### SENATE BILL NO. 271-SENATOR HAMMOND

## MARCH 17, 2021

#### Referred to Committee on Commerce and Labor

SUMMARY—Provides for the licensure and regulation of midwives. (BDR 54-114)

FISCAL NOTE: Effect on Local Government: Increases or Newly
Provides for Term of Imprisonment in County or City
Jail or Detention Facility.
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 midwives; establishing and prescribing the duties of the Board of Certified Professional Midwives; providing for the licensure of midwives and the issuance of permits to apprentice midwives; prescribing requirements relating to the practice of midwifery; authorizing the imposition of disciplinary action against a midwife or apprentice midwife under certain circumstances; exempting a midwife or apprentice midwife from certain civil damages; providing a penalty; and providing other matters properly relating thereto.

#### **Legislative Counsel's Digest:**

Existing law requires a midwife to perform certain duties relating to reporting births and deaths and testing newborn babies for certain diseases. (NRS 440.100, 440.740, 442.008-442.110, 442.600-442.680) Sections 2-26 of this bill provide for the licensure and regulation of midwives by the Division of Public and Behavioral Health of the Department of Health and Human Services. Sections 2-7 of this bill define certain terms related to midwives. Section 8 of this bill exempts physicians, physician assistants, licensed nurses and traditional birth attendants from requirements governing the licensure and regulation of midwives. Sections 30 and 33-37 of this bill similarly exempt midwives and apprentice midwives from provisions governing certain other providers of health care. Midwives and apprentice midwives would also be exempt from provisions governing allopathic physicians. (NRS 630.047)

Section 9 of this bill creates the Board of Certified Professional Midwives. Section 10 of this bill prescribes procedural requirements concerning the Board. Section 11 of this bill prescribes the duties of the Board, which include: (1) reviewing complaints against midwives upon the request of the Division; (2)





evaluating and approving continuing education for midwives; and (3) advising the Legislature, the State Board of Health and the Division on matters concerning midwifery. **Section 12** of this bill requires the State Board of Health to adopt regulations governing midwifery. **Sections 13 and 14** of this bill prescribe the requirements for the issuance of a license as a midwife and a permit as an apprentice midwife, respectively.

Existing law generally requires a regulatory body to adopt regulations for the issuance of licenses by endorsement unless otherwise provided by specific statute. (NRS 622.530) Sections 13 and 14 prohibit the Division from issuing a license as a midwife or a permit as an apprentice midwife by endorsement or entering into an agreement with the corresponding regulatory authority of another jurisdiction for the licensure of midwives or the issuance of permits to apprentice midwives by reciprocity.

Existing federal law requires each state to adopt procedures to ensure that applicants for certain licenses and certificates comply with child support obligations. (42 U.S.C. § 666) **Sections 15 and 21** of this bill enact such procedures as applicable to an applicant for a license as a midwife or a permit as an apprentice midwife in order to comply with federal law. **Section 27** of this bill authorizes an applicant for such a license or permit who does not have a social security number to provide an alternative personally identifying number when completing an application for a license or permit. **Section 86** of this bill removes a requirement that an application for a license as a midwife or a permit as an apprentice midwife include the social security number of the applicant on the date that those federal requirements are repealed, while leaving in place the other requirements of **sections 15 and 21** for a period of 2 years after the date on which the federal requirements are repealed.

Section 16 of this bill prescribes the activities which constitute the practice of midwifery. Sections 16, 62 and 63 of this bill authorize a midwife to administer a controlled substance or dangerous drug under certain circumstances. Section 17 of this bill prescribes the authorized activities of an apprentice midwife and requirements governing the supervision of an apprentice midwife by a preceptor. Section 18 of this bill requires a midwife to take certain measures to ensure the ability to address complications outside the normal course of pregnancy, childbirth and the postpartum period. Section 19 of this bill requires a midwife to obtain informed consent from each client before providing services. Section 20 of this bill authorizes a midwife to employ or enter into a contract with a birth assistant to perform certain simple, routine medical tasks.

Section 22 of this bill prescribes requirements concerning the investigation of a complaint and the imposition of disciplinary action against a person who engages in the practice of midwifery. Section 23 of this bill: (1) requires the Division to maintain certain records of proceedings relating to licensing, disciplinary actions and investigations; and (2) declares certain records to be confidential and certain other records to be public. Section 50 of this bill makes a conforming change to clarify that confidential records of the Division are not public records. Section 24 of this bill prescribes the grounds for disciplinary action against a midwife or apprentice midwife. Section 25 of this bill prohibits a person who does not hold a license as a midwife or a permit as an apprentice midwife from engaging in the practice of midwifery or representing that he or she is authorized to engage in the practice of midwifery. Section 26 of this bill: (1) makes it a misdemeanor to violate any provision of sections 2-26; and (2) authorizes the Division or the Attorney General to seek an injunction against any person violating any provision of sections 2-26.

Existing law defines the term "provider of health care" as a person who practices any of certain professions related to the provision of health care. (NRS 629.031) Existing law imposes certain requirements upon providers of health care,





including requirements for billing, standards for advertisements and criminal penalties for acquiring certain debts. (NRS 629.071, 629.076, 629.078) **Section 28** of this bill includes midwives and apprentice midwives in the definition of "provider of health care," thereby subjecting midwives and apprentice midwives to those requirements. **Section 61** of this bill makes a conforming change to remove unnecessary language. **Sections 29 and 31** of this bill prohibit the adoption of regulations authorizing practitioners of respiratory care and homeopathic assistants from performing duties restricted by law to midwives and apprentice midwives. **Section 32** of this bill requires a midwife or apprentice midwife to report misconduct by a person licensed or certified by the State Board of Nursing to the Executive Director of the Board.

Sections 40 and 41 of this bill provide that a midwife or apprentice midwife is not liable for civil damages resulting from the provision of emergency care or gratuitous care to an indigent person under certain circumstances. Section 56 of this bill requires a midwife who attends a birth that occurs outside a hospital which is not also attended by a physician or advanced practice registered nurse to prepare a birth certificate. Section 57 of this bill provides for the imposition of a fine upon a person who furnishes false information to a midwife for the purpose of making incorrect certification of births or deaths. Sections 38, 39, 42-49, 51-55, 58, 59 and 64-85 of this bill make revisions to treat midwives and apprentice midwives similarly to other providers of health care in certain respects.

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

- **Section 1.** Title 54 of NRS is hereby amended by adding thereto a new chapter to consist of the provisions set forth as sections 2 to 26, inclusive, of this act.
  - Sec. 2. As used in this chapter, unless the context otherwise requires, the words and terms defined in sections 3 to 7, inclusive, of this act have the meanings ascribed to them in those sections.
- Sec. 3. "Apprentice midwife" means a person who holds a permit as an apprentice midwife issued pursuant to section 14 of this act.
- Sec. 4. "Birth assistant" means a person who is not licensed as a midwife, does not hold a permit as an apprentice midwife and performs routine medical tasks and procedures under the direct supervision of a midwife.
- Sec. 5. "Board" means the Board of Certified Professional Midwives created by section 9 of this act.
- 16 Sec. 6. "Division" means the Division of Public and 17 Behavioral Health of the Department of Health and Human 18 Services.
- **Sec. 7.** "Midwife" means a person who is licensed as a 20 midwife pursuant to section 13 of this act.
  - Sec. 8. 1. The provisions of this chapter do not apply to:
  - (a) A person who holds a license, certificate or other credential issued pursuant to chapters 630 to 641C, inclusive, of NRS and





who is practicing within the scope of authority authorized by that license, certificate or other credential.

(b) A traditional birth attendant who:

- (1) Does not become licensed for religious, personal or philosophical reasons;
- (2) Does not prescribe or administer controlled substances or dangerous drugs; and
- (3) Discloses to the client they are a traditional birth attendant and not a licensed midwife.
- 2. For the purposes of this section, an advanced practice registered nurse licensed under chapter 632 of NRS who is certified as a nurse-midwife by the American Midwifery Certification Board, or its successor organization, and provides care to a woman before conception, during pregnancy or during the postpartum period shall be deemed to be practicing within the scope of authority authorized by his or her license as an advanced practice registered nurse.
  - 3. This chapter does not prohibit:
  - (a) Gratuitous services of a person in case of emergency; or
- (b) Gratuitous care by friends or members of the family of a patient.
- Sec. 9. 1. The Board of Certified Professional Midwives is hereby created.
  - 2. The Governor shall appoint to the Board:
- (a) Four members who are midwives licensed pursuant to this chapter, at least two of whom must be actively engaged in the practice of midwifery in this State;
  - (b) One member who is:
- (1) Certified as a nurse-midwife by the American Midwifery Certification Board, or its successor organization;
- (2) Licensed as an advanced practice registered nurse pursuant to NRS 632.237; and
- (3) Actively engaging in the practice of midwifery in this State;
- (c) One member who is currently using the services of a midwife, has used such services in the past or plans to use such services in the future; and
- (d) One member who is a physician licensed pursuant to chapter 630 or 633 of NRS and actively practicing in the area of obstetrics in this State.
- 3. The Nevada Statewide Maternal and Child Health Coalition, or its successor organization, shall appoint to the Board one nonvoting member who is a representative of the Coalition, or its successor organization, as applicable. The member appointed





pursuant to this subsection serves at the pleasure of the Coalition or its successor organization, as applicable.

- 4. After the initial terms, the members appointed to the Board pursuant to subsections 2 and 3 serve terms of 3 years. Such a member:
- (a) May continue in office until the appointment of a successor.
  - (b) Must not serve more than two consecutive terms.
- 5. A vacancy on the Board must be filled in the same manner as the initial appointment.
- 6. Members of the Board serve without compensation but are entitled to receive the per diem allowance and travel expenses provided for state officers and employees generally while engaged in the business of the Board.
- 7. A member of the Board who is an officer or employee of this State or a political subdivision of this State must be relieved from his or her duties without loss of regular compensation to prepare for and attend meetings of the Board and perform any work necessary to carry out the duties of the Board in the most timely manner practicable. A state agency or political subdivision of this State shall not require an officer or employee who is a member of the Board to:
- (a) Make up the time he or she is absent from work to carry out his or her duties as a member of the Board; or
  - (b) Take annual leave or compensatory time for the absence.
- Sec. 10. 1. A majority of the voting members of the Board constitutes a quorum for the transaction of business, and a majority of a quorum present at any meeting is sufficient for any official action taken by the Board.
  - 2. The Board shall:
- (a) At its first meeting and annually thereafter, elect a Chair from among its voting members; and
- (b) Meet at least once each year at the call of the Chair or a majority of its voting members.
- 3. If a member of the Board fails to attend two consecutive meetings without a determination by the Chair before the meeting that the absence is excused, the member shall be deemed to have resigned from the Board. The Chair must determine that an absence is excused if he or she determines that the member has good cause for requesting the absence.
  - Sec. 11. The Board shall:
- 1. Review complaints upon the request of the Division pursuant to section 22 of this act;





- 2. Evaluate and approve continuing education for midwives in accordance with the regulations adopted pursuant to section 13 of this act;
- 3. Remain current on issues relating to the practice of midwifery and advise the Legislature, the State Board of Health and the Division concerning those issues; and

4. Perform any other duties to inform policies relating to the practice of midwifery as requested by the Governor, the State Board of Health or the Division.

- Sec. 12. The State Board of Health shall adopt any regulations necessary or convenient for carrying out the provisions of this chapter. The regulations:
  - 1. Must include, without limitation:
- (a) Requirements governing the administration of controlled substances and dangerous drugs by midwives and apprentice midwives;
- (b) Requirements and procedure for the approval of continuing education by the Board of Certified Professional Midwives; and
- (c) Requirements for the supervision of a birth assistant by a midwife.
  - 2. May include, without limitation:
- (a) Requirements governing the practice of midwifery, in addition to those prescribed by this chapter; and
- (b) Grounds for disciplinary action, in addition to those prescribed by section 24 of this act, and procedures for imposing such disciplinary action.
- Sec. 13. 1. An applicant for a license as a midwife must submit to the Division an application in the form prescribed by the Division. The application must be accompanied by a fee of \$200 and must include, without limitation:
- (a) Proof that the applicant is currently certified as a Certified Professional Midwife by the American Midwifery Certification Board or its successor organization;
- (b) A list of any jurisdiction in which the applicant has held a license as a midwife or any other provider of health care and description of any professional discipline imposed upon the applicant in any of those jurisdictions; and
  - (c) Proof that the applicant:
- (1) Has completed at least 2 years of training through a school accredited by the Midwifery Education Accreditation Council, or its successor organization, in the subjects prescribed by subsection 2; or
- (2) Holds a Midwifery Bridge Certificate issued by the North American Registry of Midwives, or its successor





organization and has completed a preceptor program which includes, without limitation:

(I) At least 24 months of professional experience and

professional training; and

- (II) The Portfolio Evaluation Process prescribed by the North American Registry of Midwives, or its successor organization.
- 2. A program of training in midwifery or a preceptor program must include, without limitation, instruction concerning:
  - (a) General skills for providing health care;
  - (b) Cultural competency;
  - (c) Basic sciences;
  - (d) Reproductive anatomy and physiology;
  - (e) Behavioral sciences;
  - (f) The process of childbirth;
- (g) Care that is available in the community for a pregnant woman and her child before and after birth;
  - (h) Family planning;
  - (i) Laws and regulations concerning midwifery;
  - (j) Nutrition during pregnancy and lactation;
  - (k) Breastfeeding;
  - (l) Clinical skills; and
  - (m) Aseptic technique.
- 3. A license as a midwife is valid for 2 years after the date of issuance and may be renewed upon submission to the Division of a renewal application in the form prescribed by the Division. The renewal application must be accompanied by a renewal fee of \$200 and must include, without limitation, proof that the applicant:
- (a) Has completed at least 20 hours of continuing education offered by the Midwives Alliance of North America, the American College of Nurse-Midwives, or their successor organizations, or approved by the Board during the immediately preceding renewal period; and
- (b) Is currently certified as a Certified Professional Midwife by the American Midwifery Certification Board, or its successor organization.
- 4. A license as a midwife may be renewed up to 4 years after the date on which the license expired.
  - 5. The Division shall not:
  - (a) Issue a license as a midwife by endorsement; or
- (b) Enter into a reciprocal agreement with the corresponding regulatory authority of another jurisdiction for the licensure of midwives who do not meet the requirements specified in this section.





6. An applicant for or the holder of a license as a midwife shall notify the Division not later than 30 days after a change to any information included in an application for the issuance or renewal of a license pursuant to this section.

Sec. 14. 1. An applicant for a permit as an apprentice midwife must submit to the Division an application in the form prescribed by the Division. The application must be accompanied

by a fee of \$100 and must include, without limitation:

(a) A list of any jurisdiction in which the applicant has held a license as a midwife or any other provider of health care and description of any professional discipline imposed upon the applicant in any of those jurisdictions; and

(b) A copy of an agreement with a preceptor to supervise the applicant and proof that the preceptor meets the requirements of

15 section 17 of this act.

- 2. A permit as an apprentice midwife is valid for 2 years after the date of issuance and, except as otherwise provided in subsection 3, may be renewed once upon submission to the Division of:
- (a) A renewal application in the form prescribed by the Division; and

(b) A renewal fee of \$100.

- 3. An apprentice midwife may submit to the Division a request to renew his or her permit for periods in addition to those authorized by subsection 2. The Division may grant such a request upon a finding of good cause and submission of a renewal fee of \$100. If the Division grants a request pursuant to this subsection, the Division must prescribe the additional period for which the permit remains valid, which must not exceed 2 years for each request.
  - 4. The Division shall not:
  - (a) Issue a permit as an apprentice midwife by endorsement; or
- (b) Enter into a reciprocal agreement with the corresponding regulatory authority of another jurisdiction for the issuance of permits as an apprentice midwife to persons who do not meet the requirements prescribed by this section.
- 5. An applicant for or the holder of a permit as an apprentice midwife shall notify the Division not later than 30 days after a change to any information included in an application for the issuance or renewal of a permit pursuant to this section.
- Sec. 15. 1. In addition to any other requirements set forth in this chapter:
- (a) An applicant for the issuance of a license as a midwife or a permit as an apprentice midwife in this State shall include the





social security number of the applicant in the application submitted to the Division.

- (b) An applicant for the issuance of a license as a midwife or a permit as an apprentice midwife in this State shall submit to the Division of Public and Behavioral Health the statement prescribed by the Division of Welfare and Supportive Services of the Department of Health and Human Services pursuant to NRS 425.520. The statement must be completed and signed by the applicant.
- 2. The Division of Public and Behavioral Health shall include the statement required pursuant to subsection 1 in:
- (a) The application or any other forms that must be submitted for the issuance or renewal of the license or permit; or
  - (b) A separate form prescribed by the Division.
- 3. A license as a midwife or a permit as an apprentice midwife may not be issued or renewed by the Division if the applicant:
- (a) Fails to submit the statement required pursuant to subsection 1; or
- (b) Indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.
- 4. If an applicant indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order, the Division shall advise the applicant to contact the district attorney or other public agency enforcing the order to determine the actions that the applicant may take to satisfy the arrearage.
- Sec. 16. 1. The practice of midwifery consists of providing comprehensive assessment, diagnosis and treatment to:
- (a) Healthy women who are at low risk of complications before conception, while pregnant and up to 8 weeks after childbirth; and
  - (b) A newborn infant for up to 8 weeks after childbirth.
- 2. While engaging in the practice of midwifery, a midwife or apprentice midwife may administer a controlled substance or dangerous drug prescribed or ordered by a physician, physician assistant or advanced practice registered nurse in accordance with the regulations adopted by the State Board of Health pursuant to section 12 of this act.





- Sec. 17. 1. An apprentice midwife may engage in the practice of midwifery under the supervision of a preceptor certified by the North American Registry of Midwives or its successor organization for the purpose of completing the training described in subparagraph (2) of paragraph (c) of subsection 1 of section 13 of this act.
  - 2. A preceptor:

- (a) Shall assist an apprentice midwife under his or her supervision in obtaining the training required by subsection 2 of section 13 of this act;
- (b) Shall review and evaluate all care provided by an apprentice midwife under his or her supervision and attend every encounter between the apprentice midwife and a client; and
- (c) Is legally responsible for the actions of an apprentice midwife working under his or her supervision.
- Sec. 18. 1. Except as otherwise provided in this subsection, before providing services to a client, a midwife shall ensure that he or she is able to consult with a physician and refer the client to the care of a physician or hospital when necessary to address complications outside of the normal course of pregnancy, childbirth and the postpartum period. A midwife who is unable to ensure the ability to engage in consultation and referral as required by this subsection shall be deemed to be in compliance with this subsection if the midwife:
- (a) Makes reasonable efforts to ensure the ability to engage in such consultation and referral; and
  - (b) Documents those efforts in the record of the client.
- 2. A physician is not liable for the actions or omissions of a midwife solely because the physician has agreed to be available for consultation or referral pursuant to subsection 1.
- Sec. 19. Upon accepting a client, a midwife shall obtain from the client informed written consent regarding the care to be provided by the midwife. Informed written consent requires that the midwife explain to the client:
- 1. The educational background of the midwife and any apprentice midwife who will be providing the care;
  - 2. The risks and benefits of care provided by a midwife;
  - 3. The nature and scope of the care to be given; and
- 4. The nature and terms of any financial agreement between the midwife and the client.
- Sec. 20. 1. A midwife may employ or enter into a contract with a birth assistant to perform simple, routine medical tasks and procedures in accordance with the regulations adopted pursuant to section 12 of this act. A birth assistant:





- (a) Shall only perform such tasks under the direct supervision of a midwife; and
- (b) Shall not evaluate clinical information or make clinical decisions.
- 2. A midwife is legally responsible for the actions of a birth assistant working under the direct supervision of the midwife.
- Sec. 21. 1. If the Division receives a copy of a court order issued pursuant to NRS 425.540 that provides for the suspension of all professional, occupational and recreational licenses, certificates and permits issued to a person who is the holder of a license or permit issued pursuant to this chapter, the Division shall deem the license or permit issued to that person to be suspended at the end of the 30th day after the date on which the court order was issued unless the Division receives a letter issued to the holder of the license or permit by the district attorney or other public agency pursuant to NRS 425.550 stating that the holder of the license or permit has complied with the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560.
- 2. The Division shall reinstate a license or permit issued pursuant to this chapter that has been suspended by a district court pursuant to NRS 425.540 if:
- (a) The Division receives a letter issued by the district attorney or other public agency pursuant to NRS 425.550 to the person whose license or permit was suspended stating that the person whose license or permit was suspended has complied with the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560; and
- (b) The person whose license or permit was suspended pays the appropriate fee required pursuant to this chapter.
- Sec. 22. 1. The Division may, upon its own motion, and shall, upon the verified complaint in writing of any person setting forth facts which, if proven, would constitute grounds for initiating disciplinary action pursuant to this chapter, investigate the actions of any person who engages in the practice of midwifery.
- 2. A person may file a complaint anonymously pursuant to subsection 1. The Division may refuse to consider such a complaint if anonymity of the complainant makes processing the complaint impossible or unfair to the person who is the subject of the complaint.
- 3. The Division may request that the Board review a complaint. Not later than 30 days after receiving such a request, the Board shall provide the Division with a written opinion on whether acts alleged in the complaint constitute grounds for





disciplinary action pursuant to section 24 of this act and the reasons for that opinion.

- 4. The Division shall retain all complaints received by the Division pursuant to this section for at least 10 years, including, without limitation, any complaints not acted upon by the Division.
- 5. Before initiating proceedings to impose disciplinary action, the Division shall notify the accused person in writing of the charges. Such notice may be served by personal delivery to the accused person or by mailing it by registered or certified mail to the place of business last specified as noted in the records of the Division.
- 6. In any proceedings to impose disciplinary action, the Division shall afford an opportunity for a hearing on the record upon the request of the accused person. The Division may compel the attendance of witnesses or the production of documents or objects by subpoena.
- 7. The Division shall render a written decision at the conclusion of each hearing, and the record and decision in each hearing must be made available for inspection by an interested person.
- 8. The Division may delegate to a hearing officer or panel its authority to take any disciplinary action pursuant to the provisions of this chapter. Any disciplinary action taken by the hearing officer or panel is subject to the same procedural requirements applicable to the Division pursuant to subsection 7, and the officer or panel has those powers and duties given to the Division in relation thereto.
- 9. A decision imposing disciplinary action pursuant to this section is a final decision for the purposes of judicial review.
- Sec. 23. 1. The Division shall keep a record of its proceedings relating to licensing, disciplinary actions and investigations pursuant to this chapter. Except as otherwise provided in this chapter, the record must be open to public inspection at all reasonable times.
- 2. Except as otherwise provided in this section and NRS 239.0115, a complaint filed with the Division, 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 pursuant to this chapter against a person are confidential and privileged, unless the person submits a written statement to the Division requesting that such documents and information be made public records.
- 3. The complaint or other document filed by the Division to initiate disciplinary action pursuant to section 22 of this act, any





written opinion rendered by the Board pursuant to that section and all documents and information considered by the Division when determining whether to impose discipline pursuant to this chapter are public records.

4. An order that imposes discipline pursuant to this chapter and the findings of fact and conclusions of law supporting that

order are public records.

5. The provisions of this section do not prohibit the Division from communicating or cooperating with or providing 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. 24. The Division may suspend, revoke or refuse to issue or renew a license or permit issued pursuant to the provisions of this chapter, impose limitations on the practice of a holder of such a license or permit or impose a civil penalty if the holder of such a

17 license or permit:

1. Obtains a license or permit through fraud, misrepresentation or concealment of material facts;

2. Violates any provision of this chapter or any regulations

adopted pursuant thereto;

3. Is guilty of malpractice, gross negligence or incompetence while engaging in the practice of midwifery;

4. Engages in conduct that could result in harm to a member

of the public;

- 5. Has disciplinary action imposed by a regulatory body in another jurisdiction against a license, certificate, permit or other credential authorizing him or her to engage in the practice of midwifery or to practice as another provider of health care in that jurisdiction;
- 6. Is a midwife and fails to adequately supervise an apprentice midwife or birth assistant; or
- 7. Engages in any other conduct defined by the regulations adopted pursuant to section 12 of this act as grounds for disciplinary action.
- Sec. 25. A person who is not licensed as a midwife or does not hold a permit as an apprentice midwife or a person whose license as a midwife or permit as an apprentice midwife has been suspended or revoked by the Division shall not:

1. Engage in the practice of midwifery;

2. Use in connection with his or her name the words "licensed midwife," "midwife" or "apprentice midwife" or any other letters, words or insignia indicating or implying that he or she is licensed or holds a permit as an apprentice midwife, as applicable, or in any other way, orally, or in writing or print, or by





sign, directly or by implication, represent himself or herself as licensed, holding a permit or otherwise authorized to engage in the practice of midwifery in this State; or

- 3. List or cause to have listed in any directory, including, without limitation, a telephone directory, his or her name or the name of his or her company under the heading "midwife" or any other term that indicates or implies that he or she is licensed, holds a permit or is otherwise authorized to engage in the practice of midwifery in this State.
- Sec. 26. 1. In addition to any other penalties authorized by this chapter, any person who violates any provision of this chapter or any regulations adopted pursuant thereto is guilty of a misdemeanor.
- 2. The Division or the Attorney General may maintain in any court of competent jurisdiction a suit to enjoin any person from violating a provision of this chapter or any regulations adopted pursuant thereto.
  - 3. Such an injunction:

- (a) May be issued without proof of actual damage sustained by any person as a preventive or punitive measure.
- (b) Does not relieve any person or business entity from any other legal action.
  - **Sec. 27.** NRS 622.238 is hereby amended to read as follows:
  - 622.238 1. The Legislature hereby finds and declares that:
- (a) It is in the best interests of this State to make full use of the skills and talents of every resident of this State.
- (b) It is the public policy of this State that each resident of this State, regardless of his or her immigration or citizenship status, is eligible to receive the benefit of applying for a license, certificate or permit pursuant to 8 U.S.C. § 1621(d).
- 2. Notwithstanding any other provision of this title, a regulatory body shall not deny the application of a person for the issuance of a license pursuant to this title based solely on his or her immigration or citizenship status.
- 3. Notwithstanding the provisions of NRS 623.225, 623A.185, 624.268, 625.387, 625A.105, 628.0345, 628B.320, 630.197, 630A.246, 631.225, 632.3446, 633.307, 634.095, 634A.115, 635.056, 636.159, 637.113, 637B.166, 638.103, 639.129, 640.095, 640A.145, 640B.340, 640C.430, 640D.120, 640E.200, 641.175, 641A.215, 641B.206, 641C.280, 642.0195, 643.095, 644A.485, 645.358, 645A.025, 645B.023, 645B.420, 645C.295, 645C.655, 645D.195, 645E.210, 645G.110, 645H.550, 648.085, 649.233, 652.075, 653.550, 654.145, 655.075 and 656.155 [.] section 15 of this act, an applicant for a license who does not have a social security number must provide an alternative personally identifying





number, including, without limitation, his or her individual taxpayer identification number, when completing an application for a license.

- A regulatory body shall not disclose to any person who is not employed by the regulatory body the social security number or alternative personally identifying number, including, without limitation, an individual taxpayer identification number, of an applicant for a license for any purpose except:
  - (a) Tax purposes;

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- (b) Licensing purposes; and
- (c) Enforcement of an order for the payment of child support.
- security number or social alternative identifying number, including, without limitation, an individual taxpayer identification number, provided to a regulatory body is confidential and is not a public record for the purposes of chapter 239 of NRS.
  - Sec. 28. NRS 629.031 is hereby amended to read as follows:

629.031 Except as otherwise provided by a specific statute:

- "Provider of health care" means:
- (a) A physician licensed pursuant to chapter 630, 630A or 633 19 20 of NRS:
  - (b) A physician assistant;
  - (c) A dentist;
  - (d) A licensed nurse:
  - (e) A person who holds a license as an attendant or who is certified as an emergency medical technician, advanced emergency medical technician or paramedic pursuant to chapter 450B of NRS;
    - (f) A dispensing optician;
- 28 (g) An optometrist;
- 29 (h) A speech-language pathologist;
- 30 (i) An audiologist;
  - (i) A practitioner of respiratory care;
- 32 (k) A licensed physical therapist;
  - (1) An occupational therapist;
  - (m) A podiatric physician;
  - (n) A licensed psychologist;
- 36 (o) A licensed marriage and family therapist;
- 37 (p) A licensed clinical professional counselor;
- 38 (q) A music therapist;
- 39 (r) A chiropractor; 40
  - (s) An athletic trainer;
- 41 (t) A perfusionist;
- 42 (u) A doctor of Oriental medicine in any form;
- (v) A medical laboratory director or technician; 43
- 44 (w) A pharmacist;
- 45 (x) A licensed dietitian:





- (y) An associate in social work, a social worker, an independent social worker or a clinical social worker licensed pursuant to chapter 641B of NRS;
- (z) An alcohol and drug counselor or a problem gambling counselor who is certified pursuant to chapter 641C of NRS;
- (aa) An alcohol and drug counselor or a clinical alcohol and drug counselor who is licensed pursuant to chapter 641C of NRS; for
  - (bb) A midwife or apprentice midwife; or
- (cc) A medical facility as the employer of any person specified in this subsection.
- 2. For the purposes of NRS 629.400 to 629.490, inclusive, the term includes:
- (a) A person who holds a license or certificate issued pursuant to chapter 631 of NRS; and
- (b) A person who holds a current license or certificate to practice his or her respective discipline pursuant to the applicable provisions of law of another state or territory of the United States.
  - **Sec. 29.** NRS 630.279 is hereby amended to read as follows:
- 630.279 The Board shall adopt regulations regarding the licensure of practitioners of respiratory care, including, without limitation:
  - 1. Educational and other qualifications of applicants;
- 2. Required academic programs which applicants must successfully complete;
  - 3. Procedures for applying for and issuing licenses;
  - 4. Tests or examinations of applicants by the Board;
- The types of medical services that a practitioner of respiratory care may perform, except that a practitioner of respiratory care may not perform those specific functions and duties delegated or otherwise restricted by specific statute to persons licensed dentists. chiropractors, podiatric as physicians, optometrists, physicians, osteopathic physicians, [or] hearing aid specialists or midwives pursuant to this chapter or chapter 631, 633, 634, 635, 636 or 637B of NRS : or sections 2 to 26, inclusive, of this act, as appropriate, or persons who hold a license to engage in radiation therapy and radiologic imaging or a limited license to engage in radiologic imaging pursuant to chapter 653 of NRS;
  - 6. The duration, renewal and termination of licenses; and
- 7. The grounds and procedures for disciplinary actions against practitioners of respiratory care.
  - **Sec. 30.** NRS 630A.090 is hereby amended to read as follows: 630A.090 1. This chapter does not apply to:
- (a) The practice of dentistry, chiropractic, Oriental medicine, podiatry, optometry, perfusion, respiratory care, faith or Christian



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Science healing, nursing, *midwifery*, veterinary medicine or fitting hearing aids.

- (b) A medical officer of the Armed Forces or a medical officer of any division or department of the United States in the discharge of his or her official duties, including, without limitation, providing medical care in a hospital in accordance with an agreement entered into pursuant to NRS 449.2455.
- (c) Licensed or certified nurses in the discharge of their duties as nurses.
- (d) Homeopathic physicians who are called into this State, other than on a regular basis, for consultation or assistance to any physician licensed in this State, and who are legally qualified to practice in the state or country where they reside.
- This chapter does not repeal or affect any statute of Nevada regulating or affecting any other healing art.
  - This chapter does not prohibit:
  - (a) Gratuitous services of a person in case of emergency.
  - (b) The domestic administration of family remedies.
- 4. This chapter does not authorize a homeopathic physician to practice medicine, including allopathic medicine, except otherwise provided in NRS 630A.040.
  - NRS 630A.299 is hereby amended to read as follows: Sec. 31.
- 630A.299 The Board shall adopt regulations regarding the certification of a homeopathic assistant, including, but not limited
  - The educational and other qualifications of applicants. 1.
  - The required academic program for applicants.
- The procedures for applications for and the issuance of certificates.
  - The tests or examinations of applicants by the Board.
- The medical services which a homeopathic assistant may perform, except that a homeopathic assistant may not perform those specific functions and duties delegated or restricted by law to persons licensed as dentists, chiropractors, podiatric physicians, optometrists, [or] hearing aid specialists or midwives under chapter 631, 634, 635, 636 or 637B, respectively, of NRS or sections 2 to **26**, *inclusive*, *of this act* or persons licensed to engage in radiation therapy or radiologic imaging pursuant to chapter 653 of NRS.
  - The duration, renewal and termination of certificates.
- 7. grounds respecting disciplinary actions homeopathic assistants.
- The supervision of a homeopathic assistant by a supervising 43 homeopathic physician. 44
  - The establishment of requirements for the continuing education of homeopathic assistants.



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- **Sec. 32.** NRS 632.472 is hereby amended to read as follows:
- 632.472 1. The following persons shall report in writing to the Executive Director of the Board any conduct of a licensee or holder of a certificate which constitutes a violation of the provisions of this chapter:
- (a) Any physician, dentist, dental hygienist, *midwife, apprentice midwife,* chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, nursing assistant, medication aide certified, perfusionist, physician assistant licensed pursuant to chapter 630 or 633 of NRS, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, alcohol or drug counselor, music therapist, holder of a license or limited license issued pursuant to chapter 653 of NRS, driver of an ambulance, paramedic or other person providing medical services licensed or certified to practice in this State.
- (b) Any personnel of a medical facility or facility for the dependent engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a medical facility or facility for the dependent upon notification by a member of the staff of the facility.
  - (c) A coroner.

- (d) Any person who maintains or is employed by an agency to provide personal care services in the home.
- (e) Any person who operates, who is employed by or who contracts to provide services for an intermediary service organization as defined in NRS 449.4304.
- (f) Any person who maintains or is employed by an agency to provide nursing in the home.
- (g) Any employee of the Department of Health and Human Services.
- (h) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.
- (i) Any person who maintains or is employed by a facility or establishment that provides care for older persons.
- (j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect or exploitation of an older person and refers them to persons and agencies where their requests and needs can be met.
  - (k) Any social worker.
- (1) Any person who operates or is employed by a community health worker pool or with whom a community health worker pool contracts to provide the services of a community health worker, as defined in NRS 449.0027.





- (m) Any person who operates or is employed by a peer support recovery organization.
- 2. Every physician who, as a member of the staff of a medical facility or facility for the dependent, has reason to believe that a nursing assistant or medication aide certified has engaged in conduct which constitutes grounds for the denial, suspension or revocation of a certificate shall notify the superintendent, manager or other person in charge of the facility. The superintendent, manager or other person in charge shall make a report as required in subsection 1.
  - 3. A report may be filed by any other person.
- 4. Any person who in good faith reports any violation of the provisions of this chapter to the Executive Director of the Board pursuant to this section is immune from civil liability for reporting the violation.
  - 5. As used in this section:

- (a) "Agency to provide personal care services in the home" has the meaning ascribed to it in NRS 449.0021.
- (b) "Community health worker pool" has the meaning ascribed to it in NRS 449.0028.
- (c) "Peer support recovery organization" has the meaning ascribed to it in NRS 449.01563.
  - **Sec. 33.** NRS 633.171 is hereby amended to read as follows:
  - 633.171 1. This chapter does not apply to:
- (a) The practice of medicine or perfusion pursuant to chapter 630 of NRS, dentistry, chiropractic, podiatry, optometry, respiratory care, faith or Christian Science healing, nursing, *midwifery*, veterinary medicine or fitting hearing aids.
- (b) A medical officer of the Armed Forces or a medical officer of any division or department of the United States in the discharge of his or her official duties, including, without limitation, providing medical care in a hospital in accordance with an agreement entered into pursuant to NRS 449.2455.
- (c) Osteopathic physicians who are called into this State, other than on a regular basis, for consultation or assistance to a physician licensed in this State, and who are legally qualified to practice in the state where they reside.
- (d) Osteopathic physicians who are temporarily exempt from licensure pursuant to NRS 633.420 and are practicing osteopathic medicine within the scope of the exemption.
- 2. This chapter does not repeal or affect any law of this State regulating or affecting any other healing art.
  - 3. This chapter does not prohibit:
  - (a) Gratuitous services of a person in cases of emergency.
  - (b) The domestic administration of family remedies.





- **Sec. 34.** NRS 637B.080 is hereby amended to read as follows: 637B.080 The provisions of this chapter do not apply to any person who:
- 1. Holds a current credential issued by the Department of Education pursuant to chapter 391 of NRS and any regulations adopted pursuant thereto and engages in the practice of audiology or speech-language pathology within the scope of that credential;
- 2. Is employed by the Federal Government and engages in the practice of audiology or speech-language pathology within the scope of that employment;
- 3. Is a student enrolled in a program or school approved by the Board, is pursuing a degree in audiology or speech-language pathology and is clearly designated to the public as a student; or
- 4. Holds a current license issued pursuant to chapters 630 to 637, inclusive, 640 to 641C, inclusive, or 653 of NRS, *or sections 2 to 26, inclusive, of this act*,
- → and who does not engage in the private practice of audiology or speech-language pathology in this State.
  - **Sec. 35.** NRS 640A.070 is hereby amended to read as follows: 640A.070 This chapter does not apply to a person:
- 1. Holding a current license or certificate issued pursuant to chapter 391, 630 to 637B, inclusive, 640 or 640B to 641B, inclusive, of NRS, *or sections 2 to 26, inclusive, of this act* who practices within the scope of that license or certificate.
- 2. Employed by the Federal Government who practices occupational therapy within the scope of that employment.
- 3. Enrolled in an educational program approved by the Board which is designed to lead to a certificate or degree in occupational therapy, if the person is designated by a title which clearly indicates that he or she is a student.
- 4. Obtaining the supervised fieldwork experience necessary to satisfy the requirements of subsection 3 of NRS 640A.120.
  - **Sec. 36.** NRS 640B.145 is hereby amended to read as follows: 640B.145 The provisions of this chapter do not apply to:
- 1. A person who is licensed pursuant to chapters 630 to 637, inclusive, or chapter 640 or 640A of NRS, *or sections 2 to 26, inclusive, of this act* when acting within the scope of that license.
- 2. A person who is employed by the Federal Government and engages in the practice of athletic training within the scope of that employment.
- 3. A person who is temporarily exempt from licensure pursuant to NRS 640B.335 and is practicing athletic training within the scope of the exemption.
  - **Sec. 37.** NRS 640C.100 is hereby amended to read as follows: 640C.100 1. The provisions of this chapter do not apply to:





- (a) A person licensed pursuant to chapter 630, 630A, 631, 632, 633, 634, 634A, 635, 640, 640A or 640B of NRS *or sections 2 to 26, inclusive, of this act* if the massage therapy, reflexology or structural integration is performed in the course of the practice for which the person is licensed.
- (b) A person licensed as a barber or apprentice pursuant to chapter 643 of NRS if the person is massaging, cleansing or stimulating the scalp, face, neck or skin within the permissible scope of practice for a barber or apprentice pursuant to that chapter.
- (c) A person licensed or registered as an esthetician, esthetician's apprentice, hair designer, hair designer's apprentice, technologist, shampoo cosmetologist cosmetologist's apprentice pursuant to chapter 644A of NRS if the person is massaging, cleansing or stimulating the scalp, face, neck or skin within the permissible scope of practice for an esthetician, esthetician's apprentice, hair designer, hair designer's apprentice, technologist, hair braider, shampoo cosmetologist cosmetologist's apprentice pursuant to that chapter.
- (d) A person licensed or registered as a nail technologist or nail technologist's apprentice pursuant to chapter 644A of NRS if the person is massaging, cleansing or stimulating the hands, forearms, feet or lower legs within the permissible scope of practice for a nail technologist or nail technologist's apprentice.
- (e) A person who is an employee of an athletic department of any high school, college or university in this State and who, within the scope of that employment, practices massage therapy, reflexology or structural integration on athletes.
- (f) Students enrolled in a school of massage therapy, reflexology or structural integration recognized by the Board.
- (g) A person who practices massage therapy, reflexology or structural integration solely on members of his or her immediate family.
  - (h) A person who performs any activity in a licensed brothel.
- 2. Except as otherwise provided in subsection 3 and NRS 640C.330, the provisions of this chapter preempt the licensure and regulation of a massage therapist, reflexologist or structural integration practitioner by a county, city or town, including, without limitation, conducting a criminal background investigation and examination of a massage therapist, reflexologist or structural integration practitioner or applicant for a license to practice massage therapy, reflexology or structural integration.
- 3. The provisions of this chapter do not prohibit a county, city or town from requiring a massage therapist, reflexologist or structural integration practitioner to obtain a license or permit to transact business within the jurisdiction of the county, city or town,





if the license or permit is required of other persons, regardless of occupation or profession, who transact business within the jurisdiction of the county, city or town.

- 4. As used in this section, "immediate family" means persons who are related by blood, adoption or marriage, within the second degree of consanguinity or affinity.
  - **Sec. 38.** NRS 7.095 is hereby amended to read as follows:
- 7.095 1. An attorney shall not contract for or collect a fee contingent on the amount of recovery for representing a person seeking damages in connection with an action for injury or death against a provider of health care based upon professional negligence in excess of:
  - (a) Forty percent of the first \$50,000 recovered;
- (b) Thirty-three and one-third percent of the next \$50,000 recovered;
  - (c) Twenty-five percent of the next \$500,000 recovered; and
- (d) Fifteen percent of the amount of recovery that exceeds \$600,000.
- 2. The limitations set forth in subsection 1 apply to all forms of recovery, including, without limitation, settlement, arbitration and judgment.
- 3. For the purposes of this section, "recovered" means the net sum recovered by the plaintiff after deducting any disbursements or costs incurred in connection with the prosecution or settlement of the claim. Costs of medical care incurred by the plaintiff and general and administrative expenses incurred by the office of the attorney are not deductible disbursements or costs.
  - 4. As used in this section:
- (a) "Professional negligence" means a negligent act or omission to act by a provider of health care in the rendering of professional services, which act or omission is the proximate cause of a personal injury or wrongful death. The term does not include services that are outside the scope of services for which the provider of health care is licensed or services for which any restriction has been imposed by the applicable regulatory board or health care facility.
- (b) "Provider of health care" means a physician licensed under chapter 630 or 633 of NRS, dentist, registered nurse, *midwife*, *apprentice midwife*, dispensing optician, optometrist, registered physical therapist, podiatric physician, licensed psychologist, chiropractor, doctor of Oriental medicine, holder of a license or a limited license issued under the provisions of chapter 653 of NRS, medical laboratory director or technician, licensed dietitian or a licensed hospital and its employees.





- **Sec. 39.** NRS 41.138 is hereby amended to read as follows:
- 41.138 1. In any civil action concerning any unwelcome or nonconsensual sexual conduct, including, without limitation, sexual harassment, there is a rebuttable presumption that the sexual conduct was unwelcome or nonconsensual if the alleged perpetrator was a person in a position of authority over the alleged victim.
  - 2. As used in this section:

- (a) "Person in a position of authority" means a parent, relative, household member, employer, supervisor, youth leader, scout leader, coach, mentor in a mentoring program, teacher, professor, counselor, school administrator, religious leader, doctor, nurse, *midwife, apprentice midwife*, psychologist, other health care provider, guardian ad litem, guardian, babysitter, police officer or other law enforcement officer or any other person who, by reason of his or her position, is able to exercise significant or undue influence over the victim.
- (b) "Sexual harassment" has the meaning ascribed to it in NRS 176A.280.
  - **Sec. 40.** NRS 41.505 is hereby amended to read as follows:
- 41.505 Any person licensed under the provisions of chapter 630, 632 or 633 of NRS or sections 2 to 26, inclusive, of this act and any person who holds an equivalent license issued by another state, who renders emergency care or assistance, including, without limitation, emergency obstetrical care or assistance, in an emergency, gratuitously and in good faith, is not liable for any civil damages as a result of any act or omission, not amounting to gross negligence, by that person in rendering the emergency care or assistance or as a result of any failure to act, not amounting to gross negligence, to provide or arrange for further medical treatment for the injured or ill person. This section does not excuse a physician, physician assistant, [or] nurse, midwife or apprentice midwife from liability for damages resulting from that person's acts or omissions which occur in a licensed medical facility relative to any person with whom there is a preexisting relationship as a patient.
- 2. Any person licensed under the provisions of chapter 630, 632 or 633 of NRS *or sections 2 to 26, inclusive, of this act* and any person who holds an equivalent license issued by another state who:
- (a) Is retired or otherwise does not practice on a full-time basis; and
- (b) Gratuitously and in good faith, renders medical care within the scope of that person's license to an indigent person,
- is not liable for any civil damages as a result of any act or omission by that person, not amounting to gross negligence or reckless, willful or wanton conduct, in rendering that care.





- 3. Any person licensed to practice medicine under the provisions of chapter 630 or 633 of NRS or licensed to practice dentistry under the provisions of chapter 631 of NRS who renders care or assistance to a patient for a governmental entity or a nonprofit organization is not liable for any civil damages as a result of any act or omission by that person in rendering that care or assistance if the care or assistance is rendered gratuitously, in good faith and in a manner not amounting to gross negligence or reckless, willful or wanton conduct.
- 4. As used in this section, "gratuitously" has the meaning ascribed to it in NRS 41.500.
  - **Sec. 41.** NRS 41.506 is hereby amended to read as follows:
- 41.506 1. Any person licensed under the provisions of chapter 630, 632 or 633 of NRS or sections 2 to 26, inclusive, of this act and any person who holds an equivalent license issued by another state who renders emergency obstetrical care or assistance to a pregnant woman during labor or the delivery of the child is not liable for any civil damages as a result of any act or omission by that person in rendering that care or assistance if:
- (a) The care or assistance is rendered in good faith and in a manner not amounting to gross negligence or reckless, willful or wanton conduct;
- (b) The person has not previously provided prenatal or obstetrical care to the woman; and
- (c) The damages are reasonably related to or primarily caused by a lack of prenatal care received by the woman.
- 2. A licensed medical facility in which such care or assistance is rendered is not liable for any civil damages as a result of any act or omission by the person in rendering that care or assistance if that person is not liable for any civil damages pursuant to subsection 1 and the actions of the medical facility relating to the rendering of that care or assistance do not amount to gross negligence or reckless, willful or wanton conduct.
  - **Sec. 42.** NRS 41A.017 is hereby amended to read as follows:
- 41A.017 "Provider of health care" means a physician licensed pursuant to chapter 630 or 633 of NRS, physician assistant, dentist, licensed nurse, *midwife*, *apprentice midwife*, dispensing optician, optometrist, registered physical therapist, podiatric physician, licensed psychologist, chiropractor, doctor of Oriental medicine, holder of a license or a limited license issued under the provisions of chapter 653 of NRS, medical laboratory director or technician, licensed dietitian or a licensed hospital, clinic, surgery center, physicians' professional corporation or group practice that employs any such person and its employees.





**Sec. 43.** NRS 42.021 is hereby amended to read as follows:

42.021 1. In an action for injury or death against a provider of health care based upon professional negligence, if the defendant so elects, the defendant may introduce evidence of any amount payable as a benefit to the plaintiff as a result of the injury or death pursuant to the United States Social Security Act, any state or federal income disability or worker's compensation act, any health, sickness or income-disability insurance, accident insurance that provides health benefits or income-disability coverage, and any contract or agreement of any group, organization, partnership or corporation to provide, pay for or reimburse the cost of medical, hospital, dental or other health care services. If the defendant elects to introduce such evidence, the plaintiff may introduce evidence of any amount that the plaintiff has paid or contributed to secure the plaintiff's right to any insurance benefits concerning which the defendant has introduced evidence.

- 2. A source of collateral benefits introduced pursuant to subsection 1 may not:
  - (a) Recover any amount against the plaintiff; or
- (b) Be subrogated to the rights of the plaintiff against a defendant.
- 3. In an action for injury or death against a provider of health care based upon professional negligence, a district court shall, at the request of either party, enter a judgment ordering that money damages or its equivalent for future damages of the judgment creditor be paid in whole or in part by periodic payments rather than by a lump-sum payment if the award equals or exceeds \$50,000 in future damages.
- 4. In entering a judgment ordering the payment of future damages by periodic payments pursuant to subsection 3, the court shall make a specific finding as to the dollar amount of periodic payments that will compensate the judgment creditor for such future damages. As a condition to authorizing periodic payments of future damages, the court shall require a judgment debtor who is not adequately insured to post security adequate to assure full payment of such damages awarded by the judgment. Upon termination of periodic payments of future damages, the court shall order the return of this security, or so much as remains, to the judgment debtor.
- 5. A judgment ordering the payment of future damages by periodic payments entered pursuant to subsection 3 must specify the recipient or recipients of the payments, the dollar amount of the payments, the interval between payments, and the number of payments or the period of time over which payments will be made. Such payments must only be subject to modification in the event of the death of the judgment creditor. Money damages awarded for loss





of future earnings must not be reduced or payments terminated by reason of the death of the judgment creditor, but must be paid to persons to whom the judgment creditor owed a duty of support, as provided by law, immediately before the judgment creditor's death. In such cases, the court that rendered the original judgment may, upon petition of any party in interest, modify the judgment to award and apportion the unpaid future damages in accordance with this subsection.

- 6. If the court finds that the judgment debtor has exhibited a continuing pattern of failing to make the periodic payments as specified pursuant to subsection 5, the court shall find the judgment debtor in contempt of court and, in addition to the required periodic payments, shall order the judgment debtor to pay the judgment creditor all damages caused by the failure to make such periodic payments, including, but not limited to, court costs and attorney's fees.
- 7. Following the occurrence or expiration of all obligations specified in the periodic payment judgment, any obligation of the judgment debtor to make further payments ceases and any security given pursuant to subsection 4 reverts to the judgment debtor.
  - 8. As used in this section:

- (a) "Future damages" includes damages for future medical treatment, care or custody, loss of future earnings, loss of bodily function, or future pain and suffering of the judgment creditor.
- (b) "Periodic payments" means the payment of money or delivery of other property to the judgment creditor at regular intervals.
- (c) "Professional negligence" means a negligent act or omission to act by a provider of health care in the rendering of professional services, which act or omission is the proximate cause of a personal injury or wrongful death. The term does not include services that are outside the scope of services for which the provider of health care is licensed or services for which any restriction has been imposed by the applicable regulatory board or health care facility.
- (d) "Provider of health care" means a physician licensed under chapter 630 or 633 of NRS, dentist, licensed nurse, *midwife*, *apprentice midwife*, dispensing optician, optometrist, registered physical therapist, podiatric physician, licensed psychologist, chiropractor, doctor of Oriental medicine, holder of a license or a limited license issued under the provisions of chapter 653 of NRS, medical laboratory director or technician, licensed dietitian or a licensed hospital and its employees.
  - **Sec. 44.** NRS 52.320 is hereby amended to read as follows:
- 52.320 As used in NRS 52.320 to 52.375, inclusive, unless the context otherwise requires:





- 1. "Custodian of medical records" means a chiropractor, physician, registered physical therapist, [or] licensed nurse or midwife who prepares and maintains medical records, or any employee or agent of such a person or a facility for convalescent care, medical laboratory or hospital who has care, custody and control of medical records for such a person or institution.
- 2. "Medical records" includes bills, ledgers, statements and other accounts which show the cost of medical services or care provided to a patient.
  - **Sec. 45.** NRS 200.471 is hereby amended to read as follows:

200.471 1. As used in this section:

(a) "Assault" means:

- (1) Unlawfully attempting to use physical force against another person; or
- (2) Intentionally placing another person in reasonable apprehension of immediate bodily harm.
- (b) "Fire-fighting agency" has the meaning ascribed to it in NRS 239B.020.
  - (c) "Officer" means:
- (1) A person who possesses some or all of the powers of a peace officer;
- (2) A person employed in a full-time salaried occupation of fire fighting for the benefit or safety of the public;
  - (3) A member of a volunteer fire department;
- (4) A jailer, guard or other correctional officer of a city or county jail;
- (5) A prosecuting attorney of an agency or political subdivision of the United States or of this State;
- (6) A justice of the Supreme Court, judge of the Court of Appeals, district judge, justice of the peace, municipal judge, magistrate, court commissioner, master or referee, including a person acting pro tempore in a capacity listed in this subparagraph;
- (7) An employee of this State or a political subdivision of this State whose official duties require the employee to make home visits:
- (8) A civilian employee or a volunteer of a law enforcement agency whose official duties require the employee or volunteer to:
  - (I) Interact with the public;
  - (II) Perform tasks related to law enforcement; and
- (III) Wear identification, clothing or a uniform that identifies the employee or volunteer as working or volunteering for the law enforcement agency;
- (9) A civilian employee or a volunteer of a fire-fighting agency whose official duties require the employee or volunteer to:
  - (I) Interact with the public;





- (II) Perform tasks related to fire fighting or fire prevention; and
- (III) Wear identification, clothing or a uniform that identifies the employee or volunteer as working or volunteering for the fire-fighting agency; or
- (10) A civilian employee or volunteer of this State or a political subdivision of this State whose official duties require the employee or volunteer to:
  - (I) Interact with the public;

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- (II) Perform tasks related to code enforcement; and
- (III) Wear identification, clothing or a uniform that identifies the employee or volunteer as working or volunteering for this State or a political subdivision of this State.
- (d) "Provider of health care" means a physician, a medical student, a perfusionist or a physician assistant licensed pursuant to chapter 630 of NRS, a practitioner of respiratory care, a homeopathic physician, an advanced practitioner of homeopathy, a homeopathic assistant, an osteopathic physician, a physician assistant licensed pursuant to chapter 633 of NRS, a midwife, an apprentice midwife, a birth assistant, a podiatric physician, a podiatry hygienist, a physical therapist, a medical laboratory technician, an optometrist, a chiropractor, a chiropractor's assistant, a doctor of Oriental medicine, a nurse, a student nurse, a certified nursing assistant, a nursing assistant trainee, a medication aide certified, a dentist, a dental student, a dental hygienist, a dental hygienist student, a pharmacist, a pharmacy student, an intern pharmacist, an attendant on an ambulance or air ambulance, a psychologist, a social worker, a marriage and family therapist, a marriage and family therapist intern, a clinical professional counselor, a clinical professional counselor intern, a licensed dietitian, the holder of a license or a limited license issued under the provisions of chapter 653 of NRS, an emergency medical technician, an advanced emergency medical technician and a paramedic.
- (e) "School employee" means a licensed or unlicensed person employed by a board of trustees of a school district pursuant to NRS 391.100 or 391.281.
- (f) "Sporting event" has the meaning ascribed to it in NRS 41.630.
- (g) "Sports official" has the meaning ascribed to it in NRS 41.630.
  - (h) "Taxicab" has the meaning ascribed to it in NRS 706.8816.
  - (i) "Taxicab driver" means a person who operates a taxicab.
- (j) "Transit operator" means a person who operates a bus or other vehicle as part of a public mass transportation system.





- 2. A person convicted of an assault shall be punished:
- (a) If paragraph (c) or (d) does not apply to the circumstances of the crime and the assault is not made with the use of a deadly weapon or the present ability to use a deadly weapon, for a misdemeanor.
- (b) If the assault is made with the use of a deadly weapon or the present ability to use a deadly weapon, for a category B felony by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years, or by a fine of not more than \$5,000, or by both fine and imprisonment.
- (c) If paragraph (d) does not apply to the circumstances of the crime and if the assault is committed upon an officer, a provider of health care, a school employee, a taxicab driver or a transit operator who is performing his or her duty or upon a sports official based on the performance of his or her duties at a sporting event and the person charged knew or should have known that the victim was an officer, a provider of health care, a school employee, a taxicab driver, a transit operator or a sports official, for a gross misdemeanor, unless the assault is made with the use of a deadly weapon or the present ability to use a deadly weapon, then for a category B felony by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years, or by a fine of not more than \$5,000, or by both fine and imprisonment.
- (d) If the assault is committed upon an officer, a provider of health care, a school employee, a taxicab driver or a transit operator who is performing his or her duty or upon a sports official based on the performance of his or her duties at a sporting event by a probationer, a prisoner who is in lawful custody or confinement or a parolee, and the probationer, prisoner or parolee charged knew or should have known that the victim was an officer, a provider of health care, a school employee, a taxicab driver, a transit operator or a sports official, for a category D felony as provided in NRS 193.130, unless the assault is made with the use of a deadly weapon or the present ability to use a deadly weapon, then for a category B felony by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years, or by a fine of not more than \$5,000, or by both fine and imprisonment.
  - **Sec. 46.** NRS 200.5093 is hereby amended to read as follows:

200.5093 1. Any person who is described in subsection 4 and who, in a professional or occupational capacity, knows or has reasonable cause to believe that an older person or vulnerable person has been abused, neglected, exploited, isolated or abandoned shall:





- (a) Except as otherwise provided in subsection 2, report the abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person to:
- (1) The local office of the Aging and Disability Services Division of the Department of Health and Human Services;
  - (2) A police department or sheriff's office; or
- (3) A toll-free telephone service designated by the Aging and Disability Services Division of the Department of Health and Human Services; and
- (b) Make such a report as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the older person or vulnerable person has been abused, neglected, exploited, isolated or abandoned.
- 2. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that the abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person involves an act or omission of the Aging and Disability Services Division, another division of the Department of Health and Human Services or a law enforcement agency, the person shall make the report to an agency other than the one alleged to have committed the act or omission.
- 3. Each agency, after reducing a report to writing, shall forward a copy of the report to the Aging and Disability Services Division of the Department of Health and Human Services and the Unit for the Investigation and Prosecution of Crimes.
- 4. A report must be made pursuant to subsection 1 by the following persons:
- (a) Every physician, dentist, dental hygienist, chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, physician assistant licensed pursuant to chapter 630 or 633 of NRS, *midwife*, *apprentice midwife*, perfusionist, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, clinical alcohol and drug counselor, alcohol and drug counselor, music therapist, athletic trainer, driver of an ambulance, paramedic, licensed dietitian, holder of a license or a limited license issued under the provisions of chapter 653 of NRS or other person providing medical services licensed or certified to practice in this State, who examines, attends or treats an older person or vulnerable person who appears to have been abused, neglected, exploited, isolated or abandoned.
- (b) Any personnel of a hospital or similar institution engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a hospital or similar institution upon notification of the suspected abuse, neglect,





exploitation, isolation or abandonment of an older person or vulnerable person by a member of the staff of the hospital.

(c) A coroner.

- (d) Every person who maintains or is employed by an agency to provide personal care services in the home.
- (e) Every person who maintains or is employed by an agency to provide nursing in the home.
- (f) Every person who operates, who is employed by or who contracts to provide services for an intermediary service organization as defined in NRS 449.4304.
- (g) Any employee of the Department of Health and Human Services, except the State Long-Term Care Ombudsman appointed pursuant to NRS 427A.125 and any of his or her advocates or volunteers where prohibited from making such a report pursuant to 45 C.F.R. § 1321.11.
- (h) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.
- (i) Any person who maintains or is employed by a facility or establishment that provides care for older persons or vulnerable persons.
- (j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect, exploitation, isolation or abandonment of an older person or vulnerable person and refers them to persons and agencies where their requests and needs can be met.
  - (k) Every social worker.
- (l) Any person who owns or is employed by a funeral home or mortuary.
- (m) Every person who operates or is employed by a peer support recovery organization, as defined in NRS 449.01563.
- (n) Every person who operates or is employed by a community health worker pool, as defined in NRS 449.0028, or with whom a community health worker pool contracts to provide the services of a community health worker, as defined in NRS 449.0027.
  - 5. A report may be made by any other person.
- 6. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that an older person or vulnerable person has died as a result of abuse, neglect, isolation or abandonment, the person shall, as soon as reasonably practicable, report this belief to the appropriate medical examiner or coroner, who shall investigate the cause of death of the older person or vulnerable person and submit to the appropriate local law enforcement agencies, the appropriate prosecuting attorney, the Aging and Disability Services Division of the Department of Health





and Human Services and the Unit for the Investigation and Prosecution of Crimes his or her written findings. The written findings must include the information required pursuant to the provisions of NRS 200.5094, when possible.

- 7. A division, office or department which receives a report pursuant to this section shall cause the investigation of the report to commence within 3 working days. A copy of the final report of the investigation conducted by a division, office or department, other than the Aging and Disability Services Division of the Department of Health and Human Services, must be forwarded within 30 days after the completion of the report to the:
  - (a) Aging and Disability Services Division;
- (b) Repository for Information Concerning Crimes Against Older Persons or Vulnerable Persons created by NRS 179A.450; and
  - (c) Unit for the Investigation and Prosecution of Crimes.
- 8. If the investigation of a report results in the belief that an older person or vulnerable person is abused, neglected, exploited, isolated or abandoned, the Aging and Disability Services Division of the Department of Health and Human Services or the county's office for protective services may provide protective services to the older person or vulnerable person if the older person or vulnerable person is able and willing to accept them.
- 9. A person who knowingly and willfully violates any of the provisions of this section is guilty of a misdemeanor.
- 10. As used in this section, "Unit for the Investigation and Prosecution of Crimes" means the Unit for the Investigation and Prosecution of Crimes Against Older Persons or Vulnerable Persons in the Office of the Attorney General created pursuant to NRS 228.265.
- **Sec. 47.** NRS 200.5095 is hereby amended to read as follows: 200.5095

  1. Reports made pursuant to NRS 200.5093 and 200.5094, and records and investigations relating to those reports, are confidential.
- 2. A person, law enforcement agency or public or private agency, institution or facility who willfully releases data or information concerning the reports and investigation of the abuse, neglect, exploitation, isolation or abandonment of older persons or vulnerable persons, except:
  - (a) Pursuant to a criminal prosecution;
  - (b) Pursuant to NRS 200.50982; or
  - (c) To persons or agencies enumerated in subsection 3,
- → is guilty of a misdemeanor.
   3. Except as otherwise provided in subsection 2 and NRS 200.50982, data or information concerning the reports and





investigations of the abuse, neglect, exploitation, isolation or abandonment of an older person or a vulnerable person is available only to:

- (a) A physician who is providing care to an older person or a vulnerable person who may have been abused, neglected, exploited, isolated or abandoned:
- (b) An agency responsible for or authorized to undertake the care, treatment and supervision of the older person or vulnerable person;
- (c) A district attorney or other law enforcement official who requires the information in connection with an investigation of the abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person;
- (d) A court which has determined, in camera, that public disclosure of such information is necessary for the determination of an issue before it;
- (e) A person engaged in bona fide research, but the identity of the subjects of the report must remain confidential;
- (f) A grand jury upon its determination that access to such records is necessary in the conduct of its official business;
- (g) Any comparable authorized person or agency in another jurisdiction;
- (h) A legal guardian of the older person or vulnerable person, if the identity of the person who was responsible for reporting the alleged abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person to the public agency is protected, and the legal guardian of the older person or vulnerable person is not the person suspected of such abuse, neglect, exploitation, isolation or abandonment;
- (i) If the older person or vulnerable person is deceased, the executor or administrator of his or her estate, if the identity of the person who was responsible for reporting the alleged abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person to the public agency is protected, and the executor or administrator is not the person suspected of such abuse, neglect, exploitation, isolation or abandonment:
- (j) The older person or vulnerable person named in the report as allegedly being abused, neglected, exploited, isolated or abandoned, if that person is not legally incapacitated;
- (k) An attorney appointed by a court to represent a protected person in a guardianship proceeding pursuant to NRS 159.0485, if:
- (1) The protected person is an older person or vulnerable person;
- (2) The identity of the person who was responsible for reporting the alleged abuse, neglect, exploitation, isolation or





abandonment of the older person or vulnerable person to the public agency is protected; and

- (3) The attorney of the protected person is not the person suspected of such abuse, neglect, exploitation, isolation or abandonment; or
- (1) The State Guardianship Compliance Office created by NRS 159.341.
- 4. If the person who is reported to have abused, neglected, exploited, isolated or abandoned an older person or a vulnerable person is the holder of a license, [or] certificate or permit issued pursuant to chapters 449, 630 to 641B, inclusive, 653 or 654 of NRS, or sections 2 to 26, inclusive, of this act, the information contained in the report must be submitted to the board that issued the license.
- 5. If data or information concerning the reports and investigations of the abuse, neglect, exploitation, isolation or abandonment of an older person or a vulnerable person is made available pursuant to paragraph (b) or (j) of subsection 3 or subsection 4, the name and any other identifying information of the person who made the report must be redacted before the data or information is made available.
- **Sec. 48.** NRS 200.810 is hereby amended to read as follows: 200.810 "Health care procedure" means any medical procedure, other than a surgical procedure, that requires a license to perform pursuant to chapters 630 to 637, inclusive, 639, 640 or 653 of NRS [-] or sections 2 to 26, inclusive, of this act.
- **Sec. 49.** NRS 200.820 is hereby amended to read as follows: 200.820 "Surgical procedure" means any invasive medical procedure where a break in the skin is created and there is contact with the mucosa or any minimally invasive medical procedure where a break in the skin is created or which involves manipulation of the internal body cavity beyond a natural or artificial body orifice which requires a license to perform pursuant to chapters 630 to 637, inclusive, 639, 640 or 653 of NRS [...] or sections 2 to 26, inclusive, of this act.
- Sec. 50. NRS 239.010 is hereby amended to read as follows: 239.010 1. Except as otherwise provided in this section and NRS 1.4683, 1.4687, 1A.110, 3.2203, 41.071, 49.095, 49.293, 62D.420, 62D.440, 62E.516, 62E.620, 62H.025, 62H.030, 62H.170, 62H.220, 62H.320, 75A.100, 75A.150, 76.160, 78.152, 80.113, 81.850, 82.183, 86.246, 86.54615, 87.515, 87.5413, 87A.200, 87A.580, 87A.640, 88.3355, 88.5927, 88.6067, 88A.345, 88A.7345, 89.045, 89.251, 90.730, 91.160, 116.757, 116A.270, 116B.880, 118B.026, 119.260, 119.265, 119.267, 119.280, 119A.280, 119A.653, 119A.677, 119B.370, 119B.382, 120A.690, 125.130,





125B.140, 126.141, 126.161, 126.163, 126.730, 127.007, 127.057, 1 2 127.130, 127.140, 127.2817, 128.090, 130.312, 130.712, 136.050, 159A.044, 172.245, 176.01249, 176.015, 3 172.075, 176.0625, 176.09129, 176.156, 176A.630, 178.39801, 178.4715, 4 5 178.5691, 179.495, 179A.070, 179A.165, 179D.160, 200.3771, 202.3662, 205.4651, 209.392, 200.5095, 200.604. 6 200.3772. 209.3923, 7 209.3925, 209.419, 209.429, 209.521, 211A.140, 213.010, 213.040, 213.095, 213.131, 217.105, 217.110, 217.464, 8 217.475, 218A.350, 218E.625, 218F.150, 218G.130, 218G.240, 9 218G.350, 226.300, 228.270, 228.450, 228.495, 228.570, 231.069, 10 231.1473. 233.190. 237.300. 239.0105. 239.0113. 11 239B.030, 239B.040, 239B.050, 239C.140, 239C.210, 239C.230, 12 13 239C.250, 239C.270, 239C.420, 240.007, 241.020, 241.039, 242.105, 244.264, 244.335, 247.540, 247.550, 247.560, 14 250.087, 250.130, 250.140, 250.150, 268.095, 268.0978, 268.490, 15 269.174, 271A.105, 281.195, 281.805, 281A.350, 16 268.910, 281A.680, 281A.685, 281A.750, 281A.755, 281A.780, 284.4068, 17 286.110, 286.118, 287.0438, 289.025, 289.080, 289.387, 289.830, 18 293.4855, 293.5002, 293.503, 293.504, 293.558, 293.5757, 293.870, 19 293.906, 293.908, 293.910, 293B.135, 293D.510, 331.110, 332.061, 20 332.351, 333.333, 333.335, 338.070, 338.1379, 338.1593, 338.1725, 21 22 338.1727, 348.420, 349.597, 349.775, 353.205, 353A.049, 353A.100, 353C.240, 360.240, 360.247, 360.255, 23 353A.085. 360.755, 361.044, 361.2242, 361.610, 365.138, 366.160, 368A.180, 24 370.257, 370.327, 372A.080, 378.290, 378.300, 379.0075, 379.008, 25 26 379.1495, 385A.830, 385B.100, 387.626, 387.631, 388.1455, 388.259, 388.501, 388.503, 388.513, 388.750, 388A.247, 388A.249, 27 28 391.033, 391.035, 391.0365, 391.120, 391.925, 392.029, 392.147, 392.264, 392.271, 392.315, 392.317, 392.325, 392.327, 392.335, 29 392.850, 393.045, 394.167, 394.16975, 394.1698, 394.447, 394.460, 30 396.3295, 396.405, 396.525, 396.535, 396.9685, 31 394.465, 398A.115, 408.3885, 408.3886, 408.3888, 408.5484, 412.153, 32 416.070, 422.2749, 422.305, 422A.342, 33 414.280. 422A.350. 425.400, 427A.1236, 427A.872, 432.028, 432.205, 432B.175, 34 432B.280, 432B.290, 432B.407, 432B.430, 432B.560, 432B.5902, 35 432C.140, 432C.150, 433.534, 433A.360, 437.145, 437.207. 36 439.4941, 439.840, 439.914, 439B.420, 439B.754, 439B.760, 37 440.170, 441A.195, 441A.220, 441A.230, 442.330, 442.395, 38 442.735, 442.774, 445A.665, 445B.570, 445B.7773, 447.345, 39 449.209, 449.245, 449.4315, 449A.112, 450.140, 450B.188, 40 41 453.164, 453.720, 453A.610, 453A.700, 458.055, 458.280, 459.050, 42 459.3866, 459.555, 459.7056, 459.846, 463.120, 463.15993, 43 463.240, 463.3403, 463.3407, 463.790, 467.1005, 480.535, 480.545, 480.935, 480.940, 481.063, 481.091, 481.093, 482.170, 482.5536, 44 45 483.340, 483.363, 483.575, 483.659, 483.800, 484A.469, 484E.070,





485.316, 501.344, 503.452, 522.040, 534A.031, 561.285, 571.160, 1 2 584.655, 587.877, 598.0964. 598.098. 598A.110. 599B.090. 603.070, 603A.210, 604A.303, 604A.710, 612.265, 616B.012, 3 616B.315, 616B.350, 618.341, 618.425, 4 616B.015, 622.238. 5 622.310, 623.131, 623A.137, 624.110, 624.265, 624.327, 625.425, 6 625A.185. 628.418, 628B.230, 628B.760, 629.047, 629.069. 7 630.133, 630.2673, 630.30665, 630.336, 630A.555, 631.368, 8 632.121, 632.125, 632.3415, 632.405, 633.283, 633.301, 633.4715, 633.524, 634.055, 634.214, 634A.185, 635.158, 636.107, 637.085, 9 637B.288, 638.087, 638.089, 639.2485, 639.570, 10 640.075, 640A.220, 640B.730, 640C.580, 640C.600, 640C.620, 640C.745, 11 12 640C.760, 640D.190, 640E.340, 641.090, 641.221, 641.325. 13 641A.191, 641A.262, 641A.289, 641B.170, 641B.282, 641B.460, 641C.760. 641C.800. 642.524. 643.189. 644A.870. 645.180, 14 645.625, 645A.050, 645A.082, 645B.060, 645B.092, 645C.220, 15 645C.225, 645D.130, 645D.135, 645G.510, 645H.320, 645H.330, 16 17 647.0945, 647.0947, 648.033, 648.197, 649.065, 649.067, 652.228, 653.900, 654.110, 656.105, 657A.510, 661.115, 665.130, 665.133, 18 669.275, 669.285, 669A.310, 671.170, 673.450, 673.480, 675.380, 19 20 676A.340, 676A.370, 677.243, 678A.470, 678C.710, 678C.800, 679B.122, 679B.124, 679B.152, 679B.159, 679B.190, 679B.285, 21 22 679B.690, 680A.270, 681A.440, 681B.260, 681B.410, 681B.540, 683A.0873, 685A.077, 686A.289, 686B.170, 686C.306, 687A.110, 23 24 687A.115, 687C.010, 688C.230, 688C.480, 688C.490, 689A.696, 25 692A.117, 692C.190, 692C.3507, 692C.3536, 692C.3538, 26 692C.354, 692C.420, 693A.480, 693A.615, 696B.550, 696C.120, 703.196, 704B.325, 706.1725, 706A.230, 710.159, 711.600, and 27 section 23 of this act, sections 35, 38 and 41 of chapter 478, 28 Statutes of Nevada 2011 and section 2 of chapter 391, Statutes of 29 30 Nevada 2013 and unless otherwise declared by law to be confidential, all public books and public records of a governmental 31 32 entity must be open at all times during office hours to inspection by 33 any person, and may be fully copied or an abstract or memorandum may be prepared from those public books and public records. Any 34 such copies, abstracts or memoranda may be used to supply the 35 36 general public with copies, abstracts or memoranda of the records or 37 may be used in any other way to the advantage of the governmental entity or of the general public. This section does not supersede or in 38 any manner affect the federal laws governing copyrights or enlarge, 39 40 diminish or affect in any other manner the rights of a person in any 41 written book or record which is copyrighted pursuant to federal law. 42

- 2. A governmental entity may not reject a book or record which is copyrighted solely because it is copyrighted.
- 3. A governmental entity that has legal custody or control of a public book or record shall not deny a request made pursuant to



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subsection 1 to inspect or copy or receive a copy of a public book or record on the basis that the requested public book or record contains information that is confidential if the governmental entity can redact, delete, conceal or separate, including, without limitation, electronically, the confidential information from the information included in the public book or record that is not otherwise confidential.

- 4. If requested, a governmental entity shall provide a copy of a public record in an electronic format by means of an electronic medium. Nothing in this subsection requires a governmental entity to provide a copy of a public record in an electronic format or by means of an electronic medium if:
  - (a) The public record:

- (1) Was not created or prepared in an electronic format; and
- (2) Is not available in an electronic format; or
- (b) Providing the public record in an electronic format or by means of an electronic medium would:
  - (1) Give access to proprietary software; or
- (2) Require the production of information that is confidential and that cannot be redacted, deleted, concealed or separated from information that is not otherwise confidential.
- 5. An officer, employee or agent of a governmental entity who has legal custody or control of a public record:
- (a) Shall not refuse to provide a copy of that public record in the medium that is requested because the officer, employee or agent has already prepared or would prefer to provide the copy in a different medium.
- (b) Except as otherwise provided in NRS 239.030, shall, upon request, prepare the copy of the public record and shall not require the person who has requested the copy to prepare the copy himself or herself.
  - **Sec. 51.** NRS 372.7285 is hereby amended to read as follows:
- 372.7285 1. In administering the provisions of NRS 372.325, the Department shall apply the exemption to the sale of a medical device to a governmental entity that is exempt pursuant to that section without regard to whether the person using the medical device or the governmental entity that purchased the device is deemed to be the holder of title to the device if:
- (a) The medical device was ordered or prescribed by a provider of health care, within his or her scope of practice, for use by the person to whom it is provided;
  - (b) The medical device is covered by Medicaid or Medicare; and
- (c) The purchase of the medical device is made pursuant to a contract between the governmental entity that purchases the medical





device and the person who sells the medical device to the governmental entity.

2. As used in this section:

- (a) "Medicaid" means the program established pursuant to Title XIX of the Social Security Act, 42 U.S.C. §§ 1396 et seq., to provide assistance for part or all of the cost of medical care rendered on behalf of indigent persons.
- (b) "Medicare" means the program of health insurance for aged persons and persons with disabilities established pursuant to Title XVIII of the Social Security Act, 42 U.S.C. §§ 1395 et seq.
- (c) "Provider of health care" means a physician or physician assistant licensed pursuant to chapter 630, 630A or 633 of NRS, perfusionist, dentist, licensed nurse, *midwife*, *apprentice midwife*, dispensing optician, optometrist, practitioner of respiratory care, registered physical therapist, podiatric physician, licensed psychologist, licensed audiologist, licensed speech-language pathologist, licensed hearing aid specialist, licensed marriage and family therapist, licensed clinical professional counselor, chiropractor, licensed dietitian or doctor of Oriental medicine in any form.
  - **Sec. 52.** NRS 374.731 is hereby amended to read as follows:
- 374.731 1. In administering the provisions of NRS 374.330, the Department shall apply the exemption to the sale of a medical device to a governmental entity that is exempt pursuant to that section without regard to whether the person using the medical device or the governmental entity that purchased the device is deemed to be the holder of title to the device if:
- (a) The medical device was ordered or prescribed by a provider of health care, within his or her scope of practice, for use by the person to whom it is provided;
  - (b) The medical device is covered by Medicaid or Medicare; and
- (c) The purchase of the medical device is made pursuant to a contract between the governmental entity that purchases the medical device and the person who sells the medical device to the governmental entity.
  - 2. As used in this section:
- (a) "Medicaid" means the program established pursuant to Title XIX of the Social Security Act, 42 U.S.C. §§ 1396 et seq., to provide assistance for part or all of the cost of medical care rendered on behalf of indigent persons.
- (b) "Medicare" means the program of health insurance for aged persons and persons with disabilities established pursuant to Title XVIII of the Social Security Act, 42 U.S.C. §§ 1395 et seq.





- (c) "Provider of health care" means a physician or physician assistant licensed pursuant to chapter 630, 630A or 633 of NRS, perfusionist, dentist, licensed nurse, *midwife*, *apprentice midwife*, dispensing optician, optometrist, practitioner of respiratory care, physician, licensed registered physical therapist, podiatric psychologist, licensed audiologist, licensed speech-language pathologist, licensed hearing aid specialist, licensed marriage and therapist, licensed clinical professional chiropractor, licensed dietitian or doctor of Oriental medicine in any form.
- **Sec. 53.** NRS 432B.220 is hereby amended to read as follows: 432B.220 1. Any person who is described in subsection 4 and who, in his or her professional or occupational capacity, knows or has reasonable cause to believe that a child has been abused or neglected shall:
- (a) Except as otherwise provided in subsection 2, report the abuse or neglect of the child to an agency which provides child welfare services or to a law enforcement agency; and
- (b) Make such a report as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the child has been abused or neglected.
- 2. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that the abuse or neglect of the child involves an act or omission of:
- (a) A person directly responsible or serving as a volunteer for or an employee of a public or private home, institution or facility where the child is receiving child care outside of the home for a portion of the day, the person shall make the report to a law enforcement agency.
- (b) An agency which provides child welfare services or a law enforcement agency, the person shall make the report to an agency other than the one alleged to have committed the act or omission, and the investigation of the abuse or neglect of the child must be made by an agency other than the one alleged to have committed the act or omission.
- 3. Any person who is described in paragraph (a) of subsection 4 who delivers or provides medical services to a newborn infant and who, in his or her professional or occupational capacity, knows or has reasonable cause to believe that the newborn infant has been affected by a fetal alcohol spectrum disorder or prenatal substance use disorder or has withdrawal symptoms resulting from prenatal substance exposure shall, as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the newborn infant is so affected or has such symptoms, notify an agency which provides child welfare services of the





condition of the infant and refer each person who is responsible for the welfare of the infant to an agency which provides child welfare services for appropriate counseling, training or other services. A notification and referral to an agency which provides child welfare services pursuant to this subsection shall not be construed to require prosecution for any illegal action.

- 4. A report must be made pursuant to subsection 1 by the following persons:
- (a) A person providing services licensed or certified in this State pursuant to, without limitation, chapter 450B, 630, 630A, 631, 632, 633, 634, 634A, 635, 636, 637, 637B, 639, 640, 640A, 640B, 640C, 640D, 640E, 641, 641A, 641B, 641C or 653 of NRS [...] or sections 2 to 26, inclusive, of this act.
- (b) Any personnel of a medical facility licensed pursuant to chapter 449 of NRS who are engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of such a medical facility upon notification of suspected abuse or neglect of a child by a member of the staff of the medical facility.
  - (c) A coroner.

- (d) A member of the clergy, practitioner of Christian Science or religious healer, unless the person has acquired the knowledge of the abuse or neglect from the offender during a confession.
- (e) A person employed by a public school or private school and any person who serves as a volunteer at such a school.
- (f) Any person who maintains or is employed by a facility or establishment that provides care for children, children's camp or other public or private facility, institution or agency furnishing care to a child.
- (g) Any person licensed pursuant to chapter 424 of NRS to conduct a foster home.
- (h) Any officer or employee of a law enforcement agency or an adult or juvenile probation officer.
  - (i) Except as otherwise provided in NRS 432B.225, an attorney.
- (j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding abuse or neglect of a child and refers them to persons and agencies where their requests and needs can be met.
- (k) Any person who is employed by or serves as a volunteer for a youth shelter. As used in this paragraph, "youth shelter" has the meaning ascribed to it in NRS 244.427.
- (1) Any adult person who is employed by an entity that provides organized activities for children, including, without limitation, a person who is employed by a school district or public school.
  - 5. A report may be made by any other person.





- If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that a child has died as a result of abuse or neglect, the person shall, as soon as reasonably practicable, report this belief to an agency which provides child welfare services or a law enforcement agency. If such a report is made to a law enforcement agency, the law enforcement agency shall notify an agency which provides child welfare services and the appropriate medical examiner or coroner of the report. If such a report is made to an agency which provides child welfare services, the agency which provides child welfare services shall notify the appropriate medical examiner or coroner of the report. The medical examiner or coroner who is notified of a report pursuant to this subsection shall investigate the report and submit his or her written findings to the appropriate agency which provides child welfare services, the appropriate district attorney and a law enforcement agency. The written findings must include, if obtainable, the information required pursuant to the provisions of subsection 2 of NRS 432B.230.
- 7. The agency, board, bureau, commission, department, division or political subdivision of the State responsible for the licensure, certification or endorsement of a person who is described in subsection 4 and who is required in his or her professional or occupational capacity to be licensed, certified or endorsed in this State shall, at the time of initial licensure, certification or endorsement:
- (a) Inform the person, in writing or by electronic communication, of his or her duty as a mandatory reporter pursuant to this section:
- (b) Obtain a written acknowledgment or electronic record from the person that he or she has been informed of his or her duty pursuant to this section; and
- (c) Maintain a copy of the written acknowledgment or electronic record for as long as the person is licensed, certified or endorsed in this State.
- 8. The employer of a person who is described in subsection 4 and who is not required in his or her professional or occupational capacity to be licensed, certified or endorsed in this State must, upon initial employment of the person:
- (a) Inform the person, in writing or by electronic communication, of his or her duty as a mandatory reporter pursuant to this section;
- (b) Obtain a written acknowledgment or electronic record from the person that he or she has been informed of his or her duty pursuant to this section; and



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- (c) Maintain a copy of the written acknowledgment or electronic record for as long as the person is employed by the employer.
- 9. Before a person may serve as a volunteer at a public school or private school, the school must:
- (a) Inform the person, in writing or by electronic communication, of his or her duty as a mandatory reporter pursuant to this section and NRS 392.303;
- (b) Obtain a written acknowledgment or electronic record from the person that he or she has been informed of his or her duty pursuant to this section and NRS 392.303; and
- (c) Maintain a copy of the written acknowledgment or electronic record for as long as the person serves as a volunteer at the school.
  - 10. As used in this section:

- (a) "Private school" has the meaning ascribed to it in NRS 394.103.
- (b) "Public school" has the meaning ascribed to it in NRS 385.007.
- **Sec. 54.** NRS 439A.0195 is hereby amended to read as follows:
- 439A.0195 "Practitioner" means a physician licensed under chapter 630, 630A or 633 of NRS, dentist, licensed nurse, *midwife*, dispensing optician, optometrist, registered physical therapist, podiatric physician, licensed psychologist, chiropractor, doctor of Oriental medicine in any form, medical laboratory director or technician, pharmacist or other person whose principal occupation is the provision of services for health.
- **Sec. 55.** 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 435.3305 to 435.339, inclusive, chapter 449, 625A, 630, 630A, 631, 632, 633, 634, 634A, 635, 636, 637, 637B, 639, 640A, 640D, 641, 641A, 641B, 641C, 652, 653 or 654 of NRS and sections 2 to 26, inclusive, of this act.
- 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 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 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 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. 56.** NRS 440.280 is hereby amended to read as follows:

- 440.280 1. If a birth occurs in a hospital or the mother and child are immediately transported to a hospital, the person in charge of the hospital or his or her designated representative shall obtain the necessary information, prepare a birth certificate, secure the signatures required by the certificate and file it within 10 days with the health officer of the registration district where the birth occurred. The physician in attendance shall provide the medical information required by the certificate and certify to the fact of birth within 72 hours after the birth. If the physician does not certify to the fact of birth within the required 72 hours, the person in charge of the hospital or the designated representative shall complete and sign the certification.
- 2. If a birth occurs outside a hospital and the mother and child are not immediately transported to a hospital, the birth certificate must be prepared and filed by one of the following persons in the following order of priority:
- (a) The physician *or advanced practice registered nurse* in attendance at or immediately after the birth.
- (b) The midwife in attendance at or immediately after the birth.
- (c) Any other person in attendance at or immediately after the birth.
- **[(c)]** (d) The father, mother or, if the father is absent and the mother is incapacitated, the person in charge of the premises where the birth occurred.
- 3. If a birth occurs in a moving conveyance, the place of birth is the place where the child is removed from the conveyance.
- 4. In cities, the certificate of birth must be filed sooner than 10 days after the birth if so required by municipal ordinance or regulation.
  - 5. If the mother was:
- (a) Married at the time of birth, the name of her spouse must be entered on the certificate as the other parent of the child unless:





- (1) A court has issued an order establishing that a person other than the mother's spouse is the other parent of the child; or
- (2) The mother and a person other than the mother's spouse have signed a declaration for the voluntary acknowledgment of paternity developed by the Board pursuant to NRS 440.283 or a declaration for the voluntary acknowledgment of parentage developed by the Board pursuant to NRS 440.285.
- (b) Widowed at the time of birth but married at the time of conception, the name of her spouse at the time of conception must be entered on the certificate as the other parent of the child unless:
- (1) A court has issued an order establishing that a person other than the mother's spouse at the time of conception is the other parent of the child; or
- (2) The mother and a person other than the mother's spouse at the time of conception have signed a declaration for the voluntary acknowledgment of paternity developed by the Board pursuant to NRS 440.283 or a declaration for the voluntary acknowledgment of parentage developed by the Board pursuant to NRS 440.285.
- 6. If the mother was unmarried at the time of birth, the name of the other parent may be entered on the original certificate of birth only if:
- (a) The provisions of paragraph (b) of subsection 5 are applicable;
- (b) A court has issued an order establishing that the person is the other parent of the child; or
- (c) The parents of the child have signed a declaration for the voluntary acknowledgment of paternity developed by the Board pursuant to NRS 440.283 or a declaration for the voluntary acknowledgment of parentage developed by the Board pursuant to NRS 440.285. If both parents execute a declaration consenting to the use of the surname of one parent as the surname of the child, the name of that parent must be entered on the original certificate of birth and the surname of that parent must be entered thereon as the surname of the child.
- 7. An order entered or a declaration executed pursuant to subsection 6 must be submitted to the local health officer, the local health officer's authorized representative, or the attending physician or midwife before a proper certificate of birth is forwarded to the State Registrar. The order or declaration must then be delivered to the State Registrar for filing. The State Registrar's file of orders and declarations must be sealed and the contents of the file may be examined only upon order of a court of competent jurisdiction or at the request of either parent or the Division of Welfare and Supportive Services of the Department of Health and Human Services as necessary to carry out the provisions of 42 U.S.C. §





654a. The local health officer shall complete the original certificate of birth in accordance with subsection 6 and other provisions of this chapter.

As used in this section, "court" has the meaning ascribed to 8. it in NRS 125B.004.

Sec. 57. NRS 440.770 is hereby amended to read as follows:

440.770 Any person who furnishes false information to a physician, advanced practice registered nurse, *midwife*, funeral director, midwife or informant for the purpose of making incorrect certification of births or deaths shall be punished by a fine of not more than \$250.

Sec. 58. NRS 441A.110 is hereby amended to read as follows: 441A.110 "Provider of health care" means a physician, nurse, *midwife*, *apprentice midwife* or veterinarian licensed in accordance with state law or a physician assistant licensed pursuant to chapter 630 or 633 of NRS.

Sec. 59. NRS 442.003 is hereby amended to read as follows: 442.003 As used in this chapter, unless the context requires otherwise:

- 1. "Advisory Board" means the Advisory Board on Maternal and Child Health.
- "Department" means the Department of Health and Human Services.
  - 3. "Director" means the Director of the Department.
- "Division" means the Division of Public and Behavioral Health of the Department.
  - "Fetal alcohol syndrome" includes fetal alcohol effects.
- 6. "Laboratory" has the meaning ascribed to it in NRS 652.040.
- "Obstetric center" has the meaning ascribed to it in NRS 449.0155.
  - "Provider of health care or other services" means:
- (a) A clinical alcohol and drug counselor who is licensed, or an alcohol and drug counselor who is licensed or certified, pursuant to chapter 641C of NRS;
- (b) A physician or a physician assistant who is licensed pursuant to chapter 630 or 633 of NRS and who practices in the area of obstetrics and gynecology, family practice, internal medicine, pediatrics or psychiatry;
  - (c) A licensed nurse;
  - (d) A licensed psychologist;
  - (e) A licensed marriage and family therapist;
- (f) A licensed clinical professional counselor; 43 44
  - (g) A licensed social worker;
    - (h) A licensed dietitian; [or]



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(i) A licensed midwife; or

(j) The holder of a certificate of registration as a pharmacist.

**Sec. 60.** NRS 442.119 is hereby amended to read as follows:

- 442.119 As used in NRS 442.119 to 442.1198, inclusive, unless the context otherwise requires:
- 1. "Health officer" includes a local health officer, a city health officer, a county health officer and a district health officer.
- 2. "Medicaid" has the meaning ascribed to it in NRS 439B.120.
- 3. "Medicare" has the meaning ascribed to it in NRS 439B.130.
  - 4. "Provider of prenatal care" means:
- (a) A physician who is licensed in this State and certified in obstetrics and gynecology, family practice, general practice or general surgery.
- (b) A certified nurse midwife who is licensed by the State Board of Nursing.
- (c) An advanced practice registered nurse who is licensed by the State Board of Nursing pursuant to NRS 632.237 and who has specialized skills and training in obstetrics or family nursing.
- (d) A physician assistant licensed pursuant to chapter 630 or 633 of NRS who has specialized skills and training in obstetrics or family practice.
  - (e) A midwife licensed pursuant to sections 2 to 26, inclusive, of this act.
    - **Sec. 61.** NRS 442.610 is hereby amended to read as follows:

442.610 "Provider of health care" means:

- 1. A provider of health care as defined in NRS 629.031;
- [2. A midwife;] and
- [3.] 2. An obstetric center licensed pursuant to chapter 449 of NRS.
  - **Sec. 62.** 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, 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.

- (l) A midwife or apprentice midwife, under the conditions prescribed in section 16 of this act.
- 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. 63.** 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 holder of a license to engage in radiation therapy and radiologic imaging issued pursuant to chapter 653 of NRS, at the direction of a physician and in accordance with any conditions established by regulation of the Board.
- (n) A chiropractic physician, but only if the drug or medicine is a topical drug used for cooling and stretching external tissue during therapeutic treatments.
- (o) 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.
- (p) In accordance with applicable regulations of the State Board of Health, an employee of a residential facility for groups, as defined in NRS 449.017, pursuant to a written agreement entered into by the ultimate user.
- (q) A veterinary technician or a veterinary assistant at the direction of his or her supervising veterinarian.
- (r) 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.
- (s) A registered pharmacist pursuant to written guidelines and protocols developed and approved pursuant to NRS 639.2629 or a collaborative practice agreement, as defined in NRS 639.0052.
- (t) 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, physical therapist or veterinary technician or to obtain a license to engage in radiation therapy and radiologic imaging pursuant to chapter 653 of NRS 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, physical therapist, veterinary technician or person licensed to engage in radiation therapy and radiologic imaging 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.
- (u) 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.
- (v) A midwife or apprentice midwife who is administering the medicine or drug under the conditions prescribed by section 16 of this act.
- 2. As used in this section, "accredited college of medicine" has the meaning ascribed to it in NRS 453.375.
  - **Sec. 64.** NRS 454.361 is hereby amended to read as follows:
- 454.361 A conviction of the violation of any of the provisions of NRS 454.181 to 454.371, inclusive, constitutes grounds for the suspension or revocation of any license issued to such person pursuant to the provisions of chapters 630, 631, 633, 635, 636, 638, 639 or 653 of NRS or sections 2 to 26, inclusive, of this act.
  - **Sec. 65.** NRS 608.0116 is hereby amended to read as follows: 608.0116 "Professional" means pertaining to:
- 1. An employee who is licensed or certified by the State of Nevada for and engaged in the practice of law or any of the professions regulated by chapters 623 to 645, inclusive, 645G and 656A of NRS ... or sections 2 to 26, inclusive, of this act.
- 2. A creative professional as described in 29 C.F.R. § 541.302 who is not an employee of a contractor as that term is defined in NRS 624.020.
- **Sec. 66.** NRS 679B.440 is hereby amended to read as follows: 679B.440 1. The Commissioner may require that reports submitted pursuant to NRS 679B.430 include, without limitation, information regarding:
  - (a) Liability insurance provided to:
- (1) Governmental agencies and political subdivisions of this State, reported separately for:
  - (I) Cities and towns;
  - (II) School districts; and
  - (III) Other political subdivisions;
  - (2) Public officers;
  - (3) Establishments where alcoholic beverages are sold;
  - (4) Facilities for the care of children;
  - (5) Labor, fraternal or religious organizations; and
- (6) Officers or directors of organizations formed pursuant to title 7 of NRS, reported separately for nonprofit entities and entities organized for profit;
  - (b) Liability insurance for:
    - (1) Defective products;





- (2) Medical or dental malpractice of:

  (I) A practitioner licensed pursuant to chapter 630, 630A, 631, 632, 633, 634, 634A, 635, 636, 637, 637B, 639 or 640 of NRS or sections 2 to 26, inclusive, of this act or who holds a license or limited license issued pursuant to chapter 653 of NRS;
  - (II) A hospital or other health care facility; or
  - (III) Any related corporate entity;
  - (3) Malpractice of attorneys;
  - (4) Malpractice of architects and engineers; and
- (5) Errors and omissions by other professionally qualified persons;
  - (c) Vehicle insurance, reported separately for:
    - (1) Private vehicles;

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- (2) Commercial vehicles;
- (3) Liability insurance; and
- (4) Insurance for property damage; and
- (d) Workers' compensation insurance.
- 2. The Commissioner may require that the report include, without limitation, information specifically pertaining to this State or to an insurer in its entirety, in the aggregate or by type of insurance, and for a previous or current year, regarding:
  - (a) Premiums directly written;
  - (b) Premiums directly earned;
  - (c) Number of policies issued;
- (d) Net investment income, using appropriate estimates when necessary;
  - (e) Losses paid;
  - (f) Losses incurred;
  - (g) Loss reserves, including:
    - (1) Losses unpaid on reported claims; and
    - (2) Losses unpaid on incurred but not reported claims;
  - (h) Number of claims, including:
    - (1) Claims paid; and
    - (2) Claims that have arisen but are unpaid;
- (i) Expenses for adjustment of losses, including allocated and unallocated losses;
  - (j) Net underwriting gain or loss;
- (k) Net operation gain or loss, including net investment income; and
  - (l) Any other information requested by the Commissioner.
- 3. The Commissioner may also obtain, based upon an insurer in its entirety, information regarding:
  - (a) Recoverable federal income tax;
  - (b) Net unrealized capital gain or loss; and
  - (c) All other expenses not included in subsection 2.





**Sec. 67.** NRS 686A.2825 is hereby amended to read as follows:

686A.2825 "Practitioner" means:

- 1. A physician, dentist, nurse, *midwife*, dispensing optician, optometrist, physical therapist, podiatric physician, psychologist, chiropractor, doctor of Oriental medicine in any form, director or technician of a medical laboratory, pharmacist, person who holds a license to engage in radiation therapy and radiologic imaging or a limited license to engage in radiologic imaging pursuant to chapter 653 of NRS or other provider of health services who is authorized to engage in his or her occupation by the laws of this state or another state; and
- 2. An attorney admitted to practice law in this state or any other state.

**Sec. 68.** NRS 686B.030 is hereby amended to read as follows: 686B.030 1. Except as otherwise provided in subsection 2 and NRS 686B.125, the provisions of NRS 686B.010 to 686B.1799, inclusive, apply to all kinds and lines of direct insurance written on risks or operations in this State by any insurer authorized to do business in this State, except:

- (a) Ocean marine insurance:
- (b) Contracts issued by fraternal benefit societies:
- (c) Life insurance and credit life insurance;
- (d) Variable and fixed annuities:
- (e) Credit accident and health insurance;
- (f) Property insurance for business and commercial risks;
- (g) Casualty insurance for business and commercial risks other than insurance covering the liability of a practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS *and sections 2 to* **26**, *inclusive*, *of this act* or who holds a license or limited license issued pursuant to chapter 653 of NRS;
  - (h) Surety insurance;
- (i) Health insurance offered through a group health plan maintained by a large employer; and
  - (j) Credit involuntary unemployment insurance.
- 2. The exclusions set forth in paragraphs (f) and (g) of subsection 1 extend only to issues related to the determination or approval of premium rates.

**Sec. 69.** NRS 686B.040 is hereby amended to read as follows:

686B.040 1. Except as otherwise provided in subsection 2, the Commissioner may by rule exempt any person or class of persons or any market segment from any or all of the provisions of NRS 686B.010 to 686B.1799, inclusive, if and to the extent that the Commissioner finds their application unnecessary to achieve the purposes of those sections.





- 2. The Commissioner may not, by rule or otherwise, exempt an insurer from the provisions of NRS 686B.010 to 686B.1799, inclusive, with regard to insurance covering the liability of a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 26, inclusive, of this act* for a breach of the practitioner's professional duty toward a patient.
  - **Sec. 70.** NRS 686B.115 is hereby amended to read as follows:
- 686B.115 1. Any hearing held by the Commissioner to determine whether rates comply with the provisions of NRS 686B.010 to 686B.1799, inclusive, must be open to members of the public.
- 2. All costs for transcripts prepared pursuant to such a hearing must be paid by the insurer requesting the hearing.
- 3. At any hearing which is held by the Commissioner to determine whether rates comply with the provisions of NRS 686B.010 to 686B.1799, inclusive, and which involves rates for insurance covering the liability of a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS or sections 2 to 26, inclusive, of this act for a breach of the practitioner's professional duty toward a patient, if a person is not otherwise authorized pursuant to this title to become a party to the hearing by intervention, the person is entitled to provide testimony at the hearing if, not later than 2 days before the date set for the hearing, the person files with the Commissioner a written statement which states:
  - (a) The name and title of the person;
  - (b) The interest of the person in the hearing; and
- (c) A brief summary describing the purpose of the testimony the person will offer at the hearing.
- 4. If a person provides testimony at a hearing in accordance with subsection 3:
- (a) The Commissioner may, if the Commissioner finds it necessary to preserve order, prevent inordinate delay or protect the rights of the parties at the hearing, place reasonable limitations on the duration of the testimony and prohibit the person from providing testimony that is not relevant to the issues raised at the hearing.
- (b) The Commissioner shall consider all relevant testimony provided by the person at the hearing in determining whether the rates comply with the provisions of NRS 686B.010 to 686B.1799, inclusive.
- **Sec. 71.** NRS 689A.035 is hereby amended to read as follows: 689A.035 1. An insurer shall not charge a provider of health care a fee to include the name of the provider on a list of providers of health care given by the insurer to its insureds.
- 2. An insurer shall not contract with a provider of health care to provide health care to an insured unless the insurer uses the form





prescribed by the Commissioner pursuant to NRS 629.095 to obtain any information related to the credentials of the provider of health care.

- 3. A contract between an insurer and a provider of health care may be modified:
- (a) At any time pursuant to a written agreement executed by both parties.
- (b) Except as otherwise provided in this paragraph, by the insurer upon giving to the provider 45 days' written notice of the modification of the insurer's schedule of payments, including any changes to the fee schedule applicable to the provider's practice. If the provider fails to object in writing to the modification within the 45-day period, the modification becomes effective at the end of that period. If the provider objects in writing to the modification within the 45-day period, the modification must not become effective unless agreed to by both parties as described in paragraph (a).
- 4. If an insurer contracts with a provider of health care to provide health care to an insured, the insurer shall:
- (a) If requested by the provider of health care at the time the contract is made, submit to the provider of health care the schedule of payments applicable to the provider of health care; or
- (b) If requested by the provider of health care at any other time, submit to the provider of health care the schedule of payments, including any changes to the fee schedule applicable to the provider's practice, specified in paragraph (a) within 7 days after receiving the request.
- 5. As used in this section, "provider of health care" means a provider of health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS ... or sections 2 to 26, inclusive, of this act.
- **Sec. 72.** NRS 689B.015 is hereby amended to read as follows: 689B.015 1. An insurer that issues a policy of group health insurance shall not charge a provider of health care a fee to include the name of the provider on a list of providers of health care given by the insurer to its insureds.
- 2. An insurer specified in subsection 1 shall not contract with a provider of health care to provide health care to an insured unless the insurer uses the form prescribed by the Commissioner pursuant to NRS 629.095 to obtain any information related to the credentials of the provider of health care.
- 3. A contract between an insurer specified in subsection 1 and a provider of health care may be modified:
- (a) At any time pursuant to a written agreement executed by both parties.
- (b) Except as otherwise provided in this paragraph, by the insurer upon giving to the provider 45 days' written notice of the





modification of the insurer's schedule of payments, including any changes to the fee schedule applicable to the provider's practice. If the provider fails to object in writing to the modification within the 45-day period, the modification becomes effective at the end of that period. If the provider objects in writing to the modification within the 45-day period, the modification must not become effective unless agreed to by both parties as described in paragraph (a).

4. If an insurer specified in subsection 1 contracts with a provider of health care to provide health care to an insured, the

insurer shall:

(a) If requested by the provider of health care at the time the contract is made, submit to the provider of health care the schedule of payments applicable to the provider of health care; or

(b) If requested by the provider of health care at any other time, submit to the provider of health care the schedule of payments, including any changes to the fee schedule applicable to the provider's practice, specified in paragraph (a) within 7 days after receiving the request.

5. As used in this section, "provider of health care" means a provider of health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS : or sections 2 to 26, inclusive, of this act.

**Sec. 73.** NRS 689C.435 is hereby amended to read as follows: 689C.435

1. A carrier serving small employers and a carrier that offers a contract to a voluntary purchasing group shall not

charge a provider of health care a fee to include the name of the provider on a list of providers of health care given by the carrier to

its insureds.

- 2. A carrier specified in subsection 1 shall not contract with a provider of health care to provide health care to an insured unless the carrier uses the form prescribed by the Commissioner pursuant to NRS 629.095 to obtain any information related to the credentials of the provider of health care.
- 3. A contract between a carrier specified in subsection 1 and a provider of health care may be modified:
- (a) At any time pursuant to a written agreement executed by both parties.
- (b) Except as otherwise provided in this paragraph, by the carrier upon giving to the provider 45 days' written notice of the modification of the carrier's schedule of payments, including any changes to the fee schedule applicable to the provider's practice. If the provider fails to object in writing to the modification within the 45 day period, the modification becomes effective at the end of that period. If the provider objects in writing to the modification within the 45 day period, the modification must not become effective unless agreed to by both parties as described in paragraph (a).





- 4. If a carrier specified in subsection 1 contracts with a provider of health care to provide health care to an insured, the carrier shall:
- (a) If requested by the provider of health care at the time the contract is made, submit to the provider of health care the schedule of payments applicable to the provider of health care; or
- (b) If requested by the provider of health care at any other time, submit to the provider of health care the schedule of payments, including any changes to the fee schedule applicable to the provider's practice, specified in paragraph (a) within 7 days after receiving the request.
- 5. As used in this section, "provider of health care" means a provider of health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS [-] or sections 2 to 26, inclusive, of this act.
- **Sec. 74.** NRS 690B.250 is hereby amended to read as follows: 690B.250 Except as more is required in NRS 630.3067 and 633.526:
- 1. Each insurer which issues a policy of insurance covering the liability of a practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS or sections 2 to 26, inclusive, of this act or who holds a license or limited license issued pursuant to chapter 653 of NRS for a breach of his or her professional duty toward a patient shall report to the board which licensed the practitioner within 45 days each settlement or award made or judgment rendered by reason of a claim, if the settlement, award or judgment is for more than \$5,000, giving the name of the claimant and the practitioner and the circumstances of the case.
- 2. A practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS or sections 2 to 26, inclusive, of this act or who holds a license or limited license issued pursuant to chapter 653 of NRS who does not have insurance covering liability for a breach of his or her professional duty toward a patient shall report to the board which issued the practitioner's license within 45 days of each settlement or award made or judgment rendered by reason of a claim, if the settlement, award or judgment is for more than \$5,000, giving the practitioner's name, the name of the claimant and the circumstances of the case.
- 3. These reports are public records and must be made available for public inspection within a reasonable time after they are received by the licensing board.
  - **Sec. 75.** NRS 690B.270 is hereby amended to read as follows:
- 690B.270 If an insurer declines to issue to a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 26, inclusive, of this act* a policy of professional liability insurance, the insurer shall, upon the request of the





practitioner, disclose to the practitioner the reasons the insurer declined to issue the policy.

**Sec. 76.** NRS 690B.280 is hereby amended to read as follows: 690B.280 If an insurer, for a policy of professional liability insurance for a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS, *or sections 2 to 26, inclusive, of this act*, sets the premium for the policy for the practitioner at a rate that is higher than the standard rate of the insurer for the applicable type of policy and specialty of the practitioner, the insurer shall, upon the request of the practitioner, disclose the reasons the insurer set the premium for the policy at the higher rate.

Sec. 77. NRS 690B.290 is hereby amended to read as follows: 690B.290 If an insurer offers to issue a claims-made policy to a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS, or sections 2 to 26, inclusive, of this act, the insurer shall:

- 1. Offer to issue an extended reporting endorsement to the practitioner; and
- 2. Disclose to the practitioner the cost formula that the insurer uses to determine the premium for the extended reporting endorsement. The cost formula must be based on:
- (a) An amount that is not more than twice the amount of the premium for the claims-made policy at the time of the termination of that policy; and
- (b) The rates filed by the insurer and approved by the Commissioner.

NRS 690B.300 is hereby amended to read as follows:

690B.300 1. Except as otherwise provided in this section, if an insurer issues a policy of professional liability insurance to a practitioner licensed pursuant to chapter 630, 632 or 633 of NRS *or sections 2 to 26, inclusive, of this act* who delivers one or more babies per year, the insurer shall not set the premium for the policy at a rate that is different from the rate set for such a policy issued by the insurer to any other practitioner licensed pursuant to chapter 630, 632 or 633 of NRS *or sections 2 to 26, inclusive, of this act* who delivers one or more babies per year if the difference in rates is based in whole or in part upon the number of babies delivered per

2. If an insurer issues a policy of professional liability insurance to a practitioner licensed pursuant to chapter 630, 632 or 633 of NRS *or sections 2 to 26, inclusive, of this act* who delivers one or more babies per year, the insurer may set the premium for the policy at a rate that is different, based in whole or in part upon the number of babies delivered per year by the practitioner, from the rate set for such a policy issued by the insurer to any other practitioner licensed pursuant to chapter 630, 632 or 633 of NRS *or* 



 Sec. 78.

year by the practitioner.



sections 2 to 26, inclusive, of this act who delivers one or more babies per year if the insurer:

- (a) Bases the difference upon actuarial and loss experience data available to the insurer; and
- (b) Obtains the approval of the Commissioner for the difference in rates.
- 3. The provisions of this section do not prohibit an insurer from setting the premium for a policy of professional liability insurance issued to a practitioner licensed pursuant to chapter 630, 632 or 633 of NRS or sections 2 to 26, inclusive, of this act who delivers one or more babies per year at a rate that is different from the rate set for such a policy issued by the insurer to any other practitioner licensed pursuant to chapter 630, 632 or 633 of NRS or sections 2 to 26, inclusive, of this act who delivers one or more babies per year if the difference in rates is based solely upon factors other than the number of babies delivered per year by the practitioner.
- **Sec. 79.** NRS 690B.310 is hereby amended to read as follows: 690B.310 1. If an agreement settles a claim or action against a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 26, inclusive, of this act* for a breach of his or her professional duty toward a patient, the following terms of the agreement must not be made confidential:
  - (a) The names of the parties;
- (b) The date of the incidents or events giving rise to the claim or action;
- (c) The nature of the claim or action as set forth in the complaint and the answer that is filed with the district court; and
  - (d) The effective date of the agreement.
- 2. Any provision of an agreement to settle a claim or action that conflicts with this section is void.

**Sec. 80.** NRS 690B.320 is hereby amended to read as follows: 690B.320 1. If an insurer offers to issue a claims-made policy to a practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS *or sections 2 to 26, inclusive, of this act* or who holds a license or limited license issued pursuant to chapter 653 of NRS, the insurer shall:

- (a) Offer to issue to the practitioner an extended reporting endorsement without a time limitation for reporting a claim.
- (b) Disclose to the practitioner the premium for the extended reporting endorsement and the cost formula that the insurer uses to determine the premium for the extended reporting endorsement.
- (c) Disclose to the practitioner the portion of the premium attributable to funding the extended reporting endorsement offered at no additional cost to the practitioner in the event of the





practitioner's death, disability or retirement, if such a benefit is offered.

- (d) Disclose to the practitioner the vesting requirements for the extended reporting endorsement offered at no additional cost to the practitioner in the event of the practitioner's death or retirement, if such a benefit is offered. If such a benefit is not offered, the absence of such a benefit must be disclosed.
- (e) Include, as part of the insurance contract, language which must be approved by the Commissioner and which must be substantially similar to the following:

If we adopt any revision that would broaden the coverage under this policy without any additional premium either within the policy period or within 60 days before the policy period, the broadened coverage will immediately apply to this policy.

1 2

- 2. The disclosures required by subsection 1 must be made as part of the offer and acceptance at the inception of the policy and again at each renewal in the form of an endorsement attached to the insurance contract and approved by the Commissioner.
- 3. The requirements set forth in this section are in addition to the requirements set forth in NRS 690B.290.

**Sec. 81.** NRS 690B.360 is hereby amended to read as follows: 690B.360 1. The Commissioner may collect all information which is pertinent to monitoring whether an insurer that issues professional liability insurance for a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 26, inclusive, of this act* is complying with the applicable standards for rates established in NRS 686B.010 to 686B.1799, inclusive. Such information may include, without limitation:

- (a) The amount of gross premiums collected with regard to each medical specialty;
  - (b) Information relating to loss ratios; and
- (c) Information reported pursuant to NRS 679B.430 and 679B.440.
- 2. In addition to the information collected pursuant to subsection 1, the Commissioner may request any additional information from an insurer:
- (a) Whose rates and credit utilization are materially different from other insurers in the market for professional liability insurance for a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 26, inclusive, of this act* in this State;
- (b) Whose credit utilization shows a substantial change from the previous year; or





- (c) Whose information collected pursuant to subsection 1 indicates a potentially adverse trend.
- 3. If the Commissioner requests additional information from an insurer pursuant to subsection 2, the Commissioner may:
- (a) Determine whether the additional information offers a reasonable explanation for the results described in paragraph (a), (b) or (c) of subsection 2; and
- (b) Take any steps permitted by law that are necessary and appropriate to assure the ongoing stability of the market for professional liability insurance for a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS or sections 2 to 26, inclusive, of this act in this State.
- 4. On an ongoing basis, the Commissioner may analyze and evaluate the information collected pursuant to this section to determine trends in and measure the health of the market for professional liability insurance for a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS or sections 2 to 26, inclusive, of this act in this State.
- 5. If the Commissioner convenes a hearing pursuant to subsection 1 of NRS 690B.350 and determines that the market for professional liability insurance issued to any class, type or specialty of practitioner licensed pursuant to chapter 630, 631 or 633 of NRS or sections 2 to 26, inclusive, of this act is not competitive and that such insurance is unavailable or unaffordable for a substantial number of such practitioners, the Commissioner shall prepare and submit a report of the Commissioner's findings and recommendations to the Director of the Legislative Counsel Bureau for transmittal to members of the Legislature.
- **Sec. 82.** NRS 695A.095 is hereby amended to read as follows: 695A.095 1. A society shall not charge a provider of health care a fee to include the name of the provider on a list of providers of health care given by the society to its insureds.
- 2. A society shall not contract with a provider of health care to provide health care to an insured unless the society uses the form prescribed by the Commissioner pursuant to NRS 629.095 to obtain any information related to the credentials of the provider of health care.
- 3. A contract between a society and a provider of health care may be modified:
- (a) At any time pursuant to a written agreement executed by both parties.
- (b) Except as otherwise provided in this paragraph, by the society upon giving to the provider 45 days' written notice of the modification of the society's schedule of payments, including any changes to the fee schedule applicable to the provider's practice. If





the provider fails to object in writing to the modification within the 45-day period, the modification becomes effective at the end of that period. If the provider objects in writing to the modification within the 45-day period, the modification must not become effective unless agreed to by both parties as described in paragraph (a).

4. If a society contracts with a provider of health care to

provide health care to an insured, the society shall:

(a) If requested by the provider of health care at the time the contract is made, submit to the provider of health care the schedule of payments applicable to the provider of health care; or

(b) If requested by the provider of health care at any other time, submit to the provider of health care the schedule of payments, including any changes to the fee schedule applicable to the provider's practice, specified in paragraph (a) within 7 days after receiving the request.

5. As used in this section, "provider of health care" means a provider of health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS : or sections 2 to 26, inclusive, of this act.

**Sec. 83.** NRS 695B.035 is hereby amended to read as follows: 695B.035 1. A corporation subject to the provisions of this chapter shall not charge a provider of health care a fee to include the name of the provider on a list of providers of health care given by the corporation to its insureds.

- 2. A corporation specified in subsection 1 shall not contract with a provider of health care to provide health care to an insured unless the corporation uses the form prescribed by the Commissioner pursuant to NRS 629.095 to obtain any information related to the credentials of the provider of health care.
- 3. A contract between a corporation specified in subsection 1 and a provider of health care may be modified:
- (a) At any time pursuant to a written agreement executed by both parties.
- (b) Except as otherwise provided in this paragraph, by the corporation upon giving to the provider 45 days' written notice of the modification of the corporation's schedule of payments, including any changes to the fee schedule applicable to the provider's practice. If the provider fails to object in writing to the modification within the 45-day period, the modification becomes effective at the end of that period. If the provider objects in writing to the modification within the 45-day period, the modification must not become effective unless agreed to by both parties as described in paragraph (a).
- 4. If a corporation specified in subsection 1 contracts with a provider of health care to provide health care to an insured, the corporation shall:





- (a) If requested by the provider of health care at the time the contract is made, submit to the provider of health care the schedule of payments applicable to the provider of health care; or
- (b) If requested by the provider of health care at any other time, submit to the provider of health care the schedule of payments, including any changes to the fee schedule applicable to the provider's practice, specified in paragraph (a) within 7 days after receiving the request.
- 5. As used in this section, "provider of health care" means a provider of health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS : or sections 2 to 26, inclusive, of this act.
- **Sec. 84.** NRS 695C.125 is hereby amended to read as follows: 695C.125 1. A health maintenance organization shall not contract with a provider of health care to provide health care to an insured unless the health maintenance organization uses the form prescribed by the Commissioner pursuant to NRS 629.095 to obtain any information related to the credentials of the provider of health care.
- 2. A contract between a health maintenance organization and a provider of health care may be modified:
- (a) At any time pursuant to a written agreement executed by both parties.
- (b) Except as otherwise provided in this paragraph, by the health maintenance organization upon giving to the provider 45 days' written notice of the modification of the health maintenance organization's schedule of payments, including any changes to the fee schedule applicable to the provider's practice. If the provider fails to object in writing to the modification within the 45-day period, the modification becomes effective at the end of that period. If the provider objects in writing to the modification within the 45-day period, the modification must not become effective unless agreed to by both parties as described in paragraph (a).
- 3. If a health maintenance organization contracts with a provider of health care to provide health care to an enrollee, the health maintenance organization shall:
- (a) If requested by the provider of health care at the time the contract is made, submit to the provider of health care the schedule of payments applicable to the provider of health care; or
- (b) If requested by the provider of health care at any other time, submit to the provider of health care the schedule of payments, including any changes to the fee schedule applicable to the provider's practice, specified in paragraph (a) within 7 days after receiving the request.





- 4. As used in this section, "provider of health care" means a provider of health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS [...] or sections 2 to 26, inclusive, of this act.
- **Sec. 85.** NRS 695G.430 is hereby amended to read as follows: 695G.430 1. A managed care organization shall not contract with a provider of health care to provide health care to an insured unless the managed care organization uses the form prescribed by the Commissioner pursuant to NRS 629.095 to obtain any information related to the credentials of the provider of health care.
- 2. A contract between a managed care organization and a provider of health care may be modified:
- (a) At any time pursuant to a written agreement executed by both parties.
- (b) Except as otherwise provided in this paragraph, by the managed care organization upon giving to the provider 45 days' written notice of the modification of the managed care organization's schedule of payments, including any changes to the fee schedule applicable to the provider's practice. If the provider fails to object in writing to the modification within the 45-day period, the modification becomes effective at the end of that period. If the provider objects in writing to the modification within the 45-day period, the modification must not become effective unless agreed to by both parties as described in paragraph (a).
- 3. If a managed care organization contracts with a provider of health care to provide health care services pursuant to chapter 689A, 689B, 689C, 695A, 695B or 695C of NRS, the managed care organization shall:
- (a) If requested by the provider of health care at the time the contract is made, submit to the provider of health care the schedule of payments applicable to the provider of health care; or
- (b) If requested by the provider of health care at any other time, submit to the provider of health care the schedule of payments, including any changes to the fee schedule applicable to the provider's practice, specified in paragraph (a) within 7 days after receiving the request.
- 4. As used in this section, "provider of health care" means a provider of health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS : or sections 2 to 26, inclusive, of this act.
- **Sec. 86.** Section 15 of this act is hereby amended to read as follows:
  - Sec. 15. 1. In addition to any other requirements set forth in this chapter [-
  - (a) An applicant for the issuance of a license as a midwife or a permit as an apprentice midwife in this State shall





include the social security number of the applicant in the application submitted to the Division.

- (b) An], an applicant for the issuance of a license as a midwife or a permit as an apprentice midwife in this State shall submit to the Division of Public and Behavioral Health the statement prescribed by the Division of Welfare and Supportive Services of the Department of Health and Human Services pursuant to NRS 425.520. The statement must be completed and signed by the applicant.
- 2. The Division of Public and Behavioral Health shall include the statement required pursuant to subsection 1 in:
- (a) The application or any other forms that must be submitted for the issuance or renewal of the license or permit; or
  - (b) A separate form prescribed by the Division.
- 3. A license as a midwife or a permit as an apprentice midwife may not be issued or renewed by the Division if the applicant:
- (a) Fails to submit the statement required pursuant to subsection 1; or
- (b) Indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.
- 4. If an applicant indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order, the Division shall advise the applicant to contact the district attorney or other public agency enforcing the order to determine the actions that the applicant may take to satisfy the arrearage.
- **Sec. 87.** 1. As soon as practicable on or after the effective date of this act, the Governor shall appoint:
- (a) Two members to the Board of Certified Professional Midwives pursuant to the provisions of paragraph (a) of subsection 2 of section 9 of this act to an initial term which expires on January 1, 2023;
- (b) Two members to the Board of Certified Professional Midwives pursuant to the provisions of paragraph (a) of subsection 2 of section 9 of this act and to an initial term which expires on January 1, 2024;





- (c) One member to the Board of Certified Professional Midwives pursuant to the provisions of paragraph (b) of subsection 2 of section 9 of this act to an initial term which expires on January 1, 2024;
- (d) One member to the Board of Certified Professional Midwives pursuant to the provisions of paragraph (c) of subsection 2 of section 9 of this act to an initial term which expires on January 1, 2025; and
- (e) One member to the Board of Certified Professional Midwives pursuant to the provisions of paragraph (d) of subsection 2 of section 9 of this act to an initial term which expires on January 1, 2025.
- 2. Notwithstanding the provisions of section 9 of this act, each member who is appointed to the Board of Certified Professional Midwives pursuant to paragraph (a) or (b) of subsection 1 is not required to hold a license as a midwife issued pursuant to section 13 of this act at the time of appointment, but must be eligible for such a license at the time of appointment.
- **Sec. 88.** Notwithstanding any provision of this act to the contrary, any person who is engaging in the practice of midwifery as:
- 1. A midwife on or before January 1, 2022, must meet the requirements for licensure as a midwife and obtain such a license pursuant to section 13 of this act not later than July 1, 2022.
- 2. An apprentice midwife on or before January 1, 2022, must meet the requirements for the issuance of a permit as an apprentice midwife and obtain such a permit pursuant to section 14 of this act not later than July 1, 2022.
- **Sec. 89.** 1. This section becomes effective upon passage and approval.
- 2. Sections 1 to 85, inclusive, 87 and 88 of this act become effective:
- (a) Upon passage and approval for the purpose of appointing the members of the Board of Certified Professional Midwives, adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
  - (b) On January 1, 2022, for all other purposes.
- 3. Section 86 of this act becomes effective on the date on which the provisions of 42 U.S.C. § 666 requiring each state to establish procedures under which the state has authority to withhold or suspend, or to restrict the use of professional, occupational and recreational licenses of persons who:
- (a) Have failed to comply with a subpoena or warrant relating to a proceeding to determine the paternity of a child or to establish or enforce an obligation for the support of a child; or





- (b) Are in arrears in the payment for the support of one or more children,
- → are repealed by the Congress of the United States.

- 4. Sections 15, 21, 27 and 86 of this act expire by limitation 2 years after the date on which the provisions of 42 U.S.C. § 666 requiring each state to establish procedures under which the state has authority to withhold or suspend, or to restrict the use of professional, occupational and recreational licenses of persons who:
- (a) Have failed to comply with a subpoena or warrant relating to a proceeding to determine the paternity of a child or to establish or enforce an obligation for the support of a child; or
- (b) Are in arrears in the payment for the support of one or more children,
- → are repealed by the Congress of the United States.





