

**PROPOSED REGULATION OF THE
BOARD OF PSYCHOLOGICAL EXAMINERS**

LCB File No. R088-26

July 6, 2026

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

AUTHORITY: §§ 1-7, 15-20, 22-27 and 31-37, NRS 641.100 and 641.2252; §§ 8-12, NRS 641.100, 641.2252 and 641.2254; § 13, NRS 641.100, 641.2252 and 641.2255; §§ 14 and 21, NRS 641.100, 641.2252 and 641.2257; § 28, NRS 641.100, 641.2252, 641.2254, 641.2255 and 641.228; § 29, NRS 641.100 and 641.220; §§ 30 and 38, NRS 641.100.

A REGULATION relating to behavioral health; setting forth certain activities for which certain licenses are not required; establishing the qualifications and requirements of an applicant to practice behavioral health promotion and prevention; establishing requirements governing educational programs in behavioral health promotion and prevention; requiring the completion of certain continuing education for the renewal of a license to practice behavioral health promotion and prevention; establishing the qualifications and process for a person to be approved to act as a behavioral health and wellness practitioner supervisor; setting forth the powers and duties of an approved behavioral health and wellness practitioner supervisor; prescribing requirements governing the supervision of a behavioral health and wellness practitioner; authorizing a behavioral health and wellness practitioner to provide certain activities and services; establishing certain requirements governing the professional conduct and practice of a behavioral health and wellness practitioner; adopting certain publications by reference; establishing certain fees; revising provisions governing accepted continuing education for psychologists; repealing duplicative definitions; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

Existing law provides for the licensure of psychologists, provisional licensure of psychological assistants and psychological interns and registration of psychological trainees by the Board of Psychological Examiners. (NRS 641.160-641.196, 641.226) Senate Bill No. 165 of the 2025 Legislative Session added to existing law provisions for the licensure of behavioral health and wellness practitioners and the regulation of the practice of behavioral health promotion and prevention by the Board. (Chapter 379, Statutes of Nevada 2025, at pages 2483-2528) Existing law now requires the Board to adopt certain regulations relating to the licensure and practice of behavioral health and wellness practitioners. (NRS 641.2252) **Section 7** of this regulation clarifies that unlicensed persons may engage in certain nonclinical activities. **Sections**

2-6 of this regulation define certain terms relating to behavioral health promotion and prevention, and **section 27** of this regulation establishes the applicability of those definitions. **Section 38** of this regulation repeals a definition that is duplicative of the definition set forth in **section 4** and an associated section that is no longer necessary because of the repeal of that definition. **Section 30** of this regulation makes a conforming change to preserve the applicability of an existing definition.

Existing law requires an applicant for a license as a behavioral health and wellness practitioner, in addition satisfying certain other requirements, to: (1) hold a bachelor's degree or higher in certain fields; (2) complete an educational program in behavioral health promotion and prevention approved by the Board; and (3) pass any examination approved by the Board. (NRS 641.2254) **Section 8** of this regulation establishes certain other qualifications that an applicant for a license to practice behavioral health promotion and prevention must satisfy in order to obtain a license. **Section 9** of this regulation provides that an applicant may satisfy the degree requirement imposed by existing law if the applicant has earned a degree or certificate that meets certain criteria. (NRS 641.2254) **Section 10** of this regulation establishes certain requirements that an educational program in behavioral health promotion and prevention completed by an applicant must satisfy in order to be approved by the Board for the purpose of licensure. **Section 11** of this regulation requires an applicant to pass the national examination in behavioral health promotion and prevention developed by the Ballmer Institute for Children's Behavioral Health or, if that examination does not exist or is not being administered, to demonstrate his or her competency in a manner approved by the Board. **Section 12** of this regulation requires the Board to administer to each applicant for a license as a behavioral health and wellness practitioner a state examination concerning issues that are specific to the practice of behavioral health promotion and prevention in this State. **Section 28** of this regulation establishes the fee that each applicant must pay to take the state examination.

Existing law: (1) provides that each license to practice behavioral health promotion and prevention expires 3 years after the date on which it was issued; and (2) requires an applicant to renew such a license to have completed 20 hours of continuing education within the 3 immediately preceding years, which must include 2 hours in ethics, 2 hours in prevention science and any continuing education as may be required by the Board by regulation. (NRS 641.2255) **Section 13** of this regulation requires such a licensee to complete, as part of his or her total requirement for continuing education, 2 hours of instruction in evidence-based suicide prevention and awareness, 6 hours of instruction in knowledge or skills relating to behavioral health promotion and prevention and 6 hours of continuing education in cultural competency and diversity, equity and inclusion. **Section 13** also: (1) prescribes the methods by which continuing education may be obtained; (2) requires a licensee to submit information to the Board concerning a course before it may be approved by the Board for credit; and (3) provides that the Board will make available a list of courses and programs that are currently approved by the Board.

Existing law authorizes the Board to charge and collect a fee for any incidental service the Board provides, which may not exceed the cost to provide the service. Existing law further authorizes the Board to charge a fee of not more than: (1) \$200 for the issuance of an initial license to practice behavioral health promotion and prevention; and (2) \$200 for the triennial renewal of such a license. (NRS 641.228) Existing regulations require an applicant for any license issued by the Board, including a license as a behavioral health and wellness practitioner, to pay an application fee of \$150. (NAC 641.019) **Section 28** additionally establishes a fee of

\$200 for the initial issuance or triennial renewal of a license to practice behavioral health and wellness promotion and prevention.

Existing law authorizes the Board to adopt regulations concerning the supervision of a behavioral health and wellness practitioner by certain persons who are licensed in this State to provide mental or behavioral health care. (NRS 641.2252, 641.2257) **Section 21** of this regulation prohibits a behavioral health and wellness practitioner from engaging in any activity constituting the practice of behavioral health promotion and prevention except under the supervision of a supervisor approved by the Board, with certain exceptions. **Section 14** of this regulation requires such a provider of health care who wishes to obtain the approval of the Board to supervise a behavioral health and wellness practitioner to: (1) meet certain qualifications; and (2) submit certain information to the Board, including proof that he or she has completed a course of training approved by the Board. **Section 14** also sets forth the criteria that the required course of training must satisfy in order to be approved by the Board. **Section 15** of this regulation: (1) requires an approved behavioral health and wellness practitioner supervisor to notify the Board if a licensing board initiates any investigation of or disciplinary action against the supervisor; and (2) sets forth the actions that the Board may take with respect to an approved behavioral health and wellness practitioner supervisor who violates the provisions of law or regulation concerning the supervision of behavioral health and wellness practitioners. **Section 16** of this regulation: (1) requires an approved behavioral health and wellness practitioner supervisor to provide a behavioral health and wellness practitioner he or she supervises with a certain number of hours of supervision that meets certain criteria; and (2) limits the number of behavioral health and wellness practitioners that an approved behavioral health and wellness practitioner supervisor may supervise, with certain exceptions. **Section 17** of this regulation establishes certain duties and responsibilities of an approved behavioral health and wellness practitioner supervisor. **Section 18** of this regulation requires an approved behavioral health and wellness practitioner supervisor who does not employ, or is not employed by the same entity as, a behavioral health and wellness practitioner he or she is supervising to enter into a written agreement with the employer of the behavioral health and wellness practitioner concerning: (1) the supervision of the behavioral health and wellness practitioner; and (2) access by the supervisor to relevant medical records. **Section 19** of this regulation prohibits a person from supervising a behavioral health and wellness practitioner if that supervision involves a potential conflict of interest. **Section 20** of this regulation requires an approved behavioral health and wellness practitioner supervisor to: (1) make and keep certain records in a certain manner; and (2) notify the Board upon the occurrence of certain events.

Existing law authorizes the Board to adopt regulations governing the standard of practice for a behavioral health and wellness practitioner. (NRS 641.2252) Existing regulations establish certain standards of conduct applicable to other licensees regulated by the Board, which include certain restrictions and prohibitions concerning the handling of confidential information and medical records, the misrepresentation of the credentials and qualifications of a licensee and the conduct of a licensee towards a client or patient. (NAC 641.200-641.250) **Section 21**: (1) sets forth the professional activities in which a behavioral health and wellness practitioner is authorized to engage; (2) requires a behavioral health and wellness practitioner to use a framework of stepped care; and (3) imposes certain requirements relating to documentation maintained by a behavioral health and wellness practitioner. **Sections 22 and 23** of this regulation impose requirements relating to the use of telehealth and the use of new methods, services or techniques, respectively, by behavioral health and wellness practitioners. **Sections 24**

and 25 of this regulation establish certain other standards of practice and conduct that are specifically applicable to the practice of behavioral health promotion and prevention. **Section 26** of this regulation adopts by reference the most recent version of the *Ethical Standards for Behavioral Health and Wellness Practitioners* adopted by the Ballmer Institute for Children's Behavioral Health. **Sections 31-37** of this regulation make applicable to a behavioral health and wellness practitioner certain standards of conduct that are currently applicable to psychologists. Specifically, **section 32** provides that the parent or legal guardian is the patient for the purpose of making decisions concerning treatment provided to a child or protected person by a behavioral health and wellness practitioner. **Section 33** prohibits a behavioral health and wellness practitioner from disclosing the confidential information of a patient, with certain exceptions. **Section 34** prohibits a behavioral health and wellness practitioner from: (1) beginning or continuing a professional relationship with a patient if the behavioral wellness practitioner is impaired or reasonably suspected by the Board to be impaired; and (2) engaging in certain sexual or exploitive conduct towards a patient. **Sections 35-37** prohibit a behavioral health and wellness practitioner from making certain misrepresentations or false statements and engaging in certain other dishonest, illegal or unprofessional conduct.

Existing law requires an applicant for the renewal of a license as a psychologist to submit evidence to the Board of completion of the requirements for continuing education set forth in regulations adopted by the Board. (NRS 641.220) Existing regulations prescribe the courses or programs that the Board will accept for continuing education credit. Such acceptable courses or programs include workshops, seminars or classes which maintain an attendance roster and are certified or recognized by a state, national or international accrediting agency, including certain specified accrediting agencies. (NAC 641.136) **Section 29** of this regulation removes the International Congress of Psychology from that list of specified accrediting agencies because the International Congress of Psychology is not an accrediting agency.

Section 1. Chapter 641 of NAC is hereby amended by adding thereto the provisions set forth as sections 2 to 26, inclusive, of this regulation.

Sec. 2. *“Approved behavioral health and wellness practitioner supervisor” means a person who is approved by the Board pursuant to section 14 of this regulation to supervise a behavioral health and wellness practitioner.*

Sec. 3. *“Behavioral health and wellness practitioner supervisor” means the person who is responsible for exercising supervision and control over a behavioral health and wellness practitioner pursuant to subsection 1 of section 21 of this regulation.*

Sec. 4. *“Face-to-face” means an in-person interaction or a synchronous interaction through the use of audiovisual communication technology, not including standard telephone, facsimile or electronic mail.*

Sec. 5. *“Low-intensity behavioral health interventions” means strategies relating to behavioral health that:*

- 1. Are structured, time-limited and evidence based; and*
- 2. Focus on prevention, the reduction of symptoms or functional improvement.*

Sec. 6. *“Telehealth” has the meaning ascribed to it in NRS 629.515.*

Sec. 7. *A person is not required to hold a license pursuant to this chapter and chapter 641 of NRS to perform:*

1. Activities relating to outreach, education or the general wellness of the population at which the activities are directed, if the activities are conducted in a non-individualized setting and not structured as behavioral health services. Such activities may include, without limitation:

- (a) Educational activities or outreach relating to public health;*
- (b) Outreach to the community, including, without limitation, outreach activities conducted at the campus of a college or university;*
- (c) Conducting workshops, seminars or training activities;*
- (d) Programs that are peer-led or designed for peer support;*
- (e) The distribution of informational or educational materials; and*
- (f) Conducting or participating in campaigns to promote mental health awareness or prevention.*

2. Activities that are not delivered within a provider-patient relationship and do not involve conducting or providing individualized assessments or interventions to a person or otherwise monitoring the behavioral health conditions of a person.

3. Such other services or activities that do not constitute the supervised clinical use of prevention and intervention strategies to identify persons at risk of mental or behavioral health issues and accomplish individualized goals relating to the mental or behavioral health of a person as part of a therapeutic relationship. For the purpose of this subsection, “therapeutic relationship” means the delivery of structured, evidence-based behavioral health interventions to a person in a supervised practice setting.

Sec. 8. 1. The Board will issue a license as a behavioral health and wellness practitioner to an applicant who:

- (a) Satisfies the requirements of subsection 1 of NRS 641.2254;*
- (b) Has not been previously convicted of a felony, unless the Board determines that the conviction should not disqualify the applicant from licensure;*
- (c) Has not been subject to disciplinary action in this State or in another jurisdiction;*
- (d) Does not have any outstanding complaints or charges pending against him or her in this State or in another jurisdiction;*
- (e) Has not previously been denied licensure by the Board, unless the Board determines that the denial should not disqualify the applicant from licensure;*
- (f) Satisfies the requirements prescribed by section 11 of this regulation;*
- (g) Passes the state examination administered by the Board pursuant to section 12 of this regulation;*
- (h) Complies with paragraph (b) of subsection 1 of NRS 641.160; and*

(i) Submits to the Board with his or her application:

(1) Evidence that the applicant meets the educational and practicum requirements set forth in sections 9 and 10 of this regulation; and

(2) Not less than two letters of professional reference that attest without reservation to the professional competence, ethical conduct and current fitness to practice behavioral health promotion and prevention of the applicant.

2. The Board may require an applicant to appear before the Board to demonstrate to the satisfaction of the Board:

(a) The professional and ethical qualifications of the applicant;

(b) The current fitness of the applicant to practice as a behavioral health and wellness practitioner; and

(c) The intent of the applicant to practice as a behavioral health and wellness practitioner in a manner consistent with the education, training and experience of the applicant.

Sec. 9. *An applicant for a license as a behavioral health and wellness practitioner satisfies the requirements of sub-subparagraph (I) of subparagraph (2) of paragraph (c) of subsection 1 of NRS 641.2254 if the applicant submits to the Board proof that the applicant has earned:*

1. A bachelor's degree or higher from a regionally accredited college or university with a major or concentration in psychology, behavioral health, social work, human services, public health or a similar field that, in the determination of the Board, provided the applicant with a similarly rigorous and appropriate course of study; or

2. A postbaccalaureate certificate or other credential from a regionally accredited college or university approved by the Board for completing a coherent, structured and intentional program of study in any field described in subsection 1.

Sec. 10. 1. *An applicant for a license as a behavioral health and wellness practitioner must demonstrate to the satisfaction of the Board that the educational program completed pursuant to sub-subparagraph (II) of subparagraph (2) of paragraph (c) of subsection 1 of NRS 641.2254:*

(a) Except as otherwise provided in subsection 6, was offered by a regionally accredited college or university.

(b) Was an integrated, organized, coherent and formally established course of study within the institution, and is not a collection of unrelated, self-selected or piecemeal coursework.

(c) Was not delivered entirely through asynchronous online means or through self-directed online instruction.

(d) Had clearly defined admissions criteria, learning objectives and requirements for the completion of the program.

(e) Had measurable learning outcomes aligned with the areas and domains described in paragraphs (i) and (j).

(f) Included methods of assessment that adequately evaluated the knowledge, skill and professional conduct of the applicant.

(g) Included formal evaluations by the faculty of the program of the progress and competency of the applicant based on direct observations of the applicant.

(h) Included methods for formally evaluating and documenting whether the applicant achieved entry-level competence by the conclusion of the program.

(i) Required the applicant to have completed coursework in the following areas:

(1) The foundations of behavioral health, including mental health, substance use and co-occurring conditions.

(2) Ethical and legal responsibilities of behavioral health practitioners, including instruction relating to patient confidentiality and privacy, mandated reporting, professional boundaries and maintaining the appropriate scope of practice of the profession.

(3) Cultural humility, equity and inclusion, disparities in behavioral health and the social determinants of health.

(4) Behavioral health promotion and prevention, including approaches to behavioral health that are strength-based, recovery-oriented and population-informed.

(5) Evidence-informed or evidence-based low-intensity behavioral health interventions appropriate for supervised, entry-level practice.

(6) Managing risk and the safety of patients, including, without limitation, the identification of risks relating to behavioral health, responding to crises and properly referring patients to a higher level of care.

(7) Measurement-based care, including using and interpreting standardized screening mechanisms and measuring patient outcomes.

(8) Methods for preparing documentation and patient records in a legally, ethically and professionally appropriate manner.

(j) Required the applicant to demonstrate understanding and competence in the following domains as part of a formal evaluation of the applicant:

(1) Behavioral health promotion and prevention;

(2) Early identification of behavioral health concerns and providing low-intensity behavioral health interventions;

(3) Evaluating risk and making appropriate patient referrals;

(4) Culturally-responsive practice; and

(5) Appropriate professional and interprofessional conduct.

(k) Except as otherwise provided in subsection 2, required the applicant to complete not less than 700 hours of a supervised practicum which:

(1) Was organized, sequential and formally established as a component of the educational program.

(2) Included clearly defined learning objectives and structures for supervision designed to provide students with entry-level competency in the areas and domains described in paragraphs (i) and (j).

(3) Included not less than 175 hours of direct face-to-face or synchronous contact through electronic means between patients and the applicant in a supervised clinical setting.

For the purposes of this subparagraph, direct contact between a patient and an applicant:

(I) Includes, without limitation, screening and assessing a patient, coordinating the care of a patient, providing psychoeducation and providing brief intervention services to a patient; and

(II) Does not include preparing documentation, writing reports, participating in meetings with supervisors or other students in which a patient is not present, attending didactic training or administrative tasks.

(4) Included a minimum of 1 hour of direct supervision that directly pertains to the curriculum of the educational program for every 20 hours of total practicum experience completed by the applicant. Such direct supervision:

(I) Must be conducted through in-person or synchronous interaction;

(II) Must be provided by a member of the faculty of the program who is a qualified and actively licensed mental or behavioral health professional and who has received formal training that is substantially similar to the training described in subsection 2 of section 14 of this regulation; and

(III) Must not be provided to more than three students at one time.

2. An applicant may provide the Board with proof that the applicant participated in a supervised practicum that meets the requirements of paragraph (k) of subsection 1 as part of an educational program other than the program used by the applicant to meet the requirements of subsection 1. If the applicant proves, to the satisfaction of the Board, that such hours meet the requirements of paragraph (k) of subsection 1, the Board will credit such hours towards the requirements of that paragraph.

3. An applicant must submit to the Board such documentation as may be requested by the Board to demonstrate that he or she has completed an educational program that satisfies the criteria set forth in subsection 1. Such documentation may include, without limitation:

(a) An official transcript or other appropriate document of all coursework completed in the program;

(b) Official course descriptions or syllabi of the courses completed by the applicant in the program;

(c) Documented descriptions of the supervised practicum experience completed by applicant;

(d) Documentation or diagrams prepared by the applicant or the faculty of the program which describe or depict how the coursework and practicum experience completed by the applicant align with the areas and domains described in paragraphs (i) and (j) of subsection 1;

(e) Documentation compiled by the program pursuant to paragraph (h) of subsection 1; and

(f) Formal evaluations and other documentation, including, without limitation, attestations and verifications prepared by a faculty member of the program who directly supervised and observed the applicant during the course of the program.

4. The Board may request additional documentation and conduct such an evaluation of the applicant's qualifications as the Board deems necessary.

5. Except as otherwise provided in this subsection, an applicant must have completed an educational program that satisfies the criteria set forth in subsection 1 not later than 7 years after the date in which he or she enrolled in the program. The Board may waive that requirement if the applicant demonstrates, to the satisfaction of the Board, that he or she:

(a) Completed a program that satisfies the criteria set forth in subsection 1; and

(b) Possesses the necessary competence to practice behavioral health promotion and prevention.

6. The Board may recognize an accreditation organization that is nationally recognized and which accredits educational programs in behavioral health promotion and prevention.

Proof that an applicant for a license as a behavioral health and wellness practitioner has successfully completed an educational program that is accredited by an accreditation

organization that is so recognized constitutes prima facie evidence that an applicant has satisfied the requirements of this section.

Sec. 11. 1. *Except as otherwise provided in subsection 2, an applicant for a license as a behavioral health and wellness practitioner must achieve the minimum score prescribed for passage on the national examination for behavioral health promotion and prevention developed by the Ballmer Institute for Children’s Behavioral Health, or its successor organization.*

2. If the national examination for behavioral health promotion and prevention described in subsection 1 does not exist or is not being administered, the Board will require an applicant for a license as a behavioral health and wellness practitioner to demonstrate to the Board, in the manner prescribed by the Board, his or competency to practice behavioral health promotion and prevention. The Board may, without limitation:

(a) Review and evaluate the performance of the applicant in the supervised practicum completed by the applicant pursuant to section 10 of this regulation;

(b) Require an applicant to prepare and present to the Board a portfolio of his or her supervised experience, including experience in a supervised practicum completed pursuant to section 10 of this regulation, which adequately demonstrates his or her competence to practice behavioral health promotion and prevention;

(c) Require the applicant to take and pass a structured oral examination; or

(d) Require the supervisor identified by the applicant in his or her application pursuant to subparagraph (3) of paragraph (c) of subsection 1 of NRS 641.2254 to attest to the professional competence and ethical conduct of the applicant and the current fitness of the applicant to practice behavioral health promotion and prevention.

Sec. 12. 1. *The Board will administer a state examination to each applicant for a license as a behavioral health and wellness practitioner.*

2. *The state examination will consist of questions addressing issues that are specific to the practice of behavioral health promotion and prevention in this State, which may include, without limitation, the applicable federal and state laws and regulations concerning the practice of behavioral health promotion and prevention in this State and the ethical principles and codes of professional conduct relevant to the practice of behavioral health promotion and prevention in this State. At least 30 days before the state examination, the Board will furnish a description of the content to be covered in the state examination to each applicant.*

3. *An applicant who fails the state examination:*

(a) *Once or twice may retake the state examination.*

(b) *Three times may not retake the state examination unless the applicant requests permission and obtains approval from the Board to retake the state examination for a fourth time. The applicant must submit to the Board a written request to retake the state examination and a written plan explaining the steps the applicant will take to pass the state examination. The Board will approve the request to retake the state examination if the Board determines that the written plan submitted by the applicant is likely to result in the applicant passing the state examination.*

(c) *Four or more times may not retake the state examination except as otherwise provided in this paragraph, and his or her application for a license as a behavioral health and wellness practitioner is deemed denied. A person whose application is deemed denied pursuant to this paragraph may, not earlier than 12 months after the date on which he or she is notified by the Board that he or she failed that state examination for the immediately preceding time, request*

permission in writing from the Board to reapply for licensure and retake the state examination. The Board will, if good cause is shown, approve the request.

4. The fee for the state examination must be paid before the state examination is administered. A fee must be paid each time the applicant takes the state examination.

5. An applicant shall not:

(a) Remove any notes taken during the state examination;

(b) Record the state examination by electronic or other means; or

(c) Engage in any other conduct that results in the disclosure of the contents of the state examination.

Sec. 13. 1. To satisfy the requirements of subsection 2 of NRS 641.2255 for the renewal of his or her license, a behavioral health and wellness practitioner must certify to the Board that, during the 3 years immediately preceding the date he or she submits an application for renewal, the applicant completed the number of hours of continuing education required by subsection 2 of NRS 641.2255. In addition to the hours of continuing education required by paragraphs (a) and (b) of that subsection, such continuing education must include at least:

(a) Two hours of instruction in evidence-based suicide prevention and awareness;

(b) Six hours of instruction in knowledge or skills relating to behavioral health prevention and promotion; and

(c) Six hours of instruction in cultural competency and diversity, equity and inclusion.

2. A behavioral health and wellness practitioner may not receive:

(a) Continuing education credit for a workshop, seminar, class or course in which he or she is the instructor; or

(b) Credit for more than 10 hours of continuing education from an approved home study course during the 3 years immediately preceding the date he or she submits an application for renewal.

3. Except as otherwise provided in subsections 2 and 4, the continuing education required pursuant to subsection 2 of NRS 641.2255 may include, without limitation:

(a) A workshop, seminar, class or home study course in behavioral health promotion and prevention or a closely related discipline which maintains an attendance roster and which is:

(1) Conducted under the auspices of an accredited college or university offering undergraduate or graduate level instruction; or

(2) Certified or recognized by a state, regional, national or international accrediting agency, including, without limitation:

(I) The American Association for Marriage and Family Therapy, or its successor organization;

(II) The American Counseling Association, or its successor organization;

(III) The American Medical Association, or its successor organization;

(IV) The American Psychiatric Association, or its successor organization;

(V) The American Psychological Association, or its successor organization;

(VI) The Association for Behavior Analysis International, or its successor organization; and

(VII) The National Association of Social Workers, or its successor organization; or

(b) A workshop, seminar, class or home study course in behavioral health and wellness promotion or a closely related discipline which is approved by the Board.

4. Before a behavioral health and wellness practitioner may receive credit for continuing education for a course taken to satisfy the requirements of subsection 2 of NRS 641.2255, he or she must submit information concerning the course to the Board for approval of the course, unless the Board has previously approved the course. The Board will make available at its office a list of courses and programs that are currently approved by the Board.

Sec. 14. 1. *A person who wishes to obtain the approval of the Board to supervise a behavioral health and wellness practitioner must:*

(a) Hold a current license as a provider of health care listed in NRS 641.2257, be in good standing with the applicable licensing board and have no history of disciplinary action; and

(b) Submit to the Board:

(1) Evidence that he or she completed a course of training relating to the supervision of behavioral health and wellness practitioners that is approved by the Board;

(2) A form that contains:

(I) The name, mailing address, contact phone number and occupation of the person;

(II) An identification of each active license held by the person that has been issued by a licensing board in this State;

(III) The name of each behavioral health and wellness practitioner whom the person intends to supervise; and

(IV) The date on which the supervision of each behavioral health and wellness practitioner listed pursuant to sub-subparagraph (III) is intended to begin.

2. To be approved by the Board pursuant to subparagraph (1) of paragraph (b) of subsection 1, a course of training relating to the supervision of behavioral health and wellness

practitioners must provide not less than 6 hours of instruction and include training in each of the following areas:

- (a) Ethical standards in the field of behavioral health promotion and prevention;*
- (b) Appropriate standards for documentation;*
- (c) Effective structures for supervising a behavioral health and wellness practitioner;*
- (d) Low-intensity behavioral health interventions; and*
- (e) Measuring, maintaining and developing the skills and competency of behavioral health and wellness practitioners.*

3. The Board will approve a person pursuant to subsection 1 to supervise a behavioral health and wellness practitioner and send written notice to the person of such approval as soon as practicable after:

- (a) Verifying that the applicant satisfies the requirements of paragraph (a) of subsection 1; and*
- (b) Receiving the information required by paragraph (b) of subsection 1 and verifying that the information is complete and accurate.*

5. If, after a person is approved pursuant to this section to supervise behavioral health and wellness practitioners, the person intends to supervise one or more additional behavioral health and wellness practitioners not named in the form submitted pursuant to subparagraph (2) of paragraph (b) of subsection 1, the person must provide the Board with the name of each additional behavioral health and wellness practitioner whom the person intends to supervise and the dates on which such supervision will begin.

Sec. 15. 1. *An approved behavioral health and wellness practitioner supervisor shall notify the Board of the initiation of any investigation or disciplinary action taken against the*

approved behavioral health and wellness practitioner supervisor by any licensing board that has issued the approved behavioral health and wellness practitioner supervisor a professional license not later than 30 days after the initiation of such action.

2. If the Board determines that an approved behavioral health and wellness practitioner supervisor has violated any provision of this chapter or chapter 641 of NRS with regard to the supervision of a behavioral health and wellness practitioner, the Board may:

(a) Suspend the approval of the person to supervise behavioral health and wellness practitioners;

(b) Notify each licensing board that has issued a license to the approved behavioral health and wellness practitioner supervisor of the violation; and

(c) If the approved behavioral health and wellness practitioner supervisor is a psychologist, initiate disciplinary action against him or her in accordance with the provisions of this chapter and chapter 641 of NRS.

Sec. 16. 1. *An approved behavioral health and wellness practitioner supervisor shall provide individual, face-to-face supervision each month to a behavioral health and wellness practitioner he or she supervises for not less than the greater of:*

(a) Two percent of the total hours worked by the behavioral health and wellness practitioner during the month; or

(b) Two hours.

2. In addition to the requirements of subsection 1, an approved behavioral health and wellness practitioner supervisor shall provide at least 1 additional hour of supervision each month to a behavioral health and wellness practitioner he or she supervises, which may consist of:

(a) Individual, face-to-face supervision; or

(b) Group meetings of not more than 10 persons, including the behavioral health and wellness practitioner.

3. Except as otherwise provided in this subsection, an approved behavioral health and wellness practitioner supervisor may not supervise more than 6 full-time equivalent behavioral health and wellness practitioners at the same time. An approved behavioral health and wellness practitioner supervisor may request the approval of the Board to supervise additional behavioral health and wellness practitioners. The Board may approve such a request upon determining that the approved behavioral health and wellness practitioner supervisor is capable of complying with the provisions of this chapter and chapter 641 of NRS governing the supervision of behavioral health and wellness practitioners.

Sec. 17. 1. An approved behavioral health and wellness practitioner supervisor shall employ methods of proper and diligent oversight of each behavioral health and wellness practitioner he or she supervises to meet his or her responsibilities set forth in this section. Such methods must include the implementation of policies and procedures that ensure the accessibility of the approved behavioral health and wellness practitioner supervisor to the behavioral health and wellness practitioner commensurate with the professional developmental level of the behavioral health and wellness practitioner.

2. To ensure compliance with subsection 1, an approved behavioral health and wellness practitioner supervisor may employ various modes and methods of supervision of a behavioral health and wellness practitioner under his or her supervision, including, without limitation:

(a) Individual supervision;

(b) Group supervision;

- (c) Reviewing and guiding the selection and implementation of interventions for behavioral health promotion and prevention;*
- (d) Tracking the progress of patients served by the behavioral health and wellness practitioner;*
- (e) Discussing the cases of patients with the behavioral health and wellness practitioner;*
- (f) Directly observing the delivery of services by the behavioral health and wellness practitioner, either in person or through the use of a remote technology system which uses electronic, digital or other similar technology; and*
- (g) Reviewing audio or visual recordings of the delivery of services by the behavioral health and wellness practitioner.*

3. An approved behavioral health and wellness practitioner supervisor is responsible for the full oversight and adequate supervision of the work of each behavioral health and wellness practitioner he or she supervises, including the outcomes, plans of care and case management of each patient served by a behavioral health and wellness practitioner supervised by the approved behavioral health and wellness practitioner supervisor.

4. For each behavioral health and wellness practitioner an approved behavioral health and wellness practitioner supervisor supervises, the approved behavioral health and wellness practitioner supervisor shall:

(a) Properly oversee the medical records of each patient of the behavioral health and wellness practitioner;

(b) Review and sign all documentation, including, without limitation, reports, treatment plans and progress notes, pertaining to services or treatment provided to a patient of the behavioral health and wellness practitioner, including, without limitation, services for which

the approved behavioral health and wellness practitioner supervisor is seeking reimbursement from a third party; and

(c) Ensure that the behavioral health and wellness practitioner:

(1) Practices only within the scope of practice, training and competencies of the approved behavioral health and wellness practitioner supervisor and behavioral health and wellness practitioner; and

(2) Complies with the provisions of this chapter and chapter 641 of NRS.

5. If a behavioral health and wellness practitioner intends to provide a service or treatment in a specialized domain of practice, including, without limitation, the prevention of substance use disorder, the approved behavioral health and wellness practitioner supervisor of the behavioral health and wellness practitioner shall ensure, before such a service or treatment is rendered, that:

(a) The behavioral health and wellness practitioner has received appropriate education, training or supervised experience in the domain;

(b) The approved behavioral health and wellness practitioner supervisor possesses sufficient knowledge and experience in the domain or has consulted with a qualified professional with expertise in that domain; and

(c) The service or treatment will be delivered by the behavioral health and wellness practitioner in a manner that is evidence-based or evidence-informed and appropriate based on the setting in which the service or treatment will be provided and the intended recipient of the service or treatment.

6. Except as otherwise provided in this subsection, an approved behavioral health and wellness practitioner supervisor shall be available to a behavioral health and wellness

practitioner whom he or she supervises while the behavioral health and wellness practitioner is providing services to a patient. An approved behavioral health and wellness practitioner supervisor:

(a) Shall arrange for the availability of another appropriate licensed provider of health care who satisfies the criteria set forth in NRS 641.2257 to be available to temporarily supervise the behavioral health and wellness practitioner in the case of the absence of the approved behavioral health and wellness practitioner supervisor; and

(b) Is responsible for the actions of the provider of health care who provides such temporary supervision to a behavioral health and wellness practitioner.

7. A behavioral health and wellness practitioner may not be temporarily supervised by a provider of health care pursuant to subsection 6 who is not the approved behavioral health and wellness practitioner supervisor of the behavioral health and wellness practitioner for more than 30 consecutive days, unless the behavioral health and wellness practitioner obtains approval from the Board.

Sec. 18. If the approved behavioral health and wellness practitioner supervisor of a behavioral health and wellness practitioner does not employ the behavioral health and wellness practitioner and is not employed by the same entity as the behavioral health and wellness practitioner, the approved behavioral health and wellness practitioner supervisor must enter into a written agreement with the employer of the behavioral health and wellness practitioner. The agreement must set forth:

1. The responsibilities of the approved behavioral health and wellness practitioner supervisor with respect to the supervision of the behavioral health and wellness practitioner,

including the scope and nature of the authority of the approved behavioral health and wellness practitioner supervisor over the behavioral health and wellness practitioner; and

2. The medical or other records of a patient of the behavioral health and wellness practitioner that the approved behavioral health and wellness practitioner supervisor will be allowed to access. Such records must be sufficient to enable the approved behavioral health and wellness practitioner supervisor to satisfy his or her obligations pursuant to this chapter and chapter 641 of NRS, and to otherwise provide adequate supervision of the behavioral health and wellness practitioner.

Sec. 19. 1. A person shall not supervise a behavioral health and wellness practitioner, including, without limitation, on a temporary basis pursuant to subsection 6 of section 17 of this regulation, if that supervision involves a potential conflict of interest, including, without limitation, supervision of a behavioral health and wellness practitioner:

(a) Who is a member of the person's household;

(b) Who is related to the person by blood, adoption or marriage, within the third degree of consanguinity or affinity;

(c) With whom the person has had or is having a dating relationship; and

(d) With whom the person has had a therapist-patient or similar relationship.

2. As used in this section, "dating relationship" means frequent, intimate associations primarily characterized by the expectation of affectional or sexual involvement. The term does not include a casual relationship or an ordinary association between persons in a business or social context.

Sec. 20. 1. An approved behavioral health and wellness practitioner supervisor shall prepare records that will enable him or her to:

(a) Effectively monitor the practice and competence of each behavioral health and wellness practitioner whom he or she supervises; and

(b) Accurately determine and document the number of hours of supervision provided to each behavioral health and wellness practitioner whom he or she supervises to ensure compliance with the requirements of subsections 1 and 2 of section 16 of this regulation.

2. An approved behavioral health and wellness practitioner supervisor shall:

(a) Maintain all records relating to the supervision of a behavioral health and wellness practitioner for not less than 5 years after the last date of supervision of that behavioral health and wellness practitioner; and

(b) Make the records described in paragraph (a) available for inspection by the Board upon the request of the Board.

3. An approved behavioral health and wellness practitioner supervisor shall notify the Board within 10 days after his or her supervision of a behavioral health and wellness practitioner is terminated.

4. An approved behavioral health and wellness practitioner supervisor shall notify the Board of any change in his or her residential address or business address within 30 days after the change.

Sec. 21. 1. A behavioral health and wellness practitioner shall not practice behavioral health promotion and prevention except under the supervision and control of a behavioral health and wellness practitioner supervisor who:

(a) Satisfies the criteria set forth in NRS 641.2257; and

(b) Is the approved behavioral health and wellness practitioner supervisor of the behavioral health and wellness practitioner or is authorized pursuant to subsection 6 of

section 17 of this regulation to temporarily supervise the behavioral health and wellness practitioner.

2. A behavioral health and wellness practitioner may engage in only the following activities with respect to his or practice of behavioral health promotion and prevention:

- (a) Conducting standardized screenings for behavioral health;*
- (b) Conducting structured biopsychosocial assessments;*
- (c) Delivering evidence-based or evidence-informed low-intensity behavioral health interventions in accordance with protocols approved by his or her approved behavioral health and wellness practitioner supervisor;*
- (d) Providing to patients psychoeducation or instructions for building behavioral-related skills;*
- (e) Facilitating group interventions that are structured and educational or skills-based in nature;*
- (f) Identifying the behavioral health risks of a patient and formulating appropriate protocols for the safety of the patient with respect to such risks, which may include, without limitation, facilitating consultations or making appropriate referrals to or for the patient in accordance with paragraph (h);*
- (g) Monitoring the outcomes for a patient using tools that are valid and appropriate and communicating such outcomes to his or her behavioral health and wellness practitioner supervisor for the purpose of making informed decisions regarding care, consultation and the escalation of the level of care with respect to the patient; and*

(h) Supporting the coordination of care of a patient, including referring the patient to another professional or to other technical or administrative resources, when such a referral is in the best interest of the patient or requested by and appropriate for the needs of the patient.

3. A behavioral health and wellness practitioner may provide any service authorized by subsection 2 to a patient in a group setting or through telehealth in accordance with the requirements of section 22 of this regulation.

4. A behavioral health and wellness practitioner shall use a framework of stepped care whereby the behavioral health and wellness practitioner:

(a) Initially provides a patient with the least intensive evidence-based service that is likely to be effective based on the specific needs or condition of the patient; and

(b) Thereafter periodically adjusts or escalates the care and services provided to the patient, or appropriately refers the patient to another professional, based on:

(1) The response of the patient to the services previously provided to him or her;

(2) An appropriate assessment of risk; and

(3) The direction of the behavioral health and wellness practitioner supervisor of the behavioral health and wellness practitioner.

5. Any documentation prepared by a behavioral health and wellness practitioner must:

(a) Where relevant and appropriate to include, describe and adequately support the medical necessity or justification of any behavioral health promotion and prevention services provided to a patient;

(b) Effectively ensure the continuity and quality of care of a patient; and

(c) Conform with:

(1) The scope of practice of the behavioral health and wellness practitioner;

(2) The requirements of this chapter and chapter 641 of NRS;

(3) Any requirements or directives imposed by the behavioral health and wellness practitioner supervisor of the behavioral health and wellness practitioner with respect to such documentation; and

(4) Any requirements imposed by a third party, if such documentation is prepared in relation to a payment made or owed by the third party for services provided by the behavioral health and wellness practitioner.

6. As used in this section, “third party” means any insurer, governmental entity or other organization providing health coverage or benefits in accordance with state or federal law.

Sec. 22. 1. *A behavioral health and wellness practitioner shall not provide services to a patient through telehealth unless the behavioral health and wellness practitioner has obtained appropriate knowledge and competence in the practices and requirements specific to telehealth including, without limitation:*

(a) Preserving the privacy of patients and the confidentiality of communications with patients and information concerning patients;

(b) Appropriate procedures for obtaining informed consent from the patient;

(c) Protocols for handling emergencies; and

(d) The legal and ethical requirements of each relevant distant and originating site in which telehealth services will be provided to or received by a patient.

2. As used in this section:

(a) “Distant site” has the meaning ascribed to it in NRS 629.515.

(b) “Originating site” has the meaning ascribed to it in NRS 629.515.

Sec. 23. 1. *A behavioral health and wellness practitioner who is acquiring expertise in a method, service or technique in behavioral health promotion and prevention that is new to the behavioral health and wellness practitioner or the profession of behavioral health promotion and prevention shall:*

(a) Engage in continuing consultation with his or her behavioral health and wellness practitioner supervisor or other relevant professionals;

(b) Seek appropriate education and training in the method, service or technique; and

(c) Inform patients of the innovative nature and known risks of the method, service or technique to allow patients to make informed choices concerning the method, service or technique.

2. *A behavioral health and wellness practitioner shall not:*

(a) Claim or use any secret or proprietary method, service or technique not previously disclosed to the Board; or

(b) Use any method, service or technique for which there is no adequate basis in research or generally accepted principles of professional practice, except for the purpose of research conducted in accordance with applicable legal and ethical standards.

Sec. 24. 1. *A behavioral health and wellness practitioner:*

(a) Shall limit his or her practice to the areas in which he or she or his or her behavioral health and wellness practitioner supervisor have acquired competence through education, training, supervised experience and ongoing professional development.

(b) Shall not, except in an emergency in which the life or health of a person is in danger, accept, perform or offer to provide:

(1) An independent medical or behavioral health diagnosis;

(2) Psychological, psychoeducational or neurophysiological testing; or

(3) Any professional service:

(I) Which constitutes psychotherapy or for which a license or certificate is otherwise required, if he or she does not hold the appropriate license or certificate; or

(II) Which he or she otherwise knows, or has reason to know, that he or she is not competent to perform.

(c) Shall not engage in conduct in the practice of behavioral health promotion and prevention that demonstrates impaired judgment, integrity or professional responsibility.

(d) Shall maintain competence in the areas in which he or she practices through continuing education, consultation or supervision or other methods consistent with current standards of scientific and professional knowledge.

(e) Shall use every reasonable effort to ensure that all services provided to patients are adequate in degree or scope and conform to the highest professional standards.

(f) Shall emphasize, when practicing behavioral health promotion and prevention:

(1) The functional improvement and wellness outcomes of each patient, which may include, without limitation, the participation of the patient in activities positively impacting his or her health, education, employment, family and community life; and

(2) Effectively reducing the symptoms of the patient.

(g) Shall not render a formal professional opinion with respect to a person who is not a patient of the behavioral health and wellness practitioner, unless the behavioral health and wellness practitioner:

(1) Has had substantial and direct contact with the person in a professional capacity; and

(2) First conducts a formal assessment of the person.

(h) Shall rely upon the direction and expertise of his or her behavioral health and wellness practitioner supervisor in order to guide his or her professional judgment and delivery of services to patients.

(i) Shall promptly notify and consult with his or her behavioral health and wellness practitioner supervisor:

(1) If a patient with a unique or elevated risk of harm requests services from the behavioral health and wellness practitioner;

(2) When the symptoms of a patient fail to improve after the intervention or rendering of services by the behavioral health and wellness practitioner; or

(3) When the clinical needs of a patient exceed the competence, training or scope of practice of the behavioral health and wellness practitioner.

(j) Shall comply with all directives of his or her behavioral health and wellness practitioner supervisor relating to the care of patients and the professional conduct of the behavioral health and wellness practitioner.

(k) Shall, with respect to his or her behavioral health and wellness practitioner supervisor, maintain professional boundaries in a manner consistent with the standards and principles of the profession of his or her behavioral health and wellness practitioner supervisor.

(l) Shall accurately represent to patients his or her credentials and status as a supervised practitioner and disclose the name and occupation of his or her behavioral health and wellness practitioner supervisor upon the request of a patient.

2. As used in this section, “psychotherapy” means any act that does not constitute behavioral health promotion and prevention which is included within:

- (a) The practice of psychiatry or psychiatric nursing;*
- (b) The practice of psychology;*
- (c) The practice of clinical professional counseling, as defined in NRS 641A.065;*
- (d) The practice of marriage and family therapy, as defined in NRS 641A.080; or*
- (e) The practice of clinical social work, as defined in NRS 641B.030.*

Sec. 25. *A behavioral health and wellness practitioner:*

- 1. Must be able to present his or her license to a patient at any time he or she is engaging in the practice of behavioral health promotion and prevention.*
- 2. Shall respond within 30 days after receiving any written communication from the Board and shall make available any relevant record with respect to an inquiry or complaint about his or her professional conduct.*
- 3. Shall notify the Board in writing of a change of address or telephone number within 30 days after the change.*
- 4. Shall not mislead or withhold from a patient, prospective patient or other person who will be responsible for payment of the services of the behavioral health and wellness practitioner information concerning the fee for the professional services of the behavioral health and wellness practitioner.*
- 5. Shall not directly or indirectly offer, give, solicit, receive or agree to receive any fee or other consideration for the referral of a patient.*

Sec. 26. 1. *The Board hereby adopts by reference the provisions set forth in the most recent edition of the Ethical Standards for Behavioral Health and Wellness Practitioners adopted by the Ballmer Institute for Children’s Behavioral Health, unless the Board gives notice that the most recent edition is not suitable for this State pursuant to subsection 2 and*

except to the extent that those provisions conflict with a specific provision of this chapter. In the case of such a conflict, the specific provision of this chapter is controlling. A copy of the publication is available at no cost from the Ballmer Institute for Children’s Behavioral Health on the Internet at <https://childrensbehavioralhealth.uoregon.edu/bwhp-ethics-code> or, if that Internet website ceases to exist, from the Board.

2. If the Ethical Standards for Behavioral Health and Wellness Practitioners adopted by reference in subsection 1 are revised, the Board will review the revision to ensure its suitability for this State. If the Board determines that the revision is not suitable for this State, the Board will hold a public hearing to review its determination within 6 months after the date of publication of the revision and give notice of that hearing. If, after the hearing, the Board does not revise its determination, the Board will give notice within 30 days after the hearing that the revision is not suitable for this State. If the Board does not give such notice, the revision becomes part of the Ethical Standards for Behavioral Health and Wellness Practitioners adopted by reference in subsection 1.

Sec. 27. NAC 641.001 is hereby amended to read as follows:

641.001 As used in this chapter, unless the context otherwise requires, the words and terms defined in NAC ~~641.005~~ **641.007** to 641.014, inclusive, *and sections 2 to 6, inclusive, of this regulation*, have the meanings ascribed to them in those sections.

Sec. 28. NAC 641.019 is hereby amended to read as follows:

641.019 1. Except as otherwise provided in NRS 641.228 and subsection 3, the Board will charge and collect the following fees:

For an application for licensure..... \$150

For an application for registration as a psychological trainee or a provisional license as a psychological assistant or psychological intern	150
For the state examination for licensure <i>as a psychologist</i> administered by the Board pursuant to NAC 641.112	Actual costs to the Board plus \$100
<i>For the state examination for licensure as a behavioral health and wellness practitioner administered by the Board pursuant to section 12 of this regulation.....</i>	<i>Actual costs to the Board</i>
For the issuance of an initial license <i>as a psychologist</i>	25
For the biennial renewal or reinstatement of a license as a psychologist.....	650
For the placement of a license <i>as a psychologist</i> on inactive status	100
For the biennial renewal of a license <i>as a psychologist</i> on inactive status	100
For the issuance of an initial provisional license of a psychological assistant	150
For the issuance of an initial provisional license of a psychological intern.....	75
For the initial registration of a psychological trainee.....	30
For the renewal of a provisional license of a psychological assistant.....	150
For the renewal of a provisional license of a psychological intern.....	75
For the renewal of a registration of a psychological trainee	30
For the restoration to active status of a license as a psychologist on inactive status	250
<i>For the issuance of an initial license as a behavioral health and wellness</i>	<i>200</i>

practitioner.....

For the triennial renewal or reinstatement of a license as a behavioral

health and wellness practitioner 200

For the registration of a nonresident consultant 100

For reproduction and mailing of material for an application 30

For a change of name on a license 30

For a duplicate license..... 30

For copies of the provisions of NRS relating to the practice of psychology
and the rules and regulations adopted by the Board..... 30

For a letter of good standing 20

For the review and approval of a course or program of continuing
education..... 30

2. The Board will annually determine the actual costs to the Board for the state

~~examination~~ *examinations* administered by the Board pursuant to NAC 641.112 *and section 12 of this regulation* for purposes of determining the *applicable* fee charged and collected pursuant to subsection 1.

3. If an active member of, or the spouse of an active member of, the Armed Forces of the United States, a veteran or the surviving spouse of a veteran submits an application for a license *as a psychologist* by endorsement pursuant to NRS 641.196, the Board will charge and collect a fee of \$62.50 for the issuance of an initial license ~~+~~ *as a psychologist*.

4. In accordance with NRS 353C.115 and NAC 353C.400, the Board will charge and collect from any person whose check or other method of payment is returned to the Board or otherwise

dishonored because the person had insufficient money or credit with the drawee or financial institution to pay the check or other method of payment or because the person stopped payment on the check or other method of payment a fee of \$25 or such other amount as may subsequently be required by NRS 353C.115 and NAC 353C.400.

5. As used in this section, “veteran” has the meaning ascribed to it in NRS 417.005.

Sec. 29. NAC 641.136 is hereby amended to read as follows:

641.136 1. To renew his or her license, a psychologist must certify to the Board that during the 2 years immediately preceding the date he or she submits an application for renewal, he or she has completed 30 hours of continuing education approved by the Board, which must include:

(a) At least 6 hours of instruction in scientific and professional ethics and standards, and common areas of professional misconduct;

(b) At least 2 hours of instruction in evidence-based suicide prevention and awareness;

(c) At least 6 hours of instruction relating to cultural competency and diversity, equity and inclusion;

(d) Not more than 15 hours of instruction from an approved home study course; and

(e) Not more than 15 hours of approved continuing professional development.

2. Except as otherwise provided in subsection 4, the Board will accept the following types of continuing education courses or programs towards satisfaction of the continuing education required by subsection 1:

(a) Formally organized workshops, seminars or classes which maintain an attendance roster and are conducted by or under the auspices of an accredited institution of higher education offering graduate instruction.

(b) Workshops, seminars or classes which maintain an attendance roster and are certified or recognized by a state, national or international accrediting agency, including, but not limited to:

- (1) The American Psychological Association;
- (2) The American Psychiatric Association;
- (3) The American Medical Association;
- (4) The American Association for Marriage and Family Therapy;
- (5) The American Counseling Association; *or*
- (6) ~~The International Congress of Psychology; or~~
~~(7) The National Association of Social Workers.~~

(c) Other workshops, classes, seminars and training sessions in psychology or a closely related discipline which have a formal curriculum and attendance roster and receive approval by the Board.

(d) Home study courses in psychology or a closely related discipline that are approved by the Board.

3. The Board will accept towards satisfaction of the continuing education required by paragraph (e) of subsection 1:

- (a) Not more than 3 hours of continuing education credit in each of the following areas:
 - (1) One hour of continuing education credit for each hour of peer consultation;
 - (2) One hour of continuing education credit for each hour of service on the governing board, committee, editorial board, scientific grant review team or in a position of leadership of a psychological association; and

(3) Three hours of continuing education credit for each full day of attendance at a conference or convention related to psychology, where continuing education credits are not earned or offered for attending the conference or convention.

(b) Not more than 6 hours of continuing education credit in each of the following areas:

(1) A number of hours of continuing education credit equivalent to the number of course credits earned in completing a doctoral-level psychology course;

(2) One hour of continuing education credit for teaching a continuing education course that is approved by the Board;

(3) Six hours of continuing education credit for teaching a semester of a graduate-level applied psychology course that is accredited by the American Psychological Association, including preparation of materials for such a course; and

(4) Six hours of continuing education credit for authoring a book, a chapter in a book or a peer-reviewed manuscript in the field of psychology that is accepted for publishing, for each book, chapter or manuscript.

4. Before a licensee may receive credit for continuing education for a course in scientific and professional ethics and standards and common areas of professional misconduct, for a course in evidence-based suicide prevention and awareness, or for a course relating to cultural competency and diversity, equity and inclusion, the licensee must submit information concerning the course to the Board for approval of the course unless the Board has previously approved the course. The Board will make available at its office a list of courses and programs that are currently approved by the Board.

Sec. 30. NAC 641.1507 is hereby amended to read as follows:

641.1507 ~~“Supervisor”~~ *As used in NAC 641.1507 to 641.168, inclusive, unless the context otherwise requires, “supervisor”* means a psychologist who supervises a psychological assistant, psychological intern or psychological trainee pursuant to this chapter, whether or not he or she seeks reimbursement under the State Plan for Medicaid for the services rendered under the authorized scope of practice of the psychological assistant, psychological intern or psychological trainee pursuant to NRS 422.27239.

Sec. 31. NAC 641.200 is hereby amended to read as follows:

641.200 1. The provisions of NAC 641.200 to 641.250, inclusive ~~+~~, *and sections 21 to 26, inclusive, of this regulation:*

(a) Apply to the conduct of any licensee or any applicant for licensure pursuant to this chapter and chapter 641 of NRS, including conduct during any period of education, training or employment required for licensure.

(b) Constitute the standards of conduct which a psychologist *or behavioral health and wellness practitioner, as applicable*, shall follow in the provision of services.

2. A violation of the provisions of NAC 641.200 to 641.250, inclusive, *and sections 21 to 26, inclusive, of this regulation* constitutes unprofessional conduct and is a ground for disciplinary action or the denial of an application for an initial license or the renewal of a license.

Sec. 32. NAC 641.206 is hereby amended to read as follows:

641.206 If a psychologist *or behavioral health and wellness practitioner* is treating a child or protected person, the parent or legal guardian of the child or protected person is the patient or client for the purpose of making decisions concerning treatment. The child or protected person who is receiving services from the psychologist *or behavioral health and wellness practitioner* is also the patient or client for:

1. Issues directly affecting the physical or emotional safety of the child or protected person, including, without limitation, sexual relationships or other exploitive dual relationships.

2. Issues which the parent or legal guardian has specifically agreed, before the child or protected person receives professional services, must be reserved to the child or protected person, including, without limitation, confidential communications between the psychologist *or behavioral health and wellness practitioner* and the child or protected person during the course of the professional relationship.

Sec. 33. NAC 641.224 is hereby amended to read as follows:

641.224 1. If a psychologist *or behavioral health and wellness practitioner* provides services to an organization, information he or she obtains in the course of providing the services is confidential, including any personal information concerning a person in the organization if the information was properly obtained within the scope of his or her professional contract with the organization. Personal information concerning a person in the organization is subject to the confidential control of the organization unless the person who disclosed the information had a reasonable expectation that the information was disclosed pursuant to a separate professional relationship with the psychologist *or behavioral health and wellness practitioner* and would not be disclosed to the organization.

2. During the course of a professional relationship with a patient or client and after the relationship is terminated, a psychologist *or behavioral health and wellness practitioner* shall protect all confidential information obtained in the course of his or her practice, teaching or research, or in the performance of any other services related to his or her profession. Except as otherwise provided in this section, a psychologist *or behavioral health and wellness practitioner*

may disclose confidential information only if he or she obtains the informed written consent of the patient or client.

3. A psychologist *or behavioral health and wellness practitioner* may disclose confidential information without the informed written consent of a patient or client if the psychologist *or behavioral health and wellness practitioner* believes that disclosure of the information is necessary to protect against a clear and substantial risk of imminent serious harm by the patient or client to the patient or client or another person and:

(a) The disclosure is limited to such persons and information as are consistent with the standards of the profession of psychology *or behavioral health promotion and prevention, as applicable*, in addressing such problems.

(b) If the patient or client is an organization, the psychologist *or behavioral health and wellness practitioner* has made a reasonable but unsuccessful attempt to correct the problems within the organization.

4. A psychologist *or behavioral health and wellness practitioner* may disclose confidential information without the informed written consent of a patient or client if:

(a) A member of the judiciary, or a court magistrate or administrator to whom authority has been lawfully delegated, orders the disclosure; or

(b) Disclosure is required by a state or federal law or regulation, including a law or regulation that requires a psychologist *or behavioral health and wellness practitioner* to report the abuse of a child or elderly person.

5. If a psychologist *or behavioral health and wellness practitioner* renders services to more than one person, including services rendered to an organization, family, couple, group, or a child and a parent, the psychologist *or behavioral health and wellness practitioner* shall, before he or

she begins to render the services, explain to each person the relevant limitations on confidentiality during the course of the professional relationship. If appropriate, the psychologist *or behavioral health and wellness practitioner* shall grant to each person an opportunity to discuss and accept the limitations on confidentiality that will apply.

6. If a patient or client is a child or has a legal guardian, a psychologist *or behavioral health and wellness practitioner* shall, before he or she renders services, inform the patient or client to the extent that the patient or client can understand, of any legal limitations on the confidentiality of communications with the psychologist ~~H~~ *or behavioral health and wellness practitioner*.

7. With the written consent of a patient, a psychologist *or behavioral health and wellness practitioner* shall provide in a timely manner to another responsible professional who is treating the patient or client any information which is important for the professional to know in making decisions concerning the ongoing diagnosis and treatment of the patient or client.

8. If a psychologist *or behavioral health and wellness practitioner* uses the case history of a patient or client in his or her teaching, research or published reports, he or she shall exercise reasonable care to ensure that all confidential information is appropriately disguised to prevent the identification of the patient or client.

9. A psychologist *or behavioral health and wellness practitioner* shall:

(a) Store and dispose of any written, electronic or other records in a manner which ensures the confidentiality of the content of the records;

(b) Limit access to the records of his or her patients or clients to protect the confidentiality of the information contained in the records;

(c) Ensure that all persons working under his or her authority comply with the requirements of this section to protect the confidentiality of each patient or client; and

(d) Obtain the informed written consent of a patient or client before the psychologist *or behavioral health and wellness practitioner* electronically records or allows another person to observe a diagnostic interview or therapeutic session with the patient or client.

10. As used in this section, “confidential information” means information disclosed by a patient or client to a psychologist *or behavioral health and wellness practitioner* during the course of a professional relationship, or otherwise obtained by the psychologist *or behavioral health and wellness practitioner* during the course of the relationship, if there is a reasonable expectation that because of the relationship between the patient or client and the psychologist *or behavioral health and wellness practitioner* or the circumstances under which the information was obtained, the information will not be disclosed by the psychologist *or behavioral health and wellness practitioner* without the informed written consent of the patient or client.

Sec. 34. NAC 641.229 is hereby amended to read as follows:

641.229 1. A psychologist *or behavioral health and wellness practitioner* shall not begin or continue a professional relationship with a patient or client if the psychologist *or behavioral health and wellness practitioner* is impaired, or has received notification from the Board that the Board reasonably suspects him or her to be impaired, because of mental, emotional, physiological, pharmacological or substance misuse problems. If such a problem develops during the course of a professional relationship, the psychologist *or behavioral health and wellness practitioner* shall:

- (a) Terminate the relationship;
- (b) Notify the patient or client in writing of the termination; and
- (c) Assist the patient or client in obtaining services from another professional.

2. A psychologist *or behavioral health and wellness practitioner* shall not begin or continue a professional relationship with a patient or client if the objectivity or competency of the psychologist *or behavioral health and wellness practitioner* is impaired, or if the psychologist *or behavioral health and wellness practitioner* has received notification from the Board that the Board reasonably suspects his or her objectivity or competency to be impaired, because the psychologist *or behavioral health and wellness practitioner* has or had a family, social, sexual, emotional, financial, supervisory, political, administrative or legal relationship with the patient or client or a person associated with or related to the patient or client.

3. If a psychologist *or behavioral health and wellness practitioner* has rendered professional services to a person, the psychologist *or behavioral health and wellness practitioner* shall not:

(a) Engage in any verbal or physical behavior with the person which is sexually seductive, demeaning or harassing;

(b) Engage in sexual contact with the person; or

(c) Enter into a financial or other potentially exploitive relationship with the person, ↪ for at least 2 years after the termination of the professional relationship, or for an indefinite time if the person is clearly vulnerable to exploitive influence by the psychologist *or behavioral health and wellness practitioner* because of an emotional or cognitive disorder.

Sec. 35. NAC 641.239 is hereby amended to read as follows:

641.239 1. A psychologist *or behavioral health and wellness practitioner* shall not directly or by implication misrepresent:

(a) His or her professional qualifications, including the education he or she has received, the experience he or she has acquired or the areas of his or her professional competence.

(b) His or her affiliations or the purposes or characteristics of the institutions and associations with which he or she is associated.

2. A psychologist *or behavioral health and wellness practitioner* shall correct any other person who the psychologist *or behavioral health and wellness practitioner* knows has misrepresented the professional qualifications or affiliations of the psychologist ~~†~~ *or behavioral health and wellness practitioner*.

3. A psychologist *or behavioral health and wellness practitioner* shall not include false or misleading information in his or her public statements concerning the professional services he or she offers.

4. A psychologist *or behavioral health and wellness practitioner* shall not guarantee that satisfaction or a cure will result from the performance of his or her professional services.

5. A psychologist *or behavioral health and wellness practitioner* shall not associate with or permit his or her name to be associated with any service or product in a manner which misrepresents:

- (a) The service or product;
- (b) The degree of his or her responsibility for the service or product; or
- (c) The nature of his or her association with the service or product.

6. A psychologist *or behavioral health and wellness practitioner* shall not distort, misuse or suppress any psychological finding, and shall attempt to prevent, using all reasonable means, the distortion, misuse or suppression of any psychological finding by any institution of which he or she is an employee.

Sec. 36. NAC 641.241 is hereby amended to read as follows:

641.241 1. A psychologist *or behavioral health and wellness practitioner* shall not aid or abet another person in misrepresenting the person's professional credentials or illegally engaging in the practice of psychology **H** *or behavioral health promotion and prevention, as applicable.*

2. A psychologist *or behavioral health and wellness practitioner* shall not delegate any of his or her professional responsibilities to a person he or she knows, or has reason to know, is not qualified because of a lack of adequate education, training or experience.

3. If a psychologist *or behavioral health and wellness practitioner* has substantial reason to believe that another person has violated any provision of this chapter or chapter 641 of NRS, he or she shall inform the Board in writing of the violation, except that if the psychologist *or behavioral health and wellness practitioner* has knowledge of the violation because of his or her professional relationship with a patient or client, he or she may report the violation only if he or she has the informed written consent of the patient or client. The provisions of NAC 641.200 to 641.250, inclusive, *and sections 21 to 26, inclusive, of this regulation* do not relieve a psychologist *or behavioral health and wellness practitioner* of the duty to file any report otherwise required by state or federal law or regulation.

Sec. 37. NAC 641.245 is hereby amended to read as follows:

641.245 1. A psychologist *or behavioral health and wellness practitioner* shall not violate any law or regulation which governs the practice of psychology **H** *or behavioral health promotion and prevention, as applicable.*

2. A psychologist *or behavioral health and wellness practitioner* shall not use fraud, misrepresentation or deception:

(a) To obtain a license or pass an examination required for licensure;

(b) To assist another person in obtaining a license or passing an examination required for licensure;

(c) In billing a patient or client or other person who is responsible for payment;

(d) In providing his or her professional services;

(e) In reporting the results of any evaluation or service related to the practice of psychology

~~†~~ *or behavioral health promotion and prevention, as applicable;* or

(f) To conduct any other activity related to the practice of psychology ~~†~~ *or behavioral health promotion and prevention, as applicable.*

3. A psychologist *or behavioral health and wellness practitioner* shall not willfully make or file any false report, fail to file any report required by law or by the Board, willfully impede or obstruct any such filing, or induce another person to engage in any act prohibited by this subsection.

4. A psychologist *or behavioral health and wellness practitioner* shall not violate any condition, limitation or term of probation imposed upon him or her by the Board.

5. A psychologist *or behavioral health and wellness practitioner* shall not:

(a) Fail to make timely payments for the support of one or more children pursuant to a court order; or

(b) Fail to comply with any warrant or subpoena relating to a proceeding to determine the paternity of a child or to establish or enforce an obligation for the support of one or more children.

Sec. 38. NAC 641.1506 and 641.15065 are hereby repealed.

TEXT OF REPEALED SECTION

641.1506 Definitions. As used in NAC 641.1506 to 641.168, inclusive, the words and terms defined in NAC 641.15065 and 641.1507 have the meanings ascribed to them in those sections.

641.15065 “Face-to-face” defined. “Face-to-face” means an in-person interaction or an interaction through the use of audiovisual communication technology, not including standard telephone, facsimile or electronic mail.