SENATE BILL NO. 455-COMMITTEE ON HEALTH AND HUMAN SERVICES

MARCH 25, 2019

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions governing residential care. (BDR 40-787)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Yes.

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

AN ACT relating to residential care; categorizing providers of supported living arrangement services, providers of community-based living arrangement services and homes for residential care as providers of home-based residential care; requiring such a provider to obtain a license; requiring such a provider who wishes to serve certain populations to obtain an endorsement; prescribing authorized uses of fees for the licensing of such providers and certain facilities; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law defines the term "supported living arrangement services" to refer to flexible, individualized services provided in the home to a person with an intellectual or developmental disability. (NRS 435.3315) Existing law defines the term "community-based living arrangement services" to refer to similar services provided to persons with mental illness. (NRS 433.605) Existing law defines the term "home for individual residential care" to mean a home in which a natural person furnishes food, shelter, assistance and limited supervision to not more than two persons with intellectual disabilities or with physical disabilities or who are aged or infirm. (NRS 449.0105) Existing law defines the term "residential facility for groups" to mean an establishment, other than a home for individual residential care or a home in which community-based living arrangement services or supported living arrangement services are provided, that furnishes food, shelter, assistance and limited supervision to a person with an intellectual disability or with a physical disability or a person who is aged or infirm. (NRS 449.017) Existing law requires: (1) a provider of community-based living arrangement services to be certified by the Division of Public and Behavioral Health of the Department of Health and Human Services; (2) a provider of supported living arrangement services to be





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certified by the Aging and Disability Services Division of the Department; and (3) a home for individual residential care or residential facility for groups to be licensed by the Division of Public and Behavioral Health as a facility for the dependent. (NRS 433.607, 435.332, 449.0045, 449.030)

Section 12 of this bill replaces the term "home for individual residential care" with the term "home for residential care," which is defined to mean a home which furnishes food, shelter, assistance and limited supervision to not more than 10 persons with intellectual disabilities or with physical disabilities or who are aged or infirm. Section 15 of this bill redefines the term "residential facility for groups" to mean an establishment that furnishes food, shelter, assistance and limited supervision to 11 or more such persons. Section 7 of this bill defines the term "provider of home-based residential care" to mean a home for residential care, a provider of community-based living arrangement services or a provider of supported living arrangement services. Section 17 of this bill requires a provider of home-based residential care to obtain a license from the Division of Public and Behavioral Health. Section 19 of this bill requires the State Board of Health to adopt regulations governing the licensing of such providers. Section 32 of this bill requires employees and certain other persons who provide services at a provider of home-based residential care to receive a background check. Section 33 of this bill requires the Chief Medical Officer to annually inspect each home for residential care with more than two residents and each home operated by a provider of supported living arrangement services or community-based living arrangement services.

Section 8 of this bill requires the Aging and Disability Services Division to adopt regulations establishing endorsements of a license to operate a provider of home-based residential care to serve specific populations. Section 8 prohibits a provider of home-based residential care from providing services to a population for which an endorsement has been established unless the provider holds that endorsement. Sections 36 and 37 of this bill authorize the Division of Public and Behavioral Health to take disciplinary action against a provider of home-based residential care that violates this prohibition. Section 8 requires the Aging and Disability Services Division to investigate an applicant for an endorsement and authorizes the Division to investigate the holder of an endorsement at any time. Section 104 of this bill repeals existing provisions regarding community-based living arrangement services and supported living arrangement services.

Sections 1-4, 13, 22-29, 32-37, 39, 45-47, 50-52, 60-68, 75, 77, 84, 90, 99, 100 and 102 of this bill provide for a provider of home-based residential care to be treated similarly to a facility for the dependent in most circumstances. Sections 20, 21, 28, 30, 31, 33, 38, 40-45, 49, 51, 69-76, 78, 80-83, 86-89, 94-101 and 103 of this bill make conforming changes so that a home for residential care remains subject to the same requirements relating to licensing and operation as under existing law. Sections 9-11, 14, 16, 18, 48, 53-59, 79, 85 and 91-93 of this bill make other conforming changes.

Existing law authorizes fees collected by the Division of Public and Behavioral Health for the licensing of a medical facility, facility for the dependent and certain other facilities to be used by the Division to administer and carry out provisions governing such facilities. (NRS 449.0308) Section 24 of this bill additionally authorizes the Division to: (1) collect such fees for the licensure of a provider of home-based residential care; and (2) use such fees to protect the health, safety, well-being and property of patients and residents of such facilities and recipients of services from such providers.



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

Section 1. Chapter 439 of NRS is hereby amended by adding thereto a new section to read as follows:

"Provider of home-based residential care" has the meaning ascribed to it in section 7 of this act.

Sec. 2. NRS 439.950 is hereby amended to read as follows:

439.950 As used in NRS 439.950 to 439.983, inclusive, *and section 1 of this act*, unless the context otherwise requires, the words and terms defined in NRS 439.955, 439.960 and 439.965 *and section 1 of this act* have the meanings ascribed to them in those sections.

Sec. 3. NRS 439.970 is hereby amended to read as follows:

- 439.970 1. Except as otherwise provided in chapter 414 of NRS, if a health authority identifies within its jurisdiction a public health emergency or other health event that is an immediate threat to the health and safety of the public in a health care facility, *a home operated by a provider of home-based residential care* or the office of a provider of health care, the health authority shall immediately transmit to the Governor a report of the immediate threat.
- 2. Upon receiving a report pursuant to subsection 1, the Governor shall determine whether a public health emergency or other health event exists that requires a coordinated response for the health and safety of the public. If the Governor determines that a public health emergency or other health event exists that requires such a coordinated response, the Governor shall issue an executive order:
- (a) Stating the nature of the public health emergency or other health event;
- (b) Stating the conditions that have brought about the public health emergency or other health event, including, without limitation, an identification of each health care facility, *provider of home-based residential care* or provider of health care, if any, related to the public health emergency or other health event;
- (c) Stating the estimated duration of the immediate threat to the health and safety of the public; and
 - (d) Designating an emergency team comprised of:
- (1) The Chief Medical Officer or a person appointed pursuant to subsection 5, as applicable; and
- (2) Representatives of state agencies, divisions, boards and other entities, including, without limitation, professional licensing boards, with authority by statute to govern or regulate the health care facilities, providers of home-based residential care and





providers of health care identified as being related to the public health emergency or other health event pursuant to paragraph (b).

- 3. If additional state agencies, divisions, boards or other entities are identified during the course of the response to the public health emergency or other health event as having authority regarding a health care facility, *provider of home-based residential care* or provider of health care that is related to the public health emergency or other health event, the Governor shall direct that agency, division, board or entity to appoint a representative to the emergency team.
- 4. The Chief Medical Officer or a person appointed pursuant to subsection 5, as applicable, is the chair of the emergency team.
- 5. If the Chief Medical Officer has a conflict of interest relating to a public health emergency or other health event or is otherwise unable to carry out the duties prescribed pursuant to NRS 439.950 to 439.983, inclusive, and section 1 of this act, the Director shall temporarily appoint a person to carry out the duties of the Chief Medical Officer prescribed in NRS 439.950 to 439.983, inclusive, and section 1 of this act until such time as the public health emergency or other health event has been resolved or the Chief Medical Officer is able to resume those duties. The person appointed by the Director must meet the requirements prescribed by NRS 439.095.
- 6. The Governor shall immediately transmit the executive order to:
- (a) The Legislature or, if the Legislature is not in session, to the Legislative Commission and the Legislative Committee on Health Care; and
- (b) Any person or entity deemed necessary or advisable by the Governor.
- 7. The Governor shall declare a public health emergency or other health event terminated before the estimated duration stated in the executive order upon a finding that the public health emergency or other health event no longer poses an immediate threat to the health and safety of the public. Upon such a finding, the Governor shall notify each person and entity described in subsection 6.
- 8. If a public health emergency or other health event lasts longer than the estimated duration stated in the executive order, the Governor is not required to reissue an executive order, but shall notify each person and entity identified in subsection 6.
- 9. The Attorney General shall provide legal counsel to the emergency team.
 - **Sec. 4.** NRS 439.973 is hereby amended to read as follows:
- 439.973 During a public health emergency or other health event, the Governor may, upon consultation with the emergency





team, request from a governor of a contiguous state assistance in carrying out an inspection of any health care facility , *home operated by a provider of home-based residential care* or the office of a provider of health care. The Governor may enter into an agreement for the provision of such services relating to inspections.

Sec. 5. NRS 439B.225 is hereby amended to read as follows:

- 439B.225 1. As used in this section, "licensing board" means any division or board empowered to adopt standards for the issuance or renewal of licenses, permits or certificates of registration pursuant to NRS [433.601 to 433.621, inclusive, 435.3305 to 435.339, inclusive,] chapter 449, 625A, 630, 630A, 631, 632, 633, 634, 634A, 635, 636, 637, 637B, 639, 640, 640A, 640D, 641, 641A, 641B, 641C, 652 or 654 of NRS.
- 2. The Committee shall review each regulation that a licensing board proposes or adopts that relates to standards for the issuance or renewal of licenses, permits or certificates of registration issued to a person, [or] facility *or provider* regulated by the board, giving consideration to:
- (a) Any oral or written comment made or submitted to it by members of the public or by persons, [or] facilities *or providers* affected by the regulation;
- (b) The effect of the regulation on the cost of health care in this State;
- (c) The effect of the regulation on the number of licensed, permitted or registered persons and facilities *or providers* available to provide services in this State; and
 - (d) Any other related factor the Committee deems appropriate.
- 3. After reviewing a proposed regulation, the Committee shall notify the agency of the opinion of the Committee regarding the advisability of adopting or revising the proposed regulation.
- 4. The Committee shall recommend to the Legislature as a result of its review of regulations pursuant to this section any appropriate legislation.
- **Sec. 6.** Chapter 449 of NRS is hereby amended by adding thereto the provisions set forth as sections 7 and 8 of this act.
 - Sec. 7. "Provider of home-based residential care" means:
 - 1. A home for residential care;
- 2. A provider of community-based living arrangement services; or
 - 3. A provider of supported living arrangement services.
- Sec. 8. 1. The Aging and Disability Services Division of the Department of Health and Human Services shall adopt regulations establishing endorsements of a license to operate a provider of home-based residential care to serve specific populations of persons with intellectual disabilities, developmental





disabilities or physical disabilities, persons who are aged or infirm and persons with mental illness. The Aging and Disability Services Division may adopt regulations prescribing:

- (a) A reasonable fee for the issuance of an endorsement; and
- (b) Requirements concerning the provision of home-based residential care to members of such populations.
- 2. A provider of home-based residential care shall not provide services to a population for which an endorsement has been established pursuant to subsection 1 unless the provider holds that endorsement.
 - 3. The Aging and Disability Services Division:
- (a) Shall, upon receiving an application for the issuance or renewal of an endorsement, conduct an investigation into the qualifications of the personnel, methods of operation, policies and purposes of the applicant. Such an investigation:
- (1) Must include, without limitation, an inspection of any premises operated by the applicant for or holder of an endorsement; and
- (2) May include, with the consent of a person to whom the applicant for or holder of an endorsement provides services or his or her representative, an inspection of the home of such a person.
- (b) May, at any other time, conduct an investigation into the qualifications of the personnel, methods of operation, policies and purposes of the applicant for or holder of an endorsement. Such an investigation may include, without limitation, an inspection of any premises operated by the applicant for or holder of an endorsement and, with the consent of a person to whom the holder provides services or his or her representative, the home of such a person.
- (c) May deny or revoke an endorsement for failure to comply with any regulation of the Aging and Disability Services Division, any requirements of this chapter or any regulations adopted by the Division of Public and Behavioral Health pursuant thereto.
- 4. The Division of Public and Behavioral Health may accept any finding by the Aging and Disability Services Division that an applicant for or holder of an endorsement is in compliance with the provisions of this chapter and the regulations adopted pursuant thereto as conclusive evidence of such compliance.
 - 5. As used in this section:
- (a) "Developmental disability" has the meaning ascribed to it in NRS 435.007.
- 42 (b) "Intellectual disability" has the meaning ascribed to it in 43 NRS 435.007.
 - (c) "Mental illness" has the meaning ascribed to it in NRS 433.164.





Sec. 9. NRS 449.001 is hereby amended to read as follows:

449.001 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 449.0015 to 449.0195, inclusive, *and section 7 of this act* have the meanings ascribed to them in those sections.

Sec. 10. NRS 449.0026 is hereby amended to read as follows: 449.0026 "Community-based living arrangement services" [has the meaning ascribed to it in NRS 433.605.] means flexible, individualized services, including, without limitation, training and habilitation services, that are:

- 1. Provided in the home for compensation to persons with mental illness or persons with developmental disabilities who are served by the Division or any other entity; and
- 2. Designed and coordinated to assist such persons in maximizing their independence.
 - **Sec. 11.** NRS 449.0045 is hereby amended to read as follows: 449.0045 "Facility for the dependent" includes:
 - 1. A facility for the treatment of abuse of alcohol or drugs;
 - 2. A halfway house for recovering alcohol and drug abusers;
 - 3. A facility for the care of adults during the day;
 - 4. A residential facility for groups;
 - 5. An agency to provide personal care services in the home;
 - 6. A facility for transitional living for released offenders;
 - 7. [A home for individual residential care;
 - 8. A peer support recovery organization; and
 - [9.] 8. A community health worker pool.

Sec. 12. NRS 449.0105 is hereby amended to read as follows:

449.0105 "Home for [individual] residential care" means a home [in] which [a natural person] furnishes food, shelter, assistance and limited supervision, for compensation, to not more than [two] 10 persons with intellectual disabilities or with physical disabilities or who are aged or infirm, unless the persons receiving those services are related within the third degree of consanguinity or affinity to the person providing those services. The term includes, without limitation, a home with not more than 10 residents that provides assisted living services. The term does not include:

- 1. A halfway house for recovering alcohol and drug abusers; or
- 2. A home in which community-based living arrangement services or supported living arrangement services are provided by a provider of such services during any period in which the provider is engaged in providing the services.
 - Sec. 13. NRS 449.0153 is hereby amended to read as follows:
- 449.0153 1. "Nursing pool" means a person or agency which provides for compensation, through its employees or by contractual arrangement with other persons, nursing services to any natural





person, medical facility, *provider of home-based residential care* or facility for the dependent.

2. The term does not include:

- (a) An independent contractor who provides such services without the assistance of employees;
- (b) A nursing pool based in a medical facility, *home operated* by a provider of home-based residential care or facility for the dependent;
- (c) A provider of community-based living arrangement services during any period in which the provider of community-based living arrangement services is engaged in providing community-based living arrangement services; or
- (d) A provider of supported living arrangement services during any period in which the provider of supported living arrangement services is engaged in providing supported living arrangement services.
- **Sec. 14.** NRS 449.0159 is hereby amended to read as follows: 449.0159 "Provider of supported living arrangement services" means a natural person who or a partnership, firm, corporation, association, state or local government or agency thereof that has been issued a [certificate pursuant to NRS 435.3305 to 435.339, inclusive,] license to provide supported living arrangement services pursuant to this chapter and the regulations adopted pursuant [to NRS 435.3305 to 435.339, inclusive.] thereto.
- **Sec. 15.** NRS 449.017 is hereby amended to read as follows: 449.017 1. Except as otherwise provided in subsection 2, "residential facility for groups" means an establishment that furnishes food, shelter, assistance and limited supervision to [a person] 11 or more persons with an intellectual disability or with a physical disability or [a person] who [is] are aged or infirm. The term includes, without limitation, an assisted living facility [.] with 11 or more residents.
 - 2. The term does not include:
 - (a) An establishment which provides care only during the day;
- (b) A natural person who provides care for no more than two persons in his or her own home;
- (c) A natural person who provides care for one or more persons related to him or her within the third degree of consanguinity or affinity;
 - (d) A halfway house for recovering alcohol and drug abusers; or
- (e) A home in which community-based living arrangement services or supported living arrangement services are provided by a provider of such services during any period in which the provider is providing the services.





Sec. 16. NRS 449.0185 is hereby amended to read as follows: 449.0185 "Supported living arrangement services" [has the meaning ascribed to it in NRS 435.3315.] means flexible, individualized services provided in the home for compensation to a person with an intellectual disability or a person with a developmental disability who is served by the Aging and Disability Services Division of the Department of Health and Human Services that are designed and coordinated to assist the person in maximizing the person's independence, including, without limitation, training and habilitation services.

Sec. 17. NRS 449.030 is hereby amended to read as follows:

449.030 Except as otherwise provided in NRS 449.03013, 449.03015 and 449.03017, no person, state or local government or agency thereof may operate or maintain in this State any medical facility, *provider of home-based residential care* or facility for the dependent without first obtaining a license therefor as provided in NRS 449.029 to 449.2428, inclusive [...], *and section 8 of this act.*

Sec. 18. NRS 449.0301 is hereby amended to read as follows: 449.0301 The provisions of NRS 449.029 to 449.2428, inclusive, *and section 8 of this act* do not apply to:

- 1. Any facility *or home* conducted by and for the adherents of any church or religious denomination for the purpose of providing facilities *or homes* for the care and treatment of the sick who depend solely upon spiritual means through prayer for healing in the practice of the religion of the church or denomination, except that such a facility *or home* shall comply with all regulations relative to sanitation and safety applicable to other facilities *or homes* of a similar category.
 - 2. Foster homes as defined in NRS 424.014.
- 3. Any medical facility, facility for the dependent, [or] facility which is otherwise required by the regulations adopted by the Board pursuant to NRS 449.0303 or provider of home-based residential care to be licensed that is operated and maintained by the United States Government or an agency thereof.

Sec. 19. NRS 449.0302 is hereby amended to read as follows: 449.0302 1. The Board shall adopt:

- (a) Licensing standards for each class of medical facility, [or] facility for the dependent or provider of home-based residential care covered by NRS 449.029 to 449.2428, inclusive, and section 8 of this act and for programs of hospice care.
- (b) Regulations governing the licensing of such facilities, *providers* and programs.
- (c) Regulations governing the procedure and standards for granting an extension of the time for which a natural person may provide certain care in his or her home without being considered a





[residential facility for groups pursuant to NRS 449.017.] home for residential care. The regulations must require that such grants are effective only if made in writing.

- (d) Regulations establishing a procedure for the indemnification by the Division, from the amount of any surety bond or other obligation filed or deposited by a facility for refractive surgery pursuant to NRS 449.068 or 449.069, of a patient of the facility who has sustained any damages as a result of the bankruptcy of or any breach of contract by the facility.
- (e) Any other regulations as it deems necessary or convenient to carry out the provisions of NRS 449.029 to 449.2428, inclusive [...], and section 8 of this act.
- 2. The Board shall adopt separate regulations governing the licensing and operation of:
 - (a) Facilities for the care of adults during the day; [and]
 - (b) Residential facilities for groups [,]; and
 - (c) Homes for residential care,

- → which provide care to persons with Alzheimer's disease.
 - 3. The Board shall adopt separate regulations for:
- (a) The licensure of rural hospitals which take into consideration the unique problems of operating such a facility in a rural area.
- (b) The licensure of facilities for refractive surgery which take into consideration the unique factors of operating such a facility.
- (c) The licensure of mobile units which take into consideration the unique factors of operating a facility that is not in a fixed location.
- 4. The Board shall require that the practices and policies of each medical facility, *provider of home-based residential care* or facility for the dependent provide adequately for the protection of the health, safety and physical, moral and mental well-being of each person accommodated in the facility [-] or by the provider.
- 5. In addition to the training requirements prescribed pursuant to NRS 449.093, the Board shall establish minimum qualifications for administrators and employees of residential facilities for groups [.] and homes for residential care with more than two residents. In establishing the qualifications, the Board shall consider the related standards set by nationally recognized organizations which accredit such facilities [.] and homes.
- 6. The Board shall adopt separate regulations regarding the assistance which may be given pursuant to NRS 453.375 and 454.213 to an ultimate user of controlled substances or dangerous drugs by employees of residential facilities for groups [...] and homes for residential care. The regulations must require at least the following conditions before such assistance may be given:





- (a) The ultimate user's physical and mental condition is stable and is following a predictable course.
- (b) The amount of the medication prescribed is at a maintenance level and does not require a daily assessment.
- (c) A written plan of care by a physician or registered nurse has been established that:
- (1) Addresses possession and assistance in the administration of the medication; and
- (2) Includes a plan, which has been prepared under the supervision of a registered nurse or licensed pharmacist, for emergency intervention if an adverse condition results.
- (d) Except as otherwise authorized by the regulations adopted pursuant to NRS 449.0304, the prescribed medication is not administered by injection or intravenously.
- (e) The employee has successfully completed training and examination approved by the Division regarding the authorized manner of assistance.
- 7. The Board shall adopt separate regulations governing the licensing and operation of residential facilities for groups *and homes for residential care* which provide assisted living services. The Board shall not allow the licensing of a facility as a residential facility for groups which provides assisted living services *or as a home for residential care which provides assisted living services* and a residential facility for groups *or a home for residential care* shall not claim that it provides "assisted living services" unless:
- (a) Before authorizing a person to move into the facility *or home*, the facility *or home* makes a full written disclosure to the person regarding what services of personalized care will be available to the person and the amount that will be charged for those services throughout the resident's stay at the facility : or home.
- (b) The residents of the facility *or home* reside in their own living units which:
- (1) Except as otherwise provided in subsection 8, contain toilet facilities;
 - (2) Contain a sleeping area or bedroom; and
- (3) Are shared with another occupant only upon consent of both occupants.
- (c) The facility *or home* provides personalized care to the residents of the facility *or home* and the general approach to operating the facility *or home* incorporates these core principles:
- (1) The facility *or home* is designed to create a residential environment that actively supports and promotes each resident's quality of life and right to privacy;
- (2) The facility *or home* is committed to offering highquality supportive services that are developed by the facility *or*





home in collaboration with the resident to meet the resident's individual needs:

- (3) The facility *or home* provides a variety of creative and innovative services that emphasize the particular needs of each individual resident and the resident's personal choice of lifestyle;
- (4) The operation of the facility *or home* and its interaction with its residents supports, to the maximum extent possible, each resident's need for autonomy and the right to make decisions regarding his or her own life;
- (5) The operation of the facility *or home* is designed to foster a social climate that allows the resident to develop and maintain personal relationships with fellow residents and with persons in the general community;
- (6) The facility *or home* is designed to minimize and is operated in a manner which minimizes the need for its residents to move out of the facility *or home* as their respective physical and mental conditions change over time; and
- (7) The facility *or home* is operated in such a manner as to foster a culture that provides a high-quality environment for the residents, their families, the staff, any volunteers and the community at large.
- 8. The Division may grant an exception from the requirement of subparagraph (1) of paragraph (b) of subsection 7 to a [facility] home for residential care which is licensed [as a residential facility for groups] on or before July 1, 2005, and [which is authorized to have 10 or fewer beds and] was originally constructed as a single-family dwelling if the Division finds that:
- (a) Strict application of that requirement would result in economic hardship to the **[facility]** *home* requesting the exception; and
 - (b) The exception, if granted, would not:
- (1) Cause substantial detriment to the health or welfare of any resident of the **[facility:]** home;
- (2) Result in more than two residents sharing a toilet facility; or
- (3) Otherwise impair substantially the purpose of that requirement.
- 9. The Board shall, if it determines necessary, adopt regulations and requirements to ensure that each residential facility for groups *and home for residential care with more than two residents* and its staff are prepared to respond to an emergency, including, without limitation:
- (a) The adoption of plans to respond to a natural disaster and other types of emergency situations, including, without limitation, an emergency involving fire;





- (b) The adoption of plans to provide for the evacuation of a residential facility for groups *or home for residential care with more than two residents* in an emergency, including, without limitation, plans to ensure that nonambulatory patients may be evacuated:
- (c) Educating the residents of residential facilities for groups and homes for residential care with more than two residents concerning the plans adopted pursuant to paragraphs (a) and (b); and
- (d) Posting the plans or a summary of the plans adopted pursuant to paragraphs (a) and (b) in a conspicuous place in each residential facility for groups [.] or home for residential care with more than two residents.
- 10. The regulations governing the licensing and operation of facilities for transitional living for released offenders must provide for the licensure of at least three different types of facilities, including, without limitation:
- (a) Facilities that only provide a housing and living environment:
- (b) Facilities that provide or arrange for the provision of supportive services for residents of the facility to assist the residents with reintegration into the community, in addition to providing a housing and living environment; and
- (c) Facilities that provide or arrange for the provision of alcohol and drug abuse programs, in addition to providing a housing and living environment and providing or arranging for the provision of other supportive services.
- → The regulations must provide that if a facility was originally constructed as a single-family dwelling, the facility must not be authorized for more than eight beds.
- 11. As used in this section, "living unit" means an individual private accommodation designated for a resident within the facility ... or home.
- **Sec. 20.** NRS 449.0304 is hereby amended to read as follows: 449.0304 1. The Board shall adopt regulations authorizing an employee of a residential facility for groups, *a home for residential care*, an agency to provide personal care services in the home or a facility for the care of adults during the day, with the consent of the person receiving services, to:
- (a) Check, record and report the temperature, blood pressure, apical or radial pulse, respiration or oxygen saturation of a person receiving services from the facility, *home* or agency;
- (b) Using an auto-injection device approved by the Food and Drug Administration for use in the home, administer to a person receiving services from the facility , *home* or agency insulin





furnished by a registered pharmacist as directed by a physician or assist such a person with the self-administration of such insulin; and

- (c) Using a device for monitoring blood glucose approved by the Food and Drug Administration for use in the home, conduct a blood glucose test on a person receiving services from the facility, *home* or agency or assist such a person to conduct a blood glucose test on himself or herself.
 - 2. The regulations adopted pursuant to this section:
- (a) Must require the tasks described in subsection 1 to be performed in conformance with the Clinical Laboratory Improvement Amendments of 1988, Public Law No. 100-578, 42 U.S.C. § 263a, if applicable, and any other applicable federal law or regulation;
- (b) Must prohibit the use of a device for monitoring blood glucose on more than one person; and
- (c) May require a person to receive training before performing any task described in subsection 1.
 - **Sec. 21.** NRS 449.0305 is hereby amended to read as follows:
- 449.0305 1. Except as otherwise provided in subsection 5, a person must obtain a license from the Board to operate a business that provides referrals to residential facilities for groups [-] or homes for residential care.
 - 2. The Board shall adopt:

- (a) Standards for the licensing of businesses that provide referrals to residential facilities for groups [;] or homes for residential care;
 - (b) Standards relating to the fees charged by such businesses;
 - (c) Regulations governing the licensing of such businesses; and
- (d) Regulations establishing requirements for training the employees of such businesses.
- 3. A licensed nurse, social worker, physician or hospital, or a provider of geriatric care who is licensed as a nurse or social worker, may provide referrals to residential facilities for groups *or homes for residential care* through a business that is licensed pursuant to this section. The Board may, by regulation, authorize a public guardian or any other person it determines appropriate to provide referrals to residential facilities for groups *or homes for residential care* through a business that is licensed pursuant to this section.
- 4. A business that is licensed pursuant to this section or an employee of such a business shall not:
- (a) Refer a person to a residential facility for groups *or home for residential care* that is not licensed.
- (b) Refer a person to a residential facility for groups *or home for residential care* if the business or its employee knows or





reasonably should know that the facility [or home, or the services provided by the facility or home, are not appropriate for the condition of the person being referred.

- (c) Refer a person to a residential facility for groups *or home for residential care* that is owned by the same person who owns the business.
- → A person who violates the provisions of this subsection is liable for a civil penalty to be recovered by the Attorney General in the name of the Board for the first offense of not more than \$10,000 and for a second or subsequent offense of not less than \$10,000 nor more than \$20,000. Unless otherwise required by federal law, the Board shall deposit all civil penalties collected pursuant to this section into a separate account in the State General Fund to be used to administer and carry out the provisions of NRS 449.001 to 449.430, inclusive, and sections 7 and 8 of this act, 449.435 to 449.531, inclusive, and chapter 449A of NRS and to protect the health, safety, well-being and property of the patients and residents of facilities and providers of home-based residential services in accordance with applicable state and federal standards.
- 5. This section does not apply to a medical facility that is licensed pursuant to NRS 449.029 to 449.2428, inclusive, *and section 8 of this act* on October 1, 1999.
- **Sec. 22.** NRS 449.0306 is hereby amended to read as follows: 449.0306 1. Money received from licensing medical facilities, *providers of home-based residential care* and facilities for the dependent must be forwarded to the State Treasurer for deposit in the State General Fund to the credit of the Division.
- 2. The Division shall enforce the provisions of NRS 449.029 to 449.245, inclusive, *and section 8 of this act*, and may incur any necessary expenses not in excess of money authorized for that purpose by the State or received from the Federal Government.
 - Sec. 23. NRS 449.0307 is hereby amended to read as follows: 449.0307 The Division may:
- 1. Upon receipt of an application for a license, conduct an investigation into the premises, facilities, qualifications of personnel, methods of operation, policies and purposes of any person proposing to engage in the operation of a medical facility, a facility for the dependent, *a provider of home-based residential care* or facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed. The facility *or provider* is subject to inspection and approval as to standards for safety from fire, on behalf of the Division, by the State Fire Marshal.
- 2. Upon receipt of a complaint against a medical facility, facility for the dependent, *provider of home-based residential care*





or facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed, except for a complaint concerning the cost of services, conduct an investigation into the premises, facilities, qualifications of personnel, methods of operation, policies, procedures and records of that facility *or provider* or any other medical facility, facility for the dependent, *provider of home-based residential care* or facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed which may have information pertinent to the complaint.

3. Employ such professional, technical and clerical assistance as it deems necessary to carry out the provisions of NRS 449.029 to 449.245, inclusive [-], and section 8 of this act.

Sec. 24. NRS 449.0308 is hereby amended to read as follows:

449.0308 1. Except as otherwise provided in this section, the Division may charge and collect from a medical facility, facility for the dependent, [or] facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed or provider of home-based residential care or a person who operates such a facility or provider without a license issued by the Division [the]:

- (a) The actual costs incurred by the Division for the enforcement of the provisions of NRS 449.029 to 449.2428, inclusive, and section 8 of this act, including, without limitation, the actual cost of conducting an inspection or investigation of the facility : and
- (b) Any costs necessary to protect the health, safety, well-being and property of the patients and residents of such facilities and the recipients of services from such providers.
- 2. The Division shall not charge and collect the actual cost for enforcement pursuant to subsection 1 if the enforcement activity is:
- (a) Related to the issuance or renewal of a license for which the Board charges a fee pursuant to NRS 449.050 or 449.089; or
- (b) Conducted pursuant to an agreement with the Federal Government which has appropriated money for that purpose.
- 3. Any money collected pursuant to subsection 1 may be used by the Division to [administer]:
- (a) Administer and carry out the provisions of NRS 449.029 to 449.2428, inclusive, and section 8 of this act and the regulations adopted pursuant thereto : and
 - (b) Protect the health, safety, well-being and property of:
- (1) Patients and residents of medical facilities, facilities for the dependent and facilities which are required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed; and





- (2) Recipients of services from providers of home-based residential care.
- 4. The provisions of this section do not apply to any costs incurred by the Division for the enforcement of the provisions of NRS 449.24185, 449.2419 or 449.24195.
 - **Sec. 25.** NRS 449.040 is hereby amended to read as follows:
- 449.040 Any person, state or local government or agency thereof desiring a license under the provisions of NRS 449.029 to 449.2428, inclusive, *and section 8 of this act* must file with the Division an application on a form prescribed, prepared and furnished by the Division, containing:
- 1. The name of the applicant and, if a natural person, whether the applicant has attained the age of 21 years.
 - 2. The type of facility *or provider* to be operated.
 - 3. The location of the facility [-] or provider.
- 4. In specific terms, the nature of services and type of care to be offered, as defined in the regulations.
- 5. [The] For a medical facility, facility for the dependent, facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed, home for residential care or a provider of supported living arrangement services or community-based living arrangement services that will operate a home, the number of beds authorized by the Director of the Department of Health and Human Services or, if such authorization is not required, the number of beds the facility or home will contain.
- 6. For a provider of supported living arrangement services or community-based living arrangement services that will not operate a home, the number of persons to whom the provider will provide services.
- 7. The name of the person in charge of the facility [...] or provider.
- [7.] 8. Such other information as may be required by the Division for the proper administration and enforcement of NRS 449.029 to 449.2428, inclusive [...], and section 8 of this act.
- [8.] 9. Evidence satisfactory to the Division that the applicant is of reputable and responsible character. If the applicant is a firm, association, organization, partnership, business trust, corporation or company, similar evidence must be submitted as to the members thereof and the person in charge of the facility *or provider* for which application is made. If the applicant is a political subdivision of the State or other governmental agency, similar evidence must be submitted as to the person in charge of the institution for which application is made.
- [9.] 10. Evidence satisfactory to the Division of the ability of the applicant to comply with the provisions of NRS 449.029





to 449.2428, inclusive, *and section 8 of this act* and the standards and regulations adopted by the Board.

[10.] 11. Evidence satisfactory to the Division that the facility or provider conforms to the zoning regulations of the local government within which the facility or provider will be operated or that the applicant has applied for an appropriate reclassification, variance, permit for special use or other exception for the facility [.] or provider.

Sec. 26. NRS 449.080 is hereby amended to read as follows:

449.080 1. If, after investigation, the Division finds that the:

- (a) Applicant is in full compliance with the provisions of NRS 449.029 to 449.2428, inclusive [;], and section 8 of this act;
- (b) Applicant is in substantial compliance with the standards and regulations adopted by the Board;
- (c) Applicant, if he or she has undertaken a project for which approval is required pursuant to NRS 439A.100, has obtained the approval of the Director of the Department of Health and Human Services; and
- (d) Facility *or provider* conforms to the applicable zoning regulations,
- → the Division shall issue the license to the applicant.
- 2. A license applies only to the person to whom it is issued, is valid only for the premises described in the license and is not transferable.
 - **Sec. 27.** NRS 449.085 is hereby amended to read as follows:
- 449.085 Each license issued by the Division shall be in the form prescribed by the Division and shall contain:
- 1. The name of the person or persons authorized to operate such licensed facility : or provider;
 - 2. The location of such licensed facility [;] or provider; and
- 3. The number of beds authorized in such licensed facility [,] *or provider*, the nature of services offered and the service delivery capacity.
 - **Sec. 28.** NRS 449.089 is hereby amended to read as follows:
- 449.089 1. Each license issued pursuant to NRS 449.029 to 449.2428, inclusive, *and section 8 of this act* expires on December 31 following its issuance and is renewable for 1 year upon reapplication and payment of all fees required pursuant to NRS 449.050 unless the Division finds, after an investigation, that the facility *or provider* has not:
- (a) Satisfactorily complied with the provisions of NRS 449.029 to 449.2428, inclusive, *and section 8 of this act* or the standards and regulations adopted by the Board;





- (b) Obtained the approval of the Director of the Department of Health and Human Services before undertaking a project, if such approval is required by NRS 439A.100; or
 - (c) Conformed to all applicable local zoning regulations.
- Each reapplication for an agency to provide personal care services in the home, an agency to provide nursing in the home, a community health worker pool, a facility for intermediate care, a facility for skilled nursing, a provider of home-based residential care, a hospital described in 42 U.S.C. § 1395ww(d)(1)(B)(iv) which accepts payment through Medicare, a psychiatric hospital that provides inpatient services to children, a psychiatric residential treatment facility, a residential facility for groups, a program of hospice care, a home for individual residential care, a facility for the care of adults during the day, a facility for hospice care, a nursing pool, a peer support recovery organization, the distinct part of a hospital which meets the requirements of a skilled nursing facility or nursing facility pursuant to 42 C.F.R. § 483.5, a hospital that provides swing-bed services as described in 42 C.F.R. § 482.58 or, if residential services are provided to children, a medical facility or facility for the treatment of abuse of alcohol or drugs must include, without limitation, a statement that the facility, hospital, agency, program, pool, organization or home is in compliance with the provisions of NRS 449.115 to 449.125, inclusive, and 449.174.
- 3. Each reapplication for an agency to provide personal care services in the home, a community health worker pool, a facility for intermediate care, a facility for skilled nursing, a facility for the care of adults during the day, a peer support recovery organization, a residential facility for groups or a home for individual [residential] care must include, without limitation, a statement that the holder of the license to operate, and the administrator or other person in charge and employees of, the facility, agency, pool, organization or home are in compliance with the provisions of NRS 449.093.
- **Sec. 29.** NRS 449.091 is hereby amended to read as follows: 449.091 1. The Division may cancel the license of a medical facility, facility for the dependent , *provider of home-based residential care* or a facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed and issue a provisional license, effective for a period determined by the Division, to such a facility *or provider* if it:
- (a) Is in operation at the time of the adoption of standards and regulations pursuant to the provisions of NRS 449.029 to 449.2428, inclusive, *and section 8 of this act* and the Division determines that the facility *or provider* requires a reasonable time under the particular circumstances within which to comply with the standards and regulations; or





- (b) Has failed to comply with the standards or regulations and the Division determines that the facility *or provider* is in the process of making the necessary changes or has agreed to make the changes within a reasonable time.
- 2. The provisions of subsection 1 do not require the issuance of a license or prevent the Division from refusing to renew or from revoking or suspending any license where the Division deems such action necessary for the health and safety of the occupants of any facility : or recipients of services from any provider.

Sec. 30. NRS 449.093 is hereby amended to read as follows:

- 449.093 1. An applicant for a license to operate a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for [individual] residential care must receive training to recognize and prevent the abuse of older persons before a license to operate such a facility, agency or home is issued to the applicant. If an applicant has completed such training within the year preceding the date of the application for a license and the application includes evidence of the training, the applicant shall be deemed to have complied with the requirements of this subsection.
- 3. If an applicant or licensee who is required by this section to obtain training is not a natural person, the person in charge of the facility, agency or home must receive the training required by this section.
- 4. An administrator or other person in charge of a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for Image: Individual residential care must receive training to recognize and prevent the abuse of older persons before the facility, agency or home provides care to a person and annually thereafter.
- 5. An employee who will provide care to a person in a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for lindividual residential care must receive training to recognize and prevent the abuse of older persons before the employee provides





care to a person in the facility, agency or home and annually thereafter.

- 6. The topics of instruction that must be included in the training required by this section must include, without limitation:
- (a) Recognizing the abuse of older persons, including sexual abuse and violations of NRS 200.5091 to 200.50995, inclusive;
- (b) Responding to reports of the alleged abuse of older persons, including sexual abuse and violations of NRS 200.5091 to 200.50995, inclusive; and
- (c) Instruction concerning the federal, state and local laws, and any changes to those laws, relating to:
 - (1) The abuse of older persons; and
- (2) Facilities for intermediate care, facilities for skilled nursing, agencies to provide personal care services in the home, facilities for the care of adults during the day, residential facilities for groups or homes for [individual] residential care, as applicable for the person receiving the training.
- 7. The facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for findividual] residential care is responsible for the costs related to the training required by this section.
- 8. The administrator of a facility for intermediate care, facility for skilled nursing, [or] residential facility for groups or home for residential care who is licensed pursuant to chapter 654 of NRS shall ensure that each employee of the facility who provides care to residents has obtained the training required by this section. If an administrator or employee of a facility or home does not obtain the training required by this section, the Division shall notify the Board of Examiners for Long-Term Care Administrators that the administrator is in violation of this section.
- 9. The holder of a license to operate a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for findividual residential care shall ensure that each person who is required to comply with the requirements for training pursuant to this section complies with such requirements. The Division may, for any violation of this section, take disciplinary action against a facility, agency , provider or home pursuant to NRS 449.160 and 449.163.
 - Sec. 31. NRS 449.094 is hereby amended to read as follows:
- 449.094 1. The Board shall establish minimum continuing education requirements concerning the care of persons with any form of dementia, including, without limitation, dementia caused by Alzheimer's disease, for each person who is:





- (a) Employed by a facility for skilled nursing, facility for intermediate care, [or] residential facility for groups or home for residential care with more than two residents which provides care to persons with any form of dementia; and
 - (b) Licensed or certified by an occupational licensing board.
- 2. In establishing continuing education requirements pursuant to subsection 1, the Board shall consider any other educational requirements imposed on such employees to ensure that the continuing education requirements established by the Board do not duplicate or conflict with the existing educational requirements imposed on those employees.
- 3. The administrator of a facility for skilled nursing, facility for intermediate care, [or] residential facility for groups or home for residential care with more than two residents which provides care to persons with any form of dementia, including, without limitation, dementia caused by Alzheimer's disease, shall ensure that each employee of the facility or home who is required to comply with the requirements for continuing education established by the Board pursuant to this section complies with such requirements.
 - **Sec. 32.** NRS 449.119 is hereby amended to read as follows:
- 449.119 "Facility, hospital, agency, program or home" means an agency to provide personal care services in the home, an employment agency that contracts with persons to provide nonmedical services related to personal care to elderly persons or persons with disabilities in the home, an agency to provide nursing in the home, a community health worker pool, a facility for intermediate care, a facility for skilled nursing, a hospital described in 42 U.S.C. § 1395ww(d)(1)(B)(iv) which accepts payment through Medicare, a psychiatric hospital that provides inpatient services to children, a psychiatric residential treatment facility, a peer support recovery organization, a residential facility for groups, a program of hospice care, a **home for individual** provider of home-based residential care, a facility for the care of adults during the day, a facility for hospice care, a nursing pool, the distinct part of a hospital which meets the requirements of a skilled nursing facility or nursing facility pursuant to 42 C.F.R. § 483.5, a hospital that provides swing-bed services as described in 42 C.F.R. § 482.58 or, if residential services are provided to children, a medical facility or facility for the treatment of abuse of alcohol or drugs.
 - **Sec. 33.** NRS 449.131 is hereby amended to read as follows:
- 449.131 1. Any authorized member or employee of the Division may enter and inspect any building or premises at any time to secure compliance with or prevent a violation of any provision of NRS 449.029 to 449.245, inclusive [...], and section 8 of this act.





- 2. The State Fire Marshal or a designee of the State Fire Marshal shall, upon receiving a request from the Division or a written complaint concerning compliance with the plans and requirements to respond to an emergency adopted pursuant to subsection 9 of NRS 449.0302:
- (a) Enter and inspect a residential facility for groups [;] or home for residential care with more than two residents; and
- (b) Make recommendations regarding the adoption of plans and requirements pursuant to subsection 9 of NRS 449.0302,
- → to ensure the safety of the residents of the facility *or home* in an emergency.
- 3. The Chief Medical Officer or a designee of the Chief Medical Officer shall enter and inspect at least annually each building or the premises of a residential facility for groups, each home for residential care with more than two residents and each home operated by a provider of supported living arrangement services or a provider of community-based living arrangement services to ensure compliance with standards for health and sanitation.
- 4. An authorized member or employee of the Division shall enter and inspect any building or premises operated by a residential facility for groups *or a provider of home-based residential care* within 72 hours after the Division is notified that a residential facility for groups *or a provider of home-based residential care* is operating without a license.
 - **Sec. 34.** NRS 449.132 is hereby amended to read as follows:
- 449.132 Every medical facility, facility for the dependent, *provider of home-based residential care* or facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed may be inspected at any time, with or without notice, as often as is necessary by:
- 1. The Division of Public and Behavioral Health to ensure compliance with all applicable regulations and standards; and
- 2. Any person designated by the Aging and Disability Services Division of the Department of Health and Human Services to investigate complaints made against the facility Hor provider.
 - **Sec. 35.** NRS 449.133 is hereby amended to read as follows: 449.133 The Division shall:
- 1. Prepare a report of the results of its inspections of medical facilities, *providers of home-based residential care* and facilities for the dependent regarding compliance with applicable regulations and standards. The report must be provided to the facility *or provider* and include, without limitation, a recommendation of the Division for correcting any deficiencies and, if a deficiency is discovered as a result of an investigation by a county, district or city





board of health or health officer, the recommendations of the board or health officer.

- 2. Upon request, disclose to any person or governmental entity the results of its inspections of facilities for skilled nursing, facilities for intermediate care, [and] residential facilities for groups and homes for residential care regarding their compliance with applicable regulations and standards.
 - **Sec. 36.** NRS 449.160 is hereby amended to read as follows:
- 449.160 1. The Division may deny an application for a license or may suspend or revoke any license issued under the provisions of NRS 449.029 to 449.2428, inclusive, *and section 8 of this act* upon any of the following grounds:
- (a) Violation by the applicant or the licensee of any of the provisions of NRS 439B.410 or 449.029 to 449.245, inclusive, *and section 8 of this act* or of any other law of this State or of the standards, rules and regulations adopted thereunder.
- (b) Aiding, abetting or permitting the commission of any illegal act.
- (c) Conduct inimical to the public health, morals, welfare and safety of the people of the State of Nevada in the maintenance and operation of the premises for which a license is issued.
- (d) Conduct or practice detrimental to the health or safety of the occupants or employees of the facility [...] or provider.
- (e) Failure of the applicant to obtain written approval from the Director of the Department of Health and Human Services as required by NRS 439A.100 or as provided in any regulation adopted pursuant to NRS 449.001 to 449.430, inclusive, *and sections 7 and 8 of this act* and 449.435 to 449.531, inclusive, and chapter 449A of NRS if such approval is required.
 - (f) Failure to comply with the provisions of NRS 449.2486.
- 2. In addition to the provisions of subsection 1, the Division may revoke a license to operate a facility for the dependent *or provider of home-based residential care* if, with respect to that facility [] *or provider*, the licensee that operates the facility [] *or provider*, or an agent or employee of the licensee:
- (a) Is convicted of violating any of the provisions of NRS 202.470;
- (b) Is ordered to but fails to abate a nuisance pursuant to NRS 244.360, 244.3603 or 268.4124; or
- (c) Is ordered by the appropriate governmental agency to correct a violation of a building, safety or health code or regulation but fails to correct the violation.
- 3. The Division shall maintain a log of any complaints that it receives relating to activities for which the Division may revoke the license to operate a facility for the dependent *or provider of home-*





based residential care pursuant to subsection 2. The Division shall provide to a facility for the care of adults during the day:

- (a) A summary of a complaint against the facility if the investigation of the complaint by the Division either substantiates the complaint or is inconclusive;
- (b) A report of any investigation conducted with respect to the complaint; and
- (c) A report of any disciplinary action taken against the facility. → The facility shall make the information available to the public pursuant to NRS 449.2486.
- 4. On or before February 1 of each odd-numbered year, the Division shall submit to the Director of the Legislative Counsel Bureau a written report setting forth, for the previous biennium:
- (a) Any complaints included in the log maintained by the Division pursuant to subsection 3; and
- (b) Any disciplinary actions taken by the Division pursuant to subsection 2.

Sec. 37. NRS 449.163 is hereby amended to read as follows:

- 449.163 1. In addition to the payment of the amount required by NRS 449.0308, if a medical facility, facility for the dependent, **provider of home-based residential care** or facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed violates any provision related to its licensure, including any provision of NRS 439B.410 or 449.029 to 449.2428, inclusive, **and section 8 of this act**, or any condition, standard or regulation adopted by the Board, the Division, in accordance with the regulations adopted pursuant to NRS 449.165, may:
- (a) Prohibit the facility from admitting any patient or the provider from accepting any patient, as applicable, until it determines that the facility or provider has corrected the violation;
- (b) Limit the occupancy of the facility to the number of beds occupied when the violation occurred [,] or limit the persons served by the provider to the number of persons served when the violation occurred, as applicable, until it determines that the facility or provider has corrected the violation;
- (c) If the license of the facility limits the occupancy of the facility or the number of persons served by the provider and the facility has exceeded the approved occupancy [.] or the provider has exceeded the approved number of persons served, require the facility [.] or provider, at its own expense, to move patients to another facility that is licensed [.] or obtain services for patients from another provider that is licensed, as applicable;





- (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 *or provider* and to ensure the health and safety of the patients of the facility [.] *or provider*, until:
- (1) It determines that the facility *or provider* 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 *or provider* fails to pay any administrative penalty imposed pursuant to paragraph (d) of subsection 1, the Division may:
- (a) Suspend the license of the facility *or provider* 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 *or provider* that violates any provision of NRS 439B.410 or 449.029 to 449.2428, inclusive, *and section 8 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 sections 7 and 8 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 and recipients of services from providers in accordance with applicable state and federal standards or for any other purpose authorized by the Legislature.
 - **Sec. 38.** NRS 449.172 is hereby amended to read as follows:
- 449.172 If the Division suspends or revokes the license of a person who operates a residential facility for groups *or home for residential care* for abuse, neglect, exploitation, isolation or abandonment of the occupants of the facility [...] *or home*, the Division shall suspend or revoke the license of all residential facilities for groups *and homes for residential care* operated by that person. The person who operates the facility *or home* shall move all of the persons who are receiving services in the residential facilities for groups *or homes for residential care* to other licensed residential facilities for groups *or homes for residential care* at his or her own expense.





- **Sec. 39.** NRS 449.1825 is hereby amended to read as follows: 449.1825

 1. The Division shall post on an Internet website maintained by the Division links to:
- (a) The most recent star rating assigned by the Centers for Medicare and Medicaid Services of the United States Department of Health and Human Services to each medical facility, *provider of home-based residential care* or facility for the dependent in this State that receives such a rating; and
- (b) The Ambulatory Surgical Center Quality Reporting Program maintained by the Centers for Medicare and Medicaid Services.
- 2. A medical facility , provider of home-based residential care or facility for the dependent that receives a star rating from the Centers for Medicare and Medicaid Services shall post the most recent star rating assigned to the facility in a conspicuous place near each entrance to the facility or any home operated by the provider that is regularly used by the public and, if the facility or provider maintains an Internet website that is accessible to the public, on that Internet website.
- 3. A surgical center for ambulatory patients shall post the address of the Internet website for the Ambulatory Surgical Center Quality Reporting Program maintained by the Centers for Medicare and Medicaid Services in a conspicuous place near each entrance to the surgical center for ambulatory patients that is regularly used by the public and, if the surgical center for ambulatory patients maintains an Internet website that is accessible to the public, on that Internet website.
 - **Sec. 40.** NRS 449.183 is hereby amended to read as follows:
- 449.183 1. A facility for intermediate care, facility for skilled nursing, *home for residential care with more than two residents* and residential facility for groups shall adopt a written policy that establishes:
- (a) The number of days the facility *or home* will hold the bed of a patient or resident for his or her return if the patient or resident is transferred temporarily to a hospital or other facility for medical reasons; and
- (b) That a patient or resident who is so transferred for a period that exceeds the period of the hold established pursuant to paragraph (a) will be allowed to resume his or her residency as soon as a bed becomes available, if the facility *or home* is suitable for properly caring for the patient upon his or her return.
- 2. Upon admission of a patient or resident to a facility for intermediate care, facility for skilled nursing, *home for residential care with more than two residents* or residential facility for groups, the facility *or home* shall provide to the patient or resident and, if





applicable, to the legal representative of the patient or resident, a copy of the policy established pursuant to subsection 1.

Sec. 41. NRS 449.184 is hereby amended to read as follows:

- 449.184 1. A person who operates a residential facility for groups *or home for residential care with more than two residents* shall:
- (a) Post his or her license to operate the residential facility for groups [;] or home for residential care, as applicable;
- (b) Post the rates for services provided by the residential facility for groups [;] or home for residential care, as applicable; and
- (c) Post contact information for the administrator and the designated representative of the owner or operator of the facility [,] or home, as applicable,
- in a conspicuous place in the residential facility for groups [...] or home for residential care, as applicable.
- 2. A person who operates a facility for intermediate care or facility for skilled nursing shall:
 - (a) Post his or her license to operate the facility;
- (b) Post the organizational structure of the management of the facility; and
- (c) Post contact information for the administrator and the designated representative of the owner or operator of the facility,
- in a conspicuous place in the facility for intermediate care or facility for skilled nursing.
 - **Sec. 42.** NRS 449.186 is hereby amended to read as follows:
- 449.186 A residential facility for groups *or home for residential care with more than two residents* must not be operated except under the supervision of an administrator of a residential facility for groups *or home for residential care* or a health services executive licensed pursuant to the provisions of chapter 654 of NRS.
 - Sec. 43. NRS 449.1865 is hereby amended to read as follows:
- 449.1865 A residential facility for groups *or home for residential care* must be equipped with a fire sprinkler system if the facility *or home* has three or more residents who would have difficulty perceiving danger or moving to safety in the event of a fire.
 - **Sec. 44.** NRS 449.199 is hereby amended to read as follows:
- 449.199 1. Except as otherwise provided in subsection 2, a [residential facility for groups which is authorized to have 10 or fewer beds or a] home for [individual] residential care shall not provide accommodations for a person who does not meet the requirements for admission to the [facility or] home.
- 2. A [residential facility for groups which is authorized to have 10 or fewer beds or a] home for [individual] residential care may provide accommodations for a person who is related within the third





degree of consanguinity to a resident of the [facility or] home regardless of whether the person meets the requirements for admission to the [facility or] home.

Sec. 45. NRS 449.209 is hereby amended to read as follows:

449.209 1. In addition to the requirements and prohibitions set forth in NRS 449.0305, and notwithstanding any exceptions set forth in that section, a licensed medical facility *or provider of home-based residential care* or an employee of such a medical facility *or provider* shall not:

- (a) Refer a person to a residential facility for groups *or home for residential care* that is not licensed by the Division; or
- (b) Refer a person to a residential facility for groups *or home for residential care* if the licensed medical facility or its employee knows or reasonably should know that the residential facility for groups [], *or home for residential care*, or the services provided by the residential facility for groups [], *or home for residential care*, are not appropriate for the condition of the person being referred.
- 2. If a licensed medical facility or provider of home-based residential care or an employee of such a medical facility or provider violates the provisions of subsection 1, the licensed medical facility or provider is liable for a civil penalty to be recovered by the Attorney General in the name of the Board for the first offense of not more than \$10,000 and for a second or subsequent offense of not less than \$10,000 or more than \$20,000. Unless otherwise required by federal law, the Board shall deposit all civil penalties collected pursuant to this section into a separate account in the State General Fund to be used for the enforcement of this section and the protection of the health, safety, well-being and property of residents of residential facilities for groups [...] and homes for residential care.
 - 3. The Board shall:
- (a) Establish and maintain a system to track violations of this section and NRS 449.0305. Except as otherwise provided in this paragraph, records created by or for the system are public records and are available for public inspection. The following information is confidential:
- (1) Any personally identifying information relating to a person who is referred to a residential facility for groups [...] or home for residential care.
- (2) Information which may not be disclosed under federal law.
- (b) Educate the public regarding the requirements and prohibitions set forth in this section and NRS 449.0305.
 - 4. As used in this section, "licensed medical facility" means:





- (a) A medical facility that is required to be licensed pursuant to this section and NRS 449.029 to 449.2428, inclusive [.], and section 8 of this act.
- (b) A facility for the dependent that is required to be licensed pursuant to this section and NRS 449.029 to 449.2428, inclusive [.], and section 8 of this act.
- (c) A facility that provides medical care or treatment and is required by regulation of the Board to be licensed pursuant to NRS 449.0303.
 - **Sec. 46.** NRS 449.210 is hereby amended to read as follows:
- 449.210 1. In addition to the payment of the amount required by NRS 449.0308 and any civil penalty imposed pursuant to subsection 4, a person who operates a medical facility, facility for the dependent, *provider of home-based residential care* or a facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed without a license issued by the Division is guilty of a misdemeanor.
- 2. If the Division believes that a person is operating a medical facility, facility for the dependent, *provider of home-based residential care* or a facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed without such a license, the Division may issue an order to cease and desist the operation of the facility [...] *or provider, as applicable*. The order must be served upon the person by personal delivery or by certified or registered mail, return receipt requested. The order is effective upon service.
- 3. If a person does not voluntarily cease operating a medical facility, facility for the dependent, *provider of home-based residential care* or a facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed without a license or apply for licensure within 30 days after the date of service of the order pursuant to subsection 2, the Division may bring an action in a court of competent jurisdiction pursuant to NRS 449.220.
- 4. Upon a showing by the Division that a person is operating a medical facility, facility for the dependent, *provider of home-based residential care* or a facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed without a license, a court of competent jurisdiction may:
- (a) Enjoin the person from operating the facility [...] or provider, as applicable.
- (b) Impose a civil penalty on the operator to be recovered by the Division of not more than \$10,000 for the first offense or not less than \$10,000 or more than \$25,000 for a second or subsequent offense.





5. Unless otherwise required by federal law, the Division shall deposit all civil penalties collected pursuant to paragraph (b) of subsection 4 into a separate account in the State General Fund to be used to administer and carry out the provisions of NRS 449.001 to 449.430, inclusive, *and sections 7 and 8 of this act*, and to protect the health, safety, well-being and property of the patients and residents of facilities *and recipients of services from providers* in accordance with applicable state and federal standards.

Sec. 47. NRS 449.220 is hereby amended to read as follows:

449.220 1. The Division may bring an action in the name of the State to enjoin any person, state or local government unit or agency thereof from operating or maintaining any facility *or provider* within the meaning of NRS 449.029 to 449.2428, inclusive : , and section 8 of this act:

- (a) Without first obtaining a license therefor; or
- (b) After his or her license has been revoked or suspended by the Division.
- 2. It is sufficient in such action to allege that the defendant did, on a certain date and in a certain place, operate and maintain such a facility *or provider* without a license.

Sec. 48. 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 [...], and section 8 of this act.

Sec. 49. NRS 449.2477 is hereby amended to read as follows:

449.2477 1. If a facility for long-term care *or home for residential care* wishes to include as part of any contract relating to the provision of care a clause which specifies or restricts the means by which the parties to the contract are required to resolve any dispute, the clause must be included as an addendum to the contract and:

- (a) Be printed in large font on a separate page with a separate signature line;
- (b) Fully explain the effect of signing the addendum, including, without limitation, that any dispute must be resolved exclusively through the means authorized by the clause; and
- 38 (c) Clearly state that the person signing the contract is not 39 required to sign the addendum.
 - 2. As used in this section, "facility for long-term care" means:
 - (a) A residential facility for groups;
 - (b) A facility for intermediate care;
 - (c) A facility for skilled nursing; and
 - (d) [A home for individual residential care; and





— (e)] Any unlicensed establishment that provides food, shelter, assistance and limited supervision to a resident.

Sec. 50. NRS 449.2487 is hereby amended to read as follows: 449.2487 1. A facility for the dependent, a medical facility, *a provider of home-based residential care* or an entity affiliated with such a facility *or provider* which offers housing to persons that does not include the provision of care or services which require licensure pursuant to this chapter shall conspicuously post in the facility *or any home operated by the provider* and shall include in

any contracts of sale or agreements for occupancy a notice that includes the following information:

(a) That the specific area of the facility *or home* is intended for independent living and does not directly provide or coordinate the oversight of services to meet the scheduled and unscheduled needs of its residents, including, without limitation, the provision of personal care, supportive services and health-related services.

(b) The other levels of care that are available to persons who require personal care, supportive services or health-related services, including, without limitation, residential facilities for groups, *providers of home-based residential care*, facilities for intermediate care and facilities for skilled nursing. The notice must describe the facilities and levels of care in language that is easy to understand.

(c) A statement that encourages residents to reassess on a regular basis the type of housing and care that is most appropriate

for them.

- 2. The Aging and Disability Services Division of the Department of Health and Human Services shall develop the language for the notice required by subsection 1 in consultation with nationally recognized advocacy groups for older persons and housing organizations.
- 3. For the purposes of this section, an entity is affiliated with a facility *or provider* described in subsection 1 if:
 - (a) It is under common or shared ownership;
 - (b) It is under common or shared management; or
- (c) It receives promotional or marketing support from the facility \boxminus or provider.

Sec. 51. NRS 449.2488 is hereby amended to read as follows:

449.2488 1. The Department of Health and Human Services shall develop a brochure and website to assist persons who are 55 years of age or older in determining the appropriate level of care and type of housing that they require to meet their individual needs. The brochure and website must include, without limitation:

(a) The various types of housing and levels of care that are available to persons who are 55 years of age or older, including, without limitation, residential facilities for groups, *homes for*





residential care, facilities for intermediate care and facilities for skilled nursing, distinguishing the varying degree of services that are offered by the different types of facilities;

- (b) Whether individual facilities accept payment through Medicaid or Medicare for the level of care and type of housing that the facilities provide;
- (c) The manner in which a person may obtain information concerning whether the facility *or home* has ever been found to have violated the provisions of this chapter; and
- (d) Such other information as the Department deems to be beneficial to persons who are 55 years of age or older in determining the appropriate level of care and type of housing that they require to meet their individual needs.
 - 2. As used in this section:

- (a) "Medicaid" has the meaning ascribed to it in NRS 439B.120.
- (b) "Medicare" has the meaning ascribed to it in NRS 439B.130.
- **Sec. 52.** NRS 449.531 is hereby amended to read as follows:
- 449.531 1. Except as otherwise provided in this section, a person shall not intentionally prevent another person from entering or exiting the office of a physician, a health facility, a nonprofit health facility, a public health center, a medical facility, a home operated by a provider of home-based residential care or a facility for the dependent by physically:
 - (a) Detaining the other person; or
- (b) Obstructing, impeding or hindering the other person's movement.
 - 2. The provisions of subsection 1 are inapplicable to:
- (a) An officer, employee or agent of the physician, health facility, nonprofit health facility, public health center, medical facility, *provider of home-based residential care* or facility for the dependent; or
 - (b) A peace officer as defined in NRS 169.125.
- → while acting within the course and scope of his or her duties or employment.
- 3. The provisions of subsection 1 do not prohibit a person from maintaining a picket during a strike or work stoppage in compliance with the provisions of NRS 614.160, or from engaging in any constitutionally protected exercise of free speech.
- 4. A person who violates the provisions of subsection 1 is guilty of a misdemeanor and shall be punished by a fine of not more than \$1,000, or by imprisonment in the county jail for not more than 3 months, or by both fine and imprisonment.
- 5. As used in this section, the terms "health facility," "nonprofit health facility" and "public health center" have the meanings ascribed to them in NRS 449.260.





Sec. 53. Chapter 449A of NRS is hereby amended by adding thereto a new section to read as follows:

"Provider of home-based residential care" has the meaning ascribed to it in section 7 of this act.

Sec. 54. NRS 449A.001 is hereby amended to read as follows: 449A.001 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 449A.003 to 449A.081, inclusive, *and section 53 of this act* have the meanings ascribed to them in those sections.

Sec. 55. NRS 449A.009 is hereby amended to read as follows: 449A.009 "Community-based living arrangement services" has the meaning ascribed to it in NRS [433.605.] 449.0026.

Sec. 56. NRS 449A.031 is hereby amended to read as follows: 449A.031 "Facility for the dependent" [includes:

- 15 1. A facility for the treatment of abuse of alcohol or drugs;
 - 2. A halfway house for recovering alcohol and drug abusers;
- 17 3. A facility for the care of adults during the day;
- 18 4. A residential facility for groups;

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- 19 5. An agency to provide personal care services in the home;
- 20 6. A facility for transitional living for released offenders;
- 21 7. A home for individual residential care;
- 22 8. A peer support recovery organization; and
- 23 9. A community health worker pool.] has the meaning 24 ascribed to it in NRS 449.0045.
 - **Sec. 57.** NRS 449A.054 is hereby amended to read as follows: 449A.054 [1.] "Nursing pool" [means a person or agency which provides for compensation, through its employees or by contractual arrangement with other persons, nursing services to any natural person, medical facility or facility for the dependent.
- 30 2. The term does not include:
- (a) An independent contractor who provides such services
 without the assistance of employees;
 - (b) A nursing pool based in a medical facility or facility for the dependent;
 - (c) A provider of community based living arrangement services during any period in which the provider of community based living arrangement services is engaged in providing community based living arrangement services; or
 - (d) A provider of supported living arrangement services during any period in which the provider of supported living arrangement services is engaged in providing supported living arrangement services.] has the meaning ascribed to it in NRS 449.0153.
 - **Sec. 58.** NRS 449A.066 is hereby amended to read as follows: 449A.066 "Provider of supported living arrangement services" [means a natural person who or a partnership, firm, corporation,





association, state or local government or agency thereof that has been issued a certificate pursuant to NRS 435.3305 to 435.339, inclusive, and the regulations adopted pursuant to NRS 435.3305 to 435.339, inclusive.] has the meaning ascribed to it in NRS 449.0159.

Sec. 59. NRS 449A.077 is hereby amended to read as follows: 449A.077 "Supported living arrangement services" has the meaning ascribed to it in NRS [435.3315.] 449.0185.

Sec. 60. NRS 449A.106 is hereby amended to read as follows: 449A.106 Every patient of a medical facility, *provider of home-based residential care* or facility for the dependent has the right to:

- 1. Receive information concerning any other medical or educational facility, *provider of home-based residential care* or facility for the dependent associated with the facility at which he or she is a patient which relates to the care of the patient.
- 2. Obtain information concerning the professional qualifications or associations of the persons who are treating the patient.
- 3. Receive the name of the person responsible for coordinating the care of the patient in the facility [...] or from the provider, as applicable.
- 4. Be advised if the facility [in] or provider of which he or she is a patient proposes to perform experiments on patients which affect the patient's own care or treatment.
- 5. Receive from his or her physician a complete and current description of the patient's diagnosis, plan for treatment and prognosis in terms which the patient is able to understand. If it is not medically advisable to give this information to the patient, the physician shall:
- (a) Provide the information to an appropriate person responsible for the patient; and
- (b) Inform that person that he or she shall not disclose the information to the patient.
- 6. Receive from his or her physician the information necessary for the patient to give his or her informed consent to a procedure or treatment. Except in an emergency, this information must not be limited to a specific procedure or treatment and must include:
 - (a) A description of the significant medical risks involved;
- (b) Any information on alternatives to the treatment or procedure if the patient requests that information;
- 42 (c) The name of the person responsible for the procedure or treatment; and
 - (d) The costs likely to be incurred for the treatment or procedure and any alternative treatment or procedure.





- 7. Examine the bill for his or her care and receive an explanation of the bill, whether or not the patient is personally responsible for payment of the bill.
- 8. Know the regulations of the facility *or provider* concerning his or her conduct at the facility [...] or while receiving services from the provider, as applicable.
- 9. Receive, within reasonable restrictions as to time and place, visitors of the patient's choosing, including, without limitation, friends and members of the patient's family.
- Sec. 61. NRS 449A.109 is hereby amended to read as follows: 449A.109 1. If, as a result of the incapacitation of a patient or the inability of a patient to communicate, the patient of a medical facility, [or] facility for the dependent or provider of home-based residential care who is 18 years of age or older is unable to inform the staff of the facility or provider of the persons whom the patient authorizes to visit the patient at the facility [...] or a home operated by the provider, as applicable, the facility or provider shall allow visitation rights to any person designated by the patient in a letter, form or other document authorizing visitation executed in accordance with subsection 2. The visitation rights required by this subsection must be:
- (a) Provided in accordance with the visitation policies of the facility or provider; and
- (b) The same visitation rights that are provided to a member of the patient's family who is legally related to the patient.
- 2. A person 18 years of age or older wishing to designate a person for the purposes of establishing visitation rights in a medical facility, [or] facility for the dependent or home operated by a provider of home-based residential care may execute a letter, form or other document authorizing visitation in substantially the following form:





members of my family who are legally related to me during my time as a patient.

.....

(Signed)

Sec. 62. NRS 449A.112 is hereby amended to read as follows: 449A.112 1. Every patient of a medical facility, [or] facility for the dependent *or provider of home-based residential care* has the right to:

- (a) Receive considerate and respectful care.
- (b) Refuse treatment to the extent permitted by law and to be informed of the consequences of that refusal.
- (c) Refuse to participate in any medical experiments conducted at the facility [.], by the provider or in any home operated by the provider.
- (d) Retain his or her privacy concerning the patient's program of medical care.
- (e) Have any reasonable request for services reasonably satisfied by the facility *or provider* considering its ability to do so.
- (f) Receive continuous care from the facility [...] or provider. The patient must be informed:
- (1) Of the patient's appointments for treatment and the names of the persons available at the facility for those treatments; and
- (2) By his or her physician or an authorized representative of the physician, of the patient's need for continuing care.
- 2. Except as otherwise provided in NRS 108.640, 239.0115, 439.538, 442.300 to 442.330, inclusive, and 449A.103 and chapter 629 of NRS, discussions of the care of a patient, consultation with other persons concerning the patient, examinations or treatments, and all communications and records concerning the patient are confidential. The patient must consent to the presence of any person who is not directly involved with the patient's care during any examination, consultation or treatment.
- **Sec. 63.** NRS 449A.115 is hereby amended to read as follows: 449A.115 1. Except as otherwise provided in subsection 3 and notwithstanding any other provision of law, an owner or administrator of a medical facility, [or] facility for the dependent or provider of home-based residential care is not entitled to receive, and must not receive:
- (a) Any money, personal property or real property that is devised or bequeathed by will to the owner or administrator by a resident or former resident of the facility [...] or recipient or former recipient of services from the provider, as applicable.





- (b) Any proceeds from a life insurance policy upon the life or body of a resident or former resident of the facility [.] or recipient or former recipient of services from the provider, as applicable.
- 2. Except as otherwise provided in subsection 3, any money, property, proceeds or interest therein that is described in subsection 1 passes in accordance with law as if the owner or administrator of the medical facility, [or] facility for the dependent or provider of home-based residential care had predeceased the decedent resident or former resident.
- 3. The provisions of subsections 1 and 2 do not apply if the owner or administrator of the medical facility, [or] facility for the dependent *or provider of home-based residential care* is the spouse, legal guardian or next of kin of the resident or former resident of the facility or [home,] the recipient or former recipient of services from the provider, as applicable.
- **Sec. 64.** NRS 449A.118 is hereby amended to read as follows: 449A.118 1. Every medical facility, [and] facility for the dependent *and provider of home-based residential care* shall inform each patient or the patient's legal representative, upon the admission of the patient to the facility [,] or the acceptance of a patient by the provider, of the patient's rights as listed in NRS 449A.100 and 449A.106 to 449A.115, inclusive.
- 2. In addition to the requirements of subsection 1, if a person with a disability is a patient at a facility, as that term is defined in NRS 449A.218, the facility shall inform the patient of his or her rights pursuant to NRS 449A.200 to 449A.263, inclusive.
- 3. In addition to the requirements of subsections 1 and 2, every hospital shall, upon the admission of a patient to the hospital, provide to the patient or the patient's legal representative a written disclosure approved by the Director of the Department of Health and Human Services, which written disclosure must set forth:
- (a) Notice of the existence of the Bureau for Hospital Patients created pursuant to NRS 232.462;
 - (b) The address and telephone number of the Bureau; and
- (c) An explanation of the services provided by the Bureau, including, without limitation, the services for dispute resolution described in subsection 3 of NRS 232.462.
- 4. In addition to the requirements of subsections 1, 2 and 3, every hospital shall, upon the discharge of a patient from the hospital, provide to the patient or the patient's legal representative a written disclosure approved by the Director, which written disclosure must set forth:
 - (a) If the hospital is a major hospital:
- (1) Notice of the reduction or discount available pursuant to NRS 439B.260, including, without limitation, notice of the criteria a





patient must satisfy to qualify for a reduction or discount under that section; and

- (2) Notice of any policies and procedures the hospital may have adopted to reduce charges for services provided to persons or to provide discounted services to persons, which policies and procedures are in addition to any reduction or discount required to be provided pursuant to NRS 439B.260. The notice required by this subparagraph must describe the criteria a patient must satisfy to qualify for the additional reduction or discount, including, without limitation, any relevant limitations on income and any relevant requirements as to the period within which the patient must arrange to make payment.
- (b) If the hospital is not a major hospital, notice of any policies and procedures the hospital may have adopted to reduce charges for services provided to persons or to provide discounted services to persons. The notice required by this paragraph must describe the criteria a patient must satisfy to qualify for the reduction or discount, including, without limitation, any relevant limitations on income and any relevant requirements as to the period within which the patient must arrange to make payment.
- As used in this subsection, "major hospital" has the meaning ascribed to it in NRS 439B.115.
- 5. In addition to the requirements of subsections 1 to 4, inclusive, every hospital shall post in a conspicuous place in each public waiting room in the hospital a legible sign or notice in 14-point type or larger, which sign or notice must:
- (a) Provide a brief description of any policies and procedures the hospital may have adopted to reduce charges for services provided to persons or to provide discounted services to persons, including, without limitation:
- (1) Instructions for receiving additional information regarding such policies and procedures; and
 - (2) Instructions for arranging to make payment;
 - (b) Be written in language that is easy to understand; and
 - (c) Be written in English and Spanish.
- **Sec. 65.** NRS 449A.233 is hereby amended to read as follows: 449A.233 A person employed by a facility *or provider of home-based residential care* licensed pursuant to chapter 449 of NRS or any other person shall not use any aversive intervention on a person with a disability who is a patient at the facility [...] or a recipient of services from the provider, as applicable.
- **Sec. 66.** NRS 449A.236 is hereby amended to read as follows: 449A.236 A person employed by a facility *or provider of home-based residential care* licensed pursuant to chapter 449 of NRS or any other person shall not:





- 1. Except as otherwise provided in NRS 449A.239, use physical restraint on a person with a disability who is a patient at the facility [...] or a recipient of services from the provider, as applicable.
- 2. Except as otherwise provided in NRS 449A.242, use mechanical restraint on a person with a disability who is a patient at the facility [...] or a recipient of services from the provider, as applicable.
- 3. Except as otherwise provided in NRS 449A.245, use chemical restraint on a person with a disability who is a patient at the facility [...] or a recipient of services from the provider, as applicable.
- **Sec. 67.** NRS 449A.239 is hereby amended to read as follows: 449A.239 1. Except as otherwise provided in subsection 2, physical restraint may be used on a person with a disability who is a patient at a facility *or home operated by a provider of home-based residential care* only if:
- (a) An emergency exists that necessitates the use of physical restraint;
- (b) The physical restraint is used only for the period that is necessary to contain the behavior of the patient so that the patient is no longer an immediate threat of causing physical injury to himself or herself or others or causing severe property damage; and
- (c) The use of force in the application of physical restraint does not exceed the force that is reasonable and necessary under the circumstances precipitating the use of physical restraint.
- 2. Physical restraint may be used on a person with a disability who is a patient at a facility and the provisions of subsection 1 do not apply if the physical restraint is used to:
- (a) Assist the patient in completing a task or response if the patient does not resist the application of physical restraint or if the patient's resistance is minimal in intensity and duration;
- (b) Escort or carry a patient to safety if the patient is in danger in his or her present location; or
- (c) Conduct medical examinations or treatments on the patient that are necessary.
- 3. If physical restraint is used on a person with a disability who is a patient at a facility in an emergency, the use of the procedure must be reported as a denial of rights pursuant to NRS 449A.263, regardless of whether the use of the procedure is authorized by statute. The report must be made not later than 1 working day after the procedure is used.
 - Sec. 68. NRS 453.163 is hereby amended to read as follows:
- 453.163 1. Except as otherwise provided in this subsection, each person registered pursuant to this chapter to dispense a





controlled substance listed in schedule II, III, IV or V for human consumption shall, not later than the end of the next business day after dispensing a controlled substance, upload to the database of the program established pursuant to NRS 453.162 the information described in paragraph (d) of subsection 1 of NRS 453.162. The requirements of this subsection do not apply if the controlled substance is administered directly by a practitioner to a patient in a health care facility, as defined in NRS 439.960, a resident of a home operated by a provider of home-based residential care, as defined in section 7 of this act, a child who is a resident in a child care facility, as defined in NRS 432A.024, or a prisoner, as defined in NRS 208.085. The Board shall establish by regulation and impose administrative penalties for the failure to upload information pursuant to this subsection.

- 2. The Board and the Division may cooperatively enter into a written agreement with an agency of any other state to provide, receive or exchange information obtained by the program with a program established in that state which is substantially similar to the program established pursuant to NRS 453.162, including, without limitation, providing such state access to the database of the program or transmitting information to and receiving information from such state. Any information provided, received or exchanged as part of an agreement made pursuant to this section may only be used in accordance with the provisions of this chapter.
- 3. A practitioner who is authorized to write prescriptions for and each person who is authorized to dispense controlled substances listed in schedule II, III, IV or V for human consumption who makes a good faith effort to comply with applicable laws and regulations when transmitting to the Board or the Division a report or information required by this section or NRS 453.162 or 453.164, or a regulation adopted pursuant thereto, is immune from civil and criminal liability relating to such action.
- **Sec. 69.** NRS 453.375 is hereby amended to read as follows: 453.375

 1. A controlled substance may be possessed and administered by the following persons:
 - (a) A practitioner.
- (b) A registered nurse licensed to practice professional nursing or licensed practical nurse, at the direction of a physician, physician assistant, dentist, podiatric physician or advanced practice registered nurse, or pursuant to a chart order, for administration to a patient at another location.
 - (c) A paramedic:
 - (1) As authorized by regulation of:
- (I) The State Board of Health in a county whose population is less than 100,000; or





- (II) A county or district board of health in a county whose population is 100,000 or more; and
 - (2) In accordance with any applicable regulations of:
- (I) The State Board of Health in a county whose population is less than 100,000;
- (II) A county board of health in a county whose population is 100,000 or more; or
- (III) A district board of health created pursuant to NRS 439.362 or 439.370 in any county.
- (d) A respiratory therapist, at the direction of a physician or physician assistant.
- (e) A medical student, student in training to become a physician assistant or student nurse in the course of his or her studies at an accredited college of medicine or approved school of professional or practical nursing, at the direction of a physician or physician assistant and:
- (1) In the presence of a physician, physician assistant or a registered nurse; or
- (2) Under the supervision of a physician, physician assistant or a registered nurse if the student is authorized by the college or school to administer the substance outside the presence of a physician, physician assistant or nurse.
- → A medical student or student nurse may administer a controlled substance in the presence or under the supervision of a registered nurse alone only if the circumstances are such that the registered nurse would be authorized to administer it personally.
- (f) An ultimate user or any person whom the ultimate user designates pursuant to a written agreement.
- (g) Any person designated by the head of a correctional institution.
- (h) A veterinary technician at the direction of his or her supervising veterinarian.
- (i) In accordance with applicable regulations of the State Board of Health, an employee of a residential facility for groups, as defined in NRS 449.017, or a home for residential care, as defined in NRS 449.0105, pursuant to a written agreement entered into by the ultimate user.
- (j) In accordance with applicable regulations of the State Board of Pharmacy, an animal control officer, a wildlife biologist or an employee designated by a federal, state or local governmental agency whose duties include the control of domestic, wild and predatory animals.
- (k) A person who is enrolled in a training program to become a paramedic, respiratory therapist or veterinary technician if the person possesses and administers the controlled substance in the





same manner and under the same conditions that apply, respectively, to a paramedic, respiratory therapist or veterinary technician who may possess and administer the controlled substance, and under the direct supervision of a person licensed or registered to perform the respective medical art or a supervisor of such a person.

- 2. As used in this section, "accredited college of medicine" means:
- (a) A medical school that is accredited by the Liaison Committee on Medical Education of the American Medical Association and the Association of American Medical Colleges or their successor organizations; or
- (b) A school of osteopathic medicine, as defined in NRS 633.121.
 - **Sec. 70.** 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

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- (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, or a home for residential care, as defined in NRS 449.0105, 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, 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. 71. NRS 21.130 is hereby amended to read as follows:

- 21.130 1. Before the sale of property on execution, notice of the sale, in addition to the notice required pursuant to NRS 21.075 and 21.076, must be given as follows:
- (a) In cases of perishable property, by posting written notice of the time and place of sale in three public places at the township or city where the sale is to take place, for such a time as may be reasonable, considering the character and condition of the property.
- (b) In case of other personal property, by posting a similar notice in three public places of the township or city where the sale is to take place, not less than 5 or more than 10 days before the sale, and, in case of sale on execution issuing out of a district court, by the publication of a copy of the notice in a newspaper, if there is one in the county, at least twice, the first publication being not less than 10 days before the date of the sale.
 - (c) In case of real property, by:
- (1) Personal service upon each judgment debtor or by registered mail to the last known address of each judgment debtor and, if the property of the judgment debtor is operated as a facility *or provider of home-based residential care* licensed under chapter 449 of NRS, upon the State Board of Health;
- (2) Posting a similar notice particularly describing the property, for 20 days successively, in three public places of the township or city where the property is situated and where the property is to be sold;
- (3) Publishing a copy of the notice three times, once each week, for 3 successive weeks, in a newspaper, if there is one in the county. The cost of publication must not exceed the rate for legal advertising as provided in NRS 238.070. If the newspaper authorized by this section to publish the notice of sale neglects or refuses from any cause to make the publication, then the posting of notices as provided in this section shall be deemed sufficient notice. Notice of the sale of property on execution upon a judgment for any sum less than \$500, exclusive of costs, must be given only by posting in three public places in the county, one of which must be the courthouse;





- (4) Recording a copy of the notice in the office of the county recorder; and
- (5) If the sale of property is a residential foreclosure, posting a copy of the notice in a conspicuous place on the property. In addition to the requirements of NRS 21.140, the notice must not be defaced or removed until the transfer of title is recorded or the property becomes occupied after completion of the sale, whichever is earlier.
- 2. If the sale of property is a residential foreclosure, the notice must include, without limitation:
 - (a) The physical address of the property; and
- (b) The contact information of the party who is authorized to provide information relating to the foreclosure status of the property.
- 3. If the sale of property is a residential foreclosure, a separate notice must be posted in a conspicuous place on the property and mailed, with a certificate of mailing issued by the United States Postal Service or another mail delivery service, to any tenant or subtenant, if any, other than the judgment debtor, in actual occupation of the premises not later than 3 business days after the notice of the sale is given pursuant to subsection 1. The separate notice must be in substantially the following form:

NOTICE TO TENANTS OF THE PROPERTY

Foreclosure proceedings against this property have started, and a notice of sale of the property to the highest bidder has been issued.

You may either: (1) terminate your lease or rental agreement and move out; or (2) remain and possibly be subject to eviction proceedings under chapter 40 of the Nevada Revised Statutes. Any subtenants may also be subject to eviction proceedings.

Between now and the date of the sale, you may be evicted if you fail to pay rent or live up to your other obligations to the landlord.

After the date of the sale, you may be evicted if you fail to pay rent or live up to your other obligations to the successful bidder, in accordance with chapter 118A of the Nevada Revised Statutes.





Under the Nevada Revised Statutes, eviction proceedings may begin against you after you have been given a notice to surrender.

> If the property is sold and you pay rent by the week or another period of time that is shorter than 1 month, you should generally receive notice after not less than the number of days in that period of time.

> If the property is sold and you pay rent by the month or any other period of time that is 1 month or longer, you should generally receive notice at least 60 days in advance.

Under Nevada Revised Statutes 40.280, notice must generally be served on you pursuant to chapter 40 of the Nevada Revised Statutes and may be served by:

- (1) Delivering a copy to you personally in the presence of a witness, unless service is accomplished by a sheriff, constable or licensed process server, in which case the presence of a witness is not required;
- (2) If you are absent from your place of residence or usual place of business, leaving a copy with a person of suitable age and discretion at either place and mailing a copy to you at your place of residence or business and to the place where the leased property is situated, if different; or
- (3) If your place of residence or business cannot be ascertained, or a person of suitable age or discretion cannot be found there, posting a copy in a conspicuous place on the leased property and mailing a copy to you at the place where the leased property is situated.

If the property is sold and a landlord, successful bidder or subsequent purchaser files an eviction action against you in court, you will be served with a summons and complaint and have the opportunity to respond. Eviction actions may result in temporary evictions, permanent evictions, the awarding of damages pursuant to Nevada Revised Statutes 40.360 or some combination of those results.

Under the Justice Court Rules of Civil Procedure:

- (1) You will be given at least 10 days to answer a summons and complaint;
- (2) If you do not file an answer, an order evicting you by default may be obtained against you;





- (3) A hearing regarding a temporary eviction may be called as soon as 11 days after you are served with the summons and complaint; and
- (4) A hearing regarding a permanent eviction may be called as soon as 20 days after you are served with the summons and complaint.
- 4. The sheriff shall not conduct a sale of the property on execution or deliver the judgment debtor's property to the judgment creditor if the judgment debtor or any other person entitled to notice has not been properly notified as required in this section and NRS 21.075 and 21.076.
- 5. As used in this section, "residential foreclosure" means the sale of a single family residence pursuant to NRS 40.430. As used in this subsection, "single family residence" means a structure that is comprised of not more than four units.
 - **Sec. 72.** NRS 107.080 is hereby amended to read as follows:
- 107.080 1. Except as otherwise provided in NRS 106.210, 107.0805, 107.085 and 107.086, if any transfer in trust of any estate in real property is made after March 29, 1927, to secure the performance of an obligation or the payment of any debt, a power of sale is hereby conferred upon the trustee to be exercised after a breach of the obligation for which the transfer is security.
 - 2. The power of sale must not be exercised, however, until:
 - (a) In the case of any trust agreement coming into force:
- (1) On or after July 1, 1949, and before July 1, 1957, the grantor, the person who holds the title of record, a beneficiary under a subordinate deed of trust or any other person who has a subordinate lien or encumbrance of record on the property has, for a period of 15 days, computed as prescribed in subsection 3, failed to make good the deficiency in performance or payment; or
- (2) On or after July 1, 1957, the grantor, the person who holds the title of record, a beneficiary under a subordinate deed of trust or any other person who has a subordinate lien or encumbrance of record on the property has, for a period of 35 days, computed as prescribed in subsection 3, failed to make good the deficiency in performance or payment.
- (b) The beneficiary, the successor in interest of the beneficiary or the trustee first executes and causes to be recorded in the office of the recorder of the county wherein the trust property, or some part thereof, is situated a notice of the breach and of the election to sell or cause to be sold the property to satisfy the obligation.
- (c) The beneficiary or its successor in interest or the servicer of the obligation or debt secured by the deed of trust has instructed the trustee to exercise the power of sale with respect to the property.





- (d) Not less than 3 months have elapsed after the recording of the notice or, if the notice includes an affidavit and a certification indicating that, pursuant to NRS 107.130, an election has been made to use the expedited procedure for the exercise of the power of sale with respect to abandoned residential property, not less than 60 days have elapsed after the recording of the notice.
- The 15- or 35-day period provided in paragraph (a) of subsection 2 commences on the first day following the day upon which the notice of default and election to sell is recorded in the office of the county recorder of the county in which the property is located and a copy of the notice of default and election to sell is mailed by registered or certified mail, return receipt requested and with postage prepaid to the grantor or, to the person who holds the title of record on the date the notice of default and election to sell is recorded, and, if the property is operated as a facility or provider of **home-based residential care** licensed under chapter 449 of NRS, to the State Board of Health, at their respective addresses, if known, otherwise to the address of the trust property or, if authorized by the parties, delivered by electronic transmission. The notice of default and election to sell must describe the deficiency in performance or payment and may contain a notice of intent to declare the entire unpaid balance due if acceleration is permitted by the obligation secured by the deed of trust, but acceleration must not occur if the deficiency in performance or payment is made good and any costs, fees and expenses incident to the preparation or recordation of the notice and incident to the making good of the deficiency in performance or payment are paid within the time specified in subsection 2.
- 4. The trustee, or other person authorized to make the sale under the terms of the trust deed or transfer in trust, shall, after expiration of the applicable period specified in paragraph (d) of subsection 2 following the recording of the notice of breach and election to sell, and before the making of the sale, give notice of the time and place thereof by recording the notice of sale and by:
- (a) Providing the notice to each trustor, any other person entitled to notice pursuant to this section and, if the property is operated as a facility *or provider of home-based residential care* licensed under chapter 449 of NRS, the State Board of Health, by personal service, by electronic transmission if authorized by the parties or by mailing the notice by registered or certified mail to the last known address of the trustor and any other person entitled to such notice pursuant to this section:
- (b) Posting a similar notice particularly describing the property, for 20 days successively, in a public place in the county where the property is situated; and





- (c) Publishing a copy of the notice three times, once each week for 3 consecutive weeks, in a newspaper of general circulation in the county where the property is situated or, if the property is a time share, by posting a copy of the notice on an Internet website and publishing a statement in a newspaper in the manner required by subsection 3 of NRS 119A.560.
- 5. Every sale made under the provisions of this section and other sections of this chapter vests in the purchaser the title of the grantor and any successors in interest without equity or right of redemption. Except as otherwise provided in subsection 7, a sale made pursuant to this section must be declared void by any court of competent jurisdiction in the county where the sale took place if:
- (a) The trustee or other person authorized to make the sale does not substantially comply with the provisions of this section;
- (b) Except as otherwise provided in subsection 6, an action is commenced in the county where the sale took place within 30 days after the date on which the trustee's deed upon sale is recorded pursuant to subsection 10 in the office of the county recorder of the county in which the property is located; and
- (c) A notice of lis pendens providing notice of the pendency of the action is recorded in the office of the county recorder of the county where the sale took place within 5 days after commencement of the action.
- 6. If proper notice is not provided pursuant to subsection 3 or paragraph (a) of subsection 4 to the grantor, to the person who holds the title of record on the date the notice of default and election to sell is recorded, to each trustor or to any other person entitled to such notice, the person who did not receive such proper notice may commence an action pursuant to subsection 5 within 90 days after the date of the sale.
- 7. Upon expiration of the time for commencing an action which is set forth in subsections 5 and 6, any failure to comply with the provisions of this section or any other provision of this chapter does not affect the rights of a bona fide purchaser as described in NRS 111.180.
- 8. If, in an action brought by the grantor or the person who holds title of record in the district court in and for the county in which the real property is located, the court finds that the beneficiary, the successor in interest of the beneficiary or the trustee did not comply with any requirement of subsection 2, 3 or 4, the court must award to the grantor or the person who holds title of record:
- (a) Damages of \$5,000 or treble the amount of actual damages, whichever is greater;





- (b) An injunction enjoining the exercise of the power of sale until the beneficiary, the successor in interest of the beneficiary or the trustee complies with the requirements of subsections 2, 3 and 4; and
 - (c) Reasonable attorney's fees and costs,

- unless the court finds good cause for a different award. The remedy provided in this subsection is in addition to the remedy provided in subsection 5.
- 9. The sale of a lease of a dwelling unit of a cooperative housing corporation vests in the purchaser title to the shares in the corporation which accompany the lease.
- 10. After a sale of property is conducted pursuant to this section, the trustee shall:
- (a) Within 30 days after the date of the sale, record the trustee's deed upon sale in the office of the county recorder of the county in which the property is located; or
- (b) Within 20 days after the date of the sale, deliver the trustee's deed upon sale to the successful bidder. Within 10 days after the date of delivery of the deed by the trustee, the successful bidder shall record the trustee's deed upon sale in the office of the county recorder of the county in which the property is located.
- 11. Within 5 days after recording the trustee's deed upon sale, the trustee or successful bidder, whoever recorded the trustee's deed upon sale pursuant to subsection 10, shall cause a copy of the trustee's deed upon sale to be posted conspicuously on the property. The failure of a trustee or successful bidder to effect the posting required by this subsection does not affect the validity of a sale of the property to a bona fide purchaser for value without knowledge of the failure.
- 12. If the successful bidder fails to record the trustee's deed upon sale pursuant to paragraph (b) of subsection 10, the successful bidder:
- (a) Is liable in a civil action to any party that is a senior lienholder against the property that is the subject of the sale in a sum of up to \$500 and for reasonable attorney's fees and the costs of bringing the action; and
- (b) Is liable in a civil action for any actual damages caused by the failure to comply with the provisions of subsection 10 and for reasonable attorney's fees and the costs of bringing the action.
- 13. The county recorder shall, in addition to any other fee, at the time of recording a notice of default and election to sell collect:
 - (a) A fee of \$150 for deposit in the State General Fund.
- (b) A fee of \$95 for deposit in the Account for Foreclosure Mediation Assistance, which is hereby created in the State General Fund. The Account must be administered by the Interim Finance





Committee and the money in the Account may be expended only for the purpose of:

- (1) Supporting a program of foreclosure mediation; and
- (2) The development and maintenance of an Internet portal for a program of foreclosure mediation pursuant to subsection 18 of NRS 107.086.
- (c) A fee of \$5 to be paid over to the county treasurer on or before the fifth day of each month for the preceding calendar month. The county recorder may direct that 1.5 percent of the fees collected by the county recorder pursuant to this paragraph be transferred into a special account for use by the office of the county recorder. The county treasurer shall remit quarterly to the organization operating the program for legal services that receives the fees charged pursuant to NRS 19.031 for the operation of programs for the indigent all the money received from the county recorder pursuant to this paragraph.
- 14. The fees collected pursuant to paragraphs (a) and (b) of subsection 13 must be paid over to the county treasurer by the county recorder on or before the fifth day of each month for the preceding calendar month, and, except as otherwise provided in this subsection, must be placed to the credit of the State General Fund or the Account for Foreclosure Mediation Assistance as prescribed pursuant to subsection 13. The county recorder may direct that 1.5 percent of the fees collected by the county recorder be transferred into a special account for use by the office of the county recorder. The county treasurer shall, on or before the 15th day of each month, remit the fees deposited by the county recorder pursuant to this subsection to the State Controller for credit to the State General Fund or the Account as prescribed in subsection 13.
- 15. The beneficiary, the successor in interest of the beneficiary or the trustee who causes to be recorded the notice of default and election to sell shall not charge the grantor or the successor in interest of the grantor any portion of any fee required to be paid pursuant to subsection 13.
- 16. As used in this section, "trustee" means the trustee of record.
 - **Sec. 73.** NRS 159.081 is hereby amended to read as follows:
- 159.081 1. A guardian of the person shall make and file in the guardianship proceeding for review of the court a written report on the condition of the protected person and the exercise of authority and performance of duties by the guardian:
- (a) Annually, not later than 60 days after the anniversary date of the appointment of the guardian;
- (b) Within 10 days of moving a protected person to a secured residential long-term care facility; and





(c) At such other times as the court may order.

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- 2. A report filed pursuant to paragraph (b) of subsection 1 must:
- (a) Include a copy of the written recommendation upon which the transfer was made; and
- (b) Be served, without limitation, on the protected person and any attorney for the protected person.
- 3. The court may prescribe the form for filing a report described in subsection 1. Such a report must include, without limitation:
 - (a) The physical condition of the protected person;
 - (b) The place of residence of the protected person;
- (c) The name of all other persons living with the protected person unless the protected person is residing at a secured residential long-term care facility, group home, supportive living facility, assisted living facility or other facility for long-term care; and
 - (d) Any other information required by the court.
- 4. The guardian of the person shall give to the guardian of the estate, if any, a copy of each report not later than 30 days after the date the report is filed with the court.
- 5. The court is not required to hold a hearing or enter an order regarding the report.
- 6. As used in this section, "facility *or home* for long-term care" has the meaning ascribed to it in NRS 427A.028.
 - **Sec. 74.** NRS 162A.220 is hereby amended to read as follows:
- 162A.220 1. A power of attorney must be signed by the principal or, in the principal's conscious presence, by another individual directed by the principal to sign the principal's name on the power of attorney. A signature on a power of attorney is presumed to be genuine if the principal acknowledges the signature before a notary public or other individual authorized by law to take acknowledgments.
- 2. If the principal resides in a hospital, residential facility for groups, facility for skilled nursing or home for [individual] residential care, at the time of execution of the power of attorney, a certification of competency of the principal from a physician, psychologist or psychiatrist must be attached to the power of attorney.
- 3. If the principal resides or is about to reside in a hospital, assisted living facility or facility for skilled nursing at the time of execution of the power of attorney, in addition to the prohibition set forth in NRS 162A.840 and except as otherwise provided in subsection 4, the principal may not name as agent in any power of attorney for any purpose:





- (a) The hospital, assisted living facility or facility for skilled nursing;
 - (b) An owner or operator of the hospital, assisted living facility or facility for skilled nursing; or
 - (c) An employee of the hospital, assisted living facility or facility for skilled nursing.
 - 4. The principal may name as agent any person identified in subsection 3 if that person is:
 - (a) The spouse, legal guardian or next of kin of the principal; or
 - (b) Named only for the purpose of assisting the principal to establish eligibility for Medicaid and the power of attorney complies with the provisions of subsection 5.
 - 5. A person may be named as agent pursuant to paragraph (b) of subsection 4 only if:
 - (a) A valid financial power of attorney for the principal does not exist;
 - (b) The agent has made a good faith effort to contact each family member of the principal identified in the records of the hospital, assisted living facility or facility for skilled nursing, as applicable, to request that the family member establish a financial power of attorney for the principal and has documented his or her effort;
 - (c) The power of attorney specifies that the agent is only authorized to access financial documents of the principal which are necessary to prove eligibility of the principal for Medicaid as described in the application for Medicaid and specifies that any request for such documentation must be accompanied by a copy of the application for Medicaid or by other proof that the document is necessary to prove eligibility for Medicaid;
 - (d) The power of attorney specifies that the agent does not have authority to access money or any other asset of the principal for any purpose; and
 - (e) The power of attorney specifies that the power of attorney is only valid until eligibility of the principal for Medicaid is determined or 6 months after the power of attorney is signed, whichever is sooner.
 - 6. A person who is named as agent pursuant to paragraph (b) of subsection 4 shall not use the power of attorney for any purpose other than to assist the principal to establish eligibility for Medicaid and shall not use the power of attorney in a manner inconsistent with the provisions of subsection 5. A person who violates the provisions of this subsection is guilty of a category C felony and shall be punished as provided in NRS 193.130.
 - 7. As used in this section:





- 1 (a) "Assisted living facility ["] or home" has the meaning 2 ascribed to it in NRS 422.3962.
 - (b) "Facility for skilled nursing" has the meaning ascribed to it in NRS 449.0039.
 - (c) "Home for [individual] residential care" has the meaning ascribed to it in NRS 449.0105.
 - (d) "Hospital" has the meaning ascribed to it in NRS 449.012.
- 8 (e) "Residential facility for groups" has the meaning ascribed to 9 it in NRS 449.017.
 - **Sec. 75.** NRS 162A.740 is hereby amended to read as follows: 162A.740 "Health care facility" includes:
 - 1. Any medical facility as defined in NRS 449.0151:
 - 2. A home for residential care, as defined in NRS 449.0105; and
 - [2.] 3. Any facility for the dependent as defined in NRS 449.0045.
 - **Sec. 76.** NRS 162A.790 is hereby amended to read as follows:
 - 162A.790 1. Any adult person may execute a power of attorney enabling the agent named in the power of attorney to make decisions concerning health care for the principal if that principal becomes incapable of giving informed consent concerning such decisions.
 - 2. A power of attorney for health care must be signed by the principal. The principal's signature on the power of attorney for health care must be:
 - (a) Acknowledged before a notary public; or
 - (b) Witnessed by two adult witnesses who know the principal personally.
 - 3. Neither of the witnesses to a principal's signature may be:
 - (a) A provider of health care;
 - (b) An employee of a provider of health care;
 - (c) An operator of a health care facility;
 - (d) An employee of a health care facility; or
 - (e) The agent.

- 4. At least one of the witnesses to a principal's signature must be a person who is:
- (a) Not related to the principal by blood, marriage or adoption; and
- (b) To the best of the witnesses' knowledge, not entitled to any part of the estate of the principal upon the death of the principal.
- 5. If the principal resides in a hospital, residential facility for groups, facility for skilled nursing or home for [individual] residential care, at the time of the execution of the power of attorney, a certification of competency of the principal from a





physician, psychologist or psychiatrist must be attached to the power of attorney.

- 6. A power of attorney executed in a jurisdiction outside of this State is valid in this State if, when the power of attorney was executed, the execution complied with the laws of that jurisdiction or the requirements for a military power of attorney pursuant to 10 U.S.C. § 1044b.
 - 7. As used in this section:

- (a) "Facility for skilled nursing" has the meaning ascribed to it in NRS 449.0039.
- (b) "Home for **[individual]** residential care" has the meaning ascribed to it in NRS 449.0105.
 - (c) "Hospital" has the meaning ascribed to it in NRS 449.012.
- (d) "Residential facility for groups" has the meaning ascribed to it in NRS 449.017.
- **Sec. 77.** NRS 202.2491 is hereby amended to read as follows: 202.2491 1. Except as otherwise provided in subsections 5 and 6 and NRS 202.24915, the smoking of tobacco in any form is prohibited if done in any:
 - (a) Public elevator.
 - (b) Public building.
 - (c) Public waiting room, lobby or hallway of any:
- (1) Medical facility or facility for the dependent as defined in chapter 449 of NRS; [or]
- (2) Home operated by a provider of home-based residential care as defined in chapter 449 of NRS; or
- (3) Office of any chiropractor, dentist, physical therapist, physician, podiatric physician, psychologist, optician, optometrist or doctor of Oriental medicine.
 - (d) Hotel or motel when so designated by the operator thereof.
- (e) Public area of a store principally devoted to the sale of food for human consumption off the premises.
 - (f) Child care facility.
- (g) Bus used by the general public, other than a chartered bus, or in any maintenance facility or office associated with a bus system operated by any regional transportation commission.
 - (h) School bus.
 - (i) Video arcade.
- 2. The person in control of an area listed in paragraph (c), (d), (e) or (g) of subsection 1:
- (a) Shall post in the area signs prohibiting smoking in any place not designated for that purpose as provided in paragraph (b).
- (b) May designate separate rooms or portions of the area which may be used for smoking, except for a room or portion of the area of





a store described in paragraph (e) of subsection 1 if the room or portion of the area:

- (1) Is leased to or operated by a person licensed pursuant to NRS 463.160; and
- (2) Does not otherwise qualify for an exemption set forth in NRS 202.24915.
 - 3. The person in control of a public building:
- (a) Shall post in the area signs prohibiting smoking in any place not designated for that purpose as provided in paragraph (b).
- (b) Shall, except as otherwise provided in this subsection, designate a separate area which may be used for smoking.
- A school district which prohibits the use of tobacco by pupils need not designate an area which may be used by the pupils to smoke.
- 4. The operator of a restaurant with a seating capacity of 50 or more shall maintain a flexible nonsmoking area within the restaurant and offer each patron the opportunity to be seated in a smoking or nonsmoking area.
- 5. A business which derives more than 50 percent of its gross receipts from the sale of alcoholic beverages or 50 percent of its gross receipts from gaming operations may be designated as a smoking area in its entirety by the operator of the business.
 - 6. The smoking of tobacco is not prohibited in:
- (a) Any room or area designated for smoking pursuant to paragraph (b) of subsection 2 or paragraph (b) of subsection 3.
- (b) A licensed gaming establishment. A licensed gaming establishment may designate separate rooms or areas within the establishment which may or may not be used for smoking.
 - 7. As used in this section:
- (a) "Child care facility" means an establishment operated and maintained to furnish care on a temporary or permanent basis, during the day or overnight, to five or more children under 18 years of age, if compensation is received for the care of any of those children. The term does not include the home of a natural person who provides child care.
- (b) "Licensed gaming establishment" has the meaning ascribed to it in NRS 463.0169.
- (c) "Public building" means any building or office space owned or occupied by:
- 40 (1) Any component of the Nevada System of Higher 41 Education and used for any purpose related to the System.
 - (2) The State of Nevada and used for any public purpose, other than that used by the Department of Corrections to house or provide other services to offenders.





- (3) Any county, city, school district or other political subdivision of the State and used for any public purpose.
- → If only part of a building is owned or occupied by an entity described in this paragraph, the term means only that portion of the building which is so owned or occupied.
 - (d) "School bus" has the meaning ascribed to it in NRS 483.160.
- (e) "Video arcade" means a facility legally accessible to persons under 18 years of age which is intended primarily for the use of pinball and video machines for amusement and which contains a minimum of 10 such machines.
 - **Sec. 78.** NRS 218E.760 is hereby amended to read as follows:
- 218E.760 1. The Committee may review, study and comment upon issues relating to senior citizens, veterans and adults with special needs, including, without limitation:
- (a) Initiatives to ensure the financial and physical wellness of senior citizens, veterans and adults with special needs;
- (b) The abuse, neglect, exploitation, isolation and abandonment of senior citizens and adults with special needs;
 - (c) Public outreach and advocacy;
- (d) Programs for the provision of services to senior citizens, veterans and adults with special needs in this State and methods to enhance such programs to ensure that services are provided in the most appropriate setting;
- (e) Programs that provide services and care in the home which allow senior citizens to remain at home and live independently instead of in institutional care;
- (f) The availability of useful information and data as needed for the State of Nevada to effectively make decisions, plan budgets and monitor costs and outcomes of services provided to senior citizens, veterans and adults with special needs;
- (g) Laws relating to the appointment of a guardian and the improvement of laws for the protection of senior citizens and adults with special needs who have been appointed a guardian, including, without limitation, the improvement of investigations relating to guardianships and systems for monitoring guardianships; and
- (h) The improvement of facilities *or homes* for long-term care in this State, including, without limitation:
- (1) Reducing the number of persons placed in facilities *or homes* for long-term care located outside this State;
- (2) Creating units for acute care and long-term care to treat persons suffering from dementia who exhibit behavioral problems;
- (3) Developing alternatives to placement in facilities *or homes* for long-term care, including, without limitation, units for long-term care located in other types of facilities, and ensuring that





such alternatives are available throughout this State for the treatment of persons with psychological needs; and

- (4) Creating a program to provide follow-up care and to track the ongoing progress of residents of facilities *or homes* for longterm care.
 - 2. The Committee may:

- (a) Review, study and comment upon matters relating to senior citizens, veterans and adults with special needs;
- (b) Conduct investigations and hold hearings in connection with its duties pursuant to this section and exercise any of the investigative powers set forth in NRS 218E.105 to 218E.140, inclusive:
- (c) Request that the Legislative Counsel Bureau assist in the research, investigations, hearings and studies of the Committee; and
- (d) Make recommendations to the Legislature concerning senior citizens, veterans and adults with special needs.
- 3. The Committee shall, on or before January 15 of each oddnumbered year, submit to the Director for transmittal to the next regular session a report concerning the study conducted pursuant to subsection 1.
- 4. As used in this section, "facility *or home* for long-term care" has the meaning ascribed to it in NRS 427A.028.
- **Sec. 79.** NRS 278.02373 is hereby amended to read as follows:
- 278.02373 As used in NRS 278.02373 to 278.02377, inclusive, unless the context otherwise requires, the words and terms defined in NRS 278.02374 [.] and 278.02375 [and 278.02376] have the meanings ascribed to them in those sections.
- **Sec. 80.** NRS 278.02377 is hereby amended to read as follows:
- 278.02377 1. In any ordinance adopted by a city or county, the definition of "single-family residence" must include, without limitation, a:
- (a) [Residential facility for groups] Home for residential care in which [fewer than 11] unrelated persons with disabilities reside with:
- (1) House parents or guardians who need not be related to any of the persons with disabilities; and
- (2) If applicable, additional persons who are related to the house parents or guardians within the third degree of consanguinity or affinity.
 - (b) [Home for individual residential care.
- (c) Halfway house for recovering alcohol and drug abusers in which fewer than 11 persons reside.





- 2. The provisions of subsection 1 do not prohibit a definition of "single-family residence" [that allows more persons to reside in a residential facility for groups] or the regulation of homes that are operated on a commercial basis. For the purposes of this subsection, a residential facility for groups, a halfway house for recovering alcohol and drug abusers or a home for [individual] residential care shall not be deemed to be a home that is operated on a commercial basis for any purpose relating to zoning.
- 3. As used in this section, "person with a disability" means a person:
- (a) With a physical or mental impairment that substantially limits one or more of the major life activities of the person;
 - (b) With a record of such an impairment; or
 - (c) Who is regarded as having such an impairment.
 - **Sec. 81.** NRS 319.147 is hereby amended to read as follows:
- 319.147 1. The Division shall certify an assisted living facility *or home* for the purpose of providing services pursuant to the provisions of the home and community-based services waiver which are amended pursuant to NRS 422.3962 if the facility [:] *or home:*
- (a) Provides assisted living supportive services to senior citizens of low or moderate income;
- (b) Provides or arranges for the provision of case management services for its residents;
- (c) Guarantees affordable housing for a period of at least 15 years after the facility is certified;
- (d) Is financed through tax credits relating to low-income housing or other public funds; and
- (e) Satisfies any other requirements set forth by the Division in any regulations adopted by the Division.
- 2. The Division shall adopt regulations concerning the certification of assisted living facilities *or homes* pursuant to this section.
 - 3. As used in this section:
- (a) "Assisted living facility ["] or home" has the meaning ascribed to it in paragraph (a) of subsection 3 of NRS 422.3962.
- (b) "Assisted living supportive services" has the meaning ascribed to it in paragraph (b) of subsection 3 of NRS 422.3962.
 - **Sec. 82.** NRS 422.3962 is hereby amended to read as follows:
- 422.3962 1. The Department shall apply to the Secretary of Health and Human Services to amend its home and community-based services waiver granted pursuant to 42 U.S.C. § 1396n. The waiver must be amended, in addition to providing coverage for any home and community-based services which the waiver covers on June 4, 2005, to authorize the Department to include as medical





assistance under Medicaid the funding of assisted living supportive services for senior citizens who reside in assisted living facilities *or homes* which are certified by the Housing Division of the Department of Business and Industry pursuant to NRS 319.147.

2. The Department shall:

- (a) Cooperate with the Federal Government in amending the waiver pursuant to this section;
- (b) If the Federal Government approves the amendments to the waiver, adopt regulations necessary to carry out the provisions of this section, including, without limitation, the criteria to be used in determining eligibility for the assisted living supportive services funded pursuant to subsection 1; and
- (c) Implement the amendments to the waiver only to the extent that the amendments are approved by the Federal Government.
 - 3. As used in this section:
- (a) "Assisted living facility ["] or home" means a residential facility for groups or home for residential care that:
- (1) Satisfies the requirements set forth in subsection 7 of NRS 449.0302; and
- (2) Has staff at the facility *or home* available 24 hours a day, 7 days a week, to provide scheduled assisted living supportive services and assisted living supportive services that are required in an emergency in a manner that promotes maximum dignity and independence of residents of the facility [-] *or home*.
- (b) "Assisted living supportive services" means services which are provided at an assisted living facility to residents of the assisted living facility [] or home, including, without limitation:
 - (1) Personal care services;
 - (2) Homemaker services;
 - (3) Chore services;
 - (4) Attendant care;
 - (5) Companion services;
 - (6) Medication oversight;
 - (7) Therapeutic, social and recreational programming; and
- (8) Services which ensure that the residents of the facility *or home* are safe, secure and adequately supervised.

Sec. 83. NRS 427A.028 is hereby amended to read as follows: 427A.028 "Facility *or home* for long-term care" means:

- 1. A residential facility for groups as defined in NRS 449.017;
- 2. A facility for intermediate care as defined in NRS 449.0038;
- 3. A facility for skilled nursing as defined in NRS 449.0039;
- 42 4. A home for [individual] residential care as defined in NRS 43 449.0105; and
 - 5. Any unlicensed establishment that provides food, shelter, assistance and limited supervision to a resident.





Sec. 84. NRS 433.806 is hereby amended to read as follows:

433.806 1. Any person or entity, including, without limitation, the Division, that determines the placement of a person with a mental illness or a person with a developmental disability in a mental health facility, medical facility, [or] facility for the dependent, with a provider of [community based living arrangement services] home-based residential care or any other placement shall, when making such a determination, consider whether the mental health facility, medical facility, facility for the dependent, provider of [community based living arrangement services] home-based residential care or other placement is capable of:

- (a) Adequately addressing the needs of the person for care and services, including, without limitation, the administration of medication; and
- (b) Ensuring the safety of the person in the event of a fire or other emergency.
 - 2. As used in this section:

- (a) ["Community based living arrangement services" has the meaning ascribed to it in NRS 433.605.
- (b) "Facility for the dependent" has the meaning ascribed to it in NRS 449.0045.
- **[(e)]** (b) "Medical facility" has the meaning ascribed to it in NRS 449.0151.
- (c) "Provider of home-based residential care" has the meaning ascribed to it in section 7 of this act.
 - **Sec. 85.** NRS 435.007 is hereby amended to read as follows:
- 435.007 As used in this chapter, unless the context otherwise requires:
- 1. "Administrative officer" means a person with overall executive and administrative responsibility for those state or nonstate intellectual and developmental disability centers designated by the Administrator.
 - 2. "Administrator" means the Administrator of the Division.
- 3. "Child" means any person under the age of 18 years who may be eligible for intellectual disability services or developmental disability services.
- 4. "Department" means the Department of Health and Human Services.
- 5. "Developmental disability" means autism, cerebral palsy, epilepsy or any other neurological condition diagnosed by a qualified professional that:
- (a) Is manifested before the person affected attains the age of 22 years;
 - (b) Is likely to continue indefinitely;





- (c) Results in substantial functional limitations, as measured by a qualified professional, in three or more of the following areas of major life activity:
 - (1) Taking care of oneself;
 - (2) Understanding and use of language;
 - (3) Learning;

- (4) Mobility;
- (5) Self-direction; and
- (6) Capacity for independent living; and
- (d) Results in the person affected requiring a combination of individually planned and coordinated services, support or other assistance that is lifelong or has an extended duration.
- 6. "Director of the Department" means the administrative head of the Department.
- 7. "Division" means the Aging and Disability Services Division of the Department.
- 8. "Division facility" means any unit or subunit operated by the Division for the care, treatment and training of consumers.
- 9. "Home for residential care" has the meaning ascribed to it in NRS 449.0105.
- 10. "Intellectual disability" means significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period.
- means an organized program for providing appropriate services and treatment to persons with intellectual disabilities and persons with developmental disabilities. An intellectual and developmental disability center may include facilities for residential treatment and training.
- [11.] 12. "Medical director" means the chief medical officer of any program of the Division for persons with intellectual disabilities or developmental disabilities.
- [12.] 13. "Mental illness" has the meaning ascribed to it in NRS 433.164.
- [13.] 14. "Parent" means the parent of a child. The term does not include the parent of a person who has attained the age of 18 years.
- [14.] 15. "Person" includes a child and any other consumer with an intellectual disability and a child or any other consumer with a developmental disability who has attained the age of 18 years.
- [15.] 16. "Person professionally qualified in the field of psychiatric mental health" has the meaning ascribed to it in NRS 433.209.
- [16.] 17. "Provider of home-based residential care" has the meaning ascribed to it in section 7 of this act.





- 18. "Residential facility for groups" [means a structure similar to a private residence which will house a small number of persons in a homelike atmosphere.
- —17.] has the meaning ascribed to it in NRS 449.017.
- 19. "Training" means a program of services directed primarily toward enhancing the health, welfare and development of persons with intellectual disabilities or persons with developmental disabilities through the process of providing those experiences that will enable the person to:
- (a) Develop his or her physical, intellectual, social and emotional capacities to the fullest extent;
- (b) Live in an environment that is conducive to personal dignity; and
- (c) Continue development of those skills, habits and attitudes essential to adaptation in contemporary society.
- [18.] 20. "Treatment" means any combination of procedures or activities, of whatever level of intensity and whatever duration, ranging from occasional counseling sessions to full-time admission to a residential facility [.] or a home operated by a provider of home-based residential care.
 - **Sec. 86.** NRS 435.060 is hereby amended to read as follows:
- 435.060 The Division may operate a residential facility for groups *or home for residential care* to care for and maintain persons with intellectual disabilities or persons with developmental disabilities until they can live in a more normal situation.
 - **Sec. 87.** NRS 435.070 is hereby amended to read as follows:
- 435.070 The Division is responsible for the administration of all residential facilities for groups *and homes for residential care* established pursuant to NRS 435.060 to 435.120, inclusive, and may enter into such agreements with public and private agencies and adopt such regulations as it deems necessary for the operation of any facility [...] or home.
 - **Sec. 88.** NRS 439.630 is hereby amended to read as follows: 439.630 1. The Department shall:
- (a) Conduct, or require the Grants Management Advisory Committee created by NRS 232.383 to conduct, public hearings to accept public testimony from a wide variety of sources and perspectives regarding existing or proposed programs that:
 - (1) Promote public health;
- (2) Improve health services for children, senior citizens and persons with disabilities;
- (3) Reduce or prevent the abuse of and addiction to alcohol and drugs; and
- (4) Offer other general or specific information on health care in this State.





- (b) Establish a process to evaluate the health and health needs of the residents of this State and a system to rank the health problems of the residents of this State, including, without limitation, the specific health problems that are endemic to urban and rural communities, and report the results of the evaluation to the Legislative Committee on Health Care on an annual basis.
- (c) Subject to legislative authorization, allocate money for direct expenditure by the Department to pay for prescription drugs, pharmaceutical services and, to the extent money is available, other benefits, including, without limitation, dental and vision benefits and hearing aids or other devices that enhance the ability to hear, for senior citizens pursuant to NRS 439.635 to 439.690, inclusive. From the money allocated pursuant to this paragraph, the Department may subsidize any portion of the cost of providing prescription drugs, pharmaceutical services and, to the extent money is available, other benefits, including, without limitation, dental and vision benefits and hearing aids or other devices that enhance the ability to hear, to senior citizens pursuant to NRS 439.635 to 439.690, inclusive. The Department shall consider recommendations from the Grants Management Advisory Committee in carrying out the provisions of NRS 439.635 to 439.690, inclusive. The Department shall submit a quarterly report to the Governor, the Interim Finance Committee, the Legislative Committee on Health Care and any other committees or commissions the Director deems appropriate regarding the general manner in which expenditures have been made pursuant to this paragraph.
- (d) Subject to legislative authorization, allocate, by contract or grant, money for expenditure by the Aging and Disability Services Division of the Department in the form of grants for existing or new programs that assist senior citizens and other specified persons with independent living, including, without limitation, programs that provide:
- (1) Respite care or relief of informal caretakers, including, without limitation, informal caretakers of any person with Alzheimer's disease or other related dementia regardless of the age of the person;
- (2) Transportation to new or existing services to assist senior citizens in living independently; and
- (3) Care in the home which allows senior citizens to remain at home instead of in institutional care.
- → The Aging and Disability Services Division of the Department shall consider recommendations from the Grants Management Advisory Committee concerning the independent living needs of senior citizens.





- (e) Allocate \$200,000 of all revenues deposited in the Fund for a Healthy Nevada each year for direct expenditure by the Director to:
- (1) Provide guaranteed funding to finance assisted living facilities that satisfy the criteria for certification set forth in NRS 319.147; and
- (2) Fund assisted living facilities *or homes* that satisfy the criteria for certification set forth in NRS 319.147 and assisted living supportive services that are provided pursuant to the provisions of the home and community-based services waiver which are amended pursuant to NRS 422.3962.
- The Director shall develop policies and procedures for distributing the money allocated pursuant to this paragraph. Money allocated pursuant to this paragraph does not revert to the Fund at the end of the fiscal year.
- (f) Subject to legislative authorization, allocate to the Division money for programs that are consistent with the guidelines established by the Centers for Disease Control and Prevention of the United States Department of Health and Human Services relating to evidence-based best practices to prevent, reduce or treat the use of tobacco and the consequences of the use of tobacco. In making allocations pursuant to this paragraph, the Division shall allocate the money, by contract or grant:
- (1) To the district board of health in each county whose population is 100,000 or more for expenditure for such programs in the respective county;
- (2) For such programs in counties whose population is less than 100,000; and
- (3) For statewide programs for tobacco cessation and other statewide services for tobacco cessation and for statewide evaluations of programs which receive an allocation of money pursuant to this paragraph, as determined necessary by the Division and the district boards of health.
- (g) Subject to legislative authorization, allocate, by contract or grant, money for expenditure for programs that improve the health and well-being of residents of this State, including, without limitation, programs that improve health services for children.
- (h) Subject to legislative authorization, allocate, by contract or grant, money for expenditure for programs that improve the health and well-being of persons with disabilities. In making allocations pursuant to this paragraph, the Department shall, to the extent practicable, allocate the money evenly among the following three types of programs:
- (1) Programs that provide respite care or relief of informal caretakers for persons with disabilities;





- (2) Programs that provide positive behavioral supports to persons with disabilities; and
- (3) Programs that assist persons with disabilities to live safely and independently in their communities outside of an institutional setting.
- (i) Subject to legislative authorization, allocate money for direct expenditure by the Department to subsidize any portion of the cost of providing prescription drugs, pharmaceutical services and, to the extent money is available, other benefits, including, without limitation, dental and vision benefits and hearing aids or other devices that enhance the ability to hear, to persons with disabilities pursuant to NRS 439.705 to 439.795, inclusive. The Department shall consider recommendations from the Grants Management Advisory Committee in carrying out the provisions of NRS 439.705 to 439.795, inclusive.
- (j) Maximize expenditures through local, federal and private matching contributions.
- (k) Ensure that any money expended from the Fund will not be used to supplant existing methods of funding that are available to public agencies.
- (1) Develop policies and procedures for the administration and distribution of contracts, grants and other expenditures to state agencies, political subdivisions of this State, nonprofit organizations, universities, state colleges and community colleges. A condition of any such contract or grant must be that not more than 8 percent of the contract or grant may be used for administrative expenses or other indirect costs. The procedures must require at least one competitive round of requests for proposals per biennium.
- (m) To make the allocations required by paragraphs (f), (g) and (h):
 - (1) Prioritize and quantify the needs for these programs;
 - (2) Develop, solicit and accept applications for allocations;
- (3) Review and consider the recommendations of the Grants Management Advisory Committee submitted pursuant to NRS 232.385;
- (4) Conduct annual evaluations of programs to which allocations have been awarded; and
- (5) Submit annual reports concerning the programs to the Governor, the Interim Finance Committee, the Legislative Committee on Health Care and any other committees or commissions the Director deems appropriate.
- (n) Transmit a report of all findings, recommendations and expenditures to the Governor, each regular session of the Legislature, the Legislative Committee on Health Care and any other committees or commissions the Director deems appropriate.





- (o) After considering the recommendations submitted to the Director pursuant to subsection 6, develop a plan each biennium to determine the percentage of available money in the Fund for a Healthy Nevada to be allocated from the Fund for the purposes described in paragraphs (c), (d), (f), (g), (h) and (i). The plan must be submitted as part of the proposed budget submitted to the Chief of the Budget Division of the Office of Finance pursuant to NRS 353.210.
- (p) On or before September 30 of each even-numbered year, submit to the Grants Management Advisory Committee, the Nevada Commission on Aging created by NRS 427A.032 and the Nevada Commission on Services for Persons with Disabilities created by NRS 427A.1211 a report on the funding plan submitted to the Chief of the Budget Division of the Office of Finance pursuant to paragraph (o).
- 2. The Department may take such other actions as are necessary to carry out its duties.
- 3. To make the allocations required by paragraph (d) of subsection 1, the Aging and Disability Services Division of the Department shall:
- (a) Prioritize and quantify the needs of senior citizens and other specified persons for these programs;
 - (b) Develop, solicit and accept grant applications for allocations;
- (c) As appropriate, expand or augment existing state programs for senior citizens and other specified persons upon approval of the Interim Finance Committee;
 - (d) Award grants, contracts or other allocations;
- (e) Conduct annual evaluations of programs to which grants or other allocations have been awarded; and
- (f) Submit annual reports concerning the allocations made by the Aging and Disability Services Division pursuant to paragraph (d) of subsection 1 to the Governor, the Interim Finance Committee, the Legislative Committee on Health Care and any other committees or commissions the Director deems appropriate.
- 4. The Aging and Disability Services Division of the Department shall submit each proposed grant or contract which would be used to expand or augment an existing state program to the Interim Finance Committee for approval before the grant or contract is awarded. The request for approval must include a description of the proposed use of the money and the person or entity that would be authorized to expend the money. The Aging and Disability Services Division of the Department shall not expend or transfer any money allocated to the Aging and Disability Services Division pursuant to this section to subsidize any portion of the cost of providing prescription drugs, pharmaceutical services and other





benefits, including, without limitation, dental and vision benefits and hearing aids or other devices that enhance the ability to hear, to senior citizens pursuant to NRS 439.635 to 439.690, inclusive, or to subsidize any portion of the cost of providing prescription drugs, pharmaceutical services and other benefits, including, without limitation, dental and vision benefits and hearing aids or other devices that enhance the ability to hear, to persons with disabilities pursuant to NRS 439.705 to 439.795, inclusive.

- 5. A veteran may receive benefits or other services which are available from the money allocated pursuant to this section for senior citizens or persons with disabilities to the extent that the veteran does not receive other benefits or services provided to veterans for the same purpose if the veteran qualifies for the benefits or services as a senior citizen or a person with a disability, or both.
- 6. On or before June 30 of each even-numbered year, the Grants Management Advisory Committee, the Nevada Commission on Aging and the Nevada Commission on Services for Persons with Disabilities each shall submit to the Director a report that includes, without limitation, recommendations regarding community needs and priorities that are determined by each such entity after any public hearings held by the entity.

Sec. 89. NRS 608.009 is hereby amended to read as follows: 608.009 "Domestic service employee" means an employee who performs any household service in or about a private residence or any other location at which a person resides. The term includes, without limitation:

- 1. Caregivers and other persons who are employed at a residential facility for groups, as defined in NRS 449.017 [;] or a home for residential care, as defined in NRS 449.0105; and
- 2. Companions, babysitters, cooks, waiters, valets, housekeepers, nannies, nurses, janitors, persons employed to launder clothes and linens, caretakers, persons who perform minor repairs, gardeners, home health aides, personal care aides and chauffeurs of automobiles for family use.

Sec. 90. NRS 629.079 is hereby amended to read as follows:

- 629.079 1. If a health care licensing board determines that a complaint received by the health care licensing board concerns a matter within the jurisdiction of another health care licensing board, the health care licensing board which received the complaint shall:
- (a) Except as otherwise provided in paragraph (b), refer the complaint to the other health care licensing board within 5 days after making the determination; and
- (b) If the health care licensing board also determines that the complaint concerns an emergency situation, immediately refer the complaint to the other health care licensing board.





- 2. If a health care licensing board determines that a complaint received by the health care licensing board concerns a public health emergency or other health event that is an immediate threat to the health and safety of the public in a health care facility, *home operated by a provider of home-based residential care* or the office of a provider of health care, the health care licensing board shall immediately notify the appropriate health authority for the purposes of NRS 439.970.
- 3. A health care licensing board may refer a complaint pursuant to subsection 1 or provide notification pursuant to subsection 2 orally, electronically or in writing.
- 4. The provisions of subsections 1 and 2 apply to any complaint received by a health care licensing board, including, without limitation:
- (a) A complaint which concerns a person who or entity which is licensed, certified or otherwise regulated by the health care licensing board that received the complaint and by another health care licensing board; and
- (b) A complaint which concerns a person who or entity which is licensed, certified or otherwise regulated solely by another health care licensing board.
- 5. The provisions of this section do not prevent a health care licensing board from acting upon a complaint which concerns a matter within the jurisdiction of the health care licensing board regardless of whether the health care licensing board refers the complaint pursuant to subsection 1 or provides notification based upon the complaint pursuant to subsection 2.
- 6. A health care licensing board or an officer or employee of the health care licensing board is immune from any civil liability for any decision or action taken in good faith and without malicious intent in carrying out the provisions of this section.
 - 7. As used in this section:
- (a) "Health care facility" means any facility licensed pursuant to chapter 449 of NRS.
 - (b) "Health care licensing board" means:
- (1) A board created pursuant to chapter 630, 630A, 631, 632, 633, 634, 634A, 635, 636, 637, 637B, 639, 640, 640A, 640B, 640C, 640D, 640E, 641, 641A, 641B or 641C of NRS.
- (2) The Division of Public and Behavioral Health of the Department of Health and Human Services.
- (c) "Provider of home-based residential care" has the meaning ascribed to it in section 7 of this act.
 - **Sec. 91.** NRS 632.316 is hereby amended to read as follows:
 - 632.316 The provisions of NRS 632.315 do not prohibit:





- 1. Gratuitous nursing by friends or by members of the family of a patient.
- 2. The incidental care of the sick by domestic servants or persons primarily employed as housekeepers as long as they do not practice nursing within the meaning of this chapter.
 - 3. Nursing assistance in the case of an emergency.
- 4. The practice of nursing by students enrolled in accredited schools of nursing or by graduates of those schools or courses pending the results of the first licensing examination scheduled by the Board following graduation. A student or graduate may not work as a nursing assistant unless the student or graduate is certified to practice as a nursing assistant pursuant to the provisions of this chapter.
- 5. The practice of nursing in this State by any legally qualified nurse or nursing assistant of another state whose engagement requires the nurse or nursing assistant to accompany and care for a patient temporarily residing in this State during the period of one such engagement, not to exceed 6 months, if the person does not represent or hold himself or herself out as a nurse licensed to practice in this State or as a nursing assistant who holds a certificate to practice in this State.
- 6. The practice of any legally qualified nurse of another state who is employed by the United States Government, or any bureau, division or agency thereof, while in the discharge of his or her official duties in this State, including, without limitation, providing medical care in a hospital in accordance with an agreement entered into pursuant to NRS 449.2455.
- 7. Nonmedical nursing for the care of the sick, with or without compensation, if done by the adherents of, or in connection with, the practice of the religious tenets of any well-recognized church or religious denomination, if that nursing does not amount to the practice of practical or professional nursing as defined in NRS 632.017 and 632.018, respectively.
- 8. A personal assistant from performing services for a person with a disability pursuant to NRS 629.091.
- 9. A natural person from providing community-based living arrangement services if:
- (a) That person has been issued a [certificate] license to provide community-based living arrangement services pursuant to chapter 449 of NRS [433.601 to 433.621, inclusive,] and the regulations adopted pursuant [to NRS 433.609;] thereto; or
- (b) That person is employed or retained as an independent contractor by a partnership, firm, corporation or association, state or local government or agency thereof that has been issued a **[certificate] license to provide community-based living**





- 1 arrangement services pursuant to chapter 449 of NRS [433.601 to 433.621, inclusive,] and the regulations adopted pursuant [to NRS 433.609.] thereto.
 - As used in this subsection, "community-based living arrangement services" has the meaning ascribed to it in NRS [433.605.] 449.0026.
 - 10. A natural person from providing supported living arrangement services if:
 - (a) That person has been issued a [certificate] license to provide supported living arrangement services pursuant to chapter 449 of NRS [435.3305 to 435.339, inclusive,] and the regulations adopted pursuant [to NRS 435.3305 to 435.339, inclusive;] thereto; or
 - (b) That person is employed or retained as an independent contractor by a partnership, firm, corporation or association, state or local government or agency thereof that has been issued a **[certificate]** *license to provide supported living arrangement services* pursuant to *chapter 449 of NRS* [435.3305 to 435.339, inclusive.] and the regulations adopted pursuant [to NRS 435.3305 to 435.339, inclusive.] *thereto.*
 - As used in this subsection, "supported living arrangement services" has the meaning ascribed to it in NRS [435.3315.] 449.0185.
 - **Sec. 92.** Chapter 654 of NRS is hereby amended by adding thereto a new section to read as follows:
 - "Home for residential care" has the meaning ascribed to it in NRS 449.0105.
 - **Sec. 93.** NRS 654.010 is hereby amended to read as follows:
 - 654.010 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 654.015 to 654.031, inclusive, *and section 92 of this act* have the meanings ascribed to them in those sections.
 - **Sec. 94.** NRS 654.015 is hereby amended to read as follows:
 - or home for residential care" means a person who manages, supervises and is in general administrative charge of a residential facility for groups [...] or a home for residential care with more than two clients.
 - **Sec. 95.** NRS 654.060 is hereby amended to read as follows: 654.060 The Governor shall appoint:
 - 1. Two members who are licensees serving as nursing facility administrators.
 - 2. One member who is a licensee serving as an administrator of a *home for* residential [facility for groups] care with less than seven clients.





- 3. One member who is a licensee serving as an administrator of a residential facility for groups *or a home for residential care* with seven or more clients.
- 4. One member who is a member of the medical or paramedical professions.
- 5. One member who is a representative of the general public. This member must not be a licensee or the spouse or the parent or child, by blood, marriage or adoption, of a licensee.

Sec. 96. NRS 654.110 is hereby amended to read as follows:

- 654.110 1. In a manner consistent with the provisions of chapter 622A of NRS, the Board shall:
- (a) Develop, impose and enforce standards which must be met by persons to receive licenses as nursing facility administrators, administrators of residential facilities for groups *or homes for residential care* and health services executives. The standards must be designed to ensure that licensees will be persons who are of good character and otherwise suitable, and who, by training or experience in their respective fields of administering health care facilities, are qualified to serve as nursing facility administrators or administrators of residential facilities for groups [...] or homes for residential care.
- (b) Develop and apply appropriate techniques, including examinations and investigations, for determining whether a person meets those standards. The member of the Board who is a representative of the general public shall not participate in preparing, conducting or grading any examination required by the Board.
- (c) Issue licenses to persons determined, after the application of appropriate techniques, to meet those standards.
- (d) Revoke or suspend licenses previously issued by the Board in any case if the person holding the license is determined substantially to have failed to conform to the requirements of the standards.
- (e) Establish and carry out procedures designed to ensure that licensees will, during any period they serve as nursing facility administrators or administrators of residential facilities for groups [,] or homes for residential care, comply with the requirements of the standards.
- (f) Receive, investigate and take appropriate action with respect to any charge or complaint filed with the Board to the effect that any person has failed to comply with the requirements of the standards. Except as otherwise provided in this paragraph, the Board shall initiate an investigation of any charge or complaint filed with the Board within 30 days after receiving the charge or complaint. A complaint may be filed anonymously. If a complaint is filed anonymously, the Board may accept the complaint but may refuse to





consider the complaint if anonymity of the complainant makes processing the complaint impossible or unfair to the person who is the subject of the complaint.

(g) Conduct a continuing study of:

- (1) Facilities for skilled nursing, facilities for intermediate care and their administrators; [and]
- (2) Residential facilities for groups and their administrators $\{\cdot\}$; and
- (3) Homes for residential care with more than two clients,

 with a view to the improvement of the standards imposed for the licensing of nursing facility administrators, administrators of

residential facilities for groups *or homes for residential care* and health services executives and of procedures and methods for the enforcement of the standards.

- (h) Conduct or approve, or both, a program of training and instruction designed to enable all persons to obtain the qualifications necessary to meet the standards set by the Board for qualification as a nursing facility administrator, an administrator of a residential facility for groups *or home for residential care* or a health services executive.
- 2. Except as otherwise provided in this section, all records kept by the Board, not otherwise privileged or confidential, are public records.
- 3. Except as otherwise provided in this section and NRS 239.0115, a complaint filed with the Board, all documents and other information filed with the complaint and all documents and other information compiled as a result of an investigation conducted to determine whether to initiate disciplinary action against a person are confidential, unless the person submits a written statement to the Board requesting that such documents and information be made public records.
- 4. The charging documents filed with the Board to initiate disciplinary action pursuant to chapter 622A of NRS and all other documents and information considered by the Board when determining whether to impose discipline are public records.
- 5. The Board shall, to the extent feasible, communicate or cooperate with or provide any documents or other information to any other licensing board or any other agency that is investigating a person, including, without limitation, a law enforcement agency.
 - **Sec. 97.** NRS 654.155 is hereby amended to read as follows:
- 654.155 Each applicant for licensure as an administrator of a residential facility for groups *or home for residential care* pursuant to this chapter must:
 - 1. Be at least 21 years of age;





- 2. Be a citizen of the United States or lawfully entitled to remain and work in the United States;
- 3. Be of good moral character and physically and emotionally capable of administering a residential facility for groups [;] or a home for residential care with more than two clients;
- 4. Have satisfactorily completed a course of instruction and training prescribed or approved by the Board or be qualified by reason of the applicant's education, training or experience to administer, supervise and manage a residential facility for groups [;] or a home for residential care with more than two clients;
 - 5. Pass an examination conducted and prescribed by the Board;
 - 6. Submit with the application:

- (a) A complete set of fingerprints and written permission authorizing the Board to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report; and
- (b) A fee to cover the actual cost of obtaining the report from the Federal Bureau of Investigation;
- 7. Comply with such other standards and qualifications as the Board prescribes; and
 - 8. Submit all information required to complete the application. **Sec. 98.** 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 8 of this act* as those provisions pertain to a facility for skilled nursing, facility for intermediate care, [or] residential facility for groups [.] or home for residential care.
- (e) Violates any regulation of the Board prescribing additional standards of conduct for licensees, including, without limitation, a code of ethics.
- (f) Engages in conduct that violates the trust of a patient or resident or exploits the relationship between the licensee and the patient or resident for the financial or other gain of the licensee.





- 2. If a licensee requests a hearing pursuant to subsection 1, the Board shall give the licensee written notice of a hearing pursuant to NRS 233B.121 and 241.034. A licensee may waive, in writing, his or her right to attend the hearing.
- 3. The Board may compel the attendance of witnesses or the production of documents or objects by subpoena. The Board may adopt regulations that set forth a procedure pursuant to which the Chair of the Board may issue subpoenas on behalf of the Board. Any person who is subpoenaed pursuant to this subsection may request the Board to modify the terms of the subpoena or grant additional time for compliance.
- 4. An order that imposes discipline and the findings of fact and conclusions of law supporting that order are public records.
- 5. The expiration of a license by operation of law or by order or decision of the Board or a court, or the voluntary surrender of a license, does not deprive the Board of jurisdiction to proceed with any investigation of, or action or disciplinary proceeding against, the licensee or to render a decision suspending or revoking the license.
 - Sec. 99. NRS 695B.227 is hereby amended to read as follows:
- 695B.227 1. A corporation organized under this chapter shall contract with an insurance company licensed in this State or authorized to do business in this State for the provision of insurance, indemnity or reimbursement against the cost of hospital services, medical services and dental services which are provided by the corporation.
- 2. The contract of insurance required by subsection 1 must include a provision that, in the case of the insolvency or impairment of the corporation, the insurance company will pay all claims made by an insured for the period for which a premium has been or will be paid to the corporation for the insured. The contract of insurance required by subsection 1 must specifically provide for the:
- (a) Continuation of benefits to each insured for the period for which a premium has been or will be paid to the corporation for the insured until the expiration or termination of the insured's contract with the corporation;
- (b) Continuation of benefits for each insured who is receiving inpatient services in a medical facility, [or] facility for the dependent or a home operated by a provider of home-based residential care at the time of the insolvency or impairment of the corporation until the inpatient services are no longer medically necessary and the insured is discharged from the [medical] facility or [facility for the dependent;] home; and
- (c) Payment of a provider of health care not affiliated with the corporation who provided medically necessary services to an





insured, as described in the insured's contract with the corporation, the insured's policy or the insured's evidence of coverage.

3. As used in this section:

15 or

- (a) "Facility for the dependent" has the meaning ascribed to it in NRS 449.0045.
- (b) "Impairment" means that a corporation organized under this chapter is not insolvent and has been:
 - (1) Deemed to be impaired pursuant to NRS 695B.150; or
- (2) Placed under an order of rehabilitation or conservation by a court of competent jurisdiction.
- (c) "Insolvency" or "insolvent" means that a corporation organized under this chapter has been:
 - (1) Deemed to be insolvent pursuant to NRS 695B.150;
 - (2) Declared insolvent by a court of competent jurisdiction;
- (3) Placed under an order of liquidation by a court of competent jurisdiction.
- (d) "Medical facility" has the meaning ascribed to it in NRS 449.0151.
- (e) "Medically necessary" has the meaning ascribed to it in NRS 695G.055.
- (f) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
- (g) "Provider of home-based residential care" has the meaning ascribed to it in section 7 of this act.
- **Sec. 100.** NRS 695C.3175 is hereby amended to read as follows:
- 695C.3175 1. A health maintenance organization shall contract with an insurance company licensed in this State or authorized to do business in this State for the provision of insurance, indemnity or reimbursement against the cost of health care services which are provided by the health maintenance organization.
- 2. The contract of insurance required by subsection 1 must include a provision that, in the case of the insolvency or impairment of the health maintenance organization, the insurance company will pay all claims made by an enrollee for the period for which a premium has been or will be paid to the health maintenance organization for the enrollee. The contract of insurance required by subsection 1 must specifically provide for the:
- (a) Continuation of benefits to each enrollee for the period for which a premium has been or will be paid to the health maintenance organization for the enrollee until the expiration or termination of the enrollee's contract with the health maintenance organization;
- (b) Continuation of benefits for each enrollee who is receiving inpatient services in a medical facility, [or] facility for the





dependent *or home operated by a provider of home-based residential care* at the time of the insolvency or impairment of the health maintenance organization until the inpatient services are no longer medically necessary and the enrollee is discharged from the [medical] facility or [facility for the dependent;] home; and

- (c) Payment of a provider of health care not affiliated with the health maintenance organization who provided medically necessary services to an enrollee, as described in the enrollee's evidence of coverage.
 - 3. As used in this section:

- (a) "Facility for the dependent" has the meaning ascribed to it in NRS 449.0045.
- (b) "Impairment" means that a health maintenance organization is not insolvent and has been:
 - (1) Deemed to be impaired pursuant to NRS 695C.318; or
- (2) Placed under an order of rehabilitation or conservation by a court of competent jurisdiction.
- (c) "Insolvency" or "insolvent" means that a health maintenance organization has been:
 - (1) Deemed to be insolvent pursuant to NRS 695C.318;
- (2) Declared insolvent by a court of competent jurisdiction; or
- (3) Placed under an order of liquidation by a court of competent jurisdiction.
- (d) "Medical facility" has the meaning ascribed to it in NRS 449.0151.
- (e) "Medically necessary" has the meaning ascribed to it in NRS 695G.055.
- (f) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
- (g) "Provider of home-based residential care" has the meaning ascribed to it in section 7 of this act.
- **Sec. 101.** NRS 695G.070 is hereby amended to read as follows:

695G.070 "Provider of health care" means:

- 1. A physician or other health care practitioner who is licensed or otherwise authorized in this State to furnish any health care service; and
- 2. An institution providing health care services or other setting in which health care services are provided, including, without limitation, a hospital, surgical center for ambulatory patients, facility for skilled nursing, residential facility for groups, *home for residential care*, laboratory and any other such licensed facility.
- **Sec. 102.** 1. A certificate to provide community-based living arrangement services issued pursuant to NRS 433.601 to 433.621,





inclusive, or a certificate to provide supported living arrangement services issued pursuant to NRS 435.3305 to 435.339, inclusive, that is valid on January 1, 2020, remains valid until its date of expiration, if the holder of the certificate remains otherwise qualified for the issuance or renewal of the certificate on or after January 1, 2020.

- 2. Any regulations adopted by the State Board of Health pursuant to NRS 433.609 or the Aging and Disability Services Division of the Department of Health and Human Services pursuant to NRS 435.333 that do not conflict with the provisions of this act shall be deemed to have been adopted pursuant to NRS 449.0302, as amended by section 19 of this act, and continue in effect until amended or repealed. The Legislative Counsel shall, in preparing supplements to the Nevada Administrative Code:
- (a) Substitute appropriately the term "license" for the term "certificate" in the regulations described in this subsection; and
- (b) Move the regulations described in this subsection from chapters 433 and 435 of the Nevada Administrative Code to chapter 449 of the Nevada Administrative Code.
- 3. Any regulations adopted by the State Board of Health or the Aging and Disability Services Division of the Department of Health and Human Services that conflict with any of the provisions of this act are void. The Legislative Counsel shall remove those regulations from the Nevada Administrative Code as soon as practicable after January 1, 2020.
 - 4. As used in this section:
- (a) "Community-based living arrangement services" has the meaning ascribed to it in NRS 449.0026, as amended by section 10 of this act.
- (b) "Supported living arrangement services" has the meaning ascribed to it in NRS 449.0185, as amended by section 16 of this act

Sec. 103. The Legislative Counsel shall:

- 1. In preparing the reprint and supplement to the Nevada Revised Statutes, use the authority set forth in subsection 10 of NRS 220.120 to appropriately:
- (a) Change any reference to the term "facility for the dependent" to also include a reference to a "provider of home-based residential care";
- (b) Replace any reference to the term "home for individual residential care" with a reference to the term "home for residential care":
- (c) Replace any reference in chapter 427A of NRS to the term "facility for long-term care" with a reference to the term "facility or home for long-term care"; and





- (d) Replace any reference in chapter 654 of NRS to the term "administrator of a residential facility for groups" with a reference to the term "administrator of a residential facility for groups or home for residential care."
- 2. In preparing supplements to the Nevada Administrative Code, appropriately:
- (a) Change any reference to the term "facility for the dependent" to also include a reference to a "provider of home-based residential care":
- (b) Replace any reference to the term "home for individual residential care" with a reference to the term "home for residential care":
- (c) Replace any reference to the term "facility for long-term care" with a reference to the term "facility or home for long-term care"; and
- (d) Replace any reference in chapter 654 of NRS to the term "administrator of a residential facility for groups" with a reference to the term "administrator of a residential facility for groups or home for residential care."
- **Sec. 104.** NRS 278.02376, 433.601, 433.603, 433.605, 433.607, 433.609, 433.611, 433.613, 433.615, 433.617, 433.619, 433.621, 435.3305, 435.331, 435.3315, 435.332, 435.333, 435.335, 435.334, 435.335, 435.336, 435.337, 435.338, 435.339, 449A.041, 449A.073 and 632.0155 are hereby repealed.
 - **Sec. 105.** This act becomes effective:
- 1. Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
 - 2. On January 1, 2020, for all other purposes.

LEADLINES OF REPEALED SECTIONS

278.02376 "Residential facility for groups" defined.

433.601 Definitions.

433.603 "Certificate" defined.

433.605 "Community-based living arrangement services" or "services" defined.

433.607 Certificate required to provide services; exception.

433.609 Regulations; fees for issuance and renewal of certificate.





433.611 Application for renewal of certificate to include information relating to state business license; denial of renewal for unpaid debt assigned to State Controller for collection.

433.613 Authority of Division.

433.615 Division authorized to seek injunction against provision of services without valid certificate.

433.617 Statement concerning obligation for child support required for issuance or renewal of certificate of natural person.

433.619 Application of natural person for certificate

required to contain social security number.

433.621 Suspension of certificate of natural person for failure to pay child support or comply with certain subpoenas or warrants; reinstatement of certificate.

435.3305 Definitions.

435.331 "Certificate" defined.

435.3315 "Supported living arrangement services" defined.

435.332 Certificate required to provide services.

435.333 Regulations; agreements with public and private agencies for provision of services.

435.3335 Application for renewal of certificate to include information relating to state business license; renewal of certificate prohibited in certain circumstances.

435.334 Fees for certificate.

435.335 Division authorized to conduct investigations; employment of personnel.

435.336 Division authorized to bring action to enjoin provision of services.

435.337 Payment of child support: Statement by applicant for certificate; grounds for denial of certificate; duties of Division.

435.338 Application for issuance of certificate: Social security number required.

435.339 Suspension of certificate for failure to pay child support or comply with certain subpoenas or warrants; reinstatement of certificate.

449A.041 "Home for individual residential care" defined.

(30)

449A.073 "Residential facility for groups" defined.

632.0155 "Facility for long-term care" defined.



