

Senate Bill No. 189—Senators Lange; Cannizzaro,
Cruz-Crawford, Daly, Flores, Neal, Ohrenschall, Pazina,
Scheible and Taylor

CHAPTER.....

AN ACT relating to genetic counseling; prescribing certain duties and authority of a genetic counselor; providing for the regulation of the practice of genetic counseling by the Board of Medical Examiners; requiring the appointment of the Genetic Counseling Advisory Council; prescribing the requirements for the issuance and renewal of a license as a genetic counselor; authorizing the Board to take certain actions to investigate and impose discipline against a genetic counselor; prohibiting the unlicensed practice of genetic counseling except in certain circumstances; establishing a privilege for certain confidential communications; providing penalties; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

Existing law provides for the licensure and regulation of physicians, physician assistants, anesthesiologist assistants, perfusionists and practitioners of respiratory care by the Board of Medical Examiners. (Chapter 630 of NRS) This bill additionally provides for the licensure and regulation of genetic counselors by the Board. **Sections 4-5.6** of this bill define certain terms, and **section 14** of this bill establishes the applicability of those definitions. **Section 40** of this bill makes it a felony for a person to practice genetic counseling or hold himself or herself out as a genetic counselor without a license. **Section 7** of this bill prescribes the requirements to obtain such a license, including obtaining certain education, passing certain examinations and obtaining certification from the American Board of Genetic Counseling. **Section 8** of this bill authorizes the Board to issue a temporary license under which a person who has obtained the required education but has not yet passed the required examination or obtained the required certification may engage in the supervised practice of genetic counseling. **Section 6** of this bill requires the Board to adopt certain other regulations regarding the licensure and practice of genetic counselors. **Section 9** of this bill authorizes certain unlicensed persons to provide assistance or consulting services related to genetic counseling, and **section 16** of this bill exempts a genetic counselor of the Federal Government and permitted practitioners of other healing arts who are authorized to provide genetic counseling from licensure and regulation by the Board. **Section 9** also authorizes a physician or a physician assistant to engage in genetic counseling as part of his or her practice without obtaining a license as a genetic counselor. **Section 10** of this bill prescribes the date on which a license as a genetic counselor expires and the requirements to renew such a license. **Section 23** of this bill prescribes the maximum fees that the Board may charge for the issuance or renewal of a license or a temporary license as a genetic counselor. **Section 11** of this bill prescribes the procedure for the voluntary surrender of such a license.

Section 12 of this bill prescribes the grounds for disciplinary action against a genetic counselor. **Sections 24, 25 and 27** of this bill apply to genetic counselors the existing process for the filing of a complaint with the Board concerning a



licensee or notifying the Board of certain actions taken against a licensee. **Sections 26, 28-33, 36 and 38** of this bill apply to genetic counselors: (1) existing procedures for the investigation of complaints and the imposition of disciplinary action against licensees; and (2) certain other existing procedures to address incompetence or misconduct by a licensee. **Section 34** of this bill applies to genetic counselors the existing procedure to remove limitations that the Board has placed on a license or to restore a revoked license. **Sections 36, 37, 39 and 40** of this bill authorize or require the Board to take certain actions against a person who is practicing genetic counseling or holding himself or herself out as a genetic counselor without a license.

Sections 13, 15 and 19-21 of this bill make various conforming changes so that genetic counselors are treated similarly to other providers of health care licensed by the Board for certain purposes related to licensure and regulation. **Section 17** of this bill deems any act that constitutes the practice of genetic counseling to occur where the patient is located at the time the act is performed. **Section 5.9** of this bill requires the Board to appoint the Genetic Counseling Advisory Council to advise the Board concerning the regulation of genetic counseling until January 1, 2031. After that date, **section 18** of this bill authorizes the Board to select genetic counselors to serve as advisory members of the Board. **Sections 22 and 35** of this bill subject genetic counselors to certain provisions required by federal law for the enforcement of child support obligations. (42 U.S.C. § 666)

Existing law defines the term "provider of health care" to mean a person who practices any of certain professions related to the provision of health care. (NRS 629.031) Existing law imposes certain requirements upon providers of health care, including requirements for billing, standards for advertisements and criminal penalties for acquiring certain debts. (NRS 629.071, 629.076, 629.078) **Section 1** of this bill includes genetic counselors in the definition of "provider of health care," thereby subjecting genetic counselors to those same requirements. **Section 42** of this bill requires a genetic counselor to report misconduct by a person licensed or certified by the State Board of Nursing to the Executive Director of that Board.

Existing law establishes a privilege for confidential communications between a patient and a physician, dentist or chiropractor or person participating in the diagnosis or treatment of the patient under the direction of such a provider. (NRS 49.215-49.245) **Section 48** of this bill extends that same privilege to apply to confidential communications between a patient and a genetic counselor or a person under the direction of a genetic counselor.

Existing law provides that: (1) assault is generally a misdemeanor, with certain exceptions; and (2) assault upon a provider of health care is a gross misdemeanor or felony, depending on the circumstances. (NRS 200.471) **Section 51** of this bill includes a genetic counselor within the definition of "provider of health care" for that purpose, thereby making assault upon a genetic counselor a gross misdemeanor or felony, depending on the circumstances. **Section 52** of this bill requires a genetic counselor to report the abuse, neglect, exploitation, isolation or abandonment of an older person or vulnerable person or the abuse or neglect of a child in the same manner as other providers of health care. A genetic counselor would also be required to report the abuse, neglect or commercial sexual exploitation of a child. (NRS 432B.220, 432C.110) **Sections 41, 43 and 44** of this bill provide that a genetic counselor acting within his or her scope of practice is not violating provisions governing certain other providers of health care. **Sections 2, 45-47, 49, 50 and 53-59** of this bill make revisions to treat genetic counselors in the same manner as other similar providers of health care in other certain respects.



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

Section 1. NRS 629.031 is hereby amended to read as follows:
629.031 Except as otherwise provided by a specific statute:

1. “Provider of health care” means:

(a) A physician licensed pursuant to chapter 630, 630A or 633
of NRS;

(b) A physician assistant;

(c) An anesthesiologist assistant;

(d) ***A genetic counselor***;

(e) A dentist;

~~[(e)]~~ (f) A dental therapist;

~~[(f)]~~ (g) A dental hygienist;

~~[(g)]~~ (h) A licensed nurse;

~~[(h)]~~ (i) A person who holds a license as an attendant or who is certified as an emergency medical technician, advanced emergency medical technician or paramedic pursuant to chapter 450B of NRS or authorized to practice as an emergency medical technician, advanced emergency medical technician or paramedic in this State under the Recognition of Emergency Medical Services Personnel Licensure Interstate Compact ratified by NRS 450B.145;

~~[(i)]~~ (j) A dispensing optician;

~~[(j)]~~ (k) An optometrist;

~~[(k)]~~ (l) A speech-language pathologist;

~~[(l)]~~ (m) An audiologist;

~~[(m)]~~ (n) A practitioner of respiratory care;

~~[(n)]~~ (o) A licensed physical therapist;

~~[(o)]~~ (p) An occupational therapist;

~~[(p)]~~ (q) A podiatric physician;

~~[(q)]~~ (r) A licensed psychologist;

~~[(r)]~~ (s) A licensed marriage and family therapist;

~~[(s)]~~ (t) A licensed clinical professional counselor;

~~[(t)]~~ (u) A music therapist;

~~[(u)]~~ (v) A chiropractic physician;

~~[(v)]~~ (w) An athletic trainer;

~~[(w)]~~ (x) A perfusionist;

~~[(x)]~~ (y) A doctor of Oriental medicine in any form;

~~[(y)]~~ (z) A medical laboratory director or technician;

~~[(z)]~~ (aa) A pharmacist;

~~[(aa)]~~ (bb) A licensed dietitian;



~~[(bb)]~~ (cc) An associate in social work, a social worker, a master social worker, an independent social worker or a clinical social worker licensed pursuant to chapter 641B of NRS;

~~[(ee)]~~ (dd) An alcohol and drug counselor or a problem gambling counselor who is certified pursuant to chapter 641C of NRS;

~~[(dd)]~~ (ee) An alcohol and drug counselor or a clinical alcohol and drug counselor who is licensed pursuant to chapter 641C of NRS;

~~[(ee)]~~ (ff) A behavior analyst, assistant behavior analyst or registered behavior technician;

~~[(ff)]~~ (gg) A naprapath; or

~~[(gg)]~~ (hh) A medical facility as the employer of any person specified in this subsection.

2. For the purposes of NRS 629.400 to 629.490, inclusive, the term includes a person who holds a current license or certificate to practice his or her respective discipline pursuant to the applicable provisions of law of another state or territory of the United States.

Sec. 2. NRS 629.580 is hereby amended to read as follows:

629.580 1. A person who provides wellness services in accordance with this section, but who is not licensed, certified or registered in this State as a provider of health care, is not in violation of any law based on the unlicensed practice of health care services or a health care profession unless the person:

(a) Performs surgery or any other procedure which punctures the skin of any person;

(b) Sets a fracture of any bone of any person;

(c) Prescribes or administers X-ray radiation to any person;

(d) Prescribes or administers a prescription drug or device or a controlled substance to any person;

(e) Recommends to a client that he or she discontinue or in any manner alter current medical treatment prescribed by a provider of health care licensed, certified or registered in this State;

(f) Makes a diagnosis of a medical disease of any person;

(g) Performs a manipulation or a chiropractic adjustment of the articulations of joints or the spine of any person;

(h) Treats a person's health condition in a manner that intentionally or recklessly causes that person recognizable and imminent risk of serious or permanent physical or mental harm;

(i) Holds out, states, indicates, advertises or implies to any person that he or she is a provider of health care;

(j) Engages in the practice of medicine *or genetic counseling* in violation of chapter 630 or 633 of NRS, the practice of homeopathic



medicine in violation of chapter 630A of NRS, the practice of naprapathy in violation of chapter 634B of NRS or the practice of podiatry in violation of chapter 635 of NRS, unless otherwise expressly authorized by this section;

(k) Performs massage therapy as that term is defined in NRS 640C.060, reflexology as that term is defined in NRS 640C.080 or structural integration as that term is defined in NRS 640C.085;

(l) Provides mental health services that are exclusive to the scope of practice of a psychiatrist licensed pursuant to chapter 630 or 633 of NRS, or a psychologist licensed pursuant to chapter 641 of NRS; or

(m) Engages in the practice of applied behavior analysis in violation of chapter 641D of NRS.

2. Any person providing wellness services in this State who is not licensed, certified or registered in this State as a provider of health care and who is advertising or charging a fee for wellness services shall, before providing those services, disclose to each client in a plainly worded written statement:

(a) The person's name, business address and telephone number;

(b) The fact that he or she is not licensed, certified or registered as a provider of health care in this State;

(c) The nature of the wellness services to be provided;

(d) The degrees, training, experience, credentials and other qualifications of the person regarding the wellness services to be provided; and

(e) A statement in substantially the following form:

It is recommended that before beginning any wellness plan, you notify your primary care physician or other licensed providers of health care of your intention to use wellness services, the nature of the wellness services to be provided and any wellness plan that may be utilized. It is also recommended that you ask your primary care physician or other licensed providers of health care about any potential drug interactions, side effects, risks or conflicts between any medications or treatments prescribed by your primary care physician or other licensed providers of health care and the wellness services you intend to receive.

→ A person who provides wellness services shall obtain from each client a signed copy of the statement required by this subsection, provide the client with a copy of the signed statement at the time of



service and retain a copy of the signed statement for a period of not less than 5 years.

3. A written copy of the statement required by subsection 2 must be posted in a prominent place in the treatment location of the person providing wellness services in at least 12-point font. Reasonable accommodations must be made for clients who:

- (a) Are unable to read;
- (b) Are blind or visually impaired;
- (c) Have communication impairments; or
- (d) Do not read or speak English or any other language in which the statement is written.

4. Any advertisement for wellness services authorized pursuant to this section must disclose that the provider of those services is not licensed, certified or registered as a provider of health care in this State.

5. A person who violates any provision of this section is guilty of a misdemeanor. Before a criminal proceeding is commenced against a person for a violation of a provision of this section, a notification, educational or mediative approach must be utilized by the regulatory body enforcing the provisions of this section to bring the person into compliance with such provisions.

6. This section does not apply to or control:

(a) Any health care practice by a provider of health care pursuant to the professional practice laws of this State, or prevent such a health care practice from being performed.

(b) Any health care practice if the practice is exempt from the professional practice laws of this State, or prevent such a health care practice from being performed.

(c) A person who provides health care services if the person is exempt from the professional practice laws of this State, or prevent the person from performing such a health care service.

(d) A medical assistant, as that term is defined in NRS 630.0129 and 633.075, an advanced practitioner of homeopathy, as that term is defined in NRS 630A.015, or a homeopathic assistant, as that term is defined in NRS 630A.035.

7. As used in this section, “wellness services” means healing arts therapies and practices, and the provision of products, that are based on the following complementary health treatment approaches and which are not otherwise prohibited by subsection 1:

- (a) Anthroposophy.
- (b) Aromatherapy.
- (c) Traditional cultural healing practices.
- (d) Detoxification practices and therapies.



- (e) Energetic healing.
- (f) Folk practices.
- (g) Gerson therapy and colostrum therapy.
- (h) Healing practices using food, dietary supplements, nutrients and the physical forces of heat, cold, water and light.
- (i) Herbology and herbalism.
- (j) Reiki.
- (k) Mind-body healing practices.
- (l) Nondiagnostic iridology.
- (m) Noninvasive instrumentalities.
- (n) Holistic kinesiology.

Sec. 3. Chapter 630 of NRS is hereby amended by adding thereto the provisions set forth as sections 4 to 12, inclusive, of this act.

Sec. 4. 1. “Genetic counseling” means:

(a) Obtaining and evaluating the medical histories of patients and their families to determine the risk of medical or genetic conditions in the patient, his or her children and other family members;

(b) Discussing the features, natural history and means of diagnosing medical or genetic conditions, genetic and environmental factors that affect such conditions and ways to manage the risk related to such conditions;

(c) Identifying, ordering and coordinating genetic laboratory tests as appropriate to assess the genetics of a patient;

(d) Integrating the results of genetic laboratory tests and other diagnostic studies with the medical histories of patients and their families to assess and communicate the existence and severity of risk factors for medical or genetic conditions;

(e) Explaining the clinical implications and results of a genetic laboratory test;

(f) Evaluating the responses of a patient or the family of a patient to learning of a genetic or medical condition or the risk of such a condition occurring or recurring and providing patient-centered counseling and anticipatory guidance;

(g) Identifying and utilizing resources in the community that provide medical, educational, financial and psychosocial support and advocacy for persons who have or are at risk of having medical or genetic conditions; and

(h) Providing written documentation of medical and genetic information, and counseling relating to such information, for patients, families of patients and providers of health care.

2. The term does not include diagnosis or treatment.



Sec. 5. *“Genetic counselor” means a person who is licensed to engage in the practice of genetic counseling by the Board.*

Sec. 5.3. *“Genetic information” includes, without limitation, information concerning:*

- 1. A genetic test performed on a person;*
- 2. A genetic test performed on the family members of a person;*
- 3. A disease or condition that occurs or has occurred in the family members of a person; or*
- 4. Genetic counseling or genetic education services provided to a person.*

Sec. 5.6. *“Genetic test” means a test, including a laboratory test that uses deoxyribonucleic acid extracted from the cells of a person or a diagnostic test, to determine the presence of abnormalities or deficiencies, including carrier status, that:*

- 1. Are linked to physical or mental disorders or impairments; or*
- 2. Indicate a susceptibility to illness, disease, impairment or any other disorder, whether physical or mental.*

Sec. 5.9. 1. *The Genetic Counseling Advisory Council is hereby created.*

- 2. The Board shall appoint to the Advisory Council:
 - (a) One physician licensed in this State who has experience in the field of genetics;*
 - (b) Three members who hold a valid certification issued by the American Board of Genetic Counseling, or its successor organization, and are actively engaged in the practice of genetic counseling; and*
 - (c) One member who is a representative of the public.**
- 3. Each member of the Advisory Council must be a resident of this State.*
- 4. After the initial terms, the members of the Advisory Council must be appointed to terms of 2 years. Members may be reappointed.*
- 5. A vacancy on the Advisory Council must be filled in the same manner as the original appointment for the remainder of the unexpired term.*
- 6. The Board may remove a member of the Advisory Council for incompetence, neglect of duty, moral turpitude or malfeasance in office.*
- 7. The members of the Advisory Council are not entitled to compensation.*
- 8. The Advisory Council shall:*



(a) *Elect from its members a Chair and any other officers determined necessary by the members of the Advisory Council at the first meeting of each year;*

(b) *Meet at least two times each year at the call of the Chair of the Advisory Council; and*

(c) *Advise the Board on the adoption of regulations concerning the practice of genetic counseling and other matters related to the practice of genetic counseling.*

9. *A majority of the members of the Advisory Council constitutes a quorum for the transaction of the business of the Advisory Council.*

Sec. 6. *The Board shall adopt regulations regarding the licensure and practice of genetic counselors, including, without limitation, regulations:*

1. *Adopting by reference the Code of Ethics published by the National Society of Genetic Counselors, or its successor organization, as a code of ethics governing the professional conduct of genetic counselors;*

2. *Defining “temporary basis” for the purposes of subsection 3 of section 9 of this act; and*

3. *Establishing the requirements for the renewal of a license, in addition to those set forth in section 10 of this act.*

Sec. 7. *To be eligible for licensing by the Board as a genetic counselor, an applicant must:*

1. *Be a natural person of good moral character;*

2. *Submit a completed application as required by the Board by the date established by the Board;*

3. *Submit the fee prescribed by the Board pursuant to NRS 630.268;*

4. *Have received a master’s degree or higher in genetic counseling from a program in genetic counseling that is:*

(a) *Accredited by the Accreditation Council for Genetic Counseling, or its successor organization; or*

(b) *Located in a foreign country and has educational standards that are at least as stringent as those established by the Accreditation Council for Genetic Counseling, or its successor organization, as determined by the Board;*

5. *Pass the examination administered by the American Board of Genetic Counseling, or its successor organization, or the examination in clinical genetics and genomics administered by the American Board of Medical Genetics and Genomics, or its successor organization; and*



6. *Hold a valid certification issued by the American Board of Genetic Counseling, or its successor organization.*

Sec. 8. 1. *The Board may issue a temporary license to practice as a genetic counselor to a person who:*

(a) *Has satisfied all requirements for licensure except the requirements of subsections 5 and 6 of section 7 of this act; and*

(b) *Submits the fee prescribed by the Board pursuant to NRS 630.268.*

2. *Except as otherwise provided in subsections 3 and 4, a temporary license to practice as a genetic counselor issued pursuant to this section expires on the earlier of:*

(a) *The issuance to the temporarily licensed genetic counselor of a license as a genetic counselor pursuant to section 7 of this act;*

(b) *If the temporarily licensed genetic counselor passes an examination described in subsection 5 of section 7 of this act, 30 days after the results of the examination are issued by the administering organization; or*

(c) *One year after the date on which the temporarily licensed genetic counselor temporary license is issued pursuant to this section.*

3. *The Board may renew a temporary license issued pursuant to this section once for good cause, as determined by the Board, if the temporarily licensed genetic counselor:*

(a) *Maintains active status as a candidate with the American Board of Genetic Counseling, or its successor organization; and*

(b) *Submits the fee prescribed by the Board pursuant to NRS 630.268.*

4. *If the Board renews a temporary license pursuant to subsection 3, the Board shall prescribe the length of time for which the temporary license remains valid.*

5. *A temporarily licensed genetic counselor may practice genetic counseling only under the supervision of a genetic counselor or a physician. The supervisor shall assess the work of the temporarily licensed genetic counselor, but is not required to be present while the temporarily licensed genetic counselor is practicing genetic counseling.*

6. *Before commencing a supervisory relationship pursuant to subsection 5 and annually thereafter for the duration of the supervisory relationship, a supervisor and a temporarily licensed genetic counselor must enter into a contract that prescribes the responsibilities of the supervisor and the temporarily licensed genetic counselor.*



7. *The Board may adopt regulations establishing additional requirements for the supervision of a temporarily licensed genetic counselor pursuant to subsection 5.*

Sec. 9. 1. *A student who is enrolled in a program in genetic counseling described in subsection 4 of section 7 of this act and who does not hold a license to practice genetic counseling may assist a genetic counselor in the practice of genetic counseling if such assistance is within the scope of the education and training of the student.*

2. *Any other person who is not licensed to practice genetic counseling may assist a physician, osteopathic physician, physician assistant licensed pursuant to this chapter or chapter 633 of NRS, advanced practice registered nurse or genetic counselor in the practice of genetic counseling under the direct supervision of a physician, osteopathic physician, physician assistant, advanced practice registered nurse or genetic counselor who is on the same premises where the assistance is being provided.*

3. *A person who is not licensed to practice genetic counseling in this State, the District of Columbia or any state or territory of the United States but holds a valid certification issued by the American Board of Genetic Counseling, or its successor organization, may provide consulting services related to genetic counseling in this State on a temporary basis if he or she receives authorization from the Board.*

4. *A physician or physician assistant who engages in genetic counseling as part of his or her practice of medicine or practice as a physician assistant, as applicable, is not required to obtain a license as a genetic counselor.*

Sec. 10. 1. *Each license issued pursuant to section 7 of this act expires on June 30 or, if June 30 is a Saturday, Sunday or legal holiday, on the next business day after June 30, of every odd-numbered year and may be renewed if, before the license expires, the holder of the license submits to the Board:*

(a) *A completed application for renewal on a form prescribed by the Board;*

(b) *Proof that the applicant has successfully completed at least 20 hours of continuing education approved by the National Society of Genetic Counselors, or its successor organization, since the license was issued or most recently renewed, as applicable;*

(c) *Proof that the applicant holds a valid certification issued by the American Board of Genetic Counseling, or its successor organization;*



(d) Proof that the applicant has satisfied any other requirements prescribed by the regulations adopted by the Board pursuant to section 6 of this act; and

(e) The applicable fee for renewal of the license prescribed by the Board pursuant to NRS 630.268.

2. The Board shall send a notice of renewal to each licensee not later than 60 days before his or her license expires. The notice must include the amount of the fee for renewal of the license.

Sec. 11. *1. If a genetic counselor desires to surrender his or her license, the genetic counselor shall submit to the Board a sworn written statement of surrender of the license and the actual license issued to him or her. The Board may accept or reject the surrender of the license and may negotiate stipulations for accepting the surrender of the license.*

2. If the Board accepts the surrender of a license pursuant to subsection 1, the Board may restore the license at a later date under such conditions as the Board deems appropriate.

Sec. 12. *1. The following acts constitute grounds for initiating disciplinary action against a genetic counselor or denying licensure as a genetic counselor:*

(a) Obtaining, maintaining or renewing or attempting to obtain, maintain or renew a license to practice genetic counseling by bribery, fraud or misrepresentation or by any false, misleading, inaccurate or incomplete statement.

(b) Disobeying any order of the Board or an investigative committee of the Board.

(c) Conviction of:

(1) A crime relating to the practice of genetic counseling;

(2) A violation of any of the provisions of NRS 616D.200, 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive; or

(3) Any offense involving moral turpitude.

(d) Being adjudicated incompetent or incapacitated.

(e) Advertising the practice of genetic counseling in a false, deceptive or misleading manner.

(f) Advertising, practicing or attempting to practice genetic counseling under a name other than one's own.

(g) Practicing or assisting in the practice of genetic counseling while under the influence of alcohol, any controlled substance or any other substance which impairs the mental capacity of the genetic counselor.

(h) Violating the Code of Ethics adopted by reference pursuant to section 6 of this act.



(i) *Lack of ability to safely and skillfully practice genetic counseling due to a lack of knowledge or training or the inability to apply professional principles and skills.*

(j) *Violating or attempting to violate, or assisting or abetting the violation of, or conspiring to violate any provision of this chapter or the regulations adopted pursuant thereto.*

(k) *Any disciplinary action, including, without limitation, the revocation, suspension, modification or limitation of a license to practice genetic counseling, taken by another state, the Federal Government, a foreign country or any other jurisdiction or the surrender of the license or discontinuing the practice of genetic counseling while under investigation by any licensing authority, a medical facility, a branch of the Armed Forces of the United States, an insurance company, an agency of the Federal Government or an employer.*

(l) *Failure to be found competent to practice genetic counseling as a result of an examination to determine competency pursuant to NRS 630.318.*

(m) *Performing or supervising the performance of a pelvic examination in violation of NRS 629.085.*

(n) *Operation of a medical facility at any time during which:*

(1) *The license of the facility is suspended or revoked; or*

(2) *An act or omission occurs which results in the suspension or revocation of the license pursuant to NRS 449.160.*

↳ *This paragraph applies to an owner or other principal responsible for the operation of the facility.*

(o) *Any other grounds specified by regulation of the Board.*

2. *A genetic counselor shall notify the Board not later than 48 hours after the certification of the genetic counselor by the American Board of Genetic Counseling, or its successor organization, lapses or is revoked. Upon receipt of such notification, the Board shall immediately revoke the license of the genetic counselor.*

Sec. 13. NRS 630.003 is hereby amended to read as follows:

630.003 1. The Legislature finds and declares that:

(a) It is among the responsibilities of State Government to ensure, as far as possible, that only competent persons practice medicine, *genetic counseling*, perfusion and respiratory care within this State;

(b) For the protection and benefit of the public, the Legislature delegates to the Board of Medical Examiners the power and duty to determine the initial and continuing competence of physicians, *genetic counselors*, perfusionists, physician assistants,



anesthesiologist assistants and practitioners of respiratory care who are subject to the provisions of this chapter;

(c) The Board must exercise its regulatory power to ensure that the interests of the medical profession do not outweigh the interests of the public;

(d) The Board must ensure that unfit physicians, *genetic counselors*, perfusionists, physician assistants, anesthesiologist assistants and practitioners of respiratory care are removed from ~~the medical profession~~ *those professions* so that they will not cause harm to the public; and

(e) The Board must encourage and allow for public input into its regulatory activities to further improve the quality of medical practice within this State.

2. The powers conferred upon the Board by this chapter must be liberally construed to carry out these purposes for the protection and benefit of the public.

Sec. 14. NRS 630.005 is hereby amended to read as follows:

630.005 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 630.007 to 630.026, inclusive, *and sections 4 to 5.6, inclusive, of this act* have the meanings ascribed to them in those sections.

Sec. 15. NRS 630.045 is hereby amended to read as follows:

630.045 1. The purpose of licensing physicians, *genetic counselors*, perfusionists, physician assistants, anesthesiologist assistants and practitioners of respiratory care is to protect the public health and safety and the general welfare of the people of this State.

2. Any license issued pursuant to this chapter is a revocable privilege.

Sec. 16. NRS 630.047 is hereby amended to read as follows:

630.047 1. This chapter does not apply to:

(a) A medical officer ~~or~~, *genetic counselor*, perfusionist or practitioner of respiratory care of the Armed Forces or a medical officer ~~or~~, *genetic counselor*, perfusionist or practitioner of respiratory care of any division or department of the United States in the discharge of his or her official duties, including, without limitation, providing medical care in a hospital in accordance with an agreement entered into pursuant to NRS 449.2455;

(b) Physicians who are called into this State, other than on a regular basis, for consultation with or assistance to a physician licensed in this State, and who are legally qualified to practice in the state where they reside;

(c) Physicians who are legally qualified to practice in the state where they reside and come into this State on an irregular basis to:



(1) Obtain medical training approved by the Board from a physician who is licensed in this State; or

(2) Provide medical instruction or training approved by the Board to physicians licensed in this State;

(d) Physicians who are temporarily exempt from licensure pursuant to NRS 630.2665 and are practicing medicine within the scope of the exemption;

(e) Any person permitted to practice any other healing art under this title who does so within the scope of that authority, or healing by faith or Christian Science;

(f) The practice of respiratory care by a student as part of a program of study in respiratory care that is approved by the Board, or is recognized by a national organization which is approved by the Board to review such programs, if the student is enrolled in the program and provides respiratory care only under the supervision of a practitioner of respiratory care;

(g) The practice of respiratory care by a student who:

(1) Is enrolled in a clinical program of study in respiratory care which has been approved by the Board;

(2) Is employed by a medical facility, as defined in NRS 449.0151; and

(3) Provides respiratory care to patients who are not in a critical medical condition or, in an emergency, to patients who are in a critical medical condition and a practitioner of respiratory care is not immediately available to provide that care and the student is directed by a physician to provide respiratory care under the supervision of the physician until a practitioner of respiratory care is available;

(h) The practice of respiratory care by a person on himself or herself or gratuitous respiratory care provided to a friend or a member of a person's family if the provider of the care does not represent himself or herself as a practitioner of respiratory care;

(i) A person who is employed by a physician and provides respiratory care or services as a perfusionist under the supervision of that physician;

(j) The maintenance of medical equipment for perfusion or respiratory care that is not attached to a patient;

(k) A person who installs medical equipment for respiratory care that is used in the home and gives instructions regarding the use of that equipment if the person is trained to provide such services and is supervised by a provider of health care who is acting within the authorized scope of his or her practice;



(l) The performance of medical services by a student enrolled in an educational program for a physician assistant which is accredited by the Accreditation Review Commission on Education for the Physician Assistant, Inc., or its successor organization, as part of such a program; ~~and~~

(m) A physician assistant of any division or department of the United States in the discharge of his or her official duties unless licensure by a state is required by the division or department of the United States ~~is~~; and

(n) Any person permitted to practice any other healing art under this title who engages in the practice of genetic counseling within the scope of that authority, if he or she does not represent himself or herself to be licensed pursuant to this chapter.

2. This chapter does not repeal or affect any statute of Nevada regulating or affecting any other healing art.

3. This chapter does not prohibit:

(a) Gratuitous services outside of a medical school or medical facility by a person who is not a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care in cases of emergency.

(b) The domestic administration of family remedies.

Sec. 17. NRS 630.049 is hereby amended to read as follows:

630.049 For the purposes of this chapter, any act that constitutes the practice of medicine *or genetic counseling* shall be deemed to occur at the place where the patient is located at the time the act is performed.

Sec. 18. NRS 630.075 is hereby amended to read as follows:

630.075 **1.** The Board may, by majority vote, select physicians, anesthesiologist assistants, *genetic counselors* and members of the public, who must meet the same qualifications as required for members of the Board, to serve as advisory members of the Board.

2. One or more advisory members may be designated by the Board to assist a committee of its members in an investigation as provided in NRS 630.311 but may not vote on any matter before the committee. Advisory members may also serve as members of the panel selected to hear charges as provided in NRS 630.339 and may vote on any recommendation made by the panel to the Board.

Sec. 19. NRS 630.120 is hereby amended to read as follows:

630.120 **1.** The Board shall procure a seal.

2. All licenses issued to physicians, *genetic counselors*, perfusionists, physician assistants, anesthesiologist assistants and



practitioners of respiratory care must bear the seal of the Board and the signatures of its President and Secretary-Treasurer.

Sec. 20. NRS 630.137 is hereby amended to read as follows:

630.137 1. Notwithstanding any other provision of law and except as otherwise provided in this section, the Board shall not adopt any regulations that prohibit or have the effect of prohibiting a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care from collaborating or consulting with another provider of health care.

2. The provisions of this section do not prevent the Board from adopting regulations that prohibit a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care from aiding or abetting another person in the unlicensed practice of medicine or the unlicensed practice of *genetic counseling*, perfusion or respiratory care.

3. As used in this section, “provider of health care” has the meaning ascribed to it in NRS 629.031.

Sec. 21. NRS 630.167 is hereby amended to read as follows:

630.167 1. In addition to any other requirements set forth in this chapter, each applicant for a license to practice medicine, including, without limitation, an expedited license pursuant to NRS 630.1606 or 630.1607 or chapter 629A of NRS, and each applicant for a license *to practice as a genetic counselor*, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice respiratory care shall submit to the Board a complete set of fingerprints and written permission authorizing the Board to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report. Any fees or costs charged by the Board for this service pursuant to NRS 630.268 are not refundable.

2. Any communication between the Board and the Interstate Medical Licensure Compact Commission created by NRS 629A.100 relating to verification of a physician’s eligibility for expedited licensure pursuant to that section must not include any information received in a report from the Federal Bureau of Investigation relating to a state and federal criminal records check performed for the purposes of an application for an expedited license issued pursuant to NRS 629A.100.

Sec. 22. NRS 630.197 is hereby amended to read as follows:

630.197 1. In addition to any other requirements set forth in this chapter:



(a) An applicant for the issuance of a license to practice medicine, *to practice as a genetic counselor*, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice as a practitioner of respiratory care shall include the social security number of the applicant in the application submitted to the Board.

(b) An applicant for the issuance or renewal of a license to practice medicine, *to practice as a genetic counselor*, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice as a practitioner of respiratory care shall submit to the Board the statement prescribed by the Division of Welfare and Supportive Services of the Department of Health and Human Services pursuant to NRS 425.520. The statement must be completed and signed by the applicant.

2. The Board shall include the statement required pursuant to subsection 1 in:

(a) The application or any other forms that must be submitted for the issuance or renewal of the license; or

(b) A separate form prescribed by the Board.

3. A license to practice medicine, *to practice as a genetic counselor*, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice as a practitioner of respiratory care may not be issued or renewed by the Board if the applicant:

(a) Fails to submit the statement required pursuant to subsection 1; or

(b) Indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

4. If an applicant indicates on the statement submitted pursuant to subsection 1 that the applicant is subject to a court order for the support of a child and is not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order, the Board shall advise the applicant to contact the district attorney or other public agency enforcing the order to determine the actions that the applicant may take to satisfy the arrearage.

Sec. 23. NRS 630.268 is hereby amended to read as follows:

630.268 1. The Board shall charge and collect not more than the following fees:



For application for and issuance of a license to practice as a physician, including a license by endorsement	\$600
For application for and issuance of a temporary, locum tenens, limited, restricted, authorized facility, special, special purpose or special event license	400
For renewal of a limited, restricted, authorized facility or special license	400
For application for and issuance of a license as a physician assistant, including a license by endorsement	400
For application for and issuance of a simultaneous license as a physician assistant.....	200
For biennial registration of a physician assistant.....	800
For biennial simultaneous registration of a physician assistant.....	400
For biennial registration of a physician	800
For application for and issuance of a license as a perfusionist or practitioner of respiratory care	400
For biennial renewal of a license as a perfusionist.....	600
For application for and issuance of a license or temporary license to practice as an anesthesiologist assistant.....	400
For application for and initial issuance of a simultaneous license as an anesthesiologist assistant	200
For biennial registration of an anesthesiologist assistant	800
For biennial simultaneous registration of an anesthesiologist assistant.....	400
For biennial registration of a practitioner of respiratory care.....	600
For biennial registration for a physician who is on inactive status	400
<i>For application for and issuance of a license or temporary license to practice as a genetic counselor.....</i>	<i>400</i>
<i>For biennial renewal of a license to practice as a genetic counselor or renewal of a temporary license to practice as a genetic counselor.....</i>	<i>600</i>



For written verification of licensure	50
For a duplicate identification card	25
For a duplicate license	50
For computer printouts or labels.....	500
For verification of a listing of physicians, per hour	20
For furnishing a list of new physicians.....	100

2. Except as otherwise provided in subsections 4 and 5, in addition to the fees prescribed in subsection 1, the Board shall charge and collect necessary and reasonable fees for the expedited processing of a request or for any other incidental service the Board provides.

3. The cost of any special meeting called at the request of a licensee, an institution, an organization, a state agency or an applicant for licensure must be paid for by the person or entity requesting the special meeting. Such a special meeting must not be called until the person or entity requesting it has paid a cash deposit with the Board sufficient to defray all expenses of the meeting.

4. If an applicant submits an application for a license by endorsement pursuant to:

(a) NRS 630.1607, and the applicant is an active member of, or the spouse of an active member of, the Armed Forces of the United States, a veteran or the surviving spouse of a veteran, the Board shall collect not more than one-half of the fee set forth in subsection 1 for the initial issuance of the license. As used in this paragraph, “veteran” has the meaning ascribed to it in NRS 417.005.

(b) NRS 630.2752, the Board shall collect not more than one-half of the fee set forth in subsection 1 for the initial issuance of the license.

5. If an applicant submits an application for a license by endorsement pursuant to NRS 630.1606 or 630.2751, as applicable, the Board shall charge and collect not more than the fee specified in subsection 1 for the application for and initial issuance of a license.

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

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

(a) Any action for malpractice against the physician, physician assistant, *genetic counselor*, practitioner of respiratory care or perfusionist not later than 45 days after the physician, physician assistant, *genetic counselor*, practitioner of respiratory care or



perfusionist receives service of a summons and complaint for the action;

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

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

2. The Board shall report any failure to comply with subsection 1 by an insurer licensed in this State to the Division of Insurance of the Department of Business and Industry. If, after a hearing, the Division of Insurance determines that any such insurer failed to comply with the requirements of subsection 1, the Division may impose an administrative fine of not more than \$10,000 against the insurer for each such failure to report. If the administrative fine is not paid when due, the fine must be recovered in a civil action brought by the Attorney General on behalf of the Division.

Sec. 25. NRS 630.3068 is hereby amended to read as follows:

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

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

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

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

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



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

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

Sec. 26. NRS 630.3069 is hereby amended to read as follows:

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

Sec. 27. NRS 630.307 is hereby amended to read as follows:

630.307 1. Except as otherwise provided in subsection 2, any person may file with the Board a complaint against a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care on a form provided by the Board. The form may be submitted in writing or electronically. If a complaint is submitted anonymously, the Board may accept the complaint but may refuse to consider the complaint if the lack of the identity of the complainant makes processing the complaint impossible or unfair to the person who is the subject of the complaint.

2. Any licensee, medical school or medical facility that becomes aware that a person practicing medicine, *genetic counseling*, perfusion or respiratory care in this State has, is or is about to become engaged in conduct which constitutes grounds for initiating disciplinary action shall file a written complaint with the Board within 30 days after becoming aware of the conduct.



3. Except as otherwise provided in subsection 4, any hospital, clinic or other medical facility licensed in this State, or medical society, shall report to the Board any change in the privileges of a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care to practice while the physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care is under investigation and the outcome of any disciplinary action taken by that facility or society against the physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care concerning the care of a patient or the competency of the physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care within 30 days after the change in privileges is made or disciplinary action is taken.

4. A hospital, clinic or other medical facility licensed in this State, or medical society, shall report to the Board within 5 days after a change in the privileges of a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care to practice that is based on:

(a) An investigation of the mental, medical or psychological competency of the physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care; or

(b) Suspected or alleged substance abuse in any form by the physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care.

5. The Board shall report any failure to comply with subsection 3 or 4 by a hospital, clinic or other medical facility licensed in this State to the Division of Public and Behavioral Health of the Department of Health and Human Services. If, after a hearing, the Division of Public and Behavioral Health determines that any such facility or society failed to comply with the requirements of subsection 3 or 4, the Division may impose an administrative fine of not more than \$10,000 against the facility or society for each such failure to report. If the administrative fine is not paid when due, the fine must be recovered in a civil action brought by the Attorney General on behalf of the Division.

6. The clerk of every court shall report to the Board any finding, judgment or other determination of the court that a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care:

(a) Is mentally ill;



- (b) Is mentally incompetent;
- (c) Has been convicted of a felony or any law governing controlled substances or dangerous drugs;
- (d) Is guilty of abuse or fraud under any state or federal program providing medical assistance; or
- (e) Is liable for damages for malpractice or negligence,
↳ within 45 days after such a finding, judgment or determination is made.

7. The Board shall retain all complaints filed with the Board pursuant to this section for at least 10 years, including, without limitation, any complaints not acted upon.

Sec. 28. NRS 630.309 is hereby amended to read as follows:

630.309 To institute a disciplinary action against a *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care, a written complaint, specifying the charges, must be filed with the Board by:

1. The Board or a committee designated by the Board to investigate a complaint;
2. Any member of the Board; or
3. Any other person who is aware of any act or circumstance constituting a ground for disciplinary action set forth in the regulations adopted by the Board.

Sec. 29. NRS 630.318 is hereby amended to read as follows:

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



designated by the Board to assist the Board or committee in determining the fitness of the physician, physician assistant, *genetic counselor*, practitioner of respiratory care or perfusionist to practice medicine, *genetic counseling*, respiratory care or perfusion or practice as a physician assistant, as applicable.

2. For the purposes of this section:

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

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

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

Sec. 30. NRS 630.326 is hereby amended to read as follows:

630.326 1. If an investigation by the Board regarding a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care reasonably determines that the health, safety or welfare of the public or any patient served by the licensee is at risk of imminent or continued harm, the Board may summarily suspend the license of the licensee pending the conclusion of a hearing to consider a formal complaint against the licensee. The order of summary suspension may be issued only by the Board or an investigative committee of the Board.

2. If the Board or an investigative committee of the Board issues an order summarily suspending the license of a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care pursuant to subsection 1, the Board shall hold a hearing not later than 60 days after the date on which the order is issued, unless the Board and the licensee



mutually agree to a longer period, to determine whether a reasonable basis exists to continue the suspension of the license pending the conclusion of a hearing to consider a formal complaint against the licensee. If no formal complaint against the licensee is pending before the Board on the date on which a hearing is held pursuant to this section, the Board shall reinstate the license of the licensee.

3. If the Board or an investigative committee of the Board issues an order summarily suspending the license of a licensee pursuant to subsection 1 and the Board requires the licensee to submit to a mental or physical examination or an examination testing his or her competence to practice, the examination must be conducted and the results obtained not later than 30 days after the order is issued.

Sec. 31. NRS 630.329 is hereby amended to read as follows:

630.329 If the Board issues an order suspending the license of a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care pending proceedings for disciplinary action, including, without limitation, a summary suspension pursuant to NRS 233B.127, the court shall not stay that order.

Sec. 32. NRS 630.336 is hereby amended to read as follows:

630.336 1. Any deliberations conducted or vote taken by the Board or any investigative committee of the Board regarding its ordering of a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care to undergo a physical or mental examination or any other examination designated to assist the Board or committee in determining the fitness of a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care are not subject to the requirements of NRS 241.020.

2. Except as otherwise provided in subsection 3 or 4, all applications for a license to practice medicine, *genetic counseling*, perfusion or respiratory care, any charges filed by the Board, financial records of the Board, formal hearings on any charges heard by the Board or a panel selected by the Board, records of such hearings and any order or decision of the Board or panel must be open to the public.

3. Except as otherwise provided in NRS 239.0115, the following may be kept confidential:

(a) Any statement, evidence, credential or other proof submitted in support of or to verify the contents of an application;



(b) Any report concerning the fitness of any person to receive or hold a license to practice medicine, *genetic counseling*, perfusion or respiratory care; and

(c) Any communication between:

(1) The Board and any of its committees or panels; and

(2) The Board or its staff, investigators, experts, committees, panels, hearing officers, advisory members or consultants and counsel for the Board.

4. Except as otherwise provided in subsection 5 and NRS 239.0115, a complaint filed with the Board pursuant to NRS 630.307, all documents and other information filed with the complaint and all documents and other information compiled as a result of an investigation conducted to determine whether to initiate disciplinary action are confidential.

5. The formal complaint or other document filed by the Board to initiate disciplinary action and all documents and information considered by the Board when determining whether to impose discipline are public records.

6. The Board shall, to the extent feasible, communicate or cooperate with or provide any documents or other information to any other licensing board or agency or any agency which is investigating a person, including a law enforcement agency. Such cooperation may include, without limitation, providing the board or agency with minutes of a closed meeting, transcripts of oral examinations and the results of oral examinations.

Sec. 33. NRS 630.346 is hereby amended to read as follows:

630.346 In any disciplinary hearing:

1. The Board, a panel of the members of the Board and a hearing officer are not bound by formal rules of evidence, except that evidence must be taken and considered in the hearing pursuant to NRS 233B.123, and a witness must not be barred from testifying solely because the witness was or is incompetent.

2. A finding of the Board must be supported by a preponderance of the evidence.

3. Proof of actual injury need not be established.

4. A certified copy of the record of a court or a licensing agency showing a conviction or plea of nolo contendere or the suspension, revocation, limitation, modification, denial or surrender of a license to practice medicine, *genetic counseling*, perfusion or respiratory care is conclusive evidence of its occurrence.

Sec. 34. NRS 630.358 is hereby amended to read as follows:

630.358 1. Any person:



(a) Whose practice of medicine, *genetic counseling*, perfusion or respiratory care has been limited; or

(b) Whose license to practice medicine, *genetic counseling*, perfusion or respiratory care has been:

(1) Suspended until further order; or

(2) Revoked,

↳ by an order of the Board, may apply to the Board for removal of the limitation or restoration of the license.

2. In hearing the application, the Board:

(a) May require the person to submit to a mental or physical examination or an examination testing his or her competence to practice medicine, *genetic counseling*, perfusion or respiratory care by physicians, *genetic counselors*, perfusionists or practitioners of respiratory care, as appropriate, or other examinations it designates and submit such other evidence of changed conditions and of fitness as it deems proper;

(b) Shall determine whether under all the circumstances the time of the application is reasonable; and

(c) May deny the application or modify or rescind its order as it deems the evidence and the public safety warrants.

3. The licensee has the burden of proving by clear and convincing evidence that the requirements for restoration of the license or removal of the limitation have been met.

4. The Board shall not restore a license unless it is satisfied that the person has complied with all of the terms and conditions set forth in the final order of the Board and that the person is capable of practicing medicine, *genetic counseling*, perfusion or respiratory care in a safe manner.

5. To restore a license that has been revoked by the Board, the applicant must apply for a license and take an examination as though the applicant had never been licensed under this chapter.

Sec. 35. NRS 630.366 is hereby amended to read as follows:

630.366 1. If the Board receives a copy of a court order issued pursuant to NRS 425.540 that provides for the suspension of all professional, occupational and recreational licenses, certificates and permits issued to a person who is the holder of a license to practice medicine, *to practice as a genetic counselor*, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice as a practitioner of respiratory care, the Board shall deem the license issued to that person to be suspended at the end of the 30th day after the date on which the court order was issued unless the Board receives a letter issued to the holder of the license by the district attorney or other



public agency pursuant to NRS 425.550 stating that the holder of the license has complied with the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560.

2. The Board shall reinstate a license to practice medicine, *to practice as a genetic counselor*, to practice as a perfusionist, to practice as a physician assistant, to practice as an anesthesiologist assistant or to practice as a practitioner of respiratory care that has been suspended by a district court pursuant to NRS 425.540 if the Board receives a letter issued by the district attorney or other public agency pursuant to NRS 425.550 to the person whose license was suspended stating that the person whose license was suspended has complied with the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560.

Sec. 36. NRS 630.388 is hereby amended to read as follows:

630.388 1. In addition to any other remedy provided by law, the Board, through its President or Secretary-Treasurer or the Attorney General, may apply to any court of competent jurisdiction:

(a) To enjoin any prohibited act or other conduct of a licensee which is harmful to the public;

(b) To enjoin any person who is not licensed under this chapter from practicing medicine, *genetic counseling*, perfusion or respiratory care;

(c) To limit the practice of a physician, *genetic counselor*, perfusionist, physician assistant, anesthesiologist assistant or practitioner of respiratory care, or suspend his or her license to practice;

(d) To enjoin the use of the title "P.A.," "P.A.-C.," "C.A.A.," "R.C.P." or any other word, combination of letters or other designation intended to imply or designate a person as a physician assistant, anesthesiologist assistant or practitioner of respiratory care, when not licensed by the Board pursuant to this chapter, unless the use is otherwise authorized by a specific statute; ~~or~~

(e) To enjoin the use of the title "L.P.," "T.L.P.," "licensed perfusionist," "temporarily licensed perfusionist" or any other word, combination of letters or other designation intended to imply or designate a person as a perfusionist, when not licensed by the Board pursuant to this chapter, unless the use is otherwise authorized by a specific statute ~~or~~ **H**; or

(f) To enjoin the use of the title "G.A.," "G.C.," "L.G.C.," "R.G.C.," "genetic associate," "genetic counselor," "licensed genetic counselor," "registered genetic counselor" or any other word, combination of letters or other designation intended to imply or designate a person as a genetic counselor, when not licensed by



the Board pursuant to this chapter, unless the use is otherwise authorized by a specific statute.

2. The court in a proper case may issue a temporary restraining order or a preliminary injunction for the purposes set forth in subsection 1:

(a) Without proof of actual damage sustained by any person;

(b) Without relieving any person from criminal prosecution for engaging in the practice of medicine, *genetic counseling*, perfusion or respiratory care without a license; and

(c) Pending proceedings for disciplinary action by the Board.

Sec. 37. NRS 630.390 is hereby amended to read as follows:

630.390 In seeking injunctive relief against any person for an alleged violation of this chapter by practicing medicine, *genetic counseling*, perfusion or respiratory care without a license, it is sufficient to allege that the person did, upon a certain day, and in a certain county of this State, engage in the practice of medicine, *genetic counseling*, perfusion or respiratory care without having a license to do so, without alleging any further or more particular facts concerning the same.

Sec. 38. NRS 630.395 is hereby amended to read as follows:

630.395 Any member or agent of the Board may enter any premises in this State where a person who holds a license issued pursuant to the provisions of this chapter practices medicine, *genetic counseling*, perfusion or respiratory care and inspect it to determine whether a violation of any provision of this chapter has occurred, including, without limitation:

1. An inspection to determine whether any person at the premises is practicing medicine, *genetic counseling*, perfusion or respiratory care without the appropriate license issued pursuant to the provisions of this chapter; or

2. An inspection to determine whether any physician is allowing a person to perform or participate in any activity under the supervision of the physician for the purpose of receiving credit toward a degree of doctor of medicine, osteopathy or osteopathic medicine in violation of the provisions of NRS 630.3745.

Sec. 39. NRS 630.397 is hereby amended to read as follows:

630.397 Unless the Board determines that extenuating circumstances exist, the Board shall forward to the appropriate law enforcement agency any substantiated information submitted to the Board concerning a person who practices or offers to practice medicine, *genetic counseling*, perfusion or respiratory care without the appropriate license issued pursuant to the provisions of this chapter.



Sec. 40. NRS 630.400 is hereby amended to read as follows:
630.400 1. It is unlawful for any person to:

(a) Present to the Board as his or her own the diploma, license or credentials of another;

(b) Give either false or forged evidence of any kind to the Board;

(c) Practice medicine, *genetic counseling*, perfusion or respiratory care under a false or assumed name or falsely personate another licensee;

(d) Except as otherwise provided by a specific statute, practice medicine, *genetic counseling*, perfusion or respiratory care without being licensed under this chapter;

(e) Hold himself or herself out as a perfusionist or use any other term indicating or implying that he or she is a perfusionist without being licensed by the Board;

(f) Hold himself or herself out as a physician assistant or use any other term indicating or implying that he or she is a physician assistant without being licensed by the Board;

(g) Hold himself or herself out as an anesthesiologist assistant or use any other term indicating or implying that he or she is an anesthesiologist assistant without being licensed by the Board; ~~or~~

(h) Hold himself or herself out as a practitioner of respiratory care or use any other term indicating or implying that he or she is a practitioner of respiratory care without being licensed by the Board ~~or~~; *or*

(i) Hold himself or herself out as a genetic counselor or use any other term indicating or implying that he or she is a genetic counselor without being licensed by the Board.

2. Unless a greater penalty is provided pursuant to NRS 200.830 or 200.840, a person who violates any provision of subsection 1:

(a) If no substantial bodily harm results, is guilty of a category D felony; or

(b) If substantial bodily harm results, is guilty of a category C felony,

↳ and shall be punished as provided in NRS 193.130.

3. In addition to any other penalty prescribed by law, if the Board determines that a person has committed any act described in subsection 1, the Board may:

(a) Issue and serve on the person an order to cease and desist until the person obtains from the Board the proper license or otherwise demonstrates that he or she is no longer in violation of



subsection 1. An order to cease and desist must include a telephone number with which the person may contact the Board.

(b) Issue a citation to the person. A citation issued pursuant to this paragraph must be in writing, describe with particularity the nature of the violation and inform the person of the provisions of this paragraph. Each activity in which the person is engaged constitutes a separate offense for which a separate citation may be issued. To appeal a citation, the person must submit a written request for a hearing to the Board not later than 30 days after the date of issuance of the citation.

(c) Assess against the person an administrative fine of not more than \$5,000.

(d) Impose any combination of the penalties set forth in paragraphs (a), (b) and (c).

Sec. 41. NRS 630A.090 is hereby amended to read as follows:
630A.090 1. This chapter does not apply to:

(a) The practice of *genetic counseling*, dentistry, chiropractic, naprapathy, Oriental medicine, podiatry, optometry, perfusion, respiratory care, faith or Christian Science healing, nursing, veterinary medicine or fitting hearing aids.

(b) A medical officer of the Armed Forces or a medical officer of any division or department of the United States in the discharge of his or her official duties, including, without limitation, providing medical care in a hospital in accordance with an agreement entered into pursuant to NRS 449.2455.

(c) Licensed or certified nurses in the discharge of their duties as nurses.

(d) Homeopathic physicians who are called into this State, other than on a regular basis, for consultation or assistance to any physician licensed in this State, and who are legally qualified to practice in the state or country where they reside.

2. This chapter does not repeal or affect any statute of Nevada regulating or affecting any other healing art.

3. This chapter does not prohibit:

(a) Gratuitous services of a person in case of emergency.

(b) The domestic administration of family remedies.

4. This chapter does not authorize a homeopathic physician to practice medicine, including allopathic medicine, except as otherwise provided in NRS 630A.040.

Sec. 42. NRS 632.472 is hereby amended to read as follows:

632.472 1. The following persons shall report in writing to the Executive Director of the Board any conduct of a licensee or



holder of a certificate which constitutes a violation of the provisions of this chapter:

(a) Any physician, dentist, dental hygienist, expanded function dental assistant, naprapath, chiropractic physician, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, nursing assistant, medication aide - certified, *genetic counselor*, perfusionist, physician assistant licensed pursuant to chapter 630 or 633 of NRS, anesthesiologist assistant, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, alcohol or drug counselor, peer recovery support specialist, peer recovery support specialist supervisor, music therapist, holder of a license or limited license issued pursuant to chapter 653 of NRS, driver of an ambulance, paramedic or other person providing medical services licensed or certified to practice in this State.

(b) Any personnel of a medical facility or facility for the dependent engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a medical facility or facility for the dependent upon notification by a member of the staff of the facility.

(c) A coroner.

(d) Any person who maintains or is employed by an agency to provide personal care services in the home.

(e) Any person who operates, who is employed by or who contracts to provide services for an intermediary service organization as defined in NRS 449.4304.

(f) Any person who maintains or is employed by an agency to provide nursing in the home.

(g) Any employee of the Department of Health and Human Services.

(h) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.

(i) Any person who maintains or is employed by a facility or establishment that provides care for older persons.

(j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect or exploitation of an older person and refers them to persons and agencies where their requests and needs can be met.

(k) Any social worker.

(l) Any person who operates or is employed by a community health worker pool or with whom a community health worker pool



contracts to provide the services of a community health worker, as defined in NRS 449.0027.

2. Every physician who, as a member of the staff of a medical facility or facility for the dependent, has reason to believe that a nursing assistant or medication aide - certified has engaged in conduct which constitutes grounds for the denial, suspension or revocation of a certificate shall notify the superintendent, manager or other person in charge of the facility. The superintendent, manager or other person in charge shall make a report as required in subsection 1.

3. A report may be filed by any other person.

4. Any person who in good faith reports any violation of the provisions of this chapter to the Executive Director of the Board pursuant to this section is immune from civil liability for reporting the violation.

5. As used in this section:

(a) "Agency to provide personal care services in the home" has the meaning ascribed to it in NRS 449.0021.

(b) "Community health worker pool" has the meaning ascribed to it in NRS 449.0028.

(c) "Peer recovery support specialist" has the meaning ascribed to it in NRS 433.627.

(d) "Peer recovery support specialist supervisor" has the meaning ascribed to it in NRS 433.629.

Sec. 43. NRS 633.171 is hereby amended to read as follows:

633.171 1. This chapter does not apply to:

(a) The practice of medicine, *genetic counseling* or perfusion pursuant to chapter 630 of NRS, dentistry, chiropractic, naprapathy, podiatry, optometry, respiratory care, faith or Christian Science healing, nursing, veterinary medicine or fitting hearing aids.

(b) A medical officer of the Armed Forces or a medical officer of any division or department of the United States in the discharge of his or her official duties, including, without limitation, providing medical care in a hospital in accordance with an agreement entered into pursuant to NRS 449.2455.

(c) Osteopathic physicians who are called into this State, other than on a regular basis, for consultation or assistance to a physician licensed in this State, and who are legally qualified to practice in the state where they reside.

(d) Osteopathic physicians who are temporarily exempt from licensure pursuant to NRS 633.420 and are practicing osteopathic medicine within the scope of the exemption.



(e) The performance of medical services by a student enrolled in an educational program for a physician assistant which is accredited by the Accreditation Review Commission on Education for the Physician Assistant, Inc., or its successor organization, as part of such a program.

(f) A physician assistant of any division or department of the United States in the discharge of his or her official duties unless licensure by a state is required by the division or department of the United States.

(g) Any person permitted to practice any other healing art under this title who does so within the scope of that authority.

2. This chapter does not repeal or affect any law of this State regulating or affecting any other healing art.

3. This chapter does not prohibit:

(a) Gratuitous services of a person in cases of emergency.

(b) The domestic administration of family remedies.

Sec. 44. NRS 640E.090 is hereby amended to read as follows:
640E.090 1. The provisions of this chapter do not apply to:

(a) Any person who is licensed or registered in this State as a physician pursuant to chapter 630, 630A or 633 of NRS, *genetic counselor*, dentist, nurse, dispensing optician, optometrist, occupational therapist, practitioner of respiratory care, physical therapist, podiatric physician, psychologist, marriage and family therapist, chiropractic physician, naprapath, athletic trainer, massage therapist, reflexologist, structural integration practitioner, perfusionist, doctor of Oriental medicine in any form, medical laboratory director or technician or pharmacist who:

(1) Practices within the scope of that license or registration;

(2) Does not represent that he or she is a licensed dietitian or registered dietitian; and

(3) Provides nutrition information incidental to the practice for which he or she is licensed or registered.

(b) A student enrolled in an educational program accredited by the Accreditation Council for Education in Nutrition and Dietetics, or its successor organization, if the student engages in the practice of dietetics under the supervision of a licensed dietitian or registered dietitian as part of that educational program.

(c) A registered dietitian employed by the Armed Forces of the United States, the United States Department of Veterans Affairs or any division or department of the Federal Government in the discharge of his or her official duties, including, without limitation, the practice of dietetics or providing nutrition services.



(d) A person who furnishes nutrition information, provides recommendations or advice concerning nutrition, or markets food, food materials or dietary supplements and provides nutrition information, recommendations or advice related to that marketing, if the person does not represent that he or she is a licensed dietitian or registered dietitian. While performing acts described in this paragraph, a person shall be deemed not to be engaged in the practice of dietetics or the providing of nutrition services.

(e) A person who provides services relating to weight loss or weight control through a program reviewed by and in consultation with a licensed dietitian or physician or a dietitian licensed or registered in another state which has equivalent licensure requirements as this State, as long as the person does not change the services or program without the approval of the person with whom he or she is consulting.

2. As used in this section, "nutrition information" means information relating to the principles of nutrition and the effect of nutrition on the human body, including, without limitation:

- (a) Food preparation;
- (b) Food included in a normal daily diet;
- (c) Essential nutrients required by the human body and recommended amounts of essential nutrients, based on nationally established standards;

(d) The effect of nutrients on the human body and the effect of deficiencies in or excess amounts of nutrients in the human body; and

(e) Specific foods or supplements that are sources of essential nutrients.

Sec. 45. 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 35 percent of the amount recovered.

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, *genetic counselor*, dentist, registered nurse, dispensing optician, optometrist, registered physical therapist, podiatric physician, licensed psychologist, chiropractic physician, naprapath, 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. 46. NRS 41A.017 is hereby amended to read as follows:

41A.017 “Provider of health care” means a physician licensed pursuant to chapter 630 or 633 of NRS, physician assistant, *genetic counselor*, anesthesiologist assistant, dentist, licensed nurse, dispensing optician, optometrist, registered physical therapist, podiatric physician, licensed psychologist, chiropractic physician, naprapath, doctor of Oriental medicine, holder of a license or a limited license issued under the provisions of chapter 653 of NRS, medical laboratory director or technician, licensed dietitian or a licensed hospital, clinic, surgery center, physicians’ professional corporation or group practice that employs any such person and its employees.

Sec. 47. NRS 42.021 is hereby amended to read as follows:

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



plaintiff's right to any insurance benefits concerning which the defendant has introduced evidence.

2. A source of collateral benefits introduced pursuant to subsection 1 may not:

(a) Recover any amount against the plaintiff; or

(b) Be subrogated to the rights of the plaintiff against a defendant.

3. In an action for injury or death against a provider of health care based upon professional negligence, a district court shall, at the request of either party, enter a judgment ordering that money damages or its equivalent for future damages of the judgment creditor be paid in whole or in part by periodic payments rather than by a lump-sum payment if the award equals or exceeds \$50,000 in future damages.

4. In entering a judgment ordering the payment of future damages by periodic payments pursuant to subsection 3, the court shall make a specific finding as to the dollar amount of periodic payments that will compensate the judgment creditor for such future damages. As a condition to authorizing periodic payments of future damages, the court shall require a judgment debtor who is not adequately insured to post security adequate to assure full payment of such damages awarded by the judgment. Upon termination of periodic payments of future damages, the court shall order the return of this security, or so much as remains, to the judgment debtor.

5. A judgment ordering the payment of future damages by periodic payments entered pursuant to subsection 3 must specify the recipient or recipients of the payments, the dollar amount of the payments, the interval between payments, and the number of payments or the period of time over which payments will be made. Such payments must only be subject to modification in the event of the death of the judgment creditor. Money damages awarded for loss of future earnings must not be reduced or payments terminated by reason of the death of the judgment creditor, but must be paid to persons to whom the judgment creditor owed a duty of support, as provided by law, immediately before the judgment creditor's death. In such cases, the court that rendered the original judgment may, upon petition of any party in interest, modify the judgment to award and apportion the unpaid future damages in accordance with this subsection.

6. If the court finds that the judgment debtor has exhibited a continuing pattern of failing to make the periodic payments as specified pursuant to subsection 5, the court shall find the judgment debtor in contempt of court and, in addition to the required periodic



payments, shall order the judgment debtor to pay the judgment creditor all damages caused by the failure to make such periodic payments, including, but not limited to, court costs and attorney's fees.

7. Following the occurrence or expiration of all obligations specified in the periodic payment judgment, any obligation of the judgment debtor to make further payments ceases and any security given pursuant to subsection 4 reverts to the judgment debtor.

8. As used in this section:

(a) "Future damages" includes damages for future medical treatment, care or custody, loss of future earnings, loss of bodily function, or future pain and suffering of the judgment creditor.

(b) "Periodic payments" means the payment of money or delivery of other property to the judgment creditor at regular intervals.

(c) "Professional negligence" means a negligent act or omission to act by a provider of health care in the rendering of professional services, which act or omission is the proximate cause of a personal injury or wrongful death. The term does not include services that are outside the scope of services for which the provider of health care is licensed or services for which any restriction has been imposed by the applicable regulatory board or health care facility.

(d) "Provider of health care" means a physician licensed under chapter 630 or 633 of NRS, *genetic counselor*, dentist, licensed nurse, dispensing optician, optometrist, registered physical therapist, podiatric physician, naprapath, 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. 48. NRS 49.215 is hereby amended to read as follows:

49.215 As used in NRS 49.215 to 49.245, inclusive:

1. A communication is "confidential" if it is not intended to be disclosed to third persons other than:

(a) Those present to further the interest of the patient in the consultation, examination or interview;

(b) Persons reasonably necessary for the transmission of the communication; or

(c) Persons who are participating in the diagnosis and treatment under the direction of the doctor, including members of the patient's family.

2. "Doctor" means a person licensed to practice medicine, *genetic counseling*, dentistry or osteopathic medicine, chiropractic



or naprapathy in any state or nation, or a person who is reasonably believed by the patient to be so licensed, and in addition includes a person employed by a public or private agency as a psychiatric social worker, or someone under his or her guidance, direction or control, while engaged in the examination, diagnosis or treatment of a patient for a mental condition.

3. "Patient" means a person who consults or is examined or interviewed by a doctor for purposes of diagnosis or treatment.

Sec. 49. NRS 52.320 is hereby amended to read as follows:

52.320 As used in NRS 52.320 to 52.375, inclusive, unless the context otherwise requires:

1. "Custodian of medical records" means a chiropractic physician, naprapath, physician, *genetic counselor*, registered physical therapist or licensed nurse who prepares and maintains medical records, or any employee or agent of such a person or a facility for convalescent care, medical laboratory or hospital who has care, custody and control of medical records for such a person or institution.

2. "Medical records" includes bills, ledgers, statements and other accounts which show the cost of medical services or care provided to a patient.

Sec. 50. NRS 89.050 is hereby amended to read as follows:

89.050 1. Except as otherwise provided in subsection 2, a professional entity may be organized only for the purpose of rendering one specific type of professional service and may not engage in any business other than rendering the professional service for which it was organized and services reasonably related thereto, except that a professional entity may own real and personal property appropriate to its business and may invest its money in any form of real property, securities or any other type of investment.

2. A professional entity may be organized to render a professional service relating to:

(a) Architecture, interior design, residential design, engineering and landscape architecture, or any combination thereof, and may be composed of persons:

(1) Engaged in the practice of architecture as provided in chapter 623 of NRS;

(2) Practicing as a registered interior designer as provided in chapter 623 of NRS;

(3) Engaged in the practice of residential design as provided in chapter 623 of NRS;

(4) Engaged in the practice of landscape architecture as provided in chapter 623A of NRS; and



(5) Engaged in the practice of professional engineering as provided in chapter 625 of NRS.

(b) Medicine, *genetic counseling*, homeopathy, osteopathy, naprapathy, chiropractic and psychology, or any combination thereof, and may be composed of persons engaged in the practice of:

(1) Medicine *or genetic counseling* as provided in chapter 630 of NRS;

(2) Homeopathic medicine as provided in chapter 630A of NRS;

(3) Osteopathic medicine as provided in chapter 633 of NRS;

(4) Chiropractic as provided in chapter 634 of NRS;

(5) Naprapathy as provided in chapter 634B of NRS; and

(6) Psychology and licensed to provide services pursuant to chapter 641 of NRS.

➔ Such a professional entity may market and manage additional professional entities which are organized to render a professional service relating to medicine, *genetic counseling*, homeopathy, osteopathy, naprapathy, chiropractic and psychology.

(c) Mental health services, and may be composed of the following persons, in any number and in any combination:

(1) Any psychologist who is licensed to practice in this State;

(2) Any social worker who holds a master's degree in social work and who is licensed by this State as a clinical social worker;

(3) Any registered nurse who is licensed to practice professional nursing in this State and who holds a master's degree in the field of psychiatric nursing;

(4) Any marriage and family therapist who is licensed by this State pursuant to chapter 641A of NRS; and

(5) Any clinical professional counselor who is licensed by this State pursuant to chapter 641A of NRS.

➔ Such a professional entity may market and manage additional professional entities which are organized to render a professional service relating to mental health services pursuant to this paragraph.

3. A professional entity may render a professional service only through its officers, managers and employees who are licensed or otherwise authorized by law to render the professional service.

Sec. 51. NRS 200.471 is hereby amended to read as follows:

200.471 1. As used in this section:

(a) "Assault" means:

(1) Unlawfully attempting to use physical force against another person; or

(2) Intentionally placing another person in reasonable apprehension of immediate bodily harm.



(b) “Fire-fighting agency” has the meaning ascribed to it in NRS 239B.020.

(c) “Health care facility” means a facility licensed pursuant to chapter 449 of NRS, an office of a person listed in NRS 629.031, a clinic or any other location, other than a residence, where health care is provided.

(d) “Officer” means:

(1) A person who possesses some or all of the powers of a peace officer;

(2) A person employed in a full-time salaried occupation of fire fighting for the benefit or safety of the public;

(3) A member of a volunteer fire department;

(4) A jailer, guard or other correctional officer of a city or county jail;

(5) A prosecuting attorney of an agency or political subdivision of the United States or of this State;

(6) A justice of the Supreme Court, judge of the Court of Appeals, district judge, justice of the peace, municipal judge, magistrate, court commissioner, master or referee, including a person acting pro tempore in a capacity listed in this subparagraph;

(7) An employee of this State or a political subdivision of this State whose official duties require the employee to make home visits;

(8) A civilian employee or a volunteer of a law enforcement agency whose official duties require the employee or volunteer to:

(I) Interact with the public;

(II) Perform tasks related to law enforcement; and

(III) Wear identification, clothing or a uniform that identifies the employee or volunteer as working or volunteering for the law enforcement agency;

(9) A civilian employee or a volunteer of a fire-fighting agency whose official duties require the employee or volunteer to:

(I) Interact with the public;

(II) Perform tasks related to fire fighting or fire prevention; and

(III) Wear identification, clothing or a uniform that identifies the employee or volunteer as working or volunteering for the fire-fighting agency; or

(10) A civilian employee or volunteer of this State or a political subdivision of this State whose official duties require the employee or volunteer to:

(I) Interact with the public;

(II) Perform tasks related to code enforcement; and



(III) Wear identification, clothing or a uniform that identifies the employee or volunteer as working or volunteering for this State or a political subdivision of this State.

(e) "Provider of health care" means:

(1) A physician, a medical student, *a genetic counselor*, a perfusionist, an anesthesiologist assistant or a physician assistant licensed pursuant to chapter 630 of NRS, a practitioner of respiratory care, a homeopathic physician, an advanced practitioner of homeopathy, a homeopathic assistant, an osteopathic physician, a physician assistant or anesthesiologist assistant licensed pursuant to chapter 633 of NRS, a podiatric physician, a podiatry hygienist, a physical therapist, a medical laboratory technician, an optometrist, a chiropractic physician, a chiropractic assistant, a naprapath, a doctor of Oriental medicine, a nurse, a student nurse, a certified nursing assistant, a nursing assistant trainee, a medication aide - certified, a person who provides health care services in the home for compensation, a dentist, a dental student, a dental hygienist, a dental hygienist student, an expanded function dental assistant, an expanded function dental assistant student, a pharmacist, a pharmacy student, an intern pharmacist, an attendant on an ambulance or air ambulance, a psychologist, a social worker, a marriage and family therapist, a marriage and family therapist intern, a clinical professional counselor, a clinical professional counselor intern, a behavior analyst, an assistant behavior analyst, a registered behavior technician, a mental health technician, a licensed dietitian, the holder of a license or a limited license issued under the provisions of chapter 653 of NRS, a public safety officer at a health care facility, an emergency medical technician, an advanced emergency medical technician, a paramedic or a participant in a program of training to provide emergency medical services; or

(2) An employee of or volunteer for a health care facility who:

(I) Interacts with the public;

(II) Performs tasks related to providing health care; and

(III) Wears identification, clothing or a uniform that identifies the person as an employee or volunteer of the health care facility.

(f) "School employee" means a licensed or unlicensed person employed by a board of trustees of a school district pursuant to NRS 391.100 or 391.281.

(g) "Sporting event" has the meaning ascribed to it in NRS 41.630.



(h) "Sports official" has the meaning ascribed to it in NRS 41.630.

(i) "Taxicab" has the meaning ascribed to it in NRS 706.8816.

(j) "Taxicab driver" means a person who operates a taxicab.

(k) "Transit operator" means a person who operates a bus or other vehicle as part of a public mass transportation system.

(l) "Utility worker" means an employee of a public utility as defined in NRS 704.020 whose official duties require the employee to:

(1) Interact with the public;

(2) Perform tasks related to the operation of the public utility; and

(3) Wear identification, clothing or a uniform that identifies the employee as working for the public utility.

2. A person convicted of an assault shall be punished:

(a) If paragraph (c) or (d) does not apply to the circumstances of the crime and the assault is not made with the use of a deadly weapon or the present ability to use a deadly weapon, for a misdemeanor.

(b) If the assault is made with the use of a deadly weapon or the present ability to use a deadly weapon, for a category B felony by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years, or by a fine of not more than \$5,000, or by both fine and imprisonment.

(c) If paragraph (d) does not apply to the circumstances of the crime and if the assault:

(1) Is committed upon:

(I) An officer, a school employee, a taxicab driver, a transit operator or a utility worker who is performing his or her duty;

(II) A provider of health care while the provider of health care is performing his or her duty or is on the premises where he or she performs that duty; or

(III) A sports official based on the performance of his or her duties at a sporting event; and

(2) The person charged knew or should have known that the victim was an officer, a provider of health care, a school employee, a taxicab driver, a transit operator, a utility worker or a sports official,

↳ for a gross misdemeanor, unless the assault is made with the use of a deadly weapon or the present ability to use a deadly weapon, then for a category B felony by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not



more than 6 years, or by a fine of not more than \$5,000, or by both fine and imprisonment.

(d) If the assault:

(1) Is committed by a probationer, a prisoner who is in lawful custody or confinement or a parolee upon:

(I) An officer, a school employee, a taxicab driver, a transit operator or a utility worker who is performing his or her duty;

(II) A provider of health care while the provider of health care is performing his or her duty or is on the premises where he or she performs that duty; or

(III) A sports official based on the performance of his or her duties at a sporting event; and

(2) The probationer, prisoner or parolee charged knew or should have known that the victim was an officer, a provider of health care, a school employee, a taxicab driver, a transit operator, a utility worker or a sports official,

↳ for a category D felony as provided in NRS 193.130, unless the assault is made with the use of a deadly weapon or the present ability to use a deadly weapon, then for a category B felony by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years, or by a fine of not more than \$5,000, or by both fine and imprisonment.

Sec. 52. NRS 200.5093 is hereby amended to read as follows:

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

(a) Except as otherwise provided in subsection 2, report the abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person to:

(1) The local office of the Aging and Disability Services Division of the Department of Health and Human Services;

(2) A police department or sheriff's office; or

(3) A toll-free telephone service designated by the Aging and Disability Services Division of the Department of Health and Human Services; and

(b) Make such a report as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the older person or vulnerable person has been abused, neglected, exploited, isolated or abandoned.



2. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that the abuse, neglect, exploitation, isolation or abandonment of the older person or vulnerable person involves an act or omission of the Aging and Disability Services Division, another division of the Department of Health and Human Services or a law enforcement agency, the person shall make the report to an agency other than the one alleged to have committed the act or omission.

3. Each agency, after reducing a report to writing, shall forward a copy of the report to the Aging and Disability Services Division of the Department of Health and Human Services and the Unit for the Investigation and Prosecution of Crimes.

4. A report must be made pursuant to subsection 1 by the following persons:

(a) Every physician, dentist, dental hygienist, expanded function dental assistant, chiropractic physician, naprapath, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, physician assistant licensed pursuant to chapter 630 or 633 of NRS, *genetic counselor*, anesthesiologist assistant, perfusionist, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, clinical alcohol and drug counselor, alcohol and drug counselor, music therapist, athletic trainer, driver of an ambulance, paramedic, licensed dietitian, holder of a license or a limited license issued under the provisions of chapter 653 of NRS, behavior analyst, assistant behavior analyst, registered behavior technician, peer recovery support specialist, as defined in NRS 433.627, peer recovery support specialist supervisor, as defined in NRS 433.629, or other person providing medical services licensed or certified to practice in this State, who examines, attends or treats an older person or vulnerable person who appears to have been abused, neglected, exploited, isolated or abandoned.

(b) Any personnel of a hospital or similar institution engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a hospital or similar institution upon notification of the suspected abuse, neglect, exploitation, isolation or abandonment of an older person or vulnerable person by a member of the staff of the hospital.

(c) A coroner.

(d) Every person who maintains or is employed by an agency to provide personal care services in the home.

(e) Every person who maintains or is employed by an agency to provide nursing in the home.



(f) Every person who operates, who is employed by or who contracts to provide services for an intermediary service organization as defined in NRS 449.4304.

(g) Any employee of the Department of Health and Human Services, except the State Long-Term Care Ombudsman appointed pursuant to NRS 427A.125 and any of his or her advocates or volunteers where prohibited from making such a report pursuant to 45 C.F.R. § 1321.11.

(h) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.

(i) Any person who maintains or is employed by a facility or establishment that provides care for older persons or vulnerable persons.

(j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect, exploitation, isolation or abandonment of an older person or vulnerable person and refers them to persons and agencies where their requests and needs can be met.

(k) Every social worker.

(l) Any person who owns or is employed by a funeral home or mortuary.

(m) Every person who operates or is employed by a community health worker pool, as defined in NRS 449.0028, or with whom a community health worker pool contracts to provide the services of a community health worker, as defined in NRS 449.0027.

(n) Every person who is enrolled with the Division of Health Care Financing and Policy of the Department of Health and Human Services to provide doula services to recipients of Medicaid pursuant to NRS 422.27177.

5. A report may be made by any other person.

6. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that an older person or vulnerable person has died as a result of abuse, neglect, isolation or abandonment, the person shall, as soon as reasonably practicable, report this belief to the appropriate medical examiner or coroner, who shall investigate the cause of death of the older person or vulnerable person and submit to the appropriate local law enforcement agencies, the appropriate prosecuting attorney, the Aging and Disability Services Division of the Department of Health and Human Services and the Unit for the Investigation and Prosecution of Crimes his or her written findings. The written



findings must include the information required pursuant to the provisions of NRS 200.5094, when possible.

7. A division, office or department which receives a report pursuant to this section shall cause the investigation of the report to commence within 3 working days. A copy of the final report of the investigation conducted by a division, office or department, other than the Aging and Disability Services Division of the Department of Health and Human Services, must be forwarded within 30 days after the completion of the report to the:

- (a) Aging and Disability Services Division;
- (b) Repository for Information Concerning Crimes Against Older Persons or Vulnerable Persons created by NRS 179A.450; and
- (c) Unit for the Investigation and Prosecution of Crimes.

8. If the investigation of a report results in the belief that an older person or vulnerable person is abused, neglected, exploited, isolated or abandoned, the Aging and Disability Services Division of the Department of Health and Human Services or the county's office for protective services may provide protective services to the older person or vulnerable person if the older person or vulnerable person is able and willing to accept them.

9. A person who knowingly and willfully violates any of the provisions of this section is guilty of a misdemeanor.

10. As used in this section, "Unit for the Investigation and Prosecution of Crimes" means the Unit for the Investigation and Prosecution of Crimes Against Older Persons or Vulnerable Persons in the Office of the Attorney General created pursuant to NRS 228.265.

Sec. 53. NRS 202.2491 is hereby amended to read as follows:

202.2491 1. Except as otherwise provided in subsections 5 and 6 and NRS 202.24915, the smoking of tobacco in any form is prohibited if done in any:

- (a) Public elevator.
- (b) Public building.
- (c) Public waiting room, lobby or hallway of any:
 - (1) Medical facility or facility for the dependent as defined in chapter 449 of NRS; or
 - (2) Office of any chiropractic physician, naprapath, dentist, physical therapist, physician, *genetic counselor*, podiatric physician, psychologist, optician, optometrist or doctor of Oriental medicine.
- (d) Hotel or motel when so designated by the operator thereof.
- (e) Public area of a store principally devoted to the sale of food for human consumption off the premises.



- (f) Child care facility.
 - (g) Bus used by the general public, other than a chartered bus, or in any maintenance facility or office associated with a bus system operated by any regional transportation commission.
 - (h) School bus.
 - (i) Video arcade.
2. The person in control of an area listed in paragraph (c), (d), (e) or (g) of subsection 1:
- (a) Shall post in the area signs prohibiting smoking in any place not designated for that purpose as provided in paragraph (b).
 - (b) May designate separate rooms or portions of the area which may be used for smoking, except for a room or portion of the area of a store described in paragraph (e) of subsection 1 if the room or portion of the area:
 - (1) Is leased to or operated by a person licensed pursuant to NRS 463.160; and
 - (2) Does not otherwise qualify for an exemption set forth in NRS 202.24915.
3. The person in control of a public building:
- (a) Shall post in the area signs prohibiting smoking in any place not designated for that purpose as provided in paragraph (b).
 - (b) Shall, except as otherwise provided in this subsection, designate a separate area which may be used for smoking.
 - ↳ A school district which prohibits the use of tobacco by pupils need not designate an area which may be used by the pupils to smoke.
4. The operator of a restaurant with a seating capacity of 50 or more shall maintain a flexible nonsmoking area within the restaurant and offer each patron the opportunity to be seated in a smoking or nonsmoking area.
5. A business which derives more than 50 percent of its gross receipts from the sale of alcoholic beverages or 50 percent of its gross receipts from gaming operations may be designated as a smoking area in its entirety by the operator of the business.
6. The smoking of tobacco is not prohibited in:
- (a) Any room or area designated for smoking pursuant to paragraph (b) of subsection 2 or paragraph (b) of subsection 3.
 - (b) A licensed gaming establishment. A licensed gaming establishment may designate separate rooms or areas within the establishment which may or may not be used for smoking.
7. As used in this section:
- (a) "Child care facility" means an establishment operated and maintained to furnish care on a temporary or permanent basis,



during the day or overnight, to five or more children under 18 years of age, if compensation is received for the care of any of those children. The term does not include the home of a natural person who provides child care.

(b) "Licensed gaming establishment" has the meaning ascribed to it in NRS 463.0169.

(c) "Public building" means any building or office space owned or occupied by:

(1) Any component of the Nevada System of Higher Education and used for any purpose related to the System.

(2) The State of Nevada and used for any public purpose, other than that used by the Department of Corrections to house or provide other services to offenders.

(3) Any county, city, school district or other political subdivision of the State and used for any public purpose.

↳ If only part of a building is owned or occupied by an entity described in this paragraph, the term means only that portion of the building which is so owned or occupied.

(d) "School bus" has the meaning ascribed to it in NRS 483.160.

(e) "Video arcade" means a facility legally accessible to persons under 18 years of age which is intended primarily for the use of pinball and video machines for amusement and which contains a minimum of 10 such machines.

Sec. 54. NRS 226.454 is hereby amended to read as follows:

226.454 "Provider of health care" means:

1. A physician;
2. A physician assistant licensed pursuant to chapter 630 or 633 of NRS;
3. A dentist;
4. A licensed nurse;
5. A person who holds a license as an attendant or is certified as an emergency medical technician, advanced emergency medical technician or paramedic pursuant to chapter 450B of NRS;
6. An optometrist;
7. An audiologist;
8. A practitioner of respiratory care;
9. A podiatric physician;
10. A psychologist;
11. A clinical professional counselor;
12. *A genetic counselor;*
13. A perfusionist;
- ~~13.~~ 14. A pharmacist or pharmacy technician;



~~14.~~ 15. An associate in social work, a social worker, a master social worker, an independent social worker or a clinical social worker licensed pursuant to chapter 641B of NRS;

~~15.~~ 16. A midwife; or

~~16.~~ 17. A provider of doula services who is enrolled with the Division of Health Care Financing and Policy of the Department of Health and Human Services to receive reimbursement through Medicaid pursuant to NRS 422.27177.

Sec. 55. NRS 288.140 is hereby amended to read as follows:

288.140 1. It is the right of every local government employee, subject to the limitations provided in subsections 3, 4 and 5, to join any employee organization of the employee's choice or to refrain from joining any employee organization. A local government employer shall not discriminate in any way among its employees on account of membership or nonmembership in an employee organization.

2. The recognition of an employee organization for negotiation, pursuant to this chapter, does not preclude any local government employee who is not a member of that employee organization from acting for himself or herself with respect to any condition of his or her employment, but any action taken on a request or in adjustment of a grievance shall be consistent with the terms of an applicable negotiated agreement, if any.

3. A police officer, sheriff, deputy sheriff or other law enforcement officer may be a member of an employee organization only if such employee organization is composed exclusively of law enforcement officers.

4. A civilian employee of a metropolitan police department which is organized pursuant to chapter 280 of NRS may be a member of an employee organization only if such employee organization is composed exclusively of civilian employees of a metropolitan police department which is organized pursuant to chapter 280 of NRS.

5. The following persons may not be a member of an employee organization:

(a) A supervisory employee described in paragraph (b) of subsection 1 of NRS 288.138, including but not limited to appointed officials and department heads who are primarily responsible for formulating and administering management, policy and programs.

(b) A doctor or physician who is employed by a local government employer.

(c) Except as otherwise provided in this paragraph, an attorney who is employed by a local government employer and who is



assigned to a civil law division, department or agency. The provisions of this paragraph do not apply with respect to an attorney for the duration of a collective bargaining agreement to which the attorney is a party as of July 1, 2011.

6. As used in this section, “doctor or physician” means a doctor, physician, *genetic counselor*, homeopathic physician, osteopathic physician, naprapath, chiropractic physician, practitioner of Oriental medicine, podiatric physician or practitioner of optometry, as those terms are defined or used, respectively, in NRS 630.014, 630A.050, 633.091, chapter 634 of NRS, chapter 634A of NRS, NRS 634B.050, chapter 635 of NRS or chapter 636 of NRS.

Sec. 56. NRS 439A.0195 is hereby amended to read as follows:

439A.0195 “Practitioner” means a physician licensed under chapter 630, 630A or 633 of NRS, *genetic counselor*, dentist, licensed nurse, dispensing optician, optometrist, registered physical therapist, podiatric physician, licensed psychologist, chiropractic physician, naprapath, doctor of Oriental medicine in any form, medical laboratory director or technician, pharmacist or other person whose principal occupation is the provision of services for health.

Sec. 57. NRS 598A.360 is hereby amended to read as follows:

598A.360 “Practitioner” means a physician licensed pursuant to chapter 630 or 633 of NRS, physician assistant, *genetic counselor*, licensed nurse, dispensing optician, optometrist, practitioner of respiratory care, registered physical therapist, occupational therapist, licensed psychologist or perfusionist.

Sec. 58. NRS 685B.120 is hereby amended to read as follows:

685B.120 1. Any person who provides coverage in this State for the cost of:

- (a) Medical care;
- (b) Surgery;
- (c) Chiropractic;
- (d) Physical therapy;
- (e) Speech-language pathology;
- (f) Audiology;
- (g) Professional care of mental health;
- (h) Dental care;
- (i) Hospital care;
- (j) Ophthalmic care;
- (k) Naprapathy;
- (l) *Genetic counseling*; or
- (m) Ambulance services,



↳ whether the coverage provides for direct payment, reimbursement or any other method of payment, is subject to regulation by the Division and to the provisions of this Code unless the person shows that while providing such coverage the person is subject to regulation by the Federal Government.

2. A nonprofit corporation that provides prepaid ambulance services is not subject to regulation by the Division or to the provisions of this Code if the corporation presents evidence satisfactory to the Commissioner that the corporation is subject to regulation by a political subdivision of this State pursuant to an exclusive franchise which limits the number of times any such prepaid services may be used to a defined number that are medically necessary.

Sec. 59. NRS 686A.2825 is hereby amended to read as follows:

686A.2825 “Practitioner” means:

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

2. An attorney admitted to practice law in this state or any other state.

Sec. 60. 1. Notwithstanding the amendatory provisions of this act, any person who is engaged in the practice of genetic counseling on or before January 1, 2026, may continue to engage in the practice of genetic counseling without obtaining a license pursuant to section 7 of this act until July 1, 2026.

2. As used in this section, “genetic counseling” has the meaning ascribed to it in section 4 of this act.

Sec. 60.5. As soon as practicable after the effective date of this section, the Board of Medical Examiners shall appoint to the Genetic Counseling Advisory Council created by section 5.9 of this act:

1. The member described in paragraph (a) of subsection 2 of section 5.9 of this act and one member described in paragraph (b) of that subsection to initial terms that expire on January 1, 2027; and



2. Two members described in paragraph (b) of subsection 2 of section 5.9 of this act and the member described in paragraph (c) of that subsection to initial terms that expire on January 1, 2028.

Sec. 61. 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.

Sec. 62. 1. This section and sections 5.9 and 60.5 of this act become effective upon passage and approval.

2. Sections 1 to 5.6, inclusive, 6 to 17, inclusive, 19 to 60, inclusive, and 61 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, 2026, for all other purposes.

3. Section 18 of this act becomes effective on January 1, 2031.

4. Section 5.9 of this act expires by limitation on January 1, 2031.



