

# REPORT OF THE STATE OF NEVADA COMMISSION ON BEHAVIORAL HEALTH

March 2026

## Introduction

The [Nevada Commission on Behavioral Health](#) is a legislatively created body consisting of [10 members](#). Its purpose pursuant to Nevada Revised Statutes (NRS) 433.428 and NRS 433.429, is to provide policy guidance and oversight for Nevada's public system of integrated care and treatment for adults and children with mental health, substance abuse and developmental disabilities or related conditions.

This report is submitted pursuant to [Nevada Revised Statute 433.314](#), which requires the Commission on Behavioral Health to submit an annual report to the Governor and the Legislature on the quality of care

and treatment provided for individuals with mental illness, intellectual disabilities, related conditions, substance use disorders, or co-occurring disorders in the state. The report includes information on progress made toward improving the quality of care and treatment highlighting:

- Data dashboards of substance use disorders, addictive disorders related to gambling, and suicide.
- Relevant behavioral health prevalence data for each behavioral health region created by [NRS 433.428](#).
- The priorities of each regional board.

## Behavioral Health Data

- Nevada Health Authority, Office of Analytics [Behavioral Health](#) Data Dashboard provides access to reports on key behavioral health topics, including substance use, overdose trends, suicide, and mental health indicators. These data help inform prevention efforts, guide resource allocation, and support the development of effective, evidence-based programs aimed at improving the lives of individuals and families across Nevada.
- Mental Health America provides [The State of Mental Health in America report](#) which highlights the latest national data and provides state-level rankings on mental health and well-being in the U.S. Through this 2025 report, Mental Health America offers critical insights to drive policy, improve care, and support people living with mental health conditions across the country. This report highlights 17 key measures associated with adult and youth prevalence of mental health conditions, as well as access to care.
  - Within this report for 2025, Nevada ranked overall 51<sup>st</sup> reflecting that the data shows Nevada has the combined highest prevalence of mental illness and lowest rate of access to care.
    - For the adult measures, which summarizes prevalence of mental illness and higher rates of access to care for adults (ages 18+), Nevada was ranked at 49<sup>th</sup>.
    - For the youth measures, Nevada ranked 51<sup>st</sup>.
    - For the prevalence measures, which show higher prevalence of mental health and substance use issues, Nevada ranked 46<sup>th</sup>.
    - For the access to care measures, which highlight access to insurance and mental health care, Nevada ranked 47<sup>th</sup>.

- In March 2025, the National Alliance on Mental Illness (NAMI) developed [state data sheets](#) to summarize key data on mental health in Nevada. Some highlights include:
  - 600,000 adults in Nevada have a mental health condition, with 165,000 having a serious mental illness. Of those, 25% are unhoused.
  - Approximately 1 in 6 youth, aged 12 to 17, experience a major depressive episode each year. For the same age group, 1 in 9 have serious thoughts of suicide each year.

## Behavioral Health Plans and Priorities

### Children's Behavioral Health Consortia Plans

- [Rural Children's Health Consortium](#)
- [Clark County Children's Mental Health Consortium](#)

### Division of Public and Behavioral Health Plans

- The Division of Public and Behavioral Health's [Strategic Plan](#) and [Silver State Health Improvement Plan](#). Two of the top issues identified in the 2022 State Health Assessment were mental health and substance use. Collectively referred to as behavioral health, these are key issues in Nevada and nationwide. Behavioral health and physical health are closely related. Good mental health and psychological wellbeing can reduce the risk of certain physical health conditions, such as heart attacks and stroke, while poor mental health can lead to poor physical health and harmful behaviors. Physical wellbeing also affects mental health, and individuals with physical health challenges are at higher risk of developing mental health conditions.
- The Bureau of Behavioral Health Wellness and Prevention's [strategic plan](#) was designed to identify the most important issues facing Nevadans' behavioral health, including addressing mental health, substance use disorders, mental health crises, problem gambling and more. Community input was gathered from over 50 Nevadans with lived experience, and over 15 subject matter experts with different backgrounds, perspectives and geographic locations.

## Regional Behavioral Health Boards

Nevada is divided into five distinct behavioral health regions that are overseen by [Regional Behavioral Health Policy Boards](#). These boards, composed of community leaders, law enforcement, healthcare and treatment providers, social services, family and peer advocates, and others, bring diverse perspectives to the table, and facilitate collaboration focused on improving the behavioral health system in Nevada. A primary goal of the Regional Behavioral Health Policy Boards is to enable stakeholders to develop a shared understanding of the behavioral health issues facing each region, allowing for more effective planning and resource distribution across the state. Each Board is supported by a Regional Behavioral Health Coordinator position, funded through federal block grants and positioned with a county or community agency depending on the region.

The purpose of this website is to provide information to community members, providers, and policymakers about:

- Regional behavioral health initiatives, issues, and priorities
- [Regional and statewide behavioral health data](#)
- Statewide behavioral health policies, initiatives, and legislation

- Community resources within the regions
- Useful links to statewide programs and resources

The efforts of each regional board, as well as statewide efforts, can be accessed online:

- The [Rural Regional Behavioral Health Policy Board](#) represents a six-county region in northeastern Nevada, which includes Elko, Eureka, Humboldt, Lander, Pershing, and White Pine Counties.
- The [Washoe Regional Behavioral Health Policy Board](#) represents Washoe County.
- The [Northern Region](#) consists of Carson City, Churchill, Douglas, Lyon, and Storey Counties.
- The [Southern Behavioral Health Region](#) consists of Mineral, Lincoln, Esmeralda, and northern Nye counties.
- The [Clark County Regional Behavioral Health Board](#) supports Clark County.
- The [Statewide Initiative](#) supports efforts to improve services and outcomes statewide.

## Recommendations

### Improve Critical Models of Care:

When examining the data, it has been determined that Nevada can improve access to mental health services by focusing on the following areas:

1. Continued Implementation of Crisis Support Services:
  - Expanding crisis call center capacity including integration with 911 operations.
  - Expanding mobile crisis teams for 24/7 access and deployment
2. Provide intensive interventions for youth:
  - Establish early screening
  - Expand community-based services
  - Ensure eligibility and access for families
3. Provide interception for those whose behavioral health issues result in contact with the criminal system:
  - Implement diversion processes from detention settings
  - Assist with outpatient treatment
  - Provide assertive community treatment

### Reduce Barriers to Accessing Care:

1. Workforce Development:
  - Expand the availability of all categories of behavioral healthcare workers
  - Encourage clinically focused education in Nevada which focuses on addictive behaviors and co-occurring disorders
  - Continue the integration of behavioral health and primary health care
  - Adopt a cost-based reimbursement rate for university-based behavioral health training clinics
2. Transportation:
  - Ensure Individuals who reside in underserved areas have adequate transportation to and from intensive services
  - Continue access for telehealth services
3. Financial Barriers:

- Address denials of, and limitations on insurance coverage for crisis services
- Ensure that there are adequate reimbursement rates for critical services

## Summation

The Nevada Commission on Behavioral Health is grateful for the commitment that the administration of the Governor's Office has demonstrated to improve Nevadans behavioral health by inclusion in the strategic plan. The use of American Rescue Plan Act (ARPA) funding has resulted in behavioral health facilities being purchased by both Clark and Washoe counties. This investment will expand resources and demonstrates a new level of collaboration with our local government partners.

The Commission was instrumental in helping to bring to light through our oversight processes the concerns with Never Give Up Healing Center in Amargosa Valley. Having an external multidisciplinary, multispecialty body is important on behalf of mental health services in the state of Nevada. And thus, we, as a Commission, have grave concern that eliminating the presence and function of such a body will take away oversight of the provision of care of our most vulnerable and marginalized individuals in the state.

The Commission, Regional Health Policy Boards, and the Children's Mental Health Consortia remain committed to improving the behavioral health systems in Nevada. In partnership we are committed to improving the services that exist and augmenting them to include a more robust system of care that can better meet the needs of all Nevadans. We encourage the State to consider the priorities summarized in this letter and that have been developed to address the mental and behavioral health service needs in our rural, urban, and frontier communities.

Respectfully submitted,

Braden Schrag

Chair, Nevada Commission on Behavioral Health

CC:

Jasmine Cooper, LCADC

Lisa Durette, M.D.

Daniel Ficalora, LCPC

Natasha Mosby, LCSW

Lisa Ruiz-Lee