

Senate Bill No. 69—Committee on
Health and Human Services

CHAPTER.....

AN ACT relating to behavioral health; requiring peer recovery support specialists and peer recovery support specialist supervisors who provide peer recovery support services under certain conditions to be certified; authorizing the imposition of civil penalties for certain violations; prohibiting the employment or retention as an independent contractor of a person to provide or supervise the provision of peer recovery support services in a position where the person has regular and substantial contact with minors if the person has been found to have engaged in certain conduct; requiring a certified peer recovery support specialist or certified peer recovery support specialist supervisor to report certain information; requiring the Department of Education to publish a list of evidence-based curricula and programs concerning the prevention of substance misuse and substance use disorder; requiring the participation of public schools in a biennial survey to collect data concerning youth risk behavior of pupils enrolled in certain grades in a public school; abolishing requirements for the licensure of peer support recovery organizations; providing for the certification of substance use disorder prevention coalitions and prescribing the duties of such a coalition; requiring certain reporting concerning curricula and programs on substance misuse and substance use disorders in public schools; providing a penalty; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

Existing law: (1) defines the term “peer support recovery organization” to mean a person or agency which, for compensation, provides peer support services to persons who are 18 years of age or older and who suffer from mental illness or an addictive disorder or identify themselves as at risk for mental illness or an addictive disorder; and (2) requires a peer support recovery organization to be licensed by the Division of Public and Behavioral Health of the Department of Health and Human Services as a facility for the dependent. (NRS 449.0045, 449.01563, 449.030) **Sections 20.3, 22.5-24.8, 25.2-25.7 and 36** of this bill remove existing provisions for the licensing and regulation of peer support recovery organizations. **Sections 2-15.7** instead prescribe certain requirements governing natural persons who provide peer recovery support services. **Section 5** of this bill defines the term “peer recovery support services” to mean nonclinical supportive services that use lived experience in recovery from a substance use disorder or other behavioral health disorder to promote recovery in another person with a substance use disorder or other behavioral health disorder by advocating, mentoring, educating, offering hope and providing assistance in navigating systems. **Sections 2.5-4, 6 and 7** of this bill define certain additional relevant terms. **Section 8** of this bill: (1) requires, in



general, an adult to be certified by the Nevada Certification Board, or its successor organization, as a peer recovery support specialist or peer recovery support specialist supervisor before providing or supervising the provision of, as applicable, peer recovery support services for compensation as a regular part of his or her job duties; (2) provides for the imposition of a civil penalty against an adult who violates that requirement; and (3) authorizes an adult who is not certified to provide peer recovery support services to adults for compensation as an intern under certain circumstances. **Section 15** of this bill authorizes the Division to bring an action to enjoin any adult from providing or supervising the provision of peer recovery support services in violation of **section 8**.

Sections 9-14 and 31.5 of this bill provide for the certification and regulation of peer recovery support specialists and peer recovery support specialist supervisors by the Division if the Nevada Certification Board or its successor organization ceases to certify such persons. Specifically, **section 31.5** replaces the required certification by the Nevada Certification Board or its successor organization with a requirement for an adult who provides or supervises the provision of peer recovery support services for compensation as a regular part of his or her job duties to obtain certification from the Division under those circumstances. If the Division issues such certification because the Nevada Certification Board ceases to do so, **section 9** of this bill: (1) requires the State Board of Health to adopt regulations governing peer recovery support services; and (2) authorizes the Board to establish by regulation exemptions from the requirement to be certified by the Division.

Existing federal law requires each state to adopt procedures to ensure that applicants for certain licenses and certificates comply with child support obligations. (42 U.S.C. § 666) **Sections 10 and 11** of this bill enact such procedures as applicable to an applicant to the Division for a certificate as a peer recovery support specialist or peer recovery support specialist supervisor in order to comply with federal law.

If the Division certifies peer recovery support specialists pursuant to **sections 9 and 31.5, sections 12 and 13** of this bill provide for the issuance of a certificate as a peer recovery support specialist or peer recovery support specialist supervisor by endorsement to certain applicants who are licensed, certified or hold another credential as a peer recovery support specialist or peer recovery support specialist supervisor, as applicable, issued by another jurisdiction.

Section 14 of this bill: (1) requires an applicant to the Division for renewal of a certificate who has a state business license to provide his or her business identification number in the application; and (2) prohibits the renewal of a certificate if the applicant fails to provide such information or is delinquent on a debt to a state agency.

Section 15.6 of this bill requires an employer, a person or an entity who employs a person for the purpose of providing or supervising the provision of peer recovery support services in a position where the person has regular and substantial contact with minors or retains an independent contractor to provide those services in such a position to undergo a screening to determine whether the person has, within the immediately preceding 5 years, been the subject of a substantiated report of: (1) the abuse or neglect of a child; or (2) a violation of provisions prohibiting certain sexual conduct regarding minors, corporal punishment in public schools or the use of aversive interventions against pupils with disabilities in private schools. **Section 15.6** in general: (1) prohibits the employment of a person or retention of a person as an independent contractor for the purpose of providing peer recovery support services in a position where the person has regular and substantial contact with minors if the person has been found to have engaged in such conduct within the immediately preceding 5 years; and (2) requires the termination of an employee



or independent contractor who provides peer recovery support services in a position where the person has regular and substantial contact with minors and has been found to have engaged in such conduct within that period. **Section 15.6** authorizes an employee or independent contractor who believes that the information provided through a screening is incorrect to attempt to correct the information. **Section 15.6** also authorizes the Division to adopt regulations establishing a process to determine whether an employee or independent contractor who has been found to have engaged in such conduct within the immediately preceding 5 years may continue to provide peer recovery support services and have regular and substantial contact with minors. **Section 15.6** provides for the imposition of administrative penalties on persons and entities who violate those requirements. **Section 15.7** of this bill requires a person or entity that employs a person or retains an independent contractor to provide or supervise the provision of peer recovery support services in a position where the person has regular and substantial contact with minors to maintain certain records of the screenings required by **section 15.6**.

Sections 17, 21 and 28 of this bill require a certified peer recovery support specialist or certified peer recovery support specialist supervisor to report: (1) the abuse, neglect, exploitation, isolation or abandonment of an older person or vulnerable person; (2) the abuse or neglect of a child; and (3) violations of statutes or regulations governing nursing. If the Division certifies peer recovery support specialists and peer recovery support specialist supervisors pursuant to **sections 9 and 31.5** and a peer recovery support specialist or peer recovery support specialist supervisor is reported to have abused, neglected, exploited, isolated or abandoned an older person or vulnerable person, **section 18** of this bill requires the submission of the information in the report to the Division. **Section 25** of this bill makes a conforming change to reflect the replacement of the requirement that peer support recovery organizations must be licensed with a requirement that peer recovery support specialists and peer recovery support specialist supervisors must be certified. **Sections 29-31** of this bill exempt certified peer recovery support specialists and certified peer recovery support specialist supervisors from provisions governing certain other professions related to behavioral health.

Existing law requires the Council to Establish Academic Standards for Public Schools to establish standards of content and performance for certain subjects, including health and science. (NRS 389.520) Existing regulations establish standards of content and performance for health in the sixth, seventh and eighth grades and high school that include instruction related to substance use, misuse and abuse. (NAC 389.381, 389.455) **Section 18.5** of this bill requires the Department of Education to develop, maintain and publish a list of evidence-based curricula and programs concerning substance misuse and substance use disorders. **Section 32** of this bill requires the board of trustees of each school district and the governing body of each charter school to submit to the Legislative Committee on Education a report that describes any curriculum or program concerning substance misuse or substance use disorders used or offered in the school district or charter school, as applicable, during the 2020-2021 school year.

Section 20 of this bill requires the board of trustees of each school district and the governing body of each charter school that operates a middle school, junior high school or high school to ensure that the school district or charter school participates in the biennial survey administered pursuant to the Youth Risk Behavior Surveillance System developed by the Centers for Disease Control and Prevention of the United States Department of Health and Human Services, which is a system pursuant to which a survey is administered every other year to a sampling of pupils in grades 6 to 12, inclusive, to collect data concerning health-risk behaviors by such pupils. **Section 20** also authorizes: (1) the parent or guardian



of a pupil who is an unemancipated minor to refuse consent to the administration of the survey to the pupil; and (2) a pupil to refuse to participate in the survey.

Existing law requires the Division of Public and Behavioral Health of the Department of Health and Human Services to: (1) formulate and operate a comprehensive state plan for programs for alcohol or other substance use disorders; and (2) coordinate the efforts to carry out the state plan and coordinate all state and federal financial support of programs for alcohol or other substance use disorders in this State. (NRS 458.025) **Section 26** of this bill requires the State Board of Health to adopt regulations providing for the certification of substance use disorder prevention coalitions, which are coalitions of persons and entities who possess knowledge and experience related to the prevention of substance misuse and substance use disorders in regions of this State. **Section 26** also prescribes the duties of a certified substance use disorder prevention coalition, and **section 27** of this bill makes a conforming change to indicate the placement of **section 26** within the Nevada Revised Statutes.

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

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

Section 1. Chapter 433 of NRS is hereby amended by adding thereto the provisions set forth as sections 2 to 15.7, inclusive, of this act.

Sec. 2. *As used in sections 2 to 15.7, inclusive, of this act, unless the context otherwise requires, the words and terms defined in sections 2.5 to 7, inclusive, of this act have the meanings ascribed to them in those sections.*

Sec. 2.5. *“Adult” means a natural person who is 18 years of age or older.*

Sec. 3. *“Board” means the State Board of Health.*

Sec. 4. *“Certificate” means a certificate issued by the Division that authorizes the holder to provide or supervise the provision of peer recovery support services, as applicable.*

Sec. 5. *“Peer recovery support services” means nonclinical supportive services that use lived experience in recovery from a substance use disorder or other behavioral health disorder to promote recovery in another person with a substance use disorder or other behavioral health disorder by advocating, mentoring, educating, offering hope and providing assistance in navigating systems.*

Sec. 6. *“Peer recovery support specialist” means an adult who is authorized under the provisions of section 8 of this act to provide peer recovery support services for compensation as a regular part of his or her job duties. The term does not include a peer recovery support specialist intern.*



Sec. 6.5. *“Peer recovery support specialist intern” means an adult who is authorized under the provisions of section 8 of this act to provide peer recovery support services for compensation as a regular part of his or her job duties while the adult is acquiring the experience necessary for certification as a peer recovery support specialist.*

Sec. 7. *“Peer recovery support specialist supervisor” means an adult who is authorized under the provisions of section 8 of this act to supervise the provision of peer recovery support services for compensation as a regular part of his or her job duties.*

Sec. 8. 1. *Except as authorized by subsection 2, an adult shall not:*

(a) Provide peer recovery support services for compensation as a regular part of his or her job duties or hold himself or herself out as authorized to provide peer recovery support services unless he or she holds a valid certificate as a peer recovery support specialist issued by the Nevada Certification Board or its successor organization.

(b) Supervise the provision of peer recovery support services for compensation as a regular part of his or her job duties or hold himself or herself out as authorized to supervise the provision of peer recovery support services unless he or she holds a valid certificate as a peer recovery support specialist supervisor issued by the Nevada Certification Board or its successor organization.

2. *If the Nevada Certification Board or its successor organization establishes conditions governing the provision of peer recovery support services by a person who is not certified as a peer recovery support specialist while the person is acquiring the experience necessary for certification as a peer recovery support specialist, an adult who is not certified as a peer recovery support specialist may:*

(a) Provide peer recovery support services for compensation as a regular part of his or her job duties under those conditions; and

(b) Use the title of “peer recovery support specialist intern” while providing peer recovery support services under those conditions.

3. *The Division may impose upon an adult who violates this section a civil penalty in an amount prescribed by regulation of the Board.*

Sec. 9. 1. *The Board shall adopt regulations governing the provision of peer recovery support services. The regulations must prescribe:*



(a) *The requirements for the issuance and renewal of a certificate as a peer recovery support specialist or peer recovery support specialist supervisor, which must include, without limitation, required training and experience for peer recovery support specialists and peer recovery support specialist supervisors.*

(b) *Requirements governing the supervision of peer recovery support specialists by peer recovery support specialist supervisors.*

(c) *Procedures for the Division to investigate misconduct by a peer recovery support specialist or peer recovery support specialist supervisor and to impose disciplinary action for such misconduct.*

(d) *The forms of disciplinary action that the Division may impose against a peer recovery support specialist or peer recovery support specialist supervisor.*

2. *The Board may, by regulation, prescribe a fee for:*

(a) *The issuance of a certificate; and*

(b) *The renewal of a certificate.*

3. *Any fee prescribed pursuant to subsection 2 must be calculated to produce the revenue estimated to cover the costs related to the issuance and renewal of certificates, but in no case may the fee for the issuance or renewal of a certificate exceed the actual cost to the Division of issuing or renewing the certificate, as applicable.*

4. *The regulations adopted pursuant to this section may establish exemptions from the provisions of section 8 of this act.*

Sec. 10. 1. *A person who applies for the issuance or renewal of a certificate must:*

(a) *Include the social security number of the applicant in the application submitted to the Division.*

(b) *Submit to the Division the statement prescribed by the Division of Welfare and Supportive Services of the Department pursuant to NRS 425.520. The statement must be completed and signed by the applicant.*

2. *The Division shall include the statement required pursuant to subsection 1 in:*

(a) *The application or any other forms that must be submitted for the issuance or renewal of the certificate; or*

(b) *A separate form prescribed by the Division.*

3. *A certificate may not be issued or renewed by the Division if the applicant:*

(a) *Fails to submit the statement required pursuant to subsection 1; or*



(b) Indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

4. If an applicant indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order, the Division shall advise the applicant to contact the district attorney or other public agency enforcing the order to determine the actions that the applicant may take to satisfy the arrearage.

Sec. 11. *1. If the Division receives a copy of a court order issued pursuant to NRS 425.540 that provides for the suspension of all professional, occupational and recreational licenses, certificates and permits issued to a natural person who is the holder of a certificate, the Division shall deem the certificate issued to that person to be suspended at the end of the 30th day after the date the court order was issued unless the Division receives a letter issued to the holder of the certificate by the district attorney or other public agency pursuant to NRS 425.550 stating that the holder of the certificate has complied with the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560.*

2. The Division shall reinstate a certificate that has been suspended by a district court pursuant to NRS 425.540 if the Division receives a letter issued by the district attorney or other public agency pursuant to NRS 425.550 to the person whose certificate was suspended stating that the person whose certificate was suspended has complied with the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560.

Sec. 12. *1. The Division may issue a certificate by endorsement as a peer recovery support specialist or peer recovery support specialist supervisor to an applicant who meets the requirements set forth in this section. An applicant may submit to the Division an application for such a certificate if the applicant holds a corresponding valid and unrestricted license, certificate or other credential as a peer recovery support specialist or peer recovery support specialist supervisor, as applicable, in the District of Columbia or any state or territory of the United States.*



2. *An applicant for a certificate by endorsement pursuant to this section must submit to the Division with his or her application:*

(a) *Proof satisfactory to the Division that the applicant:*

(1) *Satisfies the requirements of subsection 1;*

(2) *Has not been disciplined or investigated by the corresponding regulatory authority of the District of Columbia or any state or territory in which the applicant currently holds or has held a license, certificate or other credential as a peer recovery support specialist or peer recovery support specialist supervisor, as applicable; and*

(3) *Has not been held civilly or criminally liable for malpractice in the District of Columbia or any state or territory of the United States;*

(b) *An affidavit stating that the information contained in the application and any accompanying material is true and correct;*

(c) *The fee prescribed by the Board in the regulations adopted pursuant to section 9 of this act; and*

(d) *Any other information required by the Division.*

3. *Not later than 15 business days after the Division receives an application for a certificate by endorsement as a peer recovery support specialist or peer recovery support specialist supervisor pursuant to this section, the Division shall provide written notice to the applicant of any additional information required by the Division to consider the application. Unless the Division denies the application for good cause, the Division shall approve the application and issue a certificate by endorsement as a peer recovery support specialist or peer recovery support specialist supervisor, as applicable, to the applicant not later than 45 days after receiving the application.*

Sec. 13. 1. *The Division may issue a certificate by endorsement as a peer recovery support specialist or peer recovery support specialist supervisor to an applicant who meets the requirements set forth in this section. An applicant may submit to the Division an application for such a certificate if the applicant:*

(a) *Holds a corresponding valid and unrestricted license, certificate or other credential as a peer recovery support specialist or peer recovery support specialist supervisor, as applicable, in the District of Columbia or any state or territory of the United States; and*

(b) *Is an active member of, or the spouse of an active member of, the Armed Forces of the United States, a veteran or the spouse, widow or widower of a veteran.*



2. *An applicant for a certificate by endorsement pursuant to this section must submit to the Division with his or her application:*

(a) *Proof satisfactory to the Division that the applicant:*

(1) *Satisfies the requirements of subsection 1;*

(2) *Has not been disciplined or investigated by the corresponding regulatory authority of the District of Columbia or any state or territory in which the applicant currently holds or has held a license, certificate or other credential as a peer recovery support specialist or peer recovery support specialist supervisor, as applicable; and*

(3) *Has not been held civilly or criminally liable for malpractice in the District of Columbia or any state or territory of the United States;*

(b) *An affidavit stating that the information contained in the application and any accompanying material is true and correct;*

(c) *The fee prescribed by the Board in the regulations adopted pursuant to section 9 of this act; and*

(d) *Any other information required by the Division.*

3. *Not later than 15 business days after the Division receives an application for a certificate by endorsement as a peer recovery support specialist or peer recovery support specialist supervisor pursuant to this section, the Division shall provide written notice to the applicant of any additional information required by the Division to consider the application. Unless the Division denies the application for good cause, the Division shall approve the application and issue a certificate by endorsement as a peer recovery support specialist or peer recovery support specialist supervisor, as applicable, to the applicant not later than 45 days after receiving all the additional information required by the Division to complete the application.*

4. *At any time before making a final decision on an application for a certificate by endorsement pursuant to this section, the Division may grant a provisional certificate authorizing an applicant to practice as a peer recovery support specialist or peer recovery support specialist supervisor, as applicable, in accordance with regulations adopted by the Board.*

5. *As used in this section, "veteran" has the meaning ascribed to it in NRS 417.005.*

Sec. 14. *1. In addition to any other requirements set forth in sections 2 to 15.7, inclusive, of this act, an applicant for the renewal of a certificate as a recovery support specialist or recovery support specialist supervisor must indicate in the application*



submitted to the Division whether the applicant has a state business license. If the applicant has a state business license, the applicant must include in the application the business identification number assigned by the Secretary of State upon compliance with the provisions of chapter 76 of NRS.

2. A certificate may not be renewed if:

(a) The applicant fails to submit the information required by subsection 1; or

(b) The State Controller has informed the Division pursuant to subsection 5 of NRS 353C.1965 that the applicant owes a debt to an agency that has been assigned to the State Controller for collection and the applicant has not:

(1) Satisfied the debt;

(2) Entered into an agreement for the payment of the debt pursuant to NRS 353C.130; or

(3) Demonstrated that the debt is not valid.

3. As used in this section:

(a) "Agency" has the meaning ascribed to it in NRS 353C.020.

(b) "Debt" has the meaning ascribed to it in NRS 353C.040.

Sec. 15. 1. *The Division may bring an action in the name of the State of Nevada to enjoin any adult from engaging in conduct that violates the provisions of section 8 of this act.*

2. It is sufficient in such an action to allege that the defendant did, on a certain date and in a certain place, engage in conduct for which a certificate is required by section 8 of this act without a valid certificate.

Secs. 15.2 and 15.4. (Deleted by amendment.)

Sec. 15.6. 1. *Not later than 3 days after employing a person to provide or supervise the provision of peer recovery support services in a position where the person has regular and substantial contact with minors or retaining a person as an independent contractor to provide or supervise the provision of peer recovery support services in such a position and every 5 years thereafter, an employer, or person or entity who retained the independent contractor shall:*

(a) Obtain from the employee or independent contractor written authorization for the release of any information that may be available from the Statewide Central Registry for the Collection of Information Concerning the Abuse or Neglect of a Child established pursuant to NRS 432.100; and

(b) Complete a child abuse and neglect screening through the Central Registry to determine whether there has been a substantiated report of child abuse or neglect or a violation of



NRS 201.540, 201.560, 392.4633 or 394.366 made against the person.

2. Except as otherwise provided in any regulations adopted pursuant to subsection 4, upon receiving information pursuant to subsection 1 from the Central Registry or from any other source that an employee or independent contractor described in subsection 1 has, within the immediately preceding 5 years, had a substantiated report of child abuse or neglect or a violation of NRS 201.540, 201.560, 392.4633 or 394.366 made against him or her, the employer or person or entity who retained the independent contractor shall terminate the employment or contract of the employee or independent contractor, as applicable, after allowing the employee or independent contractor time to correct the information as required pursuant to subsection 3.

3. If an employee or independent contractor described in subsection 1 believes that the information provided to the employer or person or entity who retained the independent contractor pursuant to subsection 2 is incorrect, the employee or independent contractor must inform the employer, person or entity immediately. The employer, person or entity shall give any such employee or independent contractor 30 days to correct the information.

4. The Division, in consultation with each agency which provides child welfare services, may establish by regulation a process by which it may review evidence upon request to determine whether an employee or independent contractor described in subsection 1 who has, within the immediately preceding 5 years, had a substantiated report of child abuse or neglect or a violation of NRS 201.540, 201.560, 392.4633 or 394.366 made against him or her may continue to provide or supervise the provision of peer recovery support services and have regular and substantial contact with minors despite the report. Any such review must be conducted in a manner which does not discriminate against a person in violation of 42 U.S.C. §§ 2000e et seq.

5. If a process for review is established pursuant to subsection 4, an employee or independent contractor described in subsection 1 may request such a review in the manner established by the Division. Any determination made by the Division is final for purposes of judicial review.

6. During any period in which an employee or independent contractor seeks to correct information pursuant to subsection 3 or requests a review of information pursuant to subsection 5, it is within the discretion of the employer or person or entity who



retained the independent contractor whether to allow the employee or independent contractor to continue to work for the employer, person or entity, as applicable, except that the employee or independent contractor shall not have regular and substantial contact with minors without supervision during such a period.

7. The Division shall adopt regulations to establish civil penalties to be imposed against any person or entity that fails to comply with the requirements of this section.

8. As used in this section, "agency which provides child welfare services" has the meaning ascribed to it in NRS 424.011.

Sec. 15.7. 1. *A person or entity that employs a person or retains an independent contractor for the purpose of providing or supervising the provision of peer recovery support services in a position where the person has regular and substantial contact with minors shall maintain records of the information concerning such employees and independent contractors that is collected pursuant to section 15.6 of this act, including, without limitation, the written authorization for the release of information from the Statewide Central Registry for the Collection of Information Concerning the Abuse or Neglect of a Child established pursuant to NRS 432.100.*

2. The records maintained pursuant to subsection 1 must be:

(a) Maintained for the period that the employee or independent contractor has regular and substantial contact with minors; and

(b) Made available for inspection by the Division at any reasonable time and copies thereof must be furnished to the Division upon request.

Secs. 15.8 and 16. (Deleted by amendment.)

Sec. 17. NRS 200.5093 is hereby amended to read as follows:

200.5093 1. Any person who is described in subsection 4 and who, in a professional or occupational capacity, knows or has reasonable cause to believe that an older person or vulnerable person has been abused, neglected, exploited, isolated or abandoned shall:

(a) Except as otherwise provided in subsection 2, report the abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person to:

(1) The local office of the Aging and Disability Services Division of the Department of Health and Human Services;

(2) A police department or sheriff's office; or

(3) A toll-free telephone service designated by the Aging and Disability Services Division of the Department of Health and Human Services; and



(b) Make such a report as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the older person or vulnerable person has been abused, neglected, exploited, isolated or abandoned.

2. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that the abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person involves an act or omission of the Aging and Disability Services Division, another division of the Department of Health and Human Services or a law enforcement agency, the person shall make the report to an agency other than the one alleged to have committed the act or omission.

3. Each agency, after reducing a report to writing, shall forward a copy of the report to the Aging and Disability Services Division of the Department of Health and Human Services and the Unit for the Investigation and Prosecution of Crimes.

4. A report must be made pursuant to subsection 1 by the following persons:

(a) Every physician, dentist, dental hygienist, chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, physician assistant licensed pursuant to chapter 630 or 633 of NRS, perfusionist, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, clinical alcohol and drug counselor, alcohol and drug counselor, music therapist, athletic trainer, driver of an ambulance, paramedic, licensed dietitian, holder of a license or a limited license issued under the provisions of chapter 653 of NRS, *peer recovery support specialist, as defined in section 6 of this act, peer recovery support specialist supervisor, as defined in section 7 of this act*, or other person providing medical services licensed or certified to practice in this State, who examines, attends or treats an older person or vulnerable person who appears to have been abused, neglected, exploited, isolated or abandoned.

(b) Any personnel of a hospital or similar institution engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a hospital or similar institution upon notification of the suspected abuse, neglect, exploitation, isolation or abandonment of an older person or vulnerable person by a member of the staff of the hospital.

(c) A coroner.

(d) Every person who maintains or is employed by an agency to provide personal care services in the home.



(e) Every person who maintains or is employed by an agency to provide nursing in the home.

(f) Every person who operates, who is employed by or who contracts to provide services for an intermediary service organization as defined in NRS 449.4304.

(g) Any employee of the Department of Health and Human Services, except the State Long-Term Care Ombudsman appointed pursuant to NRS 427A.125 and any of his or her advocates or volunteers where prohibited from making such a report pursuant to 45 C.F.R. § 1321.11.

(h) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.

(i) Any person who maintains or is employed by a facility or establishment that provides care for older persons or vulnerable persons.

(j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect, exploitation, isolation or abandonment of an older person or vulnerable person and refers them to persons and agencies where their requests and needs can be met.

(k) Every social worker.

(l) Any person who owns or is employed by a funeral home or mortuary.

(m) ~~Every person who operates or is employed by a peer support recovery organization, as defined in NRS 449.01563.~~

~~(n)~~ Every person who operates or is employed by a community health worker pool, as defined in NRS 449.0028, or with whom a community health worker pool contracts to provide the services of a community health worker, as defined in NRS 449.0027.

5. A report may be made by any other person.

6. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that an older person or vulnerable person has died as a result of abuse, neglect, isolation or abandonment, the person shall, as soon as reasonably practicable, report this belief to the appropriate medical examiner or coroner, who shall investigate the cause of death of the older person or vulnerable person and submit to the appropriate local law enforcement agencies, the appropriate prosecuting attorney, the Aging and Disability Services Division of the Department of Health and Human Services and the Unit for the Investigation and Prosecution of Crimes his or her written findings. The written



findings must include the information required pursuant to the provisions of NRS 200.5094, when possible.

7. A division, office or department which receives a report pursuant to this section shall cause the investigation of the report to commence within 3 working days. A copy of the final report of the investigation conducted by a division, office or department, other than the Aging and Disability Services Division of the Department of Health and Human Services, must be forwarded within 30 days after the completion of the report to the:

- (a) Aging and Disability Services Division;
- (b) Repository for Information Concerning Crimes Against Older Persons or Vulnerable Persons created by NRS 179A.450; and
- (c) Unit for the Investigation and Prosecution of Crimes.

8. If the investigation of a report results in the belief that an older person or vulnerable person is abused, neglected, exploited, isolated or abandoned, the Aging and Disability Services Division of the Department of Health and Human Services or the county's office for protective services may provide protective services to the older person or vulnerable person if the older person or vulnerable person is able and willing to accept them.

9. A person who knowingly and willfully violates any of the provisions of this section is guilty of a misdemeanor.

10. As used in this section, "Unit for the Investigation and Prosecution of Crimes" means the Unit for the Investigation and Prosecution of Crimes Against Older Persons or Vulnerable Persons in the Office of the Attorney General created pursuant to NRS 228.265.

Sec. 18. NRS 200.5095 is hereby amended to read as follows:

200.5095 1. Reports made pursuant to NRS 200.5093 and 200.5094, and records and investigations relating to those reports, are confidential.

2. A person, law enforcement agency or public or private agency, institution or facility who willfully releases data or information concerning the reports and investigation of the abuse, neglect, exploitation, isolation or abandonment of older persons or vulnerable persons, except:

- (a) Pursuant to a criminal prosecution;
 - (b) Pursuant to NRS 200.50982; or
 - (c) To persons or agencies enumerated in subsection 3,
- ↳ is guilty of a misdemeanor.

3. Except as otherwise provided in subsection 2 and NRS 200.50982, data or information concerning the reports and



investigations of the abuse, neglect, exploitation, isolation or abandonment of an older person or a vulnerable person is available only to:

(a) A physician who is providing care to an older person or a vulnerable person who may have been abused, neglected, exploited, isolated or abandoned;

(b) An agency responsible for or authorized to undertake the care, treatment and supervision of the older person or vulnerable person;

(c) A district attorney or other law enforcement official who requires the information in connection with an investigation of the abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person;

(d) A court which has determined, in camera, that public disclosure of such information is necessary for the determination of an issue before it;

(e) A person engaged in bona fide research, but the identity of the subjects of the report must remain confidential;

(f) A grand jury upon its determination that access to such records is necessary in the conduct of its official business;

(g) Any comparable authorized person or agency in another jurisdiction;

(h) A legal guardian of the older person or vulnerable person, if the identity of the person who was responsible for reporting the alleged abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person to the public agency is protected, and the legal guardian of the older person or vulnerable person is not the person suspected of such abuse, neglect, exploitation, isolation or abandonment;

(i) If the older person or vulnerable person is deceased, the executor or administrator of his or her estate, if the identity of the person who was responsible for reporting the alleged abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person to the public agency is protected, and the executor or administrator is not the person suspected of such abuse, neglect, exploitation, isolation or abandonment;

(j) The older person or vulnerable person named in the report as allegedly being abused, neglected, exploited, isolated or abandoned, if that person is not legally incapacitated;

(k) An attorney appointed by a court to represent a protected person in a guardianship proceeding pursuant to NRS 159.0485, if:

(1) The protected person is an older person or vulnerable person;



(2) The identity of the person who was responsible for reporting the alleged abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person to the public agency is protected; and

(3) The attorney of the protected person is not the person suspected of such abuse, neglect, exploitation, isolation or abandonment; or

(1) The State Guardianship Compliance Office created by NRS 159.341.

4. If the person who is reported to have abused, neglected, exploited, isolated or abandoned an older person or a vulnerable person is the holder of a license or certificate issued pursuant to chapters 449, 630 to 641B, inclusive, 653 or 654 of NRS ~~§~~ *or sections 2 to 15.7, inclusive, of this act*, the information contained in the report must be submitted to the board *or agency* that issued the license ~~§~~ *or certificate*.

5. If data or information concerning the reports and investigations of the abuse, neglect, exploitation, isolation or abandonment of an older person or a vulnerable person is made available pursuant to paragraph (b) or (j) of subsection 3 or subsection 4, the name and any other identifying information of the person who made the report must be redacted before the data or information is made available.

Sec. 18.5. Chapter 389 of NRS is hereby amended by adding thereto a new section to read as follows:

The Department shall develop, maintain and publish on an Internet website maintained by the Department a list of evidence-based curricula and programs concerning the prevention of substance misuse and substance use disorders.

Sec. 19. (Deleted by amendment.)

Sec. 20. Chapter 392 of NRS is hereby amended by adding thereto a new section to read as follows:

1. Except as otherwise provided in subsection 2, the board of trustees of each school district and the governing body of each charter school that operates a middle school, junior high school or high school shall ensure that the school district or charter school, as applicable, participates in the biennial survey administered pursuant to the Youth Risk Behavior Surveillance System developed by the Centers for Disease Control and Prevention of the United States Department of Health and Human Services, or any equivalent or successor system developed by the Centers for Disease Control and Prevention.



2. A public school shall not administer the survey described in subsection 1 to a pupil if:

(a) The pupil is an unemancipated minor and the parent or guardian of the pupil has refused to consent to the administration of the survey pursuant to subsection 5; or

(b) The pupil has refused to participate in the survey pursuant to subsection 5.

3. The board of trustees of a school district or the governing body of a charter school that operates as a middle school, junior high school or high school shall ensure that a form is provided to the parent or guardian of each pupil to whom the survey described in subsection 1 will be administered that allows the parent or guardian to refuse consent to the administration of the survey to the pupil.

4. Before the administration of the survey described in subsection 1 to a pupil, the board of trustees of a school district or the governing body of a charter school shall provide the parent or guardian of the pupil or, if the pupil is an emancipated minor or is at least 18 years of age, the pupil, with an opportunity to review the survey and written notice of:

(a) The manner in which the survey will be administered;

(b) The manner in which the results of the survey will be used; and

(c) The persons who will have access to the results of the survey.

5. At any time:

(a) The parent or guardian of a pupil who is an unemancipated minor may refuse to provide consent to the administration of the survey described in subsection 1 by completing and submitting the form described in subsection 3, or any other written refusal of consent, to the principal or other person in charge of the public school in which the pupil is enrolled.

(b) A pupil may refuse to participate in the survey.

Sec. 20.3. NRS 427A.175 is hereby amended to read as follows:

427A.175 1. Within 1 year after an older patient sustains damage to his or her property as a result of any act or failure to act by a facility for intermediate care, a facility for skilled nursing, a residential facility for groups, a home for individual residential care, an agency to provide personal care services in the home, an intermediary service organization, a community health worker pool [~~a peer support recovery organization~~] or an agency to provide



nursing in the home in protecting the property, the older patient may file a verified complaint with the Division setting forth the details of the damage.

2. Upon receiving a verified complaint pursuant to subsection 1, the Administrator shall investigate the complaint and attempt to settle the matter through arbitration, mediation or negotiation.

3. If a settlement is not reached pursuant to subsection 2, the facility, home, agency, organization or older patient may request a hearing before the Attorney for the Rights of Older Persons and Persons with a Physical Disability, an Intellectual Disability or a Related Condition. If requested, the Attorney for the Rights of Older Persons and Persons with a Physical Disability, an Intellectual Disability or a Related Condition shall conduct a hearing to determine whether the facility, home, agency, pool or organization is liable for damages to the patient. If the Attorney for the Rights of Older Persons and Persons with a Physical Disability, an Intellectual Disability or a Related Condition determines that the facility, home, agency, pool or organization is liable for damages to the patient, the Attorney for the Rights of Older Persons and Persons with a Physical Disability, an Intellectual Disability or a Related Condition shall order the amount of the surety bond pursuant to NRS 449.065 or the substitute for the surety bond necessary to pay for the damages pursuant to NRS 449.067 to be released to the Division. The Division shall pay any such amount to the older patient or the estate of the older patient.

4. The Division shall create a separate account for money to be collected and distributed pursuant to this section.

5. As used in this section:

(a) "Agency to provide nursing in the home" has the meaning ascribed to it in NRS 449.0015;

(b) "Agency to provide personal care services in the home" has the meaning ascribed to it in NRS 449.0021;

(c) "Community health worker pool" has the meaning ascribed to it in NRS 449.0028;

(d) "Facility for intermediate care" has the meaning ascribed to it in NRS 449.0038;

(e) "Facility for skilled nursing" has the meaning ascribed to it in NRS 449.0039;

(f) "Home for individual residential care" has the meaning ascribed to it in NRS 449.0105;

(g) "Intermediary service organization" has the meaning ascribed to it in NRS 449.4304;



(h) “Older patient” has the meaning ascribed to it in NRS 449.065; **and**

(i) ~~“Peer support recovery organization” has the meaning ascribed to it in NRS 449.01563; and~~

~~(j)~~ “Residential facility for groups” has the meaning ascribed to it in NRS 449.017.

Sec. 20.6. (Deleted by amendment.)

Sec. 21. NRS 432B.220 is hereby amended to read as follows:

432B.220 1. Any person who is described in subsection 4 and who, in his or her professional or occupational capacity, knows or has reasonable cause to believe that a child has been abused or neglected shall:

(a) Except as otherwise provided in subsection 2, report the abuse or neglect of the child to an agency which provides child welfare services or to a law enforcement agency; and

(b) Make such a report as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the child has been abused or neglected.

2. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that the abuse or neglect of the child involves an act or omission of:

(a) A person directly responsible or serving as a volunteer for or an employee of a public or private home, institution or facility where the child is receiving child care outside of the home for a portion of the day, the person shall make the report to a law enforcement agency.

(b) An agency which provides child welfare services or a law enforcement agency, the person shall make the report to an agency other than the one alleged to have committed the act or omission, and the investigation of the abuse or neglect of the child must be made by an agency other than the one alleged to have committed the act or omission.

3. Any person who is described in paragraph (a) of subsection 4 who delivers or provides medical services to a newborn infant and who, in his or her professional or occupational capacity, knows or has reasonable cause to believe that the newborn infant has been affected by a fetal alcohol spectrum disorder or prenatal substance use disorder or has withdrawal symptoms resulting from prenatal substance exposure shall, as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the newborn infant is so affected or has such symptoms, notify an agency which provides child welfare services of the condition of the infant and refer each person who is responsible for



the welfare of the infant to an agency which provides child welfare services for appropriate counseling, training or other services. A notification and referral to an agency which provides child welfare services pursuant to this subsection shall not be construed to require prosecution for any illegal action.

4. A report must be made pursuant to subsection 1 by the following persons:

(a) A person providing services licensed or certified in this State pursuant to, without limitation, chapter 450B, 630, 630A, 631, 632, 633, 634, 634A, 635, 636, 637, 637B, 639, 640, 640A, 640B, 640C, 640D, 640E, 641, 641A, 641B, 641C or 653 of NRS.

(b) Any personnel of a medical facility licensed pursuant to chapter 449 of NRS who are engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of such a medical facility upon notification of suspected abuse or neglect of a child by a member of the staff of the medical facility.

(c) A coroner.

(d) A member of the clergy, practitioner of Christian Science or religious healer, unless the person has acquired the knowledge of the abuse or neglect from the offender during a confession.

(e) A person employed by a public school or private school and any person who serves as a volunteer at such a school.

(f) Any person who maintains or is employed by a facility or establishment that provides care for children, children's camp or other public or private facility, institution or agency furnishing care to a child.

(g) Any person licensed pursuant to chapter 424 of NRS to conduct a foster home.

(h) Any officer or employee of a law enforcement agency or an adult or juvenile probation officer.

(i) Except as otherwise provided in NRS 432B.225, an attorney.

(j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding abuse or neglect of a child and refers them to persons and agencies where their requests and needs can be met.

(k) Any person who is employed by or serves as a volunteer for a youth shelter. As used in this paragraph, "youth shelter" has the meaning ascribed to it in NRS 244.427.

(l) *A peer recovery support specialist, as defined in section 6 of this act, or peer recovery support specialist supervisor, as defined in section 7 of this act.*



(m) Any adult person who is employed by an entity that provides organized activities for children, including, without limitation, a person who is employed by a school district or public school.

5. A report may be made by any other person.

6. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that a child has died as a result of abuse or neglect, the person shall, as soon as reasonably practicable, report this belief to an agency which provides child welfare services or a law enforcement agency. If such a report is made to a law enforcement agency, the law enforcement agency shall notify an agency which provides child welfare services and the appropriate medical examiner or coroner of the report. If such a report is made to an agency which provides child welfare services, the agency which provides child welfare services shall notify the appropriate medical examiner or coroner of the report. The medical examiner or coroner who is notified of a report pursuant to this subsection shall investigate the report and submit his or her written findings to the appropriate agency which provides child welfare services, the appropriate district attorney and a law enforcement agency. The written findings must include, if obtainable, the information required pursuant to the provisions of subsection 2 of NRS 432B.230.

7. The agency, board, bureau, commission, department, division or political subdivision of the State responsible for the licensure, certification or endorsement of a person who is described in subsection 4 and who is required in his or her professional or occupational capacity to be licensed, certified or endorsed in this State shall, at the time of initial licensure, certification or endorsement:

(a) Inform the person, in writing or by electronic communication, of his or her duty as a mandatory reporter pursuant to this section;

(b) Obtain a written acknowledgment or electronic record from the person that he or she has been informed of his or her duty pursuant to this section; and

(c) Maintain a copy of the written acknowledgment or electronic record for as long as the person is licensed, certified or endorsed in this State.

8. The employer of a person who is described in subsection 4 and who is not required in his or her professional or occupational capacity to be licensed, certified or endorsed in this State must, upon initial employment of the person:



(a) Inform the person, in writing or by electronic communication, of his or her duty as a mandatory reporter pursuant to this section;

(b) Obtain a written acknowledgment or electronic record from the person that he or she has been informed of his or her duty pursuant to this section; and

(c) Maintain a copy of the written acknowledgment or electronic record for as long as the person is employed by the employer.

9. Before a person may serve as a volunteer at a public school or private school, the school must:

(a) Inform the person, in writing or by electronic communication, of his or her duty as a mandatory reporter pursuant to this section and NRS 392.303;

(b) Obtain a written acknowledgment or electronic record from the person that he or she has been informed of his or her duty pursuant to this section and NRS 392.303; and

(c) Maintain a copy of the written acknowledgment or electronic record for as long as the person serves as a volunteer at the school.

10. As used in this section:

(a) "Private school" has the meaning ascribed to it in NRS 394.103.

(b) "Public school" has the meaning ascribed to it in NRS 385.007.

Sec. 22. (Deleted by amendment.)

Sec. 22.5. NRS 449.0045 is hereby amended to read as follows:

449.0045 "Facility for the dependent" includes:

1. A facility for the treatment of alcohol or other substance use disorders;

2. A halfway house for persons recovering from alcohol or other substance use disorders;

3. A facility for the care of adults during the day;

4. A residential facility for groups;

5. An agency to provide personal care services in the home;

6. A facility for transitional living for released offenders;

7. A home for individual residential care;

8. ~~A peer support recovery organization;~~

~~9.] A community health worker pool; and~~

~~[10.] 9.~~ A provider of community-based living arrangement services.

Secs. 23 and 24. (Deleted by amendment.)



Sec. 24.2. NRS 449.030 is hereby amended to read as follows:
449.030 Except as otherwise provided in NRS 449.03013 ~~449.03015~~ and 449.03017, no person, state or local government or agency thereof may operate or maintain in this State any medical facility or facility for the dependent without first obtaining a license therefor as provided in NRS 449.029 to 449.2428, inclusive.

Sec. 24.4. NRS 449.065 is hereby amended to read as follows:
449.065 1. Except as otherwise provided in subsections 6 and 7 and NRS 449.067, each facility for intermediate care, facility for skilled nursing, ~~peer support recovery organization,~~ residential facility for groups, home for individual residential care, agency to provide personal care services in the home and agency to provide nursing in the home shall, when applying for a license or renewing a license, file with the Administrator of the Division of Public and Behavioral Health a surety bond:

(a) If the facility, agency, organization or home employs less than 7 employees, in the amount of \$5,000;

(b) If the facility, agency, organization or home employs at least 7 but not more than 25 employees, in the amount of \$25,000; or

(c) If the facility, agency, organization or home employs more than 25 employees, in the amount of \$50,000.

2. A bond filed pursuant to this section must be executed by the facility, agency, organization or home as principal and by a surety company as surety. The bond must be payable to the Aging and Disability Services Division of the Department of Health and Human Services and must be conditioned to provide indemnification to an older patient who the Attorney for the Rights of Older Persons and Persons with a Physical Disability, an Intellectual Disability or a Related Condition determines has suffered property damage as a result of any act or failure to act by the facility, agency, organization or home to protect the property of the older patient.

3. Except when a surety is released, the surety bond must cover the period of the initial license to operate or the period of the renewal, as appropriate.

4. A surety on any bond filed pursuant to this section may be released after the surety gives 30 days' written notice to the Administrator of the Division of Public and Behavioral Health, but the release does not discharge or otherwise affect any claim filed by an older patient for property damaged as a result of any act or failure to act by the facility, agency, organization or home to protect the property of the older patient alleged to have occurred while the bond was in effect.



5. A license is suspended by operation of law when the facility, agency, organization or home is no longer covered by a surety bond as required by this section or by a substitute for the surety bond pursuant to NRS 449.067. The Administrator of the Division of Public and Behavioral Health shall give the facility, agency, organization or home at least 20 days' written notice before the release of the surety or the substitute for the surety, to the effect that the license will be suspended by operation of law until another surety bond or substitute for the surety bond is filed in the same manner and amount as the bond or substitute being terminated.

6. The Administrator of the Division of Public and Behavioral Health may exempt a ~~[peer support recovery organization,]~~ residential facility for groups or a home for individual residential care from the requirement of filing a surety bond pursuant to this section if the Administrator determines that the requirement would result in undue hardship to the ~~[peer support recovery organization,]~~ residential facility for groups or home for individual residential care.

7. The requirement of filing a surety bond set forth in this section does not apply to a facility for intermediate care, facility for skilled nursing, ~~[peer support recovery organization,]~~ residential facility for groups, home for individual residential care, agency to provide personal care services in the home or agency to provide nursing in the home that is operated and maintained by the State of Nevada or an agency thereof.

8. As used in this section, "older patient" means a patient who is 60 years of age or older.

Sec. 24.6. NRS 449.067 is hereby amended to read as follows:

449.067 1. As a substitute for the surety bond required pursuant to NRS 449.065, a facility for intermediate care, a facility for skilled nursing, ~~[a peer support recovery organization,]~~ a residential facility for groups, a home for individual residential care, an agency to provide personal care services in the home and an agency to provide nursing in the home may deposit with any bank or trust company authorized to do business in this State, upon approval from the Administrator of the Division of Public and Behavioral Health:

(a) An obligation of a bank, savings and loan association, savings bank, thrift company or credit union licensed to do business in this State;

(b) Bills, bonds, notes, debentures or other obligations of the United States or any agency or instrumentality thereof, or guaranteed by the United States; or



(c) Any obligation of this State or any city, county, town, township, school district or other instrumentality of this State, or guaranteed by this State, in an aggregate amount, based upon principal amount or market value, whichever is lower.

2. The obligations of a bank, savings and loan association, savings bank, thrift company or credit union must be held to secure the same obligation as would the surety bond required by NRS 449.065. With the approval of the Administrator of the Division of Public and Behavioral Health, the depositor may substitute other suitable obligations for those deposited, which must be assigned to the Aging and Disability Services Division of the Department of Health and Human Services and are negotiable only upon approval by the Administrator of the Aging and Disability Services Division.

3. Any interest or dividends earned on the deposit accrue to the account of the depositor.

4. The deposit must be an amount at least equal to the surety bond required by NRS 449.065 and must state that the amount may not be withdrawn except by direct and sole order of the Administrator of the Aging and Disability Services Division.

Sec. 24.8. NRS 449.089 is hereby amended to read as follows:

449.089 1. Each license issued pursuant to NRS 449.029 to 449.2428, inclusive, expires on December 31 following its issuance and is renewable for 1 year upon reapplication and payment of all fees required pursuant to NRS 449.050 unless the Division finds, after an investigation, that the facility has not:

(a) Satisfactorily complied with the provisions of NRS 449.029 to 449.2428, inclusive, or the standards and regulations adopted by the Board;

(b) Obtained the approval of the Director of the Department of Health and Human Services before undertaking a project, if such approval is required by NRS 439A.100; or

(c) Conformed to all applicable local zoning regulations.

2. Each reapplication for an agency to provide personal care services in the home, an agency to provide nursing in the home, a community health worker pool, a facility for intermediate care, a facility for skilled nursing, a provider of community-based living arrangement services, a hospital described in 42 U.S.C. § 1395ww(d)(1)(B)(iv), a psychiatric hospital that provides inpatient services to children, a psychiatric residential treatment facility, a residential facility for groups, a program of hospice care, a home for individual residential care, a facility for the care of adults during the day, a facility for hospice care, a nursing pool, ~~[a peer support recovery organization,]~~ the distinct part of a hospital which meets



the requirements of a skilled nursing facility or nursing facility pursuant to 42 C.F.R. § 483.5, a hospital that provides swing-bed services as described in 42 C.F.R. § 482.58 or, if residential services are provided to children, a medical facility or facility for the treatment of alcohol or other substance use disorders must include, without limitation, a statement that the facility, hospital, agency, program, pool ~~[, organization]~~ or home is in compliance with the provisions of NRS 449.115 to 449.125, inclusive, and 449.174.

3. Each reapplication for an agency to provide personal care services in the home, a community health worker pool, a facility for intermediate care, a facility for skilled nursing, a facility for the care of adults during the day, ~~[a peer support recovery organization,]~~ a residential facility for groups or a home for individual residential care must include, without limitation, a statement that the holder of the license to operate, and the administrator or other person in charge and employees of, the facility, agency, pool ~~[, organization]~~ or home are in compliance with the provisions of NRS 449.093.

Sec. 25. NRS 449.0915 is hereby amended to read as follows:

449.0915 1. The Division may issue an endorsement as a crisis stabilization center to the holder of a license to operate a psychiatric hospital that meets the requirements of this section.

2. A psychiatric hospital that wishes to obtain an endorsement as a crisis stabilization center must submit an application in the form prescribed by the Division which must include, without limitation, proof that the applicant meets the requirements of subsection 3.

3. An endorsement as a crisis stabilization center may only be issued if the psychiatric hospital to which the endorsement will apply:

(a) Does not exceed a capacity of 16 beds or constitute an institution for mental diseases, as defined in 42 U.S.C. § 1396d;

(b) Operates in accordance with established administrative protocols, evidence-based protocols for providing treatment and evidence-based standards for documenting information concerning services rendered and recipients of such services in accordance with best practices for providing crisis stabilization services;

(c) Delivers crisis stabilization services:

(1) To patients for not less than 24 hours in an area devoted to crisis stabilization or detoxification before releasing the patient into the community, referring the patient to another facility or transferring the patient to a bed within the hospital for short-term treatment, if the psychiatric hospital has such beds;

(2) In accordance with best practices for the delivery of crisis stabilization services; and



(3) In a manner that promotes concepts that are integral to recovery for persons with mental illness, including, without limitation, hope, personal empowerment, respect, social connections, self-responsibility and self-determination;

(d) Employs ~~{qualified—persons}~~ *peer recovery support specialists, as defined in section 6 of this act*, to provide peer recovery support services, as defined in ~~[NRS 449.01566,]~~ *section 5 of this act*, when appropriate;

(e) Uses a data management tool to collect and maintain data relating to admissions, discharges, diagnoses and long-term outcomes for recipients of crisis stabilization services;

(f) Accepts all patients, without regard to:

(1) The race, ethnicity, gender, socioeconomic status, sexual orientation or place of residence of the patient;

(2) Any social conditions that affect the patient;

(3) The ability of the patient to pay; or

(4) Whether the patient is admitted voluntarily to the psychiatric hospital pursuant to NRS 433A.140 or admitted to the psychiatric hospital under an emergency admission pursuant to NRS 433A.150;

(g) Performs an initial assessment on any patient who presents at the psychiatric hospital, regardless of the severity of the behavioral health issues that the patient is experiencing;

(h) Has the equipment and personnel necessary to conduct a medical examination of a patient pursuant to NRS 433A.165; and

(i) Considers whether each patient would be better served by another facility and transfer a patient to another facility when appropriate.

4. Crisis stabilization services that may be provided pursuant to paragraph (c) of subsection 3 may include, without limitation:

(a) Case management services, including, without limitation, such services to assist patients to obtain housing, food, primary health care and other basic needs;

(b) Services to intervene effectively when a behavioral health crisis occurs and address underlying issues that lead to repeated behavioral health crises;

(c) Treatment specific to the diagnosis of a patient; and

(d) Coordination of aftercare for patients, including, without limitation, at least one follow-up contact with a patient not later than 72 hours after the patient is discharged.

5. An endorsement as a crisis stabilization center must be renewed at the same time as the license to which the endorsement



applies. An application to renew an endorsement as a crisis stabilization center must include, without limitation:

- (a) The information described in subsection 3; and
- (b) Proof that the psychiatric hospital is accredited by the Commission on Accreditation of Rehabilitation Facilities, or its successor organization, or the Joint Commission, or its successor organization.

6. As used in this section, “crisis stabilization services” means behavioral health services designed to:

(a) De-escalate or stabilize a behavioral crisis, including, without limitation, a behavioral health crisis experienced by a person with a co-occurring substance use disorder; and

(b) When appropriate, avoid admission of a patient to another inpatient mental health facility or hospital and connect the patient with providers of ongoing care as appropriate for the unique needs of the patient.

Sec. 25.2. NRS 449.119 is hereby amended to read as follows:

449.119 “Facility, hospital, agency, program or home” means an agency to provide personal care services in the home, an employment agency that contracts with persons to provide nonmedical services related to personal care to elderly persons or persons with disabilities in the home, an agency to provide nursing in the home, a community health worker pool, a facility for intermediate care, a facility for skilled nursing, a provider of community-based living arrangement services, a hospital described in 42 U.S.C. § 1395ww(d)(1)(B)(iv), a psychiatric hospital that provides inpatient services to children, a psychiatric residential treatment facility, ~~[a peer support recovery organization,]~~ a residential facility for groups, a program of hospice care, a home for individual residential care, a facility for the care of adults during the day, a facility for hospice care, a nursing pool, the distinct part of a hospital which meets the requirements of a skilled nursing facility or nursing facility pursuant to 42 C.F.R. § 483.5, a hospital that provides swing-bed services as described in 42 C.F.R. § 482.58 or, if residential services are provided to children, a medical facility or facility for the treatment of alcohol or other substance use disorders.

Sec. 25.5. NRS 449.174 is hereby amended to read as follows:

449.174 1. In addition to the grounds listed in NRS 449.160, the Division may deny a license to operate a facility, hospital, agency, program or home to an applicant or may suspend or revoke the license of a licensee to operate such a facility, hospital, agency, program or home if:

- (a) The applicant or licensee has been convicted of:



- (1) Murder, voluntary manslaughter or mayhem;
 - (2) Assault or battery with intent to kill or to commit sexual assault or mayhem;
 - (3) Sexual assault, statutory sexual seduction, incest, lewdness or indecent exposure, or any other sexually related crime that is punished as a felony;
 - (4) Prostitution, solicitation, lewdness or indecent exposure, or any other sexually related crime that is punished as a misdemeanor, within the immediately preceding 7 years;
 - (5) A crime involving domestic violence that is punished as a felony;
 - (6) A crime involving domestic violence that is punished as a misdemeanor, within the immediately preceding 7 years;
 - (7) Abuse or neglect of a child or contributory delinquency;
 - (8) A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in chapter 454 of NRS, within the immediately preceding 7 years;
 - (9) Abuse, neglect, exploitation, isolation or abandonment of older persons or vulnerable persons, including, without limitation, a violation of any provision of NRS 200.5091 to 200.50995, inclusive, or a law of any other jurisdiction that prohibits the same or similar conduct;
 - (10) A violation of any provision of law relating to the State Plan for Medicaid or a law of any other jurisdiction that prohibits the same or similar conduct, within the immediately preceding 7 years;
 - (11) A violation of any provision of NRS 422.450 to 422.590, inclusive;
 - (12) A criminal offense under the laws governing Medicaid or Medicare, within the immediately preceding 7 years;
 - (13) Any offense involving fraud, theft, embezzlement, burglary, robbery, fraudulent conversion or misappropriation of property, within the immediately preceding 7 years;
 - (14) Any other felony involving the use or threatened use of force or violence against the victim or the use of a firearm or other deadly weapon; or
 - (15) An attempt or conspiracy to commit any of the offenses listed in this paragraph, within the immediately preceding 7 years;
- (b) The licensee has, in violation of NRS 449.125, continued to employ a person who has been convicted of a crime listed in paragraph (a); or



(c) The applicant or licensee has had a substantiated report of child abuse or neglect made against him or her and if the facility, hospital, agency, program or home provides residential services to children, is a psychiatric hospital that provides inpatient services to children or is a psychiatric residential treatment facility.

2. In addition to the grounds listed in NRS 449.160, the Division may suspend or revoke the license of a licensee to operate an agency to provide personal care services in the home, an agency to provide nursing in the home ~~[.] or a community health worker pool [for a peer support recovery organization]~~ if the licensee has, in violation of NRS 449.125, continued to employ a person who has been convicted of a crime listed in paragraph (a) of subsection 1.

3. As used in this section:

(a) "Domestic violence" means an act described in NRS 33.018.

(b) "Facility, hospital, agency, program or home" has the meaning ascribed to it in NRS 449.119.

(c) "Medicaid" has the meaning ascribed to it in NRS 439B.120.

(d) "Medicare" has the meaning ascribed to it in NRS 439B.130.

Sec. 25.7. NRS 449.194 is hereby amended to read as follows:

449.194 Any person who is employed by an agency to provide personal care services in the home ~~[.] or a community health worker pool [for a peer support recovery organization]~~ who:

1. Has successfully completed a course in cardiopulmonary resuscitation according to the guidelines of the American National Red Cross or American Heart Association;

2. Has successfully completed the training requirements of a course in basic emergency care of a person in cardiac arrest conducted in accordance with the standards of the American Heart Association; or

3. Has successfully completed the training requirements of a course in the use and administration of first aid, including cardiopulmonary resuscitation,

↳ and who in good faith renders emergency care or assistance in accordance with the person's training, in the course of his or her regular employment or profession, to an elderly person or a person with a disability, is not liable for any civil damages as a result of any act or omission, not amounting to gross negligence, by that person in rendering that care.

Sec. 26. Chapter 458 of NRS is hereby amended by adding thereto a new section to read as follows:

1. The State Board of Health shall adopt regulations:

(a) Providing for the certification of substance use disorder prevention coalitions; and



(b) Establishing requirements governing the membership of and geographic region served by substance use disorder prevention coalitions. The regulations adopted pursuant to this paragraph must align with nationally recognized standards for substance use disorder prevention coalitions and must provide that a geographic region may be served by more than one substance use disorder prevention coalition.

2. A certified substance use disorder prevention coalition shall:

(a) Advise the Department of Health and Human Services and the Division concerning:

(1) The needs of adults and children in the geographic region served by the coalition concerning the prevention of substance misuse and substance use disorders in the geographic region;

(2) Any progress, problems or plans relating to the provision of services for the prevention of substance misuse and substance use disorders and methods for improving the provision of such services in the geographic region served by the coalition;

(3) Identified gaps in services for the prevention of substance misuse and substance use disorders and recommendations for addressing those gaps; and

(4) Priorities for allocating resources to support and develop services for the prevention of substance misuse and substance use disorders in the geographic region served by the coalition.

(b) Convene interested persons and entities to promote the use of evidence-based strategies to address needs concerning services for the prevention of substance misuse and substance use disorders and improve such services in the geographic region served by the coalition.

(c) Coordinate and share information with other certified substance use disorder prevention coalitions to provide recommendations to the Department of Health and Human Services and the Division concerning services for the prevention of substance misuse and substance use disorders.

(d) Implement, in coordination with the Department of Health and Human Services, the Division, other certified substance use disorder prevention coalitions and other interested persons and entities, statewide efforts for the prevention of substance misuse and substance use disorders.

(e) Coordinate with persons and entities in this State who provide services related to the prevention of substance misuse and



substance use disorders to increase the awareness of such services and reduce duplication of efforts.

(f) In consultation with other persons and entities in this State who provide services related to the prevention of substance use disorders, submit an annual report to the regional behavioral health policy board for the geographic region served by the substance use disorder prevention coalition. The report must include, without limitation:

(1) Identification of the specific needs of the geographic region served by the coalition concerning the prevention of substance misuse and substance use disorders;

(2) A description of methods that the coalition uses to collect and analyze data concerning:

(I) Substance misuse and substance use disorders in the geographic region served by the coalition; and

(II) Gaps in services related to the prevention of substance misuse and substance use disorders and the need for additional services in that region;

(3) The strategies used by the coalition and the results of those strategies;

(4) The goals of the coalition for the immediately preceding year and the degree to which the coalition achieved those goals; and

(5) The goals of the coalition for the immediately following year and the long-term goals of the coalition.

3. The Division shall collaborate with and utilize certified substance use disorder prevention coalitions as the primary local and regional entities to coordinate programs and strategies for the prevention of substance use disorders in this State.

4. As used in this section:

(a) "Behavioral health region" has the meaning ascribed to it in NRS 433.426.

(b) "Substance use disorder prevention coalition" means a coalition of persons and entities who possess knowledge and experience related to the prevention of substance misuse and substance use disorders in a region of this State.

Sec. 27. NRS 458.110 is hereby amended to read as follows:

458.110 In addition to the activities set forth in NRS 458.025 to 458.115, inclusive, *and section 26 of this act*, the Division may engage in any activity necessary to effectuate the purposes of this chapter.



Sec. 28. NRS 632.472 is hereby amended to read as follows:

632.472 1. The following persons shall report in writing to the Executive Director of the Board any conduct of a licensee or holder of a certificate which constitutes a violation of the provisions of this chapter:

(a) Any physician, dentist, dental hygienist, chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, nursing assistant, medication aide - certified, perfusionist, physician assistant licensed pursuant to chapter 630 or 633 of NRS, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, alcohol or drug counselor, *peer recovery support specialist, peer recovery support specialist supervisor*, music therapist, holder of a license or limited license issued pursuant to chapter 653 of NRS, driver of an ambulance, paramedic or other person providing medical services licensed or certified to practice in this State.

(b) Any personnel of a medical facility or facility for the dependent engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a medical facility or facility for the dependent upon notification by a member of the staff of the facility.

(c) A coroner.

(d) Any person who maintains or is employed by an agency to provide personal care services in the home.

(e) Any person who operates, who is employed by or who contracts to provide services for an intermediary service organization as defined in NRS 449.4304.

(f) Any person who maintains or is employed by an agency to provide nursing in the home.

(g) Any employee of the Department of Health and Human Services.

(h) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.

(i) Any person who maintains or is employed by a facility or establishment that provides care for older persons.

(j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect or exploitation of an older person and refers them to persons and agencies where their requests and needs can be met.

(k) Any social worker.

(l) Any person who operates or is employed by a community health worker pool or with whom a community health worker pool



contracts to provide the services of a community health worker, as defined in NRS 449.0027.

~~[(m) Any person who operates or is employed by a peer support recovery organization.]~~

2. Every physician who, as a member of the staff of a medical facility or facility for the dependent, has reason to believe that a nursing assistant or medication aide - certified has engaged in conduct which constitutes grounds for the denial, suspension or revocation of a certificate shall notify the superintendent, manager or other person in charge of the facility. The superintendent, manager or other person in charge shall make a report as required in subsection 1.

3. A report may be filed by any other person.

4. Any person who in good faith reports any violation of the provisions of this chapter to the Executive Director of the Board pursuant to this section is immune from civil liability for reporting the violation.

5. As used in this section:

(a) "Agency to provide personal care services in the home" has the meaning ascribed to it in NRS 449.0021.

(b) "Community health worker pool" has the meaning ascribed to it in NRS 449.0028.

(c) ~~["Peer support recovery organization" has the meaning ascribed to it in NRS 449.01563.]~~ *"Peer recovery support specialist" has the meaning ascribed to it in section 6 of this act.*

(d) "Peer recovery support specialist supervisor" has the meaning ascribed to it in section 7 of this act.

Sec. 29. NRS 641.029 is hereby amended to read as follows:

641.029 The provisions of this chapter do not apply to:

1. A physician who is licensed to practice in this State;
2. A person who is licensed to practice dentistry in this State;
3. A person who is licensed as a marriage and family therapist or marriage and family therapist intern pursuant to chapter 641A of NRS;
4. A person who is licensed as a clinical professional counselor or clinical professional counselor intern pursuant to chapter 641A of NRS;
5. A person who is licensed to engage in social work pursuant to chapter 641B of NRS;
6. A person who is licensed as an occupational therapist or occupational therapy assistant pursuant to NRS 640A.010 to 640A.230, inclusive;



7. A person who is licensed as a clinical alcohol and drug counselor, licensed or certified as an alcohol and drug counselor or certified as an alcohol and drug counselor intern, a clinical alcohol and drug counselor intern, a problem gambling counselor or a problem gambling counselor intern, pursuant to chapter 641C of NRS;

8. *A person who provides or supervises the provision of peer recovery support services in accordance with the provisions of sections 2 to 15.7, inclusive, of this act;*

9. A person who is licensed as a behavior analyst or an assistant behavior analyst or registered as a registered behavior technician pursuant to chapter 437 of NRS, while engaged in the practice of applied behavior analysis as defined in NRS 437.040; or

~~9.1~~ 10. Any member of the clergy,
→ if such a person does not commit an act described in NRS 641.440 or represent himself or herself as a psychologist.

Sec. 30. NRS 641B.040 is hereby amended to read as follows:
641B.040 The provisions of this chapter do not apply to:

1. A physician who is licensed to practice in this State;
2. A nurse who is licensed to practice in this State;
3. A person who is licensed as a psychologist pursuant to chapter 641 of NRS or authorized to practice psychology in this State pursuant to the Psychology Interjurisdictional Compact enacted in NRS 641.227;

4. A person who is licensed as a marriage and family therapist or marriage and family therapist intern pursuant to chapter 641A of NRS;

5. A person who is licensed as a clinical professional counselor or clinical professional counselor intern pursuant to chapter 641A of NRS;

6. A person who is licensed as an occupational therapist or occupational therapy assistant pursuant to NRS 640A.010 to 640A.230, inclusive;

7. A person who is licensed as a clinical alcohol and drug counselor, licensed or certified as an alcohol and drug counselor or certified as a clinical alcohol and drug counselor intern, an alcohol and drug counselor intern, a problem gambling counselor or a problem gambling counselor intern, pursuant to chapter 641C of NRS;

8. *A person who provides or supervises the provision of peer recovery support services in accordance with sections 2 to 15.7, inclusive, of this act;*

9. Any member of the clergy;



~~[9.]~~ 10. A county welfare director;

~~[10.]~~ 11. Any person who may engage in social work or clinical social work in his or her regular governmental employment but does not hold himself or herself out to the public as a social worker; or

~~[11.]~~ 12. A student of social work and any other person preparing for the profession of social work under the supervision of a qualified social worker in a training institution or facility recognized by the Board, unless the student or other person has been issued a provisional license pursuant to paragraph (b) of subsection 1 of NRS 641B.275. Such a student must be designated by the title “student of social work” or “trainee in social work,” or any other title which clearly indicates the student’s training status.

Sec. 31. NRS 641C.130 is hereby amended to read as follows:

641C.130 The provisions of this chapter do not apply to:

1. A physician who is licensed pursuant to the provisions of chapter 630 or 633 of NRS;

2. A nurse who is licensed pursuant to the provisions of chapter 632 of NRS and is authorized by the State Board of Nursing to engage in the practice of counseling persons with alcohol and other substance use disorders or the practice of counseling persons with an addictive disorder related to gambling;

3. A psychologist who is licensed pursuant to the provisions of chapter 641 of NRS or authorized to practice psychology in this State pursuant to the Psychology Interjurisdictional Compact enacted in NRS 641.227;

4. A clinical professional counselor or clinical professional counselor intern who is licensed pursuant to chapter 641A of NRS;

5. A marriage and family therapist or marriage and family therapist intern who is licensed pursuant to the provisions of chapter 641A of NRS and is authorized by the Board of Examiners for Marriage and Family Therapists and Clinical Professional Counselors to engage in the practice of counseling persons with alcohol and other substance use disorders or the practice of counseling persons with an addictive disorder related to gambling;

~~[6.]~~

6. A person who is licensed as a clinical social worker pursuant to the provisions of chapter 641B of NRS and is authorized by the Board of Examiners for Social Workers to engage in the practice of counseling persons with alcohol and other substance use disorders or the practice of counseling persons with an addictive disorder related to gambling ~~[.]~~; or



7. A person who provides or supervises the provision of peer recovery support services in accordance with sections 2 to 15.7, inclusive, of this act.

Sec. 31.5. Section 8 of this act is hereby amended to read as follows:

Sec. 8. 1. Except as authorized by subsection 2, an adult shall not:

(a) Provide peer recovery support services for compensation as a regular part of his or her job duties or hold himself or herself out as authorized to provide peer recovery support services unless he or she holds a valid certificate as a peer recovery support specialist issued by the ~~the Nevada Certification Board or its successor organization.~~ **Division.**

(b) Supervise the provision of peer recovery support services for compensation as a regular part of his or her job duties or hold himself or herself out as authorized to supervise the provision of peer recovery support services unless he or she holds a valid certificate as a peer recovery support specialist supervisor issued by the ~~the Nevada Certification Board or its successor organization.~~ **Division.**

2. ~~the Nevada Certification Board or its successor organization establishes~~ **The Division may adopt regulations establishing** conditions ~~governing the provision of peer recovery support services by~~ **under which** an adult who is not certified as a peer recovery support specialist ~~while the person is acquiring the experience necessary for certification as a peer recovery support specialist, an adult who is not certified as a peer recovery support specialist~~ may:

(a) Provide peer recovery support services to adults for compensation as a regular part of his or her job duties ~~under those conditions;~~ **while acquiring the experience necessary for certification;** and

(b) Use the title of “peer recovery support specialist ~~intern~~” ~~while providing peer recovery support services under those conditions.~~ **intern.”**

3. The Division may impose upon an adult who violates this section a civil penalty in an amount prescribed by regulation of the Board.

Sec. 32. 1. On or before September 30, 2021, the board of trustees of each school district and the governing body of each charter school shall submit to the Department of Education a report that describes any curriculum or program concerning substance misuse and substance use disorders used or offered in the school



district or charter school, as applicable, during the immediately preceding school year.

2. On or before October 31, 2021, the Department of Education shall submit to the Director of the Legislative Counsel Bureau for transmittal to the Legislative Committee on Education created by NRS 218E.605 a report that summarizes the information contained in the reports submitted to the Department pursuant to subsection 1.

Sec. 33. 1. Notwithstanding any provision of this act to the contrary, any adult who provides or supervises the provision of peer recovery support services as a regular part of his or her job duties on or before January 1, 2022, may continue to do so without obtaining a certificate from the Nevada Certification Board or its successor organization as required by section 8 of this act until July 31, 2023. To provide or supervise peer recovery support services on or after August 1, 2023, such an adult must obtain a certificate from that organization as required by section 8 of this act.

2. Notwithstanding any provision of this act to the contrary, an adult who holds a valid certification as a peer recovery support specialist or peer recovery support specialist supervisor issued by the Nevada Certification Board or its successor organization on the date on which that organization ceases certifying peer recovery support specialists or peer recovery support specialist supervisors may provide or supervise the provision of peer recovery support services as a regular part of his or her job duties without being certified by the Division of Public and Behavioral Health of the Department of Health and Human Services until 6 months after the date on which the Division begins certifying peer recovery support specialists and peer recovery support specialist supervisors pursuant to the regulations adopted by the State Board of Health pursuant to section 9 of this act. To provide or supervise the provision of peer recovery support services as a regular part of his or her job duties after that date, such an adult must obtain a certificate from the Division as required by section 8 of this act, as amended by section 31.5 of this act.

3. As used in this section, “peer recovery support services” has the meaning ascribed to it in section 5 of this act.

Sec. 34. (Deleted by amendment.)

Sec. 34.5. Any regulations adopted by the State Board of Health pursuant to NRS 449.0302 governing peer support recovery organizations are void. The Legislative Counsel shall remove those regulations from the Nevada Administrative Code as soon as practicable after January 1, 2022.



Sec. 35. The provisions of NRS 354.599 do not apply to any additional expenses of a local government that are related to the provisions of this act.

Sec. 36. NRS 449.01563, 449.01566, 449.03015, 449A.060 and 449A.062 are hereby repealed.

Sec. 37. 1. This section becomes effective upon passage and approval.

2. Sections 18.5, 19, 20 and 32 of this act become effective on July 1, 2021.

3. Sections 1 to 3, inclusive, 5 to 8, inclusive, 15 to 17, inclusive, 20.3 to 31, inclusive, and 33 to 36, inclusive, of this act become effective:

(a) Upon passage and approval for the purpose of adopting regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and

(b) On January 1, 2022, for all other purposes.

4. Sections 4, 9 to 14, inclusive, 18 and 31.5 of this act become effective on the date on which the Nevada Certification Board, or its successor organization, ceases certifying peer recovery support specialists or peer recovery support specialist supervisors.

5. Sections 10 and 11 of this act expire by limitation on the date on which the provisions of 42 U.S.C. § 666 requiring each state to establish procedures under which the state has authority to withhold or suspend, or to restrict the use of professional, occupational and recreational licenses of persons who:

(a) Have failed to comply with the subpoena or warrant relating to a proceeding to determine the paternity of a child or to establish or enforce an obligation for the support of a child; or

(b) Are in arrears in the payment for the support of one or more children,

↪ are repealed by the Congress of the United States.

