

Behavioral Health Solutions

Who we are

Established in 2017 through the administration of a specialized program within Skilled Nursing Facilities (SNF's), Behavioral Health Solutions (BHS) has emerged as a pioneering force in behavioral health. With its roots in Henderson Nevada, BHS has rapidly expanded its reach and solidified its position as the foremost behavioral provider group in the western region, offering comprehensive services that span over 350 Skilled Nursing Facilities in 8 states, showcasing its commitment to delivering quality behavioral health solutions in the communities we serve.

Services

- Administration of Behavioral Programs
- **Psychiatry**
- Medication Management
- Therapy

Areas of Expertise

- Behavioral Health Programs in Skilled Nursing
- Skilled Nursing and Long-Term Care Facilities
- **Outpatient Behavioral Health Services**



Montana Update

Facilities and Providers



Facilities Contracted with BHS:

- Billings Rehabilitation and Nursing
- River Ridge Rehabilitation and Nursing
- Kalispell Rehabilitation and Nursing
- Northern Pines Rehabilitation and Nursing
- Valle Vista Rehabilitation and Nursing
- Missoula Health and Rehab Center
- Polson Health and Rehab Center

- Hot Springs Health and Rehab
- Laurel Health and Rehab Center
- Central Montana Nursing and Rehab
- Livingston Health & Rehabilitation Center
- Aspen Meadows Health & Rehab Center
- The Villa at Northern Pines
- The Villa at Valle Vista

Montana Providers Being Licensed:

- 2 Psychiatrists (1 approved!)
- 1 PMHNP
- 1 Neuropsychologist

Montana Update

Program



Participants

- Submittals: 39
- Approved: 21
 - Level 1: 16
 - Level 2: 4
 - Level 3: 1

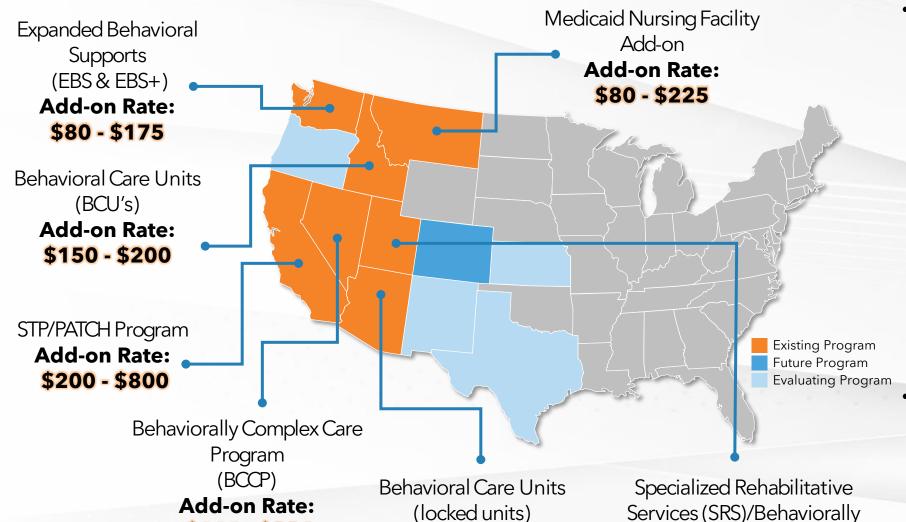
- Pending: 6
 - Level 1: 2
 - Level 2: 4
- Denied: **12**

Behavioral Health Programs

BEHAVIORAL HEALTH SOLUTIONS

Current programs add-on rates

\$111 - \$326



Add-on Rate:

\$125 - \$500

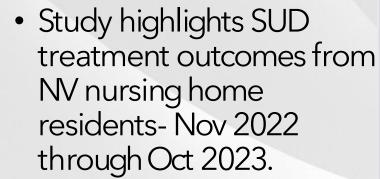
- Behavioral health funding programs are often created to assist with national issues, including:
 - Difficult to discharge patients.
 - Lack of behavioral care.
 - High utilizers bouncing from acute to homelessness to jails to psych hospital.
 - Significant inpatient length of stays.
- At the same time nursing homes are still battling historically low census.

Complex Program (BCP)

Add-on Rate: \$22

NV Impact Study

SUD Patients



 Data includes patient demographics, reduction in antipsychotic use, and an overall savings to healthcare system.

Impact Study

SUD Treatment Demographics

Nevada Nursing Facility Program Participants

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.



In top 10



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)

Facilities











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.



68



2,444



\$3,073,379 estimated total 12month savings to healthcare system

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

Impact Study

Nevada Nursing Facility Program Participants

Impact Study: November 2022 - October 2023

HEALTH SOLUTIONS

Substance Abuse Patients

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.



300%

250%

200%

150%

133% Increase in SUD patient intake





100%
50%
0%
Facility 1 Facility 2 Facility 3 Facility 4 Facility 5
LOS Increase (1-year) Increase in SUD Dx (1-year)

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 years

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%)	,	, ,	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 https://www.valuepenguin.com/hospital-bill-costs-study; NV Substance Abuse, https://www.valuepenguin.com/hospital-bill-costs-study; NV Substance Abuse, https://www.kff.org

Emergency Room Impact



NV Impact Study: November 2022 - October 2023

ER Visits:



Reviewed ER visits for 7,798 Nevada facility patients.

Finding:

• NV BH program (BCCP) + BHS effectively manages behavioral health issues in the facility rather than the emergency department.



Reduced ER visits by 72% BCCP v non-BCCP participants

