

SENATE BILL NO. 172—SENATORS FARLEY,
HARDY AND WOODHOUSE

FEBRUARY 18, 2015

Referred to Committee on Health and Human Services

SUMMARY—Makes various changes relating to the authorized activities of medical students. (BDR 40-797)

FISCAL NOTE: Effect on Local Government: No.
Effect on the State: No.

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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 public health; prohibiting a medical facility from allowing a person who is not enrolled in good standing at an accredited medical school or school of osteopathic medicine to perform or participate in any activity for credit towards a medical degree; prohibiting a physician from allowing such a person to perform or participate in certain activities under certain circumstances; requiring a medical student to attend an accredited medical school in order to possess and administer a controlled substance or dangerous drug; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Sections 1, 8 and 10 of this bill prohibit a medical facility or a physician from allowing a person to perform or participate in activities for credit toward a medical degree unless the person is enrolled in good standing at an accredited medical school. **Sections 8 and 10** exempt a physician from this prohibition if: (1) the activity takes place in a primary care practice that is located in a designated health professional shortage area and is entirely under the supervision of the physician; and (2) the physician is not currently supervising other medical students. **Sections 3-5, 9, 11 and 12** of this bill give the Division of Public and Behavioral Health of the Department of Health and Human Services, the Board of Medical Examiners, the State Board of Osteopathic Medicine and the Board of Examiners for Long-term Care Administrators the authority to enforce this prohibition with respect to their licensees.

Under existing law, a student at an approved medical school is authorized to possess and administer a controlled substance or dangerous drug at the direction of a physician. (NRS 453.375, 454.213) **Sections 6 and 7** of this bill instead allow a



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16 medical student who attends an accredited medical school to possess and administer
17 such drugs.

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

1 **Section 1.** Chapter 449 of NRS is hereby amended by adding
2 thereto a new section to read as follows:

3 *A medical facility shall not allow a person to perform or*
4 *participate in any activity at the facility for the purpose of*
5 *receiving credit toward a degree of doctor of medicine, osteopathy*
6 *or osteopathic medicine, including, without limitation, clinical*
7 *observation and contact with patients, unless the person is*
8 *enrolled in good standing at:*

9 1. *A medical school that is accredited by the Liaison*
10 *Committee on Medical Education of the American Medical*
11 *Association and the Association of American Medical Colleges or*
12 *their successor organizations; or*

13 2. *A school of osteopathic medicine, as defined in*
14 *NRS 633.121.*

15 **Sec. 2.** NRS 449.0301 is hereby amended to read as follows:

16 449.0301 The provisions of NRS 449.030 to 449.2428,
17 inclusive, *and section 1 of this act* do not apply to:

18 1. Any facility conducted by and for the adherents of any
19 church or religious denomination for the purpose of providing
20 facilities for the care and treatment of the sick who depend solely
21 upon spiritual means through prayer for healing in the practice of
22 the religion of the church or denomination, except that such a
23 facility shall comply with all regulations relative to sanitation and
24 safety applicable to other facilities of a similar category.

25 2. Foster homes as defined in NRS 424.014.

26 3. Any medical facility or facility for the dependent operated
27 and maintained by the United States Government or an agency
28 thereof.

29 **Sec. 3.** NRS 449.0306 is hereby amended to read as follows:

30 449.0306 1. Money received from licensing medical facilities
31 and facilities for the dependent must be forwarded to the State
32 Treasurer for deposit in the State General Fund.

33 2. The Division shall enforce the provisions of NRS 449.030 to
34 449.245, inclusive, *and section 1 of this act*, and may incur any
35 necessary expenses not in excess of money appropriated for that
36 purpose by the State or received from the Federal Government.

37 **Sec. 4.** NRS 449.160 is hereby amended to read as follows:

38 449.160 1. The Division may deny an application for a
39 license or may suspend or revoke any license issued under the



1 provisions of NRS 449.030 to 449.2428, inclusive, *and section 1 of*
2 *this act* upon any of the following grounds:

3 (a) Violation by the applicant or the licensee of any of the
4 provisions of NRS 439B.410 or 449.030 to 449.245, inclusive, *and*
5 *section 1 of this act*, or of any other law of this State or of the
6 standards, rules and regulations adopted thereunder.

7 (b) Aiding, abetting or permitting the commission of any illegal
8 act.

9 (c) Conduct inimical to the public health, morals, welfare and
10 safety of the people of the State of Nevada in the maintenance and
11 operation of the premises for which a license is issued.

12 (d) Conduct or practice detrimental to the health or safety of the
13 occupants or employees of the facility.

14 (e) Failure of the applicant to obtain written approval from the
15 Director of the Department of Health and Human Services as
16 required by NRS 439A.100 or as provided in any regulation adopted
17 pursuant to NRS 449.001 to 449.430, inclusive, *and section 1 of*
18 *this act* and 449.435 to 449.965, inclusive, if such approval is
19 required.

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

21 2. In addition to the provisions of subsection 1, the Division
22 may revoke a license to operate a facility for the dependent if, with
23 respect to that facility, the licensee that operates the facility, or an
24 agent or employee of the licensee:

25 (a) Is convicted of violating any of the provisions of
26 NRS 202.470;

27 (b) Is ordered to but fails to abate a nuisance pursuant to NRS
28 244.360, 244.3603 or 268.4124; or

29 (c) Is ordered by the appropriate governmental agency to correct
30 a violation of a building, safety or health code or regulation but fails
31 to correct the violation.

32 3. The Division shall maintain a log of any complaints that it
33 receives relating to activities for which the Division may revoke the
34 license to operate a facility for the dependent pursuant to subsection
35 2. The Division shall provide to a facility for the care of adults
36 during the day:

37 (a) A summary of a complaint against the facility if the
38 investigation of the complaint by the Division either substantiates
39 the complaint or is inconclusive;

40 (b) A report of any investigation conducted with respect to the
41 complaint; and

42 (c) A report of any disciplinary action taken against the facility.

43 ➤ The facility shall make the information available to the public
44 pursuant to NRS 449.2486.



4. On or before February 1 of each odd-numbered year, the 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 Division pursuant to subsection 3; and

(b) Any disciplinary actions taken by the Division pursuant to subsection 2.

Sec. 5. 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 449.2428, inclusive, *and section 1 of this act*, or any condition, standard or regulation adopted by the Board, the 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 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 Division may require any facility that violates any provision of NRS 439B.410 or 449.030 to 449.2428, inclusive, *and section 1 of this act*, 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 NRS 449.001 to 449.430, inclusive, *and section 1 of this act* and 449.435 to 449.965, inclusive, 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. 6. NRS 453.375 is hereby amended to read as follows:

453.375 **1.** A controlled substance may be possessed and administered by the following persons:

~~{1}~~ (a) A practitioner.

~~{2}~~ (b) A registered nurse licensed to practice professional nursing or licensed practical nurse, at the direction of a physician, physician assistant, dentist, podiatric physician or advanced practice registered nurse, or pursuant to a chart order, for administration to a patient at another location.

~~{3}~~ (c) A paramedic:

~~{a}~~ (I) As authorized by regulation of:

~~{(1)}~~ (I) The State Board of Health in a county whose population is less than 100,000; or

~~{(2)}~~ (II) A county or district board of health in a county whose population is 100,000 or more; and

~~{(b)}~~ (2) In accordance with any applicable regulations of:

~~{(1)}~~ (I) The State Board of Health in a county whose population is less than 100,000;

~~{(2)}~~ (II) A county board of health in a county whose population is 100,000 or more; or

~~{(3)}~~ (III) A district board of health created pursuant to NRS 439.362 or 439.370 in any county.

~~{4}~~ (d) A respiratory therapist, at the direction of a physician or physician assistant.

~~{5}~~ (e) A medical student, student in training to become a physician assistant or student nurse in the course of his or her studies at an ~~{approved}~~ *accredited* college of medicine or *approved* school of professional or practical nursing, at the direction of a physician or physician assistant and:

~~{a}~~ (I) In the presence of a physician, physician assistant or a registered nurse; or



~~[(b)]~~ (2) Under the supervision of a physician, physician assistant or a registered nurse if the student is authorized by the college or school to administer the substance outside the presence of a physician, physician assistant or nurse.

↳ A medical student or student nurse may administer a controlled substance in the presence or under the supervision of a registered nurse alone only if the circumstances are such that the registered nurse would be authorized to administer it personally.

~~[(6)]~~ (f) An ultimate user or any person whom the ultimate user designates pursuant to a written agreement.

~~[(7)]~~ (g) Any person designated by the head of a correctional institution.

~~[(8)]~~ (h) A veterinary technician at the direction of his or her supervising veterinarian.

~~[(9)]~~ (i) In accordance with applicable regulations of the State Board of Health, an employee of a residential facility for groups, as defined in NRS 449.017, pursuant to a written agreement entered into by the ultimate user.

~~[(10)]~~ (j) In accordance with applicable regulations of the State Board of Pharmacy, an animal control officer, a wildlife biologist or an employee designated by a federal, state or local governmental agency whose duties include the control of domestic, wild and predatory animals.

~~[(11)]~~ (k) A person who is enrolled in a training program to become a paramedic, respiratory therapist or veterinary technician if the person possesses and administers the controlled substance in the same manner and under the same conditions that apply, respectively, to a paramedic, respiratory therapist or veterinary technician who may possess and administer the controlled substance, and under the direct supervision of a person licensed or registered to perform the respective medical art or a supervisor of such a person.

2. As used in this section, "accredited college of medicine" means:

(a) A medical school that is accredited by the Liaison Committee on Medical Education of the American Medical Association and the Association of American Medical Colleges or their successor organizations; or

(b) A school of osteopathic medicine, as defined in NRS 633.121.

Sec. 7. NRS 454.213 is hereby amended to read as follows:

454.213 **1.** A drug or medicine referred to in NRS 454.181 to 454.371, inclusive, may be possessed and administered by:

~~[(1)]~~ (a) A practitioner.

~~[(2)]~~ (b) A physician assistant licensed pursuant to chapter 630 or 633 of NRS, at the direction of his or her supervising physician or



1 a licensed dental hygienist acting in the office of and under the
2 supervision of a dentist.

3 ~~[(3)]~~ (c) Except as otherwise provided in ~~[(subsection—4,]~~
4 **paragraph (d)**, a registered nurse licensed to practice professional
5 nursing or licensed practical nurse, at the direction of a prescribing
6 physician, physician assistant licensed pursuant to chapter 630 or
7 633 of NRS, dentist, podiatric physician or advanced practice
8 registered nurse, or pursuant to a chart order, for administration to a
9 patient at another location.

10 ~~[(4)]~~ (d) In accordance with applicable regulations of the Board,
11 a registered nurse licensed to practice professional nursing or
12 licensed practical nurse who is:

13 ~~[(a)]~~ (1) Employed by a health care agency or health care
14 facility that is authorized to provide emergency care, or to respond
15 to the immediate needs of a patient, in the residence of the patient;
16 and

17 ~~[(b)]~~ (2) Acting under the direction of the medical director of
18 that agency or facility who works in this State.

19 ~~[(5)]~~ (e) A medication aide - certified at a designated facility
20 under the supervision of an advanced practice registered nurse or
21 registered nurse and in accordance with standard protocols
22 developed by the State Board of Nursing. As used in this
23 ~~[(subsection,)]~~ **paragraph**, “designated facility” has the meaning
24 ascribed to it in NRS 632.0145.

25 ~~[(6)]~~ (f) Except as otherwise provided in ~~[(subsection—7,]~~
26 **paragraph (g)**, an advanced emergency medical technician or a
27 paramedic, as authorized by regulation of the State Board of
28 Pharmacy and in accordance with any applicable regulations of:

29 ~~[(a)]~~ (1) The State Board of Health in a county whose
30 population is less than 100,000;

31 ~~[(b)]~~ (2) A county board of health in a county whose population
32 is 100,000 or more; or

33 ~~[(e)]~~ (3) A district board of health created pursuant to NRS
34 439.362 or 439.370 in any county.

35 ~~[(7)]~~ (g) An advanced emergency medical technician or a
36 paramedic who holds an endorsement issued pursuant to NRS
37 450B.1975, under the direct supervision of a local health officer or a
38 designee of the local health officer pursuant to that section.

39 ~~[(8)]~~ (h) A respiratory therapist employed in a health care
40 facility. The therapist may possess and administer respiratory
41 products only at the direction of a physician.

42 ~~[(9)]~~ (i) A dialysis technician, under the direction or supervision
43 of a physician or registered nurse only if the drug or medicine is
44 used for the process of renal dialysis.



~~{10-}~~ (j) A medical student or student nurse in the course of his or her studies at an ~~{approved}~~ *accredited* college of medicine or *approved* school of professional or practical nursing, at the direction of a physician and:

~~{a)}~~ (I) In the presence of a physician or a registered nurse; or

~~{b)}~~ (2) Under the supervision of a physician or a registered nurse if the student is authorized by the college or school to administer the drug or medicine outside the presence of a physician or nurse.

➤ A medical student or student nurse may administer a dangerous drug in the presence or under the supervision of a registered nurse alone only if the circumstances are such that the registered nurse would be authorized to administer it personally.

~~{11-}~~ (k) Any person designated by the head of a correctional institution.

~~{12-}~~ (l) An ultimate user or any person designated by the ultimate user pursuant to a written agreement.

~~{13-}~~ (m) A nuclear medicine technologist, at the direction of a physician and in accordance with any conditions established by regulation of the Board.

~~{14-}~~ (n) A radiologic technologist, at the direction of a physician and in accordance with any conditions established by regulation of the Board.

~~{15-}~~ (o) A chiropractic physician, but only if the drug or medicine is a topical drug used for cooling and stretching external tissue during therapeutic treatments.

~~{16-}~~ (p) A physical therapist, but only if the drug or medicine is a topical drug which is:

~~{a)}~~ (I) Used for cooling and stretching external tissue during therapeutic treatments; and

~~{b)}~~ (2) Prescribed by a licensed physician for:

~~{1)}~~ (I) Iontophoresis; or

~~{2)}~~ (II) The transmission of drugs through the skin using ultrasound.

~~{17-}~~ (q) In accordance with applicable regulations of the State Board of Health, an employee of a residential facility for groups, as defined in NRS 449.017, pursuant to a written agreement entered into by the ultimate user.

~~{18-}~~ (r) A veterinary technician or a veterinary assistant at the direction of his or her supervising veterinarian.

~~{19-}~~ (s) In accordance with applicable regulations of the Board, a registered pharmacist who:

~~{a)}~~ (I) Is trained in and certified to carry out standards and practices for immunization programs;



~~(b)~~ (2) Is authorized to administer immunizations pursuant to written protocols from a physician; and

~~(e)~~ (3) Administers immunizations in compliance with the "Standards for Immunization Practices" recommended and approved by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention.

~~(20-)~~ (t) A registered pharmacist pursuant to written guidelines and protocols developed and approved pursuant to NRS 639.2809.

~~(21-)~~ (u) A person who is enrolled in a training program to become a physician assistant licensed pursuant to chapter 630 or 633 of NRS, dental hygienist, advanced emergency medical technician, paramedic, respiratory therapist, dialysis technician, nuclear medicine technologist, radiologic technologist, physical therapist or veterinary technician if the person possesses and administers the drug or medicine in the same manner and under the same conditions that apply, respectively, to a physician assistant licensed pursuant to chapter 630 or 633 of NRS, dental hygienist, advanced emergency medical technician, paramedic, respiratory therapist, dialysis technician, nuclear medicine technologist, radiologic technologist, physical therapist or veterinary technician who may possess and administer the drug or medicine, and under the direct supervision of a person licensed or registered to perform the respective medical art or a supervisor of such a person.

~~(22-)~~ (v) A medical assistant, in accordance with applicable regulations of the:

~~(a)~~ (I) Board of Medical Examiners, at the direction of the prescribing physician and under the supervision of a physician or physician assistant.

~~(b)~~ (2) State Board of Osteopathic Medicine, at the direction of the prescribing physician and under the supervision of a physician or physician assistant.

2. As used in this section, "accredited college of medicine" has the meaning ascribed to it in NRS 453.375.

Sec. 8. Chapter 630 of NRS is hereby amended by adding thereto a new section to read as follows:

1. Except as otherwise provided in subsection 2, a physician shall not allow a person to perform or participate in any activity under the supervision of the physician for the purpose of receiving credit toward a degree of doctor of medicine, osteopathy or osteopathic medicine, including, without limitation, clinical observation and contact with patients, unless the person is enrolled in good standing at:

(a) A medical school that is accredited by the Liaison Committee on Medical Education of the American Medical



Association and the Association of American Medical Colleges or their successor organizations; or

(b) A school of osteopathic medicine, as defined in NRS 633.121.

2. The provisions of subsection 1 do not apply to a physician who supervises an activity performed by a person for the purpose of receiving credit toward a degree of doctor of medicine, osteopathy or osteopathic medicine if:

(a) The activity takes place:

(1) In a primary care practice that is located in an area that has been designated by the United States Secretary of Health and Human Services as a health professional shortage area pursuant to 42 U.S.C. § 254e; and

(2) Entirely under the supervision of the physician; and

(b) The physician is not currently supervising any other person who is receiving credit toward a degree of doctor of medicine, osteopathy or osteopathic medicine.

3. As used in this section, "primary care practice" means a health care practice operated by one or more physicians who practice in the area of family practice, internal medicine or pediatrics.

Sec. 9. NRS 630.306 is hereby amended to read as follows:

630.306 The following acts, among others, constitute grounds for initiating disciplinary action or denying licensure:

1. Inability to practice medicine with reasonable skill and safety because of illness, a mental or physical condition or the use of alcohol, drugs, narcotics or any other substance.

2. Engaging in any conduct:

(a) Which is intended to deceive;

(b) Which the Board has determined is a violation of the standards of practice established by regulation of the Board; or

(c) Which is in violation of a regulation adopted by the State Board of Pharmacy.

3. Administering, dispensing or prescribing any controlled substance, or any dangerous drug as defined in chapter 454 of NRS, to or for himself or herself or to others except as authorized by law.

4. Performing, assisting or advising the injection of any substance containing liquid silicone into the human body, except for the use of silicone oil to repair a retinal detachment.

5. Practicing or offering to practice beyond the scope permitted by law or performing services which the licensee knows or has reason to know that he or she is not competent to perform or which are beyond the scope of his or her training.

6. Performing, without first obtaining the informed consent of the patient or the patient's family, any procedure or prescribing any



1 therapy which by the current standards of the practice of medicine is
2 experimental.

3 7. Continual failure to exercise the skill or diligence or use the
4 methods ordinarily exercised under the same circumstances by
5 physicians in good standing practicing in the same specialty or field.

6 8. Habitual intoxication from alcohol or dependency on
7 controlled substances.

8 9. Making or filing a report which the licensee or applicant
9 knows to be false or failing to file a record or report as required by
10 law or regulation.

11 10. Failing to comply with the requirements of NRS 630.254.

12 11. Failure by a licensee or applicant to report in writing,
13 within 30 days, any disciplinary action taken against the licensee or
14 applicant by another state, the Federal Government or a foreign
15 country, including, without limitation, the revocation, suspension or
16 surrender of a license to practice medicine in another jurisdiction.

17 12. Failure by a licensee or applicant to report in writing,
18 within 30 days, any criminal action taken or conviction obtained
19 against the licensee or applicant, other than a minor traffic violation,
20 in this State or any other state or by the Federal Government, a
21 branch of the Armed Forces of the United States or any local or
22 federal jurisdiction of a foreign country.

23 13. Failure to be found competent to practice medicine as a
24 result of an examination to determine medical competency pursuant
25 to NRS 630.318.

26 14. Operation of a medical facility at any time during which:

27 (a) The license of the facility is suspended or revoked; or

28 (b) An act or omission occurs which results in the suspension or
29 revocation of the license pursuant to NRS 449.160.

30 ➤ This subsection applies to an owner or other principal responsible
31 for the operation of the facility.

32 15. Failure to comply with the requirements of NRS 630.373.

33 16. Engaging in any act that is unsafe or unprofessional
34 conduct in accordance with regulations adopted by the Board.

35 17. Knowingly procuring or administering a controlled
36 substance or a dangerous drug as defined in chapter 454 of NRS that
37 is not approved by the United States Food and Drug Administration,
38 unless the unapproved controlled substance or dangerous drug:

39 (a) Was procured through a retail pharmacy licensed pursuant to
40 chapter 639 of NRS;

41 (b) Was procured through a Canadian pharmacy which is
42 licensed pursuant to chapter 639 of NRS and which has been
43 recommended by the State Board of Pharmacy pursuant to
44 subsection 4 of NRS 639.2328; or



(c) Is marijuana being used for medical purposes in accordance with chapter 453A of NRS.

18. Failure to supervise adequately a medical assistant pursuant to the regulations of the Board.

19. Failure to comply with the provisions of section 8 of this act.

Sec. 10. Chapter 633 of NRS is hereby amended by adding thereto a new section to read as follows:

1. Except as otherwise provided in subsection 2, an osteopathic physician shall not allow a person to perform or participate in any activity under the supervision of the osteopathic physician for the purpose of receiving credit toward a degree of doctor of medicine, osteopathy or osteopathic medicine, including, without limitation, clinical observation and contact with patients, unless the person is enrolled in good standing at:

(a) A medical school that is accredited by the Liaison Committee on Medical Education of the American Medical Association and the Association of American Medical Colleges or their successor organizations; or

(b) A school of osteopathic medicine.

2. The provisions of subsection 1 do not apply to an osteopathic physician who supervises an activity performed by a person for the purpose of receiving credit toward a degree of doctor of medicine, osteopathy or osteopathic medicine if:

(a) The activity takes place:

(1) In a primary care practice that is located in an area that has been designated by the United States Secretary of Health and Human Services as a health professional shortage area pursuant to 42 U.S.C. § 254e; and

(2) Entirely under the supervision of the osteopathic physician; and

(b) The osteopathic physician is not currently supervising any other person who is receiving credit toward a degree of doctor of medicine, osteopathy or osteopathic medicine.

3. As used in this section, “primary care practice” means a health care practice operated by one or more physicians who practice in the area of family practice, internal medicine or pediatrics.

Sec. 11. NRS 633.511 is hereby amended to read as follows:

633.511 The grounds for initiating disciplinary action pursuant to this chapter are:

1. Unprofessional conduct.

2. Conviction of:



(a) A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in chapter 454 of NRS;

(b) A felony relating to the practice of osteopathic medicine or practice as a physician assistant;

(c) A violation of any of the provisions of NRS 616D.200, 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive;

(d) Murder, voluntary manslaughter or mayhem;

(e) Any felony involving the use of a firearm or other deadly weapon;

(f) Assault with intent to kill or to commit sexual assault or mayhem;

(g) Sexual assault, statutory sexual seduction, incest, lewdness, indecent exposure or any other sexually related crime;

(h) Abuse or neglect of a child or contributory delinquency; or

(i) Any offense involving moral turpitude.

3. The suspension of a license to practice osteopathic medicine or to practice as a physician assistant by any other jurisdiction.

4. Malpractice or gross malpractice, which may be evidenced by a claim of malpractice settled against a licensee.

5. Professional incompetence.

6. Failure to comply with the requirements of NRS 633.527.

7. Failure to comply with the requirements of subsection 3 of NRS 633.471.

8. Failure to comply with the provisions of NRS 633.694.

9. Operation of a medical facility, as defined in NRS 449.0151, at any time during which:

(a) The license of the facility is suspended or revoked; or

(b) An act or omission occurs which results in the suspension or revocation of the license pursuant to NRS 449.160.

↪ This subsection applies to an owner or other principal responsible for the operation of the facility.

10. Failure to comply with the provisions of subsection 2 of NRS 633.322.

11. Signing a blank prescription form.

12. Knowingly procuring or administering a controlled substance or a dangerous drug as defined in chapter 454 of NRS that is not approved by the United States Food and Drug Administration, unless the unapproved controlled substance or dangerous drug:

(a) Was procured through a retail pharmacy licensed pursuant to chapter 639 of NRS;

(b) Was procured through a Canadian pharmacy which is licensed pursuant to chapter 639 of NRS and which has been recommended by the State Board of Pharmacy pursuant to subsection 4 of NRS 639.2328; or



(c) Is marijuana being used for medical purposes in accordance with chapter 453A of NRS.

13. Attempting, directly or indirectly, by intimidation, coercion or deception, to obtain or retain a patient or to discourage the use of a second opinion.

14. Terminating the medical care of a patient without adequate notice or without making other arrangements for the continued care of the patient.

15. In addition to the provisions of subsection 3 of NRS 633.524, making or filing a report which the licensee knows to be false, failing to file a record or report that is required by law or willfully obstructing or inducing another to obstruct the making or filing of such a record or report.

16. Failure to report any person the licensee knows, or has reason to know, is in violation of the provisions of this chapter or the regulations of the Board within 30 days after the date the licensee knows or has reason to know of the violation.

17. Failure by a licensee or applicant to report in writing, within 30 days, any criminal action taken or conviction obtained against the licensee or applicant, other than a minor traffic violation, in this State or any other state or by the Federal Government, a branch of the Armed Forces of the United States or any local or federal jurisdiction of a foreign country.

18. Engaging in any act that is unsafe in accordance with regulations adopted by the Board.

19. Failure to comply with the provisions of NRS 633.165.

20. Failure to supervise adequately a medical assistant pursuant to the regulations of the Board.

21. Failure to comply with the provisions of section 10 of this act.

Sec. 12. NRS 654.190 is hereby amended to read as follows:

654.190 1. The Board may, after notice and an opportunity for a hearing as required by law, impose an administrative fine of not more than \$10,000 for each violation on, recover reasonable investigative fees and costs incurred from, suspend, revoke, deny the issuance or renewal of or place conditions on the license of, and place on probation or impose any combination of the foregoing on any nursing facility administrator or administrator of a residential facility for groups who:

(a) Is convicted of a felony relating to the practice of administering a nursing facility or residential facility or of any offense involving moral turpitude.

(b) Has obtained his or her license by the use of fraud or deceit.

(c) Violates any of the provisions of this chapter.



(d) Aids or abets any person in the violation of any of the provisions of NRS 449.030 to 449.2428, inclusive, *and section 1 of this act*, as those provisions pertain to a facility for skilled nursing, facility for intermediate care or residential facility for groups.

(e) Violates any regulation of the Board prescribing additional standards of conduct for nursing facility administrators or administrators of residential facilities for groups, including, without limitation, a code of ethics.

(f) Engages in conduct that violates the trust of a patient or resident or exploits the relationship between the nursing facility administrator or administrator of a residential facility for groups and the patient or resident for the financial or other gain of the licensee.

2. If a licensee requests a hearing pursuant to subsection 1, the Board shall give the licensee written notice of a hearing pursuant to NRS 233B.121 and 241.034. A licensee may waive, in writing, his or her right to attend the hearing.

3. The Board may compel the attendance of witnesses or the production of documents or objects by subpoena. The Board may adopt regulations that set forth a procedure pursuant to which the Chair of the Board may issue subpoenas on behalf of the Board. Any person who is subpoenaed pursuant to this subsection may request the Board to modify the terms of the subpoena or grant additional time for compliance.

4. An order that imposes discipline and the findings of fact and conclusions of law supporting that order are public records.

5. The expiration of a license by operation of law or by order or decision of the Board or a court, or the voluntary surrender of a license, does not deprive the Board of jurisdiction to proceed with any investigation of, or action or disciplinary proceeding against, the licensee or to render a decision suspending or revoking the license.

Sec. 12.5. The amendatory provisions of this act do not apply to any activity authorized pursuant to a contract entered into before July 1, 2015, between a facility licensed pursuant to chapter 449 of NRS and a medical school or medical school training institution that is listed in the International Medical Education Directory managed by the Foundation for Advancement of International Medical Education and Research.

Sec. 13. This act becomes effective on July 1, 2015.

