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**Assembly Committee on Ways and Means and Senate Committee on Finance
Joint Subcommittee Hearing on Human Resources/ MHSD
February 17, 2003**

Testimony of : Rena M. Nora, M.D.
2916 sterling Cove Drive
Las Vegas, Nevada 89128

- I am a practicing clinician and along with other psychiatrists in the state, I have followed with great interest the progress and development of the proposed budget for Mental Health and Developmental services for the past two years. In essence, the budget does not really have the luxury of enhancing or expanding care for the mentally ill . The budget really covers "catch up" or "bare bones" efforts to meet current needs.
- The proposed budget could fulfill the basic and fundamental features of good treatment and services for the mentally ill which includes the 5 A's: **access, availability, adequacy, appropriateness and acceptability to patients and their families.**
- Let us keep in mind that treatment, services, programs and resources for the mentally ill do not exist in a vacuum. Each of these domains affect the spectrum and continuum of care of the patient. Cutting back on items such as pharmacy costs could have adverse implications such as inadequacy of treatment and delay in improvement . These in turn can cause more disruptions in the life of the patient and their families, more use of medical and social services and other hidden indirect costs of mental health care.
- The need for availability of acute beds and emergency services for the mentally ill should have the highest priority as these have "life and death" implications. We need to expand outpatient services, but as we do so, we know that a number of them have relapses and would require hospitalization , even for a few days, to be stabilized.
- Our state is noted to have one of the least adequate services for children with psychiatric disorders. Some things can wait , but these children could not wait. Without adequate and timely intervention, they will be our future adult psychiatric patients who could otherwise have been helped to become functional and productive citizens.
- I urge strong support for programs and services that meet the unique needs of our state such as suicide prevention, co-occurring mental health and substance abuse programs including those for problem gambling. services of the children and adolescents and our elderly population. Also, after years of struggle to keep the Psychiatry Residency training program , we fear that this very important piece of the Mental Health field will become A budget casualty if ignored.
- Thank you for the opportunity to present my input. We do not need to continue to debate whether mental health care is a right or a privilege. Let us keep in mind that mental illness could be life threatening but patients can and do recover. #