

ASSEMBLY BILL NO. 318—ASSEMBLYMEN NGUYEN, GONZÁLEZ;
BROWN-MAY, COHEN, D’SILVA, GALLANT, GORELOW,
HIBBETTS, KOENIG, LA RUE HATCH, MOSCA, NEWBY,
SUMMERS-ARMSTRONG AND TAYLOR

MARCH 16, 2023

JOINT SPONSORS: SENATORS DONATE AND PAZINA

Referred to Committee on Commerce and Labor

SUMMARY—Revises provisions governing certain providers of health care. (BDR 54-761)

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

~

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

AN ACT relating to medicine; revising certain procedures relating to the expiration of a license to practice medicine; requiring a physician assistant, practitioner of respiratory care or perfusionist or the insurer of such a person to report certain information relating to an action or claim of malpractice to the Board of Medical Examiners; providing administrative penalties; requiring the Board to investigate a physician assistant, practitioner of respiratory care or perfusionist in certain circumstances; authorizing the Board to examine such a person under certain circumstances; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

1 Existing law requires the holder of a license to practice medicine to submit a
2 registration fee and certain information to the Board of Medical Examiners on or
3 before June 30, or if June 30 is a Saturday, Sunday or legal holiday, on the next
4 business day after June 30, of each odd-numbered year. Existing law requires the
5 Board to make reasonable attempts to notify a licensee: (1) at least once that the fee
6 for biennial registration and the required information are due; and (2) that his or her
7 license has expired. Existing law requires the Board to send a copy of such notice
8 to the Drug Enforcement Administration of the United States Department of



Justice. (NRS 630.267) **Section 1** of this bill requires the Board to provide notice to the holder of a license to practice medicine at least 60 days before the scheduled expiration of the license: (1) that the fees and required information are due; and (2) of the date on which the license is scheduled to expire. After such a license expires, **section 1** requires the Board to make reasonable attempts to notify the licensee of the expiration. **Section 1** also removes the requirement for the Board to provide a copy of each notice to the Drug Enforcement Administration and instead requires the Board to provide a list of expired licenses to the Drug Enforcement Administration and the State Board of Pharmacy.

Existing law requires a physician and the insurer of a physician to report to the Board any: (1) action for malpractice against the physician; (2) claim for malpractice against the physician that is submitted to arbitration or mediation; or (3) settlement, award, judgment or other disposition of such an action or claim. (NRS 630.3067, 630.3068) Existing law additionally requires a physician to report to the Board any sanctions imposed against the physician that are reportable to the National Practitioner Data Bank. (NRS 630.3068) Existing law authorizes the imposition of an administrative penalty against an insurer or physician that fails to report the required information. (NRS 630.3067, 630.3068) After receiving a report from an insurer or physician indicating that a judgment has been rendered or that such an action or claim has been resolved by settlement, existing law requires the Board to conduct an investigation to determine whether to impose disciplinary action against the physician, unless such an investigation has already commenced or been completed. (NRS 630.3069) Upon receiving such a report or determining that the conduct of a physician has raised a reasonable question as to his or her competence to practice medicine, existing law authorizes the Board to order the physician to undergo certain examinations to determine the fitness of the physician to practice medicine. (NRS 630.318) **Sections 2-5** of this bill make those provisions additionally applicable to physician assistants, practitioners of respiratory care and perfusionists.

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

Section 1. NRS 630.267 is hereby amended to read as follows:

630.267 1. Each holder of a license to practice medicine must, on or before June 30, or if June 30 is a Saturday, Sunday or legal holiday, on the next business day after June 30, of each odd-numbered year:

(a) Submit a list of all actions filed or claims submitted to arbitration or mediation for malpractice or negligence against him or her during the previous 2 years.

(b) Pay to the Secretary-Treasurer of the Board the applicable fee for biennial registration. This fee must be collected for the period for which a physician is licensed.

(c) Submit all information required to complete the biennial registration.

2. When a holder of a license fails to pay the fee for biennial registration and submit all information required to complete the biennial registration after they become due, his or her license to



1 practice medicine in this State expires. The holder may, within 2
2 years after the date the license expires, upon payment of twice the
3 amount of the current fee for biennial registration to the Secretary-
4 Treasurer and submission of all information required to complete
5 the biennial registration and after he or she is found to be in good
6 standing and qualified under the provisions of this chapter, be
7 reinstated to practice.

8 3. ~~[The]~~ *Not later than 60 days before a license is scheduled*
9 *to expire, the* Board shall make such reasonable attempts as are
10 practicable to notify ~~[a]~~ *the* licensee:

11 (a) At least once that the fee for biennial registration and all
12 information required to complete the biennial registration are due;
13 and

14 (b) ~~[That]~~ *The date on which* his or her license ~~[has expired.~~
15 ~~→ A copy of this notice must be sent]~~ *is scheduled to expire.*

16 4. *After a license expires, the Board shall make such*
17 *reasonable attempts as are practicable to notify the holder of the*
18 *license that his or her license has expired.*

19 5. *Not later than September 30 of each odd-numbered year,*
20 *the Board shall provide a list of licenses to practice medicine that*
21 *have expired during that year* to the Drug Enforcement
22 Administration of the United States Department of Justice or its
23 successor agency ~~[]~~ *and the State Board of Pharmacy.*

24 **Sec. 2.** NRS 630.3067 is hereby amended to read as follows:

25 630.3067 1. The insurer of a physician , *physician assistant,*
26 *practitioner of respiratory care or perfusionist* licensed under this
27 chapter shall report to the Board:

28 (a) Any action for malpractice against the physician , *physician*
29 *assistant, practitioner of respiratory care or perfusionist* not later
30 than 45 days after the physician , *physician assistant, practitioner*
31 *of respiratory care or perfusionist* receives service of a summons
32 and complaint for the action;

33 (b) Any claim for malpractice against the physician , *physician*
34 *assistant, practitioner of respiratory care or perfusionist* that is
35 submitted to arbitration or mediation not later than 45 days after the
36 claim is submitted to arbitration or mediation; and

37 (c) Any settlement, award, judgment or other disposition of any
38 action or claim described in paragraph (a) or (b) not later than 45
39 days after the settlement, award, judgment or other disposition.

40 2. The Board shall report any failure to comply with subsection
41 1 by an insurer licensed in this State to the Division of Insurance of
42 the Department of Business and Industry. If, after a hearing, the
43 Division of Insurance determines that any such insurer failed to
44 comply with the requirements of subsection 1, the Division may
45 impose an administrative fine of not more than \$10,000 against the



insurer for each such failure to report. If the administrative fine is not paid when due, the fine must be recovered in a civil action brought by the Attorney General on behalf of the Division.

Sec. 3. NRS 630.3068 is hereby amended to read as follows:

630.3068 1. A physician , *physician assistant, practitioner of respiratory care or perfusionist* shall report to the Board:

(a) Any action for malpractice against the physician , *physician assistant, practitioner of respiratory care or perfusionist* not later than 45 days after the physician , *physician assistant, practitioner of respiratory care or perfusionist* receives service of a summons and complaint for the action;

(b) Any claim for malpractice against the physician , *physician assistant, practitioner of respiratory care or perfusionist* that is submitted to arbitration or mediation not later than 45 days after the claim is submitted to arbitration or mediation;

(c) Any settlement, award, judgment or other disposition of any action or claim described in paragraph (a) or (b) not later than 45 days after the settlement, award, judgment or other disposition ~~is~~ , *including, without limitation, any amount paid to resolve the claim;* and

(d) Any sanctions imposed against the physician , *physician assistant, practitioner of respiratory care or perfusionist* that are reportable to the National Practitioner Data Bank not later than 45 days after the sanctions are imposed.

2. If the Board finds that a physician , *physician assistant, practitioner of respiratory care or perfusionist* has violated any provision of this section, the Board may impose a fine of not more than \$5,000 against the physician , *physician assistant, practitioner of respiratory care or perfusionist* for each violation, in addition to any other fines or penalties permitted by law.

3. All reports made by a physician , *physician assistant, practitioner of respiratory care or perfusionist* pursuant to this section are public records.


Sec. 4. NRS 630.3069 is hereby amended to read as follows:

630.3069 If the Board receives a report pursuant to the provisions of NRS 630.3067, 630.3068 or 690B.250 indicating that a judgment has been rendered or an award has been made against a physician , *physician assistant, practitioner of respiratory care or perfusionist* regarding an action or claim for malpractice or that such an action or claim against the physician , *physician assistant, practitioner of respiratory care or perfusionist* has been resolved by settlement, the Board shall conduct an investigation to determine whether to impose disciplinary action against the physician , *physician assistant, practitioner of respiratory care or perfusionist* regarding the action or claim, unless the Board has already



commenced or completed such an investigation regarding the action or claim before it receives the report.

Sec. 5. NRS 630.318 is hereby amended to read as follows:

630.318 1. If the Board or any investigative committee of the Board has reason to believe that the conduct of any physician , *physician assistant, practitioner of respiratory care or perfusionist* has raised a reasonable question as to his or her competence to practice medicine , *respiratory care or perfusion or practice as a physician assistant, as applicable*, with reasonable skill and safety to patients, or if the Board has received a report pursuant to the provisions of NRS 630.3067, 630.3068 or 690B.250 indicating that a judgment has been rendered or an award has been made against a physician , *physician assistant, practitioner of respiratory care or perfusionist* regarding an action or claim for malpractice or that such an action or claim against the physician , *physician assistant, practitioner of respiratory care or perfusionist* has been resolved by settlement, the Board or committee may order that the physician , *physician assistant, practitioner of respiratory care or perfusionist* undergo a mental or physical examination, an examination testing his or her competence to practice medicine , *respiratory care or perfusion or practice as a physician assistant, as applicable*, or any other examination designated by the Board to assist the Board or committee in determining the fitness of the physician , *physician assistant, practitioner of respiratory care or perfusionist* to practice medicine  , *respiratory care or perfusion or practice as a physician assistant, as applicable*.

2. For the purposes of this section:

(a) Every physician , *physician assistant, practitioner of respiratory care or perfusionist* who applies for a license or who is licensed under this chapter shall be deemed to have given consent to submit to a mental or physical examination or an examination testing his or her competence to practice medicine , *respiratory care or perfusion or practice as a physician assistant, as applicable*, when ordered to do so in writing by the Board or an investigative committee of the Board.

(b) The testimony or reports of a person who conducts an examination of a physician , *physician assistant, practitioner of respiratory care or perfusionist* on behalf of the Board or an investigative committee of the Board pursuant to this section are not privileged communications.

3. Except in extraordinary circumstances, as determined by the Board, the failure of a physician , *physician assistant, practitioner of respiratory care or perfusionist* licensed under this chapter to submit to an examination when directed as provided in this section



1 constitutes an admission of the charges against the physician **H** ,
2 *physician assistant, practitioner of respiratory care or perfusionist.*

3 **Sec. 6.** The provisions of NRS 630.3067, 630.3068, 630.3069
4 and 630.318, as amended by sections 2 to 5, inclusive, of this act,
5 apply to any activity described in those sections which occurs on or
6 after January 1, 2024 or is ongoing on January 1, 2024, regardless of
7 when the relevant conduct of a physician assistant, practitioner of
8 respiratory care or perfusionist occurred.

9 **Sec. 7.** 1. This section becomes effective upon passage and
10 approval.

11 2. Sections 1 to 6, inclusive, of this act become effective:

12 (a) Upon passage and approval for the purpose of adopting any
13 regulations and performing any other preparatory administrative
14 tasks that are necessary to carry out the provisions of this act; and

15 (b) On January 1, 2024, for all other purposes.

