

Proposed 2022 Southern Region Behavioral Health Policy Board BDR Concepts

BDR Topic	Overview	Point of Contact	Correlating Board Priority/Strategy	Benefits	Challenges
<b>Community Health Workers (CHWs)</b>	Expands Medicaid reimbursement for CHWs for Behavioral Health Services	Jay Kolbet-Clausell Program Manager Nevada Community Health Worker Association <a href="mailto:jay@hcclsc.org">jay@hcclsc.org</a>	<u>Priority:</u> <b>Regional Board Infrastructure Development</b>  <u>Strategy:</u> Explore Regional Behavioral Health Authorities	<u>Solution for:</u> CHWs are not reimbursable for providers under the supervision of a physician, PA, or APRN who bills Medicaid for the following: -Behavioral Health Outpatient Treatment PT 14 -Behavioral Health Rehabilitative Treatment PT 82 -Special Clinics PT 17 -Specialty 215 Substance Abuse Agency Model  *Evidence to support CHW effectiveness is available.  *Opportunity to expand Medicaid reimbursement of CHWs under the supervision of behavioral health clinicians also.	Fiscal note(s)? –
<b>Regional Behavioral Health Authority (RBHAs)</b>	Updates NRS 433c with enabling language for establishment of local/regional behavioral health authorities	Cherylyn Rahr-Wood Regional Behavioral Health Coordinator  RBHA Subcommittee Co-Chairs Nicki Aaker <a href="mailto:naaker@carson.org">naaker@carson.org</a> Shayla Holmes	<u>Priority:</u> <b>Regional Board Infrastructure Development</b>  <u>Strategy:</u> Explore Regional Behavioral Health Authorities	<u>Solution for:</u> Several areas have been identified where additional infrastructure could lead to greater efficiency as the Northern region works to develop a more sophisticated behavioral health system.  Allows for Nevada to adopt local/regional behavioral health authority models/concepts similar to those in other states that allow for greater efficiency and use of resources such as:	Need to establish language that is feasible for all 5 regions and for multiple sectors including county governments, state of Nevada, behavioral health providers, etc.

		<a href="mailto:sholmes@lyon-county.org">sholmes@lyon-county.org</a>		RBHAs Housed At - Community Mental Health Centers RBHAs Housed At – County Behavioral Health Agencies/Governing Boards RBHAs Housed At – Human Services Districts or Public Health Districts Regional Managed Care Models	
<b>Nevada Mental Health Workforce Education Network</b>	Establishes a Nevada Mental Health Workforce Education Network – modeled after Nebraska’s BHECN	Dr. Sara Hunt UNLV Mental and Behavioral Health Training Coalition – <a href="mailto:sara.hunt@unlv.edu">sara.hunt@unlv.edu</a>	<u>Priority:</u> <b>Behavioral Health Workforce with capacity to treat adults and youth</b>  <u>Strategy:</u> The Northern Board supports a tiered approach for a calibrated mental health system that includes a robust relationship between clinicians, community health workers (CHW), and peers.	<u>Establishes Nevada Mental Health Workforce Education Network to:</u> -Facilitate recruitment into careers/retention programs -Mentor matching in geographic locations -Workshops and conferences for licensed professionals -Data tracking -Policy -Statewide mental health jobs board  Also, brings resources and supports AHECs	Fiscal note(s)?
Dementia Care Specialists	Establishes 3 Dementia Care Specialists modeled after Wisconsin DCS Program	Charles Duarte, Nevada Director of Public Policy and Advocacy, Alzheimer’s Association Email: <a href="mailto:ccduarte@alz.org">ccduarte@alz.org</a>		<u>Solution for:</u> <b>Dementia Care Specialists Program</b> works proactively to support people living with dementia and their caregivers, and to build dementia capability within the community to ensure the highest quality of life possible while living at home.	\$531,904

				<p>In Nevada, Mobile Outreach Safety Team, community social workers and APS workers report frequent interactions with individuals in crisis who may have dementia. Often, the person is handcuffed and transported to a hospital emergency room causing confusion, fear and a worsening of their condition. According to studies of dementia crises, delusions, wandering, stealing and hallucinations were key behaviors contributing to crises especially when the behaviors present a to risk the individual or others.</p> <p>These gaps currently affect tens of thousands of Nevadans, causing unnecessary suffering, overburdening the acute care sector, and violating the right to receive care and support in the least restrictive environment. Providing more targeted support through a no wrong door approach can help people living with dementia and their family caregivers through informed choice, empowerment, and planning.</p> <p>Wisconsin, The Department of Health Services has integrated a dementia crisis response effort into their no wrong door/aging and disability resource center (NWD) model: Nevada is well positioned to replicate this model as part of its Nevada Care Connection network.</p>	
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				To replicate the Dementia Care Specialists (DCS) program in Nevada, the Aging and Disability Services Division (ADSD) will contract with the Dementia Engagement, Education, and Research (DEER) program at the University of Nevada, Reno to build upon existing Nevada Care Connection efforts. The DEER team will provide technical assistance, training, and infrastructure to support Dementia Care Specialists.	
<b>Safer Suicide Care</b>	Establishes the Nevada zero suicide initiative within the department of health and human services, division of public and behavioral health, and the office of suicide prevention.	Cherylyn Rahr-Wood Regional Behavioral Health Coordinator <a href="mailto:Cherylyn@nrhp.org">Cherylyn@nrhp.org</a> (former Zero Suicide Coordinator)	*Not directly identified in 2021 Priorities, Strategies and Recommendations	<p><u>Formally adopts Zero Suicide</u></p> <p>The goal and purpose of the ZS initiative is to reduce injury and death by suicide in Nevada through comprehensive, system-level suicide prevention strategies, to include trainings, for health care systems, including mental and behavioral health systems, physical and mental health clinics in educational institutions, (Department of Corrections) and primary care clinics.</p> <p><i>*Will receive additional information at July 7, 2022 Board Meeting</i></p>	<p><i>*Will receive additional information at July 7, 2022 Board Meeting</i></p> <p>Fiscal note(s)?</p>