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Overview of SB341 (2021) Equitably Proportionate Distribution of Funding

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Department of Health and Human Services

Helping people. It's who we are and what we do.





Agenda

- 1. Review of SB341 (2021) components codified in:
 - NRS 439.259
 - NRS 433.359
- 2. Overview of DHHS block grants addressing disparities in health care and health outcomes on categories of persons listed in NRS 439.259 (3)
- 3. Overview of DHHS block grants addressing disparities in behavioral health care and outcomes on categories of persons listed in NRS 433.359 (3)
- 4. American Rescue Plan Act



Introduction

Nevada Office of Minority Health and Equity (NOMHE)

- Program within the Director's Office of Department of Health and Human Services (DHHS)
- NOMHE Mission: To avoid and/or reverse disproportionately experienced, health-related disparities among the state's most vulnerable, high-risk populations.

Division of Public and Behavioral Health (DPBH)

- One of five divisions of the Department of Health and Human Services (DHHS)
- **DPBH Mission:** To protect, promote, and improve the physical and behavioral health and safety of all people in Nevada, equitably and regardless of circumstances, so they can live their safest, longest, healthiest, and happiest life.



Overview of NRS 439.259

- Established by Senate Bill 341 in the 81st Legislative Session (2021)
- NRS 439.259 authorizes the Division of Public and Behavioral Health (DPBH) to:
 - Apply for grants for addressing disparities in health care and health outcomes based on race, color, ancestry, national origin, disability, familial status, sex, sexual orientation, gender identity or expression, immigration status, primary language or income level
 - Where the extent is authorized by a grant, use a competitive process to select and award a grant of money to a nonprofit organization to serve as a lead partner to ensure that health care services supported are funded and allocated in an equitable manner
 - Where the extent is authorized by a grant, establish and consult with an advisory committee to ensure that health care services supported by a grant are provided in a culturally competent manner.



Overview of NRS 439.259, continued

- NRS 439.259 requires the Department of Health and Human Services to complete a report that includes:
 - The amount of money allocated by the Department during the immediately preceding calendar year to support the provision of health care services or other services to promote physical well-being in communities with higher risk of health problems, decreased access to or usage of health care services or worse health outcomes or physical well-being than the general population based on race, color, ancestry, national origin, disability, familial status, sex, sexual orientation, gender identity or expression, immigration status, primary language or income level
 - A description of services provided and the efforts made to locate persons in need of such services
 - Number of persons who received the services described and information regarding the income level, age, race, and ethnicity of those persons



Overview of NRS 433.359

- Established by Senate Bill 341 in the 81st legislative session (2021)
- NRS 433.359 authorizes the Division of Public and Behavioral Health (DPBH) to:
 - Apply for grants for addressing disparities in behavioral health care and behavioral health outcomes based on race, color, ancestry, national origin, disability, familial status, sex, sexual orientation, gender identity or expression, immigration status, primary language or income level
 - Where the extent is authorized by a grant, use a competitive process to select and award a grant of money to a nonprofit organization to serve as a lead partner to ensure that health care services supported are funded and allocated in an equitable manner
 - Where the extent is authorized by a grant, establish and consult with an advisory committee to ensure that services supported by a grant are provided in a culturally competent manner.



Overview of NRS 433.359, continued

- NRS 433.359 requires the Department of Health and Human Services to complete a report that includes:
 - The amount of money allocated by the Department during the immediately preceding calendar year to support the provision of behavioral health services or other services to promote emotional well-being in communities with higher risk of behavioral health problems, decreased access to or usage of behavioral health services or worse behavioral health outcomes or emotional wellbeing than the general population based on race, color, ancestry, national origin, disability, familial status, sex, sexual orientation, gender identity or expression, immigration status, primary language or income level
 - A description of services provided, and the efforts made to locate persons in need of such services
 - Number of persons who received the services described and information regarding the income level, age, race, and ethnicity of those persons

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Overview of DHHS Grants Addressing Health Care and Health Outcomes listed in NRS 439.259



Overview of DHHS Grants Addressing Health Care and Health Outcomes listed in NRS 439.259

- Disparity reduction in health outcomes is routinely embedded in categorical funding across the Department and the Division of Public and Behavioral Health (DPBH)
- Prevention of health disparities is part of the core DPBH Mission:
 - To protect, promote, and improve the physical and behavioral health and safety of all people in Nevada, equitably and regardless of circumstances, so they can live their safest, longest, healthiest, and happiest life.



CDC Health Disparity Grant

- Received \$32 million from July 1, 2022, to May 31, 2024, to improve outcomes regarding the following strategies:
 - Expand existing and/or develop new mitigation and prevention resources and services to reduce COVID-19 related disparities among populations at higher risk and that are underserved.
 - Increase/improve data collection and reporting for populations experiencing a disproportionate burden of COVID-19 infection, severe illness, and death to guide the response to the COVID-19 pandemic.
 - Build, leverage, and expand infrastructure support for COVID-19 prevention among populations that are at higher risk and underserved.
 - Mobilize partners and collaborators to advance health equity and address social determinants
 of health as they relate to COVID-19 health disparities among populations at higher risk and
 that are underserved.



CDC Health Disparity Grant Implementation

- COVID-19 vaccination services
- Health Equity Unit establishment within DPBH to manage grant
- Director's Office, working with Family Resource Centers improve access to resources, and services to rural communities
- Nevada Office of Minority Health and Equity community-based outreach, resources and training for partners to identify health equity disparities
- Maternal Child and Adolescent health action planning and program expansion
- Faith-based intervention plan and training of community health workers
- University of Nevada, Las Vegas, Process Evaluation report to bolster Community Based Participatory data collection for the Health Disparity award



CDC Health Disparity Grant Implementation, continued

- Truckee Meadows Community Coalitions established Safe Zone trainings for Northern Nevada rural communities
- Northern Nevada Public Health established a Health Equity Unit within organization
- Southern Nevada Health District works with the Nevada Department of Corrections to collect STI information to prevent the venereal disease spread
- Xquisite established support groups for incarcerated sexual assault survivors
- Heathy Community Coalition temporarily hired over 50 Community Health workers to various community coalitions
- Nevada Cancer Coalition improved cancer awareness within priority populations
- ACCEPT referred people living in HIV/AIDS to psychosocial services



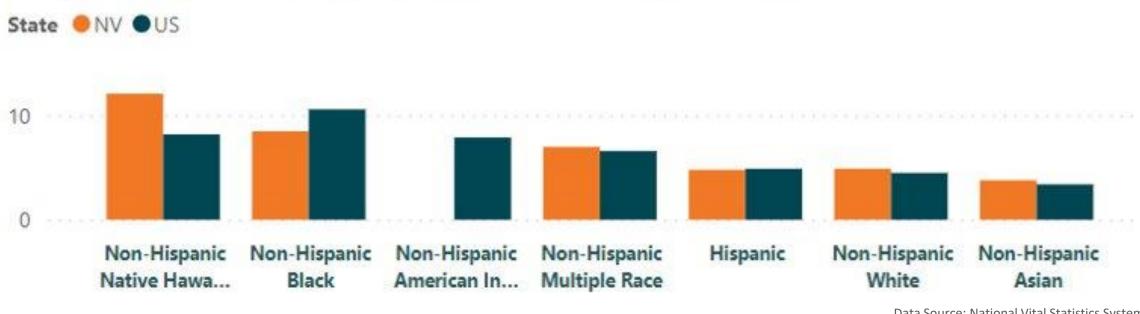
Title V Maternal Child Health (MCH) Block Grant

- Federally Available Data (FAD) state and national reporting on the Title V MCH National
 Outcome Measures and National Performance Measures include equity across race and
 ethnicity, disability status, language access, insurance status, rural and urban areas, gender,
 etc.
 - Examples related to infant and maternal mortality disparities to which programmatic funding and efforts are dedicated follow; disparity reduction to improve health outcomes are embedded throughout Title V MCH efforts.
- As a condition of funding, awardees use person-first language, use the CDC Health Equity Guiding Principles for Inclusive Communication, and hold at least one staff meeting to discuss the following, as applicable, to their funded activities
 - Using a Health Equity Lens, Key Principles, Preferred Terms, Developing Inclusive Communications, Inclusive Images, Resources and References
- Each funded agency attended at least one diversity, equity, and inclusion training, workshop, or webinar pertinent to the populations they serve.
- Use of multiple languages in public facing messaging is core in communications



Title V Maternal Child Health (MCH) Block Grant, Continued

2018 2020 Infant Mortality Rate per 1,000 live births by Race/Ethnicity

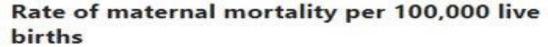


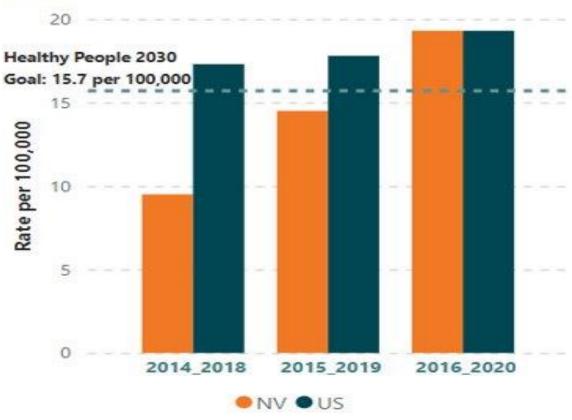
Data Source: National Vital Statistics System

Title V MCH funds the only Fetal Infant Mortality Review in Nevada and statewide safe sleep efforts



Title V Maternal Child Health (MCH) Block Grant, Continued





Data Source: National Vital Statistics System 15



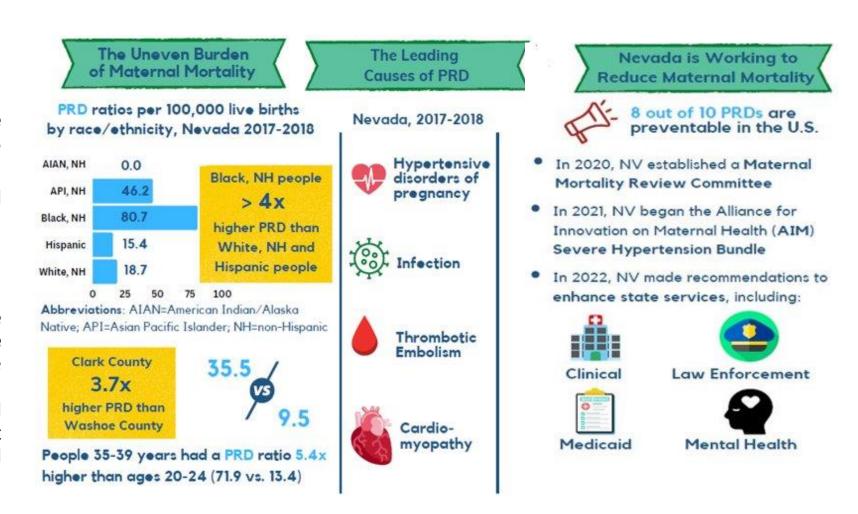
Title V Maternal Child Health (MCH) Block Grant Continued

Pregnancy-Associated Death (PAD)

Death to a person from any cause while pregnant or within 1 year of the end of pregnancy. Includes both pregnancy related and incidental causes

Pregnancy-Related Death (PAD)

Death to a person from any cause related to or aggravated by the pregnancy or its management while pregnant or within 1 year of the end of pregnancy. Includes both maternal deaths and late maternal deaths but not from accidental or incidental causes





Preventative Health and Health Services (PHHS) Block Grant

- PHHS Block Grant is a flexible funding source that fills gaps and provides services specific to state needs from the Centers for Disease Control and Prevention (CDC).
- The block grant work plan is developed in collaboration with DPBH programs and partners and must reflect Healthy People 2030 Objectives.
- The work plan and budget are heard and receive feedback from the Advisory Council on the State Programs for Wellness and Prevention of Chronic Disease (CWCD) and the local health authorities are funded to meet grant objectives.
- Grant objectives:
 - Monitor and understand the public health workforce
 - Reduce the proportion of adults with obesity
 - Reduce the proportion of children and adolescents with obesity
 - Reduce the proportion of adults with chronic kidney disease
 - Reduce adolescent sexual violence



Preventative Health and Health Services (PHHS) Block Grant, continued

- A legislatively mandated set aside must be allocated to Rape Prevention efforts with the Maternal, Child, and Adolescent Health (MCAH) Section and Rape Prevention and Education Program (RPE).
 - The RPE Program uses PHHS funds to support the Nevada Coalition to End Domestic and Sexual Violence (NCEDSV) who provide cross-training workshops for the prevention of relationship abuse in young adults living with developmental disabilities.
- The Wellness and Prevention Program is funded through the PHHS block grant to reduce weight stigmatization, prioritize healthy behaviors for preventing chronic diseases and associated disparities, and secure program funding.
- The program also implements the Chronic Disease Prevention and Health Promotion (CDPHP) Worksite Wellness Program and coordinates the collection and reporting of height and weight for children in schools as mandated by Nevada Revised Statute NRS 392.420.
- PHHS-funded health equity training will identify disparities and initiatives to improve health equity. Monthly health equity topics are part of the CDPHP Section meetings and program staff share the information with partners.



Federal Grants to the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

- The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides federal grants to states for supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age 5 who are found to be at nutritional risk.
- WIC is effective in improving the health of pregnant women, new mothers, and their infants.
 - WIC intervenes at critical times of growth and development.
 - Studies show that women who participated in WIC during their pregnancies had lower Medicaid costs for themselves and their babies than women who did not participate.
- Nevada WIC's Total approved budget is \$47,525,656.00 for FY 2024.
- As of December 2023, Nevada WIC had 11,656 women, 13,088 infant, and 28,633 children participating



Women's Health Connection (WHC) and Well-Integrated Screening and Evaluation of Women Across the Nation (WISEWOMAN)

- WHC receives flexible funding from the Centers for Disease Control and Prevention (CDC) to extend critical support to individuals with low incomes who do not have adequate insurance. WHC provides access to breast and cervical cancer screening and diagnostic and treatment services, including mammograms, HPV (Human Papilloma Virus) tests, pap tests, and other diagnostic and treatment procedures.
 - Since its inception in 1997, Nevada's WHC has screened over 80,000 women for breast or cervical cancer.
- In 2021, Nevada was awarded the WISEWOMAN grant
 - Expands WHC screenings to include cardiovascular risk assessments
 - The program's focus is on the timely detection and treatment of hypertension and high cholesterol among low-income, uninsured, or underinsured individuals aged 35 to 64
- In 2023, WHC received \$3,257,721 and served 5,978 women:
 - Conducting breast cancer screenings for 4,718 individuals; and
 - 3,550 cervical cancer services
- WISEWOMAN program facilitated screenings for 297 women using \$543,269 in federal funds



Community Service Block Grant

 Based on the 200% Federal Poverty Level, direct services are provided statewide with this funding to meet the needs of underserved, low-income individuals, and families, including those with disabilities, seniors, and disparate populations. Direct services include rental assistance, utility, transportation, domestic violence advocacy, meal delivery services to homebound seniors due to COVID-19 requirements and restrictions, children's educational assistance, access to technology, employment education and opportunities for low-income eligible clients, activities including housing, nutrition, utility, and transportation assistance; employment, education, and other income and asset building services; crisis and emergency services.

• Total amount FY23: \$4,098,000.39



Social Services Block Grant - Title XX

 SSBG supports programs that allow Nevada communities to achieve or maintain economic self-sufficiency to prevent, reduce or eliminate dependency on social services. SSBG funds a variety of initiatives for children and adults to include: case management; employment services; foster care services; prevent or remedy neglect, abuse, or exploitation of children and adults unable to protect their own interests; preserve, rehabilitate, or reunite families; prevent or reduce inappropriate institutional care by providing for community based care, or other forms of less intensive care; secure referral or admission for institutional care when other forms of care are not appropriate; and/or provide services to individuals in institutions

• Total amount FY23: \$12,643,766.50



Centers for Disease Control and Prevention Cooperative Agreement Funds to Nevada State Immunization Program

- Nevada State Immunization Program (NSIP) provides vaccines to children who are uninsured or insured by Medicaid, provides vaccines to adults with no insurance, and promotes vaccine awareness and points of access within underserved communities throughout the State.
- The public portal, a tool Nevadans may use to access their official immunization record in NV WebIZ, has been upgraded to allow for the content to display in Spanish.
- Funds made available to NSIP through CDC to support the COVID vaccine response required that a certain portion of the award directly fund equity work.
 - Examples include:
 - Engaging trusted messengers within historically underserved populations to convey accurate COVID vaccine information,
 - Deploying mobile vaccination units and strike teams to communities that experience barriers to vaccine access as a result of living within a provider desert or within regions experiencing transportation challenges
 - Promoting vaccine confidence across the state through the Vaccine Equity Collaborative.



Nevada Public Health Infrastructure Grant (PHIG)

- DPBH has provided funding to current and developing health districts to decrease health disparities in rural and urban settings.
 - Northern Nevada Public Health demonstrates this commitment by maintaining four positions that will focus on health equity-related goals.
 - PHIG funds will support Carson City Health and Human Services by increasing its internal infrastructure to provide public health programs and maintain its information systems.
 - The Central Nevada Health District will utilize PHIG funding to transition from a rural health office to a Health District, expanding access to public health services for rural Nevadans. Lyon County Human Services will develop a feasibility study exploring the creation of a health district for the quad-county region of Nevada, comprising Carson City, Douglas, Lyon, and Storey counties.
 - Southern Nevada Health District received this grant directly from CDC, so efforts in Clark County are not included in the DPBH award.
- DPBH also continued to fund a public health liaison through the Nevada Association of Counties (NACO). This position will liaise with county/state officials to develop and improve health services and build capacity for responding effectively to current and future public health threats. The overarching objective for both rural and urban health districts is to reduce health disparities unique to their surrounding communities.



Nevada Public Health Infrastructure Grant (PHIG), continued

- The collective emphasis is on developing and enhancing quality internal training opportunities and maintaining accreditation with the Public Health Accreditation Board (PHAB) to ensure that competent care and quality services will continue to be provided consistently.
- DPBH will also continue to fund the Nevada Office of Minority Health and Equity (NOMHE). This investment aligns with the program's goal of strengthening public health infrastructure and addressing disparities across diverse communities, emphasizing the importance of cultivating a robust and inclusive public health system.
- In addition to supporting the Diversity, Equity and Inclusion work with community partners and NOMHE, DPBH is also in the process of developing a full-time state position to serve as the cultural navigator and tribal liaison for the agency. Though these functions have been shared among various staff members in the past, with this grant, DPBH wanted to ensure a staff person could focus their effort on this activity full-time.



Overview of DHHS Grants Addressing Disparities in Behavioral Health Care and Health Outcomes listed in NRS 433.359



CDC Health Disparity Grant Implementation Relevant to NRS 433.359

- CDC Health Disparity Grant Implementation
 - Behavioral health services and supports through the Bureau of Behavioral Health Wellness and Prevention
 - Resiliency Ambassadors interactions in SFY 23
 - Creation of UNLV Latinx Toolkit
 - Crisis Support Services
 - Listening Sessions with Social Entrepreneurs, Inc.
 - Center for the Application for Substance Abuse
 - Technology Trainings



Substance Use Prevention, Treatment, and Recovery Services Block Grant

- Funds targeted prevention efforts for LBGTQ+ and Native American youth via numerous Nevada Prevention Coalitions
- Active military and veteran outreach
- Targeted services to pregnant and women with children and persons addicted to the use of intravenous drugs
- Residential treatment services provided across the state, ensuring Rural Nevadans have access



State Opioid Response

- Increased production and distribution of culturally appropriate translated materials and direct outreach/materials/training in alternative languages
- Engagement with Faith Based Organizations
- Partnerships with peer mutual aid groups and prevention coalitions.
- Establishing relationships with labor associations
- Tribal partnerships
- Homeless outreach in Clark County



State Pilot Grant Program for Treatment for Pregnant and Postpartum

- Provides treatment to pregnant and postpartum women in Reno and Lyon counties
- Provides peer support and wrap around supports for pregnant and postpartum women



Community Mental Health Services Block Grant

- Nevada Suicide and Crisis Lifeline (988) has programs to serve LGBTQ+,
 Veterans
- NAMI Warmline and Caring Contacts is available for supports and staffed with peers with a focus on cultural competency, underserved communities (specifically, rural and frontier Nevada)
- Homelessness outreach
- Assertive Community Treatment programs are funded in rural Nevada, focusing on diverting individuals from the criminal justice system
- Pediatric Access Line supports physicians in Nevada with psychiatric support to best serve their patients across Nevada communities



Projects for Assistance in Transition from Homelessness (PATH)

 Connecting those experiencing homelessness with resources and assistance for housing.



988 Cooperative Agreement

- Working with tribal consultants to gauge interest in 988 program and work towards collaboration.
- Working to develop and sustain culturally competent programs for Veterans and LBGTQ+ callers/texters/chatters.



American Rescue Plan Act

 Many projects and initiatives have been funded statewide with the American Rescue Plan Act (ARPA) and funding supports projects to address health disparities and vulnerable, high-risk populations.



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https://dhhs.nv.gov/Programs/CHA/MH/

https://dpbh.nv.gov/



Acronyms

ARPA – American Rescue Plan Act BIPOC – Black, Indigenous, and People of Color CDC – Centers for Disease Control and Prevention CDPHP – Chronic Disease Prevention and Health Promotion Program

CWCD – Advisory Council on the State Programs for Wellness and Prevention of Chronic Disease DHHS – Nevada Department of Health and Human Services

DPBH – Division of Public and Behavioral Health LGBTQ+ - Lesbian, Gay, Bisexual, Transgender, Queer/Questioning +

MCH – Title V Maternal Child Health Block Grant MCAH – Maternal, Child, and Adolescent Health Program

NACO – Nevada Association of Counties NOMHE – Nevada Office of Minority Health and Equity NRS – Nevada Revised Statutes

NSIP – Nevada State Immunization Program

PAD – Pregnancy Associated Death

PHAB - Public Health Accreditation Board

PHHS – Preventative Health and Human Services

Block Grant

PHIG- Public Health Infrastructure Grant

PRD- Pregnancy Related Death

SSBG – Social Services Block Grant

STI – Sexually Transmitted Infection

WIC – Women, Infants and Children

WISEWomen - Well-Integrated Screening and

Evaluation of Women Across the Nation

WHC – Women's Health Connection



DHHS Data Dashboards

OFFICE OF ANALYTICS - DATA & REPORTS (nv.gov)