

# Nassir Notes

## Quick Facts – DHHS

February 2014

State of Nevada  
Department of Health and Human Services

<http://dhhs.nv.gov>

**Helping People –**  
It's who we are and what we do

Brian Sandoval  
*Governor*



Michael J. Willden  
*Director*

# Nevada Department of Health and Human Services, Table of Contents

Page intentionally left blank.

TABLE OF CONTENTS

Director’s Office

1.01 2-1-1 Partnership.....1  
1.02 Office of Consumer Health Assistance .....2  
1.03 Office of Minority Health.....3  
1.04 Differential Response .....4  
1.05 Grants Management Unit.....5  
1.06 Head Start Collaboration and Early Childhood Systems Office .....6  
1.07 Office of Health Information Technology.....7

Aging and Disability Services Division

2.01 Advocate for Elders .....9  
2.02 Community Options Program for the Elderly (COPE)..... 10  
2.03 Elder Protective Services Program ..... 11  
2.04 Homemaker Program ..... 12  
2.05 Independent Living Grants ..... 13  
2.06 Long Term Care Ombudsman Program (Elder Rights Advocates)..... 14  
2.07 Senior Support Services..... 15  
2.08 Senior Nutrition – Meals in Congregate Settings ..... 16  
2.09 Senior Nutrition – Home Delivered Meals ..... 17  
2.10 National Family Caregiver Program..... 18  
2.11 Taxi Assistance Program..... 19  
2.12 Senior Rx and Disability Rx ..... 20  
2.13 Senior Rx and Disability Rx – Dental Program ..... 21  
2.14 State Health Insurance Assistance Program (SHIP) ..... 22  
2.15 Waiver – Assisted Living ..... 23  
2.16 Waiver – Home and Community Based (HCBW)..... 24  
2.17 Disability Services – Assistive Technology for Independent Living ..... 25  
2.18 Disability Services – Personal Assistance Services ..... 26  
2.19 Disability Services – Traumatic Brain Injury Services ..... 27  
2.20 Disability Services – Autism Treatment Assistance Program (ATAP) ..... 28  
2.21 Developmental Services ..... 29  
2.22 Early Intervention Services (Part C, Individuals with Disabilities Education Act)..... 30

# Nevada Department of Health and Human Services, Table of Contents

## Division of Child and Family Services

|  |    |
|--|----|
| 3.01 Adoption Subsidies .....                  | 31 |
| 3.02 Child Protective Services (CPS) .....     | 32 |
| 3.03 Early Childhood Services.....             | 33 |
| 3.04 Foster Care – Out-of-Home Placements..... | 34 |
| 3.05 Foster Care – Independent Living.....     | 35 |
| 3.06 Juvenile Justice – Facilities .....       | 36 |
| 3.07 Juvenile Justice – Youth Parole.....      | 37 |
| 3.08 Children’s Clinical Services .....        | 38 |
| 3.09 Residential Treatment Services .....      | 39 |
| 3.10 Wraparound In Nevada .....                | 40 |

## Division of Health Care Financing and Policy

|   |    |
|---|----|
| 4.01 Medicaid Totals .....                              | 41 |
| 4.02 Health Insurance for Work Advancement (HIWA) ..... | 42 |
| 4.03 Waiver – Persons with Physical Disabilities.....   | 43 |

## Division of Welfare and Support Services

|   |    |
|---|----|
| 5.01 TANF Cash Total.....   | 45 |
| 5.02 TANF Cash – Kinship Care .....                                       | 46 |
| 5.03 New Employees of Nevada (NEON).....                                  | 47 |
| 5.04 Total TANF Medicaid .....  | 48 |
| 5.05 Child Health Assurance Program (CHAP).....                           | 49 |
| 5.06 Nevada Check Up.....   | 50 |
| 5.07 County Match .....   | 51 |
| 5.08 Medical Assistance to the Aged, Blind, and Disabled.....             | 52 |
| 5.09 Supplemental Nutrition Assistance Program (SNAP) .....               | 53 |
| 5.10 Supplemental Nutrition Employment and Training Program (SNAPET)..... | 54 |
| 5.11 Child Care and Development Program .....                             | 55 |
| 5.12 Child Support Enforcement Program .....                              | 56 |
| 5.13 Energy Assistance Program .....                                      | 57 |

## Division of Public and Behavioral Health

|   |    |
|---|----|
| 6.01 Newborn Screening (NBS) Program .....                              | 59 |
| 6.02 Early Hearing Detection and Intervention.....                      | 60 |
| 6.03 Immunization.....  | 61 |
| 6.04 Women, Infants, and Children (WIC) Supplemental Food Program ..... | 62 |

# Nevada Department of Health and Human Services, Table of Contents

|  |    |
|--|----|
| 6.05 Oral Health Program.....                                      | 63 |
| 6.06 Vital Records and Statistics.....                             | 64 |
| 6.07 Women’s Health Connection Program.....                        | 65 |
| 6.08 Public Health and Clinical Services .....                     | 66 |
| 6.09 Sexually Transmitted Disease Program .....                    | 67 |
| 6.10 Ryan White AIDS Drug Assistance Program .....                 | 68 |
| 6.11 HIV Prevention Program.....                                   | 69 |
| 6.12 HIV-AIDS Surveillance Program .....                           | 70 |
| 6.13 Nevada Central Cancer Registry .....                          | 71 |
| 6.14 Office of Suicide Prevention .....                            | 72 |
| 6.15 Medical Marijuana Registry.....                               | 73 |
| 6.16 Substance Abuse Prevention and Treatment Agency (SAPTA) ..... | 74 |
| 6.17 Mental Health Services.....                                   | 75 |
| 6.18 Lake’s Crossing Center (LCC) .....                            | 76 |

## Public Defender

|                            |    |
|----------------------------|----|
| 7.01 Public Defender ..... | 77 |
|----------------------------|----|

## Nevada Data and Key Comparisons

|                                 |    |
|---------------------------------|----|
| Population/Demographics.....    | 79 |
| Economy .....                   | 80 |
| Poverty .....                   | 81 |
| Children .....                  | 82 |
| Child Welfare .....             | 83 |
| Seniors .....                   | 84 |
| Disability .....                | 85 |
| Health .....                    | 86 |
| Health Care .....               | 89 |
| Health Insurance.....           | 92 |
| Mental Health.....              | 93 |
| Suicide .....                   | 93 |
| Public Assistance .....         | 94 |
| Medicaid.....                   | 96 |
| Child Care.....                 | 96 |
| Food Insecurity .....           | 97 |
| Child Support Enforcement ..... | 97 |
| Funding.....                    | 98 |

# Nevada Department of Health and Human Services, Table of Contents

|  |     |
|--|-----|
| Maps – Program Participation Rates by County.....              | 100 |
| Maps – Socioeconomic and Demographic Indicators by County..... | 101 |
| Maps – Demographic Indicators by County.....                   | 102 |

## Organizational Chart

|                           |     |
|---------------------------|-----|
| Organizational Chart..... | 103 |
|---------------------------|-----|

## NRS Chapters for Statutory Authority by Division

|   |     |
|---|-----|
| NRS Chapters for Statutory Authority by Division..... | 105 |
| Director’s Office.....                                | 105 |
| Aging and Disability Services Division .....          | 105 |
| Division of Child and Family Services .....           | 106 |
| Division of Health Care Financing and Policy .....    | 106 |
| Division of Welfare and Supportive Services.....      | 106 |
| Division of Public and Behavioral Health.....         | 107 |
| Office of the State Public Defender.....              | 110 |

## Phone Numbers of Key Personnel

|  |     |
|--|-----|
| Phone Numbers of Key Personnel.....                | 111 |
| Director’s Office.....                             | 111 |
| Aging and Disability Services Division .....       | 111 |
| Division of Child and Family Services .....        | 112 |
| Division of Health Care Financing and Policy ..... | 112 |
| Division of Welfare and Supportive Services.....   | 112 |
| Division of Public and Behavioral Health.....      | 113 |
| Public Defender .....                              | 113 |

## Index

|            |     |
|------------|-----|
| Index..... | 115 |
|------------|-----|

# Nevada Department of Health and Human Services, Director's Office

## 1.01 2-1-1 Partnership

**Program:** Established by Executive Order in February 2006, the Nevada 2-1-1 Partnership was created to implement a multi-tiered response and information plan in the state of Nevada. 2-1-1 is an easy to remember telephone number that, where available, connects people with important community services and volunteer opportunities. Available information on essential health and human services includes: basic human services, physical and mental health resources, employment support services, programs for children, youth and families, support for seniors and persons with disabilities, volunteer opportunities and donations and support for community crisis and disaster recovery.

**Hours of Service:** 2-1-1 is currently available 24 hours per day, seven days per week. Service is provided by Help of Southern Nevada and Crisis Call Center in Northern Nevada.

### Partnership Members:

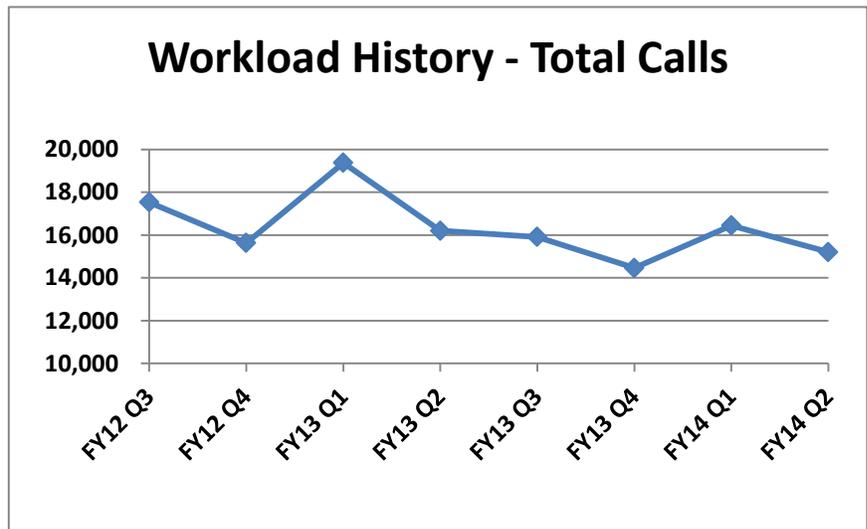
|   |  |
|---|--|
| Crisis Call Center                                | Nevada Public Health Foundation              |
| Family TIES of Nevada                             | State of Nevada Legislature                  |
| HELP of Southern Nevada                           | United Way of Northern Nevada and the Sierra |
| Governor's Consumer Health Advocate               | United Way of Southern Nevada                |
| Nevada Dept. of Administration                    | Volunteer Center of Southern Nevada          |
| Nevada Dept. of Health and Human Services         | Washoe County Chronic Disease Coalition      |
| Nevada Dept. of Information and Technology        | Washoe County Health District                |
| Nevada Disability Advocacy and Law Center         | Washoe County Senior Services                |
| Nevada Division for Aging and Disability Services |  |

### Workload History:

|                     |                     |
|---------------------|---------------------|
| FY12 Q3 Total Calls | 17,529 <sup>1</sup> |
| FY12 Q4 Total Calls | 15,629              |
| FY13 Q1 Total Calls | 19,370              |
| FY13 Q2 Total Calls | 16,197              |
| FY13 Q3 Total Calls | 15,912              |
| FY13 Q4 Total Calls | 14,459              |
| FY14 Q1 Total Calls | 16,443              |
| FY14 Q2 Total Calls | 15,204              |

### FY14 Q1 Workload:

|                      |       |
|----------------------|-------|
| October Total Calls  | 5,530 |
| November Total Calls | 4,768 |
| December Total Calls | 4,906 |



**Comments:** Fluctuations in call volume are due to the impact of outreach campaigns, special programs, media-generated coverage and statewide/national economic fluctuations. FY09 growth impacted by the economic recession. FY10 data algorithms were revised to remove "phantom calls" (hang-ups, static, child playing, etc.) from the total number of calls. FY13 call volume impacted by economic change that necessitated a reduction in operator hours. Current FY14 call volume impacted by the implementation of 2010's Affordable Care Act through the initiation of Nevada Health Link.

**Website:** <http://Nevada211.org>

# Nevada Department of Health and Human Services, Director's Office

## 1.02 Office of Consumer Health Assistance

### Program:

Established by the Nevada Legislature in 1999, GovCHA is a vital point of contact for healthcare consumers and providers in Nevada. The GovCHA mission is to provide the opportunity for all Nevadans to access information regarding patient rights and responsibilities, and to advocate for and educate consumers and injured workers concerning their rights and responsibilities under various health care plans and policies. This education and advocacy is provided to those who have insurance through an employer, managed care, individual health policies, ERISA, Worker's Compensation, Medicare, Medicaid, or are enrolled in other public health programs and/or discount medical plans. Assistance is also provided to the uninsured and underinsured. GovCHA collaborates routinely with state and federal agencies, and non-profit organizations to resolve consumer health care barriers and issues. GovCHA has expanded operations since its inception, and as of July 2011, has been operating through the Director's Office of DHHS as the Governor's Office for Consumer Health Assistance. GovCHA serves as an umbrella agency for multiple consumer health related programs, including:

- Bureau for Hospital Patients
- External Review Organization
- Small Business Insurance Education Program
- RxHelp4NV
- Canadian Prescriptions
- Worker's Compensation Consumer Assistance
- Office of Minority Health
- Nevada 2-1-1
- Affordable Care Act – Consumer Assistance Program
- Affordable Care Act – Silver State Exchange Consumer Assistance

### Service Area:

GovCHA operates statewide out of their main office in Las Vegas, with a satellite operation in Elko for Northern/Rural Nevadans. The Office of Minority Health is based in the Las Vegas Office for Consumer Health Assistance.

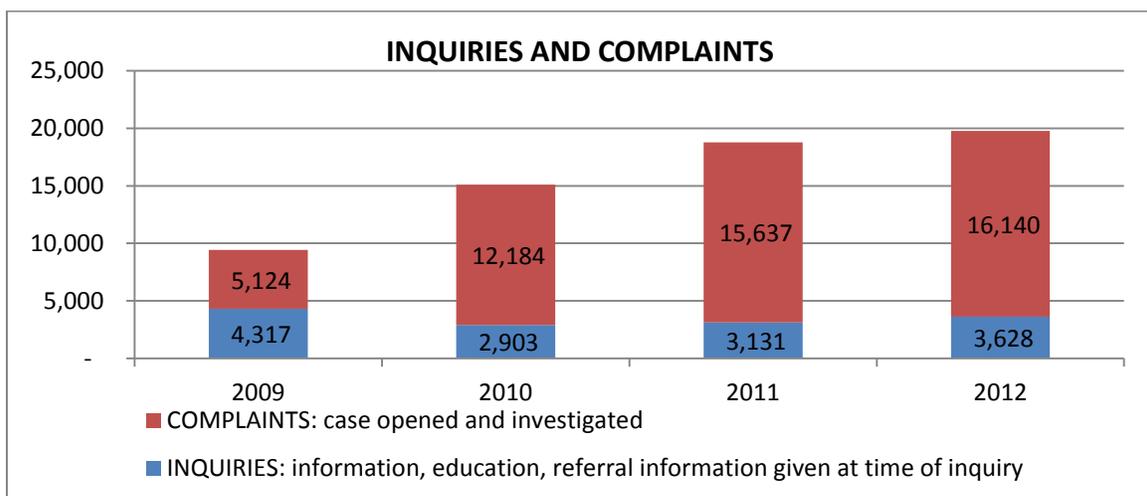
### Hours:

GovCHA office hours are 8am – 5pm Monday through Friday, inquiries are accepted after hours by voice mail and email, and are returned as soon as possible

### Workload History:

GovCHA currently has nine full-time Ombudsmen managing caseloads of 90 to 175. Each, Ombudsman's case load may vary in volume according to specialty and complexity of cases. Nevada's Ombudsmen manage complex cases ranging in context from access to care, billing disputes, hospital bills, provider/insurance grievances and appeals, oncology, chronic disease and Medicare/Medicaid benefits coordination. With Nevada's Governor Brian Sandoval supporting Medicaid Expansion, GovCHA has begun to receive an increased volume of calls, as of October 1, 2013, from individuals wanting information about Nevada Medicaid and Nevada Health Link.

### Consumers Assisted:



### Comments:

Full details of GovCHA's programs, notable accomplishments, and history is published annually in our 2012 Executive Report, which is available on our website.

### Website:

[www.govcha.nv.gov](http://www.govcha.nv.gov)

# Nevada Department of Health and Human Services, Director's Office

## 1.03 Office of Minority Health

**Program:** The Office of Minority Health (OMH) was established under NRS 232.467. The mission of OMH is to improve the quality of health care services for members of minority groups, to increase access to health care services, to seek ways to provide education, address, treat and prevent diseases and conditions that are prevalent among minority populations, increase access to health care services, and disseminate information to and educate the public on matters concerning health care issues of interest to members of minority groups. AB519 placed the Office of Minority Health under the Office of Consumer Health Assistance within the Department of Health and Human Services, Director's Office. AB519 was approved by the Governor in June 2011.

OMH provides a central source of information concerning healthcare services and issues for racial and ethnic minorities. OMH recently received a 2-year Grant for FY13-15, to focus on providing Education and Outreach about the Affordable Care Act to minority communities within Nevada, and encourage them to enroll in Nevada Health Link or Nevada Medicaid. Staff plans to travel statewide during the next two years to provide this information through conferences, trainings, and other forms of targeted outreach. OMH engages in outreach activities and fosters partnerships with stakeholder groups including: community and faith-based organizations; schools and universities; medical centers, health care systems, and health departments; tribal, state, and federal government offices; policymakers and community residents; advisory committees and task forces; and corporations, foundations, and the media. OMH provides information regarding minority health care issues and helps ensure that both public and private entities have access to culturally competent and linguistically appropriate health information. OMH incorporates appropriate bilingual communication as needed. In addition to the OMH Program Management staff, and Advisory Committee, GovCHA has a designated Minority Health Ombudsman that advocates for the consumer regarding, billing dispute and access to care issues.

**Funding:** In September 2013, Nevada was awarded a grant from the State Partnership Grant Program to Improve Minority Health. The grant award is for \$300,000, allocated over a two year period from 9/1/2013 – 8/31/2015, at \$150,000 per year. OMH's project associated with this grant focuses on Affordable Care Act outreach and education and the promotion and dissemination of Cultural and Linguistically Appropriate Services (CLAS) Standards among healthcare providers. The grant fully funds the OMH Program Manager and a .50FTE Administrative Assistant position, which were previously paid out of State General Funds.

### Key Demographics:

| Region        | Metric     | Whites*     | African Americans* | Asian Americans* | American Indian/Alaskan Native* | Native Hawaiian s/Pacific Islander* | Persons Reporting Two or More Races | Hispanic/Latino** |
|---------------|------------|-------------|--------------------|------------------|---------------------------------|-------------------------------------|-------------------------------------|-------------------|
| United States | Population | 243,353,287 | 40,818,541         | 15,579,596       | 3,739,103                       | 623,184                             | 7,166,614                           | 52,035,850        |
|               | % of Total | 78.1        | 13.1               | 5.0              | 1.2                             | 0.2                                 | 2.3                                 | 16.7              |
| Nevada        | Population | 2,116,021   | 234,206            | 209,696          | 43,573                          | 19,063                              | 100,763                             | 738,020           |
|               | % of Total | 77.7        | 8.6                | 7.7              | 1.6                             | 0.7                                 | 3.7                                 | 27.1              |

Source: US Census Bureau, 2011 State and County QuickFacts: [quickfacts.census.gov/afd/states/32000.html](http://quickfacts.census.gov/afd/states/32000.html)

\*Percentages and total population estimates include persons indicating only one race.

\*\*Hispanic/Latino may be of any race, so also included in applicable race categories.

**Website** [www.GovCHA.nv.gov](http://www.GovCHA.nv.gov)

# Nevada Department of Health and Human Services, Director's Office

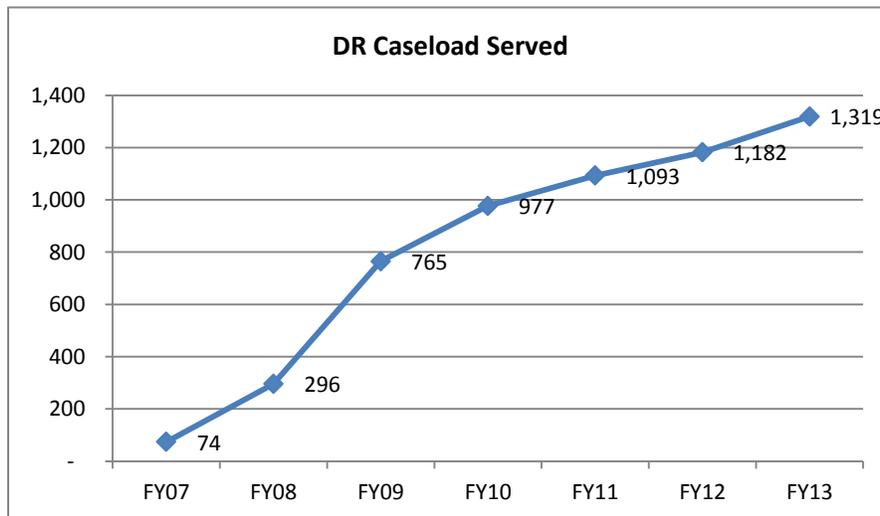
## 1.04 Differential Response

**Program:** The Differential Response Program is a joint project between the Family Resource Centers and the three child welfare agencies. Reports of child maltreatment that meet the statutory threshold for a home visit to determine child well-being, where there is not an imminent threat to the child's safety, may be referred to the Differential Response staff for assessment and case management. Typically these reports involve such issues as educational neglect, environmental neglect, medical neglect, and improper supervision. Frequently the Differential Response worker is able to assist the family in accessing services that will assist the family in providing positive interactions and a safe environment for their children.

**Service Areas:** Services are provided in the following counties: Clark, Washoe, Elko, Carson City, Douglas, Storey, Churchill, Lyon, Mineral, Pershing and southern Nye.

### Workload History:

| Fiscal Year | Referred | Served | Closed |
|-------------|----------|--------|--------|
| FY07        | 90       | 74     | 33     |
| FY08        | 362      | 296    | 247    |
| FY09        | 912      | 765    | 665    |
| FY10        | 1,053    | 977    | 906    |
| FY11        | 1,137    | 1,093  | 1,135  |
| FY12        | 1,234    | 1,187  | 1,182  |
| FY13        | 1,319    | 1,306  | 1,319  |
| FY14 YTD    | 850      | 835    | 576    |



**Comments:** The chart reflects ongoing caseload with additional programs coming on and ramping up their services. Reports screened for a DR response typically involved families with basic needs, followed by educational neglect, lack of supervision, medical neglect, and various family problems. Currently, DR referrals reflect approximately 9 percent of the child maltreatment reports in the communities served. If expanded statewide, it is estimated that DR referrals could reach 17 percent of total child maltreatment reports. Nevada is one of 22 states implementing Differential Response.

**Website:** <http://dhhs.nv.gov/Grants/Committees/DR/DR%20Pilot%20Project%202007-02.doc>

# Nevada Department of Health and Human Services, Director's Office

## 1.05 Grants Management Unit

**Program:** The Grants Management Unit (GMU) is an administrative unit within the Department of Health and Human Services, Director's Office. It administers grants to local, regional, and statewide programs serving Nevadans. The Unit ensures accountability and provides technical assistance for the following programs.

- Children's Trust Fund (CTF) grants prevent child abuse and neglect.
- Community Service Block Grant (CSBG) promotes self-sufficiency, family stability, and community revitalization.
- Family Resource Centers (FRC) provide information and referral services, and various support services to families.
- Differential Response (DR) addresses child safety by supporting a partnership between child welfare agencies and designated FRCs.
- Fund for a Healthy Nevada (FHN) grants (1) improve the health and well-being of Nevada residents including programs that improve health services for children and (2) improve the health and well-being of persons with disabilities.
- Social Service Block Grant (SSBG-TXX) assists persons in achieving or maintaining self-sufficiency and/or prevents or remedies neglect, abuse, or exploitation of children and adults.
- Revolving Account for Problem Gambling Treatment and Prevention provides funding for problem gambling treatment, prevention, research and related services.

**Eligibility:** Most GMU funding sources target at-risk populations. CTF focuses on primary and secondary prevention of child abuse and neglect. CSBG targets people at 125 percent of the Federal Poverty Level. FRC must conduct outreach to at-risk populations. Some FHN funds are targeted to people with disabilities.

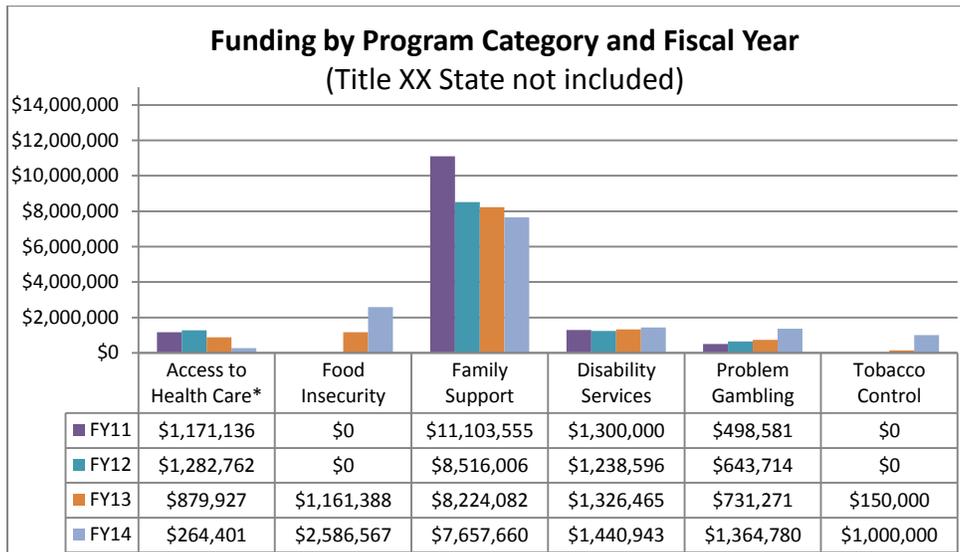
### Funding Categories with Priority Activities in FY14:

**Wellness** – Hunger/Food Security; Access to Health Care

**Family Support** – Parent Training; Child Self-Protection Training; Crisis Intervention; Respite Care

**Disability Services** – Independent Living; Positive Behavior Support; Respite Care

**Problem Gambling** – Treatment; Technical Assistance; Data Collection and Evaluation.



\*Beginning in FY14, this category supports only Access to Health Care

**Comments:** In FY13, a statewide community needs assessment indicated a need to shift resources to a new service category -- Food Security. Projects are intended to provide direct services to reduce hunger, help food insecure individuals and families become more self-sufficient, build capacity within the food safety network, and maximize federal benefits. Funding is drawn from SSBG-Title XX and FHN Wellness (known as FHN Children's Health or as FHN All Nevadans prior to FY13).

**Prior to FY11**, the DHHS-DO GMU administered FHN programs intended to prevent, reduce, or treat the use of tobacco and the consequences of the use of tobacco. Effective July 1, 2010, administration of these funds was transferred to the Division of Public and Behavioral Health (PBH). No funds were specifically allocated by the Legislature for tobacco control in FY11, FY12 or FY13, but in FY13 the GMU was able to award a small amount of otherwise unobligated FHN funds to PBH to help sustain the Nevada Tobacco Users' Helpline. For FY14, the Legislature approved a \$1 million allocation to PBH to partially restore tobacco control activities.

**Website:** <http://dhhs.nv.gov/Grants/GrantsManagement.htm>

# Nevada Department of Health and Human Services, Director's Office

## 1.06 Head Start Collaboration and Early Childhood Systems Office

**Program:** Through statewide partnerships, the Nevada Head Start Collaboration and Early Childhood Systems Office enhances relationships, builds systems, and promotes comprehensive quality services to meet the needs of young children and their families. The office manages the work of the Nevada Early Childhood Advisory Council and is responsible for three funding sources, two of which are federal and one of which is state funded. The focus of all three grants is to improve early childhood systems and partnerships at the state and local level so that children show up ready for school!

The Office does not regulate or oversee Head Start programs. The needs of Head Start grantees specific to collaboration with health and other service providers is assessed annually as required by the Head Start Act. Essential partners for increasing and improving services for low income children include the Nevada State Division of Public and Behavioral Health, Division of Child and Family Services, Division of Welfare and Supportive Services, Child Care and Development, Nevada State Higher Education Institutions, Services for Homeless Children, the Nevada Department of Education, Private non-profit organizations, and Head Start grantees, including those providing services to children and families in tribal and migrant/seasonal programs.

Head Start and Early Head Start programs promote school readiness for economically disadvantaged children by enhancing their social and cognitive development through the provision of educational, health, nutritional, social and other services. Head Start programs serve children ages 3-5 and their families. Early Head Start programs serve pregnant women and children birth to 3 and their families. The federal Office of Head Start (OHS) provides grants directly to public and private, non-profit and for profit agencies in Nevada to operate Head Start and Early Head Start programs serving children and families living in poverty across the state. Programs engage parents in their children's learning and support them in making progress toward their educational, literacy and employment goals. Significant emphasis is placed on the involvement of parents in the administration of local Head Start programs.

**Eligibility:** Head Start programs primarily serve children and families living in poverty. However, up to 10% of children and families enrolled do not have to meet any income requirement. Minimally, 10% of each program's total enrollment must be children with diagnosed disabilities or special needs. Head Start programs in Nevada served almost 13% of children who have a disability or special need in FY2013. When the "Improving Head Start for School Readiness Act of 2007" was passed, programs were provided the flexibility to allow up to 35% of children living in families with incomes up to 130% of the federal poverty level, provided the program demonstrates that all eligible children living at or below the poverty level in the community had been given the opportunity to enroll.

**Other:** In October 2013, Governor Sandoval signed an executive order transferring authority for the Head Start Collaboration and Early Childhood Systems Office to the Nevada Department of Education. The office will continue to manage the work of the Nevada Early Childhood Advisory Council as it transitions to NDE. Early Childhood Comprehensive Systems funding from the Health Resources and Services Administration and ARRA funding from the Administration of Children and Families have supported the work of the council to date. Senate Bill 486 allocated \$1.5 million over the 2013-2015 biennium to pilot Silver State KIDS, enabling developmental assessment of 50% of children during the first year and 100% of children in the second year, that are served by publicly funded early childhood education programs and at kindergarten entry. The first ever statewide assessment of the availability of quality early care and education is now complete and available on our website at <http://dhhs.nv.gov/HeadStart/Docs/AssessmentOfCenter-BasedQualityFinal.pdf>. The council's Early Childhood Comprehensive Systems plan can be found at [http://www.nevadaecac.com/wp-content/uploads/2014/01/1A.-NV-2013-Early-Childhood-System-Strategic-Plan\\_Final.pdf](http://www.nevadaecac.com/wp-content/uploads/2014/01/1A.-NV-2013-Early-Childhood-System-Strategic-Plan_Final.pdf).

**Comments:** In fiscal year 2013, Head Start and Early Head Start programs in Nevada served 4,649 children and received approximately \$30 million in Head Start funding that allowed just under 8% of Nevada's eligible children (those living in poverty or below) to receive the comprehensive early childhood development services provided by these programs. Due to sequestration 239 fewer children are being served and over 20 staff lost their jobs. During FY2010, over \$23,000 was spent per inmate at the Nevada State Prison. During that same year less than \$8,000 was spent per child enrolled in Nevada Head Start programs. As adults, research shows that Head Start graduates are less likely to have been charged with a crime than their siblings who did not participate in Head Start programs. Over 12% of families served during FY 2013 were homeless. Head Start and Early Head Start grantees must provide a 20% match, which can be in cash or documented in-kind donations. Programs often struggle to meet this non-federal match requirement.

**Website:** <http://dhhs.nv.gov/HeadStart.htm>

# Nevada Department of Health and Human Services, Director's Office

## 1.07 Office of Health Information Technology

**Program:** Nevada DHHS is responsible for leading the state's Health Information Technology (HIT) and electronic Health Information Exchange (HIE) efforts. By playing a significant role in the development and implementation of a state-wide HIE system, DHHS can be sure the system will be cost-effective and sustainable, leverage investments already made by the health care community and the state, and meet established national standards. Meaningful use of HIE will be the foundation for improving the quality and efficiency of Nevada's health care system for all populations, as well as reducing medical errors.

The Health Information Technology for Economic and Clinical Health (HITECH) Act was enacted as part of the 2009 American Recovery and Reinvestment Act (ARRA) and authorized outlays for HIT. It expands the role of states in fostering a technical infrastructure to facilitate intra-state, interstate and nationwide HIE. Better health care does not come from the adoption of technology itself. It is accomplished through the electronic exchange and use of health information for effective clinical decisions at the time and point of care.

The Office of Health Information Technology (OHIT) is responsible for administering the 4-yr. \$6,133,426 Nevada ARRA HITECH State HIE Cooperative Agreement awarded to DHHS. The funding must be used for facilitating the core infrastructure and capacity that will enable the electronic exchange of health information and coordinating related HIE initiatives, including state economic and workforce development. The State HIE Cooperative Agreement performance period is February 8, 2010 through February 7, 2014.

**Other:** As required by the grant, Nevada's State HIT Strategic and Operational Plan (State HIT Plan) was approved by federal HHS in May 2011, and the most recent required updated version was approved October 2013. The plan's implementation is enabled and supported by NRS 439.581-595 (Senate Bill 43 passed in 2011).

**Comments:** In September 2009, Governor Jim Gibbons issued an Executive Order establishing the Nevada HIT Blue Ribbon Task Force (HIT Task Force) to assist DHHS with the development of the State HIT Plan and to recommend legislative and policy actions. The Governor appointed a diverse group of 20 key stakeholders, which included representatives from Nevada Medicaid, health care systems and providers, public health, insurance, payers and employers, the Nevada System of Higher Education, pharmacy, medical records, legal, and consumers. From October 2009 through January 2011, the HIT Task Force met almost monthly, under Open Meeting Law, and its final recommendations were incorporated into both the State Health IT Plan and SB 43. By Executive Order, the HIT Task Force sunset on June 30, 2011, after successfully completing its mission. Per NRS 439.588, the Nevada Health Information Exchange (NV-HIE) was established September 2012 as a Nevada domestic non-profit corporation, and is seeking federal 501(c)3 status. Its Board has met regularly since August 21, 2012. NV DIRECT (Phase 1 HIE) was launched April 29, 2013. For Phase 2 HIE, a competitive procurement resulted in the selection of Orion Health's HIE solution by the NV-HIE Board. Work began September 27, 2013, and initial services will be available January 2014. NV-HIE has 4 full-time employees. NV is one of the founding member states of the National Association for Trusted Exchange (NATE), facilitating interstate HIE.

**Web site:** <http://dhhs.nv.gov/Hit.htm>

This page left intentionally blank

# Nevada Department of Health and Human Services, ADSD

## 2.01 Advocate for Elders

**Program:** The Aging and Disability Services Division (ADSD) Advocate for Elders program provides advocacy and assistance to frail, older adults and their family members to enable older adults to maintain their independence and make informed decisions.

**Eligibility:** Seniors age 60 or older, primarily homebound residing in communities throughout Nevada.

**Workload History:**

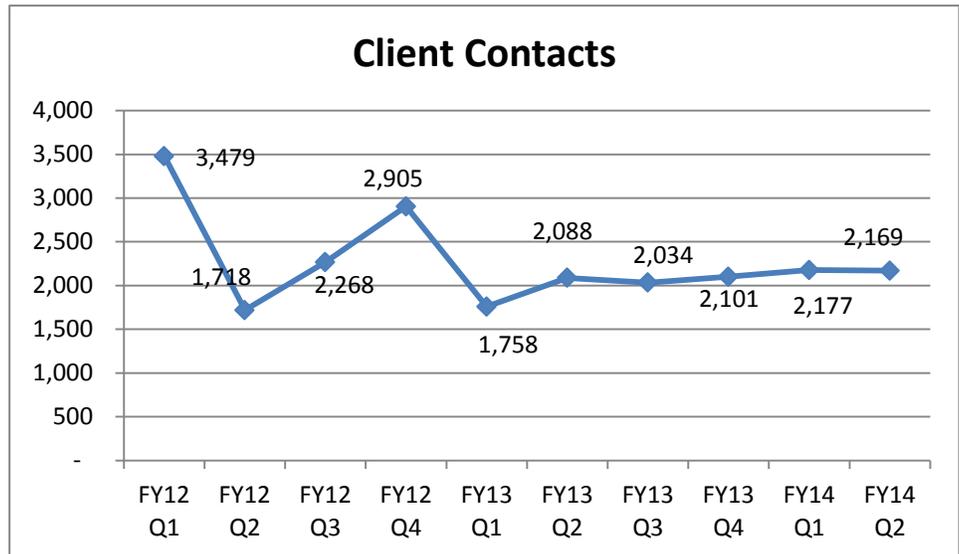
| Fiscal Year | Client Contacts |
|-------------|-----------------|
| FY11        | 11,202          |
| FY12        | 10,370          |
| FY13        | 7,981           |

**FYTD:**

|        |     |
|--------|-----|
| Jul 13 | 766 |
| Aug    | 704 |
| Sep    | 707 |
| Oct    | 722 |
| Nov    | 621 |
| Dec    | 826 |
| Jan 14 |     |
| Feb    |     |
| Mar    |     |
| Apr    |     |
| May    |     |
| Jun    |     |

**FY14 Total** 4,346

**FY14 Average** 724



**Other:** "Client contacts" include: phone calls, walk-ins, e-mail, postal mail, and contacts made on behalf of a client. Please note the program has 2.5 staff positions; one full-time Advocate for Elders in Northern Nevada, one in Southern Nevada, and a half-time position in Elko to serve Elko area seniors.

**Funding Stream:** General Fund

**Comment:** ADVOCATE FOR ELDERS: Historically, program contacts increase related to the Open Enrollment Period of the State Health Insurance Assistance Program (SHIP) which occurs during Quarter (Q) 2 of each State Fiscal Year. SFY 13 was stable overall - any dips are reflected are a result of a turnover in staff. SFY 14 Q1 is stable.

**Web Link:** [http://www.nvaging.net/advocate\\_for\\_elders.htm](http://www.nvaging.net/advocate_for_elders.htm)

# Nevada Department of Health and Human Services, ADSD

## 2.02 Community Options Program for the Elderly (COPE)

**Program:** The Aging and Disability Services Division (ADSD) Community Options Program for the Elderly (COPE) provides services to seniors to help them maintain independence in their own homes as an alternative to nursing home placement. COPE services can include the following non-medical services: Case Management, Homemaker, Adult Day Care, Adult Companion, Attendant Care, Personal Emergency Response System, Chore and Respite.

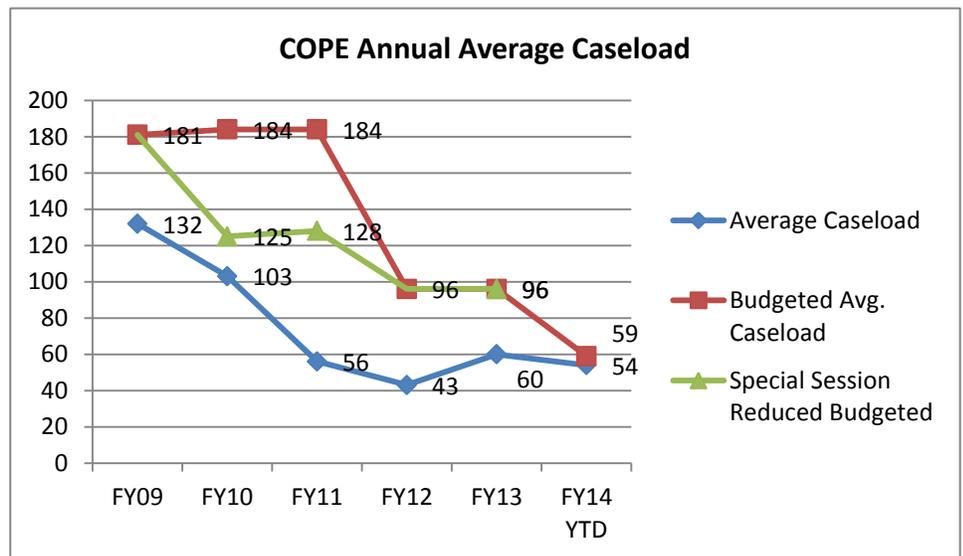
**Eligibility:** Must be 65 years old or older; financially eligible (for 2014 income up to \$3,063; assets below \$10,000 for an individual and \$30,000 for a couple); at risk of nursing home placement without COPE services to keep them in their home and community. Priority given to those meeting criteria of NRS 426 – unable to bathe, toilet and feed self without assistance.

### Workload History:

| Fiscal Year | Average Caseload | Budgeted Avg. Caseload | Special Session Reduced Budgeted | Average Waitlist | Total Expenditures |
|-------------|------------------|------------------------|----------------------------------|------------------|--------------------|
| FY10        | 103              | 184                    | 125                              | 4                | \$760,522          |
| FY11        | 56               | 184                    | 128                              | 4                | \$413,487          |
| FY12        | 43               | 96                     | N/A                              | 4                | \$372,824          |
| FY13        | 60               | 96                     | N/A                              | 11               | \$548,775          |
| FY14 YTD    | 54               | 59                     | N/A                              | 6                | Not Yet Available  |

### FYTD:

| Month               | Caseload   | Waitlist  |
|---------------------|------------|-----------|
| Jul 13              | 55         | 12        |
| Aug                 | 55         | 10        |
| Sep                 | 56         | 9         |
| Oct                 | 54         | 2         |
| Nov                 | 53         | 0         |
| Dec                 | 53         | 0         |
| Jan 14              |            |           |
| Feb                 |            |           |
| Mar                 |            |           |
| Apr                 |            |           |
| May                 |            |           |
| Jun                 |            |           |
| <b>FY14 Total</b>   | <b>326</b> | <b>33</b> |
| <b>FY14 Average</b> | <b>54</b>  | <b>6</b>  |



**Funding Stream:** General Fund

**Web Link:** <http://www.nvaging.net/cope.htm>

**Comment:** The reconciliation of direct services and administrative costs are not completed until several months after the closure of a quarter. Actual expenditures will be updated after the reconciliation process.

# Nevada Department of Health and Human Services, ADSD

## 2.03 Elder Protective Services Program

**Program:** Nevada Revised Statutes mandates that Aging and Disability Services Division receive and investigate reports of abuse, neglect, exploitation and isolation of older persons, defined as 60 years or older. The Elder Protective Services (EPS) program utilizes licensed social workers to investigate elder abuse reports. Social workers provide interventions to remedy abusive, neglectful and exploitive situations. The investigation commences within three working days of the report. EPS may contact local law enforcement or emergency responders for situations needing immediate intervention. The Crisis Call Center handles after-hour calls for EPS. EPS refers cases where a crime may have been committed to law enforcement agencies for criminal investigation and possible prosecution. Self-neglect is the single largest problem reported. EPS social workers provide training to various organizations regarding elder abuse and mandated reporting laws.

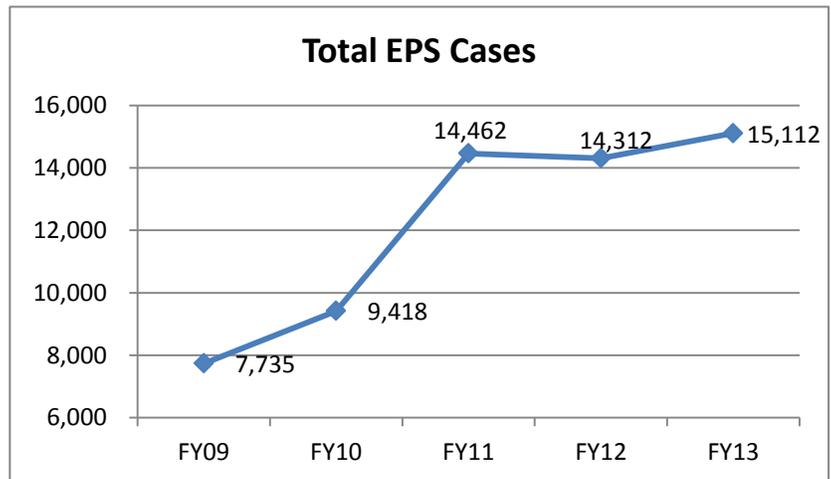
**Eligibility:** Any older person, defined by NRS as 60 years or older, is eligible. EPS investigates elder abuse reports in all counties of Nevada in both community and long-term care settings.

### Workload History:

| Fiscal Year | Total Cases | Average Cases per Social Worker | Total Expenditures |
|-------------|-------------|---------------------------------|--------------------|
| FY11        | 14,462      | 57                              | \$1,797,654        |
| FY12        | 14,312      | 43                              | \$3,437,968        |
| FY13        | 15,112      | 41                              | \$3,812,582        |
| FY14 YTD    | 7,422       | 42                              | \$1,203,072        |

### FYTD:

| Month               | Total Cases  | Avg. Cases per Social Worker |
|---------------------|--------------|------------------------------|
| Jul 13              | 1,236        | 40                           |
| Aug                 | 1,213        | 39                           |
| Sep                 | 1,283        | 40                           |
| Oct                 | 1,391        | 46                           |
| Nov                 | 1,180        | 44                           |
| Dec                 | 1,119        | 40                           |
| Jan 14              |              |                              |
| Feb                 |              |                              |
| Mar                 |              |                              |
| Apr                 |              |                              |
| May                 |              |                              |
| Jun                 |              |                              |
| <b>FY14 Total</b>   | <b>7,422</b> | <b>249</b>                   |
| <b>FY14 Average</b> | <b>1,237</b> | <b>42</b>                    |



**Funding Stream:** TITLE XX - Title XX funds through the Nevada Department of Health and Human Services; General Fund

**Comment:** TOTAL CASES - Total cases represent Total New Cases Received, Total Cases Investigated and Closed and Cases Carried Over from the Previous Months. The Average Cases per Social Worker represents the Total Cases divided by the Actual number of Social Workers. As of July 1, 2010, ADSD assumed full responsibility for all elder abuse investigations in Clark County making ADSD and law enforcement agencies the sole responders to reports of elder abuse statewide.

**Web Link:** [http://www.nvaging.net/protective\\_svc.htm](http://www.nvaging.net/protective_svc.htm)

# Nevada Department of Health and Human Services, ADSD

## 2.04 Homemaker Program

**Program:** The Aging and Disability Services Division (ADSD) Homemaker Program provides in-home supportive services for seniors and persons with disabilities who require assistance with activities such as housekeeping, shopping, errands, meal preparation and laundry to prevent or delay placement in a long-term care facility.

**Eligibility:** Seniors and person with disabilities throughout Nevada in need of supportive services; financially eligible (110 percent of Federal Poverty income below \$1,053.00 monthly).

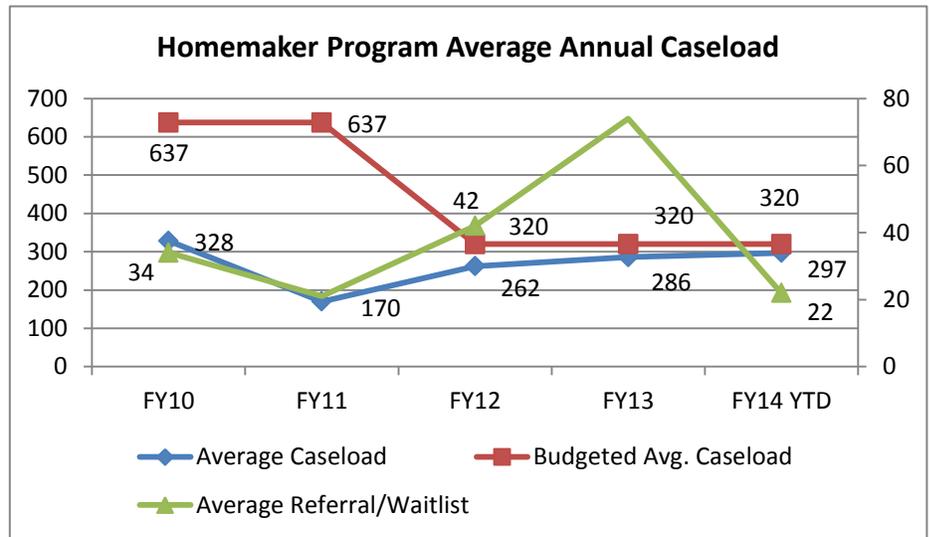
### Workload History:

| Fiscal Year | Average Caseload | Budgeted Avg. Caseload | Reduced Average Caseload per IFC Hearing | Average Referral/Waitlist | Total Expenditures |
|-------------|------------------|------------------------|--|---------------------------|--------------------|
| FY10        | 328              | 637                    | N/A                                      | 34                        | \$910,353          |
| FY11        | 170              | 637                    | 280                                      | 21                        | \$860,423          |
| FY12        | 262              | 320                    | N/A                                      | 42                        | \$530,446          |
| FY13        | 286              | 320                    | N/A                                      | 74                        | \$567,943          |
| FY14 YTD    | 297              | 320                    | N/A                                      | 22                        | Not Yet Available  |

### FYTD:

| Month  | Caseload | Waitlist |
|--------|----------|----------|
| Jul 13 | 309      | 34       |
| Aug    | 299      | 61       |
| Sep    | 295      | 8        |
| Oct    | 291      | 10       |
| Nov    | 293      | 8        |
| Dec    | 294      | 11       |
| Jan 14 |          |          |
| Feb    |          |          |
| Mar    |          |          |
| Apr    |          |          |
| May    |          |          |
| Jun    |          |          |

|                     |              |            |
|---------------------|--------------|------------|
| <b>FY14 Total</b>   | <b>1,781</b> | <b>132</b> |
| <b>FY14 Average</b> | <b>297</b>   | <b>22</b>  |



**Funding Stream:** Title XX/General Fund

**Web Link:** [http://www.nvaging.net/homemaker\\_program.htm](http://www.nvaging.net/homemaker_program.htm)

# Nevada Department of Health and Human Services, ADSD

## 2.05 Independent Living Grants

**Program:** Independent Living Grants (ILG): The Nevada State Legislature passed legislation in 1999, which enacted the Governor's plan for utilizing part of Nevada's proceeds from the Master Tobacco Settlement to support "independent living" among Nevada seniors. This program funds a number of vital services for seniors, such as respite care, transportation and supportive services. Supportive services includes: adult day care; case management; case management for Elder Protective Services; caregiver support services; information, assistance and advocacy; companion services; durable medical equipment and healthcare products; geriatric health and wellness; homemaker services; home services; legal services; medical nutrition therapy; volunteer care; emergency food pantry; Personal Emergency Response System (PERS); protective services; and representative payee.

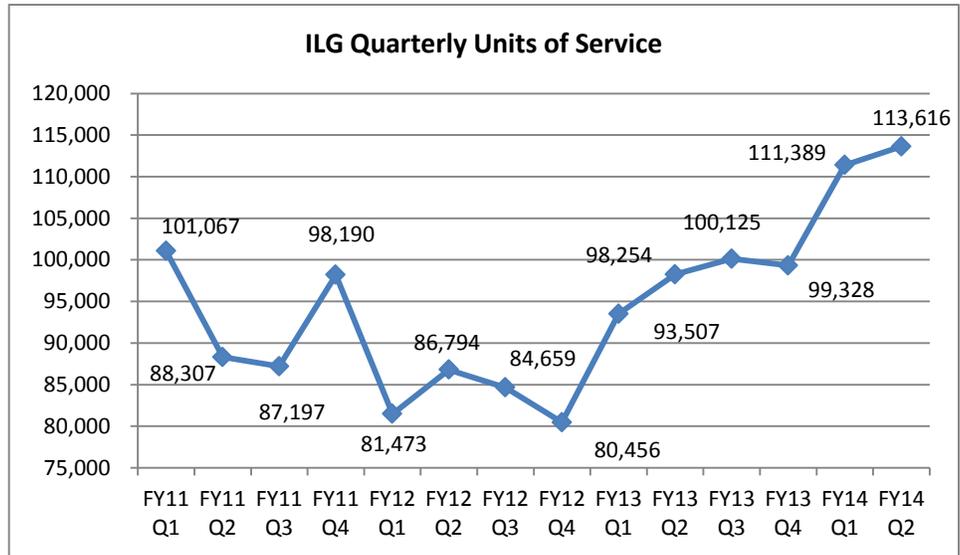
**Eligibility:** Seniors throughout Nevada, age 60 or older, in need of assistance to live independently.

**Workload History:**

| Fiscal Year | Units of Service | Monthly Average Units |
|-------------|------------------|-----------------------|
| FY10        | 346,058          | 28,838                |
| FY11        | 374,760          | 31,230                |
| FY12        | 333,382          | 27,782                |
| FY13        | 391,214          | 32,601                |

**FYTD:**

| Month               | Units of Service |
|---------------------|------------------|
| Jul 13              | 36,924           |
| Aug                 | 38,741           |
| Sep                 | 35,724           |
| Oct                 | 39,804           |
| Nov                 | 38,259           |
| Dec                 | 35,554           |
| Jan 14              |                  |
| Feb                 |                  |
| Mar                 |                  |
| Apr                 |                  |
| May                 |                  |
| Jun                 |                  |
| <b>FY14 Total</b>   | <b>225,005</b>   |
| <b>FY14 Average</b> | <b>37,501</b>    |



**Funding Stream:** Healthy Nevada Fund from the Tobacco Settlement Fund

**Web Link:** [http://www.nvaging.net/grants/grants\\_main.htm](http://www.nvaging.net/grants/grants_main.htm)

**Analysis of Trends** The SFY 2012 trend is generally stable with expected program fluctuations. One year can differ from another for clients served due to the types of programs funded and the movement of programs between OAA Title III-B and Independent Living Grant funding. For SFY 13 Q1 the trend shows a slight increase due to a change in funded services between funding sources. The same remains true for SFY 2014.

# Nevada Department of Health and Human Services, ADSD

## 2.06 Long Term Care Ombudsman Program (Elder Rights Advocates)

**Program:** The Long Term Care (LTC) Ombudsman program is authorized by the federal Older American’s Act. The Act requires that a statewide Ombudsman program investigate and resolve complaints made by or on behalf of older individuals who are residents of long term care facilities. The Act also requires numerous activities related to the promotion of quality care in LTC facilities. Elder Rights Specialists, also known as Ombudsmen, provide residents with regular and timely access to Ombudsman services by conducting routine visits to assigned facilities. They advocate for residents and provide information regarding services to assist residents in protecting their health, safety, welfare and rights. The Ombudsman Program is comprised of two basic components – a “case” or an “activity”. A Case includes the investigation and resolution of particular complaints made by or on behalf of residents. Activities include duties such as consultation and training for facility staff, working with resident and family councils, and participating in facility surveys.

**Eligibility:** Eligibility includes every older person, aged 60 years or older, living in a long term care facility including:

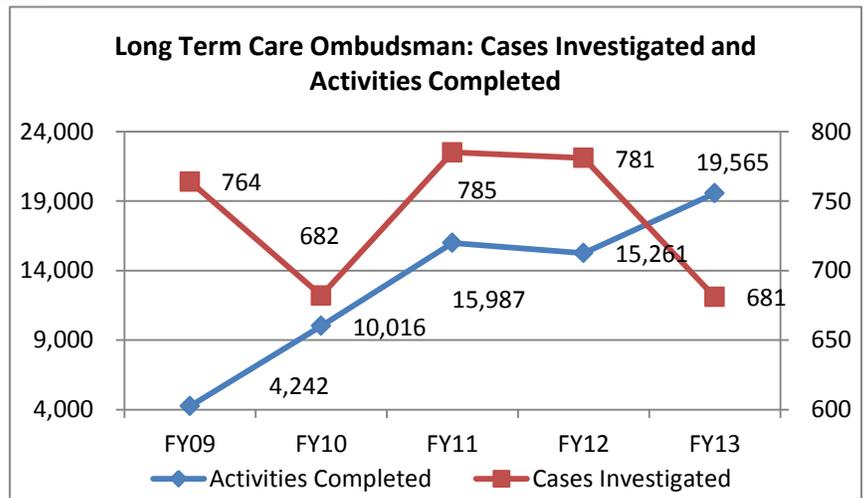
- Homes for Individual Residential Care
- Residential Facilities for Groups including Assisted Living Facilities
- Skilled Nursing Facilities
- Nursing Facilities (including Intermediate Care Facilities)

**Workload History:**

| Fiscal Year | Activities Completed | Cases Investigated |
|-------------|----------------------|--------------------|
| FY11        | 15,987               | 785                |
| FY12        | 17,347               | 781                |
| FY13        | 19,565               | 681                |
| FY14 YTD    | 12,198               | 414                |

**FYTD:**

| Month               | Activities Completed | Cases Investigated |
|---------------------|----------------------|--------------------|
| Jul 13              | 2,038                | 69                 |
| Aug                 | 1,648                | 64                 |
| Sep                 | 2,074                | 112                |
| Oct                 | 2,128                | 50                 |
| Nov                 | 1,812                | 59                 |
| Dec                 | 2,498                | 60                 |
| Jan 14              |                      |                    |
| Feb                 |                      |                    |
| Mar                 |                      |                    |
| Apr                 |                      |                    |
| May                 |                      |                    |
| Jun                 |                      |                    |
| <b>FY14 Total</b>   | <b>12,198</b>        | <b>414</b>         |
| <b>FY14 Average</b> | <b>2,033</b>         | <b>69</b>          |



**Funding Stream:** TITLE III - Older Americans Act Funds through the Administration on Aging; TITLE VII - Older Americans Act Funds through the Administration on Aging; Medicaid Funds through the Division of Health Care Financing and Policy; General Fund

**Web Link:** <http://www.nvaging.net/ltc.htm>

**Comment:** The gradual increase in program activities for the Long Term Care Ombudsman Program (LTCOP) from SFY09 through SFY11 can be attributed to the proper recording and tracking of program related activities. The increase in SFY12 is correlated with the addition of the Volunteer Long Term Care Ombudsman Program (VLT COP); program volunteers augment the program and thus program activities result from their volunteer time. The number of Program Activities is expected to continue to rise in SFY13 as a result of the continued recruitment and activities of the VLT COP. Please Contact Heather Korbolic at (775) 688-2964 # 260 or hkkorbolic@adsd.nv.gov for more information.

# Nevada Department of Health and Human Services, ADSD

## 2.07 Senior Support Services

**Program:** Supportive Services and Senior Center Programs (funded by the Older American's Act Title III-B) are intended to maximize the informal support provided to older Americans, to enable them to remain living independently in their homes and communities. Services funded under Supportive Services and Senior Center Programs include: senior companion; transportation; adult day care; homemaker; information, assistance and advocacy; representative payee; caregiver support, education and training; legal services; telephone reassurance; volunteer services; Personal Emergency Response System (PERS); case management; respite; and transitional housing.

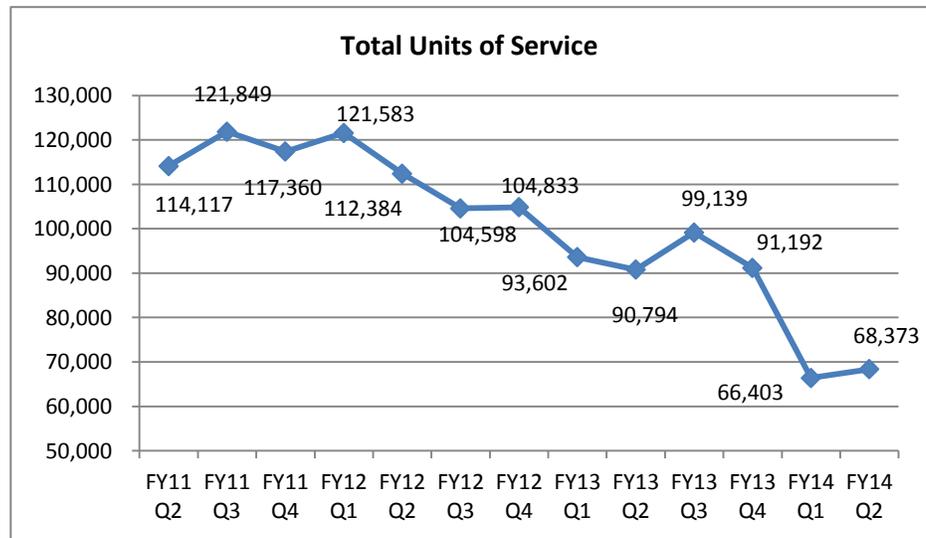
**Eligibility:** Individuals throughout Nevada age 60 or older with particular attention to low-income older individuals, including low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas.

**Workload History:**

| Fiscal Year | Units of Service | Average Units of Service |
|-------------|------------------|--------------------------|
| FY10        | 453,396          | 37,783                   |
| FY11        | 477,956          | 39,830                   |
| FY12        | 443,398          | 36,950                   |
| FY13        | 374,727          | 31,227                   |

**FYTD:**

| Month               | Units of Service |
|---------------------|------------------|
| Jul 13              | 22,396           |
| Aug                 | 21,793           |
| Sep                 | 22,214           |
| Oct                 | 24,664           |
| Nov                 | 21,531           |
| Dec                 | 22,179           |
| Jan 14              |                  |
| Feb                 |                  |
| Mar                 |                  |
| Apr                 |                  |
| May                 |                  |
| Jun                 |                  |
| <b>FY14 Total</b>   | <b>134,776</b>   |
| <b>FY14 Average</b> | <b>22,463</b>    |



**Funding Stream:** Title III - Older Americans Act (OAA) Funds through the Administration on Aging (AoA); General Fund

**Web Link:** [http://www.nvaging.net/grants/grants\\_main.htm](http://www.nvaging.net/grants/grants_main.htm)

**Comment:** For SFY 2012 the downward trend is caused by programs reporting fewer services delivered. For SFY 13 the downward trend is due to a change in funded services between funding sources. SFY 14 decrease is due to a change in funded services between funding sources. The SFY 14 Q 2 trend is stable.

# Nevada Department of Health and Human Services, ADSD

## 2.08 Senior Nutrition – Meals in Congregate Settings

**Program:** "Congregate Nutrition Services (funded by the Older Americans Act Title III - C1) are allocated to provide meals to seniors in congregate settings, usually at senior centers. The purposes of this part are to reduce hunger and food insecurity; to promote socialization of older individuals; and to promote the health and well-being of older individuals by assisting such individuals to gain access to nutrition and other disease prevention and health promotion services to delay the onset of adverse health conditions resulting from poor nutritional health or sedentary behavior."

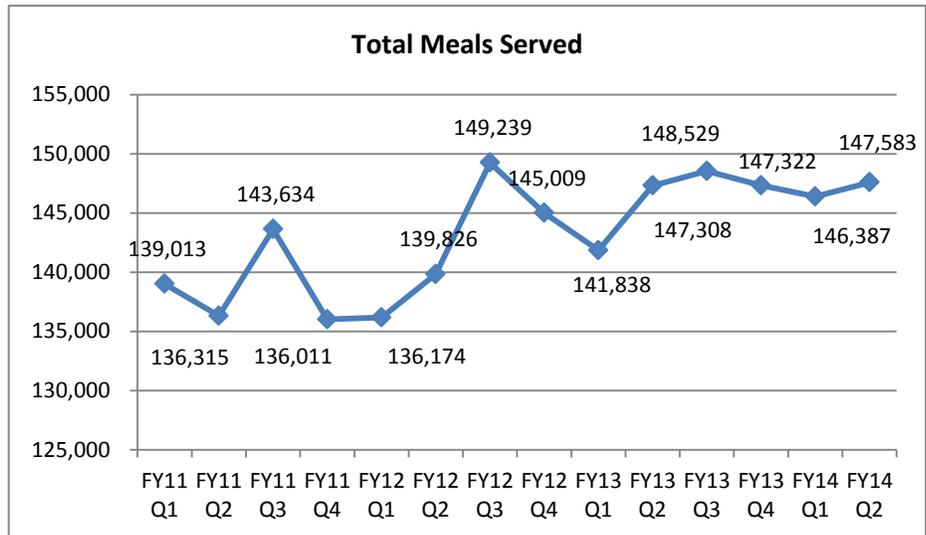
**Eligibility:** Individuals age 60 or older and their spouses; individuals with disabilities who have not attained the age of 60, but reside in housing facilities occupied primarily by older individuals at which a congregate meal site has been established; individuals providing essential volunteer service during meal hours at a congregate setting; adults with disabilities who reside at home with an eligible older individual, who come into the congregate setting without that individual.

**Workload History:**

| Fiscal Year | Units of Service | Average Units of Service |
|-------------|------------------|--------------------------|
| FY10        | 505,011          | 42,084                   |
| FY11        | 554,973          | 46,248                   |
| FY12        | 570,248          | 47,521                   |
| FY13        | 584,997          | 48,750                   |

**FYTD:**

| Month               | Units of Service |
|---------------------|------------------|
| Jul 13              | 48,963           |
| Aug                 | 50,143           |
| Sep                 | 47,281           |
| Oct                 | 53,422           |
| Nov                 | 46,533           |
| Dec                 | 47,628           |
| Jan 14              |                  |
| Feb                 |                  |
| Mar                 |                  |
| Apr                 |                  |
| May                 |                  |
| Jun                 |                  |
| <b>FY14 Total</b>   | <b>293,970</b>   |
| <b>FY14 Average</b> | <b>48,995</b>    |



**Funding Stream:** Title III - Older Americans Act Funds through the Administration on Aging; General Fund

**Web Link:** [http://www.nvaging.net/grants/serv\\_specs/nutrition.htm](http://www.nvaging.net/grants/serv_specs/nutrition.htm)

**Comment:** Meals Served graph - Numbers are reflected for State Fiscal Year and represent the number of meals served to participants of the program. Meal count trends are expected to increase due to Nevada's economic decline. Additionally, meal service can decline in Q4 and Q1, during summer months, due to return of "snow bird" seniors returning to northern climates during these warmer months. For SFY 2013 the trend is stable. SFY 2014 Q1 and Q2 are stable.

# Nevada Department of Health and Human Services, ADSD

## 2.09 Senior Nutrition – Home Delivered Meals

**Program:** Senior Nutrition – Home Delivered Meals (Older Americans Act Title III-C2) funds are allocated to furnish meals to homebound seniors, who are too ill or frail to attend a congregate meal site.

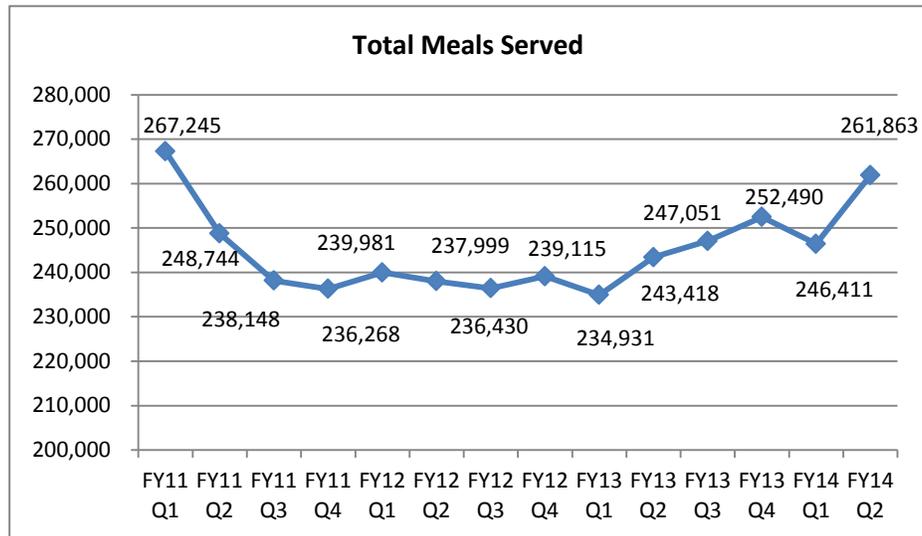
**Eligibility:** Individuals age 60 or older and their spouses and disabled individuals, who reside with individuals over age 60.

**Workload History:**

| Fiscal Year | Units of Service | Monthly Average Units of Service |
|-------------|------------------|----------------------------------|
| FY10        | 890,828          | 74,236                           |
| FY11        | 990,405          | 82,534                           |
| FY12        | 953,525          | 79,460                           |
| FY13        | 977,890          | 81,491                           |

**FYTD:**

| Month               | Units of Service |
|---------------------|------------------|
| Jul 13              | 81,030           |
| Aug                 | 84,898           |
| Sep                 | 80,483           |
| Oct                 | 89,401           |
| Nov                 | 85,134           |
| Dec                 | 87,328           |
| Jan 14              |                  |
| Feb                 |                  |
| Mar                 |                  |
| Apr                 |                  |
| May                 |                  |
| Jun                 |                  |
| <b>FY14 Total</b>   | <b>508,274</b>   |
| <b>FY14 Average</b> | <b>84,712</b>    |



**Funding Stream:** Title III - Older Americans Act Funds through the Administration on Aging; General Fund

**Web Link:** [http://www.nvaging.net/grants/serv\\_specs/nutrition.htm](http://www.nvaging.net/grants/serv_specs/nutrition.htm)

**Comment:** Meals Served graph - Numbers are reflected for State Fiscal Year and represent the number of meals served to participants of the program. Overall, comparing each quarter with the previous year's quarter, the number of meals served has slightly increased. The slight increase is a result of the slowing economic conditions nationwide and in Nevada. The overall trend is stable. SFY 2013 shows a slight increase. SFY 2014 is showing an increase compared to the same time periods in the previous fiscal year. The Q2 service increase is primarily due to a large Home Delivered Meal program being awarded nonfederal funding to help reduce waitlist for services.

# Nevada Department of Health and Human Services, ADSD

## 2.10 National Family Caregiver Program

**Program:** The National Family Caregiver Program (Older Americans Act Title III E) addresses the needs of family caregivers by increasing the availability and efficiency of caregiver support services and of long-term care planning resources.

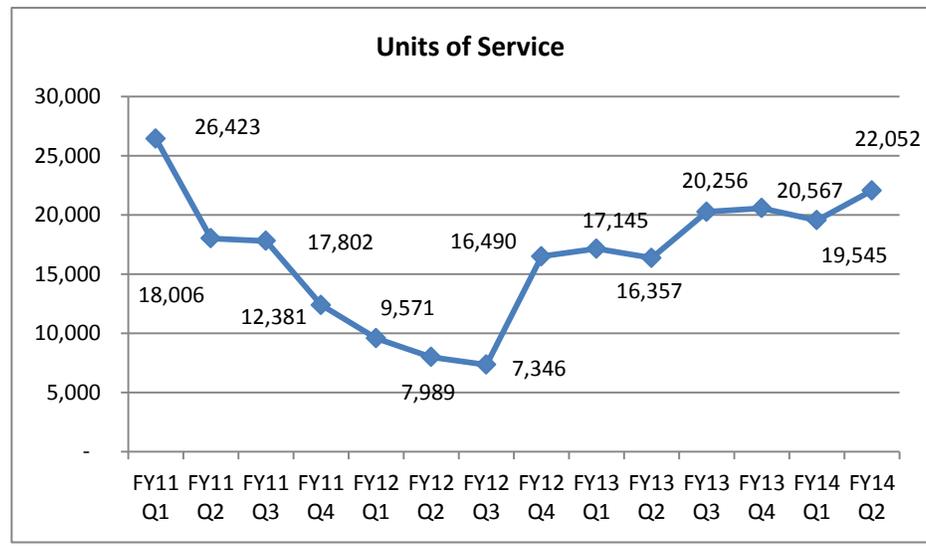
**Eligibility:** Family caregivers of adults age 60 or older; grandparents and caregivers, age 55 or older, of children not more than 18 years of age, who are related by blood, marriage or adoption; parents, age 55 years or older, caring for an adult child with a disability.

**Workload History:**

| Fiscal Year | Units of Service | Average Monthly Units of Service |
|-------------|------------------|----------------------------------|
| FY10        | 67,491           | 5,624                            |
| FY11        | 74,612           | 6,217                            |
| FY12        | 41,395           | 6,218                            |
| FY13        | 74,325           | 6,194                            |

**FYTD:**

| Month  | Units of Service |
|--------|------------------|
| Jul 13 | 6,143            |
| Aug    | 6,806            |
| Sep    | 6,596            |
| Oct    | 7,382            |
| Nov    | 8,590            |
| Dec    | 6,080            |
| Jan 14 |                  |
| Feb    |                  |
| Mar    |                  |
| Apr    |                  |
| May    |                  |
| Jun    |                  |



**FY14 Total** 41,597  
**FY14 Average** 6,933

**Funding Stream:** Title III - Older Americans Act Funds through the Administration on Aging; Healthy Nevada Fund from the Tobacco Settlement Fund

**Web Link:** [http://www.nvaging.net/grants/serv\\_specs/nfcspIIIIE.htm](http://www.nvaging.net/grants/serv_specs/nfcspIIIIE.htm)

**Comment:** SFY 2012 Q1 trend shows increased accuracy and a difference in types of program funded, now primarily focused on ADRCs. SFY 2013 reflects an increase due to changes in reporting requirements. SFY 2014 Q1 and Q2 show an upward trend due to the funding of new ADRC serving the rural areas.

# Nevada Department of Health and Human Services, ADSD

## 2.11 Taxi Assistance Program

**Program:** Allows seniors age 60 and older and those of any age with permanent disability in Clark County to use taxicabs at a discounted rate. Funded by the Nevada Taxicab Authority by a surcharge on taxicab rides.

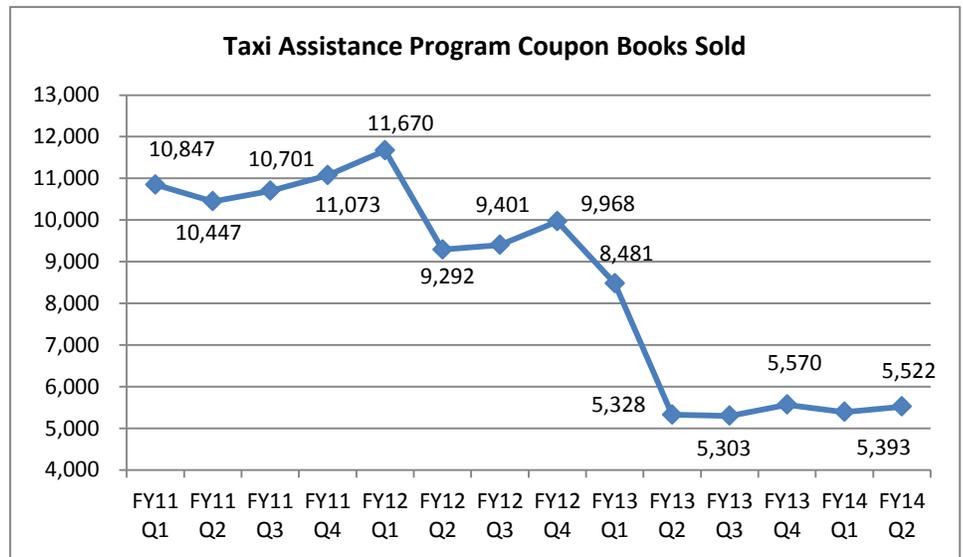
**Eligibility:** Age 60 or older or permanently disabled of any age with Nevada ID and having incomes within the program criteria.

**Workload History:**

| Fiscal Year | Units of Service |
|-------------|------------------|
| FY10        | 42,932           |
| FY11        | 43,068           |
| FY12        | 40,331           |
| FY13        | 24,682           |
| FY14 YTD    | 10,915           |

**FYTD:**

| Month               | Total Books Sold |
|---------------------|------------------|
| Jul 13              | 1,787            |
| Aug                 | 1,508            |
| Sep                 | 2,098            |
| Oct                 | 1,893            |
| Nov                 | 1,770            |
| Dec                 | 1,859            |
| Jan 14              |                  |
| Feb                 |                  |
| Mar                 |                  |
| Apr                 |                  |
| May                 |                  |
| Jun                 |                  |
| <b>FY14 Total</b>   | <b>10,915</b>    |
| <b>FY14 Average</b> | <b>1,819</b>     |



**Other:** Currently, 1,685 individuals are enrolled in the program as Active. Clients in Active status meet all the program eligibility requirements and have provided the required proof of income. The Chart depicts the total number of books sold each quarter per state fiscal year. The number of books available for sale is limited by the amount of funding received from the Nevada Taxicab Authority. The Legislatively approved Tier changes with income eligibility requirements were implemented October 1, 2012.

**Funding Stream:** Nevada Taxicab Authority

**Web Link:** <http://www.nvaging.net/taxiassistanceprogram.htm>

**Comment:** This program typically has its highest coupon book sales during Quarter (Q) 1 and Q4 of each SFY, which are also the warmest months in Clark County. In Q2 of SFY 2013, the trend dipped to its lowest, due to implementation of income verification processes. The trend since has remained stable, as the program continues its implementation of the new eligibility requirements. Approximately 22% of the client base was deemed ineligible for the new income based program. This explains the decrease in coupon books sold since SFY13 Q1 and Q2. The trend is stable since.

# Nevada Department of Health and Human Services, ADSD

## 2.12 Senior Rx and Disability Rx

**Program:** Nevada Senior/Disability Rx helps eligible applicants obtain essential prescription medications. Members who are not eligible for Medicare pay \$2.50 for generic drugs and \$10.00 for brand drugs. Medicare-eligible members receive help with the monthly premium for their Part-D plan and may use the program as a secondary payer during the Medicare Part-D coverage gap.

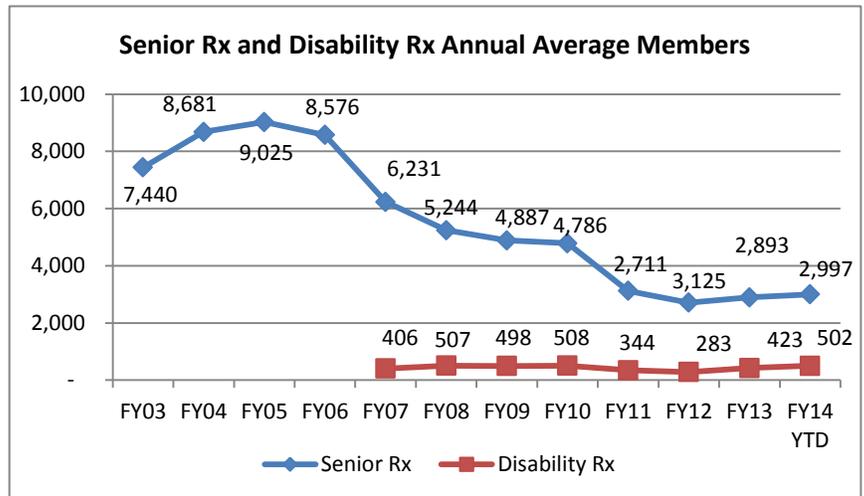
**Eligibility:** Residency -- Continuous Nevada resident for the 12 months prior to application. Annual Household Income Limit -- Effective 7/1/2013 = \$27,292 for singles, \$36,381 for couples. Age -- For Senior Rx, age 62 or older. For Disability Rx, age 18 through 61 with a verifiable disability.

### Workload History:

|          | Senior Rx     |                    | Disability Rx |                    |
|----------|---------------|--------------------|---------------|--------------------|
|          | Average Cases | Total Expenditures | Average Cases | Total Expenditures |
| FY10     | 4,786         | \$3,635,391        | 508           | \$504,406          |
| FY11     | 3,125         | \$2,928,171        | 344           | \$411,875          |
| FY12     | 2,710         | \$2,099,622        | 286           | \$273,202          |
| FY13     | 2,893         | \$1,910,886        | 423           | \$340,779          |
| FY14 YTD | 2,997         | \$716,271          | 502           | \$147,951          |

### FYTD:

| Month               | Senior Rx     | Disability Rx |
|---------------------|---------------|---------------|
| Jul 13              | 2,914         | 471           |
| Aug                 | 2,920         | 477           |
| Sep                 | 2,974         | 498           |
| Oct                 | 3,005         | 515           |
| Nov                 | 3,065         | 525           |
| Dec                 | 3,103         | 523           |
| Jan 14              |               |               |
| Feb                 |               |               |
| Mar                 |               |               |
| Apr                 |               |               |
| May                 |               |               |
| Jun                 |               |               |
| <b>FY14 Total</b>   | <b>17,981</b> | <b>3,009</b>  |
| <b>FY14 Average</b> | <b>2,997</b>  | <b>502</b>    |



**Comment:** Senior/Disability Rx program staff made a concerted effort over the last two quarters of FY13 to identify members no longer eligible for the program and disenroll them--resulting in relatively flat caseload growth since December. At this point, however, although such efforts continue, caseloads have now begun to increase once more. Such efforts have included facilitating application for the "Extra Help" Low-Income Subsidy Program for members who are clearly eligible for 100 percent subsidy.

**Web Link:** <http://dhhs.nv.gov/SeniorRx.htm>

# Nevada Department of Health and Human Services, ADSD

## 2.13 Senior Rx and Disability Rx – Dental Program

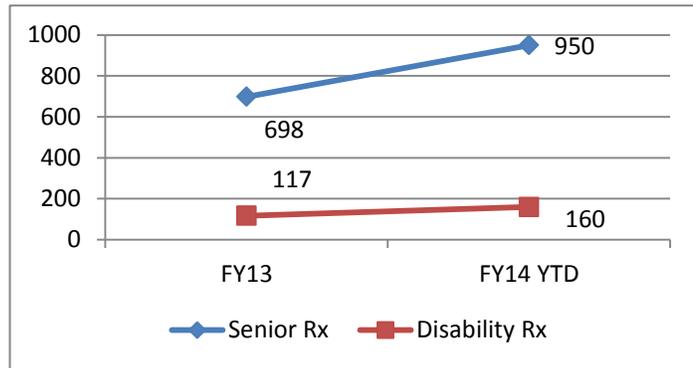
**Program:** Nevada Senior/Disability Rx Dental Pilot Program helps eligible applicants obtain essential dental care. Members receive up to \$1,000 in dental-care services through a no-premium, no-deductible plan with a 100-80-50 benefit structure (preventative care is covered at 100%; fillings, denture repair, and other routine work is covered at 80%; and major work--such as crowns or new dentures--is covered at 50%) .

**Eligibility:** Senior/Disability Rx Prescription Program -- Must be current member of Rx Program to enroll. Other Dental Coverage -- Must not have other dental coverage of any kind.

**Workload History:**

|          | Senior Rx     |                    | Disability Rx |                    |
|----------|---------------|--------------------|---------------|--------------------|
|          | Average Cases | Total Expenditures | Average Cases | Total Expenditures |
| FY13     | 698           | N/A                | 117           | N/A                |
| FY14 YTD | 950           | \$134,588          | 160           | \$19,003           |

| FYTD                 | Senior Rx    | Disability Rx |
|----------------------|--------------|---------------|
| <b>JUL 13</b>        | 949          | 158           |
| Aug                  | 946          | 160           |
| Sep                  | 943          | 162           |
| Oct                  | 945          | 160           |
| Nov                  | 963          | 163           |
| Dec                  | 955          | 157           |
| <b>JAN 14</b>        |              |               |
| Feb                  |              |               |
| Mar                  |              |               |
| Apr                  |              |               |
| May                  |              |               |
| Jun                  |              |               |
| <b>FY 14 Total</b>   | <b>5,701</b> | <b>960</b>    |
| <b>FY 14 Average</b> | <b>950</b>   | <b>160</b>    |



**Comment:** Currently, the pilot program is approved through June 30, 2015 and has been expanded to a total of 1,100 slots (from 800). Plan years run January through December in order to coincide with the prescription benefit plan year. Program Staff is working to implement eligibility and benefit management processes for a co-pay assistance benefit that was authorized for the biennium to assist members with more extensive oral-health needs. As the program continues, additional data will be collected and analyzed in order to determine its effectiveness and identify unmet oral-health needs for the target population.

**Web Link:** <http://dhhs.nv.gov/SeniorRx.htm>

# Nevada Department of Health and Human Services, ADSD

## 2.14 State Health Insurance Assistance Program (SHIP)

**Program:** Provides information, counseling, and assistance services to Medicare beneficiaries, their families and others. These services are provided relevant to: Medicare Part D Prescription Drug Coverage; Medicare Part A; Medicare Part B; Medicare supplemental insurance; long-term care insurance; Medicare Advantage; Extra Help Part D drug program; beneficiary rights and grievance appeal procedures. Referrals to other community resources are made as needed.

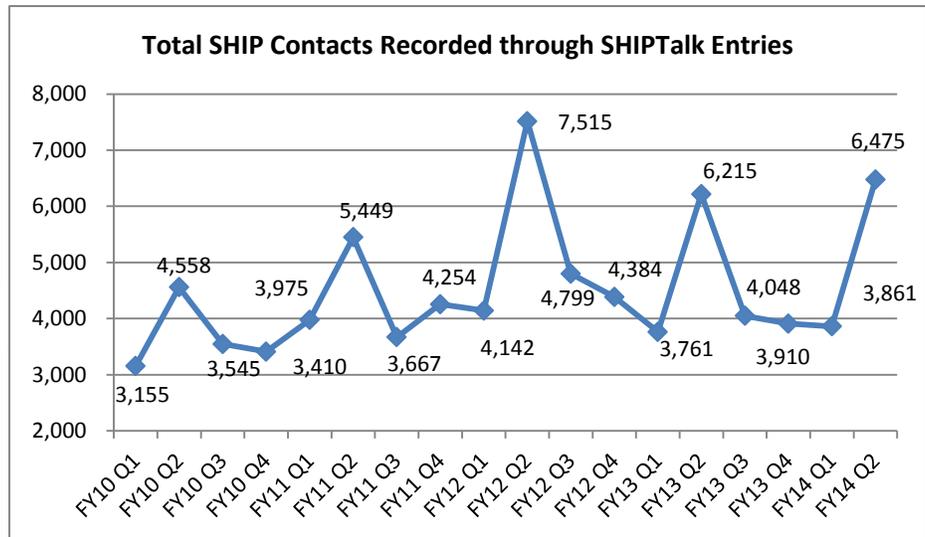
**Eligibility:** Medicare Beneficiaries; Seniors age 65 or older and/or persons with a verified disability of any age and their caregivers.

**Workload History:**

|       | Total SHIP Contacts | Monthly Average |
|-------|---------------------|-----------------|
| FY 10 | 14,668              | 1,222           |
| FY 11 | 17,345              | 1,445           |
| FY 12 | 20,840              | 1,736           |
| FY 13 | 17,934              | 1,495           |

**FYTD:**

|       | Total SHIP Contacts | Monthly Average |
|-------|---------------------|-----------------|
| Q1 14 | 3,861               | 1,287           |
| Q2 14 | 6,475               | 2,158           |
| Q3 14 |                     |                 |
| Q4 14 |                     |                 |



**Other:** SHIP utilizes trained volunteers, contract staff and partners for outreach and Medicare beneficiary navigation enrollment assistance. Services are advertised through outreach events, websites, referrals and training. Medicare beneficiaries call a statewide, toll-free phone number and are referred to a trained volunteer to assist with explanation and access of health benefits. SHIP contacts/encounters are entered into the Centers for Medicare and Medicaid Services (CMS) database and reported periodically as required to CMS.

**Funding Stream:** The Centers for Medicare and Medicaid Services (CMS) and Independent Living Grant State Funds

**Web Links:** [http://www.nvaging.net/ship/ship\\_main.htm](http://www.nvaging.net/ship/ship_main.htm)

**Analysis of Trends:** Due to complexities associated with Medicare assistance, counseling sessions are more time consuming and sometimes involve case management related duties, and require providing beneficiaries with a number of referrals and assistance with social needs. Volunteers are reluctant to do counseling because of the complexity of the job and the time commitment for training and counseling. As of January 09, 2014, there are 63 volunteers statewide, 43 of whom are CMS Certified Counselors and some currently in certification training.

# Nevada Department of Health and Human Services, ADSD

## 2.15 Waiver – Assisted Living

**Program:** The Aging and Disability Services Division (ADSD) Assisted Living (AL) waiver maximizes the independence of Nevada’s frail elderly by providing assisted living supportive services to eligible individuals in a residential facility that offers 24-hour supervised care, individual living units, a kitchenette, sleeping area or bedroom, and contains private toilet facilities. Waiver services include: Case Management to assist with gaining access to needed waiver and other State Plan services as well as needed medical, social, educational, and other services, regardless of funding sources; and augmented personal care services which include assistance and supervision with the activities of daily living such as mobility, bathing, dressing, oral hygiene, toileting, transferring, ambulating, feeding, medication oversight (to extent permitted under State law).

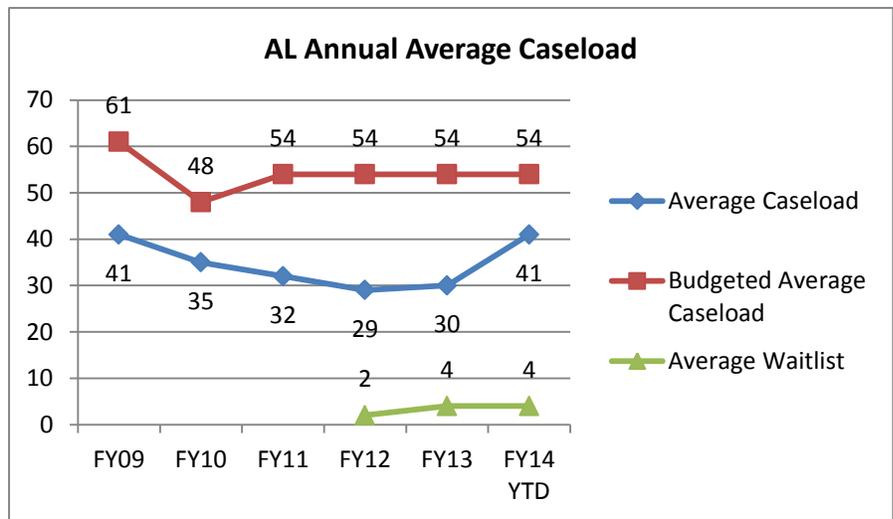
**Eligibility:** Must be 65 years old or older; financially eligible (300% of SSI income up to \$2,163.00); at risk of nursing home placement within 30 days. Must also meet low income tax credit housing requirements.

**Workload History:**

| Fiscal Year | Average Caseload | Budgeted Avg. Caseload | Average Waitlist | Total Expenditures |
|-------------|------------------|------------------------|------------------|--------------------|
| FY10        | 35               | 48                     | 0                | \$139,157          |
| FY11        | 32               | 54                     | 0                | \$114,212          |
| FY12        | 29               | 54                     | 2                | \$136,302          |
| FY13        | 30               | 54                     | 4                | \$105,843          |
| FY14 YTD    | 41               | 54                     | 4                | Not Yet Available  |

**FYTD:**

| Month               | Caseload   | Waitlist  |
|---------------------|------------|-----------|
| Jul 13              | 37         | 10        |
| Aug                 | 42         | 3         |
| Sep                 | 41         | 5         |
| Oct                 | 42         | 3         |
| Nov                 | 42         | 4         |
| Dec                 | 40         | 1         |
| Jan 14              |            |           |
| Feb                 |            |           |
| Mar                 |            |           |
| Apr                 |            |           |
| May                 |            |           |
| Jun                 |            |           |
| <b>FY14 Total</b>   | <b>244</b> | <b>26</b> |
| <b>FY14 Average</b> | <b>41</b>  | <b>4</b>  |



**Funding Stream:** Medicaid/General fund

**Web Link:** [http://www.nvaging.net/al\\_waiver.htm](http://www.nvaging.net/al_waiver.htm)

# Nevada Department of Health and Human Services, ADSD

## 2.16 Waiver – Home and Community Based (HCBW)

**Program:** The Aging and Disability Services Division (ADSD) Home and Community Based Waiver (HCBW) provides waiver services to seniors to help them maintain independence in their own homes as an alternative to nursing home placement. HCBW services can include the following: Case Management, Homemaker, Adult Day Care, Adult Companion, Personal Emergency Response System, Chore, Respite, and Nutrition Therapy and access to State Plan personal care services.

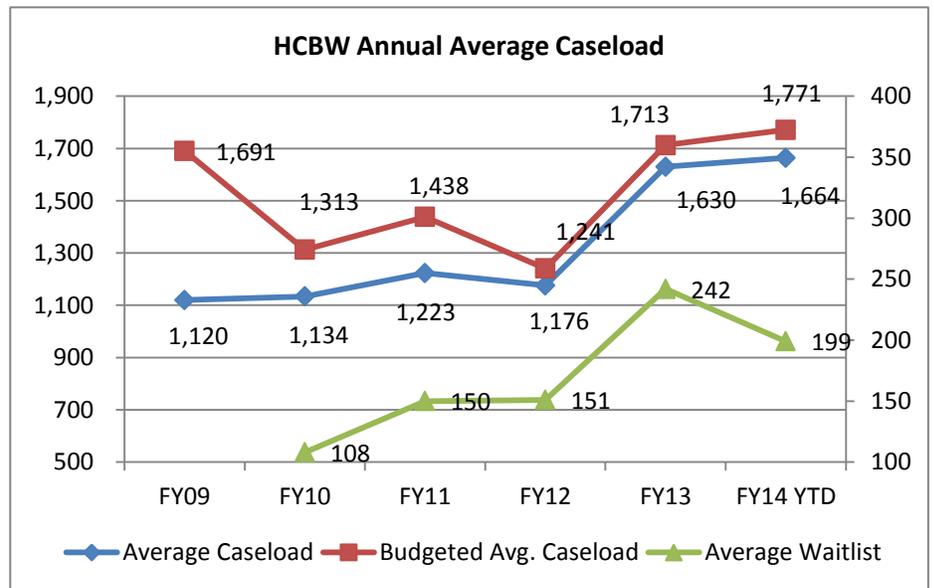
**Eligibility:** Must be 65 years old or older; at risk of nursing home placement within 30 days without services; financially eligible (300 percent of SSI income up to \$2,163.00); need assistance with one or more of the following: bathing, dressing, eating, toileting, ambulating, transferring.

### Workload History:

| Fiscal Year | Average Caseload | Budgeted Avg. Caseload | Revised Budgeted Average Caseload | Average Waitlist | Total Expenditures |
|-------------|------------------|------------------------|-----------------------------------|------------------|--------------------|
| FY10        | 1,134            | 1,313                  | N/A                               | 108              | \$4,083,178        |
| FY11        | 1,223            | 1,438                  | 1,241                             | 150              | \$4,016,041        |
| FY12        | 1,176            | 1,241                  | N/A                               | 151              | \$4,563,023        |
| FY13        | 1,630            | 1,713                  | N/A                               | 242              | \$6,222,738        |
| FY14 YTD    | 1,664            | 1,771                  | N/A                               | 199              | Not Yet Available  |

### FYTD:

| Month               | Caseload     | Waitlist     |
|---------------------|--------------|--------------|
| Jul 13              | 1,642        | 168          |
| Aug                 | 1,658        | 175          |
| Sep                 | 1,664        | 210          |
| Oct                 | 1,690        | 189          |
| Nov                 | 1,675        | 208          |
| Dec                 | 1,652        | 242          |
| Jan 14              |              |              |
| Feb                 |              |              |
| Mar                 |              |              |
| Apr                 |              |              |
| May                 |              |              |
| Jun                 |              |              |
| <b>FY14 Total</b>   | <b>9,981</b> | <b>1,192</b> |
| <b>FY14 Average</b> | <b>1,664</b> | <b>199</b>   |



**Funding Stream:** Medicaid/General Fund

**Web Link:** <http://www.nvaging.net/hcbw.htm>

# Nevada Department of Health and Human Services, ADSD

## 2.17 Disability Services – Assistive Technology for Independent Living

**Program:** The Assistive Technology for Independent Living (AT/IL) Program helps individuals to remain living in the community by making their homes and vehicles more accessible. Some clients share in the cost, on a sliding scale. The program provides one-time services that are not provided on an ongoing basis.

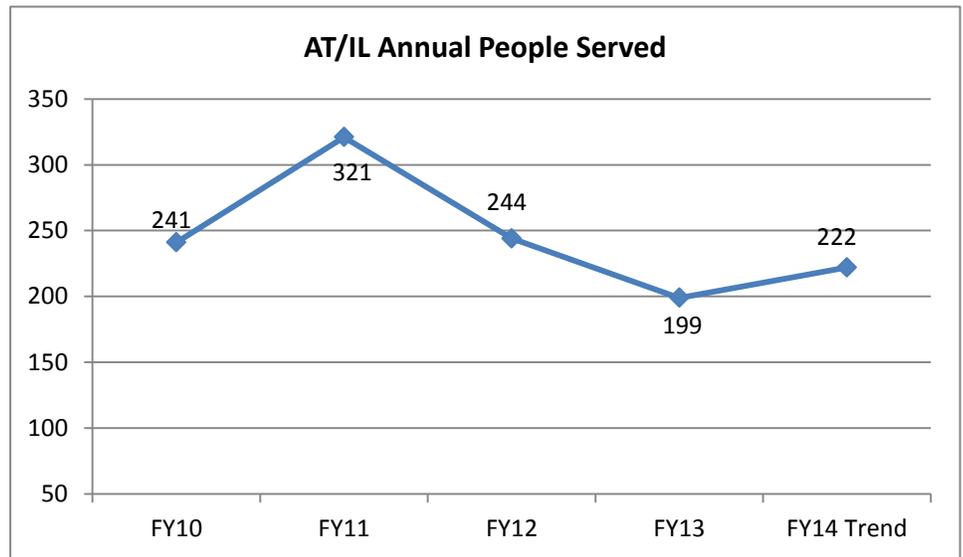
**Eligibility:** Applicants must have a severe disability that results in significant limitation in their ability to perform functions of daily living, and there must be an expectation that services will help to improve or maintain their independence.

**Workload History:**

|           | Applications | Cases Closed | Expenditures |
|-----------|--------------|--------------|--------------|
| FY 10     | 292          | 241          | \$1,895,972  |
| FY 11     | 295          | 321          | \$1,528,652  |
| FY 12     | 322          | 244          | \$1,586,976  |
| FY 13     | 297          | 199          | \$1,045,448  |
| FY 14 YTD | 139          | 111          | \$409,057    |

**FYTD:**

| Month               | Caseload   |
|---------------------|------------|
| Jul 13              | 18         |
| Aug                 | 20         |
| Sep                 | 26         |
| Oct                 | 13         |
| Nov                 | 13         |
| Dec                 | 21         |
| Jan 14              |            |
| Feb                 |            |
| Mar                 |            |
| Apr                 |            |
| May                 |            |
| Jun                 |            |
| <b>FY14 Total</b>   | <b>111</b> |
| <b>FY14 Average</b> | <b>19</b>  |



**Other:** The average household income of program applicants is \$1,622 per month with an average household size of 1.8 people. The median age of those served is 61. The most commonly provided services are home and vehicle modifications that provide wheelchair access.

Funding for this program is provided through a Federal and State partnership. It is a "resource of last resort," meaning that applicants must exhaust other public and private resources before receiving assistance. The program helps Nevadans to avoid institutional placement and to leverage care and other resources available from family and friends.

**Web Links:** [http://dhhs.nv.gov/ODS\\_Programs\\_AssistiveTech-IndependentLiving.htm](http://dhhs.nv.gov/ODS_Programs_AssistiveTech-IndependentLiving.htm)

# Nevada Department of Health and Human Services, ADSD

## 2.18 Disability Services – Personal Assistance Services

**Program:** This program provides in-home assistance with daily tasks like bathing, toileting and eating. Service recipients share in the cost of their services, based upon a sliding scale formula. Services are typically provided on an ongoing basis; however some applicants have terminal conditions and are only assisted for short-term periods.

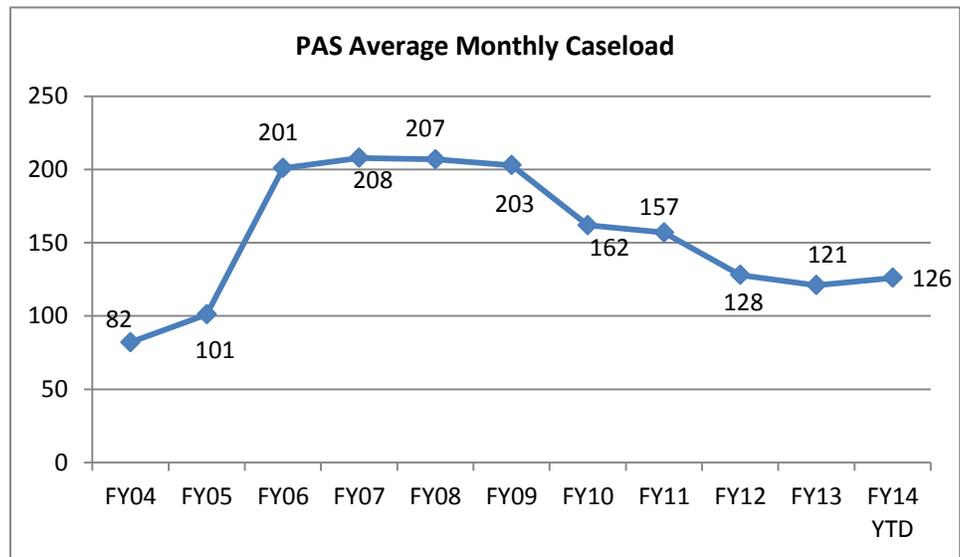
**Eligibility:** Applicants must be over age 18, have a severe physical disability, and must have all their care needs addressed when the resources of this program are combined with other resources available to the applicant (family, friends, assistive technology, private-pay care, etc.).

**Workload History:**

|           | Average Caseload | Average Waitlist | Expenditures      |
|-----------|------------------|------------------|-------------------|
| FY 10     | 162              | 185              | \$3,239,720       |
| FY 11     | 157              | 87               | \$3,196,309       |
| FY 12     | 128              | 29               | \$2,813,504       |
| FY 13     | 121              | 7                | \$2,570,445       |
| FY 14 YTD | 126              | 3                | Not Yet Available |

**FYTD:**

| Month               | Caseload   |
|---------------------|------------|
| Jul 13              | 126        |
| Aug                 | 126        |
| Sep                 | 125        |
| Oct                 | 128        |
| Nov                 | 124        |
| Dec                 | 127        |
| Jan 14              |            |
| Feb                 |            |
| Mar                 |            |
| Apr                 |            |
| May                 |            |
| Jun                 |            |
| <b>FY14 Total</b>   | <b>756</b> |
| <b>FY14 Average</b> | <b>126</b> |



**Other:** This program is impacted by the US Supreme Court's Olmstead Decision. Thus, the targeted maximum waiting time is 90 days. The average monthly household income for program recipients is 300 percent of the federal poverty level and the median age is 67.

Funding for this program is provided entirely through the State general fund. This program is a "resource of last resort," meaning that applicants must exhaust other sources of PAS, before receiving assistance. The program helps Nevadans to avoid institutional placement and to leverage care and other resources available from family and friends.

**Web Links:** [http://dhhs.nv.gov/ODS\\_Programs\\_PersonalAssistanceService.htm](http://dhhs.nv.gov/ODS_Programs_PersonalAssistanceService.htm)

# Nevada Department of Health and Human Services, ADSD

## 2.19 Disability Services – Traumatic Brain Injury Services

**Program:** The Traumatic Brain Injury Program provides one-time rehabilitation services that enable recipients to gain or maintain a level of independence, by re-learning how to walk, talk and conduct other routine activities. After a person is injured, there is a short window of opportunity in which they can be effectively rehabilitated.

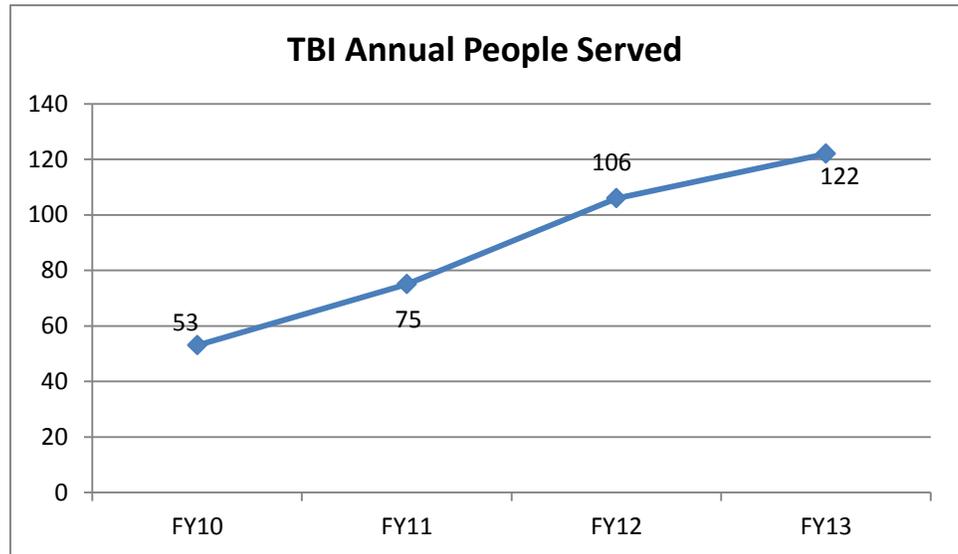
**Eligibility:** Applicants are generally between age 18 and 50, must have a recent brain injury, and must present as a good candidate for successful rehabilitation.

**Workload History:**

|           | Applications | Cases Closed | Expenditures |
|-----------|--------------|--------------|--------------|
| FY 10     | 53           | 34           | \$1,529,594  |
| FY 11     | 106          | 40           | \$1,538,063  |
| FY 12     | 106          | 42           | \$1,510,623  |
| FY 13     | 122          | 59           | \$1,498,475  |
| FY 14 YTD | 70           | 41           | \$466,961    |

**FYTD:**

| Month               | Caseload  |
|---------------------|-----------|
| Jul 13              | 12        |
| Aug                 | 12        |
| Sep                 | 14        |
| Oct                 | 11        |
| Nov                 | 11        |
| Dec                 | 10        |
| Jan 14              |           |
| Feb                 |           |
| Mar                 |           |
| Apr                 |           |
| May                 |           |
| Jun                 |           |
| <b>FY14 Total</b>   | <b>70</b> |
| <b>FY14 Average</b> | <b>12</b> |



**Other:** "This program has consistently met its 90-day waiting time target under the US Supreme Court's Olmstead Decision. Traumatic Brain Injury is six times more common than breast cancer, HIV/AIDS, spinal cord injuries and Multiple Sclerosis combined.

**Funding:** Funding for this program is provided entirely through the State general fund. This program is a "resource of last resort," meaning that applicants must exhaust other sources of funding before receiving assistance. The program helps Nevadans to avoid institutional placement and to leverage care and other resources available from family and friends. The number of applications shown is for those applicants who meet the program's criteria for having maximum rehabilitation potential.

**Web Links:** [http://dhhs.nv.gov/ODS\\_Programs\\_TraumaticBrainInjuryRehab.htm](http://dhhs.nv.gov/ODS_Programs_TraumaticBrainInjuryRehab.htm)

# Nevada Department of Health and Human Services, ADSD

## 2.20 Disability Services – Autism Treatment Assistance Program (ATAP)

**Program:** The Autism Treatment Assistance Program helps families of children ages 0-18, with Autism Spectrum Disorders, to establish and fund home-based therapy programs. Funds are used to pay clinical professionals who design the therapy programs and train lay-providers to deliver the therapy, as well as to pay the lay-providers for the delivery of services.

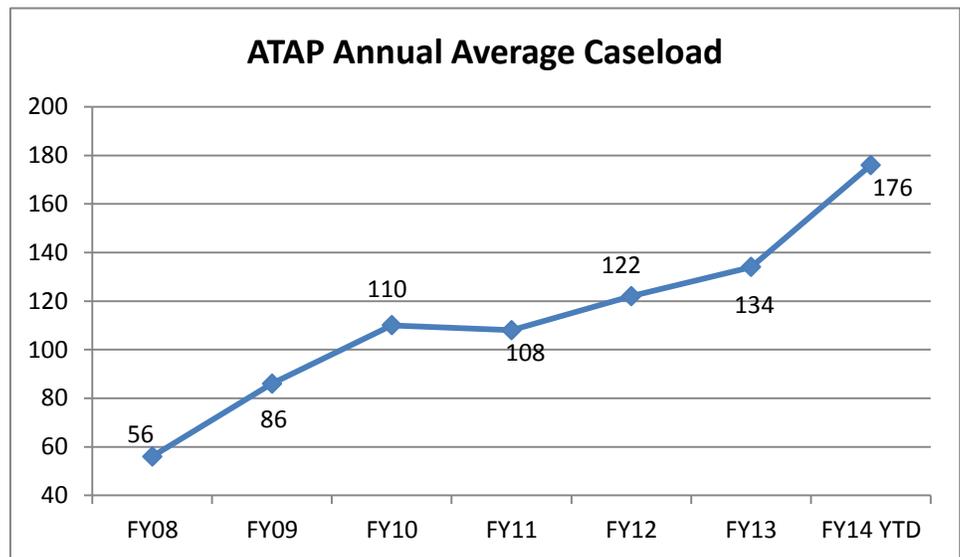
**Eligibility:** Recipients must be under age 18 and have a documented diagnosis of an Autism Spectrum Disorder. Applicants are prioritized based upon a number of factors relating to their need and opportunities for successful therapy.

### Workload History:

|           | Total Caseload | Average Caseload | Expenditures |
|-----------|----------------|------------------|--------------|
| FY 10     | 440            | 110              | \$1,288,262  |
| FY 11     | 1,296          | 108              | \$1,885,987  |
| FY 12     | 1,465          | 122              | \$1,959,167  |
| FY 13     | 1,609          | 134              | \$2,447,255  |
| FY 14 YTD | 1,054          | 176              | \$1,021,689  |

### FYTD:

| Month               | Caseload     |
|---------------------|--------------|
| Jul 13              | 154          |
| Aug                 | 164          |
| Sep                 | 174          |
| Oct                 | 180          |
| Nov                 | 190          |
| Dec                 | 192          |
| Jan 14              |              |
| Feb                 |              |
| Mar                 |              |
| Apr                 |              |
| May                 |              |
| Jun                 |              |
| <b>FY14 Total</b>   | <b>1,054</b> |
| <b>FY14 Average</b> | <b>176</b>   |



**Other:** This program helps families with children aged 0-18 who are diagnosed with autism.

**Funding:** Funding for this program was provided entirely through the state general fund during FY 07-12, but transferred to the Fund for a Healthy Nevada in FY 13.

**Web Links:** [http://dhhs.nv.gov/ODS\\_Programs\\_ATAP.htm](http://dhhs.nv.gov/ODS_Programs_ATAP.htm)

# Nevada Department of Health and Human Services, ADSD

## 2.21 Developmental Services

**Program:** Developmental Services provides a full array of community based services for people with developmental disabilities and related conditions and their families in Nevada. The goal of coordinated services is to assist persons in achieving maximum independence and self-direction. Service coordinators assist individuals and families in developing a person centered life plan focused on individual needs and preferences for the future. They also assist people in selecting and obtaining services and funding to achieve personal goals, community integration and independence.

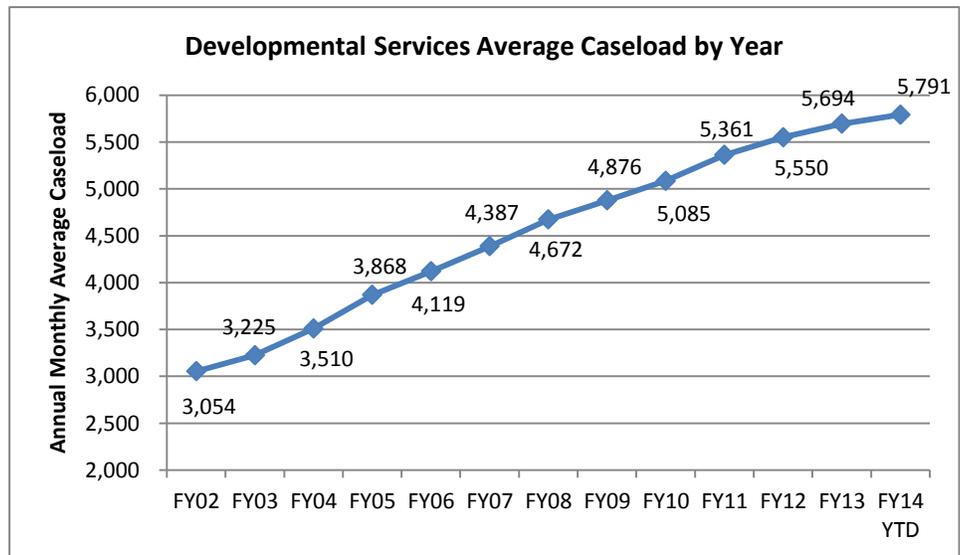
**Eligibility:** All individuals who meet Developmental Services eligibility requirements of mental retardation diagnosis or related conditions and three of six major life skill limitations who apply for services receive basic service coordination. Developmental Services agencies provide many services to Medicaid eligible clients. Provider based services are given under a Medicaid waiver depending on the level of care the individual needs. Direct services are provided under the Medicaid State Plan.

### Workload History:

| Fiscal Year | Total Expenditures | Average Caseload |
|-------------|--------------------|------------------|
| FY09        | \$139,752,916      | 4,876            |
| FY10        | \$126,585,304      | 5,085            |
| FY11        | \$129,468,112      | 5,361            |
| FY12        | \$128,766,028      | 5,550            |
| FY13        | \$136,720,966      | 5,694            |
| FY14 YTD    | Not Yet Available  | 5,791            |

### Caseload FYTD:

| Month               | Caseload      |
|---------------------|---------------|
| Jul 2013            | 5,749         |
| Aug                 | 5,763         |
| Sep                 | 5,773         |
| Oct                 | 5,804         |
| Nov                 | 5,824         |
| Dec                 | 5,835         |
| Jan 2014            |               |
| Feb                 |               |
| Mar                 |               |
| Apr                 |               |
| May                 |               |
| Jun                 |               |
| <b>FY14 Total</b>   | <b>34,748</b> |
| <b>FY14 Average</b> | <b>5,791</b>  |



**Website:** [http://mhds.nv.gov/index.php?option=com\\_contentandview=articleandid=6:developmental-servicesandcatid=5:developmental-services](http://mhds.nv.gov/index.php?option=com_contentandview=articleandid=6:developmental-servicesandcatid=5:developmental-services)

# Nevada Department of Health and Human Services, ADSD

## 2.22 Early Intervention Services (Part C, Individuals with Disabilities Education Act)

**Program:** With regional sites in Las Vegas, Reno, Carson City, Elko and Ely, the Nevada Early Intervention Services (NEIS) provides services for children under the age of three with developmental delays. In addition, State Health Division contracts with community providers to provide early intervention services. The Part C Individuals with Disabilities Education Act (IDEA) Office is responsible for ensuring that all families have equal access to an early intervention program with appropriate services and supports.

**Eligibility:** In Nevada, a child must be under the age of three and have a minimum of a 50 percent delay in one developmental area or a 25 percent delay in two of the following areas: cognitive development, social or emotional development, physical development, including vision and hearing, communication, or adaptive development. A child may also be eligible for services if they have a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay.

**Other:** Early intervention services include but are not limited to: service coordination, occupational, physical, and speech therapies, vision and bearing services, nutritional services, specialized instruction, parent support, training and counseling, interpreting services, and assistive technology. Services are voluntary and provided at no cost to parents. Services focus on supporting the family to find opportunities for learning in their child’s daily routine, such as playtime, mealtime, etc. With parent permission, commercial insurance may be used to assist with service costs. Part C, Individuals with Disabilities Education Act (IDEA) Office ensures compliance with the federal requirements of the Individuals with Disabilities Education Improvement Act of 2004, including parent procedural safeguards for dispute resolution. Part C, IDEA staff monitor all early intervention programs in the state and provide training to ensure that early interventionists have the most current best practices information. Compliance monitoring and accountability includes self-assessment measures, as well as external reviews, technical assistance, data collection, and investigating formal parent complaints.

**Workload History:**

| Fiscal Year | Monthly Average Cases | Total Expenditures | Total Referrals |
|-------------|-----------------------|--------------------|-----------------|
| FY 10       | 2,106                 | \$21,220,368       | 4,748           |
| FY 11       | 2,548                 | \$25,511,124       | 5,284           |
| FY 12       | 2,735                 | \$22,649,687       | 5,216           |
| FY 13       | 2,830                 | \$23,642,678       | 5,427           |
| FY 14 YTD   | 2,918                 | \$11,714,061       | 2,729           |

**FYTD:**

| Month            | New Referrals | Total IFSPs*  | Waiting for Services | Services Waiting | Exiting with IFSPs* |
|------------------|---------------|---------------|----------------------|------------------|---------------------|
| Jul 13           | 428           | 2,966         | 319                  | 423              | 186                 |
| Aug              | 535           | 2,944         | 208                  | 257              | 213                 |
| Sep              | 491           | 2,918         | 228                  | 283              | 161                 |
| Oct              | 451           | 2,940         | 200                  | 238              | 196                 |
| Nov              | 401           | 2,900         | 256                  | 313              | 187                 |
| Dec              | 423           | 2,839         | 192                  | 236              | 177                 |
| Jan. 14          |               |               |                      |                  |                     |
| Feb              |               |               |                      |                  |                     |
| Mar              |               |               |                      |                  |                     |
| Apr              |               |               |                      |                  |                     |
| May              |               |               |                      |                  |                     |
| Jun              |               |               |                      |                  |                     |
| <b>FY14 YTD</b>  | <b>2,729</b>  | <b>17,507</b> | <b>1,403</b>         | <b>1,750</b>     | <b>1,120</b>        |
| <b>FY14 Avg.</b> | <b>455</b>    | <b>2,918</b>  | <b>234</b>           | <b>292</b>       | <b>187</b>          |

\*IFSP – Individualized Family Service Plan

**Comments:** Referrals are primarily received from the following sources; parents, physician, social service agencies, and hospitals. The child is then assessed by a multi-disciplinary team to determine eligibility, eligibility needs to be established and an Individualized Family Service Plan (IFSP) needs to be developed within 45 days of the referral. Services are required to start no later than 30 days after the development of the IFSP. Children leave early intervention by aging out at three years of age or move out of state, parent withdraws, attempts to contact the family are unsuccessful, child dies or the goals on the IFSP have been met.

**Website:** <http://health.nv.gov/BEIS.htm>

# Nevada Department of Health and Human Services, DCFS

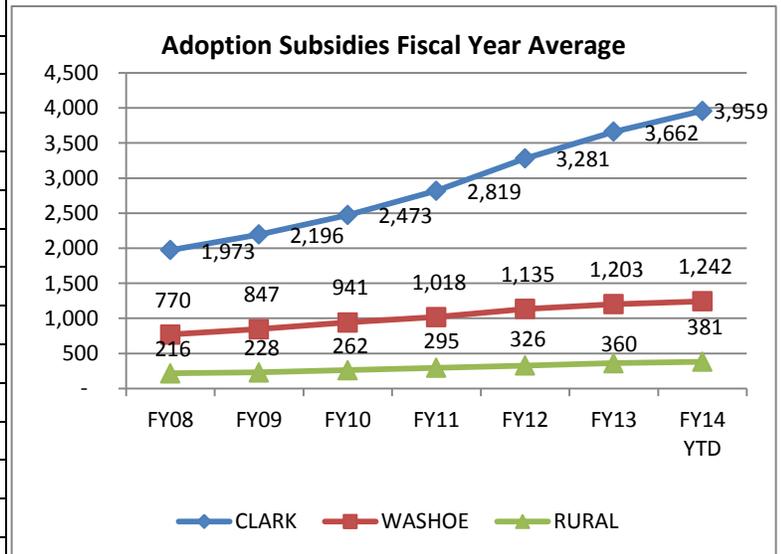
## 3.01 Adoption Subsidies

**Program:** It is the policy of the agencies providing child welfare services to provide financial, medical, and social services assistance to adoptive parents, thereby encouraging and supporting the adoption of special-needs children from foster care. A statewide collaborative policy outlines the special-needs eligibility criteria, application process, types of assistance available and the necessary elements of a subsidized adoption agreement.

**Eligibility:** To qualify for assistance, the child must be in the custody of an agency which provides child welfare services, or a Nevada licensed child-placing agency, and an effort must have been made to locate an appropriate adoptive home which could adopt the child without subsidy assistance. The child must also have specific factor(s) or condition(s) that make locating an adoptive placement resource difficult without recruitment, special services, or adoption assistance; such as being over the age of five, having siblings with whom they need to be placed, or having a physical, mental or behavioral condition that results in the need for treatment.

**Other:** All three public child welfare agencies, Clark County Department of Family Services (CCDFS); Washoe County Department of Social Services (WCDSS); and the Division of Child and Family Services (DCFS) Rural Region, administer the subsidy program with state oversight and in accordance with statewide policy.

| <b>FYTD:</b>        | <b>Clark</b>  | <b>Washoe</b> | <b>Rurals</b> | <b>Total</b>  |
|---------------------|---------------|---------------|---------------|---------------|
| Jul 13              | 3,874         | 1,225         | 376           | 5,475         |
| Aug                 | 3,913         | 1,233         | 375           | 5,521         |
| Sep                 | 3,903         | 1,235         | 375           | 5,513         |
| Oct                 | 3,932         | 1,236         | 377           | 5,545         |
| Nov                 | 4,030         | 1,260         | 385           | 5,675         |
| Dec                 | 4,101         | 1,261         | 396           | 5,758         |
| Jan 14              |               |               |               |               |
| Feb                 |               |               |               |               |
| Mar                 |               |               |               |               |
| Apr                 |               |               |               |               |
| May                 |               |               |               |               |
| Jun                 |               |               |               |               |
| <b>FY14 Total</b>   | <b>23,753</b> | <b>7,450</b>  | <b>2,284</b>  | <b>33,487</b> |
| <b>FY14 Average</b> | <b>3,959</b>  | <b>1,242</b>  | <b>381</b>    | <b>2,791</b>  |



**Website:** [http://www.dcss.state.nv.us/DCFS\\_Adoption.htm](http://www.dcss.state.nv.us/DCFS_Adoption.htm)

# Nevada Department of Health and Human Services, DCFS

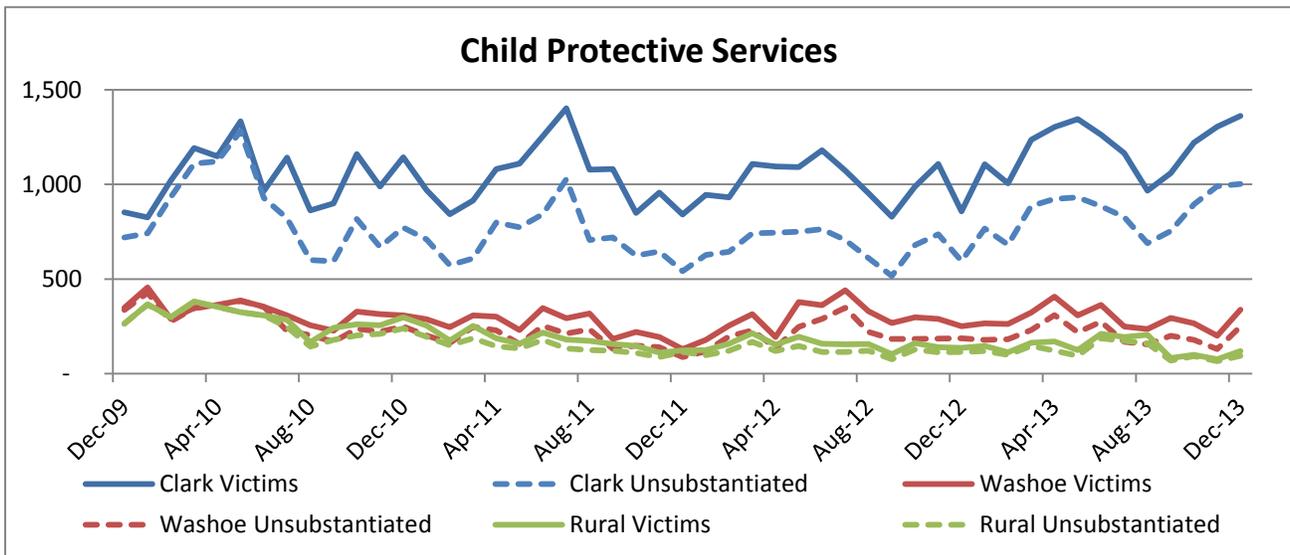
## 3.02 Child Protective Services (CPS)

**Program:** CPS agencies respond to reports of abuse or neglect of children under the age of eighteen. Abuse or neglect complaints are defined in statute, and include mental injury, physical injury, sexual abuse and exploitation, negligent treatment or maltreatment, and excessive corporal punishment. The CPS worker and family develop a plan to address any problems identified through assessment. Families may be referred to community-based services to prevent their entry into the child welfare system.

**Administration:** Division of Child and Family Services (DCFS) Family Program's Office has oversight responsibility to monitor compliance with federal/state requirements and provide technical assistance as needed. Federal funding is administered through DCFS to child welfare programs in Clark and Washoe Counties. Rural programs are administered directly by DCFS.

**FYTD:**

|                   | Clark County  |                  | Washoe County |                  | Rural Counties |                  |
|-------------------|---------------|------------------|---------------|------------------|----------------|------------------|
|                   | Total Victims | Un-Substantiated | Total Victims | Un-Substantiated | Total Victims  | Un-Substantiated |
| JUL 13            | 1,166         | 828              | 249           | 168              | 194            | 173              |
| Aug               | 967           | 690              | 236           | 154              | 205            | 160              |
| Sep               | 1,059         | 754              | 295           | 200              | 82             | 69               |
| Oct               | 1,220         | 894              | 266           | 179              | 100            | 92               |
| Nov               | 1,304         | 990              | 200           | 130              | 75             | 66               |
| Dec               | 1,362         | 1,003            | 338           | 249              | 119            | 94               |
| Jan 14            |               |                  |               |                  |                |                  |
| Feb               |               |                  |               |                  |                |                  |
| Mar               |               |                  |               |                  |                |                  |
| Apr               |               |                  |               |                  |                |                  |
| May               |               |                  |               |                  |                |                  |
| Jun               |               |                  |               |                  |                |                  |
| <b>FY14 Total</b> | <b>7,078</b>  | <b>5,159</b>     | <b>1,584</b>  | <b>1,080</b>     | <b>775</b>     | <b>654</b>       |
| <b>FY14 Avg.</b>  | <b>1,180</b>  | <b>860</b>       | <b>264</b>    | <b>180</b>       | <b>129</b>     | <b>109</b>       |



**Website:** [http://www.dcfhs.state.nv.us/DCFS\\_ChildProtectiveSvcs.htm](http://www.dcfhs.state.nv.us/DCFS_ChildProtectiveSvcs.htm)

# Nevada Department of Health and Human Services, DCFS

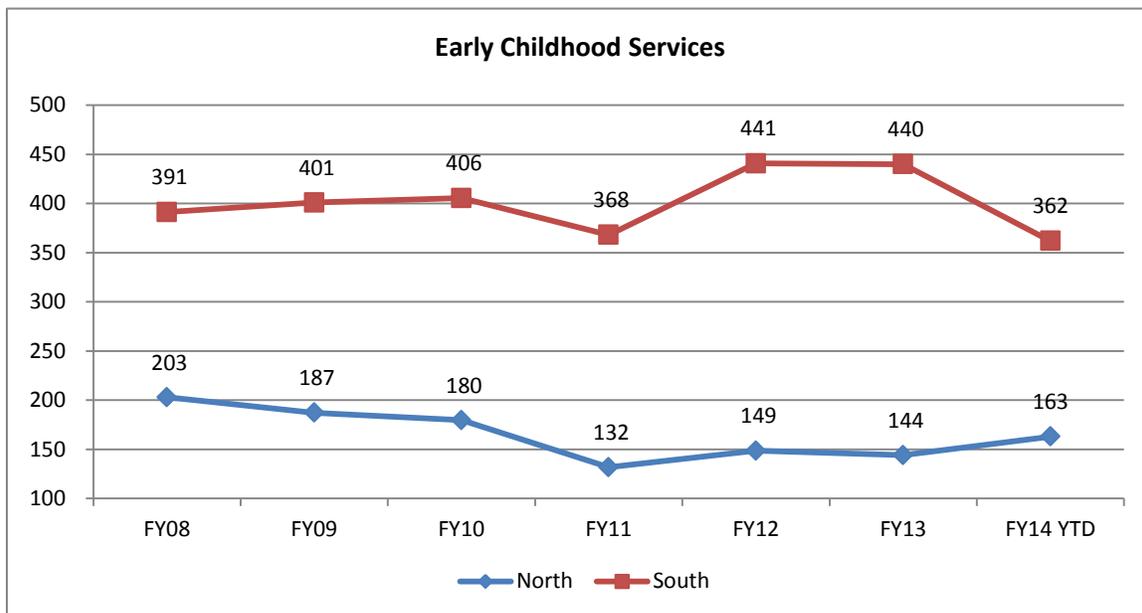
## 3.03 Early Childhood Services

**Program:** Early Childhood Mental Health Services are available for eligible children from birth to 6 years of age who have significant emotional, mental health, or behavior problems or those who are at high risk for these problems and associated developmental delays. The goal is to strengthen the parent-child relationship, support the family's capacity to care for the child, and to enhance the child's social and emotional well-being. Northern Nevada Child and Adolescent Services is located in Washoe County, and Southern Nevada Child and Adolescent Services is located in Clark County.

**Eligibility:** Birth through age six.

**Other:** Serves children who are covered under fee-for-service Medicaid, HMO Medicaid, or Nevada CheckUp, and children who are uninsured or underinsured.

| <b>FYTD:</b>        | <b>North</b> | <b>South</b> |
|---------------------|--------------|--------------|
| Jul 13              | 141          | 397          |
| Aug                 | 146          | 395          |
| Sep                 | 157          | 353          |
| Oct                 | 171          | 336          |
| Nov                 | 180          | 334          |
| Dec                 | 180          | 354          |
| Jan 14              |              |              |
| Feb                 |              |              |
| Mar                 |              |              |
| Apr                 |              |              |
| May                 |              |              |
| Jun                 |              |              |
| <b>FY14 Total</b>   | <b>975</b>   | <b>2,169</b> |
| <b>FY14 Average</b> | <b>163</b>   | <b>362</b>   |



**Website:** [http://www.dcms.state.nv.us/DCFS\\_ChildMentalHealth.htm](http://www.dcms.state.nv.us/DCFS_ChildMentalHealth.htm)

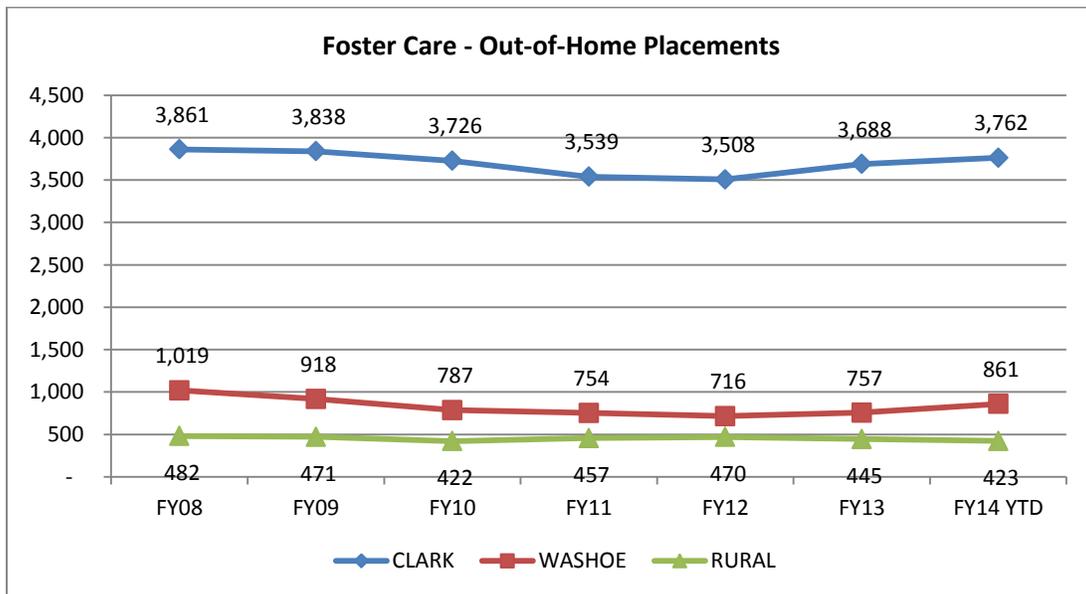
# Nevada Department of Health and Human Services, DCFS

## 3.04 Foster Care – Out-of-Home Placements

**Program:** Program: Foster Care services are provided as temporary placement for children who are removed from the home to protect them from harm or risk. Needs assessments are conducted and a caseworker arranges care and services for the child, and also provides counseling to the child, biological parents, and the foster/substitute care provider. Permanency plans developed with the district court may include reunification, kinship placement, adoption or other planned permanent living arrangements.

**Administration:** The role and function of the Social Services Program Specialists assigned to Foster Care is to provide statewide oversight to the three child welfare jurisdictions in Nevada to ensure compliance with federal and state regulations, statutes and policy. The Foster Care Specialist is also responsible for providing technical assistance to the jurisdictions, fielding questions from the public regarding foster care, and engaging in quality assurance monitoring and quality improvement activities to ensure that children in foster care are safe and stable in their placements.

| <u>FYTD:</u>        | <u>Clark</u>  | <u>Washoe</u> | <u>Rurals</u> | <u>Total</u>  |
|---------------------|---------------|---------------|---------------|---------------|
| Jul 13              | 3,773         | 834           | 433           | 5,040         |
| Aug                 | 3,797         | 874           | 433           | 5,104         |
| Sep                 | 3,757         | 871           | 414           | 5,042         |
| Oct                 | 3,768         | 874           | 425           | 5,067         |
| Nov                 | 3,823         | 863           | 418           | 5,104         |
| Dec                 | 3,656         | 847           | 412           | 4,915         |
| Jan 14              |               |               |               |               |
| Feb                 |               |               |               |               |
| Mar                 |               |               |               |               |
| Apr                 |               |               |               |               |
| May                 |               |               |               |               |
| Jun                 |               |               |               |               |
| <b>FY14 Total</b>   | <b>22,574</b> | <b>5,163</b>  | <b>2,535</b>  | <b>30,272</b> |
| <b>FY14 Average</b> | <b>3,762</b>  | <b>861</b>    | <b>423</b>    | <b>5,045</b>  |



**Website:** [http://www.dcs.state.nv.us/DCFS\\_PlaceRes.htm](http://www.dcs.state.nv.us/DCFS_PlaceRes.htm)

# Nevada Department of Health and Human Services, DCFS

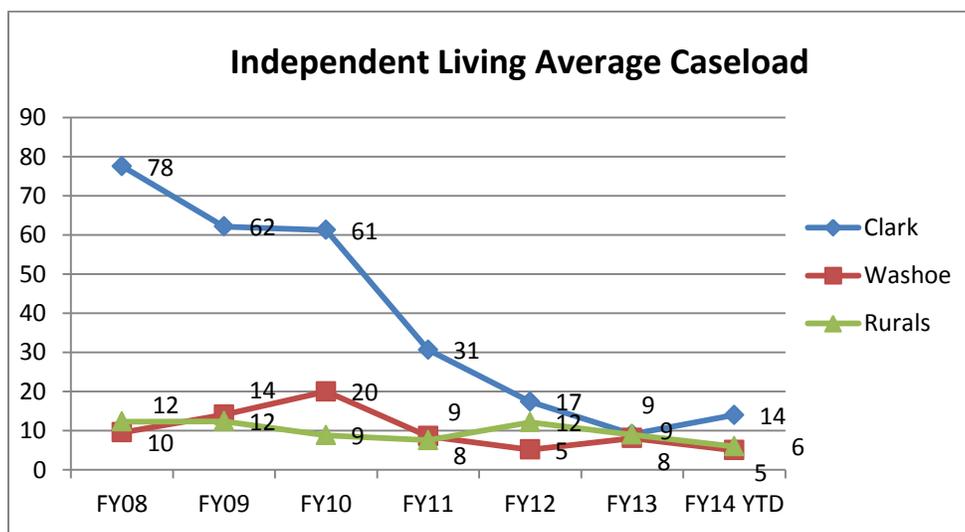
## 3.05 Foster Care – Independent Living

**Program:** The Nevada Independent Living Program is designed to assist and prepare foster and former foster youth in making the transition from foster care to adulthood by providing opportunities to obtain life skills for self-sufficiency and independence. The Independent Living Program does this by offering many learning and training opportunities along with financial assistance. The three major sources of funding to assist foster youth in care and those that have aged out of the foster care system come from the federal and state government.

**Eligibility:** Services are available to youth aged 15 and above who are currently in foster care and to former foster youth who have aged out of the foster care system at age 18. Youth who were adopted from foster care on or after their 16th birthday are also eligible for services. Those who aged out of care may continue receiving services to age 21, including those who came to Nevada from another state.

**Other:** Supplemental financial assistance is provided through the Fund to Assist Former Foster Youth (FAFFY). These funds provide assistance with household goods, job training, housing assistance, case management and medical insurance. Assistance is available up to age 21.

| <b>FYTD:</b>        | <b>Clark</b> | <b>Washoe</b> | <b>Rurals</b> | <b>Total</b> |
|---------------------|--------------|---------------|---------------|--------------|
| Jul 13              | 13           | 7             | 12            | 32           |
| Aug                 | 14           | 7             | 9             | 30           |
| Sep                 | 15           | 8             | 5             | 28           |
| Oct                 | 13           | 4             | 4             | 21           |
| Nov                 | 13           | 3             | 3             | 19           |
| Dec                 | 14           | 2             | 4             | 20           |
| Jan 14              |              |               |               |              |
| Feb                 |              |               |               |              |
| Mar                 |              |               |               |              |
| Apr                 |              |               |               |              |
| May                 |              |               |               |              |
| Jun                 |              |               |               |              |
| <b>FY14 Total</b>   | <b>82</b>    | <b>31</b>     | <b>37</b>     | <b>150</b>   |
| <b>FY14 Average</b> | <b>14</b>    | <b>5</b>      | <b>6</b>      | <b>25</b>    |



**Website:** [http://www.dcf.state.nv.us/DCFS\\_IndependentLiving.htm](http://www.dcf.state.nv.us/DCFS_IndependentLiving.htm)

# Nevada Department of Health and Human Services, DCFS

## 3.06 Juvenile Justice – Facilities

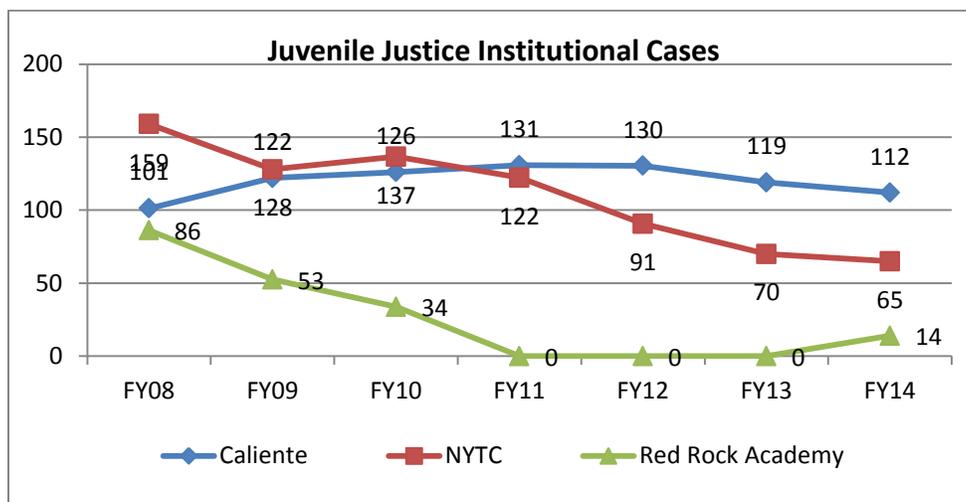
**Caliente Youth Center:** Opened: 1962. Renovated: 1977 Juvenile facility/training school. Security: minimum. Programs: academic education, vocational training, substance-abuse counseling, psychological counseling, behavior/anger management, violence prevention, prerelease/transitional training, cognitive-skills training, private family visitation.

**Nevada Youth Training Center (NYTC):** Opened: 1913. Renovated: 1961. Juvenile facility/training school. Security: medium, minimum. Programs: academic education, vocational training, substance-abuse counseling, psychological counseling, behavior/anger management, cognitive-skills training, violence prevention, private family visitation.

**Red Rock Academy:** Closed March 2010 under previous name: “Summit View”, reopened December 2013 with new name: “Red Rock Academy”. Security: maximum. Programs: aggravated/violent behavior; substance abuse counseling; sex offender counseling; restorative solutions; family groups and visitations; skill development; academic education; vocational training.

| FYTD:               | Caliente   | NYTC       | Red Rock Academy* | Total        |
|---------------------|------------|------------|-------------------|--------------|
| Jul 13              | 101        | 49         | 0                 | 150          |
| Aug                 | 97         | 48         | 0                 | 145          |
| Sep                 | 120        | 49         | 0                 | 169          |
| Oct                 | 120        | 51         | 0                 | 171          |
| Nov                 | 118        | 59         | 0                 | 177          |
| Dec                 | 118        | 65         | 14                | 197          |
| Jan 14              |            |            |                   |              |
| Feb                 |            |            |                   |              |
| Mar                 |            |            |                   |              |
| Apr                 |            |            |                   |              |
| May                 |            |            |                   |              |
| Jun                 |            |            |                   |              |
| <b>FY14 Total</b>   | <b>674</b> | <b>321</b> | <b>14</b>         | <b>1,009</b> |
| <b>FY14 Average</b> | <b>112</b> | <b>54</b>  | <b>14</b>         | <b>168</b>   |

\*Previously “Summit View”



**Website:** [http://www.dcss.state.nv.us/DCFS\\_JuvenileJusticeSvcs.htm](http://www.dcss.state.nv.us/DCFS_JuvenileJusticeSvcs.htm)

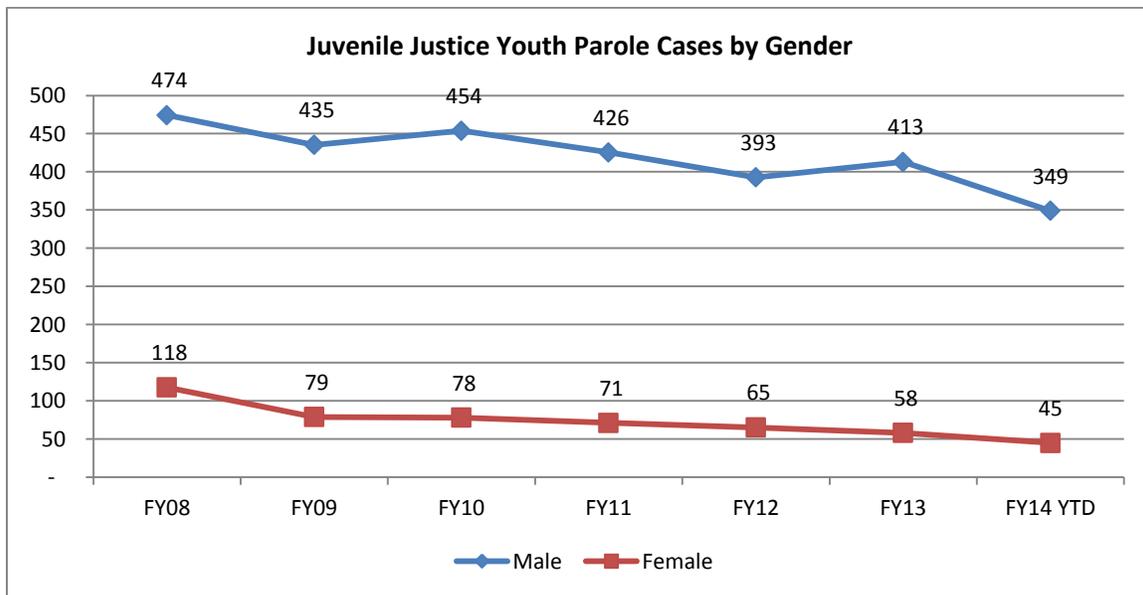
# Nevada Department of Health and Human Services, DCFS

## 3.07 Juvenile Justice – Youth Parole

**Program:** The Nevada Youth Parole Bureau has offices in Las Vegas, Reno, Carson City, Fallon and Elko. The staff is committed to public safety, community supervision and services to youth returning home from juvenile correctional facilities. All youth parole counselors have been trained and certified as peace officers and act in accordance in the performance of their duties. Working closely with families, schools and the community, parole counselors help each youth maintain lawful behavior and encourage positive achievement. The Bureau also supervises all youth released by other states for juvenile parole in the State of Nevada pursuant to interstate compact.

**Eligibility:** Males and females; Felony and misdemeanor adjudications. Ages 12-21.

| <b>FYTD:</b>        | <b>Male</b>  | <b>Female</b> |
|---------------------|--------------|---------------|
| Jul 13              | 392          | 51            |
| Aug                 | 373          | 44            |
| Sep                 | 356          | 44            |
| Oct                 | 355          | 44            |
| Nov                 | 314          | 44            |
| Dec                 | 305          | 43            |
| Jan 14              |              |               |
| Feb                 |              |               |
| Mar                 |              |               |
| Apr                 |              |               |
| May                 |              |               |
| Jun                 |              |               |
| <b>FY14 Total</b>   | <b>2,095</b> | <b>270</b>    |
| <b>FY14 Average</b> | <b>349</b>   | <b>45</b>     |



**Website:** [http://www.dcfh.state.nv.us/DCFS\\_JJS\\_YouthParole.htm](http://www.dcfh.state.nv.us/DCFS_JJS_YouthParole.htm)

# Nevada Department of Health and Human Services, DCFS

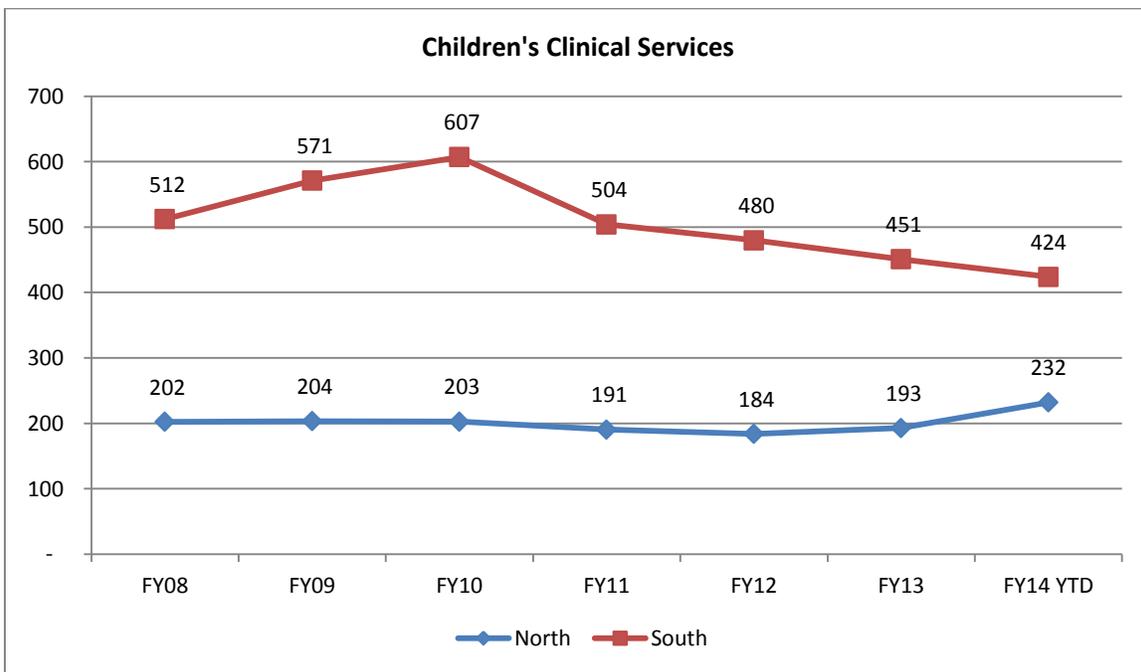
## 3.08 Children's Clinical Services

**Program:** Outpatient therapy services are available for eligible children and adolescents who have significant emotional, mental health, or behavior problems. These services work with children and their families to reduce challenging behaviors, increase emotional and behavioral skills, improve functioning at home, in school and in the community, and strengthen the parent-child relationship while supporting the family's capacity to care for their child's needs. Northern Nevada Child and Adolescent Services is located in Washoe County, and Southern Nevada Child and Adolescent Services is located in Clark County.

**Eligibility:** Ages 6 to 18.

**Other:** Serves children who are covered under fee-for-service Medicaid, HMO Medicaid, or Nevada CheckUp, and children who are uninsured or underinsured.

| <b>FYTD:</b>        | <b>North</b> | <b>South</b> |
|---------------------|--------------|--------------|
| Jul 13              | 226          | 435          |
| Aug                 | 230          | 423          |
| Sep                 | 237          | 431          |
| Oct                 | 246          | 441          |
| Nov                 | 237          | 412          |
| Dec                 | 218          | 404          |
| Jan 14              |              |              |
| Feb                 |              |              |
| Mar                 |              |              |
| Apr                 |              |              |
| May                 |              |              |
| Jun                 |              |              |
| <b>FY14 Total</b>   | <b>1,394</b> | <b>2,546</b> |
| <b>FY14 Average</b> | <b>232</b>   | <b>424</b>   |



**Website:** [http://www.dhhs.state.nv.us/DCFS\\_CommunityBasedOPSvcx.htm](http://www.dhhs.state.nv.us/DCFS_CommunityBasedOPSvcx.htm)

# Nevada Department of Health and Human Services, DCFS

## 3.09 Residential Treatment Services

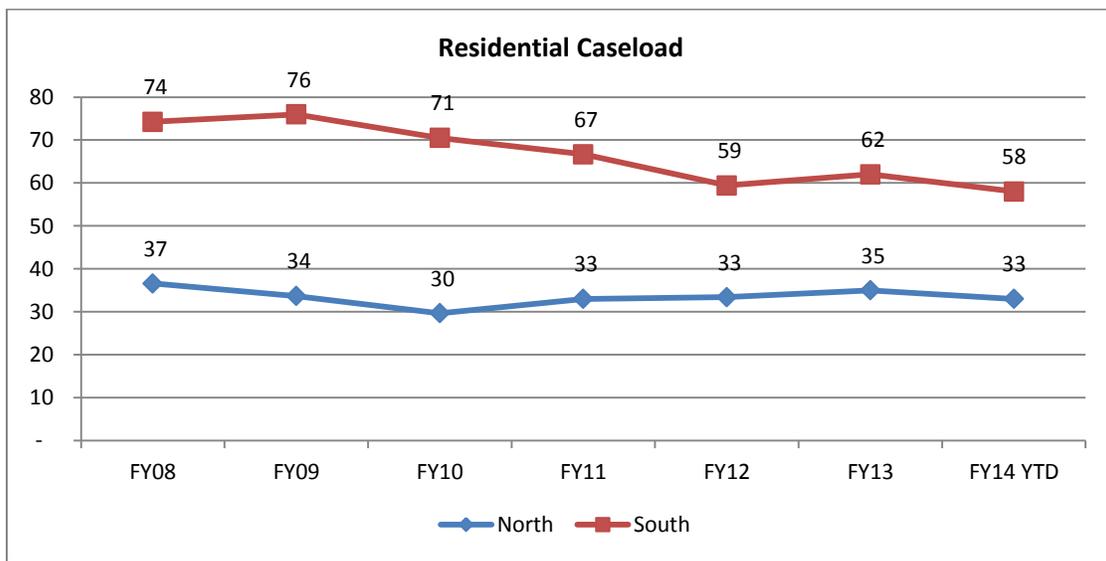
**Program:** Treatment Home services work in the context of family and community life with children and adolescents whose emotional, mental health, and behavioral needs cannot be met in their own families and who require a higher level of mental health intervention in an out of home setting. Inpatient acute hospital care provides services for eligible children and adolescents ages 6 to 18 years who are at immediate risk of harm to themselves or others due to an emotional crisis and Residential Treatment center care for eligible children and adolescents from age 12 to 18 years with treatment needs that require extended 24 hour secure care. Northern Nevada Child and Adolescent Services is located in Washoe County, and Southern Nevada Child and Adolescent Services is located in Clark County.

**Eligibility:** North: Ages 6 to 18 are served through Family Learning Homes; ages 13 to 18 are served through Adolescent Treatment Homes.

South: Ages 6 to 18 are served through Oasis on Campus Treatment Homes and Desert Willow Treatment Center.

**Other:** Serves children who are covered under fee-for-service Medicaid, HMO Medicaid, or Nevada CheckUp, and children who are uninsured or underinsured.

| <b>FYTD:</b>        | <b>North</b> | <b>South</b> |
|---------------------|--------------|--------------|
| Jul 13              | 33           | 53           |
| Aug                 | 34           | 59           |
| Sep                 | 36           | 60           |
| Oct                 | 34           | 61           |
| Nov                 | 34           | 57           |
| Dec                 | 29           | 55           |
| Jan 14              |              |              |
| Feb                 |              |              |
| Mar                 |              |              |
| Apr                 |              |              |
| May                 |              |              |
| Jun                 |              |              |
| <b>FY14 Total</b>   | <b>200</b>   | <b>345</b>   |
| <b>FY14 Average</b> | <b>33</b>    | <b>58</b>    |



**Website:** [http://www.dcss.state.nv.us/DCFS\\_ResDayTreatment.htm](http://www.dcss.state.nv.us/DCFS_ResDayTreatment.htm)

# Nevada Department of Health and Human Services, DCFS

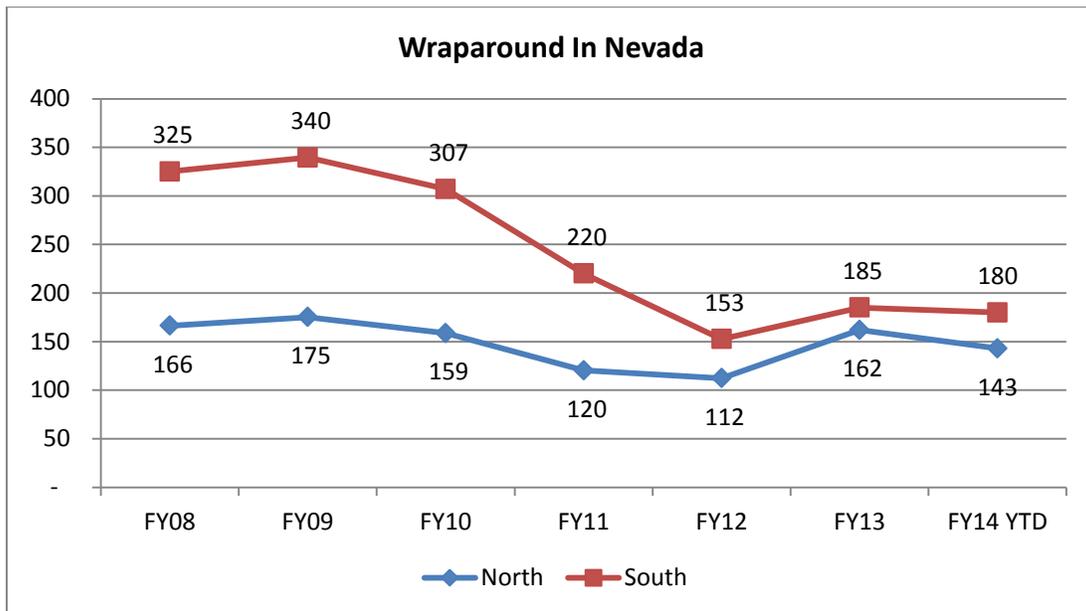
## 3.10 Wraparound In Nevada

**Program:** Wraparound In Nevada (WIN) provides intensive care coordination services to eligible children age 6 to 18 years who have significant emotional, mental health and behavior problems with complex needs. The goal is to provide families and children the support and access to services necessary to live safely in the community in a family home.

**Eligibility:** Ages 6 to 18.

**Other:** Serves children with fee-for-service Medicaid benefits.

| <b>FYTD:</b>        | <b>North</b> | <b>South</b> |
|---------------------|--------------|--------------|
| Jul 13              | 144          | 199          |
| Aug                 | 137          | 200          |
| Sep                 | 146          | 188          |
| Oct                 | 140          | 181          |
| Nov                 | 143          | 159          |
| Dec                 | 147          | 153          |
| Jan 14              |              |              |
| Feb                 |              |              |
| Mar                 |              |              |
| Apr                 |              |              |
| May                 |              |              |
| Jun                 |              |              |
| <b>FY14 Total</b>   | <b>857</b>   | <b>1,080</b> |
| <b>FY14 Average</b> | <b>143</b>   | <b>180</b>   |



**Website:** [http://www.dcss.state.nv.us/DCFS\\_ChildMentalHealth.htm](http://www.dcss.state.nv.us/DCFS_ChildMentalHealth.htm)

# Nevada Department of Health and Human Services, DHC FP

## 4.01 Medicaid Totals

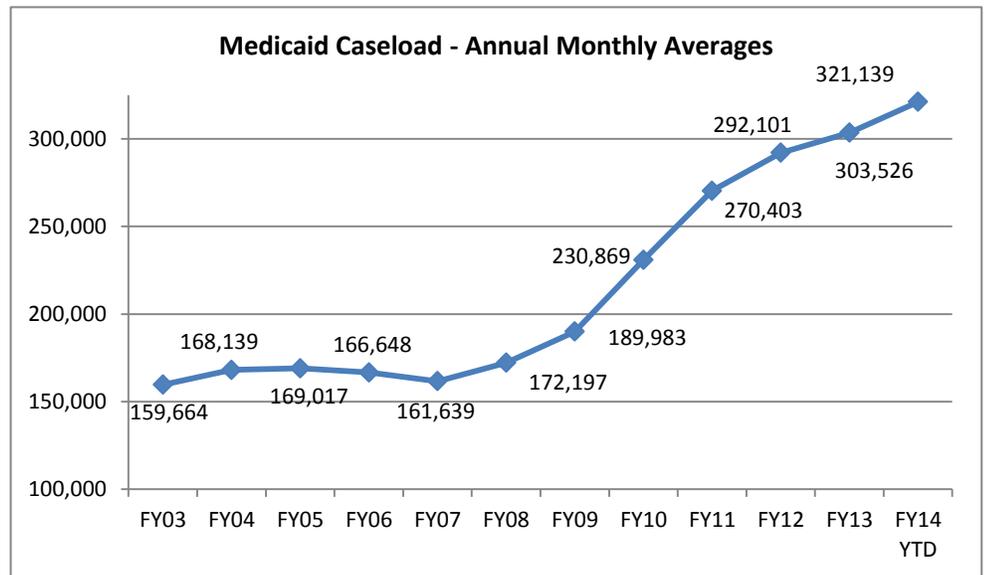
**Program:** Medicaid is a joint Federal-State program that provides medical services to clients of the State public assistance program and, at the State's option, other needy individuals, as well as augments hospital and nursing facility services that are mandated under Medicaid. States may decide on the amount, duration, and scope of additional services, except that care in institutions primarily for the care and treatment of mental disease. Reimbursement is non-allowable for recipients over age 21 and under age 65 within an Institution for Mental Disease (IMD).

**Eligibility:** Eligibility for Medicaid is not easily explained as there are a number of different mandatory and several optional categories where eligibility can be approved. For more detailed information about the many different categories of Medicaid eligibility, please access the link below.

### Workload History:

| Fiscal Year | Average Cases | Total Expenditures |
|-------------|---------------|--------------------|
| FY 11       | 270,403       | \$1,543,067,177    |
| FY 12       | 292,101       | \$1,638,664,986    |
| FY 13       | 303,526       | \$1,740,345,035    |
| FY 14 YTD   | 321,139       | \$1,016,741,807    |

| FYTD:                        | Caseload         |
|------------------------------|------------------|
| Jul 13                       | 314,166          |
| Aug                          | 317,288          |
| Sep                          | 318,832          |
| Oct                          | 322,431          |
| Nov                          | 324,933          |
| Dec                          | 329,181          |
| Jan 14                       |                  |
| Feb                          |                  |
| Mar                          |                  |
| Apr                          |                  |
| May                          |                  |
| Jun                          |                  |
| <b>FY14 Member Months</b>    | <b>1,926,831</b> |
| <b>FY14 Average Caseload</b> | <b>321,139</b>   |



All statistics are estimates only and must be qualified as such if used either verbally or in written form.

**Comment:** All of the significant changes in caseload, including the FY 2007 "dip", arose for macroeconomic reasons. There were no material explanatory changes in other areas (e.g., eligibility criteria or take-up rate) during the period. The principal causal factors are (1) population/demographic change, (2) secular trends in returns-to-skills, (3) the cyclic variation in the overall economy, (4) the cyclic variation in the labor market and (5) the complex lags associated with the aforementioned cycles and caseloads for means-tested social programs.

**Website:** <http://dwss.nv.gov/>

# Nevada Department of Health and Human Services, DHC FP

## 4.02 Health Insurance for Work Advancement (HIWA)

**Program:** The HIWA Program is a component of the MIG (Medicaid Infrastructure Grant) Program which provides necessary health care services and support for competitive employment of persons with disabilities. Federal grant funds are used for infrastructure to establish or improve the capability to provide or manage grant funds for providing Medicaid for employed individuals with disabilities ineligible for any other category of Medicaid. Those receiving this coverage pay a monthly premium of between 5 percent and 7.5 percent of their monthly net income.

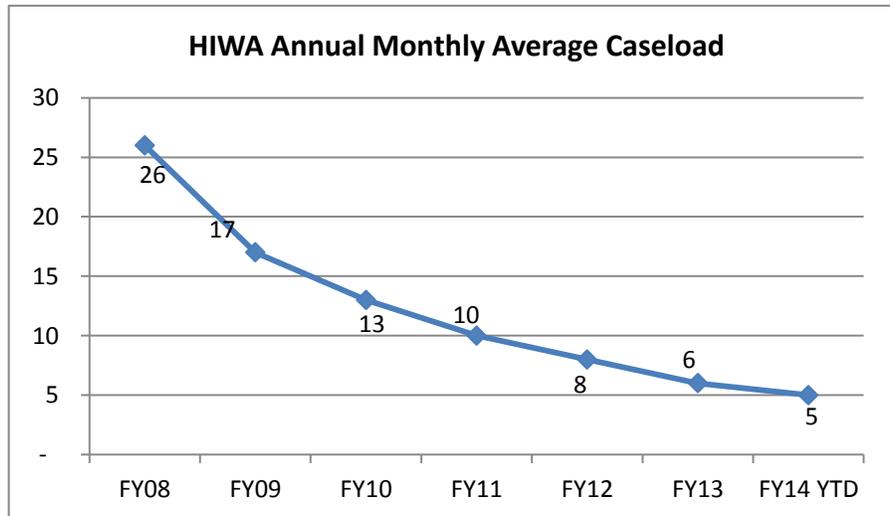
**Eligibility:** Citizenship, residency, disability and current employment are requirements of the program. The resource limit is \$15,000. A vehicle, special needs trusts, medical savings accounts and tax refunds are some of the resources which are excluded. There are several work-related expenses which are disregarded such as travel-related costs, employment-related personal care aid costs, service animal costs and other costs related to employment.

**Other:** HIWA was implemented in July 2004. Maximum gross unearned income limit, prior to disregards is \$699. Maximum gross earned income limit, prior to disregards is 450 percent of the Federal Poverty Level (FPL). The total net earned and unearned income must be equal to or less than 250 percent of the Federal Poverty Level. The individual must be disabled as determined by the Social Security Administration, either through current or prior receipt of social security disability benefits. A recipient losing employment through no fault of their own, remains eligible for three additional months provided the monthly premiums continue to be paid. Retroactive enrollment is permitted with payment of monthly premiums.

**Workload History:**

| Fiscal Year | Average Cases |
|-------------|---------------|
| FY 12       | 8             |
| FY 13       | 6             |
| FY 14 YTD   | 5             |

| FYTD:               | Caseload  |
|---------------------|-----------|
| Jul 13              | 5         |
| Aug                 | 5         |
| Sep                 | 5         |
| Oct                 | 5         |
| Nov                 | 5         |
| Dec                 | 4         |
| Jan 14              |           |
| Feb                 |           |
| Mar                 |           |
| Apr                 |           |
| May                 |           |
| Jun                 |           |
| <b>FY14 Total</b>   | <b>29</b> |
| <b>FY14 Average</b> | <b>5</b>  |



**Comment:** The 2011 American Community Survey of the US Census reported Nevada had an estimated 1,688,466 persons age 18-64. Of the 1,145,733 employed, 60,374 individuals had a disability while 1,085,359 individuals were without a disability. Of the 62,394 unemployed, 17,922 had a disability, while 144,472 individuals were without a disability.

**Contact:** Linda Bowman, Social Services Manager III, Reno District Office, (775) 687-1913, email: [lbowman@dncfp.nv.gov](mailto:lbowman@dncfp.nv.gov)

**Website:** <http://www.dncfp.state.nv.us/HIWA/index.htm>

# Nevada Department of Health and Human Services, DHCFP

## 4.03 Waiver – Persons with Physical Disabilities

**Program:**

The State of Nevada Home and Community-Based Waiver for Persons with Physical Disabilities (WIN) is operated by the Nevada Division of Health Care Financing and Policy (DHCFP). The goals of this waiver are to provide the option of home and community-based services as an alternative to nursing facility placement and to allow maximum independence for persons with physical disabilities who would otherwise need nursing facility services.

**Eligibility:**

Interest in waiver services initiates a screening process to determine if the individual appears to meet the following eligibility requirements:

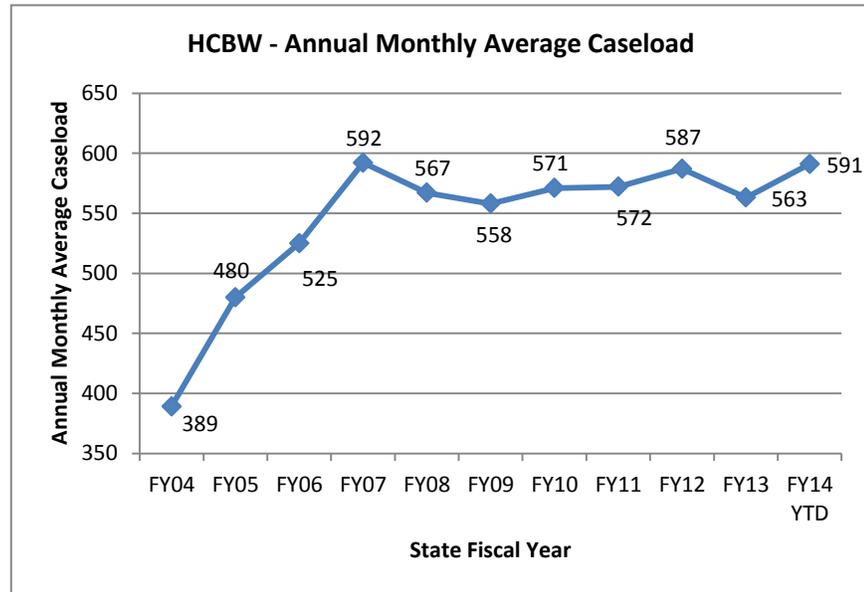
- Without the waiver services, would require institutional care provided in a skilled nursing facility or intermediate care facility for the mentally retarded (ICF/MR)
- Applies for and is determined eligible for full Medicaid benefits through the Division of Welfare and Supportive Services (DWSS)
- Is certified as physically disabled by DHCFP's Central Office Disability Determination Team.

**Workload History:**

| State Fiscal Year | Total Expenditures | Average Caseload |
|-------------------|--------------------|------------------|
| FY09              | \$4,689,814        | 558              |
| FY10              | \$3,673,969        | 571              |
| FY11              | \$3,860,025        | 572              |
| FY12              | \$3,434,462        | 587              |
| FY 13             | \$3,487,297        | 563              |

**Caseload FYTD:**

| Month               | Caseload     |
|---------------------|--------------|
| Jul 13              | 579          |
| Aug                 | 580          |
| Sep                 | 573          |
| Oct                 | 594          |
| Nov                 | 589          |
| Dec                 | 629          |
| Jan 14              |              |
| Feb                 |              |
| Mar                 |              |
| Apr                 |              |
| May                 |              |
| Jun                 |              |
| <b>FY14 Total</b>   | <b>3,544</b> |
| <b>FY14 Average</b> | <b>591</b>   |



**Comments:**

This waiver was formerly called the Waiver for Independent Nevadans, and has kept the corresponding acronym WIN.

Caseload reporting was converted from Paradox in November 2007. Quality of caseload reporting improved as a result of this change.

**Website:**

<http://dhcftp.state.nv.us/wcaseloads.htm>

**Contact:**

Jennifer Frischmann, Chief, Continuum of Care, DHCFP.

This page left intentionally blank

# Nevada Department of Health and Human Services, DWSS

## 5.01 TANF Cash Total

**Program:** Temporary Assistance for Needy Families (TANF) is a time-limited, federally-funded block grant to provide assistance to needy families so children may be cared for in their homes or in the homes of relatives. TANF provides parents/caregivers with job preparation, work opportunities and support services to enable them to leave the program and become self-sufficient.

**Eligibility:** Citizenship, residency, children's immunizations and proof of school-age children in school, living with a specified relative, social security number for each recipient, less than \$2,000 countable resources per TANF case (exceptions: 1 automobile, home, household goods and personal items).

**Need Standard:**

| Household Size | Need Standard 100% | Payment Allowance 75% of FPL | NNRC* 275% FPL* | NNCT* Allowance |
|----------------|--------------------|------------------------------|-----------------|-----------------|
| 1              | \$718              | \$253                        | \$2,633         | \$417           |
| 2              | \$969              | \$318                        | \$3,554         | \$476           |
| 3              | \$1,221            | \$383                        | \$4,476         | \$535           |
| 4              | \$1,472            | \$448                        | \$5,397         | \$594           |
| 5              | \$1,723            | \$513                        | \$6,318         | \$654           |
| 6              | \$1,974            | \$578                        | \$7,239         | \$713           |
| 7              | \$2,226            | \$643                        | \$8,161         | \$772           |
| 8              | \$2,477            | \$708                        | \$9,082         | \$831           |

Kinship Care Allowance: 0-12 years of age = \$400 per child (unless only one child in this age group in the home the amount is \$417); 13 years+ = \$462 per child.

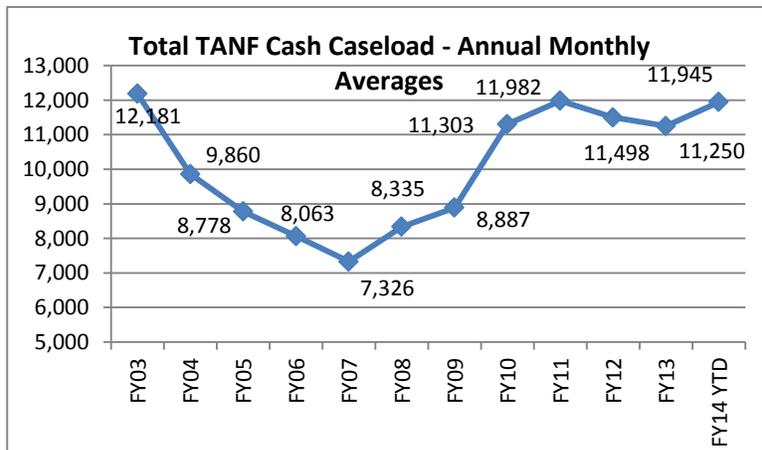
\*NNRC = Non-Needy Relative Caregiver; FPL = Federal Poverty Level; NNCT = Non-Needy Caretaker

**Workload History:**

| Fiscal Year | Average Cases | Total Expenditures |
|-------------|---------------|--------------------|
| FY 11       | 11,982        | \$47,167,802       |
| FY 12       | 11,498        | \$44,664,101       |
| FY 13       | 11,250        | \$43,525,013       |

**FYTD:**

|                   |               |
|-------------------|---------------|
| Jul 13            | 11,277        |
| Aug               | 11,176        |
| Sep               | 11,714        |
| Oct               | 12,543        |
| Nov               | 12,485        |
| Dec               | 12,477        |
| Jan 14            |               |
| Feb               |               |
| Mar               |               |
| Apr               |               |
| May               |               |
| Jun               |               |
| <b>FY14 Total</b> | <b>71,672</b> |
| <b>FY14 Avg.</b>  | <b>11,945</b> |



**Comments:** With the turnaround of the economy, good jobs, and low unemployment rates, caseloads dropped considerably starting in FY04 through FY07. FY08 started showing the effects of the current deep recession (started in December 2007), with many layoffs and high unemployment rates. Total of all Cash Cases. For statistical purposes only as each aid code is different and cannot be compared.

**Website:** [https://www.dwss.nv.gov/index.php?option=com\\_content&task=view&id=97&Itemid=253](https://www.dwss.nv.gov/index.php?option=com_content&task=view&id=97&Itemid=253)  
<https://www.dwss.nv.gov/>

# Nevada Department of Health and Human Services, DWSS

## 5.02 TANF Cash – Kinship Care

**Program:** Kinship Care provides cash assistance for children who are residing with a specified relative because of the absence of the child's parent(s). The caregiver must be a resident of Nevada, be 62 years of age or older, have exercised parental care and control of the child in their home for a minimum of six consecutive months, file for and obtain Nevada state or tribal court approval of legal guardianship. No adult parent of a child may reside in the household.

**Eligibility:** Citizenship, residency, children's immunizations and proof of school-age children in school, living with a specified relative, social security number for each recipient, less than \$2,000 countable resources per TANF case (exceptions: 1 automobile, home, household goods and personal items). The total household income for Kinship Care caretakers must be less than or equal to 275 percent of the federal poverty level for the number of people in the Kinship Care home. If the household's income is less than or equal to 275 percent, the payment amount is determined considering only the child's income.

**Other:** Kinship Care Allowance: 0-12 year of age = \$400 per child (unless only one child in this age group in the home the amount is \$417; 13 years and above = \$462 per child)

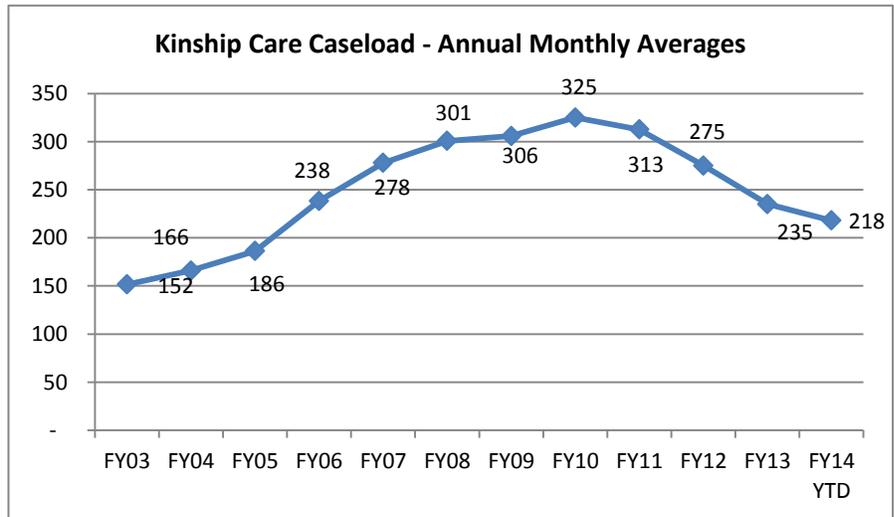
### Workload History:

| Fiscal Year | Average Cases | Total Expenditures |
|-------------|---------------|--------------------|
| FY 11       | 313           | \$3,353,125        |
| FY 12       | 275           | \$2,447,390        |
| FY 13       | 235           | \$2,008,414        |

### FYTD:

|        |     |
|--------|-----|
| Jul 13 | 217 |
| Aug    | 217 |
| Sep    | 216 |
| Oct    | 222 |
| Nov    | 219 |
| Dec    | 216 |
| Jan 14 |     |
| Feb    |     |
| Mar    |     |
| Apr    |     |
| May    |     |
| Jun    |     |

**FY14 Total**            **1,307**  
**FY14 Avg.**             **218**



**Comments:** This program started in FY02 (October 2001 first month). In September 2011, the benefit amount was reduced 25 percent.

**Website:** [https://www.dwss.nv.gov/dmdocuments/Gen\\_KinshipCareBrochure.pdf](https://www.dwss.nv.gov/dmdocuments/Gen_KinshipCareBrochure.pdf)

# Nevada Department of Health and Human Services, DWSS

## 5.03 New Employees of Nevada (NEON)

**Program:** The Nevada Division of Welfare and Supportive Services' TANF Employment and Training Program is called "New Employees of Nevada (NEON)". The program provides a wide array of services designed to assist TANF households become self-sufficient primarily through training, employment and wage gain; thereby, reducing or eliminating their dependency on public assistance programs. NEON provides support services in the form of child care, transportation, clothing, tools and other special need items necessary for employment.

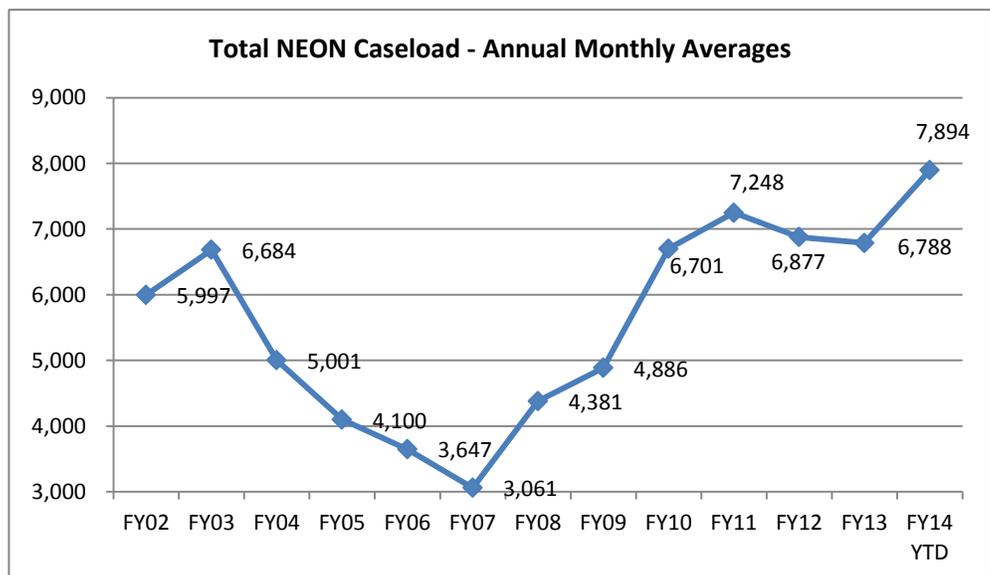
**Eligibility:** Individuals who meet the definition of a "work eligible individual" are NEON mandatory. This includes all adults or minor head-of-households (HOH) receiving assistance under the TANF-NEON program. This excludes minor parents not HOH or married to the HOH, aliens not eligible for TANF, SSI recipients, parents caring for disabled family members in the home, and tribal TANF recipients.

### Workload History:

| Fiscal Year | Average Cases |
|-------------|---------------|
| FY 10       | 6,701         |
| FY 11       | 7,248         |
| FY 12       | 6,877         |
| FY 13       | 6,788         |
| FY 14 YTD   | 7,894         |

### FYTD:

| Month             | Caseload      |
|-------------------|---------------|
| Jul 13            | 6,955         |
| Aug               | 7,281         |
| Sep               | 7,625         |
| Oct               | 8,313         |
| Nov               | 8,511         |
| Dec               | 8,678         |
| Jan 14            |               |
| Feb               |               |
| Mar               |               |
| Apr               |               |
| May               |               |
| Jun               |               |
| <b>FY14 Total</b> | <b>47,363</b> |
| <b>FY14 Avg.</b>  | <b>7,894</b>  |



**Comments:** FY02 and FY03 showed significant caseload growth attributed to the terrorist attacks of September 11, 2001. FY04 through FY07 began a turnaround of the economy, juiced by the housing boom, which provided good jobs and low unemployment rates. Caseloads dropped considerably during this period. FY08 through FY11 caseloads reflect the effects of the deep recession that started in December 2007. Layoffs and persistent high unemployment at current levels have not been seen in recent history and are reflected in high caseloads.

# Nevada Department of Health and Human Services, DWSS

## 5.04 Total TANF Medicaid

**Program:** Households who meet TANF requirements but choose not to receive cash or have reached their time limits are eligible for Medicaid. In addition, households receiving TANF cash or Medicaid who become ineligible due to earned income or excess child support may remain eligible for Medicaid for up to 12 months when certain conditions are met. Households with excess earned income may remain eligible up to 12 months. Those with excess child support remain eligible for up to four months.

**Eligibility:** Citizenship, residency, children's immunizations and proof of school-age children in school, social security number for each recipient, less than \$2,000 countable resources per TANF-Related Medicaid case (exceptions: 1 automobile, home, household goods and personal items). The income limits and income tests are the same as the TANF cash program.

**Need Standard:**

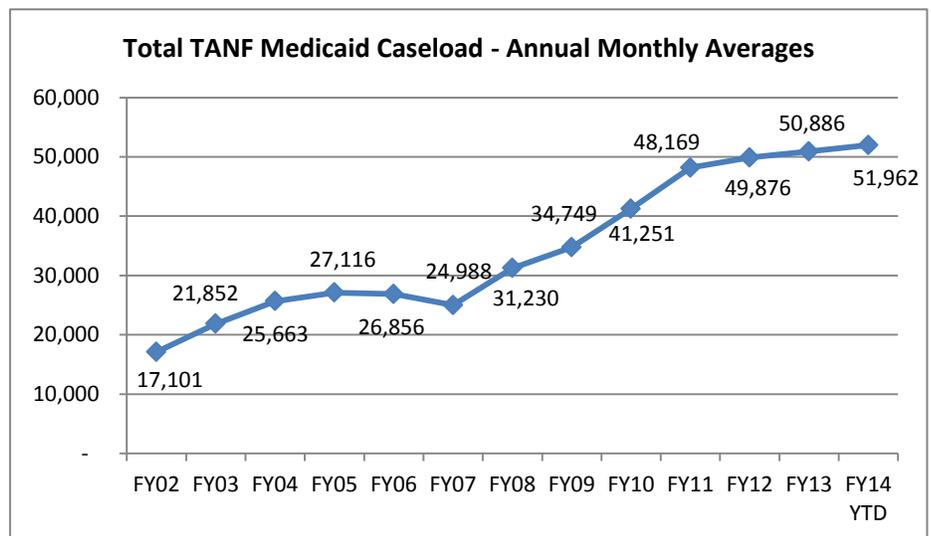
| Household Size | Need Standard 100% | Payment Allowance 33% |
|----------------|--------------------|-----------------------|
| 1              | \$718              | \$253                 |
| 2              | \$969              | \$318                 |
| 3              | \$1,221            | \$383                 |
| 4              | \$1,472            | \$448                 |
| 5              | \$1,723            | \$513                 |
| 6              | \$1,974            | \$578                 |
| 7              | \$2,226            | \$643                 |
| 8              | \$2,477            | \$708                 |

**Workload History:**

| Fiscal Year | Average Cases |
|-------------|---------------|
| FY 10       | 41,251        |
| FY 11       | 48,169        |
| FY 12       | 49,876        |
| FY 13       | 50,886        |
| FY 14 YTD   | 51,962        |

**FYTD:**

|                   |                |
|-------------------|----------------|
| Jul 13            | 52,332         |
| Aug               | 53,036         |
| Sep               | 53,146         |
| Oct               | 52,260         |
| Nov               | 50,757         |
| Dec               | 50,242         |
| Jan 14            |                |
| Feb               |                |
| Mar               |                |
| Apr               |                |
| May               |                |
| Jun               |                |
| <b>FY14 Total</b> | <b>311,773</b> |
| <b>FY14 Avg.</b>  | <b>51,962</b>  |



**Comments:**

Starting October 2007 all TANF Cash recipients were not categorically eligible for Medicaid. TANF Cash recipients have a dual TANF Medicaid aid code. This explains part of the increase in FY08. The recession that began in December 2007 led to increased caseloads between FY08 and FY11. Total of all TANF Med cases. For statistical purposes only as each aid code is different and cannot be compared.

# Nevada Department of Health and Human Services, DWSS

## 5.05 Child Health Assurance Program (CHAP)

**Program:** The Child Health Assurance (CHAP) program provides pregnancy-related Medicaid for pregnant women and full Medicaid for children under age six with income greater than 100% of the Federal Poverty Level (FPL) but less than or equal to 133% of the FPL. Pregnant women and children up through age 19 with income less than or equal to 100% of the FPL receive full Medicaid coverage.

**Eligibility:** Citizenship, residence and income at or below the two poverty levels. There is no resource test in this program; there is no requirement to live with someone with a certain relationship. In addition, anyone with an interest in the child may make application for CHAP on their behalf.

**Need Standard:**

| Household Size | Need Standard 100% | Need Standard 133% |
|----------------|--------------------|--------------------|
| 1              | \$958              | \$1,273            |
| 2              | \$1,293            | \$1,719            |
| 3              | \$1,628            | \$2,165            |
| 4              | \$1,963            | \$2,610            |
| 5              | \$2,298            | \$3,056            |
| 6              | \$2,633            | \$3,501            |
| 7              | \$2,968            | \$3,947            |
| 8              | \$3,303            | \$4,392            |

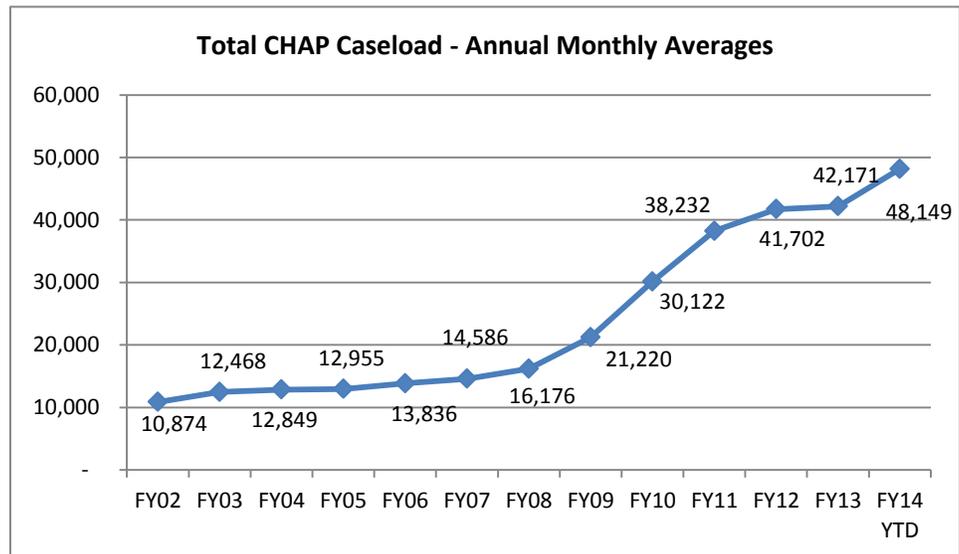
**Workload History:**

| Fiscal Year | Average Cases |
|-------------|---------------|
| FY 10       | 30,122        |
| FY 11       | 38,232        |
| FY 12       | 41,702        |
| FY 13       | 42,171        |

**FYTD:**

|        |        |
|--------|--------|
| Jul 13 | 43,141 |
| Aug    | 43,467 |
| Sep    | 43,780 |
| Oct    | 48,246 |
| Nov    | 52,717 |
| Dec    | 57,541 |
| Jan 14 |        |
| Feb    |        |
| Mar    |        |
| Apr    |        |
| May    |        |
| Jun    |        |

**FY14 Total**      **288,892**  
**FY14 Avg.**      **48,149**



**Comments:** FY08 started showing the effects of the current deep recession (started in December 2007). The recession continued to drive caseload growth while leveling off in 2012. The surge in caseload in 2013 is due to the newly eligible as a result of the ACA.

# Nevada Department of Health and Human Services, DWSS

## 5.06 Nevada Check Up

**Program:** Authorized under Title XXI of the Social Security Act, Nevada Check Up is the State of Nevada’s Children’s Health Insurance Program (SCHIP). The program provides low cost, comprehensive health care coverage to low income, uninsured children 0 through 18 years of age who are not covered by private insurance or Medicaid.

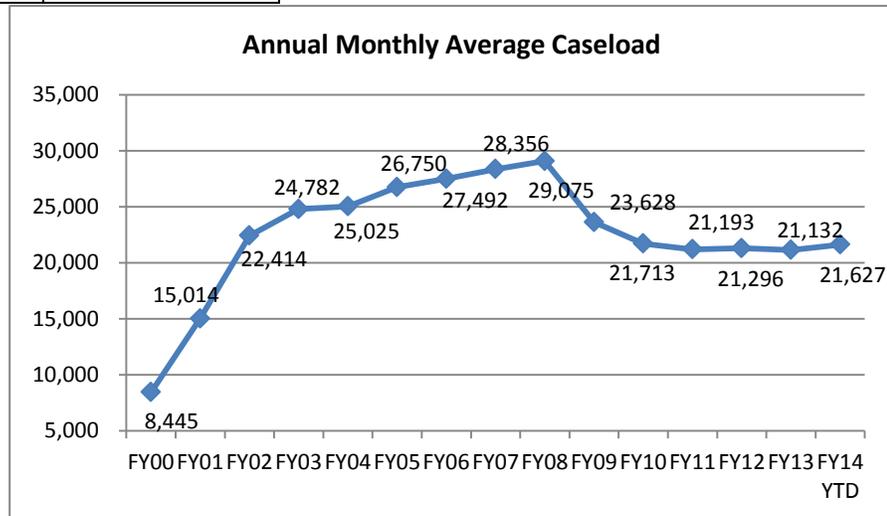
- Eligibility:**
- The family’s gross annual income is between 100 percent and 200 percent of the Federal Poverty Level guidelines; and
  - The child is a U.S. citizen, “qualified alien” or legal resident with five years residency and is under age 19 on the date coverage will begin; and
  - The child must not be eligible for Medicaid or private health insurance and must not have access to Public Employee Benefits.

| <b>2013 Federal Poverty Guidelines</b> |             |             |
|--|-------------|-------------|
| <b>Family Size</b>                     | <b>100%</b> | <b>200%</b> |
| 1                                      | \$11,490    | \$22,980    |
| 2                                      | \$15,510    | \$31,020    |
| 3                                      | \$19,530    | \$39,060    |
| 4                                      | \$23,550    | \$47,100    |
| 5                                      | \$27,570    | \$55,140    |
| 6                                      | \$31,590    | \$63,180    |
| 7                                      | \$35,610    | \$71,220    |
| 8                                      | \$39,630    | \$79,260    |
| 9                                      | \$43,650    | \$87,300    |
| 10                                     | \$47,670    | \$95,340    |
| Each additional family member, add:    | \$4,020     | \$8,040     |

**Workload History:**

| <b>Fiscal Year</b> | <b>Average Cases</b> | <b>Total Expenditures</b> |
|--------------------|----------------------|---------------------------|
| FY 12              | 21,296               | \$33,456,579              |
| FY 13              | 21,132               | \$31,378,893              |
| FY 14 YTD          | 21,627               | \$23,110,738              |

| <b><u>FYTD:</u></b> | <b><u>Caseload</u></b> |
|---------------------|------------------------|
| Jul 13              | 21,271                 |
| Aug                 | 21,394                 |
| Sep                 | 21,263                 |
| Oct                 | 21,356                 |
| Nov                 | 22,430                 |
| Dec                 | 22,116                 |
| Jan 14              | 21,561                 |
| Feb                 |                        |
| Mar                 |                        |
| Apr                 |                        |
| May                 |                        |
| Jun                 |                        |
| <b>FY14 Total</b>   | <b>151,391</b>         |
| <b>FY14 Average</b> | <b>21,627</b>          |



**Comment:** Expenditure totals are for benefit costs only and do not include Personnel or other Administrative expenses.

# Nevada Department of Health and Human Services, DWSS

## 5.07 County Match

**Program:** Through an agreement with the Division, Nevada counties pay the non-federal share of costs for institutionalized persons whose monthly income is between \$1,009.01 and 300 percent of the SSI payment level.

**Eligibility:** No age requirement, a citizen of the United States or a non-citizen legally admitted for permanent residence to the U.S. and meets certain criteria, or is in another eligible non-citizen category and meets certain criteria.

**Other:** Resource limits are determined by whether a person is considered an individual or a member of a couple. When resources exceed the following limits, the case is ineligible. \$2,000 for an individual or \$3,000 for a couple. Resources are evaluated at market value less encumbrances. Certain types of resources are excluded, such as: Life insurance policies, when the total face value is less than \$1,500. Vehicles necessary to produce income, transportation for medical treatment on a regular basis (specifically handicapped equipped vehicles), or the value of a vehicle up to \$4,500. Burial plots/plans.

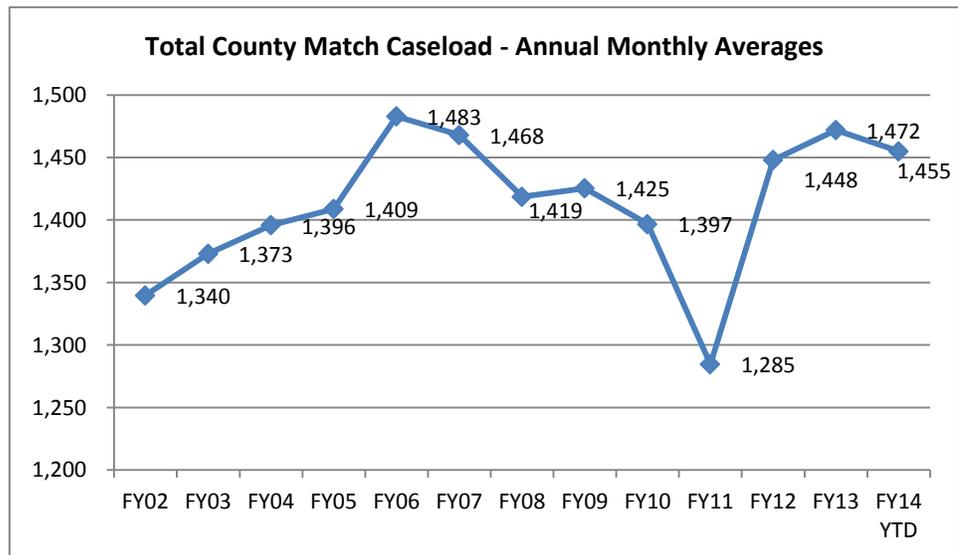
**Workload History (with Retros\*):**

| Fiscal Year | Average Cases |
|-------------|---------------|
| FY 10       | 1,397         |
| FY 11       | 1,373         |
| FY 12       | 1,448         |
| FY 13       | 1,472         |
| FY14 YTD    | 1,455         |

**FYTD:**

|        |       |
|--------|-------|
| Jul 13 | 1,471 |
| Aug    | 1,447 |
| Sep    | 1,436 |
| Oct    | 1,453 |
| Nov    | 1,457 |
| Dec    | 1,463 |
| Jan 14 |       |
| Feb    |       |
| Mar    |       |
| Apr    |       |
| May    |       |
| Jun    |       |

**FY14 Total**            **8,727**  
**FY14 Avg.**             **1,455**



**Comments:** The downward trend starting after FY06 may be due to an increased number of recipients obtaining Qualified Income Trusts (QIT). Money deposited in a QIT is exempt and a potential County Match recipient may never reach the CM income threshold. In FY12 a change in eligibility requirements increased the caseload.

\*Retros (retroactive eligibility) are calculated based on previous years' total ending cases. A percentage factor is added to current caseloads to account for cases that were approved for previous months' eligibility.

# Nevada Department of Health and Human Services, DWSS

## 5.08 Medical Assistance to the Aged, Blind, and Disabled

**Program:** These are medical service programs only. Many applicants are already on Medicare and Medicaid. This supplements their Medicare coverage. Additionally, others are eligible for Medicaid coverage as a result of being eligible for a means-tested public assistance program such as Supplemental Security Income (SSI). Categories are: SSI, State Institutional, Non-Institutional, Prior Med, Public Law, Katie Beckett.

**Eligibility:** No age requirement (except for Aged), a citizen of the United States or a non-citizen legally admitted for permanent residence to the U.S. and meets certain criteria, or is in another eligible non-citizen category and meets certain criteria.

**Other:** Resource limits are determined by whether a person is considered an individual or a member of a couple. When resources exceed the following limits, the case is ineligible. Medicare Savings Program cases: \$7,080- for an individual or \$10,620 for a couple. Other cases: \$2,000 for an individual or \$3,000 for a couple. Resources are evaluated at market value less encumbrances. Certain types of resources are excluded, such as: Life insurance policies, when the total face value is less than \$1,500; vehicles necessary to produce income; transportation for medical treatment on a regular basis (specifically handicapped equipped vehicles), or the value of a vehicle up to \$4,500; burial plots/plans.

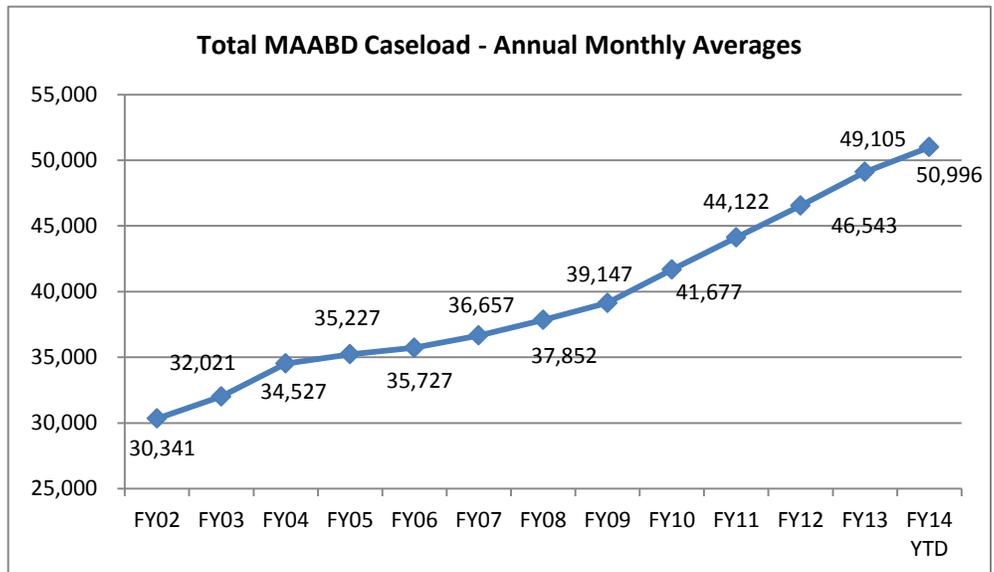
### Workload History (with Retros\*):

| Fiscal Year | Average Cases |
|-------------|---------------|
| FY 10       | 41,677        |
| FY 11       | 44,503        |
| FY 12       | 46,543        |
| FY 13       | 49,105        |
| FY14 YTD    | 50,996        |

### FYTD:

|        |        |
|--------|--------|
| Jul 13 | 50,443 |
| Aug    | 50,628 |
| Sep    | 50,831 |
| Oct    | 51,308 |
| Nov    | 51,616 |
| Dec    | 51,151 |
| Jan 14 |        |
| Feb    |        |
| Mar    |        |
| Apr    |        |
| May    |        |
| Jun    |        |

**FY14 Total**      **305,977**  
**FY14 Avg.**        **50,996**



**Comments:** Total of all MAABD cases. For statistical purposes only as each aid code is different and cannot be compared.

\*Retros (retroactive eligibility) are calculated based on previous years' total ending cases. A percentage factor is added to current caseloads to account for cases that were approved for previous months' eligibility. SSI cases can take up to three years for approval/denial.

# Nevada Department of Health and Human Services, DWSS

## 5.09 Supplemental Nutrition Assistance Program (SNAP)

**Program:** The purpose of SNAP is to raise the nutritional level among low income households whose limited food purchasing power contributes to hunger and malnutrition among members of these households. Application requests may be made verbally, in writing, in person or through another individual. A responsible adult household member knowledgeable of the household's circumstances may apply and be interviewed. The date of application is the date the application is received in the Division of Welfare and Supportive Services office.

**Eligibility:** The household's gross income must be less than or equal to 200 percent of poverty; the household's net income must be less than or equal to 100 percent of poverty to be eligible. Households in which all members are elderly or disabled have no gross income test. The resource limit for all households except those with elderly or disabled members is \$2,000; households with elderly or disabled members have a resource limit of \$3,250 (exceptions: one vehicle, home, household goods, and personal items).

**Need Standard:**

| Household Size | 200% of Poverty | 130% of Poverty | 100% of Poverty | Maximum Allotment |
|----------------|-----------------|-----------------|-----------------|-------------------|
| 1              | \$1,862         | \$1,211         | \$931           | \$200             |
| 2              | \$2,522         | \$1,640         | \$1,261         | \$367             |
| 3              | \$3,182         | \$2,069         | \$1,591         | \$526             |
| 4              | \$3,842         | \$2,498         | \$1,921         | \$668             |
| 5              | \$4,502         | \$2,927         | \$2,251         | \$793             |
| 6              | \$5,162         | \$3,356         | \$2,581         | \$952             |
| 7              | \$5,822         | \$3,785         | \$2,911         | \$1,052           |
| 8              | \$6,482         | \$4,214         | \$3,241         | \$1,202           |

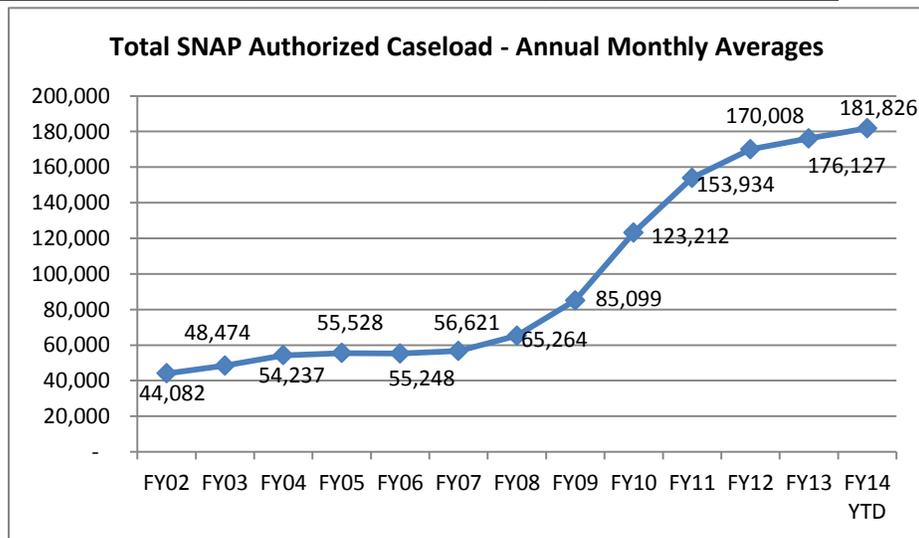
**Workload History:**

| Fiscal Year | Average Cases | Total Expenditures | Total Applications |
|-------------|---------------|--------------------|--------------------|
| FY 12       | 170,008       | \$518,493,663      | 312,302            |
| FY 13       | 176,127       | \$524,977,396      | 354,799            |

**FYTD:**

|        |         |
|--------|---------|
| Jul 13 | 179,369 |
| Aug    | 181,644 |
| Sep    | 182,673 |
| Oct    | 183,220 |
| Nov    | 182,225 |
| Dec    |         |
| Jan 14 |         |
| Feb    |         |
| Mar    |         |
| Apr    |         |
| May    |         |
| Jun    |         |

**FY14 Total**      **909,131**  
**FY14 Avg.**      **181,826**



**Comments:** The Food Stamp Program was renamed "Supplemental Nutrition Assistance Program (SNAP)" in October 2008. The SNAP caseload has increased substantially since the start of the recession in December 2007 because of the high unemployment experienced in Nevada. A change in SNAP regulations effective 3/15/2009 made many households categorically eligible based on receiving a benefit which meets Purposes 3 and 4 for TANF and having a gross income limit of 200 percent of poverty. There is no further income or resource test.

**Website:** [https://www.dwss.nv.gov/index.php?option=com\\_contentandtask=viewandid=84andItemid=234](https://www.dwss.nv.gov/index.php?option=com_contentandtask=viewandid=84andItemid=234)  
<https://www.dwss.nv.gov/>

# Nevada Department of Health and Human Services, DWSS

## 5.10 Supplemental Nutrition Employment and Training Program (SNAPET)

**Program:** SNAPET promotes the employment of SNAP participants through job search activities and group or individual programs which provide a self-directed placement philosophy, allowing the participant to be responsible for his/her own development by providing job skills and the confidence to obtain employment. SNAPET also provides support services in the form of transportation reimbursement, bus passes and assistance meeting the expenditures required for job search (such as interview clothing, health or sheriff's card if it is know that one will be required).

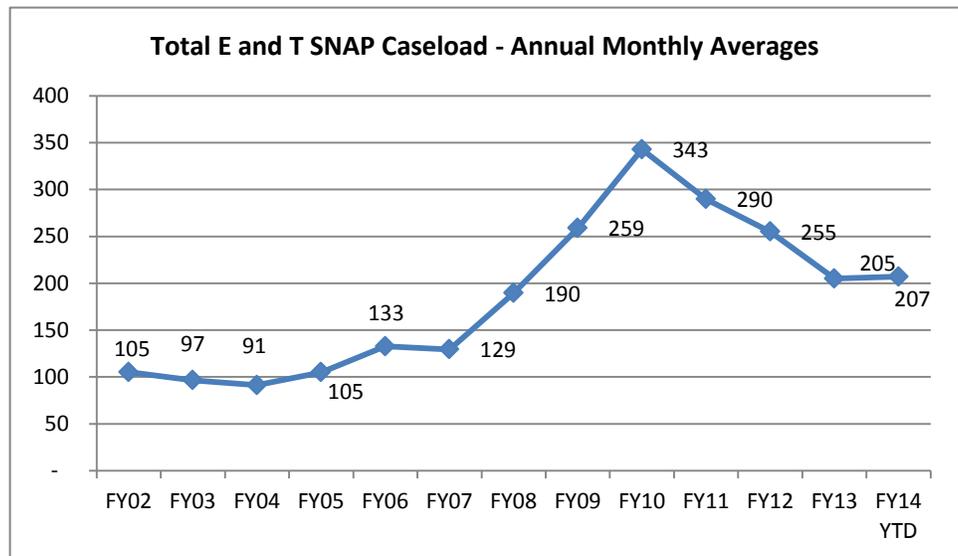
**Eligibility:** Registration and participation is mandatory and a condition of SNAP eligibility for all non-exempt SNAP participants. Persons who are exempt may volunteer. Persons are exempt when they are under age sixteen (16), age sixty ( 60) or older, disabled, caring for young children under the age of six (6) or disabled family members or are already working. NEON mandatory, participant in drug/alcohol treatment, receiving UIB, age 16/17 attending school or training at least half time, eligible students age 18-49 enrolled at least half time in school or training program.

### Workload History:

| Fiscal Year | Average Cases |
|-------------|---------------|
| FY 10       | 343           |
| FY 11       | 290           |
| FY 12       | 255           |
| FY 13       | 205           |
| FY 14 YTD   | 207           |

### FYTD:

|                   |              |
|-------------------|--------------|
| Jul 13            | 226          |
| Aug               | 209          |
| Sep               | 162          |
| Oct               | 212          |
| Nov               | 162          |
| Dec               | 268          |
| Jan 14            |              |
| Feb               |              |
| Mar               |              |
| Apr               |              |
| May               |              |
| Jun               |              |
| <b>FY14 Total</b> | <b>1,239</b> |
| <b>FY14 Avg.</b>  | <b>207</b>   |



**Comments:** The SNAPET caseload usually parallels the SNAP caseload but on a smaller scale since we only work with clients who do not meet a work exemption. These clients are classified as work mandatory and are required to complete a two month job search program or until they have become employed. Note that beginning in FY11, only mandatory clients invited to orientation were counted.

# Nevada Department of Health and Human Services, DWSS

## 5.11 Child Care and Development Program

**Program:** The Child Care Program assists low-income families, families receiving temporary public assistance, or families with children placed by CPS and foster parents by subsidizing child care costs so they can work. Households are able to qualify for child care subsidies based upon their total monthly gross income, household size, and other requirements. Assistance is provided through three programs: Traditional (certificate for licensed or informal child care); Contracted Slots (before and after school programs); and Wrap-Around (services before and after the Head Start Program).

**Eligibility:** To qualify for child care subsidy assistance, the child must be 12 years old or younger unless the child has a verified special need. Other factors include citizenship, immunizations, relationship, residency, and social security numbers. Additionally, adult household members and minor parents must have a purpose of care such as working or a minor parent attending high school.

**Fee Scale:** The sliding fee scale provides the income limits for each household size. This is an example for a four person household. The subsidy column indicates the percentage of the state approved maximum child care rate which would be paid by the Child Care and Development Program.

| Income Limits for Family of Four |         | Note                                 | Subsidy % |
|----------------------------------|---------|--------------------------------------|-----------|
| \$0                              | \$1,963 | \$1,963 = Federal Poverty Level      | 95%-110%  |
| \$1,964                          | \$2,261 |                                      | 90%       |
| \$2,262                          | \$2,560 | \$2,551 = 130% Federal Poverty Level | 80%       |
| \$2,561                          | \$2,858 |                                      | 70%       |
| \$2,859                          | \$3,157 |                                      | 60%       |
| \$3,158                          | \$3,455 |                                      | 50%       |
| \$3,456                          | \$3,753 |                                      | 40%       |
| \$3,754                          | \$4,052 |                                      | 30%       |
| \$4,032                          | \$4,342 | \$4,343 = 75% of NV median income    | 20%       |

### Workload History:

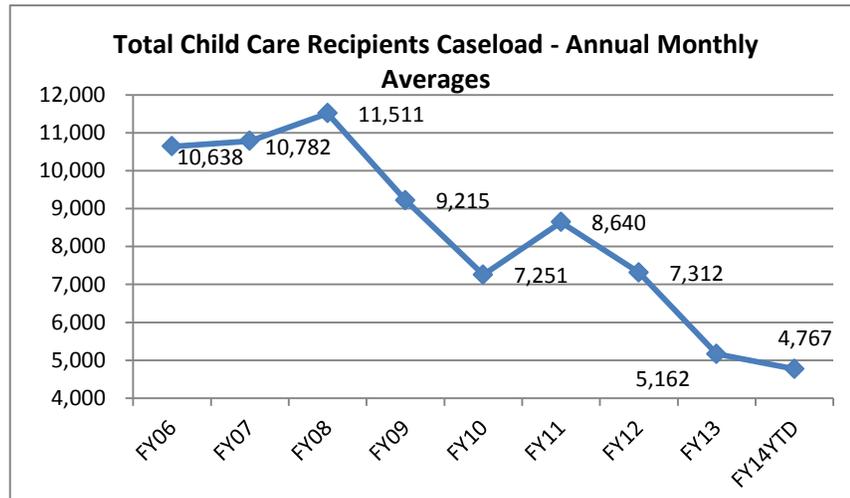
| Fiscal Year | Average Cases | Total Payments |
|-------------|---------------|----------------|
| FY 11       | 8,640         | \$34,536,354   |
| FY 12       | 7,312         | \$30,247,720   |
| FY 13       | 5,162         | \$21,161,327   |

### FYTD:

|        |       |
|--------|-------|
| Jul 13 | 4,570 |
| Aug    | 4,741 |
| Sep    | 4,689 |
| Oct    | 5,000 |
| Nov    | 4,834 |
| Dec    |       |
| Jan 14 |       |
| Feb    |       |
| Mar    |       |
| Apr    |       |
| May    |       |
| Jun    |       |

**FY14 Tot** 23,834  
**FY14 Avg.** 4,767

*Italics = Projected counts*



**Comments:** The unserved population in the Discretionary category was established in FY09, which capped that population at 2,500. Unserved population included "wait list" and an estimated caseload reduction due to program changes. This caused a significant downturn compared to previous fiscal years.

Beginning in FY12, Training Purpose of Care has been eliminated and Student Purpose of Care has been eliminated except for minor parents attending high school.

# Nevada Department of Health and Human Services, DWSS

## 5.12 Child Support Enforcement Program

**Program:** The program is a federal, state, and local intergovernmental collaboration functioning in all 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, and the Virgin Islands. The Office of Child Support Enforcement in the Administration for Children and Families of the U.S. Department of Health and Human Services helps states develop, manage and operate child support programs effectively and according to federal law. The CSEP is administered by DWSS and jointly operated by State Program Area Offices (PAO) and participating county District Attorney offices through cooperative agreements.

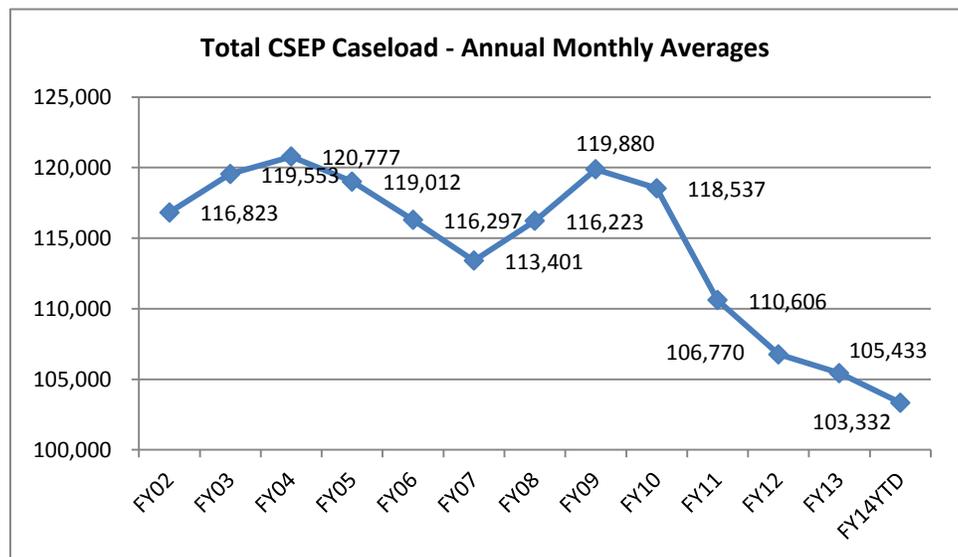
**Eligibility:** There are no eligibility requirements for child support services, which include locating the non-custodial parent, establishing paternity and support obligations, and enforcing the child support order. Non-public assistance custodians complete an application for services. Public assistance custodians must assign support rights to the state and cooperate with the agency regarding Child Support Enforcement (CSE) services.

### Workload History:

| Fiscal Year | Average Cases | Gross Collections |
|-------------|---------------|-------------------|
| FY 11       | 110,606       | \$198,573,814     |
| FY 12       | 106,770       | \$205,934,166     |
| FY 13       | 105,433       | \$207,634,173     |

### FYTD:

|                   |                |
|-------------------|----------------|
| Jul 13            | 105,168        |
| Aug               | 104,557        |
| Sep               | 102,745        |
| Oct               | 102,897        |
| Nov               | 102,998        |
| Dec               | 101,626        |
| Jan 14            |                |
| Feb               |                |
| Mar               |                |
| Apr               |                |
| May               |                |
| Jun               |                |
| <b>FY14 Total</b> | <b>619,991</b> |
| <b>FY14 Avg.</b>  | <b>103,332</b> |



**Comments:** The CSEP caseload trend is tied closely to the economy. When the economy is good, fewer customers need child support services; when there is a downward turn in the economy, more customers need child support services. Additional factors contributing to the caseload trend going down include case closure projects and stopping inappropriate referrals (unborn cases). A factor that may contribute to an increase in caseload is an increase in public assistance referrals and non-assistance applications due to the current economic environment and high unemployment rate.

**Website:** [https://www.dwss.nv.gov/index.php?option=com\\_content&task=view&id=56&Itemid=129](https://www.dwss.nv.gov/index.php?option=com_content&task=view&id=56&Itemid=129)

# Nevada Department of Health and Human Services, DWSS

## 5.13 Energy Assistance Program

**Program:** The Energy Assistance Program (EAP) assists eligible Nevadans maintain essential heating and cooling in their homes during the winter and summer seasons. The program provides for crisis assistance as well.

**Eligibility:** Citizenship, Nevada residency, household composition, Social Security numbers for each household member, energy usage and income are verified prior to the authorization and issuance of benefits. Eligible households' income must not exceed 150 percent of poverty level. Priority is given to the most vulnerable households, such as the elderly, disabled and young children.

**Need Standard:**

| 2013 HHS Poverty Guidelines |                               |
|-----------------------------|-------------------------------|
| Persons in Family           | 48 Contiguous States and D.C. |
| 1                           | \$11,490                      |
| 2                           | \$15,510                      |
| 3                           | \$19,530                      |
| 4                           | \$23,550                      |
| 5                           | \$27,570                      |
| 6                           | \$31,590                      |
| 7                           | \$35,610                      |
| 8                           | \$39,630                      |

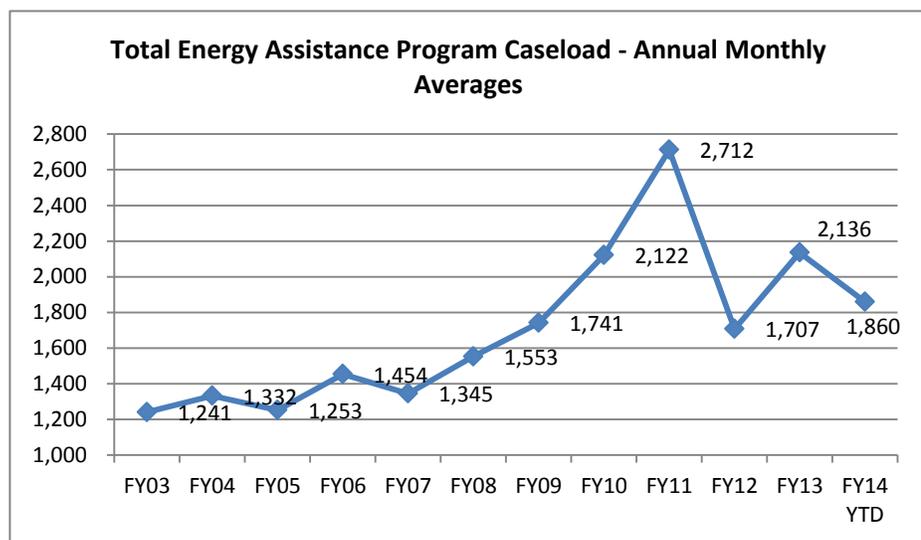
60 percent estimated state median income for a four person household for FFY2014 was \$41,685.

**Workload History:**

| Fiscal year | Average Cases | Total Cases | Total Expenditures | Total Applications |
|-------------|---------------|-------------|--------------------|--------------------|
| FY 11       | 2,712         | 32,544      | \$28,335,649       | 42,611             |
| FY 12       | 1,707         | 20,484      | \$11,361,013       | 38,643             |
| FY 13       | 2,136         | 25,631      | \$18,684,877       | 36,764             |

**FYTD:**

|                   |               |
|-------------------|---------------|
| Jul 13            | 899           |
| Aug               | 2,134         |
| Sep               | 1,778         |
| Oct               | 2,506         |
| Nov               | 2,371         |
| Dec               | 1,471         |
| Jan 13            |               |
| Feb               |               |
| Mar               |               |
| Apr               |               |
| May               |               |
| Jun               |               |
| <b>FY14 Total</b> | <b>11,159</b> |
| <b>FY14 Avg.</b>  | <b>1,860</b>  |



**Comments:** Nevada's Energy Assistance Program in FY09 received a larger Low Income Heat Energy Assistance Block Grant than planned. This combined with an increased demand in program services due to the current economic climate has resulted in increased application activity and consequently additional cases being approved. In FY12 the eligibility requirements were changed to lower the monthly benefit amount and FPL from 150 percent to 110 percent, which has decreased the EAP caseload. FY13 increased benefits to 125 percent FPL (July) and 150 percent FPL (December).

**Website:** [https://www.dwss.nv.gov/index.php?option=com\\_contentandtask=viewandid=116andItemid=285](https://www.dwss.nv.gov/index.php?option=com_contentandtask=viewandid=116andItemid=285)

This page left intentionally blank

# Nevada Department of Health and Human Services, DPBH

## 6.01 Newborn Screening (NBS) Program

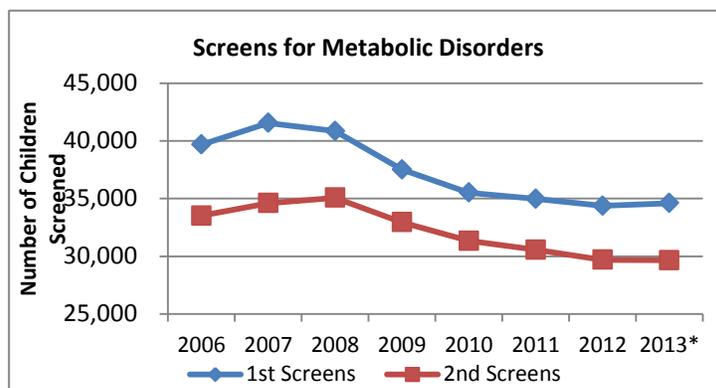
**Program:** Nevada Revised Statute (NRS) 442.008 mandates that all infants born in Nevada receive newborn Dried Blood Spot (DBS) screening for a panel of congenital disorders. A first screen is collected ideally between 24 and 48 hours of age, and the second screen is ideally collected between the 10th and 15th day of life. The Newborn Screening Program currently contracts with the Oregon State Public Health Laboratory (OSPHL) to test for at least 29 core conditions and 25 secondary conditions that can be found during screening for the core conditions recommended by the Secretary of Health and Human Services Advisory Committee on Heritable Disorders and Genetic Diseases in Newborns and Children. The OSPHL is contracted to screen specimens, follow-up on positive screens and provide medical consultants who provide guidance to Nevada’s primary care physicians until a confirmation of a diagnosis is reached. Families of infants with identified disorders can access follow-up services through Nevada Early Intervention Services or other community providers. The Newborn Screening Program is funded entirely with birth registration fees.

**Eligibility:** There are no eligibility requirements for dried blood screening. Newborn screens are required for all infants born in Nevada. Birthing facility staff are required to collect an acceptable sample before the infant is discharged from the facility and to submit the sample for metabolic screening as required in NAC 442.020-050. Infants with conditions identified in the newborn screening process are eligible for Early Intervention and Home Visiting services.

### Infants Screened by Year:

| Year  | Number of First Screens | Number of Second Screens | Total Number of Screenings | Percent of First Screen Babies that also Received Second Screens |
|-------|-------------------------|--------------------------|----------------------------|--|
| 2009  | 37,509                  | 32,947                   | 70,450                     | 87.8%  |
| 2010  | 35,510                  | 31,341                   | 66,851                     | 88.3%  |
| 2011  | 34,974                  | 30,570                   | 65,544                     | 87.4%  |
| 2012  | 34,366                  | 29,698                   | 64,064                     | 86.4%  |
| 2013* | 34,601                  | 29,651                   | 64,252                     | 85.7%  |

\* 2013 data is an annualized projection based on actual screening data reported for January through November, 2013. December data



**Comments:** In 2012, virtually 100 percent of all babies born in Nevada received at least one screen since newborn screening is mandatory unless the parent formally refuses to have their infant screened. The nine programs in the United States that require a second newborn screen historically report a gap of 10 to 20 percent between those infants that receive both screenings and those infants that receive only the initial screening. In Nevada in Calendar Year (CY) 2011, the gap was 12.6 percent, data for CY 2012 shows a 13.6 percent gap, and annualized data for CY 2013 projects a 14.3 percent gap. Factors which can influence the number of children receiving a second screen include whether or not parents and primary care physicians received appropriate education regarding the importance of a second newborn screening, whether there is parental follow-through to ensure that a second screen is completed, and whether the first screening indicated that results were within the normal range. While Nevada's gap is still in the low range, the program is providing educational outreach to both providers and parents regarding the importance of the second screen in order to ensure optimal health outcomes for newborns and to reduce the current gap between first and second screens. The program also actively pursues lost to follow up cases - utilizing other sources of information to attempt to locate the parents of the infant who is due for their second screen.

**Website:** [http://health.nv.gov/NCCID\\_NewbornScreening.htm](http://health.nv.gov/NCCID_NewbornScreening.htm)

# Nevada Department of Health and Human Services, DPBH

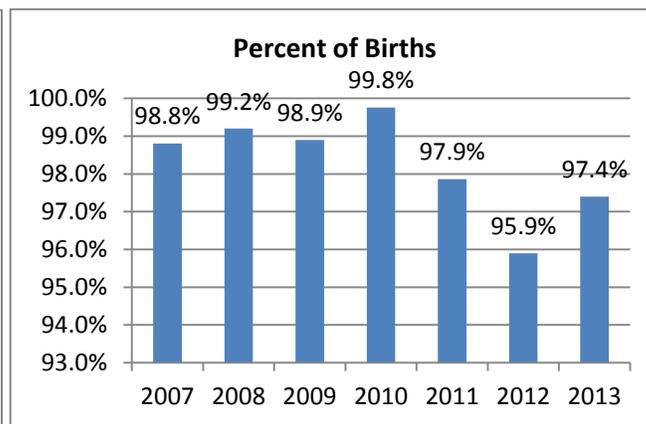
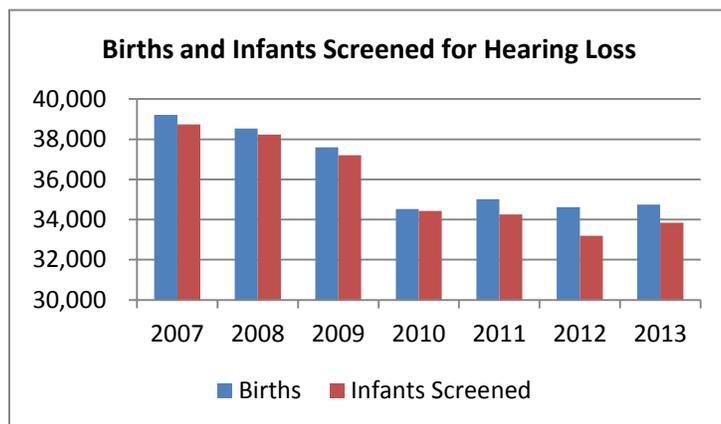
## 6.02 Early Hearing Detection and Intervention

**Program:** The goals of the Nevada Early Hearing Detection and Intervention (EHDI) program are to ensure that: 1) all infants are screened for hearing loss at birth, 2) referred infants receive diagnostic evaluation, and 3) infants identified with hearing loss receive appropriate intervention. The program is entirely funded by grants from the Centers for Disease Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA). The negative effects of hearing loss can be substantially mitigated through early intervention that may include amplification, speech therapy, cochlear implants, and/or signing. EHDI works with birthing hospitals statewide and with Nevada Early Intervention Services to ensure infants are screened, identified, and entered into services within recommended time frames. The program partners with non-profit, hospitals, and audiologists to develop and update best practices and provide parents with education, support, and trained mentors.

**Eligibility:** There are no eligibility requirements for newborn hearing screening. NRS 442.450 requires all hospitals in the state with 500 or more births per year to screen newborn infants' hearing prior to discharge. However, all birthing hospitals in the state, even those with less than 500 births per year, provide hearing screenings as a "Best Practice". All infants identified in the newborn hearing screening process with confirmed hearing loss are eligible for Early Intervention services.

**Other:** Intervention increases the access to services and dramatically decreases the long-term costs associated with hearing loss.

| Calendar Year | Infants Screened | Births | Percentage of Births |
|---------------|------------------|--------|----------------------|
| 2007          | 38,744           | 39,209 | 98.8%                |
| 2008          | 38,232           | 38,541 | 99.2%                |
| 2009          | 37,205           | 37,600 | 98.9%                |
| 2010          | 34,433           | 34,517 | 99.8%                |
| 2011          | 34,263           | 35,013 | 97.9%                |
| 2012*         | 33,195           | 34,622 | 95.9%                |
| 2013**        | 33,850           | 34,740 | 97.4%                |



**Comments:** In 2013 "Birth" and "Screening" data is preliminary. Calendar Year 2013 January through November hospital data for hearing screening and birth registry number of births has been annualized to calculate the projected percentage for the year.

**Websites:** [http://health.nv.gov/NBS\\_EHDI.htm](http://health.nv.gov/NBS_EHDI.htm)  
[http://www.infanthearing.org/states/state\\_profile.php?state=nevada](http://www.infanthearing.org/states/state_profile.php?state=nevada)  
<http://www.cdc.gov/ncbddd/ehdi/>

# Nevada Department of Health and Human Services, DPBH

## 6.03 Immunization

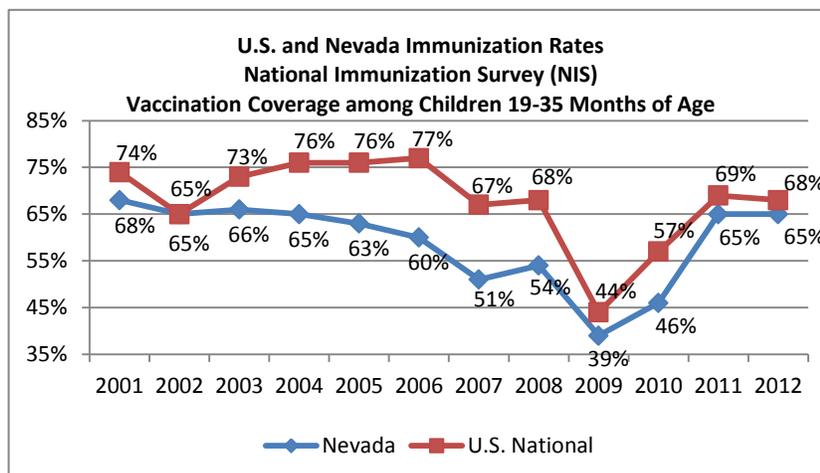
**Program:** The overall goal of the Immunization Program is to decrease vaccine-preventable disease morbidity through improved immunization rates among children, adolescents and adults in Nevada. The Program collaborates with public and private vaccine providers, schools, immunization coalitions and other stakeholders to improve immunization practices by enrolling providers into the Vaccines For Children (VFC) Program and educating providers how to record vaccination data in the Statewide Immunization Registry (Nevada WebIZ).

**Vaccines for Children Program:** Any physician, healthcare organization or medical practice licensed by the State of Nevada to prescribe and administer vaccines may enroll as participants in the VFC Program. The Program provides federally funded vaccines at no cost to these participants, who, in turn, administer them to eligible children. Eligible children are NV Checkup enrolled, Medicaid eligible, American Indian/Alaska native, uninsured or underinsured, and are not charged for the vaccine.

**Nevada WebIZ:** Any physician, health care organization or medical practice that administers vaccines and any organization with a need to verify immunization coverage may enroll as users of Nevada WebIZ (immunization registry). Vaccination data collected in the registry can be used to identify those at risk in the event of a disease outbreak or other emergency and to locate communities with low vaccine coverage rates to target interventions. On July 1, 2009 Nevada Revised Statute 439.265 (and corresponding regulations) went into effect, requiring all persons vaccinating children in Nevada to enter certain data about the vaccination event into the Registry. On January 28, 2010 the NRS corresponding regulation was updated requiring all persons vaccinating adults in Nevada to also record specific information into the Registry.

**Program Participation:**

|              | Vaccines for Children Participation Status   | Nevada WebIZ Participation Status (by physical location)  |
|--------------|--|---|
| Clark        | 143  | 1,491   |
| Washoe       | 45   | 558   |
| Carson/Rural | 85   | 363   |
| Note:        | 267 "Active" providers (currently receiving vaccine supply) and 6 "Temp Leave" providers (vaccine shipments temporarily suspended) | 100 percent of Vaccines for Children participants are enrolled to enter their immunization data in Nevada WebIZ. (All WebIZ data as of 12/31/2013.) |



- Comments:**
- From 2007 - 2011, the immunization series was 4:3:1:3:3:1:4 (4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hep B, 1 Varicella, 4 Pneumococcal).
  - In 2009, Nevada became a Vaccines for Children (VFC) only state. This means that only federal funds are now used to vaccinate VFC eligible children. Prior to 2009, state and federal funding had been received to vaccinate all children regardless of insurance status.
  - In 2009, NRS 439.265 and corresponding regulation mandated that all vaccinations administered in Nevada to children be recorded in Nevada WebIZ.
  - Starting in 2007 and ending in 2009, the United States experienced a Hib shortage, hence the reason behind a significant decrease in immunization rates.

**Website:** <http://health.nv.gov/Immunization.htm>

# Nevada Department of Health and Human Services, DPBH

## 6.04 Women, Infants, and Children (WIC) Supplemental Food Program

**Program:** The Special Supplemental Food Program for Women, Infants, and Children, commonly known as WIC, is a 100 percent federally funded program that provides nutritious foods to supplement the diets of limited income pregnant, postpartum and breastfeeding women, infants, and children under age 5 who have been determined to be at nutritional risk. At WIC, participants get access to good healthy foods, advice on good nutrition, health screening, information on health care services like immunizations, prenatal care, and family planning, and information about other family support services available in their community.

**Eligibility:** Applicant must be (1) an infant or child under five years of age, (2) a pregnant woman, (3) a postpartum woman (up to 6 months after giving birth), or (4) a breastfeeding woman (up to the breastfed infants first birthday). Must be a Nevada resident and physically live in Nevada at the time of application. Must be at or below 185% of the federal poverty level. Last, but not least, the applicant must be at nutritional risk as determined by a Competent Professional Authority (CPA) at the WIC clinic.

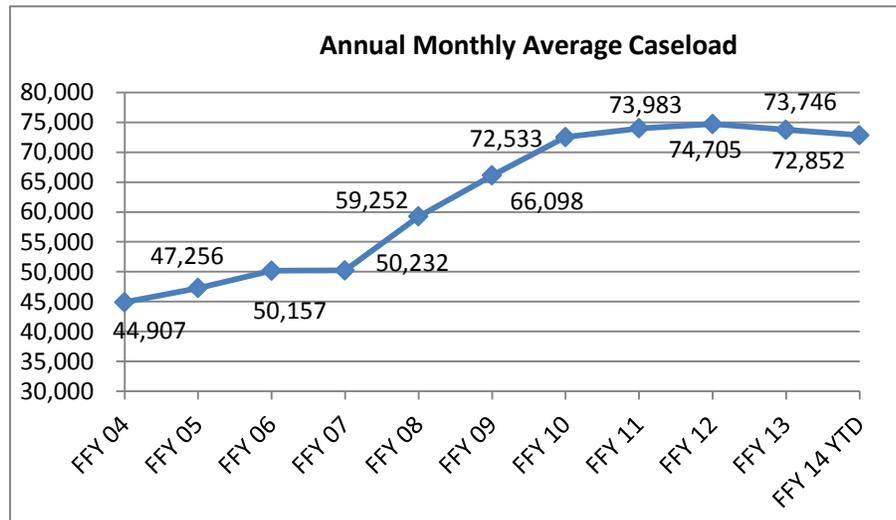
### Workload History:

| Federal Fiscal Year | Total Expenditures | Average Caseload |
|---------------------|--------------------|------------------|
| FFY10               | \$14,399,912       | 72,533           |
| FFY11               | \$14,280,926       | 73,983           |
| FFY12               | \$13,778,416       | 74,705           |
| FFY13               | \$14,124,298       | 73,746           |
| FFY14 YTD           | \$760,471          | 72,852           |

### Caseload FFYTD:

|        |        |
|--------|--------|
| Oct 13 | 73,644 |
| Nov    | 72,059 |
| Dec    |        |
| Jan 14 |        |
| Feb    |        |
| Mar    |        |
| Apr    |        |
| May    |        |
| Jun    |        |
| Jul    |        |
| Aug    |        |
| Sep    |        |

**FFY14 Total** 145,703  
**FFY14 Average** 72,852



**Comments:** As one of the fastest growing states in the country, Nevada has experienced a WIC participation growth of 11 percent from FFY09 to FFY13. Further, food dollars expended for the WIC program for the same period has increased 16 percent, from a total of \$41,935,901 in FFY09 to \$48,868,317 in FFY13.

The WIC program has completed its initiative through a contract with JP Morgan for the automation of the issuance of all WIC Benefits using Electronic Benefits Transfer (EBT). All participants can now use their new EBT card at any of WIC's 223 authorized grocery stores.

**Website:** <http://health.nv.gov/WIC.htm>

# Nevada Department of Health and Human Services, DPBH

## 6.05 Oral Health Program

**Program:** Nevada Division of Public and Behavioral Health (NDPBH), Oral Health Program (OHP) provides technical support to organizations that implement school-based dental sealant programs. The FY 2009 statewide Third Grade Basic Screening Survey (BSS) showed 37.5% of Nevada's third grade students have a sealant.

The Community Health Alliance (formerly the Saint Mary's Take-Care-a-Van) Sealant program is a non-profit school-based sealant program that utilizes a mobile van to provide oral health education, sealants and fluoride varnish to 2nd grade children in underserved schools in Nevada (>50 percent Free and Reduced Lunch (FRL)). They operate during the 9-month academic year.

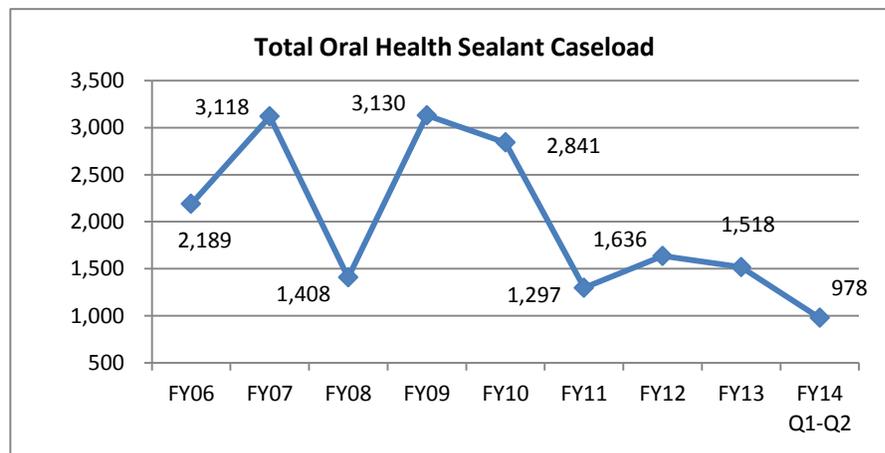
Seal Nevada South is a non-profit school-based sealant program, administered through UNLV School of Dental Medicine (SDM). The program serves uninsured children in second through fifth grade in underserved schools (>50 percent FRL) in Southern Nevada. They operate during the 9-month academic year.

Future Smiles is a non-profit school-based sealant program that provides two types of delivery models: Set locations in School-Based Health Centers for Education and Prevention of Oral Disease (EPODs) and mobile school-based locations utilizing portable equipment. Public Health Endorsed Dental Hygienists provide screenings, oral health education, dental cleanings, sealants, fluoride varnish and case management through a referral system to a local dentist or the University of Nevada Las Vegas, School of Dental Medicine (UNLV SDM). They operate during all 12-months of the year.

**Eligibility:** For dental sealants, schools with > 50 percent FRL eligibility or located in a county that has been designated as underserved.

### Caseload History:

| FY 2014 YTD               | Children Served | Sealants Placed |
|---------------------------|-----------------|-----------------|
| Community Health Alliance | 391             | 617             |
| Seal Nevada South         | 136             | 409             |
| Future Smiles             | 451             | 2,037           |
| Total                     | 978             | 3,063           |



**Comments:** Sealant Efficiency Assessment for Locals and States (SEALS, 2009) is a software program developed by the Centers for Disease Control and Prevention (CDC) to provide a uniform tracking resource for school-based sealant programs. All programs are currently utilizing the software program. All programs are reporting individual teeth sealed per CDC recommendations.

**Website:** [http://health.nv.gov/CC\\_OralHealth.htm](http://health.nv.gov/CC_OralHealth.htm)

# Nevada Department of Health and Human Services, DPBH

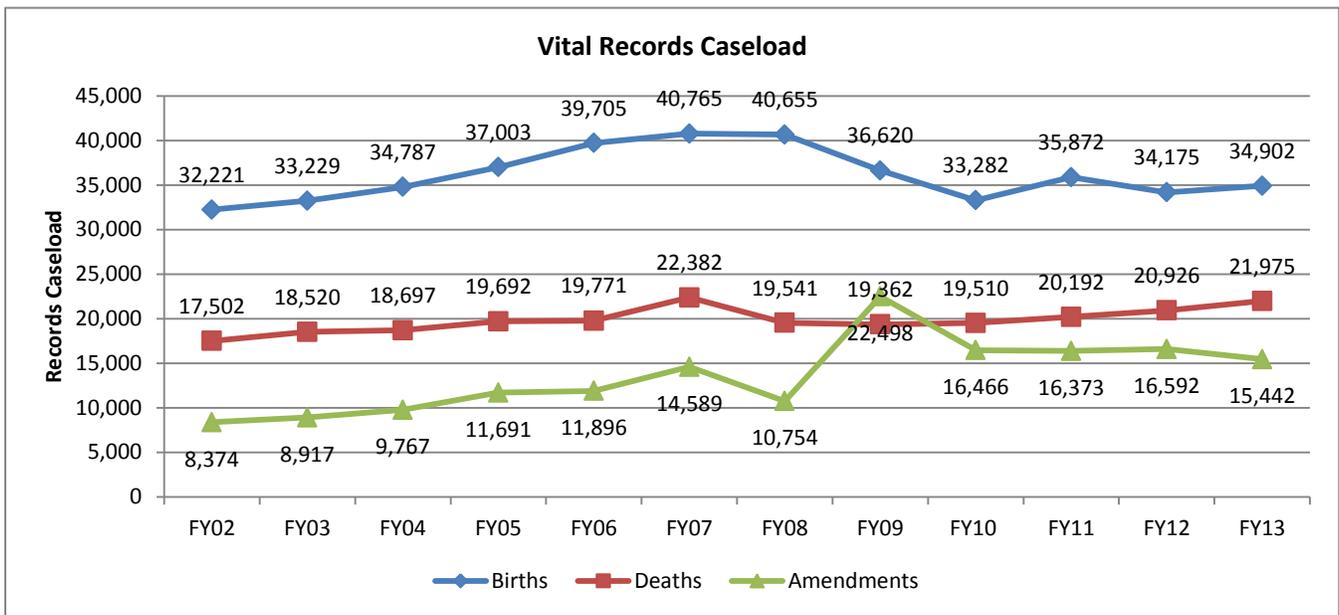
## 6.06 Vital Records and Statistics

**Program:** The Office of Vital Records and Statistics administers the statewide system of Vital Records by documenting and certifying the facts of births, deaths and family formation for the legal purposes of the citizens of Nevada, participates in the national vital statistics systems and responds to the needs of health programs, health care providers, businesses, researchers, educational institutions and the Nevada public for data and statistical information. The Office of Vital Records also amends registered records with required documentation such as court orders, affidavits, declarations and reports of adoptions per NRS and NAC 440. Amendments include corrections, alterations, adoptions and paternities.

**Authority:** Any person or organization that can provide personal or legal relationship or need for birth, death or statistical data is eligible for services. NRS 440

**Caseload:**

| Fiscal Year  | Births | Deaths | Amendments |
|--------------|--------|--------|------------|
| FY 11        | 35,872 | 20,192 | 16,373     |
| FY 12        | 34,175 | 20,926 | 16,592     |
| FY 13        | 34,902 | 21,975 | 15,442     |
| FY14 Q1 & Q2 | 17,314 | 10,667 | 8,445      |



**Comments:** Current processing times for the Office of Vital Records:

- Birth registration – avg. 15 days
- Death Registration – avg. 6 days

Note: Amendment counts include hospital paternities.

**Website:** <http://www.health.nv.gov/VS.htm>

# Nevada Department of Health and Human Services, DPBH

## 6.07 Women's Health Connection Program

**Mission:** Reduce breast cancer mortality and incidence of cervical cancer thereby enhancing the quality of life for Nevada women and their families through collaborative partnerships, health education, and access to high quality screening and diagnostic services.

**Program:** The Women's Health Connection (WHC) Program is a federally funded cooperative agreement through the Centers for Disease Control and Prevention (CDC). The cooperative agreement is authorized for 5-year periods, and the current agreement expires on June 29, 2017. Funding is awarded to pay for an office visit for the purpose of having a clinical breast exam, pelvic exam, and Pap test, if needed, for eligible clients. The program pays for the Pap test and will pay for mammograms for women 50 years of age and older. Clients who need a diagnostic work-up based on an abnormal screening exam also are covered by the program. Women diagnosed with breast or cervical cancer as a result of a program-eligible screening or diagnostic service and who are legal citizens of the U.S. are processed into Medicaid for treatment. The program fiscal year is June 30 to June 29 of each year.

**Eligibility:** Women must be residents of Nevada, age 40 to 64, not have health insurance, and must meet the income requirements noted below. Women 65 years of age or older who are not eligible for Medicare are eligible for this program.

| Household Size | Eligible Monthly Income* |
|----------------|--------------------------|
| 1              | \$2,394                  |
| 2              | \$3,231                  |
| 3              | \$4,069                  |
| 4              | \$4,906                  |
| 5              | \$5,744                  |
| 6              | \$6,581                  |
| 7              | \$7,419                  |
| 8              | \$8,256                  |

Income is based on 250 percent of the Federal Poverty Level with rates adjusted on July 1 of each year.

\*Effective June 30<sup>th</sup>, 2013

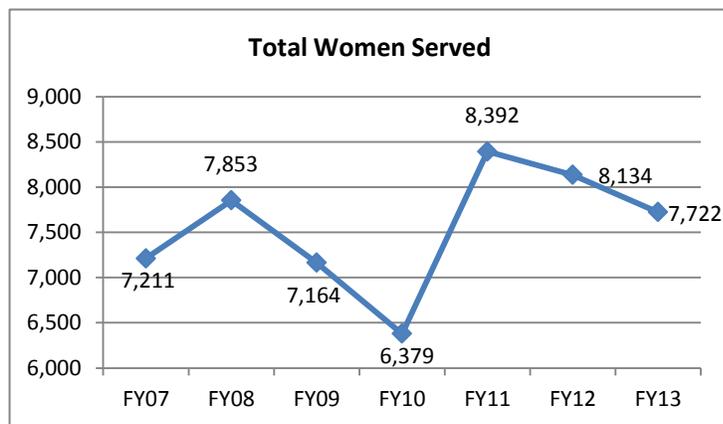
Note: For each additional person, add \$4,020

### Workload History:

| Fiscal Year | Avg. Screening Cases/Month | Total Expenditures | Total New Enrollees |
|-------------|----------------------------|--------------------|---------------------|
| FY11        | 731                        | \$2,527,397        | 3,612               |
| FY12        | 677                        | \$2,369,552        | 4,337               |
| FY13        | 644                        | \$2,356,635        | 3,930               |
| FY14 YTD    | 459                        | \$2,216,255        | 2,754               |

### FY14TD: Women Served

|                       |              |
|-----------------------|--------------|
| Jul 13                | 443          |
| Aug                   | 485          |
| Sep                   | 443          |
| Oct                   | 480          |
| Nov                   | 557          |
| Dec                   | 346          |
| Jan 14                |              |
| Feb                   |              |
| Mar                   |              |
| Apr                   |              |
| May                   |              |
| June                  |              |
| <b>FY14 YTD Total</b> | <b>2,754</b> |
| <b>FY14 YTD Avg</b>   | <b>459</b>   |



**Comments:** The program contracted to Access to Healthcare Network (AHN) in July 2011 for direct services. AHN has done an excellent job enrolling existing providers into their network to continue screening and diagnostic services for women in Nevada. 2014 Update 1Q: The program updated forms and manuals for providers. Mandatory provider training was conducted to ensure screening guidelines are followed. To better monitor the program screening capacity AHN implemented pre-assigned enrollment cards to each provider based on their screening history volume. The provider is only allowed to schedule screenings per their allotted amount. Updates to the programs data system modules occurred to better assist with case management and reimbursement.

**Website:** [http://health.nv.gov/CD\\_WHC\\_BreastCervical\\_Cancer.htm](http://health.nv.gov/CD_WHC_BreastCervical_Cancer.htm)

# Nevada Department of Health and Human Services, DPBH

## 6.08 Public Health and Clinical Services

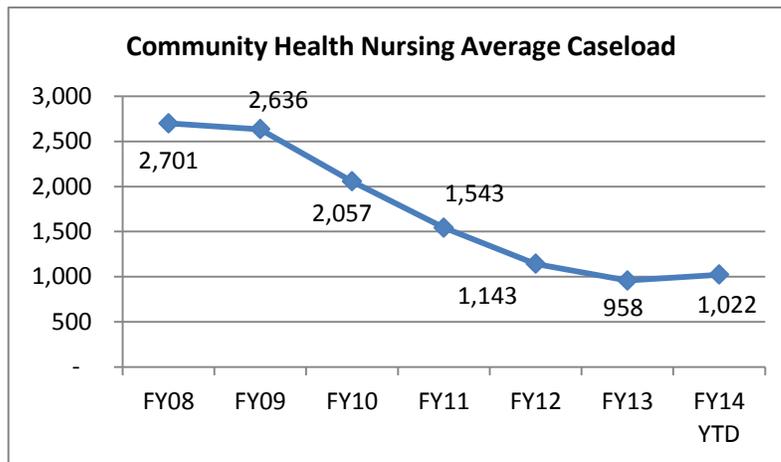
**Program:** Community Health is the combination of Community Health Nursing and Environmental Health Services. These programs promote optimal wellness in frontier and rural Nevada through the delivery of public health nursing, preventive health care, food safety inspections, early detection of threats to public health, response to natural and human caused disasters, and education statewide. Essential public health services such as adult and child immunizations, well child examinations, chronic disease education, lead testing, Family Planning/Cancer Screening, identification/treatment of communicable diseases such as Tuberculosis (TB), Sexually Transmitted Diseases (STD) and Human Immunodeficiency Virus (HIV) are offered. Two Community Health Nurses (CHN) function as the school nurse in the rural districts without school nurses. Other nursing services are provided based on the needs of the county served.

**Eligibility:** All individuals may access the CHN clinics. The targeted populations are: the working poor, under and uninsured, and indigent populations of the fourteen (14) frontier and rural counties in Nevada. PHCS CHN services are based on the federal poverty guidelines using a Sliding Scale Fee structure. Services are not denied due to inability to pay.

**Other:** Environmental Health Services (EHS) involves those aspects of public health concerned with the factors, circumstances, and conditions in the environment or surroundings of humans that can exert an influence on health and well-being. The majority of workload is associated with food establishments.

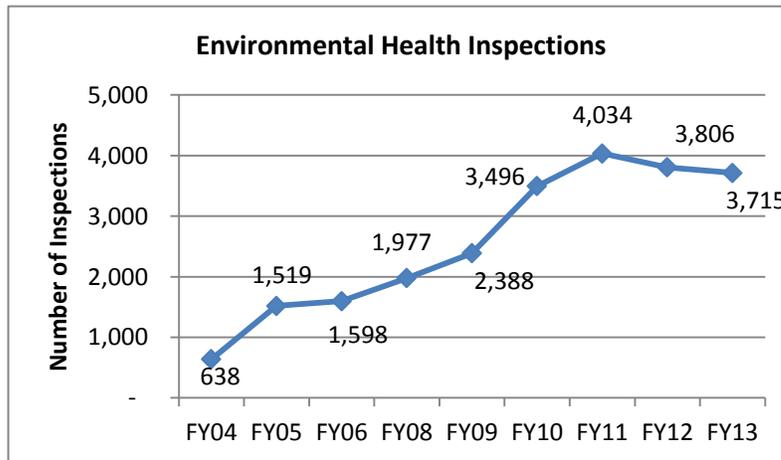
### Community Health Nursing

| FYTD                | Caseload     |
|---------------------|--------------|
| Jul 13              | 1,023        |
| Aug                 | 1,263        |
| Sep                 | 941          |
| Oct                 | 1,061        |
| Nov                 | 1,059        |
| Dec                 | 783          |
| Jan 14              |              |
| Feb                 |              |
| Mar                 |              |
| Apr                 |              |
| May                 |              |
| Jun                 |              |
| <b>FY14 Total</b>   | <b>6,130</b> |
| <b>FY14 Average</b> | <b>1,022</b> |



### Environmental Health Insp.

| FYTD                | Caseload     |
|---------------------|--------------|
| Jul 13              | 322          |
| Aug                 | 294          |
| Sep                 | 287          |
| Oct                 | 433          |
| Nov                 | 318          |
| Dec                 | 286          |
| Jan 14              |              |
| Feb                 |              |
| Mar                 |              |
| Apr                 |              |
| May                 |              |
| Jun                 |              |
| <b>FY14 Total</b>   | <b>1,940</b> |
| <b>FY14 Average</b> | <b>323</b>   |



**Comments:** Community Health Nurse caseloads are generally decreasing due to clinics dispensing method controls for 9 month time frames instead of monthly. CHN numbers represent clients served. Health inspections decreased due to the retirement of two senior environmentalists. The positions have recently been filled so FY14 inspection numbers should return to those achieved in FY11.

# Nevada Department of Health and Human Services, DPBH

## 6.09 Sexually Transmitted Disease Program

**Program:** The Sexually Transmitted Disease Prevention and Control Program's major function is to reduce the incidence and prevalence of sexually transmitted diseases in Nevada. The program emphasizes the importance of both education and screening of people who engage in high-risk activities by a comprehensive program of: 1) case identification and locating, 2) testing and treatment, and 3) education. The program's functions are achieved by working through public and private medical providers, local health authorities, and state and local disease intervention specialists.

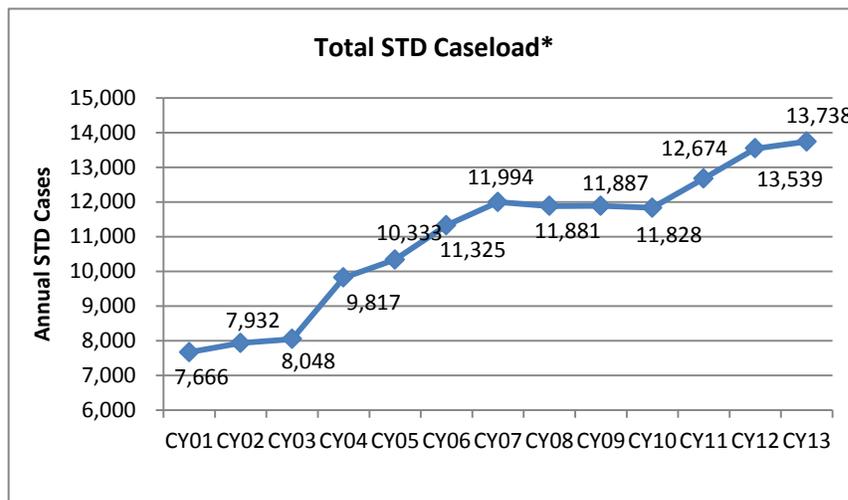
**Trends:** For CY 2013, there were 11,013 reported chlamydia cases, 2,532 reported gonorrhea cases, and 193 reported primary and secondary (P&S) syphilis cases in Nevada, for a total of 13,738 STD cases. Chlamydia cases decreased by 1%, while gonorrhea cases increased by 12%, and P&S syphilis cases increased by 71% compared to CY 2012. Overall, the total number of reported STDs (chlamydia, gonorrhea, and P&S syphilis) in Nevada increased by 1.5% from 2012 to 2013. Historically, the number of chlamydia and gonorrhea cases reported in Nevada increase minimally from year-to-year, and the number of reported P&S syphilis cases fluctuates from year-to-year.

The total number of reported chlamydia cases in Nevada increased from 10,061 in 2009 to 11,013 in 2013, a 9% increase during this five year period. The rate of chlamydia in 2013 in Nevada was 395.6 cases per 100,000 population based on 2013 population projections from the Nevada State Demographer-vintage 2012 data. Nevada fell below the national chlamydia rate of 456.7 cases per 100,000 population, as reported by the 2012 CDC STD Surveillance Report.

The total number of reported cases of gonorrhea in Nevada has increased from 1,727 in 2009 to 2,532 in 2013, a 47% increase during this five year reporting period. The gonorrhea rate in Nevada in 2013 was 90.9 cases per 100,000 persons based on 2013 population projections from the Nevada State Demographer-vintage 2012 data. Nevada fell below the national gonorrhea rate of 107.5 cases per 100,000 population, as reported by the 2012 CDC STD Surveillance Report.

The total number of reported cases of P&S syphilis in Nevada has increased from 91 in 2009 to 193 in 2013, a 112% increase during this five year reporting period. The P&S syphilis rate in Nevada in 2013 was 6.9 cases per 100,000 persons based on 2013 population projections from the Nevada State Demographer-vintage 2012 data. Nevada was higher than the national P&S syphilis rate of 5.0 cases per 100,000 population, as reported by the 2012 CDC STD Surveillance Report.

Previously, Nevada experienced a syphilis outbreak, with 40 P&S syphilis cases reported in 2004 and 109 P&S syphilis cases reported in 2005. The number of cases reported peaked in 2006, with 137 total P&S cases reported in the state (132 cases reported in Clark County). In 2006, Nevada had the highest rate of congenital syphilis in the United States at 42.6 cases per 100,000 live births and 15 total reported cases.



\*Includes Chlamydia, Gonorrhea, and Primary and Secondary Syphilis.

# Nevada Department of Health and Human Services, DPBH

## 6.10 Ryan White AIDS Drug Assistance Program

**Program:** The Ryan White Part B program is a federally funded grant that offers many services for HIV and AIDS residents of Nevada who meet the eligibility criteria. The AIDS Drug Assistance Program (ADAP) is the Ryan White CARE Program that combines federal and state funds to supply formulary medications to clients through contracted ADAP pharmacies. Medicare Part D and Health Insurance Continuation Program assistance is also available. Eligibility intake is offered in the north and south at the ACCESS to Healthcare offices.

**Eligibility:** Client income must not exceed 400% of federal poverty level guidelines - approximately \$45,960 for a single person. A client may own a single-family home and a car. Additional assets of the client may not exceed \$10,000. Lab tests for T-cell and viral load must be done every six months. Ryan White eligibility recertification is mandated every six months. Necessary documents must be provided at each recertification.

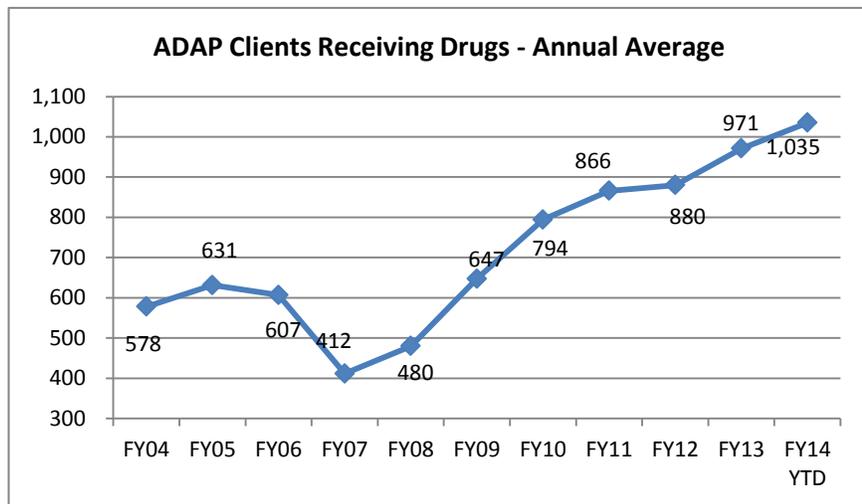
**Workload History:**

| State Fiscal Year | Avg. Cases/Month | Total Expenditures |
|-------------------|------------------|--------------------|
| <b>FY10</b>       | 794              | \$7,565,496        |
| <b>FY11</b>       | 866              | \$8,509,961        |
| <b>FY12</b>       | 880              | \$8,100,917        |
| <b>FY13</b>       | 971              | \$8,417,531        |
| <b>FY14 YTD</b>   | 1,035            | \$11,048,215       |

**FYTD:**

|        |       |
|--------|-------|
| Jul 13 | 1,107 |
| Aug    | 1,065 |
| Sep    | 1,011 |
| Oct    | 1,032 |
| Nov    | 993   |
| Dec    | 1,001 |
| Jan 14 |       |
| Feb    |       |
| Mar    |       |
| Apr    |       |
| May    |       |
| Jun    |       |

**FY14 Total 6,209**  
**FY14 Average 1,035**



**Comments:** We have seen a large increase in the number of clients enrolled in the R/W Part-B program since Jan 2013. Part of this growth has come from the takeover of the Part-A insurance clients from Southern Nevada. R/W Part-A has taken over some programs that were funded by Part-B. These costs are estimated to be approximately \$500,000 - \$600,000 annually.

**Website:** <http://health.nv.gov/HIVCarePrevention.htm>

# Nevada Department of Health and Human Services, DPBH

## 6.11 HIV Prevention Program

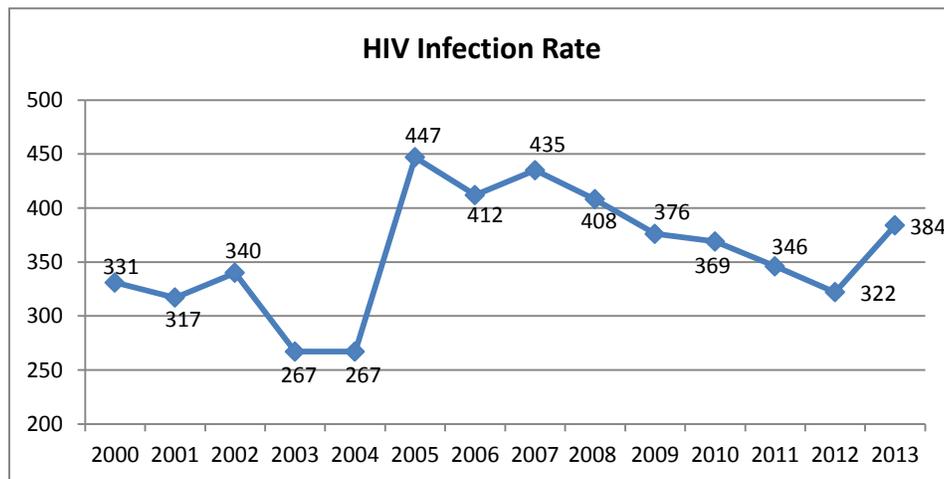
**Program:** The Human Immunodeficiency Virus (HIV) Prevention Program facilitates a process of jurisdictional HIV prevention planning. At present, the Division of Public and Behavioral Health funds Southern Nevada Health District (SNHD), Washoe County Health District (WCHD), and Carson City Health and Human Services (CCHHS) to provide CDC HIV prevention core services, such as HIV testing to high-risk populations, Partner Services, and to ensure condoms are available to populations most at-risk for HIV. Additionally, the HIV Prevention Program provides HIV testing supplies and condoms to the Community Health Nursing Program to support HIV testing in the rural areas of the state. The Division of Public and Behavioral Health's HIV Prevention also provides funding for social marketing campaigns, HIV prevention information dissemination, and data collection.

**Eligibility:** There are no eligibility requirements. It is our mandate to reduce HIV infections in Nevada, and this is accomplished by providing services to everyone. Some community based programs do require that participants meet criteria as outlined in the curriculum, i.e. target population or risk factors.

**Other:** Please note that the HIV Prevention Program is funded on a calendar year basis and therefore, data and expenditures for this report are reported on the calendar year, not fiscal year. The increase in new HIV infections can be directly attributed to new targeted HIV testing strategies, targeting those most at-risk for acquiring HIV.

### Workload History:

| Calendar Year | Total Cases | Total Funding |
|---------------|-------------|---------------|
| 2007          | 431         | \$2,823,112   |
| 2008          | 406         | \$2,713,662   |
| 2009          | 371         | \$2,713,662   |
| 2010          | 374         | \$2,713,662   |
| 2011          | 346         | \$2,713,662   |
| 2012          | 322         | \$2,426,284   |
| 2013          | 384         | \$2,294,816   |



# Nevada Department of Health and Human Services, DPBH

## 6.12 HIV-AIDS Surveillance Program

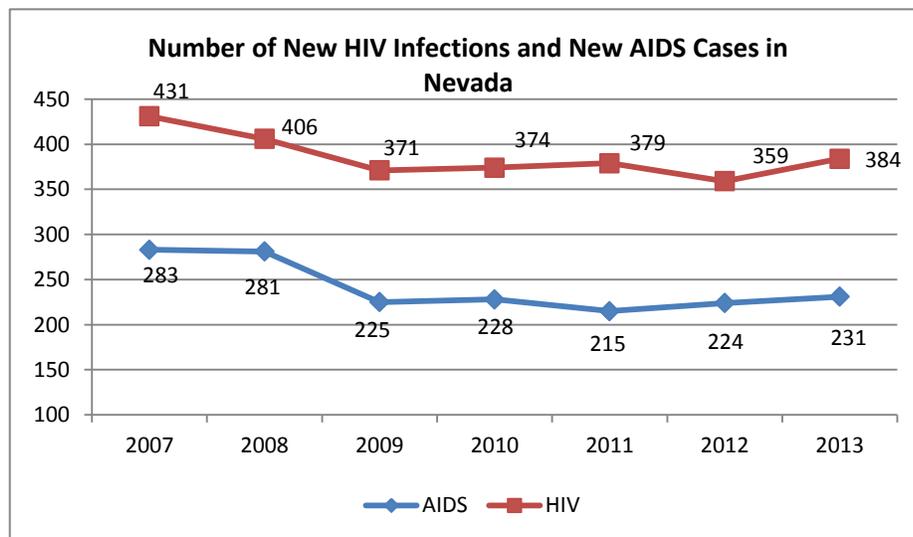
**Program:** The mission of the HIV-AIDS Surveillance Program is to work with the local health authorities and the medical community to prevent and control the transmission of Human Immunodeficiency Virus (HIV) and the development of an annual integrated HIV/AIDS epidemiological profile; the dissemination of HIV/AIDS data to HIV community planning groups and other agencies and the public to help target HIV prevention activities; and training and technical assistance to local health authorities and community-based organizations that assist in HIV/AIDS surveillance activities. The Program's functions are achieved through collaborative relationships with public and community-based organizations, local health authorities, clinical laboratories, community members, and other key stakeholders.

**Eligibility:** There are no eligibility requirements. The State HIV/AIDS Program tracks all new HIV/AIDS cases reported and persons living with HIV/AIDS including cases from other states and jurisdictions who move to Nevada. Incidence (new cases) and prevalence (old and new cases) are reported separately. Statutory authority – NRS 441A and NRS 439.

**Other:** Primary workload indicators for federal funding include the number of new HIV and AIDS cases reported annually and the number of persons living with HIV/AIDS in Nevada (prevalence data). Demographic information of HIV/AIDS cases (county, sex, race/ethnicity, age, exposure category) is reported to track disease trends and to provide information to community planning groups to better allocate local resources and to target HIV/AIDS prevention activities.

### Workload History:

| Calendar Year | Average HIV Monthly Caseload | Average AIDS Monthly Caseload |
|---------------|------------------------------|-------------------------------|
| 2011          | 29                           | 18                            |
| 2012          | 30                           | 18                            |
| 2013          | 32                           | 19                            |



**Comment:** Though it is difficult to accurately identify the reasons for a decrease in reported HIV/AIDS it is likely a result of: 1. Reporting delays (an increase in reported cases will likely occur as time progresses), 2. Intra-state deduplication of reported HIV/AIDS cases (in December 2008, Nevada moved to a new HIV/AIDS database - eHARS - which has allowed the state and local jurisdictions to immediately fix intra-state duplicate case reports), and 3. Inter-state deduplication (the CDC provides each state with potential duplicate case reports between states and each must fix that duplication, this may result in decreased cases in Nevada).

**Website:** [http://health.nv.gov/HIV\\_AIDS\\_SurveillancePgm.htm](http://health.nv.gov/HIV_AIDS_SurveillancePgm.htm)

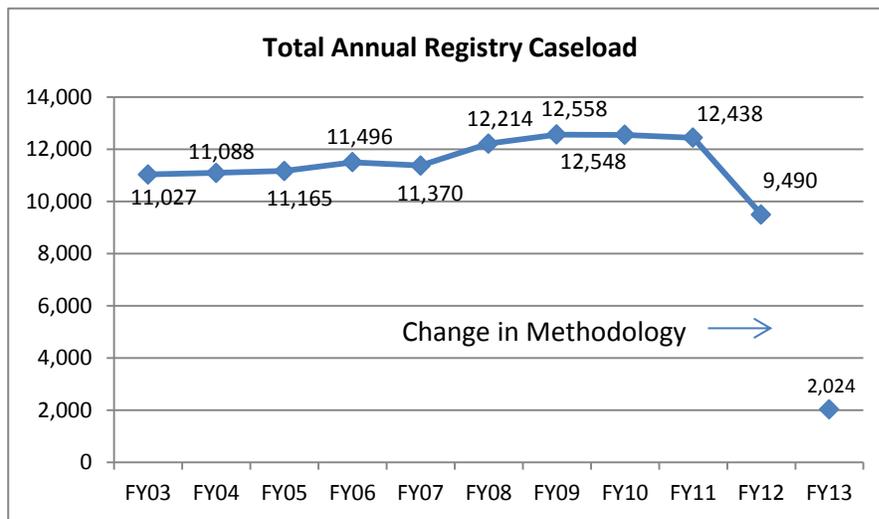
# Nevada Department of Health and Human Services, DPBH

## 6.13 Nevada Central Cancer Registry

**Program:** The primary purpose of the Statewide Cancer Registry is to collect and maintain a record of reportable cases of cancer occurring in the state. The data is used to evaluate the appropriateness of measures for the prevention and control of cancer and to conduct comprehensive epidemiological surveys of cancer and cancer related deaths. Statutory Authority: NRS 457.

**Eligibility:** This is a population-based Registry collecting data for all cancer cases diagnosed in Nevada.

**Other:** The figures in this report reflect actual cancer incidence data submitted annually to the Centers for Disease Control and Prevention/National Program of Cancer Registries. Cases collected and reported include all in-situ and invasive cancer.



**Comments:** With the April 2013 report the NCCR changed its methodology to better and more accurately report data. Previous Month FYTD is no longer reported because it was based solely on hospital billings and not actual case reporting, which typically occurs two years after diagnosis. These changes match the criteria now used by both the CDC's National Program of Cancer Registry (NPCR) and North American Association of Central Cancer Registry (NAACCR). The NCCR is also in the process of transitioning to a new registry database and while new cases are being entered, priority is given to current data being cleaned up and readied for the transition which is expected to occur after the annual Call for Data submission, which is in Nov 2013. The NCCR met and exceeded all of the NPCR and NAACCR standards by achieving and maintaining a minimum of 95 percent complete case ascertainment annually through FY 12 (with the exception of FY 09). The NCCR has received NAACCR's Gold Standard certification for 9 of the past 11 consecutive reporting years and based on the quality and completeness of data, the NCCR data is included in the U.S. Cancer Statistics (USCS) and Cancer in North America (CINA).

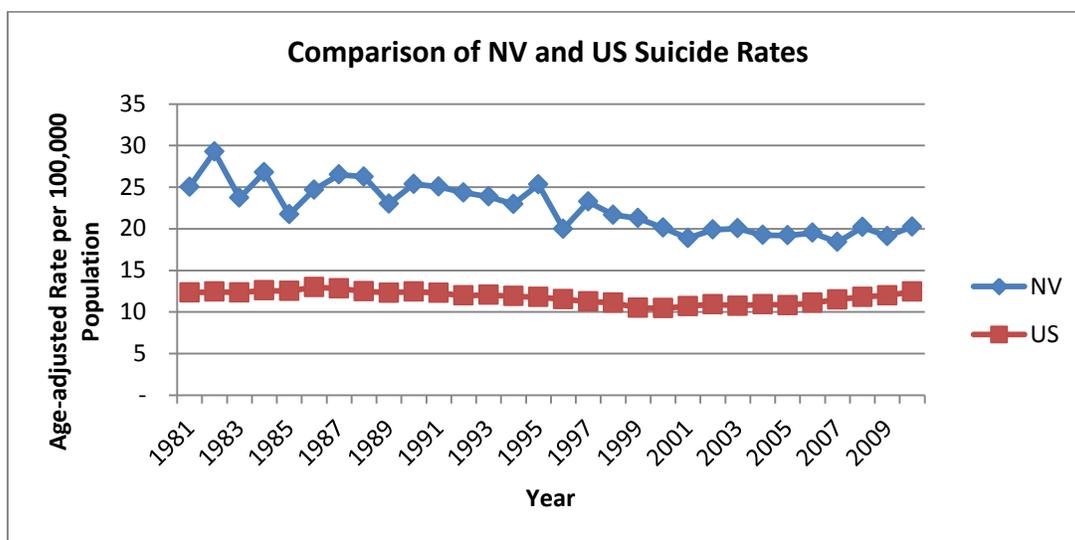
**Website:** [http://health.nv.gov/VS\\_NVcancerRegistry.htm](http://health.nv.gov/VS_NVcancerRegistry.htm)

# Nevada Department of Health and Human Services, DPBH

## 6.14 Office of Suicide Prevention

### Program

The Office of Suicide Prevention is the clearinghouse for suicide and suicide prevention information for State of Nevada. The Suicide Prevention Coordinator and the Suicide Prevention Training and Outreach Facilitator, located in Reno, and the Suicide Prevention Training and Outreach Facilitator and Youth Suicide Prevention Program Assistant, located in Las Vegas, are responsible for the development, implementation and evaluation of the Nevada Suicide Prevention Plan (NSPP to be updated FY 2014). The NSPP is a comprehensive plan that encompasses the lifespan. A major initiative will follow up on the Veterans' Suicide Mortality Report and collaboration with the Veterans Services Green Zone Initiative to prevent suicide among service members, veterans and their families. Collaboration for suicide prevention is occurring in all regions of the state with strong partnership from local coalitions, school districts and the Nevada Coalition for Suicide Prevention. Some of our most successful initiatives with our partners have been with behavioral health screening in Clark, Washoe, and Lyon counties, text messaging crisis intervention, safe TALK and Applied Suicide Intervention Skills trainings. OSP is establishing Nevada's first Committee to Review Suicide Fatalities. OSP is also making great strides toward increasing awareness about reducing access to lethal means through the Suicide-Proof Your Home, Lok It UP and The 11 Commandments of Gun Safety.



### Comments/Facts about Suicide:

- Nevada has an age-adjusted suicide rate of 18.3/100,000 for 2006-2012. \*\*
- The rate for the United States for 2006-2012 is 11.4/100,000.\*
- Suicide is the 7<sup>th</sup> leading cause of death for Nevadans and 10<sup>th</sup> leading cause of death for the US.\*\*
- Suicide is the 2<sup>nd</sup> leading cause of death for our youth age 15-34.\*
- Males make up 78 percent of suicide deaths in the U.S., 77 percent in Nevada.\*\*
- Nevada has the highest suicide rate for seniors over 65 in the nation, more than double the national average rate for the same age group.\*
- More Nevadans die by suicide than by homicide, HIV/AIDS or automobile accidents.\*/\*\*
- Native American youth have a high rate of suicide.\*
- 73 percent of Nevada's firearm fatalities are suicides. Firearms are used in 53% of Nevada suicides.\*
- Average medical cost per suicide completion in Nevada: \$3,577.\*\*\*
- Average work-loss cost per case: \$1,140,793.\*\*\*

\*Source: Center for Disease Control, Web-based Injury Statistics Query and Reporting System

\*\*Source: Nevada Suicide Infographic 2006-2012 (released December 2013).

\*\*\*Source: Suicide Prevention Resource Center, State of Nevada Fact Sheet Online, 2006. Methodology for costs at [www.sprc.org](http://www.sprc.org), State Fact Sheets

**Website:** <http://dhhs.nv.gov/SuicidePrevention.htm>

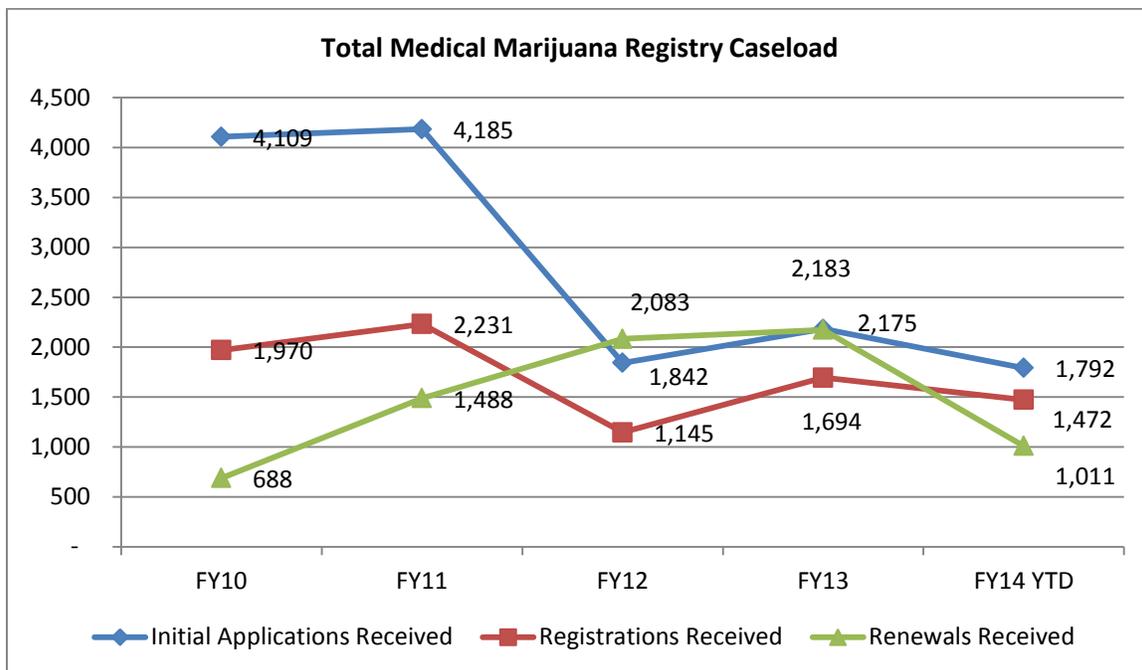
# Nevada Department of Health and Human Services, DPBH

## 6.15 Medical Marijuana Registry

**Program:** The Nevada Marijuana Health Registry is a state registry program within the Nevada Department of Health and Human Services, Division of Public and Behavioral Health. The role of the program is to administer the provisions of the Medical Use of Marijuana law as approved by the Nevada Legislature and adopted in 2001.

**Authority:** Individuals can apply for the registry and, if found eligible, are approved for issue of an identification card to show approval, within limitations, for the cultivation and use of the Cannabis plant for personal use. Eligibility is determined through physician certification of a qualifying medical condition, acceptable criminal background check, and Nevada residency. (NRS 453A)

| Year     | Initial Applications Received | Registrations Received | Renewals Received |
|----------|-------------------------------|------------------------|-------------------|
| FY10     | 4,109                         | 1,970                  | 688               |
| FY11     | 4,185                         | 2,231                  | 1,488             |
| FY12     | 1,842                         | 1,145                  | 2,083             |
| FY13     | 2,183                         | 1,694                  | 2,175             |
| FY14 YTD | 1,792                         | 1,472                  | 1,011             |



Note: The reported data starts in FY10 as no reliable data for FY09 was available.

**Definitions:**

**Initial applications:** Patient submits a request for an application with the required \$50.00 fee.

**Registrations:** Patient submits completed application including attending physician statement and \$150.00 application fee.

**Renewals:** Patients that are registered are required to renew their enrollment each year and pay a \$150.00 renewal fee.

**Website:** <http://health.nv.gov/medicalmarijuana.htm>

# Nevada Department of Health and Human Services, DPBH

## 6.16 Substance Abuse Prevention and Treatment Agency (SAPTA)

**Program:** The Substance Abuse Prevention and Treatment Agency (SAPTA) provides funding via a competitive process to non-profit and governmental organizations throughout Nevada. It does not provide direct substance abuse prevention or treatment services. The Agency plans and coordinates statewide substance abuse service delivery and provides technical assistance to programs and other state agencies to ensure that resources are used in a manner which best serves the citizens of Nevada.

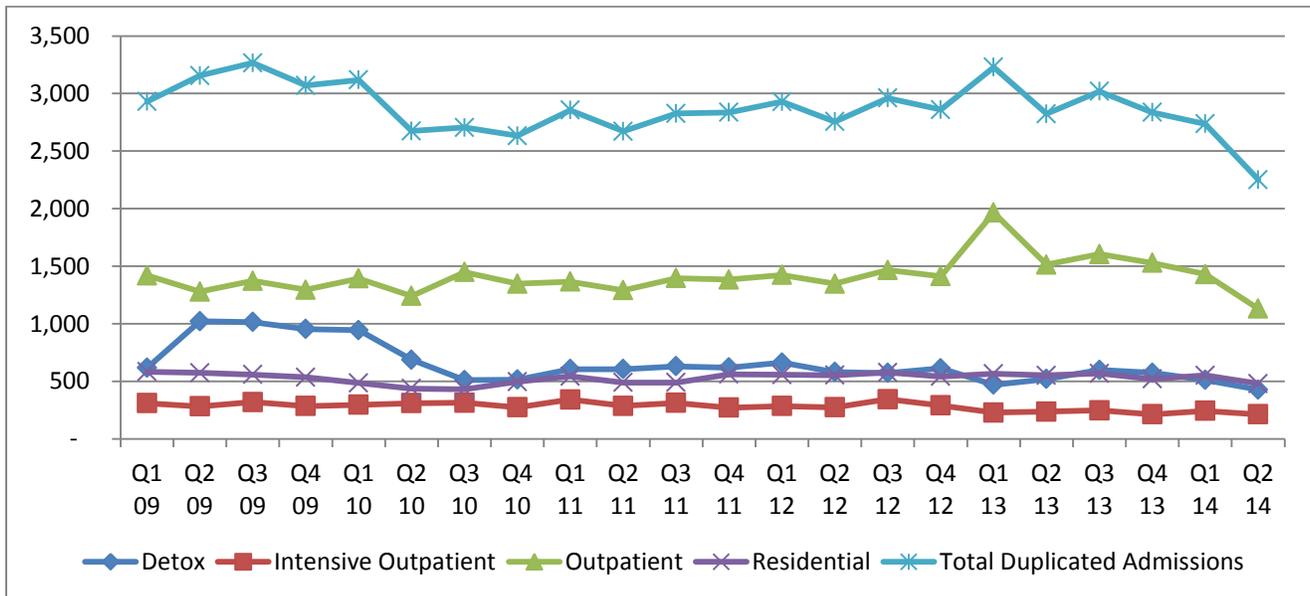
**Eligibility:** All funded programs must not discriminate based on ability to pay, race/ethnicity, gender or disability. Additionally, programs are required to provide services utilizing a sliding fee scale that must meet minimum standards.

**Other:** SAPTA is the designated Single State Agency for the purpose of applying for and expending the federal Substance Abuse Prevention and Treatment Block Grant (SAPTBG) issued through the Substance Abuse and Mental Health Services Administration (SAMHSA).

### Treatment History:

|                    | FY08         | FY09         | FY10         | FY11         | FY12         | FY13         | FY14 Q2     |
|--------------------|--------------|--------------|--------------|--------------|--------------|--------------|-------------|
| Admissions         | 12,444       | 13,378       | 11,131       | 11,190       | 11,503       | 11,907       | 4,988       |
| Total Expenditures | \$15,860,000 | \$17,410,000 | \$16,222,000 | \$17,282,217 | \$16,948,678 | \$15,237,284 | \$8,651,929 |

The expenditures include payments to providers for the following services: Treatment (adult and adolescent), HIV, TB, Women's Set-Aside, Co-occurring, and Liquor Tax.



**Comments:** Detoxification admissions peaked in SFY 2009 due primarily to a service provider who reported triage services and detoxification services interchangeably. Technical assistance was afforded to the provider after the problem was identified. As a result, detoxification admission and total admission numbers declined. Outpatient admissions peaked in Q1 SFY13 due to Nevada Treatment Center closing and discharging clients into Adelson Clinic. Also, new business practices involving Co - occurring disorders and encounter based reimbursement inflated admissions in Q1 SFY13. A large drop in admissions occurred in Q2 SFY14 due to budget cuts and programmatic changes.

**Website:** [http://mhds.nv.gov/index.php?option=com\\_content&view=article&id=61&Itemid=73](http://mhds.nv.gov/index.php?option=com_content&view=article&id=61&Itemid=73)

# Nevada Department of Health and Human Services, DPBH

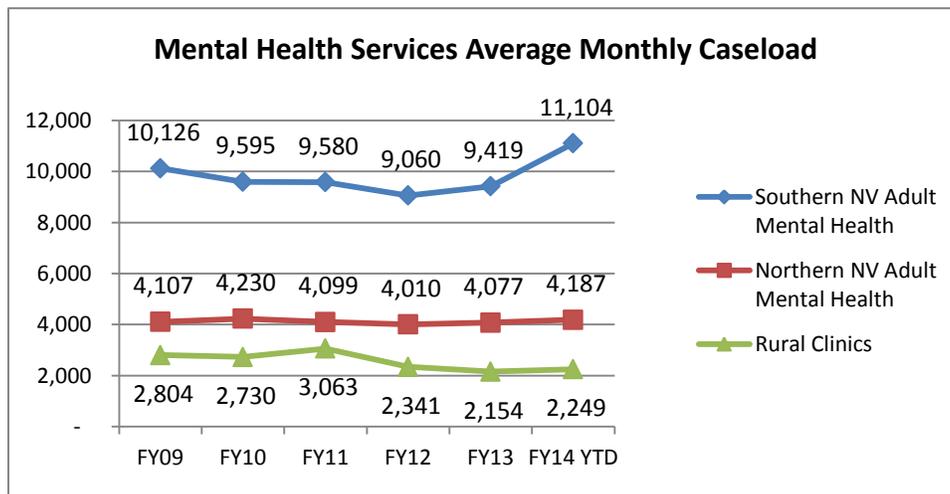
## 6.17 Mental Health Services

**Program:** Key programs at both Southern and Northern Nevada Adult Mental Health Services includes: Inpatient Services, Observation Unit, Outpatient Counseling, Service Coordination, Medication Clinic, Psychosocial Rehabilitation, Residential Programs, Psychiatric Emergency Services, Mental Health Court, Senior Outreach, Mobile Crisis, Programs for Assertive Community Treatment (PACT), Outpatient Co-Occurring Treatment and Consumer Programs. Rural Clinics Provides most of the same services, not including Inpatient or Observation services. Rural Clinics services are available in most counties throughout Nevada.

**Eligibility:** Inpatient services are primarily offered to stabilize individuals who are acutely ill and are a danger to self and or others per NRS. Consumers with Severe Mental Illness (SMI) are given priority for Outpatient services by all three mental health agencies. All agencies serve primarily indigent clients. All clients are required to provide financial information to establish eligibility. Clients may be required to pay a portion of the cost of their services based upon income.

**FYTD:**

| Month               | Southern NV Adult Mental Health | Northern NV Adult Mental Health | Rural Clinics | State Total    |
|---------------------|---------------------------------|---------------------------------|---------------|----------------|
| Jul 13              | 10,453                          | 4,155                           | 2,194         | 16,802         |
| Aug                 | 10,846                          | 4,099                           | 2,189         | 17,134         |
| Sep                 | 10,957                          | 4,165                           | 2,246         | 17,368         |
| Oct                 | 11,273                          | 4,186                           | 2,281         | 17,740         |
| Nov                 | 11,406                          | 4,225                           | 2,271         | 17,902         |
| Dec                 | 11,687                          | 4,289                           | 2,311         | 18,287         |
| Jan 13              |                                 |                                 |               |                |
| Feb                 |                                 |                                 |               |                |
| Mar                 |                                 |                                 |               |                |
| Apr                 |                                 |                                 |               |                |
| May                 |                                 |                                 |               |                |
| Jun                 |                                 |                                 |               |                |
| <b>FY14 Total</b>   | <b>66,622</b>                   | <b>25,119</b>                   | <b>13,492</b> | <b>105,233</b> |
| <b>FY14 Average</b> | <b>11,104</b>                   | <b>4,187</b>                    | <b>2,249</b>  | <b>17,539</b>  |



**Comments:** Despite the reduction in resources, the number of people receiving services has been maintained by reorganizing some processes to increase efficiency. This report indicates the unduplicated count of individuals served by the agency. Some individuals receive multiple services; however they would be counted only once.

**Website:** [http://mhds.nv.gov/index.php?option=com\\_contentandview=articleandid=2:mental-healthandcatid=9:mental-health](http://mhds.nv.gov/index.php?option=com_contentandview=articleandid=2:mental-healthandcatid=9:mental-health)

# Nevada Department of Health and Human Services, DPBH

## 6.18 Lake's Crossing Center (LCC)

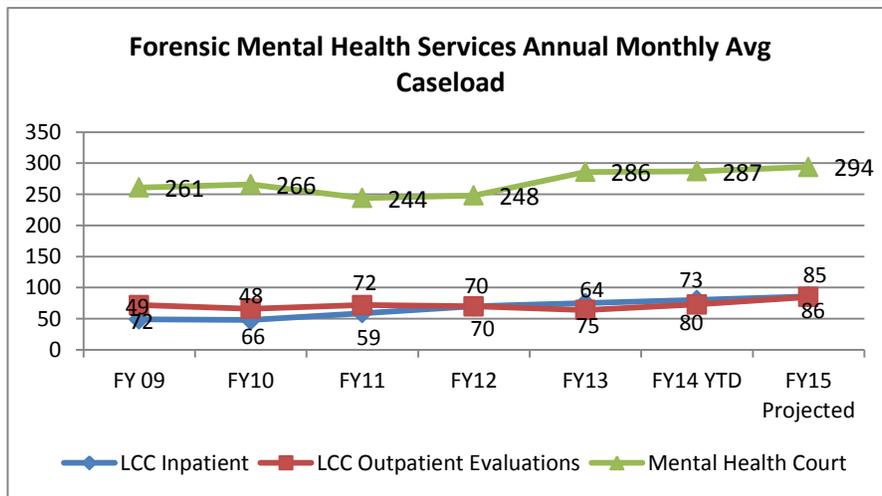
**Program:** Lake's Crossing Center (LCC) is the only forensic mental health facility serving clients in the state of Nevada. The program provides treatment for severe mental illness and other disabling conditions that interfere with a person's ability to proceed with their adjudication or return to the community after having been found not guilty by reason of insanity/incompetent without probability of attaining competence. The program provides a broad spectrum of treatment interventions.

Mental Health Court is a collaboration between the Mental Health and Criminal Justice systems. This program provides opportunity for people with misdemeanor and minor felony criminal charges who would benefit from psychiatric treatment to be diverted from the standard criminal justice system if they participate in treatment. It is a service coordination model.

**Eligibility:** Clients are admitted to the inpatient program, Lakes Crossing Center, primarily by court order after a pre-commitment examiner has found them incompetent to stand trial and recommended treatment to competency. Occasionally a client without charges is administratively transferred to this program because they cannot be treated elsewhere. Clients are admitted to Mental Health Court services by criminal justice courts.

### Workload History:

| Month        | Statewide Forensic Caseload | LCC In-Patient | LCC Out-Patient Evaluations | Mental Health Court |
|--------------|-----------------------------|----------------|-----------------------------|---------------------|
| Jul 13       | 450                         | 79             | 70                          | 301                 |
| Aug          | 448                         | 78             | 84                          | 286                 |
| Sep          | 450                         | 83             | 85                          | 282                 |
| Oct          | 444                         | 80             | 84                          | 280                 |
| Nov          | 419                         | 73             | 62                          | 284                 |
| Dec          | 424                         | 84             | 52                          | 288                 |
| Jan 14       |                             |                |                             |                     |
| Feb          |                             |                |                             |                     |
| Mar          |                             |                |                             |                     |
| Apr          |                             |                |                             |                     |
| May          |                             |                |                             |                     |
| Jun          |                             |                |                             |                     |
| FY14 Total   | 2,635                       | 477            | 437                         | 1,721               |
| FY14 Average | 439                         | 80             | 73                          | 287                 |



**Comments:** The format for this report is new starting with this quarter as a test to incorporate all forensic clients from Lakes Crossing Center Inpatient and Evaluation Programs, and Outpatient Mental Health Court services provided through SNAMHS, NNAMHS, and Rural MHS.

**Website:** <http://mhds.state.nv.us/>

# Nevada Department of Health and Human Services, Public Defender

## 7.01 Public Defender

**Program:** Representation of indigent adults and juveniles charged with a criminal offense or delinquent acts in a participating county and AG prosecuted criminal matters in those counties. The office also represents parents whose children have been removed from the home by DCFS.

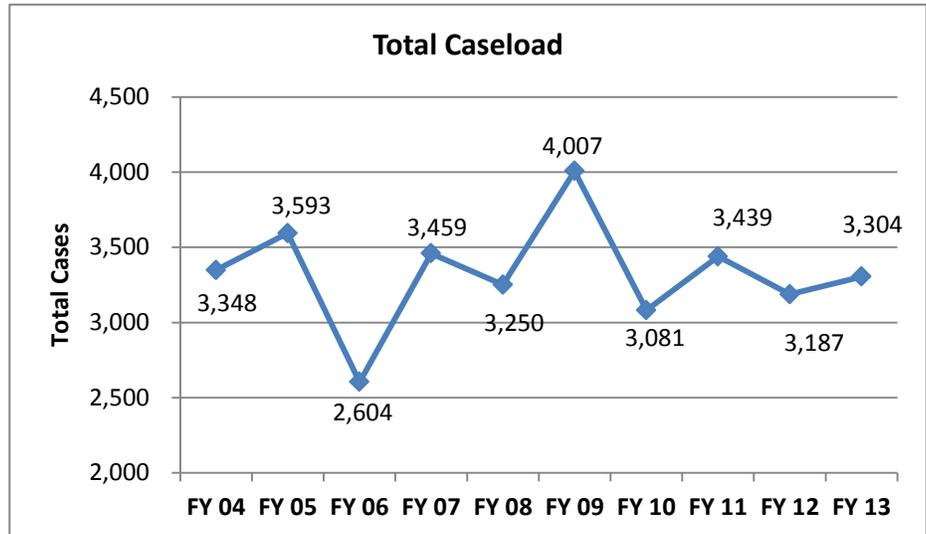
**Eligibility:** The court determines eligibility considering income, expenses, personal property, and outstanding debt. The potential client must be at risk of receiving a sentence of confinement. If the defendant does not have the liquid assets to retain private counsel for the specific type of case, the court will consider appointing the public defender. The defendant may be required to reimburse the county for the services of the public defender.

### Workload History:

| Fiscal Year | Cases |
|-------------|-------|
| FY07        | 3,459 |
| FY08        | 3,259 |
| FY09        | 4,007 |
| FY10        | 3,081 |
| FY11        | 3,439 |
| FY12        | 3,187 |
| FY13        | 3,304 |

### Caseload Fiscal Year 13:

|                    |              |
|--------------------|--------------|
| Carson City        | 2,592        |
| Eureka             | 38           |
| Storey             | 106          |
| White Pine         | 498          |
| State              | 70           |
| Appellate          | N/A          |
| <b>Total FY 12</b> | <b>3,304</b> |



**Comments:** The trend in FY11 shows an increase in arrests and prosecutions in the 5 rural counties serviced by the State Public Defender. FY12 does not include Lincoln County, which withdrew from the State Public Defender system. Also, beginning in FY12 cases are counted as directed by the Supreme Court. This will result in a lower number of cases. However, that has not materialized in 2013.

**Website:** <http://dhhs.nv.gov/PublicDefender.htm>

Page intentionally left blank.

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

NOTE: The data in this document comes from many sources. For the sake of consistency, a uniform ordinal ranking system has been adopted, with 1 indicating the best ranking and 50 indicating the worst. Where relevant, the final column of each table contains an icon to indicate how the ranking has changed from the previous year: improvement (▲), worsening (▼), or no change (=).

## Population/Demographics

- Nevada's July 1, 2012 estimated **population** is 2,758,931. (*U.S. Census Population Estimates*)
  - By Gender: Males 50.4 percent, Females 49.6 percent. (*U.S. Census, American Community Survey*)
  - By County: Clark 72 percent, Washoe 16 percent, Carson City 2 percent, and Balance-of-State 10 percent. (*Nevada State Demographer, Estimates by County*)
- Population growth** - From 2011 to 2012 Nevada is the 6<sup>th</sup> fastest growing state. From 2010 to 2011 it was the 30<sup>th</sup> fastest growing state. It had been among the top four fastest growing states for each year from 1984-2007. (*U.S. Census*)
- Age distribution** - Nevada's population distribution varies slightly compared to the U.S. average. (*U.S. Census*)

| Population by Age | Under 5 years | 5 to 17 years | 18 to 24 years | 25 to 34 years | 35 to 44 years | 45 to 54 years | 55 to 64 years | 65 to 74 years | 75 years and over |
|-------------------|---------------|---------------|----------------|----------------|----------------|----------------|----------------|----------------|-------------------|
| Nevada            | 7%            | 18%           | 9%             | 14%            | 14%            | 14%            | 12%            | 8%             | 5%                |
| United States     | 6%            | 17%           | 10%            | 13%            | 13%            | 14%            | 12%            | 8%             | 6%                |

- Growth in **school enrollment** varies across Nevada's counties. The major mining counties are adding students while other rural and commuter counties are losing students. Charter school enrollment has high growth again for the last school year with a significant boost from virtual schooling and this explains some of the student loss in traditional school districts. (*Nevada Department of Education*)

| Enrollment by School District | 2009-10 School Year |           | 2010-11 School Year |           | 2011-12 School Year |           | 2012-13 School Year |           | 2013-14 School Year |           |
|-------------------------------|---------------------|-----------|---------------------|-----------|---------------------|-----------|---------------------|-----------|---------------------|-----------|
|                               | # of students       | % change  |
| Carson City                   | 7,834               | -2%       | 7,791               | -1%       | 7,888               | 1%        | 7,628               | -3%       | 7,525               | -1%       |
| Churchill                     | 4,206               | -3%       | 4,169               | -1%       | 4,048               | -3%       | 3,740               | -8%       | 3,675               | -2%       |
| Clark                         | 313,558             | 1%        | 314,023             | 0%        | 306,300             | -2%       | 311,238             | 2%        | 314,643             | 1%        |
| Douglas                       | 6,517               | 0%        | 6,342               | -3%       | 6,292               | -1%       | 6,124               | -3%       | 6,121               | 0%        |
| Elko                          | 9,474               | -2%       | 9,556               | 1%        | 9,744               | 2%        | 9,926               | 2%        | 9,945               | 0%        |
| Esmeralda                     | 69                  | 1%        | 66                  | -4%       | 67                  | 2%        | 67                  | 0%        | 78                  | 16%       |
| Eureka                        | 260                 | 7%        | 239                 | -8%       | 255                 | 7%        | 271                 | 6%        | 246                 | -9%       |
| Humboldt                      | 3,406               | 2%        | 3,379               | -1%       | 3,434               | 2%        | 3,501               | 2%        | 3,517               | 0%        |
| Lander                        | 1,140               | -4%       | 1,118               | -2%       | 1,111               | -1%       | 1,094               | -2%       | 1,121               | 2%        |
| Lincoln                       | 1,005               | 1%        | 972                 | -3%       | 994                 | 2%        | 977                 | -2%       | 973                 | 0%        |
| Lyon                          | 8,768               | -2%       | 8,500               | -3%       | 8,458               | 0%        | 8,076               | -5%       | 8,104               | 0%        |
| Mineral                       | 571                 | -1%       | 517                 | -9%       | 550                 | 6%        | 499                 | -9%       | 459                 | -8%       |
| Nye                           | 6,167               | -3%       | 5,932               | -4%       | 5,678               | -4%       | 5,384               | -5%       | 5,214               | -3%       |
| Pershing                      | 719                 | 1%        | 679                 | -6%       | 690                 | 2%        | 708                 | 3%        | 710                 | 0%        |
| Storey                        | 447                 | 3%        | 426                 | -5%       | 422                 | -1%       | 415                 | -2%       | 398                 | -4%       |
| Washoe                        | 64,844              | 2%        | 64,755              | 0%        | 66,721              | 3%        | 62,424              | -6%       | 62,986              | 1%        |
| White Pine                    | 1,442               | 1%        | 1,425               | -1%       | 1,474               | 3%        | 1,420               | -4%       | 1,334               | -6%       |
| Charter Schools               | 6,017               | -39%      | 7,555               | 26%       | 16,176              | 114%      | 22,245              | 38%       | 24,756              | 11%       |
| <b>Total</b>                  | <b>436,444</b>      | <b>0%</b> | <b>437,444</b>      | <b>0%</b> | <b>440,302</b>      | <b>1%</b> | <b>445,737</b>      | <b>1%</b> | <b>451,805</b>      | <b>1%</b> |

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

- Nevada's **racial mix** differs from the U.S. average. (*U.S. Census*)

| Population by Race | White, not Hispanic Origin | Hispanic or Latino | African American | Asian or Pacific Islander | Native American | Other/Mixed |
|--------------------|----------------------------|--------------------|------------------|---------------------------|-----------------|-------------|
| Nevada             | 53%                        | 27%                | 8%               | 8%                        | 1%              | 3%          |
| United States      | 63%                        | 17%                | 12%              | 5%                        | 1%              | 2%          |

- Nevada's **minority population** as a share of total population exceeds the U.S. average. (*U.S. Census, American Community Survey*)

| Minority Population |   | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |
|---------------------|---|------|------|------|------|------|------|------|------|------|------|
| Nevada              | % | 37%  | 39%  | 40%  | 41%  | 42%  | 43%  | 44%  | 46%  | 47%  | 47%  |
| United States       | % | 32%  | 33%  | 33%  | 34%  | 34%  | 34%  | 35%  | 36%  | 37%  | 37%  |

## Economy

- In 2012, Nevada's **personal income per capita** was \$38,221 ranking 37<sup>th</sup> among states (34<sup>th</sup> in 2011). The per capita income for the U.S. as a whole was \$43,735. The U.S. average is 14 percent higher than Nevada (12 percent in 2011). From 2003 thru 2007 Nevada's **personal income per capita** exceeded the U.S. average due to our outsized housing boom. (*U.S. Bureau of Economic Analysis*)
- The Kaiser Family Foundation measures **state economic distress** by taking into account the number of foreclosures, the change in the unemployment rate, and the change in the number of people receiving food stamps. Nevada's current ranking in January 2013 is 29<sup>th</sup>. Nevada is now 2<sup>nd</sup> highest in foreclosure rate after leading the nation for many years. Nevada ranked 1<sup>st</sup> in the largest drop in unemployment rate among all 50 states. Even though Nevada ranked high in the **unemployment rate change**, Nevada still has the highest **unemployment rate level** in the country. Nevada ranked 28<sup>th</sup> in change in food stamp participation as this measure has leveled off in the state. (*Kaiser Family Foundation, State Health Facts*)
- In November 2013, Nevada's **foreclosure rate** has improved in the second half of 2013, with 1 of every 859 homes currently under foreclosure This 43<sup>rd</sup> in the nation. Florida was the worst state with 1 of every 392 homes in foreclosure. The U.S. average was 1 of every 1155 homes. Nevada has consistently ranked near the bottom since the housing crisis began. (*RealtyTrac*)
- Nevada's 6 month average **unemployment rate** is the highest in the nation. (*U.S. Bureau of Labor Statistics*)

| Unemployment Rate |      | Jun-13 | Jul-13 | Aug-13 | Sep-13 | Oct-13 | Nov-13 | 6 Month Average |
|-------------------|------|--------|--------|--------|--------|--------|--------|-----------------|
| Nevada            | %    | 9.6%   | 9.5%   | 9.5%   | 9.4%   | 9.3%   | 9.0%   | 9.4%            |
|                   | Rank | 50     | 50     | 50     | 50     | 50     | 50     | 50              |
| United States     | %    | 7.5%   | 7.3%   | 7.2%   | 7.2%   | 7.2%   | 7.0%   | 7.2%            |

- Nevada's 2012 **average unemployment rate** decreased considerably from 2011, but remained significantly above the national rate. (*U.S. Bureau of Labor Statistics*)

| Unemployment Rate |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009  | 2010  | 2011  | 2012  |   |
|-------------------|------|------|------|------|------|------|------|-------|-------|-------|-------|---|
| Nevada            | %    | 5.2% | 4.4% | 4.5% | 4.3% | 4.7% | 6.7% | 11.7% | 14.0% | 13.5% | 11.1% |   |
|                   | Rank | 16   | 12   | 18   | 23   | 35   | 45   | 48    | 50    | 50    | 50    | = |
| United States     | %    | 6.0% | 5.5% | 5.1% | 4.6% | 4.6% | 5.8% | 9.3%  | 9.6%  | 8.9%  | 8.1%  |   |

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

- Nevada's **Labor Force Participation Rate (LFPR)** has fallen since the recession began. The national LFPR has also fallen. (*U.S. Bureau of Labor Statistics*)

| Labor Force Participation Rate |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|--------------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                         | %    | 68.3 | 67.2 | 67.5 | 67.8 | 67.4 | 68.3 | 68.5 | 67.5 | 66.4 | 64.7 |   |
|                                | Rank | 18   | 22   | 21   | 20   | 22   | 17   | 17   | 17   | 18   | 24   | ▼ |
| United States                  | %    | 66.2 | 66.0 | 66.0 | 66.2 | 66.0 | 66.0 | 65.4 | 64.7 | 64.1 | 63.7 |   |

## Poverty

- The 2013 US Department of Health and Human Services **poverty guideline** for one person at 100 percent of poverty is \$11,490 per year, and \$23,550 for a family of four. (*Federal Register, 78 FR 5182, January 24, 2013*)
- The share of Nevada's total **population living in poverty** (below 100 percent) matches the average for the U.S. (*U.S. Census, American Community Survey*)

| Total Poverty (100%) |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|----------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada               | %    | 11%  | 13%  | 11%  | 10%  | 11%  | 11%  | 12%  | 15%  | 16%  | 16%  |   |
|                      | Rank | 27   | 29   | 16   | 10   | 14   | 15   | 20   | 27   | 28   | 32   | ▼ |
| United States        | %    | 13%  | 13%  | 13%  | 13%  | 13%  | 13%  | 15%  | 15%  | 16%  | 16%  |   |

- The share of Nevada's **children living in poverty** (below 100 percent) is now worse than the national average. (*U.S. Census, American Community Survey*)

| Under Age 18 in Poverty (100%) |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|--------------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                         | %    | 15%  | 19%  | 15%  | 14%  | 15%  | 15%  | 15%  | 22%  | 22%  | 24%  |   |
|                                | Rank | 23   | 30   | 18   | 14   | 17   | 15   | 19   | 32   | 29   | 34   | ▼ |
| United States                  | %    | 18%  | 18%  | 19%  | 18%  | 18%  | 18%  | 19%  | 22%  | 22%  | 23%  |   |

- The share of Nevada's **female-headed households** with children, no husband, living in poverty (below 100 percent) is below the national average. (*U.S. Census, American Community Survey*)

| Female-Headed Households with Children Under 18, No Husband, in Poverty (100%) |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|--|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada   | %    | 27%  | 45%  | 32%  | 35%  | 34%  | 35%  | 44%  | 35%  | 32%  | 36%  |   |
|  | Rank | 4    | 28   | 2    | 7    | 7    | 7    | 14   | 11   | 7    | 14   | ▼ |
| United States  | %    | 36%  | 44%  | 44%  | 44%  | 44%  | 43%  | 46%  | 40%  | 41%  | 42%  |   |

- The share of **older Nevadans in poverty** (below 100 percent) is lower than the average for the U.S. (*U.S. Census, American Community Survey*)

| Age 65+ in Poverty (100%) |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|---------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                    | %    | 8%   | 6%   | 9%   | 7%   | 8%   | 8%   | 7%   | 8%   | 9%   | 8%   |   |
|                           | Rank | 15   | 4    | 23   | 6    | 7    | 10   | 9    | 16   | 31   | 22   | ▲ |
| United States             | %    | 10%  | 9%   | 10%  | 10%  | 10%  | 10%  | 10%  | 9%   | 9%   | 10%  |   |

- Poverty and gender** - A higher percentage of older women are impoverished than older men. The ratios have changed substantially with the latest survey. (*U.S. Census, American Community Survey*)

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

| Age 65+ in Poverty (100%) |           | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |
|---------------------------|-----------|------|------|------|------|------|------|------|------|------|------|
| Nevada                    | Females % | 9%   | 8%   | 10%  | 8%   | 9%   | 8%   | 9%   | 7%   | 11%  | 9%   |
|                           | Males %   | 7%   | 5%   | 7%   | 6%   | 6%   | 7%   | 6%   | 6%   | 7%   | 7%   |
| United States             | Females % | 12%  | 11%  | 12%  | 12%  | 12%  | 12%  | 12%  | 9%   | 11%  | 11%  |
|                           | Males %   | 7%   | 7%   | 7%   | 7%   | 7%   | 7%   | 7%   | 6%   | 7%   | 7%   |

- The definition of a **working poor family** is one with:
  - One or more children,
  - At least one member working or actively seeking work, and
  - Having a family income of 200 percent of poverty or less.
- The percentage of Nevada's families that are **working poor families** with children rose significantly in 2011. (*Kids Count*)

| Working Poor Families with Children |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008* | 2009 | 2010 | 2011 | 2012 |   |
|-------------------------------------|------|------|------|------|------|------|-------|------|------|------|------|---|
| Nevada                              | %    | 22%  | 20%  | 21%  | 18%  | 17%  | 20%   | 21%  | 21%  | 26%  | 26%  |   |
|                                     | Rank | 36   | 26   | 33   | 24   | 17   | 23    | 32   | 26   | 45   | 45   | = |
| United States                       | %    | 19%  | 19%  | 19%  | 18%  | 18%  | 20%   | 20%  | 21%  | 22%  | 22%  |   |

\* There was a change in data collection methodology significant enough to constitute a break in the trend. Comparison to previous years' estimates may be misleading.

## Children

- In 2012, Nevada had 664,422 **children under 18**, and 298,464 **families with related children less than 18 years**. (*U.S. Census, American Community Survey*)
- The share of Nevada's **population that is under age 18** has stayed steady in recent years. (*U.S. Census, American Community Survey*)

| Population Under Age 18 |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|-------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                  | %    | 26%  | 26%  | 25%  | 25%  | 26%  | 26%  | 26%  | 25%  | 24%  | 24%  |   |
|                         | Rank | 14   | 12   | 13   | 13   | 10   | 10   | 7    | 16   | 16   | 16   | = |
| United States           | %    | 25%  | 25%  | 25%  | 25%  | 25%  | 25%  | 24%  | 24%  | 24%  | 24%  |   |

- Nevada's share of children in families where **no parent has full-time, year-round employment** is higher than the national average. (*Kids Count*)

| Children in families where no parent has full-time, year-round employment |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008* | 2009 | 2010 | 2011 | 2012 |   |
|---|------|------|------|------|------|------|-------|------|------|------|------|---|
| Nevada  | %    | 30%  | 36%  | 31%  | 30%  | 32%  | 26%   | 34%  | 36%  | 34%  | 34%  |   |
|   | Rank | 17   | 36   | 16   | 14   | 20   | 17    | 42   | 41   | 34   | 37   | ▼ |
| United States   | %    | 33%  | 33%  | 34%  | 33%  | 33%  | 27%   | 31%  | 33%  | 32%  | 31%  |   |

\* There was a change in data collection methodology significant enough to constitute a break in the trend.

We therefore do not recommend that you make comparisons to previous years' estimates.

- Nevada's share of **children in families that are low-income** (income less than 200 percent of the federal poverty level) has increased significantly since the Great Recession began. (*Kids Count*)

| Children in Poverty (200%) |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|----------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                     | %    | 38%  | 45%  | 39%  | 38%  | 37%  | 39%  | 42%  | 46%  | 50%  | 51%  |   |
|                            | Rank | 28   | 36   | 28   | 23   | 22   | 26   | 26   | 32   | 41   | 41   | = |
| United States              | %    | 39%  | 40%  | 40%  | 40%  | 39%  | 40%  | 42%  | 42%  | 45%  | 45%  |   |

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

- Nevada's percent of children who live in **single parent families** exceeds the national average. (*Kids Count*)

| Children in Single Parent Families |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|------------------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                             | %    | 32%  | 31%  | 32%  | 34%  | 33%  | 33%  | 35%  | 36%  | 36%  | 39%  |   |
|                                    | Rank | 33   | 29   | 31   | 36   | 31   | 29   | 34   | 35   | 31   | 42   | ▼ |
| United States                      | %    | 31%  | 31%  | 32%  | 32%  | 32%  | 32%  | 34%  | 34%  | 35%  | 35%  |   |

- In 2012, 5.0 percent of Nevadans ages 5 to 17 had some **disability**, which is below the nationwide average of 5.3 percent. (*U.S. Census, American Community Survey*)
- The prevalence of different **types of disability** among Nevada's children is lower than the national average in some categories. (*U.S. Census, American Community Survey*)

| Population Aged 5 to 17, by Type of Disability |             | Vision or Hearing | Ambulatory | Mental | Self-Care |
|--|-------------|-------------------|------------|--------|-----------|
| Nevada   | # per 1,000 | 15                | 5          | 37     | 10        |
|  | Rank        | 32                | 13         | 17     | 28        |
| United States                                  | # per 1,000 | 14                | 6          | 40     | 10        |

## Child Welfare

- Fewer of Nevada's children suffer from **maltreatment** than the average across the U.S. (*U.S. Dept. of Health and Human Services, Administration for Children and Families, American Community Survey*)

| Total Child Maltreatment Victims |             | 2006     | 2007     | 2008  | 2009  | 2010  | 2011     | 2012     |   |
|----------------------------------|-------------|----------|----------|-------|-------|-------|----------|----------|---|
| Nevada                           | Total       | 5,345    | 5,417    | 4,877 | 4,708 | 4,947 | 5,355    | 5,724    |   |
|                                  | Rank        | 18 of 49 | 17 of 49 | 16    | 15    | 18    | 21 of 49 | 22 of 49 | ▼ |
|                                  | # Per 1,000 | 8.3      | 8.1      | 7.2   | 6.9   | 7.4   | 8.1      | 8.6      |   |
| United States                    | # Per 1,000 | 11.3     | 10.3     | 10.1  | 10.0  | 10.0  | 9.1      | 9.2      |   |

- Child maltreatment fatalities** in Nevada has bounced up and down recently. (*U.S. Dept. of Health and Human Services, Administration for Children and Families*)

| Child Maltreatment Fatalities |               | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|-------------------------------|---------------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                        | # per 100,000 | 0.5  | 0.3  | 2.8  | 2.2  | 3.2  | 2.6  | 4.3  | 2.2  | 2.9  | 2.7  |   |
|                               | Rank          | 4    | 4    | 42   | 34   | 39   | 35   | 47   | 33   | 41   | 37   | ▲ |
| States Reporting              |               | 48   | 48   | 50   | 48   | 49   | 49   | 47   | 50   | 49   | 47   |   |
| United States                 | # per 100,000 | 2.0  | 2.0  | 2.0  | 2.0  | 2.3  | 2.3  | 2.3  | 2.1  | 2.1  | 2.2  |   |

- Response Time in Hours** (the time between the receipt of a call alleging maltreatment and face-to-face contact with victim, or with another person who can provide information on the allegation). Nevada has consistently been much lower than the national average. (*U.S. Dept. of Health and Human Services, Administration for Children and Families*)

| Response Time in Hours |       | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|------------------------|-------|------|------|------|------|------|------|------|---|
| Nevada                 | Hours | 42   | 33   | 26   | 15   | 13   | 13   | 15   |   |
|                        | Rank  | 9    | 7    | 7    | 4    | 4    | 2    | 2    | = |
| States Reporting       |       | 34   | 30   | 35   | 38   | 36   | 33   | 34   |   |
| United States          | Hours | 84   | 80   | 79   | 69   | 78   | 71   | 69   |   |

- Of the children who received post-investigation services, the **average number of days to initiation of services** has improved for Nevada and is close to the national average. (*U.S. Dept. of Health and Human Services, Administration for Children and Families*)

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

| Average Number of Days to Initiation of Services |      | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|--|------|------|------|------|------|------|------|------|------|---|
| Nevada   | Days | 58   | 61   | 63   | 60   | 57   | 46   | 46   | 45   |   |
|  | Rank | 25   | 32   | 34   | 32   | 33   | 28   | 20   | 26   | ▼ |
| States Reporting                                 |      | 38   | 41   | 40   | 42   | 43   | 44   | 38   | 44   |   |
| United States                                    | Days | 46   | 43   | 40   | 41   | 40   | 41   | 48   | 47   |   |

- The **median** length of stay for children in **foster care** in Nevada has improved for the last three years. (*U.S. Dept. of Health and Human Services, Administration for Children and Families*)

| Foster Care Length of Stay in Months |        | 2006  | 2007  | 2008  | 2009  | 2010  | 2011  | 2012  |   |
|--------------------------------------|--------|-------|-------|-------|-------|-------|-------|-------|---|
| Nevada                               | Number | 4,612 | 5,008 | 5,021 | 4,794 | 4,820 | 4,654 | 4,765 |   |
|                                      | Months | 12.9  | 13.3  | 14.8  | 15.8  | 14.8  | 13.9  | 12.1  |   |
|                                      | Rank   | 20    | 19    | 24    | 34    | 30    | 31    | 20    | ▲ |
| United States                        | Months | 15.5  | 15.5  | 15.8  | 15.4  | 14.0  | 13.5  | 14.0  |   |

- Adoption** - In 2012 in Nevada, 766 children were adopted through public welfare agencies. 1,441 awaited adoption on September 30th. The ratio of adoptions to children waiting for adoptions improved significantly in 2012 over previous years for Nevada. (*U.S. Dept. of Health and Human Services, Administration for Children and Families*)

| Agency Adoptions |             | FFY03 | FFY04 | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 | FFY11 | FFY12 |   |
|------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---|
| Nevada           | # Adoptions | 298   | 287   | 380   | 446   | 459   | 470   | 525   | 644   | 821   | 766   |   |
|                  | # Waiting   | 1,309 | 1,573 | 1,701 | 1,786 | 1,936 | 2,200 | 2,098 | 2,093 | 1,968 | 1,441 |   |
|                  | Ratio       | 23%   | 18%   | 22%   | 25%   | 24%   | 21%   | 25%   | 31%   | 42%   | 53%   |   |
|                  | Rank        | 46    | 50    | 49    | 46    | 49    | 50    | 50    | 48    | 38    | 25    | ▲ |
| United States    | Ratio       | 38%   | 39%   | 40%   | 38%   | 40%   | 44%   | 50%   | 50%   | 49%   | 50%   |   |

- For Nevada children the **median length of stay** in care (in months) of all children discharged from foster care to a finalized adoption during the year has improved significantly. The length of stay is from the date of latest removal from the home to the date of discharge to adoption. (*U.S. Dept. of Health and Human Services, Administration for Children and Families*)

| Average Number of Months Until Adoption |        | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|---|--------|------|------|------|------|------|------|------|---|
| Nevada                                  | Months | 34   | 34   | 37   | 36   | 36   | 35   | 31   |   |
|   | Rank   | 39   | 39   | 46   | 46   | 44   | 46   | 37   | ▲ |
| United States                           | Months | 31   | 31   | 31   | 30   | 31   | 30   | 29   |   |

## Seniors

- Nevada's share of **population aged 65+** is smaller than the national average. (*U.S. Census, American Community Survey*)

| Population Age 65+ |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|--------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada             | %    | 11%  | 11%  | 11%  | 11%  | 11%  | 11%  | 12%  | 12%  | 12%  | 13%  |   |
|                    | Rank | 40   | 43   | 40   | 44   | 44   | 44   | 44   | 44   | 44   | 40   | ▲ |
| United States      | %    | 12%  | 12%  | 12%  | 12%  | 12%  | 12%  | 13%  | 13%  | 13%  | 14%  |   |

- Percent of people 65 years and over **below poverty level** in the past 12 months in Nevada is now less than the average for the 50 U.S. states. (*U.S. Census, American Community Survey*)

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

| Age 65+ in Poverty |      | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|--------------------|------|------|------|------|------|------|------|------|------|---|
| Nevada             | %    | 9%   | 7%   | 7%   | 9%   | 8%   | 8%   | 9%   | 9%   |   |
|                    | Rank | 23   | 6    | 6    | 21   | 9    | 16   | 18   | 22   | ▼ |
| United States      | %    | 10%  | 10%  | 9%   | 10%  | 9%   | 9%   | 9%   | 10%  |   |

- In 2012, approximately 36 percent of Nevadans aged 65+ have some **disability**, the same as nationwide. (*U.S. Census, American Community Survey*)
  - The prevalence of different **types of disability** among Nevada's seniors is above the national average for 4 of the 5 primary disabilities. (*U.S. Census, American Community Survey*)

| Population Age 65+, by Type of Disability |             | Vision or Hearing | Ambulatory | Mental | Self-Care | Go-Outside-Home |
|---|-------------|-------------------|------------|--------|-----------|-----------------|
| Nevada                                    | # per 1,000 | 212               | 231        | 93     | 87        | 158             |
|   | Rank        | 20                | 34         | 17     | 15        | 18              |
| United States                             | # per 1,000 | 211               | 233        | 78     | 69        | 139             |

- The **nursing facility residency rate** for elderly Nevadans is significantly lower than the national average. (*Centers for Disease Control and Prevention, National Center for Health Statistics*)

| Nursing Facility Residents |   | 2002  | 2003  | 2004  | 2005  | 2006  | 2007  | 2008  | 2009  | 2010  | 2011  |   |
|----------------------------|---|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---|
| Nevada                     | Residents                               | 4,182 | 4,308 | 4,294 | 4,399 | 4,664 | 4,724 | 4,724 | 4,699 | 4,735 | 4,717 |   |
|                            | Residents per 1,000 population aged 85+ | 204   | 195   | 179   | 171   | 168   | 158   | 146   | 145   | 160   | 133   |   |
|                            | Rank                                    | 5     | 6     | 5     | 5     | 6     | 6     | 6     | 6     | 6     | 5     | ▲ |
| United States              | Residents per 1,000 population aged 85+ | 318   | 308   | 297   | 282   | 271   | 259   | 251   | 249   | 251   | 244   |   |

## Disability

- In 2012, Nevada's non-institutionalized population was **disabled** at a very similar rate to U.S. average. (*U.S. Census, American Community Survey*)

| Disabled Population by Age |      | 5 to 17 years | 18 to 34 years | 35 to 64 years | 65 years & over |
|----------------------------|------|---------------|----------------|----------------|-----------------|
| Nevada                     | %    | 5%            | 4%             | 13%            | 36%             |
|                            | Rank | 21            | 23             | 27             | 29              |
| United States              | %    | 5%            | 4%             | 13%            | 37%             |

- The number of **disabled per 1,000 population** is increasing and is now equal in Nevada and the U.S. (*U.S. Census, American Community Survey*)

| Disabled Population |             | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|---------------------|-------------|------|------|------|------|------|---|
| Nevada              | # per 1,000 | 100  | 101  | 106  | 113  | 122  |   |
|                     | Rank        | 5    | 8    | 11   | 16   | 27   | ▼ |
| United States       | # per 1,000 | 121  | 120  | 119  | 121  | 122  |   |

- Nevada's **spending on developmental services** in 2011 fell below the national average. (*State of the States in Developmental Disabilities, 2011*)

| Developmental Services Spending per \$1,000 of Personal Income | Community/Family Services | Institutional Services | Total  |
|--|---------------------------|------------------------|--------|
| Nevada   | \$1.45                    | \$0.13                 | \$1.59 |
| United States  | \$3.81                    | \$0.66                 | \$4.47 |

- For 2011, **family support spending per participant** in Nevada was \$2,634. The national average was \$8,611. (*State of the States in Developmental Disabilities, 2011*)

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

- Nevada's **percent of disabled that are working** consistently remains higher than the national average. However, the total disabled working population has dropped significantly since the recession. (*U.S. Census, American Community Survey*)

| Employed Disabled |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|-------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada            | %    | 41%  | 34%  | 40%  | 40%  | 40%  | 43%  | 40%  | 38%  | 36%  | 36%  |   |
|                   | Rank | 22   | 34   | 23   | 21   | 20   | 19   | 17   | 18   | 18   | 21   | ▼ |
| United States     |      | 37%  | 36%  | 38%  | 37%  | 36%  | 39%  | 35%  | 33%  | 33%  | 33%  |   |

## Health

- Nevada's **overall ranking** from the Annie E. Casey Foundation's 10 infant, children and teen indicators stayed at 48<sup>th</sup> in 2013. (*Kids Count*)

| Kids Count Overall Rank |      | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|-------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                  | Rank | 34   | 32   | 36   | 33   | 36   | 39   | 36   | 40   | 48   | 48   | = |

- The percentage of Nevada's babies that are **low birth weight** (less than 5.5 lbs.) is approximately the same as the U.S. average. (*Kids Count*)

| Low Birth Weight Babies |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 |    |
|-------------------------|------|------|------|------|------|------|------|------|------|------|----|
| Nevada                  | %    | 8%   | 8%   | 8%   | 8%   | 8%   | 8%   | 8%   | 8%   | 8%   | 8% |
|                         | Rank | 26   | 22   | 27   | 25   | 25   | 22   | 23   | 23   | 29   | ▼  |
| United States           | %    | 8%   | 8%   | 8%   | 8%   | 8%   | 8%   | 8%   | 8%   | 8%   |    |

- Nevada's **infant mortality rate** (deaths of children less than 1 year of age per 1,000 live births) is at the national average. (*United Health Foundation, America's Health Rankings*)

| Infant Mortality |             | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|------------------|-------------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada           | # per 1,000 | 6    | 6    | 6    | 6    | 6    | 6    | 6    | 6    | 6    | 6    |   |
|                  | Rank        | 17   | 17   | 17   | 17   | 17   | 16   | 19   | 12   | 15   | 18   | ▼ |
| United States    | # per 1,000 | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 6    |   |

- Nevada's **child and teen death rate** (deaths of children aged 1 to 19 years, from all causes, per 100,000 children in this age range) generally runs a little higher than the national average. (*Kids Count*)

| Child & Teen Deaths |               | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |   |
|---------------------|---------------|------|------|------|------|------|------|---|
| Nevada              | # per 100,000 | 37   | 38   | 34   | 29   | 29   | 27   |   |
|                     | Rank          | 32   | 35   | 31   | 25   | 29   | 23   | ▲ |
| United States       | # per 100,000 | 32   | 31   | 31   | 29   | 27   | 26   |   |

- Nevada's **teen birth rate** (births per 1,000 females aged 15-19) is higher, but getting closer to the U.S. average. (*United Health Foundation, America's Health Rankings*)

| Teen Birth Rate |             | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|-----------------|-------------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada          | # per 1,000 | 56   | 54   | 53   | 51   | 50   | 56   | 55   | 54   | 39   | 36   |   |
|                 | Rank        | 39   | 40   | 41   | 39   | 41   | 44   | 42   | 41   | 35   | 36   | ▼ |
| United States   | # per 1,000 | 45   | 43   | 42   | 41   | 41   | 42   | 42   | 42   | 34   | 31   |   |

- A higher percentage of adult Nevadans report that their **current health** is "poor" or "fair" compared to the average in the U.S. (*United Health Foundation, America's Health Rankings*)

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

| Poor Health Status |      | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|--------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada             | %    | 18%  | 18%  | 17%  | 19%  | 17%  | 19%  | 16%  | 17%  | 20%  | 19%  |   |
|                    | Rank | 40   | 40   | 35   | 42   | 36   | 42   | 34   | 35   | 41   | 37   | ▲ |
| United States      | %    | 15%  | 15%  | 15%  | 15%  | 15%  | 14%  | 15%  | 15%  | 17%  | 17%  |   |

- When a person indicates that their **activities are limited due to physical health difficulties**, this is considered to be a “poor physical health day”. In 2013, Nevadans reported suffering slightly more poor physical health days in the previous 30 days than previously and slightly more than the national rate. (*United Health Foundation, America’s Health Rankings*)

| Poor Physical Health Days |           | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|---------------------------|-----------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                    | # of Days | 3.4  | 3.5  | 3.7  | 3.7  | 3.7  | 3.5  | 3.6  | 3.8  | 3.9  | 4.2  |   |
|                           | Rank      | 22   | 25   | 35   | 38   | 36   | 28   | 30   | 36   | 25   | 34   | ▼ |
| United States             | # of Days | 3.6  | 3.6  | 3.6  | 3.6  | 3.6  | 3.6  | 3.6  | 3.7  | 3.9  | 4.0  |   |

- The percent of adults that report consuming at least five **servings of fruits and vegetables** each day has been just slightly higher for Nevada than the national average. (*United Health Foundation, America’s Health Rankings*)

| Daily Vegetables & Fruit |      | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 |   |
|--------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                   | %    | 21%  | 22%  | 20%  | 20%  | 23%  | 23%  | 22%  | 22%  | 24%  | 24%  |   |
|                          | Rank | 37   | 28   | 37   | 37   | 30   | 30   | 32   | 32   | 23   | 23   | = |
| United States            | %    | 24%  | 23%  | 23%  | 23%  | 23%  | 23%  | 24%  | 24%  | 23%  | 23%  |   |

- The United Health Foundation has, as of 2012, separated Fruits and Vegetables. Nevada consumes approximately the same intake of **fruits and vegetables** as the national average. (*United Health Foundation, America’s Health Rankings*)

| Daily Vegetables |                 | 2012 | 2013 |   |
|------------------|-----------------|------|------|---|
| Nevada           | # of Vegetables | 0.8  | 0.8  |   |
|                  | Rank            | 38   | 38   | = |
| United States    | # of Vegetables | 0.8  | 0.8  |   |

| Daily Fruits  |             | 2012 | 2013 |   |
|---------------|-------------|------|------|---|
| Nevada        | # of Fruits | 1.0  | 1.0  |   |
|               | Rank        | 19   | 19   | = |
| United States | # of Fruits | 1.0  | 1.0  |   |

- The percent of adults that report participating in **physical activities** during the previous month is slightly higher for Nevada than the national average in 2012. (*United Health Foundation, America’s Health Rankings*)

| Physical Activity |      | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|-------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada            | %    | 75%  | 76%  | 73%  | 73%  | 76%  | 72%  | 76%  | 77%  | 76%  | 79%  |   |
|                   | Rank | 32   | 31   | 36   | 42   | 35   | 38   | 30   | 20   | 17   | 18   | ▼ |
| United States     | %    | 77%  | 78%  | 76%  | 77%  | 77%  | 75%  | 76%  | 76%  | 74%  | 77%  |   |

- The percentage of Nevada **adults who are current smokers** is higher than the average for the U.S. as a whole. (*Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System*)

| Adults Who Are Current Smokers |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|--------------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                         | %    | 25%  | 23%  | 23%  | 22%  | 22%  | 22%  | 22%  | 21%  | 23%  | 23%  |   |
|                                | Rank | 28   | 28   | 39   | 36   | 35   | 42   | 41   | 42   | 35   | 34   | ▲ |
| United States                  | %    | 22%  | 21%  | 21%  | 20%  | 20%  | 19%  | 18%  | 17%  | 21%  | 21%  |   |

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

- The percentage of Nevadans over age 18 that **drank excessively** (5+ drinks in one setting for males, 4+ for females) in the previous 30 days is slightly higher than the national average as both populations' binge drinking increased. *(United Health Foundation, America's Health Rankings)*

| Binge Drinking |      | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|----------------|------|------|------|------|------|------|------|------|---|
| Nevada         | %    | 17%  | 16%  | 18%  | 18%  | 17%  | 19%  | 158% |   |
|                | Rank | NA   | 32   | 41   | 42   | 38   | 28   | 13   | ▲ |
| United States  | %    | 15%  | 16%  | 16%  | 16%  | 16%  | 18%  | 17%  |   |

- In 2009, approximately ten percent of Nevadans participated in **illicit drug use** compared to eight percent nationwide. *(SAMHSA, Substance Abuse and Mental Health Services Administration)*

| Illicit Drug Use in the Past Month |      | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |   |
|------------------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                             | %    | 8%   | 7%   | 11%  | 10%  | 9%   | 8%   | 8%   | 9%   | 9%   | 10%  |   |
|                                    | Rank | 40   | 34   | 47   | 43   | 37   | 32   | 32   | 35   | 41   | 41   | = |
| United States                      | %    | 6%   | 7%   | 8%   | 8%   | 8%   | 8%   | 8%   | 8%   | 8%   | 8%   |   |

- Nevada's **obese** population (Body Mass Index of 30 or higher) is under the national average. *(CDC, Behavioral Risk Factor Surveillance System)*

| Obesity       |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|---------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada        | %    | 21%  | 21%  | 21%  | 25%  | 25%  | 26%  | 26%  | 23%  | 23%  | 26%  |   |
|               | Rank | 18   | 11   | 8    | 24   | 13   | 19   | 21   | 5    | 4    | 17   | ▼ |
| United States | %    | 23%  | 23%  | 24%  | 25%  | 26%  | 27%  | 27%  | 27%  | 28%  | 28%  |   |

- Infectious disease cases** per 100,000 population are significantly lower for Nevada than on average for the U.S. *(United Health Foundation, America's Health Rankings)*

| Infectious Disease Cases |               | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|--------------------------|---------------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                   | # per 100,000 | 6    | 6    | 5    | 5    | 6    | 8    | 8    | 6    | 5    | 6    |   |
|                          | Rank          | 16   | 18   | 14   | 7    | 11   | 15   | 21   | 14   | 4    | 8    | ▼ |
| United States            | # per 100,000 | 9    | 9    | 9    | 11   | 13   | 12   | 9    | 9    | 10   | 12   |   |

- The percent of adult Nevadans who report being told by a doctor that they have **diabetes** is slightly lower than the national average. *(United Health Foundation, America's Health Rankings)*

| Diabetes      |      | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|---------------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada        | %    | 6%   | 7%   | 8%   | 8%   | 9%   | 8%   | 9%   | 10%  | 9%   |   |
|               | Rank | 15   | 21   | 26   | 25   | 30   | 16   | 22   | 37   | 15   | ▲ |
| United States | %    | 7%   | 7%   | 8%   | 8%   | 8%   | 8%   | 9%   | 9%   | 10%  |   |

- The percent of adult Nevadans who report being told by a health professional that they have **high blood pressure** is equal to the national average. *(United Health Foundation, America's Health Rankings)*

| High Blood Pressure |      | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|---------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada              | %    | 24%  | 24%  | 24%  | 24%  | 27%  | 27%  | 28%  | 28%  | 31%  | 31%  |   |
|                     | Rank | 16   | 16   | 15   | 15   | 24   | 24   | 17   | 17   | 24   | 24   | = |
| United States       | %    | 25%  | 25%  | 26%  | 26%  | 28%  | 28%  | 29%  | 29%  | 31%  | 31%  |   |

- The percent of adult Nevadans who report being told by a health professional that they have **high cholesterol** is just below the national average. *(United Health Foundation, America's Health Rankings)*

| High Cholesterol |      | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada           | %    | 37%  | 37%  | 39%  | 39%  | 37%  | 37%  | 39%  | 39%  | 37%  | 37%  |   |
|                  | Rank | 48   | 48   | 48   | 48   | 19   | 19   | 30   | 30   | 18   | 18   | = |
| United States    | %    | 33%  | 33%  | 36%  | 36%  | 38%  | 38%  | 38%  | 38%  | 38%  | 38%  |   |

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

- The percent of adult Nevadans who report being told by a health professional that they have had a **stroke** is at the national average. *(United Health Foundation, America's Health Rankings)*

| Stroke        |      | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|---------------|------|------|------|------|------|------|------|------|------|---|
| Nevada        | %    | 3%   | 3%   | 2%   | 2%   | 2%   | 3%   | 3%   | 3%   |   |
|               | Rank | 35   | 30   | 17   | 7    | 23   | 36   | 33   | 30   | ▼ |
| United States | %    | 3%   | 3%   | 3%   | 3%   | 2%   | 3%   | 3%   | 3%   |   |

- The percent of adult Nevadans who report being told by a health professional that they have **cardiac heart disease** is equal to the national average. *(United Health Foundation, America's Health Rankings)*

| Cardiac Heart Disease |      | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|-----------------------|------|------|------|------|------|------|------|------|------|---|
| Nevada                | %    | 4%   | 5%   | 4%   | 4%   | 4%   | 4%   | 4%   | 4%   |   |
|                       | Rank | 17   | 38   | 28   | 22   | 25   | 19   | 24   | 24   | = |
| United States         | %    | 4%   | 5%   | 4%   | 4%   | 4%   | 4%   | 4%   | 4%   |   |

- The percent of adult Nevadans who report being told by a health professional that they have had a **heart attack** (myocardial infarction) is slightly above the national average. *(United Health Foundation, America's Health Rankings)*

| Heart Attack  |      | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|---------------|------|------|------|------|------|------|------|------|------|---|
| Nevada        | %    | 5%   | 5%   | 4%   | 4%   | 5%   | 5%   | 5%   | 5%   |   |
|               | Rank | 39   | 37   | 25   | 31   | 42   | 38   | 38   | 28   | ▲ |
| United States | %    | 4%   | 4%   | 4%   | 4%   | 4%   | 4%   | 4%   | 4%   |   |

- The number of **cardiovascular deaths** per 100,000 population has been declining in Nevada, but remains higher than the national average. *(United Health Foundation, America's Health Rankings)*

| Cardiovascular Deaths |               | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|-----------------------|---------------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                | # per 100,000 | 335  | 329  | 328  | 323  | 320  | 313  | 299  | 284  | 273  | 272  |   |
|                       | Rank          | 31   | 30   | 33   | 35   | 38   | 39   | 37   | 36   | 33   | 35   | ▼ |
| United States         | # per 100,000 | 333  | 327  | 319  | 309  | 298  | 288  | 278  | 270  | 265  | 259  |   |

- The number of **cancer deaths** per 100,000 population is virtually the same in Nevada as the average for the U.S. *(United Health Foundation, America's Health Rankings)*

| Cancer Deaths |               | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|---------------|---------------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada        | # per 100,000 | 209  | 208  | 205  | 201  | 199  | 196  | 194  | 193  | 192  | 191  |   |
|               | Rank          | 36   | 34   | 33   | 34   | 32   | 27   | 25   | 27   | 24   | 25   | ▼ |
| United States | # per 100,000 | 200  | 199  | 197  | 195  | 193  | 192  | 192  | 191  | 191  | 191  |   |

## Health Care

- Early prenatal care** (the percent of pregnant women who receive care during the first trimester) has improved for Nevada. In 2010 a change in definitions led to a break in the series. The series was discontinued in 2012. The United States average is not available for 2010 or 2011. *(United Health Foundation, America's Health Rankings)*

| Early Prenatal Care |      | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 |   |
|---------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada              | %    | 67%  | 68%  | 70%  | 72%  | 67%  | 67%  | 61%  | 57%  | 73%  | 75%  |   |
|                     | Rank | 48   | 46   | 41   | 36   | 44   | 44   | 43   | 46   | 32   | 28   | ▲ |
| United States       | %    | 76%  | 76%  | 75%  | 75%  | 75%  | 75%  | 69%  | 69%  | NA   | NA   |   |

- Nevada improved significantly in terms of the percentage of children ages 19-35 months who have received the recommended number of doses of **vaccinations** (DTP, poliovirus vaccine, any measles-containing vaccine, and HepB). *(United Health Foundation, America's Health Rankings)*

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

| Immunization Coverage |      | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|-----------------------|------|------|------|------|------|------|------|------|------|---|
| Nevada                | %    | 83%  | 82%  | 81%  | 82%  | 85%  | 84%  | 85%  | 88%  |   |
|                       | Rank | 50   | 50   | 50   | 50   | 49   | 49   | 49   | 40   | ▲ |
| United States         | %    | 90%  | 90%  | 91%  | 91%  | 91%  | 90%  | 90%  | 90%  |   |

- Nevada has the lowest number of adults aged 65+ who have had a **flu shot** within the past year. (*Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System*)

| Adults Aged 65+ Who Have Had a Flu Shot Within the Past Year |      | 2003 | 2004     | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|--|------|------|----------|------|------|------|------|------|------|------|------|---|
| Nevada   | %    | 60%  | 59%      | 53%  | 58%  | 62%  | 57%  | 64%  | 59%  | 54%  | 50%  |   |
|  | Rank | 50   | 49 of 49 | 50   | 50   | 50   | 50   | 49   | 50   | 49   | 50   | ▼ |
| United States  | %    | 70%  | 68%      | 66%  | 70%  | 72%  | 71%  | 70%  | 68%  | 61%  | 60%  |   |

- In Nevada, the percent of adults who have had their **blood cholesterol checked** within the last 5 years is falling below the U.S. average. (*United Health Foundation, America's Health Rankings*)

| Cholesterol Check |      | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|-------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada            | %    | 68%  | 68%  | 67%  | 67%  | 71%  | 71%  | 76%  | 76%  | 72%  | 72%  |   |
|                   | Rank | 47   | 47   | 47   | 47   | 46   | 46   | 27   | 27   | 39   | 39   | = |
| United States     | %    | 73%  | 73%  | 73%  | 73%  | 75%  | 75%  | 77%  | 77%  | 76%  | 76%  |   |

- In Nevada, the percent of **women aged 40+ who have had a mammogram within the past two years** is lower than the national average. (*Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System*)

| Women Aged 40+ Who Have Had a Mammogram within the Past 2 Years |      | 2000 | 2002 | 2004     | 2006 | 2008 | 2010 | 2012 |   |
|---|------|------|------|----------|------|------|------|------|---|
| Nevada  | %    | 74%  | 73%  | 69%      | 71%  | 68%  | 67%  | 67%  |   |
|   | Rank | 38   | 39   | 38 of 49 | 43   | 47   | 48   | 42   | ▲ |
| United States   | %    | 76%  | 76%  | 75%      | 77%  | 76%  | 76%  | 74%  |   |

- In Nevada, the percent of **women aged 18+ who have had a Pap Smear test within the past three years** is lower than the national average. (*Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System*)

| Women Aged 18+ Who Have Had a Pap Test within the Past 3 Years |      | 2000 | 2002 | 2004     | 2006 | 2008 | 2010 | 2012 |   |
|--|------|------|------|----------|------|------|------|------|---|
| Nevada   | %    | 84%  | 83%  | 85%      | 82%  | 78%  | 78%  | 73%  |   |
|  | Rank | 43   | 48   | 34 of 49 | 40   | 47   | 43   | 48   | ▼ |
| United States  | %    | 87%  | 87%  | 86%      | 84%  | 83%  | 81%  | 78%  |   |

- The percent of Nevada adults aged 50+ that have ever had a **colorectal cancer screening** (sigmoidoscopy or colonoscopy) is below the national average. (*Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System*)

| Colorectal Cancer Screening |      | 2002 | 2004     | 2006 | 2008 | 2010 | 2012 |   |
|-----------------------------|------|------|----------|------|------|------|------|---|
| Nevada                      | %    | 45%  | 47%      | 55%  | 56%  | 62%  | 61%  |   |
|                             | Rank | 36   | 45 of 49 | 38   | 45   | 39   | 49   | ▼ |
| United States               | %    | 49%  | 54%      | 57%  | 62%  | 65%  | 67%  |   |

- The percentage of Nevadans that **visited the dentist** for any reason during the past year is lower than the national average. (*United Health Foundation, America's Health Rankings*)

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

| Recent Dental Visit |      | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|---------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada              | %    | 65%  | 65%  | 65%  | 66%  | 66%  | 64%  | 64%  | 67%  | 67%  | 61%  |   |
|                     | Rank | 45   | 44   | 44   | 39   | 39   | 44   | 44   | 36   | 36   | 40   | ▼ |
| United States       | %    | 71%  | 71%  | 71%  | 70%  | 70%  | 71%  | 71%  | 70%  | 70%  | 67%  |   |

- Nevada has fewer **primary care physicians** per 100,000 population than the national average. (*United Health Foundation, America's Health Rankings*)

| Primary Care Physicians |               | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|-------------------------|---------------|------|------|------|------|------|------|------|------|------|---|
| Nevada                  | # per 100,000 | 84   | 85   | 86   | 85   | 87   | 86   | 86   | 84   | 85   |   |
|                         | Rank          | 46   | 46   | 46   | 46   | 46   | 46   | 46   | 47   | 47   | = |
| United States           | # per 100,000 | 119  | 119  | 120  | 120  | 121  | 121  | 121  | 120  | 121  |   |

- Nevada has a lower number of **preventable hospitalizations** per 1,000 Medicare recipients than the average for the U.S. (*United Health Foundation, America's Health Rankings*)

| Preventable Hospitalizations |             | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                       | # per 1,000 | 66   | 63   | 62   | 65   | 65   | 62   | 57   | 59   | 58   | 57   |   |
|                              | Rank        | 12   | 11   | 11   | 13   | 13   | 11   | 12   | 15   | 16   | 16   | = |
| United States                | # per 1,000 | 81   | 80   | 77   | 78   | 78   | 71   | 71   | 68   | 67   | 65   |   |

- The number of **deaths** in Nevada per 10,000 admissions in **low mortality Diagnosis Related Groups (DRGs)** is close to the average in the U.S. (*U.S. Dept. of Health and Human Services, Agency for Healthcare Research and Quality*)

| Deaths in Low Mortality DRGs |              | 2005 | 2006 | 2007 | 2008 |
|------------------------------|--------------|------|------|------|------|
| Nevada                       | # per 10,000 | 5.6  | 4.4  | 4.3  | 5.1  |
| United States                | # per 10,000 | 4.5  | 4.3  | 4.2  | 5.0  |

- In Nevada, the number of **infections due to medical care** per 1,000 medical and surgical discharges exceeds the national average. (*U.S. Dept. of Health and Human Services, Agency for Healthcare Research and Quality*)

| Infections due to Medical Care |             | 2004 | 2005 | 2006 | 2007 |
|--------------------------------|-------------|------|------|------|------|
| Nevada                         | # per 1,000 | 2.3  | 2.9  | 2.8  | 2.8  |
| United States                  | # per 1,000 | 1.6  | 2.3  | 2.2  | 2.0  |

- Nevada ranks poorly in the percent of adult surgery patients who received the **appropriate timing of antibiotics**. (*U.S. Dept. of Health and Human Services, Agency for Healthcare Research and Quality*)

| Appropriate Timing of Antibiotics |      | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |   |
|-----------------------------------|------|------|------|------|------|------|------|---|
| Nevada                            | %    | 55%  | 66%  | 76%  | 72%  | 76%  | 86%  |   |
|                                   | Rank | 50   | 50   | 50   | 50   | 50   | 49   | ▲ |
| United States                     | %    | 75%  | 81%  | 86%  | 81%  | 87%  | 92%  |   |

- The percent of hospital patients with **heart failure** in Nevada who received **recommended hospital care** is just above the national average. (*U.S. Dept. of Health and Human Services, Agency for Healthcare Research and Quality*)

| Hospital Patients with Heart Failure Who Received Recommended Hospital Care |      | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 |   |
|---|------|------|------|------|------|------|------|------|---|
| Nevada  | %    | 89%  | 90%  | 93%  | 90%  | 93%  | 96%  | 96%  |   |
|   | Rank | 18   | 31   | 26   | 29   | 26   | 16   | 5    | ▲ |
| United States   | %    | 88%  | 91%  | 93%  | 91%  | 94%  | 95%  | 94%  |   |

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

- Nevada has improved dramatically in the percent of hospital patients with **pneumonia** who received **recommended hospital care**. (*U.S. Dept. of Health and Human Services, Agency for Healthcare Research and Quality*)

| Hospital Patients with Pneumonia Who Received Recommended Hospital Care |      | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 |   |
|---|------|------|------|------|------|------|------|------|---|
| Nevada  | %    | 65%  | 72%  | 79%  | 72%  | 79%  | 87%  | 93%  |   |
|   | Rank | 50   | 50   | 49   | 50   | 48   | 45   | 17   | ▲ |
| United States   | %    | 74%  | 81%  | 84%  | 81%  | 86%  | 90%  | 93%  |   |

- The percent of hospice patients in Nevada who received **care consistent with stated end-of-life wishes** is equal to the national average. (*U.S. Dept. of Health and Human Services, Agency for Healthcare Research and Quality*)

| Hospice Patients Who Received Care Consistent with Stated End-of-Life Wishes |      | 2006     | 2007     | 2008     | 2009     | 2010     | 2011     |   |
|--|------|----------|----------|----------|----------|----------|----------|---|
| Nevada   | %    | 91%      | 92%      | 93%      | 94%      | 92%      | 95%      |   |
|  | Rank | 44 of 45 | 45 of 46 | 38 of 46 | 25 of 46 | 43 of 45 | 17 of 48 | ▲ |
| United States  | %    | 95%      | 95%      | 94%      | 95%      | 95%      | 95%      |   |

## Health Insurance

- In 2012 in Nevada, 56 percent of private sector establishments **offered health insurance to employees** (rank=12<sup>th</sup> highest, down from 63 percent in 2008). The national average was 50 percent. (*Kaiser Family Foundation, State Health Facts*)
- In 2012 in Nevada, the average **health insurance premium** (employer and worker share combined) for an individual was lower than the national average. Nevada's workers also pay a lower share of the premium than is typical nationwide. For family coverage, Nevadans pay a lower worker premium and total premiums are lower. (*Kaiser Family Foundation, State Health Facts*)

| Annual Health Insurance Premiums |                  | Individual Coverage |         | Family Coverage |          |
|----------------------------------|------------------|---------------------|---------|-----------------|----------|
|                                  |                  | Employee            | Total   | Employee        | Total    |
| Nevada                           | \$               | \$1,024             | \$4,949 | \$3,655         | \$12,904 |
|                                  | Rank             | 11                  | 5       | 6               | 2        |
|                                  | Share of Premium | 21%                 |         | 28%             |          |
|                                  | Rank             | 18                  |         | 31              |          |
| United States                    | \$               | \$1,118             | \$5,384 | \$4,236         | \$15,473 |
|                                  | Share of Premium | 21%                 |         | 27%             |          |

- A higher percentage of Nevadans are **uninsured** than average in the U.S. (*U.S. Census, American Community Survey*)

| Uninsured Population |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|----------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada               | %    | 18%  | 18%  | 17%  | 20%  | 17%  | 19%  | 20%  | 23%  | 22%  | 22%  |   |
|                      | Rank | 44   | 46   | 39   | 44   | 40   | 44   | 47   | 49   | 49   | 49   | = |
| United States        | %    | 15%  | 15%  | 15%  | 16%  | 15%  | 15%  | 17%  | 16%  | 15%  | 15%  |   |

- Nevada ranks near the bottom of all states with the highest percentage of **uninsured children**. (*U.S. Census, American Community Survey*)

| Uninsured Population Age 0-18 |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|-------------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                        | %    | 17%  | 16%  | 14%  | 19%  | 14%  | 19%  | 17%  | 17%  | 16%  | 18%  |   |
|                               | Rank | 47   | 48   | 46   | 47   | 47   | 50   | 49   | 50   | 50   | 48   | ▲ |
| United States                 | %    | 11%  | 11%  | 11%  | 12%  | 11%  | 10%  | 10%  | 8%   | 7%   | 12%  |   |

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

## Mental Health

- The average number of **poor mental health days** per month for Nevadans slightly exceeds the national average. (*United Health Foundation, America's Health Rankings*)

| Poor Mental Health Days |           | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |   |
|-------------------------|-----------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                  | # of Days | 3.9  | 3.9  | 3.5  | 3.5  | 3.8  | 3.6  | 4.0  | 3.8  | 3.9  | 4.1  |   |
|                         | Rank      | 43   | 46   | 36   | 36   | 43   | 35   | 45   | 38   | 28   | 35   | ▼ |
| United States           | # of Days | 3.4  | 3.5  | 3.3  | 3.4  | 3.4  | 3.4  | 3.5  | 3.5  | 3.8  | 3.9  |   |

- A higher percent of Nevadans report suffering from **Frequent Mental Distress** (14 or more mentally unhealthy days per month) than average in the U.S. (*Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion*)

| Frequent Mental Distress |      | 2001 | 2002 | 2003 | 2004     | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |   |
|--------------------------|------|------|------|------|----------|------|------|------|------|------|------|---|
| Nevada                   | %    | 10%  | NA   | 12%  | 11%      | 11%  | 11%  | 11%  | 11%  | 13%  | 12%  |   |
|                          | Rank | 30   | NA   | 43   | 38 of 49 | 35   | 38   | 40   | 37   | 45   | 35   | ▲ |
| United States            | %    | 10%  | 9%   | 10%  | 10%      | 10%  | 10%  | 10%  | 10%  | 11%  | 11%  |   |

- It is estimated that Nevada has 88,540 residents suffering from **serious mental illness**. (*National Alliance on Mental Illness, Grading the States 2009*)
- Nevada's adult **public mental healthcare system** earns poor grades in a nationwide survey. (*National Alliance on Mental Illness, Grading the States 2009*)

| Adult Public Mental Healthcare System |       | Health Promotion & Measurement | Financing & Core Treatment / Recovery Services | Consumer & Family Empowerment | Community Integration & Social Inclusion | Overall Grade |
|---------------------------------------|-------|--------------------------------|--|-------------------------------|--|---------------|
| Nevada                                | Grade | F                              | D  | D                             | F  | D             |
| United States                         | Grade | D                              | C  | D                             | D  | D             |

- Nevada's **per capita mental health spending** is significantly below the national average. (*Kaiser Family Foundation, State Health Facts*)

| Per Capita Mental Health Expenditures |               | FY02 | FY03 | FY04 | FY05  | FY06  | FY07  | FY08  | FY09  | FY10  |   |
|---------------------------------------|---------------|------|------|------|-------|-------|-------|-------|-------|-------|---|
| Nevada                                | \$ Per Capita | \$59 | \$63 | \$54 | \$63  | \$61  | \$79  | \$81  | \$64  | \$68  |   |
|                                       | Rank          | 35   | 34   | 40   | 39    | 42    | 33    | 36    | 42    | 41    | ▲ |
| United States                         | \$ Per Capita | \$84 | \$92 | \$98 | \$103 | \$104 | \$113 | \$121 | \$123 | \$121 |   |

## Suicide

- Nevada's **suicide rate** is higher than the national average. (*Centers for Disease Control and Prevention, National Center for Injury Prevention and Control*)

| Suicide Rate  |               | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |   |
|---------------|---------------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada        | # per 100,000 | 19   | 20   | 20   | 19   | 20   | 20   | 18   | 19   | 19   | 20   |   |
|               | Rank          | 48   | 47   | 48   | 49   | 49   | 47   | 46   | 46   | 46   | 47   | ▼ |
| United States | # per 100,000 | 11   | 11   | 11   | 11   | 11   | 11   | 11   | 12   | 12   | 12   |   |

- The **suicide rate among Nevadans aged 65+** is more than twice the average for the U.S. (*Centers for Disease Control and Prevention, National Center for Injury Prevention and Control*)

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

| Suicide Rate Age 65+ |               | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |   |
|----------------------|---------------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada               | # per 100,000 | 32   | 34   | 39   | 34   | 36   | 33   | 31   | 28   | 35   | 30   |   |
|                      | Rank          | 50   | 50   | 50   | 50   | 50   | 50   | 50   | 50   | 50   | 50   | = |
| United States        | # per 100,000 | 15   | 16   | 15   | 14   | 15   | 14   | 14   | 15   | 15   | 15   |   |

- In 2010, suicide was the 6<sup>th</sup> leading cause of death in Nevada and the 10<sup>th</sup> nationwide. (*Centers for Disease Control and Prevention, National Center for Injury Prevention and Control*)

| Rank of Suicide as a Leading Cause of Death, by Age | 10 to 14 years | 15 to 24 years | 25 to 34 years | 35 to 44 years | 45 to 54 years | 55 to 64 years | 65 to 74 years | 75 to 84 years | 85+ years | All Ages |
|---|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|-----------|----------|
| Nevada  | 9              | 2              | 2              | 3              | 4              | 5              | 10             | 14             | 17        | 6        |
| United States                                       | 3              | 3              | 2              | 4              | 4              | 8              | 13             | 17             | >20       | 10       |

- In 2009, approximately ten percent of Nevada's 9<sup>th</sup> through 12<sup>th</sup> graders **attempted suicide** in the last 12 months, compared to nearly six percent nationwide. In 2011 the national rate went up while state level data is not yet available. (*Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Youth Risk Behavior Surveillance System*)

| Suicide Attempts Among High School Students |   | 1999 | 2001 | 2003 | 2005 | 2007 | 2009 | 2011 |
|---|---|------|------|------|------|------|------|------|
| Nevada                                      | % | 9%   | 11%  | 9%   | 9%   | 9%   | 10%  | NA   |
| United States                               | % | 8%   | 9%   | 9%   | 8%   | 7%   | 6%   | 8%   |

## Public Assistance

- In 2012 the number of Nevada households that receive **public assistance** income per 1,000 households is lower than the national average. This outcome occurred as public assistance participation rates have surged nationwide. (*U.S. Census, American Community Survey*)

| Households Receiving Public Assistance Income |             | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|---|-------------|------|------|------|------|------|------|---|
| Nevada  | # per 1,000 | 47   | 60   | 79   | 109  | 117  | 134  |   |
|   | Rank        | 1    | 4    | 7    | 15   | 16   | 19   | ▼ |
| United States                                 | # per 1,000 | 84   | 93   | 111  | 127  | 137  | 143  |   |

- Note that a rank of 1 indicates that state has the fewest households receiving public assistance per 1,000 households.

- The **maximum income allowed for initial TANF eligibility** for a family of three in Nevada is considerably higher than the national average. (*Urban Institute, Welfare Rules Databook*)

| Maximum Income for Initial Eligibility for a Family of Three (1 adult, 2 kids) |                | 2002    | 2003    | 2004    | 2005    | 2006    | 2007    | 2008    | 2009    | 2010    | 2011    | 2012    |
|--|----------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| Nevada   | Maximum Income | \$1,120 | \$1,133 | \$1,168 | \$1,185 | \$1,230 | \$1,341 | \$1,375 | \$1,430 | \$1,430 | \$1,448 | \$1,448 |
| United States  | Maximum Income | \$768   | \$770   | \$771   | \$766   | \$777   | \$789   | \$785   | \$817   | \$822   | \$800   | \$823   |

- The **maximum TANF benefit** for a family of three (one adult, two children) with no income in Nevada is lower than the average in the U.S. (*Urban Institute, Welfare Rules Databook*)

| Maximum TANF Benefit for a Family of Three with No Income |                | 2002  | 2003  | 2004  | 2005  | 2006  | 2007  | 2008  | 2009  | 2010  | 2011  | 2012  |
|---|----------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| Nevada  | Maximum Income | \$348 | \$348 | \$348 | \$348 | \$348 | \$348 | \$383 | \$383 | \$383 | \$383 | \$383 |
| United States   | Maximum Income | \$413 | \$415 | \$413 | \$413 | \$417 | \$419 | \$475 | \$431 | \$436 | \$436 | \$430 |

## Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

- In 2012, the **asset limit** for TANF recipients in Nevada is \$2,000. Among other states the minimum is \$1,000, and the maximum is unlimited assets in Alabama, Colorado, Louisiana, Maryland, Ohio and Virginia. (*Urban Institute, Welfare Rules Databook*)
- Nevada's TANF **work participation rate** is higher than the average for the U.S. Note that "work activities" may include employment, job search activities, community service, education, and job skills training. (*U.S. Dept. of Health and Human Services, Administration for Children and Families, Office of Family Assistance*)

| TANF Work Participation Rate |      | FFY01 | FFY02 | FFY03 | FFY04 | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 |   |
|------------------------------|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---|
| Nevada                       | %    | 35%   | 22%   | 22%   | 35%   | 42%   | 48%   | 34%   | 42%   | 39%   | 38%   |   |
|                              | Rank | 28    | 43    | 43    | 27    | 15    | 12    | 28    | 17    | 20    | 21    | ▼ |
| United States                |      | %     | 34%   | 33%   | 31%   | 32%   | 33%   | 30%   | 29%   | 29%   | 29%   |   |

- The **average number of hours of participation in work activities** per week for all adult TANF recipients participating in work activities in Nevada is approximately equal to the national average. (*U.S. Dept. of Health and Human Services, Administration for Children and Families, Office of Family Assistance*)

| Average Participation in Work Activities Per Week |       | FFY01 | FFY02 | FFY03 | FFY04 | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 |   |
|---|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---|
| Nevada  | Hours | 25    | 22    | 23    | 23    | 18    | 20    | 27    | 27.5  | 26    | 25    |   |
|   | Rank  | 37    | 43    | 44    | 44    | 50    | 48    | 23    | 15    | 14    | 21    | ▼ |
| United States                                     |       | Hours | 30    | 29    | 28    | 28    | 28    | 27    | 25    | 25    | 25    |   |

- Nevada's **job entry by TANF recipients** falls below the national average. (*U.S. Dept. of Health and Human Services, Administration for Children and Families, Office of Family Assistance, High Performance Measures*)

| Job Entry by TANF Recipients |      | FFY02    | FFY03    | FFY04    | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 | FFY11 |     |
|------------------------------|------|----------|----------|----------|-------|-------|-------|-------|-------|-------|-------|-----|
| Nevada                       | %    | 37%      | 37%      | 39%      | 40%   | 28%   | 25%   | 23%   | 17%   | 17%   | 15%   |     |
|                              | Rank | 19 of 48 | 15 of 49 | 13 of 49 | 11    | 46    | 44    | 42    | 37    | 43    | 48    | ▼   |
| United States                |      | %        | 36%      | 34%      | 36%   | 35%   | 36%   | 36%   | 35%   | 26%   | 25%   | 28% |

- Nevada performs well in terms of **job retention by employed TANF recipients**, ranking higher than the national average. (*U.S. Dept. of Health and Human Services, Administration for Children and Families, Office of Family Assistance, High Performance Measures*)

| Job Retention by Employed TANF Recipients |      | FFY02    | FFY03    | FFY04    | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 | FFY11 |     |
|---|------|----------|----------|----------|-------|-------|-------|-------|-------|-------|-------|-----|
| Nevada                                    | %    | 63%      | 63%      | 65%      | 67%   | 71%   | 72%   | 72%   | 68%   | 71%   | 72%   |     |
|   | Rank | 13 of 48 | 13 of 49 | 10 of 49 | 12    | 3     | 2     | 3     | 4     | 4     | 4     | =   |
| United States                             |      | %        | 59%      | 59%      | 60%   | 63%   | 64%   | 64%   | 63%   | 61%   | 60%   | 65% |

- The percent of Nevada's employed TANF recipients that have achieved **earnings gains** is less than the national average. (*U.S. Dept. of Health and Human Services, Administration for Children and Families, Office of Family Assistance, High Performance Measures*)

| Earnings Gain by Employed TANF Recipients |      | FFY02    | FFY03    | FFY04    | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 | FFY11 |   |
|---|------|----------|----------|----------|-------|-------|-------|-------|-------|-------|-------|---|
| Nevada                                    | %    | 35%      | 29%      | 38%      | 37%   | 44%   | 38%   | 22%   | 19%   | 26%   | 26%   |   |
|   | Rank | 26 of 48 | 39 of 49 | 32 of 49 | 37    | 20    | 33    | 47    | 46    | 43    | 45    | ▼ |
| United States                             |      | %        | 38%      | 38%      | 42%   | 44%   | 43%   | 37%   | 33%   | 30%   | 31%   |   |

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

## Medicaid

- For FFY 2011 Nevada's **Medicaid spending per capita** is less than half the national average. (*National Association of State Budget Officers, State Expenditure Report; U.S. Census, Annual Population Estimates*)

| Medicaid Expenditures |               | FFY03 | FFY04 | FFY05 | FFY06 | FFY07   | FFY08   | FFY09   | FFY10   | FFY11   | FFY12   |   |
|-----------------------|---------------|-------|-------|-------|-------|---------|---------|---------|---------|---------|---------|---|
| Nevada                | \$ per capita | \$519 | \$501 | \$476 | \$468 | \$487   | \$435   | \$504   | \$561   | \$573   | \$613   |   |
|                       | Rank          | 47    | 50    | 50    | 50    | 50      | 50      | 50      | 50      | 50      | 50      | = |
| United States         | \$ per capita | \$845 | \$902 | \$967 | \$983 | \$1,016 | \$1,021 | \$1,092 | \$1,170 | \$1,266 | \$1,269 |   |

- Historically, Nevada ranked low in providing **Medicaid coverage to pregnant women**; Nevada had the 11<sup>th</sup> lowest eligibility rate at 164 percent of poverty effective January 2014. (*Kaiser Family Foundation, State Health Facts*)
- Nevada's **Medicaid nursing facility spending** was \$60 per person in 2009, ranking 50<sup>th</sup> among all states. The U.S. average is \$168. (*AARP Public Policy Institute, Across the States 2012*)
- Nevada's **Medicaid Home and Community Based Services (HCBS) spending** for older people and adults with physical disabilities was 34 percent of Medicaid long-term care expenditures in 2009. Nevada ranked 19<sup>th</sup> and the US national average is 36 percent. (*AARP Public Policy Institute, Across the States 2012*)
- In Nevada, the **costs** of many health care services for the elderly are generally near the national average. (*Genworth, Cost of Care Survey 2013*)

| Costs of Care, Average Median Annual Expense |      | Homemaker Services | Adult Day Care | Assisted Living Facility (private 1 bdrm) | Nursing Home (semi-private room) | Nursing Home (private room) |
|--|------|--------------------|----------------|---|----------------------------------|-----------------------------|
| Nevada                                       | \$   | \$45,760           | \$16,900       | \$34,200                                  | \$80,884                         | \$89,425                    |
|  | Rank | 36                 | 26             | 5   | 28                               | 29                          |
| United States                                | \$   | \$41,756           | \$16,900       | \$41,400                                  | \$75,405                         | \$83,950                    |

## Child Care

- Of families that receive subsidized child care, the percentage of these families with a **\$0 co-payment** is higher in Nevada than the U.S. average. (*U.S. Dept. of Health and Human Services, Administration for Children and Families, Child Care Bureau*)

| Families with \$0 |   | FFY02 | FFY03 | FFY04 | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 | FFY11 |
|-------------------|---|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| Nevada            | % | 47%   | 51%   | 38%   | 24%   | 15%   | 18%   | 23%   | 23%   | 25%   | 18%   |
| United States     | % | 26%   | 25%   | 25%   | 24%   | 24%   | 23%   | 21%   | 20%   | 23%   | 21%   |

- The **average family co-payment** for subsidized child care as a percent of family income is lower in Nevada than the average nationwide. (*U.S. Dept. of Health and Human Services, Administration for Children and Families, Child Care Bureau*)

| Average Family Co-Payment as a % of Income |      | FFY02 | FFY03 | FFY04 | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 | FFY11 |   |
|--|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---|
| Nevada                                     | %    | 5%    | 4%    | 4%    | 5%    | 6%    | 6%    | 6%    | 5%    | 3%    | 4%    |   |
|  | Rank | 33    | 21    | 21    | 30    | 38    | 34    | 32    | 25    | 18    | 17    | ▲ |
| United States                              | %    | 4%    | 5%    | 5%    | 5%    | 5%    | 5%    | 5%    | 5%    | 5%    | 5%    |   |

- Note that a rank of 1 indicates that state has the lowest average family co-payment as a percent of income.

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

## Food Insecurity

- Nevada's **food insecurity** (lack of access by all people at all times to enough food for an active, healthy life) is higher than the national average. (*U.S. Dept. of Agriculture, Economic Research Service*)

| Food Insecurity |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|-----------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada          | %    | 9%   | 9%   | 8%   | 9%   | 10%  | 12%  | 13%  | 15%  | 15%  | 17%  |   |
|                 | Rank | 17   | 8    | 9    | 10   | 24   | 34   | 25   | 31   | 35   | 43   | ▼ |
| United States   | %    | 11%  | 11%  | 11%  | 11%  | 11%  | 12%  | 14%  | 15%  | 15%  | 15%  |   |

- The percentage of Nevadans experiencing **very high food insecurity** (at times during the year, the food intake of household members was reduced and their normal eating patterns were disrupted) recently eclipsed the national average. (*U.S. Dept. of Agriculture, Economic Research Service*)

| Very Low Food Security |      | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |   |
|------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                 | %    | 3%   | 3%   | 3%   | 3%   | 4%   | 5%   | 5%   | 5%   | 6%   | 7%   |   |
|                        | Rank | 29   | 14   | 12   | 13   | 27   | 33   | 25   | 28   | 34   | 43   | ▼ |
| United States          | %    | 3%   | 4%   | 4%   | 4%   | 4%   | 5%   | 5%   | 6%   | 6%   | 6%   |   |

- Nevada's **food stamp participation rate** (percent of eligible population that receives benefits) has recently increased substantially but remains lower than the national average. (*U.S. Dept. of Agriculture, Food and Nutrition Service*)

| Food Stamp Participation Rate |      | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |   |
|-------------------------------|------|------|------|------|------|------|------|------|------|------|------|---|
| Nevada                        | %    | 43%  | 46%  | 41%  | 42%  | 54%  | 53%  | 51%  | 50%  | 56%  | 62%  |   |
|                               | Rank | 50   | 49   | 49   | 50   | 42   | 49   | 38   | 49   | 46   | 48   | ▼ |
| United States                 | %    | 60%  | 60%  | 54%  | 56%  | 65%  | 67%  | 65%  | 66%  | 72%  | 75%  |   |

- Between October 2011 and October 2012, the number of Nevadans receiving **food stamps** increased by 2.5 percent, ranking Nevada as the 24<sup>th</sup> smallest increase nationwide. The national average year-over-year increase was 2.8 percent. (*Kaiser Family Foundation, State Health Facts*)

- During 2012, a lower percentage of Nevada's **families received food stamps** than average for the U.S. (*U.S. Census, American Community Survey*)

| Households Receiving Food Stamps During Last 12 Months |   | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |
|--|---|------|------|------|------|------|------|------|------|------|------|------|
| Nevada   | % | 5%   | 4%   | 4%   | 4%   | 4%   | 4%   | 4%   | 5%   | 10%  | 11%  | 13%  |
| United States  | % | 6%   | 7%   | 7%   | 8%   | 8%   | 8%   | 8%   | 8%   | 12%  | 13%  | 14%  |

- For FFY13, Nevada's **average monthly food stamp benefit** per person was \$123.57 and per household was \$255.46. The national averages were \$133.07 and \$274.98 respectively. (*U.S. Dept. of Agriculture, Food Stamp Program State Activity Report*)

## Child Support Enforcement

- The U.S. Dept. of Health and Human Services Office of Child Support Enforcement measures states using five **performance indicators**. Nevada made improvements in all of the five performance indicators for FFY 2012. (*U.S. Dept. of Health and Human Services, Administration for Children and Families, Office of Child Support Enforcement*)

| Paternity Established |      | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 | FFY11    | FFY12    |   |
|-----------------------|------|-------|-------|-------|-------|-------|-------|----------|----------|---|
| Nevada                | %    | 66%   | 69%   | 80%   | 84%   | 86%   | 100%  | 109%     | 117%     |   |
|                       | Rank | 49    | 49    | 49    | 49    | 46    | 14    | 3 of 24* | 2 of 24* | ▲ |
| United States         | %    | 92%   | 95%   | 95%   | 95%   | 96%   | 96%   | 99%      | 100%     |   |

\*States choose one of two ways to measure **Paternity Established**.

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

Note: Ratios over 100 percent for **Paternity Established** are achieved because the denominator is from prior years while the numerator is from the current year

| Support Orders Established |      | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 | FFY11 | FFY12 |   |
|----------------------------|------|-------|-------|-------|-------|-------|-------|-------|-------|---|
| Nevada                     | %    | 62%   | 67%   | 69%   | 68%   | 70%   | 76%   | 81%   | 82%   |   |
|                            | Rank | 45    | 44    | 44    | 43    | 43    | 38    | 32    | 34    | ▼ |
| United States              |      | %     | 77%   | 78%   | 79%   | 79%   | 80%   | 81%   | 82%   |   |

| Current Support Collected |      | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 | FFY11 | FFY12 |   |
|---------------------------|------|-------|-------|-------|-------|-------|-------|-------|-------|---|
| Nevada                    | %    | 46%   | 46%   | 48%   | 48%   | 48%   | 49%   | 51%   | 56%   |   |
|                           | Rank | 49    | 50    | 50    | 50    | 50    | 50    | 49    | 42    | ▲ |
| United States             |      | %     | 59%   | 60%   | 61%   | 62%   | 61%   | 62%   | 63%   |   |

| Arrearages Collected |      | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 | FFY11 | FFY12 |   |
|----------------------|------|-------|-------|-------|-------|-------|-------|-------|-------|---|
| Nevada               | %    | 50%   | 52%   | 52%   | 53%   | 52%   | 57%   | 60%   | 57%   |   |
|                      | Rank | 48    | 48    | 49    | 49    | 49    | 45    | 33    | 44    | ▼ |
| United States        |      | %     | 61%   | 61%   | 62%   | 63%   | 64%   | 62%   | 62%   |   |

| Cost Effectiveness |      | FFY05 | FFY06 | FFY07 | FFY08 | FFY09 | FFY10 | FFY11 | FFY12 |   |
|--------------------|------|-------|-------|-------|-------|-------|-------|-------|-------|---|
| Nevada             | %    | 3%    | 3%    | 4%    | 3%    | 4%    | 3%    | 4%    | 4%    |   |
|                    | Rank | 48    | 47    | 45    | 47    | 41    | 48    | 42    | 41    | ▲ |
| United States      |      | %     | 5%    | 5%    | 5%    | 5%    | 5%    | 5%    | 5%    |   |

## Funding

- Nevada's **state and local tax burden per capita** is lower than the national average. Nevada's state and local tax rate (state and local tax burden per capita divided by income per capita) is one of the lowest in the nation. (*Tax Foundation, State/Local Tax Burdens, All States*)

| Total State and Local Per Capita Taxes Paid |               | 2001    | 2002    | 2003    | 2004    | 2005    | 2006    | 2007    | 2008    | 2009    | 2010    |   |
|---|---------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---|
| Nevada                                      | \$ per capita | \$2,519 | \$2,554 | \$2,724 | \$3,067 | \$3,331 | \$3,581 | \$3,606 | \$3,606 | \$3,311 | \$3,297 |   |
|   | Tax Rate      | 6.9%    | 7.3%    | 7.6%    | 7.7%    | 7.4%    | 7.5%    | 7.4%    | 7.5%    | 7.5%    | 8.2%    |   |
|   | Rank          | 3       | 5       | 5       | 7       | 4       | 6       | 4       | 4       | 2       | 9       | ▼ |
| United States                               | \$ per capita | \$3,200 | \$3,156 | \$3,254 | \$3,466 | \$3,734 | \$4,018 | \$4,270 | \$4,384 | \$4,160 | \$4,112 |   |
|   | Tax Rate      | 9.4%    | 9.5%    | 9.6%    | 9.6%    | 9.6%    | 9.7%    | 9.8%    | 9.9%    | 9.8%    | 9.9%    |   |

- Note that a rank of one indicates that state has the lowest tax burden.

- Nevada's **state government tax collections** per capita generally run about equal to the average of all other states. (Nevada along with Texas, Washington and Wyoming don't have individual or corporate net income taxes. Alaska, Florida and South Dakota have only corporate net income taxes, but not individual income taxes. All other states have both taxes.) (*U.S. Census, American Community Survey*)

| State Government Tax Collections Per Capita |            | 2003       | 2004    | 2005    | 2006    | 2007    | 2008    | 2009    | 2010    | 2011    | 2012    |         |  |
|---|------------|------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|--|
| Nevada                                      | Per Capita | \$1,842    | \$1,953 | \$2,348 | \$2,466 | \$2,458 | \$2,365 | \$2,123 | \$2,158 | \$2,325 | \$2,456 |         |  |
|   | Rank       | 26         | 26      | 32      | 30      | 26      | 21      | 17      | 24      | 25      | 27      | ▼       |  |
| United States                               |            | Per Capita | \$1,892 | \$2,000 | \$2,199 | \$2,391 | \$2,530 | \$2,532 | \$2,326 | \$2,728 | \$2,435 | \$2,531 |  |

- Note that a rank of one indicates that state has the lowest tax burden.

- Nevada receives lower **federal government expenditures per capita** than all other states. (*Consolidated Federal Funds Report and U.S. Census, American Community Survey*)

## Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

| Federal Government Expenditures Per Capita |            | 2002    | 2003    | 2004    | 2005    | 2006    | 2007    | 2008    | 2009     | 2010     |   |
|--|------------|---------|---------|---------|---------|---------|---------|---------|----------|----------|---|
| Nevada                                     | Per Capita | \$4,940 | \$5,192 | \$5,469 | \$5,288 | \$5,852 | \$6,032 | \$6,638 | \$7,148  | \$6,986  |   |
|  | Rank       | 50      | 50      | 50      | 50      | 50      | 50      | 49      | 50       | 50       | = |
| United States                              | Per Capita | \$6,650 | \$7,089 | \$7,381 | \$7,295 | \$8,200 | \$8,538 | \$9,184 | \$10,548 | \$10,489 |   |

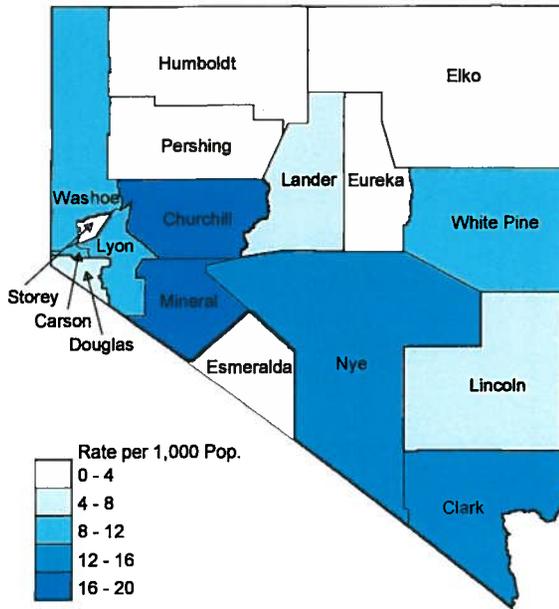
Note: The Consolidated Federal Funds Report (CFFR) is no longer published. The U.S. Census Bureau replied that any current information is not comparable.

# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

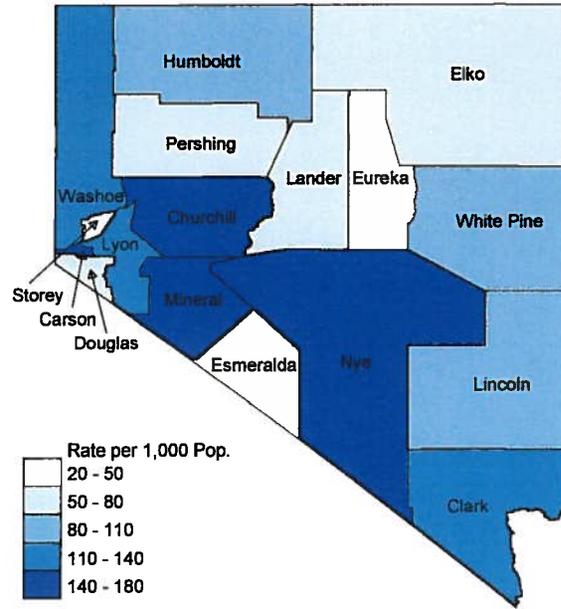
## Maps - Program Participation Rates by County

Source: DHHS Caseload Data

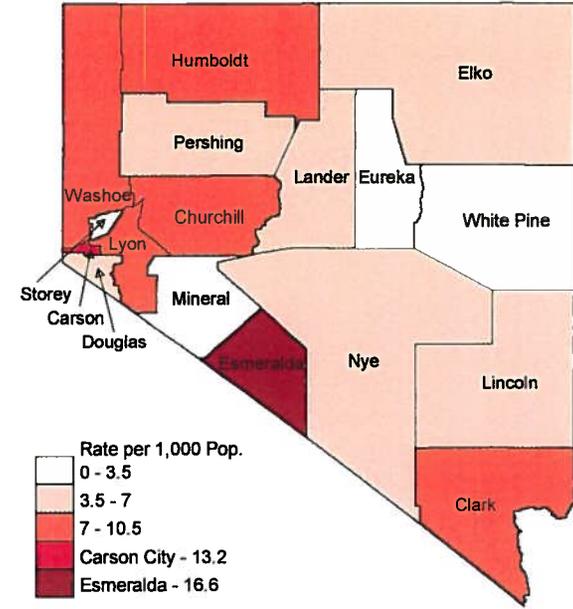
TANF Cash Participation Rate - Feb 2014



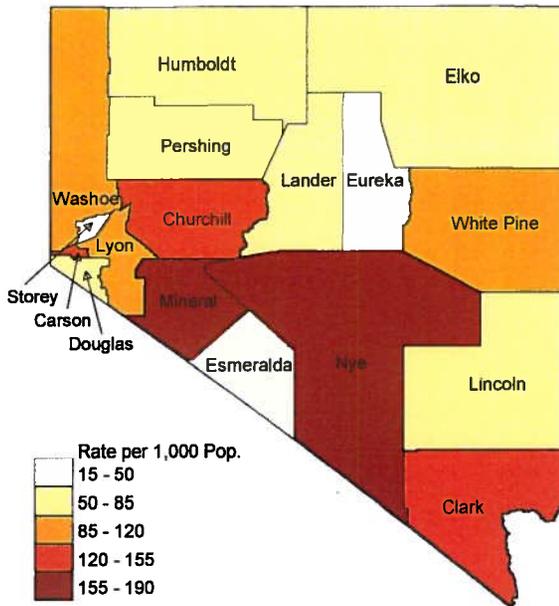
Total Medicaid Participation Rate - Feb 2014



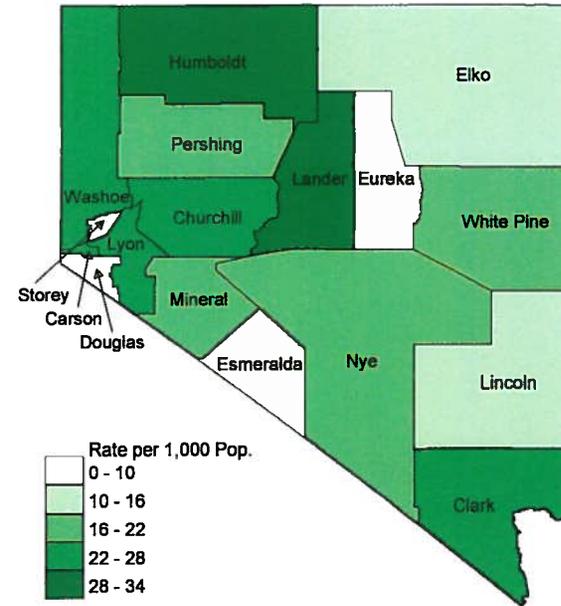
NV Check Up Participation Rate - Oct 2013



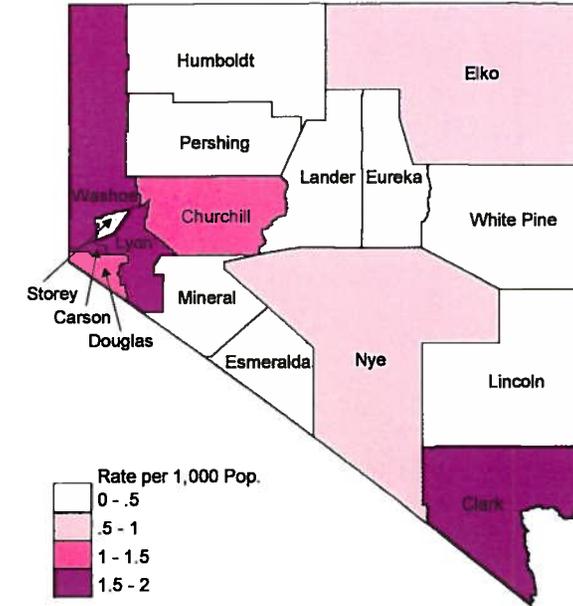
SNAP Participation Rate - Feb 2014



WIC Participation Rate - Feb 2014



Childcare Participation Rate - Sep 2013



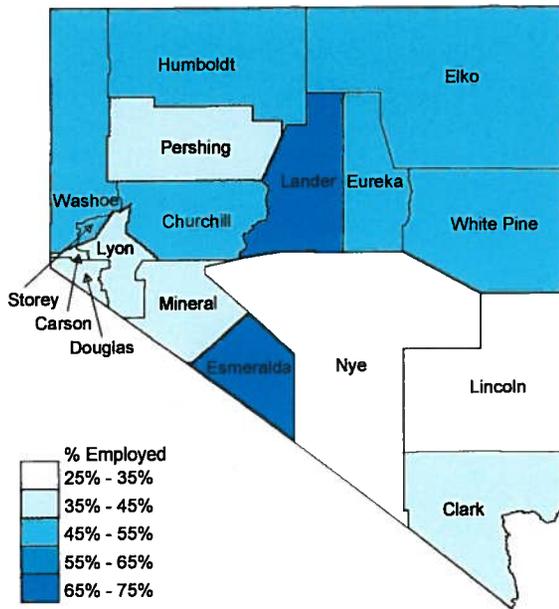
# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

Source: Employment and Unemployment Rate – DETR;

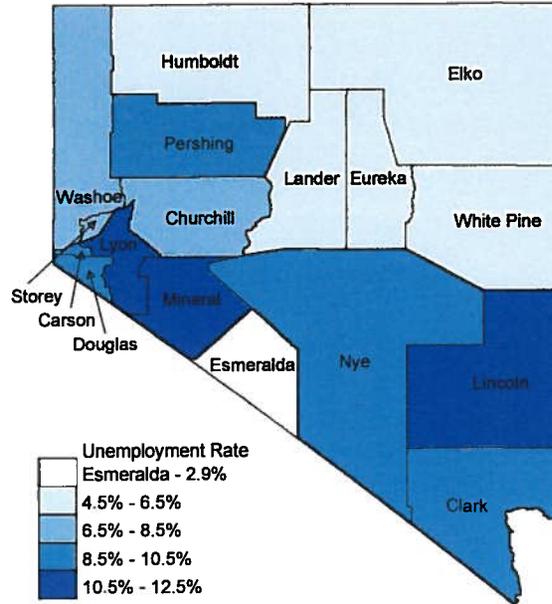
Others – U.S. Census Bureau

## Maps – Socioeconomic and Demographic Indicators by County

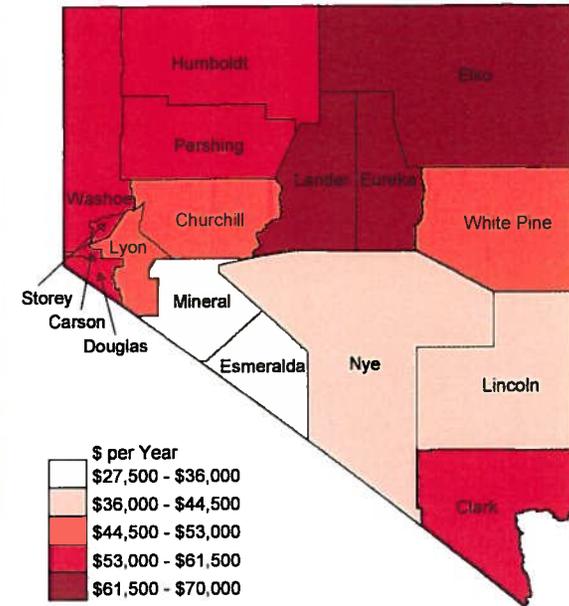
Employment to Population Ratio - Dec 2013



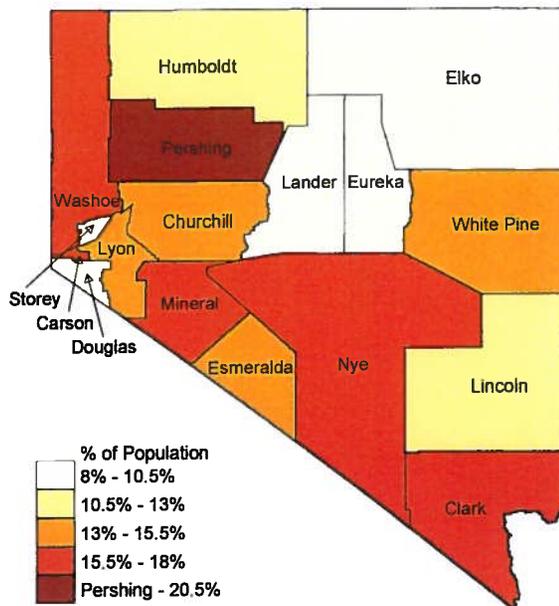
Unemployment Rate - Dec 2013



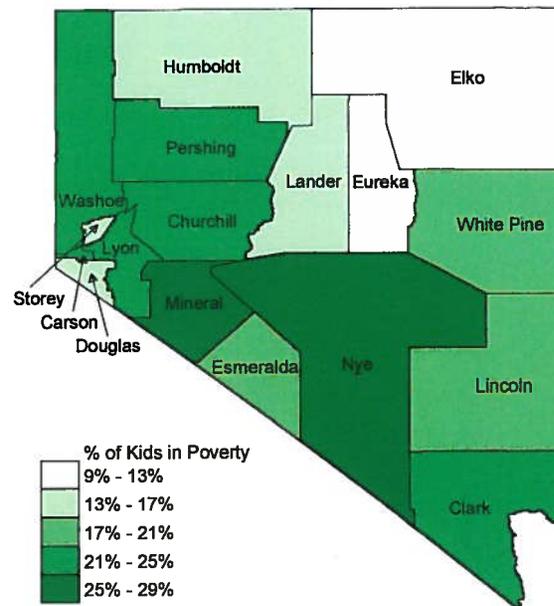
Median Household Income - 2011



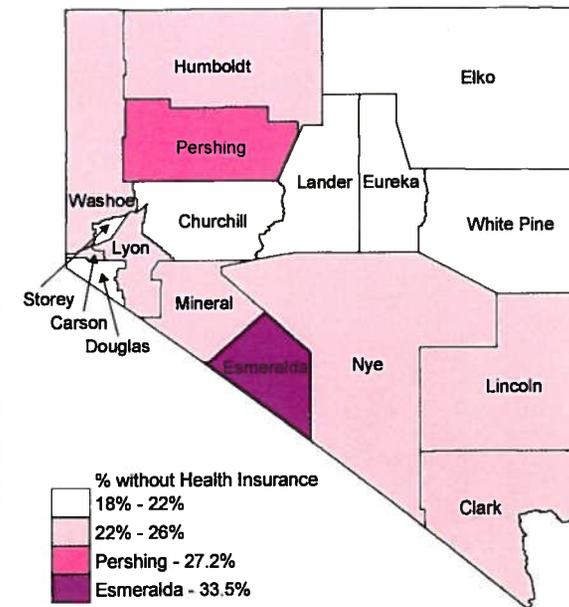
Persons below Poverty - 2012



Child Poverty - 2012



Uninsured < age 65 - 2011

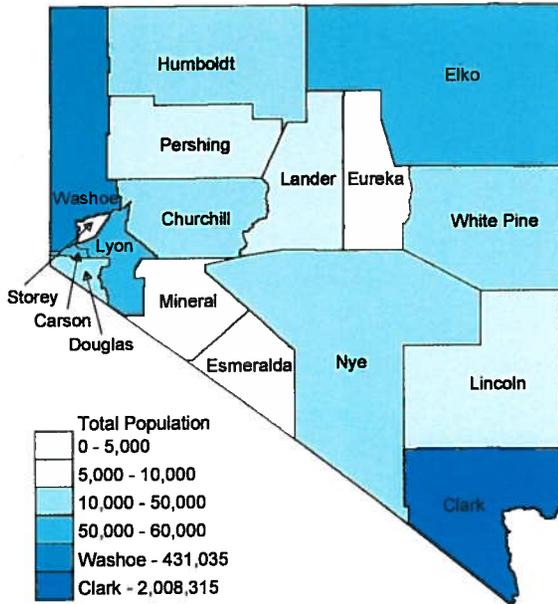


# Nevada Department of Health and Human Services, Nevada Data & Key Comparisons

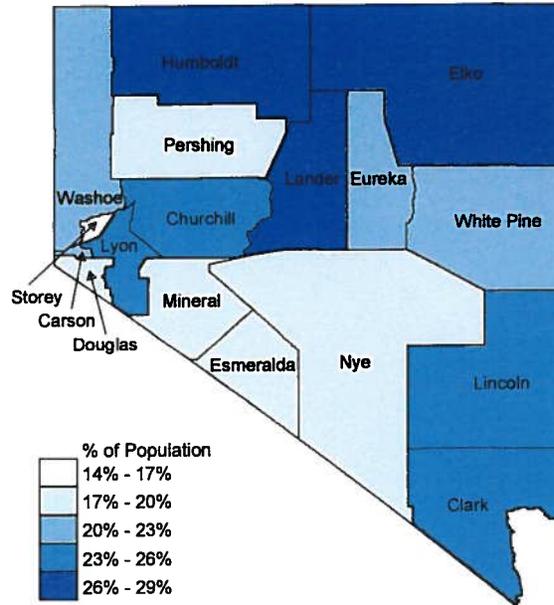
## Maps - Demographic Indicators by County

Source: Total population – State Demographer; Others – U.S. Census Bureau

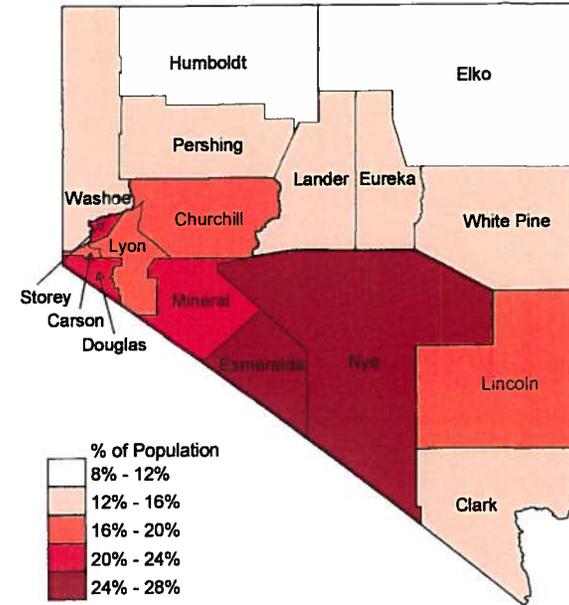
Total Population - 2013



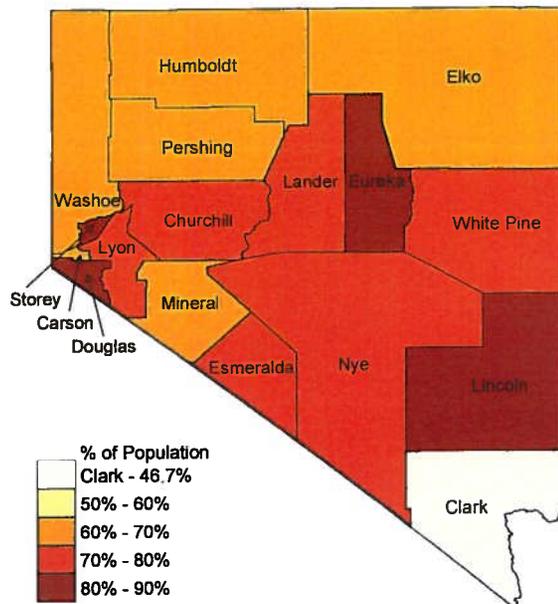
Persons under 18 Years - 2012



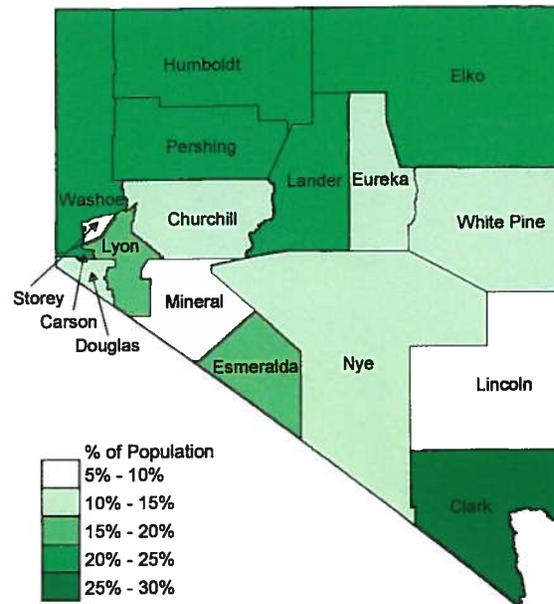
Persons Age 65 and Over - 2012



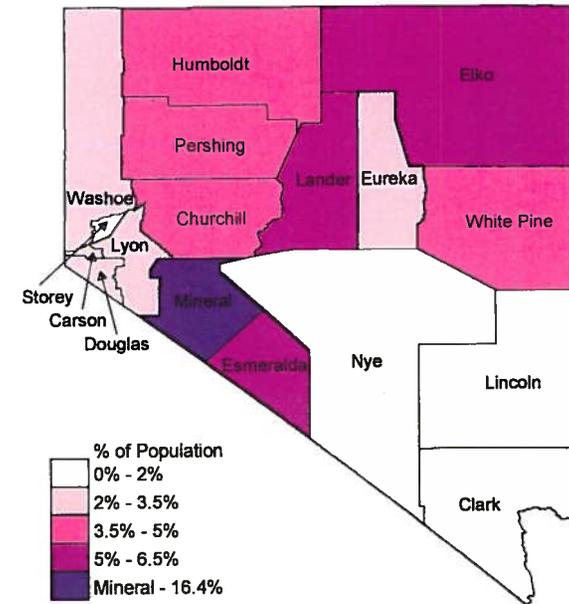
White Persons not Hispanic - 2012



Persons of Hispanic Origin - 2012



Native American Persons - 2012

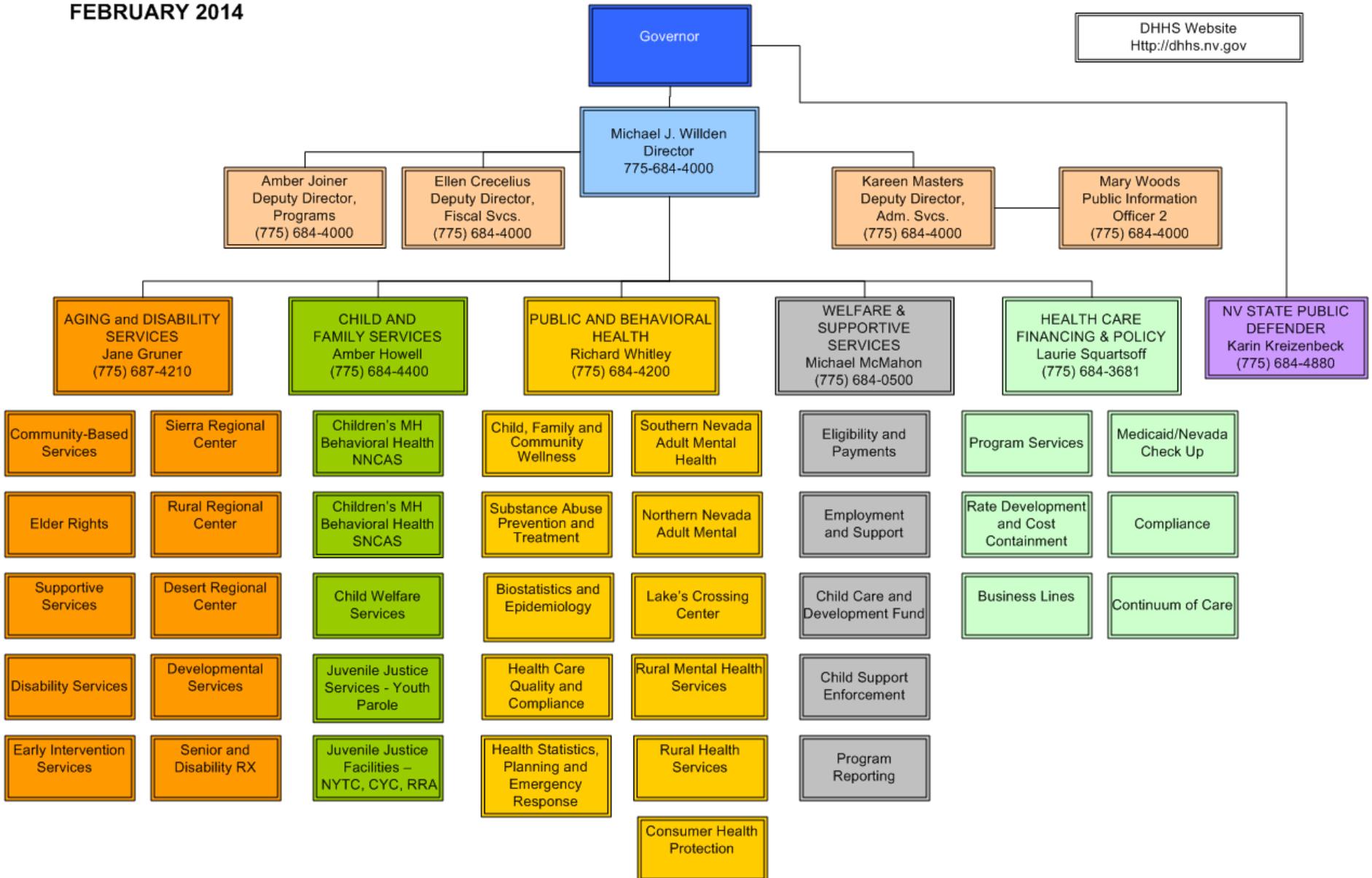


# Nevada Department of Health and Human Services, Organizational Chart

## Organizational Chart

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

FEBRUARY 2014



# Nevada Department of Health and Human Services, Organizational Chart

Page intentionally left blank.

# Nevada Department of Health and Human Services, NRS by Division

## NRS Chapters for Statutory Authority by Division

Updated November 2013

### ***Director's Office***

- 223 Office for Consumer Health Assistance
- 232 State Departments; Department of Health and Human Services (Office of Minority Health, Nevada 2-1-1, Grants Management Advisory Committee)
- 233B Nevada Administrative Procedures Act
- 322 Use of State Lands (approve lease to non-profit or education institution)
- 353 State Financial Administration (Acceptance of Gifts)
- 395 Education of Persons with Disabilities (Interagency Panel)
- 396 Nevada State Higher Education (Medical Education)
- 428 Indigent Persons (Community Services Block Grant)
- 430A Family Resource Centers
- 432 Public Services for Children (Children's Trust Account)
- 432A Nevada Early Childhood Advisory Council
- 439 Administration of Public Health (Fund for a Healthy Nevada, Health Information Technology, Task Force on Alzheimer's Disease)
- 458A Prevention and Treatment of Problem Gambling

### ***Aging and Disability Services Division***

- 159 Procedures in Guardianship (Letters to Court Affirming/Denying need for Guardianship)
- 162A Execution of Power of Attorney (Financial Exploitation)
- 179A Repository for Information Concerning Crimes Against Older Persons (Statistical Data)
- 200 Crimes Against the Person (Abuse, Neglect, Exploitation or Isolation of Older Persons and Vulnerable Persons)
- 228 Attorney General's Unit for Investigation and Prosecution of Crimes Against Older Persons (Provide Information)
- 319 Assistance to Finance Housing (Housing Registry)
- 353 State Financial Administration (Temporary Advance from State General Fund)
- 388 System of Public Instruction (Pupils with Autism Spectrum Disorder and Pupils with Disabilities)
- 391 Commission on Professional Standards in Education (License to Teach American Sign Language)
- 426 Persons with Disabilities, Including Commission on Services for Persons with Disabilities
- 427A Services to Aging Persons and Persons with Disabilities
- 433 Mental Health and Developmental Disabilities, including Commission on Mental Health and Developmental Services
- 435 Services to Persons with Intellectual Disabilities and Related Conditions
- 439 Administration of Public Health, Fund for a Healthy Nevada (Independent Living Grants, 439.620; Senior Rx, 430.635; Disability Rx, 439.705)
- 449 Medical and Other Related Facilities (Licensing)
- 615 Vocational Rehabilitation (People Who Are Blind or Nearly Blind)
- 632 Advisory Committee on Nursing Assistants and Medication Aides
- 656A Interpreters and Real Time Captioning Providers (Registry and Regulation)
- 657 General Provisions for Banks and Related Organizations (Exploitation of Older Persons)

## Nevada Department of Health and Human Services, NRS by Division

- 673 Savings and Loan Associations (Designated Reporter)
- 677 Thrift Companies (Designated Reporter)
- 678 Credit Unions (Designated Reporter)
- 706 Motor Carriers (Taxicab Authority)

### ***Division of Child and Family Services***

- 62 Juvenile Justice
- 63 State Facilities for Detention of Children
- 127 Adoption of Children and Adults
- 128 Termination of Parental Rights
- 217 Assistance to Victims of Domestic Violence
- 424 Foster Homes for Children
- 432 Public Service for Children
- 432B Protection of Children from Abuse and Neglect
- 433B Mental Health (Additional Provisions Relating to Children)

### ***Division of Health Care Financing and Policy***

- 108 Statutory Liens (Liens to Recover Benefits Paid for Medicaid)
- 145 Summary Administration of Estates (DHHS Claims)
- 146 Support of Family - Distribution of Small Estates (DHHS Claims)
- 147 Presentation and Payment of Claims
- 228 Attorney General (Medicaid Fraud)
- 232 State Departments; Appointment of Deputies
- 422 Health Care Financing and Policy**
- 439A Planning for the Provision of Health Care
- 439B Restraining Costs of Health Care
- 449 Medical and Other Related Facilities (Ensuring Quality of Care)
- 695C Health Maintenance Organizations (CHIP Contract)
- 695G Managed Care (DHCFP Exemption)

### ***Division of Welfare and Supportive Services***

- 31A Enforcement of Obligations for Support of Children
- 33 Injunctions (Child Support)
- 125B Obligation of Support
- 126 Parentage (Action to Determine Paternity)
- 281 (Public Employees) General Provisions (Education Leave Stipends)
- 319 Assistance to Finance Housing (Account for Low-Income Housing)
- 422A Welfare and Supportive Services**
- 425 Support of Dependent Children
- 449 Medical and Other Related Facilities (Establishment of Paternity)
- 702 Energy Assistance

# Nevada Department of Health and Human Services, NRS by Division

## *Division of Public and Behavioral Health*

- 4.373 Suspension of Sentence; Conditions of Suspension; Reduction of Sentence; Arrest for Violation of Condition of Suspension
- 5.055 Suspension of Sentence; Conditions of Suspension; Reduction of Sentence; Arrest for Violation of Condition of Suspension
- 41.503 Hospital Care or Assistance Necessitated by Traumatic Injury; Presumption Regarding Follow-Up Care
- 62A.110 "Evaluation Center" Defined
- 62A.340 "Treatment Facility" Defined
- 62E.620 Evaluation of Child Who Committed Certain Acts Involving Alcohol or Controlled Substance; Program of Treatment; Treatment Facility not Liable for Acts of Child; Confidentiality of Information; Driving Under Influence Included in Driver's Record of Child
- 175.539 Acquittal by Reason of Insanity: Defendant to be Examined; Hearing to be Held to Determine Whether Defendant is Mentally Ill; Procedure for Committing Defendant to Custody of Division of Public and Behavioral Health
- 176.01247 Subcommittee on Medical Use of Marijuana: Creation; Chair; Members; Duties; Salaries and Per Diem [Effective April 1, 2014]
- 176.156 Disclosure of Report of Presentence or General Investigation; Persons Entitled to Use Report; Confidentiality of Report
- 178.3983 "Division" Defined
- 200.485 Battery which Constitutes Domestic Violence: Penalties; Referring Child for Counseling; Restriction Against Dismissal, Probation and Suspension; Definitions
- 209.3515 Director may Request or Provide Medical or Mental Health Records of Certain Offenders
- 209.385 Testing Offenders for Exposure to Human Immunodeficiency Virus; Disclosure of Name of Offender whose Tests are Positive; Segregation of Offender; Duties of Director
- 209.4232 "Division" Defined
- 223.150 Delineation of Areas Subject to Flooding; Information to be Furnished to Planning Agencies; Cooperation of Division of Public and Behavioral Health of Department of Health and Human Services
- 232.300 Creation; Divisions; Responsibility for Administering Law
- 232.320 Appointment of Administrators of Divisions; Powers and Duties of Director
- 232.350 Deputies and Chief Assistants of Administrators of Divisions
- 232.361 Creation; Composition; Chair; Terms of Members; Vacancies
- 232.363 Meetings; Quorum; Salary; Expenses; Restriction on Ownership of or Employment by Certain Enterprises
- 244.406 Financial Support of Office
- 277.0655 Cooperative Agreements for Educational Services at Hospital or other Facility that Provides Residential Treatment to Children
- 278.808 Advisory Planning Commission: Appointment; Composition; Terms; Vacancies: Quorum (Tahoe Regional Planning Compact)
- 289.240 Certain Employees of Division of Public and Behavioral Health of Department of Health and Human Services
- 318.170 Water, Drainage, Sewerage and Disposal of Garbage and other Refuse; Approval of System; Additional Powers
- 353.349 Temporary Advance from State General Fund for Authorized Expenses of Division of Public and Behavioral Health of Department of Health and Human Services
- 372A.075 Tax on Sale of Marijuana and Marijuana Products: Imposition; Rates; Distribution of Revenue Collected; Duty of Department to Regularly Review Rates [Effective April 1, 2014]

## Nevada Department of Health and Human Services, NRS by Division

- 387.1225 Reimbursement to Hospital or Other Facility that Provides Residential Treatment to Children and Operates Licensed Private School; Request for and Amount of Reimbursement
- 388.421 Maintenance and Storage in Secure Location by Public School; Policy Regarding Proper Handling and Transportation; Annual Report to Division of Public and Behavioral Health Concerning Doses Administered
- 392.420 Physical Examinations of Pupils; Representative Sample of Height and Weight of Pupils in Certain School Districts; Qualifications of Persons to Conduct Examinations; Notice to Parent of Examination and Opportunity for Exemption; Report of Results to Chief Medical Officer [Effective through June 30, 2015
- 392.435 Immunization of Pupils: Certificate Prerequisite to Enrollment; Conditional Enrollment; Effect of Military Transfer of Parent of Child; Consequences for Failure to Immunize; Report to Division of Public and Behavioral Health; Inclusion of Certificate in Pupil's Record
- 394.192 Immunization of Pupils: Certificate Prerequisite to Enrollment; Conditional Enrollment; Effect of Failure to Immunize; Report to Division of Public and Behavioral Health; Inclusion of Certificate in Pupil's Record
- 395.070 Interagency Panel: Responsibility; Membership; Duties
- 396.521 Genetics Program: Establishment
- 396.525 Genetics Program: Confidentiality of Records and Information; Exceptions
- 396.526 Genetics Program: Qualifications of Personnel; Exemption
- 408.573 Nevada Bicycle and Pedestrian Advisory Board: Creation; Appointment, Terms and Compensation of Members
- 414.170 Board of Search and Rescue: Creation; Members; Terms
- 414.147 Appointment of Administrators; Management, Maintenance and Operation; Schedule of Rates; Location
- 422A.037 "Division of Public and Behavioral Health" Defined
- 432A Services and Facilities for Care of Children
- 433 Mental Health
- 433A Admission to Mental Health Facilities or Programs of Community-Based or Outpatient Services; Hospitalization
- 433B.090 "Person Professionally Qualified in the Field of Psychiatric Mental Health" Defined
- 433B.130 Administrator: Powers and Duties
- 433B.140 Coordination with Administrator of Division of Public and Behavioral Health: Compliance with Agreements; Acceptance for Admission to Division Facility
- 433B.190 Adoption of Regulations Concerning Abuse and Neglect of Consumers
- 433B.333 Establishment of Mental Health Consortia; Members
- 439 Administration of Public Health
- 439A Planning for the Provision of Health Care
- 439B Restraining Costs of Health Care
- 440 Vital Statistics
- 441A Communicable Diseases
- 442 Maternal and Child Health
- 444 Sanitation
- 445A Water Controls (Concentration of Fluoride)
- 446 Food Establishments
- 447 Public Accommodations
- 449 Medical Facilities and Other Related Facilities
- 450B Emergency Medical Services
- 451 Dead Bodies

## Nevada Department of Health and Human Services, NRS by Division

|           |   |
|-----------|---|
| 452       | Cemeteries  |
| 453       | Controlled Substances: Uniform Controlled Substances Act  |
| 453A      | Medical Use of Marijuana  |
| 454       | Poisons; Dangerous Drugs and Hypodermics  |
| 457       | Cancer  |
| 458       | Abuse of Alcohol and Drugs  |
| 459       | Hazardous Materials   |
| 484C      | Driving Under the Influence of Alcohol or a Prohibited Substance  |
| 543       | Control of Floods   |
| 583       | Meat, Fish, Produce, Poultry and Eggs   |
| 585       | Food, Drugs and Cosmetics: Adulteration; Labels; Brands   |
| 608.156   | Benefits for Health Care: Expenses for Treatment of Abuse of Alcohol and Drugs  |
| 608.255   | Relationships which do not Constitute Employment Relationships for Purposes of Minimum Wage   |
| 616A.205  | “Employee”: Volunteer Workers at Facilities for Inpatients of Division of Public  |
| 617.135   | “Police Officer” Defined  |
| 618.765   | Regulations of Division: Standards and Procedures   |
| 622.315   | Sharing of Information Relating to Public Health Concerns; Joint Investigations with Division of Public and Behavioral Health of Department of Health and Human Services  |
| 622A.120  | Exemption of Certain Regulatory Bodies  |
| 629.079   | Referral of Complaints to Appropriate Jurisdiction; Notification of Immediate Threats to Health and Safety of Public; Immunity from Civil Liability for Certain Actions; Definitions  |
| 630.133   | Board Required Notifying Division of Public and Behavioral Health of Department of Health and Human Services Upon Identification of Certain Sentinel Events.  |
| 630.262   | Authorized Facility License to Practice Medicine as Psychiatrist in Certain Mental Health Centers.  |
| 630.293   | Physician Prohibited from Retaliation or Discriminating Against Certain Persons for Reporting or Participation in Investigation or Proceeding Relating to Sentinel Event or Conduct of Physician or Other Persons or Refusing to Engage in Unlawful Conduct; Restriction of Right Prohibited.                             |
| 630.30665 | Physician Required to Report Certain Information Concerning Surgeries and Sentinel Events; Effect of Failure to Report; Duties of Board; Confidentiality of Report; Applicability   |
| 630.307   | General Requirements for Filing Complaint; Medical Facilities and Societies Required to Report Certain Information Concerning Privileges and Disciplinary Action; Administrative Penalties for Failure to Report; Clerk of Court Required to Report Certain Information Concerning Court Actions; Retention of Complaints |
| 631.275   | Restricted License to Practice Dentistry at Facility that Provides Dental Services to Persons of Low Income   |
| 631.310   | Dental Hygienists: Places of Practice; Supervision; Provision of Services   |
| 632.072   | Advisory Committee on Nursing Assistants and Medication Aides: Creation; Appointment; Duties  |
| 632.121   | Board Required to Notify Division of Public and Behavioral Health of Department of Health and Human Services Upon Identification of Certain Sentinel Events   |
| 632.127   | List of Approved Training Programs; Board to Share Information with State Agency Concerning Disciplinary Action Against Nursing Assistants or Medication Aides – Certified Employed in Agency’s Facilities  |
| 633.283   | Board Required to Notify Upon Identification of Certain Sentinel Events   |
| 633.417   | Authorized Facility License to Practice Osteopathic Medicine as Psychiatrist in Certain Mental Health Centers   |
| 633.505   | Osteopathic Physician Prohibited from Retaliating or Discrimination Against Certain Persons for Reporting or Participation in Investigation or Proceeding Relating to Sentinel Event or Conduct of Osteopathic Physician or Other Persons or Refusing to Engage in Unlawful Conduct; Restriction of                       |

## Nevada Department of Health and Human Services, NRS by Division

|           |  |
|-----------|--|
|           | Right Prohibited   |
| 633.524   | Osteopathic Physician Required to Report Certain Information Concerning Surgeries and Sentinel Events; Effect of Failure to Report; Duties of Board; Confidentiality of Report; Applicability  |
| 633.533   | General Requirements for Filing Complaint; Medical Facilities and Societies Required to Report Certain Information Concerning Privileges and Disciplinary Action; Administrative Penalties for Failure to Report; Clerk of Court Required to Report Certain Information Concerning Court Actions |
| 639.004   | “Chart Order” Defined  |
| 639.0095  | “Nuclear Pharmacist” Defined   |
| 639.0097  | “Nuclear Pharmacy” Defined   |
| 639.074   | Regulations: Registered Nurses Who Participate in Certain Public Health Programs or Provide Certain Mental Health Services   |
| 639.2327  | Maintenance of Stocks of Drugs by Certain Facilities   |
| 639.23275 | Delivery of Controlled Substance or Dangerous Drug to Hospital, Facility for Intermediate Care or Facility for Skilled Nursing which does not have Pharmacy on Premises  |
| 652       | Medical Laboratories   |
| 689A.046  | Benefits for Treatment of Abuse of Alcohol or Drugs  |
| 689C.167  | Coverage for Abuse of Alcohol or Drugs: Benefits   |
| 704.6672  | Review of Water Supply and Sewage Service for Certain Proposed Subdivisions: Duties of Commission; Fee; Exceptions   |

### *Office of the State Public Defender*

|            |  |
|------------|--|
| 7          | Attorneys and Counselors at Law (Appointed Defense Counsel in Criminal Proceedings)            |
| 34         | Writs; Certiorari; Mandamus; Prohibition; Habeas Corpus (Appointment of Counsel for Indigents) |
| 62         | Title 5 – Juvenile Justice   |
| 171        | Proceedings to Commitment (Appointment of Attorney for Indigent Defendant)                     |
| <b>180</b> | <b>State Public Defender</b>   |
| 260        | County Public Defenders (May Contract for Services of State Public Defender)                   |
| 284        | Unclassified Service   |
| 432B       | Child in Need of Protection  |

# Nevada Department of Health and Human Services, Phone List

## Phone Numbers of Key Personnel

Updated February 2014

|   |  |  |
|---|--|--|
| <b>Director's Office</b>                                |  | <b>775-684-4000</b>                              |
|   | <b>Michael J. Willden, Director</b>                                |  |
|   | <b>Amber Joiner, Deputy Director</b>                               | <b>775-684-4015</b>                              |
|   | <b>Kareen Masters, Deputy Director</b>                             | <b>775-684-4012</b>                              |
|   | <b>Ellen Crecelius, Deputy Director</b>                            | <b>775-684-4004</b>                              |
|   | Mary Woods, Public Information Officer                             | 775-684-4024,<br>775-450-3820 (cell)             |
| <b>Office of Consumer Health Assistance</b>             | Janise Holmes, Governor's Consumer Health Advocate                 | 702-486-3587                                     |
| <b>Grants Management</b>                                | Laurie Olson, Chief  | 775-684-4020                                     |
| <b>Grants Management</b>                                | Toby Hyman (Las Vegas)   | 702-486-3527                                     |
| <b>Head Start and Literacy</b>                          | Temporary Contact Number   | 775-684-4000                                     |
| <b>Health Information Technology</b>                    | Lynn O'Mara, Coordinator   | 775-684-7593                                     |
| <b>IDEA Part-C</b>                                      | Susanne De Vere  | 775-687-0508                                     |
| <b>Aging and Disability Services Division</b>           |  | <b>775-687-4210</b>                              |
|   | <b>Jane Gruner, Administrator</b>                                  | <b>775-687-0515</b>                              |
|   | <b>Tina Gerber-Winn, Deputy Administrator, Programs</b>            | <b>775-687-0557</b>                              |
|   | <b>Janet Murphy, Deputy Administrator, Administrative Services</b> | <b>702-687-0583</b>                              |
|   | <b>Michele Ferral, Deputy Administrator</b>                        | <b>775-486-8868 x 238</b>                        |
|   | Sally Ramm, Specialist for the Rights of Elderly Persons           | 775-688-2964 x 253                               |
| <b>Community Based Care Unit</b>                        | Tammy Ritter, Chief  | 775-687-0556                                     |
| <b>Disability Services Unit</b>                         | Laura Valentine  | 775-687-0523                                     |
| <b>Elder Rights Unit</b>                                | Jill Berntson, Chief   | 775-687-0535                                     |
| <b>Resource Development Unit</b>                        | Cherrill Cristman, Chief   | 775-687-0520                                     |
| <b>Social Services Unit</b>                             | Jeff Duncan  | 702-486-3558                                     |
| <b>Desert Regional Center</b>                           | Tom Smith, Director  | 702-486-6199                                     |
| <b>Rural Regional Center</b>                            | Barbara Legier, Director   | 775-688-1030 x 2140                              |
| <b>Elder Protective Services Referral</b>               |  | Central Intake<br>702-486-6930<br>1-888-729-0571 |
| <b>Senior Medicare Patrol (SMP)</b>                     |  | 702-486-3796                                     |
| <b>State Health Insurance Assistance Program (SHIP)</b> |  | 702-486-3478,<br>1-800-307-4444                  |

## Nevada Department of Health and Human Services, Phone List

| <b><i>Division of Child and Family Services</i></b> |   | <b>775-684-4400</b>      |
|---|---|--------------------------|
|   | <b>Amber Howell, Administrator</b>            | <b>775-684-4459</b>      |
| <b>Child Welfare</b>                                | <b>Jill Marano, Deputy Administrator</b>      | <b>702-486-7712</b>      |
| <b>Children's Mental Health</b>                     | <b>Kelly Wooldridge, Deputy Administrator</b> | <b>775-688-1636</b>      |
| <b>Finance and Administration</b>                   | <b>Danette Kluever, Deputy Administrator</b>  | <b>775-684-4414</b>      |
| <b>Juvenile Justice</b>                             | <b>Steve McBride, Deputy Administrator</b>    | <b>775-688-1421 #223</b> |
| <b>Caliente Youth Center</b>                        | Bruce Burgess, Acting Superintendent          | 775-726-8213             |
| <b>Nevada Youth Training Center</b>                 | Rich Gloeckner, Superintendent                | 775-738-7182             |
| <b>Rural Child Welfare</b>                          | Betsy Crumrine, Manager                       | 775-687-4609             |
| <b>Youth Parole Bureau</b>                          | James Kingera, Chief                          | 702-486-5035             |

| <b><i>Division of Health Care Financing and Policy</i></b> |   | <b>775-684-3600</b> |
|--|---|---------------------|
|  | <b>Laurie Squartsoff, Administrator</b>       | <b>775-684-3677</b> |
|  | <b>Elizabeth Aiello, Deputy Administrator</b> | <b>775-684-3679</b> |
|  | <b>Leah Lamborn, ASO IV / Deputy – Fiscal</b> | <b>775-684-3668</b> |
| <b>Accounting and Budget</b>                               | Theresa Rooker, Chief                         | 775-684-3770        |
| <b>Audit Unit</b>  | Patty Thompson, Chief                         | 775-684-3713        |
| <b>Business Lines</b>                                      | John Whaley, Chief                            | 775-684-3691        |
| <b>Compliance</b>  | Marta Stagliano, Chief                        | 775-684-3623        |
| <b>Long Term Support Services</b>                          | Jennifer Frischmann                           | 775-684-3747        |
| <b>Grants Management</b>                                   | Gloria Macdonald, ASO III                     | 775-687-8407        |
| <b>IT/MMIS</b>   | Sandie Ruybalid, Acting Manager               | 775-684-3736        |
| <b>Nevada Check Up</b>                                     | Jessica Crouch (Temporary)                    | 775-684-3790        |
| <b>Program Services</b>                                    | Coleen Lawrence, Chief                        | 775-684-3744        |
| <b>Rates and Cost Containment</b>                          | Jan Prentice, Chief                           | 775-684-3791        |

| <b><i>Division of Welfare and Supportive Services</i></b>       |  | <b>775-684-0500</b> |
|---|--|---------------------|
|   | <b>Mike McMahon, Administrator</b>         | <b>775-684-0509</b> |
|   | <b>David Stewart, Deputy Administrator</b> | <b>775-684-0767</b> |
|   | <b>Steve Fisher, Deputy Administrator</b>  | <b>775-684-0549</b> |
|   | <b>Sue Smith, Deputy Administrator</b>     | <b>775-684-0647</b> |
| <b>Budget and Statistics</b>                                    | Tami Dufresne, Chief                       | 775-684-0655        |
| <b>Child Care</b>   | Jack Zenteno, Chief                        | 775-684-0630        |
| <b>Child Support Enforcement</b>                                | Louise Bush, Chief                         | 775-684-0705        |
| <b>Eligibility and Payments (TANF and Medicaid eligibility)</b> | Naomi Lewis, Chief                         | 775-684-0618        |
| <b>Employment and Support Services</b>                          | Lori Wilson, Chief                         | 775-684-0626        |
| <b>Investigations and Recovery</b>                              | Brenda Burch, Chief                        | 775-684-0559        |

## Nevada Department of Health and Human Services, Phone List

|   |   |                           |
|---|---|---------------------------|
| <b><i>Division of Public and Behavioral Health</i></b>              |   | <b>775-684-4200</b>       |
|   | <b>Richard Whitley, Administrator</b>               | <b>775-684-4224</b>       |
|   | <b>Marla McDade Williams, Deputy Administrator</b>  | <b>775-684-4204</b>       |
|   | <b>Ellen Richardson-Adams, Deputy Administrator</b> | <b>702-486-3090</b>       |
|   | <b>Vanessa Alpers, Deputy Administrator</b>         | <b>775-684-4180</b>       |
|   | <b>Michele Ferrall</b>                              | <b>702-486-8868 #238</b>  |
|   | Christina Griffith, Acting PIO                      | 775-684-4217              |
| <b>Bureau of Child, Family and Community Wellness</b>               | Christi Mackie, Chief                               | 775-684-5914              |
| <b>Bureau of Health Care Quality and Compliance</b>                 | Kyle Devine, Chief                                  | 775-684-1062              |
| <b>Bureau of Health Statistics, Planning and Emergency Response</b> | Chad Westom   | 775-684-4155              |
| <b>Deputy Administrator, Community Services</b>                     | Mary Wherry, Director                               | 775-684-4018              |
| <b>State Epidemiologist</b>   | Ihsan Azzam   | 775-684-5946              |
| <b>Chief Medical Officer</b>  | Tracey Green, M.D.                                  | 775-684-3215              |
| <b>Lakes Crossing</b>   | Betsy Neighbors, Ph.D., Director                    | 775-688-1900 x 254        |
| <b>NNAMHS</b>   | Cody Phinney, Director                              | 775-688-2010              |
| <b>NNAMHS</b>   | Yvette Kaunismaki, M.D., NNAMHS Medical Director    | 775-688-2015              |
| <b>Rural Regional Center and Rural Clinics</b>                      | Kathryn Baughman, Director                          | 775-687-5162 x 327        |
| <b>Substance Abuse Prevention and Treatment Agency</b>              | Mary Wherry   | 775-684-4018              |
| <b>SNAMHS</b>   | Ellen Richardson-Adams, Acting Director             | 702-486-3090              |
| <b>SNAMHS</b>   | Chelsea Szklany, Director, Rawson-Neal              | 702-486-0673              |
| <b><i>Public Defender</i></b>                                       |   | <b>775-687-4880</b>       |
|   | <b>Karin Kreizenbeck, State Public Defender</b>     | <b>775-687-4880 x 230</b> |

**Nevada Department of Health and Human Services, Phone List**

Page intentionally left blank.

# Nevada Department of Health and Human Services, Nassir Notes Index

## Index

|  |  |
|--|--|
| 2-1-1 Partnership ..... 1  | Low Birth Weight ..... 86  |
| ADAP ..... <i>See</i> Ryan White AIDS Drug Assistance Program              | Teen Birth Rate ..... 86   |
| Adoption ..... 84  | Vital Records and Statistics ..... 64  |
| Average Months until Adoption..... 84                                      | Breast and Cervical Cancer ..... <i>See</i> Women's Health Connection            |
| Subsidies ..... 31   | Cancer   |
| Advocate for Elders..... 9   | Colorectal Cancer Screenings ..... 90  |
| Aging and Disability Services Division                                     | Nevada Central Cancer Registry ..... 71  |
| Advocate for Elders..... 9   | Cancer Deaths..... 89  |
| Community Options Program for the Elderly ..... 10                         | Cardiovascular Death..... 89   |
| Developmental Services..... 29   | CHAP ..... <i>See</i> Child Health Assurance Program                             |
| Disability Services – Assistive Technology for Independent Living ..... 25 | Check Up..... 50   |
| Disability Services – Autism Treatment Assistance Program..... 28          | Child Care..... 96   |
| Disability Services - Personal Assistance Services..... 26                 | Average Family Co-payment..... 96  |
| Disability Services - Traumatic Brain Injury Services. 27                  | Families with \$0 Co-payment ..... 96  |
| Early Intervention Services ..... 30                                       | Map - Participation Rate by Region ..... 100                                     |
| Elder Protective Services..... 11  | Child Care and Development Program ..... 55                                      |
| Homemaker Program..... 12  | Child Death Rate ..... 86  |
| Independent Living Grants..... 13  | Child Health Assurance Program ..... 49  |
| Long Term Care Ombudsman Program ..... 14                                  | Child Protective Services ..... 32   |
| National Family Caregiver Program ..... 18                                 | Child Support Enforcement ..... 97   |
| NRS Chapters for Statutory Authority..... 105                              | Arrearages Collected ..... 98  |
| Phone Numbers of Key Personnel ..... 111                                   | Cost Effectiveness..... 98   |
| Senior Nutrition - Home Delivered Meals..... 17                            | Current Support Collected..... 98  |
| Senior Nutrition - Meals in Congregate Settings ..... 16                   | Paternity Established ..... 97   |
| Senior Ride Program ..... 19   | Performance Indicators ..... 97  |
| Senior Rx and Disability Rx..... 20  | Support Orders Established ..... 98  |
| Senior Rx and Disability Rx Dental Program ..... 21                        | Child Support Enforcement Program ..... 56                                       |
| Senior Support Services ..... 15   | Child Welfare ..... 83   |
| State Health Insurance Assistance Program ..... 22                         | Adoption ..... 84  |
| Taxi Assistance Program ..... 19   | Days to Initiation of Services ..... 83  |
| Waiver - Assisted Living ..... 23  | Foster Care..... 84  |
| Waiver - Home and Community Based..... 24                                  | Maltreatment ..... 83  |
| AIDS   | Maltreatment Response Time ..... 83  |
| HIV Prevention Program ..... 69  | Children..... 82, 83   |
| HIV-AIDS Surveillance Program..... 70                                      | Child Death Rate ..... 86  |
| Ryan White AIDS Drug Assistance Program ..... 68                           | Children in Families where No Parent Has Full-Time Year-Round Employment..... 82 |
| Appropriate Timing of Antibiotics..... 91                                  | Households with Children..... 82   |
| Asset Limit for TANF..... 95   | In Single Parent Families..... 83  |
| Assisted Living ..... 23   | In Working Poor Families..... 82   |
| Assistive Technology for Independent Living..... 25                        | Infant Mortality Rate ..... 86   |
| ATAP..... <i>See</i> Autism Treatment Assistance Program                   | Low Birth Weight ..... 86  |
| Autism Treatment Assistance Program ..... 28                               | Low Income Families ..... 82   |
| Binge Drinking ..... 88  | Maltreatment ..... 83  |
| Births   | Maltreatment Fatalities..... 83  |

# Nevada Department of Health and Human Services, Nassir Notes Index

|   |  |  |        |
|---|--|--|--------|
| Map - Child Poverty by County .....             | 101  | Dental Program.....  | 21     |
| Map - Persons under 18 Years by County .....    | 102  | Developmental Services .....   | 29     |
| Population under Age 18 .....                   | 82   | Expenditures.....  | 85     |
| Prenatal Care.....                              | 89   | Family Support Spending.....   | 85     |
| Share in Poverty .....                          | 81   | Diabetes.....  | 88     |
| Teen Birth Rate .....                           | 86   | Diet .....   | 87     |
| Teen Suicide .....                              | 94   | Differential Response .....  | 4      |
| Uninsured.....                                  | 92   | Director's Office  |        |
| Vaccinations .....                              | 89   | 2-1-1 Partnership.....   | 1      |
| Children's Clinical Services .....              | 38   | Differential Response .....  | 4      |
| CHIP.....                                       | <i>See Nevada Check Up</i>                           | Grants Management Unit.....  | 5      |
| Cholesterol.....                                | 88   | Head Start Collaboration and Early Childhood                         |        |
| Screenings .....                                | 90   | Systems Office .....   | 6      |
| Colorectal Cancer Screenings.....               | 90   | NRS Chapters for Statutory Authority .....                           | 105    |
| Community Options Program for the Elderly ..... | 10   | Office of Consumer Health Assistance .....                           | 2      |
| COPE.....                                       | <i>See Community Options Program for the Elderly</i> | Office of Health Information Technology.....                         | 7      |
| Counties  |  | Office of Minority Health.....                                       | 3      |
| Map - Child Care Participation Rate.....        | 100  | Phone Numbers of Key Personnel.....                                  | 111    |
| Map - Child Poverty.....                        | 101  | Disability ... 85, <i>See Aging and Disability Services Division</i> |        |
| Map - Employment to Population Ratio .....      | 101  | Employed Disabled .....  | 86     |
| Map - Median Household Income .....             | 101  | Rate per 1,000 Population.....                                       | 85     |
| Map - Native American Persons.....              | 102  | Seniors .....  | 85     |
| Map - Nevada Check Up Participation Rate.....   | 100  | Share of Children With Disability.....                               | 83     |
| Map - Persons Age 65 and Over.....              | 102  | Types of Disability - Children .....                                 | 83     |
| Map - Persons below Poverty .....               | 101  | Disability Rx.....   | 20, 21 |
| Map - Persons of Hispanic Origin.....           | 102  | Disability Services  |        |
| Map - Persons under 18 Years .....              | 102  | Assistive Technology for Independent Living .....                    | 25     |
| Map - Population .....                          | 102  | Autism Treatment Assistance Program .....                            | 28     |
| Map - SNAP Participation Rate .....             | 100  | Personal Assistance Services .....                                   | 26     |
| Map - TANF Cash Participation Rate .....        | 100  | Traumatic Brain Injury Services .....                                | 27     |
| Map - Total Medicaid Participation Rate .....   | 100  | Division of Child and Family Services                                |        |
| Map - Unemployment Rate .....                   | 101  | Adoption Subsidies .....   | 31     |
| Map - Uninsured .....                           | 101  | Child Protective Services .....                                      | 32     |
| Map - White Persons.....                        | 102  | Children's Clinical Services.....                                    | 38     |
| Map - WIC Participation Rate.....               | 100  | Early Childhood Services.....  | 33     |
| Population.....                                 | 79   | Foster Care - Independent Living.....                                | 35     |
| School Enrollment.....                          | 79   | Foster Care – Out-of-Home Placements.....                            | 34     |
| County Match.....                               | 51   | Juvenile Justice - Facilities .....                                  | 36     |
| CPS .....                                       | <i>See Child Protective Services</i>                 | Juvenile Justice - Youth Parole .....                                | 37     |
| Deaths  |  | NRS Chapters for Statutory Authority .....                           | 106    |
| Cancer Deaths .....                             | 89   | Phone Numbers of Key Personnel.....                                  | 111    |
| Cardiovascular Death .....                      | 89   | Residential Children's Services .....                                | 39     |
| Care Consistent with End of Life Wishes .....   | 92   | Residential Treatment Services .....                                 | 39     |
| Child Death Rate .....                          | 86   | Wraparound In Nevada .....   | 40     |
| Deaths in Low Mortality DRGs .....              | 91   | Division of Health Care Financing and Policy                         |        |
| Infant Mortality Rate.....                      | 86   | Health Insurance for Work Advancement.....                           | 42     |
| Suicide .....                                   | 94   | NRS Chapters for Statutory Authority .....                           | 106    |
| Vital Records and Statistics .....              | 64   | Phone Numbers of Key Personnel.....                                  | 112    |
| Demographics .....                              | 79   | Total Medicaid .....   | 41     |
| Map - Indicators by County.....                 | 102  | Waiver - Persons with Physical Disabilities.....                     | 43     |
| Dental Care .....                               | 90   | Division of Public and Behavioral Health                             |        |

# Nevada Department of Health and Human Services, Nassir Notes Index

|  |                                      |   |     |
|--|--------------------------------------|---|-----|
| Early Hearing Detection and Intervention .....                 | 60                                   | Map - Unemployment Rate by County.....                                    | 101 |
| HIV Prevention Program .....                                   | 69                                   | Personal Income per Capita.....   | 80  |
| HIV-AIDS Surveillance Program.....                             | 70                                   | State Economic Distress .....   | 80  |
| Immunization .....   | 61                                   | Unemployment Rate.....  | 80  |
| Lake's Crossing Center .....                                   | 76                                   | Elder Protective Services .....   | 11  |
| Medical Marijuana Registry .....                               | 73                                   | Elder Rights Advocates <i>See</i> Long Term Care Ombudsman<br>Program     |     |
| Mental Health Services .....                                   | 75                                   | Electronic Health Records.....  | 7   |
| Nevada Central Cancer Registry.....                            | 71                                   | Employer Sponsored Health Insurance .....                                 | 92  |
| Newborn Screening Program .....                                | 59                                   | Employment  |     |
| NRS Chapters for Statutory Authority.....                      | 107                                  | Employed Disabled .....   | 86  |
| Office of Suicide Prevention.....                              | 72                                   | Job Entry by TANF Recipients .....  | 95  |
| Oral Health Program .....                                      | 63                                   | Map - Employment to Population Ratio by County                            | 101 |
| Phone Numbers of Key Personnel .....                           | 112                                  | Energy Assistance Program .....   | 57  |
| Public Health and Clinical Services.....                       | 66                                   | Expenditures  |     |
| Ryan White AIDS Drug Assistance Program.....                   | 68                                   | Developmental Services .....  | 85  |
| Sexually Transmitted Disease Program.....                      | 67                                   | Family Support Spending.....  | 85  |
| Substance Abuse Prevention and Treatment Agency<br>.....       | 74                                   | Federal Expenditures per Capita .....                                     | 98  |
| Vital Records and Statistics .....                             | 64                                   | Mental Health.....  | 93  |
| Women, Infants, and Children Supplemental Food<br>Program..... | 62                                   | Family Caregiver Program .....  | 18  |
| Women's Health Connection .....                                | 65                                   | Family Support Spending.....  | 85  |
| Division of Welfare and Supportive Services                    |                                      | Federal Expenditures per Capita .....                                     | 98  |
| Child Care and Development Program .....                       | 55                                   | Federal Poverty Guideline .....   | 81  |
| Child Health Assurance Program .....                           | 49                                   | Female-Headed Households.....   | 81  |
| Child Support Enforcement Program.....                         | 56                                   | Flu Shot .....  | 90  |
| County Match.....  | 51                                   | Food Insecurity .....   | 97  |
| Energy Assistance Program.....                                 | 57                                   | Food Stamp Participation Rate .....                                       | 97  |
| Kinship Care .....   | 46                                   | Very High Food Insecurity.....  | 97  |
| Medical Assistance to the Aged, Blind, and Disabled<br>.....   | 52                                   | Food Stamps ..... <i>See</i> Supplemental Nutrition Assistance<br>Program |     |
| Nevada Check Up.....   | 50                                   | Foreclosure Rate.....   | 80  |
| New Employees of Nevada .....                                  | 47                                   | Foster Care   |     |
| NRS Chapters for Statutory Authority.....                      | 106                                  | Independent Living .....  | 35  |
| Phone Numbers of Key Personnel .....                           | 112                                  | Length of Stay .....  | 84  |
| Supplemental Nutrition Assistance Program.....                 | 53                                   | Out-of-Home Placements.....   | 34  |
| Supplemental Nutrition Employment and Training<br>Program..... | 54                                   | Frequent Mental Distress .....  | 93  |
| TANF Cash Total .....  | 45                                   | Fruits and Vegetables .....   | 87  |
| Total TANF Medicaid.....                                       | 48                                   | Funding .....   | 98  |
| Drug Use.....  | 88                                   | Federal Expenditures per Capita .....                                     | 98  |
| EAP .....  | <i>See</i> Energy Assistance Program | State and Local Tax Burden per Capita.....                                | 98  |
| Early Childhood Services .....                                 | 33                                   | State Tax Collections per Capita .....                                    | 98  |
| Early Hearing Detection and Intervention .....                 | 60                                   | GovCHA..... <i>See</i> Office of Consumer Health Assistance               |     |
| Early Intervention Services                                    |                                      | Grants Management Unit.....   | 5   |
| Part C - Individuals with Disabilities Education Act...30      |                                      | Head Start Collaboration and Early Childhood Systems.6                    |     |
| Earnings Gains by TANF Recipients.....                         | 95                                   | Health .....  | 86  |
| Economy.....   | 80                                   | Binge Drinking.....   | 88  |
| Foreclosure Rate .....   | 80                                   | Cancer Deaths.....  | 89  |
| Labor Force Participation Rate.....                            | 81                                   | Cardiovascular Death.....   | 89  |
| Map - Employment to Population Ratio by County                 | 101                                  | Child Death Rate .....  | 86  |
|  |                                      | Diabetes .....  | 88  |
|  |                                      | Diet .....  | 87  |

## Nevada Department of Health and Human Services, Nassir Notes Index

|  |   |
|--|---|
| Drug Use.....88                                      | HIT..... See Office of Health Information Technology            |
| Fruits and Vegetables.....87                         | HIV   |
| Heart Attack .....89                                 | HIV-AIDS Surveillance Program ..... 70                          |
| Heart Disease .....89                                | Prevention Program..... 69                                      |
| High Blood Pressure.....88                           | Ryan White AIDS Drug Assistance Program..... 68                 |
| High Cholesterol.....88                              | HIV-AIDS Surveillance Program ..... 70                          |
| Infant Mortality Rate.....86                         | HIWA..... See Health Insurance for Work Advancement             |
| Infectious Disease Cases .....88                     | Home and Community Based Services Spending ..... 96             |
| Low Birth Weight Babies.....86                       | Homemaker Program ..... 12                                      |
| Obesity .....88                                      | Hospice   |
| Overall Ranking - Casey Foundation .....86           | Care Consistent with End of Life Wishes ..... 92                |
| Physical Activities.....87                           | Households with Children..... 82                                |
| Poor Physical Health .....87                         | Immunization..... 61  |
| Self-Reported Health.....86                          | Income ..... 80   |
| Smoking.....87                                       | Households Receiving Public Assistance ..... 94                 |
| Stroke .....89                                       | Map - Median Household Income by County ..... 101               |
| Teen Birth Rate .....86                              | TANF Eligibility ..... 94                                       |
| Health Care .....89                                  | Independent Living - DCFS..... 35                               |
| Appropriate Timing of Antibiotics.....91             | Independent Living – Disability Services ..... 25               |
| Care Consistent with End of Life Wishes .....92      | Independent Living Grants - ADSD ..... 13                       |
| Cholesterol Screenings.....90                        | Infant Mortality Rate ..... 86                                  |
| Colorectal Cancer Screenings.....90                  | Infections due to Medical Care..... 91                          |
| Costs of Health Care Services for the Elderly.....96 | Infectious Disease Cases ..... 88                               |
| Deaths in Low Mortality DRGs .....91                 | Job Entry by TANF Recipients ..... 95                           |
| Flu Shot .....90                                     | Job Retention by TANF Recipients..... 95                        |
| Infections Due to Medical Care.....91                | Juvenile Justice  |
| Mammogram .....90                                    | Facilities ..... 36   |
| Pap Smear .....90                                    | Youth Parole ..... 37   |
| Prenatal Care.....89                                 | Kinship Care ..... 46   |
| Preventable Hospitalizations .....91                 | Labor Force Participation Rate ..... 81                         |
| Primary Care Physicians .....91                      | Lake’s Crossing Center ..... 76                                 |
| Public Mental Health Care System.....93              | LCC ..... See Lake’s Crossing Center                            |
| Recommended Hospital Care for Heart Failure .....91  | Long Term Care Ombudsman Program ..... 14                       |
| Recommended Hospital Care for Pneumonia .....92      | Low Birth Weight ..... 86                                       |
| Vaccinations .....89                                 | Low Income Families ..... 82                                    |
| Health Information Technology ..... 7                | Low Mortality DRGs Death Rate ..... 91                          |
| Health Insurance .....92                             | MAABD ..See Medical Assistance to the Aged, Blind, and Disabled |
| Employer Sponsored Insurance .....92                 | Mammogram ..... 90  |
| Premiums .....92                                     | Map   |
| Uninsured.....92                                     | Child Care Participation Rate by County..... 100                |
| Uninsured by County .....101                         | Child Poverty by County ..... 101                               |
| Uninsured Children .....92                           | Employment to Population Ratio by County ..... 101              |
| Health Insurance for Work Advancement .....42        | Median Household Income by County ..... 101                     |
| Health Status.....86                                 | Native American Persons by County ..... 102                     |
| Heart Attack .....89                                 | Nevada Check Up Participation Rate by County..... 100           |
| Heart Disease .....89                                | Persons Age 65 and Over by County ..... 102                     |
| Cardiovascular Death.....89                          | Persons below Poverty by County ..... 101                       |
| Heart Attack .....89                                 | Persons of Hispanic Origin by County..... 102                   |
| Recommended Hospital Care .....91                    | Persons under 18 Years by County ..... 102                      |
| Heart Failure .....91                                | Population by County ..... 102                                  |
| High Blood Pressure .....88                          |   |

# Nevada Department of Health and Human Services, Nassir Notes Index

|   |                                      |  |   |
|---|--------------------------------------|--|---|
| SNAP Participation Rate by County.....                    | 100                                  | Nursing Facility Residency Rate .....          | 85                                      |
| TANF Cash Participation Rate by County .....              | 100                                  | Nursing Facility Spending - Medicaid.....      | 96                                      |
| Total Medicaid Participation Rate by County .....         | 100                                  | Obesity.....                                   | 88                                      |
| Unemployment Rate by County.....                          | 101                                  | Office of Consumer Health Assistance .....     | 2                                       |
| Uninsured by County .....                                 | 101                                  | Office of Health Information Technology.....   | 7                                       |
| White Persons by County.....                              | 102                                  | Office of Minority Health.....                 | 3                                       |
| WIC Participation Rate by County.....                     | 100                                  | Oral Health                                    |   |
| Medicaid .....  | 96                                   | Dental Care .....                              | 90                                      |
| Child Health Assurance Program .....                      | 49                                   | Senior Rx and Disability Rx.....               | 21                                      |
| Costs of Services for the Elderly.....                    | 96                                   | Oral Health Program.....                       | 63                                      |
| County Match.....   | 51                                   | Organizational Chart.....                      | 103                                     |
| Home and Community Based Services Spending .....          | 96                                   | Out-of-Home Placements.....                    | <i>See Foster Care</i>                  |
| Map - Participation Rate by County.....                   | 100                                  | Pap Smear .....                                | 90                                      |
| Medical Assistance to the Aged, Blind, and Disabled ..... | 52                                   | PAS.....                                       | <i>See Personal Assistance Services</i> |
| Nursing Facility Spending.....                            | 96                                   | Personal Assistance Services .....             | 26                                      |
| Pregnant Women .....                                      | 96                                   | Persons with Physical Disabilities Waiver..... | 43                                      |
| Spending per Capita .....                                 | 96                                   | Phone Numbers of Key Personnel .....           | 111                                     |
| TANF Medicaid .....                                       | 48                                   | Physical Activities.....                       | 87                                      |
| Total Medicaid .....                                      | 41                                   | Pneumonia.....                                 | 92                                      |
| Medical Assistance to the Aged, Blind, and Disabled ...   | 52                                   | Population.....                                | 79                                      |
| Medical Marijuana Registry .....                          | 73                                   | By Age .....                                   | 79                                      |
| Mental Health .....                                       | 93                                   | By County.....                                 | 79                                      |
| Expenditures .....  | 93                                   | By Gender .....                                | 79                                      |
| Frequent Mental Distress .....                            | 93                                   | Growth.....                                    | 79                                      |
| Mentally Unhealthy Days.....                              | 93                                   | Map by County .....                            | 102                                     |
| Public Mental Health Care System.....                     | 93                                   | Minorities.....                                | 80                                      |
| Serious Mental Illness .....                              | 93                                   | Seniors .....                                  | 84                                      |
| Mental Health Services .....                              | 75                                   | Share in Poverty.....                          | 81                                      |
| Minorities  |                                      | Total Population .....                         | 79                                      |
| Map - Native American Persons by County .....             | 102                                  | Under Age 18 .....                             | 82                                      |
| Map - Persons of Hispanic Origin by County.....           | 102                                  | Poverty.....                                   | 81                                      |
| Office of Minority Health .....                           | 3                                    | By Gender .....                                | 81                                      |
| Share of Population.....                                  | 80                                   | Children in Poverty .....                      | 81                                      |
| Share of Total Population .....                           | 80                                   | Federal Poverty Guideline .....                | 81                                      |
| National Family Caregiver Program .....                   | 18                                   | Female-Headed Households.....                  | 81                                      |
| NBS.....  | <i>See Newborn Screening Program</i> | Low Income Families .....                      | 82                                      |
| NEON.....   | <i>See New Employees of Nevada</i>   | Map - Child Poverty by County.....             | 101                                     |
| Nevada Central Cancer Registry.....                       | 71                                   | Map - Persons below Poverty by County .....    | 101                                     |
| Nevada Check Up .....                                     | 50                                   | Seniors .....                                  | 84                                      |
| Map - Participation Rate by County.....                   | 100                                  | Share of Population in Poverty.....            | 81                                      |
| New Employees of Nevada .....                             | 47                                   | Share of Seniors in Poverty.....               | 81                                      |
| Newborn Screening Program.....                            | 59                                   | Working Poor.....                              | 82                                      |
| NRS Chapters for Statutory Authority.....                 | 105                                  | Working Poor Families with Children .....      | 82                                      |
| Aging and Disability Services Division .....              | 105                                  | Prenatal Care .....                            | 89                                      |
| Director's Office .....                                   | 105                                  | Preventable Hospitalizations .....             | 91                                      |
| Division of Child and Family Services.....                | 106                                  | Primary Care Physicians.....                   | 91                                      |
| Division of Health Care Financing and Policy.....         | 106                                  | Program Participation Rates.....               | 100                                     |
| Division of Public and Behavioral Health .....            | 107                                  | Public Assistance.....                         | 94                                      |
| Division of Welfare and Supportive Services .....         | 106                                  | Households Receiving Public Assistance .....   | 94                                      |
| Public Defender.....                                      | 110                                  | Public Defender .....                          | 77                                      |
|   |                                      | NRS Chapters for Statutory Authority .....     | 110                                     |

# Nevada Department of Health and Human Services, Nassir Notes Index

|   |   |
|---|---|
| <p>Phone Numbers of Key Personnel .....113</p> <p>Public Health and Clinical Services.....66</p> <p>Public Mental Health Care System.....93</p> <p>Residential Children’s Services.....39</p> <p>Residential Treatment Services.....39</p> <p>Ryan White AIDS Drug Assistance Program .....68</p> <p>SAPTA.. <i>See</i> Substance Abuse Prevention and Treatment Agency</p> <p>School Enrollment .....79</p> <p>Senior Nutrition - Home Delivered Meals.....17</p> <p>Senior Nutrition-Meals in Congregate Settings .....16</p> <p>Senior Ride Program .....19</p> <p>Senior Rx .....20, 21</p> <p>Senior Rx and Disability Rx - Dental Program .....21</p> <p>Senior Support Services .....15</p> <p>Seniors.....84, <i>See</i> Aging and Disability Services Division</p> <p style="padding-left: 20px;">Below Poverty Level.....84</p> <p style="padding-left: 20px;">Costs of Health Care Services for the Elderly.....96</p> <p style="padding-left: 20px;">Disability.....85</p> <p style="padding-left: 20px;">Flu Shot .....90</p> <p style="padding-left: 20px;">Map - Persons Age 65 and Over by County .....102</p> <p style="padding-left: 20px;">Nursing Facility Residency Rate .....85</p> <p style="padding-left: 20px;">Population Share.....84</p> <p style="padding-left: 20px;">Share in Poverty by Gender .....81</p> <p style="padding-left: 20px;">Share of Seniors in Poverty.....81</p> <p style="padding-left: 20px;">Suicide .....93</p> <p>Serious Mental Illness .....93</p> <p>Sexually Transmitted Disease Program.....67</p> <p>SHIP ..... <i>See</i> State Health Insurance Assistance Program</p> <p>Single Parent Families .....83</p> <p>Smoking</p> <p style="padding-left: 20px;">Share of Adults that Smoke .....87</p> <p>SNAP.... <i>See</i> Supplemental Nutrition Assistance Program</p> <p>SNAPET.....<i>See</i> Supplemental Nutrition Employment and Training Program</p> <p>State and Local Tax Burden per Capita .....98</p> <p>State Economic Distress.....80</p> <p>State Government Tax Collections per Capita .....98</p> <p>State Health Insurance Assistance Program .....22</p> <p>Stroke .....89</p> <p>Substance Abuse Prevention and Treatment Agency...74</p> <p>Suicide .....93</p> <p style="padding-left: 20px;">Office of Suicide Prevention.....72</p> <p style="padding-left: 20px;">Seniors.....93</p> <p style="padding-left: 20px;">Suicide Rate.....93</p> <p style="padding-left: 20px;">Teen Suicide .....94</p> <p>Supplemental Nutrition Assistance Program.....53</p> <p style="padding-left: 20px;">Average Monthly Benefit .....97</p> <p style="padding-left: 20px;">Caseload Increase .....97</p> <p style="padding-left: 20px;">Employment and Training Program .....54</p> <p style="padding-left: 20px;">Food Stamp Participation Rate .....97</p> | <p>Map - Participation Rate by County..... 100</p> <p>Share of Families Receiving ..... 97</p> <p>Supplemental Nutrition Employment and Training Program ..... 54</p> <p>TANF ..... <i>See</i> Temporary Assistance for Needy Families</p> <p>TANF Medicaid..... 48</p> <p>Taxes</p> <p style="padding-left: 20px;">State and Local Tax Burden per Capita..... 98</p> <p style="padding-left: 20px;">State Tax Collections per Capita ..... 98</p> <p>Taxi Assistance Program ..... 19</p> <p>TBI.....<i>See</i> Traumatic Brain Injury Services</p> <p>Teen Birth Rate ..... 86</p> <p>Temporary Assistance for Needy Families</p> <p style="padding-left: 20px;">Asset Limit ..... 95</p> <p style="padding-left: 20px;">Earnings Gains ..... 95</p> <p style="padding-left: 20px;">Job Entry ..... 95</p> <p style="padding-left: 20px;">Job Retention..... 95</p> <p style="padding-left: 20px;">Kinship Care ..... 46</p> <p style="padding-left: 20px;">Map - Participation Rate by County..... 100</p> <p style="padding-left: 20px;">Maximum Income for TANF Eligibility ..... 94</p> <p style="padding-left: 20px;">Maximum TANF Benefit..... 94</p> <p style="padding-left: 20px;">TANF Cash Total..... 45</p> <p style="padding-left: 20px;">TANF Medicaid..... 48</p> <p style="padding-left: 20px;">Work Participation Hours ..... 95</p> <p style="padding-left: 20px;">Work Participation Rate ..... 95</p> <p>Traumatic Brain Injury Services ..... 27</p> <p>Unemployment</p> <p style="padding-left: 20px;">Average Annual Rate ..... 80</p> <p style="padding-left: 20px;">Children in Families where No Parent Has Full-Time Year-Round Employment..... 82</p> <p style="padding-left: 20px;">Map – Unemployment Rate by County ..... 101</p> <p style="padding-left: 20px;">Unemployment Rate..... 80</p> <p>Uninsured ..... 92</p> <p style="padding-left: 20px;">Map by County ..... 101</p> <p>Vaccinations..... 61, 89</p> <p style="padding-left: 20px;">Flu Shot.....90</p> <p>Vital Records and Statistics..... 64</p> <p>Waiver</p> <p style="padding-left: 20px;">Assisted Living..... 23</p> <p style="padding-left: 20px;">Home and Community Based ..... 24</p> <p style="padding-left: 20px;">Persons with Physical Disabilities ..... 43</p> <p>Waiver for Independent Nevadans ..... <i>See</i> Persons with Physical Disabilities Waiver</p> <p>Welfare .... <i>See</i> Temporary Assistance for Needy Families</p> <p>WHC..... <i>See</i> Women's Health Connection</p> <p>WIC ..... <i>See</i> Women, Infants, and Children Supplemental Food Program</p> <p>Women</p> <p style="padding-left: 20px;">Female-Headed Households in Poverty ..... 81</p> <p style="padding-left: 20px;">Share in Poverty..... 81</p> |
|---|---|

## Nevada Department of Health and Human Services, Nassir Notes Index

|   |     |   |    |
|---|-----|---|----|
| Women, Infants, and Children Supplemental Food Program..... | 62  | Prenatal Care .....                     | 89 |
| Map - Participation Rate by County.....                     | 100 | Work Participation - TANF               |    |
| Women's Health Connection Program .....                     | 65  | Hours per Week.....                     | 95 |
| Women's Health  |     | Work Participation Rate - TANF.....     | 95 |
| Mammogram .....   | 90  | Working Poor                            |    |
| Medicaid Coverage for Pregnant Women .....                  | 96  | Definition of Working Poor Family ..... | 82 |
| Pap Smear .....   | 90  | Families with Children .....            | 82 |
|   |     | Wraparound In Nevada .....              | 40 |