SUMMARY—Revises provisions governing pharmacists. (BDR 54-463)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: May have Fiscal Impact.

Effect on the State Highway Fund: No.

AN ACT relating to pharmacy; authorizing a registered pharmacist to prescribe and dispense drugs and devices to treat certain health conditions and dispense a refill without the authorization of a practitioner, other than a pharmacist, under certain circumstances; authorizing a registered pharmacist to administer drugs; authorizing a registered pharmacist to engage in certain activity relating to laboratories and laboratory testing; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes, under certain conditions, a pharmacist to dispense a self-administered hormonal contraceptive without a prescription and prescribe and dispense a drug for the medication-assisted treatment of opioid use disorder. (NRS 639.28078, 639.28079) **Section 1** of this bill authorizes a registered pharmacist to prescribe and dispense drugs and devices for the treatment of health conditions that: (1) have been previously diagnosed; (2) are self-limiting; or (3) are acute conditions diagnosed after the performance of certain tests. **Section 1** additionally authorizes a registered pharmacist to dispense a one-time refill of a prescription without the

authorization of a practitioner, other than a pharmacist, if the drug was previously prescribed to the patient and losing access to the drug would threaten the health of the patient. **Section 1** additionally prohibits a registered pharmacist from taking such action with regard to: (1) drugs or devices that are not approved by the United States Food and Drug Administration; (2) controlled substances that are not opioids, except in certain clinical settings; and (3) controlled substances that are opioids except in accordance with the protocols for prescribing and dispensing a drug for medication-assisted treatment. (NRS 639.28079) **Section 1** also authorizes the State Board of Pharmacy to adopt regulations establishing: (1) the scope of the ability for a registered pharmacist to prescribe and dispense drugs and devices and dispense refills without the authorization of another type of practitioner; (2) the standard of care required of a registered pharmacist who engages in such activities; and (3) the requirements for adequate liability insurance for registered pharmacists who engage in such activities.

Section 2 of this bill provides that prescribing and dispensing drugs and devices and dispensing refills pursuant to **section 1** constitutes the practice of pharmacy. **Sections 3, 10-13 and 15** of this bill make additional changes necessary to authorize a registered pharmacist to prescribe and dispense drugs and devices and dispense refills without the authorization of another type of practitioner pursuant to **section 1**. The Board would be authorized to suspend or revoke the registration of a pharmacist who prescribes or dispenses a drug or device or dispenses a refill without the authorization of another type of practitioner and fails to comply with the provisions of **section 1** or the regulations adopted pursuant thereto. (NRS 639.210)

Existing law includes within the practice of pharmacy the performance or supervision of activities associated with manufacturing, compounding, labeling, dispensing and distributing of a drug. (NRS 639.0124) **Section 2** additionally includes the performance or supervision of activities associated with administering a drug, thereby authorizing a registered pharmacist to perform or supervise such activities. **Sections 14, 16 and 17** of this bill accordingly provide general authorization for a registered pharmacist to possess and administer controlled substances and dangerous drugs.

Existing law requires the Board to adopt regulations governing the manipulation of a person for the collection of specimens by a registered pharmacist that: (1) require the pharmacist to use only a fingerstick or oral or nasal swab to collect the specimens; and (2) set forth the procedures and requirements the pharmacist is required to follow when manipulating a person for the collection of a specimen. (NRS 639.0747) **Section 4** of this bill removes the requirement that a pharmacist use only a fingerstick or oral or nasal swab to collect a specimen, thereby authorizing a pharmacist to collect a specimen using any method available for the collection of the specimen.

Existing law authorizes a registered pharmacist or a registered intern pharmacist to: (1) perform a home blood glucose test; and (2) order and perform laboratory tests that are necessary for therapy that uses a drug approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus. (NRS 639.2808, 639.28085) **Section 5** of this bill additionally authorizes a registered pharmacist to: (1) order laboratory tests that are necessary for any drug therapy or that otherwise facilitate the care of a patient within the authorized scope of practice of the pharmacist; and (2) perform certain other laboratory tests determined by the Federal

Government to be simple laboratory examinations and procedures that have an insignificant risk of an erroneous result. (42 U.S.C. § 263a(d)(3); 42 C.F.R. Part 493, Subpart A) **Section 5** also authorizes the State Board of Pharmacy to adopt regulations to authorize registered intern pharmacists to order and perform such laboratory tests. **Section 2** provides that ordering and performing such laboratory tests constitutes the practice of pharmacy. **Sections 2 and 6** of this bill remove duplicative provisions from existing law. **Sections 8, 9 and 18-24** of this bill make conforming changes so that requirements for insurance coverage of certain services performed by registered pharmacists are not changed by this bill.

Existing law requires the State Board of Health to adopt regulations for the certification and licensure of laboratory directors. (NRS 652.125) Existing regulations define the term "exempt laboratory" to be a laboratory that: (1) conducts only certain microscopy tests and tests determined by the Federal Government to be simple laboratory examinations and procedures that have an insignificant risk of an erroneous result; and (2) does not perform only tests for human immunodeficiency virus. (42 C.F.R. § 493.19, 42 C.F.R. Part 493, Subpart A; NAC 652.072) **Section 7** of this bill requires regulations of the Board to authorize a registered pharmacist to serve as the laboratory director of an exempt laboratory.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN

SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 639 of NRS is hereby amended by adding thereto a new section to read as follows:

1. Subject to the limitations set forth in subsection 2, a registered pharmacist may, in accordance with any requirements prescribed pursuant to subsection 3:

(a) Prescribe and dispense drugs or devices that are used for the treatment of health conditions, other than opioid use disorder, that:

(1) Have been previously diagnosed;

(2) Are self-limiting; or

(3) Are acute conditions diagnosed after performing a test that is classified as a waived test pursuant to 42 C.F.R. Part 493, Subpart A; and

(b) Dispense a one-time refill of an existing prescription without authorization from a practitioner, other than a pharmacist, if, in the professional judgment of the pharmacist, the health of the patient will be harmed without the patient continuing to have access to the prescribed drug.

2. A registered pharmacist shall not take any action described in subsection 1 with regard to a:

(a) Drug or device that is not approved by the United States Food and Drug Administration.

(b) Controlled substance that is not an opioid, except if the registered pharmacist is prescribing such a controlled substance in:

(1) An inpatient medical facility in accordance with the policies of the facility;

(2) An outpatient medical facility or clinic, only if the registered pharmacist is acting within a multidisciplinary team;

(3) A program of hospice care or palliative care; or

(4) A program of treatment for an alcohol or other substance use disorder.

(c) Controlled substance that is an opioid.

3. The Board may adopt regulations:

(a) Requiring a registered pharmacist who takes the actions authorized by this section to be covered by adequate liability insurance, as determined by the Board;

(b) Establishing the scope of the ability for a registered pharmacist to prescribe drugs and devices and dispense refills as authorized by subsection 1; and

(c) Establishing the standard of care required of a registered pharmacist who prescribes drugs and devices and dispenses refills as authorized by subsection 1.

4. As used in this section:

(a) "Medical facility" has the meaning ascribed to it in NRS 449.0151.

(b) "Program of hospice care" means a program of hospice care described in NRS 449.196.

(c) "Self-limiting" means that a health condition generally persists for a limited period of time.

Sec. 2. NRS 639.0124 is hereby amended to read as follows:

639.0124 1. “Practice of pharmacy” includes, but is not limited to, the:

(a) Performance or supervision of activities associated with manufacturing, compounding, labeling, dispensing ***,*** ~~[and]~~ distributing ~~[of]~~ ***and administering*** a drug, including the receipt, handling and storage of prescriptions and other confidential information relating to patients.

(b) Interpretation and evaluation of prescriptions or orders for medicine.

(c) Participation in drug evaluation and drug research.

(d) Advising of the therapeutic value, reaction, drug interaction, hazard and use of a drug.

(e) Selection of the source, storage and distribution of a drug.

(f) Maintenance of proper documentation of the source, storage and distribution of a drug.

(g) Interpretation of clinical data contained in a person’s record of medication.

(h) Development of written guidelines and protocols in collaboration with a practitioner which authorize collaborative drug therapy management. The written guidelines and protocols must comply with NRS 639.2629.

(i) Implementation and modification of drug therapy, administering drugs and ordering and performing tests in accordance with a collaborative practice agreement.

(j) Prescribing, dispensing and administering of drugs for preventing the acquisition of human immunodeficiency virus and ~~[ordering and]~~ conducting laboratory tests necessary for therapy that uses such drugs pursuant to the protocol prescribed pursuant to NRS 639.28085.

(k) Dispensing a self-administered hormonal contraceptive pursuant to NRS 639.28078.

(l) Assessing a patient and prescribing and dispensing a drug for medication-assisted treatment in accordance with NRS 639.28079.

(m) Ordering and performing laboratory tests in accordance with NRS 639.2808.

(n) Prescribing and dispensing drugs and devices and dispensing refills without the authorization of a practitioner, other than a pharmacist, in accordance with section 1 of this act.

2. The term does not include the changing of a prescription by a pharmacist or practitioner without the consent of the prescribing practitioner, except as otherwise provided in NRS 639.2583, 639.28078 and 639.28085.

Sec. 3. NRS 639.0125 is hereby amended to read as follows:

639.0125 "Practitioner" means:

1. A physician, dentist, veterinarian or podiatric physician who holds a license to practice his or her profession in this State;

2. A hospital, pharmacy or other institution licensed, registered or otherwise permitted to distribute, dispense, conduct research with respect to or administer drugs in the course of professional practice or research in this State;

3. An advanced practice registered nurse who has been authorized to prescribe controlled substances, poisons, dangerous drugs and devices;

4. A physician assistant who:

(a) Holds a license issued by the Board of Medical Examiners; and

(b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances, poisons, dangerous drugs or devices under the supervision of a physician as required by chapter 630 of NRS;

5. A physician assistant who:

(a) Holds a license issued by the State Board of Osteopathic Medicine; and

(b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances, poisons, dangerous drugs or devices under the supervision of an osteopathic physician as required by chapter 633 of NRS;

6. An optometrist who is certified by the Nevada State Board of Optometry to prescribe and administer pharmaceutical agents pursuant to NRS 636.288, when the optometrist prescribes or administers pharmaceutical agents within the scope of his or her certification;

7. A dental hygienist who:

(a) Holds a valid license to practice dental hygiene in this State;

(b) Is authorized to prescribe and dispense the dangerous drugs and devices listed in NRS 631.3105 in accordance with the provisions of that section and the regulations adopted pursuant thereto; and

(c) Holds a certificate issued pursuant to NRS 639.1374 by the State Board of Pharmacy authorizing him or her to so prescribe;

8. A pharmacist who ~~[is]~~ ***:***

(a) Is registered pursuant to NRS 639.28079 to prescribe and dispense drugs for medication-assisted treatment; ***or***

(b) Prescribes and dispenses drugs or devices or dispenses refills without the authorization of a practitioner, other than a pharmacist, in accordance with section 1 of this act; or

9. A certified registered nurse anesthetist who orders, prescribes, possesses or administers controlled substances, poisons, dangerous drugs or devices in accordance with NRS 632.2397.

Sec. 4. NRS 639.0747 is hereby amended to read as follows:

639.0747 ~~[1.]~~ The Board shall adopt such regulations as are necessary to carry out the provisions of NRS 652.210 with regard to a registered pharmacist, including, without limitation, regulations that ~~[:~~

~~(a) Require a registered pharmacist to use only a fingerstick or oral or nasal swab to collect the specimens pursuant to NRS 652.210; and~~

~~(b) Set~~] ***set*** forth the procedures and requirements with which a registered pharmacist shall comply when manipulating a person for the collection of specimens or performing any laboratory test pursuant to NRS 652.210.

~~[2. As used in this section, "fingerstick" means a procedure in which a finger is pricked with a lancet, small blade or other instrument to obtain a small quantity of blood for any laboratory test pursuant to NRS 652.210.]~~

Sec. 5. NRS 639.2808 is hereby amended to read as follows:

639.2808 ***1.*** A registered pharmacist ~~[or a]~~ ***may:***

(a) Order laboratory tests that are necessary for therapy that uses a drug approved by the Food and Drug Administration or to otherwise facilitate the care of a patient within the authorized scope of practice of the registered pharmacist; and

(b) Perform any laboratory test that is classified as a waived test under 42 C.F.R. Part 493, Subpart A, including, without limitation, a blood glucose test using devices for monitoring

approved by the Food and Drug Administration for use in the home if such a test is performed in compliance with standards of practice recommended by the Association of Diabetes Care and Education Specialists.

2. A registered intern pharmacist may perform a blood glucose test using devices for monitoring approved by the Food and Drug Administration for use in the home. The performance of such a test must be in compliance with standards of practice recommended by the ~~[American]~~ Association of Diabetes ~~[Educators]~~ ***Care and Education Specialists*** or its successor organization. ***The Board may adopt regulations authorizing a registered intern pharmacist to perform other activities described in subsection 1.***

Sec. 6. NRS 639.28085 is hereby amended to read as follows:

639.28085 1. To the extent authorized by federal law, a pharmacist who meets the requirements prescribed by the Board pursuant to subsection 2 may, in accordance with the requirements of the protocol prescribed pursuant to subsection 2:

(a) ~~[Order and perform]~~ ***Perform*** laboratory tests that are necessary for therapy that uses a drug approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus; and

(b) Prescribe, dispense and administer any drug described in paragraph (a) to a patient.

2. The Board shall adopt regulations:

(a) Requiring a pharmacist who takes the actions authorized by this section to be covered by adequate liability insurance, as determined by the Board; and

(b) Establishing a protocol for the actions authorized by this section.

Sec. 7. NRS 652.125 is hereby amended to read as follows:

652.125 1. The Board shall adopt regulations for the certification and licensure of laboratory directors and laboratory personnel who perform technical duties other than the collection of blood. ***The regulations must authorize a registered pharmacist to serve as the laboratory director of an exempt laboratory, regardless of whether the registered pharmacist has entered into a collaborative practice agreement.***

2. The Division shall, as a prerequisite for the renewal of a certificate or license, require the laboratory director and any laboratory personnel certified by the Division pursuant to this chapter to comply with the requirements for continuing education adopted by the Board.

3. As used in this section:

(a) "Collaborative practice agreement" has the meaning ascribed to it in NRS 639.0052.

(b) "Exempt laboratory" means a laboratory:

(1) That is licensed pursuant to this chapter and the regulations adopted pursuant thereto;

(2) That does not only perform testing for the human immunodeficiency virus; and

(3) In which each test performed is:

(I) Classified as a waived test pursuant to 42 C.F.R. Part 493, Subpart A; or

(II) Categorized as a provider-performed microscopy procedure pursuant to 42 C.F.R. § 493.19.

Sec. 8. NRS 287.0271 is hereby amended to read as follows:

287.0271 1. The governing body of any county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada that provides health insurance through a plan of self-insurance shall provide coverage for:

(a) Drugs approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus;

(b) Laboratory testing that is necessary for therapy that uses such a drug; and

(c) ~~[The]~~ ***Ordering laboratory testing described in paragraph (b) and the*** services described in NRS 639.28085, when provided by a pharmacist who participates in the network plan of the governing body.

2. The governing body of any county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada that provides health insurance through a plan of self-insurance shall reimburse a pharmacist who participates in the network plan of the governing body for the services described in ~~[NRS 639.28085]~~ ***paragraph (c) of subsection 1*** at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.

3. The governing body of any county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada that provides health insurance through a plan of self-insurance may subject the benefits required by subsection 1 to reasonable medical management techniques.

4. The governing body of any county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada that

provides health insurance through a plan of self-insurance shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the governing body.

5. A plan of self-insurance described in subsection 1 that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the plan that conflicts with the provisions of this section is void.

6. As used in this section:

(a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.

(b) "Network plan" means a plan of self-insurance provided by the governing body of a local governmental agency under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the governing body. The term does not include an arrangement for the financing of premiums.

(c) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

Sec. 9. NRS 422.27235 is hereby amended to read as follows:

422.27235 1. The Director shall include in the State Plan for Medicaid a requirement that the State pay the nonfederal share of expenditures incurred for:

(a) Any laboratory testing that is necessary for therapy that uses a drug approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus.

(b) The ***ordering of a laboratory test described in paragraph (a) by a pharmacist and the*** services of a pharmacist described in NRS 639.28085. The State must provide reimbursement for such services at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.

(c) Any service to test for, prevent or treat human immunodeficiency virus or hepatitis C provided by a provider of primary care if the service is covered when provided by a specialist and:

(1) The service is within the scope of practice of the provider of primary care; or

(2) The provider of primary care is capable of providing the service safely and effectively in consultation with a specialist and the provider engages in such consultation.

2. The Director shall include in the State Plan for Medicaid a requirement that the State reimburse an advanced practice registered nurse or a physician assistant for any service to test for, prevent or treat human immunodeficiency virus or hepatitis C at a rate equal to the rate of reimbursement provided to a physician for similar services.

3. As used in this section, "primary care" means the practice of family medicine, pediatrics, internal medicine, obstetrics and gynecology and midwifery.

Sec. 10. NRS 453.126 is hereby amended to read as follows:

453.126 "Practitioner" means:

1. A physician, dentist, veterinarian or podiatric physician who holds a license to practice his or her profession in this State and is registered pursuant to this chapter.

2. An advanced practice registered nurse who holds a certificate from the State Board of Pharmacy authorizing him or her to dispense or to prescribe and dispense controlled substances.

3. A scientific investigator or a pharmacy, hospital or other institution licensed, registered or otherwise authorized in this State to distribute, dispense, conduct research with respect to, to administer, or use in teaching or chemical analysis, a controlled substance in the course of professional practice or research.

4. A euthanasia technician who is licensed by the Nevada State Board of Veterinary Medical Examiners and registered pursuant to this chapter, while he or she possesses or administers sodium pentobarbital pursuant to his or her license and registration.

5. A physician assistant who:

(a) Holds a license from the Board of Medical Examiners; and

(b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances under the supervision of a physician as required by chapter 630 of NRS.

6. A physician assistant who:

(a) Holds a license from the State Board of Osteopathic Medicine; and

(b) Is authorized by the Board to possess, administer, prescribe or dispense controlled substances under the supervision of an osteopathic physician as required by chapter 633 of NRS.

7. An optometrist who is certified by the Nevada State Board of Optometry to prescribe and administer pharmaceutical agents pursuant to NRS 636.288, when the optometrist prescribes or administers pharmaceutical agents within the scope of his or her certification.

8. A certified registered nurse anesthetist who orders, prescribes, possesses or administers controlled substances in accordance with NRS 632.2397.

9. A pharmacist who ~~[is]~~ ***:***

(a) Is registered pursuant to NRS 639.28079 to prescribe and dispense drugs for medication-assisted treatment ~~[.]~~ ***; or***

(b) Prescribes and dispenses drugs or devices or dispenses refills without the authorization of a practitioner, other than a pharmacist, in accordance with section 1 of this act.

Sec. 11. NRS 453.128 is hereby amended to read as follows:

453.128 1. "Prescription" means:

(a) An order given individually for the person for whom prescribed, directly from a physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, podiatric physician, optometrist, advanced practice registered nurse, certified registered nurse anesthetist, pharmacist registered pursuant to NRS 639.28079 ***or acting in accordance with section 1 of this act*** or veterinarian, or his or her agent, to a pharmacist or indirectly by means of an order signed by the practitioner or an electronic transmission from the practitioner to a pharmacist; or

(b) A chart order written for an inpatient specifying drugs which he or she is to take home upon his or her discharge.

2. The term does not include a chart order written for an inpatient for use while he or she is an inpatient.

Sec. 12. NRS 453.226 is hereby amended to read as follows:

453.226 1. Every practitioner or other person who dispenses any controlled substance within this State or who proposes to engage in the dispensing of any controlled substance within this State shall obtain biennially a registration issued by the Board in accordance with its regulations. A person must present proof that he or she is authorized to access the database of the program established pursuant to NRS 453.162 before the Board may issue or renew a registration.

2. A person registered by the Board in accordance with the provisions of NRS 453.011 to 453.552, inclusive, to dispense or conduct research with controlled substances may possess, dispense or conduct research with those substances to the extent authorized by the registration and in conformity with the other provisions of those sections.

3. The following persons are not required to register and may lawfully possess and distribute controlled substances pursuant to the provisions of NRS 453.011 to 453.552, inclusive:

(a) An agent or employee of a registered dispenser of a controlled substance if he or she is acting in the usual course of his or her business or employment;

(b) A common or contract carrier or warehouseman, or an employee thereof, whose possession of any controlled substance is in the usual course of business or employment;

(c) An ultimate user or a person in possession of any controlled substance pursuant to a lawful order of a physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, advanced practice registered nurse, certified registered nurse anesthetist, podiatric physician,

pharmacist registered pursuant to NRS 639.28079 ***or acting in accordance with section 1 of this act*** or veterinarian or in lawful possession of a schedule V substance; or

(d) A physician who:

(1) Holds a locum tenens license issued by the Board of Medical Examiners or a temporary license issued by the State Board of Osteopathic Medicine; and

(2) Is registered with the Drug Enforcement Administration at a location outside this State.

4. The Board may waive the requirement for registration of certain dispensers if it finds it consistent with the public health and safety.

5. A separate registration is required at each principal place of business or professional practice where the applicant dispenses controlled substances.

6. The Board may inspect the establishment of a registrant or applicant for registration in accordance with the Board's regulations.

Sec. 13. NRS 453.336 is hereby amended to read as follows:

453.336 1. Except as otherwise provided in subsection 6, a person shall not knowingly or intentionally possess a controlled substance, unless the substance was obtained directly from, or pursuant to, a prescription or order of a physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, podiatric physician, optometrist, advanced practice registered nurse, certified registered nurse anesthetist, pharmacist registered pursuant to NRS 639.28079 ***or acting in accordance with section 1 of this act*** or veterinarian while acting in the course of his or her professional practice, or except as otherwise authorized by the provisions of NRS 453.005 to 453.552, inclusive.

2. Except as otherwise provided in subsections 3, 4 and 5 and in NRS 453.3363, and unless a greater penalty is provided in NRS 212.160, 453.3385, 453.3387 or 453.339, a person who violates this section:

(a) For a first or second offense, if the controlled substance is listed in schedule I or II and the quantity possessed is less than 14 grams, or if the controlled substance is listed in schedule III, IV or V and the quantity possessed is less than 28 grams, is guilty of possession of a controlled substance and shall be punished for a category E felony as provided in NRS 193.130. In accordance with NRS 176.211, the court shall defer judgment upon the consent of the person.

(b) For a third or subsequent offense, if the controlled substance is listed in schedule I or II and the quantity possessed is less than 14 grams, or if the controlled substance is listed in schedule III, IV or V and the quantity possessed is less than 28 grams, or if the offender has previously been convicted two or more times in the aggregate of any violation of the law of the United States or of any state, territory or district relating to a controlled substance, is guilty of possession of a controlled substance and shall be punished for a category D felony as provided in NRS 193.130, and may be further punished by a fine of not more than $20,000.

(c) If the controlled substance is listed in schedule I or II and the quantity possessed is 14 grams or more, but less than 28 grams, or if the controlled substance is listed in schedule III, IV or V and the quantity possessed is 28 grams or more, but less than 200 grams, is guilty of low-level possession of a controlled substance and shall be punished for a category C felony as provided in NRS 193.130.

(d) If the controlled substance is listed in schedule I or II and the quantity possessed is 28 grams or more, but less than 42 grams, or if the controlled substance is listed in schedule III, IV or V and the quantity possessed is 200 grams or more, is guilty of mid-level possession of a controlled substance and shall be punished for a category B felony by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 10 years and by a fine of not more than $50,000.

(e) If the controlled substance is listed in schedule I or II and the quantity possessed is 42 grams or more, but less than 100 grams, is guilty of high-level possession of a controlled substance and shall be punished for a category B felony by imprisonment in the state prison for a minimum term of not less than 2 years and a maximum term of not more than 15 years and by a fine of not more than $50,000.

3. Unless a greater penalty is provided in NRS 212.160, 453.337 or 453.3385, a person who is convicted of the possession of flunitrazepam or gamma-hydroxybutyrate, or any substance for which flunitrazepam or gamma-hydroxybutyrate is an immediate precursor, is guilty of a category B felony and shall be punished by imprisonment in the state prison for a minimum term of not less than 1 year and a maximum term of not more than 6 years.

4. Unless a greater penalty is provided pursuant to NRS 212.160, a person who is convicted of the possession of 1 ounce or less of marijuana is guilty of a misdemeanor and shall be punished by:

(a) Performing not more than 24 hours of community service;

(b) Attending the live meeting described in paragraph (a) of subsection 2 of NRS 484C.530 and complying with any other requirements set forth in that section; or

(c) Being required to undergo an evaluation in accordance with subsection 1 of NRS 484C.350,

➥ or any combination thereof.

5. Unless a greater penalty is provided pursuant to NRS 212.160, a person who is convicted of the possession of more than 1 ounce, but less than 50 pounds, of marijuana or more than one-eighth of an ounce, but less than one pound, of concentrated cannabis is guilty of a category E felony and shall be punished as provided in NRS 193.130.

6. It is not a violation of this section if a person possesses a trace amount of a controlled substance and that trace amount is in or on a hypodermic device obtained from a sterile hypodermic device program pursuant to NRS 439.985 to 439.994, inclusive.

7. The court may grant probation to or suspend the sentence of a person convicted of violating this section.

8. If a person fulfills the terms and conditions imposed for a violation of subsection 4, the court shall, without a hearing, order sealed all documents, papers and exhibits in that person's record, minute book entries and entries on dockets, and other documents relating to the case in the custody of such other agencies and officers as are named in the court's order. The court shall cause a copy of the order to be sent to each agency or officer named in the order. Each such agency or officer shall notify the court in writing of its compliance with the order.

9. As used in this section:

(a) "Controlled substance" includes flunitrazepam, gamma-hydroxybutyrate and each substance for which flunitrazepam or gamma-hydroxybutyrate is an immediate precursor.

(b) "Marijuana" does not include concentrated cannabis.

(c) "Sterile hypodermic device program" has the meaning ascribed to it in NRS 439.986.

Sec. 14. NRS 453.375 is hereby amended to read as follows:

453.375 1. A controlled substance may be possessed and administered by the following persons:

(a) A practitioner.

(b) A registered nurse licensed to practice professional nursing or licensed practical nurse, at the direction of a physician, physician assistant, dentist, podiatric physician or advanced practice registered nurse, or pursuant to a chart order, for administration to a patient at another location.

(c) A paramedic:

(1) As authorized by regulation of:

(I) The State Board of Health in a county whose population is less than 100,000; or

(II) A county or district board of health in a county whose population is 100,000 or more; and

(2) In accordance with any applicable regulations of:

(I) The State Board of Health in a county whose population is less than 100,000;

(II) A county board of health in a county whose population is 100,000 or more; or

(III) A district board of health created pursuant to NRS 439.362 or 439.370 in any county.

(d) A respiratory therapist, at the direction of a physician or physician assistant.

(e) An anesthesiologist assistant, at the direction of a supervising anesthesiologist or supervising osteopathic anesthesiologist.

(f) A medical student, student in training to become a physician assistant or anesthesiologist assistant, student nurse in the course of his or her studies at an accredited college of medicine or approved school of professional or practical nursing, at the direction of a physician or physician assistant and:

(1) In the presence of a physician, physician assistant or a registered nurse; or

(2) Under the supervision of a physician, physician assistant or a registered nurse if the student is authorized by the college or school to administer the substance outside the presence of a physician, physician assistant or nurse.

➥ A medical student or student nurse may administer a controlled substance in the presence or under the supervision of a registered nurse alone only if the circumstances are such that the registered nurse would be authorized to administer it personally.

(g) An ultimate user or any person whom the ultimate user designates pursuant to a written agreement.

(h) Any person designated by the head of a correctional institution.

(i) A veterinary technician at the direction of his or her supervising veterinarian.

(j) In accordance with applicable regulations of the State Board of Health, an employee of a residential facility for groups, as defined in NRS 449.017, pursuant to a written agreement entered into by the ultimate user.

(k) In accordance with applicable regulations of the State Board of Pharmacy, an animal control officer, a wildlife biologist or an employee designated by a federal, state or local governmental agency whose duties include the control of domestic, wild and predatory animals.

(l) A person who is enrolled in a training program to become a paramedic, respiratory therapist or veterinary technician if the person possesses and administers the controlled substance in the same manner and under the same conditions that apply, respectively, to a paramedic, respiratory therapist or veterinary technician who may possess and administer the controlled substance, and under the direct supervision of a person licensed or registered to perform the respective medical art or a supervisor of such a person.

(m) A registered pharmacist **.** ~~[pursuant to written guidelines and protocols developed pursuant to NRS 639.2629 or a collaborative practice agreement, as defined in NRS 639.0052.]~~

2. As used in this section:

(a) "Accredited college of medicine" means:

(1) A medical school that is accredited by the Liaison Committee on Medical Education of the American Medical Association and the Association of American Medical Colleges or their successor organizations; or

(2) A school of osteopathic medicine, as defined in NRS 633.121.

(b) "Anesthesiologist assistant" means a person who holds a license issued pursuant to NRS 630.2683 or 633.4254 or a temporary license issued pursuant to NRS 630.2685 or 633.4262.

Sec. 15. NRS 453.381 is hereby amended to read as follows:

453.381 1. In addition to the limitations imposed by NRS 453.256 and 453.3611 to 453.3648, inclusive, a physician, physician assistant, dentist, advanced practice registered nurse, certified registered nurse anesthetist, podiatric physician or pharmacist registered pursuant to NRS 639.28079 ***or acting in accordance with section 1 of this act*** may prescribe or administer controlled substances only for a legitimate medical purpose and in the usual course of his or her professional practice, and he or she shall not prescribe, administer or dispense a controlled substance listed in schedule II for himself or herself, his or her spouse or his or her children except in cases of emergency.

2. A veterinarian, in the course of his or her professional practice only, and not for use by a human being, may prescribe, possess and administer controlled substances, and the veterinarian may cause them to be administered by a veterinary technician under the direction and supervision of the veterinarian.

3. A euthanasia technician, within the scope of his or her license, and not for use by a human being, may possess and administer sodium pentobarbital.

4. A pharmacist shall not fill an order which purports to be a prescription if the pharmacist has reason to believe that it was not issued in the usual course of the professional practice of a physician, physician assistant, dentist, advanced practice registered nurse, certified registered nurse anesthetist, podiatric physician, pharmacist registered pursuant to NRS 639.28079 ***or acting in accordance with section 1 of this act*** or veterinarian.

5. Any person who has obtained from a physician, physician assistant, dentist, advanced practice registered nurse, certified registered nurse anesthetist, podiatric physician, pharmacist

registered pursuant to NRS 639.28079 ***or acting in accordance with section 1 of this act*** or veterinarian any controlled substance for administration to a patient during the absence of the physician, physician assistant, dentist, advanced practice registered nurse, certified registered nurse anesthetist, podiatric physician, pharmacist or veterinarian shall return to him or her any unused portion of the substance when it is no longer required by the patient.

6. A manufacturer, wholesale supplier or other person legally able to furnish or sell any controlled substance listed in schedule II shall not provide samples of such a controlled substance to registrants.

7. A salesperson of any manufacturer or wholesaler of pharmaceuticals shall not possess, transport or furnish any controlled substance listed in schedule II.

8. A person shall not dispense a controlled substance in violation of a regulation adopted by the Board.

Sec. 16. NRS 454.00958 is hereby amended to read as follows:

454.00958 "Practitioner" means:

1. A physician, dentist, veterinarian or podiatric physician who holds a valid license to practice his or her profession in this State.

2. A pharmacy, hospital or other institution licensed or registered to distribute, dispense, conduct research with respect to or to administer a dangerous drug in the course of professional practice in this State.

3. When relating to the prescription of poisons, dangerous drugs and devices:

(a) An advanced practice registered nurse who holds a certificate from the State Board of Pharmacy permitting him or her so to prescribe; or

(b) A physician assistant who holds a license from the Board of Medical Examiners or the State Board of Osteopathic Medicine and a certificate from the State Board of Pharmacy permitting him or her so to prescribe.

4. An optometrist who is certified to prescribe and administer pharmaceutical agents pursuant to NRS 636.288 when the optometrist prescribes or administers dangerous drugs which are within the scope of his or her certification.

5. A dental hygienist who holds a valid license to practice dental hygiene in this State and:

(a) Is authorized to prescribe and dispense the dangerous drugs listed in NRS 631.3105 in accordance with the provisions of that section and the regulations adopted pursuant thereto; and

(b) Holds a certificate issued by the State Board of Pharmacy pursuant to NRS 639.1374 authorizing him or her to so prescribe.

6. A certified registered nurse anesthetist who orders, prescribes, possesses or administers poisons, dangerous drugs or devices in accordance with NRS 632.2397.

7. A pharmacist who ~~[is]~~ ***:***

(a) Is registered pursuant to NRS 639.28079 to prescribe and dispense drugs for medication-assisted treatment ~~[.]~~ ***; or***

(b) Prescribes and dispenses drugs or devices or dispenses refills without the authorization of a practitioner, other than a pharmacist, in accordance with section 1 of this act.

Sec. 17. NRS 454.213 is hereby amended to read as follows:

454.213 1. Except as otherwise provided in NRS 454.217, a drug or medicine referred to in NRS 454.181 to 454.371, inclusive, may be possessed and administered by:

(a) A practitioner.

(b) A physician assistant licensed pursuant to chapter 630 or 633 of NRS or an anesthesiologist assistant, at the direction of his or her supervising physician or supervising anesthesiologist or supervising osteopathic anesthesiologist, as applicable, or a licensed dental hygienist or expanded function dental assistant acting in the office of and under the supervision of a dentist.

(c) Except as otherwise provided in paragraph (d), a registered nurse licensed to practice professional nursing or licensed practical nurse, at the direction of a prescribing physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, podiatric physician or advanced practice registered nurse, or pursuant to a chart order, for administration to a patient at another location.

(d) In accordance with applicable regulations of the Board, a registered nurse licensed to practice professional nursing or licensed practical nurse who is:

(1) Employed by a health care agency or health care facility that is authorized to provide emergency care, or to respond to the immediate needs of a patient, in the residence of the patient; and

(2) Acting under the direction of the medical director of that agency or facility who works in this State.

(e) A medication aide - certified at a designated facility under the supervision of an advanced practice registered nurse or registered nurse and in accordance with standard protocols developed

by the State Board of Nursing. As used in this paragraph, "designated facility" has the meaning ascribed to it in NRS 632.0145.

(f) Except as otherwise provided in paragraph (g), an advanced emergency medical technician or a paramedic, as authorized by regulation of the State Board of Pharmacy and in accordance with any applicable regulations of:

(1) The State Board of Health in a county whose population is less than 100,000;

(2) A county board of health in a county whose population is 100,000 or more; or

(3) A district board of health created pursuant to NRS 439.362 or 439.370 in any county.

(g) An advanced emergency medical technician or a paramedic who holds an endorsement issued pursuant to NRS 450B.1975, under the direct supervision of a local health officer or a designee of the local health officer pursuant to that section.

(h) A respiratory therapist employed in a health care facility. The therapist may possess and administer respiratory products only at the direction of a physician.

(i) A dialysis technician, under the direction or supervision of a physician or registered nurse only if the drug or medicine is used for the process of renal dialysis.

(j) A medical student or student nurse in the course of his or her studies at an accredited college of medicine or approved school of professional or practical nursing, at the direction of a physician and:

(1) In the presence of a physician or a registered nurse; or

(2) Under the supervision of a physician or a registered nurse if the student is authorized by the college or school to administer the drug or medicine outside the presence of a physician or nurse.

➥ A medical student or student nurse may administer a dangerous drug in the presence or under the supervision of a registered nurse alone only if the circumstances are such that the registered nurse would be authorized to administer it personally.

(k) Any person designated by the head of a correctional institution.

(l) An ultimate user or any person designated by the ultimate user pursuant to a written agreement.

(m) A holder of a license to engage in radiation therapy and radiologic imaging issued pursuant to chapter 653 of NRS, at the direction of a physician and in accordance with any conditions established by regulation of the Board.

(n) A chiropractic physician, but only if the drug or medicine is a topical drug used for cooling and stretching external tissue during therapeutic treatments.

(o) A physical therapist, but only if the drug or medicine is a topical drug which is:

(1) Used for cooling and stretching external tissue during therapeutic treatments; and

(2) Prescribed by a licensed physician for:

(I) Iontophoresis; or

(II) The transmission of drugs through the skin using ultrasound.

(p) In accordance with applicable regulations of the State Board of Health, an employee of a residential facility for groups, as defined in NRS 449.017, pursuant to a written agreement entered into by the ultimate user.

(q) A veterinary technician or a veterinary assistant at the direction of his or her supervising veterinarian.

(r) ~~[In accordance with applicable regulations of the Board, a registered pharmacist who:~~

~~(1) Is trained in and certified to carry out standards and practices for immunization programs;~~

~~(2) Is authorized to administer immunizations pursuant to written protocols from a physician; and~~

~~(3) Administers immunizations in compliance with:~~

~~(I) Except where modified by the State Board of Health pursuant to sub-subparagraph (III), the version of "Standards for Immunization Practices" recommended by the National Vaccine Advisory Committee of the United States Department of Health and Human Services that was in effect on January 1, 2025;~~

~~(II) Except where modified by the State Board of Health pursuant to sub-subparagraph (III), the recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention in effect on January 1, 2025; and~~

~~(III) Any modifications to the standards and recommendations listed in sub-subparagraphs (I) and (II) or any additional standards or recommendations as the State Board of Health may prescribe pursuant to subsection 2.~~

~~(s)]~~ A registered pharmacist **.** ~~[pursuant to written guidelines and protocols developed pursuant to NRS 639.2629 or a collaborative practice agreement, as defined in NRS 639.0052.~~

~~(t)]~~ ***(s)*** A person who is enrolled in a training program to become a physician assistant or anesthesiologist assistant licensed pursuant to chapter 630 or 633 of NRS, dental hygienist, advanced emergency medical technician, paramedic, respiratory therapist, dialysis technician, physical therapist or veterinary technician or to obtain a license to engage in radiation therapy and radiologic imaging pursuant to chapter 653 of NRS if the person possesses and administers the drug or medicine in the same manner and under the same conditions that apply, respectively, to a physician assistant or anesthesiologist assistant licensed pursuant to chapter 630 or 633 of NRS, dental hygienist, advanced emergency medical technician, paramedic, respiratory therapist, dialysis technician, physical therapist, veterinary technician or person licensed to engage in radiation therapy and radiologic imaging who may possess and administer the drug or medicine, and under the direct supervision of a person licensed or registered to perform the respective medical art or a supervisor of such a person.

~~[(u)]~~ ***(t)*** A medical assistant, in accordance with applicable regulations of the:

(1) Board of Medical Examiners, at the direction of the prescribing physician and under the supervision of a physician or physician assistant.

(2) State Board of Osteopathic Medicine, at the direction of the prescribing physician and under the supervision of a physician or physician assistant.

2. ~~[The State Board of Health may, by regulation, modify any standard or recommendation described in subparagraph (3) of paragraph (r) of subsection 1 or adopt such additional standards~~

~~and recommendations for the administration of immunizations by registered pharmacists as the Board deems necessary.~~

~~3.]~~ As used in this section, "accredited college of medicine" has the meaning ascribed to it in NRS 453.375.

Sec. 18. NRS 689A.0437 is hereby amended to read as follows:

689A.0437 1. An insurer that offers or issues a policy of health insurance shall include in the policy coverage for:

(a) All drugs approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus or treating human immunodeficiency virus or hepatitis C in the form recommended by the prescribing practitioner, regardless of whether the drug is included in the formulary of the insurer;

(b) Laboratory testing that is necessary for therapy that uses a drug to prevent the acquisition of human immunodeficiency virus;

(c) Any service to test for, prevent or treat human immunodeficiency virus or hepatitis C provided by a provider of primary care if the service is covered when provided by a specialist and:

(1) The service is within the scope of practice of the provider of primary care; or

(2) The provider of primary care is capable of providing the service safely and effectively in consultation with a specialist and the provider engages in such consultation; and

(d) ~~[The]~~ ***Ordering laboratory testing described in paragraph (b) and the*** services described in NRS 639.28085, when provided by a pharmacist who participates in the network plan of the insurer.

2. An insurer that offers or issues a policy of health insurance shall reimburse:

(a) A pharmacist who participates in the network plan of the insurer for the services described in ~~[~~NRS 639.28085~~]~~ ***paragraph (d) of subsection 1*** at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.

(b) An advanced practice registered nurse or a physician assistant who participates in the network plan of the insurer for any service to test for, prevent or treat human immunodeficiency virus or hepatitis C at a rate equal to the rate of reimbursement provided to a physician for similar services.

3. An insurer shall not:

(a) Subject the benefits required by subsection 1 to medical management techniques, other than step therapy;

(b) Limit the covered amount of a drug described in paragraph (a) of subsection 1;

(c) Refuse to cover a drug described in paragraph (a) of subsection 1 because the drug is dispensed by a pharmacy through mail order service; or

(d) Prohibit or restrict access to any service or drug to treat human immunodeficiency virus or hepatitis C on the same day on which the insured is diagnosed.

4. An insurer shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the insurer.

5. A policy of health insurance subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage

required by subsection 1, and any provision of the policy that conflicts with the provisions of this section is void.

6. As used in this section:

(a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.

(b) "Network plan" means a policy of health insurance offered by an insurer under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the insurer. The term does not include an arrangement for the financing of premiums.

(c) "Primary care" means the practice of family medicine, pediatrics, internal medicine, obstetrics and gynecology and midwifery.

(d) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

Sec. 19. NRS 689B.0312 is hereby amended to read as follows:

689B.0312 1. An insurer that offers or issues a policy of group health insurance shall include in the policy coverage for:

(a) All drugs approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus or treating human immunodeficiency virus or hepatitis C in the form recommended by the prescribing practitioner, regardless of whether the drug is included in the formulary of the insurer;

(b) Laboratory testing that is necessary for therapy that uses a drug to prevent the acquisition of human immunodeficiency virus;

(c) Any service to test for, prevent or treat human immunodeficiency virus or hepatitis C provided by a provider of primary care if the service is covered when provided by a specialist and:

(1) The service is within the scope of practice of the provider of primary care; or

(2) The provider of primary care is capable of providing the service safely and effectively in consultation with a specialist and the provider engages in such consultation; and

(d) ~~[The]~~ ***Ordering laboratory testing described in paragraph (b) and the*** services described in NRS 639.28085, when provided by a pharmacist who participates in the network plan of the insurer.

2. An insurer that offers or issues a policy of group health insurance shall reimburse:

(a) A pharmacist who participates in the network plan of the insurer for the services described in ~~[NRS 639.28085]~~ ***paragraph (d) of subsection 1*** at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.

(b) An advanced practice registered nurse or a physician assistant who participates in the network plan of the insurer for any service to test for, prevent or treat human immunodeficiency virus or hepatitis C at a rate equal to the rate of reimbursement provided to a physician for similar services.

3. An insurer shall not:

(a) Subject the benefits required by subsection 1 to medical management techniques, other than step therapy;

(b) Limit the covered amount of a drug described in paragraph (a) of subsection 1;

(c) Refuse to cover a drug described in paragraph (a) of subsection 1 because the drug is dispensed by a pharmacy through mail order service; or

(d) Prohibit or restrict access to any service or drug to treat human immunodeficiency virus or hepatitis C on the same day on which the insured is diagnosed.

4. An insurer shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the insurer.

5. A policy of group health insurance subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the policy that conflicts with the provisions of this section is void.

6. As used in this section:

(a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.

(b) "Network plan" means a policy of group health insurance offered by an insurer under which the financing and delivery of medical care, including items and services paid for as medical care,

are provided, in whole or in part, through a defined set of providers under contract with the insurer. The term does not include an arrangement for the financing of premiums.

(c) "Primary care" means the practice of family medicine, pediatrics, internal medicine, obstetrics and gynecology and midwifery.

(d) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

Sec. 20. NRS 689C.1671 is hereby amended to read as follows:

689C.1671 1. A carrier that offers or issues a health benefit plan shall include in the plan coverage for:

(a) All drugs approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus or treating human immunodeficiency virus or hepatitis C in the form recommended by the prescribing practitioner, regardless of whether the drug is included in the formulary of the carrier;

(b) Laboratory testing that is necessary for therapy that uses a drug to prevent the acquisition of human immunodeficiency virus;

(c) Any service to test for, prevent or treat human immunodeficiency virus or hepatitis C provided by a provider of primary care if the service is covered when provided by a specialist and:

(1) The service is within the scope of practice of the provider of primary care; or

(2) The provider of primary care is capable of providing the service safely and effectively in consultation with a specialist and the provider engages in such consultation; and

(d) ~~[The]~~ ***Ordering laboratory testing described in paragraph (b) and the*** services described in NRS 639.28085, when provided by a pharmacist who participates in the health benefit plan of the carrier.

2. A carrier that offers or issues a health benefit plan shall reimburse:

(a) A pharmacist who participates in the health benefit plan of the carrier for the services described in ~~[NRS 639.28085]~~ ***paragraph (d) of subsection 1*** at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.

(b) An advanced practice registered nurse or a physician assistant who participates in the network plan of the carrier for any service to test for, prevent or treat human immunodeficiency virus or hepatitis C at a rate equal to the rate of reimbursement provided to a physician for similar services.

3. A carrier shall not:

(a) Subject the benefits required by subsection 1 to medical management techniques, other than step therapy;

(b) Limit the covered amount of a drug described in paragraph (a) of subsection 1;

(c) Refuse to cover a drug described in paragraph (a) of subsection 1 because the drug is dispensed by a pharmacy through mail order service; or

(d) Prohibit or restrict access to any service or drug to treat human immunodeficiency virus or hepatitis C on the same day on which the insured is diagnosed.

4. A carrier shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the carrier.

5. A health benefit plan subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the plan that conflicts with the provisions of this section is void.

6. As used in this section:

(a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.

(b) "Network plan" means a health benefit plan offered by a carrier under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the carrier. The term does not include an arrangement for the financing of premiums.

(c) "Primary care" means the practice of family medicine, pediatrics, internal medicine, obstetrics and gynecology and midwifery.

(d) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

Sec. 21. NRS 695A.1843 is hereby amended to read as follows:

695A.1843 1. A society that offers or issues a benefit contract shall include in the benefit coverage for:

(a) All drugs approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus or treating human immunodeficiency virus or hepatitis C in the form recommended by the prescribing practitioner, regardless of whether the drug is included in the formulary of the society;

(b) Laboratory testing that is necessary for therapy that uses a drug to prevent the acquisition of human immunodeficiency virus;

(c) Any service to test for, prevent or treat human immunodeficiency virus or hepatitis C provided by a provider of primary care if the service is covered when provided by a specialist and:

(1) The service is within the scope of practice of the provider of primary care; or

(2) The provider of primary care is capable of providing the service safely and effectively in consultation with a specialist and the provider engages in such consultation; and

(d) ~~[The]~~ ***Ordering laboratory testing described in paragraph (b) and the*** services described in NRS 639.28085, when provided by a pharmacist who participates in the network plan of the society.

2. A society that offers or issues a benefit contract shall reimburse:

(a) A pharmacist who participates in the network plan of the society for the services described in ~~[NRS 639.28085]~~ ***paragraph (d) of subsection 1*** at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.

(b) An advanced practice registered nurse or a physician assistant who participates in the network plan of the society for any service to test for, prevent or treat human immunodeficiency

virus or hepatitis C at a rate equal to the rate of reimbursement provided to a physician for similar services.

3. A society shall not:

(a) Subject the benefits required by subsection 1 to medical management techniques, other than step therapy;

(b) Limit the covered amount of a drug described in paragraph (a) of subsection 1;

(c) Refuse to cover a drug described in paragraph (a) of subsection 1 because the drug is dispensed by a pharmacy through mail order service; or

(d) Prohibit or restrict access to any service or drug to treat human immunodeficiency virus or hepatitis C on the same day on which the insured is diagnosed.

4. A society shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the society.

5. A benefit contract subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the plan that conflicts with the provisions of this section is void.

6. As used in this section:

(a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.

(b) "Network plan" means a benefit contract offered by a society under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the society. The term does not include an arrangement for the financing of premiums.

(c) "Primary care" means the practice of family medicine, pediatrics, internal medicine, obstetrics and gynecology and midwifery.

(d) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

Sec. 22. NRS 695B.1924 is hereby amended to read as follows:

695B.1924 1. A hospital or medical services corporation that offers or issues a policy of health insurance shall include in the policy coverage for:

(a) All drugs approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus or treating human immunodeficiency virus or hepatitis C in the form recommended by the prescribing practitioner, regardless of whether the drug is included in the formulary of the hospital or medical services organization;

(b) Laboratory testing that is necessary for therapy using a drug to prevent the acquisition of human immunodeficiency virus;

(c) Any service to test for, prevent or treat human immunodeficiency virus or hepatitis C provided by a provider of primary care if the service is covered when provided by a specialist and:

(1) The service is within the scope of practice of the provider of primary care; or

(2) The provider of primary care is capable of providing the service safely and effectively in consultation with a specialist and the provider engages in such consultation; and

(d) ~~[The]~~ ***Ordering laboratory testing described in paragraph (b) and the*** services described in NRS 639.28085, when provided by a pharmacist who participates in the network plan of the hospital or medical services corporation.

2. A hospital or medical services corporation that offers or issues a policy of health insurance shall reimburse:

(a) A pharmacist who participates in the network plan of the hospital or medical services corporation for the services described in ~~[NRS 639.28085]~~ ***paragraph (d) of subsection 1*** at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.

(b) An advanced practice registered nurse or a physician assistant who participates in the network plan of the hospital or medical services corporation for any service to test for, prevent or treat human immunodeficiency virus or hepatitis C at a rate equal to the rate of reimbursement provided to a physician for similar services.

3. A hospital or medical services corporation shall not:

(a) Subject the benefits required by subsection 1 to medical management techniques, other than step therapy;

(b) Limit the covered amount of a drug described in paragraph (a) of subsection 1;

(c) Refuse to cover a drug described in paragraph (a) of subsection 1 because the drug is dispensed by a pharmacy through mail order service; or

(d) Prohibit or restrict access to any service or drug to treat human immunodeficiency virus or hepatitis C on the same day on which the insured is diagnosed.

4. A hospital or medical services corporation shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the hospital or medical services corporation.

5. A policy of health insurance subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the policy that conflicts with the provisions of this section is void.

6. As used in this section:

(a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.

(b) "Network plan" means a policy of health insurance offered by a hospital or medical services corporation under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the hospital or medical services corporation. The term does not include an arrangement for the financing of premiums.

(c) "Primary care" means the practice of family medicine, pediatrics, internal medicine, obstetrics and gynecology and midwifery.

(d) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

Sec. 23. NRS 695C.1743 is hereby amended to read as follows:

695C.1743 1. A health maintenance organization that offers or issues a health care plan shall include in the plan coverage for:

(a) All drugs approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus or treating human immunodeficiency virus or hepatitis C in the form recommended by the prescribing practitioner, regardless of whether the drug is included in the formulary of the health maintenance organization;

(b) Laboratory testing that is necessary for therapy that uses a drug to prevent the acquisition of human immunodeficiency virus;

(c) Any service to test for, prevent or treat human immunodeficiency virus or hepatitis C provided by a provider of primary care if the service is covered when provided by a specialist and:

(1) The service is within the scope of practice of the provider of primary care; or

(2) The provider of primary care is capable of providing the service safely and effectively in consultation with a specialist and the provider engages in such consultation; and

(d) ~~[The]~~ ***Ordering laboratory testing described in paragraph (b) and the*** services described in NRS 639.28085, when provided by a pharmacist who participates in the network plan of the health maintenance organization.

2. A health maintenance organization that offers or issues a health care plan shall reimburse:

(a) A pharmacist who participates in the network plan of the health maintenance organization for the services described in ~~[NRS 639.28085]~~ ***paragraph (d) of subsection 1*** at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.

(b) An advanced practice registered nurse or a physician assistant who participates in the network plan of the health maintenance organization for any service to test for, prevent or treat human immunodeficiency virus or hepatitis C at a rate equal to the rate of reimbursement provided to a physician for similar services.

3. A health maintenance organization shall not:

(a) Subject the benefits required by subsection 1 to medical management techniques, other than step therapy;

(b) Limit the covered amount of a drug described in paragraph (a) of subsection 1;

(c) Refuse to cover a drug described in paragraph (a) of subsection 1 because the drug is dispensed by a pharmacy through mail order service; or

(d) Prohibit or restrict access to any service or drug to treat human immunodeficiency virus or hepatitis C on the same day on which the enrollee is diagnosed.

4. A health maintenance organization shall ensure that the benefits required by subsection 1 are made available to an enrollee through a provider of health care who participates in the network plan of the health maintenance organization.

5. A health care plan subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the plan that conflicts with the provisions of this section is void.

6. As used in this section:

(a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.

(b) "Network plan" means a health care plan offered by a health maintenance organization under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the health maintenance organization. The term does not include an arrangement for the financing of premiums.

(c) "Primary care" means the practice of family medicine, pediatrics, internal medicine, obstetrics and gynecology and midwifery.

(d) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

Sec. 24. NRS 695G.1705 is hereby amended to read as follows:

695G.1705 1. A managed care organization that offers or issues a health care plan shall include in the plan coverage for:

(a) All drugs approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus or treating human immunodeficiency virus or hepatitis C in the form recommended by the prescribing practitioner, regardless of whether the drug is included in the formulary of the managed care organization;

(b) Laboratory testing that is necessary for therapy that uses a drug to prevent the acquisition of human immunodeficiency virus;

(c) Any service to test for, prevent or treat human immunodeficiency virus or hepatitis C provided by a provider of primary care if the service is covered when provided by a specialist and:

(1) The service is within the scope of practice of the provider of primary care; or

(2) The provider of primary care is capable of providing the service safely and effectively in consultation with a specialist and the provider engages in such consultation; and

(d) ~~[The]~~ ***Ordering laboratory testing described in paragraph (b) and the*** services described in NRS 639.28085, when provided by a pharmacist who participates in the network plan of the managed care organization.

2. A managed care organization that offers or issues a health care plan shall reimburse:

(a) A pharmacist who participates in the network plan of the managed care organization for the services described in ~~[NRS 639.28085]~~ ***paragraph (d) of subsection 1*** at a rate equal to the rate of reimbursement provided to a physician, physician assistant or advanced practice registered nurse for similar services.

(b) An advanced practice registered nurse or a physician assistant who participates in the network plan of the managed care organization for any service to test for, prevent or treat human immunodeficiency virus or hepatitis C at a rate equal to the rate of reimbursement provided to a physician for similar services.

3. A managed care organization shall not:

(a) Subject the benefits required by subsection 1 to medical management techniques, other than step therapy;

(b) Limit the covered amount of a drug described in paragraph (a) of subsection 1;

(c) Refuse to cover a drug described in paragraph (a) of subsection 1 because the drug is dispensed by a pharmacy through mail order service; or

(d) Prohibit or restrict access to any service or drug to treat human immunodeficiency virus or hepatitis C on the same day on which the insured is diagnosed.

4. A managed care organization shall ensure that the benefits required by subsection 1 are made available to an insured through a provider of health care who participates in the network plan of the managed care organization.

5. A health care plan subject to the provisions of this chapter that is delivered, issued for delivery or renewed on or after January 1, 2024, has the legal effect of including the coverage required by subsection 1, and any provision of the plan that conflicts with the provisions of this section is void.

6. As used in this section:

(a) "Medical management technique" means a practice which is used to control the cost or use of health care services or prescription drugs. The term includes, without limitation, the use of step therapy, prior authorization and categorizing drugs and devices based on cost, type or method of administration.

(b) "Network plan" means a health care plan offered by a managed care organization under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, through a defined set of providers under contract with the managed care organization. The term does not include an arrangement for the financing of premiums.

(c) "Primary care" means the practice of family medicine, pediatrics, internal medicine, obstetrics and gynecology and midwifery.

(d) "Provider of health care" has the meaning ascribed to it in NRS 629.031.

Sec. 25. 1. This section becomes effective upon passage and approval.

2. Sections 1 to 24, inclusive, of this act become effective:

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

(b) On January 1, 2028, for all other purposes.