

EXHIBIT F Health Care

Document consists of 31 pages.

x Entire document provided.

Due to size limitations, pages ____ provided. A copy of the complete document is available through the Research Library (775/684-6827) or e-mail library@lcb.state.nv.us. Meeting Date 4/10/08

MHDS Rural Clinics

Problems
And
Solutions

Who We Are



Rural Clinics Vision / Mission

Vision:

- Rural Clinics Will assist rural Nevadans with mental health challenges to realize their optimal potential as individuals and as valued citizens of their community and state.

Mission:

- Rural Clinics endeavors to provide for and enhance the mental health and well-being of the rural communities we serve.



RURAL CLINICS COMMUNITY OUTPATIENT SERVICE CENTERS

21 Centers Serving Rural Nevada Communities, over 98,000 sq. miles

Over 160 Mental Health Professionals provide Direct Services to over 5,000 Rural Adults, Adolescents and Youths Annually

SERVICES

Counseling Therapy

Medication Clinic

Service Coordination

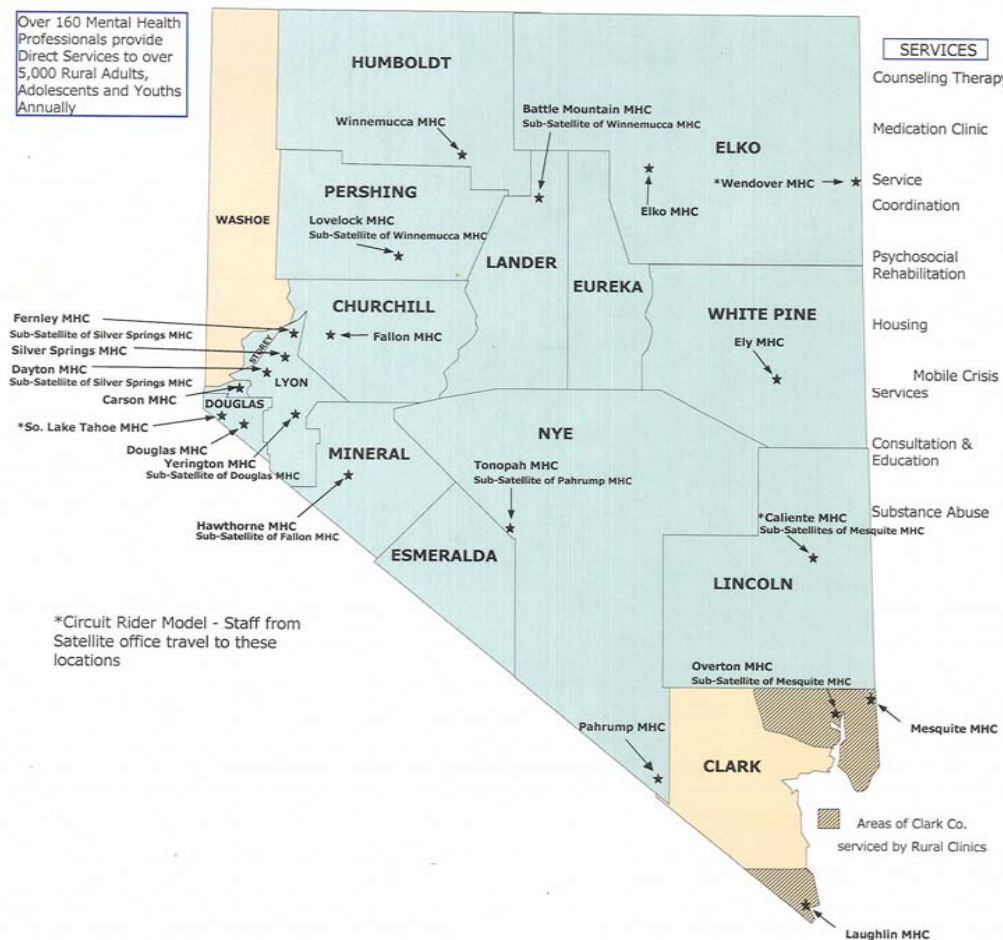
Psychosocial Rehabilitation

Housing

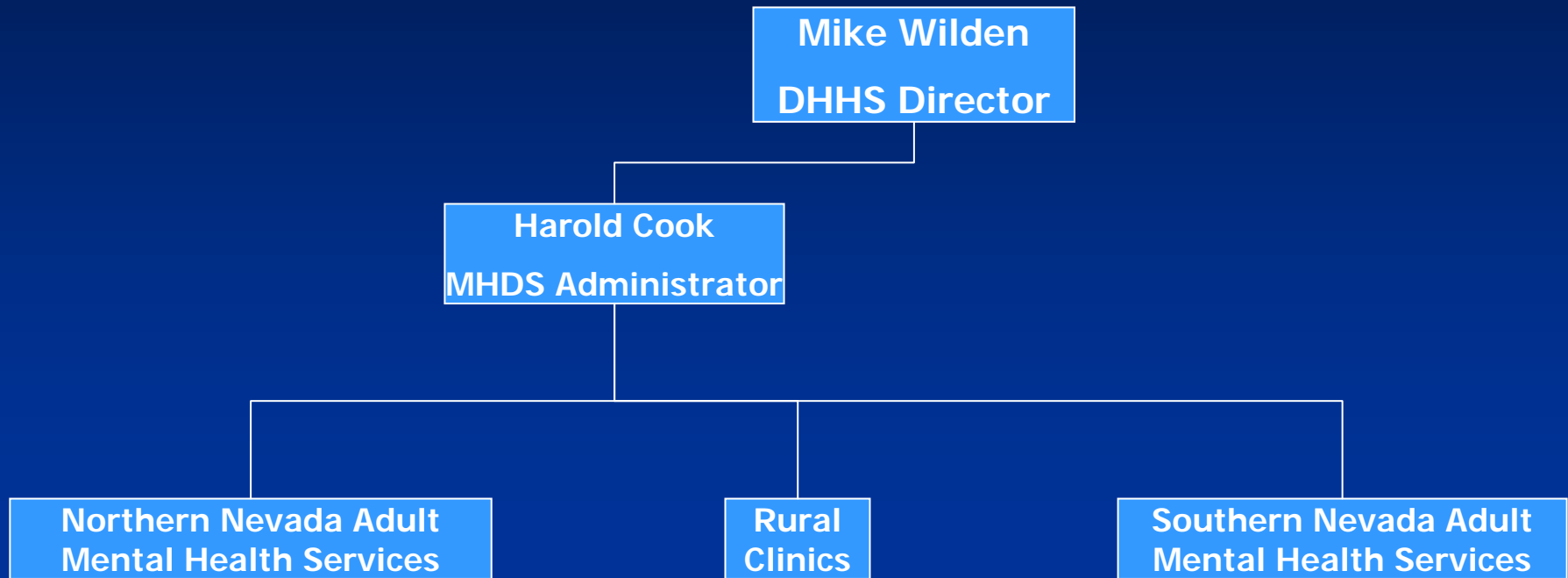
Mobile Crisis Services

Consultation & Education

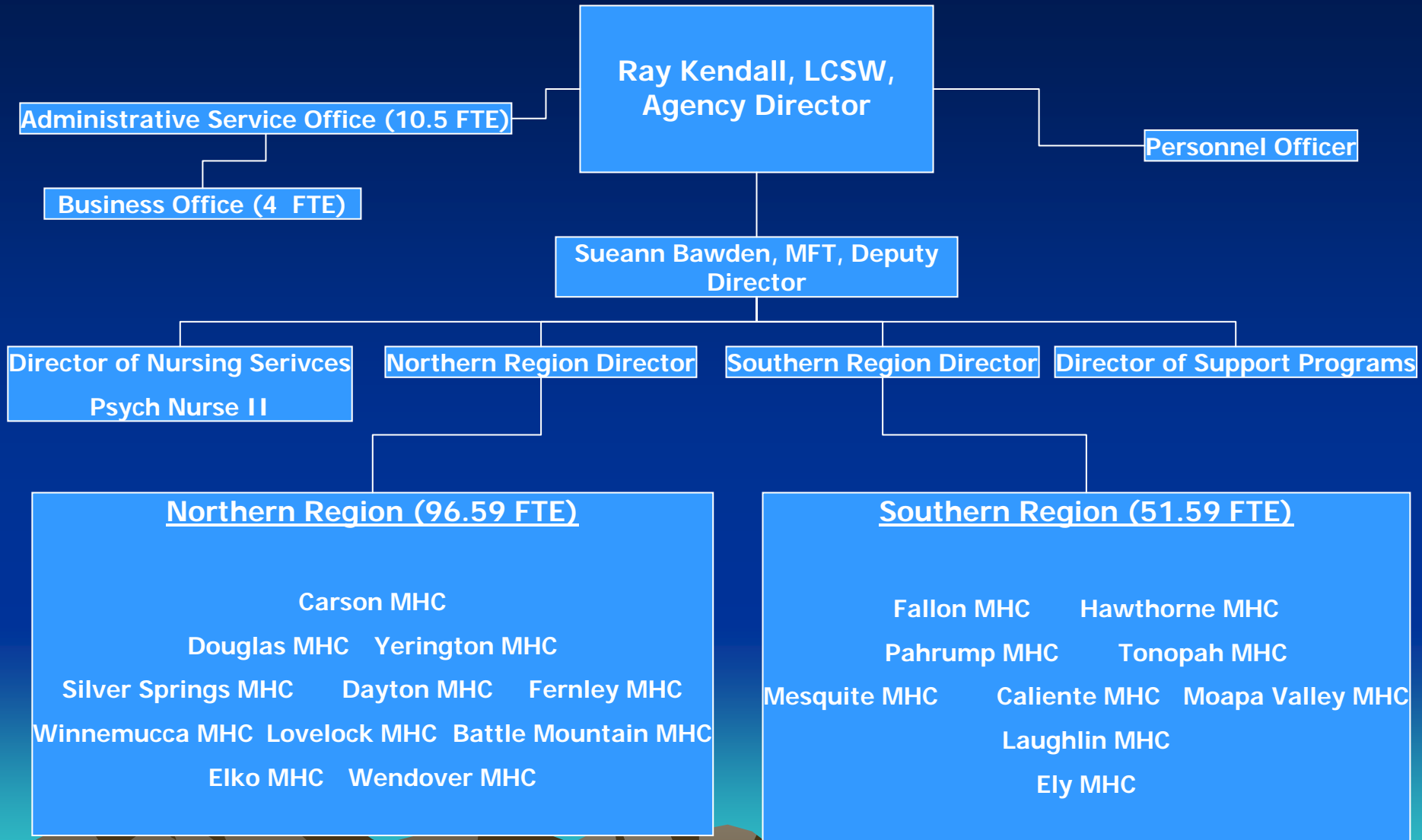
Substance Abuse



Mental Health Agencies within DHHS



Rural Clinics Organization

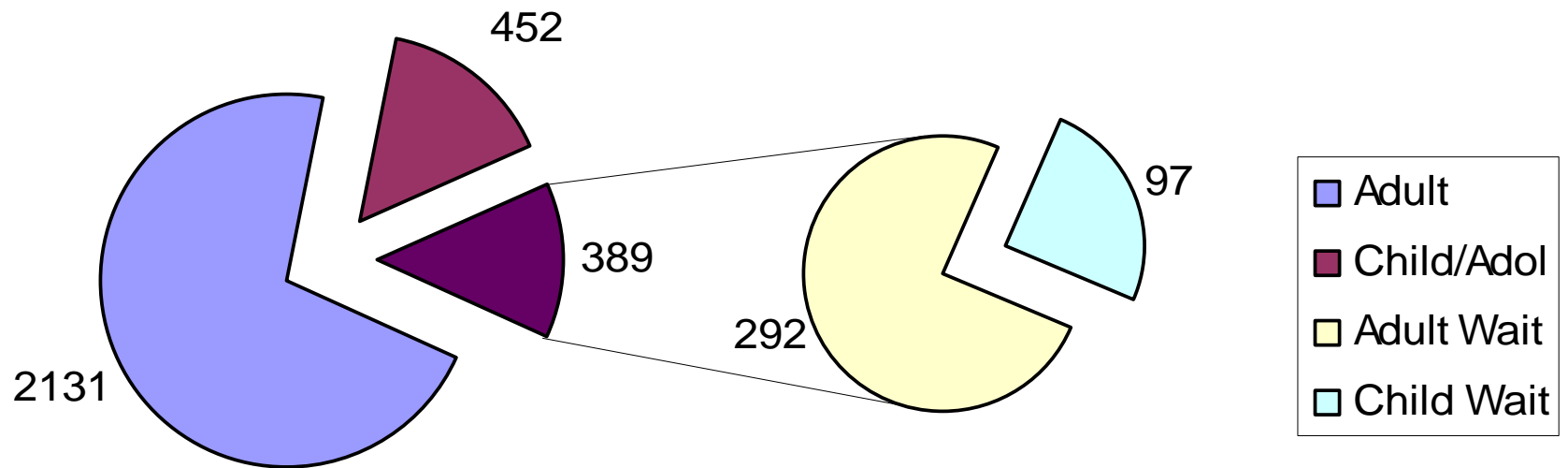


Who We Serve

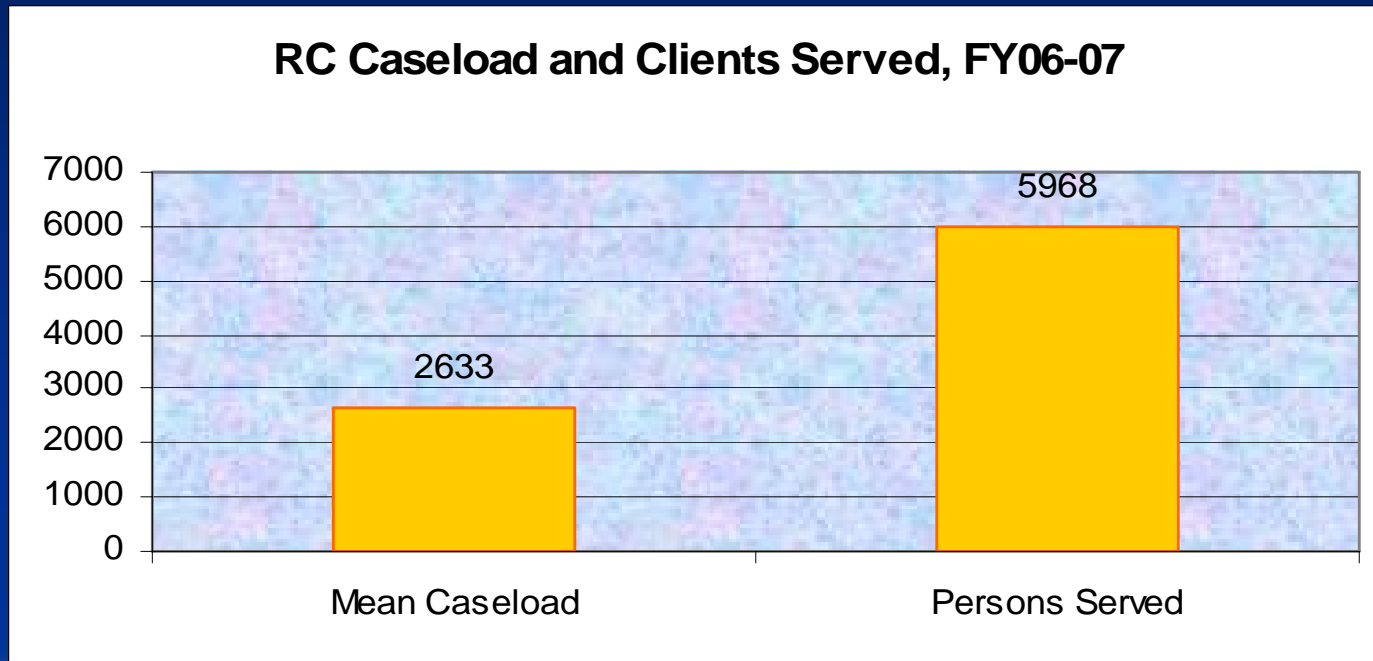


Rural Clinics Caseload

N=2972 (Feb 27, 2008)

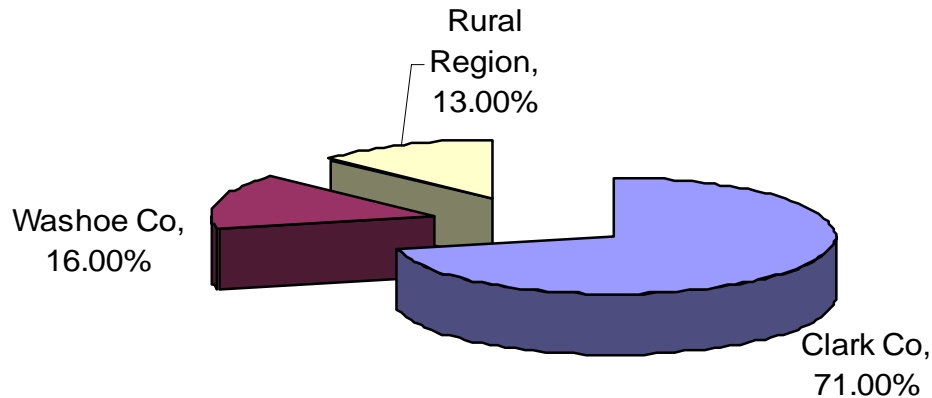


Caseload and Persons Served

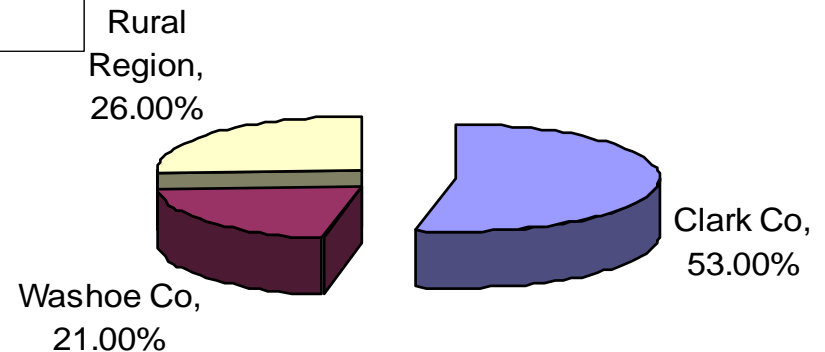


Need: Population vs. Caseload

Nevada % Population by Region

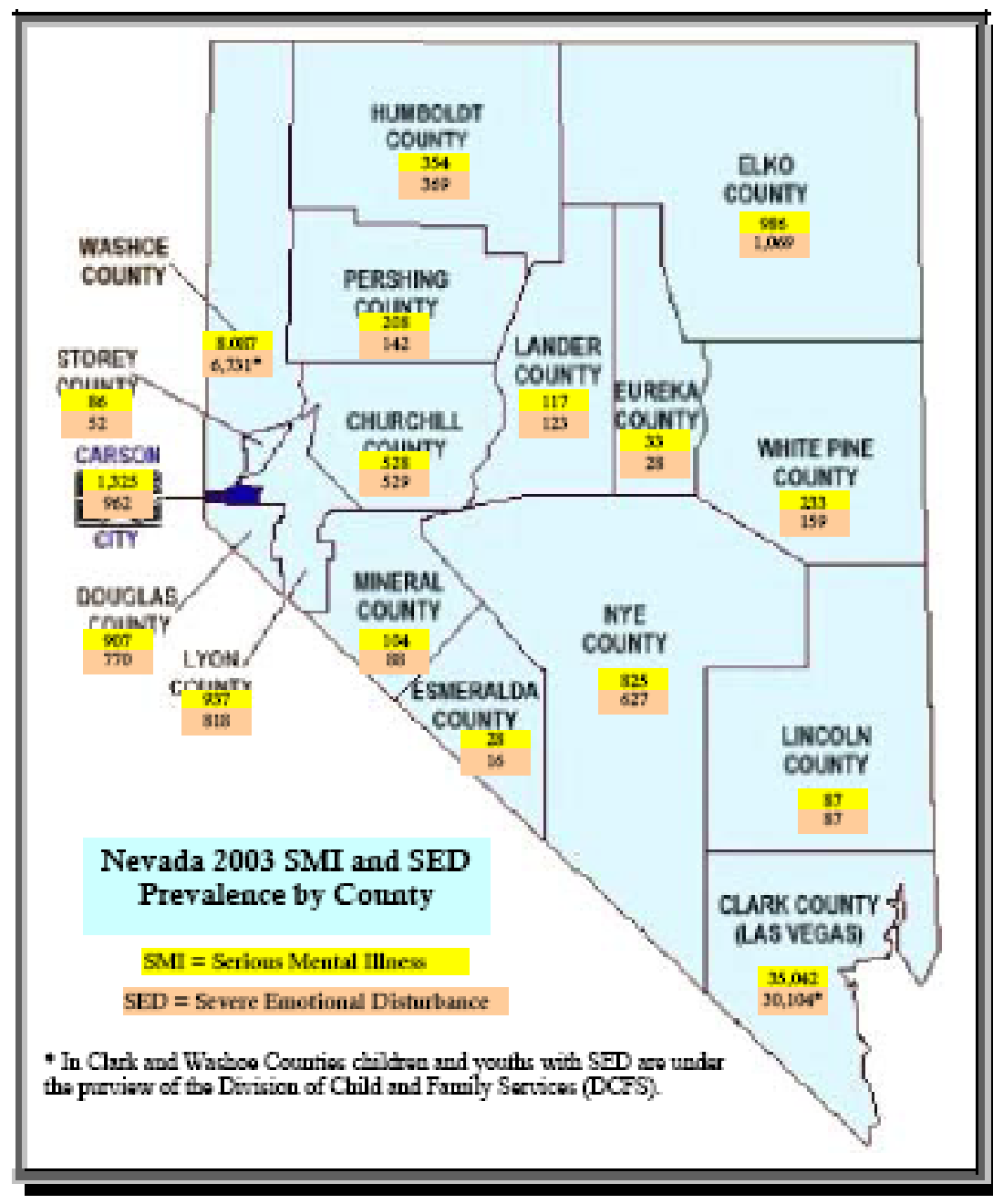


% MHDS Caseload



2004 SMI- SED Prevalence

Rural
Region:
6785 SMI
5839 SED

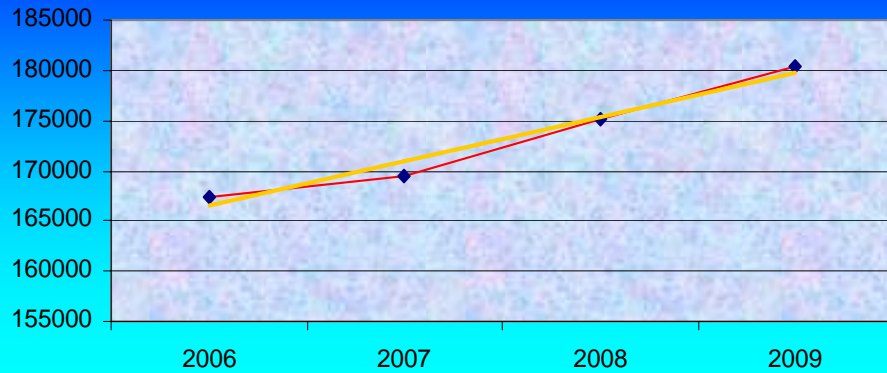


Projected Growth In Nevada, 06-09

Total Nevada Medicaid Projections 06-09

$$y = 4447x + 161994$$

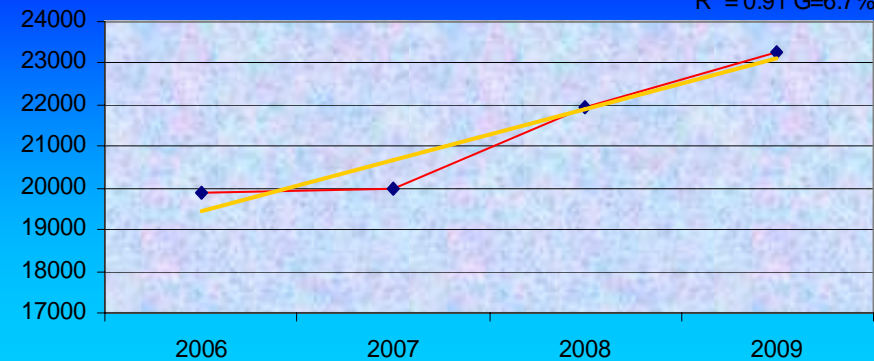
$$R^2 = 0.9 \quad G = 2.7\%$$



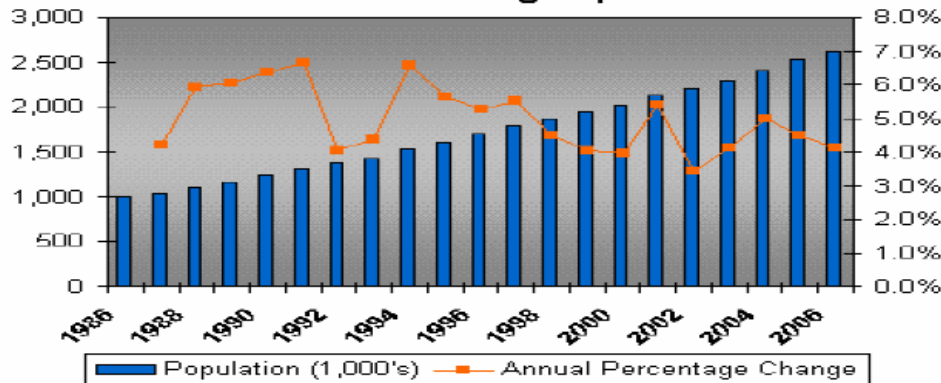
TANF Grants Nevada Projections 06-09

$$y = 1216.9x + 18230$$

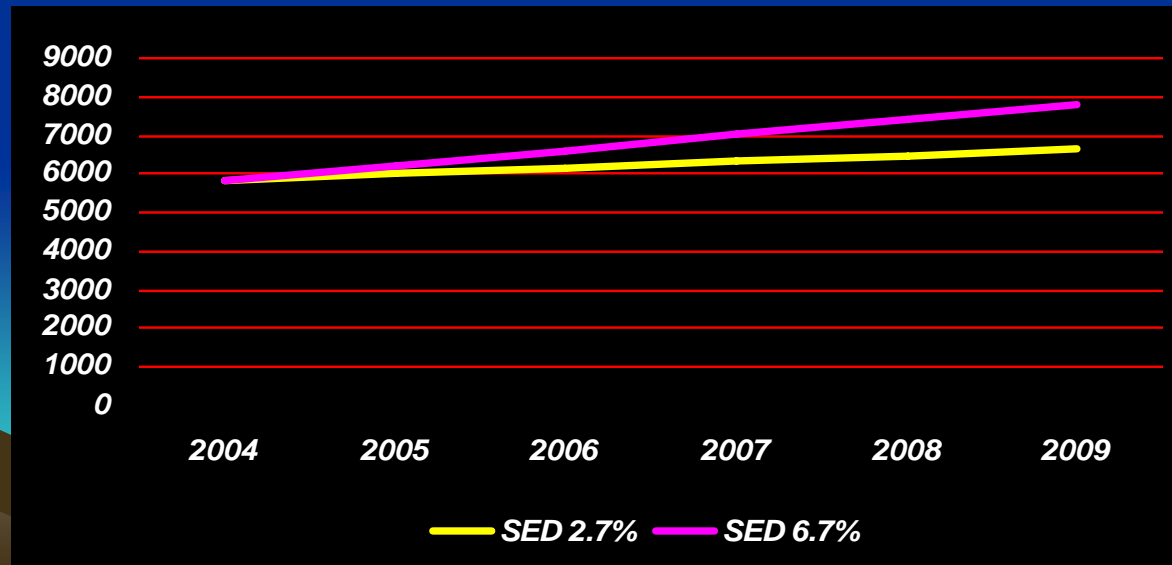
$$R^2 = 0.91 \quad G = 6.7\%$$



Nevada's Growing Population

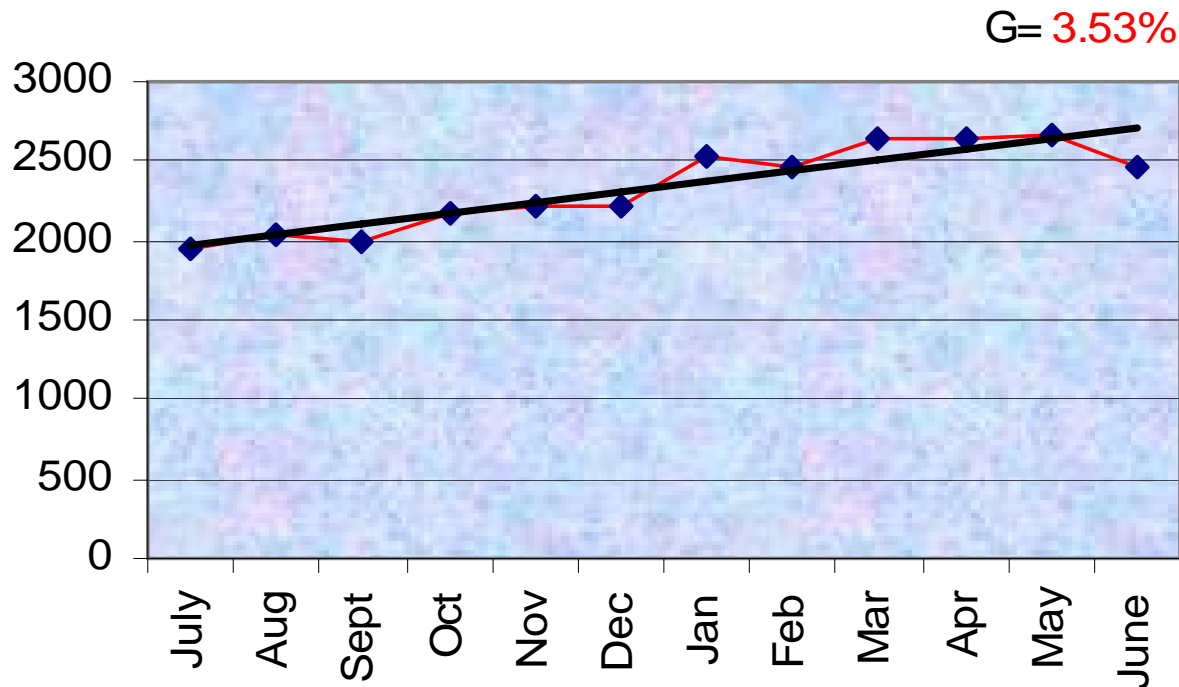


Projected Rural Nevada SMI-SED Growth '04-'09



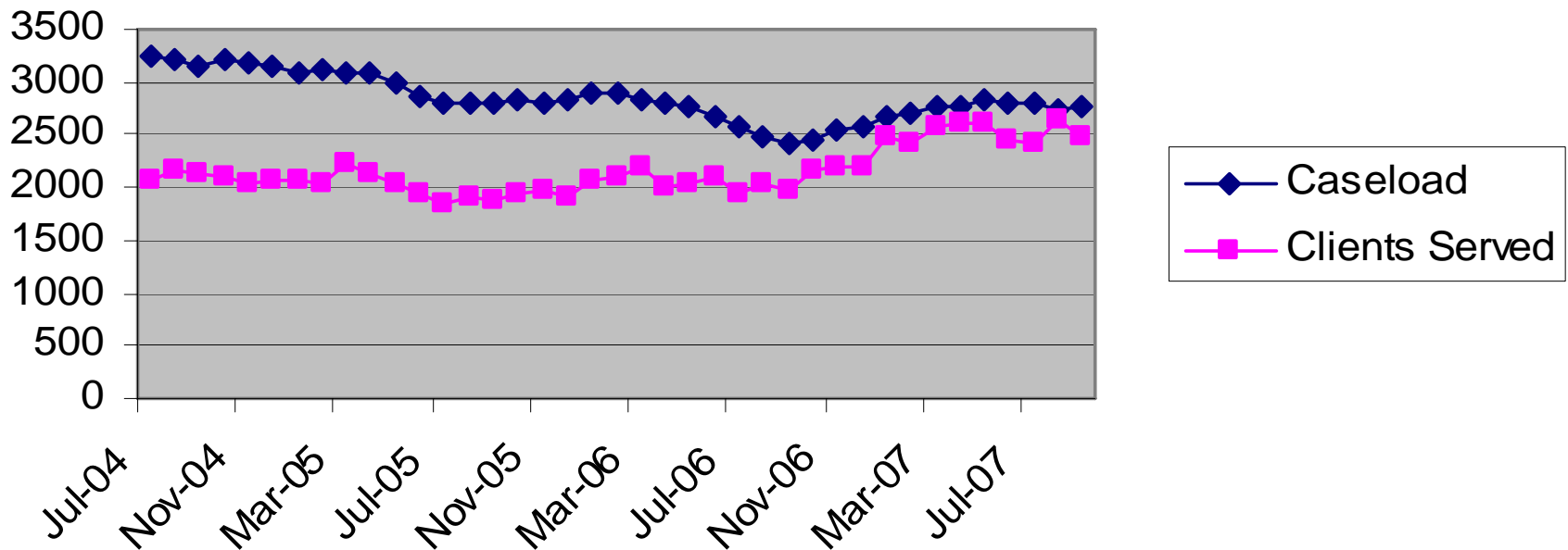
Increased Volume FY 06-07

Rural Clinics 06-07 Clients Seen: Growth 3.53%

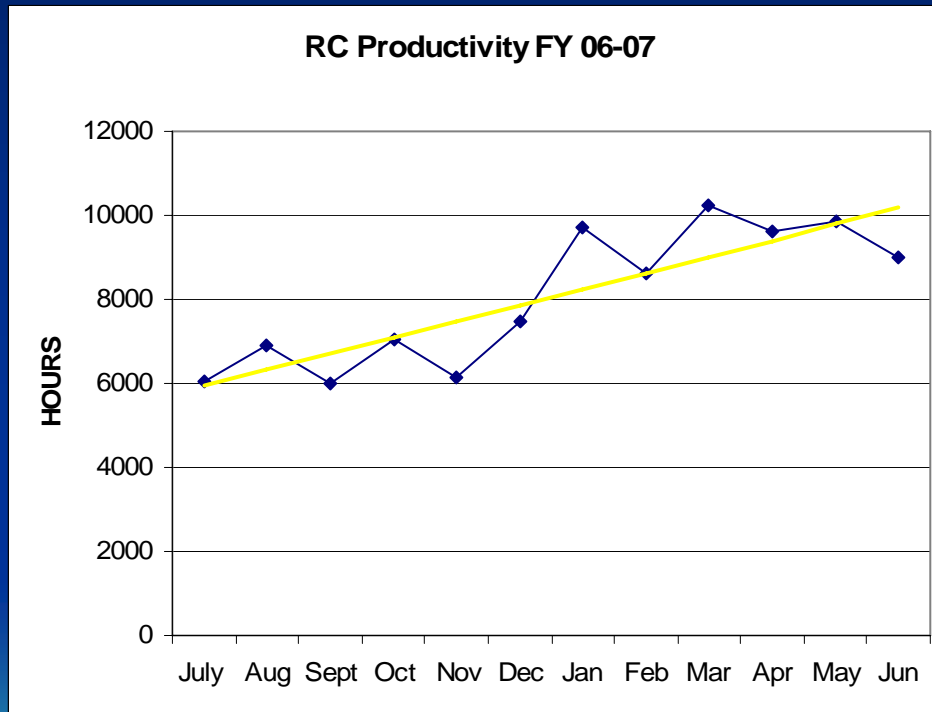


Service delivery vs. Caseload

Caseload vs Clients Served: RC data 04-07

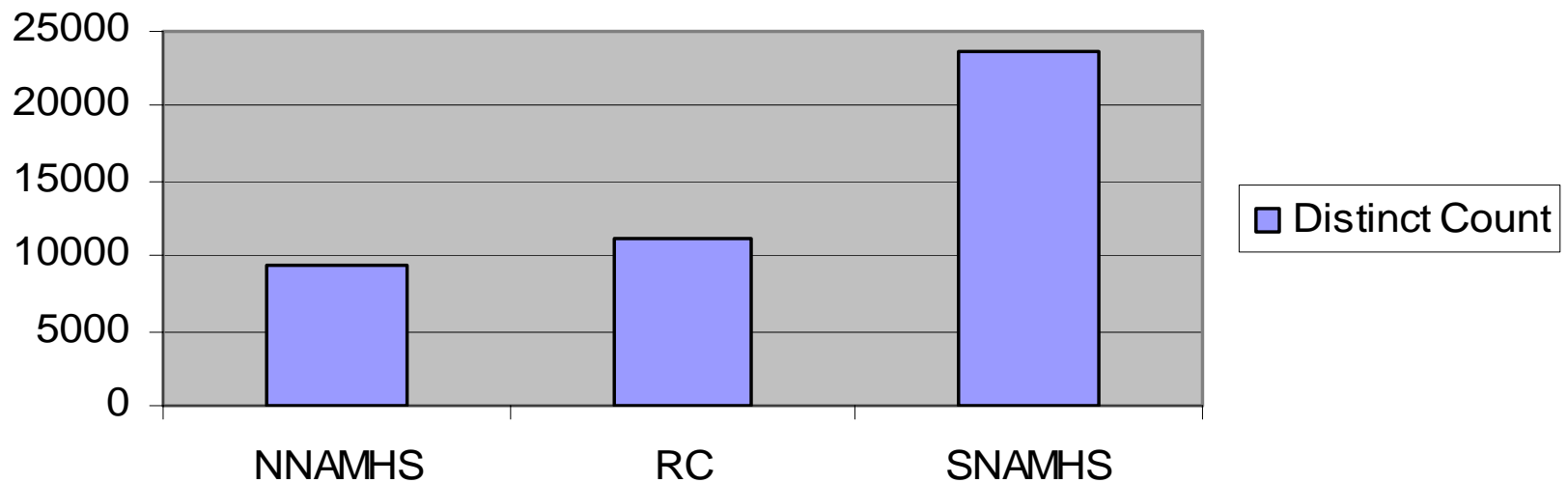


Rural Clinics Productivity FY 06-07



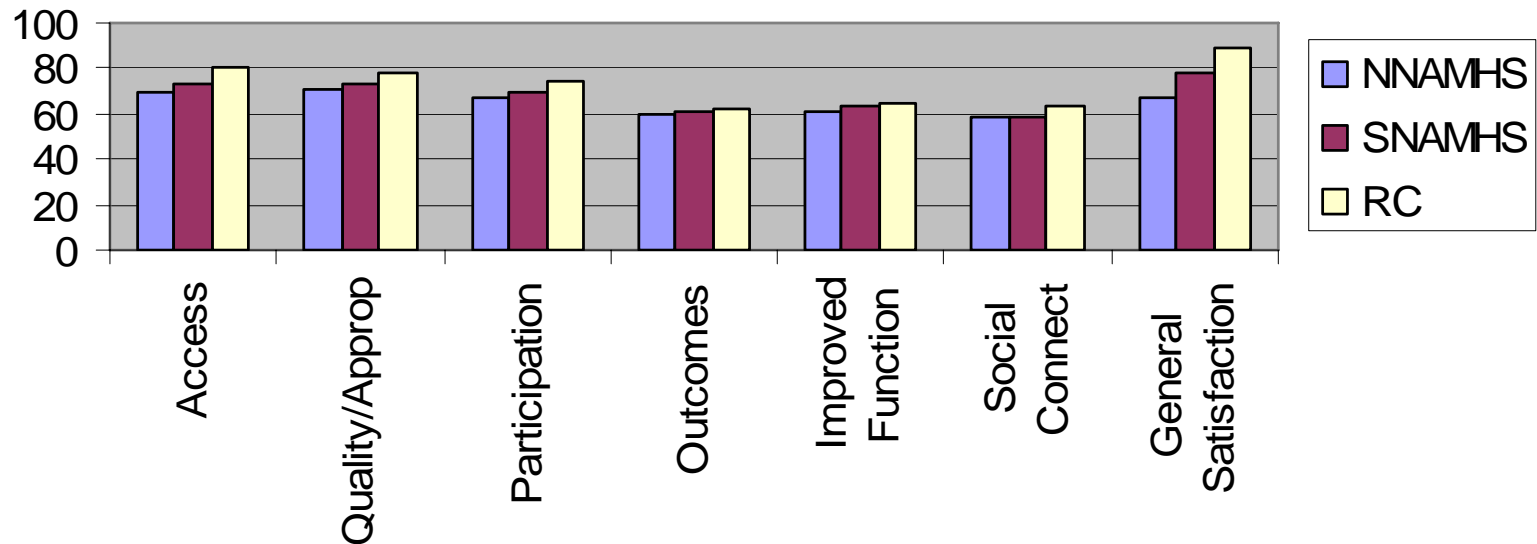
Total Clients Served by Agency

**Unduplicated Clients Served by Agency, July 2004
through August 2007**



Consumer Perception of Services

**MHDS Consumer Survey 2007: % Positive Responses,
NNAMHS, SNAMHS, RC**



Medication Savings

- Scholarship and Medication Sample Patient Assistance programs
- \$708,998 savings in 2007
- \$139,251 savings in 2008
- \$848,249 diverted from General Fund



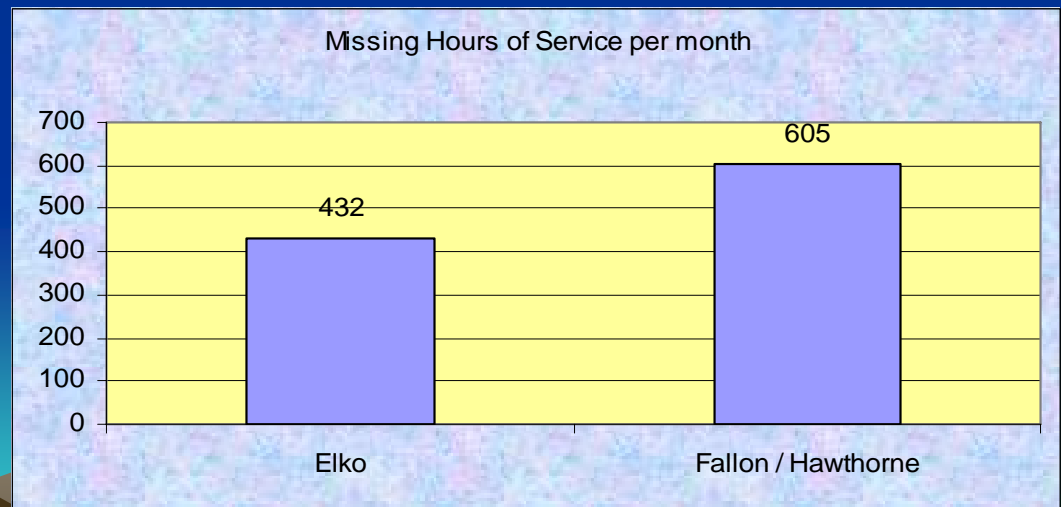
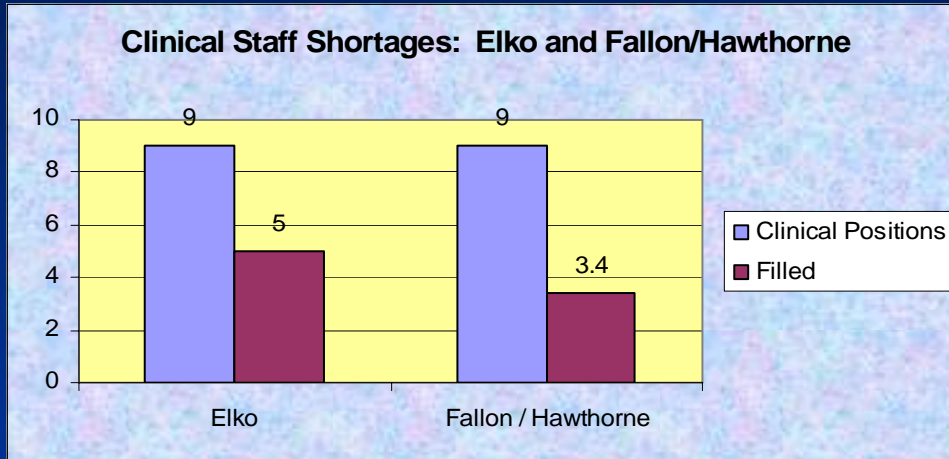
Challenges



Issue: 42% Turnover

Position	Turnover % (Positions Affected)	Mean vacancy (Months)	Longest Vacancy (Months)
• Center Director	60% (6/10)	8	13
• Mental Health Counselor III	50% (2/4)	9.2	13
• Mental Health Counselor II	47% (8/17)	1.2	30
• Psychiatric Caseworker II	42% (8/19)	9.6	22
• Clinical Social Worker II	38% (5/13)	10.1	28
• Licensed Psychologist I	21% (3/14)	7.2	17

Impact: Elko and Fallon/Hawthorne



Turnover: Psychiatry

- Medication clinic services are provided in 18 of 21 centers statewide.
- 11 Psychiatrists quit in the last year, creating 26 vacancies (some centers experienced multiple vacancies)

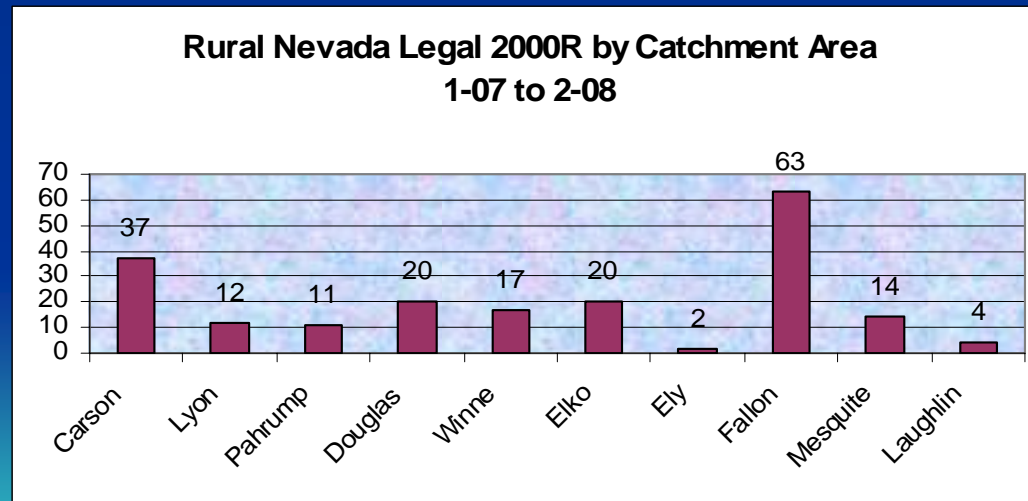


Loss of 24-hour Emergency Services

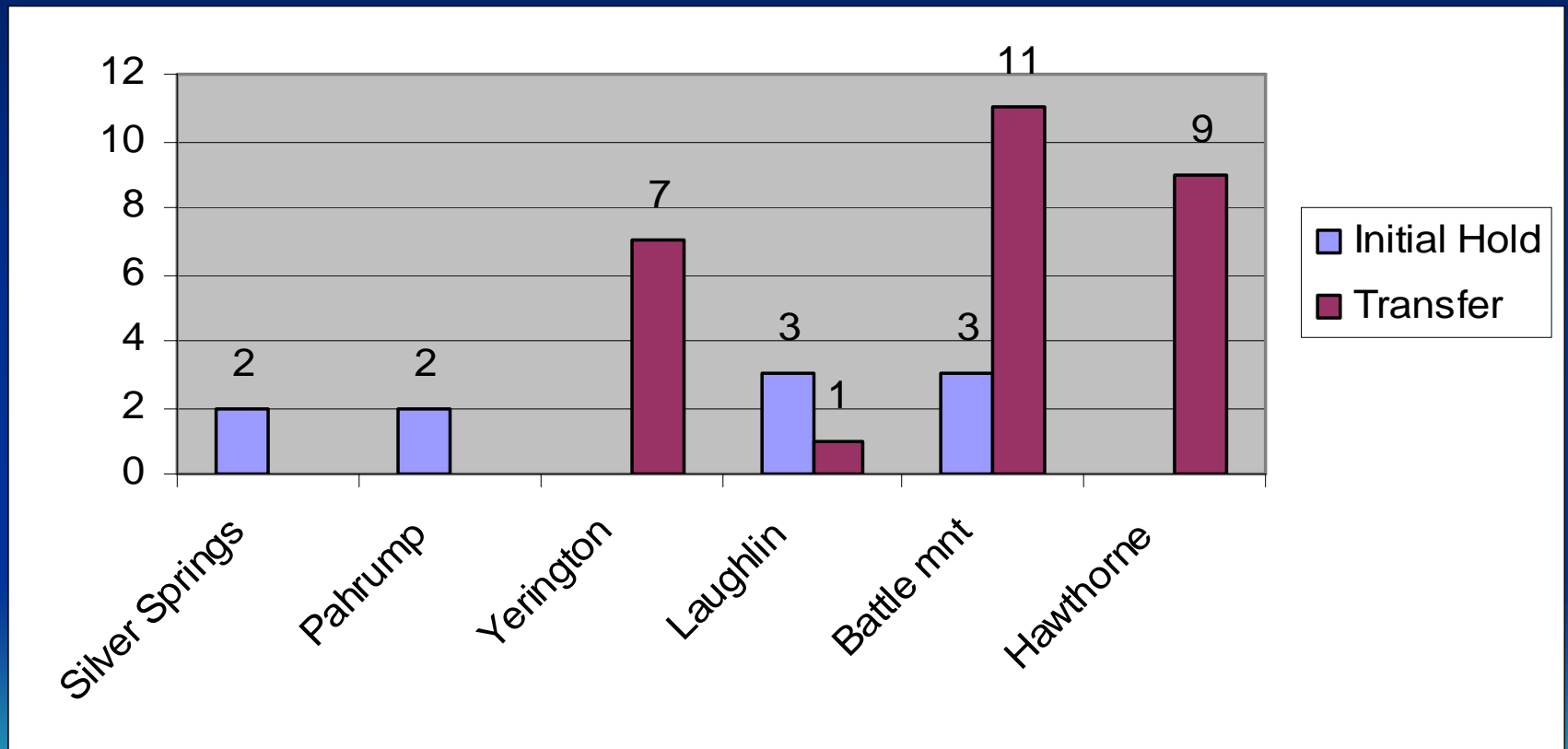
Gap in System of Care: 24-hour crisis stabilization services are a basic component of community-based care at all levels of client need

Decreases Interagency Collaboration/Cohesion

Overtime / Standby costs, FY 06-07: \$208,864, 62,206 Standby



Emergency Transportation



Inadequate Children's Services: Northern Nevada

322 children in Northern Nevada are served by 34 clinical staff

2 Child specific Service Coordinators

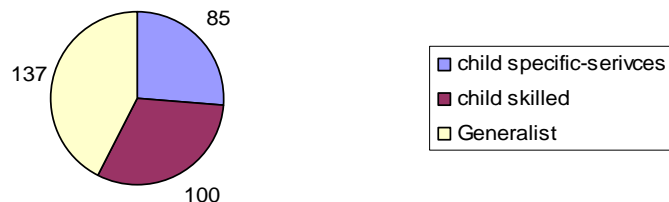
2 Child specific Therapists

4 Child Specialty Therapists

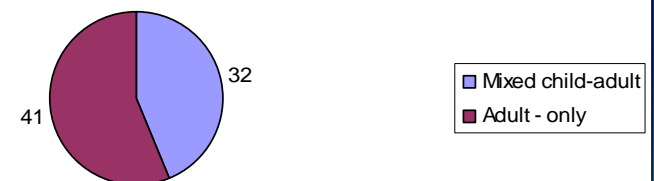
26 Generalists

1239 Adults also served by these staff

Northern Centers, Child Specialization

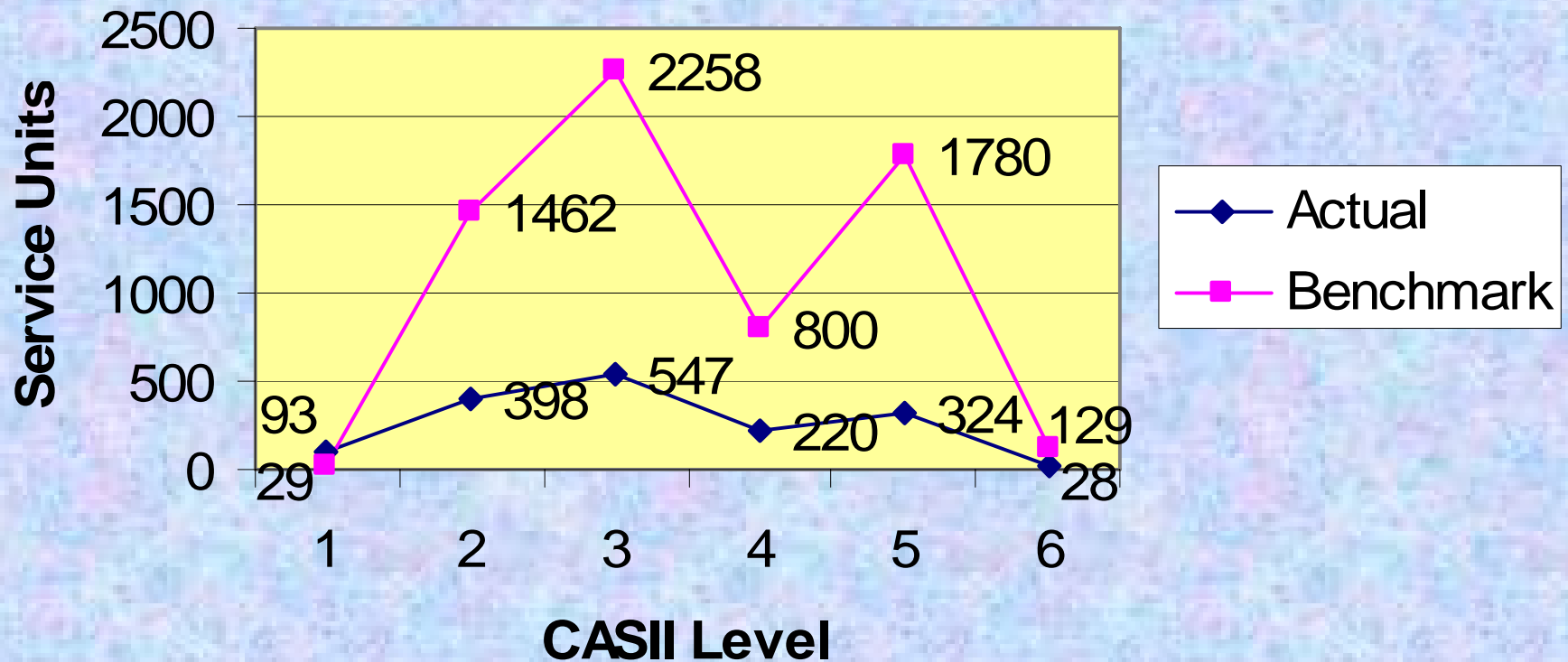


Northern Nevada Child/Adult Caseloads



Acuity and Service Delivery

Benchmark vs Actual RC Child/Adolescent Utilization



Solutions:

Exploring Alternative Models

- Evidence-based Practices
- Consolidation of Centers
- Data-based decision making
- Psychiatric-Consultant Model / ARNP / Telepsychiatry
- Increased use of Groups
- Para-professional providers



What we need

- CPC Regs and Insurance Commission
- Allow clinical interns to bill insurance LBD
- Dec Unit M203 positions restored with caseload adjustments to a significant number providing child services
- Medical Director
- Financial / Training Incentives
 - Travel, Training and Budget and Support
 - Pay Differential and Signing Bonus
 - PERS 6 for 5 year benefit
 - Relocation benefits
 - Increase Recruitment Resources
 - WICHE



End



