

SENATE BILL NO. 299—SENATOR HARDY

MARCH 16, 2015

Referred to Committee on Commerce, Labor and Energy

SUMMARY—Revises provisions relating to providers of health care and insurance coverage for health care services. (BDR 54-238)

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

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

AN ACT relating to public health; requiring a provider of health care who provides services to certain patients through telehealth to have a valid license or certificate in this State; making persons who provide services through telehealth to certain patients subject to the laws and jurisdiction of this State; ratifying and enacting the Psychology Interjurisdictional Compact; requiring certain insurers to provide coverage to insureds for services provided through telehealth to the same extent as though provided in person; authorizing a hospital to provide staff privileges to certain providers of health care to provide services through telehealth; requiring the Commissioner of Insurance to consider health care services that may be provided by providers through telehealth when evaluating certain network plans; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

1 Existing law authorizes certain providers of health care to provide certain
2 health care services electronically, telephonically or by fiber optics. (NRS 630.020,
3 630.261, 630.275, 632.237, 633.165, 639.0727, 639.235) **Section 3** of this bill
4 defines “telehealth” as the delivery of health care services from a provider of health
5 care to a patient at a different location through the use of technology that transfers
6 information electronically, telephonically or by fiber optics, not including standard
7 telephone, facsimile or electronic mail. **Section 3** also prohibits a provider of health
8 care, except for a psychologist practicing as authorized in the Psychology
9 Interjurisdictional Compact, from providing services through telehealth to a patient



10 located in this State without a valid license or certificate to practice his or her
11 profession in this State. Finally, **section 3** provides that any person who provides
12 health care services through telehealth to a patient located in this State is subject to
13 the laws and jurisdiction of this State. **Sections 6-18** of this bill clarify that certain
14 provisions regulating the provision of health care services electronically,
15 telephonically or by fiber optics apply to health care services provided through
16 telehealth. **Section 46** of this bill repeals certain requirements of existing law
17 concerning the use of telemedicine by an osteopathic physician because it is
18 addressed by **sections 3, 10 and 11** of this bill.

19 Existing federal regulations allow the governing body of a hospital at which
20 patients receive services through telemedicine to have its medical staff rely upon
21 the credentialing and privileging decisions made by the staff of a facility from
22 which services are provided when deciding whether to extend staff privileges to a
23 provider of health care who provides services through telemedicine from that
24 facility. (42 C.F.R. §§ 482.12, 482.22, 485.616) **Section 24** of this bill authorizes a
25 hospital to grant staff privileges to a provider of health care who is at another
26 location so that the provider may provide services through telehealth to patients at
27 the hospital as prescribed in federal regulations.

28 **Sections 29, 31-34, 38-41 and 43-45** of this bill require any policy of health
29 insurance, a policy of industrial insurance that provides benefits for injuries and the
30 State Plan for Medicaid to include coverage for health care services provided to a
31 covered person through telehealth to the same extent and in the same amount as
32 though provided in person.

33 The Psychology Interjurisdictional Compact of the Association of State and
34 Provincial Psychology Boards is an interstate compact that allows a person who is
35 licensed as a psychologist in a state that is a member of the Compact to provide
36 services to patients in other states that are members of the Compact through
37 telehealth or in person under certain conditions. Before providing such services, the
38 Compact requires a psychologist to: (1) have a graduate degree in psychology from
39 an accredited institution; (2) possess a full, unrestricted license to practice
40 psychology in at least one state that is a member of the Compact; (3) have no
41 history of disciplinary action or convictions of certain crimes; (4) make attestations
42 and allow the governing body of the Compact, known as the Psychology
43 Interjurisdictional Compact Commission, to access information concerning
44 intended practice, criminal background and knowledge of requirements in all states
45 in which he or she intends to practice; (5) possess a valid certificate to practice
46 either through telehealth, called an E.Passport, or in person, called an IPC
47 Certificate, under the Compact; and (6) meet any other requirements of the
48 Commission. The Compact only authorizes a psychologist to provide services in
49 person in a state in which the psychologist is not licensed on a temporary basis, as
50 defined by the Commission, and the psychologist is still required to obtain a license
51 to engage in such practice over the long term. Psychologists who provide services
52 in states other than those in which they are licensed under the Compact are subject
53 to the jurisdiction of the state in which they provide services, and such a state can
54 revoke the authorization to practice in those states. The Compact requires the
55 Commission to provide for the development and maintenance of a database
56 containing information on each psychologist licensed in a state that is a member of
57 the Compact and disciplinary action taken against such psychologists. The
58 Commission is authorized to: (1) collect an annual assessment from each state that
59 is a member of the Compact to fund the operations of the Commission; (2) make
60 rules concerning the administration of the Compact and practice of psychology
61 across state lines under the Compact; and (3) resolve disputes among states that are
62 members of the Compact related to the Compact. **Section 19** of this bill ratifies and
63 adopts the Compact. **Section 20** of this bill exempts a psychologist who is not
64 licensed in this State and practicing as authorized in the Compact from a



65 prohibition on representing oneself as a psychologist or practicing psychology
66 without a license issued by the Board of Psychological Examiners. The Compact
67 becomes effective upon ratification by seven states. Currently, no state has ratified
68 the Compact.

69 Existing law requires the Commissioner of Insurance to make certain
70 determinations concerning the adequacy of a network plan that an insurer proposes
71 to offer and approve the network plan before the network plan is issued. Existing
72 law also requires the Commissioner to make an annual determination concerning
73 the availability and accessibility of the health care services of any existing network
74 plan. (NRS 687B.490) **Section 30** of this bill requires the Commissioner to
75 consider health care services that may be provided by providers through telehealth
76 pursuant to the network plan when making such a determination.

1 WHEREAS, Shortages of primary providers of health care and
2 providers of health care who specialize in certain areas and the
3 distances some people must travel to reach a provider of health care
4 affects the ability of many people to obtain the health care services
5 they need; and

6 WHEREAS, Parts of this State have experienced difficulty
7 attracting and retaining providers of health care and supporting
8 health care facilities that provide the necessary variety of health care
9 services to persons; and

10 WHEREAS, Providers of health care located in underserved areas
11 may not have access to mentors and colleagues to support them
12 personally and professionally or information resources that may
13 assist them in their practices; and

14 WHEREAS, Telehealth is a mode of delivering health care and
15 public health services using information and communication
16 technology to enable diagnosis, consultation, treatment, care
17 management and provision of information to patients from providers
18 of health care at other locations; and

19 WHEREAS, Telehealth may help to address the problem of an
20 inadequate distribution of providers of health care and develop
21 health care systems in underserved areas of the State; and

22 WHEREAS, Telehealth can reduce the costs of providing health
23 care and increase the quality of and access to health care in
24 underserved areas of the State; and

25 WHEREAS, Telehealth provides economic benefits to
26 underserved areas by reducing the need for persons to leave those
27 areas to obtain health care services and preserving and creating jobs
28 relating to the provision of health care in those areas; and

29 WHEREAS, Patients receive many benefits from telehealth,
30 including increased access to providers of health care, the ability to
31 receive health care services in a faster and more convenient manner,
32 increased continuity of care, reduction of lost work time and travel



1 costs and the ability to remain near family and friends while
2 receiving health care services; and

3 WHEREAS, Without the assurance that providers of health care
4 will be reimbursed by insurers for services provided through
5 telehealth and the resolution of other legal barriers to the provision
6 of services through telehealth, the full benefits of telehealth cannot
7 be realized; now, therefore,

8
9 THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN
10 SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

11
12 **Section 1.** Chapter 629 of NRS is hereby amended by adding
13 thereto the provisions set forth as sections 2 and 3 of this act.

14 **Sec. 2.** *The Legislature hereby finds and declares that:*

15 *1. Health care services provided through telehealth are often*
16 *as effective as health care services provided in person;*

17 *2. The provision of services through telehealth does not*
18 *detract from, and often improves, the quality of health care*
19 *provided to patients and the relationship between patients and*
20 *providers of health care; and*

21 *3. It is the public policy of this State to:*

22 *(a) Encourage and facilitate the provision of services through*
23 *telehealth to improve public health and the quality of health care*
24 *provided to patients and to lower the cost of health care in this*
25 *State; and*

26 *(b) Ensure that services provided through telehealth are*
27 *covered by policies of insurance to the same extent and in the*
28 *same amount as though provided in person or by other means.*

29 **Sec. 3.** *1. Except as authorized by the Psychology*
30 *Interjurisdictional Compact ratified and enacted in section 19 of*
31 *this act, before a provider of health care may provide services*
32 *through telehealth to a patient located in this State, the provider*
33 *must hold a valid license or certificate to practice his or her*
34 *profession in this State, including, without limitation, a special*
35 *purpose license issued pursuant to NRS 630.261.*

36 *2. The provisions of this section must not be interpreted or*
37 *construed to:*

38 *(a) Modify, expand or alter the scope of practice of a provider*
39 *of health care; or*

40 *(b) Authorize a provider of health care to provide services in a*
41 *setting that is not authorized by law or in a manner that violates*
42 *the standard of care required of the provider of health care.*

43 *3. A provider of health care who provides services through*
44 *telehealth to a patient located in this State at the time the services*
45 *are provided is subject to the laws and jurisdiction of this State,*



1 *regardless of the location from which the provider of health care*
2 *provides services through telehealth.*

3 *4. As used in this section, "telehealth" means the delivery of*
4 *services from a provider of health care to a patient at a different*
5 *location through the use of technology that transfers information*
6 *electronically, telephonically or by fiber optics, not including*
7 *standard telephone, facsimile or electronic mail.*

8 **Sec. 4.** Chapter 630 of NRS is hereby amended by adding
9 thereto a new section to read as follows:

10 *"Telehealth" has the meaning ascribed to it in section 3 of this*
11 *act.*

12 **Sec. 5.** NRS 630.005 is hereby amended to read as follows:

13 630.005 As used in this chapter, unless the context otherwise
14 requires, the words and terms defined in NRS 630.007 to 630.026,
15 inclusive, *and section 4 of this act* have the meanings ascribed to
16 them in those sections.

17 **Sec. 6.** NRS 630.020 is hereby amended to read as follows:

18 630.020 "Practice of medicine" means:

19 1. To diagnose, treat, correct, prevent or prescribe for any
20 human disease, ailment, injury, infirmity, deformity or other
21 condition, physical or mental, by any means or instrumentality,
22 including, but not limited to, the performance of an autopsy.

23 2. To apply principles or techniques of medical science in the
24 diagnosis or the prevention of any such conditions.

25 3. To perform any of the acts described in subsections 1 and 2
26 by using equipment that transfers information concerning the
27 medical condition of the patient electronically, telephonically or by
28 fiber optics, *including, without limitation, through telehealth,*
29 from within or outside this State or the United States.

30 4. To offer, undertake, attempt to do or hold oneself out as able
31 to do any of the acts described in subsections 1 and 2.

32 **Sec. 7.** NRS 630.261 is hereby amended to read as follows:

33 630.261 1. Except as otherwise provided in NRS 630.161,
34 the Board may issue:

35 (a) A locum tenens license, to be effective not more than 3
36 months after issuance, to any physician who is licensed and in good
37 standing in another state, who meets the requirements for licensure
38 in this State and who is of good moral character and reputation. The
39 purpose of this license is to enable an eligible physician to serve as a
40 substitute for another physician who is licensed to practice medicine
41 in this State and who is absent from his or her practice for reasons
42 deemed sufficient by the Board. A license issued pursuant to the
43 provisions of this paragraph is not renewable.

44 (b) A special license to a licensed physician of another state to
45 come into this State to care for or assist in the treatment of his or her



1 own patient in association with a physician licensed in this State. A
2 special license issued pursuant to the provisions of this paragraph is
3 limited to the care of a specific patient. The physician licensed in
4 this State has the primary responsibility for the care of that patient.

5 (c) A restricted license for a specified period if the Board
6 determines the applicant needs supervision or restriction.

7 (d) A temporary license for a specified period if the physician is
8 licensed and in good standing in another state and meets the
9 requirements for licensure in this State, and if the Board determines
10 that it is necessary in order to provide medical services for a
11 community without adequate medical care. A temporary license
12 issued pursuant to the provisions of this paragraph is not renewable.

13 (e) A special purpose license to a physician who is licensed in
14 another state to perform any of the acts described in subsections 1
15 and 2 of NRS 630.020 by using equipment that transfers
16 information concerning the medical condition of a patient in this
17 State electronically, telephonically or by fiber optics , *including,*
18 *without limitation, through telehealth,* from within or outside this
19 State or the United States. A physician who holds a special purpose
20 license issued pursuant to this paragraph:

21 (1) Except as otherwise provided by specific statute or
22 regulation, shall comply with the provisions of this chapter and the
23 regulations of the Board; and

24 (2) To the extent not inconsistent with the Nevada
25 Constitution or the United States Constitution, is subject to the
26 jurisdiction of the courts of this State.

27 2. For the purpose of paragraph (e) of subsection 1, the
28 physician must:

29 (a) Hold a full and unrestricted license to practice medicine in
30 another state;

31 (b) Not have had any disciplinary or other action taken against
32 him or her by any state or other jurisdiction; and

33 (c) Be certified by a specialty board of the American Board of
34 Medical Specialties or its successor.

35 3. Except as otherwise provided in this section, the Board may
36 renew or modify any license issued pursuant to subsection 1.

37 **Sec. 8.** NRS 630.275 is hereby amended to read as follows:

38 630.275 The Board shall adopt regulations regarding the
39 licensure of a physician assistant, including, but not limited to:

40 1. The educational and other qualifications of applicants.

41 2. The required academic program for applicants.

42 3. The procedures for applications for and the issuance of
43 licenses.

44 4. The tests or examinations of applicants by the Board.



1 5. The medical services which a physician assistant may
2 perform, except that a physician assistant may not perform those
3 specific functions and duties delegated or restricted by law to
4 persons licensed as dentists, chiropractors, podiatric physicians and
5 optometrists under chapters 631, 634, 635 and 636, respectively, of
6 NRS, or as hearing aid specialists.

7 6. The duration, renewal and termination of licenses.

8 7. The grounds and procedures respecting disciplinary actions
9 against physician assistants.

10 8. The supervision of medical services of a physician assistant
11 by a supervising physician, including, without limitation,
12 supervision that is performed electronically, telephonically or by
13 fiber optics from within or outside this State or the United States.

14 9. A physician assistant's use of equipment that transfers
15 information concerning the medical condition of a patient in this
16 State electronically, telephonically or by fiber optics, *including,*
17 *without limitation, through telehealth,* from within or outside this
18 State or the United States.

19 **Sec. 9.** NRS 632.237 is hereby amended to read as follows:

20 632.237 1. The Board may issue a license to practice as an
21 advanced practice registered nurse to a registered nurse who:

22 (a) Has completed an educational program designed to prepare a
23 registered nurse to:

24 (1) Perform designated acts of medical diagnosis;

25 (2) Prescribe therapeutic or corrective measures; and

26 (3) Prescribe controlled substances, poisons, dangerous drugs
27 and devices;

28 (b) Except as otherwise provided in subsection 5, submits proof
29 that he or she is certified as an advanced practice registered nurse by
30 the American Board of Nursing Specialties, the National
31 Commission for Certifying Agencies of the Institute for
32 Credentialing Excellence, or their successor organizations, or any
33 other nationally recognized certification agency approved by the
34 Board; and

35 (c) Meets any other requirements established by the Board for
36 such licensure.

37 2. An advanced practice registered nurse may:

38 (a) Engage in selected medical diagnosis and treatment; and

39 (b) If authorized pursuant to NRS 639.2351 and subject to the
40 limitations set forth in subsection 3, prescribe controlled substances,
41 poisons, dangerous drugs and devices.

42 ↪ An advanced practice registered nurse shall not engage in any
43 diagnosis, treatment or other conduct which the advanced practice
44 registered nurse is not qualified to perform.



1 3. An advanced practice registered nurse who is authorized to
2 prescribe controlled substances, poisons, dangerous drugs and
3 devices pursuant to NRS 639.2351 shall not prescribe a controlled
4 substance listed in schedule II unless:

5 (a) The advanced practice registered nurse has at least 2 years or
6 2,000 hours of clinical experience; or

7 (b) The controlled substance is prescribed pursuant to a protocol
8 approved by a collaborating physician.

9 4. An advanced practice registered nurse may perform the acts
10 described in subsection 2 by using equipment that transfers
11 information concerning the medical condition of a patient in this
12 State electronically, telephonically or by fiber optics , *including,*
13 *without limitation, through telehealth, as defined in section 3 of*
14 *this act,* from within or outside this State or the United States.

15 5. The Board shall adopt regulations:

16 (a) Specifying any additional training, education and experience
17 necessary for licensure as an advanced practice registered nurse.

18 (b) Delineating the authorized scope of practice of an advanced
19 practice registered nurse.

20 (c) Establishing the procedure for application for licensure as an
21 advanced practice registered nurse.

22 6. The provisions of paragraph (b) of subsection 1 do not apply
23 to an advanced practice registered nurse who obtains a license
24 before July 1, 2014.

25 **Sec. 10.** NRS 633.511 is hereby amended to read as follows:

26 633.511 The grounds for initiating disciplinary action pursuant
27 to this chapter are:

28 1. Unprofessional conduct.

29 2. Conviction of:

30 (a) A violation of any federal or state law regulating the
31 possession, distribution or use of any controlled substance or any
32 dangerous drug as defined in chapter 454 of NRS;

33 (b) A felony relating to the practice of osteopathic medicine or
34 practice as a physician assistant;

35 (c) A violation of any of the provisions of NRS 616D.200,
36 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive;

37 (d) Murder, voluntary manslaughter or mayhem;

38 (e) Any felony involving the use of a firearm or other deadly
39 weapon;

40 (f) Assault with intent to kill or to commit sexual assault or
41 mayhem;

42 (g) Sexual assault, statutory sexual seduction, incest, lewdness,
43 indecent exposure or any other sexually related crime;

44 (h) Abuse or neglect of a child or contributory delinquency; or

45 (i) Any offense involving moral turpitude.



1 3. The suspension of a license to practice osteopathic medicine
2 or to practice as a physician assistant by any other jurisdiction.

3 4. Malpractice or gross malpractice, which may be evidenced
4 by a claim of malpractice settled against a licensee.

5 5. Professional incompetence.

6 6. Failure to comply with the requirements of NRS 633.527.

7 7. Failure to comply with the requirements of subsection 3 of
8 NRS 633.471.

9 8. Failure to comply with the provisions of NRS 633.694.

10 9. Operation of a medical facility, as defined in NRS 449.0151,
11 at any time during which:

12 (a) The license of the facility is suspended or revoked; or

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

15 ➔ This subsection applies to an owner or other principal responsible
16 for the operation of the facility.

17 10. Failure to comply with the provisions of subsection 2 of
18 NRS 633.322.

19 11. Signing a blank prescription form.

20 12. Knowingly procuring or administering a controlled
21 substance or a dangerous drug as defined in chapter 454 of NRS that
22 is not approved by the United States Food and Drug Administration,
23 unless the unapproved controlled substance or dangerous drug:

24 (a) Was procured through a retail pharmacy licensed pursuant to
25 chapter 639 of NRS;

26 (b) Was procured through a Canadian pharmacy which is
27 licensed pursuant to chapter 639 of NRS and which has been
28 recommended by the State Board of Pharmacy pursuant to
29 subsection 4 of NRS 639.2328; or

30 (c) Is marijuana being used for medical purposes in accordance
31 with chapter 453A of NRS.

32 13. Attempting, directly or indirectly, by intimidation, coercion
33 or deception, to obtain or retain a patient or to discourage the use of
34 a second opinion.

35 14. Terminating the medical care of a patient without adequate
36 notice or without making other arrangements for the continued care
37 of the patient.

38 15. In addition to the provisions of subsection 3 of NRS
39 633.524, making or filing a report which the licensee knows to be
40 false, failing to file a record or report that is required by law or
41 willfully obstructing or inducing another to obstruct the making or
42 filing of such a record or report.

43 16. Failure to report any person the licensee knows, or has
44 reason to know, is in violation of the provisions of this chapter or



1 the regulations of the Board within 30 days after the date the
2 licensee knows or has reason to know of the violation.

3 17. Failure by a licensee or applicant to report in writing,
4 within 30 days, any criminal action taken or conviction obtained
5 against the licensee or applicant, other than a minor traffic violation,
6 in this State or any other state or by the Federal Government, a
7 branch of the Armed Forces of the United States or any local or
8 federal jurisdiction of a foreign country.

9 18. Engaging in any act that is unsafe in accordance with
10 regulations adopted by the Board.

11 19. Failure to comply with the provisions of ~~NRS 633.165.~~
12 *section 3 of this act.*

13 20. Failure to supervise adequately a medical assistant pursuant
14 to the regulations of the Board.

15 **Sec. 11.** NRS 633.711 is hereby amended to read as follows:

16 633.711 1. The Board, through an officer of the Board or the
17 Attorney General, may maintain in any court of competent
18 jurisdiction a suit for an injunction against any person:

19 (a) Practicing osteopathic medicine or practicing as a physician
20 assistant without a valid license to practice osteopathic medicine or
21 to practice as a physician assistant; or

22 (b) ~~Engaging in telemedicine~~ *Providing services through*
23 *telehealth, as defined in section 3 of this act,* without a valid
24 license. ~~pursuant to NRS 633.165.~~

25 2. An injunction issued pursuant to subsection 1:

26 (a) May be issued without proof of actual damage sustained by
27 any person, this provision being a preventive as well as a punitive
28 measure.

29 (b) Must not relieve such person from criminal prosecution for
30 practicing without such a license.

31 **Sec. 12.** Chapter 639 of NRS is hereby amended by adding
32 thereto a new section to read as follows:

33 *“Telehealth” has the meaning ascribed to it in section 3 of this*
34 *act.*

35 **Sec. 13.** NRS 639.001 is hereby amended to read as follows:

36 639.001 As used in this chapter, unless the context otherwise
37 requires, the words and terms defined in NRS 639.0015 to 639.016,
38 inclusive, *and section 12 of this act* have the meanings ascribed to
39 them in those sections.

40 **Sec. 14.** NRS 639.0151 is hereby amended to read as follows:

41 639.0151 “Remote site” means:

42 1. A pharmacy staffed by a pharmaceutical technician and
43 equipped to facilitate communicative access to a pharmacy and its
44 registered pharmacists; or



1 2. An office of a dispensing practitioner that is staffed by a
2 dispensing technician and equipped to facilitate communicative
3 access to the dispensing practitioner,

4 ↪ electronically, telephonically or by fiber optics , *including,*
5 *without limitation, through telehealth,* during regular business
6 hours from within or outside this State or the United States.

7 **Sec. 15.** NRS 639.0153 is hereby amended to read as follows:

8 639.0153 “Satellite consultation site” means a site that only
9 dispenses filled prescriptions which are delivered to that site after
10 the prescriptions are prepared:

11 1. At a pharmacy where a registered pharmacist provides
12 consultation to patients; or

13 2. At an office of a dispensing practitioner where the
14 dispensing practitioner provides consultation to patients,

15 ↪ electronically, telephonically or by fiber optics , *including,*
16 *without limitation, through telehealth,* during regular business
17 hours from within or outside this State or the United States.

18 **Sec. 16.** NRS 639.0154 is hereby amended to read as follows:

19 639.0154 “Telepharmacy” means:

20 1. A pharmacy; or

21 2. An office of a dispensing practitioner,

22 ↪ that is accessible by a remote site or a satellite consultation site
23 electronically, telephonically or by fiber optics , *including, without*
24 *limitation, through telehealth,* from within or outside this State or
25 the United States.

26 **Sec. 17.** NRS 639.0727 is hereby amended to read as follows:

27 639.0727 The Board shall adopt regulations:

28 1. As are necessary for the safe and efficient operation of
29 remote sites, satellite consultation sites and telepharmacies;

30 2. To define the terms “dispensing practitioner” and
31 “dispensing technician,” to provide for the registration and
32 discipline of dispensing practitioners and dispensing technicians,
33 and to set forth the qualifications, powers and duties of dispensing
34 practitioners and dispensing technicians;

35 3. To authorize registered pharmacists to engage in the practice
36 of pharmacy electronically, telephonically or by fiber optics ,
37 *including, without limitation, through telehealth,* from within *or*
38 *outside* this State; and

39 4. To authorize prescriptions to be filled and dispensed to
40 patients as prescribed by practitioners electronically, telephonically
41 or by fiber optics , *including, without limitation, through*
42 *telehealth,* from within or outside this State or the United States.

43 **Sec. 18.** NRS 639.235 is hereby amended to read as follows:

44 639.235 1. No person other than a practitioner holding a
45 license to practice his or her profession in this State may prescribe



1 or write a prescription, except that a prescription written by a person
2 who is not licensed to practice in this State, but is authorized by the
3 laws of another state to prescribe, shall be deemed to be a legal
4 prescription unless the person prescribed or wrote the prescription in
5 violation of the provisions of NRS 453.3611 to 453.3648, inclusive.

6 2. If a prescription that is prescribed by a person who is not
7 licensed to practice in this State, but is authorized by the laws of
8 another state to prescribe, calls for a controlled substance listed in:

9 (a) Schedule II, the registered pharmacist who is to fill the
10 prescription shall establish and document that the prescription is
11 authentic and that a bona fide relationship between the patient and
12 the person prescribing the controlled substance did exist when the
13 prescription was written.

14 (b) Schedule III or IV, the registered pharmacist who is to fill
15 the prescription shall establish that the prescription is authentic and
16 that a bona fide relationship between the patient and the person
17 prescribing the controlled substance did exist when the prescription
18 was written. This paragraph does not require the registered
19 pharmacist to inquire into such a relationship upon the receipt of a
20 similar prescription subsequently issued for that patient.

21 3. A pharmacist who fills a prescription described in subsection
22 2 shall record on the prescription or in the prescription record in the
23 pharmacy's computer:

24 (a) The name of the person with whom the pharmacist spoke
25 concerning the prescription;

26 (b) The date and time of the conversation; and

27 (c) The date and time the patient was examined by the person
28 prescribing the controlled substance for which the prescription was
29 issued.

30 4. For the purposes of subsection 2, a bona fide relationship
31 between the patient and the person prescribing the controlled
32 substance shall be deemed to exist if the patient was examined in
33 person, electronically, telephonically or by fiber optics, *including,*
34 *without limitation, through telehealth,* within or outside this State
35 or the United States by the person prescribing the controlled
36 substances within the 6 months immediately preceding the date the
37 prescription was issued.

38 **Sec. 19.** Chapter 641 of NRS is hereby amended by adding
39 thereto a new section to read as follows:

40 *The Psychology Interjurisdictional Compact, set forth in this*
41 *section, is hereby enacted into law and entered into with all other*
42 *jurisdictions substantially as follows:*



ARTICLE I.

PURPOSE

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4
5 WHEREAS, States license psychologists in order to protect the
6 public through verification of education, training and experience
7 and ensure accountability for professional practice; and

8 WHEREAS, This Compact is intended to regulate the day-to-day
9 practice of telepsychology, including the provision of
10 psychological services using telecommunication technologies, by
11 psychologists across state boundaries in the performance of their
12 psychological practice as assigned by an appropriate authority;
13 and

14 WHEREAS, This Compact is intended to regulate the temporary
15 in-person face-to-face practice of psychology by psychologists
16 across state boundaries for 30 days within a calendar year in the
17 performance of their psychological practice as assigned by an
18 appropriate authority; and

19 WHEREAS, This Compact is intended to authorize state
20 psychology regulatory authorities to afford legal recognition, in a
21 manner consistent with the terms of the Compact, to psychologists
22 licensed in another state; and

23 WHEREAS, This Compact recognizes that states have a vested
24 interest in protecting the public's health and safety through the
25 licensing and regulation of psychologists and that such state
26 regulation will best protect the public health and safety; and

27 WHEREAS, This Compact does not apply when a psychologist
28 is licensed in both the home and receiving jurisdiction; and

29 WHEREAS, This Compact does not apply to permanent in-
30 person face-to-face practice, but it does allow for the authorization
31 of temporary psychological practice.

32
33 Consistent with these principles, this Compact is designed to
34 achieve the following purposes and objectives:

35 1. Increase public access to professional psychological
36 services by allowing for telepsychological practice across state
37 lines, as well as limited temporary in-person face-to-face services,
38 into a jurisdiction in which the psychologist is not licensed to
39 practice psychology;

40 2. Enhance the states' ability to protect the public's health
41 and safety, especially client/patient safety;

42 3. Encourage the cooperation of the compact states in the
43 areas of psychology licensure and regulation;



1 4. Facilitate the exchange of information between the
2 compact states regarding psychologist licensure and adverse
3 actions and disciplinary history;

4 5. Promote compliance with the laws governing psychological
5 practice in each compact state; and

6 6. Invest all compact states with the authority to hold licensed
7 psychologists accountable through the mutual recognition of
8 compact state licenses.

9
10 **ARTICLE II.**

11
12 **DEFINITIONS**

13
14 A. "Adverse action" means any action taken by a state
15 psychology regulatory authority which finds a violation of a
16 statute or regulation that is identified by the state psychology
17 regulatory authority as discipline and is a matter of public record.

18 B. "Authority to practice interjurisdictional telepsychology"
19 means a licensed psychologist's authority to practice, within the
20 limits authorized under this Compact, in another compact state.

21 C. "Bylaws" means those bylaws established by the
22 Psychology Interjurisdictional Compact Commission pursuant to
23 Article X for its governance, or for directing and controlling its
24 actions and conduct.

25 D. "Client/patient" means the recipient of psychological
26 services, whether psychological services are delivered in the
27 context of healthcare, corporate, supervision or consulting
28 services.

29 E. "Commissioner" means the voting representative
30 appointed by each member board pursuant to Article X.

31 F. "Compact state" means a state, the District of Columbia or
32 a territory of the United States that has enacted this Compact and
33 which has not withdrawn pursuant to section C of Article XIII or
34 been terminated pursuant to section B of Article XII.

35 G. "Coordinated Licensure Information System" means an
36 integrated process for collecting, storing and sharing information
37 on psychologists' licensure and enforcement activities related to
38 psychology licensure laws, which is administered by a non-profit
39 organization composed of and controlled by the state psychology
40 regulatory authorities.

41 H. "Confidentiality" means the principle that data or
42 information is not made available or disclosed to unauthorized
43 persons or processes.

44 I. "Day" means any part of a day in which psychological
45 work is performed.



1 *J. "Distant jurisdiction" means the jurisdiction where a*
2 *psychologist is physically present, not through using*
3 *telecommunications technologies, to provide temporary face-to-*
4 *face psychological services.*

5 *K. "E.Passport" means a certificate as referenced in section*
6 *E of Article III, section E of Article IV and section B of Article*
7 *VII, and as further defined by the rules of the Commission.*

8 *L. "Home state" means a compact state where a psychologist*
9 *is licensed to practice psychology. If the psychologist is licensed in*
10 *more than one compact state, the home state is the compact state*
11 *where the psychologist was physically present when the services*
12 *were delivered.*

13 *M. "In-person" means interactions in which the psychologist*
14 *and the client/patient are in the same physical space and which*
15 *does not include interactions that may occur through the use of*
16 *technologies.*

17 *N. "Interjurisdictional practice certificate" or "IPC" means a*
18 *certificate that grants temporary authority to practice based on*
19 *notification to the licensing board of intention to practice*
20 *temporarily, and verification of one's qualifications for such*
21 *practice.*

22 *O. "License" means authorization by a state psychology*
23 *regulatory authority to engage in the independent practice of*
24 *psychology, which would be unlawful without the authorization.*

25 *P. "Non-compact state" means any state which is not at the*
26 *time a compact state.*

27 *Q. "Psychologist" means an individual licensed for the*
28 *independent practice of psychology.*

29 *R. "Psychology Interjurisdictional Compact Commission" or*
30 *"Commission" means the national administration of which all*
31 *compact states are members.*

32 *S. "Receiving state" means a compact state where the*
33 *client/patient is physically located when the services were*
34 *delivered.*

35 *T. "Rule" means a written statement by the Psychology*
36 *Interjurisdictional Compact Commission promulgated pursuant to*
37 *Article XI of the Compact that is of general applicability,*
38 *implements, interprets or prescribes a policy or provision of the*
39 *Compact, or an organizational, procedural or practice*
40 *requirement of the Commission and has the force and effect of*
41 *statutory law in a compact state, and includes the amendment,*
42 *repeal or suspension of an existing rule.*

43 *U. "Significant investigatory information" means:*
44 *a. Investigative information that a state psychology*
45 *regulatory authority, after a preliminary inquiry that includes*



1 *notification and an opportunity to respond if required by state law,*
2 *has reason to believe, if proved true, would indicate more than a*
3 *violation of state statute or ethics code that would be considered*
4 *more substantial than a minor infraction; or*

5 *b. Investigative information that indicates that the*
6 *psychologist represents an immediate threat to the public health*
7 *and safety, regardless of whether the psychologist has been*
8 *notified or had an opportunity to respond.*

9 *V. "State" means a state, territory or possession of the United*
10 *States or the District of Columbia.*

11 *W. "State psychology regulatory authority" means the board,*
12 *office or other agency with the legislative mandate to license and*
13 *regulate the practice of psychology.*

14 *X. "Telepsychology" means the provision of psychological*
15 *services using telecommunication technologies.*

16 *Y. "Temporary in-person face-to-face practice" means where*
17 *a psychologist is physically present, not through using*
18 *telecommunications technologies, in the distant jurisdiction to*
19 *provide for the practice of psychology up to a limited period of*
20 *time as determined by the Commission and based on notification*
21 *to the distant jurisdiction.*

22
23 **ARTICLE III.**

24
25 **HOME STATE LICENSURE**

26
27 *A. The home state in which a psychologist is licensed shall be*
28 *a compact state where a psychologist is licensed to practice*
29 *psychology.*

30 *B. A psychologist may hold one or more compact state*
31 *licenses at a time. If the psychologist is licensed in more than one*
32 *compact state, the home state is the compact state where the*
33 *psychologist was physically present when the services were*
34 *delivered.*

35 *C. Any compact state may require a psychologist not*
36 *previously licensed in a compact state to obtain and retain a*
37 *license to be authorized to practice in the compact state under*
38 *circumstances not authorized by the authority to practice*
39 *interjurisdictional telepsychology under the terms of this Compact.*

40 *D. Any compact state may require a psychologist to obtain*
41 *and retain a license to be authorized to practice in a compact state*
42 *under circumstances not authorized by the temporary*
43 *authorization to practice under the terms of this Compact.*



1 *E. A home state's license authorizes a psychologist to practice*
2 *in a receiving state under the authority to practice*
3 *interjurisdictional telepsychology only if the compact state:*

4 1. *Currently requires the psychologist to hold an active*
5 *E.Passport;*

6 2. *Has a mechanism in place for receiving and*
7 *investigating complaints about licensed individuals;*

8 3. *Notifies the Commission, in compliance with the terms*
9 *herein, of any adverse action or significant investigatory*
10 *information regarding a licensed individual;*

11 4. *Requires an Identity History Summary of all applicants*
12 *at initial licensure, including the use of the results of fingerprints*
13 *or other biometric data checks compliant with the requirements of*
14 *the Federal Bureau of Investigation, not later than 10 years after*
15 *activation of the Compact; and*

16 5. *Complies with the bylaws and rules of the Commission.*

17 *F. A home state's license grants temporary authorization to*
18 *practice to a psychologist in a distant state only if the compact*
19 *state:*

20 1. *Currently requires the psychologist to hold an active*
21 *IPC;*

22 2. *Has a mechanism in place for receiving and*
23 *investigating complaints about licensed individuals;*

24 3. *Notifies the Commission, in compliance with the terms*
25 *herein, of any adverse action or significant investigatory*
26 *information regarding a licensed individual;*

27 4. *Requires an Identity History Summary of all applicants*
28 *at initial licensure, including the use of the results of fingerprints*
29 *or other biometric data checks compliant with the requirements of*
30 *the Federal Bureau of Investigation, not later than 10 years after*
31 *activation of the Compact; and*

32 5. *Complies with the bylaws and rules of the Commission.*

33
34 **ARTICLE IV.**

35
36 **COMPACT PRIVILEGE TO PRACTICE TELEPSYCHOLOGY**

37
38 *A. Compact states shall recognize the right of a psychologist,*
39 *licensed in a compact state in conformance with Article III, to*
40 *practice telepsychology in other compact states (receiving states)*
41 *in which the psychologist is not licensed, under the authority to*
42 *practice interjurisdictional telepsychology as provided in the*
43 *Compact.*



1 *B. To exercise the authority to practice interjurisdictional*
2 *telepsychology under the terms and provisions of this Compact, a*
3 *psychologist licensed to practice in a compact state must:*

4 *1. Hold a graduate degree in psychology from an institute*
5 *of higher education that was, at the time the degree was awarded:*

6 *a. Regionally accredited by an accrediting body*
7 *recognized by the United States Department of Education to grant*
8 *graduate degrees or authorized by provincial statute or royal*
9 *charter to grant doctoral degrees; or*

10 *b. A foreign college or university deemed to be*
11 *equivalent to (a) above by a foreign credential evaluation service*
12 *that is a member of the National Association of Credential*
13 *Evaluation Services (NACES) or by a recognized foreign*
14 *credential evaluation service;*

15 *2. Hold a graduate degree in psychology that meets the*
16 *following criteria:*

17 *a. The program, wherever it may be administratively*
18 *housed, must be clearly identified and labeled as a psychology*
19 *program and must specify in pertinent institutional catalogues and*
20 *brochures its intent to educate and train professional*
21 *psychologists;*

22 *b. The psychology program must stand as a*
23 *recognizable, coherent organizational entity within the institution;*

24 *c. There must be a clear authority and primary*
25 *responsibility for the core and specialty areas whether or not the*
26 *program cuts across administrative lines;*

27 *d. The program must consist of an integrated, organized*
28 *sequence of study;*

29 *e. There must be an identifiable psychology faculty*
30 *sufficient in size and breadth to carry out its responsibilities;*

31 *f. The designated director of the program must be a*
32 *psychologist and a member of the core faculty;*

33 *g. The program must have an identifiable body of*
34 *students who are matriculated in that program for a degree;*

35 *h. The program must include supervised practicum,*
36 *internship or field training appropriate to the practice of*
37 *psychology;*

38 *i. The curriculum shall encompass a minimum of 3*
39 *academic years of full-time graduate study for doctoral degrees*
40 *and a minimum of 1 academic year of full-time graduate study for*
41 *master's degrees; and*

42 *j. The program must include an acceptable residency as*
43 *defined by the rules of the Commission;*

44 *3. Possess a current, full and unrestricted license to*
45 *practice psychology in a home state which is a compact state;*



1 *B. To exercise the temporary authorization to practice under*
2 *the terms and provisions of this Compact, a psychologist licensed*
3 *to practice in a compact state must:*

4 *1. Hold a graduate degree in psychology from an institute*
5 *of higher education that was, at the time the degree was awarded:*

6 *a. Regionally accredited by an accrediting body*
7 *recognized by the United States Department of Education to grant*
8 *graduate degrees or authorized by provincial statute or royal*
9 *charter to grant doctoral degrees; or*

10 *b. A foreign college or university deemed to be*
11 *equivalent to (a) above by a foreign credential evaluation service*
12 *that is a member of the National Association of Credential*
13 *Evaluation Services (NACES) or by a recognized foreign*
14 *credential evaluation service;*

15 *2. Hold a graduate degree in psychology that meets the*
16 *following criteria:*

17 *a. The program, wherever it may be administratively*
18 *housed, must be clearly identified and labeled as a psychology*
19 *program and must specify in pertinent institutional catalogues and*
20 *brochures its intent to educate and train professional*
21 *psychologists;*

22 *b. The psychology program must stand as a*
23 *recognizable, coherent organizational entity within the institution;*

24 *c. There must be a clear authority and primary*
25 *responsibility for the core and specialty areas whether or not the*
26 *program cuts across administrative lines;*

27 *d. The program must consist of an integrated, organized*
28 *sequence of study;*

29 *e. There must be an identifiable psychology faculty*
30 *sufficient in size and breadth to carry out its responsibilities;*

31 *f. The designated director of the program must be a*
32 *psychologist and a member of the core faculty;*

33 *g. The program must have an identifiable body of*
34 *students who are matriculated in that program for a degree;*

35 *h. The program must include supervised practicum,*
36 *internship or field training appropriate to the practice of*
37 *psychology;*

38 *i. The curriculum shall encompass a minimum of 3*
39 *academic years of full-time graduate study for doctoral degrees*
40 *and a minimum of 1 academic year of full-time graduate study for*
41 *master's degrees; and*

42 *j. The program must include an acceptable residency as*
43 *defined by the rules of the Commission;*

44 *3. Possess a current, full and unrestricted license to*
45 *practice psychology in a home state which is a Compact State;*



1 *B. Other conditions regarding telepsychology as determined*
2 *by rules promulgated by the Commission.*

3
4 **ARTICLE VII.**

5
6 **ADVERSE ACTIONS**

7
8 *A. A home state shall have the power to impose adverse*
9 *action against a psychologist's license issued by the home state*
10 *and a receiving state may take adverse action on a psychologist's*
11 *authority to practice interjurisdictional telepsychology and*
12 *temporary authorization to practice within that receiving state.*

13 *B. If a home state takes adverse action against a*
14 *psychologist's license, that psychologist's authority to practice*
15 *interjurisdictional telepsychology is terminated and the E.Passport*
16 *is revoked. In addition, that psychologist's temporary*
17 *authorization to practice is terminated and the IPC is revoked.*

18 *1. All home state disciplinary orders which impose adverse*
19 *action shall be reported to the Commission in accordance with the*
20 *rules promulgated by the Commission. A compact state shall*
21 *report adverse actions in accordance with the rules of the*
22 *Commission.*

23 *2. In the event discipline is reported on a psychologist, the*
24 *psychologist will not be eligible for telepsychology or temporary*
25 *practice in accordance with the rules of the Commission.*

26 *3. Other actions may be imposed as determined by the*
27 *rules promulgated by the Commission.*

28 *C. A home state's psychology regulatory authority shall*
29 *investigate and take appropriate action with respect to reported*
30 *inappropriate conduct engaged in by a licensee which occurred in*
31 *a receiving state as it would if such conduct had occurred by a*
32 *licensee within the home state. In such cases, the home state's law*
33 *shall control in determining any adverse action against a*
34 *psychologist's license.*

35 *D. If a license granted by a compact state is revoked,*
36 *surrendered in lieu of discipline or suspended following an*
37 *investigation authorized in Article VIII, the authorization to*
38 *practice interjurisdictional telepsychology and the temporary*
39 *authorization to practice in all compact states shall be terminated*
40 *upon entry of the final order in the compact state taking the*
41 *action.*

42 *E. Nothing in this Compact shall override a compact state's*
43 *decision that a psychologist's participation in an alternative*
44 *program may be used in lieu of adverse action and that such*
45 *participation shall remain nonpublic if required by the compact*



1 *state's law. Compact states must require psychologists who enter*
2 *any alternative programs to not provide telepsychology services*
3 *under the authority to practice interjurisdictional telepsychology*
4 *or provide temporary psychological services under the temporary*
5 *authorization to practice in any other compact state during the*
6 *term of the alternative program.*

7 *F. No other judicial or administrative remedies shall be*
8 *available to a psychologist in the event a compact state imposes an*
9 *adverse action pursuant to section B.*

10
11 **ARTICLE VIII.**

12
13 **ADDITIONAL AUTHORITIES INVESTED IN A COMPACT STATE'S**
14 **PSYCHOLOGY REGULATORY AUTHORITY**

15
16 *A. In addition to any other powers granted under state law, a*
17 *compact state's psychology regulatory authority shall have the*
18 *authority under this Compact to:*

19 *1. Issue subpoenas, for both hearings and investigations,*
20 *which require the attendance and testimony of witnesses and the*
21 *production of evidence. Subpoenas issued by a state psychology*
22 *regulatory authority for the attendance and testimony of witnesses*
23 *and the production of evidence from another compact state shall*
24 *be enforced in the latter state by any court of competent*
25 *jurisdiction, according to that court's practice and procedure in*
26 *considering subpoenas issued in its own proceedings. The issuing*
27 *state psychology regulatory authority shall pay any witness fees,*
28 *travel expenses, mileage and other fees required by the service*
29 *statutes of the state where the witnesses or evidence are located.*

30 *2. Issue cease and desist and injunctive relief orders to*
31 *revoke a psychologist's authority to practice interjurisdictional*
32 *telepsychology or temporary authorization to practice.*

33 *B. During the course of any investigation, a psychologist may*
34 *not change his or her home state licensure. A home state*
35 *psychology regulatory authority is authorized to complete any*
36 *pending investigations of a psychologist and to take any actions*
37 *appropriate under its law. The home state psychology regulatory*
38 *authority shall promptly report the conclusions of such*
39 *investigations to the Commission. Once an investigation has been*
40 *completed, and pending the outcome of said investigation, the*
41 *psychologist may change his or her home state licensure. The*
42 *Commission shall promptly notify the new home state of any such*
43 *decisions as provided in the rules of the Commission. All*
44 *information provided to the Commission or distributed by compact*
45 *states pursuant to the psychologist shall be confidential, filed*



1 *under seal and used for investigatory or disciplinary matters. The*
2 *Commission may create additional rules for mandated or*
3 *discretionary sharing of information by compact states.*

4
5 **ARTICLE IX.**

6
7 **COORDINATED LICENSURE INFORMATION SYSTEM**

8
9 *A. The Commission shall provide for the development and*
10 *maintenance of a Coordinated Licensure Information System*
11 *(Coordinated Database) and reporting system containing licensure*
12 *and disciplinary action information on all licensees of compact*
13 *states.*

14 *B. Notwithstanding any other provision of state law to the*
15 *contrary, a compact state shall submit a uniform data set to the*
16 *Coordinated Database on all psychologists to whom this Compact*
17 *is applicable as required by the rules of the Commission,*
18 *including:*

- 19 *1. Identifying information;*
- 20 *2. Licensure data;*
- 21 *3. Significant investigatory information;*
- 22 *4. Adverse actions against a psychologist's license;*
- 23 *5. An indicator that a psychologist's authority to practice*
24 *interjurisdictional telepsychology or temporary authorization to*
25 *practice is revoked;*
- 26 *6. Nonconfidential information related to alternative*
27 *program participation information;*
- 28 *7. Any denial of application for licensure, and the reasons*
29 *for such denial; and*
- 30 *8. Other information which may facilitate the*
31 *administration of this Compact, as determined by the rules of the*
32 *Commission.*

33 *C. The Coordinated Database administrator shall promptly*
34 *notify all compact states of any adverse action taken against, or*
35 *significant investigative information on, any licensee in a compact*
36 *state.*

37 *D. Compact states reporting information to the Coordinated*
38 *Database may designate information that may not be shared with*
39 *the public without the express permission of the contributing state.*

40 *E. Any information submitted to the Coordinated Database*
41 *that is subsequently required to be expunged by the law of the*
42 *compact state reporting the information shall be removed from the*
43 *Coordinated Database.*



ARTICLE X.

**ESTABLISHMENT OF THE PSYCHOLOGY
INTERJURISDICTIONAL COMPACT COMMISSION**

A. The compact states hereby create and establish a joint public agency known as the Psychology Interjurisdictional Compact Commission as follows:

1. The Commission is a body politic and an instrumentality of the compact states.

2. Venue is proper and judicial proceedings by or against the Commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the Commission is located. The Commission may waive venue and jurisdictional defenses to the extent it adopts or consents to participate in alternative dispute resolution proceedings.

3. Nothing in this Compact shall be construed to be a waiver of sovereign immunity.

B. Membership, Voting and Meetings.

1. The Commission shall consist of one voting representative appointed by each compact state who shall serve as that state's Commissioner. The state psychology regulatory board shall appoint its delegate. This delegate shall be empowered to act on behalf of the compact state. This delegate shall be limited to:

a. An executive director, executive secretary or similar executive;

b. A current member of the state psychology regulatory authority of a compact state; or

c. A designee empowered with the appropriate delegate authority to act on behalf of the compact state.

2. Any Commissioner may be removed or suspended from office as provided by the law of the state from which the Commissioner is appointed. Any vacancy occurring in the Commission shall be filled in accordance with the laws of the compact state in which the vacancy exists.

3. Each Commissioner shall be entitled to one (1) vote with regard to the promulgation of rules and creation of bylaws and shall otherwise have an opportunity to participate in the business and affairs of the Commission. A Commissioner shall vote in person or by such other means as provided in the bylaws. The bylaws may provide for Commissioners' participation in meetings by telephone or other means of communication.

4. The Commission shall meet at least once during each calendar year. Additional meetings shall be held as set forth in the bylaws.



1 5. All meetings shall be open to the public, and public
2 notice of meetings shall be given in the same manner as required
3 under the rulemaking provisions in Article XI.

4 6. The Commission may convene in a closed, nonpublic
5 meeting if the Commission must discuss:

6 a. Noncompliance of a compact state with its obligations
7 under the Compact;

8 b. The employment, compensation, discipline or other
9 personnel matters, practices or procedures related to specific
10 employees or other matters related to the Commission's internal
11 personnel practices and procedures;

12 c. Current, threatened or reasonable anticipated
13 litigation against the Commission;

14 d. Negotiation of contracts for the purchase or sale of
15 goods, services or real estate;

16 e. Accusation against any person of a crime or formally
17 censuring any person;

18 f. Disclosure of trade secrets or commercial or financial
19 information which is privileged or confidential;

20 g. Disclosure of information of a personal nature where
21 disclosure would constitute a clearly unwarranted invasion of
22 personal privacy;

23 h. Disclosure of investigatory records compiled for law
24 enforcement purposes;

25 i. Disclosure of information related to any investigatory
26 reports prepared by or on behalf of or for use of the Commission
27 or other committee charged with responsibility for investigation or
28 determination of compliance issues pursuant to the Compact; or

29 j. Matters specifically exempted from disclosure by
30 federal and state statute.

31 7. If a meeting, or portion of a meeting, is closed pursuant
32 to this provision, the Commission's legal counsel or designee shall
33 certify that the meeting may be closed and shall reference each
34 relevant exempting provision. The Commission shall keep minutes
35 which fully and clearly describe all matters discussed in a meeting
36 and shall provide a full and accurate summary of actions taken, of
37 any person participating in the meeting, and the reasons therefore,
38 including a description of the views expressed. All documents
39 considered in connection with an action shall be identified in such
40 minutes. All minutes and documents of a closed meeting shall
41 remain under seal, subject to release only by a majority vote of the
42 Commission or order of a court of competent jurisdiction.

43 C. The Commission shall, by a majority vote of the
44 Commissioners, prescribe bylaws and rules to govern its conduct



1 *as may be necessary or appropriate to carry out the purposes and*
2 *exercise the powers of the Compact, including, but not limited to:*

3 *1. Establishing the fiscal year of the Commission.*

4 *2. Providing reasonable standards and procedures:*

5 *a. For the establishment and meetings of other*
6 *committees; and*

7 *b. Governing any general or specific delegation of any*
8 *authority or function of the Commission.*

9 *3. Providing reasonable procedures for calling and*
10 *conducting meetings of the Commission, ensuring reasonable*
11 *advance notice of all meetings and providing an opportunity for*
12 *attendance of such meetings by interested parties, with*
13 *enumerated exceptions designed to protect the public's interest,*
14 *the privacy of individuals of such proceedings and proprietary*
15 *information, including trade secrets. The Commission may meet in*
16 *closed session only after a majority of the Commissioners vote to*
17 *close a meeting to the public in whole or in part. As soon as*
18 *practicable, the Commission must make public a copy of the vote*
19 *to close the meeting revealing the vote of each Commissioner with*
20 *no proxy votes allowed.*

21 *4. Establishing the titles, duties and authority and*
22 *reasonable procedures for the election of the officers of the*
23 *Commission.*

24 *5. Providing reasonable standards and procedures for the*
25 *establishment of the personnel policies and programs of the*
26 *Commission. Notwithstanding any civil service or other similar*
27 *law of any compact state, the bylaws shall exclusively govern the*
28 *personnel policies and programs of the Commission.*

29 *6. Promulgating a code of ethics to address permissible*
30 *and prohibited activities of Commission members and employees.*

31 *7. Providing a mechanism for concluding the operations*
32 *of the Commission and the equitable disposition of any surplus*
33 *funds that may exist after the termination of the Compact after the*
34 *payment and reserving of all of its debts and obligations.*

35 *8. The Commission shall publish its bylaws in a*
36 *convenient form and file a copy thereof and a copy of any*
37 *amendment thereto, with the appropriate agency or officer in each*
38 *of the compact states.*

39 *9. The Commission shall maintain its financial records in*
40 *accordance with the bylaws.*

41 *10. The Commission shall meet and take such actions as*
42 *are consistent with the provisions of this Compact and the bylaws.*

43 *D. The Commission shall have the following powers:*

44 *1. The authority to promulgate uniform rules to facilitate*
45 *and coordinate implementation and administration of this*



1 *Compact which shall have the force and effect of law and shall be*
2 *binding in all compact states;*

3 2. *To bring and prosecute legal proceedings or actions in*
4 *the name of the Commission, provided that the standing of any*
5 *state psychology regulatory authority or other regulatory body*
6 *responsible for psychology licensure to sue or be sued under*
7 *applicable law shall not be affected;*

8 3. *To purchase and maintain insurance and bonds;*

9 4. *To borrow, accept or contract for services of personnel,*
10 *including, but not limited to, employees of a compact state;*

11 5. *To hire employees, elect or appoint officers, fix*
12 *compensation, define duties, grant such individuals appropriate*
13 *authority to carry out the purposes of the Compact and to establish*
14 *the Commission's personnel policies and programs relating to*
15 *conflicts of interest, qualifications of personnel and other related*
16 *personnel matters;*

17 6. *To accept any and all appropriate donations and grants*
18 *of money, equipment, supplies, materials and services, and to*
19 *receive, utilize and dispose of the same, provided that at all times*
20 *the Commission shall strive to avoid any appearance of*
21 *impropriety or conflict of interest;*

22 7. *To lease, purchase, accept appropriate gifts or*
23 *donations of, or otherwise to own, hold, improve or use, any*
24 *property, real, personal or mixed, provided that at all times the*
25 *Commission shall strive to avoid any appearance of impropriety;*

26 8. *To sell, convey, mortgage, pledge, lease, exchange,*
27 *abandon or otherwise dispose of any property, real, personal or*
28 *mixed;*

29 9. *To establish a budget and make expenditures;*

30 10. *To borrow money;*

31 11. *To appoint committees, including advisory committees*
32 *comprised of members, state regulators, state legislators or their*
33 *representatives, and consumer representatives, and such other*
34 *interested persons as may be designated in this Compact and the*
35 *bylaws;*

36 12. *To provide and receive information from, and to*
37 *cooperate with, law enforcement agencies;*

38 13. *To adopt and use an official seal; and*

39 14. *To perform such other functions as may be necessary*
40 *or appropriate to achieve the purposes of this Compact consistent*
41 *with the state regulation of psychology licensure, temporary in-*
42 *person face-to-face practice and telepsychology practice.*

43 *E. Financing of the Commission.*



1 1. *The Commission shall pay, or provide for the payment*
2 *of the reasonable expenses of its establishment, organization and*
3 *ongoing activities.*

4 2. *The Commission may accept any and all appropriate*
5 *revenue sources, donations and grants of money, equipment,*
6 *supplies, materials and services.*

7 3. *The Commission may levy on and collect an annual*
8 *assessment from each compact state or impose fees on other*
9 *parties to cover the cost of the operations and activities of the*
10 *Commission and its staff which must be in a total amount*
11 *sufficient to cover its annual budget as approved each year for*
12 *which revenue is not provided by other sources. The aggregate*
13 *annual assessment amount shall be allocated based upon a*
14 *formula to be determined by the Commission which shall*
15 *promulgate a rule binding upon all compact states.*

16 4. *The Commission shall not incur obligations of any kind*
17 *before securing the funds adequate to meet the same, nor shall the*
18 *Commission pledge the credit of any of the compact states, except*
19 *by and with the authority of the compact state.*

20 5. *The Commission shall keep accurate accounts of all*
21 *receipts and disbursements. The receipts and disbursements of the*
22 *Commission shall be subject to the audit and accounting*
23 *procedures established under its bylaws. However, all receipts and*
24 *disbursements of funds handled by the Commission shall be*
25 *audited yearly by a certified or licensed public accountant and the*
26 *report of the audit shall be included in and become part of the*
27 *annual report of the Commission.*

28 F. *Qualified Immunity, Defense and Indemnification.*

29 1. *The members, officers, Executive Director, employees*
30 *and representatives of the Commission shall be immune from suit*
31 *and liability, either personally or in their official capacity, for any*
32 *claim for damage to or loss of property or personal injury or other*
33 *civil liability caused by or arising out of any actual or alleged act,*
34 *error or omission that occurred, or that the person against whom*
35 *the claim is made had a reasonable basis for believing occurred*
36 *within the scope of Commission employment, duties or*
37 *responsibilities, provided that nothing in this subsection shall be*
38 *construed to protect any such person from suit or liability for any*
39 *damage, loss, injury or liability caused by the intentional or willful*
40 *or wanton misconduct of that person.*

41 2. *The Commission shall defend any member, officer,*
42 *Executive Director, employee or representative of the Commission*
43 *in any civil action seeking to impose liability arising out of any*
44 *actual or alleged act, error or omission that occurred within the*
45 *scope of Commission employment, duties or responsibilities, or*



1 2. *The text of the proposed rule or amendment and the*
2 *reason for the proposed rule;*

3 3. *A request for comments on the proposed rule from any*
4 *interested person; and*

5 4. *The manner in which interested persons may submit*
6 *notice to the Commission of their intention to attend the public*
7 *hearing and any written comments.*

8 F. *Before adoption of a proposed rule, the Commission shall*
9 *allow persons to submit written data, facts, opinions and*
10 *arguments, which shall be made available to the public.*

11 G. *The Commission shall grant an opportunity for a public*
12 *hearing before it adopts a rule or amendment if a hearing is*
13 *requested by:*

14 1. *At least twenty-five (25) persons who submit comments*
15 *independently of each other;*

16 2. *A government subdivision or agency; or*

17 3. *A duly appointed person in an association that has at*
18 *least twenty-five (25) members.*

19 H. *If a hearing is held on the proposed rule or amendment,*
20 *the Commission shall publish the place, time and date of the*
21 *scheduled public hearing and:*

22 1. *All persons wishing to be heard at the hearing shall*
23 *notify the Executive Director of the Commission or other*
24 *designated member in writing of their desire to appear and testify*
25 *at the hearing not less than five (5) business days before the*
26 *scheduled date of the hearing.*

27 2. *Hearings shall be conducted in a manner providing*
28 *each person who wishes to comment a fair and reasonable*
29 *opportunity to comment orally or in writing.*

30 3. *No transcript of the hearing is required, unless a*
31 *written request for a transcript is made, in which case the person*
32 *requesting the transcript shall bear the cost of producing the*
33 *transcript. A recording may be made in lieu of a transcript under*
34 *the same terms and conditions as a transcript. This subsection*
35 *shall not preclude the Commission from making a transcript or*
36 *recording of the hearing if it so chooses.*

37 4. *Nothing in this section shall be construed as requiring a*
38 *separate hearing on each rule. Rules may be grouped for the*
39 *convenience of the Commission at hearings required by this*
40 *section.*

41 I. *Following the scheduled hearing date, or by the close of*
42 *business on the scheduled hearing date if the hearing was not*
43 *held, the Commission shall consider all written and oral comments*
44 *received.*



1 *J. The Commission shall, by majority vote of all members,*
2 *take final action on the proposed rule and shall determine the*
3 *effective date of the rule, if any, based on the rulemaking record*
4 *and the full text of the rule.*

5 *K. If no written notice of intent to attend the public hearing*
6 *by interested parties is received, the Commission may proceed with*
7 *promulgation of the proposed rule without a public hearing.*

8 *L. Upon determination that an emergency exists, the*
9 *Commission may consider and adopt an emergency rule without*
10 *prior notice, opportunity for comment, or hearing, provided that*
11 *the usual rulemaking procedures provided in the Compact and in*
12 *this section shall be retroactively applied to the rule as soon as*
13 *reasonably possible, in no event later than ninety (90) days after*
14 *the effective date of the rule. For the purposes of this provision, an*
15 *emergency rule is one that must be adopted immediately in order*
16 *to:*

17 *1. Meet an imminent threat to the public health, safety, or*
18 *welfare;*

19 *2. Prevent a loss of Commission or compact state funds;*

20 *3. Meet a deadline for the promulgation of an*
21 *administrative rule that is established by federal law or rule; or*

22 *4. Protect the public health and safety.*

23 *M. The Commission or an authorized committee of the*
24 *Commission may direct revisions to a previously adopted rule or*
25 *amendment for purposes of correcting typographical errors, errors*
26 *in format, errors in consistency, or grammatical errors. Public*
27 *notice of any revisions shall be posted on the Internet website of*
28 *the Commission. The revision shall be subject to challenge by any*
29 *person for a period of thirty (30) days after posting. The revision*
30 *may be challenged only on grounds that the revision results in a*
31 *material change to a rule. A challenge shall be made in writing,*
32 *and delivered to the Chair of the Commission before the end of the*
33 *notice period. If no challenge is made, the revision will take effect*
34 *without further action. If the revision is challenged, the revision*
35 *may not take effect without the approval of the Commission.*

36
37 **ARTICLE XII.**

38
39 **OVERSIGHT, DISPUTE RESOLUTION AND ENFORCEMENT**

40
41 **A. Oversight.**

42 *1. The executive, legislative and judicial branches of state*
43 *government in each compact state shall enforce this Compact and*
44 *take all actions necessary and appropriate to effectuate the*
45 *Compact's purposes and intent. The provisions of this Compact*



1 *and the rules promulgated hereunder shall have standing as*
2 *statutory law.*

3 *2. All courts shall take judicial notice of the Compact and*
4 *the rules in any judicial or administrative proceeding in a compact*
5 *state pertaining to the subject matter of this Compact which may*
6 *affect the powers, responsibilities or actions of the Commission.*

7 *3. The Commission shall be entitled to receive service of*
8 *process in any such proceeding, and shall have standing to*
9 *intervene in such a proceeding for all purposes. Failure to provide*
10 *service of process to the Commission shall render a judgment or*
11 *order void as to the Commission, this Compact or promulgated*
12 *rules.*

13 *B. Default, Technical Assistance and Termination.*

14 *1. If the Commission determines that a compact state has*
15 *defaulted in the performance of its obligations or responsibilities*
16 *under this Compact or the promulgated rules, the Commission*
17 *shall:*

18 *a. Provide written notice to the defaulting state and*
19 *other compact states of the nature of the default, the proposed*
20 *means of remedying the default and any other action to be taken*
21 *by the Commission; and*

22 *b. Provide remedial training and specific technical*
23 *assistance regarding the default.*

24 *2. If a state in default fails to remedy the default, the*
25 *defaulting state may be terminated from the Compact upon an*
26 *affirmative vote of the majority of the compact states, and all*
27 *rights, privileges and benefits conferred by this Compact shall be*
28 *terminated on the effective date of termination. A remedy of the*
29 *default does not relieve the offending state of obligations or*
30 *liabilities incurred during the period of default.*

31 *3. Termination of membership in the Compact shall be*
32 *imposed only after all other means of securing compliance have*
33 *been exhausted. Notice of intent to suspend or terminate shall be*
34 *submitted by the Commission to the Governor, the majority and*
35 *minority leaders of the defaulting state's legislature, and each of*
36 *the compact states.*

37 *4. A compact state which has been terminated is*
38 *responsible for all assessments, obligations and liabilities incurred*
39 *through the effective date of termination, including obligations*
40 *which extend beyond the effective date of termination.*

41 *5. The Commission shall not bear any costs incurred by*
42 *the state which is found to be in default or which has been*
43 *terminated from the Compact, unless agreed upon in writing*
44 *between the Commission and the defaulting state.*



1 *law in that state. Any rule which has been previously adopted by*
2 *the Commission shall have the full force and effect of law on the*
3 *day the Compact becomes law in that state.*

4 *C. Any compact state may withdraw from this Compact by*
5 *enacting a statute repealing the same, and:*

6 *1. A compact state's withdrawal shall not take effect until*
7 *six (6) months after enactment of the repealing statute.*

8 *2. Withdrawal shall not affect the continuing requirement*
9 *of the withdrawing state's psychology regulatory authority to*
10 *comply with the investigative and adverse action reporting*
11 *requirements of this act prior to the effective date of withdrawal.*

12 *D. Nothing contained in this Compact shall be construed to*
13 *invalidate or prevent any psychology licensure agreement or other*
14 *cooperative arrangement between a compact state and a non-*
15 *compact state which does not conflict with the provisions of this*
16 *Compact.*

17 *E. This Compact may be amended by the compact states. No*
18 *amendment to this Compact shall become effective and binding*
19 *upon any compact state until it is enacted into the law of all*
20 *compact states.*

21
22 **ARTICLE XIV.**

23
24 **CONSTRUCTION AND SEVERABILITY**

25
26 *This Compact shall be liberally construed so as to effectuate*
27 *the purposes thereof. If this Compact shall be held contrary to the*
28 *constitution of any state member thereto, the Compact shall*
29 *remain in full force and effect as to the remaining compact states.*

30 **Sec. 20.** NRS 641.390 is hereby amended to read as follows:

31 641.390 1. ~~[A]~~ *Except as authorized by the Psychology*
32 *Interjurisdictional Compact ratified and enacted in section 19 of*
33 *this act, a person shall not represent himself or herself as a*
34 *psychologist within the meaning of this chapter or engage in the*
35 *practice of psychology unless he or she is licensed under the*
36 *provisions of this chapter, except that any psychological scientist*
37 *employed by an accredited educational institution or public agency*
38 *which has set explicit standards may represent himself or herself by*
39 *the title conferred upon him or her by such institution or agency.*

40 2. This section does not grant approval for any person to offer
41 services as a psychologist to any other person as a consultant, and to
42 accept remuneration for such psychological services, other than that
43 of an institutional salary, unless the psychologist has been licensed
44 under the provisions of this chapter.



1 3. This chapter does not prevent the teaching of psychology or
2 psychological research, unless the teaching or research involves the
3 delivery or supervision of direct psychological services to a person.
4 Persons who have earned a doctoral degree in psychology from an
5 accredited educational institution may use the title "psychologist" in
6 conjunction with the activities permitted by this subsection.

7 4. A graduate student in psychology whose activities are part
8 of the course of study for a graduate degree in psychology at an
9 accredited educational institution or a person pursuing postdoctoral
10 training or experience in psychology to fulfill the requirements for
11 licensure under the provisions of this chapter may use the terms
12 "psychological trainee," "psychological intern," "psychological
13 resident" or "psychological assistant" if the activities are performed
14 under the supervision of a licensed psychologist in accordance with
15 the regulations adopted by the Board.

16 5. A person who is certified as a school psychologist by the
17 State Board of Education may use the title "school psychologist" or
18 "certified school psychologist" in connection with activities relating
19 to school psychologists.

20 **Sec. 21.** NRS 287.010 is hereby amended to read as follows:

21 287.010 1. The governing body of any county, school
22 district, municipal corporation, political subdivision, public
23 corporation or other local governmental agency of the State of
24 Nevada may:

25 (a) Adopt and carry into effect a system of group life, accident
26 or health insurance, or any combination thereof, for the benefit of its
27 officers and employees, and the dependents of officers and
28 employees who elect to accept the insurance and who, where
29 necessary, have authorized the governing body to make deductions
30 from their compensation for the payment of premiums on the
31 insurance.

32 (b) Purchase group policies of life, accident or health insurance,
33 or any combination thereof, for the benefit of such officers and
34 employees, and the dependents of such officers and employees, as
35 have authorized the purchase, from insurance companies authorized
36 to transact the business of such insurance in the State of Nevada,
37 and, where necessary, deduct from the compensation of officers and
38 employees the premiums upon insurance and pay the deductions
39 upon the premiums.

40 (c) Provide group life, accident or health coverage through a
41 self-insurance reserve fund and, where necessary, deduct
42 contributions to the maintenance of the fund from the compensation
43 of officers and employees and pay the deductions into the fund. The
44 money accumulated for this purpose through deductions from the
45 compensation of officers and employees and contributions of the



1 governing body must be maintained as an internal service fund as
2 defined by NRS 354.543. The money must be deposited in a state or
3 national bank or credit union authorized to transact business in the
4 State of Nevada. Any independent administrator of a fund created
5 under this section is subject to the licensing requirements of chapter
6 683A of NRS, and must be a resident of this State. Any contract
7 with an independent administrator must be approved by the
8 Commissioner of Insurance as to the reasonableness of
9 administrative charges in relation to contributions collected and
10 benefits provided. The provisions of NRS 687B.408, 689B.030 to
11 689B.050, inclusive, and 689B.287 *and section 33 of this act* apply
12 to coverage provided pursuant to this paragraph.

13 (d) Defray part or all of the cost of maintenance of a self-
14 insurance fund or of the premiums upon insurance. The money for
15 contributions must be budgeted for in accordance with the laws
16 governing the county, school district, municipal corporation,
17 political subdivision, public corporation or other local governmental
18 agency of the State of Nevada.

19 2. If a school district offers group insurance to its officers and
20 employees pursuant to this section, members of the board of trustees
21 of the school district must not be excluded from participating in the
22 group insurance. If the amount of the deductions from compensation
23 required to pay for the group insurance exceeds the compensation to
24 which a trustee is entitled, the difference must be paid by the trustee.

25 3. In any county in which a legal services organization exists,
26 the governing body of the county, or of any school district,
27 municipal corporation, political subdivision, public corporation or
28 other local governmental agency of the State of Nevada in the
29 county, may enter into a contract with the legal services
30 organization pursuant to which the officers and employees of the
31 legal services organization, and the dependents of those officers and
32 employees, are eligible for any life, accident or health insurance
33 provided pursuant to this section to the officers and employees, and
34 the dependents of the officers and employees, of the county, school
35 district, municipal corporation, political subdivision, public
36 corporation or other local governmental agency.

37 4. If a contract is entered into pursuant to subsection 3, the
38 officers and employees of the legal services organization:

39 (a) Shall be deemed, solely for the purposes of this section, to be
40 officers and employees of the county, school district, municipal
41 corporation, political subdivision, public corporation or other local
42 governmental agency with which the legal services organization has
43 contracted; and



1 (b) Must be required by the contract to pay the premiums or
2 contributions for all insurance which they elect to accept or of which
3 they authorize the purchase.

4 5. A contract that is entered into pursuant to subsection 3:

5 (a) Must be submitted to the Commissioner of Insurance for
6 approval not less than 30 days before the date on which the contract
7 is to become effective.

8 (b) Does not become effective unless approved by the
9 Commissioner.

10 (c) Shall be deemed to be approved if not disapproved by the
11 Commissioner within 30 days after its submission.

12 6. As used in this section, "legal services organization" means
13 an organization that operates a program for legal aid and receives
14 money pursuant to NRS 19.031.

15 **Sec. 22.** NRS 287.04335 is hereby amended to read as
16 follows:

17 287.04335 If the Board provides health insurance through a
18 plan of self-insurance, it shall comply with the provisions of NRS
19 689B.255, 695G.150, 695G.160, 695G.164, 695G.1645, 695G.167,
20 695G.170, 695G.171, 695G.173, 695G.177, 695G.200 to 695G.230,
21 inclusive, 695G.241 to 695G.310, inclusive, and 695G.405, *and*
22 *section 45 of this act*, in the same manner as an insurer that is
23 licensed pursuant to title 57 of NRS is required to comply with those
24 provisions.

25 **Sec. 23.** Chapter 422 of NRS is hereby amended by adding
26 thereto a new section to read as follows:

27 *1. The Director shall include in the State Plan for Medicaid:*

28 *(a) A requirement that the State shall pay for the nonfederal*
29 *share of expenses for services provided to a person through*
30 *telehealth to the same extent and in the same amount as though*
31 *provided in person or by other means; and*

32 *(b) A provision prohibiting the State from:*

33 *(1) Requiring a person to obtain prior authorization,*
34 *establish a relationship with a provider of health care or provide*
35 *any additional consent to or reason for obtaining services through*
36 *telehealth as a condition to paying for services as described in*
37 *paragraph (a);*

38 *(2) Requiring a provider of health care to demonstrate that*
39 *it is necessary to provide services to a person through telehealth or*
40 *receive any additional type of certification or license to provide*
41 *services through telehealth as a condition to paying for services as*
42 *described in paragraph (a);*

43 *(3) Refusing to pay for services as described in paragraph*
44 *(a) because of the location from which a provider of health care*
45 *provides services through telehealth or at which a person who is*



1 *covered by the State Plan for Medicaid receives services through*
2 *telehealth; or*

3 *(4) Requiring services to be provided through telehealth as*
4 *a condition to paying for such services.*

5 *2. As used in this section:*

6 *(a) "Provider of health care" has the meaning ascribed to it in*
7 *NRS 439.820.*

8 *(b) "Telehealth" has the meaning ascribed to it in section 3 of*
9 *this act.*

10 **Sec. 24.** Chapter 449 of NRS is hereby amended by adding
11 thereto a new section to read as follows:

12 *A hospital may grant staff privileges to a provider of health*
13 *care who is at another location for the purpose of providing*
14 *services through telehealth, as defined in section 3 of this act, to*
15 *patients at the hospital in the manner prescribed in 42 C.F.R. §§*
16 *482.12, 482.22 and 485.616.*

17 **Sec. 25.** NRS 449.0302 is hereby amended to read as follows:

18 449.0302 1. The Board shall adopt:

19 (a) Licensing standards for each class of medical facility or
20 facility for the dependent covered by NRS 449.030 to 449.2428,
21 inclusive, *and section 24 of this act* and for programs of hospice
22 care.

23 (b) Regulations governing the licensing of such facilities and
24 programs.

25 (c) Regulations governing the procedure and standards for
26 granting an extension of the time for which a natural person may
27 provide certain care in his or her home without being considered a
28 residential facility for groups pursuant to NRS 449.017. The
29 regulations must require that such grants are effective only if made
30 in writing.

31 (d) Regulations establishing a procedure for the indemnification
32 by the Division, from the amount of any surety bond or other
33 obligation filed or deposited by a facility for refractive surgery
34 pursuant to NRS 449.068 or 449.069, of a patient of the facility who
35 has sustained any damages as a result of the bankruptcy of or any
36 breach of contract by the facility.

37 (e) Any other regulations as it deems necessary or convenient to
38 carry out the provisions of NRS 449.030 to 449.2428, inclusive **[H]**,
39 *and section 24 of this act.*

40 2. The Board shall adopt separate regulations governing the
41 licensing and operation of:

42 (a) Facilities for the care of adults during the day; and

43 (b) Residential facilities for groups,

44 ↪ which provide care to persons with Alzheimer's disease.

45 3. The Board shall adopt separate regulations for:



1 (a) The licensure of rural hospitals which take into consideration
2 the unique problems of operating such a facility in a rural area.

3 (b) The licensure of facilities for refractive surgery which take
4 into consideration the unique factors of operating such a facility.

5 (c) The licensure of mobile units which take into consideration
6 the unique factors of operating a facility that is not in a fixed
7 location.

8 4. The Board shall require that the practices and policies of
9 each medical facility or facility for the dependent provide
10 adequately for the protection of the health, safety and physical,
11 moral and mental well-being of each person accommodated in the
12 facility.

13 5. In addition to the training requirements prescribed pursuant
14 to NRS 449.093, the Board shall establish minimum qualifications
15 for administrators and employees of residential facilities for groups.
16 In establishing the qualifications, the Board shall consider the
17 related standards set by nationally recognized organizations which
18 accredit such facilities.

19 6. The Board shall adopt separate regulations regarding the
20 assistance which may be given pursuant to NRS 453.375 and
21 454.213 to an ultimate user of controlled substances or dangerous
22 drugs by employees of residential facilities for groups. The
23 regulations must require at least the following conditions before
24 such assistance may be given:

25 (a) The ultimate user's physical and mental condition is stable
26 and is following a predictable course.

27 (b) The amount of the medication prescribed is at a maintenance
28 level and does not require a daily assessment.

29 (c) A written plan of care by a physician or registered nurse has
30 been established that:

31 (1) Addresses possession and assistance in the administration
32 of the medication; and

33 (2) Includes a plan, which has been prepared under the
34 supervision of a registered nurse or licensed pharmacist, for
35 emergency intervention if an adverse condition results.

36 (d) The prescribed medication is not administered by injection
37 or intravenously.

38 (e) The employee has successfully completed training and
39 examination approved by the Division regarding the authorized
40 manner of assistance.

41 7. The Board shall adopt separate regulations governing the
42 licensing and operation of residential facilities for groups which
43 provide assisted living services. The Board shall not allow the
44 licensing of a facility as a residential facility for groups which



1 provides assisted living services and a residential facility for groups
2 shall not claim that it provides “assisted living services” unless:

3 (a) Before authorizing a person to move into the facility, the
4 facility makes a full written disclosure to the person regarding what
5 services of personalized care will be available to the person and the
6 amount that will be charged for those services throughout the
7 resident’s stay at the facility.

8 (b) The residents of the facility reside in their own living units
9 which:

10 (1) Except as otherwise provided in subsection 8, contain
11 toilet facilities;

12 (2) Contain a sleeping area or bedroom; and

13 (3) Are shared with another occupant only upon consent of
14 both occupants.

15 (c) The facility provides personalized care to the residents of the
16 facility and the general approach to operating the facility
17 incorporates these core principles:

18 (1) The facility is designed to create a residential
19 environment that actively supports and promotes each resident’s
20 quality of life and right to privacy;

21 (2) The facility is committed to offering high-quality
22 supportive services that are developed by the facility in
23 collaboration with the resident to meet the resident’s individual
24 needs;

25 (3) The facility provides a variety of creative and innovative
26 services that emphasize the particular needs of each individual
27 resident and the resident’s personal choice of lifestyle;

28 (4) The operation of the facility and its interaction with its
29 residents supports, to the maximum extent possible, each resident’s
30 need for autonomy and the right to make decisions regarding his or
31 her own life;

32 (5) The operation of the facility is designed to foster a social
33 climate that allows the resident to develop and maintain personal
34 relationships with fellow residents and with persons in the general
35 community;

36 (6) The facility is designed to minimize and is operated in a
37 manner which minimizes the need for its residents to move out of
38 the facility as their respective physical and mental conditions change
39 over time; and

40 (7) The facility is operated in such a manner as to foster a
41 culture that provides a high-quality environment for the residents,
42 their families, the staff, any volunteers and the community at large.

43 8. The Division may grant an exception to the requirement
44 of subparagraph (1) of paragraph (b) of subsection 7 to a facility
45 which is licensed as a residential facility for groups on or before



1 July 1, 2005, and which is authorized to have 10 or fewer beds and
2 was originally constructed as a single-family dwelling if the
3 Division finds that:

4 (a) Strict application of that requirement would result in
5 economic hardship to the facility requesting the exception; and

6 (b) The exception, if granted, would not:

7 (1) Cause substantial detriment to the health or welfare of
8 any resident of the facility;

9 (2) Result in more than two residents sharing a toilet facility;
10 or

11 (3) Otherwise impair substantially the purpose of that
12 requirement.

13 9. The Board shall, if it determines necessary, adopt
14 regulations and requirements to ensure that each residential facility
15 for groups and its staff are prepared to respond to an emergency,
16 including, without limitation:

17 (a) The adoption of plans to respond to a natural disaster and
18 other types of emergency situations, including, without limitation,
19 an emergency involving fire;

20 (b) The adoption of plans to provide for the evacuation of a
21 residential facility for groups in an emergency, including, without
22 limitation, plans to ensure that nonambulatory patients may be
23 evacuated;

24 (c) Educating the residents of residential facilities for groups
25 concerning the plans adopted pursuant to paragraphs (a) and (b); and

26 (d) Posting the plans or a summary of the plans adopted
27 pursuant to paragraphs (a) and (b) in a conspicuous place in each
28 residential facility for groups.

29 10. The regulations governing the licensing and operation of
30 facilities for transitional living for released offenders must provide
31 for the licensure of at least three different types of facilities,
32 including, without limitation:

33 (a) Facilities that only provide a housing and living
34 environment;

35 (b) Facilities that provide or arrange for the provision of
36 supportive services for residents of the facility to assist the residents
37 with reintegration into the community, in addition to providing a
38 housing and living environment; and

39 (c) Facilities that provide or arrange for the provision of alcohol
40 and drug abuse programs, in addition to providing a housing and
41 living environment and providing or arranging for the provision of
42 other supportive services.

43 ➤ The regulations must provide that if a facility was originally
44 constructed as a single-family dwelling, the facility must not be
45 authorized for more than eight beds.



1 11. As used in this section, "living unit" means an individual
2 private accommodation designated for a resident within the facility.

3 **Sec. 26.** NRS 449.0306 is hereby amended to read as follows:

4 449.0306 1. Money received from licensing medical facilities
5 and facilities for the dependent must be forwarded to the State
6 Treasurer for deposit in the State General Fund.

7 2. The Division shall enforce the provisions of NRS 449.030 to
8 449.245, inclusive, *and section 24 of this act* and may incur any
9 necessary expenses not in excess of money appropriated for that
10 purpose by the State or received from the Federal Government.

11 **Sec. 27.** NRS 449.160 is hereby amended to read as follows:

12 449.160 1. The Division may deny an application for a
13 license or may suspend or revoke any license issued under the
14 provisions of NRS 449.030 to 449.2428, inclusive, *and section 24*
15 *of this act* upon any of the following grounds:

16 (a) Violation by the applicant or the licensee of any of the
17 provisions of NRS 439B.410 or 449.030 to 449.245, inclusive, *and*
18 *section 24 of this act*, or of any other law of this State or of the
19 standards, rules and regulations adopted thereunder.

20 (b) Aiding, abetting or permitting the commission of any illegal
21 act.

22 (c) Conduct inimical to the public health, morals, welfare and
23 safety of the people of the State of Nevada in the maintenance and
24 operation of the premises for which a license is issued.

25 (d) Conduct or practice detrimental to the health or safety of the
26 occupants or employees of the facility.

27 (e) Failure of the applicant to obtain written approval from the
28 Director of the Department of Health and Human Services as
29 required by NRS 439A.100 or as provided in any regulation adopted
30 pursuant to NRS 449.001 to 449.430, inclusive, *and section 24 of*
31 *this act*, and 449.435 to 449.965, inclusive, if such approval is
32 required.

33 (f) Failure to comply with the provisions of NRS 449.2486.

34 2. In addition to the provisions of subsection 1, the Division
35 may revoke a license to operate a facility for the dependent if, with
36 respect to that facility, the licensee that operates the facility, or an
37 agent or employee of the licensee:

38 (a) Is convicted of violating any of the provisions of
39 NRS 202.470;

40 (b) Is ordered to but fails to abate a nuisance pursuant to NRS
41 244.360, 244.3603 or 268.4124; or

42 (c) Is ordered by the appropriate governmental agency to correct
43 a violation of a building, safety or health code or regulation but fails
44 to correct the violation.



1 3. The Division shall maintain a log of any complaints that it
2 receives relating to activities for which the Division may revoke the
3 license to operate a facility for the dependent pursuant to subsection
4 2. The Division shall provide to a facility for the care of adults
5 during the day:

6 (a) A summary of a complaint against the facility if the
7 investigation of the complaint by the Division either substantiates
8 the complaint or is inconclusive;

9 (b) A report of any investigation conducted with respect to the
10 complaint; and

11 (c) A report of any disciplinary action taken against the facility.

12 ➤ The facility shall make the information available to the public
13 pursuant to NRS 449.2486.

14 4. On or before February 1 of each odd-numbered year, the
15 Division shall submit to the Director of the Legislative Counsel
16 Bureau a written report setting forth, for the previous biennium:

17 (a) Any complaints included in the log maintained by the
18 Division pursuant to subsection 3; and

19 (b) Any disciplinary actions taken by the Division pursuant to
20 subsection 2.

21 **Sec. 28.** NRS 449.220 is hereby amended to read as follows:

22 449.220 1. The Division may bring an action in the name of
23 the State to enjoin any person, state or local government unit or
24 agency thereof from operating or maintaining any facility within the
25 meaning of NRS 449.030 to 449.2428, inclusive ~~§~~, *and section 24*
26 *of this act:*

27 (a) Without first obtaining a license therefor; or

28 (b) After his or her license has been revoked or suspended by
29 the Division.

30 2. It is sufficient in such action to allege that the defendant did,
31 on a certain date and in a certain place, operate and maintain such a
32 facility without a license.

33 **Sec. 29.** Chapter 616C of NRS is hereby amended by adding
34 thereto a new section to read as follows:

35 *1. Every policy of insurance issued pursuant to chapters*
36 *616A to 617, inclusive, of NRS must include coverage for services*
37 *provided to an employee through telehealth to the same extent and*
38 *in the same amount as though provided in person or by other*
39 *means.*

40 *2. An insurer shall not:*

41 *(a) Require an employee to establish a relationship in person*
42 *with a provider of health care or provide any additional consent to*
43 *or reason for obtaining services through telehealth as a condition*
44 *to providing the coverage described in subsection 1;*



1 *(b) Require a provider of health care to demonstrate that it is*
2 *necessary to provide services to an employee through telehealth or*
3 *receive any additional type of certification or license to provide*
4 *services through telehealth as a condition to providing the*
5 *coverage described in subsection 1;*

6 *(c) Refuse to provide the coverage described in subsection 1*
7 *because of the location from which a provider of health care*
8 *provides services through telehealth or at which an employee*
9 *receives services through telehealth; or*

10 *(d) Require covered services to be provided through telehealth*
11 *as a condition to providing coverage for such services.*

12 **3.** *A policy of insurance issued pursuant to chapters 616A to*
13 *617, inclusive, of NRS must not require an employee to obtain*
14 *prior authorization for any service provided through telehealth*
15 *that is not required for the service when provided in person.*

16 **4.** *A policy of insurance subject to the provisions of chapters*
17 *616A to 617, inclusive, of NRS that is delivered, issued for delivery*
18 *or renewed on or after July 1, 2015, has the legal effect of*
19 *including the coverage required by this section, and any provision*
20 *of the policy or the renewal which is in conflict with this section is*
21 *void.*

22 **5.** *As used in this section:*

23 *(a) "Provider of health care" has the meaning ascribed to it in*
24 *NRS 439.820.*

25 *(b) "Telehealth" has the meaning ascribed to it in section 3 of*
26 *this act.*

27 **Sec. 30.** NRS 687B.490 is hereby amended to read as follows:

28 687B.490 1. A carrier that offers coverage in the group or
29 individual market must, before making any network plan available
30 for sale in this State, demonstrate the capacity to deliver services
31 adequately by applying to the Commissioner for the issuance of a
32 network plan and submitting a description of the procedures and
33 programs to be implemented to meet the requirements described in
34 subsection 2.

35 2. The Commissioner shall determine, within 90 days after
36 receipt of the application required pursuant to subsection 1, if the
37 carrier, with respect to the network plan:

38 (a) Has demonstrated the willingness and ability to ensure that
39 health care services will be provided in a manner to ensure both
40 availability and accessibility of adequate personnel and facilities in a
41 manner that enhances availability, accessibility and continuity of
42 service;

43 (b) Has organizational arrangements established in accordance
44 with regulations promulgated by the Commissioner; and



1 (c) Has a procedure established in accordance with regulations
2 promulgated by the Commissioner to develop, compile, evaluate
3 and report statistics relating to the cost of its operations, the pattern
4 of utilization of its services, the availability and accessibility of its
5 services and such other matters as may be reasonably required by
6 the Commissioner.

7 3. The Commissioner may certify that the carrier and the
8 network plan meet the requirements of subsection 2, or may
9 determine that the carrier and the network plan do not meet such
10 requirements. Upon a determination that the carrier and the network
11 plan do not meet the requirements of subsection 2, the
12 Commissioner shall specify in what respects the carrier and the
13 network plan are deficient.

14 4. A carrier approved to issue a network plan pursuant to this
15 section must file annually with the Commissioner a summary of
16 information compiled pursuant to subsection 2 in a manner
17 determined by the Commissioner.

18 5. The Commissioner shall, not less than once each year, or
19 more often if deemed necessary by the Commissioner for the
20 protection of the interests of the people of this State, make a
21 determination concerning the availability and accessibility of the
22 health care services of any network plan approved pursuant to this
23 section.

24 6. The expense of any determination made by the
25 Commissioner pursuant to this section must be assessed against the
26 carrier and remitted to the Commissioner.

27 7. *When making any determination concerning the*
28 *availability and accessibility of the services of any network plan or*
29 *proposed network plan pursuant to this section, the Commissioner*
30 *shall consider services that may be provided through telehealth*
31 *pursuant to the network plan or proposed network plan to be*
32 *available services.*

33 8. As used in this section, "network plan" has the meaning
34 ascribed to it in NRS 689B.570.

35 **Sec. 31.** Chapter 689A of NRS is hereby amended by adding
36 thereto a new section to read as follows:

37 1. *A policy of health insurance must include coverage for*
38 *services provided to an insured through telehealth to the same*
39 *extent and in the same amount as though provided in person or by*
40 *other means.*

41 2. *An insurer shall not:*

42 (a) *Require an insured to establish a relationship in person*
43 *with a provider of health care or provide any additional consent to*
44 *or reason for obtaining services through telehealth as a condition*
45 *to providing the coverage described in subsection 1;*



1 *(b) Require a provider of health care to demonstrate that it is*
2 *necessary to provide services to an insured through telehealth or*
3 *receive any additional type of certification or license to provide*
4 *services through telehealth as a condition to providing the*
5 *coverage described in subsection 1;*

6 *(c) Refuse to provide the coverage described in subsection 1*
7 *because of the location from which a provider of health care*
8 *provides services through telehealth or at which an insured*
9 *receives services through telehealth; or*

10 *(d) Require covered services to be provided through telehealth*
11 *as a condition to providing coverage for such services.*

12 3. *A policy of health insurance must not require an insured to*
13 *obtain prior authorization for any service provided through*
14 *telehealth that is not required for the service when provided in*
15 *person.*

16 4. *A policy of health insurance subject to the provisions of*
17 *this chapter that is delivered, issued for delivery or renewed on or*
18 *after July 1, 2015, has the legal effect of including the coverage*
19 *required by this section, and any provision of the policy or the*
20 *renewal which is in conflict with this section is void.*

21 5. *As used in this section:*

22 (a) *“Provider of health care” has the meaning ascribed to it in*
23 *NRS 439.820.*

24 (b) *“Telehealth” has the meaning ascribed to it in section 3 of*
25 *this act.*

26 **Sec. 32.** NRS 689A.330 is hereby amended to read as follows:

27 689A.330 If any policy is issued by a domestic insurer for
28 delivery to a person residing in another state, and if the insurance
29 commissioner or corresponding public officer of that other state has
30 informed the Commissioner that the policy is not subject to approval
31 or disapproval by that officer, the Commissioner may by ruling
32 require that the policy meet the standards set forth in NRS 689A.030
33 to 689A.320, inclusive **[H]**, *and section 31 of this act.*

34 **Sec. 33.** Chapter 689B of NRS is hereby amended by adding
35 thereto a new section to read as follows:

36 1. *A policy of group or blanket health insurance must include*
37 *coverage for services provided to an insured through telehealth to*
38 *the same extent and in the same amount as though provided in*
39 *person or by other means.*

40 2. *An insurer shall not:*

41 (a) *Require an insured to establish a relationship in person*
42 *with a provider of health care or provide any additional consent to*
43 *or reason for obtaining services through telehealth as a condition*
44 *to providing the coverage described in subsection 1;*



1 *(b) Require a provider of health care to demonstrate that it is*
2 *necessary to provide services to an insured through telehealth or*
3 *receive any additional type of certification or license to provide*
4 *services through telehealth as a condition to providing the*
5 *coverage described in subsection 1;*

6 *(c) Refuse to provide the coverage described in subsection 1*
7 *because of the location from which a provider of health care*
8 *provides services through telehealth or at which an insured*
9 *receives services through telehealth; or*

10 *(d) Require covered services to be provided through telehealth*
11 *as a condition to providing coverage for such services.*

12 **3.** *A policy of group or blanket health insurance must not*
13 *require an insured to obtain prior authorization for any service*
14 *provided through telehealth that is not required for that service*
15 *when provided in person.*

16 **4.** *A policy of group or blanket health insurance subject to*
17 *the provisions of this chapter that is delivered, issued for delivery*
18 *or renewed on or after July 1, 2015, has the legal effect of*
19 *including the coverage required by this section, and any provision*
20 *of the policy or the renewal which is in conflict with this section is*
21 *void.*

22 **5.** *As used in this section:*

23 *(a) "Provider of health care" has the meaning ascribed to it in*
24 *NRS 439.820.*

25 *(b) "Telehealth" has the meaning ascribed to it in section 3 of*
26 *this act.*

27 **Sec. 34.** Chapter 689C of NRS is hereby amended by adding
28 thereto a new section to read as follows:

29 **1.** *A health benefit plan must include coverage for services*
30 *provided to an insured through telehealth to the same extent and*
31 *in the same amount as though provided in person or by other*
32 *means.*

33 **2.** *A carrier shall not:*

34 *(a) Require an insured to establish a relationship in person*
35 *with a provider of health care or provide any additional consent to*
36 *or reason for obtaining services through telehealth as a condition*
37 *to providing the coverage described in subsection 1;*

38 *(b) Require a provider of health care to demonstrate that it is*
39 *necessary to provide services to an insured through telehealth or*
40 *receive any additional type of certification or license to provide*
41 *services through telehealth as a condition to providing the*
42 *coverage described in subsection 1;*

43 *(c) Refuse to provide the coverage described in subsection 1*
44 *because of the location from which a provider of health care*



1 *provides services through telehealth or at which an insured*
2 *receives services through telehealth; or*

3 *(d) Require covered services to be provided through telehealth*
4 *as a condition to providing coverage for such services.*

5 3. *A health benefit plan must not require an insured to obtain*
6 *prior authorization for any service provided through telehealth*
7 *that is not required for the service when provided in person.*

8 4. *A plan subject to the provisions of this chapter that is*
9 *delivered, issued for delivery or renewed on or after July 1, 2015,*
10 *has the legal effect of including the coverage required by this*
11 *section, and any provision of the plan or the renewal which is in*
12 *conflict with this section is void.*

13 5. *As used in this section:*

14 (a) *“Provider of health care” has the meaning ascribed to it in*
15 *NRS 439.820.*

16 (b) *“Telehealth” has the meaning ascribed to it in section 3 of*
17 *this act.*

18 **Sec. 35.** NRS 689C.155 is hereby amended to read as follows:

19 689C.155 The Commissioner may adopt regulations to carry
20 out the provisions of NRS 689C.109 to 689C.143, inclusive,
21 689C.156 to 689C.159, inclusive, 689C.165, 689C.183, 689C.187,
22 689C.191 to 689C.198, inclusive, *and section 34 of this act,*
23 689C.203, 689C.207, 689C.265, 689C.325, 689C.355 and 689C.610
24 to 689C.940, inclusive, and to ensure that rating practices used by
25 carriers serving small employers are consistent with those sections,
26 including regulations that:

27 1. Ensure that differences in rates charged for health benefit
28 plans by such carriers are reasonable and reflect only differences in
29 the designs of the plans, the terms of the coverage, the amount
30 contributed by the employers to the cost of coverage and differences
31 based on the rating factors established by the carrier.

32 2. Prescribe the manner in which rating factors may be used by
33 such carriers.

34 **Sec. 36.** NRS 689C.156 is hereby amended to read as follows:

35 689C.156 1. As a condition of transacting business in this
36 State with small employers, a carrier shall actively market to a small
37 employer each health benefit plan which is actively marketed in this
38 State by the carrier to any small employer in this State. A carrier
39 shall be deemed to be actively marketing a health benefit plan when
40 it makes available any of its plans to a small employer that is not
41 currently receiving coverage under a health benefit plan issued by
42 that carrier.

43 2. A carrier shall issue to a small employer any health benefit
44 plan marketed in accordance with this section if the eligible small
45 employer applies for the plan and agrees to make the required



1 premium payments and satisfy the other reasonable provisions of the
2 health benefit plan that are not inconsistent with NRS 689C.015 to
3 689C.355, inclusive, *and section 34 of this act*, and 689C.610 to
4 689C.940, inclusive, except that a carrier is not required to issue a
5 health benefit plan to a self-employed person who is covered by, or
6 is eligible for coverage under, a health benefit plan offered by
7 another employer.

8 3. If a health benefit plan marketed pursuant to this section
9 provides, delivers, arranges for, pays for or reimburses any cost of
10 health care services through managed care, the carrier shall provide
11 a system for resolving any complaints of an employee concerning
12 those health care services that complies with the provisions of NRS
13 695G.200 to 695G.310, inclusive.

14 **Sec. 37.** NRS 689C.425 is hereby amended to read as follows:

15 689C.425 A voluntary purchasing group and any contract
16 issued to such a group pursuant to NRS 689C.360 to 689C.600,
17 inclusive, are subject to the provisions of NRS 689C.015 to
18 689C.355, inclusive, *and section 34 of this act* to the extent
19 applicable and not in conflict with the express provisions of NRS
20 687B.408 and 689C.360 to 689C.600, inclusive.

21 **Sec. 38.** Chapter 695A of NRS is hereby amended by adding
22 thereto a new section to read as follows:

23 *1. A benefit contract must include coverage for services*
24 *provided to an insured through telehealth to the same extent and*
25 *in the same amount as though provided in person or by other*
26 *means.*

27 *2. A society shall not:*

28 *(a) Require an insured to establish a relationship in person*
29 *with a provider of health care or provide any additional consent to*
30 *or reason for obtaining services through telehealth as a condition*
31 *to providing the coverage described in subsection 1;*

32 *(b) Require a provider of health care to demonstrate that it is*
33 *necessary to provide services to an insured through telehealth or*
34 *receive any additional type of certification or license to provide*
35 *services through telehealth as a condition to providing the*
36 *coverage described in subsection 1;*

37 *(c) Refuse to provide the coverage described in subsection 1*
38 *because of the location from which a provider of health care*
39 *provides services through telehealth or at which an insured*
40 *receives services through telehealth; or*

41 *(d) Require covered services to be provided through telehealth*
42 *as a condition to providing coverage for such services.*

43 *3. A benefit contract must not require an insured to obtain*
44 *prior authorization for any service provided through telehealth*
45 *that is not required for the service when provided in person.*



1 4. *A benefit contract subject to the provisions of this chapter*
2 *that is delivered, issued for delivery or renewed on or after July 1,*
3 *2015, has the legal effect of including the coverage required by*
4 *this section, and any provision of the contract or the renewal*
5 *which is in conflict with this section is void.*

6 5. *As used in this section:*

7 (a) *“Provider of health care” has the meaning ascribed to it in*
8 *NRS 439.820.*

9 (b) *“Telehealth” has the meaning ascribed to it in section 3 of*
10 *this act.*

11 **Sec. 39.** Chapter 695B of NRS is hereby amended by adding
12 thereto a new section to read as follows:

13 1. *A contract for hospital, medical or dental services subject*
14 *to the provisions of this chapter must include services provided to*
15 *an insured through telehealth to the same extent and in the same*
16 *amount as though provided in person or by other means.*

17 2. *A medical services corporation that issues contracts for*
18 *hospital, medical or dental services shall not:*

19 (a) *Require an insured to establish a relationship in person*
20 *with a provider of health care or provide any additional consent to*
21 *or reason for obtaining services through telehealth as a condition*
22 *to providing the coverage described in subsection 1;*

23 (b) *Require a provider of health care to demonstrate that it is*
24 *necessary to provide services to an insured through telehealth or*
25 *receive any additional type of certification or license to provide*
26 *services through telehealth as a condition to providing the*
27 *coverage described in subsection 1;*

28 (c) *Refuse to provide the coverage described in subsection 1*
29 *because of the location from which a provider of health care*
30 *provides services through telehealth or at which an insured*
31 *receives services through telehealth; or*

32 (d) *Require covered services to be provided through telehealth*
33 *as a condition to providing coverage for such services.*

34 3. *A contract for hospital, medical or dental services must not*
35 *require an insured to obtain prior authorization for any service*
36 *provided through telehealth that is not required for the service*
37 *when provided in person.*

38 4. *A contract for hospital, medical or dental services subject*
39 *to the provisions of this chapter that is delivered, issued for*
40 *delivery or renewed on or after July 1, 2015, has the legal effect of*
41 *including the coverage required by this section, and any provision*
42 *of the contract or the renewal which is in conflict with this section*
43 *is void.*

44 5. *As used in this section:*



1 (a) "Provider of health care" has the meaning ascribed to it in
2 NRS 439.820.

3 (b) "Telehealth" has the meaning ascribed to it in section 3 of
4 this act.

5 **Sec. 40.** Chapter 695C of NRS is hereby amended by adding
6 thereto a new section to read as follows:

7 1. A health care plan of a health maintenance organization
8 must include coverage for services provided to an enrollee through
9 telehealth to the same extent and in the same amount as though
10 provided in person or by other means.

11 2. A health maintenance organization shall not:

12 (a) Require an enrollee to establish a relationship in person
13 with a provider of health care or provide any additional consent to
14 or reason for obtaining services through telehealth as a condition
15 to providing the coverage described in subsection 1;

16 (b) Require a provider of health care to demonstrate that it is
17 necessary to provide services to an enrollee through telehealth or
18 receive any additional type of certification or license to provide
19 services through telehealth as a condition to providing the
20 coverage described in subsection 1;

21 (c) Refuse to provide the coverage described in subsection 1
22 because of the location from which a provider of health care
23 provides services through telehealth or at which an enrollee
24 receives services through telehealth; or

25 (d) Require covered services to be provided through telehealth
26 as a condition to providing coverage for such services.

27 3. A health care plan of a health maintenance organization
28 must not require an enrollee to obtain prior authorization for any
29 service provided through telehealth that is not required for the
30 service when provided in person.

31 4. Evidence of coverage subject to the provisions of this
32 chapter that is delivered, issued for delivery or renewed on or after
33 July 1, 2015, has the legal effect of including the coverage
34 required by this section, and any provision of the plan or the
35 renewal which is in conflict with this section is void.

36 5. As used in this section:

37 (a) "Provider of health care" has the meaning ascribed to it in
38 NRS 439.820.

39 (b) "Telehealth" has the meaning ascribed to it in section 3 of
40 this act.

41 **Sec. 41.** NRS 695C.050 is hereby amended to read as follows:
42 695C.050 1. Except as otherwise provided in this chapter or
43 in specific provisions of this title, the provisions of this title are not
44 applicable to any health maintenance organization granted a
45 certificate of authority under this chapter. This provision does not



1 apply to an insurer licensed and regulated pursuant to this title
2 except with respect to its activities as a health maintenance
3 organization authorized and regulated pursuant to this chapter.

4 2. Solicitation of enrollees by a health maintenance
5 organization granted a certificate of authority, or its representatives,
6 must not be construed to violate any provision of law relating to
7 solicitation or advertising by practitioners of a healing art.

8 3. Any health maintenance organization authorized under this
9 chapter shall not be deemed to be practicing medicine and is exempt
10 from the provisions of chapter 630 of NRS.

11 4. The provisions of NRS 695C.110, 695C.125, 695C.1691,
12 695C.1693, 695C.170 to 695C.173, inclusive, 695C.1733 to
13 695C.200, inclusive, and 695C.265 do not apply to a health
14 maintenance organization that provides health care services through
15 managed care to recipients of Medicaid under the State Plan for
16 Medicaid or insurance pursuant to the Children's Health Insurance
17 Program pursuant to a contract with the Division of Health Care
18 Financing and Policy of the Department of Health and Human
19 Services. This subsection does not exempt a health maintenance
20 organization from any provision of this chapter for services
21 provided pursuant to any other contract.

22 5. The provisions of NRS 695C.1694, 695C.1695 and
23 695C.1731 *and section 40 of this act* apply to a health maintenance
24 organization that provides health care services through managed
25 care to recipients of Medicaid under the State Plan for Medicaid.

26 **Sec. 42.** NRS 695C.330 is hereby amended to read as follows:

27 695C.330 1. The Commissioner may suspend or revoke any
28 certificate of authority issued to a health maintenance organization
29 pursuant to the provisions of this chapter if the Commissioner finds
30 that any of the following conditions exist:

31 (a) The health maintenance organization is operating
32 significantly in contravention of its basic organizational document,
33 its health care plan or in a manner contrary to that described in and
34 reasonably inferred from any other information submitted pursuant
35 to NRS 695C.060, 695C.070 and 695C.140, unless any amendments
36 to those submissions have been filed with and approved by the
37 Commissioner;

38 (b) The health maintenance organization issues evidence of
39 coverage or uses a schedule of charges for health care services
40 which do not comply with the requirements of NRS 695C.1691 to
41 695C.200, inclusive, *and section 40 of this act* or 695C.207;

42 (c) The health care plan does not furnish comprehensive health
43 care services as provided for in NRS 695C.060;

44 (d) The Commissioner certifies that the health maintenance
45 organization:



1 (1) Does not meet the requirements of subsection 1 of NRS
2 695C.080; or

3 (2) Is unable to fulfill its obligations to furnish health care
4 services as required under its health care plan;

5 (e) The health maintenance organization is no longer financially
6 responsible and may reasonably be expected to be unable to meet its
7 obligations to enrollees or prospective enrollees;

8 (f) The health maintenance organization has failed to put into
9 effect a mechanism affording the enrollees an opportunity to
10 participate in matters relating to the content of programs pursuant to
11 NRS 695C.110;

12 (g) The health maintenance organization has failed to put into
13 effect the system required by NRS 695C.260 for:

14 (1) Resolving complaints in a manner reasonably to dispose
15 of valid complaints; and

16 (2) Conducting external reviews of adverse determinations
17 that comply with the provisions of NRS 695G.241 to 695G.310,
18 inclusive;

19 (h) The health maintenance organization or any person on its
20 behalf has advertised or merchandised its services in an untrue,
21 misrepresentative, misleading, deceptive or unfair manner;

22 (i) The continued operation of the health maintenance
23 organization would be hazardous to its enrollees;

24 (j) The health maintenance organization fails to provide the
25 coverage required by NRS 695C.1691; or

26 (k) The health maintenance organization has otherwise failed to
27 comply substantially with the provisions of this chapter.

28 2. A certificate of authority must be suspended or revoked only
29 after compliance with the requirements of NRS 695C.340.

30 3. If the certificate of authority of a health maintenance
31 organization is suspended, the health maintenance organization shall
32 not, during the period of that suspension, enroll any additional
33 groups or new individual contracts, unless those groups or persons
34 were contracted for before the date of suspension.

35 4. If the certificate of authority of a health maintenance
36 organization is revoked, the organization shall proceed, immediately
37 following the effective date of the order of revocation, to wind up its
38 affairs and shall conduct no further business except as may be
39 essential to the orderly conclusion of the affairs of the organization.
40 It shall engage in no further advertising or solicitation of any kind.
41 The Commissioner may, by written order, permit such further
42 operation of the organization as the Commissioner may find to be in
43 the best interest of enrollees to the end that enrollees are afforded
44 the greatest practical opportunity to obtain continuing coverage for
45 health care.



1 **Sec. 43.** Chapter 695D of NRS is hereby amended by adding
2 thereto a new section to read as follows:

3 1. *A plan for dental care must include coverage for services*
4 *provided to a member through telehealth to the same extent and in*
5 *the same amount as though provided in person or by other means.*

6 2. *An organization for dental care shall not:*

7 (a) *Require a member to establish a relationship in person*
8 *with a provider of health care or provide any additional consent to*
9 *or reason for obtaining services through telehealth as a condition*
10 *to providing the coverage described in subsection 1;*

11 (b) *Require a provider of health care to demonstrate that it is*
12 *necessary to provide services to a member through telehealth or*
13 *receive any additional type of certification or license to provide*
14 *services through telehealth as a condition to providing the*
15 *coverage described in subsection 1;*

16 (c) *Refuse to provide the coverage described in subsection 1*
17 *because of the location from which a provider of health care*
18 *provides services through telehealth or at which a member*
19 *receives services through telehealth; or*

20 (d) *Require covered services to be provided through telehealth*
21 *as a condition to providing coverage for such services.*

22 3. *A plan for dental care must not require a member to obtain*
23 *prior authorization for any service provided through telehealth*
24 *that is not required for the service when provided in person.*

25 4. *A plan for dental care subject to the provisions of this*
26 *chapter that is delivered, issued for delivery or renewed on or after*
27 *July 1, 2015, has the legal effect of including the coverage*
28 *required by this section, and any provision of the plan or the*
29 *renewal which is in conflict with this section is void.*

30 5. *As used in this section:*

31 (a) *“Provider of health care” has the meaning ascribed to it in*
32 *NRS 439.820.*

33 (b) *“Telehealth” has the meaning ascribed to it in section 3 of*
34 *this act.*

35 **Sec. 44.** NRS 695F.090 is hereby amended to read as follows:

36 695F.090 Prepaid limited health service organizations are
37 subject to the provisions of this chapter and to the following
38 provisions, to the extent reasonably applicable:

39 1. NRS 687B.310 to 687B.420, inclusive, concerning
40 cancellation and nonrenewal of policies.

41 2. NRS 687B.122 to 687B.128, inclusive, concerning
42 readability of policies.

43 3. The requirements of NRS 679B.152.

44 4. The fees imposed pursuant to NRS 449.465.



1 5. NRS 686A.010 to 686A.310, inclusive, concerning trade
2 practices and frauds.

3 6. The assessment imposed pursuant to NRS 679B.700.

4 7. Chapter 683A of NRS.

5 8. To the extent applicable, the provisions of NRS 689B.340 to
6 689B.580, inclusive, and chapter 689C of NRS relating to the
7 portability and availability of health insurance.

8 9. NRS 689A.035, 689A.410, 689A.413 and 689A.415 ~~§~~ **and**
9 **section 31 of this act.**

10 10. NRS 680B.025 to 680B.039, inclusive, concerning
11 premium tax, premium tax rate, annual report and estimated
12 quarterly tax payments. For the purposes of this subsection, unless
13 the context otherwise requires that a section apply only to insurers,
14 any reference in those sections to “insurer” must be replaced by a
15 reference to “prepaid limited health service organization.”

16 11. Chapter 692C of NRS, concerning holding companies.

17 12. NRS 689A.637, concerning health centers.

18 **Sec. 45.** Chapter 695G of NRS is hereby amended by adding
19 thereto a new section to read as follows:

20 ***1. A health care plan issued by a managed care organization***
21 ***for group coverage must include coverage for services provided to***
22 ***an insured through telehealth to the same extent and in the same***
23 ***amount as though provided in person or by other means.***

24 ***2. A managed care organization shall not:***

25 ***(a) Require an insured to establish a relationship in person***
26 ***with a provider of health care or provide any additional consent to***
27 ***or reason for obtaining services through telehealth as a condition***
28 ***to providing the coverage described in subsection 1;***

29 ***(b) Require a provider of health care to demonstrate that it is***
30 ***necessary to provide services to an insured through telehealth or***
31 ***receive any additional type of certification or license to provide***
32 ***services through telehealth as a condition to providing the***
33 ***coverage described in subsection 1;***

34 ***(c) Refuse to provide the coverage described in subsection 1***
35 ***because of the location from which a provider of health care***
36 ***provides services through telehealth or at which an insured***
37 ***receives services through telehealth; or***

38 ***(d) Require covered services to be provided through telehealth***
39 ***as a condition to providing coverage for such services.***

40 ***3. A health care plan of a managed care organization must***
41 ***not require an insured to obtain prior authorization for any***
42 ***service provided through telehealth that is not required for the***
43 ***service when provided in person.***

44 ***4. Evidence of coverage that is delivered, issued for delivery***
45 ***or renewed on or after July 1, 2015, has the legal effect of***



1 *including the coverage required by this section, and any provision*
2 *of the plan or the renewal which is in conflict with this section is*
3 *void.*

4 *5. As used in this section:*

5 *(a) "Provider of health care" has the meaning ascribed to it in*
6 *NRS 439.820.*

7 *(b) "Telehealth" has the meaning ascribed to it in section 3 of*
8 *this act.*

9 **Sec. 46.** NRS 633.165 is hereby repealed.

10 **Sec. 47.** This act becomes effective on July 1, 2015.

TEXT OF REPEALED SECTION

633.165 Telemedicine: Requirements for practice; exceptions; scope.

1. An osteopathic physician may engage in telemedicine from within or outside this State or the United States if he or she possesses an unrestricted license to practice osteopathic medicine in this State pursuant to this chapter. An osteopathic physician who engages in telemedicine:

(a) Except as otherwise provided by specific statute or regulation, shall comply with the provisions of this chapter and the regulations of the Board; and

(b) To the extent not inconsistent with the Nevada Constitution or the United States Constitution, is subject to the jurisdiction of the courts of this State.

2. If an osteopathic physician engages in telemedicine with a patient who is physically located in another state or territory of the United States, the osteopathic physician shall, before engaging in telemedicine with the patient, take any steps necessary to be authorized or licensed to practice osteopathic medicine in the other state or territory of the United States in which the patient is physically located.

3. Except as otherwise provided in subsections 4 and 5, before an osteopathic physician may engage in telemedicine pursuant to this section:

(a) A bona fide relationship between the osteopathic physician and the patient must exist which must include, without limitation, a history and an examination or consultation which occurred in person or through the use of telemedicine and which was sufficient to establish a diagnosis and identify any underlying medical conditions of the patient.



(b) The osteopathic physician must obtain informed consent from the patient or the legal representative of the patient to engage in telemedicine with the patient. The osteopathic physician shall document the consent as part of the permanent medical record of the patient.

(c) The osteopathic physician must inform the patient:

(1) That the patient or the legal representative of the patient may withdraw the consent provided pursuant to paragraph (b) at any time;

(2) Of the potential risks, consequences and benefits of telemedicine;

(3) Whether the osteopathic physician has a financial interest in the Internet website used to engage in telemedicine or in the products or services provided to the patient via telemedicine; and

(4) That the transmission of any confidential medical information while engaged in telemedicine is subject to all applicable federal and state laws with respect to the protection of and access to confidential medical information.

4. An osteopathic physician is not required to comply with the provisions of paragraph (a) of subsection 3 if the osteopathic physician engages in telemedicine for the purposes of making a diagnostic interpretation of a medical examination, study or test of the patient.

5. An osteopathic physician is not required to comply with the provisions of paragraph (a) or (c) of subsection 3 in an emergency medical situation.

6. The provisions of this section must not be interpreted or construed to:

(a) Modify, expand or alter the scope of practice of an osteopathic physician pursuant to this chapter; or

(b) Authorize the practice of osteopathic medicine or delivery of care by an osteopathic physician in a setting that is not authorized by law or in a manner that violates the standard of care required of an osteopathic physician pursuant to this chapter.

7. As used in this section, “telemedicine” means the practice of osteopathic medicine by using equipment that transfers information concerning the medical condition of a patient electronically, telephonically or by fiber optics.

