SENATE BILL NO. 332-SENATOR AMODEI

MARCH 17, 2003

Referred to Committee on Human Resources and Facilities

SUMMARY—Revises qualifications of State Health Officer, clarifies restrictions on use of "M.D." title and makes various changes relating to licensure of physicians and Board of Medical Examiners. (BDR 40-1036)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: No.

EXPLANATION - Matter in bolded italics is new; matter between brackets fomitted materiall is material to be omitted.

AN ACT relating to public health; revising the provisions governing the qualifications and appointment of the State Health Officer; providing for the licensure of administrative physicians; authorizing the Board of Medical Examiners to waive certain requirements for licensure to practice medicine if the Governor declares a state of critical need exists for certain medical specialties; authorizing the Board to issue a license by endorsement to practice medicine to certain qualified applicants who have been issued a license to practice medicine by the District of Columbia or any state or territory of the United States; requiring the Board to maintain a website on the Internet; revising certain requirements for the issuance of a license to practice medicine; clarifying certain restrictions on the use of the title "M.D."; and providing other matters properly relating thereto.

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

- 1 **Section 1.** NRS 439.090 is hereby amended to read as follows:
- 2 439.090 1. The State Health Officer must:
- 3 (a) Be a citizen of the United States.

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- (b) [Be certified, or eligible for certification, by the American Board of Preventive Medicine.
- (c)] Be licensed, or eligible for licensure, as a [doctor of medicine to practice] physician or administrative physician in Nevada.
- 2. The Administrator must have [had] 2 years' experience, or the equivalent, in a responsible administrative position in:
 - (a) A full-time county or city health facility or department; or
 - (b) A major health program at a state or national level.

- Sec. 1.5. NRS 439.100 is hereby amended to read as follows: 439.100 1. The Director shall appoint a State Health Officer.
- 2. The position of State Health Officer must be filled by the Director within 6 months after it becomes vacant, except that if a qualified applicant does not accept the position within that period, the Director shall continue his efforts to fill the position until a qualified person accepts the appointment.
- 3. The State Health Officer is in the unclassified service of the State and serves at the pleasure of the Director.
- **Sec. 2.** Chapter 630 of NRS is hereby amended by adding thereto the provisions set forth as sections 3 to 7, inclusive, of this act.
- Sec. 3. "Administrative physician" means a physician who is licensed only to act in an administrative capacity as an:
 - 1. Officer or employee of a state agency; or
- 25 2. Independent contractor pursuant to a contract with the 26 State.
 - Sec. 4. 1. A person may apply to the Board to be licensed as an administrative physician if the person meets all of the statutory requirements for licensure in effect at the time of application except the requirements of paragraph (d) of subsection 2 of NRS 630.160.
 - 2. A person who is licensed as an administrative physician pursuant to this section:
 - (a) May not engage in the practice of medicine;
 - (b) Shall comply with all of the statutory requirements for continued licensure pursuant to this chapter; and
 - (c) Shall be deemed to hold a license to practice medicine in an administrative capacity only.
 - Sec. 5. 1. If the Governor determines that there are critically unmet needs with regard to the number of physicians who are practicing a medical specialty within this state, the Governor may declare that a state of critical medical need exists for that medical specialty. The Governor may, but is not required to, limit such a declaration to one or more geographic areas within this state.



2. In determining whether there are critically unmet needs with regard to the number of physicians who are practicing a medical specialty, the Governor may consider, without limitation:

- (a) Any statistical data analyzing the number of physicians who are practicing the medical specialty in relation to the total population of this state or any geographic area within this state;
- (b) The demand within this state or any geographic area within this state for the types of services provided by the medical specialty; and
- (c) Any other factors relating to the medical specialty that may adversely affect the delivery of health care within this state or any geographic area within this state.
- 3. If the Governor makes a declaration pursuant to this section, the Board may waive the requirements of paragraph (d) of subsection 2 of NRS 630.160 for an applicant if the applicant:
- (a) Intends to practice medicine in one or more of the medical specialties designated by the Governor in his declaration and, if the Governor has limited his declaration to one or more geographic areas within this state, in one or more of those geographic areas;
- (b) Has completed at least 1 year of training as a resident in the United States or Canada in a program approved by the Board, the Accreditation Council for Graduate Medical Education or the Coordinating Council of Medical Education of the Canadian Medical Association, respectively;
- (c) Has a minimum of 5 years of practical medical experience as a licensed allopathic physician or such other equivalent training as the Board deems appropriate; and
- (d) Meets all other conditions and requirements for a license to practice medicine.
- 4. Any license issued pursuant to this section is a restricted license, and the person who holds the restricted license may practice medicine in this state only in the medical specialties and geographic areas for which the restricted license is issued.
- 5. Any person who holds a restricted license issued pursuant to this section and who completes 3 years of full-time practice under the restricted license may apply to the Board for an unrestricted license. In considering an application for an unrestricted license pursuant to this subsection, the Board shall require the applicant to meet all statutory requirements for licensure in effect at the time of application except the requirements of paragraph (d) of subsection 2 of NRS 630.160.
- Sec. 6. Except as otherwise provided in NRS 630.161, the Board may issue a license by endorsement to practice medicine to an applicant who has been issued a license to practice medicine by



- the District of Columbia or any state or territory of the United States if:
- 1. At the time the applicant files his application with the Board, the license is in effect;
 - 2. The applicant:

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- (a) Submits to the Board proof of passage of an examination approved by the Board;
- (b) Submits to the Board any documentation and other proof of qualifications required by the Board;
- (c) Meets all of the statutory requirements for licensure to practice medicine in effect at the time of application except for the requirements set forth in NRS 630.160; and
- (d) Completes any additional requirements relating to the fitness of the applicant to practice required by the Board; and
- 3. Any documentation and other proof of qualifications required by the Board is authenticated in a manner approved by the Board.
- Sec. 7. 1. The Board shall maintain a website on the Internet or its successor.
 - 2. The Board shall place on the website:
- (a) Each application form for the issuance or renewal of a license issued by the Board pursuant to this chapter; and
- (b) A list of questions that are frequently asked concerning the processes of the Board and the answers to those questions.
- **Sec. 8.** NRS 630.005 is hereby amended to read as follows: 630.005 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 630.010 to 630.025, inclusive, and section 3 of this act have the meanings ascribed to them in those sections.
 - **Sec. 9.** NRS 630.020 is hereby amended to read as follows: 630.020 "Practice of medicine" means:
- 1. To diagnose, treat, correct, prevent or prescribe for any human disease, ailment, injury, infirmity, deformity or other condition, physical or mental, by any means or instrumentality.
- 2. To apply principles or techniques of medical science in the diagnosis or the prevention of any such conditions.
- 3. To perform any of the acts described in subsections 1 and 2 by using equipment that transfers information concerning the medical condition of the patient electronically, telephonically or by fiber optics.
- 4. To offer, undertake, attempt to do or hold oneself out as able to do any of the acts described in subsections 1 and 2.
- [5. To use in connection with a person's name the words or letters "M.D.," or any other title, word, letter or other designation intended to imply or designate him as a practitioner of medicine in



any of its branches, except in the manner authorized by NRS 630A.220.]

- **Sec. 10.** NRS 630.160 is hereby amended to read as follows:
- 630.160 1. Every person desiring to practice medicine must, before beginning to practice, procure from the Board a license authorizing him to practice.
- 2. Except as otherwise provided in NRS 630.161 [or 630.164,], 630.164 and sections 4, 5 and 6 of this act, a license may be issued to any person who:
- (a) Is a citizen of the United States or is lawfully entitled to remain and work in the United States;
- (b) Has received the degree of doctor of medicine from a medical school:
- (1) Approved by the Liaison Committee on Medical Education of the American Medical Association and Association of American Medical Colleges; or
- (2) Which provides a course of professional instruction equivalent to that provided in medical schools in the United States approved by the Liaison Committee on Medical Education;
- (c) [Has] Is currently certified by a specialty board of the American Board of Medical Specialties and who agrees to maintain such certification for the duration of his licensure, or has passed:
- (1) All parts of the examination given by the National Board of Medical Examiners;
 - (2) All parts of the Federation Licensing Examination;
- (3) All parts of the United States Medical Licensing Examination;
- (4) All parts of a licensing examination given by any state or territory of the United States, if the applicant is certified by a specialty board of the American Board of Medical Specialties;
- (5) All parts of the examination to become a licentiate of the Medical Council of Canada; or
- (6) Any combination of the examinations specified in subparagraphs (1), (2) and (3) that the Board [determined] determines to be sufficient;
- (d) Is currently certified by a specialty board of the American Board of Medical Specialties in the specialty of emergency medicine, preventive medicine or family practice and who agrees to maintain certification in at least one of these specialties for the duration of his licensure, or:
 - (1) Has completed 36 months of progressive postgraduate:
- [(1)] (I) Education as a resident in the United States or Canada in a program approved by the Board, the Accreditation Council for Graduate Medical Education of the American Medical



Association] or the Coordinating Council of Medical Education of the Canadian Medical Association; or

[(2)] (II) Fellowship training in the United States or Canada approved by the Board or the Accreditation Council for Graduate Medical Education; [and] or

- (2) Has completed at least 36 months of postgraduate education, not less than 24 months of such postgraduate education must be as a resident after receiving a medical degree from a combined dental and medical degree program approved by the Board; and
- (e) Passes a written or oral examination, or both, as to his qualifications to practice medicine and provides the Board with a description of the clinical program completed demonstrating that the applicant's clinical training met the requirements of paragraph (b).

Sec. 11. NRS 630.164 is hereby amended to read as follows:

- 630.164 1. A board of county commissioners may petition the Board of Medical Examiners to waive the [requirements] requirements of paragraph (d) of subsection 2 of NRS 630.160 for any applicant intending to practice medicine in a medically underserved area of that county as that term is defined by regulation by the Board of Medical Examiners. The Board of Medical Examiners may waive that requirement and issue a license if the applicant:
- (a) Has completed at least 1 year of training as a resident in the United States or Canada in a program approved by the Board, the Accreditation Council for Graduate Medical Education [of the American Medical Association] or the Coordinating Council of Medical Education of the Canadian Medical Association, respectively;
- (b) Has a minimum of 5 years of practical medical experience as a licensed allopathic physician or such other equivalent training as the Board deems appropriate; and
- (c) Meets all other conditions and requirements for a license to practice medicine.
- 2. Any person licensed pursuant to subsection 1 must be issued a license to practice medicine in this state restricted to practice in the medically underserved area of the county which petitioned for the waiver only. He may apply to the Board of Medical Examiners for renewal of that restricted license every 2 years after he is licensed.
- 3. Any person holding a restricted license pursuant to subsection 1 who completes 3 years of full-time practice under the restricted license may apply to the Board for an unrestricted license. In considering an application for an unrestricted license pursuant to this subsection, the Board shall require the applicant to meet all



statutory requirements for licensure in effect at the time of application except the **[requirement]** requirements of paragraph (d) of subsection 2 of NRS 630.160.

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Sec. 12. NRS 630.165 is hereby amended to read as follows:

- 630.165 1. [An] Except as otherwise provided in subsection 2, an applicant for a license to practice medicine must submit to the Board, on a form provided by the Board, an application in writing, accompanied by an affidavit stating that:
- (a) The applicant is the person named in the proof of graduation and that it was obtained without fraud or misrepresentation or any mistake of which the applicant is aware; and
- (b) The information contained in the application and any accompanying material is complete and correct.
- 2. An applicant for a license by endorsement to practice medicine pursuant to section 6 of this act must submit to the Board, on a form provided by the Board, an application in writing, accompanied by an affidavit stating that:
- (a) The applicant is the person named in the license to practice medicine issued by the District of Columbia or any state or territory of the United States and that the license was obtained without fraud or misrepresentation or any mistake of which the applicant is aware; and
- (b) The information contained in the application and any accompanying material is complete and correct.
- **3.** An application submitted pursuant to subsection 1 *or* **2** must include the social security number of the applicant.
- [3.] 4. In addition to the other requirements for licensure, the Board may require such further evidence of the mental, physical, medical or other qualifications of the applicant as it considers necessary.
- [4.] 5. The applicant bears the burden of proving and documenting his qualifications for licensure.
 - **Sec. 13.** NRS 630.258 is hereby amended to read as follows:
- 630.258 1. A physician who is retired from active practice and who wishes to donate his expertise for the medical care and treatment of indigent persons in this state may obtain a special volunteer medical license by submitting an application to the Board pursuant to this section.
- 2. An application for a special volunteer medical license must be on a form provided by the Board and must include:
- (a) Documentation of the history of medical practice of the physician;
- (b) Proof that the physician previously has been issued an unrestricted license to practice medicine in any state of the United



States and that he has never been the subject of disciplinary action by a medical board in any jurisdiction;

- (c) Proof that the physician satisfies the requirements for licensure set forth in NRS 630.160 [;] or the requirements for licensure by endorsement set forth in section 6 of this act;
- (d) Acknowledgment that the practice of the physician under the special volunteer medical license will be exclusively devoted to providing medical care to indigent persons in this state; and
- (e) Acknowledgment that the physician will not receive any payment or compensation, either direct or indirect, or have the expectation of any payment or compensation, for providing medical care under the special volunteer medical license, except for payment by a medical facility at which the physician provides volunteer medical services of the expenses of the physician for necessary travel, continuing education, malpractice insurance or fees of the State Board of Pharmacy.
- 3. If the Board finds that the application of a physician satisfies the requirements of subsection 2 and that the retired physician is competent to practice medicine, the Board shall issue a special volunteer medical license to the physician.
- 4. The initial special volunteer medical license issued pursuant to this section expires 1 year after the date of issuance. The license may be renewed pursuant to this section, and any license that is renewed expires 2 years after the date of issuance.
 - 5. The Board shall not charge a fee for:
- (a) The review of an application for a special volunteer medical license; or
- (b) The issuance or renewal of a special volunteer medical license pursuant to this section.
- 6. A physician who is issued a special volunteer medical license pursuant to this section and who accepts the privilege of practicing medicine in this state pursuant to the provisions of the special volunteer medical license is subject to all the provisions governing disciplinary action set forth in this chapter.
- 7. A physician who is issued a special volunteer medical license pursuant to this section shall comply with the requirements for continuing education adopted by the Board.
- **Sec. 14.** NRS 630.261 is hereby amended to read as follows: 630.261 1. Except as otherwise provided in NRS 630.161, the Board may issue:
- (a) A locum tenens license, to be effective not more than 3 months after issuance, to any physician who is licensed and in good standing in another state, who meets the requirements for licensure in this state and who is of good moral character and reputation. The purpose of this license is to enable an eligible physician to serve as a



substitute for another physician who is licensed to practice medicine in this state and who is absent from his practice for reasons deemed sufficient by the Board. A license issued pursuant to the provisions of this paragraph is not renewable.

- (b) A special license to a licensed physician of another state to come into this state to care for or assist in the treatment of his own patient in association with a physician licensed in this state. A special license issued pursuant to the provisions of this paragraph is limited to the care of a specific patient. The physician licensed in this state has the primary responsibility for the care of that patient.
- (c) A restricted license for a specified period if the Board determines the applicant needs supervision or restriction.
- (d) A temporary license for a specified period if the physician is licensed and in good standing in another state and meets the requirements for licensure in this state, and if the Board determines that it is necessary in order to provide medical services for a community without adequate medical care. A temporary license issued pursuant to the provisions of this paragraph is not renewable.
- (e) A special purpose license to a physician who is licensed in another state to permit the use of equipment that transfers information concerning the medical condition of a patient in this state across state lines electronically, telephonically or by fiber optics if the physician:
- (1) Holds a full and unrestricted license to practice medicine in that state;
- (2) Has not had any disciplinary or other action taken against him by any state or other jurisdiction; and
- (3) Meets the **[requirement]** requirements set forth in paragraph (d) of subsection 2 of NRS 630.160.
- 2. Except as otherwise provided in this section, the Board may renew or modify any license issued pursuant to subsection 1.
- 3. Every physician who is licensed pursuant to subsection 1 and who accepts the privilege of practicing medicine in this state pursuant to the provisions of the license shall be deemed to have given his consent to the revocation of the license at any time by the Board for any of the grounds provided in NRS 630.161 or 630.301 to 630.3065, inclusive.
- **Sec. 15.** NRS 630.268 is hereby amended to read as follows: 630.268 1. The Board shall charge and collect not more than the following fees:

For application for and issuance of a license to practice as a physician, *including a license by endorsement* \$600

1	For application for and issuance of a temporary, locum	
2	tenens, limited, restricted, special or special purpose	
3	license	0
4	For renewal of a limited, restricted or special license	0
5	For application for and issuance of a license as a physician	
6	assistant	
7	For biennial registration of a physician assistant 80	0
8	For biennial registration of a physician	0
9	For application for and issuance of a license as a	
10	practitioner of respiratory care	0
11	For biennial registration of a practitioner of respiratory	
12	care	0
13	For biennial registration for a physician who is on inactive	
14	status	0
15	For written verification of licensure	
16	For a duplicate identification card	5
17	For a duplicate license	0
18	For computer printouts or labels	0
19	For verification of a listing of physicians, per hour	0
20	For furnishing a list of new physicians	0
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- 2. In addition to the fees prescribed in subsection 1, the Board shall charge and collect necessary and reasonable fees for its other services.
- 3. The cost of any special meeting called at the request of a licensee, an institution, an organization, a state agency or an applicant for licensure must be paid for by the person or entity requesting the special meeting. Such a special meeting must not be called until the person or entity requesting it has paid a cash deposit with the Board sufficient to defray all expenses of the meeting.
 - **Sec. 16.** NRS 630.400 is hereby amended to read as follows: 630.400 A person who:
- 1. Presents to the Board as his own the diploma, license or credentials of another;
- 2. Gives either false or forged evidence of any kind to the Board:
- 3. Practices medicine or respiratory care under a false or assumed name or falsely personates another licensee;
- 4. Except as otherwise provided by specific statute, practices medicine or respiratory care without being licensed under this chapter;
- 5. Holds himself out as a physician assistant or uses any other term indicating or implying that he is a physician assistant without being licensed by the Board;



- 6. Holds himself out as a practitioner of respiratory care or uses any other term indicating or implying that he is a practitioner of respiratory care without being licensed by the Board; or
 7. Uses the title ["M.D.," when not licensed by the Board pursuant to this chapter, unless otherwise] "M.D.":
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- (a) Without having been awarded such a degree; or
 (b) When not authorized by a specific statute,
 is guilty of a category D felony and shall be punished as provided in NRS 193.130.
- Sec. 17. This act becomes effective upon passage and 10 approval.



