

2025 HEALTH PROFILE Douglas County

The Nevada Health Profiles summarize various health indicators by federal Congressional district, state Assembly or Senate district, and county in Nevada to give a general overview of the health in that region and how it compares to other regions and the State.

Race/Ethnicity	Douglas County
White non-Hispanic	78.1%
Black non-Hispanic	0.7%
AI/AN non-Hispanic ¹	1.3%
Asian non-Hispanic	2.3%
Hispanic or Latino	13.2%
All Other non-Hispanic	4.5%

Age	Douglas County
0 - 4 years	3.4%
5 - 17 years	13.0%
18 - 39 years	22.1%
40 - 64 years	32.2%
65+ years	29.3%

Death Rates ²	Douglas County	Rank
Heart Disease	263.7 (238.2-289.2)	9
Cancer	259.9 (234.6-285.2)	15
Chronic Lower Respiratory Disease	65.5 (52.7-78.2)	8
Accidents	57.1 (45.2-69.0)	4
Stroke	71.2 (58.0-84.5)	16
Alzheimer's Disease	37.9 (28.2-47.5)	17
Influenza and Pneumonia	14.8 (8.7-20.8)	9
Suicide	25.0 (17.2-32.9)	8
COVID-19	55.2 (43.5-66.8)	2
Diabetes Mellitus	35.3 (26.0-44.6)	7
All Other Causes	346.5 (317.3-375.7)	8

Chronic Disease ³	Douglas County	Rank
Heart Attack	2.9% (1.5-4.3)	1
Stroke	3.0% (0.9-5.0)	5
Asthma	9.7% (6.0-13.5)	3
COPD	6.5% (3.8-9.1)	4
Depression	18.4% (13.3-23.6)	5
Overweight or Obese	67.5% (61.4-73.6)	11
Current Smokers	14.3% (8.8-19.9)	4
Prescription Drug Use	18.9% (11.5-26.2)	13
Marijuana Use	20.1% (13.6-26.7)	13

Immunization ⁴	Douglas County	Rank
Children Up-To-Date	70.4% (67.6-73.2)	5
Influenza	78.1% (77.8-78.5)	3
Teens Up-To-Date	41.9% (40.5-43.4)	9
COVID-19	27.0% (26.6-27.4)	4

COVID-19⁵	Douglas County	Rank
Case Rate	3,620.1 (3,505.7-3,734.6)	10
Death Rate ²	55.2 (43.5-66.8)	2
Vaccinated ⁴	27.0% (26.6-27.4)	14

Prescription Rates ⁶	Douglas County	Rank
Opioid Patients	125.5 (123.3-127.6)	11
Opioid Prescriptions	509.9 (505.6-514.2)	10
Total Patients	222.6 (219.7-225.4)	15
Total Prescriptions	977.4 (971.5-983.4)	14



Substance	e Use ⁷	Douglas County	Rank
	All Drug-Related Visits	497.3 (454.8-539.7)	3
Emergency Room	Meth	120.5 (99.7-141.4)	2
Encouter Rate	Opioid	114.9 (94.5-135.3)	4
	Alcohol	735.5 (683.9-787.1)	6
	All Drug-Related Visits	485.9 (444.0-527.9)	4
Inpatient	Meth	124.3 (103.1-145.5)	3
Admission Rate	Opioid	163.9 (139.5-188.2)	8
	Alcohol	724.2 (673.0-775.4)	12
	All Drug-Related Overdoses	23.5 (14.3-32.8)	6
Overdose	Meth	9.4 (3.6-15.3)	6
Death Rate	Opioid	13.2 (6.3-20.1)	6
	Alcohol	8.5 (2.9-14.0)	15

Child Welfare ⁸	Douglas County	Rank
CPS Abuse/Neglect Reports	42	11
Percent Substantiated	36.0% (34.0-37.2)	12
Children in Foster Care During CY20239	17	9
Children in Foster Care as of 12/31/23 ¹⁰	13	9
Children in Foster Care Rate	1.9 (1.0-2.9)	3
Foster Care Entries Rate	0.0 (0.0-0.0)	1

Birth Rates ¹¹	Douglas County	Rank
Less Than Adequate Prenatal	232.1	3
Care	(200.4-263.7)	3
Low-Birthweight Births	88.6	8
Low Birdiweight Birdis	(69.0-108.1)	Ü
Infant Mortality Rate	4.5	9
Triane Floreality Race	(0.1-8.9)	,
Teen Birth Rate	5.2	3
reen birdi Nace	(2.6-7.9)	J

HIV/STD ¹²	Douglas County	Rank
Persons Living with	106.5	7
HIV/AIDS	(78.9-134.2)	,
Sexually Transmitted	194.4	4
Diseases	(157.0-231.7)	7

Eligibility ¹³	Currently Enrolled	Newly Eligible
Medicaid Enrollment	6,960	2,791
Percent of currently enrolled		40.1%
Moms and Kids	2,529	
Aged, Blind, and Disabled	946	
NV Check Up	324	
SNAP Enrollment	2,696	
TANF Enrollment	56	

Eligibility Snapshot ¹⁴	Douglas County
Medicaid Enrollment	4,683
SNAP Enrollment	436
TANF Enrollment	4
Medicaid and SNAP Enrollment	2,226
Medicaid and TANF Enrollment	18
SNAP and TANF Enrollment	1
All Three Enrollment	33

Income ¹⁵	Douglas County
Income Below Poverty Level	10.4%
Uninsured	8.9%

Cancer ¹⁶	Douglas County	Rank
All Types Incidence Rate	463.9 (460.5-467.3)	17
1 st Leading Cancer Type	Prostate	
Incidence Rate	67.2 (65.9-68.5)	
2 nd Leading Cancer Type	Breast	
Incidence Rate	58.5 (57.3-59.7)	
3 rd Leading Cancer Type	Melanoma of the Skin	
Incidence Rate	53.8 (52.6-54.9)	

WIC ¹⁷	Douglas County	Rank
Total Participants Served	368	9
Participants Served Rate	134.3 (120.7-147.9)	3



Footnotes

* Suppressed due to low respondent counts.

Populations were pulled using the American Community Survey (ACS) five-year estimates (Table B01001: Sex by Age and B03002: Hispanic or Latino Origin by Race). Rates for the state and county were calculated using population estimates provided by the State Demographer (vintage 2023), and the rates for the assembly, congressional, and senate districts were calculated using the ACS five-year estimates, for the 2023 ACS were calculated using a 1.2% growth rate because 2023 data tables were not available.

¹AI/AN: American Indian or Alaska Native.

²Death Rates: Department of Health and Human Services, Electronic Death Registry System. Data reflects primary causes of deaths from the ICD-10. Rates are per 100,000 population. Data are deaths occurring from 2021-2023.

³Chronic Disease: Nevada Behavioral Risk Factor Surveillance Survey (BRFSS), core questionnaire. Districts or counties with less than 50 responses combined for the three-year period have been suppressed. Marijuana includes those who used marijuana at least once in the last 30 days before the survey. Prescription drug use includes those who have ever taken a prescription drug without a doctor's prescription. Data are from 2021-2023.

⁴Vaccinations: Nevada Immunization Information System (IIS), WebIZ Replica Database. The child 7-series percent consist of children ages 2-3 years during the analysis years. Up-To-Date for the infant seven series is considered fully vaccinated with: 4 doses of DTaP, 3 doses of Polio, 1 dose of MMR, 3 doses of HIB, 3 doses of Hepatitis B, 1 dose of Varicella, and 4 doses of Pneumococcal Vaccine. Teenage vaccines include 13-17 year olds with 1 TDaP, 1 or 2 Meningitis, and 2 or 3 HPV depending on age of initiation. COVID vaccines are the number of COVID-19 vaccines administered during the reporting timeframe. Data are from 2022-2023.

5COVID-19: Case data are collected through laboratory data reported to the Department of Health and Human Services. Rates are per 100,000 population. Data are from 2022-2023. Confirmed and probable cases are included.

⁶Prescription Drug Monitoring Program (PDMP): The PDMP collects data on schedule II-IV controlled substance prescriptions dispensed to patients, as entered into the state system. Prescriptions and patient rates are per 1,000 population. Data are from 2022-2023.

⁷Substance use Emergency Department/Inpatient: From the statewide hospital billing data. Data is pulled by the diagnosis codes for the visit. Rates are per 100,000 population. Data are from 2022-2023.

Schild Welfare: Nevada Division of Child and Family Services (DCFS), Unified Nevada Information Technology for Youth (UNITY) case management system. Child Protective Service (CPS)
Abuse/Neglect Reports are screened in reports involving alleged incidents of child maltreatment that meet the child welfare agency guidelines for response and result in agency investigation or assessment. Screened in reports include reports dispositioned as differential response, investigation, or institutional investigation. This count reflects unique screened-in reports received in this district/county at any time in the calendar year. Percent Substantiated represents substantiated reports that were investigated and concluded that the allegation of maltreatment or risk of maltreatment was supported/founded by state law or policy. Data are from 2023.

Schildren in Foster Care During Year: Foster Care is a substitute care for children placed away from their guardians for at least 24 hours for whom the child welfare agency has placement and care responsibility. This includes licensed family or relative foster homes, unlicensed fictive kin or relative homes, group homes, emergency shelters, residential facilities, childcare institutions, and pre-adoptive homes. The count reflects unique children within the district/county who were in foster care during any period of the calendar year. Data are from 2023.

¹⁰Children in Foster Care as of 12/31: This count is a point-in-time snapshot of unique children in foster care on the given day. Data are from 12/31/2023.

¹¹Birth Rates: Data are from the Division of Public and Behavioral Health, Electronic Birth and Death Registry System. Infant mortality data are the number of infants who die during the first year of life. Birth with less than adequate prenatal care are deemed if the ratio of observed to expected visits is 79% or less. Low-birthweight births are babies weighing less than 2,500 grams (about 5.5 pounds) at birth. The teen birth rate are the number of births to teenage females between the age of 15 and 19. The data are based on the mother's resident information. The rates for infant mortality, less than adequate prenatal care, and low birth rate are per 1,000 live births, while the teen birth rates are per 1,000 age 15-19 female specific population. Data are from 2021-2023.

¹²HIV/STD: Division of Public and Behavioral Health, Enhanced HIV/AIDS Reporting System (eHARS), Sexually Transmitted Diseases Management Information System (STD*MIS), NEDSS [National Electronic Disease Surveillance System] Base System (NBS). Sexually Transmitted Diseases (STD) included: chlamydia, gonorrhea, primary syphilis, secondary syphilis, and early latent syphilis. Rates are per 100,000 population. Data are from 2023.

¹³Eligibility: A snapshot of the number of individuals currently enrolled in Nevada Medicaid, Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), and Nevada Check Up in the month of January 2024. ACA Expansion reflects the number of adults who are eligible because of expansion to the Affordable Care Act (ACA). These individuals fall into one of two categories: newly eligible parent/caretaker or childless adult. Moms and Kids (Original Adult Medicaid, Pregnant Women and Children) capture recipients who qualify for Medicaid under the TANF/Children's Health Assistance Program (CHAP) eligibility guidelines. The Aged, Blind, and Disabled account records the medical payments to providers, other than sister agencies who receive federal funds only, for recipients who qualify for Medicaid under the Medical Assistance for Aged, Blind and Disabled (MAABD) eligibility guidelines.

¹⁴Eligibility Snapshot: A snapshot of the number of individuals enrolled in Nevada Medicaid and SNAP, Nevada Medicaid and TANF, SNAP and TANF, and Nevada Medicaid and SNAP and TANF. Data are from January 2024.

¹⁵Income: ACS five-year Estimates. Percent of individuals living below the poverty level and percent of individuals who are uninsured in the year 2023. (Table DP03: Selected Economic Characteristics).

¹⁶Cancer: Data are from the Division of Public and Behavioral Health, Nevada Central Cancer Registry. Lung cancer includes lung and bronchus. To provide a ranking order for cancer, rates for sex-specific cancers (breast or prostate) were calculated using the total population and not the sex-specific population. Rates are per 100,000 population. Data are from 2017-2021.

¹⁷Women, Infants, and Children (WIC): WIC is the USDA Special Supplemental Nutrition Program for women, infants, and children. Rates are per 100,000 female population. Data are from 2023.