Delivering Equitable Care for Rural and Underserved Nevadans



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Learning Objectives

- Provide an overview of the current healthcare needs, challenges, and barriers of Nevadans living in rural communities.
- Understand what resources are currently available through Community Health Centers (CHCs) or Federally Qualified Health Centers (FQHCs) to Nevadans in rural communities.
- Understand opportunities and solutions to enhance access to care for Nevadans living in rural communities.



BRINGING QUALITY HEALTHCARE TO NEVADA'S COMMUNITIES

Current healthcare needs, challenges and barriers of Nevadan's living in rural communities





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A Vast Nevada – Reaching Those in Need

- Nevada is the 7th largest state, with 110,561 mi² of area
- Two counties are among the largest in the country
 - Nye County at 18,158.73 square miles (3rd largest)
 - Elko County at 17,202.94 square miles (4th largest)
- Our patients live in urban, rural, and frontier areas





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What Are Rural and Frontier Counties?

Frontier counties are different from rural counties by being more remote in terms of travel time and distance from the nearest population centers with more specialized medical care and facilities. Not based on population.







Source - Nevada Rural and Frontier Health Data Book 2023

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Where Are NV's Rural/Frontier Counties?

- Urban Counties (3) Carson City, Clark, and Washoe
- Rural Counties (3) Douglas, Lyon, and Storey
- Frontier Counties (11)

Humboldt	Elko
Pershing	Churchill
Lander	Eureka
White Pine	Mineral
Esmeralda	Nye
Lincoln	







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Population Distribution

Rural and Frontier Counties

- 86.9% of land mass 95,431 square miles
- 7.6% of state population 302,794 residents
- Population projected to grow by 10% in next decade
- Four fastest growing counties between 2011 and 2021:
 - Esmeralda 21.2%
 - Lyon 10.7%
 - Nye 10.7%
 - Elko 9.4%





Source - Nevada Rural and Frontier Health Data Book 2023

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Population Distribution – County and Region

Urban Counties

- 3 counties
- 13.1% of land mass
- 2.9 million population
- 92.4% of state population





Source – Nevada Rural and Frontier Health Data Book 2023

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Conveying a Sense of Scale

Travel in Nevada can involve many hours of driving

- Las Vegas to Carson = 430.7 miles (6 hours and 52 minutes)
- Las Vegas to Elko = 421.6 miles (6 hours and 33 minutes)
- Carson City to Elko = 316.8 miles (4 hours and 35 minutes)
- Las Vegas to Amargosa = 101.6 miles (1 hours and 32 minutes)
- **Elko to Jackpot** = 117 miles (1 hour and 44 minutes)
- Elko to Wendover = 107 miles (1 hour 35 minutes)





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Health Insurance Coverage – Rural and Frontier Nevada

In 2020:

- 10% of residents were uninsured (30,587)
- 11.7% under the age of 65 were uninsured
- 5,794 of the uninsured were children under age 19

Currently (January 2023)

- 924,349 enrolled in Medicaid
 - 69,268 in rural Nevada
- 565,180 enrolled in Medicare
 - 73,648 in rural Nevada

Medicaid Redetermination Process

- Started April 1, 2023
- Since June 2023 60,000 Nevadans have lost their health insurance through this process



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Source – Nevada Rural and Frontier Health Data Book 2023

Leading Causes of Death – Rural and Frontier Nevada 2020

- 1. Heart disease
- 2. Malignant neoplasms (cancer)
- 3. COVID-19
- 4. Chronic lower respiratory disease
- 5. Cerebrovascular diseases (stroke)
- 6. Non-transport accidents
- 7. Lung, trachea, and bronchus cancer
- 8. Alzheimer's
- 9. Diabetes mellitus
- 10. Intentional self-harm (suicide)



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Source – Nevada Rural and Frontier Health Data Book 2023

Geographic Variations in Health Status - Nevada



NEVADA

HEALTH CENTERS

Healthiest Counties

- Douglas (rural)
- Eureka (rural)
- Storey (rural)
- Washoe (urban)

Unhealthiest Counties

- Pershing (rural)
- Mineral (rural)
- Nye (rural)
- Clark (urban)

Source – Nevada Rural and Frontier Health Data Book 2023



Nevada's Health Care Workforce

- Nevada ranks 45th among U.S. states for active physicians per 100,000 population and 48th for primary care physicians.
- Nevada would need an additional 2,540 physicians to meet the national rate of 301.7 physicians per 100,000 population.
- In 2023, 81.6% of the population live in a health professional shortage area (HPSA) for primary care.
- 11 of 14 rural/frontier counties in Nevada are single-county primary medical care HPSAs.
- 14 of 14 rural/frontier counties in Nevada are single-county mental care HPSAs.







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Hospital Resources – Rural and Frontier Nevada

- Currently there are 14 rural and frontier hospitals in Nevada.
- Nevada's 14 rural/frontier hospitals are 109 miles (on average) from the nearest tertiary care hospital.
- The top 5 types of admission in rural areas were COVID-19, newborn deliveries, sepsis, heart failure, and pneumonia.





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Source – Nevada Rural and Frontier Health Data Book 2023

Travel and Time

- Distance to services
- Safety of rural roads/weather
- Gasoline prices
- No vehicle/shared vehicles one car per family
- Missed work/school
- Lack of public transportation or services such as Uber, taxis





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Technology

- Limited internet connectivity access to telehealth, education, and other resources
- Limited cell phone service coverage
- Some with limited home phone service (ex: ranchers)
- Impacts to 911 system
- Impacts to patient monitoring technology
 - Rural area between Elko and Ely transformer failed
 - Old equipment, expensive parts
 - Patient with pacemaker unable to be monitored



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Insurance Coverage Affordability and Access

- Affordability of insurance premiums
- High deductibles, co-insurance, copays
- Limited coverage i.e., adult dental coverage
- Limitations of Medicare/Medicaid at health care provider offices
- Loss of coverage finding access





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Patient Non Compliance

- Missed visits
- Lack of follow-up referrals, testing, etc.
- Going without needed medications or missing doses

Language Barriers

 Hispanic residents represent 17.4% of the population in rural and frontier counties in Nevada*

Source - Nevada Rural and Frontier Health Data Book 2023



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Availability of Resources

- Hospitals and urgent care centers
- After-hours care
- Rural health care providers
- Imaging
- Laboratory
- Specialty care dental, behavioral health, cardiology, endocrinology, oncology, pulmonology, orthopedics, pain management, substance abuse, infusion centers, etc.





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Access to affordable medications

- High deductible, co-insurance, copays
- Strict formularies (list of covered drugs) and requirements to access specialty medications
- Varied formularies and ongoing changes
- Prior authorization delays
- Restrictions at contract pharmacies for certain medications



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Resources currently available through Community Health Centers (CHCs) or Federally Qualified Health Centers (FQHCs) to Nevadans in rural communities





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What Is a Federally Qualified Health Center?

- Federally Qualified Health Centers (FQHCs) were first established in 1965 as primary care clinics.
- Centers that fall under the FQHC umbrella include:
 - Community health centers (CHCs)
 - Migrant health centers
 - Centers for the homeless
 - Health centers for residents of public housing
- FQHCs are funded and qualified by the federal government, specifically Sections 330/329 of the United State Public Health Service Act.
- CHCs and FQHCs may differ based on local demographics or the type of clinic, such as a migrant health center or a community health center, but for the most part the two are the same.





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What Is a Community Health Center?

- Community Health Centers (CHCs) are non-profit, community based, and patient-directed organizations that deliver high quality, culturally competent, comprehensive primary health care services.
- Offer numerous enabling services such as transportation, translation, case management, and health education in order to ensure patients are receiving the care they need.
- CHCs often integrate access to pharmacy, mental health, substance use disorder, and oral health services in areas where economic, geographic, or cultural barriers limit access to affordable healthcare services.





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Who Uses A Community Health Center?

- Over 1,400 Community Health Center grantees and look-alikes provided care at 15,000 locations across the country in 2022.
- In 2022, health centers served a record-breaking 31.5 million patients
- 1 in 11 Americans are health center patients, of whom:
 - 19% are uninsured
 - 61% are publicly insured
 - 90% are low income
 - 41% are rural residents
 - 64% are members of a racial and/or ethnic minority group
- Health centers save the health system \$24 billion annually





Sources: (1) 2022 Uniform Data System, HRSA, DHHS. (2) American Community Survey, 2021 and www.nachc.org

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Community Health Center Requirements



- Provide care to an area or population that has limited access due to insurance type or eligibility and/or because there are few other providers servicing the area/population.
- Accept all patients, regardless of ability to pay, and offer services on a sliding fee scale.
- **Cannot limit** the number of Medicaid, Medicare, or uninsured patients seen.
- **Be governed** by a board of directors comprised of at least 51% health center patients.



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Community Health Centers in Nevada (12)

- Nevada Health Centers
- Community Health Alliance
- First Person Care Clinic
- FirstMed Health and Wellness Center
- Hope Christian Health Center
- Northern Nevada HOPES
- Silver State Health Services
- Aghaby
- All for Health, Health for All, Inc.
- Canyonlands Healthcare
- Southern Nevada Health District
- Tri-State Community Healthcare



Source: www.nvpca.org



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Nevada Health Centers Overview

- Largest Federally Qualified Health Center (FQHC) in Nevada
- **Our mission** is to provide access to quality healthcare to all Nevadans
- We serve approximately 50,000 patients per year
- More than 500 employees, including providers, at locations across the Silver State
- We offer primary care, pediatrics, dentistry, behavioral health and pharmacy, along with WIC (Women, Infants and Children) services in Southern Nevada





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Serving our communities for 46 years – and counting



- First organized in 1977 as a public entity called the Central Nevada Rural Health Consortium
- **Over the years** other counties and rural health centers were added to provide access to healthcare throughout the state
- Became a 501(c)(3) non-profit entity in 1994 and changed our name to Nevada Rural Health Centers (NVRHC)
- That same year, NVRHC became a Federally Qualified Health Center (FQHC), enabling the organization to request funding from HRSA
- Today, Nevada Health Centers is the largest community health provider in Nevada.



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Funding Resources

- Patient Insurance Medicare, Medicaid, Private
- HRSA Grant
- Grants Federal, County, State, Private
- Quality managing patient care reimbursement
- Pharmacy 340B program
- Beverly E. Coleman Nevada Health Foundation \$9M+ in FY23
 - Non-profit 501(c)(3)
 - Under operational umbrella of NVHC
 - Primary purpose of raising funds to help advance NVHC mission





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Service areas segmented into three key hubs

Reno/Carson Health Centers

Carson City School-Based Health Center Sierra Nevada Health Center Virginia City Community Health Center Willow Street Health Center

Las Vegas Health Centers

Bower School-Based Health Center Cambridge Family Health Center C.P. Squires School-Based Health Center Eastern Family Medical & Dental Center Henderson Family Health Center Las Vegas Health and Wellness Center Martin Luther King Health Center North Las Vegas Family Health Center Wellness Center at Enterprise

WIC Centers

7 Las Vegas Locations

Elko/Rural Health Centers

Amargosa Valley Medical Center Austin Medical Center Carlin Community Health Center Elko Family Medical & Dental Center Jackpot Community Health Center Wendover Community Health Center



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Meeting Statewide Needs

- 19 Health Centers
 - 3 hub sites provide all services
 - Family practice/pediatrics
 - Behavioral health
 - Dental (Carson coming soon)
 - Pharmacy
- 7 Women, Infants, and Children Sites (WIC)
- 3 Mobile Units in Service 2 More Coming Soon





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Nevada Health Centers Rural Sites



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Bringing care to the people via three mobile programs



- Operate as full-time mobile clinics
- Dedicated staff and drivers
- Primarily grant funded
- New mobile legislation federal funding for new mobile units



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Mobile Health Services - Challenges

- Maintenance and repairs
- Internet connectivity
- Travel staffing
- Weather
- Expensive to operate
- Pharmacy regulations
- Vaccine management
- Laboratory testing
- Language barriers





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Mobile Mammography - Mammovan



- First Lady Dema Guinn Program Founder
- 23 Years in Service
- Statewide services
- Screen more than 2,500 women annually
- \$1.2 million operating budget annually
- State of the art technology
- 2D and 3D mammograms
- Immediate electronic transfer of images
- Radiology partner with 24- hour turnaround reading



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Mobile Medical Southern Nevada - Children



- Partnership with Children's Health Fund
- 5 years in service
- Focus on homeless, runaways, refugees and human trafficking victims
- Serves children ages 0 21
- 2,200+ visits annually
- \$600,000 annual operating budget
- Four consistent partner sites
 - Catholic Charities refugee apartments
 - Nevada Partnership for Homeless Youth
 - Embracing Project
 - WIC location
- Larger replacement van coming



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Mobile Dental Services – Children

- Partnership with Ronald McDonald House Charities
- 17 years in service
- Statewide services for children 0 21
- Preventative and restorative dental care
- \$750,000 operating budget annually
- Larger replacement van coming
- New vehicle funded by Nevada Women's Philanthropy and Ronald McDonald Charities
- Transitioning to Vegas-only in fall of 2023
- Purchasing current van moving north





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Northern Nevada Mobiles Coming – Fall 2023



Expanding Mobile Medical Northern Nevada

- Family practice services all ages
- Focus on rural communities

Expanding Mobile Dental – Elko/Rurals

- Preventive and restorative
- Sealant program Elko County schools





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Telehealth Services Expand Access

- Virtual medical or behavioral health services 16% of overall business
- Direct-to-consumer patient at home
- Cart-based patient in clinic with MA/technology provider at home or other site
- Virtual provider and patient at home or other sites
- Dedicated virtual care providers
- Available in health centers and mobile medical units
- Partnered sites with telehealth technology
 - Schools statewide
 - Community partner sites food banks, transitional housing





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Tackling Recruiting Challenges for Providers

Loan Repayment Access for Providers

- Providers at Nevada Health Centers can apply for loan repayment through the HRSA National Health Service Corps Loan Repayment Program
- Available for medical, dental, and mental/behavioral health care clinicians serving in urban, rural, or tribal communities with limited access to care
- Clinician must work at an approved site in a health professional shortage area (HPSA)
- Offer both full-time and part-time options
 - Two years full-time up to \$50,000
 - Two year part-time up to \$25,000





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Tackling the Recruiting Challenges Overall

- Recruiting bonuses sign-on for some positions
- Referral bonus (from internal staff) for some positions
- Rural/mobile pay differential for some positions
- Housing support housing
- Weekday schedules some with 4/10 options
- Virtual or hybrid opportunities for some positions
- Strong benefit package
 - 403(b) retirement plan (with company matching percentage)
 - Medical, dental and vision benefits options for other coverages (life, disability, long-term care)
 - Generous paid time off policy
 - 11 paid holidays (1 float day)



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Closing the Gaps for Our Patients



- After hours coverage for all sites/patients access to a provider
- Specialty care provided cardiology in-person appointments (limited to Vegas initially)
- Two wellness centers designed for hospital discharge patients immediate follow-up
- Homeless focused sites and services
- Expansion of telehealth and mobile services to extend reach and access
- Ongoing assessment of need and new site opportunities statewide



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Opportunities and solutions to enhance access to care for Nevadans living in rural communities





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How Can You or Your Organization Help?

- Travel support
 - Vehicle donation for staff/provider utilization
 - Mobile vehicle garages needed
 - Gift cards for gasoline, public transportation, car rentals, meals
 - Grants for maintenance and repairs on mobile units
 - Hotel room/meal donations for providers/staff
- Rural housing for providers and/or staff



- Recruitment agencies, sign-on bonuses, provider partnerships, promotion/advertising
- Purchase a mobile health unit vaccines, vision, hearing, dental, medical, etc.
- Grants and donations infrastructure, technology, patient services, operating costs
 - Internal employee/organizational campaigns to raise funds for support
- Partnerships collaborations



Thank you for sharing your time with us

Questions?

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