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EIN #88-0394078

June 7, 2024

Children's Mental Health Action Coalition - Children's Advocacy Alliance

Dear Chair Doñate and members of the Interim Health and Human Services committee,

The Children's Mental Health Action Coalition is a group of leaders, professionals and community members dedicated to creating strategies that meet the urgent needs in Nevada for mental and behavioral health services for children. As a collective, we have researched solutions and sustainable funding options we feel will move the needle forward in improving outcomes for children and families who are grappling with mental and behavioral health challenges. We focus our strategies on medical care, therapy, post-acute and residential care, medication coverage, and insurance coverage. Ultimately, we are advocating in support of the creation of a comprehensive system of care for our most vulnerable population – children. We believe that focusing efforts on improving our current system of care will provide better outcomes for our children in Nevada.

The following recommendations have been explored and are believed to be thoughtful solutions to coordinate efforts across the state, fund programs within systems of higher education, review and revise licensure procedures, raise reimbursements rates to align with the national average, reduce administrative burden for providers who support Medicaid clients, and increase access to screenings, assessment and diagnoses for children with certain health needs.

1. Office of Children's Mental Health

Nevada needs state level leadership dedicated to driving initiatives for children's mental health. There are many coalitions and consortia for mental and behavioral health. We have noticed a disconnect between groups, and a bit of confusion from parents about where to go for help, and from providers about where to send patients with questions. **We are requesting a leader to coordinate efforts and promote accountability statewide.** This position would become a point of connection between all state mental and behavioral health commissions and consortia in Nevada. They would be a knowledge-expert on the solutions in each jurisdiction and a resource for encouraging each commission to be action-oriented. They would also disseminate information opportunities to improve care statewide.

2. Funding for prevention-oriented Bachelor's degree-level mental health Training

Nevada needs clinicians with the specialized skills to promote prevention, screening, and early intervention efforts for children's mental health. We appreciate the training efforts that have shifted to focus on mental health and we want these programs to grow. Our training programs in Nevada have a lot of potential for improvement to align with the standard of training in other states. **Bachelor's level practitioners will promote a diverse workforce to offer these services.** Improving our mental health training programs within our systems of higher education will ensure that clinicians are qualified, competent, and self-assured to practice and support youth in the state.

3. Funding child focused mental health graduate programs

Nevada needs additional graduate training programs focused on child mental health. This includes internships and postdoctoral fellowships. The Children's Advocacy Alliance regularly interacts with pediatric residents with the UNLV School of Medicine. It has been repeatedly stated by residents that they would like to stay in Nevada for their fellowship but they are not able to due to the lack of availability.

4. Streamline licensure and accountability processes for clinicians

Nevada needs a common body for mental health licensure and accountability. The current system for licensure and renewal is a deterrent that discourages providers from pursuing licensure in Nevada due to administrative burden. One way to improve the current system is through a joint behavioral health licensing board. **A joint board promotes ease of licensure, renewal, and a clear path for clinician community and accountability.** Arizona has an existing board system that can act as a positive model for Nevada legislation.

5. Bring reimbursement rates to the national average

Reimbursement rates for child mental health services are woefully below national averages. Nevada must raise reimbursement rates for all child mental health services. Increasing reimbursement rates incentivizes providers to submit their claims and go through the licensing process to accept clients with insurance, especially Medicaid.

6. Reduce reimbursement barriers for providers who support Medicaid clients

Nevada providers serving our Medicaid youth are often burdened with additional administrative tasks and delayed reimbursement "take back." This taxation has to be mitigated to retain providers. The current system for providers to submit a prior authorization claim is lengthy and administratively burdensome, ultimately taking time away from patients. Providers are not compensated for the time it takes for them to submit a prior authorization and the process for claims is cumbersome. We propose a review of this process to reduce the administrative burden, and a consideration to compensate for the time that providers spend on these submissions.

Providers in Nevada are also being faced with recoupments up to 5 years for services that were already provided and paid. This practice puts a tremendous strain on private practitioners leaving some to leave their practices and others to no longer serve Medicaid clients. This is the opposite of what we need in Nevada. We propose establishing a Nevada insurance overpayment recovery law to shift the recovery time from 5 years to 12 months. 5 years is not a reasonable time frame to recover funds from providers, reducing this period to 12 months would align Nevada with other states.

7. Early assessment intervention for specific child mental health diagnosis

Screening, assessment, and intervention for common mental health and developmental disorders (SLD, ID, FASD, and ADHD) should be covered by insurance. The NRS includes language for Autism Spectrum Disorder (ASD) that requires insurance to cover screening, assessment, and treatment for a diagnosis of ASD. We ask that the NRS language is updated to provide the same provisions for other mental health and developmental disorders including Specific Learning Disorder, Intellectual Disability, Fetal Alcohol Spectrum Disorders, and Attention Deficit/Hyperactivity Disorders.

Thank you for the opportunity to submit these policy ideas, we appreciate the collaboration and consideration of the committee to hear more on these topics. These recommendations are supported by professionals across the state, and we sign our names below in solidarity of creating a stronger system of care for our youth.

With Gratitude for your Service,

1. Tara C. Raines, Ph.D., N.C.S.P, Psychologist (NV0813) Deputy Director, Children's Advocacy Alliance
2. Carissa Pearce, MPH, Health Policy Manager, Children's Advocacy Alliance
3. Rebeka Acosta, BCPA, Executive Director, A+J Patient Advocacy
4. Leann D. McAllister, MBA, Executive Director, Nevada Chapter, American Academy of Pediatrics
5. Robert Weires, Ed.S. - 89015
6. Izack Tenorio, DPP - 89103
7. Shana Tello, MPA - 89102
8. Silver State Equality
9. Patricia Hoeg, Psy.S. - 89141
10. Brandon Ford, Best Practices of Nevada, LLC - 89147
11. Michelle G. Paul, Ph.D., Psychologist (NV0374), Assistant Vice President of Mental & Behavioral Health and the Workday Endowed Executive Director of UNLV PRACTICE: A Community Mental Health Training Clinic
12. Mitchell H. Cloward, President, Intermountain Health Desert Region
13. Ann Ayers, CEO, Raise the Future
14. Catherine Msumali, LL.M - Private citizen - zip code: 89119
15. John Etzell, Executive Director, Boys Town Nevada. 89101
16. Alma Spears, Licensed Marriage and Family Therapist. 89102
17. Lorrie Curriden, President, Nevada CASA Association
18. Anita Ward, Chief Growth Officer, Care Solace
19. Amy Novak, MsEd, Educational Advisor-Serving Our Communities/Owner-Acton Academy Red Rock. 89128
20. Christina Vela, DPP Chief Executive Officer, St. Jude's Ranch for Children
21. Stephanie Nickson, Licensed Clinical Social Worker 89012
22. Amanda Haboush-Deloye, PhD - 89123
23. Dr. Sondra Cosgrove, Executive Director Vote Nevada
24. Jody Lupo Masden- 89129
25. Brad Donohue, Ph.D., Psychologist (NV0380), Distinguished Professor of Psychology and Director of The Optimum Performance Program at UNLV.
26. Kristin Brooks, MEd, Owner and Performance Director of Stand Tall Consulting
27. Sheldon A. Jacobs, PsyD, LMFT, President, NAMI of Southern Nevada
28. Will Rucker, 89166
29. Dan Musgrove, 89135
30. Char Frost, 89120
31. Kelly Beavers, 89101
32. Julie F. Beasley, Ph.D., Child Neuropsychologist, Clinical Director, Grant-A-Gift Autism Foundation Ackerman Center
33. Rian Satterwhite, Director of the Office of Service Learning & Leadership, UNLV
34. Stefanie Nakadilok-Hui, PhD, LADC, 89135
35. Marde Closson, MSW 89149