PROPOSED AND ADOPTED ADMINISTRATIVE REGULATIONS

(P=LCB Proposed Draft; RP1=Revised Proposed LCB Draft; RP2=Second Revised Proposed LCB Draft; A=Adopted; RA=Revised Adopted)

Link to LCB FILE NO.	CHAPTER	AGENCY SUBJECT
<u>R073-12A</u>	637	BOARD OF DISPENSING OPTICIANS Revises provisions relating to the practice of dispensing opticians
<u>R094-12A</u>	630	BOARD OF MEDICAL EXAMINERS Provides for the supervision of medical assistants by physicians or physician assistants
R035-13P	630	BOARD OF MEDICAL EXAMINERS Authorizes the Board of Medical Examiners to issue certain credit to satisfy the continuing education requirements of certain licensees
R036-13P	630	BOARD OF MEDICAL EXAMINERS Revises the qualifications of an applicant to practice in this State as a physician assistant, practitioner of respiratory care or perfusionist
R170-12A	449	STATE BOARD OF HEALTH Revises provisions governing ambulatory surgical centers
R111-12RP1	449	STATE BOARD OF HEALTH Requires certain persons to provide certain information to the Central Repository for Nevada Records of Criminal History
R112-12P	432A & 449	STATE BOARD OF HEALTH Revises or repeals various provisions relating to public health
<u>R175-12A</u>	639	STATE BOARD OF PHARMACY Revises provisions governing the requirements for registration as a pharmaceutical technician
R087-13P	639	STATE BOARD OF PHARMACY Requires that dispensing technicians complete an additional hour of in-service training
<u>R098-13P</u>	639	STATE BOARD OF PHARMACY Revises various provisions relating to the practice of pharmacy
<u>R174-12A</u>	654	BOARD OF EXAMINERS FOR LONG-TERM CARE ADMINISTRATORS Makes various changes to provisions relating to long-term care administrators

EXHIBIT H - Health Care Document consists of 20 pages. Entire Exhibit provided. Meeting Date 11-21-13

Link to LCB FILE NO.	CHAPTER	AGENCY SUBJECT
R163-12P	641A	BOARD OF EXAMINERS FOR MARRIAGE AND FAMILY THERAPISTS AND CLINICAL PROFESSIONAL COUNSELORS Revises various provisions relating to marriage and family therapists and clinical professional counselors and interns thereof
R190-12P	633	BOARD OF OSTEOPATHIC MEDICINE Provides for the supervision of medical assistants by osteopathic physicians or physician assistants
R040-13P	633	STATE BOARD OF OSTEOPATHIC MEDICINE Revising the licensure qualifications for physician assistants and reducing licensing fees
<u>R034-13RP1</u>	637B	BOARD OF EXAMINERS FOR AUDIOLOGY AND SPEECH PATHOLOGY Revises provisions governing the licensure of audiologists and speech pathologists by the Board of Examiners for Audiology and Speech Pathology

DIGEST FOR ADOPTED REGULATION LCB FILE NO. 073-12 (BOARD OF DISPENSING OPTICIANS)

(Approved by the Subcommittee to Review Regulations on 6/3/13)

The Board of Dispensing Opticians is authorized to adopt such rules and regulations as it may deem necessary to carry out the provisions of chapter 637 of NRS and to empower any member to conduct any investigation necessary to its purposes. (NRS 637.070) Furthermore, the Board is authorized to impose disciplinary action on a person who violates any provision of chapter 637 of NRS or any regulation of the Board. (NRS 637.150) Section 2 of this regulation provides that the Board may investigate the place of dispensing of a licensee to ensure compliance with statute and regulations and may initiate disciplinary action for a violation

Chapter 622A of NRS prescribes the administrative procedure before certain regulatory bodies, including the Board of Dispensing Opticians. Section 3 of this regulation provides that the Board may hold hearings and conduct investigations relating to its duties in a manner that is consistent with the provisions of chapter 622A of NRS. Existing regulations govern practice before the Board. (NAC 637.340, 637.420-637.440, 637.480, 637.550, 637.590, 637.620) Sections 20-32 of this regulation amend various provisions governing administrative proceedings before the Board. Sections 20, 22-24, 28 and 30-32 revise these provisions to make them consistent with chapter 622A of NRS. Additionally, section 39 of this regulation repeals certain sections of NAC which contain various administrative procedures that are superseded by provisions in chapter 622A of NRS.

Existing regulations establish guidelines for the construction of chapter 637 of NAC. (NAC 637.010) **Section 4** of this regulation provides that the chapter will be construed to effectuate the purposes of chapter 622A and other provisions of law, as applicable.

Existing regulations prohibit an unlicensed person from dispensing ophthalmic products to the public. (NAC 637.140) **Section 5** of this regulation provides that, under certain circumstances, certain laboratory personnel shall be deemed not to be engaged in the practice of ophthalmic dispensing and need not be licensed under chapter 637 of NRS.

Sections 6-10 of this regulation amend various provisions relating to the licensing of dispensing opticians. Existing regulations require a licensee to notify the Board of a change of the licensee's home or business address within 30 days. (NAC 637.230) Section 11 of this regulation requires a licensee to notify the Board of a change of the licensee's business address within 10 days.

Existing regulations set forth behaviors that the Board will interpret as falling within "unethical or unprofessional conduct." (NAC 637.235) **Section 12** of this

regulation includes among those behaviors the violation of an order issued by the Board. Sections 13-18 amend various provisions governing the licensing and supervision of apprentice dispensing opticians.

Existing regulations provide that a person designated by the Board shall review, and may investigate, complaints alleging violations of the provisions of chapter 637 of NRS or NAC. (NAC 637.337) **Section 19** of this regulation provides that the person reviewing the complaint may also consider other evidence during such a review.

Existing regulations set forth procedures for the consideration of petitions for declaratory orders or advisory opinions by the Board. (NAC 637.650-637.690) **Sections 33-37** of this regulation revise those procedures.

Existing regulations set forth the procedure for the consideration of petitions for the adoption, amendment or repeal of a regulation. (NAC 637.700) Section 38 of this regulation provides that any interested person may petition the Board for the adoption, filing, amendment or repeal of any regulation pursuant to the provisions of NRS 233B.100.

DIGEST FOR ADOPTED REGULATION LCB FILE NO. 094-12 (BOARD OF MEDICAL EXAMINERS)

(Approved by the Subcommittee to Review Regulation on 2/19/2013)

Existing law provides that the Board of Medical Examiners is responsible for administering and enforcing provisions relating to the licensure and discipline of physicians and physician assistants and the supervision of medical assistants. (NRS 630.130, 630.138, 630.275)

Sections 3 and 4 of this regulation prescribe the circumstances in which a physician or physician assistant may delegate to a medical assistant the performance of a task on a patient. Section 3 also requires the physician or physician assistant who delegates a task to be immediately available to exercise oversight in person if the task involves an invasive procedure. Pursuant to section 4, if a physician or physician assistant determines that a patient with whom the practitioner has established a practitioner-patient relationship requires immediate attention and the patient is being treated in certain rural areas, the physician or physician assistant may delegate the performance of a task on the patient if the physician or physician assistant is immediately available by telephone or other means of instant communication. Section 5 of this regulation requires the physician or physician assistant to retain responsibility for the safety and performance of each task which is delegated to a medical assistant and prohibits the delegation or transfer of certain tasks under certain conditions.

Existing regulations require a physician or physician assistant to adequately supervise a medical assistant. (NAC 630.230) **Section 6** of this regulation requires such supervision to include supervision in accordance with **sections 3 and 4**.

Existing regulations prescribe the grounds for disciplinary action which may be taken against a physician assistant by the Board of Medical Examiners. (NAC 630.380) Section 7 of this regulation provides that a violation of sections 3-5 is an additional ground for disciplinary action against a physician assistant.

DIGEST FOR PROPOSED REGULATION LCB FILE NO. 035-13 (BOARD OF MEDICAL EXAMINERS)

Existing law authorizes the Board of Medical Examiners to establish by regulation the continuing education requirements for practitioners of respiratory care and perfusionists. (NRS 630.130, 630.269, 630.279) **Sections 1 and 2** of this regulation authorize the Board to issue certain credit towards the continuing education requirements of such licensees if the licensee performs a medical review for the Board.

DIGEST FOR PROPOSED REGULATION LCB FILE NO. 036-13 (BOARD OF MEDICAL EXAMINERS)

Existing law authorizes the Board of Medical Examiners to establish by regulation the qualifications of an applicant to practice in this State as a physician assistant, practitioner of respiratory care and perfusionist. (NRS 630.130, 630.269, 630.275, 630.279) This regulation requires each such applicant to be a citizen of the United States or be lawfully entitled to remain and work in the United States as a qualification for licensure.

DIGEST FOR ADOPTED REGULATION LCB FILE NO. 170-12 (STATE BOARD OF HEALTH)

(Approved by the Legislative Commission on 10/3/2013)

Existing law requires the State Board of Health to adopt regulations governing the operation and licensure of medical facilities, including ambulatory surgical centers. (NRS 449.0302)

Existing regulations govern the medical services and equipment which must be available at ambulatory surgical centers, including a requirement that a physician be "immediately available" under certain circumstances. (NAC 449.980, 449.9902, 449.9935) Sections 1, 4 and 5 of this regulation revise the definition of "immediately available" to remove the requirement that the physician is sufficiently free from other duties.

Existing regulations require that each patient admitted to an ambulatory surgical center receive a presurgical evaluation conducted by a physician within the 7 days immediately preceding the date of the patient's surgery. (NAC 449.980) Section 1 of this regulation authorizes a podiatrist to conduct the presurgical evaluation for a podiatric patient. Sections 3 and 6 of this regulation make conforming changes to reference a podiatrist.

Existing regulations prescribe requirements for the administration of an ambulatory surgical center, including a requirement of a governing body and an administrator for the center. (NAC 449.979-449.9843) Existing regulations also provide an exemption from the requirement of a governing body and an administrator for a physician who is operating the center for the purpose of performing surgery only on his or her patients. (NAC 449.9835) **Section 2** of this regulation revises this exemption to provide that the licensee is exempt if he or she is a sole physician operator.

DIGEST FOR REVISED PROPOSED REGULATION LCB FILE NO. 111-12 (STATE BOARD OF HEALTH)

Existing law requires the State Board of Health to adopt regulations that it deems necessary or convenient for the licensing and regulation of certain medical and other related facilities. (NRS 449.0302) Existing law also requires each applicant for a license to operate certain facilities, hospitals, agencies, programs or homes and the employees, temporary employees or independent contractors of such facilities, hospitals, agencies, programs or homes to submit to an initial background investigation and to additional background investigations at least once every 5 years. (NRS 449.122, 449.123) Sections 3 and 4 of this regulation require notification to be provided to an applicant, licensee, employee, temporary employee or independent contractor, as applicable, when the Central Repository for Nevada Records of Criminal History has determined that additional information is necessary to complete the background investigation of the person. The person being investigated is then required to provide the information to the Central Repository and the Division of Public and Behavioral Health of the Department of Health and Human Services or the administrator of, or the person licensed to operate, the facility, hospital, agency, program or home, as applicable, within 30 days. If the background investigation cannot be completed because criminal charges are pending against the person, the person must provide notice of each court proceeding relating to the charges and notify the Central Repository of the final disposition of the charges as soon as the information is available.

Section 3 further allows the Division to take certain disciplinary action if an applicant or licensee fails to comply with the requirements to provide information and to delay action concerning a license until the background investigation is complete. Section 4 similarly requires the administrator of, or the person licensed to operate, the facility, hospital, agency, program or home to terminate the employment of an employee or contract with an independent contractor or notify the temporary employment service that its employee is prohibited from providing services if the employee, temporary employee or independent contractor willfully fails to provide the information. Section 4 also provides that, after the provision of notice by the Central Repository and pending completion of the investigation by the Central Repository and during any period in which an employee, temporary employee or independent contractor seeks to correct information provided by the Central Repository, the employee, temporary employee or independent contractor must be: (1) prohibited from working at the facility, hospital, agency, program or home by being placed on leave; (2) required to work under direct supervision when caring for a patient, client or resident; or (3) allowed to provide care for patients, clients or residents only after an investigation by the facility, hospital, agency, program or home and under any measures the facility, hospital, agency, program or home deems necessary to ensure the safety of its patients, residents or clients.

Section 5 of this regulation repeals a regulation that duplicates language which was subsequently incorporated in NRS.

DIGEST FOR PROPOSED REGULATION LCB FILE NO. 112-12 (STATE BOARD OF HEALTH)

Existing law requires the State Board of Health to adopt regulations governing various facilities. (NRS 449.0302)

Existing regulations require a home for individual residential care to contain adequate areas and equipment to carry out appropriate sanitary procedures for the handling, cleaning and storage of linens and personal laundry. (NAC 449.15525) Section 1 of this regulation removes a duplicative requirement that the director of a home for individual residential care ensure that appropriate sanitary procedures are followed for linens and personal laundry.

Existing law requires the Board to adopt regulations prohibiting an employee of a residential facility for groups from giving assistance in the administration of a controlled substance or dangerous drug to a resident if the medication is administered by injection or intravenously. (NRS 449.0302) Section 2 of this regulation prohibits a person who requires regular injections from being admitted to or allowed to remain a resident of a residential facility for groups unless the person is able to administer his or her own injections.

Existing regulations require the administrator of a facility for refractive surgery to ensure that the facility is adequately staffed. (NAC 449.4506) **Section 3** of this regulation removes the specific requirement that at least one registered nurse employed by a facility for refractive surgery be present in the facility at all times that a patient is present in the facility.

Existing law requires the Board to adopt such regulations as it deems necessary or convenient to carry out the provisions of chapter 432A of NRS, which relates to services and facilities for the care of children. (NRS 432A.077)

Section 5 of this regulation repeals several regulations relating to services and facilities for the care of children and medical and other related facilities. These regulations: (1) Exempt a group home that does not provide care for more than eight children who are under 3 years of age from the requirement to be licensed as a nursery for infants and toddlers; (2) Allow a person who desires a waiver from the Board's regulations concerning licensing of facilities for the care of children to apply to the Board for such a waiver; (3) Require certain regulations to be interpreted in accordance with applicable federal standards when applied to facilities governed by federal Medicare or Medicaid criteria; and (4) Require certain money collected by the Health Division as administrative sanctions to be deposited in a separate fund and spent for certain purposes. Section 4 of this regulation revises a reference to the fund into which a monetary penalty is deposited to account for the repeal of that reference in section 5.

DIGEST FOR ADOPTED REGULATION LCB FILE NO. 175-12 (STATE BOARD OF PHARMACY)

(Approved by the Legislative Commission on 12/20/2012)

Existing law authorizes the State Board of Pharmacy to: (1) adopt such regulations, not inconsistent with the laws of this State, as are necessary for the protection of the public, appertaining to the practice of pharmacy and the lawful performance of its duties; (2) regulate the practice of pharmacy; and (3) examine and register, upon application, pharmacists and other persons who dispense or distribute medications whom it deems qualified. (NRS 639.070) Existing law also specifically requires the Board to adopt regulations concerning pharmaceutical technicians, including requirements for: (1) the qualifications, registration and supervision of pharmaceutical technicians; and (2) the services which pharmaceutical technicians may perform. (NRS 639.1371)

Existing regulations set forth the requirements that an applicant for registration as a pharmaceutical technician in this State must satisfy. An applicant who is registered in another state as a pharmaceutical technician may apply for registration in this State if the requirements for registration in the state in which he or she is registered are equivalent to the requirements of this State. (NAC 639.240) **Section 1** of this regulation additionally requires such an applicant's successful completion of at least 240 hours of employment as a pharmaceutical technician in a pharmacy in the state in which he or she is registered, which must be verified by the managing pharmacist of the pharmacy.

Existing regulations authorize an applicant who is certified as a pharmacy technician by the Pharmacy Technician Certification Board or the Institute for the Certification of Pharmacy Technicians to apply for registration as a pharmaceutical technician in this State if the applicant also satisfies certain other requirements relating to a program of training for pharmaceutical technicians conducted by a postsecondary school in another state. (NAC 639.240) **Section 1** additionally requires such an applicant's successful completion of at least 240 hours of employment as a pharmaceutical technician in training in a pharmacy in another state, which must be verified by the managing pharmacist of the pharmacy.

Existing regulations further provide that an applicant who successfully completes a program of training for pharmaceutical technicians conducted by a branch of the Armed Forces of the United States may apply for registration as a pharmaceutical technician in this State. (NAC 639.240) Section 1 also authorizes an applicant who successfully completes such a program conducted by the Indian Health Service of the United States Department of Health and Human Services or the United States Department of Veterans Affairs to apply for registration as a pharmaceutical technician in this State.

Sections 1 and 2 of this regulation also update the name of the Institute for the Certification of Pharmacy Technicians to reflect that it is now a part of the National Healthcareer Association.

DIGEST FOR PROPOSED REGULATION LCB FILE NO. 087-13 (STATE BOARD OF PHARMACY)

Existing law provides for the regulation and registration of dispensing technicians by the State Board of Pharmacy. (NRS 639.07027)

Under existing regulations, the State Board of Pharmacy establishes certain requirements for a registration as a dispensing technician. (NAC 639.7425) This regulation amends these provisions by adding a requirement that dispensing technicians complete a certain amount of in-service training hours every 2 years. Further, the regulation establishes certain requirements concerning the records which prove completion of such training.

DIGEST FOR PROPOSED REGULATION LCB FILE NO. 098-13 (BOARD OF PHARMACY)

Existing law requires the State Board of Pharmacy to adopt regulations as are necessary for the safe and efficient operation of remote sites, satellite consultation sites and telepharmacies. Existing law requires the Board to adopt regulations to: (1) authorize registered pharmacists to engage in the practice of pharmacy electronically, telephonically or by fiber optics from within this State; and (2) to authorize prescriptions to be filled and dispensed to patients as prescribed by practitioners electronically, telephonically or by fiber optics from within or outside this State or the United States. (NRS 639.0727)

Section 1 of this regulation revises the definition of "direct supervision" to include direction given by a supervising pharmacist on the premises of a telepharmacy to persons he or she is supervising at the telepharmacy or at a remote site or satellite consultation site. The definition is further revised to require the supervising pharmacist to be aware of the activities of that person related to the preparation and dispensing of medications rather than only the preparation of medications.

Section 2 of this regulation provides that, with limited exceptions, in any pharmacy, a pharmacist is not authorized to supervise more than a total of three pharmaceutical technicians at one time. Section 2 further provides that in any telepharmacy, remote site or satellite consultation site, a pharmacist is not authorized to supervise more than a total of three pharmaceutical technicians at one time. Section 17 repeals the existing regulation governing the number of pharmaceutical technicians and dispensing technicians that a pharmacist or dispensing practitioner, as applicable, is authorized to supervise in any remote site. Section 12 of this regulation provides that a dispensing practitioner is authorized to register more than one dispensing technician at a time but specifies that only one dispensing technician staffing a remote site or satellite consultation site is allowed to perform certain functions related to filling and dispensing prescriptions and compounding drug products at one time.

Existing regulations require a pharmacist or dispensing practitioner to obtain a certificate of registration from the Board to dispense controlled substances or dangerous drugs at a remote site. Existing regulations further establish the qualifications for persons who operate a remote site and establish various requirements concerning the operation of a remote site. Sections 3-10 of this regulation extend the applicability of those provisions to a satellite consultation site and make certain changes to conform those existing regulations to changes made by S.B. 327.

Section 11 of this regulation adds a telepharmacy and a satellite consultation site as examples of the sites of a practice for which a practitioner is required to submit to the Board a separate application for a certificate of registration to dispense controlled substances or dangerous drugs.

Existing law requires that a pharmacist establish the existence of a bona fide relationship between the patient and the person prescribing the controlled substance to provide that such a relationship shall be deemed to exist if the patient was examined in person, electronically, telephonically or by fiber optics within or outside this State or the United States by that person rather than requiring the patient to be physically examined. (NRS 639.235) Sections 13 and 16 of this regulation similarly amend existing regulations with regard to what constitutes a bona fide relationship.

Section 14 of this regulation revises the content of the written record of refills that must be maintained by a pharmacist.

Section 15 of this regulation provides that the requirement that a pharmacy must use a computerized system to record information about prescriptions applies to a satellite consultation site.

Section 16 revises provisions governing unprofessional conduct by the holder of a license, certificate or registration issued by the Board to provide an exception relating to the procedure for filling certain prescriptions.

DIGEST FOR ADOPTED REGULATION LCB FILE NO. 174-12 (BOARD OF EXAMINERS FOR LONG-TERM CARE)

(Approved by the Subcommittee to Review Regulations on 2/19/2013)

Existing law sets forth certain qualifications for a person to obtain a license as a nursing facility administrator or an administrator of residential facilities for groups and authorizes the Board of Examiners for Long-Term Care Administrators to develop, impose and enforce standards which must be met by persons to obtain those licenses. (NRS 654.110, 654.150, 654.155) Sections 2-9, 11, 12, 14, 15 and 18 of this regulation revise standards and procedures relating those licenses.

Existing regulations authorize a licensed nursing facility administrator or an administrator of a residential facility for groups to use certain titles and abbreviations after their names. (NAC 654.144, 654.165) Sections 10 and 16 of this regulation provide that the Board may impose an administrative fine on any person who improperly uses those titles and abbreviations after his or her name.

Existing regulations authorize an applicant for a license as an administrator of a residential facility for groups to retake the examination if the applicant fails the examination. (NAC 654.157, 654.162) Section 15 of this regulation provides that an applicant who fails the examination twice must wait at least 1 year after the date of the last examination before he or she may retake the examination.

Existing regulation authorizes the Board to issue a provisional license to an applicant for a license as a nursing facility administrator or an administrator of a residential facility for groups pending receipt of the report from the Federal Bureau of Investigation concerning the criminal history of the applicant. (NAC 654.168) Section 17 of this regulation changes that requirement to provide that the Board may issue a provisional license to an applicant pending final approval of the application by the Board.

Section 21 of this regulation provides that the Board will issue a duplicate license to a licensee upon satisfactory evidence that: (1) the licensee has changed his or her name; or (2) the facility at which the licensee is the administrator of record has a change in the number of beds authorized in the facility.

Section 22 of this regulation revises the list of behaviors that constitute unprofessional conduct by a nursing facility administrator, an administrator of a residential facility for groups or an applicant for a license to be a nursing facility administrator or an administrator of a residential facility for groups.

Existing law provides that the Board may, after notice and an opportunity for a hearing, impose certain disciplinary action against certain licensees. (NRS 654.190) **Section 23** of this regulation amends provisions concerning the imposition of these disciplinary actions. **Section 24** of this regulation revises provisions concerning the

reinstatement of the license as a nursing facility administrator or an administrator of a residential facility for groups.

Existing regulations provide that unless otherwise approved by the Board, a nursing facility administrator may not be the administrator of record of more than one nursing facility at the same time for more than 90 days in a calendar year. Existing regulations also require an administrator of a residential facility for groups to obtain a secondary license for every additional residential facility for groups which the administrator operates. (NAC 654.250) Section 25 of this regulation requires a nursing facility administrator who is the administrator of record of more than one nursing facility at the same time to obtain a secondary license for each additional nursing facility of which he or she is the administrator of record.

Existing regulations require an administrator of a residential facility for groups who obtains a secondary license to surrender and return each secondary administrator's license to the Board upon: (1) relinquishing his or her responsibilities at the residential facility for groups for which the license was obtained; or (2) the closure of the residential facility for groups for which the license was obtained. (NAC 654.250) Section 25 of this regulation requires a nursing facility administrator or an administrator of a residential facility for groups to return a license to the Board not later than 15 days after the administrator: (1) relinquishes his or her responsibilities at the facility for which the license was obtained; or (2) the closure of the facility for which the license was obtained.

DIGEST FOR PROPOSED REGULATION LCB FILE NO. 163-12 (BOARD OF EXAMINERS FOR MARRIAGE AND FAMILY THERAPISTS AND CLINICAL PROFESSIONAL COUNSELORS)

Existing law requires the Board of Examiners for Marriage and Family Therapists and Clinical Professional Counselors to adopt regulations not inconsistent with chapter 641A of NRS governing the Board's procedure, the examination and licensing of applicants, the granting, refusal, revocation or suspension of licenses, and the practice of marriage and family therapy and the practice of clinical professional counseling as those practices apply to chapter 641A of NRS. (NRS 641A.160) Existing law also requires the Board to adopt regulations specifying the criteria for courses of study that are sufficient for the purposes of licensing. (NRS 641A.180)

Section 1 of this regulation provides that an approved supervisor or intern must request approval from the Board to terminate a supervision agreement between the approved supervisor and intern and sets forth various requirements relating to such termination. Section 1 also provides that an approved supervisor or intern may immediately suspend a supervision agreement in certain circumstances and requires an approved supervisor or intern to notify the Board of such suspension not more than 5 days after the date of suspension.

Existing regulations require an applicant for licensure as a marriage and family therapist or marriage and family therapist intern to complete courses in certain areas of study during the applicant's graduate education in marriage and family therapy. (NAC 641A.085) Section 2 of this regulation specifies certain clinical experience that must be included in the required supervised practice of marriage and family therapy area of study.

Existing regulations also require an internship in marriage and family therapy or clinical professional counseling to be approved by the Board and completed within 3 years after the Board approves the internship. (NAC 641A.146) Section 3 of this regulation sets forth provisions relating to the extension of an internship if an intern does not complete the internship within 3 years after the Board approves the internship. Existing regulations additionally require an intern in marriage and family therapy or clinical professional counseling to submit to the Board a written report from the intern's approved supervisor that evaluates the internship. If the intern fails to file such a report, the Board may terminate the intern's license. (NAC 641A.146) Section 3 sets forth certain requirements for such an intern who has his or her license terminated.

Section 4 of this regulation revises certain provisions concerning approved supervisors of interns in marriage and family therapy or clinical professional counseling and the supervision of such interns, and section 5 of this regulation updates information pertaining to the *AAMFT Code of Ethics* of the American Association for Marriage and Family Therapy.

DIGEST FOR PROPOSED REGULATION LCB FILE NO. 190-12 (STATE BOARD OF OSTEOPATHIC MEDICINE)

Existing law provides that the State Board of Osteopathic Medicine is responsible for administering and enforcing provisions relating to the licensure and discipline of osteopathic physicians and physician assistants and the supervision of medical assistants. (NRS 633.131, 633.291, 633.522)

Sections 3 and 4 of this regulation prescribe the circumstances in which an osteopathic physician or physician assistant may delegate to a medical assistant the performance of a task on a patient. Section 3 also requires the osteopathic physician or physician assistant who delegates a task to be immediately available to exercise oversight in person if the task involves an invasive procedure. Pursuant to section 4, if an osteopathic physician or physician assistant determines that a patient with whom the practitioner has established a practitioner-patient relationship requires immediate attention and the patient is being treated in certain rural areas, the osteopathic physician or physician assistant may delegate the performance of a task on the patient if the osteopathic physician or physician assistant is immediately available by telephone or other means of instant communication. Section 5 of this regulation requires the osteopathic physician or physician assistant to retain responsibility for the safety and performance of each task which is delegated to a medical assistant.

Existing regulations provide that it is unethical for an osteopathic physician or physician assistant not to adequately supervise a medical assistant. (NAC 633.350) Section 6 of this regulation clarifies that this includes supervision in accordance with sections 3 and 4. Section 6 also removes the definition of "medical assistant." Pursuant to NRS 0.024 the definition set forth in NRS 633.075 applies to NAC, therefore the definition is unnecessary.

DIGEST FOR PROPOSED REGULATION LCB FILE NO. 040-13 (STATE BOARD OF OSTEOPATHIC MEDICINE)

Existing law authorizes the State Board of Osteopathic Medicine to adopt regulations governing the licensure of physician's assistants. (NRS 633.434) Under existing regulations, an applicant for a license as a physician assistant is required to include certain information when submitting his or her application. (NAC 633.283) Section 1 of this regulation revises these provisions by adding a requirement that an applicant must submit certain educational transcripts and must provide certain documentation to prove the applicant's citizenship or lawful presence in the United States.

Under existing law, the Board of Osteopathic Medicine charges and collects certain licensure fees. (NAC 633.501) **Section 2** of this regulation reduces the annual license renewal fees for osteopathic physicians from \$500 to \$450 and the annual license renewal fee for physician assistants from \$400 to \$250.

DIGEST FOR REVISED PROPOSED REGULATION LCB FILE NO. 034-13 (BOARD OF EXAMINERS FOR AUDIOLOGY AND SPEECH PATHOLOGY)

Existing law provides for the regulation and licensure of audiologists and speech pathologists by the Board of Examiners for Audiology and Speech Pathology. (Chapter 637B of NRS) Section 2 of this regulation authorizes the Board to appoint an Executive Director and employ additional staff. Section 3 of this regulation requires an applicant to ensure that the Board receives certain information relating to his or her application. Sections 7 and 8 of this regulation require a licensee to provide the Board with notice of certain information and to maintain certain contact information with the Board. Section 8 authorizes the Board to provide certain notices to a licensee by electronic mail under certain circumstances. Section 9 of this regulation authorizes a person to request verification from the Board of his or her license. Section 10 of this regulation revises provisions governing the payment of licensing fees and further authorizes the Board to recover certain finance charges associated with a returned check. Section 11 of this regulation establishes certain continuing education requirements for a person applying for the reinstatement of his or her license. Section 12 of this regulation repeals provisions providing for: (1) the appointment of an administrator of the Board; and (2) the salary for members of the Board.