
ASSEMBLY BILL NO. 66—COMMITTEE ON
HEALTH AND HUMAN SERVICES

(ON BEHALF OF THE WASHOE REGIONAL
BEHAVIORAL HEALTH POLICY BOARD)

PREFILED NOVEMBER 19, 2018

Referred to Committee on Health and Human Services

SUMMARY—Provides for the establishment of crisis stabilization centers in certain counties. (BDR 39-486)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact.
Effect on the State: Yes.

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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 mental health; providing for the establishment of centers to provide crisis stabilization services in certain highly populated counties; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

1 Existing law requires the Division of Public and Behavioral Health of the
2 Department of Health and Human Services to operate certain facilities to provide
3 mental health services. (NRS 433.233) Existing law also authorizes the Division to
4 contract with certain persons and entities for the provision of mental health services
5 and related services. (NRS 433.334-433.354) This bill requires the Division to
6 establish a center to provide crisis stabilization services in each county whose
7 population is 100,000 or more (currently Clark and Washoe Counties). This bill
8 also authorizes the Division to enter into a contract with a provider of behavioral
9 health services to provide crisis stabilization services at the center. This bill defines
10 "crisis stabilization services" to mean behavioral health services designed to: (1)
11 de-escalate or stabilize a behavioral crisis or reduce the concerning or disruptive
12 behavior associated with acute symptoms of mental illness or the abuse of alcohol
13 or drugs; and (2) avoid admission of a recipient of services to an inpatient mental
14 health facility or hospital.



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

1 **Section 1.** Chapter 433 of NRS is hereby amended by adding
2 thereto a new section to read as follows:

3 **1. The Division shall establish, within each county whose**
4 **population is 100,000 or more, a center to provide crisis**
5 **stabilization services that is open to provide such services 24 hours**
6 **per day, 7 days per week. The center must:**

7 **(a) Operate in accordance with established administrative**
8 **protocols, evidenced-based protocols for providing treatment and**
9 **evidence-based standards for documenting information**
10 **concerning services rendered and recipients of such services in**
11 **accordance with best practices for providing crisis stabilization**
12 **services;**

13 **(b) Make available not more than eight beds for a stay of not**
14 **more than 14 days;**

15 **(c) Deliver crisis stabilization services:**

16 **(1) In accordance with best practices for the delivery of**
17 **crisis stabilization services;**

18 **(2) Without regard to the race, ethnicity, gender,**
19 **socioeconomic status, sexual orientation or place of residence of**
20 **the recipient or any social conditions that affect the recipient; and**

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

25 **(d) Promote the use of consumer-operated services to support**
26 **recovery for recipients of crisis stabilization services;**

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

30 **(f) Employ or enter into a contract with at least two case**
31 **managers to provide or arrange for the provision of:**

32 **(1) Comprehensive services to intervene effectively when a**
33 **behavioral health crisis occurs and address underlying issues that**
34 **lead to repeated behavioral health crises;**

35 **(2) Services to address basic needs, including, without**
36 **limitation, housing, food and primary health care;**

37 **(3) Treatment specific to the diagnoses of recipients of**
38 **services; and**

39 **(4) Aftercare services for persons who have received**
40 **services at the center.**

41 **2. The Division may enter into a contract with an**
42 **organization that specializes in the provision of behavioral health**



1 *services to provide crisis stabilization services described in*
2 *subsection 1. Before entering into such a contract, the Division*
3 *must consult with the regional behavioral health policy board*
4 *created by NRS 433.429 for the region in which the crisis*
5 *stabilization center is located concerning the scope of the contract.*

6 3. *The Division may accept gifts, grants and donations from*
7 *any source for the purpose of carrying out the provisions of this*
8 *section.*

9 4. *As used in this section:*

10 (a) *“Consumer-operated services” means peer-run service*
11 *programs that are owned, administered and operated by persons*
12 *receiving behavioral health services that emphasize the utilization*
13 *of self-help by recipients of services.*

14 (b) *“Crisis stabilization services” means behavioral health*
15 *services designed to:*

16 (1) *De-escalate or stabilize a behavioral crisis or reduce the*
17 *concerning or disruptive behavior associated with acute symptoms*
18 *of mental illness or the abuse of alcohol or drugs; and*

19 (2) *Avoid admission of a person to an inpatient mental*
20 *health facility or hospital.*

21 **Sec. 2.** This act becomes effective:

22 1. Upon passage and approval for the purpose of performing
23 any preparatory administrative tasks that are necessary to carry out
24 the provisions of this act; and

25 2. On January 1, 2020, for all other purposes.

