## PROPOSED REGULATION OF THE

## **BOARD OF MEDICAL EXAMINERS**

## LCB File No. R151-13

January 22, 2014

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

AUTHORITY: §§1, 2, 5 and 6, NRS 630.130; §§3 and 4, NRS 630.130 and 630.275.

A REGULATION relating to physicians; revising provisions relating to the supervision of a physician assistant by a physician and the collaboration between a physician and an advanced practice registered nurse; providing that a physician may supervise a physician assistant and collaborate with an advanced practice registered nurse through the use of certain telemedicine technologies; and providing other matters properly relating thereto.

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

"Telemedicine technology" means electronic, telephonic, fiber optic or similar equipment that provides for:

- 1. Communication between a physician and another person;
- 2. The transfer of information concerning the medical condition of a patient; and
- 3. Compliance with all applicable state and federal privacy laws related to such communication and transfer.
  - **Sec. 2.** NAC 630.010 is hereby amended to read as follows:

630.010 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS [630.005] 630.007 to 630.026, inclusive, and NAC 630.025 and section 1 of this regulation have the meanings ascribed to them in those sections.

- **Sec. 3.** NAC 630.360 is hereby amended to read as follows:
- 630.360 1. The medical services which a physician assistant is authorized to perform must be:
- (a) Commensurate with the education, training, experience and level of competence of the physician assistant; and
  - (b) Within the scope of the practice of the supervising physician of the physician assistant.
- 2. The physician assistant shall wear at all times while on duty a placard, plate or insigne which identifies him or her as a physician assistant.
- 3. No physician assistant may represent himself or herself in any manner which would tend to mislead the general public or the patients of the supervising physician.
- 4. A physician assistant who has more than one supervising physician shall, at every patient encounter, denote in the medical records of the patient the name of the supervising physician associated with that patient encounter.
- 5. Except as otherwise provided in subsection 3 of NAC 630.340, a physician assistant shall notify the Board in writing within 72 hours after any change in the supervision of the physician assistant by a supervising physician.
  - **Sec. 4.** NAC 630.370 is hereby amended to read as follows:
- 630.370 1. Except as otherwise provided in NAC 630.375, the supervising physician is responsible for all the medical activities of his or her physician assistant and shall ensure that:
  - (a) The physician assistant is clearly identified to the patients as a physician assistant;
- (b) The physician assistant performs only those medical services which have been approved by his or her supervising physician;

- (c) The physician assistant does not represent himself or herself in any manner which would tend to mislead the general public, the patients of the supervising physician or any other health professional; and
  - (d) There is strict compliance with:
- (1) The provisions of the certificate of registration issued to his or her physician assistant by the State Board of Pharmacy pursuant to NRS 639.1373; and
- (2) The regulations of the State Board of Pharmacy regarding controlled substances, poisons, dangerous drugs or devices.
- 2. Except as otherwise required in subsection 3 or 4, the supervising physician shall, each month, review and initial [selected charts] not less than 5 percent of the medical records of the patients of the physician assistant [.] in which notations relating to a patient encounter were made by the physician assistant during the previous month. Unless the physician assistant is performing medical services pursuant to NAC 630.375, the supervising physician must be available at all times that his or her physician assistant is performing medical services to consult with his or her assistant. Those consultations may be indirect, including, without limitation, by telephone [.] or through the use of telemedicine technology.
- 3. At least once a month, the supervising physician shall [spend], by spending part of a day at any location where the physician assistant provides medical services [to] or through the use of telemedicine technology, act as a consultant to the physician assistant and [to] monitor the quality of care provided by the physician assistant.
- 4. Except as otherwise provided in this subsection, if the supervising physician is unable to supervise the physician assistant as required by this section, the supervising physician shall designate a qualified substitute physician, who practices medicine in the same specialty as the

supervising physician, to supervise the assistant. If the physician assistant is performing medical services pursuant to NAC 630.375, the supervising physician is not required to comply with this subsection.

- 5. A physician who supervises a physician assistant shall develop and carry out a program to ensure the quality of care provided by a physician assistant. The program must include, without limitation:
  - (a) An assessment of the medical competency of the physician assistant;
  - (b) A review and initialing of [selected charts;] medical records as required by subsection 2;
- (c) An assessment of a representative sample of the referrals or consultations made by the physician assistant with other health professionals as required by the condition of the patient;
- (d) [Direct observation] Observation, either in person or through the use of telemedicine technology, of the ability of the physician assistant to take a medical history from and perform an examination of patients representative of those cared for by the physician assistant; and
- (e) Maintenance by the supervising physician of accurate records and documentation regarding the program for each physician assistant supervised.
- 6. Except as otherwise provided in subsection 7, a physician may supervise a physician assistant if the physician:
  - (a) Holds an active license in good standing to practice medicine issued by the Board;
  - (b) Actually practices medicine in this State; and
  - (c) Has not been specifically prohibited by the Board from acting as a supervising physician.
- 7. If the Board has disciplined a physician assistant pursuant to NAC 630.410, a physician shall not supervise that physician assistant unless the physician has been specifically approved by the Board to act as the supervising physician of that physician assistant.

- 8. If a supervising physician uses telemedicine technology pursuant to this section, the supervising physician shall ensure that any communication or transfer of information provided through that use of telemedicine technology complies with all applicable state and federal privacy laws.
  - **Sec. 5.** NAC 630.490 is hereby amended to read as follows:
- 630.490 1. Except as otherwise provided in this section, a physician may *enter into an agreement to* collaborate with an advanced [practitioner of nursing] practice registered nurse if the physician:
  - (a) Holds an active license in good standing to practice medicine;
  - (b) Actually practices medicine in this State; and
- (c) Has not been specifically prohibited by the Board from acting as a collaborating physician.
- 2. No physician may collaborate with an advanced [practitioner of nursing] practice registered nurse whose scope of practice or medical competence is other than the scope of practice or medical competence of the physician.
- 3. Before collaborating with an advanced [practitioner of nursing,] practice registered nurse, a physician, on a form prescribed by the Board, shall notify the Board of the name and location of the practice of the advanced [practitioner of nursing] practice registered nurse and the portion of the practice of the advanced [practitioner of nursing] practice registered nurse that the physician will collaborate on with the advanced [practitioner of nursing.] practice registered nurse. The notice must contain the signatures of the advanced [practitioner of nursing] practice registered nurse and the collaborating physician.

- 4. In addition to any other requirements, if the State Board of Nursing pursuant to NRS 632.325 has disciplined an advanced [practitioner of nursing,] practice registered nurse, a physician shall not collaborate with that advanced [practitioner of nursing] practice registered nurse unless the physician has been specifically approved by the Board to act as the collaborating physician of that advanced [practitioner of nursing.] practice registered nurse.
- 5. A collaborating physician shall immediately notify the Board of the termination of collaboration between the collaborating physician and an advanced [practitioner of nursing.] practice registered nurse. For any portion of the practice of the advanced [practitioner of nursing] practice registered nurse that the collaborating physician terminating collaboration with the advanced [practitioner of nursing] practice registered nurse collaborated, no physician shall collaborate with the advanced [practitioner of nursing] practice registered nurse until the physician submits notice to the Board pursuant to subsection 3.
- 6. The collaborating physician or his or her substitute shall be available at all times that the advanced [practitioner of nursing] practice registered nurse is providing medical services to consult with the advanced [practitioner of nursing.] practice registered nurse. Those consultations may be indirect, including, without limitation, by telephone [-] or through the use of telemedicine technology.
- 7. The collaborating physician shall, at least once a month, [spend] either by spending part of a day at any location where the advanced [practitioner of nursing] practice registered nurse provides medical services [to] or through the use of telemedicine technology, act as consultant to the advanced [practitioner of nursing] practice registered nurse and [to] monitor the quality of care provided by an advanced [practitioner of nursing.] practice registered nurse.

- 8. The collaborating physician shall develop and carry out a program to ensure the quality of care provided by an advanced [practitioner of nursing.] practice registered nurse. The program must include, without limitation:
- (a) An assessment of the medical competency of the advanced [practitioner of nursing;]

  practice registered nurse;
  - (b) A review and initialing of selected [charts;] medical records;
- (c) An assessment of a representative sample of referrals or consultations made by the advanced [practitioner of nursing] practice registered nurse with another health professional as required by the condition of the patient;
- (d) [Direct observation] Observation, either in person or through the use of telemedicine technology, of the ability of the advanced [practitioner of nursing] practice registered nurse to take a medical history from and perform an examination of patients representative of those cared for by the advanced [practitioner of nursing;] practice registered nurse; and
- (e) Maintenance of accurate records and documentation of the program for each advanced 

  [practitioner of nursing] practice registered nurse with whom the physician collaborated.
- 9. The collaborating physician shall ensure that the advanced [practitioner of nursing:] practice registered nurse:
  - (a) Does not use presigned prescriptions; and
- (b) Practices in strict compliance with the regulations of the State Board of Pharmacy regarding prescriptions, controlled substances, dangerous drugs and devices.
- 10. The medical director of a practice that is specific to a site, including, without limitation, a facility for skilled nursing or a hospital, may act as a collaborating physician to an advanced 

  [practitioner of nursing] practice registered nurse who works at the practice. A medical director

acting as a collaborating physician may allow the advanced [practitioner of nursing] practice registered nurse to evaluate and care for patients under the direction of an attending physician who is not the collaborating physician of the advanced [practitioner of nursing.] practice registered nurse.

- 11. A collaborating physician shall ensure that the medical services that an advanced **[practitioner of nursing]** *practice registered nurse* performs while collaborating with the physician are:
- (a) Commensurate with the education, training, experience and level of competence of the advanced [practitioner of nursing;] practice registered nurse; and
  - (b) Within the scope of practice of the:
    - (1) Advanced [practitioner of nursing;] practice registered nurse;
    - (2) Certification of the advanced [practitioner of nursing;] practice registered nurse; and
    - (3) Collaborating physician.
- 12. If the collaborating physician is unable to act as the collaborating physician for an advanced [practitioner of nursing,] practice registered nurse, he or she shall designate a qualified substitute physician to act as a temporary collaborating physician. The scope of practice or medical competence of the temporary collaborating physician must be the same as the scope of practice or medical competence of the original collaborating physician.
- 13. The collaborating physician is responsible for all the medical services performed by the advanced [practitioner of nursing.] practice registered nurse.
- 14. A collaborating physician shall ensure that an agreement to collaborate with an advanced practice registered nurse includes a requirement that, if the advanced practice registered nurse collaborates with more than one collaborating physician, the advanced

practice registered nurse agrees to, at each patient encounter, denote in the corresponding medical record the name of the collaborating physician associated with that patient encounter.

- 15. If a collaborating physician uses telemedicine technology pursuant to this section, the collaborating physician shall ensure that any communication or transfer of information provided through that use of telemedicine technology complies with all applicable state and federal privacy laws.
  - **Sec. 6.** NAC 630.495 is hereby amended to read as follows:
- 630.495 1. Except as otherwise provided in subsection 2, a physician shall not [simultaneously:] agree to be designated as the supervising physician or the collaborating physician for:
  - (a) [Supervise more than three] More than four physician assistants [;
  - (b) Collaborate with more than three] at the same time;
- (b) More than four advanced [practitioners of nursing;] practice registered nurses at the same time; or
- (c) [Supervise or collaborate with a] A combination of more than [three] four physician assistants and advanced [practitioners of nursing.] practice registered nurses at the same time.
- 2. A physician may petition the Board for approval to [supervise or collaborate with] be designated as the supervising physician or collaborating physician for more physician assistants and advanced [practitioners of nursing] practice registered nurses than he or she would otherwise be allowed pursuant to subsection 1. The Board will not approve the petition unless the physician provides satisfactory proof to the Board that:
- (a) Special circumstances regarding his or her practice exist that necessitate his or her supervision or collaboration with more physician assistants and advanced [practitioners of

nursing] practice registered nurses than would otherwise be allowed pursuant to subsection 1;
and

(b) The physician will be able to supervise or collaborate with the number of physician assistants and advanced [practitioners of nursing] practice registered nurses for which he or she is requesting approval in a satisfactory manner.