



## OFFICE OF THE ATTORNEY GENERAL

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# RESPONSE SUBCOMMITTEE

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Substance Use Response Group (SURG)

July 17, 2023

9:00 am

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

Chair Kerns

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

<b>Member</b>	<b>SURG Role</b>	<b>Committee Role</b>
<b>Christine Payson</b>	Sheriffs' & Chiefs' Assoc.	Member
<b>Dr. Stephanie Woodard</b>	DHHS Director Appointee	Member
<b>Dr. Terry Kerns</b>	Attorney General Appointee	Chair
<b>Shayla Holmes</b>	Rural Human Services (Lyon County)	Vice Chair
<b>Gina Flores-O'Toole</b>	SUD Treatment Provider	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 719-359-4580
  - When prompted enter the Meeting ID: 893 2252 8591
  - Please press \*9 so the host can prompt you to unmute.

**3. REVIEW AND APPROVE MAY  
22, 2023 RESPONSE  
SUBCOMMITTEE MEETING  
MINUTES**

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Chair Kerns

# **4. PRESENTATION ON EMERGENCY DEPARTMENT PEER SUPPORT PROGRAM**

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Lavatta Palm, University Medical Center-Emergency Department  
Embedded Peer Program Manager, Trac-B Exchange

# Disclosures

- The information contained in the following slides are strictly the views of the presenter.
- Actual data on slide six obtained from UMC peer program as of June 2023.



# Introduction

- Peer Recovery Support is an Evidence Based Practice in which persons with lived experience in recovery from substance use, mental health, and cooccurring disorders can empower and engage others with mutual respect, empathy, and understanding while inspiring the hope of Recovery.

# Issues

- Our goal is to reduce the number of opioid and stimulant using patients admitted to Emergency Department at UMC.

# Special Populations

We serve

- Veterans, elderly persons, and youth;
- Pregnant women and postpartum women;
- Lesbian, gay, bisexual, transgender, and questioning persons;
- People who inject drugs;
- Other populations disproportionately impacted by substance use disorders.

# What's Working Well / Evidence Based Practice

UMC October 2022 to June 2023

Referrals:	194
Detox:	121
Other resources MAT, 12 Step:	108
Warm Handoff:	112

# Gaps

Opioids are synthetic or natural drugs that have certain unique effects on the brain and body. Opioids relieve pain and give a people a sense of well-being or euphoria by changing the body and brain chemistry. The first change many people notice is tolerance, or the need for more of a drug to get the desired effect, which makes it difficult for people to stop using them.

# Recommendation(s)

- None

# References

- <https://www.samhsa.gov/brss-tacs/recovery-support-tools/peers>
- [Peer Support in the ED Setting \(wisc.edu\)](#)

# Contact Information

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# **5. PRESENTATION FROM BOARD OF PHARMACY**

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Darla Zarley, Pharm.D., Grant and Project Analyst, Nevada State Board of Pharmacy

# Update on Nevada Laws (part 1)

- Effective October 1, 2015
- Senate Bill 459 – 2015 Legislative Session (NRS 453C.120)
  - Good Samaritan Drug Overdose Act
  - The law:
    - Prevents punitive actions against health professionals and any person who administers naloxone or calls 911 to assist someone who may be overdosing on opiates.
    - Provides immunity to persons seeking medical treatment for an opioid overdose for themselves or someone else.
    - Allows greater access to naloxone, an opioid overdose reversal drug. Naloxone is available at area pharmacies and can be obtained without a prescription.
- Coming soon - NARCAN® Nasal Spray has recently been approved as an over-the-counter treatment
  - FDA approved on March 29, 2023.

# Update on Nevada Laws (part 2)

- Effective December 29, 2022
- Regulation authorizing a practitioner to dispense a controlled substance for the treatment of opioid use disorder (UOD) without a Dispensing Registration
- Restricted to a hospital or independent center for emergency medical care
- Practitioner must have an active NV Controlled Substance registration issued by the Board of Pharmacy
- Practitioner must have an active NV DEA registration
- Comply with labeling and recordkeeping requirements
- Report dispensation to the NV PMP

# Update on Nevada Laws (part 3)

- Effective January 1, 2024, and upon passage of any regulations
- Assembly Bill 156 (2023 Legislative Session)
- Allows a pharmacist to:
  - Assess a patient to determine whether the patient has an opioid use disorder and whether medication-assisted treatment (MAT) would be appropriate for the patient and;
  - Prescribe and dispense a drug for medication-assisted treatment;
  - Counsel and provide information to the patient on OUD treatment options including MAT.
- Board of Pharmacy shall adopt regulations regarding the registration process and actions authorized by the pharmacist

# Removal of DATA Waiver Requirement for Opioid Use Disorder Prescriptions

- On December 29, 2022, Congress signed into law the Consolidated Appropriations Act of 2023 (the Act), which eliminated the “DATA-Waiver Program.”
- The Act removes the federal requirement for practitioners to obtain a Data-Waiver (X-waiver) to prescribe medications such as buprenorphine, a Schedule III controlled substance, for the treatment of opioid use disorder (OUD).
- On January 12, 2023, the Drug Enforcement Administration (DEA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) announced the immediate elimination of the X-Waiver for prescribing buprenorphine.
- The elimination of the X-waiver will increase the number of practitioners eligible to prescribe buprenorphine thereby increasing access to buprenorphine for those in need.

# Removal of DATA Waiver Requirement for Opioid Use Disorder Prescriptions Cont.

All DEA registrants should be aware of the following:

- A DATA-Waiver registration is no longer required to treat patients with buprenorphine for opioid use disorder.
- All prescriptions for buprenorphine only require a standard DEA registration number. The previously used DATA-Waiver registration numbers are no longer needed for any prescription.
- There are no longer any limits or patient caps on the number of patients a prescriber may treat for opioid use disorder with buprenorphine.
- A new eight-hour training will be required as of June 21, 2023, for all prescribers when they apply for or renew their DEA registration to prescribe controlled substances. The training will include identifying and treating addiction.
- The Act does not impact existing state laws or regulations that may be applicable to prescribing controlled substances.

# References

- [FDA Approves First Over-the-Counter Naloxone Nasal Spray | FDA](#)
- <https://www.deadiversion.usdoj.gov/pubs/docs/A-23-0020-Dear-Registrant-Letter-Signed.pdf>
- <https://www.congress.gov/117/bills/hr2067/BILLS-117hr2067ih.pdf>

# Board of Pharmacy Contact Information

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# **6. RESPONSE RECOMMENDATIONS REVIEW AND DISCUSSION**

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Chair Kerns

# Summary of Response Subcommittee Recommendations Under Review (Part 1)

1. Resolve the conflict between the Good Samaritan Law and the Drug Induced Homicide Law.
2. Revise NRS 453c.150 to include language similar to the State of Delaware: "Defendant made a good faith effort to promptly seek, provide, or obtain emergency medical or law enforcement assistance to another person who was experiencing a medical emergency after using a Schedule I or II controlled substance..." or Rhode Island, "An eligible person will not be charged or prosecuted for the offense of controlled substance delivery resulting in death if a person, in good faith, without malice and in the absence of evidence of an intent to defraud, sought medical assistance for someone experiencing a controlled substance overdose..."

# Summary of Response Subcommittee Recommendations Under Review (Part 2)

3. SUD/MH/MOUD assessment, treatment, recovery support, pre-release case management availability in incarcerated settings, implementation challenges and opportunities, and the 1115 waiver for Medicaid coverage 90 days pre-release.
4. Wastewater-based epidemiology (WBE) for monitoring public health trends.

# **7. CONSIDER SUBJECT MATTER EXPERTS AND TOPICS FOR FUTURE MEETINGS**

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Vice Chair Holmes

# **8. PUBLIC COMMENT**

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# **9. 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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