

SENATE BILL NO. 188—SENATOR DOÑATE

PREFILED FEBRUARY 3, 2025

Referred to Committee on Health and Human Services

SUMMARY—Establishes procedures to assist certain persons with limited English proficiency in accessing health care in certain circumstances. (BDR 40-41)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact. Effect on the State: Yes.

CONTAINS UNFUNDED MANDATE (§§ 2-8, 15-20) (NOT REQUESTED BY AFFECTED LOCAL GOVERNMENT)

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

AN ACT relating to health care; requiring certain health facilities and providers of health care to take reasonable steps to provide a person with limited English proficiency with language assistance under certain circumstances; prescribing requirements governing the use of interpreters and translators to comply with that requirement; authorizing the discipline of certain health facilities and providers of health care for certain violations; and providing other matters properly relating thereto.

**Legislative Counsel’s Digest:**

1 Existing federal regulations require certain health care entities to take  
2 reasonable steps to provide meaningful access to persons with limited English  
3 proficiency who are eligible to be served or likely to be directly affected by a health  
4 program or activity of the entity. (45 C.F.R. § 92.201(a)) The Director of the Office  
5 for Civil Rights of the United States Department of Health and Human Services has  
6 provided additional guidance by defining meaningful access to mean ensuring that  
7 language barriers do not prevent a person from obtaining necessary health services  
8 and care. (Melanie Fontes Rainer, Director, Office for Civil Rights U.S. Dep’t. of  
9 Health and Human Services (Dec. 5, 2024), Dear Colleague Letter Regarding  
10 Language Access Provisions of the Final Rule Implementing Section 1557 of the  
11 Affordable Care Act, retrieved from [http://www.hhs.gov/sites/default/files/ocr-dcl-  
12 section-1557-language-access.pdf](http://www.hhs.gov/sites/default/files/ocr-dcl-section-1557-language-access.pdf)) Existing federal regulations prescribe various  
13 requirements and procedures governing the use of interpreters and translators to  
14 comply with those requirements. (45 C.F.R. § 92.201)



15       **Sections 5-8 and 16-20** of this bill codify similar provisions into state law,  
16 thereby requiring health facilities and providers of health care to take reasonable  
17 steps to ensure that language barriers do not prevent a person with limited English  
18 proficiency from obtaining necessary access to health care. **Sections 5, 16 and 20**  
19 prescribe certain factors for determining whether an action is necessary for a health  
20 facility or provider of health care to be in compliance with that requirement.  
21 **Sections 5 and 16** require that a service to provide language assistance be available  
22 free of charge, be accurate in translation or interpretation be provided in a timely  
23 manner and protect the ability of the person with limited English proficiency to  
24 make independent decisions. **Sections 5 and 16** require that a qualified translator  
25 review a machine-translated document under certain circumstances.

26       **Sections 5 and 16** require a health facility or provider of health care to use a  
27 qualified interpreter or translator to provide interpreting or translating services, and  
28 **sections 8 and 19** establish the qualifications to serve as an interpreter or translator.  
29 **Sections 6 and 17** prohibit the use of an unqualified interpreter, except in certain  
30 circumstances. **Sections 6 and 17** also prohibit a health facility or provider of  
31 health care from requiring a person with limited English proficiency to provide his  
32 or her own interpreter or pay the cost of an interpreter. **Sections 7 and 18** prescribe  
33 requirements governing the use of a remote interpreter. **Sections 3, 4 and 15** of this  
34 bill define certain terms, and **section 2** of this bill establishes the applicability of the  
35 definitions set forth in **sections 3 and 4**. **Sections 9 and 10** of this bill make  
36 conforming changes to establish the applicability of certain provisions. **Sections**  
37 **11-13, 20 and 21** of this bill prescribe various mechanisms for the enforcement of  
38 **sections 5-8 and 16-19**, including the imposition of administrative sanctions  
39 against a health facility that fails to comply with those provisions and professional  
40 discipline against a provider of health care who fails to comply with those  
41 provisions.

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

1       **Section 1.** Chapter 449 of NRS is hereby amended by adding  
2 thereto the provisions set forth as sections 2 to 8, inclusive, of this  
3 act.

4       **Sec. 2.** *As used in sections 2 to 8, inclusive, of this act, unless*  
5 *the context otherwise requires, the words and terms defined in*  
6 *sections 3 and 4 of this act have the definitions ascribed to them in*  
7 *those sections.*

8       **Sec. 3.** *“Health facility” means a medical facility, a facility*  
9 *for the dependent or a facility which is required by the regulations*  
10 *adopted by the Board pursuant to NRS 449.0303 to be licensed.*

11       **Sec. 4.** *“Person with limited English proficiency” means a*  
12 *person who speaks a language other than English and who cannot*  
13 *readily understand or communicate in the English language.*

14       **Sec. 5. 1.** *A health facility shall take reasonable steps to*  
15 *ensure that language barriers do not prevent a person with limited*  
16 *English proficiency from obtaining necessary health care.*

17       **2.** *In determining whether a particular action is necessary to*  
18 *comply with subsection 1, a health facility shall, and in*



1 *determining whether a health facility is in compliance with*  
2 *subsection 1, the Division shall:*

3 (a) *Evaluate, and give substantial weight to, the nature and*  
4 *importance of the services or programs provided by the health*  
5 *facility and the relevant communications to the person with*  
6 *limited English proficiency; and*

7 (b) *Consider any other relevant factors, including, without*  
8 *limitation, the effectiveness of any procedure for providing*  
9 *language access through written documents.*

10 3. *A service to provide language assistance to ensure*  
11 *compliance with subsection 1 must:*

12 (a) *Be provided free of charge to the person with limited*  
13 *English proficiency;*

14 (b) *Be accurate in translation or interpretation and provided*  
15 *within a timely manner; and*

16 (c) *Protect the privacy and ability of the person with limited*  
17 *English proficiency to make independent decisions.*

18 4. *Except as otherwise provided in section 6 of this act, if a*  
19 *health facility determines pursuant to subsection 2 that*  
20 *interpretation services or translation services are necessary to*  
21 *ensure compliance with subsection 1, the health facility shall*  
22 *utilize an interpreter or translator who is qualified pursuant to*  
23 *section 8 of this act to provide those services.*

24 5. *A health facility shall ensure that a translator who is*  
25 *qualified pursuant to section 8 of this act reviews a machine-*  
26 *translated document if the document:*

27 (a) *Relates to the rights of a person with limited English*  
28 *proficiency, the goods or services provided by the health facility or*  
29 *the ability of a person with limited English proficiency to obtain*  
30 *necessary health care;*

31 (b) *Must be accurately translated to ensure compliance with*  
32 *subsection 1 or protect the health and wellbeing of a person with*  
33 *limited English proficiency; or*

34 (c) *Is complex, nonliteral or technical.*

35 **Sec. 6. 1.** *A health facility shall not:*

36 (a) *Require a person with limited English proficiency to*  
37 *provide his or her own interpreter or pay the cost of an interpreter;*

38 (b) *Utilize an adult who is not qualified as an interpreter*  
39 *pursuant to section 8 of this act to interpret or facilitate*  
40 *communication for a person with limited English proficiency*  
41 *except where authorized pursuant to subsection 2 or 3;*

42 (c) *Utilize a child less than 18 years of age to interpret or*  
43 *facilitate communication for a person with limited English*  
44 *proficiency except where authorized pursuant to subsection 2; or*



1 (d) Utilize an employee, a contractor or a volunteer of the  
2 health facility who is not an interpreter or a translator qualified  
3 pursuant to section 8 of this act to interpret or facilitate  
4 communication for a person with limited English proficiency.

5 2. A health facility may utilize an adult who is not qualified  
6 as an interpreter pursuant to section 8 of this act or a person  
7 under 18 years of age to interpret or facilitate communication for  
8 a person with limited English proficiency on a temporary,  
9 emergency basis if:

10 (a) There is an imminent threat to the safety or welfare of any  
11 person or the public;

12 (b) An interpreter who is qualified pursuant to section 8 of this  
13 act is not immediately available;

14 (c) The health facility is attempting to find an interpreter who  
15 is qualified pursuant to section 8 of this act; and

16 (d) An interpreter who is qualified pursuant to section 8 of this  
17 act later confirms or supplements the initial communications with  
18 the interpreter utilized pursuant to this section.

19 3. A health facility may utilize an adult who is not qualified  
20 as an interpreter pursuant to section 8 of this act to interpret or  
21 facilitate communication for a person with limited English  
22 proficiency if the person with limited English proficiency requests  
23 for the adult to interpret or facilitate communication for him or  
24 her. Such a request must be:

25 (a) Made to an interpreter who is qualified pursuant to section  
26 8 of this act without the adult present;

27 (b) Agreed to by the adult;

28 (c) Documented in the record of the person with limited  
29 English proficiency; and

30 (d) Deemed appropriate under the circumstances by the person  
31 providing the program or service on behalf of the health facility.

32 **Sec. 7. 1.** A health facility may use a remote interpreter to  
33 provide interpreting services necessary to comply with section 5 of  
34 this act if the health facility utilizes audio-visual communication  
35 technology or audio communication technology that includes,  
36 without limitation, synchronous interaction with audio and, if  
37 applicable, video over a high-speed, wide-bandwidth connection or  
38 wireless connection that:

39 (a) Does not produce lag or irregular pauses in  
40 communication or, if applicable, images;

41 (b) Provides transmission of voice that is clear and audible;  
42 and

43 (c) If applicable, produces a high-quality video image that is  
44 not blurry or grainy and is large enough to display the face of the



1 *interpreter and person with limited English proficiency, regardless*  
2 *of body position.*

3 2. *A health facility shall provide training to an employee, a*  
4 *contractor or a volunteer who is involved in using audio-visual*  
5 *communication technology or audio communication technology to*  
6 *facilitate the use of a remote interpreter. Such training must be*  
7 *adequate to ensure that the employee, contractor or volunteer*  
8 *operates the technology efficiently and effectively.*

9 **Sec. 8.** *An interpreter or translator is qualified to provide*  
10 *interpretation or translation services pursuant to sections 2 to 8,*  
11 *inclusive, of this act if the interpreter or translator:*

12 1. *Has demonstrated proficiency in and understanding of*  
13 *spoken or written, as applicable:*

14 (a) *English and at least one other language; or*

15 (b) *At least two languages that are not English if he or she is a*  
16 *relay interpreter or translator;*

17 2. *Has demonstrated proficiency in interpreting or*  
18 *translating, as applicable, effectively, accurately and impartially,*  
19 *including, without limitation:*

20 (a) *Using specialized vocabulary or terms without change,*  
21 *omission or addition; and*

22 (b) *Preserving tone, sentiment and emotion of the original*  
23 *statement; and*

24 3. *Adheres to generally accepted ethics for interpreters or*  
25 *translators, as applicable, including, without limitation,*  
26 *confidentiality of client communications.*

27 **Sec. 9.** NRS 449.029 is hereby amended to read as follows:

28 449.029 As used in NRS 449.029 to 449.240, inclusive, *and*  
29 *sections 2 to 8, inclusive, of this act*, unless the context otherwise  
30 requires, "medical facility" has the meaning ascribed to it in NRS  
31 449.0151 and includes a program of hospice care described in  
32 NRS 449.196.

33 **Sec. 10.** NRS 449.0301 is hereby amended to read as follows:

34 449.0301 The provisions of NRS 449.029 to 449.2428,  
35 inclusive, *and sections 2 to 8, inclusive, of this act* do not apply to:

36 1. Any facility conducted by and for the adherents of any  
37 church or religious denomination for the purpose of providing  
38 facilities for the care and treatment of the sick who depend solely  
39 upon spiritual means through prayer for healing in the practice of  
40 the religion of the church or denomination, except that such a  
41 facility shall comply with all regulations relative to sanitation and  
42 safety applicable to other facilities of a similar category.

43 2. Foster homes as defined in NRS 424.014.

44 3. Any medical facility, facility for the dependent or facility  
45 which is otherwise required by the regulations adopted by the Board



1 pursuant to NRS 449.0303 to be licensed that is operated and  
2 maintained by the United States Government or an agency thereof.

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

4 449.160 1. The Division may deny an application for a  
5 license or may suspend or revoke any license issued under the  
6 provisions of NRS 449.029 to 449.2428, inclusive, *and sections 2 to*  
7 *8, inclusive, of this act* upon any of the following grounds:

8 (a) Violation by the applicant or the licensee of any of the  
9 provisions of NRS 439B.410, 449.029 to 449.245, inclusive, *and*  
10 *sections 2 to 8, inclusive, of this act*, or 449A.100 to 449A.124,  
11 inclusive, and 449A.270 to 449A.286, inclusive, or of any other law  
12 of this State or of the standards, rules and regulations adopted  
13 thereunder.

14 (b) Aiding, abetting or permitting the commission of any illegal  
15 act.

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

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

21 (e) Failure of the applicant to obtain written approval from the  
22 Director of the Department of Health and Human Services as  
23 required by NRS 439A.100 or 439A.102 or as provided in any  
24 regulation adopted pursuant to NRS 449.001 to 449.430, inclusive,  
25 *and sections 2 to 8, inclusive, of this act* and 449.435 to 449.531,  
26 inclusive, and chapter 449A of NRS if such approval is required,  
27 including, without limitation, the closure or conversion of any  
28 hospital in a county whose population is 100,000 or more that is  
29 owned by the licensee without approval pursuant to NRS 439A.102.

30 (f) Failure to comply with the provisions of NRS 441A.315 and  
31 any regulations adopted pursuant thereto or NRS 449.2486.

32 (g) Violation of the provisions of NRS 458.112.

33 (h) Failure to comply with the provisions of NRS 449A.170 to  
34 449A.192, inclusive, and any regulation adopted pursuant thereto.

35 (i) Violation of the provisions of NRS 629.260.

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

40 (a) Is convicted of violating any of the provisions of  
41 NRS 202.470;

42 (b) Is ordered to but fails to abate a nuisance pursuant to NRS  
43 244.360, 244.3603 or 268.4124; or



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

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

9 (a) A summary of a complaint against the facility if the  
10 investigation of the complaint by the Division either substantiates  
11 the complaint or is inconclusive;

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

14 (c) A report of any disciplinary action taken against the facility.  
15 ➔ The facility shall make the information available to the public  
16 pursuant to NRS 449.2486.

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

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

22 (b) Any disciplinary actions taken by the Division pursuant to  
23 subsection 2.

24 **Sec. 12.** NRS 449.163 is hereby amended to read as follows:

25 449.163 1. In addition to the payment of the amount required  
26 by NRS 449.0308, if a medical facility, facility for the dependent or  
27 facility which is required by the regulations adopted by the Board  
28 pursuant to NRS 449.0303 to be licensed violates any provision  
29 related to its licensure, including any provision of NRS 439B.410 or  
30 449.029 to 449.2428, inclusive, *and sections 2 to 8, inclusive, of*  
31 *this act* or any condition, standard or regulation adopted by the  
32 Board, the Division, in accordance with the regulations adopted  
33 pursuant to NRS 449.165, may:

34 (a) Prohibit the facility from admitting any patient until it  
35 determines that the facility has corrected the violation;

36 (b) Limit the occupancy of the facility to the number of beds  
37 occupied when the violation occurred, until it determines that the  
38 facility has corrected the violation;

39 (c) If the license of the facility limits the occupancy of the  
40 facility and the facility has exceeded the approved occupancy,  
41 require the facility, at its own expense, to move patients to another  
42 facility that is licensed;

43 (d) Except where a greater penalty is authorized by subsection 2,  
44 impose an administrative penalty of not more than \$5,000 per day



1 for each violation, together with interest thereon at a rate not to  
2 exceed 10 percent per annum; and

3 (e) Appoint temporary management to oversee the operation of  
4 the facility and to ensure the health and safety of the patients of the  
5 facility, until:

6 (1) It determines that the facility has corrected the violation  
7 and has management which is capable of ensuring continued  
8 compliance with the applicable statutes, conditions, standards and  
9 regulations; or

10 (2) Improvements are made to correct the violation.

11 2. If an off-campus location of a hospital fails to obtain a  
12 national provider identifier that is distinct from the national provider  
13 identifier used by the main campus and any other off-campus  
14 location of the hospital in violation of NRS 449.1818, the Division  
15 may impose against the hospital an administrative penalty of not  
16 more than \$10,000 for each day of such failure, together with  
17 interest thereon at a rate not to exceed 10 percent per annum, in  
18 addition to any other action authorized by this chapter.

19 3. If the facility fails to pay any administrative penalty imposed  
20 pursuant to paragraph (d) of subsection 1 or subsection 2, the  
21 Division may:

22 (a) Suspend the license of the facility until the administrative  
23 penalty is paid; and

24 (b) Collect court costs, reasonable attorney's fees and other  
25 costs incurred to collect the administrative penalty.

26 4. The Division may require any facility that violates any  
27 provision of NRS 439B.410 or 449.029 to 449.2428, inclusive, *and*  
28 *sections 2 to 8, inclusive, of this act* or any condition, standard or  
29 regulation adopted by the Board to make any improvements  
30 necessary to correct the violation.

31 5. Any money collected as administrative penalties pursuant to  
32 paragraph (d) of subsection 1 or subsection 2 must be accounted for  
33 separately and used to administer and carry out the provisions of  
34 NRS 449.001 to 449.430, inclusive, *and sections 2 to 8, inclusive,*  
35 *of this act*, 449.435 to 449.531, inclusive, and chapter 449A of NRS  
36 to protect the health, safety, well-being and property of the patients  
37 and residents of facilities in accordance with applicable state and  
38 federal standards or for any other purpose authorized by the  
39 Legislature.

40 **Sec. 13.** NRS 449.240 is hereby amended to read as follows:

41 449.240 The district attorney of the county in which the facility  
42 is located shall, upon application by the Division, institute and  
43 conduct the prosecution of any action for violation of any provisions  
44 of NRS 449.029 to 449.245, inclusive **H**, *and sections 2 to 8,*  
45 *inclusive, of this act.*





1     **Sec. 14.** Chapter 629 of NRS is hereby amended by adding  
2 thereto the provisions set forth as sections 15 to 20, inclusive, of this  
3 act.

4     **Sec. 15.** *As used in sections 15 to 20, inclusive, of this act,*  
5 *unless the context otherwise requires, "person with limited*  
6 *English proficiency" has the meaning ascribed to it in section 4 of*  
7 *this act.*

8     **Sec. 16. 1.** *A provider of health care shall take reasonable*  
9 *steps to ensure that language barriers do not prevent a person with*  
10 *limited English proficiency from obtaining necessary health care.*

11     **2.** *In determining whether a particular action is necessary to*  
12 *comply with subsection 1, a provider of health care shall:*

13     **(a)** *Evaluate, and give substantial weight to, the nature and*  
14 *importance of the services or programs provided by the provider of*  
15 *health care and the relevant communications to the person with*  
16 *limited English proficiency; and*

17     **(b)** *Consider any other relevant factors, including, without*  
18 *limitation, the effectiveness of any procedure for providing*  
19 *language access through written documents.*

20     **3.** *A service to provide language assistance to ensure*  
21 *compliance with subsection 1 must:*

22     **(a)** *Be provided free of charge to the person with limited*  
23 *English proficiency;*

24     **(b)** *Be accurate in translation or interpretation and provided*  
25 *within a timely manner; and*

26     **(c)** *Protect the privacy and ability of the person with limited*  
27 *English proficiency to make independent decisions.*

28     **4.** *Except as otherwise provided in section 17 of this act, a*  
29 *provider of health care determines pursuant to subsection 2 that*  
30 *interpretation services or translation services are necessary to*  
31 *ensure compliance with subsection 1, the provider of health care*  
32 *shall use an interpreter or translator who is qualified pursuant to*  
33 *section 19 of this act.*

34     **5.** *A provider of health care shall ensure that a machine-*  
35 *translated document is reviewed by a translator who is qualified*  
36 *pursuant to section 19 of this act if the document:*

37     **(a)** *Relates to the rights of a person with limited English*  
38 *proficiency, the goods or services provided by the provider of*  
39 *health care or the ability of a person with limited English*  
40 *proficiency to obtain necessary health care;*

41     **(b)** *Must be accurately translated to ensure compliance with*  
42 *subsection 1 or protect the health and wellbeing of a person with*  
43 *limited English proficiency; or*

44     **(c)** *Is complex, nonliteral or technical.*

45     **Sec. 17. 1.** *A provider of health care shall not:*



1 (a) Require a person with limited English proficiency to  
2 provide his or her own interpreter or pay the cost of an interpreter;

3 (b) Utilize an adult who is not qualified as an interpreter  
4 pursuant to section 19 of this act to interpret or facilitate  
5 communication for a person with limited English proficiency  
6 except where authorized pursuant to subsection 2 or 3;

7 (c) Utilize a child less than 18 years of age to interpret or  
8 facilitate communication for a person with limited English  
9 proficiency except where authorized pursuant to subsection 2; or

10 (d) Utilize a person under the supervision of the provider of  
11 health care who is not an interpreter or a translator qualified  
12 pursuant to section 19 of this act to interpret or facilitate  
13 communication for a person with limited English proficiency.

14 2. A provider of health care may utilize an adult who is not  
15 qualified as an interpreter pursuant to section 19 of this act or a  
16 person under 18 years of age to interpret or facilitate  
17 communication for a person with limited English proficiency on a  
18 temporary, emergency basis if:

19 (a) There is an imminent threat to the safety or welfare of any  
20 person or the public;

21 (b) An interpreter who is qualified pursuant to section 19 of  
22 this act is not immediately available;

23 (c) The provider of health care is attempting to find an  
24 interpreter who is qualified pursuant to section 19 of this act; and

25 (d) An interpreter who is qualified pursuant to section 19 of  
26 this act later confirms or supplements the initial communications  
27 with the interpreter utilized pursuant to this section.

28 3. A provider of health care may utilize an adult who is not  
29 qualified as an interpreter pursuant to section 19 of this act to  
30 interpret or facilitate communication for a person with limited  
31 English proficiency if the person with limited English proficiency  
32 requests for the adult to interpret or facilitate communication for  
33 him or her. Such a request must be:

34 (a) Made to an interpreter who is qualified pursuant to section  
35 19 of this act without the adult present;

36 (b) Agreed to by the adult;

37 (c) Documented in the record of the person with limited  
38 English proficiency; and

39 (d) Deemed appropriate under the circumstances by the  
40 provider of health care.

41 **Sec. 18.** 1. A provider of health care may use a remote  
42 interpreter to provide interpreting services necessary to comply  
43 with section 16 of this act if the provider of health care utilizes  
44 audio-visual communication technology or audio communication  
45 technology that includes, without limitation, synchronous



1 *interaction with audio and, if applicable, video over a high-speed,*  
2 *wide-bandwidth connection or wireless connection that:*

3 (a) *Does not produce lag or irregular pauses in*  
4 *communication or, if applicable, images;*

5 (b) *Provides transmission of voice that is clear and audible;*  
6 *and*

7 (c) *If applicable, produces a high-quality video image that is*  
8 *not blurry or grainy and is large enough to display the face of the*  
9 *interpreter and person with limited English proficiency, regardless*  
10 *of body position.*

11 2. *A provider of health care shall provide training to a person*  
12 *he or she supervises who is involved in using audio-visual*  
13 *communication technology or audio communication technology to*  
14 *facilitate the use of a remote interpreter. Such training must be*  
15 *adequate to ensure that the person operates the technology*  
16 *efficiently and effectively.*

17 **Sec. 19.** *An interpreter or translator is qualified to provide*  
18 *interpretation or translation services pursuant to sections 15 to 20,*  
19 *inclusive, of this act if the interpreter or translator:*

20 1. *Has demonstrated proficiency in and understanding of*  
21 *spoken or written, as applicable:*

22 (a) *English and at least one other language; or*

23 (b) *At least two languages that are not English if he or she is a*  
24 *relay interpreter or translator;*

25 2. *Has demonstrated proficiency in interpreting or*  
26 *translating, as applicable, effectively, accurately and impartially,*  
27 *including, without limitation:*

28 (a) *Using specialized vocabulary or terms without change,*  
29 *omission or addition; and*

30 (b) *Preserving tone, sentiment and emotion of the original*  
31 *statement; and*

32 3. *Adheres to generally accepted ethics for interpreters or*  
33 *translators, as applicable, including, without limitation,*  
34 *confidentiality of client communications.*

35 **Sec. 20.** 1. *A provider of health care who violates any*  
36 *provision of sections 15 to 20, inclusive, of this act is guilty of*  
37 *unprofessional conduct and is subject to disciplinary action by the*  
38 *board, agency or other entity in this State by which he or she is*  
39 *licensed, certified or regulated.*

40 2. *The board, agency or other entity in this State by which a*  
41 *provider of health care is licensed, certified or regulated shall*  
42 *determine if the provider of health care is in compliance with*  
43 *sections 15 to 20, inclusive, of this act using the factors listed in*  
44 *subsection 2 of section 16 of this act.*



1       **Sec. 21.** NRS 654.190 is hereby amended to read as follows:  
2       654.190 1. The Board may, after notice and an opportunity  
3 for a hearing as required by law, impose an administrative fine of  
4 not more than \$10,000 for each violation on, recover reasonable  
5 investigative fees and costs incurred from, suspend, revoke, deny  
6 the issuance or renewal of or place conditions on the license of, and  
7 place on probation or impose any combination of the foregoing on  
8 any licensee who:

9       (a) Is convicted of a felony relating to the practice of  
10 administering a facility for skilled nursing or facility for  
11 intermediate care or residential facility for groups or of any offense  
12 involving moral turpitude.

13       (b) Has obtained his or her license by the use of fraud or deceit.

14       (c) Violates any of the provisions of this chapter.

15       (d) Aids or abets any person in the violation of any of the  
16 provisions of NRS 449.029 to 449.2428, inclusive, *and sections 2 to*  
17 *8, inclusive, of this act* or 449A.100 to 449A.124, inclusive, and  
18 449A.270 to 449A.286, inclusive, as those provisions pertain to a  
19 facility for skilled nursing, facility for intermediate care or  
20 residential facility for groups.

21       (e) Violates any regulation of the Board prescribing additional  
22 standards of conduct for licensees, including, without limitation, a  
23 code of ethics.

24       (f) Engages in conduct that violates the trust of a patient or  
25 resident or exploits the relationship between the licensee and the  
26 patient or resident for the financial or other gain of the licensee.

27       2. If a licensee requests a hearing pursuant to subsection 1, the  
28 Board shall give the licensee written notice of a hearing pursuant to  
29 NRS 233B.121 and 241.0333. A licensee may waive, in writing, his  
30 or her right to attend the hearing.

31       3. The Board may compel the attendance of witnesses or the  
32 production of documents or objects by subpoena. The Board may  
33 adopt regulations that set forth a procedure pursuant to which the  
34 Chair of the Board may issue subpoenas on behalf of the Board.  
35 Any person who is subpoenaed pursuant to this subsection may  
36 request the Board to modify the terms of the subpoena or grant  
37 additional time for compliance.

38       4. An order that imposes discipline and the findings of fact and  
39 conclusions of law supporting that order are public records.

40       5. The expiration of a license by operation of law or by order  
41 or decision of the Board or a court, or the voluntary surrender of a  
42 license, does not deprive the Board of jurisdiction to proceed with  
43 any investigation of, or action or disciplinary proceeding against, the  
44 licensee or to render a decision suspending or revoking the license.



1     **Sec. 22.** The provisions of NRS 354.599 do not apply to any  
2 additional expenses of a local government that are related to the  
3 provisions of this act.

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