#### THE SEVENTY-THIRD DAY

CARSON CITY (Wednesday), April 19, 2017

Senate called to order at 11:09 a.m.

President Hutchison presiding.

Roll called.

All present.

Prayer by the Chaplain, Captain Mark Cyr.

My Heavenly Father, we come to You with thankfulness for the blessings You give us. We thank You for our State Senators and their faithfulness. We ask You to be with them and guide them at this busy and stressful time. We ask that You fill them with wisdom and understanding; guide them as they lead us and unite them together as a single voice for what is best for our State and its people. Give them courage, strength, knowledge, vision and truth.

Father, we pray these things in the Name of Your Son, Jesus.

AMEN.

Pledge of Allegiance to the Flag.

By previous order of the Senate, the reading of the Journal is dispensed with, and the President and Secretary are authorized to make the necessary corrections and additions.

#### REPORTS OF COMMITTEES

### Mr. President:

Your Committee on Commerce, Labor and Energy, to which were referred Senate Bills Nos. 210, 227, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

KELVIN ATKINSON, Chair

#### Mr. President:

Your Committee on Education, to which was referred Senate Bill No. 20, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

Also, your Committee on Education, to which was referred Senate Bill No. 154, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and re-refer to the Committee on Finance.

Moises Denis, Chair

#### Mr. President:

Your Committee on Government Affairs, to which were referred Senate Bills Nos. 246, 397, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

DAVID R. PARKS, Chair

## Mr. President:

Your Committee on Judiciary, to which were referred Senate Bills Nos. 32, 277, 472, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

TICK SEGERBLOM, Chair

Mr. President:

Your Committee on Natural Resources, to which was referred Senate Bill No. 418, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and re-refer to the Committee on Finance.

YVANNA D. CANCELA, Chair

Mr. President:

Your Committee on Senate Parliamentary Rules and Procedures has approved the consideration of: Amendment No. 297 to Senate Bill No. 342.

KELVIN ATKINSON, Chair

#### MESSAGES FROM THE ASSEMBLY

ASSEMBLY CHAMBER, Carson City, April 18, 2017

To the Honorable the Senate:

I have the honor to inform your honorable body that the Assembly on this day passed Assembly Bills Nos. 252, 337, 461, 464, 465, 466, 476, 482, 488, 490.

Also, I have the honor to inform your honorable body that the Assembly on this day passed, as amended, Assembly Bills Nos. 79, 451.

CAROL AIELLO-SALA
Assistant Chief Clerk of the Assembly

#### MOTIONS, RESOLUTIONS AND NOTICES

Senator Spearman moved that Senate Bill No. 146 be taken from the General File and placed on the Secretary's desk.

Motion carried.

Senator Farley moved that Senate Bill No. 342 be taken from the General File and placed on the Secretary's desk.

Motion carried.

INTRODUCTION, FIRST READING AND REFERENCE

Assembly Bill No. 79.

Senator Atkinson moved that the bill be referred to the Committee on Government Affairs.

Motion carried.

Assembly Bill No. 252.

Senator Atkinson moved that the bill be referred to the Committee on Transportation.

Motion carried.

Assembly Bill No. 337.

Senator Atkinson moved that the bill be referred to the Committee on Government Affairs.

Motion carried.

Assembly Bill No. 451.

Senator Atkinson moved that the bill be referred to the Committee on Education.

Motion carried.

Assembly Bill No. 461.

Senator Atkinson moved that the bill be referred to the Committee on Government Affairs.

Motion carried.

Assembly Bill No. 464.

Senator Atkinson moved that the bill be referred to the Committee on Government Affairs.

Motion carried.

Assembly Bill No. 465.

Senator Atkinson moved that the bill be referred to the Committee on Government Affairs.

Motion carried.

Assembly Bill No. 466.

Senator Atkinson moved that the bill be referred to the Committee on Government Affairs.

Motion carried.

Assembly Bill No. 476.

Senator Atkinson moved that the bill be referred to the Committee on Government Affairs.

Motion carried.

Assembly Bill No. 482.

Senator Atkinson moved that the bill be referred to the Committee on Education.

Motion carried.

Assembly Bill No. 488.

Senator Atkinson moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 490.

Senator Atkinson moved that the bill be referred to the Committee on Natural Resources.

Motion carried.

SECOND READING AND AMENDMENT

Senate Bill No. 10.

Bill read second time.

The following amendment was proposed by the Committee on Judiciary:

Amendment No. 209.

SUMMARY—Revises provisions governing the publication of information concerning unclaimed and abandoned property. (BDR 10-407)

AN ACT relating to unclaimed property; revising provisions governing the publication of information concerning certain unclaimed and abandoned

property and the sale of such property; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law establishes the Uniform Unclaimed Property Act, which sets forth various provisions relating to the disposition of certain abandoned property. (Chapter 120A of NRS) Under existing law, the State Treasurer acts as the Administrator of Unclaimed Property. (NRS 120A.025) Existing law requires the Administrator annually to publish a notice that lists the name of each person who appears to own certain kinds of property that has been abandoned by its owner and taken into custody by the Administrator. The notice must also contain a statement that information about such property may be obtained from the Administrator. The Administrator is required to provide this notice by purchasing an advertisement in a newspaper of the county of the last known address of each apparent owner of abandoned property that is in the custody of the Administrator. (NRS 120A.580) Section 1 of this bill [eliminates] revises the requirements that the notice include information concerning individual owners for a county by county basis and requires that revised information concerning the abandoned property be advertised in certain newspapers in every county in this State. Section and instead provides among other things that: (1) in a county whose population is 700,000 or more (currently Clark County), such a notice must be published in a newspaper with the largest circulation in the county at least six times per year and must provide certain instructions on how to search and access information relating to unclaimed property; and (2) in a county whose population is less than 700,000 (currently any county other than Clark County), such a notice must be published in a newspaper with the largest circulation in the county not less than once each year and must include the last known city of any person named in the notice. Section 1 also requires the Administrator to publish the notice at least 90 days before the date a holder of property must file certain reports. Finally, section 1 [also] authorizes the Administrator to provide additional information concerning unclaimed or abandoned property at any time and in any manner that the Administrator selects.

Existing law requires the Administrator to sell certain abandoned property in his or her custody within 2 years after taking the property into custody. The Administrator is required to publish a notice in a newspaper of general circulation in the county in which the property is to be sold at least 3 weeks before the sale. (NRS 120A.610) Section 2 of this bill requires the Administrator to publish such a notice not less than 21 days before the sale. Section 2 also authorizes the Administrator to provide additional notice of such sales at any time and in any manner that the Administrator selects.

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

Section 1. NRS 120A.580 is hereby amended to read as follows: 120A.580 1. The Administrator shall publish a notice not later than

November 30 of the year next following the year in which abandoned property has been paid or delivered to the Administrator. The notice must [be]:

- (a) In a county whose population is 700,000 or more:
- (1) Be published <u>not less than six times</u> in a newspaper [of general] <u>with</u> <u>the largest</u> circulation in the <u>feach</u>] county [of this State in which is located];
- (2) Include instructions on how to search and access information relating to unclaimed property; and
  - (3) Be not less than one full page in size.
- (b) In a county whose population is less than 700,000:
- (1) Be published not less than once each year in a newspaper with the largest circulation in the county; and
- (2) Include the last known [address] city of any person named in the notice. [If a holder does not report an address for the apparent owner or the address is outside this State, the notice must be published in a county that the Administrator reasonably selects. and be]
- (c) If a holder of property must file a report pursuant to NRS 120A.560:
- (1) Be published in a newspaper of general circulation not less than 90 days before the date the holder must file the report; and
  - (2) Be not less than one full page in size.
- <u>2.</u> The advertisement <u>required in subsection 1</u> must be in a form that, in the judgment of the Administrator, is likely to attract the attention of [the apparent owner of the] persons who may have a legal or equitable interest in unclaimed property [.] or of the legal representatives of such persons. The form must contain:
- (a) The name [of each person appearing to be the owner of the property, as set forth in the report filed by the holder;
- (b) The city or town in which the last known address of each person appearing to be the owner of the property is located, if a city or town is set forth in the report filed by the holder;
- (e)], physical address <u>, telephone number</u> and Internet address of the website of the Administrator;
- (b) A statement explaining that *unclaimed* property [of the owner] is presumed to be abandoned and has been taken into the protective custody of the Administrator; and
- [(d)] (c) A statement that information about [the] property taken into protective custody and its return to the owner is available to the owner or a person having a legal or beneficial interest in the property, upon request to the Administrator [-], directed to the Deputy of Unclaimed Property.
- 2.3. The Administrator [is not required to advertise the name and city or town of an owner of property having a total value less than \$50 or information concerning a traveler's check, money order or similar instrument.] may advertise or otherwise provide information concerning unclaimed or abandoned property, including, without limitation, the information set forth in subsection [1.1, 2], at any time and in any manner that the Administrator selects.

- Sec. 2. NRS 120A.610 is hereby amended to read as follows:
- 120A.610 1. Except as otherwise provided in subsections 4 to 8, inclusive, all abandoned property other than money delivered to the Administrator under this chapter must, within 2 years after the delivery, be sold by the Administrator to the highest bidder at public sale in whatever manner affords, in his or her judgment, the most favorable market for the property. The Administrator may decline the highest bid and reoffer the property for sale if the Administrator considers the bid to be insufficient.
- 2. Any sale held under this section must be preceded by a single publication of notice, [at least 3 weeks] <u>not less than 21 days</u> before sale, in a newspaper of general circulation in the county in which the property is to be sold. The Administrator may provide additional notice of any such sale at any time and in any manner that the Administrator selects.
- 3. The purchaser of property at any sale conducted by the Administrator pursuant to this chapter takes the property free of all claims of the owner or previous holder and of all persons claiming through or under them. The Administrator shall execute all documents necessary to complete the transfer of ownership.
- 4. Except as otherwise provided in subsection 5, the Administrator need not offer any property for sale if the Administrator considers that the probable cost of the sale will exceed the proceeds of the sale. The Administrator may destroy or otherwise dispose of such property or may transfer it to:
- (a) The Nevada State Museum Las Vegas, the Nevada State Museum or the Nevada Historical Society, upon its written request, if the property has, in the opinion of the requesting institution, historical, artistic or literary value and is worthy of preservation; or
- (b) A genealogical library, upon its written request, if the property has genealogical value and is not wanted by the Nevada State Museum Las Vegas, the Nevada State Museum or the Nevada Historical Society.
- → An action may not be maintained by any person against the holder of the property because of that transfer, disposal or destruction.
- 5. The Administrator shall transfer property to the Department of Veterans Services, upon its written request, if the property has military value.
- 6. Securities delivered to the Administrator pursuant to this chapter may be sold by the Administrator at any time after the delivery. Securities listed on an established stock exchange must be sold at the prevailing price for that security on the exchange at the time of sale. Other securities not listed on an established stock exchange may be sold:
- (a) Over the counter at the prevailing price for that security at the time of sale; or
  - (b) By any other method the Administrator deems acceptable.
- 7. The Administrator shall hold property that was removed from a safe-deposit box or other safekeeping repository for 1 year after the date of the delivery of the property to the Administrator, unless that property is a will or a codicil to a will, in which case the Administrator shall hold the property for

10 years after the date of the delivery of the property to the Administrator. If no claims are filed for the property within that period and the Administrator determines that the probable cost of the sale of the property will exceed the proceeds of the sale, it may be destroyed.

8. All proceeds received by the Administrator from abandoned gift certificates must be accounted for separately in the Abandoned Property Trust Account in the State General Fund. At the end of each fiscal year, before any other money in the Abandoned Property Trust Account is transferred pursuant to NRS 120A.620, the balance in the subaccount created pursuant to this subsection, less any costs, service charges or claims chargeable to the subaccount, must be transferred to the Educational Trust Account, which is hereby created in the State General Fund. The money in the Educational Trust Account may be expended only as authorized by the Legislature, if it is in session, or by the Interim Finance Committee, if the Legislature is not in session, for educational purposes.

Sec. 3. This act becomes effective upon passage and approval.

Senator Segerblom moved the adoption of the amendment.

Remarks by Senator Segerblom.

Amendment No. 209 to Senate Bill No. 10 revises provisions regarding the publication of notices and other information concerning unclaimed and abandoned property held by the State Treasurer. The measure provides that in a county whose population is 700,000 or more, such a notice must be published in a newspaper with the largest circulation in the county at least six times per year and must provide instructions on how to search and access information relating to unclaimed property; in a county whose population is less than 700,000, such a notice must be published in a newspaper with the largest circulation in the county not less than once each year and must include the last known city of any person named in the notice; the Treasurer is also required to publish a notice at least 90 days before the date by which a holder of property must file certain reports; the Treasurer is authorized to provide additional information concerning unclaimed or abandoned property in any manner the Treasurer sees fit, and the Treasurer must publish a notice concerning the sale of certain abandoned property in a newspaper where the property is to be sold not less than 21 days before the sale takes place.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 29.

Bill read second time.

The following amendment was proposed by the Committee on Judiciary:

Amendment No. 133.

SUMMARY—Provides for the transfer of a criminal case from one justice court or municipal court to another such court or a district court in certain circumstances. (BDR 1-396)

AN ACT relating to courts; authorizing a justice court and a municipal court to transfer a criminal case to another such court <u>or a district court</u> in certain circumstances; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes a justice court or a municipal court to assign a veteran or a member of the military to a program of treatment in certain

circumstances. (NRS 4.374, 5.057) Sections [1] 1.3 and [2] 2.3 of this bill authorize a justice court or municipal court to transfer a criminal case to another justice court or municipal court of this State in certain circumstances if: (1) the case involves criminal conduct that occurred outside the county, township or city where the justice court or municipal court is located; (2) such a transfer is necessary to promote [the convenience of the witnesses and the ends of] access to justice [;] for the defendant; or (3) the defendant agrees to participate in a program of treatment or access other services located elsewhere in this State.

Sections 1.7 and 2.7 of this bill authorize a justice court or municipal court to transfer a criminal case to a district court if the defendant agrees to participate in a program of treatment or to access other services located elsewhere in this State. Sections 1.7 and 2.7 also provide that a justice court or municipal court may not transfer a criminal case in that manner until a plea agreement has been reached or final disposition of the case.

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

- Section 1. Chapter 4 of NRS is hereby amended by adding thereto <del>[a new section to read as follows:]</del> the provisions set forth as sections 1.3 and 1.7 of this act.
- Sec. 1.3. 1. A justice court may, on its own motion, transfer original jurisdiction of a criminal case filed with that court to another justice court or a municipal court if:
- (a) The case involves criminal conduct that occurred outside the limits of the county or township where the court is located [;] and the defendant has appeared before a magistrate pursuant to NRS 171.178;
- (b) Such a transfer is necessary to promote *[the convenience of the witnesses and the ends of justice;]* access to justice for the defendant and the justice court has noted its findings concerning that issue in the record; or
- (c) The defendant agrees to participate in a program of treatment, including, without limitation, a program of treatment made available pursuant to NRS 176A.250, 176A.280, 453.580 or 458.300, or to access other services located elsewhere in this State.
- 2. A justice court may not issue an order for the transfer of a case pursuant to paragraph (b) or (c) of subsection 1 until a plea agreement has been reached or the final disposition of the case, whichever occurs first.
- <u>3.</u> An order issued by a justice court which transfers a case pursuant to this section becomes effective after a notice of acceptance is returned by the justice court or municipal court to which the case was transferred. If a justice court or municipal court refuses to accept the transfer of a case pursuant to subsection 1, the case must be returned to the justice court which sought the transfer.
- Sec. 1.7. 1. A justice court may, on its own motion, transfer original jurisdiction of a criminal case filed with that court to a district court in this State if the defendant agrees to participate in a program of treatment.

including, without limitation, a program of treatment made available pursuant to NRS 176A.250, 176A.280, 453.580 or 458.300, or to access other services located elsewhere in this State.

- 2. A justice court may not issue an order for the transfer of a case pursuant to this section before a plea agreement has been reached or the disposition of the case, whichever occurs first.
- 3. An order issued by a justice court which transfers a case pursuant to this section becomes effective after a notice of acceptance is returned by the district court to which the case was transferred. If a district court refuses to accept the transfer of a case pursuant to subsection 1, the case must be returned to the justice court which sought the transfer.
- Sec. 2. Chapter 5 of NRS is hereby amended by adding thereto <del>[a new section to read as follows:]</del> the provisions set forth as sections 2.3 and 2.7 of this act.
- Sec. 2.3. 1. A municipal court may, on its own motion, transfer original jurisdiction of a criminal case filed with that court to a justice court or another municipal court if:
- (a) The case involves criminal conduct that occurred outside the limits of the city where the court is located [;] and the defendant has appeared before a magistrate pursuant to NRS 171.178;
- (b) Such a transfer is necessary to promote [the convenience of the witnesses and the ends of justice;] access to justice for the defendant and the municipal court has noted its findings concerning that issue in the record; or
- (c) The defendant agrees to participate in a program of treatment, including, without limitation, a program of treatment made available pursuant to NRS 176A.250, 176A.280, 453.580 or 458.300, or to access other services located elsewhere in this State.
- 2. A municipal court may not issue an order for the transfer of a case pursuant to paragraph (b) or (c) of subsection 1 until a plea agreement has been reached or the final disposition of the case, whichever occurs first.
- <u>3.</u> An order issued by a municipal court which transfers a case pursuant to this section becomes effective after a notice of acceptance is returned by the justice court or municipal court to which the case was transferred. If a justice court or municipal court refuses to accept the transfer of a case pursuant to subsection 1, the case must be returned to the municipal court which sought the transfer.
- Sec. 2.7. 1. A municipal court may, on its own motion, transfer original jurisdiction of a criminal case filed with that court to a district court in this State if the defendant agrees to participate in a program of treatment, including, without limitation, a program of treatment made available pursuant to NRS 176A.250, 176A.280, 453.580 or 458.300, or to access other services located elsewhere in this State.
- 2. A municipal court may not issue an order transferring a case pursuant to this section before a plea agreement has been reached or the disposition of the case, whichever occurs first.

- 3. An order issued by a municipal court which transfers a case pursuant to this section becomes effective after a notice of acceptance is returned by the district court to which the case was transferred. If a district court refuses to accept the transfer of a case pursuant to subsection 1, the case must be returned to the municipal court which sought the transfer.
  - Sec. 3. This act becomes effective upon passage and approval.

Senator Segerblom moved the adoption of the amendment.

Remarks by Senator Segerblom.

Amendment No. 133 to Senate Bill No. 29 authorizes a justice or municipal court upon its own motion to transfer a criminal case to another justice or municipal court or to a district court if the transfer is necessary to achieve justice for the defendant, a plea deal or final disposition has been reached in the case and the court enters its findings regarding the necessity for the transfer into the record.

If a district court declines to accept a case on transfer, the case must be returned to the court of original jurisdiction.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 239.

Bill read second time.

The following amendment was proposed by the Committee on Judiciary:

Amendment No. 143.

SUMMARY—Revises provisions relating to common-interest communities. (BDR 10-471)

AN ACT relating to common-interest communities; revising provisions authorizing an employee, agent or community manager of a unit-owner's association to enter the grounds of certain units under certain circumstances; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law assigns the responsibility for the maintenance, repair and replacement of a unit in a common-interest community to the owner of the unit and the maintenance, repair and replacement of a common element in the community to the unit-owners' association. (NRS 116.3107) Existing law further provides that the association may, without liability for trespass, enter on the grounds of a unit that is vacant or in the foreclosure process, whether vacant or not, to maintain the exterior of the unit or abate a public nuisance on the exterior of the unit if, after notice and a hearing, the unit's owner refuses or fails to do so. (NRS 116.310312) Under existing law, the association is authorized to charge the unit's owner for the costs of such maintenance or abatement services and any such costs which are not paid by the unit's owner are a lien against the unit. (NRS 116.3102, 116.310312, 116.3116)

This bill revises the definition of "exterior of the unit" for the purpose of determining the areas of a unit that may be maintained by a unit-owners' association that enters the grounds of a unit in accordance with existing law. Under the revised definition, the "exterior of the unit" would include the exterior of any property that a unit owner is obligated to maintain pursuant to

the declaration under which the common-interest community was created. Thus, under this bill, an association would be authorized to enter the grounds of a unit to maintain such areas of the unit if the conditions specified in existing law were satisfied.

In addition, this bill sets forth additional circumstances under which a unit-owners' association may, without liability for trespass, enter on the grounds of a unit that is located in a building that contains units divided by horizontal boundaries or vertical boundaries comprised of common walls between units. Under this bill, the association may enter on the grounds of such a unit that is vacant or in the foreclosure process, whether vacant or not, to abate a water or sewage leak in the unit that is causing damage or, if not immediately abated, may cause damage to the common elements or another unit and to remediate or remove any water or mold damage resulting from the leak if, after notice <del>[and]</del> but before a hearing, the unit's owner refuses or fails to do so. [This bill also authorizes the association to enter on the grounds of such a unit after providing notice but before a hearing if: (1) the unit is vacant; (2) a water or sewage leak in the unit is causing damage to the common elements or another unit: (3) the unit's owner refuses or fails to abate the water or sewage leak and remediate any mold damage within the time specified in the notice; and (4) the association enters the unit in accordance with a provision of the governing documents authorizing such entrance in an emergency.]

Under this bill, if the association or its employee, agent or community manager enter on the grounds of a unit to remediate or remove any water or mold damage resulting from a water or sewage leak, the water or mold damage may be remediated or removed only to the extent reasonably necessary because the water or mold damage: (1) threatens the health or safety of the residents of the common-interest community; (2) results in blighting or deterioration of the unit or the surrounding area; or (3) adversely affects the use and enjoyment of nearby units. In addition, if the unit is in the foreclosure process, the association or its employees, agents or community manager are not authorized to remediate or remove such damage unless: (1) the association notifies each holder of a recorded security interest of its intent to remediate the damage; and (2) within 14 days after the mailing of that notice, each holder of a recorded security interest to whom the notice is mailed notifies the association that the holder does not intend to remediate the damage or fails to remediate the damage.

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

Section 1. NRS 116.310312 is hereby amended to read as follows:

- 116.310312 1. A person who holds a security interest in a unit must provide the association with the person's contact information as soon as reasonably practicable, but not later than 30 days after the person:
- (a) Files an action for recovery of a debt or enforcement of any right secured by the unit pursuant to NRS 40.430; or

- (b) Records or has recorded on his or her behalf a notice of a breach of obligation secured by the unit and the election to sell or have the unit sold pursuant to NRS 107.080.
- 2. If an action or notice described in subsection 1 has been filed or recorded regarding a unit and the association has provided the unit's owner with notice and an opportunity for a hearing in the manner provided in NRS 116.31031, the association, including its employees, agents and community manager, may, but is not required to, enter the grounds of the unit, whether or not the unit is vacant, to take any of the following actions if the unit's owner refuses or fails to take any action or comply with any requirement imposed on the unit's owner within the time specified by the association as a result of the hearing:
- (a) Maintain the exterior of the unit in accordance with the standards set forth in the governing documents, including, without limitation, any provisions governing maintenance, standing water or snow removal.
  - (b) Remove or abate a public nuisance on the exterior of the unit which:
    - (1) Is visible from any common area of the community or public streets;
- (2) Threatens the health or safety of the residents of the common-interest community;
- (3) Results in blighting or deterioration of the unit or surrounding area; and
  - (4) Adversely affects the use and enjoyment of nearby units.
- (c) If the unit is in a building that contains units divided by horizontal boundaries described in the declaration, or vertical boundaries that comprise common walls between units [-, abate]:
- (1) Abate any water or sewage leak in the unit that is causing damage <u>or</u>, <u>if not immediately abated, may cause damage</u> to the common elements or another unit. <del>[and remediate]</del>
- (2) Remediate or remove any [resulting] water or mold damage [1.] resulting from the water or sewage leak to the extent such remediation or removal is reasonably necessary because the water or mold damage threatens the health or safety of the residents of the common-interest community, results in blighting or deterioration of the unit or the surrounding area or adversely affects the use and enjoyment of nearby units. An association, including its employees, agents and community manager, may not enter the grounds of the unit or incur any expense to remediate water or mold damage pursuant to this subparagraph unless:
- (I) The association or its employee, agent or community manager mails a notice of the intent of the association, including its employees, agents and community manager, to remediate water or mold damage pursuant to this subparagraph by certified mail to each holder of a recorded security interest encumbering the interest of the unit's owner, at the address of the holder that is provided pursuant to NRS 657.110 on the Internet website maintained by the Division of Financial Institutions of the Department of Business and Industry; and

- (II) Within 14 days after the mailing of such notice, each holder of a recorded security interest to whom a notice is sent pursuant to sub-subparagraph (I) has notified the association or its employee, agent or community manager that the holder does not intend to remediate the water or mold damage or has failed to remediate such water or mold damage.
- 3. If [Except as otherwise provided in subsection 4, if] a unit is vacant and the association has provided the unit's owner with notice and an opportunity for a hearing in the manner provided in NRS 116.31031, the association, including its employees, agents and community manager, may enter the grounds of the unit to maintain the exterior of the unit [...] or abate a public nuisance\_, for abate a water or sewage leak in the unit and remediate any resulting mold damage,] as described in paragraphs (a) and (b) of subsection 2, if the unit's owner refuses or fails to do so.
- 4. [The association, including its employees, agents and community manager, may, after providing the unit's owner with notice but before a hearing in the manner provided in NRS 116.31031, enter the grounds off If a unit [that] is in a building that contains units divided by horizontal boundaries described in the declaration, or vertical boundaries that comprise common walls between units, and the unit is vacant, the association, including its employees, agents and community manager, may, after providing the unit's owner notice but before a hearing, enter the grounds of the unit to [abate]:
- (a) Abate a water or sewage leak in the unit <del>[and remediate any resulting mold damage as described in paragraph (e) of subsection 2,] that is causing damage or, if not immediately abated, may cause damage to the common elements or another unit if <del>[+</del></del>
- (a) The unit is vacant:
- —(b) The water or sewage leak in the unit is causing damage to the common elements or another unit:
- (e) The the unit's owner refuses or fails to abate the water or sewage leak fand remediate
- <u>(b) Remediate or remove</u> any <del>[resulting]</del> <u>water or mold damage</u> <del>[within the time specified in the notice; and</del>
- (d) The association, or its employees, agents or community manager, enters the unit in accordance with a provision of the governing documents that authorizes such entrance in an emergency.] resulting from the water or sewage leak to the extent such remediation or removal is reasonably necessary because the water or mold damage threatens the health or safety of the residents of the common-interest community, results in blighting or deterioration of the unit or the surrounding area, or adversely affects the use and enjoyment of nearby units, if the unit's owner refuses or fails to remediate or remove the water or mold damage. An association, including its employees, agents and community manager, may not enter the grounds of the unit or incur any expense to remediate water or mold damage pursuant to this subparagraph unless:

- (I) The association or its employee, agent or community manager mails a notice of the intent of the association, including its employees, agents and community manager, to remediate water or mold damage pursuant to this subparagraph by certified mail to each holder of a recorded security interest encumbering the interest of the unit's owner, at the address of the holder that is provided pursuant to NRS 657.110 on the Internet website maintained by the Division of Financial Institutions of the Department of Business and Industry; and
- (II) Within 14 days after the mailing of such notice, each holder of a recorded security interest to whom a notice is sent pursuant to sub-subparagraph (I) has notified the association or its employee, agent or community manager that the holder does not intend to remediate the water or mold damage or has failed to remediate such water or mold damage.
- 5. The association may order that the costs of any maintenance, [or] abatement  $\frac{for}{for}$ , remediation or removal conducted pursuant to subsection 2, [or] 3 [,] or 4, including, without limitation, reasonable inspection fees, notification and collection costs and interest, be charged against the unit. The association shall keep a record of such costs and interest charged against the unit and has a lien on the unit for any unpaid amount of the charges. The lien may be foreclosed under NRS 116.31162 to 116.31168, inclusive.
- [5.] 6. A lien described in subsection [4] 5 bears interest from the date that the charges become due at a rate determined pursuant to NRS 17.130 until the charges, including all interest due, are paid.
- [6.] 7. Except as otherwise provided in this subsection, a lien described in subsection [4] 5 is prior and superior to all liens, claims, encumbrances and titles other than the liens described in paragraphs (a) and (c) of subsection 2 of NRS 116.3116. If the federal regulations of the Federal Home Loan Mortgage Corporation or the Federal National Mortgage Association require a shorter period of priority for the lien, the period during which the lien is prior and superior to other security interests shall be determined in accordance with those federal regulations. Notwithstanding the federal regulations, the period of priority of the lien must not be less than the 6 months immediately preceding the institution of an action to enforce the lien.
- [7.] 8. A person who purchases or acquires a unit at a foreclosure sale pursuant to NRS 40.430 or a trustee's sale pursuant to NRS 107.080 is bound by the governing documents of the association and shall maintain the exterior of the unit in accordance with the governing documents of the association. Such a unit may only be removed from a common-interest community in accordance with the governing documents pursuant to this chapter.
- [8.] 9. Notwithstanding any other provision of law, an association, its directors or members of the executive board, employees, agents or community manager who enter the grounds of a unit pursuant to this section are not liable for trespass.
  - [9.] 10. As used in this section:

- (a) "Exterior of the unit" includes, without limitation, all landscaping outside of a unit, [and] the exterior of all property exclusively owned by the unit owner [.] and the exterior of all property that the unit owner is obligated to maintain pursuant to the declaration.
  - (b) "Vacant" means a unit:
    - (1) Which reasonably appears to be unoccupied;
- (2) On which the owner has failed to maintain the exterior to the standards set forth in the governing documents of the association; and
- (3) On which the owner has failed to pay assessments for more than 60 days.

Senator Segerblom moved the adoption of the amendment.

Remarks by Senator Segerblom.

Amendment no. 143 to Senate Bill No. 239 provides that a unit-owners association or its employee or agent may enter a vacant property without liability for trespass to abate water leaks, sewage leaks or mold that threatens imminent damage or is damaging the common elements of the property or another unit. If an association or its employee enters a unit to conduct remediation, it may only do so to the extent reasonably necessary to protect health and safety, to avoid blight or deterioration of the unit or surrounding units, or to protect the use and enjoyment of nearby units.

If the unit in question is in foreclosure, the association is not allowed to remediate the damage unless the association notifies each holder of a recorded security interest of its intent to remediate the damage; within 14 days after the mailing of that notice, each holder of a recorded security interest to whom the notice is mailed notifies the association that the holder does not intend to remediate the damage or fails to remediate the damage.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 308.

Bill read second time.

The following amendment was proposed by the Committee on Transportation:

Amendment No. 320.

SUMMARY—Revises provisions relating to motor vehicle insurance. (BDR 43-938)

AN ACT relating to liability for motor vehicles; increasing the amount of coverage that must be provided by a policy of insurance and certain bonds that are required for a motor vehicle in this State; increasing the minimum amount of money required to satisfy certain judgments relating to a crash involving a motor vehicle; [prohibiting a policy of motor vehicle insurance that includes uninsured—and—underinsured—vehicle—coverage—from—including—certain limitations of coverage;] and providing other matters properly relating thereto. Legislative Counsel's Digest:

Existing law requires every owner of a motor vehicle, other than a moped, which is registered or required to be registered in this State to provide insurance continuously for the payment of tort liabilities arising from the maintenance or use of the motor vehicle in the amount of: (1) \$15,000 for bodily injury to or death of one person in any crash; (2) \$30,000 for bodily

injury to or death of two or more persons in any one crash, subject to the limit of \$15,000 for one person; and (3) \$10,000 for injury to or destruction of property of others in any one crash. (NRS 485.185) Those minimum amounts of insurance coverage are required for a motor vehicle owned by a short-term lessor of motor vehicles, for an operator of a motor vehicle who obtains an operator's insurance policy, and for the amount of a policy or bond that must be provided in certain circumstances to the Department of Motor Vehicles as security after a report of a crash. (NRS 482.305, 485.186, 485.210, 495.3091) Sections 1-5 of this bill increase those minimum amounts to \$25,000, \$50,000 and \$20,000, respectively. Those increased minimum amounts are also required in determining whether certain judgments relating to a crash involving a motor vehicle have been satisfied. (NRS 485.304)

Existing law requires insurance companies transacting motor vehicle insurance in this State to offer uninsured and underinsured vehicle coverage in an amount equal to the limits of coverage for bodily injury sold to an insured under a policy of insurance covering the use of a passenger car. (NRS 687B.145) Section 6 of this bill revises existing law by prohibiting a policy of motor vehicle insurance that includes uninsured and underinsured vehicle coverage from including an exclusion, reduction or other limitation of coverage where the insured is injured while in the course of his or her employment or pursuing a business activity or purpose.]

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

Section 1. NRS 482.305 is hereby amended to read as follows:

- 482.305 1. The short-term lessor of a motor vehicle who permits the short-term lessee to operate the vehicle upon the highways, and who has not complied with NRS 482.295 insuring or otherwise covering the short-term lessee against liability arising out of his or her negligence in the operation of the rented vehicle in limits of not less than [\$15,000] \$25,000 for any one person injured or killed and [\$30,000] \$50,000 for any number more than one, injured or killed in any one crash, and against liability of the short-term lessee for property damage in the limit of not less than [\$10,000] \$20,000 for one crash, is jointly and severally liable with the short-term lessee for any damages caused by the negligence of the latter in operating the vehicle and for any damages caused by the negligence of any person operating the vehicle by or with the permission of the short-term lessee, except that the foregoing provisions do not confer any right of action upon any passenger in the rented vehicle against the short-term lessor. This section does not prevent the introduction as a defense of contributory negligence to the extent to which this defense is allowed in other cases.
- 2. The policy of insurance, surety bond or deposit of cash or securities inures to the benefit of any person operating the vehicle by or with the permission of the short-term lessee in the same manner, under the same conditions and to the same extent as to the short-term lessee.

- 3. The insurance policy, surety bond or deposit of cash or securities need not cover any liability incurred by the short-term lessee of any vehicle to any passenger in the vehicle; but the short-term lessor before delivering the vehicle shall give to the short-term lessee a written notice of the fact that such a policy, bond or deposit does not cover the liability which the short-term lessee may incur on account of his or her negligence in the operation of the vehicle to any passenger in the vehicle.
- 4. When any suit or action is brought against the short-term lessor under this section, the judge before whom the case is pending shall hold a preliminary hearing in the absence of the jury to determine whether the short-term lessor has provided insurance or a surety bond or deposit of cash or securities covering the short-term lessee as required by subsection 1. Whenever it appears that the short-term lessor has provided insurance or a surety bond or deposit of cash or securities covering the short-term lessee in the required amount, the judge shall dismiss as to the short-term lessor the action brought under this section.
  - Sec. 2. NRS 485.185 is hereby amended to read as follows:
- 485.185 1. Except as otherwise provided in subsection 2, every owner of a motor vehicle which is registered or required to be registered in this State shall continuously provide, while the motor vehicle is present or registered in this State, insurance provided by an insurance company licensed by the Division of Insurance of the Department of Business and Industry and approved to do business in this State:
- (a) In the amount of [\$15,000] \$25,000 for bodily injury to or death of one person in any one crash;
- (b) Subject to the limit for one person, in the amount of [\$30,000] \$50,000 for bodily injury to or death of two or more persons in any one crash; and
- (c) In the amount of [\$10,000] \$20,000 for injury to or destruction of property of others in any one crash,
- → for the payment of tort liabilities arising from the maintenance or use of the motor vehicle.
  - 2. The provisions of this section do not apply to a moped.
  - Sec. 3. NRS 485.210 is hereby amended to read as follows:
- 485.210 For the purposes of NRS 485.200, a policy or bond is not effective unless:
- 1. The policy or bond is subject, if the crash has resulted in bodily injury or death, to a limit, exclusive of interest and costs, of not less than [\$15,000] \$25,000 because of bodily injury to or death of one person in any one crash and, subject to the limit for one person, to a limit of not less than [\$30,000] \$50,000 because of bodily injury to or death of two or more persons in any one crash and, if the crash has resulted in injury to or destruction of property, to a limit of not less than [\$10,000] \$20,000 because of injury to or destruction of property of others in any one crash; and
- 2. The insurance company or surety company issuing that policy or bond is authorized to do business in this State or, if the company is not authorized

to do business in this State, unless it executes a power of attorney authorizing the Director to accept service on its behalf of notice or process in any action upon that policy or bond arising out of a crash.

- Sec. 4. NRS 485.304 is hereby amended to read as follows:
- 485.304 Judgments must for the purpose of this chapter only, be deemed satisfied:
- 1. When [\$15,000] \$25,000 has been credited upon any judgment or judgments rendered in excess of that amount because of bodily injury to or death of one person as the result of any one crash;
- 2. When, subject to the limit of [\$15,000] \$25,000 because of bodily injury to or death of one person, the sum of [\$30,000] \$50,000 has been credited upon any judgment or judgments rendered in excess of that amount because of bodily injury to or death of two or more persons as the result of any one crash; or
- 3. When [\$10,000] \$20,000 has been credited upon any judgment or judgments rendered in excess of that amount because of injury to or destruction of property of others as a result of any one crash,
- → but payments made in settlement of any claims because of bodily injury, death or property damage arising from a motor vehicle crash must be credited in reduction of the amounts provided for in this section.
  - Sec. 5. NRS 485.3091 is hereby amended to read as follows:
  - 485.3091 1. An owner's policy of liability insurance must:
- (a) Designate by explicit description or by appropriate reference all motor vehicles with respect to which coverage is thereby to be granted; and
- (b) Insure the person named therein and any other person, as insured, using any such motor vehicle with the express or implied permission of the named insured, against loss from the liability imposed by law for damages arising out of the ownership, maintenance or use of such motor vehicle within the United States of America or the Dominion of Canada, subject to limits exclusive of interest and costs, with respect to each such motor vehicle, as follows:
- (1) Because of bodily injury to or death of one person in any one crash, [\$15,000;] \$25,000;
- (2) Subject to the limit for one person, because of bodily injury to or death of two or more persons in any one crash, [\$30,000;] \$50,000; and
- (3) Because of injury to or destruction of property of others in any one crash, [\$10,000.] \$20,000.
- 2. An operator's policy of liability insurance must insure the person named as insured therein against loss from the liability imposed upon the person by law for damages arising out of the person's use of any motor vehicle within the same territorial limits and subject to the same limits of liability as are set forth in paragraph (b) of subsection 1.
- 3. A motor vehicle liability policy must state the name and address of the named insured, the coverage afforded by the policy, the premium charged therefor, the period of effectiveness and the limits of liability, and must contain an agreement or be endorsed that insurance is provided thereunder in

accordance with the coverage defined in this chapter as respects bodily injury and death or property damage, or both, and is subject to all the provisions of this chapter.

- 4. A motor vehicle liability policy need not insure any liability under any workers' compensation law nor any liability on account of bodily injury to or death of an employee of the insured while engaged in the employment, other than domestic, of the insured, or while engaged in the operation, maintenance or repair of any motor vehicle owned by the insured nor any liability for damage to property owned by, rented to, in charge of or transported by the insured.
- 5. Every motor vehicle liability policy is subject to the following provisions which need not be contained therein:
- (a) The liability of the insurance carrier with respect to the insurance required by this chapter becomes absolute whenever injury or damage covered by the policy occurs. The policy may not be cancelled or annulled as to such liability by any agreement between the insurance carrier and the insured after the occurrence of the injury or damage. No statement made by the insured or on behalf of the insured and no violation of the policy defeats or voids the policy.
- (b) The satisfaction by the insured of a judgment for injury or damage is not a condition precedent to the right or duty of the insurance carrier to make payment on account of the injury or damage.
- (c) The insurance carrier may settle any claim covered by the policy, and if such a settlement is made in good faith, the amount thereof is deductible from the limits of liability specified in paragraph (b) of subsection 1.
- (d) The policy, the written application therefor, if any, and any rider or endorsement which does not conflict with the provisions of this chapter constitute the entire contract between the parties.
- 6. Any policy which grants the coverage required for a motor vehicle liability policy may also grant any lawful coverage in excess of or in addition to the coverage specified for a motor vehicle liability policy, and the excess or additional coverage is not subject to the provisions of this chapter.
- 7. Any motor vehicle liability policy may provide for the prorating of the insurance thereunder with other valid and collectible insurance.
- 8. The requirements for a motor vehicle liability policy may be fulfilled by the policies of one or more insurance carriers, which policies together meet those requirements.
- 9. Any binder issued pending the issuance of a motor vehicle liability policy shall be deemed to fulfill the requirements for such a policy.
- Sec. 6. [NRS 687B.145 is hereby amended to read as follows:

  687B.145 1. Any policy of insurance or endorsement providing coverage under the provisions of NRS 690B.020 or other policy of casualty insurance may provide that if the insured has coverage available to the insured under more than one policy or provision of coverage, any recovery or benefits may equal but not exceed the higher of the applicable limits of the respective

coverages, and the recovery or benefits must be prorated between the applicable coverages in the proportion that their respective limits bear to the aggregate of their limits. Any provision which limits benefits pursuant to this section must be in clear language and be prominently displayed in the policy, binder or endorsement. Any limiting provision is void if the named insured has purchased separate coverage on the same risk and has paid a premium calculated for full reimbursement under that coverage.

- 2 Except as otherwise provided in subsection 5, insurance companies transacting motor vehicle insurance in this State must offer on a form approved by the Commissioner, uninsured and underinsured vehicle coverage in an amount equal to the limits of coverage for bodily injury sold to an insured under a policy of insurance covering the use of a passenger car. The insurer is not required to reoffer the coverage to the insured in any replacement. reinstatement, substitute or amended policy, but the insured may purchase the coverage by requesting it in writing from the insurer. Each renewal must include a copy of the form offering such coverage. Uninsured and underingured vehicle coverage must include a provision which enables the insured to recover up to the limits of the insured's own coverage any amount of damages for bodily injury from the insured's insurer which the insured is legally entitled to recover from the owner or operator of the other vehicle to the extent that those damages exceed the limits of the coverage for bodily injury carried by that owner or operator. If an insured suffers actual damages subject to the limitation of liability provided pursuant to NRS 41.035 underinsured vehicle coverage must include a provision which enables the insured to recover up to the limits of the insured's own coverage any amount of damages for bodily injury from the insured's insurer for the actual damages suffered by the insured that exceed that limitation of liability. A policy of motor vehicle insurance that includes uninsured and underinsured vehicle coverage must not include an exclusion, reduction or other limitation of coverage where the insured is injured while in the course of his or her employment or pursuing a business activity or purpose.
- 3. An insurance company transacting motor vehicle insurance in this State must offer an insured under a policy covering the use of a passenger car, the option of purchasing coverage in an amount of at least \$1,000 for the payment of reasonable and necessary medical expenses resulting from a crash. The offer must be made on a form approved by the Commissioner. The insurer is not required to reoffer the coverage to the insured in any replacement, reinstatement, substitute or amended policy, but the insured may purchase the coverage by requesting it in writing from the insurer. Each renewal must include a copy of the form offering such coverage.
- 4. An insurer who makes a payment to an injured person on account of underinsured vehicle coverage as described in subsection 2 is not entitled to subrogation against the underinsured motorist who is liable for damages to the injured payee. This subsection does not affect the right or remedy of an insurer under subsection 5 of NRS 690B.020 with respect to uninsured vehicle

eoverage. As used in this subsection, "damages" means the amount for which the underinsured motorist is alleged to be liable to the claimant in excess of the limits of bodily injury coverage set by the underinsured motorist's policy of casualty insurance.

- -5. An insurer need not offer, provide or make available uninsured or underinsured vehicle coverage in connection with a general commercial liability policy, an excess policy, an umbrella policy or other policy that does not provide primary motor vehicle insurance for liabilities arising out of the ownership, maintenance, operation or use of a specifically insured motor vehicle.
- 6 As used in this section:
- (a) "Excess policy" means a policy that protects a person against loss in excess of a stated amount or in excess of coverage provided pursuant to another insurance contract.
- (b) "Passenger car" has the meaning ascribed to it in NRS 482.087
- (e) "Umbrella policy" means a policy that protects a person against losses in excess of the underlying amount required to be covered by other policies.]
  (Deleted by amendment.)
- Sec. 7. The amendatory provisions of this act do not apply to the satisfaction of any judgment entered as a result of a crash involving a motor vehicle before July 1, <del>[2017.]</del> 2018.
  - Sec. 8. This act becomes effective on July 1, [2017.] 2018.

Senator Manendo moved the adoption of the amendment.

Remarks by Senator Manendo.

Amendment No. 320 to Senate Bill No. 308 increases the minimum amount of coverage that must be provided by a policy of motor vehicle insurance. Specifically, for bodily injury to, or death of, one person in any one crash, the minimum amount is increased from \$15,000 to \$25,000; for bodily injury to or death of two or more persons in any one crash, the minimum amount is increased from \$30,000 to \$50,000; and for injury to or destruction of property of others in any one crash, the minimum amount is increased from \$10,000 to \$20,000.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 371.

Bill read second time.

The following amendment was proposed by the Committee on Natural Resources:

Amendment No. 234.

SUMMARY—<u>[Revises]</u> <u>Establishes</u> provisions governing the care of an animal which has been impounded. <u>[or treated cruelly.]</u> (BDR <del>[50 153)]</del> <u>14-153)</u>

AN ACT relating to animals; [deleting provisions which limit the duration of certain liens for the reasonable cost of care and shelter furnished to an animal which has been treated cruelly;] authorizing a county to recover the reasonable cost of care and shelter furnished to an animal impounded by the county under certain circumstances; authorizing a county to take certain other

actions relating to an impounded animal; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires a peace officer or an officer of a society for the prevention of cruelty to animals who is authorized to make certain arrests who discovers any animal being treated cruelly to: (1) take possession of the animal; and (2) provide a written notice to the owner of the animal, if the owner can be found, setting forth the reasons the animal was taken, the location of where the animal will be cared for and sheltered and the fact that there is a lien on the animal, limited to not more than 2 weeks, for the reasonable cost of shelter and care furnished to the animal. (NRS 574.055) Existing law confers a similar lien upon a peace officer or certain other persons who forcibly remove a cat or dog from a motor vehicle during a period of extreme heat or cold. (NRS 574.195) Section 1 of this bill deletes the 2-week limit on those liens.]

Existing law authorizes the board of county commissioners of a county to enact ordinances: (1) governing the control and protection of animals; (2) regulating or prohibiting the running at large and disposal of animals; and (3) prohibiting cruelty to animals. (NRS 244.189, 244.359) Section 2 of this bill expands existing law by providing that, if a person is lawfully arrested and detained in a county for more than [15] 7 days, and if the county impounds any animal owned or possessed by the person, the county <del>[may: (1) recover the</del> reasonable cost of any care and shelter furnished to the animal by the county; must: (1) notify the person of the impoundment and request that the person provide to the county the name of any person who is authorized to care for the animal; (2) [give] transfer, under certain circumstances, the animal to any <del>[member of the person's immediate family: or]</del> such person; and (3) if the county is unable to transfer the animal to such a person, allow a person to adopt the animal. Section 2 also authorizes, under certain circumstances, the county to bring an appropriate legal action to recover the reasonable cost of care and shelter of the animal.

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

Section 1. [NRS 574.955 is hereby amended to read as follows:

574.055—1. Any peace officer or officer of a society for the prevention of eruelty to animals who is authorized to make arrests pursuant to NRS 574.040 shall, upon discovering any animal which is being treated eruelly, take possession of it and provide it with shelter and care or, upon obtaining written permission from the owner of the animal, may destroy it in a humane manner—2. If an officer takes possession of an animal, the officer shall give to the owner, if the owner can be found, a notice containing a written statement of the reasons for the taking, the location where the animal will be cared for and sheltered, and the fact that there is a [limited] lien on the animal for the cost of shelter and care. If the owner is not present at the taking and the officer cannot find the owner after a reasonable search, the officer shall post the notice on the property from which the officer takes the animal. If the identity and address of

the owner are later determined, the notice must be mailed to the owner immediately after the determination is made.

- —3. An officer who takes possession of an animal pursuant to this section has a lien on the animal for the reasonable cost of care and shelter furnished to the animal and, if applicable, for its humane destruction. [The lien does not extend to the cost of care and shelter for more than 2 weeks.]
- 4. Upon proof that the owner has been notified in accordance with the provisions of subsection 2 or, if the owner has not been found or identified, that the required notice has been posted on the property where the animal was found, a court of competent jurisdiction may, after providing an opportunity for a hearing, order the animal sold at auction, humanely destroyed or continued in the care of the officer for such disposition as the officer sees fit.
- 5. An officer who seizes an animal pursuant to this section is not liable for any action arising out of the taking or humane destruction of the animal.
- 6. The provisions of this section do not apply to any animal which is located on land being employed for an agricultural use as defined in NRS 361A.030 unless the owner of the animal or the person charged with the care of the animal is in violation of paragraph (e) of subsection 1 of NRS 574.100 and the impoundment is accomplished with the concurrence and supervision of the sheriff or the sheriff's designee, a licensed veterinarian and the district brand inspector or the district brand inspector's designee. In such a case, the sheriff shall direct that the impoundment occur not later than 48 hours after the veterinarian determines that a violation of paragraph (e) of subsection 1 of NRS 574.100 exists.
- 7. The owner of an animal impounded in accordance with the provisions of subsection 6 must, before the animal is released to the owner's custody, pay the charges approved by the sheriff as reasonably related to the impoundment, including the charges for the animal's food and water. If the owner is unable or refuses to pay the charges, the State Department of Agriculture shall sell the animal. The Department shall pay to the owner the proceeds of the sale remaining after deducting the charges reasonably related to the impoundment.] (Deleted by amendment.)
- Sec. 2. Chapter 171 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. If a person is lawfully arrested and detained in a county for more than <del>[15]</del> 7 days, and if any animal owned or possessed by the person is impounded by the county after the arrest, the county <del>[may:</del>
- (a) By} must notify the person of the impoundment of the animal and request that the person provide to the county the name of any person who is authorized to care for the animal. The county must transfer the animal to such a person if the county determines that the person is able to provide adequate care and shelter to the animal. If there is no authorized person who is able to provide adequate care and shelter to the animal, the county may allow another person who is able to provide adequate care and shelter to adopt the animal.

- 2. If a person is convicted of the crime for which he or she was lawfully arrested, the county may by appropriate legal action [1,1] recover the reasonable cost of any care and shelter furnished to the animal by the county, including, without limitation, imposing a lien on the animal for the cost of such care and shelter [1; or
- (b) Give the animal to any member of the person's immediate family or allow another person to adopt the animal if it reasonably appears to the county that the member of the family or other person is able to provide adequate eare and shelter for the animal.
- <u>2.1</u> 3. As used in this section, "animal" means any dog, cat, horse or other domesticated animal. The term does not include any cattle, sheep, goats, swine or poultry.
  - Sec. 3. This act becomes effective upon passage and approval.

Senator Cancela moved the adoption of the amendment.

Remarks by Senator Cancela.

Amendment No. 234 to Senate Bill No. 371 provides that if an animal is impounded by a county in the lawful arrest and detainment of a person for more than seven days, the county must notify the person of the impoundment and transfer the animal to someone authorized by them if the county determines that person is able to provide adequate care and shelter to the animal; or if there is no such authorized person, allow another person who is able to provide adequate care and shelter to adopt the animal.

The bill also provides that if the person is convicted of the crime for which he was lawfully arrested, the county may by legal action recover the reasonable cost of care and shelter furnished to the animal by the county.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 427.

Bill read second time.

The following amendment was proposed by the Committee on Transportation:

Amendment No. 321.

SUMMARY—Revises provisions governing the crew of certain freight trains. (BDR 58-1014)

AN ACT relating to railroads; requiring certain trains and locomotives which are transporting freight in this State to contain a crew of not less than two persons; providing civil penalties; [providing a penalty;] and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law provides certain employment protections for certain railroad employees who were employed by any railroad in this State on April 1, 1963, or July 1, 1985, to address provisions concerning the size of a train crew that were removed from the Nevada Revised Statutes by the Legislature in 1963 and 1985, respectively. (NRS 705.390; chapter 176, Statutes of Nevada 1963, p. 281, chapter 358, Statutes of Nevada 1985, p. 1014) Section 3 of this bill repeals that provision. Section 1 of this bill requires any Class I freight railroad,

Class I railroad or Class II railroad for transporting freight which operates a train or locomotive in this State, and any officer of such a railroad, to ensure that the train or locomotive contains a crew of not less than two persons, with certain exceptions. Section 2 of this bill provides that a [violation of section 1 is a misdemeanor, and a] railroad or officer of a railroad who violates the provisions of section 1 is liable to the Public Utilities Commission of Nevada for certain civil penalties. (NRS 705.420)

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

Section 1. Chapter 705 of NRS is hereby amended by adding thereto a new section to read as follows:

- 1. Except as otherwise provided in subsection 2, any Class I freight railroad, Class I railroad or Class II railroad for transporting freight which operates a train or locomotive in this State, and any officer of such a railroad, shall ensure that the train or locomotive contains a crew of not less than two persons.
- 2. The provisions of subsection 1 do not apply to a train or locomotive engaged in helper or hostling services.
  - 3. As used in this section:
- (a) "Class I freight railroad" has the meaning ascribed to it in 40 C.F.R. § 1033.901.
- (b) "Class I railroad" has the meaning ascribed to it in 40 C.F.R. § 1033.901.
- (c) "Class II railroad" has the meaning ascribed to it in 40 C.F.R. § 1033.901.
- (d) "Helper services" includes connecting a locomotive to the front or back of a train to assist the train in ascending or descending a grade.
- (e) "Hostling services" includes moving a train or locomotive a short distance in a railroad yard.
  - Sec. 2. NRS 705.420 is hereby amended to read as follows:
- 705.420 Any railroad [company or receiver of any railroad company, and any person engaged in the business of common carrier doing business in the State of Nevada, which] or officer of a railroad who violates [any of] the provisions of [NRS 705.390 is liable] section 1 of this act is ##
- 1. Guilty of a misdemeanor.
- <u>2. Liable</u> to the Public Utilities Commission of Nevada for a *civil* penalty of [\$500]:
  - $\frac{\{(a)\}}{1}$  1. Not less than \$1,000 for  $\frac{\{(a)\}}{1}$  the first violation  $\frac{\{(a)\}}{1}$ ; and
- <del>[(b)]</del> 2. Not more than \$5,000 for the second and any subsequent violation within 3 years of the first violation.
  - Sec. 3. NRS 705.390 is hereby repealed.

### TEXT OF REPEALED SECTION

705.390 Protection of flagger and trainman employed on certain dates from discharge or loss of employment. No person employed as a flagger on any railroad in this State on April 1, 1963, may be discharged or lose such

employment by reason of the provisions of chapter 176, Statutes of Nevada 1963. No person holding seniority as a trainman on any railroad in this State on July 1, 1985, may be discharged or lose such employment by reason of the provisions of chapter 358, Statutes of Nevada 1985. But if a flagger or a trainman retires, terminates or voluntarily leaves such employment, the railroad company need not replace the position so vacated.

Senator Manendo moved the adoption of the amendment.

Remarks by Senator Manendo.

Amendment No. 321 to Senate Bill No. 427 removes the criminal penalty and increases the civil liability for violating the provisions of the bill to \$1,000 for a first violation and \$5,000 for a second or subsequent violation within three years.

Amendment adopted.

Senator Manendo moved that the bill be re-referred to the Committee on Finance, upon return from reprint.

Motion carried.

Bill ordered reprinted, engrossed and to the Committee on Finance.

Senate Bill No. 438.

Bill read second time.

The following amendment was proposed by the Committee on Judiciary: Amendment No. 296.

SUMMARY—Revises provisions relating to time shares. (BDR 10-992)

AN ACT relating to time shares; authorizing a representative to associate with one or more developers; amending provisions relating to the licensing and registration of representatives; prohibiting a representative from engaging in certain acts related to inducing persons to attend a sales presentation; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law provides for the registration and regulation of a "representative," defined as a person who, on behalf of a developer of a time share, induces other persons to attend a sales presentation. (NRS 119A.120, 119A.240, 119A.260) Under existing law, such a representative is required to register with the Real Estate Division of the Department of Business and Industry. (NRS 119A.240) Each application for registration as a representative must include certain information and be accompanied by a fee of \$100. (NRS 119A.240, 119A.360)

Sections 1 and 2 of this bill authorize a representative to associate with one or more developers. Section 2 further amends existing law governing the registration of a representative to require each application to include: (1) proof that the applicant operates at a fixed location, if the applicant is associated with more than one developer; (2) a complete set of the fingerprints of the applicant; and (3) written permission authorizing the Division to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for its report on the criminal history of the applicant and for submission to the Federal Bureau of Investigation for its report on the criminal history of the applicant.

Existing law sets forth the prohibited acts of representatives. (NRS 119A.260) Section 3 of this bill prohibits a representative from: (1) making any material misrepresentation; (2) making any false promises of a character likely to induce other persons to attend a promotional meeting; (3) engaging in any fraudulent, misleading or oppressive [sales] techniques or tactics [1] to induce or solicit other persons to attend a promotional meeting; or (4) failing to disclose to a person the representative's purpose to induce the person to attend a promotional meeting.

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

- Section 1. NRS 119A.120 is hereby amended to read as follows:
- 119A.120 "Representative" means a person who is not a sales agent and who, on behalf of [a developer,] one or more developers, induces other persons to attend a sales presentation. The term does not include a person who only performs clerical tasks, arranges appointments set up by others or prepares or distributes promotional materials.
  - Sec. 2. NRS 119A.240 is hereby amended to read as follows:
- 119A.240 1. The Administrator shall register as a representative each applicant who:
- (a) Submits proof satisfactory to the Division that the applicant has a reputation for honesty, trustworthiness and competence;
  - (b) Applies for registration in the manner provided by the Division;
  - (c) Submits the statement required pursuant to NRS 119A.263; [and]
- (d) Designates the developer with whom the applicant will associate the application;
  - (e) Lists any other developer with whom the applicant is associated, if any;
- (f) Submits proof satisfactory to the Division that the applicant operates at a fixed location, if the applicant is associated with more than one developer; and
  - (g) Pays the fees provided for in this chapter.
- 2. An application for registration as a representative must include the social security number of the applicant.
- 3. Each applicant must, as part of his or her application and at the applicant's own expense:
- (a) Arrange to have a complete set of his or her fingerprints taken by a law enforcement agency or other authorized entity acceptable to the Division; and
  - (b) Submit to the Division:
- (1) A completed fingerprint card and written permission authorizing the Division to submit the applicant's fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for a report on the applicant's background and to such other law enforcement agencies as the Division deems necessary; or
- (2) Written verification, on a form prescribed by the Division, stating that the fingerprints of the applicant were taken and directly forwarded electronically or by another means to the Central Repository and that the

applicant has given written permission to the law enforcement agency or other authorized entity taking the fingerprints to submit the fingerprints to the Central Repository for submission to the Federal Bureau of Investigation for a report on the applicant's background and to such other law enforcement agencies as the Division deems necessary.

- 4. The Division may:
- (a) Unless the applicant's fingerprints are directly forwarded pursuant to subparagraph (2) of paragraph (b) of subsection 3, submit those fingerprints to the Central Repository for submission to the Federal Bureau of Investigation and to such other law enforcement agencies as the Division deems necessary; and
- (b) Request from each such agency any information regarding the applicant's background as the Division deems necessary.
- 5. A representative is not required to be licensed pursuant to the provisions of chapter 645 of NRS.
  - Sec. 3. NRS 119A.260 is hereby amended to read as follows:
- 119A.260 1. A representative shall not negotiate the sale of, or discuss prices of, a time share. A representative may only induce and solicit persons to attend promotional meetings for the sale of time shares and distribute information on behalf of a developer [...] with whom he or she is associated.
- 2. The representative's activities must strictly conform to the methods for the procurement of prospective purchasers which have been approved by the Division.
- 3. The representative shall comply with any applicable standards for conducting business as are applied to real estate brokers and salespersons pursuant to chapter 645 of NRS and the regulations adopted pursuant thereto.
  - 4. A representative shall not:
  - (a) Make any material misrepresentation;
- (b) Make any false promises of a character likely to induce other persons to attend a promotional meeting;
- (c) Engage in any fraudulent, misleading or oppressive <del>[sales]</del> techniques or tactics <del>[;]</del> to induce or solicit other persons to attend a promotional meeting; or
- (d) Fail to disclose to a person the representative's purpose to induce the person to attend a promotional meeting.
- 5. A representative shall not make targeted solicitations of purchasers or prospective purchasers of time shares in another project with which the representative is not associated. A developer or project broker shall not pay or offer to pay a representative a bonus or other type of special compensation to engage in such activity.
  - Sec. 4. This act becomes effective on July 1, 2017.

Senator Segerblom moved that the bill be taken from the Second Reading File and placed at the bottom of the Second Reading File on the Second Agenda.

Motion carried.

Senate Bill No. 453.

Bill read second time.

The following amendment was proposed by the Committee on Judiciary:

Amendment No. 216.

SUMMARY—Revises provisions relating to criminal procedure. (BDR 14-84)

AN ACT relating to criminal procedure; authorizing a person who was dishonorably discharged from probation to apply to a court for the sealing of records of criminal history relating to the conviction; revising various provisions relating to the filing of petitions for the sealing of records of criminal history; requiring an agency of criminal justice to remove certain records from a record of criminal history before dissemination of the record in certain circumstances; revising provisions relating to the sealing of records of persons convicted of the unlawful possession of a controlled substance; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes a person who is granted an honorable discharge from probation to apply to the court for the sealing of records relating to the conviction. (NRS 176A.850) Existing law also provides that a person who is given a dishonorable discharge from probation is not entitled to such a privilege. (NRS 176A.870) Section 1 of this bill authorizes a person who is given a dishonorable discharge from probation to apply to the court for the sealing of records relating to the conviction if he or she is otherwise eligible to have the records sealed.

Existing law authorizes a person who was convicted of certain offenses or who was arrested for alleged criminal conduct but the charges against the person were dismissed, the prosecuting attorney declined prosecution of the charges or the person was acquitted of the charges to petition the court in which the person was convicted or in which the charges were dismissed or declined for prosecution or the acquittal was entered for the sealing of all records relating to the conviction or the arrest and proceedings leading to the dismissal, declination or acquittal, as applicable. Existing law also: (1) generally requires a person to wait a specified number of years, depending on the offense, until he or she may petition the court for the sealing of such records; and (2) requires a petition to be accompanied by the person's current, verified records received from the Central Repository for Nevada Records of Criminal History and all agencies of criminal justice which maintain such records within the city or county in which the petitioner appeared in court. (NRS 179.245, 179.255) Sections 7 and 8 of this bill: (1) reduce the length of certain periods that a person is required to wait before petitioning a court for the sealing of records; and (2) remove the requirement that a petition be accompanied by the petitioner's current, verified records received from local agencies of criminal justice. Sections 7 and 8 also provide that if the prosecuting attorney stipulates to the sealing of the records and the court makes certain findings, the court is authorized to order the records sealed without a hearing.

Existing law also authorizes the sealing of the records of a person who completes a correctional or judicial program for reentry into the community 5 years after the completion of the program. (NRS 179.259) Section 9 of this bill reduces such a period to 4 years.

Section 4 of this bill provides that upon the filing of a petition for the sealing of records. [: (1)] there is a rebuttable presumption that the records should be sealed if the applicant satisfies all statutory requirements for the sealing of the records. [; and (2) if a hearing is conducted, the prosecuting attorney or the Division of Parole and Probation of the Department of Public Safety, as applicable, must prove by clear and convincing evidence that the records should not be sealed.]

Section 5 of this bill authorizes a person to file a petition for the sealing of records in district court if the person wishes to have more than one record sealed and would otherwise need to file a petition in more than one court. Section 5 also authorizes the district court to order the sealing of any records in the justice or municipal courts in certain circumstances.

Existing law provides for the dissemination of records of criminal history by agencies of criminal justice in certain circumstances. (NRS 179A.090, 179A.100) Section 13 of this bill requires that before an agency of criminal justice disseminates any record to a person or entity other than another agency of criminal justice, the agency of criminal justice must remove any record of a conviction of a category E felony, gross misdemeanor or [misdemeanor] certain misdemeanors if a certain amount of time has passed since the person was released from actual custody, discharged from parole or probation or was no longer under a suspended sentence, whichever occurred later.

Existing law provides that, unless a greater penalty is otherwise provided, a person who is convicted of the possession of flunitrazepam or gamma-hydroxybutyrate, or any substance for which flunitrazepam or gamma-hydroxybutyrate is an immediate precursor, is guilty of a category B felony and is punished by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years. (NRS 453.336) If a person is convicted of this offense, existing law authorizes the court to seal the person's records relating to the conviction if, 3 years after the conviction and sentence: (1) the person fulfills the terms and conditions imposed by the court and the person's parole and probation officer; and (2) the court, after a hearing, is satisfied that the person is rehabilitated. (NRS 453.3365) Section 16 of this bill removes this provision and, instead, requires a court to seal a person's records relating to a conviction for this offense only if: (1) the person is assigned to an educational program or a treatment program; and (2) the person fulfills the terms and conditions imposed by the court and the Division of Parole and Probation of the Department of Public Safety.

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

Section 1. NRS 176A.870 is hereby amended to read as follows:

- 176A.870 1. A defendant whose term of probation has expired and:
- [1.] (a) Whose whereabouts are unknown;
- [2.] (b) Who has failed to make restitution in full as ordered by the court, without a verified showing of economic hardship; or
- $\frac{3.1}{(c)}$  Who has otherwise failed to qualify for an honorable discharge as provided in NRS 176A.850,
- is not eligible for an honorable discharge and must be given a dishonorable discharge.
- 2. A dishonorable discharge releases the probationer from any further obligation, except a civil liability arising on the date of discharge for any unpaid restitution which is enforceable pursuant to NRS 176.275.
- 3. A defendant who is given a dishonorable discharge pursuant to this section may, if he or she meets the requirements of NRS 179.245, apply to the court for the sealing of records relating to the conviction but [does] is otherwise not [entitle the probationer] entitled to any privilege conferred by NRS 176A.850.
- Sec. 2. Chapter 179 of NRS is hereby amended by adding thereto the provisions set forth as sections 3, 4 and 5 of this act.
- Sec. 3. The Legislature hereby declares that the public policy of this State is to favor the giving of second chances to offenders who are rehabilitated and the sealing of the records of such persons in accordance with NRS 179.241 to 179.301, inclusive and sections 3, 4 and 5 of this act.
- Sec. 4. Upon the filing of a petition for the sealing of records pursuant to NRS 179.245, 179.255 or 179.259 or section 5 of this act  $\rightleftharpoons$
- 1. There], there is a rebuttable presumption that the records should be sealed if the applicant satisfies all statutory requirements for the sealing of the records. [: and]
- 2. If a hearing on the petition is conducted, the prosecuting attorney with jurisdiction or the Division of Parole and Probation of the Department of Public Safety, as applicable, must prove by clear and convincing evidence that the records should not be sealed.
- Sec. 5. Notwithstanding the procedure established in NRS 179.245, 179.255 or 179.259 for the filing of a petition for the sealing of records:
- 1. If a person wishes to have more than one record sealed and would otherwise need to file a petition in more than one court for the sealing of the records, the person may, instead of filing a petition in each court, file a petition in district court for the sealing of all such records.
- 2. If a person files a petition for the sealing of records in district court pursuant to subsection 1 or NRS 179.245, 179.255 or 179.259, the district court may order the sealing of any other records in the justice or municipal courts in accordance with the provisions of NRS 179.241 to 179.301, inclusive, and sections 3, 4 and 5 of this act.
  - Sec. 6. NRS 179.241 is hereby amended to read as follows:
- 179.241 As used in NRS 179.241 to 179.301, inclusive, *and sections 3*, 4 and 5 of this act, unless the context otherwise requires, the words and terms

defined in NRS 179.242, 179.243 and 179.244 have the meanings ascribed to them in those sections.

- Sec. 7. NRS 179.245 is hereby amended to read as follows:
- 179.245 1. Except as otherwise provided in subsection [5] 6 and NRS 176A.265, 176A.295, 179.259, 453.3365 and 458.330, a person may petition the court in which the person was convicted for the sealing of all records relating to a conviction of:
- (a) A category A [or B] felony, a crime of violence or a burglary of a residence, after [15] 10 years from the date of release from actual custody or discharge from parole or probation, whichever occurs later;
- (b) [A] Except as otherwise provided in paragraphs (a) and (e), a category B, C or D felony after [12] 5 years from the date of release from actual custody or discharge from parole or probation, whichever occurs later;
- (c) A category E felony after [7] 2 years from the date of release from actual custody or discharge from parole or probation, whichever occurs later;
- <u>(d)</u> Except as otherwise provided in paragraph <u>(e)</u>, <u>{(b),}</u> any <u>{felony or}</u> gross misdemeanor after <u>[5] 2 years</u> <u>{1 year}</u> from the date of release from actual custody or discharge from probation, whichever occurs later;
- (e) f(b)] A violation of NRS 422.540 to 422.570, inclusive, fother than a felony,] a violation of NRS 484C.110 or 484C.120 other than a felony, or a battery which constitutes domestic violence pursuant to NRS 33.018 f-f other than a felony, after 7 years from the date of release from actual custody or from the date when the person is no longer under a suspended sentence, whichever occurs later; forl
- (f) {(e)} Except as otherwise provided in paragraph (e), a misdemeanor for battery pursuant to NRS 200.481, a misdemeanor for harassment, a misdemeanor for stalking or a misdemeanor for a violation of a temporary or extended order for protection against harassment or stalking, 2 years after the date of release from actual custody or after the date when the person is no longer under a suspended sentence, whichever occurs later; or
- <u>(g)</u> Any other misdemeanor after [2 years] 1 year from the date of release from actual custody or from the date when the person is no longer under a suspended sentence, whichever occurs later.
  - 2. A petition filed pursuant to subsection 1 must:
- (a) Be accompanied by the petitioner's current, verified records received from  $\crule{\vdash}$
- (1) The] the Central Repository for Nevada Records of Criminal History; [and
- (2) All agencies of criminal justice which maintain such records within the city or county in which the conviction was entered;]
- (b) If the petition references NRS 453.3365 or 458.330, include a certificate of acknowledgment or the disposition of the proceedings for the records to be sealed from all agencies of criminal justice which maintain such records;
- (c) Include a list of any other public or private agency, company, official or other custodian of records that is reasonably known to the petitioner to have

possession of records of the conviction and to whom the order to seal records, if issued, will be directed; and

- (d) Include information that, to the best knowledge and belief of the petitioner, accurately and completely identifies the records to be sealed, including, without limitation, the:
  - (1) Date of birth of the petitioner;
  - (2) Specific conviction to which the records to be sealed pertain; and
- (3) Date of arrest relating to the specific conviction to which the records to be sealed pertain.
- 3. Upon receiving a petition pursuant to this section, the court shall notify the law enforcement agency that arrested the petitioner for the crime and the prosecuting attorney, including, without limitation, the Attorney General, who prosecuted the petitioner for the crime. The prosecuting attorney and any person having relevant evidence may testify and present evidence at [the] any hearing on the petition.
- 4. If the prosecuting attorney who prosecuted the petitioner for the crime stipulates to the sealing of the records after receiving notification pursuant to subsection 3 and the court makes the findings set forth in subsection 5, the court may order the sealing of the records in accordance with subsection 5 without a hearing. If the prosecuting attorney does not stipulate to the sealing of the records, a hearing on the petition must be conducted.
- 5. If [, after the hearing,] the court finds that, in the period prescribed in subsection 1, the petitioner has not been charged with any offense for which the charges are pending or convicted of any offense, except for minor moving or standing traffic violations, the court may order sealed all records of the conviction which are in the custody of any agency of criminal justice or any public or private agency, company, official or other custodian of records in the State of Nevada, and may also order all such records of the petitioner returned to the file of the court where the proceeding was commenced from, including, without limitation, the Federal Bureau of Investigation, the California Bureau of Criminal Identification and Information and all other agencies of criminal justice which maintain such records and which are reasonably known by either the petitioner or the court to have possession of such records.
- [5.] 6. A person may not petition the court to seal records relating to a conviction of:
  - (a) A crime against a child;
  - (b) A sexual offense;
- (c) A violation of NRS 484C.110 or 484C.120 that is punishable as a felony pursuant to paragraph (c) of subsection 1 of NRS 484C.400;
  - (d) A violation of NRS 484C.430;
- (e) A homicide resulting from driving or being in actual physical control of a vehicle while under the influence of intoxicating liquor or a controlled substance or resulting from any other conduct prohibited by NRS 484C.110, 484C.130 or 484C.430;

- (f) A violation of NRS 488.410 that is punishable as a felony pursuant to NRS 488.427; or
  - (g) A violation of NRS 488.420 or 488.425.
- [6.] 7. If the court grants a petition for the sealing of records pursuant to this section, upon the request of the person whose records are sealed, the court may order sealed all records of the civil proceeding in which the records were sealed.
  - [7.] 8. As used in this section:
- (a) "Crime against a child" has the meaning ascribed to it in NRS 179D.0357.
- (b) "Crime of violence" means any felony for which there is a substantial risk that force or violence may be used against the person or property of another in the commission of the felony.
- (c) "Harassment" means a violation of NRS 200.571.
- (d) "Residence" means any house, room, apartment, tenement or other building, vehicle, vehicle trailer, semitrailer, house trailer or boat designed or intended for occupancy as a residence.
- (e) "Sexual offense" means:
- (1) Murder of the first degree committed in the perpetration or attempted perpetration of sexual assault or of sexual abuse or sexual molestation of a child less than 14 years of age pursuant to paragraph (b) of subsection 1 of NRS 200.030.
  - (2) Sexual assault pursuant to NRS 200.366.
- (3) Statutory sexual seduction pursuant to NRS 200.368, if punishable as a felony.
- (4) Battery with intent to commit sexual assault pursuant to NRS 200.400.
- (5) An offense involving the administration of a drug to another person with the intent to enable or assist the commission of a felony pursuant to NRS 200.405, if the felony is an offense listed in this paragraph.
- (6) An offense involving the administration of a controlled substance to another person with the intent to enable or assist the commission of a crime of violence pursuant to NRS 200.408, if the crime of violence is an offense listed in this paragraph.
- (7) Abuse of a child pursuant to NRS 200.508, if the abuse involved sexual abuse or sexual exploitation.
- (8) An offense involving pornography and a minor pursuant to NRS 200.710 to 200.730, inclusive.
  - (9) Incest pursuant to NRS 201.180.
- (10) Open or gross lewdness pursuant to NRS 201.210, if punishable as a felony.
- (11) Indecent or obscene exposure pursuant to NRS 201.220, if punishable as a felony.
  - (12) Lewdness with a child pursuant to NRS 201.230.
  - (13) Sexual penetration of a dead human body pursuant to NRS 201.450.

- (14) Sexual conduct between certain employees of a school or volunteers at a school and a pupil pursuant to NRS 201.540.
- (15) Sexual conduct between certain employees of a college or university and a student pursuant to NRS 201.550.
- (16) Luring a child or a person with mental illness pursuant to NRS 201.560, if punishable as a felony.
  - (17) An attempt to commit an offense listed in this paragraph.
- (f) "Stalking" means a violation of NRS 200.575.
- Sec. 8. NRS 179.255 is hereby amended to read as follows:
- 179.255 1. If a person has been arrested for alleged criminal conduct and the charges are dismissed, the prosecuting attorney having jurisdiction declined prosecution of the charges or such person is acquitted of the charges, the person may petition:
- (a) The court in which the charges were dismissed, at any time after the date the charges were dismissed;
- (b) The court having jurisdiction in which the charges were declined for prosecution:
  - (1) Any time after the applicable statute of limitations has run;
  - (2) Any time [10] 8 years after the arrest; or
  - (3) Pursuant to a stipulation between the parties; or
- (c) The court in which the acquittal was entered, at any time after the date of the acquittal,
- → for the sealing of all records relating to the arrest and the proceedings leading to the dismissal, declination or acquittal.
- 2. If the conviction of a person is set aside pursuant to NRS 458A.240, the person may petition the court that set aside the conviction, at any time after the conviction has been set aside, for the sealing of all records relating to the setting aside of the conviction.
  - 3. A petition filed pursuant to subsection 1 or 2 must:
- (a) Be accompanied by the petitioner's current, verified records received from  $\vdash$ :
- (1) The] the Central Repository for Nevada Records of Criminal History; fand
- (2) All agencies of criminal justice which maintain such records within the city or county in which the petitioner appeared in court;]
- (b) Except as otherwise provided in paragraph (c), include the disposition of the proceedings for the records to be sealed;
- (c) If the petition references NRS 453.3365 or 458.330, include a certificate of acknowledgment or the disposition of the proceedings for the records to be sealed from all agencies of criminal justice which maintain such records;
- (d) Include a list of any other public or private agency, company, official and other custodian of records that is reasonably known to the petitioner to have possession of records of the arrest and of the proceedings leading to the dismissal, declination or acquittal and to whom the order to seal records, if issued, will be directed; and

- (e) Include information that, to the best knowledge and belief of the petitioner, accurately and completely identifies the records to be sealed, including, without limitation, the:
  - (1) Date of birth of the petitioner;
- (2) Specific charges that were dismissed or of which the petitioner was acquitted; and
- (3) Date of arrest relating to the specific charges that were dismissed or of which the petitioner was acquitted.
- 4. Upon receiving a petition pursuant to subsection 1, the court shall notify the law enforcement agency that arrested the petitioner for the crime and:
- (a) If the charges were dismissed, declined for prosecution or the acquittal was entered in a district court or justice court, the prosecuting attorney for the county; or
- (b) If the charges were dismissed, declined for prosecution or the acquittal was entered in a municipal court, the prosecuting attorney for the city.
- → The prosecuting attorney and any person having relevant evidence may testify and present evidence at [the] any hearing on the petition.
- 5. Upon receiving a petition pursuant to subsection 2, the court shall notify:
- (a) If the conviction was set aside in a district court or justice court, the prosecuting attorney for the county; or
- (b) If the conviction was set aside in a municipal court, the prosecuting attorney for the city.
- → The prosecuting attorney and any person having relevant evidence may testify and present evidence at [the] any hearing on the petition.
- 6. If the prosecuting attorney stipulates to the sealing of the records after receiving notification pursuant to subsection 4 or 5 and the court makes the findings set forth in subsection 7 or 8, as applicable, the court may order the sealing of the records in accordance with subsection 7 or 8, as applicable, without a hearing. If the prosecuting attorney does not stipulate to the sealing of the records, a hearing on the petition must be conducted.
- 7. If [, after the hearing on a petition submitted pursuant to subsection 1,] the court finds that there has been an acquittal, that the prosecution was declined or that the charges were dismissed and there is no evidence that further action will be brought against the person, the court may order sealed all records of the arrest and of the proceedings leading to the acquittal, declination or dismissal which are in the custody of any agency of criminal justice or any public or private company, agency, official or other custodian of records in the State of Nevada.
- [7.] 8. If [, after the hearing on a petition submitted pursuant to subsection 2,] the court finds that the conviction of the petitioner was set aside pursuant to NRS 458A.240, the court may order sealed all records relating to the setting aside of the conviction which are in the custody of any agency of criminal justice or any public or private company, agency, official or other custodian of records in the State of Nevada.

- [8.] 9. If the prosecuting attorney having jurisdiction previously declined prosecution of the charges and the records of the arrest have been sealed pursuant to subsection [6,] 7, the prosecuting attorney may subsequently file the charges at any time before the running of the statute of limitations for those charges. If such charges are filed with the court, the court shall order the inspection of the records without the prosecuting attorney having to petition the court pursuant to NRS 179.295.
  - Sec. 9. NRS 179.259 is hereby amended to read as follows:
- 179.259 1. Except as otherwise provided in subsections 3, 4 and 5, [5]-4 years after an eligible person completes a program for reentry, the court may order sealed all documents, papers and exhibits in the eligible person's record, minute book entries and entries on dockets, and other documents relating to the case in the custody of such other agencies and officers as are named in the court's order. The court may order those records sealed without a hearing unless the Division of Parole and Probation of the Department of Public Safety petitions the court, for good cause shown, not to seal the records and requests a hearing thereon.
- 2. If the court orders sealed the record of an eligible person, the court shall send a copy of the order to each agency or officer named in the order. Each such agency or officer shall notify the court in writing of its compliance with the order.
- 3. A professional licensing board is entitled, for the purpose of determining suitability for a license or liability to discipline for misconduct, to inspect and to copy from a record sealed pursuant to this section.
- 4. The Division of Insurance of the Department of Business and Industry is entitled, for the purpose of determining suitability for a license or liability to discipline for misconduct, to inspect and to copy from a record sealed pursuant to this section.
- 5. A person may not petition the court to seal records relating to a conviction of a crime against a child or a sexual offense.
  - 6. As used in this section:
- (a) "Crime against a child" has the meaning ascribed to it in NRS 179D.0357.
  - (b) "Eligible person" means a person who has:
- (1) Successfully completed a program for reentry, which the person participated in pursuant to NRS 209.4886, 209.4888, 213.625 or 213.632; and
- (2) Been convicted of a single offense which was punishable as a felony and which did not involve the use or threatened use of force or violence against the victim. For the purposes of this subparagraph, multiple convictions for an offense punishable as a felony shall be deemed to constitute a single offense if those offenses arose out of the same transaction or occurrence.
  - (c) "Program for reentry" means:
- (1) A correctional program for reentry of offenders and parolees into the community that is established by the Director of the Department of Corrections pursuant to NRS 209.4887; or

- (2) A judicial program for reentry of offenders and parolees into the community that is established in a judicial district pursuant to NRS 209.4883.
- (d) "Sexual offense" has the meaning ascribed to it in paragraph  $\frac{(e)}{(e)}$  of subsection  $\frac{(7)}{8}$  of NRS 179.245.
  - Sec. 10. NRS 179.275 is hereby amended to read as follows:
- 179.275 Where the court orders the sealing of a record pursuant to NRS 176A.265, 176A.295, 179.245, 179.255, 179.259, 453.3365 or 458.330, *or section 5 of this act*, a copy of the order must be sent to:
  - 1. The Central Repository for Nevada Records of Criminal History; and
- 2. Each agency of criminal justice and each public or private company, agency, official or other custodian of records named in the order, and that person shall seal the records in his or her custody which relate to the matters contained in the order, shall advise the court of compliance and shall then seal the order.
  - Sec. 11. NRS 179.285 is hereby amended to read as follows:
  - 179.285 Except as otherwise provided in NRS 179.301:
- 1. If the court orders a record sealed pursuant to NRS 176A.265, 176A.295, 179.245, 179.255, 179.259, 453.3365 or 458.330 [:] or section 5 of this act:
- (a) All proceedings recounted in the record are deemed never to have occurred, and the person to whom the order pertains may properly answer accordingly to any inquiry, including, without limitation, an inquiry relating to an application for employment, concerning the arrest, conviction, dismissal or acquittal and the events and proceedings relating to the arrest, conviction, dismissal or acquittal.
- (b) The person is immediately restored to the following civil rights if the person's civil rights previously have not been restored:
  - (1) The right to vote;
  - (2) The right to hold office; and
  - (3) The right to serve on a jury.
- 2. Upon the sealing of the person's records, a person who is restored to his or her civil rights pursuant to subsection 1 must be given:
- (a) An official document which demonstrates that the person has been restored to the civil rights set forth in paragraph (b) of subsection 1; and
- (b) A written notice informing the person that he or she has not been restored to the right to bear arms, unless the person has received a pardon and the pardon does not restrict his or her right to bear arms.
- 3. A person who has had his or her records sealed in this State or any other state and whose official documentation of the restoration of civil rights is lost, damaged or destroyed may file a written request with a court of competent jurisdiction to restore his or her civil rights pursuant to this section. Upon verification that the person has had his or her records sealed, the court shall issue an order restoring the person to the civil rights to vote, to hold office and to serve on a jury. A person must not be required to pay a fee to receive such an order.

- 4. A person who has had his or her records sealed in this State or any other state may present official documentation that the person has been restored to his or her civil rights or a court order restoring civil rights as proof that the person has been restored to the right to vote, to hold office and to serve as a juror.
  - Sec. 12. NRS 179.295 is hereby amended to read as follows:
- 179.295 1. The person who is the subject of the records that are sealed pursuant to NRS 176A.265, 176A.295, 179.245, 179.255, 179.259, 453.3365 or 458.330 or section 5 of this act may petition the court that ordered the records sealed to permit inspection of the records by a person named in the petition, and the court may order such inspection. Except as otherwise provided in this section, subsection [8] 9 of NRS 179.255 and NRS 179.259 and 179.301, the court may not order the inspection of the records under any other circumstances.
- 2. If a person has been arrested, the charges have been dismissed and the records of the arrest have been sealed, the court may order the inspection of the records by a prosecuting attorney upon a showing that as a result of newly discovered evidence, the person has been arrested for the same or a similar offense and that there is sufficient evidence reasonably to conclude that the person will stand trial for the offense.
- 3. The court may, upon the application of a prosecuting attorney or an attorney representing a defendant in a criminal action, order an inspection of such records for the purpose of obtaining information relating to persons who were involved in the incident recorded.
- 4. This section does not prohibit a court from considering a conviction for which records have been sealed pursuant to NRS 176A.265, 176A.295, 179.245, 179.255, 179.259, 453.3365 or 458.330 or section 5 of this act in determining whether to grant a petition pursuant to NRS 176A.265, 176A.295, 179.245, 179.255, 179.259, 453.3365 or 458.330 or section 5 of this act for a conviction of another offense.
- Sec. 13. Chapter 179A of NRS is hereby amended by adding thereto a new section to read as follows:

Before an agency of criminal justice disseminates any record of criminal history to a person or entity other than another agency of criminal justice pursuant to the provisions of this chapter, the agency of criminal justice must remove any record of:

- 1. A conviction of a category E felony or gross misdemeanor for which the date of release from actual custody or discharge from parole or probation, whichever occurred later, was 10 or more years before the date of dissemination.
- 2. [A] Except as otherwise provided in subsection 3, a conviction of a misdemeanor for which the date of release from actual custody or the date on which the person was no longer under a suspended sentence, whichever occurred later, was 5 or more years before the date of dissemination.

- 3. The provisions of subsection 2 do not apply to a misdemeanor for an act which constitutes domestic violence pursuant to NRS 33.018 or a violation of NRS 484C.110, 484C.120 or 484C.130.
  - Sec. 14. NRS 179A.030 is hereby amended to read as follows:

179A.030 "Agency of criminal justice" means:

- 1. Any court; and
- 2. Any governmental agency or subunit of any governmental agency which performs a function in the administration of criminal justice pursuant to a statute or executive order, and which allocates a substantial part of its budget to a function in the administration of criminal justice [.], including, without limitation, a local law enforcement agency, the Nevada Highway Patrol, the Division of Parole and Probation of the Department of Public Safety and the Department of Corrections.
  - Sec. 15. NRS 179A.100 is hereby amended to read as follows:

179A.100 Subject to the requirements set forth in section 13 of this act:

- 1. The following records of criminal history may be disseminated by an agency of criminal justice without any restriction pursuant to this chapter:
  - (a) Any which reflect records of conviction only; and
- (b) Any which pertain to an incident for which a person is currently within the system of criminal justice, including parole or probation.
- 2. Without any restriction pursuant to this chapter, a record of criminal history or the absence of such a record may be:
- (a) Disclosed among agencies which maintain a system for the mutual exchange of criminal records.
- (b) Furnished by one agency to another to administer the system of criminal justice, including the furnishing of information by a police department to a district attorney.
  - (c) Reported to the Central Repository.
- 3. An agency of criminal justice shall disseminate to a prospective employer, upon request, records of criminal history concerning a prospective employee or volunteer which are the result of a name-based inquiry and which:
  - (a) Reflect convictions only; or
- (b) Pertain to an incident for which the prospective employee or volunteer is currently within the system of criminal justice, including parole or probation.
- 4. In addition to any other information to which an employer is entitled or authorized to receive from a name-based inquiry, the Central Repository shall disseminate to a prospective or current employer, or a person or entity designated to receive the information on behalf of such an employer, the information contained in a record of registration concerning an employee, prospective employee, volunteer or prospective volunteer who is a sex offender or an offender convicted of a crime against a child, regardless of whether the employee, prospective employee, volunteer or prospective volunteer gives written consent to the release of that information. The Central Repository shall disseminate such information in a manner that does not reveal

the name of an individual victim of an offense or the information described in subsection 7 of NRS 179B.250. A request for information pursuant to this subsection must conform to the requirements of the Central Repository and must include:

- (a) The name and address of the employer, and the name and signature of the person or entity requesting the information on behalf of the employer;
- (b) The name and address of the employer's facility in which the employee, prospective employee, volunteer or prospective volunteer is employed or volunteers or is seeking to become employed or volunteer; and
- (c) The name and other identifying information of the employee, prospective employee, volunteer or prospective volunteer.
- 5. In addition to any other information to which an employer is entitled or authorized to receive, the Central Repository shall disseminate to a prospective or current employer, or a person or entity designated to receive the information on behalf of such an employer, the information described in subsection 4 of NRS 179A.190 concerning an employee, prospective employee, volunteer or prospective volunteer who gives written consent to the release of that information if the employer submits a request in the manner set forth in NRS 179A.200 for obtaining a notice of information. The Central Repository shall search for and disseminate such information in the manner set forth in NRS 179A.210 for the dissemination of a notice of information.
- 6. Except as otherwise provided in subsection 5, the provisions of NRS 179A.180 to 179A.240, inclusive, do not apply to an employer who requests information and to whom such information is disseminated pursuant to subsections 4 and 5.
- 7. Records of criminal history must be disseminated by an agency of criminal justice, upon request, to the following persons or governmental entities:
- (a) The person who is the subject of the record of criminal history for the purposes of NRS 179A.150.
- (b) The person who is the subject of the record of criminal history when the subject is a party in a judicial, administrative, licensing, disciplinary or other proceeding to which the information is relevant.
  - (c) The Nevada Gaming Control Board.
  - (d) The State Board of Nursing.
- (e) The Private Investigator's Licensing Board to investigate an applicant for a license.
- (f) A public administrator to carry out the duties as prescribed in chapter 253 of NRS.
- (g) A public guardian to investigate a ward or proposed ward or persons who may have knowledge of assets belonging to a ward or proposed ward.
- (h) Any agency of criminal justice of the United States or of another state or the District of Columbia.
- (i) Any public utility subject to the jurisdiction of the Public Utilities Commission of Nevada when the information is necessary to conduct a

security investigation of an employee or prospective employee or to protect the public health, safety or welfare.

- (j) Persons and agencies authorized by statute, ordinance, executive order, court rule, court decision or court order as construed by appropriate state or local officers or agencies.
- (k) Any person or governmental entity which has entered into a contract to provide services to an agency of criminal justice relating to the administration of criminal justice, if authorized by the contract, and if the contract also specifies that the information will be used only for stated purposes and that it will be otherwise confidential in accordance with state and federal law and regulation.
- (1) Any reporter for the electronic or printed media in a professional capacity for communication to the public.
- (m) Prospective employers if the person who is the subject of the information has given written consent to the release of that information by the agency which maintains it.
- (n) For the express purpose of research, evaluative or statistical programs pursuant to an agreement with an agency of criminal justice.
- (o) An agency which provides child welfare services, as defined in NRS 432B.030.
- (p) The Division of Welfare and Supportive Services of the Department of Health and Human Services or its designated representative, as needed to ensure the safety of investigators and caseworkers.
- (q) The Aging and Disability Services Division of the Department of Health and Human Services or its designated representative, as needed to ensure the safety of investigators and caseworkers.
- (r) An agency of this or any other state or the Federal Government that is conducting activities pursuant to Part D of Subchapter IV of Chapter 7 of Title 42 of the Social Security Act, 42 U.S.C. §§ 651 et seq.
- (s) The State Disaster Identification Team of the Division of Emergency Management of the Department.
  - (t) The Commissioner of Insurance.
  - (u) The Board of Medical Examiners.
  - (v) The State Board of Osteopathic Medicine.
  - (w) The Board of Massage Therapists and its Executive Director.
  - (x) The Board of Examiners for Social Workers.
- (y) A multidisciplinary team to review the death of the victim of a crime that constitutes domestic violence organized or sponsored by the Attorney General pursuant to NRS 228.495.
- 8. Agencies of criminal justice in this State which receive information from sources outside this State concerning transactions involving criminal justice which occur outside Nevada shall treat the information as confidentially as is required by the provisions of this chapter.
  - Sec. 16. NRS 453.3365 is hereby amended to read as follows:

- 453.3365 1. [Three years after a person is convicted and sentenced pursuant to subsection 3 of NRS 453.336, the court may order sealed all documents, papers and exhibits in that person's record, minute book entries and entries on dockets, and other documents relating to the case in the custody of such other agencies and officers as are named in the court's order, if the:
- (a) Person fulfills the terms and conditions imposed by the court and the parole and probation officer; and
- (b) Court, after a hearing, is satisfied that the person is rehabilitated.
- —2.] Except as limited by subsection [4,] 3, after an accused is discharged from probation pursuant to NRS 453.3363, the court shall order sealed all documents, papers and exhibits in that person's record, minute book entries and entries on dockets, and other documents relating to the case in the custody of such other agencies and officers as are named in the court's order if the person fulfills the terms and conditions imposed by the court and the Division of Parole and Probation of the Department of Public Safety. The court shall order those records sealed without a hearing unless the Division of Parole and Probation petitions the court, for good cause shown, not to seal the records and requests a hearing thereon.
- [3.] 2. If the court orders sealed the record of a person discharged pursuant to NRS 453.3363, it shall cause a copy of the order to be sent to each agency or officer named in the order. Each such agency or officer shall notify the court in writing of its compliance with the order.
- [4.] 3. A professional licensing board is entitled, for the purpose of determining suitability for a license or liability to discipline for misconduct, to inspect and to copy from a record sealed pursuant to this section.
- Sec. 17. 1. The amendatory provisions of sections 7 and 8 of this act apply to a petition for the sealing of a record of criminal history that is filed on or after October 1, 2017. As used in this section, "record of criminal history" has the meaning ascribed to it in NRS 179A.070.
- 2. The amendatory provisions of NRS 453.3365, as amended by section 16 of this act, apply to a person convicted and sentenced pursuant to subsection 3 of NRS 453.336 on or after October 1, 2017.

Senator Segerblom moved the adoption of the amendment.

Remarks by Senator Segerblom.

Amendment No. 216 to Senate Bill No. 453 provides a rebuttable presumption that a person's criminal records should be sealed upon the filing of a petition for such. It also removes any misdemeanor that constitutes domestic violence from a list of misdemeanors that must be removed from certain person's records by a criminal justice agency prior to disseminating the records to any entity other than another criminal justice entity.

Amendment adopted.

Senator Segerblom moved that the bill be re-referred to the Committee on Finance, upon return from reprint.

Motion carried.

Bill ordered reprinted, engrossed and to the Committee on Finance.

#### GENERAL FILE AND THIRD READING

Senate Bill No. 52.

Bill read third time.

Remarks by Senator Cannizzaro.

Senate Bill No. 52 makes various changes to provisions governing unemployment compensation. First, the bill eliminates the alternative base period for unemployment-insurance benefits in accordance with the federal guidance that authorizes such action.

Second, the Administrator of the Employment Security Division of the Department of Employment, Training and Rehabilitation must report to the State Controller fraudulent overpayments of benefits for purposes of offsetting the debt against payments owed by other State entities to the person who is liable for the overpayment and preventing the renewal of the professional or occupational license of such a person. Similarly, the Administrator must also notify the State Controller of any employer against whom a judgement was obtained for failure to pay unemployment benefits.

Third, the State Controller must provide to the holder of a professional or occupational license, permit, certificate or registration who owes a debt reported by the Administrator and the applicable licensing agency certain information regarding the debt. A licensing agency is prohibited from renewing the license until the debt is satisfied, a payment plan is executed or the debt is demonstrated to be invalid.

Finally, the measure clarifies that procedures for charging to an employer's account the benefits paid to a former employee apply to employers who make reimbursement payments in lieu of contributions as well as employers who make contributions.

Roll call on Senate Bill No. 52:

YEAS—21.

NAYS-None.

Senate Bill No. 52 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 81.

Bill read third time.

Remarks by Senator Hardy.

Senate Bill No. 81 revises existing law to eliminate state-chartered savings and loan associations and instead provide for the creation, operation and oversight of state-chartered savings banks. Specifically, the bill converts each savings and loan association and any other depository institution chartered under Chapter 673 of the *Nevada Revised Statutes* into a savings-bank. Each such converted entity has the same powers, privileges, immunities and exceptions as a savings-bank.

Additionally, the bill establishes various organizational, operational and regulatory provisions for savings-banks in a manner generally consistent with the existing provisions for a savings and loan association.

The Commissioner of Financial Institutions must immediately issue a savings-bank charter to each converted entity. An entity is prohibited from carrying on the business of a savings-bank without being incorporated as a state-chartered savings bank.

The bill authorizes a savings-bank to become a member of the Federal Reserve System and provides that a savings bank that becomes a member has the powers granted to member banks under the Federal Reserve Act. A savings-bank that becomes a member of the Federal Reserve System remains subject to supervision by the Division of Financial Institutions and information concerning the affairs of the savings-bank may be shared with the Board of Governors of the Federal Reserve System.

Roll call on Senate Bill No. 81:

YEAS—21.

NAYS-None.

Senate Bill No. 81 having received a two-thirds majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 86.

Bill read third time.

Remarks by Senators Gustavson and Atkinson.

SENATOR GUSTAVSON:

Senate Bill No. 86 authorizes instruction in cursive handwriting to be provided to students enrolled in public elementary schools, including charter schools. The State Board of Education may adopt regulations prescribing standards for such instruction.

SENATOR ATKINSON:

Does this just authorize this instruction or does it mandate it?

SENATOR GUSTAVSON:

This is permissive; it does not mandate the instruction.

Roll call on Senate Bill No. 86:

YEAS-21.

NAYS-None.

Senate Bill No. 86 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 151.

Bill read third time.

Remarks by Senators Manendo, Kieckhefer, Gansert and Hammond.

SENATOR MANENDO:

Senate Bill No. 151 authorizes the district board of health in a county whose population is 700,000 or more, currently Clark County, to establish, equip and maintain a public-health laboratory. If a district public-health lab is established, it may analyze the purity of food and drugs; investigate cases and suspected cases of human exposure to certain dangerous agents; investigate cases and suspected cases of infectious diseases and debilitating conditions; and undertake other laboratory duties in the interest of public health. With 73 percent of the population living in southern Nevada and 43 million people visiting yearly, this is important to our residents and our tourists. I urge passage of this bill.

#### SENATOR KIECKHEFER:

This is a valuable effort, but the time is not correct to create a second public-health lab in this State. We have one that we have just gotten to a well-functioning level. Two or three years ago, we were sending all of our newborn screenings to Oregon. We have heavily invested as a State into the public-health lab that currently exists at University of Nevada in northern Nevada, and we have it at a place where it is well-functioning and meeting our needs. If we create a second, I fear we will have two public-health labs that are under-functioning, under-performing and under-funded rather than having one that is meeting our needs. While I think, long-term, this may be something that is necessary, now is not the appropriate time for it, and I will be voting against it.

#### SENATOR GANSERT:

I rise in opposition as well, mostly because of the cost, but also because of the compilation of information. Most larger states have one main state health lab with branches. As of 2003, southern Nevada's health-district lab is a branch of the one main lab for the State. When health data for the State is reviewed, it makes sense to have one lab. A significant investment was made in this lab so we could do the post-birth screening on infants.

#### SENATOR HAMMOND:

I rise in support of the bill. We heard a lot of testimony during hearings, and one thing that was brought to our attention was the number of illnesses that people living in southern Nevada are exposed to through things like mosquitos and other factors. It was a question of time and being timely about what is happening in southern Nevada. It was brought up that having two labs might not be the best scenario but having something close to the southern area is important to the health and safety of the residents of that area. Some of the testimony felt we could compromise and send the whole thing down there, but I do not think we need to go that far. I support this bill.

Roll call on Senate Bill No. 151:

YEAS-19.

NAYS-Gansert, Kieckhefer-2.

Senate Bill No. 151 having received a two-thirds majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 162.

Bill read third time.

Remarks by Senators Gansert and Hardy.

#### SENATOR GANSERT:

Senate Bill No. 162 requires a person who wishes to obtain postdoctoral experience in psychology to register as a psychological assistant by the Board of Psychological Examiners. A person who is in a doctoral program in psychology may register with the Board as a psychological intern or a psychological trainee, as applicable. An applicant for such a registration must submit an application, an application fee and his or her fingerprints. A person registered as a psychological assistant, psychological intern or psychological trainee must renew his or her registration annually. However, the registration may not be renewed if the renewal would cause the person to be registered for more than three years. A person registered by the Board is required to perform professional activities and services under the supervision of a licensed psychologist.

The bill authorizes the Department of Health and Human Services to reimburse a licensed psychologist, under the State Plan for Medicaid and to the extent authorized by federal law, for services rendered by a registered psychological assistant, psychological intern or psychological trainee who is under the supervision of the psychologist.

#### SENATOR HARDY:

I rise in support of Senate Bill No. 162. This bill will be an economic opportunity for people, who are not currently being trained and being paid, to be able to be paid. When you pay someone to come here and practice, they may stay, and if they stay, we have more people who can deliver mental-health services.

Roll call on Senate Bill No. 162:

YEAS—21.

NAYS-None.

Senate Bill No. 162 having received a two-thirds majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 164. Bill read third time.

Remarks by Senators Farley and Hardy.

#### SENATOR FARLEY:

Senate Bill No. 164 allows a school district to enter into written agreements to lease school buses or vehicles for special events taking place within the school district that are not part of any school program as long as the agreements do not interfere with or prevent the regular transport of a district's students. The provisions of such lease agreements must include a minimum 20-percent security deposit; a fee equal to or greater than the cost per mile to operate the vehicle, including any additional costs related to the lease and an additional rental service fee; indemnification of the school district against all liability, losses and damages and indemnification of the school bus driver; lessee responsibility for any damage to the vehicle while leased; a requirement that the lessee provide proof of insurance and proof that the leased vehicle will be operated by a properly licensed person; a requirement that the lessee provide proof of a permit or special event approval if required by a governmental entity; a provision giving preference to drivers who are already employed by the school district; a requirement that any lettering designating the vehicle as a school bus or vehicle must be covered and concealed and a prohibition against affixing signs or wording to a leased vehicle, and a prohibition against operating a leased vehicle's system of flashing lights, except in the case of emergency.

Any fees collected in excess of the actual cost to operate a leased vehicle must be placed in a fund maintained for vehicle replacement. Finally, a school district may not enter into a vehicle-lease agreement if it determines that transportation by a commercial bus is reasonably available for a special event, nor may it lease at any time more than 8.5 percent of the total number of school buses and vehicles it owns.

#### SENATOR HARDY:

Illegal substances are not allowed on the bus when someone else is using it, so this is a great public-private partnership. Is it true that things that normally would not be allowed on a school bus, as required by the Clean Air Act which disallows smoking or vaping or any other recreational materials, would not be allowed even though they may be legal?

#### SENATOR FARLEY:

Those issues were addressed during the hearing on this bill, and that is something the school district can and should put into the lease agreements for these buses.

Roll call on Senate Bill No. 164:

YEAS-21.

NAYS-None.

Senate Bill No. 164 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 185.

Bill read third time.

Remarks by Senator Parks.

Senate Bill No. 185 prohibits a seller or lessor of consumer goods or services who uses a form contract from including in the contract a provision that limits or requires the consumer to waive his or her rights to provide a review, comment or other statement concerning the seller or lessor of the goods or services; imposes a penalty on the consumer for providing such a review, comment or other statement; or declares that the provision of such a review, comment or other statement is a breach of the contract.

Further, any such provision included in a form contract is unenforceable. A person who violates the provisions of the bill is guilty of a misdemeanor and is liable for civil penalties. A consumer

or governmental entity is authorized to bring an action to recover the civil penalty and to retain any money awarded by the court.

Finally, a person who maintains an online forum, such as an Internet website, may remove from the forum any statement or information that the person is lawfully entitled to remove.

Roll call on Senate Bill No. 185:

YEAS—21.

NAYS-None.

Senate Bill No. 185 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 232.

Bill read third time.

Remarks by Senators Segerblom and Settelmeyer.

SENATOR SEGERBLOM:

Senate Bill No. 232 enacts the Domestic Workers' Bill of Rights. A domestic worker is defined as a natural person who is paid by an employer to perform work of a domestic nature and requires that an employer of a domestic worker supply to him or her certain written documentation of the conditions of his or her employment and rights under the law. The measure provides for the mandatory payment of wages and overtime wages for certain hours worked, limitations on deductions for food and lodging, rest breaks and days off.

In addition, the bill provides that a child under the age of 16 years may not be employed in domestic service for more than 8 hours in a day or more than 48 hours in a week.

#### SENATOR SETTELMEYER:

There were concerns with this bill when it went through Commerce, Labor and Energy that it could create a situation where individuals would potentially have to be paid workers compensation rather than allowing them to have private insurance. There were also issues and concerns about the concept that more people might go to independent contractors which then could create more of an exploitation of individuals. Concerns were also raised about section 6, based on overtime, by paying someone for the entire sleep time. Bills from previous Sessions discussed the concept that if an individual was able to get more than two hours of sleep, they would not be paid for the entire sleep period. This bill mandates they have to be paid hourly and have to be paid for the entire sleep-time period. This could be onerous and would make it difficult to get individuals to care for someone. In that respect, I rise in opposition.

Roll call on Senate Bill No. 232:

YEAS-12.

NAYS—Gansert, Goicoechea, Gustavson, Hammond, Hardy, Harris, Kieckhefer, Roberson, Settelmeyer—9.

Senate Bill No. 232 having received a constitutional majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

Senate Bill No. 241.

Bill read third time.

Remarks by Senator Woodhouse.

Senate Bill No. 241 establishes the State Seal of Science, Technology, Engineering and Mathematics (STEM) Program and the State Seal of Science, Technology, Engineering, Arts, and Mathematics (STEAM) Program. The programs provide that a special seal denoting STEM or

STEAM be affixed to the high school diploma and noted on the transcript of a student who has achieved a high level of proficiency in related coursework.

School districts, charter schools and university schools for profoundly gifted students may choose to participate in the programs. The bill requires the Superintendent of Public Instruction to design and distribute the special seals to participating school districts and schools.

Further, the measure specifies the academic performance criteria required for a student to qualify for the Programs.

Roll call on Senate Bill No. 241:

YEAS—21.

NAYS—None.

Senate Bill No. 241 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 247.

Bill read third time.

Remarks by Senator Harris.

Senate Bill No. 247 makes several revisions to education reporting requirements, including changing the due date for each school district's report of accountability from September 30 to December 31; removing requirements that the Department of Education provide written notice that certain reports have been completed; removing the requirement that the Department submit a copy of the exam-security plan to the State Board of Education and the Legislature and, instead, requiring that the plan be posted on the Department's website each year; requiring a school to post its progressive-discipline plan on its website and distribute it to staff; requiring a school district to post its compilation of school discipline plans on its website; and removing the requirement that the Superintendent of Public Instruction submit a separate report on district compliance in adopting school discipline plans. Senate Bill No. 247 also reduces from 15 to 13 days the public notice required for policy changes being proposed by the school boards in Clark and Washoe Counties.

Roll call on Senate Bill No. 247:

YEAS—21.

NAYS-None.

Senate Bill No. 247 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 291.

Bill read third time.

Remarks by Senator Hardy.

Senate Bill No. 291 requires a custodian of health records to: retain the health-care records of patients for at least five years; make available to investigators certain health-care records of a patient who is suspected of having operated a motor vehicle while intoxicated; maintain a record of information provided by a patient relating to health-insurance coverage; and provide to the Department of Corrections the health-care records of an offender at the State prison. A custodian of health-care records is defined as any person having primary custody of records or a facility that maintains the health-care records of patients.

The measure requires a custodian of health-care records to make the relevant records available for inspection, including any records that reflect the amount charged for medical services or care provided to a patient. A health-care records custodian who is not licensed and violates the requirements in this bill is guilty of a gross misdemeanor and a civil penalty of not more than

\$10,000 may be collected for each violation. Any action to recover a civil penalty must be brought by the district attorney of the county in which the action is brought.

Finally, the bill authorizes the Board of Medical Examiners to take possession of health-care records of a licensee's patients in the event of the licensee's death, disability, incarceration or other incapacitation that renders the licensee unable to continue his or her practice. The Board may provide a patient's records to the patient or the patient's subsequent provider of health care. A licensee must provide certain disclosures to patients concerning such records.

Roll call on Senate Bill No. 291:

YEAS—21.

NAYS—None.

Senate Bill No. 291 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

#### MOTIONS, RESOLUTIONS AND NOTICES

Senator Manendo moved that Senate Bill No. 320 be taken from the General File and placed on the General File for the next legislative day.

Motion carried.

Mr. President announced that if there were no objections, the Senate would recess subject to the call of the Chair.

Senate in recess at 12:06 p.m.

#### SENATE IN SESSION

At 12:12 p.m.

President Hutchison presiding.

Quorum present.

#### GENERAL FILE AND THIRD READING

Senate Bill No. 324.

Bill read third time.

Remarks by Senator Hardy.

Senate Bill No. 324 requires the State Board of Health, Division of Public and Behavioral Health, Department of Health and Human Services, to adopt regulations authorizing an employee of a residential facility for groups, an agency to provide personal-care services in the home, a facility for the care of adults during the day, or an intermediary service organization to check vital signs, administer insulin and perform a blood-glucose test.

Roll call on Senate Bill No. 324:

YEAS—21.

NAYS-None.

Senate Bill No. 324 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 346.

Bill read third time.

Remarks by Senators Hardy, Cannizzaro and Ford.

#### SENATOR HARDY:

Senate Bill No. 346 clarifies that certain providers of health care do not violate any applicable standard of care by prescribing, dispensing or administering a drug for purposes that have not been approved by the U.S. Food and Drug Administration. The bill provides that an insurer or other third party is not required to cover any drug that is prescribed, dispensed or administered for such a purpose, and the third party is not liable in any event for any injury sustained by the patient as a result of using the drug.

#### SENATOR CANNIZZARO:

We heard this bill in the Commerce, Labor and Energy Committee, and I have some concerns regarding the additional permissive off-label use of prescription drugs because those uses would not be approved by the federal Food and Drug Administration (FDA). I have concerns about whether we would be placing patients in greater danger by using these drugs in situations where they are not approved by the FDA. I will be voting "no" on this bill.

#### SENATOR HARDY:

These drugs are approved by the FDA; they are not specifically approved for the disease for which they are being prescribe. I will use the example of Amitriptyline, which is an antidepressant. This drug is used for the common neuritis that happens to people who have diabetes. They get a neuropathy or neuritis where they get a burning or stinging pain of their feet, which has the longest nerve of the body, and secondly in their hands. We use this drug, because it is not smart enough to know the difference between a nerve in the brain and one in the body so it stabilizes that nerve transmission. We have used it for decades for that purpose. It has not been approved by the FDA for that, but it works for it, and we use it. We do not want to go to prison for using it.

#### SENATOR FORD:

It sounds like we are approving off-label use of drugs. What is the consent or notice factor to the patient to make sure they know the rights or lack of rights relative to pursuing damages to the extent they might get damaged?

#### SENATOR HARDY:

In South Dakota, where it is cold, I had a patient who had Raynaud's Phenomenon where, when exposed to the cold their hands go blue, red and white and they unable to do tasks like wash dishes in cold water. I wondered if using a medicine like Minipress, a vasodilator which would dilate the blood vessels, would help being as Raynaud's has a vasoconstriction and contracts blood vessels. I explained this to the patient saying that if I used this blood pressure medicine, it might help. The patient said she was agreeable to trying the medication, and we tried it with great results. About six months later, the New England Journal of Medicine came out with a letter saying that Minipress could be used as an option in treating Raynaud's. This is not a unique thing that we do, but when we use something like Amitriptyline off-label, we want the patient to understand what we are doing. There is nothing in statute that states a medical professional has to tell the patient anything about this use. As physicians, we are learning that the more a patient knows, the better compliant they are with what we are doing.

#### SENATOR FORD:

Is there a written notice of waiver a patient signs if they are going to accept off-label use of a medication?

SENATOR HARDY:

No.

Roll call on Senate Bill No. 346:

YEAS—16.

NAYS—Cannizzaro, Farley, Ford, Segerblom, Spearman—5.

Senate Bill No. 346 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 354.

Bill read third time.

Remarks by Senator Kieckhefer.

Senate Bill No. 354 authorizes certain qualified professionals, who are licensed in the District of Columbia or another state or territory of the United States, to apply for and receive a license by endorsement to practice their respective professions in Nevada. To obtain a license by endorsement, an applicant must submit an application to the regulatory body, pay the fees imposed by the regulatory body for the application and issuance of license, and submit his or her fingerprints for the purpose of obtaining a criminal-background check. A person who receives a license by endorsement is entitled to a 50 percent reduction in the fee for the initial issuance of a license if the person is an active member of, or the spouse of an active member of, the Armed Forces of the United States, a veteran, or the spouse or surviving spouse of a veteran.

In addition, the bill repeals provisions authorizing certain qualified professionals who are licensed in the District of Columbia or another state or territory of the United States to apply for the issuance of an expedited license by endorsement, as well as licensure or certification by endorsement or reciprocity.

Roll call on Senate Bill No. 354:

YEAS—21.

NAYS-None.

Senate Bill No. 354 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 432.

Bill read third time.

Remarks by Senator Hammond.

Senate Bill No. 432 makes various changes related to the procedures governing the termination of parental rights. Specifically, the bill provides that if a juvenile court determines a child is in need of protection, a child-welfare agency may file a motion for the termination of parental rights as part of the proceeding concerning the abuse or neglect of the child; clarifies that existing laws governing the termination of parental rights apply to all proceedings concerning the termination of parental rights commenced by a child-welfare agency to the extent they do not conflict with this bill; establishes provisions concerning notice of the hearing on the motion for the termination of parental rights and requires the court to ensure any prospective adoptive parent is provided a copy of such notice; establishes procedural provisions relating to an evidentiary hearing on a motion for the termination of parental rights, and requires a court to make a final decision within 30 days of the conclusion of the evidentiary hearing.

Roll call on Senate Bill No. 432:

YEAS—21.

NAYS-None.

Senate Bill No. 432 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 468.

Bill read third time.

Remarks by Senator Hardy.

Senate Bill No. 468 enacts provisions to provide that a domestic-service employee who resides in the household where he or she works and his or her employer may agree to exclude from the employee's wages certain periods for meals, sleep and other periods of complete freedom from all

duties. If a period excluded from the employee's wages is interrupted by a call to duty by the employer, the interruption must be counted as hours worked for which compensation must be paid.

In addition, a domestic-service employee who resides in the household where he or she works and his or her employer may enter into a written agreement to exclude the employee from overtime requirements.

Roll call on Senate Bill No. 468:

YEAS—21.

NAYS-None.

Senate Bill No. 468 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 483.

Bill read third time.

Remarks by Senator Hammond.

Senate Bill No. 483 creates a procedure for establishing paternity in proceedings concerning a child in need of protection. Specifically, the bill provides that if a petition alleging a child is or may be in need of protection is filed with a court and the paternity of the child has not been legally established, a motion to establish paternity may be filed with the court. A court may enter a recommendation or order establishing the legal paternity of a child during such a proceeding in certain circumstances and must order tests for the typing of blood or taking of specimens for genetic identification of a child, the mother and alleged father in certain circumstances.

A court recommendation or order must provide for the issuance of a new birth certificate that includes the name of the natural father, if necessary.

Roll call on Senate Bill No. 483:

YEAS-21.

NAYS-None.

Senate Bill No. 483 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 484.

Bill read third time.

Remarks by Senators Hammond and Gansert.

SENATOR HAMMOND:

Senate Bill No. 484 makes various changes related to the licensing of foster homes and revises the reasons for which a license to operate a foster home may be denied, suspended or revoked.

In addition, the bill authorizes licensing authority to issue a special license to a relative or fictive kin of a child under certain circumstances if that person otherwise would have had his or her application denied or license suspended or revoked because of a conviction of certain crimes.

#### SENATOR GANSERT:

I rise in opposition to Senate Bill No. 484. I am concerned about the special license that would be available to a relative or fictive kin even if they had been convicted of abuse or neglect of a child that is punishable as a felony; a crime of domestic violence that is punishable as a felony; sexual assault or other crimes. I understand this bill is designed to provide discretion to the licensing authority, but I will be opposing this measure.

Roll call on Senate Bill No. 484:

YEAS-20.

NAYS-Gansert.

Senate Bill No. 484 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Mr. President announced that if there were no objections, the Senate would recess subject to the call of the Chair.

Senate in recess at 12:30 p.m.

### SENATE IN SESSION

At 12:35 p.m.

President Hutchison presiding.

Quorum present.

# WAIVERS AND EXEMPTIONS NOTICE OF EXEMPTION

April 19, 2017

The Fiscal Analysis Division, pursuant to Joint Standing Rule No. 14.6, has determined the eligibility for exemption of: Senate Bill No. 227.

MARK KRMPOTIC Fiscal Analysis Division

#### SECOND READING AND AMENDMENT

Senate Bill No. 20.

Bill read second time.

The following amendment was proposed by the Committee on Education:

Amendment No. 142.

SUMMARY—Revises provisions relating to educational personnel. (BDR 34-342)

AN ACT relating to educational personnel; requiring licensed teachers to complete training in the laws of this State relating to schools and the provisions of the Nevada Constitution relating to schools; removing the requirement that examinations for the initial licensing of teachers and other educational personnel include the laws of Nevada relating to schools, the Constitution of the United States and the Constitution of the State of Nevada; repealing provisions requiring teachers and other educational personnel to show knowledge of the Constitution of the United States and the Constitution of the State of Nevada; and providing other matters properly relating thereto. Legislative Counsel's Digest:

Existing law requires the Commission on Professional Standards in Education to adopt regulations governing examinations for the initial licensing of teachers and other educational personnel. Existing law also requires that such examinations include the laws of Nevada relating to schools, the Constitution of the United States and the Constitution of Nevada. (NRS 391.021) Section [11] 1.5 of this bill removes the requirement that

examinations for the initial licensing of teachers and other educational personnel include these subjects. Section 1 of this bill instead requires a person licensed as a teacher to complete training in the laws of this State relating to schools and the provisions of the Nevada Constitution relating to schools within 1 year after being issued a license to teach and being initially hired by the board of trustees of a school district. Section 1 also requires the Commission to prescribe the required contents of this training and review and, if necessary, revise the contents of this training biennially. Section 1.7 of this bill provides certain teachers who have not passed the examination on the laws of this State relating to schools, the Nevada Constitution and the Constitution of the United States with additional time to complete the training required by section 1.

Existing law requires certain educational personnel to show, by examination or credentials showing college, university or normal school study, evidence of adequate knowledge of the origin, history, provisions and principles of the Constitution of the United States and the Constitution of Nevada. (NRS 391.090) Section 2 of this bill repeals these requirements.

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

Section 1. Chapter 391 of NRS is hereby amended by adding thereto a new section to read as follows:

- 1. A licensed teacher, except a teacher who is licensed only as a substitute teacher, must complete training in the laws of this State relating to schools and the provisions of the Nevada Constitution relating to schools within 1 year after being issued a license to teach and being initially hired by the board of trustees of a school district.
- 2. The Commission shall:
- (a) Establish by regulation the required contents of the training required by subsection 1;
- (b) Establish by regulation the standard of proficiency required for a teacher to receive credit for completing the training required by subsection 1, which may include, without limitation, an examination to test the proficiency of a teacher in the laws of this State relating to schools and the provisions of the Nevada Constitution relating to schools; and
- (c) At least once each biennium, review the contents of the training required by subsection 1 and, if necessary, revise the content of the training.
- *3. The training required by subsection 1:*
- (a) Must be tailored to the professional needs of teachers.
- (b) May be conducted in person or interactively through the use of communications technology by the school district that employs a teacher or by a vendor approved by such a school district.

[Section 1.] Sec. 1.5. NRS 391.021 is hereby amended to read as follows:

391.021 *1.* Except as otherwise provided in paragraph (j) of subsection 1 of NRS 391.019 and NRS 391.027, the Commission shall adopt regulations

governing examinations for the initial licensing of teachers and other educational personnel. The examinations must test the ability of the applicant to teach and the applicant's knowledge of each specific subject he or she proposes to teach. Each examination must include the following subjects:

- 1. The laws of Nevada relating to schools;
- 2. The Constitution of the State of Nevada; and
- 3. The Constitution of the United States.

<del>→</del>]

- 2. The provisions of this section do not prohibit the Commission from adopting regulations pursuant to subsection 2 of NRS 391.032 that provide an exemption from the examinations for teachers and other educational personnel from another state if the Commission determines that the examinations required for initial licensure for teachers and other educational personnel in that state are comparable to the examinations required for initial licensure in this State.
  - Sec. 1.7. Notwithstanding the provisions of section 1 of this act:
- 1. Except as otherwise provided in subsection 2, a licensed teacher, except a teacher who is licensed only as a substitute teacher, who is initially hired by the board of trustees of a school district on or before July 1, 2018, and has not passed the examination on the laws of Nevada relating to schools, the Constitution of the State of Nevada and the Constitution of the United States prescribed by NRS 391.021 before the effective date of this act must complete the training required by section 1 of this act within 2 years after being initially hired or the effective date of this act, whichever is later.
- 2. A teacher who was issued a conditional license on or before the effective date of this act and has not passed the examination on the laws of Nevada relating to schools, the Constitution of the State of Nevada and the Constitution of the United States prescribed by NRS 391.021 before the effective date of this act must complete the training required by section 1 of this act within 2 years after the effective date of this act.
- Sec. 1.9. The provisions of NRS 354.599 do not apply to any additional expenses of a local government that are related to the provisions of this act.
  - Sec. 2. NRS 391.090 is hereby repealed.
- Sec. 3. This act becomes effective [on July 1, 2017.] upon passage and approval.

### TEXT OF REPEALED SECTION

- 391.090 Educational personnel required to show knowledge of United States Constitution and Nevada's Constitution.
  - 1. Any person who is:
- (a) Granted a license to teach or perform other educational functions in the public schools of Nevada, in the school conducted at the Nevada Youth Training Center, the Caliente Youth Center or any other state facility for the detention of children that is operated pursuant to title 5 of NRS or for any program of instruction for kindergarten or grades 1 to 12, inclusive, conducted at any correctional institution in the Department of Corrections; or

- (b) Charged with the duty at the Nevada Youth Training Center, the Caliente Youth Center or any other state facility for the detention of children that is operated pursuant to title 5 of NRS of giving instruction in the Constitution of the United States and the Constitution of the State of Nevada, → must show, by examination or credentials showing college, university or normal school study, satisfactory evidence of adequate knowledge of the origin, history, provisions and principles of the Constitution of the United States and the Constitution of the State of Nevada.
- 2. The Commission may grant a reasonable time for compliance with the terms of this section.

Senator Denis moved the adoption of the amendment.

Remarks by Senator Denis.

Senate Bill No. 20 repeals provisions requiring teachers and other educational personnel to demonstrate knowledge of the *Constitution of the United States* and the *Constitution of the State of Nevada* for initial licensure. Instead, the bill requires teachers new to Nevada or the profession to be trained and demonstrate proficiency in certain aspects of the *Constitution of the State of Nevada* and Nevada's school laws as prescribed through regulations to be adopted by the Commission on Professional Standards in Education; substitute teachers are excluded from this training requirement.

The training and related exam may be offered in person or online, by either a school district or a vendor approved by a district. The Commission on Professional Standards in Education must approve the course content and set the minimum score for proficiency. The training content must be reviewed for update every two years.

Finally, the bill establishes certain timeframes within which the required training must be completed.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 32.

Bill read second time.

The following amendment was proposed by the Committee on Judiciary: Amendment No. 327.

SUMMARY—Makes various changes to provisions governing <del>[investment advisers and]</del> securities. (BDR 7-417)

AN ACT relating to securities; <del>[exempting certain investment advisers from the requirement to hold a license; requiring the exempted investment advisers to file reports and pay fees;]</del> revising the exemption from registration and filing requirements for certain transactions involving securities; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law prohibits a person from transacting business in this State as an investment adviser unless the person is licensed as an investment adviser or exempt from licensing. (NRS 90.330) Section 4 of this bill exempts certain investment advisers from the requirement to be licensed under state law if the investment adviser, as a result of acting as an investment adviser solely to certain venture capital funds or certain private funds, is exempt from registration with the Securities and Exchange Commission under federal law

or regulations. Section 2 of this bill requires such an investment adviser to file certain reports with the Administrator of the Securities Division of the Office of the Secretary of State, pay a fee and, if the investment adviser advises certain kinds of funds, meet certain additional requirements.]

Existing law prohibits a person from selling or offering to sell a security in this State unless the security is registered or the security or transaction is exempt from registration under chapter 90 of NRS. (NRS 90.460) Existing law generally exempts a transaction pursuant to an offer to sell securities of an issuer if there are not more than 25 purchasers in this State during any 12 consecutive months and certain other conditions are satisfied. (NRS 90.530) Section 5 of this bill revises this exemption to apply to a sale or offer to sell such securities and increases the maximum number of purchasers in this State from 25 to 35 during any 12 consecutive months.

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

- Section 1. [Chapter 90 of NRS is hereby amended by adding thereto the provisions set forth as sections 2 and 3 of this act.] (Deleted by amendment.)
- Sec. 2. [1. Except as otherwise provided in section 3 of this act, an investment adviser is exempt from licensing under NRS 90.330 pursuant to paragraph (b) of subsection 1 of NRS 90.340 only if the investment adviser:

  (a) Is not disqualified and is not affiliated with an entity that is disqualified
- from claiming an exemption for a sale of securities pursuant to 17 C.F.R. § 230.506(d)(1).
- (b) Files with the Administrator, using the Investment Adviser Registration Depository, a copy of each report, and all amendments thereto, that the investment adviser is required to file with the Securities and Exchange Commission pursuant to 17 C.F.R. § 275.204-4.
- (c) Pays all fees that the investment adviser would owe pursuant to NRS 90.360 if he or she were licensed as an investment adviser in this State.
- (d) For an investment adviser who advises at least one fund described by 15 U.S.C. 80a 3(e)(1) which is not a venture capital fund, as defined in 17 C.F.R. § 275.203(l) 1:
- (1) Advises only funds described by 15 U.S.C. 80a-3(e)(1) which are not venture capital funds, as defined in 17 C.F.R. § 275.203(l)-1, that are beneficially owned entirely by persons who, after deducing the value of the primary residence of the person from the net worth of the person, are qualified elients, as defined in 17 C.F.R. § 275.205 3, at the time such persons became owners of the fund:
- (2) Discloses to each beneficial owner of a fund described by 15 U.S.C 80a-3(e)(1) which is not a venture capital fund, as defined in 17 C.F.R § 275.203(1) 1, at the time the person acquires beneficial ownership:
- (I) All services, if any, that the investment adviser provides to each beneficial owner;
- (II) All duties, if any, that the investment adviser owes to each beneficial owner; and

- (III) Any other material information affecting the rights or responsibilities of each beneficial owner; and
- (3) Annually obtains an audited financial statement of each fund described by 15 U.S.C. 80a 3(e)(1) which is not a venture capital fund, as defined in 17 C.F.R. § 275.203(l) 1, and delivers a copy of the audited financial statement to each beneficial owner of the fund.
- 2. As used in this section:
- (a) "Investment Adviser Registration Depository" has the meaning ascribed to it in NRS 90.350.
- (b) "Value of the primary residence" means the amount that is determined by subtracting from the fair market value of the property constituting the primary residence of a person the amount of any debt secured by the property not exceeding the fair market value of the property.] (Deleted by amendment.)
- Sec. 3. [An investment adviser who has filed and maintains a completed and current registration with the Securities and Exchange Commission:
- -1. Is not exempt from licensing under NRS 90.330 pursuant to paragraph (b) of subsection 1 of NRS 90.340; and
- 2. Shall comply with the requirements of subsection 2 of NRS 90.350.} (Deleted by amendment.)
  - Sec. 4. [NRS 90.340 is hereby amended to read as follows:
- 90.340 1. The following persons are exempt from licensing under NRS 90.330:
- (a) An investment adviser who is [registered]:
- (1) Registered or is not required to be registered as an investment adviser under the Investment Advisers Act of 1940 if:
- [(1)] (I) Its only clients in this State are other investment advisers, broker-dealers or financial or institutional investors;
- [(2)] (II) The investment adviser has no place of business in this State and directs business communications in this State to a person who is an existing client of the investment adviser and whose principal place of residence is not in this State; or
- [(3)] (III) The investment adviser has no place of business in this State and during any 12 consecutive months it does not direct business communications in this State to more than five present or prospective clients other than those specified in [subparagraph (1),] sub subparagraph (I), whether or not the person or client to whom the communication is directed is present in this State; or
- (2) Except as otherwise provided in section 3 of this act, exempt from registration with the Securities and Exchange Commission pursuant to 15 U.S.C. § 80b-3(l) or 17 C.F.R. § 275.203(m)-1 if the investment adviser satisfies the requirements of section 2 of this act:
- (b) A representative of an investment adviser who is employed by an investment adviser who is exempt from licensing pursuant to paragraph (a);
- (c) A sales representative licensed pursuant to NRS 90.310 who:

- (1) Has passed the following examinations administered by the Financial Industry Regulatory Authority:
- (I) The Uniform Investment Adviser Law Examination, designated as the Series 65 examination; or
- (II) The Uniform Combined State Law Examination designated as the Series 66 examination and the General Securities Registered Representative Examination, designated as the Series 7 examination; or
- (2) On January 1, 1996, has been continuously licensed in this State as a sales representative for 5 years or more; and
- (d) Other investment advisers and representatives of investment advisers the Administrator by regulation or order exempts.
- 2. The Administrator may, by order or rule, waive the examinations required by subparagraph (1) of paragraph (e) of subsection 1 for an applicant or a class of applicants if the Administrator determines that the examination is not necessary for the protection of investors because of the training and experience of the applicant or class of applicants.] (Deleted by amendment.)
  - Sec. 5. NRS 90.530 is hereby amended to read as follows:
- 90.530 The following transactions are exempt from NRS 90.460 and 90.560:
- 1. An isolated nonissuer transaction, whether or not effected through a broker-dealer.
- 2. A nonissuer transaction in an outstanding security if the issuer of the security has a class of securities subject to registration under section 12 of the Securities Exchange Act of 1934, 15 U.S.C. § 781, and has been subject to the reporting requirements of section 13 or 15(d) of the Securities Exchange Act of 1934, 15 U.S.C. §§ 78m and 78o(d), for not less than 90 days next preceding the transaction, or has filed and maintained with the Administrator for not less than 90 days preceding the transaction information, in such form as the Administrator, by regulation, specifies, substantially comparable to the information the issuer would be required to file under section 12(b) or 12(g) of the Securities Exchange Act of 1934, 15 U.S.C. §§ 781(b) and 781(g), were the issuer to have a class of its securities registered under section 12 of the Securities Exchange Act of 1934, 15 U.S.C. § 781, and paid a fee of \$300 with the filing.
- 3. A nonissuer transaction by a sales representative licensed in this State, in an outstanding security if:
- (a) The security is sold at a price reasonably related to the current market price of the security at the time of the transaction;
- (b) The security does not constitute all or part of an unsold allotment to, or subscription or participation by, a broker-dealer as an underwriter of the security;
- (c) At the time of the transaction, a recognized securities manual designated by the Administrator by regulation or order contains the names of the issuer's officers and directors, a statement of the financial condition of the issuer as of a date within the preceding 18 months, and a statement of income or operations

for each of the last 2 years next preceding the date of the statement of financial condition, or for the period as of the date of the statement of financial condition if the period of existence is less than 2 years;

- (d) The issuer of the security has not undergone a major reorganization, merger or acquisition within the preceding 30 days which is not reflected in the information contained in the manual; and
- (e) At the time of the transaction, the issuer of the security has a class of equity security listed on the New York Stock Exchange, American Stock Exchange or other exchange designated by the Administrator, or on the National Market System of the National Association of Securities Dealers Automated Quotation System. The requirements of this paragraph do not apply if:
  - (1) The security has been outstanding for at least 180 days;
- (2) The issuer of the security is actually engaged in business and is not developing the issuer's business, in bankruptcy or in receivership; and
- (3) The issuer of the security has been in continuous operation for at least 5 years.
- 4. A nonissuer transaction in a security that has a fixed maturity or a fixed interest or dividend provision if there has been no default during the current fiscal year or within the 3 preceding years, or during the existence of the issuer, and any predecessors if less than 3 years, in the payment of principal, interest or dividends on the security.
- 5. A nonissuer transaction effected by or through a registered broker-dealer pursuant to an unsolicited order or offer to purchase.
- 6. A transaction between the issuer or other person on whose behalf the offering of a security is made and an underwriter, or a transaction among underwriters.
- 7. A transaction in a bond or other evidence of indebtedness secured by a real estate mortgage, deed of trust, personal property security agreement, or by an agreement for the sale of real estate or personal property, if the entire mortgage, deed of trust or agreement, together with all the bonds or other evidences of indebtedness secured thereby, is offered and sold as a unit.
- 8. A transaction by an executor, administrator, sheriff, marshal, receiver, trustee in bankruptcy, guardian or conservator.
- 9. A transaction executed by a bona fide secured party without the purpose of evading this chapter.
- 10. An offer to sell or the sale of a security to a financial or institutional investor or to a broker-dealer.
- 11. Except as otherwise provided in this subsection, a [transaction pursuant to] sale or an offer to sell securities of an issuer if:
- (a) The transaction is part of an issue in which there are not more than [25] 35 purchasers in this State, other than those designated in subsection 10, during any 12 consecutive months;
- (b) No general solicitation or general advertising is used in connection with the offer to sell or sale of the securities:

- (c) No commission or other similar compensation is paid or given, directly or indirectly, to a person, other than a broker-dealer licensed or not required to be licensed under this chapter, for soliciting a prospective purchaser in this State; and
  - (d) One of the following conditions is satisfied:
- (1) The seller reasonably believes that all the purchasers in this State, other than those designated in subsection 10, are purchasing for investment; or
- (2) Immediately before and immediately after the transaction, the issuer reasonably believes that the securities of the issuer are held by 50 or fewer beneficial owners, other than those designated in subsection 10, and the transaction is part of an aggregate offering that does not exceed \$500,000 during any 12 consecutive months.
- → The Administrator by rule or order as to a security or transaction or a type of security or transaction may withdraw or further condition the exemption set forth in this subsection or waive one or more of the conditions of the exemption.
- 12. An offer to sell or sale of a preorganization certificate or subscription if:
- (a) No commission or other similar compensation is paid or given, directly or indirectly, for soliciting a prospective subscriber;
- (b) No public advertising or general solicitation is used in connection with the offer to sell or sale;
  - (c) The number of offers does not exceed 50;
  - (d) The number of subscribers does not exceed 10; and
  - (e) No payment is made by a subscriber.
- 13. An offer to sell or sale of a preorganization certificate or subscription issued in connection with the organization of a depository institution if that organization is under the supervision of an official or agency of a state or of the United States which has and exercises the authority to regulate and supervise the organization of the depository institution. For the purpose of this subsection, "under the supervision of an official or agency" means that the official or agency by law has authority to require disclosures to prospective investors similar to those required under NRS 90.490, impound proceeds from the sale of a preorganization certificate or subscription until organization of the depository institution is completed, and require refund to investors if the depository institution does not obtain a grant of authority from the appropriate official or agency.
- 14. A transaction pursuant to an offer to sell to existing security holders of the issuer, including persons who at the time of the transaction are holders of transferable warrants exercisable within not more than 90 days after their issuance, convertible securities or nontransferable warrants, if:
- (a) No commission or other similar compensation, other than a standby commission, is paid or given, directly or indirectly, for soliciting a security holder in this State; or

- (b) The issuer first files a notice specifying the terms of the offer to sell, together with a nonrefundable fee of \$300, and the Administrator does not by order disallow the exemption within the next 5 full business days.
- 15. A transaction involving an offer to sell, but not a sale, of a security not exempt from registration under the Securities Act of 1933, 15 U.S.C. §§ 77a et seq., if:
- (a) A registration or offering statement or similar record as required under the Securities Act of 1933, 15 U.S.C. §§ 77a et seq., has been filed, but is not effective:
- (b) A registration statement, if required, has been filed under this chapter, but is not effective; and
- (c) No order denying, suspending or revoking the effectiveness of registration, of which the offeror is aware, has been entered by the Administrator or the Securities and Exchange Commission, and no examination or public proceeding that may culminate in that kind of order is known by the offeror to be pending.
- 16. A transaction involving an offer to sell, but not a sale, of a security exempt from registration under the Securities Act of 1933, 15 U.S.C. §§ 77a et seq., if:
- (a) A registration statement has been filed under this chapter, but is not effective; and
- (b) No order denying, suspending or revoking the effectiveness of registration, of which the offeror is aware, has been entered by the Administrator and no examination or public proceeding that may culminate in that kind of order is known by the offeror to be pending.
- 17. A transaction involving the distribution of the securities of an issuer to the security holders of another person in connection with a merger, consolidation, exchange of securities, sale of assets or other reorganization to which the issuer, or its parent or subsidiary, and the other person, or its parent or subsidiary, are parties, if:
- (a) The securities to be distributed are registered under the Securities Act of 1933, 15 U.S.C. §§ 77a et seq., before the consummation of the transaction; or
- (b) The securities to be distributed are not required to be registered under the Securities Act of 1933, 15 U.S.C. §§ 77a et seq., written notice of the transaction and a copy of the materials, if any, by which approval of the transaction will be solicited, together with a nonrefundable fee of \$300, are given to the Administrator at least 10 days before the consummation of the transaction and the Administrator does not, by order, disallow the exemption within the next 10 days.
- 18. A transaction involving the offer to sell or sale of one or more promissory notes each of which is directly secured by a first lien on a single parcel of real estate, or a transaction involving the offer to sell or sale of participation interests in the notes if the notes and participation interests are

originated by a depository institution and are offered and sold subject to the following conditions:

- (a) The minimum aggregate sales price paid by each purchaser may not be less than \$250,000;
- (b) Each purchaser must pay cash either at the time of the sale or within 60 days after the sale; and
  - (c) Each purchaser may buy for the purchaser's own account only.
- 19. A transaction involving the offer to sell or sale of one or more promissory notes directly secured by a first lien on a single parcel of real estate or participating interests in the notes, if the notes and interests are originated by a mortgagee approved by the Secretary of Housing and Urban Development under sections 203 and 211 of the National Housing Act, 12 U.S.C. §§ 1709 and 1715b, and are offered or sold, subject to the conditions specified in subsection 18, to a depository institution or insurance company, the Federal Home Loan Mortgage Corporation, the Federal National Mortgage Association or the Government National Mortgage Association.
- 20. A transaction between any of the persons described in subsection 19 involving a nonassignable contract to buy or sell the securities described in subsection 18 if the contract is to be completed within 2 years and if:
- (a) The seller of the securities pursuant to the contract is one of the parties described in subsection 18 or 19 who may originate securities;
- (b) The purchaser of securities pursuant to a contract is any other person described in subsection 19: and
  - (c) The conditions described in subsection 18 are fulfilled.
- 21. A transaction involving one or more promissory notes secured by a lien on real estate, or participating interests in those notes, by:
- (a) A mortgage banker licensed pursuant to chapter 645E of NRS to engage in those transactions; or
- (b) A mortgage broker licensed pursuant to chapter 645B of NRS to engage in those transactions.

Senator Segerblom moved the adoption of the amendment.

Remarks by Senator Segerblom.

Senate Bill No. 32 revises in two ways provisions governing securities transactions that may be exempted from registration requirements. First, this exemption provision is revised to apply to a sale of securities, if certain other conditions are met, not just an offer to sell securities. Second, the transaction must be part of an issue in which there are not more than 35 purchasers in this State during any 12 consecutive months, instead of just 25 purchasers.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 154.

Bill read second time.

The following amendment was proposed by the Committee on Education: Amendment No. 243.

SUMMARY—Creates the Program to Develop Leadership Skills for [Elementary] Public School Pupils. (BDR 34-819)

AN ACT relating to education; creating the Program to Develop Leadership Skills for [Elementary] Public School Pupils; requiring the State Board of Education to adopt regulations to carry out the Program; requiring the State Board and the Department of Education to post certain information relating to the Program on [its] their respective Internet [website;] websites; requiring the Department [of Education] to report on the effectiveness of the Program; creating the Account for Leadership Skills in the State General Fund to provide grants of money on a competitive basis to schools to participate in the Program; requiring schools participating in the Program to make certain reports; making an appropriation; and providing other matters properly relating thereto. Legislative Counsel's Digest:

Section 5 of this bill creates the Program to Develop Leadership Skills for [Elementary] Public School Pupils for the purpose of developing certain leadership skills and behaviors of elementary , middle and junior high school pupils to enhance the learning environment in public elementary , middle and junior high schools. Section 5 also requires certain information about the Program and the participants in the Program to be posted on the Internet websites maintained by the State Board [-] of Education and the Department of Education. Section 6 of this bill creates the Account for Leadership Skills to be administered by the Superintendent of Public Instruction. Section 6 authorizes the Superintendent of Public Instruction to award a grant of money on a competitive basis to a public elementary , middle or junior high school, including a charter school, that participates in the Program.

Section 7 of this bill requires each public elementary, middle and junior high school that participates in the Program to establish goals for the school's participation in the Program. Section 7 also requires such a school to have each pupil in the school participate and establish a set of personal goals for his or her participation in the Program. For each school year that a public elementary, middle or junior high school participates in the Program, section 7 requires the school to report on the success of the Program to the Department, as measured by certain indicators, within 30 days after the end of the school year. Section 7 authorizes the Department to refuse to grant additional money to a school that fails to demonstrate satisfactory improvement in the behavior and academic achievement of pupils after participating in the Program.

Section 8 of this bill additionally requires the State Board of Education to adopt any regulations necessary to carry out the Program and the competitive grant program. Section 8 requires such regulations to include a requirement that [participatory] participating schools provide certain matching money or goods and services, the method for requesting a grant, the criteria for approving such a request, the manner in which the amount of money granted to each school is determined and guidelines for the use of grant money by a school and performance and outcome indicators to measure the effectiveness of the Program. Section 8 requires the Department of Education to use the performance and outcome indicators to prepare and submit an annual report to the Governor and to the Legislature.

Section 9 of this bill appropriates money and provides for the implementation of the competitive grant program for the participation of a public elementary, middle or junior high school in the Program.

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

- Section 1. Chapter 388 of NRS is hereby amended by adding thereto the provisions set forth as sections 2 to 8, inclusive, of this act.
- Sec. 2. As used in sections 2 to 8, inclusive, of this act, unless the context otherwise requires, the words and terms defined in sections 3 and 4 of this act have the meanings ascribed to them in those sections.
- Sec. 3. "Account" means the Account for Leadership Skills created by section 6 of this act.
- Sec. 4. "Program" means the Program to Develop Leadership Skills for [Elementary] Public School Pupils created by section 5 of this act.
- Sec. 5. The Program to Develop Leadership Skills for [Elementary] Public School Pupils is hereby created to develop leadership skills and behaviors of pupils enrolled in elementary schools, middle schools and junior high schools, including, without limitation, pupils enrolled in a charter school at those grade levels, that enhance a school's learning environment, including, without limitation:
  - 1. Communications skills;
  - 2. Teamwork skills;
  - 3. Interpersonal skills;
  - 4. Initiative and self-motivation;
  - 5. Goal-setting skills;
  - 6. Problem-solving skills; and
  - 7. Creativity.
- Sec. 6. 1. The Account for Leadership Skills is hereby created in the State General Fund. The Superintendent of Public Instruction shall act as the Administrator of the Account. Except as otherwise provided in <a href="figures: subsections">[subsections 2 and 3</a>, the money in the Account must be expended to award grants of money on a competitive basis to public <a href="figures: elementary schools">elementary schools</a>, middle <a href="figures: schools">schools and junior high schools</a>, including, without limitation, charter schools <a href="figures: that enroll pupils at those grade levels">that enroll pupils at those grade levels</a>, to participate in the Program and used in accordance with the regulations adopted by the State Board pursuant to section <a href="figures: 5518">f53 8</a> of this act.
- 2. The Administrator shall not use more than 5 percent of the money in the Account to administer the Account.
- 3. The existence of the Account does not create a right in any public school to receive money from the Account.
- 4. The Administrator may apply for and accept any gift, donation, bequest, grant or other source of money for the purpose of awarding grants pursuant to this section. Any money so received must be deposited in the Account.

- 5. Money from any gift, donation or bequest that remains in the Account at the end of the fiscal year does not revert to the State General Fund, and the balance in the Account must be carried forward to the next fiscal year.
- 6. The interest and income earned on money in the Account, after deducting any applicable charges, must be credited to the Account.
- Sec. 7. For each year a grant of money is received from the Account, a public elementary <u>school</u>, <u>middle school or junior high</u> school, including, without limitation, a charter school, participating in the Program shall:
  - 1. Establish goals for the participation of the school in the Program.
- 2. Require each pupil in the school to participate in the Program and establish personal goals for his or her participation in the Program.
- 3. Provide a report to the Department not later than 30 days after the last day of the school year, which must include, without limitation:
- (a) Evidence of the manner in which the grant money received from the Account was expended to achieve the goals described in subsection 1; and
- (b) The effectiveness and impact of the school's participation in the Program on the behavior and academic success of pupils in the school, as measured by [+] performance and outcome indicators, which must include, without limitation:
- (1) Records of the attendance and truancy of pupils, indicated by grade level;
  - (2) Assessments of academic performance, indicated by grade level;
- (3) Reported incidents of pupil misconduct and disciplinary problems; and
  - (4) The level of achievement of the goals described in subsection 1.
- 4. After participating in the Program, a school's failure to demonstrate an improvement in the behavior and academic achievement of pupils as measured by paragraph (b) of subsection 3 may be grounds to deny a request from the school for an additional grant of money from the Account.
- Sec. 8. 1. The State Board shall adopt any regulations necessary to carry out the provisions of sections 2 to 8, inclusive, of this act. The regulations must include, without limitation:
- (a) A requirement for each [public elementary] participating school, during the first year in which the school participates in the Program, to provide matching money or goods or services in kind equal to the amount of money granted to the school from the Account;
  - (b) The method for requesting a grant from the Account;
  - (c) The criteria for approving a request for a grant from the Account;
- (d) The manner in which the amount of money to be granted from the Account to each participating school is determined which may be different to each school and may vary each year;
- (e) Guidelines for the use of money granted from the Account by a school; and
- (f) Performance and outcome indicators to measure the effectiveness of the Program.

- 2. The State Board and the Department shall post on their respective Internet websites:
  - (a) The criteria for approving a request for a grant from the Account;
- (b) Guidelines for the use of the money granted from the Account by a participating school;
- (c) The period during which a *[public elementary]* participating school may spend the money granted from the Account; and
- (d) A list of the public elementary <u>schools</u>, <u>middle schools</u> and <u>junior high</u> schools selected to participate in the Program during a school year and the amount of money each school was granted from the Account.
- 3. The Department shall prepare a report annually evaluating the effectiveness of the Program using the performance and outcome indicators established by the State Board pursuant to subsection 1 and submit the report to the Governor and the Director of the Legislative Counsel Bureau for transmittal to the Legislature if the Legislature is in session, or to the Interim Finance Committee, if the Legislature is not in session.
- Sec. 9. 1. There is hereby appropriated from the State General Fund to the Account for Leadership Skills created by section 6 of this act the sum of \$400,000 for the purpose of establishing a competitive grant program for the Program to Develop Leadership Skills for [Elementary] Public School Pupils created by section 5 of this act.
- 2. Any remaining balance of the appropriation made by subsection 1 must not be committed for expenditure after June 30, 2019, by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 20, 2019, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 20, 2019.
- Sec. 10. The provisions of subsection 1 of NRS 218D.380 do not apply to any provision of this act which adds or revises a requirement to submit a report to the Legislature.
- Sec. 11. 1. This section and sections 9 and 10 of this act become effective <del>[upon passage and approval.]</del> on July 1, 2017.
  - 2. Sections 1 to 8, inclusive, of this act become effective:
- (a) Upon passage and approval for the purpose of adopting regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
  - (b) On January 1, 2018, for all other purposes.

Senator Denis moved the adoption of the amendment.

## Remarks by Senator Denis.

Amendment No. 243 to Senate Bill No. 154 clarifies the program will be available to middle and junior high schools, in addition to elementary schools; and expands the possible measures of program impact.

Amendment adopted.

Senator Denis moved that the bill be re-referred to the Committee on Finance, upon return from reprint.

Motion carried.

Bill ordered reprinted, engrossed and to the Committee on Finance.

Senate Bill No. 210.

Bill read second time.

The following amendment was proposed by the Committee on Commerce, Labor and Energy:

Amendment No. 128.

SUMMARY—Provides for the licensure and regulation of anesthesiologist assistants. (BDR 54-155)

AN ACT relating to anesthesiology; providing for the licensure and regulation of anesthesiologist assistants by the Board of Medical Examiners; fand the State Board of Osteopathic Medicine: requiring an anesthesiologist assistant to work under the supervision of a supervising anesthesiologist except when rendering certain emergency care; authorizing an anesthesiologist assistant to perform certain tasks; authorizing the Board of Medical Examiners fand the State Board of Osteopathic Medicine to [establish] impose fees for the licensure of anesthesiologist assistants and the renewal of such licenses; exempting an anesthesiologist assistant from civil liability in certain circumstances; requiring an anesthesiologist assistant to report instances of neglect or abuse of older and vulnerable persons; authorizing the Nevada members of the Western Interstate Commission for Higher Education to take certain actions with regard to an anesthesiologist assistant who receives financial assistance from the program administered by the Nevada Office of the Commission; providing penalties; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law provides for the licensure of physician assistants by the Board of Medical Examiners [and the State Board of Osteopathic Medicine. Physician assistants] who work under the supervision of a [physician or an osteopathic] physician. (NRS 630.273\_) [, 633.433) Sections] Section 8 [and 44] of this bill [provide] provides for the licensure of anesthesiologist assistants by the Board [of Medical Examiners and the State Board of Osteopathic Medicine.] and prescribes the qualifications necessary for licensure. Sections 26\_[.] and 27\_[. 57\_ and 58] of this bill extend to anesthesiologist assistants the provisions of existing law that authorize the issuance of a license by endorsement to a physician assistant who is licensed in another state and meets certain other requirements. (NRS 630.2751, 630.2752\_) [, 633.4335, 633.4336)] Sections 7, 11\_[.] and 12\_[., 43, 47\_ and 48] of this bill provide that an anesthesiologist assistant must work under the supervision of a supervisory anesthesiologist, except when rendering emergency care directly related to an emergency or disaster. [Sections]

<u>Section 9 [and 45]</u> of this bill <u>frequired</u> requires the <u>frespective Boards</u>] <u>Board</u> to adopt regulations establishing requirements for the licensure of anesthesiologist assistants. <u>[Sections]</u> <u>Section 25 [and 63]</u> of this bill <u>fauthorize the Boards to establish fees]</u> <u>prescribes the maximum fee that the Board may charge for the issuance and renewal of a license to practice as an anesthesiologist assistant.</u>

[Sections] Section 7 [and 43] of this bill [lists] lists the services that an anesthesiologist assistant may perform and provide that an anesthesiologist assistant may only administer controlled substances to a patient with the patient's written consent. [Sections 88, 105 and 112 of this bill include an anesthesiologist assistant in the definition of "practitioner" for the purpose of existing law relating to controlled substances and other drugs.] Sections [89, 103, 104 and 106-111] 108 and 113 of this bill make conforming changes.

[Sections 28 and 71] Section 28 of this bill [provide] provides for the filing of certain complaints concerning an anesthesiologist assistant to the [appropriate] Board. Sections 26 [1] and 34 [1, 54 and 64 86] of this bill provide procedures for the investigation of complaints and the imposition of disciplinary action by the [respective Boards] Board against an anesthesiologist assistant. [Sections] Section 35 [and 87] of this bill [provide] provides that a person who holds himself or herself out as an anesthesiologist assistant without being licensed by the [appropriate] Board is guilty of a category C or D felony.

Sections 1, 93, 94, 101 and 102 of this bill include an anesthesiologist in the definition of the term "provider of health care" for certain purposes. Section 37 of this bill requires an anesthesiologist assistant to report to the Executive Director of the State Board of Nursing any conduct of a licensee of that Board or holder of a certificate issued by that Board which violates provisions governing nursing. Sections 91 and 92 of this bill provide that an anesthesiologist assistant is immune from civil liability for rendering medical care in certain emergency situations. Sections 95 and 96 of this bill require an anesthesiologist assistant to report instances of suspected neglect or abuse of older persons and certain vulnerable persons.

Section 100 of this bill authorizes the Nevada members of the Western Interstate Commission for Higher Education to require an anesthesiologist assistant to serve in an area with a shortage of health professionals as a condition of receiving financial assistance from the program administered by the Nevada Office of the Commission.

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

Section 1. NRS 629.031 is hereby amended to read as follows:

629.031 Except as otherwise provided by a specific statute:

- 1. "Provider of health care" means:
- (a) A physician licensed pursuant to chapter 630, 630A or 633 of NRS;
- (b) A physician assistant;
- (c) An anesthesiologist assistant;

- (d) A dentist;
- [(d)] (e) A licensed nurse;
- [(e)] (f) A person who holds a license as an attendant or who is certified as an emergency medical technician, advanced emergency medical technician or paramedic pursuant to chapter 450B of NRS;
  - $\{(f)\}\$  (g) A dispensing optician;
  - $\frac{\{(g)\}}{\{(h)\}}$  (h) An optometrist;
  - [(h)] (i) A speech-language pathologist;
  - $\frac{[(i)]}{[j]}$  (j) An audiologist;
  - $\frac{\{(j)\}}{(k)}$  (k) A practitioner of respiratory care;
  - $\{(k)\}\$  (l) A registered physical therapist;
  - $\{(1)\}$  (m) An occupational therapist;
  - $\{(m)\}\$  (n) A podiatric physician;
  - [(n)] (o) A licensed psychologist;
  - $\{(o)\}\$  (p) A licensed marriage and family therapist;
  - [(p)] (q) A licensed clinical professional counselor;
  - $\frac{(q)}{(r)}$  (r) A music therapist;
  - [(r)] (s) A chiropractor;
  - $\{(s)\}\$  (t) An athletic trainer;
  - $\{(t)\}$  (u) A perfusionist;
  - $\{(u)\}\$  (v) A doctor of Oriental medicine in any form;
  - [(v)] (w) A medical laboratory director or technician;
  - $\{(w)\}\$  (x) A pharmacist;
  - [(x)] (y) A licensed dietitian;
- $\frac{\{(y)\}}{(z)}$  An associate in social work, a social worker, an independent social worker or a clinical social worker licensed pursuant to chapter 641B of NRS;
- $\frac{\{(z)\}}{(aa)}$  An alcohol and drug abuse counselor or a problem gambling counselor who is certified pursuant to chapter 641C of NRS;
- [(aa)] (bb) An alcohol and drug abuse counselor or a clinical alcohol and drug abuse counselor who is licensed pursuant to chapter 641C of NRS; or
- [(bb)] (cc) A medical facility as the employer of any person specified in this subsection.
- 2. For the purposes of NRS 629.051, 629.061, 629.065 and 629.077, the term includes a facility that maintains the health care records of patients.
- 3. For the purposes of NRS 629.400 to 629.490, inclusive, the term includes:
- (a) A person who holds a license or certificate issued pursuant to chapter 631 of NRS; and
- (b) A person who holds a current license or certificate to practice his or her respective discipline pursuant to the applicable provisions of law of another state or territory of the United States.
- Sec. 2. Chapter 630 of NRS is hereby amended by adding thereto the provisions set forth as sections 3 to 12, inclusive, of this act.

- Sec. 3. "Anesthesia services" means services and activities related to the administration of anesthesia to a patient, including, without limitation, those services identified in subsection 1 of section 7 of this act.
  - Sec. 4. "Anesthesiologist assistant" means a person who f:
- 1. Is a graduate of an academic program approved by the Board or, by general education, practical training and experience determined satisfactory to the Board, is qualified to perform anesthesia services under the medically direct supervision of a supervising anesthesiologist; and
- 2. Has been issued a license by the Board f. pursuant to section 8 of this act.
- Sec. 5. "Medically direct supervision" means that a supervising anesthesiologist is immediately available in such proximity to an anesthesiologist assistant during the performance of his or her duties that the supervising anesthesiologist is able effectively to re-establish direct contact with the patient to meet the medical needs of the patient and address any urgent or emergent clinical problems.
- Sec. 6. "Supervising anesthesiologist" means an active physician licensed and in good standing in this State who is Board certified or meets the standards to be Board certified as an anesthesiologist by the American Board of Anesthesiology, or its successor, and who supervises one or more anesthesiology assistants.
- Sec. 7. 1. An anesthesiologist assistant licensed under the provisions of this chapter may perform anesthesia services in accordance with the regulations adopted by the Board, within the scope of practice of a supervising anesthesiologist and under the medically direct supervision of that supervising anesthesiologist in any appropriate setting, including, without limitation, an intensive care unit or pain clinic. Such anesthesia services include, without limitation:
- (a) Obtaining a preanesthetic health history for the patient, performing a preanesthetic physical examination of the patient and recording relevant data;
- (b) Conducting laboratory and other related studies, including <u>, without limitation</u>, taking blood samples;
- (c) Inserting invasive monitoring modalities, including <u>.without limitation</u>, arterial and venous lines and pulmonary artery catheterization, as delegated by the supervising anesthesiologist;
- (d) [Administering] Subject to the limitations of NRS 453.375, administering anesthetic agents and controlled substances, including, without limitation, induction agents and adjunctive treatment, maintaining and altering the levels of anesthesia and providing continuity of anesthetic care into and during the postoperative recovery period;
  - (e) Establishing airway interventions and performing ventilatory support;
  - (f) Applying and interpreting advanced monitoring techniques;
- (g) Using advanced life-support techniques, including, without limitation, high-frequency ventilation and intraarterial cardiovascular assist devices;

- (h) Making postanesthesia rounds, recording patient progress notes, compiling and recording summaries of cases and transcribing standard and specific orders;
- (i) Evaluating and treating life-threatening situations, including, without limitation, through the use of cardiopulmonary resuscitation, using established protocols;
- (j) Training and supervising personnel in calibrating, troubleshooting and using patient monitors;
- (k) Performing administrative duties, including, without limitation, managing patient records, coding and billing for procedures and managing personnel;
  - (l) Participating in the clinical instruction of others; and
- (m) Performing and monitoring the administration of regional anesthesia, including, without limitation, spinal, epidural, intravenous regional, local infiltration, nerve blocks and other special techniques.
- 2. An anesthesiologist assistant shall not prescribe any controlled substance [-] or any dangerous drug as defined in chapter 454 of NRS.
- 3. Before an anesthesiologist assistant administers to a patient any anesthetic agent that includes a controlled substance, the anesthesiologist assistant or supervising anesthesiologist shall:
- (a) Disclose to the patient that the anesthetic agent will be administered by an anesthesiologist assistant; and
- (b) Receive the consent of the patient, in writing, for the anesthesiologist assistant to administer the anesthetic agent.
- Sec. 8. <u>1.</u> The Board may issue a license as an anesthesiologist assistant to an applicant who <del>[is qualified under the regulations]</del>:
- (a) Is at least 18 years of age;
- (b) Has successfully completed a medically-based anesthesiologist assistant program that is accredited by the Commission on Accreditation of Allied Health Education Programs or its successor organization;
- (c) Has passed a certifying examination administered by the National Commission for Certification of Anesthesiologist Assistants or its successor organization;
- (d) Is certified by the National Commission for Certification of Anesthesiologist Assistants or a successor organization; and
- <u>(e) Meets the qualifications prescribed by regulation</u> of the Board to perform anesthesia services under the medically direct supervision of a supervising anesthesiologist.
- <u>2.</u> An application for <del>[such]</del> a license <u>as an anesthesiologist assistant</u> must contain all information required by the Board to complete the application.
- Sec. 9. The Board shall adopt regulations establishing the requirements for licensure as an anesthesiologist assistant, including, without limitation:
  - 1. The required qualifications of applicants for a license;
- 2. The academic or educational certificates, credentials or programs of study required of applicants;

- 3. The procedures for submitting applications for licensure;
- 4. The standards for review of submitted applications and procedures for the issuance of licenses;
  - 5. The tests or examinations of applicants by the Board;
- 6. The duration, renewal, revocation, suspension and termination of licenses;
- 7. The regulation and discipline of anesthesiologist assistants, including, without limitation, the reporting of complaints, investigations of misconduct and disciplinary proceedings;
- 8. The medically direct supervision of an anesthesiologist assistant by a supervising anesthesiologist; and
- 9. Consistent with the provisions of section 7 of this act, the anesthesia services which an anesthesiologist assistant may perform.
  - Sec. 10. 1. An anesthesiologist assistant shall:
- (a) Keep his or her license available for inspection at his or her primary place of business; and
- (b) When engaged in professional duties, identify himself or herself as an anesthesiologist assistant.
- 2. An anesthesiologist assistant shall not bill a patient separately from his or her supervising anesthesiologist.
- Sec. 11. 1. An anesthesiologist assistant licensed under the provisions of this chapter who is responding to a need for medical care created by an emergency or disaster, as declared by a governmental entity, may render emergency care that is directly related to the emergency or disaster without the supervision of a supervising anesthesiologist as required by this chapter. The provisions of this subsection apply only for the duration of the emergency or disaster.
- 2. A supervising anesthesiologist who supervises an anesthesiologist assistant who is rendering emergency care that is directly related to an emergency or disaster, as described in subsection 1, is not required to meet the requirements set forth in this chapter for such supervision.
- Sec. 12. 1. A supervising anesthesiologist shall provide medically direct supervision to his or her anesthesiologist assistant whenever the anesthesiologist assistant is performing anesthesia services.
- 2. Before beginning to supervise an anesthesiologist assistant, a supervising anesthesiologist shall communicate to the anesthesiologist assistant:
  - (a) The scope of practice of the anesthesiologist assistant;
- (b) The access to the supervising anesthesiologist that the anesthesiologist assistant will have; and
- (c) Any processes for evaluation that the supervising anesthesiologist will use to evaluate the anesthesiologist assistant.
- 3. A supervising anesthesiologist shall not delegate to his or her anesthesiologist assistant, and the anesthesiologist assistant shall not accept,

any task that is beyond the capability of the anesthesiologist assistant to complete safely.

- 4. A supervising anesthesiologist shall not supervise more than four anesthesiologist assistants at the same time.
- 5. A supervising anesthesiologist may coordinate with other anesthesiologists within his or her practice group or department for the purpose of complying with any of his or her required supervisory duties. Any anesthesiologist with whom a supervisory anesthesiologist coordinates his or her supervisory duties shall be considered a joint supervisory anesthesiologist and is subject to all applicable requirements for a supervisory anesthesiologist contained within this chapter.
  - Sec. 13. NRS 630.003 is hereby amended to read as follows:
  - 630.003 1. The Legislature finds and declares that:
- (a) It is among the responsibilities of State Government to ensure, as far as possible, that only competent persons practice medicine, perfusion and respiratory care within this State;
- (b) For the protection and benefit of the public, the Legislature delegates to the Board of Medical Examiners the power and duty to determine the initial and continuing competence of physicians, perfusionists, physician assistants, anesthesiologist assistants and practitioners of respiratory care who are subject to the provisions of this chapter;
- (c) The Board must exercise its regulatory power to ensure that the interests of the medical profession do not outweigh the interests of the public;
- (d) The Board must ensure that unfit physicians, perfusionists, physician assistants , *anesthesiologist assistants* and practitioners of respiratory care are removed from the medical profession so that they will not cause harm to the public; and
- (e) The Board must encourage and allow for public input into its regulatory activities to further improve the quality of medical practice within this State.
- 2. The powers conferred upon the Board by this chapter must be liberally construed to carry out these purposes for the protection and benefit of the public.
  - Sec. 14. NRS 630.005 is hereby amended to read as follows:
- 630.005 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 630.007 to 630.026, inclusive, *and sections 3 to 6, inclusive, of this act* have the meanings ascribed to them in those sections.
  - Sec. 15. NRS 630.021 is hereby amended to read as follows:
  - 630.021 "Practice of respiratory care" includes:
- 1. Therapeutic and diagnostic use of medical gases, humidity and aerosols and the maintenance of associated apparatus;
- 2. The administration of drugs and medications to the cardiopulmonary system;
  - 3. The provision of ventilatory assistance and control;
- 4. Postural drainage and percussion, breathing exercises and other respiratory rehabilitation procedures;

- 5. Cardiopulmonary resuscitation and maintenance of natural airways and the insertion and maintenance of artificial airways;
- 6. Carrying out the written orders of a physician, physician assistant, *anesthesiologist assistant*, certified registered nurse anesthetist or an advanced practice registered nurse relating to respiratory care;
- 7. Techniques for testing to assist in diagnosis, monitoring, treatment and research related to respiratory care, including the measurement of ventilatory volumes, pressures and flows, collection of blood and other specimens, testing of pulmonary functions and hemodynamic and other related physiological monitoring of the cardiopulmonary system; and
  - 8. Training relating to the practice of respiratory care.
  - Sec. 16. NRS 630.045 is hereby amended to read as follows:
- 630.045 1. The purpose of licensing physicians, perfusionists, physician assistants, *anesthesiologist assistants* and practitioners of respiratory care is to protect the public health and safety and the general welfare of the people of this State.
  - 2. Any license issued pursuant to this chapter is a revocable privilege.
  - Sec. 17. NRS 630.047 is hereby amended to read as follows:
  - 630.047 1. This chapter does not apply to:
- (a) A medical officer or perfusionist or practitioner of respiratory care of the Armed Forces or a medical officer or perfusionist or practitioner of respiratory care of any division or department of the United States in the discharge of his or her official duties, including, without limitation, providing medical care in a hospital in accordance with an agreement entered into pursuant to NRS 449.2455;
- (b) Physicians who are called into this State, other than on a regular basis, for consultation with or assistance to a physician licensed in this State, and who are legally qualified to practice in the state where they reside;
- (c) Physicians who are legally qualified to practice in the state where they reside and come into this State on an irregular basis to:
- (1) Obtain medical training approved by the Board from a physician who is licensed in this State: or
- (2) Provide medical instruction or training approved by the Board to physicians licensed in this State;
- (d) Any person permitted to practice any other healing art under this title who does so within the scope of that authority, or healing by faith or Christian Science;
- (e) The practice of respiratory care by a student as part of a program of study in respiratory care that is approved by the Board, or is recognized by a national organization which is approved by the Board to review such programs, if the student is enrolled in the program and provides respiratory care only under the supervision of a practitioner of respiratory care;
  - (f) The practice of respiratory care by a student who:
- $(1) \ \ Is enrolled in a clinical program of study in respiratory care which has been approved by the Board;$

- (2) Is employed by a medical facility, as defined in NRS 449.0151; and
- (3) Provides respiratory care to patients who are not in a critical medical condition or, in an emergency, to patients who are in a critical medical condition and a practitioner of respiratory care is not immediately available to provide that care and the student is directed by a physician to provide respiratory care under the supervision of the physician until a practitioner of respiratory care is available;
- (g) The practice of respiratory care by a person on himself or herself or gratuitous respiratory care provided to a friend or a member of a person's family if the provider of the care does not represent himself or herself as a practitioner of respiratory care;
- (h) A person who is employed by a physician and provides respiratory care or services as a perfusionist under the supervision of that physician;
- (i) The maintenance of medical equipment for perfusion , *anesthesia* services or respiratory care that is not attached to a patient; and
- (j) A person who installs medical equipment for respiratory care that is used in the home and gives instructions regarding the use of that equipment if the person is trained to provide such services and is supervised by a provider of health care who is acting within the authorized scope of his or her practice.
- 2. This chapter does not repeal or affect any statute of Nevada regulating or affecting any other healing art.
  - 3. This chapter does not prohibit:
- (a) Gratuitous services outside of a medical school or medical facility by a person who is not a physician, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care in cases of emergency.
  - (b) The domestic administration of family remedies.
  - Sec. 18. NRS 630.120 is hereby amended to read as follows:
  - 630.120 1. The Board shall procure a seal.
- 2. All licenses issued to physicians, perfusionists, physician assistants, *anesthesiologist assistants* and practitioners of respiratory care must bear the seal of the Board and the signatures of its President and Secretary-Treasurer.
  - Sec. 19. NRS 630.137 is hereby amended to read as follows:
- 630.137 1. Notwithstanding any other provision of law and except as otherwise provided in this section, the Board shall not adopt any regulations that prohibit or have the effect of prohibiting a physician, perfusionist, physician assistant , *anesthesiologist assistant* or practitioner of respiratory care from collaborating or consulting with another provider of health care.
- 2. The provisions of this section do not prevent the Board from adopting regulations that prohibit a physician, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care from aiding or abetting another person in the unlicensed practice of medicine or the unlicensed practice of perfusion or respiratory care.
- 3. As used in this section, "provider of health care" has the meaning ascribed to it in NRS 629.031.

- Sec. 20. NRS 630.167 is hereby amended to read as follows:
- 630.167 In addition to any other requirements set forth in this chapter, each applicant for a license to practice medicine, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice respiratory care shall submit to the Board a complete set of fingerprints and written permission authorizing the Board to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report. Any fees or costs charged by the Board for this service pursuant to NRS 630.268 are not refundable.
  - Sec. 21. NRS 630.197 is hereby amended to read as follows:
  - 630.197 1. In addition to any other requirements set forth in this chapter:
- (a) An applicant for the issuance of a license to practice medicine, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice as a practitioner of respiratory care shall include the social security number of the applicant in the application submitted to the Board.
- (b) An applicant for the issuance or renewal of a license to practice medicine, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice as a practitioner of respiratory care shall submit to the Board the statement prescribed by the Division of Welfare and Supportive Services of the Department of Health and Human Services pursuant to NRS 425.520. The statement must be completed and signed by the applicant.
- 2. The Board shall include the statement required pursuant to subsection 1 in:
- (a) The application or any other forms that must be submitted for the issuance or renewal of the license; or
  - (b) A separate form prescribed by the Board.
- 3. A license to practice medicine, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice as a practitioner of respiratory care may not be issued or renewed by the Board if the applicant:
  - (a) Fails to submit the statement required pursuant to subsection 1; or
- (b) Indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.
- 4. If an applicant indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order, the Board shall advise the applicant to

contact the district attorney or other public agency enforcing the order to determine the actions that the applicant may take to satisfy the arrearage.

- Sec. 22. NRS 630.198 is hereby amended to read as follows:
- 630.198 1. The Board shall not issue or renew a license to practice as a physician, physician assistant, *anesthesiologist assistant* or perfusionist unless the applicant for issuance or renewal of the license attests to knowledge of and compliance with the guidelines of the Centers for Disease Control and Prevention concerning the prevention of transmission of infectious agents through safe and appropriate injection practices.
- 2. In addition to the attestation provided pursuant to subsection 1, a physician shall attest that any person:
  - (a) Who is under the control and supervision of the physician;
  - (b) Who is not licensed pursuant to this chapter; and
  - (c) Whose duties involve injection practices,
- has knowledge of and is in compliance with the guidelines of the Centers for Disease Control and Prevention concerning the prevention of transmission of infectious agents through safe and appropriate injection practices.
  - Sec. 23. NRS 630.253 is hereby amended to read as follows:
  - 630.253 1. The Board shall, as a prerequisite for the:
  - (a) Renewal of a license as a physician assistant; [or]
  - (b) Renewal of a license as an anesthesiologist assistant; or
  - (c) Biennial registration of the holder of a license to practice medicine,
- require each holder to submit evidence of compliance with the requirements for continuing education as set forth in regulations adopted by the Board.
  - 2. These requirements:
- (a) May provide for the completion of one or more courses of instruction relating to risk management in the performance of medical services.
- (b) Must provide for the completion of a course of instruction, within 2 years after initial licensure, relating to the medical consequences of an act of terrorism that involves the use of a weapon of mass destruction. The course must provide at least 4 hours of instruction that includes instruction in the following subjects:
  - (1) An overview of acts of terrorism and weapons of mass destruction;
  - (2) Personal protective equipment required for acts of terrorism;
- (3) Common symptoms and methods of treatment associated with exposure to, or injuries caused by, chemical, biological, radioactive and nuclear agents;
- (4) Syndromic surveillance and reporting procedures for acts of terrorism that involve biological agents; and
- (5) An overview of the information available on, and the use of, the Health Alert Network.
- (c) Must provide for the completion by a holder of a license to practice medicine who is a psychiatrist of a course of instruction that provides at least 2 hours of instruction on clinically-based suicide prevention and awareness.

- → The Board may thereafter determine whether to include in a program of continuing education additional courses of instruction relating to the medical consequences of an act of terrorism that involves the use of a weapon of mass destruction.
- 3. The Board shall encourage each holder of a license who treats or cares for persons who are more than 60 years of age to receive, as a portion of their continuing education, education in geriatrics and gerontology, including such topics as:
  - (a) The skills and knowledge that the licensee needs to address aging issues;
- (b) Approaches to providing health care to older persons, including both didactic and clinical approaches;
- (c) The biological, behavioral, social and emotional aspects of the aging process; and
- (d) The importance of maintenance of function and independence for older persons.
- 4. The Board shall encourage each holder of a license to practice medicine to receive, as a portion of his or her continuing education, training concerning methods for educating patients about how to effectively manage medications, including, without limitation, the ability of the patient to request to have the symptom or purpose for which a drug is prescribed included on the label attached to the container of the drug.
- 5. The Board shall encourage each holder of a license to practice medicine, other than a psychiatrist, to receive as a portion of his or her continuing education training concerning suicide, including, without limitation, such topics as:
- (a) The skills and knowledge that the licensee needs to detect behaviors that may lead to suicide, including, without limitation, post-traumatic stress disorder;
  - (b) Approaches to engaging other professionals in suicide intervention; and
- (c) The detection of suicidal thoughts and ideations and the prevention of suicide.
- 6. A holder of a license to practice medicine may substitute not more than 2 hours of continuing education credits in the detection of suicidal thoughts and ideations, and the intervention and prevention of suicide, pain management or addiction care for the purposes of satisfying an equivalent requirement for continuing education in ethics.
  - 7. As used in this section:
  - (a) "Act of terrorism" has the meaning ascribed to it in NRS 202.4415.
  - (b) "Biological agent" has the meaning ascribed to it in NRS 202.442.
  - (c) "Chemical agent" has the meaning ascribed to it in NRS 202.4425.
  - (d) "Radioactive agent" has the meaning ascribed to it in NRS 202.4437.
- (e) "Weapon of mass destruction" has the meaning ascribed to it in NRS 202.4445.

## Sec. 24. [NRS-630.2535 is hereby amended to read as follows:

—630.2535 The Board may, by regulation, require each physician , [or] physician assistant or anesthesiologist assistant who is registered to dispense controlled substances pursuant to NRS 453.231 to complete at least 1 hour of training relating specifically to the misuse and abuse of controlled substances during each period of licensure. Any licensee may use such training to satisfy 1 hour of any continuing education requirement established by the Board.] (Deleted by amendment.)

- Sec. 25. NRS 630.268 is hereby amended to read as follows:
- 630.268 1. <u>The [Except as otherwise provided in this section, the]</u> Board shall charge and collect not more than the following fees:

charge and collect not more than the following fees:
For application for and issuance of a license to practice as a
physician, including a license by endorsement\$600
For application for and issuance of a temporary, locum
tenens, limited, restricted, authorized facility, special,
special purpose or special event license400
For renewal of a limited, restricted, authorized
facility or special license
For application for and issuance of a license as a
physician assistant, including a license by endorsement400
For biennial registration of a physician assistant800
For biennial registration of a physician800
For application for and issuance of a license as a
perfusionist or practitioner of respiratory care400
For biennial renewal of a license as a perfusionist600
For application for and issuance of a license as an
anesthesiologist assistant, including a license by
endorsement400
For biennial registration of an anesthesiologist
<u>assistant800</u>
For biennial registration of a practitioner of respiratory care600
For biennial registration for a physician who is on inactive
status
For written verification of licensure50
For a duplicate identification card25
For a duplicate license50
For computer printouts or labels
For verification of a listing of physicians, per hour20
For furnishing a list of new physicians

- 2. Except as otherwise provided in subsections 4 and 5, in addition to the fees prescribed in subsection 1, the Board shall charge and collect necessary and reasonable fees for the expedited processing of a request or for any other incidental service the Board provides.
- 3. The cost of any special meeting called at the request of a licensee, an institution, an organization, a state agency or an applicant for licensure must

be paid for by the person or entity requesting the special meeting. Such a special meeting must not be called until the person or entity requesting it has paid a cash deposit with the Board sufficient to defray all expenses of the meeting.

- 4. If an applicant submits an application for a license by endorsement pursuant to:
- (a) NRS 630.1607, and the applicant is an active member of, or the spouse of an active member of, the Armed Forces of the United States, a veteran or the surviving spouse of a veteran, the Board shall collect not more than one-half of the fee set forth in subsection 1 for the initial issuance of the license. As used in this paragraph, "veteran" has the meaning ascribed to it in NRS 417.005.
- (b) NRS 630.2752, the Board shall collect not more than one-half of the fee set forth in subsection 1 for the initial issuance of the license.
- 5. If an applicant submits an application for a license by endorsement pursuant to NRS 630.1606 or 630.2751, as applicable, the Board shall charge and collect not more than the fee specified in subsection 1 *for prescribed by regulation of the Board, as applicable,* for the application for and initial issuance of a license.

## [ 6. The Board may prescribe by regulation and collect fees for the issuance and renewal of a license as an anesthesiologist assistant and for the biennial registration of an anesthesiologist assistant.]

- Sec. 26. NRS 630.2751 is hereby amended to read as follows:
- 630.2751 1. The Board may issue a license by endorsement to practice as a physician assistant *or anesthesiologist assistant* to an applicant who meets the requirements set forth in this section. An applicant may submit to the Board an application for such a license if the applicant:
- (a) Holds a corresponding valid and unrestricted license to practice as a physician assistant *or anesthesiologist assistant* in the District of Columbia or any state or territory of the United States; and
- (b) Is certified in a specialty recognized by the American Board of Medical Specialties [.] if the applicant is seeking to practice as a physician assistant, or is certified by the National Commission for Certification of Anesthesiologist Assistants if the applicant is seeking to practice as an anesthesiologist assistant.
- 2. An applicant for a license by endorsement pursuant to this section must submit to the Board with his or her application:
  - (a) Proof satisfactory to the Board that the applicant:
    - (1) Satisfies the requirements of subsection 1;
- (2) Is a citizen of the United States or otherwise has the legal right to work in the United States;
- (3) Has not been disciplined or investigated by the corresponding regulatory authority of the District of Columbia or any state or territory in which the applicant currently holds or has held a license to practice as a physician assistant [;] or anesthesiologist assistant; and

- (4) Has not been held civilly or criminally liable for malpractice in the District of Columbia or any state or territory of the United States;
- (b) A complete set of fingerprints and written permission authorizing the Board to forward the fingerprints in the manner provided in NRS 630.167;
- (c) An affidavit stating that the information contained in the application and any accompanying material is true and correct; and
  - (d) Any other information required by the Board.
- 3. Not later than 15 business days after receiving an application for a license by endorsement to practice as a physician assistant *or anesthesiologist assistant* pursuant to this section, the Board shall provide written notice to the applicant of any additional information required by the Board to consider the application. Unless the Board denies the application for good cause, the Board shall approve the application and issue a license by endorsement to practice as a physician assistant *or anesthesiologist assistant* to the applicant not later than:
  - (a) Forty-five days after receiving the application; or
- (b) Ten days after the Board receives a report on the applicant's background based on the submission of the applicant's fingerprints,
- → whichever occurs later.
- 4. A license by endorsement to practice as a physician assistant *or anesthesiologist assistant* may be issued at a meeting of the Board or between its meetings by the President and Executive Director of the Board. Such an action shall be deemed to be an action of the Board.
  - Sec. 27. NRS 630.2752 is hereby amended to read as follows:
- 630.2752 1. The Board may issue a license by endorsement to practice as a physician assistant *or anesthesiologist assistant* to an applicant who meets the requirements set forth in this section. An applicant may submit to the Board an application for such a license if the applicant:
- (a) Holds a corresponding valid and unrestricted license to practice as a physician assistant *or anesthesiologist assistant* in the District of Columbia or any state or territory of the United States;
- (b) Is certified in a specialty recognized by the American Board of Medical Specialties [;] if the applicant is seeking to practice as a physician assistant, or is certified by the National Commission for Certification of Anesthesiologist Assistants if the applicant is seeking to practice as an anesthesiologist assistant; and
- (c) Is an active member of, or the spouse of an active member of, the Armed Forces of the United States, a veteran or the surviving spouse of a veteran.
- 2. An applicant for a license by endorsement pursuant to this section must submit to the Board with his or her application:
  - (a) Proof satisfactory to the Board that the applicant:
    - (1) Satisfies the requirements of subsection 1;
- (2) Is a citizen of the United States or otherwise has the legal right to work in the United States;

- (3) Has not been disciplined or investigated by the corresponding regulatory authority of the District of Columbia or the state or territory in which the applicant holds a license to practice as a physician assistant [;] or anesthesiologist assistant; and
- (4) Has not been held civilly or criminally liable for malpractice in the District of Columbia or any state or territory of the United States;
- (b) A complete set of fingerprints and written permission authorizing the Board to forward the fingerprints in the manner provided in NRS 630.167;
- (c) An affidavit stating that the information contained in the application and any accompanying material is true and correct; and
  - (d) Any other information required by the Board.
- 3. Not later than 15 business days after receiving an application for a license by endorsement to practice as a physician assistant *or anesthesiologist assistant* pursuant to this section, the Board shall provide written notice to the applicant of any additional information required by the Board to consider the application. Unless the Board denies the application for good cause, the Board shall approve the application and issue a license by endorsement to practice as a physician assistant *or anesthesiologist assistant* to the applicant not later than:
- (a) Forty-five days after receiving all the additional information required by the Board to complete the application; or
- (b) Ten days after the Board receives a report on the applicant's background based on the submission of the applicant's fingerprints,
- → whichever occurs later.
- 4. A license by endorsement to practice as a physician assistant *or anesthesiologist assistant* may be issued at a meeting of the Board or between its meetings by the President and Executive Director of the Board. Such an action shall be deemed to be an action of the Board.
- 5. At any time before making a final decision on an application for a license by endorsement pursuant to this section, the Board may grant a provisional license authorizing an applicant to practice as a physician assistant *or anesthesiologist assistant* in accordance with regulations adopted by the Board.
- 6. As used in this section, "veteran" has the meaning ascribed to it in NRS 417.005.
  - Sec. 28. NRS 630.307 is hereby amended to read as follows:
- 630.307 1. Except as otherwise provided in subsection 2, any person may file with the Board a complaint against a physician, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care on a form provided by the Board. The form may be submitted in writing or electronically. If a complaint is submitted anonymously, the Board may accept the complaint but may refuse to consider the complaint if the lack of the identity of the complainant makes processing the complaint impossible or unfair to the person who is the subject of the complaint.

- 2. Any licensee, medical school or medical facility that becomes aware that a person practicing medicine, perfusion or respiratory care in this State has, is or is about to become engaged in conduct which constitutes grounds for initiating disciplinary action shall file a written complaint with the Board within 30 days after becoming aware of the conduct.
- 3. Except as otherwise provided in subsection 4, any hospital, clinic or other medical facility licensed in this State, or medical society, shall report to the Board any change in the privileges of a physician, perfusionist, physician assistant , anesthesiologist assistant or practitioner of respiratory care to practice while the physician, perfusionist, physician assistant , anesthesiologist assistant or practitioner of respiratory care is under investigation and the outcome of any disciplinary action taken by that facility or society against the physician, perfusionist, physician assistant , anesthesiologist assistant or practitioner of respiratory care concerning the care of a patient or the competency of the physician, perfusionist, physician assistant , anesthesiologist assistant or practitioner of respiratory care within 30 days after the change in privileges is made or disciplinary action is taken.
- 4. A hospital, clinic or other medical facility licensed in this State, or medical society, shall report to the Board within 5 days after a change in the privileges of a physician, perfusionist, physician assistant, *anesthesiologist assistant* or practitioner of respiratory care to practice that is based on:
- (a) An investigation of the mental, medical or psychological competency of the physician, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care; or
- (b) Suspected or alleged substance abuse in any form by the physician, perfusionist, physician assistant, *anesthesiologist assistant* or practitioner of respiratory care.
- 5. The Board shall report any failure to comply with subsection 3 or 4 by a hospital, clinic or other medical facility licensed in this State to the Division of Public and Behavioral Health of the Department of Health and Human Services. If, after a hearing, the Division of Public and Behavioral Health determines that any such facility or society failed to comply with the requirements of this subsection, the Division may impose an administrative fine of not more than \$10,000 against the facility or society for each such failure to report. If the administrative fine is not paid when due, the fine must be recovered in a civil action brought by the Attorney General on behalf of the Division.
- 6. The clerk of every court shall report to the Board any finding, judgment or other determination of the court that a physician, perfusionist, physician assistant, *anesthesiologist assistant* or practitioner of respiratory care:
  - (a) Is mentally ill;
  - (b) Is mentally incompetent;
- (c) Has been convicted of a felony or any law governing controlled substances or dangerous drugs;

- (d) Is guilty of abuse or fraud under any state or federal program providing medical assistance; or
  - (e) Is liable for damages for malpractice or negligence,
- → within 45 days after such a finding, judgment or determination is made.
- 7. The Board shall retain all complaints filed with the Board pursuant to this section for at least 10 years, including, without limitation, any complaints not acted upon.
  - Sec. 29. NRS 630.309 is hereby amended to read as follows:
- 630.309 To institute a disciplinary action against a perfusionist, physician assistant, *anesthesiologist assistant* or practitioner of respiratory care, a written complaint, specifying the charges, must be filed with the Board by:
- 1. The Board or a committee designated by the Board to investigate a complaint;
  - 2. Any member of the Board; or
- 3. Any other person who is aware of any act or circumstance constituting a ground for disciplinary action set forth in the regulations adopted by the Board.
  - Sec. 30. NRS 630.326 is hereby amended to read as follows:
- 630.326 1. If an investigation by the Board regarding a physician, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care reasonably determines that the health, safety or welfare of the public or any patient served by the licensee is at risk of imminent or continued harm, the Board may summarily suspend the license of the licensee pending the conclusion of a hearing to consider a formal complaint against the licensee. The order of summary suspension may be issued only by the Board or an investigative committee of the Board.
- 2. If the Board or an investigative committee of the Board issues an order summarily suspending the license of a physician, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care pursuant to subsection 1, the Board shall hold a hearing not later than 60 days after the date on which the order is issued, unless the Board and the licensee mutually agree to a longer period, to determine whether a reasonable basis exists to continue the suspension of the license pending the conclusion of a hearing to consider a formal complaint against the licensee. If no formal complaint against the licensee is pending before the Board on the date on which a hearing is held pursuant to this section, the Board shall reinstate the license of the licensee.
- 3. If the Board or an investigative committee of the Board issues an order summarily suspending the license of a licensee pursuant to subsection 1 and the Board requires the licensee to submit to a mental or physical examination or an examination testing his or her competence to practice, the examination must be conducted and the results obtained not later than 30 days after the order is issued.

- Sec. 31. NRS 630.329 is hereby amended to read as follows:
- 630.329 If the Board issues an order suspending the license of a physician, perfusionist, physician assistant, *anesthesiologist assistant* or practitioner of respiratory care pending proceedings for disciplinary action, including, without limitation, a summary suspension pursuant to NRS 233B.127, the court shall not stay that order.
  - Sec. 32. NRS 630.336 is hereby amended to read as follows:
- 630.336 1. Any deliberations conducted or vote taken by the Board or any investigative committee of the Board regarding its ordering of a physician, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care to undergo a physical or mental examination or any other examination designated to assist the Board or committee in determining the fitness of a physician, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care are not subject to the requirements of NRS 241.020.
- 2. Except as otherwise provided in subsection 3 or 4, all applications for a license to practice medicine, perfusion or respiratory care, any charges filed by the Board, financial records of the Board, formal hearings on any charges heard by the Board or a panel selected by the Board, records of such hearings and any order or decision of the Board or panel must be open to the public.
- 3. Except as otherwise provided in NRS 239.0115, the following may be kept confidential:
- (a) Any statement, evidence, credential or other proof submitted in support of or to verify the contents of an application;
- (b) Any report concerning the fitness of any person to receive or hold a license to practice medicine, perfusion or respiratory care; and
  - (c) Any communication between:
    - (1) The Board and any of its committees or panels; and
- (2) The Board or its staff, investigators, experts, committees, panels, hearing officers, advisory members or consultants and counsel for the Board.
- 4. Except as otherwise provided in subsection 5 and NRS 239.0115, a complaint filed with the Board pursuant to NRS 630.307, all documents and other information filed with the complaint and all documents and other information compiled as a result of an investigation conducted to determine whether to initiate disciplinary action are confidential.
- 5. The formal complaint or other document filed by the Board to initiate disciplinary action and all documents and information considered by the Board when determining whether to impose discipline are public records.
- 6. The Board shall, to the extent feasible, communicate or cooperate with or provide any documents or other information to any other licensing board or agency or any agency which is investigating a person, including a law enforcement agency. Such cooperation may include, without limitation, providing the board or agency with minutes of a closed meeting, transcripts of oral examinations and the results of oral examinations.

- Sec. 33. NRS 630.366 is hereby amended to read as follows:
- 630.366 1. If the Board receives a copy of a court order issued pursuant to NRS 425.540 that provides for the suspension of all professional, occupational and recreational licenses, certificates and permits issued to a person who is the holder of a license to practice medicine, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice as a practitioner of respiratory care, the Board shall deem the license issued to that person to be suspended at the end of the 30th day after the date on which the court order was issued unless the Board receives a letter issued to the holder of the license by the district attorney or other public agency pursuant to NRS 425.550 stating that the holder of the license has complied with the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560.
- 2. The Board shall reinstate a license to practice medicine, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice as a practitioner of respiratory care that has been suspended by a district court pursuant to NRS 425.540 if the Board receives a letter issued by the district attorney or other public agency pursuant to NRS 425.550 to the person whose license was suspended stating that the person whose license was suspended has complied with the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560.
  - Sec. 34. NRS 630.388 is hereby amended to read as follows:
- 630.388 1. In addition to any other remedy provided by law, the Board, through its President or Secretary-Treasurer or the Attorney General, may apply to any court of competent jurisdiction:
- (a) To enjoin any prohibited act or other conduct of a licensee which is harmful to the public;
- (b) To enjoin any person who is not licensed under this chapter from practicing medicine, perfusion or respiratory care;
- (c) To limit the practice of a physician, perfusionist, physician assistant, *anesthesiologist assistant* or practitioner of respiratory care, or suspend his or her license to practice;
- (d) To enjoin the use of the title "P.A.," "P.A.-C," "A.A.," "C.A.A.," "R.C.P." or any other word, combination of letters or other designation intended to imply or designate a person as a physician assistant, anesthesiologist assistant or practitioner of respiratory care, when not licensed by the Board pursuant to this chapter, unless the use is otherwise authorized by a specific statute; or
- (e) To enjoin the use of the title "L.P.," "T.L.P.," "licensed perfusionist," "temporarily licensed perfusionist" or any other word, combination of letters or other designation intended to imply or designate a person as a perfusionist, when not licensed by the Board pursuant to this chapter, unless the use is otherwise authorized by a specific statute.
- 2. The court in a proper case may issue a temporary restraining order or a preliminary injunction for the purposes set forth in subsection 1:

- (a) Without proof of actual damage sustained by any person;
- (b) Without relieving any person from criminal prosecution for engaging in the practice of medicine, perfusion or respiratory care without a license; and
  - (c) Pending proceedings for disciplinary action by the Board.
  - Sec. 35. NRS 630.400 is hereby amended to read as follows:
  - 630.400 1. It is unlawful for any person to:
- (a) Present to the Board as his or her own the diploma, license or credentials of another:
  - (b) Give either false or forged evidence of any kind to the Board;
- (c) Practice medicine, perfusion or respiratory care under a false or assumed name or falsely personate another licensee;
- (d) Except as otherwise provided by a specific statute, practice medicine, perfusion or respiratory care without being licensed under this chapter;
- (e) Hold himself or herself out as a perfusionist or use any other term indicating or implying that he or she is a perfusionist without being licensed by the Board;
- (f) Hold himself or herself out as a physician assistant or use any other term indicating or implying that he or she is a physician assistant without being licensed by the Board; [or]
- (g) Hold himself or herself out as an anesthesiologist assistant or use any other term indicating or implying that he or she is an anesthesiologist assistant without being licensed by the Board; or
- (h) Hold himself or herself out as a practitioner of respiratory care or use any other term indicating or implying that he or she is a practitioner of respiratory care without being licensed by the Board.
- 2. Unless a greater penalty is provided pursuant to NRS 200.830 or 200.840, a person who violates any provision of subsection 1:
  - (a) If no substantial bodily harm results, is guilty of a category D felony; or
  - (b) If substantial bodily harm results, is guilty of a category C felony,
- → and shall be punished as provided in NRS 193.130.
- 3. In addition to any other penalty prescribed by law, if the Board determines that a person has committed any act described in subsection 1, the Board may:
- (a) Issue and serve on the person an order to cease and desist until the person obtains from the Board the proper license or otherwise demonstrates that he or she is no longer in violation of subsection 1. An order to cease and desist must include a telephone number with which the person may contact the Board.
- (b) Issue a citation to the person. A citation issued pursuant to this paragraph must be in writing, describe with particularity the nature of the violation and inform the person of the provisions of this paragraph. Each activity in which the person is engaged constitutes a separate offense for which a separate citation may be issued. To appeal a citation, the person must submit a written request for a hearing to the Board not later than 30 days after the date of issuance of the citation.

- (c) Assess against the person an administrative fine of not more than \$5,000.
- (d) Impose any combination of the penalties set forth in paragraphs (a), (b) and (c).
  - Sec. 36. NRS 632.018 is hereby amended to read as follows:
- 632.018 "Practice of professional nursing" means the performance of any act in the observation, care and counsel of the ill, injured or infirm, in the maintenance of health or prevention of illness of others, in the supervision and teaching of other personnel, in the administration of medications and treatments as prescribed by an advanced practice registered nurse, a licensed physician, a physician assistant *[or anesthesiologist assistant]* licensed pursuant to chapter 630 or 633 of NRS, *a licensed anesthesiologist assistant*, a licensed dentist or a licensed podiatric physician, requiring substantial specialized judgment and skill based on knowledge and application of the principles of biological, physical and social science, but does not include acts of medical diagnosis or prescription of therapeutic or corrective measures.
  - Sec. 37. NRS 632.472 is hereby amended to read as follows:
- 632.472 1. The following persons shall report in writing to the Executive Director of the Board any conduct of a licensee or holder of a certificate which constitutes a violation of the provisions of this chapter:
- (a) Any physician, dentist, dental hygienist, chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, nursing assistant, medication aide certified, perfusionist, physician assistant *for anesthesiologist assistant* licensed pursuant to chapter 630 or 633 of NRS, *anesthesiologist assistant*, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, alcohol or drug abuse counselor, music therapist, driver of an ambulance, paramedic or other person providing medical services licensed or certified to practice in this State.
- (b) Any personnel of a medical facility or facility for the dependent engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a medical facility or facility for the dependent upon notification by a member of the staff of the facility.
  - (c) A coroner.
- (d) Any person who maintains or is employed by an agency to provide personal care services in the home.
- (e) Any person who operates, who is employed by or who contracts to provide services for an intermediary service organization as defined in NRS 449.4304.
- (f) Any person who maintains or is employed by an agency to provide nursing in the home.
  - (g) Any employee of the Department of Health and Human Services.
- (h) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.

- (i) Any person who maintains or is employed by a facility or establishment that provides care for older persons.
- (j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect or exploitation of an older person and refers them to persons and agencies where their requests and needs can be met.
  - (k) Any social worker.
- (1) Any person who operates or is employed by a community health worker pool or with whom a community health worker pool contracts to provide the services of a community health worker, as defined in NRS 449.0027.
- (m) Any person who operates or is employed by a peer support recovery organization.
- 2. Every physician who, as a member of the staff of a medical facility or facility for the dependent, has reason to believe that a nursing assistant or medication aide certified has engaged in conduct which constitutes grounds for the denial, suspension or revocation of a certificate shall notify the superintendent, manager or other person in charge of the facility. The superintendent, manager or other person in charge shall make a report as required in subsection 1.
  - 3. A report may be filed by any other person.
- 4. Any person who in good faith reports any violation of the provisions of this chapter to the Executive Director of the Board pursuant to this section is immune from civil liability for reporting the violation.
  - 5. As used in this section:
- (a) "Agency to provide personal care services in the home" has the meaning ascribed to it in NRS 449.0021.
- (b) "Community health worker pool" has the meaning ascribed to it in NRS 449.0028.
- (c) "Peer support recovery organization" has the meaning ascribed to it in NRS 449.01563.
- Sec. 38. [Chapter 633 of NRS is hereby amended by adding thereto the provisions set forth as sections 39 to 48, inclusive, of this act.] (Deleted by amendment.)
- Sec. 39. ["Anesthesia services" means services and activities related to the administration of anesthesia to a patient, including, without limitation, those services identified in subsection 1 of section 43 of this act.] (Deleted by amendment.)
  - Sec. 40. ["Anesthesiologist assistant" means a person who:
- 1. Is a graduate of an academic program approved by the Board or, by general education, practical training and experience determined satisfactory to the Board, is qualified to perform anesthesia services under the medically direct supervision of a supervising anesthesiologist; and
- 2. Has been issued a license by the Board. (Deleted by amendment.)
- Sec. 41. ["Medically direct supervision" means that a supervising anesthesiologist is immediately available in such proximity to an

- anesthesiologist assistant during the performance of his or her duties that the supervising anesthesiologist is able effectively to re establish direct contact with the patient to meet the medical needs of the patient and address any urgent or emergent clinical problems.} (Deleted by amendment.)
- Sec. 42. ["Supervising anesthesiologist" means an active osteopathic physician licensed and in good standing in this State who is Board certified or meets the standards to be Board certified as an anesthesiologist by the American Board of Anesthesiology, or its successor, or the American Osteopathic Association, or its successor, and who supervises one or more anesthesiology assistants.] (Deleted by amendment.)
- Sec. 43. [1.—An anesthesiologist assistant licensed under the provisions of this chapter may perform anesthesia services in accordance with the regulations adopted by the Board, within the scope of practice of a supervising anesthesiologist and under the medically direct supervision of that supervising anesthesiologist in any appropriate setting, including, without limitation, an intensive care unit or pain clinic. Such anesthesia services include, without limitation:
- (a) Obtaining a preanesthetic health history for the patient, performing a preanesthetic physical examination of the patient and recording relevant data; (b) Conducting laboratory and other related studies, including taking blood samples:
- (e) Inserting invasive monitoring modalities, including arterial and venous lines and pulmonary artery eatheterization, as delegated by the supervising anesthesiologist;
- —(d) Administering anesthetic agents and controlled substances, including, without limitation, induction agents and adjunctive treatment, maintaining and altering the levels of anesthesia and providing continuity of anesthetic care into and during the postoperative recovery period:
- (c) Establishing airway interventions and performing ventilatory support;
- -(f) Applying and interpreting advanced monitoring techniques;
- (g) Using advanced life support techniques, including, without limitation, high frequency ventilation and intraarterial cardiovascular assist devices;
- (h) Making postanesthesia rounds, recording patient progress notes; compiling and recording summaries of cases and transcribing standard and specific orders;
- -(i) Evaluating and treating life threatening situations, including, without limitation, through the use of cardiopulmonary resuscitation, using established protocols:
- —(j) Training and supervising personnel in calibrating, troubleshooting and using patient monitors:
- (k) Performing administrative duties, including, without limitation, managing patient records, coding and billing for procedures and managing personnel;
- (1) Participating in the clinical instruction of others; and

- (m) Performing and monitoring the administration of regional anesthesia, including, without limitation, spinal, epidural, intravenous regional, local infiltration, nerve blocks and other special techniques.
- 2. An anesthesiologist assistant shall not prescribe any controlled substance.
- 3. Before an anesthesiologist assistant administers to a patient any anesthetic agent that includes a controlled substance, the anesthesiologist assistant or supervising anesthesiologist shall:
- —(a) Disclose to the patient that the anesthetic agent will be administered by an anesthesiologist assistant; and
- (b) Receive the consent of the patient, in writing, for the anesthesiologist assistant to administer the anesthetic agent.] (Deleted by amendment.)
- Sec. 44. [The Board may issue a license as an anesthesiologist assistant to an applicant who is qualified under the regulations of the Board to perform anesthesia services under the medically direct supervision of a supervising anesthesiologist. An application for such a license must contain all information required by the Board to complete the application.] (Deleted by amendment.)
- Sec. 45. [The Board shall adopt regulations establishing the requirements for licensure as an anesthesiologist assistant, including, without limitation:
- 1. The required qualifications of applicants for a license;
- -2. The academic or educational certificates, eredentials or programs of study required of applicants;
- 3. The procedures for submitting applications for licensure;
- 1. The standards for review of submitted applications and procedures for the issuance of licenses;
- 5. The tests or examinations of applicants by the Board;
- 6. The duration, renewal, revocation, suspension and termination of licenses:
- 7. The regulation and discipline of anesthesiologist assistants, including, without limitation, the reporting of complaints, investigations of misconduct and disciplinary proceedings;
- 8. The medically direct supervision of an anesthesiologist assistant by a supervising anesthesiologist; and
- 9. Consistent with the provisions of section 43 of this act, the anesthesia services which an anesthesiologist assistant may perform.} (Deleted by amendment.)
  - Sec. 46. [1. An anesthesiologist assistant shall:
- (a) Keep his or her license available for inspection at his or her primary place of business; and
- (b) When engaged in professional duties, identify himself or herself as an anesthesiologist assistant.
- 2. An anesthesiologist assistant shall not bill a patient separately from his or her supervising anesthesiologist.] (Deleted by amendment.)

- Sec. 47. [I. An anesthesiologist assistant licensed under the provisions of this chapter who is responding to a need for medical care created by an emergency or disaster, as declared by a governmental entity, may render emergency care that is directly related to the emergency or disaster without the supervision of a supervising anesthesiologist as required by this chapter. The provisions of this subsection apply only for the duration of the emergency or disaster.
- 2. A supervising anesthesiologist who supervises an anesthesiologist assistant who is rendering emergency care that is directly related to an emergency or disaster, as described in subsection 1, is not required to meet the requirements set forth in this chapter for such supervision.} (Deleted by amendment.)
- Sec. 48. [1. A supervising anesthesiologist shall provide medically direct supervision to his or her anesthesiologist assistant whenever the anesthesiologist assistant is performing anesthesia services.
- 2. Before beginning to supervise an anesthesiologist assistant, a supervising anesthesiologist shall communicate to the anesthesiologist assistant:
- (a) The scope of practice of the anesthesiologist assistant;
- -(b) The access to the supervising anesthesiologist that the anesthesiologist assistant will have; and
- -(e) Any processes for evaluation that the supervising anesthesiologist will use to evaluate the anesthesiologist assistant.
- 3. A supervising anesthesiologist shall not delegate to his or her anesthesiologist assistant, and the anesthesiologist assistant shall not accept, any task that is beyond the capability of the anesthesiologist assistant to complete safely.
- 4. A supervising anesthesiologist shall not supervise more than four anesthesiologist assistants at the same time.
- 5. A supervising anesthesiologist may coordinate with other anesthesiologists within his or her practice group or department for the purpose of complying with any of his or her required supervisory duties. Any anesthesiologist with whom a supervisory anesthesiologist coordinates his or her supervisory duties shall be considered a joint supervisory anesthesiologist and is subject to all applicable requirements for a supervisory anesthesiologist contained within this chapter.] (Deleted by amendment.)
  - Sec. 49. [NRS 633.011 is hereby amended to read as follows:
- -633.011 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 633.021 to 633.131, inclusive, and sections 39 to 42, inclusive, of this act have the meanings ascribed to them in those sections.] (Deleted by amendment.)
  - Sec. 50. [NRS 633.071 is hereby amended to read as follows:
- 633.071 "Malpraetice" means failure on the part of an osteopathic physician, [or] physician assistant or anesthesiologist assistant to exercise the degree of care, diligence and skill ordinarily exercised by osteopathic

physicians , [or] physician assistants or anesthesiologist assistants in good standing in the community in which he or she practices.] (Deleted by amendment.)

- Sec. 51. [NRS 633.131 is hereby amended to read as follows:
- 633.131 1. "Unprofessional conduct" includes:
- (a) Knowingly or willfully making a false or fraudulent statement or submitting a forged or false document in applying for a license to practice osteopathic medicine, [or] to practice as a physician assistant or to practice as an anesthesiologist assistant, or in applying for the renewal of a license to practice osteopathic medicine, [or] to practice as a physician assistant or to practice as an anesthesiologist assistant.
- (b) Failure of a person who is licensed to practice osteopathic medicine to identify himself or herself professionally by using the term D.O., osteopathic physician, doctor of osteopathy or a similar term.
- (e) Directly or indirectly giving to or receiving from any person, corporation or other business organization any fee, commission, rebate or other form of compensation for sending, referring or otherwise inducing a person to communicate with an osteopathic physician in his or her professional capacity or for any professional services not actually and personally rendered, except as otherwise provided in subsection 2.
- (d) Employing, directly or indirectly, any suspended or unlicensed person in the practice of osteopathic medicine or in practice as a physician assistant or anesthesiologist assistant, or the aiding or abetting of any unlicensed person to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant.
- (e) Advertising the practice of osteopathic medicine in a manner which does not conform to the guidelines established by regulations of the Board.
- (f) Engaging in any:
- (1) Professional conduct which is intended to deceive or which the Board by regulation has determined is unethical; or
- (2) Medical practice harmful to the public or any conduct detrimental to the public health, safety or morals which does not constitute gross or repeated malpractice or professional incompetence.
- —(g) Administering, dispensing or prescribing any controlled substance or any dangerous drug as defined in chapter 454 of NRS, otherwise than in the course of legitimate professional practice or as authorized by law.
- (h) Habitual drunkenness or habitual addiction to the use of a controlled substance.
- (i) Performing, assisting in or advising an unlawful abortion or the injection of any liquid silicone substance into the human body, other than the use of silicone oil to repair a retinal detachment.
- —(j) Knowingly or willfully disclosing a communication privileged pursuant to a statute or court order.

- (k) Knowingly or willfully disobeying regulations of the State Board of Health, the State Board of Pharmacy or the State Board of Osteopathic Medicine.
- (1) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of or conspiring to violate any prohibition made in this chapter.
- (m) Failure of a licensee to maintain timely, legible, accurate and complete medical records relating to the diagnosis, treatment and care of a patient.
- (n) Making alterations to the medical records of a patient that the licensee knows to be false.
- -(o) Making or filing a report which the licensee knows to be false.
- (p) Failure of a licensee to file a record or report as required by law, or knowingly or willfully obstructing or inducing any person to obstruct such filing.
- (q) Failure of a licensee to make medical records of a patient available for inspection and copying as provided by NRS 629.061.
- (r) Providing false, misleading or deceptive information to the Board in connection with an investigation conducted by the Board.
- 2. It is not unprofessional conduct:
- (a) For persons holding valid licenses to practice osteopathic medicine issued pursuant to this chapter to practice osteopathic medicine in partnership under a partnership agreement or in a corporation or an association authorized by law, or to pool, share, divide or apportion the fees and money received by them or by the partnership, corporation or association in accordance with the partnership agreement or the policies of the board of directors of the corporation or association;
- (b) For two or more persons holding valid licenses to practice osteopathic medicine issued pursuant to this chapter to receive adequate compensation for concurrently rendering professional care to a patient and dividing a fee if the patient has full knowledge of this division and if the division is made in proportion to the services performed and the responsibility assumed by each person; or
- (e) For a person licensed to practice osteopathic medicine pursuant to the provisions of this chapter to form an association or other business relationship with an optometrist pursuant to the provisions of NRS 636.373.] (Deleted by amendment.)
  - Sec. 52. [NRS 633.151 is hereby amended to read as follows:
- 633.151—The purpose of licensing osteopathic physicians, [and] physician assistants and anesthesiologist assistants is to protect the public health and safety and the general welfare of the people of this State. Any license issued pursuant to this chapter is a revocable privilege, and a holder of such a license does not acquire thereby any vested right.] (Deleted by amendment.)
  - Sec. 53. [NRS 633.286 is hereby amended to read as follows:
- -633.286 1. On or before February 15 of each odd numbered year, the Board shall submit to the Governor and to the Director of the Legislative

Counsel Bureau for transmittal to the next regular session of the Legislature a written report compiling:

- (a) Disciplinary action taken by the Board during the previous biennium against osteopathic physicians, [and] physician assistants and anesthesiologist assistants for malpractice or negligence;
- (b) Information reported to the Board during the previous biennium pursuant to NRS 633.526, 633.527, subsections 3 and 6 of NRS 633.533 and NRS 690B.250 and 690B.260; and
- (c) Information reported to the Board during the previous biennium pursuant to NRS 633.524, including, without limitation, the number and types of surgeries performed by each holder of a license to practice osteopathic medicine and the occurrence of sentinel events arising from such surgeries, if any.
- 2. The report must include only aggregate information for statistical purposes and exclude any identifying information related to a particular person.] (Deleted by amendment.)
  - Sec. 54. [NRS 633.301 is hereby amended to read as follows:
- <u>633.301</u> 1. The Board shall keep a record of its proceedings relating to licensing and disciplinary actions. Except as otherwise provided in this section, the record must be open to public inspection at all reasonable times and contain the name, known place of business and residence, and the date and number of the license of every osteopathic physician, [and every] physician assistant and anesthesiologist assistant licensed under this chapter.
- 2. Except as otherwise provided in this section and NRS 239.0115, a complaint filed with the Board, all documents and other information filed with the complaint and all documents and other information compiled as a result of an investigation conducted to determine whether to initiate disciplinary action against a person are confidential, unless the person submits a written statement to the Board requesting that such documents and information be made public records.
- 3. The charging documents filed with the Board to initiate disciplinary action pursuant to chapter 622A of NRS and all other documents and information considered by the Board when determining whether to impose discipline are public records.
- 4. The Board shall, to the extent feasible, communicate or cooperate with or provide any documents or other information to any other licensing board or any other agency that is investigating a person, including, without limitation, a law enforcement agency.] (Deleted by amendment.)
  - Sec. 55. [NRS 633.305 is hereby amended to read as follows:
- <u>633.305 Except as otherwise provided in NRS 633.399, 633.400, 633.4335 and 633.4336:</u>
- 1. Every applicant for a license shall:
- (a) File an application with the Board in the manner prescribed by regulations of the Board;

- —(b) Submit verified proof satisfactory to the Board that the applicant meets any age, citizenship and educational requirements prescribed by this chapter; and
- (e) Pay in advance to the Board the application and initial license fee specified in NRS 633.501 [.] or prescribed by regulation of the Board, as applicable.
- 2. An application filed with the Board pursuant to subsection 1 must include all information required to complete the application.
- 3. The Board may hold hearings and conduct investigations into any matter related to the application and, in addition to the proofs required by subsection 1, may take such further evidence and require such other documents or proof of qualifications as it deems proper.
- 4. The Board may reject an application if the Board has cause to believe that any credential or information submitted by the applicant is false, misleading, deceptive or fraudulent.] (Deleted by amendment.)
- Sec. 56. [NRS 633.3619 is hereby amended to read as follows:
- -633.3619 The Board shall not issue or renew a license to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant unless the applicant for issuance or renewal of the license attests to knowledge of and compliance with the guidelines of the Centers for Disease Control and Prevention concerning the prevention of transmission of infectious agents through safe and appropriate injection practices.] (Deleted by amendment.)
- Sec. 57. [NRS 633.4335 is hereby amended to read as follows:
- <u>633.4335</u> 1. The Board may issue a license by endorsement to practice as a physician assistant or anesthesiologist assistant to an applicant who meets the requirements set forth in this section. An applicant may submit to the Board an application for such a license if the applicant:
- (a) Holds a corresponding valid and unrestricted license to practice as a physician assistant or anesthesiologist assistant in the District of Columbia or any state or territory of the United States; and
- (b) Is certified in a specialty recognized by the American Board of Medical Specialties or the American Osteopathic Association [.] if the applicant is seeking to practice as a physician assistant, or is certified by the National Commission for Certification of Anesthesiologist Assistants if the applicant is seeking to practice as an anesthesiologist assistant.
- 2. An applicant for a license by endorsement pursuant to this section must submit to the Board with his or her application:
- (a) Proof satisfactory to the Board that the applicant:
- (1) Satisfies the requirements of subsection 1;
- (2) Is a citizen of the United States or otherwise has the legal right to work in the United States;
- (3) Has not been disciplined and is not currently under investigation by the corresponding regulatory authority of the District of Columbia or any state

- or territory in which the applicant currently holds or has held a license to practice as a physician assistant [:] or anesthesiologist assistant; and
- (4) Has not been held civilly or criminally liable for malpractice in the District of Columbia or any state or territory of the United States;
- (b) A complete set of fingerprints and written permission authorizing the Board to forward the fingerprints in the manner provided in NRS 633.309;
- —(c) An affidavit stating that the information contained in the application and any accompanying material is true and correct;
- (d) The application and initial license fee specified in this chapter; and
- (e) Any other information required by the Board.
- 3. Not later than 15 business days after receiving an application for a license by endorsement to practice as a physician assistant or anesthesiologist assistant pursuant to this section, the Board shall provide written notice to the applicant of any additional information required by the Board to consider the application. Unless the Board denies the application for good cause, the Board shall approve the application and issue a license by endorsement to practice as a physician assistant or anesthesiologist assistant to the applicant not later than:
- (a) Forty-five days after receiving the application; or
- —(b) Ten days after the Board receives a report on the applicant's background based on the submission of the applicant's fingerprints,

## → whichever occurs later.

- 4. A license by endorsement to practice as a physician assistant or anesthesiologist assistant may be issued at a meeting of the Board or between its meetings by the President and Executive Director of the Board. Such an action shall be deemed to be an action of the Board. (Deleted by amendment.)
- Sec. 58. [NRS 633.4336 is hereby amended to read as follows:
- <u>633.4336</u> 1. The Board may issue a license by endorsement to practice as a physician assistant or anesthesiologist assistant to an applicant who meets the requirements set forth in this section. An applicant may submit to the Board an application for such a license if the applicant:
- (a) Holds a corresponding valid and unrestricted license to practice as a physician assistant or anesthesiologist assistant in the District of Columbia or any state or territory of the United States;
- (b) Is certified in a specialty recognized by the American Board of Medical Specialties or the American Ostcopathic Association [;] if the applicant is seeking to practice as a physician assistant, or is certified by the National Commission for Certification of Anesthesiologist Assistants if the applicant is seeking to practice as an anesthesiologist assistant; and
- (c) Is an active member of, or the spouse of an active member of, the Armed Forces of the United States, a veteran or the surviving spouse of a veteran.
- 2. An applicant for a license by endorsement pursuant to this section must submit to the Board with his or her application:
- (a) Proof satisfactory to the Board that the applicant:
- (1) Satisfies the requirements of subsection 1;

- (2) Is a citizen of the United States or otherwise has the legal right to work in the United States:
- (3) Has not been disciplined and is not currently under investigation by the corresponding regulatory authority of the District of Columbia or the state or territory in which the applicant holds a license to practice as a physician assistant [;] or anesthesiologist assistant; and
- (4) Has not been held civilly or criminally liable for malpractice in the District of Columbia or any state or territory of the United States:
- (b) A complete set of fingerprints and written permission authorizing the Board to forward the fingerprints in the manner provided in NRS 633.309;
- (e) An affidavit stating that the information contained in the application and any accompanying material is true and correct;
- (d) The application and initial license fee specified in this chapter; and
- (e) Any other information required by the Board.
- 3. Not later than 15 business days after receiving an application for a license by endorsement to practice as a physician assistant or anesthesiologist assistant pursuant to this section, the Board shall provide written notice to the applicant of any additional information required by the Board to consider the application. Unless the Board denies the application for good cause, the Board shall approve the application and issue a license by endorsement to practice as a physician assistant or anesthesiologist assistant to the applicant not later than:
- (a) Forty five days after receiving all the additional information required by the Board to complete the application; or
- (b) Ten days after the Board receives a report on the applicant's background based on the submission of the applicant's fingerprints,

## <del>→ whichever occurs later.</del>

- 4. A license by endorsement to practice as a physician assistant or anesthesiologist assistant may be issued at a meeting of the Board or between its meetings by the President and Executive Director of the Board. Such an action shall be deemed to be an action of the Board.
- 5. At any time before making a final decision on an application for a license by endorsement pursuant to this section, the Board may grant a provisional license authorizing an applicant to practice as a physician assistant or anesthesiologist assistant in accordance with regulations adopted by the Board.
- 6. As used in this section, "veteran" has the meaning ascribed to it in NRS 417.005.] (Deleted by amendment.)
  - Sec. 59. [NRS 633.471 is hereby amended to read as follows:
- —633.471—1. Except as otherwise provided in subsection 8 and NRS 633.491, every holder of a license issued under this chapter, except a temporary or a special license, may renew the license on or before January 1 of each calendar year after its issuance by:
- (a) Applying for renewal on forms provided by the Board;
- (b) Paying the annual license renewal fee specified in this chapter;

- (c) Submitting a list of all actions filed or claims submitted to arbitration or mediation for malpractice or negligence against the holder during the previous vear:
- (d) Submitting evidence to the Board that in the year preceding the application for renewal the holder has attended courses or programs of continuing education approved by the Board in accordance with regulations adopted by the Board totaling a number of hours established by the Board which must not be less than 35 hours nor more than that set in the requirements for continuing medical education of the American Osteopathic Association; and
- (e) Submitting all information required to complete the renewal.
- 2. The Secretary of the Board shall notify each licensee of the requirements for renewal not less than 30 days before the date of renewal.
- 3. The Board shall request submission of verified evidence of completion of the required number of hours of continuing medical education annually from no fewer than one third of the applicants for renewal of a license to practice osteopathic medicine or a license to practice as a physician assistant [.] or anesthesiologist assistant. Upon a request from the Board, an applicant for renewal of a license to practice osteopathic medicine or a license to practice as a physician assistant or anesthesiologist assistant shall submit verified evidence satisfactory to the Board that in the year preceding the application for renewal the applicant attended courses or programs of continuing medical education approved by the Board totaling the number of hours established by the Board.
- 4. The Board shall encourage each holder of a license to practice osteopathic medicine to receive, as a portion of his or her continuing education, training concerning methods for educating patients about how to effectively manage medications, including, without limitation, the ability of the patient to request to have the symptom or purpose for which a drug is prescribed included on the label attached to the container of the drug.
- 5. The Board shall require, as part of the continuing education requirements approved by the Board, the biennial completion by a holder of a license to practice osteopathic medicine of:
- (a) At least 2 hours of continuing education credits in ethics, pain management or addiction care; and
- (b) If the holder of a license to practice osteopathic medicine is a psychiatrist, at least 2 hours of continuing education credits on clinically based suicide prevention and awareness.
- 6. The Board shall encourage each holder of a license to practice osteopathic medicine, other than a psychiatrist, to receive as a portion of his or her continuing education training concerning suicide, including, without limitation, such topics as:
- (a) The skills and knowledge that the licensee needs to detect behaviors that may lead to suicide, including, without limitation, post traumatic stress disorder:

- (b) Approaches to engaging other professionals in suicide intervention; and
   (c) The detection of suicidal thoughts and ideations and the prevention of suicide.
- 7. A holder of a license to practice esteopathic medicine may substitute not more than 2 hours of continuing education credits in the detection of suicidal thoughts and ideations, and the intervention and prevention of suicide for the purposes of satisfying an equivalent requirement for continuing education in othics.
- 8. Members of the Armed Forces of the United States and the United States Public Health Service are exempt from payment of the annual license renewal fee during their active duty status.] (Deleted by amendment.)
  - Sec. 60. INRS 633.473 is hereby amended to read as follows:
- —633.473 —The Board may, by regulation, require each osteopathic physician , [or] physician assistant or anesthesiologist assistant who is registered to dispense controlled substances pursuant to NRS 453.231 to complete at least 1 hour of training relating specifically to the misuse and abuse of controlled substances during each period of licensure. Any licensee may use such training to satisfy 1 hour of any continuing education requirement established by the Board.] (Deleted by amendment.)
  - Sec. 61. INRS 633.481 is hereby amended to read as follows:
- 633.481—1. Except as otherwise provided in subsection 2, if a licensee fails to comply with the requirements of NRS 633.471 within 10 days after the renewal date, the Board shall give 15 days' notice of the failure to renew the license and of the expiration of the license by certified mail to the licensee at the licensee's last known address that is registered with the Board. If the license is not renewed within 15 days after receiving notice, the license expires automatically without any further notice or a hearing and the Board shall file a copy of the notice with the Drug Enforcement Administration of the United States Department of Justice or its successor agency.
- 2. A licensee who fails to meet the continuing education requirements for license renewal may apply to the Board for a waiver of the requirements. The Board may grant a waiver for that year only if the Board finds that the failure is due to a disability, military service, absence from the United States, or circumstances beyond the control of the licensee which are deemed by the Board to excuse the failure.
- 3. A person whose license has expired under this section may apply to the Board for restoration of the license upon:
- (a) Payment of all past due renewal fees and the late payment fee specified in NRS 633.501 [:] or prescribed by regulation of the Board, as applicable:
- (b) Producing verified evidence satisfactory to the Board of completion of the total number of hours of continuing education required for the year preceding the renewal date and for each year succeeding the date of expiration;
   (c) Stating under oath in writing that he or she has not withheld information from the Board which if disclosed would constitute grounds for disciplinary action under this chapter; and

- —(d) Submitting any other information that is required by the Board to restore the license.] (Deleted by amendment.)
- Sec. 62. [NRS 633.491 is hereby amended to read as follows:
- -633.491 1. A licensee who retires from practice is not required annually to renew his or her license after filing with the Board an affidavit stating the date on which he or she retired from practice and any other evidence that the Board may require to verify the retirement.
- 2. An osteopathic physician , [or] physician assistant or anesthesiologist assistant who retires from practice and who desires to return to practice may apply to renew his or her license by paying all back annual license renewal fees from the date of retirement and submitting verified evidence satisfactory to the Board that the licensee has attended continuing education courses or programs approved by the Board which total:
- (a) Twenty-five hours if the licensee has been retired 1 year or less.
- (b) Fifty hours within 12 months of the date of the application if the licensee has been retired for more than 1 year.
- 3. A licensee who wishes to have a license placed on inactive status must provide the Board with an affidavit stating the date on which the licensee will cease the practice of osteopathic medicine or cease to practice as a physician assistant or anesthesiologist assistant in Nevada and any other evidence that the Board may require. The Board shall place the license of the licensee on inactive status upon receipt of:
- (a) The affidavit required pursuant to this subsection; and
- (b) Payment of the inactive license fee prescribed by NRS 633.501.
- 4. An osteopathic physician , [or] physician assistant or anesthesiologist assistant whose license has been placed on inactive status:
- (a) Is not required to annually renew the license.
- (b) Shall annually pay the inactive license fee prescribed by NRS 633 501.
- (c) Shall not practice osteopathic medicine or practice as a physician assistant or anesthesiologist assistant in this State.
- 5. An osteopathic physician, [or] physician assistant or anesthesiologist assistant whose license is on inactive status and who wishes to renew his or her license to practice osteopathic medicine or a license to practice as a physician assistant or anesthesiologist assistant must:
- (a) Provide to the Board verified evidence satisfactory to the Board of completion of the total number of hours of continuing medical education required for:
- (1) The year preceding the date of the application for renewal of the license; and
- (2) Each year after the date the license was placed on inactive status.
- (b) Provide to the Board an affidavit stating that the applicant has not withheld from the Board any information which would constitute grounds for disciplinary action pursuant to this chapter.
- (e) Comply with all other requirements for renewal.] (Deleted by amendment.)

Sec.	63.	INRS	633.5	501	is he	<del>reby</del>	amen	ded	to 1	read	as	foll	O₩	S

-633.501 1. Except as otherwise provided in [subsection 2,] this section, the Board shall charge and collect fees not to exceed the following amounts:

(a) Application and initial license fee for an

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- (b) Annual license renewal fee for an osteopathic
- physician 500
  (e) Temporary license fee 500
- (d) Special or authorized facility license fee 200

- (b) Late payment fee 300
- (i) Application and initial license fee for a physician

- 2. The Board may prorate the initial license fee for a new license issued pursuant to paragraph (a) or (i) of subsection 1 which expires less than 6 months after the date of issuance.
- 3. The cost of any special meeting called at the request of a licensee, an institution, an organization, a state agency or an applicant for licensure must be paid by the person or entity requesting the special meeting. Such a special meeting must not be called until the person or entity requesting the meeting has paid a cash deposit with the Board sufficient to defray all expenses of the meeting.
- 4. If an applicant submits an application for a license by endorsement pursuant to:
- (a) NRS 633.399 or 633.400 and is an active member of, or the spouse of an active member of, the Armed Forces of the United States, a veteran or the surviving spouse of a veteran, the Board shall collect not more than one half of the fee set forth in subsection 1 for the initial issuance of the license. As used in this paragraph, "veteran" has the meaning ascribed to it in NRS 417.005
- (b) NRS 633.4336, the Board shall collect not more than one half of the fee set forth in subsection 1 or prescribed by regulation of the Board, as applicable, for the initial issuance of the license.
- 5. The Board may prescribe by regulation and collect fees for the issuance and renewal of a license as an anesthesiologist assistant.] (Deleted by amendment.)
  - Sec. 64. INRS 633.511 is hereby amended to read as follows:
- <u>633.511</u> 1. The grounds for initiating disciplinary action pursuant to this chapter are:
- (a) Unprofessional conduct.
- (b) Conviction of:

- (1) 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;
- (2) A felony relating to the practice of osteopathic medicine or practice as a physician assistant or anesthesiologist assistant;
- (3) A violation of any of the provisions of NRS 616D.200, 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive:
  - (4) Murder, voluntary manslaughter or mayhem:
- (5) Any felony involving the use of a firearm or other deadly weapon:
- (6) Assault with intent to kill or to commit sexual assault or mayhem;
- (7) Sexual assault, statutory sexual seduction, incest, lewdness, indecent exposure or any other sexually related crime:
- (8) Abuse or neglect of a child or contributory delinquency; or
- (9) Any offense involving moral turpitude.
- (e) The suspension of a license to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant by any other jurisdiction.
- —(d) Malpractice or gross malpractice, which may be evidenced by a claim of malpractice settled against a licensee.
- —(e) Professional incompetence.
- (f) Failure to comply with the requirements of NRS 633.527.
- (g) Failure to comply with the requirements of subsection 3 of NRS 633 471
- (h) Failure to comply with the provisions of NRS 633.694.
- (i) Operation of a medical facility, as defined in NRS 449.0151, at any time during which:
- (1) The license of the facility is suspended or revoked; or
- (2) An act or omission occurs which results in the suspension or revocation of the license pursuant to NRS 449.160.
- This paragraph applies to an owner or other principal responsible for the operation of the facility.
- (i) Failure to comply with the provisions of subsection 2 of NRS 633.322.
- -(k) Signing a blank prescription form.
- (1) Knowingly or willfully 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:
- (1) Was procured through a retail pharmacy licensed pursuant to chapter 639 of NRS;
- (2) 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;
- (3) Is marijuana being used for medical purposes in accordance with chapter 453A of NRS; or

- (4) Is an investigational drug or biological product prescribed to a patient pursuant to NRS 639.3735 or 633.6945.
- (m) Attempting, directly or indirectly, by intimidation, coercion or deception, to obtain or retain a patient or to discourage the use of a second opinion.
- (n) Terminating the medical care of a patient without adequate notice or without making other arrangements for the continued care of the patient.
- (o) 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 knowingly or willfully obstructing or inducing another to obstruct the making or filing of such a record or report.
- (p) 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.
- (q) 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 forcign country.
- (r) Engaging in any act that is unsafe in accordance with regulations adopted by the Board.
- (s) Failure to comply with the provisions of NRS 629.515.
- —(t) Failure to supervise adequately a medical assistant pursuant to the regulations of the Board-
- (u) Failure to obtain any training required by the Board pursuant to NRS 633.473.
- (v) Failure to comply with the provisions of NRS 633.6955.
- (w) Failure to comply with the provisions of NRS 453.163 or 453.164.
- 2. As used in this section, "investigational drug or biological product" has the meaning ascribed to it in NRS 454.351.] (Deleted by amendment.)
- Sec. 65. INRS 633.512 is hereby amended to read as follows:
- 633.512 Any member or agent of the Board may enter any premises in this State where a person who holds a license issued pursuant to the provisions of this chapter practices osteopathic medicine or practices as a physician assistant or anesthesiologist assistant and inspect it to determine whether a violation of any provision of this chapter has occurred, including, without limitation, an inspection to determine whether any person at the premises is practicing osteopathic medicine or practicing as a physician assistant or anesthesiologist assistant without the appropriate license issued pursuant to the provisions of this chapter.] (Deleted by amendment.)
  - Sec. 66. [NRS 633.526 is hereby amended to read as follows:
- -633.526 1. The insurer of an osteopathic physician , [or] physician assistant or anesthesiologist assistant licensed under this chapter shall report to the Board:

- (a) Any action for malpractice against the osteopathic physician , [or] physician assistant or anesthesiologist assistant not later than 45 days after the osteopathic physician , [or] physician assistant or anesthesiologist assistant receives service of a summons and complaint for the action:
- (b) Any claim for malpractice against the osteopathic physician , [or] physician assistant or anesthesiologist assistant that is submitted to arbitration or mediation not later than 45 days after the claim is submitted to arbitration or mediation; and
- (c) Any settlement, award, judgment or other disposition of any action or claim described in paragraph (a) or (b) not later than 45 days after the settlement, award, judgment or other disposition.
- 2. The Board shall report any failure to comply with subsection 1 by an insurer licensed in this State to the Division of Insurance of the Department of Business and Industry. If, after a hearing, the Division of Insurance determines that any such insurer failed to comply with the requirements of subsection 1, the Division may impose an administrative fine of not more than \$10,000 against the insurer for each such failure to report. If the administrative fine is not paid when due, the fine must be recovered in a civil action brought by the Attorney General on behalf of the Division.] (Deleted by amendment.)
- Sec. 67. INRS 633.527 is hereby amended to read as follows:
- <u>633.527 1. An osteopathic physician , [or] physician assistant or anesthesiologist assistant shall report to the Board:</u>
- (a) Any action for malpractice against the osteopathic physician , [or] physician assistant or anesthesiologist assistant not later than 45 days after the osteopathic physician , [or] physician assistant or anesthesiologist assistant receives service of a summons and complaint for the action:
- (b) Any claim for malpractice against the osteopathic physician, [or] physician assistant or anesthesiologist assistant that is submitted to arbitration or mediation not later than 45 days after the claim is submitted to arbitration or mediation:
- (c) Any settlement, award, judgment or other disposition of any action or claim described in paragraph (a) or (b) not later than 45 days after the settlement, award, judgment or other disposition; and
- (d) Any sanctions imposed against the osteopathic physician , [or] physician assistant or anesthesiologist assistant that are reportable to the National Practitioner Data Bank not later than 45 days after the sanctions are imposed.
- 2. If the Board finds that an osteopathic physician, [or] physician assistant or anesthesiologist assistant has violated any provision of this section, the Board may impose a fine of not more than \$5,000 against the osteopathic physician, [or] physician assistant or anesthesiologist assistant for each violation, in addition to any other fines or penalties permitted by law.
- 3. All reports made by an osteopathic physician, [or] physician assistant or anesthesiologist assistant pursuant to this section are public records.] (Deleted by amendment.)

- Sec. 68. [NRS 633.528 is hereby amended to read as follows:
- 633.528 If the Board receives a report pursuant to the provisions of NRS 633.526, 633.527, 690B.250 or 690B.260 indicating that a judgment has been rendered or an award has been made against an osteopathic physician, [or] physician assistant or anesthesiologist assistant regarding an action or claim for malpractice or that such an action or claim against the osteopathic physician , [or] physician assistant or anesthesiologist assistant has been resolved by settlement, the Board shall conduct an investigation to determine whether to discipline the osteopathic physician , [or] physician assistant or anesthesiologist assistant or anesthesiologist assistant regarding the action or claim, unless the Board has already commenced or completed such an investigation regarding the action or claim before it receives the report.] (Deleted by amendment.)
- Sec. 69. [NRS 633.529 is hereby amended to read as follows:
- 633.529—1. Notwithstanding the provisions of chapter 622A of NRS, if the Board or an investigative committee of the Board receives a report pursuant to the provisions of NRS 633.526, 633.527, 690B.250 or 690B.260 indicating that a judgment has been rendered or an award has been made against an osteopathic physician , [or] physician assistant or anesthesiologist assistant regarding an action or claim for malpractice, or that such an action or claim against the osteopathic physician , [or] physician assistant or anesthesiologist assistant the osteopathic physician , [or] physician assistant or anesthesiologist assistant to undergo a mental or physician assistant or anesthesiologist assistant to undergo a mental or physicial examination or any other examination designated by the Board to test his or her competence to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant, as applicable. An examination conducted pursuant to this subsection must be conducted by a person designated by the Board.
- 2. For the purposes of this section:
- (a) An osteopathic physician , [or] physician assistant or anesthesiologist assistant who applies for a license or who holds a license under this chapter is deemed to have given consent to submit to a mental or physical examination or an examination testing his or her competence to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant, as applicable, pursuant to a written order by the Board.
- (b) The testimony or reports of a person who conducts an examination of an osteopathic physician, [or] physician assistant or anesthesiologist assistant on behalf of the Board pursuant to this section are not privileged communications.] (Deleted by amendment.)
  - Sec. 70. [NRS 633.531 is hereby amended to read as follows:
- 633.531—1. The Board or any of its members, or a medical review panel of a hospital or medical society, which becomes aware of any conduct by an osteopathic physician, [or] physician assistant or anesthesiologist assistant that may constitute grounds for initiating disciplinary action shall, and any other person who is so aware may, file a written complaint specifying the relevant facts with the Board.

- 2. The Board shall retain all complaints filed with the Board pursuant to this section for at least 10 years, including, without limitation, any complaints not acted upon.] (Deleted by amendment.)
  - Sec. 71. [NRS 633.533 is hereby amended to read as follows:
- -633.533 1. Except as otherwise provided in subsection 2, any person may file with the Board a complaint against an osteopathic physician , [or] physician assistant or anesthesiologist assistant on a form provided by the Board. The form may be submitted in writing or electronically. If a complaint is submitted anonymously, the Board may accept the complaint but may refuse to consider the complaint if the lack of the identity of the complainant makes processing the complaint impossible or unfair to the person who is the subject of the complaint.
- 2. Any licensee, medical school or medical facility that becomes aware that a person practicing osteopathic medicine or practicing as a physician assistant or anesthesiologist assistant in this State has, is or is about to become engaged in conduct which constitutes grounds for initiating disciplinary action shall file a written complaint with the Board within 30 days after becoming aware of the conduct.
- 3. Except as otherwise provided in subsection 4, any hospital, clinic or other medical facility licensed in this State, or medical society, shall file a written report with the Board of any change in the privileges of an osteopathic physician , [or] physician assistant or anesthesiologist assistant to practice while the osteopathic physician , [or] physician assistant or anesthesiologist assistant is under investigation, and the outcome of any disciplinary action taken by the facility or society against the osteopathic physician , [or] physician assistant or anesthesiologist assistant concerning the care of a patient or the competency of the osteopathic physician , [or] physician assistant or anesthesiologist assistant, within 30 days after the change in privileges is made or disciplinary action is taken.
- 4. A hospital, clinic or other medical facility licensed in this State, or medical society, shall report to the Board within 5 days after a change in the privileges of an osteopathic physician , [or] physician assistant or anesthesiologist assistant that is based on:
- (a) An investigation of the mental, medical or psychological competency of the osteopathic physician , [or] physician assistant or anesthesiologist assistant; or
- (b) Suspected or alleged substance abuse in any form by the osteopathic physician , [or] physician assistant or anesthesiologist assistant.
- 5. The Board shall report any failure to comply with subsection 3 or 4 by a hospital, clinic or other medical facility licensed in this State to the Division of Public and Behavioral Health of the Department of Health and Human Services. If, after a hearing, the Division determines that any such facility or society failed to comply with the requirements of this subsection, the Division may impose an administrative fine of not more than \$10,000 against the facility or society for each such failure to report. If the administrative fine is not paid

when due, the fine must be recovered in a civil action brought by the Attorney General on behalf of the Division.

- 6. The clerk of every court shall report to the Board any finding, judgment or other determination of the court that an osteopathic physician , [or] physician assistant or anesthesiologist assistant:
- (a) Is mentally ill;
- (b) Is mentally incompetent;
- (e) Has been convicted of a felony or any law governing controlled substances or dangerous drugs;
- (d) Is guilty of abuse or fraud under any state or federal program providing medical assistance; or
- (e) Is liable for damages for malpractice or negligence,
- within 45 days after the finding, judgment or determination.] (Deleted by amendment.)
  - Sec. 72. [NRS 633.542 is hereby amended to read as follows:
- -633.542 Unless the Board determines that extenuating circumstances exist, the Board shall forward to the appropriate law enforcement agency any substantiated information submitted to the Board concerning a person who practices or offers to practice osteopathic medicine or as a physician assistant or anesthesiologist assistant without the appropriate license issued pursuant to the provisions of this chapter.] (Deleted by amendment.)
- Sec. 73. [NRS 633.561 is hereby amended to read as follows:
- 633.561 1. Notwithstanding the provisions of chapter 622A of NRS. if the Board or a member of the Board designated to review a complaint pursuant to NRS 633.541 has reason to believe that the conduct of an externathic physician, [or] physician assistant or anesthesiologist assistant has raised a reasonable question as to his or her competence to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant as applicable, with reasonable skill and safety to patients, the Board or the member designated by the Board may require the osteopathic physician. for physical examination conducted by physicians designated by the Board. If the osteopathic physician , [or] physician assistant or anesthesiologist assistant participates in a diversion program, the diversion program may exchange with any authorized member of the staff of the Board any information concerning the recovery and participation of the osteopathic physician, [or] physician assistant or anesthesiologist assistant in the diversion program. As used in this subsection, "diversion program" means a program approved by the Board to correct an osteopathic physician's , [or] physician assistant's anesthesiologist assistant's alcohol or drug dependence or any impairment.
- 2. For the purposes of this section:
- (a) An osteopathic physician, [or] physician assistant or anesthesiologist assistant who is licensed under this chapter and who accepts the privilege of practicing osteopathic medicine or practicing as a physician assistant or

anesthesiologist assistant in this State is deemed to have given consent to submit to a mental or physical examination pursuant to a written order by the Board.

- —(b) The testimony or examination reports of the examining physicians are not privileged communications.
- 3. Except in extraordinary circumstances, as determined by the Board, the failure of an osteopathic physician, [or] physician assistant or anesthesiologist assistant who is licensed under this chapter to submit to an examination pursuant to this section constitutes an admission of the charges against the osteopathic physician, [or] physician assistant or anesthesiologist assistant.] (Deleted by amendment.)
- Sec. 74. [NRS 633.571 is hereby amended to read as follows:
- 633.571—Notwithstanding the provisions of chapter 622A of NRS, if the Board has reason to believe that the conduct of any osteopathic physician, [or] physician assistant or anesthesiologist assistant has raised a reasonable question as to his or her competence to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant, as applicable, with reasonable skill and safety to patients, the Board may require the osteopathic physician, [or] physician assistant or anesthesiologist assistant to submit to an examination for the purposes of determining his or her competence to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant, as applicable, with reasonable skill and safety to patients.] (Deleted by amendment.)
- Sec. 75. [NRS 633.581 is hereby amended to read as follows:
- 633.581 1. If an investigation by the Board of an osteopathic physician , [or] physician assistant or anesthesiologist assistant reasonably determines that the health, safety or welfare of the public or any patient served by the osteopathic physician , [or] physician assistant or anesthesiologist assistant is at risk of imminent or continued harm, the Board may summarily suspend the license of the licensee pending the conclusion of a hearing to consider a formal complaint against the licensee. The order of summary suspension may be issued only by the Board or an investigative committee of the Board.
- 2. If the Board or an investigative committee of the Board issues an order summarily suspending the license of a licensee pursuant to subsection 1, the Board shall hold a hearing not later than 60 days after the date on which the order is issued, unless the Board and the licensee mutually agree to a longer period, to determine whether a reasonable basis exists to continue the suspension of the licensee pending the conclusion of a hearing to consider a formal complaint against the licensee. If no formal complaint against the licensee is pending before the Board on the date on which a hearing is held pursuant to this section, the Board shall reinstate the license of the licensee.
- 3. Notwithstanding the provisions of chapter 622A of NRS, if the Board or an investigative committee of the Board issues an order summarily suspending the license of an osteopathic physician, [or] physician assistant or anesthesiologist assistant pursuant to subsection 1 and the Board requires the

licensee to submit to a mental or physical examination or a medical competency examination, the examination must be conducted and the results must be obtained not later than 30 days after the order is issued.] (Deleted by amendment.)

Sec. 76. [NRS 633.591 is hereby amended to read as follows:

—633.591—Notwithstanding the provisions of chapter 622A of NRS, if the Board issues an order summarily suspending the license of an osteopathic physician , [or] physician assistant or anesthesiologist assistant pending proceedings for disciplinary action, including, without limitation, a summary suspension pursuant to NRS 233B.127, the court shall not stay that order unless the Board fails to institute and determine such proceedings as promptly as the requirements for investigation of the case reasonably allow.] (Deleted by amendment.)

Sec. 77. [NRS 633.601 is hereby amended to read as follows:

—633.601—1. In addition to any other remedy provided by law, the Board, through an officer of the Board or the Attorney General, may apply to any court of competent jurisdiction to enjoin any unprofessional conduct of an osteopathic physician , [or] physician assistant or anesthesiologist assistant which is harmful to the public or to limit the practice of the osteopathic physician , [or] physician assistant or anesthesiologist assistant or suspend his or her license to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant, as applicable, as provided in this section.

- 2. The court in a proper case may issue a temporary restraining order or a preliminary injunction for such purposes:
- (a) Without proof of actual damage sustained by any person, this provision being a preventive as well as punitive measure; and
- (b) Pending proceedings for disciplinary action by the Board. Notwithstanding the provisions of chapter 622A of NRS, such proceedings shall be instituted and determined as promptly as the requirements for investigation of the case reasonably allow.] (Deleted by amendment.)
- Sec. 78. [NRS 633.631 is hereby amended to read as follows:
  633.631 Except as otherwise provided in subsection 2 and chapter 622A of NRS:
- 1. Service of process made under this chapter must be either personal or by registered or certified mail with return receipt requested, addressed to the osteopathic physician, [or] physician assistant or anesthesiologist assistant at his or her last known address, as indicated in the records of the Board. If personal service cannot be made and if mail notice is returned undelivered, the President or Secretary of the Board shall cause a notice of hearing to be published once a week for 4 consecutive weeks in a newspaper published in the county of the last known address of the osteopathic physician, [or] physician assistant or anesthesiologist assistant or, if no newspaper is published in that county, in a newspaper widely distributed in that county.

- 2. In lieu of the methods of service of process set forth in subsection 1, if the Board obtains written consent from the osteopathic physician , [or] physician assistant or anesthesiologist assistant, service of process under this chapter may be made by electronic mail on the licensee at an electronic mail address designated by the licensee in the written consent.
- 3. Proof of service of process or publication of notice made under this chapter must be filed with the Secretary of the Board and may be recorded in the minutes of the Board.] (Deleted by amendment.)
  - Sec. 79. [NRS 633.641 is hereby amended to read as follows:
- -633.641 Notwithstanding the provisions of chapter 622A of NRS, in any disciplinary proceeding before the Board, a hearing officer or a panel:
- 1. Proof of actual injury need not be established where the formal complaint charges deceptive or unethical professional conduct or medical practice harmful to the public.
- 2. A certified copy of the record of a court or a licensing agency showing a conviction or the suspension or revocation of a license to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant is conclusive evidence of its occurrence. (Deleted by amendment.)
- Sec. 80. [NRS 633.651 is hereby amended to read as follows:
- <u>633.651 1. If the Board finds a person guilty in a disciplinary proceeding, it shall by order take one or more of the following actions:</u>
- (a) Place the person on probation for a specified period or until further order of the Board.
- (b) Administer to the person a public reprimand.
- (c) Limit the practice of the person to, or by the exclusion of, one or more specified branches of osteopathic medicine.
- —(d) Suspend the license of the person to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant for a specified period or until further order of the Board.
- (e) Revoke the license of the person to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant.
- (f) Impose a fine not to exceed \$5,000 for each violation.
- (g) Require supervision of the practice of the person.
- (h) Require the person to perform community service without compensation.
- (i) Require the person to complete any training or educational requirements specified by the Board.
- (j) Require the person to participate in a program to correct alcohol or drug dependence or any other impairment.
- The order of the Board may contain any other terms, provisions or conditions as the Board deems proper and which are not inconsistent with law.
- 2. The Board shall not administer a private reprimand.
- 3. An order that imposes discipline and the findings of fact and conclusions of law supporting that order are public records.] (Deleted by amendment.)

- Sec. 81. [NRS 633.671 is hereby amended to read as follows:
- -633.671 1. Any person who has been placed on probation or whose license has been limited, suspended or revoked by the Board is entitled to judicial review of the Board's order as provided by law.
- 2. Every order of the Board which limits the practice of osteopathic medicine or the practice of a physician assistant or anesthesiologist assistant or suspends or revokes a license is effective from the date on which the order is issued by the Board until the date the order is modified or reversed by a final judgment of the court.
- -3. The district court shall give a petition for judicial review of the Board's order priority over other civil matters which are not expressly given priority by law.] (Deleted by amendment.)
- Sec. 82. INRS 633.681 is hereby amended to read as follows:
- <del>633.681 1. Any person:</del>
- (a) Whose practice of osteopathic medicine or practice as a physician assistant or anesthesiologist assistant has been limited; or
- (b) Whose license to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant has been:
- (1) Suspended until further order; or
- (2) Revoked,
- → may apply to the Board after a reasonable period for removal of the limitation or suspension or may apply to the Board pursuant to the provisions of chapter 622A of NRS for reinstatement of the revoked license.
- 2. In hearing the application, the Board:
- (a) May require the person to submit to a mental or physical examination by physicians whom it designates and submit such other evidence of changed conditions and of fitness as it deems proper;
- (b) Shall determine whether under all the circumstances the time of the application is reasonable; and
- —(e) May deny the application or modify or rescind its order as it deems the evidence and the public safety warrants.] (Deleted by amendment.)
  - Sec. 83. [NRS 633.691 is hereby amended to read as follows:
- —633.691—1. In addition to any other immunity provided by the provisions of chapter 622A of NRS, the Board, a medical review panel of a hospital, a hearing officer, a panel of the Board, an employee or volunteer of a diversion program specified in NRS 633.561, or any person who or other organization which initiates or assists in any lawful investigation or proceeding concerning the discipline of an osteopathic physician , [or] physician assistant or amesthesiologist assistant for gross malpractice, malpractice, professional incompetence or unprofessional conduct is immune from any civil action for such initiation or assistance or any consequential damages, if the person or organization acted in good faith.
- 2. Except as otherwise provided in subsection 3, the Board shall not commence an investigation, impose any disciplinary action or take any other

adverse action against an osteopathic physician , [or] physician assistant or

- (a) Disclosing to a governmental entity a violation of a law, rule or regulation by an applicant for a license to practice esteopathic medicine or to practice as a physician assistant or anesthesiologist assistant, or by an esteopathic physician , [or] physician assistant or anesthesiologist assistant; est
- (b) Cooperating with a governmental entity that is conducting an investigation, hearing or inquiry into such a violation, including, without limitation, providing testimony concerning the violation.
- 3. An osteopathic physician , [or] physician assistant or anesthesiologist assistant who discloses information to or cooperates with a governmental entity pursuant to subsection 2 with respect to the violation of any law, rule or regulation by the osteopathic physician , [or] physician assistant or anesthesiologist assistant is subject to investigation and any other administrative or disciplinary action by the Board under the provisions of this chapter for such violation.
- 4. As used in this section, "governmental entity" includes, without limitation:
- (a) A federal, state or local officer, employee, agency, department, division, bureau, board, commission, council, authority or other subdivision or entity of a public employer;
- (b) A federal, state or local employee, committee, member or commission of the Legislative Branch of Government;
- (c) A federal, state or local representative, member or employee of a legislative body or a county, town, village or any other political subdivision or civil division of the State:
- (d) A federal, state or local law enforcement agency or prosecutorial office, or any member or employee thereof, or police or peace officer; and
- (e) A federal, state or local judiciary, or any member or employee thereof, or grand or petit jury.] (Deleted by amendment.)
  - Sec. 84. INRS 633.701 is hereby amended to read as follows:
- 633.701 The filing and review of a complaint and any subsequent disposition by the Board, the member designated by the Board to review a complaint pursuant to NRS 633.541 or any reviewing court do not preclude:
- 1. Any measure by a hospital or other institution to limit or terminate the privileges of an osteopathic physician , [or] physician assistant or anesthesiologist assistant according to its rules or the custom of the profession. No civil liability attaches to any such action taken without malice even if the ultimate disposition of the complaint is in favor of the osteopathic physician , [or] physician assistant or anesthesiologist assistant.
- 2. Any appropriate criminal prosecution by the Attorney General or a district attorney based upon the same or other facts.] (Deleted by amendment.)

- Sec. 85. [NRS 633.711 is hereby amended to read as follows:
- —633.711—1. The Board, through an officer of the Board or the Attorney-General, may maintain in any court of competent jurisdiction a suit for an injunction against any person:
- (a) Practicing osteopathic medicine or practicing as a physician assistant or anesthesiologist assistant without a valid license to practice osteopathic medicine or to practice as a physician assistant or anesthesiologist assistant [;], as applicable; or
- (b) Providing services through telehealth, as defined in NRS 629.515, without a valid license.
- 2. An injunction issued pursuant to subsection 1:
- (a) May be issued without proof of actual damage sustained by any person, this provision being a preventive as well as a punitive measure.
- —(b) Must not relieve such person from criminal prosecution for practicing without such a license.] (Deleted by amendment.)
  - Sec. 86. [NRS 633.721 is hereby amended to read as follows:
- -633.721 In a criminal complaint charging any person with practicing osteopathic medicine or practicing as a physician assistant or anesthesiologist assistant without a valid license issued by the Board, it is sufficient to charge that the person did, upon a certain day, and in a certain county of this State, engage in such practice without having a valid license to do so, without averring any further or more particular facts concerning the violation.] (Deleted by amendment.)
  - Sec. 87. [NRS 633.741 is hereby amended to read as follows:
- 633.741 1. It is unlawful for any person to:
- (a) Except as otherwise provided in NRS 629,091, practice:
- (1) Osteopathic medicine without a valid license to practice osteopathic medicine under this chanter:
- (2) As a physician assistant or anesthesiologist assistant without a valid license under this chapter; or
- (3) Beyond the limitations ordered upon his or her practice by the Board or the court:
- (b) Present as his or her own the diploma, license or credentials of another;
- —(c) Give either false or forged evidence of any kind to the Board or any of its members in connection with an application for a license;
- (d) File for record the license issued to another, falsely claiming himself or herself to be the person named in the license, or falsely claiming himself or herself to be the person entitled to the license;
- (e) Practice osteopathic medicine or practice as a physician assistant or anesthesiologist assistant under a false or assumed name or falsely personate another licensee of a like or different name:
- (f) Hold himself or herself out as a physician assistant or anesthesiologist assistant or use any other term indicating or implying that he or she is a physician assistant [,] or anesthesiologist assistant, as applicable, unless the person has been licensed by the Board as provided in this chapter; or

- (g) Supervise a person as a physician assistant or anesthesiologist assistant before such person is licensed as provided in this chapter.
- 2. A person who violates any provision of subsection 1:
- (a) If no substantial bodily harm results, is guilty of a category D folony; or
- (b) If substantial bodily harm results, is guilty of a category C folony,
- + and shall be punished as provided in NRS 193.130, unless a greater penalty is provided pursuant to NRS 200.830 or 200.840.
- 3. In addition to any other penalty prescribed by law, if the Board determines that a person has committed any act described in subsection 1, the Board may:
- (a) Issue and serve on the person an order to cease and desist until the person obtains from the Board the proper license or otherwise demonstrates that he or she is no longer in violation of subsection 1. An order to cease and desist must include a telephone number with which the person may contact the Board.
- (b) Issue a citation to the person. A citation issued pursuant to this paragraph must be in writing, describe with particularity the nature of the violation and inform the person of the provisions of this paragraph. Each activity in which the person is engaged constitutes a separate offense for which a separate citation may be issued. To appeal a citation, the person must submit a written request for a hearing to the Board not later than 30 days after the date of issuance of the citation.
- (e) Assess against the person an administrative fine of not more than \$5,000.
- —(d) Impose any combination of the penalties set forth in paragraphs (a), (b) and (e).] (Deleted by amendment.)
- Sec. 88. [NRS 639.0125 is hereby amended to read as follows:
- 639.0125 "Practitioner" means:
- -1. A physician, dentist, veterinarian or podiatric physician who holds a license to practice his or her profession in this State;
- A hospital, pharmacy or other institution licensed, registered or otherwise permitted to distribute, dispense, conduct research with respect to or administer drugs in the course of professional practice or research in this State;
   An advanced practice registered nurse who has been authorized to
- prescribe controlled substances, poisons, dangerous drugs and devices;
- 4. A physician assistant or anesthesiologist assistant who:
- (a) Holds a license issued by the Board of Medical Examiners; and
- —(b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances, poisons, dangerous drugs or devices under the supervision of a physician as required by chapter 630 of NRS;
- -5. A physician assistant or anesthesiologist assistant who:
- (a) Holds a license issued by the State Board of Osteopathic Medicine; and
- (b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances, poisons, dangerous drugs or devices under the supervision of an osteopathic physician as required by chapter 633 of NRS; or

- 6. An optometrist who is certified by the Nevada State Board of Optometry to prescribe and administer therapeutic pharmaceutical agents pursuant to NRS 636.288, when the optometrist prescribes or administers therapeutic pharmaceutical agents within the scope of his or her certification.] (Deleted by amendment.)
  - Sec. 89. [NRS 639.1373 is hereby amended to read as follows:
- —639.1373—1. A physician assistant or anesthesiologist assistant licensed pursuant to chapter 630 or 633 of NRS may, if authorized by the Board [,] and consistent with the provisions of chapter 630 or 633 of NRS, as applicable, possess, administer, prescribe or dispense controlled substances, or possess, administer, prescribe or dispense poisons, dangerous drugs or devices in or out of the presence of his or her supervising physician or supervising anesthesiologist only to the extent and subject to the limitations specified in the registration certificate issued to the physician assistant or anesthesiologist assistant by the Board pursuant to this section.
- 2. Each physician assistant or anesthesiologist assistant licensed pursuant to chapter 630 or 633 of NRS who is authorized by his or her physician assistant's or anesthesiologist assistant's license issued by the Board of Medical Examiners or by the State Board of Osteopathic Medicine, respectively, to possess, administer, prescribe or dispense controlled substances, or to possess, administer, prescribe or dispense poisons, dangerous drugs or devices must apply for and obtain a registration certificate from the Board, pay a fee to be set by regulations adopted by the Board and pass an examination administered by the Board on the law relating to pharmacy before the physician assistant or anesthesiologist assistant can possess, administer, prescribe or dispense controlled substances, or possess, administer, prescribe or dispense poisons, dangerous drugs or devices.
- 3. The Board shall consider each application separately and may, even though the physician assistant's or anesthesiologist assistant's license issued by the Board of Medical Examiners or by the State Board of Osteopathic Medicine authorizes the physician assistant or anesthesiologist assistant to possess, administer, prescribe or dispense controlled substances, or to possess, administer, prescribe or dispense poisons, dangerous drugs and devices:
- (a) Refuse to issue a registration certificate;
- (b) Issue a registration certificate limiting the authority of the physician assistant or anesthesiologist assistant to possess, administer, prescribe or dispense controlled substances, or to possess, administer, prescribe or dispense poisons, dangerous drugs or devices, the area in which the physician assistant or anesthesiologist assistant may possess controlled substances, poisons, dangerous drugs and devices, or the kind and amount of controlled substances, poisons, dangerous drugs and devices; or
- (c) Issue a registration certificate imposing other limitations or restrictions which the Board feels are necessary and required to protect the health, safety and welfare of the public.

- 4. If the registration of the physician assistant *or anesthesiologist assistant* licensed pursuant to chapter 630 or 633 of NRS is suspended or revoked, the physician's controlled substance registration may also be suspended or revoked.
- 5. The Board shall adopt regulations controlling the maximum amount to be administered, possessed and dispensed, and the storage, security, recordkeeping and transportation of controlled substances and the maximum amount to be administered, possessed, prescribed and dispensed and the storage, security, recordkeeping and transportation of poisons, dangerous drugs and devices by physician assistants or anesthesiologist assistants licensed pursuant to chapter 630 or 633 of NRS. In the adoption of those regulations, the Board shall consider, but is not limited to, the following:
- —(a) The area in which the physician assistant or anesthesiologist assistant is to operate;
- (b) The population of that area;
- (e) The experience and training of the physician assistant or anesthesiologist assistant;
- (d) The distance to the nearest hospital and physician; and
- (e) The effect on the health, safety and welfare of the public.
- 6. For the purposes of this section [, the term "supervising]:
- (a) "Supervising anesthesiologist" has the meaning ascribed to it in sections 6 and 42 of this act.
- (b) "Supervising physician" [includes a supervising osteopathic physician as defined in chapter 633 of NRS.] has the meaning ascribed to it in NRS 630.025 and 633.123.] (Deleted by amendment.)
  - Sec. 90. NRS 652.210 is hereby amended to read as follows:
- 652.210 1. Except as otherwise provided in subsection 2 and NRS 126.121 and 652.186, no person other than a licensed physician, a licensed optometrist, a licensed practical nurse, a registered nurse, a perfusionist, a physician assistant *for anesthesiologist assistant*} licensed pursuant to chapter 630 or 633 of NRS, *a licensed anesthesiologist assistant*, a certified advanced emergency medical technician, a certified paramedic, a practitioner of respiratory care licensed pursuant to chapter 630 of NRS or a licensed dentist may manipulate a person for the collection of specimens. The persons described in this subsection may perform any laboratory test which is classified as a waived test pursuant to Subpart A of Part 493 of Title 42 of the Code of Federal Regulations without obtaining certification as an assistant in a medical laboratory pursuant to NRS 652.127.
- 2. The technical personnel of a laboratory may collect blood, remove stomach contents, perform certain diagnostic skin tests or field blood tests or collect material for smears and cultures.
  - Sec. 91. NRS 41.504 is hereby amended to read as follows:
- 41.504 1. Any physician, physician assistant, *anesthesiologist assistant* or registered nurse who in good faith gives instruction or provides supervision to an emergency medical attendant, physician assistant, *anesthesiologist*

assistant or registered nurse, at the scene of an emergency or while transporting an ill or injured person from the scene of an emergency, is not liable for any civil damages as a result of any act or omission, not amounting to gross negligence, in giving that instruction or providing that supervision.

- 2. An emergency medical attendant, physician assistant, anesthesiologist assistant, registered nurse or licensed practical nurse who obeys an instruction given by a physician, physician assistant, anesthesiologist assistant, registered nurse or licensed practical nurse and thereby renders emergency care, at the scene of an emergency or while transporting an ill or injured person from the scene of an emergency, is not liable for any civil damages as a result of any act or omission, not amounting to gross negligence, in rendering that emergency care.
- 3. As used in this section, "emergency medical attendant" means a person licensed as an attendant or certified as an emergency medical technician, advanced emergency medical technician or paramedic pursuant to chapter 450B of NRS.
  - Sec. 92. NRS 41.505 is hereby amended to read as follows:
- 41.505 1. Any person licensed under the provisions of chapter 630, 632 or 633 of NRS and any person who holds an equivalent license issued by another state, who renders emergency care or assistance, including, without limitation, emergency obstetrical care or assistance, in an emergency, gratuitously and in good faith, is not liable for any civil damages as a result of any act or omission, not amounting to gross negligence, by that person in rendering the emergency care or assistance or as a result of any failure to act, not amounting to gross negligence, to provide or arrange for further medical treatment for the injured or ill person. This section does not excuse a physician, physician assistant , anesthesiologist assistant or nurse from liability for damages resulting from that person's acts or omissions which occur in a licensed medical facility relative to any person with whom there is a preexisting relationship as a patient.
- 2. Any person licensed under the provisions of chapter 630, 632 or 633 of NRS and any person who holds an equivalent license issued by another state who:
  - (a) Is retired or otherwise does not practice on a full-time basis; and
- (b) Gratuitously and in good faith, renders medical care within the scope of that person's license to an indigent person,
- is not liable for any civil damages as a result of any act or omission by that person, not amounting to gross negligence or reckless, willful or wanton conduct, in rendering that care.
- 3. Any person licensed to practice medicine under the provisions of chapter 630 or 633 of NRS or licensed to practice dentistry under the provisions of chapter 631 of NRS who renders care or assistance to a patient for a governmental entity or a nonprofit organization is not liable for any civil damages as a result of any act or omission by that person in rendering that care or assistance if the care or assistance is rendered gratuitously, in good faith and

in a manner not amounting to gross negligence or reckless, willful or wanton conduct.

- 4. As used in this section, "gratuitously" has the meaning ascribed to it in NRS 41.500.
  - Sec. 93. NRS 41A.017 is hereby amended to read as follows:
- 41A.017 "Provider of health care" means a physician licensed pursuant to chapter 630 or 633 of NRS, physician assistant, *anesthesiologist assistant*, dentist, licensed nurse, dispensing optician, optometrist, registered physical therapist, podiatric physician, licensed psychologist, chiropractor, doctor of Oriental medicine, medical laboratory director or technician, licensed dietitian or a licensed hospital, clinic, surgery center, physicians' professional corporation or group practice that employs any such person and its employees.

Sec. 94. NRS 200.471 is hereby amended to read as follows:

200.471 1. As used in this section:

- (a) "Assault" means:
- (1) Unlawfully attempting to use physical force against another person; or
- (2) Intentionally placing another person in reasonable apprehension of immediate bodily harm.
  - (b) "Officer" means:
  - (1) A person who possesses some or all of the powers of a peace officer;
- (2) A person employed in a full-time salaried occupation of fire fighting for the benefit or safety of the public;
  - (3) A member of a volunteer fire department;
  - (4) A jailer, guard or other correctional officer of a city or county jail;
- (5) A justice of the Supreme Court, judge of the Court of Appeals, district judge, justice of the peace, municipal judge, magistrate, court commissioner, master or referee, including a person acting pro tempore in a capacity listed in this subparagraph; or
- (6) An employee of the State or a political subdivision of the State whose official duties require the employee to make home visits.
- (c) "Provider of health care" means a physician, a medical student, a perfusionist, [or] a physician assistant or anesthesiologist assistant licensed pursuant to chapter 630 of NRS, a practitioner of respiratory care, a homeopathic physician, an advanced practitioner of homeopathy, a homeopathic assistant, an osteopathic physician, a physician assistant for amesthesiologist assistant] licensed pursuant to chapter 633 of NRS, a podiatric physician, a podiatry hygienist, a physical therapist, a medical laboratory technician, an optometrist, a chiropractor, a chiropractor's assistant, a doctor of Oriental medicine, a nurse, a student nurse, a certified nursing assistant, a nursing assistant trainee, a medication aide certified, a dentist, a dental student, a dental hygienist, a dental hygienist student, a pharmacist, a pharmacy student, an intern pharmacist, an attendant on an ambulance or air ambulance, a psychologist, a social worker, a marriage and family therapist, a marriage and family therapist intern, a clinical professional counselor, a

clinical professional counselor intern, a licensed dietitian, an emergency medical technician, an advanced emergency medical technician and a paramedic.

- (d) "School employee" means a licensed or unlicensed person employed by a board of trustees of a school district pursuant to NRS 391.100 or 391.281.
  - (e) "Sporting event" has the meaning ascribed to it in NRS 41.630.
  - (f) "Sports official" has the meaning ascribed to it in NRS 41.630.
  - (g) "Taxicab" has the meaning ascribed to it in NRS 706.8816.
  - (h) "Taxicab driver" means a person who operates a taxicab.
- (i) "Transit operator" means a person who operates a bus or other vehicle as part of a public mass transportation system.
  - 2. A person convicted of an assault shall be punished:
- (a) If paragraph (c) or (d) does not apply to the circumstances of the crime and the assault is not made with the use of a deadly weapon or the present ability to use a deadly weapon, for a misdemeanor.
- (b) If the assault is made with the use of a deadly weapon or the present ability to use a deadly weapon, for a category B felony by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years, or by a fine of not more than \$5,000, or by both fine and imprisonment.
- (c) If paragraph (d) does not apply to the circumstances of the crime and if the assault is committed upon an officer, a provider of health care, a school employee, a taxicab driver or a transit operator who is performing his or her duty or upon a sports official based on the performance of his or her duties at a sporting event and the person charged knew or should have known that the victim was an officer, a provider of health care, a school employee, a taxicab driver, a transit operator or a sports official, for a gross misdemeanor, unless the assault is made with the use of a deadly weapon or the present ability to use a deadly weapon, then for a category B felony by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years, or by a fine of not more than \$5,000, or by both fine and imprisonment.
- (d) If the assault is committed upon an officer, a provider of health care, a school employee, a taxicab driver or a transit operator who is performing his or her duty or upon a sports official based on the performance of his or her duties at a sporting event by a probationer, a prisoner who is in lawful custody or confinement or a parolee, and the probationer, prisoner or parolee charged knew or should have known that the victim was an officer, a provider of health care, a school employee, a taxicab driver, a transit operator or a sports official, for a category D felony as provided in NRS 193.130, unless the assault is made with the use of a deadly weapon or the present ability to use a deadly weapon, then for a category B felony by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years, or by a fine of not more than \$5,000, or by both fine and imprisonment.

- Sec. 95. NRS 200.5093 is hereby amended to read as follows:
- 200.5093 1. Any person who is described in subsection 4 and who, in a professional or occupational capacity, knows or has reasonable cause to believe that an older person has been abused, neglected, exploited, isolated or abandoned shall:
- (a) Except as otherwise provided in subsection 2, report the abuse, neglect, exploitation, isolation or abandonment of the older person to:
- (1) The local office of the Aging and Disability Services Division of the Department of Health and Human Services;
  - (2) A police department or sheriff's office; or
- (3) A toll-free telephone service designated by the Aging and Disability Services Division of the Department of Health and Human Services; and
- (b) Make such a report as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the older person has been abused, neglected, exploited, isolated or abandoned.
- 2. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that the abuse, neglect, exploitation, isolation or abandonment of the older person involves an act or omission of the Aging and Disability Services Division, another division of the Department of Health and Human Services or a law enforcement agency, the person shall make the report to an agency other than the one alleged to have committed the act or omission.
- 3. Each agency, after reducing a report to writing, shall forward a copy of the report to the Aging and Disability Services Division of the Department of Health and Human Services and the Unit for the Investigation and Prosecution of Crimes.
- 4. A report must be made pursuant to subsection 1 by the following persons:
- (a) Every physician, dentist, dental hygienist, chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, physician assistant *[or anesthesiologist assistant]* licensed pursuant to chapter 630 or 633 of NRS, *anesthesiologist assistant*, perfusionist, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, clinical alcohol and drug abuse counselor, alcohol and drug abuse counselor, music therapist, athletic trainer, driver of an ambulance, paramedic, licensed dietitian or other person providing medical services licensed or certified to practice in this State, who examines, attends or treats an older person who appears to have been abused, neglected, exploited, isolated or abandoned.
- (b) Any personnel of a hospital or similar institution engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a hospital or similar institution upon notification of the suspected abuse, neglect, exploitation, isolation or abandonment of an older person by a member of the staff of the hospital.
  - (c) A coroner.

- (d) Every person who maintains or is employed by an agency to provide personal care services in the home.
- (e) Every person who maintains or is employed by an agency to provide nursing in the home.
- (f) Every person who operates, who is employed by or who contracts to provide services for an intermediary service organization as defined in NRS 449.4304.
  - (g) Any employee of the Department of Health and Human Services.
- (h) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.
- (i) Any person who maintains or is employed by a facility or establishment that provides care for older persons.
- (j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect, exploitation, isolation or abandonment of an older person and refers them to persons and agencies where their requests and needs can be met.
  - (k) Every social worker.
  - (l) Any person who owns or is employed by a funeral home or mortuary.
- (m) Every person who operates or is employed by a peer support recovery organization, as defined in NRS 449.01563.
- (n) Every person who operates or is employed by a community health worker pool, as defined in NRS 449.0028, or with whom a community health worker pool contracts to provide the services of a community health worker, as defined in NRS 449.0027.
  - 5. A report may be made by any other person.
- 6. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that an older person has died as a result of abuse, neglect, isolation or abandonment, the person shall, as soon as reasonably practicable, report this belief to the appropriate medical examiner or coroner, who shall investigate the cause of death of the older person and submit to the appropriate local law enforcement agencies, the appropriate prosecuting attorney, the Aging and Disability Services Division of the Department of Health and Human Services and the Unit for the Investigation and Prosecution of Crimes his or her written findings. The written findings must include the information required pursuant to the provisions of NRS 200.5094, when possible.
- 7. A division, office or department which receives a report pursuant to this section shall cause the investigation of the report to commence within 3 working days. A copy of the final report of the investigation conducted by a division, office or department, other than the Aging and Disability Services Division of the Department of Health and Human Services, must be forwarded within 30 days after the completion of the report to the:
  - (a) Aging and Disability Services Division;
- (b) Repository for Information Concerning Crimes Against Older Persons created by NRS 179A.450; and

- (c) Unit for the Investigation and Prosecution of Crimes.
- 8. If the investigation of a report results in the belief that an older person is abused, neglected, exploited, isolated or abandoned, the Aging and Disability Services Division of the Department of Health and Human Services or the county's office for protective services may provide protective services to the older person if the older person is able and willing to accept them.
- 9. A person who knowingly and willfully violates any of the provisions of this section is guilty of a misdemeanor.
- 10. As used in this section, "Unit for the Investigation and Prosecution of Crimes" means the Unit for the Investigation and Prosecution of Crimes Against Older Persons in the Office of the Attorney General created pursuant to NRS 228.265.
  - Sec. 96. NRS 200.50935 is hereby amended to read as follows:
- 200.50935 1. Any person who is described in subsection 3 and who, in a professional or occupational capacity, knows or has reasonable cause to believe that a vulnerable person has been abused, neglected, exploited, isolated or abandoned shall:
- (a) Report the abuse, neglect, exploitation, isolation or abandonment of the vulnerable person to a law enforcement agency; and
- (b) Make such a report as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the vulnerable person has been abused, neglected, exploited, isolated or abandoned.
- 2. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that the abuse, neglect, exploitation, isolation or abandonment of the vulnerable person involves an act or omission of a law enforcement agency, the person shall make the report to a law enforcement agency other than the one alleged to have committed the act or omission.
- 3. A report must be made pursuant to subsection 1 by the following persons:
- (a) Every physician, dentist, dental hygienist, chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, perfusionist, physician assistant *[or anesthesiologist assistant]* licensed pursuant to chapter 630 or 633 of NRS, *anesthesiologist assistant*, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, clinical alcohol and drug abuse counselor, alcohol and drug abuse counselor, music therapist, athletic trainer, driver of an ambulance, paramedic, licensed dietitian or other person providing medical services licensed or certified to practice in this State, who examines, attends or treats a vulnerable person who appears to have been abused, neglected, exploited, isolated or abandoned.
- (b) Any personnel of a hospital or similar institution engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a hospital or similar institution upon

notification of the suspected abuse, neglect, exploitation, isolation or abandonment of a vulnerable person by a member of the staff of the hospital.

- (c) A coroner.
- (d) Every person who maintains or is employed by an agency to provide nursing in the home.
  - (e) Any employee of the Department of Health and Human Services.
- (f) Any employee of a law enforcement agency or an adult or juvenile probation officer.
- (g) Any person who maintains or is employed by a facility or establishment that provides care for vulnerable persons.
- (h) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect, exploitation, isolation or abandonment of a vulnerable person and refers them to persons and agencies where their requests and needs can be met.
  - (i) Every social worker.
  - (j) Any person who owns or is employed by a funeral home or mortuary.
  - 4. A report may be made by any other person.
- 5. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that a vulnerable person has died as a result of abuse, neglect, isolation or abandonment, the person shall, as soon as reasonably practicable, report this belief to the appropriate medical examiner or coroner, who shall investigate the cause of death of the vulnerable person and submit to the appropriate local law enforcement agencies and the appropriate prosecuting attorney his or her written findings. The written findings must include the information required pursuant to the provisions of NRS 200.5094, when possible.
- 6. A law enforcement agency which receives a report pursuant to this section shall immediately initiate an investigation of the report.
- 7. A person who knowingly and willfully violates any of the provisions of this section is guilty of a misdemeanor.
  - Sec. 97. NRS 244.1605 is hereby amended to read as follows:
  - 244.1605 The boards of county commissioners may:
- 1. Establish, equip and maintain limited medical facilities in the outlying areas of their respective counties to provide outpatient care and emergency treatment to the residents of and those falling sick or being injured or maimed in those areas.
- 2. Provide a full-time or part-time staff for the facilities which may include a physician, a physician assistant *[or anesthesiologist assistant]* licensed pursuant to chapter 630 or 633 of NRS, *an anesthesiologist assistant*, a registered nurse or a licensed practical nurse, a certified emergency medical technician, advanced emergency medical technician or paramedic, and such other personnel as the board deems necessary or appropriate to ensure adequate staffing commensurate with the needs of the area in which the facility is located.

- 3. Fix the charges for the medical and nursing care and medicine furnished by the facility to those who are able to pay for them, and to provide that care and medicine free of charge to those persons who qualify as medical indigents under the county's criteria of eligibility for medical care.
- 4. Purchase, equip and maintain, either in connection with a limited medical facility as authorized in this section or independent therefrom, ambulances and ambulance services for the benefit of the residents of and those falling sick or being injured or maimed in the outlying areas.

Sec. 98. NRS 244.382 is hereby amended to read as follows:

244.382 The Legislature finds that:

- 1. Many of the less populous counties of the State have experienced shortages of physicians, surgeons, anesthetists, dentists, other medical professionals, [and] physician assistants and anesthesiologist assistants.
- 2. Some of the more populous counties of the State have also experienced shortages of physicians, surgeons, anesthetists, dentists, other medical professionals, [and] physician assistants and anesthesiologist assistants in their rural communities.
- 3. By granting county scholarships to students in such medical professions who will agree to return to the less populous counties or the rural communities of the more populous counties for residence and practice, these counties can alleviate the shortages to a degree and thereby provide their people with needed health services.

Sec. 99. NRS 244.3821 is hereby amended to read as follows:

- 244.3821 1. In addition to the powers elsewhere conferred upon all counties, except as otherwise provided in subsection 2, any county may establish a medical scholarship program to induce students in the medical professions to return to the county for practice.
- 2. Any county whose population is 100,000 or more may only establish a medical scholarship program to induce students in the medical professions to return to the less populous rural communities of the county for practice.
- 3. Students in the medical professions for the purposes of NRS 244.382 to 244.3823, inclusive, include persons studying to be physician assistants *for amesthesiologist assistants.* licensed pursuant to chapter 630 or 633 of NRS [...] or anesthesiologist assistants.
- 4. The board of county commissioners of a county that has established a medical scholarship program may appropriate money from the general fund of the county for medical scholarship funds and may accept private contributions to augment the scholarship funds.

Sec. 100. NRS 397.0617 is hereby amended to read as follows:

- 397.0617 1. The provisions of this section apply only to support fees received by a participant on or after July 1, 1997.
- 2. The three Nevada State Commissioners, acting jointly, may require a participant who is certified to practice in a profession which could benefit a health professional shortage area, a medically underserved area or a medically underserved population of this State, as those terms are defined by the Office

- of Statewide Initiatives of the University of Nevada, *Reno* School of Medicine, to practice in such an area or with such a population, or to practice in an area designated by the Secretary of Health and Human Services:
- (a) Pursuant to 42 U.S.C. § 254c, as containing a medically underserved population; or
- (b) Pursuant to 42 U.S.C. § 254e, as a health professional shortage area, → as a condition to receiving a support fee.
- 3. The three Nevada State Commissioners, acting jointly, may forgive the portion of the support fee designated as the stipend of a participant if that participant agrees to practice in a health professional shortage area, a medically underserved area or an area with a medically underserved population of this State pursuant to subsection 2 for a period of time equal to the lesser of:
  - (a) One year for each year the participant receives a support fee; or
- (b) One year for each 9 months the participant receives a support fee and is enrolled in an accelerated program that provides more than 1 academic year of graduate and professional education in 9 months,
- → but in no case for a period of time more than 2 years.
- 4. For a participant to qualify for forgiveness pursuant to subsection 3, the participant must complete the relevant practice within 5 years after the completion or termination of the participant's education, internship or residency for which the participant received the support fee.
- 5. If a participant returns to or remains in this State but does not practice in a health professional shortage area, a medically underserved area or an area with a medically underserved population of this State pursuant to subsections 2, 3 and 4, the three Nevada State Commissioners, acting jointly, shall:
- (a) Assess a default charge in an amount not less than three times the support fees, plus interest; and
- (b) Convert the portion of the support fee designated as the stipend into a loan to be repaid in accordance with NRS 397.064 from the first day of the term for which the participant received the support fee.
- 6. As used in this section, a "profession which could benefit a health professional shortage area, a medically underserved area or an area with a medically underserved population of this State" includes, without limitation, dentistry, physical therapy, pharmacy and practicing as a physician assistant for anesthesiologist assistant; licensed pursuant to chapter 630 or 633 of NRS [-] or anesthesiologist assistant.
  - Sec. 101. NRS 441A.110 is hereby amended to read as follows:
- 441A.110 "Provider of health care" means a physician, nurse <u>anesthesiologist assistant</u> or veterinarian licensed in accordance with state law or a physician assistant *for anesthesiologist assistant*} licensed pursuant to chapter 630 or 633 of NRS.
  - Sec. 102. NRS 441A.334 is hereby amended to read as follows:

- 441A.334 As used in this section and NRS 441A.335 and 441A.336, "provider of health care" means a physician, nurse, [or] physician assistant or anesthesiologist assistant licensed in accordance with state law.
- Sec. 103. [NRS 453.038 is hereby amended to read as follows:
- 453.038 "Chart order" means an order entered on the chart of a patient:
- 1. In a hospital, facility for intermediate care or facility for skilled nursing which is licensed as such by the Division of Public and Behavioral Health of the Department; or
- 2. Under emergency treatment in a hospital by a physician, advanced practice registered nurse, dentist or podiatric physician, or on the written or oral order of a physician, physician assistant or anesthesiologist assistant licensed pursuant to chapter 630 or 633 of NRS, advanced practice registered nurse, dentist or podiatric physician authorizing the administration of a drug to the patient.] (Deleted by amendment.)
- Sec. 104. [NRS 453.091 is hereby amended to read as follows:
- 453.091 1. "Manufacture" means the production, preparation, propagation, compounding, conversion or processing of a substance, either directly or indirectly by extraction from substances of natural origin, or independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis, and includes any packaging or repackaging of the substance or labeling or relabeling of its container.
- 2. "Manufacture" does not include the preparation, compounding, packaging or labeling of a substance by a pharmacist, physician, physician assistant or anesthesiologist assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, podiatric physician, advanced practice registered nurse or veterinarian:
- (a) As an incident to the administering or dispensing of a substance in the course of his or her professional practice; or
- (b) By an authorized agent under his or her supervision, for the purpose of, or as an incident to, research, teaching or chemical analysis and not for sale.]
  (Deleted by amendment.)
- Sec. 105. INRS 453.126 is hereby amended to read as follows:
- 453.126 "Practitioner" means:
- 1. A physician, dentist, veterinarian or podiatric physician who holds a license to practice his or her profession in this State and is registered pursuant to this chapter.
- —2. An advanced practice registered nurse who holds a certificate from the State Board of Pharmacy authorizing him or her to dispense or to prescribe and dispense controlled substances.
- 3. A scientific investigator or a pharmacy, hospital or other institution licensed, registered or otherwise authorized in this State to distribute, dispense, conduct research with respect to, to administer, or use in teaching or chemical analysis, a controlled substance in the course of professional practice or research.

- 4. A cuthanasia technician who is licensed by the Nevada State Board of Veterinary Medical Examiners and registered pursuant to this chapter, while he or she possesses or administers sodium pentobarbital pursuant to his or her license and registration.
- 5. A physician assistant or anesthesiologist assistant who:
- (a) Holds a license from the Board of Medical Examiners; and
- (b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances under the supervision of a physician as required by chapter 630 of NRS.
- 6. A physician assistant or anesthesiologist assistant who:
- (a) Holds a license from the State Board of Osteopathic Medicine; and
- (b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances under the supervision of an osteopathic physician as required by chapter 633 of NRS.
- 7. An optometrist who is certified by the Nevada State Board of Optometry to prescribe and administer therapeutic pharmaceutical agents pursuant to NRS 636.288, when the optometrist prescribes or administers therapeutic pharmaceutical agents within the scope of his or her certification.] (Deleted by amendment.)
  - Sec. 106. [NRS 453.128 is hereby amended to read as follows:
- 453.128 1. "Prescription" means:
- (a) An order given individually for the person for whom prescribed, directly from a physician, physician assistant or anesthesiologist assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, podiatric physician, optometrist, advanced practice registered nurse or veterinarian, or his or her agent, to a pharmacist or indirectly by means of an order signed by the practitioner or an electronic transmission from the practitioner to a pharmacist;
- (b) A chart order written for an inpatient specifying drugs which he or she is to take home upon his or her discharge.
- 2. The term does not include a chart order written for an inpatient for use while he or she is an inpatient.] (Deleted by amendment.)
- Sec. 107. [NRS 453.371 is hereby amended to read as follows:
- 453.371 As used in NRS 453.371 to 453.552, inclusive:
- 1. "Anesthesiologist assistant" means a person who is registered with the Board and holds a license issued pursuant to section 8 or 46 of this act.
- 2. "Medical intern" means a medical graduate acting as an assistant in a hospital for the purpose of clinical training.
- = [2.] 3. "Pharmacist" means a person who holds a certificate of registration issued pursuant to NRS 639.127 and is registered with the Board.
- [3.] 4. "Physician," "dentist," "podiatric physician," "veterinarian" and "cuthanasia technician" mean persons authorized by a license to practice their respective professions in this State who are registered with the Board.
- [4.] 5. "Physician assistant" means a person who is registered with the Board and [:

- (a) Holds] holds a license issued pursuant to NRS 630.273 [;] or
- [(b) Holds a license issued pursuant to NRS] 633.433.] (Deleted by amendment.)
  - Sec. 108. 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:
  - (a) A practitioner.
- (b) A registered nurse licensed to practice professional nursing or licensed practical nurse, at the direction of a physician, physician assistant, *[anesthesiologist assistant,]* dentist, podiatric physician or advanced practice registered nurse, or pursuant to a chart order, for administration to a patient at another location.
  - (c) A paramedic:
    - (1) As authorized by regulation of:
- (I) The State Board of Health in a county whose population is less than 100,000; or
- (II) A county or district board of health in a county whose population is 100,000 or more; and
  - (2) In accordance with any applicable regulations of:
- (I) The State Board of Health in a county whose population is less than 100.000:
- (II) A county board of health in a county whose population is 100,000 or more; or
- (III) A district board of health created pursuant to NRS 439.362 or 439.370 in any county.
- (d) A respiratory therapist, at the direction of a physician or physician assistant.
- (e) An anesthesiologist assistant, at the direction of a supervising anesthesiologist.
- <u>(f)</u> A medical student, student in training to become a physician assistant *or anesthesiologist assistant*, or student nurse in the course of his or her studies at an accredited college of medicine or approved school of professional or practical nursing, at the direction of a physician <del>[,]</del> or physician assistant <del>[or anesthesiologist assistant]</del> and:
- (1) In the presence of a physician, physician assistant *[, anesthesiologist assistant]* or a registered nurse; or
- (2) Under the supervision of a physician, physician assistant  $\frac{f_2}{f_3}$  and  $\frac{f_4}{f_3}$  are 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  $\frac{f_3}{f_4}$  and  $\frac{f_4}{f_5}$  and  $\frac{f_4}{f_5}$  are a physician assistant  $\frac{f_4}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  are a physician assistant  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  and  $\frac{f_5}{f_5}$  and  $\frac{f_5}$
- → 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.

- $\frac{f(f)}{f(g)}$  An ultimate user or any person whom the ultimate user designates pursuant to a written agreement.
  - $\frac{\{(g)\}}{(h)}$  Any person designated by the head of a correctional institution.
- [(h)] (i) A veterinary technician at the direction of his or her supervising veterinarian.
- (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.
- [(j)] (k) 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.
- [(k)] (1) 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]:
- (a) "Accredited college of medicine" means:
- [(a)] (1) 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) (2) A school of osteopathic medicine, as defined in NRS 633.121.
- (b) "Anesthesiologist assistant" means a person who holds a license issued pursuant to section 8 of this act.
  - Sec. 109. [NRS 453.381 is hereby amended to read as follows:
- 453.381 1. In addition to the limitations imposed by NRS 453.256 and 453.3611 to 453.3648, inclusive, a physician, physician assistant, anesthesiologist assistant, dentist, advanced practice registered nurse or podiatric physician may prescribe or administer controlled substances only for a legitimate medical purpose and in the usual course of his or her professional practice, and he or she shall not prescribe, administer or dispense a controlled substance listed in schedule II for himself or herself, his or her spouse or his or her children except in cases of emergency.
- 2. A veterinarian, in the course of his or her professional practice only, and not for use by a human being, may prescribe, possess and administer controlled substances, and the veterinarian may cause them to be administered by a veterinary technician under the direction and supervision of the veterinarian.
- 3. A outhanasia technician, within the scope of his or her license, and not for use by a human being, may possess and administer sodium pentobarbital.

- 4. A pharmacist shall not fill an order which purports to be a prescription if the pharmacist has reason to believe that it was not issued in the usual course of the professional practice of a physician, physician assistant, dentist, advanced practice registered nurse, podiatric physician or veterinarian.
- 5. Any person who has obtained from a physician, physician assistant, anesthesiologist assistant, dentist, advanced practice registered nurse, podiatric physician or veterinarian any controlled substance for administration to a patient during the absence of the physician, physician assistant, anesthesiologist assistant, dentist, advanced practice registered nurse, podiatric physician or veterinarian shall return to him or her any unused portion of the substance when it is no longer required by the patient.
- 6. A manufacturer, wholesale supplier or other person legally able to furnish or sell any controlled substance listed in schedule II shall not provide samples of such a controlled substance to registrants.
- 7. A salesperson of any manufacturer or wholesaler of pharmaceuticals shall not possess, transport or furnish any controlled substance listed in schedule II.
- 8. A person shall not dispense a controlled substance in violation of a regulation adopted by the Board.] (Deleted by amendment.)
  - Sec. 110. [NRS-453.391 is hereby amended to read as follows:
- 453.391 A person shall not:
- 1. Unlawfully take, obtain or attempt to take or obtain a controlled substance or a prescription for a controlled substance from a manufacturer, wholesaler, pharmacist, physician, physician assistant, anesthesiologist assistant, dentist, advanced practice registered nurse, veterinarian or any other person authorized to administer, dispense or possess controlled substances.
- 2. While undergoing treatment and being supplied with any controlled substance or a prescription for any controlled substance from one practitioner, knowingly obtain any controlled substance or a prescription for a controlled substance from another practitioner without disclosing this fact to the second practitioner.] (Deleted by amendment.)
  - Sec. 111. INRS 453C.030 is hereby amended to read as follows:
- 453C.030 1. "Health care professional" means a physician, a physician assistant, an anesthesiologist assistant or an advanced practice registered murse.
- 2.—As used in this section:
- (a) "Advanced practice registered nurse" has the meaning ascribed to it in NRS 632.012.
- (b) "Anesthesiologist assistant" means an anesthesiologist assistant licensed pursuant to chapter 630 or 633 of NRS.
- (c) "Physician" means a physician licensed pursuant to chapter 630 or 633 of NRS.
- [(e)] (d) "Physician assistant" means a physician assistant licensed pursuant to chapter 630 or 633 of NRS.] (Deleted by amendment.)

- Sec. 112. [NRS 454.00958 is hereby amended to read as follows:
- 454,00058 "Practitioner" means:
- 1. A physician, dentist, veterinarian or podiatric physician who holds a valid license to practice his or her profession in this State.
- 2. A pharmacy, hospital or other institution licensed or registered to distribute, dispense, conduct research with respect to or to administer a dangerous drug in the course of professional practice in this State.
- 3. When relating to the prescription of poisons, dangerous drugs and
- (a) An advanced practice registered nurse who holds a certificate from the State Board of Pharmacy permitting him or her so to prescribe; or
- (b) A physician assistant or anesthesiologist assistant who holds a license from the Board of Medical Examiners and a certificate from the State Board of Pharmacy permitting him or her so to prescribe.
- 4. An optometrist who is certified to prescribe and administer dangerous drugs pursuant to NRS 636.288 when the optometrist prescribes or administers dangerous drugs which are within the scope of his or her certification.] (Deleted by amendment.)
  - Sec. 113. 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:
  - (a) A practitioner.
- (b) A physician assistant *[or anesthesiologist assistant]* licensed pursuant to chapter 630 or 633 of NRS [13] *or anesthesiologist assistant* at the direction of his or her supervising physician *or supervising anesthesiologist*, *as applicable*, or a licensed dental hygienist acting in the office of and under the supervision of a dentist.
- (c) Except as otherwise provided in paragraph (d), a registered nurse licensed to practice professional nursing or licensed practical nurse, at the direction of a prescribing physician, physician assistant *[or anesthesiologist assistant]* licensed pursuant to chapter 630 or 633 of NRS, dentist, podiatric physician or advanced practice registered nurse, or pursuant to a chart order, for administration to a patient at another location.
- (d) In accordance with applicable regulations of the Board, a registered nurse licensed to practice professional nursing or licensed practical nurse who is:
- (1) Employed by a health care agency or health care facility that is authorized to provide emergency care, or to respond to the immediate needs of a patient, in the residence of the patient; and
- (2) Acting under the direction of the medical director of that agency or facility who works in this State.
- (e) A medication aide certified at a designated facility under the supervision of an advanced practice registered nurse or registered nurse and in accordance with standard protocols developed by the State Board of Nursing.

As used in this paragraph, "designated facility" has the meaning ascribed to it in NRS 632.0145.

- (f) Except as otherwise provided in paragraph (g), an advanced emergency medical technician or a paramedic, as authorized by regulation of the State Board of Pharmacy and in accordance with any applicable regulations of:
- (1) The State Board of Health in a county whose population is less than 100,000;
- (2) A county board of health in a county whose population is 100,000 or more: or
- (3) A district board of health created pursuant to NRS 439.362 or 439.370 in any county.
- (g) An advanced emergency medical technician or a paramedic who holds an endorsement issued pursuant to NRS 450B.1975, under the direct supervision of a local health officer or a designee of the local health officer pursuant to that section.
- (h) A respiratory therapist employed in a health care facility. The therapist may possess and administer respiratory products only at the direction of a physician.
- (i) A dialysis technician, under the direction or supervision of a physician or registered nurse only if the drug or medicine is used for the process of renal dialysis.
- (j) A medical student or student nurse in the course of his or her studies at an accredited college of medicine or approved school of professional or practical nursing, at the direction of a physician and:
  - (1) In the presence of a physician or a registered nurse; or
- (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.
  - (k) Any person designated by the head of a correctional institution.
- (1) An ultimate user or any person designated by the ultimate user pursuant to a written agreement.
- (m) A nuclear medicine technologist, at the direction of a physician and in accordance with any conditions established by regulation of the Board.
- (n) A radiologic technologist, at the direction of a physician and in accordance with any conditions established by regulation of the Board.
- (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.
- (p) A physical therapist, but only if the drug or medicine is a topical drug which is:

- (1) Used for cooling and stretching external tissue during therapeutic treatments; and
  - (2) Prescribed by a licensed physician for:
    - (I) Iontophoresis; or
    - (II) The transmission of drugs through the skin using ultrasound.
- (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.
- (r) A veterinary technician or a veterinary assistant at the direction of his or her supervising veterinarian.
- (s) In accordance with applicable regulations of the Board, a registered pharmacist who:
- (1) Is trained in and certified to carry out standards and practices for immunization programs;
- (2) Is authorized to administer immunizations pursuant to written protocols from a physician; and
- (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.
- (t) A registered pharmacist pursuant to written guidelines and protocols developed and approved pursuant to NRS 639.2809.
- (u) A person who is enrolled in a training program to become a physician assistant *for anesthesiologist assistant*; licensed pursuant to chapter 630 or 633 of NRS, *anesthesiologist assistant*, 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 *for anesthesiologist assistant*; licensed pursuant to chapter 630 or 633 of NRS, *anesthesiologist assistant*, 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.
  - (v) A medical assistant, in accordance with applicable regulations of the:
- (1) Board of Medical Examiners, at the direction of the prescribing physician and under the supervision of a physician [1] or physician [1] assistant or anesthesiologist] assistant.
- (2) State Board of Osteopathic Medicine, at the direction of the prescribing physician and under the supervision of a physician fassistant or anesthesiologist assistant.

- 2. As used in this section, "accredited college of medicine" has the meaning ascribed to it in NRS 453.375.
  - Sec. 114. [NRS 454.215 is hereby amended to read as follows:
- 454.215 A dangerous drug may be dispensed by:
- 1. A registered pharmacist upon the legal prescription from a practitioner or to a pharmacy in a correctional institution upon the written order of the prescribing practitioner in charge;
- -2. A pharmacy in a correctional institution, in case of emergency, upon a written order signed by the chief medical officer;
- 3. A practitioner, or a physician assistant or anesthesiologist assistant licensed pursuant to chapter 630 or 633 of NRS if authorized by the Board;
- —4. A registered nurse, when the nurse is engaged in the performance of any public health program approved by the Board;
- 5. A medical intern in the course of his or her internship:
- 6. An advanced practice registered nurse who holds a certificate from the State Board of Pharmacy permitting him or her to dispense dangerous drugs;
- -7. A registered nurse employed at an institution of the Department of Corrections to an offender in that institution;
- 8. A registered pharmacist from an institutional pharmacy pursuant to regulations adopted by the Board; or
- —9. A registered nurse to a patient at a rural clinic that is designated as such pursuant to NRS 433.233 and that is operated by the Division of Public and Behavioral Health of the Department of Health and Human Services if the nurse is providing mental health services at the rural clinic.
- regulation adopted by the Board.] (Deleted by amendment.)
- Sec. 115. [NRS 454.221 is hereby amended to read as follows:
- 454.221 1. A person who furnishes any dangerous drug except upon the prescription of a practitioner is guilty of a category D felony and shall be punished as provided in NRS 193.130, unless the dangerous drug was obtained originally by a legal prescription.
- 2. The provisions of this section do not apply to the furnishing of any dangerous drug by:
- (a) A practitioner to his or her patients;
- (b) A physician assistant or anesthesiologist assistant licensed pursuant to chapter 630 or 633 of NRS if authorized by the Board;
- (e) A registered nurse while participating in a public health program approved by the Board, or an advanced practice registered nurse who holds a certificate from the State Board of Pharmacy permitting him or her to dispense dangerous drugs;
- (d) A manufacturer or wholesaler or pharmacy to each other or to a practitioner or to a laboratory under records of sales and purchases that correctly give the date, the names and addresses of the supplier and the buyer, the drug and its quantity;

- (e) A hospital pharmacy or a pharmacy so designated by a county health officer in a county whose population is 100,000 or more, or by a district health officer in any county within its jurisdiction or, in the absence of either, by the Chief Medical Officer or the Chief Medical Officer's designated Medical Director of Emergency Medical Services, to a person or agency described in subsection 3 of NRS 639.268 to stock ambulances or other authorized vehicles or replenish the stock; or
- (f) A pharmacy in a correctional institution to a person designated by the Director of the Department of Corrections to administer a lethal injection to a person who has been sentenced to death.] (Deleted by amendment.)
- Sec. 116. The provisions of subsection 1 of NRS 218D.380 do not apply to any provision of this act which adds or revises a requirement to submit a report to the Legislature.
- Sec. 117. This act becomes effective upon passage and approval for the purpose of adopting regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act, and on [January] July 1, 2018, for all other purposes.

Senator Atkinson moved the adoption of the amendment.

Remarks by Senator Atkinson.

Amendment No. 128 makes four changes to Senate Bill No. 210. The amendment clarifies the requirements to practice as an anesthesiologist assistant. It also clarifies that an anesthesiologist assistant is prohibited from prescribing opiate-based medications.

Additionally, it removes the licensure and regulation of an anesthesiologist assistant by the State Board of Osteopathic Medicine.

Finally, it provides specific licensure and renewal fees for an anesthesiologist assistant.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 227.

Bill read second time.

The following amendment was proposed by the Committee on Commerce, Labor and Energy:

Amendment No. 257.

SUMMARY—Revises provisions relating to nurses. (BDR 54-213)

AN ACT relating to nursing; authorizing a qualified advanced practice registered nurse to sign, certify, stamp, verify or endorse certain documents requiring the signature, certification, stamp, verification or endorsement of a physician; authorizing an advanced practice registered nurse to make certain certifications, diagnoses and determinations required to be made by a physician or other provider of health care; providing penalties; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Section 2 of this bill: (1) authorizes an advanced practice registered nurse, when the signature, certification, stamp, verification or endorsement of a physician is required, to provide his or her own signature, certification, stamp, verification or endorsement if he or she is qualified to do so; and (2) requires

the State Board of Nursing to adopt regulations specifically providing for when an advanced practice registered nurse is qualified to provide his or her signature, certification, stamp, verification or endorsement in the place of a physician's signature, certification, stamp, verification or endorsement.

Existing law requires a court to permanently excuse a person from service as a juror if the person is incapable of serving because of a permanent physical or mental disability that is certified by a physician. (NRS 6.030) Section 4 of this bill authorizes an advanced practice registered nurse to certify such a disability.

Existing law requires a court to appoint two psychiatrists or psychologists to examine the competency of a defendant to stand trial. (NRS 178.415) Section 5 of this bill authorizes the court to appoint [, as part of the appointment of two professionals, one or more] an advanced practice registered [nurses] nurse who [have] has obtained [certain] the psychiatric training and experience prescribed by the State Board to examine the competency of a defendant [-] who has been accused of a misdemeanor.

Existing law prohibits a child from being enrolled in a public or private school, or a child from being admitted to a child care facility or accommodation facility, without first certifying that the child has been immunized for certain diseases. (NRS 392.435, 394.192, 432A.230, 432A.235) Existing law also exempts a child from such immunization requirements if the medical condition of the child will not permit the child to be immunized and a written statement of that fact is signed by a licensed physician. (NRS 392.439, 394.194, 432A.250) Sections 8, 9 and 11 of this bill authorize an advanced practice registered nurse to sign such a written statement.

Existing law allows the parent or legal guardian of a pupil who has asthma, anaphylaxis or diabetes to request authorization from the principal or, if applicable, the school nurse of the public school in which the pupil is enrolled to allow the pupil to self-administer medication for the treatment of asthma, anaphylaxis or diabetes while the pupil is on the grounds of a public school, at an activity sponsored by the public school or on a school bus. (NRS 392.425) Section 7 of this bill authorizes an advanced practice registered nurse to provide a signed statement that a pupil has asthma, anaphylaxis or diabetes and is capable of self-administration of his or her medication.

Existing law authorizes certain persons to file an application for the emergency admission of a person alleged to be a person with mental illness to certain facilities. (NRS 433A.160) With certain exceptions, existing law requires an application for the emergency admission of a person alleged to be a person with a mental illness to be accompanied by a certificate of a psychiatrist or licensed psychologist or, if neither is available, a physician, stating that the person has a mental illness and, because of that mental illness, is likely to harm himself or herself or others if not admitted to certain facilities or programs. (NRS 433A.170, 433A.200) Sections 1 and 14-22 of this bill: (1) expand the list of persons who are authorized to evaluate such a person alleged

to have a mental illness and provide a certificate stating that the person has a mental illness to include an advanced practice registered nurse who has obtained certain psychiatric training and experience; and (2) authorize such an advanced practice registered nurse to conduct such an evaluation for an involuntary court-ordered admission, transfer or early release of a person with mental illness. Section 17 of this bill also provides the judge presiding over a proceeding for such an emergency admission with complete discretion in choosing the health care professionals to conduct such an examination.

Under existing law, a medical certificate of death or certificate of stillbirth must be signed by a physician or certain other qualified persons. (NRS 440.340, 440.380) Existing law also allows a physician to authorize a physician assistant or registered nurse to make a pronouncement of death if the physician anticipates such death. (NRS 440.415, 632.474) Sections 3 and 23-33 of this bill authorize an advanced practice registered nurse to: (1) sign a medical certificate of death or certificate of stillbirth; and (2) authorize a registered nurse to make a pronouncement of death.

Existing law allows any person who is of sound mind and 18 years of age or older to execute a declaration governing the withholding or withdrawal of life-sustaining treatment. (NRS 449.600, 449.610) Under existing law, a directive governing the withholding or withdrawal of life-sustaining treatment becomes operative when it is communicated to the declarant's attending physician and the declarant is determined by the attending physician to be in a terminal condition and no longer able to make decisions regarding the administration of life-sustaining treatment. (NRS 449.617) Sections 35, 36 and 39-51 of this bill authorize an attending advanced practice registered nurse to: (1) diagnose a person as being in a terminal condition and no longer able to make decisions regarding life-sustaining treatment for the purpose of determining whether a declaration or written consent to the withholding or withdrawal of life-sustaining treatment is operative; and (2) withhold or withdraw life-sustaining treatment in accordance with such a declaration or written consent.

Existing law requires the State Board of Health to adopt a Physician Order for Life-Sustaining Treatment form (POLST form), a document which records the wishes of a patient and directs any provider of health care regarding the provision of life-resuscitating treatment and life-sustaining treatment. (NRS 449.694) Existing law additionally allows certain patients suffering from a terminal condition to obtain a do-not-resuscitate order from a physician and a do-not-resuscitate identification from the health authority. (NRS 450B.510-450B.525) Sections 37, 38 and 52-63 of this bill authorize an advanced practice registered nurse to make certain determinations related to a POLST form and to execute a POLST form for a patient. Sections 68-84 authorize an advanced practice registered nurse to: (1) determine whether a patient is in a terminal condition for his or her application for a do-not-resuscitate identification from the health authority; and (2) issue a do-not-resuscitate order.

Under existing law, the use of a mechanical or chemical restraint on a person with a disability is authorized under certain permissible uses or for use in an emergency. Existing law further requires a physician to sign a medical order authorizing such use. (NRS 449.779, 449.780) Sections 6, 10, 12, 13, 64 and 65 of this bill authorize an advanced practice registered nurse to sign an order authorizing the use of a mechanical or chemical restraint on a person with a disability for such permissible uses or for use in an emergency.

Existing law requires each organization for youth sports that sanctions or sponsors competitive sports for youths in this State to adopt a policy concerning the prevention and treatment of injuries to the head which may occur during a youth's participation in competitive sports, including, without limitation, concussion of the brain. The policy must require that a youth who sustains or is suspected of sustaining an injury to the head while participating in such an activity or event: (1) be immediately removed from the activity or event; and (2) may not return to the activity or event unless the parent or legal guardian of the pupil provides a written statement from a provider of health care indicating that the pupil is medically cleared to participate and the date on which the pupil may return to the activity or event. (NRS 455A.200) Section 86 of this bill expands the definition of "provider of health care" to include an advanced practice registered nurse.

Under existing law, the Department of Motor Vehicles is authorized to issue special license plates, a special or temporary parking placard or a special or temporary parking sticker to a person with a disability who has certification of such disability completed by a physician and applies for such a plate, placard or sticker. Sections 87-90 of this bill authorize an advanced practice registered nurse to determine whether a person has a disability and provide that person certification for purposes of obtaining a special license plate, a special or temporary parking placard or a special or temporary parking sticker from the Department.

Sections 91-126 of this bill revise the Nevada Industrial Insurance Act to authorize an advanced practice registered nurse to: (1) examine and provide treatment to an injured employee who has experienced an industrial accident; (2) provide certification of death resulting from an injury; (3) file claims of compensation after providing treatment to an injured employee; (4) be appointed to panels of providers who have demonstrated special competence and interest in industrial health; (5) rate permanent partial and total disabilities if he or she has completed an advanced program of training in rating disabilities; (6) review appeals of determinations concerning accident benefits; (7) conduct independent medical examinations upon an order from a hearing officer and testify to his or her findings; (8) examine an injured employee to determine if he or she is capable of participating in a program of vocational rehabilitation; and (9) determine if an injured employee is in need of a life care plan after a catastrophic injury.

Existing law requires a person who wishes to be employed as a taxicab driver to obtain a health certificate issued by a physician or chiropractic

physician stating that he or she has examined the prospective driver and found that the prospective driver meets certain health requirements. (NRS 706.495, 706.8842) Sections 127 and 128 of this bill authorize an advanced practice registered nurse to issue a health certificate to a prospective driver found by the advanced practice registered nurse to meet the health requirements.

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

Section 1. NRS 632.120 is hereby amended to read as follows:

632.120 1. The Board shall:

- (a) Adopt regulations establishing reasonable standards:
- (1) For the denial, renewal, suspension and revocation of, and the placement of conditions, limitations and restrictions upon, a license to practice professional or practical nursing or a certificate to practice as a nursing assistant or medication aide certified.
  - (2) Of professional conduct for the practice of nursing.
- (3) For prescribing and dispensing controlled substances and dangerous drugs in accordance with applicable statutes.
- (4) For the psychiatric training and experience necessary for an advanced practice registered nurse to be authorized to make *the evaluations and examinations described in NRS 433A.160, 433A.240 and 433A.430 and* the certifications described in NRS 433A.170, 433A.195 and 433A.200.
- (b) Prepare and administer examinations for the issuance of a license or certificate under this chapter.
- (c) Investigate and determine the eligibility of an applicant for a license or certificate under this chapter.
- (d) Carry out and enforce the provisions of this chapter and the regulations adopted pursuant thereto.
  - 2. The Board may adopt regulations establishing reasonable:
- (a) Qualifications for the issuance of a license or certificate under this chapter.
- (b) Standards for the continuing professional competence of licensees or holders of a certificate. The Board may evaluate licensees or holders of a certificate periodically for compliance with those standards.
- 3. The Board may adopt regulations establishing a schedule of reasonable fees and charges, in addition to those set forth in NRS 632.345, for:
- (a) Investigating licensees or holders of a certificate and applicants for a license or certificate under this chapter;
- (b) Evaluating the professional competence of licensees or holders of a certificate;
  - (c) Conducting hearings pursuant to this chapter;
  - (d) Duplicating and verifying records of the Board; and
- (e) Surveying, evaluating and approving schools of practical nursing, and schools and courses of professional nursing,
- → and collect the fees established pursuant to this subsection.

- 4. For the purposes of this chapter, the Board shall, by regulation, define the term "in the process of obtaining accreditation."
- 5. The Board may adopt such other regulations, not inconsistent with state or federal law, as may be necessary to carry out the provisions of this chapter relating to nursing assistant trainees, nursing assistants and medication aides certified.
- 6. The Board may adopt such other regulations, not inconsistent with state or federal law, as are necessary to enable it to administer the provisions of this chapter.
  - Sec. 2. NRS 632.237 is hereby amended to read as follows:
- 632.237 1. The Board may issue a license to practice as an advanced practice registered nurse to a registered nurse:
- (a) Who is licensed by endorsement pursuant to NRS 632.161 or 632.162 and holds a corresponding valid and unrestricted license to practice as an advanced practice registered nurse in the District of Columbia or any other state or territory of the United States; or
  - (b) Who:
- (1) Has completed an educational program designed to prepare a registered nurse to:
  - (I) Perform designated acts of medical diagnosis;
  - (II) Prescribe therapeutic or corrective measures; and
- (III) Prescribe controlled substances, poisons, dangerous drugs and devices:
- (2) Except as otherwise provided in subsection [6,] 7, submits proof that he or she is certified as an advanced practice registered nurse 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
- (3) Meets any other requirements established by the Board for such licensure.
  - 2. An advanced practice registered nurse may:
  - (a) Engage in selected medical diagnosis and treatment; [and]
- (b) If authorized pursuant to NRS 639.2351 and subject to the limitations set forth in subsection 3, prescribe controlled substances, poisons, dangerous drugs and devices  $\Box$ ; and
- (c) Provide his or her signature, certification, stamp, verification or endorsement when a signature, certification, stamp, verification or endorsement by a physician is required, if providing such a signature, certification, stamp, verification or endorsement is within the authorized scope of practice of an advanced practice registered nurse.
- → An advanced practice registered nurse shall not engage in any diagnosis, treatment or other conduct which the advanced practice registered nurse is not qualified to perform.

- 3. An advanced practice registered nurse who is authorized to prescribe controlled substances, poisons, dangerous drugs and devices pursuant to NRS 639.2351 shall not prescribe a controlled substance listed in schedule II unless:
- (a) The advanced practice registered nurse has at least 2 years or 2,000 hours of clinical experience; or
- (b) The controlled substance is prescribed pursuant to a protocol approved by a collaborating physician.
- 4. An advanced practice registered nurse may perform the acts described in *paragraphs* (a) and (b) of subsection 2 by using equipment that transfers information concerning the medical condition of a patient in this State electronically, telephonically or by fiber optics, including, without limitation, through telehealth, as defined in NRS 629.515, from within or outside this State or the United States.
- 5. Nothing in paragraph (c) of subsection 2 shall be deemed to expand the scope of practice of an advanced practice registered nurse who provides his or her signature, certification, stamp, verification or endorsement in the place of a physician.
  - 6. The Board shall adopt regulations:
- (a) Specifying any additional training, education and experience necessary for licensure as an advanced practice registered nurse.
- (b) Delineating the authorized scope of practice of an advanced practice registered nurse [.], including, without limitation, when an advanced practice registered nurse is qualified to provide his or her signature, certification, stamp, verification or endorsement in the place of a physician.
- (c) Establishing the procedure for application for licensure as an advanced practice registered nurse.
- [6.] 7. The provisions of subparagraph (2) of paragraph (b) of subsection 1 do not apply to an advanced practice registered nurse who obtains a license before July 1, 2014.
  - Sec. 3. NRS 632.474 is hereby amended to read as follows:
- 632.474 A registered nurse who is authorized by a physician *or advanced practice registered nurse* pursuant to NRS 440.415 may make a pronouncement of death.
  - Sec. 4. NRS 6.030 is hereby amended to read as follows:
- 6.030 1. The court may at any time temporarily excuse any juror on account of:
  - (a) Sickness or physical disability.
  - (b) Serious illness or death of a member of the juror's immediate family.
  - (c) Undue hardship or extreme inconvenience.
  - (d) Public necessity.
- 2. In addition to the reasons set forth in subsection 1, the court may at any time temporarily excuse a person who provides proof that the person is the primary caregiver of another person who has a documented medical condition which requires the assistance of another person at all times.

- 3. A person temporarily excused shall appear for jury service as the court may direct.
- 4. The court shall permanently excuse any person from service as a juror if the person is incapable, by reason of a permanent physical or mental disability, of rendering satisfactory service as a juror. The court may require the prospective juror to submit a [physician's] certificate completed by a physician or an advanced practice registered nurse licensed pursuant to NRS 632.237 concerning the nature and extent of the disability and the certifying physician or advanced practice registered nurse may be required to testify concerning the disability when the court so directs.
  - Sec. 5. NRS 178.415 is hereby amended to read as follows:
- 178.415 1. Except as otherwise provided in this subsection, the court shall appoint two psychiatrists, two psychologists on one psychiatrist and one psychologist [, advanced practice registered nurses who have the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120, or any combination of two such persons,] to examine the defendant. If the defendant is accused of a misdemeanor, the court of jurisdiction shall appoint a psychiatric social worker, advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 or other person who is especially qualified by the Division, to examine the defendant.
- 2. Except as otherwise provided in this subsection, at a hearing in open court, the court that orders the examination must receive the report of the examination. If a justice court orders the examination of a defendant who is charged with a gross misdemeanor or felony, the district court must receive the report of the examination.
- 3. The court that receives the report of the examination shall permit counsel for both sides to examine the person or persons appointed to examine the defendant. The prosecuting attorney and the defendant may:
- (a) Introduce other evidence including, without limitation, evidence related to treatment to competency and the possibility of ordering the involuntary administration of medication; and
  - (b) Cross-examine one another's witnesses.
- 4. The court that receives the report of the examination shall then make and enter its finding of competence or incompetence.
- 5. The court shall not appoint a person to provide a report or an evaluation pursuant to this section, unless the person is certified by the Division pursuant to NRS 178.417.
  - Sec. 6. NRS 388.503 is hereby amended to read as follows:
- 388.503 1. Except as otherwise provided in subsection 2, mechanical restraint may be used on a pupil with a disability only if:
  - (a) An emergency exists that necessitates the use of mechanical restraint;
- (b) A medical order authorizing the use of mechanical restraint from the pupil's treating physician *or advanced practice registered nurse* is included in

the pupil's individualized education program before the application of the mechanical restraint;

- (c) The physician *or advanced practice registered nurse* who signed the order required pursuant to paragraph (b) or the attending physician *or attending advanced practice registered nurse* examines the pupil as soon as practicable after the application of the mechanical restraint;
- (d) The mechanical restraint is applied by a member of the staff of the school who is trained and qualified to apply mechanical restraint;
- (e) The pupil is given the opportunity to move and exercise the parts of his or her body that are restrained at least 10 minutes per every 60 minutes of restraint, unless otherwise prescribed by the physician *or advanced practice registered nurse* who signed the order;
- (f) A member of the staff of the school lessens or discontinues the restraint every 15 minutes to determine whether the pupil will stop injury to himself or herself without the use of the restraint;
- (g) The record of the pupil contains a notation that includes the time of day that the restraint was lessened or discontinued pursuant to paragraph (f), the response of the pupil and the response of the member of the staff of the school who applied the mechanical restraint;
- (h) A member of the staff of the school continuously monitors the pupil during the time that mechanical restraint is used on the pupil; and
- (i) The mechanical restraint is used only for the period that is necessary to contain the behavior of the pupil so that the pupil is no longer an immediate threat of causing physical injury to himself or herself.
- 2. Mechanical restraint may be used on a pupil with a disability and the provisions of subsection 1 do not apply if the mechanical restraint is used to:
  - (a) Treat the medical needs of the pupil;
- (b) Protect a pupil who is known to be at risk of injury to himself or herself because he or she lacks coordination or suffers from frequent loss of consciousness;
  - (c) Provide proper body alignment to a pupil; or
- (d) Position a pupil who has physical disabilities in a manner prescribed in the pupil's individualized education program.
- 3. If mechanical restraint is used on a pupil with a disability in an emergency, the use of the procedure must be reported in the pupil's cumulative record and a confidential file maintained for the pupil not later than 1 working day after the procedure is used. A copy of the report must be provided to the board of trustees of the school district or its designee, the pupil's individualized education program team and the parent or guardian of the pupil. If the board of trustees or its designee determines that a denial of the pupil's rights has occurred, the board of trustees or its designee shall submit a report to the Department in accordance with NRS 388.513.
- 4. If a pupil with a disability has three reports of the use of mechanical restraint in his or her record pursuant to subsection 3 in 1 school year, the school district shall notify the school in which the pupil is enrolled to review

the circumstances of the use of the restraint on the pupil and provide a report of its findings to the school district.

- 5. If a pupil with a disability has five reports of the use of mechanical restraint in his or her record pursuant to subsection 3 in 1 school year, the pupil's individualized education program must be reviewed in accordance with the Individuals with Disabilities Education Act, 20 U.S.C. §§ 1414 et seq., and the regulations adopted pursuant thereto. If mechanical restraint continues after the pupil's individualized education program has been reviewed, the school district and the parent or legal guardian of the pupil shall include in the pupil's individualized education program additional methods that are appropriate for the pupil to ensure that restraint does not continue, including, without limitation, mentoring, training, a functional behavioral assessment, a positive behavior plan and positive behavioral supports.
  - Sec. 7. NRS 392.425 is hereby amended to read as follows:
- 392.425 1. The parent or legal guardian of a pupil who has asthma, anaphylaxis or diabetes may submit a written request to the principal or, if applicable, the school nurse of the public school in which the pupil is enrolled to allow the pupil to self-administer medication for the treatment of the pupil's asthma, anaphylaxis or diabetes while the pupil is on the grounds of a public school, participating in an activity sponsored by a public school or on a school bus.
- 2. A public school shall establish protocols for containing blood-borne pathogens and the handling and disposal of needles, medical devices and other medical waste and provide a copy of these protocols and procedures to the parent or guardian of a pupil who requests permission for the pupil to self-administer medication pursuant to subsection 1.
  - 3. A written request made pursuant to subsection 1 must include:
- (a) A signed statement of a physician *or advanced practice registered nurse* indicating that the pupil has asthma, anaphylaxis or diabetes and is capable of self-administration of the medication while the pupil is on the grounds of a public school, participating in an activity sponsored by a public school or on a school bus:
- (b) A written treatment plan prepared by the physician *or advanced practice registered nurse* pursuant to which the pupil will manage his or her asthma, anaphylaxis or diabetes if the pupil experiences an asthmatic attack, anaphylactic shock or diabetic episode while on the grounds of a public school, participating in an activity sponsored by a public school or on a school bus; and
  - (c) A signed statement of the parent or legal guardian:
- (1) Indicating that the parent or legal guardian grants permission for the pupil to self-administer the medication while the pupil is on the grounds of a public school, participating in an activity sponsored by a public school or on a school bus;
- (2) Acknowledging that the parent or legal guardian is aware of and understands the provisions of subsections 4 and 5;

- (3) Acknowledging the receipt of the protocols provided pursuant to subsection 2:
- (4) Acknowledging that the protocols established pursuant to subsection 2 have been explained to the pupil who will self-administer the medication and that he or she has agreed to comply with the protocols; and
- (5) Acknowledging that authorization to self-administer medication pursuant to this section may be revoked if the pupil fails to comply with the protocols established pursuant to subsection 2.
- 4. The provisions of this section do not create a duty for the board of trustees of the school district, the school district, the public school in which the pupil is enrolled, or an employee or agent thereof, that is in addition to those duties otherwise required in the course of service or employment.
- 5. If a pupil is granted authorization pursuant to this section to self-administer medication, the board of trustees of the school district, the school district and the public school in which the pupil is enrolled, and any employee or agent thereof, are immune from liability for the injury to or death of:
- (a) The pupil as a result of self-administration of a medication pursuant to this section or the failure of the pupil to self-administer such a medication; and
- (b) Any other person as a result of exposure to or injury caused by needles, medical devices or other medical waste from the self-administration of medication by a pupil pursuant to this section.
- 6. Upon receipt of a request that complies with subsection 3, the principal or, if applicable, the school nurse of the public school in which a pupil is enrolled shall provide written authorization for the pupil to carry and self-administer medication to treat his or her asthma, anaphylaxis or diabetes while the pupil is on the grounds of a public school, participating in an activity sponsored by a public school or on a school bus. The written authorization must be filed with the principal or, if applicable, the school nurse of the public school in which the pupil is enrolled and must include:
- (a) The name and purpose of the medication which the pupil is authorized to self-administer:
  - (b) The prescribed dosage and the duration of the prescription;
- (c) The times or circumstances, or both, during which the medication is required or recommended for self-administration;
- (d) The side effects that may occur from an administration of the medication;
- (e) The name and telephone number of the pupil's physician *or advanced practice registered nurse* and the name and telephone number of the person to contact in the case of a medical emergency concerning the pupil; and
- (f) The procedures for the handling and disposal of needles, medical devices and other medical waste.
- 7. The written authorization provided pursuant to subsection 6 is valid for 1 school year. If a parent or legal guardian submits a written request that complies with subsection 3, the principal or, if applicable, the school nurse of

the public school in which the pupil is enrolled shall renew and, if necessary, revise the written authorization.

- 8. If a parent or legal guardian of a pupil who is authorized pursuant to this section to carry medication on his or her person provides to the principal or, if applicable, the school nurse of the public school in which the pupil is enrolled doses of the medication in addition to the dosage that the pupil carries on his or her person, the principal or, if applicable, the school nurse shall ensure that the additional medication is:
- (a) Stored on the premises of the public school in a location that is secure; and
- (b) Readily available if the pupil experiences an asthmatic attack, anaphylactic shock or diabetic episode during school hours.
  - 9. As used in this section:
- (a) "Advanced practice registered nurse" means a registered nurse who holds a valid license as an advanced practice registered nurse issued by the State Board of Nursing pursuant to NRS 632.237.
- (b) "Medication" means any medicine prescribed by a physician or advanced practice registered nurse for the treatment of anaphylaxis, asthma or diabetes, including, without limitation, asthma inhalers, auto-injectable epinephrine and insulin.
- [(b)] (c) "Physician" means a person who is licensed to practice medicine pursuant to chapter 630 of NRS or osteopathic medicine pursuant to chapter 633 of NRS.
- $\{(e)\}\$  (d) "Self-administer" means the auto-administration of a medication pursuant to the prescription for the medication or written directions for such a medication.
  - Sec. 8. NRS 392.439 is hereby amended to read as follows:
- 392.439 If the medical condition of a child will not permit the child to be immunized to the extent required by NRS 392.435 and a written statement of this fact is signed by a licensed physician *or advanced practice registered nurse* and by the parents or guardian of the child, the board of trustees of the school district or governing body of the charter school in which the child has been accepted for enrollment shall exempt the child from all or part of the provisions of NRS 392.435, as the case may be, for enrollment purposes.
  - Sec. 9. NRS 394.194 is hereby amended to read as follows:
- 394.194 If the medical condition of a child will not permit the child to be immunized to the extent required by NRS 394.192, a written statement of this fact signed by a licensed physician *or advanced practice registered nurse* and presented to the governing body by the parents or guardian of such child shall exempt such child from all or part of the provisions of NRS 394.192, as the case may be, for enrollment purposes.
  - Sec. 10. NRS 394.369 is hereby amended to read as follows:
- 394.369 1. Except as otherwise provided in subsection 2, mechanical restraint may be used on a pupil with a disability only if:
  - (a) An emergency exists that necessitates the use of mechanical restraint;

- (b) A medical order authorizing the use of mechanical restraint from the pupil's treating physician *or advanced practice registered nurse* is included in the pupil's services plan developed pursuant to 34 C.F.R. § 300.138 or the pupil's individualized education program, whichever is appropriate, before the application of the mechanical restraint;
- (c) The physician *or advanced practice registered nurse* who signed the order required pursuant to paragraph (b) or the attending physician *or attending advanced practice registered nurse* examines the pupil as soon as practicable after the application of the mechanical restraint;
- (d) The mechanical restraint is applied by a member of the staff of the private school who is trained and qualified to apply mechanical restraint;
- (e) The pupil is given the opportunity to move and exercise the parts of his or her body that are restrained at least 10 minutes per every 60 minutes of restraint, unless otherwise prescribed by the physician *or advanced practice registered nurse* who signed the order;
- (f) A member of the staff of the private school lessens or discontinues the restraint every 15 minutes to determine whether the pupil will stop injury to himself or herself without the use of the restraint;
- (g) The record of the pupil contains a notation that includes the time of day that the restraint was lessened or discontinued pursuant to paragraph (f), the response of the pupil and the response of the member of the staff of the private school who applied the mechanical restraint;
- (h) A member of the staff of the private school continuously monitors the pupil during the time that mechanical restraint is used on the pupil; and
- (i) The mechanical restraint is used only for the period that is necessary to contain the behavior of the pupil so that the pupil is no longer an immediate threat of causing physical injury to himself or herself.
- 2. Mechanical restraint may be used on a pupil with a disability and the provisions of subsection 1 do not apply if the mechanical restraint is used to:
  - (a) Treat the medical needs of the pupil;
- (b) Protect a pupil who is known to be at risk of injury to himself or herself because he or she lacks coordination or suffers from frequent loss of consciousness;
  - (c) Provide proper body alignment to a pupil; or
- (d) Position a pupil who has physical disabilities in a manner prescribed in the pupil's service plan developed pursuant to 34 C.F.R. § 300.138 or the pupil's individualized education program, whichever is appropriate.
- 3. If mechanical restraint is used on a pupil with a disability in an emergency, the use of the procedure must be reported in the pupil's cumulative record not later than 1 working day after the procedure is used. A copy of the report must be provided to the Superintendent, the administrator of the private school, the pupil's individualized education program team, if applicable, and the parent or guardian of the pupil. If the administrator of the private school determines that a denial of the pupil's rights has occurred, the administrator shall submit a report to the Superintendent in accordance with NRS 394.378.

- 4. If a pupil with a disability has three reports of the use of mechanical restraint in his or her record pursuant to subsection 3 in 1 school year, the private school in which the pupil is enrolled shall review the circumstances of the use of the restraint on the pupil and provide a report to the Superintendent on its findings.
- 5. If a pupil with a disability has five reports of the use of mechanical restraint in his or her record pursuant to subsection 3 in 1 school year, the pupil's individualized education program or the pupil's services plan, as applicable, must be reviewed in accordance with the Individuals with Disabilities Education Act, 20 U.S.C. §§ 1414 et seq., and the regulations adopted pursuant thereto. If mechanical restraint continues after the pupil's individualized education program or services plan has been reviewed, the private school and the parent or legal guardian of the pupil shall include in the pupil's individualized education program or services plan, as applicable, additional methods that are appropriate for the pupil to ensure that the restraint does not continue, including, without limitation, mentoring, training, a functional behavioral assessment, a positive behavior plan and positive behavioral supports.
- 6. As used in this section, "individualized education program" has the meaning ascribed to it in 20 U.S.C. § 1414(d)(1)(A).
  - Sec. 11. NRS 432A.250 is hereby amended to read as follows:
- 432A.250 If the medical condition of a child will not permit the child to be immunized to the extent required by NRS 432A.230 or 432A.235, a written statement of this fact signed by a licensed physician *or advanced practice registered nurse* and presented to the operator of the facility by the parents or guardian of such child exempts such child from all or part of the provisions of NRS 432A.230 or 432A.235, as the case may be, for purposes of admission.
  - Sec. 12. NRS 433.5496 is hereby amended to read as follows:
- 433.5496 1. Except as otherwise provided in subsections 2 and 4, mechanical restraint may be used on a person with a disability who is a consumer only if:
  - (a) An emergency exists that necessitates the use of mechanical restraint;
- (b) A medical order authorizing the use of mechanical restraint is obtained from the consumer's treating physician *or advanced practice registered nurse* before the application of the mechanical restraint or not later than 15 minutes after the application of the mechanical restraint;
- (c) The physician *or advanced practice registered nurse* who signed the order required pursuant to paragraph (b) or the attending physician *or attending advanced practice registered nurse* examines the consumer not later than 1 working day immediately after the application of the mechanical restraint;
- (d) The mechanical restraint is applied by a member of the staff of the facility who is trained and qualified to apply mechanical restraint;

- (e) The consumer is given the opportunity to move and exercise the parts of his or her body that are restrained at least 10 minutes per every 60 minutes of restraint:
- (f) A member of the staff of the facility lessens or discontinues the restraint every 15 minutes to determine whether the consumer will stop or control his or her inappropriate behavior without the use of the restraint;
- (g) The record of the consumer contains a notation that includes the time of day that the restraint was lessened or discontinued pursuant to paragraph (f), the response of the consumer and the response of the member of the staff of the facility who applied the mechanical restraint;
- (h) A member of the staff of the facility continuously monitors the consumer during the time that mechanical restraint is used on the consumer; and
- (i) The mechanical restraint is used only for the period that is necessary to contain the behavior of the consumer so that the consumer is no longer an immediate threat of causing physical injury to himself or herself or others or causing severe property damage.
- 2. Mechanical restraint may be used on a person with a disability who is a consumer and the provisions of subsection 1 do not apply if the mechanical restraint is used to:
  - (a) Treat the medical needs of a consumer;
- (b) Protect a consumer who is known to be at risk of injury to himself or herself because the consumer lacks coordination or suffers from frequent loss of consciousness;
  - (c) Provide proper body alignment to a consumer; or
- (d) Position a consumer who has physical disabilities in a manner prescribed in the consumer's plan of services.
- 3. If mechanical restraint is used on a person with a disability who is a consumer in an emergency, the use of the procedure must be reported as a denial of rights pursuant to NRS 433.534 or 435.610, as applicable, regardless of whether the use of the procedure is authorized by statute. The report must be made not later than 1 working day after the procedure is used.
- 4. The provisions of this section do not apply to a forensic facility, as that term is defined in subsection 5 of NRS 433.5499.
  - Sec. 13. NRS 433.5503 is hereby amended to read as follows:
- 433.5503 1. Chemical restraint may only be used on a person with a disability who is a consumer if:
- (a) The consumer has been diagnosed as mentally ill, as defined in NRS 433A.115, and is receiving mental health services from a facility;
- (b) The chemical restraint is administered to the consumer while he or she is under the care of the facility;
  - (c) An emergency exists that necessitates the use of chemical restraint;
- (d) A medical order authorizing the use of chemical restraint is obtained from the consumer's attending physician, [or] psychiatrist [;] or advanced practice registered nurse;

- (e) The physician, [or] psychiatrist or advanced practice registered nurse who signed the order required pursuant to paragraph (d) examines the consumer not later than 1 working day immediately after the administration of the chemical restraint; and
- (f) The chemical restraint is administered by a person licensed to administer medication.
- 2. If chemical restraint is used on a person with a disability who is a consumer, the use of the procedure must be reported as a denial of rights pursuant to NRS 433.534 or 435.610, as applicable, regardless of whether the use of the procedure is authorized by statute. The report must be made not later than 1 working day after the procedure is used.
  - Sec. 14. NRS 433A.160 is hereby amended to read as follows:
- 433A.160 1. Except as otherwise provided in subsection 2, an application for the emergency admission of a person alleged to be a person with mental illness for evaluation, observation and treatment may only be made by an accredited agent of the Department, an officer authorized to make arrests in the State of Nevada or a physician, physician assistant, psychologist, marriage and family therapist, clinical professional counselor, social worker or registered nurse. The agent, officer, physician, physician assistant, psychologist, marriage and family therapist, clinical professional counselor, social worker or registered nurse may:
  - (a) Without a warrant:
- (1) Take a person alleged to be a person with mental illness into custody to apply for the emergency admission of the person for evaluation, observation and treatment; and
- (2) Transport the person alleged to be a person with mental illness to a public or private mental health facility or hospital for that purpose, or arrange for the person to be transported by:
  - (I) A local law enforcement agency;
- (II) A system for the nonemergency medical transportation of persons whose operation is authorized by the Nevada Transportation Authority;
- (III) An entity that is exempt pursuant to NRS 706.745 from the provisions of NRS 706.386 or 706.421; or
- (IV) If medically necessary, an ambulance service that holds a permit issued pursuant to the provisions of chapter 450B of NRS,
- → only if the agent, officer, physician, physician assistant, psychologist, marriage and family therapist, clinical professional counselor, social worker or registered nurse has, based upon his or her personal observation of the person alleged to be a person with mental illness, probable cause to believe that the person has a mental illness and, because of that illness, is likely to harm himself or herself or others if allowed his or her liberty.
  - (b) Apply to a district court for an order requiring:
- (1) Any peace officer to take a person alleged to be a person with mental illness into custody to allow the applicant for the order to apply for the

emergency admission of the person for evaluation, observation and treatment; and

- (2) Any agency, system or service described in subparagraph (2) of paragraph (a) to transport the person alleged to be a person with mental illness to a public or private mental health facility or hospital for that purpose.
- → The district court may issue such an order only if it is satisfied that there is probable cause to believe that the person has a mental illness and, because of that illness, is likely to harm himself or herself or others if allowed his or her liberty.
- 2. An application for the emergency admission of a person alleged to be a person with mental illness for evaluation, observation and treatment may be made by a spouse, parent, adult child or legal guardian of the person. The spouse, parent, adult child or legal guardian and any other person who has a legitimate interest in the person alleged to be a person with mental illness may apply to a district court for an order described in paragraph (b) of subsection 1.
- 3. The application for the emergency admission of a person alleged to be a person with mental illness for evaluation, observation and treatment must reveal the circumstances under which the person was taken into custody and the reasons therefor.
- 4. Except as otherwise provided in this subsection, each person admitted to a public or private mental health facility or hospital under an emergency admission must be evaluated at the time of admission by a psychiatrist or a psychologist. If a psychiatrist or a psychologist is not available to conduct an evaluation at the time of admission, a physician *or an advanced practice registered nurse who has the training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120* may conduct the evaluation. Each such emergency admission must be approved by a psychiatrist.
- 5. As used in this section, "an accredited agent of the Department" means any person appointed or designated by the Director of the Department to take into custody and transport to a mental health facility pursuant to subsections 1 and 2 those persons in need of emergency admission.
  - Sec. 15. NRS 433A.200 is hereby amended to read as follows:
- 433A.200 1. Except as otherwise provided in NRS 432B.6075, a proceeding for an involuntary court-ordered admission of any person in the State of Nevada may be commenced by the filing of a petition for the involuntary admission to a mental health facility or to a program of community-based or outpatient services with the clerk of the district court of the county where the person who is to be treated resides. The petition may be filed by the spouse, parent, adult children or legal guardian of the person to be treated or by any physician, physician assistant, psychologist, social worker or registered nurse, by an accredited agent of the Department or by any officer authorized to make arrests in the State of Nevada. The petition must be accompanied:
- (a) By a certificate of a physician, a licensed psychologist, a physician assistant under the supervision of a psychiatrist, a clinical social worker who

has the psychiatric training and experience prescribed by the Board of Examiners for Social Workers pursuant to NRS 641B.160, an advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 or an accredited agent of the Department stating that he or she has examined the person alleged to be a person with mental illness and has concluded that the person has a mental illness and, because of that illness, is likely to harm himself or herself or others if allowed his or her liberty or if not required to participate in a program of community-based or outpatient services; or

- (b) By a sworn written statement by the petitioner that:
- (1) The petitioner has, based upon the petitioner's personal observation of the person alleged to be a person with mental illness, probable cause to believe that the person has a mental illness and, because of that illness, is likely to harm himself or herself or others if allowed his or her liberty or if not required to participate in a program of community-based or outpatient services; and
- (2) The person alleged to be a person with mental illness has refused to submit to examination or treatment by a physician, psychiatrist, [or] licensed psychologist [-] or advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120.
- 2. Except as otherwise provided in NRS 432B.6075, if the person to be treated is a minor and the petitioner is a person other than a parent or guardian of the minor, the petition must, in addition to the certificate or statement required by subsection 1, include a statement signed by a parent or guardian of the minor that the parent or guardian does not object to the filing of the petition.
  - Sec. 16. NRS 433A.210 is hereby amended to read as follows:
- 433A.210 In addition to the requirements of NRS 433A.200, a petition filed pursuant to that section with the clerk of the district court to commence proceedings for involuntary court-ordered admission of a person pursuant to NRS 433A.145 or 433A.150 must include a certified copy of:
- 1. The application for the emergency admission of the person made pursuant to NRS 433A.160; and
- 2. A petition executed by a psychiatrist, licensed psychologist, [or] physician [,] or advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120, including, without limitation, a sworn statement that:
- (a) He or she has examined the person alleged to be a person with mental illness:
- (b) In his or her opinion, there is a reasonable degree of certainty that the person alleged to be a person with mental illness suffers from a mental illness;
- (c) Based on his or her personal observation of the person alleged to be a person with mental illness and other facts set forth in the petition, the person poses a risk of imminent harm to himself or herself or others; and

- (d) In his or her opinion, involuntary admission of the person alleged to be a person with mental illness to a mental health facility or hospital is medically necessary to prevent the person from harming himself or herself or others.
  - Sec. 17. NRS 433A.240 is hereby amended to read as follows:
- 433A.240 1. After the filing of a petition to commence proceedings for the involuntary court-ordered admission of a person pursuant to NRS 433A.200 or 433A.210, the court shall promptly cause two or more physicians, [or] licensed psychologists [,] or advanced practice registered nurses who have the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120, one of whom must always be a physician, to examine the person alleged to be a person with mental illness, or request an evaluation by an evaluation team from the Division of the person alleged to be a person with mental illness.
- 2. <u>Subject to the provisions in subsection 1, the judge assigned to hear a proceeding brought pursuant to NRS 433A.200 to 433A.330, inclusive, shall have complete discretion in selecting the medical professionals to conduct the examination required pursuant to subsection 1.</u>
- <u>3.</u> To conduct the examination of a person who is not being detained at a mental health facility or hospital under emergency admission pursuant to an application made pursuant to NRS 433A.160, the court may order a peace officer to take the person into protective custody and transport the person to a mental health facility or hospital where the person may be detained until a hearing is had upon the petition.
- [3-] 4. If the person is not being detained under an emergency admission pursuant to an application made pursuant to NRS 433A.160, the person may be allowed to remain in his or her home or other place of residence pending an ordered examination or examinations and to return to his or her home or other place of residence upon completion of the examination or examinations. The person may be accompanied by one or more of his or her relations or friends to the place of examination.
- [4.] 5. Each physician, [and] licensed psychologist and advanced practice registered nurse who examines a person pursuant to subsection 1 shall, in conducting such an examination, consider the least restrictive treatment appropriate for the person.
- [5.] 6. Except as otherwise provided in this subsection, each physician, [and] licensed psychologist and advanced practice registered nurse who examines a person pursuant to subsection 1 shall, not later than 48 hours before the hearing set pursuant to NRS 433A.220, submit to the court in writing a summary of his or her findings and evaluation regarding the person alleged to be a person with mental illness. If the person alleged to be a person with mental illness is admitted under an emergency admission pursuant to an application made pursuant to NRS 433A.160, the written findings and evaluation must be submitted to the court not later than 24 hours before the hearing set pursuant to subsection 1 of NRS 433A.220.

Sec. 18. NRS 433A.280 is hereby amended to read as follows:

433A.280 In proceedings for involuntary court-ordered admission, the court shall hear and consider all relevant testimony, including, but not limited to, the testimony of examining personnel who participated in the evaluation of the person alleged to be a person with mental illness and the certificates of physicians, [or] certified psychologists or advanced practice registered nurses accompanying the petition. The court may consider testimony relating to any past actions of the person alleged to be a person with mental illness if such testimony is probative of the question of whether the person is presently mentally ill and presents a clear and present danger of harm to himself or herself or others.

Sec. 19. NRS 433A.330 is hereby amended to read as follows:

433A.330 1. When an involuntary court admission to a mental health facility is ordered under the provisions of this chapter, the involuntarily admitted person, together with the court orders and certificates of the physicians, certified psychologists , *advanced practice registered nurses* or evaluation team and a full and complete transcript of the notes of the official reporter made at the examination of such person before the court, must be delivered to the sheriff of the county who shall:

- (a) Transport the person; or
- (b) Arrange for the person to be transported by:
- (1) A system for the nonemergency medical transportation of persons whose operation is authorized by the Nevada Transportation Authority; or
- (2) If medically necessary, an ambulance service that holds a permit issued pursuant to the provisions of chapter 450B of NRS,
- → to the appropriate public or private mental health facility.
- 2. No person with mental illness may be transported to the mental health facility without at least one attendant of the same sex or a relative in the first degree of consanguinity or affinity being in attendance.
  - Sec. 20. NRS 433A.360 is hereby amended to read as follows:
- 433A.360 1. A clinical record for each consumer must be diligently maintained by any division facility, private institution, facility offering mental health services or program of community-based or outpatient services. The record must include information pertaining to the consumer's admission, legal status, treatment and individualized plan for habilitation. The clinical record is not a public record and no part of it may be released, except:
  - (a) If the release is authorized or required pursuant to NRS 439.538.
- (b) The record must be released to physicians, *advanced practice registered nurses*, attorneys and social agencies as specifically authorized in writing by the consumer, the consumer's parent, guardian or attorney.
- (c) The record must be released to persons authorized by the order of a court of competent jurisdiction.
- (d) The record or any part thereof may be disclosed to a qualified member of the staff of a division facility, an employee of the Division or a member of the staff of an agency in Nevada which has been established pursuant to the

Developmental Disabilities Assistance and Bill of Rights Act of 2000, 42 U.S.C. §§ 15001 et seq., or the Protection and Advocacy for Mentally Ill Individuals Act of 1986, 42 U.S.C. §§ 10801 et seq., when the Administrator deems it necessary for the proper care of the consumer.

- (e) Information from the clinical records may be used for statistical and evaluative purposes if the information is abstracted in such a way as to protect the identity of individual consumers.
- (f) To the extent necessary for a consumer to make a claim, or for a claim to be made on behalf of a consumer for aid, insurance or medical assistance to which the consumer may be entitled, information from the records may be released with the written authorization of the consumer or the consumer's guardian.
- (g) The record must be released without charge to any member of the staff of an agency in Nevada which has been established pursuant to 42 U.S.C. §§ 15001 et seq. or 42 U.S.C. §§ 10801 et seq. if:
- (1) The consumer is a consumer of that office and the consumer or the consumer's legal representative or guardian authorizes the release of the record; or
- (2) A complaint regarding a consumer was received by the office or there is probable cause to believe that the consumer has been abused or neglected and the consumer:
- (I) Is unable to authorize the release of the record because of the consumer's mental or physical condition; and
- (II) Does not have a guardian or other legal representative or is a ward of the State.
- (h) The record must be released as provided in NRS 433.332 or 433B.200 and in chapter 629 of NRS.
- 2. As used in this section, "consumer" includes any person who seeks, on the person's own or others' initiative, and can benefit from, care, treatment and training in a private institution or facility offering mental health services, from treatment to competency in a private institution or facility offering mental health services, or from a program of community-based or outpatient services.
  - Sec. 21. NRS 433A.430 is hereby amended to read as follows:
- 433A.430 1. Whenever the Administrator determines that division facilities within the State are inadequate for the care of any person with mental illness, the Administrator may designate two physicians, licensed under the provisions of chapter 630 or 633 of NRS [-] and familiar with the field of psychiatry, or advanced practice registered nurses who have the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120, to examine that person. If the two physicians or advanced practice registered nurses concur with the opinion of the Administrator, the Administrator may:
- (a) Transfer the person to a state that is a party to the Interstate Compact on Mental Health ratified and enacted in NRS 433.4543 in the manner provided in the Compact; or

- (b) Contract with appropriate corresponding authorities in any other state of the United States that is not a party to the Compact and has adequate facilities for such purposes for the reception, detention, care or treatment of that person, but if the person in any manner objects to the transfer, the procedures in subsection 3 of NRS 433.484 and subsections 2 and 3 of NRS 433.534 must be followed. The two physicians *or advanced practice registered nurses* so designated are entitled to a reasonable fee for their services which must be paid by the county of the person's last known residence.
- 2. Money to carry out the provisions of this section must be provided by direct legislative appropriation.
  - Sec. 22. NRS 433A.750 is hereby amended to read as follows:
  - 433A.750 1. A person who:
- (a) Without probable cause for believing a person to be mentally ill causes or conspires with or assists another to cause the involuntary court-ordered admission of the person under this chapter; or
- (b) Causes or conspires with or assists another to cause the denial to any person of any right accorded to the person under this chapter,
- ⇒ is guilty of a category D felony and shall be punished as provided in NRS 193.130.
- 2. Unless a greater penalty is provided in subsection 1, a person who knowingly and willfully violates any provision of this chapter regarding the admission of a person to, or discharge of a person from, a public or private mental health facility or a program of community-based or outpatient services is guilty of a gross misdemeanor.
- 3. A person who, without probable cause for believing another person to be mentally ill, executes a petition, application or certificate pursuant to this chapter, by which the person secures or attempts to secure the apprehension, hospitalization, detention, admission or restraint of the person alleged to be mentally ill, or any physician, psychiatrist, licensed psychologist, advanced practice registered nurse or other person professionally qualified in the field of psychiatric mental health who knowingly makes any false certificate or application pursuant to this chapter as to the mental condition of any person is guilty of a category D felony and shall be punished as provided in NRS 193.130.
- Sec. 23. Chapter 440 of NRS is hereby amended by adding thereto a new section to read as follows:

"Advanced practice registered nurse" means a registered nurse who holds a valid license as an advanced practice registered nurse issued by the State Board of Nursing pursuant to NRS 632.237.

- Sec. 24. NRS 440.340 is hereby amended to read as follows:
- 440.340 1. Stillborn children or those dead at birth shall be registered as a stillbirth and a certificate of stillbirth shall be filed with the local health officer in the usual form and manner.
- 2. The medical certificate of the cause of death shall be signed by the attending physician  $\frac{1}{2}$  or attending advanced practice registered nurse, if any.

- 3. Midwives shall not sign certificates of stillbirth for stillborn children; but such cases, and stillbirths occurring without attendance of either physician , *advanced practice registered nurse* or midwife, shall be treated as deaths without medical attention as provided for in this chapter.
  - Sec. 25. NRS 440.380 is hereby amended to read as follows:
- 440.380 1. The medical certificate of death must be signed by the physician [,] or advanced practice registered nurse, if any, last in attendance on the deceased, or pursuant to regulations adopted by the Board, it may be signed by the attending physician's associate physician, the chief medical officer of the hospital or institution in which the death occurred, or the pathologist who performed an autopsy upon the deceased. The person who signs the medical certificate of death shall specify:
  - (a) The social security number of the deceased.
  - (b) The hour and day on which the death occurred.
- (c) The cause of death, so as to show the cause of disease or sequence of causes resulting in death, giving first the primary cause of death or the name of the disease causing death, and the contributory or secondary cause, if any, and the duration of each.
- 2. In deaths in hospitals or institutions, or of nonresidents, the physician *or advanced practice registered nurse* shall furnish the information required under this section, and may state where, in [the physician's] his or her opinion, the disease was contracted.
  - Sec. 26. NRS 440.390 is hereby amended to read as follows:
- 440.390 The certificate of stillbirth must be presented by the funeral director or person acting as undertaker to the physician *or advanced practice registered nurse* in attendance at the stillbirth, for the certificate of the fact of stillbirth and the medical data pertaining to stillbirth as the physician *or advanced practice registered nurse* can furnish them in his or her professional capacity.
  - Sec. 27. NRS 440.400 is hereby amended to read as follows:
- 440.400 Indefinite and unsatisfactory terms, indicating only symptoms of disease or conditions resulting from disease, will not be held sufficient for issuing a burial or removal permit. Any certificate containing only such terms as defined by the State Board of Health shall be returned to the physician *or advanced practice registered nurse* for correction and more definite statement.
  - Sec. 28. NRS 440.415 is hereby amended to read as follows:
- 440.415 1. A physician who anticipates the death of a patient because of an illness, infirmity or disease may authorize a specific registered nurse or physician assistant or the registered nurses or physician assistants employed by a medical facility or program for hospice care to make a pronouncement of death if they attend the death of the patient. An advanced practice registered nurse who anticipates the death of a patient because of an illness, infirmity or disease may authorize a specific registered nurse or the registered nurses employed by a medical facility or program for hospice care to make a pronouncement of death if they attend the death of the patient.

- 2. Such an authorization is valid for 120 days. Except as otherwise provided in subsection 3, the authorization must:
  - (a) Be a written order entered on the chart of the patient;
- (b) State the name of the registered nurse or nurses or physician assistant or assistants authorized to make the pronouncement of death; and
- (c) Be signed and dated by the physician [.] or advanced practice registered nurse.
- 3. If the patient is in a medical facility or under the care of a program for hospice care, the physician may authorize the registered nurses or physician assistants employed by the facility or program, or an advanced practice registered nurse may authorize such a registered nurse, to make pronouncements of death without specifying the name of each nurse or physician assistant, as applicable.
- 4. If a pronouncement of death is made by a registered nurse or physician assistant, the physician *or advanced practice registered nurse* who authorized that action shall sign the medical certificate of death within 24 hours after being presented with the certificate.
- 5. If a patient in a medical facility is pronounced dead by a registered nurse or physician assistant employed by the facility, the registered nurse or physician assistant may release the body of the patient to a licensed funeral director pending the completion of the medical certificate of death by the attending physician *or attending advanced practice registered nurse* if the physician , *advanced practice registered nurse* or the medical director or chief of the medical staff of the facility has authorized the release in writing.
- 6. The Board may adopt regulations concerning the authorization of a registered nurse or physician assistant to make pronouncements of death.
  - 7. As used in this section:
- (a) "Advanced practice registered nurse" means a registered nurse who holds a valid license as an advanced practice registered nurse issued by the State Board of Nursing pursuant to NRS 632.237.
  - (b) "Medical facility" means:
    - (1) A facility for skilled nursing as defined in NRS 449.0039;
    - (2) A facility for hospice care as defined in NRS 449.0033;
    - (3) A hospital as defined in NRS 449.012;
- (4) An agency to provide nursing in the home as defined in NRS 449.0015; or
  - (5) A facility for intermediate care as defined in NRS 449.0038.
- $\frac{(b)}{(c)}$  "Physician assistant" means a person who holds a license as a physician assistant pursuant to chapter 630 or 633 of NRS.
- $\frac{\{(e)\}}{\{(d)\}}$  "Program for hospice care" means a program for hospice care licensed pursuant to chapter 449 of NRS.
- [(d)] (e) "Pronouncement of death" means a declaration of the time and date when the cessation of the cardiovascular and respiratory functions of a patient occurs as recorded in the patient's medical record by the attending provider of health care in accordance with the provisions of this chapter.

- Sec. 29. NRS 440.420 is hereby amended to read as follows:
- 440.420 1. In case of any death occurring without medical attendance, the funeral director shall notify the local health officer, coroner or coroner's deputy of such death and refer the case to the local health officer, coroner or coroner's deputy for immediate investigation and certification.
- 2. Where there is no qualified physician *or advanced practice registered nurse* in attendance, and in such cases only, the local health officer is authorized to make the certificate and return from the statements of relatives or other persons having adequate knowledge of the facts.
- 3. If the death was caused by unlawful or suspicious means, the local health officer shall then refer the case to the coroner for investigation and certification.
- 4. In counties which have adopted an ordinance authorizing a coroner's examination in cases of sudden infant death syndrome, the funeral director shall notify the local health officer whenever the cause or suspected cause of death is sudden infant death syndrome. The local health officer shall then refer the case to the coroner for investigation and certification.
- 5. The coroner or the coroner's deputy may certify the cause of death in any case which is referred to the coroner by the local health officer or pursuant to a local ordinance.
  - Sec. 30. NRS 440.470 is hereby amended to read as follows:
- 440.470 The funeral director or person acting as undertaker shall present the certificate to the attending physician [,] or attending advanced practice registered nurse, if any, or to the health officer or coroner, for the medical certificate of the cause of death and other particulars necessary to complete the record.
  - Sec. 31. NRS 440.720 is hereby amended to read as follows:
- 440.720 Any physician *or advanced practice registered nurse* who was in medical attendance upon any deceased person at the time of death who neglects or refuses to make out and deliver to the funeral director, sexton or other person in charge of the interment, removal or other disposition of the body, upon request, the medical certificate of the cause of death shall be punished by a fine of not more than \$250.
  - Sec. 32. NRS 440.730 is hereby amended to read as follows:
- 440.730 If any physician *or advanced practice registered nurse* knowingly makes a false certification of the cause of death in any case, the physician *or advanced practice registered nurse* shall be punished by a fine of not more than \$250.
  - Sec. 33. NRS 440.770 is hereby amended to read as follows:
- 440.770 Any person who furnishes false information to a physician, *advanced practice registered nurse*, funeral director, midwife or informant for the purpose of making incorrect certification of births or deaths shall be punished by a fine of not more than \$250.

- Sec. 34. Chapter 449 of NRS is hereby amended by adding thereto the provisions set forth as sections 35 to 38, inclusive, of this act.
- Sec. 35. "Advanced practice registered nurse" means a registered nurse who holds a valid license as an advanced practice registered nurse issued by the State Board of Nursing pursuant to NRS 632.237.
- Sec. 36. "Attending advanced practice registered nurse" means an advanced practice registered nurse who has primary responsibility for the treatment and care of the patient.
- Sec. 37. "Advanced practice registered nurse" has the meaning ascribed to it in section 35 of this act.
- Sec. 38. "Attending advanced practice registered nurse" has the meaning ascribed to it in section 36 of this act.
  - Sec. 39. NRS 449.535 is hereby amended to read as follows:
- 449.535 1. NRS 449.535 to 449.690, inclusive, *and sections 35 and 36 of this act* may be cited as the Uniform Act on Rights of the Terminally Ill.
- 2. NRS 449.535 to 449.690, inclusive, *and sections 35 and 36 of this act* must be applied and construed to effectuate its general purpose to make uniform the law with respect to the subject of those sections among states enacting the Uniform Act on Rights of the Terminally III.
  - Sec. 40. NRS 449.540 is hereby amended to read as follows:
- 449.540 As used in NRS 449.535 to 449.690, inclusive, and sections 35 and 36 of this act, unless the context otherwise requires, the words and terms defined in NRS 449.550 to 449.590, inclusive, and sections 35 and 36 of this act have the meanings ascribed to them in those sections.
  - Sec. 41. NRS 449.585 is hereby amended to read as follows:
- 449.585 "Qualified patient" means a patient 18 or more years of age who has executed a declaration and who has been determined by the attending physician *or attending advanced practice registered nurse* to be in a terminal condition.
  - Sec. 42. NRS 449.590 is hereby amended to read as follows:
- 449.590 "Terminal condition" means an incurable and irreversible condition that, without the administration of life-sustaining treatment, will, in the opinion of the attending physician [,] or attending advanced practice registered nurse, result in death within a relatively short time.
  - Sec. 43. NRS 449.610 is hereby amended to read as follows:
- 449.610 A declaration directing a physician *or advanced practice registered nurse* to withhold or withdraw life-sustaining treatment may, but need not, be in the following form:

## **DECLARATION**

If I should have an incurable and irreversible condition that, without the administration of life-sustaining treatment, will, in the opinion of my attending physician [,] or attending advanced practice registered nurse, cause my death within a relatively short time, and I am no longer able to make decisions regarding my medical treatment, I direct my attending physician [,] or attending advanced practice registered nurse,

pursuant to NRS 449.535 to 449.690, inclusive, and sections 35 and 36 of this act, to withhold or withdraw treatment that only prolongs the process of dying and is not necessary for my comfort or to alleviate pain.

If you wish to include this statement in this declaration, you must INITIAL the statement in the box provided:

Withholding or withdrawal of artificial nutrition and hydration may result in death by starvation or dehydration. Initial this box if you want to receive or continue receiving artificial nutrition and hydration by way of the gastrointestinal tract after all other treatment is withheld pursuant to this declaration.

	[
Signed this day of,	
	Signature
	Address
The declarant voluntarily signed this writing	ng in my presence.
	Witness
	Address
	Witness
	Address

Sec. 44. NRS 449.613 is hereby amended to read as follows:

449.613 1. A declaration that designates another person to make decisions governing the withholding or withdrawal of life-sustaining treatment may, but need not, be in the following form:

## **DECLARATION**

If I should have an incurable and irreversible condition that, without the administration of life-sustaining treatment, will, in the opinion of my attending physician [,] or attending advanced practice registered nurse, cause my death within a relatively short time, and I am no longer able to make decisions regarding my medical treatment, I appoint .............................. or, if he or she is not reasonably available or is unwilling to serve, ................, to make decisions on my behalf regarding withholding or withdrawal of treatment that only prolongs the process of dying and is not necessary for my comfort or to alleviate pain, pursuant to NRS 449.535 to 449.690, inclusive [.], and sections 35 and 36 of this act. (If the person or persons I have so appointed are not reasonably available or are unwilling to serve, I direct my attending physician [.] or attending advanced practice registered nurse, pursuant to those sections, to withhold or withdraw treatment that only prolongs the process of dying and is not necessary for my comfort or to alleviate pain.)

Strike language in parentheses if you do not desire it.

If you wish to include this statement in this declaration, you must INITIAL the statement in the box provided:

Withholding or withdrawal of artificial nutrition and hydration may result in death by starvation or dehydration. Initial this box if you want to receive or continue receiving artificial nutrition and hydration by way of the gastrointestinal tract after all other treatment is withheld pursuant to this declaration.

	[
Signed this day of	,
\$	Signature
	Address
The declarant voluntarily signed	this writing in my presence.
,	Witness
	Address
•	Witness
	Address
Name and address of each design	iee.
	Name
	Address

- 2. The designation of an agent pursuant to chapter 162A of NRS, or the judicial appointment of a guardian, who is authorized to make decisions regarding the withholding or withdrawal of life-sustaining treatment, constitutes for the purpose of NRS 449.535 to 449.690, inclusive, *and sections 35 and 36 of this act*, a declaration designating another person to act for the declarant pursuant to subsection 1.
  - Sec. 45. NRS 449.617 is hereby amended to read as follows:
- 449.617 A declaration becomes operative when it is communicated to the attending physician or attending advanced practice registered nurse and the declarant is determined by the attending physician or attending advanced practice registered nurse to be in a terminal condition and no longer able to make decisions regarding administration of life-sustaining treatment. When the declaration becomes operative, the attending physician and other providers of health care shall act in accordance with its provisions and with the instructions of a person designated pursuant to NRS 449.600 or comply with the requirements of NRS 449.628 to transfer care of the declarant.
  - Sec. 46. NRS 449.622 is hereby amended to read as follows:
- 449.622 Upon determining that a declarant is in a terminal condition, the attending physician *or attending advanced practice registered nurse* who knows of a declaration shall record the determination, and the terms of the declaration if not already a part of the record, in the declarant's medical record.

- Sec. 47. NRS 449.624 is hereby amended to read as follows:
- 449.624 1. A qualified patient may make decisions regarding life-sustaining treatment so long as the patient is able to do so.
- 2. NRS 449.535 to 449.690, inclusive, *and sections 35 and 36 of this act* do not affect the responsibility of the attending physician or other provider of health care to provide treatment for a patient's comfort or alleviation of pain.
- 3. Artificial nutrition and hydration by way of the gastrointestinal tract shall be deemed a life-sustaining treatment and must be withheld or withdrawn from a qualified patient unless a different desire is expressed in writing by the patient. For a patient who has no effective declaration, artificial nutrition and hydration must not be withheld unless a different desire is expressed in writing by the patient's authorized representative or the family member with the authority to consent or withhold consent.
- 4. Life-sustaining treatment must not be withheld or withdrawn pursuant to a declaration from a qualified patient known to the attending physician *or attending advanced practice registered nurse* to be pregnant so long as it is probable that the fetus will develop to the point of live birth with continued application of life-sustaining treatment.
  - Sec. 48. NRS 449.626 is hereby amended to read as follows:
- 449.626 1. If written consent to the withholding or withdrawal of the treatment, attested by two witnesses, is given to the attending physician [,] or attending advanced practice registered nurse, the attending physician or attending advanced practice registered nurse may withhold or withdraw life-sustaining treatment from a patient who:
- (a) Has been determined by the attending physician *or attending advanced* practice registered nurse to be in a terminal condition and no longer able to make decisions regarding administration of life-sustaining treatment; and
  - (b) Has no effective declaration.
- 2. The authority to consent or to withhold consent under subsection 1 may be exercised by the following persons, in order of priority:
  - (a) The spouse of the patient;
- (b) An adult child of the patient or, if there is more than one adult child, a majority of the adult children who are reasonably available for consultation;
  - (c) The parents of the patient;
- (d) An adult sibling of the patient or, if there is more than one adult sibling, a majority of the adult siblings who are reasonably available for consultation; or
- (e) The nearest other adult relative of the patient by blood or adoption who is reasonably available for consultation.
- 3. If a class entitled to decide whether to consent is not reasonably available for consultation and competent to decide, or declines to decide, the next class is authorized to decide, but an equal division in a class does not authorize the next class to decide.
- 4. A decision to grant or withhold consent must be made in good faith. A consent is not valid if it conflicts with the expressed intention of the patient.

- 5. A decision of the attending physician *or attending advanced practice registered nurse* acting in good faith that a consent is valid or invalid is conclusive.
- 6. Life-sustaining treatment must not be withheld or withdrawn pursuant to this section from a patient known to the attending physician *or attending advanced practice registered nurse* to be pregnant so long as it is probable that the fetus will develop to the point of live birth with continued application of life-sustaining treatment.
  - Sec. 49. NRS 449.640 is hereby amended to read as follows:
- 449.640 1. If a patient in a terminal condition has a declaration in effect and becomes comatose or is otherwise rendered incapable of communicating with his or her attending physician [+] or attending advanced practice registered nurse, the physician or advanced practice registered nurse must give weight to the declaration as evidence of the patient's directions regarding the application of life-sustaining treatments, but the attending physician or attending advanced practice registered nurse may also consider other factors in determining whether the circumstances warrant following the directions.
- 2. No hospital or other medical facility, physician , *advanced practice registered nurse* or person working under the direction of a physician *or advanced practice registered nurse* is subject to criminal or civil liability for failure to follow the directions of the patient to withhold or withdraw life-sustaining treatments.
  - Sec. 50. NRS 449.660 is hereby amended to read as follows:
- 449.660 1. A physician or other provider of health care who willfully fails to transfer the care of a patient in accordance with NRS 449.628 is guilty of a gross misdemeanor.
- 2. A physician *or advanced practice registered nurse* who willfully fails to record a determination of terminal condition or the terms of a declaration in accordance with NRS 449.622 is guilty of a misdemeanor.
- 3. A person who willfully conceals, cancels, defaces or obliterates the declaration of another without the declarant's consent or who falsifies or forges a revocation of the declaration of another is guilty of a misdemeanor.
- 4. A person who falsifies or forges the declaration of another, or willfully conceals or withholds personal knowledge of a revocation, with the intent to cause a withholding or withdrawal of life-sustaining treatment contrary to the wishes of the declarant and thereby directly causes life-sustaining treatment to be withheld or withdrawn and death to be hastened is guilty of murder.
- 5. A person who requires or prohibits the execution of a declaration as a condition of being insured for, or receiving, health care is guilty of a misdemeanor.
- 6. A person who coerces or fraudulently induces another to execute a declaration, or who falsifies or forges the declaration of another except as provided in subsection 4, is guilty of a gross misdemeanor.
- 7. The penalties provided in this section do not displace any sanction applicable under other law.

- Sec. 51. NRS 449.690 is hereby amended to read as follows:
- 449.690 1. A declaration executed in another state in compliance with the law of that state or of this State is valid for purposes of NRS 449.535 to 449.690, inclusive [.], and sections 35 and 36 of this act.
- 2. An instrument executed anywhere before July 1, 1977, which clearly expresses the intent of the declarant to direct the withholding or withdrawal of life-sustaining treatment from the declarant when the declarant is in a terminal condition and becomes comatose or is otherwise rendered incapable of communicating with his or her attending physician [1] or attending advanced practice registered nurse, if executed in a manner which attests voluntary execution, or executed anywhere before October 1, 1991, which substantially complies with NRS 449.600, and has not been subsequently revoked, is effective under NRS 449.535 to 449.690, inclusive [1], and sections 35 and 36 of this act.
- 3. As used in this section, "state" includes the District of Columbia, the Commonwealth of Puerto Rico, and a territory or insular possession subject to the jurisdiction of the United States.
  - Sec. 52. NRS 449.691 is hereby amended to read as follows:
- 449.691 As used in NRS 449.691 to 449.697, inclusive, and sections 37 and 38 of this act, unless the context otherwise requires, the words and terms defined in NRS 449.6912 to 449.6934, inclusive, and sections 37 and 38 of this act have the meanings ascribed to them in those sections.
  - Sec. 53. NRS 449.693 is hereby amended to read as follows:
- 449.693 ["Physician] "Provider Order for Life-Sustaining Treatment form" or "POLST form" means the form prescribed pursuant to NRS 449.694 that:
  - 1. Records the wishes of the patient; and
- 2. Directs a provider of health care regarding the provision of life-resuscitating treatment and life-sustaining treatment.
  - Sec. 54. NRS 449.694 is hereby amended to read as follows:
- 449.694 The Board shall prescribe a standardized [Physician] Provider Order for Life-Sustaining Treatment form, commonly known as a POLST form, which:
  - 1. Is uniquely identifiable and has a uniform color;
- 2. Provides a means by which to indicate whether the patient has made an anatomical gift pursuant to NRS 451.500 to 451.598, inclusive;
- 3. Gives direction to a provider of health care or health care facility regarding the use of emergency care and life-sustaining treatment;
- 4. Is intended to be honored by any provider of health care who treats the patient in any health-care setting, including, without limitation, the patient's residence, a health care facility or the scene of a medical emergency; and
- 5. Includes such other features and information as the Board may deem advisable.
  - Sec. 55. NRS 449.6942 is hereby amended to read as follows:

- 449.6942 1. A physician *or advanced practice registered nurse* shall take the actions described in subsection 2:
- (a) If the physician *or advanced practice registered nurse* diagnoses a patient with a terminal condition;
- (b) If the physician *or advanced practice registered nurse* determines, for any reason, that a patient has a life expectancy of less than 5 years; or
  - (c) At the request of a patient.
- 2. Upon the occurrence of any of the events specified in subsection 1, the physician *or advanced practice registered nurse* shall explain to the patient:
- (a) The existence and availability of the [Physician] Provider Order for Life-Sustaining Treatment form;
  - (b) The features of and procedures offered by way of the POLST form; and
- (c) The differences between a POLST form and the other types of advance directives.
- 3. Upon the request of the patient, the physician *or advanced practice registered nurse* shall complete the POLST form based on the preferences and medical indications of the patient.
- 4. A POLST form is valid upon execution by a physician *or advanced* practice registered nurse and:
  - (a) If the patient is 18 years of age or older and of sound mind, the patient;
- (b) If the patient is 18 years of age or older and incompetent, the representative of the patient; or
- (c) If the patient is less than 18 years of age, the patient and a parent or legal guardian of the patient.
- 5. As used in this section, "terminal condition" has the meaning ascribed to it in NRS 449.590.
  - Sec. 56. NRS 449.6944 is hereby amended to read as follows:
- 449.6944 1. A [Physician] Provider Order for Life-Sustaining Treatment form may be revoked at any time and in any manner by:
- (a) The patient who executed it, if competent, without regard to his or her age or physical condition;
  - (b) If the patient is incompetent, the representative of the patient; or
- (c) If the patient is less than 18 years of age, a parent or legal guardian of the patient.
- 2. The revocation of a POLST form is effective upon the communication to a provider of health care, by the patient or a witness to the revocation, of the desire to revoke the form. The provider of health care to whom the revocation is communicated shall:
  - (a) Make the revocation a part of the medical record of the patient; or
- (b) Cause the revocation to be made a part of the medical record of the patient.
  - Sec. 57. NRS 449.6946 is hereby amended to read as follows:
- 449.6946 1. If a valid [Physician] Provider Order for Life-Sustaining Treatment form sets forth a declaration, direction or order which conflicts with

- a declaration, direction or order set forth in one or more of the other types of advance directives:
- (a) The declaration, direction or order set forth in the document executed most recently is valid; and
- (b) Any other declarations, directions or orders that do not conflict with a declaration, direction or order set forth in another document referenced in this subsection remain valid.
- 2. If a valid POLST form sets forth a declaration, direction or order to provide life-resuscitating treatment to a patient who also possesses a do-not-resuscitate identification, a provider of health care shall not provide life-resuscitating treatment if the do-not-resuscitate identification is on the person of the patient when the need for life-resuscitating treatment arises.
  - Sec. 58. NRS 449.6948 is hereby amended to read as follows:
- 449.6948 1. A provider of health care is not guilty of unprofessional conduct or subject to civil or criminal liability if:
- (a) The provider of health care withholds emergency care or life-sustaining treatment:
- (1) In compliance with a [Physician] Provider Order for Life-Sustaining Treatment form and the provisions of NRS 449.691 to 449.697, inclusive [;], and sections 37 and 38 of this act; or
- (2) In violation of a [Physician] Provider Order for Life-Sustaining Treatment form if the provider of health care is acting in accordance with a declaration, direction or order set forth in one or more of the other types of advance directives and:
  - (I) Complies with the provisions of NRS 449.695; or
- (II) Reasonably and in good faith, at the time the emergency care or life-sustaining treatment is withheld, is unaware of the existence of the POLST form or believes that the POLST form has been revoked pursuant to NRS 449.6944; or
- (b) The provider of health care provides emergency care or life-sustaining treatment:
- (1) Pursuant to an oral or written request made by the patient, the representative of the patient, or a parent or legal guardian of the patient, who may revoke the POLST form pursuant to NRS 449.6944;
- (2) Pursuant to an observation that the patient, the representative of the patient or a parent or legal guardian of the patient has revoked, or otherwise indicated that he or she wishes to revoke, the POLST form pursuant to NRS 449.6944; or
- (3) In violation of a POLST form, if the provider of health care reasonably and in good faith, at the time the emergency care or life-sustaining treatment is provided, is unaware of the existence of the POLST form or believes that the POLST form has been revoked pursuant to NRS 449.6944.
- 2. A health care facility, ambulance service, fire-fighting agency or other entity that employs a provider of health care is not guilty of unprofessional

conduct or subject to civil or criminal liability for the acts or omissions of the employee carried out in accordance with the provisions of subsection 1.

- Sec. 59. NRS 449.695 is hereby amended to read as follows:
- 449.695 1. Except as otherwise provided in this section and NRS 449.6946, a provider of health care shall comply with a valid [Physician] *Provider* Order for Life-Sustaining Treatment form, regardless of whether the provider of health care is employed by a health care facility or other entity affiliated with the physician *or advanced practice registered nurse* who executed the POLST form.
- 2. A physician *or advanced practice registered nurse* may medically evaluate the patient and, based upon the evaluation, may recommend new orders consistent with the most current information available about the patient's health status and goals of care. Before making a modification to a valid POLST form, the physician *or advanced practice registered nurse* shall consult the patient or, if the patient is incompetent, shall make a reasonable attempt to consult the representative of the patient and the patient's attending physician [-] or attending advanced practice registered nurse.
- 3. Except as otherwise provided in subsection 4, a provider of health care who is unwilling or unable to comply with a valid POLST form shall take all reasonable measures to transfer the patient to a physician , *advanced practice registered nurse* or health care facility so that the POLST form will be followed.
- 4. Life-sustaining treatment must not be withheld or withdrawn pursuant to a POLST form of a patient known to the attending physician *or attending advanced practice registered nurse* to be pregnant, so long as it is probable that the fetus will develop to the point of live birth with the continued application of life-sustaining treatment.
- 5. Nothing in this section requires a provider of health care to comply with a valid POLST form if the provider of health care does not have actual knowledge of the existence of the form.
  - Sec. 60. NRS 449.6952 is hereby amended to read as follows:
- 449.6952 1. Unless he or she has knowledge to the contrary, a provider of health care may assume that a [Physician] Provider Order for Life-Sustaining Treatment form complies with the provisions of NRS 449.691 to 449.697, inclusive, and sections 37 and 38 of this act and is valid.
- 2. The provisions of NRS 449.691 to 449.697, inclusive, *and sections 37 and 38 of this act* do not create a presumption concerning the intention of a:
- (a) Patient if the patient, the representative of the patient or a parent or legal guardian of the patient has revoked the POLST form pursuant to NRS 449.6944; or
  - (b) Person who has not executed a POLST form,
- → concerning the use or withholding of emergency care or life-sustaining treatment.
  - Sec. 61. NRS 449.6954 is hereby amended to read as follows:

- 449.6954 1. Death that results when emergency care or life-sustaining treatment has been withheld pursuant to a [Physician] Provider Order for Life Sustaining Treatment form and in accordance with the provisions of NRS 449.691 to 449.697, inclusive, and sections 37 and 38 of this act does not constitute a suicide or homicide.
- 2. The execution of a POLST form does not affect the sale, procurement or issuance of a policy of life insurance or an annuity, nor does it affect, impair or modify the terms of an existing policy of life insurance or an annuity. A policy of life insurance or an annuity is not legally impaired or invalidated if emergency care or life-sustaining treatment has been withheld from an insured who has executed a POLST form, notwithstanding any term in the policy or annuity to the contrary.
- 3. A person may not prohibit or require the execution of a POLST form as a condition of being insured for, or receiving, health care.
  - Sec. 62. NRS 449.6956 is hereby amended to read as follows:
  - 449.6956 1. It is unlawful for:
- (a) A provider of health care to willfully fail to transfer the care of a patient in accordance with subsection 3 of NRS 449.695.
- (b) A person to willfully conceal, cancel, deface or obliterate a [Physician] *Provider* Order for Life-Sustaining Treatment form without the consent of the patient who executed the form.
- (c) A person to falsify or forge the POLST form of another person, or willfully conceal or withhold personal knowledge of the revocation of the POLST form of another person, with the intent to cause the withholding or withdrawal of emergency care or life-sustaining treatment contrary to the wishes of the patient.
- (d) A person to require or prohibit the execution of a POLST form as a condition of being insured for, or receiving, health care in violation of subsection 3 of NRS 449.6954.
- (e) A person to coerce or fraudulently induce another to execute a POLST form.
- 2. A person who violates any of the provisions of this section is guilty of a misdemeanor.
  - Sec. 63. NRS 449.696 is hereby amended to read as follows:
- 449.696 1. A [Physician] Provider Order for Life-Sustaining Treatment form executed in another state in compliance with the laws of that state or this State is valid for the purposes of NRS 449.691 to 449.697, inclusive  $[\cdot]$ , and sections 37 and 38 of this act.
- 2. As used in this section, "state" includes the District of Columbia, the Commonwealth of Puerto Rico and a territory or insular possession subject to the jurisdiction of the United States.
  - Sec. 64. NRS 449.779 is hereby amended to read as follows:
- 449.779 1. Except as otherwise provided in subsection 2, mechanical restraint may be used on a person with a disability who is a patient at a facility only if:

- (a) An emergency exists that necessitates the use of mechanical restraint;
- (b) A medical order authorizing the use of mechanical restraint is obtained from the patient's treating physician *or advanced practice registered nurse* before the application of the mechanical restraint or not later than 15 minutes after the application of the mechanical restraint;
- (c) The physician or advanced practice registered nurse who signed the order required pursuant to paragraph (b) or the attending physician or attending advanced practice registered nurse examines the patient not later than 1 working day immediately after the application of the mechanical restraint;
- (d) The mechanical restraint is applied by a member of the staff of the facility who is trained and qualified to apply mechanical restraint;
- (e) The patient is given the opportunity to move and exercise the parts of his or her body that are restrained at least 10 minutes per every 60 minutes of restraint;
- (f) A member of the staff of the facility lessens or discontinues the restraint every 15 minutes to determine whether the patient will stop or control his or her inappropriate behavior without the use of the restraint;
- (g) The record of the patient contains a notation that includes the time of day that the restraint was lessened or discontinued pursuant to paragraph (f), the response of the patient and the response of the member of the staff of the facility who applied the mechanical restraint;
- (h) A member of the staff of the facility continuously monitors the patient during the time that mechanical restraint is used on the patient; and
- (i) The patient is released from the mechanical restraint as soon as the behavior of the patient no longer presents an immediate threat to himself or herself or others.
- 2. Mechanical restraint may be used on a person with a disability who is a patient at a facility and the provisions of subsection 1 do not apply if the mechanical restraint is used to:
  - (a) Treat the medical needs of a patient;
- (b) Protect a patient who is known to be at risk of injury to himself or herself because the patient lacks coordination or suffers from frequent loss of consciousness;
  - (c) Provide proper body alignment to a patient; or
- (d) Position a patient who has physical disabilities in a manner prescribed in the patient's plan of treatment.
- 3. If mechanical restraint is used on a person with a disability who is a patient at a facility in an emergency, the use of the procedure must be reported as a denial of rights pursuant to NRS 449.786, regardless of whether the use of the procedure is authorized by statute. The report must be made not later than 1 working day after the procedure is used.
  - Sec. 65. NRS 449.780 is hereby amended to read as follows:
- 449.780 1. Chemical restraint may only be used on a person with a disability who is a patient at a facility if:

- (a) The patient has been diagnosed as a person with mental illness, as defined in NRS 433A.115, and is receiving mental health services from a facility;
- (b) The chemical restraint is administered to the patient while he or she is under the care of the facility;
  - (c) An emergency exists that necessitates the use of chemical restraint;
- (d) A medical order authorizing the use of chemical restraint is obtained from the patient's attending physician, [or] psychiatrist [;] or advanced practice registered nurse;
- (e) The physician, [or] psychiatrist or advanced practice registered nurse who signed the order required pursuant to paragraph (d) examines the patient not later than 1 working day immediately after the administration of the chemical restraint; and
- (f) The chemical restraint is administered by a person licensed to administer medication.
- 2. If chemical restraint is used on a person with a disability who is a patient, the use of the procedure must be reported as a denial of rights pursuant to NRS 449.786, regardless of whether the use of the procedure is authorized by statute. The report must be made not later than 1 working day after the procedure is used.
  - Sec. 66. NRS 449.905 is hereby amended to read as follows:
- 449.905 "Advance directive" means an advance directive for health care. The term includes:
- 1. A declaration governing the withholding or withdrawal of life-sustaining treatment as set forth in NRS 449.535 to 449.690, inclusive [;], and sections 35 and 36 of this act;
- 2. A durable power of attorney for health care as set forth in NRS 162A.700 to 162A.865, inclusive:
  - 3. A do-not-resuscitate order as defined in NRS 450B.420; and
- 4. A [Physician] Provider Order for Life-Sustaining Treatment form as defined in NRS 449.693.
  - Sec. 67. NRS 449.945 is hereby amended to read as follows:
- 449.945 1. The provisions of NRS 449.900 to 449.965, inclusive, do not require a provider of health care to inquire whether a patient has an advance directive registered on the Registry or to access the Registry to determine the terms of the advance directive.
- 2. A provider of health care who relies in good faith on the provisions of an advance directive retrieved from the Registry is immune from criminal and civil liability as set forth in:
- (a) NRS 449.630, if the advance directive is a declaration governing the withholding or withdrawal of life-sustaining treatment executed pursuant to NRS 449.535 to 449.690, inclusive, *and sections 35 and 36 of this act* or a durable power of attorney for health care executed pursuant to NRS 162A.700 to 162A.865, inclusive;

- (b) NRS 449.691 to 449.697, inclusive, *and sections 37 and 38 of this act*, if the advance directive is a [Physician] Provider Order for Life-Sustaining Treatment form; or
- (c) NRS 450B.540, if the advance directive is a do-not-resuscitate order as defined in NRS 450B.420.
- Sec. 68. Chapter 450B of NRS is hereby amended by adding thereto the provisions set forth as sections 69 and 70 of this act.
- Sec. 69. "Advanced practice registered nurse" has the meaning ascribed to it in section 35 of this act.
- Sec. 70. "Attending advanced practice registered nurse" has the meaning ascribed to it in section 36 of this act.
  - Sec. 71. NRS 450B.400 is hereby amended to read as follows:
- 450B.400 As used in NRS 450B.400 to 450B.590, inclusive, and sections 69 and 70 of this act, unless the context otherwise requires, the words and terms defined in NRS 450B.405 to 450B.475, inclusive, and sections 69 and 70 of this act have the meanings ascribed to them in those sections.
  - Sec. 72. NRS 450B.410 is hereby amended to read as follows:
  - 450B.410 "Do-not-resuscitate identification" means:
- 1. A form of identification approved by the health authority, which signifies that:
- (a) A person is a qualified patient who wishes not to be resuscitated in the event of cardiac or respiratory arrest; or
- (b) The patient's attending physician or attending advanced practice registered nurse has:
  - (1) Issued a do-not-resuscitate order for the patient;
  - (2) Obtained the written approval of the patient concerning the order; and
  - (3) Documented the grounds for the order in the patient's medical record.
- 2. The term also includes a valid do-not-resuscitate identification issued under the laws of another state.
  - Sec. 73. NRS 450B.420 is hereby amended to read as follows:
- 450B.420 "Do-not-resuscitate order" means a written directive issued by a physician *or advanced practice registered nurse* licensed in this state that emergency life-resuscitating treatment must not be administered to a qualified patient. The term also includes a valid do-not-resuscitate order issued under the laws of another state.
  - Sec. 74. NRS 450B.470 is hereby amended to read as follows:
  - 450B.470 "Qualified patient" means:
- 1. A patient 18 years of age or older who has been determined by the patient's attending physician *or attending advanced practice registered nurse* to be in a terminal condition and who:
- (a) Has executed a declaration in accordance with the requirements of NRS 449.600;
- (b) Has executed a [Physician] Provider Order for Life-Sustaining Treatment form pursuant to NRS 449.691 to 449.697, inclusive, and

sections 37 and 38 of this act, if the form provides that the patient is not to receive life-resuscitating treatment; or

- (c) Has been issued a do-not-resuscitate order pursuant to NRS 450B.510.
- 2. A patient who is less than 18 years of age and who:
- (a) Has been determined by the patient's attending physician *or attending* advanced practice registered nurse to be in a terminal condition; and
- (b) Has executed a [Physician] Provider Order for Life-Sustaining Treatment form pursuant to NRS 449.691 to 449.697, inclusive, and sections 37 and 38 of this act, if the form provides that the patient is not to receive life-resuscitating treatment or has been issued a do-not-resuscitate order pursuant to NRS 450B.510.
  - Sec. 75. NRS 450B.480 is hereby amended to read as follows:
- 450B.480 The provisions of NRS 450B.400 to 450B.590, inclusive, *and sections 69 and 70 of this act* apply only to emergency medical services administered to a qualified patient:
  - 1. Before he or she is admitted to a medical facility; or
- 2. While the qualified patient is being prepared to be transferred, or is being transferred, from one health care facility to another health care facility.
  - Sec. 76. NRS 450B.500 is hereby amended to read as follows:
- 450B.500 Each do-not-resuscitate identification issued by the health authority must include, without limitation:
- 1. An identification number that is unique to the qualified patient to whom the identification is issued:
  - 2. The name and date of birth of the patient; and
- 3. The name of the attending physician or attending advanced practice registered nurse of the patient.
  - Sec. 77. NRS 450B.510 is hereby amended to read as follows:
- 450B.510 1. A physician *or advanced practice registered nurse* licensed in this state may issue a written do-not-resuscitate order only to a patient who has been determined to be in a terminal condition.
- 2. Except as otherwise provided in subsection 3, the order is effective only if the patient has agreed to its terms, in writing, while the patient is capable of making an informed decision.
  - 3. If the patient is a minor, the order is effective only if:
- (a) The parent or legal guardian of the minor has agreed to its terms, in writing; and
- (b) The minor has agreed to its terms, in writing, while the minor is capable of making an informed decision if, in the opinion of the attending physician [,] or attending advanced practice registered nurse, the minor is of sufficient maturity to understand the nature and effect of withholding life-resuscitating treatment.
- 4. A physician *or advanced practice registered nurse* who issues a do-not-resuscitate order may apply, on behalf of the patient, to the health authority for a do-not-resuscitate identification for that patient.

- Sec. 78. NRS 450B.520 is hereby amended to read as follows:
- 450B.520 Except as otherwise provided in NRS 450B.525:
- 1. A qualified patient may apply to the health authority for a do-not resuscitate identification by submitting an application on a form provided by the health authority. To obtain a do-not-resuscitate identification, the patient must comply with the requirements prescribed by the board and sign a form which states that the patient has informed each member of his or her family within the first degree of consanguinity or affinity, whose whereabouts are known to the patient, or if no such members are living, the patient's legal guardian, if any, or if he or she has no such members living and has no legal guardian, his or her caretaker, if any, of the patient's decision to apply for an identification.
  - 2. An application must include, without limitation:
- (a) Certification by the patient's attending physician *or attending advanced* practice registered nurse that the patient suffers from a terminal condition;
- (b) Certification by the patient's attending physician *or attending advanced* practice registered nurse that the patient is capable of making an informed decision or, when the patient was capable of making an informed decision, that the patient:
  - (1) Executed:
- (I) A written directive that life-resuscitating treatment be withheld under certain circumstances;
- (II) A durable power of attorney for health care pursuant to NRS 162A.700 to 162A.865, inclusive; or
- (III) A [Physician] Provider Order for Life-Sustaining Treatment form pursuant to NRS 449.691 to 449.697, inclusive, and sections 37 and 38 of this act, if the form provides that the patient is not to receive life-resuscitating treatment; or
  - (2) Was issued a do-not-resuscitate order pursuant to NRS 450B.510;
- (c) A statement that the patient does not wish that life-resuscitating treatment be undertaken in the event of a cardiac or respiratory arrest;
- (d) The name, signature and telephone number of the patient's attending physician [:] or attending advanced practice registered nurse; and
- (e) The name and signature of the patient or the agent who is authorized to make health care decisions on the patient's behalf pursuant to a durable power of attorney for health care decisions.
  - Sec. 79. NRS 450B.525 is hereby amended to read as follows:
- 450B.525 1. A parent or legal guardian of a minor may apply to the health authority for a do-not-resuscitate identification on behalf of the minor if the minor has been:
- (a) Determined by his or her attending physician *or attending advanced* practice registered nurse to be in a terminal condition; and
  - (b) Issued a do-not-resuscitate order pursuant to NRS 450B.510.
- 2. To obtain such a do-not-resuscitate identification, the parent or legal guardian must:

- (a) Submit an application on a form provided by the health authority; and
- (b) Comply with the requirements prescribed by the board.
- 3. An application submitted pursuant to subsection 2 must include, without limitation:
- (a) Certification by the minor's attending physician *or attending advanced* practice registered nurse that the minor:
  - (1) Suffers from a terminal condition; and
- (2) Has executed a [Physician] Provider Order for Life-Sustaining Treatment form pursuant to NRS 449.691 to 449.697, inclusive, and sections 37 and 38 of this act, if the form provides that the minor is not to receive life-resuscitating treatment or has been issued a do-not-resuscitate order pursuant to NRS 450B.510;
- (b) A statement that the parent or legal guardian of the minor does not wish that life-resuscitating treatment be undertaken in the event of a cardiac or respiratory arrest;
  - (c) The name of the minor;
- (d) The name, signature and telephone number of the minor's attending physician [;] or attending advanced practice registered nurse; and
- (e) The name, signature and telephone number of the minor's parent or legal guardian.
- 4. The parent or legal guardian of the minor may revoke the authorization to withhold life-resuscitating treatment by removing or destroying or requesting the removal or destruction of the identification or otherwise indicating to a person that he or she wishes to have the identification removed or destroyed.
- 5. If, in the opinion of the attending physician [,] or attending advanced practice registered nurse, the minor is of sufficient maturity to understand the nature and effect of withholding life-resuscitating treatment:
- (a) The do-not-resuscitate identification obtained pursuant to this section is not effective without the assent of the minor.
- (b) The minor may revoke the authorization to withhold life-resuscitating treatment by removing or destroying or requesting the removal or destruction of the identification or otherwise indicating to a person that the minor wishes to have the identification removed or destroyed.
  - Sec. 80. NRS 450B.540 is hereby amended to read as follows:
- 450B.540 1. A person is not guilty of unprofessional conduct or subject to civil or criminal liability if the person:
  - (a) Is a physician or advanced practice registered nurse who:
- (1) Causes the withholding of life-resuscitating treatment from a qualified patient who possesses a do-not-resuscitate identification in accordance with the do-not-resuscitate protocol; or
- (2) While the patient is being prepared to be transferred, or is being transferred, from one health care facility to another health care facility, carries out a do-not-resuscitate order that is documented in the medical record of a qualified patient, in accordance with the do-not-resuscitate protocol;

- (b) Pursuant to the direction of or with the authorization of a physician  $\frac{1}{1}$  or advanced practice registered nurse, participates in:
- (1) The withholding of life-resuscitating treatment from a qualified patient who possesses a do-not-resuscitate identification in accordance with the do-not-resuscitate protocol; or
- (2) While the patient is being prepared to be transferred, or is being transferred, from one health care facility to another health care facility, carrying out a do-not-resuscitate order that is documented in the medical record of a qualified patient, in accordance with the do-not-resuscitate protocol; or
  - (c) Administers emergency medical services and:
- (1) Causes or participates in the withholding of life-resuscitating treatment from a qualified patient who possesses a do-not-resuscitate identification;
- (2) Before a qualified patient is admitted to a medical facility, carries out a do-not-resuscitate order that has been issued in accordance with the do-not-resuscitate protocol; or
- (3) While the patient is being prepared to be transferred, or is being transferred, from one health care facility to another health care facility, carries out a do-not-resuscitate order that is documented in the medical record of a qualified patient, in accordance with the do-not-resuscitate protocol.
- 2. A health care facility, ambulance service or fire-fighting agency that employs a person described in subsection 1 is not guilty of unprofessional conduct or subject to civil or criminal liability for the acts or omissions of the employee carried out in accordance with the provisions of subsection 1.
- 3. A physician [,] or advanced practice registered nurse, a person pursuant to the direction or authorization of a physician [,] or advanced practice registered nurse, a health care facility or a person administering emergency medical services who provides life-resuscitating treatment pursuant to:
- (a) An oral or written request made by a qualified patient, or the parent or legal guardian of a qualified patient, who may revoke the authorization to withhold life-resuscitating treatment pursuant to NRS 450B.525 or 450B.530; or
- (b) An observation that a qualified patient, or the parent or legal guardian of a qualified patient, has revoked or otherwise indicated that he or she wishes to revoke the authorization to withhold life-resuscitating treatment pursuant to NRS 450B.525 or 450B.530,
- → is not guilty of unprofessional conduct or subject to civil or criminal liability.
  - Sec. 81. NRS 450B.550 is hereby amended to read as follows:
- 450B.550 1. Except as otherwise provided in subsection 2, a person who administers emergency medical services shall comply with do-not-resuscitate protocol when the person observes a do-not-resuscitate identification or carries out a do-not-resuscitate order.

- 2. A person who administers emergency medical services and who is unwilling or unable to comply with the do-not-resuscitate protocol shall take all reasonable measures to transfer a qualified patient who possesses a do-not-resuscitate identification or has been issued a do-not-resuscitate order to a physician , *advanced practice registered nurse* or health care facility in which the do-not-resuscitate protocol may be followed.
  - Sec. 82. NRS 450B.560 is hereby amended to read as follows:
- 450B.560 1. Unless he or she has knowledge to the contrary, a physician, any other provider of health care or any person who administers emergency medical services may assume that a do-not-resuscitate identification complies with the provisions of NRS 450B.400 to 450B.590, inclusive, and sections 69 and 70 of this act and is valid.
- 2. The provisions of NRS 450B.400 to 450B.590, inclusive, *and sections 69 and 70 of this act* do not create a presumption concerning the intention of a:
- (a) Qualified patient or a parent or legal guardian of a qualified patient who has revoked authorization to withhold life-resuscitating treatment pursuant to NRS 450B.525 or 450B.530; or
  - (b) Person who has not obtained a do-not-resuscitate identification,
- → concerning the use or withholding of life-resuscitating treatment in a life-threatening emergency.
  - Sec. 83. NRS 450B.570 is hereby amended to read as follows:
- 450B.570 1. Death that results when life-resuscitating treatment has been withheld pursuant to the do-not-resuscitate protocol and in accordance with the provisions of NRS 450B.400 to 450B.590, inclusive, *and sections 69 and 70 of this act* does not constitute a suicide or homicide.
- 2. The possession of a do-not-resuscitate identification or the issuance of a do-not-resuscitate order does not affect the sale, procurement or issuance of a policy of life insurance or an annuity or impair or modify the terms of a policy of life insurance or an annuity. A policy of life insurance or an annuity is not legally impaired or invalidated if life-resuscitating treatment has been withheld from an insured who possesses a do-not-resuscitate identification or has been issued a do-not-resuscitate order, notwithstanding any term in the policy or annuity to the contrary.
- 3. A person may not prohibit or require the possession of a do-not-resuscitate identification or the issuance of a do-not-resuscitate order as a condition of being insured for, or receiving, health care.
  - Sec. 84. NRS 450B.590 is hereby amended to read as follows:
- 450B.590 The provisions of NRS 450B.400 to 450B.590, inclusive, and sections 69 and 70 of this act do not:
- 1. Require a physician or other provider of health care to take action contrary to reasonable medical standards;
- 2. Condone, authorize or approve mercy killing, euthanasia or assisted suicide:

- 3. Substitute for any other legally authorized procedure by which a person may direct that the person not be resuscitated in the event of a cardiac or respiratory arrest;
- 4. Except as otherwise provided in NRS 449.6946, affect or impair any right created pursuant to the provisions of NRS 449.535 to 449.690, inclusive, and sections 35 and 36 of this act or 449.691 to 449.697, inclusive [;], and sections 37 and 38 of this act; or
- 5. Affect the right of a qualified patient to make decisions concerning the use of life-resuscitating treatment, if he or she is able to do so, or impair or supersede a right or responsibility of a person to affect the withholding of medical care in a lawful manner.
  - Sec. 85. NRS 451.595 is hereby amended to read as follows:
  - 451.595 1. As used in this section:
- (a) "Advance health-care directive" means a power of attorney for health care or other record signed by a prospective donor, or executed in the manner set forth in NRS 162A.790, containing the prospective donor's direction concerning a health-care decision for the prospective donor.
- (b) "Declaration" means a record signed by a prospective donor, or executed as set forth in NRS 449.600, specifying the circumstances under which life-sustaining treatment may be withheld or withdrawn from the prospective donor. The term includes a [Physician] Provider Order for Life-Sustaining Treatment form executed pursuant to NRS 449.691 to 449.697, inclusive [-], and sections 37 and 38 of this act.
- (c) "Health-care decision" means any decision made regarding the health care of the prospective donor.
- 2. If a prospective donor has a declaration or advance health-care directive and the terms of the declaration or advance health-care directive and the express or implied terms of the potential anatomical gift are in conflict concerning the administration of measures necessary to ensure the medical suitability of a part for transplantation or therapy:
- (a) The attending physician of the prospective donor shall confer with the prospective donor to resolve the conflict or, if the prospective donor is incapable of resolving the conflict, with:
- (1) An agent acting under the declaration or advance health-care directive of the prospective donor; or
- (2) If an agent is not named in the declaration or advance health-care directive or the agent is not reasonably available, any other person authorized by law, other than by a provision of NRS 451.500 to 451.598, inclusive, to make a health-care decision for the prospective donor.
  - (b) The conflict must be resolved as expeditiously as practicable.
- (c) Information relevant to the resolution of the conflict may be obtained from the appropriate procurement organization and any other person authorized to make an anatomical gift of the prospective donor's body or part under NRS 451.556.

- (d) Before the resolution of the conflict, measures necessary to ensure the medical suitability of the part may not be withheld or withdrawn from the prospective donor, if withholding or withdrawing the measures is not medically contraindicated for the appropriate treatment of the prospective donor at the end of his or her life.
  - Sec. 86. NRS 455A.200 is hereby amended to read as follows:
- 455A.200 1. Each organization for youth sports that sanctions or sponsors competitive sports for youths in this State shall adopt a policy concerning the prevention and treatment of injuries to the head which may occur during a youth's participation in those competitive sports, including, without limitation, a concussion of the brain. To the extent practicable, the policy must be consistent with the policy adopted by the Nevada Interscholastic Activities Association pursuant to NRS 385B.080. The policy must provide information concerning the nature and risk of injuries to the head which may occur during a youth's participation in competitive sports, including, without limitation, the risks associated with continuing to participate in competitive sports after sustaining such an injury.
- 2. The policy adopted pursuant to subsection 1 must require that if a youth sustains or is suspected of sustaining an injury to the head while participating in competitive sports, the youth:
  - (a) Must be immediately removed from the competitive sport; and
- (b) May return to the competitive sport if the parent or legal guardian of the youth provides a signed statement of a provider of health care indicating that the youth is medically cleared for participation in the competitive sport and the date on which the youth may return to the competitive sport.
- 3. Before a youth participates in competitive sports sanctioned or sponsored by an organization for youth sports in this State, the youth and his or her parent or legal guardian:
- (a) Must be provided with a copy of the policy adopted pursuant to subsection 1; and
- (b) Must sign a statement on a form prescribed by the organization for youth sports acknowledging that the youth and his or her parent or legal guardian have read and understand the terms and conditions of the policy.
  - 4. As used in this section:
- (a) "Provider of health care" means a physician licensed under chapter 630 or 633 of NRS, an advanced practice registered nurse who holds a valid license as an advanced practice registered nurse issued by the State Board of Nursing pursuant to NRS 632.237, a physical therapist licensed under chapter 640 of NRS or an athletic trainer licensed under chapter 640B of NRS.
  - (b) "Youth" means a person under the age of 18 years.
  - Sec. 87. NRS 482.3833 is hereby amended to read as follows:
  - 482.3833 "Person with a disability of moderate duration" means a person:
  - 1. With a disability which limits or impairs the ability to walk; and

- 2. Whose disability has been certified by a licensed physician *or advanced practice registered nurse* as being reversible, but estimated to last longer than 6 months.
  - Sec. 88. NRS 482.3837 is hereby amended to read as follows:
  - 482.3837 "Person with a permanent disability" means a person:
  - 1. With a disability which limits or impairs the ability to walk; and
- 2. Whose disability has been certified by a licensed physician *or advanced* practice registered nurse as irreversible.
  - Sec. 89. NRS 482.3839 is hereby amended to read as follows:
  - 482.3839 "Person with a temporary disability" means a person:
  - 1. With a disability which limits or impairs the ability to walk; and
- 2. Whose disability has been certified by a licensed physician *or advanced* practice registered nurse as estimated to last not longer than 6 months.
  - Sec. 90. NRS 482.384 is hereby amended to read as follows:
- 482.384 1. Upon the application of a person with a permanent disability, the Department may issue special license plates for a vehicle, including a motorcycle or moped, registered by the applicant pursuant to this chapter. The application must include a statement from a licensed physician *or advanced practice registered nurse* certifying that the applicant is a person with a permanent disability. The issuance of a special license plate to a person with a permanent disability pursuant to this subsection does not preclude the issuance to such a person of a special parking placard for a vehicle other than a motorcycle or moped or a special parking sticker for a motorcycle or moped pursuant to subsection 6.
- 2. Every year after the initial issuance of special license plates to a person with a permanent disability, the Department shall require the person to renew the special license plates in accordance with the procedures for renewal of registration pursuant to this chapter. The Department shall not require a person with a permanent disability to include with the application for renewal a statement from a licensed physician *or advanced practice registered nurse* certifying that the person is a person with a permanent disability.
- 3. Upon the application of an organization which provides transportation for a person with a permanent disability, disability of moderate duration or temporary disability, the Department may issue special license plates for a vehicle registered by the organization pursuant to this chapter, or the Department may issue special parking placards to the organization pursuant to this section to be used on vehicles providing transportation to such persons. The application must include a statement from the organization certifying that:
- (a) The vehicle for which the special license plates are issued is used primarily to transport persons with permanent disabilities, disabilities of moderate duration or temporary disabilities; or
- (b) The organization which is issued the special parking placards will only use such placards on vehicles that actually transport persons with permanent disabilities, disabilities of moderate duration or temporary disabilities.

- 4. The Department may charge a fee for special license plates issued pursuant to this section not to exceed the fee charged for the issuance of license plates for the same class of vehicle.
- 5. Special license plates issued pursuant to this section must display the international symbol of access in a color which contrasts with the background and is the same size as the numerals and letters on the plate.
- 6. Upon the application of a person with a permanent disability or disability of moderate duration, the Department may issue:
- (a) A special parking placard for a vehicle other than a motorcycle or moped. Upon request, the Department may issue one additional placard to an applicant to whom special license plates have not been issued pursuant to this section.
  - (b) A special parking sticker for a motorcycle or moped.
- → The application must include a statement from a licensed physician *or* advanced practice registered nurse certifying that the applicant is a person with a permanent disability or disability of moderate duration.
  - 7. A special parking placard issued pursuant to subsection 6 must:
- (a) Have inscribed on it the international symbol of access which is at least 3 inches in height, is centered on the placard and is white on a blue background;
  - (b) Have an identification number and date of expiration of:
- (1) If the special parking placard is issued to a person with a permanent disability, 10 years after the initial date of issuance; or
- (2) If the special parking placard is issued to a person with a disability of moderate duration, 2 years after the initial date of issuance;
- (c) Have placed or inscribed on it the seal or other identification of the Department; and
- (d) Have a form of attachment which enables a person using the placard to display the placard from the rearview mirror of the vehicle.
  - 8. A special parking sticker issued pursuant to subsection 6 must:
- (a) Have inscribed on it the international symbol of access which complies with any applicable federal standards, is centered on the sticker and is white on a blue background;
  - (b) Have an identification number and a date of expiration of:
- (1) If the special parking sticker is issued to a person with a permanent disability, 10 years after the initial date of issuance; or
- (2) If the special parking sticker is issued to a person with a disability of moderate duration, 2 years after the initial date of issuance; and
- (c) Have placed or inscribed on it the seal or other identification of the Department.
- 9. Before the date of expiration of a special parking placard or special parking sticker issued to a person with a permanent disability or disability of moderate duration, the person shall renew the special parking placard or special parking sticker. If the applicant for renewal is a person with a disability of moderate duration, the applicant must include with the application for

renewal a statement from a licensed physician *or advanced practice registered nurse* certifying that the applicant is a person with a disability which limits or impairs the ability to walk, and that such disability, although not irreversible, is estimated to last longer than 6 months. A person with a permanent disability is not required to submit evidence of a continuing disability with the application for renewal.

- 10. The Department, or a city or county, may issue, and charge a reasonable fee for, a temporary parking placard for a vehicle other than a motorcycle or moped or a temporary parking sticker for a motorcycle or moped upon the application of a person with a temporary disability. Upon request, the Department, city or county may issue one additional temporary parking placard to an applicant. The application must include a certificate from a licensed physician *or advanced practice registered nurse* indicating:
  - (a) That the applicant has a temporary disability; and
  - (b) The estimated period of the disability.
  - 11. A temporary parking placard issued pursuant to subsection 10 must:
- (a) Have inscribed on it the international symbol of access which is at least 3 inches in height, is centered on the placard and is white on a red background;
  - (b) Have an identification number and a date of expiration; and
- (c) Have a form of attachment which enables a person using the placard to display the placard from the rearview mirror of the vehicle.
  - 12. A temporary parking sticker issued pursuant to subsection 10 must:
- (a) Have inscribed on it the international symbol of access which is at least 3 inches in height, is centered on the sticker and is white on a red background; and
  - (b) Have an identification number and a date of expiration.
- 13. A temporary parking placard or temporary parking sticker is valid only for the period for which a physician *or advanced practice registered nurse* has certified the disability, but in no case longer than 6 months. If the temporary disability continues after the period for which the physician *or advanced practice registered nurse* has certified the disability, the person with the temporary disability must renew the temporary parking placard or temporary parking sticker before the temporary parking placard or temporary parking sticker expires. The person with the temporary disability shall include with the application for renewal a statement from a licensed physician *or advanced practice registered nurse* certifying that the applicant continues to be a person with a temporary disability and the estimated period of the disability.
- 14. A special or temporary parking placard must be displayed in the vehicle when the vehicle is parked by hanging or attaching the placard to the rearview mirror of the vehicle. If the vehicle has no rearview mirror, the placard must be placed on the dashboard of the vehicle in such a manner that the placard can easily be seen from outside the vehicle when the vehicle is parked.
- 15. Upon issuing a special license plate pursuant to subsection 1, a special or temporary parking placard, or a special or temporary parking sticker, the

Department, or the city or county, if applicable, shall issue a letter to the applicant that sets forth the name and address of the person with a permanent disability, disability of moderate duration or temporary disability to whom the special license plate, special or temporary parking placard or special or temporary parking sticker has been issued and:

- (a) If the person receives special license plates, the license plate number designated for the plates; and
- (b) If the person receives a special or temporary parking placard or a special or temporary parking sticker, the identification number and date of expiration indicated on the placard or sticker.
- → The letter, or a legible copy thereof, must be kept with the vehicle for which the special license plate has been issued or in which the person to whom the special or temporary parking placard or special or temporary parking sticker has been issued is driving or is a passenger.
- 16. A special or temporary parking sticker must be affixed to the windscreen of the motorcycle or moped. If the motorcycle or moped has no windscreen, the sticker must be affixed to any other part of the motorcycle or moped which may be easily seen when the motorcycle or moped is parked.
- 17. Special or temporary parking placards, special or temporary parking stickers, or special license plates issued pursuant to this section do not authorize parking in any area on a highway where parking is prohibited by law.
- 18. No person, other than the person certified as being a person with a permanent disability, disability of moderate duration or temporary disability, or a person actually transporting such a person, may use the special license plate or plates or a special or temporary parking placard, or a special or temporary parking sticker issued pursuant to this section to obtain any special parking privileges available pursuant to this section.
- 19. Any person who violates the provisions of subsection 18 is guilty of a misdemeanor.
- 20. The Department may review the eligibility of each holder of a special parking placard, a special parking sticker or special license plates, or any combination thereof. Upon a determination of ineligibility by the Department, the holder shall surrender the special parking placard, special parking sticker or special license plates, or any combination thereof, to the Department.
- 21. The Department may adopt such regulations as are necessary to carry out the provisions of this section.
  - Sec. 91. NRS 616C.005 is hereby amended to read as follows:
  - 616C.005 On or before September 1 of each year:
- 1. An insurer shall distribute to each employer that it insures any form for reporting injuries that has been revised within the previous 12 months.
- 2. The Administrator shall make available to physicians ,  $\frac{\text{[and]}}{\text{chiropractors}}$  and advanced practice registered nurses any form for reporting injuries that has been revised within the previous 12 months.

- Sec. 92. NRS 616C.010 is hereby amended to read as follows:
- 616C.010 1. Whenever any accident occurs to any employee, the employee shall forthwith report the accident and the injury resulting therefrom to his or her employer.
- 2. When an employer learns of an accident, whether or not it is reported, the employer may direct the employee to submit to, or the employee may request, an examination by a physician, [or] chiropractor [,] or advanced practice registered nurse, in order to ascertain the character and extent of the injury and render medical attention which is required immediately. The employer shall:
- (a) If the employer's insurer has entered into a contract with an organization for managed care or with providers of health care pursuant to NRS 616B.527, furnish the names, addresses and telephone numbers of:
- (1) Two or more physicians , [or] chiropractors or advanced practice registered nurses who are qualified to conduct the examination and who are available pursuant to the terms of the contract, if there are two or more such physicians , [or] chiropractors or advanced practice registered nurses within 30 miles of the employee's place of employment; or
- (2) One or more physicians, [or] chiropractors or advanced practice registered nurses who are qualified to conduct the examination and who are available pursuant to the terms of the contract, if there are not two or more such physicians, [or] chiropractors or advanced practice registered nurses within 30 miles of the employee's place of employment.
- (b) If the employer's insurer has not entered into a contract with an organization for managed care or with providers of health care pursuant to NRS 616B.527, furnish the names, addresses and telephone numbers of:
- (1) Two or more physicians, [or] chiropractors or advanced practice registered nurses who are qualified to conduct the examination, if there are two or more such physicians, [or] chiropractors or advanced practice registered nurses within 30 miles of the employee's place of employment; or
- (2) One or more physicians, [or] chiropractors or advanced practice registered nurses who are qualified to conduct the examination, if there are not two or more such physicians, [or] chiropractors or advanced practice registered nurses within 30 miles of the employee's place of employment.
- 3. From among the names furnished by the employer pursuant to subsection 2, the employee shall select one of those physicians, [or] chiropractors or advanced practice registered nurses to conduct the examination, but the employer shall not require the employee to select a particular physician, [or] chiropractor or advanced practice registered nurse from among the names furnished by the employer. Thereupon, the examining physician, [or] chiropractor or advanced practice registered nurse shall report forthwith to the employer and to the insurer the character and extent of the injury. The employer shall not require the employee to disclose or permit the disclosure of any other information concerning the employee's physical condition except as required by NRS 616C.177.

- 4. Further medical attention, except as otherwise provided in NRS 616C.265, must be authorized by the insurer.
- 5. This section does not prohibit an employer from requiring the employee to submit to an examination by a physician, [or] chiropractor or advanced practice registered nurse specified by the employer at any convenient time after medical attention which is required immediately has been completed.
- 6. An employee leasing company must provide to each employee covered under an employee leasing contract instructions on how to notify the leasing company supervisor and client company of an injury in plain, clear language placed in conspicuous type in a specifically labeled area of instructions given to the employee.
  - Sec. 93. NRS 616C.035 is hereby amended to read as follows:
- 616C.035 Where death results from injury, the parties entitled to compensation under chapters 616A to 616D, inclusive, of NRS, or someone in their behalf, must make application for compensation to the insurer. The application must be accompanied by:
  - 1. Proof of death;
- 2. Proof of relationship showing the parties to be entitled to compensation under chapters 616A to 616D, inclusive, of NRS;
- 3. Certificates of the attending physician [,] or attending advanced practice registered nurse, if any; and
  - 4. Such other proof as required by the regulations of the Division.
  - Sec. 94. NRS 616C.040 is hereby amended to read as follows:
- 616C.040 1. Except as otherwise provided in this section, a treating physician, [or] chiropractor or advanced practice registered nurse shall, within 3 working days after first providing treatment to an injured employee for a particular injury, complete and file a claim for compensation with the employer of the injured employee and the employer's insurer. If the employer is a self-insured employer, the treating physician, [or] chiropractor or advanced practice registered nurse shall file the claim for compensation with the employer's third-party administrator. If the physician, [or] chiropractor or advanced practice registered nurse files the claim for compensation by electronic transmission, the physician, [or] chiropractor or advanced practice registered nurse shall, upon request, mail to the insurer or third-party administrator the form that contains the original signatures of the injured employee and the physician, [or] chiropractor [.] or advanced practice registered nurse. The form must be mailed within 7 days after receiving such a request.
- 2. A physician, [or] chiropractor *or advanced practice registered nurse* who has a duty to file a claim for compensation pursuant to subsection 1 may delegate the duty to a medical facility. If the physician, [or] chiropractor *or advanced practice registered nurse* delegates the duty to a medical facility:
- (a) The medical facility must comply with the filing requirements set forth in this section; and
  - (b) The delegation must be in writing and signed by:

- (1) The physician, [or] chiropractor [;] or advanced practice registered nurse: and
  - (2) An authorized representative of the medical facility.
- 3. A claim for compensation required by subsection 1 must be filed on a form prescribed by the Administrator.
- 4. If a claim for compensation is accompanied by a certificate of disability, the certificate must include a description of any limitation or restrictions on the injured employee's ability to work.
- 5. Each physician, chiropractor, advanced practice registered nurse and medical facility that treats injured employees, each insurer, third-party administrator and employer, and the Division shall maintain at their offices a sufficient supply of the forms prescribed by the Administrator for filing a claim for compensation.
- 6. The Administrator may impose an administrative fine of not more than \$1,000 for each violation of subsection 1 on:
- (a) A physician, [or] chiropractor [;] or advanced practice registered nurse; or
- (b) A medical facility if the duty to file the claim for compensation has been delegated to the medical facility pursuant to this section.
  - Sec. 95. NRS 616C.045 is hereby amended to read as follows:
- 616C.045 1. Except as otherwise provided in NRS 616B.727, within 6 working days after the receipt of a claim for compensation from a physician , [or] chiropractor [,] or advanced practice registered nurse, or a medical facility if the duty to file the claim for compensation has been delegated to the medical facility pursuant to NRS 616C.040, an employer shall complete and file with his or her insurer or third-party administrator an employer's report of industrial injury or occupational disease.
  - 2. The report must:
  - (a) Be filed on a form prescribed by the Administrator;
  - (b) Be signed by the employer or the employer's designee;
- (c) Contain specific answers to all questions required by the regulations of the Administrator; and
- (d) Be accompanied by a statement of the wages of the employee if the claim for compensation received from the treating physician,  $\{or\}$  chiropractor  $\{\cdot, \}$  or advanced practice registered nurse, or a medical facility if the duty to file the claim for compensation has been delegated to the medical facility pursuant to NRS 616C.040, indicates that the injured employee is expected to be off work for 5 days or more.
- 3. An employer who files the report required by subsection 1 by electronic transmission shall, upon request, mail to the insurer or third-party administrator the form that contains the original signature of the employer or the employer's designee. The form must be mailed within 7 days after receiving such a request.
- 4. The Administrator shall impose an administrative fine of not more than \$1,000 on an employer for each violation of this section.

- Sec. 96. NRS 616C.050 is hereby amended to read as follows:
- 616C.050 1. An insurer shall provide to each claimant:
- (a) Upon written request, one copy of any medical information concerning the claimant's injury or illness.
- (b) A statement which contains information concerning the claimant's right to:
  - (1) Receive the information and forms necessary to file a claim;
- (2) Select a treating physician, [or] chiropractor or advanced practice registered nurse and an alternative treating physician, [or] chiropractor or advanced practice registered nurse in accordance with the provisions of NRS 616C.090:
- (3) Request the appointment of the Nevada Attorney for Injured Workers to represent the claimant before the appeals officer;
  - (4) File a complaint with the Administrator;
  - (5) When applicable, receive compensation for:
    - (I) Permanent total disability;
    - (II) Temporary total disability;
    - (III) Permanent partial disability;
    - (IV) Temporary partial disability;
    - (V) All medical costs related to the claimant's injury or disease; or
- (VI) The hours the claimant is absent from the place of employment to receive medical treatment pursuant to NRS 616C.477;
- (6) Receive services for rehabilitation if the claimant's injury prevents him or her from returning to gainful employment;
- (7) Review by a hearing officer of any determination or rejection of a claim by the insurer within the time specified by statute; and
- (8) Judicial review of any final decision within the time specified by statute.
- 2. The insurer's statement must include a copy of the form designed by the Administrator pursuant to subsection 8 of NRS 616C.090 that notifies injured employees of their right to select an alternative treating physician , [or] chiropractor [-] or advanced practice registered nurse. The Administrator shall adopt regulations for the manner of compliance by an insurer with the other provisions of subsection 1.
  - Sec. 97. NRS 616C.055 is hereby amended to read as follows:
- 616C.055 1. The insurer may not, in accepting responsibility for any charges, use fee schedules which unfairly discriminate among physicians , [and] chiropractors [.] and advanced practice registered nurses.
- 2. If a physician, [or] chiropractor or advanced practice registered nurse is removed from the panel established pursuant to NRS 616C.090 or from participation in a plan for managed care established pursuant to NRS 616B.527, the physician, [or] chiropractor [,] or advanced practice registered nurse, as applicable, must not be paid for any services rendered to the injured employee after the date of the removal.

Sec. 98. NRS 616C.075 is hereby amended to read as follows:

616C.075 If an employee is properly directed to submit to a physical examination and the employee refuses to permit the treating physician, [or] chiropractor or advanced practice registered nurse to make an examination and to render medical attention as may be required immediately, no compensation may be paid for the injury claimed to result from the accident.

Sec. 99. NRS 616C.090 is hereby amended to read as follows:

- 616C.090 1. The Administrator shall establish a panel of physicians, [and] chiropractors and advanced practice registered nurses who have demonstrated special competence and interest in industrial health to treat injured employees under chapters 616A to 616D, inclusive, or chapter 617 of NRS. Every employer whose insurer has not entered into a contract with an organization for managed care or with providers of health care services pursuant to NRS 616B.527 shall maintain a list of those physicians, [and] chiropractors and advanced practice registered nurses on the panel who are reasonably accessible to his or her employees.
- 2. An injured employee whose employer's insurer has not entered into a contract with an organization for managed care or with providers of health care services pursuant to NRS 616B.527 may choose a treating physician, [or] chiropractor or advanced practice registered nurse from the panel of physicians, [and] chiropractors [.] and advanced practice registered nurses. If the injured employee is not satisfied with the first physician, [or] chiropractor or advanced practice registered nurse he or she so chooses, the injured employee may make an alternative choice of physician, for chiropractor or advanced practice registered nurse from the panel if the choice is made within 90 days after his or her injury. The insurer shall notify the first physician, [or] chiropractor or advanced practice registered nurse in writing. The notice must be postmarked within 3 working days after the insurer receives knowledge of the change. The first physician, [or] chiropractor or advanced practice registered nurse must be reimbursed only for the services the physician, for chiropractor or advanced practice registered nurse, as applicable, rendered to the injured employee up to and including the date of notification. Except as otherwise provided in this subsection, any further change is subject to the approval of the insurer, which must be granted or denied within 10 days after a written request for such a change is received from the injured employee. If no action is taken on the request within 10 days, the request shall be deemed granted. Any request for a change of physician, [or] chiropractor or advanced practice registered nurse must include the name of the new physician, [or] chiropractor or advanced practice registered nurse chosen by the injured employee. If the treating physician, [or] chiropractor or advanced practice registered nurse refers the injured employee to a specialist for treatment, the treating physician, [or] chiropractor or advanced practice registered nurse shall provide to the injured employee a list that includes the name of each physician, [or] chiropractor or advanced practice registered nurse with that specialization who is on the panel. After receiving the list, the

injured employee shall, at the time the referral is made, select a physician, [or] chiropractor *or advanced practice registered nurse* from the list.

- 3. An injured employee whose employer's insurer has entered into a contract with an organization for managed care or with providers of health care services pursuant to NRS 616B.527 must choose a treating physician, [or] chiropractor or advanced practice registered nurse pursuant to the terms of that contract. If the injured employee is not satisfied with the first physician, [or] chiropractor or advanced practice registered nurse he or she so chooses, the injured employee may make an alternative choice of physician, [or] chiropractor or advanced practice registered nurse pursuant to the terms of the contract without the approval of the insurer if the choice is made within 90 days after his or her injury. If the injured employee, after choosing a treating physician, for chiropractor for advanced practice registered nurse, moves to a county which is not served by the organization for managed care or providers of health care services named in the contract and the insurer determines that it is impractical for the injured employee to continue treatment with the physician, [or] chiropractor [,] or advanced practice registered nurse, the injured employee must choose a treating physician, [or] chiropractor or advanced practice registered nurse who has agreed to the terms of that contract unless the insurer authorizes the injured employee to choose another physician, for chiropractor for advanced practice registered nurse. If the treating physician, for chiropractor or advanced practice registered nurse refers the injured employee to a specialist for treatment, the treating physician , [or] chiropractor or advanced practice registered nurse shall provide to the injured employee a list that includes the name of each physician, [or] chiropractor or advanced practice registered nurse with that specialization who is available pursuant to the terms of the contract with the organization for managed care or with providers of health care services pursuant to NRS 616B.527, as appropriate. After receiving the list, the injured employee shall, at the time the referral is made, select a physician, for chiropractor or advanced practice registered nurse from the list. If the employee fails to select a physician, for chiropractor or advanced practice registered nurse, the insurer may select a physician, [or] chiropractor or advanced practice registered nurse with that specialization. If a physician, [or] chiropractor or advanced practice registered nurse with that specialization is not available pursuant to the terms of the contract, the organization for managed care or the provider of health care services may select a physician, [or] chiropractor or advanced practice registered nurse with that specialization.
- 4. If the injured employee is not satisfied with the physician , [or] chiropractor or advanced practice registered nurse selected by himself or herself or by the insurer, the organization for managed care or the provider of health care services pursuant to subsection 3, the injured employee may make an alternative choice of physician , [or] chiropractor or advanced practice registered nurse pursuant to the terms of the contract. A change in the treating physician , [or] chiropractor or advanced practice registered nurse may be

made at any time but is subject to the approval of the insurer, which must be granted or denied within 10 days after a written request for such a change is received from the injured employee. If no action is taken on the request within 10 days, the request shall be deemed granted. Any request for a change of physician , [or] chiropractor or advanced practice registered nurse must include the name of the new physician , [or] chiropractor or advanced practice registered nurse chosen by the injured employee. If the insurer denies a request for a change in the treating physician , [or] chiropractor or advanced practice registered nurse under this subsection, the insurer must include in a written notice of denial to the injured employee the specific reason for the denial of the request.

- 5. Except when emergency medical care is required and except as otherwise provided in NRS 616C.055, the insurer is not responsible for any charges for medical treatment or other accident benefits furnished or ordered by any physician, chiropractor, advanced practice registered nurse or other person selected by the injured employee in disregard of the provisions of this section or for any compensation for any aggravation of the injured employee's injury attributable to improper treatments by such physician, chiropractor, advanced practice registered nurse or other person.
- 6. The Administrator may order necessary changes in a panel of physicians, [and] chiropractors and advanced practice registered nurses and shall suspend or remove any physician, [or] chiropractor or advanced practice registered nurse from a panel for good cause shown.
- 7. An injured employee may receive treatment by more than one physician , [or] chiropractor *or advanced practice registered nurse* if the insurer provides written authorization for such treatment.
- 8. The Administrator shall design a form that notifies injured employees of their right pursuant to subsections 2, 3 and 4 to select an alternative treating physician, [or] chiropractor *or advanced practice registered nurse* and make the form available to insurers for distribution pursuant to subsection 2 of NRS 616C.050.
  - Sec. 100. NRS 616C.095 is hereby amended to read as follows:
- 616C.095 The physician , [or] chiropractor or advanced practice registered nurse shall inform the injured employee of the injured employee's rights under chapters 616A to 616D, inclusive, or chapter 617 of NRS and lend all necessary assistance in making application for compensation and such proof of other matters as required by the rules of the Division, without charge to the employee.
  - Sec. 101. NRS 616C.100 is hereby amended to read as follows:
- 616C.100 1. If an injured employee disagrees with the percentage of disability determined by a physician , [or] chiropractor [,] or advanced practice registered nurse, the injured employee may obtain a second determination of the percentage of disability. If the employee wishes to obtain such a determination, the employee must select the next physician , [or] chiropractor or advanced practice registered nurse in rotation from the list of

qualified physicians , <code>[or]</code> chiropractors or advanced practice registered nurses maintained by the Administrator pursuant to subsection 2 of NRS 616C.490. If a second determination is obtained, the injured employee shall pay for the determination. If the physician , <code>[or]</code> chiropractor or advanced practice registered nurse selected to make the second determination finds a higher percentage of disability than the first physician , <code>[or]</code> chiropractor <code>[,]</code> or advanced practice registered nurse, the injured employee may request a hearing officer or appeals officer to order the insurer to reimburse the employee pursuant to the provisions of NRS 616C.330 or 616C.360.

- 2. The results of a second determination made pursuant to subsection 1 may be offered at any hearing or settlement conference.
  - Sec. 102. NRS 616C.105 is hereby amended to read as follows:
- 616C.105 The Administrator shall not designate a chiropractor *or advanced practice registered nurse* to rate permanent partial disabilities unless the chiropractor *or advanced practice registered nurse* has completed an advanced program of training in rating disabilities using the American Medical Association's <u>Guides to the Evaluation of Permanent Impairment</u> which is offered or approved by the Administrator.
  - Sec. 103. NRS 616C.130 is hereby amended to read as follows:
- 616C.130 The insurer shall not authorize the payment of any money to a physician, <code>[or]</code> chiropractor or advanced practice registered nurse for services rendered by the physician, <code>[or]</code> chiropractor <code>[,]</code> or advanced practice registered nurse, as applicable, in attending an injured employee until an itemized statement for the services has been received by the insurer accompanied by a certificate of the physician, <code>[or]</code> chiropractor or advanced practice registered nurse stating that a duplicate of the itemized statement has been filed with the employer of the injured employee.
  - Sec. 104. NRS 616C.140 is hereby amended to read as follows:
- 616C.140 1. Any employee who is entitled to receive compensation under chapters 616A to 616D, inclusive, of NRS shall, if:
  - (a) Requested by the insurer or employer; or
  - (b) Ordered by an appeals officer or a hearing officer,
- → submit to a medical examination at a time and from time to time at a place reasonably convenient for the employee, and as may be provided by the regulations of the Division.
- 2. If the insurer has reasonable cause to believe that an injured employee who is receiving compensation for a permanent total disability is no longer disabled, the insurer may request the employee to submit to an annual medical examination to determine whether the disability still exists. The insurer shall pay the costs of the examination.
- 3. The request or order for an examination must fix a time and place therefor, with due regard for the nature of the medical examination, the convenience of the employee, the employee's physical condition and the employee's ability to attend at the time and place fixed.

- 4. The employee is entitled to have a physician, [or] chiropractor [,] or advanced practice registered nurse, provided and paid for by the employee, present at any such examination.
- 5. If the employee refuses to submit to an examination ordered or requested pursuant to subsection 1 or 2 or obstructs the examination, the right of the employee to compensation is suspended until the examination has taken place, and no compensation is payable during or for the period of suspension.
- 6. Any physician, [or] chiropractor *or advanced practice registered nurse* who makes or is present at any such examination may be required to testify as to the result thereof.
  - Sec. 105. NRS 616C.160 is hereby amended to read as follows:
- 616C.160 If, after a claim for compensation is filed pursuant to NRS 616C.020:
- 1. The injured employee seeks treatment from a physician , [or] chiropractor *or advanced practice registered nurse* for a newly developed injury or disease; and
- 2. The employee's medical records for the injury reported do not include a reference to the injury or disease for which treatment is being sought, or there is no documentation indicating that there was possible exposure to an injury described in paragraph (b), (c) or (d) of subsection 2 of NRS 616A.265,
- → the injury or disease for which treatment is being sought must not be considered part of the employee's original claim for compensation unless the physician, [or] chiropractor or advanced practice registered nurse establishes by medical evidence a causal relationship between the injury or disease for which treatment is being sought and the original accident.
  - Sec. 106. NRS 616C.230 is hereby amended to read as follows:
- 616C.230 1. Compensation is not payable pursuant to the provisions of chapters 616A to 616D, inclusive, or chapter 617 of NRS for an injury:
  - (a) Caused by the employee's willful intention to injure himself or herself.
  - (b) Caused by the employee's willful intention to injure another.
- (c) That occurred while the employee was in a state of intoxication, unless the employee can prove by clear and convincing evidence that his or her state of intoxication was not the proximate cause of the injury. For the purposes of this paragraph, an employee is in a state of intoxication if the level of alcohol in the bloodstream of the employee meets or exceeds the limits set forth in subsection 1 of NRS 484C.110.
- (d) That occurred while the employee was under the influence of a controlled or prohibited substance, unless the employee can prove by clear and convincing evidence that his or her being under the influence of a controlled or prohibited substance was not the proximate cause of the injury. For the purposes of this paragraph, an employee is under the influence of a controlled or prohibited substance if the employee had an amount of a controlled or prohibited substance in his or her system at the time of his or her injury that was equal to or greater than the limits set forth in subsection 3 of

NRS 484C.110 and for which the employee did not have a current and lawful prescription issued in the employee's name.

- 2. For the purposes of paragraphs (c) and (d) of subsection 1:
- (a) The affidavit or declaration of an expert or other person described in NRS 50.310, 50.315 or 50.320 is admissible to prove the existence of an impermissible quantity of alcohol or the existence, quantity or identity of an impermissible controlled or prohibited substance in an employee's system. If the affidavit or declaration is to be so used, it must be submitted in the manner prescribed in NRS 616C.355.
- (b) When an examination requested or ordered includes testing for the use of alcohol or a controlled or prohibited substance, the laboratory that conducts the testing must be licensed pursuant to the provisions of chapter 652 of NRS.
- (c) The results of any testing for the use of alcohol or a controlled or prohibited substance, irrespective of the purpose for performing the test, must be made available to an insurer or employer upon request, to the extent that doing so does not conflict with federal law.
- 3. No compensation is payable for the death, disability or treatment of an employee if the employee's death is caused by, or insofar as the employee's disability is aggravated, caused or continued by, an unreasonable refusal or neglect to submit to or to follow any competent and reasonable surgical treatment or medical aid.
- 4. If any employee persists in an unsanitary or injurious practice that imperils or retards his or her recovery, or refuses to submit to such medical or surgical treatment as is necessary to promote his or her recovery, the employee's compensation may be reduced or suspended.
- 5. An injured employee's compensation, other than accident benefits, must be suspended if:
- (a) A physician, [or] chiropractor or advanced practice registered nurse determines that the employee is unable to undergo treatment, testing or examination for the industrial injury solely because of a condition or injury that did not arise out of and in the course of employment; and
- (b) It is within the ability of the employee to correct the nonindustrial condition or injury.
- → The compensation must be suspended until the injured employee is able to resume treatment, testing or examination for the industrial injury. The insurer may elect to pay for the treatment of the nonindustrial condition or injury.
- 6. As used in this section, "prohibited substance" has the meaning ascribed to it in NRS 484C.080.
  - Sec. 107. NRS 616C.265 is hereby amended to read as follows:
- 616C.265 1. Except as otherwise provided in NRS 616C.280, every employer operating under chapters 616A to 616D, inclusive, of NRS, alone or together with other employers, may make arrangements to provide accident benefits as defined in those chapters for injured employees.
- 2. Employers electing to make such arrangements shall notify the Administrator of the election and render a detailed statement of the

arrangements made, which arrangements do not become effective until approved by the Administrator.

- 3. Every employer who maintains a hospital of any kind for his or her employees, or who contracts for the hospital care of injured employees, shall, on or before January 30 of each year, make a written report to the Administrator for the preceding year, which must contain a statement showing:
- (a) The total amount of hospital fees collected, showing separately the amount contributed by the employees and the amount contributed by the employers;
- (b) An itemized account of the expenditures, investments or other disposition of such fees; and
  - (c) What balance, if any, remains.
  - 4. Every employer who provides accident benefits pursuant to this section:
- (a) Shall, in accordance with regulations adopted by the Administrator, make a written report to the Division of that employer's actual and expected annual expenditures for claims and such other information as the Division deems necessary to calculate an estimated or final annual assessment and shall, to the extent that the regulations refer to the responsibility of insurers to make such reports, be deemed to be an insurer.
- (b) Shall pay the assessments collected pursuant to NRS 232.680 and 616A.430.
- 5. The reports required by the provisions of subsections 3 and 4 must be verified:
  - (a) If the employer is a natural person, by the employer;
  - (b) If the employer is a partnership, by one of the partners;
- (c) If the employer is a corporation, by the secretary, president, general manager or other executive officer of the corporation; or
- (d) If the employer has contracted with a physician,  $\{or\}$  chiropractor or advanced practice registered nurse for the hospital care of injured employees, by the physician,  $\{or\}$  chiropractor  $\{...\}$  or advanced practice registered nurse.
- 6. No employee is required to accept the services of a physician , [or] chiropractor or advanced practice registered nurse provided by his or her employer, but may seek professional medical services of the employee's choice as provided in NRS 616C.090. Expenses arising from such medical services must be paid by the employer who has elected to provide benefits, pursuant to the provisions of this section, for the employer's injured employees.
- 7. Every employer who fails to notify the Administrator of such election and arrangements, or who fails to render the financial reports required, is liable for accident benefits as provided by NRS 616C.255.
  - Sec. 108. NRS 616C.270 is hereby amended to read as follows:
- 616C.270 1. Every employer who has elected to provide accident benefits for his or her injured employees shall prepare and submit a written report to the Administrator:

- (a) Within 6 days after any accident if an injured employee is examined or treated by a physician, [or] chiropractor [;] or advanced practice registered nurse; and
  - (b) If the injured employee receives additional medical services.
- 2. The Administrator shall review each report to determine whether the employer is furnishing the accident benefits required by chapters 616A to 616D, inclusive, of NRS.
- 3. The content and form of the written reports must be prescribed by the Administrator.
  - Sec. 109. NRS 616C.275 is hereby amended to read as follows:
- 616C.275 1. If the Administrator finds that the employer is furnishing the requirements of accident benefits in such a manner that there are reasonable grounds for believing that the health, life or recovery of the employee is being endangered or impaired thereby, or that an employer has failed to provide benefits pursuant to NRS 616C.265 for which he or she has made arrangements, the Administrator may, upon application of the employee, or upon the Administrator's own motion, order a change of physicians , [or] chiropractors or advanced practice registered nurses or of any other requirements of accident benefits.
- 2. If the Administrator orders a change of physicians, [or] chiropractors or advanced practice registered nurses or of any other accident benefits, the cost of the change must be borne by the insurer.
- 3. The cause of action of an injured employee against an employer insured by a private carrier must be assigned to the private carrier.
  - Sec. 110. NRS 616C.280 is hereby amended to read as follows:
- 616C.280 The Administrator may withdraw his or her approval of an employer's providing accident benefits for his or her employees and require the employer to pay the premium collected pursuant to NRS 616C.255 if the employer intentionally:
- 1. Determines incorrectly that a claimed injury did not arise out of and in the course of the employee's employment;
- 2. Fails to advise an injured employee of the employee's rights under chapters 616A to 616D, inclusive, or chapter 617 of NRS;
- 3. Impedes the determination of disability or benefits by delaying a needed change of an injured employee's physician, [or] chiropractor [;] or advanced practice registered nurse;
- 4. Causes an injured employee to file a legal action to recover any compensation or other medical benefits due the employee from the employer;
- 5. Violates any of the Administrator's or the Division's regulations regarding the provision of accident benefits by employers; or
- 6. Discriminates against an employee who claims benefits under chapters 616A to 616D, inclusive, or chapter 617 of NRS.
  - Sec. 111. NRS 616C.305 is hereby amended to read as follows:
- 616C.305 1. Except as otherwise provided in subsection 3, any person who is aggrieved by a final determination concerning accident benefits made

by an organization for managed care which has contracted with an insurer must, within 14 days of the determination and before requesting a resolution of the dispute pursuant to NRS 616C.345 to 616C.385, inclusive, appeal that determination in accordance with the procedure for resolving complaints established by the organization for managed care.

- 2. The procedure for resolving complaints established by the organization for managed care must be informal and must include, but is not limited to, a review of the appeal by a qualified physician, [or] chiropractor or advanced practice registered nurse who did not make or otherwise participate in making the determination.
- 3. If a person appeals a final determination pursuant to a procedure for resolving complaints established by an organization for managed care and the dispute is not resolved within 14 days after it is submitted, the person may request a resolution of the dispute pursuant to NRS 616C.345 to 616C.385, inclusive.
  - Sec. 112. NRS 616C.330 is hereby amended to read as follows:
  - 616C.330 1. The hearing officer shall:
- (a) Except as otherwise provided in subsection 2 of NRS 616C.315, within 5 days after receiving a request for a hearing, set the hearing for a date and time within 30 days after his or her receipt of the request at a place in Carson City, Nevada, or Las Vegas, Nevada, or upon agreement of one or more of the parties to pay all additional costs directly related to an alternative location, at any other place of convenience to the parties, at the discretion of the hearing officer;
- (b) Give notice by mail or by personal service to all interested parties to the hearing at least 15 days before the date and time scheduled; and
  - (c) Conduct hearings expeditiously and informally.
- 2. The notice must include a statement that the injured employee may be represented by a private attorney or seek assistance and advice from the Nevada Attorney for Injured Workers.
- 3. If necessary to resolve a medical question concerning an injured employee's condition or to determine the necessity of treatment for which authorization for payment has been denied, the hearing officer may order an independent medical examination, which must not involve treatment, and refer the employee to a physician , [or] chiropractor or advanced practice registered nurse of his or her choice who has demonstrated special competence to treat the particular medical condition of the employee, whether or not the physician , [or] chiropractor or advanced practice registered nurse is on the insurer's panel of providers of health care. If the medical question concerns the rating of a permanent disability, the hearing officer may refer the employee to a rating physician , [or] chiropractor [-] or advanced practice registered nurse must be selected in rotation from the list of qualified physicians , [and] chiropractors and advanced practice registered nurses maintained by the Administrator pursuant to subsection 2 of NRS 616C.490, unless the insurer and injured

employee otherwise agree to a rating physician, [or] chiropractor [.] or advanced practice registered nurse. The insurer shall pay the costs of any medical examination requested by the hearing officer.

- 4. The hearing officer may consider the opinion of an examining physician , [or] chiropractor [,] or advanced practice registered nurse, in addition to the opinion of an authorized treating physician , [or] chiropractor [,] or advanced practice registered nurse, in determining the compensation payable to the injured employee.
- 5. If an injured employee has requested payment for the cost of obtaining a second determination of his or her percentage of disability pursuant to NRS 616C.100, the hearing officer shall decide whether the determination of the higher percentage of disability made pursuant to NRS 616C.100 is appropriate and, if so, may order the insurer to pay to the employee an amount equal to the maximum allowable fee established by the Administrator pursuant to NRS 616C.260 for the type of service performed, or the usual fee of that physician, [or] chiropractor or advanced practice registered nurse for such service, whichever is less.
- 6. The hearing officer shall order an insurer, organization for managed care or employer who provides accident benefits for injured employees pursuant to NRS 616C.265 to pay to the appropriate person the charges of a provider of health care if the conditions of NRS 616C.138 are satisfied.
- 7. The hearing officer may allow or forbid the presence of a court reporter and the use of a tape recorder in a hearing.
  - 8. The hearing officer shall render his or her decision within 15 days after:
  - (a) The hearing; or
- (b) The hearing officer receives a copy of the report from the medical examination the hearing officer requested.
- 9. The hearing officer shall render a decision in the most efficient format developed by the Chief of the Hearings Division of the Department of Administration.
- 10. The hearing officer shall give notice of the decision to each party by mail. The hearing officer shall include with the notice of the decision the necessary forms for appealing from the decision.
- 11. Except as otherwise provided in NRS 616C.380, the decision of the hearing officer is not stayed if an appeal from that decision is taken unless an application for a stay is submitted by a party. If such an application is submitted, the decision is automatically stayed until a determination is made on the application. A determination on the application must be made within 30 days after the filing of the application. If, after reviewing the application, a stay is not granted by the hearing officer or an appeals officer, the decision must be complied with within 10 days after the refusal to grant a stay.
  - Sec. 113. NRS 616C.350 is hereby amended to read as follows:
- 616C.350 1. Any physician, [or] chiropractor or advanced practice registered nurse who attends an employee within the provisions of chapters 616A to 616D, inclusive, or chapter 617 of NRS in a professional

capacity, may be required to testify before an appeals officer. A physician , <code>[or]</code> chiropractor or advanced practice registered nurse who testifies is entitled to receive the same fees as witnesses in civil cases and, if the appeals officer so orders at his or her own discretion, a fee equal to that authorized for a consultation by the appropriate schedule of fees for physicians , <code>[or]</code> chiropractors <code>[.]</code> or advanced practice registered nurses. These fees must be paid by the insurer.

- 2. Information gained by the attending physician, {or} chiropractor or advanced practice registered nurse while in attendance on the injured employee is not a privileged communication if:
- (a) Required by an appeals officer for a proper understanding of the case and a determination of the rights involved; or
- (b) The information is related to any fraud that has been or is alleged to have been committed in violation of the provisions of this chapter or chapter 616A, 616B, 616D or 617 of NRS.
  - Sec. 114. NRS 616C.360 is hereby amended to read as follows:
- 616C.360 1. A stenographic or electronic record must be kept of the hearing before the appeals officer and the rules of evidence applicable to contested cases under chapter 233B of NRS apply to the hearing.
- 2. The appeals officer must hear any matter raised before him or her on its merits, including new evidence bearing on the matter.
- 3. If there is a medical question or dispute concerning an injured employee's condition or concerning the necessity of treatment for which authorization for payment has been denied, the appeals officer may:
- (a) Order an independent medical examination and refer the employee to a physician, [or] chiropractor or advanced practice registered nurse of his or her choice who has demonstrated special competence to treat the particular medical condition of the employee, whether or not the physician, [or] chiropractor or advanced practice registered nurse is on the insurer's panel of providers of health care. If the medical question concerns the rating of a permanent disability, the appeals officer may refer the employee to a rating physician, [or] chiropractor [-] or advanced practice registered nurse must be selected in rotation from the list of qualified physicians, [or] chiropractors or advanced practice registered nurse must be selected in rotation from the list of qualified physicians, [or] chiropractors or advanced practice registered nurses maintained by the Administrator pursuant to subsection 2 of NRS 616C.490, unless the insurer and the injured employee otherwise agree to a rating physician, [or] chiropractor [-] or advanced practice registered nurse. The insurer shall pay the costs of any examination requested by the appeals officer.
- (b) If the medical question or dispute is relevant to an issue involved in the matter before the appeals officer and all parties agree to the submission of the matter to an independent review organization, submit the matter to an independent review organization in accordance with NRS 616C.363 and any regulations adopted by the Commissioner.

- 4. The appeals officer may consider the opinion of an examining physician , [or] chiropractor [,] or advanced practice registered nurse, in addition to the opinion of an authorized treating physician , [or] chiropractor [,] or advanced practice registered nurse, in determining the compensation payable to the injured employee.
- 5. If an injured employee has requested payment for the cost of obtaining a second determination of his or her percentage of disability pursuant to NRS 616C.100, the appeals officer shall decide whether the determination of the higher percentage of disability made pursuant to NRS 616C.100 is appropriate and, if so, may order the insurer to pay to the employee an amount equal to the maximum allowable fee established by the Administrator pursuant to NRS 616C.260 for the type of service performed, or the usual fee of that physician, [or] chiropractor or advanced practice registered nurse for such service, whichever is less.
- 6. The appeals officer shall order an insurer, organization for managed care or employer who provides accident benefits for injured employees pursuant to NRS 616C.265 to pay to the appropriate person the charges of a provider of health care if the conditions of NRS 616C.138 are satisfied.
- 7. Any party to the appeal or contested case or the appeals officer may order a transcript of the record of the hearing at any time before the seventh day after the hearing. The transcript must be filed within 30 days after the date of the order unless the appeals officer otherwise orders.
- 8. Except as otherwise provided in subsection 9, the appeals officer shall render a decision:
- (a) If a transcript is ordered within 7 days after the hearing, within 30 days after the transcript is filed; or
- (b) If a transcript has not been ordered, within 30 days after the date of the hearing.
- 9. The appeals officer shall render a decision on a contested claim submitted pursuant to subsection 2 of NRS 616C.345 within 15 days after:
  - (a) The date of the hearing; or
- (b) If the appeals officer orders an independent medical examination, the date the appeals officer receives the report of the examination,
- → unless both parties to the contested claim agree to a later date.
- 10. The appeals officer may affirm, modify or reverse any decision made by a hearing officer and issue any necessary and proper order to give effect to his or her decision.
  - Sec. 115. NRS 616C.363 is hereby amended to read as follows:
- 616C.363 1. Not later than 5 business days after the date that an independent review organization receives a request for an external review, the independent review organization shall:
- (a) Review the documents and materials submitted for the external review; and

- (b) Notify the injured employee, his or her employer and the insurer whether the independent review organization needs any additional information to conduct the external review.
- 2. The independent review organization shall render a decision on the matter not later than 15 business days after the date that it receives all information that is necessary to conduct the external review.
- 3. In conducting the external review, the independent review organization shall consider, without limitation:
  - (a) The medical records of the insured:
- (b) Any recommendations of the physician, *chiropractor or advanced* practice registered nurse of the insured; and
- (c) Any other information approved by the Commissioner for consideration by an independent review organization.
- 4. In its decision, the independent review organization shall specify the reasons for its decision. The independent review organization shall submit a copy of its decision to:
  - (a) The injured employee;
  - (b) The employer;
  - (c) The insurer; and
  - (d) The appeals officer, if any.
- 5. The insurer shall pay the costs of the services provided by the independent review organization.
- 6. The Commissioner may adopt regulations to govern the process of external review and to carry out the provisions of this section. Any regulations adopted pursuant to this section must provide that:
- (a) All parties must agree to the submission of a matter to an independent review organization before a request for external review may be submitted;
- (b) A party may not be ordered to submit a matter to an independent review organization; and
- (c) The findings and decisions of an independent review organization are not binding.
  - Sec. 116. NRS 616C.390 is hereby amended to read as follows:
  - 616C.390 Except as otherwise provided in NRS 616C.392:
- 1. If an application to reopen a claim to increase or rearrange compensation is made in writing more than 1 year after the date on which the claim was closed, the insurer shall reopen the claim if:
- (a) A change of circumstances warrants an increase or rearrangement of compensation during the life of the claimant;
- (b) The primary cause of the change of circumstances is the injury for which the claim was originally made; and
- (c) The application is accompanied by the certificate of a physician, [or a] chiropractor or advanced practice registered nurse showing a change of circumstances which would warrant an increase or rearrangement of compensation.

- 2. After a claim has been closed, the insurer, upon receiving an application and for good cause shown, may authorize the reopening of the claim for medical investigation only. The application must be accompanied by a written request for treatment from the physician , <code>[or]</code> chiropractor *or advanced practice registered nurse* treating the claimant, certifying that the treatment is indicated by a change in circumstances and is related to the industrial injury sustained by the claimant.
- 3. If a claimant applies for a claim to be reopened pursuant to subsection 1 or 2 and a final determination denying the reopening is issued, the claimant shall not reapply to reopen the claim until at least 1 year after the date on which the final determination is issued.
- 4. Except as otherwise provided in subsection 5, if an application to reopen a claim is made in writing within 1 year after the date on which the claim was closed, the insurer shall reopen the claim only if:
- (a) The application is supported by medical evidence demonstrating an objective change in the medical condition of the claimant; and
- (b) There is clear and convincing evidence that the primary cause of the change of circumstances is the injury for which the claim was originally made.
- 5. An application to reopen a claim must be made in writing within 1 year after the date on which the claim was closed if:
- (a) The claimant did not meet the minimum duration of incapacity as set forth in NRS 616C.400 as a result of the injury; and
- (b) The claimant did not receive benefits for a permanent partial disability. 

  ✓ If an application to reopen a claim to increase or rearrange compensation is made pursuant to this subsection, the insurer shall reopen the claim if the requirements set forth in paragraphs (a), (b) and (c) of subsection 1 are met.
- 6. If an employee's claim is reopened pursuant to this section, the employee is not entitled to vocational rehabilitation services or benefits for a temporary total disability if, before the claim was reopened, the employee:
  - (a) Retired; or
  - (b) Otherwise voluntarily removed himself or herself from the workforce,
- for reasons unrelated to the injury for which the claim was originally made.
- 7. One year after the date on which the claim was closed, an insurer may dispose of the file of a claim authorized to be reopened pursuant to subsection 5, unless an application to reopen the claim has been filed pursuant to that subsection.
- 8. An increase or rearrangement of compensation is not effective before an application for reopening a claim is made unless good cause is shown. The insurer shall, upon good cause shown, allow the cost of emergency treatment the necessity for which has been certified by a physician, [or a] chiropractor [.] or advanced practice registered nurse.
- 9. A claim that closes pursuant to subsection 2 of NRS 616C.235 and is not appealed or is unsuccessfully appealed pursuant to the provisions of NRS 616C.305 and 616C.315 to 616C.385, inclusive, may not be reopened pursuant to this section.

- 10. The provisions of this section apply to any claim for which an application to reopen the claim or to increase or rearrange compensation is made pursuant to this section, regardless of the date of the injury or accident to the claimant. If a claim is reopened pursuant to this section, the amount of any compensation or benefits provided must be determined in accordance with the provisions of NRS 616C.425.
  - Sec. 117. NRS 616C.440 is hereby amended to read as follows:
- 616C.440 1. Except as otherwise provided in this section and NRS 616C.175, every employee in the employ of an employer, within the provisions of chapters 616A to 616D, inclusive, of NRS, who is injured by accident arising out of and in the course of employment, or his or her dependents as defined in chapters 616A to 616D, inclusive, of NRS, is entitled to receive the following compensation for permanent total disability:
- (a) In cases of total disability adjudged to be permanent, compensation per month of  $66\ 2/3$  percent of the average monthly wage.
- (b) If there is a previous disability, as the loss of one eye, one hand, one foot or any other previous permanent disability, the percentage of disability for a subsequent injury must be determined by computing the percentage of the entire disability and deducting therefrom the percentage of the previous disability as it existed at the time of the subsequent injury, but such a deduction for a previous award for permanent partial disability must be made in a reasonable manner and must not be more than the total amount which was paid for the previous award for permanent partial disability. The total amount of the allowable deduction includes, without limitation, compensation for a permanent partial disability that was deducted from:
- (1) Any compensation the employee received for a temporary total disability; or
  - (2) Any other compensation received by the employee.
- (c) If the character of the injury is such as to render the employee so physically helpless as to require the service of a constant attendant, an additional allowance may be made so long as such requirements continue, but the allowance may not be made while the employee is receiving benefits for care in a hospital or facility for intermediate care pursuant to the provisions of NRS 616C.265.
- 2. Except as otherwise provided in NRS 616B.028 and 616B.029, an injured employee or his or her dependents are not entitled to accrue or be paid any benefits for a permanent total disability during the time the injured employee is incarcerated. The injured employee or his or her dependents are entitled to receive those benefits when the injured employee is released from incarceration if the injured employee is certified as permanently totally disabled by a physician, [or] chiropractor [-] or advanced practice registered nurse.
- 3. An employee is entitled to receive compensation for a permanent total disability only so long as the permanent total disability continues to exist. The

insurer has the burden of proving that the permanent total disability no longer exists.

- 4. If an employee who has received compensation in a lump sum for a permanent partial disability pursuant to NRS 616C.495 is subsequently determined to be permanently and totally disabled, the insurer of the employee's employer shall recover pursuant to this subsection the actual amount of the lump sum paid to the employee for the permanent partial disability. The insurer shall not recover from the employee, whether by deductions or single payment, or a combination of both, more than the actual amount of the lump sum paid to the employee. To recover the actual amount of the lump sum, the insurer shall:
- (a) Unless the employee submits a request described in paragraph (b), deduct from the compensation for the permanent total disability an amount that is not more than 10 percent of the rate of compensation for a permanent total disability until the actual amount of the lump sum paid to the employee for the permanent partial disability is recovered; or
- (b) Upon the request of the employee, accept in a single payment from the employee an amount that is equal to the actual amount of the lump sum paid to the employee for the permanent partial disability, less the actual amount of all deductions made to date by the insurer from the employee for repayment of the lump sum.

Sec. 118. NRS 616C.475 is hereby amended to read as follows:

- 616C.475 1. Except as otherwise provided in this section, NRS 616C.175 and 616C.390, every employee in the employ of an employer, within the provisions of chapters 616A to 616D, inclusive, of NRS, who is injured by accident arising out of and in the course of employment, or his or her dependents, is entitled to receive for the period of temporary total disability,  $66\,2/3$  percent of the average monthly wage.
- 2. Except as otherwise provided in NRS 616B.028 and 616B.029, an injured employee or his or her dependents are not entitled to accrue or be paid any benefits for a temporary total disability during the time the injured employee is incarcerated. The injured employee or his or her dependents are entitled to receive such benefits when the injured employee is released from incarceration if the injured employee is certified as temporarily totally disabled by a physician, for chiropractor f. or advanced practice registered nurse.
- 3. If a claim for the period of temporary total disability is allowed, the first payment pursuant to this section must be issued by the insurer within 14 working days after receipt of the initial certification of disability and regularly thereafter.
- 4. Any increase in compensation and benefits effected by the amendment of subsection 1 is not retroactive.
  - 5. Payments for a temporary total disability must cease when:
- (a) A physician , <code>[or]</code> chiropractor *or advanced practice registered nurse* determines that the employee is physically capable of any gainful employment

for which the employee is suited, after giving consideration to the employee's education, training and experience;

- (b) The employer offers the employee light-duty employment or employment that is modified according to the limitations or restrictions imposed by a physician, [or] chiropractor or advanced practice registered nurse pursuant to subsection 7; or
- (c) Except as otherwise provided in NRS 616B.028 and 616B.029, the employee is incarcerated.
- 6. Each insurer may, with each check that it issues to an injured employee for a temporary total disability, include a form approved by the Division for the injured employee to request continued compensation for the temporary total disability.
- 7. A certification of disability issued by a physician,  $\{or\}$  chiropractor or advanced practice registered nurse must:
- (a) Include the period of disability and a description of any physical limitations or restrictions imposed upon the work of the employee;
- (b) Specify whether the limitations or restrictions are permanent or temporary; and
- (c) Be signed by the treating physician, [or] chiropractor *or advanced practice registered nurse* authorized pursuant to NRS 616B.527 or appropriately chosen pursuant to subsection 3 or 4 of NRS 616C.090.
- 8. If the certification of disability specifies that the physical limitations or restrictions are temporary, the employer of the employee at the time of the employee's accident may offer temporary, light-duty employment to the employee. If the employer makes such an offer, the employer shall confirm the offer in writing within 10 days after making the offer. The making, acceptance or rejection of an offer of temporary, light-duty employment pursuant to this subsection does not affect the eligibility of the employee to receive vocational rehabilitation services, including compensation, and does not exempt the employer from complying with NRS 616C.545 to 616C.575, inclusive, and 616C.590 or the regulations adopted by the Division governing vocational rehabilitation services. Any offer of temporary, light-duty employment made by the employer must specify a position that:
- (a) Is substantially similar to the employee's position at the time of his or her injury in relation to the location of the employment and the hours the employee is required to work;
  - (b) Provides a gross wage that is:
- (1) If the position is in the same classification of employment, equal to the gross wage the employee was earning at the time of his or her injury; or
- (2) If the position is not in the same classification of employment, substantially similar to the gross wage the employee was earning at the time of his or her injury; and
- (c) Has the same employment benefits as the position of the employee at the time of his or her injury.

- Sec. 119. NRS 616C.490 is hereby amended to read as follows:
- 616C.490 1. Except as otherwise provided in NRS 616C.175, every employee, in the employ of an employer within the provisions of chapters 616A to 616D, inclusive, of NRS, who is injured by an accident arising out of and in the course of employment is entitled to receive the compensation provided for permanent partial disability. As used in this section, "disability" and "impairment of the whole person" are equivalent terms.
- 2. Within 30 days after receiving from a physician, [or] chiropractor or advanced practice registered nurse a report indicating that the injured employee may have suffered a permanent disability and is stable and ratable, the insurer shall schedule an appointment with the rating physician, [or] chiropractor or advanced practice registered nurse selected pursuant to this subsection to determine the extent of the employee's disability. Unless the insurer and the injured employee otherwise agree to a rating physician, [or] chiropractor [:] or advanced practice registered nurse:
- (a) The insurer shall select the rating physician , [or] chiropractor or advanced practice registered nurse from the list of qualified rating physicians , [and] chiropractors and advanced practice registered nurses designated by the Administrator, to determine the percentage of disability in accordance with the American Medical Association's <u>Guides to the Evaluation of Permanent Impairment</u> as adopted and supplemented by the Division pursuant to NRS 616C.110.
- (b) Rating physicians , [and] chiropractors and advanced practice registered nurses must be selected in rotation from the list of qualified physicians , [and] chiropractors and advanced practice registered nurses designated by the Administrator, according to their area of specialization and the order in which their names appear on the list unless the next physician, [or] chiropractor or advanced practice registered nurse is currently an employee of the insurer making the selection, in which case the insurer must select the physician , [or] chiropractor or advanced practice registered nurse who is next on the list and who is not currently an employee of the insurer.
- 3. If an insurer contacts the treating physician , [or] chiropractor or advanced practice registered nurse to determine whether an injured employee has suffered a permanent disability, the insurer shall deliver to the treating physician , [or] chiropractor or advanced practice registered nurse that portion or a summary of that portion of the American Medical Association's Guides to the Evaluation of Permanent Impairment as adopted by the Division pursuant to NRS 616C.110 that is relevant to the type of injury incurred by the employee.
- 4. At the request of the insurer, the injured employee shall, before an evaluation by a rating physician, [or] chiropractor or advanced practice registered nurse is performed, notify the insurer of:
- (a) Any previous evaluations performed to determine the extent of any of the employee's disabilities; and

- (b) Any previous injury, disease or condition sustained by the employee which is relevant to the evaluation performed pursuant to this section.
- → The notice must be on a form approved by the Administrator and provided to the injured employee by the insurer at the time of the insurer's request.
- 5. Unless the regulations adopted pursuant to NRS 616C.110 provide otherwise, a rating evaluation must include an evaluation of the loss of motion, sensation and strength of an injured employee if the injury is of a type that might have caused such a loss. Except in the case of claims accepted pursuant to NRS 616C.180, no factors other than the degree of physical impairment of the whole person may be considered in calculating the entitlement to compensation for a permanent partial disability.
- 6. The rating physician, [or] chiropractor or advanced practice registered nurse shall provide the insurer with his or her evaluation of the injured employee. After receiving the evaluation, the insurer shall, within 14 days, provide the employee with a copy of the evaluation and notify the employee:
- (a) Of the compensation to which the employee is entitled pursuant to this section; or
- (b) That the employee is not entitled to benefits for permanent partial disability.
- 7. Each 1 percent of impairment of the whole person must be compensated by a monthly payment:
- (a) Of 0.5 percent of the claimant's average monthly wage for injuries sustained before July 1, 1981;
- (b) Of 0.6 percent of the claimant's average monthly wage for injuries sustained on or after July 1, 1981, and before June 18, 1993;
- (c) Of 0.54 percent of the claimant's average monthly wage for injuries sustained on or after June 18, 1993, and before January 1, 2000; and
- (d) Of 0.6 percent of the claimant's average monthly wage for injuries sustained on or after January 1, 2000.
- → Compensation must commence on the date of the injury or the day following the termination of temporary disability compensation, if any, whichever is later, and must continue on a monthly basis for 5 years or until the claimant is 70 years of age, whichever is later.
- 8. Compensation benefits may be paid annually to claimants who will be receiving less than \$100 a month.
- 9. Where there is a previous disability, as the loss of one eye, one hand, one foot, or any other previous permanent disability, the percentage of disability for a subsequent injury must be determined by computing the percentage of the entire disability and deducting therefrom the percentage of the previous disability as it existed at the time of the subsequent injury.
- 10. The Division may adopt schedules for rating permanent disabilities resulting from injuries sustained before July 1, 1973, and reasonable regulations to carry out the provisions of this section.

- 11. The increase in compensation and benefits effected by the amendment of this section is not retroactive for accidents which occurred before July 1, 1973.
- 12. This section does not entitle any person to double payments for the death of an employee and a continuation of payments for a permanent partial disability, or to a greater sum in the aggregate than if the injury had been fatal. Sec. 120. NRS 616C.500 is hereby amended to read as follows:
- 616C.500 1. Except as otherwise provided in subsection 2 and NRS 616C.175, every employee in the employ of an employer, within the provisions of chapters 616A to 616D, inclusive, of NRS, who is injured by accident arising out of and in the course of employment, is entitled to receive for a temporary partial disability the difference between the wage earned after the injury and the compensation which the injured person would be entitled to receive if temporarily totally disabled when the wage is less than the compensation, but for a period not to exceed 24 months during the period of disability.
- 2. Except as otherwise provided in NRS 616B.028 and 616B.029, an injured employee or his or her dependents are not entitled to accrue or be paid any benefits for a temporary partial disability during the time the employee is incarcerated. The injured employee or his or her dependents are entitled to receive such benefits if the injured employee is released from incarceration during the period of disability specified in subsection 1 and the injured employee is certified as temporarily partially disabled by a physician , [or] chiropractor [.] or advanced practice registered nurse.
  - Sec. 121. NRS 616C.545 is hereby amended to read as follows:
- 616C.545 If an employee does not return to work for 28 consecutive calendar days as a result of an injury arising out of and in the course of his or her employment or an occupational disease, the insurer shall contact the treating physician, [or] chiropractor or advanced practice registered nurse to determine whether:
- 1. There are physical limitations on the injured employee's ability to work; and
  - 2. The limitations, if any, are permanent or temporary.
  - Sec. 122. NRS 616C.550 is hereby amended to read as follows:
- 616C.550 1. If benefits for a temporary total disability will be paid to an injured employee for more than 90 days, the insurer or the injured employee may request a vocational rehabilitation counselor to prepare a written assessment of the injured employee's ability or potential to return to:
  - (a) The position the employee held at the time that he or she was injured; or
  - (b) Any other gainful employment.
  - 2. Before completing the written assessment, the counselor shall:
  - (a) Contact the injured employee and:
- (1) Identify the injured employee's educational background, work experience and career interests; and

- (2) Determine whether the injured employee has any existing marketable skills.
- (b) Contact the injured employee's treating physician, [or] chiropractor *or advanced practice registered nurse* and determine:
- (1) Whether the employee has any temporary or permanent physical limitations;
  - (2) The estimated duration of the limitations;
  - (3) Whether there is a plan for continued medical treatment; and
- (4) When the employee may return to the position that the employee held at the time of his or her injury or to any other position. The treating physician , [or] chiropractor *or advanced practice registered nurse* shall determine whether an employee may return to the position that the employee held at the time of his or her injury.
- 3. Except as otherwise provided in NRS 616C.542 and 616C.547, a vocational rehabilitation counselor shall prepare a written assessment not more than 30 days after receiving a request for a written assessment pursuant to subsection 1. The written assessment must contain a determination as to whether the employee is eligible for vocational rehabilitation services pursuant to NRS 616C.590. If the insurer, with the assistance of the counselor, determines that the employee is eligible for vocational rehabilitation services, a plan for a program of vocational rehabilitation must be completed pursuant to NRS 616C.555.
- 4. The Division may, by regulation, require a written assessment to include additional information.
- 5. If an insurer determines that a written assessment requested pursuant to subsection 1 is impractical because of the expected duration of the injured employee's total temporary disability, the insurer shall:
- (a) Complete a written report which specifies the insurer's reasons for the decision; and
  - (b) Review the claim at least once every 60 days.
- 6. The insurer shall deliver a copy of the written assessment or the report completed pursuant to subsection 5 to the injured employee, his or her employer, the treating physician, [or] chiropractor or advanced practice registered nurse and the injured employee's attorney or representative, if applicable.
- 7. For the purposes of this section, "existing marketable skills" include, but are not limited to:
  - (a) Completion of:
    - (1) A program at a trade school;
    - (2) A program which resulted in an associate's degree; or
    - (3) A course of study for certification,
- → if the program or course of study provided the skills and training necessary for the injured employee to be gainfully employed on a reasonably continuous basis in an occupation that is reasonably available in this State.

- (b) Completion of a 2-year or 4-year program at a college or university which resulted in a degree.
- (c) Completion of any portion of a program for a graduate's degree at a college or university.
- (d) Skills acquired in previous employment, including those acquired during an apprenticeship or a program for on-the-job training.
- The skills set forth in paragraphs (a) to (d), inclusive, must have been acquired within the preceding 7 years and be compatible with the physical limitations of the injured employee to be considered existing marketable skills.
- 8. Each written assessment of an injured employee must be signed by a certified vocational rehabilitation counselor.
  - Sec. 123. NRS 616C.555 is hereby amended to read as follows:
- 616C.555 1. A vocational rehabilitation counselor shall develop a plan for a program of vocational rehabilitation for each injured employee who is eligible for vocational rehabilitation services pursuant to NRS 616C.590. The counselor shall work with the insurer and the injured employee to develop a program that is compatible with the injured employee's age, sex and physical condition.
- 2. If the counselor determines in a written assessment requested pursuant to NRS 616C.550 that the injured employee has existing marketable skills, the plan must consist of job placement assistance only. When practicable, the goal of job placement assistance must be to aid the employee in finding a position which pays a gross wage that is equal to or greater than 80 percent of the gross wage that the employee was earning at the time of his or her injury. An injured employee must not receive job placement assistance for more than 6 months after the date on which the injured employee was notified that he or she is eligible only for job placement assistance because:
  - (a) The injured employee was physically capable of returning to work; or
- (b) It was determined that the injured employee had existing marketable skills.
- 3. If the counselor determines in a written assessment requested pursuant to NRS 616C.550 that the injured employee does not have existing marketable skills, the plan must consist of a program which trains or educates the injured employee and provides job placement assistance. Except as otherwise provided in NRS 616C.560, such a program must not exceed:
- (a) If the injured employee has incurred a permanent disability as a result of which permanent restrictions on the ability of the injured employee to work have been imposed but no permanent physical impairment rating has been issued, or a permanent disability with a permanent physical impairment of 1 percent or more but less than 6 percent, 9 months.
- (b) If the injured employee has incurred a permanent physical impairment of 6 percent or more, but less than 11 percent, 1 year.
- (c) If the injured employee has incurred a permanent physical impairment of 11 percent or more, 18 months.

- → The percentage of the injured employee's permanent physical impairment must be determined pursuant to NRS 616C.490.
- 4. A plan for a program of vocational rehabilitation must comply with the requirements set forth in NRS 616C.585.
- 5. A plan created pursuant to subsection 2 or 3 must assist the employee in finding a job or train or educate the employee and assist the employee in finding a job that is a part of an employer's regular business operations and from which the employee will gain skills that would generally be transferable to a job with another employer.
- 6. A program of vocational rehabilitation must not commence before the treating physician, [or] chiropractor [,] or advanced practice registered nurse, or an examining physician, [or] chiropractor or advanced practice registered nurse determines that the injured employee is capable of safely participating in the program.
- 7. If, based upon the opinion of a treating or an examining physician, [or] chiropractor [,] or advanced practice registered nurse, the counselor determines that an injured employee is not eligible for vocational rehabilitation services, the counselor shall provide a copy of the opinion to the injured employee, the injured employee's employer and the insurer.
- 8. A plan for a program of vocational rehabilitation must be signed by a certified vocational rehabilitation counselor.
- 9. If an initial program of vocational rehabilitation pursuant to this section is unsuccessful, an injured employee may submit a written request for the development of a second program of vocational rehabilitation which relates to the same injury. An insurer shall authorize a second program for an injured employee upon good cause shown.
- 10. If a second program of vocational rehabilitation pursuant to subsection 9 is unsuccessful, an injured employee may submit a written request for the development of a third program of vocational rehabilitation which relates to the same injury. The insurer, with the approval of the employer who was the injured employee's employer at the time of his or her injury, may authorize a third program for the injured employee. If such an employer has terminated operations, the employer's approval is not required for authorization of a third program. An insurer's determination to authorize or deny a third program of vocational rehabilitation may not be appealed.
- 11. The Division shall adopt regulations to carry out the provisions of this section. The regulations must specify the contents of a plan for a program of vocational rehabilitation.
  - Sec. 124. NRS 616C.560 is hereby amended to read as follows:
- 616C.560 1. A program for vocational rehabilitation developed pursuant to subsection 3 of NRS 616C.555 may be extended:
- (a) Without condition or limitation, by the insurer at the insurer's sole discretion; or
  - (b) In accordance with this section if:

- (1) The injured employee makes a written request to extend the program not later than 30 days after the program has been completed; and
- (2) There are exceptional circumstances which make it unlikely that the injured employee will obtain suitable gainful employment as a result of vocational rehabilitation which is limited to the period for which the injured employee is eligible.
- → An insurer's determination to grant or deny an extension pursuant to paragraph (a) may not be appealed.
- 2. If an injured employee has incurred a permanent physical impairment of less than 11 percent:
- (a) The total length of the program, including any extension, must not exceed 2 years.
- (b) "Exceptional circumstances" shall be deemed to exist for the purposes of paragraph (b) of subsection 1, if:
- (1) The injured employee lacks work experience, training, education or other transferable skills for an occupation which the injured employee is physically capable of performing; or
- (2) Severe physical restrictions as a result of the industrial injury have been imposed by a physician, *chiropractor or advanced practice registered nurse* which significantly limit the employee's occupational opportunities.
- 3. If an injured employee has incurred a permanent physical impairment of 11 percent or more:
- (a) The total length of the program, including any extension, must not exceed  $2\ 1/2$  years.
- (b) "Exceptional circumstances" shall be deemed to exist for the purposes of paragraph (b) of subsection 1, if the injured employee has suffered:
  - (1) The total and permanent loss of sight of both eyes;
  - (2) The loss by separation of a leg at or above the knee;
  - (3) The loss by separation of a hand at or above the wrist;
- (4) An injury to the head or spine which results in permanent and complete paralysis of both legs, both arms or a leg and an arm;
- (5) An injury to the head which results in a severe cognitive functional impairment which may be established by a nationally recognized form of objective psychological testing;
- (6) The loss by separation of an arm at or above the elbow and the loss by separation of a leg at or above the knee;
- (7) An injury consisting of second or third degree burns on 50 percent or more of the body, both hands or the face;
  - (8) A total bilateral loss of hearing;
  - (9) The total loss or significant and permanent impairment of speech; or
- (10) A permanent physical impairment of 50 percent or more determined pursuant to NRS 616C.490, if the severity of the impairment limits the injured employee's gainful employment to vocations that are primarily intellectual and require a longer program of education.

- 4. The insurer shall deliver a copy of its decision granting or denying an extension to the injured employee and the employer. Except as otherwise provided in this section, the decision shall be deemed to be a final determination of the insurer for the purposes of NRS 616C.315.
  - Sec. 125. NRS 616C.590 is hereby amended to read as follows:
- 616C.590 1. Except as otherwise provided in this section, an injured employee is not eligible for vocational rehabilitation services, unless:
- (a) The treating physician , [or] chiropractor or advanced practice registered nurse approves the return of the injured employee to work but imposes permanent restrictions that prevent the injured employee from returning to the position that the employee held at the time of his or her injury;
  - (b) The injured employee's employer does not offer employment that:
- (1) The employee is eligible for considering the restrictions imposed pursuant to paragraph (a);
- (2) Provides a gross wage that is equal to or greater than 80 percent of the gross wage that the employee was earning at the time of injury; and
- (3) Has the same employment benefits as the position of the employee at the time of his or her injury; and
- (c) The injured employee is unable to return to gainful employment with any other employer at a gross wage that is equal to or greater than 80 percent of the gross wage that the employee was earning at the time of his or her injury.
- 2. If the treating physician, [or] chiropractor *or advanced practice registered nurse* imposes permanent restrictions on the injured employee for the purposes of paragraph (a) of subsection 1, he or she shall specify in writing:
- (a) The medically objective findings upon which his or her determination is based; and
  - (b) A detailed description of the restrictions.
- → The treating physician, [or] chiropractor or advanced practice registered nurse shall deliver a copy of the findings and the description of the restrictions to the insurer.
- 3. If there is a question as to whether the restrictions imposed upon the injured employee are permanent, the employee may receive vocational rehabilitation services until a final determination concerning the duration of the restrictions is made.
- 4. Vocational rehabilitation services must cease as soon as the injured employee is no longer eligible for the services pursuant to subsection 1.
- 5. An injured employee is not entitled to vocational rehabilitation services solely because the position that the employee held at the time of his or her injury is no longer available.
- 6. An injured employee or the dependents of the injured employee are not entitled to accrue or be paid any money for vocational rehabilitation services during the time the injured employee is incarcerated.
- 7. Any injured employee eligible for compensation other than accident benefits may not be paid those benefits if the injured employee refuses counseling, training or other vocational rehabilitation services offered by the

insurer. Except as otherwise provided in NRS 616B.028 and 616B.029, an injured employee shall be deemed to have refused counseling, training and other vocational rehabilitation services while the injured employee is incarcerated.

- 8. If an insurer cannot locate an injured employee for whom it has ordered vocational rehabilitation services, the insurer may close his or her claim 21 days after the insurer determines that the employee cannot be located. The insurer shall make a reasonable effort to locate the employee.
- 9. The reappearance of the injured employee after his or her claim has been closed does not automatically reinstate his or her eligibility for vocational rehabilitation benefits. If the employee wishes to re-establish his or her eligibility for those benefits, the injured employee must file a written application with the insurer to reinstate the claim. The insurer shall reinstate the employee's claim if good cause is shown for the employee's absence.
  - Sec. 126. NRS 616C.700 is hereby amended to read as follows:
- 616C.700 1. Notwithstanding any other provision of this chapter, if an insurer accepts a claim for a catastrophic injury, the insurer shall:
- (a) As soon as reasonably practicable after the date of acceptance of the claim, assign the claim to a qualified adjuster, nurse and vocational rehabilitation counselor:
- (b) Within 120 days after the date on which the treating physician, chiropractor or advanced practice registered nurse determines that the condition of the injured employee has stabilized and that the injured employee requires a life care plan, develop a life care plan in consultation with the adjuster, nurse and vocational rehabilitation counselor assigned to the claim pursuant to paragraph (a); and
- (c) Pay benefits and provide the proper medical services to the injured employee during the entire period of the development and implementation of the life care plan.
- 2. A life care plan which is developed pursuant to subsection 1 must ensure the prompt, efficient and proper provision of medical services to the injured employee.
- 3. In developing a life care plan for an injured employee, the insurer, in consultation with the adjuster, nurse and vocational rehabilitation counselor assigned to the claim pursuant to paragraph (a) of subsection 1, shall assess the following:
- (a) The number of home or hospital visits determined to be necessary or appropriate by the registered nurse and vocational rehabilitation counselor;
  - (b) The life expectancy of the injured employee;
- (c) The medical needs of the injured employee, including, without limitation:
  - (1) Surgery;
  - (2) Prescription medication;
  - (3) Physical therapy; and
  - (4) Maintenance therapy;

- (d) The effect, if any, of any preexisting medical condition; and
- (e) The potential of the injured employee for rehabilitation, taking into account:
- (1) The injured employee's medical condition, age, educational level, work experience and motivation; and
  - (2) Any other relevant factors.
- 4. A life care plan developed pursuant to paragraph (b) of subsection 1 must include, without limitation, a schedule for the adjuster, nurse and vocational rehabilitation counselor assigned to the claim pursuant to paragraph (a) of subsection 1 to meet or communicate with the injured employee, if practicable, and the treating physician *or advanced practice registered nurse* to determine the need for, without limitation:
  - (a) Special medical attention or treatment;
  - (b) Psychological counseling or testing; and
  - (c) Any medical device, including, without limitation:
  - (1) A wheelchair;
  - (2) A prosthesis; and
  - (3) A specially equipped or designed motor vehicle.
- 5. A life care plan developed pursuant to paragraph (b) of subsection 1 must include a plan of action for treatment or vocational rehabilitation of the injured employee or consideration of the possible permanent total disability of the injured employee.
- 6. In addition to any claim determination affecting the rights of an injured employee under his or her claim, or responses to requests on behalf of the injured employee for specific action or information on the claim or any other contact that may occur, an insurer shall:
- (a) Schedule a personal meeting concerning the status of the claim to take place at least once per calendar month between the adjuster assigned to the claim pursuant to paragraph (a) of subsection 1 and the injured employee or a family member or designated representative of the injured employee; or
- (b) If a personal meeting described in paragraph (a) is not practicable, provide a written report concerning the status of the claim and soliciting requests and information at least once per calendar month to the injured employee or a family member or designated representative of the injured employee. The report must be mailed to the injured employee or a family member or designated representative of the injured employee by first-class mail.
- 7. Except as otherwise provided in this subsection, a life care plan developed pursuant to paragraph (b) of subsection 1 must be based on the condition of the injured employee at the time the life care plan is established. If there is a substantial or significant change in the condition or prognosis of the injured employee, the insurer shall amend the life care plan to reflect the change in the condition or prognosis of the injured employee.
  - Sec. 127. NRS 706.495 is hereby amended to read as follows:

- 706.495 1. Before applying to a taxicab motor carrier for employment or a contract or lease as a driver of a taxicab, a person must obtain a medical examiner's certificate with two copies thereof from a medical examiner who is licensed to practice in the State of Nevada. The prospective driver must provide a copy of the certificate to the taxicab motor carrier.
- 2. A medical examiner shall issue the certificate and copies described in subsection 1 if the medical examiner finds that a prospective driver meets the health requirements established by the Federal Motor Carrier Safety Regulations, 49 C.F.R. §§ 391.41 et seq.
- 3. The certificate described in subsection 1 must state that the medical examiner has examined the prospective driver and has found that the prospective driver meets the health requirements described in subsection 2. The certificate must be signed and dated by the medical examiner.
- 4. The medical examiner's certificate required by this section expires 2 years after the date of issuance and may be renewed.
- 5. As used in this section, "medical examiner" means a physician, as defined in NRS 0.040, an advanced practice registered nurse licensed pursuant to NRS 632.237 or a chiropractic physician licensed pursuant to chapter 634 of NRS.
  - Sec. 128. NRS 706.8842 is hereby amended to read as follows:
- 706.8842 1. Before applying to a certificate holder for employment as a driver, a person must obtain a medical examiner's certificate with two copies thereof from a medical examiner who is licensed to practice in the State of Nevada.
- 2. A medical examiner shall issue the certificate and copies described in subsection 1 if the medical examiner finds that a prospective driver meets the health requirements established by the Federal Motor Carrier Safety Regulations, 49 C.F.R. §§ 391.41 et seq.
- 3. The certificate described in subsection 1 must state that the medical examiner has examined the prospective driver and has found that the prospective driver meets the health requirements described in subsection 2. The certificate must be signed and dated by the medical examiner.
- 4. The medical examiner's certificate required by this section expires 2 years after the date of issuance and may be renewed.
- 5. As used in this section, "medical examiner" means a physician, as defined in NRS 0.040, an advanced practice registered nurse licensed pursuant to NRS 632.237 or a chiropractic physician licensed pursuant to chapter 634 of NRS.
  - Sec. 129. This act becomes effective:
- 1. Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
  - 2. On January 1, 2018, for all other purposes. Senator Atkinson moved the adoption of the amendment.

### Remarks by Senator Atkinson.

Amendment No. 257 makes two changes to Senate Bill No. 227. The amendment authorizes a court to appoint an advanced-practice registered nurse who has obtained the psychiatric training and experience prescribed by the State Board of Nursing to examine the competency of a defendant who has been accused of a misdemeanor.

It also provides the judge presiding over a proceeding for an emergency admission to a facility of a person alleged with a mental illness with complete discretion in choosing the health care professionals to conduct the examination of the person.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

#### MOTIONS. RESOLUTIONS AND NOTICES

Senator Roberson moved that the action whereby Senate Bill No. 484 was passed be reconsidered.

Motion carried.

Senator Roberson moved that the bill be placed at the bottom of the General File.

Motion carried.

#### SECOND READING AND AMENDMENT

Senate Bill No. 246.

Bill read second time.

The following amendment was proposed by the Committee on Government Affairs:

Amendment No. 110.

SUMMARY—Revises provisions relating to public works. (BDR 28-667) AN ACT relating to public works; revising provisions governing [advertising for and the submission of proposals relating to] a contract for a public work involving a construction manager at risk; [eliminating the monetary threshold at which] revising provisions relating to the authority of public bodies [are authorized] to enter into a contract with a design-build team for the construction of a public work; extending the prospective expiration of provisions relating to construction managers at risk; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Under existing law, public bodies are authorized to construct public works under certain circumstances through a method by which a construction manager at risk provides preconstruction services on the public work and, in some cases, construction services on the public work within a guaranteed maximum price, a fixed price or a fixed price plus reimbursement for certain costs. (NRS 338.1685-338.16995) Existing law declares the legislative intent for authorizing this method of construction, including to benefit the public by promoting the philosophy of obtaining the best possible value as compared to low-bid contracting. (NRS 338.1685) Section 1 of this bill declares that this method of construction is not intended to be used by the State or a political subdivision to limit competition, discourage competitive bidding or engage in or allow bid-shopping.

Existing law requires a public body that wishes to use [this] the construction manager at risk method to construct a public work to advertise for proposals for a construction manager at risk by publication in a qualified newspaper. Similarly, any construction manager at risk selected by a public body is required to advertise for applications from subcontractors to provide labor, materials or equipment on the public work by publication in a qualified newspaper. (NRS 338.1692, 338.16995) Sections [11] 1.3 and 2 of this bill make the procedure with which a public body and a construction manager at risk are required to comply for advertising for proposals or applications, as applicable, under the project delivery method of construction manager at risk the same as the procedure with which a public body is required to comply to advertise for bids on a public work for which the estimated cost exceeds \$100,000 under the project delivery method of "design-bid-build." Additionally, section 1.3 prohibits an applicant for selection as a construction manager at risk from substituting another employee for an employee whose resume was included in the applicant's proposal to the public body, unless the original employee is unavailable for certain specified reasons or the public body fails to select a construction manager at risk within a certain period.

Existing law authorizes a public body, in selecting a construction manager at risk, to require applicants who are invited for an interview to submit a preliminary proposed amount of compensation for managing the preconstruction and construction of the public work, but limits consideration of that amount of compensation to not more than 20 percent of the scoring for the selection of the most qualified applicant. (NRS 338.1693) Section 1.7 of this bill requires that the preliminary proposed amount of compensation include general overhead and profit and requires that consideration of that proposed amount constitute at least 5 percent of the scoring of an applicant.

Existing law prescribes the procedure for the award by a construction manager at risk to qualified subcontractors of subcontracts for which the estimated value is at least 1 percent of the total cost of the public work or \$50,000, whichever is greater. The procedure includes the provision to qualified subcontractors of written notice regarding the specifics of the subcontract and the requirements for submitting a responsive proposal. (NRS 338.16991, 338.16995) Section 3 of this bill requires a construction manager at risk to provide each qualified subcontractor with a form that has been prepared by the construction manager at risk and approved by the public body on which any proposal in response to a request for proposals for the public work is required to be submitted.

Existing law eliminates the authority for public bodies to enter into contracts with construction managers at risk effective July 1, 2017. (Section 15 of chapter 487, Statutes of Nevada 2013, p. 2986 and section 9 of chapter 123, Statutes of Nevada 2015, p. 457) Sections 5 and 6 of this bill postpone the prospective expiration of this authority until June 30, 2021.

Existing law authorizes a public body to contract with a design-build team for the design and construction of a public work if the estimated cost of the

public work exceeds \$5,000,000. (NRS 338.1711) Section 4 of this bill [eliminates the \$5,000,000 threshold and therefore] authorizes a public body, within a 12-month period, to contract with a design-build team for the design and construction of [a public work of any] not more than two discrete public works projects, each of which have an estimated cost [-] of \$5,000,000 or less.

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

Section 1. NRS 338.1685 is hereby amended to read as follows:

338.1685 The Legislature hereby declares that the provisions of NRS 338.1685 to 338.16995, inclusive, relating to contracts involving construction managers at risk [-, are]:

- 1. Are intended:
- (a) To promote public confidence and trust in the contracting and bidding procedures for public works established therein;
- $\frac{2}{2}$  (b) For the benefit of the public, to promote the philosophy of obtaining the best possible value as compared to low-bid contracting; and
- [3.] (c) To better equip public bodies to address public works that present unique and complex construction challenges.
- 2. Are not intended to be used by the State or a political subdivision of this State to:
- (a) Limit competition;
- (b) Discourage competitive bidding; or
- (c) Engage in or allow bid-shopping.

[Section 1.] Sec. 1.3. NRS 338.1692 is hereby amended to read as follows:

- 338.1692 1. A public body or its authorized representative shall advertise for proposals for a construction manager at risk in [a newspaper qualified pursuant to chapter 238 of NRS that is published in the county where the public work will be performed. If no qualified newspaper is published in the county where the public work will be performed, the required advertisement must be published in some qualified newspaper that is printed in the State of Nevada and has a general circulation in the county.] the manner set forth in paragraph (a) of subsection 1 of NRS 338.1385.
- 2. A request for proposals published pursuant to subsection 1 must include, without limitation:
  - (a) A description of the public work;
  - (b) An estimate of the cost of construction;
- (c) A description of the work that the public body expects a construction manager at risk to perform;
- (d) The dates on which it is anticipated that the separate phases of the preconstruction and construction of the public work will begin and end;
  - (e) The date by which proposals must be submitted to the public body;
- (f) If the project is a public work of the State, a statement setting forth that the construction manager at risk must be qualified to bid on a public work of the State pursuant to NRS 338.1379 before submitting a proposal;

- (g) The name, title, address and telephone number of a person employed by the public body that an applicant may contact for further information regarding the public work;
- (h) A list of the selection criteria and relative weight of the selection criteria that will be used to rank proposals pursuant to subsection 2 of NRS 338.1693;
- (i) A list of the selection criteria and relative weight of the selection criteria that will be used to rank applicants pursuant to subsection 7 of NRS 338.1693; and
- (j) A notice that the proposed form of the contract to assist in the preconstruction of the public work or to construct the public work, including, without limitation, the terms and general conditions of the contract, is available from the public body.
  - 3. A proposal must include, without limitation:
- (a) An explanation of the experience that the applicant has with projects of similar size and scope in both the public and private sectors by any delivery method, whether or not that method was the use of a construction manager at risk, and including, without limitation, design-build, design-assist, negotiated work or value-engineered work, and an explanation of the experience that the applicant has in such projects in Nevada;
- (b) The contact information for references who have knowledge of the background, character and technical competence of the applicant;
- (c) Evidence of the ability of the applicant to obtain the necessary bonding for the work to be required by the public body;
- (d) Evidence that the applicant has obtained or has the ability to obtain such insurance as may be required by law;
  - (e) A statement of whether the applicant has been:
- (1) Found liable for breach of contract with respect to a previous project, other than a breach for legitimate cause, during the 5 years immediately preceding the date of the advertisement for proposals; and
- (2) Disqualified from being awarded a contract pursuant to NRS 338.017, 338.13895, 338.1475 or 408.333;
- (f) The professional qualifications and experience of the applicant, including, without limitation, the resume of any employee of the applicant who will be managing the preconstruction and construction of the public work;
- (g) The safety programs established and the safety records accumulated by the applicant;
- (h) Evidence that the applicant is licensed as a contractor pursuant to chapter 624 of NRS;
- (i) The proposed plan of the applicant to manage the preconstruction and construction of the public work which sets forth in detail the ability of the applicant to provide preconstruction services and to construct the public work and which includes, if the public work involves predominantly horizontal construction, a statement that the applicant will perform construction work equal in value to at least 25 percent of the estimated cost of construction; and

- (j) If the project is for the design of a public work of the State, evidence that the applicant is qualified to bid on a public work of the State pursuant to NRS 338.1379.
- 4. The public body or its authorized representative shall make available to the public the name of each applicant who submits a proposal pursuant to this section.
- 5. An applicant shall not substitute a different employee for an employee whose resume was submitted pursuant to paragraph (f) of subsection 3, unless:
- (a) The employee whose resume was submitted is no longer employed by the applicant or is unavailable for medical reasons; or
- (b) The public body selects a construction manager at risk more than 30 days after the date by which proposals were required to be submitted to the public body.
  - Sec. 1.7. NRS 338.1693 is hereby amended to read as follows:
- 338.1693 1. The public body or its authorized representative shall appoint a panel consisting of at least three but not more than seven members, a majority of whom must have experience in the construction industry, to rank the proposals submitted to the public body by evaluating the proposals as required pursuant to subsections 2 and 3.
- 2. The panel appointed pursuant to subsection 1 shall rank the proposals by:
- (a) Verifying that each applicant satisfies the requirements of NRS 338.1691; and
- (b) Evaluating and assigning a score to each of the proposals received by the public body based on the factors and relative weight assigned to each factor that the public body specified in the request for proposals.
- 3. When ranking the proposals, the panel appointed pursuant to subsection 1 shall assign a relative weight of 5 percent to the applicant's possession of a certificate of eligibility to receive a preference in bidding on public works if the applicant submits a signed affidavit that meets the requirements of subsection 1 of NRS 338.0117. If any federal statute or regulation precludes the granting of federal assistance or reduces the amount of that assistance for a particular public work because of the provisions of this subsection, those provisions of this subsection do not apply insofar as their application would preclude or reduce federal assistance for that work.
- 4. After the panel appointed pursuant to subsection 1 ranks the proposals, the public body or its authorized representative shall, except as otherwise provided in subsection 8, select at least the two but not more than the five applicants whose proposals received the highest scores for interviews.
- 5. The public body or its authorized representative may appoint a separate panel to interview and rank the applicants selected pursuant to subsection 4. If a separate panel is appointed pursuant to this subsection, the panel must consist of at least three but not more than seven members, a majority of whom must have experience in the construction industry.

- 6. During the interview process, the panel conducting the interview may require the applicants to submit a preliminary proposed amount of compensation for managing the preconstruction and construction of the public work, *including, without limitation, the cost of general overhead and profit,* but in no event shall the proposed amount of compensation [exceed] *be less than 5 percent or more than* 20 percent of the scoring for the selection of the most qualified applicant. All presentations made at any interview conducted pursuant to this subsection or subsection 5 may be made only by key personnel employed by the applicant, as determined by the applicant, and the employees of the applicant who will be directly responsible for managing the preconstruction and construction of the public work.
- 7. After conducting such interviews, the panel that conducted the interviews shall rank the applicants by using a ranking process that is separate from the process used to rank the applicants pursuant to subsection 2 and is based only on information submitted during the interview process. The score to be given for the proposed amount of compensation, if any, must be calculated by dividing the lowest of all the proposed amounts of compensation by the applicant's proposed amount of compensation multiplied by the total possible points available to each applicant. When ranking the applicants, the panel that conducted the interviews shall assign a relative weight of 5 percent to the applicant's possession of a certificate of eligibility to receive a preference in bidding on public works if the applicant submits a signed affidavit that meets the requirements of subsection 1 of NRS 338.0117. If any federal statute or regulation precludes the granting of federal assistance or reduces the amount of that assistance for a particular public work because of the provisions of this subsection, those provisions of this subsection do not apply insofar as their application would preclude or reduce federal assistance for that work.
- 8. If the public body did not receive at least two proposals, the public body may not contract with a construction manager at risk.
- 9. Upon receipt of the final rankings of the applicants from the panel that conducted the interviews, the public body or its authorized representative shall enter into negotiations with the most qualified applicant determined pursuant to the provisions of this section for a contract for preconstruction services, unless the public body required the submission of a proposed amount of compensation, in which case the proposed amount of compensation submitted by the applicant must be the amount offered for the contract. If the public body or its authorized representative is unable to negotiate a contract with the most qualified applicant for an amount of compensation that the public body or its authorized representative and the most qualified applicant determine to be fair and reasonable, the public body or its authorized representative shall terminate negotiations with that applicant. The public body or its authorized representative may then undertake negotiations with the next most qualified applicant in sequence until an agreement is reached and, if the negotiation is undertaken by an authorized representative of the public body, approved by

the public body or until a determination is made by the public body to reject all applicants.

- 10. The public body or its authorized representative shall:
- (a) Make available to all applicants and the public the following information, as determined by the panel appointed pursuant to subsection 1 and the panel that conducted the interviews, as applicable:
  - (1) The final rankings of the applicants;
  - (2) The score assigned to each proposal received by the public body; and
- (3) For each proposal received by the public body, the score assigned to each factor that the public body specified in the request for proposals; and
- (b) Provide, upon request, an explanation to any unsuccessful applicant of the reasons why the applicant was unsuccessful.
  - Sec. 2. NRS 338.16991 is hereby amended to read as follows:
- 338.16991 1. To be eligible to provide labor, materials or equipment on a public work, the contract for which a public body has entered into with a construction manager at risk pursuant to NRS 338.1696, a subcontractor must be:
  - (a) Licensed pursuant to chapter 624 of NRS; and
- (b) Qualified pursuant to the provisions of this section to submit a proposal for the provision of labor, materials or equipment on a public work.
- 2. Subject to the provisions of subsections 3, 4 and 5, the construction manager at risk shall determine whether an applicant is qualified to submit a proposal for the provision of labor, materials or equipment on the public work for the purposes of paragraph (b) of subsection 1.
- 3. Not earlier than 30 days after a construction manager at risk has been selected pursuant to NRS 338.1693 and not later than 10 working days before the date by which an application must be submitted, the construction manager at risk shall advertise for applications from subcontractors in [a newspaper qualified pursuant to chapter 238 of NRS that is published in the county where the public work will be performed. If no qualified newspaper is published in the county where the public work will be performed, the advertisement must be published in some qualified newspaper that is printed in the State of Nevada and has a general circulation in the county.] the manner set forth in paragraph (a) of subsection 1 of NRS 338.1385. The construction manager at risk may accept an application from a subcontractor before advertising for applications pursuant to this subsection.
- 4. The criteria to be used by the construction manager at risk when determining whether an applicant is qualified to submit a proposal for the provision of labor, materials or equipment must include, and must be limited to:
- (a) The monetary limit placed on the license of the applicant by the State Contractors' Board pursuant to NRS 624.220;
- (b) The financial ability of the applicant to provide the labor, materials or equipment required on the public work;

- (c) Whether the applicant has the ability to obtain the necessary bonding for the work required by the public body;
- (d) The safety programs established and the safety records accumulated by the applicant;
- (e) Whether the applicant has breached any contracts with a public body or person in this State or any other state during the 5 years immediately preceding the application;
- (f) Whether the applicant has been disciplined or fined by the State Contractors' Board or another state or federal agency for conduct that relates to the ability of the applicant to perform the public work;
- (g) The performance history of the applicant concerning other recent, similar public or private contracts, if any, completed by the applicant in Nevada;
  - (h) The principal personnel of the applicant;
- (i) Whether the applicant has been disqualified from the award of any contract pursuant to NRS 338.017 or 338.13895; and
  - (j) The truthfulness and completeness of the application.
- 5. The public body or its authorized representative shall ensure that each determination made pursuant to subsection 2 is made subject to the provisions of subsection 4.
- 6. The construction manager at risk shall notify each applicant and the public body in writing of a determination made pursuant to subsection 2.
- 7. A determination made pursuant to subsection 2 that an applicant is not qualified may be appealed pursuant to NRS 338.1381 to the public body with whom the construction manager at risk has entered into a contract for the construction of the public work.
  - Sec. 3. NRS 338.16995 is hereby amended to read as follows:
- 338.16995 1. If a public body enters into a contract with a construction manager at risk for the construction of a public work pursuant to NRS 338.1696, the construction manager at risk may enter into a subcontract for the provision of labor, materials and equipment necessary for the construction of the public work only as provided in this section.
- 2. The provisions of this section apply only to a subcontract for which the estimated value is at least 1 percent of the total cost of the public work or \$50,000, whichever is greater.
- 3. After the design and schedule for the construction of the public work is sufficiently detailed and complete to allow a subcontractor to submit a meaningful and responsive proposal, and not later than 21 days before the date by which a proposal for the provision of labor, materials or equipment by a subcontractor must be submitted, the construction manager at risk shall notify in writing each subcontractor who was determined pursuant to NRS 338.16991 to be qualified to submit such a proposal of a request for such proposals [...] and shall provide to each such subcontractor a form prepared by the construction manager at risk and approved by the public body on which any proposal in

response to the request for proposals must be submitted. A copy of the notice required pursuant to this subsection must be provided to the public body.

- 4. The notice required pursuant to subsection 3 must include, without limitation:
- (a) A description of the design for the public work and a statement indicating where a copy of the documents relating to that design may be obtained:
- (b) A description of the type and scope of labor, equipment and materials for which subcontractor proposals are being sought;
- (c) The dates on which it is anticipated that construction of the public work will begin and end;
- (d) If a preproposal meeting regarding the scope of the work to be performed by the subcontractor is to be held, the date, time and place at which the preproposal meeting will be held;
- (e) The date and time by which proposals must be received, and to whom they must be submitted;
- (f) The date, time and place at which proposals will be opened for evaluation;
- (g) A description of the bonding and insurance requirements for subcontractors:
- (h) Any other information reasonably necessary for a subcontractor to submit a responsive proposal; and
  - (i) A statement in substantially the following form:

Notice: For a proposal for a subcontract on the public work to be considered:

- 1. The subcontractor must be licensed pursuant to chapter 624 of NRS:
- 2. The proposal must be *submitted on the form provided by the construction manager at risk and be* timely received;
- 3. If a preproposal meeting regarding the scope of the work to be performed by the subcontractor is held, the subcontractor must attend the preproposal meeting; and
- 4. The subcontractor may not modify the proposal after the date and time the proposal is received.
- 5. A subcontractor may not modify a proposal after the date and time the proposal is received.
  - 6. To be considered responsive, a proposal must:
- (a) Be submitted on the form provided by the construction manager at risk pursuant to subsection 3;
  - (b) Be timely received by the construction manager at risk; and
- [(b)] (c) Substantially and materially conform to the details and requirements included in the proposal instructions and for the finalized bid package for the public work, including, without limitation, details and requirements affecting price and performance.

- 7. The opening of the proposals must be attended by an authorized representative of the public body. The public body may require the architect or engineer responsible for the design of the public work to attend the opening of the proposals. The opening of the proposals is not otherwise open to the public.
- 8. At the time the proposals are opened, the construction manager at risk shall compile and provide to the public body or its authorized representative a list that includes, without limitation, the name and contact information of each subcontractor who submits a timely proposal.
- 9. Not more than 10 working days after opening the proposals and before the construction manager at risk submits a guaranteed maximum price, a fixed price or a fixed price plus reimbursement pursuant to NRS 338.1696, the construction manager at risk shall:
  - (a) Evaluate the proposals and determine which proposals are responsive.
- (b) Select the subcontractor who submits the proposal that the construction manager at risk determines is the best proposal. Subject to the provisions of subparagraphs (1), (2) and (3), if only one subcontractor submits a proposal, the construction manager at risk may select that subcontractor. The subcontractor must be selected from among those:
- (1) Who attended the preproposal meeting regarding the scope of the work to be performed by the subcontractor, if such a preproposal meeting was held:
  - (2) Who submitted a responsive proposal; and
- (3) Whose names are included on the list compiled and provided to the public body or its authorized representative pursuant to subsection 8.
- (c) Inform the public body or its authorized representative which subcontractor has been selected.
- 10. The public body or its authorized representative shall ensure that the evaluation of proposals and selection of subcontractors are done pursuant to the provisions of this section and regulations adopted by the State Public Works Board.
- 11. A subcontractor selected pursuant to subsection 9 need not be selected by the construction manager at risk solely on the basis of lowest price.
- 12. Except as otherwise provided in subsections 13 and 15, the construction manager at risk shall enter into a subcontract with a subcontractor selected pursuant to subsection 9 to provide the labor, materials or equipment described in the request for proposals.
- 13. A construction manager at risk shall not substitute a subcontractor for any subcontractor selected pursuant to subsection 9 unless:
- (a) The public body or its authorized representative objects to the subcontractor, requests in writing a change in the subcontractor and pays any increase in costs resulting from the change; or
- (b) The substitution is approved by the public body after the selected subcontractor:
  - (1) Files for bankruptcy or becomes insolvent;

- (2) After having a reasonable opportunity, fails or refuses to execute a written contract with the construction manager at risk which was offered to the selected subcontractor with the same general terms that all other subcontractors on the project were offered;
  - (3) Fails or refuses to perform the subcontract within a reasonable time;
- (4) Is unable to furnish a performance bond and payment bond pursuant to NRS 339.025, if required for the public work; or
  - (5) Is not properly licensed to provide that labor or portion of the work.
- 14. If a construction manager at risk substitutes a subcontractor for any subcontractor selected pursuant to subsection 9 without complying with the provisions of subsection 13, the construction manager at risk shall forfeit, as a penalty to the public body, an amount equal to 1 percent of the total amount of the contract.
- 15. If a construction manager at risk does not select a subcontractor pursuant to subsection 9 to perform a portion of work on a public work, the construction manager at risk shall notify the public body that the construction manager at risk intends to perform that portion of work. If, after providing such notification, the construction manager at risk substitutes a subcontractor to perform the work, the construction manager at risk shall forfeit, as a penalty to the public body, the lesser of, and excluding any amount of the contract that is attributable to change orders:
  - (a) An amount equal to 2.5 percent of the total amount of the contract; or
- (b) An amount equal to 35 percent of the estimate by the engineer of the cost of the work the construction manager at risk selected himself or herself to perform on the public work.
- 16. The construction manager at risk shall make available to the public the name of each subcontractor who submits a proposal.
- 17. If a public work is being constructed in phases, and a construction manager at risk selects a subcontractor pursuant to subsection 9 for the provision of labor, materials or equipment for any phase of that construction, the construction manager at risk may select that subcontractor for the provision of labor, materials or equipment for any other phase of the construction without following the requirements of subsections 3 to 11, inclusive.
- 18. As used in this section, "general terms" has the meaning ascribed to it in NRS 338.141.
  - Sec. 4. NRS 338.1711 is hereby amended to read as follows:
- 338.1711 1. Except as otherwise provided in this section and NRS 338.161 to 338.16995, inclusive, a public body shall contract with a prime contractor for the construction of a public work for which the estimated cost exceeds \$100,000.
- 2. A public body may contract with a design-build team for the design and construction of a public work that is a discrete project if the public body has approved the use of a design-build team for the design and construction of the public work [...] and the public work has an estimated cost which exceeds \$5,000,000.

- 3. Within any 12-month period, a public body may contract with a design-build team for the design and construction of not more than two discrete public works projects, each of which have an estimated cost of \$5,000,000 or less if the public body has approved the use of a design-build team.
- Sec. 5. Section 15 of chapter 487, Statutes of Nevada 2013, at page 2986, is hereby amended to read as follows:
  - Sec. 15. 1. This section and sections 1, 2, 3, 4, 5, 6, 7.5 to 13, inclusive, 14, 14.3 and 14.5 of this act become effective on July 1, 2013.
  - 2. Section 1 of this act expires by limitation on June 30, [2017.] 2021.
  - 3. Sections 2.3, 2.5, 3.5, 4.5, 5.3, 5.5, 5.7, 6.5, 13.5, 14.1 and 14.7 of this act become effective on July 1, [2017.] 2021.
- Sec. 6. Section 9 of chapter 123, Statutes of Nevada 2015, at page 457, is hereby amended to read as follows:
  - Sec. 9. 1. This act becomes effective upon passage and approval.
  - 2. Sections 6 and 7.5 of this act expire by limitation on June 30, [2017.] 2021.
- Sec. 7. 1. This section and sections 5 and 6 of this act become effective upon passage and approval.
  - 2. Sections 1 to 4, inclusive, of this act become effective on July 1, 2017.
- 3. Sections 1 [, 2 and] to 3, inclusive, of this act expire by limitation on June 30, 2021.

Senator Parks moved the adoption of the amendment.

Remarks by Senator Parks.

Amendment No. 110 to Senate Bill No. 246 declares that it is not the legislative intent to have any government of this State or political subdivisions of this State use the construction-manager-at-risk procurement process to limit competition, discourage competitive bidding, or engage in or allow bid-shopping. It allows entities to contract with a design-build team, within a 12-month period, for up to two discrete public-works projects, each of which have an estimated cost of \$5 million or less. It prohibits, with limited exceptions, an applicant for a construction-manager-at-risk from substituting an employee whose resume is included on the application as a key employee.

Finally, it requires that a certain fee submitted by the construction-manager-at-risk at the time of the interview with the public body must be assigned a weight of at least 5 percent but no more than 20 percent of the scoring for the selection of the most qualified applicant.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 277.

Bill read second time.

The following amendment was proposed by the Committee on Judiciary: Amendment No. 271.

SUMMARY—Revises provisions relating to criminal justice information. (BDR 14-1004)

AN ACT relating to criminal justice information; creating the Subcommittee on Criminal Justice Information Sharing of the Advisory Commission on the Administration of Justice; <u>authorizing the Subcommittee to appoint working groups</u>; revising the <u>duties of the Advisory Commission</u>; revising the <u>membership of the Advisory Commission</u>; revising provisions governing the release of certain information relating to the medical use of marijuana; repealing provisions governing the Advisory Committee on Nevada Criminal Justice Information Sharing; and providing other matters properly relating thereto.

## Legislative Counsel's Digest:

Existing law requires the Director of the Department of Public Safety to establish within the Department the Advisory Committee on Nevada Criminal Justice Information Sharing and prescribes the duties of the Advisory Committee. (NRS 179A.079) Existing law also: (1) establishes the Advisory Commission on the Administration of Justice and various subcommittees of the Advisory Commission; and (2) directs the Advisory Commission and subcommittees, among other duties, to identify and study the elements of this State's system of criminal justice. (NRS 176.0123-176.0125) Section [11] 1.3 of this bill creates the Subcommittee on Criminal Justice Information Sharing of the Advisory Commission and prescribes the duties of the Subcommittee. Section 1.3 also: (1) requires the Chair of the Advisory Commission to appoint all members of the Subcommittee except one member who is appointed by the Director of the Department of Public Safety and who serves in a position that requires the person to use the Central Repository for Nevada Records of Criminal History for purposes other than criminal justice; and (2) requires the Subcommittee to review issues related to records of criminal history and report to the Advisory Commission with recommendations to address such issues. Section 1.7 of this bill: (1) authorizes the Subcommittee to appoint working groups; (2) provides that meetings of a working group are not subject to the Open Meeting Law; and (3) provides that information and materials received or prepared by a working group is not a public record subject to the provisions of chapter 239 of NRS. Section 2.2 of this bill revises the membership of the Advisory Commission to include a representative of the Central Repository for Nevada Records of Criminal History, appointed by the Governor. Section 2.4 of this bill requires the Advisory Commission to: (1) make recommendations regarding the sharing of criminal justice information in this State; and (2) provide those recommendations to the Legislature and the Director of the Department of Public Safety. Section 4 of this bill repeals the Advisory Committee on Nevada Criminal Justice Information Sharing, as the Advisory Committee's duties are essentially replaced by the Subcommittee in [section 1.] sections 1.3 and 1.7.

Existing law prescribes the duties of the Division of Public and Behavioral Health of the Department of Health and Human Services in administering the program for the medical use of marijuana and requires the Division to maintain the confidentiality of certain information relating to the medical use of

marijuana. (Chapter 453A of NRS and NRS 453A.700) Section 3 of this bill provides an exception to the provisions governing confidentiality and instead requires the Division to disclose certain information relating to applicants for a registry identification card, which identifies that a person is exempt from state prosecution or is a designated primary caregiver of such a person, to the Division of Parole and Probation of the Department of Public Safety, if notified by the Division of Parole and Probation that the applicant is on parole or probation.

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

- Section 1. Chapter 176 of NRS is hereby amended by adding thereto [a new section to read as follows:] the provisions set forth as sections 1.3 and 1.7 of this act.
- Sec. 1.3. 1. There is hereby created the Subcommittee on Criminal Justice Information Sharing of the Commission.
  - 2. The Subcommittee consists of:
- (a) Members appointed by the Chair of the Commission; and
- (b) One member appointed by the Director of the Department of Public Safety. This member must serve in a position that requires the person to use the Central Repository for Nevada Records of Criminal History to obtain information relating to records of criminal history for purposes other than criminal justice. Such purposes may include, without limitation, determining the eligibility of persons for employment or licensure.
- <u>3.</u> The Chair of the Commission shall <del>[appoint the members of the Subcommittee and]</del> designate one of the members of the Subcommittee as Chair of the Subcommittee. The Chair of the Subcommittee must be a member of the Commission.
- [3.] 4. The Subcommittee shall meet at the times and places specified by a call of the Chair. A majority of the members of the Subcommittee constitutes a quorum, and a quorum may exercise any power or authority conferred on the Subcommittee.
  - [4.] 5. The Subcommittee shall:
- (a) Review and evaluate criminal justice information systems, including such systems utilized by local law enforcement agencies and state criminal justice agencies;
- (b) Consider potential efficiencies and obstacles of integrating statewide criminal justice information systems;
- (c) Review requests from criminal justice agencies regarding the capabilities of the Nevada Criminal Justice Information System from the submitted in the format prescribed by the Subcommittee;
- (d) Review technical and operational issues related to the Nevada Criminal Justice Information System and the development of new technologies; and
- (e) Evaluate, review and submit a report to the Commission with recommendations concerning such issues.

- [5.] 6. Any Legislators who are members of the Subcommittee are entitled to receive the salary provided for a majority of the members of the Legislature during the first 60 days of the preceding session for each day's attendance at a meeting of the Subcommittee.
- [6.] 7. While engaged in the business of the Subcommittee, to the extent of legislative appropriation, each member of the Subcommittee is entitled to receive the per diem allowance and travel expenses as provided for state officers and employees generally.
- Sec. 1.7. <u>1. The Chair of the Subcommittee on Criminal Justice Information Sharing created by section 1.3 of this act may appoint working groups to:</u>
- (a) Consider specific problems or other matters that are related to and within the scope of the functions of the Subcommittee; and
- (b) Conduct in-depth reviews of the impacts of requests for changes to the capabilities of the Nevada Criminal Justice Information System.
- 2. A working group appointed pursuant to subsection 1 may be composed of:
- (a) Representatives of the Central Repository for Nevada Records of Criminal History;
- (b) Representatives of the Division of Enterprise Information Technology Services of the Department of Administration; and
- (c) Representatives of criminal justice agencies in this State.
- 3. The Chair of the Subcommittee shall designate one of the members of a working group to serve as Chair of the working group.
- 4. The Chair of a working group may recommend to the Subcommittee any changes to the capabilities of the Nevada Criminal Justice Information System and changes relating to the development of new technologies.
- 5. The provisions of chapter 241 of NRS do not apply to any meeting held by a working group to carry out the provisions of this section, including, without limitation, meetings to:
- (a) Discuss operating procedures for using the systems which comprise the Nevada Criminal Justice Information System;
- (b) Discuss details concerning the design of the systems which comprise the Nevada Criminal Justice Information System;
- (c) Discuss deficiencies in security concerning the systems which comprise the Nevada Criminal Justice Information System; and
- (d) Discuss the use or development of new technologies.
- 6. All information and materials received or prepared by a working group are confidential and not a public record for purposes of chapter 239 of NRS.
- 7. The members of a working group serve without compensation.
- Sec. 2. NRS 176.0121 is hereby amended to read as follows:
- 176.0121 As used in NRS 176.0121 to 176.0129, inclusive, *and [section 1] sections 1.3 and 1.7 of this act,* "Commission" means the Advisory Commission on the Administration of Justice.
  - Sec. 2.2. NRS 176.0123 is hereby amended to read as follows:

- 176.0123 1. The Advisory Commission on the Administration of Justice is hereby created. The Commission consists of:
- (a) One member who is a municipal judge or justice of the peace, appointed by the governing body of the Nevada Judges of Limited Jurisdiction;
- (b) One member who is a district judge, appointed by the governing body of the Nevada District Judges Association;
- (c) One member who is a justice of the Supreme Court of Nevada or a retired justice of the Supreme Court of Nevada, appointed by the Chief Justice of the Supreme Court of Nevada;
- (d) One member who is a district attorney, appointed by the governing body of the Nevada District Attorneys Association;
- (e) One member who is an attorney in private practice, experienced in defending criminal actions, appointed by the governing body of the State Bar of Nevada:
- (f) One member who is a public defender, appointed by the governing body of the State Bar of Nevada;
- (g) One member who is a representative of a law enforcement agency, appointed by the Governor;
- (h) One member who is a representative of the Division of Parole and Probation of the Department of Public Safety, appointed by the Governor;
- (i) <u>One member who is a representative of the Central Repository for</u> Nevada Records of Criminal History, appointed by the Governor;
- <u>(j)</u> One member who has been a victim of a crime or is a representative of an organization supporting the rights of victims of crime, appointed by the Governor;
- $\frac{\{(j)\}}{(k)}$  One member who is a representative of an organization that advocates on behalf of inmates, appointed by the Governor;
- [(k)] (1) One member who is a representative of the Nevada Sheriffs' and Chiefs' Association, appointed by the Nevada Sheriffs' and Chiefs' Association;
- $\frac{\{(1)\}}{\{(m)\}}$  One member who is a member of the State Board of Parole Commissioners, appointed by the State Board of Parole Commissioners;
  - $\frac{(m)}{(m)}$  The Director of the Department of Corrections;
- [(n)] (o) Two members who are Senators, one of whom is appointed by the Majority Leader of the Senate and one of whom is appointed by the Minority Leader of the Senate; and
- $\{(o)\}$  (p) Two members who are members of the Assembly, one of whom is appointed by the Speaker of the Assembly and one of whom is appointed by the Minority Leader of the Assembly.
- ☐ If any association listed in this subsection ceases to exist, the appointment required by this subsection must be made by the association's successor in interest or, if there is no successor in interest, by the Governor.
- 2. The Attorney General is an ex officio voting member of the Commission.

- 3. Each appointed member serves a term of 2 years. Members may be reappointed for additional terms of 2 years in the same manner as the original appointments. Any vacancy occurring in the membership of the Commission must be filled in the same manner as the original appointment not later than 30 days after the vacancy occurs.
- 4. The Legislators who are members of the Commission are entitled to receive the salary provided for a majority of the members of the Legislature during the first 60 days of the preceding session for each day's attendance at a meeting of the Commission.
- 5. At the first regular meeting of each odd-numbered year, the members of the Commission shall elect a Chair by majority vote who shall serve until the next Chair is elected.
- 6. The Commission shall meet at least once every 3 months and may meet at such further times as deemed necessary by the Chair.
- 7. A majority of the members of the Commission constitutes a quorum for the transaction of business, and a majority of those members present at any meeting is sufficient for any official action taken by the Commission.
- 8. While engaged in the business of the Commission, to the extent of legislative appropriation, each member of the Commission is entitled to receive the per diem allowance and travel expenses provided for state officers and employees generally.
- 9. To the extent of legislative appropriation, the Director of the Legislative Counsel Bureau shall provide the Commission with such staff as is necessary to carry out the duties of the Commission.
  - Sec. 2.4. NRS 176.0125 is hereby amended to read as follows:

176.0125 The Commission shall:

- 1. Identify and study the elements of this State's system of criminal justice which affect the sentences imposed for felonies and gross misdemeanors.
- 2. Evaluate the effectiveness and fiscal impact of various policies and practices regarding sentencing which are employed in this State and other states, including, but not limited to, the use of plea bargaining, probation, programs of intensive supervision, programs of regimental discipline, imprisonment, sentencing recommendations, mandatory and minimum sentencing, mandatory sentencing for crimes involving the possession, manufacture and distribution of controlled substances, structured or tiered sentencing, enhanced penalties for habitual criminals, parole, credits against sentences, residential confinement and alternatives to incarceration.
- 3. Recommend changes in the structure of sentencing in this State which, to the extent practicable and with consideration for their fiscal impact, incorporate general objectives and goals for sentencing, including, but not limited to, the following:
- (a) Offenders must receive sentences that increase in direct proportion to the severity of their crimes and their histories of criminality.
- (b) Offenders who have extensive histories of criminality or who have exhibited a propensity to commit crimes of a predatory or violent nature must

receive sentences which reflect the need to ensure the safety and protection of the public and which allow for the imprisonment for life of such offenders.

- (c) Offenders who have committed offenses that do not include acts of violence and who have limited histories of criminality must receive sentences which reflect the need to conserve scarce economic resources through the use of various alternatives to traditional forms of incarceration.
- (d) Offenders with similar histories of criminality who are convicted of similar crimes must receive sentences that are generally similar.
- (e) Offenders sentenced to imprisonment must receive sentences which do not confuse or mislead the public as to the actual time those offenders must serve while incarcerated or before being released from confinement or supervision.
- (f) Offenders must not receive disparate sentences based upon factors such as race, gender or economic status.
- (g) Offenders must receive sentences which are based upon the specific circumstances and facts of their offenses, including the nature of the offense and any aggravating factors, the savagery of the offense, as evidenced by the extent of any injury to the victim, and the degree of criminal sophistication demonstrated by the offender's acts before, during and after commission of the offense.
- 4. Evaluate the effectiveness and efficiency of the Department of Corrections and the State Board of Parole Commissioners with consideration as to whether it is feasible and advisable to establish an oversight or advisory board to perform various functions and make recommendations concerning:
  - (a) Policies relating to parole;
- (b) Regulatory procedures and policies of the State Board of Parole Commissioners;
- (c) Policies for the operation of the Department of Corrections;
- (d) Budgetary issues; and
- (e) Other related matters.
- 5. Evaluate the effectiveness of specialty court programs in this State with consideration as to whether such programs have the effect of limiting or precluding reentry of offenders and parolees into the community.
- 6. Evaluate the policies and practices concerning presentence investigations and reports made by the Division of Parole and Probation of the Department of Public Safety, including, without limitation, the resources relied on in preparing such investigations and reports and the extent to which judges in this State rely on and follow the recommendations contained in such presentence investigations and reports.
- 7. Evaluate, review and comment upon issues relating to juvenile justice in this State, including, but not limited to:
- (a) The need for the establishment and implementation of evidence-based programs and a continuum of sanctions for children who are subject to the jurisdiction of the juvenile court; and

- (b) The impact on the criminal justice system of the policies and programs of the juvenile justice system.
- 8. Compile and develop statistical information concerning sentencing in this State.
- 9. Identify and study issues relating to the application of chapter 241 of NRS to meetings held by the:
- (a) State Board of Pardons Commissioners to consider an application for clemency; and
  - (b) State Board of Parole Commissioners to consider an offender for parole.
- 10. Identify and study issues relating to the operation of the Department of Corrections, including, without limitation, the system for allowing credits against the sentences of offenders, the accounting of such credits and any other policies and procedures of the Department which pertain to the operation of the Department.
- 11. Evaluate the policies and practices relating to the involuntary civil commitment of sexually dangerous persons.
- 12. Identify and study the impacts and effects of collateral consequences of convictions in this State. Such identification and study:
- (a) Must cause to be identified any provision in the Nevada Constitution, the Nevada Revised Statutes and the Nevada Administrative Code which imposes a collateral sanction or authorizes the imposition of a disqualification, and any provision of law that may afford relief from a collateral consequence;
- (b) May rely on the study of this State's collateral sanctions, disqualifications and relief provisions prepared by the National Institute of Justice described in section 510 of the Court Security Improvement Act of 2007, Public Law 110-177; and
- (c) Must include the posting of a hyperlink on the Commission's website to any study of this State's collateral sanctions, disqualifications and relief provisions prepared by the National Institute of Justice described in section 510 of the Court Security Improvement Act of 2007, Public Law 110-177.
- 13. <u>Recommend standards, policies and procedures for integrated criminal justice information sharing between criminal justice agencies in this State and the Central Repository for Nevada Records of Criminal History.</u>
- 14. Provide a copy of any recommendations described in subsection 13 to the Director of the Department of Public Safety.
- <u>15.</u> For each regular session of the Legislature, prepare a comprehensive report including the Commission's recommended changes pertaining to the administration of justice in this State, the Commission's findings and any recommendations of the Commission for proposed legislation. The report must be submitted to the Director of the Legislative Counsel Bureau for distribution to the Legislature not later than September 1 of each even-numbered year.
  - Sec. 2.7. NRS 239.010 is hereby amended to read as follows:
- $239.010 \quad 1. \quad Except \quad as \quad otherwise \quad provided \quad in \quad this \quad section \quad and \\ NRS \ 1.4683, \ 1.4687, \ 1A.110, \ 41.071, \ 49.095, \ 62D.420, \ 62D.440, \ 62E.516, \\$

62E.620, 62H.025, 62H.030, 62H.170, 62H.220, 62H.320, 75A.100, 75A.150, 76.160, 78.152, 80.113, 81.850, 82.183, 86.246, 86.54615, 87.515, 87.5413, 87A.200, 87A.580, 87A.640, 88.3355, 88.5927, 88.6067, 88A.345, 88A.7345, 89.045, 89.251, 90.730, 91.160, 116.757, 116A.270, 116B.880, 118B.026, 119.260, 119.265, 119.267, 119.280, 119A.280, 119A.653, 119B.370, 119B.382, 120A.690, 125.130, 125B.140, 126.141, 126.161, 126.163, 126.730, 127.007, 127.057, 127.130, 127.140, 127.2817, 130.312, 130.712, 136.050, 159.044, 172.075, 172.245, 176.015, 176.0625, 176.09129, 176.156, 176A.630, 178.39801, 178.4715, 178.5691, 179.495, 179A.070, 179A.165, 179A.450, 179D.160, 200.3771, 200.3772, 200.5095, 200.604, 202.3662, 205.4651, 209.392, 209.3925, 209.419, 209.521, 211A.140, 213.010, 213.040, 213.095, 213.131, 217.105, 217.110, 217.464, 217.475, 218A.350, 218E.625, 218F.150, 218G.130, 218G.240, 218G.350, 228.270, 228.450, 228.495, 228.570, 231.069, 231.1473, 233.190, 237.300, 239.0105, 239.0113, 239B.030, 239B.040, 239B.050, 239C.140, 239C.210, 239C.230, 239C.250, 239C.270, 240.007, 241.020, 241.030, 241.039, 242.105, 244.264, 244.335, 250.087, 250.130, 250.140, 250.150, 268.095, 268.490, 268.910, 271A.105, 281.195, 281A.350, 281A.440, 281A.550, 284.4068, 286.110, 287.0438, 289.025, 289.080, 289.387, 289.830, 293.5002, 293.503, 293.558, 293B.135, 293D.510, 331.110, 332.061, 332.351, 333.333, 333.335, 338.070, 338.1379, 338.16925, 338.1725, 338.1727, 348.420, 349.597, 349.775, 353.205, 353A.049, 353A.085, 353A.100, 353C.240, 360.240, 360.247, 360.255, 360.755, 361.044, 361.610, 365.138, 366.160, 368A.180, 372A.080, 378.290, 378.300, 379.008, 385A.830, 385B.100, 387.626, 387.631, 388.1455, 388.259, 388.501, 388.503, 388.513, 388.750, 391.035, 392.029, 392.147, 392.264, 392.271, 392.850, 394.167, 394.1698, 394.447, 394.460, 394.465, 396.3295, 396.405, 396.525, 396.535, 398.403, 408.3885, 408.3886, 408.3888, 408.5484, 412.153, 416.070, 422.2749, 422.305, 422A.342, 422A.350, 425.400, 427A.1236, 427A.872, 432.205, 432B.175, 432B.280, 432B.290, 432B.407, 432B.430, 432B.560, 433.534, 433A.360, 439.840, 439B.420, 440.170, 441A.195, 441A.220, 441A.230, 442.330, 442.395, 445A.665, 445B.570, 449.209, 449.245, 449.720, 450.140, 453.164, 453.720, 453A.610, 453A.700, 458.055, 458.280, 459.050, 459.3866, 459.555, 459.7056, 459.846, 463.120, 463.15993, 463.240, 463.3403, 463.3407, 463.790, 467.1005, 480.365, 481.063, 482.170, 482.5536, 483.340, 483.363, 483.575, 483.659, 483.800, 484E.070, 485.316, 503.452, 522.040, 534A.031, 561.285, 571.160, 584.655, 587.877, 598.0964, 598.098, 598A.110, 599B.090, 603.070, 603A.210, 604A.710, 612.265, 616B.012, 616B.015, 616B.315, 616B.350, 618.341, 618.425, 622.310, 623.131, 623A.137, 624.110, 624.265, 624.327, 625.425, 625A.185, 628.418, 628B.230, 628B.760, 629.047, 629.069, 630.133, 630.30665, 630.336, 630A.555, 631.368, 632.121, 632.125, 632.405, 633.283, 633.301, 633.524, 634.055, 634.214, 634A.185, 635.158, 636.107, 637.085, 637B.288, 638.087, 638.089, 639.2485, 639.570, 640.075, 640A.220, 640B.730, 640C.400, 640C.745, 640C.760, 640D.190, 640E.340, 641.090, 641A.191, 641B.170, 641C.760,

642.524, 643.189, 644.446, 645.180, 645.625, 645A.050, 645A.082, 645B.060, 645B.092, 645C.220, 645C.225, 645D.130, 645D.135, 645E.300, 645E.375, 645G.510, 645H.320, 645H.330, 647.0945, 647.0947, 648.033, 648.197, 649.065, 649.067, 652.228, 654.110, 656.105, 661.115, 665.130, 665.133, 669.275, 669.285, 669A.310, 671.170, 673.430, 675.380, 676A.340, 676A.370, 677.243, 679B.122, 679B.152, 679B.159, 679B.190, 679B.285, 679B.690, 680A.270, 681A.440, 681B.260, 681B.410, 681B.540, 683A.0873, 685A.077, 686A.289, 686B.170, 686C.306, 687A.110, 687A.115, 687C.010, 688C.230, 688C.480, 688C.490, 692A.117, 692C.190, 692C.3536, 692C.3538, 692C.354, 692C.420, 693A.480, 693A.615, 696B.550, 703.196, 704B.320, 704B.325, 706.1725, 706A.230, 710.159, 711.600, and section 1.7 of this act, sections 35, 38 and 41 of chapter 478, Statutes of Nevada 2011 and section 2 of chapter 391, Statutes of Nevada 2013 and unless otherwise declared by law to be confidential, all public books and public records of a governmental entity must be open at all times during office hours to inspection by any person, and may be fully copied or an abstract or memorandum may be prepared from those public books and public records. Any such copies, abstracts or memoranda may be used to supply the general public with copies, abstracts or memoranda of the records or may be used in any other way to the advantage of the governmental entity or of the general public. This section does not supersede or in any manner affect the federal laws governing copyrights or enlarge, diminish or affect in any other manner the rights of a person in any written book or record which is copyrighted pursuant to federal law.

- 2. A governmental entity may not reject a book or record which is copyrighted solely because it is copyrighted.
- 3. A governmental entity that has legal custody or control of a public book or record shall not deny a request made pursuant to subsection 1 to inspect or copy or receive a copy of a public book or record on the basis that the requested public book or record contains information that is confidential if the governmental entity can redact, delete, conceal or separate the confidential information from the information included in the public book or record that is not otherwise confidential.
- 4. A person may request a copy of a public record in any medium in which the public record is readily available. An officer, employee or agent of a governmental entity who has legal custody or control of a public record:
- (a) Shall not refuse to provide a copy of that public record in a readily available medium because the officer, employee or agent has already prepared or would prefer to provide the copy in a different medium.
- (b) Except as otherwise provided in NRS 239.030, shall, upon request, prepare the copy of the public record and shall not require the person who has requested the copy to prepare the copy himself or herself.
  - Sec. 3. NRS 453A.700 is hereby amended to read as follows:

- 453A.700 1. Except as otherwise provided in this section, NRS 239.0115 and subsection 4 of NRS 453A.210, the Division shall not disclose:
- (a) The contents of any tool used by the Division to evaluate an applicant or its affiliate.
- (b) Any information, documents or communications provided to the Division by an applicant or its affiliate pursuant to the provisions of this chapter, without the prior written consent of the applicant or affiliate or pursuant to a lawful court order after timely notice of the proceedings has been given to the applicant or affiliate.
  - (c) The name or any other identifying information of:
    - (1) An attending physician; or
- (2) A person who has applied for or to whom the Division or its designee has issued a registry identification card or letter of approval.
- → Except as otherwise provided in NRS 239.0115, the items of information described in this subsection are confidential, not subject to subpoena or discovery and not subject to inspection by the general public.
- 2. Notwithstanding the provisions of subsection 1, the Division or its designee <del>[may]</del>:
- (a) Shall release the name and other identifying information of a person who has applied for a registry identification card to authorized employees of the Division of Parole and Probation of the Department of Public Safety, if notified by the Division of Parole and Probation that the applicant is on parole or probation.
- (b) May release the name and other identifying information of a person to whom the Division or its designee has issued a registry identification card or letter of approval to:
- $\frac{\{(a)\}}{\{(1)\}}$  Authorized employees of the Division or its designee as necessary to perform official duties of the Division; and
- <del>[(b)]</del> (2) Authorized employees of state and local law enforcement agencies, only as necessary to verify that a person is the lawful holder of a registry identification card or letter of approval issued to him or her pursuant to NRS 453A.220 or 453A.250.
  - Sec. 4. NRS 179A.079 is hereby repealed.

### TEXT OF REPEALED SECTION

- 179A.079 Advisory Committee on Nevada Criminal Justice Information Sharing: Creation; members; duties; terms of office; meetings.
- 1. The Director of the Department shall establish within the Department the Advisory Committee on Nevada Criminal Justice Information Sharing.
  - 2. The Advisory Committee consists of:
  - (a) The Director of the Department or the Director's designee;
  - (b) The Attorney General or the Attorney General's designee;
- (c) The Director of the Department of Corrections or the Director's designee;

- (d) One member who is a representative of the Judicial Branch of State Government, appointed by the Chief Justice of the Supreme Court;
- (e) One member appointed by the Nevada Sheriffs' and Chiefs' Association, or a successor organization;
- (f) One member appointed by the Nevada District Attorneys Association, or a successor organization;
- (g) One member appointed by the Director of the Department who uses the Central Repository to obtain information relating to records of criminal history for purposes other than criminal justice, which may include, without limitation, for purposes of determining eligibility of persons for employment or licensure;
- (h) One member of the Senate appointed by the Majority Leader of the Senate; and
- (i) One member of the Assembly appointed by the Speaker of the Assembly.
  - 3. The Advisory Committee shall:
- (a) Recommend policies and procedures that apply the best management practices to the activities at the Central Repository;
  - (b) Advise on technological support for the Central Repository; and
- (c) Advise on the integrated information sharing of statistical data relating to crime or the delinquency of children.
- 4. Each member that is appointed to the Advisory Committee pursuant to subsection 2, other than a member of the Senate or the Assembly, shall serve a term of 3 years. A member of the Senate and the Assembly appointed to the Advisory Committee shall serve until a replacement is appointed. Any vacancy occurring in the membership of the Advisory Committee must be filled in the same manner as the original appointment.
  - 5. The Advisory Committee shall meet twice annually.
- 6. The Director may assign such other employees of the Department as the Director deems necessary to assist the Advisory Committee in its duties.
- 7. Members of the Advisory Committee serve without compensation. If sufficient money is available, members are entitled to travel allowances provided for state officers and employees generally while attending meetings of the Advisory Committee.

Senator Segerblom moved the adoption of the amendment.

Remarks by Senator Segerblom.

Amendment No. 271 to Senate Bill No. 277 authorizes the Subcommittee on Criminal Justice Information Sharing to appoint working groups that are not subject to the Open Meeting Law for reasons of confidentiality and revises the membership of the Advisory Commission on the Administration of Justice to include a representative Central Repository for Nevada Records of Criminal History.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 397.

Bill read second time.

The following amendment was proposed by the Committee on Government Affairs:

Amendment No. 314.

SUMMARY—Revises provisions relating to employment. (BDR 18-14)

AN ACT relating to employment; requiring penalties and fines imposed by the Nevada Equal Rights Commission for certain unlawful discriminatory practices to be deposited in the State General Fund; making it an unlawful employment practice for an employer, employment agency or labor organization to discriminate against a person for inquiring about, discussing or disclosing information about wages in certain circumstances; revising provisions relating to unlawful employment practices; revising provisions governing the filing of complaints of employment discrimination with the Nevada Equal Rights Commission; revising the relief that the Commission may order if it determines that an unlawful employment practice has occurred; revising provisions relating to the time in which an employee may seek relief in district court for a claim of unlawful employment practices; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law prohibits an employer, employment agency, labor organization or joint labor-management committee from discriminating against any person with respect to employment or membership, as applicable, on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, disability or national origin. (NRS 613.330) Existing law also requires the Nevada Equal Rights Commission to accept certain complaints alleging unlawful discriminatory practices and, if the Commission determines that an unlawful practice has occurred, order: (1) the person engaging in the practice to cease and desist; and (2) for a case involving an unlawful employment practice, the restoration of all benefits and rights to which the aggrieved person is entitled. (NRS 233.157, 233.160, 233.170)

Section [11] 1.5 of this bill revises provisions governing the filing of complaints alleging a practice of unlawful discrimination in compensation to require that the complaint be filed within 300 days after any date on which: (1) a decision or practice resulting in discriminatory compensation is adopted; (2) a person becomes subject to such a decision or practice; or (3) a person is affected by an application of such a decision or practice. Section [11] 1.5 also requires the Commission to notify each party to a complaint of the period of time that a person may apply to a district court for relief. Section 2 of this bill revises the powers of the Commission to order remedies for unlawful employment practices. Section [#] 1.5 authorizes the Commission to: (1) award back pay for a period beginning 2 years before the date of the filing of a complaint regarding an unlawful employment practice and ending on the date the Commission issues an order regarding the complaint; (2) award costs and reasonable attorney's fees in cases involving an unlawful employment practice; (3) order payment of compensatory damages or, if the employer acted with malice or reckless indifference, punitive damages in cases involving an

unlawful employment practice relating to discrimination on the basis of sex; and (4) order a civil penalty, in increasing amounts, for an unlawful employment practice that it determines is willful based on the number of such practices the person has committed in the previous 5 years. Section 1 of this bill requires that any penalty or fine imposed by the Commission for certain unlawful discriminatory practices be deposited in the State General Fund and authorizes the Commission to present a claim for recommendation to the Interim Finance Committee if money is required to pay certain costs.

Section 12 of this bill requires the Commission, if it does not conclude that an unfair employment practice has occurred, to issue a letter to the person who filed the complaint concerning an unfair employment practice. This letter must notify the person of his or her right to apply to the district court for an order relating to the alleged unfair employment practice. Section 13 of this bill provides that a person may apply to a district court for relief pursuant to section 12 up to 180 days after the date of issuance of the letter described in section 12, in addition to the existing authority to apply to a district court for relief up to 180 days after the date of the alleged act.

This bill also enacts several provisions contained in the federal Paycheck Fairness Act, which was most recently introduced in the United States Senate on March 25, 2015, but has not been enacted to date. (S. 862 (114th)) Specifically, section 3 of this bill prohibits an employer, employment agency or labor organization from discriminating against any person with respect to employment or membership, as applicable, for inquiring about, discussing or disclosing information about wages unless the person has access to information about the wages of other persons as part of his or her essential job functions and discloses the information to a person who does not have access to that information. Section 7 of this bill provides that it is an unlawful employment practice to use a qualification which is based upon or derived from a difference on the basis of sex or a qualification that an employer, employment agency, labor organization or joint labor-management committee has refused to change after being presented by an affected person with an alternative practice that would serve the same purpose in a manner that is less discriminatory on the basis of sex.

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

Section 1. Chapter 233 of NRS is hereby amended by adding thereto a new section to read as follows:

- 1. All penalties and fines imposed by the Commission pursuant to NRS 233.170 and 233.210 must be deposited with the State Treasurer for credit to the State General Fund.
- 2. If the money collected from the imposition of any penalty and fine is deposited in the State General Fund pursuant to subsection 1, the Commission may present a claim to the State Board of Examiners for recommendation to the Interim Finance Committee if the money is required to pay attorney's fees or the costs of an investigation, or both.

- [Section 1.] Sec. 1.5. NRS 233.160 is hereby amended to read as follows:
- 233.160 1. A complaint which alleges unlawful discriminatory practices in:
- (a) Housing must be filed with the Commission not later than 1 year after the date of the occurrence of the alleged practice or the date on which the practice terminated.
- (b) Employment or public accommodations must be filed with the Commission not later than 300 days after the date of the occurrence of the alleged practice.
- → A complaint is timely if it is filed with an appropriate federal agency within that period. A complainant shall not file a complaint with the Commission if any other state or federal administrative body or officer which has comparable jurisdiction to adjudicate complaints of discriminatory practices has made a decision upon a complaint based upon the same facts and legal theory.
- 2. The complainant shall specify in the complaint the alleged unlawful practice and sign it under oath.
- 3. The Commission shall send to the party against whom an unlawful discriminatory practice is alleged:
  - (a) A copy of the complaint;
  - (b) An explanation of the rights which are available to that party; and
  - (c) A copy of the Commission's procedures.
- 4. The Commission shall notify each party to the complaint of the limitation on the period of time that a person may apply to the district court for relief pursuant to NRS 613.430.
- 5. For the purposes of paragraph (b) of subsection 1, an unlawful discriminatory practice in employment which relates to compensation occurs on each date on which:
- (a) A decision or other practice resulting in discriminatory compensation is adopted;
- (b) A person becomes subject to a decision or other practice resulting in discriminatory compensation; or
- (c) A person is affected by an application of a decision or other practice resulting in discriminatory compensation, including, without limitation, each payment of wages, benefits or other compensation that is affected by the decision or practice.
  - Sec. 2. NRS 233.170 is hereby amended to read as follows:
- 233.170 1. When a complaint is filed whose allegations if true would support a finding of unlawful practice, the Commission shall determine whether to hold an informal meeting to attempt a settlement of the dispute in accordance with the regulations adopted pursuant to NRS 233.157. If the Commission determines to hold an informal meeting, the Administrator may, to prepare for the meeting, request from each party any information which is reasonably relevant to the complaint. No further action may be taken if the parties agree to a settlement.

- 2. If an agreement is not reached at the informal meeting, the Administrator shall determine whether to conduct an investigation into the alleged unlawful practice in accordance with the regulations adopted pursuant to NRS 233.157. After the investigation, if the Administrator determines that an unlawful practice has occurred, the Administrator shall attempt to mediate between or reconcile the parties. The party against whom a complaint was filed may agree to cease the unlawful practice. If an agreement is reached, no further action may be taken by the complainant or by the Commission.
- 3. If the attempts at mediation or conciliation fail, the Commission may hold a public hearing on the matter. After the hearing, if the Commission determines that an unlawful practice has occurred, it may:
- (a) Serve a copy of its findings of fact within 10 calendar days upon any person found to have engaged in the unlawful practice; and
  - (b) Order the person to:
    - (1) Cease and desist from the unlawful practice.
- (2) In cases involving an unlawful employment practice, restore all benefits and rights to which the aggrieved person is entitled, including, but not limited to, rehiring, back pay for a period [not to exceed 2 years after the date of the most recent unlawful practice,] described in subsection 4, annual leave time, sick leave time or pay, other fringe benefits and seniority, with interest thereon from the date of the Commission's decision at a rate equal to the prime rate at the largest bank in Nevada, as ascertained by the Commissioner of Financial Institutions, on January 1 or July 1, as the case may be, immediately preceding the date of the Commission's decision, plus 2 percent. The rate of interest must be adjusted accordingly on each January 1 and July 1 thereafter until the judgment is satisfied.
- (3) In cases involving an unlawful employment practice, pay the costs and reasonable attorney's fees incurred by the aggrieved person to pursue the claim.
- (4) In cases involving an unlawful employment practice relating to discrimination on the basis of sex, pay an amount determined to be appropriate by the Commission as compensatory damages or, if the Commission determines that the employer acted with malice or reckless indifference, punitive damages.
- (5) In cases involving an unlawful employment practice that the Commission determines was willful, pay a civil penalty of:
- (I) For the first unlawful employment practice that the person has engaged in during the immediately preceding 5 years which the Commission determines was willful, not more than \$10,000.
- (II) For the second unlawful employment practice that the person has engaged in during the immediately preceding 5 years which the Commission determines was willful, not more than \$15,000.
- (III) For the third and any subsequent unlawful employment practice that the person has engaged in during the immediately preceding 5 years which the Commission determines was willful, not more than \$25,000.

- 4. For the purposes of subparagraph (2) of paragraph (b) of subsection 3, the period for back pay must not exceed a period beginning 2 years before the date on which the complaint was filed and ending on the date the Commission issues an order pursuant to paragraph (b) of subsection 3 addressing all unlawful practices which occur during that period and which are similar or related to an unlawful practice in the complaint.
- 5. The order of the Commission is a final decision in a contested case for the purpose of judicial review. If the person fails to comply with the Commission's order, the Commission shall apply to the district court for an order compelling such compliance, but failure or delay on the part of the Commission does not prejudice the right of an aggrieved party to judicial review. The court shall issue the order unless it finds that the Commission's findings or order are not supported by substantial evidence or are otherwise arbitrary or capricious. If the court upholds the Commission's order and finds that the person has violated the order by failing to cease and desist from the unlawful practice or to make the payment ordered, the court shall award the aggrieved party actual damages for any economic loss and no more.
- [5.] 6. After the Commission has held a public hearing and rendered a decision, the complainant is barred from proceeding on the same facts and legal theory before any other administrative body or officer.
- Sec. 3. Chapter 613 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. Except as otherwise provided in subsection 2, it is an unlawful employment practice for an employer to discriminate against any of his or her employees or applicants for employment, for an employment agency to discriminate against any person, or for a labor organization to discriminate against any member thereof or an applicant for membership, because the employee, applicant, person or member, as applicable, has inquired about, discussed or disclosed his or her wages or the wages of another employee, applicant, person or member.
- 2. The provisions of subsection 1 do not apply to an employee, applicant, person or member who has access to information about the wages of other employees, applicants, persons or members as part of his or her essential job functions and discloses that information to a person who does not have access to that information unless the disclosure is in response to a charge, complaint or investigation for a violation of NRS 613.330.
  - Sec. 4. NRS 613.310 is hereby amended to read as follows:
- 613.310 As used in NRS 613.310 to 613.435, inclusive, and section 3 of this act, unless the context otherwise requires:
  - 1. "Disability" means, with respect to a person:
- (a) A physical or mental impairment that substantially limits one or more of the major life activities of the person, including, without limitation, the human immunodeficiency virus;
  - (b) A record of such an impairment; or
  - (c) Being regarded as having such an impairment.

- 2. "Employer" means any person who has 15 or more employees for each working day in each of 20 or more calendar weeks in the current or preceding calendar year, but does not include:
- (a) The United States or any corporation wholly owned by the United States.
  - (b) Any Indian tribe.
- (c) Any private membership club exempt from taxation pursuant to  $26 \text{ U.S.C.} \S 501(c)$ .
- 3. "Employment agency" means any person regularly undertaking with or without compensation to procure employees for an employer or to procure for employees opportunities to work for an employer, but does not include any agency of the United States.
- 4. "Gender identity or expression" means a gender-related identity, appearance, expression or behavior of a person, regardless of the person's assigned sex at birth.
- 5. "Labor organization" means any organization of any kind, or any agency or employee representation committee or plan, in which employees participate and which exists for the purpose, in whole or in part, of dealing with employers concerning grievances, labor disputes, wages, rates of pay, hours of employment or other conditions of employment.
- 6. "Person" includes the State of Nevada and any of its political subdivisions.
- 7. "Sexual orientation" means having or being perceived as having an orientation for heterosexuality, homosexuality or bisexuality.
  - Sec. 5. NRS 613.320 is hereby amended to read as follows:
- 613.320 1. The provisions of NRS 613.310 to 613.435, inclusive, *and section 3 of this act* do not apply to:
  - (a) Any employer with respect to employment outside this state.
- (b) Any religious corporation, association or society with respect to the employment of individuals of a particular religion to perform work connected with the carrying on of its religious activities.
- 2. The provisions of NRS 613.310 to 613.435, inclusive, and section 3 of this act concerning unlawful employment practices related to sexual orientation and gender identity or expression do not apply to an organization that is exempt from taxation pursuant to 26 U.S.C. § 501(c)(3).
  - Sec. 6. NRS 613.340 is hereby amended to read as follows:
- 613.340 1. It is an unlawful employment practice for an employer to discriminate against any of his or her employees or applicants for employment, for an employment agency to discriminate against any person, or for a labor organization to discriminate against any member thereof or applicant for membership, because the employee, applicant, person or member, as applicable, has opposed any practice made an unlawful employment practice by NRS 613.310 to 613.435, inclusive, *and section 3 of this act*, or because he or she has made a charge, testified, assisted or participated in any manner in

an investigation, proceeding or hearing under NRS 613.310 to 613.435, inclusive [...], and section 3 of this act.

- 2. It is an unlawful employment practice for an employer, labor organization or employment agency to print or publish or cause to be printed or published any notice or advertisement relating to employment by such an employer or membership in or any classification or referral for employment by such a labor organization, or relating to any classification or referral for employment by such an employment agency, indicating any preference, limitation, specification or discrimination, based on race, color, religion, sex, sexual orientation, gender identity or expression, age, disability or national origin, except that such a notice or advertisement may indicate a preference, limitation, specification or discrimination based on religion, sex, sexual orientation, gender identity or expression, age, physical, mental or visual condition or national origin when religion, sex, sexual orientation, gender identity or expression, age, physical, mental or visual condition or national origin is a bona fide occupational qualification for employment.
  - Sec. 7. NRS 613.350 is hereby amended to read as follows:
- 613.350 1. It is not an unlawful employment practice for an employer to hire and employ employees, for an employment agency to classify or refer for employment any person, for a labor organization to classify its membership or to classify or refer for employment any person, or for an employer, labor organization or joint labor-management committee controlling apprenticeship or other training or retraining programs to admit or employ any person in any such program, on the basis of his or her religion, sex, sexual orientation, gender identity or expression, age, disability or national origin in those instances where religion, sex, sexual orientation, gender identity or expression, age, physical, mental or visual condition or national origin is a bona fide occupational qualification reasonably necessary to the normal operation of that particular business or enterprise.
- 2. It is not an unlawful employment practice for an employer to fail or refuse to hire and employ employees, for an employment agency to fail to classify or refer any person for employment, for a labor organization to fail to classify its membership or to fail to classify or refer any person for employment, or for an employer, labor organization or joint labor-management committee controlling apprenticeship or other training or retraining programs to fail to admit or employ any person in any such program, on the basis of a disability in those instances where physical, mental or visual condition is a bona fide and relevant occupational qualification necessary to the normal operation of that particular business or enterprise, if it is shown that the particular disability would prevent proper performance of the work for which the person with a disability would otherwise have been hired, classified, referred or prepared under a training or retraining program.
- 3. It is not an unlawful employment practice for an employer to fail or refuse to hire or to discharge a person, for an employment agency to fail to classify or refer any person for employment, for a labor organization to fail to

classify its membership or to fail to classify or refer any person for employment, or for an employer, labor organization or joint labor-management committee controlling apprenticeship or other training or retraining programs to fail to admit or employ any person in any such program, on the basis of his or her age if the person is less than 40 years of age.

- 4. It is not an unlawful employment practice for a school, college, university or other educational institution or institution of learning to hire and employ employees of a particular religion if the school or institution is, in whole or in substantial part, owned, supported, controlled or managed by a particular religion or by a particular religious corporation, association or society, or if the curriculum of the school or institution is directed toward the propagation of a particular religion.
- 5. It is not an unlawful employment practice for an employer to observe the terms of any bona fide plan for employees' benefits, such as a retirement, pension or insurance plan, which is not a subterfuge to evade the provisions of NRS 613.310 to 613.435, inclusive, *and section 3 of this act* as they relate to discrimination against a person because of age, except that no such plan excuses the failure to hire any person who is at least 40 years of age.
- 6. It is not an unlawful employment practice for an employer to require employees to adhere to reasonable workplace appearance, grooming and dress standards so long as such requirements are not precluded by law, except that an employer shall allow an employee to appear, groom and dress consistent with the employee's gender identity or expression.
- 7. For the purpose of subsection 1, the term "bona fide occupational qualification reasonably necessary to the normal operation of that particular business or enterprise" does not include:
- (a) A qualification which is based upon or derived from a difference on the basis of sex; or
- (b) A qualification which the employer, employment agency, labor organization or joint labor-management committee has refused to change after an affected person has presented an alternative practice that would serve the same purpose without producing the same amount of differential treatment on the basis of sex.
  - Sec. 8. NRS 613.380 is hereby amended to read as follows:
- 613.380 Notwithstanding any other provision of NRS 613.310 to 613.435, inclusive, and section 3 of this act, it is not an unlawful employment practice for an employer to apply different standards of compensation, or different terms, conditions or privileges of employment pursuant to a bona fide seniority or merit system, or a system which measures earnings by quantity or quality of production or to employees who work in different locations, if those differences are not the result of an intention to discriminate because of race, color, religion, sex, sexual orientation, gender identity or expression, age, disability or national origin, nor is it an unlawful employment practice for an employer to give and to act upon the results of any professionally developed ability test, if the test, its administration or action upon the results is not

designed, intended or used to discriminate because of race, color, religion, sex, sexual orientation, gender identity or expression, age, disability or national origin.

- Sec. 9. NRS 613.390 is hereby amended to read as follows:
- 613.390 Nothing contained in NRS 613.310 to 613.435, inclusive, *and section 3 of this act* applies to any business or enterprise on or near an Indian reservation with respect to any publicly announced employment practice of such business or enterprise under which a preferential treatment is given to any individual because the individual is an Indian living on or near a reservation.
  - Sec. 10. NRS 613.400 is hereby amended to read as follows:
- 613.400 Nothing contained in NRS 613.310 to 613.435, inclusive, and section 3 of this act requires any employer, employment agency, labor organization or joint labor-management committee subject to NRS 613.310 to 613.435, inclusive, and section 3 of this act to grant preferential treatment to any person or to any group because of the race, color, religion, sex, sexual orientation, gender identity or expression, age, disability or national origin of the individual or group on account of an imbalance which exists with respect to the total number or percentage of persons of any race, color, religion, sex, sexual orientation, gender identity or expression, age, disability or national origin employed by any employer, referred or classified for employment by any employment agency or labor organization, admitted to membership or classified by any labor organization, or admitted to, or employed in, any apprenticeship or other training program, in comparison with the total number or percentage of persons of that race, color, religion, sex, sexual orientation, gender identity or expression, age, disability or national origin in any community, section or other area, or in the available workforce in any community, section or other area.
  - Sec. 11. NRS 613.405 is hereby amended to read as follows:
- 613.405 Any person injured by an unlawful employment practice within the scope of NRS 613.310 to 613.435, inclusive, *and section 3 of this act* may file a complaint to that effect with the Nevada Equal Rights Commission if the complaint is based on discrimination because of race, color, sex, sexual orientation, gender identity or expression, age, disability, religion or national origin.
  - Sec. 12. NRS 613.420 is hereby amended to read as follows:
- 613.420 If the Nevada Equal Rights Commission does not conclude that an unfair employment practice within the scope of NRS 613.310 to 613.435, inclusive, *and section 3 of this act* has occurred  $\frac{1}{2}$ , any  $\frac{1}{2}$ :
- 1. Any person alleging such a practice may apply to the district court for an order granting or restoring to that person the rights to which the person is entitled under those sections  $\{\cdot,\cdot\}$  ; and
- 2. The Commission shall issue a letter to the person who filed the complaint pursuant to NRS 613.405 notifying the person of his or her rights pursuant to subsection 1.

- Sec. 13. NRS 613.430 is hereby amended to read as follows:
- 613.430 No action authorized by NRS 613.420 may be brought more than 180 days after the date of the act complained of [.] or more than 180 days after the date of the issuance of the letter described in subsection 2 of NRS 613.420, whichever is later. When a complaint is filed with the Nevada Equal Rights Commission the limitation provided by this section is tolled as to any action authorized by NRS 613.420 during the pendency of the complaint before the Commission.

Sec. 14. This act becomes effective:

- 1. Upon passage and approval for the purpose of adopting regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
  - 2. On January 1, 2018, for all other purposes.

Senator Parks moved that the bill be taken from the General File and placed on the Secretary's desk.

Motion carried.

Senate Bill No. 418.

Bill read second time.

The following amendment was proposed by the Committee on Natural Resources:

Amendment No. 349.

SUMMARY—Revises provisions relating to air pollution. (BDR 40-970)

AN ACT relating to air pollution; declaring the priorities of the Legislature to expend the proceeds from certain consent decrees, orders and settlement agreements involving emissions from vehicles; [ereating the Fund for Cleaner Emission Vehicles;] requiring the Division of Environmental Protection of the State Department of Conservation and Natural Resources to allocate money [from the Fund] deposited in the Account for the Management of Air Quality from such consent decrees, orders and settlement agreements to prevent, reduce or control air pollution, to replace or repower certain school buses in this State and to construct and install publicly available hydrogen-fueling stations and electric vehicle charging stations; requiring the Division to take certain actions required by certain consent decrees, orders and settlements entered into by this State relating to emissions from vehicles; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

The United States District Court for the Northern District of California recently approved two partial consent decrees in litigation between the United States Department of Justice and the Volkswagen Corporation and its subsidiaries regarding the installation and use of emissions testing devices in many vehicles sold and operated in the United States. One provision of the partial consent decrees requires the Volkswagen Corporation to fund a Mitigation Trust Fund, the money from which will be disbursed to the states based on the number of affected vehicles which were registered in each state.

The money must be used to fund projects intended to offset the excess emissions of nitrogen oxides caused by the vehicles. Another provision requires the Volkswagen Corporation to direct \$2,000,000,000 of investments over a 10-year period to support the increased use of technology for zero emission vehicles. (Partial Consent Decree, *In re* Volkswagen "Clean Diesel" Marketing, Sales Practices and Products Liability Litigation, No. MDL No. 2672 CRB, (N.D. Cal. Sept. 30, 2016) and Second Partial Consent Decree, *In re* Volkswagen "Clean Diesel" Marketing, Sales Practices and Products Liability Litigation, No. MDL No. 2672 CRB, (N.D.Cal. Dec. 20, 2016))

Section 6 of this bill declares that the priority of the Legislature in expending any proceeds from this or similar litigation is to use a portion of the proceeds to: (1) prevent, reduce or control air pollution throughout the State; (2) assist schools and school districts to replace or repower eligible school buses to reduce emissions of nitrogen oxides and other hazardous air contaminants; and [(2)] (3) construct publicly available electric vehicle charging stations and hydrogen-fueling stations. Section 7 of this bill [creates the Fund for Cleaner Emission Vehicles in the State General Fund,] requires the eligible proceeds from any consent decrees, orders or settlement agreements received by this State for the purposes of mitigating emissions from vehicles or supporting the increased use of zero emission vehicles be deposited in the [Fund, and provides for the administration of the Fund by the State Treasurer.] Account for the Management of Air Quality in the State General Fund.

Section 8 of this bill requires the Division of Environmental Protection of the State Department of Conservation and Natural Resources to: (1) establish criteria for evaluating applications for projects that prevent, reduce or control air pollution throughout the State and criteria for prioritizing the allocation of money for such projects; (2) develop policies and procedures whereby an entity in the State may apply for money in the Account for such projects; and (3) request that the Department allocate all money available in the Account each year to applicants in order of priority. Additionally, section 8 of this bill requires the Division to: (1) establish a method for annually evaluating school bus fleets in this State and rank them based on certain criteria involving emissions; (2) develop policies and procedures whereby the owners or operators of school buses in this State may apply for money from the [Fund] Account to replace or repower those eligible school buses to reduce emissions; and (3) request that the Department allocate all the money available in the Fund Account each year [for that purpose] to applicants [who meet the eriteria for the allocations.] in order of priority. Section 8 also requires the Division, in cooperation with the Department of Transportation [1] and the Governor's Office of Energy, to: (1) determine and prioritize those areas of the State where construction and installation of publicly available hydrogen-fueling stations and electric vehicle charging stations would have the maximum impact on encouraging the use of zero emission vehicles; and (2) request that the Department allocate all the money available in the [Fund]

Account each year for that purpose for the construction. Section 8 requires the Division to establish a program to provide financial incentives to promote investment in the construction of publicly available hydrogen-fueling stations and electric vehicle charging stations. Section 8 further requires the Division to: (1) submit a report to the Governor annually and each odd-numbered year to the Director of the Legislative Counsel Bureau for transmittal to the Legislature setting forth the allocations from the [Fund;] Account; and (2) adopt regulations. Section 8 also authorizes the Division to take any other actions that are necessary to carry out the duties imposed by section 8. Section 13 of this bill requires the Division to prepare and submit a Beneficiary Mitigation Plan, as required by the partial consent decrees from the Volkswagen litigation, which enacts the intent of the Legislature to use money from the Mitigation Trust Fund to assist schools and school districts to replace or repower eligible school buses to reduce emissions of nitrogen oxides and other hazardous air pollutants and to construct and install publicly available hydrogen-fueling stations and electric vehicle charging stations to support the increased use of zero emission vehicles. Section 13 further requires the Division, when providing input relevant to the Draft National ZEV Investment Plan required by the partial consent decrees, to advocate for and encourage inclusion in the National ZEV Investment Plan the construction in this State of hydrogen-fueling stations and electric vehicle charging stations. Sections 9-12 of this bill make conforming changes.

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

- Section 1. Chapter 445B of NRS is hereby amended by adding thereto the provisions set forth as sections [2] 1.5 to 8, inclusive, of this act.
- Sec. 1.5. <u>"Account for the Management of Air Quality" or "Account" means the Account for the Management of Air Quality created by NRS 445B.590.</u>
- Sec. 2. "Division" means the Division of Environmental Protection of the Department.
- Sec. 3. "Publicly available electric vehicle charging station" means the equipment used to supply electric energy for the recharging of the batteries in vehicles which are partly or solely powered by electric motors that is open to the public.
- Sec. 4. "Publicly available hydrogen-fueling station" means the equipment used to store and dispense hydrogen fuel according to industry codes and standards that is open to the public.
  - Sec. 5. "School bus" has the meaning ascribed to it in NRS 483.160.
- Sec. 6. 1. The Legislature hereby declares that its priorities in expending the proceeds to the State of Nevada from consent decrees, orders and settlement agreements which result in the State receiving money for the purposes of mitigating the emissions from any vehicles and supporting the increased use of zero emission vehicles are:
  - (a) To prevent, reduce or control air pollution throughout the State;

- (b) To assist schools and school districts to replace or repower school buses to reduce the emissions of nitrogen oxides and other hazardous air pollutants from the buses; and
- (c) To construct publicly available hydrogen-fueling stations and publicly available electric vehicle charging stations in this State.
- 2. To further these priorities, the Legislature hereby declares that it is in the best interest of the residents of the State of Nevada that:
- (a) A portion of the money received by the State pursuant to any settlement agreement entered into by this State and a manufacturer of vehicles with diesel engines, a portion of the money recovered by the State pursuant to a consent decree or order in a civil action against a manufacturer of vehicles with diesel engines and a portion of the money received by the State from a consent decree, order or settlement agreement for the purposes of mitigating the emissions from any vehicles or supporting the increased use of zero emission vehicles be dedicated for use to prevent, reduce or control air pollution throughout the State.
- (b) A portion of the money received by the State pursuant to any settlement agreement entered into by the State and a manufacturer of vehicles with diesel engines, a portion of the money recovered by the State pursuant to a consent decree or order in a civil action against a manufacturer of vehicles with diesel engines and a portion of the money received by the State from a consent decree, order or settlement agreement for the purposes of mitigating the emissions from any vehicles be dedicated toward the achievement of the goal of assisting every entity in this State which owns or operates a school bus to replace or repower the school bus in a way that:
- (1) Reduces emissions of nitrogen oxides and other hazardous air pollutants from the school bus; and
- (2) Mitigates the impacts of emissions of nitrogen oxides and other hazardous air pollutants on communities that have historically borne a disproportionate share of the adverse impact of those emissions.
- <u>f(b)}</u> (c) A portion of the money received by the State pursuant to any settlement agreement entered into by the State and a manufacturer of vehicles with diesel engines, a portion of the money recovered by the State pursuant to a consent decree or order in a civil action against a manufacturer of vehicles with diesel engines and a portion of the money received by the State from a consent decree, order or settlement agreement for the purposes of mitigating the emissions from any vehicles or supporting the increased use of zero emission vehicles be dedicated toward the construction of publicly available hydrogen-fueling stations and publicly available electric vehicle charging stations in this State to promote and encourage the use of zero emission vehicles in a way that:
- (1) Reduces emissions of nitrogen oxides and other hazardous air pollutants from the vehicles traveling on the highways of this State; and
  - (2) Supports the increased use of technology for zero emission vehicles.

- Sec. 7. 1. [The Fund for Cleaner Emission Vehicles is hereby created in the State Treasury.] The State Treasurer shall deposit in the [Fund:] Account:
- (a) The money received by this State pursuant to any settlement entered into by the State of Nevada and a manufacturer of vehicles equipped with diesel engines which by the terms of the settlement may be deposited into the [Fund;] Account;
- (b) The money received by this State pursuant to any consent decree or order in a civil action against a manufacturer of vehicles equipped with diesel engines which by the terms of the consent decree or order may be deposited into the {Fund;} Account;
- (c) The money received by this State pursuant to any consent decree or order in a civil action or any settlement entered into by the State of Nevada and any entity for which money is to be received by this State for purposes that include the mitigation of emissions from any vehicles and for which the money received, by the terms of the consent decree, order or settlement, may be deposited into the [Fund;] Account;
- (d) The money received by this State pursuant to any consent decree or order in a civil action or any settlement entered into by the State of Nevada and any entity for which money is to be received by this State for purposes that include supporting the increased use of zero emission vehicle technology, may be deposited into the [Fund;] Account; and
- (e) Any gifts, grants, bequests or donations specifically designated for the <del>[Fund]</del> Account by the donor.
- 2. [The State Treasurer shall administer the Fund. As administrator of the
- (a) Shall maintain the financial records of the Fund;
- (b) Shall invest the money in the Fund as the money in other state funds is invested:
- <del>(c) Shall manage any account associated with the Fund;</del>
- (d) Shall maintain any instruments that evidence investments made with the
- —(e) May contract with vendors for any good or service that is necessary to earry out the provisions of this section; and
- (f) May perform any other duties necessary to administer the Fund
- 3. The interest and income earned on the money in the Fund must, after deducting any applicable charges, be credited to the Fund. All claims against the Fund must be paid as other claims against the State are paid.
- 4. The State Treasurer or the Department may submit to the Interin Finance Committee a request for an allocation for administrative expense, from the Fund pursuant to this section. Except as otherwise limited by this subsection, the Interim Finance Committee may allocate all or part of the money so requested. The annual allocation for administrative expenses from the Fund must not exceed:

- (a) Two percent of the money in the Fund, as calculated pursuant to this subsection, each year to pay the costs incurred by the State Treasurer to administer the Fund; and
- (b) Five percent of the money in the Fund, as calculated pursuant to this subsection, each fiscal year to pay the costs incurred by the Division to earry out its duties set forth in section 8 of this act to administer the provisions of that section.
- For the purposes of this subsection, the amount of money available for allocation to pay for the administrative costs must be calculated at the beginning of each fiscal year based on the total amount of money anticipated by the State Treasurer to be deposited in the Fund during that fiscal year.
- 5. The money in the Fund remains in the Fund and does not revert to the State General Fund at the end of any fiscal year.
- <u>-6.</u>] All money that is deposited or paid into the [Fund] Account pursuant to this section is hereby appropriated to be used for any purpose authorized by the Legislature or by the [Division] Department for expenditure or allocation in accordance with the provisions of section 8 of this act. Money expended from the [Fund] Account pursuant to that section must not be used to supplant existing methods of funding that are available to public agencies.

#### Sec. 8. 1. The Division shall:

- (a) Establish criteria for evaluating applications for projects that prevent, reduce or control air pollution throughout the State that include, without limitation, determining which projects are eligible for funding pursuant to the terms of any conditions restricting the allocation of any money in the Account.
- (b) Develop policies and procedures for the solicitation of and applications by an entity in this State to obtain money from the Account for a project that seeks to prevent, reduce or control air pollution throughout the State.
- (c) Establish criteria for prioritizing the allocation of money from the Account for applications received pursuant to paragraph (b) for projects to prevent, reduce or control air pollution throughout the State.
- (d) Request from the Department an allocation of all money available in the Account each year pursuant to the determinations made in subsection 4 to applicants in the order of priority established pursuant to paragraph (c).
- (e) Meet all applicable requirements for receiving or expending money pursuant to any consent decree, order or settlement of a type set forth in paragraph (a), (b), (c) or (d) of subsection 1 of section 7 of this act.

### 2. The Division shall:

- <u>(a)</u> Establish a method for annually evaluating the school bus fleets of schools and school districts in this State to rank those fleets based on which fleets:
- (1) Emit the largest amount of nitrogen oxides or other hazardous air contaminants;
- (2) Are used primarily in communities that have historically borne a disproportionate share of the adverse impact of those air contaminants; and

- (3) Contain the highest percentage of buses that are eligible to be replaced or repowered pursuant to the terms of any conditions restricting the allocation of any money in the [Fund for Cleaner Emission Vehicles created by section 7 of this act.] Account.
- (b) Develop policies and procedures for the solicitation of and applications by any entity in this State which owns or operates a school bus to obtain money from the [Fund for Cleaner Emission Vehicles] Account for the purpose of replacing or repowering a school bus to reduce the emission of nitrogen oxides or other hazardous air pollutants.
- (c) Establish criteria for prioritizing the allocation of money from the [Fund for Cleaner Emission Vehicles,] Account, including, without limitation, the rankings established pursuant to paragraph (a).
- (d) [Allocate] Request from the Department an allocation of all money available for that purpose in the [Fund for Cleaner Emission Vehicles] Account each year pursuant to the determinations made in subsection 4 to applicants [who meet the criteria established] in the order of priority determined pursuant to paragraph (c).
- (e) Meet all applicable requirements for receiving or expending money pursuant to any consent decree, order or settlement of a type set forth in paragraph (a), (b), (c) or (d) of subsection 1 of section 7 of this act.
- [(f) Submit annually a report of all rankings, applications and allocations made pursuant to this subsection to the Governor and, on or before February I of each odd numbered year, submit each annual report for the immediately preceding 2 years to the Director of the Legislative Counsel Bureau for transmittal to the Legislature.
- $\frac{2.1}{3.}$  The Division, in cooperation with the Department of Transportation  $\frac{1}{1.1}$  and the Governor's Office of Energy, shall:
- (a) Determine those areas of this State where the construction and installation of publicly available hydrogen-fueling stations and publicly available electric vehicle charging stations would have the maximum impact on promoting, supporting and encouraging the use of zero emission vehicles.
- (b) Establish criteria for prioritizing the allocation of money from the [Fund for Cleaner Emissions from Vehicles] Account for the construction and installation of publicly available hydrogen-fueling stations and publicly available electric vehicle charging stations, including, without limitation, those areas of the State determined pursuant to paragraph (a).
- (c) [Allocate] Request from the Department an allocation of all money available for that purpose in the [Fund for Cleaner Emission Vehicles] Account each year pursuant to the determinations made in subsection 4 to the Department of Transportation for the construction and installation, in accordance with the provisions of chapter 333 of NRS, of publicly available hydrogen-fueling stations and publicly available electric vehicle charging stations in the order of priority determined pursuant to paragraph (b).

- (d) Meet all applicable requirements for receiving or expending money pursuant to any consent decree, order or settlement of a type set forth in paragraph (a), (b), (c) or (d) of subsection 1 of section 7 of this act.
- [(e) Submit annually a report of all determinations and allocations made pursuant to this subsection to the Governor and, on or before February 1 of each odd-numbered year, submit each annual report for the immediately preceding 2 years to the Director of the Legislative Counsel Bureau for transmittal to the Legislature.
- <u>3.</u>} 4. Except as otherwise provided in subsection 5, the Division shall:
- (a) Prioritize the disbursement of money from the Account for the purposes of subsections 1, 2 and 3 based on, without limitation, any uses of the money which are in the best interests of the State; and
- (b) Ensure that all allocations from the Account are for projects or purposes that meet the criteria established by the Division in subsections 1, 2 and 3.
- 5. The Division shall establish by regulation a program to provide financial incentives, including, without limitation, grants and loans, to promote investment in the construction of publicly available hydrogen-fueling stations and publicly available electric vehicle charging stations. The Department shall, to the extent money is available from the Account for that purpose, provide an amount of money not to exceed \$2,000,000 from the Account for use by the Division for the program.
- 6. The Division shall submit annually a report of all applications and allocations made pursuant to this section to the Governor and, on or before February 1 of each odd-numbered year, submit each annual report for the immediately preceding 2 years to the Director of the Legislative Counsel Bureau for transmittal to the Legislature.
- 7. The Division:
- (a) Shall adopt any regulations; and
- (b) May take any other actions,
- → that are necessary to carry out its duties pursuant to this section.
- Sec. 9. NRS 445B.105 is hereby amended to read as follows:
- 445B.105 As used in NRS 445B.100 to 445B.640, inclusive, and sections  $\frac{\{2\}}{2}$   $\frac{1.5}{2}$  to 8, inclusive, of this act, unless the context otherwise requires, the words and terms defined in NRS 445B.110 to 445B.155, inclusive, and sections  $\frac{\{2\}}{2}$   $\frac{1.5}{2}$  to 5, inclusive, of this act have the meanings ascribed to them in those sections.
  - Sec. 10. NRS 445B.460 is hereby amended to read as follows:
- 445B.460 1. If, in the judgment of the Director, any person is engaged in or is about to engage in any act or practice which constitutes or will constitute a violation of any provision of NRS 445B.100 to 445B.640, inclusive, and sections [2] 1.5 to 8, inclusive, of this act, or any rule, regulation, order or operating permit issued pursuant to NRS 445B.100 to 445B.640, inclusive, and sections [2] 1.5 to 8, inclusive, of this act, the Director may request that the Attorney General apply to the district court for

an order enjoining the act or practice, or for an order directing compliance with any provision of NRS 445B.100 to 445B.640, inclusive, and sections [2] 1.5 to 8, inclusive, of this act, or any rule, regulation, order or operating permit issued pursuant to NRS 445B.100 to 445B.640, inclusive [.], and sections [2] 1.5 to 8, inclusive, of this act.

- 2. If, in the judgment of the control officer of a local air pollution control board, any person is engaged in or is about to engage in such an act or practice, the control officer may request that the district attorney of the county in which the act or practice is being engaged in or is about to be engaged in apply to the district court for such an order.
- 3. Upon a showing by the Director or the control officer that a person has engaged in or is about to engage in any such act or practice, a permanent or temporary injunction, restraining order or other appropriate order may be granted by the court.
  - Sec. 11. NRS 445B.470 is hereby amended to read as follows:
  - 445B.470 1. A person shall not knowingly:
- (a) Violate any applicable provision, the terms or conditions of any permit or any provision for the filing of information;
  - (b) Fail to pay any fee;
- (c) Falsify any material statement, representation or certification in any notice or report; or
  - (d) Render inaccurate any monitoring device or method,
- $\rightarrow$  required pursuant to the provisions of NRS 445B.100 to 445B.450, inclusive, and sections  $\frac{(2+1).5}{2}$  to 8, inclusive, of this act, or 445B.470 to 445B.640, inclusive, and sections  $\frac{(2+1).5}{2}$  to 8, inclusive, of this act, or any regulation adopted pursuant to those provisions.
- 2. Any person who violates any provision of subsection 1 shall be punished by a fine of not more than \$10,000 for each day of the violation.
- 3. The burden of proof and degree of knowledge required to establish a violation of subsection 1 are the same as those required by 42 U.S.C. § 7413(c), as that section existed on October 1, 1993.
- 4. If, in the judgment of the Director of the Department or the Director's designee, any person is engaged in any act or practice which constitutes a criminal offense pursuant to NRS 445B.100 to 445B.640, inclusive, and sections [2] 1.5 to 8, inclusive, of this act, the Director of the Department or the designee may request that the Attorney General or the district attorney of the county in which the criminal offense is alleged to have occurred institute by indictment or information a criminal prosecution of the person.
- 5. If, in the judgment of the control officer of a local air pollution control board, any person is engaged in such an act or practice, the control officer may request that the district attorney of the county in which the criminal offense is alleged to have occurred institute by indictment or information a criminal prosecution of the person.

- Sec. 12. NRS 445B.500 is hereby amended to read as follows:
- 445B.500 1. Except as otherwise provided in this section and in NRS 445B.310 and 704.7318:
- (a) The district board of health, county board of health or board of county commissioners in each county whose population is 100,000 or more shall establish a program for the control of air pollution and administer the program within its jurisdiction unless superseded.
  - (b) The program:
- (1) Must include, without limitation, standards for the control of emissions, emergency procedures and variance procedures established by ordinance or local regulation which are equivalent to or stricter than those established by statute or state regulation;
- (2) May, in a county whose population is 700,000 or more, include requirements for the creation, receipt and exchange for consideration of credits to reduce and control air contaminants in accordance with NRS 445B.508; and
- (3) Must provide for adequate administration, enforcement, financing and staff.
- (c) The district board of health, county board of health or board of county commissioners is designated as the air pollution control agency of the county for the purposes of NRS 445B.100 to 445B.640, inclusive, and sections [2] 1.5 to 8, inclusive, of this act and the Federal Act insofar as it pertains to local programs, and that agency is authorized to take all action necessary to secure for the county the benefits of the Federal Act.
- (d) Powers and responsibilities provided for in NRS 445B.210, 445B.240 to 445B.470, inclusive, 445B.560, 445B.570, 445B.580 and 445B.640 are binding upon and inure to the benefit of local air pollution control authorities within their jurisdiction.
- 2. The local air pollution control board shall carry out all provisions of NRS 445B.215 with the exception that notices of public hearings must be given in any newspaper, qualified pursuant to the provisions of chapter 238 of NRS, once a week for 3 weeks. The notice must specify with particularity the reasons for the proposed regulations and provide other informative details. NRS 445B.215 does not apply to the adoption of existing regulations upon transfer of authority as provided in NRS 445B.610.
- 3. In a county whose population is 700,000 or more, the local air pollution control board may delegate to an independent hearing officer or hearing board its authority to determine violations and levy administrative penalties for violations of the provisions of NRS 445B.100 to 445B.450, inclusive, and sections [2] 1.5 to 8, inclusive, of this act and 445B.500 to 445B.640, inclusive, and sections [2] 1.5 to 8, inclusive, of this act, or any regulation adopted pursuant to those sections. If such a delegation is made, 17.5 percent of any penalty collected must be deposited in the county treasury in an account to be administered by the local air pollution control board to a maximum of \$17,500 per year. The money in the account may only be used to defray the administrative expenses incurred by the local air pollution control board in

enforcing the provisions of NRS 445B.100 to 445B.640, inclusive [-], and sections [-2] 1.5 to 8, inclusive, of this act. The remainder of the penalty must be deposited in the county school district fund of the county where the violation occurred and must be accounted for separately in the fund. A school district may spend the money received pursuant to this section only in accordance with an annual spending plan that is approved by the local air pollution control board and shall submit an annual report to that board detailing the expenditures of the school district under the plan. A local air pollution control board shall approve an annual spending plan if the proposed expenditures set forth in the plan are reasonable and limited to:

- (a) Programs of education on topics relating to air quality; and
- (b) Projects to improve air quality, including, without limitation, the purchase and installation of equipment to retrofit school buses of the school district to use biodiesel, compressed natural gas or a similar fuel formulated to reduce emissions from the amount of emissions produced by the use of traditional fuels such as gasoline and diesel fuel,
- → which are consistent with the state implementation plan adopted by this State pursuant to 42 U.S.C. §§ 7410 and 7502.
- 4. Any county whose population is less than 100,000 or any city may meet the requirements of this section for administration and enforcement through cooperative or interlocal agreement with one or more other counties, or through agreement with the State, or may establish its own program for the control of air pollution. If the county establishes such a program, it is subject to the approval of the Commission.
- 5. No district board of health, county board of health or board of county commissioners may adopt any regulation or establish a compliance schedule, variance order or other enforcement action relating to the control of emissions from plants which generate electricity by using steam produced by the burning of fossil fuel.
- 6. As used in this section, "plants which generate electricity by using steam produced by the burning of fossil fuel" means plants that burn fossil fuels in a boiler to produce steam for the production of electricity. The term does not include any plant which uses technology for a simple or combined cycle combustion turbine, regardless of whether the plant includes duct burners.
- Sec. 13. 1. The Division of Environmental Protection of the State Department of Conservation and Natural Resources, in its role as lead agency on behalf of this State designated as required in section 4.2.1 of Appendix D to the Partial Consent Decree, shall, upon a determination of Beneficiary status pursuant to section 4.0 of Appendix D to the Partial Consent Decree, prepare and submit a Beneficiary Mitigation Plan as required by section 4.1 of Appendix D to the Partial Consent Decree which includes, without limitation, those provisions of sections [2] 1.5 to 8, inclusive, of this act which enact the intent of the Legislature pursuant to section 6 of this act, and to the extent that

such provisions are permissible under the requirements of the Partial Consent Decree and the Second Partial Consent Decree.

- 2. The Division of Environmental Protection of the State Department of Conservation and Natural Resources, when providing input relevant to the development of a Draft National ZEV Investment Plan pursuant to section 2.4 of Appendix C to the Partial Consent Decree, shall advocate for and encourage inclusion in the National ZEV Investment Plan the construction of publicly available hydrogen-fueling stations and publicly available electric vehicle charging stations which enact the intent of the Legislature pursuant to section 6 of this act, to the extent that such construction is permissible under the requirements of the Partial Consent Decree and the Second Partial Consent Decree.
  - 3. As used in this section:
- (a) "Beneficiary" has the meaning ascribed to it in section 1.1 of Appendix D to the Partial Consent Decree.
- (b) "Beneficiary Mitigation Plan" means the submittal required of a Beneficiary pursuant to section 4.1 of Appendix D to the Partial Consent Decree.
- (c) "Draft National ZEV Investment Plan" means a draft of the National ZEV Investment Plan, which is required to be submitted to the Environmental Protection Agency pursuant to section 2.4 of Appendix C to the Partial Consent Decree.
- (d) "National ZEV Investment Plan" has the meaning ascribed to it in section 1.6 of Appendix C to the Partial Consent Decree.
- (e) "Partial Consent Decree" means Partial Consent Decree, <u>In re Volkswagen "Clean Diesel" Marketing</u>, Sales Practices and Products Liability <u>Litigation</u>, No. MDL No. 2672 CRB, (N.D. Cal. Sept. 30, 2016).
- (f) "Second Partial Consent Decree" means Second Partial Consent Decree, *In re* Volkswagen "Clean Diesel" Marketing, Sales Practices and Products Liability Litigation, No. MDL No. 2672 CRB, (N.D. Cal. Dec. 20, 2016).
- Sec. 14. The provisions of subsection 1 of NRS 218D.380 do not apply to any provision of this act which adds or revises a requirement to submit a report to the Legislature.
  - Sec. 15. This act becomes effective upon passage and approval.

Senator Cancela moved the adoption of the amendment.

Remarks by Senator Cancela.

Amendment No. 349 to Senate Bill No. 418 requires proceeds from the Volkswagen consent decrees or similar litigation be deposited in the Account for the Management of Air Quality in the State General Fund. It adds the declaration that it is the priority of the Legislature in expending the proceeds to prevent, reduce or control air pollution throughout the State, and sets forth certain duties of the Department of Conservation and Natural Resources in allocating the funds from the Account.

Amendment adopted.

Senator Cancela moved that the bill be re-referred to the Committee on Finance, upon return from reprint.

Motion carried.

Bill ordered reprinted, engrossed and to the Committee on Finance.

Senate Bill No. 472.

Bill read second time.

The following amendment was proposed by the Committee on Judiciary:

Amendment No. 301.

SUMMARY—Revises provisions governing registration and community notification of juveniles adjudicated delinquent for committing certain sexual offenses. (BDR 5-345)

AN ACT relating to crimes; revising provisions governing registration and community notification of juveniles adjudicated delinquent for committing certain sexual offenses; and providing other matters properly relating thereto. Legislative Counsel's Digest:

Existing law provides that a child who is adjudicated delinquent for committing certain sexual offenses and who was 14 years of age or older at the time of the commission of the sexual offense is required to register as a sex offender in the same manner as an adult and is subject to community notification. (NRS 62F.220, 179D.0559, 179D.095) In addition, existing law prohibits the sealing of records relating to a child while the child is subject to registration and community notification as a juvenile sex offender. (NRS 62F.260) Sections 18, 19 and 22 of this bill remove and repeal those provisions, and sections 4-14 of this bill enact provisions governing the registration and community notification of juvenile sex offenders.

Sections 5 and 8 include certain offenses, called "aggravated sexual offenses," in the list of sexual offenses for which registration and community notification as a juvenile sex offender is required. Section 9 provides that a child who is adjudicated delinquent for committing certain sexual offenses and who was 14 years of age or older at the time of the commission of the sexual offense must: (1) register as a sex offender with the juvenile court, the juvenile probation department or the Youth Parole Bureau of the Division of Child and Family Services of the Department of Health and Human Services, whichever entity is determined to be the appropriate entity by the juvenile court; and (2) update his or her registration information not later than 48 hours after certain changes to that information. Section 9 also requires: (1) the juvenile court to order the parent or guardian of the child to ensure that the child complies with the requirements for registration as a sex offender; and (2) the parent or guardian of the child to notify the entity with which the child is registered as a sex offender and, if appropriate, the local law enforcement agency if the child runs away or otherwise leaves the placement for the child approved by the juvenile court.

Under section 10, the juvenile court is required to: (1) notify the Central Repository for Nevada Records of Criminal History when a child is adjudicated delinquent for certain sexual offenses so that the Central Repository may carry out the provisions of law governing the registration of

the child as a sex offender; and (2) inform the child and his or her parent or guardian that the child is subject to certain requirements for registration and community notification applicable to sex offenders. Section 10 further prohibits the juvenile court from terminating its jurisdiction over the child until the juvenile court relieves the child from the requirement to register as a sex offender or orders that the child continue to be subject to registration and community notification after the child becomes 21 years of age.

Section 11 provides that upon a motion by a child, a judge of the juvenile court may exempt the child from the requirements for community notification applicable to sex offenders or exclude the child from placement on the community notification website, or both. Under section 11, the judge may not exempt a child from community notification or exclude the child from the community notification website if the child is adjudicated delinquent for certain aggravated sexual offenses. The judge must hold a hearing on such a motion and must not exempt the child from community notification or exclude the child from the community notification website unless, at the hearing, the judge finds by clear and convincing evidence that the child is not likely to pose a threat to the safety of others. Section 11 further authorizes the judge to reconsider its decision on a motion after considering certain factors. Finally, if the judge exempts a child from community notification or excludes the child from placement on the community notification website, or both, the judge must notify the Central Repository and the child must not be subject to community notification or be placed on the community notification website.

Section 12 requires a judge of the juvenile court to hold a hearing when the child reaches 21 years of age or on a date reasonably near that date. If the judge finds by clear and convincing evidence that the child has been rehabilitated and does not pose a threat to the safety of others, the judge must relieve the child from the requirement for registration and community notification as a sex offender. However, if the judge determines that the child has not been rehabilitated or poses a threat to the safety of others, the judge must order that the child is subject to registration and community notification in the manner provided for adult sex offenders.

Section 13 provides that the juvenile court may not refer to a master any finding, determination or other act required to be made by the juvenile court pursuant to sections 11 and 12.

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

Section 1. NRS 62A.030 is hereby amended to read as follows:

- 62A.030 1. "Child" means:
- (a) A person who is less than 18 years of age;
- (b) A person who is less than 21 years of age and subject to the jurisdiction of the juvenile court for an unlawful act that was committed before the person reached 18 years of age; or

- (c) A person who is otherwise subject to the jurisdiction of the juvenile court as a juvenile sex offender pursuant to the provisions of [NRS 62F.200, 62F.220 and 62F.260.] sections 4 to 14, inclusive, of this act.
  - 2. The term does not include:
- (a) A person who is excluded from the jurisdiction of the juvenile court pursuant to NRS 62B.330;
- (b) A person who is transferred to the district court for criminal proceedings as an adult pursuant to NRS 62B.335; or
- (c) A person who is certified for criminal proceedings as an adult pursuant to NRS 62B.390 or 62B.400.
  - Sec. 2. NRS 62B.410 is hereby amended to read as follows:
- 62B.410 Except as otherwise provided in NRS 62F.110 and [62F.220,] sections 10 and 12 of this act, if a child is subject to the jurisdiction of the juvenile court, the juvenile court:
- 1. May terminate its jurisdiction concerning the child at any time, either on its own volition or for good cause shown; or
- 2. May retain jurisdiction over the child until the child reaches 21 years of age.
- Sec. 3. Chapter 62F of NRS is hereby amended by adding thereto the provisions set forth as sections 4 to 14, inclusive, of this act.
- Sec. 4. As used in sections 4 to 14, inclusive, of this act, unless the context otherwise requires, the words and terms defined in sections 5 to 8, inclusive, of this act have the meanings ascribed to them in those sections.
  - Sec. 5. "Aggravated sexual offense" means:
  - 1. Battery with intent to commit sexual assault pursuant to NRS 200.400;
- 2. An offense involving the administration of a drug to another person with the intent to enable or assist the commission of a felony pursuant to NRS 200.405, if the felony is listed in NRS 179D.097;
- 3. An offense involving the administration of a controlled substance to another person with the intent to enable or assist the commission of a crime of violence pursuant to NRS 200.408, if the crime of violence is listed in NRS 179D.097;
- 4. An offense listed in NRS 179D.097, if the offense is subject to the additional penalty set forth in NRS 193.165;
- 5. An offense listed in NRS 179D.097, if the offense results in substantial bodily harm to the victim;
- 6. Any sexual offense if the juvenile has previously been adjudicated delinquent, or placed under the supervision of the juvenile court pursuant to NRS 62C.230, for a sexual offense; or
  - 7. An attempt or conspiracy to commit an offense listed in this section.
- Sec. 6. "Community notification" means notification of a community pursuant to the provisions of NRS 179D.475.
- Sec. 7. "Community notification website" has the meaning ascribed to it in NRS 179B.023.
  - Sec. 8. 1. "Sexual offense" means:

- (a) Sexual assault pursuant to NRS 200.366;
- (b) An offense involving pornography and a minor pursuant to NRS 200.710 to 200.730, inclusive;
  - (c) Lewdness with a child pursuant to NRS 201.230;
- (d) An attempt or conspiracy to commit an offense listed in paragraph (a), (b) or (c), if punishable as a felony;
- (e) An offense that is determined to be sexually motivated pursuant to NRS 175.547 or 207.193; or
  - (f) An aggravated sexual offense.
- 2. The term does not include an offense involving consensual sexual conduct if the victim was:
- (a) An adult, unless the adult was under the custodial authority of the offender at the time of the offense; or
- (b) At least 13 years of age and the offender was not more than 4 years older than the victim at the time of the commission of the offense.
- Sec. 9. 1. Notwithstanding any other provision of law, a child who is adjudicated delinquent for an unlawful act that would have been a sexual offense if committed by an adult and who was 14 years of age or older at the time of the commission of the unlawful act shall:
- (a) Register initially, as required by NRS 179D.445, with the juvenile court, the director of juvenile services or the Youth Parole Bureau in the jurisdiction in which the child was adjudicated, as determined by the juvenile court; and
- (b) Not later than 48 hours after a change of his or her name, residence or employment or student status, the issuance of or a change to the driver's license or identification card issued to the child by this State or any other jurisdiction or a change in the description of the motor vehicle registered to or frequently driven by the child, if any, update the juvenile court, the director of juvenile services or the Youth Parole Bureau, as applicable, of such a change.
- 2. The juvenile court shall order the parent or guardian of a child who is subject to the requirements of subsection 1 to:
- (a) Ensure that while the child is subject to the jurisdiction of the juvenile court, the child complies with the requirements of subsection 1; and
- (b) If the child runs away or otherwise leaves the placement for the child approved by the juvenile court, inform the juvenile court, the director of juvenile services or the Youth Parole Bureau, as applicable, that the child has run away or otherwise left the placement and, if appropriate, make a report to the local law enforcement agency of the jurisdiction in which the child was placed.
- 3. The juvenile court, director of juvenile services or Youth Parole Bureau, as applicable, shall immediately provide the information provided by a child or the parent or guardian of a child pursuant to subsection 1 or 2 to the Central Repository.
- Sec. 10. 1. In addition to any other action authorized or required pursuant to the provisions of this title, if a child is adjudicated delinquent for

an unlawful act that would have been a sexual offense if committed by an adult and was 14 years of age or older at the time of the commission of the unlawful act, the juvenile court shall:

- (a) Notify the Central Repository of the adjudication so that the Central Repository may carry out the provisions for registration and community notification of the child pursuant to NRS 179D.010 to 179D.550, inclusive, and sections 4 to 14, inclusive, of this act.
- (b) Inform the child and the parent or guardian of the child that the child is subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive, and sections 4 to 14, inclusive, of this act.
- 2. The juvenile court may not terminate its jurisdiction over the child for the purposes of carrying out the provisions of sections 4 to 14, inclusive, of this act until the juvenile court, pursuant to section 12 of this act, has relieved the child from being subject to the requirements for registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive, or ordered that the child is subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive.
- Sec. 11. 1. Notwithstanding any other provision of law and except as otherwise provided in this subsection, upon a motion by a child, the juvenile court may exempt the child from community notification or exclude the child from placement on the community notification website, or both, if the juvenile court finds by clear and convincing evidence that the child is not likely to pose a threat to the safety of others. The juvenile court shall not exempt a child from community notification or exclude the child from placement on the community notification website if the child is adjudicated delinquent for committing an aggravated sexual offense.
- 2. At the hearing held on a motion pursuant to this section, the juvenile court may consider any evidence, reports, statements or other material which the juvenile court determines is relevant and helpful to determine whether to grant the motion.
- 3. In determining at the hearing whether the child is likely to pose a threat to the safety of others, the juvenile court shall consider the following factors:
- (a) The number, date, nature and gravity of the act or acts committed by the child, including, without limitation, whether the act or acts were characterized by repetitive and compulsive behavior.
  - (b) The family controls in place over the child.
  - (c) The plan for providing counseling, therapy or treatment to the child.
- (d) The history of the child with the juvenile court, including, without limitation, reports concerning any unlawful acts which the child has admitted committing, any acts for which the juvenile court placed the child under a supervision and consent decree pursuant to NRS 62C.230 and any prior adjudication of delinquency or need of supervision.
- (e) The results of any psychological or psychiatric profiles of the child and whether those profiles indicate a risk of recidivism.

- (f) Any physical conditions that minimize the risk of recidivism, including, without limitation, physical disability or illness.
- (g) The impact of the unlawful act on the victim and any statements made by the victim.
  - (h) The safety of the community and the need to protect the public.
- (i) The impact that registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive, and sections 4 to 14, inclusive, of this act will have on the treatment of the child.
- (j) Any other factor that the juvenile court finds relevant to the determination of whether the child is likely to pose a threat to the safety of others.
- 4. If the juvenile court exempts a child from community notification or excludes a child from placement on the community notification website, or both, the juvenile court shall notify the Central Repository so that the Central Repository may carry out the determination of the juvenile court.
- 5. Upon good cause shown, the juvenile court may reconsider the granting or denial of a motion pursuant to this section, and reverse, modify or affirm its determination. In determining whether to reverse, modify or affirm its determination, the juvenile court:
  - (a) Shall consider:
  - (1) The factors set forth in subsection 3;
- (2) The extent to which the child has received counseling, therapy or treatment and the response of the child to any such counseling, therapy or treatment; and
- (3) The behavior of the child while subject to the jurisdiction of the juvenile court, including, without limitation, the behavior of the child during any period of confinement.
- (b) Shall not exempt a child from community notification or exclude a child from placement on the community notification website unless the juvenile court finds by clear and convincing evidence that the child is not likely to pose a threat to the safety of others.
- Sec. 12. Except as otherwise provided in sections 4 to 14, inclusive, of this act:
- 1. If a child has been adjudicated delinquent for a sexual offense, the juvenile court shall hold a hearing when the child reaches 21 years of age, or at a time reasonably near the date on which the child reaches 21 years of age, to determine whether the child should be subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive.
- 2. At the hearing pursuant to this section, the juvenile court may consider any evidence, reports, statements or other material which the juvenile court determines is relevant and helpful to determine whether to grant the motion.
- 3. If the juvenile court finds by clear and convincing evidence at the hearing that the child has been rehabilitated to the satisfaction of the juvenile court and that the child is not likely to pose a threat to the safety of others, the

juvenile court may relieve the child from being subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive.

- 4. If the juvenile court does not find by clear and convincing evidence at the hearing that the child has been rehabilitated to the satisfaction of the juvenile court and that the child is not likely to pose a threat to the safety of others, the juvenile court shall:
- (a) Order that the child is subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive;
- (b) Notify the Central Repository of the adjudication of the child and the determination of the juvenile court that the child should be subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive, so that the Central Repository may carry out the provisions for registration and community notification pursuant to those sections; and
- (c) Inform the child that he or she is subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive.
- 5. In determining at the hearing whether the child has been rehabilitated to the satisfaction of the juvenile court or is likely to pose a threat to the safety of others, the juvenile court shall consider the following factors:
- (a) The number, date, nature and gravity of the act or acts committed by the child, including, without limitation, whether the act or acts were characterized by repetitive and compulsive behavior.
- (b) The extent to which the child has received counseling, therapy or treatment, and the response of the child to any such counseling, therapy or treatment.
- (c) Whether psychological or psychiatric profiles indicate a risk of recidivism.
- (d) The behavior of the child while subject to the jurisdiction of the juvenile court, including, without limitation, the behavior of the child during any period of confinement.
- (e) Whether the child has made any recent threats against a person or expressed any intent to commit any crimes in the future.
- (f) Any physical conditions that minimize the risk of recidivism, including, without limitation, physical disability or illness.
- (g) The impact of the unlawful act on the victim and any statements made by the victim.
  - (h) The safety of the community and the need to protect the public.
- (i) Any other factor that the juvenile court finds relevant to the determination of whether the child has been rehabilitated to the satisfaction of the juvenile court and whether the child is likely to pose a threat to the safety of others.
- 6. The juvenile court shall file written findings of fact and conclusions of law setting forth the basis and legal support for any decision pursuant to this section.

- 7. If, pursuant to this section, the juvenile court orders that a child is subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive, the jurisdiction of the juvenile court terminates, and the child is subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive, for the period specified in NRS 179D.490.
- Sec. 13. 1. The juvenile court may not refer to a master any finding, determination or other act required to be made by the juvenile court pursuant to sections 11 and 12 of this act.
- 2. As used in this section, "master" has the meaning ascribed to it in Rule 53 of the Nevada Rules of Civil Procedure.
- Sec. 14. The records relating to a child must not be sealed pursuant to the provisions of NRS 62H.100 to 62H.170, inclusive, while the child is subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive.
  - Sec. 15. NRS 62H.110 is hereby amended to read as follows:
- 62H.110 The provisions of NRS 62H.100 to 62H.170, inclusive, do not apply to:
- 1. Information maintained in the standardized system established pursuant to NRS 62H.200:
- 2. Information that must be collected by the Division of Child and Family Services pursuant to NRS 62H.220;
- 3. Records that are subject to the provisions of [NRS 62F.260;] section 14 of this act; or
- 4. Records relating to a traffic offense that would have been a misdemeanor if committed by an adult.
  - Sec. 16. NRS 62H.120 is hereby amended to read as follows:
- 62H.120 Any decree or order entered concerning a child within the purview of this title must contain, for the benefit of the child, an explanation of the contents of NRS 62H.100 to 62H.170, inclusive, and, if applicable, [NRS 62F.260.] section 14 of this act.
  - Sec. 17. NRS 179D.035 is hereby amended to read as follows:
- 179D.035 1. "Convicted" includes, but is not limited to, an adjudication of delinquency by a court having jurisdiction over juveniles if :
- <u>[1.]</u> (a) The *[the]* adjudication of delinquency is for the commission of a sexual offense that is listed in [NRS 62F.200;] section 8 of this act; and
- [2.] (b) The offender was 14 years of age or older at the time of the offense. Is act. 1
- 2. The term does not include an adjudication of delinquency by a court having jurisdiction over juveniles if, pursuant to section 12 of this act, the court has relieved the juvenile from being subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive.
  - Sec. 18. NRS 179D.0559 is hereby amended to read as follows:
- 179D.0559 1. "Offender convicted of a crime against a child" or "offender" means a person who, after July 1, 1956, is or has been [:

- —(a) Convicted] convicted of a crime against a child that is listed in NRS 179D.0357. [: or
- (b) Adjudicated delinquent by a court having jurisdiction over juveniles of a crime against a child that is listed in NRS 62F.200 if the offender was 14 years of age or older at the time of the crime.]
- 2. The term includes, without limitation, an offender who is a student or worker within this State but who is not otherwise deemed a resident offender pursuant to subsection 2 or 3 of NRS 179D.460.
  - Sec. 19. NRS 179D.095 is hereby amended to read as follows:
- 179D.095 1. "Sex offender" means a person who, after July 1, 1956, is or has been f:
- (a) Convicted convicted of a sexual offense listed in NRS 179D.097.
   (b) Adjudicated delinquent by a court having jurisdiction over juveniles of a sexual offense listed in NRS 62F.200 if the offender was 14 years of age or older at the time of the offense.]
- 2. The term includes, without limitation, a sex offender who is a student or worker within this State but who is not otherwise deemed a resident offender pursuant to subsection 2 or 3 of NRS 179D.460.
  - Sec. 20. NRS 179D.450 is hereby amended to read as follows:
- 179D.450 1. If the Central Repository receives notice from a court pursuant to NRS 176.0926 that an offender has been convicted of a crime against a child, pursuant to NRS 176.0927 that a sex offender has been convicted of a sexual offense or pursuant to [NRS 62F.220] section 10 of this act that a juvenile has been adjudicated delinquent for an offense for which the juvenile is subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive, and sections 4 to 14, inclusive, of this act, the Central Repository shall:
- (a) If a record of registration has not previously been established for the offender or sex offender, notify the local law enforcement agency so that a record of registration may be established; or
- (b) If a record of registration has previously been established for the offender or sex offender, update the record of registration for the offender or sex offender and notify the appropriate local law enforcement agencies.
- 2. If the offender or sex offender named in the notice is granted probation or otherwise will not be incarcerated or confined, the Central Repository shall:
- (a) Immediately provide notification concerning the offender or sex offender to the appropriate local law enforcement agencies and, if the offender or sex offender resides in a jurisdiction which is outside of this State, to the appropriate law enforcement agency in that jurisdiction; and
- (b) [Immediately] Except as otherwise provided in section 11 of this act, immediately provide community notification concerning the offender or sex offender pursuant to the provisions of NRS 179D.475.
- 3. If an offender or sex offender is incarcerated or confined and has previously been convicted of a crime against a child as described in

NRS 179D.0357 or a sexual offense as described in NRS 179D.097, before the offender or sex offender is released:

- (a) The Department of Corrections or a local law enforcement agency in whose facility the offender or sex offender is incarcerated or confined shall:
- (1) Inform the offender or sex offender of the requirements for registration, including, but not limited to:
- (I) The duty to register initially with the appropriate law enforcement agency in the jurisdiction in which the offender or sex offender was convicted if the offender or sex offender is not a resident of that jurisdiction pursuant to NRS 179D.445;
- (II) The duty to register in this State during any period in which the offender or sex offender is a resident of this State or a nonresident who is a student or worker within this State and the time within which the offender or sex offender is required to register pursuant to NRS 179D.460;
- (III) The duty to register in any other jurisdiction during any period in which the offender or sex offender is a resident of the other jurisdiction or a nonresident who is a student or worker within the other jurisdiction;
- (IV) If the offender or sex offender moves from this State to another jurisdiction, the duty to register with the appropriate law enforcement agency in the other jurisdiction;
- (V) The duty to notify the local law enforcement agency for the jurisdiction in which the offender or sex offender now resides, in person, and the jurisdiction in which the offender or sex offender formerly resided, in person or in writing, if the offender or sex offender changes the address at which the offender or sex offender resides, including if the offender or sex offender moves from this State to another jurisdiction, or changes the primary address at which the offender or sex offender is a student or worker; and
- (VI) The duty to notify immediately the appropriate local law enforcement agency if the offender or sex offender is, expects to be or becomes enrolled as a student at an institution of higher education or changes the date of commencement or termination of the offender or sex offender's enrollment at an institution of higher education or if the offender or sex offender is, expects to be or becomes a worker at an institution of higher education or changes the date of commencement or termination of the offender or sex offender's work at an institution of higher education; and
- (2) Require the offender or sex offender to read and sign a form stating that the requirements for registration have been explained and that the offender or sex offender understands the requirements for registration, and to forward the form to the Central Repository.
  - (b) The Central Repository shall:
    - (1) Update the record of registration for the offender or sex offender;
- (2) [Provide] Except as otherwise provided in section 11 of this act, provide community notification concerning the offender or sex offender pursuant to the provisions of NRS 179D.475; and

- (3) Provide notification concerning the offender or sex offender to the appropriate local law enforcement agencies and, if the offender or sex offender will reside upon release in a jurisdiction which is outside of this State, to the appropriate law enforcement agency in that jurisdiction.
- 4. The failure to provide an offender or sex offender with the information or confirmation form required by paragraph (a) of subsection 3 does not affect the duty of the offender or sex offender to register and to comply with all other provisions for registration.
- 5. If the Central Repository receives notice from another jurisdiction or the Federal Bureau of Investigation that an offender or sex offender is now residing or is a student or worker within this State, the Central Repository shall:
- (a) Immediately provide notification concerning the offender or sex offender to the appropriate local law enforcement agencies;
  - (b) Establish a record of registration for the offender or sex offender; and
- (c) Immediately provide community notification concerning the offender or sex offender pursuant to the provisions of NRS 179D.475.
  - Sec. 21. NRS 179D.490 is hereby amended to read as follows:
- 179D.490 1. An offender convicted of a crime against a child or a sex offender shall comply with the provisions for registration for as long as the offender or sex offender resides or is present within this State or is a nonresident offender or sex offender who is a student or worker within this State, unless the period of time during which the offender or sex offender has the duty to register is reduced pursuant to the provisions of this section.
- 2. Except as otherwise provided in subsection 3  $\frac{1}{1}$  and section 12 of this act, the full period of registration is:
  - (a) Fifteen years, if the offender or sex offender is a Tier I offender;
- (b) Twenty-five years, if the offender or sex offender is a Tier II offender; and
- (c) The life of the offender or sex offender, if the offender or sex offender is a Tier III offender,
- ⇒ exclusive of any time during which the offender or sex offender is incarcerated or confined.
- 3. If an offender or sex offender complies with the provisions for registration:
- (a) For an interval of at least 10 consecutive years, if the offender or sex offender is a Tier I offender; or
- (b) For an interval of at least 25 consecutive years, if the offender or sex offender is a Tier III offender adjudicated delinquent for the offense which required registration as an offender or sex offender,
- → during which the offender or sex offender is not convicted of an offense for which imprisonment for more than 1 year may be imposed, is not convicted of a sexual offense, successfully completes any periods of supervised release, probation or parole, and successfully completes a sex offender treatment program certified by the State or by the Attorney General of the United States,

the offender or sex offender may file a petition to reduce the period of time during which the offender or sex offender has a duty to register with the district court in whose jurisdiction the offender or sex offender resides or, if he or she is a nonresident offender or sex offender, in whose jurisdiction the offender or sex offender is a student or worker. For the purposes of this subsection, registration begins on the date that the Central Repository or appropriate agency of another jurisdiction establishes a record of registration for the offender or sex offender or the date that the offender or sex offender is released, whichever occurs later.

- 4. If the offender or sex offender satisfies the requirements of subsection 3, the court shall hold a hearing on the petition at which the offender or sex offender and any other interested person may present witnesses and other evidence. If the court determines from the evidence presented at the hearing that the offender or sex offender satisfies the requirements of subsection 3, the court shall:
- (a) If the offender or sex offender is a Tier I offender, reduce the period of time during which the offender or sex offender is required to register by 5 years; and
- (b) If the offender or sex offender is a Tier III offender adjudicated delinquent for the offense which required registration as an offender or sex offender, reduce the period of time during which the offender or sex offender is required to register from the life of the offender or sex offender to that period of time for which the offender or sex offender meets the requirements of subsection 3.

Sec. 22. NRS 62F.200, 62F.220 and 62F.260 are hereby repealed.

### TEXT OF REPEALED SECTIONS

62F.200 "Sexual offense" defined.

- 1. As used in this section and NRS 62F.220 and 62F.260, unless the context otherwise requires, "sexual offense" means:
  - (a) Sexual assault pursuant to NRS 200.366;
  - (b) Battery with intent to commit sexual assault pursuant to NRS 200.400;
  - (c) Lewdness with a child pursuant to NRS 201.230; or
  - (d) An attempt or conspiracy to commit an offense listed in this section.
- 2. The term does not include an offense involving consensual sexual conduct if the victim was at least 13 years of age and the offender was not more than 4 years older than the victim at the time of the commission of the offense.
- 62F.220 Certain duties of juvenile court with respect to juvenile sex offenders; jurisdiction of juvenile court not terminated until child no longer subject to registration and community notification.
- 1. If a child who is 14 years of age or older is adjudicated delinquent for an unlawful act that would have been a sexual offense if committed by an adult, the juvenile court shall:

- (a) Notify the Central Repository of the adjudication of the child, so the Central Repository may carry out any provisions for registration of the child pursuant to NRS 179D.010 to 179D.550, inclusive; and
- (b) Inform the child and the parent or guardian of the child that the child is subject to registration and community notification pursuant to NRS 179D.010 to 179D.550, inclusive.
- 2. The juvenile court may not terminate its jurisdiction concerning the child for the purposes of carrying out the provisions of this section and NRS 62F.200 and 62F.260 until the child is no longer subject to registration and community notification as a juvenile sex offender pursuant to this section and NRS 62F.200 and 62F.260.
- 62F.260 Records not sealed during period of registration and community notification. The records relating to a child must not be sealed pursuant to the provisions of NRS 62H.100 to 62H.170, inclusive, while the child is subject to registration and community notification as a juvenile sex offender pursuant to NRS 179D.010 to 179D.550, inclusive.

Senator Segerblom moved the adoption of the amendment.

Remarks by Senator Segerblom.

Amendment No. 301 to Senate Bill No. 472 restores current statutory language that was mistakenly stricken in section 17(2) of the bill to clarify that the term "conviction" applies only to juveniles who are 14 years of age or older at the time of their offense and so may be subject to community notification requirements.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 438.

Bill read second time.

The following amendment was proposed by the Committee on Judiciary:

Amendment No. 296.

SUMMARY—Revises provisions relating to time shares. (BDR 10-992)

AN ACT relating to time shares; authorizing a representative to associate with one or more developers; amending provisions relating to the licensing and registration of representatives; prohibiting a representative from engaging in certain acts related to inducing persons to attend a sales presentation; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law provides for the registration and regulation of a "representative," defined as a person who, on behalf of a developer of a time share, induces other persons to attend a sales presentation. (NRS 119A.120, 119A.240, 119A.260) Under existing law, such a representative is required to register with the Real Estate Division of the Department of Business and Industry. (NRS 119A.240) Each application for registration as a representative must include certain information and be accompanied by a fee of \$100. (NRS 119A.240, 119A.360)

Sections 1 and 2 of this bill authorize a representative to associate with one or more developers. Section 2 further amends existing law governing the registration of a representative to require each application to include: (1) proof that the applicant operates at a fixed location, if the applicant is associated with more than one developer; (2) a complete set of the fingerprints of the applicant; and (3) written permission authorizing the Division to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for its report on the criminal history of the applicant and for submission to the Federal Bureau of Investigation for its report on the criminal history of the applicant.

Existing law sets forth the prohibited acts of representatives. (NRS 119A.260) Section 3 of this bill prohibits a representative from: (1) making any material misrepresentation; (2) making any false promises of a character likely to induce other persons to attend a promotional meeting; (3) engaging in any fraudulent, misleading or oppressive [sales] techniques or tactics [1] to induce or solicit other persons to attend a promotional meeting; or (4) failing to disclose to a person the representative's purpose to induce the person to attend a promotional meeting.

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

Section 1. NRS 119A.120 is hereby amended to read as follows:

119A.120 "Representative" means a person who is not a sales agent and who, on behalf of [a developer,] one or more developers, induces other persons to attend a sales presentation. The term does not include a person who only performs clerical tasks, arranges appointments set up by others or prepares or distributes promotional materials.

- Sec. 2. NRS 119A.240 is hereby amended to read as follows:
- 119A.240 1. The Administrator shall register as a representative each applicant who:
- (a) Submits proof satisfactory to the Division that the applicant has a reputation for honesty, trustworthiness and competence;
  - (b) Applies for registration in the manner provided by the Division;
  - (c) Submits the statement required pursuant to NRS 119A.263; [and]
- (d) Designates the developer with whom the applicant will associate the application;
  - (e) Lists any other developer with whom the applicant is associated, if any;
- (f) Submits proof satisfactory to the Division that the applicant operates at a fixed location, if the applicant is associated with more than one developer; and
  - (g) Pays the fees provided for in this chapter.
- 2. An application for registration as a representative must include the social security number of the applicant.
- 3. Each applicant must, as part of his or her application and at the applicant's own expense:
- (a) Arrange to have a complete set of his or her fingerprints taken by a law enforcement agency or other authorized entity acceptable to the Division; and

- (b) Submit to the Division:
- (1) A completed fingerprint card and written permission authorizing the Division to submit the applicant's fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for a report on the applicant's background and to such other law enforcement agencies as the Division deems necessary; or
- (2) Written verification, on a form prescribed by the Division, stating that the fingerprints of the applicant were taken and directly forwarded electronically or by another means to the Central Repository and that the applicant has given written permission to the law enforcement agency or other authorized entity taking the fingerprints to submit the fingerprints to the Central Repository for submission to the Federal Bureau of Investigation for a report on the applicant's background and to such other law enforcement agencies as the Division deems necessary.
  - 4. The Division may:
- (a) Unless the applicant's fingerprints are directly forwarded pursuant to subparagraph (2) of paragraph (b) of subsection 3, submit those fingerprints to the Central Repository for submission to the Federal Bureau of Investigation and to such other law enforcement agencies as the Division deems necessary; and
- (b) Request from each such agency any information regarding the applicant's background as the Division deems necessary.
- 5. A representative is not required to be licensed pursuant to the provisions of chapter 645 of NRS.
  - Sec. 3. NRS 119A.260 is hereby amended to read as follows:
- 119A.260 1. A representative shall not negotiate the sale of, or discuss prices of, a time share. A representative may only induce and solicit persons to attend promotional meetings for the sale of time shares and distribute information on behalf of a developer [.] with whom he or she is associated.
- 2. The representative's activities must strictly conform to the methods for the procurement of prospective purchasers which have been approved by the Division.
- 3. The representative shall comply with any applicable standards for conducting business as are applied to real estate brokers and salespersons pursuant to chapter 645 of NRS and the regulations adopted pursuant thereto.
  - 4. A representative shall not:
  - (a) Make any material misrepresentation;
- (b) Make any false promises of a character likely to induce other persons to attend a promotional meeting;
- (c) Engage in any fraudulent, misleading or oppressive <del>[sales]</del> techniques or tactics <del>[;]</del> to induce or solicit other persons to attend a promotional <u>meeting</u>; or
- (d) Fail to disclose to a person the representative's purpose to induce the person to attend a promotional meeting.

- 5. A representative shall not make targeted solicitations of purchasers or prospective purchasers of time shares in another project with which the representative is not associated. A developer or project broker shall not pay or offer to pay a representative a bonus or other type of special compensation to engage in such activity.
  - Sec. 4. This act becomes effective on July 1, 2017.

Senator Segerblom moved the adoption of the amendment.

Remarks by Senator Segerblom.

Amendment No. 296 to Senate Bill No. 438 removes the word "sales" and inserts the phrase "to induce or solicit other persons to attend a promotional meeting."

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

#### MOTIONS. RESOLUTIONS AND NOTICES

Senator Woodhouse moved that Senate Bills Nos. 227, 438 be taken from the General File and re-referred to the Committee on Finance, upon return from reprint.

Motion carried.

Senator Ford moved that Senate Bill No. 484 be taken from the General File and placed on the Secretary's desk.

Motion carried.

### GUESTS EXTENDED PRIVILEGE OF SENATE FLOOR

On request of Senator Denis, the privilege of the floor of the Senate Chamber for this day was extended to Fatima Azari, Thomas Dunlap, Noemi Jimenez, Hieu Le, Daniel Little, Jose Montoya, Karen Preciado, Dr. Michael D. Richards and Elizabeth Zuniga.

On request of Senator Hammond, the privilege of the floor of the Senate Chamber for this day was extended to Aileen Cohen, Jessica Green, Brad Johnson, Eileen Marks, Alexandra McLeod, Jenna Mullin, Michael Nunez, Matthew Park, Sara Suter and Loren Young.

On request of Senator Ratti, the privilege of the floor of the Senate Chamber for this day was extended to Dan Ledbetter.

On request of Senator Segerblom, the privilege of the floor of the Senate Chamber for this day was extended to Katelyn Abbot, Christa Casillas, Kaycee Green, Lisa Sill, Jamie Smith, Andrew Sullivan and Dayana Vicente-Sosa.

Senator Ford moved that the Senate adjourn until Thursday, April 20, 2017, at 11:00 a.m.

Motion carried.

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Senate adjourned at 12:53 p.m.

Approved:

MARK A. HUTCHISON President of the Senate

Attest: CLAIRE J. CLIFT

Secretary of the Senate