

SURG Related Bills Status 6.10.25

Bill #	Summary	Digest Excerpts	Relevance to SURG	Status
AB6	Establishes the Fetal Alcohol Spectrum Disorder Treatment Assistance Program within the Aging and Disability Services Division of the Department of Health and Human Services. (BDR 38-287)	This bill establishes the FASD Treatment Assistance Program, which is to be administered by the Autism Treatment Assistance Program, to provide and coordinate the provision of services to the extent that money is available.	2023 and 2024 recommendations include tracking data for alcohol use and outlet density. Medicaid reported to SURG on implementation of a Health Home for individuals with FASD.	Governor App'd 6/5/25 Effective upon passage
AB19	Revises provisions relating to the Statewide Substance Use Response Working Group. (BDR 40-442)	This bill adds to the membership of the Working Group.	Expands SURG membership to include representatives: general public, emergency response, DCFS, NV DA Association, specify DPBH for DHHS designee, and a preference for a bilingual representative. Changes annual reporting to August 1st, effective 7/1/26.	Governor App'd 6/3/25 Secs 1 & 2 effective 10/1/25; Sec 1.5 effective 7/1/26
AB31	Provides for certain Medicaid reimbursement of providers of nonemergency secure behavioral health transport services. (BDR 38-368)	Medicaid arequirement that providers of nonemergency secure behavioral health transport services that are covered by Medicaid be reimbursed for certain distances traveled while going to pick up or returning from dropping off a patient.	2023 recommendations include leveraging of existing programs and funding to develop outreach response providers, including for anyone released from insitutionanal and community settings, and the build out of Nevada's Crisis Response System.	No Further Action 6/3/25
AB60	Revises provisions relating to certain behavioral health services. (BDR 39-434)	Requiring the certification of a natural person who holds himself or herself out as a certified prevention specialist; prohibiting a minor from providing or supervising the provision of peer recovery support services in most circumstances; authorizing certain minors to serve as peer recovery support specialist interns.	2024 recommendations include amendments to NRS pertaining to hiring and regulation of peer recovery support specialists, and incorporation of PRSS into treatment models for emergency departments. 2023 recommendations include expanded investment in PRSS; DPBH supports PRSS through SOR grants and seeks to expand that support. DPBH also works with EMPOWERED to incorporate more PRSS. Medicaid added PRSS as a specific enrollment specialty. (Amendment removes provisions allowing minor to use title of "PRSS Intern")	Governor App'd 6/3/25 Multiple Effective dates
AB340	Requires health insurance to cover certain screenings, assessments and diagnoses. (BDR 57-351)	Requiring certain health insurance to include coverage for the screening, assessment and diagnosis of attention deficit hyperactivity disorder, fetal alcohol spectrum disorders, intellectual disabilities and specific learning disabilities for certain persons	2023 recommendations included expanded Medicaid billing for preventive services for youth and adults. Early screening of behavioral health concerns is being initiated as part of the Children's Behavioral Health Transformatoin under DHCFP.	No Further Action 6/3/25

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AB378	Creates the Alternative Therapy Pilot Program. (BDR 40-820)	Section 9 requires the DPBH to administer the Program and, within the limits of available funds, develop and implement experimental and investigational pilot programs for the provision of alternative therapies. Section 7 of this bill defines “psychedelic substance” to mean psilocybin, psilocin, dimethyltryptamine, ibogaine or mescaline.	Members of the SURG have expressed interest in alternative therapies including "psychedelic substances."	No Further Action 6/3/25
AB380	Revises provisions relating to mobile crisis teams. (BDR 39-1062)	This bill also revises the composition of a mobile crisis team to require that any mobile crisis team established by or with the support of the Division consist of: (1) one or more persons who are professionally qualified in the field of behavioral health; and (2) one or more law enforcement officers, providers of emergency medical services or persons with appropriate expertise in the field of behavioral health, such as a community health worker, a provider of case management services, a provider of peer recovery support services or a similar paraprofessional.	2023 recommendation to expand access to MAT and recovery support. DPBH working to expand MOUD services including the possibility of mobile units, or medication sites, with expanded access through telehealth.	Governor App'd 5/30/25 Effective 10/1/25
AB394	Authorizes the Board of Regents of the University of Nevada to require certain institutions to adopt emergency response plans related to opioid overdoses. (BDR 34-95)	This bill requires such an emergency response plan to include: (1) plans for providing education on opioid-related drug overdoses; and (2) procedures for the distribution and administration of opioid antagonists.	2024 recommendation to ensure opioid antagonist must be available on all campuses with training provided for administration. (Amendment changes dosage from 4mg to lowest effective; prohibits disciplinary action for obtaining opioid antagonist)	Governor App'd 6/5/25; Effective upon Approval
SB118	Revises requirements relating to coverage under Medicaid for certain services provided by pharmacists. (BDR 38-218) authorization	Requires rate of reimbursement that a pharmacist must receive for services covered under Medicaid; prohibiting Medicaid or a managed care organization that provides health care services to recipients of Medicaid from requiring prior authorization	Recommendations to the State Board of Pharmacy are among the AB374 Section 10 requirements for the SURG, under subparagraph (g).	No Further Action 6/3/25

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SB192	Revises provisions relating to public health. (BDR 40-86)	Existing law prescribes certain requirements governing the prescribing or dispensing of a controlled substance listed in schedule II, III or IV for the treatment of pain. (NRS 639.2391-639.23914) Section 37 of this bill clarifies that those requirements do not: (1) apply to the prescribing or dispensing of a controlled substance in other circumstances; or (2) establish a standard of care or grounds for disciplinary action against a practitioner when a controlled substance is prescribed or dispensed in other circumstances.	Ensuring appropriate prescription of controlled substances is among the AB374 Section 10 requirements for the SURG, under subparagraph (g)	No Further Action 6/3/25
SB300	Makes revisions relating to Medicaid. (BDR 38-110)	(1) codifies into law existing requirements that Medicaid cover services provided by a psychiatrist, psychologist, advanced practice registered nurse, marriage and family therapist or licensed clinical social worker at a federally-qualified health center; and (2) newly requires Medicaid to cover services provided by a mental health counselor.	Medicaid coverage of behavioral health services support treatment and recovery for many of the SURG target populations. (To the extent federal financial participation is available)	Governor App'd 6/10/25
SB337	Revises provisions relating to opioids. (BDR 40-204)	Section 15 of this bill requires the DPBH to create a non-opioid directive, which is a form on which a person may indicate that he or she does not wish to receive opioids, and to post the non-opioid directive on an Internet website maintained by the Division.	SURG target populations who may be recovering from opioid substance use may elect to establish a non-opioid directive.	No Further Action 6/3/25
SB353	Revises provisions relating to Medicaid. (BDR S-1010)	Section 1 of this bill requires the Division of Health Care Financing and Policy of the Department to establish: (1) a specific category of provider for the purposes of billing and reimbursement under Medicaid for certain clinics that provide education and training to students of certain mental health professions; and (2) all-inclusive per diem rates of reimbursement under Medicaid for services provided by a trainee during a visit to such a clinic	Leverages Medicaid to train mental health professionals through billing and reimbursement at certain clinics.	Governor Approved 6/6/25 Effective 6/6/25
SB435	Revises provisions relating to nicotine products. (BDR 32-989)	Section 6 of this bill similarly requires manufacturers of vapor products to execute and deliver a certification to the Attorney General.	This would require manufacturers of vapor products sold in Nevada to execute and deliver a certification to the Attorney General.	No Further Action 6/3/25

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SB457	Revises provisions relating to public safety. (BDR 15-1038)	Section 29 of this bill decreases the threshold for previous felony convictions to two and three, respectively. Existing law prohibits a conviction of possession, low-level possession or unlawful use of a controlled substance from being used for the purposes of determining whether a person is a habitual criminal. (NRS 207.010) Section 29 removes this prohibition.	Existing law establishes the crimes of trafficking and high-level trafficking in illicitly manufactured fentanyl, any derivative of fentanyl or any mixture which contains illicitly manufactured fentanyl or any derivative of fentanyl, depending on the amount of fentanyl involved. (NRS 453.3387) Section 73 of this bill makes various changes to establish the crimes of trafficking, mid level trafficking and high level trafficking of such substances. (amended out by Governor)	No Further Action 6/3/25 (Expected to reemerge if a special session is scheduled related to federal budget cuts)
SB494	Makes revisions relating to health and human services. (BDR 18-1116)	Creating the Nevada Health Authority; creating certain divisions and offices within the Authority; providing for the appointment of officers and the employment of staff for the Authority; establishing requirements governing procurement by the Authority.	Eliminates DHCFP and moves Medicaid, PEBP, and other functions to the Nevada Health Authority as a new Executive Department.	Governor App'd 6/10/25
SB495	Revises provisions relating to health care. (BDR 40-1037)	Establishing a competitive funding program to address shortages of providers of health care in this State; prescribing certain requirements to expedite the credentialing and privileging of providers of health care; authorizing paramedics to serve as employees or volunteers in hospitals under certain circumstances; transferring the responsibility for administering the Graduate Medical Education Grant Program to the Department of Health and Human Services.	Establishing a competitive funding program to address shortages of providers of health care in this State; prescribing certain requirements to expedite the credentialing and privileging of providers of health care; authorizing paramedics to serve as employees or volunteers in hospitals under certain circumstances; transferring the responsibility for administering the Graduate Medical Education Grant Program to the Department of Health and Human Services.	No Further Action 6/3/25