AN ACT relating to emergencies; enacting the Uniform Emergency Volunteer Health Practitioners Act, which allows a participating state to establish a system whereby medical and veterinary service providers from other states may register to provide volunteer medical and veterinary services in that state in the event of an emergency; allowing a participating state to determine how various licensing, liability and certain other state laws will apply to registered medical and veterinary service providers who provide such volunteer services in a state in which they are not licensed to practice; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:
Under existing law, the Division of Emergency Management of the Department of Public Safety is required to implement a program for emergency management in this State to be used during an emergency. (NRS 414.040) This bill enacts the Uniform Emergency Volunteer Health Practitioners Act, and Section 22 of this bill authorizes the Division to designate a registration system whereby health care practitioners from other states may register to provide volunteer health care and veterinary services in this State in certain emergency situations. Section 21 of this bill authorizes the Division to limit, restrict and regulate the activities of such registered volunteers during such an emergency. Section 23 of this bill provides that such registered volunteers may only provide volunteer health care or veterinary services if they are licensed and in good standing in their home state. Section 25 of this bill limits the practice in this State by such a registered volunteer to only those services within the volunteer’s scope of practice, unless specifically authorized to practice outside that scope by the Division. Section 25 also authorizes licensing boards or other disciplinary authorities in this State to impose administrative sanctions upon such registered volunteers for certain conduct, to report such sanctions to the state in which the volunteer is licensed and to impose administrative sanctions upon a health practitioner licensed in this State for certain conduct in another state if the practitioner was volunteering in that state under this Uniform Act. Section 27 of this bill authorizes the Division to adopt regulations to carry out this Uniform Act.

Existing law sets forth that health care providers licensed in this State who render emergency care or assistance in certain emergencies are not liable for civil damages for any act or omission unless that act or omission rises to the level of gross negligence. (NRS 41.504, 41.505) Under existing law, certain volunteers who work with a state or local public organization are considered, for the purposes of eligibility for benefits under industrial insurance, to be employees of that organization at a wage of $100 per month. (NRS 616A.130) Section 28 of this bill limits the liability of registered volunteer health practitioners volunteering in this State to only those acts or omissions in the provision of health care or veterinary services that rise to the level of gross negligence. Section 29 of this bill makes such registered volunteers eligible, in certain circumstances, for the same industrial insurance benefits as other volunteers in this State, and for the same occupational disease benefits as employees of this State.
THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Title 36 of NRS is hereby amended by adding thereto a new chapter to consist of the provisions set forth as sections 2 to 30, inclusive, of this act.

Sec. 2. Sections 2 to 30, inclusive, of this act may be cited as the Uniform Emergency Volunteer Health Practitioners Act.

Sec. 3. As used in this chapter, unless the context otherwise requires, the words and terms defined in sections 4 to 19, inclusive, of this act have the meanings ascribed to them in those sections.

Sec. 4. “Disaster relief organization” means an entity which provides emergency or disaster relief services that include health or veterinary services provided by volunteer health practitioners and which:

1. Is designated or recognized as a provider of those services pursuant to a disaster response and recovery plan adopted by an agency of the Federal Government, the Governor or the Division; or

2. Regularly plans and conducts its activities in coordination with an agency of the Federal Government or the Division.

Sec. 5. “Division” means the Division of Emergency Management of the Department of Public Safety.

Sec. 6. “Emergency” means an event or condition that is proclaimed an emergency or disaster pursuant to NRS 414.070.

Sec. 7. “Emergency declaration” means a declaration of emergency issued by a person or entity authorized to do so pursuant to the laws of this State.


Sec. 9. “Entity” means a person other than an individual.

Sec. 10. “Health facility” means an entity licensed under the laws of this or another state to provide health or veterinary services.

Sec. 11. “Health practitioner” means:

1. A provider of health care, as that term is defined in NRS 629.031;

2. Any other individual licensed to provide health care pursuant to the provisions of Title 54 of NRS; or
3. An individual licensed in the professions under the laws of another state to provide health or veterinary services.

Sec. 12. “Health services” means treatment, care, advice or guidance, or other services or supplies, related to the health or death of individuals or human populations, to the extent necessary to respond to an emergency, including, without limitation:

1. The following, concerning the physical or mental condition or functional status of an individual or affecting the structure or function of the body:
   (a) Preventive, diagnostic, therapeutic, rehabilitative, maintenance or palliative care; and
   (b) Counseling, assessment, procedures or other services;
2. The sale or dispensing of a drug, a device, equipment or another item to an individual in accordance with a prescription; and
3. Funeral, cremation, cemetery or other mortuary services.

Sec. 13. “Host entity” means an entity operating in this State which uses volunteer health practitioners to respond to an emergency.

Sec. 14. “License” means authorization by a state to engage in the provision of health or veterinary services that would be unlawful to provide without the authorization. The term includes authorization under the laws of this State for an individual to provide health or veterinary services based upon a national certification issued by a public or private entity.

Sec. 15. “Person” means an individual, corporation, business trust, trust, partnership, limited-liability company, association, joint venture, public corporation, government or governmental subdivision, agency, instrumentality or any other legal or commercial entity.

Sec. 16. “Scope of practice” means the extent of the authorization to provide health or veterinary services granted to a health practitioner by a license issued to the practitioner in the state in which the principal part of the practitioner's services are rendered, including, without limitation, any conditions imposed by the relevant licensing authority.

Sec. 17. “State” means a state of the United States, the District of Columbia, Puerto Rico, the United States Virgin Islands or any territory or insular possession subject to the jurisdiction of the United States.

Sec. 18. “Veterinary services” means treatment, care, advice or guidance, or other services or supplies, related to the health or
death of an animal or animal populations, to the extent necessary to respond to an emergency, including, without limitation:

1. Diagnosis, treatment or prevention of an animal’s disease, injury or other physical or mental condition by the prescription, administration or dispensing of vaccine, medicine, surgery or therapy;
2. Use of a procedure for reproductive management; and
3. Monitoring and treatment of animal populations for diseases that have spread or demonstrate the potential to spread to humans.

Sec. 19. “Volunteer health practitioner” means a health practitioner who provides health or veterinary services, whether or not the practitioner receives compensation for those services. The term does not include a practitioner who receives compensation pursuant to a preexisting employment relationship with a host entity or affiliate which requires the practitioner to provide health services in this State, unless the practitioner is not a resident of this State and is employed by a disaster relief organization providing services in this State while an emergency declaration is in effect.

Sec. 20. Sections 2 to 30, inclusive, of this act apply to volunteer health practitioners who are registered with a registration system that complies with section 22 of this act and who provide health or veterinary services in this State for a host entity:

1. While an emergency declaration is in effect;
2. While participating in required training exercises to prepare for the declaration of an emergency; or
3. When responding to an event with the reasonable expectation that the event will be declared an emergency.

Sec. 21. 1. While an emergency declaration is in effect, the Division may by order limit, restrict or otherwise regulate:
(a) The duration of practice by volunteer health practitioners;
(b) The geographical areas in which volunteer health practitioners may practice;
(c) The types of volunteer health practitioners who may practice; and
(d) Any other matters necessary to coordinate effectively the provision of health or veterinary services during the emergency.

2. An order issued pursuant to subsection 1 may take effect immediately, without prior notice or comment, and is not a regulation for the purposes of chapter 233B of NRS.
3. A host entity that uses volunteer health practitioners to provide health or veterinary services in this State shall:
   (a) Consult with and coordinate its activities with the Division to the extent practicable to provide for the efficient and effective use of those volunteer health practitioners; and
   (b) Comply with any laws other than sections 2 to 30, inclusive, of this act relating to the management of emergency health or veterinary services, including, without limitation, the provisions of chapter 414 of NRS.

Sec. 22. 1. To qualify as a registration system for volunteer health practitioners, a system must:
   (a) Accept applications for the registration of volunteer health practitioners before or during an emergency;
   (b) Include information about the licensure and standing of health practitioners which is accessible by authorized persons;
   (c) Be capable of confirming the accuracy of information concerning whether a health practitioner is licensed and in good standing before the practitioner provides health services or veterinary services pursuant to sections 2 to 30, inclusive, of this act; and
   (d) Meet one of the following conditions:
      (1) Be an emergency system for advance registration of volunteer health care practitioners established by a state and funded through the United States Department of Health and Human Services under Section 319I of the Public Health Service Act, 42 U.S.C. § 247d-7b, as amended;
      (2) Be a local unit consisting of trained and equipped emergency response, public health and medical personnel formed pursuant to Section 2801 of the Public Health Service Act, 42 U.S.C. § 300hh, as amended;
      (3) Be operated by a:
         (I) Disaster relief organization;
         (II) Licensing board;
         (III) National or regional association of licensing boards or health practitioners;
         (IV) Health facility that provides comprehensive inpatient and outpatient health care services, including, without limitation, a hospital; or
         (V) Governmental entity; or
      (4) Be designated by the Division as a registration system for the purposes of sections 2 to 30, inclusive, of this act.

2. While an emergency declaration is in effect, the Division, a person authorized to act on behalf of the Division or a host entity
may confirm whether volunteer health practitioners utilized in this State are registered with a registration system that complies with subsection 1. Confirmation is limited to obtaining identities of the practitioners from the system and determining whether the system indicates that the practitioners are licensed and in good standing.

3. Upon the request of a person or entity in this State authorized to do so pursuant to subsection 2, or a similarly authorized person or entity in another state, a registration system located in this State must notify the person or entity of the identities of volunteer health practitioners and whether the practitioners are licensed and in good standing.

4. A host entity is not required to use the services of a volunteer health practitioner even if the practitioner is registered with a registration system which indicates that the practitioner is licensed and in good standing.

Sec. 23. 1. Notwithstanding any other provision of law, while an emergency declaration is in effect, a volunteer health practitioner who is registered with a registration system that complies with section 22 of this act and who is licensed and in good standing in the state upon which the practitioner's registration is based may practice in this State to the extent authorized by sections 2 to 30, inclusive, of this act, as though the practitioner were licensed in this State.

2. A volunteer health practitioner qualified under subsection 1 is not entitled to the protections of sections 2 to 30, inclusive, of this act if the practitioner is licensed in more than one state and any license of the practitioner is suspended, revoked or subject to an agency order limiting or restricting practice privileges, or has been voluntarily terminated under threat of sanction.

Sec. 24. 1. Sections 2 to 30, inclusive, of this act do not affect credentialing or privileging standards of a health facility and do not preclude a health facility from waiving or modifying those standards while an emergency declaration is in effect.

2. As used in this section:
   (a) “Credentialing” means obtaining, verifying and assessing the qualifications of a health practitioner to provide treatment, care or services in or for a health facility.
   (b) “Privileging” means the authorizing by an appropriate authority, such as a governing body, of a health practitioner to provide specific treatment, care or services at a health facility subject to limits based on factors that include, without limitation, the practitioner's license, education, training, experience, competence, health status and specialized skill.
Sec. 25. 1. Subject to subsections 2 and 3, a volunteer health practitioner shall adhere to the scope of practice for a similarly licensed practitioner established by the licensing provisions, practice acts or other laws of this State.

2. Except as otherwise provided in subsection 3, sections 2 to 30, inclusive, of this act do not authorize a volunteer health practitioner to provide services that are outside the practitioner’s scope of practice, even if a similarly licensed practitioner in this State would be allowed to provide the services.

3. The Division may modify or restrict the health or veterinary services that volunteer health practitioners may provide pursuant to sections 2 to 30, inclusive, of this act. An order under this subsection may take effect immediately, without prior notice or comment, and is not a regulation for the purposes of chapter 233B of NRS.

4. A host entity may restrict the health or veterinary services that a volunteer health practitioner is allowed to provide pursuant to sections 2 to 30, inclusive, of this act.

5. A volunteer health practitioner does not engage in unauthorized practice unless the practitioner has reason to know of any limitation, modification or restriction under this section or that a similarly licensed practitioner in this State would not be allowed to provide the services. A volunteer health practitioner has reason to know of a limitation, modification or restriction or that a similarly licensed practitioner in this State would not be allowed to provide a service if:

(a) The practitioner actually knows that the limitation, modification or restriction exists or that a similarly licensed practitioner in this State would not be allowed to provide the service; or

(b) From all the facts and circumstances known to the practitioner at the relevant time, a reasonable person would conclude that the limitation, modification or restriction exists or that a similarly licensed practitioner in this State would not be allowed to provide the service.

6. In addition to the authority granted by the laws of this State other than sections 2 to 30, inclusive, of this act to regulate the conduct of health practitioners, a licensing board or other disciplinary authority in this State:

(a) May impose administrative sanctions upon a health practitioner licensed in this State for conduct outside of this State in response to an out-of-state emergency;
(b) May impose administrative sanctions upon a practitioner not licensed in this State for conduct in this State in response to an in-state emergency; and
(c) Shall report any administrative sanctions imposed upon a practitioner licensed in another state to the appropriate licensing board or other disciplinary authority in any other state in which the practitioner is known to be licensed.

7. In determining whether to impose administrative sanctions pursuant to subsection 6, a licensing board or other disciplinary authority shall consider the circumstances in which the conduct took place, including, without limitation, any exigent circumstances and the practitioner’s scope of practice, education, training, experience and specialized skill.

Sec. 26. 1. Sections 2 to 30, inclusive, of this act do not limit any rights, privileges or immunities provided to volunteer health practitioners by laws other than sections 2 to 30, inclusive, of this act. Except as otherwise provided in subsection 2, sections 2 to 30, inclusive, of this act do not affect requirements for the use of health practitioners pursuant to the Emergency Management Assistance Compact.

2. The Division, pursuant to the Emergency Management Assistance Compact, may incorporate into the emergency personnel of this State volunteer health practitioners who are not officers or employees of this State, a political subdivision of this State or a municipality or other local government within this State.

Sec. 27. The Division may adopt regulations to carry out sections 2 to 30, inclusive, of this act. In doing so, the Division shall consult with the Governor and consider any pertinent rules or regulations promulgated by similarly empowered agencies in other states to promote uniformity in the application of sections 2 to 30, inclusive, of this act and make the emergency response systems in the various states reasonably compatible.

Sec. 28. 1. Subject to subsection 3, a volunteer health practitioner who provides health or veterinary services pursuant to sections 2 to 30, inclusive, of this act is not liable for damages for an act or omission of the practitioner in providing those services.

2. No person is vicariously liable for damages for an act or omission of a volunteer health practitioner if the practitioner is not liable for the damages under subsection 1.

3. This section does not limit the liability of a volunteer health practitioner for:
(a) Willful misconduct or wanton, grossly negligent, reckless or criminal conduct;
(b) An intentional tort;
(c) Breach of contract;
(d) A claim asserted by a host entity or by an entity located in
this or another state which employs or uses the services of the
practitioner; or
(e) An act or omission relating to the operation of a motor
vehicle, vessel, aircraft or other vehicle.

4. A person who, pursuant to sections 2 to 30, inclusive, of
this act, operates, uses or relies upon information provided by a
volunteer health practitioner registration system is not liable for
damages for an act or omission relating to that operation, use or
reliance unless the act or omission constitutes an intentional tort,
willful misconduct, or wanton, grossly negligent, reckless or
criminal conduct.

5. In addition to the protections set forth in subsection 1, a
volunteer health practitioner who provides health or veterinary
services pursuant to sections 2 to 30, inclusive, of this act is
entitled to all the rights, privileges or immunities provided by the
laws of this State.

Sec. 29. 1. A volunteer health practitioner who dies or is
injured as a result of providing health or veterinary services
pursuant to sections 2 to 30, inclusive, of this act is deemed to be
an employee as defined in section 31.5 of this act for the purposes
of receiving benefits for the death or injury pursuant to chapters
616A to 616D, inclusive, of NRS if:
(a) The practitioner is not otherwise eligible for such benefits
for the injury or death under the laws of this or another state; and
(b) The practitioner or, in the case of death, the practitioner's
personal representative, files a claim for compensation under
chapters 616A to 616D, inclusive, of NRS.

2. A volunteer health practitioner who dies or is injured as
the result of an occupational disease arising from the provision of
health or veterinary services pursuant to sections 2 to 30,
inclusive, of this act is deemed to be an employee, as defined in
NRS 617.070, for the purposes of receiving benefits for the death
or injury under chapter 617 of NRS if:
(a) The practitioner is not otherwise eligible for such benefits
for the injury or death under the laws of this or another state; and
(b) The practitioner or, in the case of death, the practitioner's
personal representative, files a claim for compensation under
chapter 617 of NRS.

3. The Division of Industrial Relations of the Department of
Business and Industry may adopt regulations, enter into
agreements with other states, or take other measures to facilitate the receipt of benefits for injury or death under chapters 616A to 617, inclusive, of NRS by volunteer health practitioners who reside in other states and may waive or modify requirements for filing, processing and paying claims that unreasonably burden the practitioners. To promote uniformity in the application of sections 2 to 30, inclusive, of this act with other states that enact similar legislation, the Division of Industrial Relations shall consult with, and consider the practices for filing, processing and paying claims by, agencies having similar authority in other states.

4. As used in this section, “injury” means a physical injury or mental injury, as described in NRS 616C.180, or a disease for which an employee of this State who is injured or contracts the disease in the course of the employee’s employment would be entitled to benefits under chapters 616A to 617, inclusive, of NRS.

Sec. 30. In applying and construing this Uniform Act, consideration must be given to the need to promote uniformity of the law with respect to its subject matter among states that enact it.

Sec. 31. NRS 414.040 is hereby amended to read as follows:

414.040 1. A Division of Emergency Management is hereby created within the Department of Public Safety. The Chief of the Division is appointed by and holds office at the pleasure of the Director of the Department of Public Safety. The Division is the State Agency for Emergency Management and the State Agency for Civil Defense for the purposes of the Compact ratified by the Legislature pursuant to NRS 415.010. The Chief is the State’s Director of Emergency Management and the State’s Director of Civil Defense for the purposes of that Compact.

2. The Chief may employ technical, clerical, stenographic and other personnel as may be required, and may make such expenditures therefor and for other expenses of his or her office within the appropriation therefor, or from other money made available to him or her for purposes of emergency management, as may be necessary to carry out the purposes of this chapter.

3. The Chief, subject to the direction and control of the Director, shall carry out the program for emergency management in this state. The Chief shall coordinate the activities of all organizations for emergency management within the State, maintain liaison with and cooperate with agencies and organizations of other states and of the Federal Government for emergency management and carry out such additional duties as may be prescribed by the Director.
4. The Chief shall assist in the development of comprehensive, coordinated plans for emergency management by adopting an integrated process, using the partnership of governmental entities, business and industry, volunteer organizations and other interested persons, for the mitigation of, preparation for, response to and recovery from emergencies or disasters. In adopting this process, the Chief shall conduct activities designed to:
   (a) Eliminate or reduce the probability that an emergency will occur or to reduce the effects of unavoidable disasters;
   (b) Prepare state and local governmental agencies, private organizations and other persons to be capable of responding appropriately if an emergency or disaster occurs by fostering the adoption of plans for emergency operations, conducting exercises to test those plans, training necessary personnel and acquiring necessary resources;
   (c) Test periodically plans for emergency operations to ensure that the activities of state and local governmental agencies, private organizations and other persons are coordinated;
   (d) Provide assistance to victims, prevent further injury or damage to persons or property and increase the effectiveness of recovery operations; and
   (e) Restore the operation of vital community life-support systems and return persons and property affected by an emergency or disaster to a condition that is comparable to or better than what existed before the emergency or disaster occurred.

5. **The Division shall perform the duties required pursuant to sections 2 to 30, inclusive, of this act.**

6. The Division shall perform the duties required pursuant to NRS 353.2753 at the request of a state agency or local government.

Sec. 31.5. Chapter 616A of NRS is hereby amended by adding thereto a new section to read as follows:

A volunteer health practitioner, as defined in section 19 of this act, who provides health or veterinary services pursuant to sections 2 to 30, inclusive, of this act, shall be deemed for the purposes of chapters 616A to 616D, inclusive, of NRS to be an employee of the host entity, as defined in section 13 of this act, or a registration system that qualifies pursuant to section 22 of this act, at the wage of $100 per month and, in the event of injury while the provisions of sections 2 to 30, inclusive, of this act apply to the volunteer health practitioner, is entitled to the benefits of those chapters.
Sec. 31.8. NRS 616A.025 is hereby amended to read as follows:

616A.025 As used in chapters 616A to 616D, inclusive, of NRS, unless the context otherwise requires, the words and terms defined in NRS 616A.030 to 616A.360, inclusive, and section 31.5 of this act have the meanings ascribed to them in those sections.

Sec. 32. (Deleted by amendment.)

Sec. 32.5. NRS 616A.105 is hereby amended to read as follows:

616A.105 “Employee” and “worker” are used interchangeably in chapters 616A to 616D, inclusive, of NRS and mean every person in the service of an employer under any appointment or contract of hire or apprenticeship, express or implied, oral or written, whether lawfully or unlawfully employed, and include, but not exclusively:

1. Aliens and minors.
2. All elected and appointed paid public officers.
3. Members of boards of directors of quasi-public or private corporations while rendering actual service for such corporations for pay.
4. Musicians providing music for hire, including members of local supporting bands and orchestras commonly known as house bands.
5. Volunteer health practitioners, as defined in section 19 of this act, who are providing health or veterinary services pursuant to sections 2 to 30, inclusive, of this act and are entitled to the benefits of chapters 616A to 616D, inclusive, of NRS pursuant to the provisions of section 29 of this act.

Sec. 32.8. NRS 616B.031 is hereby amended to read as follows:

616B.031 1. Except as otherwise provided in subsection 2, an insurer shall not issue a policy of industrial insurance to an employer that does not cover each employee of that employer who satisfies the definition of employee set forth in NRS 616A.105 to 616A.225, inclusive, and section 31.5 of this act.

2. If the employer is a contractor or subcontractor who is engaged in the construction of a project that is covered by a consolidated insurance program established pursuant to NRS 616B.710 to 616B.737, inclusive, an insurer may issue a policy of industrial insurance to that employer which does not cover an employee who:

(a) Is assigned to participate in the construction of the project that is covered by the consolidated insurance program; and
(b) Works exclusively at the site of the construction project that is covered by the consolidated insurance program.

Sec. 33. NRS 617.070 is hereby amended to read as follows:

617.070 “Employee” and “worker” are used interchangeably in this chapter and mean every person in the service of an employer under any appointment or contract of hire or apprenticeship, express or implied, oral or written, whether lawfully or unlawfully employed, and include, but not exclusively:

1. Aliens and minors.
2. All elected and appointed paid public officers.
3. Members of boards of directors of quasi-public or private corporations while rendering actual service for such corporations for pay.
4. Volunteer firefighters entitled to the benefits of chapters 616A to 616D, inclusive, of NRS pursuant to the provisions of NRS 616A.145.
5. Musicians providing music for hire, including members of local supporting bands and orchestras commonly known as house bands.
6. Volunteer health practitioners, as defined in section 19 of this act, who are providing health or veterinary services pursuant to sections 2 to 30, inclusive, of this act and are entitled to the benefits of chapters 616A to 616D, inclusive, of NRS pursuant to the provisions of section 29 of this act.

Sec. 33.5. The Division of Emergency Management of the Department of Public Safety shall adopt any regulations necessary to implement the provisions of this act on or before October 1, 2011.

Sec. 34. This act becomes effective upon passage and approval for the purpose of adopting regulations and on October 1, 2011, for all other purposes.