# **BHS Impact Study SUD Treatment Demographics Nevada Nursing Facility Program Participants**



**Behavioral Health Solutions (BHS) partnered with an** independent 3<sup>rd</sup>-party consultant, 3x Advisors to conduct a one-year impact study on the Nevada BCCP program participants' outcomes. Study Dates: November 2022 – October 2023

### Impact Study

Behavioral Health Solutions commenced an impact study in collaboration with 3x Advisors, an independent consulting firm, focusing on Nevada nursing facilities. The objective is to showcase the efficacy of state funding programs when combined with behavioral health supportive services. Preliminary findings highlight a positive influence on individual patient well-being, along with a significant and favorable economic impact on the financial landscape of the healthcare system.

### **Substance Abuse Landscape**

As per the Centers for Disease Control and Prevention, Nevada stands in the top 10 states for drug use, experiencing a concerning 55% surge in drug overdose deaths from 2019 to 2020. The Nevada Department of Health and Human Services further revealed that among the individuals who succumbed in 2020, half had associated mental health concerns.

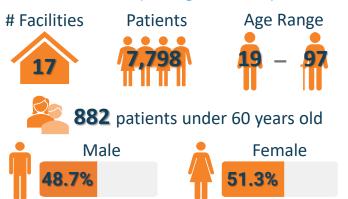


### 1 in 2 suffered with their mental health

### **Geographical Focus**

Seventeen Nevada facilities actively engaged in the state-funded behavioral program, which included mental health services provided by Behavioral Health Solutions, contributed data spanning from November 2022 to October 2023 for the purposes of this study.

#### Statistical Data (NV Program Patients)



### Healthcare System Result



**\$125,752** est. savings to the healthcare system (per 8 patients)

Estimated hospital stay is \$15,719



The partnership between BHS and BCCP facilities resulted in the prevention of 8 hospital admissions per 100 SUD patients over the 1-year period. For every 8 patient admissions avoided this resulted in a savings of \$125,752 to the healthcare system. If modeled across the 68 SNF's it would result in a cost savings of \$3,073,379.





**Est. SUD Patients** 



Description	Data
Nevada Study Data	
NV facilities in study	17
SUD population over 12 months	611
Average # SUD patients per SNF	35.94
Facility Estimates	
# of facilities	68
Total # of SUD patients (Est. SUD per facility ratio)	2,444
Avoided Admissions (8 admits per 100 SUD patients)	196
Cost of hospital stay	\$15,719
Savings over 12 months	\$3,073,379

# **BHS Impact Study**

### **Nevada Nursing Facility Program Participants**

Impact Study: November 2022 – October 2023

### **Substance Abuse Patients**

**BEHAVIORAL** HEALTH SOLUTIONS

Over the 12-month duration, the length of stay (LOS) for patients in facilities witnessed a notable increase of 123%, offering extended options for long-term placement. Simultaneously, the intake of SUD patients surged by 133%, accompanied by an average demographic age decrease of 4 years. The age range varied from 19 to 97 years. The discharge rate of SUD patients experienced a decline of 24% during this specified time period.



133% Increase inSUD patient intake24% Decrease indischarge rate



### Substance Use Disorder

Persons with untreated alcohol use disorders use twice as much health care and cost twice as much as those with treated alcohol use disorders.

Total health care costs were 30% less for individuals receiving MAT than for others. (Medicaid.gov)



## Untreated persons **cost 2x** those with treated alcohol use disorder

### Antipsychotic Use

The data focuses on medication information from facilities managed by Behavioral Health Solutions (BHS). The study covers a one-year period from Nov. 2022 through Oct. 2023, emphasizing site characteristics and specifically investigating the use of antipsychotic medications in these facilities.



Of patients were categorized into 1 or more of 4 Dx groups: psychosis, anxiety/ depression, SUD, or dementia.



Avg age

fell by

4 vears

of BH patients, BH medication was needed from 1 or more of these categories: antipsychotic, SSRI/SNRI/MAOI, opiate, and sedative/hypnotic.



Nurse practitioner visits increased by 26%, while psychiatrist visits remained stable



Antipsychotic medication use decreased by 16%, contributing to an estimated 8% reduction in serious falls and hospital transfers.

	BH Cases (% All)	BH Meds (% BH)	Antipsychotic (% BH)	High Risk (% All)
All	1164 (77%)	794 (68%)	202 (17%)	1198 (97%)
Facilities	√4%	√3%	↓16%	√2%

### **Population-Based Cohort Study**

In a population-based study of older adults, prescribed an antipsychotic medication was associated with a 52% increased risk of a serious fall.



**52%** Increase of serious fall risk associated with antipsychotic meds

Sources: 3x Advisors confidential and proprietary Impact Study, November 2022 to October 2023; Falls and Fractures With Atypical Antipsychotic Medication Use: A Population-Based Cohort Study Fraser L, Liu K, Naylor K, et a JAMA In Med. 2015;175(3):450; Typical Hospital Stays <u>https://www.valuepenguin.com/hospital-bill-costs-study</u>; NV Substance Abuse, <u>https://dhhs.nv.gov</u> & <u>https://nvmedicalcenter.org/nevada-healthcare-statistics/substance-abuse/</u>; Nursing Facilities https://www.kff.org