Department of Health and Human Services

Division of Public and Behavioral Health

Public Health

Health Division & Mental Health

Integration Plan

SFY 14/15

Public and Behavioral Health Integration Model

- The model of Public and Behavioral Health integration is a holistic healthcare approach that integrates services that address both body and mind and treat individuals as a whole person.

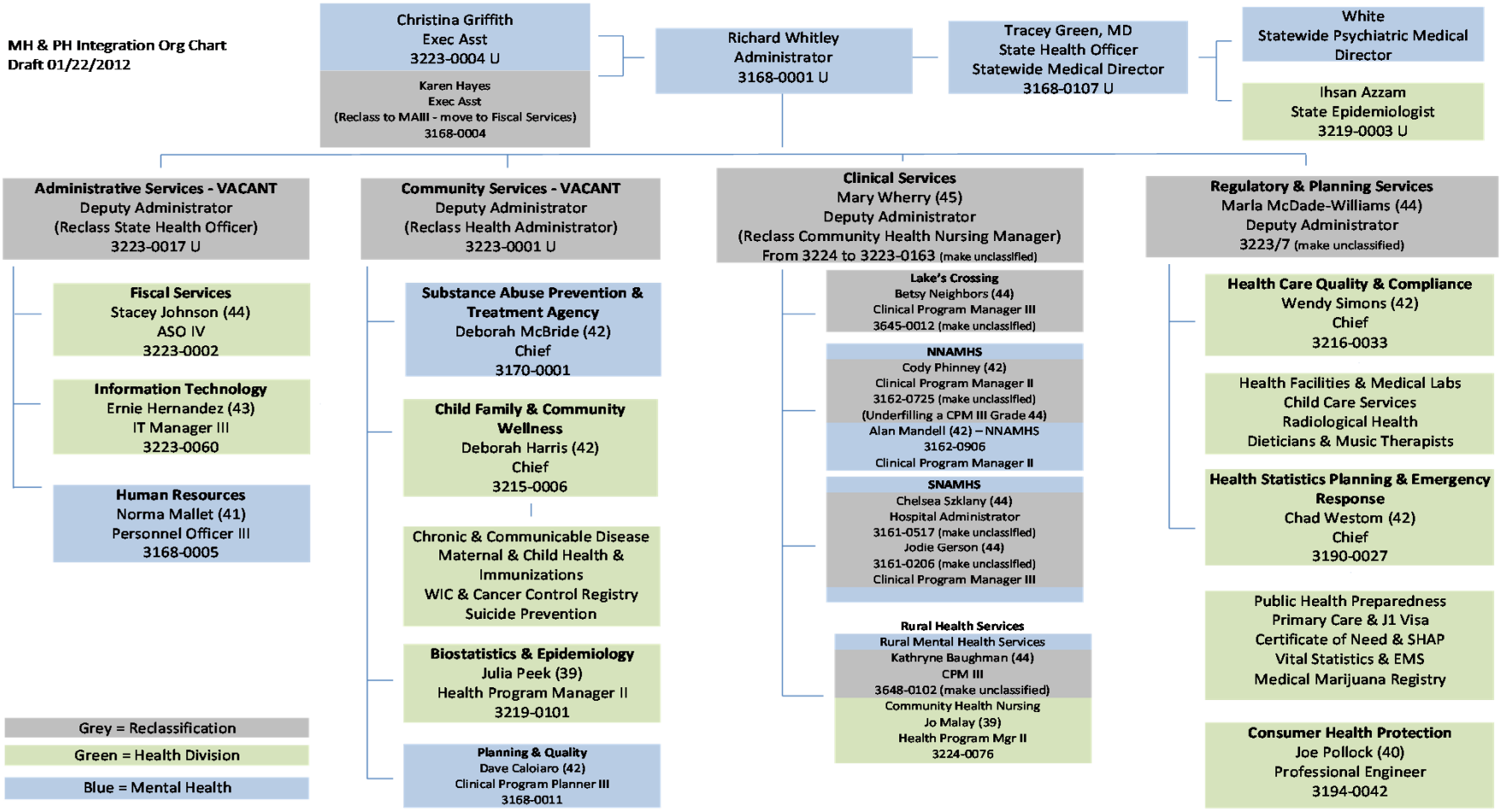
Benefits of Integration

- Using PH data /surveillance and epidemiology to identify areas for prevention and early intervention
  - Criminal justice continuum of care:
    - Data has revealed that there are high end users of the criminal justice system that require intensive wrap around services: Forensic PACT (Program for Assertive Community Treatment) team.
  - Using the data to re-allocate existing funds
- Integration of mental health and public health in primary care to provide comprehensive healthcare services
  - Immunizations
- Utilization of a population based approach to develop systems of care
  - Supporting public and private sector resources to serve the people of their communities.
- Recognizing Co-morbid issues among vulnerable populations
  - Individuals with SMI, on average die 25 years earlier than the general population from chronic diseases.
  - 60% of premature deaths in persons with Schizophrenia are due to chronic medical conditions.
- Maximize pharmaceutical opportunities
- Centralize and standardize billing and collections, grants management and fiscal monitoring core functions

Public and Behavioral Health Integration Plan

- **Major agency components being reorganized**:
  - The Health Division will integrate with Mental Health to form one Division of Public and Behavioral Health.
  - Early Intervention Services (EIS) to be transferred out of the Health Division and integrated into the Aging and Disability Services Division (ADSD).
  - Developmental Services to be transferred out of the Division of Mental Health and integrated into the Aging and Disability Services Division (ADSD).
  - DHHS, Director's Office – The Office of Suicide Prevention (4 FTEs) will be integrated into Public Health's Bureau of Child Family and Community Wellness.

Division of Public and Behavioral Health



Summary of Public Health Operations

COMMUNITY SERVICES

- **Child Family and Community Wellness (CFCW)**
  - Educates and informs the public about health related issues including chronic and preventable disease, and to ensure and advocate for health services for Nevada's citizens.
  - Office of Public Health Informatics and Epidemiology collects, analyzes and warehouses data in order to produce and distribute statistical information for research and policy decision making for public and private agencies within the state and nationally.

REGULATORY & PLANNING SERVICES

- **Health Care Quality and Compliance (HCQC)**
  - Protects the safety and welfare of the public through the promotion and advocacy of quality health care through licensing, regulation enforcement and education.
- **Health Statistics, Planning, Epidemiology and Response (HSPER)**
  - Improves Nevada's public health infrastructure in order to be better prepared to respond to public health emergencies; brings medical resources to the state's health professional shortage areas; reviews and processes Certificate of Need (CON) inquiries and applications; operates the State Trauma Registry, the Sentinel Events Registry and the Nevada Central Cancer Registry; provides for the registration and permanent custodianship of birth and death records in the state, including all legal corrections and amendments; maintains databases on marriages, divorces, and abortions occurring within the state.

CLINICAL SERVICES

- **Public Health and Clinical Services (PHCS)**
  - Environmental Health and Community Health Nursing form the Public Health & Clinical Services Program. The PHCS promotes and maintains wellness to the 13 rural counties in Nevada.

Agency Goal

- Public and Behavioral Health Integration
  - This consolidation will integrate public and behavioral health services by leveraging existing capacity and implementing a patient centered system of care for prevention, early intervention and access to treatment.

Department of Health and Human Services

Public Health

Budget Presentation SFY 14/15

Brian Sandoval, Governor

Michael J. Willden, Director

Richard Whitley, Administrator

Tracey D. Green, MD, State Health Officer

January 24, 2013

Governor Sandoval's Planning Framework Public Health

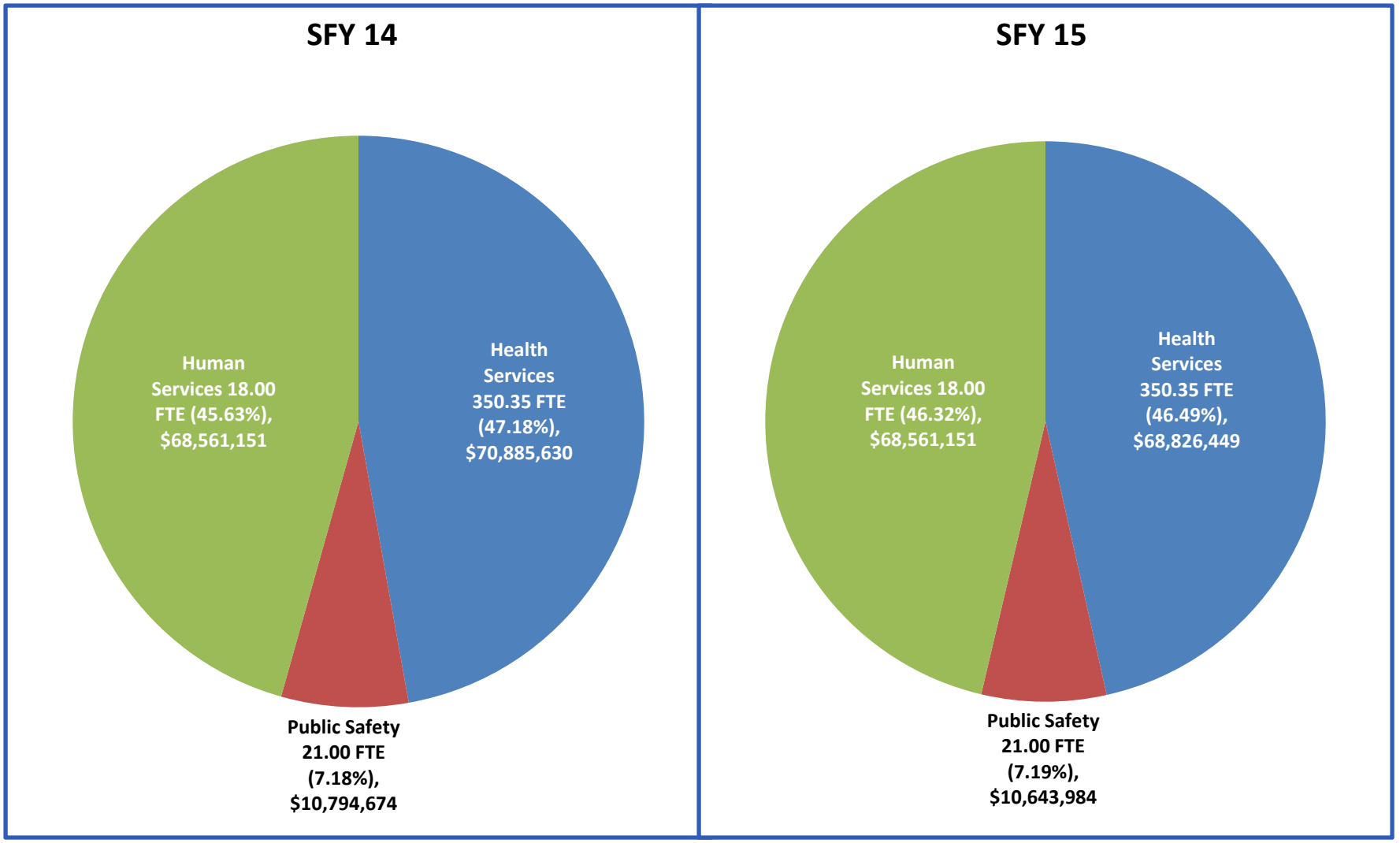
Vision
Nevada's best days are yet to come
Mission
Create a new promise of opportunity
Values

Action	Collaboration	Courage	Opportunity	Optimism	Pride

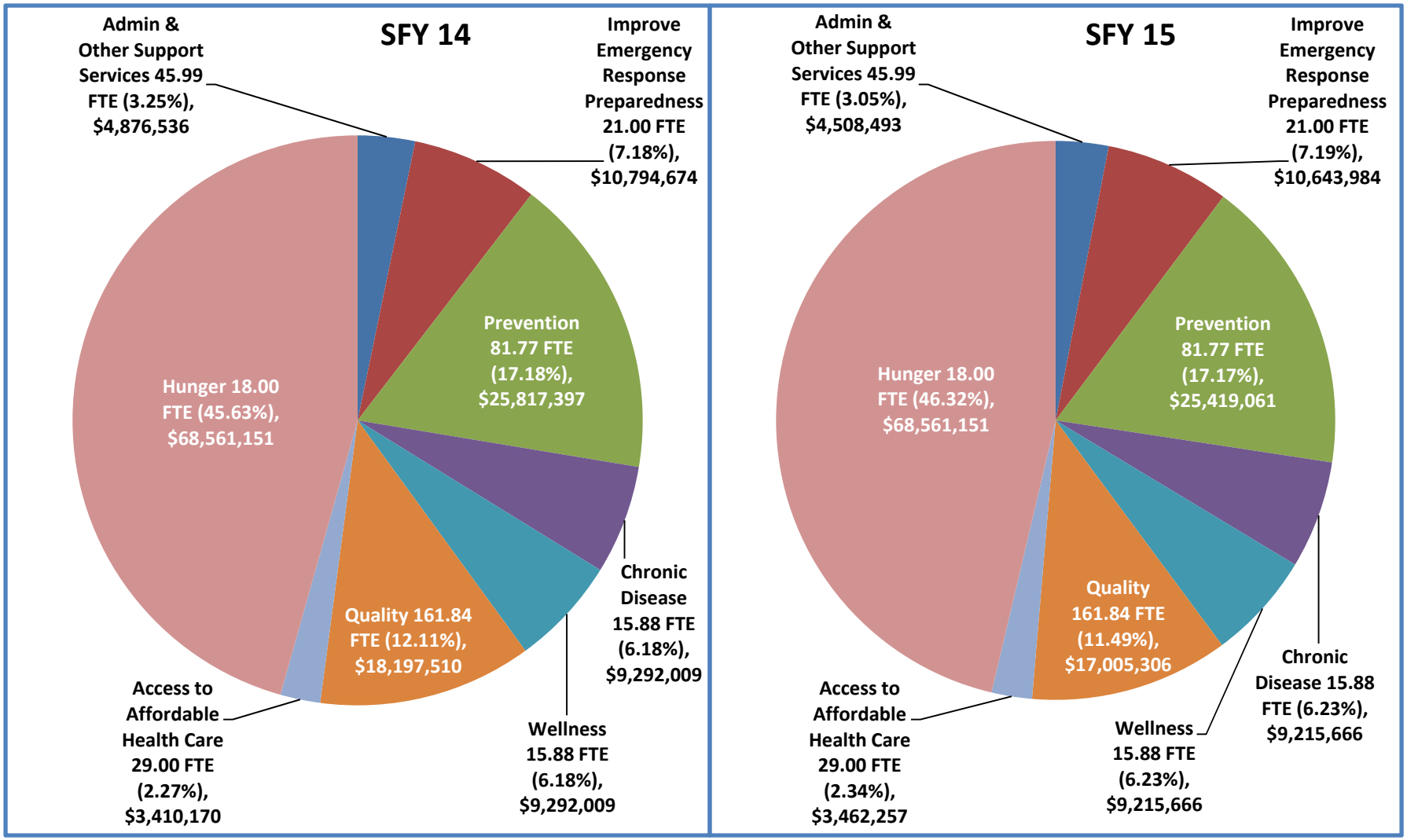
Strategic Priorities
Sustainable and Growing Economy
Educated and Healthy Citizenry
Safe and Livable Communities
Efficient and Responsive State Government

Core Functions of Government
Business Development and Services
Education and Workforce Development
Health Services
Human Services
Infrastructure and Communications
Public Safety
Resource Management
State Support Services

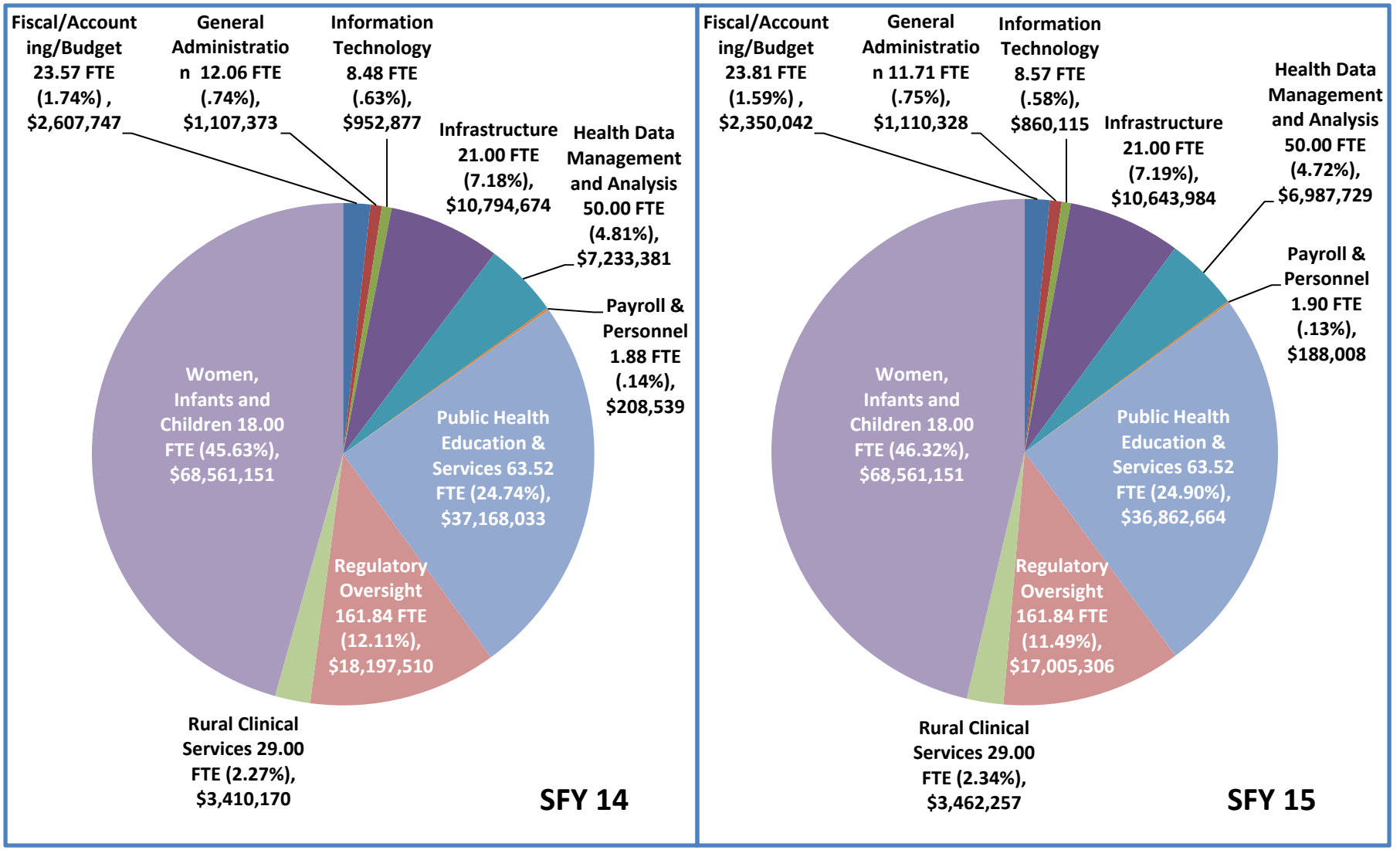
Public Health PPBB by Core Function



Public Health PPBB by Objective



Public Health PPBB by Activity

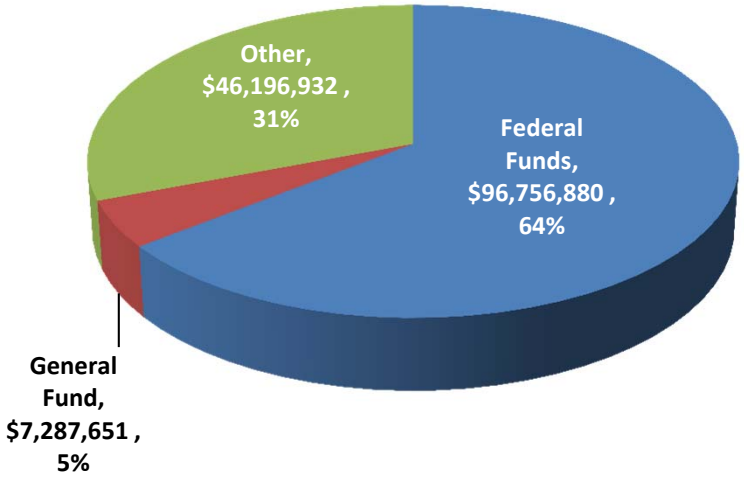


Public Health Activities & Programs

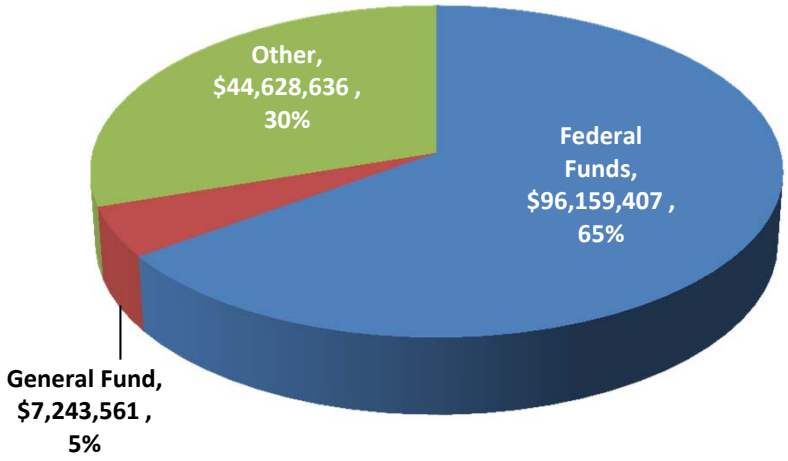
Core Function	Objective	Activity	Programs
Health Services	Prevention	Health Data Management and Analysis	Cancer Control Registry Health Statistics and Planning (Vital Records) Biostatistics and Epidemiology Medical Marijuana Registry
Public Safety	Improve Emergency Response and Response Preparedness	Infrastructure	Public Health Preparedness Program (Primary Care, J1Visa, QI, CON and SHAP)
Health Services	Prevention Wellness Chronic Disease	Public Health Education & Services	Immunization Communicable Diseases (HIV/AIDS Care, Prevention and HOPWA) Chronic Disease (Diabetes, Tobacco, PHHS, WHC, CDPHP, Comp Cancer, Colorectal Cancer) Maternal Child Health Services (MCH, Oral Health, Newborn Screening and Hearing, Home Visitation, Rape Prevention, Abstinence)
Health Services	Quality	Regulatory Oversight	Radiological Health Child Care Services Health Radioactive and Hazardous Waste Consumer Health Protection (Environmental Health) Health Facilities Licensing (Health Facilities, Med Labs, Music Therapists, Dieticians) Health Facilities Admin Penalties Emergency Medical Services
Health Services	Access to Affordable Health Care	Rural Clinical Services	Community Health Services
Human Services	Hunger	Women Infants and Children	Women Infants and Children (WIC)
Health Services	Admin & Other Support Services	Administrative Support Functions	Office of Health Administration

Public Health Budgeted Funding Sources
Fiscal Years 2014 and 2015

SFY 2014
Total: $150,241,463



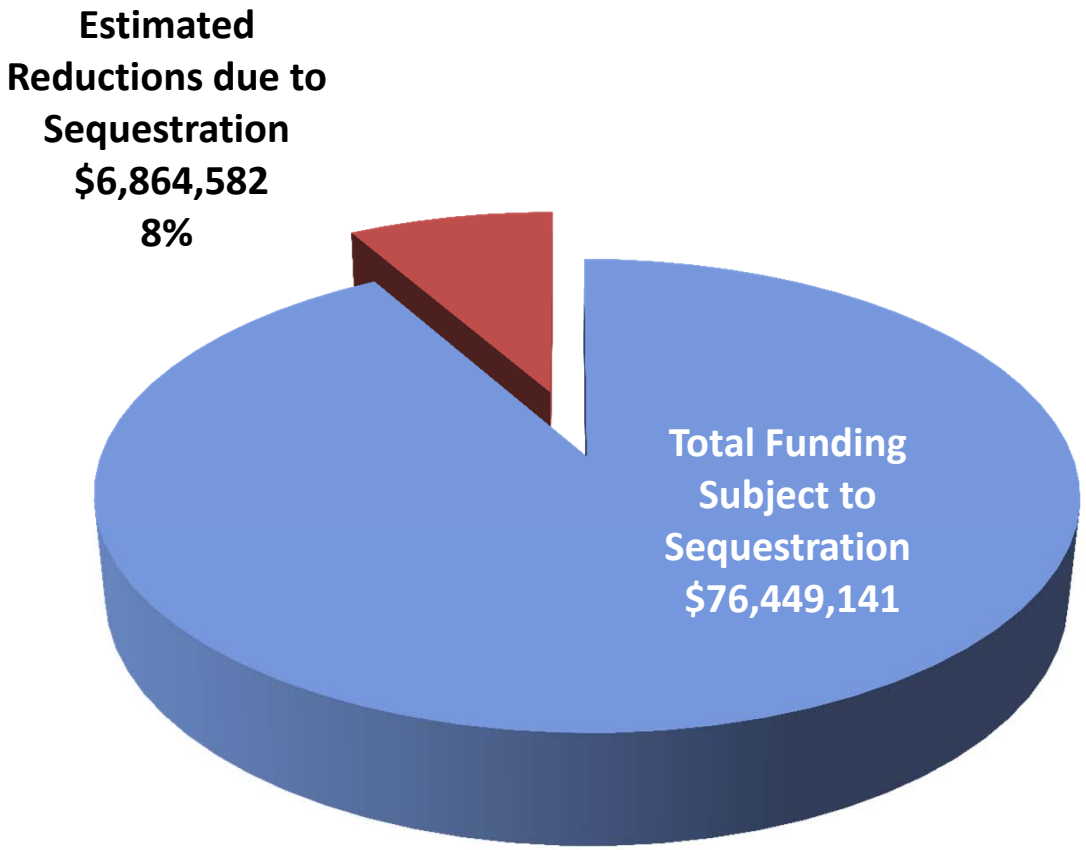
SFY 2015
Total: $148,031,603



Budget Highlights

- Sequestration
- Program Highlights
  - Immunizations
  - Tobacco
  - ADAP
- Technology Improvement Request (TIR)

Sequestration
SFY 2014-2015



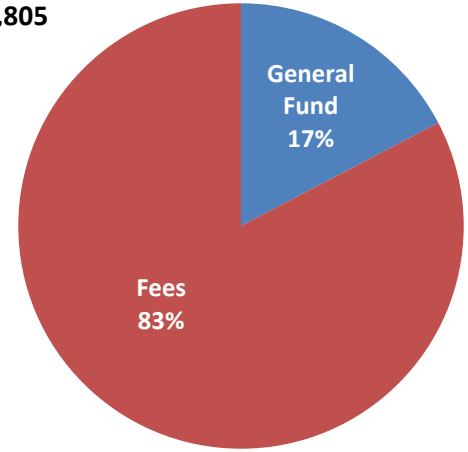
Program Highlights

- **Immunization** Program Fund for Healthy Nevada (SFY14/15 $1,000,000)
  - Reminder/Recall and Public Information Campaign ($191,000/year)
  - Childcare Assessment Project – Southern Nevada ($309,000/year)
- Pertussis Vaccination (Cocooning) General Fund (SFY14/15 $1,000,000)
  - To support improved pertussis vaccination
- **Tobacco** Fund for Healthy Nevada (SFY 14/15 $2,000,000)
  - To support program, state activities and administration of the funds ($150,000/year)
  - Funding will support local public health authority activities based on statutory requirements as well as support community stakeholder activities through an RFP process
- **ADAP**

Technology Improvement Request (TIR)

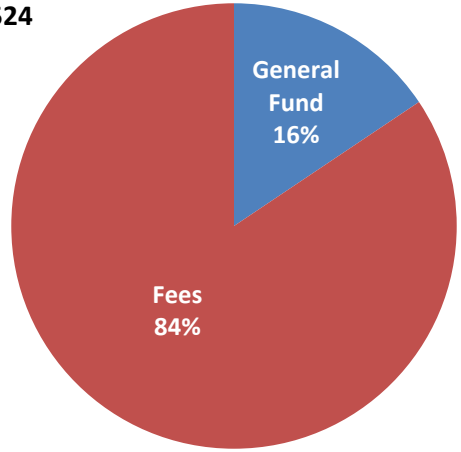
- COT State Licensing System Technology Investment Request (TIR) is a comprehensive online regulatory and licensing system that will allow the public access to apply for and renew licenses, permits and certificates.
  - Initial application and renewal processing; accounting/payment processing; inspections including complaints; and ability to generate reports and documents.

SFY 14
$1,237,805



General Fund	$	214,485
RAM/RPM Fees	$	225,617
Contract Svs (Child Block Grant)	$	2,011
Consumer Protection Inspection Fees	$	92,874
Medical Marijuana Fees	$	116,093
Health Facility Fees	$	82,140
Medical Lab Fees	$	504,585

SFY 15
$128,524



General Fund	$	20,057
RAM/RPM Fees	$	20,892
Contract Svs (Child Block Grant)	$	-
Consumer Protection Inspection Fees	$	8,600
Medical Marijuana Fees	$	10,749
Health Facility Fees	$	22,515
Medical Lab Fees	$	45,711

Health Division FTE Summary

	SFY 2012	SFY 2013	SFY 2014	SFY 2015
Base	382.60	382.60	385.60	385.60
Maintenance	0	0	0	0
Enhancement	0	0	3.75	3.75
Total	382.60	382.60	389.35	389.35

- Total of 20 new positions (9 Federal; 8 Other; 3 GF)
- Summary: +20 New + 4 Transfer Ins - 12 Transfer Outs - 8.25 Eliminations = 3.75
- Total of 10 reclassifications

Public Health Bill Draft Requests (BDRs)

BDR #	Type of BDR	Program/Division	Concept
13A4061035	Budget	Health Facilities Public Health	Establish authority for the Health Division to: (a) use a website that maintains information about facility employees who have had criminal background checks; (b) make clarifications concerning temporary employees and their criminal background check requirements; and (c) add two new facility types to those that must check criminal histories of employees.
13A4061040	Policy	Sentinel Events Public Health	Revise the "sentinel event" definition.
13A4061049	Policy	Vital Records Public Health	Amend statutes concerning manual collection and maintenance of vital records data by authorizing the Health Division to use an electronic recordkeeping system.
13A4061050	Budget	Division Reorganization Public Health/Behavioral Health	Merges the Health Division and the Mental Health section of MHDS and creates the Division of Public and Behavioral Health.
13A4061064	Policy	Medical Laboratories Public Health	Repeals restrictive language for national organizations that may certify lab assistants.
13A4061067	Budget	Vital Records Public Health	Revises the manner in which fees are collected for the Office of Vital Records by having them deposited directly with the Health Division rather than the General Fund.
13A4001140	Policy	Suicide Prevention DHHS Director's Office	To establish an independent, multi-disciplinary suicide fatality review committee to gather data and evaluate risk factors.