ASSEMBLY BILL NO. 328-ASSEMBLYWOMAN GORELOW

MARCH 18, 2019

Referred to Committee on Commerce and Labor

SUMMARY—Revises provisions relating to physician assistants. (BDR 54-847)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Yes.

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

AN ACT relating to professions; authorizing a physician assistant to bill and be reimbursed by a patient directly; providing that physician assistants are not required to be supervised by a physician or an osteopathic physician when performing medical services; prescribing the services that a physician assistant is required or authorized to perform; increasing the membership of the Board of Medical Examiners and the State Board of Osteopathic Medicine; requiring two members of each of the Boards to be persons licensed to practice as a physician assistant in this State; providing certain exemptions from licensure and regulation by the Boards; revising provisions relating to a physician assistant whose license is on inactive status; revising provisions relating to the issuance of a license to practice as a physician assistant; prohibiting the respective Boards from requiring certain certifications before a person may renew a license to practice as a physician assistant; revising provisions relating to licensure by endorsement to practice as a physician assistant; authorizing certain unlicensed persons to use the title "physician assistant (inactive)"; and providing other matters properly relating thereto.





Legislative Counsel's Digest:

Existing law provides that a physician assistant is a person who: (1) is a graduate of an academic program approved by the Board of Medical Examiners or the State Board of Osteopathic Medicine or who, by general education, practical training and experience determined to be satisfactory by the respective Board, is qualified to perform medical services under the supervision of a supervising physician or a supervising osteopathic physician, as applicable; and (2) has been issued a license by the respective Board. (NRS 630.015, 633.107) Sections 8 and 19 of this bill remove the requirement that a physician assistant perform medical services under the supervision of a supervising physician or a supervising osteopathic physician, as applicable. Existing law defines the terms "supervising physician" and "supervising osteopathic physician" to mean a physician or an osteopathic physician who supervises a physician assistant. (NRS 630.025, 633.123) Section 39 of this bill repeals these definitions and repeals various provisions governing supervising osteopathic physicians. Sections 2, 9, 10, 14, 15, 20, 23, 24 and 28-38 of this bill make conforming changes by removing references to supervising physicians, supervising osteopathic physicians and physician assistants being supervised.

Existing law authorizes a physician assistant to perform such medical services as the physician assistant is authorized to perform by his or her supervising physician or supervising osteopathic physician. (NRS 630.271, 633.432) **Sections 8 and 19** require a physician assistant to: (1) obtain the informed consent of a patient or a patient's family before performing any procedure; (2) register with the Drug Enforcement Administration of the United States Department of Justice and the State Board of Pharmacy before prescribing and dispensing a controlled substance; and (3) collaborate with providers of health care who are providing care to a patient of the physician assistant. **Sections 8 and 19** authorize a physician assistant to perform certain medical services and activities, including: (1) providing his or her signature when a signature by a physician or an osteopathic physician is required if providing such a signature is within the authorized scope of the physician assistant; and (2) prescribing and dispensing drugs and certain controlled substances.

Existing law prohibits a physician assistant governed by chapter 633 of NRS from billing a patient separately from his or her supervising osteopathic physician. (NRS 633.442) **Section 24** removes this prohibition. **Sections 1 and 24** of this bill authorize: (1) a physician assistant to bill a patient directly; and (2) a patient to reimburse a physician assistant directly.

Existing law provides that the provisions governing physicians, physician assistants, medical assistants, perfusionists and practitioners of respiratory care, and osteopathic medicine do not apply to certain persons and in certain situations. (NRS 630.047, 633.171) **Sections 3 and 16** of this bill provide that the provisions governing physicians, physician assistants, medical assistants, perfusionists and practitioners of respiratory care, and osteopathic medicine do not apply to: (1) the performance of medical services by a student as part of a program of study to be a physician assistant accredited by the Accreditation Review Commission on Education for the Physician Assistant if the student is enrolled in the program and performs medical services under the supervision of a physician assistant; and (2) a physician assistant of any division or department of the United States in the discharge of his or her official duties.

Existing law provides: (1) that the Board of Medical Examiners consists of nine members appointed by the Governor; and (2) the requirements for membership on the Board. (NRS 630.050, 630.060) **Section 4** of this bill increases the membership of the Board to 11 members. **Section 5** of this bill requires two members of the Board to be persons who are licensed to practice as a physician assistant in this State. **Section 6** of this bill makes a conforming change. Existing law provides: (1) that the State Board of Osteopathic Medicine consists of seven members appointed





by the Governor; and (2) the requirements for membership on the Board. (NRS 633.181, 633.191) **Section 17** of this bill increases the membership of the Board to nine members. **Section 18** of this bill requires two members of the Board to be persons who are licensed to practice as a physician assistant in this State. **Section 27** of this bill makes a conforming change.

Existing law authorizes a person holding a license under the provisions governing physicians, physician assistants, medical assistants, perfusionists and practitioners of respiratory care, and osteopathic medicine to place his or her license on an inactive status. (NRS 630.255, 633.491) **Section 7** of this bill authorizes the Board of Medical Examiners to place any physician assistant who notifies the Board in writing on inactive status. **Sections 7 and 26** of this bill: (1) prohibit a physician assistant whose license is on inactive status from practicing as a physician assistant; and (2) provide that a physician assistant whose license is on inactive status who practices as a physician assistant is considered to be practicing without a license. **Sections 7 and 26** require the Board of Medical Examiners and the State Board of Osteopathic Medicine to excuse a physician assistant whose license is on inactive status from paving certain fees.

Existing law authorizes the Board of Medical Examiners and the State Board of Osteopathic Medicine to issue a license to practice as a physician assistant to an applicant who is qualified under the regulations of the respective Boards. (NRS 630.273, 633.433) **Sections 9 and 20** of this bill authorize the respective Boards to issue a license to practice as a physician assistant to an applicant who: (1) meets the qualifications set out in chapter 630 or 633 of NRS; and (2) is qualified under the regulations of the respective Boards. **Sections 9 and 20** additionally authorize the respective Boards to issue a license to a person who passes the Physician Assistant National Certifying Examination.

Existing law requires the Board of Medical Examiners to adopt regulations regarding the licensure of a physician assistant, including regulations concerning the renewal of a physician assistant's license. (NRS 630.275) Existing law authorizes a holder of a license to practice as a physician assistant issued under chapter 633 of NRS to renew the license annually. (NRS 633.471) **Sections 10 and 25** of this bill prohibit the respective Boards from requiring a physician assistant to maintain or receive certification by the National Commission on Certification of Physician Assistants or by some other nationally recognized organization for the accreditation of physician assistants to satisfy any continuing education requirements for the renewal of a license.

Existing law authorizes an applicant for the issuance of a license by endorsement to practice as a physician assistant to submit to the Board of Medical Examiners an application for such a license if the applicant satisfies certain requirements, including being certified in a specialty recognized by the American Board of Medical Specialties. (NRS 630.2751, 630.2752) Existing law authorizes an applicant for the issuance of a license by endorsement to practice as a physician assistant to submit to the State Board of Osteopathic Medicine an application for such a license if the applicant satisfies certain requirements, including being certified in a specialty recognized by the American Board of Medical Specialties or the American Osteopathic Association. (NRS 633.4335, 633.4336) **Sections 11, 12, 21 and 22** of this bill remove the requirement that an applicant for the issuance of a license by endorsement be certified in a specialty recognized by these organizations.

Existing law provides that it is unlawful for any person to hold himself or herself out as a physician assistant without being licensed by the Board of Medical Examiners or the State Board of Osteopathic Medicine. (NRS 633.400, 633.741) Sections 13 and 28 of this bill authorize a person who meets the qualifications to be licensed as a physician assistant, who does not possess such a current license and who is certified by the National Commission on Certification of Physician



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Assistants to use the title "physician assistant (inactive)" and further provide that such a person may not act or practice as a physician assistant unless they possess a current license.

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

Section 1. Chapter 630 of NRS is hereby amended by adding thereto a new section to read as follows:

A physician assistant may bill a patient directly and may be reimbursed by a patient directly.

Sec. 2. NRS 630.015 is hereby amended to read as follows:

630.015 "Physician assistant" means a person who is a graduate of an academic program approved by the Board or who, by general education, practical training and experience determined to be satisfactory by the Board, is qualified to perform medical services [under the supervision of a supervising physician] and who has been issued a license by the Board.

- **Sec. 3.** 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) Physicians who are temporarily exempt from licensure pursuant to NRS 630.2665 and are practicing medicine within the scope of the exemption;
- (e) 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;
- (f) 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;

- (g) 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;
- (h) 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;
- (i) A person who is employed by a physician and provides respiratory care or services as a perfusionist under the supervision of that physician;
- (j) The maintenance of medical equipment for perfusion or respiratory care that is not attached to a patient; [and]
- (k) 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 [...];
- (l) The performance of medical services by a student as part of a program of study to be a physician assistant that is accredited by the Accreditation Review Commission on Education for the Physician Assistant or its successor organization if the student is enrolled in the program and performs medical services only under the supervision of a physician assistant; and
- (m) A physician assistant of any division or department of the United States in the discharge of his or her official duties unless licensure by a state is required by the division or department of the United States.
- 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 or practitioner of respiratory care in cases of emergency.
 - (b) The domestic administration of family remedies.
 - **Sec. 4.** NRS 630.050 is hereby amended to read as follows:
- 630.050 1. The Board of Medical Examiners consists of [nine] 11 members appointed by the Governor.
- 2. No person may be appointed as a member of the Board to serve for more than two consecutive full terms, but a person may be reappointed after the lapse of 4 years.
 - **Sec. 5.** NRS 630.060 is hereby amended to read as follows:
- 630.060 1. Six members of the Board must be persons who are licensed to practice medicine in this State, are actually engaged in the practice of medicine in this State and have resided and practiced medicine in this State for at least 5 years preceding their respective appointments.
- 2. Two members of the Board must be persons who are licensed to practice as a physician assistant in this State, are actually engaged in practicing as a physician assistant in this State and have resided and practiced as a physician assistant in this State for at least 5 years preceding their respective appointments.
- 3. One member of the Board must be a person who has resided in this State for at least 5 years and who represents the interests of persons or agencies that regularly provide health care to patients who are indigent, uninsured or unable to afford health care. This member must not be licensed under the provisions of this chapter.
- [3.] 4. The remaining two members of the Board must be persons who have resided in this State for at least 5 years and who:
 - (a) Are not licensed in any state to practice any healing art;
- (b) Are not the spouse or the parent or child, by blood, marriage or adoption, of a person licensed in any state to practice any healing art:
- (c) Are not actively engaged in the administration of any facility for the dependent as defined in chapter 449 of NRS, medical facility or medical school: and
- (d) Do not have a pecuniary interest in any matter pertaining to the healing arts, except as a patient or potential patient.
- [4.] 5. The members of the Board must be selected without regard to their individual political beliefs.
 - **Sec. 6.** NRS 630.075 is hereby amended to read as follows:
- 630.075 The Board may, by majority vote, select physicians, *physician assistants* and members of the public, who must meet the same qualifications as required for members of the Board, to serve as advisory members of the Board. One or more advisory members may be designated by the Board to assist a committee of its





members in an investigation as provided in NRS 630.311 but may not vote on any matter before the committee. Advisory members may also serve as members of the panel selected to hear charges as provided in NRS 630.339 and may vote on any recommendation made by the panel to the Board.

- **Sec. 7.** NRS 630.255 is hereby amended to read as follows:
- Any licensee who changes the location of his or 630.255 her practice of medicine from this State to another state or country, has never engaged in the practice of medicine in this State after licensure or has ceased to engage in the practice of medicine in this State for 12 consecutive months may be placed on inactive status by order of the Board. Any physician assistant who notifies the Board in writing on a form prescribed by the Board may be placed on inactive status by order of the Board.
- Each inactive licensee shall maintain a permanent mailing address with the Board to which all communications from the Board to the licensee must be sent. An inactive licensee who changes his or her permanent mailing address shall notify the Board in writing of the new permanent mailing address within 30 days after the change. If an inactive licensee fails to notify the Board in writing of a change in his or her permanent mailing address within 30 days after the change, the Board may impose upon the licensee a fine not to exceed \$250.
- 3. In addition to the requirements of subsection 2, any licensee who changes the location of his or her practice of medicine from this State to another state or country shall maintain an electronic mail address with the Board to which all communications from the Board to him or her may be sent.
- An inactive physician assistant shall not practice as a physician assistant. The Board shall consider an inactive physician assistant who practices as a physician assistant to be practicing without a license which is grounds for disciplinary action against the physician assistant in accordance with the regulations adopted by the Board pursuant to NRS 630.275.
- The Board shall exempt an inactive physician assistant from paying the applicable fee for biennial registration of a license.
- 6. Before resuming the practice of medicine in this State, the inactive licensee must:
- (a) Notify the Board in writing of his or her intent to resume the practice of medicine in this State;
- 42 (b) File an affidavit with the Board describing the activities of 43 the licensee during the period of inactive status; 44
 - (c) Complete the form for registration for active status;
 - (d) Pay the applicable fee for biennial registration; and



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- (e) Satisfy the Board of his or her competence to practice medicine.
 - [5.] 7. If the Board determines that the conduct or competence of the licensee during the period of inactive status would have warranted denial of an application for a license to practice medicine in this State, the Board may refuse to place the licensee on active status.
 - **Sec. 8.** NRS 630.271 is hereby amended to read as follows:
 - 630.271 1. A physician assistant is responsible for the care that he or she provides to a patient.
 - 2. A physician assistant shall:

- (a) Obtain the informed consent of a patient or a patient's family before performing any procedure;
- (b) Register with the Drug Enforcement Administration of the United States Department of Justice, or its successor agency, and the State Board of Pharmacy pursuant to NRS 453.231 before the physician assistant prescribes or dispenses a controlled substance; and
- (c) Collaborate with, consult with or refer to the appropriate provider of health care for the patient, as determined by the physician assistant pursuant to the condition of the patient, the education, practical training and experience of the physician assistant and the standard of care required from the physician assistant under the circumstances.
 - 3. A physician assistant may [perform]:
- (a) **Perform** such medical services [as the physician assistant is authorized to perform by his or her supervising physician.
- 2. The Board and supervising physician shall limit the authority of a physician assistant to
- prescribe controlled substances to those schedules of controlled substances that the supervising physician is authorized to prescribe pursuant to state and federal law.] that the physician assistant is qualified to perform by graduating from an academic program approved by the Board or by his or her education, practical training and experience as determined by the Board. Medical services which may be performed by a physician assistant include, without limitation:
 - (1) Obtaining the history of a patient's health;
 - (2) Performing a physical examination;
- (3) Providing medical treatment, including, without limitation, evaluating and diagnosing a condition of a patient;
- 42 (4) Ordering, performing and interpreting a diagnostic test 43 or a therapeutic procedure;
 - (5) Educating a patient on how to promote the patient's health and prevent disease;





- (6) Providing consultation upon request; and
- (7) Writing a medical order.

- (b) Supervise, delegate and assign a diagnostic test or a therapeutic procedure to personnel who are licensed or unlicensed.
- (c) If within the authorized scope of practice of a physician assistant and to the extent authorized by federal law, certify the health or disability of a patient as required by any local, state or federal program.
- (d) 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 a physician assistant.
- (e) Plan and initiate a therapeutic regimen that includes ordering and prescribing treatment which does not incorporate drugs or controlled substances. Such a therapeutic regimen may include, without limitation:
 - (1) Durable medical equipment;
 - (2) Programs concerning the nutrition of the patient;
- (3) Whole human blood, plasma, blood product or blood derivative for the purpose of injection or transfusion; and
 - (4) Diagnostic services, including, without limitation, home

health care, hospice or physical or occupational therapy.

- (f) Prescribe or order and dispense or administer drugs and medical devices.
 - (g) Upon being registered pursuant to paragraph (b) of subsection 2, prescribe and dispense a substance in schedule II, III, IV or V, as described in chapter 453 of NRS, and any prescription drug. A physician assistant who prescribes, dispenses or administers such substances and prescription drugs:
 - (1) Shall comply with appropriate federal and state laws;
- (2) Shall prescribe, dispense and administer such substances and prescription drugs when:
- (I) The services of a pharmacy or of a person who engages in the practice of pharmacy are not readily available;
 - (II) Such action is in the best interest of the patient; or

(III) In the event of an emergency; and

- (3) Is authorized to dispense any medications that a physician may dispense.
 - 4. As used this in this section:
- (a) "Dangerous drug" has the meaning ascribed to it in NRS 454.201.
 - (b) "Drug" has the meaning ascribed to it in NRS 639.007.
 - (c) "Prescription drug" means:





(1) A controlled substance or dangerous drug that may be dispensed to an ultimate user only pursuant to a lawful prescription; and

(2) Any other substance or drug substituted for such a

controlled substance or dangerous drug.

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(d) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

(e) "Therapeutic regimen" means a program for the treatment of an illness that is integrated into the daily life of the patient.

Sec. 9. NRS 630.273 is hereby amended to read as follows:

- 630.273 *1.* The Board may issue a license to an applicant who *meets the qualifications set forth in this chapter and who* is qualified under the regulations of the Board to perform medical services. [under the supervision of a supervising physician.] The application for a license as a physician assistant must include all information required to complete the application.
- 2. The Board may issue a license to an applicant who has passed the Physician Assistant National Certifying Examination administered by the National Commission on Certification of Physician Assistants or by some other nationally recognized organization for the accreditation of physician assistants.

Sec. 10. NRS 630.275 is hereby amended to read as follows:

- 630.275 The Board shall adopt regulations regarding the licensure of a physician assistant, including, but not limited to:
 - 1. The educational and other qualifications of applicants.
 - 2. The required academic program for applicants.
- 3. The procedures for applications for and the issuance of licenses.
- 4. The procedures deemed necessary by the Board for applications for and the initial issuance of licenses by endorsement pursuant to NRS 630.2751 or 630.2752.
 - 5. The tests or examinations of applicants by the Board.
- 6. The medical services which a physician assistant may perform, except that a physician assistant may not perform those specific functions and duties delegated or restricted by law to persons licensed as dentists, chiropractors, podiatric physicians and optometrists under chapters 631, 634, 635 and 636, respectively, of NRS, or as hearing aid specialists.
- 7. The duration, renewal and termination of licenses, including licenses by endorsement. The Board shall not require a physician assistant to maintain or receive certification by the National Commission on Certification of Physician Assistants or by some other nationally recognized organization for the accreditation of physician assistants to satisfy any continuing education requirements for renewal of licenses.





- 8. The grounds and procedures respecting disciplinary actions against physician assistants.
- 9. [The supervision of medical services of a physician assistant by a supervising physician, including, without limitation, supervision that is performed electronically, telephonically or by fiber optics from within or outside this State or the United States.
- 10.1 A physician assistant's use of equipment that transfers information concerning the medical condition of a patient in this State electronically, telephonically or by fiber optics, including, without limitation, through telehealth, from within or outside this State or the United States.
 - **Sec. 11.** 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 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 holds a corresponding valid and unrestricted license to practice as a physician 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.]
- 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; 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 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 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 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. 12.** 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 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 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; and
- (e)] 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; 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





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 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 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 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. 13.** 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 [:], except that a person who meets the qualifications for licensure to practice as a physician assistant pursuant to this chapter, who does not possess such a current license and who is certified by the National Commission on Certification of Physician Assistants, or its successor organization, may use the title "physician assistant





(inactive)" and shall not act or practice as a physician assistant who is licensed by the Board; or

- (g) 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. 14.** NRS 632.473 is hereby amended to read as follows:
- 632.473 1. A nurse licensed pursuant to the provisions of this chapter, while working at an institution of the Department of Corrections, may treat patients, including the administration of a dangerous drug, poison or related device, pursuant to orders given by a physician assistant if those orders are given pursuant to a protocol approved by the Board of Medical Examiners. [and the supervising physician.] The orders must be cosigned by [the supervising physician or another] a physician within 72 hours after treatment.





- 2. A copy of the protocol under which orders are given by a physician assistant must be available at the institution for review by the nurse.
- 3. This section does not authorize a physician assistant to give orders for the administration of any controlled substance.
 - 4. For the purposes of this section:

- (a) "Physician assistant" means a physician assistant licensed by the Board of Medical Examiners pursuant to chapter 630 of NRS who:
- (1) Is employed at an institution of the Department of Corrections:
- (2) Has been awarded a bachelor's degree from a college or university recognized by the Board of Medical Examiners; and
- (3) Has received at least 40 hours of instruction regarding the prescription of medication as a part of either his or her basic educational qualifications or a program of continuing education approved by the Board of Medical Examiners.
- (b) "Protocol" means the written directions for the assessment and management of specified medical conditions, including the drugs and devices the physician assistant is authorized to order, which the physician assistant [and the supervising physician have agreed upon as] has determined is a basis for [their] his or her practice.
- [(c) "Supervising physician" has the meaning ascribed to it in NRS 630.025.]
 - **Sec. 15.** NRS 633.107 is hereby amended to read as follows:
- 633.107 "Physician assistant" means a person who is a graduate of an academic program approved by the Board or who, by general education, practical training and experience determined to be satisfactory by the Board, is qualified to perform medical services [under the supervision of a supervising osteopathic physician] and who has been issued a license by the Board.
 - **Sec. 16.** NRS 633.171 is hereby amended to read as follows:
 - 633.171 1. This chapter does not apply to:
- (a) The practice of medicine or perfusion pursuant to chapter 630 of NRS, dentistry, chiropractic, podiatry, optometry, respiratory care, faith or Christian Science healing, nursing, veterinary medicine or fitting hearing aids.
- (b) A medical officer of the Armed Forces or a medical officer 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.
- (c) Osteopathic physicians who are called into this State, other than on a regular basis, for consultation or assistance to a physician





licensed in this State, and who are legally qualified to practice in the state where they reside.

- (d) Osteopathic physicians who are temporarily exempt from licensure pursuant to NRS 633.420 and are practicing osteopathic medicine within the scope of the exemption.
- (e) The performance of medical services by a student as part of a program of study to be a physician assistant that is accredited by the Accreditation Review Commission on Education for the Physician Assistant or its successor organization if the student is enrolled in the program and performs medical services only under the supervision of a physician assistant.
- (f) A physician assistant of any division or department of the United States in the discharge of his or her official duties unless licensure by a state is required by the division or department of the United States.
- 2. This chapter does not repeal or affect any law of this State regulating or affecting any other healing art.
 - 3. This chapter does not prohibit:
 - (a) Gratuitous services of a person in cases of emergency.
 - (b) The domestic administration of family remedies.
 - **Sec. 17.** NRS 633.181 is hereby amended to read as follows:
- 633.181 The State Board of Osteopathic Medicine consists of **[seven]** *nine* members appointed by the Governor.
 - **Sec. 18.** NRS 633.191 is hereby amended to read as follows:
 - 633.191 1. Five members of the Board must:
 - (a) Be licensed under this chapter;
- (b) Be actually engaged in the practice of osteopathic medicine in this State; and
- (c) Have been so engaged in this State for a period of more than 5 years preceding their appointment.
 - 2. Two members of the Board must:
- (a) Be licensed under this chapter to practice as a physician assistant in this State;
- (b) Be actually engaged in practicing as a physician assistant in this State; and
- (c) Have been so engaged in this State for a period of more than 5 years preceding their respective appointments.
- 3. One member of the Board must be a resident of the State of Nevada and must represent the interests of persons or agencies that regularly provide health care to patients who are indigent, uninsured or unable to afford health care. This member must not be licensed under the provisions of this chapter.
- [3.] 4. The remaining member of the Board must be a resident of the State of Nevada who is:





- (a) Not licensed in any state to practice any healing art;
- (b) Not the spouse or the parent or child, by blood, marriage or adoption, of a person licensed in any state to practice any healing art; and
- (c) Not actively engaged in the administration of any medical facility or facility for the dependent as defined in chapter 449 of NRS.
 - **Sec. 19.** NRS 633.432 is hereby amended to read as follows:
- 633.432 1. A physician assistant is responsible for the care that he or she provides to a patient.
 - 2. A physician assistant shall:

- (a) Obtain the informed consent of a patient or a patient's family before performing any procedure;
- (b) Register with the Drug Enforcement Administration of the United States Department of Justice, or its successor agency and the State Board of Pharmacy pursuant to NRS 453.231 before the physician assistant prescribes or dispenses a controlled substance; and
- (c) Collaborate with, consult with or refer to the appropriate provider of health care for the patient, as determined by the physician assistant pursuant to the condition of the patient, the education, practical training and experience of the physician assistant and the standard of care required from the physician assistant under the circumstances.
 - 3. A physician assistant may [perform]:
 - (a) **Perform** such medical services [as:
- (a) The physician assistant is authorized to perform by his or her supervising osteopathic physician; and
- (b) Are within the supervising osteopathic physician's scope of practice.
- 2. The Board and supervising osteopathic physician shall limit the authority of a physician assistant to prescribe controlled substances to those schedules of controlled substances that the supervising osteopathic physician is authorized to prescribe pursuant to state and federal law.] that the physician assistant is qualified to perform by graduating from an academic program approved by the Board or by his or her education, practical training and experience as determined by the Board. Medical services which may be performed by a physician assistant include, without limitation:
 - (1) Obtaining the history of a patient's health;
 - (2) Performing a physical examination;
- (3) Providing medical treatment, including, without limitation, evaluating and diagnosing a condition of a patient;





- (4) Ordering, performing and interpreting a diagnostic test or a therapeutic procedure;
- (5) Educating a patient on how to promote the patient's health and prevent disease;
 - (6) Providing consultation upon request; and
 - (7) Writing a medical order.

- (b) Supervise, delegate and assign a diagnostic test or a therapeutic procedure to personnel who are licensed or unlicensed.
- (c) If within the authorized scope of practice of a physician assistant and to the extent authorized by federal law, certify the health or disability of a patient as required by any local, state or federal program.
- (d) Provide his or her signature, certification, stamp, verification or endorsement when a signature, certification, stamp, verification or endorsement by an osteopathic physician is required, if providing such a signature, certification, stamp, verification or endorsement is within the authorized scope of practice of a physician assistant.
- (e) Plan and initiate a therapeutic regimen that includes ordering and prescribing treatment which does not incorporate drugs or controlled substances. Such a therapeutic regimen may include, without limitation:
 - (1) Durable medical equipment;
 - (2) Programs concerning the nutrition of the patient;
- (3) Whole human blood, plasma, blood product or blood derivative for the purpose of injection or transfusion; and
- (4) Diagnostic services, including, without limitation, home health care, hospice or physical or occupational therapy.
- (f) Prescribe or order and dispense or administer drugs and medical devices.
- (g) Upon being registered pursuant to paragraph (b) of subsection 2, prescribe and dispense a substance in schedule II, III, IV or V, as described in chapter 453 of NRS, and any prescription drug. A physician assistant who prescribes, dispenses or administers such substances and prescription drugs:
 - (1) Shall comply with appropriate federal and state laws;
- (2) Shall prescribe, dispense and administer such substances and prescription drugs when:
- (I) The services of a pharmacy or of a person who engages in the practice of pharmacy are not readily available;
 - (II) Such action is in the best interest of the patient; or
 - (III) In the event of an emergency; and
- (3) Is authorized to dispense any medications that an osteopathic physician may dispense.





4. As used this in this section:

- (a) "Dangerous drug" has the meaning ascribed to it in NRS 454.201.
 - (b) "Drug" has the meaning ascribed to it in NRS 639.007.
 - (c) "Prescription drug" means:
- (1) A controlled substance or dangerous drug that may be dispensed to an ultimate user only pursuant to a lawful prescription; and
- (2) Any other substance or drug substituted for such a controlled substance or dangerous drug.
- (d) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
- (e) "Therapeutic regimen" means a program for the treatment of an illness that is integrated into the daily life of the patient.

Sec. 20. NRS 633.433 is hereby amended to read as follows:

- 633.433 *I*. The Board may issue a license as a physician assistant to an applicant who *meets the qualifications set forth in this chapter and who* is qualified under the regulations of the Board to perform medical services. [under the supervision of a supervising osteopathic physician.] The application for a license as a physician assistant must include all information required to complete the application.
- 2. The Board may issue a license to practice as a physician assistant to an applicant who has passed the Physician Assistant National Certifying Examination administered by the National Commission on Certification of Physician Assistants or by some other nationally recognized organization for the accreditation of physician assistants.
 - **Sec. 21.** NRS 633.4335 is hereby amended to read as follows:
- 633.4335 1. The Board may issue a license by endorsement to practice as a physician 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 holds a corresponding valid and unrestricted license to practice as a physician assistant in the District of Columbia or any state or territory of the United States. I: and
- (b) Is certified in a specialty recognized by the American Board of Medical Specialties or the American Osteopathic Association.]
- 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; 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 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 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 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. 22.** NRS 633.4336 is hereby amended to read as follows:
- 633.4336 1. The Board may issue a license by endorsement to practice as a physician 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 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; and





- (e)] 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; 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 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 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 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 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. 23.** NRS 633.434 is hereby amended to read as follows:
 - 633.434 The Board shall adopt regulations regarding the licensure of a physician assistant, including, without limitation:
 - 1. The educational and other qualifications of applicants.
 - 2. The required academic program for applicants.
 - 3. The procedures for applications for and the issuance of licenses.
- 4. The procedures deemed necessary by the Board for applications for and the issuance of initial licenses by endorsement pursuant to NRS 633.4335 and 633.4336.
 - 5. The tests or examinations of applicants by the Board.
- 6. The medical services which a physician assistant may perform, except that a physician assistant may not perform osteopathic manipulative therapy or those specific functions and duties delegated or restricted by law to persons licensed as dentists, chiropractors, doctors of Oriental medicine, podiatric physicians, optometrists and hearing aid specialists under chapters 631, 634, 634A, 635, 636 and 637B, respectively, of NRS.
- 7. The grounds and procedures respecting disciplinary actions against physician assistants.
- [8. The supervision of medical services of a physician assistant by a supervising osteopathic physician.]
 - **Sec. 24.** NRS 633.442 is hereby amended to read as follows:
 - 633.442 1. A physician 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 a physician assistant.
- 2. A physician assistant [shall not] may bill a patient [separately from his or her supervising osteopathic physician.] directly and may be reimbursed by a patient directly.
 - **Sec. 25.** NRS 633.471 is hereby amended to read as follows:
- 633.471 1. Except as otherwise provided in subsection 9 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 year;
- (d) [Submitting] Subject to subsection 10, 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. 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 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 require each holder of a license to practice osteopathic medicine to complete a course of instruction within 2 years after initial licensure that provides at least 2 hours of instruction on evidence-based suicide prevention and awareness as described in subsection 7.
- 5. 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.
- 6. 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 at least 2 hours of continuing education credits in ethics, pain management or addiction care.
- 7. The Board shall require each holder of a license to practice osteopathic medicine to receive as a portion of his or her continuing





education at least 2 hours of instruction every 4 years on evidencebased suicide prevention and awareness which may include, without limitation, instruction concerning:

- (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.
- 8. A holder of a license to practice osteopathic medicine may not substitute the continuing education credits relating to suicide prevention and awareness required by this section for the purposes of satisfying an equivalent requirement for continuing education in ethics.
- 9. 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.
- 10. The Board shall not require a physician assistant to maintain or receive certification by the National Commission on Certification of Physician Assistants or by some other nationally recognized organization for the accreditation of physical assistants to satisfy the continuing education requirement pursuant to paragraph (d) of subsection 1.
 - Sec. 26. 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 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 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 whose license has been placed on inactive status:
 - (a) Is not required to annually renew the license.
- (b) [Shall] Except as otherwise provided in subsection 6, shall annually pay the inactive license fee prescribed by NRS 633.501.
- (c) Shall not practice osteopathic medicine or practice as a physician assistant in this State.
- 5. The Board shall consider a physician assistant whose license has been placed on inactive status who practices as a physician assistant in this State to be practicing without a license which is grounds for disciplinary action against the physician assistant in accordance with the regulations adopted by the Board pursuant to NRS 633.434.
- 6. The Board shall exempt a physician assistant whose license has been placed on inactive status from paying the inactive license fee or the annual license renewal fee for a physician assistant prescribed by NRS 633.501.
- 7. An osteopathic physician or physician assistant whose license is on inactive status and who wishes to renew his or her license to practice osteopathic medicine or license to practice as a physician 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.
 - (c) Comply with all other requirements for renewal.
 - Sec. 27. NRS 633.660 is hereby amended to read as follows:
- 633.660 The Board may delegate its authority to conduct a hearing concerning the discipline of a licensee pursuant to chapter 622A of NRS to:
 - 1. A person; or
- 2. A group of such members of the Board as the President of the Board may designate from time to time, which group must consist of not less than three members of the Board, at least one of





whom was appointed to the Board pursuant to subsection [2] 3 or [3] 4 of NRS 633.191.

Sec. 28. 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 chapter;
- (2) As a physician 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 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 use any other term indicating or implying that he or she is a physician assistant, unless the person has been licensed by the Board as provided in this chapter [;], except that a person who meets the qualifications for licensure to practice as a physician assistant pursuant to this chapter, who does not possess such a current license and who is certified by the National Commission on Certification of Physician Assistants, or its successor organization, may use the title "physician assistant (inactive)" and shall not act or practice as a physician assistant who is licensed by the Board as provided in this chapter; or
- (g) [Supervise a person as] Collaborate with a physician 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 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, 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.
- (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. 29. 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;
- 2. 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;
- 3. An advanced practice registered nurse who has been authorized to prescribe controlled substances, poisons, dangerous drugs and devices;
 - 4. A physician 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 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.

Sec. 30. NRS 639.1373 is hereby amended to read as follows:

- 639.1373 1. A physician assistant licensed pursuant to chapter 630 or 633 of NRS may, if authorized by the Board, 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] only to the extent and subject to the limitations specified in the registration certificate issued to the physician assistant by the Board pursuant to this section.
- 2. Each physician assistant licensed pursuant to chapter 630 or 633 of NRS who is authorized by his or her physician 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 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 license issued by the Board of Medical Examiners or by the State Board of Osteopathic Medicine authorizes the physician 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 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 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 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 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 is to operate;
 - (b) The population of that area;

- (c) The experience and training of the physician 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 physician" includes a supervising osteopathic physician as defined in chapter 633 of NRS.]
 - **Sec. 31.** NRS 41.504 is hereby amended to read as follows:
- 41.504 1. Any physician, physician assistant or registered nurse who in good faith gives instruction [or provides supervision] to an emergency medical attendant, physician 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, registered nurse or licensed practical nurse who obeys an instruction given by a physician, physician 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. 32. NRS 433A.170 is hereby amended to read as follows:
- 433A.170 Except as otherwise provided in this section, the administrative officer of a facility operated by the Division or of any other public or private mental health facility or hospital shall not accept an application for an emergency admission under NRS 433A.160 unless that application is accompanied by a certificate of a licensed psychologist, a physician, a physician assistant, funder





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 that he or she 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. The certificate required by this section may be obtained from a licensed psychologist, physician, physician assistant, clinical social worker, advanced practice registered nurse or accredited agent of the Department who is employed by the public or private mental health facility or hospital to which the application is made.

Sec. 33. NRS 433A.195 is hereby amended to read as follows: A licensed physician on the medical staff of a 433A.195 facility operated by the Division or of any other public or private mental health facility or hospital may release a person admitted pursuant to NRS 433A.160 upon completion of a certificate which meets the requirements of NRS 433A.197 signed by a licensed physician on the medical staff of the facility or hospital, a physician assistant, [under the supervision of a psychiatrist,] psychologist, 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 personally observed and examined the person and that he or she has

concluded that the person is not a person with a mental illness.

Sec. 34. NRS 433A.200 is hereby amended to read as follows:
433A.200 1. Except as otherwise provided in subsection 3 and 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, 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, a petition submitted pursuant to subsection 1 must, in addition to the certificate or statement required by that subsection, 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.
- 3. A proceeding for the involuntary court-ordered admission of a person who is the defendant in a criminal proceeding in the district court to a program of community-based or outpatient services may be commenced by the district court, on its own motion, or by motion of the defendant or the district attorney if:
- (a) The defendant has been examined in accordance with NRS 178.415;
- (b) The defendant is not eligible for commitment to the custody of the Administrator pursuant to NRS 178.461; and
- (c) The Division makes a clinical determination that placement in a program of community-based or outpatient services is appropriate.





Sec. 35. NRS 449.0175 is hereby amended to read as follows:

449.0175 "Rural clinic" means a facility located in an area that is not designated as an urban area by the Bureau of the Census, where medical services are provided by a physician assistant licensed pursuant to chapter 630 or 633 of NRS or an advanced practice registered nurse licensed pursuant to NRS 632.237. [who is under the supervision of a licensed physician.]

Sec. 36. NRS 449A.075 is hereby amended to read as follows: 449A.075 "Rural clinic" means a facility located in an area that is not designated as an urban area by the Bureau of the Census, where medical services are provided by a physician assistant licensed pursuant to chapter 630 or 633 of NRS or an advanced practice registered nurse licensed pursuant to NRS 632.237. [who is under the supervision of a licensed physician.]

Sec. 37. NRS 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 euthanasia 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 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 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.

- **Sec. 38.** NRS 454.213 is hereby amended to read as follows:
- 454.213 1. Except as otherwise provided in NRS 454.217, 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 licensed pursuant to chapter 630 or 633 of NRS [, at the direction of his or her supervising physician] 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 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 or a collaborative practice agreement, as defined in NRS 639.0052.
- (u) A person who is enrolled in a training program to become a physician assistant licensed pursuant to chapter 630 or 633 of NRS, hygienist, advanced emergency medical technician, paramedic, respiratory therapist, dialysis technician, nuclear medicine technologist, radiologic technologist, physical therapist or veterinary technician if the person possesses and administers the drug or medicine in the same manner and under the same conditions that apply, respectively, to a physician assistant licensed pursuant to chapter 630 or 633 of NRS, dental hygienist, advanced emergency medical technician, paramedic, respiratory therapist, dialysis technician, nuclear medicine technologist, radiologic technologist, physical therapist or veterinary technician who may possess and administer the drug or medicine, and under the direct supervision of a person licensed or registered to perform the respective medical art or a supervisor of such a person.
- (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 or physician assistant.
- (2) State Board of Osteopathic Medicine, at the direction of the prescribing physician and under the supervision of a physician or physician assistant.
- 2. As used in this section, "accredited college of medicine" has the meaning ascribed to it in NRS 453.375.
- **Sec. 39.** NRS 630.025, 633.123, 633.452, 633.466, 633.467, 633.468 and 633.469 are hereby repealed.

Sec. 40. 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, 2020, for all other purposes.



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LEADLINES OF REPEALED SECTIONS

630.025 "Supervising physician" defined.

633.123 "Supervising osteopathic physician" defined.

633.452 Rendering of emergency care in emergency or disaster without supervision of osteopathic physician.

633.466 Supervision of physician assistant by physician; joint regulations.

633.467 Persons prohibited from acting as supervising osteopathic physician.

633.468 Supervising osteopathic physicians: Right to refuse to act as supervising osteopathic physician; certain agreements void.

633.469 Supervising osteopathic physicians: Requirements of supervision.





