Amendment No. 873

Assembly Amendment to Senate Bill No. 327 Third Reprint (BDR 54-772)									
Proposed by: Assemblywoman Cohen									
Amends:	Summary: No	Title: No	Preamble: No	Joint Sponsorship: No	Digest: No				

ASSEMBLY	ACT	ION	Initial and Date	SENATE ACTIO	ON Initial and Date
Adopted		Lost		Adopted	Lost
Concurred In		Not		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) <u>orange double underlining</u> is deleted language in the original bill that is proposed to be retained in this amendment; and (6) <u>green bold underlining</u> is newly added transitory language.

DP/TMC Date: 5/24/2013

S.B. No. 327—Revises provisions relating to health care professions. (BDR 54-772)

* A S B 3 2 7 R 3 8 7 3 *

SENATE BILL NO. 327–SENATORS JONES, SEGERBLOM AND KIECKHEFER (BY REQUEST)

MARCH 18, 2013

Referred to Committee on Commerce, Labor and Energy

SUMMARY—Revises provisions relating to health care professions. (BDR 54-772)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Yes.

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

AN ACT relating to health care professions; revising provisions to authorize the performance of certain acts in this State by certain health care professionals without regard to whether the professionals are physically located in this State; requiring certain persons to maintain electronic mail addresses with the Board of Medical Examiners; revising provisions governing the issuance of certain licenses to certain graduates of foreign medical schools; requiring the Board to adopt certain regulations regarding physician assistants; authorizing the Board to make service of process by electronic mail under certain circumstances; revising provisions governing the practice of telemedicine by an osteopathic physician; prohibiting the State Board of Pharmacy from conditioning, limiting, restricting or denying the issuance of a certificate, license, registration, permit or authorization certain grounds; revising provisions relating telepharmacies, remote sites and satellite consultation sites; revising provisions relating to the procedure for filling certain prescriptions; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Section 1 of this bill revises the definition of "practice of medicine" to include acts performed without regard to whether the practitioner is physically located in this State.

Existing law requires a person who is licensed under chapter 630 of NRS to maintain a permanent mailing address with the Board of Medical Examiners. (NRS 630.254) **Section 2** of this bill requires a licensee who engages in the practice of medicine under certain circumstances to maintain an electronic mail address with the Board.

Existing law requires an inactive registrant to maintain a permanent mailing address with the Board. (NRS 630.255) **Section 3** of this bill requires a licensee who has changed his or her practice of medicine from this State to another state or country, and any inactive registrant, to maintain an electronic mail address with the Board.

Existing law authorizes the issuance of a special purpose license to a physician who is licensed in another state. (NRS 630.261) **Section 4** of this bill provides that a physician so

9

10

11

12

13

14

15 16 17

18

19

licensed may perform specified acts without regard to whether the physician is located in this State. Section 4 further provides that such a physician must comply with all applicable requirements of Nevada statutes and regulations of the Board and is subject to the jurisdiction of the courts of this State to the extent that the exercise of jurisdiction is not inconsistent with constitutional limitations.

Section 5 of this bill revises the provisions authorizing the issuance of restricted licenses to certain graduates of a foreign medical school.

Section 6 of this bill revises provisions requiring the Board of Medical Examiners to adopt certain regulations regarding physician assistants.

Existing law requires service of process under chapter 630 of NRS to be made on a licensee personally, or by registered or certified mail. (NRS 630.344) Section 7 of this bill authorizes service of process by electronic mail under certain circumstances.

Existing law authorizes a registered nurse who is certified as an advanced practitioner of nursing to perform certain acts. (NRS 632.237) Sections 8 and 9 of this bill authorize an advanced practitioner of nursing to perform those acts by using certain technology, whether or not the advanced practitioner of nursing is located in this State.

Section 10 of this bill revises provisions governing the practice of telemedicine by an osteopathic physician. Section 10 also requires compliance with applicable provisions of Nevada statutes and regulations of the State Board of Osteopathic Medicine and provides for the exercise of jurisdiction over such osteopathic physicians by the courts of this State.

Section 11 of this bill revises the provisions authorizing the issuance of special licenses to certain graduates of a foreign medical school which teaches osteopathic medicine.

Section 12 of this bill revises provisions relating to the supervision of a physician assistant by a supervising osteopathic physician.

Section 17 of this bill prohibits the State Board of Pharmacy from conditioning, limiting, restricting or denying the issuance of a certificate, license, registration, permit or authorization based on certain grounds.

Sections 13-16 and 18 of this bill revise provisions relating to telepharmacies, remote sites and satellite consultation sites.

Sections 19, 19.3 and 19.7 of this bill revise provisions relating to the procedure for filling certain prescriptions.

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

Section 1. NRS 630.020 is hereby amended to read as follows:

630.020 "Practice of medicine" means:

- 1. To diagnose, treat, correct, prevent or prescribe for any human disease, ailment, injury, infirmity, deformity or other condition, physical or mental, by any means or instrumentality, including, but not limited to, the performance of an autopsy.
- To apply principles or techniques of medical science in the diagnosis or the prevention of any such conditions.
- 3. To perform any of the acts described in subsections 1 and 2 by using equipment that transfers information concerning the medical condition of the patient electronically, telephonically or by fiber optics \int from within or outside this State or the United States.
- 4. To offer, undertake, attempt to do or hold oneself out as able to do any of the acts described in subsections 1 and 2.
- Sec. 2. NRS 630.254 is hereby amended to read as follows: 630.254

 1. Each licensee shall maintain a permanent mailing address with the Board to which all communications from the Board to the licensee must be sent. A licensee who changes his or her permanent mailing address shall notify the Board in writing of the new permanent mailing address within 30 days after the change. If

a licensee fails to notify the Board in writing of a change in his or her permanent mailing address within 30 days after the change, the Board:

- (a) Shall impose upon the licensee a fine not to exceed \$250; and
- (b) May initiate disciplinary action against the licensee as provided pursuant to subsection 10 of NRS 630.306.
- 2. Any licensee who changes the location of his or her office in this State shall notify the Board in writing of the change before practicing at the new location.
 - 3. Any licensee who closes his or her office in this State shall:

- (a) Notify the Board in writing of this occurrence within 14 days after the closure; and
- (b) For a period of 5 years thereafter, unless a longer period of retention is provided by federal law, keep the Board apprised in writing of the location of the medical records of the licensee's patients.
- 4. In addition to the requirements of subsection 1, any licensee who performs any of the acts described in subsection 3 of NRS 630.020 from outside this State or the United States shall maintain an electronic mail address with the Board to which all communications from the Board to the licensee may be sent.
 - **Sec. 3.** NRS 630.255 is hereby amended to read as follows:
- 630.255 1. Any licensee who changes the location of his or her practice of medicine from this State to another state or country, has never engaged in the practice of medicine in this State after licensure or has ceased to engage in the practice of medicine in this State for 12 consecutive months may be placed on inactive status by order of the Board.
- 2. Each inactive registrant shall maintain a permanent mailing address with the Board to which all communications from the Board to the registrant must be sent. An inactive registrant who changes his or her permanent mailing address shall notify the Board in writing of the new permanent mailing address within 30 days after the change. If an inactive registrant fails to notify the Board in writing of a change in his or her permanent mailing address within 30 days after the change, the Board shall impose upon the registrant a fine not to exceed \$250.
- 3. In addition to the requirements of subsection 2, any licensee who changes the location of his or her practice of medicine from this State to another state or country and any inactive registrant shall maintain an electronic mail address with the Board to which all communications from the Board to him or her may be sent.
- 4. Before resuming the practice of medicine in this State, the inactive registrant must:
- (a) Notify the Board in writing of his or her intent to resume the practice of medicine in this State;
- (b) File an affidavit with the Board describing the activities of the registrant during the period of inactive status;
 - (c) Complete the form for registration for active status;
 - (d) Pay the applicable fee for biennial registration; and
 - (e) Satisfy the Board of his or her competence to practice medicine.
- [4.] 5. If the Board determines that the conduct or competence of the registrant during the period of inactive status would have warranted denial of an application for a license to practice medicine in this State, the Board may refuse to place the registrant on active status.
 - **Sec. 4.** NRS 630.261 is hereby amended to read as follows:
- 630.261 1. Except as otherwise provided in NRS 630.161, the Board may issue:
- (a) A locum tenens license, to be effective not more than 3 months after issuance, to any physician who is licensed and in good standing in another state,

who meets the requirements for licensure in this State and who is of good moral character and reputation. The purpose of this license is to enable an eligible physician to serve as a substitute for another physician who is licensed to practice medicine in this State and who is absent from his or her practice for reasons deemed sufficient by the Board. A license issued pursuant to the provisions of this paragraph is not renewable.

- (b) A special license to a licensed physician of another state to come into this State to care for or assist in the treatment of his or her own patient in association with a physician licensed in this State. A special license issued pursuant to the provisions of this paragraph is limited to the care of a specific patient. The physician licensed in this State has the primary responsibility for the care of that restient
- (c) A restricted license for a specified period if the Board determines the applicant needs supervision or restriction.
- (d) A temporary license for a specified period if the physician is licensed and in good standing in another state and meets the requirements for licensure in this State, and if the Board determines that it is necessary in order to provide medical services for a community without adequate medical care. A temporary license issued pursuant to the provisions of this paragraph is not renewable.
- (e) A special purpose license to a physician who is licensed in another state to **[permit the use of]** perform any of the acts described in subsections 1 and 2 of NRS 630.020 by using equipment that transfers information concerning the medical condition of a patient in this State **[aeross state lines]** electronically, telephonically or by fiber optics [.] from within or outside this State or the United States. A physician who holds a special purpose license issued pursuant to this paragraph:

 (1) Except as otherwise provided by specific statute or regulation, shall
- comply with the provisions of this chapter and the regulations of the Board; and
 (2) To the extent not inconsistent with the Nevada Constitution or the
- United States Constitution, is subject to the jurisdiction of the courts of this State.

 2. For the purpose of paragraph (e) of subsection 1, the physician must:
 - (a) Hold a full and unrestricted license to practice medicine in another state;
- (b) Not have had any disciplinary or other action taken against him or her by any state or other jurisdiction; and
- (c) Be certified by a specialty board of the American Board of Medical Specialties or its successor.
- 3. Except as otherwise provided in this section, the Board may renew or modify any license issued pursuant to subsection 1.
 - Sec. 5. NRS 630.2645 is hereby amended to read as follows:
- 630.2645 1. Except as otherwise provided in NRS 630.161, the Board may issue a restricted license *to teach*, *research or practice medicine* to a person who:
- (a) Is] if:
 - (a) The person:
 - (1) Submits to the Board:
 - (I) Proof that the person is a graduate of a foreign medical school [; Teaches,], as provided in NRS 630.195;
- (II) Proof that the person teaches, researches or practices medicine outside the United States :
- (c) Is a recognized medical expert; and
- - (III) Any other documentation or proof of qualifications required by the Board; and
 - (2) Intends to teach, research or practice [clinical] medicine at a *medical* facility, medical research facility or medical school in this State.

- (b) Any other documentation or proof of qualifications required by the Board is authenticated in a manner approved by the Board.
- 2. A person who applies for a restricted license pursuant to this section is not required to take or pass a written examination concerning his or her qualifications to practice medicine. [, but the person must satisfy the requirements for a restricted license set forth in regulations adopted by the Board.]
- 3. A person who holds a restricted license issued pursuant to this section may practice medicine in this State only in accordance with the terms and restrictions established by the Board.
- 4. If a person who holds a restricted license issued pursuant to this section ceases to teach, research or practice [clinical] medicine in this State at the *medical facility*, medical research facility or medical school where the person is employed:
- (a) The *medical facility*, medical research facility or medical school, as applicable, shall notify the Board; and
- (b) Upon receipt of such notification, the restricted license expires automatically.
- 5. The Board may renew or modify a restricted license issued pursuant to this section, unless the restricted 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 restricted license to an applicant in accordance with any other provision of this chapter.
- 7. A restricted license to teach, research or practice medicine may be issued, renewed or modified at a meeting of the Board or between its meetings by the President and the Executive Director of the Board. Such an action shall be deemed to be an action of the Board.
 - **Sec. 6.** NRS 630.275 is hereby amended to read as follows:
- 630.275 The Board shall adopt regulations regarding the licensure of a physician assistant, including, but not limited to:
 - 1. The educational and other qualifications of applicants.
 - The required academic program for applicants.
 - 3. The procedures for applications for and the issuance of licenses.
 - 4. The tests or examinations of applicants by the Board.
- 5. The medical services which a physician assistant may perform, except that a physician assistant may not perform those specific functions and duties delegated or restricted by law to persons licensed as dentists, chiropractors, podiatric physicians and optometrists under chapters 631, 634, 635 and 636, respectively, of NRS, or as hearing aid specialists.
 - 6. The duration, renewal and termination of licenses.
- 7. The grounds and procedures respecting disciplinary actions against physician assistants.
- 8. The supervision of medical services of a physician assistant by a supervising physician [...], including, without limitation, supervision that is performed electronically, telephonically or by fiber optics from within or outside this State or the United States.
- 9. A physician assistant's use of equipment that transfers information concerning the medical condition of a patient in this State electronically, telephonically or by fiber optics from within or outside this State or the United States.
 - **Sec. 7.** NRS 630.344 is hereby amended to read as follows:
- 630.344 1. [Service] Except as otherwise provided in subsection 2, service of process under this chapter must be made on a licensee personally, or by registered or certified mail with return receipt requested addressed to the licensee at his or her last known address. If personal service cannot be made and if notice by

mail is returned undelivered, the Secretary-Treasurer of the Board shall cause notice to be published once a week for 4 consecutive weeks in a newspaper published in the county of the last known address of the licensee or, if no newspaper is published in that county, then in a newspaper widely distributed in that county.

2. In lieu of the methods of service of process set forth in subsection 1, if

- 2. In lieu of the methods of service of process set forth in subsection 1, if the Board obtains written consent from the licensee, service of process under this chapter may be made by electronic mail on a licensee who engages in the practice of medicine as described in subsection 3 of NRS 630.020.
- 3. Proof of service of process or publication of notice made under this chapter must be filed with the Board and recorded in the minutes of the Board.
 - **Sec. 8.** NRS 632.237 is hereby amended to read as follows:
- 632.237 1. The Board may grant a certificate of recognition as an advanced practitioner of nursing to a registered nurse who has completed an educational program designed to prepare a registered nurse to:
 - (a) Perform designated acts of medical diagnosis;
 - (b) Prescribe therapeutic or corrective measures; and
 - (c) Prescribe controlled substances, poisons, dangerous drugs and devices,
- → and who meets the other requirements established by the Board for such certification.
 - 2. An advanced practitioner of nursing may:
 - (a) Engage in selected medical diagnosis and treatment; and
- (b) If authorized pursuant to NRS 639.2351, prescribe controlled substances, poisons, dangerous drugs and devices,
- pursuant to a protocol approved by a collaborating physician. A protocol must not include and an advanced practitioner of nursing shall not engage in any diagnosis, treatment or other conduct which the advanced practitioner of nursing is not qualified to perform.
- 3. An advanced practitioner of nursing may perform the acts described in subsection 2 by using equipment that transfers information concerning the medical condition of a patient in this State electronically, telephonically or by fiber optics from within or outside this State or the United States.
 - 4. The Board shall adopt regulations:
- (a) Specifying the training, education and experience necessary for certification as an advanced practitioner of nursing.
- (b) Delineating the authorized scope of practice of an advanced practitioner of nursing.
- (c) Establishing the procedure for application for certification as an advanced practitioner of nursing.
 - **Sec. 9.** NRS 632.237 is hereby amended to read as follows:
- 632.237 1. The Board may grant a certificate of recognition as an advanced practitioner of nursing to a registered nurse who:
- (a) Has completed an educational program designed to prepare a registered nurse to:
 - (1) Perform designated acts of medical diagnosis;
 - (2) Prescribe therapeutic or corrective measures; and
 - (3) Prescribe controlled substances, poisons, dangerous drugs and devices;
- (b) Except as otherwise provided in subsection [4,] 5, submits proof that he or she is certified as an advanced practitioner of nursing by the American Board of Nursing Specialties, the National Commission for Certifying Agencies of the Institute for Credentialing Excellence, or their successor organizations, or any other nationally recognized certification agency approved by the Board; and

- certification.
 2. An a
 - 2. An advanced practitioner of nursing may:(a) Engage in selected medical diagnosis and treatment; and

(b) If authorized pursuant to NRS 639.2351, prescribe controlled substances, poisons, dangerous drugs and devices,

(c) Meets any other requirements established by the Board for such

- pursuant to a protocol approved by a collaborating physician. A protocol must not include and an advanced practitioner of nursing shall not engage in any diagnosis, treatment or other conduct which the advanced practitioner of nursing is not qualified to perform.
- 3. An advanced practitioner of nursing may perform the acts described in subsection 2 by using equipment that transfers information concerning the medical condition of a patient in this State electronically, telephonically or by fiber optics from within or outside this State or the United States.
 - 4. The Board shall adopt regulations:
- (a) Specifying any additional training, education and experience necessary for certification as an advanced practitioner of nursing.
- (b) Delineating the authorized scope of practice of an advanced practitioner of nursing.
- (c) Establishing the procedure for application for certification as an advanced practitioner of nursing.
- [4.] 5. The provisions of paragraph (b) of subsection 1 do not apply to an advanced practitioner of nursing who obtains a certificate of recognition before July 1, 2014.
 - **Sec. 10.** NRS 633.165 is hereby amended to read as follows:
- 633.165 1. An osteopathic physician may engage in telemedicine tind from within or outside this State or the United States if he or she possesses an unrestricted license to practice osteopathic medicine in this State pursuant to this chapter. An osteopathic physician who engages in telemedicine:
- (a) Except as otherwise provided by specific statute or regulation, shall comply with the provisions of this chapter and the regulations of the Board; and
- (b) To the extent not inconsistent with the Nevada Constitution or the United States Constitution, is subject to the jurisdiction of the courts of this State.
- 2. If an osteopathic physician engages in telemedicine with a patient who is physically located in another state or territory of the United States, the osteopathic physician shall, before engaging in telemedicine with the patient, take any steps necessary to be authorized or licensed to practice osteopathic medicine in the other state or territory of the United States in which the patient is physically located.
- [2.] 3. Except as otherwise provided in subsections [3] 4 and [4.] 5, before an osteopathic physician may engage in telemedicine pursuant to this section:
- (a) A bona fide relationship between the osteopathic physician and the patient must exist which must include, without limitation, a history and [physical] an examination or consultation which occurred in person or through the use of telemedicine and which was sufficient to establish a diagnosis and identify any underlying medical conditions of the patient.
- (b) The osteopathic physician must obtain informed [, written] consent from the patient or the legal representative of the patient to engage in telemedicine with the patient. The osteopathic physician shall [maintain] document the consent [form] as part of the permanent medical record of the patient.
- (c) The osteopathic physician must inform the patient : {, both orally and in viiting:}
- (1) That the patient or the legal representative of the patient may withdraw the consent provided pursuant to paragraph (b) at any time;

25

26

34

51

- (2) Of the potential risks, consequences and benefits of telemedicine;
- (3) Whether the osteopathic physician has a financial interest in the Internet website used to engage in telemedicine or in the products or services provided to the patient via telemedicine; and
- (4) That the transmission of any confidential medical information while engaged in telemedicine is subject to all applicable federal and state laws with respect to the protection of and access to confidential medical information. France
- (5) That the osteopathic physician will not release any confidential medical information without the express, written consent of the patient or the legal representative of the patient.]
- 4. An osteopathic physician is not required to comply with the provisions of paragraph (a) of subsection [2] 3 if the osteopathic physician engages in telemedicine for the purposes of making a diagnostic interpretation of a medical examination, study or test of the patient.
- [4.] 5. An osteopathic physician is not required to comply with the provisions of paragraph (a) or (c) of subsection $\frac{2}{3}$ in an emergency medical situation.
 - (5.) 6. The provisions of this section must not be interpreted or construed to:
- (a) Modify, expand or alter the scope of practice of an osteopathic physician pursuant to this chapter; or
- (b) Authorize the practice of osteopathic medicine or delivery of care by an osteopathic physician in a setting that is not authorized by law or in a manner that violates the standard of care required of an osteopathic physician pursuant to this
- [6.] 7. As used in this section, "telemedicine" means the practice of osteopathic medicine [through the synchronous or asynchronous transfer of medical data or information using interactive audio, video or data communication, other than through a standard telephone, faesimile transmission or electronic mail message.] by using equipment that transfers information concerning the medical condition of a patient electronically, telephonically or by fiber optics.

 Sec. 11. NRS 633.415 is hereby amended to read as follows:
- 633.415 1. Except as otherwise provided in NRS 633.315, the Board may issue a special license to teach, research or practice osteopathic medicine to a person who:
 - (a) Is] if:
 - (a) The person:
 - (1) Submits to the Board:
- (I) Proof that the person is a graduate of a foreign school which teaches osteopathic medicine;
 - (b) Teaches,
- (II) Proof that the person teaches, researches or practices osteopathic medicine outside the United States;
 - {(c) Is a recognized expert in osteopathic medicine;} and
- (III) Any other documentation or proof of qualifications required by the Board; and
- (2) Intends to teach, research or practice [clinical] osteopathic medicine at a *medical facility*, medical research facility or school of osteopathic medicine in
- (b) Any other documentation or proof of qualifications required by the Board is authenticated in a manner approved by the Board.
- 2. A person who applies for a special license *pursuant to this section* is not required to take or pass a written examination concerning his or her qualifications to practice osteopathic medicine. I, but the person must satisfy the requirements for a special license set forth in regulations adopted by the Board.

3. A person who holds a special license issued pursuant to this section may practice osteopathic medicine in this State only in accordance with the terms and restrictions established by the Board.4. If a person who holds a special license issued pursuant to this section

ceases to teach, research or practice [clinical] osteopathic medicine in this State at the *medical facility*, medical research facility or school of osteopathic medicine

where the person is employed:

(a) The *medical facility*, medical research facility or school of osteopathic medicine, as applicable, shall notify the Board; and

(b) Upon receipt of such notification, the special license expires automatically.5. The Board may renew or modify a special license issued pursuant to this section, unless the special 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 special license to an applicant in accordance with any other provision of this

chapter.

- 7. A special license to teach, research or practice osteopathic medicine may be issued, renewed or modified at a meeting of the Board or between its meetings by the President and the Executive Director of the Board. Such an action shall be deemed to be an action of the Board.
 - **Sec. 12.** NRS 633.469 is hereby amended to read as follows:

633.469 1. A supervising osteopathic physician shall provide supervision to his or her physician assistant continuously whenever the physician assistant is performing his or her professional duties.

performing his or her professional duties.

- 2. Except as otherwise provided in subsection 3, a supervising osteopathic physician may provide supervision to his or her physician assistant in person for by telecommunication. If the providing supervision is electronically, telephonically or by fiber optics. When providing supervision to telecommunication, electronically, telephonically or by fiber optics, a supervising osteopathic physician may be at a different site than the physician assistant in cluding a site located within or outside this State or the United States.
- 3. A supervising osteopathic physician shall provide supervision to his or her physician assistant in person at all times during the first 30 days that the supervising osteopathic physician supervises the physician assistant. [After the first 30 days, the supervising osteopathic physician shall not regularly maintain the physician assistant at a different site than the supervising osteopathic physician.] The provisions of this subsection do not apply to a federally qualified health center.
- 4. Before beginning to supervise a physician assistant, a supervising osteopathic physician must communicate to the physician assistant:

(a) The scope of practice of the physician assistant;

- (b) The access to the supervising osteopathic physician that the physician assistant will have; and
- (c) Any processes for evaluation that the supervising osteopathic physician will use to evaluate the physician assistant.
- 5. A supervising osteopathic physician shall not delegate to his or her physician assistant, and the physician assistant shall not accept, a task that is beyond the physician assistant's capability to complete safely.
- 6. As used in this section, "federally qualified health center" has the meaning ascribed to it in 42 U.S.C. § 1396d(l)(2)(B).

Sec. 13. NRS 639.0151 is hereby amended to read as follows:

639.0151 "Remote site" means:

- 1. A pharmacy staffed by a pharmaceutical technician and equipped to facilitate communicative access to a pharmacy and its registered pharmacists; or
 - 2. An office :

— (a) Of of a dispensing practitioner [who is employed by a nonprofit entity] that is [designated as a federally qualified health center; and _____(b). That is:

(0) That is:

(1) Staffed staffed by a dispensing technician [;] and

(2) Equipped equipped to facilitate communicative access to the dispensing practitioner,

→ [via computer link, video link and audio link] electronically, telephonically or by fiber optics during regular business hours [...] from within or outside this State or the United States.

Sec. 14. NRS 639.0153 is hereby amended to read as follows:

- 639.0153 "Satellite consultation site" means a site that only dispenses filled prescriptions which are delivered to that site after the prescriptions are prepared:
- 1. At a pharmacy where a registered pharmacist provides consultation to patients [via computer link, video link and audio link during regular business hours;]; or
 - 2. At an office :
- (a) Of of a dispensing practitioner who is employed by a nonprofit entity that is designated as a federally qualified health center; and
- (b) Where where the dispensing practitioner provides consultation to patients twia computer link, video link and audio link,
- we electronically, telephonically or by fiber optics during regular business hours from within or outside this State or the United States.
 - **Sec. 15.** NRS 639.0154 is hereby amended to read as follows: "Telepharmacy" means:
 - 1. A pharmacy; or
- 2. An office of a dispensing practitioner, twho is employed by a nonprofit entity that is designated as a federally qualified health center,
- → that is accessible by a remote site or a satellite consultation site [via computer link, video link and audio link.] electronically, telephonically or by fiber optics from within or outside this State or the United States.
 - **Sec. 16.** NRS 639.0727 is hereby amended to read as follows:
 - 639.0727 The Board shall adopt regulations:
- 1. As are necessary for the safe and efficient operation of remote sites, satellite consultation sites and telepharmacies; [and]
- 2. To define the terms "dispensing practitioner" and "dispensing technician," to provide for the registration and discipline of dispensing practitioners and dispensing technicians, and to set forth the qualifications, powers and duties of dispensing practitioners and dispensing technicians [-];
- 3. To authorize registered pharmacists to engage in the practice of pharmacy electronically, telephonically or by fiber optics from within this State; and
- 4. To authorize prescriptions to be filled and dispensed to patients as prescribed by practitioners electronically, telephonically or by fiber optics from within or outside this State or the United States.
 - **Sec. 17.** NRS 639.100 is hereby amended to read as follows:
- 639.100 1. Except as otherwise provided in this chapter, it is unlawful for any person to manufacture, engage in wholesale distribution, compound, sell or dispense, or permit to be manufactured, distributed at wholesale, compounded, sold or dispensed, any drug, poison, medicine or chemical, or to dispense or compound, or permit to be dispensed or compounded, any prescription of a practitioner, unless the person:
- (a) Is a prescribing practitioner, a person licensed to engage in wholesale distribution, a technologist in radiology or nuclear medicine under the supervision

of the prescribing practitioner, a registered pharmacist, or a registered nurse certified in oncology under the supervision of the prescribing practitioner; and

(b) Complies with the regulations adopted by the Board.

2. Sales representatives, manufacturers or wholesalers selling only in wholesale lots and not to the general public and compounders or sellers of medical gases need not be registered pharmacists. A person shall not act as a manufacturer or wholesaler unless the person has obtained a license from the Board.

- 3. Any nonprofit cooperative organization or any manufacturer or wholesaler who furnishes, sells, offers to sell or delivers a controlled substance which is intended, designed and labeled "For Veterinary Use Only" is subject to the provisions of this chapter, and shall not furnish, sell or offer to sell such a substance until the organization, manufacturer or wholesaler has obtained a license from the Board
- 4. Each application for such a license must be made on a form furnished by the Board and an application must not be considered by the Board until all the information required thereon has been completed. Upon approval of the application by the Board and the payment of the required fee, the Board shall issue a license to the applicant. Each license must be issued to a specific person for a specific location.
- 5. The Board shall not condition, limit, restrict or otherwise deny to a prescribing practitioner the issuance of a certificate, license, registration, permit or authorization to prescribe controlled substances or dangerous drugs because the practitioner is located outside this State.

Sec. 18. NRS 639.23277 is hereby amended to read as follows:

- 639.23277 1. In addition to the requirements set forth in this chapter and any other specific statute, a remote site or satellite consultation site must be located:
 - (a) At least 50 miles or more from the nearest pharmacy; and
 - (b) In a service area with a total population of less than 2,000.
 - 2. A remote site or satellite consultation site may be operated by:
- (a) A pharmaceutical technician without the physical presence of a managing pharmacist, except that the managing pharmacist of the telepharmacy shall also be deemed the managing pharmacist of the remote site or satellite consultation site; or
- (b) A dispensing technician without the physical presence of a dispensing practitioner, [who is employed by a nonprofit entity that is designated as a federally qualified health center,] except that the dispensing practitioner of the telepharmacy shall also be deemed the managing pharmacist of the remote site or satellite consultation site.
- 3. The Board shall adopt regulations for the purposes of this section, which establish the manner of determining a "service area." Such a "service area" must be a geographical area of between 5 and 10 miles in radius. In adopting the regulations, the Board may consider, without limitation, the ease or difficulty of access to the nearest pharmacy and the availability of roadways.

Sec. 19. NRS 639.235 is hereby amended to read as follows:

- 639.235 1. No person other than a practitioner holding a license to practice his or her profession in this State may prescribe or write a prescription, except that a prescription written by a person who is not licensed to practice in this State, but is authorized by the laws of another state to prescribe, shall be deemed to be a legal prescription unless the person prescribed or wrote the prescription in violation of the provisions of NRS 453.3611 to 453.3648, inclusive.
- 2. If a prescription that is prescribed by a person who is not licensed to practice in this State, but is authorized by the laws of another state to prescribe, calls for a controlled substance listed in:

 (a) Schedule II, the registered pharmacist who is to fill the prescription shall establish and document that the prescription is authentic and that a bona fide relationship between the patient and the person prescribing the controlled substance did exist when the prescription was written.

(b) Schedule III or IV, the registered pharmacist who is to fill the prescription shall establish that the prescription is authentic and that a bona fide relationship between the patient and the person prescribing the controlled substance did exist when the prescription was written. This paragraph does not require the registered pharmacist to inquire into such a relationship upon the receipt of a similar prescription subsequently issued for that patient.

3. A pharmacist who fills a prescription described in subsection 2 shall record on the prescription or in the prescription record in the pharmacy's computer:

(a) The name of the person with whom the pharmacist spoke concerning the prescription;

(b) The date and time of the conversation; and

(c) The date and time the patient was **[physically]** examined by the person prescribing the controlled substance for which the prescription was issued.

4. For the purposes of subsection 2, a bona fide relationship between the patient and the person prescribing the controlled substance shall be deemed to exist if the patient was [physically] examined in person, electronically, telephonically or by fiber optics within or outside this State or the United States by the person prescribing the controlled substances within the 6 months immediately preceding the date the prescription was issued.

Sec. 19.3. NRS 639.2392 is hereby amended to read as follows:

639.2392 1. A record of each refill of any prescription for a controlled substance or dangerous drug or any authorization to refill such a prescription must be kept:

(a) On the back of the original prescription; [or]

(b) In a bound book or separate file \vdash ; or

- (c) In an electronic record that is readily retrievable.
- 2. The record must include:
- (a) The date of each refill or authorization;
- (b) The number of dosage units; and
- (c) The signature or initials of the pharmacist who refilled the prescription or obtained the authorization to refill.

Sec. 19.7. NRS 639.2396 is hereby amended to read as follows:

- 639.2396 [A] I. Except as otherwise provided by subsection 2, a prescription which bears specific authorization to refill, given by the prescribing practitioner at the time he or she issued the original prescription, or a prescription which bears authorization permitting the pharmacist to refill the prescription as needed by the patient, may be refilled for the number of times authorized or for the period authorized if it was refilled in accordance with the number of doses ordered and the directions for use.
- 2. A pharmacist may, in his or her professional judgment and pursuant to a valid prescription that specifies an initial amount of less than a 90-day supply of a drug other than a controlled substance followed by periodic refills of the initial amount of the drug, dispense not more than a 90-day supply of the drug if:

(a) The patient has used an initial 30-day supply of the drug or the drug has previously been prescribed to the patient in a 90-day supply;

(b) The total number of dosage units that are dispensed pursuant to the prescription does not exceed the total number of dosage units, including refills, that are authorized on the prescription by the prescribing practitioner; and

- 10 11 12
- (c) The prescribing practitioner has not specified on the prescription that dispensing the prescription in an initial amount of less than a 90-day supply followed by periodic refills of the initial amount of the drug is medically necessary.
- 3. Nothing in this section shall be construed to alter the coverage provided under any contract or policy of health insurance, health plan or program or other agreement arrangement that provides health coverage. Sec. 20. NRS 639.0072 is hereby repealed.
- Sec. 21. 1. This section and sections 1 to 8, inclusive, and 10 to 20, inclusive, of this act become effective upon passage and approval.
 - 2. Section 8 of this act expires by limitation on June 30, 2014.
 - 3. Section 9 of this act becomes effective on July 1, 2014.

TEXT OF REPEALED SECTION

639.0072 "Federally qualified health center" **defined.** "Federally qualified health center" has the meaning ascribed to it in 42 U.S.C. § 1396d(1)(2)(B).