

SENATE BILL NO. 470—COMMITTEE ON COMMERCE AND LABOR

MARCH 25, 2019

Referred to Committee on Commerce and Labor

SUMMARY—Revises provisions relating to certain professions.
(BDR 54-785)

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 professions; requiring the Board of Medical Examiners and the State Board of Osteopathic Medicine to require a physician and an osteopathic physician, respectively, to complete at least 1 hour of training relating specifically to cultural competency; providing that failure to obtain such cultural competency training constitutes grounds for initiating disciplinary action or denying licensure; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires the Board of Medical Examiners and the State Board of Osteopathic Medicine to require each holder of a license issued by the respective Boards to submit evidence of compliance with continuing education requirements established by the respective Boards. (NRS 630.253, 633.471) Existing law further requires the respective Boards to, by regulation, require each physician and osteopathic physician, respectively, who are registered to dispense controlled substances to complete at least 2 hours of training relating specifically to the misuse and abuse of controlled substances, the prescribing of opioids or addiction during each period of licensure. (NRS 630.2535, 633.473) **Sections 1 and 3** of this bill require the respective Boards to, by regulation, require a physician and an osteopathic physician, respectively, to complete at least 1 hour of training relating specifically to cultural competency during each period of licensure. **Sections 1 and 3** provide that such cultural competency training is required so that a physician and an osteopathic physician, respectively, may better understand patients who are from different cultures, including patients who are: (1) from various gender, racial and ethnic backgrounds; (2) from various religious backgrounds; (3) lesbian, gay, bisexual, transgender and questioning persons; (4) children and senior citizens; (5) persons with a mental or physical disability; and (6) part of any other population, as determined by the respective Boards. **Sections 1 and 3** authorize a licensee to use



20 such cultural competency training to satisfy 1 hour of any continuing education
21 requirement established by the respective Boards. **Sections 1 and 3** require such
22 training to be provided through a course or program that is approved by the
23 respective Boards.

24 Existing law provides that the failure to comply with certain continuing
25 education requirements constitutes grounds for initiating disciplinary action or
26 denying of licensure. (NRS 630.306, 633.511) **Sections 2 and 4** of this bill provide
27 that the failure to comply with **sections 1 and 3**, respectively, constitutes grounds
28 for initiating disciplinary action or denying of licensure.

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

1 **Section 1.** Chapter 630 of NRS is hereby amended by adding
2 thereto a new section to read as follows:

3 *1. To enable a physician to more effectively treat patients, the*
4 *Board shall, by regulation, require a physician to complete at least*
5 *1 hour of training relating specifically to cultural competency*
6 *during each period of licensure so that a physician may better*
7 *understand patients who are from different cultures, including,*
8 *without limitation, patients who are:*

- 9 (a) *From various gender, racial and ethnic backgrounds;*
10 (b) *From various religious backgrounds;*
11 (c) *Lesbian, gay, bisexual, transgender and questioning*
12 *persons;*
13 (d) *Children and senior citizens;*
14 (e) *Persons with a mental or physical disability; and*
15 (f) *Part of any other population that a physician may need to*
16 *better understand, as determined by the Board.*

17 *2. A licensee may use training relating specifically to cultural*
18 *competency required pursuant to subsection 1 to satisfy 1 hour of*
19 *any continuing education requirement established by the Board.*

20 *3. The training relating specifically to cultural competency*
21 *required pursuant to subsection 1 must be provided through a*
22 *course or program that is approved by the Board.*

23 **Sec. 2.** NRS 630.306 is hereby amended to read as follows:
24 630.306 1. The following acts, among others, constitute
25 grounds for initiating disciplinary action or denying licensure:

26 (a) Inability to practice medicine with reasonable skill and safety
27 because of illness, a mental or physical condition or the use of
28 alcohol, drugs, narcotics or any other substance.

29 (b) Engaging in any conduct:

- 30 (1) Which is intended to deceive;
31 (2) Which the Board has determined is a violation of the
32 standards of practice established by regulation of the Board; or



1 (3) Which is in violation of a regulation adopted by the State
2 Board of Pharmacy.

3 (c) Administering, dispensing or prescribing any controlled
4 substance, or any dangerous drug as defined in chapter 454 of NRS,
5 to or for himself or herself or to others except as authorized by law.

6 (d) Performing, assisting or advising the injection of any
7 substance containing liquid silicone into the human body, except for
8 the use of silicone oil to repair a retinal detachment.

9 (e) Practicing or offering to practice beyond the scope permitted
10 by law or performing services which the licensee knows or has
11 reason to know that he or she is not competent to perform or which
12 are beyond the scope of his or her training.

13 (f) Performing, without first obtaining the informed consent of
14 the patient or the patient's family, any procedure or prescribing any
15 therapy which by the current standards of the practice of medicine is
16 experimental.

17 (g) Continual failure to exercise the skill or diligence or use the
18 methods ordinarily exercised under the same circumstances by
19 physicians in good standing practicing in the same specialty or field.

20 (h) Habitual intoxication from alcohol or dependency on
21 controlled substances.

22 (i) Making or filing a report which the licensee or applicant
23 knows to be false or failing to file a record or report as required by
24 law or regulation.

25 (j) Failing to comply with the requirements of NRS 630.254.

26 (k) Failure by a licensee or applicant to report in writing, within
27 30 days, any disciplinary action taken against the licensee or
28 applicant by another state, the Federal Government or a foreign
29 country, including, without limitation, the revocation, suspension or
30 surrender of a license to practice medicine in another jurisdiction.

31 (l) Failure by a licensee or applicant to report in writing, within
32 30 days, any criminal action taken or conviction obtained against the
33 licensee or applicant, other than a minor traffic violation, in this
34 State or any other state or by the Federal Government, a branch of
35 the Armed Forces of the United States or any local or federal
36 jurisdiction of a foreign country.

37 (m) Failure to be found competent to practice medicine as a
38 result of an examination to determine medical competency pursuant
39 to NRS 630.318.

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

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

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

44 ➤ This paragraph applies to an owner or other principal responsible
45 for the operation of the facility.



1 (o) Failure to comply with the requirements of NRS 630.373.

2 (p) Engaging in any act that is unsafe or unprofessional conduct
3 in accordance with regulations adopted by the Board.

4 (q) Knowingly or willfully procuring or administering a
5 controlled substance or a dangerous drug as defined in chapter 454
6 of NRS that is not approved by the United States Food and Drug
7 Administration, unless the unapproved controlled substance or
8 dangerous drug:

9 (1) Was procured through a retail pharmacy licensed
10 pursuant to chapter 639 of NRS;

11 (2) Was procured through a Canadian pharmacy which is
12 licensed pursuant to chapter 639 of NRS and which has been
13 recommended by the State Board of Pharmacy pursuant to
14 subsection 4 of NRS 639.2328;

15 (3) Is marijuana being used for medical purposes in
16 accordance with chapter 453A of NRS; or

17 (4) Is an investigational drug or biological product prescribed
18 to a patient pursuant to NRS 630.3735 or 633.6945.

19 (r) Failure to supervise adequately a medical assistant pursuant
20 to the regulations of the Board.

21 (s) Failure to comply with the provisions of NRS 630.3745.

22 (t) Failure to obtain any training required by the Board pursuant
23 to NRS 630.2535 ~~H~~ *or section 1 of this act.*

24 (u) Failure to comply with the provisions of NRS 454.217 or
25 629.086.

26 2. As used in this section, "investigational drug or biological
27 product" has the meaning ascribed to it in NRS 454.351.

28 **Sec. 3.** Chapter 633 of NRS is hereby amended by adding
29 thereto a new section to read as follows:

30 *1. To enable an osteopathic physician to more effectively treat*
31 *patients, the Board shall, by regulation, require an osteopathic*
32 *physician to complete at least 1 hour of training relating*
33 *specifically to cultural competency during each period of licensure*
34 *so that an osteopathic physician may better understand patients*
35 *who are from different cultures, including, without limitation,*
36 *patients who are:*

37 (a) *From various gender, racial and ethnic backgrounds;*

38 (b) *From various religious backgrounds;*

39 (c) *Lesbian, gay, bisexual, transgender and questioning*
40 *persons;*

41 (d) *Children and senior citizens;*

42 (e) *Persons with a mental or physical disability; and*

43 (f) *Part of any other population that an osteopathic physician*
44 *may need to better understand, as determined by the Board.*



1 **2. A licensee may use training relating specifically to cultural**
2 **competency required pursuant to subsection 1 to satisfy 1 hour of**
3 **any continuing education requirement established by the Board.**

4 **3. The training relating specifically to cultural competency**
5 **required pursuant to subsection 1 must be provided through a**
6 **course or program that is approved by the Board.**

7 **Sec. 4.** NRS 633.511 is hereby amended to read as follows:

8 633.511 1. The grounds for initiating disciplinary action
9 pursuant to this chapter are:

10 (a) Unprofessional conduct.

11 (b) Conviction of:

12 (1) A violation of any federal or state law regulating the
13 possession, distribution or use of any controlled substance or any
14 dangerous drug as defined in chapter 454 of NRS;

15 (2) A felony relating to the practice of osteopathic medicine
16 or practice as a physician assistant;

17 (3) A violation of any of the provisions of NRS 616D.200,
18 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive;

19 (4) Murder, voluntary manslaughter or mayhem;

20 (5) Any felony involving the use of a firearm or other deadly
21 weapon;

22 (6) Assault with intent to kill or to commit sexual assault or
23 mayhem;

24 (7) Sexual assault, statutory sexual seduction, incest,
25 lewdness, indecent exposure or any other sexually related crime;

26 (8) Abuse or neglect of a child or contributory delinquency;

27 or

28 (9) Any offense involving moral turpitude.

29 (c) The suspension of a license to practice osteopathic medicine
30 or to practice as a physician assistant by any other jurisdiction.

31 (d) Malpractice or gross malpractice, which may be evidenced
32 by a claim of malpractice settled against a licensee.

33 (e) Professional incompetence.

34 (f) Failure to comply with the requirements of NRS 633.527.

35 (g) Failure to comply with the requirements of subsection 3 of
36 NRS 633.471.

37 (h) Failure to comply with the provisions of NRS 633.694.

38 (i) Operation of a medical facility, as defined in NRS 449.0151,
39 at any time during which:

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

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

43 ➤ This paragraph applies to an owner or other principal responsible
44 for the operation of the facility.



1 (j) Failure to comply with the provisions of subsection 2 of
2 NRS 633.322.

3 (k) Signing a blank prescription form.

4 (l) Knowingly or willfully procuring or administering a
5 controlled substance or a dangerous drug as defined in chapter 454
6 of NRS that is not approved by the United States Food and Drug
7 Administration, unless the unapproved controlled substance or
8 dangerous drug:

9 (1) Was procured through a retail pharmacy licensed
10 pursuant to chapter 639 of NRS;

11 (2) Was procured through a Canadian pharmacy which is
12 licensed pursuant to chapter 639 of NRS and which has been
13 recommended by the State Board of Pharmacy pursuant to
14 subsection 4 of NRS 639.2328;

15 (3) Is marijuana being used for medical purposes in
16 accordance with chapter 453A of NRS; or

17 (4) Is an investigational drug or biological product prescribed
18 to a patient pursuant to NRS 630.3735 or 633.6945.

19 (m) Attempting, directly or indirectly, by intimidation, coercion
20 or deception, to obtain or retain a patient or to discourage the use of
21 a second opinion.

22 (n) Terminating the medical care of a patient without adequate
23 notice or without making other arrangements for the continued care
24 of the patient.

25 (o) In addition to the provisions of subsection 3 of NRS
26 633.524, making or filing a report which the licensee knows to be
27 false, failing to file a record or report that is required by law or
28 knowingly or willfully obstructing or inducing another to obstruct
29 the making or filing of such a record or report.

30 (p) Failure to report any person the licensee knows, or has
31 reason to know, is in violation of the provisions of this chapter or
32 the regulations of the Board within 30 days after the date the
33 licensee knows or has reason to know of the violation.

34 (q) Failure by a licensee or applicant to report in writing, within
35 30 days, any criminal action taken or conviction obtained against the
36 licensee or applicant, other than a minor traffic violation, in this
37 State or any other state or by the Federal Government, a branch of
38 the Armed Forces of the United States or any local or federal
39 jurisdiction of a foreign country.

40 (r) Engaging in any act that is unsafe in accordance with
41 regulations adopted by the Board.

42 (s) Failure to comply with the provisions of NRS 629.515.

43 (t) Failure to supervise adequately a medical assistant pursuant
44 to the regulations of the Board.



1 (u) Failure to obtain any training required by the Board pursuant
2 to NRS 633.473 ~~H~~ *or section 3 of this act.*

3 (v) Failure to comply with the provisions of NRS 633.6955.

4 (w) Failure to comply with the provisions of NRS 453.163,
5 453.164, 453.226, 639.23507, 639.2391 to 639.23916, inclusive,
6 and any regulations adopted by the State Board of Pharmacy
7 pursuant thereto.

8 (x) Fraudulent, illegal, unauthorized or otherwise inappropriate
9 prescribing, administering or dispensing of a controlled substance
10 listed in schedule II, III or IV.

11 (y) Failure to comply with the provisions of NRS 454.217 or
12 629.086.

13 2. As used in this section, "investigational drug or biological
14 product" has the meaning ascribed to it in NRS 454.351.

15 **Sec. 5.** This act becomes effective on July 1, 2019.

