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STATE OF NEVADA

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April 25, 2003

To Whom It May Concern:

**RE: SB 281**

I am writing this letter on behalf of the Nevada State Board of Osteopathic Medicine in support of passage of SB 281 by the Assembly for consideration by Governor Kenny Guinn.

**SB 281 History:**

SB 281 was introduced on the Board's behalf by Senator Raymond Shaffer; heard twice by the Senate Standing Committee on Commerce and Labor on April 1<sup>st</sup> and 3<sup>rd</sup>, and was passed out of committee without amendment. The Senate passed the bill on April 11<sup>th</sup>, 2003, by unanimous vote of 20 with 1 senator excused.

**SB 281 Objectives:**

Senate Bill 281 was thoughtfully contemplated by the Board with four main objectives.

First, Section 1 (pages 1-2 lines 1-6, and 1- 20) provides for a ***Criminal Background Check*** on all applicant osteopathic physicians and osteopathic physician assistant's. Each applicant would be required to submit fingerprints to the Board, which would be forwarded to the FBI through the Central Repository for Nevada Records of Criminal History for a National Criminal Information Center (NCIC) query. The language of this provision is relatively uniform with other Nevada Statutes regarding Criminal Background checks conducted for other professionals in the state.

The reasons behind requesting criminal background checks are as follows:

1. Background checks help the Board identify whether or not grounds for disciplinary action exist prior to the issuance of a license (NRS 633.511).
2. Checks will help identify whether an applicant has failed to fully disclose required information on an application or provided false information. Providing false information to the Board in connection with an application for licensure is a category D felony per NRS 633.741.

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1. Background checks help the Board identify whether or not grounds for disciplinary action exist prior to the issuance of a license (NRS 633.511).
2. Checks will help identify whether an applicant has failed to fully disclose required information on an application or provided false information. Providing false information to the Board in connection with an application for licensure is a category D felony per NRS 633.741.
3. Checks provide an additional layer of protection of the public from felonious physicians, or physicians seeking to escape a criminal or negative history from another state.
4. The Board may issue a provisional license to an otherwise qualified applicant pending receipt of the criminal background check thereby not providing for an undue delay hindering the physicians' service to the community.

Second objective of SB 281, Sections 2 and 3 (page 2 lines 21 – 36) seeks to ***increase the membership of our Board from five members to seven members***. Reasons supporting increasing the number of Board members are as follows:

1. The workload of the Board has steadily increased over the past three years.
2. Various revisions to several chapters of NRS require that the Board engage in more focused oversight regarding reports of malpractice claims, settlements, and judgments.
3. A membership of 7 would allow for the Board to break into committees more easily.
4. Incidences where more than one Board member must recuse themselves from disciplinary matters will be reduced.
5. The addition of an additional public member for a total of two public members would enhance and ensure the Board's focus on public protection.

Third objective of SB 281, Section 4 (pages 2 lines 37 – 45 and page 3 lines 1-6), provide for the ***Release of investigative or complaint information on dismissed and closed investigations to other state medical Boards or law enforcement agencies***. Reasons for this change include:

1. If a physician is under investigation, relinquishes his license, and flees to another state, under current law, all information regarding the investigation is confidential. Thereby allowing a potential threat to the public to endanger citizens of other states.
2. Virtually all medical boards in the United States will share information regarding investigations, complaints, or otherwise confidential information with other state regulatory Boards. Under current law, the Board of Osteopathic Medicine may not share this information with other states. Typically, if we won't share the information, other Boards won't either, thereby hindering the Board from doing a thorough background check on physicians licensed in other states and applying for licensure in Nevada.
3. Confidential information will only be released to agencies of competent jurisdiction (i.e. other medical boards, and law enforcement agencies). And will not be available to the public and will not adversely affect the licensee physician.

Fourth objective of SB 281 Sections 5 – 19 pages 3 – 12), provides for the *correction of a de jure exclusion of similarly situated Osteopathic Physicians (DO's) from rights and responsibilities ascribed to Allopathic physicians (MD's) in various chapters of the NRS*. The impetus for this change arose from a routine check of different statutes where it was discovered that there were numerous provisions of Nevada law referencing physicians as only those licensed by the Nevada Board of Medical Examiners pursuant to NRS chapter 630.

**DO's are equally empowered in all respects to MD's.** Osteopathic physicians engage in the same length and content of training as allopathic physicians (MD's). Both MD's and DO's attend 4 year accredited medical colleges, postgraduate internships and residencies, and engage in multiple levels of National competency testing. DO's are empowered to write prescriptions, perform surgery, and specialize in any specialty.

Further, DO's are trained in Osteopathic Manipulative Therapy (OMT), which is manipulation of the skeletal structure to promote overall health. The theory of Osteopathic medicine includes applications of all current medical science and technology on a more holistic approach considering the whole body and the affect of disease on other ancillary body systems.

Since the 1970's, DO's have been fully recognized as fully qualified physicians and allowed membership in the American Medical Association. Further, DO's have the options of being Board certified by any specialty Board of the American Board of Medical Specialties or the American Osteopathic Association.

Finally, the Nevada State Board of Osteopathic Medicine is recognized as one of 72 voting members of the Federation of State Medical Boards of the United States, Inc. And the staff of the Board of Osteopathic Medicine participates in Administrators in Medicine, a national organization of Executives of Medical Boards.

The objective of these sections of SB 281 is to correct an oversight on behalf of the Legislative Counsel Bureau providing a legal exclusion to Osteopathic Physicians. In preparing this bill, our Board counsel consulted with Brenda Erdoes, JD, the legislative counsel. Ms. Erdoes stated that she agreed that an oversight had occurred, but felt that the corrections were too broad for a revisers note, and suggested that we solicit the legislature to make these changes to the various statutes. **It is with the support and understanding of the director of the LCB that these changes are requested.**

I would like to thank the Assembly for its thoughtful consideration of SB 281. I will be present on April 28<sup>th</sup>, 2003 in Carson City to testify on behalf of this bill and to answer any questions.

Sincerely,



Trey Delap  
Deputy Executive Director