

Hospital-mandated overdose reporting (AB474, per NRS 441a)

Source: The passing of AB474 in Nevada in 2017 led to mandated hospital reporting, using the infectious disease provision under NRS 441a. Effective 2018, Nevada hospitals are required to report suspected drug overdoses to the Chief Medical Officer or their designee within 7 days of the patient being discharged. For more information: <https://www.leg.state.nv.us/Register/2018Register/R053-18A.pdf>

AB474

- **NRS 441A.120**
 - Section 4: *“Drug overdose” means any intentional or accidental consumption of a controlled substance listed in schedule I, II, III, IV or V in an amount that exceeds the amount prescribed or intended to be consumed that:*
 - *1. Results in a patient receiving services from a provider of health care in a clinical setting; and*
 - *2. Corresponds to the code T40, T41.1, T42 or T43*
 - Section 5
 - Circumstances requiring a provider of health care to report a drug overdose or suspected drug overdose within 7 days of discharge
 - Section 6
 - Prescribes the contents of report
 - Section 7
 - Requires certain medical facilities to adopt administrative procedures to ensure that a report of a drug overdose is made by only one provider at the facility, and requires the Chief Medical Officer to adopt administrative procedures to track and analyze reports of drug overdose and suspected drug overdose
- **NRS 441A.150**
 - Section 2
 - Requires a provider of health care who knows of, or provides services to, a person who has suffered or is suspected of having suffered a drug overdose to report that fact to the Chief Medical Officer or his or her designee in the manner prescribed by the regulations of the Board

These reports are submitted in one of three ways:

- 1) Faxes to the Office of Public Health Informatics and Epidemiology
- 2) Bitfocus reports from hospitals
- 3) Access files from hospitals from a secure file transfer protocol

Strengths: Reports include ICD-10 diagnosis codes, as well as demographic information of the patient (age, sex, race, ethnicity, and county of residency).

Limitations: Hospitals may not report in a timely manner or report overdoses at all. The Nevada Department of Public and Behavioral Health found that when matching hospital discharge and billing data to these overdose reports during Quarters 1-3 in 2020, only 56% of overdoses were matched. This ideally should be 100%.