

| Bill #                | Digest Excerpts   | Relevance to SURG  | Status   |
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| <a href="#">SB4</a>   | Expands allocation of Fund for a Healthy Nevada for grants, contracts, or agreements to pay for Rx, services and benefits to residents beyond previous target population of senior citizens and persons with disabilities.  | Expansion of these funds could be used to cover Rx, services and benefits for treatment of substance use. (SURG Recommendation #5 to expand outreach for overdose and deploy personnel to people released from institutional or other settings after overdose) (SURG Recommendation #13 to ensure Black, Latinx/Hispanic, Indigenous, and people of color communities receive overdose services and supplies.) [AB374 Sec10 Paragraphs (e), (f) and (q)] | 4/24/23 - Passed Senate; 4/25/23 - Read in Assembly            |
| <a href="#">SB35</a>  | Section 8 of this bill excludes fentanyl from the controlled substances in schedule II for which the provisions governing the crimes of low-level trafficking and high-level trafficking apply. Section 1 of this bill instead establishes the crimes of low-level trafficking in fentanyl, mid-level trafficking in fentanyl and high-level trafficking in fentanyl. | Changes penalties for fentanyl trafficking. (SURG Recommendation #1 to Revise Fentanyl penalties) [AB374 Sec10 Paragraph (o)]  | 4/25/23 - Passed Senate; 4/26/23 - Read in Assembly            |
| <a href="#">SB117</a> | Section 2 of this bill authorizes the Director to include in the State Plan [Medicaid] coverage for services of community health workers who are supervised by other types of providers of health care.   | Expands Medicaid coverage to Community Health Workers. (SURG Recommendation #6 to Expand Medicaid for preventive services and access to care.) (SURG Recommendation #15 to enhance compensation of health and behavioral health care workers; sustain/expand investment in Community Health Workers, Peer Recovery Specialists, and Certified Prevention Specialists.) [AB374 Sec10 Paragraph (q)]   | 4/18/23 - Passed Senate as amended; 4/19/23 - Read in Assembly |

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| <a href="#">SB119</a> | This bill repeals that expiration, thereby making permanent the provisions of existing law requiring a third-party payer who is not an industrial insurer to cover services provided through telehealth, except for services provided through audio-only interaction, in the same amount as services provided in person or by other means.  | Extends coverage for telehealth services. (SURG Recommendation #11 to expand access to MAT, and SUD recovery support including telehealth.) <b>[AB374 Sec10 Paragraphs (e) and (f)]</b>   | 4/25/23 - Passed Senate as amended; 4/26/23 - Read in Assembly |
| <a href="#">SB128</a> | AN ACT relating to health care; prohibiting a person from holding himself or herself out as a certified community health worker unless he or she holds certain certification; establishing a civil penalty for such a violation; authorizing Medicaid coverage for the services of certain community health workers; and providing other matters properly relating thereto.   | Clarifies certification for Community Health Workers and expands the range of professionals who can provide oversight and supervision. (SURG Recommendation #15 to enhance compensation of health and behavioral health care workers; sustain/expand investment in Community Health Workers, Peer Recovery Specialists, and Certified Prevention Specialists.) <b>[AB374 Sec10 Paragraph (q)]</b> | 4/18/23 - Rereferred to Committee on Finance (Exempt)          |
| <a href="#">SB191</a> | Section 1 of this bill requires the Director to include in the State Plan coverage for the cost of services provided by behavior analysts, assistant behavior analysts and registered behavior technicians to Medicaid recipients who are less than 27 years of age.  | Expands Medicaid coverage to behavior analysts, assistant behavior analysts and registered behavior technicians for recipients under 27 years of age. (SURG Recommendation #6 to Expand Medicaid for preventive services and access to care.) <b>[AB374 Sec10 Paragraph (q)]</b>  | 4/18/23 - Rereferred to Committee on Finance (Exempt)          |
| <a href="#">SB197</a> | <del>Section 1 of this bill specifically prohibits the unauthorized sale of fentanyl or carfentanil or the possession of fentanyl or carfentanil for the purpose of sale and establishes penalties for violations of that prohibition which are greater than those set forth under existing law for the unlawful sale of a controlled substance classified in schedule I or II or the unlawful possession of such a controlled substance for the purpose of sale.</del> | <del>Prohibits unauthorized sale or possession of fentanyl or carfentanil and increases penalties for violation. (SURG Recommendation #1 to Revise Fentanyl penalties) <b>[AB374 Sec10 Paragraph (o)]</b></del>   | No further action allowed                                      |

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| <a href="#">SB242</a> | Section 2 of this bill authorizes a research facility to submit to the Department of Health and Human Services an application for approval to conduct a study that includes a clinical trial involving persons who are 18 years of age or older to study the use of MDMA or psilocybin in the treatment of mental health and other medical conditions. | Authorizes clinical trials with adults using MDMA or psilocybin in the treatment of mental health and other medical conditions. <b>[AB374 Sec 10 Paragraph (j)]</b> Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about the effects of substance use and substance use disorders.    | 4/21/23 - Rereferred to Committee on Finance (Exempt) |
| <a href="#">SB267</a> | <del>[T]o provide reimbursement to a psychologist for certain services rendered by a registered psychological assistant, psychological intern, or psychological trainee under the supervision of the psychologist.</del>   | Financial support for expanded access to behavioral health care. <del>(SURG Recommendation #15 to enhance compensation of health and behavioral health care workers; sustain/expand investment in Community Health Workers, Peer Recovery Specialists, and Certified Prevention Specialists.)</del> <b>[AB374 Sec10 Paragraph (q)]</b> | No further action allowed                             |
| <a href="#">SB377</a> | <del>This bill requires the Legislative Auditor to conduct an audit of the costs and expenses that the State of Nevada has reimbursed a retained attorney or law firm in connection with the investigation and litigation of claims involving the manufacture, distribution, sale, or marketing of opioids.</del>                                      | Requires audit of expenses reimbursed to attorneys or law firm in connection with opioid litigation. <del>[AB374 Sec10 Paragraph (q)]</del> <b>[AB374 Sec10 Paragraph (q)]</b> Study, evaluate and make recommendations to the Department of Health and Human Services concerning the use of the money.                                | No further action allowed                             |
| <a href="#">SB412</a> | [I]ncreasing the penalty for a person who is convicted of the possession of a mixture of fentanyl and certain other substances; prohibiting a court from granting probation to or suspending the sentence of a person who possesses fentanyl for the purpose of sale; revising provisions concerning trafficking in certain controlled substances      | Increases penalty for possession of fentanyl and other substances. (SURG Recommendation #1 to Revise Fentanyl penalties) <b>[AB374 Sec10 Paragraph (o)]</b>  | 3/30/23 - Waiver granted                              |

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| <a href="#">AB37</a>  | Section 6 requires the Center to consist of: (1) a main hub located at an institution within the System; and (2) regional hubs in each of the five behavioral health regions into which this State is divided.  | Supports workforce development for behavioral health care . (SURG Recommendation #15 to enhance compensation of health and behavioral health care workers; sustain/expand investment in Community Health Workers, Peer Recovery Specialists, and Certified Prevention Specialists.) [AB374 Sec10 Paragraph (q)] | 4/11/23 - Passed Assembly Revenue (Exempt)                     |
| <a href="#">AB45</a>  | Section 6 of this bill creates the Student Loan Repayment for Providers of Health Care in Underserved Communities Program   | Supports workforce development for health care providers through loan repayment.  | 4/11/23 - Rereferred to Committee on Ways and Means (Exempt)   |
| <a href="#">AB69</a>  | Section 8 of this bill expands that program [NV Health Service Corps] to also include the repayment of loans on behalf of providers of behavioral health care who commit to practicing on a full-time basis for at least 2 years in Nevada: (1) in a hospital or other inpatient setting, an outpatient setting or providing crisis management services; (2) as a full-time faculty member with teaching responsibilities in a program of education or training for practitioners or providers of behavioral health care at an institution within the Nevada System of Higher Education; or (3) providing behavioral health care to pupils in kindergarten through 12th grade in public schools in this State.  | Expands loan repayment for behavioral health providers under the Nevada Health Service Corps (SURG Recommendation #15 to enhance compensation of health and behavioral health care workers) [AB374 Sec10 Paragraph (q)]   | 4/14/2023 - Rereferred to Committee on Ways and Means (Exempt) |
| <a href="#">AB115</a> | <del>Sections 2-10 of this bill authorize the establishment of programs for the prevention of overdoses and disease, which provide a hygienic space where persons who are at least 18 years of age may consume drugs that they have obtained before arriving in the space. Sections 2-5 of this bill define relevant terms. Section 6 of this bill authorizes the board of county commissioners in a county whose population is 100,000 or more (currently Clark and Washoe Counties) to authorize the establishment of a program for the prevention of overdoses and disease that operates at one fixed or mobile site upon determining that the program is likely to achieve certain purposes relating to the reduction of harm caused by the consumption of drugs.</del> | <del>Authorizes establishment of hygienic spaces for drug consumption to reduce harm. [AB374 Sec10 Paragraph (i)]</del>   | No further action allowed.                                     |

| <b>ASSEMBLY BILLS</b>        |  |  |  |
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| <a href="#"><u>AB132</u></a> | Section 3 of this bill: (1) creates the Committee to Review Overdose Fatalities within the Department; and (2) requires the Director of the Department to appoint 10 members to the Committee, who must be certain persons or represent certain groups or organizations. Section 4 of this bill sets forth the powers and duties of the Committee,                     | Creates Committee to Review Overdose Fatalities, like the Committee to Review Suicide Fatalities ( <b>SURG Recommendation #10 Overdose Fatality Review Committees to identify system gaps and innovative strategies.) [AB374 Sec10 Paragraph (i)]</b> )  | 4/24/23 - Passed Assembly as amended; 4/25/23 - Referred to Senate HHS |
| <a href="#"><u>AB137</u></a> | Sections 2-6 of this bill expand the applicability of those provisions (that any report is confidential and may not be used for criminal prosecution) to apply to all fetal alcohol spectrum disorders.  | This bill expands confidentiality of reporting on fetal alcohol spectrum disorders which may not be used for criminal prosecution.   | 4/14/23 - Referred to Committee on Ways and Means (Exempt)             |
| <a href="#"><u>AB138</u></a> | Existing law requires DHHS to develop and administer a State Plan for Medicaid which includes a list of specific medical services required to be provided to Medicaid recipients. Section 1 of this bill requires such covered medical services to include behavioral health services that are delivered through evidence-based, behavioral health integration models. | Expand State Plan for Medicaid to cover evidence-based behavioral health services. ( <b>SURG Recommendation #6 to Expand Medicaid for preventive services and access to care.) (SURG Recommendation #14 to increase capacity including access to treatment facilities and beds for intensive care coordination to divert youth at risk of higher-level of care and/or system involvement.) [AB374 Sec10 Paragraphs (e), (f) and (q)]</b> ) | 3/21/23 - Rereferred to Committee on Ways and Means (Exempt)           |

**ASSEMBLY BILLS**

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| <p><a href="#">AB156</a></p> | <p>Sections 2 and 7-9 of this bill require a public or private penal institution or facility and the sheriff, chief of police or town marshal responsible for a local jail or detention center to take reasonable measures to ensure: (1) the availability of medication-assisted treatment for an offender or prisoner who has been diagnosed with an opioid use disorder to the same extent and under the same conditions as other medical care for offenders or prisoners; and (2) the continuation of such treatment when such an offender or prisoner is released or transferred. Sections 2, 8 and 9 also prohibit such an institution, facility, local jail or detention facility from discriminating against such treatment or an offender or prisoner who is receiving such treatment. Sections 2 and 7-9 require the Department of Corrections, an official who is responsible for local jail or detention facility or the Department of Health and Human Services, depending on the circumstances, to take reasonable measures to ensure the continuation of such treatment for an offender or prisoner who is released or transferred. Sections 3 and 6 of this bill require a program of treatment for offenders with substance use or co-occurring disorders who have been sentenced to imprisonment in the state prison to include medication-assisted treatment where required by section 2. Sections 4 and 5 of this bill clarify that certain provisions concerning the eligibility of an offender to participate in a program of treatment for offenders with substance use or co-occurring disorders and the removal of an offender from such a program do not affect the ability of an offender who has been diagnosed with an opioid use disorder to receive medication-assisted treatment.</p> | <p>Ensure availability of medication-assisted Treatment in jails, detention centers, and correctional facilities, for people diagnosed with opioid use disorder, and continuation of treatment on release or transfer.<br/> <b>(SURG Recommendation #5 to expand outreach for overdose and deploy personnel to people released from institutional or other settings after overdose) (SURG Recommendation #11 to expand access to MAT and recovery support for SUD, including bridge MAT programs.) (SURG Recommendation #12 to implement follow-up, referrals, and linkage of care for justice involved individuals with opioid use disorder.)[AB374 Sec10 Paragraphs (e) and (f)]</b></p> | <p>4/21/23 - Rereferred to Committee on Ways and Means (Exempt)</p> |
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**ASSEMBLY BILLS**

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| <p><a href="#">AB277</a></p> | <p>Existing law authorizes the Division to issue an endorsement as a crisis stabilization center to certain medical facilities that provide behavioral health services designed to de-escalate or stabilize a behavioral crisis. (NRS 449.0915) Section 5 of this bill authorizes the Division to issue such an endorsement to a rural emergency hospital if the rural emergency hospital meets certain requirements. Existing law requires the Director of the Department to develop and adopt a State Plan for Medicaid which includes, without limitation, a list of specific medical services required to be provided to Medicaid recipients</p> | <p>DHHS endorsement for rural emergency hospitals to serve as crisis stabilization centers providing behavioral health services, leveraging Medicaid payment source.<br/> <b>Recommendation #6 to expand Medicaid billing opportunities for preventive services and allow blended and braided funding to facilitate services to expand access to care for youth and adults. [AB374 Sec10 Paragraph (q)]</b></p>                                      | <p>4/11/23 - Rereferred to Committee on Ways and Means (Exempt)</p> |
| <p><a href="#">AB403</a></p> | <p>AN ACT relating to medical facilities; removing a halfway house for persons recovering from alcohol or other substance use disorders from the definition of a facility for the dependent; revising terminology used to refer to such facilities; removing the requirement that such a facility be licensed and regulated as a facility for the dependent; and providing other matters properly relating thereto.</p>  | <p>[R]emoving the requirement that such a halfway house be licensed by the Division while preserving the requirement that such a halfway house be certified by the Division. <b>[AB374 Sec10 Paragraph (j) Study the efficacy and expand the implementation of programs to: (2) Reduce the harms associated with substance use and substance use disorders while referring persons with substance use disorders to evidence-based treatment.</b></p> | <p>4/20/23 - Rereferred to Committee on Ways and Means (Exempt)</p> |

**ASSEMBLY BILLS**

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| <p><b>AB435</b></p> | <p><del>AN ACT relating to behavioral health; authorizing the administration of a program to award grants to promote the establishment of programs that provide integrated treatment for co-occurring disorders; Section 22 of this bill requires the State Plan to, if federal financial participation is available for such coverage and services: (1) include coverage for tribal based behavioral health practices; and (2) provide an enhanced rate of reimbursement for services to treat co-occurring mental illness and substance use disorder.</del></p> | <p><del>Award grants for integrated treatment for co-occurring disorders; provide enhanced rate of reimbursement for services to treat co-occurring mental illness and substance use disorder.</del><br/> <b>Recommendation #6 to expand Medicaid billing opportunities for preventive services and allow blended and braided funding to facilitate services to expand access to care for youth and adults. [AB374 Sec10 Paragraph (g)]</b></p> | <p>4/15/23 - No further action allowed</p> |
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