

SENATE BILL NO. 184—SENATOR HARDY

MARCH 8, 2021

Referred to Committee on Commerce and Labor

SUMMARY—Revises provisions relating to the practice of medicine. (BDR 54-25)

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

~

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

AN ACT relating to professions; authorizing the Board of Medical Examiners and the State Board of Osteopathic Medicine to issue a license to practice medicine or a license to practice osteopathic medicine, respectively, to certain persons; authorizing a physician assistant to provide emergency care in certain emergency situations without the supervision of a physician or osteopathic physician; revising requirements governing the supervision of a physician assistant; providing that a person may be simultaneously licensed as a physician assistant by the respective Boards; providing for a fee for a simultaneous license; requiring the respective Boards to supply a list of physician assistants licensed by the respective Boards; revising the requirements governing licensure as a physician assistant; authorizing certain licensed physician assistants to use the title “inactive physician assistant”; providing penalties; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

1 Existing law establishes requirements that govern the supervision of physician
2 assistants by: (1) allopathic physicians who engage in the practice of medicine
3 pursuant to chapter 630 of NRS; and (2) osteopathic physicians who engage in the
4 practice of osteopathic medicine pursuant to chapter 633 of NRS. (NRS 630.271-
5 630.2752, 633.432-633.469) Existing law requires an applicant for a license to
6 practice medicine or for a license to practice osteopathic medicine to satisfy various
7 requirements, including educational requirements. (NRS 630.160, 633.305,
8 633.311) **Sections 2 and 24** of this bill authorize the Board of Medical Examiners



9 and the State Board of Osteopathic Medicine to issue a license to practice medicine
10 or a license to practice osteopathic medicine, respectively, to a person who: (1) has
11 received a doctorate degree from a medical school or a school of osteopathic
12 medicine located in the United States or Canada and who has completed 2 years of
13 postgraduate residency training; or (2) has received a doctorate degree from a
14 medical school or a school of osteopathic medicine located outside of the United
15 States and Canada and who has completed 3 years of postgraduate residency
16 training. **Section 13** of this bill exempts such an applicant for a license to practice
17 medicine as an allopathic physician who is a graduate of a foreign medical school
18 from a requirement that the graduate must have passed the examination given by
19 the Educational Commission for Foreign Medical Graduates. **Sections 15 and 33** of
20 this bill authorize the issuance of a special volunteer medical license to practice
21 allopathic or osteopathic medicine to a physician who meets the requirements
22 prescribed in **section 2 or 24**, as applicable. **Sections 12, 31 and 32** of this bill
23 make conforming changes by exempting persons who meet the requirements of
24 **section 2 or 24** from the general requirements for licensure as an allopathic
25 physician or osteopathic physician, as applicable.

26 Existing regulations provide that a physician assistant governed by chapter 630
27 of NRS is considered to be and is deemed the agent of his or her supervising
28 physician in the performance of all medical activities. (NAC 630.375) Existing
29 regulations also authorize a physician assistant to perform medical services without
30 supervision from his or her supervising physician in: (1) life-threatening
31 emergencies, including at the scene of an accident; or (2) emergency situations,
32 including human-caused or natural disaster relief efforts. (NAC 630.375) In such
33 situations, the physician assistant: (1) is not the agent of the supervising physician
34 and the supervising physician is not responsible or liable for any medical services
35 provided by the physician assistant; (2) is required to provide whatever medical
36 services he or she is able to provide based on his or her training, education and
37 experience; (3) may take direction from a licensed physician on-scene; and (4) is
38 required to make a reasonable effort to contact his or her supervising physician to
39 advise the supervising physician of the incident and the physician assistant's role in
40 providing medical services. (NAC 630.375) **Sections 3 and 38** of this bill
41 incorporate those provisions from existing regulations into statute in chapters 630
42 and 633 of NRS.

43 Existing law: (1) authorizes an osteopathic physician to refuse to act as a
44 supervising osteopathic physician for a physician assistant; and (2) provides that
45 certain agreements governing the supervision of a physician assistant by an
46 osteopathic physician are void. (NRS 633.468) **Section 4** of this bill creates a
47 similar provision for an allopathic physician licensed pursuant to chapter 630 of
48 NRS. **Sections 4 and 40** of this bill require an allopathic physician or osteopathic
49 physician who refuses to act as a supervising allopathic or osteopathic physician, as
50 applicable, to provide written notice of his or her refusal to provide such
51 supervision to the physician assistant and the applicable Board. **Sections 4 and 40**
52 also require a physician assistant, after receiving such notice, to: (1) immediately
53 stop performing medical services for patients of the supervising physician who has
54 refused to supervise the physician assistant; and (2) notify the applicable Board
55 within 5 business days of the physician assistant entering into a new contract with a
56 new supervising allopathic or osteopathic physician, as applicable.

57 Existing law authorizes an osteopathic physician to supervise a physician
58 assistant in person, electronically, telephonically or by fiber optics. (NRS 633.469)
59 **Section 5** of this bill authorizes a supervising allopathic physician licensed pursuant
60 to chapter 630 of NRS to provide supervision to his or her physician assistant in
61 person, electronically, telephonically or by fiber optics. **Section 19** of this bill
62 makes conforming changes by removing the authority of the Board of Medical
63 Examiners to adopt regulations relating to the supervision of a physician assistant



64 electronically, telephonically or by fiber optics. **Sections 5 and 41** of this bill
65 require the Board of Medical Examiners and the State Board of Osteopathic
66 Medicine, respectively, to adopt regulations prescribing the maximum number of
67 physician assistants that an allopathic or osteopathic physician may supervise at the
68 same time. **Sections 5 and 41** also require an allopathic or osteopathic physician
69 providing supervision in person during the first 30 days of supervision of a
70 physician assistant who is newly licensed or who has not practiced before to be
71 physically present at the same location as the physician assistant, but does not
72 require the physician to be in the same room as the physician assistant.

73 **Sections 6 and 25** of this bill require a person who is applying for a license to
74 practice as a physician assistant under chapter 630 or 633 of NRS and wishes to be
75 simultaneously licensed as a physician assistant under both chapters 630 and 633 of
76 NRS to: (1) indicate in his or her application that he or she wishes to hold a
77 simultaneous license; (2) submit an application for a license to the Board of
78 Medical Examiners under chapter 630 of NRS and to the State Board of
79 Osteopathic Medicine under chapter 633 of NRS; and (3) pay the fee for the
80 application and issuance of a simultaneous license as a physician assistant to both
81 Boards. **Sections 7 and 26** of this bill require a person who is applying to renew a
82 license to practice as a physician assistant under chapter 630 or 633 of NRS and
83 wishes to be simultaneously licensed as a physician assistant under both chapters
84 630 and 633 of NRS to: (1) indicate in his or her application that he or she wishes
85 to hold a simultaneous license; (2) submit an application to renew a license to
86 practice as a physician assistant with the Board under which he or she is currently
87 licensed and submit an application for a license to practice as a physician assistant
88 to the Board under which he or she is not currently licensed; and (3) pay the fee for
89 simultaneous registration of a physician assistant to both Boards. Existing law
90 provides certain fees for a physician assistant. (NRS 630.268, 633.501) **Sections 16**
91 **and 44** of this bill provide that the fee that each Board charges for simultaneous
92 registration is equal to half of the fee each Board would charge for registration for a
93 person who is licensed by only one Board.

94 **Sections 8 and 27** of this bill require a person who is licensed to practice as a
95 physician assistant who is not applying for a renewal of his or her license and who
96 wishes to be simultaneously licensed as a physician assistant under both chapters
97 630 and 633 of NRS to: (1) apply for a license to the Board under which he or she
98 is not licensed; and (2) pay the fee for application and issuance of a simultaneous
99 license as a physician assistant to both Boards. **Section 39** of this bill makes a
100 conforming change to exempt a physician assistant from certain requirements
101 governing the supervision of a physician assistant licensed pursuant to chapter 633
102 of NRS by an allopathic physician licensed pursuant to chapter 630 of NRS.

103 **Sections 9 and 28** of this bill require the Board of Medical Examiners and the
104 State Board of Osteopathic Medicine to provide to the State Board of Osteopathic
105 Medicine or the Board of Medical Examiners, respectively, a list of all physician
106 assistants who are licensed by the respective Boards.

107 **Sections 10 and 29** of this bill require a supervising allopathic physician or
108 supervising osteopathic physician to review and initial a certain amount of charts of
109 patients of a physician assistant who has not previously practiced as a physician
110 assistant.

111 Existing law provides that the provisions governing allopathic physicians,
112 physician assistants, medical assistants, perfusionists and practitioners of
113 respiratory care and osteopathic medicine do not apply to certain persons and in
114 certain circumstances. (NRS 630.047, 633.171) **Sections 11 and 30** of this bill
115 provide that such provisions do not apply to: (1) the performance of medical
116 services by a student enrolled in an educational program for a physician assistant
117 which is accredited by the Accreditation Review Commission on Education for the
118 Physician Assistant, Inc., as part of such a program; and (2) a physician assistant of



119 any division or department of the United States in the discharge of his or her
120 official duties.

121 Existing law authorizes a person holding a license as an allopathic or
122 osteopathic physician, physician assistant, perfusionist or practitioner of respiratory
123 care to place his or her license on inactive status. (NRS 630.255, 633.491) **Section**
124 **14** of this bill authorizes the Board of Medical Examiners to place any physician
125 assistant who notifies the Board in writing on inactive status. **Sections 14 and 43** of
126 this bill: (1) prohibit a physician assistant with a license on inactive status from
127 practicing as a physician assistant; and (2) require the Board of Medical Examiners
128 and the State Board of Osteopathic Medicine, respectively, to exempt a physician
129 assistant with a license on inactive status from paying certain fees.

130 Existing law authorizes a physician assistant to provide only those medical
131 services he or she is authorized to perform by his or her supervising physician.
132 (NRS 630.271) **Section 17** of this bill additionally requires services performed by a
133 physician assistant to be within the scope of practice of the supervising physician.

134 Existing law authorizes the Board of Medical Examiners and the State Board of
135 Osteopathic Medicine to issue a license to practice as a physician assistant to an
136 applicant who is qualified under the regulations of the respective Boards. (NRS
137 630.273, 633.433) **Sections 18 and 34** of this bill authorize the respective Boards
138 to issue a license to practice as a physician assistant to an applicant who: (1) meets
139 the qualifications set forth in chapter 630 or 633 of NRS, as applicable; (2) is
140 qualified under the regulations of the respective Boards; and (3) passes the
141 Physician Assistant National Certifying Examination.

142 Existing law prescribes certain requirements relating to the renewal of a license
143 to practice as a physician assistant. (NRS 630.275, 633.471) **Sections 19 and 42** of
144 this bill prohibit the Board of Medical Examiners and the State Board of
145 Osteopathic Medicine from requiring a physician assistant to receive or maintain
146 certification by the National Commission on Certification of Physician Assistants
147 to satisfy any continuing education requirements for the renewal of a license.

148 Existing law authorizes an applicant for the issuance of a license by
149 endorsement to practice as a physician assistant to submit to the Board of Medical
150 Examiners or the State Board of Osteopathic Medicine an application for such a
151 license if the applicant satisfies certain requirements, including being certified in a
152 specialty recognized by certain professional organizations. (NRS 630.2751,
153 630.2752, 633.4335, 633.4336) **Sections 20, 21, 35 and 36** of this bill remove the
154 requirement that an applicant for the issuance of a license by endorsement be
155 certified in a specialty recognized by such organizations.

156 Existing law makes it unlawful for any person to hold himself or herself out as
157 a physician assistant without being licensed by the Board of Medical Examiners or
158 the State Board of Osteopathic Medicine. (NRS 630.400, 633.741) **Sections 22 and**
159 **45** of this bill authorize a person to use the title "inactive physician assistant" if he
160 or she: (1) meets the qualifications for licensure as a physician assistant but does
161 not hold a current license; and (2) is certified by the National Commission on
162 Certification of Physician Assistants. **Sections 22 and 45** prohibit an inactive
163 physician assistant from acting or practicing as a physician assistant.

164 Existing law requires the State Board of Osteopathic Medicine to adopt
165 regulations regarding the procedures for applications for and the issuance of a
166 license to practice as a physician assistant. (NRS 633.434) **Section 37** of this bill
167 requires the Board to adopt regulations regarding the procedures for applications
168 for the renewal of such licenses.



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 the provisions set forth as sections 2 to 10, inclusive, of this
3 act.

4 **Sec. 2. 1.** *Except as otherwise provided in NRS 630.161,*
5 *the Board may issue a license to any person who:*

6 (a) *Has received a degree of doctor of medicine from a medical*
7 *school approved by the Liaison Committee on Medical Education*
8 *of the American Medical Association and the Association of*
9 *American Medical Colleges and has completed 2 years of*
10 *postgraduate residency training; or*

11 (b) *Has received a degree of doctor of medicine from a medical*
12 *school which provides a course of professional instruction*
13 *equivalent to that provided in medical schools in the United States*
14 *and is approved by the Liaison Committee on Medical Education*
15 *and has completed 3 years of postgraduate residency training.*

16 2. *The Board may issue a license to practice medicine after*
17 *the Board verifies, through any readily available source, that the*
18 *applicant has complied with the provisions of subsection 1. The*
19 *verification may include, but is not limited to, using the*
20 *Federation Credentials Verification Service. If any information is*
21 *verified by a source other than the primary source of the*
22 *information, the Board may require subsequent verification of the*
23 *information by the primary source of the information.*

24 3. *The provisions of subsections 4 and 5 of NRS 630.160*
25 *apply to a license issued pursuant to this section.*

26 **Sec. 3. 1.** *Except as otherwise provided in this section, a*
27 *physician assistant is considered to be and is deemed the agent of*
28 *his or her supervising physician in the performance of all medical*
29 *activities.*

30 2. *A physician assistant shall not perform medical services*
31 *without supervision from his or her supervising physician, except*
32 *in:*

33 (a) *Life-threatening emergencies, including, without*
34 *limitation, at the scene of an accident; or*

35 (b) *Emergency situations, including, without limitation,*
36 *human-caused or natural disaster relief efforts.*

37 3. *When a physician assistant performs medical services in*
38 *an emergency described in subsection 2:*

39 (a) *The physician assistant is not the agent of his or her*
40 *supervising physician and the supervising physician is not*
41 *responsible or liable for any medical services provided by the*
42 *physician assistant;*



1 (b) *The physician assistant may provide whatever medical*
2 *services possible based on the need of the patient and the training,*
3 *education and experience of the physician assistant;*

4 (c) *The physician assistant may take direction from a*
5 *physician who is at the scene of the emergency; and*

6 (d) *The physician assistant shall make a reasonable effort to*
7 *contact his or her supervising physician, as soon as possible, to*
8 *advise him or her of the incident and the physician assistant's role*
9 *in providing medical services.*

10 **Sec. 4. 1.** *Subject to the provisions of this section, a*
11 *physician may at any time refuse to act as a supervising physician*
12 *for a physician assistant.*

13 2. *A condition, stipulation or provision in a contract or other*
14 *agreement which:*

15 (a) *Requires a physician to act as a supervising physician for a*
16 *physician assistant;*

17 (b) *Penalizes a physician for refusing to act as a supervising*
18 *physician for a physician assistant; or*

19 (c) *Limits the authority of a supervising physician with regard*
20 *to any protocol, standing order or delegation of authority*
21 *applicable to a physician assistant supervised by the physician,*
22 *↳ is against public policy and void.*

23 3. *If a physician refuses to act as a supervising physician for*
24 *a physician assistant pursuant to this section, the supervising*
25 *physician or his or her designee must provide written notice to the*
26 *physician assistant and the Board. Such written notice must*
27 *clearly state that the supervising physician:*

28 (a) *Refuses to act as a supervising physician for the physician*
29 *assistant; and*

30 (b) *No longer serves as the supervising physician.*

31 4. *The supervising physician shall not refuse to act as a*
32 *supervising physician to a physician assistant until the physician*
33 *assistant receives the notice required by subsection 3.*

34 5. *Upon receiving the written notice described in subsection 3*
35 *from a supervising physician, a physician assistant must:*

36 (a) *Immediately stop performing medical services for any*
37 *patients of the supervising physician; and*

38 (b) *Notify the Board of any contract with a new supervising*
39 *physician within 5 business days after entering into the contract.*

40 **Sec. 5. 1.** *The Board shall establish by regulation the*
41 *maximum number of physician assistants that a supervising*
42 *physician may supervise at the same time and may establish*
43 *different maximum numbers for different practice areas.*



1 2. *A supervising physician shall provide supervision to his or*
2 *her physician assistant continuously whenever the physician*
3 *assistant is performing his or her professional duties.*

4 3. *Except as otherwise provided in subsection 4, a supervising*
5 *physician may provide supervision to his or her physician assistant*
6 *in person, electronically, telephonically or by fiber optics. When*
7 *providing supervision electronically, telephonically or by fiber*
8 *optics, a supervising physician may be at a different site than the*
9 *physician assistant, including a site located within or outside this*
10 *State or the United States.*

11 4. *A supervising physician shall provide supervision to his or*
12 *her physician assistant in person at all times during the first 30*
13 *days that the supervising physician supervises the physician*
14 *assistant if the physician assistant has not been previously licensed*
15 *or has not previously practiced as a physician assistant. The*
16 *provisions of this subsection do not apply to a federally-qualified*
17 *health center.*

18 5. *A supervising physician providing supervision pursuant to*
19 *subsection 4 must be physically present at the same location as the*
20 *physician assistant performing the medical services but is not*
21 *required to be in the same room as the physician assistant.*

22 6. *Before beginning to supervise a physician assistant, a*
23 *supervising physician must communicate to the physician*
24 *assistant:*

25 (a) *The scope of practice of the physician assistant;*

26 (b) *The access to the supervising physician that the physician*
27 *assistant will have; and*

28 (c) *Any processes for evaluation that the supervising physician*
29 *will use to evaluate the physician assistant.*

30 7. *A supervising physician shall not delegate to his or her*
31 *physician assistant, and the physician assistant shall not accept, a*
32 *task that is beyond the physician assistant's capability to complete*
33 *safely.*

34 8. *As used in this section, "federally-qualified health center"*
35 *has the meaning ascribed to it in 42 U.S.C. § 1396d(l)(2)(B).*

36 **Sec. 6.** *A person applying for a license to practice as a*
37 *physician assistant pursuant to the provisions of this chapter who*
38 *wishes to hold a simultaneous license to practice as a physician*
39 *assistant pursuant to the provisions of chapter 633 of NRS must:*

40 1. *Indicate in the application that he or she wishes to hold a*
41 *simultaneous license to practice as a physician assistant pursuant*
42 *to the provisions of chapter 633 of NRS;*

43 2. *Apply for a license to practice as a physician assistant to:*

44 (a) *The Board pursuant to this chapter; and*



1 (b) *The State Board of Osteopathic Medicine pursuant to*
2 *chapter 633 of NRS; and*

3 3. *Pay all applicable fees, including, without limitation:*

4 (a) *The fee for application for and issuance of a simultaneous*
5 *license as a physician assistant pursuant to NRS 630.268; and*

6 (b) *The application and initial simultaneous license fee for a*
7 *physician assistant pursuant to NRS 633.501.*

8 **Sec. 7.** *A person applying to renew a license to practice as a*
9 *physician assistant pursuant to the provisions of this chapter who*
10 *wishes to hold a simultaneous license to practice as a physician*
11 *assistant pursuant to the provisions of chapter 633 of NRS must:*

12 1. *Indicate in the application that he or she wishes to hold a*
13 *simultaneous license to practice as a physician assistant pursuant*
14 *to the provisions of chapter 633 of NRS;*

15 2. *Apply:*

16 (a) *To renew a license to practice as a physician assistant to*
17 *the Board pursuant to this chapter; and*

18 (b) *For a license to practice as a physician assistant to the*
19 *State Board of Osteopathic Medicine pursuant to chapter 633 of*
20 *NRS; and*

21 3. *Pay all applicable fees, including, without limitation:*

22 (a) *The fee for biennial simultaneous registration of a*
23 *physician assistant pursuant to NRS 630.268; and*

24 (b) *The application and initial simultaneous license fee for a*
25 *physician assistant pursuant to NRS 633.501.*

26 **Sec. 8.** *If a person licensed to practice as a physician*
27 *assistant pursuant to the provisions of this chapter is not applying*
28 *to renew his or her license and wishes to hold a simultaneous*
29 *license to practice as a physician assistant pursuant to the*
30 *provisions of chapter 633 of NRS, the person must:*

31 1. *Apply for a license to practice as a physician assistant to*
32 *the State Board of Osteopathic Medicine pursuant to chapter 633*
33 *of NRS; and*

34 2. *Pay all applicable fees, including, without limitation:*

35 (a) *The fee for biennial simultaneous registration of a*
36 *physician assistant pursuant to NRS 630.268; and*

37 (b) *The application and initial simultaneous license fee for a*
38 *physician assistant pursuant to NRS 633.501.*

39 **Sec. 9.** *On or before the last day of each quarter, the Board*
40 *shall provide to the State Board of Osteopathic Medicine a list of*
41 *all physician assistants licensed by the Board.*

42 **Sec. 10.** 1. *A supervising physician shall review and initial*
43 *charts of any patient of a physician assistant pursuant to the*
44 *provisions of subsection 2 who has not previously practiced as a*
45 *physician assistant.*



1 2. *Except as otherwise provided in subsection 3, during the*
2 *first 90 days of supervision, a supervising physician shall review*
3 *and initial at least 100 charts or 10 percent of the total number of*
4 *charts of patients of the physician assistant, whichever is greater.*

5 3. *If a supervising physician has reviewed and initialed less*
6 *than 100 charts of patients of the physician assistant during the*
7 *first 90 days of supervision, the supervising physician must*
8 *continue to review and initial charts of patients of the physician*
9 *assistant after the first 90 days of supervision until the supervising*
10 *physician reviews and initials at least 100 charts of patients of the*
11 *physician assistant.*

12 4. *A supervising physician shall review and initial charts of*
13 *patients of the physician assistant only to the extent that the charts*
14 *include medical services provided within the portion of the*
15 *practice of the physician assistant that the supervising physician*
16 *supervises.*

17 5. *The Board shall not adopt regulations requiring a*
18 *supervising physician to review and initial the charts of a patient*
19 *of a physician assistant the supervising physician is supervising in*
20 *addition to what is required by this section.*

21 **Sec. 11.** NRS 630.047 is hereby amended to read as follows:

22 630.047 1. This chapter does not apply to:

23 (a) A medical officer or perfusionist or practitioner of
24 respiratory care of the Armed Forces or a medical officer or
25 perfusionist or practitioner of respiratory care of any division or
26 department of the United States in the discharge of his or her official
27 duties, including, without limitation, providing medical care in a
28 hospital in accordance with an agreement entered into pursuant to
29 NRS 449.2455;

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

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

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

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

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

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



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

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

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

10 (2) Is employed by a medical facility, as defined in NRS
11 449.0151; and

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

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

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

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

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

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

38 *(m) A physician assistant of any division or department of the*
39 *United States in the discharge of his or her official duties unless*
40 *licensure by a state is required by the division or department of the*
41 *United States.*

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

44 3. This chapter does not prohibit:



1 (a) Gratuitous services outside of a medical school or medical
2 facility by a person who is not a physician, perfusionist, physician
3 assistant or practitioner of respiratory care in cases of emergency.

4 (b) The domestic administration of family remedies.

5 **Sec. 12.** NRS 630.160 is hereby amended to read as follows:

6 630.160 1. Every person desiring to practice medicine must,
7 before beginning to practice, procure from the Board a license
8 authorizing the person to practice.

9 2. Except as otherwise provided in NRS 630.1605 to 630.161,
10 inclusive, and 630.258 to 630.2665, inclusive, *and section 2 of this*
11 *act*, a license may be issued to any person who:

12 (a) Has received the degree of doctor of medicine from a
13 medical school:

14 (1) Approved by the Liaison Committee on Medical
15 Education of the American Medical Association and Association of
16 American Medical Colleges; or

17 (2) Which provides a course of professional instruction
18 equivalent to that provided in medical schools in the United States
19 approved by the Liaison Committee on Medical Education;

20 (b) Is currently certified by a specialty board of the American
21 Board of Medical Specialties and who agrees to maintain the
22 certification for the duration of the licensure, or has passed:

23 (1) All parts of the examination given by the National Board
24 of Medical Examiners;

25 (2) All parts of the Federation Licensing Examination;

26 (3) All parts of the United States Medical Licensing
27 Examination;

28 (4) All parts of a licensing examination given by any state or
29 territory of the United States, if the applicant is certified by a
30 specialty board of the American Board of Medical Specialties;

31 (5) All parts of the examination to become a licentiate of the
32 Medical Council of Canada; or

33 (6) Any combination of the examinations specified in
34 subparagraphs (1), (2) and (3) that the Board determines to be
35 sufficient;

36 (c) Is currently certified by a specialty board of the American
37 Board of Medical Specialties in the specialty of emergency
38 medicine, preventive medicine or family medicine and who agrees
39 to maintain certification in at least one of these specialties for the
40 duration of the licensure, or:

41 (1) Has completed 36 months of progressive postgraduate:

42 (I) Education as a resident in the United States or Canada
43 in a program approved by the Board, the Accreditation Council for
44 Graduate Medical Education, the Royal College of Physicians and
45 Surgeons of Canada, the Collège des médecins du Québec or the



1 College of Family Physicians of Canada, or, as applicable, their
2 successor organizations; or

3 (II) Fellowship training in the United States or Canada
4 approved by the Board or the Accreditation Council for Graduate
5 Medical Education;

6 (2) Has completed at least 36 months of postgraduate
7 education, not less than 24 months of which must have been
8 completed as a resident after receiving a medical degree from a
9 combined dental and medical degree program approved by the
10 Board; or

11 (3) Is a resident who is enrolled in a progressive postgraduate
12 training program in the United States or Canada approved by the
13 Board, the Accreditation Council for Graduate Medical Education,
14 the Royal College of Physicians and Surgeons of Canada, the
15 Collège des médecins du Québec or the College of Family
16 Physicians of Canada, or, as applicable, their successor
17 organizations, has completed at least 24 months of the program and
18 has committed, in writing, to the Board that he or she will complete
19 the program; and

20 (d) Passes a written or oral examination, or both, as to his or her
21 qualifications to practice medicine and provides the Board with a
22 description of the clinical program completed demonstrating that the
23 applicant's clinical training met the requirements of paragraph (a).

24 3. The Board may issue a license to practice medicine after the
25 Board verifies, through any readily available source, that the
26 applicant has complied with the provisions of subsection 2. The
27 verification may include, but is not limited to, using the Federation
28 Credentials Verification Service. If any information is verified by a
29 source other than the primary source of the information, the Board
30 may require subsequent verification of the information by the
31 primary source of the information.

32 4. Notwithstanding any provision of this chapter to the
33 contrary, if, after issuing a license to practice medicine, the Board
34 obtains information from a primary or other source of information
35 and that information differs from the information provided by the
36 applicant or otherwise received by the Board, the Board may:

37 (a) Temporarily suspend the license;

38 (b) Promptly review the differing information with the Board as
39 a whole or in a committee appointed by the Board;

40 (c) Declare the license void if the Board or a committee
41 appointed by the Board determines that the information submitted
42 by the applicant was false, fraudulent or intended to deceive the
43 Board;

44 (d) Refer the applicant to the Attorney General for possible
45 criminal prosecution pursuant to NRS 630.400; or



1 (e) If the Board temporarily suspends the license, allow the
2 license to return to active status subject to any terms and conditions
3 specified by the Board, including:

4 (1) Placing the licensee on probation for a specified period
5 with specified conditions;

6 (2) Administering a public reprimand;

7 (3) Limiting the practice of the licensee;

8 (4) Suspending the license for a specified period or until
9 further order of the Board;

10 (5) Requiring the licensee to participate in a program to
11 correct an alcohol or other substance use disorder;

12 (6) Requiring supervision of the practice of the licensee;

13 (7) Imposing an administrative fine not to exceed \$5,000;

14 (8) Requiring the licensee to perform community service
15 without compensation;

16 (9) Requiring the licensee to take a physical or mental
17 examination or an examination testing his or her competence to
18 practice medicine;

19 (10) Requiring the licensee to complete any training or
20 educational requirements specified by the Board; and

21 (11) Requiring the licensee to submit a corrected application,
22 including the payment of all appropriate fees and costs incident to
23 submitting an application.

24 5. If the Board determines after reviewing the differing
25 information to allow the license to remain in active status, the action
26 of the Board is not a disciplinary action and must not be reported to
27 any national database. If the Board determines after reviewing the
28 differing information to declare the license void, its action shall be
29 deemed a disciplinary action and shall be reportable to national
30 databases.

31 **Sec. 13.** NRS 630.195 is hereby amended to read as follows:

32 630.195 1. Except as otherwise provided in NRS 630.1606
33 and 630.1607 ~~§~~ *and section 2 of this act*, in addition to the other
34 requirements for licensure, an applicant for a license to practice
35 medicine who is a graduate of a foreign medical school shall submit
36 to the Board proof that the applicant has received:

37 (a) The degree of doctor of medicine or its equivalent, as
38 determined by the Board; and

39 (b) The standard certificate of the Educational Commission for
40 Foreign Medical Graduates or a written statement from that
41 Commission that the applicant passed the examination given by the
42 Commission.

43 2. The proof of the degree of doctor of medicine or its
44 equivalent must be submitted directly to the Board by the medical
45 school that granted the degree. If proof of the degree is unavailable



1 from the medical school that granted the degree, the Board may
2 accept proof from any other source specified by the Board.

3 **Sec. 14.** NRS 630.255 is hereby amended to read as follows:

4 630.255 1. Any licensee who changes the location of his or
5 her practice of medicine from this State to another state or country,
6 has never engaged in the practice of medicine in this State after
7 licensure or has ceased to engage in the practice of medicine in this
8 State for 12 consecutive months may be placed on inactive status by
9 order of the Board. *Any physician assistant who notifies the Board*
10 *of his or her desire to be placed on inactive status in writing on a*
11 *form prescribed by the Board may be placed on inactive status by*
12 *order of the Board.*

13 2. Each inactive licensee shall maintain a permanent mailing
14 address with the Board to which all communications from the Board
15 to the licensee must be sent. An inactive licensee who changes his or
16 her permanent mailing address shall notify the Board in writing of
17 the new permanent mailing address within 30 days after the change.
18 If an inactive licensee fails to notify the Board in writing of a
19 change in his or her permanent mailing address within 30 days after
20 the change, the Board may impose upon the licensee a fine not to
21 exceed \$250.

22 3. In addition to the requirements of subsection 2, any licensee
23 who changes the location of his or her practice of medicine from
24 this State to another state or country shall maintain an electronic
25 mail address with the Board to which all communications from the
26 Board to him or her may be sent.

27 4. *An inactive physician assistant shall not practice as a*
28 *physician assistant. The Board shall consider an inactive*
29 *physician assistant who practices as a physician assistant to be*
30 *practicing without a license. Such practice constitutes grounds for*
31 *disciplinary action against the physician assistant in accordance*
32 *with the regulations adopted by the Board pursuant to*
33 *NRS 630.275.*

34 5. *The Board shall exempt an inactive physician assistant*
35 *from paying the applicable fee for biennial registration prescribed*
36 *by NRS 630.268.*

37 6. Before resuming the practice of medicine *or practice as a*
38 *physician assistant* in this State, the inactive licensee must:

39 (a) Notify the Board in writing of his or her intent to resume the
40 practice of medicine *or practice as a physician assistant, as*
41 *applicable*, in this State;

42 (b) File an affidavit with the Board describing the activities of
43 the licensee during the period of inactive status;

44 (c) Complete the form for registration for active status;

45 (d) Pay the applicable fee for biennial registration; and



1 (e) Satisfy the Board of his or her competence to practice
2 medicine ~~+~~

3 ~~—5.1~~ *or practice as a physician assistant, as applicable.*

4 7. If the Board determines that the conduct or competence of
5 the licensee during the period of inactive status would have
6 warranted denial of an application for a license to practice medicine
7 *or practice as a physician assistant* in this State, the Board may
8 refuse to place the licensee on active status.

9 **Sec. 15.** NRS 630.258 is hereby amended to read as follows:

10 630.258 1. A physician who is retired from active practice
11 and who:

12 (a) Wishes to donate his or her expertise for the medical care
13 and treatment of persons in this State who are indigent, uninsured or
14 unable to afford health care; or

15 (b) Wishes to provide services for any disaster relief operations
16 conducted by a governmental entity or nonprofit organization,
17 ↪ may obtain a special volunteer medical license by submitting an
18 application to the Board pursuant to this section.

19 2. An application for a special volunteer medical license must
20 be on a form provided by the Board and must include:

21 (a) Documentation of the history of medical practice of the
22 physician;

23 (b) Proof that the physician previously has been issued an
24 unrestricted license to practice medicine in any state of the United
25 States and that the physician has never been the subject of
26 disciplinary action by a medical board in any jurisdiction;

27 (c) Proof that the physician satisfies the requirements for
28 licensure set forth in NRS 630.160 *or section 2 of this act, as*
29 *applicable*, or the requirements for licensure by endorsement set
30 forth in NRS 630.1605, 630.1606 or 630.1607;

31 (d) Acknowledgment that the practice of the physician under the
32 special volunteer medical license will be exclusively devoted to
33 providing medical care:

34 (1) To persons in this State who are indigent, uninsured or
35 unable to afford health care; or

36 (2) As part of any disaster relief operations conducted by a
37 governmental entity or nonprofit organization; and

38 (e) Acknowledgment that the physician will not receive any
39 payment or compensation, either direct or indirect, or have the
40 expectation of any payment or compensation, for providing medical
41 care under the special volunteer medical license, except for payment
42 by a medical facility at which the physician provides volunteer
43 medical services of the expenses of the physician for necessary
44 travel, continuing education, malpractice insurance or fees of the
45 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 must 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 of the renewed license.

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. 16. NRS 630.268 is hereby amended to read as follows:

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

For application for and issuance of a license to practice as a physician, including a license by endorsement	\$600
For application for and issuance of a temporary, locum tenens, limited, restricted, authorized facility, special, special purpose or special event license	400
For renewal of a limited, restricted, authorized facility or special license	400
For application for and issuance of a license as a physician assistant, including a license by endorsement	400
<i>For application for and issuance of a simultaneous license as a physician assistant</i>	<i>200</i>
For biennial registration of a physician assistant.....	800
<i>For biennial simultaneous registration of a physician assistant.....</i>	<i>400</i>
For biennial registration of a physician	800



1 For application for and issuance of a license as a
2 perfusionist or practitioner of respiratory care \$400
3 For biennial renewal of a license as a perfusionist 600
4 For biennial registration of a practitioner of
5 respiratory care 600
6 For biennial registration for a physician who is
7 on inactive status 400
8 For written verification of licensure 50
9 For a duplicate identification card 25
10 For a duplicate license 50
11 For computer printouts or labels 500
12 For verification of a listing of physicians, per
13 hour 20
14 For furnishing a list of new physicians 100
15

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

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

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

29 (a) NRS 630.1607, and the applicant is an active member of, or
30 the spouse of an active member of, the Armed Forces of the United
31 States, a veteran or the surviving spouse of a veteran, the Board
32 shall collect not more than one-half of the fee set forth in subsection
33 1 for the initial issuance of the license. As used in this paragraph,
34 "veteran" has the meaning ascribed to it in NRS 417.005.

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

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

42 **Sec. 17.** NRS 630.271 is hereby amended to read as follows:

43 630.271 1. A physician assistant may perform such medical
44 services as [the] :



1 (a) *The* physician assistant is authorized to perform by his or her
2 supervising physician ~~[. Such services may include]~~ , *including,*
3 *without limitation,* ordering home health care for a patient ~~[.]~~; and

4 (b) *Are within the scope of practice of the supervising*
5 *physician.*

6 2. The Board and supervising physician shall limit the
7 authority of a physician assistant to prescribe controlled substances
8 to those schedules of controlled substances that the supervising
9 physician is authorized to prescribe pursuant to state and federal
10 law.

11 **Sec. 18.** NRS 630.273 is hereby amended to read as follows:

12 630.273 The Board may issue a license to an applicant who ~~is~~
13 ~~qualified under~~ :

14 1. *Meets* the *qualifications set forth in this chapter and the*
15 *regulations of the Board to perform medical services under the*
16 *supervision of a supervising physician* ~~[.The]~~ ;

17 2. *Submits an* application for a license as a physician assistant
18 ~~[must include]~~ *which includes* all information required to complete
19 the application ~~[.]~~; and

20 3. *Has passed the Physician Assistant National Certifying*
21 *Examination administered by the National Commission on*
22 *Certification of Physicians Assistants, or its successor*
23 *organization, or by another nationally recognized organization as*
24 *determined by the Board for the accreditation of physician*
25 *assistants.*

26 **Sec. 19.** NRS 630.275 is hereby amended to read as follows:

27 630.275 The Board shall adopt regulations regarding the
28 licensure of a physician assistant, including, but not limited to:

29 1. The educational and other qualifications of applicants.

30 2. The required academic program for applicants.

31 3. The procedures for applications for and the issuance of
32 licenses.

33 4. The procedures deemed necessary by the Board for
34 applications for and the initial issuance of licenses by endorsement
35 pursuant to NRS 630.2751 or 630.2752.

36 5. The tests or examinations of applicants *required* by the
37 Board.

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

44 7. The duration, renewal and termination of licenses, including
45 licenses by endorsement. *The Board shall not require a physician*



1 *assistant to receive or maintain certification by the National*
2 *Commission on Certification of Physician Assistants, or its*
3 *successor organization, or by any other nationally recognized*
4 *organization for the accreditation of physician assistants to satisfy*
5 *any continuing education requirements for the renewal of*
6 *licenses.*

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

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

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

18 **Sec. 20.** NRS 630.2751 is hereby amended to read as follows:

19 630.2751 1. The Board may issue a license by endorsement
20 to practice as a physician assistant to an applicant who meets the
21 requirements set forth in this section. An applicant may submit to
22 the Board an application for such a license if the applicant ~~[-;~~
23 ~~—(a) Holds]~~ **holds** a corresponding valid and unrestricted license
24 to practice as a physician assistant in the District of Columbia or any
25 state or territory of the United States . ~~[-; and~~

26 ~~—(b) Is certified in a specialty recognized by the American Board~~
27 ~~of Medical Specialties.]~~

28 2. An applicant for a license by endorsement pursuant to this
29 section must submit to the Board with his or her application:

30 (a) Proof satisfactory to the Board that the applicant:

31 (1) Satisfies the requirements of subsection 1;

32 (2) Has not been disciplined or investigated by the
33 corresponding regulatory authority of the District of Columbia or
34 any state or territory in which the applicant currently holds or has
35 held a license to practice as a physician assistant; and

36 (3) Has not been held civilly or criminally liable for
37 malpractice in the District of Columbia or any state or territory of
38 the United States;

39 (b) A complete set of fingerprints and written permission
40 authorizing the Board to forward the fingerprints in the manner
41 provided in NRS 630.167;

42 (c) An affidavit stating that the information contained in the
43 application and any accompanying material is true and correct; and

44 (d) Any other information required by the Board.



1 3. Not later than 15 business days after receiving an application
2 for a license by endorsement to practice as a physician assistant
3 pursuant to this section, the Board shall provide written notice to the
4 applicant of any additional information required by the Board to
5 consider the application. Unless the Board denies the application for
6 good cause, the Board shall approve the application and issue a
7 license by endorsement to practice as a physician assistant to the
8 applicant not later than:

9 (a) Forty-five days after receiving the application; or

10 (b) Ten days after the Board receives a report on the applicant's
11 background based on the submission of the applicant's fingerprints,
12 ↪ whichever occurs later.

13 4. A license by endorsement to practice as a physician assistant
14 may be issued at a meeting of the Board or between its meetings by
15 the President and Executive Director of the Board. Such an action
16 shall be deemed to be an action of the Board.

17 **Sec. 21.** NRS 630.2752 is hereby amended to read as follows:

18 630.2752 1. The Board may issue a license by endorsement
19 to practice as a physician assistant to an applicant who meets the
20 requirements set forth in this section. An applicant may submit to
21 the Board an application for such a license if the applicant:

22 (a) Holds a corresponding valid and unrestricted license to
23 practice as a physician assistant in the District of Columbia or any
24 state or territory of the United States; *and*

25 (b) ~~Is certified in a specialty recognized by the American Board~~
26 ~~of Medical Specialties; and~~

27 ~~—(c) Is an active member of, or the spouse of an active member~~
28 ~~of, the Armed Forces of the United States, a veteran or the surviving~~
29 ~~spouse of a veteran.~~

30 2. An applicant for a license by endorsement pursuant to this
31 section must submit to the Board with his or her application:

32 (a) Proof satisfactory to the Board that the applicant:

33 (1) Satisfies the requirements of subsection 1;

34 (2) Has not been disciplined or investigated by the
35 corresponding regulatory authority of the District of Columbia or
36 the state or territory in which the applicant holds a license to
37 practice as a physician assistant; and

38 (3) Has not been held civilly or criminally liable for
39 malpractice in the District of Columbia or any state or territory of
40 the United States;

41 (b) A complete set of fingerprints and written permission
42 authorizing the Board to forward the fingerprints in the manner
43 provided in NRS 630.167;

44 (c) An affidavit stating that the information contained in the
45 application and any accompanying material is true and correct; and



1 (d) Any other information required by the Board.

2 3. Not later than 15 business days after receiving an application
3 for a license by endorsement to practice as a physician assistant
4 pursuant to this section, the Board shall provide written notice to the
5 applicant of any additional information required by the Board to
6 consider the application. Unless the Board denies the application for
7 good cause, the Board shall approve the application and issue a
8 license by endorsement to practice as a physician assistant to the
9 applicant not later than:

10 (a) Forty-five days after receiving all the additional information
11 required by the Board to complete the application; or

12 (b) Ten days after the Board receives a report on the applicant's
13 background based on the submission of the applicant's fingerprints,
14 ↪ whichever occurs later.

15 4. A license by endorsement to practice as a physician assistant
16 may be issued at a meeting of the Board or between its meetings by
17 the President and Executive Director of the Board. Such an action
18 shall be deemed to be an action of the Board.

19 5. At any time before making a final decision on an application
20 for a license by endorsement pursuant to this section, the Board may
21 grant a provisional license authorizing an applicant to practice as a
22 physician assistant in accordance with regulations adopted by the
23 Board.

24 6. As used in this section, "veteran" has the meaning ascribed
25 to it in NRS 417.005.

26 **Sec. 22.** NRS 630.400 is hereby amended to read as follows:

27 630.400 1. It is unlawful for any person to:

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

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

32 (c) Practice medicine, perfusion or respiratory care *or practice*
33 *as a physician assistant* under a false or assumed name or falsely
34 personate another licensee;

35 (d) Except as otherwise provided by a specific statute, practice
36 medicine, perfusion or respiratory care *or practice as a physician*
37 *assistant* without being licensed under this chapter;

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

41 (f) ~~Hold~~ *Except as authorized by subsection 2, hold* himself
42 or herself out as a physician assistant or use any other term
43 indicating or implying that he or she is a physician assistant without
44 being licensed by the Board; or



1 (g) Hold himself or herself out as a practitioner of respiratory
2 care or use any other term indicating or implying that he or she is a
3 practitioner of respiratory care without being licensed by the Board.

4 2. *A person who meets the qualifications for licensure to*
5 *practice as a physician assistant pursuant to this chapter and*
6 *holds a certification from the National Commission on*
7 *Certification of Physician Assistants, or its successor organization,*
8 *but does not possess a current license pursuant to this chapter may*
9 *use the title “inactive physician assistant” and shall not act or*
10 *practice as a physician assistant.*

11 3. Unless a greater penalty is provided pursuant to NRS
12 200.830 or 200.840, a person who violates any provision of
13 subsection 1 ~~1~~ *or 2*:

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

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

18 and shall be punished as provided in NRS 193.130.

19 ~~3~~ 4. In addition to any other penalty prescribed by law, if the
20 Board determines that a person has committed any act described in
21 subsection 1 ~~1~~ *or prohibited by subsection 2*, the Board may:

22 (a) Issue and serve on the person an order to cease and desist
23 until the person obtains from the Board the proper license or
24 otherwise demonstrates that he or she is no longer in violation of
25 subsection 1 ~~1~~ *or 2*. An order to cease and desist must include a
26 telephone number with which the person may contact the Board.

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

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

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

39 **Sec. 23.** Chapter 633 of NRS is hereby amended by adding
40 thereto the provisions set forth as sections 24 to 29, inclusive, of this
41 act.

42 **Sec. 24. 1.** *Except as otherwise provided in NRS 633.315,*
43 *the Board may issue a license to any person who:*



1 (a) *Has received a degree of doctor of medicine from a school*
2 *of osteopathic medicine located in the United States or Canada*
3 *and has completed 2 years of postgraduate residency training; or*

4 (b) *Has received a degree of doctor of medicine from a school*
5 *of osteopathic medicine located outside of the United States and*
6 *Canada and has completed 3 years of postgraduate residency*
7 *training.*

8 2. *The applicant for a license shall submit verified proof*
9 *satisfactory to the Board that the applicant meets the requirements*
10 *of subsection 1.*

11 **Sec. 25.** *A person applying for a license to practice as a*
12 *physician assistant pursuant to the provisions of this chapter who*
13 *wishes to hold a simultaneous license to practice as a physician*
14 *assistant pursuant to the provisions of chapter 630 of NRS must:*

15 1. *Indicate in the application that he or she wishes to hold a*
16 *simultaneous license to practice as a physician assistant pursuant*
17 *to the provisions of chapter 630 of NRS;*

18 2. *Apply for a license to practice as a physician assistant to:*

19 (a) *The Board pursuant to this chapter; and*

20 (b) *The Board of Medical Examiners pursuant to chapter 630*
21 *of NRS; and*

22 3. *Pay all applicable fees, including, without limitation:*

23 (a) *The application and initial simultaneous license fee for a*
24 *physician assistant pursuant to NRS 633.501; and*

25 (b) *The fee for application for and issuance of a simultaneous*
26 *license as a physician assistant pursuant to NRS 630.268.*

27 **Sec. 26.** *A person applying to renew a license to practice as a*
28 *physician assistant pursuant to the provisions of this chapter who*
29 *wishes to hold a simultaneous license to practice as a physician*
30 *assistant pursuant to the provisions of chapter 630 of NRS must:*

31 1. *Indicate in the application that he or she wishes to hold a*
32 *simultaneous license to practice as a physician assistant pursuant*
33 *to the provisions of chapter 630 of NRS;*

34 2. *Apply:*

35 (a) *To renew a license to practice as a physician assistant to*
36 *the Board pursuant to this chapter; and*

37 (b) *For a license to practice as a physician assistant to the*
38 *Board of Medical Examiners pursuant to chapter 630 of NRS; and*

39 3. *Pay all applicable fees, including, without limitation:*

40 (a) *The annual simultaneous registration fee for a physician*
41 *assistant pursuant to NRS 633.501; and*

42 (b) *The fee for application for and issuance of a simultaneous*
43 *license as a physician assistant pursuant to NRS 630.268.*

44 **Sec. 27.** *If a person licensed to practice as a physician*
45 *assistant pursuant to the provisions of this chapter is not applying*



1 *to renew his or her license and wishes to hold a simultaneous*
2 *license to practice as a physician assistant pursuant to the*
3 *provisions of chapter 630 of NRS, the person must:*

4 1. *Apply for a license to practice as a physician assistant to*
5 *the Board of Medical Examiners pursuant to chapter 630 of NRS;*
6 *and*

7 2. *Pay all applicable fees, including, without limitation:*

8 (a) *The annual simultaneous registration fee for a physician*
9 *assistant pursuant to NRS 633.501; and*

10 (b) *The fee for application for and issuance of a simultaneous*
11 *license as a physician assistant pursuant to NRS 630.268.*

12 **Sec. 28.** *On or before the last day of each quarter, the Board*
13 *shall provide to the Board of Medical Examiners a list of all*
14 *physician assistants licensed by the Board.*

15 **Sec. 29.** 1. *A supervising osteopathic physician shall review*
16 *and initial charts of any patient of a physician assistant pursuant*
17 *to the provisions of subsection 2 who has not previously practiced*
18 *as a physician assistant.*

19 2. *Except as otherwise provided in subsection 3, during the*
20 *first 90 days of supervision, a supervising osteopathic physician*
21 *shall review and initial at least 100 charts or 10 percent of the*
22 *total number of charts of patients of the physician assistant,*
23 *whichever is greater.*

24 3. *If a supervising osteopathic physician has reviewed and*
25 *initialed less than 100 charts of patients of the physician assistant*
26 *during the first 90 days of supervision, the supervising osteopathic*
27 *physician must continue to review and initial charts of patients of*
28 *the physician assistant after the first 90 days of supervision until*
29 *the supervising osteopathic physician reviews and initials at least*
30 *100 charts of patients of the physician assistant.*

31 4. *A supervising osteopathic physician shall review and initial*
32 *charts of patients of the physician assistant only to the extent that*
33 *the charts include medical services provided within the portion of*
34 *the practice of the physician assistant that the supervising*
35 *osteopathic physician supervises.*

36 5. *The Board shall not adopt regulations requiring a*
37 *supervising physician to review and initial the charts of a patient*
38 *of a physician assistant the supervising physician is supervising in*
39 *addition to what is required by this section.*

40 **Sec. 30.** NRS 633.171 is hereby amended to read as follows:

41 633.171 1. This chapter does not apply to:

42 (a) The practice of medicine or perfusion pursuant to chapter
43 630 of NRS, dentistry, chiropractic, podiatry, optometry, respiratory
44 care, faith or Christian Science healing, nursing, veterinary medicine
45 or fitting hearing aids.



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

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

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

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

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


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

24 3. This chapter does not prohibit:

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

26 (b) The domestic administration of family remedies.

27 **Sec. 31.** NRS 633.305 is hereby amended to read as follows:

28 633.305 Except as otherwise provided in NRS 633.399,
29 633.400, 633.4335 and 633.4336  *and section 24 of this act:*

30 1. Every applicant for a license shall:

31 (a) File an application with the Board in the manner prescribed
32 by regulations of the Board;

33 (b) Submit verified proof satisfactory to the Board that the
34 applicant meets any age, citizenship and educational requirements
35 prescribed by this chapter; and

36 (c) Pay in advance to the Board the application and initial
37 license fee specified in NRS 633.501.

38 2. An application filed with the Board pursuant to subsection 1
39 must include all information required to complete the application.

40 3. The Board may hold hearings and conduct investigations
41 into any matter related to the application and, in addition to the
42 proofs required by subsection 1, may take such further evidence and
43 require such other documents or proof of qualifications as it deems
44 proper.



1 4. The Board may reject an application if the Board has cause
2 to believe that any credential or information submitted by the
3 applicant is false, misleading, deceptive or fraudulent.

4 **Sec. 32.** NRS 633.311 is hereby amended to read as follows:

5 633.311 1. Except as otherwise provided in NRS 633.315
6 and 633.381 to 633.419, inclusive, *and section 24 of this act*, an
7 applicant for a license to practice osteopathic medicine may be
8 issued a license by the Board if:

9 (a) The applicant is 21 years of age or older;

10 (b) The applicant is a graduate of a school of osteopathic
11 medicine;

12 (c) The applicant:

13 (1) Has graduated from a school of osteopathic medicine
14 before 1995 and has completed:

15 (I) A hospital internship; or

16 (II) One year of postgraduate training that complies with
17 the standards of intern training established by the American
18 Osteopathic Association;

19 (2) Has completed 3 years, or such other length of time as
20 required by a specific program, of postgraduate medical education
21 as a resident in the United States or Canada in a program approved
22 by the Board, the Bureau of Professional Education of the American
23 Osteopathic Association or the Accreditation Council for Graduate
24 Medical Education; or

25 (3) Is a resident who is enrolled in a postgraduate training
26 program in this State, has completed 24 months of the program and
27 has committed, in writing, that he or she will complete the program;

28 (d) The applicant applies for the license as provided by law;

29 (e) The applicant passes:

30 (1) All parts of the licensing examination of the National
31 Board of Osteopathic Medical Examiners;

32 (2) All parts of the licensing examination of the Federation
33 of State Medical Boards;

34 (3) All parts of the licensing examination of the Board, a
35 state, territory or possession of the United States, or the District of
36 Columbia, and is certified by a specialty board of the American
37 Osteopathic Association or by the American Board of Medical
38 Specialties; or

39 (4) A combination of the parts of the licensing examinations
40 specified in subparagraphs (1), (2) and (3) that is approved by the
41 Board;

42 (f) The applicant pays the fees provided for in this chapter; and

43 (g) The applicant submits all information required to complete
44 an application for a license.



1 2. An applicant for a license to practice osteopathic medicine
2 may satisfy the requirements for postgraduate education or training
3 prescribed by paragraph (c) of subsection 1:

4 (a) In one or more approved postgraduate programs, which may
5 be conducted at one or more facilities in this State or, except for a
6 resident who is enrolled in a postgraduate training program in this
7 State pursuant to subparagraph (3) of paragraph (c) of subsection 1,
8 in the District of Columbia or another state or territory of the United
9 States;

10 (b) In one or more approved specialties or disciplines;

11 (c) In nonconsecutive months; and

12 (d) At any time before receiving his or her license.

13 **Sec. 33.** NRS 633.416 is hereby amended to read as follows:

14 633.416 1. An osteopathic physician who is retired from
15 active practice and who:

16 (a) Wishes to donate his or her expertise for the medical care
17 and treatment of persons in this State who are indigent, uninsured or
18 unable to afford health care; or

19 (b) Wishes to provide services for any disaster relief operations
20 conducted by a governmental entity or nonprofit organization,

21 ↪ may obtain a special volunteer license to practice osteopathic
22 medicine by submitting an application to the Board pursuant to this
23 section.

24 2. An application for a special volunteer license to practice
25 osteopathic medicine must be on a form provided by the Board and
26 must include:

27 (a) Documentation of the history of medical practice of the
28 osteopathic physician;

29 (b) Proof that the osteopathic physician previously has been
30 issued an unrestricted license to practice osteopathic medicine in
31 any state of the United States and that the osteopathic physician has
32 never been the subject of disciplinary action by a medical board in
33 any jurisdiction;

34 (c) Proof that the osteopathic physician satisfies the
35 requirements for licensure set forth in NRS 633.311 *or section 24 of*
36 *this act, as applicable*, or the requirements for licensure by
37 endorsement set forth in NRS 633.399 or 633.400;

38 (d) Acknowledgment that the practice of the osteopathic
39 physician under the special volunteer license to practice osteopathic
40 medicine will be exclusively devoted to providing medical care:

41 (1) To persons in this State who are indigent, uninsured or
42 unable to afford health care; or

43 (2) As part of any disaster relief operations conducted by a
44 governmental entity or nonprofit organization; and



1 (e) Acknowledgment that the osteopathic physician will not
2 receive any payment or compensation, either direct or indirect, or
3 have the expectation of any payment or compensation, for providing
4 medical care under the special volunteer license to practice
5 osteopathic medicine, except for payment by a medical facility at
6 which the osteopathic physician provides volunteer medical services
7 of the expenses of the osteopathic physician for necessary travel,
8 continuing education, malpractice insurance or fees of the State
9 Board of Pharmacy.

10 3. If the Board finds that the application of an osteopathic
11 physician satisfies the requirements of subsection 2 and that the
12 retired osteopathic physician is competent to practice osteopathic
13 medicine, the Board shall issue a special volunteer license to
14 practice osteopathic medicine to the osteopathic physician.

15 4. The initial special volunteer license to practice osteopathic
16 medicine issued pursuant to this section expires 1 year after the date
17 of issuance. The license may be renewed pursuant to this section,
18 and any license that is renewed expires 2 years after the date of
19 issuance.

20 5. The Board shall not charge a fee for:

21 (a) The review of an application for a special volunteer license
22 to practice osteopathic medicine; or

23 (b) The issuance or renewal of a special volunteer license to
24 practice osteopathic medicine pursuant to this section.

25 6. An osteopathic physician who is issued a special volunteer
26 license to practice osteopathic medicine pursuant to this section and
27 who accepts the privilege of practicing osteopathic medicine in this
28 State pursuant to the provisions of the special volunteer license to
29 practice osteopathic medicine is subject to all the provisions
30 governing disciplinary action set forth in this chapter.

31 7. An osteopathic physician who is issued a special volunteer
32 license to practice osteopathic medicine pursuant to this section
33 shall comply with the requirements for continuing education
34 adopted by the Board.

35 **Sec. 34.** NRS 633.433 is hereby amended to read as follows:

36 633.433 The Board may issue a license as a physician assistant
37 to an applicant who ~~is qualified under~~ :

38 1. *Meets the qualifications set forth in this chapter and the*
39 *regulations of the Board to perform medical services under the*
40 *supervision of a supervising osteopathic physician ~~[-The]~~ ; and*

41 2. *Submits an* application for a license as a physician assistant
42 ~~[must include]~~ *that includes* all information required to complete
43 the application ~~[-]~~ ; and

44 3. *Has passed the Physician Assistant National Certifying*
45 *Examination administered by the National Commission on*



1 *Certification of Physician Assistants, or its successor organization,*
2 *or by another nationally recognized organization as determined by*
3 *the Board for the accreditation of physician assistants.*

4 **Sec. 35.** NRS 633.4335 is hereby amended to read as follows:

5 633.4335 1. The Board may issue a license by endorsement
6 to practice as a physician assistant to an applicant who meets the
7 requirements set forth in this section. An applicant may submit to
8 the Board an application for such a license if the applicant ~~f;~~

9 ~~—(a) Holds~~ holds a corresponding valid and unrestricted license
10 to practice as a physician assistant in the District of Columbia or any
11 state or territory of the United States . ~~f; and~~

12 ~~—(b) Is certified in a specialty recognized by the American Board~~
13 ~~of Medical Specialties or the American Osteopathic Association.]~~

14 2. An applicant for a license by endorsement pursuant to this
15 section must submit to the Board with his or her application:

16 (a) Proof satisfactory to the Board that the applicant:

17 (1) Satisfies the requirements of subsection 1;

18 (2) Has not been disciplined and is not currently under
19 investigation by the corresponding regulatory authority of the
20 District of Columbia or any state or territory in which the applicant
21 currently holds or has held a license to practice as a physician
22 assistant; and

23 (3) Has not been held civilly or criminally liable for
24 malpractice in the District of Columbia or any state or territory of
25 the United States;

26 (b) A complete set of fingerprints and written permission
27 authorizing the Board to forward the fingerprints in the manner
28 provided in NRS 633.309;

29 (c) An affidavit stating that the information contained in the
30 application and any accompanying material is true and correct;

31 (d) The application and initial license fee specified in this
32 chapter; and

33 (e) Any other information required by the Board.

34 3. Not later than 15 business days after receiving an application
35 for a license by endorsement to practice as a physician assistant
36 pursuant to this section, the Board shall provide written notice to the
37 applicant of any additional information required by the Board to
38 consider the application. Unless the Board denies the application for
39 good cause, the Board shall approve the application and issue a
40 license by endorsement to practice as a physician assistant to the
41 applicant not later than:

42 (a) Forty-five days after receiving the application; or

43 (b) Ten days after the Board receives a report on the applicant's
44 background based on the submission of the applicant's fingerprints,
45 ↪ whichever occurs later.



1 4. A license by endorsement to practice as a physician assistant
2 may be issued at a meeting of the Board or between its meetings by
3 the President and Executive Director of the Board. Such an action
4 shall be deemed to be an action of the Board.

5 **Sec. 36.** NRS 633.4336 is hereby amended to read as follows:

6 633.4336 1. The Board may issue a license by endorsement
7 to practice as a physician assistant to an applicant who meets the
8 requirements set forth in this section. An applicant may submit to
9 the Board an application for such a license if the applicant:

10 (a) Holds a corresponding valid and unrestricted license to
11 practice as a physician assistant in the District of Columbia or any
12 state or territory of the United States; *and*

13 (b) ~~Is certified in a specialty recognized by the American Board~~
14 ~~of Medical Specialties or the American Osteopathic Association;~~
15 ~~and~~

16 ~~—(c)~~ Is an active member of, or the spouse of an active member
17 of, the Armed Forces of the United States, a veteran or the surviving
18 spouse of a veteran.

19 2. An applicant for a license by endorsement pursuant to this
20 section must submit to the Board with his or her application:

21 (a) Proof satisfactory to the Board that the applicant:

22 (1) Satisfies the requirements of subsection 1;

23 (2) Has not been disciplined and is not currently under
24 investigation by the corresponding regulatory authority of the
25 District of Columbia or the state or territory in which the applicant
26 holds a license to practice as a physician assistant; and

27 (3) Has not been held civilly or criminally liable for
28 malpractice in the District of Columbia or any state or territory of
29 the United States;

30 (b) A complete set of fingerprints and written permission
31 authorizing the Board to forward the fingerprints in the manner
32 provided in NRS 633.309;

33 (c) An affidavit stating that the information contained in the
34 application and any accompanying material is true and correct;

35 (d) The application and initial license fee specified in this
36 chapter; and

37 (e) Any other information required by the Board.

38 3. Not later than 15 business days after receiving an application
39 for a license by endorsement to practice as a physician assistant
40 pursuant to this section, the Board shall provide written notice to the
41 applicant of any additional information required by the Board to
42 consider the application. Unless the Board denies the application for
43 good cause, the Board shall approve the application and issue a
44 license by endorsement to practice as a physician assistant to the
45 applicant not later than:



1 (a) Forty-five days after receiving all the additional information
2 required by the Board to complete the application; or

3 (b) Ten days after the Board receives a report on the applicant's
4 background based on the submission of the applicant's fingerprints,
5 ↪ whichever occurs later.

6 4. A license by endorsement to practice as a physician assistant
7 may be issued at a meeting of the Board or between its meetings by
8 the President and Executive Director of the Board. Such an action
9 shall be deemed to be an action of the Board.

10 5. At any time before making a final decision on an application
11 for a license by endorsement pursuant to this section, the Board may
12 grant a provisional license authorizing an applicant to practice as a
13 physician assistant in accordance with regulations adopted by the
14 Board.

15 6. As used in this section, "veteran" has the meaning ascribed
16 to it in NRS 417.005.

17 **Sec. 37.** NRS 633.434 is hereby amended to read as follows:

18 633.434 The Board shall adopt regulations regarding the
19 licensure of a physician assistant, including, without limitation:

- 20 1. The educational and other qualifications of applicants.
- 21 2. The required academic program for applicants.
- 22 3. The procedures for applications for and the issuance of
23 licenses.

24 4. The procedures deemed necessary by the Board for
25 applications for and the issuance of initial licenses by endorsement
26 pursuant to NRS 633.4335 and 633.4336.

27 5. The tests or examinations of applicants *required* by the
28 Board.

29 6. The medical services which a physician assistant may
30 perform, except that a physician assistant may not perform
31 osteopathic manipulative therapy or those specific functions and
32 duties delegated or restricted by law to persons licensed as dentists,
33 chiropractors, doctors of Oriental medicine, podiatric physicians,
34 optometrists and hearing aid specialists under chapters 631, 634,
35 634A, 635, 636 and 637B, respectively, of NRS.

36 7. The grounds and procedures respecting disciplinary actions
37 against physician assistants.

38 8. The supervision of medical services of a physician assistant
39 by a supervising osteopathic physician.

40 *9. The annual renewal of licenses, including licenses by*
41 *endorsement pursuant to NRS 633.4335 and 633.4336.*

42 **Sec. 38.** NRS 633.452 is hereby amended to read as follows:

43 633.452 1. ~~[A] Except as otherwise provided in this section,~~
44 ~~a physician assistant licensed under the provisions of this chapter~~
45 ~~who is responding to a need for medical care created by an~~



1 ~~emergency or disaster, as declared by an applicable governmental~~
2 ~~entity, may render emergency care that is directly related to the~~
3 ~~emergency or disaster] is considered to be and is deemed the agent~~
4 ~~of his or her supervising osteopathic physician in the performance~~
5 ~~of all medical activities.~~

6 2. A physician assistant shall not perform medical services
7 without ~~[the]~~ supervision ~~[of an]~~ from his or her supervising
8 osteopathic physician ~~[-, as required by this chapter. The provisions~~
9 ~~of this subsection apply only for the duration of the emergency or~~
10 ~~disaster.~~

11 ~~—2.— An osteopathic physician who supervises a physician~~
12 ~~assistant who is rendering emergency care that is directly related to~~
13 ~~an emergency or disaster, as described in subsection 1, shall not be~~
14 ~~required to meet the requirements set forth in this chapter for such~~
15 ~~supervision.] except in:~~

16 (a) Life-threatening emergencies, including, without
17 limitation, at the scene of an accident; or

18 (b) Emergency situations, including, without limitation,
19 human-caused or natural disaster relief efforts.

20 3. When a physician assistant performs medical services in
21 an emergency described in subsection 2:

22 (a) The physician assistant is not the agent of his or her
23 supervising osteopathic physician and the supervising osteopathic
24 physician is not responsible or liable for any medical services
25 provided by the physician assistant;

26 (b) The physician assistant may provide whatever medical
27 services possible based on the need of the patient and the training,
28 education and experience of the physician assistant;

29 (c) If an osteopathic physician is available on-scene, the
30 physician assistant may take direction from the osteopathic
31 physician; and

32 (d) The physician assistant shall make a reasonable effort to
33 contact his or her supervising osteopathic physician, as soon as
34 possible, to advise him or her of the incident and the physician
35 assistant's role in providing medical services.

36 **Sec. 39.** NRS 633.466 is hereby amended to read as follows:

37 633.466 1. A physician assistant *who does not hold a*
38 *simultaneous license to practice as a physician assistant pursuant*
39 *to the provisions of chapter 630 of NRS* may be supervised by a
40 physician licensed to practice medicine in this State pursuant to
41 chapter 630 of NRS in place of his or her supervising osteopathic
42 physician if:

43 (a) The physician assistant works in a geographical area where
44 the physician assistant can be conveniently supervised only by such
45 a physician; and



1 (b) The supervising osteopathic physician and the physician
2 licensed pursuant to chapter 630 of NRS agree to the arrangement.

3 2. A physician assistant so supervised is not a physician
4 assistant for the purposes of chapter 630 of NRS solely because of
5 that supervision.

6 3. The State Board of Osteopathic Medicine shall adopt jointly
7 with the Board of Medical Examiners regulations necessary to
8 administer the provisions of this section.

9 **Sec. 40.** NRS 633.468 is hereby amended to read as follows:

10 633.468 1. ~~[An]~~ *Subject to the provisions of this section, an*
11 *osteopathic physician may at any time refuse to act as a supervising*
12 *osteopathic physician for a physician assistant.*

13 2. A condition, stipulation or provision in a contract or other
14 agreement which:

15 (a) Requires an osteopathic physician to act as a supervising
16 osteopathic physician for a physician assistant;

17 (b) Penalizes an osteopathic physician for refusing to act as a
18 supervising osteopathic physician for a physician assistant; or

19 (c) Limits a supervising osteopathic physician's authority with
20 regard to any protocol, standing order or delegation of authority
21 applicable to a physician assistant supervised by the osteopathic
22 physician,

23 ↪ is against public policy and is void.

24 3. *If an osteopathic physician refuses to act as a supervising*
25 *osteopathic physician for a physician assistant pursuant to this*
26 *section, the supervising osteopathic physician or his or her*
27 *designee must provide written notice to the physician assistant and*
28 *the Board. Such written notice must clearly state that the*
29 *supervising osteopathic physician:*

30 (a) *Refuses to act as a supervising osteopathic physician for*
31 *the physician assistant; and*

32 (b) *No longer serves as the supervising osteopathic physician.*

33 4. *The supervising osteopathic physician shall not refuse to*
34 *act as a supervising osteopathic physician until the physician*
35 *assistant receives the notice required by subsection 3.*

36 5. *Upon receiving the notice described in subsection 3 from a*
37 *supervising osteopathic physician, the physician assistant must:*

38 (a) *Immediately stop performing medical services for any*
39 *patients of the supervising osteopathic physician; and*

40 (b) *Notify the Board of a contract with a new supervising*
41 *osteopathic physician within 5 business days after entering into*
42 *such contract.*

43 **Sec. 41.** NRS 633.469 is hereby amended to read as follows:

44 633.469 1. *The Board shall establish by regulation the*
45 *maximum number of physician assistants that a supervising*



1 *osteopathic physician may supervise at the same time and may*
2 *establish different maximum numbers for different practice areas.*

3 2. A supervising osteopathic physician shall provide
4 supervision to his or her physician assistant continuously whenever
5 the physician assistant is performing his or her professional duties.

6 ~~[2.]~~ 3. Except as otherwise provided in subsection ~~[3.]~~ 4, a
7 supervising osteopathic physician may provide supervision to his or
8 her physician assistant in person, electronically, telephonically or by
9 fiber optics. When providing supervision electronically,
10 telephonically or by fiber optics, a supervising osteopathic physician
11 may be at a different site than the physician assistant, including a
12 site located within or outside this State or the United States.

13 ~~[3.]~~ 4. A supervising osteopathic physician shall provide
14 supervision to his or her physician assistant in person at all times
15 during the first 30 days that the supervising osteopathic physician
16 supervises the physician assistant ~~[.]~~ *if the physician assistant has*
17 *not been previously licensed or has not previously practiced as a*
18 *physician assistant.* The provisions of this subsection do not apply
19 to a federally qualified health center.

20 ~~[4.]~~ 5. *A supervising osteopathic physician providing*
21 *supervision pursuant to subsection 4 must be physically present at*
22 *the same location as the physician assistant performing the*
23 *medical services but is not required to be in the same room as the*
24 *physician assistant.*

25 6. Before beginning to supervise a physician assistant, a
26 supervising osteopathic physician must communicate to the
27 physician assistant:

- 28 (a) The scope of practice of the physician assistant;
29 (b) The access to the supervising osteopathic physician that the
30 physician assistant will have; and
31 (c) Any processes for evaluation that the supervising osteopathic
32 physician will use to evaluate the physician assistant.

33 ~~[5.]~~ 7. A supervising osteopathic physician shall not delegate
34 to his or her physician assistant, and the physician assistant shall not
35 accept, a task that is beyond the physician assistant's capability to
36 complete safely.

37 ~~[6.]~~ 8. As used in this section, "federally qualified health
38 center" has the meaning ascribed to it in 42 U.S.C. § 1396d(1)(2)(B).

39 **Sec. 42.** NRS 633.471 is hereby amended to read as follows:

40 633.471 1. Except as otherwise provided in subsection 10
41 and NRS 633.491, every holder of a license , *except a physician*
42 *assistant,* issued under this chapter, except a temporary or a special
43 license, may renew the license on or before January 1 of each
44 calendar year after its issuance by:

- 45 (a) Applying for renewal on forms provided by the Board;



1 (b) Paying the annual license renewal fee specified in this
2 chapter;

3 (c) Submitting a list of all actions filed or claims submitted to
4 arbitration or mediation for malpractice or negligence against the
5 holder during the previous year;

6 (d) ~~Submitting~~ *Subject to subsection 11, submitting* evidence
7 to the Board that in the year preceding the application for renewal
8 the holder has attended courses or programs of continuing education
9 approved by the Board in accordance with regulations adopted by
10 the Board totaling a number of hours established by the Board
11 which must not be less than 35 hours nor more than that set in the
12 requirements for continuing medical education of the American
13 Osteopathic Association; and

14 (e) Submitting all information required to complete the renewal.

15 2. The Secretary of the Board shall notify each licensee of the
16 requirements for renewal not less than 30 days before the date of
17 renewal.

18 3. The Board shall request submission of verified evidence of
19 completion of the required number of hours of continuing medical
20 education annually from no fewer than one-third of the applicants
21 for renewal of a license to practice osteopathic medicine or a license
22 to practice as a physician assistant. ~~Upon~~ *Subject to subsection 11,*
23 *upon* a request from the Board, an applicant for renewal of a license
24 to practice osteopathic medicine or a license to practice as a
25 physician assistant shall submit verified evidence satisfactory to the
26 Board that in the year preceding the application for renewal the
27 applicant attended courses or programs of continuing medical
28 education approved by the Board totaling the number of hours
29 established by the Board.

30 4. The Board shall require each holder of a license to practice
31 osteopathic medicine to complete a course of instruction within 2
32 years after initial licensure that provides at least 2 hours of
33 instruction on evidence-based suicide prevention and awareness as
34 described in subsection 8.

35 5. The Board shall encourage each holder of a license to
36 practice osteopathic medicine to receive, as a portion of his or her
37 continuing education, training concerning methods for educating
38 patients about how to effectively manage medications, including,
39 without limitation, the ability of the patient to request to have the
40 symptom or purpose for which a drug is prescribed included on the
41 label attached to the container of the drug.

42 6. The Board shall encourage each holder of a license to
43 practice osteopathic medicine or as a physician assistant to receive,
44 as a portion of his or her continuing education, training and



1 education in the diagnosis of rare diseases, including, without
2 limitation:

- 3 (a) Recognizing the symptoms of pediatric cancer; and
4 (b) Interpreting family history to determine whether such
5 symptoms indicate a normal childhood illness or a condition that
6 requires additional examination.

7 7. The Board shall require, as part of the continuing education
8 requirements approved by the Board, the biennial completion by a
9 holder of a license to practice osteopathic medicine of at least 2
10 hours of continuing education credits in ethics, pain management or
11 care of persons with addictive disorders.

12 8. The Board shall require each holder of a license to practice
13 osteopathic medicine to receive as a portion of his or her continuing
14 education at least 2 hours of instruction every 4 years on evidence-
15 based suicide prevention and awareness which may include, without
16 limitation, instruction concerning:

17 (a) The skills and knowledge that the licensee needs to detect
18 behaviors that may lead to suicide, including, without limitation,
19 post-traumatic stress disorder;

20 (b) Approaches to engaging other professionals in suicide
21 intervention; and

22 (c) The detection of suicidal thoughts and ideations and the
23 prevention of suicide.

24 9. A holder of a license to practice osteopathic medicine may
25 not substitute the continuing education credits relating to suicide
26 prevention and awareness required by this section for the purposes
27 of satisfying an equivalent requirement for continuing education in
28 ethics.

29 10. Members of the Armed Forces of the United States and the
30 United States Public Health Service are exempt from payment of the
31 annual license renewal fee during their active duty status.

32 *11. The Board shall not require a physician assistant to*
33 *receive or maintain certification by the National Commission on*
34 *Certification of Physician Assistants, or its successor organization,*
35 *or by any other nationally recognized organization for the*
36 *accreditation of physician assistants to satisfy any continuing*
37 *education requirement pursuant to paragraph (d) of subsection 1*
38 *and subsection 3.*

39 **Sec. 43.** NRS 633.491 is hereby amended to read as follows:

40 633.491 1. A licensee who retires from practice is not
41 required annually to renew his or her license after filing with the
42 Board an affidavit stating the date on which he or she retired from
43 practice and any other evidence that the Board may require to verify
44 the retirement.



1 2. An osteopathic physician or physician assistant who retires
2 from practice and who desires to return to practice may apply to
3 renew his or her license by paying all back annual license renewal
4 fees *or annual registration fees* from the date of retirement and
5 submitting verified evidence satisfactory to the Board that the
6 licensee has attended continuing education courses or programs
7 approved by the Board which total:

8 (a) Twenty-five hours if the licensee has been retired 1 year or
9 less.

10 (b) Fifty hours within 12 months of the date of the application if
11 the licensee has been retired for more than 1 year.

12 3. A licensee who wishes to have a license placed on inactive
13 status must provide the Board with an affidavit stating the date on
14 which the licensee will cease the practice of osteopathic medicine or
15 cease to practice as a physician assistant in Nevada and any other
16 evidence that the Board may require. The Board shall place the
17 license of the licensee on inactive status upon receipt of:

18 (a) The affidavit required pursuant to this subsection; and

19 (b) Payment of the inactive license fee prescribed by
20 NRS 633.501.

21 4. An osteopathic physician or physician assistant whose
22 license has been placed on inactive status:

23 (a) Is not required to annually renew the license.

24 (b) ~~Shall~~ *Except as otherwise provided in subsection 6, shall*
25 annually pay the inactive license fee prescribed by NRS 633.501.

26 (c) Shall not practice osteopathic medicine or practice as a
27 physician assistant in this State.

28 5. *A physician assistant whose license has been placed on*
29 *inactive status shall not practice as a physician assistant. The*
30 *Board shall consider a physician assistant whose license has been*
31 *placed on inactive status and who practices as a physician*
32 *assistant to be practicing without a license. Such practice*
33 *constitutes grounds for disciplinary action against the physician*
34 *assistant in accordance with the regulations adopted by the Board*
35 *pursuant to NRS 633.434.*

36 6. *The Board shall exempt a physician assistant whose*
37 *license has been placed on inactive status from paying the inactive*
38 *license fee prescribed by NRS 633.501.*

39 7. An osteopathic physician or physician assistant whose
40 license is on inactive status and who wishes to renew his or her
41 license to practice osteopathic medicine or license to practice as a
42 physician assistant must:

43 (a) Provide to the Board verified evidence satisfactory to the
44 Board of completion of the total number of hours of continuing
45 medical education required for:



1 (1) The year preceding the date of the application for renewal
2 of the license; and

3 (2) Each year after the date the license was placed on
4 inactive status.

5 (b) Provide to the Board an affidavit stating that the applicant
6 has not withheld from the Board any information which would
7 constitute grounds for disciplinary action pursuant to this chapter.

8 (c) Comply with all other requirements for renewal.

9 **Sec. 44.** NRS 633.501 is hereby amended to read as follows:

10 633.501 1. Except as otherwise provided in subsection 2, the
11 Board shall charge and collect fees not to exceed the following
12 amounts:

13 (a) Application and initial license fee for an osteopathic
14 physician \$800

15 (b) Annual license renewal fee for an osteopathic
16 physician 500

17 (c) Temporary license fee 500

18 (d) Special or authorized facility license fee 200

19 (e) Special event license fee 200

20 (f) Special or authorized facility license renewal fee 200

21 (g) Reexamination fee 200

22 (h) Late payment fee 300

23 (i) Application and initial license fee for a physician
24 assistant 400

25 (j) ~~Annual license renewal~~ *Application and initial*
26 *simultaneous license fee for a physician assistant* 200

27 (k) *Annual registration* fee for a physician assistant 400

28 ~~(k)~~ (l) *Annual simultaneous registration fee for a*
29 *physician assistant* 200

30 (m) Inactive license fee 200

31 2. The Board may prorate the initial license fee for a new
32 license issued pursuant to paragraph (a) or (i) of subsection 1 which
33 expires less than 6 months after the date of issuance.

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

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

43 (a) NRS 633.399 or 633.400 and is an active member of, or the
44 spouse of an active member of, the Armed Forces of the United
45 States, a veteran or the surviving spouse of a veteran, the Board



1 shall collect not more than one-half of the fee set forth in subsection
2 1 for the initial issuance of the license. As used in this paragraph,
3 “veteran” has the meaning ascribed to it in NRS 417.005.

4 (b) NRS 633.4336, the Board shall collect not more than one-
5 half of the fee set forth in subsection 1 for the initial issuance of the
6 license.

7 **Sec. 45.** NRS 633.741 is hereby amended to read as follows:
8 633.741 1. It is unlawful for any person to:

9 (a) Except as otherwise provided in NRS 629.091, practice:

10 (1) Osteopathic medicine without a valid license to practice
11 osteopathic medicine under this chapter;

12 (2) As a physician assistant without a valid license under this
13 chapter; or

14 (3) Beyond the limitations ordered upon his or her practice
15 by the Board or the court;

16 (b) Present as his or her own the diploma, license or credentials
17 of another;

18 (c) Give either false or forged evidence of any kind to the Board
19 or any of its members in connection with an application for a
20 license;

21 (d) File for record the license issued to another, falsely claiming
22 himself or herself to be the person named in the license, or falsely
23 claiming himself or herself to be the person entitled to the license;

24 (e) Practice osteopathic medicine or practice as a physician
25 assistant under a false or assumed name or falsely personate another
26 licensee of a like or different name;

27 (f) Hold himself or herself out as a physician assistant or use any
28 other term indicating or implying that he or she is a physician
29 assistant, unless the person has been licensed by the Board as
30 provided in this chapter; or

31 (g) Supervise a person as a physician assistant before such
32 person is licensed as provided in this chapter.

33 2. *A person who meets the qualifications for licensure to*
34 *practice as a physician assistant pursuant to this chapter and*
35 *holds a certification from the National Commission on*
36 *Certification of Physician Assistants, or its successor organization,*
37 *but does not possess a current license pursuant to this chapter may*
38 *use the title “inactive physician assistant” and shall not act or*
39 *practice as a physician assistant.*

40 3. A person who violates any provision of subsection 1 ~~H~~ or 2:

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

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



1 ↪ and shall be punished as provided in NRS 193.130, unless a
2 greater penalty is provided pursuant to NRS 200.830 or 200.840.

3 ~~§~~ 4. In addition to any other penalty prescribed by law, if the
4 Board determines that a person has committed any act described in
5 subsection 1 ~~§~~ or prohibited by subsection 2, the Board may:

6 (a) Issue and serve on the person an order to cease and desist
7 until the person obtains from the Board the proper license or
8 otherwise demonstrates that he or she is no longer in violation of
9 subsection 1 ~~§~~ or 2. An order to cease and desist must include a
10 telephone number with which the person may contact the Board.

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

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

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

23 **Sec. 46.** 1. The Board of Medical Examiners shall, on or
24 before January 31, 2022, adopt the regulations required pursuant to
25 subsection 1 of section 5 of this act.

26 2. The State Board of Osteopathic Medicine shall, on or before
27 January 31, 2022, adopt the regulations required pursuant to
28 subsection 1 of NRS 633.469, as amended by section 41 of this act.

29 **Sec. 47.** 1. This section becomes effective upon passage and
30 approval.

31 2. Sections 1 to 46, inclusive, of this act become effective:

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

35 (b) January 1, 2022, for all other purposes.

