

#### OFFICE OF THE ATTORNEY GENERAL

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#### PREVENTION SUBCOMMITTEE

Substance Use Response Group (SURG)

March 5, 2025

3:00 pm

# 1. CALL TO ORDER AND ROLL CALL TO ESTABLISH QUORUM

## 1. Call to Order and Roll Call to Establish Quorum Cont.

Member	SURG Role	Subcommittee Role		
Jessica Johnson	Urban Human Services (Clark County)	Chair		
Erik Schoen	SUD Prevention Coalition	Vice Chair		
Angela Nickels	Representative of a School District	Member		
Debi Nadler	Advocate/Family Member	Member		
Senator Fabian Doñate	Senate Majority Appointee	Member		

### 2. PUBLIC COMMENT

#### Public Comment

- Public comment will be received via Zoom by raising your hand or unmuting yourself when asked for public comment. Public comment shall be limited to three (3) minutes per person (this is a period devoted to comments by the general public, if any, and discussion of those comments). No action may be taken upon a matter raised during a period devoted to comments by the general public until the matter itself has been specifically included on an agenda as an item upon which action may be taken pursuant to NRS 241.020.
- If you are dialing in from a telephone:
  - Dial (253) 205-0468
  - When prompted enter the Meeting ID: 825 0031 7472
  - Please press \*6 so the host can prompt you to unmute.

# 3. REVIEW AND APPROVE DECEMBER 2, 2024 PREVENTION SUBCOMMITTEE MEETING MINUTES

# 4. 2025 SUBCOMMITTEE REORIENTATION

#### Attendance

- Since March 2024, attendance has been tracked and any member who goes below a 75 percent attendance rate for subcommittee or SURG working group meetings will be asked if they wish to continue serving.
- If you cannot attend a meeting, please email SEI staff at least four business days in advance to ensure a quorum or rescheduling of the meeting if necessary.

#### Recommendations Process

- Review survey in SurveyMonkey.
- The earlier recommendations are submitted, the more time we have to schedule presentations and to refine the recommendation. Please submit your ideas as early as possible!
- All subcommittee members are encouraged to submit at least one recommendation.
- Questions?

# 5. REVIEW AB374 SECTION 10 REQUIREMENTS AND SUBPOPULATIONS ADDRESSED IN PRIOR RECOMMENDATIONS

### 2024 Prevention Recommendations (Part 1)

- 1. Recommend to DHHS/DPBH/the Bureau of Behavioral Health Wellness and Prevention to include in their Governor's budget request, a request to double the amount of investment in SAPTA primary prevention programming (i.e., increase from current \$12 million to \$24 million for this biennium) for ages 0-24 and review the funding allocations annually. This funding should not be at the expense of existing programming.
- 2. Create a bill draft request to amend the NRS for a 15 percent set aside of tobacco control and prevention funds from the Fund for a Healthy Nevada. This would be distributed using a local lead agencies model to reach \$2 per capita, a recommended funding goal from the Nevada Tobacco Control & Smoke-free Coalition and subject matter experts.
- Require the state office of Medicaid to develop a state plan amendment to implement changes to support the recommendation requesting rates and billing standards for CHWs and Peers be increased to align with the national average and CMS standard.
- 4. Create a bill draft request to allocate a 15 percent set aside of cannabis retail funds to be distributed using a local lead agencies model to reach \$2 per capita, a recommended funding goal from the Nevada Tobacco Control & Smoke-free Coalition and subject matter experts.

## 2024 Harm Reduction Recommendations (Part 1)

- 1. Recommend to DHHS to develop an annual or biannual saturation and distribution plan for overdose reversal medication. DHHS should utilize opioid settlement dollars to designate a baseline level of identification and overdose reversal medication for the next 10 years in Nevada (which should be based on the state's Naloxone Saturation Plan) to create a supply of stable, sustainable overdose reversal medication throughout the state.
- 2. Establish a statewide initiative for community drug checking that incorporates qualitative and quantitative drug checking and includes the following parameters:
  - Utilize a regional implementation approach with standardized, statewide indicators, since local jurisdictions are best equipped to respond to findings from community drug checking.
  - Work with harm reduction community to identify partners/ locations and provide guidance and training.
  - Start all sites with mail-based testing while piloting on-site drug checking in a subset of early adopters to refine implementation needs.
  - Standardize the data collection, entry, testing, mailing, analysis, reporting as a best practice. Make this as transparent of a process as possible.
  - Articulate principles and plans for what will happen to the data.

# 2024 Harm Reduction Recommendations (Part 2)

- 3. Harm Reduction Shipping Supply: In collaboration with local agencies and through community conversations, recommend to DHHS to provide for shipping costs for evidence-based harm reduction supplies (e.g., naloxone, sharps, test strips, etc.) and for travel costs for the pickup of used sharps products to be returned for destruction. Increase advertising about shipping programs to rural Nevada. Establish an alternative strategy for harm reduction supply delivery if people can't receive delivery of the supplies directly.
- 4. Recommend a bill draft request to support legislation that will (1) help to fund/establish a statewide association for Peers, and (2) better define supervision requirements for Peers under the age of 18.

## Legislative Language and Prevention Subcommittee Assignments Overview

- AB374 (2021 Session) Sec. 10, Subsection 1 is comprised of components A-Q. In 2021, guidance from Vice Chair Tolles, Dr. Woodard and Dr. Kerns determined subcommittee alignment.
- Please reference pages 35-55 in the 2024 Annual Report for more information.

## Legislative Language and Prevention Subcommittee Assignments

- (a) Leverage and expand efforts by state and local governmental entities to reduce the use of substances which are associated with substance use disorders, including, without limitation, heroin, other synthetic and non-synthetic opioids, and stimulants, and identify ways to enhance those efforts through coordination and collaboration.
- (g) Make recommendations to entities including, without limitation, the State Board of Pharmacy, professional licensing boards that license practitioners, other than veterinarians, the State Board of Health, the Division, the Governor, and the Legislature, to ensure that controlled substances are appropriately prescribed in accordance with the provisions of NRS 639.2391 to 639.23916, inclusive
- (j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about the effects of substance use and substance use disorders; (2) Reduce the harms associated with substance use and substance use disorders while referring persons with substance use disorders to evidence-based treatment.

# Legislative Language and Cross-Cutting Assignments (Part 2)

- (b) Assess evidence-based strategies for preventing substance use and intervening to stop substance use, including, without limitation, the use of heroin, other synthetic and non-synthetic opioids and stimulants. Such strategies must include, without limitation, strategies to: (1) Help persons at risk of a substance use disorder avoid developing a substance use disorder; (2) Discover potentially problematic substance use in a person and intervene before the person develops a substance use disorder;
- (h) Examine qualitative and quantitative data to understand the risk factors that contribute to substance use and the rates of substance use, and substance use disorders, focusing on special populations.

(Continued on next slide)

# Legislative Language and Cross-Cutting Assignments (Part 3)

(q) Study, evaluate and make recommendations to the Department of Health and Human Services concerning the use of the money described in section 10.5 of this act to address substance use disorders, with a focus on: (1) The use of the money described in subsections 1, 2 and 3 of section 10.5 of this act to supplement rather than supplant existing state or local spending; (2) The use of the money described in section 10.5 of this act to support programs that use evidence-based interventions; (3) The use of the money described in section 10.5 of this act to support programs for the prevention of substance use disorders in youth; (4) The use of the money described in section 10.5 of this act to improve racial equity; and (5) Reporting by state and local agencies to the public concerning the funding of programs to address substance misuse and substance use disorders.

## Number of Recommendations Aligned with Prevention Subcommittee and Cross-Cutting Assignments

	A	G	J	В	Н	Q
2022 Out of a total of nine	0	1	2	2	0	5
2023 Out of a total of eleven	3	3	7	8	1	0
2024 Out of a total of eight	3	2	6	7	1	0
Total Out of a total of 28	6	6	15	15	2	4

Bold Header = Prevention Subcommittee Assignment

Italic Header = Cross-cutting
Assignment

The Prevention Subcommittee also aligned their 2022, 2023, and 2024 recommendations with the following AB374 Sec. 10, Subsection 1 components, not marked specifically as their assignments:

- 2022: k(1), i(1)
- 2023: c(2)
- 2024: c(1)

## Number of Times Prevention Recommendations Aligned with Assigned AB374 Components

Number of Times Component Aligned with 2022-2024 Recommendations	AB374 Sec 10, Subsection Component				
	(j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and				
15	families about the effects of substance use and substance use disorders; (2) Reduce the				
	harms associated with substance use and substance use disorders while referring persons				
	with substance use disorders to evidence-based treatment.				
	(a) Leverage and expand efforts by state and local governmental entities to reduce the use of				
6	substances which are associated with substance use disorders, including, without limitation,				
l l	heroin, other synthetic and non-synthetic opioids, and stimulants, and identify ways to				
	enhance those efforts through coordination and collaboration.				
	(g) Make recommendations to entities including, without limitation, the State Board of				
	Pharmacy, professional licensing boards that license practitioners, other than veterinarians,				
6	the State Board of Health, the Division, the Governor, and the Legislature, to ensure that				
	controlled substances are appropriately prescribed in accordance with the provisions of NRS				
	639.2391 to 639.23916, inclusive				

## Number of Times All SURG Recommendations Aligned with Cross-Cutting AB374 Components

Number of Times Component Aligned with 2022-2024 SURG Recommendations (Out of 56)	AB374 Sec 10, Subsection Component				
26	(b) Assess evidence-based strategies for preventing substance use and intervening to stop substance use, including, without limitation, the use of heroin, other synthetic and non-synthetic opioids and stimulants. Such strategies must include, without limitation, strategies to: (1) Help persons at risk of a substance use disorder avoid developing a substance use disorder; (2) Discover potentially problematic substance use in a person and intervene before the person develops a substance use disorder;				
17	(q) Study, evaluate and make recommendations to the Department of Health and Human Services concerning the use of the money described in section 10.5 of this act to address substance use disorders, with a focus on: (1) The use of the money described in subsections 1, 2 and 3 of section 10.5 of this act to supplement rather than supplant existing state or local spending; (2) The use of the money described in section 10.5 of this act to support programs that use evidence-based interventions; (3) The use of the money described in section 10.5 of this act to support programs for the prevention of substance use disorders in youth; (4) The use of the money described in section 10.5 of this act to improve racial equity; and (5) Reporting by state and local agencies to the public concerning the funding of programs to address substance misuse and substance use disorders.				
6	(h) Examine qualitative and quantitative data to understand the risk factors that contribute to substance use and the rates of substance use, and substance use disorders, focusing on special populations.				

## Number of Times Special Populations Impacted by Recommendations Across 2023 and 2024

Subcommittee	Veterans, Elderly Populations, & Youth	Persons who are involved in the criminal justice/juvenile systems	Pregnant women and the parents of dependent children	Lesbian, gay, bisexual, transgender and questioning persons	People who inject drugs; (as revised)	Children who are involved with the child welfare system	Other populations overly impacted by substance use disorders
2023	11	10	7	7	13	5	18
Prevention & Harm Reduction	4	5	1	2	6	2	11
Response	3	3	2	2	4	1	4
Treatment & Recovery	4	2	4	3	3	2	3
2024	6	7	3	5	6	5	11
Prevention & Harm Reduction	3	2	0	2	2	2	6
Response	2	4	2	2	3	2	3
Treatment & Recovery	1	1	1	1	1	1	2
Total	17	17	10	12	19	10	29
Total Prevention & Harm Reduction	7	7	1	4	8	4	17

# 6. PLANNING FOR 2025 PREVENTION SUBCOMMITTEE MEETINGS

# Planning for 2025 Prevention Subcommittee Meetings

- What would the Prevention Subcommittee like to accomplish this year?
- What is your vision for developing recommendations?
  - Should we focus on refining last year's recommendations or on creating new recommendations?
- Where do we want to be by October when the SURG will begin narrowing down the recommendations to include in the annual report?

# Planning for 2025 Prevention Subcommittee Meetings, Cont.

#### **Prevention Subcommittee Meeting Dates:**

• May 7, June 4, August 6, September 3, November 5 from 3:00-4:30 pm

# 7. DISCUSS REPORT OUT FOR APRIL 9 SURG MEETING

### 8. PUBLIC COMMENT

#### Public Comment

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### 9. ADJOURNMENT

### ADDITIONAL INFORMATION, RESOURCES & UPDATES AVAILABLE AT:

https://ag.nv.gov/About/Administration/Substance

Use Response Working Group (SURG)/



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