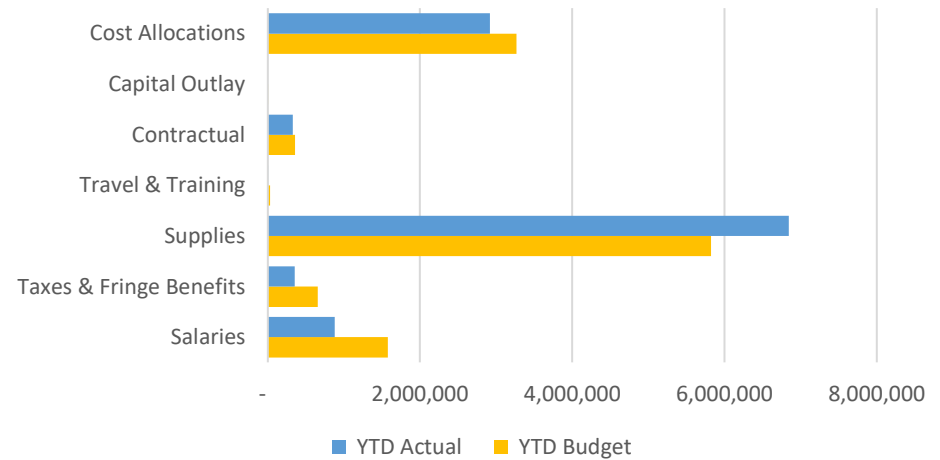
February Financials – Charges for Services



Charges for Services - Revenue



Charges for Services - Expenses



FQHC - SNCHC, Charges for Services

Revenues & Expenses

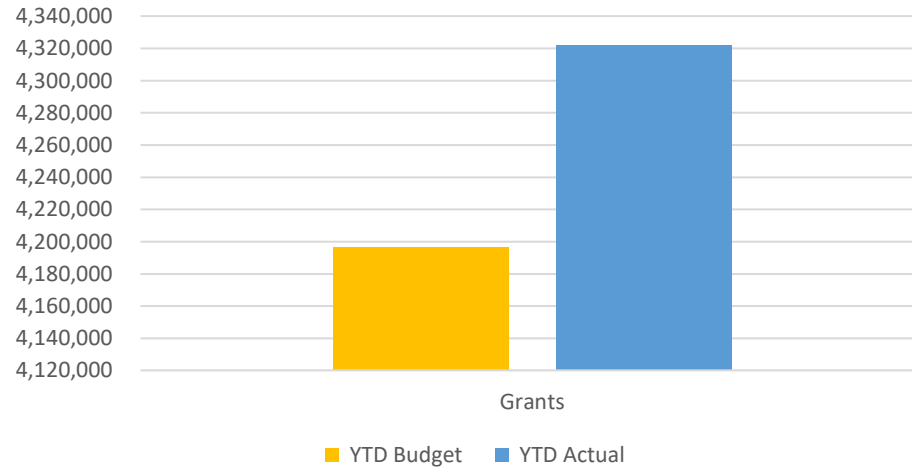
Interim Unaudited Report

February 2022

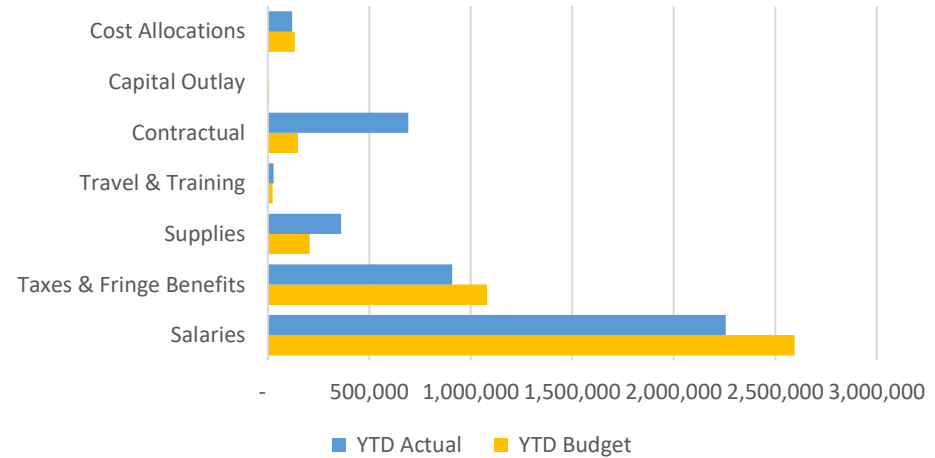
Description	FY 2022 Adopted	Adjustments	FY2022 Current Budget	YTD Budget	YTD Actual	Variance	% YTD Actuals to YTD Budget
Revenues							
Charges for Services	13,413,863	-	13,413,863	8,942,575	11,136,599	2,194,024	25%
Expenses							
Salaries	2,365,164		2,365,164	1,576,776	878,075	(698,701)	-44%
Taxes & Fringe Benefits	987,569		987,569	658,379	355,116	(303,264)	-46%
Supplies	8,733,163		8,733,163	5,822,109	6,846,678	1,024,569	18%
Travel & Training	47,045		47,045	31,363	1,613	(29,750)	-95%
Contractual	540,679		540,679	360,453	329,546	(30,906)	-9%
Capital Outlay	10,000		10,000	6,667	-	(6,667)	-100%
Cost Allocations	4,903,337	-	4,903,337	3,268,891	2,920,300	(348,592)	(0)
Total Expenses	17,586,957	-	17,586,957	11,724,638	11,331,328	(393,310)	-3%
Net Position YTD	(4,173,094)	-	(4,173,094)	(2,782,063)	(194,729)	2,587,334	-93%

February Financials – Grants

Grants - Revenue



Grants - Expenses



FQHC - SNCHC, Grants

Revenues & Expenses

Interim Unaudited Report

February 2022

Description	FY 2022 Adopted	Adjustments	FY2022 Current Budget	YTD Budget	YTD Actual	Variance	% YTD Actuals to YTD Budget
Revenues							
Grants	6,294,818	-	6,294,818	4,196,545	4,322,269	125,724	3%
Expenses							
Salaries	3,893,387		3,893,387	2,595,591	2,255,903	(339,688)	-13%
Taxes & Fringe Benefits	1,620,718		1,620,718	1,080,479	907,777	(172,702)	-16%
Supplies	310,454		310,454	206,969	362,068	155,099	75%
Travel & Training	35,756		35,756	23,837	28,919	5,082	21%
Contractual	223,578		223,578	149,052	692,394	543,342	365%
Capital Outlay	10,420		10,420	6,947	-	(6,947)	-100%
Cost Allocations	200,505	-	200,505	133,670	120,089	(13,581)	13%
Total Expenses	6,294,818	-	6,294,818	4,196,546	4,367,151	170,605	4%
Net Position YTD	(0)	-	(0)	(0)	(44,882)	(44,881)	

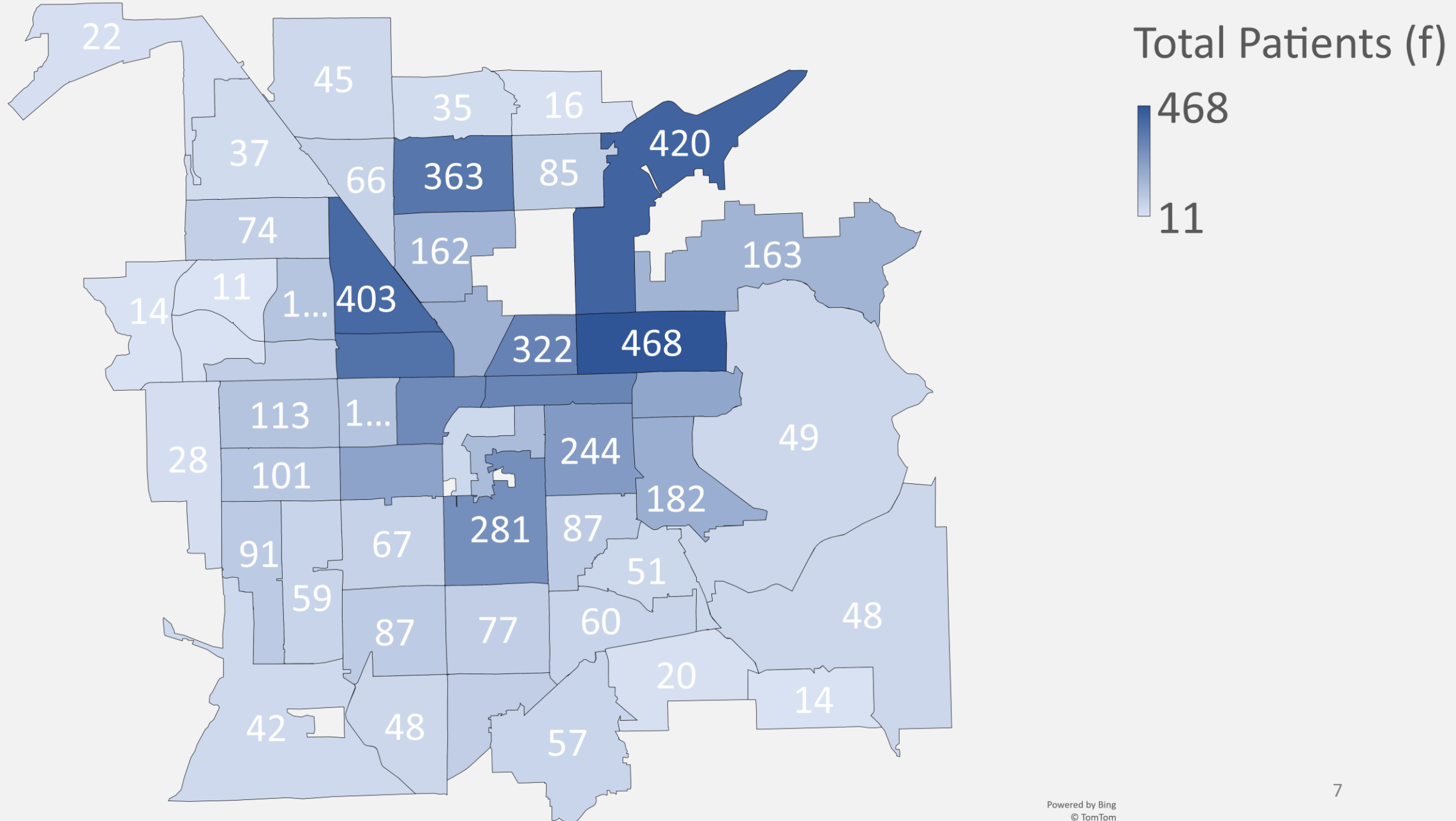
UDS 2021 – Patients Per Zip Code

FQHC Locations with Assigned Service Area Zip Codes

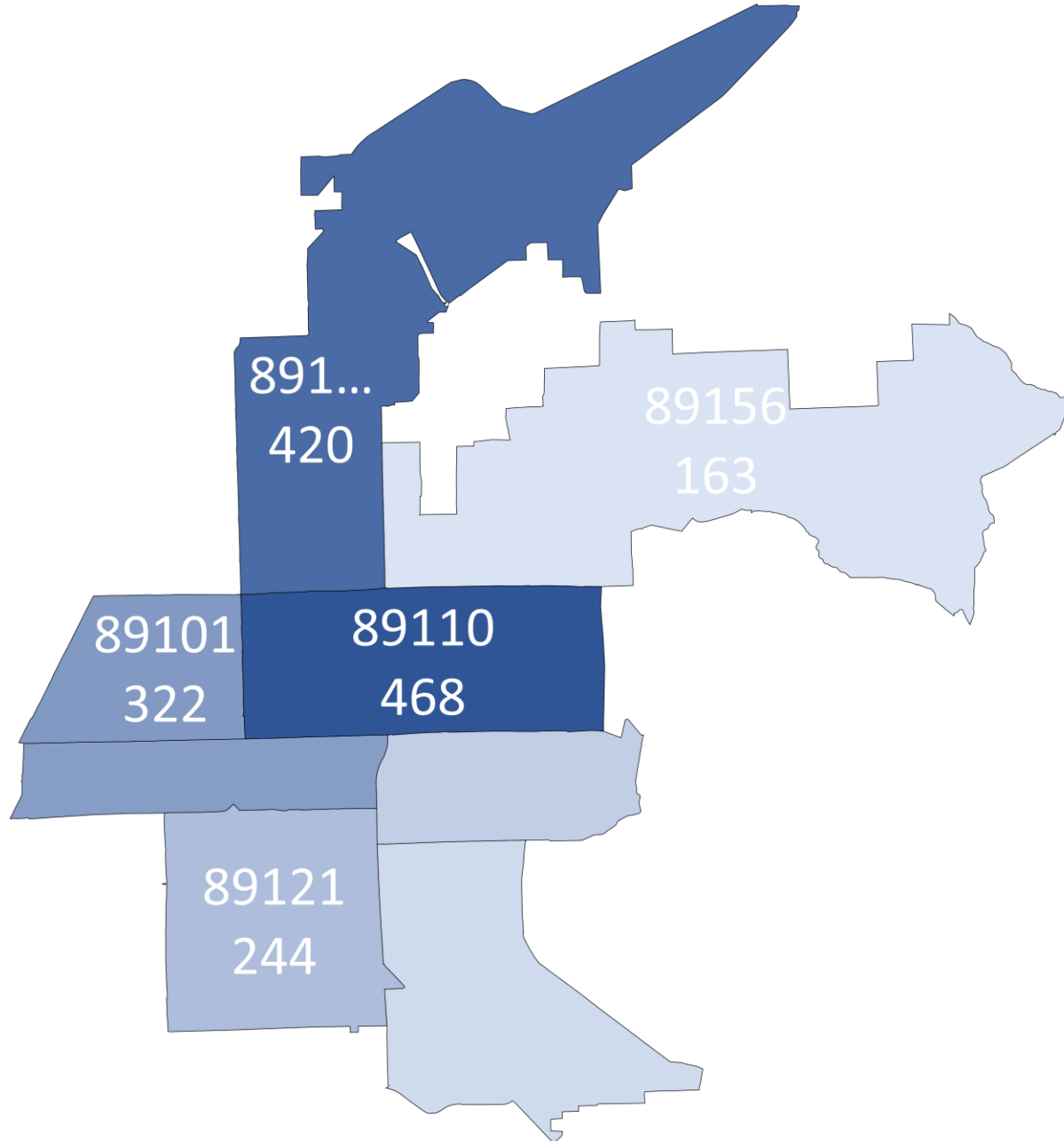
- The FQHC’s two locations assigned service areas provide services to 81% of the FQHC’s total patients in calendar year 2021
- Less than 20% of total patients live outside of the assigned service areas – or – did not provide information

Zip Codes Assigned Location, Per Table 5B	Total Patients Per Location		
Bonanza	2,320	2,320	32.91%
Main	3,405	3,405	48.30%
Not Included	1,325		
Grand Total	7,050		
<i>FQHC Assigned Service Area</i>		5,725	81.21%

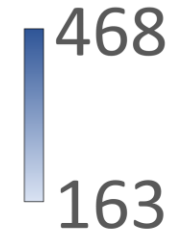
All Zip Codes Captured by SNHD in Calendar Year 2021



Bonanza - Patients Per Zip code

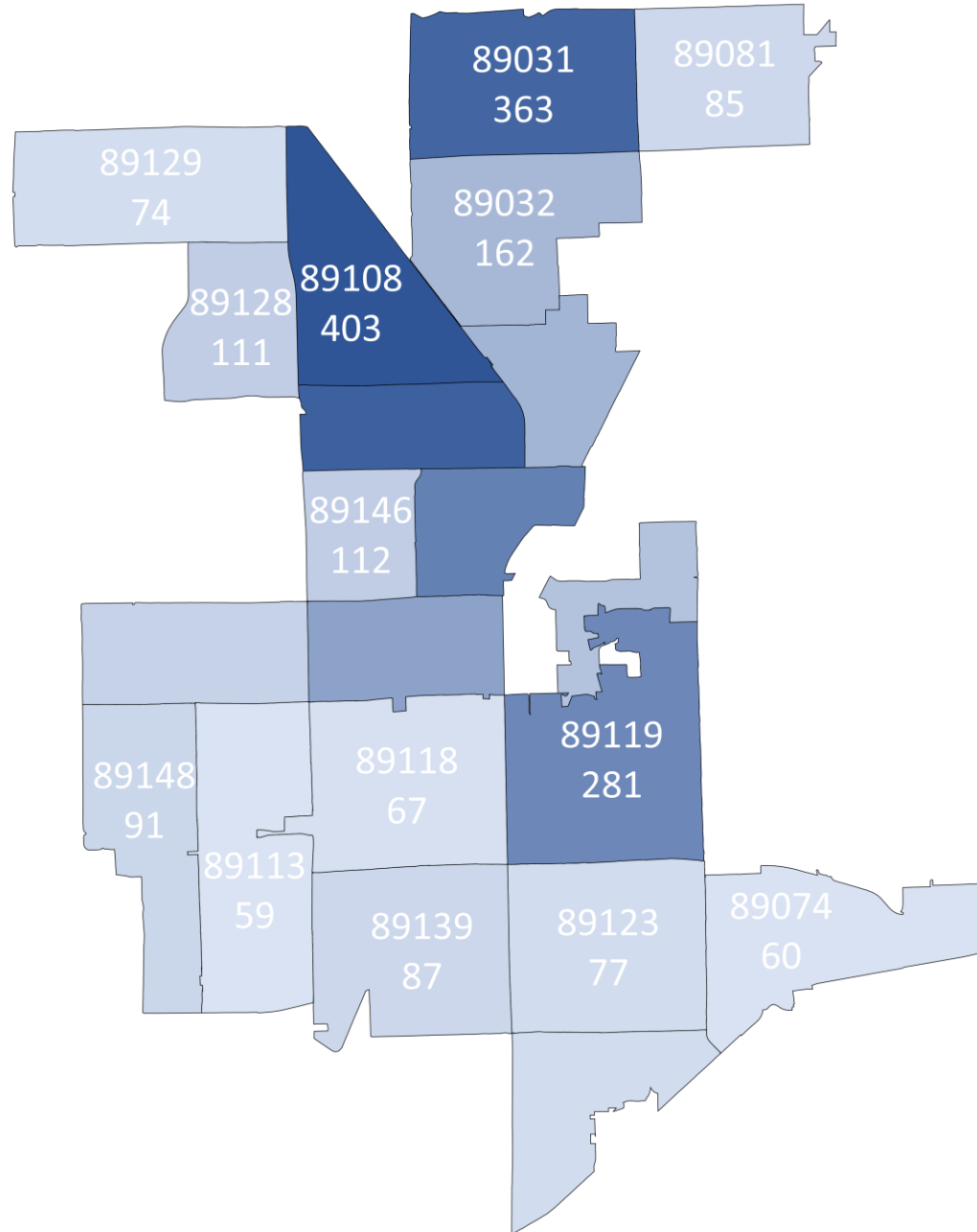


Total Patients (f)

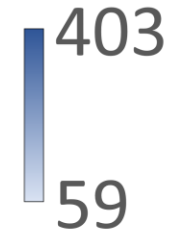


Zip Codes Assigned	Total Patients (f)
89101	322
89104	313
89110	468
89115	420
89121	244
89122	182
89142	208
89156	163
	2320

Main Location - Patients Per Zip Code



Total Patients (f)



Zip Codes Assigned	Total Patients (f)
89031	363
89032	162
89074	60
89081	85
89102	297
89103	216
89106	171
89107	374
89108	403
89113	59
89118	67
89119	281
89123	77
89128	111
89129	74
89139	87
89146	112
89147	101
89148	91
89169	137
89183	77
Total	3405

Wrap Up

- Questions????





March 24, 2022
Request for Board Approval

New East Las Vegas Location

SNCHC Staff is requesting Board approval to begin HRSA's application process for a change in scope to add 2830 E. Fremont St., Las Vegas, NV 89104 as a permanent site with full scope of services.



Geography

► Zip Codes assigned to SNCHC that will be impacted are:

89030

89101

89104

89110

89115

89121

89122

89142

89156

UDS Mapper

HOME ABOUT

Main Maps

Choose a main map below to show either UDS data on health center patients, or total population (not just patient) statistics

Begin by selecting a topic:

Population Data UDS Data

Select Health Center Type

Awardees Look-Alikes Combined

Select an Indicator

No Main Map Selected

Penetration

Percent Change

Health Center Characteristics

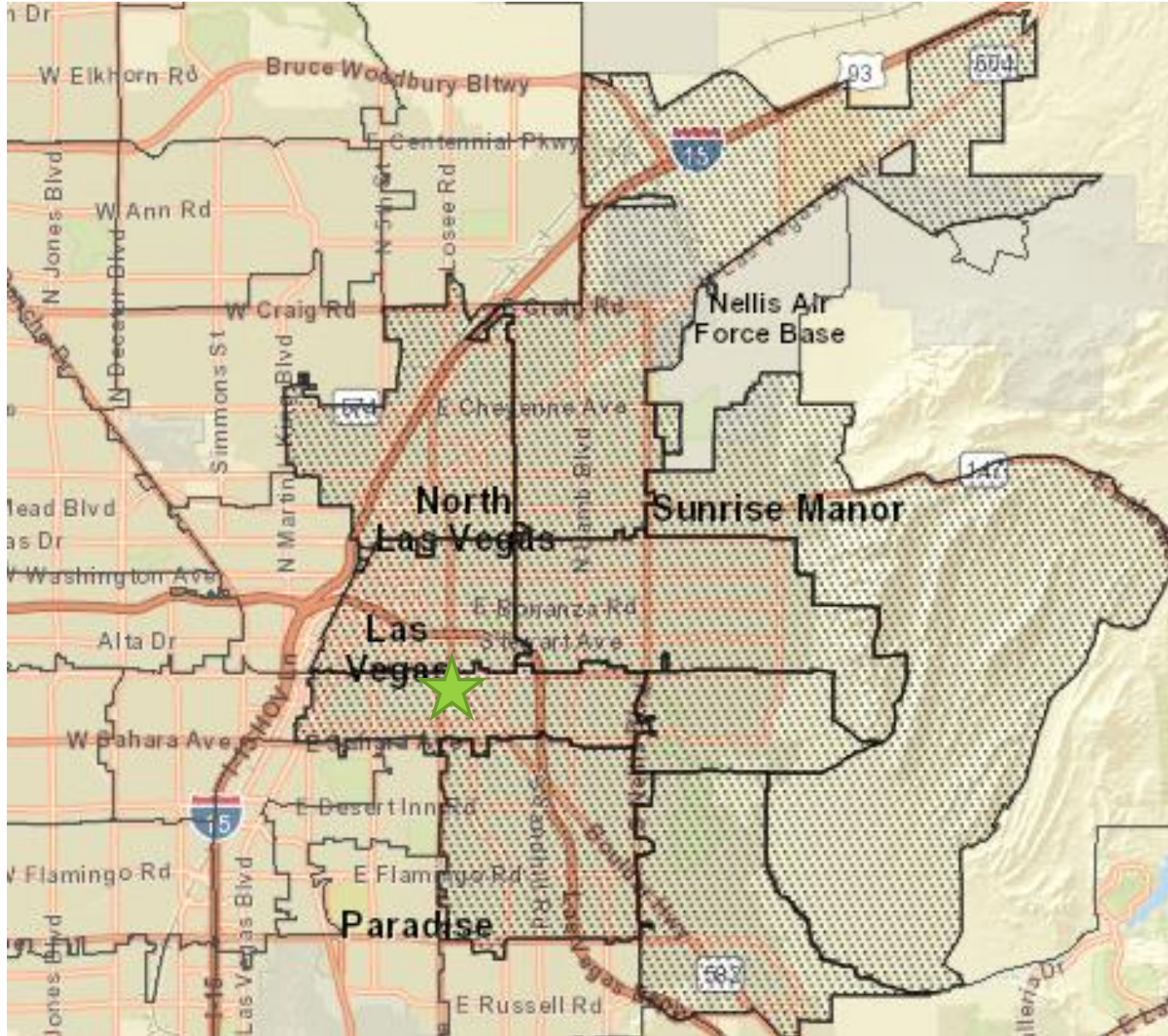
Not Served by Health Centers

Patient Mix

Not Served (Dot Density)

Office Location

- ▶ 2830 Fremont Street, Las Vegas, NV 89104



Population Demographics According to HRSA's UDS Mapper

- ▶ Population of 444,250
 - ▶ 23.3% Poverty
 - ▶ 51.5% Low Income
 - ▶ 62.7% Uninsured and Living Below 200% of The Federal Poverty Level
 - ▶ 76.8% Racial/Ethnic Minority
 - ▶ 54.6% Hispanic
 - ▶ 26.8% on Medicaid
- ▶ Health Center Penetration - 4.73% - Only 4.73% of the population are currently using Health Center services.

Timeline

- ▶ Construction should be completed in June
- ▶ Working toward a June start.
 - ▶ HRSA application to be submitted before April 30th.
 - ▶ Approval should come in May to begin services starting in June
 - ▶ Hours of Operation to mirror Decatur
 - ▶ Monday - Thursday: 8 AM to 6 PM; Friday: 8 AM - 4:30 PM
 - ▶ At some point with the new Alternate Work Schedules being rolled out in April, we will likely put in a request to stay open till 6 PM on Fridays also to provide even more availability each week for patients to access care.

Services to Be Offered

- ▶ Primary Care
- ▶ Family Planning
- ▶ Ryan White
- ▶ Infectious Disease
- ▶ Behavioral/Mental Health
- ▶ VFC and Private Immunizations
- ▶ PEP & PrEP
- ▶ 340b Pharmacy
- ▶ Dental

New East Las Vegas Location

Will the Board consider approving SNCHC Staff to begin HRSA's application process for a change in scope to add 2830 E. Fremont St., Las Vegas, NV 89104 as a permanent site with full scope of services.



Questions





March 24, 2022
Request for Board Approval



SOUTHERN NEVADA
Community
HEALTH CENTER

March 24, 2022
Operational Report
for Feb 2022

Health Resources and Services Administration (HRSA) Awards

- ▶ New Access Point (NAP) Grant period was through 10/31/2020.
- ▶ Service Area Competition (SAC) Grant was awarded through 1/31/2024.
 - ▶ Noncompeting Continuation submitted and approved through 1/31/2023

January 2022 Patient Counts

- ▶ SNCHC conducted 892 visits by HRSA's definition in February 2022.
- ▶ The no show rate for February 2022 including cancellations was 25.97%, which is slightly lower than national Health Center averages.



Eligibility Assistance

- ▶ In 2022 The Health Center has a 63.4% conversion rate of patients who were referred to Eligibility services, whose insurance, food, housing, and hardship benefit applications were successfully submitted versus the 54.3% conversion rate of 2021.



Patient Satisfaction Survey Highlights

- ▶ 10.02% of patients seen conducted a satisfaction survey in February 2022:
- ▶ How did you hear about us?
 - ▶ Friends and/or family - 55.55%
 - ▶ Referral from another provider or resource - 22.7%
 - ▶ Search engine (e.g. Google) - 7.0%
 - ▶ SNHD website - 8.6%
 - ▶ Social media - 1.6%
 - ▶ Other ads - 4.7%



Patient Satisfaction Survey Highlights

Ease of scheduling an appointment

- 92.2% Positive
- 7.0% Average
- 0.8% Poor

Wait time to see provider

- 93.88% Positive
- 4.7% Average
- 1.6% Poor

Care received from providers and staff

- 100% Positive
- 0% Average
- 0% Poor

Understanding of health care instructions following your visit

- 97.6% Positive
- 2.3% Average
- 0% Poor

Recommendation of our health center to friends and family

- 95.3% Positive
- 4.7% Average
- 0% Poor

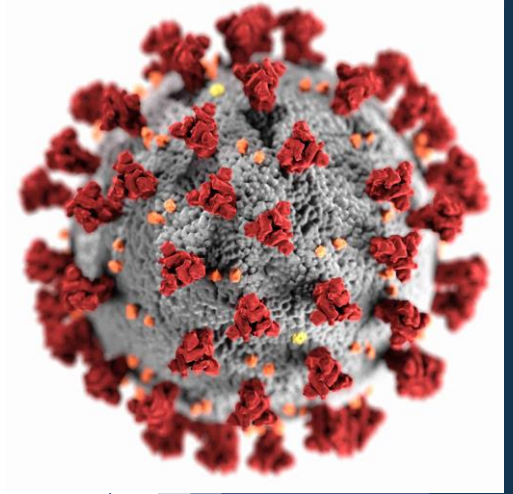


*97.7% Overall
Patient Satisfaction rating
for February 2022*

COVID Update

► Updates include:

- ARPA Funding for Health Centers (President Biden's American Rescue Plan Act through his Health Center COVID-19 Vaccination Program.)
 - Offering J&J, Moderna, and Pfizer - Monday through Friday
- Since May 3, 2021, SNCHC has administered 39,403 doses of COVID-19 vaccine.
 - In February 2022, 1,630 doses were administered, 338 of which were for pediatric patients aged 5-11.
- SNCHC has conducted a grand total of 86,816 COVID-19 tests since the pandemic began in April of 2020.
 - 2,240 COVID-19 tests were conducted in February 2022
 - Positivity Rate in February was 21.65%
- SNCHC is participating in a new anti-viral medication program also to treat COVID in patients age 65+ and/or patients with co-morbidities at higher risk who are symptomatic. - 23 Patients have participated.
- SNCHC distributed 4,000 face masks, 2,265 at home rapid COVID test kits to the community, and just began distributing N95 masks as well.



Funding Opportunity Updates

Applications in Process for Funding Opportunities include:

- ▶ Ryan White Capacity Building for Telehealth (\$150,000) - **Granted**
- ▶ FPNV_22 - Family Planning Nevada (\$450,000 each yr. for 2 yrs.) - **Granted**
- ▶ HCNAP Noncompeting Continuation for 2022 (\$650,000) - **Granted**
- ▶ HCNAP_PCHP Amendment 2022 (\$289,667)- **Granted**
- ▶ ARPA Health Center COVID-19 Vaccine grant from April 2021 through March of 2023 (\$2,826,500) - **Granted**
- ▶ ARPA Capital/Construction (\$600,474) - **Granted**
 - ▶ BH/MH Buildout and ELV was removed
- ▶ Health Plan of Nevada Community Catalyst - (\$187,500) - **Granted**
 - ▶ **NCE Granted & 187,500 of new funding for 2022 Awarded**
- ▶ Ryan White B - Case Mgmt and NM Case Mgmt - **Granted**
- ▶ HCNAP_21 NCE - Carryover from 2021 - (\$360,602) - **Granted**
- ▶ Title X 2022 through 2027 (\$98,000,000) - **grant submitted pending decision**
- ▶ Title X Telehealth Grant (\$700,000) - **grant submitted pending decision**
- ▶ FP NCE - **grants submitted pending decisions**
- ▶ Ryan White Renewal 2022 - 2025 (Amount TBD) - **grant writing in process - due 4/5**



Other Updates

▶ Updates include:

- ▶ CIS was approved by HRSA to bring Interim ELV into the full scope of SNCHC services.
 - ▶ ELV Relocated to Bonanza until new Fremont location opens in June
 - ▶ Oral Health Infrastructure to begin later this year in collaboration with UNLV School of Dental Medicine
- ▶ CIS for ELV- Fremont is up for Board approval to begin the application process.
 - ▶ If approved, the application process will begin immediately with a tentative opening date of the end of June
- ▶ OSV Preparations
- ▶ North Las Vegas Community Correctional Center, and the Deputy City Attorney of the City of Las Vegas
 - ▶ Bus passes and care coordination - possibly a new Uber/Lyft agreement coming to also provide support.
 - ▶ Now in talks with Lyft and Uber for more direct transportation services
- ▶ HPN is partnering with SNCHC to improve Women's Health among minorities.
 - ▶ R.E.A.C.H. (REACH is Research Education and Access for Community Health) identified as a new subgrantee and community partnership to help SNCHC and HPN connect to the Hispanic community and rural areas in need.
- ▶ Grant Deliverables, Reporting, Spend downs, Amendments, Closeouts, and grant management for Title X, FPNV, COVID, Ryan White, Primary Care, UDS collection and reporting, Ending HIV Epidemic, and Mobile Clinic activities are all ongoing.
- ▶ UDS Report Submission was due Feb 15th but submitted on Feb 11th; HRSA Reviewer sent inquiries which were answered and returned. Full 2021 UDS Submission was accepted by HRSA on 3/9/22.
- ▶ Alternate Work Schedules being offered to the team starting April 4th.



Behavioral Health Update

Where We Are

- ▶ Have one Psych APRN for light counseling, medication management and Medication Assisted Treatment
- ▶ Hired an LCSW- credentialing is under way, but she is seeing self-pay pts, and we are converting insured pts into self-pay when they need the services now.
- ▶ Referring Patients out when we cannot offer services needed.
- ▶ Second LCSW was interviewed and extended an offer, which was accepted.
 - ▶ New LCSW's name is Krystin Rose, LCSW. She will start with SNCHC on April 18th.
- ▶ Second Psych APRN has been identified for hire when patient demand requires.
- ▶ Still recruiting for a Psychiatrist.
- ▶ Office Space may become an issue, but we are collaborating with other departments to make room for therapy services.
 - ▶ Grant application for a construction buildout for Behavioral Health Center was amended and resubmitted.
- ▶ Staff training is ongoing.
- ▶ 6 Providers now DATA Waived, and MAT trained to manage pts with substance abuse needs.



Public Education Campaign Plans for 2022

- ▶ Transit – \$25,000
- ▶ Digital Billboards – \$40,000
- ▶ Door hangers – \$2,000
- ▶ Rack cards – \$4,000
- ▶ Sanitizer wipes and hand sanitizer stations – \$22,500
- ▶ Meadows Mall ads – \$8,740
- ▶ Las Vegas Review-Journal – \$40,000
- ▶ El Tiempo – \$10,000
- ▶ SNCHC – half page \$500 x 10 Wednesday insertions = \$5,000
- ▶ FPC – half page \$500 x 10 Wednesday insertions = \$5,000
- ▶ Pull-up banners Assorted topics – \$1,000
- ▶ Posters - Assorted topics – \$1,000
- ▶ Google Search Ads - \$10,000
- ▶ Google Display Ads \$10,000
- ▶ Social Media Ads - \$25,000



Questions








SOUTHERN NEVADA
Community
HEALTH CENTER

March 24, 2022
Operational Report
for Feb 2022

Memorandum

Date: March 24, 2022

To: Southern Nevada Community Health Center Governing Board

From: David Kahananui, FQHC Senior Manager 
Cortland Lohff, MD, Chief Medical Officer, Director of Primary & Preventive Care 
Fermin Leguen, MD, MPH, District Health Officer 

RE: COMMUNITY HEALTH CENTER FQHC OPERATIONS OFFICER REPORT - February 2022

Division Information/Highlights: The Southern Nevada Community Health Center (SNCHC), a division of the Southern Nevada Health District (SNHD), mission is to serve residents of Clark County from underserved communities with appropriate and comprehensive outpatient health and wellness services, emphasizing prevention and education in a culturally respectful environment regardless of the patient's ability to pay.

February Highlights:

- Administrative:
 - Submission of HRSA UDS Report initially submitted on 2/11/2022, inquiries from the HRSA reviewer were received on 2/26/22, then responses to HRSA Reviewer Inquiries sent back on 3/7/2022 and the Final Submission was accepted by HRSA on 3/9/22.

COVID-19 Vaccine Clinic Facility: COVID-19 Response

- NCS Facility was converted into a Health Center COVID-19 vaccination clinic on May 2021
 - To date, the health center has administered 39,403 COVID-19 vaccinations.

I. HIV / Ryan White (RW) Program:

- A. The HIV/Medical Case Management (MCM) program received 10 referrals in December. There were 2 pediatric clients and 2 pregnant women living with HIV were referred to the program.
- B. There were 238 visits for the Ryan White Program: There were 10 initial provider visits, 102 established provider visits, 18 nurse visits and 102 lab visits in the month of February. There were 8 Ryan White clients seen for Behavioral Health; by either the Licensed Clinical Social Worker (LCSW) or the Psychiatric Advanced Practice Registered Nurse (APRN).
- C. The Ryan White Program continues to implement the Rapid stART project, which has a goal of rapid treatment initiation for newly diagnosed patients with HIV. The program continues to receive referrals and accommodate clients on a walk-in basis.

D. The Ryan White Program dietitian continues to provide medical nutritional therapy.

II. Family Planning (FP):

A. FP Program services at East Las Vegas and Decatur Public Health Centers served 218 clients; 366 of them were unduplicated.

B. The East Las Vegas Family Planning Clinic served 156 clients; 152 of them were unduplicated.

C. The Decatur Family Planning Clinic served 221 clients; 214 of them were unduplicated.

III. Family Health (FH):

A. FH providers saw 361 patients in the month of February.

B. 31 patients were under the age of 18.

C. 23 were from the Refugee Health Clinic.

IV. Pharmacy Services:

A. Dispensed 1,379 prescriptions for 1,068 clients.

B. Pharmacist assessed/counseled 29 clients in clinics.

C. Assisted 16 clients to obtain medication financial assistance.

D. Assisted 8 clients with insurance approvals.

IV. Eligibility Case Narrative and Eligibility Monthly Report:

Eligibility Monthly Report		
February 2022		
Total number of referrals received	41	
Total number of applications submitted	Medicaid/SNAP/TANF: 25	Hardship: 1

☛ Eligibility support continues to increase with new operational adjustments.

- Recruitment continues for additional Eligibility Workers to help convert uninsured patients to insured patients.

☛ In 2021 Eligibility submitted 348/639 assistance applications or 54.46% of patients starting the application process.

☛ This year, 26/41 of the applications started were successfully submitted, or a conversion rate of 63.4%.

☛ Eligibility services is offered to patients at our East Las Vegas Center, Decatur Center, Mobile Unite, Community Events, and the Vaccine Center.

V. Refugee Health Program:

A. The Refugee Health Program provided services to 56 patients in February.

VI. Quality & Risk Management:

Quality:

COVID-19 Testing:

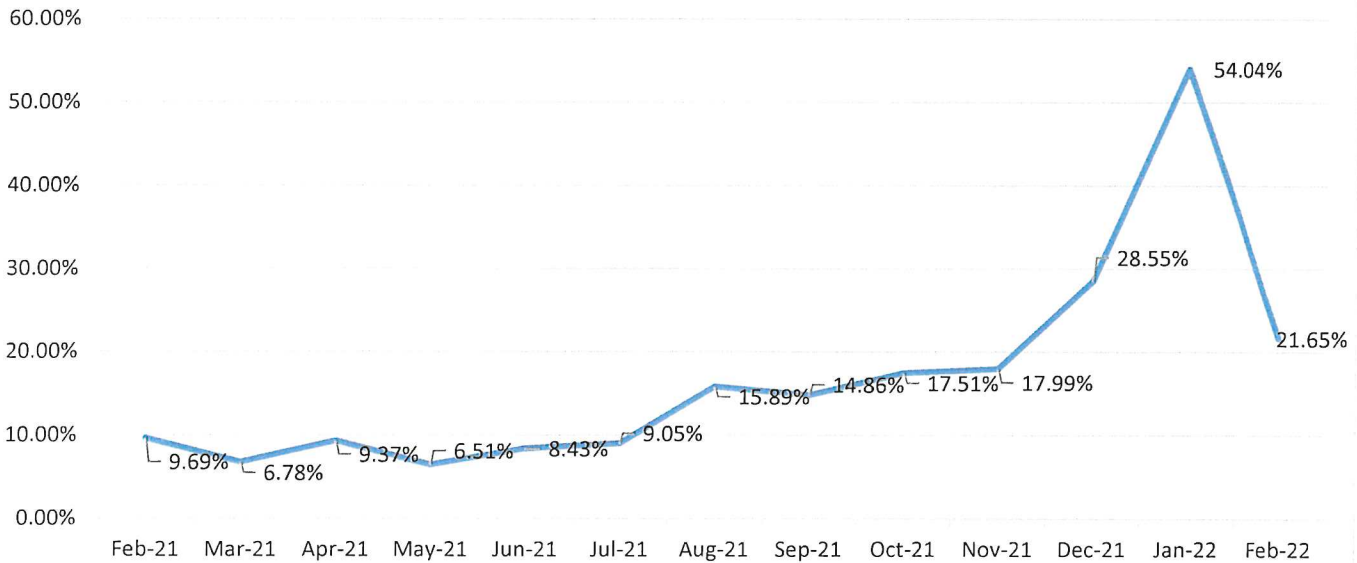
April 2020 to February 2022, SNCHC completed 86,816 COVID-19 tests. In February 2,240 tests were conducted, with a reduction in the positive rate to 21.65%.

The SNCHC and the SNHD continue to encourage those experiencing symptoms to remain at home, or if they have been in close contact with a person who is COVID-19 positive or think they have been exposed; they should be tested. SNCHC and SNHD also encourages the public to get the COVID-19 vaccine.

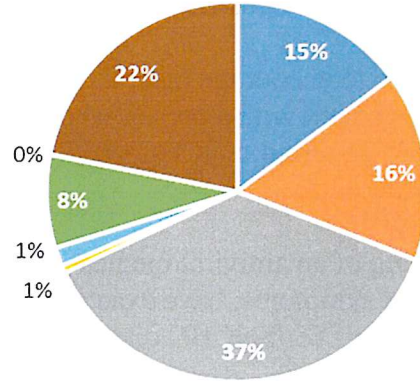
SNCHC is participating in dispensing of an antiviral medication for patients who test positive, who have fewer than five (5) days of symptoms, have exacerbating health conditions and comorbidities, and/or are over the age of 65. SNCHC dispensed the antiviral medication to 11 patients in February.

SNCHC was also chosen to participate in the Federal N95 mask distribution program and we have received started distributing the masks.

Southern Nevada Community Health Center
COVID-19 Positivity Rates
Last 13 Months

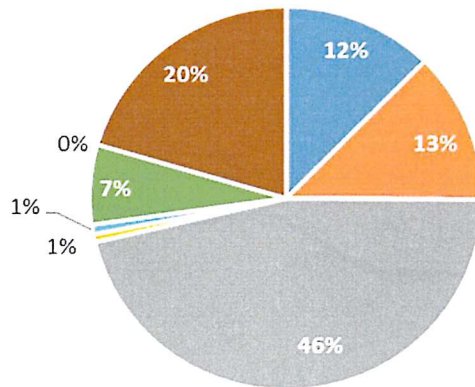


Southern Nevada Community Health Center
COVID-19 Testing by Race and Ethnicity (Negative Result)
Feb 2022



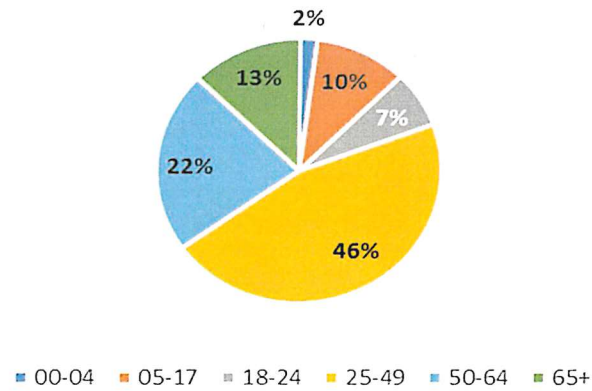
- Asian
- Black/African American
- Hispanic
- Native American
- Native Hawaiian/Pacific Islander
- Other
- Unknown
- White/Caucasian

Southern Nevada Community Health Center
COVID-19 Testing by Race and Ethnicity (Positive Result)
Feb 2022

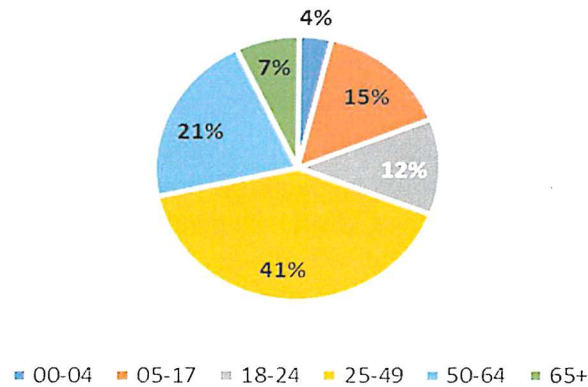


- Asian
- Black/African American
- Hispanic
- Native American
- Native Hawaiian/Pacific Islander
- Other
- Unknown
- White/Caucasian

Southern Nevada Community Health Center
COVID-19 Testing by Age Group (Negative Result)
Feb 2022



Southern Nevada Community Health Center
COVID-19 Testing by Age Group (Positive Result)
Feb 2022



COVID-19 Vaccine Program:

The Southern Nevada Community Health Center began administering the COVID-19 vaccine in May 2021, as part of HRSA’s COVID-19 Vaccine Program. The vaccine site is located at the SNHD main location inside the NCS Building. Through the end of February, SNCHC has administered 39,403 doses of COVID-19 vaccine in Southern Nevada

Calendar	Year																	
	2022																	
Total Doses Administered Overall-			5483															
	First Doses		Second Doses			Third Doses			Booster Doses			Ped (Age 5-11) 1st Dose			Ped (Age 5-11) 2nd Dose			Totals
	Pfizer	Moderna	Pfizer	Moderna	Janssen	Pfizer	Moderna	Janssen	Pfizer	Moderna	Janssen	Pfizer	Moderna	Janssen	Pfizer	Moderna	Janssen	
Jan-22	300	64	305	70	92	22	8		1441	698	108	366			379			3853
Feb-22	153	33	237	58	50	7	3		508	195	48	91			247			1630
Mar-22																		0
Apr-22																		0
May-22																		0
Jun-22																		0
Jul-22																		0
Aug-22																		0
Sep-22																		0
Oct-22																		0
Nov-22																		0
Dec-22																		0
Total	453	97	542	128	142	29	11	0	1949	893	156	457	0	0	626	0	0	5483

2022	Company	Pfizer	Moderna	Janssen	ALL
Totals		4056	1129	298	5483
		73.97%	20.59%	5.43%	

Overall	Company	Pfizer	Moderna	Janssen	ALL
Totals		26563	9778	3062	39403
		67.41%	24.82%	7.77%	

Telehealth:

The Health Center saw 39 patients via telehealth, or 2.92% of the patients that were seen in February. The Health Center implemented telehealth following the need for modified clinic operations as we continue to navigate the COVID-19 pandemic. The goal of the Health Center is to continue fulfilling its mission to provide safe, quality healthcare to the community amid the COVID-19 public health emergency. Health Center patients are seen by providers via audio (telephone) and video via Healow, an app by eClinicalWorks. Telehealth will continue to be offered, even following the COVID-19 pandemic.

SNCHC Visits:

There were 1,336 patient visits to the Health Center in February. There was a 4.34% cancellation rate that factored into February's 25.97% no-show rate.

Risk Management

Health Insurance Portability and Accountability Act (HIPAA):

There were no HIPAA breaches at the Health Center in February.

Exposure Incidents:

There were no exposure incidents at the Health Center in February.

Medical Events:

There were three medical events at the Health Center in February. All three events were handled appropriately by the clinical staff and closed without issue.

Patient Satisfaction:

The Health Center received 134 patient satisfaction surveys in February. Overall survey completion 94.8%. Breakdown

- Family Health: 49.2%
- Family Planning: 18.8%
- Ryan White: 32.0%

Approximately 10.02% of patients seen at the Health Center in February took the patient satisfaction survey. Overall Satisfaction rating for February was 97.7%

The Health Center received generally favorable responses from survey participants when asked about ease of scheduling an appointment, wait time to see their provider, care received from providers and staff, understanding of health care instructions following their visit, hours of operation, and recommendation of the Health Center to friends and family.

SNCHC Patient Satisfaction Survey:

1. Service received during your visit?

- ☒ 49.2% Family Health
- ☒ 18.8% Family Planning
- ☒ 32.0% Ryan White

2. Southern Nevada Health District (SNHD) location?

- ☒ Main: 100%
- ☒ East Las Vegas: 0.00%

3. Do you have health insurance?

- ☒ Yes – 63.3%
- ☒ No – 36.7%

4. How long have you been a patient at the Southern Nevada Health District/Southern Nevada Community Health Center?

- ☒ Less than 6 months – 42.2%
- ☒ 6 months to a year – 12.5%
- ☒ 1-3 years – 35.2%
- ☒ 3-5 years – 9.4%
- ☒ 5+ years – 0.8%

5. How did you hear about us?

- 📊 Friends and/or Family – 55.55%
- 📊 Referral from another Provider/Resource – 22.7%
- 📊 Search Engine (e.g. Google) – 7.0%
- 📊 SNHD Website – 8.6%
- 📊 Social Media – 1.6%
- 📊 Other Ads – 4.7%

6. Ease of scheduling an appointment? – 92.2% Positive

- 📊 75.07% Excellent
- 📊 17.2% Good
- 📊 7.0% Average
- 📊 0.8% Poor

7. Wait time to see provider? – 93.88% Positive

- 📊 68.88% Excellent
- 📊 25.0% Good
- 📊 4.7% Average
- 📊 1.6% Poor

8. Care received from providers and staff? – 100% Positive

- 📊 79.7% Excellent
- 📊 20.3% Good
- 📊 0% Poor

9. Understanding of health care instructions following your visit? – 97.6% Positive

- 📊 78.1% Excellent
- 📊 19.5% Good
- 📊 2.3% Average
- 📊 0% Poor

10. Hours of operation? – 96.9% Positive

- 📊 63.3% Excellent
- 📊 33.6% Good
- 📊 1.6% Average
- 📊 1.6% Poor

11. Recommendation of our health center to friends and family? – 95.3% Positive

- 📊 82.8% Extremely Likely
- 📊 12.5% Somewhat Likely
- 📊 4.7% Neutral



Health Center Visit Report Summary: February 2022
 Southern Nevada Community Health Center

Completed Pt

	Provider Visits	Cancelled Visits	No Show Visits	Audio Visit		Telehealth Visits		Total Scheduled Patients
				32	82.05%	2	5.13%	
Family Health Clinic	361 #REF!	32 2.40%	125 9.36%	32	82.05%	2	5.13%	552 41.32%
Behavioral Health Clinic	#REF!	0.00%	0.00%		0.00%		0.00%	0 0.00%
Family Planning Clinic	218 #REF!	6 0.45%	78 5.84%	1	2.56%		0.00%	303 22.68%
Refugee Clinic	56 #REF!	6 0.45%	8 0.60%		0.00%		0.00%	70 5.24%
Ryan White	257 #REF!	14 1.05%	136 10.18%		0.00%	4	10.26%	411 30.76%
Totals	892 #REF!	58 4.34%	347 25.97%	33	84.62%	6	15.38%	1336 100.00%

DK:cgm