

Behavioral Health Systems in Rural and Frontier Nevada: Challenges, Assets, and Policy Opportunities

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Regional Behavioral Health Policy Boards and Coordinators

- NRS 433.425 through 433.4295
- Multidisciplinary boards representing local interests and needs
- Each Board has the opportunity to submit 1 BDR per legislative session
- Each Board has a Regional Behavioral Health Coordinator (RBHC)
- RBHCs work on behalf of their Boards within the respective regions and statewide as necessary

Rural Challenges

- Varied availability of local-level public funding
- Lack of providers
- Lack of providers with adequate experience and/or training at key points of entry
- Overall lack of housing, but more so for specialty housing for behavioral health
- Physical distance to both emergency and non-emergency behavioral health care
- Transportation

Rural Challenges

- Lack of supportive services to address the “Social Determinants of Health” (SDOH)
- Gaps in coverage of deflection and diversion programs
- Lack of high quality internet connectivity
- Silos generated by narrow scopes of work
- Lack of mechanisms that support complex case management across parts of the behavioral health and health care system
- Lack of access to crisis and inpatient care

Rural Assets

- Building high-quality deflection and diversion programs in some areas
- Increased number and momentum of cross-county and cross-jurisdiction collaborations
- Local-level support and initiatives for behavioral health system improvement
- Increased momentum and focus to address behavioral health workforce shortages at state and local levels



Policy Opportunities

Peers (SUD/ODU and/or Mental Health)

- Peer Support: Creation of a State-Level Peer Recovery Support Specialist Career Path
- Deflection/Diversion from CJS: Behavioral Health Conditional Dismissal for Low-Level Offenders

Crisis Response:

- Funding to expand in-person Children's Mobile Crisis Response Teams across rural Nevada
- Creation of Crisis treatment or service centers that could be sub-steps for the formal Crisis Stabilization model that was passed by the Washoe Board in 2021.
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Policy Opportunities

Complex BH Cases and Case Management

- Creation of a local-level Multi-Disciplinary Team (MDT) lever for persons with complex behavioral health conditions, similar to those available through ADSD (NRS 200.5098) and DCFS.
- Increased and/or expanded Medicaid reimbursement for case management

Post-Loss

- Creation of funding pool to cover costs associated with physical space remediation (“clean-up”) after a death to suicide

Policy Opportunities

Workforce Development, Behavioral Health Professionals, and Training

- Revising minimum behavioral health training for law enforcement, including dispatch
- Mandating behavioral health training for EMS/Paramedics
- Include EMS/Paramedics in professionals that are able to place a person on a Mental Health Crisis Hold (NRS 433A.160)
- Licensing Boards – Interstate Compacts

Insurance

- Mandating an “any willing provider” entry to private insurer networks if the provider is located within or serving a HRSA designated provider shortage area.
- Mandating private insurance payment for paramedicine and crisis response services provided by EMT/Paramedics

Policy Opportunities

Data and Reporting

- Mandating the reporting of data by health care organizations and all inpatient behavioral health facilities in accordance with NRS 433.4295, as data to be publicly published by the Regional Behavioral Health Policy Boards

Overdose Prevention

- Mandated access to MAT services in county jails and state prisons, paid through state-level Fund for Resilient Nevada pool.
- Mandated availability of Naloxone in all NSHE and K-12 facilities, co-located with AEDs

Policy Opportunities

Increased State Investment for Residency for Rural and Frontier Hospitals

- Increased funding for Nevada Health Corps or similar programs

Fund and Support Programs to Address K-12 Truancy

- Fund pilot programs to support local efforts

Regional Behavioral Health Policy Boards and Exploration of Behavioral Health Authorities

- Exploration of the creation of Regional Behavioral Health Authorities
- Identification of long-term funding source for Regional Behavioral Health Authorities and/or RBHCs

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