Mental Health

2021 Legislative Bill Summary Report

Prepared by: Te'a Wiley, MSPH School of Public Health Intern

M. Amaris Knight, PhD, MEd Research Analyst, NICRP

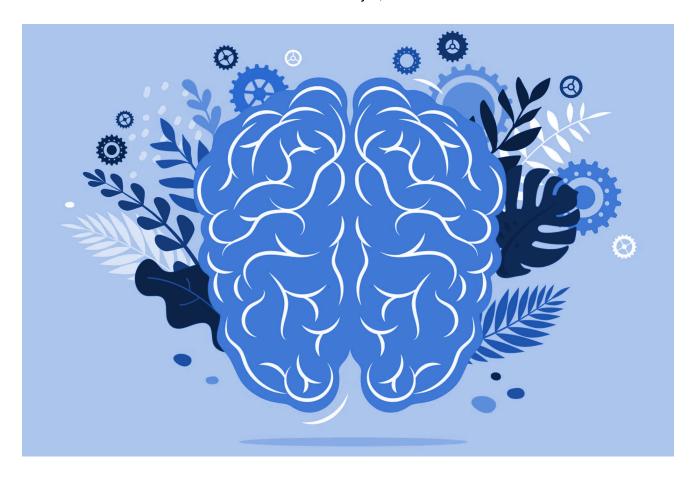




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Introduction

This report includes a selection of legislative bills passed during Nevada's 81st Session (2021) that specifically address mental health. The bills reviewed in this document are separated into four categories to more clearly define the main sectors in which the policies proposed would be enacted. These include Education, Health, Safety, and General. For each bill included in this review, there is a brief summary of the bill text, discussion points on the bill's potential impact on mental health, and discussion points on the bill's potential impact on suicide prevention.

This legislative review of select bills that relate to mental health provides a brief insight into how these new policies will impact the well-being of individuals across Nevada. In addition, by examining these bills from the perspective of suicide prevention, more awareness will be brought to how these bills can indirectly have a positive impact on suicide prevention efforts in Nevada.





Education



Senate Bill 44

Revises provisions for behavioral health professionals in relation to licensing requirements

Bill Summary

This bill revises provisions relating to behavioral health professionals, authorizing the issuance of a nonrenewable provisional license or certificate to engage in various professions relating to behavioral health to an applicant who meets certain requirements. It will also be required that master social workers are issued a license if they possess a master's or doctoral degree in social work and pass an examination. Master social workers or independent social workers will have to engage in certain activities as part of an approved internship program to complete the requirements for licensure. In addition, licensing boards that regulate such professions are required to report certain information concerning investigations of misconduct and applications for licensure or certification and submit those reports to each regional behavioral health policy board. The Legislative Committee on Health Care will be required to study the processes for licensure or certification in professions regulated by those licensing boards and identify barriers to licensure or certification, as well as implement strategies to eliminate each barrier.

Impact on Mental Health

- This bill will make it easier for behavioral health professionals to engage in the task of improving behavioral health in Nevada through the issuance of a nonrenewable license.
- Master social workers will be required to have more education in relation to behavioral health, which will help workers to adequately address issues they may encounter when trying to help individuals with mental health issues.

- The issuance of a nonrenewable license will allow behavioral health professionals to focus more of their time on the task of improving behavioral health in Nevada
- This will allow professionals to focus more time on helping patients who may be going through a stressful situation due to their mental health, which can in turn help to decrease the likelihood of a patient resorting to suicide in response.
- Master social workers that are more educated in behavioral health will be able to adequately address behavioral and emotional issues, which can decrease the risk of an individual going into crisis and attempting suicide.



Revises provisions relating to pupil to personnel ratios and education requirements for school counselors, psychologists, and social workers

Bill Summary

This bill revises provisions relating to education, requiring the boards of trustees of school districts in a county whose population is 100,000 or more to develop a plan to improve certain pupil to personnel ratios. The plan must include strategies to recruit and retain specialized instructional support personnel and annual targets. The boards of trustees of these school districts must submit an annual report on the plan to the Department of Education. Section 1 requires the Department to submit a compilation of the reports it receives to: (1) the Governor; (2) in odd-numbered years, the Director of the Legislative Counsel Bureau for transmittal to the Senate and Assembly Standing Committees on Education; (3) in even-numbered years, the Legislative Committee on Education; and (4) the State Board. Section 2 of this bill requires each school counselor and school psychologist to complete continuing education as determined by the Commission on Professional Standards in Education and requires the Commission to adopt regulations relating to the continuing education of school counselors and school psychologists. Section 2 also requires each school social worker to complete continuing education as determined by the Board of Examiners for Social Workers and requires the Board to adopt regulations relating to the continuing education of school social workers.

Impact on Mental Health

- Improving pupil to personnel ratios will allow for school staff to focus their attention on a smaller number of students, which may help in monitoring students' mental health and recognizing changes in behavior.
- More education requirements will be required of school counselors, school
 psychologists, and school social workers, which will help to improve the mental health of
 the student body throughout Nevada by providing them with adequate service.

- Improving pupil to personnel ratios will allow for school staff to more closely monitor students' mental health and recognize at an earlier stage when a student may potentially be going through a crisis and is at risk for suicide.
- Having more education requirements for school counselors, school psychologists, and school social workers will provide the student body with well-trained professionals that can help them to resolve their issues and de-escalate situations that if unresolved may lead to a suicide attempt.



Revises provisions relating to plans for responses to crises, emergencies and suicides by schools

Bill Summary

This bill changes the name of a development committee for a school district or charter school and private school that develops a plan for responding to a crisis, emergency or suicide to a crisis committee. It also requires a crisis committee to include at least one representative of the county or district board of health. In addition, members who are parents/legal guardians of a pupil are prohibited from being an employee at the school district or charter school/private school the pupil attends. Section 4 of this bill requires any reviews and updates to the plan to be posted on the school website. The committee will no longer be required to consult with certain local emergency management and social services agencies in order to conduct these reviews. The committee will be required to include specific information relating to an epidemic in the plan. Section 10 of this bill also requires that the governing body of the school designate a school safety specialist and that the specialist provides employees of certain public safety agencies with a blueprint of the school at least once every 3 years.

Impact on Mental Health

 The inclusion of at least one representative of the county or district board of health will help the crisis committee receive accurate and up-to-date information on how to respond to a crisis situation in relation to the mental health of the student body.

Impact on Suicide Prevention

 The inclusion of at least one representative of the county or district board of health will help the crisis committee receive accurate and up-to-date information on how to respond to a crisis situation associated with suicide and/or address risk factors that may lead to suicide.



Provides mental health resources on identification cards for students

Bill Summary

This bill requires that the telephone number and text messaging option for the National Suicide Prevention Lifeline be provided on an identification card issued to a pupil or student. This information can be shared with the SafeVoice Program, which generally enables anonymous reporting of information about dangerous, violent or unlawful activity at public schools, to the extent authorized by law and the policies of the National Suicide Prevention Lifeline. These requirements will also apply to universities, state colleges or community colleges within the Nevada System of Higher Education.

Impact on Mental Health

 This bill will provide students with easily accessible information on the National Suicide Prevention Lifeline, which can help students get the help that they need to address issues they may have concerning their mental health.

Impact on Suicide Prevention

 This bill will provide students with easily accessible information on the National Suicide Prevention Lifeline, which can help students get the help that they need to de-escalate situations that if left unchecked, could potentially lead to a suicide attempt.



Revises provisions relating to the education of a child with an emotional disturbance

Bill Summary

This bill requires a psychiatric hospital to which a child with an emotional disturbance is admitted to develop a plan for the continued education of the child in consultation with the public or private school in which the child was enrolled at the time of admission, the school district(s) that provide services to the child at the time of admission, the child welfare service agency, and any person responsible for the education of the child. It is required that the school district(s) monitor the child's progress while the child is admitted to the facility and participate in the discharge planning for transitioning the child into a school or any other educational setting. Prior to admission, those involved in the education plan process must hold a meeting to consider the appropriateness of a residential placement. Hospital admission must also be taken into consideration when determining if the child should remain in his or her school of origin once discharged.

Impact on Mental Health

Making it a requirement for the psychiatric hospital and the school district to develop a
plan for continued education and transition back to school one discharged will prevent
children with emotional disturbances from falling behind educationally in comparison to
their peers, which has the potential to negatively impact a child's mental health.

Impact on Suicide Prevention

 Preventing children with emotional disturbances from falling behind educationally will help them to keep up with their peers, which will help them to feel included in their social circles, thus reducing the chances of being socially isolated which could increase the risk of suicide among these children.





Health & Health Care



Assembly Bill 216

Revises provisions relating to Medicaid coverage among individuals with cognitive impairments

Bill Summary

Existing law requires the Department of Health and Human Services to develop and administer a State Plan for Medicaid which includes, without limitation, a list of specific medical services required to be provided to Medicaid recipients. This bill requires Medicaid to include coverage for certain cognitive assessment and care planning services to those with cognitive impairments. The term "cognitive impairment" Is defined as a deficiency in: (a) short-term or long-term memory; (b) orientation as to person, place and time; or (c) deductive or abstract reasoning. This provision will be administered in the same manner as other provisions of existing law governing the State Plan for Medicaid.

Impact on Mental Health

Requiring Medicaid to include coverage for individuals with cognitive impairments will
widen the range of people that are able to access and receive care to address mental
health issues related to these impairments.

Impact on Suicide Prevention

Requiring Medicaid to include coverage for individuals with cognitive impairments will
give more individuals with these conditions access to the mental health treatment that
they need at an earlier stage, which can in return reduce the risk factors that lead to
suicide.



Revises provisions relating to insurance coverage for individuals with gender dysphoria

Bill Summary

This bill requires certain public and private policies of health insurance and health care plans, including Medicaid, to cover the treatment of conditions relating to gender dysphoria, gender incongruence and other disorders of sexual development. Such coverage must include, without limitation, coverage of medically necessary psychosocial and surgical intervention and any other medically necessary treatment for such disorders provided by: (a) endocrinologists; (b) pediatric endocrinologists; (c) social workers; (d) psychiatrists; (e) psychologists; (f) gynecologists; (g) plastic surgeons; and (h) any other providers of medically necessary services for the treatment of gender dysphoria, gender incongruence and other disorders of sexual development. These policies and plans must cover surgical treatment for conditions relating to gender dysphoria, gender incongruence and other disorders of sexual development for persons who are less than 17 years of age.

Impact on Mental Health

- This bill will provide insurance coverage for treatment for those (both adult and youth) with gender dysphoria, gender incongruence, and other sexual development disorders.
- Being able to receive treatment for these conditions will help individuals feel more comfortable in their own bodies, which would overall improve mental health among this demographic.

- This bill will help provide individuals with gender dysphoria, gender incongruence, and other sexual development disorders easier access to the treatment they need to help address concerns they may have with their own body.
- Addressing these concerns will help individuals to feel confident and self-assured with their gender identity, which will in return reduce the risk factors that may lead to suicide among this demographic.



Revises provisions for training requirements for providers in relation to substance use disorders

Bill Summary

This bill defines the term "screening, brief intervention and referral to treatment approach" to mean an evidence-based method of delivering early intervention and treatment to persons who have or are at risk of developing a substance use disorder. Under this bill, providers will be required to complete a certain number of hours of training in the screening, brief intervention and referral to treatment approach to substance use disorder within the first 2 years of licensure. This training can be used to satisfy certain continuing education requirements. Providers are required to complete at least 2 hours of such training before renewing his or her license by January 1, 2024. Providers can also use a federal registration to dispense narcotic drugs for maintenance treatment or detoxification treatment to satisfy 4 hours of any applicable continuing education requirement.

Impact on Mental Health

- This bill makes additions to the amount of training required for providers in relation to screening, intervening, and providing treatment to individuals with substance use disorders.
- This bill will better equip providers with the tools that they need to adequately address
 the issues these individuals are facing, which can in return reduce stress factors and
 improve mental health among these individuals.

Impact on Suicide Prevention

Reducing stress factors related to substance use disorders can help to allow individuals
with these disorders to think more clearly, which can help them to cope and respond
better to high-stress situations that would otherwise overwhelm them and increase the
risk fo suicide among this demographic.



Revises provisions relating to the regulation of providers of health care

Bill Summary

Existing law provides for the licensure, certification or registration and regulation of various providers of healthcare, including the investigation of alleged misconduct by such a provider of health care and the imposition of disciplinary action against such a provider of health care. This bill requires certain investigations relating to alleged misconduct of a health care provider that have been determined to have not committed a violation to have their investigation be recorded as "a review and evaluation". The bill also clarifies that an investigation recorded as a review and evaluation is not an investigation for purposes related to employment, professional licensure or credentialing, education or liability or health insurance.

Impact on Mental Health

 This bill will prevent healthcare providers that have gone under investigation and have been deemed innocent from having the investigation negatively impact their career. This will help to keep more health care providers employed and licensed, which will prevent individuals dealing with mental health issues from having less options to choose from when deciding which provider they would like to go to to seek help.

Impact on Suicide Prevention

This bill will prevent the reduction in the number of healthcare providers due to certain
investigations, in particular, health care providers that address issues related to suicide.
Preventing this issue from occurring will also prevent those at risk for suicide from
having limited access to providers that can provide them with the treatment that they
need.



Makes various changes relating to persons with autism spectrum disorders

Bill Summary

This bill requires the Department of Health and Human Services to establish reimbursement rates provided on a fee-for-service basis under Medicaid once every two years for behavior analysts, assistant behavior analysts and registered behavior technicians that are comparable to reimbursement rates paid by Medicaid programs in other states for such providers. The Department must also establish reasonable limits on the number of hours that such a provider is authorized to bill for services provided to a Medicaid recipient in a 24-hour period. The Division of Health Care Financing and Policy must provide training to such providers concerning such limits and annually report either to the Legislature or the Legislative Committee on Healthcare about the provision of services to Medicaid recipients who have been diagnosed with an autism spectrum disorder. The Autism Treatment Assistance Program within the Aging and Disability Services Division of the Department will be required to: (1) publish certain information on the program's website to assist persons in obtaining services for autism spectrum disorders; and (2) when there is a waiting list for services, use a risk assessment tool to assess and identify persons on the waiting list with higher needs.

Impact on Mental Health

- This bill will increase awareness and access of services for individuals with autism spectrum disorders through providing info on these services through a website, which can in return help these individuals get treatment that will help them address certain mental health issues that may be associated with autism spectrum disorders.
- Priority will also be given to individuals with higher needs when put on a waiting list for these services, which will help those dealing with more serious mental health issues to have their concerns addressed first.

- Bringing more awareness and access to these services can help more individuals with autism spectrum disorders to get the treatment that they need at an earlier stage.
 Addressing issues concerning mental health at an earlier stage can help professionals to intervene certain situations that if left unresolved, could lead to a suicide attempt.
- Giving priority to individuals with higher needs when put on a waiting list will help individuals with more serious mental health issues to get the immediate care that they need instead of having to wait for a certain service and potentially having the situation escalate into one where a suicide attempt occurs before the individual is able to receive treatment.



Requires certain mental health professionals to complete continuing education concerning cultural competency and diversity, equity and inclusion

Bill Summary

This bill require a psychiatrist, physician assistant practicing under the supervision of a psychiatrist, nurse, marriage and family therapist, clinical professional counselor, social worker, clinical alcohol and drug counselor, alcohol and drug counselor, problem gambling counselor or behavior analyst to complete a certain number of hours of instruction concerning cultural competency and diversity, equity and inclusion as part of that continuing education. The bill requires the training to address persons from different cultural backgrounds, including: (1) persons from various gender, racial and ethnic backgrounds; (2) persons from various religious backgrounds; (3) lesbian, gay, bisexual, transgender and questioning persons; (4) children and senior citizens; (5) veterans; (6) persons with mental illness; (7) persons with an intellectual disability, developmental disability or physical disability; and (8) other populations designated by the applicable licensing Board.

Impact on Mental Health

 This bill will improve the cultural competency of mental health professionals which will help these professionals provide adequate and accurate care for individuals across a range of different cultural backgrounds.

Impact on Suicide Prevention

Having a mental health professional who is properly trained in communicating and
understanding those from a range of different cultural backgrounds will help individuals
feel more comfortable speaking out on their issues and seeking the help that they need,
which can in return help to reduce certain risk factors that lead to suicide.



Creates committee to address substance misuse and substance use disorders in Nevada

Bill Summary

This bill creates the Statewide Substance Use Response Working Group within the Office of the Attorney General. The Working Group will review various aspects of substance misuse and substance use disorders and programs and activities to combat substance misuse and substance use disorders in Nevada. The Department of Health and Human Services is required to annually report to the Working Group concerning the use of state and local money to address substance misuse and substance use disorders. The Working Group will use this information to study, evaluate and make recommendations concerning the use of that money. The Working Group will then annually submit a report of its recommendations to the Governor, the Attorney General, the Legislature and certain other entities.

Impact on Mental Health

- This bill will create a committee that will focus its efforts solely on addressing the issue of substance misuse and substance use disorders.
- Providing concentrated effort on this issue through programs and activities may help to improve the mental health and overall well-being of individuals with substance misuse and substance use disorders.

- Providing concentrated effort on this issue through programs and activities will provide individuals with multiple ways to improve their mental health.
- Gaining tools and knowledge that will help them cope with their situation can reduce the stress factors that can increase the risk of suicide among this demographic.



Makes various changes governing the provision of mental and behavioral health services

Bill Summary

This bill requires that an insurer or other third-party payer (other than Medicaid) must cover behavioral health services provided by standard telephone. These services should be covered in the same amount as if those services were provided in person or by other means. Under this bill, the Director of the Department of Health and Human Services will be required to: (1) apply for any waiver of federal law necessary to receive federal financial participation to include in Medicaid coverage for behavioral health services provided by standard telephone; and (2) include such coverage in Medicaid if a waiver is obtained or federal financial participation is otherwise available. This bill also prohibits health insurers from issuing coverage dependent on the geographic location of the home. Health maintenance organizations who do not comply with the requirement to provide behavioral health services provided by standard telephone will have their certificate of authority suspended or revoked by the Commissioner of Insurance. The Commissioner would also be authorized to take such action against other health insurers who fail to comply with the requirements of this bill.

Impact on Mental Health

- This bill will require that telehealth services that provide behavioral health services are to be covered through insurance.
- This will increase the amount of access individuals have to these services, which will provide more individuals with the service that they need to improve their mental health.

- Having easier access to behavioral health services will allow for more individuals to seek treatment at an earlier stage rather than in times of crisis.
- Getting treatment at an earlier stage will help individuals avoid ending up in a crisis situation in the first place and reduce the risk of having a situation escalate to the point where a suicide attempt is made.



Revises provisions relating to the certification of peer recovery support specialists and peer recovery support specialist supervisors

Bill Summary

Revises provisions relating to behavioral health, providing for the certification of peer recovery support specialists and supervisors by the Nevada Certification Board, or its successor organization. Those who do not get this certification will receive a penalty. Some specialists and specialist supervisors can provide services to adults for compensation as an intern under certain circumstances. Those who are not able to meet any of these requirements must be certified by the Division instead. This (1) allows the State Board of Health to adopt regulations governing peer recovery support services; and (2) authorizes the Board to establish by regulation exemptions from the requirement to be certified by the Division. This bill also prohibits the employment or retention as an independent contractor of a person for the purpose of providing or supervising the provision of peer recovery support services to minors if the person has been convicted of certain crimes or found to have engaged in certain conduct. Under Sections 17, 21 and 28 of this bill, a certified peer recovery support specialist or supervisor must report: (1) the abuse, neglect, exploitation, isolation or abandonment of an older person or vulnerable person; (2) the abuse or neglect of a child; and (3) violations of statutes or regulations governing nursing. This information must be submitted to the Division if the person involved is another specialist or supervisor. The Department of Education will also be required to publish a list of evidence-based curricula and programs concerning the prevention of substance misuse and substance use disorder. A report describing any curriculum or program must be submitted to the Legislative Committee on Education. The participation of public schools will be required in a biennial survey to collect data concerning youth risk behavior of pupils enrolled in certain grades in a public school. Students and a parent/guardian of an unemancipated minor are allowed to refuse participation.

Impact on Mental Health

- This bill will require professionals whose focus is peer recovery support to have certifications and report when a professional may be abusing a patient or violating certain regulations.
- This will help ensure that only the most qualified people will be helping individuals with substance use disorders, which will create a safer work environment and help improve the mental state of individuals with substance use disorders who are receiving care.

Impact on Suicide Prevention

Creating a safer environment for individuals with substance use disorders who are
receiving care will reduce the risk of these individuals feeling mistreated and committing
suicide due to neglect or harm caused by a professional.



Revising provisions governing the use of chemical restraints on persons with disabilities

Bill Summary

Existing law defines the term "chemical restraint" to mean the administration of drugs for the purpose of controlling an acute/episodic aggressive behavior when alternative intervention techniques have failed to control the behavior. This bill establishes procedures for placing a person on and releasing a person from a mental health crisis hold, allowing for the process of the detention of a person on a hold and the process of emergency admission of such a person to be separate. A person placed on a hold must be released within 72 hours after initiation unless: (1) a petition is filed for the involuntary court-ordered admission of the person; or (2) the admission becomes voluntary. This bill authorizes a court to order a person to receive assisted outpatient treatment if: (1) at the conclusion of the proceedings, there is clear evidence that the person to be treated meets the criteria for the initiation or renewal of such treatment; and (2) a psychiatric mental health professional is able to treat the person in the county where the person to receive the treatment resides. If the person refuses treatment, this bill authorizes the person responsible for providing the outpatient treatment to submit a petition for a court to order that the person be taken into custody to determine whether they are in a mental health crisis. The bill also requires a person who submits a petition for involuntary court-ordered admission to notify the court if the subject of the petition is currently admitted to a mental health facility or hospital and is transferred to another mental health facility or hospital. Once a person is involuntarily admitted to a mental health facility: (1) the admitting court is prohibited from transferring the case; and (2) the facility is required to notify the court if the person is transferred. It is prohibited to transfer a consumer who has been admitted to a mental health facility or required to receive assisted outpatient treatment to another facility or provider of treatment, as applicable, unless arrangements relating to the costs of treatment are made between the facility or provider and the consumer or the person who requested the admission or treatment.

Impact on Mental Health

- This bill may require that an individual stay in a mental health crisis hold longer than usually required and receive treatment if said individual meets certain requirements.
- This can help to provide individuals who need extra care with the required attention that they need to get through a mental health crisis.

Impact on Suicide Prevention

Providing extra care beyond what is typically provided to individuals on a mental health
crisis hold can help these individuals have their issues properly addressed instead of just
temporarily fixed, which can reduce the chances of another crisis occurring and
ultimately reduce the risk of suicide among these individuals.



Revises provisions relating to mental health services for children

Bill Summary

This bill requires the administrative officer or staff of an inpatient psychiatric treatment facility to ask the person or entity having legal custody of a child with an emotional disturbance who is subject to the jurisdiction of a juvenile court if the child has a treating provider of healthcare when admitting the child. If the child has a treating provider of healthcare, the facility must make an effort to consult with the provider concerning the care to be provided to the child. If the child is admitted, the facility must: (1) ask the legal custodian of the child for consent and make a reasonable attempt to obtain consent from the child to allow the facility to coordinate the care of the child with the treating provider of health care on an ongoing basis; and (2) make a reasonable attempt to coordinate with all treating providers of health care of the child concerning a plan to discharge the child from the facility.

Impact on Mental Health

 This bill improves the amount of attention and care provided to a child with an emotional disturbance receiving treatment from mental health services, which can in return improve the child's mental state and overall well-being.

Impact on Suicide Prevention

Providing more attention a care to children receiving treatment related to their mental
health will help healthcare professionals recognize negative changes in behavior at an
earlier stage that if left unchecked could potentially escalate into a crisis situation and
increase the risk of suicide among children with emotional disturbances.



Revises provisions governing Medicaid coverage of certain behavioral health services

Bill Summary

This bill requires the Department of Health and Human Services to apply for a waiver to receive federal funding for coverage of the treatment of the substance use disorder of a person in an institution for mental diseases. The Department is also authorized to apply for a waiver to receive federal funding for coverage of the treatment of an adult with a serious mental illness or a child with a serious emotional disturbance in an institution for mental diseases. An "adult with a serious mental illness" is defined as a person who is at least 18 years of age and has been diagnosed within the immediately preceding 12 months as having a mental, behavioral or emotional disorder. A "child with a serious emotional disturbance" is defined as a person who is less than 18 years of age and has been diagnosed within the immediately preceding 12 months as having a mental, behavioral or emotional disorder.

Impact on Mental Health

 This bill will increase the Medicaid coverage among those with certain issues related to mental health, which will increase the amount of individuals able to use and receive care for their mental health.

- Making certain behavioral health services more easily accessible will encourage more individuals to seek professional help for their mental health issues at an earlier stage prior to a crisis event.
- Seeking treatment at an earlier stage will in return help to reduce risk factors associated with suicide among these individuals.



Revises provisions revising certain requirements for an endorsement as a crisis stabilization center

Bill Summary

This bill authorizes the Division of Public and Behavioral Health of the Department of Health and Human Services to issue an endorsement to the holder of a license to operate any hospital that meets the requirements for the endorsement. This bill also expands the list of authorized accrediting organizations and exempts rural hospitals from the accreditation requirement for an endorsement as a crisis stabilization center. Under existing law, the Department of Health & Human Services is required to take any action necessary to ensure that crisis stabilization services provided at a psychiatric hospital that holds an endorsement as a crisis stabilization center are reimbursable under Medicaid. Section 2 of this bill expands this requirement to include crisis stabilization services provided at any hospital that holds an endorsement as a crisis stabilization center.

Impact on Mental Health

- This bill expands the list of who is allowed to endorse a crisis stabilization center and crisis stabilization services required of hospitals who hold an endorsement as a crisis stabilization center.
- This will increase the amount of care available to those who are going through a mental health crisis.

Impact on Suicide Prevention

Having more crisis stabilization centers available will allow more individuals to receive
the care that they need to de-escalate situations that if left unresolved, may lead to a
suicide attempt.



Revises provisions related to applied behavior analysis

Bill Summary

This bill will transfer responsibilities concerning licensing and regulation of the practice of applied behavior analysis from the Aging and Disability Services Division of the Department of Health and Human Services to the Board of Applied Behavior Analysis. Provisions governing providers of health care will be made applicable to behavior analysts, assistant behavior analysts and registered behavior technicians. Certain persons are exempt from provisions governing the practice of applied behavior analysis if said person is: (1) a school employee who provides services to a pupil consistent with the duties of his or her position; and (2) the quardian or caregiver of a recipient of applied behavior analysis services who performs activities as directed by a behavior analyst or assistant behavior analyst. A behavior analyst, assistant behavior analyst or registered behavior technician will be required to undergo certain other examinations, including mental and physical examinations, as necessary to determine competence. This bill will also (1) authorize the Board to deny licensure by endorsement as a behavior analyst or assistant behavior analyst to an applicant who has been disciplined by the Behavior Analyst Certification Board, Inc.; and (2) extend the deadline by which the Board must notify an applicant for licensure by endorsement of any additional information required by the Board to consider the application.

Impact on Mental Health

- This bill will require certain behavioral health professionals to follow the same provisions as healthcare providers and will also require them to take certain examinations to determine competency.
- This will help ensure that these behavioral health professionals are highly qualified, which in return can improve the kind of care individuals dealing with mental health issues receive.

- Having highly qualified behavioral health professionals can also serve to provide adequate care that will help professionals better recognize when certain behaviors a patient is exhibiting has the potential to evolve into a crisis.
- Recognizing these behaviors at an early stage can help to reduce the risk of suicide among individuals receiving care from these professionals.



Revises provisions relating to mental health in the school environment

Bill Summary

This bill requires school districts and charter schools to report information relating to integrated student support services provided to pupils enrolled in a program of distance education. The board of trustees of each school district will also be required to ensure that all school employees receive training on social and emotional trauma. Under this bill, the Division of Public and Behavioral Health of the Department of Health and Human Services must establish a program to provide training on identifying and assisting a person who has a mental illness or substance use disorder or who may be experiencing a mental health or substance use crisis and requires a person who provides such training to have successfully completed a training program for mental health first aid instructors. The Division will be required to collaborate with interested persons and groups when developing the program and inform interested persons and groups concerning the availability and benefits of training under the program. A report containing certain information about the program will be submitted to the Governor and the Legislature annually.

Impact on Mental Health

- This bill requires school employees to be trained and educated on how to assist individuals going through a mental health crisis.
- This will give school employees the ability to assist individuals and provide them with the
 resources that they need at an earlier stage, which will improve the overall mental health
 in the school environment.

- Having a school staff that is well-trained on how to deal with a mental health crisis will
 give the staff the skills they need to intervene and de-escalate a crisis situation at the
 point when it occurs.
- Having these skills will help the school staff address the issue at an earlier stage, which
 will help individuals get the assistance they need quicker, therefore reducing the risk of
 suicide among the student body.



Revises provisions relating to education and mental health

Bill Summary

This bill requires the board of trustees of a school district or the governing body of a charter school, a university, state college, or community college to include certain information relating to mental health resources, including, without limitation, the telephone number for a local or national suicide prevention hotline on an identification card issued to a pupil. The bill also authorizes a qualified mental health professional or behavioral health professional the ability to provide a certificate to excuse a pupil from attendance at school. This excusal will not negatively affect the rating of a school pursuant to the statewide system of accountability for public schools.

Impact on Mental Health

- This bill will provide students with mental health resources through their identification card, which can help to improve the overall mental health of the student body by providing students with quick access to mental health resources.
- Students will also be able to take a medical absence if approved by a qualified mental health or behavioral health professional. This will allow parents to feel more comfortable taking their kids out of school to get the care they need for their mental health.

- Having mental health resources readily available to students will help students get the help that they need earlier, which can help to de-escalate situations that may lead to a suicide attempt.
- Allowing for students to have an excused absence from a qualified mental health or behavioral health professional will provide more incentive for parents to let their kids get regular check-ups for their mental health. Receiving consistent care will help professionals to notice and address mental health issues at an earlier stage, which which can help to de-escalate situations that may lead to a suicide attempt.



Revises provisions relating to racial equity

Bill Summary

This bill authorizes the Division of Public and Behavioral Health of the Department of Health and Human Services to apply for grants to reduce disparities in health care and behavioral health and certain disparities based on race, disability, familial status, sex, sexual orientation, immigration status, income level, etc. The bill additionally authorizes the Division to establish and consult with an advisory committee to ensure that such services are provided in a culturally competent manner. Reports concerning efforts to address these disparities must be submitted to the Legislature twice a year. This bill also: (1) declares the policy of the State that persons employed by the State must, to the extent practicable, reflect the age, gender, sexual, ethnic and geographic diversity of this State; and (2) requires each state agency to post the policy on its Internet website. Public employers will be required to provide and require completion of training concerning diversity and racial equity for each public officer and employee. Under this bill, the Office of Minority Health and Equity within the Department will be allowed to enter into joint partnerships with public and private entities to carry out its purposes. The Division of Health Care Financing and Policy of the Department will also be required to form a managed care organization that provides behavioral health services to recipients of Medicaid or the Children's Health Insurance Program to prepare and implement a plan to ensure that such services are provided in a culturally competent manner if such a requirement is practicable.

Impact on Mental Health

- This bill will require behavioral health services to be trained on being culturally competent, which will help to improve the mental health and quality of care given to individuals across a wide range of cultural backgrounds.
- Research will also be conducted on health care and behavioral health disparities based on differences in cultural background, which will help to improve on existing data about mental health disparities among groups of various cultural backgrounds.

- Improving cultural competency can help individuals across a wide range of cultural backgrounds feel more comfortable in expressing their concerns about their mental health, which can help them get the help they need at an earlier stage, thus reducing the risk factors that may lead to suicide.
- Improving on existing data about mental health disparities among groups of various cultural backgrounds can lead to the creation of programs that will address these disparities and indirectly also help to reduce some of the risk factors that may lead to suicide among these group of individuals.



Establishes a hotline and provides funding to address opioid and substance use disorders

Bill Summary

This bill requires the Division of Public and Behavioral Health of the Department of Health and Human Services to: (1) establish at least one support center to answer calls to the hotline and coordinate the response to those calls; (2) encourage the establishment of or establish mobile crisis teams to respond to calls; and (3) perform certain other duties related to the hotline. Telecommunications providers will be exempt from certain damages relating to the hotline. The support center must provide necessary services for persons who access the hotline and provide follow-up services. A report on the usage of the hotline and the services must be submitted to the Legislature, the Commission on Behavioral Health, and each regional behavioral health policy board. This bill will also: (1) create the Fund for a Resilient Nevada Fund to hold the proceeds of certain litigation by the State concerning the manufacture, distribution, sale and marketing of opioids; and (2) provide for the use of that money for statewide projects and distribution as grants to regional, local and tribal governments and private sector organizations for projects that address the impacts of opioid use disorder and other substance use disorders. This bill requires the Department to: (1) conduct a statewide needs assessment to determine the priorities for allocating money from the Fund; and (2) based on that needs assessment, develop a statewide plan for allocating the money in the Fund. The statewide plan to provide for the allocation of money from the Fund will be used to: (1) fund certain statewide projects to address the impact of opioid use disorder and other substance use disorders; and (2) provide grants to regional, local or tribal governments and private sector organizations whose work relates to opioid use disorder or other substance use disorders.

Impact on Mental Health

- This bill establishes a crisis hotline in addition, which will provide individuals with the mental health resources they need during times of crisis.
- The bill will also provide funds to address the issue of opioid and substance use disorders. This funding can be used to support projects that would provide mental health resources specifically to those with opioid and substance use disorders.

- Providing mental health health resources via a crisis hotline can help to de-escalate dangerous situations that if left unaddressed, could potentially lead to a suicide attempt.
- Addressing mental health issues among populations dealing with the negative effects of drug use will also help to reduce the risk factors that may lead to suicide among this particular demographic.



Provides maintenance and repairs of certain equipment at facilities that provide mental health services

Bill Summary

This bill makes appropriations to the Division of Public and Behavioral Health of the Department of Health and Human Services for maintenance and repairs and the replacement of certain equipment at certain facilities operated by the Division that provide mental health services. \$1,457,870 will be used for the maintenance and repair of certain buildings on the Southern Nevada Adult Mental Health Services Campus. This includes the Rawson Neal Psychiatric Hospital and the Dini-Townsend Hospital.

Impact on Mental Health

This bill will ensure that adequate and up-to-date equipment is being used at certain
facilities operated by the Division that provide mental health services and thus ensure
that only quality equipment is used to help individuals who are in need of help for their
mental health issue(s).

Impact on Suicide Prevention

Ensuring that quality equipment is used for mental health services also increases the
likeliness of individuals getting adequate care that will help them to address their mental
health issue(s) and additionally reduce the risk factors that can lead to a suicide
attempt.



Revises provisions governing healthcare in relation to data on attempted suicide

Bill Summary

This bill require certain providers of health care designated by the State Board of Health who know of, or provide services to, a person who has attempted suicide or is suspected of having attempted suicide to report that fact to the Chief Medical Officer pursuant to procedures adopted by regulation by the State Board of Health. The Chief Medical Officer will then submit a report to the Patient Protection Commission summarizing the information received from the providers. The medical facility the provider works at can also submit the report on behalf of the provider. This information will remain confidential. Providers who fail to report will be subject to the same misdemeanor penalty and administrative fine as a provider of health care who willfully fails to report a drug overdose. Under this bill, the Commissioner will require insurers to complete a data request that provides information necessary to evaluate whether or not the insurer is complying with the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008, which prohibits group health plans and health insurance issuers that provide benefits for mental health or substance use disorders from imposing less favorable benefit limitations on those benefits than on medical and surgical benefits. This information will remain confidential. The Commissioner will be required to submit a report summarizing the information received from insurers to the Patient Protection Commission, the Governor and the Legislature.

Impact on Mental Health

- Healthcare providers will be required to report data on attempted suicide that will help determine whether or not group health plans and health insurance issuers that provide benefits for mental health are giving less favorable benefits due to these incidents.
- Ensuring that the insurers are not being discriminatory and giving adequate coverage to individuals will allow them to feel more comfortable getting needed treatment, which will work towards improving mental health among the Nevadan population.

Impact on Suicide Prevention

Having this bill focused particularly on individuals who have attempted suicide will help
the Nevadan population who is at risk of suicide to get the proper benefits that they need
and deserve in order to receive adequate treatment and prevent future attempts.



Revises provisions relating to treatment for victims of sexual assault and attempted sexual assault

Bill Summary

This bill revises provisions relating to health care, requiring hospitals and independent center for emergency medical care to provide training relating to caring for victims of sexual assault and attempted sexual assault to employees who provide such care. The hospital or independent center must: (1) inform the victim of the right of the victim to receive emergency contraception; and (2) provide the victim such contraception upon request. Hospitals or independent centers that fail to comply with the requirements will be subject to disciplinary action, including the denial, suspension or revocation of a license and various administrative sanctions.

Impact on Mental Health

- This bill will require that emergency medical staff are properly trained on how to care for victims of sexual assault and attempted sexual assault. Having this training will help ensure that these individuals are receiving proper care and not being treated poorly due to the circumstances of their situation, which could lead to a decline in a victim's mental health.
- Providing emergency contraception may also help unwanted pregnancies from occurring due to this situation, which could also have a negative impact on the victim's mental health.

Impact on Suicide Prevention

 As stated previously, receiving proper care and providing emergency contraception can help prevent a victim's state of mental health from deteriorating. This in turn will help to reduce risk factors that can lead to suicide among this demographic.





Safety



Assembly Bill 371

Establishing provisions relating to discrimination based on race

Bill Summary

Under this bill, a principal, administrator or other person in charge of a school must investigate a report of an incident of bullying or cyber-bullying based on race and take various actions to address the incident. Parents or legal guardians of a pupil can also report incidents of bullying based on race to an administrator. The Office, in consultation with the direct supervisor, after reviewing the reports, are required to make recommendations for intervention or training to address discrimination based on race, bullying or cyber-bullying. The board of trustees of a school district or the governing body of a charter school are to develop restorative practices for both victims and perpetrators of discrimination based on race. If an employee knowingly chooses to not report an incident of bullying based on race, this violation will be noted in their performance evaluation.

Impact on Mental Health

This bill will require schools and school employees to take serious action against
incidents of bullying or cyberbullying specifically related to race. Properly addressing
incidents of bullying can help the victims to feel like they have a support system, which
will help to positively impact their mental health.

Impact on Suicide Prevention

 Properly addressing incidents of bullying based on race and helping victims to feel like they have a support system can also help to reduce the chances of the victim feeling alienated and misunderstood, which if left unaddressed, could potentially lead to the victim attempting suicide.



Authorizes the transportation of a person on conditional release to the forensic facility under certain circumstances

Bill Summary

This bill authorizes a forensic facility supervising a person on conditional release to, without obtaining a court order, take the person into protective custody or request a law enforcement agency to take them into protective custody and transport the person to the forensic facility supervising the person if the forensic facility has probable cause to believe that the person violated a condition of the release from commitment and is a danger to themselves or others. In addition, the court must hold a hearing to determine whether to continue, modify or terminate the conditional release of the person no later than 3 days after the person is taken into protective custody, unless the hearing is continued upon agreement by the counsel for the person and the prosecuting attorney.

Impact on Mental Health

 Taking a person into protective custody if they show signs of being a danger to themselves or others will allow law enforcement authorities to closely monitor the person's mental health state and determine whether treatment is needed to address the issue.

Impact on Suicide Prevention

 Taking a person into protective custody if they show signs of being a danger to themselves or others may also help to de-escalate the situation that may have caused this behavior and decreases the likelihood of the person attempting suicide in response.



General

Assembly Bill 421

Establishes the preferred manner of referring to persons with mental illness and persons who are deaf or hard of hearing

Bill Summary

Existing law establishes the preferred manner of referring to persons with physical, mental or cognitive disabilities and persons affected by addictive disorders in the Nevada Revised Statutes and the Nevada Administrative Code. This bill establishes the preferred manner of referring to persons with mental illness and persons who are deaf or hard of hearing in the Nevada Revised Statutes and the Nevada Administrative Code. Words and terms that are preferred for use include, without limitation, "persons with disabilities," "persons with mental illness," "persons with developmental disabilities," "persons with intellectual disabilities" and other words and terms that are structured in a similar manner. Words and terms that are not preferred for use include, without limitation, "disabled," "handicapped," "mentally disabled," "mentally ill," "mentally retarded" and other words and terms that tend to equate the disability with the person. Words and terms that are preferred for use in relation to the subject of drug use and addiction include, without limitation, "addictive disorder," "persons with addictive disorders," "person with an addictive disorder," "person with an addictive disorder related to gambling" and "substance use disorder." Words and terms that are not preferred for use include, without limitation, "addict," "alcoholic," "alcohol abuse," "alcohol abuser," "alcohol and drug abuser," "drug abuse," "drug addict," "problem gambler," "substance abuse" and "substance abuser."

Impact on Mental Health

 Establishing appropriate language that should be used when referring to persons with mental illness will help to omit any negative language that may be associated with the stigmatization of mental health.

Impact on Suicide Prevention

 Omitting any negative language that may be associated with the stigmatization of mental health may help to normalize discussions on topics related to mental health, such as suicide, which will benefit education programs/organizations that are focused on preventing suicide.



Revising certain terms used to describe the provision of certain services to persons with intellectual disabilities and persons with developmental disabilities

Bill Summary

Existing law authorizes the Aging and Disability Services Division of the Department of Health and Human Services to operate a residential facility for groups to care for and maintain persons with intellectual disabilities or persons with developmental disabilities until they can live in a more normal situation. Section 1 of this bill revises the terms used to describe the transition of persons residing in such a facility by replacing obsolete language with "reside in an appropriate community-based setting that is not a facility." Existing law requires the Administrator of the Division to establish a fee schedule, in consultation with the State Association of Retarded Citizens and the board. Section 2 of this bill removes the obsolete references to the State Association of Retarded Citizens and the board so that the fee scheduled is established solely by the Administrator of the Division. Existing law states that the declaration of the intent of the Legislature in enacting certain provisions is to aid persons with intellectual disabilities and persons with developmental disabilities who are not served by existing programs in receiving high quality care and training in an effort to help them become useful citizens. Section 3 of this bill revises the declaration of the intent of the Legislature by replacing obsolete language with "increase independence."

Impact on Mental Health

- Removal of certain language and establishing appropriate language in relation to
 persons with intellectual and developmental disabilities will help to omit any negative
 language that may be associated with the stigmatization of these individuals.
- This can help to normalize their condition and improve the mental health of those individuals receiving care for their disability.

Impact on Suicide Prevention

Removing any negative language that may be associated with these individuals may help
to normalize and destigmatize discussions on topics related to cognitive disabilities,
which will help individuals with these disabilities feel less alienated, thus reducing the
risk of suicide among this demographic.

