



NVPCA BOARD AGENDA

Wednesday, January 17, 2024

3:00 pm – 4:30 pm

Virtual Meeting – [Zoom Link](#)

2023-24 NVPCA Board Members:

President: Steve Flores, Hope Christian Health Center	John Packham, Office of Statewide Initiatives
Vice President: Walter Davis, Nevada Health Centers	Angela Quinn, FirstMed Health and Wellness Centers
Secretary/Treasurer: Teri Gilbert Eisenga, Washoe Tribal	David Robeck, Bridge Counseling Associates
Sharon Chamberlain, Northern Nevada HOPES	Roxana Valetton, First Person Care Clinics
Oscar Delgado, Community Health Alliance	Ex-officio: Nancy J. Bowen, NVPCA
CJ Hansen, Canyonlands Healthcare	
Dr. Fermin Leguen, Southern Nevada Health District	

3:00 pm **1. Call to Order** Steve Flores
 a) Approval of the Agenda *(vote)*

3:05 pm **2. Consent Agenda *(vote)*** Steve Flores
 a) Board Minutes for November 16, 2023
 b) Chief Executive Officer’s Report
 c) Organizational Dashboards

3:10 pm **3. Administrative and Financial Reports** Nancy Barklage/
Nancy Bowen
 a) Budget to Actual YTD December 2023 *(vote)*
 b) Financial Dashboard
 c) Office Lease Update *(vote)*
 d) NVPCA New Funding

3:30 pm **4. Strategic Discussion** Nancy Bowen /
Steve Messinger
 a) Workforce Data at Health Centers
 b) Funding Opportunities
 i. State Workforce Grant *(vote)*
 ii. Huntsman Institute – research project CHW navigators *(vote)*
 iii. SAC AA (SSHS Service Area)
 c) Board Retreat – March ‘24
 i. Location and Discussion Topics
 d) NVPCA Board Vacancy - Southern Nevada Community Health Centers *(vote)*

4:05 pm **5. Policy Committee Update** Steve Flores/
Steve Messinger
 a) Federal & State Updates
 b) P & I Congressional Visits (February 13-14)

4:20 pm **6. Open Discussion – New Business** Steve Flores /
Nancy Bowen

4:30 pm **7. Meeting Adjournment**

Zoom Meeting Link: <https://us02web.zoom.us/j/82320952786?pwd=NHAyS3VoaGxJajlpTFNEZWhMMG9MQT09>
 Meeting ID: 823 2095 2786; Passcode: 767732



NVPCA Board of Directors Board Retreat Meeting Minutes

November 16, 2023

Board Members Present	Steve Flores, Walter Davis, Sharon Chamberlain, Christopher (CJ) Hansen, Oscar Delgado, Roxana Valetón, David Robeck, John Packham, and Nancy Bowen (Ex Officio)
Board Members Absent	Teri Gilbert Eisenga, Dr. Fermin Leguen and Angela Quinn
Also Present	NVPCA Staff Nancy Barklage, Karen Ford Manza, Steve Messinger, Kim Lambrecht, and Lisa Scurry (Note Taker); and Olivia Howerton of Fester and Chapman, PLLC

1. Call to Order

President Steve Flores called the meeting of the NVPCA Board of Directors to order at 3:02 pm. The meeting was conducted electronically via Zoom. A quorum of members was established.

a) Approval of the Agenda

The agenda was reviewed with no questions or suggested changes. It was moved by Sharon Chamberlain, and seconded by David Robeck, to approve the agenda as presented. The motion passed unanimously.

2. Consent Agenda

a) Approval of Board Meeting Minutes for September 19, 2023

b) Chief Executive Officer's Report

c) Organizational Dashboards

The consent agenda, consisting of the minutes of the September 19, 2023, Board of Directors meeting, the CEO report, the organizational dashboards, and the REACCHH Title X Dashboard, was presented for approval. There were no comments or questions.

It was moved by Sharon Chamberlain, and seconded by Christopher "CJ" Hansen, to approve the consent agenda as presented. The motion passed unanimously with one abstention as Mr. Robeck was not present at the September meeting.

3. Administrative and Financial Reports

a) Audit and Form 990

Olivia "Livi" Howerton of Fester and Chapman, PLLC, presented the Fiscal Year 2023 audit report and Form 990. She stated it was a clean audit, also known as an "unmodified opinion." Overall, cash flows for the association were positive. It was moved by Walter Davis, and seconded by David Robeck, to approve the Form 990 for FY 2022. The motion passed unanimously. It was moved by David Robeck, and seconded by Sharon Chamberlain, to approve the FY 2023 audit. The motion passed unanimously.

b) Budget to Actual Draft YTD October 2023

Nancy Barklage reviewed the Year-to-Date financial report through October 2023, including the overall revenues and expenses. She explained that both were on target as budgeted for fiscal year 2023. Nancy Bowen added that, for the first time, the association had 60 days of cash on hand.

It was moved by Fermin Leguen, and seconded by Oscar Delgado, to accept the Budget-to-Actual Financial Report for YTD through October 2023. The motion passed unanimously.

c) Financial Dashboard

Nancy Barklage presented the financial dashboard which provided an overview of revenues and expenses for September and October 2023. There were no questions or comments.

d) Review Member Dues

Nancy Bowen explained that the last time member dues were increased was three years ago. At that time, dues amounts were changed from a flat fee to a tiered-plan based on the organizational member's operating budget. (A separate fee schedule was established for associate members.) The proposed increase would result in an additional \$23,000 in annual revenue to the PCA. Those monies would help pay for anticipated increases (16%) to the cost of policy work, including lobbyist fees, as well as additional operating costs not covered by grant funding. An analysis of current member dues and research of dues being paid in other states was presented.

It was moved by Sharon Chamberlain, and seconded by David Robeck, to approve the increase in member dues for 2024. The motion passed unanimously with Walter Davis abstaining.

e) Office Lease Update

Nancy Bowen updated the Board on the status of the search for a new office location and lease. The lease at the current office location will end in January 2024 and a smaller site was being sought in order to save money.

4. Strategic Discussion

a) BPHC Work Plan 7/1/24-6/30/25

NVPCA is writing the competitive application for the State Primary Care Association funding. Nancy Bowen presented the goals and objectives being proposed through the BPHC (Bureau of Primary Health Care) work plan. Goals include Access to Care, Recruitment and Retention, and Health Center Leader and Board Support.

b) Networking Exploratory Phase Update – Ad Hoc Strategic Growth Committee

Nancy Bowen presented her plan to have the Ad Hoc Strategic Growth Committee include a Networking Exploratory Phase. She added that as part of that work Starling Advisors will be conducting interviews with the center CEOs.

c) Board of Directors Noddlepod

The Board members were provided instructions to access a Board of Directors Noddlepod site. On the site, members will be able to access meeting documents, committee information, and guidance regarding governance.

5. Policy Committee Update

a) Federal Updates

b) State Policy Updates

c) Planning for 2024 Interim Session – to get passed in 2025 Session

Steve Messinger provided an update on federal legislation and appropriations, particularly those related to health centers and Title X. He explained a plan is being developed for the 2024 Interim Session for bills to be passed in the 2025 Session of the Nevada Legislature.

6. Open Discussion – New Business

There was a brief discussion related to pharmacy contracts and the new definition of a patient.

7. Meeting Adjournment

There being no further business, President Flores adjourned the meeting at 4:38 pm.

NOTES

Next Meeting	The next board meeting will be held virtually on Wednesday, January 17, 2024, at 3 pm
Approved By	

ROLL CALL

President: Steve Flores, Hope Christian Health Center	Present
Vice President: Walter Davis, Nevada Health Centers	Present
Secretary/Treasurer: Teri Gilbert Eisenga, Washoe Tribal Health Center	Absent - Excused
Sharon Chamberlain, Northern Nevada HOPES	Present
Oscar Delgado, Community Health Alliance	Present
C.J. Hansen, Canyonlands Healthcare	Present
Dr. Fermin Leguen, Southern Nevada Health District	Absent - Excused
John Packham, Office of Statewide Initiatives	Present
Angela Quinn, FirstMed Health and Wellness Centers	Absent - Unexcused
David Robeck, Bridge Counseling Associates	Present
Roxana Valetton, First Person Care Clinics	Present

CEO report on the organization’s activities and meetings towards achieving the NVPCA mission To advocate for, broaden, and strengthen the health center network.

November 13, 2023 – January 10, 2024

Policy -

- NVPCA Policy Director educated all four Nevada House Representative’s Health Staffers on the importance of passing the House Transparency Act. Three of the four representatives voted yes. The Transparency Act continued the Health Center Program funding with a 10% increase. A New Access Point (NAP) funding opportunity dependent upon federal funding, is waiting to be posted in Grants.gov. NVPCA will notify members when the NAP funding opportunity goes live.
- NVPCA CEO and Director of Policy participated in a video call with Senator Bernie Sanders, other PCA CEOs and policy staff, ACH and NACHC to discuss the importance of the health center program funding. Senator Sanders is hoping for higher than a 10% increase in health center funding and hopes to have the Senate bill wrapped up by or shortly after Jan 19, 2024. Once the Senate bill is voted on, it will go back to the House.
- NVPCA CEO & Director of Policy met with Medicaid Deputy Administrator and discussed the health centers concern with the revised MSM Chapter 2900 FQHC language around social work interns not being reimbursable. The conversation was impactful, and Medicaid is no longer changing language thus health centers can still bill for social work interns. Documentation was released January 8, 2024.
- NVPCA Policy Director provided a legislative recap to the Nevada Health Care Workforce & Pipeline Development Primary Care Workgroup January 9, 2024
- NVPCA CEO and Director of Health Center Informatics met with individuals from AACHC regarding plans for the HCCN.
- Staff attended a meeting, hosted by PCA Value Based Care Collaborative, to explore the foundations of the Certified Community Behavioral Health Clinic (CCBHC) model and how PCA's and Networks can develop a strategy to collaborate with CCBHC's to advance value-based care.
- NVPCA CEO and staff met with Jake Wahrer, Northern Nevada HOPES regarding a FQHC cybersecurity initiative idea. NVPCA will meet with Mr. Wahrer again in February 2024.
- NVPCA CEO, Policy Director, and Director of Strategic Partnership met with the Rural Partners Network, a Division of the U.S. Department of Agriculture, regarding FQHC and health care needs in Tonopah, NV

Organizational Excellence –

- Ms. Bowen is exploring an Executive Coaching Certification in an International Coaching Federation (ICF) program. The certification would complete the activity of the current BPHC work plan, and become of the base for the NVPCA Leadership Program for member organizations.
- NVPCA CEO and two FQHC CEOs met with the Inline Group to potential group purchasing models for clinical recruitment resources and to explore collaborations towards workforce.

- The NVPCA Justice, Equity, Diversity, and Inclusion (JEDI), planning committee continues its work toward ensuring a welcoming and inclusive culture and climate, in conjunction with Nevada Cultural Competency. The JEDI Plan is being reviewed and revised.

Community Engagement and Training Events:

- NVPCA staff attended the grand opening of the Hope Christian Health Center mobile unit, and the R.E.A.C.H clinic opening in Las Vegas.
- NVPCA CEO attended the entrance meeting for Hope Christian Health Center to show support from the PCA, and give an overview of the state health care environment.
- NVPCA hosted a 2-day virtual Uniform Data System (UDS) training on December 11 and 12. The 43 participants received information to achieve a full and comprehensive understanding of the complete UDS report.
- NVPCA CEO, Policy Director and Director of Health Center Informatics attended the NACHC PCA/HCCN conference in Louisville, Kentucky in November.
- NVPCA CEO participated in the Nevada Office Minority Health Equity (NOMHE) 4th Quarter as part of the Advisory Committee meeting.

Program Management and New Projects

- BPHC Competitive Application was submitted November 3, 2023. The application is currently under technical review. NVPCA will hear if application was successful in late spring 2024.
- NVPCA was awarded three additional one-time funding awards:
 - SilverSummit HealthPlan Community Investment award \$16,627
 - Molina HealthPlan Community Investment award \$50,000
 - Intermountain HealthCare Community Health award \$30,000

Mission:
To advocate for, broaden, and strengthen the health center network
Strategic Plan 2023-2024

1/14/2024

Nevada Primary Care Association
Organization Dashboard

11 Priorities	# = 14 + 13	0 Not started	2 Over due	0 Completed
	Goals Short term Continuing			

Strategic Priorities	Pillar	Progress	Due Date	Notes
1. Reduce time required for provider credentialing and payer credentialing.	Policy	25%	12/31/2023	Staff have met with NV Medicaid, MCO, PMG & 1 PCA. At MCO Roundtable, NVPCA learned the MCOs have different processes and agreed to document the process and share with NVPCA members.
2. NVPCA will advocate for increased federal and state health center and complementary program funding.	Policy	33%	ongoing	NVPCA Policy Director has contacted the Members of Congress regarding passing legislation the increased federal funding for health centers. NVPCA has met with our lobbyists to plan for the 2024 interim session with work on 340B and increase FQHC funding.
3. NVPCA will increase cybersecurity compliance and training.	Org. Excellence	50%	9/1/2023	NVPCA received bids from consultants that were too costly; NVPCA has instead implemented a password protection program for all employees, and is drafting cybersecurity policy and procedures.
4. NVPCA will implement Population Health Platform with up to three FQHCs.	Org. Excellence	25%	6/30/2024	NVPCA has signed MSA; HOPES has implemented Azara, HCHC & SNCHC have agreed to come under the NVPCA Master Services Agreement
5. NVPCA sets internal standards and benchmarks reviewed annually to be an employer of choice	Sustain. & Growth	50%	10/31/2023; 4/30/2024	360 Feedback with peers completed in November 2023; Employee Satisfaction Survey annually in April. 2023 Baseline staff satisfaction survey has been completed. 4.4/5 rating
6. NVPCA will increase financial sustainability through diversified funding sources that fulfil the associations' mission.	Sustain. & Growth	75%	6/30/2023; 6/30/2024	NVPCA has increase FY24 funding by \$96,627 through one time funding projects on mobile unit peer network and CHWs. NVPCA is exploring workforce grant application due by Feb. 2, 2024.
7. NVPCA will develop a comprehensive plan to support workforce development for both the PCA and CHC members	Sustain. & Growth	25%	6/30/2024	NVPCA have met to discuss the workforce workplan framework. NVPCA Director of Admin & Finance is working to fill in the framework by end of January 2024.
8. NVPCA will increase education, training, and support to CHCs to create strategies to demonstrate value to employees and become an employer of choice	Member-ship	25%	6/30/2024	NVPCA presentation on generations in the workplace at the Annual Health Care Conference.
9. NVPCA will collect workforce data to analyze and align health centers with workforce training programs and schools	Member-ship	75%	6/30/2024	UDS Workforce data has been analyzed for each health center and as a state as a whole. Presentation will be made at Jan Board meeting, and documentation will be mailed to each health center.
10. Better communicate the value of NVPCA membership	Outreach & Comm.	25%	2/1/2024	NVPCA is revising the NV FQHC Fact Sheet
11. Reinforce NVPCA's reputation as "go to" expert of healthcare for uninsured and underinsured individuals.	Outreach & Comm.	33%	On going	Staff have created SmartSheet to track staff community engagement alignment with NVPCA goals and work plans



NVPCA REACCHH Dashboard (YTD = November 2023)

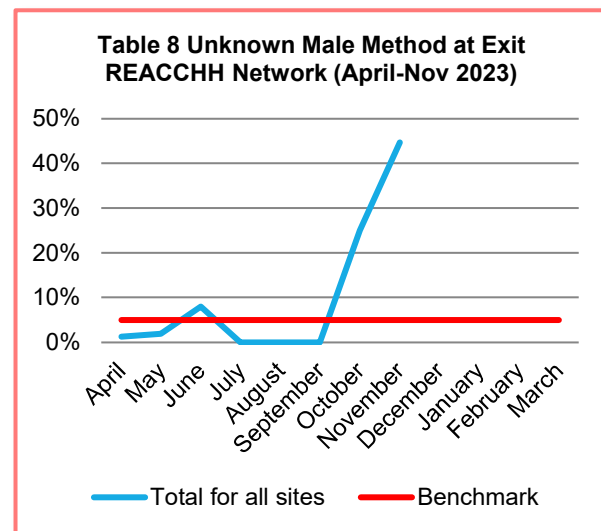
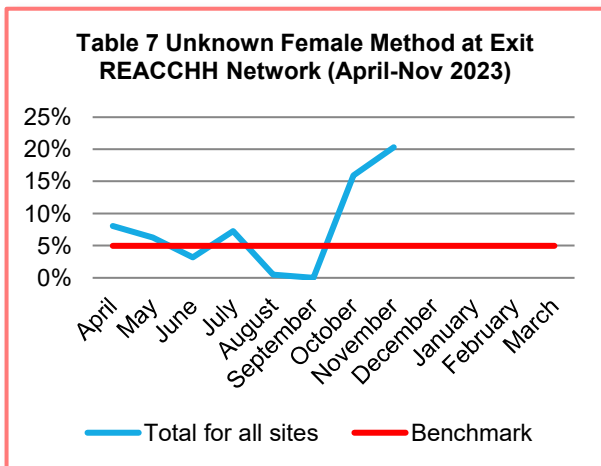
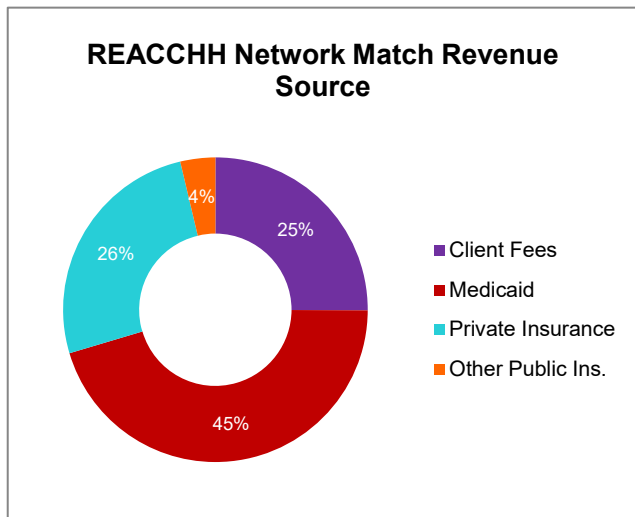
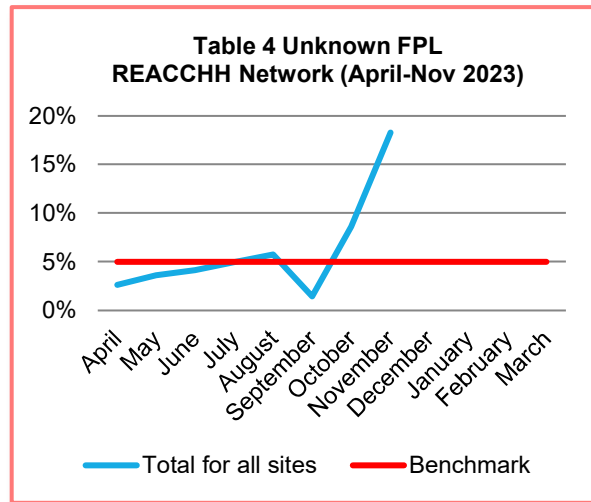
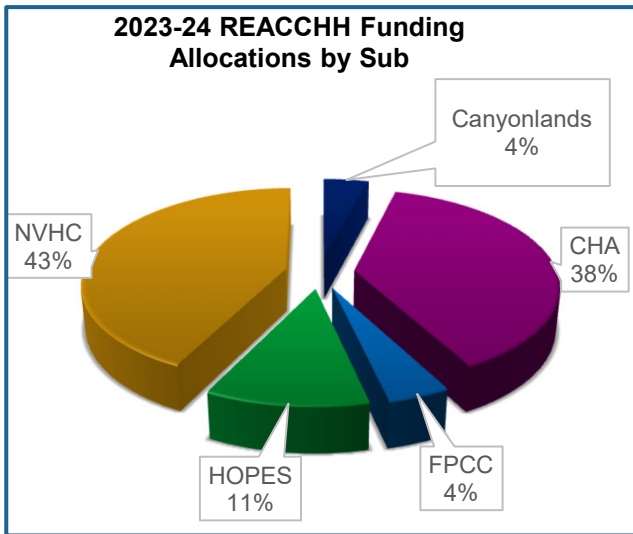
Contract Year: April 1 - March 31

2023-2024 Contracted Funds

Canyonlands, CHA, FPCC, NN HOPES + NVHC

Data Quality - Unknown Rates*

Quality Improvement Award Eligibility (4)



At 67% of the contract year...

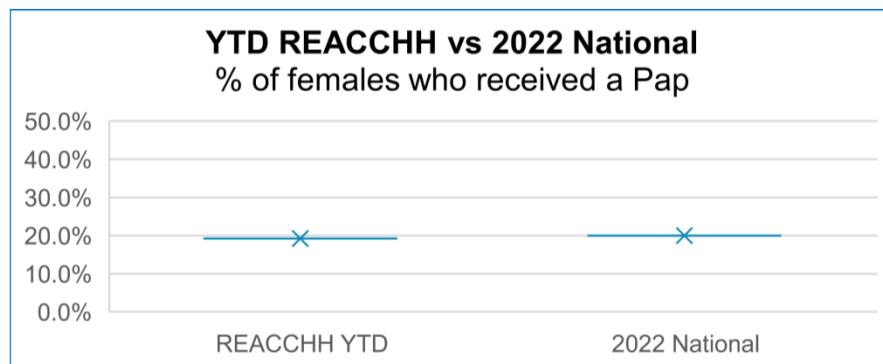
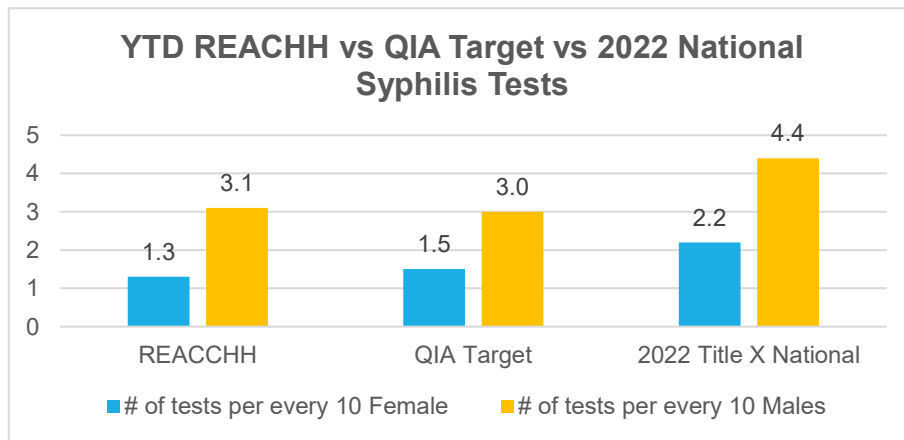
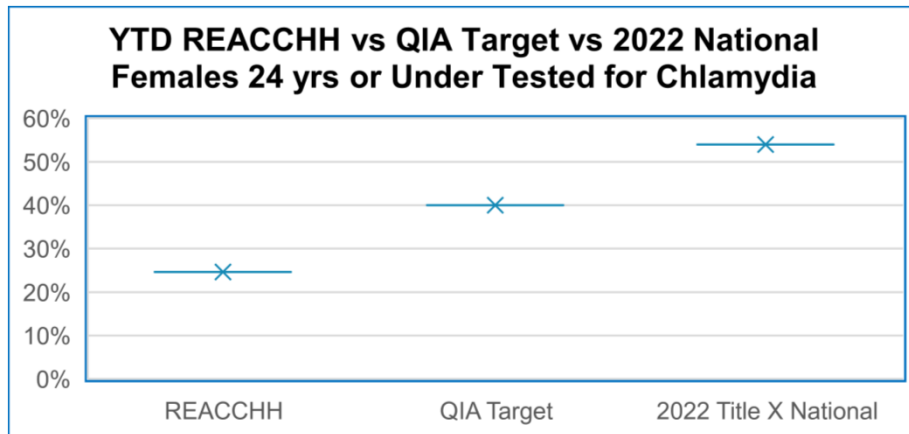
REACCHH Title X funds spent YTD
 =67.3%

Unique Title X Patients Served by REACCHH
 = 65.2% of total contracted

4) Data submitted using the FPAR 2.0 template

Clinical Quality Standards

Quality Improvement Award Criteria (3)



- *Notes & Updates Since November 2023:**
1. One of five subrecipients has not submitted patient data since July 2023 due to template and mapping challenges
 2. Quality Improvement Awards Period: 8/1-12/31/23; as of 11/23, subrecipients are not eligible based on unknown rates; retroactive corrections can be made through 1/16/24; most of rate increases due to program and IT staff transition; EACH subrecipient received TA on reporting and data quality
 3. Permanent sterilization (vasectomy) in northern NV by 3/31/24 --> 6/24



NVPCA Financial Statement

YTD Target 50.0%

* Notes provided for variances + / - 25% of YTD target

25%

75%

NB= Not Budgeted

	APPROVED BUDGET 2023-2024	YTD Dec-23	% of Budget	Notes
Revenue				
Federal Grants				
REACCH Title X	2,052,050	982,730	48%	
BPHC Cooperative Agreement	821,802	430,133	52%	
Contracts				
HCCN	56,657	28,912	51%	
State- TPP PREP	92,758	30,364	33%	
Population Health Project	299,070	0	0%	all income recognized last fiscal year as restricted
NACHC Mobile Unit	11,000	10,574	96%	grant period ended 12/31/2023
Other				
Training & Events	22,500	26,067	116%	AC 2023 registrations \$97,000 total was raised for AC 2023. Sponsoship income can no longer be deferred. \$21,750 was invoiced this FY for AC 2023.
Sponsorship	90,000	56,750	63%	AC 2024 sponsorships will be raised later in this FY.
Membership Dues	24,750	4,750	19%	Membership renewals on rolling calendar; most renew in February
NVCC	20,000	14,165	71%	Self paced course started June 2023; Train the Trainer license renewals
Group Purchasing Income	-	627	NB	
Interest Income	2,500	8,599	344%	Majority of Pop Health Project funds are in the high yield savings account. Funds are pulled monthly as expenses occur.
Total Revenue	3,493,087	1,593,671	46%	
Expenses				
Personnel/Salary & Fringe Benefits	1,288,783	611,845	47%	
Travel				
Airfare	16,903	8,593	51%	
Hotel	17,629	12,242	69%	
Ground Transportation/Car Rental	5,905	5,263	89%	
Conference Registration	10,720	6,184	58%	
Per Diem	7,603	4,302	57%	
Mileage/Gas	3,091	611	20%	
Total Travel	61,851	37,194	60%	Travel expenses high due to fall conferences and staff retreat; travel has decreased this winter.
Supplies				
Program Supplies- Direct Cost	2,748	926	34%	
Computer/Equipment	6,600	4,185	63%	Purchased two of the three computers budgeted for this FY
Total Supplies	9,348	5,111	55%	
Contractual				
Consulting	55,125	52,884	96%	DreamPilot Films and FACHC paid
Reports and Projects	263,471	54,549	21%	
Total Contractual	318,596	107,433	34%	
Other Operating Expenses:				
Legal	2,000	1,015	51%	
Trainings/Events (6500)	102,710	93,115	91%	AC23 expenses
Credit Card Processing Fees	720	1,674	232%	AC23 registration Stripe and Whova fees increased
Meeting Staff/Board (6608)	3,300	1,816	55%	
Photocopying	580	0	0%	
Postage	73	59	81%	Postage to mail NHCW posters
Printing/Outreach	1,243	234	19%	
Recruitment Expenses	1,800	100	6%	
Staff/Board Development (6615)	2,814	1,413	50%	



NVPCA Financial Statement

YTD Target 50.0%

* Notes provided for variances + / - 25% of YTD target

25%

75%

NB= Not Budgeted

APPROVED

BUDGET

YTD

% of

2023-2024

Dec-23

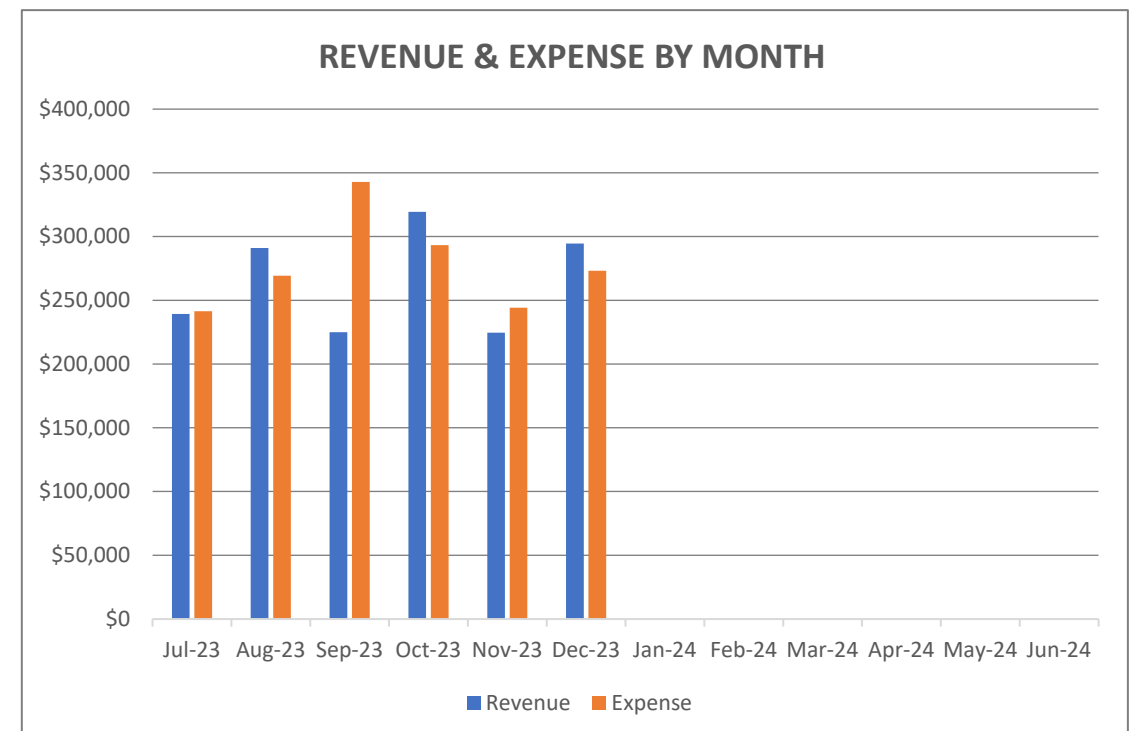
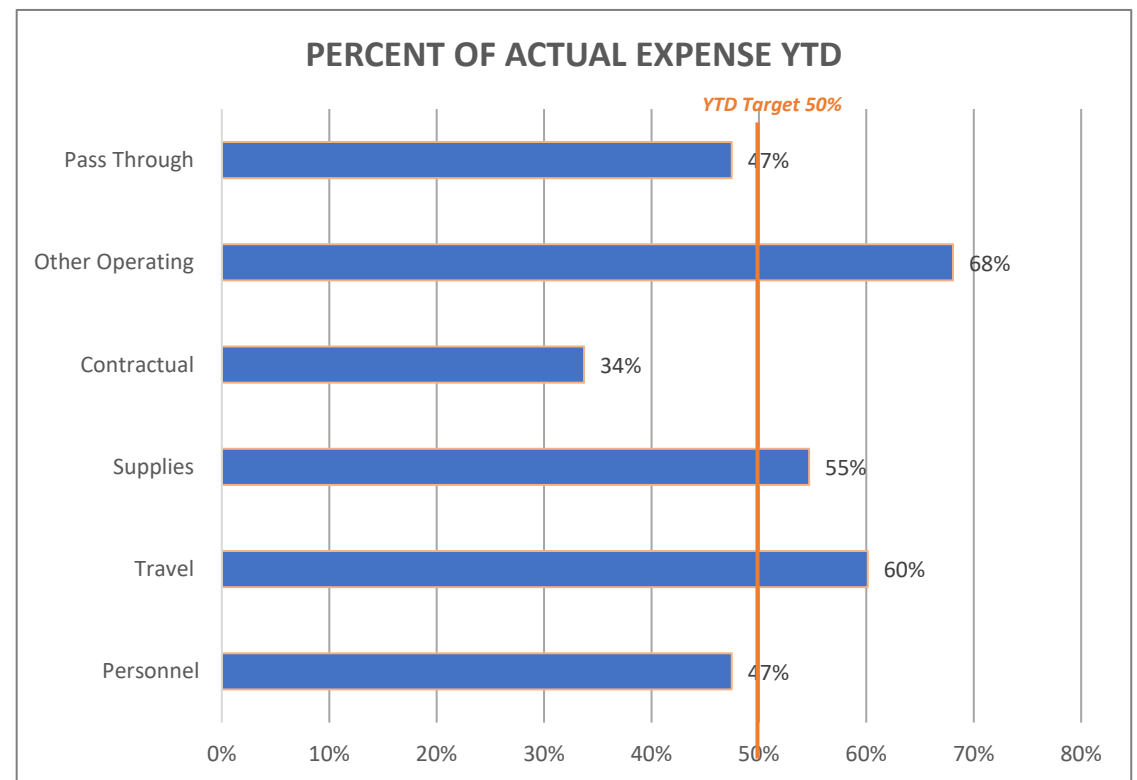
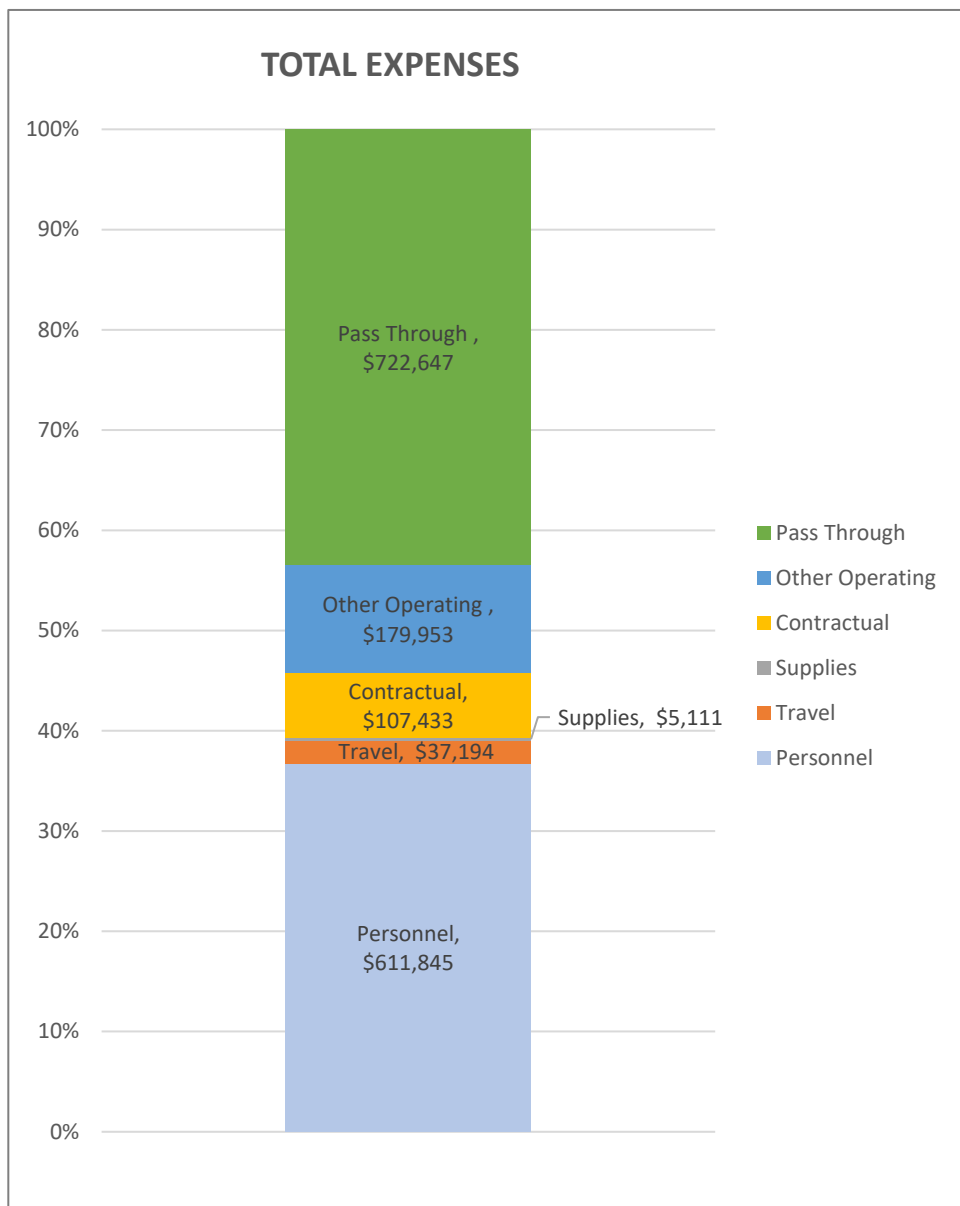
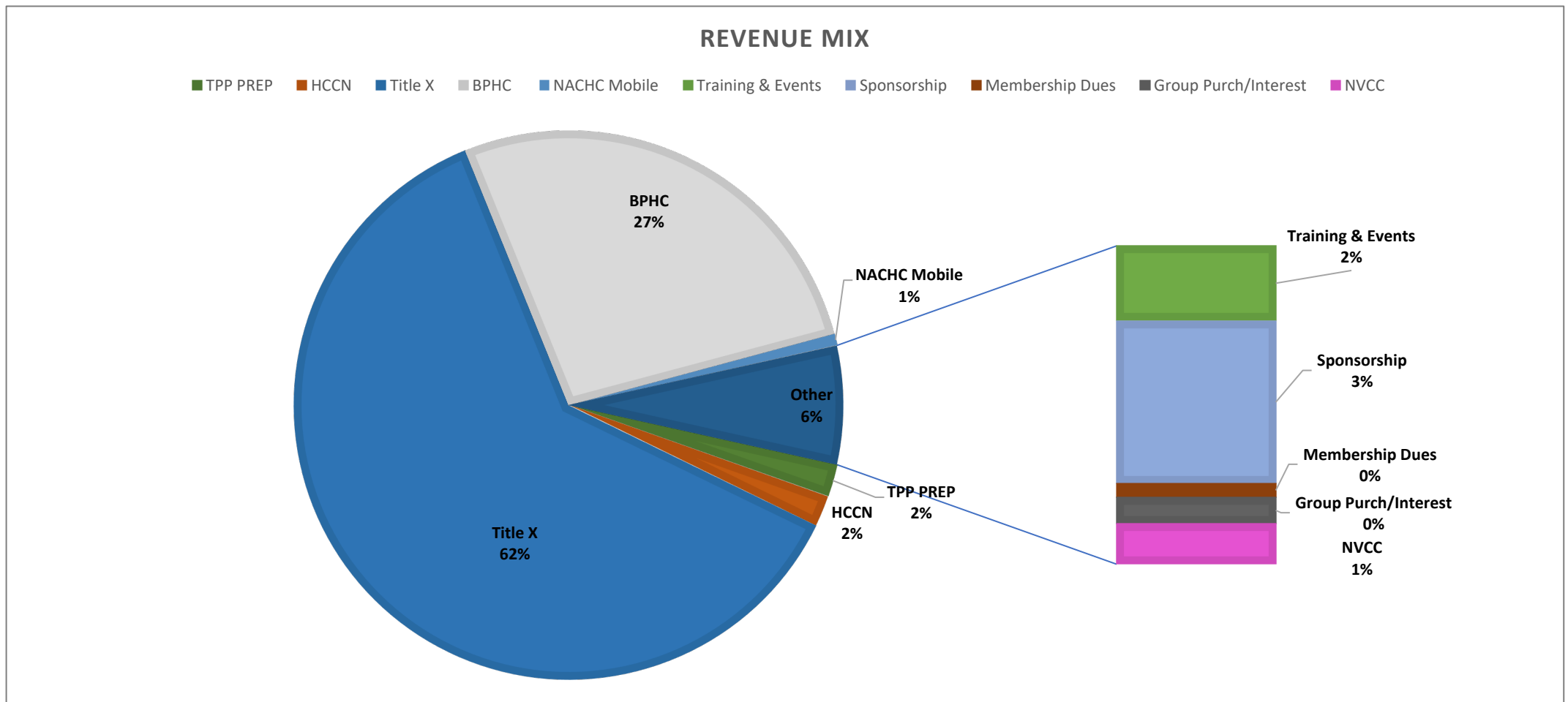
Budget

Notes

Taxes & Licenses	125	22	17%	
NVCC Operating Expenses	10,000	3,903	39%	
Dues & Memberships (6620)	14,425	2,145	15%	
Shared Costs				
Audit	17,900	17,900	100%	Audit field work finalized
Auto Lease	6,973	3,161	45%	
Alarm	684	339	50%	
Bank Charges	180	60	33%	
General Office Supplies	3,200	577	18%	
IT Services	500	0	0%	
Janitorial	3,600	1,800	50%	
Insurances	10,500	7,485	71%	
Rent	46,081	23,041	50%	
Repairs/Maintenance	500	0	0%	
Software Subscriptions	23,000	14,330	62%	
Telephone & Internet	11,436	5,763	50%	
Total Other Operating	264,344	179,953	68%	
Pass through Contracts- Title X	1,455,166	705,050	48%	
Pass through Contracts- TPP PREP	67,245	17,597	26%	
Total Pass Through	1,522,411	722,647	47%	
Total Expenses	3,465,333	1,664,183	48%	
Income or Loss	27,754	(70,512)	-254%	Loss from Pop Health expenses (revenue recognized last FY) and AC23 expenses (AC24 sponsorships starting to come in)

Pop Health restricted revenue recognized FY23; expenses incurred this FY	86,297
<i>Income or Loss</i>	<i>15,785</i>

Financial Dashboard Report July 1, 2023 – December 31, 2023



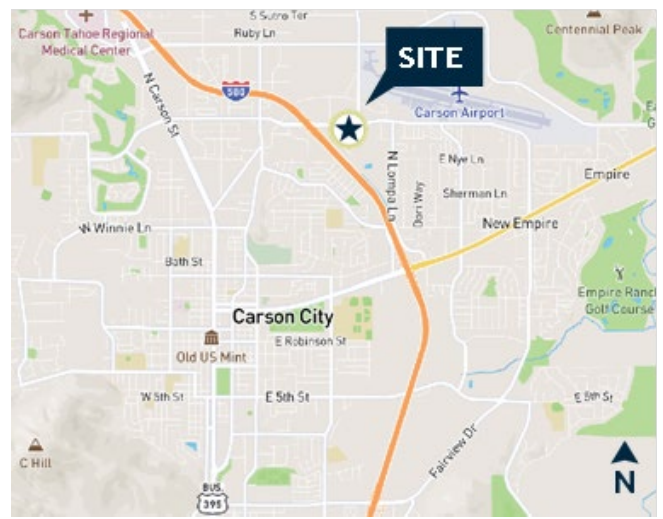
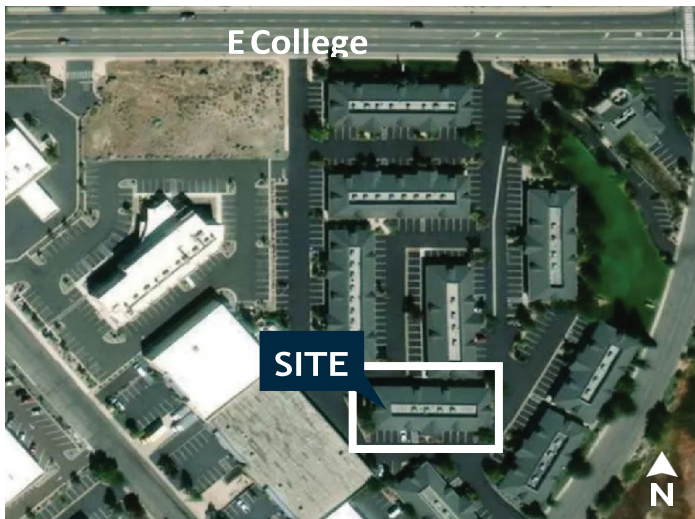
	8-23	10-23	12-23	2-24	4-24	6-24	Avg
Days cash on hand* Goal = 60	113	68	49				77
Current ratio*	2.0	1.8	2.2				2.0

*Days cash on hand & current ratio calculated without Pop Health restricted funds

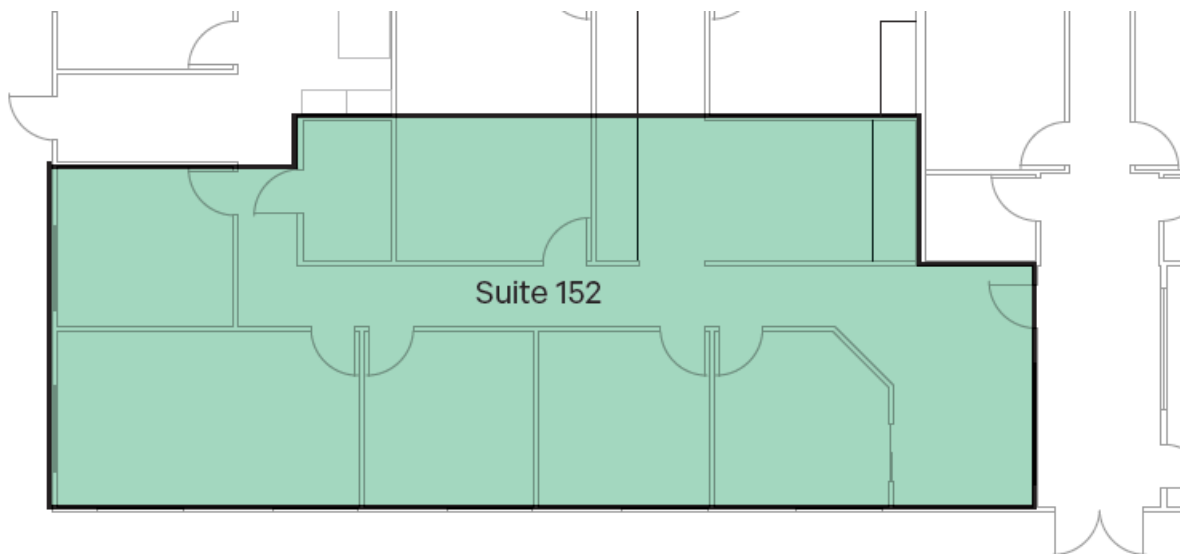
Document Title: NVPCA New Office Lease

Background: Lease on 755 N. Roop #211 expires 1/31/24, building owner has agreed to go month to month at the current rate until we move out. Estimated move out date is 2/29/24.

Information: NVPCA has finally found an office space to move into at **3264 Goni Rd, Ste 152, Carson City, NV**. Five -year lease for March 1, 2024 – February 28, 2029. All tenant improvements will be paid for by the building owner. It is a reduction in space by 1200 sf and reduction in monthly lease expense by approximately \$1500 minus the cost of utilities. Estimated annual savings of \$10,000 – \$11,000.



1,688 SF Office; 5 offices, conference room and kitchen/copy room.



Action: Board ratify CEO signing the lease agreement.

Document Title: NVPCA New Funding

NVPCA has received an additional \$96,627 in one time funding from SilverSummit HealthPlan (\$16,627), Molina Healthcare (\$50,000) and Intermountain Health (\$30,000). We were notified of the funding in December. All funds have been received in early January 2024.

SilverSummit HealthPlan Community Investment Funds Project is to continue the Mobile Unit Peer Network (MUPN) and bring in subject matter experts for technical assistance to the participating health centers. Subject matter experts and topics will be chosen based upon health center needs

Molina Healthcare Community Investment Funds Project is centered around the Mobile Unit Peer Network (MUPN) and CHWs in relevance to the Medicaid Unwinding. We are still in the process of developing a workplan for this project. As we build out the detail of the project, NVPCA staff will reach out to health centers through the MUPN to assess health center needs and discuss collaborations.

Intermountain Healthcare Community Health met with NVPCA met in December regarding their community health work in Las Vegas/Clark County. NVPCA was invited to submit a proposal of up to \$30,000 for a project in Clark County.

We proposed and were funded to lead a Continuous Glucose Monitoring (CGM) project, working with two health centers in Clark County, Nevada. The project will provide CGM devices and sensors to uninsured patients who have gestational diabetes, and Type I and Type II diabetes. Hope Christian Health Center and Southern Nevada Community Health Center both agreed to collaborate with NVPCA on this project.

Participating health centers will -

- receive a process map for Continuous Glucose Monitoring devices and will identify a cohort of patients capable of safely using CGM devices.
- receive education from an SME on prescribing and education requirements and receive education on patient assistance programs for CGM devices.
- receive information on the different CGM devices available.

Action: None – information item

2022 UDS Update

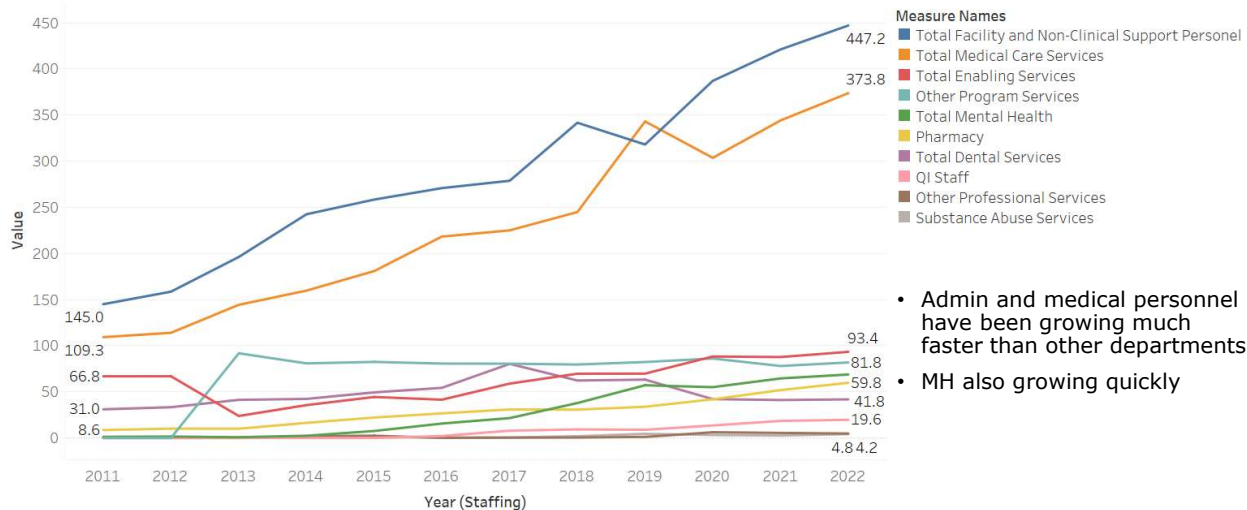
Presented by Steve Messinger
 Policy Director

NVPCA Board of Directors Meeting
 January 17, 2024



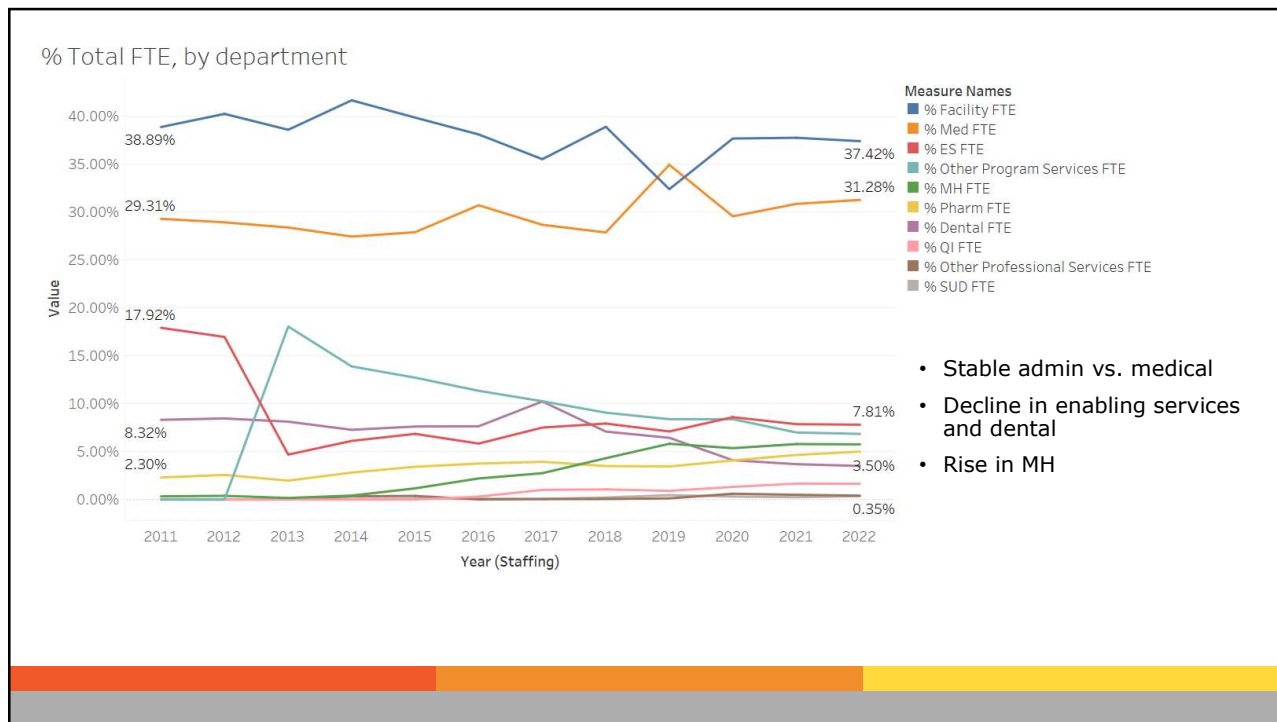
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Total FTE, by department

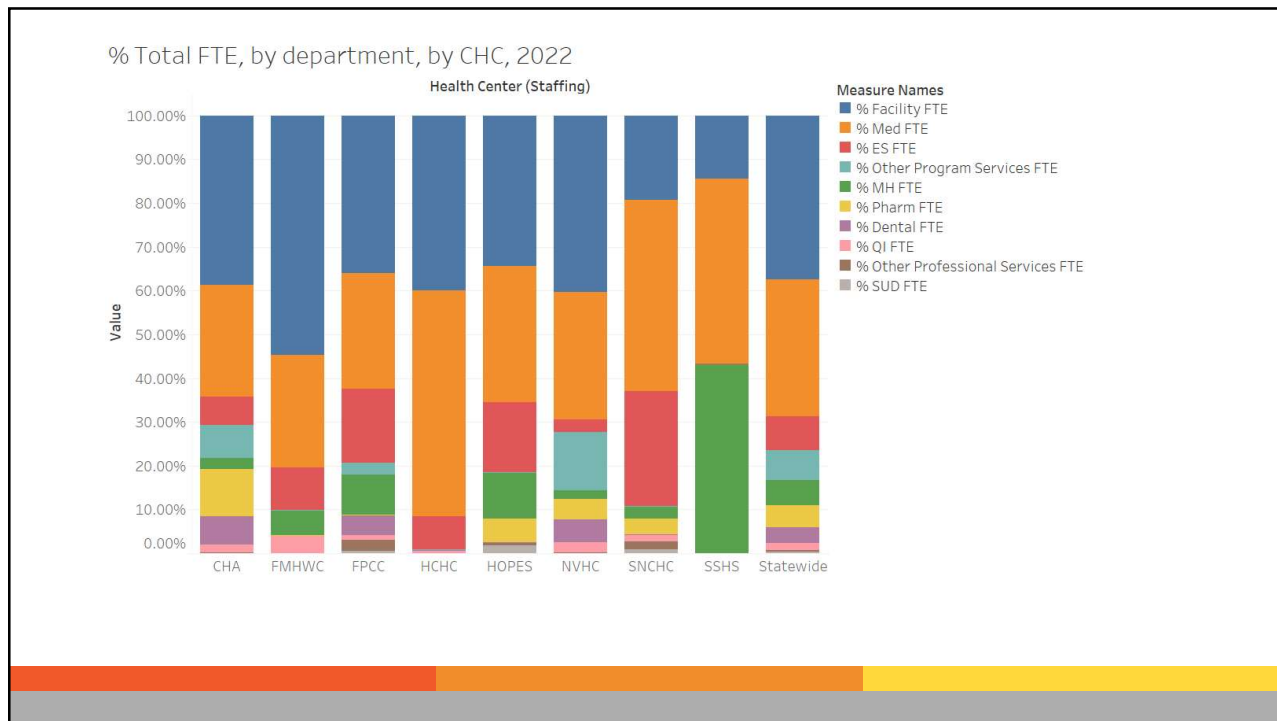


- Admin and medical personnel have been growing much faster than other departments
- MH also growing quickly

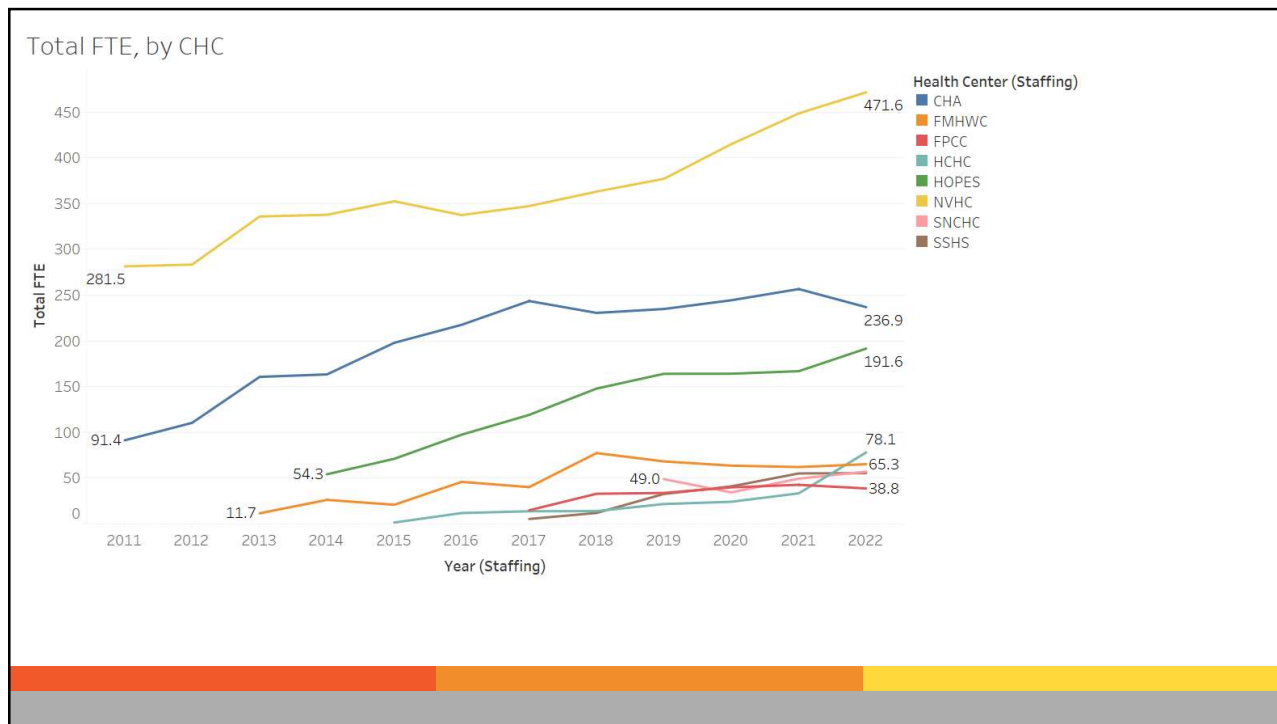
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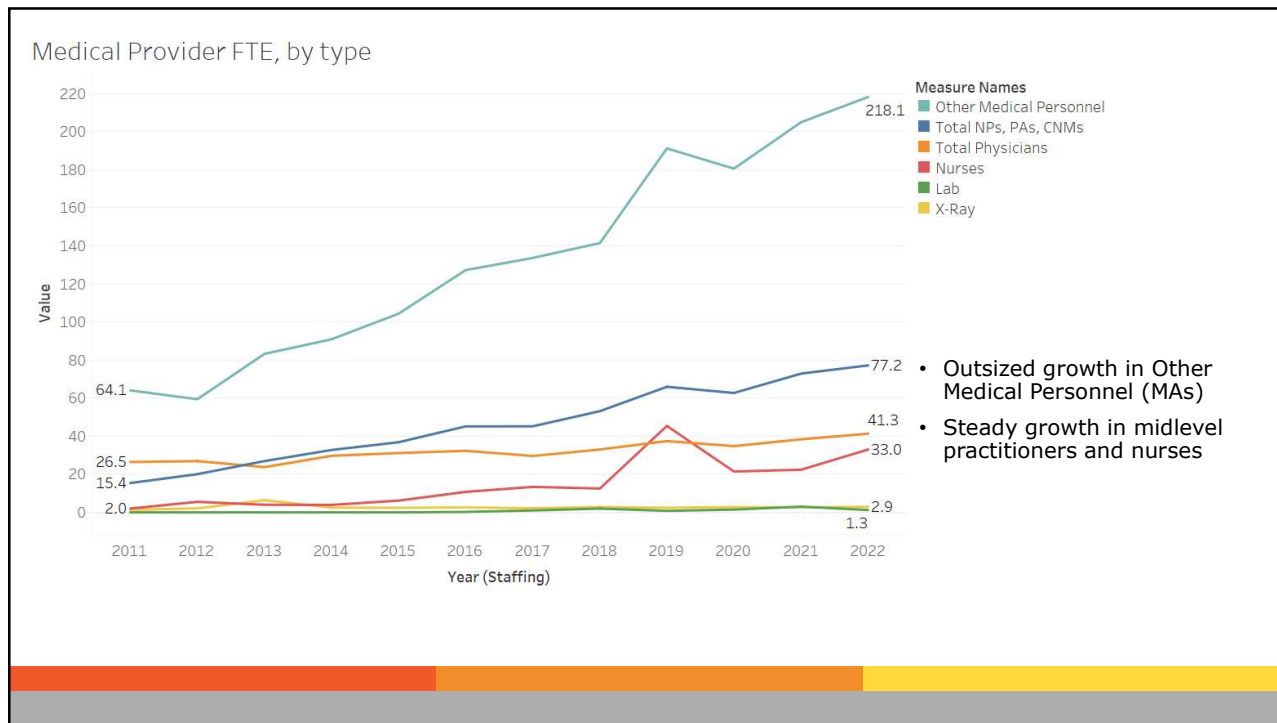
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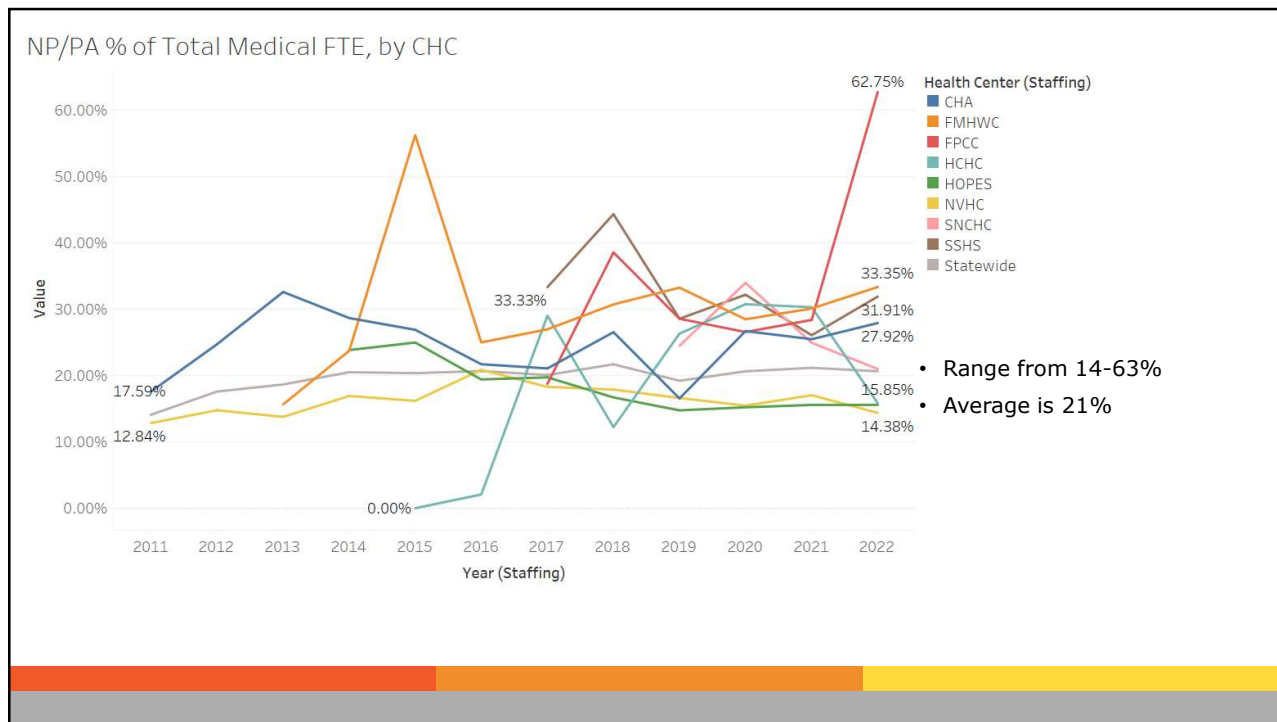
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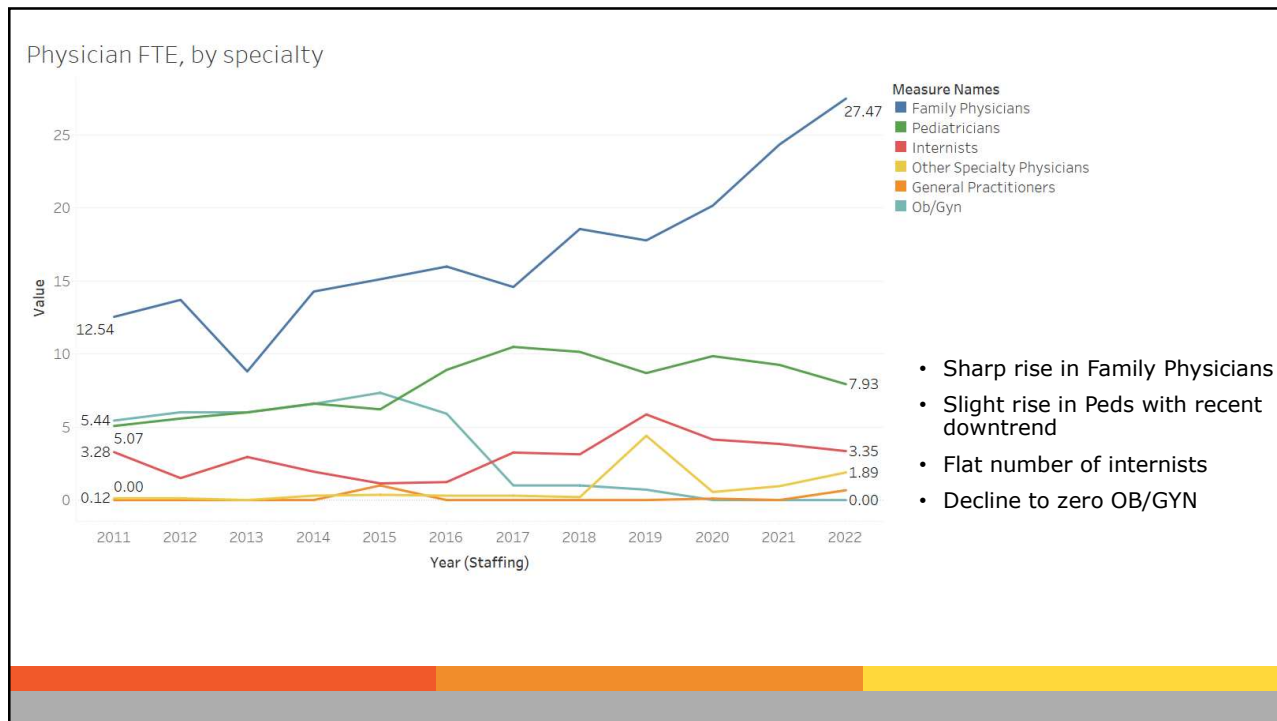
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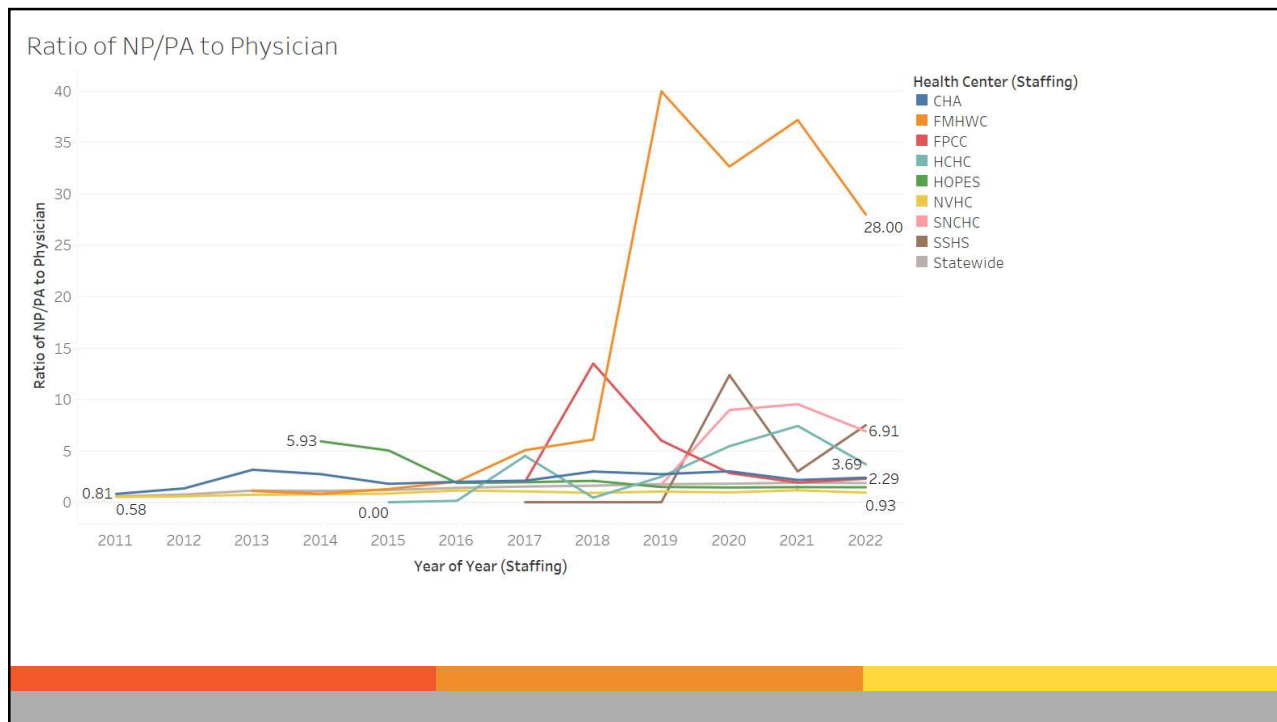
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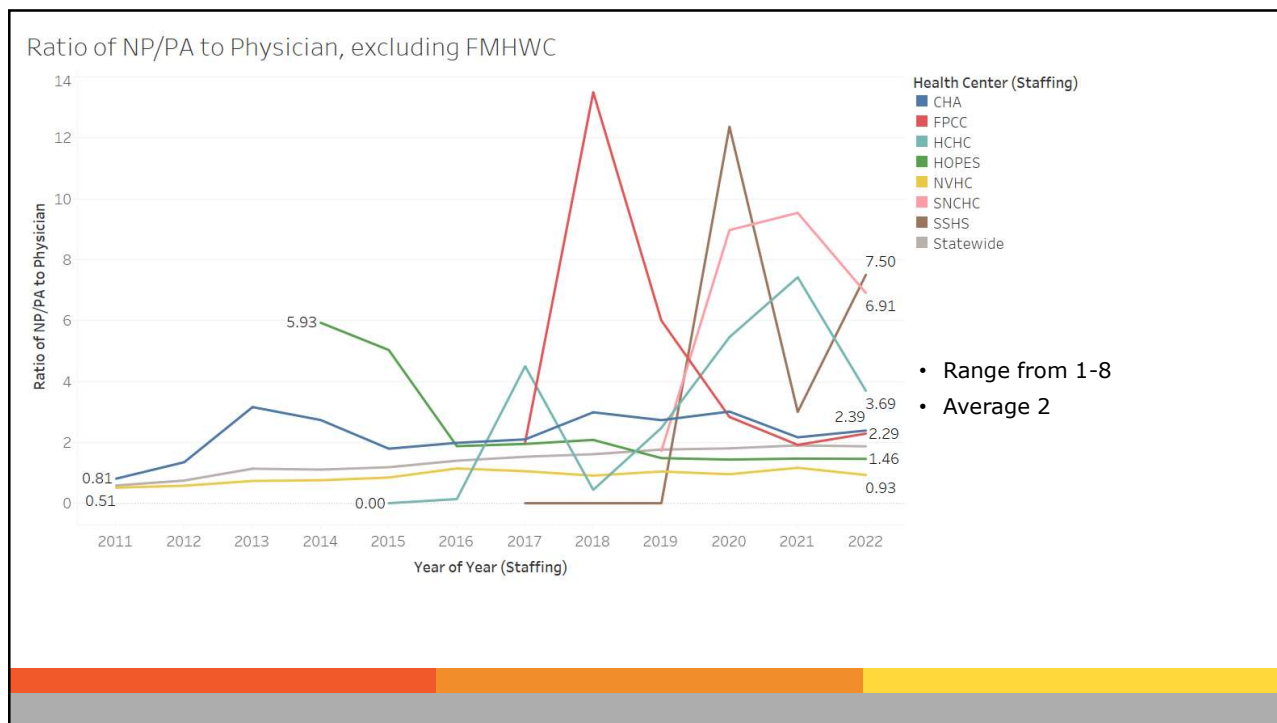
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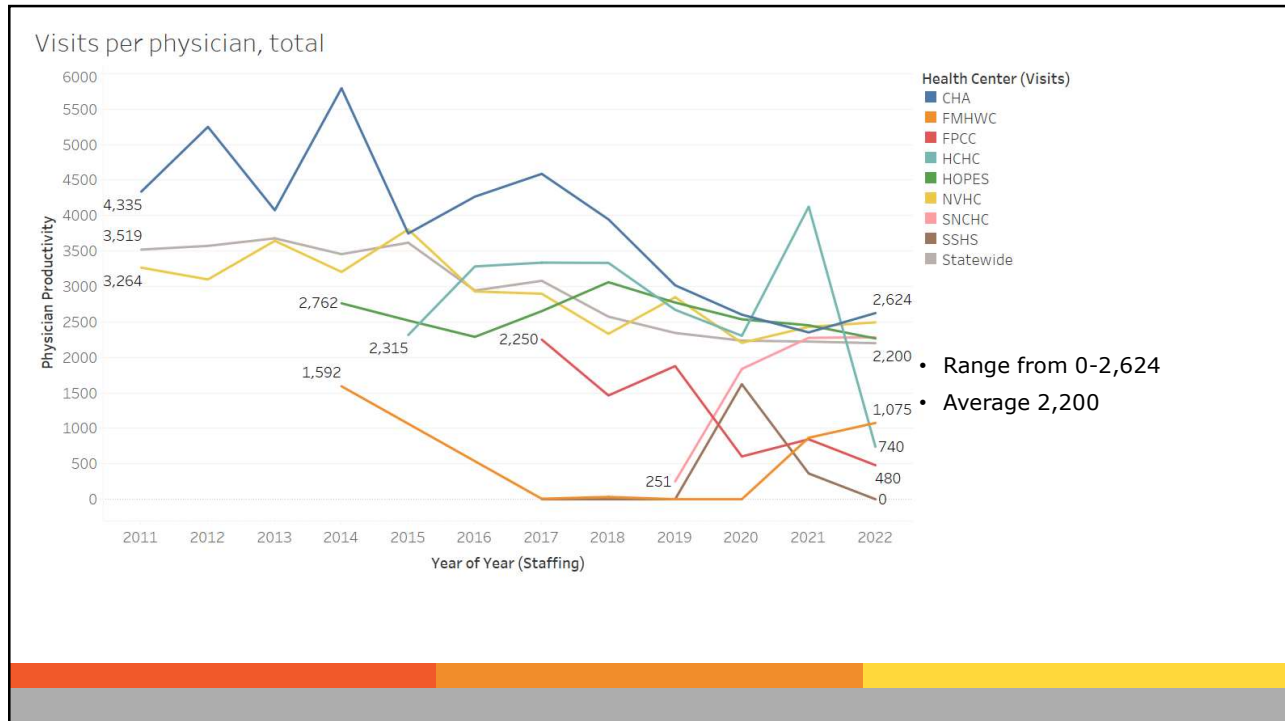
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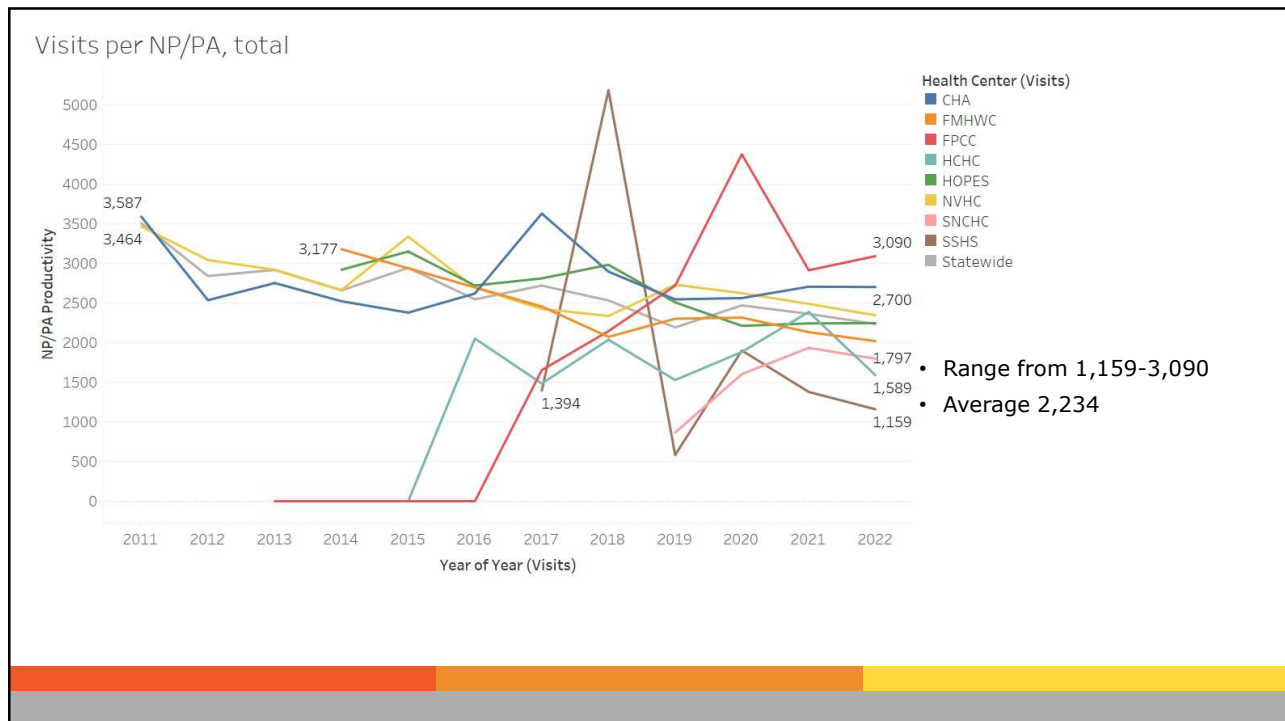
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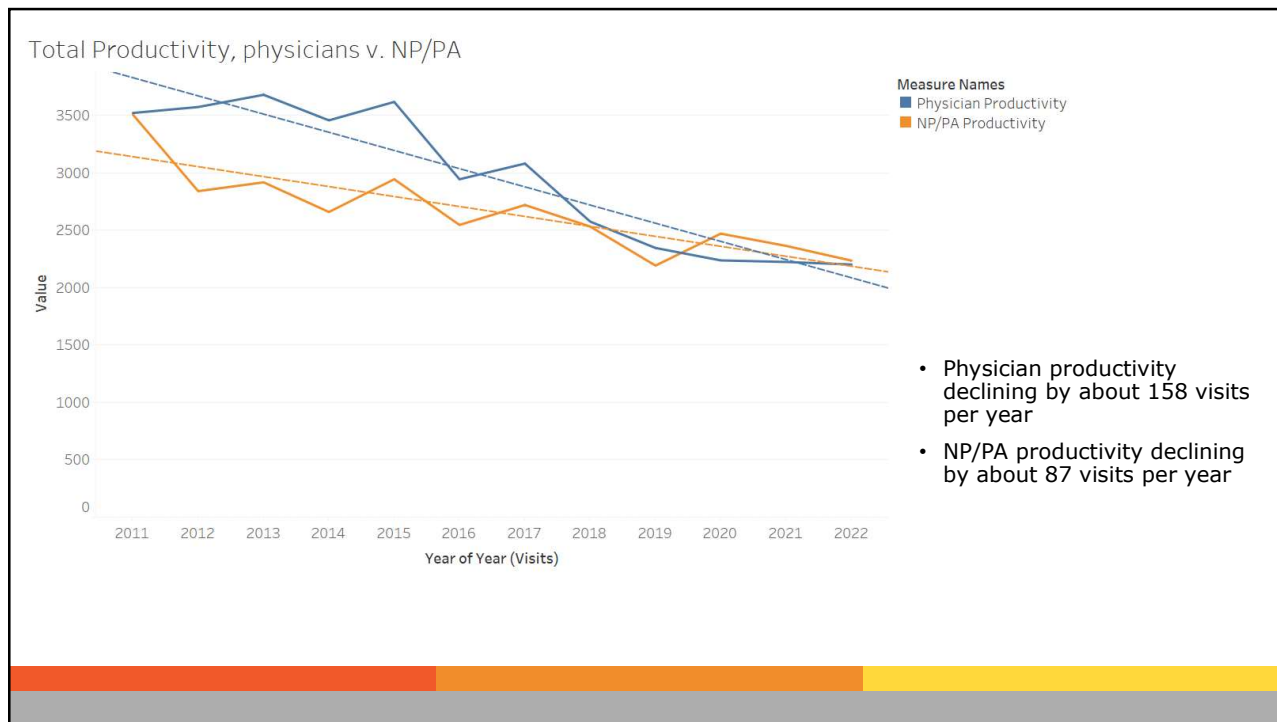
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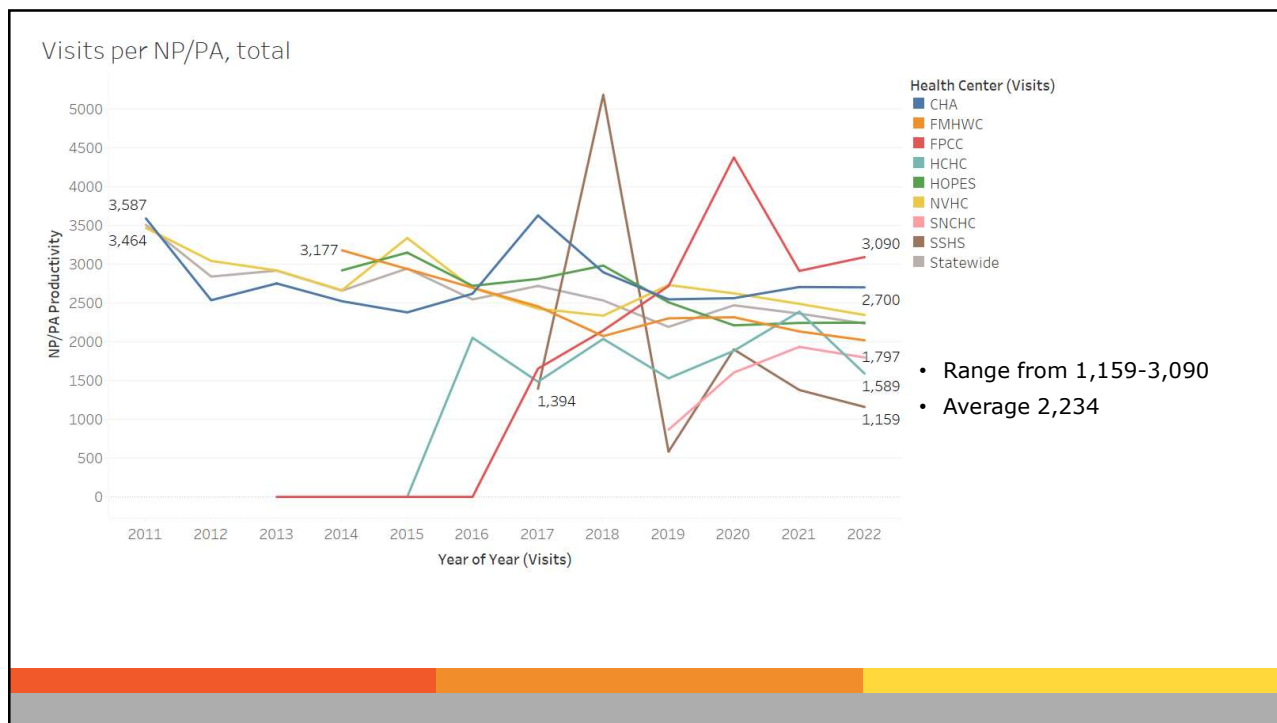
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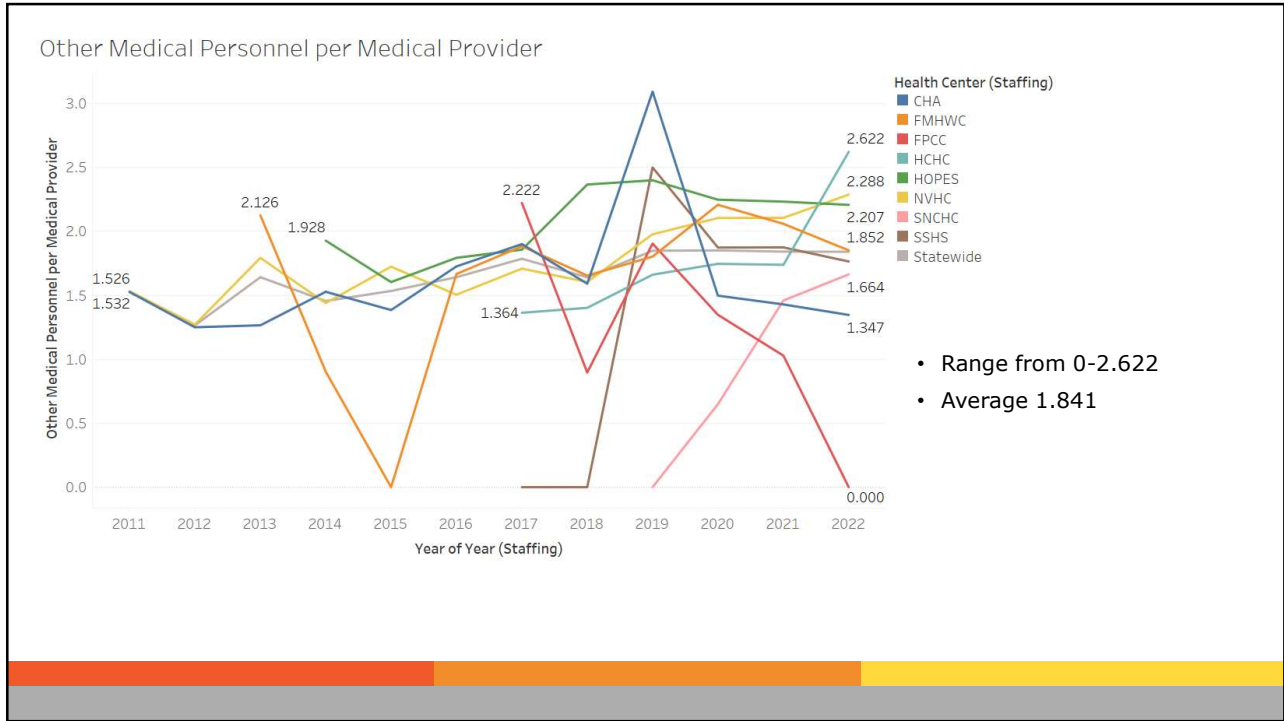
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Document Title: Funding Opportunities

There are a few funding opportunities NVPCA would like to participate in.

- 1) **ARPA Nevada Health Workforce Pipeline Grant to the Public Health Infrastructure and Improvement:**

GRANT FUNDING PERIOD OF PERFORMANCE: MARCH 1, 2024 -NOVEMBER 30, 2026

Nevada Department of Public and Behavioral Health (DPBH) has ARPA funds that they are putting towards workforce grants [ARPA Nevada Health Workforce Pipeline Grant to the Public Health Infrastructure and Improvement - Nevada Public Health | The Office of State Epidemiology](#). DPBH is centralizing some of the workforce and pipeline projects through the ARPA Nevada Health Workforce Pipeline Grant (NHWPG) that will focus on providing funding opportunities that are intended to disseminate financial relief and incentivize individuals to pursue careers in healthcare. There seven different components, three of which NVPCA would like to apply for funding (see highlighted components below).

•Component 3: Clinical Rotations; Ceiling Award Amount \$195,195

Identify and support students in need of financial assistance to support the completion of clinical rotations.

- Provide financial assistance to students in the process of completing their clinical rotations in Nevada.
- Ensure that training received is approved and recognized by local, state, or federal education, professional licensing, or certification boards.
- Longitudinally track program participants for one year to capture employment status after successful completion of clinical training.

•Component 5: Medical Assistants (MAs) Ceiling Award Amount \$776,000

Increase the number of MAs throughout Nevada.

- Provide scholarships to individuals training to become an MA in Nevada.
- Ensure that training received is approved and recognized by local, state, or federal education, professional licensing, or certification boards.
- Longitudinally track program participants for one year to capture employment status after successful completion of MA training.

•Component 6: Training Scholarships Ceiling Award Amount \$3,540,000 (\$60,000 individual ceiling)

Develop, increase, or support the number of training opportunities available in Nevada.

- Provide training scholarships to individuals needing educational financial assistance to reach career goals in alignment with this grant. Individuals are allowed up to \$60,000 educational financial assistance.
- Develop and implement programs that provide health professionals experiential trainings needed to serve the surrounding community in need of such services, as well as improve the quality of care being provided.

- **Ensure that training received is approved and recognized by local, state, or federal education, professional licensing, or certification boards.**

The expected outcome for these funds is to support and expand the opportunity to increase the number of qualified and competent professionals in the health workforce to improve the overall health of our communities. Moreover, ensure that current workforce gaps are filled, and challenges are addressed without duplication of existing efforts. DPBH proposed applicants would be recruited statewide and meet qualification for education financial assistance, in one of the following areas: unemployed, underemployed, or currently employed and seeking to move to a job that provides better economic advancement, such as higher wages or more opportunities for career advancement, or at or below 300% FPL.

Action: Approval to apply for DPBH funding for up to three components of the ARPA Nevada Health Workforce Pipeline Grant

- 2) **Huntsman Cancer Institute (HCI)** is interested in working with Nevada’s FQHCs on a tobacco cessation research project using the SBIRT model along with the Ask Advice and Connect (AAC) electronic medical record tool or text messages and patient navigation. The proposal has a quick turnaround to meet the end of the month deadline, but the grant itself would start in about one year from now due to review and funding timelines. Currently, HCI is looking for a letter of support and some discussion around the AIMS of the grant. We always like to reiterate this to allow for time to plan and such. This grant is similar to others HCI has done where they really will take the lead on the heavy lifting.

Action: Approval for NVPCA to sign a letter of commitment for Huntsman's grant application

- 3) HRSA Service Area Competition – Additional Area (SAC-AA)
FQHC CEOs have been informed the Silver State Health Services no longer has FQHC status. Once HRSA funds a service area in a state, that funding stays in the state and is opened up to other organizations to fulfill the service area needs. Therefore, their service area is open for competition. The SAC-AA is listed in [Grants.gov grants.gov/search-results-detail/351560](https://www.grants.gov/search-results-detail/351560). It is anticipated that this will be a highly competitive application. If you are interested in applying and would like some information regarding the service area, if you haven’t done so already, please contact Steve Messinger and he can send you some information.

Action: none-information item

HEALTH OUTCOMES & POPULATION EQUITY

Project Overview

The primary goal of *Screening, Brief Intervention, and Referral to Treatment in Nevada (SBIRT-Nevada)* is to connect community health center (CHC) patients who use tobacco with the Nevada Quitline. This project will use both clinic and patient level interventions throughout the course of the study (described below). This proposed project will be conducted in partnership with the University of Utah, the Nevada Primary Care Association and the Nevada Cancer Coalition.

Clinic level intervention. Ask-Advise-Connect (AAC), is an electronic health record (EHR) system change designed to make it easier for providers and clinic staff to Ask all patients about tobacco use, Advise patients who use tobacco to quit, and to directly and electronically Connect interested patients to the Nevada Quitline.

Patient level intervention. Patients at participating CHCs who use tobacco may be eligible to receive text messages encouraging connection to the Quitline as well as the opportunity to have a patient navigation phone call with a Community Health Worker to address motivation and practical barriers to enrolling in the Quitline.

What to expect for your clinics

Implementation of AAC interventions for tobacco use. To integrate AAC into your EHR we will:

- Conduct a “workflow analysis” at select participating clinics. This will help the study team tailor the EHR modification to work best for your clinic staff, providers, and patients.
- Work with the CHC IT staff members to implement the EHR modification to include AAC.
- Conduct training with clinic staff and providers on using AAC with patients.
- Work on technical assistance with your specific EHR vendor to optimize AAC and for the AZARA population health management platform.
- Provide financial compensation annually throughout the 5-year duration of the project.

Implementation of text messaging and patient navigation.

- Text messages and patient navigation will be delivered by the study team on behalf of your clinic.
-

What to expect for your patients

AAC intervention

- Electronic connection to free tobacco cessation treatment delivered by the Nevada Quitline.

Text messages and patient navigation

- Patients at participating CHCs who use tobacco may receive either single or multiple text messages offering them connection with the Quitline. The text message will be sent on behalf of the clinic.
 - Patients who do not enroll in the Quitline following text messages may receive a patient navigation call from a community health worker.
 - All text messages and patient navigation calls will include an option to opt-out from all future communication from the study.
-

Contact Information

For more information or questions, please contact:

Chelsey Schlechter

Assistant Professor at University of Utah

801-213-5704

Chelsey.Schlechter@hci.utah.edu

Upcoming Board Retreat Wednesday, March 20, 2024

To plan for the next board retreat, NVPCA needs the Board's feedback on location and educational topic.

Location of choice- The 2024 Annual conference will be in Las Vegas in September. **Do we want to have the spring 2024 retreat in either Las Vegas, or Reno?**

- There are 6 Las Vegas based board members, and 5 Reno/Carson City/Gardnerville based Board Members.
- The January 2023 Board Retreat was in Las Vegas.

Agenda –

10am -4:30pm

Standard items with extended strategic discussion section for education session of board members choice; a 2-3 hour presentation.

What is keeping you up at night that we can bring in a subject matter expert?

Actions:

1. **What is the board preference Spring 2024 Board Retreat location?**
2. **Education topic ideas**



January 11, 2024

Steve Flores, Board President (steve@hopehealthvegas.org)
Nevada Primary Care Association (NVPCA)

RE: Resignation from NVPCA Board of Directors

I am writing to tender my resignation from the NVPCA Board of Directors, effective immediately.

On November 19, 2023, the Southern Nevada Community Health Center (SNCHC) Governing Board approved Randy Smith to take the position of Chief Executive Officer – FQHC for the SNCHC. Therefore, I request that Mr. Smith be appointed to fill the vacancy on the NVPCA Board of Directors caused by my resignation.

I have enjoyed my time serving on the NVPCA Board and am grateful for the opportunity.

Sincerely,

A handwritten signature in blue ink, appearing to read "Fermin Leguen".

Fermin Leguen, MD, MPH
District Health Officer
Southern Nevada Health District

cc: Nancy Bowen, CEO, Nevada Primary Care Association



NEVADA PRIMARY CARE ASSOCIATION

Board of Directors Candidate Application

*Please return this application along with a copy of your resume to:
Nancy Bowen at nbowen@nvpc.org*

Date: January 11, 20243

Name: Randy S. Smith
First MI Last Familiar name

Residence:

Address: 12249 Nasino Ave., Las Vegas, NV 89138

Phone: (714) 423-4633 E-mail: randys_525@yahoo.com

Employer:

Name: Southern Nevada Health District

Your title: Chief Executive Officer – Southern Nevada Community Health Center

Address: 280 S. Decatur Blvd., Las Vegas, NV 89107

Phone: (702) 759-1780 E-mail: smithra@SNHD.org

Type of business or organization: Health District/Federally Qualified Health Center

Primary service(s) and area/population served: Primary Care, Family Planning, Sexual Health, Ryan White, Behavioral Health, & Enabling Services – Low-income/underserved population residing in Las Vegas

Number of years your organization has been an NVPCA member: since 2020

Preferred method of contact: Work Residence

Please list boards and committees that you serve on, or have served on (business, civic, community, fraternal, political, professional, recreational, religious, social):

Organization	Role/Title	Dates of Service
Orange County Partners in Health – HCCN	Board Member & Chair	2018 - 2022
Coalition of Orange County Community Health Centers	Board Member	2021 - 2022

Education/Training/Certificates

Master's degree in public administration – finance concentration

Bachelor of Science degree in human services _____

UCLA/Johnson & Johnson – Health Care Executive Program _____

Optional – Have you received any awards or honors that you would like to mention?

How do you feel Nevada Primary Care Association would benefit from your involvement on the Board?

Extensive experience with the HRSA Health Center and Health Center Controlled Network programs. _____

Executive level leadership and business management experience. _____

Considerable program development, implementation, and evaluation experience. _____

Skills, experience and interests (Please circle all that apply):

Finance, accounting

Personnel, human resources

Administration, management

Nonprofit experience

Community service

Policy development

Program evaluation

Public relations, communications

Education, instruction

Special events

Grant writing

Fundraising

Outreach, advocacy

Other _____

Other _____

Other _____

Please list any groups, organizations or businesses that you could serve as a liaison to on behalf of Nevada Primary Care Association: Southern Nevada Health District/Southern Nevada Community Health Center/Health Center Controlled Network _____

Please tell us anything else you would like to share about yourself: Moved to Nevada in 2022. _____

Thank you for applying

Randy S. Smith

Objective To obtain an executive leadership position in a healthcare organization that offers opportunities to use my knowledge, skills, and abilities in a professionally stimulating environment to improve the quality of life of patients served and the work experience for the staff that care for them.

Strengths I am a mission and results oriented healthcare executive with over 20 years progressive leadership experience. I have proven leadership aptitude, excelling at translating an organization's mission and vision into tangible strategic actions and results. I have excellent communication skills and I am an articulate, self-confident speaker and writer. I thrive at partnering with organizational leaders to develop an agency culture conducive to delivering high quality clinical care, achieving an optimal patient experience, and maximizing access to services. I have strong strategic planning skills with the ability to convey complex information in a clear manner. I am a proficient strategic thinker, using metrics to develop, implement, and evaluate successful programs as well as solve complex organizational challenges. I possess exceptional organizational skills and I am capable of successfully balancing the demands of multiple projects, deadlines, and stakeholders.

Experience **Southern Nevada Health District (3/2022 – Present)**

Chief Executive Officer – Southern Nevada Community Health Center (11/23 – Present)

Operations Officer – Southern Nevada Community Health Center (3/22 – 10/23)

- Responsible for the day-to-day operations and administration of the Southern Nevada Community Health Center, a Federally Qualified Health Center operating within the Southern Nevada Health District providing nearly 12,300 comprehensive primary health care encounters to approximately 5,500 patients annually through two fixed site clinic locations.
- Oversight for Primary Care, Family Planning, Sexual Health, Ryan White, Behavioral Health, Refugee Health and 340B Pharmacy services.
- Responsible for the oversight and stewardship of a 26-million-dollars annual operating budget, including approximate \$8 million in yearly grant funds.
- Responsible for the oversight of federal grant program requirements, including service utilization, clinical quality programs, quality assurance and

improvement, risk management, contracting, credentialing and privileging, and finances.

- Design and implement policies and procedures to ensure compliance with HRSA requirements and government regulations.
- In collaboration with the Chief Financial Officer and the finance team, responsible for managing the health center's operating budgets, P&L statements, revenue cycle, and utilization models.
- Implement continuous improvement activities to reduce waste, increase efficiency, improve patient satisfaction, enhance clinical quality, and mitigate risk.
- Use programmatic and operational data to benchmark industry best practices to design, implement, evaluate, and improve services that carry forward the health center's mission and strategic objectives.
- Develop agendas and provide written and oral administrative and operational reports to the Governing Board and Committees of the Board.
- In partnership with the Governing Board, identifies potential new board members and facilitates the recruitment, orientation, and onboarding process.
- Collaborate with SNHD's Executive Team to provide planning, management, and leadership of organization-wide endeavors and strategic initiatives.
- Seven (7) direct reports and 104 indirect reports.

Camino Health Center (7/2007 – 2/2022)

Chief Operating Officer (10/2014 – 2/2022)

- Oversight of the day-to-day operations of a dynamic Federally Qualified Health Center (FQHC) operating three comprehensive community clinics providing approximately 78,000 primary medical, women's health, behavioral health, oral health, vision services, and WIC nutrition support encounters to 16,000 unique patients annually.
- Create and implement policies and procedures that supports 125+ employees and advances the goals of the Board of Director's in alignment with the organization's mission and 20-million-dollar annual operating budget.
- Develop and present program and operational reports to the Board of Directors.
- Facilitate the development, implementation, and monitoring of the organization's strategic plan.
- Utilize programmatic data and dashboards along with industry best practices to design, implement, and evaluate services that carry forward the health center's mission and objectives.
- Conduct community need and market analysis assessments to identify opportunities to develop business operations.
- Strategically developed the health center operations, increasing employee base by 187%, unique patients by 44% and annual encounters by 97%.
- Increased total revenue by 110% and net income by \$125%

- Researched and created sustainability plans for the expansion of services offered at the health center (adult dentistry 2017 and optometry 2019).
- Design and oversight over the creation of three patient centered healthcare facilities following OSHA and OSHPD requirements.
- In partnership with the Executive Leadership team, responsible for managing the health center's operating budgets, P&L statements, revenue cycle, staffing and utilization models, program design, contracts, and process improvement initiatives to achieve operational and financial goals.
- Responsible for the oversight of federal grant program requirements, including service utilization, clinical quality programs, quality assurance and improvement, risk management, corporate compliance, credentialing and privileging, human resources, and finances.
- Oversight of funder reporting requirements such as UDS and OSHPD.
- Management of approximately 36 million dollars in federal grant funding from the US Department of Health & Human Services and the US Department of Agriculture.
- Management of approximately 3.5 million dollars in local and private foundation grants.
- Implement continuous improvement activities to reduce waste and increase workflow efficiency, increase member satisfaction, improve HEDIS scores, enhance documentation integrity, capture accurate RAF scores, respond to patient grievances, and mitigate risk.
- Oversight in preparing and responding to funder and accrediting body audits such as CDPH, HRSA, NCQA, and CalOptima.
- Lead, mentor, and train the management team, a group comprised of 18 management personnel overseeing the health center's operations.
- Collaborates and leads the management team in the creation and implementation of organization-wide strategic initiatives.
- Four (4) direct reports (Clinic Director, Dental Director, Quality Improvement Director, and WIC Program Director). Ninety-six (96) indirect reports.
- Hold the roles of Corporate (Secretary), Compliance, and Privacy Officers.
- Lead administrator in the absence of the Chief Executive Officer.

Program Director (3/2012 – 9/2014)

- Responsible for procuring grant funds, developing and implementing programs, and evaluating the efficiency and effectiveness of services that support the health center's goals.
- Managed approximately 6 million dollars in federal grant funding from the US Department of Health & Human Services and the US Department of Agriculture.
- Managed approximately 1.2 million dollars in local and private foundation grants.
- Developed and presented program monitoring and operational reports to the Board of Directors.

- Completed required federal and state reports such as UDS and OSHPD.
- Facilitate the development, implementation, and monitoring of the organization's strategic plan. Conducted community need assessments.
- Research and create sustainability plan for the expansion of services offered at the health center (behavioral health 2014).
- Primary point of contact with Mission Hospital's Community Benefit department and key spokesperson for Camino with community partners.
- Lead administrator for the health center's dental department.
- Strategically grew annual dental encounters by 120% and patients by 82%.
- Ten (10) direct reports and twelve (12) indirect reports across three departments.
- Member of the health center's Management Team.

Program Manager (7/2007 – 2/2012)

- Researched and wrote competitive grant applications for funding to support health care services provided at Camino Health Center.
- Collaborated with Camino's medical and dental leadership teams to design, implement, and evaluate evidence-based programs.
- Completed funder required programmatic and financial reports.
- Managed approximately 2.4 million dollars in local and private foundation grants.
- Increased grant funding by 175%.
- Facilitate the development, implementation, and monitoring of the organization's strategic plan.
- Research and create sustainability plan for the expansion of services offered at the health center (Federally Qualified Health Center 2012).
- Established, maintained, and grew collaborative relationships with community stakeholders.
- Developed and presented program monitoring reports to the Board of Directors.
- Key spokesperson for Camino with community partners.
- Two (2) indirect reports.
- Member of the health center's Management Team.

St. Jude Medical Center (8/2001 – 6/2007)

Care Coordinator II (9/2004 – 6/2007)

- Managed the operations and the disbursement of approximately \$750k in funding to a countywide collaborative of non-profit agencies receiving Older Americans Act Title III-E grant funding.
- Tracked, analyzed, and reported monthly, quarterly, and annual program statistics.

- Assessed monthly invoices and supporting documentation for contract compliance.
- Provided technical assistance and training sessions to agencies receiving grant funding.
- Conducted annual program and fiscal audits to agencies providing grant funded services.
- Four (4) indirect reports.
- Case manager providing social services to eligible family caregivers caring for a loved one with lost or diminishing ability to care for themselves.

Care Coordinator I (5/2002 – 8/2004)

- Case manager providing social services to eligible family caregivers caring for a loved one with lost or diminishing ability to care for themselves.

At Your Service Coordinator (8/2001 – 4/2002)

- Visitors and guest relations.

Children’s Home Society of California (4/2000 – 4/2002)

Program Specialist I (4/2000 – 4/2002)

Affiliations

2018 – 2022: Orange County Partners in Health – HRSA Health Center Controlled Network – Board of Directors, Chair
2021 – 2022: Coalition of Orange County Community Health Centers – Board of Directors

Education

2009 – 2013: California State University, Fullerton
▪ Master’s in Public Administration, Finance Concentration
1996 – 2000: California State University, Fullerton
▪ Bachelor of Science, Human Services

Trainings

2019 UCLA/Johnson & Johnson – Health Care Executive Program
2019 Lean Six Sigma Green Belt Training – Lean Sigma Partners
2016 FTCA & Corporate Compliance Training – Primary Care Association
2014 Health Center Strategic Planning – NACHC
2012 New Health Center Training - NACHC
2009 Mission and Mentoring Leadership Formation – St. Joseph Health
2005 Facilitative Leadership – St. Joseph Health