Amendment No. 477

Assembly Amendment to Assembly Bill No. 456 (BDR 54-11						
Proposed by: Assembly Committee on Commerce and Labor						
Amends:	Summary: No	Title: Yes Preamble: No	Joint Sponsorship: No	Digest: Yes		

ASSEMBLY ACTION			Initial and Date	SENATE ACTION Initial and Date	
Adopted		Lost		Adopted	Lost
Concurred In		Not	1	Concurred In	Not
Receded		Not		Receded	Not

EXPLANATION: Matter in (1) *blue bold italics* is new language in the original bill; (2) *green bold italic underlining* is new language proposed in this amendment; (3) red strikethrough is deleted language in the original bill; (4) purple double strikethrough is language proposed to be deleted in this amendment; (5) orange double underlining is deleted language in the original bill that is proposed to be retained in this amendment; and (6) green bold underlining is newly added transitory language.

JMM/MSN Date: 4/17/2013

A.B. No. 456—Revises provisions governing health care. (BDR 54-1102)



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ASSEMBLY BILL NO. 456—COMMITTEE ON HEALTH AND HUMAN SERVICES

MARCH 25, 2013

Referred to Committee on Commerce and Labor

SUMMARY—Revises provisions governing health care. (BDR 54-1102)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Yes.

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EXPLANATION – Matter in *bolded italics* is new; matter between brackets [omitted material] is material to be omitted.

AN ACT relating to health care; {requiring that advertisements for health care services include certain information;} requiring {certain} a health care {professionals} professional to {communicate certain information to the public;} wear a name tag indicating his or her licensure or certification under certain circumstances; limiting the use of the term "board certified" by certain health care professionals; providing that a health care professional is subject to disciplinary action under certain circumstances; {providing for the submission to the State Board of Health of certain proposals for the modification of the scope of practice of a health care profession;} and providing other matters properly relating thereto.

Legislative Counsel's Digest:

[Section 2 of this bill requires that an advertisement for health eare services identify the type of license or certification held by each health eare professional named in the advertisement. Such an advertisement must not include any deceptive or misleading information regarding a health care professional. Section 2 furthers [This bill requires a health care professional [who provides] to wear a name tag indicating his or her licensure or certification while providing health care services (in this State to previde information concerning his or her license or certification to all current and prospective patients by: (1) conspicuously displaying in each office in which the health eare professional practices a written patient disclosure statement that clearly identifies the type of license or certification he or she holds; and (2) if the health eare professional wears a name tag while delivering health care services, including his or her licensure or certification on the tag. Section 2] in a health care facility. This bill also prohibits a health care professional who is a physician or osteopathic physician from using the term "board certified" unless he or she discloses the name of the board by which he or she is certified and the board: (1) is a member board of the American Board of Medical Specialities or the American Osteopathic Association; or (2) meets certain other requirements. [Section 2] This bill further provides that a health care professional who violates [an advertising or patient disclosure requirement] the provisions of this bill is subject to disciplinary action.

Esection 3 of this bill authorizes a person, regulatory body or other entity acting on behalf of a health care profession that proposes to modify the scope of practice of the health care profession to submit a written proposal to the State Board of Health. Section 3 requires that

the proposal contain certain information and requires the Board to meet certain notice and publication requirements upon receiving a proposal. Section 3 requires the Board to appoint a committee to conduct a hearing for the purpose of examining and investigating each proposal received by the Board. Section 3 further requires the committee to submit a report containing the findings and recommendations of the committee to the proponent, certain regulatory bodies and the Director of the Legislative Counsel Bureau for transmittal to the next regular ression of the Legislature.

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

Section 1. Chapter 629 of NRS is hereby amended by adding thereto the provisions set forth as sections 2 and 3 of this act.

Sec. 2. 1. Except as otherwise provided in subsection 2:

- (a) [An advertisement for health care services that names a health care professional must identify the type of license or certification held by the health care professional and must not contain any deceptive or misleading information.
- (b) A health care professional who provides health care services in this State shall provide to all current and prospective patients information which identifies the type of license or certificate held by the health care professional. Such information must be provided by, without limitation:
- (1) A written patient disclosure statement which is conspicuously displayed in the office of the health care professional and which clearly identifies the type of license or certificate held by the health care professional. The writing must be of sufficient size to be visible and apparent to all current and prospective patients.
- (2) If the A health care professional [wears a name tag] shall, during the course of providing health care services f, an indication off in a health care facility, wear a name tag which indicates his or her specific licensure or certification. for the name tag.
- (c) A health care professional who practices in more than one office shall comply with the requirements set forth in this section in each office in which he or she practices.
- (d)] (b) A physician or osteopathic physician shall not hold himself or herself out to the public as board certified in a specialty or subspecialty unless the physician or osteopathic physician discloses the full and correct name of the board by which he or she is certified, and the board:
- (1) Is a member board of the American Board of Medical Specialties or the American Osteopathic Association; or
 - (2) Requires for certification in a specialty or subspecialty:
- (I) [44] Successful completion of a postgraduate training program [that] which is approved by the Accreditation Council for Graduate Medical Education or the American Osteopathic Association and which provides complete training in the specialty or subspecialty;
- (II) Prerequisite certification by the American Board of Medical Specialties or the American Osteopathic Association in the specialty or subspecialty; and
- (III) Successful completion of an examination in the specialty or subspecialty.
- f An advertisement for health care services must not include a statement that a physician or osteopathic physician is board certified in a specialty or subspecialty

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unless the physician or osteopathic physician satisfies the requirements of this paragraph.

(c) If an advertisement for health care services is in writing, the information concerning licensure and board certification that is required pursuant to this section must be prominently displayed in the advertisement using a font size and style to make the information readily apparent.

(f) (c) A health care professional who violates any provision of this section is guilty of unprofessional conduct and is subject to disciplinary action by the board, agency or other entity in this State by which he or she is licensed, certified or regulated.

2. The provisions of this section do not apply to:

(a) A veterinarian or other person licensed under chapter 638 of NRS.

(b) A person who works in or is licensed to operate, conduct, issue a report from or maintain a medical laboratory under chapter 652 of NRS, unless the person provides services directly to a patient or the public.

3. As used in this section:

(a) ["Advertisement" means any printed, electronic or oral communication or statement that names a health care professional in relation to the practice, profession or institution in which the health care professional is employed, volunteers or otherwise provides health care services. The term includes, without limitation, any business eard, letterhead, patient brochure, pamphlet, newsletter, telephone directory, electronic mail, Internet website, physician database, audio or video transmission, direct patient solicitation, billboard and any other communication or statement used in the course of business.

(b) "Deceptive or misleading information" means any information that falsely describes or misrepresents the profession, skills, training, expertise, education, board certification or licensure of a health care professional.

(e) "Health care facility" has the meaning ascribed to it in NRS 449.2414.
(b) "Health care professional" means any person who engages in acts related to the treatment of human ailments or conditions and who is subject to licensure, certification or regulation by the provisions of this title.

(d) (c) "Medical laboratory" has the meaning ascribed to it in NRS *652.060*.

[(e)] (d) "Osteopathic physician" has the meaning ascribed to it in NRS 633,091.

I(f) (e) "Physician" has the meaning ascribed to it in NRS 630.014.

Sec. 3. [1. Any person, regulatory body or other entity acting on behalf of a health care profession that proposes to modify the scope of practice of the health care profession may submit a written proposal to the State Board of Health not later than July 1 of any even numbered year.

2. A proposal submitted pursuant to subsection 1 must include:

(a) A general description of the proposed modification to the scope of practice;

(b) A description of the public health and safety benefits that will be achieved if the proposal were approved and, if applicable, a description of any harm to public health and safety if the proposal were denied;

(c) A description of the impact that the modification of the scope of practice will have on public access to health care;

(d) A summary of any applicable state or federal laws or regulations governing the scope of practice of the health care profession,

(c) A description of the current educational, training and examination requirements applicable to the health care profession;

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- (f) A summary of any known changes to the scope of practice of the health care profession during the 5 years immediately preceding the submission of the proposals
- (g) A statement of the anticipated economic impact of the modification of the scope of practice on the delivery of health care in this State;
- (h) A description of any regional and national trends concerning the scope of practice of the health care profession;
- (i) The identification of any health care professions that can reasonably be anticipated to be directly impacted by the proposal, the nature of the impact and any efforts made by the applicant to address any such impact; and
- (j) A description of how the proposal relates to the ability of a health care professional to practice to the full extent of his or her education or training within a health care profession.
- 3. Not later than 30 days after receiving a proposal pursuant to subsection 1, the State Board of Health shall:
 - (a) Provide written notice of the proposal to:
- (1) The Director of the Legislative Counsel Bureau for transmission to the appropriate interim legislative committee with jurisdiction over the subject matter of the proposal; and
 - (2) Each regulatory body to which the proposal is applicable.
- (b) Publish a copy of the proposal on the Internet website maintained by the State Board of Health.
- (c) Appoint a committee to examine and investigate the proposal. The committee must consist of six appointed members and one member of the State Board of Health, who shall serve as chair of the committee. The chair of the committee must not be a member of any health care profession whose scope of practice is the subject of the proposal. The State Board of Health shall ensure that the composition of the committee is fair, impartial and equitable. The State Board of Health shall not appoint to the committee more than two members of the same health care profession.
- 1. Not later than 30 days after the State Board of Health satisfies the notice and publication requirements of subsection 3, any person, regulatory body or other entity acting on behalf of a health care profession that may be directly impacted by a proposal submitted pursuant to subsection 1 may submit to the State Board of Health an impact statement identifying the nature of the impact on the health care profession. Upon receiving an impact statement, the State Board of Health shall provide a copy of the impact statement to the person, regulatory body or entity that submitted the proposal and shall provide notice of and publish the impact statement in the same manner prescribed for publication of a proposal by subsection 3. The person, regulatory body or entity that submitted the proposal may submit to the State Board of Health a written response to any impact statement received or published pursuant to this subsection.
- 5. A committee appointed pursuant to paragraph (c) of subsection 3 shall conduct a hearing on or before October 31 of the year of its appointment to examine and investigate the proposal for which it was appointed and to receive any testimony or other evidence related to the proposal. A committee shall conduct a hearing pursuant to this subsection in accordance with the applicable provisions of chapter 241 of NRS governing the meetings of state and local agencies.
- 6. A committee that conducts a hearing pursuant to subsection 5 shall, on or before December 31 of the year of its appointment, submit a report of the

1	findings and recommendations of the committee to the State Board of Health for
2	transmittal to:
3	(a) The person, regulatory body or entity that submitted the proposal;
4	— (b) Each regulatory body to which the report is applicable; and
5	(c) The Director of the Legislative Counsel Bureau for transmittal to the next
6	regular session of the Legislature.
7	7. As used in this section:
8	(a) "Health care profession" means a profession regulated by a regulatory
9	body.
10	(b) "Health care professional" has the meaning ascribed to it in paragraph
11	(c) of subsection 3 of section 2 of this act.
12	(c) "Regulatory body" means:
13	(1) Any state agency, board or commission which has the authority to
14	regulate a health care professional; and
15	(2) Any officer of a state agency, board or commission which has the
16	authority to regulate a health care professional. (Deleted by amendment.)
17	Sec. 4. This act becomes effective on January 1, 2014.