

ASSEMBLY BILL NO. 156—COMMITTEE ON
HEALTH AND HUMAN SERVICES

(ON BEHALF OF THE JOINT INTERIM STANDING COMMITTEE
ON HEALTH AND HUMAN SERVICES)

FEBRUARY 13, 2023

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions relating to substance use disorders. (BDR 40-331)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact.
Effect on the State: Yes.

CONTAINS UNFUNDED MANDATE (§§ 8, 9)
(NOT REQUESTED BY AFFECTED LOCAL GOVERNMENT)

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EXPLANATION – Matter in *bolded italics* is new; matter between brackets ~~omitted material~~ is material to be omitted.

AN ACT relating to substance use disorders; establishing the order in which a provider or program is required to prioritize persons for participation in certain publicly funded programs for the treatment of alcohol or other substance use disorders; prescribing certain requirements to ensure the access of offenders or prisoners who have been diagnosed with an opioid use disorder to medication-assisted treatment and the continuation of such treatment upon the release or transfer of such offenders or prisoners; prohibiting certain discrimination regarding such treatment; prescribing certain requirements concerning the diagnosis and treatment of a patient with an opioid use disorder; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

- 1 Existing federal regulations require programs funded by certain federal grants
- 2 for injection drug users to prioritize persons for participation in such programs in
- 3 the following order: (1) pregnant injecting drug users; (2) pregnant persons with a
- 4 substance use disorder; (3) other injecting drug users; and (4) all others. (45 C.F.R.
- 5 § 96.131) **Section 1** of this bill requires any treatment provider, provider of health



6 care or program for the treatment of alcohol or other substance use disorders to
7 prioritize persons to receive services for the treatment of alcohol or other substance
8 use disorders funded in whole or in part by federal or state money in that order,
9 except that **section 1** authorizes the State Board of Health to adopt regulations
10 prioritizing additional categories of people for such services.

11 Existing law requires the Director of the Department of Corrections to establish
12 one or more programs of treatment for offenders with substance use or co-occurring
13 disorders who have been sentenced to imprisonment in the state prison. (NRS
14 209.4236, 209.425) Existing law additionally provides that treatment of a prisoner
15 in a local jail or detention facility who has a substance use disorder may include
16 medication-assisted treatment. (NRS 211.140) **Sections 2 and 7-9** of this bill
17 require a public or private penal institution or facility and the sheriff, chief of police
18 or town marshal responsible for a local jail or detention center to take reasonable
19 measures to ensure: (1) the availability of medication-assisted treatment for an
20 offender or prisoner who has been diagnosed with an opioid use disorder to the
21 same extent and under the same conditions as other medical care for offenders or
22 prisoners; and (2) the continuation of such treatment when such an offender or
23 prisoner is released or transferred. **Sections 2, 8 and 9** also prohibit such an
24 institution, facility, local jail or detention facility from discriminating against such
25 treatment or an offender or prisoner who is receiving such treatment. **Sections 2**
26 **and 7-9** require the Department of Corrections, an official who is responsible for
27 local jail or detention facility or the Department of Health and Human Services,
28 depending on the circumstances, to take reasonable measures to ensure the
29 continuation of such treatment for an offender or prisoner who is released or
30 transferred. **Sections 3 and 6** of this bill require a program of treatment for
31 offenders with substance use or co-occurring disorders who have been sentenced to
32 imprisonment in the state prison to include medication-assisted treatment where
33 required by **section 2**. **Sections 4 and 5** of this bill clarify that certain provisions
34 concerning the eligibility of an offender to participate in a program of treatment for
35 offenders with substance use or co-occurring disorders and the removal of an
36 offender from such a program do not affect the ability of an offender who has been
37 diagnosed with an opioid use disorder to receive medication-assisted treatment.

38 Existing law authorizes a physician, physician assistant or advanced practice
39 registered nurse to prescribe controlled substances if he or she is registered with the
40 State Board of Pharmacy. (NRS 453.126, 453.231, 630.271, 632.237, 633.432)
41 Existing federal law requires a physician, physician assistant or advanced practice
42 registered nurse who prescribes or dispenses narcotic drugs for the treatment of
43 opioid use disorder to register with the Drug Enforcement Administration of the
44 United States Department of Justice for the specific purpose of dispensing such
45 drugs. (21 U.S.C. § 822(a)) **Sections 10-16** of this bill require a physician,
46 physician assistant, advanced practice registered nurse, osteopathic physician or
47 certain providers of behavioral health care who diagnose a patient with an opioid
48 use disorder to counsel and provide information to the patient concerning evidence-
49 based treatment for opioid use disorder, including medication-assisted treatment. If
50 the patient requests medication-assisted treatment: (1) **sections 10-12** of this bill
51 require a physician, physician assistant, advanced practice registered nurse or
52 osteopathic physician who is authorized under federal and state law to prescribe
53 such treatment to offer to issue such a prescription; and (2) **sections 10-16** require
54 all other physicians, physician assistants, advanced practice registered nurses,
55 osteopathic physicians and certain providers of behavioral health care to refer the
56 patient to a physician, physician assistant, advanced practice registered nurse or
57 osteopathic physician who is authorized to issue such a prescription.



THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 **Section 1.** NRS 458.103 is hereby amended to read as follows:

2 458.103 **1.** The Division may accept:

3 ~~1-1~~ **(a)** Money appropriated and made available by any act of
4 Congress for any program for alcohol or other substance use
5 disorder administered by the Division as provided by law.

6 ~~1-2~~ **(b)** Money appropriated and made available by the State of
7 Nevada or by a county, a city, a public district or any political
8 subdivision of this State for any program for alcohol or other
9 substance use disorder administered by the Division as provided by
10 law.

11 **2.** *Except as otherwise provided in any regulations adopted*
12 *pursuant to subsection 3, a treatment provider, provider of health*
13 *care or program for alcohol or other substance use disorders shall*
14 *prioritize persons to receive services for the treatment of alcohol or*
15 *other substance use disorders funded in whole or in part by*
16 *federal or state money in accordance with 45 C.F.R. § 96.131(a).*

17 **3.** *To the extent that such regulations do not conflict with*
18 *federal law or impair an obligation under any existing grant,*
19 *contract or other agreement, the State Board of Health may adopt*
20 *regulations prioritizing categories of persons, in addition to the*
21 *categories prescribed in 45 C.F.R. § 96.131(a), to receive services*
22 *for the treatment of alcohol or other substance use disorders*
23 *funded in whole or in part by federal or state money.*

24 **4.** *As used in this section, “provider of health care” has the*
25 *meaning ascribed to it in NRS 629.031.*

26 **Sec. 2.** Chapter 209 of NRS is hereby amended by adding
27 thereto a new section to read as follows:

28 **1.** *An institution, facility or private facility or institution shall*
29 *take reasonable measures to ensure the availability of medication-*
30 *assisted treatment for offenders who have been diagnosed with an*
31 *opioid use disorder to the same extent and under the same*
32 *conditions as other medical care for offenders.*

33 **2.** *An institution, facility or private facility or institution shall*
34 *not discriminate against:*

35 **(a)** *Treatment described in subsection 1 as compared to other*
36 *forms of treatment for opioid use disorder or abstinence from*
37 *opioids without such treatment; or*

38 **(b)** *An offender because the offender is receiving such*
39 *treatment.*

40 **3.** *The Department and the Department of Health and*
41 *Human Services shall take reasonable measures to ensure the*
42 *continuation of treatment described in subsection 1 when an*



1 *offender who is receiving such treatment is released from custody*
2 *or transferred to another institution, facility or private facility or*
3 *institution or the custody of another governmental agency.*

4 *4. As used in this section, "medication-assisted treatment"*
5 *means treatment for an opioid use disorder using medication*
6 *approved by the United States Food and Drug Administration for*
7 *that purpose.*

8 **Sec. 3.** NRS 209.4236 is hereby amended to read as follows:

9 209.4236 1. The Director shall, in conjunction with the
10 Division and with the approval of the Board, establish one or more
11 programs of treatment for offenders with substance use or co-
12 occurring disorders to provide treatment to certain offenders with
13 substance use or co-occurring disorders. A program of treatment for
14 offenders with substance use or co-occurring disorders must include,
15 but is not limited to, the requirements set forth in this section.

16 2. A program of treatment for offenders with substance use or
17 co-occurring disorders established pursuant to subsection 1 must
18 provide an offender with:

19 (a) Intensive treatment for a substance use or co-occurring
20 disorder ~~§~~, *including, without limitation, treatment described in*
21 *section 2 of this act, where appropriate;*

22 (b) A clearly defined set of goals;

23 (c) A clearly defined structure of authority; and

24 (d) A highly structured schedule that includes, but is not limited
25 to, the treatment listed in paragraph (a) and, if practicable, programs
26 of employment, general education or vocational training.

27 3. Except as otherwise provided in NRS 209.4231 to 209.4244,
28 inclusive, offenders who are assigned to a program of treatment for
29 offenders with substance use or co-occurring disorders, to the extent
30 practicable as determined by the Director or a person designated by
31 the Director:

32 (a) May be housed in areas of a facility or institution that are
33 segregated from other areas of the facility or institution in which
34 offenders who are not assigned to the program of treatment for
35 offenders with substance use or co-occurring disorders are housed;

36 (b) May be taken outside an institution or facility, under
37 appropriate precautions to prevent escape, to participate in a
38 program of treatment for offenders with substance use or co-
39 occurring disorders; and

40 (c) Must participate in the program of treatment for offenders
41 with substance use or co-occurring disorders for a period of not less
42 than 5 months and a program of aftercare for a period of not less
43 than 3 months, as deemed appropriate for the level of care being
44 offered.



1 **Sec. 4.** NRS 209.4239 is hereby amended to read as follows:

2 209.4239 1. *Except as otherwise provided in this section:*

3 (a) The Director or a person designated by the Director may
4 remove an offender from a program of treatment for offenders with
5 substance use or co-occurring disorders or a program of aftercare,
6 temporarily or permanently, for any lawful reason or purpose.

7 ~~[2.]~~ (b) The Director may impose conditions on the
8 participation of an offender in a program of treatment for offenders
9 with substance use or co-occurring disorders or a program of
10 aftercare and may establish sanctions and incentives relating to
11 participation in a program of treatment for offenders with substance
12 use or co-occurring disorders or a program of aftercare.

13 ~~[3.]~~ (c) The provisions of NRS 209.4231 to 209.4244, inclusive,
14 do not create a right on behalf of an offender to participate in a
15 program of treatment for offenders with substance use or co-
16 occurring disorders or a program of aftercare and do not establish a
17 basis for any cause of action against the State or its officers or
18 employees for denial of the ability to participate in or for removal
19 from a program of treatment for offenders with substance use or co-
20 occurring disorders or a program of aftercare.

21 2. *The provisions of this section do not affect the ability of an*
22 *offender who has been diagnosed with an opioid use disorder to*
23 *receive medication-assisted treatment pursuant to section 2 of this*
24 *act.*

25 **Sec. 5.** NRS 209.424 is hereby amended to read as follows:

26 209.424 ~~[Am]~~

27 1. *Except as otherwise provided in this section, an* offender
28 may not participate in a program of treatment for offenders with
29 substance use or co-occurring disorders if the offender:

30 ~~[1.]~~ (a) Was sentenced to death or a term of imprisonment for
31 life without the possibility of parole; or

32 ~~[2.]~~ (b) Is or was eligible to participate in the program of
33 treatment established pursuant to NRS 209.425, whether or not the
34 offender actually participated in or completed that program of
35 treatment.

36 2. *The provisions of this section do not affect the ability of an*
37 *offender who has been diagnosed with an opioid use disorder to*
38 *receive medication-assisted treatment pursuant to section 2 of this*
39 *act.*

40 **Sec. 6.** NRS 209.425 is hereby amended to read as follows:

41 209.425 1. The Director shall, with the approval of the
42 Board, establish a program for the treatment of a person with an
43 alcohol or substance use disorder who is imprisoned for a violation
44 of NRS 484C.110 or 484C.120 that is punishable as a felony
45 pursuant to NRS 484C.400 or 484C.410 or a violation of



1 NRS 484C.130, 484C.430, 488.420, 488.425 or 488.427. The
2 program must include an initial period of intensive mental and
3 physical rehabilitation in a facility of the Department, followed by
4 regular sessions of education, counseling and any other necessary or
5 desirable treatment ~~[]~~, *including, without limitation, medication-*
6 *assisted treatment where required by section 2 of this act.*

7 2. The Director may, upon the request of the offender after the
8 initial period of rehabilitation, allow the offender to earn wages
9 under any other program established by the Department if the
10 offender assigns to the Department any wages the offender earns
11 under such a program. The Director may deduct from the wages of
12 the offender an amount determined by the Director, with the
13 approval of the Board, to:

14 (a) ~~[Offset]~~ *Except as otherwise provided in section 2 of this*
15 *act, offset* the costs, as reflected in the budget of the Department, to
16 maintain the offender in a facility or institution of the Department
17 and in the program of treatment established pursuant to this section;
18 and

19 (b) Meet any existing obligation of the offender for the support
20 of his or her family or restitution to any victim of his or her crime.

21 **Sec. 7.** NRS 209.511 is hereby amended to read as follows:

22 209.511 1. Before an offender is released from prison by
23 expiration of his or her term of sentence, by pardon or parole, the
24 Director may provide mediation services to the offender and the
25 family members and friends of the offender who provide emotional,
26 psychological and financial support to the offender.

27 2. As soon as practicable after an offender is authorized to
28 apply for enrollment in Medicaid pursuant to NRS 422.27487, the
29 Director shall complete the paperwork for the application if the
30 offender may be eligible for Medicaid upon release.

31 3. Not later than 3 months before an offender is projected to be
32 released from prison by expiration of his or her term of sentence, by
33 pardon or parole, the Director may, if space is available, provide an
34 eligible offender with one or more evidence-based or promising
35 practice reentry programs to obtain employment, including, without
36 limitation, any programs which may provide bonding for an
37 offender entering the workplace and any organizations which may
38 provide employment or bonding assistance to such a person.

39 4. When an offender is released from prison by expiration of
40 his or her term of sentence, by pardon or by parole, the Director:

41 (a) May furnish the offender with a sum of money not to exceed
42 \$100, the amount to be based upon the offender's economic need as
43 determined by the Director;

44 (b) Shall give the offender notice of the provisions of chapter
45 179C of NRS and NRS 202.357 and 202.360;



1 (c) Shall require the offender to sign an acknowledgment of the
2 notice required in paragraph (b);

3 (d) Shall give the offender notice of the provisions of NRS
4 179.245 and the provisions of NRS 213.090, 213.155 or 213.157, as
5 applicable;

6 (e) Shall provide the offender with a photo identification card
7 issued by the Department and information and reasonable assistance
8 relating to acquiring a valid driver's license or identification card to
9 enable the offender to obtain employment, if the offender:

10 (1) Requests a photo identification card;

11 (2) Requests such information and assistance and is eligible
12 to acquire a valid driver's license or identification card from the
13 Department of Motor Vehicles; or

14 (3) Is not currently in possession of a photo identification
15 card;

16 (f) Shall provide the offender with clothing suitable for
17 reentering society;

18 (g) Shall provide the offender with the cost of transportation to
19 his or her place of residence anywhere within the continental United
20 States, or to the place of his or her conviction;

21 (h) If appropriate, shall release the offender to a facility for
22 transitional living for released offenders that is licensed pursuant to
23 chapter 449 of NRS;

24 (i) Shall require the offender to submit to at least one test for
25 exposure to the human immunodeficiency virus;

26 (j) If the offender is eligible for Medicare, shall complete
27 enrollment application paperwork for the offender; ~~and~~

28 (k) If the offender was receiving a prescribed medication while
29 in custody, shall ensure that the offender is provided with a 30-day
30 supply of any such prescribed medication ~~;~~ **and**

31 *(l) If the offender was receiving medication-assisted treatment*
32 *for an opioid use disorder, shall ensure compliance with the*
33 *provisions of section 2 of this act.*

34 5. The Director shall not provide an offender with a photo
35 identification card pursuant to paragraph (e) of subsection 4 unless
36 the photo identification card clearly indicates whether the Director:

37 (a) Has verified the full legal name and age of the offender by
38 obtaining an original or certified copy of the documents required by
39 the Department of Motor Vehicles pursuant to NRS 483.290 or
40 483.860, as applicable, furnished as proof of the full legal name and
41 age of an applicant for a driver's license or identification card; or

42 (b) Has not verified the full legal name and age of the offender
43 pursuant to paragraph (a).

44 6. The costs authorized or required in paragraphs (a), (e), (f),
45 (g), (i) and (k) of subsection 4 must be paid out of the appropriate



1 account within the State General Fund for the use of the Department
2 as other claims against the State are paid to the extent that the costs
3 have not been paid in accordance with subsection 5 of NRS 209.221
4 and NRS 209.246.

5 7. The Director is encouraged to work with the Nevada
6 Community Re-Entry Task Force established by the Governor
7 pursuant to executive order, or its successor body, if any, to align
8 statewide strategies for the reentry of offenders into the community
9 and the implementation of those strategies.

10 8. As used in this section:

11 (a) "Eligible offender" means an offender who is:

12 (1) Determined to be eligible for reentry programming based
13 on the Nevada Risk Assessment System instrument, or its successor
14 risk assessment tool; and

15 (2) Enrolled in:

16 (I) Programming services under a reentry program at a
17 correctional facility which has staff designated to provide the
18 services; or

19 (II) A community-based program to assist offenders to
20 reenter the community.

21 (b) "Facility for transitional living for released offenders" has
22 the meaning ascribed to it in NRS 449.0055.

23 (c) "Photo identification card" means a document which
24 includes the name, date of birth and a color picture of the offender.

25 (d) "Promising practice reentry program" means a reentry
26 program that has strong quantitative and qualitative data showing
27 positive outcomes, but does not have sufficient research or
28 replication to support recognition as an evidence-based practice.

29 **Sec. 8.** Chapter 211 of NRS is hereby amended by adding
30 thereto a new section to read as follows:

31 *1. A sheriff, chief of police or town marshal who is*
32 *responsible for a county, city or town jail or detention facility shall*
33 *take reasonable measures to ensure the availability of medication-*
34 *assisted treatment for prisoners who have been diagnosed with an*
35 *opioid use disorder to the same extent and under the same*
36 *conditions as other medical care for prisoners.*

37 *2. A county, city or town jail or detention facility shall not*
38 *discriminate against:*

39 *(a) Treatment described in subsection 1 as compared to other*
40 *forms of treatment for opioid use disorder or abstinence from*
41 *opioids without such treatment; or*

42 *(b) A prisoner because the prisoner is receiving such*
43 *treatment.*



1 3. A sheriff, chief of police or town marshal who is
2 responsible for a county, city or town jail or detention facility
3 shall:

4 (a) Take reasonable measures to ensure the continuation of
5 treatment described in subsection 1 when a prisoner who is
6 receiving such treatment is transferred to another jail or detention
7 facility or the custody of another governmental agency; and

8 (b) Cooperate with the Department of Health and Human
9 Services concerning any measures taken by the Department of
10 Health and Human Services pursuant to subsection 8 of NRS
11 211.140 for the continuation of treatment described in subsection
12 1 for a prisoner who is released from custody.

13 4. As used in this section, "medication-assisted treatment"
14 means treatment for an opioid use disorder using medication
15 approved by the United States Food and Drug Administration for
16 that purpose.

17 **Sec. 9.** NRS 211.140 is hereby amended to read as follows:

18 211.140 1. The sheriff of each county has charge and control
19 over all prisoners committed to his or her care in the respective
20 county jails, and the chiefs of police and town marshals in the
21 several cities and towns throughout this State have charge and
22 control over all prisoners committed to their respective city and
23 town jails and detention facilities.

24 2. A court shall not, at the request of any prisoner in a county,
25 city or town jail, issue an order which affects the conditions of
26 confinement of the prisoner unless, except as otherwise provided in
27 this subsection, the court provides the sheriff, chief of police or
28 town marshal having control over the prisoner with:

29 (a) Sufficient prior notice of the court's intention to enter the
30 order. Notice by the court is not necessary if the prisoner has filed
31 an action with the court challenging his or her conditions of
32 confinement and has served a copy of the action on the sheriff, chief
33 of police or town marshal.

34 (b) An opportunity to be heard on the issue.

35 ➤ As used in this subsection, "conditions of confinement" includes,
36 but is not limited to, a prisoner's access to the law library, privileges
37 regarding visitation and the use of the telephone, the type of meals
38 provided to the prisoner and the provision of medical care in
39 situations which are not emergencies.

40 3. The sheriffs, chiefs of police and town marshals shall see
41 that the prisoners under their care are kept at labor for reasonable
42 amounts of time within the jail or detention facility, on public works
43 in the county, city or town, or as part of a program of release for
44 work established pursuant to NRS 211.120 or 211.171 to 211.200,
45 inclusive.



1 4. The sheriff, chief of police or town marshal shall arrange for
2 the administration of medical care required by prisoners while in his
3 or her custody. The county, city or town shall pay the cost of
4 appropriate medical:

5 (a) Treatment provided to a prisoner while in custody for
6 injuries incurred by a prisoner while the prisoner is in custody and
7 for injuries incurred during the prisoner's arrest for commission of a
8 public offense if the prisoner is not convicted of that offense;

9 (b) Treatment provided to a prisoner while in custody for any
10 infectious, contagious or communicable disease which the prisoner
11 contracts while the prisoner is in custody; and

12 (c) Examinations required by law or by court order conducted
13 while the prisoner is in custody unless the order otherwise provides.

14 5. A prisoner shall pay the cost of medical treatment for:

15 (a) Injuries incurred by the prisoner during his or her
16 commission of a public offense or for injuries incurred during his or
17 her arrest for commission of a public offense if the prisoner is
18 convicted of that offense;

19 (b) Injuries or illnesses which existed before the prisoner was
20 taken into custody;

21 (c) Self-inflicted injuries; and

22 (d) Except treatment provided pursuant to subsection 4, any
23 other injury or illness incurred by the prisoner.

24 6. A medical facility furnishing treatment pursuant to
25 subsection 5 shall attempt to collect the cost of the treatment from
26 the prisoner or the prisoner's insurance carrier. If the facility is
27 unable to collect the cost and certifies to the appropriate board of
28 county commissioners that it is unable to collect the cost of the
29 medical treatment, the board of county commissioners shall pay the
30 cost of the medical treatment.

31 7. A sheriff, chief of police or town marshal who arranges for
32 the administration of medical care pursuant to this section may
33 attempt to collect from the prisoner or the insurance carrier of the
34 prisoner the cost of arranging for the administration of medical care
35 including the cost of any transportation of the prisoner for the
36 purpose of medical care. The prisoner shall obey the requests of, and
37 fully cooperate with the sheriff, chief of police or town marshal in
38 collecting the costs from the prisoner or the prisoner's insurance
39 carrier.

40 8. While a prisoner is in custody, a sheriff, chief of police or
41 town marshal, in collaboration with the Department of Health and
42 Human Services and the various divisions thereof, for the purpose of
43 maintaining continuity of care, shall arrange for the coordination of
44 the care for treatment of mental health and substance use disorders
45 provided to the prisoner by all providers of such care in the county,



1 city or town jail or detention facility. After a prisoner is released
2 from custody:

3 (a) The Department and the various divisions thereof shall
4 arrange for the coordination of the care for treatment of mental
5 health and substance use disorders provided to the prisoner ~~[]~~ ,
6 *including, without limitation, by taking reasonable measures to*
7 *ensure the continuation of medication-assisted treatment provided*
8 *pursuant to section 8 of this act.*

9 (b) ~~[The]~~ *Except to the extent provided in section 8 of this act,*
10 *the* sheriff, chief of police or town marshal is no longer responsible
11 for arranging the coordination of such care.

12 9. Each sheriff described in subsection 8, or his or her
13 representative, and the Director of the Department of Health and
14 Human Services, or his or her representative, shall, at the request of
15 the Joint Interim Standing Committee on Health and Human
16 Services, appear before the Committee during the legislative interim
17 to report on the collaboration and coordination provided pursuant to
18 subsection 8.

19 10. Treatment of mental health and substance use disorders
20 provided pursuant to subsection 8 *must, to the extent required by*
21 *section 8 of this act, and* may , *in all other circumstances,* include
22 any medication that has been:

23 (a) Approved by the United States Food and Drug
24 Administration; and

25 (b) Prescribed by a treating physician as medically necessary for
26 use by the prisoner to address issues relating to mental health or a
27 substance use disorder.

28 **Sec. 10.** Chapter 630 of NRS is hereby amended by adding
29 thereto a new section to read as follows:

30 1. *Upon diagnosing a patient as having an opioid use*
31 *disorder, a physician or physician assistant shall counsel and*
32 *provide information to the patient concerning evidence-based*
33 *treatment for opioid use disorders, including, without limitation,*
34 *medication-assisted treatment.*

35 2. *If the patient requests medication-assisted treatment, the*
36 *physician or physician assistant shall:*

37 (a) *If the physician or physician assistant is authorized under*
38 *federal and state law to issue such a prescription, offer to*
39 *prescribe an appropriate medication; or*

40 (b) *If the physician or physician assistant is not authorized*
41 *under federal and state law to prescribe an appropriate*
42 *medication, refer the patient to a physician, osteopathic physician,*
43 *physician assistant licensed pursuant to this chapter or chapter*
44 *633 of NRS or advanced practice registered nurse who is*
45 *authorized to issue the prescription.*



1 3. *As used in this section, “medication-assisted treatment”*
2 *means treatment for an opioid use disorder using medication*
3 *approved by the United States Food and Drug Administration for*
4 *that purpose.*

5 **Sec. 11.** Chapter 632 of NRS is hereby amended by adding
6 thereto a new section to read as follows:

7 1. *Upon diagnosing a patient as having an opioid use*
8 *disorder, an advanced practice registered nurse shall counsel and*
9 *provide information to the patient concerning evidence-based*
10 *treatment for opioid use disorders, including, without limitation,*
11 *medication-assisted treatment.*

12 2. *If the patient requests medication-assisted treatment, the*
13 *advanced practice registered nurse shall:*

14 (a) *If the advanced practice registered nurse is authorized*
15 *under federal and state law to issue such a prescription, offer to*
16 *prescribe an appropriate medication; or*

17 (b) *If the advanced practice registered nurse is not authorized*
18 *under federal and state law to prescribe an appropriate*
19 *medication, refer the patient to a physician, osteopathic physician,*
20 *physician assistant licensed pursuant to chapter 630 or 633 of*
21 *NRS or advanced practice registered nurse who is authorized to*
22 *issue the prescription.*

23 3. *As used in this section, “medication-assisted treatment”*
24 *means treatment for an opioid use disorder using medication*
25 *approved by the United States Food and Drug Administration for*
26 *that purpose.*

27 **Sec. 12.** Chapter 633 of NRS is hereby amended by adding
28 thereto a new section to read as follows:

29 1. *Upon diagnosing a patient as having an opioid use*
30 *disorder, an osteopathic physician or physician assistant shall*
31 *counsel and provide information to the patient concerning*
32 *evidence-based treatment for opioid use disorders, including,*
33 *without limitation, medication-assisted treatment.*

34 2. *If the patient requests medication-assisted treatment, the*
35 *osteopathic physician or physician assistant shall:*

36 (a) *If the osteopathic physician or physician assistant is*
37 *authorized under federal and state law to issue such a*
38 *prescription, offer to prescribe an appropriate medication; or*

39 (b) *If the osteopathic physician or physician assistant is not*
40 *authorized under federal and state law to prescribe an appropriate*
41 *medication, refer the patient to a physician, osteopathic physician,*
42 *physician assistant licensed pursuant to this chapter or chapter*
43 *630 of NRS or advanced practice registered nurse who is*
44 *authorized to issue the prescription.*



1 3. *As used in this section, “medication-assisted treatment”*
2 *means treatment for an opioid use disorder using medication*
3 *approved by the United States Food and Drug Administration for*
4 *that purpose.*

5 **Sec. 13.** Chapter 641 of NRS is hereby amended by adding
6 thereto a new section to read as follows:

7 1. *Upon diagnosing a patient as having an opioid use*
8 *disorder, a psychologist shall counsel and provide information to*
9 *the patient concerning evidence-based treatment for opioid use*
10 *disorders, including, without limitation, medication-assisted*
11 *treatment.*

12 2. *If the patient requests medication-assisted treatment, the*
13 *psychologist shall refer the patient to a physician, osteopathic*
14 *physician, physician assistant licensed pursuant to chapter 630 or*
15 *633 of NRS or advanced practice registered nurse who is*
16 *authorized under federal and state law to prescribe an appropriate*
17 *medication.*

18 3. *As used in this section, “medication-assisted treatment”*
19 *means treatment for an opioid use disorder using medication*
20 *approved by the United States Food and Drug Administration for*
21 *that purpose.*

22 **Sec. 14.** Chapter 641A of NRS is hereby amended by adding
23 thereto a new section to read as follows:

24 1. *Upon diagnosing a client as having an opioid use disorder,*
25 *a marriage and family therapist or clinical professional counselor*
26 *shall counsel and provide information to the client concerning*
27 *evidence-based treatment for opioid use disorders, including,*
28 *without limitation, medication-assisted treatment.*

29 2. *If the client requests medication-assisted treatment, the*
30 *marriage and family therapist or clinical professional counselor*
31 *shall refer the client to a physician, osteopathic physician,*
32 *physician assistant licensed pursuant to chapter 630 or 633 of*
33 *NRS or advanced practice registered nurse who is authorized*
34 *under federal and state law to prescribe an appropriate*
35 *medication.*

36 3. *As used in this section, “medication-assisted treatment”*
37 *means treatment for an opioid use disorder using medication*
38 *approved by the United States Food and Drug Administration for*
39 *that purpose.*

40 **Sec. 15.** Chapter 641B of NRS is hereby amended by adding
41 thereto a new section to read as follows:

42 1. *Upon diagnosing a client as having an opioid use disorder,*
43 *a clinical social worker shall counsel and provide information to*
44 *the client concerning evidence-based treatment for opioid use*



1 *disorders, including, without limitation, medication-assisted*
2 *treatment.*

3 *2. If the client requests medication-assisted treatment, the*
4 *clinical social worker shall refer the client to a physician,*
5 *osteopathic physician, physician assistant licensed pursuant to*
6 *chapter 630 or 633 of NRS or advanced practice registered nurse*
7 *who is authorized under federal and state law to prescribe an*
8 *appropriate medication.*

9 *3. As used in this section, “medication-assisted treatment”*
10 *means treatment for an opioid use disorder using medication*
11 *approved by the United States Food and Drug Administration for*
12 *that purpose.*

13 **Sec. 16.** Chapter 641C of NRS is hereby amended by adding
14 thereto a new section to read as follows:

15 *1. Upon diagnosing a client as having an opioid use disorder,*
16 *an alcohol and drug counselor, clinical alcohol and drug*
17 *counselor or problem gambling counselor shall counsel and*
18 *provide information to the client concerning evidence-based*
19 *treatment for opioid use disorders, including, without limitation,*
20 *medication-assisted treatment.*

21 *2. If the client requests medication-assisted treatment, the*
22 *alcohol and drug counselor, clinical alcohol and drug counselor*
23 *or problem gambling counselor shall refer the client to a*
24 *physician, osteopathic physician, physician assistant licensed*
25 *pursuant to chapter 630 or 633 of NRS or advanced practice*
26 *registered nurse who is authorized under federal and state law to*
27 *prescribe an appropriate medication.*

28 *3. As used in this section, “medication-assisted treatment”*
29 *means treatment for an opioid use disorder using medication*
30 *approved by the United States Food and Drug Administration for*
31 *that purpose.*

32 **Sec. 17.** 1. Notwithstanding the provisions of subsection 2 of
33 NRS 458.103, as amended by section 1 of this act, a treatment
34 provider, provider of health care or program for alcohol or substance
35 use disorders is not, unless otherwise required by federal law,
36 required to terminate services to which the provisions of that
37 subsection would otherwise apply to a person who is receiving such
38 services on or before October 1, 2023 from the treatment provider,
39 provider of health care or program in order to provide such services
40 to a person who would otherwise receive priority under that
41 subsection.

42 2. The provisions of subsection 2 of NRS 458.103, as amended
43 by section 1 of this act, do not apply to treatment for an alcohol or
44 other substance use disorder provided under any grant, contract or
45 other agreement accepted or entered into on or before October 1,



1 2023, but do apply to any such treatment provided under such a
2 grant, contract or agreement that is renewed or extended.

3 3. As used in this section:

4 (a) "Program for alcohol or other substance use disorders" has
5 the meaning ascribed to it in NRS 458.010.

6 (b) "Provider of health care" has the meaning ascribed to it in
7 NRS 629.031.

8 (c) "Treatment provider" has the meaning ascribed to it in
9 NRS 458.010.

10 **Sec. 18.** The provisions of NRS 354.599 do not apply to any
11 additional expenses of a local government that are related to the
12 provisions of this act.

