#### ASSEMBLY BILL NO. 488–COMMITTEE ON WAYS AND MEANS

### (ON BEHALF OF THE DEPARTMENT OF ADMINISTRATION)

### MARCH 25, 2013

## Referred to Committee on Ways and Means

SUMMARY—Revises provisions relating to the transfer of duties and consolidation of certain governmental agencies. (BDR 18-1136)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Yes.

EXPLANATION - Matter in bolded italics is new; matter between brackets fomitted material is material to be omitted.

AN ACT relating to governmental administration; consolidating the Health Division and the Division of Mental Health and Developmental Services of the Department of Health and Human Services into the Division of Public and Behavioral Health of the Department; transferring the powers and duties concerning certain services to children with autism spectrum disorders from the Health Division to the Aging and Disability Services Division of the Department; transferring the authority for developmental services in the Division of Mental Health and Developmental Services to the Aging and Disability Services Division; providing for the appointment of a Chief Medical Officer in certain circumstances; requiring the directors of certain facilities to report to the Chief Medical Officer and to operate under his or her oversight; and providing other matters properly relating thereto.

**Legislative Counsel's Digest:** 

Under existing law, the Health Division and the Division of Mental Health and Developmental Services are two separate divisions within the Department of Health and Human Services. (NRS 232.300) This bill consolidates those two divisions into the Division of Public and Behavioral Health of the Department of Health and Human Services. Existing law requires the Director of the Department of Health and Human Services to appoint the Administrator of the Health Division and the Administrator of the Division of Mental Health and Developmental Services.





(NRS 232.320) **Sections 2, 3 and 12** of this bill: (1) eliminate the position of Administrator of the Health Division and provide instead for an Administrator of the Division of Public and Behavioral Health; (2) set forth the qualifications of the Administrator; (3) require the Administrator, with the consent of the Director of the Department, to appoint four deputies; and (4) authorize the Administrator to delegate his or her powers, duties and functions to a deputy.

Existing law creates the position of State Health Officer within the Health Division of the Department of Health and Human Services and requires the State Health Officer to enforce all laws and regulations pertaining to the public health and to investigate matters relating to the health and life of the people of this State. (NRS 439.090, 439.130) Section 64 of this bill provides that the State Health Officer serves as Chief Medical Officer unless the Director of the Department determines that the appointment of a Chief Medical Officer is in the best interests of this State. Sections 63 and 65 of this bill establish the qualifications and duties of the Chief Medical Officer. Section 13 of this bill provides that the medical director or other person in charge of certain facilities relating to mental health is subject to the oversight of the Chief Medical Officer and is required to report any information concerning the facility to the Chief Medical Officer upon his or her request.

This bill also transfers: (1) the powers and duties concerning certain services to children with autism spectrum disorders from the Health Division to the Aging and Disability Services Division of the Department of Health and Human Services; and (2) the authority for developmental services from the Division of Mental Health and Developmental Services to the Aging and Disability Services Division.

**Section 142** of this bill provides, in part, for the Legislative Counsel to substitute appropriately throughout NRS any names changed by this bill, so that this bill does not need to include every section of NRS in which a name needs to be changed.

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

Section 1. NRS 232.300 is hereby amended to read as follows: 232.300 1. The Department of Health and Human Services is hereby created.

- 2. The Department consists of a Director and the following divisions:
  - (a) Aging and Disability Services Division.
  - (b) <del>[Health Division.</del>
- (c)] Division of [Mental Health and Developmental Services.
- (d) Public and Behavioral Health.
  - (c) Division of Welfare and Supportive Services.
- (e) (d) Division of Child and Family Services.
- 12 (e) Division of Health Care Financing and Policy.
- 3. The Department is the sole agency responsible for administering the provisions of law relating to its respective divisions.
  - **Sec. 2.** NRS 232.320 is hereby amended to read as follows:
- 17 232.320 1. The Director:





- (a) Shall appoint, with the consent of the Governor, administrators of the divisions of the Department, who are respectively designated as follows:
- (1) The Administrator of the Aging and Disability Services Division;
  - (2) The Administrator of the Health Division;
- (3) The Administrator of the Division of Welfare and Supportive Services;
- [(4)] (3) The Administrator of the Division of Child and Family Services;
- [(5)] (4) The Administrator of the Division of Health Care Financing and Policy; and
- [(6)] (5) The Administrator of the Division of [Mental Health and Developmental Services.] Public and Behavioral Health.
- (b) Shall administer, through the divisions of the Department, the provisions of chapters 63, 424, 425, 427A, 432A to 442, inclusive, 446 to 450, inclusive, 458A and 656A of NRS, NRS 127.220 to 127.310, inclusive, 422.001 to 422.410, inclusive, 422.580, 432.010 to 432.133, inclusive, 432B.621 to 432B.626, inclusive, 444.003 to 444.430, inclusive, and 445A.010 to 445A.055, inclusive, and all other provisions of law relating to the functions of the divisions of the Department, but is not responsible for the clinical activities of the Health Division of Public and Behavioral Health or the professional line activities of the other divisions.
- (c) Shall administer any state program for persons with developmental disabilities established pursuant to the Developmental Disabilities Assistance and Bill of Rights Act of 2000, 42 U.S.C. §§ 15001 et seq.
- (d) Shall, after considering advice from agencies of local governments and nonprofit organizations which provide social services, adopt a master plan for the provision of human services in this State. The Director shall revise the plan biennially and deliver a copy of the plan to the Governor and the Legislature at the beginning of each regular session. The plan must:
- (1) Identify and assess the plans and programs of the Department for the provision of human services, and any duplication of those services by federal, state and local agencies;
  - (2) Set forth priorities for the provision of those services;
- (3) Provide for communication and the coordination of those services among nonprofit organizations, agencies of local government, the State and the Federal Government;
- (4) Identify the sources of funding for services provided by the Department and the allocation of that funding;





(5) Set forth sufficient information to assist the Department in providing those services and in the planning and budgeting for the future provision of those services; and

(6) Contain any other information necessary for the Department to communicate effectively with the Federal Government concerning demographic trends, formulas for the distribution of federal money and any need for the modification of programs administered by the Department.

(e) May, by regulation, require nonprofit organizations and state and local governmental agencies to provide information regarding the programs of those organizations and agencies, excluding detailed information relating to their budgets and payrolls, which the Director deems necessary for the performance of the duties imposed upon him or her pursuant to this section.

(f) Has such other powers and duties as are provided by law.

2. Notwithstanding any other provision of law, the Director, or the Director's designee, is responsible for appointing and removing subordinate officers and employees of the Department, other than:

(a) The Executive Director of the Nevada Indian Commission who is appointed pursuant to NRS 233A.055; and

(b) The State Public Defender of the Office of State Public Defender who is appointed pursuant to NRS 180.010.

**Sec. 3.** NRS 232.350 is hereby amended to read as follows: 232.350 Unless federal law or regulation requires otherwise:

1. The administrators of the divisions of the Department, except as otherwise provided in subsections 2 [and 3,], 3 and 4, may each appoint, with the consent of the Director, a deputy and a chief assistant in the unclassified service of the State.

2. The Administrator of the Division of Child and Family Services of the Department shall appoint, with the consent of the Director, four deputies in the unclassified service of the State, one of whom is the Deputy Administrator for Youth Corrections who is responsible only for correctional services for youths for which the Division is responsible, including, without limitation, juvenile correctional institutions, parole of juveniles, administration of juvenile justice and programs for juvenile justice.

3. The Administrator of the Division of Health Care Financing and Policy of the Department may appoint, with the consent of the Director, two deputies in the unclassified service of the State.

4. The Administrator of the Division of Public and Behavioral Health shall appoint, with the consent of the Director, four deputies in the unclassified service of the State.

Sec. 4. NRS 232.361 is hereby amended to read as follows:

232.361 1. There is hereby created in the Department a Commission on [Mental Health and Developmental Services]





**Public and Behavioral Health** consisting of 10 members appointed by the Governor, at least 3 of whom have training or experience in dealing with mental retardation.

2. The Governor shall appoint:

- (a) A psychiatrist licensed to practice medicine in this State, from a list of three candidates submitted by the Nevada Psychiatric Association:
- (b) A psychologist licensed to practice in this State and experienced in clinical practice, from a list of four candidates submitted by the Nevada State Psychological Association, two of whom must be from northern Nevada and two of whom must be from southern Nevada;
- (c) A physician, other than a psychiatrist, licensed to practice medicine in this State and who has experience in dealing with mental retardation, from a list of three candidates submitted by the Nevada State Medical Association;
- (d) A social worker who has a master's degree and has experience in dealing with mental illness or mental retardation, or both;
- (e) A registered nurse licensed to practice in this State who has experience in dealing with mental illness or mental retardation, or both, from a list of three candidates submitted by the Nevada Nurses Association:
- (f) A marriage and family therapist licensed to practice in this State, from a list of three candidates submitted by the Nevada Association for Marriage and Family Therapy;
- (g) A person who has knowledge and experience in the prevention of alcohol and drug abuse and the treatment and recovery of alcohol and drug abusers through a program or service provided pursuant to chapter 458 of NRS, from a list of three candidates submitted by the Division of [Mental Health and Developmental Services] Public and Behavioral Health of the Department;
- (h) A current or former recipient of mental health services provided by the State or any agency thereof;
- (i) A representative of the general public who has a special interest in the field of mental health; and
- (j) A representative of the general public who has a special interest in the field of mental retardation.
- 3. The Governor shall appoint the Chair of the Commission from among its members.
- 4. After the initial terms, each member shall serve a term of 4 years. If a vacancy occurs during a member's term, the Governor shall appoint a person qualified under this section to replace that member for the remainder of the unexpired term.





**Sec. 5.** NRS 178.3983 is hereby amended to read as follows: 178.3983 "Division" means the Division of [Mental Health and Developmental Services] *Public and Behavioral Health* of the Department of Health and Human Services.

**Sec. 6.** Chapter 278 of NRS is hereby amended by adding thereto a new section to read as follows:

"Division" means the Division of Public and Behavioral Health of the Department of Health and Human Services.

Sec. 7. NRS 278.0238 is hereby amended to read as follows:

278.0238 As used in NRS 278.0238 to 278.02388, inclusive, and section 6 of this act, unless the context otherwise requires, the words and terms defined in NRS 278.02381 to 278.02385, inclusive, and section 6 of this act have the meanings ascribed to them in those sections.

**Sec. 8.** NRS 353.349 is hereby amended to read as follows:

353.349 1. If the Administrator of the [Health] Division of *Public and Behavioral Health of* the Department of Health and Human Services determines that current claims exceed the amount of money available because revenue from billed services has not been collected or because of a delay in the receipt of money from federal grants, the Administrator may request from the Director of the Department of Administration a temporary advance from the State General Fund for the payment of authorized expenses.

- 2. The Director of the Department of Administration shall notify the State Controller and the Fiscal Analysis Division of the Legislative Counsel Bureau of the Director's approval of a request made pursuant to subsection 1. The State Controller shall draw his or her warrant upon receipt of the approval by the Director of the Department of Administration.
  - 3. An advance from the State General Fund:
- (a) May be approved by the Director of the Department of Administration for the following budget accounts of the [Health] Division of *Public and Behavioral Health of* the Department of Health and Human Services:
  - (1) Consumer Health Protection;
  - (2) Bureau of Laboratory and Research;
  - (3) Community Health Services;
  - (4) Women, Infants and Children;
  - (5) Bureau of Health Facilities; and
  - (6) Radiological Health.
- (b) Is limited to 25 percent of the revenues expected to be received in the current fiscal year from any source other than legislative appropriation.
- 4. Any money which is temporarily advanced from the State General Fund to an account pursuant to subsection 3 must be repaid





by August 31 following the end of the immediately preceding fiscal year.

- **Sec. 9.** NRS 353.351 is hereby amended to read as follows:
- 353.351 1. If the Administrator of the *Aging and Disability Services* Division [of Mental Health and Developmental Services] of the Department of Health and Human Services determines that current claims exceed the amount of money available because revenue from billed services has not been collected, the Administrator may request from the Director of the Department of Administration a temporary advance from the State General Fund for the payment of authorized expenses.
- 2. The Director of the Department of Administration shall notify the State Controller and the Fiscal Analysis Division of the Legislative Counsel Bureau of the Director's approval of a request made pursuant to subsection 1. The State Controller shall draw his or her warrant upon receipt of the approval by the Director of the Department of Administration.
  - 3. An advance from the State General Fund:
- (a) May be approved by the Director of the Department of Administration for the following budget accounts of the *Aging and Disability Services* Division [of Mental Health and Developmental Services] of the Department of Health and Human Services:
  - (1) Rural Regional Center;
  - (2) Desert Regional Center; and
  - (3) Sierra Regional Center.
- (b) Is limited to 25 percent of the revenues expected to be received in the current fiscal year from any source other than legislative appropriation.
- 4. Any money which is temporarily advanced from the State General Fund to an account pursuant to subsection 3 must be repaid by August 31 following the end of the immediately preceding fiscal year.
- **Sec. 10.** NRS 432A.0273 is hereby amended to read as follows:
- 432A.0273 ["Health] " Division" means the [Health] Division of Public and Behavioral Health of the Department.
- **Sec. 11.** Chapter 433 of NRS is hereby amended by adding thereto the provisions set forth as sections 12 and 13 of this act.
- Sec. 12. 1. The Administrator may delegate to a deputy of the Division the exercise or discharge in the name of the Administrator of any power, duty or function vested in or imposed upon the Administrator.
- 2. The official act of any such person acting in the name of the Administrator and by his or her authority shall be deemed an official act of the Administrator.





- Sec. 13. The medical director or other person in charge of any division facility or any other facility or center established pursuant to this chapter and chapters 433A, 433B and 436 of NRS:
- 1. Is subject to the oversight of the Chief Medical Officer; and
- 2. Shall report to the Chief Medical Officer any information concerning the facility or center upon the request of the Chief Medical Officer.
  - **Sec. 14.** NRS 433.003 is hereby amended to read as follows:

433.003 The Legislature hereby declares that it is the intent of this [title:] chapter and chapters 433A, 433B and 436 of NRS:

- 1. To eliminate the forfeiture of any civil and legal rights of any person and the imposition of any legal disability on any person, based on an allegation of mental illness [or mental retardation] or a related condition, by any method other than a separate judicial proceeding resulting in a determination of incompetency, wherein the civil and legal rights forfeited and the legal disabilities imposed are specifically stated; and
- 2. To charge the Division of [Mental and Developmental Services,] Public and Behavioral Health, and the Division of Child and Family Services, of the Department with recognizing their duty to act in the best interests of their respective consumers by placing them in the least restrictive environment.
  - **Sec. 15.** NRS 433.005 is hereby amended to read as follows:
- 433.005 As used in this [title,] chapter and chapters 433A, 433B and 436 of NRS, unless the context otherwise requires, or except as otherwise defined by specific statute, the words and terms defined in NRS 433.014 to 433.227, inclusive, have the meanings ascribed to them in those sections.
  - **Sec. 16.** NRS 433.014 is hereby amended to read as follows:
- 433.014 "Administrative officer" means a person with overall executive and administrative responsibility for those state or nonstate mental health [or mental retardation facilities] centers designated by the Administrator.
  - Sec. 17. NRS 433.047 is hereby amended to read as follows:
- 433.047 "Commission" means the Commission on [Mental Health and Developmental Services.] Public and Behavioral Health.
- **Sec. 18.** NRS 433.084 is hereby amended to read as follows:
- 41 433.084 "Division" means the Division of [Mental Health and
- 42 Developmental Services Public and Behavioral Health of the 43 Department.





- **Sec. 19.** NRS 433.134 is hereby amended to read as follows:
- 433.134 "Medical director" means the [chief] medical officer 2 3 in charge of any division mental health for mental retardation 4 program. 5
  - **Sec. 20.** NRS 433.233 is hereby amended to read as follows:
  - 433.233 1. The division facilities providing mental health services are designated as:
    - (a) Northern Nevada Adult Mental Health Services;
    - (b) Southern Nevada Adult Mental Health Services;
    - (c) Rural clinics; and

6

7

8

9

10 11

12 13

14

15

16

18

19

20

21

22 23

24

25

26 27

28

30 31

32 33

34

35

36

37 38

39

40

41

42

43 44

- (d) Lakes Crossing Center.
- 2. The division facilities providing services for persons with mental retardation and persons with related conditions are designated as:
- (a) Desert Regional Center:
- (b) Sierra Regional Center; and
- (c) Rural Regional Center. 17
  - 3.1 Division facilities established after July 1, 1981, must be named by the Administrator, subject to the approval of the Director of the Department.
    - **Sec. 21.** NRS 433.244 is hereby amended to read as follows:
    - 433.244 1. The Administrator must: [have:]
  - (a) *Have*:
  - (1) Training and demonstrated administrative qualities of leadership in any one of the professional fields of psychiatry, medicine, psychology, social work, [education] public health or administration: and
- (b) (2) Administrative training or experience in programs 29 relating to mental health, including care, treatment or training, or any combination thereof, of persons with mental illness for mental retardation and persons with related conditions [...]; or
  - (b) Have not less than 2 years' experience, or the equivalent, in a responsible administrative position in:
  - (1) A full-time county or city health facility or department; or
    - (2) A major health program at a state or national level.
    - The Administrator is in the unclassified service of the State. **Sec. 22.** NRS 433.314 is hereby amended to read as follows:
    - 433.314 The Commission shall:
  - Establish policies to ensure adequate development and administration of services for persons with mental illness [, mental retardation or co-occurring disorders and persons with related conditions, including services to prevent mental illness <del>[, mental</del> retardation and co-occurring disorders and related conditions, and services provided without admission to a facility or institution;





- 2. Set policies for the care and treatment of persons with mental illness [, mental retardation] or co-occurring disorders and persons with related conditions provided by all state agencies;
  - 3. Review the programs and finances of the Division; and
- 4. Report at the beginning of each year to the Governor and at the beginning of each odd-numbered year to the Legislature on the quality of the care and treatment provided for persons with mental illness [, mental retardation] or co-occurring disorders and persons with related conditions in this State and on any progress made toward improving the quality of that care and treatment.

**Sec. 23.** NRS 433.316 is hereby amended to read as follows:

433.316 The Commission may:

1 2

- 1. Collect and disseminate information pertaining to mental health [, mental retardation] and co-occurring disorders and related conditions.
- 2. Request legislation pertaining to mental health <del>[, mental retardation]</del> and co-occurring disorders and related conditions.
- 3. Investigate complaints about the care of any person in a public facility for the treatment of persons with mental illness [, mental retardation] or co-occurring disorders and persons with related conditions.
- 4. Accept, as authorized by the Legislature, gifts and grants of money and property.
- 5. Take appropriate steps to increase the availability of and to enhance the quality of the care and treatment of persons with mental illness [, mental retardation] or co-occurring disorders and persons with related conditions provided through state agencies, hospitals and clinics.
- 6. Promote programs for the treatment of persons with mental illness [, mental retardation] or co-occurring disorders and persons with related conditions and participate in and promote the development of facilities for training persons to provide services for persons with mental illness [, mental retardation] or co-occurring disorders and persons with related conditions.
- 7. Create a plan to coordinate the services for the treatment of persons with mental illness [, mental retardation] or co-occurring disorders and persons with related conditions provided in this State and to provide continuity in the care and treatment provided.
- 8. Establish and maintain an appropriate program which provides information to the general public concerning mental illness [, mental retardation] and co-occurring disorders and related conditions and consider ways to involve the general public in the decisions concerning the policy on mental illness [, mental retardation] and co-occurring disorders and related conditions.





- 9. Compile statistics on mental illness and study the cause, pathology and prevention of that illness.
- 10. Establish programs to prevent or postpone the commitment of residents of this State to facilities for the treatment of persons with mental illness [, mental retardation] or co-occurring disorders and persons with related conditions.
- 11. Evaluate the future needs of this State concerning the treatment of mental illness [, mental retardation] and co-occurring disorders and related conditions and develop ways to improve the treatment already provided.
- 12. Take any other action necessary to promote mental health in this State.
  - **Sec. 24.** NRS 433.318 is hereby amended to read as follows:
- 433.318 1. The Commission may appoint a subcommittee or an advisory committee composed of members who have experience and knowledge of matters relating to persons with mental illness [, mental retardation] or co-occurring disorders and related conditions and who, to the extent practicable, represent the ethnic and geographic diversity of this State.
- 2. A subcommittee or advisory committee appointed pursuant to this section shall consider specific issues and advise the Commission on matters related to the duties of the Commission.
- 3. The members of a subcommittee or advisory committee appointed pursuant to this section serve at the pleasure of the Commission. The members serve without compensation, except that each member is entitled, while engaged in the business of the subcommittee or advisory committee, to the per diem allowance and travel expenses provided for state officers and employees generally if funding is available for this purpose.
  - Sec. 25. NRS 433.324 is hereby amended to read as follows:
  - 433.324 1. The Commission shall adopt regulations:
- (a) For the care and treatment of persons with mental illness [, mental retardation] or co-occurring disorders and persons with related conditions by all state agencies and facilities, and their referral to private facilities;
- (b) To ensure continuity in the care and treatment provided to persons with mental illness [, mental retardation] or co-occurring disorders and persons with related conditions in this State; and
- (c) Necessary for the proper and efficient operation of the facilities of the Division.
- 2. The Commission may adopt regulations to promote programs relating to mental health [, mental retardation] and co-occurring disorders and related conditions.





**Sec. 26.** NRS 433.325 is hereby amended to read as follows:

433.325 The Commission or its designated agent may inspect any state facility providing services for persons with mental illness [, mental retardation] or co-occurring disorders and persons with related conditions to determine if the facility is in compliance with the provisions of this [title] chapter and chapters 433A, 433B and 436 of NRS and any regulations adopted pursuant [to those provisions.] thereto.

**Sec. 27.** NRS 433.3315 is hereby amended to read as follows: 433.3315 The Division shall adopt regulations:

1. To define the term "consumer" for the purposes of this **title.** chapter and chapters 433A, 433B and 436 of NRS.

- 2. To specify the circumstances under which a consumer is eligible to receive services from the Division pursuant to this **[title,]** chapter and chapters 433A, 433B and 436 of NRS, including, but not limited to, care, treatment, treatment to competency and training. Regulations adopted pursuant to this subsection must specify that a consumer is eligible to receive services only if the consumer:
- (a) Has a documented diagnosis of a mental disorder based on the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association; and
- (b) Except as otherwise provided in the regulations adopted pursuant to subsection 3, is not eligible to receive services through another public or private entity.
- 3. To specify the circumstances under which the provisions of paragraph (b) of subsection 2 do not apply, including, without limitation, when the copay or other payment required to obtain services through another public or private entity is prohibitively high.
- 4. To establish policies and procedures for the referral of each consumer who needs services that the Division is unable to provide to the most appropriate organization or resource who is able to provide the needed services to that consumer.
  - **Sec. 28.** NRS 433.334 is hereby amended to read as follows:
- 433.334 The Division may, by contract with general hospitals or other institutions having adequate facilities in the State of Nevada, provide for inpatient care of consumers with mental illness for mental retardation and consumers with related conditions.
  - **Sec. 29.** NRS 433.354 is hereby amended to read as follows:
- 433.354 For the purposes of *this chapter and* chapters [433 to 436, inclusive,] 433A, 433B and 436 of NRS, the Department through the Division may cooperate, financially or otherwise, and execute contracts or agreements with the Federal Government, any federal department or agency, any other state department or agency,





a county, a city, a public district or any political subdivision of this state, a public or private corporation, an individual or a group of individuals. Such contracts or agreements may include provisions whereby the Division will render services, the payment for which will be reimbursed directly to the Division's budget. Cooperation pursuant to this section does not of itself relieve any person, department, agency or political subdivision of any responsibility or liability existing under any provision of law.

**Sec. 30.** NRS 433.364 is hereby amended to read as follows: 433.364 Nothing in this **[title]** *chapter and chapters 433A*, **433B** *and 436 of NRS* precludes the involuntary court-ordered admission of a person with mental illness to a private institution where such admission is authorized by law.

**Sec. 31.** NRS 433.394 is hereby amended to read as follows: 433.394 For the purposes of this **[title\_]** *chapter and chapters* 

433A, 433B and 436 of NRS, the Department may accept:

1. Moneys appropriated and made available by any act of the Congress of the United States;

2. Moneys and contributions made available by a county, a city, a public district or any political subdivision of this state; and

- 3. Moneys and contributions made available by a public or private corporation, a private foundation, an individual or a group of individuals
  - **Sec. 32.** NRS 433.395 is hereby amended to read as follows:
- 433.395 1. Upon approval of the Director of the Department, the Administrator may accept:
- (a) Donations of money and gifts of real or personal property; and
  - (b) Grants of money from the Federal Government,
- → for use in public or private programs that provide services to persons in this State with mental illness [or mental retardation] and persons with related conditions.
- 2. The Administrator shall disburse any donations, gifts and grants received pursuant to this section to programs that provide services to persons with mental illness [or mental retardation] and persons with related conditions in a manner that supports the plan to coordinate services created by the Commission pursuant to subsection 7 of NRS 433.316. In the absence of a plan to coordinate services, the Administrator shall make disbursements to programs that will maximize the benefit provided to persons with mental illness [or mental retardation] and persons with related conditions in consideration of the nature and value of the donation, gift or grant.
- 3. Within limits of legislative appropriations or other available money, the Administrator may enter into a contract for services





related to the evaluation and recommendation of recipients for the disbursements required by this section.

**Sec. 33.** NRS 433.404 is hereby amended to read as follows:

433.404 1. The Division shall establish a fee schedule for services rendered through any program supported by the State pursuant to the provisions of *this chapter and* chapters [433 to 436, inclusive,] 433A, 433B and 436 of NRS. The schedule must be submitted to the Commission and the Director of the Department for joint approval before enforcement. The fees collected by facilities operated by the Division pursuant to this schedule must be deposited in the State Treasury to the credit of the State General Fund, except as otherwise provided in NRS 433.354 for fees collected pursuant to contract or agreement. [and in NRS 435.120 for fees collected for services to consumers with mental retardation and related conditions.]

2. For a facility providing services for the treatment of persons with mental illness [or mental retardation] and persons with related conditions, the fee established must approximate the cost of providing the service, but if a consumer is unable to pay in full the fee established pursuant to this section, the Division may collect any amount the consumer is able to pay.

**Sec. 34.** NRS 433.424 is hereby amended to read as follows:

433.424 A mental health [and mental retardation] center revolving account up to the amount of \$5,000 is hereby created for each division mental health [and mental retardation] center, and may be used for the payment of mental health [or mental retardation] center bills requiring immediate payment and for no other purposes. The respective administrative officers shall deposit the money for the respective revolving accounts in one or more banks or credit unions of reputable standing. Payments made from each account must be promptly reimbursed from appropriated money of the respective mental health [or mental retardation] centers on claims as other claims against the State are paid.

Sec. 35. NRS 433.434 is hereby amended to read as follows: 433.434 For purposes of this [title,] chapter and chapters 433A, 433B and 436 of NRS, the residence of a person is:

1. The domicile of such person;

- 2. If the domicile of the person cannot be ascertained, the place where the person was last employed; or
- 3. If the domicile of the person cannot be ascertained and he or she is not or was not employed, the place where the person made his or her home or headquarters.

**Sec. 36.** NRS 433.444 is hereby amended to read as follows:

433.444 1. For the purpose of facilitating the return of nonresident consumers to the state in which they have legal





residence, the Administrator may enter into reciprocal agreements, consistent with the provisions of this [title,] chapter and chapters 433A, 433B and 436 of NRS, with the proper boards, commissioners or officers of other states for the mutual exchange of consumers confined in, admitted or committed to a mental health [or mental retardation] facility in one state whose legal residence is in the other, and may give written permission for the return and admission to a division facility of any resident of this state when such permission is conformable to the provisions of this [title] chapter and chapters 433A, 433B and 436 of NRS governing admissions to a division facility.

2. The county clerk and board of county commissioners of each county, upon receiving notice from the Administrator that an application for the return of an alleged resident of this state has been received, shall promptly investigate and report to the Administrator their findings as to the legal residence of the consumer.

**Sec. 37.** NRS 433.458 is hereby amended to read as follows:

433.458 "Administrative officer" means a person with overall executive and administrative responsibility for a facility that provides services relating to mental health [or mental retardation] and related conditions and that is operated by any public or private entity.

**Sec. 38.** NRS 433.464 is hereby amended to read as follows:

433.464 [This title does] The provisions of this chapter and chapters 433A, 433B and 436 of NRS do not limit the right of any person detained hereunder to a writ of habeas corpus upon a proper application made at any time by such person or any other person on his or her behalf.

**Sec. 39.** NRS 433.494 is hereby amended to read as follows:

433.494 1. An individualized written plan of mental health [or mental retardation] services or plan of services for a related condition must be developed for each consumer of each facility. The plan must:

- (a) Provide for the least restrictive treatment procedure that may reasonably be expected to benefit the consumer; and
  - (b) Be developed with the input and participation of:
- (1) The consumer, to the extent that he or she is able to provide input and participate; and
- (2) To the extent that the consumer is unable to provide input and participate, the parent or guardian of the consumer if the consumer is under 18 years of age and is not legally emancipated, or the legal guardian of a consumer who has been adjudicated mentally incompetent.
- 2. The plan must be kept current and must be modified, with the input and participation of the consumer, the parent or guardian





of the consumer or the legal guardian of the consumer, as appropriate, when indicated. The plan must be thoroughly reviewed at least once every 3 months.

The person in charge of implementing the plan of services must be designated in the plan.

**Sec. 40.** NRS 433A.010 is hereby amended to read as follows: 433A.010 The provisions of this chapter apply to all mental health centers of the Division of [Mental Health and Developmental Services Public and Behavioral Health of the Department and of the Division of Child and Family Services of the Department. Such provisions apply to private institutions and facilities offering mental health services only when specified in the context.

**Sec. 41.** NRS 433A.012 is hereby amended to read as follows: 433A.012 "Administrative officer" means a person with overall executive and administrative responsibility for those state or nonstate facilities for mental health for mental retardation designated by the Administrator.

Sec. 42. NRS 433A.015 is hereby amended to read as follows: 433A.015 "Division" means:

- Except as otherwise provided in subsection 2, the Division of Mental Health and Developmental Services Public and **Behavioral Health** of the Department.
- 2. Regarding the provision of services for the mental health of children pursuant to chapter 433B of NRS, the Division of Child 24 25 and Family Services of the Department.
  - **Sec. 43.** NRS 433A.017 is hereby amended to read as follows: 433A.017 "Medical director" means the [chief] medical officer in charge of any program of the Division of Mental Health and Developmental Services Public and Behavioral Health of the Department.

**Sec. 44.** NRS 433A.020 is hereby amended to read as follows: 433A.020 The administrative officer of a facility of the Division must:

- Be selected on the basis of training and demonstrated administrative qualities of leadership in any one of the fields of psychiatry, medicine, psychology, social work, feducation public *health* or administration.
- 2. Be appointed on the basis of merit as measured by administrative training or experience in programs relating to mental health, including care and treatment of persons with mental illness for mental retardation and persons with related conditions.
- 3. Have additional qualifications which are in accordance with criteria prescribed by the Division of Human Resource Management of the Department of Administration.



2 3

4

5

6

7

8

10

11 12

13

14

15

16

17

18

19

20

21 22

23

26 27

28 29

30

31

32 33

34

35

36 37

38

39

40

41 42

43



**Sec. 45.** NRS 433A.030 is hereby amended to read as follows: 433A.030 The administrative officers have the following powers and duties, subject to the administrative supervision of the Administrator:

1. To exercise general supervision of and establish regulations for the government of the facilities designated by the Administrator;

2. To be responsible for and supervise the fiscal affairs and responsibilities of the facilities designated by the Administrator;

- 3. To appoint such medical, technical, clerical and operational staff as the execution of his or her duties, the care and treatment of consumers and the maintenance and operation of the facilities designated by the Administrator may require;
- 4. To make reports to the Administrator, and to supply the Administrator with material on which to base proposed legislation;
- 5. To keep complete and accurate records of all proceedings, record and file all bonds and contracts, and assume responsibility for the custody and preservation of all papers and documents pertaining to his or her office;
- 6. To inform the public in regard to the activities and operation of the facilities;
- 7. To invoke any legal, equitable or special procedures for the enforcement of his or her orders or the enforcement of the provisions of this **[title]** chapter and chapters 433, 433B and 436 of **NRS** and other statutes governing the facilities;
- 8. To submit an annual report to the Administrator on the condition, operation, functioning and anticipated needs of the facilities; and
- 9. To assume responsibility for the nonmedical care and treatment of consumers if that responsibility has not been delegated.

**Sec. 46.** NRS 433B.130 is hereby amended to read as follows: 433B.130 1. The Administrator shall:

- (a) Administer, in accordance with the policies established by the Commission, the programs of the Division for the mental health of children.
  - (b) Establish appropriate policies to ensure that children in division facilities have timely access to clinically appropriate psychotropic medication that are consistent with the provisions of NRS 432B.197 and NRS 432B.4681 to 432B.469, inclusive, and the policies adopted pursuant thereto.
    - 2. The Administrator may:
- (a) Appoint the administrative personnel necessary to operate the programs of the Division for the mental health of children.
- (b) Delegate to the administrative officers the power to appoint medical, technical, clerical and operational staff necessary for the operation of any division facilities.





- 3. If the Administrator finds that it is necessary or desirable that any employee reside at a facility operated by the Division or receive meals at such a facility, perquisites granted or charges for services rendered to that person are at the discretion of the Director of the Department.
- 4. The Administrator may accept children referred to the Division for treatment pursuant to the provisions of NRS 458.290 to 458.350, inclusive.
- 5. The Administrator may enter into agreements with the Administrator of the Division of [Mental Health and Developmental Services] Public and Behavioral Health of the Department for the care and treatment of consumers of the Division of Child and Family Services at any facility operated by the Division of [Mental Health and Developmental Services.] Public and Behavioral Health.
  - **Sec. 47.** NRS 433B.190 is hereby amended to read as follows: 433B.190 1. The Division shall adopt regulations to:
- 18 (a) Provide for a more detailed definition of abuse of a 19 consumer, consistent with the general definition given in 20 NRS 433B.340;
  - (b) Provide for a more detailed definition of neglect of a consumer, consistent with the general definition given in NRS 433B.340; and
  - (c) Establish policies and procedures for reporting the abuse or neglect of a consumer.
  - 2. The regulations adopted pursuant to this section must, to the extent possible and appropriate, be consistent with the regulations adopted by the Division of [Mental Health and Developmental Services] Public and Behavioral Health of the Department pursuant to NRS 433.331.
- Sec. 48. Chapter 435 of NRS is hereby amended by adding thereto the provisions set forth as sections 49 to 59, inclusive, of this act.
- Sec. 49. 1. The division facilities providing services for persons with intellectual disabilities and persons with related conditions are designated as:
  - (a) Desert Regional Center;
  - (b) Sierra Regional Center; and
  - (c) Rural Regional Center.
- 2. Division facilities established after July 1, 1981, must be named by the Administrator, subject to the approval of the Director of the Department.
  - Sec. 50. 1. The Division shall adopt regulations:





(a) For the care and treatment of persons with intellectual disabilities and persons with related conditions by all state agencies and facilities, and their referral to private facilities;

(b) To ensure continuity in the care and treatment provided to persons with intellectual disabilities and persons with related

conditions in this State; and

 (c) Necessary for the proper and efficient operation of the facilities of the Division.

2. The Division may adopt regulations to promote programs

relating to intellectual disabilities and related conditions.

- Sec. 51. The Division or its designated agent may inspect any division facility providing services for persons with intellectual disabilities and persons with related conditions to determine if the facility is in compliance with the provisions of this chapter and any regulations adopted pursuant thereto.
- Sec. 52. The Division may, by contract with general hospitals or other institutions having adequate facilities in the State of Nevada, provide for inpatient care of persons with intellectual disabilities and persons with related conditions.
- Sec. 53. The Division may contract with appropriate persons professionally qualified in the field of psychiatric mental health to provide inpatient and outpatient care for persons with intellectual disabilities and persons with related conditions when it appears that they can be treated best in that manner.
  - Sec. 54. The Division shall adopt regulations:
- 1. To define the term "consumer" for the purposes of this chapter.
- 2. To specify the circumstances under which a consumer is eligible to receive services from the Division pursuant to this chapter, including, but not limited to, care, treatment and training. Regulations adopted pursuant to this subsection must specify that a consumer is eligible to receive services only if the consumer:
- (a) Has a documented diagnosis of a mental disorder based on the most recent edition of the <u>Diagnostic and Statistical Manual of Mental Disorders</u> published by the American Psychiatric Association; and
- (b) Except as otherwise provided in the regulations adopted pursuant to subsection 3, is not eligible to receive services through another public or private entity.
- 3. To specify the circumstances under which the provisions of paragraph (b) of subsection 2 do not apply, including, without limitation, when the copay or other payment required to obtain services through another public or private entity is prohibitively high.





To establish policies and procedures for the referral of each consumer who needs services that the Division is unable to provide to the most appropriate organization or resource who is able to provide the needed services to that consumer.

Sec. 55. For the purposes of this chapter, the Department

may accept:

2

3

4 5

6

7 8

9

10

11

12 13

14

15

16

17

18 19

21

22

23 24

25

26

27

28 29

30

31 32

33

34 35

36

37 38

39

40

41 42

43

44

- 1. Money appropriated and made available by any act of the Congress of the United States;
- 2. Money and contributions made available by a county, a city, a public district or any political subdivision of this State; and
- 3. Money and contributions made available by a public or private corporation, a private foundation, an individual or a group of individuals.
- Sec. 56. For the purposes of this chapter, the residence of a person is:
  - 1. The domicile of such person;
- If the domicile of the person cannot be ascertained, the place where the person was last employed; or
- If the domicile of the person cannot be ascertained and he or she is not or was not employed, the place where the person 20 made his or her home or headquarters.
  - Sec. 57. 1. For the purpose of facilitating the return of nonresident consumers to the state in which they have legal residence, the Administrator may enter into reciprocal agreements, consistent with the provisions of this chapter, with the proper boards, commissioners or officers of other states for the mutual exchange of consumers confined in, admitted or committed to an intellectual disability facility in one state whose legal residence is in the other, and may give written permission for the return and admission to a division facility of any resident of this State when such permission is conformable to the provisions of this chapter governing admissions to a division facility.
  - The county clerk and board of county commissioners of each county, upon receiving notice from the Administrator that an application for the return of an alleged resident of this State has been received, shall promptly investigate and report to the Administrator their findings as to the legal residence of the consumer.
  - Sec. 58. This chapter does not limit the right of any person detained hereunder to a writ of habeas corpus upon a proper application made at any time by such person or any other person on his or her behalf.
  - Sec. 59. The administrative officers have the following powers and duties, subject to the administrative supervision of the Administrator:





- 1. To exercise general supervision of and establish regulations for the government of the facilities designated by the Administrator;
- To be responsible for and supervise the fiscal affairs and responsibilities of the facilities designated by the Administrator;
- To appoint such medical, technical, clerical and operational staff as the execution of his or her duties, the care and treatment of consumers and the maintenance and operation of the facilities designated by the Administrator may require;
- 4. To make reports to the Administrator, and to supply the Administrator with material on which to base proposed legislation;
- To keep complete and accurate records of all proceedings, record and file all bonds and contracts, and assume responsibility for the custody and preservation of all papers and documents pertaining to his or her office;
- To inform the public in regard to the activities and operation of the facilities;
- To invoke any legal, equitable or special procedures for the enforcement of his or her orders or the enforcement of the provisions of this chapter and other statutes governing the facilities:
- To submit an annual report to the Administrator on the condition, operation, functioning and anticipated needs of the facilities: and
- To assume responsibility for the nonmedical care and treatment of consumers if that responsibility has not been 26 delegated.
  - **Sec. 60.** NRS 435.007 is hereby amended to read as follows:
- 29 435.007 As used in this chapter, unless the context otherwise 30 requires:
  - "Administrative officer" means a person with overall executive and administrative responsibility for those state or nonstate intellectual disability centers designated by the Administrator.
    - "Administrator" means the Administrator of the Division.
- 3. "Child" means any person under the age of 18 years who 36 may be eligible for mental retardation services or services for a 37 38 related condition.
- 39 <del>[2.]</del> 4. "Department" means the Department of Health and 40 Human Services.
  - "Division" means the Aging and Disability Services Division of the Department.
  - "Division facility" means any unit or subunit operated by the Division for the care, treatment and training of consumers.



3

4

5

6

7

10

11

12

13

14 15

16

17

18

19

20

21 22

23

24 25

27

28

31

32

33 34

35

41 42

43



- "Intellectual disability" means significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period.
- "Intellectual disability center" means an organized program for providing appropriate services and treatment to persons with intellectual disabilities and persons with related conditions. An intellectual disability center may include facilities for residential treatment and training.
- "Parent" means the parent of a child. The term does not include the parent of a person who has attained the age of 18 years.
- 11. "Person" includes a child and any other consumer with mental retardation or a related condition who has attained the age of 18 years.
- [4.] 11. "Persons with related conditions" means persons who have a severe, chronic disability which:
  - (a) Is attributable to:

2

3 4

5

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24 25

26

27

28 29

30

31

32

33

34

35

36 37

39

40

41

42

43 44

45

(1) Cerebral palsy or epilepsy; or

- (2) Any other condition, other than mental illness, found to be closely related to an intellectual disability because the condition results in impairment of general intellectual functioning or adaptive behavior similar to that of a person with an intellectual disability and requires treatment or services similar to those required by a person with an intellectual disability;
- (b) Is manifested before the person affected attains the age of 22 years;
  - (c) Is likely to continue indefinitely; and
- (d) Results in substantial functional limitations in three or more of the following areas of major life activity:
  - (1) Taking care of oneself;
  - (2) Understanding and use of language;
  - (3) Learning;
  - (4) Mobility;
  - (5) Self-direction; and
  - (6) Capacity for independent living.
- "Residential facility for groups" means a structure similar to a private residence which will house a small number of persons in a homelike atmosphere. 38
  - "Training" means a program of services directed primarily toward enhancing the health, welfare and development of persons with intellectual disabilities and persons with related conditions through the process of providing those experiences that will enable the person to:
  - (a) Develop his or her physical, intellectual, social and emotional capacities to the fullest extent;





- 1 (b) Live in an environment that is conducive to personal 2 dignity; and
  - (c) Continue development of those skills, habits and attitudes essential to adaptation in contemporary society.
  - 14. "Treatment" means any combination of procedures or activities, of whatever level of intensity and whatever duration, ranging from occasional counseling sessions to full-time admission to a residential facility.
    - **Sec. 61.** NRS 435.350 is hereby amended to read as follows:
  - 435.350 1. Each person with mental retardation and each person with a related condition admitted to a division facility is entitled to all rights enumerated in NRS 433.482, 433.484 and 433.545 to 433.551, inclusive.
  - 2. The Administrator shall designate a person or persons to be responsible for establishment of regulations relating to denial of rights of persons with mental retardation and persons with related conditions. The person designated shall file the regulations with the Administrator.
  - 3. Consumers' rights specified in NRS 433.482 and 433.484 may be denied only for cause. Any denial of such rights must be entered in the consumer's treatment record, and notice of the denial must be forwarded to the Administrator's designee or designees as provided in subsection 2. Failure to report denial of rights by an employee may be grounds for dismissal.
  - 4. Upon receipt of notice of a denial of rights as provided in subsection 3, the Administrator's designee or designees shall cause a full report to be prepared which sets forth in detail the factual circumstances surrounding the denial. A copy of the report must be sent to the Administrator and the Commission.
  - 5. The [Commission] Division has such powers and duties with respect to reports of denial of rights as are enumerated for the Commission on Public and Behavioral Health in subsection 3 of NRS 433.534.
- Sec. 62. Chapter 439 of NRS is hereby amended by adding thereto the provisions set forth as sections 63, 64 and 65 of this act.
  - Sec. 63. If appointed by the Director pursuant to subsection 2 of section 64 of this act, the Chief Medical Officer must:
    - 1. Be a citizen of the United States;
  - 2. Have not less than 5 years' experience in health care in a managerial or supervisory capacity; and
    - 3. Be:

42 (a) Licensed in good standing or eligible for a license as a 43 physician or administrative physician in Nevada;





(b) Licensed in good standing or eligible for a license as a physician or administrative physician in the District of Columbia or in any state or territory of the United States; or

(c) A physician or administrative physician who has a master's

degree or doctoral degree in public health or a related field.

The State Health Officer shall serve as the Chief Sec. 64. 1. Medical Officer and the duties of the Chief Medical Officer shall be deemed to be included within the duties of the State Health Officer unless the Director determines, in cooperation with the Administrator, that the appointment of a Chief Medical Officer is in the best interests of this State.

If the Director determines that the appointment of a Chief Medical Officer is in the best interests of this State, the Director shall appoint a Chief Medical Officer within 6 months after making such a determination, except that if a qualified applicant does not accept the position within that period, the Director shall continue his or her efforts to fill the position until a qualified person accepts the appointment.

The Chief Medical Officer is in the unclassified service of the State and serves at the pleasure of the Director.

Sec. 65. The Chief Medical Officer shall:

1. Oversee the operation of facilities and centers established pursuant to title 39 of NRS.

2. Direct the work of subordinates and may authorize them to act in his or her place and stead.

3. Perform such other duties as the Director may, from time to time, prescribe.

→ If the Chief Medical Officer is not licensed to practice medicine in this State, he or she shall not, in carrying out the duties of the Chief Medical Officer, engage in the practice of medicine.

**Sec. 66.** NRS 439.005 is hereby amended to read as follows:

439.005 As used in this chapter, unless the context requires 33 otherwise.

- "Administrator" means the Administrator of the [Health] Division.
- "Department" means the Department of Health and Human 2. Services.
  - "Director" means the Director of the Department. 3.
- "Division" means the Division of Public and Behavioral Health of the Department.
- "Health authority" means the officers and agents of the [Health] Division or the officers and agents of the local boards of health.
- 44 "Health Division" means the Health Division of the 45 Department.



2

3

4

5

6

10

11

12 13

14

15

16

17 18

19

20 21

22

23

24 25

26 27

28 29

30

31

32

34 35

36

37

38

39

40

41 42



1 6. "Individually identifiable health information" has the 2 meaning ascribed to it in 45 C.F.R. § 160.103.

**Sec. 67.** NRS 439.010 is hereby amended to read as follows:

439.010 Except as otherwise provided in NRS 439.581 to 439.595, inclusive, the provisions of this chapter must be administered by the Administrator and the [Health] Division, subject to administrative supervision by the Director.

**Sec. 68.** NRS 439.015 is hereby amended to read as follows:

439.015 The Department, through the [Health] Division, may accept and direct the disbursement of money appropriated by any Act of Congress and apportioned or allocated to the State of Nevada for health purposes. This federal money must be deposited in the State Treasury for credit to the State [Health] Division of Public and Behavioral Health Federal Account within the State General Fund

**Sec. 69.** NRS 439.090 is hereby amended to read as follows:

439.090 1. The State Health Officer must:

- (a) Be a citizen of the United States;
- (b) Have not less than 5 years' experience in population-based health care; and
  - (c) Be:

- (1) Licensed in good standing or eligible for a license as a physician or administrative physician in Nevada;
- (2) Licensed in good standing or eligible for a license as a physician or administrative physician in the District of Columbia or in any state or territory of the United States; or
- (3) A physician or administrative physician who has a master's degree or doctoral degree in public health or a related field.
- 2. [The Administrator must have 2 years' experience, or the equivalent, in a responsible administrative position in:
  - (a) A full-time county or city health facility or department; or
    - (b) A major health program at a state or national level.
- 3.1 As used in this section, "population-based health care" means the use of various approaches to medical care for specific groups or populations based upon common demographic characteristics, risk factors or diseases.

**Sec. 70.** NRS 439.130 is hereby amended to read as follows:

439.130 1. The State Health Officer shall:

- (a) Enforce all laws and regulations pertaining to the public health.
- (b) Investigate causes of disease, epidemics, source of mortality, nuisances affecting the public health, and all other matters related to the health and life of the people, and to this end the State Health Officer may enter upon and inspect any public or private property in the State.





- (c) Direct the work of subordinates and may authorize them to act in his or her place and stead.
  - (d) Except as otherwise provided in subsection 5 of NRS 439.970, perform the duties prescribed in NRS 439.950 to 439.983, inclusive.
  - (e) Perform such other duties as the Director may, from time to time, prescribe.
  - → If the State Health Officer is not licensed to practice medicine in this State, he or she shall not, in carrying out the duties of the State Health Officer, engage in the practice of medicine.
  - 2. The Administrator shall direct the work of the [Health] Division, administer the Division and perform such other duties as the Director may, from time to time, prescribe.
    - **Sec. 71.** NRS 439.150 is hereby amended to read as follows:
  - 439.150 1. The State Board of Health is hereby declared to be supreme in all nonadministrative health matters. It has general supervision over all matters, except for administrative matters and as otherwise provided in NRS 439.950 to 439.983, inclusive, relating to the preservation of the health and lives of citizens of this State and over the work of the State Health Officer and all district, county and city health departments, boards of health and health officers.
  - 2. The Department is hereby designated as the agency of this State to cooperate with the federal authorities in the administration of those parts of the Social Security Act which relate to the general promotion of public health. It may receive and expend all money made available to the [Health] Division by the Federal Government, the State of Nevada or its political subdivisions, or from any other source, for the purposes provided in this chapter. In developing and revising any state plan in connection with federal assistance for health programs, the Department shall consider, without limitation, the amount of money available from the Federal Government for those programs, the conditions attached to the acceptance of that money and the limitations of legislative appropriations for those programs.
  - 3. Except as otherwise provided in NRS 576.128, the State Board of Health may set reasonable fees for the:
  - (a) Licensing, registering, certifying, inspecting or granting of permits for any facility, establishment or service regulated by the Health Division;
    - (b) Programs and services of the [Health] Division;
    - (c) Review of plans; and
    - (d) Certification and licensing of personnel.





Fees set pursuant to this subsection must be calculated to produce for that period the revenue from the fees projected in the budget approved for the [Health] Division by the Legislature.

**Sec. 72.** NRS 439.2794 is hereby amended to read as follows: 439.2794

1. The [Health] Division may:

- (a) Enter into contracts for any services necessary to carry out or assist the [Health] Division in carrying out the provisions of NRS 439.271 to 439.2794, inclusive, with public or private entities that have the appropriate expertise to provide such services;
- (b) Apply for and accept any gift, donation, bequest, grant or other source of money to carry out the provisions of NRS 439.271 to 439.2794, inclusive;
- (c) Apply for any waiver from the Federal Government that may be necessary to maximize the amount of money this State may obtain from the Federal Government to carry out the provisions of NRS 439.271 to 439.2794, inclusive; and
- (d) Adopt regulations as necessary to carry out and administer the Program.
- 2. Any money that is accepted by the [Health] Division pursuant to subsection 1 must be deposited in the State Treasury and accounted for separately in the State General Fund.
- 3. The Administrator shall administer the account created pursuant to subsection 2. Money in the account does not lapse to the State General Fund at the end of the fiscal year. The interest and income earned on the money in the account must be credited to the account. Any claims against the account must be paid as other claims against the State are paid.
  - Sec. 73. NRS 439.340 is hereby amended to read as follows:
- 439.340 The county board of health shall be subject to the supervision of the [Health] Division, and shall make such reports to the [Health] Division as the State Board of Health may require.
  - Sec. 74. NRS 439.4905 is hereby amended to read as follows:
- 439.4905 1. Unless an exemption is approved pursuant to subsection 3, each county shall pay an assessment to the [Health] Division, in an amount determined by the [Health] Division, for the costs of services provided in that county by the [Health] Division or by the State Health Officer, including, without limitation, services provided pursuant to this chapter and chapters 441A, 444, 446 and 583 of NRS and the regulations adopted pursuant to those chapters, regardless of whether the county has a local health authority.
- 2. Each county shall pay the assessment to the [Health] Division in quarterly installments that are due on the first day of the first month of each calendar quarter.
- 3. A county may submit a proposal to the Governor for the county to carry out the services that would otherwise be provided by





the **Health** Division or the State Health Officer pursuant to this chapter and chapters 441A, 444, 446 and 583 of NRS and the regulations adopted pursuant to those chapters. If the Governor approves the proposal, the Governor shall submit a recommendation 5 to the Interim Finance Committee to exempt the county from the assessment required pursuant to subsection 1. The Interim Finance Committee, upon receiving the recommendation from the Governor, shall consider the proposal and determine whether to approve the exemption. In considering whether to approve the exemption, the Interim Finance Committee shall consider, among other things, 10 11 the best interests of the State, the effect of the exemption and the 12 intent of the Legislature in requiring the assessment to be paid by 13 each county. 14

- 4. An exemption that is approved by the Interim Finance Committee pursuant to subsection 3 must not become effective until at least 6 months after that approval.
- 5. A county that receives approval pursuant to subsection 3 to carry out the services that would otherwise be provided by the [Health] Division or the State Health Officer pursuant to this chapter and chapters 441A, 444, 446 and 583 of NRS and the regulations adopted pursuant to those chapters shall carry out those services in the manner set forth in those chapters and regulations.
- 6. The [Health] Division may adopt such regulations as necessary to carry out the provisions of this section.
  - Sec. 75. NRS 439.494 is hereby amended to read as follows:

439.494 1. The [Health] Division may:

- (a) Enter into contracts for any service necessary to carry out the provisions of NRS 439.491 to 439.494, inclusive; and
- (b) Apply for and accept gifts, grants, donations and bequests from any source to carry out the provisions of NRS 439.491 to 439.494, inclusive.
- 2. Any money collected pursuant to subsection 1 and any money appropriated to carry out the provisions of NRS 439.491 to 439.494, inclusive:
- (a) Must be deposited in the State Treasury and accounted for separately in the State General Fund; and
- (b) Except as otherwise provided by the terms of a specific gift, grant, donation or bequest, must only be expended to carry out the provisions of NRS 439.491 to 439.494, inclusive.
- 3. The Administrator shall administer the account. Any interest or income earned on the money in the account must be credited to the account.
- 4. Any claims against the account must be paid as other claims against the State are paid.



15

16

17

18

19

20 21

22

23 24

25

26 27

28

29

30

31

32

33

34

35

36

37

38

39 40

41

42 43



**Sec. 76.** NRS 439.507 is hereby amended to read as follows: 439.507

1. The [Health] Division may:

- (a) Within the limitations of available funding, enter into contracts for any services necessary to carry out or assist the [Health] Division in carrying out NRS 439.501 to 439.507, inclusive, with public or private entities that have the appropriate expertise to provide such services;
- (b) Apply for and accept any gift, donation, bequest, grant or other source of money to carry out the provisions of NRS 439.501 to 439.507, inclusive; and
- (c) Apply for any waiver from the Federal Government that may be necessary to maximize the amount of money this state may obtain from the Federal Government to carry out the provisions of NRS 439.501 to 439.507, inclusive.
- 2. Any money that is appropriated to carry out the provisions of NRS 439.501 to 439.507, inclusive:
- (a) Must be deposited in the State Treasury and accounted for separately in the State General Fund; and
  - (b) May only be used to carry out those provisions.
- 3. The Administrator shall administer the account. Any interest or income earned on the money in the account must be credited to the account. Any claims against the account must be paid as other claims against the State are paid.
  - Sec. 77. NRS 439.527 is hereby amended to read as follows:
- 439.527 1. There is hereby created the Committee on Co-Occurring Disorders. The Committee consists of:
- (a) The Administrator, <del>[of the Division of Mental Health and Developmental Services of the Department,]</del> who is an ex officio member of the Committee; and
  - (b) Fourteen members appointed by the Governor.
  - 2. The Governor shall appoint to the Committee:
- (a) One member who is a psychiatrist licensed to practice medicine in this State and certified by the American Board of Psychiatry and Neurology;
- (b) One member who is a physician licensed pursuant to chapter 630 or 633 of NRS who is certified as an addictionologist by the American Society of Addiction Medicine;
- (c) One member who is a psychologist licensed to practice in this State;
- 40 (d) One member who is licensed as a marriage and family 41 therapist in this State;
- 42 (e) One member who is licensed as a clinical social worker in this State:
  - (f) One member who is a district judge in this State;





- (g) One member who is a representative of the Nevada System of Higher Education;
- (h) One member who is a representative of a state or local criminal justice agency;
- (i) One member who is a representative of a hospital or mental health facility in this State;
- (j) One member who is a member of the Nevada Mental Health Planning Advisory Council;
- (k) One member who is a representative of a program relating to mental health and the treatment of the abuse of alcohol or drugs in this State;
- (l) One member who is a policy analyst in the field of mental health, substance abuse or criminal justice;
- (m) One member who is a representative of persons who have used services relating to mental health, substance abuse or criminal justice in this State; and
- (n) One member who is an immediate family member of a person who has used services relating to mental health, substance abuse or criminal justice in this State.
- 3. The members of the Committee shall elect a Chair and Vice Chair by a majority vote. After the initial election, the Chair and Vice Chair shall hold office for a term of 1 year beginning on October 1 of each year. If a vacancy occurs in the office of the Chair, the members of the Committee shall elect a Chair from among its members for the remainder of the unexpired term.
- 4. After the initial terms, each member of the Committee who is appointed serves for a term of 4 years. A member may be reappointed.
- 5. A vacancy on the Committee must be filled in the same manner as the original appointment.
  - 6. Each member of the Committee:
  - (a) Serves without compensation; and
  - (b) While engaged in the business of the Committee, is entitled to receive the per diem allowance and travel expenses provided for state officers and employees generally.
    - 7. Each member of the Committee who is an officer or employee of the State or a local government must be relieved from his or her duties without loss of his or her regular compensation to prepare for and attend meetings of the Committee and perform any work necessary to carry out the duties of the Committee in the most timely manner practicable. A state agency or local government shall not require an officer or employee who is a member of the Committee to make up the time the member is absent from work to carry out his or her duties as a member, and shall not require the





member to take annual vacation or compensatory time for the absence.

- 8. The members of the Committee shall meet at least quarterly and at the times and places specified by a call of the Chair or a majority of the members of the Committee.
- 9. Eight members of the Committee constitute a quorum. The affirmative vote of a majority of the Committee members present is sufficient for any action of the Committee.

**Sec. 78.** NRS 439.570 is hereby amended to read as follows:

- 439.570 1. When the health authority deems it necessary, the health authority shall report cases of violation of any of the provisions of this chapter or of provisions of law requiring the immunization of children in public schools, private schools and child care facilities, to the district attorney of the county, with a statement of the facts and circumstances. When any such case is reported to the district attorney by the health authority, the district attorney shall forthwith initiate and promptly follow up the necessary court proceedings against the person or corporation responsible for the alleged violation of law.
- 2. Upon request of the [Health] Division, the Attorney General shall assist in the enforcement of the provisions of this chapter and provisions of law requiring the immunization of children in public schools, private schools and child care facilities.

**Sec. 79.** NRS 439.580 is hereby amended to read as follows:

- 439.580 1. Any local health officer or a deputy of a local health officer who neglects or fails to enforce the provisions of this chapter in his or her jurisdiction, or neglects or refuses to perform any of the duties imposed upon him or her by this chapter or by the instructions and directions of the [Health] Division shall be punished by a fine of not more than \$250.
- 2. Each person who violates any of the provisions of this chapter or refuses or neglects to obey any lawful order, rule or regulation of the:
- (a) State Board of Health or violates any rule or regulation approved by the State Board of Health pursuant to NRS 439.350, 439.366, 439.410 and 439.460; or
- (b) Director adopted pursuant to NRS 439.538 or 439.581 to 439.595, inclusive,
- 39 → is guilty of a misdemeanor.

Sec. 80. NRS 439.885 is hereby amended to read as follows:

439.885 1. If a medical facility:

(a) Commits a violation of any provision of NRS 439.800 to 439.890, inclusive, or for any violation for which an administrative sanction pursuant to NRS 449.163 would otherwise be applicable; and





- (b) Of its own volition, reports the violation to the Administrator,
  - ⇒ such a violation must not be used as the basis for imposing an administrative sanction pursuant to NRS 449.163.
  - 2. If a medical facility commits a violation of any provision of NRS 439.800 to 439.890, inclusive, and does not, of its own volition, report the violation to the Administrator, the [Health] Division may, in accordance with the provisions of subsection 3, impose an administrative sanction:
  - (a) For failure to report a sentinel event, in an amount not to exceed \$100 per day for each day after the date on which the sentinel event was required to be reported pursuant to NRS 439.835;
  - (b) For failure to adopt and implement a patient safety plan pursuant to NRS 439.865, in an amount not to exceed \$1,000 for each month in which a patient safety plan was not in effect; and
  - (c) For failure to establish a patient safety committee or failure of such a committee to meet pursuant to the requirements of NRS 439.875, in an amount not to exceed \$2,000 for each violation of that section.
  - 3. Before the [Health] Division imposes an administrative sanction pursuant to subsection 2, the [Health] Division shall provide the medical facility with reasonable notice. The notice must contain the legal authority, jurisdiction and reasons for the action to be taken. If a medical facility wants to contest the action, the facility may file an appeal pursuant to the regulations of the State Board of Health adopted pursuant to NRS 449.165 and 449.170. Upon receiving notice of an appeal, the [Health] Division shall hold a hearing in accordance with those regulations.
  - 4. An administrative sanction collected pursuant to this section must be accounted for separately and used by the [Health] Division to provide training and education to employees of the [Health] Division, employees of medical facilities and members of the general public regarding issues relating to the provision of quality and safe health care.
- **Sec. 81.** Chapter 439A of NRS is hereby amended by adding thereto a new section to read as follows:
- "Division" means the Division of Public and Behavioral Health of the Department.
- **Sec. 82.** NRS 439A.100 is hereby amended to read as follows: 439A.100 1. Except as otherwise provided in this section, in a county whose population is less than 100,000, no person may undertake any proposed expenditure for new construction by or on behalf of a health facility in excess of the greater of \$2,000,000 or such an amount as the Department may specify by regulation, which under generally accepted accounting principles consistently applied





is a capital expenditure, without first applying for and obtaining the written approval of the Director. The [Health] Division of Public and Behavioral Health of the Department shall not issue a new license or alter an existing license for such a project unless the Director has issued such an approval.

- 2. The provisions of subsection 1 do not apply to:
- (a) Any capital expenditure for:

5

6

7

8

10

11 12

13

14

15

16

17

18

19

20 21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

38

39

40

41

42

43

- (1) The acquisition of land;
- (2) The construction of a facility for parking;
- (3) The maintenance of a health facility;
- (4) The renovation of a health facility to comply with standards for safety, licensure, certification or accreditation;
  - (5) The installation of a system to conserve energy;
- (6) The installation of a system for data processing or communication; or
- (7) Any other project which, in the opinion of the Director, does not relate directly to the provision of any health service;
- (b) Any project for the development of a health facility that has received legislative approval and authorization; or
- (c) A project for the construction of a hospital in an unincorporated town if:
- (1) The population of the unincorporated town is more than 24,000;
  - (2) No other hospital exists in the town;
- (3) No other hospital has been approved for construction or qualified for an exemption from approval for construction in the town pursuant to this section; and
- (4) The unincorporated town is at least a 45-minute drive from the nearest center for the treatment of trauma that is licensed by the [Health] Division of Public and Behavioral Health of the Department.
- → Upon determining that a project satisfies the requirements for an exemption pursuant to this subsection, the Director shall issue a certificate which states that the project is exempt from the requirements of this section.
  - 3. In reviewing an application for approval, the Director shall:
- (a) Comparatively assess applications for similar projects affecting the same geographic area; and
- (b) Base his or her decision on criteria established by the Director by regulation. The criteria must include:
- (1) The need for and the appropriateness of the project in the area to be served;
  - (2) The financial feasibility of the project;
  - (3) The effect of the project on the cost of health care; and





- (4) The extent to which the project is consistent with the purposes set forth in NRS 439A.020 and the priorities set forth in NRS 439A.081.
- 4. The Department may by regulation require additional approval for a proposed change to a project which has previously been approved if the proposal would result in a change in the location of the project or a substantial increase in the cost of the project.
- 5. The decision of the Director is a final decision for the purposes of judicial review.
- 6. As used in this section, "hospital" has the meaning ascribed to it in NRS 449.012.
- **Sec. 83.** NRS 439A.130 is hereby amended to read as follows: 439A.130 As used in NRS 439A.130 to 439A.185, inclusive, *and section 81 of this act*, the words and terms defined in NRS 439A.135 to 439A.165, inclusive, *and section 81 of this act* have the meanings ascribed to them in those sections.
- **Sec. 84.** NRS 439A.135 is hereby amended to read as follows: 439A.135 "Administrator" means the Administrator of the **[Health]** Division.
  - **Sec. 85.** NRS 439B.410 is hereby amended to read as follows:
- 439B.410 1. Except as otherwise provided in subsection 4, each hospital in this State has an obligation to provide emergency services and care, including care provided by physicians and nurses, and to admit a patient where appropriate, regardless of the financial status of the patient.
- 2. Except as otherwise provided in subsection 4, it is unlawful for a hospital or a physician working in a hospital emergency room to:
- (a) Refuse to accept or treat a patient in need of emergency services and care; or
- (b) Except when medically necessary in the judgment of the attending physician:
- (1) Transfer a patient to another hospital or health facility unless, as documented in the patient's records:
- (I) A determination has been made that the patient is medically fit for transfer;
- (II) Consent to the transfer has been given by the receiving physician, hospital or health facility;
- (III) The patient has been provided with an explanation of the need for the transfer; and
- (IV) Consent to the transfer has been given by the patient or the patient's legal representative; or





- (2) Provide a patient with orders for testing at another hospital or health facility when the hospital from which the orders are issued is capable of providing that testing.
- 3. A physician, hospital or other health facility which treats a patient as a result of a violation of subsection 2 by a hospital or a physician working in the hospital is entitled to recover from that hospital an amount equal to three times the charges for the treatment provided that was billed by the physician, hospital or other health facility which provided the treatment, plus reasonable attorney's fees and costs.
- 4. This section does not prohibit the transfer of a patient from one hospital to another:
- (a) When the patient is covered by an insurance policy or other contractual arrangement which provides for payment at the receiving hospital;
- (b) After the county responsible for payment for the care of an indigent patient has exhausted the money which may be appropriated for that purpose pursuant to NRS 428.050, 428.285 and 450.425; or
- (c) When the hospital cannot provide the services needed by the patient.
- No transfer may be made pursuant to this subsection until the patient's condition has been stabilized to a degree that allows the transfer without an additional risk to the patient.
  - 5. As used in this section:
- (a) "Emergency services and care" means medical screening, examination and evaluation by a physician or, to the extent permitted by a specific statute, by a person under the supervision of a physician, to determine if an emergency medical condition or active labor exists and, if it does, the care, treatment and surgery by a physician necessary to relieve or eliminate the emergency medical condition or active labor, within the capability of the hospital. As used in this paragraph:
- (1) "Active labor" means, in relation to childbirth, labor that occurs when:
- (I) There is inadequate time before delivery to transfer the patient safely to another hospital; or
- (II) A transfer may pose a threat to the health and safety of the patient or the unborn child.
- (2) "Emergency medical condition" means the presence of acute symptoms of sufficient severity, including severe pain, such that the absence of immediate medical attention could reasonably be expected to result in:
  - (I) Placing the health of the patient in serious jeopardy;
  - (II) Serious impairment of bodily functions; or





- (III) Serious dysfunction of any bodily organ or part.
- (b) "Medically fit" means that the condition of the patient has been sufficiently stabilized so that the patient may be safely transported to another hospital, or is such that, in the determination of the attending physician, the transfer of the patient constitutes an acceptable risk. Such a determination must be based upon the condition of the patient, the expected benefits, if any, to the patient resulting from the transfer and whether the risks to the patient's health are outweighed by the expected benefits, and must be documented in the patient's records before the transfer.
- 6. If an allegation of a violation of the provisions of subsection 2 is made against a hospital licensed pursuant to the provisions of chapter 449 of NRS, the [Health] Division of Public and Behavioral Health of the Department shall conduct an investigation of the alleged violation. Such a violation, in addition to any criminal penalties that may be imposed, constitutes grounds for the denial, suspension or revocation of such a license, or for the imposition of any sanction prescribed by NRS 449.163.
- 7. If an allegation of a violation of the provisions of subsection 2 is made against:
- (a) A physician licensed to practice medicine pursuant to the provisions of chapter 630 of NRS, the Board of Medical Examiners shall conduct an investigation of the alleged violation. Such a violation, in addition to any criminal penalties that may be imposed, constitutes grounds for initiating disciplinary action or denying licensure pursuant to the provisions of subsection 3 of NRS 630.3065.
- (b) An osteopathic physician licensed to practice osteopathic medicine pursuant to the provisions of chapter 633 of NRS, the State Board of Osteopathic Medicine shall conduct an investigation of the alleged violation. Such a violation, in addition to any criminal penalties that may be imposed, constitutes grounds for initiating disciplinary action pursuant to the provisions of subsection 1 of NRS 633.131.
  - **Sec. 86.** NRS 440.110 is hereby amended to read as follows:
- 440.110 The Administrator of the [Health] Division of Public and Behavioral Health of the Department of Health and Human Services is the State Registrar of Vital Statistics.
  - **Sec. 87.** NRS 441A.140 is hereby amended to read as follows: 441A.140 The [Health] Division of Public and Behavioral Health of the Department of Health and Human Services may receive any financial aid made available by any grant or other source and shall use the aid, in cooperation with the health authority, to carry out the provisions of this chapter.





**Sec. 88.** Chapter 442 of NRS is hereby amended by adding thereto the provisions set forth as sections 89 and 90 of this act.

Sec. 89. As used in this section and NRS 442.740, 442.750 and 442.770 and section 90 of this act, unless the context otherwise requires, the words and terms defined in NRS 442.740 and section 90 of this act, have the meanings ascribed to them in those sections.

Sec. 90. "Division" means the Aging and Disability Services Division of the Department of Health and Human Services.

**Sec. 91.** NRS 442.003 is hereby amended to read as follows:

442.003 As used in [this chapter,] NRS 442.003 to 442.700, inclusive, unless the context requires otherwise:

- 1. "Advisory Board" means the Advisory Board on Maternal and Child Health.
- 2. "Department" means the Department of Health and Human Services.
  - 3. "Director" means the Director of the Department.
- 4. "Division" means the Division of Public and Behavioral Health of the Department.
  - 5. "Fetal alcohol syndrome" includes fetal alcohol effects.
  - [5. "Health Division" means the Health Division of the Department.]
- 6. "Laboratory" has the meaning ascribed to it in NRS 652.040.
- 7. "Obstetric center" has the meaning ascribed to it in NRS 449.0155.
  - 8. "Provider of health care or other services" means:
- (a) A clinical alcohol and drug abuse counselor who is licensed, or an alcohol and drug abuse counselor who is licensed or certified, pursuant to chapter 641C of NRS;
- (b) A physician or a physician assistant who is licensed pursuant to chapter 630 or 633 of NRS and who practices in the area of obstetrics and gynecology, family practice, internal medicine, pediatrics or psychiatry;
  - (c) A licensed nurse;
  - (d) A licensed psychologist;
  - (e) A licensed marriage and family therapist;
- 38 (f) A licensed clinical professional counselor;
- 39 (g) A licensed social worker;
  - (h) A licensed dietitian; or
    - (i) The holder of a certificate of registration as a pharmacist.
- Sec. 92. NRS 442.005 is hereby amended to read as follows:
- 43 442.005 The State Health Officer and the [Health] Division 44 shall administer the provisions of [this chapter] NRS 442.003 to
- 45 **442.700, inclusive,** in accordance with the regulations of the State



2

3

4

5

7

8

10

11

12

13

14

15 16

17

18

19

20

21 22

23

24

25

26 27

28 29

30

31

32

33

34 35

36

37

40



Board of Health and subject to administrative supervision by the Director.

**Sec. 93.** NRS 442.009 is hereby amended to read as follows:

- 442.009 1. Except as otherwise provided in this section, if the State Board of Health requires the [Health] Division to provide for the services of a laboratory to determine the presence of certain preventable or inheritable disorders in an infant pursuant to NRS 442.008, the [Health] Division shall contract with a laboratory in the following order of priority:
  - (a) The State Public Health Laboratory;
  - (b) Any other qualified laboratory located within this State; or
  - (c) Any qualified laboratory located outside of this State.
- 2. The [Health] Division shall not contract with a laboratory in a lower category of priority unless the [Health] Division determines that:
- (a) A laboratory in a higher category of priority is not capable of performing all the tests required to determine the presence of certain preventable or inheritable disorders in an infant pursuant to NRS 442.008; or
- (b) The cost to the [Health] Division to contract with a laboratory in a higher category of priority is not financially reasonable or exceeds the amount of money available for that purpose.
- 3. For the purpose of determining the category of priority of a laboratory only, the [Health] Division is not required to comply with any requirement of competitive bidding or other restriction imposed on the procedure for awarding a contract.
  - **Sec. 94.** NRS 442.120 is hereby amended to read as follows:
- 442.120 The Department is hereby designated as the agency of this State to cooperate, through the [Health] Division, with the duly constituted federal authorities in the administration of those parts of the Social Security Act which relate to the maternal and child health services and the care and treatment of children with special health care needs, and is authorized to receive and expend all funds made available to the Department by the Federal Government, the State or its political subdivisions, or from any other source for the purposes provided in [this chapter.] NRS 442.003 to 442.700, inclusive.
  - Sec. 95. NRS 442.160 is hereby amended to read as follows:
- 442.160 1. The Administrator of the [Health] Division is the administrative officer of the [Health] Division with respect to the administration and enforcement of:
  - (a) The provisions of NRS 442.130 to 442.170, inclusive;
- (b) The plan formulated and adopted for the purposes of NRS 442.130 to 442.170, inclusive; and





- (c) All regulations necessary thereto and adopted by the State Board of Health.
- 2. The Administrator shall administer and enforce all regulations adopted by the State Board of Health for the efficient operation of the plan formulated by the State Board of Health and the [Health] Division for the purposes of NRS 442.130 to 442.170, inclusive.
  - 3. The Administrator shall:

- (a) Maintain his or her office in Carson City, Nevada, or elsewhere in the State as directed by the Director.
- (b) Keep in his or her office all records, reports, papers, books and documents pertaining to the subjects of NRS 442.130 to 442.170, inclusive.
- (c) If directed by the terms of the plan or by the Director, provide such medical, surgical or other services as are necessary to carry out the provisions of the plan and of NRS 442.130 to 442.170, inclusive.
- 4. The Administrator, with the assistance of the State Health Officer, shall make such reports, in such form and containing such information concerning the subjects of NRS 442.130 to 442.170, inclusive, as required by the Secretary of Health and Human Services.
- 5. The Administrator shall, in accordance with the rules and regulations of the Secretary of Health and Human Services and of the Secretary of the Treasury, requisition and cause to be deposited with the State Treasurer all money allotted to this State by the Federal Government for the purposes of NRS 442.130 to 442.170, inclusive. The Administrator shall cause to be paid out of the State Treasury the money deposited for the purposes of NRS 442.130 to 442.170, inclusive.
  - **Sec. 96.** NRS 442.210 is hereby amended to read as follows:
- 442.210 1. The Administrator of the [Health] Division shall administer and enforce the provisions of NRS 442.180 to 442.220, inclusive, and of the plan or plans formulated and adopted for the purposes of NRS 442.180 to 442.220, inclusive, and all regulations necessary thereto and adopted by the State Board of Health.
- 2. The Administrator shall administer and enforce all regulations adopted by the State Board of Health for the efficient operation of such plan or plans formulated by the State Board of Health and the [Health] Division for the purposes of NRS 442.180 to 442.220, inclusive.
- 3. The Administrator shall maintain his or her office in Carson City, Nevada, or elsewhere in the State as directed by the Director, and keep therein all records, reports, papers, books and documents pertaining to the subjects of NRS 442.180 to 442.220, inclusive. The





Administrator, when directed by the terms of any plan or plans perfected, or by the Director, shall provide in such places within the State such medical, surgical or other agency or agencies as may be necessary to carry out the provisions of such plan or plans and of NRS 442.180 to 442.220, inclusive. If the proper medical or surgical services cannot be had within the State for any child with special health care needs, the Secretary of the State Board of Health may provide for those services in some other state.

- 4. The Administrator shall, from time to time as directed by the Secretary of Health and Human Services, make reports, in such form and containing such information concerning the subjects of NRS 442.180 to 442.220, inclusive, as the Secretary of Health and Human Services requires.
- 5. The Administrator shall from time to time pursuant to the rules and regulations of the Secretary of Health and Human Services and of the Secretary of the Treasury, requisition and cause to be deposited with the State Treasurer all money allotted to this state by the Federal Government for the purposes of NRS 442.180 to 442.220, inclusive. The Administrator shall cause to be paid out of the State Treasury the money therein deposited for the purposes of NRS 442.180 to 442.220, inclusive.

**Sec. 97.** NRS 442.260 is hereby amended to read as follows:

- 442.260 1. The [Health] Division shall adopt and enforce regulations governing the conditions under and the methods by which abortions may be performed, the reasonable minimum qualifications of a person authorized to provide the information required in NRS 442.253, as well as all other aspects pertaining to the performance of abortions pursuant to NRS 442.250.
- 2. The [Health] Division shall adopt and enforce regulations for a system for reporting abortions. This system must be designed to preserve confidentiality of information on the identity of women upon whom abortions are performed. The [Health] Division may require that the following items be reported for each abortion:
  - (a) The date of the abortion;
- 35 (b) The place of the abortion including the city, county and state:
  - (c) The type of facility;
- 38 (d) The usual residence of the woman, including the city, county 39 and state;
  - (e) Her age;
  - (f) Her ethnic group or race;
  - (g) Her marital status;
  - (h) The number of previous live births;
    - (i) The number of previous induced abortions;





- (j) The duration of her pregnancy, as measured from first day of last normal menses to date of abortion, and as estimated by uterine size prior to performance of the abortion;
  - (k) The type of abortion procedure; and

- (l) If a woman has had a previously induced abortion, the information in paragraphs (a) to (k), inclusive, or as much thereof as can be reasonably obtained, for each previous abortion.
- 3. The [Health] Division may adopt regulations to permit studies of individual cases of abortion, but these studies must not be permitted unless:
- (a) Absolute assurance is provided that confidentiality of information on the persons involved will be preserved;
- (b) Informed consent of each person involved in the study is obtained in writing;
- (c) The study is conducted according to established standards and ethics; and
- (d) The study is related to problems of health and has scientific merit with regard to both design and the importance of the problems to be solved.

**Sec. 98.** NRS 442.415 is hereby amended to read as follows:

442.415 The [Health] Division shall adopt regulations necessary to carry out the provisions of NRS 442.400, 442.405 and 442.410.

**Sec. 99.** NRS 442.740 is hereby amended to read as follows:

442.740 [As used in NRS 442.740 to 442.770, inclusive, "early] "Early intervention services" has the meaning ascribed to it in 20 U.S.C. § 1432.

**Sec. 100.** NRS 442.750 is hereby amended to read as follows:

- 442.750 1. The [Health] Division shall ensure that the personnel employed by the [Health] Division who provide early intervention services to children with autism spectrum disorders and the persons with whom the [Health] Division contracts to provide early intervention services to children with autism spectrum disorders possess the knowledge and skills necessary to serve children with autism spectrum disorders, including, without limitation:
- (a) The screening of a child for autism spectrum disorder at the age levels and frequency recommended by the American Academy of Pediatrics, or its successor organization;
- (b) The procedure for evaluating children who demonstrate behaviors that are consistent with autism spectrum disorders, which procedure must require the use of the statewide standard for measuring outcomes and assessing and evaluating persons with autism spectrum disorders through the age of 21 years prescribed pursuant to NRS 427A.872;





- (c) The procedure for enrolling a child in early intervention services upon determining that the child has autism spectrum disorder;
- (d) Methods of providing support to children with autism spectrum disorders and their families; and
- (e) The procedure for developing an individualized family service plan in accordance with Part C of the Individuals with Disabilities Education Act, 20 U.S.C. §§ 1431 et seq., or other appropriate plan for the child.
- 2. The [Health] Division shall ensure that the personnel employed by the [Health] Division to provide early intervention services to children with autism spectrum disorders and the persons with whom the [Health] Division contracts to provide early intervention services to children with autism spectrum disorders:
- (a) Possess the knowledge and understanding of the scientific research and support for the methods and approaches for serving children with autism spectrum disorders and the ability to recognize the difference between an approach or method that is scientifically validated and one that is not:
- (b) Possess the knowledge to accurately describe to parents and guardians the research supporting the methods and approaches, including, without limitation, the knowledge necessary to provide an explanation that a method or approach is experimental if it is not supported by scientific evidence;
- (c) Immediately notify a parent or legal guardian if a child is identified as being at risk for a diagnosis of autism spectrum disorder and refer the parent or legal guardian to the appropriate professionals for further evaluation and simultaneously refer the parent or legal guardian to any appropriate early intervention services and strategies; and
- (d) Provide the parent or legal guardian with information on evidence-based treatments and interventions that may assist the child in the child's development and advancement.
- 3. The [Health] Division shall ensure that the personnel employed by the [Health] Division who provide early intervention screenings to children and the persons with whom the [Health] Division contracts to provide early intervention screenings to children perform screenings of children for autism spectrum disorders at the age levels and frequency recommended by the American Academy of Pediatrics, or its successor organization.
  - 4. The [Health] Division shall ensure that:
- (a) For a child who may have autism spectrum disorder, the personnel employed by the [Health] Division who provide early intervention screenings to children and the persons with whom the [Health] Division contracts to provide early intervention screenings





to children use the protocol designated pursuant to NRS 427A.872 for determining whether a child has autism spectrum disorder.

- (b) An initial evaluation of the cognitive, communicative, social, emotional and behavioral condition and adaptive skill level of a child with autism spectrum disorder is conducted to determine the baseline of the child.
- (c) A subsequent evaluation is conducted upon the child's conclusion of the early intervention services to determine the progress made by the child from the time of his or her initial screening.

**Sec. 101.** NRS 442.770 is hereby amended to read as follows:

442.770 For an infant or toddler with a disability who has autism spectrum disorder and is eligible for early intervention services, the [Health] Division shall refer the infant or toddler to the Autism Treatment Assistance Program established by NRS 427A.875 and coordinate with the Program to develop a plan of treatment for the infant or toddler pursuant to that section.

**Sec. 102.** Chapter 444 of NRS is hereby amended by adding thereto a new section to read as follows:

As used in this chapter, "Division" means the Division of Public and Behavioral Health of the Department of Health and Human Services.

**Sec. 103.** NRS 444.330 is hereby amended to read as follows:

- 444.330 1. The [Health] Division has supervision over the sanitation, healthfulness, cleanliness and safety, as it pertains to the foregoing matters, of the following state institutions:
  - (a) Institutions and facilities of the Department of Corrections.
  - (b) Northern Nevada Adult Mental Health Services.
- (c) Nevada Youth Training Center, Caliente Youth Center and any other state facility for the detention of children that is operated pursuant to title 5 of NRS.
  - (d) Nevada System of Higher Education.
- 2. The State Board of Health may adopt regulations pertaining thereto as are necessary to promote properly the sanitation, healthfulness, cleanliness and, as it pertains to the foregoing matters, the safety of those institutions.
- 3. The State Health Officer or an authorized agent of the Officer shall inspect those institutions at least once each calendar year and whenever he or she deems an inspection necessary to carry out the provisions of this section. The inspection of any state facility for the detention of children that is operated pursuant to title 5 of NRS must include, without limitation, an inspection of all areas where food is prepared and served, bathrooms, areas used for sleeping, common areas and areas located outdoors that are used by children at the facility.





- 4. The State Health Officer shall publish reports of the inspections of any state facility for the detention of children that is operated pursuant to title 5 of NRS and may publish reports of the inspections of other state institutions.
- 5. All persons charged with the duty of maintenance and operation of the institutions named in this section shall operate the institutions in conformity with the regulations adopted by the State Board of Health pursuant to subsection 2.
- 6. The State Health Officer or an authorized agent of the Officer may, in carrying out the provisions of this section, enter upon any part of the premises of any of the institutions named in this section over which he or she has jurisdiction, to determine the sanitary conditions of the institutions and to determine whether the provisions of this section and the regulations of the State Board of Health pertaining thereto are being violated.

**Sec. 104.** NRS 445A.055 is hereby amended to read as follows:

- 445A.055 1. The State Board of Health shall adopt regulations requiring the fluoridation of all water delivered for human consumption in a county whose population is 700,000 or more by a:
- (a) Public water system that serves a population of 100,000 or more; or
  - (b) Water authority.

1 2

- 2. The regulations must include, without limitation:
- (a) The minimum and maximum permissible concentrations of fluoride to be maintained by such a public water system or a water authority, except that:
- (1) The minimum permissible concentration of fluoride must not be less than 0.7 parts per million; and
- (2) The maximum permissible concentration of fluoride must not exceed 1.2 parts per million;
- (b) The requirements and procedures for maintaining proper concentrations of fluoride, including any necessary equipment, testing, recordkeeping and reporting;
- (c) Requirements for the addition of fluoride to the water if the natural concentration of fluorides is lower than the minimum permissible concentration established pursuant to paragraph (a); and
- (d) Criteria pursuant to which the State Board of Health may exempt a public water system or water authority from the requirement of fluoridation upon the request of the public water system or water authority.
- 3. The State Board of Health shall not require the fluoridation of:
  - (a) The wells of a public water system or water authority if:





- (1) The groundwater production of the public water system or water authority is less than 15 percent of the total average annual water production of the system or authority for the years in which drought conditions are not prevalent; and
- (2) The wells are part of a combined regional and local system for the distribution of water that is served by a fluoridated source.
  - (b) A public water system or water authority:
- (1) During an emergency or period of routine maintenance, if the wells of the system or authority are exempt from fluoridation pursuant to paragraph (a) and the supplier of water determines that it is necessary to change the production of the system or authority from surface water to groundwater because of an emergency or for purposes of routine maintenance; or
- (2) If the natural water supply of the system or authority contains fluoride in a concentration that is at least equal to the minimum permissible concentration established pursuant to paragraph (a) of subsection 2.
- 4. The State Board of Health may make an exception to the minimum permissible concentration of fluoride to be maintained in a public water system or water authority based on:
  - (a) The climate of the regulated area;
- (b) The amount of processed water purchased by the residents of the regulated area; and
- (c) Any other factor that influences the amount of public water that is consumed by the residents of the regulated area.
- 5. The [Health] Division [of the Department of Health and Human Services] shall make reasonable efforts to secure any available sources of financial support, including, without limitation, grants from the Federal Government, for the enforcement of the standards established pursuant to this section and any related capital improvements.
- 6. A public water system or water authority may submit to the [Health] Division a claim for payment of the initial costs of the public water system or water authority to begin complying with the provisions of this section regardless of whether the public water system or water authority is required to comply with those provisions. The Administrator of the [Health] Division may approve such claims to the extent of legislative appropriations and any other money available for that purpose. Approved claims must be paid as other claims against the State are paid. The ongoing operational expenses of a public water system or water authority in complying with the provisions of this section are not compensable pursuant to this subsection.
  - 7 As used in this section:





- (a) "Division" means the Division of Public and Behavioral Health of the Department of Health and Human Services.
- **(b)** "Supplier of water" has the meaning ascribed to it in NRS 445A.845.

(b) (c) "Water authority" has the meaning ascribed to it in NRS 377B.040.

**Sec. 105.** NRS 446.050 is hereby amended to read as follows:

446.050 "Health authority" means the officers and agents of the [Health] Division of Public and Behavioral Health of the Department of Health and Human Services, or the officers and agents of the local boards of health.

**Sec. 106.** NRS 446.057 is hereby amended to read as follows:

446.057 "Potentially hazardous food" has the meaning ascribed to it in subpart 1-201 of the 1999 edition of the Food Code published by the Food and Drug Administration of the United States Department of Health and Human Services, unless the Administrator of the [Health] Division of Public and Behavioral Health of the Department of Health and Human Services has adopted a later edition of the Food Code for this purpose.

**Sec. 107.** Chapter 449 of NRS is hereby amended by adding thereto a new section to read as follows:

"Division" means the Division of Public and Behavioral Health of the Department of Health and Human Services.

Sec. 108. NRS 449.001 is hereby amended to read as follows:

449.001 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 449.0015 to 449.0195, inclusive, *and section 107 of this act* have the meanings ascribed to them in those sections.

**Sec. 109.** NRS 449.00455 is hereby amended to read as follows:

449.00455 "Facility for the treatment of abuse of alcohol or drugs" means any public or private establishment which provides residential treatment, including mental and physical restoration, of abusers of alcohol or drugs and which is certified by the Division of Mental Health and Developmental Services of the Department of Health and Human Services pursuant to subsection 4 of NRS 458.025. It does not include a medical facility or services offered by volunteers or voluntary organizations.

**Sec. 110.** NRS 449.0306 is hereby amended to read as follows:

449.0306 1. Money received from licensing medical facilities and facilities for the dependent must be forwarded to the State Treasurer for deposit in the State General Fund.

2. The [Health] Division shall enforce the provisions of NRS 449.030 to 449.245, inclusive, and may incur any necessary





expenses not in excess of money appropriated for that purpose by the State or received from the Federal Government.

**Sec. 111.** NRS 449.0307 is hereby amended to read as follows:

449.0307 The [Health] Division may:

- 1. Upon receipt of an application for a license, conduct an investigation into the premises, facilities, qualifications of personnel, methods of operation, policies and purposes of any person proposing to engage in the operation of a medical facility or a facility for the dependent. The facility is subject to inspection and approval as to standards for safety from fire, on behalf of the Health Division, by the State Fire Marshal.
- 2. Upon receipt of a complaint against a medical facility or facility for the dependent, except for a complaint concerning the cost of services, conduct an investigation into the premises, facilities, qualifications of personnel, methods of operation, policies, procedures and records of that facility or any other medical facility or facility for the dependent which may have information pertinent to the complaint.
- 3. Employ such professional, technical and clerical assistance as it deems necessary to carry out the provisions of NRS 449.030 to 449.245, inclusive.
- **Sec. 112.** NRS 449.0308 is hereby amended to read as follows:
- 449.0308 1. Except as otherwise provided in this section, the [Health] Division may charge and collect from a medical facility or facility for the dependent or a person who operates such a facility without a license issued by the [Health] Division the actual costs incurred by the [Health] Division for the enforcement of the provisions of NRS 449.030 to 449.240, inclusive, including, without limitation, the actual cost of conducting an inspection or investigation of the facility.
- 2. The [Health] Division shall not charge and collect the actual cost for enforcement pursuant to subsection 1 if the enforcement activity is:
- (a) Related to the issuance or renewal of a license for which the Board charges a fee pursuant to NRS 449.050 or 449.089; or
- (b) Conducted pursuant to an agreement with the Federal Government which has appropriated money for that purpose.
- 3. Any money collected pursuant to subsection 1 may be used by the [Health] Division to administer and carry out the provisions of NRS 449.030 to 449.240, inclusive, and the regulations adopted pursuant thereto.





**Sec. 113.** NRS 449.040 is hereby amended to read as follows:

449.040 Any person, state or local government or agency thereof desiring a license under the provisions of NRS 449.030 to 449.240, inclusive, must file with the [Health] Division an application on a form prescribed, prepared and furnished by the [Health] Division, containing:

- 1. The name of the applicant and, if a natural person, whether the applicant has attained the age of 21 years.
  - 2. The type of facility to be operated.
  - 3. The location of the facility.

- 4. In specific terms, the nature of services and type of care to be offered, as defined in the regulations.
- 5. The number of beds authorized by the Director of the Department of Health and Human Services or, if such authorization is not required, the number of beds the facility will contain.
  - 6. The name of the person in charge of the facility.
- 7. Such other information as may be required by the [Health] Division for the proper administration and enforcement of NRS 449.030 to 449.240, inclusive.
- 8. Evidence satisfactory to the [Health] Division that the applicant is of reputable and responsible character. If the applicant is a firm, association, organization, partnership, business trust, corporation or company, similar evidence must be submitted as to the members thereof, and the person in charge of the facility for which application is made. If the applicant is a political subdivision of the State or other governmental agency, similar evidence must be submitted as to the person in charge of the institution for which application is made.
- 9. Evidence satisfactory to the [Health] Division of the ability of the applicant to comply with the provisions of NRS 449.030 to 449.240, inclusive, and the standards and regulations adopted by the Board.
- 10. Evidence satisfactory to the [Health] Division that the facility conforms to the zoning regulations of the local government within which the facility will be operated or that the applicant has applied for an appropriate reclassification, variance, permit for special use or other exception for the facility.
- 11. If the facility to be licensed is a residential establishment as defined in NRS 278.02384, and if the residential establishment is subject to the distance requirements set forth in subsection 3 of NRS 278.02386, evidence satisfactory to the [Health] Division that the residential establishment will be located and operated in accordance with the provisions of that subsection.





**Sec. 114.** NRS 449.050 is hereby amended to read as follows:

449.050 1. Each application for a license must be accompanied by such fee as may be determined by regulation of the Board. The Board may, by regulation, allow or require payment of a fee for a license in installments and may fix the amount of each payment and the date that the payment is due.

2. The fee imposed by the Board for a facility for transitional living for released offenders must be based on the type of facility that is being licensed and must be calculated to produce the revenue estimated to cover the costs related to the license, but in no case may a fee for a license exceed the actual cost to the [Health] Division of issuing or renewing the license.

3. If an application for a license for a facility for transitional living for released offenders is denied, any amount of the fee paid pursuant to this section that exceeds the expenses and costs incurred by the [Health] Division must be refunded to the applicant.

**Sec. 115.** NRS 449.065 is hereby amended to read as follows:

- 449.065 1. Except as otherwise provided in subsections 6 and 7 and NRS 449.067, each facility for intermediate care, facility for skilled nursing, residential facility for groups, home for individual residential care, agency to provide personal care services in the home and agency to provide nursing in the home shall, when applying for a license or renewing a license, file with the Administrator of the [Health] Division a surety bond:
- 25 (a) If the facility, agency or home employs less than 7 26 employees, in the amount of \$5,000;
  - (b) If the facility, agency or home employs at least 7 but not more than 25 employees, in the amount of \$25,000; or
  - (c) If the facility, agency or home employs more than 25 employees, in the amount of \$50,000.
  - 2. A bond filed pursuant to this section must be executed by the facility, agency or home as principal and by a surety company as surety. The bond must be payable to the Aging and Disability Services Division of the Department of Health and Human Services and must be conditioned to provide indemnification to an older patient who the Specialist for the Rights of Elderly Persons determines has suffered property damage as a result of any act or failure to act by the facility, agency or home to protect the property of the older patient.
  - 3. Except when a surety is released, the surety bond must cover the period of the initial license to operate or the period of the renewal, as appropriate.
  - 4. A surety on any bond filed pursuant to this section may be released after the surety gives 30 days' written notice to the Administrator of the [Health] Division, but the release does not





discharge or otherwise affect any claim filed by an older patient for property damaged as a result of any act or failure to act by the facility, agency or home to protect the property of the older patient

alleged to have occurred while the bond was in effect.

A license is suspended by operation of law when the facility, agency or home is no longer covered by a surety bond as required by this section or by a substitute for the surety bond pursuant to NRS 449.067. The Administrator of the [Health] Division shall give the facility, agency or home at least 20 days' written notice before the release of the surety or the substitute for the surety, to the effect that the license will be suspended by operation of law until another surety bond or substitute for the surety bond is filed in the same manner and amount as the bond or substitute being terminated.

- The Administrator of the [Health] Division may exempt a residential facility for groups or a home for individual residential care from the requirement of filing a surety bond pursuant to this section if the Administrator determines that the requirement would result in undue hardship to the residential facility for groups or home for individual residential care.
- The requirement of filing a surety bond set forth in this section does not apply to a facility for intermediate care, facility for skilled nursing, residential facility for groups, home for individual residential care, agency to provide personal care services in the home or agency to provide nursing in the home that is operated and maintained by the State of Nevada or an agency thereof.
- As used in this section, "older patient" means a patient who is 60 years of age or older.
  - **Sec. 116.** NRS 449.160 is hereby amended to read as follows:
- 1. The [Health] Division may deny an application 449.160 for a license or may suspend or revoke any license issued under the provisions of NRS 449.030 to 449.240, inclusive, upon any of the following grounds:
- (a) Violation by the applicant or the licensee of any of the provisions of NRS 439B.410 or 449.030 to 449.245, inclusive, or of any other law of this State or of the standards, rules and regulations adopted thereunder.
- (b) Aiding, abetting or permitting the commission of any illegal act.
- (c) Conduct inimical to the public health, morals, welfare and safety of the people of the State of Nevada in the maintenance and operation of the premises for which a license is issued.
- (d) Conduct or practice detrimental to the health or safety of the occupants or employees of the facility.
- (e) Failure of the applicant to obtain written approval from the Director of the Department of Health and Human Services as



3

4 5

6

10 11

12

13

14

15

16

17

18

19

20 21

22

23 24

25

26 27

28

29

30

31

32

33

34 35

36

37

38

39

40

41

42

43

44



required by NRS 439A.100 or as provided in any regulation adopted pursuant to this chapter, if such approval is required.

(f) Failure to comply with the provisions of NRS 449.2486.

- 2. In addition to the provisions of subsection 1, the [Health] Division may revoke a license to operate a facility for the dependent if, with respect to that facility, the licensee that operates the facility, or an agent or employee of the licensee:
- (a) Is convicted of violating any of the provisions of NRS 202.470;
- (b) Is ordered to but fails to abate a nuisance pursuant to NRS 244.360, 244.3603 or 268.4124; or
  - (c) Is ordered by the appropriate governmental agency to correct a violation of a building, safety or health code or regulation but fails to correct the violation.
  - 3. The [Health] Division shall maintain a log of any complaints that it receives relating to activities for which the [Health] Division may revoke the license to operate a facility for the dependent pursuant to subsection 2. The [Health] Division shall provide to a facility for the care of adults during the day:
  - (a) A summary of a complaint against the facility if the investigation of the complaint by the [Health] Division either substantiates the complaint or is inconclusive;
- (b) A report of any investigation conducted with respect to the complaint; and
  - (c) A report of any disciplinary action taken against the facility.
- → The facility shall make the information available to the public pursuant to NRS 449.2486.
- 4. On or before February 1 of each odd-numbered year, the **Health!** Division shall submit to the Director of the Legislative Counsel Bureau a written report setting forth, for the previous biennium:
- (a) Any complaints included in the log maintained by the [Health] Division pursuant to subsection 3; and
- (b) Any disciplinary actions taken by the [Health] Division pursuant to subsection 2.
  - **Sec. 117.** NRS 449.163 is hereby amended to read as follows:
- 449.163 1. In addition to the payment of the amount required by NRS 449.0308, if a medical facility or facility for the dependent violates any provision related to its licensure, including any provision of NRS 439B.410 or 449.030 to 449.240, inclusive, or any condition, standard or regulation adopted by the Board, the [Health] Division, in accordance with the regulations adopted pursuant to NRS 449.165, may:
- (a) Prohibit the facility from admitting any patient until it determines that the facility has corrected the violation;





- (b) Limit the occupancy of the facility to the number of beds occupied when the violation occurred, until it determines that the facility has corrected the violation;
- (c) If the license of the facility limits the occupancy of the facility and the facility has exceeded the approved occupancy, require the facility, at its own expense, to move patients to another facility that is licensed;
- (d) Impose an administrative penalty of not more than \$1,000 per day for each violation, together with interest thereon at a rate not to exceed 10 percent per annum; and
- (e) Appoint temporary management to oversee the operation of the facility and to ensure the health and safety of the patients of the facility, until:
- (1) It determines that the facility has corrected the violation and has management which is capable of ensuring continued compliance with the applicable statutes, conditions, standards and regulations; or
  - (2) Improvements are made to correct the violation.
- 2. If a violation by a medical facility or facility for the dependent relates to the health or safety of a patient, an administrative penalty imposed pursuant to paragraph (d) of subsection 1 must be in a total amount of not less than \$1,000 and not more than \$10,000 for each patient who was harmed or at risk of harm as a result of the violation.
- 3. If the facility fails to pay any administrative penalty imposed pursuant to paragraph (d) of subsection 1, the [Health] Division may:
- (a) Suspend the license of the facility until the administrative penalty is paid; and
- (b) Collect court costs, reasonable attorney's fees and other costs incurred to collect the administrative penalty.
- 4. The [Health] Division may require any facility that violates any provision of NRS 439B.410 or 449.030 to 449.240, inclusive, or any condition, standard or regulation adopted by the Board to make any improvements necessary to correct the violation.
- 5. Any money collected as administrative penalties pursuant to paragraph (d) of subsection 1 must be accounted for separately and used to administer and carry out the provisions of this chapter and to protect the health, safety, well-being and property of the patients and residents of facilities in accordance with applicable state and federal standards.
  - **Sec. 118.** NRS 449.201 is hereby amended to read as follows:
- 449.201 Each alcohol and drug abuse program operated or provided by a facility for transitional living for released offenders must be certified by the Division [of Mental Health and





Developmental Services of the Department of Health and Human Services in accordance with the requirements set forth in chapter 458 of NRS and any regulations adopted pursuant thereto. As used in this section, "alcohol and drug abuse program" has the meaning ascribed to it in NRS 458.010.

**Sec. 119.** NRS 449.210 is hereby amended to read as follows:

449.210 1. In addition to the payment of the amount required by NRS 449.0308, except as otherwise provided in subsection 2 and NRS 449.24897, a person who operates a medical facility or facility for the dependent without a license issued by the [Health] Division is guilty of a misdemeanor.

- 2. In addition to the payment of the amount required by NRS 449.0308, if a person operates a residential facility for groups or a home for individual residential care without a license issued by the Health Division, the Health Division shall:
- (a) Impose a civil penalty on the operator in the following amount:
  - (1) For a first offense, \$10,000.
  - (2) For a second offense, \$25,000.
  - (3) For a third or subsequent offense, \$50,000.
- (b) Order the operator, at the operator's own expense, to move all of the persons who are receiving services in the residential facility for groups or home for individual residential care to a residential facility for groups or home for individual residential care, as applicable, that is licensed.
- (c) Prohibit the operator from applying for a license to operate a residential facility for groups or home for individual residential care, as applicable. The duration of the period of prohibition must be:
  - (1) For 6 months if the operator is punished pursuant to subparagraph (1) of paragraph (a).
- (2) For 1 year if the operator is punished pursuant to subparagraph (2) of paragraph (a).
  - (3) Permanent if the operator is punished pursuant to

subparagraph (3) of paragraph (a).

3. Before the [Health] Division imposes an administrative sanction pursuant to subsection 2, the [Health] Division shall provide the operator of a residential facility for groups with reasonable notice. The notice must contain the legal authority, jurisdiction and reasons for the action to be taken. If the operator of a residential facility for groups wants to contest the action, the operator may file an appeal pursuant to the regulations of the State Board of Health adopted pursuant to NRS 449.165 and 449.170. Upon receiving notice of an appeal, the [Health] Division shall hold a hearing in accordance with those regulations. For the purpose of this subsection, it is no defense to the violation of operating a





residential facility for groups without a license that the operator thereof subsequently licensed the facility in accordance with law.

- 4. Unless otherwise required by federal law, the [Health] Division shall deposit all civil penalties collected pursuant to paragraph (a) of subsection 2 into a separate account in the State General Fund to be used to administer and carry out the provisions of this chapter and to protect the health, safety, well-being and property of the patients and residents of facilities and homes for individual residential care in accordance with applicable state and federal standards.
- **Sec. 120.** Chapter 450B of NRS is hereby amended by adding thereto a new section to read as follows:

"Division" means the Division of Public and Behavioral Health of the Department of Health and Human Services.

**Sec. 121.** NRS 450B.020 is hereby amended to read as follows:

450B.020 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 450B.025 to 450B.110, inclusive, *and section 120 of this act* have the meanings ascribed to them in those sections.

**Sec. 122.** NRS 450B.1505 is hereby amended to read as follows:

450B.1505 1. Any money the [Health] Division receives from a fee set by the State Board of Health pursuant to NRS 439.150 for the issuance or renewal of a license pursuant to NRS 450B.160, an administrative penalty imposed pursuant to NRS 450B.900 or an appropriation made by the Legislature for the purposes of training related to emergency medical services:

- (a) Must be deposited in the State Treasury and accounted for separately in the State General Fund;
- (b) May be used only to carry out a training program for emergency medical services personnel who work for a volunteer ambulance service or firefighting agency, including, without limitation, equipment for use in the training; and
- (c) Does not revert to the State General Fund at the end of any fiscal year.
- 2. Any interest or income earned on the money in the account must be credited to the account. Any claims against the account must be paid in the manner that other claims against the State are paid.
- 41 3. The Administrator of the [Health] Division shall administer 42 the account.





**Sec. 123.** Chapter 452 of NRS is hereby amended by adding thereto a new section to read as follows:

"Division" means the Division of Public and Behavioral Health of the Department of Health and Human Services.

Sec. 124. NRS 452.003 is hereby amended to read as follows:

452.003 As used in NRS 452.001 to 452.610, inclusive, *and section 123 of this act*, unless the context otherwise requires, the words and terms defined in NRS 452.004 to 452.019, inclusive, *and section 123 of this act* have the meanings ascribed to them in those sections.

**Sec. 125.** NRS 452.230 is hereby amended to read as follows: 452.230 1. Except as provided in subsection 2 of NRS 452.210, the [Health] Division shall have supervisory control over the construction of any mausoleum, vault or crypt, and shall:

- (a) See that the approved plans and specifications are in all respects complied with.
- (b) Appoint an inspector under whose supervision the mausoleum, vault or crypt shall be erected.
- (c) Determine the amount of compensation of the inspector. The compensation shall be paid by the person erecting such mausoleum, vault or crypt.
- 2. No departure or deviation from the original plans and specifications is permitted except upon approval of the [Health] Division, evidenced in the same manner as the approval of the original plans and specifications.
- 3. A mausoleum, vault, crypt or structure shall not be used to hold any dead body until a final certificate is obtained indicating compliance with the plans and specifications as filed. The certificate must be signed either by the State Health Officer for the [Health] Division or by the head of the local building or public works department, depending upon which division or department supervised the construction under NRS 452.210.

**Sec. 126.** NRS 453.580 is hereby amended to read as follows:

453.580 1. A court may establish an appropriate treatment program to which it may assign a person pursuant to subsection 4 of NRS 453.336, NRS 453.3363 or 458.300, or it may assign such a person to an appropriate facility for the treatment of abuse of alcohol or drugs which is certified by the Division of [Mental Health and Developmental Services] Public and Behavioral Health of the Department. The assignment must include the terms and conditions for successful completion of the program and provide for progress reports at intervals set by the court to ensure that the person is making satisfactory progress toward completion of the program.

2. A program to which a court assigns a person pursuant to subsection 1 must include:



1 2



- (a) Information and encouragement for the participant to cease abusing alcohol or using controlled substances through educational, counseling and support sessions developed with the cooperation of various community, health, substance abuse, religious, social service and youth organizations;
- (b) The opportunity for the participant to understand the medical, psychological and social implications of substance abuse; and
- (c) Alternate courses within the program based on the different substances abused and the addictions of participants.
- 3. If the offense with which the person was charged involved the use or possession of a controlled substance, in addition to the program or as a part of the program, the court must also require frequent urinalysis to determine that the person is not using a controlled substance. The court shall specify how frequent such examinations must be and how many must be successfully completed, independently of other requisites for successful completion of the program.
- 4. Before the court assigns a person to a program pursuant to this section, the person must agree to pay the cost of the program to which the person is assigned and the cost of any additional supervision required pursuant to subsection 3, to the extent of the financial resources of the person. If the person does not have the financial resources to pay all of the related costs, the court shall, to the extent practicable, arrange for the person to be assigned to a program at a facility that receives a sufficient amount of federal or state funding to offset the remainder of the costs.
- **Sec. 127.** NRS 453A.090 is hereby amended to read as follows:
- 453A.090 "Division" means the [Health] Division of *Public* and *Behavioral Health of* the Department of Health and Human Services.
- **Sec. 128.** NRS 453A.730 is hereby amended to read as follows:
  - 453A.730 1. Any money the Administrator of the Division receives pursuant to NRS 453A.720 or that is appropriated to carry out the provisions of this chapter:
- (a) Must be deposited in the State Treasury and accounted for separately in the State General Fund;
  - (b) May only be used to carry out:
- (1) The provisions of this chapter, including the dissemination of information concerning the provisions of this chapter and such other information as determined appropriate by the Administrator; and





- 1 (2) Alcohol and drug abuse programs pursuant to NRS 2 458.094; and
  - (c) Does not revert to the State General Fund at the end of any fiscal year.
  - 2. The [Administrator of the Division may transfer] money in the account created pursuant to subsection 1 that is not needed to carry out this chapter [to the Division of Mental Health and Developmental Services of the Department of Health and Human Services for use by an agency of that Division which provides services for the treatment and prevention of substance abuse. The money transferred pursuant to this subsection must] may be used for the provision of alcohol and drug abuse programs in accordance with NRS 458,094.
  - 3. The Administrator of the Division shall administer the account. Any interest or income earned on the money in the account must be credited to the account. Any claims against the account must be paid as other claims against the State are paid.
    - **Sec. 129.** NRS 457.020 is hereby amended to read as follows: 457.020 As used in this chapter, unless the context requires
  - otherwise:
    1. "Cancer" means all malignant neoplasms, regardless of the tissue of origin, including malignant lymphoma and leukemia.
    - 2. "Division" means the Division of Public and Behavioral Health of the Department of Health and Human Services.
  - 3. "Health care facility" has the meaning ascribed to it in NRS 162A.740 and also includes freestanding facilities for plastic reconstructive, oral and maxillofacial surgery.
  - [3. "Health Division" means the Health Division of the Department of Health and Human Services.]
    - Sec. 130. NRS 457.185 is hereby amended to read as follows:
  - 457.185 1. The [Health] Division shall grant or deny an application for a certificate of authorization to operate a radiation machine for mammography or a certificate of authorization for a radiation machine for mammography within 4 months after receipt of a complete application.
  - 2. The [Health] Division shall withdraw the certificate of authorization to operate a radiation machine for mammography if it finds that the person violated the provisions of subsection 6 of NRS 457.183.
  - 3. The [Health] Division shall deny or withdraw the certificate of authorization of a radiation machine for mammography if it finds that the owner, lessee or other responsible person violated the provisions of subsection 1 of NRS 457.184.
  - 4. If a certificate of authorization to operate a radiation machine for mammography or a certificate of authorization for a





radiation machine for mammography is withdrawn, a person must apply for the certificate in the manner provided for an initial certificate.

**Sec. 131.** NRS 458.010 is hereby amended to read as follows: 458.010 As used in NRS 458.010 to 458.350, inclusive, unless the context requires otherwise:

- 1. "Administrator" means the Administrator of the Division.
- 2. "Alcohol and drug abuse program" means a project concerned with education, prevention and treatment directed toward achieving the mental and physical restoration of alcohol and drug abusers.
- 3. "Alcohol and drug abuser" means a person whose consumption of alcohol or other drugs, or any combination thereof, interferes with or adversely affects the ability of the person to function socially or economically.
- 4. "Alcoholic" means any person who habitually uses alcoholic beverages to the extent that the person endangers the health, safety or welfare of himself or herself or any other person or group of persons.
- 5. "Civil protective custody" means a custodial placement of a person to protect the health or safety of the person. Civil protective custody does not have any criminal implication.
- 6. "Detoxification technician" means a person who is certified by the Division to provide screening for the safe withdrawal from alcohol and other drugs.
- 7. "Division" means the Division of [Mental Health and Developmental Services] *Public and Behavioral Health* of the Department of Health and Human Services.
- 8. "Facility" means a physical structure used for the education, prevention and treatment, including mental and physical restoration, of alcohol and drug abusers.
  - Sec. 132. NRS 459.010 is hereby amended to read as follows:
  - 459.010 As used in NRS 459.010 to 459.290, inclusive, unless the context requires otherwise:
    - 1. "By-product material" means:
- (a) Any radioactive material, except special nuclear material, yielded in or made radioactive by exposure to the radiation incident to the process of producing or making use of special nuclear material; and
- (b) The tailings or wastes produced by the extraction or concentration of uranium or thorium from any ore which is processed primarily for the extraction of the uranium or thorium.
- 2. "Division" means the Division of Public and Behavioral Health of the Department of Health and Human Services.





- "General license" means a license effective pursuant to regulations adopted by the State Board of Health without the filing of an application to transfer, acquire, own, possess or use quantities of, or devices or equipment for utilizing, by-product material, source material, special nuclear material or other radioactive material occurring naturally or produced artificially.
- 13. "Health Division" means the Health Division of the Department of Health and Human Services.
- "Ionizing radiation" means gamma rays and X rays, alpha and beta particles, high-speed electrons, neutrons, protons and other nuclear particles, but not sound or radio waves, or visible, infrared or ultraviolet light.
- "Person" includes any agency or political subdivision of this State, any other state or the United States, but not the Nuclear Regulatory Commission or its successor, or any federal agency licensed by the Nuclear Regulatory Commission or any successor to such a federal agency.
  - "Source material" means:

2

5

6

8

9

10

11 12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32 33

34

35

36

37

38

39

40 41

42 43

- (a) Uranium, thorium or any other material which the Governor declares by order to be source material after the Nuclear Regulatory Commission or any successor thereto has determined that material to be source material.
- (b) Any ore containing one or more of the materials enumerated in paragraph (a) in such concentration as the Governor declares by order to be source material after the Nuclear Regulatory Commission or any successor thereto has determined the material in the concentration to be source material.
  - "Special nuclear material" means: 7.
- (a) Plutonium, uranium 233, uranium enriched in the isotope 233 or in the isotope 235 and any other material which the Governor declares by order to be special nuclear material after the Nuclear Regulatory Commission or any successor thereto has determined such material to be special nuclear material, but does not include source material.
- (b) Any material artificially enriched by any of the materials enumerated in paragraph (a), but does not include source material.
- "Specific license" means a license issued pursuant to the filing of an application to use, manufacture, produce, transfer, receive, acquire, own or possess quantities of, or devices or equipment for utilizing, by-product material, source material, special nuclear material or other radioactive material occurring naturally or produced artificially.
  - **Sec. 133.** NRS 459.310 is hereby amended to read as follows:
- 44 459.310 1. The State Board of Health may establish by regulation:





- (a) Fees for licensing, monitoring, inspecting or otherwise regulating mills or other operations for the concentration, recovery or refining of uranium, which must be in amounts which are reasonably related to the cost of licensing, monitoring, inspecting and regulating. Payment of the fees is the responsibility of the person applying for a license or licenses to engage in uranium concentration, recovery or refining.
- (b) Fees for the care and maintenance of radioactive tailings and residues at inactive uranium concentration, recovery or refining sites. The fees must be based on a unit fee for each pound of uranium oxide produced in the process which also produced the tailings or residue. Payment of the fees is the responsibility of the person licensed to engage in uranium concentration, recovery or refining. The regulations must provide for a maximum amount to be paid for each operation.
- (c) A requirement for persons licensed by the State to engage in uranium concentration, recovery or refining to post adequate bonds or other security to cover costs of decontaminating, decommissioning and reclaiming the sites used for concentrating, recovering or refining uranium if the licensee abandons the site or neglects or refuses to satisfy the requirements of the State. The State Board of Health shall determine the amount of the security. The amount of the security may be reviewed by the Board from time to time and may be increased or decreased as the board deems appropriate. The security must be administered by the Administrator of the [Health] Division [.] of Public and Behavioral Health of the Department of Health and Human Services, who shall use the security as required to protect the public health, safety and property.
- The money received pursuant to paragraph (a) of subsection 1 must be deposited in the State Treasury for credit to the Fund for Licensing of Uranium Mills, which is hereby created as a special revenue fund, for the purpose of defraying the cost of licensing, monitoring, inspecting or otherwise regulating mills or other operations for the concentration, recovery or refining of uranium. The money received pursuant to paragraph (b) of subsection 1 must be deposited in the State Treasury for credit to the Fund for Care of Uranium Tailings, which is hereby created as a special revenue fund, for the purpose of the care and maintenance of radioactive tailings and residues accumulated at inactive uranium concentration, recovery or refining sites to protect the public health, safety and property. All interest earned on the deposit or investment of the money in the Fund for Care of Uranium Tailings must be credited to that Fund. The Administrator of the [Health] Division of Public and **Behavioral Health** shall administer both Funds. Claims against





either Fund, approved by the State Health Officer, must be paid as other claims against the State are paid.

**Sec. 134.** NRS 608.255 is hereby amended to read as follows:

608.255 For the purposes of this chapter and any other statutory or constitutional provision governing the minimum wage paid to an employee, the following relationships do not constitute employment relationships and are therefore not subject to those provisions:

- 1. The relationship between a rehabilitation facility or workshop established by the Department of Employment, Training and Rehabilitation pursuant to chapter 615 of NRS and an individual with a disability who is participating in a training or rehabilitative program of such a facility or workshop.
- 2. The relationship between a provider of jobs and day training services which is recognized as exempt pursuant to the provisions of 26 U.S.C. § 501(c)(3) and which has been issued a certificate by the Division of [Mental Health and Developmental Services] Public and Behavioral Health of the Department of Health and Human Services pursuant to NRS 435.130 to 435.310, inclusive, and a person with mental retardation or person with related conditions participating in a jobs and day training services program.

**Sec. 135.** NRS 616A.205 is hereby amended to read as follows:

616A.205 Volunteer workers at a facility for inpatients of the Division of [Mental Health and Developmental Services] Public and Behavioral Health of the Department of Health and Human Services, while acting under the direction or authorization of the supervisor of volunteer services of such a facility, shall be deemed, for the purpose of chapters 616A to 616D, inclusive, of NRS, employees of the facility, receiving a wage of \$350 per month, and are entitled to the benefits of those chapters upon compliance therewith by the facility.

**Sec. 136.** NRS 630.262 is hereby amended to read as follows:

- 630.262 1. Except as otherwise provided in NRS 630.161, the Board may issue an authorized facility license to a person who intends to practice medicine in this State as a psychiatrist in a mental health center of the Division under the direct supervision of a psychiatrist who holds an unrestricted license to practice medicine pursuant to this chapter or to practice osteopathic medicine pursuant to chapter 633 of NRS.
- 2. A person who applies for an authorized facility license pursuant to this section is not required to take or pass a written examination as to his or her qualifications to practice medicine pursuant to paragraph (e) of subsection 2 of NRS 630.160, but the





person must meet all other conditions and requirements for an unrestricted license to practice medicine pursuant to this chapter.

- 3. If the Board issues an authorized facility license pursuant to this section, the person who holds the license may practice medicine in this State only as a psychiatrist in a mental health center of the Division and only under the direct supervision of a psychiatrist who holds an unrestricted license to practice medicine pursuant to this chapter or to practice osteopathic medicine pursuant to chapter 633 of NRS.
- 4. If a person who holds an authorized facility license issued pursuant to this section ceases to practice medicine in this State as a psychiatrist in a mental health center of the Division:
  - (a) The Division shall notify the Board; and
- (b) Upon receipt of the notification, the authorized facility license expires automatically.
- 5. The Board may renew or modify an authorized facility license issued pursuant to this section, unless the license has expired automatically or has been revoked.
- 6. The provisions of this section do not limit the authority of the Board to issue a license to an applicant in accordance with any other provision of this chapter.
  - 7. As used in this section:

- (a) "Division" means the Division of [Mental Health and Developmental Services] Public and Behavioral Health of the Department of Health and Human Services.
- (b) "Mental health center" has the meaning ascribed to it in NRS 433.144.
  - **Sec. 137.** NRS 633.417 is hereby amended to read as follows:
- 633.417 1. Except as otherwise provided in NRS 633.315, the Board may issue an authorized facility license to a person who intends to practice osteopathic medicine in this State as a psychiatrist in a mental health center of the Division under the direct supervision of a psychiatrist who holds an unrestricted license to practice osteopathic medicine pursuant to this chapter or to practice medicine pursuant to chapter 630 of NRS.
- 2. A person who applies for an authorized facility license pursuant to this section is not required to take or pass a written examination as to his or her qualifications to practice osteopathic medicine, but the person must meet all conditions and requirements for an unrestricted license to practice osteopathic medicine pursuant to this chapter.
- 3. If the Board issues an authorized facility license pursuant to this section, the person who holds the license may practice osteopathic medicine in this State only as a psychiatrist in a mental health center of the Division and only under the direct supervision





of a psychiatrist who holds an unrestricted license to practice osteopathic medicine pursuant to this chapter or to practice medicine pursuant to chapter 630 of NRS.

- 4. If a person who holds an authorized facility license issued pursuant to this section ceases to practice osteopathic medicine in this State as a psychiatrist in a mental health center of the Division:
  - (a) The Division shall notify the Board; and
- (b) Upon receipt of the notification, the authorized facility license expires automatically.
- The Board may renew or modify an authorized facility license issued pursuant to this section, unless the license has expired automatically or has been revoked.
- The provisions of this section do not limit the authority of the Board to issue a license to an applicant in accordance with any other provision of this chapter.
  - 7. As used in this section:

4

5

6

7 8

9

10

11 12

13

14 15

16

17

18 19

20

21 22

23

26 27

28

29 30

31

32

33

34 35

36

37

38

39

40 41

42

43 44

- (a) "Division" means the Division of Mental Health and Developmental Services Public and Behavioral Health of the Department of Health and Human Services.
- (b) "Mental health center" has the meaning ascribed to it in NRS 433 144
  - **Sec. 138.** NRS 652.035 is hereby amended to read as follows:
- 652.035 ["Health Division"] "Division" means the [Health] Division of **Public and Behavioral Health of** the Department of 24 25 Health and Human Services.
  - **Sec. 139.** NRS 278.02382, 433.214, 439A.145, 441A.060, 442.760, 444.005, 449.009, 450B.080 and 452.012 are hereby repealed.
  - Sec. 140. 1. Any administrative regulations adopted by an officer, agency or other entity whose name has been changed or whose responsibilities have been transferred pursuant to the provisions of this act to another officer, agency or other entity remain in force until amended by the officer, agency or other entity to which the responsibility for the adoption of the regulations has been transferred.
  - Any contracts or other agreements entered into by an officer, agency or other entity whose name has been changed or whose responsibilities have been transferred pursuant to the provisions of this act to another officer, agency or other entity are binding upon the officer, agency or other entity to which the responsibility for the administration of the provision of the contract or other agreement has been transferred. Such contracts and other agreement may be enforced by the officer, agency or other entity to which the responsibility for the enforcement of the provisions of the contract or other agreements has been transferred.





- 3. Any action taken by an officer, agency or other entity whose name has been changed or whose responsibilities have been transferred pursuant to the provisions of this act to another officer, agency or other entity remains in effect as if taken by the officer, agency or other entity to which the responsibility for the enforcement of such actions has been transferred.
- 4. A license, registration, certificate or other authorization which is in effect on July 1, 2013, and which was issued by an officer, agency or other entity whose name was changed or whose responsibilities were transferred pursuant to this act to another officer, agency or other entity:
- (a) Shall be deemed to be issued by the officer, agency or other entity with the new name provided in this act or issued by the officer, agency or other entity to whom the responsibility for such issuance was transferred, as applicable; and
- (b) Remains valid until its expiration date, if the holder of the license, registration, certificate or other authorization otherwise remains qualified for the issuance or renewal of the license, registration, certificate or authorization on or after July 1, 2013.
- **Sec. 141.** 1. If the name of a fund or account is changed pursuant to the provisions of this act, the State Controller shall change the designation of the name of the fund or account without making any transfer of money in the fund or account. The assets and liabilities of such a fund or account are unaffected by the change of the name.
- 2. The assets and liabilities of any fund or account transferred from the Health Division or the Division of Mental Health and Developmental Services of the Department of Health and Human Services to the Division of Public and Behavioral Health of the Department of Health and Human Services are unaffected by the transfer.

## Sec. 142. The Legislative Counsel shall:

- 1. In preparing the Nevada Revised Statutes, use the authority set forth in subsection 10 of NRS 220.120 to substitute appropriately the name of any agency, officer or instrumentality of the State whose name is changed by this act for the name which the agency, officer or instrumentality previously used; and
- 2. In preparing supplements to the Nevada Administrative Code, substitute appropriately the name of any agency, officer or instrumentality of the State whose name is changed by this act for the name which the agency, officer or instrumentality previously used
  - **Sec. 143.** This act becomes effective on July 1, 2013.



1 2



## LEADLINES OF REPEALED SECTIONS

278.02382 "Health Division" defined.

433.214 "Training" defined. 439A.145 "Health Division" defined.

441A.060 "Health Division" defined.

442.760 Health Division to prepare annual report; review of information and data concerning outcomes of specific programs and treatments.

"Health Division" defined. 444.005

"Health Division" defined. 449.009

450B.080 "Health Division" defined.

452.012 "Health Division" defined.





