



OFFICE OF THE ATTORNEY GENERAL

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Statewide Substance Use Response Working Group Meeting

April 8, 2026

Slides updated on 4/27/2026

1. Call to Order and Roll Call to Establish Quorum

Attorney General Ford

2. Public Comment

(Information Only)

Public Comment

- Public comment shall be limited to three (3) minutes per person. We will begin with comments from Las Vegas and then invite comments from Carson City, followed by virtual participants.
- 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 241.021.

In Person

- Please form a line.
- Before commenting, please state your full name for the record.

Public Comment

Attending Virtually

If you are dialing in from a telephone:

- Dial 669-444-9171
- When prompted enter the Webinar ID: 874 4950 7943
- Then enter the Meeting Passcode: 168375
- Please press *6 so the host can prompt you to unmute.

If you are joining virtually with computer audio, please use the “raise hand” feature to indicate you would like to provide public comment so the host can prompt you to unmute.

Before commenting, please state your full name for the record.

Members of the public are requested to refrain from commenting outside the designated public comment periods, unless specifically called upon by the Chair.

Please do not use the chat for items other than technical support, as this becomes part of the public record.

*Comments can also be emailed to kdocena@socialent.com. These comments and questions will be recorded in meeting minutes.

3. Review and Approve Minutes for January 14, 2026 SURG Meeting

(For Possible Action)

Attorney General Ford

4. Status Update from the Fund for a Resilient Nevada

(Information and Discussion)

Dawn Yohey, MFT, LCADC, Clinical Program Planner, Nevada Department of
Human Services, Fund for a Resilient Nevada

Joe Lombardo
Governor



Laura Rich
Director

Fund for a Resilient Nevada Annual Report

Director's Office

Dawn Yohey, MFT, LCADC, CPP3

April 8, 2026

Department of Human Services

Helping people. It's who we are and what we do.





Report to the SURG

This report to the SURG is to fulfill annual requirements for NRS 458.490

- FRN Annual Report
- One Nevada Signatories reports to the Fund for a Resilient Nevada.
- Fund for a Resilient Nevada Dashboard



FRN Annual Report

2025 Fund for a Resilient Nevada Annual Report

Pursuant to Nevada Revised Statutes (NRS) 433.734, on or before January 31 of each year, the Department shall transmit a report concerning all findings and recommendations finalized, as well as money expended or encumbered for specific recommendations pursuant to NRS 433.734 through 433.740 within the Fund for a Resilient Nevada (FRN).



Fund for a Resilient Nevada Annual Report

Nevada Department of Health and Human Services

A report concerning all findings and recommendations made and money expended pursuant to

Nevada Revised Statutes NRS 433.734 to 433.740



Period of Performance is January 1, 2025, through December 31, 2025 (SFY25/26)





FRN Annual Report

Layout:

- Introduction
- Statewide Funding Priorities
- Findings
- Funded Programs and Progress Reports (Regional)
- Recommendations
- Expenditures



Statewide Funding Priorities

1. Ensure local programs have the capacity to implement recommendations effectively and sustainably.
2. Prevent the misuse of opioids.
3. Reduce harm related to opioid use.
4. Provide behavioral health treatment.
5. Implement recovery communities across Nevada.
6. Provide consistent opioid prevention and treatment across criminal justice and public safety systems.
7. Ensure high-quality data and accessible, timely reporting.



Findings

- Overdose deaths and opioid involvement continued to increase in Nevada from 2023 to 2024.
- Provisional 2024 data indicate 1,253 overdose deaths statewide, representing a continued upward trend.
- 792 deaths (63%) involved opioids.
- Growth rate for synthetic opioids has slowed.
- Nevada High Intensity Drug Trafficking Area (HIDTA) continues to identify fentanyl as a high threat due to wide spread availability and low cost, however deaths related to synthetic opioids, including fentanyl only increased by 7% (633 to 677) from 2023 to 2024.
- Opioids continue to pose a disproportionate risk for families and children involved in the child welfare system.
- Methamphetamine, cocaine and heroin remain high threat substances.

*Information on this slide was provided by Nevada Office of Analytics and
The HIDTA Program's 2026 Threat Assessment*



Funded Programs and Progress Reports

Funded initiatives are organized by region: Northern, Rural, Southern, and Statewide.

Each subsection summarizes progress toward opioid-abatement goals, service reach, and measurable outcomes.



Highlighted Programs

Living Free Health and Fitness

University of Nevada, Las Vegas (UNLV) Wastewater

Raise the Future



Living Free Health and Fitness

- Is the only facility with a Behavioral Health Certification for Excellence in Nevada (BHCENcertified) transitional recovery housing for women, children, pregnant individuals, and veterans in the mid- and southern frontier regions of Nevada.
- The Frontier Treatment & Housing program served 11 unique clients, delivering 735 bed days through November and provided structured American Society of Addiction Medicine *ASAM)Level 2.1 and 1.0 services, including weekly drug testing, evidence-based therapy, 12-step meetings, life skills support, and case management referrals.
- Despite frontier conditions and limited rural service availability, 100% of clients received individualized treatment plans and engaged in regular group or individual treatment.
- The program demonstrated meaningful opioid abatement outcomes through four successful completions and 64% of participants stepping down to a lower level of care, with multiple clients successfully reunifying with children or transitioning into independent living.



UNLV Wastewater

- Partnership between Southern Nevada Water Authority (SNWA), the Southern Nevada Health District (SNHD), UNLV's Center for Water Intelligence and Community Health, and the University of Nevada Reno.
- Have built an integrated wastewater monitoring program to detect opioids and other high-risk substances among youth and transitional age youth on college campuses in Southern Nevada.
- In their 2025 pilot study/manuscript collaboration between UNLV, SNHD, and SNWA can be found: <https://doi.org/10.2166/wh.2026.182> . The publication includes the study of high-risk substances on a university campus in Southern Nevada, including important lessons learned for future campus-based wastewater monitoring
- Detections of opioids (e.g., heroin), related metabolites (e.g., norfentanyl), and other high-risk substances in campus wastewater illustrate how campus-based wastewater monitoring can capture substance presence/use that may help inform future public health activities.
- Another upstream monitoring assessment of individual residence halls revealed consistent detection of methadone and its metabolite EDDP in specific dorms throughout the fall semester (ppt figure page 12). Cocaine and related metabolites were also elevated in the same housing.
- These findings are now informing new intervention strategies with student health services, including targeted harm reduction programming, pain management education, naloxone availability, and confidential counseling access.

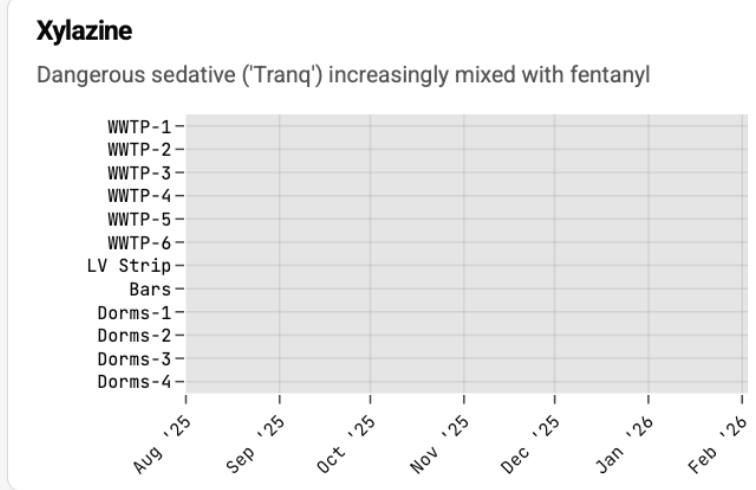
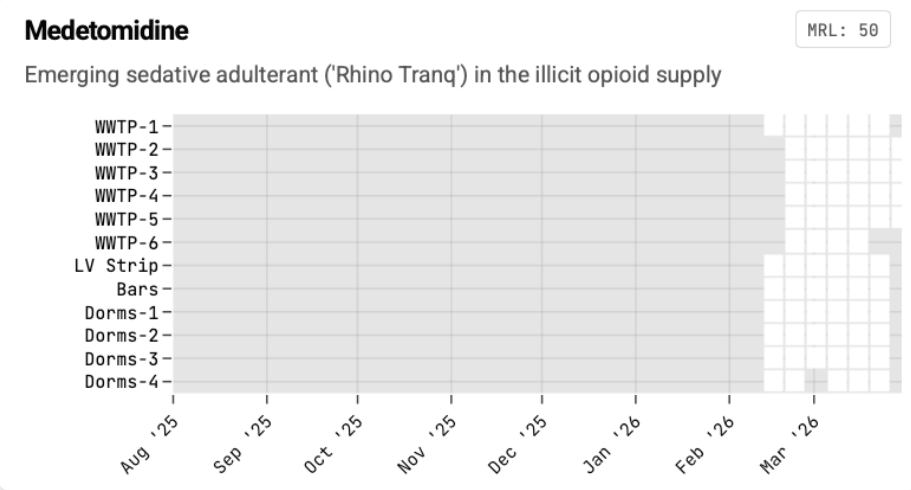
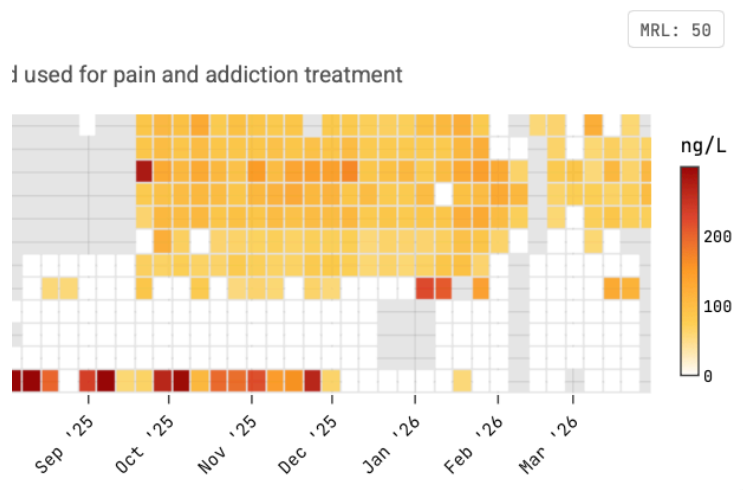
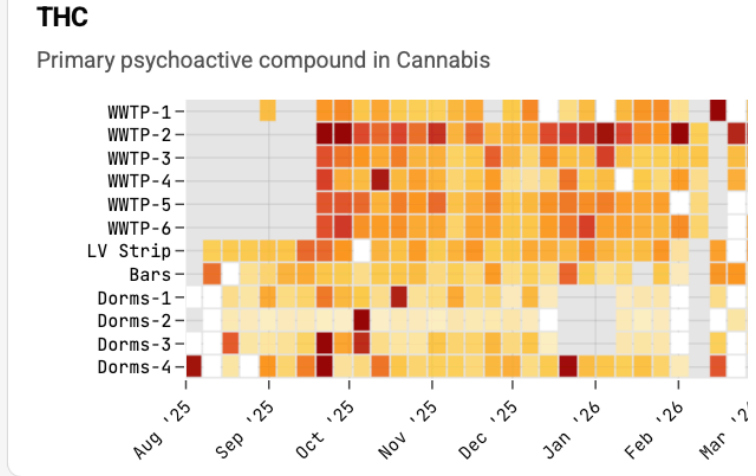
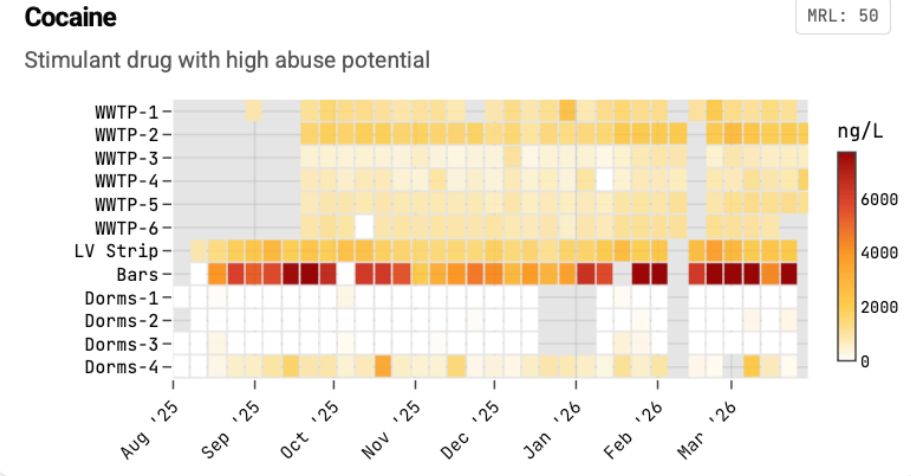
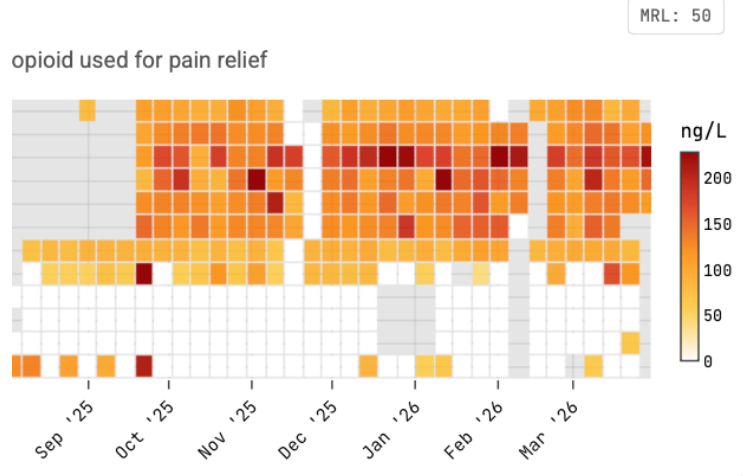


UNLV Wastewater

- Results are shared with the local health department, the city's mobile crisis intervention team, and the university student wellness team, creating a direct pipeline from wastewater signal to student-facing public health response. A new dashboard being developed provides interactive visualization of drug analyte concentrations across monitoring sites and time points.
- New efforts are also being developed and deployed to monitor additional substances (xylazine (Tranq), medetomidine (Rhino Tranq)). No detections from dormitories at this point.
- The program is now in Year 2, expanding to additional Nevada university campuses, incorporating composite sampling, and broadening the analyte panel to address emerging threats in the drug supply.
- This program aims to extend wastewater-based drug monitoring to all high schools across Nevada, positioning the state among national leaders in campus-based surveillance for youth substance use prevention.
- Achieving this will require state-level support to coordinate with school districts statewide.



Drug Analytes April 2026





Raise the Future

- Advanced statewide opioid-abatement efforts by strengthening permanency outcomes for youth in foster care — an evidence-based protective factor shown to reduce future substance use, opioid misuse, homelessness, and behavioral health crises.
- Through the Wendy’s Wonderful Kids (WWK) Intensive Recruitment model, the program delivered specialized permanency services to 183 children, including 96 youth with documented prenatal or environmental exposure to substances or opioids.
- Nine Youth Connections Advocates exceeded annual performance expectations by securing 45 permanency matches—surpassing the combined goal of 39 — and achieving 27 finalized adoptions, guardianships, or reunifications, nearly doubling the original target of 16.
- Recruiters implemented a full continuum of permanency-focused activities, including diligent searches, monthly adoption preparation sessions (reaching an average of 97 youth per month), identification of 800 potential adoptive resources monthly, and initiation of contact with an average of 71 new prospective families each month.



Recommendations

- Maintain and/or decrease funding efforts
- Complete program evaluations
- Complete needs assessment/statewide plan
- Identify priorities with the ACRN and other partners for future funding



Expenditures

Expenditure tables are provided in accordance with NRS 433.734–433.740. These tables document the revenue and expenditure of FRN funds for SFY 2023-2025



Questions?



One Nevada Signatories



Northern



Carson City

Category: Prevention

Target Population: Parents of Dependent Children and Youth

Total Expenditures \$202,789.39

Project Name: Provide Case Management services to the Public Defenders Office for their indigent clients.

Project Name: Provide Case Management services to the Public Defenders Office for their indigent clients

Category: Treatment Adult and Youth

Target Population: Homeless, Parents of Dependent Children and Youth

Total Expenditures \$116,055.89

Project Name: Alternative Sentencing Part-time technician and Full-time Drug Technician to provide those enrolled in court-ordered programs with the supervision and resources necessary to succeed and meet court-ordered programs.

Category: Criminal Justice Adult and Youth

Target Population: Individuals at risk for being involved with the Justice System.

Total Expenditures \$308,726.21



Carson City Reported Outcomes

Project Name: Increase the capacity for prevention education for youth and families by hiring a Juvenile Services Outreach Specialist. Metrics: 35 parent education classes were held with a total of 396 attendees; 104 school intervention and education classes were conducted reaching 524 students; 167 evidence-based classes were provided with 167 attendees; and 50 diversions.

Project Name: Provide Case Management services to the Public Defenders Office for their indigent clients. Metrics: A total of 371 clients with alcohol and other drug-related (AOD) and co-occurring mental health needs were served. Of the 371 clients, 89 client assessments were completed, 198 person-centered care plans were developed, and 84 mitigation cases were supported. A total of 35 NRS 432B reunification cases resulted in children being reunified with their parents. The project also provided 323 community service referrals, 407 referrals to substance abuse and mental health providers, and facilitated 218 expert evaluations.

Project Name: Alt Sentencing Part time Technician and Full Time Drug Tech to provide those enrolled in court ordered programs with supervision the resources necessary to ensure they succeed and meet court ordered programs. Metrics: 18,078 Specimens were collected for the 2025 project period, a 997 increase from the 2024 project period.



Central Lyon County Fire Protection District

The District elected to roll over opioid funding to the next calendar year to ensure the most effective and responsible use of the funds. By carrying the funding forward, the District can complete a full assessment of current inventory, anticipated call volume, and updated medication options, while also aligning purchases with evolving clinical guidelines and pricing.

This approach allows the District to maximize purchasing power, avoid unnecessary or premature expenditures, and ensure that lifesaving overdose reversal medications are available in appropriate quantities when needed. The rollover does not delay patient care and reflects prudent fiscal management while maintaining readiness to respond to opioid-related emergencies.

Total Expenditures: \$0



Churchill County

Category: Campaigns / Harm Reduction

Project Name: Resource Liaison Outreach

Target Population: All except for youth and tribal entities

Total expenditure: \$49,817.97

Administrative expenses (no more than 5%): \$0

Category: Youth

Project Name: Criminal Justice (Youth)

Target Population: Youth

Total expenditure: \$31,030.32

Administrative expenses (no more than 5%): \$0



Churchill County Reported Outcomes

Category: Campaigns / Harm Reduction

Project Name: Resource Liaison Outreach

Outcome: 292 of 396 participants reported meeting a minimum of one positive outcome and a successful linkage to resource to increase healthy, independent living.

Category: Youth

Project Name: Criminal Justice (Youth)

Goal: over 100 connections were made with youth to reduce criminal engagement



Douglas County

Project Name: Partnership Douglas County

Target Population: Youth

Category: Youth

Rural/Frontier Communities

Criminal Justice (Youth)

Prevention

Total expenditures: \$39,938.86

Project Name: Suicide Prevention Network

Target Population: Adults

Category: Treatment

Training

Rural/Frontier Communities

Campaigns

Total expenditure: \$74,049.00

Project Name: Carson Valley Health Services

Target Population: Youth and Adults

Category: Treatment

Rural/Frontier Communities

Total expenditure: \$19,767.54



Douglas County

Project Name: Carson City Community Counseling

Target Population: Adults and Youth

Category: Treatment

Rural/Frontier Communities

Harm Reduction

Total expenditure: \$33,462.28

Administrative expenses (no more than 5%): \$705.02

Project Name: Body Scanner

Target Population: Youth, First Responders

Category: Prevention, Juvenile Justice

Rural/Frontier Communities

Total expenditure: \$84,300.00

Project Name: Family Support Counsel

Target Population: Pregnant or Parenting Women, Adult Women, Youth

Category: Training

Prevention

Rural/Frontier Communities

Total expenditure: \$14,100.04



Douglas County

Project Name: 2 Fentanyl Containment Units

Target Population: First Responders

Category: Criminal Justice

Rural/Frontier Communities

Total expenditure: \$23,823.46

Project Name: Tahoe Youth and Family

Target Population: Adults and Youth

Category: Treatment

Rural/Frontier Communities

Total expenditure: \$30,688.01

Administrative expenses (no more than 5%): \$987.94

*Agency closed their doors May 2025 due to funding issues in Nevada Agencies total funding request was for \$115,774.99 for the 2025 CY.

Douglas County Social Services

Administrative Service Manager of Behavioral Health Services

Category: Oversees funding for One Nevada programs

Total Expenditure: Gross YTD pay \$79,244.20



Douglas County Reported Outcomes

Carson Valley Health Data

Substance Abuse Groups 2: Adult Treatment
January 2025- December 2025 134 clients

Mental Health Group: January 2025-December
2025 They had no participants this CY.

Carson Valley Health Opioid Prevention Education
Training April 30th, 2025, 9 Adult Participants

Partnership Douglas County February 2025-
December 2025

Too Good For Drugs Presentation: 830 youth

3rd Millennium Program: 31 youth

Catch My Breath Program: 40 youth

ACES TRAINING 46 Adult Participants

Douglas County Sherriff's Fentanyl Containment Units

(1 Unit Purchased January 2025, 2nd Unit Purchased
May 2025)

Douglas County Sherriff's Office seized the following
drugs:

Methamphetamine	1,154.18 grams
Marijuana	551.65 grams
Cocaine	1,274.61 grams
Fentanyl	52.63 grams
Psilocybin Mushrooms	293.99 grams
Ketamine	.45 grams
LSD	2.4 grams
MDMA	1.5 grams



Lyon County

Category: Harm Reduction

Project name: Naloxone Distribution

Target population: Rural/Frontier Communities, Homeless

Total expenditures: \$7,501.67

Category: Capacity Building

Project Name: Behavioral Health Division Expansion and Medicaid Billing for sustainable services

Target Population: Rural/Frontier Communities

Total expenditures: \$70,294.50

Administrative Expenses: \$3,163.25

Category: Data

Project Name: Universal Screening and connection to services (Opioid misuse and risk data collection across all programming)

Target Population: Rural Frontier Communities

Total Expenditures: \$28,473

Administrative Expenses: \$0.00

Category: Prevention Secondary

Project Name: Universal Screening and service connection (actual action of reviewing the screening and connecting to care)

Target population: Rural/Frontier communities

Total expenditures: \$51,059.6

Administrative Expenses: \$0.00

Category: Prevention Secondary and Tertiary

Project Name: Lyon County Resilient Families

Target Population: Parents of Dependent children, youth, persons and families involved with criminal justice, and transitional aged youth

Total expenditures: \$210,902

Administrative Expenses: \$10,042.98



Lyon County Reported Outcomes

Category: Harm Reduction

Project name: Naloxone Distribution

Target population: Rural/Frontier Communities, Homeless

90 Naloxone kits were distributed

Category: Capacity Building

Project Name: Behavioral Health Division Expansion and Medicaid Billing for sustainable services

Target Population: Rural/Frontier Communities

Outcomes: LCHS is a medicaid provider for Behavioral Health Outpatient, has been able to bring on contractors to expand medication assisted treatment funded under other grant programs and services.

Category Data

Project Name: Universal Screening and connection to services

Target Population: Rural Frontier Communities

Outcomes: Data software was utilized the entire year with all clients housed in one database to pull reports on screenings and connections to services. 3,102 individuals were entered into the system.

Category: Prevention Secondary

Project Name: Universal Screening and service connection

Target population: Rural/Frontier communities

Measurements: 1838 individuals opted into screening, 231 screened possible misuse and offered referrals.

Category: Prevention Secondary and Tertiary

Project Name: Lyon County Resilient Families

Target Population: Parents of Dependent children, youth, persons and families involved with criminal justice, and transitional aged youth.

Measurement: 160 clients connected to the program to receive services.



Storey County

Project Name: Shelby Project

Target Population: Individuals involved with the justice system or at risk of being involved with the justice system

Total Expenditures: \$114,136.90

Total Administrative: \$6,677.88



Storey County Reported Outcomes

The program is in development, but tracking sheets of basic demographics and re-offense is being collected.



Southern



City of Boulder

Campaign

Anti Fentanyl

Individual at Risk of Criminal Justice System

\$3195.75

\$0 Admin Costs

Criminal Justice

Drug Court Program

Individual at Risk of Criminal Justice System

\$10,192.88

\$0 Admin Costs



City of Boulder Reported Outcomes

We have had many participants graduate from drug court and remain sober.



Nye County

Indirect:

Labor: \$43,664.17

Materials: \$47.00

Other: \$24,182.50

Operating:

Materials: \$2,526.32

Other: \$708.43

Other Labor: \$22,873.68

Services:

Professional Services: \$10,989.00

Allocated:

Project Name: Pahrump Valley Youth Opioid Art Contests

Categories: Data, Prevention (Primary)

Target Population(s): Parents of Dependent Children, TAY, Rural Communities, Other: Seniors/Elderly Population

Total Expenditures: \$711.57

Administrative Expenses: \$0.00

Project Name: Recovery Support Station

Categories: Recovery Communities (SDOH), Capacity Building, Infrastructure Development, Harm Reduction

Target Population(s): Rural/Frontier Communities, Homeless, Justice-Involved, Transitional-Aged Youth

Total Expenditures: \$384.83

Administrative Expenses: \$0.00



Nye County Reported Outcomes

Resilience & Recovery Funding Opportunities

Outcomes: 5-10 funded local initiatives strengthening prevention and recovery capacity.

Measurement: Grant tracking, quarterly reports, and outcome metrics from subrecipients.

Sustainability: Established peer-review and reporting systems now embedded in county grant management processes.

Pahrump Valley Youth Opioid Art Contest

Outcomes: 200+ youth and families engaged in prevention dialogue.

Measurement: Participant counts, survey feedback, and public engagement metrics.

Sustainability: Annual event supported by school and community sponsors.

EmpowerEd

Outcomes: 5-8 students supported through scholarships and workforce alignment.

Measurements: Enrollment and completion tracking, follow-up employment data.

Sustainability: Integration with workforce development and WIOA pipelines.

Recovery Support Station

Outcomes: 10-15 individuals served weekly with resource and peer navigation.

Measurement: Service logs, referrals, and follow-up outcomes.

Sustainability: Integrated into HHS infrastructure and ongoing partner collaboration.

Ride to Recovery Transportation Program

Outcomes: 100+ rides provided for treatment, recovery, and employment access.

Measurement: Trip logs and referral tracking.

Sustainability: Maintained through HHS operations, with potential expansion via Medicaid and regional partnerships.



Nye County Reported Outcomes

Living in Recovery (Sober Housing Program)

Outcomes: Multiple sober homes supported, increased housing stability for participants.

Measurements: Occupancy, retention, and recovery engagement data.

Sustainability: Standardized application and oversight systems maintained through HHS.

Technical Assistance and Staff Training

Outcomes: Improved partner coordination and compliance through training sessions.

Measurements: Attendance tracking, participant surveys, and process improvement documentation.

Sustainability: Incorporated into onboarding and regular interagency meetings.

Community Opioid Awareness and Prevention Outreach

Outcomes: 300+ residents reached through prevention campaigns and events.

Measurements: Event attendance, social media analytics, and community feedback.

Sustainability: Reusable campaign materials and community partnerships ensure low-cost replication.

Centralized Opioid Data Dashboard

Outcomes: Streamlined data reporting and visualization of opioid-related indicators across funding streams.

Measurements: Dashboard analytics (usage rates, data completeness, update frequency).

Sustainability: HHS IT and program staff trained to maintain and expand dashboard post-grant; built using free or low-cost software platforms.

Community Needs Assessment Survey

Outcomes: Collected county-wide data on barriers, needs, and service gap to inform next-phase program design.

Measurements: Response volume, demographic representation, and trend analysis over the one-year collection period.

Sustainability: Survey platform maintained internally and reissued annually to guide resource allocation and strategic planning.



Rural



City of Ely

Project Name: White Pine Youth Center, Inc.

Category: Prevention

Target Population: At-Risk Youth

Total Expenditures: \$3,265.20

Administrative Expenses: Negligible



City of Mesquite

Category: Counseling

Project Name: Counseling of Drug Court families

Target Population: Families involved in the Drug Court program

Total Expenditures \$ 5,580.00



Mesquite Reported Outcomes

For those that are in the Breaking the Cycle Program, the Court is tracking their progress toward a graduation outcome.



Elko County

Project Name: Elko County Drug Testing Laboratory

Category: Criminal Justice (Adult), Criminal Justice (Juvenile), Treatment (Adult)
Treatment (juvenile)

Total Expenditures \$236,984.41



Elko County Reported Outcomes

In calendar year 2025 a total of 410 donors have been reported, with 21,312 specimens collected. There has been a total of 1,909 positive results, 29% of the total specimens.

Detailed information is available if needed. The program serves the 4th Judicial District Courts Depts I, II, III, and Specialty Courts as well as Juvenile Probation and Justice Court.



Eureka County

County reports they have not use any money.

Total Expenditures: \$0



Humboldt County

- Category: Treatment and Prevention
 - Project Name: Community Health Worker
 - Target Population: Rural/Frontier Communities
 - Total Expenditure: \$27,440.05
-
- Category: Campaigns
 - Project Name: Humboldt County Emergency Management Mobile App
 - Target Population: Rural/Frontier Communities
 - Total Expenditures: \$128,594
-
- Category: Harm Reduction, Prevention, Treatment
 - Project Name: HOPE (HUMBOLDT OPIOID PLAN FOR ENGAGEMENT)
 - Target Population: Rural/Frontier Communities
 - Total Expenditures: \$23,533.20



Humboldt County Reported Outcomes

Project: Community Health Worker

- Outcome: The community health worker through the Frontier Community Coalition has continued to provide valuable health resources to the community.

Project: Humboldt County Emergency Management Mobile App

- Outcome: Humboldt County's Emergency Manager has fully rolled out the Mobile App and has had ongoing meetings with community members to effectively implement the app within the community and provide valuable community information and resources.

Project: Humboldt Opioid Plan for Engagement

- Outcome: The Family Support Centers HOPE project has provided continuous service to the community with the support of opioid funds which have allowed the FSC to grow its services and expand its outreach within the community.



Lander County

Category: Support People in Treatment

Service: Sierra Nevada Electronic Monitoring

Target Population: Individuals involved or at-risk for being involved with the criminal justice system

Total Expenditure: \$1,317.50



Lander County Reported Outcomes

We have had successful individuals complete the program and go on to live a life of sobriety.



Lincoln County

Project Name: Lincoln Community Coalition of Nevada

Category: Prevention

Target Population: Youth in Rural Communities

Total Expenditures: \$30,000.00

Administrative expenses (n more than 5%): \$0.00



Lincoln County Reported Outcomes

Lincoln Community Coalition of Nevada provides ongoing activities for youth focused on prevention and healthy living. The programs sponsored by the Coalition and funds provided will continue to serve the community and provide growth of the funds through grants obtained as a result of the funds provided.



Pershing County

Project Name: Adult Drug Testing

Category: Prevention (Secondary)

Target Population: Individuals involved or at-risk for being involved with the criminal justice or juvenile justice system

Expenditure: \$39,474.61

Project Name: MAGIC (Making a Group and Individual Commitment)

Category: Prevention (Primary)

Target Population: Youth

Expenditure: \$6,000.00

Project Name: WISE

Category: Prevention (Primary)

Target Population: Youth and Parents

Expenditure: \$3,150.00

Project Name: Counseling and Supportive Programs (Therapy, Life Coach, Functional Families, Substance Use Disorder Evals and Treatment)

Category: Prevention (Primary)

Target Population: Youth/ Individuals involved or at-risk for being involved with the criminal justice or juvenile justice system/Parents

Expenditure: \$25,300.00

Project Name: Parent Project

Category: Prevention (Primary)

Target Population: Parents

Expenditure: \$322.56



Pershing County Reported Outcomes

Adult Drug Testing: No outcomes available

MAGIC: 19 Youth participated

WISE:

- Alcohol-12 Youth participated
- Marijuana-15 Youth participated
- Nicotine-11 Youth participated
- Parent-1 parent participated
- Conflict-8 youth participated

Counseling and Supportive Services:

- Substance Evaluation-12 youth completed
- Substance Treatment-9 youth participated, 2 referred to a higher level, 1 completed

Parent Project: 13 parents participated



White Pine County

Capital Projects

Drug Court Safe House Cameras, Washer Dryer Hook up - \$16,372.75

Individuals involved in criminal justice

Total Expenditures: \$16,372.75

Admin Fees: \$818.63



White Pine Reported Outcomes

White Pine Youth Center – has not started using the facility yet, but has plans to work with people in the recovery environment



Washoe



City of Reno

Project Name: Direct Resource Outreach and Placement System (DROPS) Application

Category: Data

Target Population: Homeless

Total Expenditures: \$222,955.50

Administrative Expenses: \$0

Project Name: First Responder Targeted Support and Intervention

Category: First Responders

Target Population: Statewide

Total Expenditures: \$25,000

Administrative Expenses: \$0

Project Name: Opioid Overdose Prevention Initiative

Category: Prevention

Target Population: Statewide

Total Expenditures: \$20,000

Administrative expenses: \$0

Project Name: Interactive Journaling Curriculum and Training

Category: Training

Target Population: Homeless

Total Expenditures: \$4,925

Administrative expenses: \$0

Project Name: Peer Support and Recovery Specialist Training

Category: Training

Target Population: Statewide

Total Expenditures: \$42,748.03

Administrative Expenses: \$0



City of Sparks

Project Name: Mental Health Program For Sparks Police and Fire through Embgro consulting

Category: Harm Reduction & First Responders

Target Population: Statewide

Total expenditures: \$ 115,739.25

Administrative expenses (no more than 5%): \$0



City of Sparks Reported Outcomes

Project Name: Mental Health Program For Sparks Police and Fire through Embgro consulting-

Populations served

The Mental Health Program aims to provide services and training to the entire employee base for the City of Sparks Police and Fire. This includes sworn police officers, dispatch workers, records employees, victim advocates, M.O.S.T. clinicians, fire personnel, fire department staff. Employees not on the aforementioned list will also be considered in the services.

Scope of Work

1. Embedded Clinician (City/Department employee): Perform strictly confidential mental health evaluation and treatment services for Department employees (current and newly retired). Provide strictly confidential couple and family evaluation and treatment services for employees (current and newly retired).
2. Consultant: Provide regular guidance in mental health and resilience of department members through face-to-face interactions on department properties and at off-site settings (confidential counseling settings). Consultant is a national instructor for Peer Support and Critical Incident Stress Management through the International Critical Incident Stress Management Foundation (ICISF).
3. Consultant: Provide consistent and evolving trainings for all department members that focuses on individual and relational mental health.
4. Consultant: Train and certify (ICISF) embedded clinician in Critical Incident Stress Management. This includes Crisis Management Briefings, Incident Diffusing, and Critical Incident Stress Debriefing.
5. Consultant: Ensure compliance with mental health mandatory check-ups and service opportunities.
6. Consultant and Clinician: Coordination with Peer Support team for enhanced services.
7. Consultant and Clinician: Coordination with M.O.S.T. workers for optimal support of officers/employees.
8. Consultant and Clinician: Serve and facilitate Critical Incident Stress Management services: Crisis Management briefing (CMB), Diffusing, Critical Incident Stress Debriefing (CISD).



Washoe County

Category: Capacity Building and Infrastructure

Project name: Washoe Opioid Abatement and Recovery Fund

Target Population: NA

Total expenditures: \$147,785.09

Administrative expenses (no more than 5%): \$0

Category: Criminal Justice (Adults)

Project name: STAR Enhancement

Target Population Individuals involved or at-risk for being involved with the criminal justice or juvenile justice system

Total expenditures: \$ 103,094.52

Administrative expenses (no more than 5%): \$0

Project name: STAR FY26.1 July-Dec 2025

Target Population Individuals involved or at-risk for being involved with the criminal justice or juvenile justice system

Total expenditures: \$ 220466.25

Administrative expenses (no more than 5%):\$0

Project name: STAR House FY26

Target Population Individuals involved or at-risk for being involved with the criminal justice or juvenile justice system

Total expenditures: \$ 59699.64

Administrative expenses (no more than 5%):\$0

Project name: STAR FY25 – Closed

Target Population Individuals involved or at-risk for being involved with the criminal justice or juvenile justice system

Total expenditures: 351274.60

Administrative expenses (no more than 5%): \$0

Project name: STAR House FY25 – Closed

Target Population Individuals involved or at-risk for being involved with the criminal justice or juvenile justice system

Total expenditures: \$ 65,249.72

Administrative expenses (no more than 5%): \$0



Washoe County

Project name: Drug and Alcohol Testing

Target Population Persons and families involved in the criminal justice system, juvenile justice system, and child welfare system.

Total expenditures: \$0

Administrative expenses (no more than 5%): \$0

Project name: Justice and Mental Health Collaboration Program

Target Population Persons and families involved in the criminal justice system, juvenile justice system, and child welfare system.

Total expenditures: \$66,990.03

Administrative expenses (no more than 5%):\$0

Project name: Veterans Treatment Court Discretionary Grant Program

Target Population Veterans

Total expenditures: \$157,222.92

Administrative expenses (no more than 5%):\$0

Project name: OTS Felony DUI Court

Target Population Persons and families involved in the criminal justice system, juvenile justice system, and child welfare system.

Total expenditures: \$66,533.92

Administrative expenses (no more than 5%):\$0

Project name: SAMHSA Expansion and Enhancement of Adult Drug Courts

Target Population Persons and families involved in the criminal justice system, juvenile justice system, and child welfare system.

Total expenditures: \$54,709.50

Administrative expenses (no more than 5%):\$0



Washoe County

Project name: AOC Adult Drug Court

Target Population Persons and families involved in the criminal justice system, juvenile justice system, and child welfare system.

Total expenditures: \$453,137.27

Administrative expenses (no more than 5%):\$0

Project name: AOC Felony DUI Court

Target Population Persons and families involved in the criminal justice system, juvenile justice system, and child welfare system.

Total expenditures: \$44,737.49

Administrative expenses (no more than 5%):\$0

Project name: AOC Medication Assisted Treatment Court

Target Population Persons who are lesbian, gay, bisexual, transgender and questioning;

Total expenditures: \$161,020.50

Administrative expenses (no more than 5%):\$0

Project name: AOC Mental Health Court

Target Population Persons and families involved in the criminal justice system, juvenile justice system, and child welfare system.

Total expenditures: \$60,929.95

Administrative expenses (no more than 5%):\$0

Project name: AOC Prison ReEntry Court

Target Population Persons and families involved in the criminal justice system, juvenile justice system, and child welfare system.

Total expenditures: \$43,870.92

Administrative expenses (no more than 5%):\$0

Project name: AOC Veterans Court

Target Population Veterans

Total expenditures: \$51,718.32

Administrative expenses (no more than 5%):\$0



Clark



City of Henderson

Category: Campaign

Project Name: Fentanyl Awareness Social Media Advertising

Target Population: Youth

Expenditure: \$139,297.36

Category: Training

Project Name: Fentanyl Awareness Summit

Target Population: local, state and regional leaders in the ongoing fight against the opioid epidemic

Expenditure: \$81,402.24

Category: Research

Project Name: Efficiency Overview MOUD

Target Population: Persons and families involved in the criminal justice system, juvenile justice system, and child welfare system.

Expenditure: \$11,310.15



City of Henderson Reported Outcomes

Purdue Marion SOW

Snapchat

Paid Impressions: 1,881,332

Clicks: 17,996

2 Second Video Views: 90,009

Meta (Facebook & Instagram)

Reach: 79,765

Clicks: 5,378

Impressions: 1,284,286

Video plays: 50,397

Website

Site Sessions 23,492

Unique Visitors 16,769

Average Site Duration 3m 25s

TikTok

Clicks: 2,080

Impressions: 3,048,805

Growler

The SOW has been executed, and the project is actively in progress. Outcomes and measurable data will be reported once sufficient implementation milestones have been reached.



City of Las Vegas

Target Population:

- Individuals who are homeless
- Youth
- Veterans
- Persons who are lesbian, gay, bisexual, transgender and questioning
- Persons and families involved in the criminal justice system and child welfare system
- Other: Native Americans/Indigenous people, women impacted by domestic violence or trafficking

Total Expenditures: \$103,042.41

Administrative expenses (no more than 5%): \$6,926.93

Category: Harm reduction; criminal justice (adult); Treatment (adult)

Project name: Vegas Stronger MAT Program for Criminal Justice-involved Individuals

Target Population:

- Veterans
- Persons and families involved in the criminal justice system and child welfare system
- Individuals who are homeless

Total Expenditures: \$203,456.73

Administrative expenses (no more than 5%): \$9,688.42

Category: Harm reduction;

Project name: There is No Hero in Heroin Alternative Peer Group Drop-in Center

Target Population:

- Youth
- Persons who are lesbian, gay, bisexual, transgender and questioning
- Persons and families involved in the criminal justice system and child welfare system

Total Expenditures: \$173,510.34

Administrative expenses (no more than 5%): \$7,121.12



City of Las Vegas Reported Outcomes

Category: Harm reduction; Treatment (adult); Recovery Communities (SDOH)

Project name: Catholic Charities of Southern Nevada: Renewing Hope Program

Project Name: Renewing Hope Program

Outcomes: From July to September, with the support of CRF, CCSN enrolled 20 unique clients into the program with self-reported struggles with SUDs. Each individual received access to outpatient treatment resources, counseling support, housing and employment assistance, and workforce and life skills training as part of our standard program curriculum. As part of the program's benefit in the CCSN network, participants also had access to a fresh daily meal, clothing, hygiene kits, and the dignity of individualized support.

This past quarter, CCSN worked with one client who entered the CRF track of the RHP. At 56 years old, this participant had struggled for several years to find stability. He did not have any supportive documentation, such as identification or a birth certificate, that could help him find resources. He also shared a history of SUD. The RHP provided the structure and resources he needed to maintain sobriety and, in the process of looking for a job, crossed paths with CCSN's Housekeeping Manager, who shared that they were looking to hire for some vacant roles. The RHP's Residential Services Manager recommended the participant for the job and, with potential employment on the horizon, the client successfully graduated from the RHP and was able to be hired on as a new CCSN staff member. Since his graduation, the client has successfully obtained housing and continues his journey to long-term stability.

Category: Harm reduction; Treatment (adult); Recovery Communities (SDOH)

Project name: Las Vegas Rescue Mission Lighthouse Recovery Program

Project Name: Lighthouse Recovery Program

Outcomes: 56 clients completed intake for the recovery program. 26 of them entered into treatment and have increased sobriety. There have been 2 graduates from the program. They demonstrated at minimum 6 months of sobriety. One was on MAT treatment.

Category: Harm reduction; Recovery Communities (SDOH); Treatment (adult)

Project name: WestCare Nevada Transitional Living Program

Project Name: Transitional Living Program

Outcomes: 48 additional individuals served per year in the TLP program, 70% of clients with an OUD will have reduced substance use at discharge, 70% of clients with an OUD will have stable housing at discharge, 100% of clients enrolled in the program will complete a GPRA interview within 1 week of intake, At least 80% of individuals will complete a GPRA interview within 2 weeks of discharge.

Category: Harm Reduction

Project name: Toni's House Inc. – Resident Recovery, Street Team and Helpline Programs for Harm-Reduction

Project Name: Resident Recovery, Street Team and Helpline Programs for Harm-Reduction

Outcomes: There is evidence of increased awareness of Toni's House within the Nevada community, particularly among local community members and vulnerable populations attending events. Participants demonstrated interest in learning about available resources, harm reduction strategies, and long-term support options. Feedback suggests an enhanced

capacity among some attendees (e.g., harm reduction training participants) to support individuals at risk



City of North Las Vegas

Project Name: CNLV Crisis Response Team

Category: Data/First Responders/Harm Reduction/Prevention (Primary)

Target Population: Individuals involved or at-risk for being involved with the criminal justice or juvenile justice system

Total expenditures: \$382,761.54*

Admin Expense: \$0

*Expenditures for this project come for the Fund for a Resilient Nevada. City of North Las Vegas reports they have not spent any One Nevada dollars and plan to use money to replace grant dollars that are ending.



Clark County

Project Name: Medication-Assisted Treatment (MAT) Program

Category: Criminal Justice (Adult)

Target Population: Individuals involved or at-risk for being involved with the criminal justice or juvenile justice system

Total expenditures: \$2,659,267.64

Administrative expenses (no more than 5%): \$0

Project name: Community Opioid Treatment Center Las Vegas Blvd & Sloan RP.B0123067

Category: Capital Projects

Target Population: Anyone, 18 years of age or older, in need of immediate or long-term addiction recovery, this includes many of the populations listed in Question 11.

Total expenditures: \$405,450.40

Administrative expenses (no more than 5%): \$0

Project name: Community Opioid Treatment Center Buffalo RP.C0924114

Category: Capacity Building; Infrastructure Development; Treatment (Adult)

Target Population: Parents of dependent children; Transitional aged youth populations (TAY); Individuals involved or at-risk for being involved with the criminal justice or juvenile justice system; Individuals who are homeless

Total expenditures: \$1,080,856.95

Administrative expenses (no more than 5%): \$0



Clark County Reported Outcomes

Project Name: Medication-Assisted Treatment (MAT) Program

In 2025, a total of 86 participants had been engaged in treatment with an outside agency prior to enrolling in the jail based program. Within the Clark County Detention Center (CCDC), 966 individuals-initiated treatment services. Upon release, 193 participants continued their treatment with CCDC's partner, Vegas Stronger. An additional 285 individuals were transferred to other correctional institutions—including the Nevada Department of Corrections, the City of Las Vegas Jail, and the Henderson Jail—where comparable treatment programs are available to support continuity of care.

Another 128 participants independently sought services from community based treatment programs offering expanded support such as mental health care and housing resources. These programs included Shine a Light, Crossroads, Desert Hope, and Foundation for Recovery, among others

Project name: Community Opioid Treatment Center Las Vegas Blvd & Sloan RP.B0123067

N/A- This project is in the development stage.

Project name: Community Opioid Treatment Center Buffalo RP.C0924114

This facility has not opened yet, when it does, we intend to track the following data:

1. Demographic Information
2. Substance Use History
3. Mental Health Conditions
4. Length of Stay
5. Service Summary
6. Client Satisfaction
7. Recidivism



Dashboard

- [FRN Dashboard](#)
 - Total Opioid Recoveries
 - Statewide Plan Goals and Funded project/awards



Questions?



Contact Information

- <https://www.dhs.nv.gov/Programs/frn/>

Dawn Yohey, MFT, LCADC

Clinical Program Planner 3

d.yohey@dhs.nv.gov



Acronyms

DHS- Department of Human Services

FRN- Fund of a Resilient Nevada

OUD- Opioid Use Disorder

MOUD- Medication for Opioid Use
Disorder

UNLV- University of Nevada, Las
Vegas

5. Presentation on State Budgeting Process

(Information and Discussion)

Christina Hadwick, Deputy Director, Fiscal Services, Nevada Department of Human Services

Joe Lombardo
Governor



Laura Rich
Director

Presentation to SURG Fund for a Healthy Nevada

DHS Director's Office

Christina Hadwick, Deputy Director, Fiscal Services

April 8, 2026



Department of Human Services

Helping people. It's who we are and what we do.

Introduction

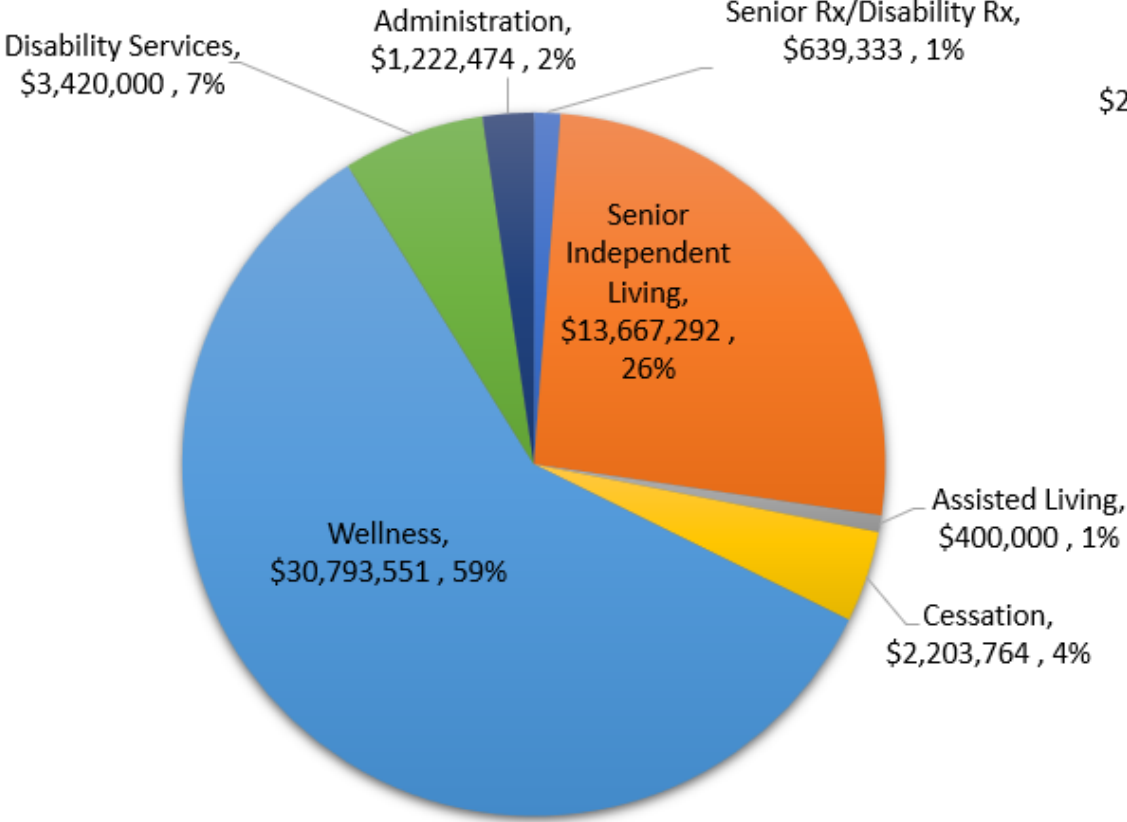
- Fund for a Healthy Nevada (FHN) supports programs that improve residents' health and well-being.
- Statutory Authority: NRS 439.620 – 439.630
- Revenue is generated by Nevada's share of the Tobacco Master Settlement Agreement (MSA).
- 60% of those tobacco settlement funds are directed into the FHN.
- Revenue has declined each year, leading to reductions in funded programs.
- Administrative expenses are capped at 2% (State Treasurer's Office) and 5% (Department of Human Services)

Funding Recommendations

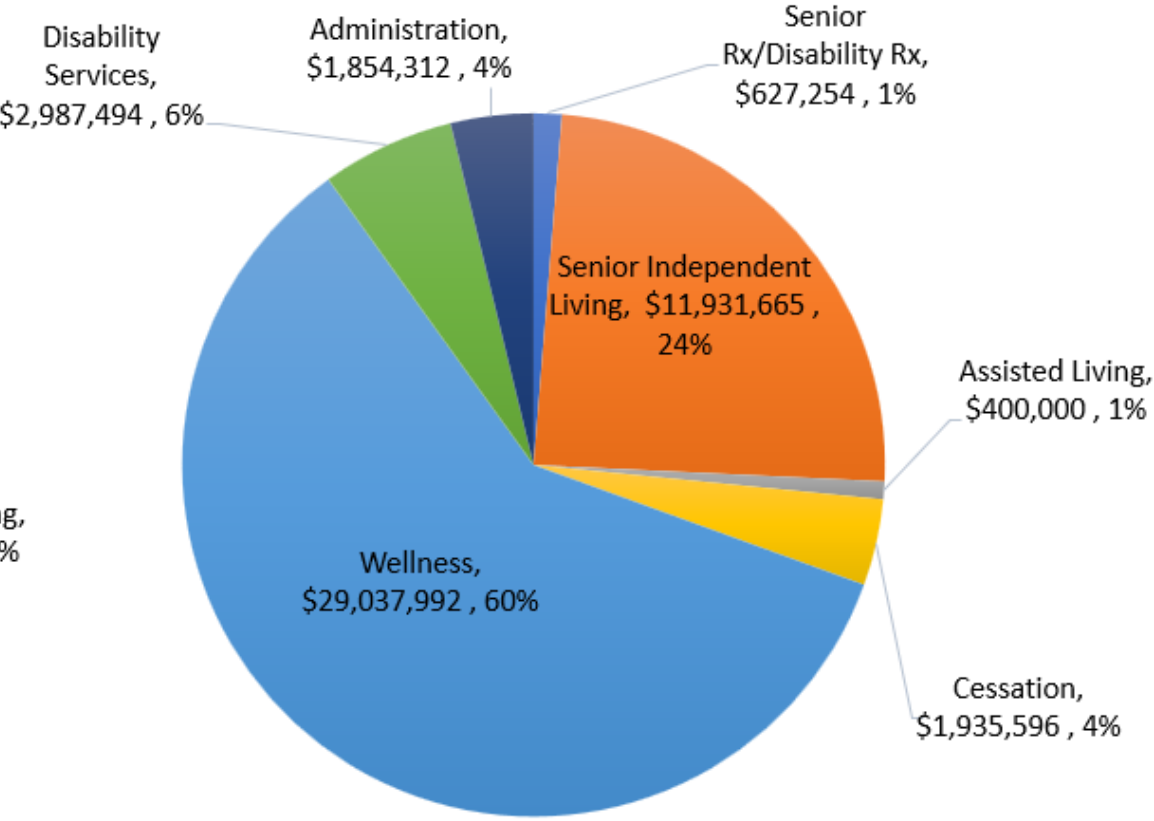
- Nevada conducts a statewide community needs assessment every two years.
- These assessments identify the most urgent health issues across the state.
- Funding decisions are then guided by those findings and overseen by advisory groups like the Grants Management Advisory Committee (GMAC).

Funded Programs

Legislatively Approved 2024-25 Biennium



Legislatively Approved 2026-27 Biennium



Funded Programs

Use Category	2024-25 Biennium	2026-27 Biennium	Change
Senior Rx	\$ 639,333	\$ 627,254	\$ (12,079)
Senior Independent Living	\$ 13,667,292	\$ 11,931,665	\$ (1,735,627)
Assisted Living	\$ 400,000	\$ 400,000	\$ -
Cessation	\$ 2,203,764	\$ 1,935,596	\$ (268,168)
Wellness			
Office of Minority Health-Minority Health Coalition	\$ 642,547	\$ 899,349	\$ 256,802
Federally Qualified Health Center Incubator Project	\$ 1,400,000	\$ 1,222,952	\$ (177,048)
Suicide Prevention	\$ 851,166	\$ 735,553	\$ (115,613)
Hunger	\$ 4,331,263	\$ 4,045,592	\$ (285,671)
SafeVoice Program	\$ 1,218,692	\$ 1,591,297	\$ 372,605
Immunization	\$ 300,000	\$ -	\$ (300,000)
2-1-1 Support	\$ 1,704,488	\$ 1,497,556	\$ (206,932)
Wellness for Family Services	\$ 2,000,000	\$ 1,638,926	\$ (361,074)
Differential Response	\$ 2,585,733	\$ 2,358,549	\$ (227,184)
Family Resource Centers	\$ 3,410,000	\$ 2,978,760	\$ (431,240)
Consumer Health Assistance	\$ 398,759	\$ 468,934	\$ 70,175
Public Health Districts	\$ 2,000,000	\$ 1,747,074	\$ (252,926)
So NV MOST Program	\$ 2,361,944	\$ 2,361,944	\$ -
No NV MOST Program	\$ 1,154,772	\$ 1,154,772	\$ -
Public Health Preparedness	\$ 439,205	\$ 513,370	\$ 74,165
No NV Mobile Crisis Unit	\$ 1,437,080	\$ 1,437,080	\$ -
So NV Mobile Crisis Unit	\$ 3,168,756	\$ 3,172,814	\$ 4,058
Rural NV Mobile Crisis Unit	\$ 1,389,146	\$ 1,213,470	\$ (175,676)

Funded Programs (Continued)

Use Category	2024-25 Biennium	2026-27 Biennium	Change
Disability Services			
Respite	\$ 1,280,000	\$ 1,118,127	\$ (161,873)
Positive Behavior Support	\$ 640,000	\$ 559,063	\$ (80,937)
Independent Living Grants	\$ 1,100,000	\$ 960,890	\$ (139,110)
Family Preservation	\$ 400,000	\$ 349,414	\$ (50,586)
Aging & Disability Services Administration	\$ 531,368	\$ 476,457	\$ (54,911)
Director's Office Administration	\$ 525,422	\$ 1,121,508	\$ 596,086
Treasurer's Office Administration	\$ 165,684	\$ 256,347	\$ 90,663
TOTAL	\$ 52,346,414	\$ 48,774,313	\$ (3,572,101)

Questions?

Contact Information

Christina Hadwick

Deputy Director, Fiscal Services

christinahadwick@dhs.nv.gov

775-431-9956

DHS.nv.gov

[Fund for a Healthy Nevada Website](#)

6. Presentation on Peer Certification

(Information and Discussion)

Anne-Elizabeth Northan, MPA, Program Director, Center for the Application of Substance Abuse Technologies (CASAT)

PRESENTATION TO THE SURG

Substance Use Response Group (SURG)

Anne-Elizabeth Northan, MPA, CPS

Project Director

Nevada Certification Board

Disclosures

- *The Nevada Certification Board is an independent 501(c)3 nonprofit entity, managed by CASAT in the School of Public Health at the University of Nevada Reno.*

Introduction

The Nevada Certification Board provides community and behavioral health professionals with certification, continuing education resources, and advocacy that validate their competencies to provide ethical, person-focused, and evidence-based services to meet the needs of vulnerable individuals in Nevada.

Certifications:

- *Community Health Workers (CHW)*
- *Doulas*
- *Peer Recovery Support Specialists (PRSS)*
- *Peer Recovery Support Specialist Supervisors (PRSS-S)*
- *Prevention Specialists (C-PS)*
- *NEW Family Peer Support Specialist (FPSS)*

Endorsements:

- *PRSS Problem Gambling*
- *PRSS Trauma Informed Care*
- *CHW Early Childhood Endorsement*

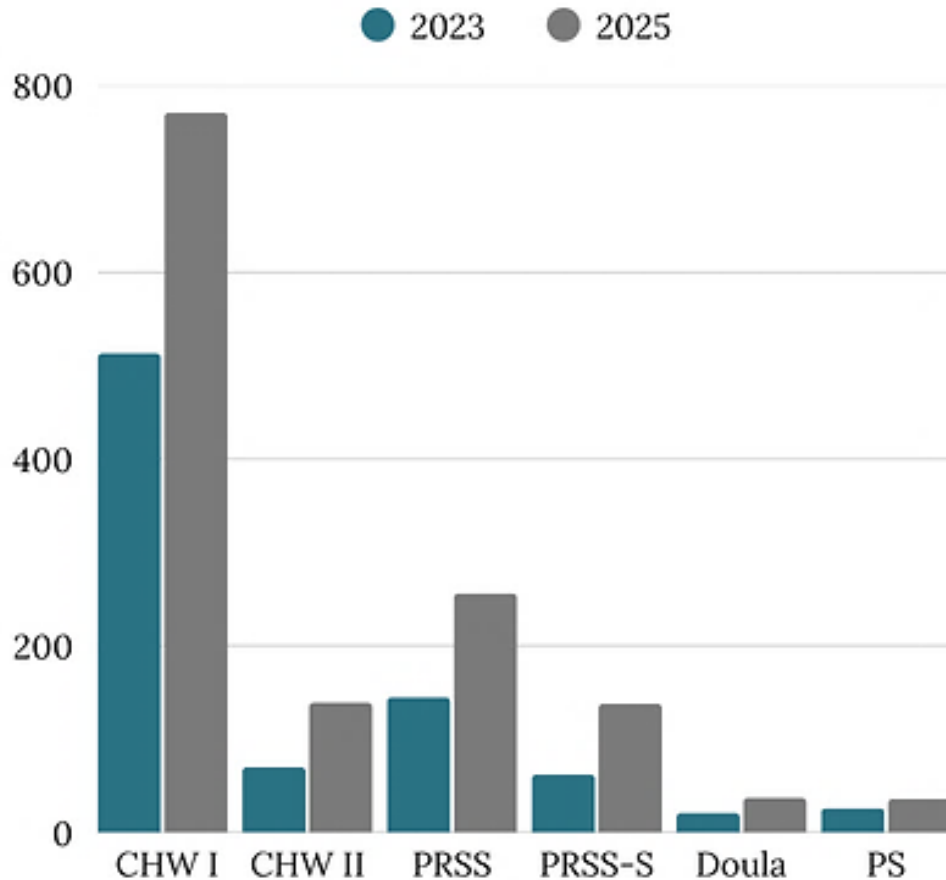
National Affiliation

- *Nationally Standardized Certification Practices*
 - *International Credentialling and Reciprocity Consortium*
 - *Prevention Specialists*
 - *Peer Recovery Support Specialists*
- *National CHW Association*
 - *CHW- C3 Competencies*
- *National Federation of Families*
 - *NEW Family Peer Support Specialist and Supervisor*
- *NCB authority as a certifying body is derived from NRS, historical/institutional context, and membership with national and international credentialing bodies*
- *Workforce Development and Medicaid Reimbursement*

Special Populations

- *Nevada Certification Board's mission is to support vulnerable populations across Nevada, and we do this by building an embedded community workforce.*
 - *Community Health Workers*
 - *Doulas*
 - *Peer Recovery Support Specialists*
 - *Prevention Specialists*

Growth Highlights



- CHW II Certification: 99% increase (nearly doubled from 70 to 139)
- PRSS Supervisor: 123% increase (more than doubled from 62 to 138)
- CHW I Certification: 50% increase but highest volume (258 new certifications)

What's Working Well / Evidence Based Practice

- *Collaboration with Training Providers, State Entities, Stakeholders, Employers and Providers*
- *Aligning Certification Standard with National Standards and consistently reviewing evidence of best practice to be responsive and timely*
- *Employer and funder engagement with credentialed professionals*
- *Movement toward Specialization for Community Health Workers*
- *Ethical Violation policies and procedures that protect public safety*
- *Consistent workforce growth and support*

Gaps

- *National Credentialing Model for CHWs*
 - *IC&RC is beginning to engage in conversations around certifying which would continue to elevate the profession and ensure that the Nevada Certification Board, as the IC&RC Member Board, continues to serve this field with evidence-based best practice credentialing.*
- *National Credentialing Model for Doulas*
 - *There are several national foundational trainings for Doulas and in collaboration with the Doula field, NCB has maintained best-practices for this emerging professional credential. We consistently review research and work with Doulas to implement best-practice credentialing for our state.*
- *Employer Education*

Recommendation(s)

- *Ensure Nevada Certification Board as an independent nonprofit continues to have the necessary authority and resourcing as the credentialing body for community-based professionals in Nevada. This continuity will further uplift and enhance certified professions under our purview, respond to community need, and protect public safety.*
- *Peer workforce requirements to bill for Medicaid includes prior convictions restrictions. We recommend review, and based on findings, potentially more specific requirements relating to type of conviction, recovery length, and other determining factors.*
- *Prevention Specialists were added to NRS 433 last session, and we recommend that additional language be added in NRS and/or NAC defining their role and supervision requirements specifically that a Prevention Specialist or Certified Prevention Coalition provide supervision.*
- *Pay parity across community-based certifications.*
- *Continue to enhance Doula profession through credentialing opportunities.*

References

- *IC&RC* <https://internationalcredentialing.org/>
- *NACHW – National Association of Community Health Workers* <https://nachw.org/>
- *National Family Voice, Children’s Mental Health, Family Peer Support*
www.ffcmh.org/
- *Nevada Certification Board* <https://nevadacertboard.org/>

Contact Information

Name	Anne-Elizabeth Northan, MPA, C-PS
Title	Project Director
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Email	anorthan@casat.org

7. Review and Discuss Preliminary Recommendations from Subcommittees

(Information and Discussion)

Jessica Johnson, Chair, Prevention and Harm Reduction

Steve Shell, Chair, Treatment and Recovery

Terry Kerns, Chair, Response

Compiled Subcommittee Recommendations

Note that the following slides include all recommendations currently being presented to the full SURG for inclusion in the next Annual Report. For additional information on recommendations, please review the compiled subcommittee recommendations handout.

The handout also includes information on recommendations that are being reviewed and workshopped, but that are not being proposed for inclusion in the next Annual Report. The following slides include only those recommendations being considered for inclusion in the 2025 Annual Report.

Prevention and Harm Reduction Subcommittee Recommendation #1

Submitted by: Jessica Johnson on April 29, 2025.

Description: Request guidance from the Nevada Board of Pharmacy be posted to their website and communicated to pharmacists to clarify regulations pertinent to the distribution of naloxone in hospitals to permit low barrier naloxone distribution from Emergency Departments (EDs) and permit EDs to adopt a naloxone-specific standard operating procedure (SOP) for public naloxone distribution, separate from and exempt from the regulatory framework surrounding hospital formulary medications used in patient care.

Please refer to the compiled subcommittee recommendations handout for more information.

Prevention and Harm Reduction

Subcommittee Recommendation #2

Submitted by: Prior Subcommittee member Debi Nadler (in 2024, re-elevated for 2025-2026, last edited March 18, 2026), sponsored by Jessica Johnson.

Description: Create a bill draft request to set aside cannabis wholesale tax 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.

Please refer to the compiled subcommittee recommendations handout for more information.

Treatment and Recovery Subcommittee Recommendation #1

Submitted by: Prior Subcommittee member Chelsi Cheatom on August 20, 2025; co-sponsored by Subcommittee member Stephanie Cook on November 18, 2025.

Description: A retrospective assessment or/and prospective study would be conducted to assess the outcomes of all patients following discharge from certified withdrawal management facilities within five years of discharge, including trends in the patterns of step down and use of MOUD, to examine potential contributors to overdose and develop best practices for continued care after treatment.

Please refer to the compiled subcommittee recommendations handout for more information.

Treatment and Recovery Subcommittee Recommendation #2

Submitted by: Combination of recommendations from Steve Shell (submitted on June 17, 2025) and Jose Maria Partida Corona, MD, FASAM (submitted on March 23, 2026).

Description: Recommend to the Nevada Department of Human Services that they incentivize the implementation of cohesive addiction consult services.

Hospitals would receive Department funds to hire peer recovery specialists, if they meet the following specific criteria: adoption of delineation of privileges for addiction medicine as a medical specialty, as well as established protocols for the inclusion of midlevel providers and peer recovery navigators.

Please refer to the compiled subcommittee recommendations handout for more information.

Treatment and Recovery Subcommittee Recommendation #3

Submitted by: Prior Subcommittee member Chelsi Cheatom in 2025. Guisepppe Mandel appointed as lead for this recommendation on March 24, 2026.

Description: Recommend that state funding be increased for Contingency Management to be used to support people in recovery through rewards for reaching their recovery goals.

Please refer to the compiled subcommittee recommendations handout for more information.

Treatment and Recovery Subcommittee Recommendation #4

Submitted by: Jose Maria Partida Corona, MD, FASAM on March 23, 2026.

Description: Elimination of prior authorizations needed for starting medication assisted therapy with buprenorphine and buprenorphine products of all types for opioid use disorder. This would apply to all payors including Medicaid MCOs.

Please refer to the compiled subcommittee recommendations handout for more information.

Treatment and Recovery Subcommittee Recommendation #5

Submitted by: Jose Maria Partida Corona, MD, FASAM on March 23, 2026.

Description: Recommend that insurers and payors not impose dosage limitations for buprenorphine when used for MOUD.

Please refer to the compiled subcommittee recommendations handout for more information.

Response Subcommittee Recommendation #1

Submitted by: Shayla Holmes on May 14, 2025, revised on February 20, 2026.

Description: Recommend that mitragynine, 7-hydroxymitragynine, and mitragynine pseudoindoxyl including: any isomer, ester, ether, salt, or salt of an isomer; any synthetic, semi-synthetic, or chemically modified derivative; and any compound containing mitragynine, 7-hydroxymitragynine, or mytragynine pseudoindoxyl as an active pharmacological ingredient, regardless of whether the substance is naturally derived, synthetically produced, or manufactured through chemical modification be added to the Schedule 1 of NAC 453.510.

Please refer to the compiled subcommittee recommendations handout for more information.

Response Subcommittee Recommendation #2

Submitted by: Shayla Holmes on May 14, 2025, revised on February 20, 2026.

Description: Prohibit the sale of phenibut (β -phenyl- γ -aminobutyric acid), including: any isomer, ester, ether, salt, or salt of an isomer of phenibut; any synthetic, semi-synthetic, or structurally modified derivative; and any compound that acts as a GABA-B receptor agonist or functional equivalent with similar depressant or psychoactive effects to individuals under 21 years of age, aligning with existing cannabis regulations and mandate that all products containing phenibut or its derivatives have standardized labeling, including clear warnings about potential health risks and age restrictions.

Restrict Sales Locations: Limit the sale of these substances to licensed establishments that can verify the age of purchasers and prohibit sales near schools and other youth-centered facilities.

Enhance Enforcement Mechanisms: Provide regulatory agencies with authority and resources to monitor compliance, conduct inspections, and enforce penalties for violations.

Please refer to the compiled subcommittee recommendations handout for more information.

Response Subcommittee Recommendation #3

Submitted by: Shayla Holmes on May 14, 2025, revised on February 20, 2026.

Description: Prohibit the sale of amanita muscaria and its psychoactive constituents, including: muscimol, ibotenic acid, and any isomer, ester, ether, salt, or salt of an isomer thereof; any synthetic, semi-synthetic, or chemically modified derivative of muscimol or ibotenic acid; and any compound that produces hallucinogenic, dissociative, or neuroactive effects substantially similar to those substances to individuals under 21 years of age, aligning with existing cannabis regulations and mandate that all products containing such psychoactive constituents have standardized labeling, including clear warnings about potential health risks and age restrictions.

Restrict Sales Locations: Limit the sale of these substances to licensed establishments that can verify the age of purchasers and prohibit sales near schools and other youth-centered facilities.

Enhance Enforcement Mechanisms: Provide regulatory agencies with authority and resources to monitor compliance, conduct inspections, and enforce penalties for violations.

Please refer to the compiled subcommittee recommendations handout for more information.

Response Subcommittee Recommendation #4

Submitted by: Terry Kerns on May 16, 2025, updated on August 5, 2025.

Description: Recommend state agencies under the legislative, judicial, and executive branches involved with deflection and diversion programs have a comprehensive definition of recidivism and desistance, and standardized policies related to measuring and reporting recidivism. Additionally, require that all publicly funded or publicly administered reentry programs define success using clear, behavior-based outcomes and that programs articulate what meaningful behavior change looks like for participants using tools for measuring engagement, goal attainment, and behavioral milestones.

Please refer to the compiled subcommittee recommendations handout for more information.

Response Subcommittee Recommendation #5

Submitted by: Terry Kerns on February 18, 2026, revised on February 3, 2026, March 12, 2026, and April 8, 2026.

Description: Work with prevention coalitions to make available Detera Bags for safe disposal of opioid prescriptions and to provide education to community members. Work with the Board of Pharmacy to distribute a one-page document with information about opioid overdoses, disposal, and available addiction assistance.

Please refer to the compiled subcommittee recommendations handout for more information.

Response Subcommittee Recommendation #5

Submitted by: Terry Kerns on February 18, 2026, revised on February 3, 2026, March 12, 2026, and April 8, 2026.

April 8, 2026 Revision: Work with prevention coalitions to make available mechanisms for safe disposal of opioid prescriptions (i.e., Detera Bags) and to provide education to community members (i.e., youth and senior groups). Prevention coalitions will also provide a one-page document with information about opioid overdoses, disposal, and available addiction assistance to be provided with opioid prescriptions. Board of Pharmacy will provide education via their website and work with the Nevada Opioid Center of Excellence for a continued education course.

Please refer to the compiled subcommittee recommendations handout for more information.

8. Discuss Process for Ranking Recommendations

(For Possible Action)

Terry Kerns, Ph.D.

Process for Ranking Recommendations

- In 2022, the SURG used a weighted ranking process in which subcommittee members were asked to independently rank their top five priorities among the recommendations put forward within their subcommittee with 1 being the highest and 5 being the lowest. Final recommendations were included in the report but not listed in priority order.
- Members then requested that recommendations be ranked by the full SURG, with rankings included in the 2023 report to reflect the relative importance of different recommendations. SEI polled members within a full SURG meeting for preliminary ranking of recommendations. Each member ranked their top five recommendations through a live survey link with weighted scores aggregated to generate the top 20 recommendations for the SURG overall.
- For the 2024 report, input was provided by all subcommittees and the full SURG voted to have recommendations ranked by each subcommittee. Each subcommittee's suggested ranking was then moved forward to the SURG for a final vote.
- The current subcommittee Chairs met in March and would suggest moving forward with the ranking by subcommittee as was done in 2024.

9. Review and Consider Items for Next Meeting

(Information and Discussion)

Terry Kerns, Ph.D.

Full SURG Meeting Topics and Timeline

June 2026

- Review Final, Ranked Recommendations
- Approve 2025-26 Annual Report Template

July 2026

- Approve 2025-26 Annual Report

October 2026

- Presentations from Subject Matter Experts: Crisis Stabilization Centers and Morbidity and Mortality Rates

10. Public Comment

(Information Only)

Public Comment

- Public comment shall be limited to three (3) minutes per person. We will begin with comments from Las Vegas and then invite comments from Carson City, followed by virtual participants.
- 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 241.021.

In Person

- Please form a line.
- Before commenting, please state your full name for the record.

Public Comment

Attending Virtually

If you are dialing in from a telephone:

- Dial 669-444-9171
- When prompted enter the Webinar ID: 874 4950 7943
- Then enter the Meeting Passcode: 168375
- Please press *6 so the host can prompt you to unmute.

If you are joining virtually with computer audio, please use the “raise hand” feature to indicate you would like to provide public comment so the host can prompt you to unmute.

Before commenting, please state your full name for the record.

Members of the public are requested to refrain from commenting outside the designated public comment periods, unless specifically called upon by the Chair.

Please do not use the chat for items other than technical support, as this becomes part of the public record.

*Comments can also be emailed to kdocena@socialent.com. These comments and questions will be recorded in meeting minutes.

11. Adjournment

Attorney General Ford

Additional Information, Resources & Updates Available At:
[https://ag.nv.gov/About/Administration/SURG Info Page/](https://ag.nv.gov/About/Administration/SURG_Info_Page/)



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