THE ONE HUNDRED AND EIGHTEENTH DAY

CARSON CITY (Saturday), June 3, 2023

Senate called to order at 10:35 a.m.

President Anthony presiding.

Roll called.

All present.

Prayer Senator Carrie Buck.

We come before You, O Lord, and take in this moment of peace. May we carry Your hope, love and joy today in our hearts. Lord, grant us Your wisdom and tenacious courage as we go through this day. When we are tempted to give up, help us to keep going. Grant us a cheerful spirit when things do not go our way. Lord, thank You for this day. I ask that You will guide our paths today and, more specifically, our thoughts, words and actions. Please be with us today and help us navigate whatever comes our way. More importantly, help us to reflect and live out our lives in a way that is honoring You.

AMEN.

Pledge of Allegiance to the Flag.

By previous order of the Senate, the reading of the Journal is dispensed with, and the President and Secretary are authorized to make the necessary corrections and additions.

REPORTS OF COMMITTEE

Mr. President:

Your Committee on Judiciary, to which was referred Assembly Bill No. 404, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

MELANIE SCHEIBLE, Chair

Mr. President:

Your Committee on Legislative Operations and Elections, to which were referred Assembly Bills Nos. 192, 399, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

JAMES OHRENSCHALL, Chair

MESSAGES FROM THE ASSEMBLY

ASSEMBLY CHAMBER, Carson City, June 2, 2023

To the Honorable the Senate:

I have the honor to inform your honorable body that the Assembly on this day passed, as amended, Assembly Bills Nos. 58, 292, 487, 507.

CAROL AIELLO-SALA Assistant Chief Clerk of the Assembly

MOTIONS, RESOLUTIONS AND NOTICES

Senator Cannizzaro moved that Assembly Bills Nos. 41, 46, 112, 130, 135, 140, 151, 153, 161, 184, 195, 203, 226, 232, 260, 270, 277, 299, 304, 345, 389, 443, 448, 457, 461, 462 and 503 be taken from their positions on the General File and placed on the General File, third Agenda.

INTRODUCTION, FIRST READING AND REFERENCE

Assembly Bill No. 58.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 292.

Senator Lange moved that the bill be referred to the Committee on Judiciary.

Motion carried.

Assembly Bill No. 487.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 507.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

GENERAL FILE AND THIRD READING

Senate Bill No. 98.

Bill read third time.

The following amendment was proposed by Senator Cannizzaro:

Amendment No. 934.

Legislative Counsel's Digest:

Existing law requires the preparation of an annual report of accountability for each school district and sponsor of charter schools in this State, as well as for all public schools in the State as a whole. (NRS 385A.010-385A.520) Existing law imposes certain duties on the Superintendent of Public Instruction relating to the accountability of public schools. (NRS 385A.080) Section 3.3 of this bill additionally requires the Superintendent to establish metrics of performance for public schools for each grade and, along with each school district and charter school, publish such metrics on their respective Internet websites and report data on such metrics to the Governor, State Board of Education and Director of the Legislative Counsel Bureau for transmission to the Joint Interim Standing Committee on Education.

Existing law creates the Education Stabilization Account in the State Education Fund and allows the Interim Finance Committee to authorize the transfer of money in the Account to the State Education Fund if actual enrollment growth in a fiscal year exceeds projected enrollment growth or if the collection of revenue in a fiscal year results in the State Education Fund receiving 97 percent or less of the money authorized for expenditure from the State Education Fund. (NRS 387.1213) Section 3.5 of this bill additionally authorizes the Interim Finance Committee to transfer money from the Account to the State Education Fund if: (1) money deposited in the State

Education Fund was found by an audit to have been deposited in error; or (2) an error in the application of the Pupil-Centered Funding Plan by the Department of Education creates a shortfall in the State Education Fund.

Existing law creates the Commission on School Funding and authorizes the Commission to meet only between July 1 of an odd-numbered year and September 30 of the subsequent even-numbered year. (NRS 387.1246) Section 4 of this bill: (1) requires the Commission to meet monthly; (2) authorizes the Commission to meet in person or, at the discretion of the Chair of the Commission, by use of a remote technology system; (3) authorizes the Commission to meet between July 1 of an odd-numbered year and December 31 of the subsequent even-numbered year; and (4) authorizes the Commission to also meet during any regular or special session of the Legislature, if requested to do so by the chair of the Senate Standing Committee on Education, Assembly Standing Committee on Education, Senate Standing Committee on Finance, Assembly Standing Committee on Ways and Means or Interim Finance Committee. Section 4.5 of this bill expands the duties of the Commission by requiring the Commission to: (1) review the academic progress made by pupils in each public school; and (2) review and consider strategies to improve the accessibility and ensure the equitability of existing and new programs within and between public schools. Section 7.5 of this bill: (1) expires the terms of incumbent members of the Commission on June 30, 2023; (2) requires the appointment or reappointment of members of the Commission on or before July 1, 2023, to staggered terms; and (3) requires the Commission to hold its first meeting during Fiscal Year 2023-2024 on or before September 1, 2023.

Section 7 of this bill requires the Commission to conduct interim studies on school funding and school accountability. Section 7 requires the interim study on school funding to examine topics relating to: (1) the funding of building improvement and modernization projects by small school districts; (2) the number of professional educators graduating from institutions of higher education in this State; (3) the classification and compensation of professional educators and support personnel at public schools; and (4) changes to the laws governing sales and use tax and property tax to fully fund public schools in this State at an optimal level of funding. Section 7 requires the interim study on school accountability to include recommendations for performance metrics to assess the impact of increased investments in K-12 public education and accountability measures to ensure the effective use of such investments. Section 6 of this bill appropriates \$1,500,000 from the State General Fund to the Commission for the cost of the studies required by section 7. Sections 6.3 and 6.5 of this bill appropriate money for the payment of travel and per diem expenses for members of the Commission on School Funding and employees of the Department of Education, respectively, for attending meetings of the Commission.

Section 4.5 of Senate Bill No. 98 First Reprint is hereby amended as follows: Sec. 4.5. NRS 387.12463 is hereby amended to read as follows:

387.12463 1. The Commission shall:

- (a) Provide guidance to school districts and the Department on the implementation of the Pupil-Centered Funding Plan.
- (b) Monitor the implementation of the Pupil-Centered Funding Plan and make any recommendations to the Joint Interim Standing Committee on Education that the Commission determines would, within the limits of appropriated funding, improve the implementation of the Pupil-Centered Funding Plan or correct any deficiencies of the Department or any school district or public school in carrying out the Pupil-Centered Funding Plan.
- (c) Review the statewide base per pupil funding amount, the adjusted base per pupil funding for each school district and the multiplier for weighted funding for each category of pupils appropriated by law pursuant to NRS 387.1214 for each biennium and recommend any revisions the Commission determines to be appropriate to create an optimal level of funding for the public schools in this State, including, without limitation, by recommending the creation or elimination of one or more categories of pupils to receive additional weighted funding. If the Commission makes a recommendation pursuant to this paragraph which would require more money to implement than was appropriated from the State Education Fund in the immediately preceding biennium, the Commission shall also identify a method to fully fund the recommendation within 10 years after the date of the recommendation.
- (d) Review the laws and regulations of this State relating to education, make recommendations to the Joint Interim Standing Committee on Education for any revision of such laws and regulations that the Commission determines would improve the efficiency or effectiveness of public education in this State and notify each school district of each such recommendation.
- (e) Review and recommend to the Department revisions of the cost adjustment factors for each county established pursuant to NRS 387.1215 and the method for calculating the attendance area adjustment established pursuant to NRS 387.1218.
- (f) Review the academic progress made by pupils in each public school since the implementation of the Pupil-Centered Funding Plan, including, without limitation, any changes to the academic progress of such pupils as the result of any additional money provided to each such school by the Pupil-Centered Funding Plan. In performing such a review, the Commission shall:
- (1) Use metrics to measure the academic achievement of pupils which include, without limitation:
- (I) The rate of graduation of pupils from high school by type of diploma;
- (II) The performance of pupils on standardized examinations in math, reading and science;
- (III) The number of credentials or other certifications in fields of career and technical education earned by pupils;

- (IV) The number of pupils who earn a passing score on an advanced placement examination;
- (V) The number of pupils who earn a passing score on an international baccalaureate examination;
- (VI) The percentage of pupils in each school who lack a sufficient number of credits to graduate by the end of their 12th grade year;
 - (VII) The percentage of pupils in each school who drop out;
- (VIII) The number of pupils who enroll in higher education upon graduation;
- (IX) The number of pupils who enroll in a vocational or technical school or apprenticeship training program;
 - (X) The attendance rate for pupils;
- (XI) The number of violent acts by pupils and disciplinary actions against pupils; and
 - (XII) Any other metric prescribed by the Commission;
- (2) Use metrics to measure the improvement of pupils enrolled in elementary school in literacy which include, without limitation:
 - (I) The literacy rate for pupils in first, third and fifth grades;
- (II) The number of pupils in elementary school who were promoted to the next grade after testing below proficient in reading in the immediately preceding school year, separated by grade level and by level of performance on the relevant test;
- (III) The number of schools that employ a licensed teacher designated to serve as a literacy specialist pursuant to NRS 388.159 and the number of schools that fail to employ and designate such a licensed teacher; and
 - (IV) Any other metric prescribed by the Commission;
- (3) Use metrics to measure the ability of public schools to hire and retain sufficient staff to meet the needs of the public schools which include, without limitation:
- (I) The rate of vacancies in positions for teachers, support staff and administrators;
 - (II) The attendance rate for teachers;
 - (III) The retention rate for teachers;
- (IV) The number of schools and classrooms within each school in which the number of pupils in attendance exceeds the designed capacity for the school or classroom;
- (V) The number of classes taught by a substitute teacher for more than 25 percent of the school year; and
 - (VI) Any other metric prescribed by the Commission;
- (4) Use metrics to measure the extent to which schools meet the needs and expectations of pupils, parents or legal guardians of pupils, teachers and administrators which include, without limitation:
- (I) The results of an annual survey of satisfaction of school employees;

- (II) The results of an annual survey of satisfaction of pupils, parents or legal guardians of pupils and graduates; and
 - (III) Any other metric prescribed by the Commission;
- (5) Identify the progress made by each school, school district and charter school on improving the literacy of pupils enrolled in elementary school;
- (6) Make recommendations for strategies to increase the efficacy, efficiency, transparency and accountability of public schools; and
- (7) Make recommendations to the Department, school districts and charter schools to improve the reporting, tracking, monitoring, analyzing and dissemination of data relating to pupil achievement and financial accountability, including, without limitation, revisions to the metrics identified in subparagraphs (1) to (4), inclusive.
- (g) Review and consider strategies to improve the accessibility <u>and ensure</u> the <u>equitability</u> of existing and new programs for pupils within and between public schools, including, without limitation, open zoning.
- 2. The Commission shall present any recommendations pursuant to paragraphs (a) to (d), inclusive, of subsection 1 at a meeting of the Joint Interim Standing Committee on Education for consideration and revision by the Committee. The Joint Interim Standing Committee on Education shall review each recommendation of the Commission and determine whether to transmit the recommendation or a revised version of the recommendation to the Governor or the Legislature.

Senator Cannizzaro moved the adoption of the amendment.

Remarks by Senator Cannizzaro.

Amendment No. 934 to Senate Bill No. 98 adds one phrase to the bill, which allows for the Commission on School Funding to study a number of things, including the open zoning piece of subsection 1(g) to review and consider strategies to improve accessibility and to ensure equitability in the things the Commission on School Funding will be studying.

Amendment adopted.

Bill read third time.

Remarks by Senator Dondero Loop.

Senate Bill No. 98, as amended, requires the Superintendent of Public Instruction to establish performance metrics for public schools including the growth and proficiency of pupils in literacy, mathematics and science, the engagement and proficiency of pupils in courses for college and career readiness, and the retention and recruitment of teachers and education support professionals.

Senate Bill No. 98, as amended, revises the instances in which the Interim Finance Committee shall establish an amount of money to transfer from the Education Stabilization Account to the State Education Fund to include, upon submission of a request from the Department [of Education]: any amount of money which was deposited in the State Education Fund is found by an audit to have been deposited in error and any error in the application of the Pupil-Centered Funding Plan by the Department has created a shortfall in the State Education Fund.

Senate Bill No. 98, as amended, requires the Commission on School Funding to meet monthly either remotely or in person, outlines the timeframe and circumstances in which the Commission is allowed to meet, revises the appointment and terms of the members of the Commission and revises the Commission's duties and responsibilities to include reviewing academic progress made by pupils in each public school since the implementation of the Pupil-Centered Funding Plan utilizing various metrics. Senate Bill No. 98, as amended, also adds an interim study concerning school accountability to be completed by the Commission.

Finally, Senate Bill No. 98, as amended, provides a General Fund appropriation of \$1,500,000 to the Commission for the cost of conducting studies; provides a General Fund appropriation of \$10,000 in Fiscal Year 2025 to the Department of Education for Commission member travel expenses; and provides General Fund appropriations of \$6,200 in both Fiscal Year 2024 and Fiscal Year 2025 to the Department of Education for department staff travel for Commission meetings.

Roll call on Senate Bill No. 98:

YEAS—21.

NAYS-None.

Senate Bill No. 98 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 99.

Bill read third time.

Remarks by Senator Goicoechea.

Senate Bill No. 99 provides General Fund appropriations of \$600,000 in each year of the 2023-2025 biennium to the Desert Research Institute (DRI) of the Nevada System of Higher Education to support the Nevada State Cloud Seeding Program and requires the DRI to submit annual reports to the Interim Finance Committee of the expenditures made from the appropriations in the bill.

We already have the equipment in place. The \$600,000 just provides the funding. We have generators north and south. I know we had a wet winter, but we do not know what is coming. It is a good program, and I hope you support it.

Roll call on Senate Bill No. 99:

YEAS—21.

NAYS-None.

Senate Bill No. 99 having received a constitutional majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

Senate Bill No. 231.

Bill read third time.

Remarks by Senators Cannizzaro, Seevers Gansert, Buck and Dondero Loop.

SENATOR CANNIZZARO:

Senate Bill No. 231, as amended, provides a \$250 million General Fund appropriation to the Interim Finance Committee for allocation to school districts for the support of public schools. The bill, as amended, allows the Interim Finance Committee to allocate the money to school districts once sufficient documentation has been received indicating: a school district has budgeted for salary increases for teachers and education support professionals and staff for Fiscal Year 2024 and Fiscal Year 2025 from sources other than the appropriation, which is in addition to any increase in salary which was planned or bargained for prior to the effective date of the act; the increase in salary does not replace any other form of compensation which was provided prior to Fiscal Year 2024 or planned or bargained for before the effective date of the act; the amount and percentage of the budgeted salary increases, signed by the superintendent of the school district indicating the information is accurate to the best of his/her knowledge.

The bill, as amended, requires the money allocated to a school district to not exceed the lesser of the total amount of budgeted increase to salaries of the school district for Fiscal Year 2024 and Fiscal Year 2025, not including any increase in salary which was planned or bargained for before the effective date of the act, or an amount which is equal to \$250 million multiplied by a percentage, which is the number of teachers and education support professionals employed by the school district on July 1, 2023, expressed as a percentage of the total number of teachers and education support professionals and staff employed in all of the school districts in the state on July 1, 2023.

Senate Bill No. 231, as amended, requires each school district to report to the Nevada Department of Education by August 1, 2023, the number of teachers and staff employed by the school district on July 1, 2023.

Finally, Senate Bill No. 231, as amended, provides a General Fund appropriation of \$41,694 in Fiscal Year 2024 to the Nevada Department of Education for certain personnel expenditures to assist in the apportionment of funds to the school districts.

Mr. President, I would urge my colleagues' support of this bill. This is a bill that is going to provide some additional funding to help supplement teacher and support staff raises in our schools through the school districts, and I—as a product of the public school system here in Nevada—know that there are many teachers in my life and support staff that worked in those schools who cared about kids and made sure that we were successful. And I think the least that we can do is make sure that we are supporting them along the way. And so I would urge your support.

SENATOR SEEVERS GANSERT:

I support Senate Bill No. 231. This body has worked diligently trying to bring substantially more money into education, specifically trying to bolster teacher and other professional pay and most individuals who work in school districts. We have made great efforts.

A couple things that are important to point out is this is specifically about pay, hoping to match and bring that pay up. We also have to rely on the school districts to decide on how they are going to pay their employees. We hear from many teachers who come and keep asking for pay, but in the end, we are providing close to \$2.5 to \$3 billion into education. They are going to have to make those decisions.

The one issue we have brought forth about this bill that we struggle with is when you look at the number of students in the different school districts, we have the Charter School Authority (CSA). The CSA could be considered the second-largest school district in the State. The charter schools are public schools. They are public schools. We are responsible for funding them. They are not funded at the average of all the other schools because pieces are left out.

We believe the teachers and personnel in those schools should be treated equally. The \$250 million equates to about \$8,299 per employee. If we were to add the CSA, which has about 68,000 students, it would cost about \$32 million. We are hopeful as this bill travels to the Assembly, we can include all teachers and personnel in public schools not only those that are in the school districts but also the CSA. Again, when you look at the different groups of children and where they are, Clark County has the largest school district, and the CSA is number two. It has about 68,000 students, and we do not want to leave them out or the folks who work diligently teaching them every day.

SENATOR BUCK:

Charter schools are public schools. They are public schools; they receive public funding. I support this bill, but I plead with the other side of this body to please add our public school teachers to the mix so they can get equitable salary raises. I agree; teachers need to be paid more in our public schools. We need to ensure every child has a high-quality teacher in front of them each day; that is also with our public charter schools. Our public charter school teachers deserve the same, equitable funding.

If your child, like my children, goes to a public charter school, why give them less money? Why give their teachers less money? It makes no sense. Not to mention that our charter schools are leading the charge in academic achievement in our State in almost every subject and every year. I plead with this body that, yes, we do need raises for teachers in all our public schools to make sure Nevada education has the best teachers and talent out there. But we are neglecting our

charter school public teachers who are giving day in and day out, often with more hours. Everyone who goes to a charter school chose to be there. It is a way you are not in a monopoly, per se. They deserve equitable pay with our district counterparts.

SENATOR DONDERO LOOP:

I support Senate Bill No. 231. As a public school teacher who has grandchildren who attend all kinds of schools, I could not agree more that all teachers need to be compensated. The difference is in some education venues, all teachers do not need to be certificated. They have the autonomy that in a regular public school they do not have. It has nothing to do with pitting one school against another; it has to do with the autonomy other schools receive that a public school teacher does not.

I do not think we should make this an issue of public schools versus charter schools versus private schools versus home schools. This is about the kids. We want to compensate teachers. When all teachers, 100 percent of those teachers, need to be certificated teachers in charter schools or private schools, when all of those teachers receive the same autonomy in public, charter and private schools, then we can have a different type of conversation. As a public school teacher, I support Senate Bill No. 231.

SENATOR BUCK:

In charter schools, 50 teachers or less in the entire district are unlicensed. They may have a paramedic or pilot degree. To send them back to school ... it is a little more autonomy to have talent come in. It is not a significant problem. Why not give the unlicensed teachers nothing and give the public school teachers in our public charter schools the funds so they have equitable

Roll call on Senate Bill No. 231:

YEAS-21.

NAYS-None.

Senate Bill No. 231 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 241.

Bill read third time.

The following amendment was proposed by the Committee on Finance: Amendment No. 916.

SUMMARY—Revises provisions relating to Medicaid. (BDR 38-971)

AN ACT relating to Medicaid; requiring the State Plan for Medicaid to provide coverage for certain services provided by a critical access hospital; prescribing the rate of reimbursement for such services under Medicaid; making appropriations to and authorizing certain expenditures by the Division of Health Care Financing and Policy of the Department of Health and Human Services; and providing other matters properly relating thereto. Legislative Counsel's Digest:

Existing law requires the Director of the Department of Health and Human Services to develop and the Department to administer a State Plan for Medicaid, which includes a list of specific medical services required to be provided to Medicaid recipients. (NRS 422.063, 422.270) Section 1 of this bill requires the Director to include in the State Plan for Medicaid, to the extent that federal financial participation is available, a requirement that the State pay the nonfederal share of expenditures for outpatient services and

swing-bed services provided at a critical access hospital. Section 1 also requires Medicaid to reimburse a critical access hospital for such services at a rate equal to the actual cost of providing the services or the amount charged by the critical access hospital for the services, whichever is less. Section 2 of this bill makes a conforming change to indicate that the provisions of section 1 will be administered in the same manner as the provisions of existing law governing the State Plan for Medicaid. Section 2.5 of this bill makes appropriations to and authorizes expenditures by the Division of Health Care Financing and Policy of the Department for providing such cost-based reimbursement under Medicaid to critical care hospitals.

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

Section 1. Chapter 422 of NRS is hereby amended by adding thereto a new section to read as follows:

- 1. The Director shall include in the State Plan for Medicaid, to the extent that federal financial participation is available, a requirement that the State must:
- (a) Pay the nonfederal share of expenditures for outpatient services and swing-bed services provided by a critical access hospital; and
- (b) Reimburse a critical access hospital for the services described in paragraph (a) at a rate equal to the actual cost to the critical access hospital of providing the services or the amount charged by the critical access hospital for the services, whichever is less.
 - 2. As used in this section:
- (a) "Critical access hospital" means a <u>public or private</u> hospital which has been certified as a critical access hospital by the United States Secretary of Health and Human Services pursuant to 42 U.S.C. § 1395i-4(e).
- (b) "Swing-bed services" means services as described in 42 C.F.R. § 482.58.
 - Sec. 2. NRS 232.320 is hereby amended to read as follows:
 - 232.320 1. The Director:
- (a) Shall appoint, with the consent of the Governor, administrators of the divisions of the Department, who are respectively designated as follows:
 - (1) The Administrator of the Aging and Disability Services Division;
- (2) The Administrator of the Division of Welfare and Supportive Services:
 - (3) The Administrator of the Division of Child and Family Services;
- (4) The Administrator of the Division of Health Care Financing and Policy; and
 - (5) The Administrator of the Division of Public and Behavioral Health.
- (b) Shall administer, through the divisions of the Department, the provisions of chapters 63, 424, 425, 427A, 432A to 442, inclusive, 446 to 450, inclusive, 458A and 656A of NRS, NRS 127.220 to 127.310, inclusive, 422.001 to 422.410, inclusive, *and section 1 of this act*, 422.580, 432.010 to 432.133, inclusive, 432B.6201 to 432B.626, inclusive, 444.002 to 444.430,

inclusive, and 445A.010 to 445A.055, inclusive, and all other provisions of law relating to the functions of the divisions of the Department, but is not responsible for the clinical activities of the Division of Public and Behavioral Health or the professional line activities of the other divisions.

- (c) Shall administer any state program for persons with developmental disabilities established pursuant to the Developmental Disabilities Assistance and Bill of Rights Act of 2000, 42 U.S.C. §§ 15001 et seq.
- (d) Shall, after considering advice from agencies of local governments and nonprofit organizations which provide social services, adopt a master plan for the provision of human services in this State. The Director shall revise the plan biennially and deliver a copy of the plan to the Governor and the Legislature at the beginning of each regular session. The plan must:
- (1) Identify and assess the plans and programs of the Department for the provision of human services, and any duplication of those services by federal, state and local agencies;
 - (2) Set forth priorities for the provision of those services;
- (3) Provide for communication and the coordination of those services among nonprofit organizations, agencies of local government, the State and the Federal Government:
- (4) Identify the sources of funding for services provided by the Department and the allocation of that funding;
- (5) Set forth sufficient information to assist the Department in providing those services and in the planning and budgeting for the future provision of those services; and
- (6) Contain any other information necessary for the Department to communicate effectively with the Federal Government concerning demographic trends, formulas for the distribution of federal money and any need for the modification of programs administered by the Department.
- (e) May, by regulation, require nonprofit organizations and state and local governmental agencies to provide information regarding the programs of those organizations and agencies, excluding detailed information relating to their budgets and payrolls, which the Director deems necessary for the performance of the duties imposed upon him or her pursuant to this section.
 - (f) Has such other powers and duties as are provided by law.
- 2. Notwithstanding any other provision of law, the Director, or the Director's designee, is responsible for appointing and removing subordinate officers and employees of the Department.
- Sec. 2.5. <u>1. There is hereby appropriated from the State General Fund to the Division of Health Care Financing and Policy of the Department of Health and Human Services for providing cost-based reimbursement under Medicaid to critical access hospitals pursuant to this act the following sums:</u>

For the Fiscal Year 2023-2024 \$280,015 For the Fiscal Year 2024-2025 \$683,550

2. Expenditure of the following sums not appropriated from the State General Fund or the State Highway Fund is hereby authorized by the

<u>Division of Health Care Financing and Policy of the Department of Health and Human Services for the same purpose as set forth in subsection 1 the following sums:</u>

- 3. Any balance of the sums appropriated by subsection 1 remaining at the end of the respective fiscal years must not be committed for expenditure after June 30 of the respective fiscal years by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 20, 2024, and September 19, 2025, respectively, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 20, 2024, and September 19, 2025, respectively.
- 4. As used in this section, "critical access hospital" has the meaning ascribed to it in section 1 of this act.
 - Sec. 3. 1. This section becomes effective upon passage and approval.
 - 2. Section 2.5 of this act becomes effective on July 1, 2023.
- 3. Sections 1 and 2 of this act become effective:
- (a) Upon passage and approval for the purpose of performing any preparatory administrative tasks that are necessary to carry out the provisions of this act; and
 - (b) On January 1, 2024, for all other purposes.

Senator Dondero Loop moved the adoption of the amendment.

Remarks by Senator Dondero Loop.

Amendment No. 916 to Senate Bill No. 241 provides General Fund appropriations of \$280,015 in Fiscal Year (FY) 2024 and \$683,550 in FY 2025 and authorizes funding of \$745,037 in FY 2024 and \$1,724,067 in FY 2025 to the Division of Health Care Financing and Policy of the Department of Health and Human Services (DHHS) to provide cost-based reimbursement to critical access hospitals. Amendment No. 916 also revises the definition of critical access hospital to mean a public or private hospital.

Amendment adopted.

Bill read third time.

Remarks by Senator Titus.

Senate Bill No. 241 requires the Director of DHHS to include in the State Plan for Medicaid, to the extent that federal financial participation is available, a requirement that the State must pay the nonfederal share of expenditures for outpatient and swing-bed services provided at critical access hospitals and reimburse a critical access hospital for such services at a rate equal to the actual cost of providing the services or the amount charged by the hospital for the services, whichever is less.

Roll call on Senate Bill No. 241:

YEAS—21.

NAYS-None.

Senate Bill No. 241 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 451.

Bill read third time.

Remarks by Senator Spearman.

Senate Bill No. 451 directs the Joint Interim Standing Committee on Growth and Infrastructure to conduct a study during the 2023-2024 interim concerning hydrogen as a potential energy resource in this State and the development of hydrogen technologies. The study must include, without limitation, a review of the opportunities for students in the Nevada System of Higher Education to study subjects concerning hydrogen and an assessment of the feasibility of using hydrogen as an energy resource in Nevada. The Committee must consult with certain entities and may enter into certain contracts or agreements to gather data and produce a cost-benefit analysis. On or before January 1, 2025, the Committee must report the study results, including any recommendations for legislation, to the Director of the Legislative Counsel Bureau for transmittal to the 83rd Session of the Nevada Legislature.

I want to add something else, and this is from the Bloomberg Energy column: "The race to reduce greenhouse gas emissions is the defining challenge of our generation. Bloom [Energy] is committed to constant product innovation. Our roadmap aligns with a zero-emission trajectory to help organizations around the world reduce carbon emissions, enhance resiliency, and chart a path toward a net-zero carbon future."

Mr. President and colleagues, this bill is an attempt to bring Nevada on par with our other states in the western region. It is another way for Nevada to access money that is already available. I would also add that right now Nevada and Arizona have entered into a collaboration and requested \$2 billion—billion with a "b"—for hydrogen fuel cell hubs. I urge your cooperation in passing this.

I have heard some people say this is dangerous and unproven, but hydrogen and hydrogen fuel cells have been around for a long time. The research goes back 50 or 60 years. I urge my colleagues to vote "yes" on this bill. This is something we need so we can make sure we are building out and using every resource available to us in our renewable energy portfolio.

Roll call on Senate Bill No. 451:

YEAS—21.

NAYS-None.

Senate Bill No. 451 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

SECOND READING AND AMENDMENT

Assembly Bill No. 192.

Bill read second time.

The following amendment was proposed by the Committee on Legislative Operations and Elections:

Amendment No. 924.

SUMMARY—Revises provisions relating to elections. (BDR 24-836)

AN ACT relating to elections; establishing requirements relating to the purchase of ballots and return envelopes used in [certain] elections in this State; revising requirements for the form of all envelopes and return envelopes for mail ballots; revising certain requirements relating to electioneering; making an appropriation to the Office of the Secretary of

State to enter into a contract <u>or contracts</u> for the purchase of ballots and return envelopes; and providing other matters properly relating thereto. Legislative Counsel's Digest:

Existing law requires the Secretary of State to prescribe: (1) the form of all mail ballots; and (2) the placement and listing of all offices, candidates and measures upon which voting is statewide, which must be uniform throughout the State. (NRS 293.250) Sections 1.5 and 4 of this bill require the form of all envelopes in which mail ballots are sent to voters and all return envelopes for mail ballots to, with certain exceptions, be uniform throughout the State. Sections 1.5 and 4 also require the Secretary of State to prescribe a method for distinguishing the return envelopes of each county or city, as applicable.

Section 1 of this bill [requires] authorizes the Secretary of State to enter into [a statewide contract] one or more contracts for the purchase of all ballots and return envelopes used in [a presidential preference primary election, primary election and general] any statewide and local election held in this State. Section 1 provides that if such a contract or contracts requires the vendor to distribute mail ballots on behalf of a county or city clerk, the contract or contracts must require the vendor to deposit the mail ballots for mailing at a location within this State. Section 5.3 of this bill makes an appropriation to the Office of the Secretary of State to enter into such a contract [-] or contracts.

Section 1 further [requires] authorizes each board of county commissioners and governing body of an incorporated city [elerk] to elect to use the ballots and return envelopes purchased by the Secretary of State for [such] all statewide and local elections [.] held in a given year by notifying the Secretary of State in writing not less than 8 months before the date of a presidential preference primary election in a presidential election year or primary election in any other election year. Section 5.5 of this bill provides that a board of county commissioners or governing body of an incorporated city [elerk may request from] that elects to use the ballots purchased by the Secretary of State [an exemption from this requirement for the presidential preference primary election, primary election and general election] for all elections held in 2024 [.] must notify the Secretary of State 6 months before the date of the presidential preference primary election in 2024.

Existing law requires a county clerk and city clerk to keep continuously posted certain signs and notices which indicate that electioneering is prohibited between the boundary marked by the sign and the entrance to a polling place. (NRS 293.361, 293.740, 293C.361) Sections 2, 3 and 5 of this bill require the county clerk and city clerk to ensure that any signs and notices posted are: (1) at least 17 inches by 11 inches in size; (2) placed on a window or door of the polling place or freestanding; and (3) visible to a person approaching the boundary marked by the sign.

Existing law defines "electioneering" to include buying, selling, wearing or displaying any badge, button or other insigne which is designed or tends to aid or promote the success or defeat of any political party or a candidate or

ballot question to be voted upon at an election. (NRS 293.740) Section 3 revises this definition to provide instead that "electioneering" includes buying, selling, wearing or displaying any badge, button or other insigne which expressly refers to any political party or a candidate or ballot question to be voted upon at that election.

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

Section 1. Chapter 293 of NRS is hereby amended by adding thereto a new section to read as follows:

- 1. The Secretary of State [shall] may enter into [a contract] one or more contracts for the purchase of all ballots, including, without limitation, mail ballots, and return envelopes for use in [all presidential preference primary elections, primary elections and general elections] any statewide and local election held in this State [...] pursuant to title 24 of NRS. Such a contract is subject to the provisions of chapter 333 of NRS.
- 2. Each board of county [clerk] commissioners and governing body of an incorporated city [clerk] in this State [shall] may elect to use the ballots, including, without limitation, mail ballots, and return envelopes purchased by the Secretary of State in accordance with the contract or contracts entered into pursuant to this section for all [presidential preference primary elections, primary elections and general elections.] statewide and local elections held in a given year in this State pursuant to title 24 of NRS by notifying the Secretary of State in writing not less than 8 months before the date of the presidential preference primary election in a presidential election year or the date of the primary election in any other election year.
- [2.] 3. If a contract <u>or contracts</u> entered into pursuant to this section requires the vendor to distribute mail ballots on behalf of a county or city clerk, the contract <u>or contracts</u> must require the vendor to deposit the mail ballots for mailing at a location within this State.
 - Sec. 1.5. NRS 293.269913 is hereby amended to read as follows:
- 293.269913 1. Except as otherwise provided in subsection 2, NRS 293.269911 and chapter 293D of NRS, the county clerk shall send to each active registered voter by first-class mail, or by any class of mail if the Official Election Mail logo or an equivalent logo or mark created by the United States Postal Service is properly placed:
 - (a) A mail ballot;
 - (b) A return envelope;
- (c) An envelope or sleeve into which the mail ballot is inserted to ensure its secrecy; and
 - (d) Instructions.
- 2. In sending a mail ballot to an active registered voter, the county clerk shall use an envelope that may not be forwarded to an address of the voter that is different from the address to which the mail ballot is mailed.

- 3. The return envelope must include postage prepaid by first-class mail if the active registered voter is within the boundaries of the United States, its territories or possessions or on a military base.
- 4. Before sending a mail ballot to an active registered voter, the county clerk shall record:
 - (a) The date the mail ballot is issued;
- (b) The name of the voter to whom the mail ballot is issued, his or her precinct or district and his or her political affiliation, if any, unless all the offices on the mail ballot are nonpartisan offices;
 - (c) The number of the mail ballot; and
 - (d) Any remarks the county clerk finds appropriate.
 - 5. The Secretary of State shall prescribe:
- (a) The form of all envelopes in which mail ballots are sent to voters and return envelopes, which must, except as otherwise provided in paragraph (b), be uniform throughout the State; and
- (b) A method for distinguishing the return envelopes of each county which must be prominently displayed on the outside of the return envelope.
 - Sec. 2. NRS 293.361 is hereby amended to read as follows:
- 293.361 1. During the time a polling place for early voting is open for voting, a person may not electioneer for or against any candidate, measure or political party in or within 100 feet from the entrance to the voting area.
- 2. During the period of early voting, the county clerk shall keep continuously posted:
- (a) At the entrance to the room or area, as applicable, in which the polling place for early voting is located a sign on which is printed in large letters "Polling Place for Early [Voting"; and] Voting."
- (b) At the outer limits of the area within which electioneering is prohibited, [a] at least one sign on which is printed in large letters "Distance Marker: No electioneering between this point and the entrance to the polling place." The county clerk shall ensure that any sign posted pursuant to this paragraph is:
 - (1) At least 17 inches by 11 inches in size;
- (2) Placed on a window or door of the polling place or a freestanding sign; and
- (3) Visible to a person approaching the outer limits of the area within which electioneering is prohibited.
- 3. Ropes or other suitable objects may be used at the polling place to ensure compliance with this section. Persons who are not expressly permitted by law to be in a polling place must be excluded from the polling place to the extent practicable.
- 4. Any person who willfully violates the provisions of this section is guilty of a gross misdemeanor.

- Sec. 3. NRS 293.740 is hereby amended to read as follows:
- 293.740 1. Except as otherwise provided in subsection [2,] 3, it is unlawful inside a polling place or within 100 feet from the entrance to the building or other structure in which a polling place is located:
- (a) For any person to solicit a vote or speak to a voter on the subject of marking the voter's ballot.
- (b) For any person, including an election board officer, to do any electioneering on election day.
- → The county clerk or registrar of voters shall ensure that, at the outer limits of the area within which electioneering is prohibited, notices are continuously posted on which are printed in large letters "Distance Marker: No electioneering between this point and the entrance to the polling place."
- 2. The county clerk shall ensure that any notice posted pursuant to subsection 1 is:
 - (a) At least 17 inches by 11 inches in size;
- (b) Placed on a window or door of the polling place or a freestanding sign; and
- (c) Visible to a person approaching the outer limits of the area within which electioneering is prohibited pursuant to subsection 1.
- 3. The provisions of [subsection] subsections 1 and 2 do not apply to the conduct of a person in a private residence or on commercial or residential property that is within 100 feet from the entrance to a building or other structure in which a polling place is located. The provisions of subsection 1 are not intended to prohibit a person from voting solely because he or she is wearing a prohibited political insigne and is reasonably unable to remove the insigne or cover it. In such a case, the election board officer shall take such action as is necessary to allow the voter to vote as expediently as possible and then assist the voter in exiting the polling place as soon as is possible.
- [3.] 4. Any person who violates any provision of this section is guilty of a gross misdemeanor.
- [4.] 5. As used in this section, "electioneering" means campaigning for or against a candidate, ballot question or political party by:
- (a) Posting signs relating to the support of or opposition to a candidate, ballot question or political party;
- (b) Distributing literature relating to the support of or opposition to a candidate, ballot question or political party;
- (c) Using loudspeakers to broadcast information relating to the support of or opposition to a candidate, ballot question or political party;
- (d) Buying, selling, wearing or displaying any badge, button or other insigne which [is designed or tends to aid or promote the success or defeat of] expressly refers to any political party or a candidate or ballot question to be voted upon at that election; or
 - (e) Soliciting signatures to any kind of petition.

- Sec. 4. NRS 293C.26312 is hereby amended to read as follows:
- 293C.26312 1. Except as otherwise provided in subsection 2, NRS 293C.263 and chapter 293D of NRS, the city clerk shall send to each active registered voter by first-class mail, or by any class of mail if the Official Election Mail logo or an equivalent logo or mark created by the United States Postal Service is properly placed:
 - (a) A mail ballot;
 - (b) A return envelope;
- (c) An envelope or sleeve into which the mail ballot is inserted to ensure its secrecy; and
 - (d) Instructions.
- 2. In sending a mail ballot to an active registered voter, the city clerk shall use an envelope that may not be forwarded to an address of the voter that is different from the address to which the mail ballot is mailed.
- 3. The return envelope must include postage prepaid by first-class mail if the active registered voter is within the boundaries of the United States, its territories or possessions or on a military base.
- 4. Before sending a mail ballot to an active registered voter, the city clerk shall record:
 - (a) The date the mail ballot is issued:
- (b) The name of the voter to whom the mail ballot is issued, his or her precinct or district and his or her political affiliation, if any, unless all the offices on the mail ballot are nonpartisan offices;
 - (c) The number of the mail ballot; and
 - (d) Any remarks the city clerk finds appropriate.
 - 5. The Secretary of State shall prescribe:
- (a) The form of all envelopes in which mail ballots are sent to voters and return envelopes, which must, except as otherwise provided in paragraph (b), be uniform throughout the State; and
- (b) A method for distinguishing the return envelopes of each city which must be prominently displayed on the outside of the return envelope.
 - Sec. 5. NRS 293C.361 is hereby amended to read as follows:
- 293C.361 1. During the time a polling place for early voting is open for voting, a person may not electioneer for or against any candidate, measure or political party in or within 100 feet from the entrance to the voting area.
- 2. During the period of early voting, the city clerk shall keep continuously posted:
- (a) At the entrance to the room or area, as applicable, in which the polling place for early voting is located, a sign on which is printed in large letters "Polling Place for Early [Voting"; and] Voting."
- (b) At the outer limits of the area within which electioneering is prohibited, [a] at least one sign on which is printed in large letters "Distance Marker: No electioneering between this point and the entrance to the polling place." The city clerk shall ensure that any sign posted pursuant to this paragraph is:

- (1) At least 17 inches by 11 inches in size;
- (2) Placed on a window or door of the polling place or a freestanding sign; and
- (3) Visible to a person approaching the outer limits of the area within which electioneering is prohibited.
- 3. Ropes or other suitable objects may be used at the polling place to ensure compliance with this section. Persons who are not expressly permitted by law to be in a polling place must be excluded from the polling place to the extent practicable.
- 4. Any person who willfully violates the provisions of this section is guilty of a gross misdemeanor.
- Sec. 5.3. 1. There is hereby appropriated from the State General Fund to the Office of the Secretary of State to enter into [a contract] one or more contracts pursuant to section 1 of this act for the purchase of ballots, including, without limitation, mail ballots and return envelopes, the following sums:

For the Fiscal Year 2023-2024 \$7,805,011 For the Fiscal Year 2024-2025 \$3,902,506

- 2. Any balance of the sums appropriated by subsection 1 remaining at the end of the respective fiscal years must not be committed for expenditure after June 30 of the respective fiscal years by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 20, 2024, and September 19, 2025, respectively, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 20, 2024, and September 19, 2025, respectively.
- Sec. 5.5. [Upon the request of a county clerk or city clerk, the Secretary of State may grant an exemption from the requirement] Notwithstanding the provisions of section 1 of this act, a board of county commissioners or governing body of an incorporated city that elects to use the ballots, including, without limitation, mail ballots, and return envelopes purchased by the Secretary of State in accordance with the contract or contracts entered into pursuant to section 1 of this act for [the presidential preference primary election, primary election and general election] all statewide and local elections that [is] are held in 2024 [-] pursuant to title 24 of NRS shall notify the Secretary of State in writing not less than 6 months before the date of the presidential preference primary election held on February 6th, 2024.
- Sec. 6. 1. This section and [section] sections 1 and 5.5 of this act become effective upon passage and approval.
 - 2. Section 5.3 of this act becomes effective on July 1, 2023.
 - 3. Sections $\frac{11}{1.5}$ to 5, inclusive, of this act become effective:

- (a) Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
 - (b) On January 1, 2024, for all other purposes.

Senator Ohrenschall moved the adoption of the amendment.

Remarks by Senator Ohrenschall.

Amendment No. 924 to Assembly Bill No. 192 authorizes the Secretary of State to enter into one or more contracts for the purchase of ballots and return envelopes used in any statewide and local election and authorizes boards of county commissioners and governing bodies of incorporated cities to elect to use the ballots and return envelopes purchased by the Secretary of State. Such local governments must notify the Secretary of State of their election to use such ballots and envelopes not less than eight months before an election with the exception of the 2024 presidential preference primary where they must notify the Secretary of State at least six months before that primary.

Amendment adopted.

Bill ordered reprinted, re-engrossed and to third reading.

Assembly Bill No. 399.

Bill read second time.

The following amendment was proposed by the Committee on Legislative Operations and Elections:

Amendment No. 922.

SUMMARY—Creates the Subcommittee on Education Accountability of the Interim Finance Committee. (BDR 17-1043)

AN ACT relating to education; creating and establishing the membership, powers and duties of the Subcommittee on Education Accountability of the Interim Finance Committee; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law creates the Interim Finance Committee to exercise certain fiscal duties when the Legislature is not in a regular or special session. (NRS 218E.400, 218E.405) Section 2 of this bill creates the Subcommittee on Education Accountability of the Interim Finance Committee, consisting of five members of the Assembly and three members of the Senate.

Section 3 of this bill: (1) requires the Subcommittee to meet at least [once every 6 months;] twice annually; and (2) provides that the general objectives and functions of the Subcommittee are to discuss, evaluate and make recommendations relating to accountability in public education in this State in order to improve the educational achievements and outcomes for pupils. Section 3 further provides that the Subcommittee may study, without limitation: (1) fiscal policy, school finance or similar or related financial activities; (2) the sufficiency of current revenue and expenditures relating to public education in this State and the anticipated revenue and expenditures that are necessary to improve educational achievements and outcomes for pupils; (3) administrative support and policies; (4) corrective action plans for public schools to improve educational achievements and outcomes; and (5)

the rules, regulations and policies of individual school districts or public schools.

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

- Section 1. Chapter 218E of NRS is hereby amended by adding thereto the provisions set forth as sections 2 and 3 of this act.
- Sec. 2. 1. There is hereby created the Subcommittee on Education Accountability of the Interim Finance Committee, consisting of the following members:
- (a) Five members of the Assembly appointed by the Speaker of the Assembly, three of whom must be members of the majority political party and two of whom must be members of the minority political party; and
- (b) Three members of the Senate appointed by the Majority Leader of the Senate, two of whom must be members of the majority political party and one of whom must be a member of the minority political party.
- 2. The Director of the Legislative Counsel Bureau shall act as Secretary of the Subcommittee.
- 3. If any regular member of the Subcommittee informs the Secretary that the member will be unable to attend a particular meeting, the Secretary shall notify the Speaker of the Assembly or the Majority Leader of the Senate, as the case may be, to appoint an alternate for the meeting from the same House and political party as the absent member.
- 4. The Chair of the Interim Finance Committee shall appoint a Chair of the Subcommittee from one House and a Vice Chair of the Subcommittee from the other House.
- 5. Except as otherwise provided in subsection 6, the term of a member of the Subcommittee expires upon the convening of the next regular legislative session, unless the member is replaced by the appointing authority.
- 6. The membership of any member of the Subcommittee described in subsection 1 who is not a candidate for reelection or who is defeated for reelection terminates on the day next after the general election.
- 7. Vacancies on the Subcommittee must be filled in the same manner as original appointments.
- Sec. 3. 1. The members of the Subcommittee on Education Accountability of the Interim Finance Committee shall meet at least [once every 6 months] twice annually at the times and places specified by a call of the Chair of the Subcommittee or a majority of the Subcommittee.
- 2. A meeting held jointly by the Assembly Standing Committee on Ways and Means and the Senate Standing Committee on Finance during a regular session that has agenda items similar to subsection 4 constitutes a meeting of the Subcommittee.
 - 3. A majority of the members of the Subcommittee constitutes a quorum.
- 4. The general objectives and functions of the Subcommittee are to discuss, evaluate and make recommendations relating to accountability in

public education in this State to improve the educational achievements and outcomes for pupils. The Subcommittee may study, without limitation:

- (a) Fiscal policy, school finance or similar or related financial activities;
- (b) The sufficiency of current revenue and expenditures relating to public education in this State and the anticipated revenue and expenditures that are necessary to improve educational achievements and outcomes for pupils;
 - (c) Administrative support and policies;
- (d) Corrective action plans for public schools to improve educational achievements and outcomes; and
- (e) The rules, regulations and policies of individual school districts or public schools.
- 5. The Subcommittee may conduct investigations and hold hearings in connection with its functions and duties and exercise any of the investigative powers set forth in NRS 218E.105 to 218E.140, inclusive, including, without limitation, compelling the attendance at any meeting of the Subcommittee of:
 - (a) The Superintendent of Public Instruction;
 - (b) Any member of the State Board of Education;
 - (c) Any member of a board of trustees of a school district in this State;
- (d) Any superintendent or chief financial officer of a school district in this State: or
 - (e) The Executive Director of the State Public Charter School Authority.
- 6. Except during a regular or special session of the Legislature, for each day or portion of a day during which a member of the Subcommittee or appointed alternate attends a meeting of the Subcommittee or is otherwise engaged in the business of the Subcommittee, the member or appointed alternate, as applicable, is entitled to receive:
- (a) The compensation provided for a majority of the Legislators during the first 60 days of the preceding regular session;
- (b) The per diem allowance provided for state officers and employees generally; and
 - (c) The travel expenses provided pursuant to NRS 218A.655.
- 7. All such compensation, per diem allowances and travel expenses of a member or appointed alternate of the Subcommittee must be paid from the Contingency Fund in the State Treasury.
 - Sec. 4. This act becomes effective upon passage and approval.

Senator Ohrenschall moved the adoption of the amendment.

Remarks by Senator Ohrenschall.

Amendment No. 922 to Assembly Bill No. 399 amends the bill to require the newly established Subcommittee on Education Accountability, which is a subcommittee of the Interim Finance Committee, to meet at least twice annually as opposed to once every six months.

Amendment adopted.

Bill ordered reprinted, re-engrossed and to third reading.

Assembly Bill No. 404.

Bill read second time.

The following amendment was proposed by the Committee on Judiciary: Amendment No. 920.

SUMMARY—Revises provisions governing civil actions against a provider of health care for professional negligence. (BDR 3-709)

AN ACT relating to civil actions; finereasing the amount of civil damages for which certain providers of health care may be liable for acts or omissions in rendering care or assistance necessitated by certain traumatic injuries: excluding certain health care professionals from the definition of "provider of health care" for certain purposes; increasing} providing for the increase of the limitation on the amount of noneconomic damages a plaintiff may recover in a civil action against a provider of health care for professional negligence; [prohibiting a hospital from bringing certain actions against a provider of health care; revising the statute of limitations for bringing an action against a provider of health care for injury or death based upon professional negligence, professional services rendered without consent or error or omission in practice; [repealing] revising provisions which limit the amount of a contingent fee for which an attorney representing a plaintiff in a civil action against a provider of health care for professional negligence may contract for or collect; and providing other matters properly relating thereto. Legislative Counsel's Digest:

[Existing law limits to \$50,000 the amount of civil damages for which a licensed physician or dentist, a hospital or certain employees of a hospital may be held liable for certain acts or omissions in rendering care or assistance at a hospital necessitated by a traumatic injury demanding immediate medical attention. (NRS 41.503) Section 1 of this bill increases that amount to \$250,000 and, beginning on January 1, 2026, requires that amount to be adjusted each year based on the percentage increase in the Consumer Price Index (All Items) for the immediately preceding calendar year.

Existing law sets forth various requirements and restrictions relating to eivil actions against a provider of health care for professional negligence. (Chapter 41A of NRS) Existing law defines "provider of health care" for the purposes of those provisions to include a physician, physician assistant, dentist, licensed nurse, dispensing optician, optometrist, registered physician, therapist, podiatric physician, licensed psychologist, chiropractic physician, doctor of Oriental medicine, medical laboratory director or technician, licensed dictitian, a person licensed to engage in radiation therapy or radiologic imaging, a licensed hospital and certain other entities. (NRS 41A.017) Section 1.5 of this bill excludes from that definition an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing, a facility for hospice care and a nursing pool, thereby specifically excluding such persons from the provisions of existing law imposing certain requirements and restrictions on civil actions brought against a provider of health care for professional negligence.]

Existing law limits the amount of noneconomic damages that a plaintiff may recover in a civil action brought against a provider of health care for professional negligence to \$350,000, regardless of the number of plaintiffs, defendants or theories upon which liability may be based. (NRS 41A.035) Section 2 of this bill Finstead limits the amount of noneconomic damages that a plaintiff may recover in such an action to: (1) for an action in which a hospital other than a critical access hospital is a party. \$2,000,000; and (2) for any other action, \$550,000. Section 2 requires, beginning on January 1, 2026, that those amounts be adjusted requires that amount to be increased by \$80,000 on January 1 of each year fbased on the percentage increase in the Consumer Price Index (All Items) for the immediately preceding calendar year. Section1 beginning on January 1, 2024, and ending on January 1, 2028, when the amount reaches \$750,000, Beginning on January 1, 2029, section 2 falso prohibits a hospital from bringing an action against a provider of health care to recover from the provider of health care any amount paid to a plaintiff by the hospital.] requires that amount to be increased on January 1 of each year by 2.1 percent. Section 2 additionally requires the Nevada Supreme Court to annually publish on its Internet website the maximum amount of noneconomic damages that may be awarded to a plaintiff in an action for injury or death against a provider of health care based upon professional negligence in each year for the following 20 years.

Existing law requires an action for injury or death against a provider of health care based on professional negligence, professional services rendered without consent or error or omission in practice, to be commenced: (1) for an injury that occurred on or after October 1, 2002, not more than 3 years after the date of injury or 1 year after the plaintiff discovers or should have discovered the injury; and (2) if the injury occurred before October 1, 2002, not more than 4 years after the date of injury or 2 years after the plaintiff discovers or should have discovered the injury. (NRS 41A.097) Section 3 of this bill frevises those provisions to require all requires such factions an action to be brought, for an injury that occurred on or after October 1, 2023, not more than [4] 3 years after the date of injury or 2 years after the plaintiff discovers or should have discovered the injury. Section 4 of this bill provides that the changes in section 3 apply retroactively to any injury or death that occurred before October 1, 2023, even if the statute of limitations that was in effect at the time of the injury or death has expired. Therefore, a civil action against a provider of health care that would otherwise be time-barred by the former statute of limitations is revived by this bill, so long as the revised statute of limitations set forth in section 4 has not expired.

— Section 6 of this bill repeals provisions that limit]

Existing law limits the amount of a contingent fee that an attorney representing a plaintiff in a civil action against a provider of health care for professional negligence may contract for or collect. (1) forty percent of the first \$50,000 recovered; (2) thirty-three and one-third percent of the next \$50,000 recovered; (3) twenty-five percent of the next \$500,000 recovered;

and (4) fifteen percent of the amount of recovery that exceeds \$600,000. (NRS 7.095) Section 3.5 of this bill eliminates that tier of amounts and instead limits the amount of a contingent fee that such an attorney may contract for or collect to 35 percent of the amount recovered.

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

- Section 1. INRS 41.503 is hereby amended to read as follows:
- 41.503 1. Except as otherwise provided in subsection 2 and NRS 41.504, 41.505 and 41.506;
- —(a) A hospital which has been designated as a center for the treatment of trauma by the Administrator of the Division of Public and Behavioral Health of the Department of Health and Human Services pursuant to NRS 450B.237 and which is a nonprofit organization;
- (b) A hospital other than a hospital described in paragraph (a);
- (e) An employee of a hospital described in paragraph (a) or (b) who renders care or assistance to patients;
- (d) A physician or dentist licensed under the provisions of chapter 630, 631 or 633 of NRS who renders care or assistance in a hospital described in paragraph (a) or (b), whether or not the care or assistance was rendered gratuitously or for a fee; and
- (e) A physician or dentist licensed under the provisions of chapter 630, 631 or 633 of NRS:
- (1) Whose liability is not otherwise limited pursuant to NRS 41.032 to 41.0337, inclusive; and
- (2) Who renders care or assistance in a hospital of a governmental entity that has been designated as a center for the treatment of trauma by the Administrator of the Division of Public and Behavioral Health of the Department of Health and Human Services pursuant to NRS 450B.237, whether or not the care or assistance was rendered gratuitously or for a fee,
- that in good faith renders care or assistance necessitated by a traumatic injury demanding immediate medical attention, for which the patient enters the hospital through its emergency room or trauma center, may not be held liable for more than [\$50,000] \$250,000 in civil damages, exclusive of interest computed from the date of judgment, to or for the benefit of any claimant arising out of any act or omission in rendering that care or assistance if the care or assistance is rendered in good faith and in a manner not amounting to gross negligence or reckless, willful or wanton conduct.
- 2. The limitation on liability provided pursuant to this section does not apply to any act or omission in rendering care or assistance:
- (a) Which occurs after the patient is stabilized and is capable of receiving medical treatment as a nonemergency patient, unless surgery is required as a result of the emergency within a reasonable time after the patient is stabilized, in which case the limitation on liability provided by subsection 1 applies to any act or omission in rendering care or assistance which occurs before the stabilization of the patient following the surgery; or

- (b) Unrelated to the original traumatic injury.
- 3. If:
- (a) A physician or dentist provides follow up care to a patient to whom the physician or dentist rendered care or assistance pursuant to subsection 1:
- (b) A medical condition arises during the course of the follow-up care that is directly related to the original traumatic injury for which care or assistance was rendered pursuant to subsection 1; and
- (e) The patient files an action for malpractice based on the medical condition that arises during the course of the follow up care,
- → there is a rebuttable presumption that the medical condition was the result of the original traumatic injury and that the limitation on liability provided by subsection 1 applies with respect to the medical condition that arises during the course of the follow-up care.
- A. The maximum amount of civil damages set forth in subsection 1-must be adjusted on January 1 of each year beginning on January 1, 2026, in a rounded dollar amount corresponding to the percentage increase in the Consumer Price Index (All Items) published by the United States Department of Labor for the immediately preceding calendar year. The Attorney General shall determine the amount of the increase required by this subsection and establish the adjusted amount to take effect on January 1 of that year.
- 5. For the purposes of this section:
- (a) "Reckless, willful or wanton conduct," as it applies to a person to whom subsection 1 applies, shall be deemed to be that conduct which the person knew or should have known at the time the person rendered the care or assistance would be likely to result in injury so as to affect the life or health of another person, taking into consideration to the extent applicable:
 - (1) The extent or serious nature of the prevailing circumstances;
 - (2) The lack of time or ability to obtain appropriate consultation;
- (3) The lack of a prior medical relationship with the patient;
- (4) The inability to obtain an appropriate medical history of the patient; and
- (5) The time constraints imposed by coexisting emergencies.
- (b) "Traumatic injury" means any acute injury which, according to standardized criteria for triage in the field, involves a significant risk of death or the precipitation of complications or disabilities.] (Deleted by amendment.)
 - Sec. 1.5. [NRS 41A.017 is hereby amended to read as follows:
- 41A.017 1. "Provider of health care" means a physician licensed pursuant to chapter 630 or 633 of NRS, physician assistant, dentist, licensed nurse, dispensing optician, optometrist, registered physicial therapist, podiatric physician, licensed psychologist, chiropractic physician, 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 dictitian or a licensed hospital, clinic, surgery center, physicians'

professional corporation or group practice that employs any such person and its employees.

- 2. The term does not include:
- (a) An agency to provide nursing in the home, as defined in NRS 449.0015.
- (b) A facility for hospice care, as defined in NRS 449.0033.
- (c) A facility for intermediate care, as defined in NRS 449,0038.
- (d) A facility for skilled nursing, as defined in NRS 449.0039.
- (e) A nursing pool, as defined in NRS 449.0153.] (Deleted by amendment.)
 - Sec. 2. NRS 41A.035 is hereby amended to read as follows:
- 41A.035 *1*. In an action for injury or death against a provider of health care based upon professional negligence, the injured plaintiff may recover noneconomic damages, but the amount of noneconomic damages awarded in such an action must not exceed , $\underline{\$350,000}$, regardless of the number of plaintiffs, defendants or theories upon which liability may be based $\underline{}$ $\underline{+}$:
- (a) For an action in which a hospital, other than a critical access hospital, is a party, \$2,000,000.
- (b) For any other action, \$550,000.1
- 2. [A hospital may not bring an action against a provider of health care, whether based on a claim of contractual or equitable indemnity, apportionment, contribution or other basis, to recover from the provider of health care any amount paid to a plaintiff by the hospital.] The maximum amount of noneconomic damages set forth in subsection 1 must be increased by \$80,000 on January 1 of each year beginning on January 1, 2024, and ending on January 1, 2028, when the amount reaches \$750,000.
- 3. [The] Beginning on January 1, 2029, the maximum [amounts] amount of noneconomic damages set forth in [paragraphs (a) and (b) of] subsection 1, as adjusted by subsection 2, must be [adjusted] increased on January 1 of each year [beginning on January 1, 2026, in a] by 2.1 percent, rounded to the nearest dollar. [amount corresponding to the percentage of increase in the Consumer Price Index (All Items) published by the United States Department of Labor for the immediately preceding calendar year. The Attorney General shall determine the amount of the increase required by this subsection and establish the adjusted amounts to take effect on January 1 of that year.]
- 4. [As used in this section, "critical access hospital" means a hospital which has been certified as a critical access hospital by the Secretary of Health and Human Services pursuant to 42 U.S.C. § 1395i-4(e).] The Nevada Supreme Court shall, on or before January 1 of each year, publish on its Internet website the maximum amount of noneconomic damages that may be awarded in an action for injury or death against a provider of health care based upon professional negligence in each year for the following 20 years.
 - Sec. 2.5. (Deleted by amendment.)

- Sec. 3. NRS 41A.097 is hereby amended to read as follows:
- 41A.097 1. Except as otherwise provided in subsection [3,-2,-3] 4, an action for injury or death against a provider of health care may not be commenced more than 4 years after the date of injury or 2 years after the plaintiff discovers or through the use of reasonable diligence should have discovered the injury, whichever occurs first, for:
- (a) Injury to or the wrongful death of a person <u>occurring before October 1,</u> <u>2002,</u> based upon alleged professional negligence of the provider of health care;
- (b) Injury to or the wrongful death of a person <u>occurring before October 1</u>, 2002, from professional services rendered without consent; or
- (c) Injury to or the wrongful death of a person <u>occurring before October 1,</u> 2002, from error or omission in practice by the provider of health care.
- 2. Except as otherwise provided in subsection [3,] 4, an action for injury or death against a provider of health care may not be commenced more than 3 years after the date of injury or 1 year after the plaintiff discovers or through the use of reasonable diligence should have discovered the injury, whichever occurs first, for:
- (a) Injury to or the wrongful death of a person occurring on or after October 1, 2002, [,] and before October 1, 2023, based upon alleged professional negligence of the provider of health care;
- (b) Injury to or the wrongful death of a person occurring on or after October 1, 2002 [,] and before October 1, 2023, from professional services rendered without consent; or
- (c) Injury to or the wrongful death of a person occurring on or after October 1, 2002 [-] and before October 1, 2023, from error or omission in practice by the provider of health care.
- 3. Except as otherwise provided in subsection 4, an action for injury or death against a provider of health care may not be commenced more than 3 years after the date of injury or 2 years after the plaintiff discovers or through the use of reasonable diligence should have discovered the injury, whichever occurs first, for:
- (a) Injury to or the wrongful death of a person occurring on or after October 1, 2023, based upon alleged professional negligence of the provider of health care;
- (b) Injury to or the wrongful death of a person occurring on or after October 1, 2023, from professional services rendered without consent; or
- (c) Injury to or the wrongful death of a person occurring on or after October 1, 2023, from error or omission in practice by the provider of health care.
- <u>4.</u> This time limitation is tolled for any period during which the provider of health care has concealed any act, error or omission upon which the action is based and which is known or through the use of reasonable diligence should have been known to the provider of health care.

- [4.-3.] 5. For the purposes of this section, the parent, guardian or legal custodian of any minor child is responsible for exercising reasonable judgment in determining whether to prosecute any cause of action limited by subsection 1 [-1]. 2 or [2.] 3. If the parent, guardian or custodian fails to commence an action on behalf of that child within the prescribed period of limitations, the child may not bring an action based on the same alleged injury against any provider of health care upon the removal of the child's disability, except that in the case of:
- (a) Brain damage or birth defect, the period of limitation is extended until the child attains 10 years of age.
- (b) Sterility, the period of limitation is extended until 2 years after the child discovers the injury.
 - Sec. 3.5. 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 \biguplus
- (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] 35 percent of the amount recovered . Frank

(d) Fifteen percent of the amount of recovery that exceeds \$600,000.1

- 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, dispensing optician, optometrist, registered physical therapist, podiatric physician, licensed psychologist, chiropractic physician, 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. 4. [The amendatory provisions of section 3 of this act apply to any injury or death that occurred before October 1, 2023, regardless of any statute of limitations that was in effect at the time the injury or death occurred, including, without limitation, any civil action that would have been barred by the statute of limitations that was in effect before October 1, 2023.] (Deleted by amendment.)
 - Sec. 5. The amendatory provisions of \vdash
- 1. Sections 1, 1.5 and 6] section 3.5 of this act apply to a cause of action that accrues on or after October 1, 2023.
- [2. Section 2 of this act applies to a cause of action that accrues on or after January 1, 2024.]
 - Sec. 6. [NRS 7.095 is hereby repealed.] (Deleted by amendment.)[
- —7.095 Limitations on contingent fees for representation of persons in certain actions against providers of health care.
- 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, dispensing optician, optometrist, registered physicial therapist, podiatric physician, licensed psychologist, chiropraetic physician, 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 dictitian or a licensed hospital and its employees.

Senator Scheible moved the adoption of the amendment.

Remarks by Senator Scheible.

Amendment No. 920 to Assembly Bill No. 404, better known as the "medical malpractice bill," reflects a compromise between all the involved stakeholders by deleting the provisions of the bill as it came over to us and replacing them with policies that require the statutory cap on noneconomic damages in medical malpractice cases to be increased by \$80,000 on January 1, 2025, and each year thereafter until January 1, 2028, culminating in a total cap of \$750,000 in January of 2028. It requires that on January 1, 2029, and each year thereafter, the statutory cap on noneconomic damages in medical malpractice cases be increased by 2.1 percent; requires the Nevada Supreme Court to annually publish certain information regarding the statutory cap on noneconomic damages in medical malpractice cases; and prescribes the statute of limitations for filing a medical malpractice case based upon an injury or death that occurs on or after October 1, 2023.

In other words, the new statute of limitations will go into effect on October 1 of this year. It prohibits an attorney representing a plaintiff in a medical malpractice case from contracting for or collecting a contingency fee of more than 35 percent of the amount recovered.

Amendment adopted.

Bill ordered reprinted, re-engrossed and to third reading.

MOTIONS, RESOLUTIONS AND NOTICES

Senator Dondero Loop moved that Assembly Bill No. 192 be taken from the General File and re-referred to the Committee on Finance.

Motion carried.

Senator Cannizzaro moved that the Senate recess subject to the call of the Chair.

Motion carried.

Senate in recess at 11:14 a.m.

SENATE IN SESSION

At 5:40 p.m.

President Anthony presiding.

Ouorum present.

Mr. President announced that Senate Bills Nos. 98, 99, 231, 241 and 451 would be immediately transmitted to the Assembly.

REPORTS OF COMMITTEE

Mr. President:

Your Committee on Education, to which was referred Assembly Bill No. 72, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

ROBERTA LANGE, Chair

Mr. President:

Your Committee on Finance, to which was referred Senate Bill No. 506, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

Also, your Committee on Finance, to which were re-referred Senate Bills Nos. 118, 191, 385, 395, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

MARILYN DONDERO LOOP. Chair

Mr. President:

Your Committee on Health and Human Services, to which was referred Assembly Bill No. 281, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

FABIAN DOÑATE, Chair

Mr. President:

Your Committee on Judiciary, to which was referred Assembly Bill No. 292, has had the same under consideration, and begs leave to report the same back with the recommendation: Do pass.

Also, your Committee on Judiciary, to which was referred Assembly Bill No. 148, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

MELANIE SCHEIBLE, Chair

MESSAGES FROM THE ASSEMBLY

ASSEMBLY CHAMBER, Carson City, June 2, 2023

To the Honorable the Senate:

I have the honor to inform your honorable body that the Assembly on this day passed, as amended, Assembly Bills Nos. 45, 150, 155, 158, 160, 208, 348, 428.

CAROL AIELLO-SALA
Assistant Chief Clerk of the Assembly

ASSEMBLY CHAMBER, Carson City, June 3, 2023

To the Honorable the Senate:

I have the honor to inform your honorable body that the Assembly on this day passed Assembly Bills Nos. 484, 526, 527.

Also, I have the honor to inform your honorable body that the Assembly on this day passed, as amended, Assembly Bills Nos. 84, 119, 125, 138, 139, 216, 224, 237, 245, 253, 266, 279, 283, 290, 296, 301, 321, 323, 332, 346, 357, 386, 396, 434, 441, 449, 468, 483, 488, 490, 491, 518, 519.

Also, I have the honor to inform your honorable body that the Assembly on this day concurred in the Senate Amendment No. 665 to Assembly Bill No. 49.

Also, I have the honor to inform your honorable body that the Assembly on this day respectfully refused to concur in Senate Amendments Nos. 676, 730 to Assembly Bill No. 444.

CAROL AIELLO-SALA

Assistant Chief Clerk of the Assembly

INTRODUCTION, FIRST READING AND REFERENCE

By the Committee on Finance:

Senate Bill No. 511—AN ACT relating to state financial administration; making appropriations from the State General Fund and the State Highway Fund for the support of the civil government of the State of Nevada for the 2023-2025 biennium; providing for the use of the money so appropriated; making various other changes relating to the financial administration of the State; and providing other matters properly relating thereto.

Senator Dondero Loop moved that the bill be referred to the Committee on Finance.

Assembly Bill No. 45.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 84.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 119.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 125.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 138.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 139.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 150.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 155.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 158.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 160.

Senator Lange moved that the bill be referred to the Committee on Finance.

Assembly Bill No. 208.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 216.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 224.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 237.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 245.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 253.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 266.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 279.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 283.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 290.

Senator Lange moved that the bill be referred to the Committee on Finance.

Assembly Bill No. 296.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 301.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 321.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 323.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 332.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 346.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 348.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 357.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 386.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 396.

Senator Lange moved that the bill be referred to the Committee on Finance.

Assembly Bill No. 428.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 434.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 441.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 449.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 468.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 483.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 484.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 488.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 490.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 491.

Senator Lange moved that the bill be referred to the Committee on Finance.

Assembly Bill No. 518.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 519.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 526.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 527.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

UNFINISHED BUSINESS

CONSIDERATION OF ASSEMBLY AMENDMENTS

Senate Bill No. 180.

The following Assembly amendment was read:

Amendment No. 707.

SUMMARY—Revises provisions relating to groundwater boards. (BDR 48-597)

AN ACT relating to water; revising provisions relating to the establishment, membership and duties of a groundwater board; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes a board of county commissioners to recommend to the State Engineer that the State Engineer establish a groundwater board in an area designated as a groundwater basin by the State Engineer. If the State Engineer directs the establishment of a groundwater board, the Governor is required to appoint seven members who serve on the groundwater board. Existing law authorizes the Governor to dissolve the groundwater board if the Governor determines that the future activities of the board are likely to be insubstantial. (NRS 534.035) Section 1 of this bill: (1) authorizes a board of county commissioners to request that the State Engineer establish a groundwater board and appoint seven members to serve on the groundwater board; (2) authorizes boards of county commissioners to jointly request that the State Engineer establish a groundwater board; (3) authorizes a board of county commissioners or boards of county commissioners, as applicable, to appoint a nonvoting member to the groundwater board; $\frac{1}{(3)}$ (4) provides that the groundwater board must be dissolved after 4 years unless the State Engineer approves a request from the board of county commissioners or boards of county commissioners, as applicable, to continue the board; and [(4)] (5) provides that the groundwater board may be dissolved by a majority vote of the groundwater board. Section 1 further provides that only one groundwater board may be established for a designated groundwater basin.

Section 1 also requires the State Engineer to consider the written advice and recommendations of the groundwater board on reducing overpumping in the designated basin.

Existing law requires: (1) the State to pay certain expenses of a groundwater board such as per diem and travel allowances for board members and expenses for consultants employed by a groundwater board; and (2) the State Engineer to determine and certify the budget of a groundwater board for paying such expenses. (NRS 534.035, 534.040) Sections 1 and 2 of this bill eliminate these provisions and provide that members serve without compensation.

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

Section 1. NRS 534.035 is hereby amended to read as follows:

- 534.035 1. In each area designated as a groundwater basin by the State Engineer pursuant to the provisions of NRS 534.030 [, the]:
- (a) If the designated groundwater basin is located in one county, the board of county commissioners may [recommend to the State Engineer] request that the State Engineer establish a groundwater board. [The State Engineer shall determine whether or not a groundwater board is to be established and may direct its establishment by order.]
- (b) If the designated groundwater basin is located in more than one county:
- (1) A board of county commissioners may request or the boards of county commissioners of the counties may jointly request that the State Engineer establish a groundwater board.
- (2) Regardless of whether a groundwater board is requested to be established jointly, the State Engineer may appoint members of the groundwater board in accordance with subsection 3 who reside in any county in which the designated groundwater basin is located.
- 2. <u>Not more than one groundwater board may be established in a designated groundwater basin pursuant to subsection 1.</u>
- <u>3.</u> If a groundwater board is [established, the governing bodies of all the eities and towns within the designated area, the board of county commissioners of each county in which the area is located, and the governing body of any water district in which the area is included, or partly included, shall each submit a list of names of residents of the area to the Governor, who] requested to be established pursuant to subsection 1, the State Engineer shall appoint seven members of the board [. At least one member must be appointed from each list.] who must reside within the designated groundwater basin as follows:

- (a) Four members, each of whom holds a permit or certificate to appropriate water within the designated groundwater basin with a senior date of priority, as determined by the State Engineer;
- (b) Two members, each of whom holds a permit or certificate to appropriate water within the designated groundwater basin with a junior date of priority, as determined by the State Engineer; and
- (c) One member who holds a permit or certificate, or permits or certificates, within the designated groundwater basin for the greatest quantity of groundwater in the basin, or if such a person is already appointed or unwilling to serve, the person who holds a permit or certificate, or permits or certificates, in the designated groundwater basin for the next greatest quantity of groundwater in the basin, as determined by the State Engineer.
- [3-] 4. [After the initial terms, the] In addition to the members appointed pursuant to subsection [2-,] 3, the board of county commissioners or boards of county commissioners, as applicable, may appoint a nonvoting member to the groundwater board.
- [4.] 5. The term of office of each member of the *groundwater* board is 4 years. The *groundwater* board shall elect one member as chair and one member as secretary to serve as such at the pleasure of the *groundwater* board.
- [4.—5.] 6. The groundwater board shall [maintain its headquarters at the county seat of] hold public meetings and any physical location for such public meetings must be in the county in which the designated area is located , or if the area lies in more than one county [,] and the counties jointly requested the establishment of the groundwater board, in [the county seat of] one of the counties in which the area is located. The board shall hold meetings at such times and places as it may determine. Special meetings may be called at any time by the secretary at the request of any four members, or by the chair, upon notice specifying the matters to be acted upon at the meeting. No matters other than those specified in the notice may be acted upon at that meeting unless all members are present and consent thereto.
- [5.-6.] 7. A majority of the *groundwater* board constitutes a quorum, and the *groundwater* board shall act only by a majority of those present.
- [6. For each day's attendance at each meeting of the groundwater board, or for each day when services are actually performed for the groundwater board, the members are entitled to receive per diem and travel allowances provided by law. Claims for those expenses must be paid as provided in subsection 7 of NRS 534.040.
- $\frac{7.1}{8.}$ *Members of the groundwater board serve without compensation.*
- [8,] 9. The State Engineer shall [not approve any application or issue any permit to drill a well, appropriate groundwater, change the place or manner of use or the point of diversion of water within the designated area, adopt any related regulations or enter any related orders until the State Engineer has conferred with the board and obtained its] consider the written

advice and recommendations $[\cdot]$ of the groundwater board on reducing overpumping in the designated groundwater basin.

- [8. It is the intention of the Legislature that the State Engineer and the board be in agreement whenever possible, but, for the purpose of fixing responsibility to the Governor, if] If there is any disagreement between the State Engineer and the groundwater board, the views of the State Engineer prevail. [A written report of any such disagreement must be made immediately to the Governor by the State Engineer and the board.] A decision of the State Engineer to comply or not comply with the views of the groundwater board is not subject to judicial review. A disagreement between the State Engineer and a groundwater board is not admissible in any proceeding challenging a decision of the State Engineer.
- [9.] 10. [Any] A groundwater board [may request from the State Engineer or any other state, county, city or district agency such technical information, data and advice as it may require to perform its functions, and]:
- (a) Must be dissolved 4 years after the date such a board is established by the State Engineer [and such other agencies shall, within the resources available to them, furnish such assistance as may be requested.
- 10. The Governor may dissolve the groundwater board by order if the Governor determines that the future activities of the board are likely to be insubstantial.] pursuant to subsection [2] 3 unless the State Engineer approves a request from the board of county commissioners or boards of county commissioners, as applicable, to continue the groundwater board for any additional 4 year term; and
- (b) May be dissolved by a majority vote of the groundwater board at a meeting of the board.
 - Sec. 2. NRS 534.040 is hereby amended to read as follows:
- 534.040 1. Upon the initiation of the administration of this chapter in any particular basin, and where the investigations of the State Engineer have shown the necessity for the supervision over the waters of that basin, the State Engineer may employ a well supervisor and other necessary assistants, who shall execute the duties as provided in this chapter under the direction of the State Engineer. The salaries of the well supervisor and the assistants of the well supervisor must be fixed by the State Engineer. The well supervisor and assistants are exempt from the provisions of chapter 284 of NRS.
- 2. If the money available from the license fees provided for in NRS 534.140 is not sufficient to pay those salaries, together with necessary expenses, including the compensation and other expenses of the Well Drillers' Advisory Board, the board of county commissioners shall, except as otherwise provided in this subsection, levy a special assessment annually, or at such time as the assessment is needed, upon all taxable property situated within the confines of the area designated by the State Engineer to come under the provisions of this chapter in an amount as is necessary to pay such salaries and expenses. If the board of county commissioners determines that the amount of a special assessment levied upon a property owner pursuant to

this section when combined with the amount of all other taxes and assessments levied upon the property owner is less than the cost of collecting the special assessment levied pursuant to this subsection, the board of county commissioners may exempt the property owner from the assessment and appropriate money from the general fund of the county to pay the cost of the assessment.

- 3. Except as otherwise provided in subsection 2, in designated areas within which the use of groundwater is predominantly for agricultural purposes, any special assessment levied pursuant to this section must be charged against each water user who has a permit to appropriate water or a perfected water right, and the charge against each water user must be based upon the proportion which his or her water right bears to the aggregate water rights in the designated area. The minimum charge is \$1.
- 4. The salaries and expenses may be paid by the State Engineer from the Water Distribution Revolving Account pending the levy and collection of an assessment levied pursuant to this section.
- 5. Except as otherwise provided in subsection 2, if a special assessment is levied pursuant to this section, the proper officers of the county shall levy and collect the special assessment as other special assessments are levied and collected, and the assessment is a lien upon the property.
- 6. Any special assessment collected pursuant to this section must be deposited with the State Treasurer for credit to the Water District Account to be accounted for in basin well accounts.
- 7. [Upon determination and certification by the State Engineer of the amount to be budgeted for the current or ensuing fiscal year for the purpose of paying the per diem and travel allowances of the groundwater board and employing consultants or other help needed to fulfill its responsibilities, the State Controller shall transfer that amount to a separate operating account for that fiscal year for the groundwater basin. Claims against the account must be approved by the groundwater board and paid as other claims against the State are paid.] The State Engineer may use money in a particular basin well account to support an activity outside the basin in which the money is collected if the activity bears a direct relationship to the responsibilities or activities of the State Engineer regarding the particular groundwater basin.
 - Sec. 3. This act becomes effective on July 1, 2023.

Senator Pazina moved that the Senate not concur in Assembly Amendment No. 707 to Senate Bill No. 180.

Motion carried.

Bill ordered transmitted to the Assembly.

Senator Lange moved that the Senate recess subject to the call of the Chair. Motion carried.

Senate in recess at 5:50 p.m.

SENATE IN SESSION

At 11:13 p.m.

President Anthony presiding.

Quorum present.

REPORTS OF COMMITTEE

Mr. President:

Your Committee on Finance, to which were referred Assembly Bills Nos. 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 485, 486, 492, 493, 495, 496, 500, 502, 504, 505, 508, 509, 510, 511, 512, has had the same under consideration, and begs leave to report the same back with the recommendation: Do pass.

Also, your Committee on Finance, to which was referred Senate Bill No. 490, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

Also, your Committee on Finance, to which was re-referred Senate Bill No. 221, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

MARILYN DONDERO LOOP, Chair

Mr. President:

Your Committee on Health and Human Services, to which was referred Assembly Bill No. 156, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

FABIAN DOÑATE, Chair

MOTIONS, RESOLUTIONS AND NOTICES

Senator Cannizzaro moved that Senate Resolution No. 8 be taken from its position on the Resolution File and placed on the Resolution File for the next legislative day.

Motion carried.

Senator Cannizzaro moved that Assembly Bills Nos. 41, 140, 195, 203, 232, 260, 270, 277, 299, 304, 345, 389, 443, 448, 457, 461, 462 and 503 be taken from their positions on the General File and placed on the General File for the next legislative day.

Motion carried.

GENERAL FILE AND THIRD READING

Assembly Bill No. 46.

Bill read third time.

Remarks by Senator Goicoechea.

Assembly Bill No. 46 transfers responsibility for the installation, interpretation, maintenance and protection of historical markers from the Office of Historic Preservation to the Division of State Parks of the State Department of Conservation and Natural Resources.

Now, State Parks will take care of those historical markers.

Roll call on Assembly Bill No. 46:

YEAS-19.

NAYS-None.

EXCUSED—Harris, Titus—2.

Assembly Bill No. 46 having received a constitutional majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

Assembly Bill No. 112.

Remarks by Senator Pazina.

Assembly Bill No. 112 creates the Wildlife Crossings Account in the State General Fund and appropriates \$5 million from the State General Fund to the Account, improving permeability for wildlife, producing wildlife vehicle commissions and enhancing wildlife connectivity.

Roll call on Assembly Bill No. 112:

YEAS—19.

NAYS-None.

EXCUSED—Harris, Titus—2.

Assembly Bill No. 112 having received a constitutional majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

Assembly Bill No. 130.

Bill read third time.

Remarks by Senator Dondero Loop.

Assembly Bill No. 130 revises provisions relating to assisted living facilities.

Roll call on Assembly Bill No. 130:

YEAS—19.

NAYS-None.

EXCUSED—Harris, Titus—2.

Assembly Bill No. 130 having received a constitutional majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

Assembly Bill No. 135.

Bill read third time.

Remarks by Senator Nguyen.

Assembly Bill No. 135 requires the Nevada Housing Crisis Response System of the Department of Health and Human Services to collaborate with the Department of Motor Vehicles to assist a person who is transient or at imminent risk of homelessness.

Roll call on Assembly Bill No. 135:

YEAS—19.

NAYS-None.

EXCUSED—Harris, Titus—2.

Assembly Bill No. 135 having received a constitutional majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

Assembly Bill No. 151.

Bill read third time.

Remarks by Senator Hammond.

Assembly Bill No. 151 requires the Department of Motor Vehicles in cooperation with the University of Nevada, Reno (UNR), to design, prepare and issue special license plates commemorating the 150th anniversary of the founding of the university. The special license plate shall be issued for a limited time and fees from the sale of the special license plates will fund the operation of a UNR Foundation program to provide certain necessary items to students, faculty and staff of UNR.

Roll call on Assembly Bill No. 151:

YEAS—20.

NAYS-None.

EXCUSED—Titus.

Assembly Bill No. 151 having received a two-thirds majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

Assembly Bill No. 153.

Bill read third time.

Remarks by Senator Lange.

Assembly Bill No. 153 establishes the profession and practice of naprapathy.

Roll call on Assembly Bill No. 153:

YEAS—20.

NAYS-None.

EXCUSED—Titus.

Assembly Bill No. 153 having received a two-thirds majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

Assembly Bill No. 161.

Bill read third time.

Remarks by Senator Spearman.

Assembly Bill No. 161 authorizes the Department of Motor Vehicles to place a special designation on a vehicle registration and driver's license for those who have limited communication skills.

Roll call on Assembly Bill No. 161:

YEAS—20.

NAYS-None.

EXCUSED—Titus.

Assembly Bill No. 161 having received a constitutional majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

Assembly Bill No. 184.

Bill read third time.

Remarks by Senators Pazina and Hansen.

SENATOR PAZINA:

Assembly Bill No. 184 creates the Clean Trucks and Buses Incentive Program and the Account for Clean Trucks and Buses administered by the Division of Environmental Protection of the State Department of Conservation and Natural Resources.

SENATOR HANSEN:

I support Assembly Bill No. 184 and want everybody to vote for it. But, I am actually going to vote "no," and I will explain why. Here is why I want you to vote for it: There are millions of federal dollars coming to the State of Nevada with the passage of this bill. However, when we separate the dollars from the policy, it is important to understand the first thing that came to light is that if we pass this and it becomes a regular practice in the State, you are going to expand the number of trucks on the highways by a factor of three. In other words, the amount of cargo that one current diesel truck will be able to haul, you are going to need three of the electric vehicles to haul the same amount. The amount of damage that will do to our roadways and the amount of increased traffic this will cause is enormous. The other thing that came up, and this came up in several hearings during the session, and that is we are almost at maximum capacity for electrical generation now. The amount of additional electricity that we are going to need to produce to keep all these vehicles on the roads is something that we need to talk about policy-wise. The other thing that was not addressed is in looking at some of the statics, we are creating more carbon dioxide through the use of fossil fuels to produce these vehicles than the savings will be over time from the use of the electrical vehicles.

Another item is that we take these vehicles we are currently using, the diesel- and gasoline-engine trucks, we simply then sell those to other states or countries. The vehicles that were used in California are now disproportionately being used in Mexico. If the goal is to reduce the amount of pollution these vehicles cause, all we are doing is, in fact, shifting where the pollution is occurring. This is all the same atmosphere whether it is above Mexico, Utah or here; we still have the exact same problem.

The other issue, the amount of lithium and cobalt we have to produce to make these new batteries, no one has addressed that. Also, the biggest one, in my opinion, we have not addressed the taxation that we need for electric vehicles. We do not have an electrical vehicle tax. If we are going to seriously switch a huge portion of the vehicles on our roadways to electric vehicles and not have some mechanism to help pay for those, how is that going to work in the long run. We already have a decreasing amount of money in our highway funds.

Last but not least, going back to the issue—because this is a federal-based carrot on a stick making us do policies that in the absence of federal dollars, we would not take. The real purpose, of course, is to reduce the amount of carbon dioxide in the atmosphere. As I pointed out earlier, and I will remind us again: Since 2004, the United States has cut back the amount of carbon dioxide by 400 million metric tons. But in that same window of time, China has produced 2,000 million metric tons more. In other words, that is five times the amount that we have cut back that they are producing. They have produced in the last few years 1,200 coal-fired plants. The last coal-fired plant is in my district in Valmy, and that is scheduled to go offline in 2025. So, despite all these efforts and all these billions of dollars we are going to save, if the real purpose is to reduce the amount of carbon dioxide in the atmosphere, it is an incredible, miserable failure.

While I know it is late, we are talking about billions and billions of dollars. When you look at the big picture and you realize this is one giant swindle, where we have been told for 30 years that China is doing a switch to a green-energy economy and form of energy production while at the same time building 1,200 more power plants fired by coal, this is probably the biggest swindle in the history of mankind. The more they tell us these sorts of things, the more foolish we look as we hamstring our own industries while their industries are literally taking over the world as we speak.

So, I am sorry it is late; I know everybody just wants to go home, but when you are talking billions of dollars and the effect it will have in Nevada in the future, we need to look at the policy side of this bill. I am voting "no." Everybody else vote "yes." I am serious.

Roll call on Assembly Bill No. 184:

YEAS—18.

NAYS—Buck, Hansen—2.

EXCUSED—Titus.

Assembly Bill No. 184 having received a constitutional majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

Assembly Bill No. 226.

Bill read third time.

Remarks by Senator Doñate.

Assembly Bill No. 226 helps Deferred Action for Childhood Arrival recipients get access to in-state tuition.

Roll call on Assembly Bill No. 226:

YEAS-20.

NAYS-None.

EXCUSED—Titus.

Assembly Bill No. 226 having received a constitutional majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

MOTIONS, RESOLUTIONS AND NOTICES

Senator Lange moved that the action whereby Assembly Bill No. 270 was moved from the General File to the General File, next legislative day, be rescinded and that the bill be placed back on the General File.

Motion carried.

GENERAL FILE AND THIRD READING

Assembly Bill No. 270.

Bill read third time.

Remarks by Senators Hammond and Seevers Gansert.

SENATOR HAMMOND:

Assembly Bill No. 270 provides for the licensure and regulation of anesthesiologist assistants by the Board of Medical Examiners and State Board of Osteopathic Medicine. The bill includes procedures for regulating the practice of anesthesiologist assistants and for imposing discipline for violations of the governing statutes and regulations.

SENATOR SEEVERS GANSERT:

I am excited we can vote on this today. We have with us in the gallery Dr. Jerry Matsumura, who first started working on this bill in 2015. He was here 2015, 2017, and there were different iterations. There has been a shortage of anesthesiologists for quite a while, and this will allow a midlevel provider to be added to help anesthesiologists serve more people so that we do not have to delay certain surgeries and different types of procedures. So, I urge your support.

Roll call on Assembly Bill No. 270:

YEAS—20.

NAYS-None.

EXCUSED—Titus.

Assembly Bill No. 270 having received a two-thirds majority, Mr. President declared it passed.

Bill ordered transmitted to the Assembly.

REPORTS OF COMMITTEE

Mr. President:

Your Committee on Finance, to which was referred Senate Bill No. 511, has had the same under consideration, and begs leave to report the same back with the recommendation: Do pass.

MARILYN DONDERO LOOP. Chair

MESSAGES FROM THE ASSEMBLY

ASSEMBLY CHAMBER, Carson City, June 3, 2023

To the Honorable the Senate:

I have the honor to inform your honorable body that the Assembly on this day passed, as amended, Assembly Bills Nos. 322, 524.

CAROL AIELLO-SALA Assistant Chief Clerk of the Assembly

INTRODUCTION, FIRST READING AND REFERENCE

Assembly Bill No. 322.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 524.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

SECOND READING AND AMENDMENT

Senate Bill No. 490.

Bill read second time.

The following amendment was proposed by the Committee on Finance:

Amendment No. 945.

SUMMARY—Makes appropriations to the Nevada Gaming Control Board relating to information technology. (BDR S-1160)

AN ACT making appropriations to the Nevada Gaming Control Board for the continuation of the replacement of the Board's information technology system and for certain computer hardware, software, subscriptions, licenses and equipment and related employee training; and providing other matters properly relating thereto.

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

- Section 1. There is hereby appropriated from the State General Fund to the Nevada Gaming Control Board the sum of [\$3,575,029] \$8,000,000 for the continuation of the replacement of the Board's information technology system.
- Sec. 1.5. 1. There is hereby appropriated from the State General Fund to the Interim Finance Committee for allocation to the Nevada Gaming

Control Board the sum of \$5,500,000 to pay for the continuation of the replacement of the Board's information technology system.

- 2. Money appropriated by subsection 1 may be allocated to the Nevada Gaming Control Board with the approval of the Interim Finance Committee, upon the recommendation of the Governor and submittal of documentation demonstrating progress towards the replacement of the Nevada Gaming Control Board's information technology system.
- Sec. 2. There is hereby appropriated from the State General Fund to the Nevada Gaming Control Board the sum of \$1,731,841 for the replacement or purchase of computer hardware, software, subscriptions, licenses and equipment and related employee training.
- Sec. 3. Any remaining balance of the appropriations made by sections 1, 1.5 and 2 of this act must not be committed for expenditure after June 30, 2025, by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 19, 2025, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 19, 2025.
 - Sec. 4. This act becomes effective upon passage and approval.

Senator Dondero Loop moved the adoption of the amendment.

Remarks by Senator Dondero Loop.

Amendment No. 945 to Senate Bill No. 490 revises the General Fund appropriation to continue the replacement of the Nevada Gaming Control Board's information technology system in section 1 to \$8 million and adds section 1.5, which appropriates an additional \$5.5 million in General Fund appropriations to the Interim Finance Committee for allocation to the Board upon demonstration of progress towards completion of the information technology system replacement.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 506.

Bill read second time.

The following amendment was proposed by the Committee on Finance:

Amendment No. 932.

SUMMARY—Revises provisions relating to records of criminal history. (BDR 14-1220)

AN ACT relating to records of criminal history; revising provisions relating to certain money collected for certain purposes relating to records of criminal history; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes the Central Repository for Nevada Records of Criminal History to: (1) disseminate compilations of statistical data and publish statistical reports relating to crime; and (2) charge a reasonable fee for any publication or special report it distributes relating to data collected.

Existing law requires the Central Repository to use the money collected for publications or special reports to pay for the cost of operating the Central Repository. (NRS 179A.075) Section 1 of this bill requires that: (1) such money collected must also be used for any other purpose authorized by the Legislature; and (2) any balance of such money remaining at the end of a fiscal year reverts to the State General Fund.

Existing law authorizes an agency of criminal justice to charge a reasonable fee for information relating to records of criminal history provided to any person or governmental entity. Existing law also requires that all money received or collected by the Department of Public Safety for such fees must be used to defray the cost of operating the Central Repository. (NRS 179A.140) Section 2 of this bill requires that: (1) such money must also be used for any other purpose authorized by the Legislature; and (2) any balance of such money remaining at the end of a fiscal year reverts to the State General Fund.

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

Section 1. NRS 179A.075 is hereby amended to read as follows:

- 179A.075 1. The Central Repository for Nevada Records of Criminal History is hereby created within the Records, Communications and Compliance Division of the Department.
- 2. Each agency of criminal justice and any other agency dealing with crime shall:
- (a) Collect and maintain records, reports and compilations of statistical data required by the Department; and
 - (b) Submit the information collected to the Central Repository:
 - (1) In the manner approved by the Director of the Department; and
- (2) In accordance with the policies, procedures and definitions of the Uniform Crime Reporting Program of the Federal Bureau of Investigation.
- 3. Each agency of criminal justice shall submit the information relating to records of criminal history that it creates, issues or collects, and any information in its possession relating to the DNA profile of a person from whom a biological specimen is obtained pursuant to NRS 176.09123 or 176.0913, to the Division. The information must be submitted to the Division:
 - (a) Through an electronic network;
 - (b) On a medium of magnetic storage; or
 - (c) In the manner prescribed by the Director of the Department,
- within 60 days after the date of the disposition of the case. If an agency has submitted a record regarding the arrest of a person who is later determined by the agency not to be the person who committed the particular crime, the agency shall, immediately upon making that determination, so notify the Division. The Division shall delete all references in the Central Repository relating to that particular arrest.

- 4. Each state and local law enforcement agency shall submit Uniform Crime Reports to the Central Repository:
 - (a) In the manner prescribed by the Director of the Department;
- (b) In accordance with the policies, procedures and definitions of the Uniform Crime Reporting Program of the Federal Bureau of Investigation; and
 - (c) Within the time prescribed by the Director of the Department.
- 5. The Division shall, in the manner prescribed by the Director of the Department:
- (a) Collect, maintain and arrange all information submitted to it relating to:
 - (1) Records of criminal history; and
- (2) The DNA profile of a person from whom a biological specimen is obtained pursuant to NRS 176.09123 or 176.0913.
- (b) When practicable, use a record of the personal identifying information of a subject as the basis for any records maintained regarding him or her.
- (c) Upon request, provide, in paper or electronic form, the information that is contained in the Central Repository to the Committee on Domestic Violence appointed pursuant to NRS 228.470 when, pursuant to NRS 228.495, the Committee is reviewing the death of the victim of a crime that constitutes domestic violence pursuant to NRS 33.018.
 - 6. The Division may:
- (a) Disseminate any information which is contained in the Central Repository to any other agency of criminal justice;
- (b) Enter into cooperative agreements with repositories of the United States and other states to facilitate exchanges of information that may be disseminated pursuant to paragraph (a); and
- (c) Request of and receive from the Federal Bureau of Investigation information on the background and personal history of any person whose record of fingerprints or other biometric identifier the Central Repository submits to the Federal Bureau of Investigation and:
- (1) Who has applied to any agency of the State of Nevada or any political subdivision thereof for a license which it has the power to grant or deny;
- (2) With whom any agency of the State of Nevada or any political subdivision thereof intends to enter into a relationship of employment or a contract for personal services;
- (3) Who has applied to any agency of the State of Nevada or any political subdivision thereof to attend an academy for training peace officers approved by the Peace Officers' Standards and Training Commission;
- (4) For whom such information is required or authorized to be obtained pursuant to NRS 62B.270, 62G.223, 62G.353, 424.031, 432A.170, 432B.198, 433B.183, 449.123 and 449.4329; or
- (5) About whom any agency of the State of Nevada or any political subdivision thereof is authorized by law to have accurate personal

information for the protection of the agency or the persons within its jurisdiction.

- 7. To request and receive information from the Federal Bureau of Investigation concerning a person pursuant to subsection 6, the Central Repository must receive:
 - (a) The person's complete set of fingerprints for the purposes of:
 - (1) Booking the person into a city or county jail or detention facility;
 - (2) Employment;
 - (3) Contractual services; or
 - (4) Services related to occupational licensing;
- (b) One or more of the person's fingerprints for the purposes of mobile identification by an agency of criminal justice; or
- (c) Any other biometric identifier of the person as it may require for the purposes of:
 - (1) Arrest; or
 - (2) Criminal investigation,
- → from the agency of criminal justice or agency of the State of Nevada or any political subdivision thereof and submit the received data to the Federal Bureau of Investigation for its report.
 - 8. The Central Repository shall:
- (a) Collect and maintain records, reports and compilations of statistical data submitted by any agency pursuant to subsection 2.
- (b) Tabulate and analyze all records, reports and compilations of statistical data received pursuant to this section.
- (c) Disseminate to federal agencies engaged in the collection of statistical data relating to crime information which is contained in the Central Repository.
 - (d) Investigate the criminal history of any person who:
- (1) Has applied to the Superintendent of Public Instruction for the issuance or renewal of a license;
- (2) Has applied to a county school district, charter school or private school for employment or to serve as a volunteer; or
- (3) Is employed by or volunteers for a county school district, charter school or private school,
- → and immediately notify the superintendent of each county school district, the governing body of each charter school and the Superintendent of Public Instruction, or the administrator of each private school, as appropriate, if the investigation of the Central Repository indicates that the person has been convicted of a violation of NRS 200.508, 201.230, 453.3385 or 453.339, or convicted of a felony or any offense involving moral turpitude.
- (e) Upon discovery, immediately notify the superintendent of each county school district, the governing body of each charter school or the administrator of each private school, as appropriate, by providing the superintendent, governing body or administrator with a list of all persons:
 - (1) Investigated pursuant to paragraph (d); or

- (2) Employed by or volunteering for a county school district, charter school or private school whose fingerprints were sent previously to the Central Repository for investigation,
- who the Central Repository's records indicate have been convicted of a violation of NRS 200.508, 201.230, 453.3385 or 453.339, or convicted of a felony or any offense involving moral turpitude since the Central Repository's initial investigation. The superintendent of each county school district, the governing body of a charter school or the administrator of each private school, as applicable, shall determine whether further investigation or action by the district, charter school or private school, as applicable, is appropriate.
- (f) Investigate the criminal history of each person who submits one or more fingerprints or other biometric identifier or has such data submitted pursuant to NRS 62B.270, 62G.223, 62G.353, 424.031, 432A.170, 432B.198, 433B.183, 449.122, 449.123 or 449.4329.
- (g) Provide an electronic means to access on the Central Repository's Internet website statistical data relating to crime.
- (h) Provide an electronic means to access on the Central Repository's Internet website statistical data about domestic violence in this State.
- (i) Identify and review the collection and processing of statistical data relating to criminal justice by any agency identified in subsection 2 and make recommendations for any necessary changes in the manner of collecting and processing statistical data by any such agency.
- (j) Adopt regulations governing biometric identifiers and the information and data derived from biometric identifiers, including, without limitation:
- (1) Their collection, use, safeguarding, handling, retention, storage, dissemination and destruction; and
- (2) The methods by which a person may request the removal of his or her biometric identifiers from the Central Repository and any other agency where his or her biometric identifiers have been stored.
 - 9. The Central Repository may:
- (a) In the manner prescribed by the Director of the Department, disseminate compilations of statistical data and publish statistical reports relating to crime.
- (b) Charge a reasonable fee for any publication or special report it distributes relating to data collected pursuant to this section. The Central Repository may not collect such a fee from an agency of criminal justice or any other agency dealing with crime which is required to submit information pursuant to subsection 2. All money collected pursuant to this paragraph must be used to pay for the cost of operating the Central Repository [.] or for any other purpose authorized by the Legislature, and any balance of the money remaining at the end of a fiscal year reverts to the State General Fund.
- (c) In the manner prescribed by the Director of the Department, use electronic means to receive and disseminate information contained in the

Central Repository that it is authorized to disseminate pursuant to the provisions of this chapter.

- 10. As used in this section:
- (a) "Mobile identification" means the collection, storage, transmission, reception, search, access or processing of a biometric identifier using a handheld device.
- (b) "Personal identifying information" means any information designed, commonly used or capable of being used, alone or in conjunction with any other information, to identify a person, including, without limitation:
- (1) The name, driver's license number, social security number, date of birth and photograph or computer-generated image of a person; and
 - (2) A biometric identifier of a person.
 - (c) "Private school" has the meaning ascribed to it in NRS 394.103.
 - Sec. 2. NRS 179A.140 is hereby amended to read as follows:
- 179A.140 1. Except as otherwise provided in this section, an agency of criminal justice may charge a reasonable fee for information relating to records of criminal history provided to any person or governmental entity.
- 2. An agency of criminal justice shall not charge a fee for providing such information to another agency of criminal justice if the information is provided for purposes of the administration of criminal justice.
 - 3. The Central Repository shall not charge such a fee:
- (a) For information relating to a person regarding whom the Central Repository provided a similar report within the immediately preceding 90 days in conjunction with the application by that person for professional licensure:
- (b) For information provided to any organization that meets the criteria established by regulation pursuant to paragraph (b) of subsection 5 of NRS 179A.310; or
- (c) For information provided to a person who is required to conduct a background check pursuant to NRS 202.2547.
- 4. The Director may request an allocation from the Contingency Account pursuant to NRS 353.266, 353.268 and 353.269 to cover the costs incurred by the Department to carry out the provisions of paragraph (b) of subsection 3.
- 5. All money received or collected by the Department pursuant to this section must be used to defray the cost of operating the Central Repository [.] or for any other purpose authorized by the Legislature, and any balance of the money remaining at the end of a fiscal year reverts to the State General Fund.
 - Sec. 3. This act becomes effective on [July 1, 2023.] October 1, 2024. Senator Dondero Loop moved the adoption of the amendment. Remarks by Senator Dondero Loop.

Amendment No. 932 to Senate Bill No. 506 changes the effective date to October 1, 2024, from July 1, 2023.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Assembly Bill No. 72.

Bill read second time.

The following amendment was proposed by the Committee on Education:

Amendment No. 931.

SUMMARY—Creates the Advisory Committee on the Safety and Well-Being of Public School Staff. (BDR 34-442)

AN ACT relating to education; creating the Advisory Committee on the Safety and Well-Being of Public School Staff; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law establishes various requirements governing educational personnel, including requirements governing the licensing, qualifications, employment, powers, duties, supervision and evaluation of such personnel. (Chapter 391 of NRS) Section 3 of this bill creates the Advisory Committee on the Safety and Well-Being of Public School Staff, and section 2 of this bill defines the term "Advisory Committee" to refer to that Advisory Committee. Section 3 prescribes the membership of the Advisory Committee and establishes procedures governing the operation of the Advisory Committee. Section 4 of this bill requires the Advisory Committee, on or before June 30, 2025, to review, investigate and make recommendations concerning: (1) any issue relating to the safety and well-being of public school staff, including provisions of law or regulations that affect the safety and well-being of public school staff; and (2) the consistent implementation of discipline of pupils.

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

- Section 1. Chapter 391 of NRS is hereby amended by adding thereto the provisions set forth as sections 2, 3 and 4 of this act.
- Sec. 2. As used in sections 3 and 4 of this act, unless the context otherwise requires, "Advisory Committee" means the Advisory Committee on the Safety and Well-Being of Public School Staff created by section 3 of this act.
- Sec. 3. 1. The Advisory Committee on the Safety and Well-Being of Public School Staff is hereby created within the Department.
 - 2. The Advisory Committee consists of the following members:
- (a) Five members appointed by the Governor who are licensed pursuant to this chapter and employed by a school district in this State, at least four of whom must teach in the classroom:
- (b) Three members appointed by the Majority Leader of the Senate, as follows:
 - (1) One member of the Senate;

- (2) One education support professional who is employed by a school district in this State and works primarily at a single public school; and
 - (3) One administrator of an elementary school in this State;
 - (c) Three members appointed by the Speaker of the Assembly, as follows:
 - (1) One member of the Assembly;
- (2) One education support professional who is employed by a school district in this State, works primarily for the school district and is assigned to multiple public schools; and
 - (3) One administrator of a high school in this State; and
 - (d) The following ex officio members:
 - (1) The Superintendent of Public Instruction or his or her designee; and
- (2) The Director of the Office for a Safe and Respectful Learning Environment appointed pursuant to NRS 388.1323.
- 3. [After the initial terms, each member appointed pursuant to paragraph (a), (b) or (c) of subsection 2 serves for a term of 3 years and continues in office until his or her successor is appointed. Members may be reappointed for additional terms of 3 years in the same manner as the original appointments.] Any vacancy occurring in the membership of the Advisory Committee must be filled [for the remainder of the unexpired term] in the same manner as the original appointment.
- 4. Any legislative member of the Advisory Committee who is not a candidate for reelection or who is defeated for reelection continues to serve after the general election. [until the next regular or special session of the Legislature convenes.]
- 5. A majority of the members of the Advisory Committee 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 Advisory Committee.
- 6. At its first meeting_, [and annually thereafter,] the Advisory Committee shall elect a Chair from among its members . [who shall serve until the next Chair is elected.]
- 7. The Advisory Committee shall meet at least once in the first calendar year after its creation and thereafter at the call of the Chair as frequently as is required to perform its duties.
- 8. The members of the Advisory Committee serve without compensation and are not entitled to the per diem and travel expenses provided for state officers and employees generally.
- 9. Any member of the Advisory Committee 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 so that he or she may prepare for and attend meetings of the Advisory Committee and perform any work necessary to carry out the duties of the Advisory Committee 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 Advisory Committee to:

- (a) Make up the time the member is absent from work to carry out his or her duties as a member of the Advisory Committee; or
 - (b) Take annual leave or compensatory time for the absence.
- 10. As used in this section, "education support professional" means a person that is employed by a school district in this State and not required, as a condition of his or her employment, to hold a license issued pursuant to this chapter. The term includes, without limitation, school secretaries, paraprofessionals, custodial staff, food service workers and bus drivers.
- Sec. 4. [The] On or before June 30, 2025, the Advisory Committee shall review, investigate and make recommendations to the Legislature, any offices of this State and any political subdivisions of this State as may be appropriate concerning:
- 1. Any issue relating to the safety and well-being of public school staff, including, without limitation, provisions of law or regulations that affect the safety and well-being of public school staff; and
 - 2. The consistent implementation of discipline of pupils.
- Sec. 5. [1. Notwithstanding any other provision of this act, as soon as is practicable after July 1, 2023:
- (a) The Governor shall appoint to the Advisory Committee:
- (1) Two of the members described in paragraph (a) of subsection 2 of section 3 of this act to terms that expire on July 1, 2024;
- (2) One of the members described in paragraph (a) of subsection 2 of section 3 of this act to a term that expires on July 1, 2025; and
- (3) Two of the members described in paragraph (a) of subsection 2 of section 3 of this act to terms that expire on July 1, 2026.
- (b) The Majority Leader of the Senate shall appoint to the Advisory Committee the members described in paragraph (b) of subsection 2 of section 3 of this act to terms that expire on July 1, 2025.
- (e) The Speaker of the Assembly shall appoint to the Advisory Committee:
- (1) The member described in subparagraph (1) of paragraph (c) of subsection 2 of section 3 of this act to a term that expires on July 1, 2024; and
- (2) The members described in subparagraphs (2) and (3) of paragraph (e) of subsection 2 of section 3 of this act to terms that expire on July 1, 2026.
- 2. As used in this section, "Advisory Committee" means the Advisory Committee on the Safety and Well-Being of Public School Staff created by section 3 of this act.] (Deleted by amendment.)
- Sec. 6. This act becomes effective on July 1, 2023 [...], and expires by limitation on June 30, 2025.

Senator Lange moved the adoption of the amendment.

Remarks by Senator Lange.

Amendment No. 931 to Assembly Bill No. 72 includes a two-year sunset provision.

Amendment adopted.

Bill ordered reprinted, re-engrossed and to third reading.

Assembly Bill No. 148.

Bill read second time.

The following amendment was proposed by the Committee on Judiciary:

Amendment No. 921.

SUMMARY—Revises provisions relating to child welfare. (BDR [11-671)] 4-671)

AN ACT relating to child welfare; [prescribing qualifications for magistrates who make certain determinations concerning child custody;] providing for the appointment of a guardian ad litem for an incapacitated parent or other person responsible for the welfare of a child in certain child welfare proceedings; [revising the titles of certain officials appointed to oversee proceedings concerning juveniles and child support;] prescribing the procedure for the judicial review of the placement of a child who is in the custody of an agency which provides child welfare services in a qualified residential treatment program; revising the procedures governing the court-ordered admission of such a child who has an emotional disturbance to certain psychiatric facilities and the release of such a child from such a facility; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires a court to follow certain procedures concerning how to determine custody when a magistrate determines probable cause exists that a party to the custody proceeding has committed an act of abduction against a child. (NRS 125C.0035, 125C.240, 432B.159) Sections 2, 3 and 44 of this bill require the magistrate who makes such a determination to be a magistrate who has the power to issue a criminal arrest warrant.]

Upon the filing of a petition that a child is in need of protection, existing law requires the appointment of a guardian ad litem to represent and protect the best interests of the child during the child welfare proceedings. (NRS 432B.500) Sections 32 and 33 of this bill prescribe a procedure for the appointment of a guardian ad litem to represent the best interests of a parent or other person responsible for the welfare of a child who is incapacitated during a child welfare proceeding. Section 34 of this bill requires a guardian ad litem appointed for a parent or other person responsible for the welfare of a child to act in the best interests of the parent or other person after considering the wishes of the parent or other person. Section 34 additionally: (1) provides that communications between a parent or other person responsible for the welfare of a child and his or her guardian ad litem are privileged; and (2) prohibits a guardian ad litem from taking any action to relinquish parental rights, effectuate a termination of parental rights or consent to a specific adoption on behalf of the person for whom the guardian ad litem is appointed.

In general, existing law provides that information maintained by an agency which provides child welfare services is confidential and may only be disclosed under certain circumstances. (NRS 432B.290) Section 46 of this bill authorizes the disclosure of information maintained by an agency which provides child welfare services to the legal guardian of a child appointed pursuant to section 32 under certain circumstances.

[Existing law authorizes, and in certain circumstances, requires a court to appoint a master to preside over child support proceedings. (NRS-3.405, 425.381) Existing law also authorizes a court to appoint a master to preside over certain proceedings concerning juveniles. (NRS-62B.020) Sections 17, 21, 22, 29 and 74 of this bill revise the title of those appointed officials to "child support magistrate" and "juvenile magistrate," respectively, without changing the duties of those positions. Sections 1, 4-7, 12-16, 18, 19, 23-26, 48, 68 and 69 make various changes to conform to the terminology revised by sections 17, 21, 22, 29 and 74. Section 71.5 of this bill provides that the change in the name of an appointed official from "master" to "child support magistrate" must not be construed to require the Division of Welfare and Supportive Services of the Department of Health and Human Services to modify any of the forms generated by the computer systems of the Division for the purpose of changing the term "master" to the term "magistrate."]

Existing law authorizes the placement of a child who is in need of protection in the protective custody of an agency which provides child welfare services under certain circumstances. (NRS 432B.390) If a court finds that such a child is in need of protection, existing law authorizes the court to place the child with certain entities, including a public agency or institution authorized to care for children. (NRS 432B.550) Existing law prescribes procedures governing the placement of a child who is in need of protection and requires such placement to be reviewed semiannually. (NRS 432B.450, 432B.580) Existing law also requires a court overseeing proceedings concerning such a child to hold an annual hearing concerning the permanent placement of the child. (NRS 432B.590) Existing federal law defines "qualified residential treatment program" to mean a program that: (1) provides trauma-informed treatment of children with serious emotional or behavioral disorders or disturbances; (2) has clinical staff available 24 hours a day and 7 days a week; and (3) meets certain other requirements. (42 U.S.C. § 672(k)(4)) Section 31 of this bill adopts that federal definition, and section 43 of this bill makes a conforming change to indicate the proper placement of section 31 in the Nevada Revised Statutes. Section 52 of this bill makes a conforming change to remove a definition of the term "qualified residential treatment program" that duplicates the definition prescribed in section 31. Sections 35, 50 and 51 of this bill require a court to review the appropriateness of the placement of a child who is in the custody of an agency which provides child welfare services in a qualified residential treatment program: (1) not later than 60 days after the beginning of the placement; (2) as part of each semiannual review concerning the temporary

placement of the child; and (3) at each annual hearing concerning the permanent placement of the child. Sections 20, 45 , 47 and [47-49] 49 of this bill make conforming changes to indicate the proper placement of sections 32-35 in the Nevada Revised Statutes.

Existing law prescribes the procedure for: (1) placing a person who is in a mental health crisis on a mental health crisis hold for assessment, evaluation, intervention and treatment at a hospital or mental health facility; (2) the emergency admission of such a person to a mental health facility; and (3) the involuntary court-ordered admission of such a person to a mental health facility or assisted outpatient treatment. (NRS 433A.145-433A.345) Existing law prescribes a separate procedure for the involuntary court-ordered admission of a child with an emotional disturbance who is in the custody of an agency which provides child welfare services to certain psychiatric facilities. (NRS 432B.607-432B.6085) Sections 37-40 and 54-57 of this bill revise the latter procedure to provide separate procedures for: (1) the involuntary court-ordered admission of such a child for nonemergency mental health treatment; and (2) the continuation of the emergency admission of such a child for longer than 5 days. Sections 37, 39, 54 and 56 of this bill authorize a physician, a psychiatrist, a psychologist or an advanced practice registered nurse who possesses certain training to conduct certain examinations in the course of those procedures. Section 70 of this bill makes conforming changes to indicate the applicability of the training requirements for an advanced practice registered nurse.

Sections 38 and 55 of this bill authorize the court to order the nonemergency admission or continued emergency admission, respectively, of a child with an emotional disturbance who is in the custody of an agency which provides child welfare services if the court finds by clear and convincing evidence that the child presents a substantial likelihood of serious harm to himself or herself or others and certain other requirements are met. Section 36 of this bill prescribes the manner in which to determine whether a child presents a substantial likelihood of serious harm to himself or herself or others for those purposes. Sections 41 and 58 of this bill provide for the expiration and renewal of an order for nonemergency mental health treatment or to continue an emergency admission, as applicable. Sections 41 and 58 also authorize the release of a child who has been admitted to a facility under such an order under certain circumstances, and section 75 of this bill repeals: (1) existing provisions governing the release of a child with an emotional disturbance who is in the custody of an agency which provides child welfare services from a facility; and (2) additional provisions of existing law which are duplicative of the provisions of sections 37-40 and 54-57.

Sections 42 and 59 of this bill require a facility to which a child who is in the custody of an agency which provides child welfare services is admitted under an involuntary court-ordered admission or a continued emergency admission to develop a written plan for the continued care or treatment of the child upon discharge from the facility. Sections 53 and 62 of this bill make

conforming changes to indicate the proper placement of sections 35.3-42 in the Nevada Revised Statutes. Sections 27, 28, 60, 61 and 63-67 of this bill make other conforming changes to indicate the continued applicability of certain provisions of existing law to the procedures created by sections 37-40 and 54-57.

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

Section 1. [NRS-125B.200 is hereby amended to read as follows:

- -125B.200 As used in NRS 125B.200 to 125B.300, inclusive, unless the context otherwise requires:
- 1. "Court" includes a referee or [master] magistrate appointed by the
- 2. "Minor child" means a person who is:
- (a) Under the age of 18 years;
- (b) Under the age of 19 years, if the person is enrolled in high school;
- (c) Under a logal disability; or
- (d) Not declared emancipated pursuant to NRS 129.080 to 129.140, inclusive.
- -3. "Obligor parent" means a parent who has been ordered by a court to pay for the support of a minor child.] (Deleted by amendment.)
 - Sec. 2. INRS 125C.0035 is hereby amended to read as follows:
- 125C.0035 1. In any action for determining physical custody of a minor child, the sole consideration of the court is the best interest of the child. If it appears to the court that joint physical custody would be in the best interest of the child, the court may grant physical custody to the parties jointly.
- 2. Preference must not be given to either parent for the sole reason that the parent is the mother or the father of the child-
- 3. The court shall award physical custody in the following order of preference unless in a particular case the best interest of the child requires otherwise:
- (a) To both parents jointly pursuant to NRS 125C.0025 or to either parent pursuant to NRS 125C.003. If the court does not enter an order awarding joint physical custody of a child after either parent has applied for joint physical custody, the court shall state in its decision the reason for its denial of the parent's application.
- (b) To a person or persons in whose home the child has been living and where the child has had a wholesome and stable environment.
- (c) To any person related within the fifth degree of consanguinity to the child whom the court finds suitable and able to provide proper care and guidance for the child, regardless of whether the relative resides within this State.
- (d) To any other person or persons whom the court finds suitable and able to provide proper care and guidance for the child.

- -4. In determining the best interest of the child, the court shall consider and set forth its specific findings concerning, among other things:
- (a) The wishes of the child if the child is of sufficient age and capacity to form an intelligent preference as to his or her physical custody.
- (b) Any nomination of a guardian for the child by a parent.
- (c) Which parent is more likely to allow the child to have frequent associations and a continuing relationship with the noncustodial parent.
- (d) The level of conflict between the parents.
- (e) The ability of the parents to cooperate to meet the needs of the child.
- (f) The mental and physical health of the parents.
- (g) The physical, developmental and emotional needs of the child.
- (h) The nature of the relationship of the child with each parent.
- (i) The ability of the child to maintain a relationship with any sibling.
- (j) Any history of parental abuse or neglect of the child or a sibling of the child.
- (k) Whether either parent or any other person seeking physical custody has engaged in an act of domestic violence against the child, a parent of the child or any other person residing with the child.
- —(1) Whether either parent or any other person seeking physical custody has committed any act of abduction against the child or any other child.
- 5. Except as otherwise provided in subsection 6 or NRS 125C.210, a determination by the court after an evidentiary hearing and finding by clear and convincing evidence that either parent or any other person seeking physical custody has engaged in one or more acts of domestic violence against the child, a parent of the child or any other person residing with the child creates a rebuttable presumption that sole or joint physical custody of the child by the perpetrator of the domestic violence is not in the best interest of the child. Upon making such a determination, the court shall set forth:
- (a) Findings of fact that support the determination that one or more acts of domestic violence occurred; and
- (b) Findings that the custody or visitation arrangement ordered by the court adequately protects the child and the parent or other victim of domestic violence who resided with the child.
- 6. If after an evidentiary hearing held pursuant to subsection 5 the court determines that each party has engaged in acts of domestic violence, it shall, if possible, then determine which person was the primary physical aggressor. In determining which party was the primary physical aggressor for the purposes of this section, the court shall consider:
- (a) All prior acts of domestic violence involving either party;
- (b) The relative severity of the injuries, if any, inflicted upon the persons involved in those prior acts of domestic violence;
- (c) The likelihood of future injury:
- (d) Whether, during the prior acts, one of the parties acted in self-defense;
- (e) Any other factors which the court deems relevant to the determination.

- → In such a case, if it is not possible for the court to determine which party is the primary physical aggressor, the presumption created pursuant to subsection 5 applies to both parties. If it is possible for the court to determine which party is the primary physical aggressor, the presumption created pursuant to subsection 5 applies only to the party determined by the court to be the primary physical aggressor.
- 7. A determination by the court after an evidentiary hearing and finding by clear and convincing evidence that either parent or any other person seeking physical custody has committed any act of abduction against the child or any other child creates a rebuttable presumption that sole or joint physical custody or unsupervised visitation of the child by the perpetrator of the abduction is not in the best interest of the child. If the parent or other person seeking physical custody does not rebut the presumption, the court shall not enter an order for sole or joint physical custody or unsupervised visitation of the child by the perpetrator and the court shall set forth:
- (a) Findings of fact that support the determination that one or more acts of abduction occurred; and
- (b) Findings that the custody or visitation arrangement ordered by the court adequately protects the child and the parent or other person from whom the child was abducted.
- 8. For the purposes of subsection 7, any of the following acts constitute conclusive evidence that an act of abduction occurred:
- (a) A conviction of the defendant of any violation of NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct:
- (b) A plea of guilty or nolo contendere by the defendant to any violation of NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct; or
- (e) An admission by the defendant to the court of the facts contained in the charging document alleging a violation of NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct.
- 9. If, after a court enters a final order concerning physical custody of the child, a magistrate determines there is probable cause to believe that an act of abduction has been committed against the child or any other child and that a person who has been awarded sole or joint physical custody or unsupervised visitation of the child has committed the act, the court shall, upon a motion to modify the order concerning physical custody, reconsider the previous order concerning physical custody pursuant to subsections 7 and 8.
- 10. As used in this section:
- (a) "Abduction" means the commission of an act described in NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct.
- (b) "Domestic violence" means the commission of any act described in NRS 33.018.

- (c) "Magistrate" has the meaning ascribed to it in NRS 169.095.] (Deleted by amendment.)
 - Sec. 3. [NRS 125C.240 is hereby amended to read as follows:
- 125C.240 1. A determination by the court after an evidentiary hearing and finding by clear and convincing evidence that either parent or any other person seeking custody of a child has committed any act of abduction against the child or any other child creates a rebuttable presumption that sole or joint custody or unsupervised visitation of the child by the perpetrator of the abduction is not in the best interest of the child. If the parent or other person seeking custody does not rebut the presumption, the court shall not enter an order for sole or joint custody or unsupervised visitation of the child by the perpetrator and the court shall set forth:
- (a) Findings of fact that support the determination that one or more acts of abduction occurred; and
- (b) Findings that the custody or visitation arrangement ordered by the court adequately protects the child and the parent or other person from whom the child was abducted.
- 2. For purposes of subsection 1, any of the following acts constitute conclusive evidence that an act of abduction occurred:
- (a) A conviction of the defendant of any violation of NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct;
- (b) A plea of guilty or nolo contendere by the defendant to any violation of NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct; or
- (e) An admission by the defendant to the court of the facts contained in the charging document alleging a violation of NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct.
- 3. If, after a court enters a final order concerning custody of the child, a magistrate determines there is probable cause to believe that an act of abduction has been committed against the child or any other child and that a person who has been awarded sole or joint custody or unsupervised visitation of the child has committed the act, the court shall, upon a motion to modify the order concerning custody, reconsider the previous order concerning custody pursuant to subsections 1 and 2.
- 4. As used in this section [, "abduction"]:
- (a) "Abduction" means the commission of an act described in NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct.
- (b) "Magistrate" has the meaning ascribed to it in NRS 169.095.] (Deleted by amendment.)
- Sec. 4. [NRS 126.111 is hereby amended to read as follows:
- 126.111 1. The court shall endeavor to resolve the issues raised in an action pursuant to this chapter by an informal hearing.

- 2. As soon as practicable after an action to declare the existence or nonexistence of the father and child relationship has been brought, an informal hearing must be held. The court may order that the hearing be held before a [master] magistrate appointed by the court or referce. The public shall be barred from the hearing. A record of the proceeding or any portion thereof must be kept if any party requests or the court orders. Strict rules of evidence need not be observed, but those prescribed in NRS 233B.123 apply.
- 3. Upon refusal of any witness, including a party, to testify under oath or produce evidence, the court may order the witness to testify under oath and produce evidence concerning all relevant facts. If the refusal is upon the ground that the witness's testimony or evidence might tend to incriminate the witness, the court may grant the witness immunity from prosecution for all criminal offenses shown in whole or in part by testimony or evidence the witness is required to produce, except for perjury committed in his or her testimony. The refusal of a witness who has been granted immunity to obey an order to testify or produce evidence is a civil contempt of the court.
- 4. Testimony of a physician concerning the medical circumstances of the pregnancy and the condition and characteristics of the child upon birth is not privileged.] (Deleted by amendment.)
 - Sec. 5. INRS 126.121 is hereby amended to read as follows:
- 126.121 1. The court may, and shall upon the motion of a party, order the mother, child, alleged father or any other person so involved to submit to one or more tests for the typing of blood or taking of specimens for genetic identification to be made by a designated person, by qualified physicians or by other qualified persons, under such restrictions and directions as the court or judge deems proper. Whenever such a test is ordered and made, the results of the test must be received in evidence and must be made available to a judge, [master] magistrate appointed by the court or referee conducting a hearing pursuant to NRS 126.111. The results of the test and any sample or specimen taken may be used only for the purposes specified in this chapter. Unless a party files a written objection to the result of a test at least 30 days before the hearing at which the result is to be received in evidence, the result is admissible as evidence of paternity without foundational testimony or other proof of authenticity or accuracy. The order for such a test also may direct that the testimony of the experts and of the persons so examined may be taken by deposition or written interrogatories.
- 2. If any party refuses to submit to or fails to appear for a test ordered pursuant to subsection 1, the court may presume that the result of the test would be adverse to the interests of that party or may enforce its order if the rights of others and the interests of justice so require.
- 3. The court, upon reasonable request by a party, shall order that independent tests for determining paternity be performed by other experts or qualified laboratories.
- 4. In all cases, the court shall determine the number and qualifications of the experts and laboratories.

- 5. As used in this section:
- (a) "Designated person" means a person who is:
- (1) Properly trained to take samples or specimens for tests for the typing of blood and genetic identification; and
- (2) Designated by an enforcing authority to take such samples or specimens.
- (b) "Enforcing authority" means the Division of Welfare and Supportive Services of the Department of Health and Human Services, its designated representative, a district attorney or the Attorney General when acting pursuant to NRS 425.380.1 (Deleted by amendment.)
 - Sec. 6. INRS 126.141 is hereby amended to read as follows:
- 126.141 1. On the basis of the information produced at the pretrial hearing, the judge, [master] magistrate appointed by the court or referee conducting the hearing shall evaluate the probability of determining the existence or nonexistence of the father and child relationship in a trial and whether a judicial declaration of the relationship would be in the best interest of the child. On the basis of the evaluation, an appropriate recommendation for settlement must be made to the parties, which may include any of the following:
- (a) That the action be dismissed with or without prejudice.
- (b) That the matter be compromised by an agreement among the alleged father, the mother and the child, in which the father and child relationship is not determined but in which a defined economic obligation, fully secured by payment or otherwise, is undertaken by the alleged father in favor of the child and, if appropriate, in favor of the mother, subject to approval by the judge, [master] magistrate appointed by the court or referee conducting the hearing. In reviewing the obligation undertaken by the alleged father in a compromise agreement, the judge, [master] magistrate appointed by court or referee conducting the hearing shall consider the best interest of the child, discounted by the improbability, as it appears to him or her, of establishing the alleged father's paternity or nonpaternity of the child in a trial of the action. In the best interest of the child, the court may order that the alleged father's identity be kept confidential. In that case, the court may designate a person or agency to receive from the alleged father and disburse on behalf of the child all amounts paid by the alleged father in fulfillment of obligations imposed on the alleged father.
- (c) That the alleged father voluntarily acknowledge his paternity of the child.
- 2. If the parties accept a recommendation made in accordance with subsection 1, judgment may be entered accordingly.
- 3. If a party refuses to accept a recommendation made under subsection 1 and blood tests or tests for genetic identification have not been taken, the court shall require the parties to submit to blood tests or tests for genetic identification, if practicable. Thereafter the judge, [master] magistrate appointed by the court or referee shall make an appropriate final

recommendation. If a party refuses to accept the final recommendation, the action must be set for trial.

- 4. The guardian ad litem may accept or refuse to accept a recommendation under this section.
- 5. The pretrial hearing may be terminated and the action set for trial if the judge, [master] magistrate appointed by the court or referee conducting the hearing finds unlikely that all parties would accept a recommendation he or she might make under subsection 1 or 3.] (Deleted by amendment.)
 - Sec. 7. [NRS 126.143 is hereby amended to read as follows:
- 126.143 After an action is set for trial pursuant to NRS 126.141, the judge, [master] magistrate appointed by the court or referee shall, upon the motion of a party, issue an order providing for the temporary support of the child pending the resolution of the trial if the judge, [master] magistrate appointed by the court or referee determines that there is clear and convincing evidence that the party against whom the order is issued is the father of the child.] (Deleted by amendment.)
 - Sec. 8. (Deleted by amendment.)
 - Sec. 9. (Deleted by amendment.)
 - Sec. 10. (Deleted by amendment.)
 - Sec. 11. (Deleted by amendment.)
 - Sec. 12. [NRS 129.080 is hereby amended to read as follows:
- -129.080 Any minor who is at least 16 years of age, who is married or living apart from his or her parents or legal guardian, and who is a resident of the county, may petition the juvenile court of that county for a decree of emancipation. The district court may refer the petition to a [master] juvenile magistrate appointed pursuant to title 5 of NRS or chapter 432B of NRS.] (Deleted by amendment.)
 - Sec. 13. [NRS 130.102 is hereby amended to read as follows:
- 130.102 1. The district court and, within the limitations of authority granted pursuant to NRS 3.405, 125.005 or 425.381 to 425.3852, inclusive, a [master] child support magistrate or referee appointed pursuant to any of those sections, are the tribunals of this State.
- 2. The support enforcement agency of this State may include, without limitation, a court, a district attorney, a law enforcement agency or the Division of Welfare and Supportive Services of the Department of Health and Human Services.] (Deleted by amendment.)
 - Sec. 14. [NRS 3.025 is hereby amended to read as follows:
- 3.025 1. In each judicial district that includes a county whose population is 100,000 or more, the district judges of that judicial district shall choose from among those district judges a Chief Judge who is to be the presiding judge of the judicial district.
- 2 The Chief Judge shall:
- -(a) Assign cases to each judge in the judicial district:
- (b) Prescribe the hours of court:

- (c) Adopt such other rules or regulations as are necessary for the orderly conduct of court business; and
- —(d) Perform all other duties of the Chief Judge or of a presiding judge that are set forth in this chapter and any other provision of NRS.
- 3. If a case involves a matter within the jurisdiction of the family court end:
- (a) The parties to the case are also the parties in any other pending case or were the parties in any other previously decided case assigned to a department of the family court in the judicial district; or
- (b) A child involved in the case is also involved in any other pending case or was involved in any other previously decided case assigned to a department of the family court in the judicial district, other than a case within the jurisdiction of the juvenile court pursuant to title 5 of NRS.
- to which the other case is presently assigned or, if the other case has been decided, to the department of the family court that decided the other case, unless a different assignment is required by another provision of NRS, a court rule or the Revised Nevada Code of Judicial Conduct or the Chief Judge determines that a different assignment is necessary because of considerations related to the management of the caseload of the district judges within the judicial district. If a case described in this subsection is heard initially by a [master,] magistrate appointed by the court, the recommendation, report or order of the [master] magistrate must be submitted to the district judge of the department of the family court to which the case has been assigned pursuant to this subsection for consideration and decision by that district judge.] (Deleted by amendment.)
 - Sec. 15. [NRS 3.026 is hereby amended to read as follows:
- -3.026 1. In each judicial district that includes a county whose population is 100,000 or more, in addition to the other duties set forth in NPS 3.025.
- (a) The Chief Judge shall ensure that:
- (1) The procedures which govern the consideration and disposition of cases and other proceedings within the jurisdiction of the district court are applied as uniformly as practicable; and
- (2) Cases and other proceedings within the jurisdiction of the district court are considered and decided in a timely manner.
- (b) Except as otherwise provided in subsection 2, the Chief Judge shall establish procedures for addressing grievances that are:
- (1) Submitted to the Chief Judge by a party in a case or other proceeding within the jurisdiction of the district court; and
- (2) Directly related to the administration of the case or other proceeding.
- 2. For the purposes of paragraph (b) of subsection 1, a party in a case or other proceeding within the jurisdiction of the district court may not submit to the Chief Judge a grievance that:

- (a) Addresses, in whole or in part, the merits of the ease or other proceeding; or
- (b) Challenges, in whole or in part, the merits of any decision or ruling in the case or other proceeding that is made by:
 - (1) The district court; or
- (2) A [master] magistrate appointed by the court or other person who is acting pursuant to an order of the district court or pursuant to any authority that is granted to the [master] magistrate or other person by a specific statute, including, without limitation, NRS 3.405, 3.475 and 3.500.] (Deleted by amendment.)
 - Sec. 16. [NRS 3.2201 is hereby amended to read as follows:
- 3.2201 1. The district court has exclusive jurisdiction to accept an application for, to consider an application for, and to issue or deny the issuance of any of the following orders when the adverse party against whom the order is sought is a child who is under 18 years of age:
- (a) A temporary or extended order for protection against domestic violence pursuant to NRS 33.017 to 33.100, inclusive.
- —(b) A temporary or extended order for protection against harassment in the workplace pursuant to NRS 33,200 to 33,360, inclusive.
- (c) An emergency or extended order for protection against high-risk behavior pursuant to NRS 33.500 to 33.670, inclusive.
- (d) A temporary or extended order for protection against sexual assault pursuant to NRS 200.378.
- (e) A temporary or extended order for protection against stalking, aggravated stalking or harassment pursuant to NRS 200.591.
- 2. The district court shall appoint counsel for a child who is the adverse party against whom an order listed in subsection 1 is sought upon:
- (a) The issuance of any emergency or temporary order listed in subsection 1: or
- (b) Notice of an adversarial hearing on an application for an order listed in subsection 1.
- -3. If the district court issues an order listed in subsection 1, the order must be served upon:
- (a) The child who is the adverse party; and
- —(b) The parent or guardian of the child.
- 4. The juvenile court has exclusive jurisdiction over any action in which it is alleged that a child who is the adverse party in an order listed in subsection 1 has committed a delinquent act by violating a condition set forth in the order.
- 5. If the district court issues an order listed in subsection 1 and the adverse party reaches the age of 18 years while the order is still in effect, the order remains effective against the adverse party until the order expires or is dissolved by the district court.
- -6. The district court shall automatically seal all records related to the application for, consideration of and issuance of an order listed in

subsection 1 as provided in NRS 62H.140 upon the dissolution or expiration of the order or when the adverse party reaches the age of 18 years, whichever is earlier, unless, at such a time, the order is still in effect, in which ease the records must be automatically sealed by the district court upon the expiration or dissolution of the order.

- -7. A district court may appoint a [master] magistrate to conduct the proceedings described in this section.] (Deleted by amendment.)
 - Sec. 17. [NRS 3.405 is hereby amended to read as follows:
- 3.405 1. In an action to establish paternity, the court may appoint a [master] magistrate, who may be the juvenile magistrate appointed pursuant to NRS 62B.020, the child support magistrate appointed pursuant to NRS 425.381 or another magistrate appointed as authorized by law, to take testimony and recommend orders.
- 2. The court may appoint a [master] child support magistrate, as provided by NRS 425.381, to hear all cases in a county to establish or enforce an obligation for the support of a child, or to modify or adjust an order for the support of a child pursuant to NRS 125B.145.
- 3. The [master] child support magistrate must be an attorney licensed to practice in this State. The [master:] child support magistrate:
- (a) Shall take testimony and establish a record:
- (b) In complex cases shall issue temporary orders for support pending resolution of the case:
- (e) Shall make findings of fact, conclusions of law and recommendations for the establishment and enforcement of an order;
- —(d) May accept voluntary acknowledgments of paternity or liability for support and stipulated agreements setting the amount of support;
- (e) May, subject to confirmation by the district court, enter default orders against a responsible parent who does not respond to a notice or service within the required time; and
- (f) Has any other power or duty contained in the order of reference issued by the court.
- → If a temporary order for support is issued pursuant to paragraph (b), the [master] child support magistrate shall order that the support be paid to the Division of Welfare and Supportive Services of the Department of Health and Human Services, its designated representative or the district attorney, if the Division of Welfare and Supportive Services or district attorney is involved in the case, or otherwise to an appropriate party to the action, pending resolution of the case.
- 4. The findings of fact, conclusions of law and recommendations of the [master] child support magistrate must be furnished to each party or the party's attorney at the conclusion of the proceeding or as soon thereafter as possible. Within 10 days after receipt of the findings of fact, conclusions of law and recommendations, either party may file with the court and serve upon the other party written objections to the report. If no objection is filed, the court shall accept the findings of fact, unless clearly erroneous, and the

judgment may be entered thereon. If an objection is filed within the 10 day period, the court shall review the matter upon notice and motion.] (Deleted by amendment.)

- Sec. 18. [NRS 3.475 is hereby amended to read as follows:
- 3.475 1. In a county whose population is 700,000 or more, the district court shall establish by rule approved by the Supreme Court a program of mandatory mediation in cases that involve the custody or visitation of a child.
- 2. The program must:
- (a) Require the impartial mediation of the issues of custody and visitation and authorize the impartial mediation of any other nonfinancial issue deemed appropriate by the court.
- —(b) Authorize the court to exclude a case from the program for good cause shown, including, but not limited to, a showing that:
- (1) There is a history of child abuse or domestic violence by one of the parties;
- (2) The parties are currently participating in private mediation; or
- (3) One of the parties resides outside of the jurisdiction of the court.
- (c) Provide standards for the training of the mediators assigned to eases, including, but not limited to:
- (1) Minimum educational requirements, which must not be restricted to any particular professional or educational training;
- (2) Minimum requirements for training in the procedural aspects of mediation and the interpersonal skills necessary to act as a mediator:
- (3) A minimum period of apprenticeship for persons who have not previously acted as domestic mediators:
- (4) Minimum requirements for continuing education; and
- (5) Procedures to ensure that potential mediators understand the high standard of ethics and confidentiality related to their participation in the program.
- (d) Prohibit the mediator from reporting to the court any information about the mediation other than whether the dispute was resolved.
- (e) Establish a sliding schedule of fees for participation in the program based on the ability of a party to pay.
- (f) Provide for the acceptance of gifts and grants offered in support of the program.
- (g) Allow the court to refer the parties to a private mediator.
- 3. The costs of the program must be paid from the county general fund. All fees, gifts and grants collected pursuant to this section must be deposited in the county general fund.
- 4. This section does not prohibit a court from referring a financial or other issue to a [special master] magistrate or other person for assistance in resolving the dispute.] (Deleted by amendment.)
- Sec. 19. INRS 3.500 is hereby amended to read as follows:
- = 3.500 1. In a county whose population is 100,000 or more and less than 700,000, the district court shall establish by rule approved by the Supreme

Court a program of mandatory mediation in cases which involve the custody or visitation of a child. A district court in a county whose population is less than 100,000 may establish such a program in the same manner for use in that county. The district courts in two or more counties whose populations are less than 100,000 may establish such a program in the same manner for use in the counties in which the courts are located.

- 2. The program must:
- (a) Require the impartial mediation of the issues of custody and visitation and any other nonfinancial issue deemed appropriate by the court.
- (b) Allow the court to exclude a case from the program for good cause shown, including a showing of a history of child abuse or domestic violence by one of the parties, ongoing private mediation or residency of one of the parties out of the jurisdiction of the court.
- (c) Provide standards for the training of the mediators assigned to eases pursuant to the rule, including but not limited to:
- (1) Minimum educational requirements, which may not be restricted to any particular professional or educational training:
- (2) Minimum requirements for training in the procedural aspects of mediation and the interpersonal skills necessary to act as a mediator:
- (3) A minimum period of apprenticeship for persons who have not previously acted as domestic mediators;
 - (4) Minimum requirements for continuing education; and
- (5) Procedures to ensure that potential mediators understand the high standard of ethics and confidentiality related to their participation in the program.
- (d) Prohibit the mediator from reporting to the court any information about the mediation other than whether the mediation was successful or not.
- (e) Establish a sliding schedule of fees for participation in the program based on the client's ability to pay.
- (f) Provide for the acceptance of gifts and grants offered in support of the program.
- (g) Allow the court to refer the parties to a private mediator for assistance in resolving the issues.
- -3. The costs of the program must be paid from the account for dispute resolution in the county general fund. All fees, gifts and grants collected pursuant to this section must be deposited in the account.
- 4. This section does not prohibit a court from referring a financial or other issue to a [special master] *magistrate* or other person for assistance in resolving the dispute.] (Deleted by amendment.)
 - Sec. 20. NRS 49.295 is hereby amended to read as follows:
- 49.295 1. Except as otherwise provided in subsections 2 and 3 and NRS 49.305:
- (a) A married person cannot be examined as a witness for or against his or her spouse without his or her consent.

- (b) No spouse can be examined, during the marriage or afterwards, without the consent of the other spouse, as to any communication made by one to the other during marriage.
 - 2. The provisions of subsection 1 do not apply to a:
- (a) Civil proceeding brought by or on behalf of one spouse against the other spouse;
- (b) Proceeding to commit or otherwise place a spouse, the property of the spouse or both the spouse and the property of the spouse under the control of another because of the alleged mental or physical condition of the spouse;
- (c) Proceeding brought by or on behalf of a spouse to establish his or her competence:
- (d) Proceeding in the juvenile court or family court pursuant to title 5 of NRS or NRS 432B.410 to 432B.590, inclusive [;], and sections 32 to 35, inclusive, of this act; or
 - (e) Criminal proceeding in which one spouse is charged with:
- (1) A crime against the person or the property of the other spouse or of a child of either, or of a child in the custody or control of either, whether the crime was committed before or during marriage.
 - (2) Bigamy or incest.
- (3) A crime related to abandonment of a child or nonsupport of the other spouse or child.
- 3. The provisions of subsection 1 do not apply in any criminal proceeding to events which took place before the spouses were married.
 - Sec. 21. [NRS 62A.210 is hereby amended to read as follows:
- 62A.210 ["Master of the juvenile court"] "Juvenile magistrate" means a person who is appointed to act as a [master of the] juvenile [court] magistrate of the juvenile court pursuant to NRS 62B.020.] (Deleted by amendment.)
- Sec. 22. [NRS 62B.020 is hereby amended to read as follows:
- 62B.020 1. Except as otherwise provided in this section, the juvenile court or the chief judge of the judicial district may appoint any person to act as a [master of the] juvenile [court] magistrate if the person is qualified by previous experience, training and demonstrated interest in the welfare of children to act as a [master of the] juvenile [court.] magistrate.
- -2. A probation officer shall not act as a [master of the] juvenile [court] magistrate unless the proceeding concerns:
- (a) A minor traffic offense:
- (b) An offense related to tobacco: or
- (c) A child who is alleged to be a habitual truant.
- 3. If a person is appointed to act as a [master of the] juvenile [court,] magistrate, the person shall attend instruction at the National Council of Juvenile and Family Court Judges in Reno, Nevada, in a course designed for the training of new judges of the juvenile court on the first occasion when such instruction is offered after the person is appointed.
- 4. If, for any reason, a [master of the] juvenile [court] magistrate is unable to act, the juvenile court or the chief judge of the judicial district may

appoint another qualified person to act temporarily as a [master of the] juvenile [court] magistrate during the period that the [master] juvenile magistrate who is regularly appointed is unable to act.

- 5. The compensation of a [master of the] juvenile [court:] magistrate:
- (a) May not be taxed against the parties.
- (b) Must be paid out of appropriations made for the expenses of the district court, if the compensation is fixed by the juvenile court.] (Deleted by amendment.)
- Sec. 23. [NRS 62F.350 is hereby amended to read as follows:
- —62F.350—1. The juvenile court may not refer to a juvenile magistrate or master any finding, determination or other act required to be made or performed by the juvenile court pursuant to NRS 62F.320 and 62F.340.
- 2. As used in this section, "master" has the meaning ascribed to it in Rule 53 of the Nevada Rules of Civil Procedure. (Deleted by amendment.)
- Sec. 24. [NRS 247.540 is hereby amended to read as follows:
- 247.540 1. The following persons may request that the personal information described in subsection 1, 2 or 3 of NRS 247.520 that is contained in the records of a county recorder be kept confidential:
- (a) Any justice or judge in this State.
- (b) Any senior justice or senior judge in this State.
- (c) Any court appointed master or magistrate in this State.
- (d) Any clerk of a court, court administrator or court executive officer in this State.
- (e) Any county or city clerk or registrar of voters charged with the powers and duties relating to elections and any deputy appointed by such county or city clerk or registrar of voters in the elections division of the county or city.
- (f) Any district attorney or attorney employed by the district attorney who as part of his or her normal job responsibilities prosecutes persons for:
- (1) Crimes that are punishable as category A felonies; or
- (2) Domestic violence.
- (g) Any state or county public defender who as part of his or her normal iob responsibilities defends persons for:
 - (1) Crimes that are punishable as category A felonies; or
- (2) Domestic violence.
- (h) Any person employed by the Office of the Attorney General who prosecutes or defends actions on behalf of the State of Nevada or any agency in the Executive Department of the State Government.
- (i) Any person, including without limitation, a social worker, employed by this State or a political subdivision of this State who as part of his or her normal job responsibilities:
- (1) Interacts with the public; and
- (2) Performs tasks related to child welfare services or child protective services or tasks that expose the person to comparable dangers.
- -(j) Any county manager in this State.

- (k) Any inspector, officer or investigator employed by this State or a political subdivision of this State designated by his or her employer:
 - (1) Who possesses specialized training in code enforcement;
- (2) Who, as part of his or her normal job responsibilities, interacts with the public; and
- (3) Whose primary duties are the performance of tasks related to code enforcement.
- (1) The spouse, domestic partner or minor child of a person described in paragraphs (a) to (k), inclusive.
- (m) The surviving spouse, domestic partner or minor child of a person described in paragraphs (a) to (k), inclusive, who was killed in the performance of his or her duties.
- (n) Any person for whom a fictitious address has been issued pursuant to NRS 217.462 to 217.471, inclusive.
- 2. Any nonprofit entity in this State that maintains a confidential location for the purpose of providing shelter to victims of domestic violence may request that the personal information described in subsection 4 of NRS 247.520 that is contained in the records of a county recorder be kept confidential.
- 3 As used in this section:
- (a) "Child protective services" has the meaning ascribed to it in NRS/432B-042.
- (b) "Child welfare services" has the meaning ascribed to it in NRS 432R-044.
- (c) "Code enforcement" means the enforcement of laws, ordinances or codes regulating public nuisances or the public health, safety and welfare.
- (d) "Social worker" means any person licensed under chapter 641B of NRS.] (Deleted by amendment.)
 - Sec. 25. [NRS 250.140 is hereby amended to read as follows:
- 250.140 1. The following persons may request that personal information described in subsection 1, 2 or 3 of NRS 250.120 that is contained in the records of a county assessor be kept confidential:
- (a) Any justice or judge in this State.
- (b) Any senior justice or senior judge in this State.
- (c) Any court-appointed master or magistrate in this State.
- (d) Any clerk of a court, court administrator or court executive officer in this State.
- (e) Any county or city clerk or registrar of voters charged with the powers and duties relating to elections and any deputy appointed by such county or city clerk or registrar of voters in the elections division of the county or city.
- —(f) Any peace officer or retired peace officer.
- (g) Any prosecutor.
- -(h) Any state or county public defender.

- (i) Any person employed by the Office of the Attorney General who prosecutes or defends actions on behalf of the State of Nevada or any agency in the Executive Department of the State Government.
- (j) Any person, including without limitation, a social worker, employed by this State or a political subdivision of this State who as part of his or her normal job responsibilities interacts with the public and performs tasks related to child welfare services or child protective services or tasks that expose the person to comparable dangers.
- (k) Any county manager in this State.
- (1) Any inspector, officer or investigator employed by this State or a political subdivision of this State designated by his or her employer who possesses specialized training in code enforcement, interacts with the public and whose primary duties are the performance of tasks related to code enforcement.
- (m) The spouse, domestic partner or minor child of a person described in paragraphs (a) to (l), inclusive.
- (n) The surviving spouse, domestic partner or minor child of a person described in paragraphs (a) to (l), inclusive, who was killed in the performance of his or her duties.
- (o) Any person for whom a fictitious address has been issued pursuant to NRS 217.462 to 217.471, inclusive.
- 2. Any nonprofit entity in this State that maintains a confidential location for the purpose of providing shelter to victims of domestic violence may request that the personal information described in subsection 4 of NRS 250.120 that is contained in the records of a county assessor be kept confidential.
- 3. As used in this section:
- (a) "Child protective services" has the meaning ascribed to it in NRS 432B-042
- (b) "Child welfare services" has the meaning ascribed to it in NRS 432B-044
- (e) "Code enforcement" means the enforcement of laws, ordinances or codes regulating public nuisances or the public health, safety and welfare.
- (d) "Peace officer" means:
- (1) Any person upon whom some or all of the powers of a peace officer are conferred pursuant to NRS 289.150 to 289.360, inclusive; and
 - (2) Any person:
 - (I) Who resides in this State:
 - (II) Whose primary duties are to enforce the law; and
- (III) Who is employed by a law enforcement agency of the Federal Government, including, without limitation, a ranger for the National Park Service and an agent employed by the Federal Bureau of Investigation, Secret Service, United States Department of Homeland Security or United States Department of the Treasury.
- (e) "Prosecutor" has the meaning ascribed to it in NRS 241A.030.

- (f) "Social worker" means any person licensed under chapter 641B of NRS.] (Deleted by amendment.)
 - Sec. 26. [NRS 293.908 is hereby amended to read as follows:
- <u>293.908 1. The following persons may request that personal information contained in the records of the Secretary of State or a county or eity clerk be kept confidential:</u>
- (a) Any justice or judge in this State.
- (b) Any senior justice or senior judge in this State.
- (c) Any court appointed master or magistrate in this State.
- (d) Any clerk of a court, court administrator or court executive officer in this State.
- (e) Any district attorney or attorney employed by the district attorney who as part of his or her normal job responsibilities prosecutes persons for:
 - (1) Crimes that are punishable as category A felonies; or
- (2) Domestic violence.
- (f) Any state or county public defender who as part of his or her normal job responsibilities defends persons for:
- (1) Crimes that are punishable as category A felonies; or
- (2) Domestic violence.
- —(g) Any person employed by the Office of the Attorney General who prosecutes or defends actions on behalf of the State of Nevada or any agency in the Executive Department of the State Government.
- (h) Any person, including without limitation, a social worker, employed by this State or a political subdivision of this State who as part of his or her normal job responsibilities:
 - (1) Interacts with the public; and
- (2) Performs tasks related to child welfare services or child protective services or tasks that expose the person to comparable dangers.
- (i) Any county manager in this State.
- (j) Any inspector, officer or investigator employed by this State or a political subdivision of this State designated by his or her employer:
 - (1) Who possess specialized training in code enforcement:
- (2) Who, as part of his or her normal job responsibilities, interacts with the public; and
- (3) Whose primary duties are the performance of tasks related to code enforcement.
- (k) Any county or city clerk or registrar of voters charged with the powers and duties relating to elections and any deputy appointed by the county or city clerk or registrar of voters in the elections division of the county or city.
- —(1) The spouse, domestic partner or minor child of a person described in paragraphs (a) to (k), inclusive.
- (m) The surviving spouse, domestic partner or minor child of a person described in paragraphs (a) to (k), inclusive, who was killed in the performance of his or her duties.
- 2. As used in this section:

- (a) "Child protective services" has the meaning ascribed to it in NRS 432B-042.
- (b) "Child welfare services" has the meaning ascribed to it in NRS 432B-044.
- (e) "Code enforcement" means the enforcement of laws, ordinances or eodes regulating public nuisances or the public health, safety and welfare.
- (d) "Social worker" means any person licensed under chapter 641B of NRS.] (Deleted by amendment.)
 - Sec. 27. NRS 392.857 is hereby amended to read as follows:
- 392.857 1. If a pupil who is enrolled in a public school, including, without limitation, a university school for profoundly gifted pupils, is admitted by a court to a psychiatric hospital or facility which provides residential treatment for mental illness pursuant to NRS 432B.6076 [-] or section 38 of this act, the public school and, if applicable, the school district in which the pupil is enrolled, must:
- (a) If the pupil is admitted to a psychiatric hospital, participate in the development of a plan for the continued education of the pupil pursuant to NRS 432B.60847 and comply with the provisions of the plan; and
- (b) If an individualized education program has been developed for the pupil, provide the individualized education program to the psychiatric hospital or facility.
- 2. As used in this section, "individualized education program" has the meaning ascribed to it in 20 U.S.C. § 1414(d)(1)(A).
 - Sec. 28. NRS 394.1998 is hereby amended to read as follows:
- 394.1998 1. If a pupil who is enrolled in a private school is admitted by a court to a psychiatric hospital pursuant to NRS 432B.6076 [--] or section 38 of this act, the private school must participate in the development of a plan for the continued education of the pupil pursuant to NRS 432B.60847 and comply with the provisions of the plan.
- 2. If a pupil who is enrolled in a private school is admitted by a court to a psychiatric hospital pursuant to NRS 432B.6076 *or section 38 of this act* and the school district within whose geographic boundaries the private school is located has developed a services plan for the child, the school district must:
- (a) Participate in the development of a plan for the continued education of the pupil pursuant to NRS 432B.60847 and comply with the provisions of the plan; and
 - (b) Provide the services plan to the psychiatric hospital.
- 3. As used in this section, "services plan" has the meaning ascribed to it in 34 C.F.R. § 300.37.
 - Sec. 29. [NRS 425.381 is hereby amended to read as follows:
- 425.381 1. A [master] child support magistrate must be appointed as set forth in this section.
- 2. The district judges of:

- (a) The Family Court of the Second Judicial District shall appoint the [masters] child support magistrates for that District, and shall establish the qualifications and duties of those [masters;] child support magistrates; and
- (b) The Family Court of the Eighth Judicial District shall appoint the [masters] child support magistrates for that District, and shall establish the qualifications and duties of those [masters.] child support magistrates.
- -3. The district judges of the remaining judicial districts shall appoint the [masters] child support magistrates for those districts, and shall establish the qualifications and duties of those [masters.] child support magistrates.
- 4. A [master] *child support magistrate* serves at the pleasure of the district judges who appointed the [master.] *child support magistrate.]* (Deleted by amendment.)
- Sec. 30. Chapter 432B of NRS is hereby amended by adding thereto the provisions set forth as sections 31 to 42, inclusive, of this act.
- Sec. 31. "Qualified residential treatment program" has the meaning ascribed to it in 42 U.S.C. § 672(k)(4).
- Sec. 32. 1. If a parent or other person responsible for the welfare of a child who is the subject of proceedings under this section, NRS 432B.410 to 432B.590, inclusive, and sections 33, 34 and 35 of this act is less than 18 years of age and is not emancipated, the court shall hold a hearing to determine whether the parent or other person is incapacitated. If the court determines, by clear and convincing evidence, that the parent or other person is incapacitated, the court shall appoint a guardian ad litem for the parent or other person.
- 2. If the provisions of subsection 1 do not apply, a court may appoint a guardian ad litem for a parent or other person responsible for the welfare of a child who is the subject of proceedings under this section, NRS 432B.410 to 432B.590, inclusive, and sections 33, 34 and 35 of this act upon the motion of a party or its own motion if the court determines that the parent or other person is incapacitated. A party shall not make a motion pursuant to this subsection for the purpose of delay.
- 3. When determining whether the parent or other person responsible for the welfare of a child is incapacitated pursuant to subsection 1 or 2, a court shall consider:
 - (a) The ability of the parent or other person to:
 - (1) Appreciate the allegations against him or her;
 - (2) Understand the possible outcomes of the proceedings;
 - (3) Understand the nature of the legal process;
 - (4) Disclose to his or her attorney the facts relevant to the proceedings;
 - (5) Display appropriate behavior in the courtroom; and
 - (6) Testify regarding issues relevant to the proceedings;
- (b) Any findings in another legal proceeding that the parent or other person is incapacitated or incompetent;
- (c) Any mental illness, intellectual disability or developmental disability that affects the capacity of the parent or other person;

- (d) The results of any evaluation conducted pursuant to section 33 of this act; and
- (e) Any other factor that affects the capacity of the parent or other person or evidence concerning such capacity.
- 4. A court may determine that a parent or other person responsible for the welfare of a child is incapacitated pursuant to this section only if it finds by clear and convincing evidence that the parent or other person is unable to:
 - (a) Understand the nature of the allegations against him or her;
 - (b) Understand the nature and purpose of the proceedings; or
- (c) Aid and assist his or her attorney at any time during the proceedings with a reasonable degree of rational understanding.
- 5. If a court determines that a parent or other person responsible for the welfare of a child is incapacitated pursuant to this section, the court shall appoint ad guardian ad litem for the parent or other person. The court may not appoint the attorney for the parent or other person as his or her guardian ad litem. When determining the person who will be appointed as the guardian ad litem, the court:
- (a) Shall consider the wishes of the parent or other person for whom the guardian ad litem will be appointed;
 - (b) May consider any other relevant evidence; and
 - (c) May call additional witnesses.
- 6. The court shall, upon the request of a parent or other person responsible for the welfare of the child for whom a guardian ad litem will be appointed pursuant to this section, conduct the initial evaluation of a person who may be appointed as the guardian ad litem outside the presence of the other parties.
- 7. An order appointing a guardian ad litem pursuant to this section must be based upon clear and convincing evidence and set forth:
- (a) Findings of fact regarding the determination of the court that the parent or other person responsible for the welfare of a child is incapacitated; and
 - (b) The authority and duties of the guardian ad litem.
- 8. Except as otherwise provided in this subsection, the court shall review an order appointing a guardian ad litem pursuant to this section upon the request of any party to determine whether the parent or other person responsible for the welfare of a child for whom the guardian ad litem was appointed remains incapacitated. The court must conduct such a review within 45 days after such a request is made.
- 9. If a court determines that a parent or other person responsible for the welfare of a child is incapacitated solely because of his or her age and appoints a guardian ad litem for the parent or other person, the appointment of the guardian ad litem must terminate on the 18th birthday of the parent or other person.

- Sec. 33. 1. If a parent or other person responsible for the welfare of a child described in subsection 1 of section 32 of this act or a parent or other person responsible for the welfare of a child who is the subject of a motion pursuant to subsection 2 of section 32 of this act requests an evaluation and the court determines that the parent or other person might be incapacitated because he or she is not mentally competent, the court shall order the parent or other person to undergo an evaluation by a person professionally qualified in the field of psychiatric mental health. In all other circumstances, the court may, upon the motion of a party or its own motion, order such an evaluation if it determines that the parent or other person might be incapacitated because he or she is not mentally competent.
 - 2. If an evaluation is conducted pursuant to subsection 1 upon:
- (a) The request of the parent or other person who is the subject of the evaluation or the motion of court, the court may, except as otherwise provided in subsection 3, pay the cost of the evaluation.
- (b) The motion of a party, other than the parent or other person who is the subject of the evaluation, the moving party shall pay the cost of the evaluation.
- 3. The court shall pay the cost of an evaluation conducted pursuant to subsection 1 if:
- (a) The evaluation is conducted upon the request of the parent or other person who is the subject of the evaluation or the motion of court;
- (b) The evaluation is not covered by a third party or the third party that provides such coverage is unable or unwilling to pay for the evaluation in a timely manner; and
- (c) The parent or other person who is the subject of the evaluation has a household income that is less than 200 percent of the federally designated level signifying poverty.
- 4. If the court pays the cost of an evaluation pursuant to subsection 3 and later determines that the parent or other person responsible for the welfare of a child who is the subject of the examination is financially able to pay all or part of the cost of the evaluation, the court may require the parent or other person to make such payment to the clerk of the court.
- 5. Any other party to the proceeding may make an oral or written motion for the person to be evaluated by a person professionally qualified in the field of psychiatric mental health, a psychologist or other appropriate professional retained by the party. The party seeking the additional evaluation shall pay the costs related to the evaluation.
 - 6. As used in this section:
- (a) "Household" means persons of the first degree of consanguinity or affinity who live in the same dwelling.
- (b) "Person professionally qualified in the field of psychiatric mental health" has the meaning ascribed to it in NRS 433A.018.
- (c) "Third party" means any insurer or organization providing health coverage or benefits in accordance with state or federal law.

- Sec. 34. 1. In making decisions on behalf of a parent or other person responsible for the welfare of a child, a guardian ad litem appointed for the parent or other person responsible for the welfare of a child pursuant to section 32 of this act shall:
- (a) Consider the wishes of the parent or other person and inform the court of those wishes; and
- (b) Act in the best interests of the parent or other person, as determined by the guardian ad litem using his or her independent judgement.
- 2. Communications between a parent or other person responsible for the welfare of a child and his or her guardian ad litem are privileged and confidential to the same extent as communications between the parent and his or her attorney.
- 3. A guardian ad litem appointed pursuant to section 32 of this act may not take any action to relinquish parental rights, effectuate a termination of parental rights or consent to a specific adoption on behalf of the person for whom the guardian ad litem is appointed.
- Sec. 35. 1. Not later than 72 hours after an agency which provides child welfare services places a child who is in the custody of the agency which provides child welfare services in a qualified residential treatment program, the agency which provides child welfare services shall file written notice of the placement with the court and serve such notice upon each party to the proceedings concerning the child being conducted pursuant to this section, NRS 432B.410 to 432B.590, inclusive, and sections 32, 33 and 34 of this act.
- 2. Not later than 60 days after a child is placed in a qualified residential treatment program, the court shall conduct a hearing to review the status of the child and determine the appropriateness of the placement.
- 3. At the hearing held pursuant to subsection 2, as part of each review conducted pursuant to NRS 432B.580 and at each hearing held pursuant to 432B.590 for the duration of the placement in the qualified residential treatment program, the court shall:
 - (a) Review the assessment of the child; and
 - (b) Determine whether to approve or disapprove the placement.
- 4. A court may approve placement of a child in a qualified residential treatment program only if it finds by a preponderance of the evidence that placement in the qualified residential treatment program is:
- (a) The least restrictive appropriate environment for the child, including, without limitation, that:
- (1) Placement in a lower level of care is not capable of meeting the needs of the child; and
- (2) The qualified residential treatment program provides the most effective care and appropriate care and treatment for the child; and
- (b) Consistent with the short term and long term goals of the child's treatment.

- 5. After the court conducts a review pursuant to this section, the court shall issue a written determination concerning whether to approve the continued placement of the child in the qualified residential treatment program which must include, without limitation, written findings on each factor listed in subsection 4.
- 6. If a court disapproves the continued placement of a child in a qualified residential treatment program, the court:
- (a) Shall order the agency which provides child welfare service to place the child in a less restrictive appropriate placement; and
- (b) May make any other order that it determines to be in the best interest of the child.
- Sec. 35.3. As used in sections 35.3 to 42, inclusive, of this act, unless the context otherwise requires, the words and terms defined in sections 35.5 and 35.7 of this act have the meanings ascribed to them in those sections.
- Sec. 35.5. "Facility" means a psychiatric hospital or facility which provides residential treatment for mental or behavioral health care to which a child with an emotional disturbance is or will be admitted to a locked unit that prevents the child from leaving the facility.
- Sec. 35.7. "Person professionally qualified in the field of psychiatric mental health" has the meaning ascribed to it in NRS 433A.018 and includes the same professionals licensed in the state in which the child is placed.
- Sec. 36. For the purposes of NRS 432B.607 to 432B.6085, inclusive, and sections 35.3 to 42, inclusive, of this act, a determination concerning whether a child presents a substantial likelihood of serious harm to himself or herself or others must be made as provided in NRS 433A.0195.
- Sec. 37. 1. An agency which provides child welfare services shall not place a child in the custody of the agency in a facility for the purpose of receiving nonemergency mental health treatment unless the agency has petitioned the court for the placement and the court has ordered the placement, or except as provided in sections 35.3 to 42, inclusive, of this act.
- 2. A proceeding for the admission of a child alleged to be a child with an emotional disturbance who is in the custody of an agency which provides child welfare services to a facility for nonemergency mental health treatment may be commenced by the filing of a petition with the court which has jurisdiction in proceedings concerning the child. The petition may be filed by the agency which provides child welfare services without the consent of a parent of the child. The petition must be accompanied:
- (a) By a certificate of a physician, a psychiatrist, a psychologist or an advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 stating that the physician, psychiatrist, psychologist or advanced practice registered nurse has examined the child alleged to be a child with an emotional disturbance and has concluded that the child:

- (1) Is a child with an emotional disturbance and, because of that condition, presents a substantial likelihood of serious harm to himself or herself or others if allowed liberty; and
- (2) Cannot be safely and effectively treated in a less restrictive environment that is appropriate for the child; or
 - (b) By a sworn written statement by the petitioner that:
- (1) The petitioner has, based upon personal observation of the child alleged to be a child with an emotional disturbance, probable cause to believe that the child:
- (I) Is a child with an emotional disturbance and, because of that condition, presents a substantial likelihood of serious harm to himself or herself or others if allowed liberty; and
- (II) Cannot be safely and effectively treated in a less restrictive environment that is appropriate for the child; and
- (2) The child alleged to be a child with an emotional disturbance has refused to submit to examination or treatment by a person described in paragraph (a).
- 3. A child who is the subject of a petition filed pursuant to this section or the parent or guardian of such a child may oppose the petition:
 - (a) Orally at a hearing on the petition; or
 - (b) By filing a written opposition with the court.
- Sec. 38. 1. A child who is the subject of a petition pursuant to section 37 of this act may, after conferring with his or her attorney, submit to the court written consent, or provide oral consent in the record of the court, to nonemergency mental health treatment. Upon receiving such consent, the court shall order the admission of the child to a facility for such treatment if it finds that the treatment is in the best interests of the child.
- 2. A court that receives a petition pursuant to section 37 of this act for the court-ordered admission of a child alleged to be a child with an emotional disturbance to a facility for nonemergency mental health treatment shall conduct a hearing on the petition, unless otherwise ordered by the court.
- 3. A court may order the admission of a child with respect to whom a petition was filed pursuant to section 37 of this act to a facility only if the court finds that there is clear and convincing evidence that the child:
 - (a) Is a child with an emotional disturbance;
- (b) Because of that condition, presents a substantial likelihood of serious harm to himself or herself or others if allowed liberty; and
- (c) Cannot be treated in a less restrictive environment that is appropriate for the child.
- 4. The court shall issue a written order on a petition submitted pursuant to section 37 of this act. The order must include, without limitation, specific findings concerning each factor prescribed by subsection 3. The order must be interlocutory and is subject to regular review pursuant to section 41 of this act.

- Sec. 39. 1. A child or a parent or guardian of the child who opposes a petition for the admission of a child alleged to be a child with emotional disturbance to a facility for nonemergency mental health treatment pursuant to subsection 3 of section 37 of this act may petition the court to authorize a second examination. The court shall authorize such a second examination upon receiving such a petition. Except as otherwise ordered by the court, a second examination must be completed not later than 45 business days after the court authorizes the examination and before any evidentiary hearing is conducted.
- 2. If the court authorizes a second examination of the child, the examination must:
- (a) Be conducted by an independent physician, psychiatrist, psychologist or advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 who is not:
- (1) The same physician, psychiatrist, psychologist or advanced practice registered nurse who completed a certificate pursuant to paragraph (a) of subsection 2 of section 37 of this act or a physician, psychologist, clinical social worker or advanced practice registered nurse who participated in the examination conducted pursuant to that paragraph; or
 - (2) Employed by, connected to or otherwise affiliated with:
- (I) The person described in subparagraph (1) or any facility which employs that person; or
 - (II) Any facility into which the child may be placed;
 - (b) Include, without limitation:
- (1) An evaluation of the diagnosis of the child, the risks of harm posed by the child to himself or herself or others and whether the child is capable of being safely and effectively treated in a less restrictive appropriate environment; and
- (2) Recommendations concerning the placement of the child and the level of care required by the child; and
- (c) Be paid for by the governmental entity that is responsible for the agency which provides child welfare services, if such payment is not otherwise provided by the State Plan for Medicaid.
- Sec. 40. In determining pursuant to sections 38 and 41 of this act whether to issue or renew an order for the admission of a child who is in the custody of an agency which provides child welfare services to a facility for nonemergency treatment, the court shall consider:
- 1. The reports of any examinations or evaluations of a child by any person professionally qualified in the field of psychiatric mental health;
 - 2. Any information concerning the child provided by:
- (a) A person professionally qualified in the field of psychiatric mental health:
 - (b) A representative of the agency which provides child welfare services;
 - (c) An adult caretaker who is knowledgeable about the child; or

- (d) A guardian ad litem appointed for the child pursuant to NRS 432B.500:
- 3. The wishes of the child concerning care and treatment and placement in a facility;
- 4. The best interests of the child, including, without limitation, whether the court believes the child might experience any psychological trauma from court-ordered admission;
 - 5. Any alternative care or treatment options; and
 - 6. Any other information the court deems relevant concerning the child.
- Sec. 41. 1. If the court issues an order for the admission of a child who is in the custody of an agency which provides child welfare services to a facility for nonemergency mental health treatment pursuant to section 38 of this act, the order automatically expires:
- (a) At the end of 90 days if the facility does not release the child pursuant to subsection 4 before the expiration of the order; or
- (b) If the facility releases the child pursuant to subsection 4 before the expiration of the order, on the date of the release.
- 2. Before the expiration of an order for nonemergency medical treatment pursuant to paragraph (a) of subsection 1, the agency which provides child welfare services, the Division of Child and Family Services or any facility may petition to renew the admission of the child for additional periods not to exceed 60 days each. Each petition for renewal must set forth the specific reasons why further treatment in the facility is in the best interest of the child.
- 3. To grant a petition filed pursuant to subsection 2, the court must find by clear and convincing evidence that the child cannot be safely and effectively treated in a less restrictive appropriate environment. If the court finds that the child can be safely and effectively treated in a less restrictive appropriate environment, the court must order the discharge of the child from the facility.
- 4. A facility may unconditionally release a child who is admitted to the facility for nonemergency mental health treatment pursuant to section 38 of this act without an order of the court upon the recommendation of the psychiatrist and other persons professionally qualified in the field of psychiatric mental health who are responsible for treating the child. At least 30 days before the anticipated discharge, the facility shall provide notice of the recommendation to all parties. Such notice must include, without limitation, an explanation of the reasons that:
 - (a) The release is clinically appropriate; and
- (b) The child can be safely and effectively treated in a less restrictive appropriate environment.
- Sec. 42. A facility which provides care or treatment to a child who is in the custody of an agency which provides child welfare services and who is admitted to the facility pursuant to section 38 of this act shall develop a

written plan, in consultation with the child, for the continued care or treatment of the child upon discharge from the facility. The plan must:

- 1. Be developed not later than 30 days after the child is admitted to the facility and be updated on an ongoing basis throughout the admission;
- 2. Be submitted to the court after each period of admission ordered by the court pursuant to section 38 of this act in the manner set forth in section 41 of this act; and
 - 3. Include, without limitation:
- (a) The anticipated length of treatment and the anticipated date of discharge of the child from the facility, if known;
- (b) The name of any person professionally qualified in the field of psychiatric mental health who will provide care or treatment to the child after the child is discharged from the facility, if known;
- (c) A plan for any appropriate care or treatment for the child for at least 60 days after the child is discharged from the facility; and
- (d) The recommended type of placement of the child after the child is discharged from the facility.
 - Sec. 43. NRS 432B.010 is hereby amended to read as follows:
- 432B.010 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 432B.020 to 432B.110, inclusive, *and section 31 of this act* have the meanings ascribed to them in those sections.
 - Sec. 44. [NRS 432B.159 is hereby amended to read as follows:
- 432B.159 1. A determination by the court after an evidentiary hearing and finding by clear and convincing evidence that either parent or any other person seeking custody of a child has committed any act of abduction against the child or any other child creates a rebuttable presumption that sole or joint custody or unsupervised visitation of the child by the perpetrator of the abduction is not in the best interest of the child. If the parent or other person seeking custody does not rebut the presumption, the court shall not enter an order for sole or joint custody or unsupervised visitation of the child by the perpetrator and the court shall set forth:
- (a) Findings of fact that support the determination that one or more acts of
- (b) Findings that the custody or visitation arrangement ordered by the court adequately protects the child and the parent or other person from whom the child was abducted.
- 2. For purposes of subsection 1, any of the following acts constitute conclusive evidence that an act of abduction occurred:
- (a) A conviction of the defendant of any violation of NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct;
- (b) A plea of guilty or nolo contendere by the defendant to any violation of NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct; or

- (e) An admission by the defendant to the court of the facts contained in the charging document alleging a violation of NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct.
- 3. If, after a court enters a final order concerning custody of the child, a magistrate determines there is probable cause to believe that an act of abduction has been committed against the child or any other child and that a person who has been awarded sole or joint custody or unsupervised visitation of the child has committed the act, the court shall, upon a motion to modify the order concerning custody, reconsider the previous order concerning custody pursuant to subsections 1 and 2.
- 4. A court, agency, institution or other person who places a child in protective custody shall not release a child to the custody of a person who a court has determined pursuant to this section has engaged in one or more acts of abduction against the child or any other child, unless a court determines that it is in the best interest of the child for the perpetrator of the abduction to have custody of the child.
- 5. As used in this section [. "abduction"]:
- (a) "Abduction" means the commission of an act described in NRS 200.310 to 200.340, inclusive, or 200.359 or a law of any other jurisdiction that prohibits the same or similar conduct.
- (b) "Magistrate" has the meaning ascribed to it in NRS 169.095.] (Deleted by amendment.)
 - Sec. 45. NRS 432B.250 is hereby amended to read as follows:
- 432B.250 Any person who is required to make a report pursuant to NRS 432B.220 may not invoke any of the privileges set forth in chapter 49 of NRS:
 - 1. For failure to make a report pursuant to NRS 432B.220;
- 2. In cooperating with an agency which provides child welfare services or a guardian ad litem for a child; or
- 3. In any proceeding held pursuant to NRS 432B.410 to 432B.590, inclusive [.], and sections 32 to 35, inclusive, of this act.
 - Sec. 46. NRS 432B.290 is hereby amended to read as follows:
- 432B.290 1. Information maintained by an agency which provides child welfare services must be maintained by the agency which provides child welfare services as required by federal law as a condition of the allocation of federal money to this State.
- 2. Except as otherwise provided in this section and NRS 432B.165, 432B.175 and 432B.513, information maintained by an agency which provides child welfare services may, at the discretion of the agency which provides child welfare services, be made available only to:
- (a) A physician, if the physician has before him or her a child who the physician has reasonable cause to believe has been abused or neglected;
- (b) A person authorized to place a child in protective custody, if the person has before him or her a child who the person has reasonable cause to

believe has been abused or neglected and the person requires the information to determine whether to place the child in protective custody;

- (c) An agency, including, without limitation, an agency in another jurisdiction, responsible for or authorized to undertake the care, treatment or supervision of:
 - (1) The child; or
 - (2) The person responsible for the welfare of the child;
- (d) A district attorney or other law enforcement officer who requires the information in connection with an investigation or prosecution of the abuse or neglect of a child;
- (e) Except as otherwise provided in paragraph (f), a court other than a juvenile court, for in camera inspection only, unless the court determines that public disclosure of the information is necessary for the determination of an issue before it:
- (f) A court, as defined in NRS 159A.015, to determine whether a guardian or successor guardian of a child should be appointed pursuant to chapter 159A of NRS or NRS 432B.466 to 432B.468, inclusive;
- (g) A person engaged in bona fide research or an audit, but information identifying the subjects of a report must not be made available to the person;
- (h) The attorney and the guardian ad litem of the child, if the information is reasonably necessary to promote the safety, permanency and well-being of the child;
- (i) A person who files or intends to file a petition for the appointment of a guardian or successor guardian of a child pursuant to chapter 159A of NRS or NRS 432B.466 to 432B.468, inclusive, if the identity of the person responsible for reporting the abuse or neglect of the child to a public agency is kept confidential and the information is reasonably necessary to promote the safety, permanency and well-being of the child;
- (j) The proposed guardian or proposed successor guardian of a child over whom a guardianship is sought pursuant to chapter 159A of NRS or NRS 432B.466 to 432B.468, inclusive, if the identity of the person responsible for reporting the abuse or neglect of the child to a public agency is kept confidential and the information is reasonably necessary to promote the safety, permanency and well-being of the child;
- (k) A grand jury upon its determination that access to these records and the information is necessary in the conduct of its official business;
- (l) A federal, state or local governmental entity, or an agency of such an entity, or a juvenile court, that needs access to the information to carry out its legal responsibilities to protect children from abuse and neglect;
- (m) A person or an organization that has entered into a written agreement with an agency which provides child welfare services to provide assessments or services and that has been trained to make such assessments or provide such services;
- (n) A team organized pursuant to NRS 432B.350 for the protection of a child;

- (o) A team organized pursuant to NRS 432B.405 to review the death of a child;
 - (p) A multidisciplinary team, as defined in NRS 432B.4014;
- (q) A parent or legal guardian of the child and an attorney of a parent or *legal* guardian of the child, including, without limitation, the parent or guardian of a child over whom a guardianship is sought pursuant to chapter 159A of NRS or NRS 432B.466 to 432B.468, inclusive, if the identity of the person responsible for reporting the abuse or neglect of the child to a public agency is kept confidential and the information is reasonably necessary to promote the safety, permanency and well-being of the child and is limited to information concerning that parent or guardian;
- (r) The child over whom a guardianship is sought pursuant to chapter 159A of NRS or NRS 432B.466 to 432B.468, inclusive, if:
 - (1) The child is 14 years of age or older; and
- (2) The identity of the person responsible for reporting the abuse or neglect of the child to a public agency is kept confidential and the information is reasonably necessary to promote the safety, permanency and well-being of the child;
- (s) The persons or agent of the persons who are the subject of a report, if the information is reasonably necessary to promote the safety, permanency and well-being of the child and is limited to information concerning those persons;
- (t) An agency that is authorized by law to license foster homes or facilities for children or to investigate persons applying for approval to adopt a child, if the agency has before it an application for that license or is investigating an applicant to adopt a child;
- (u) Upon written consent of the parent, any officer of this State or a city or county thereof or Legislator authorized by the agency or department having jurisdiction or by the Legislature, acting within its jurisdiction, to investigate the activities or programs of an agency which provides child welfare services if:
- (1) The identity of the person making the report is kept confidential; and
- (2) The officer, Legislator or a member of the family of the officer or Legislator is not the person alleged to have committed the abuse or neglect;
- (v) The Division of Parole and Probation of the Department of Public Safety for use pursuant to NRS 176.135 in making a presentence investigation and report to the district court or pursuant to NRS 176.151 in making a general investigation and report;
- (w) Any person who is required pursuant to NRS 432B.220 to make a report to an agency which provides child welfare services or to a law enforcement agency;
- (x) A local advisory board to expedite proceedings for the placement of children created pursuant to NRS 432B.604;

- (y) The panel established pursuant to NRS 432B.396 to evaluate agencies which provide child welfare services;
 - (z) An employer in accordance with subsection 3 of NRS 432.100;
- (aa) A team organized or sponsored pursuant to NRS 217.475 or 228.495 to review the death of the victim of a crime that constitutes domestic violence;
- (bb) The Committee on Domestic Violence appointed pursuant to NRS 228.470; or
- (cc) The Committee to Review Suicide Fatalities created by NRS 439.5104.
- 3. An agency investigating a report of the abuse or neglect of a child shall, upon request, provide to a person named in the report as allegedly causing the abuse or neglect of the child:
 - (a) A copy of:
- (1) Any statement made in writing to an investigator for the agency by the person named in the report as allegedly causing the abuse or neglect of the child; or
- (2) Any recording made by the agency of any statement made orally to an investigator for the agency by the person named in the report as allegedly causing the abuse or neglect of the child; or
- (b) A written summary of the allegations made against the person who is named in the report as allegedly causing the abuse or neglect of the child. The summary must not identify the person responsible for reporting the alleged abuse or neglect or any collateral sources and reporting parties.
- 4. Except as otherwise provided by subsection 6, before releasing any information maintained by an agency which provides child welfare services pursuant to this section, an agency which provides child welfare services shall take whatever precautions it determines are reasonably necessary to protect the identity and safety of any person who reports child abuse or neglect and to protect any other person if the agency which provides child welfare services reasonably believes that disclosure of the information would cause a specific and material harm to an investigation of the alleged abuse or neglect of a child or the life or safety of any person.
- 5. The provisions of this section must not be construed to require an agency which provides child welfare services to disclose information maintained by the agency which provides child welfare services if, after consultation with the attorney who represents the agency, the agency determines that such disclosure would cause a specific and material harm to a criminal investigation.
- 6. A person who is the subject of a report of child abuse or neglect made pursuant to this chapter that is assigned a disposition other than substantiated pursuant to NRS 432B.305 and who believes that the report was made in bad faith or with malicious intent may petition a district court to order the agency which provides child welfare services to release information maintained by the agency which provides child welfare services. The petition must

specifically set forth the reasons supporting the belief that the report was made in bad faith or with malicious intent. The petitioner shall provide notice to the agency which provides child welfare services so that the agency may participate in the action through its counsel. The district court shall review the information which the petitioner requests to be released and the petitioner shall be allowed to present evidence in support of the petition. If the court determines that there is a reasonable question of fact as to whether the report was made in bad faith or with malicious intent and that the disclosure of the identity of the person who made the report would not be likely to endanger the life or safety of the person who made the report, the court shall provide a copy of the information to the petitioner and the original information is subject to discovery in a subsequent civil action regarding the making of the report.

- 7. If an agency which provides child welfare services receives any information that is deemed confidential by law, the agency which provides child welfare services shall maintain the confidentiality of the information as prescribed by applicable law.
- 8. Pursuant to this section, a person may authorize the release of information maintained by an agency which provides child welfare services about himself or herself, but may not waive the confidentiality of such information concerning any other person.
- 9. An agency which provides child welfare services may provide a summary of the outcome of an investigation of the alleged abuse or neglect of a child to the person who reported the suspected abuse or neglect.
- 10. Except as otherwise provided in this subsection, any person who is provided with information maintained by an agency which provides child welfare services and who further disseminates the information or makes the information public is guilty of a gross misdemeanor. This subsection does not apply to:
- (a) A district attorney or other law enforcement officer who uses the information solely for the purpose of initiating legal proceedings;
- (b) An employee of the Division of Parole and Probation of the Department of Public Safety making a presentence investigation and report to the district court pursuant to NRS 176.135 or making a general investigation and report pursuant to NRS 176.151; or
- (c) An employee of a juvenile justice agency who provides the information to the juvenile court.
- 11. An agency which provides child welfare services may charge a fee for processing costs reasonably necessary to prepare information maintained by the agency which provides child welfare services for release pursuant to this section.
- 12. An agency which provides child welfare services shall adopt rules, policies or regulations to carry out the provisions of this section.
- 13. As used in this section, "juvenile justice agency" means the Youth Parole Bureau or a director of juvenile services.

- Sec. 47. NRS 432B.420 is hereby amended to read as follows:
- 432B.420 1. A parent or other person responsible for the welfare of a child who is alleged to have abused or neglected the child may be represented by an attorney at all stages of any proceedings under NRS 432B.410 to 432B.590, inclusive [-], and sections 32 to 35, inclusive, of this act. Except as otherwise provided in subsection 3, if the person is indigent, the court may appoint an attorney to represent the person.
- 2. A child who is alleged to have been abused or neglected shall be deemed to be a party to any proceedings under NRS 432B.410 to 432B.590, inclusive [.], and sections 32 to 35, inclusive, of this act. The court shall appoint an attorney to represent the child. The child must be represented by an attorney at all stages of any proceedings held pursuant to NRS 432B.410 to 432B.590, inclusive [.], and sections 32 to 35, inclusive, of this act. The attorney representing the child has the same authority and rights as an attorney representing any other party to the proceedings.
- 3. If the court determines that the parent of an Indian child for whom protective custody is sought is indigent, the court:
 - (a) Shall appoint an attorney to represent the parent; and
- (b) May apply to the Secretary of the Interior for the payment of the fees and expenses of such an attorney,
- → as provided in the Indian Child Welfare Act.
- 4. Each attorney, other than an attorney compensated through a program for legal aid described in NRS 19.031 and 247.305, if appointed under the provisions of subsection 1 or 2, is entitled to the same compensation and payment for expenses from the county as provided in NRS 7.125 and 7.135 for an attorney appointed to represent a person charged with a crime.
 - Sec. 48. [NRS 432B.430 is hereby amended to read as follows:
- —432B.430—1. Except as otherwise provided in subsections 3 and 4 and NRS 432B.457, in each judicial district that includes a county whose population is 700,000 or more:
- (a) Any proceeding held pursuant to NRS 432B.410 to 432B.590, inclusive, and sections 32 to 35, inclusive, of this act, other than a hearing held pursuant to subsections 1 to 4, inclusive, of NRS 432B.530 or a hearing held pursuant to subsection 5 of NRS 432B.530 when the court proceeds immediately, must be open to the general public unless the judge or [master,] juvenile magistrate, upon his or her own motion or upon the motion of another person, determines that all or part of the proceeding must be closed to the general public because such closure is in the best interests of the child who is the subject of the proceeding. In determining whether closing all or part of the proceeding is in the best interests of the child who is the subject of the proceeding, the judge or [master] juvenile magistrate must consider and give due weight to the desires of that child.
- (b) If the judge or [master] juvenile magistrate determines pursuant to paragraph (a) that all or part of a proceeding must be closed to the general public:

- (1) The judge or [master] juvenile magistrate must make specific findings of fact to support such a determination; and
- (2) The general public must be excluded and only those persons having a direct interest in the case, as determined by the judge or [master,] juvenile magistrate, may be admitted to the proceeding.
- (e) Any proceeding held pursuant to subsections 1 to 4, inclusive, of NRS 432B.530 and any proceeding held pursuant to subsection 5 NRS 432B.530 when the court proceeds immediately must be closed to the general public unless the judge or [master,] juvenile magistrate, upon his or her own motion or upon the motion of another person, determines that all or part of the proceeding must be open to the general public because opening the proceeding in such a manner is in the best interests of the child who is the subject of the proceeding. In determining whether opening all or part of the proceeding is in the best interests of the child who is the subject of the proceeding, the judge or [master] juvenile magistrate must consider and give due weight to the desires of that child. If the judge or [master] invenile magistrate determines pursuant to this paragraph that all or part of a proceeding must be open to the general public, the judge or [master] juvenile magistrate must make specific findings of fact to support such a determination. Unless the judge or [master] juvenile magistrate determines pursuant to this paragraph that all or part of a proceeding described in this paragraph must be open to the general public, the general public must be excluded and only those persons having a direct interest in the case, as determined by the judge or [master,] juvenile magistrate may be admitted to the proceeding.
- 2. Except as otherwise provided in subsections 3 and 4 and NRS 432B.457, in each judicial district that includes a county whose population is less than 700,000:
- —(a) Any proceeding held pursuant to NRS 432B.410 to 432B.590, inclusive, and sections 32 to 35, inclusive, of this act must be closed to the general public unless the judge or [master,] juvenile magistrate, upon his or her own motion or upon the motion of another person, determines that all or part of the proceeding must be open to the general public because opening the proceeding in such a manner is in the best interests of the child who is the subject of the proceeding. In determining whether opening all or part of the proceeding is in the best interests of the child who is the subject of the proceeding, the judge or [master] juvenile magistrate shall consider and give due weight to the desires of that child.
- (b) If the judge or [master] juvenile magistrate determines pursuant to paragraph (a) that all or part of a proceeding must be open to the general public, the judge or [master] juvenile magistrate must make specific findings of fact to support such a determination.
- (e) Unless the judge or [master] juvenile magistrate determines pursuant to paragraph (a) that all or part of a proceeding must be open to the general public, the general public must be excluded and only those persons having a

direct interest in the case, as determined by the judge or [master,] juvenile magistrate, may be admitted to the proceeding.

- 3. Except as otherwise provided in subsection 4 and NRS 432B.457, in a proceeding held pursuant to NRS 432B.470, the general public must be excluded and only those persons having a direct interest in the case, as determined by the judge or [master,] juvenile magistrate, may be admitted to the proceeding.
- 4. In conducting a proceeding held pursuant to NRS 432B.410 to 432B.590, inclusive, and sections 32 to 35, inclusive, of this act, a judge or [master] juvenile magistrate shall keep information confidential to the extent necessary to obtain federal funds in the maximum amount available to this state.] (Deleted by amendment.)
 - Sec. 49. NRS 432B.4675 is hereby amended to read as follows:
- 432B.4675 Upon the entry of a final order by the court establishing a guardianship pursuant to NRS 432B.4665:
- 1. The custody of the child by the agency which has legal custody of the child is terminated:
- 2. The proceedings concerning the child conducted pursuant to NRS 432B.410 to 432B.590, inclusive, and sections 32 to 35, inclusive, of this act terminate; and
- 3. Unless subsequently ordered by the court to assist the court, the following agencies and persons are excused from any responsibility to participate in the guardianship case:
 - (a) The agency which has legal custody of the child;
- (b) Any counsel or guardian ad litem appointed by the court to assist in the proceedings conducted pursuant to NRS 432B.410 to 432B.590, inclusive [;], and sections 32 to 35, inclusive, of this act; and
- (c) Any person nominated or appointed as the person who is legally responsible for the psychiatric care of the child pursuant to NRS 432B.4684 or 432B.4685, respectively.
 - Sec. 50. NRS 432B.580 is hereby amended to read as follows:
- 432B.580 1. Except as otherwise provided in this section and NRS 432B.513, if a child is placed pursuant to NRS 432B.550 other than with a parent, the placement must be reviewed by the court at least semiannually, and within 90 days after a request by a party to any of the prior proceedings. Unless the parent, guardian or the custodian objects to the referral, the court may enter an order directing that the placement be reviewed by a panel appointed pursuant to NRS 432B.585.
- 2. An agency acting as the custodian of the child shall, before any hearing for review of the placement of a child, submit a report to the court, or to the panel if it has been designated to review the matter, which includes:
- (a) An evaluation of the progress of the child and the family of the child and any recommendations for further supervision, treatment or rehabilitation.
- (b) Information concerning the placement of the child in relation to the child's siblings, including, without limitation:

- (1) Whether the child was placed together with the siblings;
- (2) Any efforts made by the agency to have the child placed together with the siblings;
- (3) Any actions taken by the agency to ensure that the child has contact with the siblings; and
 - (4) If the child is not placed together with the siblings:
- (I) The reasons why the child is not placed together with the siblings; and
- (II) A plan for the child to visit the siblings, which must be presented at the first hearing to occur after the siblings are separated and approved by the court. The plan for visitation must be updated as necessary to reflect any change in the placement of the child or a sibling, including, without limitation, any such change that occurs after the termination of parental rights to the child or a sibling or the adoption of a sibling.
 - (c) Information concerning the child's education, including:
- (1) A copy of any academic plan or individual graduation plan developed for the child pursuant to NRS 388.155, 388.165, 388.205 or 388.227;
 - (2) The grade and school in which the child is enrolled;
- (3) The name of each school the child attended before enrolling in the school in which he or she is currently enrolled and the corresponding dates of attendance:
- (4) Whether the child has not completed or passed any course of instruction that the child should have completed or passed by the time the report is submitted, which has resulted in the child having a deficiency in credits:
- (5) A copy of any individualized education program developed for the child:
- (6) A copy of any plan developed in accordance with section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794;
 - (7) A summary of any special education services received by the child;
 - (8) A copy of the most recent report card of the child;
- (9) A statement of the number of credits earned by the child during the most recent semester, if applicable;
- (10) A statement of the number of times the child has been absent from school during the current or most recent school year for which the child was enrolled in school:
- (11) The scores the child received on any academic assessments or standardized examinations administered to the child;
- (12) Any information provided by the educational decision maker appointed for the child pursuant to NRS 432B.462; and
- (13) Whether a request that the child receive special education services has been made and, if so, the outcome of such a request.

- (d) A copy of any explanations regarding medication that has been prescribed for the child that have been submitted by a foster home pursuant to NRS 424.0383.
- 3. Except as otherwise provided in this subsection, a copy of the report submitted pursuant to subsection 2 must be given to the parents, the guardian ad litem and the attorney, if any, representing the parent or the child. If the child was delivered to a provider of emergency services pursuant to NRS 432B.630 and the parent has not appeared in the action, the report need not be sent to that parent.
- 4. After a plan for visitation between a child and the siblings of the child submitted pursuant to subparagraph (4) of paragraph (b) of subsection 2 has been approved by the court, the agency which provides child welfare services must request the court to issue an order requiring the visitation set forth in the plan for visitation. Upon the issuance of such an order, the court shall provide each sibling of the child with the case number of the proceeding for the purpose of allowing the sibling to petition the court for visitation or enforcement of the order for visitation. If a person refuses to comply with or disobeys an order issued pursuant to this subsection, the person may be punished as for a contempt of court.
- 5. The court or the panel shall hold a hearing to review the placement, unless the parent, guardian or custodian files a motion with the court to dispense with the hearing. If the motion is granted, the court or panel may make its determination from any report, statement or other information submitted to it.
- 6. Except as otherwise provided in subsection 7 and subsection 5 of NRS 432B.520, notice of the hearing must be filed with the court and must be given by first-class mail or any other means agreed upon in writing between the agency which provides child welfare services and the recipient of the notice to:
 - (a) All the parties to any of the prior proceedings;
 - (b) Any persons planning to adopt the child;
- (c) A sibling of the child, if known, who has been granted a right to visitation of the child pursuant to this section or NRS 127.171 and his or her attorney, if any;
- (d) Any other relatives of the child or providers of foster care who are currently providing care to the child; and
- (e) The educational decision maker appointed for the child pursuant to NRS 432B.462.
- 7. The notice of the hearing required to be filed and given pursuant to subsection 6:
- (a) Must include a statement indicating that if the child is placed for adoption the right to visitation of the child is subject to the provisions of NRS 127.171:
- (b) Must not include any confidential information described in NRS 127.140;

- (c) Need not be given to a parent whose rights have been terminated pursuant to chapter 128 of NRS or who has voluntarily relinquished the child for adoption pursuant to NRS 127.040; and
- (d) Need not be given to a parent who delivered a child to a provider of emergency services pursuant to NRS 432B.630.
- 8. The court or panel may require the presence of the child at the hearing and shall provide to each person to whom notice was given pursuant to subsection 6 a right to be heard at the hearing.
- 9. The court or panel shall, after considering the report provided in subsection 2 and any other relevant evidence, determine based on a preponderance of the evidence:
 - (a) The continuing necessity for and appropriateness of the placement;
- (b) The extent of compliance with the plan submitted pursuant to subsection 2 of NRS 432B.540;
- (c) Any progress which has been made in alleviating the problem which resulted in the placement of the child;
- (d) The date the child may be returned to, and safely maintained in, the home or placed for adoption or under a legal guardianship; and
- (e) Whether the child is making adequate academic progress and receiving the educational services or supports necessary to ensure the academic success of the child.
- 10. If the child is placed in a qualified residential treatment program, the determination pursuant to paragraph (a) of subsection 9 must include, without limitation, a finding on each factor prescribed by subsection 4 of section 35 of this act.
- 11. The provision of notice and a right to be heard pursuant to this section does not cause any person planning to adopt the child, any sibling of the child or any other relative, any adoptive parent of a sibling of the child or a provider of foster care to become a party to the hearing.
- [11.] 12. As used in this section, "individualized education program" has the meaning ascribed to it in 20 U.S.C. § 1414(d)(1)(A).
 - Sec. 51. NRS 432B.590 is hereby amended to read as follows:
- 432B.590 1. Except as otherwise provided in subsection 2 and NRS 432B.513, the court shall hold a hearing concerning the permanent placement of a child:
- (a) Not later than 12 months after the initial removal of the child from the home of the child and annually thereafter.
- (b) Within 30 days after making any of the findings set forth in subsection 3 of NRS 432B.393.
- → Notice of this hearing must be filed with the court and must be given by first-class mail or any other means agreed upon in writing between the agency which provides child welfare services and the recipient of the notice to all the persons to whom notice must be given pursuant to subsection 6 of NRS 432B.580.

- 2. A parent who delivered a child to a provider of emergency services pursuant to NRS 432B.630 shall be deemed to have waived any right to notice pursuant to this section.
- 3. The court may require the presence of the child at the hearing and shall provide to each person to whom notice was given pursuant to subsection 1 a right to be heard at the hearing.
- 4. At the hearing, the court shall review the report submitted by the agency which provides child welfare services pursuant to subsection 2 of NRS 432B.580, any plan for the permanent placement of the child adopted pursuant to NRS 432B.553 and any other relevant evidence and, if the goal of the plan is a permanent living arrangement other than reunification with his or her parents, placement for adoption, placement with a legal guardian or placement with a relative, ask the child about his or her desired permanent living arrangement. After doing so, the court must determine, based on a preponderance of the evidence:
- (a) Whether the agency with legal custody of the child has made the reasonable efforts required by subsection 1 of NRS 432B.553;
 - (b) Whether, and if applicable when:
- (1) The child should be returned to the parents of the child or placed with other relatives:
 - (2) It is in the best interests of the child to:
- (I) Initiate proceedings to terminate parental rights pursuant to chapter 128 of NRS so that the child can be placed for adoption;
- (II) Initiate proceedings to establish a guardianship pursuant to chapter 159A of NRS; or
- (III) Establish a guardianship in accordance with NRS 432B.466 to 432B.468, inclusive; or
- (3) The agency with legal custody of the child has produced documentation of its conclusion that there is a compelling reason for the placement of a child who has attained the age of 16 years in another permanent living arrangement;
- (c) If the child will not be returned to the parents of the child, whether the agency with legal custody of the child fully considered placement options both within and outside of this State;
- (d) If the child has attained the age of 14 years, whether the child will receive the services needed to assist the child in transitioning to independent living; and
- (e) If the child has been placed outside of this State, whether the placement outside of this State continues to be appropriate for and in the best interests of the child.
- 5. The court shall prepare an explicit statement of the facts upon which each of its determinations is based pursuant to subsection 4. If the court determines that it is not in the best interests of the child to be returned to his or her parents, or to be placed for adoption, with a legal guardian or with a

relative, the court must include compelling reasons for this determination and an explanation of those reasons in its statement of the facts.

- 6. If the court determines that it is in the best interests of the child to terminate parental rights, the court shall use its best efforts to ensure that the procedures required by chapter 128 of NRS are completed within 6 months after the date the court makes that determination, including, without limitation, appointing a private attorney to expedite the completion of the procedures.
- 7. The provisions of this section do not limit the jurisdiction of the court to review any decisions of the agency with legal custody of the child regarding the permanent placement of the child.
- 8. If a child has been placed outside of the home and has resided outside of the home pursuant to that placement for 14 months of any 20 consecutive months, the best interests of the child must be presumed to be served by the termination of parental rights.
- 9. This hearing may take the place of the hearing for review required by NRS 432B.580.
- 10. If a hearing pursuant to this section concerns a child who has been placed in a qualified residential treatment program, the hearing must include, without limitation, a review of that placement conducted in the manner prescribed by section 35 of this act.
- 11. The provision of notice and a right to be heard pursuant to this section does not cause any person planning to adopt the child, any sibling of the child or any other relative, any adoptive parent of a sibling of the child or a provider of foster care to become a party to the hearing.
 - Sec. 52. NRS 432B.595 is hereby amended to read as follows:
- 432B.595 1. Upon the request of a young adult who satisfies the requirements of subsection 1 of NRS 432B.594 to participate in the Program, the agency which provides child welfare services shall develop a written extended youth support services plan to assist the young adult in transitioning to self-sufficiency. Such a plan must include, without limitation:
- (a) The persons or entities that will receive payments from the agency which provides child welfare services and the manner in which such payments will be allocated. The agency which provides child welfare services may make payments to more than one person or entity authorized to receive payments pursuant to subsection 2.
 - (b) The goals set forth in subsection 3.
- 2. The plan developed pursuant to subsection 1 may provide for the agency which provides child welfare services to make direct payments to:
 - (a) A foster home.
 - (b) A qualified residential treatment program.
 - (c) A child care institution.
- (d) A person or entity, including, without limitation, a relative or fictive kin, who provides a supervised arrangement for independent living where the participant resides.

- (e) A landlord, property manager or other entity that collects rental payments for housing.
 - (f) A participant.
- (g) Any combination of the persons or entities listed in paragraphs (a) to (f), inclusive.
- 3. The plan developed pursuant to subsection 1 must include, without limitation, the following goals:
- (a) That the young adult save enough money to pay for his or her monthly expenses for at least 3 months;
- (b) If the young adult has not graduated from high school or obtained a general equivalency diploma or an equivalent document, that the young adult obtain a high school diploma or general equivalency diploma;
- (c) If the young adult has graduated from high school or obtained a general equivalency diploma or an equivalent document, that the young adult:
 - (1) Complete a program of postsecondary or vocational education;
- (2) Complete a program or activity designed to promote employment or remove obstacles to employment; or
 - (3) Be employed at least 80 hours per month;
 - (d) That the young adult secure housing;
- (e) That the young adult have adequate income to meet his or her monthly expenses;
- (f) That the young adult identify an adult who will be available to provide support to the young adult; and
- (g) If applicable, that the young adult have established appropriate supportive services to address any mental health or developmental needs of the young adult.
- 4. If a young adult is not capable of achieving one or more of the goals set forth in paragraphs (a) to (g), inclusive, of subsection 3, the young adult must have goals which are appropriate for the young adult based upon the needs of the young adult.
- 5. Based upon the needs of a participant, the agency which provides child welfare services may, at any time, after consulting with the participant, revise:
- (a) The persons or entities to whom a payment is made pursuant to subsection 2.
- (b) The manner in which payments are allocated between persons or entities to whom payments are made pursuant to subsection 2.
- 6. The plan developed pursuant to subsection 1 must be annually reviewed and mutually agreed upon by the young adult and the agency which provides child welfare services at the hearing required by NRS 432B.601.
 - 7. The agency which provides child welfare services shall:
- (a) Monitor the plan developed pursuant to subsection 1 and adjust the plan as necessary;

- (b) Contact the young adult by telephone at least once each month and in person at least quarterly;
- (c) Ensure that the young adult meets with a person who will provide guidance to the young adult and make the young adult aware of the services which will be available to the young adult; and
- (d) Conduct a meeting with the young adult at least 30 days, but not more than 45 days, before he or she reaches the age of 21 years to determine whether the young adult requires any additional guidance.
 - 8. As used in this section:
- (a) "Child care institution" has the meaning ascribed to it in NRS 432A.0245.
 - (b) "Foster home" has the meaning ascribed to it in NRS 424.014.
- [(c) "Qualified residential treatment program" has the meaning ascribed to it in 42 U.S.C. \S 672.]
 - Sec. 53. NRS 432B.607 is hereby amended to read as follows:
- 432B.607 As used in NRS 432B.607 to 432B.6085, inclusive, *and sections 35.3 to 42, inclusive, of this act,* unless the context otherwise requires, the words and terms defined in NRS 432B.6071 to 432B.6074, inclusive, have the meanings ascribed to them in those sections.
 - Sec. 54. NRS 432B.6075 is hereby amended to read as follows:
- 432B.6075 1. [A proceeding for a court ordered admission of a child alleged to be] If a child with an emotional disturbance who is in the custody of an agency which provides child welfare services is admitted to a facility [may be commenced by the filing of] under an emergency admission and the child has not been released within 5 days after the admission, the agency which provides child welfare services shall file a petition to continue the emergency admission, not later than 5 days after the admission, with the clerk of the court which has jurisdiction in proceedings concerning the child. The petition may be filed by the agency which provides child welfare services without the consent of a parent or guardian of the child. The petition must be accompanied [:
- (a) By] by a certificate of a physician, a psychiatrist [or licensed], a psychologist [stating] or an advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120:
- (a) Stating that the physician, psychiatrist, [or licensed] psychologist or advanced practice registered nurse has examined the child [alleged to be a child with an emotional disturbance] who is the subject of the petition and has concluded that the child [has] is a child with an emotional disturbance and, because of that condition, [is likely to harm himself or herself or others if allowed liberty; or
- (b) By a sworn written statement by the petitioner that:
- (1) The petitioner has, based upon personal observation of the child alleged to be a child with an emotional disturbance, probable cause to believe

that the child has an emotional disturbance and, because of that condition, is likely to harm himself or herself or others if allowed liberty; and

- (2) The child alleged to be a child with an emotional disturbance has refused to submit to examination or treatment by a physician, psychiatrist or licensed psychologist.] the child is a person in a mental health crisis, as defined in NRS 433A.0175, and presents a substantial likelihood of serious harm to himself or herself or others, as determined pursuant to NRS 433A.0195, if discharged to a less restrictive appropriate environment and includes, if available, the date on which the child will be discharged from the emergency admission to the facility; or
 - (b) By a sworn written statement by the petitioner that the child is:
- (1) A person in a mental health crisis, as defined in NRS 433A.0175, and presents a substantial likelihood of serious harm to herself or himself or others, as determined pursuant to NRS 433A.0195, if discharged to a less restrictive appropriate environment; and
- (2) Is alleged to be a child with an emotional disturbance and has refused to submit to examination or treatment by a physician, psychiatrist, psychologist or advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120.
- 2. [If a] A child who is the subject of a petition filed pursuant to this section [is to continue the placement of the child after an emergency admission, the petition must be filed not later than 5 days after the emergency admission or the child must be released.] or the parent or guardian of such a child may oppose the petition:
 - (a) Orally at a hearing on the petition; or
 - (b) By filing a written opposition with the court.
 - Sec. 55. NRS 432B.6076 is hereby amended to read as follows:
- 432B.6076 1. [Except as otherwise provided in NRS 432B.6077, if] A child who is the subject of a petition submitted pursuant to NRS 432B.6075 may, after conferring with his or her attorney, submit to the court written consent, or provide oral consent in the record of the court, to continue the emergency admission. Upon receiving such consent, the court may order the continuation of the emergency admission if it finds that continuing the emergency admission is in the best interests of the child.
- 2. A court that receives a petition submitted pursuant to NRS 432B.6075 to continue the emergency admission of a child alleged to be a child with an emotional disturbance to a facility shall conduct a hearing on the petition, unless otherwise ordered by the court.
- 3. Except as otherwise provided in subsection 1, a court may order the continuation of the emergency admission of a child with respect to whom a petition was filed pursuant to NRS 432B.6075 to a facility only if the court finds [, after proceedings for the court ordered admission of a child alleged to be a child with an emotional disturbance who is in the custody of an agency

which provides child welfare services to a facility, including, without limitation, an evidentiary hearing:

- (a) That there is not clear and convincing evidence that the child with respect to whom the hearing was held exhibits observable behavior such that the child is likely to harm himself or herself or others if allowed liberty, the court shall enter its finding to that effect and the child must not be admitted to a facility.
- (b) That there is] by clear and convincing evidence that the child [with respect to whom the hearing was held is in need of treatment in a facility and is likely to harm himself or herself or others if allowed liberty, the court may order the admission of the child for the most appropriate course of treatment. The order of the court must be interlocutory and must not become final if, within 30 days after the admission, the child is unconditionally released from the facility pursuant to NRS 432B.6084.
- 2. Before issuing an order for admission or a renewal thereof, the court shall explore other alternative courses of treatment within the least restrictive appropriate environment as suggested by the evaluation team who evaluated the child, or other persons professionally qualified in the field of psychiatric mental health, which the court believes may be in the best interests of the child.1:
 - (a) Is a child with an emotional disturbance; and
- (b) Is a person in a mental health crisis, as defined in NRS 433A.0175, and presents a substantial likelihood of serious harm to himself or herself or others, as determined pursuant to NRS 433A.0195, if discharged to a less restrictive appropriate environment.
- 4. The court shall issue a written order on a petition submitted pursuant to NRS 432B.6075. If the court:
- (a) Orders the continuation of the emergency admission, the order must include specific findings concerning each factor prescribed by subsection 3.
- (b) Does not order the continuation of the emergency admission, the court must enter its findings to that effect and order the discharge of the child from the facility.
 - Sec. 56. NRS 432B.6078 is hereby amended to read as follows:
- 432B.6078 1. [Not later than 5 days after a child who is in the custody of an agency which provides child welfare services has been admitted to a facility pursuant to NRS 432B.6076, the agency which provides child welfare services shall inform the child of his or her legal rights and the provisions of NRS 432B.607 to 432B.6085, inclusive, 433.456 to 433.543, inclusive, and 433.545 to 433.551, inclusive, and chapters 433A and 433B of NRS and NRS 435.530 to 435.635, inclusive, and, if the child or the child's attorney desires, assist the child in requesting] A child or a parent or legal guardian of the child who opposes a petition to continue an emergency admission pursuant to subsection 2 of NRS 432B.6075 may petition the court to authorize a second examination [by an evaluation team that includes a physician, psychiatrist or licensed psychologist who are not employed by,

connected to or otherwise affiliated with the facility other than a physician, psychiatrist or licensed psychologist who performed an original examination which authorized the court to order the admission of the child to the facility.] of any child examined pursuant to subsection 1 of NRS 432B.6075. The court shall authorize a second examination upon receiving such a petition. A second examination must be [conducted] completed not later than [5 business] 6 days after the court authorizes the examination.

- 2. If the court authorizes a second examination of the child, the examination must:
- (a) Be conducted by a physician, psychiatrist, psychologist or advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 who is not:
- (1) The same physician, psychiatrist, psychologist or advanced practice registered nurse who completed the certificate pursuant to subsection 1 of NRS 432B.6075 or a physician, psychologist or advanced practice registered nurse who participated in the examination conducted pursuant to that subsection; or
- (2) Employed by, connected to or otherwise affiliated with the facility where the child is admitted:
- (b) Include, without limitation, an evaluation [concerning whether the child should remain in the facility and a recommendation concerning the appropriate placement of the child which must be provided to the facility;] of the diagnosis of the child, whether the child presents a substantial likelihood of serious harm to himself or herself or others, as determined pursuant to NRS 433A.0195, and whether the emergency admission should be continued; and
- $\{(b)\}\$ (c) Be paid for by the governmental entity that is responsible for the agency which provides child welfare services, if such payment is not otherwise provided by the State Plan for Medicaid.
 - Sec. 57. NRS 432B.6079 is hereby amended to read as follows:
- 432B.6079 In determining pursuant to NRS 432B.6076 and 432B.608 whether to issue or renew an order [for] to continue the emergency admission of a child who is in the custody of an agency which provides child welfare services to a facility, the court shall consider:
- 1. The reports of any examinations or evaluations of a child by any [psychologist, psychiatrist or other physician;] person professionally qualified in the field of psychiatric mental health;
- 2. Any information concerning [the child provided to the court by a licensed clinical social worker or other professional or any adult caretaker who is knowledgeable about the child or a guardian ad litem appointed for the child pursuant to NRS 432B.500;] whether the child presents a substantial likelihood of serious harm to himself or herself or others provided by:

- (a) A person professionally qualified in the field of psychiatric mental health;
 - (b) A representative of the agency which provides child welfare services;
 - (c) An adult caretaker who is knowledgeable about the child; or
- (d) A guardian ad litem appointed for the child pursuant to NRS 432B.500;
- 3. The wishes of the child concerning care, treatment [and training] and [placement in a] emergency admission to the facility;
- 4. The best interests of the child, including, without limitation, whether the court believes the child might experience any psychological trauma from [court-ordered] continued emergency admission;
 - 5. Any alternative care $\frac{1}{1}$ or treatment for training options; and
 - 6. Any other information the court deems relevant concerning the child.
 - Sec. 58. NRS 432B.608 is hereby amended to read as follows:
- 432B.608 1. If the court issues an order [for] to continue the emergency admission to a facility of a child who is in the custody of an agency which provides child welfare services pursuant to NRS 432B.6076, the [admission automatically expires at the end of 90 days if not terminated previously by the facility as provided for in subsection 2 of NRS 432B.6084.
- 2. At the end of the court ordered period of treatment, the agency which provides child welfare services, the Division of Child and Family Services or any facility may petition to renew the admission of the child for additional periods not to exceed 60 days each.
- 3. For each renewal, the petition must set forth the specific reasons why further treatment in the facility would be in the best interests of the child and the court shall apply the same standards when considering a petition to renew the admission of the child as were applied for the original petition for the court ordered admission of the child.] order must be interlocutory, and the child must be discharged from the facility if the order is not renewed within 14 days after the order is issued.
- 2. A facility may unconditionally release a child who is admitted under an emergency admission that has been continued pursuant to NRS 432B.6076 without a prior order of the court upon the written recommendation of the psychiatrist and other person professionally qualified in the field of psychiatric mental health who are responsible for treating the child. Upon receipt of such a recommendation, the facility shall provide notice of the recommendation to the agency which provides child welfare services and the agency shall notify all parties and the court. Such notice must include, without limitation, an explanation of the reasons that:
 - (a) The release is clinically appropriate; and
- (b) The child is capable of being safely and effectively treated in a less restrictive appropriate environment.
 - Sec. 59. NRS 432B.6081 is hereby amended to read as follows:
- 432B.6081 A facility which provides care $\frac{1}{12}$ or treatment $\frac{1}{12}$ to a child who is in the custody of an agency which provides child welfare

services and who is admitted to the facility *under an emergency admission continued* pursuant to NRS 432B.6076 shall develop a *written* plan, in consultation with the child, for the continued care [-] *or* treatment [and training] of the child upon discharge from the facility. The plan must:

- 1. Be developed [not later than 10 days after the child is admitted] at the time of the emergency admission of a child to the facility [:] and revised on an ongoing basis for the duration of the emergency admission based on the clinical status of the child;
- 2. Be submitted to the court after each period of admission ordered by the court pursuant to NRS 432B.6076 in the manner set forth in NRS 432B.608; and
 - 3. Include, without limitation:
 - (a) The anticipated date of discharge of the child from the facility;
- (b) The name of any [psychiatrist or psychologist] person professionally qualified in the field of psychiatric mental health who will provide care [,] or treatment [or training] to the child after the child is discharged from the facility, if [appropriate;] known;
- (c) A plan for any appropriate care [,] or treatment [or training] for the child for at least 30 days after the child is discharged from the facility; and
- (d) The [suggested] recommended type of placement [of] for the child after the child is discharged from the facility.
 - Sec. 60. NRS 432B.60845 is hereby amended to read as follows:
- 432B.60845 A facility which provides care [,] *or* treatment [or training] to a child who is in the custody of an agency which provides child welfare services and who is admitted to the facility pursuant to NRS 432B.6076 *or section 38 of this act* shall:
- 1. Ensure that each employee of the facility who comes into direct contact with children at the facility receives, within 90 days after employment and annually thereafter, training that has been approved by the Division of Child and Family Services concerning working with lesbian, gay, bisexual, transgender and questioning children;
- 2. Ensure that each child who is placed in the facility is treated in all respects in accordance with the child's gender identity or expression; and
- 3. Follow the protocols prescribed in the regulations adopted pursuant to NRS 432B.172 when placing the child within the facility.
 - Sec. 61. NRS 432B.60847 is hereby amended to read as follows:
- 432B.60847 1. A psychiatric hospital to which a child who is in the custody of an agency which provides child welfare services is admitted pursuant to NRS 432B.6076 or section 38 of this act shall, in consultation with the public or private school in which the child was enrolled when he or she was admitted to the psychiatric hospital, any school district in which the child was enrolled or which was providing services to the child when he or she was admitted to the psychiatric hospital, the agency which provides child welfare services and any person responsible for the education of the child, develop a plan for the continued education of the child while the child

remains enrolled in the public or private school or the school district yet is admitted to the psychiatric hospital. The plan must be:

- (a) Provided to the child, the agency which provides child welfare services, the child's caseworker, if applicable, any person responsible for the education of the child, the school and, if applicable, the school district; and
- (b) Submitted to the court after each period of admission ordered by the court pursuant to NRS 432B.6076 in the manner set forth in NRS 432B.608 [-] or section 38 of this act in the manner set forth in section 41 of this act.
- 2. A plan for the continued education of a child developed pursuant to subsection 1 must include, without limitation:
- (a) The number of hours of instruction each week that must be provided to the child while the child is admitted to the psychiatric hospital;
- (b) Provisions for the transfer of instructional materials to the psychiatric hospital from the school in which the child was enrolled when he or she was admitted to the psychiatric hospital;
- (c) Procedures for monitoring the implementation of the plan and the appropriateness of the instruction being provided to the child;
- (d) If an individualized education program or services plan has been developed for the child and provided to the psychiatric hospital pursuant to NRS 392.857 or 394.1998, provisions to ensure that the psychiatric hospital maintains compliance with the individualized education program or services plan, as applicable; and
- (e) A plan for continuing the education of the child after he or she is discharged from the psychiatric hospital, including, without limitation, a plan for transitioning the child into a school or any other educational setting in which the child will receive instruction after discharge.
- 3. Before admission of a child who is in the custody of an agency which provides child welfare services to a facility which provides residential treatment for mental illness, the public or private school or any school district in which the child was enrolled or which was providing services to the child when he or she was admitted to the facility must:
- (a) For a child who is a pupil with a disability, convene an individualized education program meeting to consider the appropriateness of a residential placement under federal law as it relates to the child's education needs;
- (b) Convene a meeting of representatives of the public or private school in which the child was enrolled, the school district in which the child was enrolled, the agency which provides child welfare services, any person responsible for the education of the child and any other organization that provides support to the child, as appropriate, to consider, pursuant to the statewide framework for integrated student supports established pursuant to NRS 388.885, the appropriateness of a residential placement;
- (c) Monitor the child's progress while the child is admitted to the facility; and
- (d) Participate in discharge planning for transitioning the child into a school or any other educational setting in which the child will receive

instruction after discharge. The Department of Education shall adopt regulations necessary to carry out the provisions of this paragraph.

- 4. As used in this section:
- (a) "Individualized education program" has the meaning ascribed to it in 20 U.S.C. § 1414(d)(1)(A).
- (b) "Person responsible for the education of the child" includes, without limitation, the parent or guardian of the child and any educational decision maker appointed for the child pursuant to NRS 432B.462.
 - (c) "Private school" has the meaning ascribed to it in NRS 394.103.
- (d) "Public school" includes, without limitation, a university school for profoundly gifted pupils.
 - (e) "Services plan" has the meaning ascribed to it in 34 C.F.R. § 300.37.
 - Sec. 62. NRS 432B.6085 is hereby amended to read as follows:
- 432B.6085 1. Nothing in this chapter purports to deprive any person of any legal rights without due process of law.
- 2. Unless the context clearly indicates otherwise, the provisions of NRS 432B.607 to 432B.6085, inclusive, and sections 35.3 to 42, inclusive, of this act, 433.456 to 433.543, inclusive, and 433.545 to 433.551, inclusive, and chapters 433A and 433B of NRS and NRS 435.530 to 435.635, inclusive, apply to all children who are in the custody of an agency which provides child welfare services.
 - Sec. 63. NRS 433A.145 is hereby amended to read as follows:
- 433A.145 1. If a person in a mental health crisis is admitted to a public or private mental health facility or hospital as a voluntary consumer, the facility or hospital shall not change the status of the person to an emergency admission unless:
- (a) A person described in NRS 433A.160 places the person on a mental health crisis hold; and
 - (b) The requirements prescribed by NRS 433A.162 have been met.
- 2. Except as otherwise provided in subsection 3 [-] and NRS 432B.6075, a person whose status is changed pursuant to subsection 1 must not be detained in excess of 72 hours, including weekends and holidays, after the person is placed on a mental health crisis hold pursuant to NRS 433A.160 unless, before the close of the business day on which the 72 hours expires, a written petition for an involuntary court-ordered admission to a mental health facility is filed with the clerk of the district court pursuant to NRS 433A.200, including, without limitation, the documents required pursuant to NRS 433A.210.
- 3. If the period specified in subsection 2 expires on a day on which the office of the clerk of the district court is not open, the written petition must be filed on or before the close of the business day next following the expiration of that period.
 - Sec. 64. NRS 433A.150 is hereby amended to read as follows:
- 433A.150 1. A person alleged to be a person in a mental health crisis who is placed on a mental health crisis hold pursuant to NRS 433A.160 may,

subject to the provisions of subsection 2, be detained in a public or private mental health facility or hospital for assessment, evaluation, intervention and treatment, regardless of whether any parent or legal guardian of the person has consented to the mental health crisis hold.

- 2. Except as otherwise provided in subsection 3 [.] and NRS 432B.6075, a person detained pursuant to subsection 1 must be released within 72 hours, including weekends and holidays, after the person is placed on a mental health crisis hold pursuant to NRS 433A.160 unless, before the close of the business day on which the 72 hours expires, a written petition for an involuntary court-ordered admission to a mental health facility is filed with the clerk of the district court pursuant to NRS 433A.200, including, without limitation, the documents required pursuant to NRS 433A.210, or the status of the person is changed to a voluntary admission.
- 3. If the period specified in subsection 2 expires on a day on which the office of the clerk of the district court is not open, the written petition must be filed on or before the close of the business day next following the expiration of that period.
 - Sec. 65. NRS 433A.200 is hereby amended to read as follows:
- 433A.200 1. Except as otherwise provided in NRS 432B.6075 [+] and section 37 of this act, a proceeding for an involuntary court-ordered admission of any person in the State of Nevada may be commenced by the filing of a petition for the involuntary admission to a mental health facility with the clerk of the district court of the county where the person who is to be treated resides or the county where a mental health facility that is willing to admit the person is located. The petition may be filed by any physician, physician assistant, psychologist, social worker or registered nurse or by any officer authorized to make arrests in the State of Nevada. The petition must be accompanied:
- (a) By a certificate of a physician, a psychologist, a physician assistant under the supervision of a psychiatrist, a clinical social worker who has the psychiatric training and experience prescribed by the Board of Examiners for Social Workers pursuant to NRS 641B.160 or an advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 stating that he or she has examined the person alleged to be a person in a mental health crisis and has concluded that the person is a person in a mental health crisis; or
 - (b) By a sworn written statement by the petitioner that:
- (1) The petitioner has, based upon the petitioner's personal observation of the person alleged to be a person in a mental health crisis, probable cause to believe that the person is a person in a mental health crisis and the person alleged to be a person in a mental health crisis has refused to submit to examination or treatment by a physician, psychiatrist, psychologist or advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120; or

- (2) The person alleged to be a person in a mental health crisis has been placed on a mental health crisis hold pursuant to NRS 433A.160 and the physician, physician assistant or advanced practice registered nurse who examined the person alleged to be a person with a mental health crisis pursuant to NRS 433A.165 determined that the person has a medical condition, other than a psychiatric condition, which requires immediate treatment.
- 2. Except as otherwise provided in NRS 432B.6075 [-] and section 37 of this act, if the person to be treated is an unemancipated minor and the petitioner is a person other than a parent or guardian of the minor, a petition submitted pursuant to subsection 1 must, in addition to the certificate or statement required by that subsection, include a statement signed by a parent or guardian of the minor that the parent or guardian does not object to the filing of the petition.
 - Sec. 66. NRS 433A.310 is hereby amended to read as follows:
- 433A.310 1. Except as otherwise provided in NRS 432B.6076 and [432B.6077,] section 38 of this act, if the district court finds, after proceedings for the involuntary court-ordered admission of a person:
- (a) That there is not clear and convincing evidence that the person with respect to whom the hearing was held is a person in a mental health crisis, the court must enter its finding to that effect and the person must not be involuntarily admitted to a public or private mental health facility. If the person has been detained in a public or private mental health facility or hospital under a mental health crisis hold pursuant to NRS 433A.160, including, without limitation, where the person has been admitted under an emergency admission pursuant to NRS 433A.162, the court must issue a written order requiring the facility or hospital to release the person not later than 24 hours after the court issues the order, unless the person applies for admission as a voluntary consumer pursuant to NRS 433A.140.
- (b) That there is clear and convincing evidence that the person with respect to whom the hearing was held is a person in a mental health crisis, the court may order the involuntary admission of the person to a public or private mental health facility. The order of the court must be interlocutory and must not become final if, within 30 days after the involuntary admission, the person is unconditionally released pursuant to NRS 433A.390.
- 2. Except as otherwise provided in NRS 432B.608 [-] and section 41 of this act, an involuntary admission pursuant to paragraph (b) of subsection 1 automatically expires at the end of 6 months if not terminated previously by the medical director of the public or private mental health facility after a determination by the physician primarily responsible for treating the patient, a psychiatrist or an advanced practice registered nurse as provided for in subsection 3 of NRS 433A.390. Except as otherwise provided in NRS 432B.608 [-] and section 41 of this act, at the end of the involuntary court-ordered admission, the Division or any mental health facility that is not operated by the Division may petition to renew the involuntary admission of

the person for additional periods not to exceed 6 months each. For each renewal, the petition must include evidence which meets the same standard set forth in subsection 1 that was required for the initial period of admission of the person to a public or private mental health facility.

- 3. Before issuing an order for involuntary admission or a renewal thereof, the court shall explore other alternative courses of treatment within the least restrictive appropriate environment, including assisted outpatient treatment, as suggested by the evaluation team who evaluated the person, or other persons professionally qualified in the field of psychiatric mental health, which the court believes may be in the best interests of the person.
- 4. If the court issues an order involuntarily admitting a person to a public or private mental health facility pursuant to this section, the court must, notwithstanding the provisions of NRS 433A.715, cause, within 5 business days after the order becomes final pursuant to this section, on a form prescribed by the Department of Public Safety, a record of the order to be transmitted to:
- (a) The Central Repository for Nevada Records of Criminal History, along with a statement indicating that the record is being transmitted for inclusion in each appropriate database of the National Instant Criminal Background Check System; and
- (b) Each law enforcement agency of this State with which the court has entered into an agreement for such transmission, along with a statement indicating that the record is being transmitted for inclusion in each of this State's appropriate databases of information relating to crimes.
- 5. After issuing an order pursuant to this section, a court shall not transfer the case to another court.
- 6. A public or private mental health facility to which a person is involuntarily admitted pursuant to this section shall notify the court and the counsel for the person if the person is transferred to another facility.
- 7. As used in this section, "National Instant Criminal Background Check System" has the meaning ascribed to it in NRS 179A.062.
 - Sec. 67. NRS 433A.390 is hereby amended to read as follows:
- 433A.390 1. When a consumer, involuntarily admitted to a mental health facility or required to receive assisted outpatient treatment by court order, is released at the end of the period specified pursuant to NRS 433A.310 or 433A.343, as applicable, written notice must be given to the court that issued the order not later than 3 judicial days after the release of the consumer. The consumer may be released without requiring further orders of the court. If the consumer has a legal guardian, the facility or the person professionally qualified in the field of psychiatric mental health responsible for providing the assisted outpatient treatment shall notify the guardian in the manner prescribed by subsection 6 at least 3 days before discharging the consumer from the facility or treatment or, if the consumer will be released in less than 3 days, as soon as practicable.

- 2. The legal guardian of a consumer involuntarily admitted to a mental health facility, if applicable, has discretion to determine where the consumer will be released pursuant to subsection 1, taking into consideration any discharge plan proposed by the facility assessment team. If the legal guardian does not inform the facility as to where the consumer will be released within 3 days after the date of notification, the facility must discharge the consumer according to its proposed discharge plan.
- 3. [A] Except as otherwise provided in NRS 432B.608 and section 41 of this act, a consumer who is involuntarily admitted to a mental health facility may be unconditionally released before the period specified in NRS 433A.310 when the physician primarily responsible for treating the patient, a psychiatrist or an advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 determines that the consumer is no longer a person in a mental health crisis. If the consumer has a legal guardian, the facility shall notify the guardian in the manner prescribed by subsection 6 at least 3 days before discharging the consumer from the facility or, if the consumer will be released in less than 3 days, as soon as practicable. The legal guardian, if applicable, has discretion to determine where the consumer will be released, taking into consideration any discharge plan proposed by the facility assessment team. If the legal guardian does not inform the facility as to where the consumer will be released within 3 days after the date of notification, the facility shall discharge the consumer according to its proposed discharge plan.
- 4. A consumer who is required to receive assisted outpatient treatment may be unconditionally released before the period specified in NRS 433A.343 when the person professionally qualified in the field of psychiatric mental health responsible for providing the assisted outpatient treatment for the consumer determines that:
- (a) The consumer no longer requires assisted outpatient treatment to prevent further disability or deterioration that would result in the person becoming a person in a mental health crisis;
- (b) The consumer is willing and likely to voluntarily participate in outpatient treatment that enables the person to live safely in the community without the supervision of the court; or
- (c) After the order for assisted outpatient treatment has been effective for at least 30 days, the assisted outpatient treatment is not meeting the needs of the consumer.
- 5. If a consumer who will be released from assisted outpatient treatment pursuant to subsection 4 has a legal guardian, the person professionally qualified in the field of psychiatric mental health responsible for providing the assisted outpatient treatment to the consumer shall notify the guardian in the manner prescribed by subsection 6 at least 3 days before discharging the consumer from the treatment or, if the consumer will be released in less than 3 days, as soon as practicable.

- 6. Notification of a guardian pursuant to subsection 1, 3 or 5 must be provided:
 - (a) In person or by telephone; or
- (b) If the mental health facility or the person professionally qualified in the field of psychiatric mental health, as applicable, is not able to contact the guardian in person or by telephone, by facsimile, electronic mail or certified mail.
- 7. A mental health facility or a person professionally qualified in the field of psychiatric mental health responsible for providing treatment to a consumer shall provide written notice to the court that issued the order not later than 3 judicial days after unconditionally releasing a consumer pursuant to subsection 3 or 4.
 - Sec. 68. [NRS 481.001 is hereby amended to read as follows:
- 481.091 1. The following persons may request that the Department display an alternate address on the person's driver's license, commercial driver's license or identification card:
- (a) Any justice or judge in this State.
- (b) Any senior justice or senior judge in this State.
- (c) Any court appointed master or magistrate in this State.
- —(d) Any clerk of the court, court administrator or court executive officer in this State.
- (e) Any prosecutor who as part of his or her normal job responsibilities
 - (1) Crimes that are punishable as category A felonies; or
 - (2) Domostic violence.
- (f) Any state or county public defender who as part of his or her normal job responsibilities defends persons for:
 - (1) Crimes that are punishable as category A felonies; or
 - (2) Domestie violence.
- —(g) Any person employed by the Office of the Attorney General who prosecutes or defends actions on behalf of the State of Nevada or any agency in the Executive Department of the State Government.
- (h) Any person, including, without limitation, a social worker, employed by this State or a political subdivision of this State who as part of his or her normal job responsibilities:
- (1) Interacts with the public; and
- (2) Performs tasks related to child welfare services or child protective services or tasks that expose the person to comparable dangers.
- (i) Any county manager in this State.
- (j) Any inspector, officer or investigator employed by this State or a political subdivision of this State designated by his or her employer:
- (1) Who possesses specialized training in code enforcement:
- (2) Who, as part of his or her normal job responsibilities, interacts with the public; and

- (3) Whose primary duties are the performance of tasks related to code enforcement.
- (k) Any county or city clerk or registrar of voters charged with the powers and duties relating to elections and any deputy appointed by the county or city clerk or registrar of voters in the elections division of the county or city.
- (1) The spouse, domestic partner or minor child of a person described in paragraphs (a) to (k), inclusive.
- (m) The surviving spouse, domestic partner or minor child of a person described in paragraphs (a) to (k), inclusive, who was killed in the performance of his or her duties.
- (n) Any person for whom a fictitious address has been issued pursuant to NRS 217.462 to 217.471, inclusive.
- 2. A person who wishes to have an alternate address displayed on his or her driver's license, commercial driver's license or identification card pursuant to this section must submit to the Department satisfactory proof:
- (a) That he or she is a person described in subsection 1; and
- (b) Of the person's address of principal residence and mailing address, if different from the address of principal residence.
- 3. A person who obtains a driver's license, commercial driver's license or identification card that displays an alternate address pursuant to this section may subsequently submit a request to the Department to have his or her address of principal residence displayed on his or her driver's license, commercial driver's license or identification card instead of the alternate address.
- 4. The Department may adopt regulations to carry out the provisions of this section.
- 5. As used in this section:
- (a) "Child protective services" has the meaning ascribed to it in NRS 432R-042
- (b) "Child welfare services" has the meaning ascribed to it in NRS 432B-044
- (e) "Code enforcement" means the enforcement of laws, ordinances or codes regulating public nuisances or the public health, safety and welfare.
- (d) "Social worker" means any person licensed under chapter 641B of NRS.] (Deleted by amendment.)
 - Sec. 69. [NRS 483.443 is hereby amended to read as follows:
- 483.443 1. The Department shall, upon receiving notification from a district attorney or other public agency collecting support for children pursuant to NRS 425.510 that a court has determined that a person:
- (a) Has failed to comply with a subpoena or warrant relating to a proceeding to establish paternity or to establish or enforce an obligation for the support of a child; or
- —(b) Is in arrears in the payment for the support of one or more children,

- 2. The notice must include:
- (a) The reason for the suspension of the license;
- (b) The information set forth in subsections 3, 5 and 6; and
- (e) Any other information the Department deems necessary.
- 3. If a person who receives a notice pursuant to subsection 1 does not, within 30 days after receiving the notice, comply with the subpoena or warrant or satisfy the arrearage as required in NRS 425.510, the Department shall suspend the license without providing the person with an opportunity for a hearing.
- 4. The Department shall suspend immediately the license of a defendant if so ordered pursuant to NRS 62B.420 or 484A.7047.
- -5. The Department shall reinstate the driver's license of a person whose license was suspended pursuant to this section if it receives:
- (a) A notice from any of the following:
- (1) The district attorney or other public agency pursuant to NRS 425.510 that the person has complied with the subpoena or warrant or has satisfied the arrearage pursuant to that section.
- (2) A traffic commissioner, referee, hearing master, magistrate appointed by the court, municipal judge, justice of the peace or district judge, as applicable, that a delinquency for which the suspension was ordered pursuant to NRS 484A.7047 has been discharged.
- (3) A judge of the juvenile court that an unsatisfied civil judgment for which the suspension was ordered pursuant to NRS 62B.420 has been satisfied; and
- (b) Payment of the fee for reinstatement of a suspended license prescribed in NRS 483.410.
- —6. The Department shall not require a person whose driver's license was suspended pursuant to this section to submit to the tests and other requirements which are adopted by regulation pursuant to subsection 1 of NRS 483.495 as a condition of the reinstatement of the license.] (Deleted by amendment.)
 - Sec. 70. NRS 632.120 is hereby amended to read as follows:
 - 632.120 1. The Board shall:
 - (a) Adopt regulations establishing reasonable standards:
- (1) For the denial, renewal, suspension and revocation of, and the placement of conditions, limitations and restrictions upon, a license to practice professional or practical nursing or a certificate to practice as a nursing assistant or medication aide certified.
 - (2) Of professional conduct for the practice of nursing.
- (3) For prescribing and dispensing controlled substances and dangerous drugs in accordance with applicable statutes.
- (4) For the psychiatric training and experience necessary for an advanced practice registered nurse to be authorized to make the diagnoses, evaluations and examinations described in NRS 432B.6078, 433A.162, 433A.240, 433A.335, 433A.390, 433A.430, 484C.300, 484C.320, 484C.330,

484C.340 and 484C.350 [+] and section 39 of this act, the certifications described in NRS 432B.6075, 433A.170, 433A.195 and 433A.200 and section 37 of this act and the sworn statements or declarations described in NRS 433A.210 and 433A.335.

- (b) Prepare and administer examinations for the issuance of a license or certificate under this chapter.
- (c) Investigate and determine the eligibility of an applicant for a license or certificate under this chapter.
- (d) Carry out and enforce the provisions of this chapter and the regulations adopted pursuant thereto.
- (e) Develop and disseminate annually to each registered nurse who cares for children information concerning the signs and symptoms of pediatric cancer.
 - 2. The Board may adopt regulations establishing reasonable:
- (a) Qualifications for the issuance of a license or certificate under this chapter.
- (b) Standards for the continuing professional competence of licensees or holders of a certificate. The Board may evaluate licensees or holders of a certificate periodically for compliance with those standards.
- 3. The Board may adopt regulations establishing a schedule of reasonable fees and charges, in addition to those set forth in NRS 632.345, for:
- (a) Investigating licensees or holders of a certificate and applicants for a license or certificate under this chapter;
- (b) Evaluating the professional competence of licensees or holders of a certificate;
 - (c) Conducting hearings pursuant to this chapter;
 - (d) Duplicating and verifying records of the Board; and
- (e) Surveying, evaluating and approving schools of practical nursing, and schools and courses of professional nursing,
- → and collect the fees established pursuant to this subsection.
- 4. For the purposes of this chapter, the Board shall, by regulation, define the term "in the process of obtaining accreditation."
- 5. The Board may adopt such other regulations, not inconsistent with state or federal law, as may be necessary to carry out the provisions of this chapter relating to nursing assistant trainees, nursing assistants and medication aides-certified.
- 6. The Board may adopt such other regulations, not inconsistent with state or federal law, as are necessary to enable it to administer the provisions of this chapter.
 - Sec. 71. (Deleted by amendment.)
- Sec. 71.5. [The changes made by sections 17 and 29 of this act must not be construed to require the Division of Welfare and Supportive Services of the Department of Health and Human Services to modify any of the forms generated by the computer systems of the Division for the purpose of

changing the term "master" to the term "magistrate." The term "master," as used in any such forms, shall be deemed to refer to a child support magistrate as set forth in sections 17 and 29 of this act.] (Deleted by amendment.)

- Sec. 72. 1. The provisions of sections 32, 33 and 34 of this act apply to any proceedings to which those provisions would otherwise apply which are instituted before, on or after October 1, 2023.
- 2. The provisions of section 35 of this act apply to any child in the custody of an agency which provides child welfare services who is placed in a qualified residential treatment program before, on or after October 1, 2023.
- 3. The provisions of section 36 and 75 of this act apply to any child in the custody of an agency which provides child welfare services who has been admitted to a facility where the admission is effective on or after October 1, 2023.
- 4. The provisions of sections 37 to 42, inclusive, of this act apply to any child in the custody of an agency which provides child welfare services:
 - (a) Who has been admitted to a facility; and
- (b) Whose status is not that of an emergency consumer on or after October 1, 2023, regardless of the date on which he or she was admitted.
- 5. The amendatory provisions of sections 54 to 59, inclusive, of this act apply to any child in the custody of an agency which provides child welfare services:
 - (a) Who has been admitted to a facility; and
- (b) Whose status is that of an emergency consumer on or after October 1, 2023, regardless of the date on which he or she was admitted.
 - 6. As used in this section:
- (a) "Agency which provides child welfare services" has the meaning ascribed to it in NRS 432B.030.
 - (b) "Facility" has the meaning ascribed to it in NRS 432B.6072.
- (c) "Qualified residential treatment program" has the meaning ascribed to it in section 31 of this act.
- Sec. 73. The provisions of NRS 354.599 do not apply to any additional expenses of a local government that are related to the provisions of this act.
- Sec. 74. [The Legislative Counsel shall, in preparing the Nevada Revised Statutes, use the authority set forth in subsection 10 of NRS 220.120 to substitute appropriately:
- 1. The term "juvenile magistrate" for the term "master" or "master of the juvenile court" as previously used in title 5 and chapter 432B of NRS; and
- 2. The term "child support magistrate" for the term "master" as previously used in chapter 425 of NRS.] (Deleted by amendment.)
- Sec. 75. NRS 432B.6077, 432B.6083 and 432B.6084 are hereby repealed.
 - Sec. 76. 1. This section becomes effective upon passage and approval.
- 2. Sections 1 to 51, inclusive, and 53 to 75, inclusive, of this act become effective:

- (a) Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
 - (b) On October 1, 2023, for all other purposes.
 - 3. Section 52 of this act becomes effective on January 1, 2024.

TEXT OF REPEALED SECTIONS

432B.6077 Petition required before child may be placed in facility other than under emergency admission; psychological examination of child required under certain circumstances; placement in less restrictive environment; any person may oppose petition.

- 1. An agency which provides child welfare services shall not place a child who is in the custody of the agency in a facility, other than under an emergency admission, unless the agency has petitioned the court for the court-ordered admission of the child to a facility pursuant to NRS 432B.6075.
- 2. If a petition for the court-ordered admission of a child filed pursuant to NRS 432B.6075 is accompanied by the information described in paragraph (b) of subsection 1 of NRS 432B.6075, the court shall order a psychological evaluation of the child.
- 3. If a court which receives a petition filed pursuant to NRS 432B.6075 for the court-ordered admission to a facility of a child who is in the custody of an agency which provides child welfare services determines pursuant to subsection 2 of NRS 432B.6076 that the child could be treated effectively in a less restrictive appropriate environment than a facility, the court must order the placement of the child in a less restrictive appropriate environment. In making such a determination, the court may consider any information provided to the court, including, without limitation:
 - (a) Any information provided pursuant to subsection 4;
- (b) Any suggestions of psychologists, psychiatrists or other physicians who have evaluated the child concerning the appropriate environment for the child; and
- (c) Any suggestions of licensed clinical social workers or other professionals or any adult caretakers who have interacted with the child and have information concerning the appropriate environment for the child.
- 4. If a petition for the court-ordered admission of a child who is in the custody of an agency which provides child welfare services is filed pursuant to NRS 432B.6075:
- (a) Any person, including, without limitation, the child, may oppose the petition for the court-ordered admission of the child by filing a written opposition with the court or stating the opposition in court; and
- (b) The agency which provides child welfare services must present information to the court concerning whether:
- (1) A facility is the appropriate environment to provide treatment to the child; or

- (2) A less restrictive appropriate environment would serve the needs of the child.
- 432B.6083 Conditional release: Authorized circumstances; duration; no liability of State; notice to court and attorney of agency; order to return to facility; judicial review of order to return to facility.
- 1. Except as otherwise provided in subsection 3, any child who is admitted to a facility by a court pursuant to NRS 432B.6076 may be conditionally released from the facility when, in the judgment of the medical director of the facility, the conditional release is in the best interest of the child and will not be detrimental to the public welfare. The medical director of the facility or the designee of the medical director shall prescribe the period for which the conditional release is effective. The period must not extend beyond the last day of the court-ordered period of treatment specified pursuant to NRS 432B.608.
- 2. When a child is conditionally released pursuant to subsection 1, the State or a county, or any of its agents or employees, is not liable for any debts or contractual obligations, medical or otherwise, incurred or damages caused by the actions of the child.
- 3. A child who was admitted by a court because the child was likely to harm others if allowed to remain at liberty may be conditionally released only if, at the time of the release, written notice is given to the court which admitted the child and to the attorney of the agency which provides child welfare services that initiated the proceedings for admission.
- 4. Except as otherwise provided in subsection 6, the administrative officer of a facility or the designee of the administrative officer shall order a child who is conditionally released from that facility pursuant to this section to return to the facility if a psychiatrist and a member of that child's treatment team who is professionally qualified in the field of psychiatric mental health determine that the conditional release is no longer appropriate because that child presents a clear and present danger of harm to himself or herself or others. Except as otherwise provided in this subsection, the administrative officer or the designee of the administrative officer shall, at least 3 days before the issuance of the order to return, give written notice of the order to the court that admitted the child to the facility. If an emergency exists in which the child presents an imminent threat of danger of harm to himself or herself or others, the order must be submitted to the court not later than 1 business day after the order is issued.
- 5. The court shall review an order submitted pursuant to subsection 4 and the current condition of the child who was ordered to return to the facility at its next regularly scheduled hearing for the review of petitions for court-ordered admissions, but in no event later than 5 judicial days after the child is returned to the facility. The administrative officer or the designee of the administrative officer shall give written notice to the agency which provides child welfare services, to the child who was ordered to return to the

facility and to the child's attorney of the time, date and place of the hearing and of the facts necessitating that child's return to the facility.

6. The provisions of subsection 4 do not apply if the period of conditional release has expired.

432B.6084 Release without further order of court; early release.

- 1. When a child who is admitted to a facility by a court pursuant to NRS 432B.6076 is released at the end of the court-ordered period of treatment specified pursuant to NRS 432B.608, written notice must be given to the admitting court at least 10 days before the release of the child. The child may then be released without requiring further orders of the court.
- 2. A child who is admitted to a facility by a court pursuant to NRS 432B.6076 may be unconditionally released before the court-ordered period of treatment specified in NRS 432B.608 when:
- (a) An evaluation team, including, without limitation, an evaluation team that conducts an examination pursuant to NRS 432B.6078, or two persons professionally qualified in the field of psychiatric mental health, at least one of them being a physician, determines that the child has recovered from any emotional disturbance or has improved to such an extent that the child is no longer considered to present a clear and present danger of harm to himself or herself or others; and
- (b) Under advisement from the evaluation team or two persons professionally qualified in the field of psychiatric mental health, at least one of them being a physician, the medical director of the facility authorizes the release and gives written notice to the admitting court at least 10 days before the release of the child.

Senator Scheible moved the adoption of the amendment.

Remarks by Senator Scheible.

Amendment No. 921 to Assembly Bill No. 148 deletes provisions of the bill addressing the duties of magistrates and court masters.

Amendment adopted.

Bill ordered reprinted, re-engrossed and to third reading.

Assembly Bill No. 156.

Bill read second time.

The following amendment was proposed by the Committee on Health and Human Services:

Amendment No. 938.

SUMMARY—Revises provisions relating to substance use disorders. (BDR 40-331)

AN ACT relating to substance use disorders; providing for the separate accounting of certain money for the purchase of opioid antagonists; establishing the order in which a provider or program is required to prioritize persons for participation in certain publicly funded programs for the treatment of alcohol or other substance use disorders; authorizing a pharmacist to prescribe and dispense drugs for medication-assisted treatment

of opioid use disorder and perform certain assessments under certain conditions; requiring certain health plans to include coverage for such drugs and assessments; prescribing certain requirements concerning the diagnosis and treatment of a patient with an opioid use disorder; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires all gifts or grants of money for a program for alcohol or other substance use disorders which the Division of Public and Behavioral Health of the Department of Health and Human Services is authorized to accept to be deposited in the State Treasury for credit to the State Grant and Gift Account for Alcohol or Other Substance Use Disorders. (NRS 458.100) Sections [11] 1.28 and 1.3 of this bill authorize the Division to accept and deposit into a separate account gifts, grants, donations, bequests or money from any other source for the purpose of funding the bulk purchase of opioid antagonists. Section [11] 1.28 provides that such money is not subject to provisions of law governing budgeting by agencies of the State Government. Section [11] 1.28 requires the Division to use the money in the account to fund the bulk purchase of opioid antagonists and the distribution of those opioid antagonists.

Existing federal regulations require programs funded by certain federal grants for injection drug users to prioritize persons for participation in such programs in the following order: (1) pregnant injecting drug users; (2) pregnant persons with a substance use disorder; (3) other injecting drug users; and (4) all others. (45 C.F.R. § 96.131) Section 1.7 of this bill requires any treatment provider, provider of health care or program for the treatment of alcohol or other substance use disorders to prioritize persons to receive services for the treatment of alcohol or other substance use disorders funded in whole or in part by federal or state money in that order, except that section 1.7 authorizes the State Board of Health to adopt regulations prioritizing additional categories of people for such services.

Existing law defines the term "practice of pharmacy" for the purpose of determining which activities require a person to be registered and regulated by the State Board of Pharmacy as a pharmacist. (NRS 639.0124) Section 12.3 of this bill requires the Board to prescribe a protocol to allow a pharmacist who registers with the Board to: (1) assess a patient to determine whether the patient has an opioid use disorder and medication-assisted treatment would be appropriate for the patient; and (2) prescribe and dispense a drug for medication-assisted treatment. [without a prescription from a practitioner.] Section 12.6 of this bill provides that the practice of pharmacy includes actions authorized by the protocol established in section 12.3. [Section 16.05 of this bill makes a conforming change to account for the provisions of section 12.3 authorizing a pharmacist to dispense a drug that has not been prescribed by a practitioner.] Sections 1-1.25 and 12.8 of this bill make additional changes necessary to authorize a pharmacist who registers with the Board to prescribe a drug for medication-assisted

<u>treatment.</u> The Board would be authorized to suspend or revoke the registration of a pharmacist who orders or assesses a patient or prescribes or dispenses drugs under the protocol established pursuant to section 12.3 without complying with the provisions of the protocol. (NRS 639.210)

Sections [3.5-5.8.] 3.5, 4.5, 16.1, 16.3, 16.4, 16.48-16.75 and 16.9 of this bill require public and private health plans, including Medicaid managed care organizations and health plans for state and local government employees, to: (1) cover drugs approved by the Food and Drug Administration for medication-assisted treatment; and (2) reimburse assessment, prescribing and dispensing by a pharmacist in accordance with section 12.3 at a rate equal to that provided to a physician, physician assistant or advanced practice registered nurse for similar services. Section 5.5 of this bill also requires Medicaid to reimburse those services at such a rate, regardless of whether the services are reimbursed directly or through managed care organizations. Sections 2.5 and 16.2 of this bill make conforming changes to indicate the proper placement of sections 5.5 and 16.1, respectively, of this bill in the Nevada Revised Statutes. Sections 6.5, 16.13, 16.16, 16.43 and 16.45 of this bill make conforming changes to indicate that the coverage required by sections 16.1, 16.3 and 16.4 is in addition to certain coverage for the treatment of substance use disorder that certain insurers are required by existing law to provide. Section 16.8 of this bill authorizes the Commissioner of Insurance to suspend or revoke the certificate of a health maintenance organization that fails to comply with the requirements of section 16.7 of this bill. The Commissioner would also be authorized to take such action against other health insurers who fail to comply with the requirements of sections 16.1, 16.3, 16.48-16.6 or 16.9 of this bill. (NRS 680A.200)

Existing law authorizes a physician, physician assistant or advanced practice registered nurse to prescribe controlled substances if he or she is registered with the State Board of Pharmacy. (NRS 453.126, 453.231, 630.271, 632.237, 633.432) Existing federal law requires a physician, physician assistant or advanced practice registered nurse who prescribes or dispenses narcotic drugs for the treatment of opioid use disorder to register with the Drug Enforcement Administration of the United States Department of Justice for the specific purpose of dispensing such drugs. (21 U.S.C. § 822(a)) Sections 10-12 and 13-16 of this bill require a physician, physician assistant, advanced practice registered nurse, osteopathic physician or certain providers of behavioral health care who diagnose a patient with an opioid use disorder to counsel and provide information to the patient concerning evidence-based treatment for opioid use disorder, including medication-assisted treatment. If the patient requests medication-assisted treatment: (1) sections 10-12 require a physician, physician assistant, advanced practice registered nurse or osteopathic physician who is authorized under federal and state law to prescribe such treatment to offer to issue such a prescription; and (2) sections 10-12 and 13-16 require all other physicians, physician assistants, advanced practice registered nurses,

osteopathic physicians and certain providers of behavioral health care to refer the patient to a physician, physician assistant, advanced practice registered nurse, osteopathic physician or pharmacist who is authorized to issue such a prescription.

Existing law requires the Director of the Department of Corrections to establish one or more programs of treatment for offenders with substance use or co-occurring disorders who have been sentenced to imprisonment in the state prison. (NRS 209.4236, 209.425) Existing law additionally provides that the treatment of a prisoner in a local jail or detention facility who has a substance use disorder may include medication-assisted treatment. (NRS 211.140) Section 17.5 of this bill requires the Department of Corrections, in collaboration with the Department of Health and Human Services, and each county, city or town that maintains a jail or detention facility to study during the 2023-2024 interim certain issues relating to the provision of medication-assisted treatment to incarcerated persons.

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

Section 1. NRS 453.126 is hereby amended to read as follows:

453.126 "Practitioner" means:

- 1. A physician, dentist, veterinarian or podiatric physician who holds a license to practice his or her profession in this State and is registered pursuant to this chapter.
- 2. An advanced practice registered nurse who holds a certificate from the State Board of Pharmacy authorizing him or her to dispense or to prescribe and dispense controlled substances.
- 3. A scientific investigator or a pharmacy, hospital or other institution licensed, registered or otherwise authorized in this State to distribute, dispense, conduct research with respect to, to administer, or use in teaching or chemical analysis, a controlled substance in the course of professional practice or research.
- 4. A euthanasia technician who is licensed by the Nevada State Board of Veterinary Medical Examiners and registered pursuant to this chapter, while he or she possesses or administers sodium pentobarbital pursuant to his or her license and registration.
 - 5. A physician assistant who:
 - (a) Holds a license from the Board of Medical Examiners; and
- (b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances under the supervision of a physician as required by chapter 630 of NRS.
 - 6. A physician assistant who:
 - (a) Holds a license from the State Board of Osteopathic Medicine; and
- (b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances under the supervision of an osteopathic physician as required by chapter 633 of NRS.

- 7. An optometrist who is certified by the Nevada State Board of Optometry to prescribe and administer pharmaceutical agents pursuant to NRS 636.288, when the optometrist prescribes or administers pharmaceutical agents within the scope of his or her certification.
- 8. A pharmacist who is registered pursuant to section 12.3 of this act to prescribe and dispense drugs for medication-assisted treatment.
 - Sec. 1.05. NRS 453.128 is hereby amended to read as follows:
 - 453.128 1. "Prescription" means:
- (a) An order given individually for the person for whom prescribed, directly from a physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, podiatric physician, optometrist, advanced practice registered nurse , *pharmacist registered pursuant to section 12.3 of this act* or veterinarian, or his or her agent, to a pharmacist or indirectly by means of an order signed by the practitioner or an electronic transmission from the practitioner to a pharmacist; or
- (b) A chart order written for an inpatient specifying drugs which he or she is to take home upon his or her discharge.
- 2. The term does not include a chart order written for an inpatient for use while he or she is an inpatient.
 - Sec. 1.1. NRS 453.226 is hereby amended to read as follows:
- 453.226 1. Every practitioner or other person who dispenses any controlled substance within this State or who proposes to engage in the dispensing of any controlled substance within this State shall obtain biennially a registration issued by the Board in accordance with its regulations. A person must present proof that he or she is authorized to access the database of the program established pursuant to NRS 453.162 before the Board may issue or renew a registration.
- 2. A person registered by the Board in accordance with the provisions of NRS 453.011 to 453.552, inclusive, to dispense or conduct research with controlled substances may possess, dispense or conduct research with those substances to the extent authorized by the registration and in conformity with the other provisions of those sections.
- 3. The following persons are not required to register and may lawfully possess and distribute controlled substances pursuant to the provisions of NRS 453.011 to 453.552, inclusive:
- (a) An agent or employee of a registered dispenser of a controlled substance if he or she is acting in the usual course of his or her business or employment;
- (b) A common or contract carrier or warehouseman, or an employee thereof, whose possession of any controlled substance is in the usual course of business or employment;
- (c) An ultimate user or a person in possession of any controlled substance pursuant to a lawful order of a physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, advanced practice registered

nurse, podiatric physician , *pharmacist registered pursuant to section 12.3 of this act* or veterinarian or in lawful possession of a schedule V substance; or

- (d) A physician who:
- (1) Holds a locum tenens license issued by the Board of Medical Examiners or a temporary license issued by the State Board of Osteopathic Medicine; and
- (2) Is registered with the Drug Enforcement Administration at a location outside this State.
- 4. The Board may waive the requirement for registration of certain dispensers if it finds it consistent with the public health and safety.
- 5. A separate registration is required at each principal place of business or professional practice where the applicant dispenses controlled substances.
- 6. The Board may inspect the establishment of a registrant or applicant for registration in accordance with the Board's regulations.

Sec. 1.15. NRS 453.336 is hereby amended to read as follows:

- 453.336 1. Except as otherwise provided in subsection 6, a person shall not knowingly or intentionally possess a controlled substance, unless the substance was obtained directly from, or pursuant to, a prescription or order of a physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, podiatric physician, optometrist, advanced practice registered nurse <u>pharmacist registered pursuant to section 12.3 of this act</u> or veterinarian while acting in the course of his or her professional practice, or except as otherwise authorized by the provisions of NRS 453.005 to 453.552, inclusive.
- 2. Except as otherwise provided in subsections 3, 4 and 5 and in NRS 453.3363, and unless a greater penalty is provided in NRS 212.160, 453.3385 or 453.339, a person who violates this section:
- (a) For a first or second offense, if the controlled substance is listed in schedule I or II and the quantity possessed is less than 14 grams, or if the controlled substance is listed in schedule III, IV or V and the quantity possessed is less than 28 grams, is guilty of possession of a controlled substance and shall be punished for a category E felony as provided in NRS 193.130. In accordance with NRS 176.211, the court shall defer judgment upon the consent of the person.
- (b) For a third or subsequent offense, if the controlled substance is listed in schedule I or II and the quantity possessed is less than 14 grams, or if the controlled substance is listed in schedule III, IV or V and the quantity possessed is less than 28 grams, or if the offender has previously been convicted two or more times in the aggregate of any violation of the law of the United States or of any state, territory or district relating to a controlled substance, is guilty of possession of a controlled substance and shall be punished for a category D felony as provided in NRS 193.130, and may be further punished by a fine of not more than \$20,000.
- (c) If the controlled substance is listed in schedule I or II and the quantity possessed is 14 grams or more, but less than 28 grams, or if the controlled

substance is listed in schedule III, IV or V and the quantity possessed is 28 grams or more, but less than 200 grams, is guilty of low-level possession of a controlled substance and shall be punished for a category C felony as provided in NRS 193.130.

- (d) If the controlled substance is listed in schedule I or II and the quantity possessed is 28 grams or more, but less than 42 grams, or if the controlled substance is listed in schedule III, IV or V and the quantity possessed is 200 grams or more, is guilty of mid-level possession of a controlled substance and shall be punished 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 10 years and by a fine of not more than \$50,000.
- (e) If the controlled substance is listed in schedule I or II and the quantity possessed is 42 grams or more, but less than 100 grams, is guilty of high-level possession of a controlled substance and shall be punished for a category B felony by imprisonment in the state prison for a minimum term of not less than 2 years and a maximum term of not more than 15 years and by a fine of not more than \$50,000.
- 3. Unless a greater penalty is provided in NRS 212.160, 453.337 or 453.3385, a person who is convicted of the possession of flunitrazepam or gamma-hydroxybutyrate, or any substance for which flunitrazepam or gamma-hydroxybutyrate is an immediate precursor, is guilty of a category B felony and shall be punished 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.
- 4. Unless a greater penalty is provided pursuant to NRS 212.160, a person who is convicted of the possession of 1 ounce or less of marijuana is guilty of a misdemeanor and shall be punished by:
 - (a) Performing not more than 24 hours of community service;
- (b) Attending the live meeting described in paragraph (a) of subsection 2 of NRS 484C.530 and complying with any other requirements set forth in that section; or
- (c) Being required to undergo an evaluation in accordance with subsection 1 of NRS 484C.350,
- → or any combination thereof.
- 5. Unless a greater penalty is provided pursuant to NRS 212.160, a person who is convicted of the possession of more than 1 ounce, but less than 50 pounds, of marijuana or more than one-eighth of an ounce, but less than one pound, of concentrated cannabis is guilty of a category E felony and shall be punished as provided in NRS 193.130.
- 6. It is not a violation of this section if a person possesses a trace amount of a controlled substance and that trace amount is in or on a hypodermic device obtained from a sterile hypodermic device program pursuant to NRS 439.985 to 439.994, inclusive.
- 7. The court may grant probation to or suspend the sentence of a person convicted of violating this section.

- 8. If a person fulfills the terms and conditions imposed for a violation of subsection 4, the court shall, without a hearing, order sealed all documents, papers and exhibits in that person's record, minute book entries and entries on dockets, and other documents relating to the case in the custody of such other agencies and officers as are named in the court's order. The court shall cause a copy of the order to be sent to each agency or officer named in the order. Each such agency or officer shall notify the court in writing of its compliance with the order.
 - 9. As used in this section:
- (a) "Controlled substance" includes flunitrazepam, gamma-hydroxybutyrate and each substance for which flunitrazepam or gamma-hydroxybutyrate is an immediate precursor.
 - (b) "Marijuana" does not include concentrated cannabis.
- (c) "Sterile hypodermic device program" has the meaning ascribed to it in NRS 439.986.

Sec. 1.2. NRS 453.381 is hereby amended to read as follows:

- 453.381 1. In addition to the limitations imposed by NRS 453.256 and 453.3611 to 453.3648, inclusive, a physician, physician assistant, dentist, advanced practice registered nurse_, [or] podiatric physician or pharmacist registered pursuant to section 12.3 of this act may prescribe or administer controlled substances only for a legitimate medical purpose and in the usual course of his or her professional practice, and he or she shall not prescribe, administer or dispense a controlled substance listed in schedule II for himself or herself, his or her spouse or his or her children except in cases of emergency.
- 2. A veterinarian, in the course of his or her professional practice only, and not for use by a human being, may prescribe, possess and administer controlled substances, and the veterinarian may cause them to be administered by a veterinary technician under the direction and supervision of the veterinarian.
- 3. A euthanasia technician, within the scope of his or her license, and not for use by a human being, may possess and administer sodium pentobarbital.
- 4. A pharmacist shall not fill an order which purports to be a prescription if the pharmacist has reason to believe that it was not issued in the usual course of the professional practice of a physician, physician assistant, dentist, advanced practice registered nurse, podiatric physician , *pharmacist* registered pursuant to section 12.3 of this act or veterinarian.
- 5. Any person who has obtained from a physician, physician assistant, dentist, advanced practice registered nurse, podiatric physician <u>, pharmacist registered pursuant to section 12.3 of this act</u> or veterinarian any controlled substance for administration to a patient during the absence of the physician, physician assistant, dentist, advanced practice registered nurse, podiatric physician <u>, pharmacist</u> or veterinarian shall return to him or her any unused portion of the substance when it is no longer required by the patient.

- 6. A manufacturer, wholesale supplier or other person legally able to furnish or sell any controlled substance listed in schedule II shall not provide samples of such a controlled substance to registrants.
- 7. A salesperson of any manufacturer or wholesaler of pharmaceuticals shall not possess, transport or furnish any controlled substance listed in schedule II.
- 8. A person shall not dispense a controlled substance in violation of a regulation adopted by the Board.

Sec. 1.25. NRS 454.00958 is hereby amended to read as follows:

454.00958 "Practitioner" means:

- 1. A physician, dentist, veterinarian or podiatric physician who holds a valid license to practice his or her profession in this State.
- 2. A pharmacy, hospital or other institution licensed or registered to distribute, dispense, conduct research with respect to or to administer a dangerous drug in the course of professional practice in this State.
- 3. When relating to the prescription of poisons, dangerous drugs and devices:
- (a) An advanced practice registered nurse who holds a certificate from the State Board of Pharmacy permitting him or her so to prescribe; or
- (b) A physician assistant who holds a license from the Board of Medical Examiners and a certificate from the State Board of Pharmacy permitting him or her so to prescribe.
- 4. An optometrist who is certified to prescribe and administer pharmaceutical agents pursuant to NRS 636.288 when the optometrist prescribes or administers dangerous drugs which are within the scope of his or her certification.
- 5. A pharmacist who is registered pursuant to section 12.3 of this act to prescribe and dispense drugs for medication-assisted treatment.

 $\frac{\text{[Section -1.]}}{\text{Sec. } 1.28}$. Chapter 458 of NRS is hereby amended by adding thereto a new section to read as follows:

- 1. The Division may accept gifts, grants, donations, bequests or money from any other source for the purpose of funding the bulk purchase of opioid antagonists. Any money so received must be accounted for separately in the State General Fund.
- 2. Money accepted pursuant to subsection 1 or deposited into the account created pursuant to subsection 1 is not subject to the State Budget Act.
- 3. Interest and income earned on money in the account created pursuant to subsection 1 must be credited to the account. Any money remaining in the account at the end of a fiscal year does not revert to the State General Fund, and the balance in the account must be carried forward to the next fiscal year.
- 4. The money in the account created pursuant to subsection 1 must be used only to fund the bulk purchase of opioid antagonists and pay the costs of the Division to distribute those opioid antagonists.

- 5. As used in this section, "opioid antagonist" has the meaning ascribed to it in NRS 453C.040.
 - Sec. 1.3. NRS 458.100 is hereby amended to read as follows:
- 458.100 1. [All] Except as otherwise provided in section [11] 1.28 of this act, all gifts or grants of money for a program for alcohol or other substance use disorders which the Division is authorized to accept must be deposited in the State Treasury for credit to the State Grant and Gift Account for Alcohol or Other Substance Use Disorders which is hereby created in the Department of Health and Human Services' Gift Fund.
- 2. Subject to the limitations set forth in NRS 458.094, money in the Account must be used to carry out the provisions of this chapter.
- 3. All claims must be approved by the Administrator before they are paid.
 - Sec. 1.7. NRS 458.103 is hereby amended to read as follows:
 - 458.103 1. The Division may accept:
- [1.] (a) Money appropriated and made available by any act of Congress for any program for alcohol or other substance use disorder administered by the Division as provided by law.
- [2.] (b) Money appropriated and made available by the State of Nevada or by a county, a city, a public district or any political subdivision of this State for any program for alcohol or other substance use disorder administered by the Division as provided by law.
- 2. Except as otherwise provided in any regulations adopted pursuant to subsection 3, a treatment provider, provider of health care or program for alcohol or other substance use disorders shall prioritize persons to receive services for the treatment of alcohol or other substance use disorders funded in whole or in part by federal or state money in accordance with 45 C.F.R. § 96.131(a).
- 3. To the extent that such regulations do not conflict with federal law or impair an obligation under any existing grant, contract or other agreement, the State Board of Health may adopt regulations prioritizing categories of persons, in addition to the categories prescribed in 45 C.F.R. § 96.131(a), to receive services for the treatment of alcohol or other substance use disorders funded in whole or in part by federal or state money.
- 4. As used in this section, "provider of health care" has the meaning ascribed to it in NRS 629.031.
 - Sec. 2. (Deleted by amendment.)
 - Sec. 2.5. NRS 232.320 is hereby amended to read as follows:
 - 232.320 1. The Director:
- (a) Shall appoint, with the consent of the Governor, administrators of the divisions of the Department, who are respectively designated as follows:
 - (1) The Administrator of the Aging and Disability Services Division;
- (2) The Administrator of the Division of Welfare and Supportive Services:
 - (3) The Administrator of the Division of Child and Family Services;

- (4) The Administrator of the Division of Health Care Financing and Policy; and
 - (5) The Administrator of the Division of Public and Behavioral Health.
- (b) Shall administer, through the divisions of the Department, the provisions of chapters 63, 424, 425, 427A, 432A to 442, inclusive, 446 to 450, inclusive, 458A and 656A of NRS, NRS 127.220 to 127.310, inclusive, 422.001 to 422.410, inclusive, and section 5.5 of this act, 422.580, 432.010 to 432.133, inclusive, 432B.6201 to 432B.626, inclusive, 444.002 to 444.430, inclusive, and 445A.010 to 445A.055, inclusive, and all other provisions of law relating to the functions of the divisions of the Department, but is not responsible for the clinical activities of the Division of Public and Behavioral Health or the professional line activities of the other divisions.
- (c) Shall administer any state program for persons with developmental disabilities established pursuant to the Developmental Disabilities Assistance and Bill of Rights Act of 2000, 42 U.S.C. §§ 15001 et seq.
- (d) Shall, after considering advice from agencies of local governments and nonprofit organizations which provide social services, adopt a master plan for the provision of human services in this State. The Director shall revise the plan biennially and deliver a copy of the plan to the Governor and the Legislature at the beginning of each regular session. The plan must:
- (1) Identify and assess the plans and programs of the Department for the provision of human services, and any duplication of those services by federal, state and local agencies;
 - (2) Set forth priorities for the provision of those services;
- (3) Provide for communication and the coordination of those services among nonprofit organizations, agencies of local government, the State and the Federal Government;
- (4) Identify the sources of funding for services provided by the Department and the allocation of that funding;
- (5) Set forth sufficient information to assist the Department in providing those services and in the planning and budgeting for the future provision of those services; and
- (6) Contain any other information necessary for the Department to communicate effectively with the Federal Government concerning demographic trends, formulas for the distribution of federal money and any need for the modification of programs administered by the Department.
- (e) May, by regulation, require nonprofit organizations and state and local governmental agencies to provide information regarding the programs of those organizations and agencies, excluding detailed information relating to their budgets and payrolls, which the Director deems necessary for the performance of the duties imposed upon him or her pursuant to this section.
 - (f) Has such other powers and duties as are provided by law.
- 2. Notwithstanding any other provision of law, the Director, or the Director's designee, is responsible for appointing and removing subordinate officers and employees of the Department.

- Sec. 3. (Deleted by amendment.)
- Sec. 3.5. NRS 287.010 is hereby amended to read as follows:
- 287.010 1. The governing body of any county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada may:
- (a) Adopt and carry into effect a system of group life, accident or health insurance, or any combination thereof, for the benefit of its officers and employees, and the dependents of officers and employees who elect to accept the insurance and who, where necessary, have authorized the governing body to make deductions from their compensation for the payment of premiums on the insurance.
- (b) Purchase group policies of life, accident or health insurance, or any combination thereof, for the benefit of such officers and employees, and the dependents of such officers and employees, as have authorized the purchase, from insurance companies authorized to transact the business of such insurance in the State of Nevada, and, where necessary, deduct from the compensation of officers and employees the premiums upon insurance and pay the deductions upon the premiums.
- (c) Provide group life, accident or health coverage through a self-insurance reserve fund and, where necessary, deduct contributions to the maintenance of the fund from the compensation of officers and employees and pay the deductions into the fund. The money accumulated for this purpose through deductions from the compensation of officers and employees and contributions of the governing body must be maintained as an internal service fund as defined by NRS 354.543. The money must be deposited in a state or national bank or credit union authorized to transact business in the State of Nevada. Any independent administrator of a fund created under this section is subject to the licensing requirements of chapter 683A of NRS, and must be a resident of this State. Any contract with an independent administrator must be approved by the Commissioner of Insurance as to the reasonableness of administrative charges in relation to contributions collected and benefits provided. The provisions of NRS 686A.135, 687B.352, 687B.408, 687B.723, 687B.725, 689B.030 to 689B.050, inclusive, and section 16.3 of this act, 689B.265, 689B.287 and 689B.500 apply to coverage provided pursuant to this paragraph, except that the provisions of NRS 689B.0378, 689B.03785 and 689B.500 only apply to coverage for active officers and employees of the governing body, or the dependents of such officers and employees.
- (d) Defray part or all of the cost of maintenance of a self-insurance fund or of the premiums upon insurance. The money for contributions must be budgeted for in accordance with the laws governing the county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada.
- 2. If a school district offers group insurance to its officers and employees pursuant to this section, members of the board of trustees of the school

district must not be excluded from participating in the group insurance. If the amount of the deductions from compensation required to pay for the group insurance exceeds the compensation to which a trustee is entitled, the difference must be paid by the trustee.

- 3. In any county in which a legal services organization exists, the governing body of the county, or of any school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada in the county, may enter into a contract with the legal services organization pursuant to which the officers and employees of the legal services organization, and the dependents of those officers and employees, are eligible for any life, accident or health insurance provided pursuant to this section to the officers and employees, and the dependents of the officers and employees, of the county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency.
- 4. If a contract is entered into pursuant to subsection 3, the officers and employees of the legal services organization:
- (a) Shall be deemed, solely for the purposes of this section, to be officers and employees of the county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency with which the legal services organization has contracted; and
- (b) Must be required by the contract to pay the premiums or contributions for all insurance which they elect to accept or of which they authorize the purchase.
 - 5. A contract that is entered into pursuant to subsection 3:
- (a) Must be submitted to the Commissioner of Insurance for approval not less than 30 days before the date on which the contract is to become effective.
 - (b) Does not become effective unless approved by the Commissioner.
- (c) Shall be deemed to be approved if not disapproved by the Commissioner within 30 days after its submission.
- 6. As used in this section, "legal services organization" means an organization that operates a program for legal aid and receives money pursuant to NRS 19.031.
 - Sec. 4. (Deleted by amendment.)
 - Sec. 4.5. NRS 287.04335 is hereby amended to read as follows:

287.04335 If the Board provides health insurance through a plan of self-insurance, it shall comply with the provisions of NRS 686A.135, 687B.352, 687B.409, 687B.723, 687B.725, 689B.0353, 689B.255, 695C.1723, 695G.150, 695G.155, 695G.160, 695G.162, 695G.1635, 695G.164, 695G.1645, 695G.1665, 695G.167, 695G.1675, 695G.170 to 695G.174, inclusive, and section 16.9 of this act, 695G.176, 695G.177, 695G.200 to 695G.230, inclusive, 695G.241 to 695G.310, inclusive, and 695G.405, in the same manner as an insurer that is licensed pursuant to title 57 of NRS is required to comply with those provisions.

- Sec. 5. (Deleted by amendment.)
- Sec. 5.5. Chapter 422 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. The Director shall include in the State Plan for Medicaid a requirement that the State pay the nonfederal share of expenditures incurred for the services of a pharmacist described in section 12.3 of this act.
- 2. The State must provide reimbursement for the services of a pharmacist described in section 12.3 of this act at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.
- Sec. 5.8. [NRS 422.4025 is hereby amended to read as follows:
- (a) By regulation, develop a list of preferred prescription drugs to be used for the Medicaid program and the Children's Health Insurance Program, and each public or nonprofit health benefit plan that elects to use the list of preferred prescription drugs as its formulary pursuant to NRS 287.012, 287.0433 or 687B.407; and
- (b) Negotiate and enter into agreements to purchase the drugs included on the list of preferred prescription drugs on behalf of the health benefit plans described in paragraph (a) or enter into a contract pursuant to NRS 422.4053 with a pharmacy benefit manager, health maintenance organization or one or more public or private entities in this State, the District of Columbia or other states or territories of the United States, as appropriate, to negotiate such agreements.
- 2. The Department shall, by regulation, establish a list of prescription drugs which must be excluded from any restrictions that are imposed by the Medicaid program on drugs that are on the list of preferred prescription drugs established pursuant to subsection 1. The list established pursuant to this subsection must include, without limitation:
- (a) Prescription drugs that are prescribed for the treatment of the human immunodeficiency virus, including, without limitation, antiretroviral medications:
- (b) Antirejection medications for organ transplants;
- (c) Antihemophilic medications; and
- (d) Any prescription drug which the Board identifies as appropriate for exclusion from any restrictions that are imposed by the Medicaid program on drugs that are on the list of preferred prescription drugs.
- 3. The regulations must provide that the Board makes the final determination of:
- (a) Whether a class of therapeutic prescription drugs is included on the list of preferred prescription drugs and is excluded from any restrictions that are imposed by the Medicaid program on drugs that are on the list of preferred prescription drugs;
- (b) Which therapeutically equivalent prescription drugs will be reviewed for inclusion on the list of preferred prescription drugs and for exclusion

from any restrictions that are imposed by the Medicaid program on drugs that are on the list of preferred prescription drugs; and

- (e) Which prescription drugs should be excluded from any restrictions that are imposed by the Medicaid program on drugs that are on the list of preferred prescription drugs based on continuity of care concerning a specific diagnosis, condition, class of therapeutic prescription drugs or medical specialty.
- 4. The list of preferred prescription drugs established pursuant to subsection 1 must include, without limitation:
- (a) Any prescription drug determined by the Board to be essential for treating sickle cell disease and its variants; [and]
- (b) Prescription drugs to prevent the acquisition of human immunodeficiency virus [.]; and
- (c) All prescription drugs approved by the United States Food and Drug Administration—to provide medication assisted treatment for opioid—use disorder, including, without limitation, buprenorphine, methadone and naltrexone. As used in this paragraph, "medication-assisted treatment" has the meaning ascribed to it in section 12.3 of this act.
- 5. The regulations must provide that each new pharmaceutical product and each existing pharmaceutical product for which there is new clinical evidence supporting its inclusion on the list of preferred prescription drugs must be made available pursuant to the Medicaid program with prior authorization until the Board reviews the product or the evidence.
- 6. On or before February 1 of each year, the Department shall:
- (a) Compile a report concerning the agreements negotiated pursuant to paragraph (b) of subsection 1 and contracts entered into pursuant to NRS 422.4053 which must include, without limitation, the financial effects of obtaining prescription drugs through those agreements and contracts, in total and aggregated separately for agreements negotiated by the Department, contracts with a pharmacy benefit manager, contracts with a health maintenance organization and contracts with public and private entities from this State, the District of Columbia and other states and territories of the United States; and
- —(b) Post the report on an Internet website maintained by the Department and submit the report to the Director of the Legislative Counsel Bureau for transmittal to:
- (1) In odd numbered years, the Legislature; or
- (2) In even-numbered years, the Legislative Commission.] (Deleted by amendment.)
 - Sec. 6. (Deleted by amendment.)
 - Sec. 6.5. NRS 608.156 is hereby amended to read as follows:
- 608.156 1. [If] In addition to any benefits required by NRS 608.155, if an employer provides health benefits for his or her employees, the employer shall provide benefits for the expenses for the treatment of alcohol and

substance use disorders. The annual benefits provided by the employer must [consist of:] *include, without limitation:*

- (a) Treatment for withdrawal from the physiological effects of alcohol or drugs, with a maximum benefit of \$1,500 per calendar year.
- (b) Treatment for a patient admitted to a facility, with a maximum benefit of \$9,000 per calendar year.
- (c) Counseling for a person, group or family who is not admitted to a facility, with a maximum benefit of \$2,500 per calendar year.
- 2. The maximum amount which may be paid in the lifetime of the insured for any combination of the treatments listed in subsection 1 is \$39,000.
- 3. Except as otherwise provided in NRS 687B.409, these benefits must be paid in the same manner as benefits for any other illness covered by the employer are paid.
- 4. The employee is entitled to these benefits if treatment is received in any:
- (a) Program for the treatment of alcohol or substance use disorders which is certified by the Division of Public and Behavioral Health of the Department of Health and Human Services.
- (b) Hospital or other medical facility or facility for the dependent which is licensed by the Division of Public and Behavioral Health of the Department of Health and Human Services, is accredited by The Joint Commission or CARF International and provides a program for the treatment of alcohol or substance use disorders as part of its accredited activities.
 - Sec. 7. (Deleted by amendment.)
 - Sec. 8. (Deleted by amendment.)
 - Sec. 9. (Deleted by amendment.)
- Sec. 10. Chapter 630 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. Upon diagnosing a patient as having an opioid use disorder, a physician or physician assistant shall counsel and provide information to the patient concerning evidence-based treatment for opioid use disorders, including, without limitation, medication-assisted treatment.
- 2. If the patient requests medication-assisted treatment, the physician or physician assistant shall:
- (a) If the physician or physician assistant is authorized under federal and state law to issue such a prescription, offer to prescribe an appropriate medication; or
- (b) If the physician or physician assistant is not authorized under federal and state law to prescribe an appropriate medication, refer the patient to a physician, osteopathic physician, physician assistant licensed pursuant to this chapter or chapter 633 of NRS, advanced practice registered nurse or pharmacist who is authorized to issue the prescription.
- 3. As used in this section, "medication-assisted treatment" has the meaning ascribed to it in section 12.3 of this act.

- Sec. 11. Chapter 632 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. Upon diagnosing a patient as having an opioid use disorder, an advanced practice registered nurse shall counsel and provide information to the patient concerning evidence-based treatment for opioid use disorders, including, without limitation, medication-assisted treatment.
- 2. If the patient requests medication-assisted treatment, the advanced practice registered nurse shall:
- (a) If the advanced practice registered nurse is authorized under federal and state law to issue such a prescription, offer to prescribe an appropriate medication; or
- (b) If the advanced practice registered nurse is not authorized under federal and state law to prescribe an appropriate medication, refer the patient to a physician, osteopathic physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, advanced practice registered nurse or pharmacist who is authorized to issue the prescription.
- 3. As used in this section, "medication-assisted treatment" has the meaning ascribed to it in section 12.3 of this act.
- Sec. 12. Chapter 633 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. Upon diagnosing a patient as having an opioid use disorder, an osteopathic physician or physician assistant shall counsel and provide information to the patient concerning evidence-based treatment for opioid use disorders, including, without limitation, medication-assisted treatment.
- 2. If the patient requests medication-assisted treatment, the osteopathic physician or physician assistant shall:
- (a) If the osteopathic physician or physician assistant is authorized under federal and state law to issue such a prescription, offer to prescribe an appropriate medication; or
- (b) If the osteopathic physician or physician assistant is not authorized under federal and state law to prescribe an appropriate medication, refer the patient to a physician, osteopathic physician, physician assistant licensed pursuant to this chapter or chapter 630 of NRS, advanced practice registered nurse or pharmacist who is authorized to issue the prescription.
- 3. As used in this section, "medication-assisted treatment" has the meaning ascribed to it in section 12.3 of this act.
- Sec. 12.3. Chapter 639 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. To the extent authorized by federal law, a pharmacist who registers with the Board to engage in the activity authorized by this section may, in accordance with the requirements of the protocol prescribed pursuant to subsection 2:
 - (a) Assess a patient to determine whether:
 - (1) The patient has an opioid use disorder; and
 - (2) Medication-assisted treatment would be appropriate for the patient;

- (b) Counsel and provide information to the patient concerning evidence-based treatment for opioid use disorders, including, without limitation, medication-assisted treatment; and
 - (c) Prescribe and dispense a drug for medication-assisted treatment.
 - 2. The Board shall adopt regulations:
- (a) Prescribing the requirements to register with the Board to engage in the activity authorized by this section; and
 - (b) Establishing a protocol for the actions authorized by this section.
- 3. As used in this section, "medication-assisted treatment" means treatment for an opioid use disorder using medication approved by the United States Food and Drug Administration for that purpose.
 - Sec. 12.6. NRS 639.0124 is hereby amended to read as follows:
 - 639.0124 1. "Practice of pharmacy" includes, but is not limited to, the:
- (a) Performance or supervision of activities associated with manufacturing, compounding, labeling, dispensing and distributing of a drug, including the receipt, handling and storage of prescriptions and other confidential information relating to patients.
 - (b) Interpretation and evaluation of prescriptions or orders for medicine.
 - (c) Participation in drug evaluation and drug research.
- (d) Advising of the therapeutic value, reaction, drug interaction, hazard and use of a drug.
 - (e) Selection of the source, storage and distribution of a drug.
- (f) Maintenance of proper documentation of the source, storage and distribution of a drug.
- (g) Interpretation of clinical data contained in a person's record of medication.
- (h) Development of written guidelines and protocols in collaboration with a practitioner which authorize collaborative drug therapy management. The written guidelines and protocols must comply with NRS 639.2629.
- (i) Implementation and modification of drug therapy, administering drugs and ordering and performing tests in accordance with a collaborative practice agreement.
- (j) Prescribing, dispensing and administering of drugs for preventing the acquisition of human immunodeficiency virus and ordering and conducting laboratory tests necessary for therapy that uses such drugs pursuant to the protocol prescribed pursuant to NRS 639.28085.
- (k) Dispensing a self-administered hormonal contraceptive pursuant to NRS 639.28078.
- (1) Assessing a patient and prescribing and dispensing a drug for medication-assisted treatment in accordance with section 12.3 of this act.
- 2. The term does not include the changing of a prescription by a pharmacist or practitioner without the consent of the prescribing practitioner, except as otherwise provided in NRS 639.2583, 639.28078 and 639.28085.
 - Sec. 12.8. NRS 639.0125 is hereby amended to read as follows:
 - 639.0125 "Practitioner" means:

- 1. A physician, dentist, veterinarian or podiatric physician who holds a license to practice his or her profession in this State;
- 2. A hospital, pharmacy or other institution licensed, registered or otherwise permitted to distribute, dispense, conduct research with respect to or administer drugs in the course of professional practice or research in this State:
- 3. An advanced practice registered nurse who has been authorized to prescribe controlled substances, poisons, dangerous drugs and devices;
 - 4. A physician assistant who:
 - (a) Holds a license issued by the Board of Medical Examiners; and
- (b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances, poisons, dangerous drugs or devices under the supervision of a physician as required by chapter 630 of NRS;
 - 5. A physician assistant who:
- (a) Holds a license issued by the State Board of Osteopathic Medicine; and
- (b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances, poisons, dangerous drugs or devices under the supervision of an osteopathic physician as required by chapter 633 of NRS; or
- 6. An optometrist who is certified by the Nevada State Board of Optometry to prescribe and administer pharmaceutical agents pursuant to NRS 636.288, when the optometrist prescribes or administers pharmaceutical agents within the scope of his or her certification.
- 7. A pharmacist who is registered pursuant to section 12.3 of this act to prescribe and dispense drugs for medication-assisted treatment.
- Sec. 13. Chapter 641 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. Upon diagnosing a patient as having an opioid use disorder, a psychologist shall counsel and provide information to the patient concerning evidence-based treatment for opioid use disorders, including, without limitation, medication-assisted treatment.
- 2. If the patient requests medication-assisted treatment, the psychologist shall refer the patient to a physician, osteopathic physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, advanced practice registered nurse or pharmacist who is authorized under federal and state law to prescribe an appropriate medication.
- 3. As used in this section, "medication-assisted treatment" has the meaning ascribed to it in section 12.3 of this act.
- Sec. 14. Chapter 641A of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. Upon diagnosing a client as having an opioid use disorder, a marriage and family therapist or clinical professional counselor shall counsel and provide information to the client concerning evidence-based

treatment for opioid use disorders, including, without limitation, medication-assisted treatment.

- 2. If the client requests medication-assisted treatment, the marriage and family therapist or clinical professional counselor shall refer the client to a physician, osteopathic physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, advanced practice registered nurse or pharmacist who is authorized under federal and state law to prescribe an appropriate medication.
- 3. As used in this section, "medication-assisted treatment" has the meaning ascribed to it in section 12.3 of this act.
- Sec. 15. Chapter 641B of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. Upon diagnosing a client as having an opioid use disorder, a clinical social worker shall counsel and provide information to the client concerning evidence-based treatment for opioid use disorders, including, without limitation, medication-assisted treatment.
- 2. If the client requests medication-assisted treatment, the clinical social worker shall refer the client to a physician, osteopathic physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, advanced practice registered nurse or pharmacist who is authorized under federal and state law to prescribe an appropriate medication.
- 3. As used in this section, "medication-assisted treatment" has the meaning ascribed to it in section 12.3 of this act.
- Sec. 16. Chapter 641C of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. Upon diagnosing a client as having an opioid use disorder, an alcohol and drug counselor, clinical alcohol and drug counselor or problem gambling counselor shall counsel and provide information to the client concerning evidence-based treatment for opioid use disorders, including, without limitation, medication-assisted treatment.
- 2. If the client requests medication-assisted treatment, the alcohol and drug counselor, clinical alcohol and drug counselor or problem gambling counselor shall refer the client to a physician, osteopathic physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, advanced practice registered nurse or pharmacist who is authorized under federal and state law to prescribe an appropriate medication.
- 3. As used in this section, "medication-assisted treatment" has the meaning ascribed to it in section 12.3 of this act.

Sec. 16.05. [NRS 683A.179 is hereby amended to read as follows:

- 683A.179 1. A pharmacy benefit manager shall not:
- (a) Prohibit a pharmacist or pharmacy from providing information to a covered person concerning:
- (1) The amount of any copayment or coinsurance for a prescription drug; or

- (2) The availability of a less expensive alternative or generic drug including, without limitation, information concerning clinical efficacy of such a drug;
- (b) Penalize a pharmacist or pharmacy for providing the information described in paragraph (a) or selling a less expensive alternative or generic drug to a covered person;
- (c) Prohibit a pharmacy from offering or providing delivery serviced directly to a covered person as an ancillary service of the pharmacy; or
- (d) If the pharmacy benefit manager manages a pharmacy benefits plan that provides coverage through a network plan, charge a copayment or coinsurance for a prescription drug in an amount that is greater than the total amount paid to a pharmacy that is in the network of providers under contract with the third party.
- 2. The provisions of this section:
- (a) Must not be construed to authorize a pharmacist to dispense a drug that has not been prescribed by a practitioner, as defined in NRS 639.0125, except to the extent authorized by a specific provision of law, including, without limitation, NRS 453C.120, 639.28078 and 639.28085 [.] and section 12.3 of this act.
- (b) Do not apply to an institutional pharmacy, as defined in NRS 639.0085, or a pharmacist working in such a pharmacy as an employee or independent contractor.
- 3. As used in this section, "network plan" means a health benefit plan offered by a health carrier under which the financing and delivery of medical care is provided, in whole or in part, through a defined set of providers under contract with the carrier. The term does not include an arrangement for the financing of premiums.] (Deleted by amendment.)
- Sec. 16.1. Chapter 689A of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. An insurer that offers or issues a policy of health insurance shall include in the policy coverage for:
- (a) All drugs approved by the United States Food and Drug Administration to provide medication-assisted treatment for opioid use disorder, including, without limitation, buprenorphine, methadone and naltrexone; and
- (b) The services described in section 12.3 of this act when provided by a pharmacist [who] or pharmacy that participates in the network plan of the insurer. The Commissioner shall adopt regulations governing the provision of reimbursement for such services.
- 2. An insurer that offers or issues a policy of health insurance shall reimburse a pharmacist [who] or pharmacy that participates in the network plan of the insurer for the services described in section 12.3 of this act at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.

- 3. [An] Except as otherwise provided in this subsection, an insurer [may] shall not subject the benefits required by subsection 1 to [reasonable] medical management techniques [...], other than step therapy. An insurer may subject such benefits to other reasonable medical management techniques when the benefits are provided by a pharmacist in accordance with section 12.3 of this act.
- 4. An insurer shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the insurer.
- 5. A policy of health insurance subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the policy that conflicts with the provisions of this section is void.
 - 6. As used in this section:
- (a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.
- (b) "Network plan" means a policy of health insurance offered by an insurer under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the insurer. The term does not include an arrangement for the financing of premiums.
- (c) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
 - Sec. 16.13. NRS 689A.030 is hereby amended to read as follows:
- 689A.030 A policy of health insurance must not be delivered or issued for delivery to any person in this State unless it otherwise complies with this Code, and complies with the following:
- 1. The entire money and other considerations for the policy must be expressed therein.
- 2. The time when the insurance takes effect and terminates must be expressed therein.
- 3. It must purport to insure only one person, except that a policy may insure, originally or by subsequent amendment, upon the application of an adult member of a family, who shall be deemed the policyholder, any two or more eligible members of that family, including the husband, wife, domestic partner as defined in NRS 122A.030, dependent children, from the time of birth, adoption or placement for the purpose of adoption as provided in NRS 689A.043, or any child on or before the last day of the month in which the child attains 26 years of age, and any other person dependent upon the policyholder.

- 4. The style, arrangement and overall appearance of the policy must not give undue prominence to any portion of the text, and every printed portion of the text of the policy and of any endorsements or attached papers must be plainly printed in light-faced type of a style in general use, the size of which must be uniform and not less than 10 points with a lowercase unspaced alphabet length not less than 120 points. "Text" includes all printed matter except the name and address of the insurer, the name or the title of the policy, the brief description, if any, and captions and subcaptions.
- 5. The exceptions and reductions of indemnity must be set forth in the policy and, other than those contained in NRS 689A.050 to 689A.290, inclusive, must be printed, at the insurer's option, with the benefit provision to which they apply or under an appropriate caption such as "Exceptions" or "Exceptions and Reductions," except that if an exception or reduction specifically applies only to a particular benefit of the policy, a statement of that exception or reduction must be included with the benefit provision to which it applies.
- 6. Each such form, including riders and endorsements, must be identified by a number in the lower left-hand corner of the first page thereof.
- 7. The policy must not contain any provision purporting to make any portion of the charter, rules, constitution or bylaws of the insurer a part of the policy unless that portion is set forth in full in the policy, except in the case of the incorporation of or reference to a statement of rates or classification of risks, or short-rate table filed with the Commissioner.
- 8. The policy must provide benefits for expense arising from care at home or health supportive services if that care or service was prescribed by a physician and would have been covered by the policy if performed in a medical facility or facility for the dependent as defined in chapter 449 of NRS.
- 9. [The] Except as otherwise provided by this subsection, the policy must provide [, at the option of the applicant,] benefits for expenses incurred for the treatment of alcohol or substance use disorder . [, unless] Except for the benefits required by section 16.1 of this act, such benefits must be provided:
 - (a) At the option of the applicant; and
- (b) Unless the policy provides coverage only for a specified disease or provides for the payment of a specific amount of money if the insured is hospitalized or receiving health care in his or her home.
- 10. The policy must provide benefits for expense arising from hospice care.
 - Sec. 16.16. NRS 689A.046 is hereby amended to read as follows:
- 689A.046 1. [The] In addition to the benefits required by section 16.1 of this act, the benefits provided by a policy for health insurance for treatment of alcohol or substance use disorder must [consist of:] include, without limitation:
- (a) Treatment for withdrawal from the physiological effect of alcohol or drugs, with a minimum benefit of \$1,500 per calendar year.

- (b) Treatment for a patient admitted to a facility, with a minimum benefit of \$9,000 per calendar year.
- (c) Counseling for a person, group or family who is not admitted to a facility, with a minimum benefit of \$2,500 per calendar year.
- 2. Except as otherwise provided in NRS 687B.409, these benefits must be paid in the same manner as benefits for any other illness covered by a similar policy are paid.
- 3. The insured person is entitled to these benefits if treatment is received in any:
- (a) Facility for the treatment of alcohol or substance use disorder which is certified by the Division of Public and Behavioral Health of the Department of Health and Human Services.
- (b) Hospital or other medical facility or facility for the dependent which is licensed by the Division of Public and Behavioral Health of the Department of Health and Human Services, accredited by The Joint Commission or CARF International and provides a program for the treatment of alcohol or substance use disorder as part of its accredited activities.
 - Sec. 16.2. NRS 689A.330 is hereby amended to read as follows:
- 689A.330 If any policy is issued by a domestic insurer for delivery to a person residing in another state, and if the insurance commissioner or corresponding public officer of that other state has informed the Commissioner that the policy is not subject to approval or disapproval by that officer, the Commissioner may by ruling require that the policy meet the standards set forth in NRS 689A.030 to 689A.320, inclusive [.], and section 16.1 of this act.
- Sec. 16.3. Chapter 689B of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. An insurer that offers or issues a policy of group health insurance shall include in the policy coverage for:
- (a) All drugs approved by the United States Food and Drug Administration to provide medication-assisted treatment for opioid use disorder, including, without limitation, buprenorphine, methadone and naltrexone; and
- (b) The services described in section 12.3 of this act when provided by a pharmacist [who] or pharmacy that participates in the network plan of the insurer. The Commissioner shall adopt regulations governing the provision of reimbursement for such services.
- 2. An insurer that offers or issues a policy of group health insurance shall reimburse a pharmacist [who] or pharmacy that participates in the network plan of the insurer for the services described in section 12.3 of this act at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.
- 3. [An] Except as otherwise provided in this subsection, an insurer [may] shall not subject the benefits required by subsection 1 to [reasonable]

medical management techniques [...], other than step therapy. An insurer may subject such benefits to other reasonable medical management techniques when the benefits are provided by a pharmacist in accordance with section 12.3 of this act.

- 4. An insurer shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the insurer.
- 5. A policy of group health insurance subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the policy that conflicts with the provisions of this section is void.
 - 6. As used in this section:
- (a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.
- (b) "Network plan" means a policy of group health insurance offered by an insurer under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the insurer. The term does not include an arrangement for the financing of premiums.
- (c) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
- Sec. 16.4. Chapter 689C of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. A carrier that offers or issues a health benefit plan shall include in the plan coverage for:
- (a) All drugs approved by the United States Food and Drug Administration to provide medication-assisted treatment for opioid use disorder, including, without limitation, buprenorphine, methadone and naltrexone; and
- (b) The services described in section 12.3 of this act when provided by a pharmacist [who] or pharmacy that participates in the network plan of the carrier. The Commissioner shall adopt regulations governing the provision of reimbursement for such services.
- 2. A carrier that offers or issues a health benefit plan shall reimburse a pharmacist [who] or pharmacy that participates in the network plan of the carrier for the services described in section 12.3 of this act at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.
- 3. <u>{A}</u> Except as otherwise provided in this subsection, a carrier {may} shall not subject the benefits required by subsection 1 to {reasonable} medical management techniques {.}, other than step therapy. A carrier may

<u>subject such benefits to other reasonable medical management techniques</u> <u>when the benefits are provided by a pharmacist in accordance with</u> section 12.3 of this act.

- 4. A carrier shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the carrier.
- 5. A health benefit plan subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the plan that conflicts with the provisions of this section is void.
 - 6. As used in this section:
- (a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.
- (b) "Network plan" means a health benefit plan offered by a carrier under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the carrier. The term does not include an arrangement for the financing of premiums.
- (c) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
 - Sec. 16.43. NRS 689C.166 is hereby amended to read as follows:
- 689C.166 Each group health insurance policy must contain in substance a provision for benefits payable for expenses incurred for the treatment of alcohol or substance use disorder, as provided in NRS 689C.167 [...] and section 16.4 of this act.
 - Sec. 16.45. NRS 689C.167 is hereby amended to read as follows:
- 689C.167 1. [The] In addition to the benefits required by section 16.4 of this act, the benefits provided by a group policy for health insurance, as required by NRS 689C.166, for the treatment of alcohol or substance use disorders must [consist of:] include, without limitation:
- (a) Treatment for withdrawal from the physiological effects of alcohol or drugs, with a minimum benefit of \$1,500 per calendar year.
- (b) Treatment for a patient admitted to a facility, with a minimum benefit of \$9,000 per calendar year.
- (c) Counseling for a person, group or family who is not admitted to a facility, with a minimum benefit of \$2,500 per calendar year.
- 2. Except as otherwise provided in NRS 687B.409, these benefits must be paid in the same manner as benefits for any other illness covered by a similar policy are paid.
- 3. The insured person is entitled to these benefits if treatment is received in any:

- (a) Facility for the treatment of alcohol or substance use disorders which is certified by the Division of Public and Behavioral Health of the Department of Health and Human Services.
- (b) Hospital or other medical facility or facility for the dependent which is licensed by the Division of Public and Behavioral Health of the Department of Health and Human Services, is accredited by The Joint Commission or CARF International and provides a program for the treatment of alcohol or substance use disorders as part of its accredited activities.
 - Sec. 16.48. NRS 689C.425 is hereby amended to read as follows:
- 689C.425 A voluntary purchasing group and any contract issued to such a group pursuant to NRS 689C.360 to 689C.600, inclusive, are subject to the provisions of NRS 689C.015 to 689C.355, inclusive, *and section 16.4 of this act*, to the extent applicable and not in conflict with the express provisions of NRS 687B.408 and 689C.360 to 689C.600, inclusive.
- Sec. 16.5. Chapter 695A of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. A society that offers or issues a benefit contract shall include in the contract coverage for:
- (a) All drugs approved by the United States Food and Drug Administration to provide medication-assisted treatment for opioid use disorder, including, without limitation, buprenorphine, methadone and naltrexone; and
- (b) The services described in section 12.3 of this act when provided by a pharmacist [who] or pharmacy that participates in the network plan of the society. The Commissioner shall adopt regulations governing the provision of reimbursement for such services.
- 2. A society that offers or issues a benefit contract shall reimburse a pharmacist [who] or pharmacy that participates in the network plan of the society for the services described in section 12.3 of this act at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.
- 3. [A] Except as otherwise provided in this subsection, a society [may] shall not subject the benefits required by subsection 1 to [reasonable] medical management techniques [...], other than step therapy. A society may subject such benefits to other reasonable medical management techniques when the benefits are provided by a pharmacist in accordance with section 12.3 of this act.
- 4. A society shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the society.
- 5. A benefit contract subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the contract that conflicts with the provisions of this section is void.

- 6. As used in this section:
- (a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.
- (b) "Network plan" means a benefit contract offered by a society under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the society. The term does not include an arrangement for the financing of premiums.
- (c) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
- Sec. 16.6. Chapter 695B of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. A hospital or medical services corporation that offers or issues a policy of health insurance shall include in the policy coverage for:
- (a) All drugs approved by the United States Food and Drug Administration to provide medication-assisted treatment for opioid use disorder, including, without limitation, buprenorphine, methadone and naltrexone; and
- (b) The services described in section 12.3 of this act when provided by a pharmacist [who] or pharmacy that participates in the network plan of the hospital or medical services corporation. The Commissioner shall adopt regulations governing the provision of reimbursement for such services.
- 2. A hospital or medical services corporation that offers or issues a policy of health insurance shall reimburse a pharmacist [who] or pharmacy that participates in the network plan of the hospital or medical services corporation for the services described in section 12.3 of this act at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.
- 3. [A] Except as otherwise provided in this subsection, a hospital or medical services corporation [may] shall not subject the benefits required by subsection 1 to [reasonable] medical management techniques [.], other than step therapy. A hospital or medical services corporation may subject such benefits to other reasonable medical management techniques when the benefits are provided by a pharmacist in accordance with section 12.3 of this act.
- 4. A hospital or medical services corporation shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the hospital or medical services corporation.
- 5. A policy of health insurance subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and

any provision of the policy that conflicts with the provisions of this section is void.

- 6. As used in this section:
- (a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.
- (b) "Network plan" means a policy of health insurance offered by a hospital or medical services corporation under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the hospital or medical services corporation. The term does not include an arrangement for the financing of premiums.
- (c) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
- Sec. 16.7. Chapter 695C of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. A health maintenance organization that offers or issues a health care plan shall include in the plan coverage for:
- (a) All drugs approved by the United States Food and Drug Administration to provide medication-assisted treatment for opioid use disorder, including, without limitation, buprenorphine, methadone and naltrexone; and
- (b) The services described in section 12.3 of this act when provided by a pharmacist [who] or pharmacy that participates in the network plan of the health maintenance organization. <u>The Commissioner shall adopt regulations</u> governing the provision of reimbursement for such services.
- 2. A health maintenance organization that offers or issues a health care plan shall reimburse a pharmacist [who] or pharmacy that participates in the network plan of the health maintenance organization for the services described in section 12.3 of this act at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.
- 3. [A] Except as otherwise provided in this subsection, health maintenance organization [may] shall not subject the benefits required by subsection 1 to [reasonable] medical management techniques [...], other than step therapy. A health maintenance organization may subject such benefits to other reasonable medical management techniques when the benefits are provided by a pharmacist in accordance with section 12.3 of this act.
- 4. A health maintenance organization shall ensure that the benefits required by subsection I are made available to an enrollee through a provider of health care who participates in the network plan of the health maintenance organization.

- 5. A health care plan subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the plan that conflicts with the provisions of this section is void.
 - 6. As used in this section:
- (a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.
- (b) "Network plan" means a health care plan offered by a health maintenance organization under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the health maintenance organization. The term does not include an arrangement for the financing of premiums.
- (c) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
 - Sec. 16.75. NRS 695C.050 is hereby amended to read as follows:
- 695C.050 1. Except as otherwise provided in this chapter or in specific provisions of this title, the provisions of this title are not applicable to any health maintenance organization granted a certificate of authority under this chapter. This provision does not apply to an insurer licensed and regulated pursuant to this title except with respect to its activities as a health maintenance organization authorized and regulated pursuant to this chapter.
- 2. Solicitation of enrollees by a health maintenance organization granted a certificate of authority, or its representatives, must not be construed to violate any provision of law relating to solicitation or advertising by practitioners of a healing art.
- 3. Any health maintenance organization authorized under this chapter shall not be deemed to be practicing medicine and is exempt from the provisions of chapter 630 of NRS.
- 4. The provisions of NRS 695C.110, 695C.125, 695C.1691, 695C.1693, 695C.170, 695C.1703, 695C.1705, 695C.1709 to 695C.173, inclusive, 695C.1733, 695C.17335, 695C.1734, 695C.1751, 695C.1755, 695C.1759, 695C.176 to 695C.200, inclusive, and 695C.265 do not apply to a health maintenance organization that provides health care services through managed care to recipients of Medicaid under the State Plan for Medicaid or insurance pursuant to the Children's Health Insurance Program pursuant to a contract with the Division of Health Care Financing and Policy of the Department of Health and Human Services. This subsection does not exempt a health maintenance organization from any provision of this chapter for services provided pursuant to any other contract.
- 5. The provisions of NRS 695C.1694 to 695C.1698, inclusive, 695C.1701, 695C.1708, 695C.1728, 695C.1731, 695C.17333, 695C.17345,

- 695C.17347, 695C.1735, 695C.1737, 695C.1743, 695C.1745 and 695C.1757 and section 16.7 of this act apply to a health maintenance organization that provides health care services through managed care to recipients of Medicaid under the State Plan for Medicaid.
 - Sec. 16.8. NRS 695C.330 is hereby amended to read as follows:
- 695C.330 1. The Commissioner may suspend or revoke any certificate of authority issued to a health maintenance organization pursuant to the provisions of this chapter if the Commissioner finds that any of the following conditions exist:
- (a) The health maintenance organization is operating significantly in contravention of its basic organizational document, its health care plan or in a manner contrary to that described in and reasonably inferred from any other information submitted pursuant to NRS 695C.060, 695C.070 and 695C.140, unless any amendments to those submissions have been filed with and approved by the Commissioner;
- (b) The health maintenance organization issues evidence of coverage or uses a schedule of charges for health care services which do not comply with the requirements of NRS 695C.1691 to 695C.200, inclusive, *or section 16.7 of this act*, or 695C.207;
- (c) The health care plan does not furnish comprehensive health care services as provided for in NRS 695C.060;
 - (d) The Commissioner certifies that the health maintenance organization:
- (1) Does not meet the requirements of subsection 1 of NRS 695C.080; or
- (2) Is unable to fulfill its obligations to furnish health care services as required under its health care plan;
- (e) The health maintenance organization is no longer financially responsible and may reasonably be expected to be unable to meet its obligations to enrollees or prospective enrollees;
- (f) The health maintenance organization has failed to put into effect a mechanism affording the enrollees an opportunity to participate in matters relating to the content of programs pursuant to NRS 695C.110;
- (g) The health maintenance organization has failed to put into effect the system required by NRS 695C.260 for:
- (1) Resolving complaints in a manner reasonably to dispose of valid complaints; and
- (2) Conducting external reviews of adverse determinations that comply with the provisions of NRS 695G.241 to 695G.310, inclusive;
- (h) The health maintenance organization or any person on its behalf has advertised or merchandised its services in an untrue, misrepresentative, misleading, deceptive or unfair manner;
- (i) The continued operation of the health maintenance organization would be hazardous to its enrollees or creditors or to the general public;
- (j) The health maintenance organization fails to provide the coverage required by NRS 695C.1691; or

- (k) The health maintenance organization has otherwise failed to comply substantially with the provisions of this chapter.
- 2. A certificate of authority must be suspended or revoked only after compliance with the requirements of NRS 695C.340.
- 3. If the certificate of authority of a health maintenance organization is suspended, the health maintenance organization shall not, during the period of that suspension, enroll any additional groups or new individual contracts, unless those groups or persons were contracted for before the date of suspension.
- 4. If the certificate of authority of a health maintenance organization is revoked, the organization shall proceed, immediately following the effective date of the order of revocation, to wind up its affairs and shall conduct no further business except as may be essential to the orderly conclusion of the affairs of the organization. It shall engage in no further advertising or solicitation of any kind. The Commissioner may, by written order, permit such further operation of the organization as the Commissioner may find to be in the best interest of enrollees to the end that enrollees are afforded the greatest practical opportunity to obtain continuing coverage for health care.
- Sec. 16.9. Chapter 695G of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. A managed care organization that offers or issues a health care plan shall include in the plan coverage for:
- (a) All drugs approved by the United States Food and Drug Administration to provide medication-assisted treatment for opioid use disorder, including, without limitation, buprenorphine, methadone and naltrexone; and
- (b) The services described in section 12.3 of this act when provided by a pharmacist [who] or pharmacy that participates in the network plan of the managed care organization. The Commissioner shall adopt regulations governing the provision of reimbursement for such services.
- 2. A managed care organization that offers or issues a health care plan shall reimburse a pharmacist [who] or pharmacy that participates in the network plan of the managed care organization for the services described in section 12.3 of this act at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.
- 3. [A] Except as otherwise provided in this subsection, managed care organization [may] shall not subject the benefits required by subsection 1 to [reasonable] medical management techniques [1-1], other than step therapy. A managed care organization may subject such benefits to other reasonable medical management techniques when the benefits are provided by a pharmacist in accordance with section 12.3 of this act.
- 4. A managed care organization shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of

health care who participates in the network plan of the managed care organization.

- 5. A health care plan subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the plan that conflicts with the provisions of this section is void.
 - 6. As used in this section:
- (a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.
- (b) "Network plan" means a health care plan offered by a managed care organization under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the managed care organization. The term does not include an arrangement for the financing of premiums.
- (c) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
- Sec. 17. 1. Notwithstanding the provisions of subsection 2 of NRS 458.103, as amended by section 1.7 of this act, a treatment provider, provider of health care or program for alcohol or substance use disorders is not, unless otherwise required by federal law, required to terminate services to which the provisions of that subsection would otherwise apply to a person who is receiving such services on or before October 1, 2023, from the treatment provider, provider of health care or program in order to provide such services to a person who would otherwise receive priority under that subsection.
- 2. The provisions of subsection 2 of NRS 458.103, as amended by section 1.7 of this act, do not apply to treatment for an alcohol or other substance use disorder provided under any grant, contract or other agreement accepted or entered into on or before October 1, 2023, but do apply to any such treatment provided under such a grant, contract or agreement that is renewed or extended.
 - 3. As used in this section:
- (a) "Program for alcohol or other substance use disorders" has the meaning ascribed to it in NRS 458.010.
- (b) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
 - (c) "Treatment provider" has the meaning ascribed to it in NRS 458.010.
- Sec. 17.5. 1. During the 2023-2024 interim, the Department of Corrections, in collaboration with the Department of Health and Human Services, shall study the provision of medication-assisted treatment to

offenders with opioid use disorder. The study must include, without limitation, an examination of:

- (a) Barriers to accessing medication-assisted treatment at institutions and facilities of the Department of Corrections and private facilities and institutions, including, without limitation:
- (1) A shortage of providers of health care who are authorized and willing to prescribe a drug for medication-assisted treatment to offenders; and
- (2) Barriers relating to the licensure, credentialing and regulation of such providers of health care;
- (b) The feasibility of forming multidisciplinary review teams consisting of experts on behavioral health care and criminal justice to make informed decisions about the medication-assisted treatment provided to offenders;
- (c) The feasibility of establishing medication-assisted treatment programs on the grounds of institutions and facilities of the Department of Corrections and private facilities and institutions to provide medication-assisted treatment to offenders with opioid use disorder to the same extent as other health care provided to offenders;
- (d) The feasibility of forming partnerships with providers of health care and agencies, including, without limitation, the Department of Health and Human Services and local agencies that provide social services, to provide medication-assisted treatment inside or nearby institutions and facilities of the Department of Corrections and private facilities and institutions;
- (e) The feasibility of forming partnerships with counties, cities and towns that maintain jails or detention facilities to provide medication-assisted treatment to prisoners in such jails or detention facilities;
- (f) The feasibility of storing information concerning offenders who are receiving medication-assisted treatment and sharing such information with providers of treatment, providers of community-based services and other interested persons and entities;
- (g) Strategies for facilitating the continuation of medication-assisted treatment by an offender upon release, including, without limitation:
- (1) Affiliating with providers of community-based services or federally qualified health centers; and
- (2) Obtaining a waiver pursuant to 42 U.S.C. § 1315 to provide coverage under Medicaid for services to offenders before they are released;
- (h) The funding that would be needed to provide medication-assisted treatment to all offenders with opioid use disorder in each institution or facility of the Department of Corrections and each private facility or institution; and
- (i) Opportunities to obtain federal and private funding to defray the costs described in paragraph (h).
- 2. During the 2023-2024 interim, each county, city or town that maintains a jail or detention facility shall study opioid use disorder among prisoners. Each study must include, without limitation:

- (a) An examination of the current prevalence of opioid use disorder among prisoners in the jail or detention facility;
- (b) An examination of the treatment prescribed for and provided to prisoners with opioid use disorder, including, without limitation, treatments provided by the staff of the jail or detention facility; and
- (c) For a county whose population is 100,000 or more or any city or town within such a county, an examination of the feasibility of:
- (1) Establishing a program to provide medication-assisted treatment for prisoners with opioid use disorder that meets national standards of care for the provision of medication-assisted treatment in a correctional setting, including, without limitation, with regard to personnel and funding; and
- (2) Forming partnerships with providers of health care and agencies to provide medication-assisted treatment inside or nearby the jail or detention facility and facilitate the continuation of medication-assisted treatment after a prisoner is released.
- 3. A county whose population is less than 100,000 or a city or town within such a county that maintains a jail or detention facility may:
- (a) Conduct the examination described in paragraph (c) of subsection 2; and
- (b) Cooperate with the regional behavioral health policy board created by NRS 433.429 for the behavioral health region established by NRS 433.428 in which the county is located for the purpose of conducting that examination.
- 4. On or before June 30, 2024, the Department of Corrections and each county, city or town that maintains a jail or detention facility shall:
- (a) Submit a report of the findings of the study conducted pursuant to this section to the Director of the Legislative Counsel Bureau for transmittal to the Joint Interim Standing Committee on Health and Human Services and the Joint Interim Standing Committee on the Judiciary; and
- (b) Present the findings of the study conducted pursuant to this section at meetings of the Joint Interim Standing Committee on Health and Human Services and the Joint Interim Standing Committee on the Judiciary.
 - 5. As used in this section:
 - (a) "Facility" has the meaning ascribed to it in NRS 209.065.
- (b) "Federally-qualified health center" has the meaning ascribed to it in 42 U.S.C. $\S 1396d(1)(2)(B)$.
 - (c) "Institution" has the meaning ascribed to it in NRS 209.071.
- (d) "Medication-assisted treatment" has the meaning ascribed to it in section 12.3 of this act.
 - (e) "Offender" has the meaning ascribed to it in NRS 209.081.
- (f) "Private facility or institution" has the meaning ascribed to it in NRS 209.083.
- (g) "Provider of health care" has the meaning ascribed to it in NRS 629.031.
- Sec. 18. The provisions of NRS 354.599 do not apply to any additional expenses of a local government that are related to the provisions of this act.

Sec. 19. 1. This section becomes effective upon passage and approval.

- 2. Sections [1,] 1.28, 1.3 and 17.5 of this act becomes effective on July 1, 2023.
 - 3. Sections 1.7 and 17 of this act become effective on October 1, 2023.
- 4. Sections <u>1 to 1.25, inclusive</u>, 2 to 16.9, inclusive, and 18 of this act become effective:
- (a) Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
 - (b) On January 1, 2024, for all other purposes.

Senator Doñate moved the adoption of the amendment.

Remarks by Senator Doñate.

Amendment \dot{N} 0. 938 to Assembly Bill No. 156 amends section 16.1, deletes section 5.8 and revises definitions of a practitioner.

Amendment adopted.

Bill ordered reprinted, re-engrossed and to third reading.

Assembly Bill No. 281.

Bill read second time.

The following amendment was proposed by the Committee on Health and Human Services:

Amendment No. 927.

SUMMARY—Revises provisions governing senior living facilities. (BDR 40-457)

AN ACT relating to health care; requiring the [administrator] administrators of [a] certain senior living [facility] facilities to ensure that such a senior living facility is equipped with a functional ventilation system; establishing requirements governing the detection of carbon dioxide at such a senior living facility; establishing requirements for the assessment of and any repair, upgrade or installation to [such] heating, ventilation and air-conditioning systems at such senior living facilities; requiring certain personnel to complete and review an assessment report on such a ventilation system; requiring the [administrator] administrators of [a] certain senior living [facility] facilities to prepare a report on work performed on such a ventilation system; providing that such a report is a public record; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law sets forth various requirements for certain medical facilities that provide care to persons who are aged or infirm, including, without limitation, a facility for intermediate care, facility for skilled nursing, a residential facility for groups and a home for individual residential care. (Chapter 449 of NRS) This bill establishes requirements for the heating, ventilation and air-conditioning systems of a senior living facility.

Section 7 of this bill defines "senior living facility" as any facility that receives any federal funding from Medicare, Medicaid or other federal health

care program and which provides living assistance and related care to a resident of the facility who is an aged or infirm person, including, without limitation, a facility for intermediate care, facility for skilled nursing, a residential facility for groups and a home for individual residential care. Sections 3-8.7 of this bill define other terms related to ventilation systems in senior living facilities.

Section 9 of this bill sets forth a legislative declaration relating to ventilation systems in senior living facilities. Section 9.2 of this bill limits the applicability of the provisions of this bill to senior living facilities located in a county whose population is 100,000 or more (currently Clark and Washoe Counties). Section 9.5 of this bill requires the State Board of Health to review each new edition of certain standards incorporated into this bill to determine their suitability for this State.

Section 10 of this bill requires, to the extent money is available, the administrator of a senior living facility to ensure that the senior living facility is equipped with a functional ventilation system and to have periodic assessments of the existing system conducted by qualified adjusting personnel or qualified testing personnel. Section 10 also authorizes a facility that is certified as an assisted living facility to use certain federal money received to upgrade and maintain the ventilation system of that facility.

Section 14 of this bill prescribes requirements governing carbon dioxide detectors at a senior living facility. Section 14 also requires the administrator of a senior living facility to cause an adjustment to the ventilation if the concentration of carbon dioxide exceeds a certain amount.

Section 14.5 of this bill sets forth the requirements for qualified testing personnel to assess the heating, ventilation and air-conditioning system of a senior living facility. Section 14.5 also requires qualified testing personnel to prepare a heating, ventilation and air-conditioning assessment report, including certain information relating to the assessments conducted pursuant to that section.

Section 18 of this bill: (1) requires a heating, ventilation and air-conditioning assessment report to be reviewed by a mechanical engineer; and (2) imposes certain duties on the mechanical engineer to facilitate improvements determined necessary based on the report.

Section 19 of this bill requires a senior living facility to take certain corrective actions in response to a heating, ventilation and air-conditioning assessment report and review by a mechanical engineer. Section 20 of this bill imposes certain requirements governing the workforce used to perform such corrective actions.

Section 21 of this bill requires the administrator of a senior living facility to prepare a report on the work performed pursuant to a heating, ventilation and air-conditioning assessment report and review by a mechanical engineer and to submit the report to the Division of Public and Behavioral Health of the Department of Health and Human Services.

Section 22 of this bill provides that a heating, ventilation and air-conditioning assessment report and a report created by an administrator of a senior living facility pursuant to section 21 are public records and available for public inspection. Sections 22.5 and 23 of this bill provide for the expiration of the provisions of this bill where there is no longer sufficient federal money available to facilitate compliance with its provisions.

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

- Section 1. Chapter 449 of NRS is hereby amended by adding thereto the provisions set forth as sections 2 to 22, inclusive, of this act.
- Sec. 2. As used in sections 2 to 22, inclusive, of this act, unless the context otherwise requires, the words and terms defined in sections 3 to 8.7, inclusive, of this act have the meanings ascribed to them in those sections.
- Sec. 3. "Apprenticeship program" means an apprenticeship program approved by the State Apprenticeship Council created by NRS 610.030.
- Sec. 3.1. "ASHRAE" means the American Society of Heating, Refrigerating and Air-Conditioning Engineers.
- Sec. 3.2. "Certified TAB technician" means a technician who is certified to perform testing, adjusting and balancing of HVAC systems by the Associated Air Balance Council, National Environmental Balancing Bureau, Inc. or the Testing, Adjusting and Balancing Bureau, or a similar successor organization.
- Sec. 3.3. "Functional ventilation system" means a heating, ventilation and air-conditioning system that provides the minimum acceptable level of ventilation in accordance with the edition of ASHRAE Standard 62.1, <u>Ventilation and Acceptable Indoor Air Quality</u> most recently approved by the Board pursuant to section 9.5 of this act.
- Sec. 3.4. "HVAC" means heating, ventilation and air-conditioning.
- Sec. 3.5. "Mechanical engineer" means a professional engineer who is licensed in the discipline of mechanical engineering by this State and who has professional experience with heating, ventilation and air-conditioning systems.
- Sec. 3.6. "MERV" means minimum efficiency reporting value, as established by ASHRAE Standard 52.2-2017, <u>Method of Testing General Ventilation Air-Cleaning Devices for Removal Efficiency by Particle Size.</u>
 - Sec. 4. (Deleted by amendment.)
 - Sec. 5. "Qualified adjusting personnel" means either of the following:
 - 1. A certified TAB technician; or
- 2. A skilled and trained workforce under the supervision of a certified TAB technician.
 - Sec. 6. "Qualified testing personnel" means either of the following:
 - 1. A certified TAB technician; or
- 2. A person certified to perform assessments of heating, ventilation and air-conditioning systems by a certifying body in accordance with the edition of standard ISO/IEC 17024, Conformity assessment -- General requirements

- <u>for bodies operating certification of persons</u>, of the International Organization for Standardization most recently approved by the Board pursuant to section 9.5 of this act.
- Sec. 7. "Senior living facility" means any facility that receives any federal funding from Medicare, Medicaid or other federal health care program and which provides living assistance and related care to a resident of the facility who is an aged or infirm person including, without limitation, a facility for intermediate care, facility for skilled nursing, residential facility for groups or home for individual residential care.
- Sec. 8. "Skilled and trained workforce" means a workforce not less than 60 percent of which is composed of graduates of an apprenticeship program for the applicable occupation.
- Sec. 8.3. "Ventilation verification assessment" means an assessment to determine the status of a ventilation system performed in accordance with section 14 of this act.
- Sec. 8.7. "Zone" means an area of a senior living facility where the temperature is controlled by one thermostat.
 - Sec. 9. *The Legislature finds and declares that:*
 - 1. Studies have found:
 - (a) Most ventilation systems are improperly installed; and
- (b) Many of the problems with ventilation systems are linked to the use of inadequately trained personnel to install, test, adjust and balance ventilation systems.
- 2. Ventilation systems should operate as efficiently as possible and inspections and repairs should be performed by qualified personnel.
- 3. In addition to increasing the risk of infectious, airborne diseases, inadequate ventilation systems in senior living facilities negatively impact the health of residents and staff in senior living facilities.
- 4. Improving indoor air quality in senior living facilities may protect the health of residents and staff, reduce the risk of infectious, airborne diseases and save energy.
- 5. Senior living facilities should have functioning ventilation systems that meet or exceed recommended health and safety standards.
- 6. Consistent statewide standards for senior living facilities are necessary to protect the health and safety of residents and staff.
- Sec. 9.2. The provisions of sections 2 to 22, inclusive, of this act apply only to senior living facilities located in a county whose population is 100,000 or more.
- Sec. 9.5. The Board shall review the editions of ASHRAE Standard 62.1, <u>Ventilation and Acceptable Indoor Air Quality</u>, Standard ISO/IEC 17024, <u>Conformity assessment -- General requirements for bodies operating certification of persons</u>, of the International Organization for Standardization, and the <u>Uniform Mechanical Code</u> of the International Association of Plumbing and Mechanical Officials in effect on the effective date of this act to ensure the suitability of the new edition for this State. Each

new edition of those standards shall be deemed approved by the Board unless the edition is disapproved by the Board within 60 days after the date of publication of the new edition.

- Sec. 10. 1. To the extent that money is available, the administrator of a senior living facility shall ensure that the senior living facility is equipped with a functional ventilation system that is tested, adjusted and, if necessary or cost-effective, repaired, upgraded or replaced to increase efficiency and performance in accordance with the provisions of sections 2 to 22, inclusive, of this act. Money shall be considered available if the senior living facility:
- (a) Receives federal or state money and allocates such money to equip the senior living facility with a functional ventilation system or improve the ventilation system or indoor air quality in the senior living facility; or
- (b) As a condition of receiving federal or state money is required to ensure the senior living facility is equipped with a functional ventilation system or improve the ventilation system or indoor air quality in the senior living facility.
- 2. Not later than July 1, 2025, and at least once every 5 years thereafter, the administrator of a senior living facility or any other person that ensures a senior living facility is equipped with a functional ventilation system pursuant to this section shall employ qualified adjusting personnel or qualified testing personnel, or cause such persons to be contracted, to perform a ventilation verification assessment in accordance with section 14.5 of this act to determine the status of and make any necessary improvements to the heating, ventilation and air-conditioning system of the senior living facility.
- 3. A senior living facility that is an assisted living facility certified by the Housing Division of the Department of Business and Industry pursuant to NRS 319.147 may use federal money received pursuant to paragraph (a) of subsection 1 to upgrade and maintain the ventilation system of that facility.
 - Sec. 11. (Deleted by amendment.)
 - Sec. 12. (Deleted by amendment.)
 - Sec. 13. (Deleted by amendment.)
- Sec. 14. 1. Except as otherwise provided in subsection 2, each zone in a senior living facility must be equipped with a carbon dioxide monitor and at least one carbon dioxide monitor for each 10,000 square feet of floor space. Such a carbon dioxide monitor must:
- (a) Be hardwired, plugged in or battery-operated and mounted to the wall at least 3 feet but not more than 6 feet above the floor and at least 5 feet away from any door or operable window;
- (b) Display readings of the concentration of carbon dioxide to appropriate personnel through a display on the monitor or through an application on an Internet website or a cellular telephone;
- (c) Provide a visual notification, including, without limitation, through an indicator light, electronic mail, text message or an application on a cellular

telephone, when the concentration of carbon dioxide in the room reaches 1,100 parts per million or more;

- (d) Maintain a record of previous data that includes, without limitation, the maximum carbon dioxide concentration measured;
- (e) Have a range of 400 parts per million to 5,000 parts per million or more; and
 - (f) Be certified by the manufacturer of the carbon dioxide monitor to:
- (1) Be accurate within 75 parts per million at a carbon dioxide concentration of 1,000 parts per million; and
 - (2) Require calibration not more than once every 5 years.
- 2. The technical specifications for carbon dioxide monitors set forth in subsection 1 may be amended by regulation of the Board as necessary to reflect available technology and to achieve the intent of that subsection.
- 3. If appropriate personnel observe a concentration of carbon dioxide exceeding 1,100 parts per million more than once in any 7-day period in any zone, the administrator of the senior living facility shall cause qualified adjusting personnel to adjust the ventilation of the zone as necessary to ensure that the concentration of carbon dioxide in the zone remains below 1,100 parts per million.
- Sec. 14.5. 1. In a ventilation verification assessment of a senior living facility performed pursuant to section 10 of this act, qualified testing personnel must:
 - (a) Record information from HVAC equipment and the motor nameplate.
- (b) Conduct such testing as necessary to determine that filters are performing at maximum efficiency.
- (c) Obtain physical measurements of the outside air rates at minimum and maximum load conditions.
- (d) For each zone, estimate the number of occupants and determine the current occupancy categories, as listed in Table 402.1 of ASHRAE Standard 62.1-2022, <u>Ventilation and Acceptable Indoor Air Quality</u>.
 - (e) Verify the operation of components of the ventilation system.
 - (f) Measure all inlets and outlets for air distribution.
 - (g) Verify the proper operation of each unit of the HVAC system.
- (h) Verify that maintenance has been performed in accordance with section 8 and table 8.1 of ASHRAE Standard 62.1-2022, <u>Ventilation and Acceptable Indoor Air Quality</u>.
- (i) Verify that control sequences are organized in a manner that facilitates proper operation of the HVAC system.
- (j) Verify the installation of carbon dioxide monitors as required by section 14 of this act and the accuracy of all carbon dioxide monitors within 75 parts per million at a carbon dioxide concentration of 1,000 parts per million.
- (k) If the facility is not currently equipped with mechanical ventilation, collect field data to determine the feasibility of installing such ventilation.

- (1) Identify such adjustments, repairs, upgrades or replacements described in section 19 of this act as are necessary to meet:
- (1) The minimum requirements concerning ventilation and filtration prescribed by any applicable local building code; and
- (2) The criteria of the edition of ASHRAE Standard 62.1, <u>Ventilation</u> and <u>Acceptable Indoor Air Quality</u>, most recently approved by the Board pursuant to section 9.5 of this act.
- (m) Document the performance of each task performed pursuant to paragraphs (a) to (l), inclusive.
- 2. Based on the documentation described in paragraph (m) of subsection 1, the qualified testing personnel who perform a ventilation verification assessment pursuant to section 10 of this act must prepare an HVAC assessment report and provide the report to a mechanical engineer for review in accordance with section 18 of this act.
 - Sec. 15. (Deleted by amendment.)
 - Sec. 16. (Deleted by amendment.)
 - Sec. 17. (Deleted by amendment.)
- Sec. 18. The mechanical engineer who reviews an HVAC assessment report pursuant to subsection 2 of section 14.5 of this act must:
 - 1. Verify or adjust the estimated minimum outside air ventilation rates.
- 2. Determine what, if any, additional adjustments, repairs, upgrades or replacements described in section 19 of this act are necessary to meet:
- (a) The minimum ventilation and filtration requirements of the local building code; and
- (b) The criteria of the edition of ASHRAE Standard 62.1, <u>Ventilation and Acceptable Indoor Air Quality</u> most recently approved by the Board pursuant to section 9.5 of this act.
- 3. Provide the senior living facility with an estimate of costs for all recommended work.
 - Sec. 19. 1. A senior living facility shall take any corrective actions:
- (a) Identified in an HVAC assessment report created pursuant to subsection 2 of section 14.5 of this act and reviewed by a mechanical engineer pursuant to section 18 of this act; or
 - (b) Identified by a mechanical engineer pursuant to section 18 of this act.
- 2. Corrective actions identified in an HVAC assessment report or by a mechanical engineer must include, where necessary:
- (a) Testing, adjusting and balancing the mechanical ventilation system of the senior living facility, if any; and
- (b) If necessary or cost effective, repairs, upgrades or replacement of the HVAC system or installation of a stand-alone mechanical ventilation system.
- 3. Corrective actions identified in an HVAC assessment report or by a mechanical engineer may additionally include, without limitation:
 - (a) General maintenance.
 - (b) Reading and adjustment of ventilation rates.

- (c) Replacement of filters to meet a MERV of at least 13 if equipment allows, while ensuring that the pressure drop is less than the capability of the fan.
 - (d) Direct outside airflow intake measurement.
- 4. A senior living facility may only use portable filtration and air cleaners:
- (a) If the infrastructure of the existing HVAC system is not able to meet the requirements for filtration and ventilation prescribed by sections 2 to 22, inclusive, of this act.
- (b) As recommended by a mechanical engineer as a supplemental enhancement to the permanent infrastructure of the HVAC system:
- (1) When the desired indoor air quality cannot be maintained with the mechanical ventilation system; or
- (2) There exist concerns relating to outdoor air contaminants such as those created by wildfires and air pollution.
- 5. All adjustments to an HVAC system at a senior living facility must be performed by qualified adjusting personnel.
- Sec. 20. 1. The administrator of a senior living facility shall ensure that all work required by section 19 of this act including, without limitation, repairs, upgrades and replacements of an HVAC system, is performed by a skilled and trained workforce of the construction industry and in compliance with applicable regulations of the Board.
- 2. The Division and the Board shall work in consultation with the Labor Commissioner, as necessary, to ensure that assessments and construction required pursuant to sections 2 to 22, inclusive, of this act satisfy any applicable standards and requirements of the edition of the <u>Uniform Mechanical Code</u> of the International Association of Plumbing and Mechanical Officials, most recently approved by the Board pursuant to section 9.5 of this act.
- Sec. 21. Upon the completion of work required by section 19 of this act, the administrator of a senior living facility shall submit a report to the Division. The report must include:
 - 1. The name and address of:
 - (a) The senior living facility;
 - (b) The person preparing and certifying the report; and
- (c) The qualified testing personnel, qualified adjusting personnel, mechanical engineers, contractors and the members of the skilled and trained workforce of the construction industry who performed assessments, adjustments or construction relating to the work.
- 2. Copies of the certification and license, if applicable, of each person identified in paragraph (c) of subsection 1.
 - 3. A copy of all procurement documents relating to the work.
 - 4. Documentation of:
 - (a) Verifications of initial operating ventilation rates.

- (b) Adjustments, repairs, upgrades and replacements performed pursuant to section 19 of this act.
- (c) The final operating conditions of the HVAC system, including, without limitation, the MERV of the filtration system and verified ventilation and exhaust rates for classrooms, auditoriums, gymnasiums, restrooms, offices and other occupied spaces.
- (d) Verification that all work has been tested by qualified testing personnel and adjusted by qualified adjusting personnel.
- (e) Verification that all repairs, upgrades and replacements were performed by a contractor who uses a skilled and trained workforce of the construction industry and who is in compliance with any applicable standards of the United States Department of Labor.
- (f) Compliance with section 19 of this act, including, without limitation, the make and model of each carbon dioxide monitor installed in the senior living facility.
- Sec. 22. An HVAC assessment report created pursuant to section 14.5 of this act and reviewed by a mechanical engineer pursuant to section 18 of this act and a report submitted to the Division by the administrator of a senior living facility pursuant to section 21 of this act are public records and are available for public inspection.
- Sec. 22.5. 1. The Administrator of the Division of Public and Behavioral Health of the Department of Health and Human Services shall regularly monitor the amount of federal money available to facilitate the compliance of senior living facilities with the provisions of sections 2 to 22, inclusive, of this act. On the date on which the Administrator determines that there is insufficient federal money available for that purpose, the Administrator shall transmit notice of that determination to the Governor and the Director of the Legislative Counsel Bureau.
- 2. As used in this section, "senior living facility" has the meaning ascribed to it in section 7 of this act.
- Sec. 23. This act becomes effective upon passage and approval, and expires by limitation on the date on which the Director of the Legislative Counsel Bureau receives notice of a determination by the Administrator of the Division of Public and Behavioral Health of the Department of Health and Human Services pursuant to section 22.5 of this act that there is insufficient federal money available to facilitate the compliance of senior living facilities with the provisions of sections 2 to 22, inclusive, of this act.

Senator Doñate moved the adoption of the amendment.

Remarks by Senator Doñate.

Amendment No. 927 to Assembly Bill No. 281 puts a population cap of 100,000 or more.

Amendment adopted.

Bill ordered reprinted, re-engrossed and to third reading.

Assembly Bill No. 292.

Bill read second time and ordered to third reading.

Assembly Bill No. 469.

Bill read second time and ordered to third reading.

Assembly Bill No. 470.

Bill read second time and ordered to third reading.

Assembly Bill No. 471.

Bill read second time and ordered to third reading.

Assembly Bill No. 472.

Bill read second time and ordered to third reading.

Assembly Bill No. 473.

Bill read second time and ordered to third reading.

Assembly Bill No. 474.

Bill read second time and ordered to third reading.

Assembly Bill No. 475.

Bill read second time and ordered to third reading.

Assembly Bill No. 476.

Bill read second time and ordered to third reading.

Assembly Bill No. 477.

Bill read second time and ordered to third reading.

Assembly Bill No. 478.

Bill read second time and ordered to third reading.

Assembly Bill No. 479.

Bill read second time and ordered to third reading.

Assembly Bill No. 480.

Bill read second time and ordered to third reading.

Assembly Bill No. 481.

Bill read second time and ordered to third reading.

Assembly Bill No. 485.

Bill read second time and ordered to third reading.

Assembly Bill No. 486.

Bill read second time and ordered to third reading.

Assembly Bill No. 492.

Bill read second time and ordered to third reading.

Assembly Bill No. 493.

Bill read second time and ordered to third reading.

Assembly Bill No. 495.

Bill read second time and ordered to third reading.

Assembly Bill No. 496.

Bill read second time and ordered to third reading.

Assembly Bill No. 500.

Bill read second time and ordered to third reading.

Assembly Bill No. 502.

Bill read second time and ordered to third reading.

Assembly Bill No. 504.

Bill read second time and ordered to third reading.

Assembly Bill No. 505.

Bill read second time and ordered to third reading.

Assembly Bill No. 508.

Bill read second time and ordered to third reading.

Assembly Bill No. 509.

Bill read second time and ordered to third reading.

Assembly Bill No. 510.

Bill read second time and ordered to third reading.

Assembly Bill No. 511.

Bill read second time and ordered to third reading.

Assembly Bill No. 512.

Bill read second time and ordered to third reading.

MOTIONS, RESOLUTIONS AND NOTICES

Senator Lange moved that the action whereby Assembly Bill No. 524 was referred to the Committee on Finance be rescinded and that the bill be referred to the Committee on Growth and Infrastructure.

Motion carried.

Senator Dondero Loop moved that Assembly Bill No. 156 be taken from the General File and re-referred to the Committee on Finance.

Motion carried.

GENERAL FILE AND THIRD READING

Senate Bill No. 118.

Bill read third time.

The following amendment was proposed by the Committee on Finance:

Amendment No. 933.

SUMMARY—Revises provisions relating to public health. (BDR 40-334)

AN ACT relating to public health; [requiring that an account for public health improvement be created in the State General Fund; prescribing the manner in which money is allocated from the account;] authorizing the creation of a health district by certain counties which are not physically adjacent; [allocating money from a tax on tobacco products other than

eigarettes to the account;] making an appropriation; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law creates a health district in any county whose population is 700,000 or more (currently Clark County), which has jurisdiction over all public health matters in the health district. (NRS 439.361, 439.362, 439.366) Existing law authorizes the creation of a health district with similar jurisdiction in counties whose population is less than 700,000 (currently all counties other than Clark County), subject to approval by the State Board of Health, by affirmative vote of: (1) the boards of county commissioners of two or more adjacent counties; (2) the governing bodies of two or more cities or towns within any county; or (3) the board of county commissioners and the governing body or bodies of any incorporated city or cities, town or towns, in such a county. (NRS 439.370) Sections 7 and 8 of this bill remove the requirement that two counties must be physically adjacent in order to create a health district.

[Section 5 of this bill requires that an account be created in the State General Fund, to be administered by the Administrator of the Division of Public and Behavioral Health of the Department of Health and Human Services, for the purpose of improving public health in this State. Section 5 also authorizes the Administrator to apply for and accept any gift, bequest, grant and donation for credit to the account. Section 4 of this bill defines the term "health authority" to mean the district health department or, in a location that is not part of a health district, the Division or a designee of the Division. Section 6 of this bill: (1) requires the Administrator to allocate money in the account annually, according to population, to be used by each health authority; and (2) prohibits a health authority from using such money to replace or supplant other sources of funding. Section 6 requires each entity to which money is allocated to annually report to the Legislature concerning the allocation and use of the money. Section 3 of this bill defines the term "account" for purposes related to the use of money in the account.

Existing law imposes a tax upon the receipt, purchase or sale of tobacco products other than eigarettes in this State at a rate of 30 percent of the wholesale price of those products. (NRS 370.450) Section 8.5 of this bill requires the Department of Taxation to annually transfer 35 percent of the proceeds of that tax to the account created by section 5.]

Section 9.2 of this bill makes an appropriation to the Division of Public and Behavioral Health of the Department of Health and Human Services for allocation to specified entities for the improvement of public health. Section 9.2 requires each such entity to submit a report to the Interim Finance Committee at the end of Fiscal Year 2024-2025 and Fiscal Year 2025-2026, respectively, concerning the use of the allocated money.

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

Section 1. [Chapter 439 of NRS is hereby amended by adding thereto

- the provisions set forth as sections 2 to 6, inclusive, of this act.] (Deleted by amendment.)
- Sec. 2. [As used in sections 2 to 6, inclusive, of this act, unless the context otherwise requires, the words and terms defined in sections 3 and 4 of this act have the meanings ascribed to them in those sections.] (Deleted by amendment.)
- Sec. 3. ["Account" means the account created pursuant to section 5 of this act.] (Deleted by amendment.)
- Sec. 4. ["Health authority" means the district health department or, in a location that is not part of a health district, the Division or a designee of the Division.] (Deleted by amendment.)
- Sec. 5. [I. The Administrator may apply for and accept any gift, donation, bequest, grant or other source of money for the purpose of improving public health in this State. Any money so received or from any other source, including, without limitation, legislative appropriation, must be deposited in the State Treasury and accounted for separately in the State General Fund.
- 2. The Administrator shall administer the account. Money in the account must be expended in the manner prescribed by this section and section 6 of this act.
- 3. The interest and income earned on the money in the account, after deducting any applicable charges, must be credited to the account. Any money remaining in the account at the end of the fiscal year does not revert to the State General Fund, and the balance in the account must be carried forward to the next fiscal year.
- -4. All claims against the account must be paid as other claims against the State are paid.
- 5. The Administrator may use not more than 5 percent of the money in the account to administer the account and to fund statewide projects for the purpose prescribed in subsection 1.] (Deleted by amendment.)
- Sec. 6. [1. The Administrator shall, on or before December 31 of each year:
- (a) Determine the total amount of money in the account after deducting any amount allocated for the uses described in subsection 5 of section 5 of this act: and
- (b) Allocate money among the health authorities in this State in proportion to the populations of the areas under the jurisdiction of those health authorities.
- 2. A health authority to which money is allocated pursuant to subsection I shall:
- (a) Evaluate the public health needs of residents of the area under the jurisdiction of the health authority;
- (b) Determine the level of priority of the public health needs identified pursuant to paragraph (a);

- (c) Expend the money in accordance with the levels of priority identified pursuant to paragraph (b); and
- (d) Not later than 90 days after the end of the fiscal year in which the health authority receives the money:
- (1) Prepare a report which must include, without limitation, a description of:
- (I) The process used by the health authority pursuant to paragraph (a) to evaluate the public health needs of residents of the area under the jurisdiction of the health authority and the public health needs identified through that process;
- (H) The process used by the health authority pursuant to paragraph (b) to determine the level of priority of the public health needs identified pursuant to paragraph (a) and the levels of priority assigned to those public health needs through that process; and
- (III) Each expenditure made by the health authority pursuant to paragraph (e); and
- (2) Submit the report to the Director of the Legislative Counsel Bureau for transmittal to the Interim Finance Committee.
- 3. A health authority shall not use money allocated to the health authority pursuant to subsection 1 to replace or supplant money available from other sources. I (Deleted by amendment.)
 - Sec. 7. NRS 439.370 is hereby amended to read as follows:
 - 439.370 By affirmative vote of:
- 1. The boards of county commissioners of two or more [adjacent] counties:
- 2. The governing bodies of two or more cities or towns within any county; or
- 3. The board of county commissioners and the governing body or bodies of any incorporated city or cities, town or towns, in such county,
- → and with the approval of the State Board of Health, there may be created a health district with a health department consisting of a district health officer and a district board of health.
 - Sec. 8. NRS 439.383 is hereby amended to read as follows:
- 439.383 When two or more [adjacent] counties establish a district board of health, all county boards of health in such district shall thereupon be abolished.
 - Sec. 8.5. INRS 370.500 is hereby amended to read as follows:
- 370.500 1. All amounts of tax required to be paid to the State pursuant to NRS 370.440 to 370.490, inclusive, must be paid to the Department in the form of remittances payable to the Department.
- 2. The Department shall deposit these payments with the State Treasurer for credit to the Account for the Tax on Products Made From Tobacco, Other Than Cicarettes, in the State General Fund.
- 3. At the end of each fiscal year, the Department shall transfer from the Account for the Tax on Products Made From Tobacco, Other Than

Cigarettes to the account created pursuant to section 5 of this act an amount equal to 35 percent of the tax collected pursuant to NRS 370.440 to 370.490, inclusive, during the fiscal year.] (Deleted by amendment.)

- Sec. 9. (Deleted by amendment.)
- Sec. 9.2. 1. There is hereby appropriated from the State General Fund to the Division of Public and Behavioral Health of the Department of Health and Human Services the sum of \$15,000,000 for allocation pursuant to subsection 2 for the improvement of the public health.
- 2. On or before August 1, 2024, the Division of Public and Behavioral Health shall allocate the money appropriated by subsection 1 to the following entities based on the following prescribed percentages of the total appropriated money:
- (a) The Central Nevada Health District, 1.3 percent;
- (b) The Washoe County Health District, 16 percent;
- (c) The Southern Nevada Health District, 73 percent; and
- (d) The Division of Public and Behavioral Health or a designee of the Division, 9.7 percent.
- 3. An entity to which money is allocated pursuant to subsection 2 shall:
- (a) Evaluate the public health needs of residents of the area under the jurisdiction of the entity;
- (b) Determine the level of priority of the public health needs identified pursuant to paragraph (a);
- (c) Expend the allocated money in accordance with the levels of priority identified pursuant to paragraph (b); and
- (d) Not later than 90 days after the end of Fiscal Year 2024-2025 and 2025-2026, respectively:
 - (1) Prepare a report which must include, without limitation:
- (I) A description of the process used by the entity pursuant to paragraph (a) to evaluate the public health needs of residents of the area under the jurisdiction of the entity and the public health needs identified through that process;
- (II) A description of the process used by the entity pursuant to paragraph (b) to determine the level of priority of the public health needs identified pursuant to paragraph (a) and the levels of priority assigned to those public health needs through that process;
- (III) A description of each expenditure of the allocated money made by the entity pursuant to paragraph (c); and
- (IV) The unexpended balance of the allocated money at the end of the fiscal year.
- (2) Submit the report to the Director of the Legislative Counsel Bureau for transmittal to the Interim Finance Committee.
- 4. An entity to which money is allocated pursuant to subsection 2 shall not use the money to replace or supplant money available from other sources.
- 5. The portion of any money remaining at the end of Fiscal Year 2024-2025 from an allocation of the money appropriated by subsection 1 that

is not committed for expenditure by June 30, 2025, must be carried forward to Fiscal Year 2025-2026 to be used for the same purpose. Any remaining balance of the allocated money carried forward to Fiscal Year 2025-2026 must not be committed for expenditure after June 30, 2026, and must be reverted to the State General Fund on or before September 18, 2026.

Sec. 9.5. [The provisions of subsection 1 of NRS 218D.380 do not apply to any provision of this act which adds or revises a requirement to submit a report to the Legislature.] (Deleted by amendment.)

Sec. 10. <u>1.</u> This [act becomes] section and sections 1 to 9, inclusive, and 9.5 of this act become effective [on July 1, 2023.] upon passage and approval.

2. Section 9.2 of this act becomes effective on July 1, 2024.

Senator Dondero Loop moved the adoption of the amendment.

Remarks by Senator Dondero Loop.

Amendment No. 933 to Senate Bill No. 118 appropriates \$15 million in General Funds to the Division of Public and Behavioral Health.

Amendment adopted.

Bill read third time.

Remarks by Senator Doñate.

This is a healthy bill.

Roll call on Senate Bill No. 118:

YEAS-20.

NAYS-None.

EXCUSED—Titus.

Senate Bill No. 118 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 191.

Bill read third time.

The following amendment was proposed by the Committee on Finance:

Amendment No. 915.

SUMMARY—Makes certain changes relating to applied behavior analysis. (BDR 38-545)

AN ACT relating to applied behavior analysis; requiring the State Plan for Medicaid to include coverage for certain services related to applied behavior analysis; revising the issuance fee for a license as a behavior analyst or an assistant behavior analyst; making appropriations to and authorizing expenditures by the Division of Health Care Financing and Policy of the Department of Health and Human Services; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires the Director of the Department of Health and Human Services to develop and administer a State Plan for Medicaid which includes a list of specific medical services required to be provided to Medicaid recipients. (NRS 422.063, 422.270-422.27497) Existing law requires the State Plan for Medicaid to include: (1) rates of reimbursement for services provided by behavior analysts, assistant behavior analysts and registered behavior technicians that are comparable to rates paid by Medicaid programs in other states for such services; and (2) reasonable limits on the number of hours that such providers are authorized to bill for services provided to a recipient of Medicaid in a 24-hour period. (NRS 422.27497) Section 1 of this bill requires the Director to include in the State Plan coverage for the cost of services provided by behavior analysts, assistant behavior analysts and registered behavior technicians to Medicaid recipients who are less than 27 years of age.

Existing law authorizes the Board of Applied Behavior Analysis to charge a fee of not more than \$25 for the issuance of an initial license as a behavior analyst or assistant behavior analyst. (NRS 641D.380) Section 2 of this bill increases to \$450 the maximum fee for an initial license that the Board is authorized to charge.

Section 2.5 of this bill makes an appropriation to, and authorizes expenditure by, the Division of Health Care Financing and Policy of the Department for the administrative and medical service costs of providing Medicaid coverage for certain services provided by behavior analysts, assistant behavior analysts and registered behavior technicians pursuant to section 1.

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

Section 1. NRS 422.27497 is hereby amended to read as follows:

422.27497 1. The Director shall include in the State Plan for Medicaid a requirement that the State pay the nonfederal share of expenditures incurred for services provided by behavior analysts, assistant behavior analysts and registered behavior technicians to recipients of Medicaid who are less than 27 years of age.

2. The Director shall:

- (a) Biennially establish and include in the State Plan for Medicaid rates of reimbursement which are provided on a fee-for-service basis for services provided by behavior analysts, assistant behavior analysts and registered behavior technicians that are comparable to rates of reimbursement paid by Medicaid programs in other states for the services of those providers.
- (b) Establish reasonable limits on the number of hours that a behavior analyst, assistant behavior analyst or registered behavior technician is authorized to bill for services provided to a recipient of Medicaid in a 24-hour period.
- [2.] 3. The Division shall provide training to behavior analysts, assistant behavior analysts and registered behavior technicians who provide services to recipients of Medicaid concerning the limits established pursuant to paragraph (b) of subsection [1].

- 4. On or before January 31 of each year, the Division shall:
- (a) Compile a report concerning the provision of services to recipients of Medicaid who have been diagnosed with an autism spectrum disorder. The report must include:
- (1) The number of recipients of Medicaid who were newly diagnosed with an autism spectrum disorder during the immediately preceding year and the number of those recipients for whom assistance with care management was provided;
- (2) The number of recipients of Medicaid diagnosed with an autism spectrum disorder for whom assistance with care management was reimbursed through Medicaid during the immediately preceding year;
- (3) The number of recipients of Medicaid for whom the first claim for reimbursement for the services of a registered behavior technician was submitted during the immediately preceding year;
- (4) The number of assessments or evaluations by a behavior analyst that were reimbursed through Medicaid during the immediately preceding year;
- (5) The total number of claims for applied behavior analysis services provided to recipients of Medicaid made during the immediately preceding year;
- (6) For the immediately preceding year, the average times that elapsed between claims for each step of the process that a recipient of Medicaid must undergo to receive treatment from a registered behavior technician, beginning with initial diagnosis with an autism spectrum disorder and including, without limitation, comprehensive diagnosis with an autism spectrum disorder, evaluation and treatment by a behavior analyst and treatment by a registered behavior technician;
- (7) The number of recipients of Medicaid receiving services through Medicaid managed care who were, at the end of the immediately preceding year, on a wait list for applied behavior analysis services;
- (8) An assessment of the adequacy of the network of each health maintenance organization or managed care organization that provides services to recipients of Medicaid under the State Plan for Medicaid for applied behavior analysis services, as compared to the applicable standard for network adequacy set forth in the contract between the health maintenance organization or managed care organization and the Division;
- (9) The number of behavior analysts and registered behavior technicians who are currently providing services to recipients of Medicaid who receive services through each health maintenance organization or managed care organization described in subparagraph (8); and
- (10) The number of behavior analysts and registered behavior technicians who provide services to recipients of Medicaid who do not receive services through managed care.
- (b) Submit the report to the Director of the Legislative Counsel Bureau for transmittal to:

- (1) In odd-numbered years, the next regular session of the Legislature; and
- (2) In even-numbered years, the Joint Interim Standing Committee on Health and Human Services.
 - [4.] 5. As used in this section:
- (a) "Applied behavior analysis services" means the services of a behavior analyst, assistant behavior analyst or registered behavior technician.
- (b) "Assistant behavior analyst" has the meaning ascribed to it in NRS 641D.020.
 - (c) "Behavior analyst" has the meaning ascribed to it in NRS 641D.030.
- (d) "Registered behavior technician" has the meaning ascribed to it in NRS 641D.100.
 - Sec. 2. NRS 641D.380 is hereby amended to read as follows:
- 641D.380 1. The Board shall prescribe, by regulation, fees for any services provided by the Board pursuant to this chapter and the following fees, which must not exceed:

	Application for licensure as a behavior analyst or assistant behavior analyst\$100
]	Issuance of an initial license as a behavior analyst or assistant behavior analyst
1	Biennial renewal or reinstatement of a license as a behavior
-	analyst
]	Biennial renewal or reinstatement of a license as an assistant
	behavioral analyst
]	Biennial renewal or reinstatement of a registration as a
,	registered behavior technician
	Placement of a license on inactive status
	Biennial review of a license on inactive status
	Restoration to active status of a license as a behavior analyst
	on inactive status if the restoration occurs during the
	first year of the biennium in which the license was
	issued or renewed
	Restoration to active status of a license as a behavior analyst
	on inactive status if the restoration occurs during the
	second year of the biennium in which the license was
	issued or renewed
	Restoration to active status of a license as an assistant
	behavior analyst on inactive status if the restoration
	occurs during the first year of the biennium in which
	the license was issued or renewed
]	Restoration to active status of a license as an assistant
	behavior analyst on inactive status if the restoration
	occurs during the second year of the biennium in which
	the license was issued or renewed
]	Reproduction and mailing of material for an application

A dishonored check	35
A change of name on a license or registration	25
A duplicate license or registration	25
Copies of the provisions of NRS relating to the practice of	
applied behavior analysis and the rules and regulations	
adopted by the Board	25
Letter of good standing	15
Review and approval of a course or program of continuing	
education	25
	_

- 2. The Board shall ensure, to the extent practicable, that the amount of such fees is sufficient to pay the costs incurred by the Board under the provisions of this chapter, including, without limitation, the compensation of the Board prescribed by NRS 641D.220, and does not exceed the amount necessary to pay those costs.
- Sec. 2.5. 1. There is hereby appropriated from the State General Fund to the Division of Health Care Financing and Policy of the Department of Health and Human Services for the administrative and medical service costs of providing Medicaid coverage for services provided by behavior analysts, assistant behavior analysts and registered behavior technicians to recipients of Medicaid who are less than 27 years of age the following sums:

For the Fiscal Year 2023-2024 \$118,272 For the Fiscal Year 2024-2025 \$671,531

2. Expenditure of the following sums not appropriated from the State General Fund or the State Highway Fund is hereby authorized by the Division of Health Care Financing and Policy of the Department of Health and Human Services for the same purpose as set forth in subsection 1:

For the Fiscal Year 2023-2024 \$351,662 For the Fiscal Year 2024-2025 \$1,610,899

- 3. Any balance of the sums appropriated by subsection 1 remaining at the end of the respective fiscal years must not be committed for expenditure after June 30 of the respective fiscal years by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 20, 2024, and September 19, 2025, respectively, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 20, 2024, and September 19, 2025, respectively.
 - Sec. 3. 1. This section becomes effective upon passage and approval.
 - 2. Section 2.5 of this act becomes effective on July 1, 2023.
- 3. Sections 1 and 2 of this act become effective:
- (a) Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
 - (b) On January 1, 2024, for all other purposes.

Senator Dondero Loop moved the adoption of the amendment.

Remarks by Senator Dondero Loop.

Amendment No. 915 to Senate Bill No. 191 makes certain changes relating to applied behavioral analysis.

Amendment adopted.

Bill read third time.

Remarks by Senator Seevers Gansert.

Senate Bill No. 191 extends Medicaid coverage for young adults with autism up to 27 years of age and corrects a fee for the initial licensure.

Roll call on Senate Bill No. 191:

YEAS-20.

NAYS-None.

EXCUSED—Titus.

Senate Bill No. 191 having received a two-thirds majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 221.

Bill read third time.

The following amendment was proposed by the Committee on Finance:

Amendment No. 944.

SUMMARY—Revises provisions relating to Medicaid. (BDR S-951)

AN ACT relating to Medicaid; requiring the establishment of a specific billing category and methodology for reimbursing clinics that provide certain services to children under Medicaid; making an appropriation to and authorizing the expenditure of money by the Division of Health Care Financing and Policy of the Department of Health and Human Services; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires the Department of Health and Human Services to administer the Medicaid program. (NRS 422.270) [This] Section 1 of this bill requires the Division of Health Care Financing and Policy of the Department to establish: (1) a specific category of provider for purposes of billing and reimbursement under Medicaid for clinics that provide services primarily to children with cancer and rare diseases; and (2) billing guidelines and a rate methodology for such clinics that are consistent with prevailing best practices for reimbursing such clinics. Section 1.5 of this bill makes an appropriation to and authorizes the expenditure of money by the Division for costs related to medical services and computer programming changes associated with the provisions of section 1.

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

Section 1. On or before October 1, 2023, the Division of Health Care Financing and Policy of the Department of Health and Human Services shall, to the extent that federal participation is available:

- 1. Amend the *Medicaid Services Manual* to create a specific billing category as a type of special clinic for clinics that provide services primarily to children with cancer and rare diseases; and
- 2. Establish billing guidelines and a rate methodology for clinics described in subsection 1 that are consistent with prevailing best practices for reimbursing such clinics.
- Sec. 1.5. 1. There is hereby appropriated from the State General Fund to the Division of Health Care Financing and Policy of the Department of Health and Human Services for costs related to medical services and computer programming changes associated with the provisions of section 1 of this act the following sums:

2. Expenditure of the following sums not appropriated from the State General Fund or the State Highway Fund is hereby authorized by the Division of Health Care Financing and Policy of the Department of Health and Human Services for the same purposes as set forth in subsection 1:

For the Fiscal Year 2023-2024 \$517,759 For the Fiscal Year 2024-2025 \$1,459,291

- 3. Any balance of the sums appropriated by subsection 1 remaining at the end of the respective fiscal years must not be committed for expenditure after June 30 of the respective fiscal years by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 20, 2024, and September 19, 2025, respectively, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 20, 2024, and September 19, 2025, respectively.
- Sec. 2. <u>1.</u> This [act becomes] section and section 1 of this act become effective upon passage and approval.
- 2. Section 1.5 of this act becomes effective on July 1, 2023.

Senator Dondero Loop moved the adoption of the amendment.

Remarks by Senator Dondero Loop.

Amendment No. 944 to Senate Bill No. 221 revises provisions relating to Medicaid.

Amendment adopted.

Bill read third time.

Remarks by Senator Doñate.

This bill helps kids with cancer.

Roll call on Senate Bill No. 221:

YEAS—20.

NAYS-None.

EXCUSED—Titus.

Senate Bill No. 221 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 385.

Bill read third time.

The following amendment was proposed by the Committee on Finance:

Amendment No. 917.

SUMMARY—Revises provisions relating to health care. (BDR 40-375)

AN ACT relating to health care; requiring a hospital to ensure that a patient or his or her primary caregiver meets or knows how to contact a dietician assigned to a care team for the patient in certain circumstances; requiring certain entities that provide care to a patient in his or her residence to consult with a dietician in certain circumstances; [requiring certain providers of health care at a hospital to document the reasons for not ordering or conducting any test requested by the patient;] requiring Medicaid to provide coverage for certain dental procedures and certain corrective lenses; making appropriations to and authorizing certain expenditures by the Division of Health Care Financing and Policy of the Department of Health and Human Services; and providing other matters properly relating thereto. Legislative Counsel's Digest:

Existing law requires the State Board of Health to adopt regulations governing the licensing and operation of medical facilities, including hospitals. (NRS 449.0302) Section 1 of this bill requires a hospital that discharges a patient to ensure that the patient or the person with primary responsibility for the care of the patient meets or knows how to contact any dietician assigned to a care team for the patient while the patient rehabilitates. Section 1 requires certain licensed entities that provide care to a patient discharged from a hospital in his or her residence to consult with a dietician to ensure that the patient or the person with primary responsibility for the care of the patient understands the dietary needs of the patient. Section 1 also requires a provider of health care who has primary responsibility for the treatment and care of a patient at a hospital to document in the medical record of the patient the reasons the provider chose not to order or conduct any test requested by the patient.] Sections 2-7 and 10 of this bill make conforming changes to provide for the administration and enforcement of the requirements of section 1 in the same manner as other requirements imposed on medical facilities by existing law.

Existing law requires the Department of Health and Human Services to administer Medicaid. (NRS 422.270) Section 9.4 of this bill requires the Director of the Department to include under Medicaid coverage for: (1) the filling of cavities; (2) the fabrication, preparation and placement of temporary and permanent crowns; and (3) removable dentures. Section 9.8 of this bill: (1) requires the Director to include under Medicaid coverage for polycarbonate lenses; and (2) prohibits Medicaid from placing certain

conditions on such coverage. Sections 9.4 and 9.8 require the Department to apply for certain federal approval, as necessary to obtain federal funding to provide such coverage. Section 8 of this bill makes a conforming change to indicate that the provisions of sections 9.4 and 9.8 will be administered in the same manner as the provisions of existing law governing the State Plan for Medicaid. Section 11.5 of this bill makes appropriations to and authorizes expenditures by the Division of Health Care Financing and Policy of the Department for administrative and medical service costs of providing Medicaid coverage for certain dental services.

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

Section 1. Chapter 449 of NRS is hereby amended by adding thereto a new section to read as follows:

- 1. If a patient will be released from a hospital to his or her residence or a rehabilitation center and a dietician is assigned to a team of persons formed by the hospital to care for the patient while the patient rehabilitates, the hospital shall ensure that the patient or the person with primary responsibility for the care of the patient meets or knows how to contact the dietician.
- 2. If a patient is released by a hospital to his or her residence to receive care from an agency to provide personal care services in the home or any other entity licensed pursuant to this chapter that provides care to the patient in his or her residence, the agency to provide personal care services in the home or other entity shall consult with a dietician, as appropriate, to ensure that the patient or the person with primary responsibility for the care of the patient understands the dietary needs of the patient.
- [3. The provider of health care who has primary responsibility for the treatment and care of a patient at a hospital shall document in the medical record of the patient the reasons the provider chose not to order or conduct any test requested by the patient.]
 - Sec. 2. NRS 449.029 is hereby amended to read as follows:
- 449.029 As used in NRS 449.029 to 449.240, inclusive, *and section 1 of this act*, unless the context otherwise requires, "medical facility" has the meaning ascribed to it in NRS 449.0151 and includes a program of hospice care described in NRS 449.196.
 - Sec. 3. NRS 449.0301 is hereby amended to read as follows:
- 449.0301 The provisions of NRS 449.029 to 449.2428, inclusive, *and section 1 of this act* do not apply to:
- 1. Any facility conducted by and for the adherents of any church or religious denomination for the purpose of providing facilities for the care and treatment of the sick who depend solely upon spiritual means through prayer for healing in the practice of the religion of the church or denomination, except that such a facility shall comply with all regulations relative to sanitation and safety applicable to other facilities of a similar category.
 - 2. Foster homes as defined in NRS 424.014.

- 3. Any medical facility, facility for the dependent or facility which is otherwise required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed that is operated and maintained by the United States Government or an agency thereof.
 - Sec. 4. NRS 449.0302 is hereby amended to read as follows:
 - 449.0302 1. The Board shall adopt:
- (a) Licensing standards for each class of medical facility or facility for the dependent covered by NRS 449.029 to 449.2428, inclusive, *and section 1 of this act* and for programs of hospice care.
 - (b) Regulations governing the licensing of such facilities and programs.
- (c) Regulations governing the procedure and standards for granting an extension of the time for which a natural person may provide certain care in his or her home without being considered a residential facility for groups pursuant to NRS 449.017. The regulations must require that such grants are effective only if made in writing.
- (d) Regulations establishing a procedure for the indemnification by the Division, from the amount of any surety bond or other obligation filed or deposited by a facility for refractive surgery pursuant to NRS 449.068 or 449.069, of a patient of the facility who has sustained any damages as a result of the bankruptcy of or any breach of contract by the facility.
- (e) Regulations that prescribe the specific types of discrimination prohibited by NRS 449.101.
- (f) Regulations requiring a hospital or independent center for emergency medical care to provide training to each employee who provides care to victims of sexual assault or attempted sexual assault concerning appropriate care for such persons, including, without limitation, training concerning the requirements of NRS 449.1885.
- (g) Any other regulations as it deems necessary or convenient to carry out the provisions of NRS 449.029 to 449.2428, inclusive [.], and section 1 of this act.
- 2. The Board shall adopt separate regulations governing the licensing and operation of:
 - (a) Facilities for the care of adults during the day; and
 - (b) Residential facilities for groups,
- which provide care to persons with Alzheimer's disease or other severe dementia, as described in paragraph (a) of subsection 2 of NRS 449.1845.
 - 3. The Board shall adopt separate regulations for:
- (a) The licensure of rural hospitals which take into consideration the unique problems of operating such a facility in a rural area.
- (b) The licensure of facilities for refractive surgery which take into consideration the unique factors of operating such a facility.
- (c) The licensure of mobile units which take into consideration the unique factors of operating a facility that is not in a fixed location.
- 4. The Board shall require that the practices and policies of each medical facility or facility for the dependent provide adequately for the protection of

the health, safety and physical, moral and mental well-being of each person accommodated in the facility.

- 5. In addition to the training requirements prescribed pursuant to NRS 449.093, the Board shall establish minimum qualifications for administrators and employees of residential facilities for groups. In establishing the qualifications, the Board shall consider the related standards set by nationally recognized organizations which accredit such facilities.
- 6. The Board shall adopt separate regulations regarding the assistance which may be given pursuant to NRS 453.375 and 454.213 to an ultimate user of controlled substances or dangerous drugs by employees of residential facilities for groups. The regulations must require at least the following conditions before such assistance may be given:
- (a) The ultimate user's physical and mental condition is stable and is following a predictable course.
- (b) The amount of the medication prescribed is at a maintenance level and does not require a daily assessment.
- (c) A written plan of care by a physician or registered nurse has been established that:
- (1) Addresses possession and assistance in the administration of the medication; and
- (2) Includes a plan, which has been prepared under the supervision of a registered nurse or licensed pharmacist, for emergency intervention if an adverse condition results.
- (d) Except as otherwise authorized by the regulations adopted pursuant to NRS 449.0304, the prescribed medication is not administered by injection or intravenously.
- (e) The employee has successfully completed training and examination approved by the Division regarding the authorized manner of assistance.
- 7. The Board shall adopt separate regulations governing the licensing and operation of residential facilities for groups which provide assisted living services. The Board shall not allow the licensing of a facility as a residential facility for groups which provides assisted living services and a residential facility for groups shall not claim that it provides "assisted living services" unless:
- (a) Before authorizing a person to move into the facility, the facility makes a full written disclosure to the person regarding what services of personalized care will be available to the person and the amount that will be charged for those services throughout the resident's stay at the facility.
 - (b) The residents of the facility reside in their own living units which:
- (1) Except as otherwise provided in subsection 8, contain toilet facilities;
 - (2) Contain a sleeping area or bedroom; and
- (3) Are shared with another occupant only upon consent of both occupants.

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

- (c) Educating the residents of residential facilities for groups concerning the plans adopted pursuant to paragraphs (a) and (b); and
- (d) Posting the plans or a summary of the plans adopted pursuant to paragraphs (a) and (b) in a conspicuous place in each residential facility for groups.
- 10. The regulations governing the licensing and operation of facilities for transitional living for released offenders must provide for the licensure of at least three different types of facilities, including, without limitation:
 - (a) Facilities that only provide a housing and living environment;
- (b) Facilities that provide or arrange for the provision of supportive services for residents of the facility to assist the residents with reintegration into the community, in addition to providing a housing and living environment; and
- (c) Facilities that provide or arrange for the provision of programs for alcohol and other substance use disorders, in addition to providing a housing and living environment and providing or arranging for the provision of other supportive services.
- → The regulations must provide that if a facility was originally constructed as a single-family dwelling, the facility must not be authorized for more than eight beds.
- 11. The Board shall adopt regulations applicable to providers of community-based living arrangement services which:
- (a) Except as otherwise provided in paragraph (b), require a natural person responsible for the operation of a provider of community-based living arrangement services and each employee of a provider of community-based living arrangement services who supervises or provides support to recipients of community-based living arrangement services to complete training concerning the provision of community-based living arrangement services to persons with mental illness and continuing education concerning the particular population served by the provider;
- (b) Exempt a person licensed or certified pursuant to title 54 of NRS from the requirements prescribed pursuant to paragraph (a) if the Board determines that the person is required to receive training and continuing education substantially equivalent to that prescribed pursuant to that paragraph;
- (c) Require a natural person responsible for the operation of a provider of community-based living arrangement services to receive training concerning the provisions of title 53 of NRS applicable to the provision of community-based living arrangement services; and
- (d) Require an applicant for a license to provide community-based living arrangement services to post a surety bond in an amount equal to the operating expenses of the applicant for 2 months, place that amount in escrow or take another action prescribed by the Division to ensure that, if the applicant becomes insolvent, recipients of community-based living arrangement services from the applicant may continue to receive

community-based living arrangement services for 2 months at the expense of the applicant.

- 12. The Board shall adopt separate regulations governing the licensing and operation of freestanding birthing centers. Such regulations must:
- (a) Align with the standards established by the American Association of Birth Centers, or its successor organization, the accrediting body of the Commission for the Accreditation of Birth Centers, or its successor organization, or another nationally recognized organization for accrediting freestanding birthing centers; and
- (b) Allow the provision of supervised training to providers of health care, as appropriate, at a freestanding birthing center.
- 13. As used in this section, "living unit" means an individual private accommodation designated for a resident within the facility.
 - Sec. 5. NRS 449.160 is hereby amended to read as follows:
- 449.160 1. The Division may deny an application for a license or may suspend or revoke any license issued under the provisions of NRS 449.029 to 449.2428, inclusive, *and section 1 of this act* upon any of the following grounds:
- (a) Violation by the applicant or the licensee of any of the provisions of NRS 439B.410 or 449.029 to 449.245, inclusive, *and section 1 of this act* or of any other law of this State or of the standards, rules and regulations adopted thereunder.
 - (b) Aiding, abetting or permitting the commission of any illegal act.
- (c) Conduct inimical to the public health, morals, welfare and safety of the people of the State of Nevada in the maintenance and operation of the premises for which a license is issued.
- (d) Conduct or practice detrimental to the health or safety of the occupants or employees of the facility.
- (e) Failure of the applicant to obtain written approval from the Director of the Department of Health and Human Services as required by NRS 439A.100 or as provided in any regulation adopted pursuant to NRS 449.001 to 449.430, inclusive, *and section 1 of this act* and 449.435 to 449.531, inclusive, and chapter 449A of NRS if such approval is required.
- (f) Failure to comply with the provisions of NRS 441A.315 and any regulations adopted pursuant thereto or NRS 449.2486.
 - (g) Violation of the provisions of NRS 458.112.
- 2. In addition to the provisions of subsection 1, the Division may revoke a license to operate a facility for the dependent if, with respect to that facility, the licensee that operates the facility, or an agent or employee of the licensee:
 - (a) Is convicted of violating any of the provisions of NRS 202.470;
- (b) Is ordered to but fails to abate a nuisance pursuant to NRS 244.360, 244.3603 or 268.4124; or
- (c) Is ordered by the appropriate governmental agency to correct a violation of a building, safety or health code or regulation but fails to correct the violation.

- 3. The Division shall maintain a log of any complaints that it receives relating to activities for which the Division may revoke the license to operate a facility for the dependent pursuant to subsection 2. The Division shall provide to a facility for the care of adults during the day:
- (a) A summary of a complaint against the facility if the investigation of the complaint by the Division either substantiates the complaint or is inconclusive:
- (b) A report of any investigation conducted with respect to the complaint; and
 - (c) A report of any disciplinary action taken against the facility.
- → The facility shall make the information available to the public pursuant to NRS 449.2486.
- 4. On or before February 1 of each odd-numbered year, the Division shall submit to the Director of the Legislative Counsel Bureau a written report setting forth, for the previous biennium:
- (a) Any complaints included in the log maintained by the Division pursuant to subsection 3; and
- (b) Any disciplinary actions taken by the Division pursuant to subsection 2.
 - Sec. 6. NRS 449.163 is hereby amended to read as follows:
- 449.163 1. In addition to the payment of the amount required by NRS 449.0308, if a medical facility, facility for the dependent or facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed violates any provision related to its licensure, including any provision of NRS 439B.410 or 449.029 to 449.2428, inclusive, and section 1 of this act or any condition, standard or regulation adopted by the Board, the Division, in accordance with the regulations adopted pursuant to NRS 449.165, may:
- (a) Prohibit the facility from admitting any patient until it determines that the facility has corrected the violation;
- (b) Limit the occupancy of the facility to the number of beds occupied when the violation occurred, until it determines that the facility has corrected the violation;
- (c) If the license of the facility limits the occupancy of the facility and the facility has exceeded the approved occupancy, require the facility, at its own expense, to move patients to another facility that is licensed;
- (d) Impose an administrative penalty of not more than \$5,000 per day for each violation, together with interest thereon at a rate not to exceed 10 percent per annum; and
- (e) Appoint temporary management to oversee the operation of the facility and to ensure the health and safety of the patients of the facility, until:
- (1) It determines that the facility has corrected the violation and has management which is capable of ensuring continued compliance with the applicable statutes, conditions, standards and regulations; or
 - (2) Improvements are made to correct the violation.

- 2. If the facility fails to pay any administrative penalty imposed pursuant to paragraph (d) of subsection 1, the Division may:
- (a) Suspend the license of the facility until the administrative penalty is paid; and
- (b) Collect court costs, reasonable attorney's fees and other costs incurred to collect the administrative penalty.
- 3. The Division may require any facility that violates any provision of NRS 439B.410 or 449.029 to 449.2428, inclusive, *and section 1 of this act* or any condition, standard or regulation adopted by the Board to make any improvements necessary to correct the violation.
- 4. Any money collected as administrative penalties pursuant to paragraph (d) of subsection 1 must be accounted for separately and used to administer and carry out the provisions of NRS 449.001 to 449.430, inclusive, and section 1 of this act, 449.435 to 449.531, inclusive, and chapter 449A of NRS to protect the health, safety, well-being and property of the patients and residents of facilities in accordance with applicable state and federal standards or for any other purpose authorized by the Legislature.
 - Sec. 7. NRS 449.240 is hereby amended to read as follows:
- 449.240 The district attorney of the county in which the facility is located shall, upon application by the Division, institute and conduct the prosecution of any action for violation of any provisions of NRS 449.029 to 449.245, inclusive [.], and section 1 of this act.
 - Sec. 8. NRS 232.320 is hereby amended to read as follows:
 - 232.320 1. The Director:
- (a) Shall appoint, with the consent of the Governor, administrators of the divisions of the Department, who are respectively designated as follows:
 - (1) The Administrator of the Aging and Disability Services Division;
- (2) The Administrator of the Division of Welfare and Supportive Services:
 - (3) The Administrator of the Division of Child and Family Services;
- (4) The Administrator of the Division of Health Care Financing and Policy; and
 - (5) The Administrator of the Division of Public and Behavioral Health.
- (b) Shall administer, through the divisions of the Department, the provisions of chapters 63, 424, 425, 427A, 432A to 442, inclusive, 446 to 450, inclusive, 458A and 656A of NRS, NRS 127.220 to 127.310, inclusive, 422.001 to 422.410, inclusive, and sections 9.4 and 9.8 of this act, 422.580, 432.010 to 432.133, inclusive, 432B.6201 to 432B.626, inclusive, 444.002 to 444.430, inclusive, and 445A.010 to 445A.055, inclusive, and all other provisions of law relating to the functions of the divisions of the Department, but is not responsible for the clinical activities of the Division of Public and Behavioral Health or the professional line activities of the other divisions.
- (c) Shall administer any state program for persons with developmental disabilities established pursuant to the Developmental Disabilities Assistance and Bill of Rights Act of 2000, 42 U.S.C. §§ 15001 et seq.

- (d) Shall, after considering advice from agencies of local governments and nonprofit organizations which provide social services, adopt a master plan for the provision of human services in this State. The Director shall revise the plan biennially and deliver a copy of the plan to the Governor and the Legislature at the beginning of each regular session. The plan must:
- (1) Identify and assess the plans and programs of the Department for the provision of human services, and any duplication of those services by federal, state and local agencies;
 - (2) Set forth priorities for the provision of those services;
- (3) Provide for communication and the coordination of those services among nonprofit organizations, agencies of local government, the State and the Federal Government;
- (4) Identify the sources of funding for services provided by the Department and the allocation of that funding;
- (5) Set forth sufficient information to assist the Department in providing those services and in the planning and budgeting for the future provision of those services; and
- (6) Contain any other information necessary for the Department to communicate effectively with the Federal Government concerning demographic trends, formulas for the distribution of federal money and any need for the modification of programs administered by the Department.
- (e) May, by regulation, require nonprofit organizations and state and local governmental agencies to provide information regarding the programs of those organizations and agencies, excluding detailed information relating to their budgets and payrolls, which the Director deems necessary for the performance of the duties imposed upon him or her pursuant to this section.
 - (f) Has such other powers and duties as are provided by law.
- 2. Notwithstanding any other provision of law, the Director, or the Director's designee, is responsible for appointing and removing subordinate officers and employees of the Department.
- Sec. 9. Chapter 422 of NRS is hereby amended by adding thereto the provisions set forth as sections 9.4 and 9.8 of this act.
- Sec. 9.4. 1. To the extent that federal financial participation is available, the Director shall include under Medicaid coverage for:
 - (a) The filling of cavities;
- (b) The fabrication, preparation and placement of temporary and permanent crowns; and
 - (c) Removable dentures to improve chewing, phonetics and aesthetics.
 - 2. The Department shall:
- (a) Apply to the Secretary of Health and Human Services for any waiver of federal law or apply for any amendment of the State Plan for Medicaid that is necessary for the Department to receive federal funding to provide the coverage described in subsection 1.

- (b) Fully cooperate in good faith with the Federal Government during the application process to satisfy the requirements of the Federal Government for obtaining a waiver or amendment pursuant to paragraph (a).
- Sec. 9.8. 1. To the extent that federal financial participation is available, the Director shall include under Medicaid coverage for polycarbonate lenses. Medicaid must not require, as a condition precedent to such coverage:
- (a) A provider of health care to provide documentation concerning the reasons for using a polycarbonate lens instead of another type of lens; or
 - (b) The recipient of Medicaid to try another type of lens.
 - 2. The Department shall:
- (a) Apply to the Secretary of Health and Human Services for any waiver of federal law or apply for any amendment of the State Plan for Medicaid that is necessary for the Department to receive federal funding to provide the coverage described in subsection 1.
- (b) Fully cooperate in good faith with the Federal Government during the application process to satisfy the requirements of the Federal Government for obtaining a waiver or amendment pursuant to paragraph (a).
 - Sec. 10. NRS 654.190 is hereby amended to read as follows:
- 654.190 1. The Board may, after notice and an opportunity for a hearing as required by law, impose an administrative fine of not more than \$10,000 for each violation on, recover reasonable investigative fees and costs incurred from, suspend, revoke, deny the issuance or renewal of or place conditions on the license of, and place on probation or impose any combination of the foregoing on any licensee who:
- (a) Is convicted of a felony relating to the practice of administering a nursing facility or residential facility or of any offense involving moral turpitude.
 - (b) Has obtained his or her license by the use of fraud or deceit.
 - (c) Violates any of the provisions of this chapter.
- (d) Aids or abets any person in the violation of any of the provisions of NRS 449.029 to 449.2428, inclusive, *and section 1 of this act*, as those provisions pertain to a facility for skilled nursing, facility for intermediate care or residential facility for groups.
- (e) Violates any regulation of the Board prescribing additional standards of conduct for licensees, including, without limitation, a code of ethics.
- (f) Engages in conduct that violates the trust of a patient or resident or exploits the relationship between the licensee and the patient or resident for the financial or other gain of the licensee.
- 2. If a licensee requests a hearing pursuant to subsection 1, the Board shall give the licensee written notice of a hearing pursuant to NRS 233B.121 and 241.034. A licensee may waive, in writing, his or her right to attend the hearing.
- 3. The Board may compel the attendance of witnesses or the production of documents or objects by subpoena. The Board may adopt regulations that

set forth a procedure pursuant to which the Chair of the Board may issue subpoenas on behalf of the Board. Any person who is subpoenaed pursuant to this subsection may request the Board to modify the terms of the subpoena or grant additional time for compliance.

- 4. An order that imposes discipline and the findings of fact and conclusions of law supporting that order are public records.
- 5. The expiration of a license by operation of law or by order or decision of the Board or a court, or the voluntary surrender of a license, does not deprive the Board of jurisdiction to proceed with any investigation of, or action or disciplinary proceeding against, the licensee or to render a decision suspending or revoking the license.
 - Sec. 11. (Deleted by Amendment.)
- Sec. 11.5. 1. There is hereby appropriated from the State General Fund to the Division of Health Care Financing and Policy of the Department of Health and Human Services for the administrative and medical services costs of providing Medicaid coverage for certain dental services the following sums:
 - For the Fiscal Year 2023-2024\$1,165,121 For the Fiscal Year 2024-2025\$1,410,808
- 2. Expenditure of the following sums not appropriated from the State General Fund or the State Highway Fund is hereby authorized by Division of Health Care Financing and Policy of the Department of Health and Human Services for the same purpose as set forth in subsection 1:
 - For the Fiscal Year 2023-2024\$5,194,695 For the Fiscal Year 2024-2025\$5,867,076
- 3. Any balance of the sums appropriated by subsection 1 remaining at the end of the respective fiscal years must not be committed for expenditure after June 30 of the respective fiscal years by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 20, 2024, and September 19, 2025, respectively, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 20, 2024, and September 19, 2025, respectively.
 - Sec. 12. 1. This section becomes effective upon passage and approval.
 - 2. Section 11.5 of this act becomes effective on July 1, 2023.
- <u>3.</u> Sections 1 to 7, inclusive, 10 and 11 of this act become effective on October 1, 2023.
 - [3.] 4. Sections 8 to 9.8, inclusive, of this act become effective:
- (a) Upon passage and approval for the purpose of performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act: and
 - (b) On January 1, 2024, for all other purposes. Senator Dondero Loop moved the adoption of the amendment.

Remarks by Senator Dondero Loop.

Amendment No. 917 to Senate Bill No. 385 revises provisions relating to health care.

Amendment adopted.

Bill read third time.

Remarks by Senator Neal.

Senate Bill No. 385 revises issues related to health care.

Roll call on Senate Bill No. 385:

YEAS—20.

NAYS-None.

EXCUSED—Titus.

Senate Bill No. 385 having received a constitutional majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

Senate Bill No. 395.

Bill read third time.

The following amendment was proposed by the Committee on Finance:

Amendment No. 918.

SUMMARY—Revises provisions relating to real property. (BDR 10-288)

AN ACT relating to real property; limiting, with certain exceptions, the total aggregate number of units of residential real property in this State that may be purchased in any 1 calendar year by certain corporate investors; requiring the registration of certain corporate investors in residential property in this State with the Securities Division of the Office of the Secretary of State; requiring that certain deeds relating to residential real property include certain information about corporate investors; making an appropriation; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Section 1 of this bill provides, with certain exceptions, that: (1) the total aggregate number of units of residential real property in this State that may be purchased in any 1 calendar year by corporations. [and] limited-liability companies and any affiliates of such entities must not exceed 1,000 units; and (2) a corporation. [or] limited-liability company or affiliate of such an entity is prohibited from purchasing any unit of residential real property in this State if, as a result of the purchase, the total aggregate number of units of residential real property purchased in this State during the current calendar year by corporations. [and] limited-liability companies or any affiliates of such entities would exceed 1,000 units.

Section 1 also requires the creation and maintenance of a registry of corporations, [and] limited-liability companies and any affiliates of such entities that purchase or own residential real property in this State by the Securities Division of the Office of the Secretary of State. A corporation, [or] limited-liability company or any affiliate of such an entity is required to register with the Securities Division before purchasing any residential real

property in this State. Section 1: (1) authorizes the Secretary of State to charge a fee to each such corporation, [or] limited-liability company or any affiliate of such an entity; and (2) requires the Secretary of State to adopt regulations necessary to carry out the provisions of section 1. For the purposes of section 1, the term "corporation" does not include a family trust company or a housing authority.

Section 2 of this bill provides that if a corporation. [or] limited-liability company or any affiliate of such an entity purchases residential real property, the deed must: (1) be accompanied by a copy of the certificate of registration issued by the Secretary of State; and (2) clearly set forth that the residential real property is not the primary residence of the owner. Section 2 also prohibits the county recorder from recording the deed unless the deed: (1) contains information about the ownership of the corporation. [or] limited-liability company [+] or any affiliate of such an entity, as set forth in the registry created pursuant to section 1; and (2) clearly sets forth that the residential real property is not the primary residence of the owner.

Section 3 of this bill makes an appropriation to the Office of the Secretary of State for personnel, travel, operating, equipment, information services and contractor costs to carry out the provisions of section 1.

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

Section 1. Chapter 111 of NRS is hereby amended by adding thereto a new section to read as follows:

- 1. Except as otherwise provided in subsection 2:
- (a) The total aggregate number of units of residential real property in this State that may be purchased in any 1 calendar year by corporations, fandlimited-liability companies and affiliates of such entities must not exceed 1,000 units.
- (b) A corporation_, [or] limited-liability company <u>or affiliate of such an entity</u> shall not purchase any unit of residential real property in this State if, as a result of the purchase, the total aggregate number of units of residential real property purchased in this State during the current calendar year by corporations_, [or] limited-liability companies <u>or affiliates of such entities</u> would exceed 1,000 units.
 - 2. The provisions of subsection 1 do not apply to:
 - (a) The intracorporate sale or transfer of units of residential property; or
 - (b) The sale of newly constructed units of residential property.
- 3. The Securities Division of the Office of the Secretary of State shall create and maintain a registry of corporations, [and] limited-liability companies and affiliates of such entities that purchase or own residential real property in this State. The Securities Division shall make such registry available on the Internet website of the Office of the Secretary of State.
- 4. A corporation, [or] limited-liability company <u>or affiliate of such an entity</u> must register with the Securities Division of the Office of the Secretary of State before purchasing any unit of residential real property in this State.

- 5. The Secretary of State shall issue a certificate of registration to each corporation, [or] limited liability company or affiliate of such an entity that registers pursuant to this section.
- 6. The Secretary of State may charge a fee to each corporation, [or] limited-liability company <u>or affiliate of such an entity</u> that registers with the Securities Division pursuant to subsection 4.
- 7. The Secretary of State shall adopt any regulations necessary to carry out the provisions of this section.
 - 8. As used in this section, the term:
 - (a) "Corporation" does not include:
 - (1) A family trust company, as defined in NRS 669.042.
 - (2) A housing authority, as defined in NRS 315.021.
- (b) "Limited-liability company" has the meaning ascribed to it in NRS 86.061.
 - Sec. 2. NRS 111.312 is hereby amended to read as follows:
- 111.312 1. The county recorder shall not record with respect to real property, a notice of completion, a declaration of homestead, a declaration of removal of discriminatory restriction, a lien or notice of lien, an affidavit of death, a mortgage or deed of trust, any conveyance of real property or instrument in writing setting forth an agreement to convey real property or a notice pursuant to NRS 111.3655 unless the document being recorded contains:
- (a) The mailing address of the grantee or, if there is no grantee, the mailing address of the person who is requesting the recording of the document; and
- (b) Except as otherwise provided in subsection 2, the assessor's parcel number of the property at the top left corner of the first page of the document, if the county assessor has assigned a parcel number to the property. The parcel number must comply with the current system for numbering parcels used by the county assessor's office. The county recorder is not required to verify that the assessor's parcel number is correct.
- 2. Any document relating exclusively to the transfer of water rights may be recorded without containing the assessor's parcel number of the property.
- 3. The county recorder shall not record with respect to real property any deed, including, without limitation:
 - (a) A grant, bargain and sale deed;
 - (b) Quitclaim deed;
 - (c) Warranty deed; or
 - (d) Trustee's deed upon sale,
- → unless the document being recorded contains the name and address of the person to whom a statement of the taxes assessed on the real property is to be mailed.
- 4. The assessor's parcel number shall not be deemed to be a complete legal description of the real property conveyed.

- 5. Except as otherwise provided in subsection 6, if a document that is being recorded includes a legal description of real property that is provided in metes and bounds, the document must include the name and mailing address of the person who prepared the legal description. The county recorder is not required to verify the accuracy of the name and mailing address of such a person.
- 6. If a document including the same legal description described in subsection 5 previously has been recorded, the document must include all information necessary to identify and locate the previous recording, but the name and mailing address of the person who prepared the legal description is not required for the document to be recorded. The county recorder is not required to verify the accuracy of the information concerning the previous recording.
- 7. If a corporation, [or] limited-liability company <u>or affiliate of such an entity</u> purchases residential real property:
 - (a) The county recorder shall not record the deed unless:
- (1) The deed contains the information about the ownership of the corporation, [or] limited-liability company or affiliate of such an entity set forth in the registry created pursuant to section 1 of this act; and
- (2) The corporation, for limited-liability company or affiliate of such an entity submits to the county recorder a copy of the certificate of registration issued by the Secretary of State pursuant to section 1 of this act and the name of the corporation, for limited-liability company or affiliate of such an entity on the deed matches the name on the certificate of registration accompanying the deed; and
- (b) The deed must clearly set forth that the residential real property is not the primary residence of the owner.
- 8. As used in this section, the terms "corporation" and "limited-liability company" have the meanings ascribed to them in section 1 of this act.
- Sec. 3. 1. There is hereby appropriated from the State General Fund to the Office of the Secretary of State for personnel, travel, operating, equipment, information services and contractor costs to carry out the provisions of section 1 of this act the following sums:

2. Any balance of the sums appropriated by subsection 1 remaining at the end of the respective fiscal years must not be committed for expenditure after June 30 of the respective fiscal years by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 20, 2024, and September 19, 2025, respectively, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 20, 2024, and September 19, 2025, respectively.

Sec. 4. 1. This section becomes effective upon passage and approval.

- 2. Section 3 of this act becomes effective on July 1, 2023.
- 3. Sections 1 and 2 of this act become effective on October 1, 2023.

Senator Dondero Loop moved the adoption of the amendment.

Remarks by Senator Dondero Loop.

Amendment No. 918 to Senate Bill No. 395, as amended, revises provisions relating to real property.

Amendment adopted.

Bill read third time.

Remarks by Senator Neal.

Senate Bill No. 395 has corporations register with the Secretary of State's Securities Division and limits the total of aggregate purchases that can be done in the State of Nevada in order to free up housing for regular citizens.

Roll call on Senate Bill No. 395:

YEAS—14.

NAYS—Buck, Goicoechea, Hammond, Krasner, Seevers Gansert, Stone—6.

ABSENT-Titus.

Senate Bill No. 395 having received a two-thirds majority, Mr. President declared it passed, as amended.

Bill ordered transmitted to the Assembly.

MESSAGES FROM THE ASSEMBLY

ASSEMBLY CHAMBER, Carson City, June 3, 2023

To the Honorable the Senate:

I have the honor to inform your honorable body that the Assembly on this day passed Assembly Bill No. 529.

Also, I have the honor to inform your honorable body that the Assembly on this day passed, as amended, Assembly Bill No. 525.

CAROL AIELLO-SALA

Assistant Chief Clerk of the Assembly

INTRODUCTION, FIRST READING AND REFERENCE

Assembly Bill No. 525.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

Assembly Bill No. 529.

Senator Lange moved that the bill be referred to the Committee on Finance.

Motion carried.

UNFINISHED BUSINESS

SIGNING OF BILLS AND RESOLUTIONS

There being no objections, the President and Secretary signed Senate Concurrent Resolution No. 5.

REMARKS FROM THE FLOOR

Senators Hansen and Cannizzaro requested that the following remarks be entered in the Journal.

SENATOR HANSEN:

I wanted to read into the record a list of all of the religious people that have come and given the prayers during our session: Father Jeff Paul of St. Peter's Episcopal Church, Carson City; Bishop Deborah Hutterer of the ELCA Grand Canyon Synod; Pastor Kurt Katzorke of Hilltop Community Church, Carson City; Reverend Jedidiah Maschke of Bethlehem Lutheran Church, Carson City; Pastor Bruce Henderson of Airport Road Church of Christ, Carson City; Pastor Ken Haskins of the First Christian Church of Carson City, Carson City, Rabbi Benjamin Zober of Temple Sinai, Reno; Pastor Nick Emery of Hope Crossing Community Church, Carson City; Director Karin Hockman of the Nevada House of Prayer, Carson City; Pastor Brian Lucas of Pax Christian Church, Gardnerville; Pastor Randy Roser of the Bridge Church, Carson City; Rajan Zed, President of the Universal Society of Hinduism; Pastor Peggy Locke of Fountainhead Foursquare Church, Carson City; Member Steep Weiss, First Church of Christ, Scientist, Carson City; Pastor Gavin Jarvis, Living Stones Church, Carson City; Pastor Chase Ward, Mountain Vista Baptist Church, Carson City: Chaplain Ron McMillin, Capitol Commission: Fred Drye of the Southern Paiute Tribe; Bishop Leo Thomas of the Diocese of Las Vegas, Las Vegas; Father Stephen Karcher of St. Anthony Greek Orthodox Church, Reno; and Tribal Elder Lauurie Caskey of the Shoshone Paiute Tribe.

The reason I wanted to do this is so often during session, we are supposed to start at 11:00 a.m., we almost never did, and I see these religious people standing in the halls for sometimes hours waiting patiently to give prayer. We rarely have an opportunity to thank them for what they did after they say their prayers because they leave so early. These are the people who do so much in our communities to help the downtrodden and the people that are struggling in life and remind all of us that no matter what condition you are in in life, you are still a child of God, and you have merit and worth in his eyes. They come in here, give us a little pep talk and remind us there really is a higher power than sometimes the negative feelings we feel during the session. We should reach out now and give these people a great thank you for the services they provided to us and all the great things they do in our communities across Nevada. I ask our Senators in this room to join with me and give the religious folks a nice, big round of warm applause.

SENATOR CANNIZZARO:

As some of you may know—my colleague on our prior agenda from Senate District 14 had mentioned—we have had the pleasure of having Rajan Zed join us from the Universal Society of Hinduism to deliver the invocation. He has done so in several sessions. We, of course, always enjoy having him here with us.

Some of you may also know that in March of 2022, his family suffered a tragedy with the loss of his wife, Mrs. Shipa Zed. We want to take a moment to acknowledge her and his family's loss since he has come here to help us get centered and pray a little. We wanted to extend our condolences to his family. His wife was an enthusiastic volunteer for various community welfare causes, frequently fed the poor and the homeless and was the matriarch of the Zed family. During her lifetime, she visited 57 countries spreading goodwill, including every continent except Antarctica, which is amazing.

I think her family will remember that selflessness was the goal of her life, and in all her undertakings, she always kept the welfare of others in mind. Please all join me in extending our sincere sympathy and condolences to the entire family as they remember her and miss her amongst their lives. We are extending our condolences to all of them.

Senator Cannizzaro moved that the Senate adjourn until Sunday, June 4, 2023, at 11:00 a.m.

Motion carried.

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Senate adjourned at 12:04 a.m.

Approved:

STAVROS ANTHONY
President of the Senate

Attest: Brendan Bucy
Secretary of the Senate