



Memorandum

Date: September 10, 2020

To: Southern Nevada District Board of Health

From: Alfred McGugin, MPA, FQHC Operations Officer *AM*
Fermin Leguen, MD, MPH, Acting Chief Health Officer *FL*

RE: COMMUNITY HEALTH CENTER FQHC OPERATIONS OFFICER REPORT

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

August Highlights:

- **Response to COVID-19**
 - Coordinating the efforts of the opening of the NCS North and South facilities
 - Collecting data from FQHC partners for point of care (POC) testing
 - Submitted FEMA NCS grant
- **Administrative**
 - Hiring of new FQHC Sr. Manager
 - Received HRSA quality award

I. HIV / Ryan White Care Program

- A. The HIV/Medical Case Management (MCM) program received 27 referrals between July 26th through August 31st. There was two pediatric case referred to the program and linked to UNLV Pediatric center for monitoring for HIV perinatal exposure. The program received any referral for pregnant women living with HIV.
- B. The Ryan White ambulatory clinic had a total of client visits. 277 visits; 16 audio visits, 21 Nurse visits and 92 lab visits in the month of August.
- C. The Ryan White clinic continues to implement the Rapid stART project which has a goal of rapid treatment initiation for newly diagnosed patients with HIV. The program continues to receive referrals and accommodate clients on a walk-in basis
- D. The Transitional Case Management (TCM) program education of inmates is currently on hold due to the COVID-19 pandemic. The program received 3 referrals from the Southern Desert Correctional Facility, who were linked to SNHC for HIV care. 1 client was previously educated in prison in a past quarter. There are on-going case management services for clients already enrolled in the program.



- E. The Ryan White program dietitian started providing medical nutritional therapy to clients during this period. 7 clients were screened for nutrition services.
- F. The Ryan White program Mental health APRN completed orientation and provided screening for mental health issues to 9 clients during this period.
- G. SAMHSA's Homeless and Housing Resource Network provided a training on Motivational Interviewing which was attended virtually by some RW staff. Some RW staff also attended the Adolescent Development Training presented by Essential Access Health and Nevada Primary Care Association.

II. Sexual Health Clinic (STD Care Services)

- A. The Sexual Health Clinic (SHC) completed 636 service encounters with 519 patients seen.
- B. The Sexual Health Clinic continues to refer clients for rapid start HIV treatment upon receipt of confirmed HIV positive results. Rapid HIV testing services are being offered to high risk clients with STD screening. HIV pre-exposure prophylaxis (PrEP), post-exposure prophylaxis (PEP) and Hepatitis infection treatment services continue to be offered in the Sexual Health Clinic.
- C. The Sexual Health Clinic conducts telehealth and audio visits to enhance clinic encounters. Some members of the sexual health clinic team are assigned to the COVID-19 testing site at SNHD and outreach testing sites in the community.
- D. The Sexual Health Clinic is in the process of recruiting to fill an RN vacant position.

III. Family Planning (FP)

- A. FP Program services at East Las Vegas and Decatur Public Health Centers served 405 clients; 387 of them were unduplicated.
- B. The East Las Vegas Family Planning Clinic served 228 clients; 220 of them were unduplicated.
- C. The Decatur Family Planning clinic served 177 clients; 167 of them were unduplicated.

IV. Family Healthcare Center

- A. The Family Health Care Clinic saw 176 patients in the month of August. Eleven patients were under age 18 and includes zero children from the Refugee Health Clinic. There were 165 patients age 18 or older.
- B. Immunizations were offered to those in need, according to the ACIP recommended Immunization schedule.

V. Pharmacy Services

- A. Dispensed 595 prescriptions for 501 clients.
- B. Assessed/counseled 20 clients in the Ryan White-Sexual Health Clinic.
- C. Assessed/counseled 11 clients in the Tuberculosis Clinic.



- D. Assisted 14 clients to obtain medication financial assistance.
- E. Assisted 3 clients with insurance approvals.

Eligibility Monthly Report			
August 2020			
Total number of referrals received	64		
Total number of no action-closed	17		
Total number of applications submitted	Medicaid/SNAP: 31	Hardship: 3	
Application Status			
Medicaid/SNAP Applications		Hardship Applications	
# of approvals	15	# of approvals	3
# of ineligible	7	# of denials	0
# pending cases	7	# of pending cases	0
# Medicaid ineligible; SNAP eligible	2		

Eligibility Case Narrative

eCW ID: 213573

55-year-old female established care at the Southern Nevada Community Health Center (SNCHC) in June 2020. Client was diagnosed with a condition that would require subsequent office visits for treatment and monitoring. Client expressed her inability to pay for the cost of the treatment/medications that she was prescribed for her condition. Client was screened for Medicaid eligibility during her initial office visit on 6/22/2020. Client was informed that at 253% FPL she was over income to qualify for Medicaid. I recommended that she apply for a financial hardship waiver, which would help to alleviate some financial strain, as the 75% discount would lower the cost of her office visits at SNCHC for 1 year. Client's financial hardship waiver request was denied by management in July 2020. The reason for the denial: Patient is above 250% FPL which does not warrant a hardship.

I received a second Medicaid referral on 8/4/2020 from an SNCHC case manager. Client informed me that she had received an increase in her salary, but she was still having trouble paying for her medications. The full out-of-pocket cost for the medication for an uninsured individual is \$89,712. Client requested assistance with applying for Medicaid to obtain a denial letter to meet eligibility requirements for a drug assistance program offered by the drug manufacturer. The manufacturer's assistance program covers 100% of the cost of the medication if the patient is ineligible for Medicaid. SNHD's pharmacy helps clients to apply for the assistance program and I was able to provide a copy of the denial letter to the pharmacy, on the client's behalf, to expedite processing. Although the client was ineligible for Medicaid, applying and receiving a denial has allowed the client to begin and/or continue her treatment without the financial worry about the cost of her medication.

Eligibility Worker: Kimberly Patterson



eCW ID: 187135

The patient came into the clinic to apply for the Financial Hardship Program, she informed me that she needs assistance to pay for her visits here at the Health District. I interviewed her for Medicaid assistance and based on her immigration status, she does not qualify for Medicaid benefits. She reported receiving \$518.00 from TANF, and it is not enough to cover all the expenses that her family has, at this moment. Also, her boyfriend is helping her to pay rent and utilities. The patient mentioned she was involved in domestic violence in 2015 and it is one of the reasons she is receiving TANF from DWSS. Also, I provided her with more resources for rent and utilities and organizations that offer a food pantry every week. I spoke with a social worker at the Lutheran Social Services to get more information about a non-profit organization that provides financial assistance for the patient.

Eligibility Worker: Juan Carlos Rodriguez

Quality Improvement

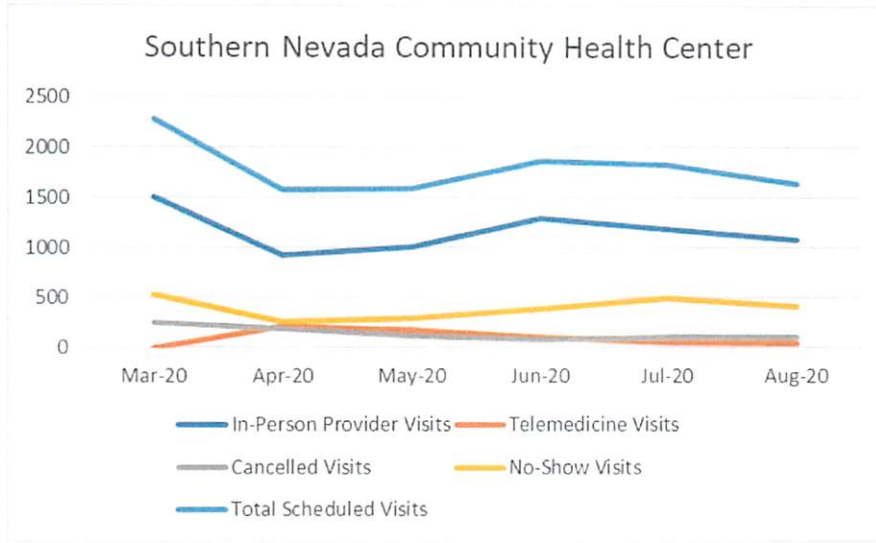
A crosswalk including Family Planning Annual Report (FPAR), Healthcare Effectiveness Data Information Set (HEDIS), HIV Quality Improvement (HIVQUAL), and Uniform Data System (UDS) performance measures has been created as we move forward with developing our Key Performance Indicators (KPI) dashboard and decision support function in eClinicalWorks (eCW). The Health Center will provide monthly updates on our quality improvement performance, promoting accountability and continuous improvement as we provide essential health care services to the community.

The Health Center, in response to the COVID-19 pandemic, moved up the implementation of telemedicine following the need for modified clinic operations. The goal of the Health Center was 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) or via Healow, an app by eClinicalWorks. Though patients can still be seen in-person, when medically appropriate, telemedicine is offered and encouraged to be utilized.

The following is a breakdown of telemedicine visit volume since implementation in April 2020:

- In the month of April, telemedicine saw 204 patients — 18.04% of Health Center visits.
- In the month of May, telemedicine saw 179 patients — 15.11% of Health Center visits and a 12.25% decrease over the month prior.
- In the month of June, telemedicine saw 106 patients — 7.56% of Health Center visits and a 40.78% decrease over the month prior.
- In the month of July, telemedicine saw 53 patients — 4.27% of Health Center visits and a 50% decrease over the month prior
- In the month of August, telemedicine saw 47 patients — 4.16% of patient visits, an 11.32% decrease over the month prior.

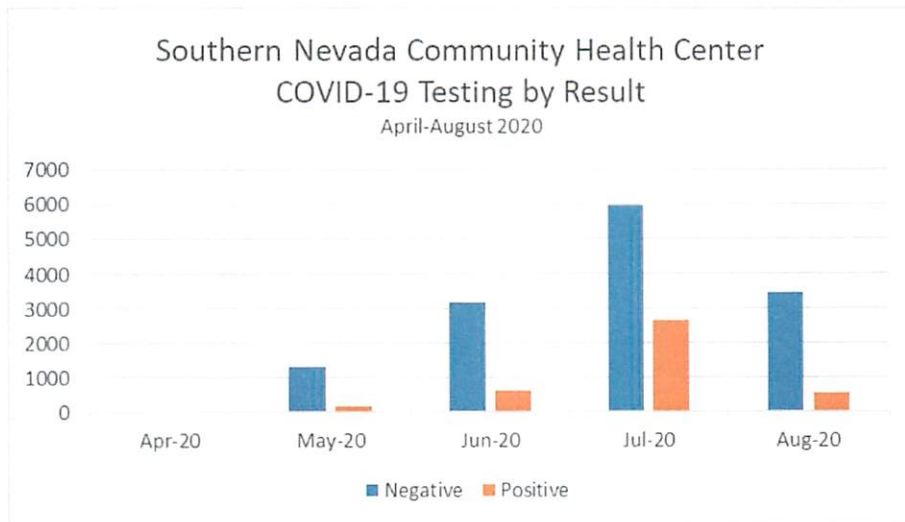
As with other health care organizations across the county and state, telemedicine visits have declined over the past 4 months. This is largely due to an increase in in-person patient visits following incremental phases to return to pre-COVID-19 operations.



Please see the Health Center’s patient satisfaction survey report for August 2020 attached.

COVID-19 Testing

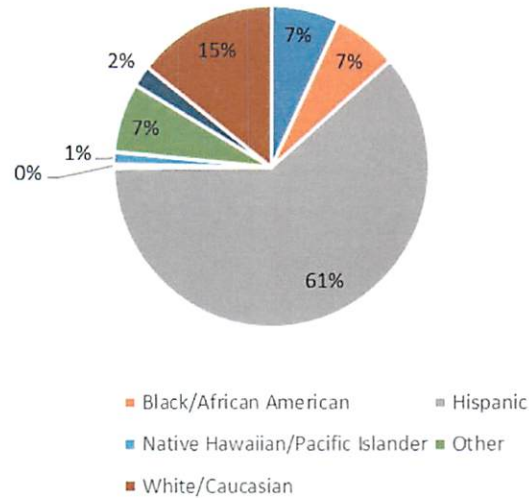
As of August 31, 2020, the Health Center has completed 18,088 COVID-19 tests.



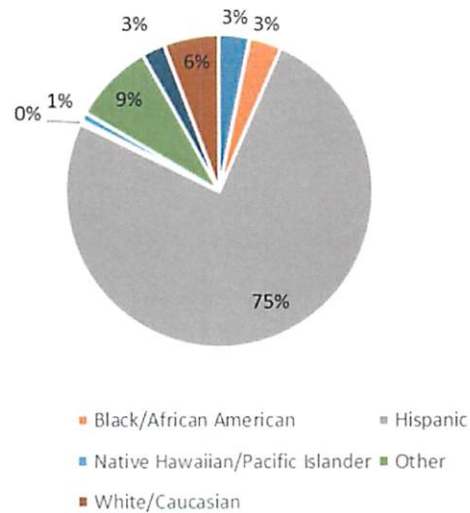
Positive Rates:

- April: 23.53%
- May: 11.8%
- June: 16.9%
- July: 30.79%
- August: 13.6%

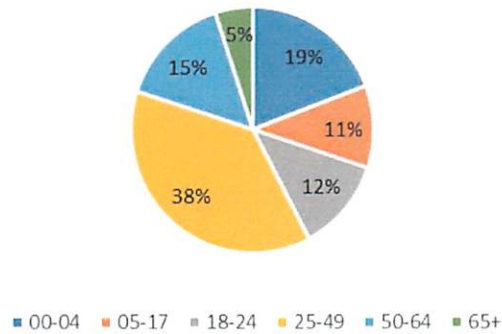
Southern Nevada Community Health Center
COVID-19 Testing by Race and Ethnicity (Negative Result)
April-August 2020



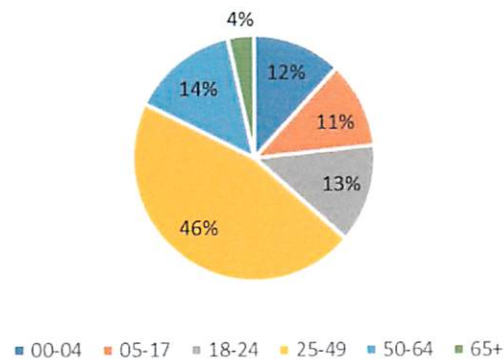
Southern Nevada Community Health Center
COVID-19 Testing by Race and Ethnicity (Positive Result)
April-August 2020



Southern Nevada Community Health Center
COVID-19 Testing by Age Group (Negative Result)
April-August 2020



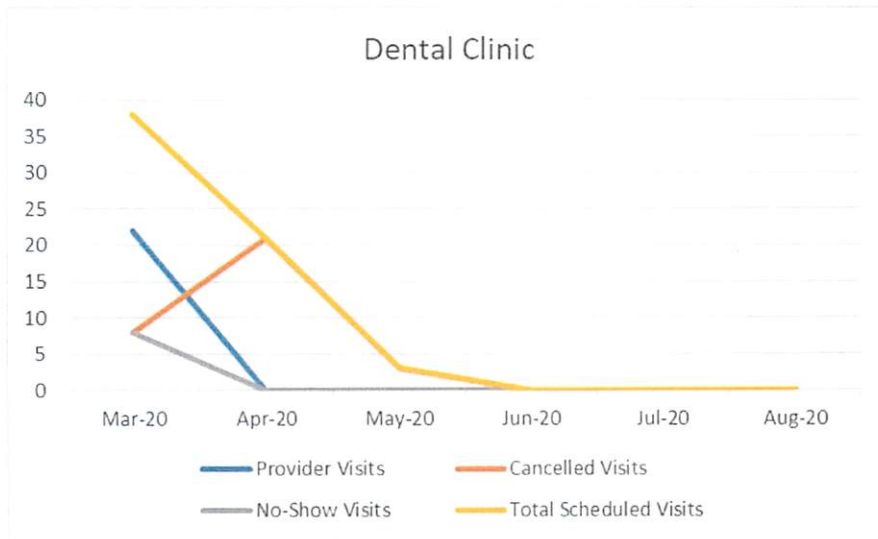
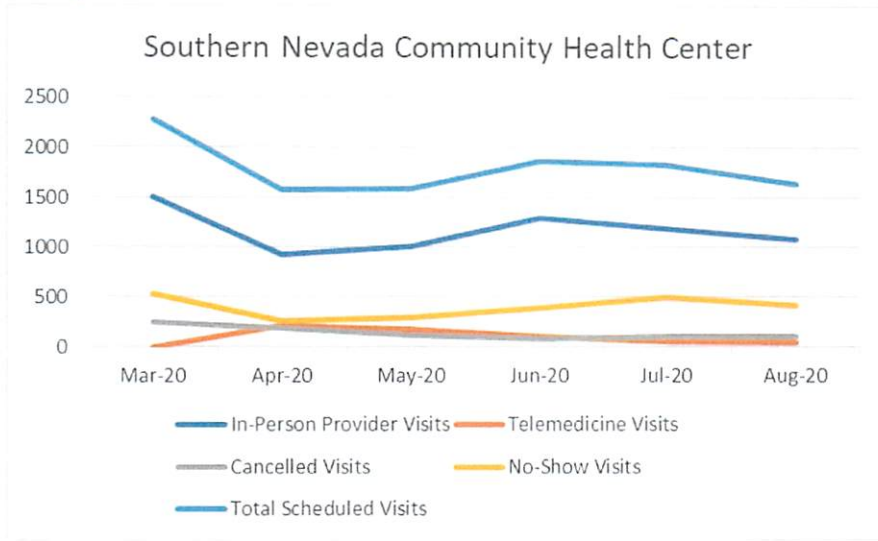
Southern Nevada Community Health Center
COVID-19 Testing by Age Group (Positive Result)
April-August 2020

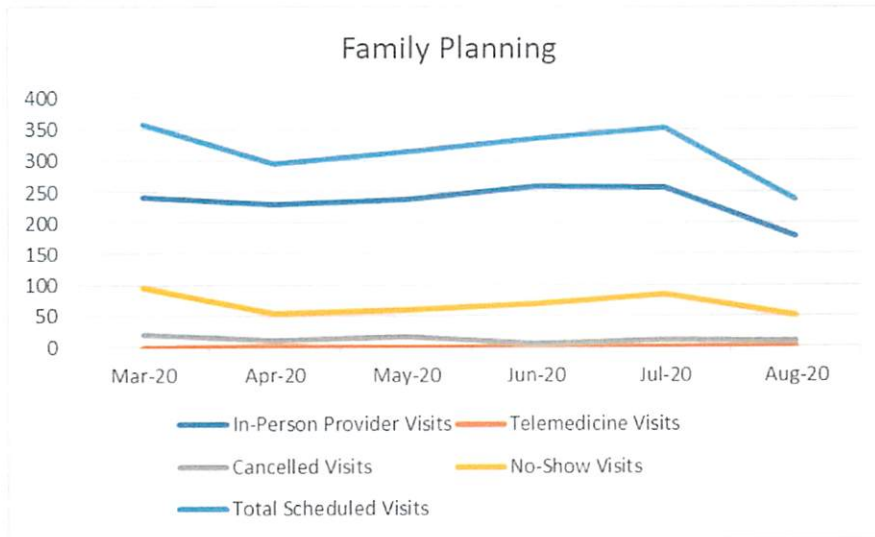
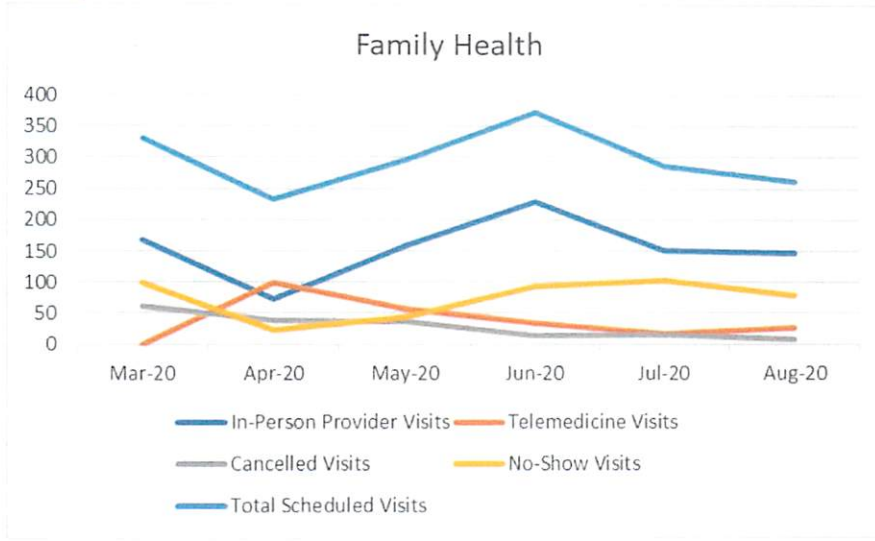


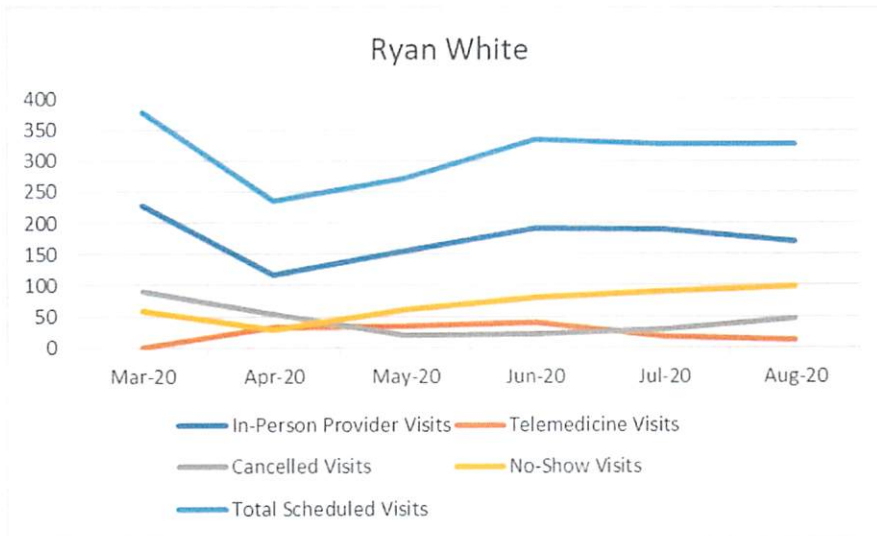
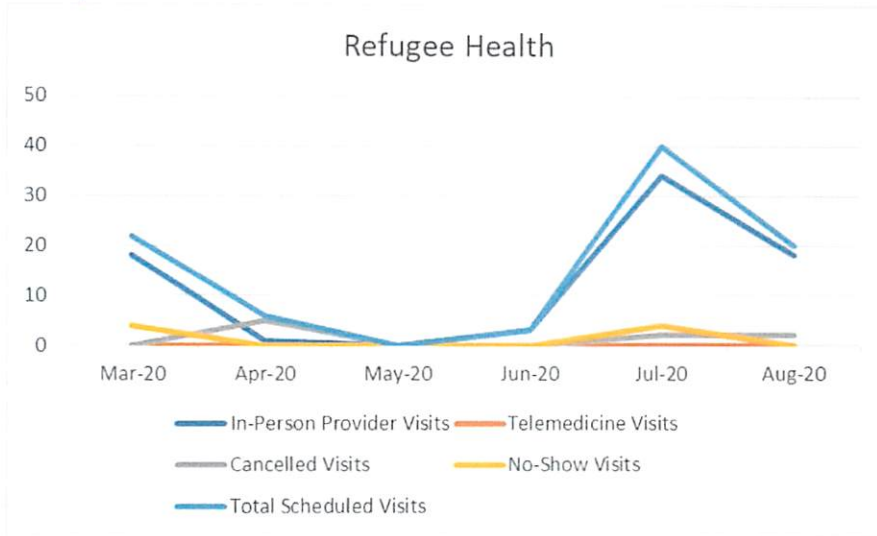
Health Center Visits

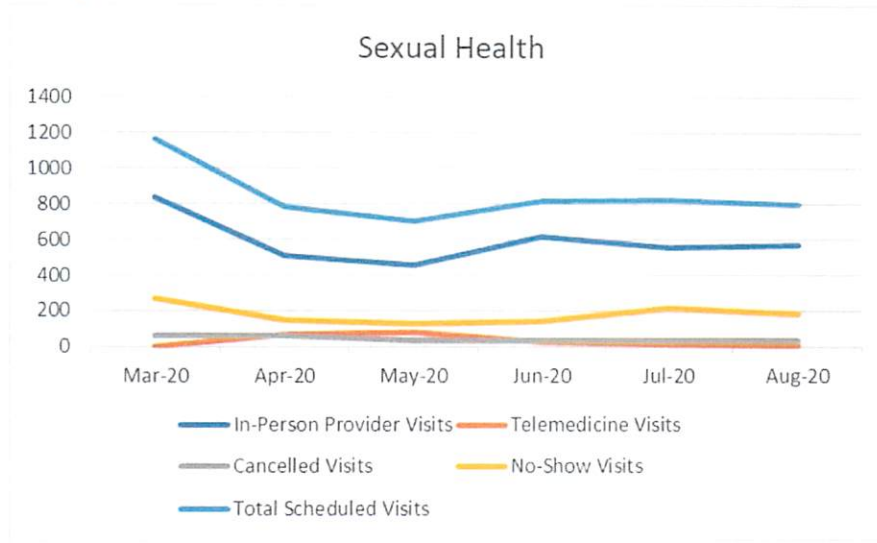
The Health Center had 1,645 scheduled patient appointments in August 2020, a 10.4% decrease over the month prior. Of scheduled patients, 68.75% kept their appointments, an increase of 1.16% over the month prior; there was a 6.08% cancellation rate, an increase of 0.8% over the month prior and a 25.17% no-show rate, a decrease of 1.95% over the month prior. Telemedicine saw 47 patients — 4.16% of patient visits, an 11.32% decrease over the month prior.

Of scheduled patient appointments, cancellation rates were highest among Ryan White and the Sexual Health Clinic at 47% and 35%, respectively. The no-show rate was highest among the Sexual Health Clinic and Ryan White at 44.69% and 23.91%, respectively.



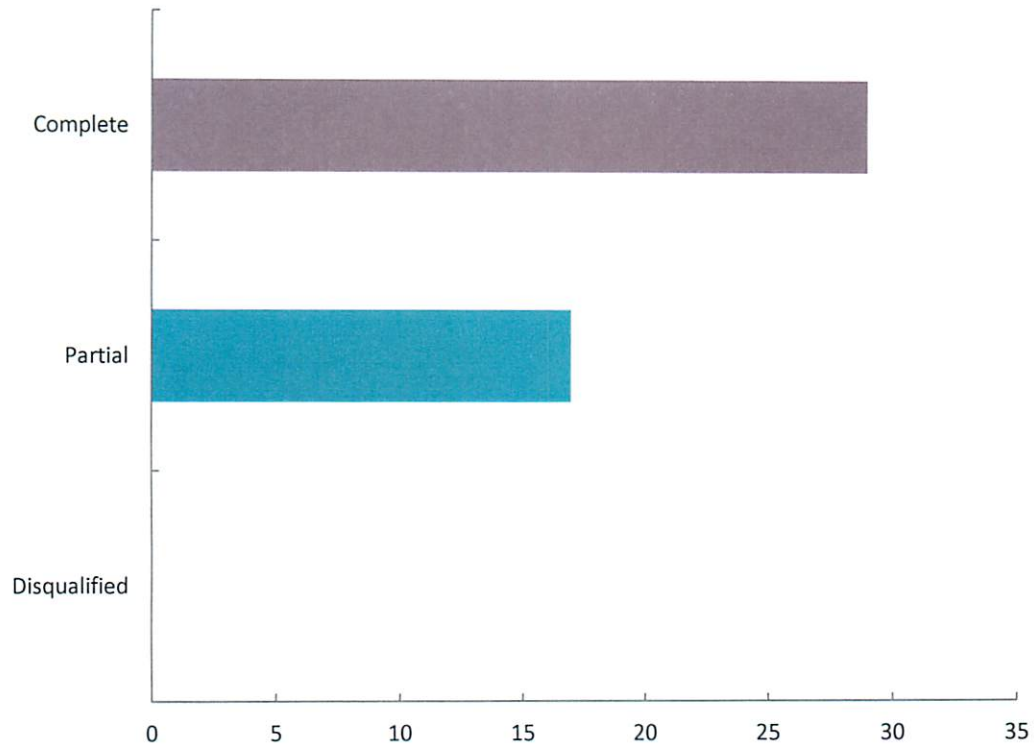






Report for Southern Nevada Community Health Center (SNCHC) Patient Satisfaction Survey
Southern Nevada Community Health Center (SNCHC) Patient Satisfaction Survey

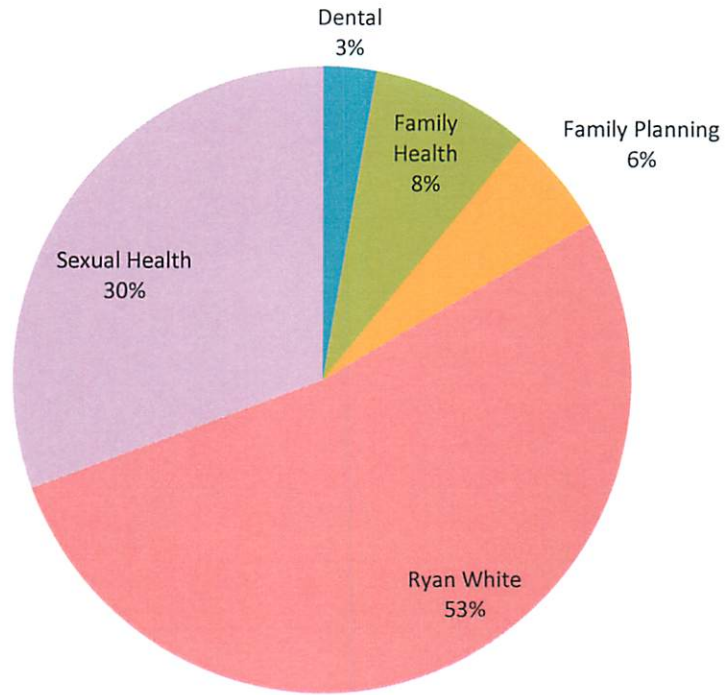
Response Statistics



	Count	Percent
Complete	29	63
Partial	17	37
Disqualified	0	0
Totals	46	



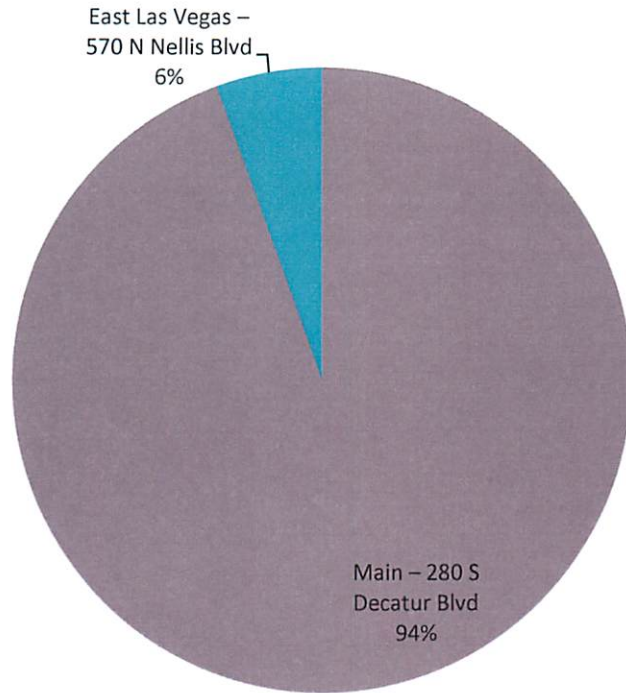
1. Service received during your visit



Value	Percent	Count
Dental	2.8%	1
Family Health	8.3%	3
Family Planning	5.6%	2
Ryan White	52.8%	19
Sexual Health	30.6%	11
	Totals	36

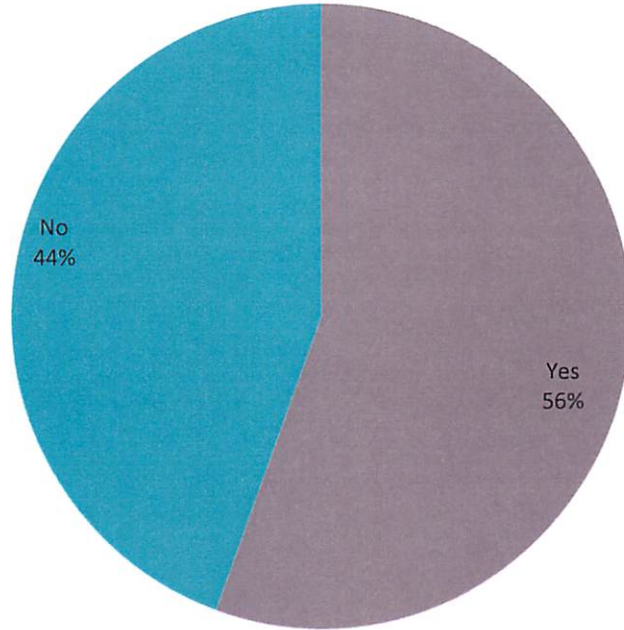


2. Southern Nevada Health District (SNHD) location



Value	Percent	Count
Main – 280 S Decatur Blvd	94.4%	34
East Las Vegas – 570 N Nellis Blvd	5.6%	2
	Totals	36

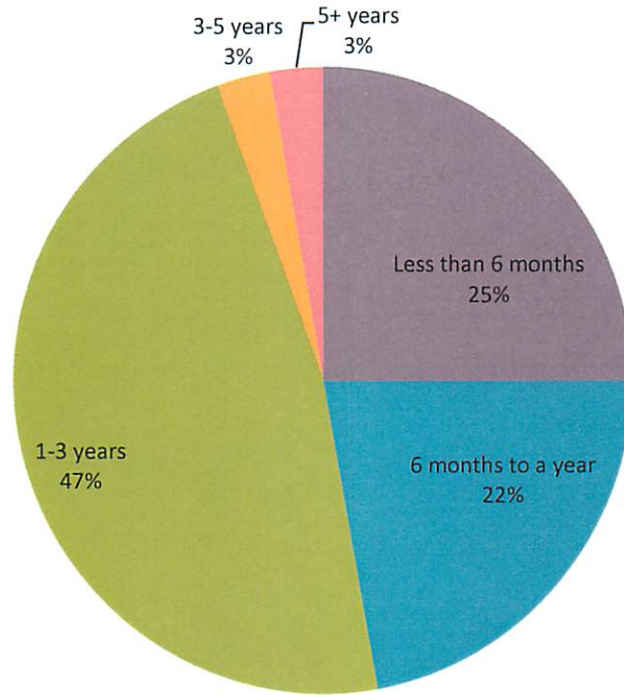
3. Do you have health insurance?



Value	Percent	Count
Yes	55.6%	20
No	44.4%	16
	Totals	36

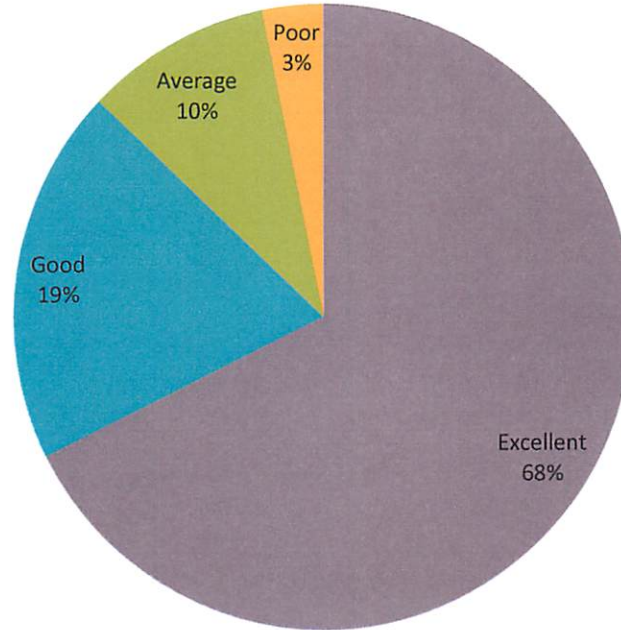


4. How long have you been a patient at the Southern Nevada Health District/Southern Nevada Community Health Center?



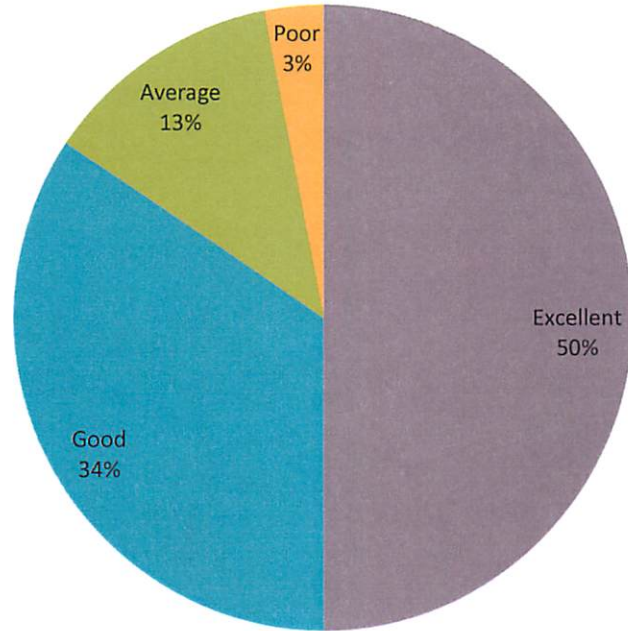
Value	Percent	Count
Less than 6 months	25.0%	9
6 months to a year	22.2%	8
1-3 years	47.2%	17
3-5 years	2.8%	1
5+ years	2.8%	1
	Totals	36

5. Ease of scheduling an appointment



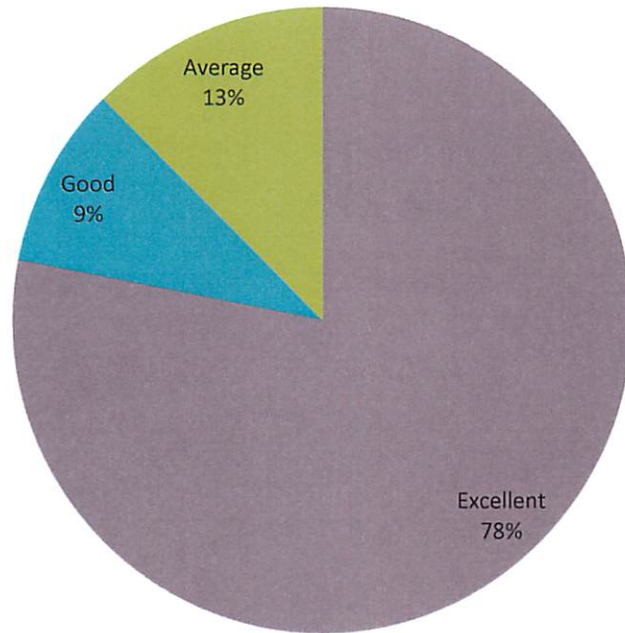
Value	Percent	Count
Excellent	67.7%	21
Good	19.4%	6
Average	9.7%	3
Poor	3.2%	1
	Totals	31

6. Wait time to see provider



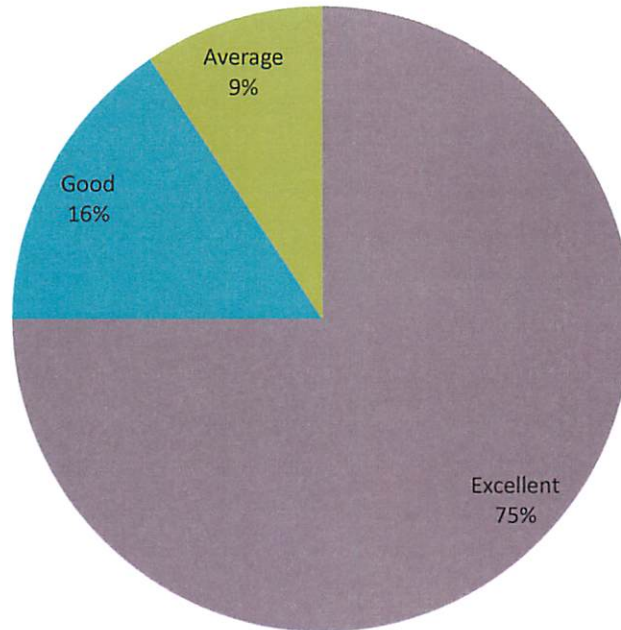
Value	Percent	Count
Excellent	50.0%	16
Good	34.4%	11
Average	12.5%	4
Poor	3.1%	1
	Totals	32

7. Care received from providers and staff



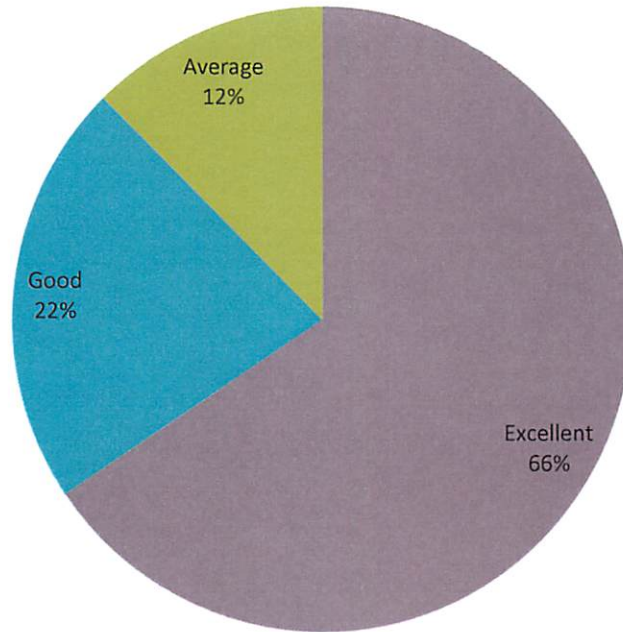
Value	Percent	Count
Excellent	78.1%	25
Good	9.4%	3
Average	12.5%	4
	Totals	32

8. Understanding of health care instructions following your visit



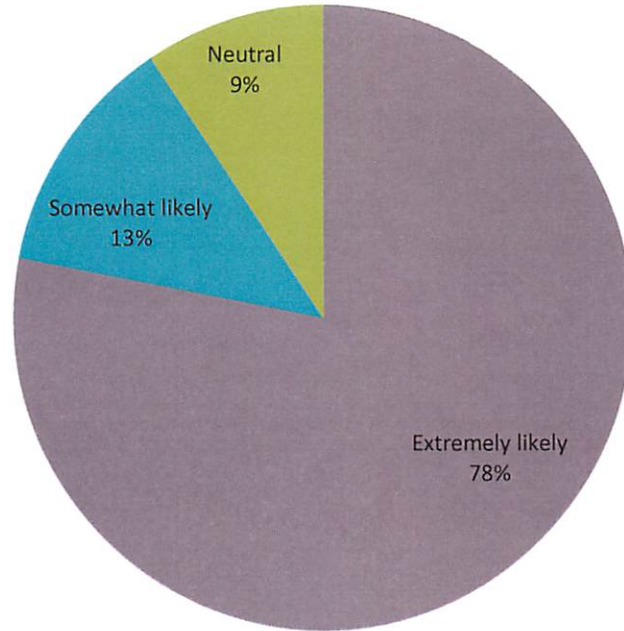
Value	Percent	Count
Excellent	75.0%	24
Good	15.6%	5
Average	9.4%	3
	Totals	32

9. Hours of operation



Value	Percent	Count
Excellent	65.6%	21
Good	21.9%	7
Average	12.5%	4
	Totals	32

10. Recommendation of our health center to friends and family



Value	Percent	Count
Extremely likely	78.1%	25
Somewhat likely	12.5%	4
Neutral	9.4%	3
	Totals	32

eBO Report Summary: August 2020

Southern Nevada Community Health Center	Provider Visits		Cancelled Visits		No Show Visits		Telemedicine Visits						Total Scheduled Patients	
							Audio Visit		Televisit		Total Visits			
Family Health Clinic	148	13.65%	8	8.00%	79	19.08%	24	51.06%	2	4.26%	26	55.32%	261	15.87%
Family Planning Clinic	178	16.42%	8	8.00%	51	12.32%	0	0.00%	1	2.13%	1	2.13%	238	14.47%
Refugee Clinic	18	1.66%	2	2.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	20	1.22%
Ryan White	170	15.68%	47	47.00%	99	23.91%	11	23.40%	1	2.13%	12	25.53%	328	19.94%
Sexual Health Clinic	570	52.58%	35	35.00%	185	44.69%	8	17.02%	0	0.00%	8	17.02%	798	48.51%
Totals	1084	100.00%	100	100.00%	414	100.00%	43	91.49%	4	8.51%	47	100.00%	1645	100.00%

<i>Percent of scheduled patients who cancelled</i>	6.08%
<i>Percent of scheduled patients who no showed</i>	25.17%
<i>Percent of scheduled patients who cancelled and no showed</i>	31.25%