

Senate Bill No. 156—Committee on  
Health and Human Services

CHAPTER.....

AN ACT relating to mental health; revising certain requirements for an endorsement as a crisis stabilization center; and providing other matters properly relating thereto.

**Legislative Counsel’s Digest:**

Existing law authorizes the Division of Public and Behavioral Health of the Department of Health and Human Services to issue an endorsement as a crisis stabilization center to the holder of a license to operate a psychiatric hospital that meets certain requirements, including, without limitation, providing crisis stabilization services. Existing law defines “crisis stabilization services” to mean behavioral health services designed to: (1) de-escalate or stabilize a behavioral crisis; and (2) avoid admission of a patient to another inpatient mental health facility or hospital when appropriate. (NRS 449.0915) **Section 1** of this bill expands the authority of the Division to issue an endorsement as a crisis stabilization center by authorizing the Division to issue such an endorsement to the holder of a license to operate any hospital that meets the requirements for the endorsement. Existing law authorizes the State Board of Health to impose fees for licensing by the Division and, thus, the State Board will be authorized to impose a fee for the issuance or renewal of an endorsement as a crisis stabilization center issued to a hospital pursuant to **section 1**. (NRS 439.150)

Existing law requires an applicant for renewal of an endorsement as a crisis stabilization center to be accredited by certain organizations. (NRS 449.0915) **Section 1** expands the list of authorized accrediting organizations and exempts rural hospitals from the accreditation requirement.

Under existing law, the Department is required to take any action necessary to ensure that crisis stabilization services provided at a psychiatric hospital that holds an endorsement as a crisis stabilization center are reimbursable under Medicaid. (NRS 422.27238) **Section 2** of this bill expands this requirement to include crisis stabilization services provided at any hospital that holds an endorsement as a crisis stabilization center.

Existing law requires a health maintenance organization or managed care organization that provides health care services to recipients of Medicaid or enrollees in the Children’s Health Insurance Program to negotiate in good faith to include a psychiatric hospital that holds an endorsement as a crisis stabilization center in the network of providers under contract to provide services to such persons. (NRS 695C.194, 695G.320) **Sections 3 and 4** of this bill make conforming changes to these provisions of existing law to reflect that any hospital meeting the requirements for the endorsement may obtain an endorsement as a crisis stabilization center.



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

**Section 1.** 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, evidenced-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)~~ (b) 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,~~ *behavioral health issues*, including, without limitation, hope, personal empowerment, respect, social connections, self-responsibility and self-determination;

~~(d)~~ (c) Employs qualified persons to provide peer support services, as defined in NRS 449.01566, when appropriate;

~~(e)~~ (d) 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)~~ (e) 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;

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

~~(i)~~ (h) 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 ~~(e)~~ (b) 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 *a rural hospital or is accredited by the Commission on Accreditation of Rehabilitation Facilities ~~[, or its successor organization.]~~, the Center for Improvement in Healthcare Quality, DNV GL Healthcare, the Accreditation Commission for Health Care* or the Joint Commission, or ~~its~~ *their* successor ~~organization.~~ *organizations.*

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. 2.** NRS 422.27238 is hereby amended to read as follows:

422.27238 The Department shall take any action necessary to ensure that crisis stabilization services provided at a ~~psychiatric~~ hospital ~~established~~ *with an endorsement as a crisis stabilization center* pursuant to NRS 449.0915 are reimbursable under Medicaid to the same extent as if the services were provided in another covered facility.

**Sec. 3.** NRS 695C.194 is hereby amended to read as follows:

695C.194 A health maintenance organization that provides health care services to recipients of Medicaid under the State Plan for Medicaid or insurance pursuant to the Children's Health Insurance Program pursuant to a contract with the Division of Health Care Financing and Policy of the Department of Health and Human Services shall negotiate in good faith to enter into a contract with a ~~psychiatric~~ hospital with an endorsement as a crisis stabilization center pursuant to NRS 449.0915 to include the ~~psychiatric~~ hospital in the network of providers under contract with the health maintenance organization to provide services to recipients of Medicaid or enrollees in the Children's Health Insurance Program, as applicable.

**Sec. 4.** NRS 695G.320 is hereby amended to read as follows:

695G.320 A managed care organization that provides health care services to recipients of Medicaid under the State Plan for Medicaid or insurance pursuant to the Children's Health Insurance Program pursuant to a contract with the Division of Health Care Financing and Policy of the Department of Health and Human Services shall negotiate in good faith to enter into a contract with a ~~psychiatric~~ hospital with an endorsement as a crisis stabilization center pursuant to NRS 449.0915 to include the ~~psychiatric~~ hospital in the network of providers under contract with the managed care organization to provide services to recipients of Medicaid or insureds in the Children's Health Insurance Program, as applicable.

**Sec. 5.** This act becomes effective on July 1, 2021.

