Board of Medical Examiners

Nevada Revised Statutes (NRS) Chapter 630

Board members (NRS 630.050 and 630.060)—The Board consists of nine members appointed by the Governor, as follows:

- Six members must be licensed to practice medicine in Nevada, engaged in the practice, and residents of Nevada for at least five years preceding appointment;
- One member must be a Nevada resident who represents the interests of persons or agencies that provide health care to indigent, uninsured, or low-income patients; and
- Two members must be Nevada residents who are not licensed to practice any healing arts, are not relatives of such a licensed person, or are not actively engaged in the administration of certain facilities pursuant to statute.

All members must be selected without regard for political beliefs.

A member may be removed by the Governor for good cause. (NRS 630.070).

Powers and duties of the Board—The Board:

- May appoint advisory members who meet the qualifications of Board members, provided that advisory members may assist in the investigations of complaints and serve on hearing panels;
- Shall enforce the provisions of Chapter 630 ("Physicians, Physician Assistants, Medical Assistants, Perfusionists and Practitioners of Respiratory Care") of NRS;
- Shall establish standards for licensure, conduct examinations, and investigate applicants;
- May adopt regulations necessary to carry out the provisions of Chapter 630 of NRS;
- Shall notify the Division of Public and Behavioral Health of the Department of Health and Human Services of certain sentinel events;
- May hold hearings, conduct investigations, and discipline licensees;
- Shall issue licenses to qualified applicants, including license by endorsement to qualified individuals;
- Shall require continuing education and other training;

- Shall require license holders to submit certain reports, including any action for malpractice; and
- May inspect the premises of license holders.

Operations of the Board—The Board:

- Shall elect officers from among its members;
- Shall employ an executive director and other employees, including hearing officers, who are restricted from acting in any other capacity for the Board or from subsequent employment with the Board for a designated period;
- May maintain offices in as many locations as it finds necessary;
- Shall receive salary, per diem, and travel expenses; and
- Shall maintain a website.

Background

Legislation:

- 1899—Assembly Bill 29 (Chapter 73, *Statutes of Nevada*)—Created the State Board of Medical Examiners, consisting of five practicing physicians, appointed by the Governor; members are prohibited from receiving compensation for their service; and are authorized to issue certificates and determine whether a college or institution is reputable;
- 1905—Senate Bill 40 (Chapter 63, *Statutes of Nevada*)—Provided that practicing medicine, surgery, or obstetrics without first obtaining a license issued by the Board is unlawful;
- 1949—S.B. 111 (Chapter 169, *Statutes of Nevada*)—Provided the Board with more authority and procedures to investigate unprofessional conduct;
- 1977—A.B. 264 (Chapter 163, *Statutes of Nevada*)—Increased the Board to seven members by adding two members who are not licensed practicing health care providers and are not actively engaged in administration of any health care facility;
- 1985—S.B. 64 (Chapter 667, *Statutes of Nevada*)—Increased the Board to nine members and provided that one additional member must be licensed to practice medicine;

- 2003—S.B. 310 (Chapter 213, *Statutes of Nevada*)—Revised Board membership to require that one member must represent the interests of persons or agencies that provide health care to indigent, uninsured, or low-income patients;
- 2003—S.B. 332 (Chapter 334, Statutes of Nevada)—Authorized the Board to waive certain requirements for licensure to practice medicine if the Governor declares a state of critical need for certain medical specialties; and
- 2009—S.B. 8 (Chapter 251, *Statutes of Nevada*)—Required Board members to file acknowledgement of ethical standards as provided in NRS 281A.500.

Legislative history—The following legislative histories have been compiled and are available on the website of the Research Library:

- 1985—S.B. 64—Sponsored by the Senate Committee on Commerce and Labor; and
- 2003—<u>S.B. 332</u>—Sponsored by Senator Mark Amodei.

In addition, the bill pages for the following legislation are available on the Legislature's website:

- 2003—S.B. 310—Sponsored by Senator Maggie Carlton;
- 2003—S.B. 332—Sponsored by Senator Mark Amodei; and
- 2009—<u>S.B.8</u>—Sponsored by the Senate Committee on Commerce and Labor on behalf of the Legislative Committee on Health Care.

Reports to the Legislature—A biennial report to the Governor and the Legislature is required pursuant to NRS 630.130. The report is to include disciplinary actions taken by the Board, certain malpractice information as provided, and information relating to the number and types of surgeries and the occurrence of sentinel events arising from such surgeries.

NRS 630.127 provides the Legislative Commission shall obtain regular performance audits of the Board at eight-year intervals or whenever the Legislative Commission shall order an audit. The results must be submitted to the Commission and to any legislator who requests a copy. The Board must pay all costs related to the performance audit.

NRS 622.100 requires a report to the Director of the Legislative Counsel Bureau (LCB) including information relating to licensing and disciplinary actions. The Board of Medical Examiners issues five license types.

Records held by the LCB—The following are recent publications held by the Research Library:

- Performance Audit of the Nevada State Board of Medical Examiners: Report to the Legislative Commission (book), Federation of State Medical Boards, 2003, 2012;
- *Newsletter*, Board of Medical Examiners (periodical) 2001 through 2007, 2009 to current;
- Reflection, Recollection, and Change: The Nevada State Board of Medical Examiners (book), University of Nevada, Reno, 1996;
- Report on In-Office Surgeries Using Sedation for the Calendar Year* (series), Board of Medical Examiners, 2006, 2007;
- Biennial Report of Budget Summary, Issuance of Licenses and Disciplinary Actions (series), Board of Medical Examiners, Fiscal Years 2000–2001 to 2005–2006;
- Biennial Report of Disciplinary Actions Taken Against Physicians for Malpractice or Negligence (series), Board of Medical Examiners, various from 2000–2001 to 2013–2014; and
- Annual Report (series), Board of Medical Examiners, 1998, 1999, 2001, 2006, 2008, and 2010.

Current contact—Edward O. Cousineau, Executive Director

Website—http://medboard.nv.gov/

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BOARD OF MEDICAL EXAMINERS

FEDERAL AND OTHER CASES.

The members of the board of medical examiners are functionally comparable to judges and prosecutors and, therefore, are entitled to absolute immunity for their quasi-judicial acts. The members of the board of medical examiners (see NRS 630.050 et seq.) are functionally comparable to judges and prosecutors and, therefore, are entitled to absolute immunity for their quasi-judicial acts (including signing disciplinary complaints, filing charges, holding hearings, taking evidence and adjudicating) because: (1) in view of the public interest in ensuring quality health care, there is a strong need to make certain that the members of the board can perform their disciplinary functions (see NRS 630.298 et seq.) without the threat of harassment or intimidation; (2) adequate procedural safeguards exist (see NRS 233B.121, 233B.122, 233B.123, 630.311, 630.339 and 630.356) that reduce the need for private actions for damages as a means of controlling unconstitutional conduct; (3) the board members are sufficiently insulated from political influence (see NRS 630.050 et seq.); and (4) the disciplinary process is adversary in nature (see NRS 233B.121) and errors made by the board are correctable on appeal (see NRS 630.356). Mishler v. Clift, 191 F.3d 998 (9th Cir. 1999), cited, Marvin v. Fitch, 126 Nev. 168, at 174, 232 P.3d 425 (2010)

The board was not entitled to absolute immunity for a ministerial act. Where the Nevada board of medical examiners (see NRS 630.050 et seq.) failed for 7 months to respond to a request from the Ohio board of medical examiners for a letter of verification regarding the plaintiff's standing to practice medicine in Nevada, during which time there were no disciplinary charges pending against the plaintiff, and then sent a letter stating that the plaintiff was under investigation in Nevada, the act of responding to the request was not entitled to absolute immunity because it was a ministerial act rather than a quasi-judicial act. Mishler v. Clift, 191 F.3d 998 (9th Cir. 1999)

Organization and Administration

NRS 630.050 Appointment of members: Number; limitation on consecutive terms.

- 1. The Board of Medical Examiners consists of nine members appointed by the Governor.
- 2. No person may be appointed as a member of the Board to serve for more than two consecutive full terms, but a person may be reappointed after the lapse of 4 years.

[Part 2:169:1949; 1943 NCL § 4107.02]—(NRS A 1977, 307; 1985, 2225)

NRS 630.060 Qualifications of members.

- 1. Six members of the Board must be persons who are licensed to practice medicine in this State, are actually engaged in the practice of medicine in this State and have resided and practiced medicine in this State for at least 5 years preceding their respective appointments.
- 2. One member of the Board must be a person who has resided in this State for at least 5 years and who represents the interests of persons or agencies that regularly provide health care to patients who are indigent, uninsured or unable to afford health care. This member must not be licensed under the provisions of this chapter.
- 3. The remaining two members of the Board must be persons who have resided in this State for at least 5 years and who:
 - (a) Are not licensed in any state to practice any healing art;
- (b) Are not the spouse or the parent or child, by blood, marriage or adoption, of a person licensed in any state to practice any healing art;
- (c) Are not actively engaged in the administration of any facility for the dependent as defined in <u>chapter 449</u> of NRS, medical facility or medical school; and
- (d) Do not have a pecuniary interest in any matter pertaining to the healing arts, except as a patient or potential patient.
 - 4. The members of the Board must be selected without regard to their individual political beliefs.

[Part 2:169:1949; 1943 NCL § 4107.02]—(NRS A 1973, 506; 1977, 307; 1985, 1766, 2226; 2003, 1189, 3431; 2003, 20th Special Session, 265)

NRS CROSS REFERENCES.

Residency requirements, qualifications of representatives of general public, NRS 232A.020, 622.205

NRS 630.070 Terms, removal and replacement of members.

- 1. After the initial terms, the term of office of each member of the Board is 4 years. If a person is appointed to fill the unexpired term of a member which is more than 2 years, the person shall be deemed to have served a full term
- 2. A member of the Board may be removed by the Governor for good cause, and the Governor shall appoint a person qualified under this chapter to replace the member for the remainder of the unexpired term.

[Part 2:169:1949; 1943 NCL § 4107.02]—(NRS A 1973, 506; 1977, 308; 1981, 69; 1985, 2226)

NRS CROSS REFERENCES.

Vacancies in office, NRS 232A.020

NRS 630.075 Appointment of physician or member of public to serve as advisory member of Board. The Board may, by majority vote, select physicians and members of the public, who must meet the same qualifications as required for members of the Board, to serve as advisory members of the Board. One or more advisory members may be designated by the Board to assist a committee of its members in an investigation as provided in NRS 630.311 but may not vote on any matter before the committee. Advisory members may also serve as members of the panel selected to hear charges as provided in NRS 630.339 and may vote on any recommendation made by the panel to the Board.

(Added to NRS by 1985, 2221)

NRS 630.080 Oath or affirmation of office. Before entering upon the duties of his or her office, each member of the Board shall take:

- 1. The constitutional oath or affirmation of office; and
- 2. An oath or affirmation that the member is legally qualified to serve on the Board. [Part 3:169:1949; 1943 NCL § 4107.03]—(NRS A 1973, 506; 1977, 308; 1985, 2226)

NRS CROSS REFERENCES.

Text of oath, Const. Art. 15 § 2

NRS 630.085 Acknowledgment of statutory ethical standards.

- 1. Each member of the Board shall comply with the provisions of NRS 281A.500.
- 2. Each member of the Board shall provide a copy of the acknowledgment filed pursuant to NRS 281A.500 to the Executive Director of the Board, and the Executive Director shall retain an acknowledgment provided pursuant to this section for 6 years after the date on which the acknowledgment was provided to the Executive Director.

(Added to NRS by 2009, 1017)

NRS 630.090 Officers.

- 1. The Board shall elect from its members a President, a Vice President and a Secretary-Treasurer. The officers of the Board shall hold their respective offices during its pleasure.
 - 2. The Secretary-Treasurer shall receive a salary, the amount of which shall be determined by the Board.

[Part 3:169:1949; 1943 NCL § 4107.03] + [Part 5:169:1949; 1943 NCL § 4107.05] + [Part 6:169:1949; 1943 NCL § 4107.06]—(NRS A 1985, 2227)

NRS 630.100 Meetings: Frequency; requirements concerning telephone or video conference; quorum.

1. The Board shall meet at least twice annually and may meet at other times on the call of the President or a majority of its members.

2. Meetings of the Board must be held at a location at which members of the general public may testify via telephone or video conference between Las Vegas and Carson City or Reno.

3. A majority of the Board or of any committee or panel appointed by the Board constitutes a quorum. If there is a quorum, a vote of the majority of the members present is all that is necessary to transact any business before the Board or the committee or panel appointed by the Board.

[4:169:1949; 1943 NCL § 4107.04] + [Part 7:169:1949; 1943 NCL § 4107.07]—(NRS A 1973, 506; 1985, 2227; 2003, 3431)

NRS CROSS REFERENCES.

Meetings of public agencies, NRS ch. 241, 622.320

NEVADA CASES

Legislature intended to obviate inconvenience applicants might suffer by being unable to obtain temporary certificates between regular meetings of board. Although the legislature was considering the public good rather than the convenience of individuals in the passage of ch. 63, Stats. 1905 (cf. NRS ch. 630), regulating the practice of medicine, by sec. 4 of such chapter (cf. NRS 630.100), authorizing special sessions of the board of medical examiners, it also intended to obviate any inconvenience which applicants for licenses might suffer from being unable to obtain temporary certificates between regular meetings of the board. State ex rel. Weyerhorst v. Lee, 28 Nev. 380, 82 Pac. 229 (1905)

NRS 630.103 Executive Director of Board: Employment and discharge; serves as chief administrative officer; level of compensation.

- 1. The Board shall employ a person as the Executive Director of the Board.
- 2. The Executive Director serves as the chief administrative officer of the Board at a level of compensation set by the Board.
 - 3. The Executive Director is an at-will employee who serves at the pleasure of the Board. (Added to NRS by 2003, 3426; A 2005, 2513)

NRS CROSS REFERENCES.

Contracts for services to be in writing and approved, NRS 284.013 Executive Director, conditions and limitations of employment, NRS 622.220

NRS 630.106 Other employees of Board: Employment and discharge; conditions and limitations regarding hearing officers.

- 1. The Board may employ hearing officers, experts, administrators, attorneys, investigators, consultants and clerical personnel necessary to the discharge of its duties.
- 2. Each employee of the Board is an at-will employee who serves at the pleasure of the Board. The Board may discharge an employee of the Board for any reason that does not violate public policy, including, without limitation, making a false representation to the Board.
- 3. A hearing officer employed by the Board shall not act in any other capacity for the Board or occupy any other position of employment with the Board, and the Board shall not assign the hearing officer any duties which are unrelated to the duties of a hearing officer.
- 4. If a person resigns his or her position as a hearing officer or the Board terminates the person from his or her position as a hearing officer, the Board may not rehire the person in any position of employment with the Board for a period of 2 years following the date of the resignation or termination. The provisions of this subsection do not give a person any right to be rehired by the Board and do not permit the Board to rehire a person who is prohibited from being employed by the Board pursuant to any other provision of law.

(Added to NRS by 2003, 3426)

NRS CROSS REFERENCES.

Contracts for services to be in writing and approved, NRS 284.013

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Employment of immediate relatives, conditions and limitations, NRS 622.210-622.230

NRS 630.110 Salary of members; per diem allowance and travel expenses of members and employees; deposit of money received by Board.

- 1. Out of the money coming into the possession of the Board, each member and advisory member of the Board is entitled to receive:
- (a) A salary of not more than \$150 per day, as fixed by the Board, while engaged in the business of the Board; and
- (b) A per diem allowance and travel expenses at a rate fixed by the Board, while engaged in the business of the Board. The rate must not exceed the rate provided for state officers and employees generally.
- 2. While engaged in the business of the Board, each employee of the Board is entitled to receive a per diem allowance and travel expenses at a rate fixed by the Board. The rate must not exceed the rate provided for state officers and employees generally.
- 3. Expenses of the Board and the expenses and salaries of its members and employees must be paid from the fees received by the Board pursuant to the provisions of this chapter, and no part of the salaries or expenses of the Board may be paid out of the State General Fund or from the penalties imposed by the Board pursuant to this chapter.
 - 4. All money received by the Board from:
- (a) Fees must be deposited in financial institutions in this State that are federally insured or insured by a private insurer pursuant to <u>NRS 678.755</u>, invested in treasury bills or notes of the United States, deposited in institutions in this State whose business is the making of investments, or invested as authorized by <u>NRS 355.140</u>.
 - (b) Penalties must be deposited with the State Treasurer for credit to the State General Fund.

[Part 6:169:1949; 1943 NCL § 4107.06]—(NRS A 1963, 149; 1973, 507; 1975, 303; 1981, 1992; 1985, 2227; 1989, 1696; 1997, 680; 1999, 1530; 2007, 2943)

NRS 630.120 Seal; licenses to bear seal and signatures.

- 1. The Board shall procure a seal.
- 2. All licenses issued to physicians, perfusionists, physician assistants and practitioners of respiratory care must bear the seal of the Board and the signatures of its President and Secretary-Treasurer.

[Part 5:169:1949; 1943 NCL § 4107.05]—(NRS A 1985, 2227; 1987, 192; 1997, 680; 2001, 761; 2009, 2948)

NRS 630.123 Fiscal year. The Board shall operate on the basis of a fiscal year commencing on January 1 and terminating on December 31.

(Added to NRS by 1963, 149; A 2009, 2948)

NRS 630.125 Offices. The Board may maintain offices in as many localities in the State as it finds necessary to carry out the provisions of this chapter.

(Added to NRS by 1963, 149; A 1985, 2227; 2003, 3431)

NRS 630.127 Performance audits of Board.

1. In addition to any other audits required of the Board by law, the Legislative Commission shall issue to the Federation of State Medical Boards of the United States, Inc., a request for proposal to conduct regular performance audits of the Board. After considering the response to the request for proposal, if the Legislative Commission finds that the Federation of State Medical Boards of the United States, Inc., has the ability to conduct fair and impartial performance audits of the Board, the Legislative Commission shall engage the services of the Federation of State Medical Boards of the United States, Inc., to conduct regular performance audits of the Board. If the Legislative

Commission finds that the Federation of State Medical Boards of the United States, Inc., does not have the ability to conduct fair and impartial performance audits of the Board or is otherwise unable to conduct such performance audits, the Legislative Commission shall direct the Audit Division of the Legislative Counsel Bureau to conduct regular performance audits of the Board.

- 2. The initial performance audit of the Board must be commenced before October 1, 2003. After the initial performance audit is completed, additional performance audits must be conducted:
 - (a) Once every 8 years, for the preceding 8-year period; or
- (b) Whenever ordered by the Legislative Commission, for the period since the last performance audit was conducted pursuant to this section.
- 3. A written report of the results of the initial performance audit must be submitted to the Secretary of the Legislative Commission not later than 60 days after the date that the initial performance audit is commenced. A written report of the results of each subsequent performance audit must be submitted to the Secretary of the Legislative Commission as soon as practicable after the date that the performance audit is commenced.
- 4. Upon receipt of the written report of the results of each performance audit, the Secretary of the Legislative Commission shall:
- (a) Distribute the report to the members of the Legislative Commission and to any other Legislator who requests a copy of the report; and
 - (b) Not later than 30 days after receipt of the report, make the report available to the public.
 - 5. The Board shall pay all costs related to each performance audit conducted pursuant to this section.
 - 6. Any person who conducts a performance audit pursuant to this section:
 - (a) Is directly responsible to the Legislative Commission;
 - (b) Must be sufficiently qualified to conduct the performance audit; and
- (c) Must never have conducted an audit of the Board pursuant to <u>NRS 218G.400</u> or have been affiliated, in any way, with a person who has conducted an audit of the Board pursuant to <u>NRS 218G.400</u>.
- 7. Each performance audit conducted pursuant to this section must include, without limitation, a comprehensive review and evaluation of:
- (a) The methodology and efficiency of the Board in responding to complaints filed by the public against a licensee;
- (b) The methodology and efficiency of the Board in responding to complaints filed by a licensee against another licensee;
- (c) The methodology and efficiency of the Board in conducting investigations of licensees who have had two or more malpractice claims filed against them within a period of 12 months;
- (d) The methodology and efficiency of the Board in conducting investigations of licensees who have been subject to one or more peer review actions at a medical facility that resulted in the licensee losing professional privileges at the medical facility for more than 30 days within a period of 12 months;
- (e) The methodology and efficiency of the Board in taking preventative steps or progressive actions to remedy or deter any unprofessional conduct by a licensee before such conduct results in a violation under this chapter that warrants disciplinary action; and
- (f) The managerial and administrative efficiency of the Board in using the fees that it collects pursuant to this chapter.

(Added to NRS by 2003, 3428)

General Powers and Duties

NRS 630.130 Enforcement of chapter; establishment of standards for licensure; administration of examinations; investigation of applicants and issuance of licenses; institution of court proceedings;

submission of biennial report; regulations.

- 1. In addition to the other powers and duties provided in this chapter, the Board shall, in the interest of the public, judiciously:
 - (a) Enforce the provisions of this chapter;
 - (b) Establish by regulation standards for licensure under this chapter;
 - (c) Conduct examinations for licensure and establish a system of scoring for those examinations;
- (d) Investigate the character of each applicant for a license and issue licenses to those applicants who meet the qualifications set by this chapter and the Board; and
 - (e) Institute a proceeding in any court to enforce its orders or the provisions of this chapter.
- 2. On or before February 15 of each odd-numbered year, the Board shall submit to the Governor and to the Director of the Legislative Counsel Bureau for transmittal to the next regular session of the Legislature a written report compiling:
- (a) Disciplinary action taken by the Board during the previous biennium against any licensee for malpractice or negligence;
- (b) Information reported to the Board during the previous biennium pursuant to NRS 630.3067, 630.3068, subsections 3 and 6 of NRS 630.307 and NRS 690B.250 and 690B.260; and
- (c) Information reported to the Board during the previous biennium pursuant to <u>NRS 630.30665</u>, including, without limitation, the number and types of surgeries performed by each holder of a license to practice medicine and the occurrence of sentinel events arising from such surgeries, if any.
- The report must include only aggregate information for statistical purposes and exclude any identifying information related to a particular person.
- 3. The Board may adopt such regulations as are necessary or desirable to enable it to carry out the provisions of this chapter.

[Part 5:169:1949; 1943 NCL § 4107.05]—(NRS A 1973, 507; 1985, 309, 2228; 2002 Special Session, 18; 2003, 3431; 2005, 2513; 2007, 1823; 2009, 2948; 2011, 2858; 2015, 485)

NRS CROSS REFERENCES.

Malpractice actions or claims, reports by insurers, NRS 690B.250, 690B.260
Regulatory bodies, duty to enforce laws for protection and benefit of public, NRS 622.080

FEDERAL AND OTHER CASES.

Allegation that board failed to issue verification of good standing was sufficient to state cause of action against board. The license of a physician issued pursuant to NRS ch. 630 is property protected by the U.S. Constitution (cf. NRS 630.045), and the allegation by a physician that failure of the board of medical examiners (see NRS 630.130) to issue verification of his good standing to the Ohio board of medical examiners within 17 months after request constituted malicious or reckless taking of his property was sufficient to state cause of action under federal civil rights statutes. Mishler v. State Bd. of Medical Examiners, 896 F.2d 408 (9th Cir. 1990)

ATTORNEY GENERAL'S OPINIONS.

Effect of conflicting regulations of different licensing boards. The board of medical examiners may regulate the practice of its licensees (see NRS 630.130) even where those licensees are also licensed by the board of homeopathic medical examiners (see NRS ch. 630A) and that regulation prohibits or affects practices that are condoned by the board of homeopathic medical examiners (see NRS 630A.200). Each board has jurisdiction and regulatory authority over its licensees, and practitioners licensed by both boards must comply with the statutes and regulations governing each of their licenses. AGO 98-01 (1-13-1998)

NRS 630.133 Board required to notify Division of Public and Behavioral Health of Department of Health and Human Services upon identification of certain sentinel events; confidentiality of information.

- 1. The Board shall immediately notify the Division of Public and Behavioral Health of the Department of Health and Human Services if the Board identifies a sentinel event which is required to be reported by a medical facility pursuant to NRS 439.835.
 - 2. Except as otherwise provided in NRS 239.0115, any information provided to the Division of Public and

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Behavioral Health pursuant to this section relating to the identification of a sentinel event is confidential, not subject to subpoena or discovery and not subject to inspection by the general public.

(Added to NRS by 2009, 3070)

NRS 630.135 Board required to define "intractable pain" by regulation. The Board shall by regulation define the term "intractable pain" for the purposes of NRS 630.3066 and 633.521.

(Added to NRS by 1995, 1734)

ADMINISTRATIVE REGULATIONS.

"Intractable pain" defined, NAC 630.255

NRS 630.137 Board prohibited from adopting certain regulations concerning collaboration or consultation among providers of health care.

- 1. Notwithstanding any other provision of law and except as otherwise provided in this section, the Board shall not adopt any regulations that prohibit or have the effect of prohibiting a physician, perfusionist, physician assistant or practitioner of respiratory care from collaborating or consulting with another provider of health care.
- 2. The provisions of this section do not prevent the Board from adopting regulations that prohibit a physician, perfusionist, physician assistant or practitioner of respiratory care from aiding or abetting another person in the unlicensed practice of medicine or the unlicensed practice of perfusion or respiratory care.
 - 3. As used in this section, "provider of health care" has the meaning ascribed to it in NRS 629.031. (Added to NRS by 2003, 3427; A 2009, 2949)

NRS 630.138 Regulations governing supervision of medical assistants and possession and administration of Botox. The Board:

- 1. May adopt regulations governing the supervision of a medical assistant, including, without limitation, regulations which prescribe limitations on the possession and administration of a dangerous drug by a medical assistant.
- 2. Shall adopt regulations governing the possession and administration of botulinum toxin, commonly known as Botox, by a medical assistant or any other person, including, without limitation:
 - (a) The qualifications and training required for administration; and
 - (b) The manner and place of administration.

(Added to NRS by 2011, 2612; A 2013, 2215)

ADMINISTRATIVE REGULATIONS.

Supervision of medical assistants, NAC 630.800-630.830

NRS 630.140 Hearings and investigations; oaths; subpoenas.

- 1. The Board may hold hearings and conduct investigations pertaining to its duties imposed under this chapter and take evidence on any such matter under inquiry before the Board. For the purposes of this chapter:
 - (a) Any member of the Board or other person authorized by law may administer oaths; and
- (b) The Secretary-Treasurer or President of the Board or a hearing officer or the presiding member of a committee investigating a complaint, but not the Executive Director acting on his or her own behalf, may issue subpoenas to compel the attendance of witnesses and the production of books, X-rays, medical records and any other item within the scope of Rule 45 of the Nevada Rules of Civil Procedure. The Secretary-Treasurer, President or other officer of the Board acting on its behalf or the Executive Director must sign the subpoena.
- 2. If any person fails to comply with the subpoena, the Secretary-Treasurer, Executive Director or President of the Board may petition the district court for an order of the court compelling compliance with the subpoena.

- 3. Upon such a petition, the court shall enter an order directing the person subpoenaed to appear before the court at a time and place to be fixed by the court in its order, the time to be not more than 10 days after the date of the order, and then and there show cause why the person has not complied with the subpoena. A certified copy of the order must be served upon the person subpoenaed.
- 4. If it appears to the court that the subpoena was regularly issued by the Board, the court shall enter an order compelling compliance with the subpoena, and upon failure to obey the order the person shall be dealt with as for contempt of court.

[Part 5:169:1949; 1943 NCL § 4107.05] + [Part 16:169:1949; 1943 NCL § 4107.16] + [Part 22:169:1949; 1943 NCL § 4107.22]—(NRS A 1973, 507; 1975, 416; 1977, 823; 1983, 302; 1985, 2228; 1987, 192; 2009, 2949)

NRS 630.144 Website: Maintenance; general requirements and restrictions concerning posting of information.

- 1. The Board shall maintain a website on the Internet or its successor.
- 2. Except as otherwise provided in this section, a member or employee of the Board shall not place any information on the Internet website maintained by the Board without the approval of the Executive Director and the Board. A member or employee of the Board shall submit any information proposed to be placed on the Internet website to the Executive Director for approval. Upon approving the proposal, the Executive Director shall present the proposal to the Board for approval at its next regularly scheduled meeting.
 - 3. The Board shall place on its Internet website, without having to approve the placement at a meeting:
 - (a) Each application form for the issuance or renewal of a license issued by the Board pursuant to this chapter.
- (b) A list of questions that are frequently asked concerning the processes of the Board and the answers to those questions.
- (c) An alphabetical list, by last name, of each physician and a brief description of each disciplinary action, if any, taken against the physician, in this State and elsewhere, which relates to the practice of medicine and which is noted in the records of the Board. The Board shall include, as part of the list on the Internet website, the name of each physician whose license has been revoked by the Board. The Board shall make the list on the Internet website easily accessible and user friendly for the public.
 - (d) All financial reports received by the Board.
 - (e) All financial reports prepared by the Board.
- (f) Any other information that the Board is required to place on its Internet website pursuant to any other provision of law.

(Added to NRS by 2003, 1886; A 2003, 3483; 2015, 485)

- NRS 630.146 Website: Additional requirements concerning posting of information relating to pharmaceutical manufacturers. The Board shall post on a website or other Internet site that is operated or administered by or on behalf of the Board:
- 1. A general description of the basic elements of the Compliance Program Guidance for Pharmaceutical Manufacturers that is published by the Office of Inspector General of the United States Department of Health and Human Services, or links to websites or other Internet sites that are operated or administered by or on behalf of the Office of Inspector General where such information may be obtained;
- 2. A general description of the process for reporting unlawful or unethical conduct by pharmaceutical manufacturers to the Office of Inspector General, or links to websites or other Internet sites that are operated or administered by or on behalf of the Office of Inspector General where such information may be obtained; and
 - 3. A current telephone number for the Office of Inspector General. (Added to NRS by 2003, 1213)

Follow these instructions when filling out the form:

- 1. Download the form to your personal computer.
- 2. Complete the downloaded form using Adobe Reader.
- 3. Save the completed form to your personal computer.
- 4. Then send the saved form and any additional documents in PDF format to cstonefield@lcb.state.nv.us

Submit by Email



Information Concerning Board or Commission Subject to Review by the Sunset Subcommittee of the Legislative Commission

as required by Nevada Revised Statutes 232B.230

Board or commission name:

Nevada State Board of Medical Examiners (NSBME or Board)

Members' names with expiration date of term, and indicate the number of vacancies:

Rachakonda D. Prabhu, M.D. Term expiration date: 08/30/21

Wayne Hardwick, M.D.

Term expiration date: 08/30/19

Physical address:

1105 Terminal Way Reno, NV

Mailing address:

1105 Terminal Way, Suite 301

Reno, NV 89502

Web site address (if any):

http://medboard.nv.gov

Web site developer (if not EITS, please indicate if EITS approved the web site):

EITS developed and approved

Executive director's name and contact information:

Edward O. Cousineau, J.D. Telephone: 775-324-9353

Staff members' names including titles and status as full-time or part-time (attach additional pages as necessary):

Anders, Elizabeth M., Public Information Officer/Research Analyst, Full time Andreas, Donald A., Deputy Chief of Investigations (Las Vegas), Full time Bailey, Tara, Licensing Administrative Assistant, Full time

Days and hours of operation:

8 am to 5 pm, Monday through Friday

Created by what authority:

The NSBME was created by the Legislature in Nevada Revised Statutes Chapter 630, and in particular, NRS 630.050, and NRS 630.130 to NRS 630.146, inclusive.

Authority to adopt regulations (NRS) and citation to regulations (NAC), if applicable:

The NSBME is authorized by the Legislature to adopt regulations as set forth in NRS 630.130, NRS 630.135, NRS 630.138, NRS 630.161, NRS 630.253, NRS 630.269, NRS 630.2691, NRS 630.275, and NRS 630.279. Regulations are set forth in NAC Chapter 630.

Information Concerning Board or Commission Subject to Review by the **Sunset Subcommittee of the Legislative Commission**

List by LCB File No. and date of adoption the five regulations most recently adopted by the board or commission, with any applicable deadline for the adoption of any such regulation:

- 1. R163-16 relating to continuing medical education as required by section 17 of Assembly Bill No. 474, chapter 605, Statutes of Nevada 2017, at page 4411. The Board voted to approve the adoption of proposed amendments to NAC Chapter 630, after workshop and public hearing, on December 1, 2017. The proposed regulation went before the Legislative Committee on Healthcare on January 11, 2018.
- 2. R008-17 repealing NAC 630.205 regarding prescription of appetite suppressants. The

List any required regulations that have not been adopted, with any applicable deadline for the adoption of any such

regulation. Please identify each such regulation by LCB File No., of Nevada requiring adoption of the regulation:

R100-17, regarding the establishment of disciplinary action, was required to be promulgated by section 15 of Assembly Bill No. 474, chapter 605, Statutes of Nevada 2017, at page 4410-11. It has not yet been adopted. The Board authorized staff to proceed with the regulatory adoption process on September 8, 2017. A workshop was the provision of NRS or Statutes held on January 3, 2018. At the workshop, there was significant concern expressed both about the implementation of Assembly Bill 474 and about the proposed disciplinary regulation. As a result, the Board authorized the creation of a subcommittee on February 7, 2018. The Subcommittee, comprised on four Board members and fourteen

Governing structure of the board or commission pursuant to statute:

The Board consists of nine members appointed by the Governor. NRS 630.050. Six members must be persons licensed to practice medicine in this State, who are actually engaged in the practice of medicine in this State, and have resided and practiced medicine in this State for at least five years preceding their respective appointments. NRS 630.060

Duties of the board or commission:

The Board's duties include the following:

NRS 630.130:

- 1. In addition to the other powers and duties provided in this chapter, the Board shall, in the interest of the public, judiciously:
 - (a) Enforce the provisions of this chapter;
 - (b) Establish by regulation standards for licensure under this chapter;
- (c) Conduct examinations for licensure and establish a system of scoring for those examinations;

Statement of the objectives and programs of the board or commission:

The NSBME serves the state of Nevada by ensuring that only well-qualified, competent physicians, physician assistants, practitioners of respiratory care and perfusionists receive licenses to practice in Nevada. The Board responds with expediency to complaints against our licensees by conducting fair, complete investigations that result in appropriate action. In all Board activities, the Board will place the interests of the public before the interests of the medical profession and encourage public input and involvement to help educate the public as we improve the quality of medical practice in Nevada.

Information Concerning Board or Commission Subject to Review by the Sunset Subcommittee of the Legislative Commission

	ouriset oubcommittee of the Legislative commission
Itemized list of services offered by the board or commission:	Licensure and regulation of medical doctors, physician assistants, practitioners of respiratory care, and perfusionists. Provide information to the public and consumers regarding the same.
Dates of the immediately preceding six meetings and the online location where the minutes can be found:	02/07/2018, 01/12/2018, 12/01/17, 11/08/17, 09/08/17, 07/18/17 http://medboard.nv.gov/About/Board/Board_Meeting_Information/
Statutory tax exemptions, abatements, or money set aside for the board or commission:	None
Description of the manner in which the board or commission is funded, including all funding sources:	NSBME is nearly entirely funded by licensing fees. Other minimal forms of income are fees from verification of licenses, licensee lists, public information requests, and recoupment of administrative costs.
Please identify any forms required by the board or commission to be used by members of the public which are not available for downloading from the web site of the board or commission:	None

Information Concerning Board or Commission Subject to Review by the Sunset Subcommittee of the Legislative Commission

Does the board or commission have any recommendations for consolidation with another board or commission? If so, which one(s) could be revised to include the charge to the board or commission that is the subject of this review?

ne at this time	

Does the board or commission believe that its objectives and programs have been effective in accomplishing the purposes for which the board or commission was created? Please explain the response with any information the board or commission believes is relevant:

Yes. In the most recent calendar year, the NSBME issued nearly 1,300 new licenses to practice medicine, respiratory care and perfusion. This is in addition to over 11,500 renewals of licensure which were accomplished during the Board's 2017 renewal cycle. Additionally, the Board filed 27 formal complaints against its licensees and prosecuted 34 disciplinary matters to final disposition. The Board continued its on-going education and outreach efforts to both licensees and consumers by way of live presentations, media advertising, radio interviews, and the continuing funding for the Board's

Any recommendations for statutory changes which are necessary for the board or commission to carry out its objectives and programs:

None at this time			

If additional space is necessary, please attach additional pages and refer to the attachments on the form.

Please include with this form:

- 1. The operating budget of the board or commission.
- 2. A statement setting forth the income and expenses of the board or commission for at least 3 years immediately preceding the date on which the board or commission submits this form, including the balances of any fund or account maintained by or on behalf of the board or commission.
- 3. The most recent legislative audit or other audit of the board or commission, and any efficiency studies or constituent or staff surveys conducted in the past 3 years.
- 4. Any reports required to be filed with the Legislative or Executive Branch over the past 3 years. Please indicate if any reports were filed late or have not been filed.
- 5. A copy of the organizational chart showing the governing structure of the board or commission and its staff.
- 6. A copy of the most recent strategic plan of the board or commission.

For occupational and professional licensing boards and commissions, please provide the following additional information:

- 1. Statement of the fee charged for each license, certificate, registration, permit, or other similar authorization issued by the board or commission.
- 2. Statement of how frequently each license, certificate, registration, permit, or other similar authorization issued by the board or commission must be renewed and the fee charged for such renewal.
- 3. For each license, certificate, registration, permit, or other similar authorization issued by the board or commission, list the fee charged for an equivalent license, certificate, registration, permit, or other similar authorization in each of the following states: Arizona, California, Idaho, Oregon, and Utah.
- 4. For each license, certificate, registration, permit, or other similar authorization issued by the board or commission, provide a statement of how frequently an equivalent license, certificate, registration, permit, or other similar authorization must be renewed and the fee charged for such renewal in the following states: Arizona, California, Idaho, Oregon, and Utah.

State Board of Medical Examiners (Attachment to the Review Form)

Page 1—Members' names with expiration date of term, and indicate the number of vacancies:

Rachakonda D. Prabhu, M.D. Term expiration date: 08/30/21

Wayne Hardwick, M.D.

Term expiration date: 08/30/19

Sandy Peltyn, Public Member Term expiration date: 06/30/18

Victor Muro, M.D.

Term expiration date: 08/30/19

M. Neil Duxbury, Public Member Term expiration date: 06/30/21

April Mastroluca, Public Member Term expiration date: 06/30/21

Aury Nagy, M.D.

Term expiration date: 08/30/20

Michael C. Edwards, M.D., FACS Term expiration date: 06/30/21

Weldon Havins, M.D., J.D. Term expiration date: 08/30/21

Page 1—Staff members' names including titles and status as full-time or part-time:

Anders, Elizabeth M., Public Information Officer/Research Analyst, Full time Andreas, Donald A., Deputy Chief of Investigations (Las Vegas), Full time Bailey, Tara, Licensing Administrative Assistant, Full time Calvanese, Jerry C., Medical Reviewer, Part Time Castagnola, Pamela J., Chief of Investigations, Full time Cousineau, Edward O., Executive Director, Full time Daniels, Lynnette L., Chief of Licensing, Full time Duxbury, Millard N., Board Member, Full time Edwards, Michael C., Board Member, Full time

Espinoza, Julie M., Credentialing & Consumer Assistance Specialist, Full time

Foster, Debra A., Administrative Assistant (Las Vegas), Full time

Fricke, Aaron B., Deputy General Counsel, Full time

Friedman, Kimberly A., Senior Investigator (Las Vegas), Full time

Goetz, Amber E., Licensing Administrative Assistant, Full time

Gordillo, Dawn D., Legal Assistant, Full time

Gustafson, Monica C., Senior Investigator, Full time

Hardwick, Wayne C., Board Member, Full time

Harris, Brandi M., Senior License Specialist, Full time

Hartley, Heather M., License Specialist, Full time

Havins, Weldon E., Board Member, Full time

Hayworth, Alexandra D., License Specialist, Full time

Hendricks, Samantha M., Investigations Coordinator, Full time

Hiett, Trent S., Senior Investigator, Full time

Jenkins, Donya, Finance Manager, Full time

Kilroy, Robert G., General Counsel, Full time

LaRue, Johnna, Investigator, Full time

Mastroluca, April L., Board Member, Full time

McCleery, Stacey A., License Specialist, Full time

Mehta, Jasmine K., Deputy Executive Director, Part time

Miller, Mollie T., Deputy Chief of Investigations, Full time

Munson, Laurie L., Chief of Administration and Information Systems, Full time

Muro, Victor M., Board Member, Full time

Nagy, Aurangzeb, Board Member, Full time

Padilla, Nancy A., License Specialist, Full time

Payton, Kati L., Investigator (Las Vegas), Full time

Peltyn, Sandy, Board Member, Full time

Perkins, Norma Y., Administrative Assistant, Full time

Prabhu, Rachakonda D., Board Member, Full time

Riviera, Brenda S., Finance Assistant, Full time

Rosling, Kimberly J., Legal Assistant, Full time

Santos, Kristin L., License Specialist, Full time

Stewart, Kristi L., Senior License Specialist, Full time

Ward, Lara R., Investigator (Las Vegas), Full time

White, Donald K., Deputy General Counsel, Full time

Worden, Curtis J., Deputy Chief of Licensing, Full time

Page 2—<u>List by LCB File No.</u> and date of adoption the five regulations most recently adopted by the board or commission, with any applicable deadline for the adoption of any such regulation:

1. R163-16 relating to continuing medical education as required by section 17 of Assembly Bill No. 474, chapter 605, Statutes of Nevada 2017, at page 4411. The Board voted to approve the adoption of proposed amendments to NAC Chapter 630,

after workshop and public hearing, on December 1, 2017. The proposed regulation went before the Legislative Committee on Healthcare on January 11, 2018.

- 2. R008-17 repealing NAC 630.205 regarding prescription of appetite suppressants. The Board voted to approve the repeal, after a workshop and public hearing, on December 1, 2017.
- 3. R096-16 relating to amendment of NAC 630.810 to clarify the training requirements for medical assistants as well as the functions they may perform. A workshop was held July 27, 2016, and a public hearing was held on October 20, 2016. On December 2, 2016, the Board moved to adopt the regulation.
- 4. R103-15 relating to amendment of NAC 630.155 and 630.357 regarding continuing medical education requirements. A public workshop was held on January 12, 2016, and a public hearing was held on February 4, 2016. The Board moved to adopt the regulation on March 4, 2016.
- 5. R021-15 relating to amendment of NAC 630.187 and NAC 630.205 to update dietary guidelines for the prescription of appetite suppressants. A public workshop was held on September 15, 2015 and a public hearing was held on October 13, 2015. The Board voted to approve the regulation on December 4, 2015.
- 6. R022-15 relating to amendment of NAC 630.280 to clarify the requirements for physician assistant licensure. A public workshop was held on September 15, 2015 and a public hearing was held on October 13, 2015. The Board voted to approve the regulation on December 4, 2015.
- 7. R023-15 relating to amendment of NAC 630.505 to clarify the requirements for respiratory care practitioner licensure. A public workshop was held on September 15, 2015 and a public hearing was held on October 13, 2015. The Board voted to approve the regulation on December 4, 2015.
- 8. R024-15 relating to amendment of NAC 630.525 to change language defining the timing for biennial registration of respiratory care practitioners. A public workshop was held on September 15, 2015 and a public hearing was held on October 13, 2015. The Board voted to approve the regulation on December 4, 2015.
- Page 2—<u>List any required regulations that have not been adopted, with any applicable deadline</u> for the adoption of any such regulation. Please identify each such regulation by LCB File No., if available, or by reference to the provision of NRS or Statutes of Nevada requiring adoption of the regulation:
 - R100-17, regarding the establishment of disciplinary action, was required to be promulgated by section 15 of Assembly Bill No. 474, chapter 605, Statutes of Nevada

2017, at page 4410-11. It has not yet been adopted. The Board authorized staff to proceed with the regulatory adoption process on September 8, 2017. A workshop was held on January 3, 2018. At the workshop, there was significant concern expressed both about the implementation of Assembly Bill 474 and about the proposed disciplinary regulation. As a result, the Board authorized the creation of a subcommittee on February 7, 2018. The Subcommittee, comprised on four Board members and fourteen stakeholders in the medical community, has met twice, on February 15, 2018 and February 28, 2018, and is scheduled to meet on March 14, 2018 and March 21, 2018.

Page 2—Governing structure of the board or commission pursuant to statute:

The Board consists of nine members appointed by the Governor. NRS 630.050. Six members must be persons licensed to practice medicine in this State, who are actually engaged in the practice of medicine in this State, and have resided and practiced medicine in this State for at least five years preceding their respective appointments. NRS 630.060(1).

One member must be a person who has resided in this State for at least five years and who represents the interests of persons or agencies that regularly provide health care to patients who are indigent, uninsured or unable to afford health care. This person must not be a licensee of the NSBME. NRS 630.060(2).

The remaining two members must be persons who have resided in this State for at least five years and who are not licensed in any state to practice any healing art, are not related to a Nevada licensee, are not actively engaged in the administration of any facility for the dependent as defined in chapter 449 of NRS, medical facility or medical school; and do not have a pecuniary interest in any matter pertaining to the healing arts, except as a patient or potential patient. NRS 630.060(3).

Each member may serve a term of four years, and may not serve more than two consecutive terms. NRS 630.070; NRS 630.050. A person may be reappointed after the lapse of four years. NRS 630.050. The Board shall elect from its members a President, a Vice President and a Secretary-Treasurer. The officers of the Board shall hold their respective offices during its pleasure. NRS 630.090(1).

Page 2—Duties of the board or commission:

The Board's duties include the following: NRS 630.130:

- 1. In addition to the other powers and duties provided in this chapter, the Board shall, in the interest of the public, judiciously:
 - (a) Enforce the provisions of this chapter;
 - (b) Establish by regulation standards for licensure under this chapter;

- (c) Conduct examinations for licensure and establish a system of scoring for those examinations;
- (d) Investigate the character of each applicant for a license and issue licenses to those applicants who meet the qualifications set by this chapter and the Board; and
- (e) Institute a proceeding in any court to enforce its orders or the provisions of this chapter.
- 2. On or before February 15 of each odd-numbered year, the Board shall submit to the Governor and to the Director of the Legislative Counsel Bureau for transmittal to the next regular session of the Legislature a written report compiling:
- (a) Disciplinary action taken by the Board during the previous biennium against any licensee for malpractice or negligence;
- (b) Information reported to the Board during the previous biennium pursuant to NRS 630.3067, 630.3068, subsections 3 and 6 of NRS 630.307 and NRS 690B.250 and 690B.260; and
- (c) Information reported to the Board during the previous biennium pursuant to NRS 630.30665, including, without limitation, the number and types of surgeries performed by each holder of a license to practice medicine and the occurrence of sentinel events arising from such surgeries, if any.

The report must include only aggregate information for statistical purposes and exclude any identifying information related to a particular person.

3. The Board may adopt such regulations as are necessary or desirable to enable it to carry out the provisions of this chapter.

NRS 630.133 requires the Board to report sentinel events to the Division of Public and Behavioral Health of the Department of Health and Human Services.

NRS 630.140 allows the Board to hold hearings and conduct investigations pertaining to its duties.

NRS 630.144 requires the Board to maintain a website, which can be found at http://medboard.nv.gov.

Page 4—Does the board or commission believe that its objectives and programs have been effective in accomplishing the purposes for which the board or commission was created? Please explain the response with any information the board or commission believes is relevant:

Yes. In the most recent calendar year, the NSBME issued nearly 1,300 new licenses to practice medicine, respiratory care and perfusion. This is in addition to over 11,500 renewals of licensure which were accomplished during the Board's 017 renewal cycle. Additionally, the Board filed 27 formal complaints against its licensees and prosecuted 34 disciplinary matters to final disposition. The Board continued its on-going education and outreach efforts to both licensees and consumers by way of live presentations, media advertising, radio interviews, and the continuing funding for the Board's knowyourpainmeds.com website.

SCHEDULE OF FEES (Beginning 7/1/17)

Application Type	Api	olication Fee	F	gistration ee Full- iennium	Fee	gistration 2nd Half Biennium	g	iminal Back- round Check		Tota	ıl Fe	es
M.D. (Active)	\$	600.00	\$	750.00	\$	375.00	<u> </u>	75.00	\$	1,425.00	\$	1,050.00
M.D. (Inactive)	\$	600.00	\$	375.00	\$	187.50	\$	75.00	\$	1,225.00	\$	862.50
M.D. Reinstatement (Active)	<u> </u>		\$	1,500.00	\$	1,500.00			\$	1,500.00	\$	1,500.00
M.D. Reinstatement (Inactive)			\$	750.00	\$	750.00			\$\$	750.00	\$	750.00
M.D. Special Purpose	\$	400.00	\$	750.00	\$	375.00	\$	75.00	\$	1,225.00	\$	850.00
M.D. Status Change (Inactive to Active)			\$	750.00	\$	375.00			\$	750.00	\$	375.00
M.D. LocumTenens or M.D. Temp. License	\$	400.00	\$	40.00	\$	40.00	\$	75.00	\$	515.00	\$	515.00
M.D. Endorsement	\$	600.00	\$	750.00	\$	375.00	\$	75.00	\$	1,425.00	\$	1,050.00
Resident M.D.	\$	300.00	\$	40.00	\$	40.00	\$	75.00	\$	415.00	\$	415.00
Rotating Resident M.D.			\$	80.00	\$	80.00	\$	75.00	\$	155.00	\$	155.00
Restricted Licenses: For underserved areas, counties or certain specialties. Authorized Facility License: For Prison MD's & Psychiatry only. Restricted Medical Research Facility: (NRS 630.2645)	\$	400.00	\$	375.00	\$	187.50	\$	75.00	\$	850.00	\$	662.50
Special Event Medical License: For training, demonstrations of medical techniques. Time limited.	\$	400.00					\$	75.00	\$	475.00	\$	475.00
Physician Assistants	\$	300.00	\$	375.00	\$	187.50	\$	75.00	\$	750.00	\$	562.50
PA Reinstatement			\$	750.00	\$	750.00			\$	750.00	\$	750.00
Perfusionists	\$	300.00	\$	375.00	\$	187.50	\$	75.00	\$	750.00	\$	562.50
Perfusionist Reinstatement			\$	750.00	\$	750.00			\$	750.00	\$	750.00
Respiratory Care Practitioners	\$	100.00	\$	185.00	\$	92.50	\$	75.00	\$	360.00	\$	267.50
RCP Reinstatement			\$	370.00	\$	370.00			\$	370.00	\$	370.00

Renewal Type (Biennium)		Fees
M.D. (Active)	\$	750.00
M.D. (Inactive)	\$	375.00
M.D. Administrative (Active)	\$	750.00
M.D. Administrative (Inactive)	\$	375.00
M.D. Authorized Facility	\$	375.00
M.D. County Restricted	\$	375.00
M.D. Restricted	\$375	5.00-\$750.00
M.D. Special Purpose	\$	750.00
M.D. Special Volunteer		Free
Perfusionist	\$	375.00
Physician Assistant	\$	375.00
Respiratory Care Practitioner	\$	185.00
Resident	\$	40.00

Miscellaneous	Fees
License Verification	\$ 25.00
Listings of MD's	\$ 75.00
Labels (MD's)	\$ 150.00
Listings of PA's	\$ 25.00
Labels (PA's)	\$ 50.00
Listings of RCP's	\$ 50.00
Labels (RCP's)	\$ 100.00
Listings of Perfusionists	\$ 5.00
Labels of Perfusionists	\$ 10.00
Spec. Request Listings	\$ 5.00-\$200.00
Newly Licensed Quarterly MD Listing	\$ 25.00
Replacement Wall Cert.	\$ 25.00
Replacement Wallet ID	\$ 15.00

Nevada State Board of Medical Examiners License Fee Comparisons

State	License Type	Initial Application Fee	Background Check Fee	Initial License Fee	Renewal Fee	Renewal Cycle
	M.D.	\$600.00	\$75.00	\$750.00	\$750.00	June 30 Every Odd Year
	M.D. Special Purpose	\$400.00	\$75.00	\$750.00	\$750.00	June 30 Every Odd Year
	M.D. Resident	\$300.00	\$75.00	\$40.00	\$40.00	1 Year
Nevada	M.D. Rotating Resident	N/A	\$75.00	\$80.00	N/A	N/A
Nevaua	M.D. Special Event	\$400.00	\$75.00	N/A	N/A	N/A
	Physician Assistant	\$300.00	\$75.00	\$375.00	\$375.00	June 30 Every Odd Year
	Perfusionist	\$300.00	\$75.00	\$375.00	\$375.00	June 30 Every Odd Year
	Respiratory Care	\$100.00	\$75.00	\$185.00	\$185.00	June 30 Every Odd Year
	M.D.	\$500.00	\$50.00	\$500.00	\$500.00	2 years
	M.D. Special Purpose	N/A	N/A	N/A	N/A	N/A
	M.D. Resident	N/A	N/A	\$50.00	\$50.00	1 Year
Arizona	M.D. Rotating Resident	N/A	N/A	N/A	N/A	N/A
	M.D. Special Event	N/A	N/A	N/A	N/A	N/A
	Physician Assistant	\$125.00	N/A	\$370.00	\$370.00	2 years
	Perfusionist	N/A	N/A	N/A	N/A	N/A
	Respiratory Care	\$100.00	\$50.00	\$120.00	\$150.00	2 Years / Expire On Birthday

Nevada State Board of Medical Examiners License Fee Comparisons

	Fee	Fee	Initial License Fee	Renewal Fee	Renewal Cycle
M.D.	\$442.00	\$49.00	\$808.00	\$820.00	2 Years / Last Day of Birth Month
M.D. Special Purpose	N/A	N/A	N/A	N/A	N/A
M.D. Resident	N/A	N/A	N/A	N/A	N/A
M.D. Rotating Resident	N/A	N/A	N/A	N/A	N/A
M.D. Special Event	N/A	N/A	N/A	N/A	N/A
Physician Assistant	\$25.00	\$49.00	\$200.00	\$312.00	2 Years / Last Day
Perfusionist	N/A	N/A	N/A	N/A	N/A
Respiratory Care	\$300.00	\$49.00	Included In Application fee	\$250.00	2 Years / Last Day of Birth Month
	M.D. Special Purpose M.D. Resident M.D. Rotating Resident M.D. Special Event Physician Assistant Perfusionist Respiratory Care	M.D. Special Purpose M.D. Resident M.D. Rotating Resident M.D. Special Event M.D. Special Event Physician Assistant Perfusionist N/A Respiratory Care N/A N/A	M.D. Special Purpose N/A N/A M.D. Resident N/A N/A M.D. Rotating Resident N/A N/A M.D. Special Event N/A N/A Physician Assistant \$25.00 \$49.00 Perfusionist N/A N/A Respiratory Care \$300.00 \$49.00	M.D. Special Purpose N/A N/A N/A M.D. Resident N/A N/A N/A M.D. Rotating Resident N/A N/A N/A M.D. Special Event N/A N/A N/A Physician Assistant \$25.00 \$49.00 \$200.00 Perfusionist N/A N/A N/A Respiratory Care \$300.00 \$49.00 Included In Application fee	M.D. Special Purpose N/A N/A N/A N/A M.D. Resident N/A N/A N/A N/A M.D. Rotating Resident N/A N/A N/A N/A M.D. Special Event N/A N/A N/A N/A Physician Assistant \$25.00 \$49.00 \$200.00 \$312.00 Perfusionist N/A N/A N/A N/A Respiratory Care \$300.00 \$49.00 Included In \$250.00

^{*} California; MD Renewal Fee includes a \$12.00 Controlled Substance Utilization Review and Evaluation System (CURES) Fee * California; PA Renewal Fee includes a \$12.00 Controlled Substance Utilization Review and Evaluation System (CURES) Fee

	M.D.	\$500.00	California: MD Renewal Fee	Included in Application Fee	\$250.00	1 Year
	M.D. Special Purpose	N/A	N/A	N/A	N/A	N/A
	M.D. Resident	\$20.00	N/A	N/A	\$20.00	1 Year / Expires June 30th
Idaho	M.D. Rotating Resident	N/A	N/A	N/A	N/A	N/A
	M.D. Special Event	N/A	N/A	N/A	N/A	N/A
	Physician Assistant	\$200.00	Included in Application Fee	Included in Application Fee	\$100.00	1 Year / Expires June 30th
	Perfusionist	N/A	N/A	N/A	N/A	N/A
	Respiratory Care	\$100.00	N/A	Included in Application Fee	\$65.00	1 Year

Nevada State Board of Medical Examiners License Fee Comparisons

State	License Type	Initial Application Fee	Background Check Fee	Initial License Fee	Renewal Fee	Renewal Cycle
	M.D.	\$375.00	\$48.00	\$560.00	\$560.00	2 Years
	M.D. Special Purpose	\$375.00	\$48.00	\$506.00	\$540.00	2 Years
	M.D. Resident	\$185.00	N/A	Included in Application Fee	\$270.00	1 Year
Oregon*	M.D. Rotating Resident	N/A	N/A	N/A	N/A	N/A
	M.D. Special Event	N/A	N/A	N/A	N/A	N/A
	Physician Assistant	\$275.00	\$48.00	\$432.00	\$436.00	2 Years
	Perfusionist	N/A	N/A	N/A	N/A	N/A
	Respiratory Care	\$50.00	N/A	\$50.00	\$50.00	1 Year

^{*} Oregon; MD License and Renewal Fees include a \$20.00 OHS Library funding fee and \$50.00 OHA Prescription Monitoring Fee

*Oregon; Physician Assistant License and Renewal Fees included a \$50.00 OHA Prescription Monitoring Fee

	M.D.	\$200.00	N/A	Included in Application Fee	\$183.00	January 31 Even Years
	M.D. Special Purpose	N/A	N/A	N/A	N/A	N/A
·	M.D. Resident	N/A	N/A	N/A	N/A	N/A
Utah	M.D. Rotating Resident	N/A	N/A	N/A	N/A	N/A
	M.D. Special Event	N/A	N/A	N/A	N/A	N/A
	Physician Assistant	\$180.00			\$123.00	May 31 EvenYears
	Perfusionist	N/A	N/A	N/A	N/A	N/A
	Respiratory Care	\$60.00	N/A	Included in Application Fee	\$52.00	September 30 Even Years

^{*} Oregon; Resident Renewal Fee includes a \$25.00 OHA Prescription Monitoring Fee