ADOPTED REGULATION OF THE

BUREAU OF ALCOHOL AND DRUG ABUSE

LCB File No. R100-98

Effective November 3, 1998

EXPLANATION - Matter in *italics* is new; matter in brackets [] is material to be omitted.

AUTHORITY: §§1-24, 26-36, 38-41, 45, 47-55, 58-95, 96, 98 and 99, NRS 458.025; §§25, 37, 42-44, 46, 56, 57, 96, 97 and 100, NRS 458.025 and 458.055.

- **Section 1.** Chapter 458 of NAC is hereby amended by adding thereto the provisions set forth as sections 2 to 59, inclusive, of this regulation.
- **Sec. 2.** "Accredited college or university" means a college or university that is accredited by a national or regional accrediting agency that is recognized by the United States

 Department of Education.
- **Sec. 3.** "Assessment" means an evaluation of a client's patterns of substance use and associated impairments in functioning that is based upon comprehensive biopsychosocial information for purposes which include, without limitation:
 - 1. Making a diagnosis;
 - 2. Providing a referral;
 - 3. Planning treatment; or
- 4. Classifying a person as an alcoholic, addict or abuser of controlled substances or alcohol and determining appropriate treatment recommendations.
 - **Sec. 4.** "Client" means a recipient of a service.

- **Sec. 5.** "Clinical contact" means contact with a client for the purpose of providing clinical service.
 - **Sec. 6.** "Clinical program" means:
 - 1. A program for treatment providing a service that has been approved by the state;
 - 2. A forensic program providing a service that has been approved by the state;
 - 3. An intake and referral service that has been approved by the state; or
 - 4. An early intervention service that has been approved by the state.
- **Sec. 7.** "Clinical service" means assessment of a client, treatment of a patient or providing the service of a clinical program.
- **Sec. 8.** "Coordination of care" means the exchange of information between two or more parties providing service to a client to ensure that the efforts of the parties are coordinated with one another in providing service to the client.
 - **Sec. 9.** *"Forensic program" means a program which provides:*
 - 1. A civil protective custody service that has been approved by the state;
 - 2. An evaluation center service that has been approved by the state; or
 - 3. A drug court service that has been approved by the state.
- **Sec. 10.** "Hours of training" means training that is approved by the bureau and relevant to treatment of abuse of alcohol and other drugs, not less than half of which is training specific to activities that are authorized by the registration or certification of the person taking the training, with training in a specific topic counted no more than once during a period of registration or certification.

- **Sec. 11.** "Major exception to compliance" means noncompliance by a program with a law that results in:
- 1. A condition which poses a significant hazard to the health or safety of the clients or staff of, or visitors to, the program;
- 2. Significant impairment of the quality of services which the staff of the program provides;
 - 3. Significant mismanagement by the owner or operator of the program;
 - 4. Significant fiscal mismanagement by the owner or operator of the program; or
- 5. Formal criminal charges being brought against the owner, operator or staff of the program.
 - **Sec. 12.** "Patient" means a client who receives treatment.
 - **Sec. 13.** *"Program for treatment" includes:*
- 1. A service that has been approved by the state, other than a service for early intervention, which meets the criteria for a level of service as specified in "Patient Placement Criteria for the Treatment of Substance-Related Disorders," Second Edition; and
 - 2. Any other service that has been so designated by the bureau.
 - **Sec. 14.** "Service" means an activity that is:
- 1. Directed toward the prevention, intervention or treatment of abuse of alcohol and other drugs; and
- 2. Approved by the state or is authorized to be performed pursuant to certification or registration issued by the bureau.

- **Sec. 15.** "Service that has been approved by the state" means a service for which the owner of the program that is providing the service has been issued a certificate of approval to provide the service pursuant to NAC 458.280.
 - **Sec. 16.** "Staff" means the employees, volunteers and consultants of a program.
- **Sec. 17.** "Treatment" means the care of substance use disorders through detoxification, medication or counseling or any combination thereof.
- **Sec. 18.** "Vital signs" means the blood pressure, respiration rate, pulse rate and temperature of a patient.
- **Sec. 19.** "Volunteer" means a person who provides a service of a program without compensation more than 1 day per year.
- **Sec. 20.** Upon receiving a request from an applicant for certification or registration or for renewal of certification or registration, the chief or his designee may grant a waiver of any requirement set forth in NAC 458.121 to 458.205, inclusive, and section 21 of this regulation.
- **Sec. 21.** 1. Upon receiving an application for certification or registration, the bureau will review the application and determine whether to issue the certification or registration pursuant to the provisions of this section.
- 2. The bureau will mail its determination to the applicant at the last known address of the applicant.
- 3. If the application is for registration as a counselor intern, the bureau will issue a evidence of registration at the time the application is approved.
 - 4. The bureau may reject an application if the applicant:
 - (a) Fails to file a complete application as specified by the bureau;

- (b) Does not meet the minimum requirements for the registration for which the person is applying or the minimum requirements of the examination for the certification for which the person is applying;
 - (c) Includes false information on his application;
 - (d) Has previously had his certification or registration revoked by the bureau;
- (e) Fails to submit a verification of his background that has been approved by the bureau; or
- (f) Has been convicted during the 2 years immediately preceding his application of any crime other than a violation of a traffic law that does not involve alcohol or a controlled substance.
- 5. The bureau will retain a rejected application for 6 months after the bureau receives the application.
- **Sec. 22.** 1. An applicant for certification or registration may request a hearing concerning a decision of the bureau regarding his application, certification or registration pursuant to section 59 of this regulation.
- 2. An applicant must submit a request for a hearing concerning a decision of the bureau on his application for certification or registration to the bureau not later than 30 days after the bureau notifies the person of its decision.
- **Sec. 23.** Upon receiving a request from a person who is registered with or certified by the bureau, the chief or his designee may grant a waiver of any requirement concerning training set forth in NAC 458.235 to 458.251, inclusive.

- **Sec. 24.** Upon receiving a request from the operator of a program or his designee, the chief or his designee may grant a waiver of any requirement set forth in NAC 458.270 to 458.430, inclusive, and sections 39 to 56, inclusive, of this regulation.
 - **Sec. 25.** *The qualifications for certification as a certified counselor are:*
- 1. Submission to the bureau of a completed application for certification as a certified counselor;
 - 2. One of the following:
- (a) Licensure in this state as a physician, psychologist, marriage and family therapist, or clinical social worker, and 6 months of employment under clinical supervision;
- (b) Certification or licensure in another state as a certified counselor, provided that certification or licensure was issued pursuant to standards at least as stringent as the requirements of this chapter for certification as a certified counselor;
 - (c) A combination of education and experience consisting of:
- (1) A high school diploma or certificate of general educational development, and 5 years of employment under clinical supervision after receiving the diploma or certificate;
- (2) An associate's degree from an accredited college or university and 4 years of employment under clinical supervision after completing the degree;
- (3) An associate's degree in counseling for addictions from an accredited college or university and 3 years of employment under clinical supervision after completing the degree;
- (4) A bachelor's degree from an accredited college or university and 2 years of employment under clinical supervision after completing the degree;

- (5) A bachelor's degree with a major or a minor in counseling for addictions from an accredited college or university and 18 months of employment under clinical supervision after completing the degree;
- (6) A graduate degree from an accredited college or university and 1 year of employment under clinical supervision after completing the degree; or
- (7) A graduate degree in counseling for addictions, or with a minor in counseling for addictions, from an accredited college or university, and 6 months of employment under clinical supervision after completing the degree;
- 3. Completion of a program of training approved by the bureau that addresses each of the following:
 - (a) Resources in this state for treatment for the abuse of alcohol and other drugs;
 - (b) Applicable statutes in this state;
 - (c) Requirements of the bureau for clinical records and planning of treatment; and
 - (d) Classifications of the abuse of alcohol and other drugs;
 - 4. A passing score on a written examination for certification as a certified counselor; and
 - 5. A passing score on an oral examination for certification as a certified counselor.
 - **Sec. 26.** *The qualifications for certification as a detoxification technician are:*
- 1. Submission to the bureau of a completed application for certification as a detoxification technician:
- 2. Education consisting of a minimum of a high school diploma or a certificate of general educational development;
 - 3. Certification in cardiopulmonary resuscitation; and

- 4. A passing score on an examination for certification as a detoxification technician.
- **Sec. 27.** The qualifications for certification in a counseling specialty area established by the bureau are:
- 1. Submission to the bureau of a completed application for certification in a specialty area established by the bureau;
 - 2. Certification as a certified counselor;
 - 3. At least one year of employment in the counseling specialty area;
- 4. A passing score on a written examination for certification in the counseling specialty area; and
- 5. A passing score on an oral examination for certification in the counseling specialty area.
 - **Sec. 28.** A certified counselor may:
- 1. Perform, independent of clinical supervision, those activities authorized for a counselor intern in of NAC 458.146, with the exception of presenting himself to the public as a counselor intern; and
- 2. Present himself to the public as a certified alcohol and drug counselor and use the initials "CADC" to indicate that fact.
 - **Sec. 29.** A person who is certified by the bureau in a counseling specialty area may:
- 1. Perform activities that the bureau authorizes a person who is certified in the counseling specialty area to perform; and
 - 2. Present himself to the public as certified by the bureau in the counseling specialty area.
 - **Sec. 30.** A person who is certified as a detoxification technician may:

- 1. Perform detoxification screening pursuant to the standards established by the bureau; and
 - 2. Present himself to the public as certified by the bureau as a detoxification technician.
- **Sec. 31.** 1. Initial registration and renewal of registration as a counselor intern each remain valid for a period of 6 months.
- 2. Registration as a counselor intern may be renewed until the person is eligible to take the examination for certification as a certified counselor.
- 3. A person may not be registered as a counselor intern for a period exceeding 10 consecutive years.
- 4. To renew registration before the expiration date of the current registration, a counselor intern must submit to the bureau:
 - (a) A nonrefundable fee in an amount specified by the bureau.
- (b) The following documentation signed by the person or persons providing clinical supervision to the counselor intern:
- (1) Verification that the person or persons providing clinical supervision are authorized by the bureau to do so.
- (2) Verification that at least 1 hour of clinical supervision has been provided within each period of 2 weeks. The clinical supervision must include, without limitation, a review of the counselor intern's activities during the period and the progress of the intern in satisfying the requirements for certification as a certified counselor. Clinical supervision of counselor interns must not occur in a group that exceeds 10 counselor interns at any one time.

- (3) Verification that observation by the person or persons providing clinical supervision has been made of at least one assessment or counseling session conducted by the counselor intern each month. The person or persons providing clinical supervision to the counselor intern may use recordings of the session of assessment or counseling to conduct the observation.
- (4) Documentation specifying the activities of the counselor intern during the period of registration for which the person or persons provided clinical supervision.
- (5) Evaluation by the person or persons providing clinical supervision of the counselor intern's ability to adhere to standards of practice of this chapter and of the intern's clinical competence.
 - (c) Documentation verifying compliance with the requirements of NAC 458.235.
- 5. The fee and documentation required pursuant to this section must be postmarked or received by the bureau on or before 12 a.m. of the date of expiration of the person's registration. A person who submits the fee or documentation after this deadline but not later than 60 days after the date of expiration of the person's registration will be assessed a late fee of \$50.
- 6. The bureau will deny an application for renewal of registration that is postmarked or received later than 60 days after the date of expiration of the person's registration. Such a person may reapply for registration.
- 7. The bureau may destroy the person's registration file one year after expiration of registration.
- **Sec. 32.** 1. Upon sending a written application to and receiving approval by the bureau, a person may place his certification or registration in inactive status at the time of expiration.

- 2. The bureau, upon approving the application, will charge the person a nonrefundable fee of \$50 that the applicant must pay before the bureau will grant or renew the certification or registration.
- 3. The bureau will allow a person to place his certification or registration in inactive status for a period of not longer than 1 year.
- 4. A person may renew his certification or registration before the expiration of the period of inactive status by submitting an application for renewal and the fee required pursuant to subsection 2.
- 5. The bureau will deny an application for renewal of certification or registration in inactive status if the application is postmarked or received after the expiration of inactive status. A person who sends such an application may reapply for certification or registration.
- **Sec. 33.** 1. A person who performs assessment or counseling for abuse of alcohol and other drugs and who holds himself out to the public as a certified counselor must be certified by the bureau as a certified counselor and shall comply with the standards of practice of this chapter.
- 2. A person who performs assessment or counseling for abuse of alcohol and other drugs and who holds himself out to the public as a counselor intern shall:
 - (a) Register with the bureau as a counselor intern;
 - (b) Perform assessment and counseling only under clinical supervision; and
 - (c) Comply with the standards of practice of this chapter.
- 3. A person who is not a certified counselor or counselor intern may perform assessment and counseling for abuse of alcohol and other drugs under clinical supervision:

- (a) Until the person submits a completed application for registration as a counselor intern to the bureau or for 30 days after commencing to perform assessment and counseling, whichever occurs first;
- (b) If the person is awaiting the results of the examination for certification as a certified counselor or a decision on certification as a certified counselor; or
- (c) Until the person submits a completed application for certification as a certified counselor to the bureau or for 30 days after commencing to perform assessment and counseling, whichever occurs first. Such a person must take the next scheduled examination for certification as a certified counselor after he receives notice that the bureau has approved his application. If the person does not pass the next scheduled examination, he may:
- (1) Continue to perform assessment and counseling under clinical supervision until the person submits a completed application for registration as a counselor intern to the bureau or for 30 days after commencing to perform assessment and counseling, whichever occurs first; or
 - (2) Discontinue performing assessment and counseling.
 - 4. A person providing counseling and assessment while under clinical supervision shall:
- (a) Obtain clinical supervision from a person or persons who are authorized by bureau policy to do so;
- (b) Submit to the bureau the name of the person or persons acting as his clinical supervisor; and
- (c) Notify the bureau in writing not later than 10 business days after the person obtains clinical supervision from a person not on the list previously submitted to the bureau.

- **Sec. 34.** 1. Examinations for certification as a certified counselor, detoxification technician or for a counseling specialty area will be given at least twice a year on dates established by the bureau.
- 2. The bureau must approve an application before an applicant is eligible to take the examination.
- 3. The bureau will mail the results of the written and oral examinations to the applicant at his last known address.
- 4. An applicant who fails the oral or written examination may retake either examination when it is next offered by submitting a nonrefundable fee for examination in the amount specified by the bureau.
- 5. An applicant who fails the oral or written examination and who does not retake it when it is next offered by the bureau must submit a new application for certification to take either examination.
- 6. An applicant who twice fails the oral or written examination for certification as a certified counselor must register with the bureau as a counselor intern and complete at least 1 year of employment under clinical supervision before he may take either test again.
 - **Sec. 35.** 1. A person who is certified by or registered with the bureau shall:
- (a) Notify the bureau in writing within 10 business days after being convicted of violating a law, unless the conviction is for a traffic violation that does not involve alcohol or controlled substances;

- (b) Notify the bureau in writing within 10 business days after the person has been notified of the revocation of any professional license or certificate related to counseling that he possesses which was issued by any other agency, organization or state;
- (c) Post a copy of his certification or registration where it may be easily viewed by clients; and
 - (d) Comply with the requirements of this chapter.
- 2. A person certified by the bureau as a detoxification technician shall maintain current certification in cardiopulmonary resuscitation.
- **Sec. 36.** 1. A program that provides a service that has been approved by the state must have a specified operator who is responsible for the program.
 - 2. The operator shall:
- (a) Adopt a system of controls that will maintain acceptable standards for provision of service and for integrity of the program; and
 - (b) Review and approve changes in the policies and procedures of the program.
- 3. If the program is operated by a corporation, the governing body of the corporation must be the operator of the program. The governing body shall:
- (a) Adopt written bylaws or policies that define any reimbursement to be provided to its members and the powers and duties of the governing body and its committees;
 - (b) Meet at least quarterly and keep written minutes that indicate:
 - (1) The date of the meeting;
 - (2) The names of the persons present at the meeting;
 - (3) Any decisions made; and

- (4) Any other actions taken; and
- (c) Make available for review by the bureau the minutes of meetings of the governing body, the articles of incorporation and the bylaws of the governing body.
- 4. The operator of a program providing a service that has been approved by the state or a designee of the operator shall:
- (a) Comply with the provisions of the manual of policies and procedures of the program in carrying out the program and make a copy of the manual available for review to any person who requests to review it;
- (b) Ensure that the program and its operations are in compliance with all applicable laws and regulations;
- (c) Notify the bureau within 24 hours after the occurrence of an incident that may cause imminent danger to the health or safety of the staff of the program, a client of the program or a visitor to the program;
- (d) Submit for review and approval by the bureau a plan for management and improvement of the quality of the service;
 - (e) Implement the plan as approved;
- (f) Maintain a manual of policies and procedures with all policies and procedures for the program and the service, including, without limitation, policies and procedures:
 - (1) To be followed in the event of a medical emergency;
- (2) For the registration and disposition of complaints by clients and employees and the right to appeal without threat of reprisal;

- (3) For staff of the program, including, without limitation, an accurate job description for each position held by an employee of the program that describes:
 - (I) The title of the position;
 - (II) The duties and responsibilities of the position; and
 - (III) The qualifications for the position; and
- (g) Maintain documentation for each member of the staff of the program in the manner provided in subsections 5, 6 and 7.
- 5. Records for staff of the program must be kept confidential and may be made available only to:
 - (a) Persons authorized by policy of the program;
 - (b) Persons inspecting the program; and
 - (c) Persons authorized by the employee.

A member of the staff of the program may inspect his own file upon submitting a request to do so.

- 6. Records for staff of the program must contain the application or resume of the member of the staff or a signed employment contract. If a record for a person on the staff of the program includes an employment contract, the contract must clearly specify the nature and amount of the service to be provided by the person.
- 7. The record of a person who is on the staff of a program that serves clients who are under 18 years of age must contain documentation of the results of an inquiry made pursuant to NRS 179A.180 to 179A.240, inclusive.

- **Sec. 37.** The operator of a program that provides an early intervention service that has been approved by the state or a designee of the operator shall maintain a record for each client who receives the service. Each record must include, without limitation:
 - 1. The signed consent of the client to the service; and
 - 2. Documentation:
 - (a) That rules out the existence of a substance use disorder; or
- (b) Of referral of a client to the service for treatment pursuant to the criteria set forth in "Patient Placement Criteria for the Treatment of Substance-Related Disorders," Second Edition.
- **Sec. 38.** The operator of a program providing a detoxification service that has been approved by the state or a designee of the operator shall:
 - 1. Utilize criteria for detoxification screening specified by the bureau; and
- 2. Maintain a record for each patient which includes, without limitation, the vital signs of the patient at the time the patient is admitted if the patient is withdrawing from alcohol, a sedative, a hypnotic or an anxiolytic.
- Sec. 39. 1. The operator of a clinical program or his designee shall have a policy of insurance for liability in an amount sufficient to protect clients and staff of, and visitors to, the program. The policy of insurance must provide that notice be given to the bureau not later than 30 days after cancellation of the policy or after the clinical program does not renew the policy. Upon request, the operator of a clinical program or his designee shall make a copy of the policy of insurance available to the bureau for review.

- 2. If the operator of a clinical program has not contractually assumed all liabilities arising out of acts or omissions of a consultant who provides to the program a clinical service or other service that requires authorization by licensure, the operator shall:
- (a) Ensure that the consultant provides his own liability insurance to cover such liabilities; and
 - (b) Obtain a copy of the policy.
- **Sec. 40.** If a clinical program provides counseling for groups, the operator of the clinical program or his designee shall ensure that any session for counseling for a group includes not more than 15 clients. This does not prohibit the clinical program from providing other therapeutic activities for groups that include more than 15 clients.
 - **Sec. 41.** The operator of a clinical program or his designee shall:
- 1. Ensure that the program conforms to the standards of 42 C.F.R. Part 2, regardless of whether the service is provided by a program for treatment which is receiving assistance from the federal government;
- 2. If the clinical program receives a report from a governmental agency relating to the clinical program, its physical plant or its operations, provide a copy of the report to the bureau not more than 30 days after the clinical program receives the report;
- 3. Not allow a client to grant power of attorney to the operator or staff of the clinical program, except to the extent necessary for compliance with requirements of the state board of pharmacy concerning the retention of medications belonging to the client; and
- 4. Bill clients only for services that the service has provided to the client and documented in the records of the client.

Sec. 42. The operator of a clinical program or his designee shall:

- 1. Ensure that a clinical record is maintained for each client. The clinical record must include, without limitation:
 - (a) The name, age, sex, race and permanent address of the client;
- (b) A statement from the client explaining he is seeking service at this time, unless the client is being provided a service for civil protective custody;
 - (c) The source of the referral;
- (d) The date, type and duration of any clinical contact with the client, and any services provided to the client;
- (e) Documentation of any referral that the clinical program provides to a client to address problems which the clinical program cannot resolve and any resulting coordination of care;
 - (f) Documentation of any:
 - (1) Incident that may cause imminent danger to the health or safety of the client;
 - (2) Other emergency involving the client;
 - (3) Problem involving the client;
 - (4) Infraction of the rules of the clinical program by the client; and
 - (5) Sign or symptom of illness or injury of the client;
- (g) Documentation in support of services that the clinical program provides to the client, including, without limitation, any:
 - (1) Correspondence;
 - (2) Assessment;

- (3) Information relating to the history of medical and other treatment which has been provided to the client; and
 - (4) Result of a test, including, without limitation, any test conducted by a laboratory;
 - (h) Any consent to release information that the client has signed; and
- (i) Notification which is in the form specified by the bureau and which is signed by the client within a period specified by the bureau of:
- (1) The procedure for a client to register a complaint and appeal a decision by the clinical program concerning a complaint;
- (2) Any requirements that the clinical program keep certain information concerning the client confidential; and
 - (3) Any other rights of the client that are specified by the bureau.
- 2. Ensure that the client receives a copy of the notification required pursuant to paragraph (i) of subsection 1.
- 3. Ensure that its clinical records adhere to procedures for medical records and case notes which are standard for the profession.
- 4. Ensure that members of its clinical staff readily have access to the clinical records of clients of the service. As used in this subsection, "clinical staff" includes any member of the staff of a clinical program who conducts activities that require:
 - (a) Certification or registration with the bureau; or
- (b) Licensure with the board of psychological examiners, state board of nursing, state board of Oriental medicine, state board of medical examiners, board of examiners for social workers or board of examiners for marriage and family therapists.

- 5. If a consultant of a clinical program has access to confidential information concerning clients, require the certified consultant to enter into an agreement with a qualified service organization and place the agreement in the personnel file of the consultant. As used in this subsection, "qualified service organization" has the meaning ascribed to it in 42 C.F.R. Part 2.
- 6. Keep the clinical records of clients, including, without limitation, records that are kept on a computer, confidential and protect the records from theft or damage if the clinical program ceases to operate. The records must be kept in locked storage. If a clinical program is no longer operating, the program may authorize the bureau to assume responsibility for management of the records.
 - 7. If the clinical program maintains its clinical records in a computer system, ensure that:
 - (a) There are adequate provisions to prevent unauthorized access to the records; and
- (b) There is a system for backup to protect the records in case of a failure of the main system.
- 8. Retain the clinical records of a client for not less than 5 years after the client is discharged from the service.
- **Sec. 43.** 1. The operator of a clinical program or his designee shall ensure that a client provides separate and explicit consent to allow the operator or his designee to release information which identifies the client and his human immunodeficiency virus seropositive status.
- 2. If the client requests to inspect or to copy his clinical records, he must be allowed to do so not more than 5 working days after making the request. The clinical program may:

- (a) Require that a person on the staff accompany the client during the inspection or copying;
 - (b) Charge the client reasonable expenses for photocopying; and
- (c) Delete any portion of the records that would not be in the best clinical interests of the client to view. If the clinical program deletes a portion of the records, the program shall place documentation substantiating the determination in the clinical records of the client.
- **Sec. 44.** The owner or operator of a clinical program shall maintain a manual of policies and procedures that contains, without limitation, policies and procedures:
 - 1. Concerning communicable diseases;
- 2. Describing how the clinical program will protect records as required pursuant to section 42 of this regulation;
 - 3. For releasing confidential information about a client which:
 - (a) Reports that a client has abused or neglected a child or an elderly person;
 - (b) Reports that a client presents a danger to other people;
 - (c) Reports that a client has a communicable disease; or
 - (d) Identifies a client and his human immunodeficiency virus seropositive status;
 - 4. Concerning access of staff to records of clients;
 - 5. Describing when the clinical program will release information concerning clients; and
 - 6. Describing the criteria which the clinical program will use to determine whether to:
 - (a) Admit a client to the clinical program;
 - (b) Continue providing service to a client; or
 - (c) Discharge a client from the clinical program.

- **Sec. 45.** The owner or operator of a clinical program shall maintain documentation for each member of the staff, including, without limitation:
- 1. A copy of the certification, registration or license of each member of the staff who provides treatment or another service requiring registration, certification or licensure;
 - 2. Copies of documentation of any disciplinary action taken against an employee;
 - 3. A copy of the job description of each employee, signed by the employee;
- 4. A verification signed by each employee indicating that the employee has participated in a course of orientation regarding the policies and procedures which govern the service that the employee provides;
- 5. A verification signed by each volunteer indicating that the volunteer has participated in a course of orientation regarding the policies and procedures which govern the service that the volunteer provides; and
- 6. Any agreement with a qualified service organization entered into pursuant to section 42 of this regulation.
 - **Sec. 46.** *The operator of a forensic program or his designee shall:*
- 1. Ensure that the forensic program complies with the standards of 42 C.F.R. Part 2 in the course of communication with the criminal justice system; and
- 2. Maintain in the manual of policies and procedures of the forensic program written procedures for ensuring such compliance.
- **Sec. 47.** The operator of a program that provides a drug court service that has been approved by the state or a designee of the operator shall:

- 1. Assess a client upon admission to the service to determine whether the client is eligible to receive treatment pursuant to the criteria set forth in "Patient Placement Criteria for the Treatment of Substance-Related Disorders," Second Edition;
- 2. Refer clients to appropriate services pursuant to the criteria set forth in "Patient Placement Criteria for the Treatment of Substance-Related Disorders," Second Edition; and
 - 3. Maintain a record for each client, which must include, without limitation:
 - (a) The signed consent of the client to receive the drug court service;
 - (b) Documentation of the assessment performed pursuant to subsection 1;
 - (c) Documentation of any referral to an appropriate service for treatment; and
- (d) Any additional information that the program should take into account while determining an appropriate referral and the need for coordination of care.
- **Sec. 48.** The operator of a program which provides an intake and referral service that has been approved by the state or a designee of the operator shall:
- 1. Not have a financial interest in a program for treatment or in any other organization that provides treatment for the abuse of alcohol and other drugs in the same county as the intake and referral service if the service is located in a county whose population is 100,000 or more;
- 2. Maintain an ongoing record of available resources to address identified problems of clients;
- 3. Refer clients to appropriate services pursuant to the criteria set forth in "Patient Placement Criteria for the Treatment of Substance-Related Disorders," Second Edition;
 - 4. Perform an assessment of the client that is sufficient to:

- (a) Make a comprehensive identification of any clinical and non-clinical problems of the client; and
- (b) Determine the appropriate level of service for the client pursuant to the criteria set forth in "Patient Placement Criteria for the Treatment of Substance-Related Disorders," Second Edition; and
 - 5. Maintain a record for each client, including, without limitation:
 - (a) The signed consent of the client to the service;
 - (b) Documentation of the assessment performed pursuant to subsection 4;
- (c) An evaluation of the financial status of the client sufficient to determine eligibility for services funded by the bureau;
- (d) Any additional information that must be taken into account to make an appropriate referral;
- (e) The signed consent of the client allowing, when appropriate, exchange of information between the program and an employee assistance program and any other provider of a service that is providing the service for the client for the purpose of establishing coordination and continuity of care or documentation of good faith efforts to obtain such consent; and
- (f) Documentation of discussion with the client concerning the results of the assessment, appropriate referrals and any barriers to treatment.
 - **Sec. 49.** *The operator of a program for treatment or his designee shall:*
- 1. Provide, when appropriate, a referral to, and coordination of care with, employee assistance programs and any other provider of a service that has provided the service to the

client to address any identified problems of the patient which cannot be resolved by a service provided by the program for treatment;

- 2. Discharge a patient upon completion or termination of treatment;
- 3. If the program of treatment administers or dispenses medication to a patient or makes medication available to a patient to administer to himself:
 - (a) Document any medication administered or dispensed to a patient;
- (b) Observe a patient who administers medication to himself when the patient administers the medication;
- (c) Control, store and dispose of any medication in the custody of the program for treatment in an appropriate manner; and
- (d) Maintain in the manual of policies and procedures of the program for treatment protocols for satisfying the requirements of paragraphs (a), (b) and (c);
 - 4. Submit information to the bureau on a monthly basis for the client data system;
- 5. Perform an assessment of the patient sufficient to determine the appropriate level of service pursuant to the criteria set forth in "Patient Placement Criteria for the Treatment of Substance-Related Disorders," Second Edition; and
 - 6. Maintain a record for each patient that includes, without limitation:
 - (a) The following information upon intake or admission to the service:
 - (1) The signed consent of the patient to the service;
 - (2) Documentation of the assessment performed pursuant to subsection 5;

- (3) Any additional information which should be taken into account in the course of the planning of treatment, determination of appropriate referrals and determination of need for coordination of care; and
- (4) A summary of the findings and recommendations of the assessment performed pursuant to subsection 5;
 - (b) Information for the client data system;
- (c) Case notes which have been consistently entered into the record documenting the response of the patient to treatment and any progress towards attaining the objectives of the plan of treatment;
- (d) Case notes which are comprehensive enough to allow a qualified person to follow the course of treatment;
- (e) If the patient is transferred to a different service provided by the same operator of a program for treatment, a case note made at the time of transfer which includes, without limitation:
 - (1) Diagnosis at the time of admission or intake;
 - (2) Response of the patient to treatment;
 - (3) Diagnosis at the time of transfer; and
 - (4) Recommendations for those who will be providing treatment to the patient; and
 - (f) If the patient is no longer to receive services from the program for treatment:
- (1) Documentation verifying that a copy of the plan for continuing care of the patient, including, without limitation, any referrals given to the patient, was provided to the patient prior to discharge, if possible; and

- (2) A summary of services which were provided to the patient not more than 5 business days after the patient is discharged from the program for treatment, including, without limitation:
- (I) The diagnosis and condition of the patient at the time of admission or intake to the service;
 - (II) The response of the patient to treatment;
 - (III) The reason for discharge of the patient;
 - (IV) The diagnosis and condition of the patient at the time of discharge;
 - (V) Referrals given to the patient for continuing care; and
 - (VI) Recommendations for any future treatment of the patient.
- **Sec. 50.** The operator of a program which provides a residential treatment service that has been approved by the state or a designee of the operator shall:
- 1. Document that paid staff are on the premises of the program at all times when a patient is present on the premises;
 - 2. Post a plan for disasters where it can be easily viewed by patients; and
- 3. Maintain a manual of policies and procedures concerning procedures for infection control, including, without limitation, procedures for universal precautions against bloodborne pathogens.
- **Sec. 51.** The operator of a program for treatment providing a service that has been approved by the state, other than a detoxification service, or a designee of the operator:
- 1. Develop a plan of treatment on or before the fourth clinical contact which the patient has with the program or by the third day on which the patient receives services from the

program. Clinical contact with the program for the purpose of receiving medication only will not count toward this requirement. The plan of treatment must specify:

- (a) Behavioral objectives to be achieved by the patient relative to problems identified as the result of assessment;
- (b) Services to be provided by staff of the program to facilitate the patient in attaining the objectives of the plan; and
- (c) The member of the staff who is responsible for ensuring the provisions in paragraph (b) are satisfied.
 - 2. Maintain a record for each patient that includes, without limitation:
 - (a) The history of treatment of the patient;
 - (b) Any sources of psychosocial stress; and
 - (c) The plan of treatment required pursuant to subsection 1.
- **Sec. 52.** The operator of a program that provides a residential treatment service that has been approved by the state, other than a detoxification service, or a designee of the operator shall review and revise the plan of treatment of a patient whenever the condition of the patient changes over the course of treatment, or every 14 days, whichever occurs first.
- **Sec. 53.** The operator of a program for treatment which provides an ambulatory service that has been approved by the state, other than a detoxification service, or of an opioid maintenance therapy service that has been approved by the state or a designee of the operator shall review and revise the plan of treatment of a patient whenever the condition of the patient changes over the course of treatment, or every 30 days, whichever occurs first.

- **Sec. 54.** The operator of a program which provides an ambulatory detoxification service that has been approved by the state or a designee of the operator shall:
- 1. Provide at least one session of counseling that is at least 1 hour in duration and is provided no less often than twice a month, or make an effort in good faith to offer such counseling;
 - 2. Develop a plan of treatment on or before the third day the patient receives services;
- 3. If the service is not being provided as part of an opioid maintenance therapy service that has been approved by the state, review and revise the plan of treatment if the condition of the client changes over the course of treatment or every 14 days, whichever occurs first; and
 - 4. Maintain a record for each patient that includes, without limitation:
- (a) A case note for each day of clinical contact, including, without limitation, the vital signs of the patient if the patient is withdrawing from alcohol, a sedative, a hypnotic or an anxiolytic;
- (b) If the patient is exhibiting signs or symptoms of severe withdrawal at the time of clinical contact, a note indicating the signs or symptoms and the actions taken by staff of the program to assist the patient;
 - (c) Documentation of the sessions of counseling provided pursuant to subsection 1; and
 - (d) The plan of treatment.
- **Sec. 55.** The operator of a program which provides a residential detoxification service that has been approved by the state or a designee of the operator shall:
- 1. Ensure that there is on the premises of the program at all times at least one licensed or certified medical professional or certified detoxification technician; and

- 2. Maintain a record for each patient, including, without limitation, case notes entered not less frequently than every 8 hours detailing:
 - (a) Observation of the patient;
 - (b) Relevant findings regarding the behavior of the patient; and
 - (c) The vital signs of the patient taken at least every 4 hours while the patient is awake.
- **Sec. 56.** The operator of an opioid maintenance therapy service that has been approved by the state or a designee of the operator shall:
- 1. Shall submit for review and approval by the bureau policies and procedures of the program for involuntary detoxification of patients.
- 2. Shall implement the policies and procedures for involuntary detoxification of patients as approved.
- 3. Must be approved by the state for a service for outpatients and for an ambulatory detoxification service.
- 4. Shall release to another opioid maintenance therapy service, in compliance with the standards of 42 C.F.R. Part 2, the following information regarding a patient who is seeking treatment at the other program:
 - (a) A history of the dosing given to the patient;
 - (b) The date of admission to the service;
 - (c) The date of the last clinical contact;
 - (d) Documentation verifying addiction;
 - (e) Results of testing of urine; and
 - (f) If conducted within the previous 90 days, a copy of any medical history and physical.

- 5. Shall post in a place where it may be easily viewed by patients a plan for disasters that instructs patients where to go for dosing in the event of destruction of the facility.
- 6. Shall adopt in clinical practice the standards of guidance established by federal agencies on the use of methadone and other narcotics in opioid maintenance therapy.
- 7. Shall maintain a manual of policies and procedures that contains requirements for the patient to earn the privilege of taking medication off the premises of the program. Such requirements:
 - (a) Must establish that the privilege is contingent upon:
 - (1) Compliance by the patient with the rules of the program;
 - (2) Appropriate participation by the patient in treatment; and
 - (3) The existence of no evidence that the patient takes the medication inappropriately;
 - (b) May make an exception in the event of emergency or exceptional circumstances; and
- (c) May allow for the privilege to be granted to accommodate for when the program is closed.
 - 8. Shall provide for a minimum of:
- (a) One session of counseling every month that is at least 1 hour in duration during the first 2 years of treatment, or documentation of good faith efforts to provide such counseling; and
- (b) One session of counseling every 2 months that is at least 1 hour in duration during the third and subsequent years of treatment, or documentation of good faith efforts to provide such counseling.

In determining what constitutes a year of treatment, the program that provides the service may consider treatment provided by another opioid maintenance therapy service if there has not been a lapse in continuous treatment of more than 30 calendar days.

- 9. Shall, if the patient is receiving an ambulatory detoxification service, develop a plan of treatment on or before the third day on which the client receives the service.
- 10. Shall, as necessary, review and revise the plan of treatment for the patient developed pursuant to subsection 9:
- (a) When the condition of the patient changes over the course of treatment, or every 30 days, whichever occurs first, during the first year of maintenance treatment;
- (b) When the condition of the patient changes over the course of treatment, or every 90 days, whichever occurs first, during the second year of maintenance treatment;
- (c) When the condition of the patient changes over the course of treatment, or every 180 days, whichever occurs first, during the third and subsequent years of maintenance treatment; and
- (d) When the condition of the patient changes over the course of treatment, or every 30 days, whichever occurs first, during ambulatory detoxification.
 - 11. Shall maintain a record for each patient that includes, without limitation:
- (a) Documentation that the patient has received the counseling required pursuant to subsection 8; and
 - (b) Any plan for treatment developed or revised pursuant to subsections 9 and 10.
- **Sec. 57.** 1. When investigating a complaint regarding services for abuse of alcohol and other drugs, the bureau will:

- (a) Investigate all complaints registered with the bureau alleging violation of a requirement of this chapter. The bureau will request that the person registering the complaint state in writing the substance of the complaint and the name of the individual or program alleged to have violated a requirement of this chapter.
- (b) Conduct announced or unannounced inspections or any other investigations necessary to determine the validity of the complaint.
- (c) If the investigation is conducted on the premises of a program, inform the operator of the program or his designee of the presence of staff of the bureau on the premises upon arrival at the program.
- (d) Inform the individual named in the complaint of the nature of the complaint if the complaint is against an individual, or inform the operator of the program or his designee of the nature of the complaint if the complaint is against the program.
- (e) Keep all information gathered during the course of the investigation confidential while the investigation is proceeding. This paragraph does not prohibit the bureau from:
 - (1) Communicating or cooperating with any agency or board that:
 - (I) Is investigating a person who is registered with or certified by the bureau;
 - (II) Is investigating a program providing a service approved by the bureau; or
- (III) Regulates or has jurisdiction over the violations alleged in a complaint or found during the course of investigation; or
- (2) Communicating with the operator of the program or his designee when a complaint against an individual who is a member of the staff of the program alleges a condition posing significant hazard to the health or safety of clients or staff of, or visitors to, the program.

- 2. With the exception of information for which release would violate the standards of 42 C.F.R. Part 2, information gathered during the course of investigation and the records of investigation become public records after the bureau completes the investigation if:
 - (a) Any disciplinary action imposed as a result of the investigation becomes final; or
- (b) The person under investigation submits a written request to the chief asking that the records be made public.
 - **Sec. 58.** 1. The chief or his designee shall:
- (a) Determine if reasonable cause exists to support an allegation against a person or program;
- (b) If he determines that reasonable cause exists, determine a proposed disciplinary action and provide notice to the person who has been investigated, or to the operator or his designee of a program that has been investigated, of the proposed disciplinary action; and
- (c) If he determines that no reasonable cause exists, dismiss the complaint and provide notice to the complainant and the person who has been investigated, or the operator or his designee of the program that has been investigated, that no disciplinary action will be taken.
- 2. A person who has been investigated, or the operator or his designee of a program that has been investigated, may request a hearing with the bureau within 15 calendar days after he receives notification of proposed disciplinary action. Such a hearing will be conducted pursuant to the provisions of section 59 of this regulation.
- 3. If the person, operator or designee does not request a hearing within the period specified in subsection 2, the proposed disciplinary action becomes final.
 - 4. The chief or his designee shall:

- (a) Notify the complainant of any hearing that has been requested in a timely manner;
- (b) In a timely manner, notify the complainant of any disciplinary action that has become final; and
 - (c) Notify the complainant of any judicial review of a final decision of the hearing officer.
 - 5. Disciplinary actions that the chief or his designee may impose include:
- (a) Establishing conditions for continued certification, registration or approval of the service;
- (b) Suspension or revocation of certification or registration, or revocation of approval of the service; or
 - (c) Imposition of a reprimand.
- 6. The chief or his designee may prohibit a person whose certification or registration has been revoked from reapplying for the certification or registration for a period of not less than 24 nor more than 60 months.
 - 7. The bureau may impose and collect reasonable costs of investigation:
 - (a) From an individual when disciplinary action against the individual becomes final; or
- (b) From the operator of a program when disciplinary action against the program becomes final.
- **Sec. 59.** 1. Upon receipt of a request for a hearing pursuant to section 22 or 58 of this regulation, the chief shall notify the administrator of the rehabilitation division of the department of employment, training and rehabilitation, who shall appoint a hearing officer.

- 2. A hearing officer appointed pursuant to subsection 1 must be appointed on the basis of his education, training and experience and his interest in the problems of alcohol and drug abuse.
 - 3. The hearing constitutes a contested case for the purposes of chapter 233B of NRS.
 - 4. The decision of the hearing officer is final for the purposes of judicial review.
 - **Sec. 60.** NAC 458.010 is hereby amended to read as follows:
- 458.010 As used in this chapter, unless the context otherwise requires, the words and terms defined in:
 - 1. NRS 458.010; and
- 2. NAC 458.015 to 458.071, inclusive, *and sections 2 to 19, inclusive, of this regulation,* have the meanings ascribed to them in those sections.
 - **Sec. 61.** NAC 458.015 is hereby amended to read as follows:
- 458.015 ["Alcohol and drug abuse counselor"] "Certified counselor" means a [counselor] person who is certified by the bureau to [counsel alcohol and drug abusers and to classify a person as an alcoholic or abuser] provide assessment and counseling for abuse of alcohol [or] and other drugs . [for the purposes of treatment.]
 - **Sec. 62.** NAC 458.020 is hereby amended to read as follows:
- 458.020 ["Board] "Advisory board" means the advisory board on certification of alcohol and drug abuse personnel.
 - **Sec. 63.** NAC 458.0265 is hereby amended to read as follows:
- 458.0265 "Counseling" means [personal] *face to face* interaction with a patient [designed to encourage the patient to change certain behavior associated with the] *to provide treatment for*

abuse of alcohol or another drug. [The term does not include interactions for which clinical licensure is required.]

- **Sec. 64.** NAC 458.027 is hereby amended to read as follows:
- 458.027 "Counselor intern" means a person who is [certified to carry out the duties set forth in NAC 458.146.] registered with the bureau as a counselor intern and authorized to perform the functions of a certified counselor under clinical supervision.
 - **Sec. 65.** NAC 458.029 is hereby amended to read as follows:
- 458.029 "Detoxification" means the monitoring of a person who is at risk of suffering from the adverse physiological or psychological effects of withdrawal from alcohol [,] or another drug [with a characteristic withdrawal syndrome,] to bring the person *safely* to a state free of the drug.
 - **Sec. 66.** NAC 458.046 is hereby amended to read as follows:
- 458.046 "Employee assistance program" means [an assessment and referral] *a* program designed to assist an employee in the identification and resolution of personal problems which may adversely affect his performance at work.
 - **Sec. 67.** NAC 458.047 is hereby amended to read as follows:
- 458.047 ["Evaluation] "Detoxification technician" means a person who is certified by the bureau to [carry out the duties set forth in NAC 458.148] provide screening for safe withdrawal from alcohol and other drugs.
 - **Sec. 68.** NAC 458.061 is hereby amended to read as follows:
- 458.061 ["Supervision"] "Clinical supervision" means the oversight conducted by a person authorized by the bureau of [the work of a counselor intern] a person's work with a

[patient based on both direct] *client, including, without limitation,* observation and periodic analytical review [and assessment of] *of assessment and* counseling sessions with [patients] *clients* for the purpose of evaluating and improving the [counselor intern's] *person's* skills and knowledge.

- **Sec. 69.** NAC 458.071 is hereby amended to read as follows:
- 458.071 "Year of employment" means [full-time equivalent employment or appropriate volunteer experience in direct counseling, with a person or group of persons, regarding alcohol and drug abuse or closely related types of counseling for at least 40 hours per week in a 52-week period or at least] 2,000 hours [in a 52-week period. The hours of counseling] of appropriate paid or volunteer experience of which at least half is counseling for abuse of alcohol and other drugs. Hours in excess of 40 hours per week [may not be] are not counted in determining [whether a person has worked at least 2,000 hours in a 52-week period.] a year of employment.
 - **Sec. 70.** NAC 458.090 is hereby amended to read as follows:
- 458.090 1. The advisory board on certification of alcohol and drug abuse personnel is hereby created to:
 - (a) Assist the bureau in reviewing applications and administering examinations; and
 - (b) Advise the bureau on establishing requirements for certification [.] and registration.
- 2. The chief will appoint the members of the *advisory* board. The membership of the *advisory* board will include but is not limited to:
 - (a) Three certified counselors [on alcohol and drug abuse;
 - (b) A psychologist with a doctorate in psychology;

- (c)];
- (b) An educator;
- [(d)] (c) A representative of the bureau; and
- [(e) A certified program administrator.]
- (d) At least two persons who are licensed to practice in this state as at least one of the following:
 - (1) A physician;
 - (2) A psychologist;
 - (3) A marriage and family therapist; or
 - (4) A clinical social worker.
- 3. All members of the *advisory* board, except the representative of the bureau, will be appointed to not more than two consecutive terms of 3 years. If any member fails to attend two or more consecutive meetings of the *advisory* board without good reason or fails to attend to the business of the *advisory* board, as determined by the chief, the member [must] *may* be removed from the *advisory* board and the chief shall appoint a qualified person to serve for the remainder of the member's term.
- 4. The *advisory* board [must] *shall* meet at least once a year and *may meet* at other times it deems necessary.
 - 5. The bureau may:
- (a) Employ a technical advisor and appropriate consultants to assist in the activities of the *advisory* board.
 - (b) Designate agents to review applications and administer examinations.

- **Sec. 71.** NAC 458.110 is hereby amended to read as follows:
- 458.110 1. Qualified applicants may receive [certification] from the bureau [in the following categories:
 - (a) Alcohol and drug abuse]:
 - (a) Certification as a certified counselor;
 - (b) [Program administrator;
 - (c) Counselor intern;
 - (d) Evaluation technician; and
 - (e) Any other category of certification or specialty area established by the bureau.
- 2. An applicant must file a complete application with the bureau and meet the minimum requirements for one of the categories to be certified. Examinations which are required for certification will be given at least semiannually on dates established by the bureau. A nonrefundable fee of \$50 will be charged to each applicant for the materials required to apply for certification.] *Registration as a counselor intern*;
 - (c) Certification in a counseling specialty area established by the bureau; or
 - (d) Certification as a detoxification technician.
- 2. The bureau will maintain and make available to the public a list of persons who are certified by or registered with the bureau.
 - Sec. 72. NAC 458.131 is hereby amended to read as follows:
- 458.131 1. An applicant must file a completed application which documents that the qualifications are met for the registration or certification category for which the applicant is

applying. A nonrefundable fee in the amount specified by the bureau will be charged to each applicant for the materials required to apply for registration or certification.

- 2. An application, to be considered complete, for all categories of certification or registration, must [contain:] include:
 - (a) An application form completed and signed by the applicant;
 - (b) The applicant's [complete personal] resume;
- (c) [An official transcript sent by the registrar of the college or university where the applicant received his most advanced degree;
 - (d)] *One of the following:*
- (1) A copy [or official verification] of the applicant's high school diploma or certificate of general educational development [, if the applicant is not a graduate of a college or university;
 - (e) Documents which may be used by the bureau to]; or
- (2) An official transcript sent by the registrar of the accredited college or university at which the applicant received his most advanced degree;
 - (d) Completed forms approved by the bureau for fingerprint clearance;
- (e) Completed forms approved by the bureau that verify the applicant's prior employment or experience; [in counseling or administration;]
 - (f) Written verification of the applicant's current employment;
- (g) Documents which give evidence of any specialized training [claimed by the applicant to meet] that meets the minimum requirements of a category of registration or certification;

- (h) [The names, addresses and telephone numbers of three persons able to provide references,] *Three letters of reference on a form approved by the bureau*, including, *without limitation*, *a letter from* at least one former employer;
- (i) A statement signed by the applicant that he has [not abused alcohol or a controlled substance for the 2-year period preceding the submission of his application; and] a minimum of 2 years of sobriety, if he is recovering from dependence upon alcohol or another drug;
- (j) A [certificate for cardiopulmonary resuscitation or comparable medical training, unless the applicant is prohibited from holding such a certificate for medical reasons.
- 2. An application must be submitted and postmarked no later than the deadline for submission indicated on the form for making application.
 - 3. An application must be accompanied by a nonrefundable fee of \$50.
- 4. The applicant is responsible for ensuring that his application is complete. The bureau will review and must approve an application before an applicant is eligible to take an examination.] statement signed by the applicant that he has not been convicted during the 2 years immediately preceding his application of any crime other than a violation of a traffic law that does not involve alcohol or a controlled substance; and
- (k) A nonrefundable fee for application and processing in the amount specified by the bureau.
 - Sec. 73. NAC 458.141 is hereby amended to read as follows:
- 458.141 1. The [minimum requirements for each category of certification may be satisfied, in part, by a graduate, bachelor's or associate's degree] *bureau may allow an applicant to substitute credit for college courses* from an accredited college or university [that

is listed by the Council on Postsecondary Education] to satisfy, in part, the requirements for employment for certification as a certified counselor.

- 2. College or university courses:
- (a) Must be in an appropriate field of social science, which may be counseling, psychology, sociology, [social psychology,] social work, [nursing,] social services [or rehabilitation.
- 2. The bureau will, if appropriate, allow an applicant to substitute credit for college courses in appropriate fields of social science, or training in alcohol and drug abuse,] *or alcohol and drug abuse*;
- (b) May be substituted in lieu of up to 2 years of [paid employment in counseling or administration,] employment, based on the relevance of the [course or training] courses and the applicant's other qualifications for [the certification being sought. College courses will] certification as a certified counselor; and
- (c) Will be substituted at the rate of 24 semester hours or 36 quarter hours of study for each year of [paid employment, and training will be substituted at a comparable rate.] employment.
- 3. An applicant must have at least [1 year] 6 months of employment which may not be substituted with credit for college courses.
 - **Sec. 74.** NAC 458.145 is hereby amended to read as follows:
- 458.145 [1. The requirement for certification] *The qualifications for registration* as a counselor intern [is] *are*:
- 1. Education consisting of at least a high school diploma or a certificate of general education development [.

- 2. The application will be reviewed by the bureau within 60 days after its receipt and the results of the review will be mailed to the applicant at the applicant's last known address within a reasonable time. Upon approval by the bureau, the applicant is eligible for certification as a counselor intern.]; and
- 2. Submission to the bureau of a completed application for registration as a counselor intern.
 - **Sec. 75.** NAC 458.146 is hereby amended to read as follows:
- 458.146 [1.] A counselor intern may, under [the supervision of a certified alcohol and drug abuse counselor:
- (a) Collect data from the observation of patients who are being treated for alcohol and drug abuse or from interviews with such patients.
 - (b)] clinical supervision:
- 1. Provide counseling [on] *for abuse of* alcohol and [drug abuse to abusers of alcohol and controlled substances either individually or in groups.
 - (c) Maintain files on patients being treated for alcohol and drug abuse.
 - (d)] other drugs.
 - 2. Provide codependency counseling.
 - 3. Conduct testing for which the counselor intern was trained.
 - [2. A counselor intern shall:
 - (a) Submit to the bureau the name of the certified counselor acting as his supervisor.
- (b) Notify the bureau, in writing, within 10 working days after any change in the status of his supervision.

- (c) Submit documentation to the bureau at least once every 6 months verifying that he has received the following supervision:
- (1) At least 1 hour of individual or group supervision within each 2-week period that includes a review of the intern's activities during the period and the progress of the intern in satisfying the requirements for certification as an alcohol and drug abuse counselor. Group supervision must not exceed 10 interns per session.
- (2) The observation by the counselor of one counseling session conducted by the counselor intern at least once each month. The counselor may use audiotapes or videotapes to conduct the observation.
- (3) Consultation provided by the counselor to the counselor intern regarding individual patients, as needed.
- (d) Submit documentation to the bureau verifying that he has a certificate for cardiopulmonary resuscitation or comparable medical training, unless he is prohibited from holding such a certificate for medical reasons.
- 3. The failure of the counselor intern to satisfy the requirements of subsection 2 will result in the revocation of his certificate.
- 4. The certificate of a counselor intern remains valid until he is eligible to take the examination for certification as an alcohol and drug abuse counselor, but in no case to exceed 5 years after the date the certificate was issued. If a person fails to pass the examination for certification, the bureau may, if the person requests an extension, extend his status as an intern for a period of not more than 12 months.

- 5. The counselor intern and the certified counselor shall develop a written plan of training outlining the strategy for the counselor intern to become certified as an alcohol and drug abuse counselor.]
- 4. Classify persons as alcoholics, addicts or abusers of controlled substances or alcohol for the purpose of making treatment recommendations to a court. Such classification must be substantiated in the clinical record and countersigned by the person providing clinical supervision to the counselor intern. Such classification must not be represented to the court as the product of an evaluation center, unless the classification was determined by a program providing an evaluation center service that has been approved by the state.
- 5. Provide diagnosis of the abuse of alcohol and other drugs, dependence upon alcohol and other drugs, withdrawal from alcohol and other drugs, or intoxication from alcohol and other drugs. Such diagnosis must be substantiated in the clinical record and countersigned by the person providing clinical supervision to the counselor intern.
 - 6. Present himself to the public as registered with the bureau as a counselor intern.
 - **Sec. 76.** NAC 458.165 is hereby amended to read as follows:
- 458.165 [1. A certificate as an alcohol and drug abuse counselor, an evaluation technician or a program administrator, or in any other category or specialty area established by the bureau,]
- 1. Certification as a certified counselor, detoxification technician or in a counseling specialty area is valid for 2 years after the [date it is issued.] bureau issues the certificate.
 - 2. To renew such [a certificate,] certification, a person must submit to the bureau:
 - (a) A completed application [that is accompanied by a nonrefundable fee of \$100.

- (b) Verification that he has completed the training required pursuant to NAC 458.235.
- (c) A statement that he has not abused alcohol or controlled substances during the 2-year period before the submission of his application. The statement must be signed by the person submitting the application for renewal.
- (d) Verification that he holds a current certificate indicating successful completion of cardiopulmonary resuscitation or comparable medical training unless the person is prohibited from holding such a certificate for medical reasons.
 - 2. The information required by subsection 1] for renewal of certification;
 - (b) Documentation verifying compliance with the requirements of NAC 458.235; and
 - (c) A nonrefundable fee in the amount specified by the bureau.
- 3. The application, documentation and fee required pursuant to subsection 2 must be postmarked or received by the bureau on or before 12 a.m. of the expiration date of the person's certificate. [Any] A person who submits the information after this deadline but within 60 days after the date of expiration of the person's certificate will be assessed a late fee of [\$50.
- 3. If a person fails to satisfy the requirements of this section within 60 days after the expiration of his certificate, the bureau will send a notice of that fact by certified mail, return receipt requested, to the last known address of the person. If the certification is not renewed within 30 days after receipt of the notice, it will be revoked without any further notice or opportunity for hearing. A person whose certification is revoked pursuant to this subsection must reapply for certification in accordance with the requirements found in NAC 458.090 to 458.210, inclusive.] \$100.

- 4. The bureau will deny an application that is postmarked or received later than 60 days after the date of expiration of the person's certificate. Such a person may reapply for certification.
 - 5. The bureau may destroy the file of an expired certification 1 year after expiration.
 - **Sec. 77.** NAC 458.205 is hereby amended to read as follows:
- 458.205 [In addition to those grounds set forth in NAC 458.460 to 458.580, inclusive, the grounds] *Grounds* for initiating disciplinary action against any person certified by *or registered* with the bureau include:
 - 1. Conviction [of:
 - (a) A felony;
 - (b) Any offense involving moral turpitude; or
- (c) A violation of any federal or state law regulating the possession, distribution or use of any] of any crime other than a violation of a traffic law that does not involve alcohol or a controlled substance; [or dangerous drug as defined in chapter 454 of NRS;]
 - 2. Use of fraud or deception in:
- (a) Applying for registration or certification [;], or for the renewal of registration or certification;
 - (b) Taking an examination for certification;
 - (c) [Documenting the training required to maintain certification;
 - (d) Rendering services as an alcohol and drug abuse counselor or program administrator; or
 - (e)] Providing a service as a person who is certified by or registered with the bureau; or
 - (d) Documenting records relating to [the supervision of interns;

- 3. Allowing the unauthorized use of a certification issued pursuant to the provisions] *clinical supervision*;
 - 3. A violation of this chapter [;
 - 4. Professional incompetence;
 - **5. Abuse**] *with regard to certification, registration or the standards of practice;*
- 4. Incompetence in the performance of activities that are authorized by a person's registration or certification issued pursuant to this chapter;
- 5. Performing an activity authorized by a person's certification or registration issued by the bureau or providing a service approved by the bureau when the person's ability to perform the activity or provide the service is impaired because of abuse of alcohol or other drugs; and
- 6. [The use of a controlled substance without a prescription.] *Performing activities for which clinical licensure is required in the absence of such licensure.*
 - **Sec. 78.** NAC 458.235 is hereby amended to read as follows:
- 458.235 1. A person certified as [an alcohol and drug abuse counselor, evaluation technician or counselor intern] *a certified counselor* must, in order to maintain his certification, attend at least 40 hours of training [approved by the bureau during a] *during the* 2-year period [.] *of certification*.
- 2. A person [certified as a program administrator] registered with the bureau as a counselor intern must, in order to maintain and renew his registration, attend at least [20]:
- (a) Fifteen hours of training [in issues related to alcohol and drugs and at least 20 hours of training related to management and administration. This training must be approved by the bureau and acquired during a 2-year period.] during the first 6 months of registration;

- (b) Ten hours of training during the second 6 months of registration; and
- (c) Twenty hours of training during each year of registration thereafter.
- 3. A person certified [as an alcohol and drug abuse counselor and a program administrator] in a counseling specialty must, in order to maintain his counseling specialty certification, attend at least [25] 10 hours of training [in issues related to alcohol and drugs and at least 25 hours of training related to management or administration. This training must be approved by the bureau and acquired during a] during the 2-year period [.
- 4. The counselor, counselor intern, evaluation technician or administrator must provide proof to the bureau that he has completed the applicable course of training by submitting copies of certificates of completion from the approved courses.
- 5. A course of training may not be taken more than once during the same period of certification or recertification.] of certification, in addition to the hours of training required to maintain any other certification issued by the bureau.
- 4. A person certified by the bureau as a detoxification technician must, in order to maintain his certification, attend at least 6 hours of training during the 2-year certification period in addition to the hours of training required to maintain any other certification or registration issued by the bureau.
 - **Sec. 79.** NAC 458.243 is hereby amended to read as follows:
- 458.243 1. In addition to training offered by the bureau, other courses of training [in appropriate areas of study] may be approved by the bureau if [:
- (a) The course or courses are offered by a college or university that is listed by the Council on Postsecondary Accreditation; or

(b) Such approval is applied for by a participant who documents the content of the course or courses and submits a request for approval of the training.

Verification of attendance at training that is not offered or previously approved by the bureau must be received within 60 days after its completion.] *such approval is applied for by a participant who documents the content of a course and submits a request for approval of the course.*

- 2. An application made pursuant to [paragraph (b) of] subsection 1 must include [the], without limitation:
- (a) The training pamphlet [, brochure or announcement used to advertise the course and verification of completion of the course which includes:
- (a) The title] or other training material that the person or organization providing the course provides;
 - (b) The name of the course;
 - [(b)] (c) The name of the person or organization offering the course;
 - [(c) The name of the participant;]
 - (d) The number of *course* hours ;[earned; and]
 - (e) The date on which the course was offered [.];
 - (f) The location at which the course was taught;
 - (g) The name and qualifications of the instructor of the course; and
 - (h) A summary of the content of the course.
 - Sec. 80. NAC 458.251 is hereby amended to read as follows:

- 458.251 1. [An organization which offers seminars] A person or organization which offers training related to [drug and alcohol abuse and which] the abuse of alcohol and other drugs that wishes to have a course of training approved by the bureau must submit a written application to the bureau [at least 30 days before the start of instruction. The] by the deadline established by the bureau.
 - 2. An application must include:
 - (a) The name of the course;
 - (b) The name of the *person or* organization which is offering the course of training;
 - (c) The name and qualifications of the instructor;
 - (d) The number of course hours;
- (e) A summary of the content of the course [and an explanation of the relationship of the course to drug and alcohol abuse; and
 - (g) The fee for enrollment.
- 2. An organization may apply to the bureau to provide a program of continuing education. If the bureau determines that the organization possesses the ability to provide consistently a quality program of continuing education for counselors and administrators, the bureau will grant the application and assign to the organization a unique identifying code for the program. The bureau will develop an abbreviated procedure to approve a program offered by an organization that has previously been approved to provide a program of continuing education.]
 - (f) The location at which the course will be taught; and
 - (g) The date on which the course will be taught.

- **Sec. 81.** NAC 458.260 is hereby amended to read as follows:
- 458.260 1. [An organization which desires] A person or organization that wishes to obtain a certificate of [accreditation for an] approval by the state of a service for abuse of alcohol and [drug abuse program] other drugs must submit to the bureau a written application [to] in the format required by the bureau.
- 2. The application for initial approval by the state of a service for abuse of alcohol and other drugs, or for approval by the state of a service for which the certificate of approval has expired or been revoked, must be accompanied by:
 - (a) Documentation evidencing the authority of the applicant to do business in this state [.
- (b) A copy of the applicant's statutory or regulatory authority, if the applicant is a governmental agency.
 - (c)];
 - (b) All names used by the applicant in its practice of business [.
 - (d)];
 - (c) A copy of the manual containing the policies and procedures of the program [.
 - (e)];
- (d) A nonrefundable fee [of \$100 if the program is not funded by] in an amount specified by the bureau [.
- (f) If it is for a certificate to operate a program for treatment with methadone, a copy of the application submitted to the Drug Enforcement Agency and the Food and Drug Administration for approval to operate the program. If the applicant has not submitted such an application, he

must submit a copy of the application to the bureau upon submission of his application to the Drug Enforcement Agency and the Food and Drug Administration.

- 3. Before the application will be accepted by the bureau, the application must have been approved by:
- (a) The applicant's board of directors or trustees or other controlling board or body if the applicant is a corporation; or
- (b) The applicant's governing body or chief executive officer if the applicant is a governmental agency.]; and
 - (e) A completed application for approval of the service by the state.
- 3. An application to renew approval of a currently approved service for abuse of alcohol and other drugs must be accompanied by:
 - (a) A copy of the manual containing the policies and procedures of the program;
 - (b) A completed application for approval of the service by the state; and
 - (c) A nonrefundable fee in an amount specified by the bureau.
 - 4. The bureau will review the application and will [deny]:
- (a) Deny and return any application which is incomplete or contains inaccurate or false information [.]; or
 - (b) Schedule an inspection of the program providing the service.
- 5. The bureau will submit a written report of the findings of the inspection to the applicant.

- 6. The bureau will issue a certificate of state approval of a service if the report indicates that the service has met standards of the bureau for compliance with the requirements of this chapter.
- 7. A certificate of approval of the service by the state is required to be eligible to receive payments from health insurers for the treatment of the abuse of alcohol and other drugs pursuant to NRS 287.020, 608.156, 689A.046, 689B.036, 695B.194 and 695C.174.
- 8. The bureau may inspect at least annually each [accredited program and its facility at least semiannually] program that provides a service which is approved by the state to determine whether [the operator is complying with NAC 458.260 to 458.430, inclusive. An inspection may be announced or unannounced. If an authorized representative of the bureau is denied access to the program, a hearing will be held to determine whether the program's accreditation will be revoked. The program must be notified in writing of such a hearing.] approval by the state should be continued.
- 9. The bureau hereby adopts by reference "Patient Placement Criteria for the Treatment of Substance-Related Disorders," Second Edition, which may be obtained from the American Society of Addiction Medicine, Inc., 4601 North Park Ave., Upper Arcade Suite 101, Chevy Chase, MD 20815, for the price of \$60.
 - **Sec. 82.** NAC 458.280 is hereby amended to read as follows:
- 458.280 In granting a certificate of [accreditation for an alcohol and drug abuse program,] *approval*, the chief will specify that the [holder is authorized to conduct] *bureau has approved* one or more of the following kinds of [programs:

- 1. A short-term residential program of not more than 30 days for nonacute care which provides a patient a residence in the facility where the program of treatment for impairment in functioning because of alcohol and other drug abuse or dependency is being carried out and provides for full-time supervision. At least one employee of the program must be present 24 hours a day.
- 2. A long-term residential program of more than 30 days for nonacute care in a setting with treatment services for impairment in functioning because of alcohol and other drug abuse or dependency. This program may include therapeutic communities and transitional living arrangements such as halfway houses. At least one employee of the program must be present 24 hours a day.
- 3. A program based in a hospital which provides inpatient treatment services for impairment in functioning because of alcohol and other drug abuse or dependency 24 hours per day.
- 4. A residential program for detoxification which is separate from a hospital and provides the patient with residential treatment for withdrawal from the physiological effects of alcohol or drugs and encourages the transition to ongoing treatment. At least one employee of the program must be present 24 hours a day.
- 5. A program for outpatients which provides diagnoses, evaluations, and counseling, individually or in groups for impairment in functioning because of alcohol and other drug abuse or dependency, and provides for the referral of patients to other programs or services.

- 6. An intensive program for outpatients which provides counseling for impairment in functioning because of alcohol and other drug abuse or dependency to persons at least 2 hours per day and 3 days per week.
 - 7. A program for treatment with methadone.
 - 8. A program] services:
- 1. A treatment or early intervention service that meets the criteria for that level of service set forth in "Patient Placement Criteria for the Treatment of Substance-Related Disorders," Second Edition.
- 2. A service for primary prevention [which is designed to prevent or intervene in the onset of the] that eliminates factors leading to abuse of alcohol [or drugs and to reduce factors which create a risk of abuse of alcohol or other drugs among persons who are not identified to be in need of treatment. The program may include, without limitation, education, alternative activities, mobilization of professionals and other members of the community, and the facilitation of changes concerning the environment or social policy.
- 9. A program for day or evening treatment which provides treatment for the abuse of alcohol or drugs on a regular basis at least 4 hours per day and 4 days per week.
- 10. A program for detoxification based in a hospital which provides medical services and acute care 24 hours per day for persons with severe medical complications associated with withdrawal.
 - 11. A program], tobacco and other drugs.

- 3. A service for civil protective custody which provides [a facility] care for a person who is taken into custody pursuant to the provisions set forth in NRS 458.250 to 458.280, inclusive.
- [12. An employee assistance program which develops a systematic approach to assist employees of organizations in the identification and resolution of personal problems.
- 13. A program for intervention for persons who are at high risk of abuse of alcohol and other drugs as demonstrated by the experimental use of alcohol and other drugs. The program may include the referral of certain persons for treatment.
 - 14. A program to provide an evaluation of an offender to a court]
 - 4. An evaluation center service which:
- (a) Provides an evaluation of a person pursuant to NRS 484.37943 to determine whether the [offender] person is an alcoholic, addict or abuser of alcohol or other drugs [.]; and
 - (b) Makes recommendations concerning the type of treatment required.
 - 5. A drug court service.
- 6. An intake and referral service which provides assessment, makes referrals to appropriate services, assists in ensuring continuity of care and assists in optimal resolution of identified nonclinical problems of the client.
 - **Sec. 83.** NAC 458.283 is hereby amended to read as follows:
- 458.283 [To obtain a certificate of accreditation, the operator of a program for the prevention of alcohol and drug abuse must submit to the bureau:
- 1. A] The operator of a program which provides a primary prevention service that has been approved by the state or a designee of the operator shall:

- 1. Submit to the bureau a written statement signed by the [director] operator of the [program or chairman of the board of the program] service assuring that the [program] service promotes the message to minors not to use alcohol, [drugs, nicotine or any other mind-altering substance.
 - 2. Any letters of support or endorsement that are required by the bureau.
- 3. A list of the names, addresses and telephone numbers of the persons responsible for the operation of the program.
- 4. A written statement describing the program's goals and objectives and the problems being addressed. The strategy of the program must include at least one of the following methods to accomplish its goals and objectives:
 - (a) The distribution of information;
 - (b) Educational programs;
 - (c) The mobilization of professionals and other members of the community;
 - (d) Alternative programs;
 - (e) Programs to carry out social policy and environmental change; or
 - (f) Early intervention.
- 5. If the organization accepts money from the state or Federal Government, proof that the organization has tax exempt status pursuant to section 501(c)(3) of the Internal Revenue Code of 1954, as amended.
- 6. Evidence of liability insurance sufficient to protect patients, staff, volunteers and visitors.
 - 7. Policies addressing the following subjects:

- (a) Transportation and insurance, if appropriate.
- (b) Procedures for medical emergencies.
- (c) The screening of personnel and volunteers. This policy must meet the requirements of NRS 179A.190 to 179A.240, inclusive.
 - (d) Evaluation of the program.
- (e) Procedures for the referral of patients identified as requiring assistance that is not available through the program for prevention.
- (f) Contact between patients and employees during employees' hours off work or after a patient is no longer in the program.] *tobacco or illicit substances*.
- 2. Include in the manual of policies and procedures for the service an accurate description of the duties and responsibilities for each job held by a volunteer to the program.
 - **Sec. 84.** NAC 458.285 is hereby amended to read as follows:
- 458.285 [To obtain a certificate of accreditation, the operator of a program] *The operator* of a program which provides a service for civil protective custody [must submit to the bureau proof that the program has established:
- 1. Procedures to assess medical risks and a person's potential to become violent or suicidal.
 - 2. Criteria for rejecting clients.
 - 3. Procedures to document the clients who are accepted and rejected.
 - 4. A liaison with law enforcement agencies.
 - 5. Procedures for documenting for each person:
 - (a) The length of stay in hours; and

- (b) The number of readmissions.
- 6. A statement of policy concerning the services provided to clients.] that has been approved by the state or a designee of the operator shall:
 - 1. Ensure that the program is approved by the state as a residential detoxification service;
 - 2. Make a good faith effort to refer a client to treatment; and
 - 3. Maintain a record for each client, including, without limitation:
 - (a) The date and time of admission;
 - (b) The vital signs of the client, taken every 2 hours while the client is awake;
 - (c) Written observations of the client;
 - (d) Relevant findings regarding the behavior of the client;
- (e) Documentation of the efforts made to refer a client to treatment pursuant to subsection 2; and
 - (f) The date and time that the client was discharged.
 - **Sec. 85.** NAC 458.288 is hereby amended to read as follows:
- 458.288 [1. To obtain a certificate of accreditation, the operator of an evaluation center must submit to the bureau proof that the program has established policies:
- (a) Relating to the contact between offenders and employees during the employees' nonworking hours or after an offender is no longer in the program; and
 - (b) That otherwise meet the requirements of this section.
 - 2. On or after May 1, 1995, the operator of an evaluation center shall not operate or have
- 1. A program which provides an evaluation center service that has been approved by the state must not be operated by an operator of a program who operates or has a financial interest

in a [treatment] program for treatment or any other organization which provides treatment for the abuse of alcohol and other drugs in the same geographic area as the evaluation center if the center is located in a county whose population is 100,000 or more [.

- 3. A written evaluation of an offender must be completed and returned to ;
- 2. The operator of a program which provides an evaluation center service that has been approved by the state or a designee of the operator shall:
- (a) Provide the court a written evaluation of a client within 20 working days after the [operator] program receives the referral [from the court.
- 4. The evaluation technician shall use a standardized form to prepare the evaluation of an offender as required by the bureau and the office of traffic safety of the department of motor vehicles and public safety.
 - 5. The standardized form required pursuant to subsection 4 must include:
 - (a) Basic identification data.
- (b) A review of all criminal convictions of the offender, including, without limitation, traffic offenses. A review of the offender's record may be provided by the National Criminal Investigation Check or the department of motor vehicles and public safety, or both.
 - (c) The results of the assessment tool.
- (d) A summary of the evaluation technician's conclusions, including, without limitation, his conclusion regarding the offender's social, medical and family history.
 - (e) Any suggested treatment and options for referral, if appropriate.
 - (f) The financial status of the offender.

- 6. As used in this section, "evaluation center" has the meaning ascribed to it in NRS 484.3793.1:
- (b) Report the results of evaluation to the court in a format acceptable to the court that referred the client to the program; and
 - (c) Maintain a record for each client that includes, without limitation:
 - (1) The signed consent of the client to the service;
- (2) Documentation substantiating the determination of whether the client is an alcoholic, addict or abuser of alcohol or other drugs;
- (3) Documentation substantiating any recommendation to the court concerning the type of treatment required;
- (4) Assessment of the client sufficient to determine the appropriate level of service for the client pursuant to the criteria set forth in "Patient Placement Criteria for the Treatment of Substance-Related Disorders," Second Edition;
 - (5) Any criminal history of the client;
- (6) Any other information concerning the history or condition of the client that should be considered in determining a recommendation concerning treatment; and
 - (7) A summary of the findings of the evaluation.
 - **Sec. 86.** NAC 458.420 is hereby amended to read as follows:
- 458.420 Each of the following acts constitutes a ground for a hearing to consider the [suspension or] revocation of [a certificate of accreditation:
- 1. A deviation from the alcohol and drug abuse program as originally accredited which adversely affects the quality or scope of services under the program.

- 2. A violation of an applicable provision of this chapter.
- 3. The failure of a program to maintain at least a level III accreditation for 12 or more months during a 24-month period, or if a program has been reclassified as a level II accreditation, two times within a 24-month period.
- 4. The failure of a program that is funded by the bureau to admit a patient because of his inability to pay for services.
 - 5. A determination that a program has defrauded an insurance company.
- 6. A determination that the program has provided false information to the bureau or to a source of federal funding.
 - 7. A determination that the program has provided] approval of a service by the state:
 - 1. Diminished quality of the service from when it was originally approved.
 - 2. A major exception to compliance.
- 3. Disseminating false or misleading information to the public [or patients relating to the services provided, the cost of services, the qualifications of employees, or the authorized scope of practice of the program or its employees. The false or misleading information may be communicated orally, in print or by any marketing method.], consumers or the bureau.
- 4. Failure of the operator or staff of the program to comply with the standards of practice of this chapter.
 - **Sec. 87.** NAC 458.425 is hereby amended to read as follows:

- 458.425 The operator of [an accredited] *a* program may apply for reinstatement of [its accreditation] *approval of a service by the state* not less than 6 months after [the suspension or revocation which has been conducted pursuant to NAC 458.210.] *revocation of approval*.
 - **Sec. 88.** NAC 458.430 is hereby amended to read as follows:
 - 458.430 [A]
- 1. Except as otherwise provided in subsection 2, a certificate of [accreditation for a program] approval by the state of a service is not transferable from the holder to another person and may not be used for any other program.
- 2. If the owner of a program sells or otherwise transfers the program, the new operator of the program may operate under the certificate of approval held by the previous owner for not longer than 6 months.
 - **Sec. 89.** NAC 458.450 is hereby amended to read as follows:
- 458.450 The ethical standards and requirements set forth in NAC 458.460 to 458.580, inclusive, apply to [alcohol and drug abuse counselors, counselor interns, program administrators and any person who is certified in any other program or specialty area established] operators and staff of programs providing a service for primary prevention and clinical services approved by the state and to persons holding a certification or registration issued by the bureau.
 - **Sec. 90.** NAC 458.470 is hereby amended to read as follows:
- 458.470 A [professional in the field] person providing a primary prevention service or a clinical service for abuse of alcohol and [drug abuse] other drugs shall:
 - 1. Maintain objectivity, integrity and high standards in the services he offers [.

- 2. Recognize the effect of any impairment on his performance and seek treatment if necessary.]; and
- 2. If his ability to perform an activity authorized by a certification or registration issued by the bureau, or to provide a service approved by the state, becomes impaired as the result of abuse of or dependence upon alcohol or another drug:
- (a) Not perform any activity authorized by his certification or registration, or the service approved by the state, while his ability to perform the activity or provide the service is impaired; and
 - (b) Seek treatment, if necessary.
 - **Sec. 91.** NAC 458.480 is hereby amended to read as follows:
- 458.480 A [professional in the field of alcohol and drug abuse] person providing a primary prevention service or a clinical service shall not:
 - 1. Claim, directly or by implication, any qualification that he does not possess;
- 2. [Attempt to offer services or use techniques outside the scope of his duties as outlined in the certification package;
 - 3. Use his certification for any purpose outside the scope for which it was issued;
- 4. Allow his name to be used in connection with any services or products in such a way that is incorrect or misleading; or
- 5. Offer for sale any publication that is not of professional quality.] Use a certification or registration issued by the bureau, or an approval of services by the state, to offer or perform activities or to provide services other than those authorized by this chapter; or
 - 3. Provide clinical services requiring licensure in the absence of such licensure.

- Sec. 92. NAC 458.490 is hereby amended to read as follows:
- 458.490 A [professional in the field of alcohol and drug abuse shall:
- 1. Use] person providing a clinical service for abuse of alcohol and other drugs shall use information that is generally accepted in the field of abuse of alcohol and [drug abuse to carry out the duties of his employment;
- 2. Report fairly and accurately appropriate information to patients, fellow professionals and the general public;
 - 3. Acknowledge and document materials and techniques used in his practice; and
- 4. In training others, indicate the required training and qualifications to perform properly the duties of a professional in the field of alcohol and drug abuse.] *other drugs*.
 - **Sec. 93.** NAC 458.510 is hereby amended to read as follows:
- 458.510 A [professional in the field] *person providing a clinical service for abuse* of alcohol and [drug abuse] *other drugs* shall:
 - 1. Act in the best [treatment] clinical interests of the [patient.] client; and
- 2. Terminate [a counseling or consulting relationship or refer the patient] *the professional relationship* if it is reasonably clear that the [patient] *client* is not benefiting from the relationship.
- [3. If a patient refuses treatment, referral or other recommendations made by the professional, carefully consider the welfare of the patient by weighing the benefits of attempting to continue treatment against the benefits of terminating the relationship.

- 4. If he needs information from a person who has previously treated a patient, inform the patient of the nature and purpose of the correspondence. Any information received must be used only for the purpose that has been expressed to the patient.
- 5. Use a patient in a role of demonstration only if such use will have no detrimental effect on the patient.
- 6. Collaborate with other health care professionals to provide a supportive environment for any of his patients who are receiving medication for the treatment of alcohol and drug abuse.]
 - **Sec. 94.** NAC 458.520 is hereby amended to read as follows:
- 458.520 A [professional in the field] person providing a primary prevention service or a clinical service for abuse of alcohol and [drug abuse] other drugs shall not:
- 1. Enter into a professional relationship with a member of his family, a close friend or associate, or any other person with whom the professional has a significant relationship that is not related to [therapy;] the professional relationship; or
- 2. [Enter into a sexual or other close, personal relationship with a current patient or with a former patient for] *For* a period of [1 year] 2 years after the termination of the professional relationship [.]:
- (a) Enter into a close personal relationship with a current or former patient, including, without limitation, sponsorship of a patient who is participating in a group for self-help or any romantic or sexual relationship with a patient:

- (b) Enter into, or attempt to enter into, a financial relationship that is unrelated to a primary prevention service or a clinical service for abuse of alcohol and other drugs with a current or former client; or
- (c) Enter into a romantic or sexual relationship with a person who was in a romantic or sexual relationship with the client at the time the service provider was providing the primary prevention service or clinical service to the client.
 - **Sec. 95.** NAC 458.530 is hereby amended to read as follows:
- 458.530 A [professional in the field] person providing a clinical service for abuse of alcohol and [drug abuse shall inform a prospective patient of all aspects of treatment.] other drugs, other than a service for civil protective custody, may provide the service only with the informed consent of the client.
 - **Sec. 96.** NAC 458.540 is hereby amended to read as follows:
- 458.540 A [professional in the field] person providing a primary prevention service or a clinical service for abuse of alcohol and [drug abuse] other drugs shall:
- 1. Inform prospective patients of financial arrangements before [initiating the professional relationship. Such arrangements must be in accordance with generally accepted standards in his field.
- 2. Consider the ability of the patient to pay for his services when establishing rates of compensation.
 - 3.] providing the service;
- 2. Maintain accurate records of any fees charged to a client and of any payments made by a client;

- 3. Make the records required pursuant to subsection 2 available to the client for review upon request;
- 4. Not give or receive any commission or any other form of remuneration for the referral of clients [.
 - 4. Not split fees with other professionals.] from the party to whom clients are referred; or
- 5. Not use his relationship with a patient to promote his personal gain or profit. [for any commercial enterprise.
- 6. Except as otherwise provided in this subsection, not accept a fee or any gift or gratuity for working with a patient whose fees are paid by an institution or agency. If the policies or provisions of a particular agency allow for the professional to receive a fee, gift or gratuity, the patient must be advised of such policies or provisions which may affect him.]
 - **Sec. 97.** NAC 458.550 is hereby amended to read as follows:
- 458.550 A [professional in the field] *person providing a clinical service for abuse* of alcohol and [drug abuse] *other drugs* shall:
- 1. Practice in compliance with the [requirement] *standards* relating to confidentiality set forth in 42 C.F.R. Part 2 [.
 - 2. Protect the privacy of his patients.
- 3.], independent of whether the person is providing services of a program for treatment that receives assistance from the Federal Government;
 - 2. Inform a [patient] *client* and obtain his authorization if:
 - (a) He intends to make a recording of an interview with [a patient.
 - (b) He intends to use any information gathered during such an interview.

- (c)] the client; or
- (b) Another person intends to observe an interview with the [patient.
- 4. If he is not subject to the provisions of NRS 458.280, make provisions for the maintenance of records pursuant to the requirements of 42 C.F.R. Part 2.
- 5. If he is not subject to the provisions of NRS 458.280, reveal information received in confidence only if there is a clear and imminent danger to the patient or another person. Such information may be released only to an appropriate person or persons.
- 6. Discuss information received in clinical or consulting relationships only with other professionals in the program. A report on such information must include only data that is pertinent to the evaluation and every effort must be made to prevent the disclosure of the identity of the patient.
- 7. Use clinical and other material that is confidential in a classroom setting only if the material is used in such a way as to prevent the disclosure of the identity of the patient.] *client*.
 - **Sec. 98.** NAC 458.560 is hereby amended to read as follows:
- 458.560 A [professional in the field] *person providing a clinical service for abuse* of alcohol and [drug abuse shall:
 - 1. Treat colleagues and other professionals with respect, courtesy and objectivity;
- 2. Refrain from offering his services to a patient who is under the care of a colleague, unless the colleague has been notified or the former relationship has been terminated; and
- 3. Cooperate with any recognized committee on professional ethics and comply with any reasonable request for information made by such a committee.] *other drugs who is aware that*

a patient is receiving treatment for abuse of alcohol or other drugs from another person or organization shall not provide treatment to the patient without coordination of care.

- **Sec. 99.** NAC 458.580 is hereby amended to read as follows:
- 458.580 1. A [professional in the field] person providing a primary prevention service or a clinical service for abuse of alcohol and [drug abuse shall report] other drugs shall not provide information to the bureau [any:
 - 1. Counseling or its representative that the person knows to be false.
 - 2. A person providing a clinical service for abuse of alcohol and other drugs shall:
- (a) Report to the bureau any assessment or counseling for alcohol and drug abuse that is conducted by an unqualified or unauthorized person [.
 - 2. Unethical conduct or unprofessional practice by other professionals];
- (b) Report to the bureau any violation of the standards of practice of this chapter that he has witnessed or that has been reported to him [.];
- (c) If a violation of the standards of practice of this chapter is reported to him by a client, inform the client of how a complaint may be filed with the bureau; and
- (d) Report to the bureau knowledge of any conviction of a person registered with or certified by the bureau of a violation of a law relating to alcohol or controlled substances.
- **Sec. 100.** NAC 458.023, 458.025, 458.031, 458.053, 458.055, 458.057, 458.100, 458.121, 458.148, 458.151, 458.155, 458.161, 458.171, 458.201, 458.210, 458.215, 458.239, 458.270, 458.281, 458.290, 458.295, 458.300, 458.305, 458.310, 458.315, 458.320, 458.340, 458.350, 458.360, 458.370, 458.390, 458.395, 458.400, 458.403, 458.405, 458.410, 458.460 and 458.500 are hereby repealed.

LEADLINES OF REPEALED SECTIONS

- 458.023 "Case management" defined.
- 458.025 "Classify alcohol and drug abuse" defined.
- 458.031 "Division" defined.
- 458.053 "Operator of an alcohol and drug abuse program" defined.
- 458.055 "Program administrator" defined.
- 458.057 "Program for treatment with methadone" defined.
- 458.100 Mandatory certification as program administrator or as alcohol and drug abuse counselor; optional certification as program administrator.
- 458.121 Requirements for employment as counselor, program administrator, counselor intern or evaluation technician; grounds for rejection of application.
- 458.148 Certification as evaluation technician: Minimum requirements; examinations; authorized activities; supervision by certified alcohol and drug abuse counselor.
- 458.151 Certification as alcohol and drug abuse counselor: Minimum requirements; examinations; authorized activities.
- 458.155 Certification in specialty area of alcohol and drug abuse treatment: Minimum requirements; examinations; authorized activities.

- 458.161 Certification as program administrator: Minimum requirements; examinations; authorized activities.
- 458.171 Certification by reciprocity.
- 458.201 Notification of bureau regarding conviction of certain crimes or revocation of certain licenses or certificates; investigation of notification.
- 458.210 Violation of provisions of chapter: Filing of complaint; investigation and hearing; disciplinary action.
- 458.215 Certification as alcohol and drug abuse counselor or program administrator:

 Appeal of revocation or suspension.
- 458.239 Effect of failure to complete required training.
- 458.270 Requirements for certificate of accreditation.
- 458.281 Requirements for accreditation of program for intervention in abuse of alcohol or other drugs.
- 458.290 Review of application and initial inspection; notice and plan for removal of deficiencies; accreditation based on plan; effect of level I accreditation.
- 458.295 Expiration of level III accreditation; renewal of accreditation; effect of major deficiency or failure to submit plan for correcting deficiencies; effect of accreditation at level II; action by health division.
- 458.300 Manual of policies and procedures.
- 458.305 Plan for transfer of patients in program for treatment with methadone.
- 458.310 General requirements for programs.
- 458.315 Evaluation of alcohol and drug abuse program.

- 458.320 Governing body: Requirement; duties.
- 458.340 Requirements for personnel; operation of state-funded programs for treatment of intravenous drug abusers.
- 458.350 Financial requirements: Policies and procedures; records.
- 458.360 Programs receiving state or federal money: General requirements.
- 458.370 Assessment and collection of fees for services.
- 458.390 Records: Patient of program for detoxification.
- 458.395 Records: Program for intervention in abuse of alcohol or other drugs.
- 458.400 Records: Program for prevention.
- 458.403 Records: Program for civil protective custody.
- 458.405 Records: Employee assistance program.
- 458.410 Records: Periods of retention.
- 458.460 Discrimination prohibited.
- 458.500 Publications: Assignment of credit to contributors.