

Amendment No. 161

Senate Amendment to Senate Bill No. 456	(BDR 40-786)
Proposed by: Senate Committee on Health and Human Services	
Amends: Summary: No Title: No Preamble: No Joint Sponsorship: No Digest: No	

ASSEMBLY ACTION			Initial and Date	SENATE ACTION			Initial and Date		
Adopted	<input type="checkbox"/>	Lost	<input type="checkbox"/>		Adopted	<input type="checkbox"/>	Lost	<input type="checkbox"/>	
Concurred In	<input type="checkbox"/>	Not	<input type="checkbox"/>		Concurred In	<input type="checkbox"/>	Not	<input type="checkbox"/>	
Receded	<input type="checkbox"/>	Not	<input type="checkbox"/>		Receded	<input type="checkbox"/>	Not	<input type="checkbox"/>	

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

EWR/RBL



Date: 4/19/2019

S.B. No. 456—Revises provisions relating to staff privileges for advanced practice registered nurses at hospitals. (BDR 40-786)



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

MARCH 25, 2019

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions relating to staff privileges for advanced practice registered nurses at hospitals. (BDR 40-786)

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

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

AN ACT relating to hospitals; authorizing the admission of an advanced practice registered nurse to membership on the medical staff of a hospital; prohibiting a hospital from automatically granting or denying such admission for certain reasons; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law prohibits: (1) the automatic admission of a dentist to membership on the medical staff of a hospital; and (2) the denial of admission of a dentist to membership on the medical staff of a hospital solely because he or she is licensed as a dentist and not a physician. (NRS 449.192) **Section 1** of this bill enacts a similar provision concerning advanced practice registered nurses. Specifically, **section 1** affirmatively authorizes a hospital to grant admission on the membership of the medical staff of the hospital to an advanced practice registered nurse. **Section 1** also prohibits the automatic admission of an advanced practice registered nurse to membership on the medical staff of a hospital or the automatic denial of such admission for the same reasons as currently apply to a dentist. **Sections 2-8** 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 449 of NRS is hereby amended by adding thereto a new section to read as follows:

A hospital may admit an advanced practice registered nurse to membership on the medical staff of the hospital to perform any act authorized pursuant to NRS 632.237 ~~for~~ that is within the scope of practice of the advanced practice registered nurse. A hospital shall not:

1. Automatically admit an advanced practice registered nurse to membership on the medical staff of the hospital solely because he or she is licensed as an advanced practice registered nurse in this State ~~for~~ is authorized

1 *pursuant to NRS 632.237 to perform certain functions ~~for~~ or certain functions are*
2 *within his or her scope of practice; or*

3 *2. Deny admission to membership on the medical staff of the hospital to an*
4 *advanced practice registered nurse solely because he or she is licensed as an*
5 *advanced practice registered nurse and not as a physician.*

6 **Sec. 2.** NRS 449.029 is hereby amended to read as follows:

7 449.029 As used in NRS 449.029 to 449.240, inclusive, *and section 1 of this*
8 *act*, unless the context otherwise requires, “medical facility” has the meaning
9 ascribed to it in NRS 449.0151 and includes a program of hospice care described in
10 NRS 449.196.

11 **Sec. 3.** NRS 449.0301 is hereby amended to read as follows:

12 449.0301 The provisions of NRS 449.029 to 449.2428, inclusive, *and section*
13 *1 of this act* do not apply to:

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

20 2. Foster homes as defined in NRS 424.014.

21 3. Any medical facility, facility for the dependent or facility which is
22 otherwise required by the regulations adopted by the Board pursuant to NRS
23 449.0303 to be licensed that is operated and maintained by the United States
24 Government or an agency thereof.

25 **Sec. 4.** NRS 449.0302 is hereby amended to read as follows:

26 449.0302 1. The Board shall adopt:

27 (a) Licensing standards for each class of medical facility or facility for the
28 dependent covered by NRS 449.029 to 449.2428, inclusive, *and section 1 of this*
29 *act* and for programs of hospice care.

30 (b) Regulations governing the licensing of such facilities and programs.

31 (c) Regulations governing the procedure and standards for granting an
32 extension of the time for which a natural person may provide certain care in his or
33 her home without being considered a residential facility for groups pursuant to NRS
34 449.017. The regulations must require that such grants are effective only if made in
35 writing.

36 (d) Regulations establishing a procedure for the indemnification by the
37 Division, from the amount of any surety bond or other obligation filed or deposited
38 by a facility for refractive surgery pursuant to NRS 449.068 or 449.069, of a patient
39 of the facility who has sustained any damages as a result of the bankruptcy of or
40 any breach of contract by the facility.

41 (e) Any other regulations as it deems necessary or convenient to carry out the
42 provisions of NRS 449.029 to 449.2428, inclusive ~~for~~, *and section 1 of this act*.

43 2. The Board shall adopt separate regulations governing the licensing and
44 operation of:

45 (a) Facilities for the care of adults during the day; and

46 (b) Residential facilities for groups,

47  which provide care to persons with Alzheimer’s disease.

48 3. The Board shall adopt separate regulations for:

49 (a) The licensure of rural hospitals which take into consideration the unique
50 problems of operating such a facility in a rural area.

51 (b) The licensure of facilities for refractive surgery which take into
52 consideration the unique factors of operating such a facility.

1 (c) The licensure of mobile units which take into consideration the unique
2 factors of operating a facility that is not in a fixed location.

3 4. The Board shall require that the practices and policies of each medical
4 facility or facility for the dependent provide adequately for the protection of the
5 health, safety and physical, moral and mental well-being of each person
6 accommodated in the facility.

7 5. In addition to the training requirements prescribed pursuant to NRS
8 449.093, the Board shall establish minimum qualifications for administrators and
9 employees of residential facilities for groups. In establishing the qualifications, the
10 Board shall consider the related standards set by nationally recognized
11 organizations which accredit such facilities.

12 6. The Board shall adopt separate regulations regarding the assistance which
13 may be given pursuant to NRS 453.375 and 454.213 to an ultimate user of
14 controlled substances or dangerous drugs by employees of residential facilities for
15 groups. The regulations must require at least the following conditions before such
16 assistance may be given:

17 (a) The ultimate user's physical and mental condition is stable and is following
18 a predictable course.

19 (b) The amount of the medication prescribed is at a maintenance level and does
20 not require a daily assessment.

21 (c) A written plan of care by a physician or registered nurse has been
22 established that:

23 (1) Addresses possession and assistance in the administration of the
24 medication; and

25 (2) Includes a plan, which has been prepared under the supervision of a
26 registered nurse or licensed pharmacist, for emergency intervention if an adverse
27 condition results.

28 (d) Except as otherwise authorized by the regulations adopted pursuant to NRS
29 449.0304, the prescribed medication is not administered by injection or
30 intravenously.

31 (e) The employee has successfully completed training and examination
32 approved by the Division regarding the authorized manner of assistance.

33 7. The Board shall adopt separate regulations governing the licensing and
34 operation of residential facilities for groups which provide assisted living services.
35 The Board shall not allow the licensing of a facility as a residential facility for
36 groups which provides assisted living services and a residential facility for groups
37 shall not claim that it provides "assisted living services" unless:

38 (a) Before authorizing a person to move into the facility, the facility makes a
39 full written disclosure to the person regarding what services of personalized care
40 will be available to the person and the amount that will be charged for those
41 services throughout the resident's stay at the facility.

42 (b) The residents of the facility reside in their own living units which:

43 (1) Except as otherwise provided in subsection 8, contain toilet facilities;

44 (2) Contain a sleeping area or bedroom; and

45 (3) Are shared with another occupant only upon consent of both occupants.

46 (c) The facility provides personalized care to the residents of the facility and
47 the general approach to operating the facility incorporates these core principles:

48 (1) The facility is designed to create a residential environment that actively
49 supports and promotes each resident's quality of life and right to privacy;

50 (2) The facility is committed to offering high-quality supportive services
51 that are developed by the facility in collaboration with the resident to meet the
52 resident's individual needs;

1 (3) The facility provides a variety of creative and innovative services that
2 emphasize the particular needs of each individual resident and the resident's
3 personal choice of lifestyle;

4 (4) The operation of the facility and its interaction with its residents
5 supports, to the maximum extent possible, each resident's need for autonomy and
6 the right to make decisions regarding his or her own life;

7 (5) The operation of the facility is designed to foster a social climate that
8 allows the resident to develop and maintain personal relationships with fellow
9 residents and with persons in the general community;

10 (6) The facility is designed to minimize and is operated in a manner which
11 minimizes the need for its residents to move out of the facility as their respective
12 physical and mental conditions change over time; and

13 (7) The facility is operated in such a manner as to foster a culture that
14 provides a high-quality environment for the residents, their families, the staff, any
15 volunteers and the community at large.

16 8. The Division may grant an exception from the requirement of subparagraph
17 (1) of paragraph (b) of subsection 7 to a facility which is licensed as a residential
18 facility for groups on or before July 1, 2005, and which is authorized to have 10 or
19 fewer beds and was originally constructed as a single-family dwelling if the
20 Division finds that:

21 (a) Strict application of that requirement would result in economic hardship to
22 the facility requesting the exception; and

23 (b) The exception, if granted, would not:

24 (1) Cause substantial detriment to the health or welfare of any resident of
25 the facility;

26 (2) Result in more than two residents sharing a toilet facility; or

27 (3) Otherwise impair substantially the purpose of that requirement.

28 9. The Board shall, if it determines necessary, adopt regulations and
29 requirements to ensure that each residential facility for groups and its staff are
30 prepared to respond to an emergency, including, without limitation:

31 (a) The adoption of plans to respond to a natural disaster and other types of
32 emergency situations, including, without limitation, an emergency involving fire;

33 (b) The adoption of plans to provide for the evacuation of a residential facility
34 for groups in an emergency, including, without limitation, plans to ensure that
35 nonambulatory patients may be evacuated;

36 (c) Educating the residents of residential facilities for groups concerning the
37 plans adopted pursuant to paragraphs (a) and (b); and

38 (d) Posting the plans or a summary of the plans adopted pursuant to paragraphs
39 (a) and (b) in a conspicuous place in each residential facility for groups.

40 10. The regulations governing the licensing and operation of facilities for
41 transitional living for released offenders must provide for the licensure of at least
42 three different types of facilities, including, without limitation:

43 (a) Facilities that only provide a housing and living environment;

44 (b) Facilities that provide or arrange for the provision of supportive services for
45 residents of the facility to assist the residents with reintegration into the community,
46 in addition to providing a housing and living environment; and

47 (c) Facilities that provide or arrange for the provision of alcohol and drug
48 abuse programs, in addition to providing a housing and living environment and
49 providing or arranging for the provision of other supportive services.

50 11. The regulations must provide that if a facility was originally constructed as a
51 single-family dwelling, the facility must not be authorized for more than eight beds.

52 11. As used in this section, "living unit" means an individual private
53 accommodation designated for a resident within the facility.

1 **Sec. 5.** NRS 449.160 is hereby amended to read as follows:

2 449.160 1. The Division may deny an application for a license or may
3 suspend or revoke any license issued under the provisions of NRS 449.029 to
4 449.2428, inclusive, *and section 1 of this act* upon any of the following grounds:

5 (a) Violation by the applicant or the licensee of any of the provisions of NRS
6 439B.410 or 449.029 to 449.245, inclusive, *and section 1 of this act*, or of any
7 other law of this State or of the standards, rules and regulations adopted thereunder.

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

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

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

14 (e) Failure of the applicant to obtain written approval from the Director of the
15 Department of Health and Human Services as required by NRS 439A.100 or as
16 provided in any regulation adopted pursuant to NRS 449.001 to 449.430, inclusive,
17 *and section 1 of this act* and 449.435 to 449.531, inclusive, and chapter 449A of
18 NRS if such approval is required.

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

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

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

24 (b) Is ordered to but fails to abate a nuisance pursuant to NRS 244.360,
25 244.3603 or 268.4124; or

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

28 3. The Division shall maintain a log of any complaints that it receives relating
29 to activities for which the Division may revoke the license to operate a facility for
30 the dependent pursuant to subsection 2. The Division shall provide to a facility for
31 the care of adults during the day:

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

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

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

36 ➤ The facility shall make the information available to the public pursuant to NRS
37 449.2486.

38 4. On or before February 1 of each odd-numbered year, the Division shall
39 submit to the Director of the Legislative Counsel Bureau a written report setting
40 forth, for the previous biennium:

41 (a) Any complaints included in the log maintained by the Division pursuant to
42 subsection 3; and

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

44 **Sec. 6.** NRS 449.163 is hereby amended to read as follows:

45 449.163 1. In addition to the payment of the amount required by NRS
46 449.0308, if a medical facility, facility for the dependent or facility which is
47 required by the regulations adopted by the Board pursuant to NRS 449.0303 to be
48 licensed violates any provision related to its licensure, including any provision of
49 NRS 439B.410 or 449.029 to 449.2428, inclusive, *and section 1 of this act*, or any
50 condition, standard or regulation adopted by the Board, the Division, in accordance
51 with the regulations adopted pursuant to NRS 449.165, may:

52 (a) Prohibit the facility from admitting any patient until it determines that the
53 facility has corrected the violation;

(b) Limit the occupancy of the facility to the number of beds occupied when the violation occurred, until it determines that the facility has corrected the violation;

(c) If the license of the facility limits the occupancy of the facility and the facility has exceeded the approved occupancy, require the facility, at its own expense, to move patients to another facility that is licensed;

(d) Impose an administrative penalty of not more than \$5,000 per day for each violation, together with interest thereon at a rate not to exceed 10 percent per annum; and

(e) Appoint temporary management to oversee the operation of the facility and to ensure the health and safety of the patients of the facility, until:

(1) It determines that the facility has corrected the violation and has management which is capable of ensuring continued compliance with the applicable statutes, conditions, standards and regulations; or

(2) Improvements are made to correct the violation.

2. If the facility fails to pay any administrative penalty imposed pursuant to paragraph (d) of subsection 1, the Division may:

(a) Suspend the license of the facility until the administrative penalty is paid; and

(b) Collect court costs, reasonable attorney's fees and other costs incurred to collect the administrative penalty.

3. The Division may require any facility that violates any provision of NRS 439B.410 or 449.029 to 449.2428, inclusive, *and section 1 of this act* or any condition, standard or regulation adopted by the Board to make any improvements necessary to correct the violation.

4. Any money collected as administrative penalties pursuant to paragraph (d) of subsection 1 must be accounted for separately and used to administer and carry out the provisions of NRS 449.001 to 449.430, inclusive, *and section 1 of this act*, 449.435 to 449.530, inclusive, and 449.760 and chapter 449A of NRS to protect the health, safety, well-being and property of the patients and residents of facilities in accordance with applicable state and federal standards or for any other purpose authorized by the Legislature.

Sec. 7. NRS 449.240 is hereby amended to read as follows:

449.240 The district attorney of the county in which the facility is located shall, upon application by the Division, institute and conduct the prosecution of any action for violation of any provisions of NRS 449.029 to 449.245, inclusive *H*, *and section 1 of this act*.

Sec. 8. NRS 654.190 is hereby amended to read as follows:

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

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

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

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

(d) Aids or abets any person in the violation of any of the provisions of NRS 449.029 to 449.2428, inclusive, *and section 1 of this act*, as those provisions pertain to a facility for skilled nursing, facility for intermediate care or residential facility for groups.

1 (e) Violates any regulation of the Board prescribing additional standards of
2 conduct for licensees, including, without limitation, a code of ethics.

3 (f) Engages in conduct that violates the trust of a patient or resident or exploits
4 the relationship between the licensee and the patient or resident for the financial or
5 other gain of the licensee.

6 2. If a licensee requests a hearing pursuant to subsection 1, the Board shall
7 give the licensee written notice of a hearing pursuant to NRS 233B.121 and
8 241.034. A licensee may waive, in writing, his or her right to attend the hearing.

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

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

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