



## OFFICE OF THE ATTORNEY GENERAL

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# PREVENTION SUBCOMMITTEE

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Substance Use Response Group (SURG)

April 6, 2023

1:00 pm

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

Chair Johnson

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

<b>Member</b>	<b>SURG Role</b>	<b>Committee Role</b>
Jessica Johnson	Urban Human Services (Clark County)	Chair
Debi Nadler	Advocate/Family Member	Member
Angela Nickels	Representative of a School District	Member
Erik Schoen	SUD Prevention Coalition	Vice Chair

## **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.

**3. REVIEW AND APPROVE  
OCTOBER 12, 2022  
PREVENTION SUBCOMMITTEE  
MEETING MINUTES**

Chair Johnson

**4. REVIEW OF NATIONAL  
ACADEMIES OF SCIENCE  
BEHAVIORAL HEALTH  
CONTINUUM OF CARE MODEL**

Alyssa O'Hair, Center for the Application of  
Substance Abuse Technologies (CASAT)

# PRESENTATION TO THE PREVENTION SUBCOMMITTEE

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Substance Use Response Group (SURG)

*Alyssa O'Hair, MPH, MA, CPS*

*Senior Manager, Workforce Development*

*CASAT, University of Nevada, Reno*



# Disclosures

This presentation is supported by SAMHSA of the U.S. Department of Health and Human Services (HHS) through SAMHSA Cooperative Agreement #H79SP081015-01. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by SAMHSA/HHS, or the U.S. Government.

# Introduction

- *Define prevention, levels of prevention, and the spectrum of behavioral health care services*
- *Describe how the levels of prevention overlay the spectrum of behavioral health services*

# What is Prevention?

**Definition:** Interventions offered prior to the onset of a disorder that are intended to prevent or reduce risk for the disorder.<sup>1,2</sup>



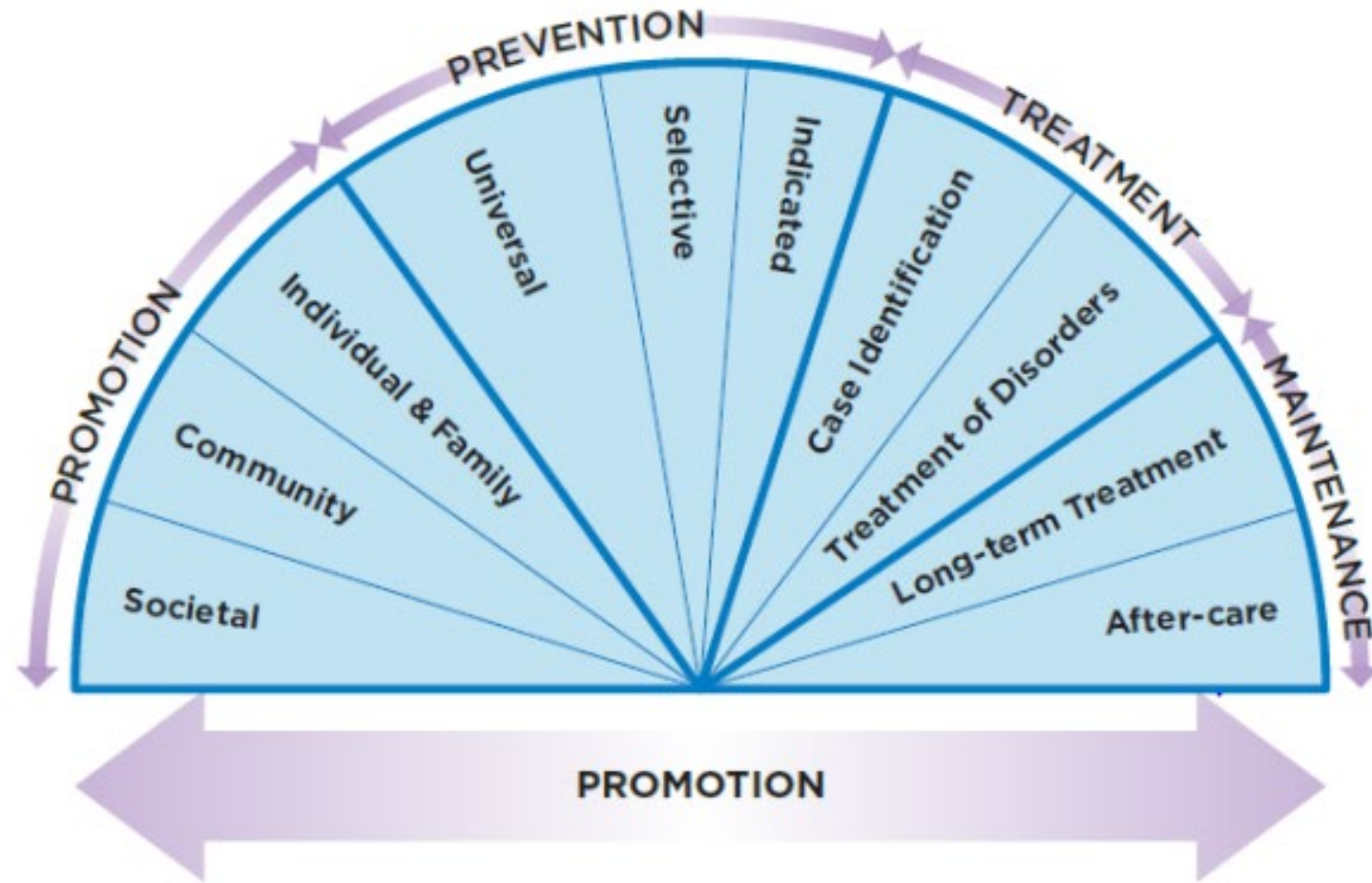
# Levels of Prevention:<sup>3</sup> Stages of Health and Wellness (\*Disease, Injury, Disability\*)

**Primary Prevention:** reducing the incidence of disease by risk factor reduction well before the onset of illness

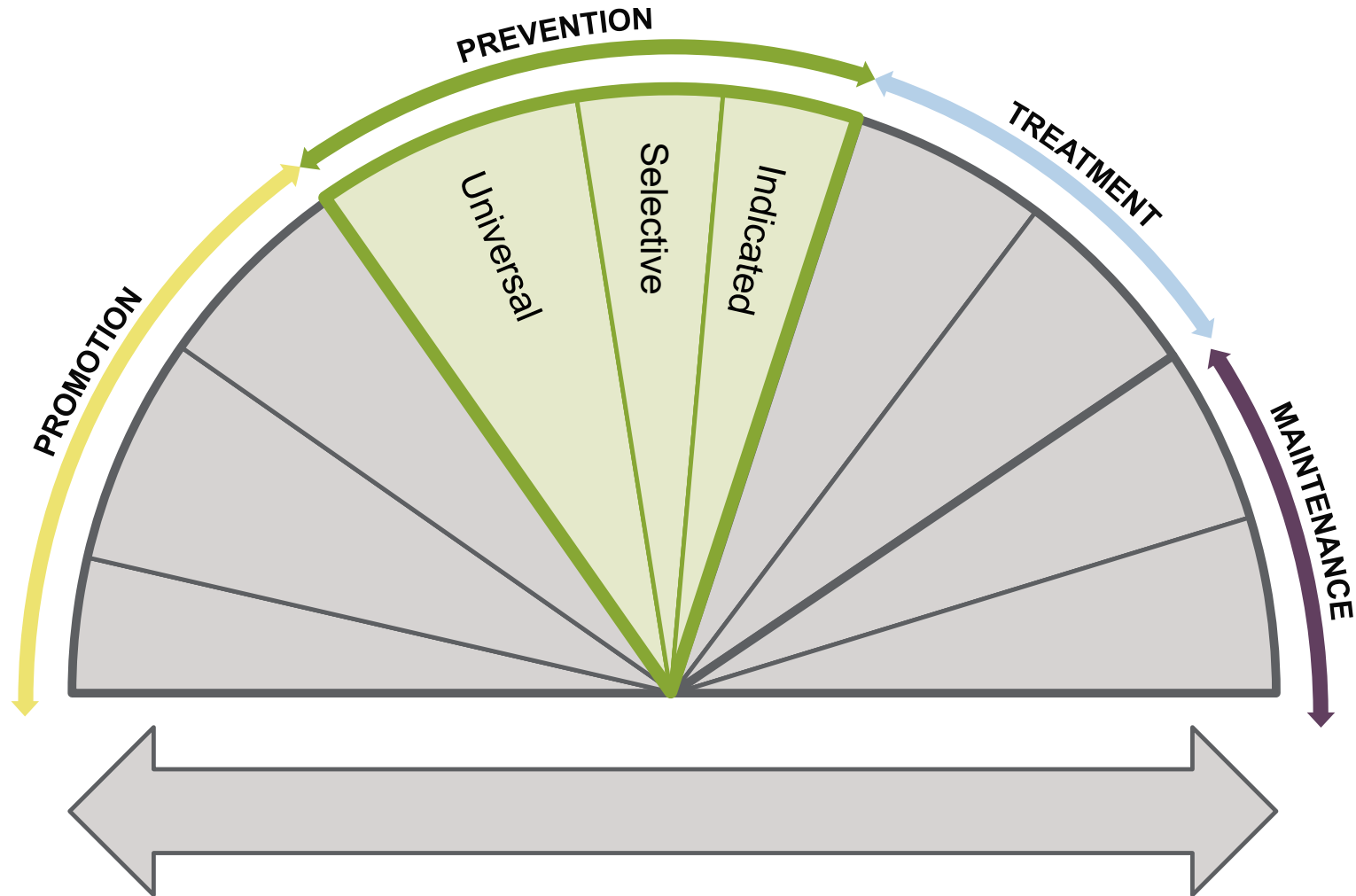
**Secondary Prevention:** reducing prevalence via early identification and treatment during the latent stage

**Tertiary Prevention:** reducing morbidity, disability, and mortality by treating an established disease

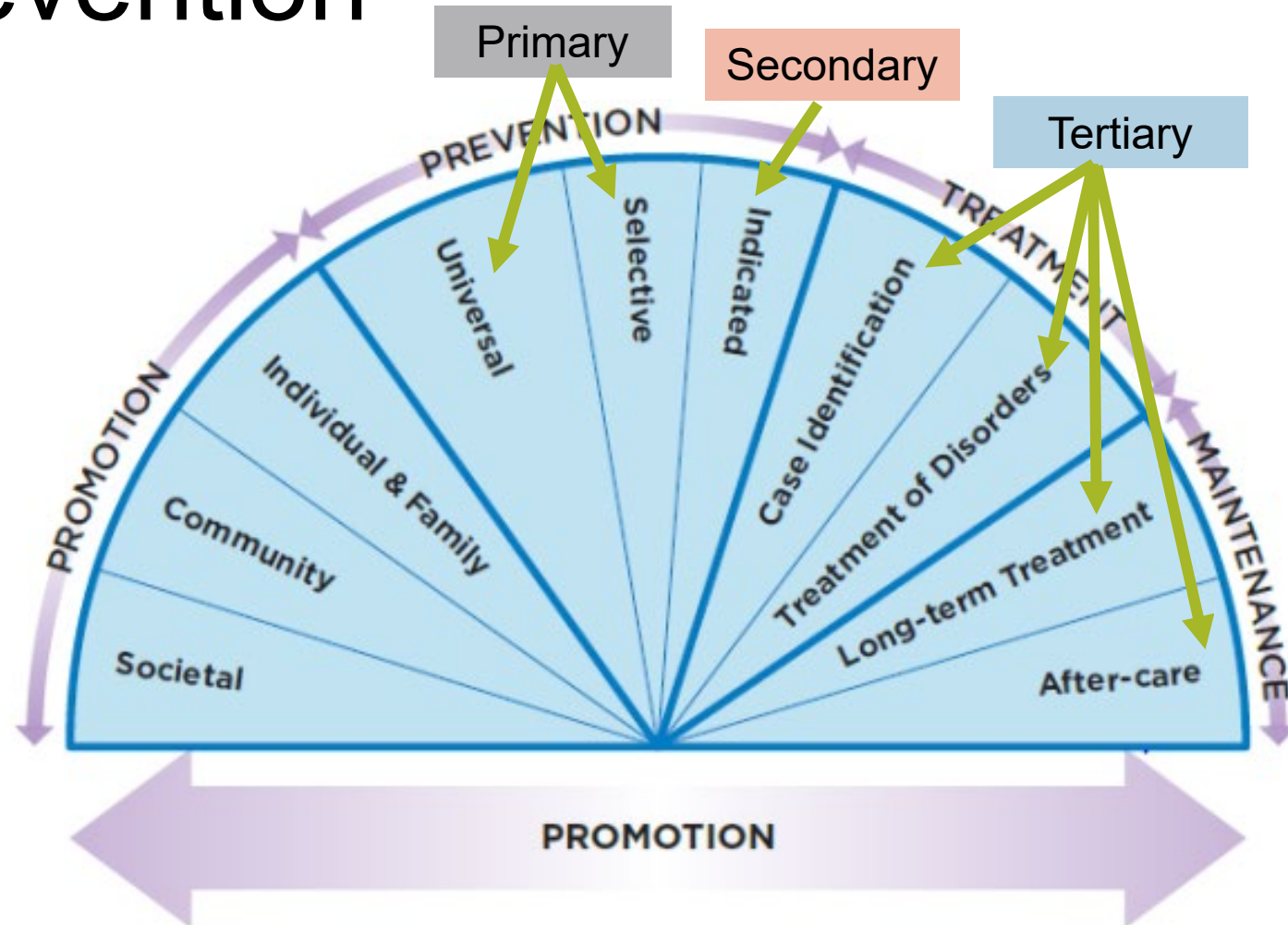
# Spectrum of Behavioral Health Services<sup>1</sup>



# Prevention Services<sup>1,2</sup>



# Connecting the Spectrum and Levels of Prevention



# References

- <sup>1</sup>National Academies of Sciences, Engineering, and Medicine, (2019). *Fostering Healthy Mental, Emotional, and Behavioral Development in Children and Youth: A National Agenda*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25201>.
- <sup>2</sup>National Research Council and Institute of Medicine, (2009). *Preventing mental, emotional, and behavioral disorders among young people: Progress and possibilities* (O'Connell, M. E., Boat, T., & Warner, K. E., Eds.) Washington, DC: National Academies Press.
- <sup>3</sup>Goldston, S. E., (1987). *Concepts of primary prevention: A framework for program development*. Sacramento: California Department of Mental Health.



# Contact Information

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# **5. REVIEW 2023 SUBCOMMITTEE GUIDANCE**

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Chair Johnson and Emma Rodriguez, Social  
Entrepreneurs, Inc.

# 2023 Subcommittee Guidance

In 2023, SURG subcommittee members are asked to:

- Submit recommendations you can present on your own whenever possible; or,
- If you have a tangible recommendation that you do not feel that you can present on, then suggest a subject matter expert who can provide a specific, targeted presentation related to the recommendation.
- Provide 5-minute presentations on each recommendation, with time for questions and discussion following the presentation.

# 2023 Subcommittee Guidance Continued

- Please do not include recommendations that are in the 2022 SURG report. However, if there was a recommendation previously included in the annual report that was listed as "needs further research," you can resubmit along with additional research for the subcommittee to consider.
- Rather than utilizing an iterative weighting process, in 2023 subcommittees will be encouraged to present, discuss, and refine recommendations in the spring/summer and then weight recommendations for inclusion in the fall for the final report.
- The Prevention Subcommittee will have a comprehensive view including primary, secondary, and tertiary activities, plus harm reduction. A full SURG meeting dedicated to Harm Reduction took place April.

# Survey Feedback: What worked well?

- Subcommittees (5)
  - “Able to cover more ground and move things along”
  - “Prioritization process”
  - “Discussion of recommendations”
- SEI coordination and staff organization (4)
- Shared documents to compile information (2)

# Survey Feedback: What could be improved?

- Presentations on contested recommendations at SURG
- Better definition of subcommittees or full SURG meeting dedicated to the cross over recommendations
- Clarification on the recommendation ranking process
- More predictable schedule of meetings, especially for subcommittees
- Length of meetings should be shortened to 90 minutes or less
- Addressing harm reduction in its own separate capacity, harm reduction-specific subcommittee
- Asking SURG members what they would like to learn from presentations
- More presentations from providers instead of from the state
- Better adherence to public comment period time limits

Any additional feedback from  
Prevention subcommittee members  
before we start the 2023  
recommendations process?

**6. REVIEW AB374 SECTION 10  
REQUIREMENTS SPECIFIC TO  
PREVENTION SUBCOMMITTEE AND  
RECOMMENDATIONS IN 2022 ANNUAL  
REPORT**

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Chair Johnson



# AB374 Section 10 Cross-Cutting Elements Assigned to all Subcommittees (part one)

- (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;
  - (3) Treat the medical consequences of a substance use disorder in a person and facilitate the treatment of the substance use disorder to minimize further harm; and
  - (4) Reduce the harm caused by substance use, including, without limitation, by preventing overdoses.
- (c) **Assess and evaluate existing pathways to treatment and recovery for persons with substance use disorders, including**, without limitation, such persons who are **members of special populations**.

# AB374 Section 10 Cross-Cutting Elements Assigned to all Subcommittees (part two)

- (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.**
- (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.

# Prevention Subcommittee AB374

## Section 10 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.

# 2022 SURG Annual Report Recommendations as Aligned with Prevention Subcommittee AB374 Section 10 Assignments (part one)

- **(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.
  - *Significantly increase capacity; including access to treatment facilities and beds for intensive care coordination to facilitate transitions and to divert youth at risk of higher level of care and/or system involvement. Implement a specialized child welfare service delivery model that improves outcomes for children and families affected by parental substance use and child maltreatment. (Treatment and Recovery #6)*
  - *Expand access to MAT and recovery support for SUD, limit barriers to individuals seeking treatment regardless of the ability to pay, and encourage the use of hub and spoke systems, as well as recovery support, including use and promotion of telehealth, considering the modifications that have been made under the emergency policies, and pursuing innovative programs such as establishing bridge MAT programs in emergency departments. (Treatment and Recovery #1)*

# 2022 SURG Annual Report Recommendations as Aligned with Prevention Subcommittee AB374 Section 10 Assignments (part two)

- (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.
  - *Support Harm Reduction through:  
Create a recommendation to the legislature modeled on Maryland's STOP Act which authorizes certain emergency medical services providers to dispense naloxone to individuals who received treatment for a nonfatal drug overdose or were evaluated by a crisis evaluation team, and requires certain community services programs, certain private and public entities, and hospitals to have a protocol to dispense naloxone to certain individuals free of charge under certain circumstances. (Prevention 8b)*

# 2022 SURG Annual Report Recommendations as Aligned with Prevention Subcommittee AB374 Section 10 Assignments (part three)

- **(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.
  - *Support prevention and intervention in K-20 schools by investing in multi-tiered system of supports (MTSS) and provide a robust platform of services at schools to connect families to prosocial education, early intervention, counseling services, and other resources to help mitigate Adverse Childhood Experiences (ACES). (Prevention #3)*

# **7. 2023 LEGISLATIVE SESSION UPDATE**

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Chair Johnson

# Legislative Update (part one)

Senate Bills that overlap with 2022 SURG Annual Report recommendations from Prevention subcommittee:

- **SB117** – Expands Medicaid coverage to community health workers
  - SURG Recommendation #6 to Expand Medicaid for preventive services and access to care
  - SURG Recommendation #15 to enhance compensation of health and behavioral health care workers; sustain/expand investment in Community Health Workers, Peer Recovery Specialists, and Certified Prevention Specialists.
- **SB119** – Extends coverage for telehealth services
  - SURG Recommendation #11 to expand access to MAT, and SUD recovery support including telehealth.
- **SB191** – Expands Medicaid coverage to behavior analysts, assistant behavior analysts and registered behavior technicians for recipients under 27 years of age.
  - SURG Recommendation #6 to Expand Medicaid for preventive services and access to care.



# Legislative Update (part two)

Assembly Bills that overlap with 2022 SURG Annual Report recommendations from Prevention subcommittee:

- **AB138** – Expand State Plan for Medicaid to cover evidence-based behavioral health services.
  - SURG Recommendation #6 to Expand Medicaid for preventive services and access to care.
- **AB156** - Ensure availability of medication-assisted Treatment in jails, detention centers, and correctional facilities, for people diagnosed with opioid use disorder, and continuation of treatment on release or transfer.
  - SURG Recommendation #11 to expand access to MAT and recovery support for SUD, including bridge MAT programs.

# Legislative Update (part three)

- Please see “Substance Use Bills 2023” spreadsheet for full list of bills that have been identified that overlap with 2022 SURG recommendations
- Are there any other bills subcommittee members are tracking that should be added to this list?

# **8. OVERVIEW OF RECOMMENDATIONS RECEIVED AND NEXT STEPS**

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Chair Johnson

# Recommendations Received and Next Steps

- **One recommendation received** on DEA's Community Outreach Section (Debi Nadler)
  - *Presentation scheduled* for May 15 meeting from Ruth Morales, Community Outreach Specialist, DEA
- *Presentation scheduled* for May 15 meeting on Behavioral Health Continuum of Care and integrating primary, secondary, and tertiary prevention with universal, selective, and indicated efforts from Alyssa O'Hair, Senior Manager, Workforce Development, CASAT
- **Other Ideas to Discuss/Workshop?**
- **Presenter Suggestions?**

# **9. PUBLIC COMMENT**

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# Public Comment

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# **10. ADJOURNMENT**

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

[https://ag.nv.gov/About/Administration/Substance  
Use\\_Response\\_Working\\_Group\\_\(SURG\)/](https://ag.nv.gov/About/Administration/Substance_Use_Response_Working_Group_(SURG)/)



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