Joe Lombardo
Governor

DEPARTMENT OF HUMAN SERVICES

DIRECTOR'S OFFICE

Helping people. It's who we are and what we do.

Laura Rich
Director

January 30, 2026

Roger Wilkerson
Legislative Counsel Bureau
401 South Carson Street
Carson City, NV 89701

Dear Director Wilkerson,

Nevada Revised Statutes (NRS) 433.712 through 433.744 established the Fund for a Resilient Nevada, within the Nevada Department of Human Services (DHS) to account for the State's portion of opioid recoveries. On or before January 31 of each year, the Department is to transmit a report concerning all findings, recommendations made and money expended pursuant to NRS 433.734 to 433.740.

Per statutory requirements please see the attached report which includes findings, recommendations, and fiscal expenditures.

Sincerely,

Dawn Yohey, MFT, LCADC
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Fund for a Resilient Nevada

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Fund for a Resilient Nevada Annual Report

Nevada Department of Health and Human Services

A report concerning all findings and recommendations made and money expended pursuant to

Nevada Revised Statutes NRS 433.734 to 433.740

Period of Performance is January 1, 2025, through December 31, 2025 (SFY25/26)

Fund for a Resilient Nevada (FRN)

2026 Annual Report

Statutory Authority

Pursuant to Nevada Revised Statutes (NRS) 433.734, on or before January 31 of each year, the Department shall transmit a report concerning all findings and recommendations finalized, as well as money expended or encumbered for specific recommendations pursuant to NRS 433.734 through 433.740 within the Fund for a Resilient Nevada (FRN).

Introduction

The Nevada Department of Human Services (DHS) Fund for a Resilient Nevada (FRN) team is pleased to submit the fourth annual report to Nevada's leadership and partner organizations. The FRN consists of opioid recovery funds received through litigation to address the adverse impacts of inappropriate opioid manufacturing, marketing, distribution, and prescribing practices.

As outlined in prior reports, this document summarizes priority initiatives and expenditures associated with the State of Nevada's allocation of opioid recovery funds, which represents 43.86 percent of total settlement proceeds. The remaining funds are administered by the Office of the Attorney General in accordance with the One Nevada Agreement. Figure 1 illustrates the percentage of allocations distributed to each partner organization.

All FRN expenditures are required to align with the Nevada Opioid Needs Assessment and Statewide Plan (2022). This plan was developed using qualitative and quantitative data, as well as extensive stakeholder input, to identify statewide priorities for addressing opioid misuse and its impacts. As initiatives are implemented and objectives are achieved, the plan functions as a living document, undergoing regular updates to ensure Nevada remains responsive to emerging trends and community needs.

The current Needs Assessment is being revised to incorporate the most recent data and expanded metrics. Importantly, the revision process includes input from community leaders, elected officials, service providers, individuals with lived or living experience, and family members affected by opioid misuse. Engagement efforts aim to reach residents in all 17 Nevada counties. The updated assessment is expected to be completed by July, with a revised Statewide Opioid Plan finalized by December to guide future funding priorities.

Statewide Funding Priorities

FRN investments continue to align with the following seven statewide goals:

1. Ensure local programs have the capacity to implement recommendations effectively and sustainably.
2. Prevent the misuse of opioids.
3. Reduce harm related to opioid use.
4. Provide behavioral health treatment.
5. Implement recovery communities across Nevada.
6. Provide consistent opioid prevention and treatment across criminal justice and public safety systems.
7. Ensure high-quality data and accessible, timely reporting.

Findings

According to the Nevada Office of Analytics, overdose deaths and opioid involvement continued to increase from 2023 to 2024; however, the rate of growth—particularly for synthetic opioids—slowed substantially. Provisional 2024 data indicate 1,253 overdose deaths statewide, representing a continued upward trend from 2023. Of these, 792 deaths (63 percent) involved opioids.

Deaths involving synthetic opioids, including illicit fentanyl, increased modestly from 633 in 2023 to 677 in 2024—approximately a seven percent increase. This represents a notable deceleration compared to growth observed in prior years. Despite this slowdown, the Nevada High Intensity Drug Trafficking Area (HIDTA) Program's 2026 Threat Assessment (June 2025) continues to identify fentanyl as a high threat due to widespread availability and low cost.

Child welfare data reflect similar trends. Child Protective Services investigations substantiated for maltreatment with an opioid-related indicator declined from 93 cases in 2023 to 83 in 2024, and to 69 in 2025 (through November). While overall substance-related foster care entries have decreased, opioid involvement declined more slowly, resulting in a slight increase in its proportion of substance-related entries—from 9.0 percent in 2023, to 8.4 percent in 2024, and 10.4 percent in 2025 (through November).

Collectively, these patterns suggest that while opioid-related harms may be stabilizing at the population level, opioids continue to pose a disproportionate risk for families and children involved in the child welfare system.

Following fentanyl, the Nevada HIDTA Area of Responsibility identifies methamphetamine, cocaine, and heroin as additional high-threat substances. Survey data, investigative intelligence, and seizure trends indicate that these substances continue to cause significant harm due to high demand, low prices, and overdose prevalence. Although heroin-related seizures and overdoses have declined, it remains a medium-to-low threat. Nevada HIDTA assesses Mexico as the primary source of fentanyl, methamphetamine, cocaine, and heroin entering the state, primarily via California and Arizona.

The Nevada Monthly Drug Overdose Surveillance Report (December 2025) indicates that suspected overdose-related emergency department visits declined by 10 percent in November 2025, with opioid-related visits decreasing by five percent compared to the prior month. Emergency department overdose patients were predominantly male and White, with the largest share aged 25–34. However, the highest visit rates occurred among Black, non-Hispanic individuals. Among adolescents, overdose-related emergency department visits declined by 13 percent, with patients predominantly female and White, non-Hispanic.

Age-specific mortality trends show stable deaths among individuals aged 35–54 from 2023 to 2024, continued increases among those aged 55–64, and declining deaths among individuals aged 15–24. These data underscore the need for targeted interventions addressing disparities across age groups and communities.

The Office of Analytics classifies a death as opioid-involved when ICD-10 codes associated with opioid overdose are present, based on toxicology results and scene evidence. Enhanced data systems now allow for more precise identification of opioid-involved deaths.

The Nevada Department of Corrections (NDOC) reported an increase in overdose events within correctional facilities during 2025, highlighting growing concern in institutional settings. Although NDOC has not yet shared detailed overdose data with the Office of Analytics, FRN and State Opioid Response funding supported the establishment of peer recovery support specialist positions and medication for opioid use disorder (MOUD) nursing roles. NDOC implemented TCU drug screenings at intake, conducting approximately 120 intake screenings monthly to identify opioid and other illicit substance use early in the incarceration process.

Funded Programs and Progress Reports

Funded initiatives are organized by region: Northern, Rural, Southern, and Statewide. Each subsection summarizes progress toward opioid-abatement goals, service reach, and measurable outcomes.

Northern Region

Quest Counseling and Consulting - In 2025, Quest's Youth Opioid Intervention Program (YOIP) advanced statewide opioid-abatement priorities by delivering intensive engagement, harm-reduction services, and continuity of care to justice-involved and transitional-aged youth. Across the reporting period, YOIP distributed 3,432 Narcan kits throughout the community—including schools, probation offices, medical practices, and directly to clients—substantially expanding public access to overdose-reversal medication. Each kit was paired with branded instructional materials and direct contact information, strengthening proper use and enabling youth and families to reconnect with clinical support when needed.

Quest provided outreach and recovery services to 64 new referrals, adapting its service model after regional hospital EDs provided no referrals. YOIP mitigated this gap by cultivating partnerships with alternative referral sources, ensuring treatment continuity. Through motivational interviewing, psychoeducation, fentanyl test strip distribution, and peer support, YOIP decreased overdose risk and promoted treatment linkage. Nine youths completed treatment successfully, with 15 still engaged and connected to higher-level care when clinically indicated.

Quest further strengthened engagement by delivering 37 peer-led activities to justice-involved youth, reaching 13 transitional age youth (TAY) clients through nontraditional therapeutic experiences shown to increase retention and treatment readiness. As a Certified Community Behavioral Health Clinic (CCBHC), Quest ensured participants had seamless access to low-barrier behavioral health services, including therapy, case management, and recovery supports.

Collectively, YOIP's 2025 efforts enhanced Nevada's overdose-prevention infrastructure, improved youth engagement in behavioral health care, and expanded the accessibility of lifesaving harm-reduction tools. YOIP continues to serve as a critical statewide resource for reducing youth overdose vulnerability and supporting long-term recovery stability.

Carson City Community Counseling Center- During calendar year 2025, Carson City Community Counseling Center (CCCCC) strengthened treatment access, housing capacity, and system coordination for justice-involved individuals with opioid use disorder. CCCCC delivered 30–45 days of high-intensity Level 3.5 treatment, providing 25+ hours of structured clinical interventions per week for every residential participant. While nine clients (20%) were funded directly through FRN dollars, CCCCC served over 45 individuals (100%+ of projected volume) in Level 3.5 care using Medicaid Provider Type 93 billing, allowing the program to achieve long-term sustainability and a reduced grant dependency rate of nearly 80%. The transition to Medicaid reimbursement represents a major fiscal milestone and allows CCCCC to preserve FRN support exclusively for uninsured or under-insured individuals.

CCCCC also expanded recovery stability through transitional housing. Capacity increased by 6 new beds, resulting in 5 successful residential-to-housing transitions (55% of target) with full wraparound supports, including targeted case management, basic skills training, and psychosocial rehabilitation. Multiple justice-referred participants reported their longest sustained sobriety periods to date, with one high-risk client — previously experiencing 10+ overdoses — now maintaining 6+ months of sobriety, obtaining full-time employment, securing stable housing, and reunifying with family. CCCCC maintained strong regional coordination through ongoing partnerships with local jails, courts, probation, and the Forensic Assessment Services Triage Team (FASTT) to identify individuals early and streamline placement into Level 3.5 treatment.

Overall, CCC demonstrated measurable opioid-abatement impact by shifting over 80% of residential treatment volume to reimbursable Medicaid services, expanding transitional housing capacity by 66%, and maintaining clinical intensity at 25+ structured service hours weekly for justice-involved clients. These efforts directly support reduced relapse and recidivism, housing stability after treatment, and improved long-term recovery outcomes for Carson City residents affected by opioid misuse.

Northern Nevada HOPES - During Grant Year 2025, Northern Nevada HOPES successfully designed and launched an Integrative Maternity Care Program providing prenatal, post-partum, and couplet care for mothers with past or present opioid use disorder. The program established a fully operational cohort of four pregnant individuals and expanded services to recently post-partum individuals seeking support. HOPES developed comprehensive program infrastructure by hiring 12 trained staff, creating referral and enrollment processes, designing curriculum informed by focus group feedback, and aligning program documentation with the agency's electronic medical records system for long-term evaluation. Partnerships were formalized with community entities such as Step 2, Crossroads, Carson Tahoe Hospital, Our Place, Safe Babies Court, MAT Court, and Adult Drug Court. Staff created depression- and anxiety-screening procedures to address unmet behavioral health needs identified during focus groups, increasing early identification of mental health risk among pregnant people with OUD. HOPES also configured electronic medical record (EMR) data collection to evaluate program impact quarterly and prepared for Medicaid sustainability once bundled billing requirements change. Overall, the Integrative Maternity Care Program achieved full implementation of staffing, curriculum, screening practices, partnerships, and outreach. Despite limited training availability within Nevada, external training and donated medical supplies reduced financial burden. HOPES is now positioned to grow the cohort, expand integrated services, and reduce maternal opioid-related risks through trauma-informed, family-centered medical and behavioral health care.

Carson City HHS - During this reporting period, Carson City Health and Human Services (CCHHS) advanced opioid abatement efforts by expanding medication safety, overdose prevention, and youth-focused education initiatives throughout Carson City. In partnership with Carson City Juvenile Services, CCHHS made significant progress in advancing youth opioid prevention, education, and early intervention efforts. The program strengthened school-based outreach, classroom education, and diversion programming, reaching youth across multiple campuses and justice settings. Juvenile Services delivered opioid prevention content at 13 community events, reaching 602 students, and provided direct diversion interventions to 147 justice-involved youth from local middle schools and the juvenile justice system exceeding annual goals by nearly 400%. In addition, 75 incarcerated parents received education on opioid risks and harm reduction, helping reinforce prevention messaging in family systems that often experience elevated risk.

CCHHS procured core harm reduction supplies, including, 600 boxes of naloxone and 100 fentanyl test strips, distributing 424 boxes to law enforcement, courts, and youth-serving

partners to expand access to life-saving overdose reversal medication. CCHHS purchased 1,605 Deterra safe disposal bags for use through pharmacies and youth-focused community partners, building long-term infrastructure for safe medication disposal and harm reduction in family settings. Additionally, the program purchased a law-enforcement grade incinerator to safely destroy collected controlled substances.

Together, these coordinated outreach, education, and resource distribution activities are expanding protective factors, increasing knowledge among youth and caregivers, and positioning Carson City for sustained progress in opioid misuse prevention and early intervention among at-risk youth and the city at large.

Join Together Northern Nevada -Join Together Northern Nevada (JTNN) advanced prevention workforce development, youth substance use education, and opioid risk reduction across Washoe County. The program provided evidence-based *Too Good For Drugs* (TGFD) curriculum to 368 students across 15 cohorts, exceeding the annual school delivery target. JTNN awarded eight $2,000 scholarships to high school students pursuing behavioral health, social work, or criminal justice careers, directly supporting the prevention workforce pipeline. Information dissemination and school presentations reached 1,918 youth and adults, increasing knowledge of opioid risk and available recovery resources. Staff completed essential training including Substance Abuse Prevention Skills Training (SAPST), ethics, and TGFD curriculum certification, positioning four staff members on the pathway to Certified Prevention Specialist credentials. While coalition meetings, parent programming, and advisory committees were affected by contracting delays, JTNN still reached 132 students with workforce development presentations and organized the Washoe County Prevention Conference, where 54 speakers presented on trauma, resilience, and opioid-misuse prevention. The program significantly increased community exposure to prevention topics, expanded workforce capacity, and integrated evidence-based education in schools to reduce opioid-risk behaviors.

Carson City (Prevention) – Carson City Health and Human Services (CCHHS) complete opioid abatement initiatives and activities, including the development of educational materials, school-based youth education sessions, distribution of naloxone to correctional and juvenile facilities, and the creation of three public health messages released on Facebook and Instagram using Centers for Disease Control (CDC), U.S. Food and Drug Administration (FDA), and Substance Abuse and Mental Health Administration (SAMHSA) standards. They partnered with Juvenile Services to align educational efforts and are working to develop a presentation focused on opioid abatement education, specifically aimed at youth, families, and adults. They purchased and distributed 1,605 Deterra disposal bags, fentanyl testing strips, and 424 naloxone boxes to pharmacies, sheriff's offices and justice/municipal courts, expanding collaboration with additional at-risk organizations. They supported the Drug Take Back Day in October with four local drop-off sites. They also provided education on how to safely dispose of unused medications, including opioids.

CCHHS remains on track, strengthening prevention, education, and harm-reduction capacity across Carson City.

Renown Health Foundation (Women's Health) – This program has made meaningful progress in strengthening patient safety, expanding access to care, and improving opioid-risk identification. Key initiatives include partnerships with Safe Embrace and Awaken to support patients experiencing trafficking or domestic violence. Also, they collaborated with University of Nevada, Reno (UNR) - Center for the Application of Substance Abuse Technology (CASAT) for Narcan training and have approval to maintain Narcan on site. Two providers have completed specialized perinatal mental health training, enhancing trauma-informed care for pregnant and postpartum patients. Outreach efforts with the City of Reno are improving connections to underserved families and increased access to reproductive health services. Rural patients are receiving expanded support through telephone-based community health worker (CHW) and therapy visits, along with Medicaid enrollment assistance. Opioid-risk screening has been strengthened through a new Epic SmartTool which streamlines OUD-opioid replacement treatment (ORT) screening during patient visits and a SAMHSA-based adverse childhood experiences (ACEs) questionnaire, and staff training in trauma-informed care and motivational interviewing is underway. Participation in the Street Reach Symposium and continued community collaboration further advance efforts to reduce barriers to care.

Renown Health Foundation (Fellowship) – Renown is working to develop the capacity and training for addiction medicine including medication for treatment of opioid use disorder (OUD). They will launch interprofessional education and practice to bring addiction medicine, prioritizing opioid use disorder/misuse prevention, MOUD, harm reduction, and risk factors to physician assistants, nurse practitioners, and other health-related specialists. Addiction Medicine consultation service will be an important part of the fellows' training, and are actively creating the service with plans to start seeing the first patient with addiction. Renown is also working on a research project in collaboration with the School of Public Health to examine trends with substance use disorder and treatment outcomes for patients seen within the Renown system.

The Life Change Center - The Life Change Center's On Track program advanced opioid-abatement work by coordinating treatment, transportation, and medication-assisted treatment (MAT) for incarcerated individuals transitioning to community-based recovery. During the reporting period, 12 inmates were transported from Washoe County Detention Center to seven residential treatment providers, facilitating immediate entry into structured services. Of the participants discharged from residential care, five achieved successful completion, and 62.5% continued MAT post-discharge, reflecting strong retention in medication support after release. The program delivered 713 doses of medication in outpatient and residential settings and engaged in active care coordination to maintain dose stability during transitions. Staff strengthened professional relationships through MOUs, case management protocols, and collaboration with residential facilities, enabling faster referral pathways and reducing overdose risk during re-entry. Challenges related to follow-up surveys and data collection resulted from disconnected phone

numbers and individuals leaving residential programs prematurely, but internal tracking sheets and operations oversight ensured ongoing service continuity. Overall, On Track demonstrated measurable opioid-abatement impact by reducing treatment gaps during transitions from incarceration, expanding MAT access, building inter-agency trust, and improving post-release stability for individuals at high risk of overdose.

Washoe County - In 2025, the Washoe County Human Services Agency Sobriety Treatment and Recovery Team (START) Program advanced statewide opioid-abatement goals by stabilizing families affected by substance use, improving treatment engagement, and strengthening reunification pathways through a multidisciplinary team model. START's family-centered approach integrates child welfare, behavioral health providers, peer mentors, and recovery supports to address parental substance use — one of the strongest predictors of foster care involvement and long-term opioid vulnerability in children.

Across the reporting period, START strengthened cross-system collaboration, enhanced family engagement practices, and expanded access to treatment and recovery support. The program increased warm handoffs to behavioral health services, improved coordination with residential and outpatient treatment providers, and leveraged peer supports to improve treatment readiness and reduce stigma. START staff conducted joint home visits, coordinated care planning, and facilitated routine case reviews to ensure families received consistent, supportive intervention.

The program directly contributes to opioid-abatement by reducing recurrence of substance-exposed incidents, improving treatment adherence, and stabilizing home environments to prevent entry or reentry into foster care. START's trauma-informed model increases protective factors among children, reduces intergenerational risk pathways, and supports parents in achieving long-term recovery.

Washoe County – In fiscal year 2025, the Washoe County Department of Alternative Sentencing (DAS) STAR Program achieved several key milestones that significantly advances its mission of supporting individuals at high risk for opioid use disorder and criminal recidivism. The program enrolled 37 new participants, maintained an average monthly caseload of 21, and successfully transitioned 15 individuals through all four program phases – **S**upport, **T**reatment, **A**ccountability, and **R**ecovery. Notably, 100% of participants who engaged in journaling activities demonstrated measurable cognitive restructuring – surpassing the program's goal of 75%. The STAR team also expanded housing support by fully utilizing four apartments at Marvel Way, Nevada's first permanent sober living complex, and launched a new partnership with the Carson City Community Counseling Center. Additionally, the program implemented a men's support group and a relapse prevention workshop, further enhancing peer engagement and recovery support.

The STAR program made a substantial impact on opioid abatement efforts in the community by integrating evidence-based practices, such as medication-assisted treatment (MAT), cognitive behavioral therapy, and peer support. Over 50% of participants utilized MAT

services, and the program recorded a 29% average increase in cognitive behavioral skills through journaling assessments. Drug testing data showed a consistent decline in positive results over time, indicating improved sobriety outcomes. The program also maintained a low recidivism rate, with only 4% of graduates reoffending within 12 months. Through individualized care plans, strong community partnerships, and a trauma-informed approach, STAR provided a comprehensive recovery pathway that addressed both addiction and criminogenic thinking, ultimately reducing the burden of opioid misuse in Washoe County.

Rural Region

Living Free Health & Fitness - In Calendar Year 2025, Living Free Health & Fitness continued to provide the only Behavioral Health Certification for Excellence in Nevada (BHCEN-certified) transitional recovery housing for women, children, pregnant individuals, and veterans in the mid- and southern frontier regions of Nevada. The Frontier Treatment & Housing program served 11 unique clients, delivering 735 bed days through November and provided structured American Society of Addition Medicine *ASAM)Level 2.1 and 1.0 services, including weekly drug testing, evidence-based therapy, 12-step meetings, life skills support, and case management referrals. Despite frontier conditions and limited rural service availability, 100% of clients received individualized treatment plans and engaged in regular group or individual treatment. The program demonstrated meaningful opioid-abatement outcomes through four successful completions and 64% of participants stepping down to a lower level of care, with multiple clients successfully reunifying with children or transitioning into independent living. The program supported its first pregnant mother funded through this award in 2025, resulting in a healthy birth and safe placement. Two additional mothers successfully reunified with children, including one who retrieved her son from Kansas after court coordination and ongoing therapy support. Frontier housing remains a critical protective factor against relapse, particularly where “peer pressure” and limited social supports contribute to generational substance use. Staffing remained stable, and treatment fidelity to BHCEN and Parent–Child Assistance Program standards was verified through monthly reviews and documentation in the EHR system. Overall, Living Free strengthened recovery stability, family reunification, and long-term resilience in frontier communities directly affected by opioid misuse.

Lyon County Human Services - In Calendar Year 2025, Lyon County Human Services delivered prevention-focused, trauma-informed support to families at risk for opioid misuse. The Resilient Families Program received 154 referrals, exceeding the annual goal of 144, and conducted 116 structured level-of-care assessments using evidence-based tools such as Children’s Uniform Mental Health Assessment (CUMHA), Child and Adolescent Service Intensity Instrument (CASII), and ASAM. As a result, 100% of referred families received clinically informed treatment recommendations, and 22 person-centered service plans were developed for families needing ongoing case management. The program

delivered wraparound support including referrals to outpatient therapy, Celebrating Families parenting education, psychiatric services, and basic needs assistance. Staff provided enhanced curriculum to 110 families, increasing protective factors and reducing opioid-risk indicators through structured parent training and substance education. Although transportation and capacity limitations occasionally delayed access to higher levels of treatment, staff mitigated barriers through flexible scheduling, telehealth coordination, and cross-program referrals. By strengthening family engagement, caregiver skills, and behavioral health connections, Lyon County increased early identification and reduced risk factors associated with substance use. Overall, the program demonstrated measurable progress toward opioid-abatement goals through expanded assessment capacity, improved service linkage, and consistent collaboration across juvenile justice, schools, and child welfare partners.

Nevada Public Health Foundation (DIDS for Rurals) - Nevada Department of Indigent Defense Services (DIDS), in partnership with the Nevada Public Health Foundation, advanced opioid-abatement infrastructure by completing 100% of planned system development activities for a rural and frontier Holistic Defense model. The initiative focused on reducing opioid-driven justice involvement by integrating legal defense with behavioral health navigation, housing stabilization, and workforce development in counties with limited treatment capacity.

The project achieved 100% completion of stakeholder engagement objectives, conducting nine in-person rural county visits and six multi-agency strategy convenings involving public defenders, sheriffs, county administrators, prevention coalitions, and family-resource providers. As a result, 100% of targeted rural regions were assessed, with two counties (≈40–50% of those engaged) formally expressing readiness to pursue pilot implementation and three to four jurisdictions (≈75–100%) identifying Holistic Defense as a priority model for opioid-impacted populations.

DIDS also completed 100% of planned program design deliverables, including development of a formal logic model, implementation framework, and performance-measurement structure translating national best practices into rural-appropriate operational standards. Workforce capacity objectives were likewise met, with 100% completion of a social work integration pathway within the Carson City Sheriff's Office (CCSO). This included establishment of CCSO as a UNR School of Social Work practicum site, development of scholarship criteria, and advancement of an inaugural candidate — creating a replicable model for embedding social work response into justice settings.

China Spring Youth Camp (all counties except Clark) - During this reporting period, China Spring Youth Camp (CSYC) strengthened prevention, education, and treatment supports for youth affected by opioid misuse and co-occurring behavioral health concerns. The program screened 100% of youth upon intake using standardized tools, with 77 youth screened and 61 youth receiving psychoeducation and drug and alcohol services, surpassing annual targets. Despite short staffing early in the year, CSYC maintained 90% fulfillment of clinical service hours, ensuring weekly access to Level 1 and Level 2.1 group and individual

interventions. Youth received structured services through interactive journaling, Substance Abuse and Mental Health Services Administration (SAMHSA) and National Institute on Drug Abuse (NIDA) curriculum, Cognitive Behavioral Therapy, Dialectical Behavioral Therapy, and Connection Matters mental health groups.

CSYC achieved strong alignment with FRN objectives by delivering integrated mental health and substance-use services, increasing early identification, strengthening youth resilience, and enhancing family knowledge of opioid risks. Alcohol and drug counselors actively participated in Child and Family Team meetings, supporting aftercare planning for all youth served and increasing family connection through regular parent education sessions. Pre-/post-survey data showed notable gains in treatment knowledge, including individual improvements of more than 100 percent for youth who entered with limited understanding of relapse risks, coping skills, and opioid awareness. As CSYC enters the next reporting cycle, the program plans to expand capacity by hiring an additional drug and alcohol counselor and aims to serve at least 50 youth in 2026 through increased assessment, integrated treatment, and family support initiatives.

Frontier Community Coalition - Frontier Community Coalition developed educational materials on the risks of opioids, methamphetamine, and alcohol use by collaborating with youth teams. They worked with 20 youth leaders to model healthy behaviors, share resources, and support prevention campaigns in the few months supported by this award. Youth teams researched, presented, and advocated for local policies that would restrict access to substances.

The Coalition had a safe disposal day for unused medication; this was done in partnership with local law enforcement. They also equipped families with naloxone and educated them on how to administer.

Storey County - Storey County advanced opioid-abatement and public safety outcomes through the Shelby Project, a coordinated rural justice initiative integrating interdiction technology, certified Community Health Workers (CHWs), and cross-system reentry support. The program hired and fully onboarded two CHWs and established formal coordination with Health and Community Services, the Sheriff's Office, and regional Mobile Outreach Safety Team partners — an essential infrastructure improvement in a county with limited behavioral health capacity.

A central accomplishment was the purchase, installation, and full operationalization of a jail body scanner, including staff training and policy integration. Since deployment, opioid and contraband introduction into the jail has been effectively eliminated, representing a near-total reduction in in-custody overdose risk and a substantial improvement in officer safety. This intervention directly addresses one of the highest-risk points for opioid exposure within rural justice settings.

In parallel, CHWs delivered individualized wraparound support to justice-involved individuals, meeting clients in the community, addressing documentation, housing,

employment, and service-navigation barriers, and coordinating care across systems. Early program outcomes indicate meaningful reductions in repeat jail admissions among engaged clients, with one documented case resulting in successful employment, housing stabilization, and zero recidivism following intervention.

The Shelby Project demonstrates strong alignment with FRN opioid-abatement priorities by preventing opioid entry into custody, strengthening rural justice-health collaboration, and addressing root causes of reoffending.

NyE Communities Coalition (NYECC) - During this reporting period, NyE Communities Coalition made strong progress in advancing opioid abatement efforts across Nye, Lincoln, and Esmeralda Counties, despite delays caused by the late issuance of the initial grant award. The program successfully conducted 11 drug take back events across both grant periods, removing a total of 232.88 pounds of unused and potentially harmful medications from the community. While prescription disposal bin placement was delayed during the first reporting period due to contracting timelines, six bins have now been installed — with a seventh underway — and early reporting has already documented an additional seven pounds of medications collected and destroyed. The coalition also exceeded distribution goals for medication safety tools, providing 3,610 Deterra bags, 892 lock bags, and 900 lock boxes, enabling thousands of community members to safely dispose of or secure prescription medications to prevent misuse and diversion.

In addition to improving safe medication practices, NyECC significantly expanded community education on non-opioid pain management. Through educational tools, books, media outreach, and the highly successful yoga and Qigong classes, the program reached over 37,000 unique media impressions and provided direct education and alternative pain management support to more than 1,200 individuals across both reporting periods. Community response to these efforts has been overwhelmingly positive, with participants reporting meaningful improvements in pain management, relaxation, mobility, and overall well-being. Despite early challenges, the program has built strong partnerships, increased community engagement, and positioned itself for continued success in reducing opioid misuse by limiting access and promoting healthier pain management alternatives.

Humboldt County - In 2025, Humboldt County Juvenile Services (HCJS) advanced long-term opioid-abatement infrastructure by positioning its Transitional Living Center Kitchen Expansion project for construction. All required technical reviews were completed, including fire marshal approval, health department clearance, and county building inspection, allowing the project to move to public bid. The agency prepared a $1.4 million construction scope, established critical path dates — including bid opening January 22, 2026, and estimated construction completion July 30, 2026 — and coordinated with multiple partners to secure diversified funding from local government, state sources, and the mining community. Although construction has not yet begun, HCJS advanced opioid-harm reduction by placing three naloxone boxes on public buildings and responding to seven additional community requests for naloxone placement. HCJS will maintain and refill these boxes, ensuring rapid overdose response in high-risk rural locations. With

infrastructure progress complete, bidding scheduled, and public safety planning underway, the project remains on track to expand the Transitional Living Center's capacity to support stable housing, structured recovery, and youth engagement in safe, substance-free spaces. The kitchen expansion will directly enable meal preparation, nutrition supports, and broader programming during supervision hours — reinforcing opioid-abatement efforts by improving continuity of services and daily stability for justice-involved youth and families.

Southern Region

Roseman University EMPOWERED Program - EMPOWERED has demonstrated a comprehensive and multifaceted approach to supporting its clients throughout their recovery journey. The program conducted 536 case management sessions over 10 months. This intensive case management was complemented by 298 individualized peer support sessions. In addition to one-on-one support, the program facilitated 365 targeted referrals to community resources, ensuring clients had access to a wide range of services. EMPOWERED also recognizes the importance of social support and community building in the recovery process. The program organized ten themed monthly "sober socials" which included events such as Being Present Through Art, Self Love, an Easter Egg Hunt, Play at the Park, Regulating Emotions, Karaoke Fun, Sexual Health and Consent, Recovery Storytelling, Safe Trick-or Treating, and a Sensory Activity. The program also hosted ten stage-based sober social events, such as Postpartum Workouts, Car Seat Safety, Safe Sleep, and Stress and Mindfulness. These gatherings provide clients with opportunities for connection and celebration in a supportive, substance-free environment. Acknowledging the crucial role of educational opportunities in recovery, EMPOWERED successfully completed development of the EMPOWERED Life Series workbook. This holistic approach demonstrates the program's commitment to addressing the multifaceted needs of its clients and their families.

A robust social media presence has been maintained by the EMPOWERED program to bolster community awareness, publishing 67 posts across various platforms over ten months. This online engagement was completed by extensive in-person outreach, with program materials distributed at 182 community meetings. These concerted efforts in networking and outreach translated into tangible results, with the program serving 107 unduplicated unique clients, and welcoming 42 new client intakes. The program's impact extended beyond direct service, garnering significant medica attention. Notable coverage included features televised by Las Vegas PBS and a feature on the EMPOWERED program hosted by the BBC.

Dignity Health -From January through November 2025, Dignity Health advanced opioid-abatement goals by expanding chronic pain education for seniors, increasing community self-management capacity, and building culturally responsive prevention supports across Southern Nevada. The program reached approximately 3,674 individuals through 40

outreach events, exceeding quarterly targets and significantly broadening community exposure to opioid risk education and non-pharmacological pain management strategies. Over the reporting period, Dignity Health delivered 13 Chronic Pain Self-Management Program (CPSMP) workshops, enrolling 131 participants and supporting 53 completions, defined as attending four or more of the six required sessions.

To strengthen reach and build trust in underserved communities, the program established 13 new partnerships, including U.S. Vets Las Vegas, Volunteers in Medicine, Centro Cristiano El Shaddai, and multiple senior centers across Clark County. Workshops were offered in both English and Spanish, with support groups launched at the Sahara Campus Wellness Center to sustain recovery learning beyond formal workshop hours. In August, the program also enhanced long-term capacity by training 10 new CPSMP leaders, with eight representing Nye Communities Coalition, increasing regional coverage and improving continuity of service.

Challenges related to participant transportation, technology barriers, and scheduling limitations occasionally affected completion rates, particularly among Spanish-speaking participants. However, adjustments — such as varied session times, bilingual support groups, and proactive reassurance regarding confidentiality — demonstrated early success in increasing engagement. Overall, Dignity Health's work meaningfully contributed to opioid-abatement outcomes by promoting evidence-based chronic pain strategies, reducing reliance on medication-only pain management, and expanding community recovery resources across diverse populations in Southern Nevada.

Eighth Judicial District Court - During Calendar Year 2025, Neurodiverse Education and Advocacy for Treatment (NEAT) Court advanced opioid-abatement goals by expanding early identification, assessment, and treatment navigation for justice-involved individuals with suspected neurodevelopmental impacts related to opioid use and other substances. The program delivered direct clinical supports through structured fetal alcohol spectrum disorders (FASD)/autism spectrum disorder (ASD) screenings, psychoeducation, court coordination, and treatment recommendations for participants at high risk of opioid misuse, recidivism, and treatment disengagement. Throughout the reporting period, NEAT Court maintained weekly court sessions, consistent judicial engagement, and case-by-case coordination with community treatment providers to ensure participants received appropriate services tailored to cognitive and behavioral needs.

Using a trauma-informed, neurodevelopmental lens, NEAT Court improved access to stable treatment pathways and wraparound supports. Participants received individualized case plans addressing housing, treatment linkage, mental health referrals, and recovery needs, helping reduce barriers to adherence. Challenges related to limited provider availability for specialized assessments were noted; however, NEAT Court established procedures to document referrals, track follow-up, and incorporate clinician recommendations into judicial decisions. The program also expanded data tracking efforts to strengthen reporting accuracy and improve future performance measurement.

Overall, NEAT Court demonstrated meaningful progress toward opioid-abatement goals by increasing awareness among court personnel of neurodevelopmental disorders linked to substance exposure, promoting recovery-oriented legal interventions, and ensuring treatment decisions were informed by clinically relevant assessments. By prioritizing early identification, individualized service planning, and treatment accountability, NEAT Court strengthened protective factors against relapse and recidivism for high-risk justice-involved populations and contributed to long-term opioid-use reduction in the community.

CrossRoads of Southern Nevada - In calendar year 2025, the Future Forward Transitional Age Youth (TAY) Program achieved measurable gains in behavioral health outcomes, life skills, and opioid-awareness among youth ages 18–24. A total of 41 participants engaged in partial hospitalization program (PHP) and stepped down through intensive outpatient program (IOP) and outpatient program (OP) levels of care, showing notable improvements across 13 clinical domains. Pre- and post-assessment data revealed increases in self-esteem (+1.40), relationship quality (+1.26), coping skills (+0.73), and opiate-use awareness (+1.21) — demonstrating a clear increase in recovery literacy and readiness. University of Nevada, Las Vegas (UNLV) mentorship integration was a key milestone, providing consistent life-skills training, academic navigation, budgeting, time-management, and support with free application for federal student aid (FAFSA), general educational development (GED), andcollege enrollment. Youth reported higher confidence, stronger peer connection, and greater motivation for educational and vocational planning.

The program strengthened opioid-abatement efforts by reducing isolation, increasing positive peer engagement, and addressing barriers to seeking treatment. Daily peer recovery support groups, weekly case management contact (85% completion), and opiate-education curriculum delivery expanded protective factors and reduced vulnerability to relapse. Although retention challenges were significant — as only 15 youth transitioned from PHP to IOP and 5 completed OP — new structural supports were implemented to improve continuity, including transitional housing placement, a 30/60/90-day aftercare framework with Shine a Light Foundation, and peer alumni development. Early data indicates improved social functioning from PHP to IOP (3.61 to 4.12) and strengthened perception of support services (+0.56).

By combining trauma-informed counseling, real world mentorship, and structured aftercare pathways, Future Forward is actively advancing opioid prevention and early intervention for transitional-age youth in Southern Nevada. The program is reducing help-seeking barriers, improving long-term recovery planning, and preparing young adults for sustained behavioral stability, educational participation, and workforce readiness, directly aligning with FRN goals to prevent opioid misuse and strengthen early intervention outcomes for youth in Clark County.

Inspiring Children Foundation – Inspiring Children Foundation (ICF) made significant progress this year in providing peer recovery support, youth mental health support, and progress towards Medicaid eligibility. During this reporting period, we were able to finalize our operational standards, apply to be a Medicaid provider, apply for Substance Abuse

Prevention and Treatment Agency (SAPTA) certification, and expand telehealth access for the youth we serve. This foundation allowed us to provide prevention and abatement services to youth at risk for problematic substance use in a non-traditional setting with a nontraditional workforce.

In 2026, ICF provided an average of 56.33 unduplicated youth per month with peer support services (target: 50 youth per month). Aligned with our grant, peer support sessions occurred across a variety of venues: (a) weekly transitional housing small group meals (<8 youth per mentor), (b) one-on-one meetings with peer mentor in a variety of settings, and (c) small group peer mentoring sessions (<8 youth per mentor). Additionally, our licensed psychologist provided individual therapy to 10+ youth and families per month (target: 10 per month). With services now in place, we are well positioned to continue providing peer support and mental health services in 2026.

Apple Grove Treatment Center – Apple Grove provides foster care placements for children and adolescents and provides behavioral health treatment services**.** At the end of the FY 25 program, Apple Grove was actively serving 26 individuals with a combination of therapy and case management services. They established peer support on staff, and they are connecting to Medication Assistance Treatment providers and the detox units. They are working to receive referrals from the juvenile justice system for FY26.

United Citizens Foundation – United Citizens Foundation (UCF) provided evidence-based behavioral health treatment for youth with primary or secondary exposure to opioids/substances. They are working to provide services at schools in the Clark County School District and removing service access barriers for students. They are also providing prevention training. UCF transitioned to a new electronic health record that makes it easier to extract data to provide information about services youth receive, with health factors linking to OUD misuse or potential use and outcome data. UCF staff is increasing the number of licensed professionals able to serve youth with OUD/SUD, thereby expanding services through an enhanced workforce.

Foundation for Recovery (FFR)- FFR Received permit approval from the City of Las Vegas on June 23rd. The delay in receiving an approved permit pushed the renovation project by about 30 days. Owner, Architect, Contractor (OAC) meetings were held with the construction team and architects throughout June. The new Federally Qualified Health Center (FQHC) moved into the renovated clinic space on August 1, 2025, and the grand opening was held on August 19, 2025. As of October, the FQHC is fully operational. The peer recovery support specialists have connected 79 individuals with Substance Use Disorder to primary health services at the FQHC between August 1 and December 31.

* NUMBER OF UNIQUE PATIENTS SEEN: 231 (Dec.), 838 (CUMULATIVE)

* NUMBER OF NEW PATIENTS SEEN: 52 (Dec.), 241 (CUMULATIVE)

* PRIMARY CARE: 210 (Dec.), 773 (CUMULATIVE)

* WOMEN'S HEALTH: 16 (Dec.), 52 (CUMULATIVE)

* MENTAL HEALTH/PSYCHIATRIC: 167 (Dec.), 459 (CUMULATIVE)

* DIABETIC CARE: 101 (Dec.), 402 (CUMULATIVE)

* VACCINATIONS: 0 (Dec.), 1 (CUMULATIVE)

* HIV CARE: 2 (Dec.), 10 (CUMULATIVE)

* MEDICATION MANAGEMENT: 104 (Dec.), 415 (CUMULATIVE)

College of Southern Nevada- As of September 1, 2025, the Opioid Response Initiative has engaged 222 interested candidates through various referral channels, Of these, 181 candidates were assigned for screening, with 94 forwarded to staf and 40 deemed ineligible.. A total of 29 candidates have enrolled from the referral list, with an additional three enrolled but not listed as referrals. The June 10 email blast reached 1,983 customers, yielding 51 responses by July 29, including 8 referrals to staffand 18 disqualifications.

Training participation continues to grow, with 20 individuals currently enrolled in CHW Narcan Training, most of whom began on July 29 and are expected to complete by September 18. Other active programs include EMT, CNA, Manufacturing Tech I, and Dialysis Patient Tech. Several candidates remain on hold or have opted not to proceed due to program availability or personal decisions. CSN's employer-focused training efforts are underway with active cohorts at FFR, Nye County, and Caridad Charity, while Solutions for Change remains paused due to staffing. In August, 21 applications were submitted for short-term training, with 15 returning documentation and 8 participants confirmed for upcoming cohorts starting in September and October.

Greater Youth Sports Association (GYSA) - During the reporting period, the Torrey Pines Resource Center for Youth Collaboration delivered a comprehensive, prevention-focused program serving 147 unduplicated youth and 191 total enrollments, surpassing annual targets and strengthening protective factors against opioid risk among primarily Black, Indigenous, and People of Color (BIPOC) youth in Southern Nevada. All participants received age-appropriate opioid education using the Natural High curriculum, including four full-group prevention sessions addressing fentanyl dangers, counterfeit pills, and safe decision-making. Sports activities — including basketball, volleyball, cheer, and boxing — were paired with weekly mentoring, social-emotional learning, and nutritional education through partnerships with Center Ring Boxing, Gentlemen By Choice, and UNR Extension, creating consistent, safe environments during out-of-school hours.

Parent surveys showed 75% of youth experienced social growth, 65% increased confidence, and 90% overall program satisfaction, underscoring the program's positive influence on resilience, belonging, and healthy routines — all critical opioid risk-reduction factors. Demographic data indicated that approximately 85% of participants identified as BIPOC and 69% were male, helping to reach youth disproportionately affected by substance use

exposure. Challenges included incomplete demographic and survey data in the boxing program and a transition in the mentoring partner; however, GYSA responded by implementing standardized intake tools and developing a unified mentoring and survey framework for the upcoming year.

Ackerman Center - During this reporting period, the Grant a Gift Autism Foundation Ackerman Center made important progress in launching Thriving Together: Resilient Pathways Forward, Nevada's first pilot intervention specifically designed for youth with prenatal substance exposure (PSE), fetal alcohol spectrum disorder (FASD), and neonatal abstinence syndrome (NAS). Providers developed a comprehensive program infrastructure including curriculum, intake tools, consent forms, data-tracking systems, training materials, and psychoeducation modules to support an intensive, coordinated treatment process for both youth and caregivers. The first cohort enrolled four youth and eight caregivers and successfully completed its initial five weeks of group-based intervention, with a second cohort scheduled to begin in early 2026. Initial outreach generated strong community response, with 33 interest forms completed and 25 pre-screenings conducted, demonstrating significant unmet demand for evidence-informed behavioral health services for this population.

In addition to program implementation, the Ackerman Center worked to address longstanding service gaps and stigma surrounding FASD/PSE by providing professional trainings and community awareness events. Through conference presentations, local provider education, and FASD Awareness Day outreach, the program expanded access to prevention messaging and increased knowledge among clinical partners, school staff, child advocates, and families. Despite early challenges with staffing, provider training, and scheduling, the program continues to refine delivery methods and build capacity through clinical supervision, hiring of social work interns, and development of a long-term research framework. With growing interest from families statewide, Thriving Together is positioned to strengthen early intervention, increase resilience for youth, and reduce the long-term risk of substance use and opioid misuse among one of Nevada's most vulnerable populations.

UNLV (Wastewater) - In 2025, UNLV's Wastewater Surveillance Program significantly advanced Nevada's opioid-abatement strategy by creating the state's first real-time, campus-focused wastewater monitoring system capable of detecting opioid exposure among youth and transitional-aged populations. The program deployed monitoring infrastructure across Nevada System of Higher Education (NSHE) campuses, refined analytical workflows, and generated standardized statewide protocols aligned with FRN Target Area 7.

At Nevada State University, the team collected 55 samples from key academic and residential manholes, identifying multiple heroin and acetylmorphine detections and low-level norfentanyl signals. These findings provided actionable public health insights, allowing health partners to adjust campus prevention messaging, naloxone placement, and student-risk communication strategies before clinical cases emerged.

At UNLV, a parallel upstream surveillance system generated approximately 110 samples across four dormitory-specific manholes. Data revealed consistent "micro-hotspots," where repeated opioid-associated detections prompted targeted prevention outreach and campus harm-reduction planning.

The team also built a statewide opioid-surveillance dashboard, producing 40+ visual data elements using Plotly.js, with migration to React underway for broader public health utility. Two statewide public health briefings and weekly/biweekly stakeholder reports improved situational awareness across collaborating agencies.

FirstMed Health and Wellness - In 2025, FirstMed Health and Wellness expanded transitional-age youth (TAY) housing and wraparound care services to address opioid misuse risk among young adults. The program provided safe, stable housing to 32 transitional-age youth, with 28 (88%) maintaining stable residence for at least 90 days, exceeding target stability thresholds. Each youth received individualized care plans combining mental health counseling, medication-assisted treatment (MAT) referrals where indicated, life-skills coaching, and recovery support services — resulting in 22 youth (69%) engaging in regular outpatient services within 30 days of intake, a strong indicator of treatment linkage and continuity.

FirstMed facilitated access to community-based resources and recovery networks, coordinating 154 referral and service linkages (mental health, employment, education, housing) — a 35% increase over the prior year. By integrating housing stability with clinical and peer-based support, the program strengthened protective factors against relapse, overdose, and homelessness, thereby contributing directly to opioid-abatement efforts.

Challenges included modest delays in MAT initiation for several youth due to provider scheduling limitations; however, program staff established contingency planning and rapid referral protocols moving forward. FirstMed plans to expand capacity by adding 8 more housing units and a dedicated case-management staff member in 2026, aiming to serve 50+ transitional-age youth annually.

Overall, FirstMed's combined housing stability, clinical support, and recovery linkage represent a significant, measurable stride toward reducing opioid risk and improving long-term outcomes among vulnerable transitional-age populations.

Clark County (Recuperative Care) - During calendar year 2025, the City of Las Vegas Recuperative Care Center (RCC) successfully maintained 24/7 medical respite services throughout a full relocation to an interim site, ensuring uninterrupted care for medically vulnerable individuals experiencing homelessness. A total of 118 unduplicated patients received wrap-around services, including case management, recovery support, counseling, housing navigation, and post-discharge follow-up. Despite space limitations and logistical challenges related to construction, RCC strengthened its recovery-aligned services by integrating weekly licensed clinical social worker (LCSW) counseling (35 sessions), monthly Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) groups (20 total), and 40 faith-based support sessions, helping patients stabilize after illness or injury.

RCC demonstrated strong opioid-abatement impact through coordinated peer recovery support and enhanced discharge planning. Peer specialists engaged 33 patients at discharge, providing recovery guidance, linkage to outpatient MAT providers, and connection to community behavioral health partners. Housing stability and recovery continuation were primary focus areas: RCC facilitated 118 housing searches and 61 placements, with services supported through 21 bi-weekly meetings with managed care organizations (MCOs). Transportation remained a critical factor supporting continuity of care, with 87 recovery-related medical trips coordinated to ensure follow-up adherence after discharge.

These activities directly supported opioid-misuse reduction by increasing access to essential recovery services, addressing systemic barriers related to housing, and improving culturally relevant engagement. Participation data indicate strong interest in therapeutic and spiritual services, with 75 individuals participating in faith-based and culturally responsive programming designed to reduce stigma and build recovery readiness. Although patient follow-up was challenged by inconsistent contact information and high housing demand, RCC used flexible service strategies, expanded outreach methods, and strengthened cross-agency coordination to sustain progress.

Throughout the year, RCC's efforts contributed to improved treatment access, enhanced recovery stability post-discharge, and reduced avoidable emergency utilization for patients with co-occurring behavioral health and substance-use conditions. Continuing to build peer capacity, expand post-discharge follow-up, and refine coordination with MCOs will further strengthen RCC outcomes and ensure resilient recovery pathways during the transition to the newly constructed facility.

Southern Nevada Adult Mental Health Services (SNAMHS) Crisis Response Team (CRT) - In 2025, the SNAMHS North Las Vegas CRT advanced statewide opioid-abatement efforts by expanding mobile crisis intervention, stabilizing high-risk individuals, and reducing reliance on emergency department and law-enforcement responses. As Nevada continues to experience behavioral health workforce shortages, CRT filled a critical gap by delivering immediate, community-based crisis care to individuals experiencing mental health or substance use–related emergencies.

CRT strengthened its partnerships with hospitals, EMS, law enforcement, and community providers, ensuring rapid linkages to treatment, including MAT/MOUD, outpatient behavioral health services, and detox resources. The program also expanded its clinical workforce, increasing availability of trained crisis specialists, licensed clinicians, and peer support staff who provide follow-up and stabilization services during the highest-risk windows for overdose.

CRT's efforts improve long-term opioid-abatement impact by decreasing repeated crisis episodes, enhancing continuity of care, and reducing ED boarding time for individuals with co-occurring mental health and substance use conditions. Through trauma-informed de-escalation, risk assessment, and warm handoffs, the team supports individuals in achieving

stabilization, connecting them to appropriate treatment, and decreasing future overdose risk.

Statewide

Boys & Girls Club of Southern Nevada - During this reporting period, the Nevada Alliance of Boys & Girls Clubs and the Boys & Girls Club of Southern Nevada made strong progress in advancing youth opioid-prevention efforts across Nevada through the SMART Moves program. Despite challenges caused by fluctuating attendance and school schedule changes, the program exceeded expectations and expanded prevention access statewide. SMART Moves was delivered bi-weekly across 34 clubhouses, reaching 3,117 youth ages 10–15, surpassing the annual target by 112%. A new partnership with a Clark County charter school provided daily program delivery to an additional 685 students, further strengthening community reach. Evaluation results showed clear improvement in youth knowledge, with participants demonstrating an 18% increase in understanding opioid risks and 88.4% reporting greater confidence in making healthy choices.

In addition to delivering high quality prevention education, the clubs significantly increased statewide readiness for opioid emergencies. A total of 271 staff members, more than triple the program goal, completed opioid intervention and Narcan training. Twenty-seven club sites were fully stocked with Narcan and secured storage lockers, and 92% of trained staff reported feeling confident in their ability to administer Narcan if needed. Family and community engagement also expanded, with 724 families participating in more than 14 outreach events, exceeding the goal by 226%. These events strengthened community partnerships, deepened prevention messaging, and supported safer environments for youth.

Despite early challenges, clubs adapted delivery methods to ensure consistent access and curriculum fidelity. The program's strong outcomes, expanded partnerships, and increased staff capacity position SMART Moves for continued success in strengthening youth resilience and reducing opioid misuse across Nevada.

Impact Exchange – Currently, Impact Exchange has 6 harm reduction vending machines in Las Vegas. These vending machines are the first and only of their kind in the United States. Anyone 18+ with some form of ID can come into Trac-B Exchange (6114 West Charleston Blvd, 89146) and sign up for a vending machine card, online or at their storefront. Participants have their own unique card/pin number. Once the card is swiped or punched in clients can receive the following: syringes, naloxone (injectable and nasal), pregnancy tests, safe sex kits, hygiene kits, first-aid kits, and sharps containers. All items in the vending machine are free. Each supply comes with a harm reduction message. They are also able to provide sharps through mail for individuals who cannot get to vending machines or their physical location. The FRN funding provides sharps and sharps containers.

Impact Exchange distributed nearly a half million syringes – a week's supply at a time, so there are 52 opportunities a year to connect with clients. At each visit, used syringes are collected and destroyed. Samples taken from the crushed needles are sent to a lab for analysis - through this process, substances present in the local supply are tracked regularly.

Raise the Future - In 2025, Raise the Future advanced statewide opioid-abatement efforts by strengthening permanency outcomes for youth in foster care — an evidence-based protective factor shown to reduce future substance use, opioid misuse, homelessness, and behavioral health crises. Through the Wendy's Wonderful Kids (WWK) Intensive Recruitment model, the program delivered specialized permanency services to 183 children, including 96 youth with documented prenatal or environmental exposure to substances or opioids. Nine Youth Connections Advocates exceeded annual performance expectations by securing 45 permanency matches—surpassing the combined goal of 39 — and achieving 27 finalized adoptions, guardianships, or reunifications, nearly doubling the original target of 16. These outcomes reflect a 115% achievement rate for matches and 169% of the targeted finalizations, demonstrating strong fidelity to the WWK model.

Recruiters implemented a full continuum of permanency-focused activities, including diligent searches, monthly adoption preparation sessions (reaching an average of 97 youth per month), identification of 800 potential adoptive resources monthly, and initiation of contact with an average of 71 new prospective families each month. Engagement in Child and Family Team meetings, permanency roundtables, court hearings, and multidisciplinary staffing ensured holistic planning and case coordination across Clark County Department of Family Services (CCDFS) and Nevada Division of Child and Family Services (DCFS) jurisdictions.

By preventing youth from aging out of foster care — an event strongly correlated with increased opioid vulnerability — the program directly contributes to long-term opioid-abatement. Stable, permanent family relationships interrupt cycles of trauma, reduce substance use risk, and increase access to emotional, financial, and developmental support systems.

University of Nevada, Reno, Center for the Application of Substance Abuse Technologies (CASAT) Nevada Opioid Center for Excellence (NOCE)- In this new fiscal year, NOCE hosted a public virtual training - Opioid Use Disorder in Adolescents: Medications, Evidence-Based Practices, and Family Support, and partnered with Washoe County Abatement for hosting an in-person training - Supporting Pregnant and Parenting People Who Use Substances: Moving Toward Compassionate Care on July 31. Upcoming events include a training event, Enhancing OUD Treatment in Outpatient Settings: ASAM Criteria, MAT Integration, and Continuing Care for Owyhee Community Health in August, a closed cohort training of crisis intervention team (CIT) Support Training for 911 for rural 911 operators in September, and a virtual training event - Understanding Synthetic Cannabinoids (K2/Spice): Risks, Trends, and Response in September. There is work being done to have a social media push around Overdose Awareness Day with a focus on compassionate overdose response. Season 2 of the NOCE Dose podcast will examine how

Opioid Use Disorder (OUD) impacts specific population groups that experience distinctive health vulnerabilities, including youth, older adults, individuals with disabilities and neurodivergence, birthing women and Tribal Nations. The podcast can be found here: https://nvopioidcoe.org/noce-dose/

University of Nevada, Reno, Center for the Application of Substance Abuse Technologies (CASAT) Mobile Units - University car insurance has been secured for all three vehicles, and all received a fresh oil change and tire rotation to prepare for release. The first vehicle was released to Roseman University on July 23. It is currently being housed at Carson Tahoe Regional Medical Center. WestCare has submitted an updated budget on August 6 for review. Vitality has elected to wait until the next funding period beginning on August 1. Their scope of work and budget are under review to prepare for that period.

Center for Behavioral Health- This provider was awarded funds for jail-based medication for opioid use disorder. This provider was not able to complete scope of work goals and did not bill on this award. A Request for Proposals (RFP) was released to find a new statewide vendor.

UNLV Psychology - In 2025, UNLV advanced the development of its new Bachelor of Science in Children's Behavioral Health Psychology, a workforce-expansion initiative modeled after national best practices to address Nevada's severe shortage of behavioral-health professionals. This program is designed to train undergraduates in evidence-based mental health support for children and adolescents, placing them directly into schools and community settings where early intervention is most effective.

The program completed key milestones, including the full NSHE proposal, supporting documentation, and approval from the Department of Psychology. A practicum coordinator was hired and secured multiple practicum sites and MOUs across youth-serving agencies, ensuring students will have hands-on training in diverse behavioral-health environments. The internal curriculum review process was initiated, solidifying progress toward full program launch.

This degree directly contributes to opioid-abatement goals by expanding early intervention capacity for youth — one of the strongest predictors of preventing later substance use and opioid involvement. With Nevada facing persistent provider shortages in child mental health, the program's graduates will fill essential workforce gaps in prevention, early identification, school-based counseling, and wraparound support.

These accomplishments demonstrate significant forward momentum in building a scalable, equitable, and accessible behavioral health training program. By strengthening Nevada's workforce pipeline and increasing the availability of youth behavioral health professionals, UNLV is laying the foundation for long-term opioid-abatement impact through upstream mental-health intervention and increased access to high quality care.

UNLV PsyD - In 2025, the UNLV Psy.D. Program advanced opioid-abatement efforts by expanding Nevada's behavioral health workforce pipeline with doctoral-level clinicians

trained in trauma-responsive, substance-use–informed care. Through curriculum development, practicum expansion, and faculty coordination, the program strengthened statewide capacity to treat co-occurring mental-health and substance-use conditions —key drivers of opioid vulnerability.

The program made substantial progress in developing training pathways aligned with FRN priorities. It advanced doctoral coursework integrating motivational interviewing, addiction-science principles, and family-systems approaches, ensuring future clinicians are prepared to engage individuals affected by substance misuse. Faculty and practicum supervisors expanded clinical placements in community mental-health centers, school-based programs, and integrated-care clinics that serve high-risk populations — including youth, transitional-aged adults, and individuals in recovery.

The Psy.D. program also increased capacity by formalizing partnerships with community behavioral health agencies and refining practicum agreements that place students into settings where opioid-related risks are prominent. These placements help reduce provider shortages across Nevada — a central barrier to opioid-abatement goals — while ensuring continuity of care for underserved groups.

By strengthening its academic structure and advancing applied training components, the Psy.D. program supports long-term statewide prevention and treatment strategies. Its focus on integrated care, evidence-based interventions, and culturally responsive practice directly contributes to FRN's objective to expand Nevada's behavioral health workforce and reduce opioid-related harm through improved access to high-quality, trauma-informed mental-health services.

High Sierra Area Health Education Center (AHEC) - High Sierra AHEC advanced opioid-abatement objectives by hiring a specialized Substance Use Disorder Community Health Advocate, developing training modules for both students and community health workers, and strengthening regional collaboration. The program drafted three Project RISE training modules aligned with Nevada Academic Content Standards and migrated content to Articulate 360 for asynchronous learning. Workforce development continued through bi-monthly partner meetings, research on culturally competent SUD curriculum, and engagement with prevention coalitions including Join Together Northern Nevada and CASAT. Although student implementation will begin later in the grant period, staff have presented the project to multiple stakeholder groups, resulting in at least one school expressing interest in launching the pilot cohort. Challenges related to delays in expert review slowed module finalization, but the establishment of employer engagement procedures and CHW certification alignment ensured strong long-term infrastructure. The program procured training materials, designed outreach one-pagers, and attended six relevant webinars to bolster curriculum readiness. Overall, High Sierra AHEC made foundational progress toward building a sustainable youth and CHW opioid-prevention workforce pipeline, increasing future capacity for stigma reduction, early identification, and lifesaving skill development among K-12 students and community health workers.

Foster Kinship -Foster Kinship's enhanced, evidence-based Kinship Navigator Program continued to build safety, stability, and protective environments for children impacted by parental opioid and substance misuse across Nevada. During the reporting period, the program served 265 new kinship families (132% of the annual goal) and delivered 4,639 unique services to 322 kin households affected by OUD/SUD. To ensure immediate stability and safety, families were provided with essential supports including diapers, clothing, cribs, car seats, formula, and emergency resources; 40 households received 1,163 hours of respite care, and 205 caregivers participated in new caregiver information sessions. The program achieved 99% success connecting families with safety resources at case closure.

To support permanency and legal capacity, 64 guardianships and 3 adoptions were finalized, and families received 167 public benefit applications and 89 notary or filing services, resulting in 94% of families reaching their legal stability goals and 92% securing needed financial assistance. Trauma-informed child and youth interventions were delivered through 535 activities for 168 children, improving prosocial behavior, caregiver resilience, and connection with peers. Additionally, 216 families were assigned a dedicated family advocate, and 155 cases were successfully closed, with 99% of caregivers meeting emotional support and community connection goals.

Barriers such as long waitlists at specialty behavioral health providers were noted but did not impede progress. Collectively, the program's measurable gains in legal stability, financial capacity, emotional support, and caregiver education directly reduce risk factors associated with intergenerational opioid misuse and strengthen long-term protective factors for vulnerable families across Nevada.

PACT Coalition - In 2025, the PACT Coalition strengthened Nevada's statewide opioid-prevention infrastructure by coordinating and supporting evidence-based prevention programming across all 17 counties. Through partnerships with 8 contracted coalitions, PACT delivered unified prevention strategies in urban, rural, and frontier communities, ensuring equitable youth access to opioid- and stimulant-misuse education.

PACT and its coalitions completed 8 high-risk needs assessments, identifying local youth risk profiles and informing selection of appropriate evidence-based programs (EBPs). To build statewide implementation capacity, coalition staff completed 2 formal EBP trainings, preparing 12 facilitators to deliver high-fidelity programming. Coalitions also secured buy-in from 15 schools and youth-serving agencies, expanding opportunities for prevention delivery.

Program rollout reached substantial milestones:

- 11 schools/agencies implemented EBP programming
- 292 youth received opioid/stimulant-prevention education
- 14 cohorts completed pre/post assessments
- 100% demonstrated increases in knowledge related to opioid-use prevention

In addition, 7 coalitions conducted positive-alternative activities that engaged youth in prosocial experiences designed to build protective factors and reduce vulnerability to substance use.

PACT's coordinated model elevated local prevention capacity, standardized implementation quality, and expanded access to effective youth programming statewide. By increasing early prevention, strengthening community coalitions, and ensuring fidelity to EBPs, PACT delivers measurable contributions to Nevada's long-term opioid-abatement strategy.

Changing Smiles - Changing Smiles is a dental practice serving children in Las Vegas. The practice screens children for familial opioid misuse, direct exposure, and prenatal exposure. They provide information about resources for all clients and families.

Children are brought to Changing Smiles when they experience dental pain. At their first appointment, the dentist examines the child's mouth and does x-rays. Based on the findings, he will schedule for all the dental work to be completed in one appointment. He then provides the family with tools necessary to maintain long-term oral health.

Department of Public Safety (Mass Spectrometers) - During the reporting period, the Department of Public Safety (DPS) Office of Criminal Justice Assistance (OCJA) strengthened statewide officer safety and opioid-abatement capacity by expanding access to TRUNARC devices (used for rapid identification of narcotics and controlled substances) and ensuring that local law enforcement personnel were trained in their effective use. After assuming grant management from the Department of Emergency Management (DEM), OCJA identified significant gaps in prior implementation, including undistributed devices, incomplete training, and agencies unaware of their eligibility. OCJA resolved these issues by coordinating directly with the vendor, shifting to online training to reduce time burden for agencies, and delivering five undelivered TRUNARC devices to sheriffs' offices across Nevada.

In FY 25, OCJA ordered and distributed 10 additional TRUNARC devices to local police departments following verified completion of required training. These handheld analyzers significantly increase officer safety by allowing deputies to test suspected narcotics — including fentanyl and counterfeit pills — without opening containers or risking exposure. Previous incidents of fentanyl exposure among deputies, including a 2022 case in which four Douglas County officers were hospitalized, underscore the importance of rapid field testing and risk reduction.

OCJA continues to receive requests for devices and is seeking approval to purchase 10 more units in FY 26, with a final purchase expected in FY 27. Through direct device deployment, improved training processes, and stronger law-enforcement coordination, OCJA ensured 100% increased officer safety for agencies receiving devices and materially contributed to opioid-abatement efforts by preventing accidental exposure to lethal substances during field operations.

Nevada Department of Corrections (Mail Scanners, Body Scanners) - Nevada Department of Corrections (NDOC) interceptions include chemically treated paper, chemically treated envelopes, and altered envelopes/stamps. Of the 41 interceptions, 35 were designated as potential "spice", 5 as another substance, and 1 as contraband. An increasing trend has been identified where bug spray is being added to other illicit and synthetic compounds. Another method that some persons have attempted to utilize to circumvent use of this equipment is to remove a certain amount of ink from a standard printer cartridge and then inject the illicit substance and/or including bug spray in order to "print" a letter and introduce those substances into the facilities. The technology utilized helps NDOC determine that it can provide feedback on any "chemically" treated paper or stamps that could be used as an effective method of introduction of illicit substances. NDOC staff have recently intercepted strips soaked in an unknown substance and hidden underneath stamps on the incoming mail.

Division of Health Care Financing and Policy (Medicaid Waiver)- The Division of Health Care Financing and Policy (DHCFP) waiver application was turned in, and the project continues to await approval processes through Centers for Medicare and Medicaid Services (CMS).

Division of Public and Behavioral Health (ODMAP)- The Overdose Detection Mapping Application Program (ODMAP) is a free, web-based, mobile- friendly platform to support reporting and surveillance of confirmed and suspected fatal and nonfatal overdoses. ODMAP allows users to integrate data collected by existing record management systems (RMS) through an Application Program Interface (API). This document provides an overview of how the ODMAP API functions, considerations for determining the feasibility of using an API, guidance for defining a suspected overdose case with an API, and lessons learned from the field. This project continues to link the ODMAP API for Nevada Emergency Medical Services (EMS).

Division of Public and Behavioral Health (Poison Control)- The Rocky Mountain Poison and Drug Safety (RMPDS) program is Nevada's 24-hour poison control vendor providing services that include a hotline for the public and healthcare providers in need of technical assistance with poison related incidents. In addition to the 24-hour poison control hotline, RMPDS also provides an array of customizable reports that can be used to support program and public health decisions. Reports are provided quarterly, and a final annual report is compiled with varying insights and data elements related to number of calls, type of calls, outcomes, substance, age, gender, location, etc. There has been an increase in opioid exposures in urban areas resulting in increased contacts.

Nevada Public Health Foundation - Nevada Public Health Foundation (NPHF) advanced statewide opioid-abatement efforts by delivering a comprehensive best-practice framework designed specifically for rural, frontier, and justice-involved populations —groups disproportionately affected by opioid misuse and treatment gaps. Through system-level coordination, evidence-based recommendations, and cross-agency engagement, the

program strengthened Nevada's capacity to implement effective intervention and prevention strategies within rural justice settings.

The program synthesized national evidence, state-level data trends, and rural-specific implementation barriers into a structured guidance document addressing screening, referral pathways, care coordination, MAT/MOUD access, peer support integration, deflection models, and cross-system communication. This framework supports courts, sheriff's offices, rural jails, probation departments, and community-based providers in improving continuity of care during critical transition points, such as release from custody or treatment reentry — moments when overdose risk is highest.

The project also emphasized workforce capacity, outlining staffing and training models that allow rural agencies to incorporate trauma-informed, substance-use–informed, and culturally responsive practices despite limited personnel. Recommendations on data collection, evaluation, and community partnerships help counties identify opioid trends and allocate resources strategically.

By establishing a statewide rural justice best-practice standard, the program delivers significant long-term opioid-abatement value. It equips rural agencies with actionable strategies to reduce relapse and overdose, strengthen diversion and reentry pathways, expand treatment access, and embed recovery supports into justice-involved systems. These improvements position rural counties to respond more effectively to opioid-related harm and promote recovery-oriented outcomes across Nevada.

Nevada Broadcasters Association - Nevada Broadcasters Association recruited a team to develop a statewide television and radio public education campaign to promote and educate law enforcement and the public on how and when to use an opioid antagonist to reverse overdoses and save lives.

Nevada Public Health Foundation (Facilitate Joy!) - Facilitate Joy, through the Nevada Public Health Foundation, trained 703 Division of Supportive Services Staff in 2025 in Neurodevelopmental conditions which can also be confused with substance use disorders. This training was provided to provide knowledge, enhance customer service, and increase safety for staff.

UNR Multi-Tiered System of Supports (MTSS) – MTSS was well received and appreciated. It was a worthwhile endeavor to create curriculum and adaptations to training and coaching to allow for substance prevention in schools. School teams were trained to identify and respond to substance misuse in schools and to implement prevention programming. Direct coaching with district administrators occurred on an ongoing basis for participating school districts. 15 coaching events and 18 trainings were provided, training 418 participants involved in 299 schools. School districts involved in MTSS were State Public School Charter Authority and Churchill, Carson City, Clark, Douglas, Elko, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and Washoe County School Districts.

Recommendations

Based on current findings, it is recommended that the Fund for a Resilient Nevada (FRN) maintain or, where appropriate, cautiously decrease funding allocations until comprehensive program evaluations are completed to ensure compliance with opioid recovery requirements and alignment with intended abatement outcomes. Funding priorities will continue to emphasize overdose prevention, harm reduction, reduction of disparities in access to health care, and long-term generational change through youth-focused interventions.

FRN will continue to operate in alignment with the 2022 Nevada Opioid Needs Assessment and Statewide Plan until the updated assessment and revised statewide plan are finalized in December 2026. Upon completion, funding priorities and project strategies may be adjusted to reflect evaluation findings, updated data trends, stakeholder input, and guidance from the Advisory Committee for a Resilient Nevada, which has recently welcomed new board appointments.

FRN will also continue to monitor and consider the use of opioid settlement funds by One Nevada Agreement signatories to identify opportunities for coordination, efficiency, and enhanced statewide impact.

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Expenditures

Expenditure tables are provided in the following section in accordance with NRS 433.734–433.740. These tables document the revenue and expenditure of FRN funds.

BA3060 Fund For Resilient Nevada Actuals SFY 2023-2026

Revenue

CAT	RGL	GL Description	7/1/22-6/30/23 2023	7/1/23-6/30/24 2024	7/1/24-6/30/25 2025	7/1/25-12/31/25 2026	Total
00	2511	BALANCE FWD FROM PREV YEAR	$ 28,209,245	$ 46,410,767	$ 79,937,680	$ 103,074,625	$ 257,632,317
	2512	BALANCE FWD TO NEW YEAR	$ (46,410,766)	$ (79,937,679)	$ (103,074,624)	$ -	$ (229,423,069)
	4287	OPIOID SETTLEMENT FUNDS	$ 18,055,023	$ 36,008,167	$ 31,489,862	$ 13,145,556	$ 98,698,607
	4326	TREASURER'S INTEREST DISTRIB	$ 1,069,067	$ 2,277,996	$ 4,080,170	$ 1,154,093	$ 8,581,326
	4611	TRANSFER IN FED ARPA	$ 7,968				$ 7,968
Total Revenue			**$ 930,536**	**$ 4,759,251**	**$ 12,433,088**	**$ 117,374,274**	**$ 135,497,149**

Expenditures

CAT	GL	GL Description	7/1/22-6/30/23 2023	7/1/23-6/30/24 2024	7/1/24-6/30/25 2025	7/1/25-12/31/25 2026	Total
01	5100	SALARIES	$ 404,463	$ 454,661	$ 534,741	$ 246,103	$ 1,639,968
01	5120	FURLOUGH ADJUSTMENTS	$ 7,968	$ -	$ -	$ -	$ 7,968
01	5200	WORKERS COMPENSATION	$ 4,364	$ 7,350	$ 8,938	$ 1,513	$ 22,164
01	5300	RET CONT EMPLOYER PAY PLAN	$ 13,023	$ (0)	$ 17,108	$ 12,537	$ 42,667
01	5301	RET CONT EMPLOYEE/EMPLOYER PLN	$ 60,424	$ 87,626	$ 95,731	$ 49,826	$ 293,608
01	5400	PERSONNEL ASSESSMENT	$ -	$ 1,178	$ 1,183	$ 1,607	$ 3,968
01	5420	COLLECTIVE BARGAINING ASSESSMT	$ 12	$ 36	$ 26	$ 20	$ 94
01	5430	LABOR RELATIONS ASSESSMENT	$ -	$ 398	$ 398	$ 596	$ 1,392
01	5500	GROUP INSURANCE	$ 57,330	$ 63,262	$ 59,341	$ 41,622	$ 221,555
01	5610	SICK LEAVES	$ 11,805	$ 12,268	$ 23,616	$ 14,583	$ 62,272
01	5620	ANNUAL LEAVES	$ 13,899	$ 32,227	$ 37,229	$ 19,171	$ 102,525
01	5630	HOLIDAY LEAVES	$ 1,273	$ 2,733	$ 1,468	$ 9,520	$ 14,993

01	5640	COMP TIME LEAVES	$ 812	$ -	$ 493	$ 1,966	$ 3,271
01	5650	OTHER LEAVES	$ 1,356	$ -	$ 459	$ 2,461	$ 4,276
01	5700	PAYROLL ASSESSMENT	$ -	$ 218	$ 220	$ 501	$ 939
01	5750	RETIRED EMPLOYEES GROUP INSURA	$ 9,722	$ 15,609	$ 19,009	$ 7,804	$ 52,144
01	5800	UNEMPLOYMENT COMPENSATION	$ 593	$ 320	$ -	$ -	$ 913
01	5810	OVERTIME PAY	$ -	$ -	$ 625	$ 4,225	$ 4,850
01	5840	MEDICARE	$ 6,301	$ 7,160	$ 8,512	$ 4,241	$ 26,214
01	5860	BOARD AND COMMISSION PAY	$ 4,240	$ 2,800	$ -	$ -	$ 7,040
01	5930	LONGEVITY PAY	$ -	$ -	$ 100	$ -	$ 100
01	5970	TERMINAL ANNUAL LEAVE PAY	$ -	$ -	$ 1,670	$ -	$ 1,670
Total Cat 01 Personnel			**$ 597,583**	**$ 687,847**	**$ 810,865**	**$ 418,296**	**$ 2,514,591**
02	6100	PER DIEM OUT-OF-STATE	$ 2,648	$ 2,578	$ 4,704	$ -	$ 9,930
02	6130	PUBLIC TRANS OUT-OF-STATE	$ 199	$ 290	$ 161	$ -	$ 650
02	6140	PERSONAL VEHICLE OUT-OF-STATE	$ 77	$ 94	$ 343	$ -	$ 514
02	6150	COMM AIR TRANS OUT-OF-STATE	$ 1,774	$ 2,768	$ 2,233	$ -	$ 6,775
02	6151	COMM AIR TRANS OUT-OF-STATE-A	$ -	$ 70	$ 70	$ -	$ 140
Total Cat 02 Out Of State Travel			**$ 4,699**	**$ 5,800**	**$ 7,510**	**$ -**	**$ 18,009**
03	6200	PER DIEM IN-STATE	$ 248	$ 1,050	$ 1,174	$ -	$ 2,472
03	6210	MP DAILY RENTAL IN-STATE	$ 42	$ -	$ -	$ 12	$ 54
03	6215	NON-MP VEHICLE RENTAL I/S	$ -	$ 156	$ 557	$ -	$ 713
03	6220	AUTO MISC - IN-STATE	$ -	$ -	$ 20	$ -	$ 20
03	6230	PUBLIC TRANSPORTATION IN-STATE	$ -	$ 119	$ -	$ -	$ 119
03	6240	PERSONAL VEHICLE IN-STATE	$ 143	$ 365	$ 94	$ -	$ 602
03	6250	COMM AIR TRANS IN-STATE	$ 1,736	$ 2,220	$ 2,459	$ 525	$ 6,940
Total Cat 03 In State Travel			**$ 2,169**	**$ 3,910**	**$ 4,304**	**$ 537**	**$ 10,920**
04	7020	OPERATING SUPPLIES	$ -	$ 465	$ 785	$ -	$ 1,250
04	7030	FREIGHT CHARGES	$ 13	$ -	$ -	$ -	$ 13
04	7044	EXCESS PRINT CHARGES-COPIERS	$ -	$ 74	$ 404	$ 68	$ 545
04	7050	EMPLOYEE BOND INSURANCE	$ -	$ 15	$ 15	$ 39	$ 69
04	7051	PROPERTY & CONTENT INSURANCE	$ -	$ 78	$ 78	$ 1,066	$ 1,222

04	7054	AG TORT CLAIM ASSESSMENT	$	-	$	698	$	699	$	1,370	$	2,767
04	7060	CONTRACTS	$	-	$	16	$	-	$	-	$	16
04	7110	NON-STATE OWNED OFFICE RENT	$	1,845	$	17,450	$	38,540	$	42,698	$	100,533
04	7255	B & G LEASE ASSESSMENT	$	-	$	49	$	50	$	817	$	916
04	7285	POSTAGE - STATE MAILROOM	$	30	$	8	$	12	$	-	$	51
04	7289	EITS PHONE LINE AND VOICEMAIL	$	51	$	-	$	683	$	249	$	983
04	7291	CELL PHONE/PAGER CHARGES	$	1,788	$	2,243	$	2,252	$	778	$	7,062
04	7296	EITS LONG DISTANCE CHARGES	$	18	$	-	$	-	$	-	$	18
04	7302	REGISTRATION FEES	$	1,350	$	1,290	$	3,515	$	1,800	$	7,955
04	7460	EQUIPMENT PURCHASES < $1,000	$	570	$	-	$	-	$	-	$	570
04	7630	MISCELLANEOUS GOODS, MATERIALS	$	226	$	-	$	-	$	-	$	226
04	7980	OPERATING LEASE PAYMENTS	$	-	$	147	$	849	$	462	$	1,458
Total Cat 04 Operating			**$**	**5,891**	**$**	**22,535**	**$**	**47,881**	**$**	**49,347**	**$**	**125,654**
08	7060	CONTRACTS	$	93,796	$	54,356	$	-	$	-	$	148,152
08	7630	MISCELLANEOUS GOODS, MATERIALS	$	-	$	-	$	-	$	1,720	$	1,720
Total Cat 08 Needs Assessment			**$**	**93,796**	**$**	**54,356**	**$**	**-**	**$**	**1,720**	**$**	**149,872**
10	7020	OPERATING SUPPLIES	$	-	$	-	$	571	$	-	$	571
10	7044	EXCESS PRINT CHARGES-COPIERS	$	-	$	-	$	90	$	22	$	113
10	7060	CONTRACTS	$	41,944	$	84,793	$	0	$	-	$	126,737
10	7061	CONTRACTS - A	$	-	$	-	$	1,067	$	559	$	1,625
10	7062	CONTRACTS - B	$	13,389	$	60,284	$	101,243	$	43,727	$	218,643
10	7063	CONTRACTS - C	$	-	$	-	$	-	$	99,000	$	99,000
10	7064	CONTRACTS - D	$	-	$	-	$	292,172	$	171,341	$	463,513
10	7073	SOFTWARE LICENSE/MNT CONTRACTS	$	-	$	-	$	336	$	37	$	374
10	7110	NON-STATE OWNED OFFICE RENT	$	-	$	-	$	12,847	$	13,091	$	25,937
10	7285	POSTAGE - STATE MAILROOM	$	-	$	-	$	2	$	-	$	2
10	7289	EITS PHONE LINE AND VOICEMAIL	$	-	$	-	$	341	$	78	$	419
10	7547	EITS PRODUCTIVITY SUITE	$	-	$	-	$	852	$	337	$	1,189
10	7980	OPERATING LEASE PAYMENTS	$	-	$	-	$	202	$	154	$	356
10	8270	SPECIAL EQUIPMENT >$5,000	$	-	$	-	$	-	$	505,907	$	505,907

10	8371	COMPUTER HARDWARE <$5,000 - A	$	-	$	6,190	$	-	$	-	$	6,190
10	8501	EXPENDITURES CARSON CITY CO	$	-	$	-	$	19,817	$	100,524	$	120,341
10	8503	EXPENDITURES CLARK CO	$	-	$	-	$	109,744	$	182,761	$	292,505
10	8504	EXPENDITURES DOUGLAS CO	$	-	$	-	$	145,920	$	86,419	$	232,339
10	8511	EXPENDITURES LYON CO	$	-	$	28,490	$	179,703	$	114,019	$	322,211
10	8515	EXPENDITURES STOREY CO	$	-	$	-	$	114,137	$	75,412	$	189,549
10	8516	EXPENDITURES WASHOE CO	$	-	$	-	$	250,960	$	249,004	$	499,964
10	8526	EXPENDITURES CITY OF LAS VEGAS	$	-	$	-	$	562,660	$	-	$	562,660
10	8642	COMMUNITY COLLEGE OF SO NEVADA	$	-	$	-	$	60,231	$	56,764	$	116,994
10	8647	UNIVERSITY OF NEVADA RENO	$	-	$	1,201,706	$	1,597,190	$	120,557	$	2,919,453
10	8648	UNIVERSITY OF NEVADA LAS VEGAS	$	-	$	-	$	845,693	$	322,315	$	1,168,008
10	8750	AID TO PRIVATE ORGANIZATIONS	$	-	$	-	$	92,075	$	21,187	$	113,263
10	8780	AID TO NON-PROFIT ORGS	$	141,044	$	488,080	$	1,823,470	$	381,121	$	2,833,715
10	8781	AID TO NON-PROFIT ORGS-A	$	-	$	264,129	$	819,656	$	293,115	$	1,376,900
10	8782	AID TO NON-PROFIT ORGS-B	$	-	$	179,869	$	412,039	$	139,296	$	731,203
10	8783	AIDTO NON-PROFIT ORGS-C	$	-	$	9,210	$	257,701	$	156,975	$	423,886
10	8784	AID TO NON-PROFIT ORGS-D	$	-	$	190,159	$	430,422	$	29,102	$	649,684
10	8785	AIDTO NON-PROFIT ORGS-E	$	-	$	-	$	605,775	$	475,198	$	1,080,973
10	8786	AIDTO NON-PROFIT ORGS-F	$	-	$	-	$	176,391	$	503,085	$	679,476
10	8787	AID TO NON-PROFIT ORGS-G	$	-	$	-	$	51,004	$	154,500	$	205,505
10	8788	AID TO NON-PROFIT ORGS-H	$	-	$	-	$	591,642	$	218,409	$	810,050
10	8789	AID TO NON-PROFIT ORGS-I	$	-	$	-	$	226,879	$	244,033	$	470,912
10	9019	TRANS TO VETERANS AFFAIRS	$	-	$	-	$	-	$	10,989	$	10,989
10	9026	TRANS TO PUBLIC SAFETY	$	-	$	-	$	368,403	$	-	$	368,403
10	9037	TRANSFER TO DHCFP	$	-	$	155,308	$	622,569	$	-	$	777,877
10	9043	TRANS TO HEALTH DIVISION	$	24,149	$	24,149	$	172,817	$	-	$	221,115
10	9044	TRANS TO WELFARE DIVISION	$	-	$	-	$	138,115	$	-	$	138,115
10	9115	TRANS TO OFF OF EMERGENCY MGMT	$	-	$	1,169,056	$	-	$	-	$	1,169,056
10	9116	TRANS TO CORRECTIONS	$	-	$	-	$	337,363	$	-	$	337,363
10	9122	TRANS TO OTHER STATE AGENCY	$	-	$	-	$	33,570	$	-	$	33,570

Total Cat 10 Opioid Allocation			**$**	**220,526**	**$**	**3,861,423**	**$**	**11,455,667**	**$**	**4,769,037**	**$**	**20,306,653**
11	9038	TRANS TO HUMAN RES DIR OFFICE	$	-	$	61,042	$	44,005	$	-	$	105,046
Total Cat 11 Transfer to 3203			**$**	**-**	**$**	**61,042**	**$**	**44,005**	**$**	**-**	**$**	**105,046**
26	7073	SOFTWARE LICENSE/MNT CONTRACTS	$	1,457	$	-	$	710	$	-	$	2,166
26	7138	OTHER UTILITIES	$	-	$	6	$	-	$	-	$	6
26	7460	EQUIPMENT PURCHASES < $1,000	$	240	$	-	$	-	$	-	$	240
26	7547	EITS PRODUCTIVITY SUITE	$	1,941	$	2,224	$	2,449	$	1,155	$	7,770
26	7554	EITS INFRASTRUCTURE ASSESSMENT	$	-	$	1,851	$	1,846	$	2,654	$	6,351
26	7556	EITS SECURITY ASSESSMENT	$	-	$	650	$	649	$	705	$	2,004
26	7771	COMPUTER SOFTWARE <$5,000 - A	$	312	$	448	$	-	$	-	$	760
26	8371	COMPUTER HARDWARE <$5,000 - A	$	1,922	$	1,594	$	490	$	9,069	$	13,075
Total Cat 26 Information Services			**$**	**5,872**	**$**	**6,773**	**$**	**6,144**	**$**	**13,583**	**$**	**32,372**
60	7394	COST ALLOCATION - A	$	-	$	55,566	$	56,712	$	219,327	$	331,605
Total Cat 60 Cost Allocation			**$**	**-**	**$**	**55,566**	**$**	**56,712**	**$**	**219,327**	**$**	**331,605**
86	9178	DO NOT USE-BUDGET USE ONLY	$	-	$	-	$	-	$	-	$	-
Total Cat 86 Reserves			**$**	**-**	**$**	**-**	**$**	**-**	**$**	**-**	**$**	**-**
Total Expenditure			**$**	**930,536**	**$**	**4,759,251**	**$**	**12,433,088**	**$**	**5,471,847**	**$**	**23,594,722**
											$	-
Ending Balance			**$**	**0**	**$**	**0**	**$**	**0**	**$**	**111,902,426**	**$**	**111,902,426**

This report is respectfully submitted by the Nevada Department of Health and Human Services