2026-2027 SURG Response Subcommittee
Preliminary Recommendation Submissions

The information in this document may include content originally submitted by the member who introduced the recommendation, subsequent revisions to that recommendation, and input provided by subject matter experts during or between SURG and Subcommittee meetings.

Recommendation #1

Re-establish the Nevada Alliance for Drug Endangered Children (DEC). Support their efforts to establish training and resources that help law enforcement, social workers, teachers, community groups, and others to assist children growing up in homes where a parent or other adult uses illegal substances.

Submission Details

- Submitted by Dr. Terry Kerns on 10/26/2026

Justification/Background

During Catherine Cortez-Masto's time as Nevada Attorney General (2007-2015), Nevada established the NADEC. Grant funding was used for this initiative, but the Alliance dissolved when the grant funding ended. The goal of this Alliance is to train and support multi-disciplinary teams to identify and assist drug endangered children that create collaborative, sustainable responses which protect children and transform communities.

Associated Research/Links

- The National Alliance for Drug Endangered Children (NADEC) https://www.nationaldec.org/
- NRS 228.700: "Child who is endangered by drug exposure" defined. https://nevada.public.law/statutes/nrs_228.700
- Substance Use Disorder Statistics in Nevada https://mhstats.org/nevada/substance-use-disorder/
- Child Protective Services in Crisis: The Reality of Nevada's Foster Care System in 2026 - Las Vegas News https://las-vegas-news.com/child-protective-services-in-crisis-the-reality-of-nevadas-foster-care-system-in-2026/
- Millions of U.S. kids live with parents with substance use disorders https://www.nih.gov/news-events/nih-research-matters/millions-us-kids-live-parents-substance-use-disorders
- Nevada Launches KinCare Program to Support Families Caring for Children Impacted by Substance Misuse https://www.dhs.nv.gov/reports/press-releases/press-releases/nevada-launches-kincare-program-to-support-families-caring-for-children-impacted-by-substance-misuse/
- DEA: United States Drug Enforcement Administration. National Alliance for Drug Endangered Children https://www.dea.gov/resources/national-alliance-drug-endangered-children
- Drug Endangered Children Task Force https://www.justice.gov/archives/dec
- Promising Practices for Helping Drug Endangered Children https://portal.cops.usdoj.gov/resourcecenter/content.ashx/cops-p294-pub.pdf

AB374 Section 10 Requirement(s) Assigned to the Response Subcommittee and Align with this Recommendation

(i) Develop strategies for local, state and federal law enforcement and public health agencies to respond to and prevent overdoses and plans for implementing those strategies.
(k) Recommend strategies to improve coordination between local, state and federal law enforcement and public health agencies to enhance the communication of timely and relevant information relating to substance use and reduce duplicative data collection and research.

(p) Evaluate the effects of substance use disorders on the economy of this State.

AB374 Section 10 Requirement(s) that are Cross-Cutting and Align with this Recommendation

(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

(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.

Focus Population(s)

c. Pregnant women and the parents of dependent children

f. Children who are involved with the child welfare system

Action Steps

- Expenditure of Opioid Settlement Funds

Short-Term or Long-Term

- Long-term (2+ years)

Fiscal Note Requirement

- Unsure if a fiscal note is needed

Impact of Recommendation *(on a scale of 1-3)*

- 2 - The anticipated impact is to provide better and integrated response and support of drug endangered children.

Urgency of Recommendation *(on a scale of 1-3)*

- 2 - Many children in Nevada are affected by parental drug use and/or end up being raised by someone other than their parents due to drugs. To better serve these drug endangered children, it is urgent to provide better response and support to these children.

Capacity & Feasibility of Recommendation *(on a scale of 1-3)*

- 2 - There are many agencies that currently are involved with the support of drug endangered children. The NADEC is to provide additional support and training to members of these agencies.

Advances Racial and Health Equity due to Recommendation *(on a scale of 1-3)*

- 3 - Children may often be the collateral damage from Nevadan's drug use. This recommendation would help advance the plight of these children.

Possible Presenters on this Recommendation

National DEC director of training and alliance development Nikki Romer nromer@nationaldec.org

Recommendation #2

Recommend that Nevada conduct a statewide assessment of the fiscal and operational impacts of limited access to substance-use treatment in rural and frontier jurisdictions, including effects on law enforcement, emergency medical services, correctional institutions, hospital emergency departments, and county governments. The assessment should identify costs associated with transporting individuals outside their communities, repeated crisis encounters, emergency detention, jail utilization, and extended law enforcement involvement due to unavailable treatment services. There should be a section dedicated to youth as many youth are unable to obtain prior authorization from insurance and are cut short on treatment opportunities.

Submission Details

- Submitted by Dr. Shayla Holmes on 5/14/2025, revised on 2/20/2026

Justification/Background

Many rural counties have no local inpatient behavioral health hospital or medically managed Level 4 substance-use treatment facility. Individuals requiring higher levels of care must access regional services. Importantly, this places costs and operational burdens on systems that may not be funded or equipped to provide behavioral health treatment. This can also have negative impacts on timely access to treatment. We see sometimes individuals needing inpatient treatment in jails being released without beds available back to their original environment causing repeat behavior and limiting opportunity for timely intervention.

Associated Research/Links

- Nevada's Rural Behavioral Health Policy Board identifies treatment shortages and transportation barriers that often require law enforcement and EMS to transport individuals outside their communities, creating additional costs and reducing local emergency response capacity. https://nvbh.org/rural-behavioral-health-region/
- Nevada's 2025–2030 Behavioral Health Strategic Plan identifies gaps in substance-use treatment, youth services, crisis response, and transportation, supporting the need to examine the broader financial and operational consequences of inadequate access. https://www.dpbh.nv.gov/contentassets/64e2d35343a74d44a7f2f72850b2bb59/nvbh_strategic_plan_dpbh_branded_508-2.pdf
- A 2023 systematic review found that substance-use treatment can generate economic benefits, particularly through reductions in criminal activity and criminal justice expenditures, supporting an assessment of potential public-sector savings from improved treatment access. https://pmc.ncbi.nlm.nih.gov/articles/PMC10530001/
- A 2026 rural health study found that rural youth with opioid use disorder experienced substantially longer travel times for treatment than urban youth (100.7 versus 55.5 minutes), highlighting the importance of examining youth-specific treatment access, transportation burdens, and potential impacts on juvenile justice and child welfare systems. https://www.ruralhealthresearch.org/publications/1796

AB374 Section 10 Requirement(s) Assigned to the Response Subcommittee and Align with this Recommendation

(m) Study the effects of substance use disorders on the criminal justice system, including, without limitation, law enforcement agencies and correctional institutions.
(p) Evaluate the effects of substance use disorders on the economy of this State.

AB374 Section 10 Requirement(s) that are Cross-Cutting and Align with this Recommendation

(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.

Focus Population(s)

a. Veterans, elderly persons and youth
b. Persons who are incarcerated, persons who have committed nonviolent crimes primarily driven by a substance use disorder and other persons involved in the criminal justice or juvenile systems

Action Steps

- Expenditure of Opioid Settlement Funds

Short-Term or Long-Term

- Short-term (Under 2 years)

Fiscal Note Requirement

- Requires a fiscal note (estimate the amount below): $200,000 as the preliminary planning figure, provided the state can supply existing administrative data and participating agencies cooperate without significant additional costs.

Impact of Recommendation *(on a scale of 1-3)*

- 2 - The anticipated impact is a clearer understanding of the financial and operational burdens that inadequate substance-use treatment access places on Nevada's public systems, particularly in rural and frontier communities. By identifying costs associated with transportation, law enforcement involvement, emergency services, incarceration, and limited youth treatment options, the assessment would support more informed funding and policy decisions. Findings could help reduce avoidable public expenditures, improve access to appropriate treatment, strengthen public-safety capacity, and guide cost-effective investments based on demonstrated regional needs rather than assumptions.

Urgency of Recommendation *(on a scale of 1-3)*

- 2 - The recommendation is timely because rural and frontier communities continue to experience significant gaps in substance-use treatment access, placing ongoing financial and operational burdens on law enforcement, emergency medical services, hospitals, corrections, and county governments. Limited youth-specific treatment options further compound these challenges. Without a clear understanding of these costs, Nevada risks continuing to invest in reactive crisis responses rather than cost-effective treatment solutions. Conducting this assessment now would provide critical data to inform upcoming funding priorities, improve resource allocation, and identify opportunities to reduce avoidable public expenditures while strengthening access to treatment and public safety.

Capacity & Feasibility of Recommendation *(on a scale of 1-3)*

- 3 - I believe there is sufficient capacity to procure a contractor and implement through FRN funds for a project of this nature.

Advances Racial and Health Equity due to Recommendation *(on a scale of 1-3)*

- 3 - This has the potential to significantly impact health equity if it informs priorities for the state going forward in substance misuse treatment access for marginalized groups.

Possible Presenters on this Recommendation

- Rural Regional Behavioral Health Coordinator Valerie Cauhape Haskin can present on Can present Nevada-specific rural/frontier service gaps, transportation challenges. Dr. Kevin Osten-Garner, Southern Regional Behavioral health policy board, presented testimony on AB 31 concerning behavioral health transportation and the burden on law enforcement, EMS, and emergency departments. Dr. Sarah Friedman, UNR - Studies Medicaid claims, substance-use treatment accessibility, healthcare utilization, and program evaluation. Could explain how Nevada might measure costs and outcomes. Holly Andrilla and/or Dr. Janessa Graves - WWAMI Rural Health Research Center- national research choice. Leads research comparing rural and urban opioid treatment access, transportation burdens, and treatment costs. Her team also published the 2026 youth treatment-access research.