TRANSFORMING YOUTH BEHAVIORAL HEALTH IN NEVADA
NATIONAL GOVERNOR’S ASSOCIATION MEDICAID TRANSFORMATION PROJECT

With the support of Governor Sandoval and the First Lady, Nevada’s Department of Health and Human Services is in collaboration with the National Governor’s Association Policy Academy to seek approval from the U.S. Department of Health and Human Services and the Centers for Medicare and Medicaid Services (CMS) to implement an innovative transformation of Nevada’s behavioral health system, focusing on youth (ages 11-18). This project transitions our current crisis-based service system to a system of prevention and early intervention, reaching our youth before they have a behavioral health diagnosis.

CRISIS PREVENTION

From a standpoint of prevention, Nevada is specifically looking at our “rising risk” population. This encompasses our youth that have been exposed to a number of traumatic events in their lives, but have not yet exhibited the signs leading to an actual diagnosis. Through a screening process, we will identify those at-risk and prevent conditions from rising to the level of diagnosis which can be a more painful situation for our youth and require costlier services from our system.

THE SCREENINGS

A state-wide crisis prevention screening program for all youth (11-18 years), regardless of health insurance status, is being proposed to address the escalating behavioral health crisis facing our state. In the initial phase, all children entering the 7th grade will receive behavioral health screenings. By encompassing the entire population of our state, we avoid stigma associated with behavioral and mental health screenings.

The screening will address:
  o substance use;
  o behavioral health; and
  o suicide risk.

In addition to our pediatricians and family medicine providers performing behavioral health screenings at well child checks, we are proposing the screenings be allowed in non-traditional settings by non-traditional providers, who have the best proximity to our youth:

<table>
<thead>
<tr>
<th>SCREENING LOCATIONS</th>
<th>NON-TRADITIONAL PROVIDERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Schools</td>
<td>Counselors, School RNs, After-school staff, Social Workers</td>
</tr>
<tr>
<td>Court/Government Office</td>
<td>Juvenile Justice and Parole and Probation Officers</td>
</tr>
<tr>
<td>CFS Offices</td>
<td>Government-based providers</td>
</tr>
<tr>
<td>Public/Health Clinic</td>
<td>Community Health Workers, FQHCs</td>
</tr>
<tr>
<td>Office/Clinic</td>
<td>Mental Health Counselors</td>
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</tbody>
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THE PROCESS

- Child begins at #1 or #2.
- Those with BH/MH diagnoses are excluded from the mandate.
- If family provides proof of a negative BH screening from pediatrician, PCP or other approved provider, no further screening is needed. If they provide a positive screening, they are provided linkages to assessment and intervention options, if not already done by provider.
- Parents are notified of all positive findings and recommendations throughout the process.
- RISK+ = Risk to self/Risk to Others; Suicidal threat or ideology

1. PAPER SCREENING

   RISK +
   (-) = done

   IMMEDIATE CARE:
   - Call 911
   - Call Parents
   - Contact Mobile Crisis Team

2. IN-PERSON SCREENING

   RISK +
   (Rising Risk+)

3. ASSESSMENT

   RISK +
   (-) = done

   - Rising Risk
   - Substance/Alcohol Use
   - Behavioral & mental Health
   - Suicide

4. INTERVENTIONS

   MEDICAID /CHIP
   Preventive Health Home

   QUALIFIED HEALTH PLAN
   Link to health plan services

   UNINSURED
   Link to Division of Public and Behavioral Health & Division of Child and Family Services

   RISING RISK DETERMINATION