

ASSEMBLY BILL NO. 495—COMMITTEE ON
HEALTH AND HUMAN SERVICES

(ON BEHALF OF THE SUNSET SUBCOMMITTEE)

MARCH 25, 2013

Referred to Committee on Health and Human Services

SUMMARY—Abolishes the Committee on Co-Occurring Disorders. (BDR 40-571)

FISCAL NOTE: Effect on Local Government: No.
Effect on the State: No.

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

AN ACT relating to public health; abolishing the Committee on Co-Occurring Disorders; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

1 Existing law creates the Committee on Co-Occurring Disorders and requires
2 the Committee to perform certain duties concerning issues relating to persons with
3 co-occurring disorders. (NRS 439.527, 439.528) Existing law defines “co-occurring
4 disorders” for the purposes of the provisions governing the Committee to mean the
5 existence of both mental health and substance abuse disorders in the same person.
6 (NRS 439.526) This bill abolishes the Committee, as recommended by the Sunset
7 Subcommittee of the Legislative Commission.

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

1 **Section 1.** NRS 439.526, 439.527 and 439.528 are hereby
2 repealed.

3 **Sec. 2.** This act becomes effective on July 1, 2013.



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TEXT OF REPEALED SECTIONS

439.526 “Co-occurring disorders” defined. As used in this section and NRS 439.527 and 439.528, unless the context otherwise requires, “co-occurring disorders” means the existence of both mental health and substance abuse disorders in the same person.

439.527 Creation; appointment and qualifications of members; election of Chair and Vice Chair; terms of members; vacancies; compensation of members; members holding public office or employed by governmental entity; meetings; quorum.

1. There is hereby created the Committee on Co-Occurring Disorders. The Committee consists of:

(a) The Administrator of the Division of Mental Health and Developmental Services of the Department, who is an ex officio member of the Committee; and

(b) Fourteen members appointed by the Governor.

2. The Governor shall appoint to the Committee:

(a) One member who is a psychiatrist licensed to practice medicine in this State and certified by the American Board of Psychiatry and Neurology;

(b) One member who is a physician licensed pursuant to chapter 630 or 633 of NRS who is certified as an addictionologist by the American Society of Addiction Medicine;

(c) One member who is a psychologist licensed to practice in this State;

(d) One member who is licensed as a marriage and family therapist in this State;

(e) One member who is licensed as a clinical social worker in this State;

(f) One member who is a district judge in this State;

(g) One member who is a representative of the Nevada System of Higher Education;

(h) One member who is a representative of a state or local criminal justice agency;

(i) One member who is a representative of a hospital or mental health facility in this State;

(j) One member who is a member of the Nevada Mental Health Planning Advisory Council;

(k) One member who is a representative of a program relating to mental health and the treatment of the abuse of alcohol or drugs in this State;



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(l) One member who is a policy analyst in the field of mental health, substance abuse or criminal justice;

(m) One member who is a representative of persons who have used services relating to mental health, substance abuse or criminal justice in this State; and

(n) One member who is an immediate family member of a person who has used services relating to mental health, substance abuse or criminal justice in this State.

3. The members of the Committee shall elect a Chair and Vice Chair by a majority vote. After the initial election, the Chair and Vice Chair shall hold office for a term of 1 year beginning on October 1 of each year. If a vacancy occurs in the office of the Chair, the members of the Committee shall elect a Chair from among its members for the remainder of the unexpired term.

4. After the initial terms, each member of the Committee who is appointed serves for a term of 4 years. A member may be reappointed.

5. A vacancy on the Committee must be filled in the same manner as the original appointment.

6. Each member of the Committee:

(a) Serves without compensation; and

(b) While engaged in the business of the Committee, is entitled to receive the per diem allowance and travel expenses provided for state officers and employees generally.

7. Each member of the Committee who is an officer or employee of the State or a local government must be relieved from his or her duties without loss of his or her regular compensation to prepare for and attend meetings of the Committee and perform any work necessary to carry out the duties of the Committee in the most timely manner practicable. A state agency or local government shall not require an officer or employee who is a member of the Committee to make up the time the member is absent from work to carry out his or her duties as a member, and shall not require the member to take annual vacation or compensatory time for the absence.

8. The members of the Committee shall meet at least quarterly and at the times and places specified by a call of the Chair or a majority of the members of the Committee.

9. Eight members of the Committee constitute a quorum. The affirmative vote of a majority of the Committee members present is sufficient for any action of the Committee.

439.528 Duties. The Committee shall:

1. Study and review issues relating to persons with co-occurring disorders.



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2. Develop a policy statement confirming the commitment of this State to treatment for persons with co-occurring disorders and the expectations of this State concerning such treatment.

3. Review and recommend strategies for improving the treatment provided to persons with co-occurring disorders, including, without limitation, reducing administrative barriers to such treatment and supporting the provision of coordinated and integrated services relating to mental health, substance abuse and criminal justice to persons with co-occurring disorders.

4. Develop recommendations concerning the licensing and certification of treatment programs for persons with co-occurring disorders, including, without limitation, the standards that should be required of such programs to increase their effectiveness.

5. Develop recommendations concerning the creation of incentives for the development of treatment programs for persons with co-occurring disorders.

6. Evaluate the utilization of existing resources in this State for the treatment of persons with co-occurring disorders and develop recommendations concerning innovative funding alternatives to promote and support mental health courts, the prevention of co-occurring disorders and the coordination of integrated services in the mental health, substance abuse and criminal justice systems.

7. Identify and recommend practices and procedures to improve the effectiveness and quality of care provided in both the public and private sector to persons with co-occurring disorders.

8. Examine and develop recommendations concerning training and technical assistance that are available through the Substance Abuse and Mental Health Services Administration of the United States Department of Health and Human Services and other entities to support the development and implementation of a comprehensive system of care for persons with co-occurring disorders.

9. Submit on or before January 31 of each odd-numbered year a report to the Commission on Mental Health and Developmental Services and the Director of the Legislative Counsel Bureau for distribution to the regular session of the Legislature. The report must include, without limitation, a summary of the work of the Committee and recommendations for any necessary legislation concerning issues relating to persons with co-occurring disorders.

