

## MATERNAL AND CHILD HEALTH ADVISORY BOARD

DATE: August 2, 2024, TIME: 9:00 AM

*The meeting will be held via teleconference only. Members of the public who wish to attend and participate remotely are strongly encouraged to do so by utilizing the following meeting link or call-in number:*

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### **BOARD MEMBERS PRESENT**

Keith Brill, MD  
Fatima Taylor, M.Ed., CPM  
Rashanda Clemons, MD, FAAP  
Mario Gaspar de Alba, MD  
Elika Nematian, MPH

### **NON-VOTING BOARD MEMBERS PRESENT**

Senator Rochelle Nguyen  
Assemblywoman Tracy May-Brown

### **BOARD MEMBERS NOT PRESENT**

Melinda Hoskins, MS  
Marsha Matsunaga-Kirgan, MD  
Lora Redmond, BSN, RNC-OB, C-FMC

### **DIVISION OF PUBLIC AND BEHAVIORAL HEALTH (DPBH) STAFF PRESENT**

Vickie Ives, MA, Bureau Chief, Child, Family, and Community Wellness (CFCW)

Tami Conn, MPH, Deputy Bureau Chief, CFCW  
Tasha Cadwallader, MBA, Title V MCH Manager, Maternal, Child, and Adolescent Health, CFCW  
Cassius Adams, MS, Health Program Specialist I, MCAH, CFCW  
Jazmin Stafford, HPSI Contractor, MCAH, CFCW  
Helina Ashagrie, HPSI, MCAH, CFCW  
Andrea Valenzuela, MSW, Section Manager, MCAH, CFCW  
Chayna Corpus, MPH, HPSI, MCAH, CFCW  
Tom Fletcher, Management Analyst II, MCAH, CFCW  
Colleen Barrett, HPSI, MCAH, CFCW  
Meagan Maxwell, Administrative Assistant II, MCAH, CFCW  
Sarah Rogers, Nutrition Unit Deputy Chief, DPBH  
Shannon Frazer, Health Resource Analyst I, MCAH, CFCW  
Lily Stidham, Administrative Assistant I, MCAH, CFCW  
Desiree Wenzel, Bureau Office Manager, MCAH, CFCW

**OTHERS PRESENT**

Linda Anderson, Nevada Public Health Foundation  
Jeanna Freeman, Carson City Health and Human Services  
Denise Tanata, The Children's Cabinet  
Lisa Bevacqua, Molina Healthcare  
Kristin Wall, Molina Healthcare  
Maricruz Schaefer, Northern Nevada Public Health  
Allison Genco, Dignity Health  
Sabrina Schnur, Belz & Case Government Affairs  
Heike Ruedenauer-Plummer, ADSD Policy Unit

**1. Call to order/roll call – Keith Brill, MD – Chair**

Chair Dr. Keith Brill took attendance of board members.

Quorum was established and Chair Dr. Brill called the meeting to order at 9:05am

No public comment.

- 2. PUBLIC COMMENT: No action may be taken on a matter raised under this item unless the matter is included on an agenda as an item upon which action may be taken. The Chair of the Maternal and Child Health Advisory Board (MCHAB) will place**

**a five (5) minute time limit on the time individuals addressing the MCHAB. To provide public comment telephonically, dial 1-775-321-6111. When prompted to provide the meeting ID, enter 270 181 149 92. Members of the public utilizing the call-in (audio only) number may raise their hand by pressing \*5. Persons making comments will be asked to begin by stating their name for the record and to spell their last name.**

No public comment.

**3. For Possible Action: Approval of draft meeting minutes from the Maternal and Child Health Advisory Board (MCHAB) meeting on May 3, 2024. – Keith Brill, MD – Chair.**

Chair Dr. Brill called for a motion to approve the minutes. Chair Dr. Brill motioned to approve the minutes as written for the MCAHB Meeting that occurred on May 3<sup>rd</sup>, 2024. Fatima Taylor seconded the motion which was passed unanimously.

No public comment.

**4. Informational: Legislative 101 Presentation, Senator Rochelle Nguyen and Assemblywoman Tracy Brown-May**

Senator Rochelle Nguyen and Assemblywoman Tracy Brown-May gave a presentation on the Legislative Process in Nevada. The presentation highlighted key components of the legislative process in Nevada and explained how the session works. The presentation covered the legislative structure, process, resources for bill tracking, interim work, contacting elected officials, constituent services unit, and advocacy verses lobbying. The intention of this presentation was to education the MCHAB Members on how they can best provide support on bill draft requests and feedback provided to the DPBH Administrator.

Assemblywoman Tracy Brown-May opened the floor to questions

Chair Dr. Brill inquired as to what a state committee like MCHAB, can do when they have an idea for a bill.

Assemblywoman Brown-May said this committee has a structure that reports up through DPBH administration so there is consensus on the idea first. She noted she and Senator Rochelle Nguyen are also available to talk through the idea too.

Senator Nguyen also noted hearing the ideas firsthand can help to see if their idea fits anywhere in the existing bill draft requests (BDRs). Senator Nguyen also stated talking with DPBH administration is good to know if they are already working on something or want to put something forward for a BDR.

Dr. Clemons thanked the presenters for the presentation and requested clarification on the difference between advocacy and lobbying.

Assemblywoman Brown-May stated there is federal legislation that identifies when you are advocating and lobbying. It would be important to consider. If you are offering education to a lawmaker that is not your representative that is considered not to be lobbying. When you are talking with your representative and asking them to take a position on a bill that is considered lobbying. If you are offering your representative education on a topic that is considered advocacy. Most of the time, you are educating. There are paid lobbyists groups that do the lobbying. If you come to a legislative building to lobby, you will be required to register as a lobbyist, so you are properly identified in the building to comply with Nevada law on lobbying.

Chair Dr. Bill asked for public comment.

No public comment.

#### **5. For Possible Action: Approval of Future Meeting Dates – Keith Brill, MD – Chair**

Presented the following meeting dates for approval:

February 7, 2025, at 9am  
May 2, 2025, at 9am  
August 1, 2025, at 9am  
November 7, 2025, at 9am

Chair Dr. Brill motioned to approve the above dates. Elika Nematian chose to second the motion, which passed unanimously.

Chair Dr. Brill asked for public comment.

No public comment.

## **6. Informational: Nevada Craniofacial Clinic Overview – Dr. John Menezes, University of Nevada, Las Vegas (UNLV)**

Presentation was given by Dr. John Menezes, an academic surgeon in the Department of Plastic Surgery at the School of Medicine at UNLV. Dr. Menezes' presentation emphasized the importance of the craniofacial team he led from 2002-2020, which closed in 2020 and why it is important to restart the team. Dr. Menezes noted the clinic provides families with an interdisciplinary team of medical professionals to treat a child's complex medical problems generally associated with cleft lip/palate, and other craniofacial impacts. Cleft occurs around 1 in 1,000 persons with varied rates by race and ethnicity. Dr. Menezes noted as Nevada's general population increases, so will these impacts. Dr. Menezes continues to talk about the different types of impacts and health problems and interventions associated with each. Nevada is one of the two states along with Alaska that does not have a craniofacial team. He stated the reason the prior clinic closed was due to state defunding. His solution is state support, funding, medical professionals, positions provided by Nevada Early Intervention Services, and insurance coverage for the procedures. He estimated the basic budget requirement to reinstate the craniofacial team, excluding facilities fees, would be around \$4,579,000 for a 10-year period some of which was requested in the UNLV budget but noted there is not a guarantee of funding. To close his presentation, Dr. Menezes requested the support of MCHAB to help ensure the re-establish the cleft-craniofacial team.

Chair Dr. Brill asked how the MCABH can support the re-establishment of a craniofacial team in Nevada.

Ms. Tami Conn informed that since this item is information only, no action can be taken.

Chair Dr. Brill asked if the Board wants this as an action item can this be put on the next MCHAB agenda as such.

Ms. Vickie Ives advised that this item can be re-agendized as an item for discussion and possible action for the next meeting. She explained that at that time an action could be taken. She noted the option to make a recommendation to the DPBH Administrator.

Chair Dr. Brill stated that he would like this placed on the next agenda as an action item.

Senator Nguyen inquired if the suggested budget had been requested of Nevada System of Higher Education (NSHE) or if the budget was going to be incorporated in NSHE's overall budget or did UNLV make this request.

Dr. Menezes responded and stated that the medical school wanted to roll this into their overall budget. He does not know what the timeline on the budget is.

Senator Nguyen asked if legislative approval was needed to re-establish this team, or if funding was the only thing needed at this time.

Dr. Menezes confirmed and said the second part of his ask is sponsorship for an “ELSA type” bill.

Dr. Clemons thanked Dr. Menezes for his comprehensive overview. She noted her involvement with the craniofacial team from 2005-2011 and emphasized the importance of reinstating the craniofacial team. Dr. Clemons attests that as a board-certified pediatrician, she can collectively see the difference in those individuals who received coordinated specialized care and those who did not. Individuals who receive less coordinated care have more detrimental outcomes. Dr. Clemons inquired as to if there are other alternatives for funding other than NEIS that are necessary to get the craniofacial team re-established.

Dr. Menezes stated after talking with NEIS, the funding did not sound like it would be available. He stated that in his experience in California, a tertiary hospital would have the team and provide funding for such a team.

Dr. Clemons asked if they were unable to get funding, would there be barriers to getting the entire team back together.

Dr. Menezes stated the only barrier is the lack of specialists at the dental and medical schools. He does have several providers that has already agreed to provide 1-2 days a week in the clinic.

Dr. Clemons thanked Dr. Menezes and said his presentation was very helpful. Dr. Clemons then asked if this item could be moved to the next meeting as an actionable item.

Ms. Fatima Taylor thanked Dr. Menezes for the training. Ms. Taylor explained she believed that NEIS had to stop funding in part due to the funding from MCAH could no longer be applied to direct services, so NEIS was unable to continue their participation and explained that this has been a challenge along with some critical workforce shortages.

Chair Dr. Brill thanked Dr. Menezes for his presentation and asked for public comment.

No public comment.

**7. Informational: First Five Nevada Overview – Denise Tanata, J.D. Early Childhood Comprehensive Systems Advisor**

Presentation was given by Denise Tanata, the Early Childhood Comprehensive Systems Advisor with the Children’s Cabinet who described First Five Nevada as a holistic approach to the early childhood system. The resource provides access to programs and services for families and calculates what assistance for which they qualify. She reviewed the website, eligibility portal, key performance indicators, program inclusion process, collaboration opportunities, and advisory support. Ms. Tanata gave a demonstration of how to use the First 5 Nevada website and explained the purpose of the eligibility portal. Ms. Tanata recommended this Board could collaborate as Frist 5 does not have a medical professional on the team and she can provide any data reports of interest to the board.

Chair Dr. Brill asked for comments from Board members.

No comments.

Chair Dr. Brill asked for public comment.

No public comment.

**8. Informational: Health Resources and Services Administration, Early Childhood Comprehensive Systems Prenatal – 3 Strategic Plan – Tiffany Olivas, Early Childhood Comprehensive Systems Manager 2, The Children’s Cabinet**

Presented by Ms. Tiffany Olivas, Early Childhood Comprehensive Systems Manager for the Children's Cabinet. Ms. Olivas defined an early childhood system as a collection of all the programs, services, and other support for both children and their families. The presentation emphasized the goal to make access to resources equitable. Ms. Olivas talked about the idea of a statewide unified vision for total comprehensive and coordinated early childhood systems. Lastly, the presentation outlined next steps including: workplan development, coordination with aligned initiatives, and implementation.

Chair Dr. Brill thanked Ms. Olivas for her comprehensive presentation and asked for comments from Board members.

No comments.

Chair Dr. Brill asked for public comment.

No public comment.

**9. For Possible Action: Updates and possible recommendations regarding the Alliance for Innovation on Maternal Health (AIM) and the Maternal Mortality Review Committee (MMRC) – Tami Conn, MPH, Deputy Bureau Chief, CFCW, DPBH**

Ms. Conn advised that AIM is continuing the obstetric hemorrhage bundle in birthing facilities. Additionally, the program is working to get updated data from all the facilities. Ms. Conn stated the MMRC support staff is preparing the legislative report due in December, which is due every other year. Ms. Conn advised that the report from 2022 is posted on the website and she can provide the link if needed. MMRC will be presenting to the Nevada Office of Minority Health and Equity (NOMHE) Advisory Committee in the coming months, recommendations will be taken and submitted during that meeting.

Ms. Conn asked for questions from Board members.

Dr. Clemons thanked Ms. Conn for the update and inquired if AIM would pursue additional bundles such as hypertension.

Ms. Conn responded that the hypertension bundle was the first one that was implemented. Ms. Conn explained that ACOG's recommendation is to do one bundle a year. The hemorrhage bundle is the current one and there will be a new bundle come 2025. Ms. Conn explained that with AIM, most facilities will continue data collection on previously implemented bundles (i.e., hypertension).

Ms. Ives noted that the leadership team at AIM did decide that substance use disorder was chosen for 2025.

Chair Dr. Brill asked if the bundle for substance use disorder was already created.

Ms. Ives stated the bundles are created through ACOG and are standardized nationally through the AIM effort. Ms. Ives stated new bundles include perinatal mood disorders



and low risk c-sections. Ms. Ives explained hypertension and obstetric hemorrhage are the ones states generally begin with due to how quickly you see impact relating to implementation. Ms. Ives thanked the 10 of 17 birthing hospitals that participate.

Assemblywoman Brown-May questioned how data was being collected and in turn being published regarding the tracking of Medicaid for 12 months access to postpartum care.

Ms. Conn thanked Assembly woman Brown- May for the question. Ms. Conn explained the data is collected by the Office of Analytics and she is happy to get a report to Assemblywoman Brown-May on a later date after the meeting.

Chair Dr. Brill asked if there were still openings on the MMRC board.

Ms. Conn responded in the affirmative that one opening was available on the MMRC. Ms. Conn explained that applicants were received, and appointment to the Board would be forthcoming.

Dr. Clemons questioned if the top causes of maternal mortality in the state were being used to determine which AIM bundles would be implemented next.

Ms. Conn asked for clarification on the question if Dr. Clemons meant which bundles were selected, or for the design of new bundles.

Dr. Clemons stated she was asking specifically about bundle selection, not design.

Ms. Conn explained the first two bundles (hypertension and hemorrhage) were recommended by ACOG for new AIM states, it was also decided upon by the first application and with the first team of doctors who were involved.

Ms. Ives thanked Ms. Conn for the information. She then stated that the AIM leadership team that selected the bundles happened prior to an MMRC being created in our state. The MMRC data and the bundles have only been established and available for a short period of time.

Dr. Clemons thanked everyone for their responses and stated it was helpful.

Chair Dr. Brill asked for public comment.

No Public Comment

**10. Informational: Presentation on Maternal and Child Health (MCH) Reports and MCH Updates – Tasha Cadwallader, MBA, Title V Maternal Child Health Program Manager**

Ms. Tasha Cadwallader noted the block grant application was submitted on July 15<sup>th</sup>. Ms. Cadwallader mentioned anticipated attendance to the Las Vegas Maternal Child Health (MCH) Symposium in September. Ms. Cadwallader shared staff have attended multiple community outreach events over the past few months. She then reminded the Board that a Request for Information (RFI) was posted, requesting to fill the one current Board vacancy.

Chair Dr. Brill asked for questions from Board members.

No questions.

Chair Dr. Brill asked for public comment.

No Public Comment.

**11. For possible action: Make recommendations for future agenda items – Keith Brill, MD – Chair**

Chair Dr. Brill asked for questions from Board members.

No questions.

Chair Dr. Brill asked for public comment.

No Public Comment.

**12. Public Comment: No action may be taken on a matter raised under this item unless the matter is included on an agenda as an item upon which action may be taken. The Chair of the MCHAB will place a five (5) minute time limit on the time individuals addressing the MCHAB.**

No public comment.

**13. Meeting adjourned at 11:14 AM**

**Approved Future Dates:**

November 1, 2024, at 9am

February 7, 2025, at 9am

May 2, 2025, at 9am

August 1, 2025, at 9am

November 7, 2025, at 9am

\*\* All meetings are remote unless action upon those dates is presented in a following meeting.

DRAFT