

**THE SIXTY-FIFTH DAY**

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CARSON CITY (Tuesday), April 11, 2017

Senate called to order at 11:06 a.m.

President pro Tempore Denis presiding.

Roll called.

All present.

Prayer by the Chaplain, Pastor J.J. Tuttle.

We gather together here, today, intent on doing good work. We seek to represent fairly and well those who have given us this task. May our efforts be blessed with insight guided by understanding and wisdom. We seek to serve with respect for all. May our personal faiths give us strength to act honestly and well in all matters before us.

AMEN.

Pledge of allegiance to the Flag.

By previous order of the Senate, the reading of the Journal is dispensed with, and the President pro Tempore and Secretary are authorized to make the necessary corrections and additions.

REPORTS OF COMMITTEES

*Mr. President pro Tempore:*

Your Committee on Commerce, Labor and Energy, to which was referred Senate Bill No. 55, has had the same under consideration, and begs leave to report the same back with the recommendation: Do pass.

KELVIN ATKINSON, *Chair*

*Mr. President pro Tempore:*

Your Committee on Education, to which were referred Senate Bills Nos. 19, 242, 518, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

Also, your Committee on Education, to which were referred Senate Bills Nos. 132, 224, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and re-refer to the Committee on Finance.

MOISES DENIS, *Chair*

*Mr. President pro Tempore:*

Your Committee on Government Affairs, to which was referred Senate Bill No. 136, has had the same under consideration, and begs leave to report the same back with the recommendation: Do pass, and re-refer to the Committee on Finance.

Also, your Committee on Government Affairs, to which was referred Senate Bill No. 26, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

DAVID R. PARKS, *Chair*

*Mr. President pro Tempore:*

Your Committee on Health and Human Services, to which were referred Senate Bills Nos. 326, 355, 388, 510, has had the same under consideration, and begs leave to report the same back with the recommendation: Do pass.

Also, your Committee on Health and Human Services, to which was re-referred Senate Bill No. 318, has had the same under consideration, and begs leave to report the same back with the recommendation: Do pass.

PAT SPEARMAN, *Chair*

*Mr. President pro Tempore:*

Your Committee on Legislative Operations and Elections, to which was referred Senate Bill No. 121, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

Also, your Committee on Legislative Operations and Elections, to which was referred Senate Bill No. 327, has had the same under consideration, and begs leave to report the same back with the recommendation: Re-refer to the Committee on Finance.

NICOLE J. CANNIZZARO, *Chair*

*Mr. President pro Tempore:*

Your Committee on Transportation, to which were referred Senate Bills Nos. 53, 149, 312, has had the same under consideration, and begs leave to report the same back with the recommendation: Amend, and do pass as amended.

MARK A. MANENDO, *Chair*

#### MOTIONS, RESOLUTIONS AND NOTICES

Senator Parks moved that Senate Bill No. 136, just reported out of Committee, be re-referred to the Committee on Finance.

Motion carried.

Senator Cannizzaro moved that Senate Bill No. 327, just reported out of Committee, be re-referred to the Committee on Finance.

Motion carried.

Senator Ford moved that Senate Bills Nos. 12, 27, 31, 39, 40, 41, 51, 75, 76, 118, 119, 125, 127, 128, 130, 138, 141, 156, 160, 163, 165, 171, 176, 206, 237, 251, 256, 258, 279, 283, 313, 412; Senate Joint Resolution No. 17 of the 78th Session be taken from the General File and placed on the General File for the next legislative day.

Motion carried.

#### SECOND READING AND AMENDMENT

Senate Bill No. 2.

Bill read second time.

The following amendment was proposed by the Committee on Health and Human Services:

Amendment No. 49.

SUMMARY—Revises provisions relating to the surrender of a newborn child to a provider of emergency services. (BDR 38-39)

AN ACT relating to the protection of children; revising provisions relating to the voluntary surrender of a newborn child to a provider of emergency services; revising provisions relating to the transfer of certain identifying information relating to parents of such children; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires a provider of emergency services to take possession of a child who appears to be not more than 30 days old when a parent voluntarily surrenders the child with no intent to return. (NRS 432B.630) Commonly known as the "Safe Haven Law," this provision authorizes the

agency which provides child welfare services to begin the process of terminating parental rights.

Section 7 of this bill prohibits a provider of emergency services from transferring identifying information about the parent who delivers a child to a provider of emergency services under the Safe Haven Law, thereby allowing the parent to retain anonymity, except when reasonable cause exists to believe that the child has been abused or neglected. Section 7 also requires such anonymity to be provided to the parent who delivers a child to a provider of emergency services regardless of whether the parent specifically makes a request for anonymity.

Under existing law, a parent who delivers a child to a provider of emergency services under the Safe Haven Law is entitled to notice that the child has been placed in protective custody and to notice of proceedings related to the termination of parental rights and other similar matters, unless the location of the parent is unknown. (NRS 128.060, ~~128.070~~, 432B.470, 432B.490, 432B.520, ~~511~~, 432B.550, 432B.580, 432B.590) Sections 1 ~~6~~ 5 and 6.3-9 of this bill remove that right with respect to the parent who voluntarily delivers a child under the Safe Haven Law. A parent of the child who does not participate in the delivery, however, remains entitled to such notice if the location of that parent is known and to notice by publication if not known.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN  
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 432B.470 is hereby amended to read as follows:

432B.470 1. A child taken into protective custody pursuant to NRS 432B.390 must be given a hearing, conducted by a judge, master or special master appointed by the judge for that particular hearing, within 72 hours, excluding Saturdays, Sundays and holidays, after being taken into custody, to determine whether the child should remain in protective custody pending further action by the court.

2. Except as otherwise provided in this subsection, notice of the time and place of the hearing must be given to a parent or other person responsible for the child's welfare:

- (a) By personal service of a written notice;
- (b) Orally; or

(c) If the parent or other person responsible for the child's welfare cannot be located after a reasonable effort, by posting a written notice on the door of the residence of the parent or other person.

↪ If the child was delivered to a provider of emergency services pursuant to NRS 432B.630, ~~[and the location of the parent is unknown, to the agency which provides child welfare services,]~~ the parent who delivered the child to the provider shall be deemed to have waived any right to notice of the hearing conducted pursuant to this section.

3. If notice is given by means of paragraph (b) or (c) of subsection 2, a copy of the notice must be mailed to the person at the last known address of the person within 24 hours after the child is placed in protective custody.

Sec. 2. NRS 432B.490 is hereby amended to read as follows:

432B.490 1. An agency which provides child welfare services:

(a) In cases where the death of a parent of the child is or may be the result of an act by the other parent that constitutes domestic violence pursuant to NRS 33.018, shall within 10 days after the hearing on protective custody initiate a proceeding in court by filing a petition which meets the requirements set forth in NRS 432B.510;

(b) In cases where a court issues an order keeping the child in protective custody pursuant to paragraph (b) of subsection 1 of NRS 432B.480, shall within 10 days after the hearing on protective custody, unless good cause exists, initiate a proceeding in court by filing a petition which meets the requirements set forth in NRS 432B.510 or recommend against any further action in court; or

(c) In cases where an investigation is made under NRS 432B.010 to 432B.400, inclusive, and a determination is made that the child is in need of protection but is not in imminent danger, may file a petition which meets the requirements set forth in NRS 432B.510.

2. If the agency recommends against further action, the court may, on its own motion, initiate proceedings when it finds that it is in the best interests of the child.

3. If a child has been placed in protective custody and if further action in court is taken, an agency which provides child welfare services shall make recommendations to the court concerning whether the child should be returned to the person responsible for the welfare of the child pending further action in court.

4. If, in a case described in paragraph (b) of subsection 1, an agency which provides child welfare services fails to initiate a proceeding in court by filing a petition which meets the requirements set forth in NRS 432B.510 within 10 days after the hearing on protective custody:

(a) The agency may recommend against further action and return the child to the custody of the person responsible for the welfare of the child; or

(b) Any party to the proceeding may schedule an additional hearing with the court which must take place before the next scheduled court date to determine whether the child should be returned to the person responsible for the welfare of the child pending further action by the court.

5. Except as otherwise provided in this subsection, notice of the time and place of a hearing scheduled pursuant to paragraph (b) of subsection 4 must be given to a parent or other person responsible for the welfare of the child:

(a) By personal service of a written notice;

(b) Orally; or

(c) If the parent or other person responsible for the welfare of the child cannot be located after a reasonable effort, by posting a written notice on the door of the residence of the parent or other person.

↪ If the child was delivered to a provider of emergency services pursuant to the provisions of NRS 432B.630, ~~and the location of the parent is unknown,~~

~~to the agency which provides child welfare services,]~~ the parent *who delivered the child to the provider* shall be deemed to have waived any *right to* notice of the hearing conducted pursuant to this section.

6. If notice of a hearing scheduled pursuant to paragraph (b) of subsection 4 is given by means of paragraph (b) or (c) of subsection 5, a copy of the notice must be mailed to the parent or other person responsible for the welfare of the child at his or her last known address within 24 hours after the petition is filed.

7. The court shall hold a hearing scheduled pursuant to paragraph (b) of subsection 4 to decide whether there remains reasonable cause to believe that it would be:

(a) Contrary to the welfare of the child for the child to reside at his or her home; or

(b) In the best interests of the child to keep the child outside of his or her home.

Sec. 3. NRS 432B.513 is hereby amended to read as follows:

432B.513 1. Except as otherwise provided in subsection 3, a person who submits a report or information to the court for consideration in a proceeding held pursuant to NRS 432B.466 to 432B.468, inclusive, or 432B.500 to 432B.590, inclusive, shall provide a copy of the report or information, to the extent that the data or information in the report or information is available pursuant to NRS 432B.290, to each parent or guardian of the child who is the subject of the proceeding and to the attorney of each parent or guardian not later than 72 hours before the proceeding.

2. If a person does not provide a copy of a report or information to a parent or guardian of a child and an attorney of the parent or guardian before a proceeding if required by subsection 1, the court or master:

(a) Shall provide the parent or guardian and the attorney of the parent or guardian an opportunity to review the report or information; and

(b) May grant a continuance of the proceeding until a later date that is agreed upon by all the parties to the proceeding if the parent or guardian or the attorney of the parent or guardian requests that the court grant the continuance so that the parent or guardian and the attorney of the parent or guardian may properly respond to the report or information.

3. If a child was delivered to a provider of emergency services pursuant to NRS 432B.630, ~~and the location of the parent of the child is unknown, to the agency which provides child welfare services,]~~ a copy of a report or information described in subsection 1 need not be sent to ~~that~~ the parent *who delivered the child to the provider* or the attorney of ~~that~~ ~~the~~ parent pursuant to subsection 1.

4. As used in this section, “person” includes, without limitation, a government, governmental agency or political subdivision of a government.

Sec. 4. NRS 432B.520 is hereby amended to read as follows:

432B.520 1. After a petition has been filed, the court shall direct the clerk to issue a summons requiring the person who has custody or control of the child to appear personally and bring the child before the court at a time and

place stated in the summons. If the person so summoned is other than a parent or guardian of the child, then the parent or guardian, or both, must also be notified by a similar summons of the pendency of the hearing and of the time and place appointed.

2. Summons may be issued requiring the appearance of any other person whose presence, in the opinion of the court, is necessary.

3. Each summons must include notice of the right of parties to counsel at the adjudicatory hearing. A copy of the petition must be attached to each summons.

4. Except as provided in subsection 5, the summons must be served by:

- (a) Personal service of a written notice; or
- (b) Registered or certified mail to the last known address of the person.

5. If the child was delivered to a provider of emergency services pursuant to NRS 432B.630 *by one parent* and the location of the *other parent who did not deliver the child* is unknown ~~to~~ *to the agency which provides child welfare services*, the summons must be served on ~~the~~ *that* parent by publication at least once a week for 3 consecutive weeks in a newspaper published in the county and if no such newspaper is published, then a newspaper published in this state that has a general circulation in the county. The failure of the parent to appear in the action after the service of summons on the parent pursuant to this paragraph shall be deemed to constitute a waiver by the parent of any further notice of the proceedings that would otherwise be required pursuant to this chapter. *The parent who delivered the child to a provider of emergency services pursuant to NRS 432B.630 shall be deemed to have waived any right to notice pursuant to this section.*

6. If it appears that the child is in such condition or surroundings that the welfare of the child requires that custody be immediately assumed by the court, the court may order, by endorsement upon the summons, that the person serving it shall at once deliver the child to an agency which provides child welfare services in whose custody the child must remain until the further order of the court.

7. If the summons cannot be served or the person who has custody or control of the child fails to obey it, or:

(a) In the judge's opinion, the service will be ineffectual or the welfare of the child requires that the child be brought forthwith into the custody of the court; or

(b) A person responsible for the child's welfare has absconded with the child or concealed the child from a representative of an agency which provides child welfare services, the court may issue a writ for the attachment of the child's person, commanding a law enforcement officer or a representative of an agency which provides child welfare services to place the child in protective custody.

Sec. 5. NRS 432B.550 is hereby amended to read as follows:

432B.550 1. If the court finds that a child is in need of protection, it may, by its order, after receipt and review of the report from the agency which provides child welfare services:

(a) Permit the child to remain in the temporary or permanent custody of the parents of the child or a guardian with or without supervision by the court or a person or agency designated by the court, and with or without retaining jurisdiction of the case, upon such conditions as the court may prescribe;

(b) Place the child in the temporary or permanent custody of a relative, a fictive kin or other person the court finds suitable to receive and care for the child with or without supervision, and with or without retaining jurisdiction of the case, upon such conditions as the court may prescribe; or

(c) Place the child in the temporary custody of a public agency or institution authorized to care for children, the local juvenile probation department, the local department of juvenile services or a private agency or institution licensed by the Department of Health and Human Services or a county whose population is 100,000 or more to care for such a child.

➔ In carrying out this subsection, the court may, in its sole discretion and in compliance with the requirements of chapter 159 of NRS, consider an application for the guardianship of the child. If the court grants such an application, it may retain jurisdiction of the case or transfer the case to another court of competent jurisdiction.

2. If, pursuant to subsection 1, a child is placed other than with a parent:

(a) The parent retains the right to consent to adoption, to determine the child's religious affiliation and to reasonable visitation, unless restricted by the court. If the custodian of the child interferes with these rights, the parent may petition the court for enforcement of the rights of the parent.

(b) The court shall set forth good cause why the child was placed other than with a parent.

3. If, pursuant to subsection 1, the child is to be placed with a relative or fictive kin, the court may consider, among other factors, whether the child has resided with a particular relative or fictive kin for 3 years or more before the incident which brought the child to the court's attention.

4. Except as otherwise provided in this subsection, a copy of the report prepared for the court by the agency which provides child welfare services must be sent to the custodian and the parent or legal guardian. If the child was delivered to a provider of emergency services pursuant to NRS 432B.630 ~~and the location of the~~ :

~~(a) The parent is unknown, to the agency which provides child welfare services, the report need not be sent to that the parent. who delivered the child to the provider shall be deemed to have waived his or her right to a copy of the report; and~~

(b) A copy of the report must be sent to the parent who did not deliver the child to the provider, if the location of such parent is known.

5. In determining the placement of a child pursuant to this section, if the child is not permitted to remain in the custody of the parents of the child or guardian:

(a) It must be presumed to be in the best interests of the child to be placed together with the siblings of the child.

(b) Preference must be given to placing the child in the following order:

(1) With any person related within the fifth degree of consanguinity to the child or a fictive kin, and who is suitable and able to provide proper care and guidance for the child, regardless of whether the relative or fictive kin resides within this State.

(2) In a foster home that is licensed pursuant to chapter 424 of NRS.

6. Any search for a relative with whom to place a child pursuant to this section must be completed within 1 year after the initial placement of the child outside of the home of the child. If a child is placed with any person who resides outside of this State, the placement must be in accordance with NRS 127.330.

7. Within 60 days after the removal of a child from the home of the child, the court shall:

(a) Determine whether:

(1) The agency which provides child welfare services has made the reasonable efforts required by paragraph (a) of subsection 1 of NRS 432B.393; or

(2) No such efforts are required in the particular case; and

(b) Prepare an explicit statement of the facts upon which its determination is based.

8. As used in this section, "fictive kin" means a person who is not related by blood to a child but who has a significant emotional and positive relationship with the child.

Sec. 6. NRS 432B.560 is hereby amended to read as follows:

432B.560 1. The court may also order:

(a) The child, a parent or the guardian to undergo such medical, psychiatric, psychological, or other care or treatment as the court considers to be in the best interests of the child.

(b) A parent or guardian to refrain from:

(1) Any harmful or offensive conduct toward the child, the other parent, the custodian of the child or the person given physical custody of the child; and

(2) Visiting the child if the court determines that the visitation is not in the best interest of the child.

(c) A reasonable right of visitation for a grandparent of the child if the child is not permitted to remain in the custody of the parents of the child.

2. The court shall order a parent or guardian to pay to the custodian an amount sufficient to support the child while the child is in the care of the custodian pursuant to an order of the court, unless the child was delivered to a provider of emergency services pursuant to NRS 432B.630, ~~and the location~~



~~of the parent is unknown, to the agency which provides child welfare services.~~

Payments for the obligation of support must be determined in accordance with NRS 125B.070 and 125B.080, but must not exceed the reasonable cost of the child's care, including food, shelter, clothing, medical care and education. An order for support made pursuant to this subsection must:

- (a) Require that payments be made to the appropriate agency or office;
- (b) Provide that the custodian is entitled to a lien on the obligor's property in the event of nonpayment of support; and
- (c) Provide for the immediate withholding of income for the payment of support unless:

- (1) All parties enter into an alternative written agreement; or
- (2) One party demonstrates and the court finds good cause to postpone the withholding.

3. A court that enters an order pursuant to subsection 2 shall ensure that the social security number of the parent or guardian who is the subject of the order is:

(a) Provided to the Division of Welfare and Supportive Services of the Department of Health and Human Services.

(b) Placed in the records relating to the matter and, except as otherwise required to carry out a specific statute, maintained in a confidential manner.

*Sec. 6.3. NRS 432B.580 is hereby amended to read as follows:*

432B.580 1. Except as otherwise provided in this section and NRS 432B.513, if a child is placed pursuant to NRS 432B.550 other than with a parent, the placement must be reviewed by the court at least semiannually, and within 90 days after a request by a party to any of the prior proceedings. Unless the parent, guardian or the custodian objects to the referral, the court may enter an order directing that the placement be reviewed by a panel appointed pursuant to NRS 432B.585.

2. An agency acting as the custodian of the child shall, before any hearing for review of the placement of a child, submit a report to the court, or to the panel if it has been designated to review the matter, which includes:

(a) An evaluation of the progress of the child and the family of the child and any recommendations for further supervision, treatment or rehabilitation.

(b) Information concerning the placement of the child in relation to the child's siblings, including, without limitation:

- (1) Whether the child was placed together with the siblings;
- (2) Any efforts made by the agency to have the child placed together with the siblings;
- (3) Any actions taken by the agency to ensure that the child has contact with the siblings; and

(4) If the child is not placed together with the siblings:

(I) The reasons why the child is not placed together with the siblings; and

(II) A plan for the child to visit the siblings, which must be approved by the court.

(c) A copy of an academic plan developed for the child pursuant to NRS 388.155, 388.165 or 388.205.

(d) A copy of any explanations regarding medication that has been prescribed for the child that have been submitted by a foster home pursuant to NRS 424.0383.

3. Except as otherwise provided in this subsection, a copy of the report submitted pursuant to subsection 2 must be given to the parents, the guardian ad litem and the attorney, if any, representing the parent or the child. If the child was delivered to a provider of emergency services pursuant to NRS 432B.630 and the parent has not appeared in the action, the report need not be sent to that parent.

4. After a plan for visitation between a child and the siblings of the child submitted pursuant to subparagraph (4) of paragraph (b) of subsection 2 has been approved by the court, the agency which provides child welfare services must request the court to issue an order requiring the visitation set forth in the plan for visitation. If a person refuses to comply with or disobeys an order issued pursuant to this subsection, the person may be punished as for a contempt of court.

5. The court or the panel shall hold a hearing to review the placement, unless the parent, guardian or custodian files a motion with the court to dispense with the hearing. If the motion is granted, the court or panel may make its determination from any report, statement or other information submitted to it.

6. Except as otherwise provided in ~~this~~ subsection 7 and subsection 5 of NRS 432B.520, notice of the hearing must be given by registered or certified mail to:

- (a) All the parties to any of the prior proceedings;
- (b) Any persons planning to adopt the child;
- (c) A sibling of the child, if known, who has been granted a right to visitation of the child pursuant to NRS 127.171 and his or her attorney, if any; and
- (d) Any other relatives of the child or providers of foster care who are currently providing care to the child.

7. The notice of the hearing required to be given pursuant to subsection 6:

(a) Must include a statement indicating that if the child is placed for adoption the right to visitation of the child is subject to the provisions of NRS 127.171;

(b) Must not include any confidential information described in NRS 127.140; ~~and~~

(c) Need not be given to a parent whose rights have been terminated pursuant to chapter 128 of NRS or who has voluntarily relinquished the child for adoption pursuant to NRS 127.040. ~~and~~ *and*

(d) Need not be given to a parent who delivered a child to a provider of emergency services pursuant to NRS 432B.630.

8. The court or panel may require the presence of the child at the hearing and shall provide to each person to whom notice was given pursuant to subsection 6 a right to be heard at the hearing.

9. The court or panel shall review:

- (a) The continuing necessity for and appropriateness of the placement;
- (b) The extent of compliance with the plan submitted pursuant to subsection 2 of NRS 432B.540;
- (c) Any progress which has been made in alleviating the problem which resulted in the placement of the child; and
- (d) The date the child may be returned to, and safely maintained in, the home or placed for adoption or under a legal guardianship.

10. The provision of notice and a right to be heard pursuant to this section does not cause any person planning to adopt the child, any sibling of the child or any other relative, any adoptive parent of a sibling of the child or a provider of foster care to become a party to the hearing.

*Sec. 6.7. NRS 432B.590 is hereby amended to read as follows:*

432B.590 1. Except as otherwise provided in *subsection 2 and* NRS 432B.513, the court shall hold a hearing concerning the permanent placement of a child:

- (a) Not later than 12 months after the initial removal of the child from the home of the child and annually thereafter.
- (b) Within 30 days after making any of the findings set forth in subsection 3 of NRS 432B.393.

↪ Notice of this hearing must be given by registered or certified mail to all the persons to whom notice must be given pursuant to subsection 6 of NRS 432B.580.

*2. A parent who delivered a child to a provider of emergency services pursuant to NRS 432B.630 shall be deemed to have waived any right to notice pursuant to this section.*

3. The court may require the presence of the child at the hearing and shall provide to each person to whom notice was given pursuant to subsection 1 a right to be heard at the hearing.

~~3.~~ 4. At the hearing, the court shall review any plan for the permanent placement of the child adopted pursuant to NRS 432B.553 and, if the goal of the plan is a permanent living arrangement other than reunification with his or her parents, placement for adoption, placement with a legal guardian or placement with a relative, ask the child about his or her desired permanent living arrangement. After doing so, the court must determine:

- (a) Whether the agency with legal custody of the child has made the reasonable efforts required by subsection 1 of NRS 432B.553;
- (b) Whether, and if applicable when:
  - (1) The child should be returned to the parents of the child or placed with other relatives;
  - (2) It is in the best interests of the child to:

(I) Initiate proceedings to terminate parental rights pursuant to chapter 128 of NRS so that the child can be placed for adoption;

(II) Initiate proceedings to establish a guardianship pursuant to chapter 159 of NRS; or

(III) Establish a guardianship in accordance with NRS 432B.466 to 432B.468, inclusive; or

(3) The agency with legal custody of the child has produced documentation of its conclusion that there is a compelling reason for the placement of a child who has attained the age of 16 years in another permanent living arrangement;

(c) If the child will not be returned to the parents of the child, whether the agency with legal custody of the child fully considered placement options both within and outside of this State;

(d) If the child has attained the age of 14 years, whether the child will receive the services needed to assist the child in transitioning to independent living; and

(e) If the child has been placed outside of this State, whether the placement outside of this State continues to be appropriate for and in the best interests of the child.

~~4.~~ 5. The court shall prepare an explicit statement of the facts upon which each of its determinations is based pursuant to subsection ~~3.~~ 4. If the court determines that it is not in the best interests of the child to be returned to his or her parents, or to be placed for adoption, with a legal guardian or with a relative, the court must include compelling reasons for this determination and an explanation of those reasons in its statement of the facts.

~~5.~~ 6. If the court determines that it is in the best interests of the child to terminate parental rights, the court shall use its best efforts to ensure that the procedures required by chapter 128 of NRS are completed within 6 months after the date the court makes that determination, including, without limitation, appointing a private attorney to expedite the completion of the procedures.

~~6.~~ 7. The provisions of this section do not limit the jurisdiction of the court to review any decisions of the agency with legal custody of the child regarding the permanent placement of the child.

~~7.~~ 8. If a child has been placed outside of the home and has resided outside of the home pursuant to that placement for 14 months of any 20 consecutive months, the best interests of the child must be presumed to be served by the termination of parental rights.

~~8.~~ 9. This hearing may take the place of the hearing for review required by NRS 432B.580.

~~9.~~ 10. The provision of notice and a right to be heard pursuant to this section does not cause any person planning to adopt the child, any sibling of the child or any other relative, any adoptive parent of a sibling of the child or a provider of foster care to become a party to the hearing.

Sec. 7. NRS 432B.630 is hereby amended to read as follows:

432B.630 1. A provider of emergency services shall take immediate possession of a child who is or appears to be not more than 30 days old:

(a) When:

(1) The child is voluntarily delivered to the provider by a parent of the child; and

(2) The parent does not express an intent to return for the child; or

(b) When the child is delivered to the provider by another provider of emergency services pursuant to paragraph (b) of subsection 2.

2. A provider of emergency services who takes possession of a child pursuant to subsection 1, *including, without limitation, the hospital at which the child was born*, shall:

(a) Whenever possible, inform the parent of the child that:

(1) By allowing the provider to take possession of the child, the parent is presumed to have abandoned the child ~~[ ] pursuant to NRS 128.097;~~

(2) ~~[By failing or refusing to provide an address where the parent can be located, the ]~~ The parent waives any *right to* notice of ~~[the ]~~ a hearing ~~[to be conducted]~~ pursuant to NRS ~~[432B.470; , 432B.490 and 432B.520; and ]~~ 128.060 or 128.070 or 432B.410 to 432B.590, inclusive; and

(3) Unless the parent contacts the local agency which provides child welfare services, action will be taken to terminate his or her parental rights regarding the child.

(b) Perform any act necessary to maintain and protect the physical health and safety of the child. If the provider is a public fire-fighting agency, a volunteer fire department, a law enforcement agency or an ambulance service, the provider shall immediately cause the safe delivery of the child to a hospital, an obstetric center or an independent center for emergency medical care licensed pursuant to chapter 449 of NRS.

(c) As soon as reasonably practicable but not later than 24 hours after the provider takes possession of the child, report that possession to an agency which provides child welfare services, if the provider is not an agency which provides child welfare services, and, if the provider is not a law enforcement agency, to a law enforcement agency. The law enforcement agency shall notify the Clearinghouse and investigate further, if necessary, using any other resources to determine whether the child has been reported as a missing child. Upon conclusion of the investigation, the law enforcement agency shall inform the agency which provides child welfare services of its determination. The agency which provides child welfare services shall maintain that information for statistical and research purposes.

(d) Except as otherwise provided in this paragraph, transfer any information that the provider of emergency services has obtained regarding the child and any parent of the child who did not deliver the child to the provider to the agency which provides child welfare services that takes the child into protective custody pursuant to NRS 432B.390, except that any identifying information relating to the parent who delivered the child to the

*provider must not be transferred to the agency which provides child welfare services, regardless of whether the parent has requested anonymity. The provisions of this paragraph do not prohibit a provider of emergency services from transferring identifying information relating to the parent to the agency which provides child welfare services if the agency has reasonable cause to believe that the child has been abused or neglected.*

3. A parent who delivers a child to a provider of emergency services pursuant to paragraph (a) of subsection 1:

(a) Shall leave the child:

(1) In the physical possession of a person who the parent has reasonable cause to believe is an employee of the provider; or

(2) On the property of the provider in a manner and location that the parent has reasonable cause to believe will not threaten the physical health or safety of the child, and immediately contact the provider, through the local emergency telephone number or otherwise, and inform the provider of the delivery and location of the child. A provider of emergency services is not liable for any civil damages as a result of any harm or injury sustained by a child after the child is left on the property of the provider pursuant to this subparagraph and before the provider is informed of the delivery and location of the child pursuant to this subparagraph or the provider takes physical possession of the child, whichever occurs first.

(b) Shall be deemed to have given consent to the performance of all necessary emergency services and care for the child.

(c) Must not be required to provide any background or medical information regarding the child, but may voluntarily do so.

(d) Unless there is reasonable cause to believe that the child has been abused or neglected, excluding the mere fact that the parent has delivered the child to the provider pursuant to subsection 1:

(1) Must not be required to disclose any identifying information, but may voluntarily do so;

(2) Must be allowed to leave at any time; and

(3) Must not be pursued or followed.

4. As used in this section:

(a) "Clearinghouse" has the meaning ascribed to it in NRS 432.150.

(b) "Provider of emergency services" means:

(1) A hospital, an obstetric center or an independent center for emergency medical care licensed pursuant to chapter 449 of NRS;

(2) A public fire-fighting agency, including, without limitation, a volunteer fire department;

(3) A law enforcement agency; ~~or~~

(4) An ambulance service that holds a permit issued pursuant to the provisions of chapter 450B of NRS, ~~§~~; *or*

(5) An agency which provides child welfare services.

Sec. 8. NRS 128.060 is hereby amended to read as follows:

128.060 1. After a petition has been filed, unless the party or parties to be served voluntarily appear and consent to the hearing, the court shall direct the clerk to issue a notice, reciting briefly the substance of the petition and stating the date set for the hearing thereof, and requiring the person served therewith to appear before the court at the time and place if that person desires to oppose the petition.

2. ~~The~~ Except as otherwise provided in subsection 4, the following persons must be personally served with the notice:

(a) The father or mother of the minor person, if residing within this State, and if his or her place of residence is known to the petitioner, or, if there is no parent so residing, or if the place of residence of the father or mother is not known to the petitioner, then the nearest known relative of that person, if there is any residing within the State, and if his or her residence and relationship are known to the petitioner; and

(b) The minor's legal custodian or guardian, if residing within this State and if his or her place of residence is known to the petitioner.

3. If the petitioner or the child is receiving public assistance, the petitioner shall mail a copy of the notice of hearing and a copy of the petition to the Chief of the Child Support Enforcement Program of the Division of Welfare and Supportive Services of the Department of Health and Human Services by registered or certified mail return receipt requested at least 45 days before the hearing.

4. A parent who delivered a child to a provider of emergency services pursuant to NRS 432B.630 shall be deemed to have waived any right to notice pursuant to this section.

Sec. 9. NRS 128.070 is hereby amended to read as follows:

128.070 1. ~~When~~ Except as otherwise provided in subsection 6, when the father or mother of a minor child or the child's legal custodian or guardian resides out of the State, has departed from the State, or cannot, after due diligence, be found within the State, or conceals himself or herself to avoid the service of the notice of hearing, and the fact appears, by affidavit, to the satisfaction of the court thereof, and it appears, either by affidavit or by a verified petition on file, that the named father or mother or custodian or guardian is a necessary or proper party to the proceedings, the court may grant an order that the service be made by the publication of the notice of hearing. When the affidavit is based on the fact that the father or mother or custodian or guardian resides out of the State, and his or her present address is unknown, it is a sufficient showing of that fact if the affiant states generally in the affidavit that:

(a) At a previous time the person resided out of this State in a certain place (naming the place and stating the latest date known to the affiant when the person so resided there);

(b) That place is the last place in which the person resided to the knowledge of the affiant;

(c) The person no longer resides at that place;

(d) The affiant does not know the present place of residence of the person or where the person can be found; and

(e) The affiant does not know and has never been informed and has no reason to believe that the person now resides in this State.

➔ In such case, it shall be presumed that the person still resides and remains out of the State, and the affidavit shall be deemed to be a sufficient showing of due diligence to find the father or mother or custodian or guardian.

2. The order must direct the publication to be made in a newspaper, to be designated by the court, for a period of 4 weeks, and at least once a week during that time. In case of publication, where the residence of a nonresident or absent father or mother or custodian or guardian is known, the court shall also direct a copy of the notice of hearing and petition to be deposited in the post office, directed to the person to be served at his or her place of residence. When publication is ordered, personal service of a copy of the notice of hearing and petition, out of the State, is equivalent to completed service by publication and deposit in the post office, and the person so served has 20 days after the service to appear and answer or otherwise plead. The service of the notice of hearing shall be deemed complete in cases of publication at the expiration of 4 weeks from the first publication, and in cases when a deposit of a copy of the notice of hearing and petition in the post office is also required, at the expiration of 4 weeks from the deposit.

3. Personal service outside the State upon a father or mother over the age of 18 years or upon the minor's legal custodian or guardian may be made in any action where the person served is a resident of this State. When the facts appear, by affidavit, to the satisfaction of the court, and it appears, either by affidavit or by a verified petition on file, that the person in respect to whom the service is to be made is a necessary or proper party to the proceedings, the court may grant an order that the service be made by personal service outside the State. The service must be made by delivering a copy of the notice of hearing together with a copy of the petition in person to the person served. The methods of service are cumulative, and may be utilized with, after or independently of other methods of service.

4. Whenever personal service cannot be made, the court may require, before ordering service by publication or by publication and mailing, such further and additional search to determine the whereabouts of the person to be served as may be warranted by the facts stated in the affidavit of the petitioner to the end that actual notice be given whenever possible.

5. If one or both of the parents of the minor is unknown, or if the name of either or both of the parents of the minor is uncertain, then those facts must be set forth in the affidavit and the court shall order the notice to be directed and addressed to either the father or the mother of the person, and to all persons claiming to be the father or mother of the person. The notice, after the caption, must be addressed substantially as follows: "To the father and mother of the above-named person, and to all persons claiming to be the father or mother of that person."



6. A parent who delivered a child to a provider of emergency services pursuant to NRS 432B.630 shall be deemed to have waived any right to notice pursuant to this section.

Senator Manendo moved the adoption of the amendment.

Remarks by Senator Manendo.

Amendment No. 49 to Senate Bill No. 2 clarifies that: the parent who delivers a child to a provider of emergency services waives his or her right to a copy of the dispositional report, and if the location of the other parent is unknown to the child welfare agency, the report need not be sent to that parent; and information obtained on the non-delivering parent must be provided to the child welfare agency to assist the agency with the notification and service of report.

The amendment also adds a child welfare agency to the list of entities that may take possession of a child less than 30 days old when voluntarily surrendered by a parent with no intent to return.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 60.

Bill read second time.

The following amendment was proposed by the Committee on Health and Human Services:

Amendment No. 90.

SUMMARY—Revises provisions governing Medicaid payments for ground emergency medical transportation services. (BDR 38-411)

AN ACT relating to Medicaid; ~~requiring~~ authorizing the Director of the Department of Health and Human Services to include in the State Plan for Medicaid voluntary programs through which certain governmental entities and Indian tribes may obtain supplemental payments for providing ground emergency medical transportation services to recipients of Medicaid; requiring a participating governmental entity or Indian tribe to reimburse the Department for the costs of implementing and administering ~~the~~ any such program; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Federal law requires the Federal Government to pay to each state for which the Federal Government has approved a State Plan for Medicaid a certain percentage of the total amount expended as medical assistance under the State Plan. The states are responsible for the remaining share of such expenditures. (42 U.S.C. § 1396b(a)) Federal law also allows certain governmental entities and federally recognized Indian tribes to receive supplemental reimbursements in addition to the federal payments discussed above for certain health care services, including ground emergency medical transportation services, pursuant to a State Plan for Medicaid. (42 U.S.C. §§ 1396a and 1396b; 42 C.F.R. §§ 433.50-433.74)

Section 10 of this bill ~~requires~~ authorizes the Director of the Department of Health and Human Services to include in the State Plan for Medicaid a voluntary program whereby such a governmental entity or Indian tribe may receive supplemental reimbursements, in addition to the payments the governmental entity or Indian tribe would otherwise receive from Medicaid,

for ground emergency medical transportation services which are provided to recipients of Medicaid. In order to receive such reimbursements, the governmental entity or Indian tribe must: (1) hold a permit to operate an ambulance or vehicle of a fire-fighting agency; (2) participate in the State Plan for Medicaid; (3) enter into an agreement with the Department to reimburse the Department for the costs of implementing and administering the program; (4) pay the nonfederal share of the expenditures arising from providing such services; (5) certify that the claimed expenditures are eligible for federal financial participation; (6) submit to the Department any required evidence of the claimed expenditures; and (7) maintain any records required by the Department.

Section 11 of this bill ~~requires~~ authorizes the Director to include in the State Plan a voluntary program to provide increased "capitation" (per patient) payments to a governmental entity or Indian tribe for ground emergency medical transportation services which are rendered pursuant to a contract or other arrangement with a Medicaid managed care plan. In order to participate in ~~the~~ such a program, a governmental entity, Indian tribe or managed care plan is required to enter into an agreement with the Department to: (1) comply with any request made by the Department to provide any information or data necessary to claim federal money or obtain federal approval; and (2) reimburse the Department for the administrative costs of the Department for implementing and administering the program. ~~The~~ A program would require the governmental entity or Indian tribe to make intergovernmental transfers of money to the Department in an amount corresponding with the amount of money spent rendering ground emergency medical transportation services. The Department would then use that money and money from the Federal Government to make increased capitation payments. ~~Section~~ If a program to provide increased capitation payments is established, section 11 ~~also~~ requires the Department to collect from each intergovernmental transfer a fee of 20 percent of the nonfederal share paid to the Department.

Sections 10 and 11 also provide that supplemental reimbursements and increased capitation payments will be paid only to the extent approved by the Federal Government.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN  
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 422 of NRS is hereby amended by adding thereto the provisions set forth as sections 2 to 11, inclusive, of this act.

Sec. 2. *As used in sections 2 to 11, inclusive, of this act, unless the context otherwise requires, the words and terms defined in sections 3 to 9, inclusive, of this act have the meanings ascribed to them in those sections.*

Sec. 3. *"Advanced emergency medical technician" has the meaning ascribed to it in NRS 450B.025.*

Sec. 4. *"Ambulance" has the meaning ascribed to it in NRS 450B.040.*

Sec. 5. *"Emergency medical technician" has the meaning ascribed to it in NRS 450B.065.*

Sec. 6. "Fire-fighting agency" has the meaning ascribed to it in NRS 450B.072.

Sec. 7. "Governmental provider" means a provider of ground emergency medical transportation services that is owned or operated by a state or local governmental entity or federally recognized Indian tribe.

Sec. 8. "Ground emergency medical transportation services" means emergency medical transportation services provided by an ambulance or a vehicle of a fire-fighting agency, including, without limitation, services provided by emergency medical technicians, advanced emergency medical technicians and paramedics in prestabilizing patients and preparing patients for transport.

Sec. 9. "Paramedic" has the meaning ascribed to it in NRS 450B.095.

Sec. 10. 1. The Director ~~shall~~ may include in the State Plan for Medicaid a voluntary program to provide supplemental reimbursements for ground emergency medical transportation services which are provided to recipients of Medicaid. ~~The~~ If such a program is included in the State Plan for Medicaid, the program must:

(a) Provide that a governmental provider receive, in addition to the rate of payment that the governmental entity or Indian tribe would otherwise receive for ground emergency medical transportation services provided to recipients of Medicaid, supplemental reimbursements for such services if the governmental provider meets the requirements of subsection 2; and

(b) Be implemented without money from the State General Fund.

2. A governmental provider is not required to participate in ~~the~~ a program established pursuant to this section. ~~4~~ If a program is established pursuant to this section, a governmental provider that wishes to participate and receive the supplemental reimbursements described in subsection 1 must:

(a) Hold a permit to operate an ambulance or a permit to operate a vehicle of a fire-fighting agency at the scene of an emergency issued pursuant to NRS 450B.200;

(b) Participate as a provider in the State Plan for Medicaid;

(c) Enter into an agreement with the Department to reimburse the Department for the costs of implementing and administering the program;

(d) Submit to the Department documentation supporting the amount claimed as expenditures for ground emergency medical transportation services provided to recipients of Medicaid and certifying that the claimed expenditures are eligible for federal financial participation in accordance with 42 C.F.R. § 433.51;

(e) Submit to the Department any evidence required by the Department to support the certification required by paragraph (d) and any data required by the Department to determine the appropriate amount to claim as expenditures that qualify for federal financial participation in accordance with the requirements of 42 C.F.R. § 433.51; and

(f) Prepare and maintain any records required by the Department in an easily accessible manner.

3. *The nonfederal share of the amount claimed as expenditures pursuant to paragraph (d) of subsection 2 must be absorbed by the governmental provider.*

4. ~~The~~ If a program is established pursuant to this section, the Department shall:

(a) *Evaluate the information submitted pursuant to subsection 2 and submit claims for reimbursement to the Centers for Medicare and Medicaid Services of the United States Department of Health and Human Services for the expenditures that the Department determines qualify for federal financial participation in accordance with the requirements of 42 C.F.R. § 433.51.*

(b) *Obtain prior approval from the Centers for Medicare and Medicaid Services of the manner in which supplemental reimbursements will be calculated and distributed pursuant to this section.*

(c) *Calculate and distribute supplemental reimbursements in the manner approved by the Centers for Medicare and Medicaid Services.*

(d) *Cooperate with the Centers for Medicare and Medicaid Services in carrying out the program established pursuant to this section and comply with all requirements of the Centers for Medicare and Medicaid Services, including, without limitation, those prescribed by 42 C.F.R. § 433.74, and any other applicable federal law.*

(e) *Carry out the program established pursuant to this section only to the extent approved by the Centers for Medicare and Medicaid Services.*

(f) *Annually submit any necessary materials to the Centers for Medicare and Medicaid Services to ensure that claims for federal financial participation include only expenditures authorized under federal law.*

5. *Supplemental reimbursements for ground emergency medical transportation services paid to a governmental provider pursuant to this section:*

(a) *Must not exceed the amount of federal financial participation received for claimed expenditures submitted pursuant to paragraph (d) of subsection 2; and*

(b) *Must not, when combined with all other payments received for the ground emergency medical transportation services pursuant to the State Plan for Medicaid, exceed the costs of the governmental provider for providing the ground emergency medical transportation services.*

Sec. 11. 1. *The Director ~~shall~~ may, in consultation with governmental providers and Medicaid managed care plans, develop and include in the State Plan for Medicaid a voluntary program to provide increased capitation payments to governmental providers and Medicaid managed care plans for ground emergency medical transportation services which are rendered pursuant to a contract or other arrangement between a governmental provider and a Medicaid managed care plan. ~~The~~ Any such program must be implemented without money from the State General Fund.*

2. ~~At~~ If a program is established pursuant to this section, a governmental provider or Medicaid managed care plan that wishes to participate in the

program ~~established pursuant to this section~~ must enter into an agreement with the Department to:

(a) Comply with any request by the Department for information or data necessary to claim federal money or obtain federal approval in connection with the program; and

(b) Reimburse the Department as provided in subsection 7 for the administrative costs incurred by the Department in implementing and administering the program.

3. A governmental provider is not required to participate in ~~the~~ a program established pursuant to this section. In addition to complying with the requirements of subsection 2, a governmental provider that wishes to participate in ~~the~~ a program established pursuant to this section must:

(a) Hold a permit to operate an ambulance or a permit to operate a vehicle of a fire-fighting agency at the scene of an emergency issued pursuant to NRS 450B.200; and

(b) Provide ground emergency medical services to recipients of Medicaid pursuant to a contract or other arrangement with a Medicaid managed care plan.

4. ~~4.1~~ If a program is established pursuant to this section, a governmental provider that meets the requirements of subsections 2 and 3 and wishes to receive increased capitation payments must make an intergovernmental transfer of money to the Department in an amount corresponding with the amount that the governmental provider has spent on ground emergency medical transportation services. To the extent that such intergovernmental transfers of money are made by and accepted from a governmental provider, the Department shall make increased capitation payments to the applicable Medicaid managed care plan. To the extent permissible under federal law, the increased capitation payments must be in amounts actuarially equivalent to or greater than the supplemental payments available under the program established pursuant to section 10 of this act for governmental providers who provide services on a fee-for-service basis.

5. Except as otherwise provided in subsection 6, all money associated with intergovernmental transfers made and accepted pursuant to subsection 4 must be used to make additional payments to governmental providers under the program established pursuant to this section. A Medicaid managed care plan shall pay all of any increased capitation payments made pursuant to subsection 4 to a governmental provider for ground emergency medical transportation services pursuant to a contract or other arrangement with the Medicaid managed care plan.

6. The Department ~~shall~~ may implement the program described in this section only to the extent that the program is approved by the Centers for Medicare and Medicaid Services and federal financial participation is available. To the extent authorized by federal law, the Department may implement the program for ground emergency medical transportation services provided before the effective date of this section.

7. ~~The~~ If a program is established pursuant to this section, the Department shall collect from each intergovernmental transfer of money made under the provisions of this section an administrative fee of 20 percent of the nonfederal share paid to the Department. The payment of such a fee is an allowable cost for Medicaid reimbursement purposes.

8. *If the Director determines that payments made under the provisions of this section do not comply with federal requirements relating to Medicaid, the Director may:*

- (a) *Return or refuse to accept an intergovernmental transfer; or*
- (b) *Adjust any payment made under the provisions of this section to comply with federal requirements relating to Medicaid.*

9. *As used in this section, "Medicaid managed care plan" means a health maintenance organization that provides health care services through managed care to recipients of Medicaid under the State Plan for Medicaid.*

Sec. 12. NRS 232.320 is hereby amended to read as follows:

232.320 1. The Director:

(a) Shall appoint, with the consent of the Governor, administrators of the divisions of the Department, who are respectively designated as follows:

- (1) The Administrator of the Aging and Disability Services Division;
- (2) The Administrator of the Division of Welfare and Supportive Services;
- (3) The Administrator of the Division of Child and Family Services;
- (4) The Administrator of the Division of Health Care Financing and Policy; and
- (5) The Administrator of the Division of Public and Behavioral Health.

(b) Shall administer, through the divisions of the Department, the provisions of chapters 63, 424, 425, 427A, 432A to 442, inclusive, 446 to 450, inclusive, 458A and 656A of NRS, NRS 127.220 to 127.310, inclusive, 422.001 to 422.410, inclusive, *and sections 2 to 11, inclusive, of this act*, 422.580, 432.010 to 432.133, inclusive, 432B.621 to 432B.626, inclusive, 444.002 to 444.430, inclusive, and 445A.010 to 445A.055, inclusive, and all other provisions of law relating to the functions of the divisions of the Department, but is not responsible for the clinical activities of the Division of Public and Behavioral Health or the professional line activities of the other divisions.

(c) Shall administer any state program for persons with developmental disabilities established pursuant to the Developmental Disabilities Assistance and Bill of Rights Act of 2000, 42 U.S.C. §§ 15001 et seq.

(d) Shall, after considering advice from agencies of local governments and nonprofit organizations which provide social services, adopt a master plan for the provision of human services in this State. The Director shall revise the plan biennially and deliver a copy of the plan to the Governor and the Legislature at the beginning of each regular session. The plan must:

(1) Identify and assess the plans and programs of the Department for the provision of human services, and any duplication of those services by federal, state and local agencies;

(2) Set forth priorities for the provision of those services;

(3) Provide for communication and the coordination of those services among nonprofit organizations, agencies of local government, the State and the Federal Government;

(4) Identify the sources of funding for services provided by the Department and the allocation of that funding;

(5) Set forth sufficient information to assist the Department in providing those services and in the planning and budgeting for the future provision of those services; and

(6) Contain any other information necessary for the Department to communicate effectively with the Federal Government concerning demographic trends, formulas for the distribution of federal money and any need for the modification of programs administered by the Department.

(e) May, by regulation, require nonprofit organizations and state and local governmental agencies to provide information regarding the programs of those organizations and agencies, excluding detailed information relating to their budgets and payrolls, which the Director deems necessary for the performance of the duties imposed upon him or her pursuant to this section.

(f) Has such other powers and duties as are provided by law.

2. Notwithstanding any other provision of law, the Director, or the Director's designee, is responsible for appointing and removing subordinate officers and employees of the Department, other than the State Public Defender of the Office of State Public Defender who is appointed pursuant to NRS 180.010.

Sec. 13. 1. This section becomes effective upon passage and approval.

2. Sections 1 to 12, inclusive, of this act become effective upon passage and approval for the purpose of performing any tasks necessary to obtain the approval of the Centers for Medicare and Medicaid Services for ~~the programs described in sections 10 and 11~~ a program established pursuant to section 10 or 11 of this act.

3. For all other purposes:

(a) Sections 1 to 9, inclusive, and 12 of this act become effective on the date:

(1) That ~~the~~ a program to provide supplemental reimbursements for ground emergency medical transportation services established pursuant to section 10 of this act is approved by the Centers for Medicare and Medicaid Services; or

(2) On which ~~the~~ a program to provide increased capitation payments to governmental providers for ground emergency medical transportation services established pursuant to section 11 of this act is approved by the Centers for Medicare and Medicaid Services, whichever is earlier;

(b) Section 10 of this act becomes effective on the date that ~~the~~ a program to provide supplemental reimbursements for ground emergency medical transportation services established pursuant to that section is approved by the Centers for Medicare and Medicaid Services; and

(c) Section 11 of this act becomes effective on the date that ~~the~~ a program to provide increased capitation payments to governmental providers for ground emergency medical transportation services established pursuant to that section is approved by the Centers for Medicare and Medicaid Services.

Senator Spearman moved the adoption of the amendment.

Remarks by Senator Spearman.

Amendment No. 90 revises the provisions of Senate Bill No. 60 to authorize, rather than require, the director of the Department of Health and Human Services to include in the State Plan for Medicaid voluntary programs to provide supplemental reimbursement for ground emergency medical transportation services provided to Medicaid recipients and provide increased capitation payments to governmental providers and Medicaid managed care plans for such services under a Medicaid managed care plan. The amendment authorizes the Department to establish the voluntary program and provide the increased capitation payments, rather than requiring it.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 101.

Bill read second time.

The following amendment was proposed by the Committee on Health and Human Services:

Amendment No. 59.

SUMMARY—Restricts the authority to administer botulinum toxin to certain medical professionals. (BDR 40-677)

AN ACT relating to professions; ~~revising provisions governing~~ prohibiting the administration of botulinum toxin and dermal and soft tissue fillers by certain ~~medical professionals;~~ persons and under certain conditions; authorizing the imposition of professional discipline against persons who violate such a prohibition; requiring certain persons to receive training before administering botulinum toxin or dermal or soft tissue fillers; providing penalties; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes a medical assistant who is directed and supervised by a physician or physician assistant or a licensed dental hygienist who is directed and supervised by a dentist to possess and administer dangerous drugs under certain circumstances. (NRS 454.213) Existing law further requires the Board of Medical Examiners to adopt regulations governing the administration of botulinum toxin, commonly known as Botox, by a medical assistant or any person under the jurisdiction of the Board. (NRS 630.047, 630.138)

This bill revises provisions governing the administration of botulinum toxin ~~and~~ and dermal or soft tissue fillers. Section 2 of this bill removes the requirement for the Board of Medical Examiners to adopt regulations governing the administration of botulinum toxin by a medical assistant. ~~and~~



~~instead, section] Instead, sections 1 and 1.8 of this bill [prohibits medical assistants and licensed dental hygienists] prohibit: (1) any person other than a physician, physician assistant, dentist, registered nurse, advanced practice registered nurse or podiatric physician who has received training prescribed by his or her licensing board from administering botulinum toxin [Sections 3 and 7 of this bill provide that a physician or osteopathic physician who delegates the administration of botulinum toxin to a medical assistant or otherwise allows a medical assistant to administer botulinum toxin is subject to disciplinary action by the Board of Medical Examiners or the State Board of Osteopathic Medicine, respectively. Sections 4-6 of this bill: (1) prohibit a dentist from assigning the administration of botulinum toxin to any person other than a licensed dentist; (2) provide that a dentist is subject to disciplinary action by the Board of Dental Examiners of Nevada for assigning the administration of botulinum toxin to any person other than a licensed dentist or administering botulinum toxin outside the scope of the practice of dentistry; and (3) provide that a dental hygienist is subject to disciplinary action by the Board of Dental Examiners of Nevada for administering botulinum toxin.] or dermal or soft tissue fillers; (2) such persons from delegating the administration of botulinum toxin or dermal or soft tissue fillers to an unauthorized person; and (3) any person from administering botulinum toxin or dermal or soft tissue fillers outside his or her scope of practice or in a location other than a medical facility or the office of an authorized medical professional. Sections 1.3, 4 and 6.6 of this bill make conforming changes to clarify that unauthorized medical professionals are prohibited from administering botulinum toxin and dermal or soft tissue fillers. Sections 1.9, 3.3, 6.4, 6.9 and 7.2 of this bill require the Board of Medical Examiners, Board of Dental Examiners of Nevada, State Board of Nursing, State Board of Osteopathic Medicine and State Board of Podiatry, respectively, to prescribe training for physicians and physician assistants, dentists, registered nurses, advanced practice registered nurses, osteopathic physicians and physician assistants and podiatric physicians, as applicable, who wish to administer botulinum toxin or dermal or soft tissue fillers.~~

Existing law generally provides that a violation of the provisions of law governing dangerous drugs is a misdemeanor and grounds for the suspension or revocation of certain professional licenses. (NRS 454.356, 454.361) Existing law further provides that a person who violates a provision of law governing dangerous drugs by using a minor as an agent or who illegally provides a dangerous drug to a minor is guilty of a category B felony. (NRS 454.306) Sections 1.4-1.6 of this bill make these provisions applicable to the unauthorized administration of or delegation of the administration of botulinum toxin. Section 1.8 of this bill similarly makes the unauthorized administration of or delegation of the administration of dermal or soft tissue fillers a misdemeanor. Sections 3, 6, 6.8, 7, 7.5 and 7.8 of this bill authorize the Board of Medical Examiners, Board of Dental Examiners of Nevada, State Board of Nursing, State Board of Osteopathic Medicine, State Board of

Podiatry and State Board of Cosmetology to impose disciplinary action against licensees who violate prohibitions on the unauthorized administration of or delegation of the administration of botulinum toxin or dermal or soft tissue fillers.

Section 1.2 of this bill updates the definition of the term “dangerous drug” to reflect the current terminology used in federal regulations.

WHEREAS, Botulinum toxin, commonly known as Botox, is considered a dangerous drug in this State; and

WHEREAS, Only certain medical professionals are authorized under the law of this State to administer dangerous drugs; and

WHEREAS, The improper administration of botulinum toxin and dermal and soft tissue fillers can cause significant harmful side effects; and

WHEREAS, Persons who lack the necessary training or proper credentials are currently not restricted from administering botulinum toxin and dermal and soft tissue fillers in this State; and

WHEREAS, To promote the health, safety and welfare of the residents of this State, it is the intent of the Legislature to clearly define the persons who are authorized to administer botulinum toxin and dermal and soft tissue fillers, and the conditions under which such administration may occur; now, therefore,

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN  
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 454 of NRS is hereby amended by adding thereto a new section to read as follows:

1. A person shall not administer botulinum toxin:

(a) Unless the person is:

(1) A physician or physician assistant licensed pursuant to chapter 630 of NRS who has successfully completed the training prescribed by the Board of Medical Examiners pursuant to section 1.9 of this act;

(2) A dentist who has successfully completed the training prescribed by the Board of Dental Examiners of Nevada pursuant to section 3.3 of this act;

(3) A registered nurse or advanced practice registered nurse who has successfully completed the training prescribed by the State Board of Nursing pursuant to section 6.4 of this act;

(4) A physician or physician assistant licensed pursuant to chapter 633 of NRS who has successfully completed the training prescribed by the State Board of Osteopathic Medicine pursuant to 6.9 of this act; or

(5) A podiatric physician who has successfully completed the training prescribed by the State Board of Podiatry pursuant to section 7.2 of this act.

(b) Outside his or her scope of practice.

(c) At a location other than a medical facility, as defined in NRS 449.0151, or the office of a physician or physician assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, advanced practice registered nurse or podiatric physician.

2. A person who is authorized by subsection 1 to administer botulinum toxin shall not delegate such administration to a person who is prohibited by subsection 1 from administering botulinum toxin.

Sec. 1.1. NRS 454.181 is hereby amended to read as follows:

454.181 Definitions of words and terms in NRS 454.00922, 454.191, 454.201 and 454.211 apply only to NRS 454.181 to 454.371, inclusive, ~~and section 1 of this act.~~ and section 1 of this act.

Sec. 1.15. NRS 454.191 is hereby amended to read as follows:

454.191 "Administer" means the direct application of a drug or medicine referred to in NRS 454.181 to 454.371, inclusive, and section 1 of this act, whether by injection, inhalation, ingestion or any other means, to the body of a patient or research subject.

Sec. 1.2. NRS 454.201 is hereby amended to read as follows:

454.201 "Dangerous drug" means any drug, other than a controlled substance, unsafe for self-medication or unsupervised use, and includes the following:

1. Any drug which has been approved by the Food and Drug Administration for general distribution and bears the legend ~~["Caution: Federal law prohibits dispensing without prescription";]~~ "Rx only";

2. Procaine hydrochloride with preservatives and stabilizers (Gerovital H3) in injectable doses and amygdalin (laetrile) which have been licensed by the State Board of Health for manufacture in this State but have not been approved as drugs by the Food and Drug Administration; or

3. Any drug which, pursuant to the Board's regulations, may be sold only by prescription because the Board has found those drugs to be dangerous to public health or safety.

~~Section 1.~~ Sec. 1.3. NRS 454.213 is hereby amended to read as follows:

454.213 1. ~~["A]~~ Except as otherwise provided in section 1 of this act, a drug or medicine referred to in NRS 454.181 to 454.371, inclusive, and section 1 of this act may be possessed and administered by:

(a) A practitioner.

(b) A ~~["Except as otherwise provided in this paragraph, a]~~ physician assistant licensed pursuant to chapter 630 or 633 of NRS, at the direction of his or her supervising physician or a licensed dental hygienist acting in the office of and under the supervision of a dentist. ~~["A licensed dental hygienist shall not administer botulinum toxin."]~~

(c) Except as otherwise provided in paragraph (d), a registered nurse licensed to practice professional nursing or licensed practical nurse, at the direction of a prescribing physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, podiatric physician or advanced practice registered nurse, or pursuant to a chart order, for administration to a patient at another location.

(d) In accordance with applicable regulations of the Board, a registered nurse licensed to practice professional nursing or licensed practical nurse who is:

(1) Employed by a health care agency or health care facility that is authorized to provide emergency care, or to respond to the immediate needs of a patient, in the residence of the patient; and

(2) Acting under the direction of the medical director of that agency or facility who works in this State.

(e) A medication aide - certified at a designated facility under the supervision of an advanced practice registered nurse or registered nurse and in accordance with standard protocols developed by the State Board of Nursing. As used in this paragraph, "designated facility" has the meaning ascribed to it in NRS 632.0145.

(f) Except as otherwise provided in paragraph (g), an advanced emergency medical technician or a paramedic, as authorized by regulation of the State Board of Pharmacy and in accordance with any applicable regulations of:

(1) The State Board of Health in a county whose population is less than 100,000;

(2) A county board of health in a county whose population is 100,000 or more; or

(3) A district board of health created pursuant to NRS 439.362 or 439.370 in any county.

(g) An advanced emergency medical technician or a paramedic who holds an endorsement issued pursuant to NRS 450B.1975, under the direct supervision of a local health officer or a designee of the local health officer pursuant to that section.

(h) A respiratory therapist employed in a health care facility. The therapist may possess and administer respiratory products only at the direction of a physician.

(i) A dialysis technician, under the direction or supervision of a physician or registered nurse only if the drug or medicine is used for the process of renal dialysis.

(j) A medical student or student nurse in the course of his or her studies at an accredited college of medicine or approved school of professional or practical nursing, at the direction of a physician and:

(1) In the presence of a physician or a registered nurse; or

(2) Under the supervision of a physician or a registered nurse if the student is authorized by the college or school to administer the drug or medicine outside the presence of a physician or nurse.

➔ A medical student or student nurse may administer a dangerous drug in the presence or under the supervision of a registered nurse alone only if the circumstances are such that the registered nurse would be authorized to administer it personally.

(k) Any person designated by the head of a correctional institution.

(l) An ultimate user or any person designated by the ultimate user pursuant to a written agreement.

(m) A nuclear medicine technologist, at the direction of a physician and in accordance with any conditions established by regulation of the Board.

(n) A radiologic technologist, at the direction of a physician and in accordance with any conditions established by regulation of the Board.

(o) A chiropractic physician, but only if the drug or medicine is a topical drug used for cooling and stretching external tissue during therapeutic treatments.

(p) A physical therapist, but only if the drug or medicine is a topical drug which is:

(1) Used for cooling and stretching external tissue during therapeutic treatments; and

(2) Prescribed by a licensed physician for:

(I) Iontophoresis; or

(II) The transmission of drugs through the skin using ultrasound.

(q) In accordance with applicable regulations of the State Board of Health, an employee of a residential facility for groups, as defined in NRS 449.017, pursuant to a written agreement entered into by the ultimate user.

(r) A veterinary technician or a veterinary assistant at the direction of his or her supervising veterinarian.

(s) In accordance with applicable regulations of the Board, a registered pharmacist who:

(1) Is trained in and certified to carry out standards and practices for immunization programs;

(2) Is authorized to administer immunizations pursuant to written protocols from a physician; and

(3) Administers immunizations in compliance with the “Standards for Immunization Practices” recommended and approved by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention.

(t) A registered pharmacist pursuant to written guidelines and protocols developed and approved pursuant to NRS 639.2809.

(u) A person who is enrolled in a training program to become a physician assistant licensed pursuant to chapter 630 or 633 of NRS, dental hygienist, advanced emergency medical technician, paramedic, respiratory therapist, dialysis technician, nuclear medicine technologist, radiologic technologist, physical therapist or veterinary technician if the person possesses and administers the drug or medicine in the same manner and under the same conditions that apply, respectively, to a physician assistant licensed pursuant to chapter 630 or 633 of NRS, dental hygienist, advanced emergency medical technician, paramedic, respiratory therapist, dialysis technician, nuclear medicine technologist, radiologic technologist, physical therapist or veterinary technician who may possess and administer the drug or medicine, and under

the direct supervision of a person licensed or registered to perform the respective medical art or a supervisor of such a person.

(v) ~~A~~ ~~Except as otherwise provided in this paragraph, a~~ medical assistant, in accordance with applicable regulations of the:

(1) Board of Medical Examiners, at the direction of the prescribing physician and under the supervision of a physician or physician assistant.

(2) State Board of Osteopathic Medicine, at the direction of the prescribing physician and under the supervision of a physician or physician assistant.

~~1. A medical assistant shall not administer botulinum toxin.~~

2. As used in this section, “accredited college of medicine” has the meaning ascribed to it in NRS 453.375.

Sec. 1.4. NRS 454.306 is hereby amended to read as follows:

454.306 A person who violates any provision of NRS 454.181 to 454.371, inclusive, and section 1 of this act by use of a minor as an agent or by unlawfully furnishing any dangerous drug to a minor is guilty of a category B felony and shall be punished by imprisonment in the state prison for a minimum term of not less than 5 years and a maximum term of not more than 20 years, or by a fine of not more than \$20,000, or by both fine and imprisonment.

Sec. 1.5. NRS 454.356 is hereby amended to read as follows:

454.356 Except as otherwise specifically provided, every person who violates any provision of NRS 454.181 to 454.371, inclusive, and section 1 of this act is guilty of a misdemeanor.

Sec. 1.6. NRS 454.361 is hereby amended to read as follows:

454.361 A conviction of the violation of any of the provisions of NRS 454.181 to 454.371, inclusive, and section 1 of this act constitutes grounds for the suspension or revocation of any license issued to such person pursuant to the provisions of chapters 630, 631, 633, 635, 636, 638 or 639 of NRS.

Sec. 1.7. NRS 454.366 is hereby amended to read as follows:

454.366 The Board shall administer and enforce NRS 454.181 to 454.371, inclusive, ~~1.7.~~ and section 1 of this act.

Sec. 1.8. Chapter 629 of NRS is hereby amended by adding thereto a new section to read as follows:

1. A person shall not administer dermal or soft tissue fillers:

(a) Unless the person is:

(1) A physician or physician assistant licensed pursuant to chapter 630 of NRS who has successfully completed the training prescribed by the Board of Medical Examiners pursuant to section 1.9 of this act;

(2) A dentist who has successfully completed the training prescribed by the Board of Dental Examiners of Nevada pursuant to section 3.3 of this act;

(3) A registered nurse or advanced practice registered nurse who has successfully completed the training prescribed by the State Board of Nursing pursuant to section 6.4 of this act;

(4) A physician or physician assistant licensed pursuant to chapter 633 of NRS who has successfully completed the training prescribed by the State Board of Osteopathic Medicine pursuant to 6.9 of this act; or

(5) A podiatric physician who has successfully completed the training prescribed by the State Board of Podiatry pursuant to section 7.2 of this act.

(b) Outside his or her scope of practice.

(c) At a location other than a medical facility or the office of a physician or physician assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, advanced practice registered nurse or podiatric physician.

2. A person who is authorized by subsection 1 to administer dermal or soft tissue fillers shall not delegate such administration to a person who is prohibited by subsection 1 from administering dermal or soft tissue fillers.

3. A person who violates any provision of this section is guilty of a misdemeanor.

4. As used in this section, “dermal or soft tissue filler” means a material that is injected into the skin to fill in wrinkles or into the soft tissue to alter the contour of the soft tissue.

Sec. 1.9. Chapter 630 of NRS is hereby amended by adding thereto a new section to read as follows:

1. The Board shall adopt regulations prescribing the training that a physician or physician assistant must receive before administering botulinum toxin or dermal or soft tissue fillers.

2. A physician or physician assistant who has received the training prescribed pursuant to subsection 1 shall present proof of such training upon the request of a patient or any state or local governmental agency or agent thereof.

3. As used in this section “dermal or soft tissue filler” has the meaning ascribed to it in section 1.8 of this act.

Sec. 2. NRS 630.138 is hereby amended to read as follows:

630.138 The Board ~~[-~~

~~1. May] 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.]~~

Sec. 3. NRS 630.306 is hereby amended to read as follows:

630.306 1. The following acts, among others, constitute grounds for initiating disciplinary action or denying licensure:

(a) Inability to practice medicine with reasonable skill and safety because of illness, a mental or physical condition or the use of alcohol, drugs, narcotics or any other substance.

(b) Engaging in any conduct:

(1) Which is intended to deceive;

(2) Which the Board has determined is a violation of the standards of practice established by regulation of the Board; or

(3) Which is in violation of a regulation adopted by the State Board of Pharmacy.

(c) Administering, dispensing or prescribing any controlled substance, or any dangerous drug as defined in chapter 454 of NRS, to or for himself or herself or to others except as authorized by law.

(d) Performing, assisting or advising the injection of any substance containing liquid silicone into the human body, except for the use of silicone oil to repair a retinal detachment.

(e) Practicing or offering to practice beyond the scope permitted by law or performing services which the licensee knows or has reason to know that he or she is not competent to perform or which are beyond the scope of his or her training.

(f) Performing, without first obtaining the informed consent of the patient or the patient's family, any procedure or prescribing any therapy which by the current standards of the practice of medicine is experimental.

(g) Continual failure to exercise the skill or diligence or use the methods ordinarily exercised under the same circumstances by physicians in good standing practicing in the same specialty or field.

(h) Habitual intoxication from alcohol or dependency on controlled substances.

(i) Making or filing a report which the licensee or applicant knows to be false or failing to file a record or report as required by law or regulation.

(j) Failing to comply with the requirements of NRS 630.254.

(k) Failure by a licensee or applicant to report in writing, within 30 days, any disciplinary action taken against the licensee or applicant by another state, the Federal Government or a foreign country, including, without limitation, the revocation, suspension or surrender of a license to practice medicine in another jurisdiction.

(l) Failure by a licensee or applicant to report in writing, within 30 days, any criminal action taken or conviction obtained against the licensee or applicant, other than a minor traffic violation, in this State or any other state or by the Federal Government, a branch of the Armed Forces of the United States or any local or federal jurisdiction of a foreign country.

(m) Failure to be found competent to practice medicine as a result of an examination to determine medical competency pursuant to NRS 630.318.

(n) Operation of a medical facility at any time during which:

(1) The license of the facility is suspended or revoked; or

(2) An act or omission occurs which results in the suspension or revocation of the license pursuant to NRS 449.160.

➔ This paragraph applies to an owner or other principal responsible for the operation of the facility.



(o) Failure to comply with the requirements of NRS 630.373.

(p) Engaging in any act that is unsafe or unprofessional conduct in accordance with regulations adopted by the Board.

(q) Knowingly or willfully procuring or administering a controlled substance or a dangerous drug as defined in chapter 454 of NRS that is not approved by the United States Food and Drug Administration, unless the unapproved controlled substance or dangerous drug:

(1) Was procured through a retail pharmacy licensed pursuant to chapter 639 of NRS;

(2) Was procured through a Canadian pharmacy which is licensed pursuant to chapter 639 of NRS and which has been recommended by the State Board of Pharmacy pursuant to subsection 4 of NRS 639.2328;

(3) Is marijuana being used for medical purposes in accordance with chapter 453A of NRS; or

(4) Is an investigational drug or biological product prescribed to a patient pursuant to NRS 630.3735 or 633.6945.

(r) Failure to supervise adequately a medical assistant pursuant to the regulations of the Board ~~including, without limitation, delegating the administration of botulinum toxin to a medical assistant or otherwise allowing a medical assistant to administer botulinum toxin.~~

(s) Failure to comply with the provisions of NRS 630.3745.

(t) Failure to obtain any training required by the Board pursuant to NRS 630.2535.

(u) Failure to comply with the provisions of section 1 or 1.8 of this act.

2. As used in this section, “investigational drug or biological product” has the meaning ascribed to it in NRS 454.351.

Sec. 3.3. Chapter 631 of NRS is hereby amended by adding thereto a new section to read as follows:

1. The Board shall adopt regulations prescribing the training that a dentist must receive before administering botulinum toxin or dermal or soft tissue fillers.

2. A dentist who has received the training prescribed pursuant to subsection 1 shall present proof of such training upon the request of a patient or any state or local governmental agency or agent thereof.

3. As used in this section “dermal or soft tissue filler” has the meaning ascribed to it in section 1.8 of this act.

Sec. 4. NRS 631.313 is hereby amended to read as follows:

631.313 1. ~~1. A~~ Except as otherwise provided in sections 1 and 1.8 of this act, a licensed dentist may assign to a person in his or her employ who is a dental hygienist, dental assistant or other person directly or indirectly involved in the provision of dental care only such intraoral tasks as may be permitted by a regulation of the Board or by the provisions of this chapter.

2. The performance of these tasks must be:

(a) If performed by a dental assistant or a person, other than a dental hygienist, who is directly or indirectly involved in the provision of dental care, under the supervision of the licensed dentist who made the assignment.

(b) If performed by a dental hygienist, authorized by the licensed dentist of the patient for whom the tasks will be performed, except as otherwise provided in NRS 631.287.

3. No such assignment is permitted that requires:

(a) The diagnosis, treatment planning, prescribing of drugs or medicaments, or authorizing the use of restorative, prosthodontic or orthodontic appliances.

(b) Surgery on hard or soft tissues within the oral cavity or any other intraoral procedure that may contribute to or result in an irremediable alteration of the oral anatomy.

(c) The administration of general anesthesia, minimal sedation, moderate sedation or deep sedation except as otherwise authorized by regulations adopted by the Board.

(d) ~~The administration of botulinum toxin.~~

~~(e) The performance of a task outside the authorized scope of practice of the employee who is being assigned the task.~~

4. A dental hygienist may, pursuant to regulations adopted by the Board, administer local anesthesia or nitrous oxide in a health care facility, as defined in NRS 162A.740, if:

(a) The dental hygienist is so authorized by the licensed dentist of the patient to whom the local anesthesia or nitrous oxide is administered; and

(b) The health care facility has licensed medical personnel and necessary emergency supplies and equipment available when the local anesthesia or nitrous oxide is administered.

Sec. 5. ~~NRS 631.346 is hereby amended to read as follows:~~

~~631.346 The following acts, among others, constitute unprofessional conduct:~~

~~1. Employing, directly or indirectly, any student or any suspended or unlicensed dentist or dental hygienist to perform operations of any kind to treat or correct the teeth or jaws, except as provided in this chapter;~~

~~2. Except as otherwise provided in NRS 631.287, giving a public demonstration of methods of practice any place other than the office where the licensee is known to be regularly engaged in this practice;~~

~~3. Employing, procuring, inducing, aiding or abetting a person not licensed or registered as a dentist to engage in the practice of dentistry, but a patient shall not be deemed to be an accomplice, employer, procurer, inducer, aider or abettor;~~

~~4. Assigning a person other than a licensed dentist to administer botulinum toxin in violation of paragraph (d) of subsection 3 of NRS 631.313;~~

~~5. For a dental hygienist, practicing in any place not authorized pursuant to this chapter; or~~

~~[5.] 6. Practicing while a license is suspended or without a renewal certificate. (Deleted by amendment.)~~

Sec. 6. NRS 631.3475 is hereby amended to read as follows:

631.3475 The following acts, among others, constitute unprofessional conduct:

1. Malpractice;
2. Professional incompetence;
3. Suspension or revocation of a license to practice dentistry, the imposition of a fine or other disciplinary action by any agency of another state authorized to regulate the practice of dentistry in that state;
4. More than one act by the dentist or dental hygienist constituting substandard care in the practice of dentistry or dental hygiene;
5. Administering, dispensing or prescribing any controlled substance or any dangerous drug as defined in chapter 454 of NRS, if it is not required to treat the dentist's patient;
6. Knowingly procuring or administering a controlled substance or a dangerous drug as defined in chapter 454 of NRS that is not approved by the United States Food and Drug Administration, unless the unapproved controlled substance or dangerous drug:
  - (a) Was procured through a retail pharmacy licensed pursuant to chapter 39 of NRS;
  - (b) Was procured through a Canadian pharmacy which is licensed pursuant to chapter 639 of NRS and which has been recommended by the State Board of Pharmacy pursuant to subsection 4 of NRS 639.2328; or
  - (c) Is marijuana being used for medical purposes in accordance with chapter 453A of NRS;
7. ~~Administering botulinum toxin outside the scope of the practice of dentistry;~~ Failure to comply with the provisions of section 1 or 1.8 of this act;
8. Chronic or persistent inebriety or addiction to a controlled substance, to such an extent as to render the person unsafe or unreliable as a practitioner, or such gross immorality as tends to bring reproach upon the dental profession;
- ~~9.~~ 9. Conviction of a felony or misdemeanor involving moral turpitude or which relates to the practice of dentistry in this State, or conviction of any criminal violation of this chapter;
- ~~10.~~ 10. Conviction of violating any of the provisions of NRS 616D.200, 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive;
- ~~11.~~ 11. Failure to comply with the provisions of NRS 453.163 or 453.164;
- ~~12.~~ 12. Failure to obtain any training required by the Board pursuant to NRS 631.344; or
- ~~13.~~ 13. Operation of a medical facility, as defined in NRS 449.0151, at any time during which:
  - (a) The license of the facility is suspended or revoked; or
  - (b) An act or omission occurs which results in the suspension or revocation of the license pursuant to NRS 449.160.

↪ This subsection applies to an owner or other principal responsible for the operation of the facility.

~~14. For a dental hygienist, administering botulinum toxin.~~

Sec. 6.2. Chapter 632 of NRS is hereby amended by adding thereto the provisions set forth as sections 6.3 and 6.4 of this act.

Sec. 6.3. "Dermal or soft tissue filler" has the meaning ascribed to it in section 1.8 of this act.

Sec. 6.4. 1. The Board shall adopt regulations prescribing the training that a registered nurse or advanced practice registered nurse must receive before administering botulinum toxin or dermal or soft tissue fillers.

2. A registered nurse or advanced practice registered nurse who has received the training prescribed pursuant to subsection 1 shall present proof of such training upon the request of a patient or any state or local governmental agency or agent thereof.

Sec. 6.5. NRS 632.010 is hereby amended to read as follows:

632.010 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 632.011 to 632.0195, inclusive, and section 6.3 of this act have the meanings ascribed to them in those sections.

Sec. 6.6. NRS 632.294 is hereby amended to read as follows:

632.294 1. A medication aide - certified may only administer authorized medications and perform related tasks at a designated facility under the supervision of an advanced practice registered nurse or a registered nurse and in accordance with standard protocols developed by the Board.

2. Except as otherwise provided by subsection 4, a medication aide - certified may only administer authorized medications by the following methods:

- (a) Orally;
- (b) Topically;
- (c) By the use of drops in the eye, ear or nose;
- (d) Vaginally;
- (e) Rectally;
- (f) Transdermally; and
- (g) By the use of an oral inhaler.

3. Except as otherwise provided by subsection 4, a medication aide - certified shall not:

- (a) Receive, have access to or administer any controlled substance;
- (b) Administer parenteral or enteral medications;
- (c) Administer any substances by nasogastric or gastrostomy tubes;
- (d) Calculate drug dosages;
- (e) Destroy medication;
- (f) Receive orders, either in writing or verbally, for new or changed medication;
- (g) Transcribe orders from medical records;
- (h) Order or administer initial medications;
- (i) Evaluate reports of medication errors;
- (j) Perform treatments;
- (k) Conduct patient assessments or evaluations;

- (l) Engage in teaching activities for patients; ~~(o)~~
- (m) Administer botulinum toxin or a dermal or soft tissue filler; or
- (n) Engage in any activity prohibited pursuant to subsection 4.

4. ~~The~~ Except as otherwise provided in this subsection, the Board may adopt regulations authorizing or prohibiting any additional activities of a medication aide - certified. The Board shall not adopt regulations authorizing a medication aide - certified to administer botulinum toxin or a dermal or soft tissue filler.

5. As used in this section, “supervision” means active oversight of the patient care services provided by a medication aide - certified while on the premises of a designated facility.

*Sec. 6.8.* NRS 632.347 is hereby amended to read as follows:

632.347 1. The Board may deny, revoke or suspend any license or certificate applied for or issued pursuant to this chapter, or take other disciplinary action against a licensee or holder of a certificate, upon determining that the licensee or certificate holder:

(a) Is guilty of fraud or deceit in procuring or attempting to procure a license or certificate pursuant to this chapter.

(b) Is guilty of any offense:

(1) Involving moral turpitude; or

(2) Related to the qualifications, functions or duties of a licensee or holder of a certificate, in which case the record of conviction is conclusive evidence thereof.

(c) Has been convicted of violating any of the provisions of NRS 616D.200, 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive.

(d) Is unfit or incompetent by reason of gross negligence or recklessness in carrying out usual nursing functions.

(e) Uses any controlled substance, dangerous drug as defined in chapter 54 of NRS, or intoxicating liquor to an extent or in a manner which is dangerous or injurious to any other person or which impairs his or her ability to conduct the practice authorized by the license or certificate.

(f) Is a person with mental incompetence.

(g) Is guilty of unprofessional conduct, which includes, but is not limited to, the following:

(1) Conviction of practicing medicine without a license in violation of chapter 630 of NRS, in which case the record of conviction is conclusive evidence thereof.

(2) Impersonating any applicant or acting as proxy for an applicant in any examination required pursuant to this chapter for the issuance of a license or certificate.

(3) Impersonating another licensed practitioner or holder of a certificate.

(4) Permitting or allowing another person to use his or her license or certificate to practice as a licensed practical nurse, registered nurse, nursing assistant or medication aide - certified.

(5) Repeated malpractice, which may be evidenced by claims of malpractice settled against the licensee or certificate holder.

(6) Physical, verbal or psychological abuse of a patient.

(7) Conviction for the use or unlawful possession of a controlled substance or dangerous drug as defined in chapter 454 of NRS.

(h) Has willfully or repeatedly violated the provisions of this chapter. The voluntary surrender of a license or certificate issued pursuant to this chapter is prima facie evidence that the licensee or certificate holder has committed or expects to commit a violation of this chapter.

(i) Is guilty of aiding or abetting any person in a violation of this chapter.

(j) Has falsified an entry on a patient's medical chart concerning a controlled substance.

(k) Has falsified information which was given to a physician, pharmacist, podiatric physician or dentist to obtain a controlled substance.

(l) Has knowingly procured or administered a controlled substance or a dangerous drug as defined in chapter 454 of NRS that is not approved by the United States Food and Drug Administration, unless the unapproved controlled substance or dangerous drug:

(1) Was procured through a retail pharmacy licensed pursuant to chapter 639 of NRS;

(2) Was procured through a Canadian pharmacy which is licensed pursuant to chapter 639 of NRS and which has been recommended by the State Board of Pharmacy pursuant to subsection 4 of NRS 639.2328;

(3) Is marijuana being used for medical purposes in accordance with chapter 453A of NRS; or

(4) Is an investigational drug or biological product prescribed to a patient pursuant to NRS 630.3735 or 633.6945.

(m) Has been disciplined in another state in connection with a license to practice nursing or a certificate to practice as a nursing assistant or medication aide - certified, or has committed an act in another state which would constitute a violation of this chapter.

(n) Has engaged in conduct likely to deceive, defraud or endanger a patient or the general public.

(o) Has willfully failed to comply with a regulation, subpoena or order of the Board.

(p) Has operated a medical facility at any time during which:

(1) The license of the facility was suspended or revoked; or

(2) An act or omission occurred which resulted in the suspension or revocation of the license pursuant to NRS 449.160.

➔ This paragraph applies to an owner or other principal responsible for the operation of the facility.

(q) Has violated the provisions of section 1 or 1.8 of this act.

(r) Is an advanced practice registered nurse who has failed to obtain any training required by the Board pursuant to NRS 632.2375.

~~(c)~~ (s) Is an advanced practice registered nurse who has failed to comply with the provisions of NRS 453.163 or 453.164.

2. For the purposes of this section, a plea or verdict of guilty or guilty but mentally ill or a plea of nolo contendere constitutes a conviction of an offense. The Board may take disciplinary action pending the appeal of a conviction.

3. A licensee or certificate holder is not subject to disciplinary action solely for administering auto-injectable epinephrine pursuant to a valid order issued pursuant to NRS 630.374 or 633.707.

4. As used in this section, “investigational drug or biological product” has the meaning ascribed to it in NRS 454.351.

Sec. 6.9. Chapter 633 of NRS is hereby amended by adding thereto a new section to read as follows:

1. The Board shall adopt regulations prescribing the training that an osteopathic physician or physician assistant must receive before administering botulinum toxin or dermal or soft tissue fillers.

2. An osteopathic physician or physician assistant who has received the training prescribed pursuant to subsection 1 shall present proof of such training upon the request of a patient or any state or local governmental agency or agent thereof.

3. As used in this section “dermal or soft tissue filler” has the meaning ascribed to it in section 1.8 of this act.

Sec. 7. NRS 633.511 is hereby amended to read as follows:

633.511 1. The grounds for initiating disciplinary action pursuant to this chapter are:

- (a) Unprofessional conduct.
- (b) Conviction of:

(1) A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in chapter 454 of NRS;

(2) A felony relating to the practice of osteopathic medicine or practice as a physician assistant;

(3) A violation of any of the provisions of NRS 616D.200, 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive;

(4) Murder, voluntary manslaughter or mayhem;

(5) Any felony involving the use of a firearm or other deadly weapon;

(6) Assault with intent to kill or to commit sexual assault or mayhem;

(7) Sexual assault, statutory sexual seduction, incest, lewdness, indecent exposure or any other sexually related crime;

(8) Abuse or neglect of a child or contributory delinquency; or

(9) Any offense involving moral turpitude.

(c) The suspension of a license to practice osteopathic medicine or to practice as a physician assistant by any other jurisdiction.

(d) Malpractice or gross malpractice, which may be evidenced by a claim of malpractice settled against a licensee.

(e) Professional incompetence.

(f) Failure to comply with the requirements of NRS 633.527.

(g) Failure to comply with the requirements of subsection 3 of NRS 633.471.

(h) Failure to comply with the provisions of NRS 633.694.

(i) Operation of a medical facility, as defined in NRS 449.0151, at any time during which:

(1) The license of the facility is suspended or revoked; or

(2) An act or omission occurs which results in the suspension or revocation of the license pursuant to NRS 449.160.

➤ This paragraph applies to an owner or other principal responsible for the operation of the facility.

(j) Failure to comply with the provisions of subsection 2 of NRS 633.322.

(k) Signing a blank prescription form.

(l) Knowingly or willfully procuring or administering a controlled substance or a dangerous drug as defined in chapter 454 of NRS that is not approved by the United States Food and Drug Administration, unless the unapproved controlled substance or dangerous drug:

(1) Was procured through a retail pharmacy licensed pursuant to chapter 639 of NRS;

(2) Was procured through a Canadian pharmacy which is licensed pursuant to chapter 639 of NRS and which has been recommended by the State Board of Pharmacy pursuant to subsection 4 of NRS 639.2328;

(3) Is marijuana being used for medical purposes in accordance with chapter 453A of NRS; or

(4) Is an investigational drug or biological product prescribed to a patient pursuant to NRS 630.3735 or 633.6945.

(m) Attempting, directly or indirectly, by intimidation, coercion or deception, to obtain or retain a patient or to discourage the use of a second opinion.

(n) Terminating the medical care of a patient without adequate notice or without making other arrangements for the continued care of the patient.

(o) In addition to the provisions of subsection 3 of NRS 633.524, making or filing a report which the licensee knows to be false, failing to file a record or report that is required by law or knowingly or willfully obstructing or inducing another to obstruct the making or filing of such a record or report.

(p) Failure to report any person the licensee knows, or has reason to know, is in violation of the provisions of this chapter or the regulations of the Board within 30 days after the date the licensee knows or has reason to know of the violation.

(q) Failure by a licensee or applicant to report in writing, within 30 days, any criminal action taken or conviction obtained against the licensee or applicant, other than a minor traffic violation, in this State or any other state or by the Federal Government, a branch of the Armed Forces of the United States or any local or federal jurisdiction of a foreign country.



(r) Engaging in any act that is unsafe in accordance with regulations adopted by the Board.

(s) Failure to comply with the provisions of NRS 629.515.

(t) Failure to supervise adequately a medical assistant pursuant to the regulations of the Board ~~including, without limitation, delegating the administration of botulinum toxin to a medical assistant or otherwise allowing a medical assistant to administer botulinum toxin.~~

(u) Failure to obtain any training required by the Board pursuant to NRS 633.473.

(v) Failure to comply with the provisions of NRS 633.6955.

(w) Failure to comply with the provisions of NRS 453.163 or 453.164.

~~(x) Failure to comply with the provisions of section 1 or 1.8 of this act.~~

2. As used in this section, “investigational drug or biological product” has the meaning ascribed to it in NRS 454.351.

Sec. 7.2. Chapter 635 of NRS is hereby amended by adding thereto a new section to read as follows:

1. The Board shall adopt regulations prescribing the training that a podiatric physician must receive before administering botulinum toxin or dermal or soft tissue fillers.

2. A podiatric physician who has received the training prescribed pursuant to subsection 1 shall present proof of such training upon the request of a patient or any state or local governmental agency or agent thereof.

3. As used in this section “dermal or soft tissue filler” has the meaning ascribed to it in section 1.8 of this act.

Sec. 7.5. NRS 635.130 is hereby amended to read as follows:

635.130 1. The Board, after notice and a hearing as required by law, and upon any cause enumerated in subsection 2, may take one or more of the following disciplinary actions:

- (a) Deny an application for a license or refuse to renew a license.
- (b) Suspend or revoke a license.
- (c) Place a licensee on probation.
- (d) Impose a fine not to exceed \$5,000.

2. The Board may take disciplinary action against a licensee for any of the following causes:

(a) The making of a false statement in any affidavit required of the applicant for application, examination or licensure pursuant to the provisions of this chapter.

(b) Lending the use of the holder’s name to an unlicensed person.

(c) If the holder is a podiatric physician, permitting an unlicensed person in his or her employ to practice as a podiatry hygienist.

(d) Habitual indulgence in the use of alcohol or any controlled substance which impairs the intellect and judgment to such an extent as in the opinion of the Board incapacitates the holder in the performance of his or her professional duties.

(e) Conviction of a crime involving moral turpitude.

(f) Conviction of violating any of the provisions of NRS 616D.200, 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive.

(g) Conduct which in the opinion of the Board disqualifies the licensee to practice with safety to the public.

(h) The commission of fraud by or on behalf of the licensee regarding his or her license or practice.

(i) Gross incompetency.

(j) Affliction of the licensee with any mental or physical disorder which seriously impairs his or her competence as a podiatric physician or podiatry hygienist.

(k) False representation by or on behalf of the licensee regarding his or her practice.

(l) Unethical or unprofessional conduct.

(m) Failure to comply with the requirements of subsection 1 of NRS 635.118.

(n) Willful or repeated violations of this chapter or regulations adopted by the Board.

(o) Willful violation of the regulations adopted by the State Board of Pharmacy.

(p) Knowingly procuring or administering a controlled substance or a dangerous drug as defined in chapter 454 of NRS that is not approved by the United States Food and Drug Administration, unless the unapproved controlled substance or dangerous drug:

(1) Was procured through a retail pharmacy licensed pursuant to chapter 639 of NRS;

(2) Was procured through a Canadian pharmacy which is licensed pursuant to chapter 639 of NRS and which has been recommended by the State Board of Pharmacy pursuant to subsection 4 of NRS 639.2328; or

(3) Is marijuana being used for medical purposes in accordance with chapter 453A of NRS.

(q) Operation of a medical facility, as defined in NRS 449.0151, at any time during which:

(1) The license of the facility is suspended or revoked; or

(2) An act or omission occurs which results in the suspension or revocation of the license pursuant to NRS 449.160.

↪ This paragraph applies to an owner or other principal responsible for the operation of the facility.

(r) Failure to obtain any training required by the Board pursuant to NRS 635.116.

(s) Failure to comply with the provisions of NRS 453.163 and 453.164.

(t) Failure to comply with the provisions of section 1 or 1.8 of this act.

Sec. 7.8. NRS 644.430 is hereby amended to read as follows:

644.430 1. The following are grounds for disciplinary action by the Board:

(a) Failure of an owner of an establishment for hair braiding, a cosmetological establishment, a licensed or registered, as applicable, aesthetician, cosmetologist, hair designer, shampoo technologist, hair braider, electrologist, instructor, nail technologist, demonstrator of cosmetics, makeup artist or school of cosmetology to comply with the requirements of this chapter or the applicable regulations adopted by the Board.

(b) Failure of a cosmetologist's apprentice, electrologist's apprentice, aesthetician's apprentice, hair designer's apprentice or nail technologist's apprentice to comply with the requirements of this chapter or the applicable regulations adopted by the Board.

(c) Obtaining practice in cosmetology or any branch thereof, for money or anything of value, by fraudulent misrepresentation.

(d) Gross malpractice.

(e) Continued practice by a person knowingly having an infectious or contagious disease.

(f) Drunkenness or the use or possession, or both, of a controlled substance or dangerous drug without a prescription, while engaged in the practice of cosmetology.

(g) Advertising in violation of any of the provisions of NRS 644.422 or 644.478.

(h) Permitting a license to be used where the holder thereof is not personally, actively and continuously engaged in business.

(i) Failure to display the license or a duplicate of the license as provided in NRS 644.290, 644.360, 644.3774 and 644.410.

(j) Failure to display the certificate of registration or a duplicate of the certificate of registration as provided in NRS 644.2175.

(k) Entering, by a school of cosmetology, into an unconscionable contract with a student of cosmetology.

(l) Continued practice of cosmetology or operation of a cosmetological establishment or school of cosmetology after the license therefor has expired.

(m) *Failure to comply with the provisions of section 1 or 1.8 of this act.*

(n) Any other unfair or unjust practice, method or dealing which, in the judgment of the Board, may justify such action.

2. If the Board determines that a violation of this section has occurred, it may:

(a) Refuse to issue or renew a license or certificate of registration;

(b) Revoke or suspend a license or certificate of registration;

(c) Place the licensee or holder of a certificate of registration on probation for a specified period;

(d) Impose a fine not to exceed \$2,000; or

(e) Take any combination of the actions authorized by paragraphs (a) to (d), inclusive.

3. An order that imposes discipline and the findings of fact and conclusions of law supporting that order are public records.

Sec. 8. This act becomes effective on July 1, 2017.

Senator Hardy moved the adoption of the amendment.

Remarks by Senator Hardy.

Amendment No. 59 revises Senate Bill No. 101 to prohibit any person other than a physician, physician assistant, dentist, registered nurse, advance practice registered nurse or podiatric physician who has received training prescribed by his or her licensing board from administering botulinum toxin, dermal fillers or soft tissue fillers. Such professionals may not delegate this authority and such substances may only be administered in a medical facility or the office of an authorized medical professional.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 159.

Bill read second time.

The following amendment was proposed by the Committee on Health and Human Services:

Amendment No. 89.

SUMMARY—Provides for the regulation of the sale of dextromethorphan. (BDR 40-543)

AN ACT relating to drugs; prohibiting ~~the sale, distribution, bartering, dispensing~~ a person from knowingly selling or offering to sell a material, compound, mixture or preparation containing dextromethorphan to a minor under certain circumstances; prohibiting a minor from knowingly purchasing ~~receiving or otherwise acquiring~~ any material, compound, mixture or preparation containing dextromethorphan under certain circumstances; providing penalties; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes grocers and dealers to sell without restriction any drug, medicine, remedy, poison or chemical that is not otherwise restricted, when prepared and sold in original and unbroken packages and, if poisonous, labeled and sold in accordance with federal law. (NRS 639.270) This bill prohibits a person from knowingly selling ~~receiving or otherwise acquiring~~ or offering to sell any material, compound, mixture or preparation containing dextromethorphan, a common ingredient in cough syrup, to a person under the age of 18 years. This bill also prohibits any person under the age of 18 years from knowingly purchasing ~~receiving or otherwise acquiring~~ any material, compound, mixture or preparation containing dextromethorphan. This bill also provides that a person or owner of a retail establishment who takes certain steps to prevent the sale of a material, compound, mixture or preparation containing dextromethorphan to a person under the age of 18 years shall be deemed to be in compliance with these provisions. ~~Finally,~~ Under this bill ~~requires~~ any person who sells ~~distributes, barter, dispenses~~ or offers to sell a material, compound, mixture or preparation containing dextromethorphan in violation of these provisions is required to: (1) for a first offense, receive a warning; and (2) for a second or subsequent offense, be assessed a civil penalty.

Finally, this bill prohibits a local government from enacting a local ordinance or regulation that conflicts with this bill or further regulates the sale, receipt or possession of dextromethorphan.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 453 of NRS is hereby amended by adding thereto a new section to read as follows:

1. *Except as otherwise provided in this section:*

(a) *A person shall not knowingly sell,  ~~distribute, barter, dispense~~ or offer to sell any material, compound, mixture or preparation containing dextromethorphan to a minor.*

(b) *A minor shall not knowingly purchase,  ~~receive or otherwise acquire~~ any material, compound, mixture or preparation containing dextromethorphan.*

2. *If a minor has a valid prescription for a material, compound, mixture or preparation containing dextromethorphan:*

(a) *A person may sell,  ~~distribute, barter, dispense~~ or offer to sell the material, compound, mixture or preparation containing dextromethorphan for which the minor has a valid prescription; and*

(b) *The minor may purchase, receive or otherwise acquire the material, compound, mixture or preparation containing dextromethorphan for which he or she has a valid prescription.*

3. ~~*An employer of a minor may, for the purpose of allowing the minor to handle or transport a material, compound, mixture or preparation containing dextromethorphan in the course of the minor's lawful employment, provide a material, compound, mixture or preparation containing dextromethorphan to the minor, and the minor may receive the material, compound, mixture or preparation containing dextromethorphan.*~~

~~4.~~ *A person shall be deemed to be in compliance with the provisions of subsection 1 if*

~~*(a) The person reasonably before the person sells or offers to sell any material, compound, mixture or preparation containing dextromethorphan to another person, he or she:*~~

~~*(a) Reasonably assumes, based on the appearance of  ~~a~~ the person to whom a material, compound, mixture or preparation containing dextromethorphan is sold,  ~~distributed, bartered, dispensed~~ or offered for sale, that the person is 25 years of age or older.*~~

~~*(b) Before the person sells, distributes, barter, dispenses or offers to sell any material, compound, mixture or preparation containing dextromethorphan to another person, the person: Does the following:*~~

~~*(1) Demands that the other person present a valid driver's license or other  ~~written or documentary evidence~~ identification which shows that the other person is 18 years of age or older;*~~

(2) ~~Is presented a valid driver's license or other ~~written or documentary evidence~~ identification~~ which shows that the other person is 18 years of age or older; and

(3) Reasonably relies upon the driver's license or ~~written or documentary evidence~~ other identification presented by the other person.

~~5.7~~ 4. With respect to any sale made by an employee of a retail establishment, the owner of the retail establishment shall be deemed to be in compliance with the provisions of paragraph (a) of subsection 1 if the owner:

(a) Had no actual knowledge of the sale; and

(b) Establishes and carries out a continuing program of training for employees which is reasonably designed to prevent violations of paragraph (a) of subsection 1.

~~6.7~~ 5. A person who violates paragraph (a) of subsection 1:

(a) For a first offense, shall be issued a warning.

(b) For a second or subsequent offense, is liable for a civil penalty of \$50, unless the person provides sufficient documentation that a continuing program of training for employees is in place.

6. This section preempts any local charter, code, ordinance or regulation that is in conflict with the purposes and objectives of this section or seeks to further regulate the sale, receipt or possession of dextromethorphan.

7. As used in this section ~~the "minor"~~ :

(a) "Identification" means any document issued by a governmental entity that contains a physical description or photograph of the person seeking to purchase the material, compound, mixture or preparation containing dextromethorphan and which provides the person's date of birth, including, without limitation, a passport, military identification card or identification card.

(b) "Minor" means a person under the age of 18 years.

Sec. 2. NRS 639.270 is hereby amended to read as follows:

639.270 Any drug, medicine, remedy, poison or chemical, the sale of which is not otherwise restricted as provided by this chapter ~~or~~ ~~section 1~~ of this act, and any patent or proprietary medicine, may be sold by grocers and dealers generally without restriction when prepared and sold in original and unbroken packages and, if poisonous, labeled with the official poison labels and sold in accordance with the requirements of the Federal Food, Drug and Cosmetic Act.

Senator Farley moved the adoption of the amendment.

Remarks by Senator Farley.

Amendment No. 89 revises the provisions of Senate Bill No. 159 to: eliminate references to "distributing, bartering, and dispensing" materials containing dextromethorphan; provide a person shall not "knowingly" sell such substances to a minor; clarify that a valid driver's license or valid identification must be presented as proof of age; and provide that this act prohibits a local government from enacting a local ordinance or regulation that conflicts with the bill or further regulates the sale, receipt or possession of dextromethorphan.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 320.

Bill read second time.

The following amendment was proposed by the Committee on Transportation:

Amendment No. 111.

SUMMARY—~~[Revises provisions]~~ Sets forth certain conditions relating to ~~[tow cars.]~~ the towing of a motor vehicle from a residential complex. (BDR 58-1143)

AN ACT relating to motor vehicles; setting forth certain conditions relating to the towing of a motor vehicle ~~[requested by a law enforcement officer or a person or authorized agent of a person other than the owner of the motor vehicle.]~~ from a residential complex; providing a penalty; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law imposes certain conditions on the towing of a motor vehicle which is requested by a person other than the owner of the vehicle, an agent of the owner or a law enforcement officer. Those conditions require that: (1) the person requesting the tow must be the owner of the real property from which the vehicle is being towed, or an authorized agent of the owner of the real property; (2) the person requesting the tow must sign a specific request for the towing; (3) the area from which the vehicle is to be towed must be appropriately posted in accordance with state or local requirements; (4) notice must be given to the appropriate law enforcement agency pursuant to state or local requirements; and (5) the operator of the tow car may be directed to terminate the towing by a law enforcement officer. (NRS 706.4477) Section 1 of this bill sets forth certain additional conditions if the real property from which the vehicle is to be towed is a residential complex. Those conditions state that the owner of the real property, or an authorized agent of the owner: ~~(1) must be present when the vehicle is towed; (2) must notify the operator of the tow car of the address of the owner of the vehicle, if the address is known to the owner or authorized agent and is in the complex where the vehicle is located; (3) may only have a vehicle towed for a parking violation ~~[or]~~ for an issue related to the health and safety of the residents of the complex ~~[; and (4) may not have a vehicle towed solely] or because the vehicle is unregistered or the registration on the vehicle ~~[is] has been expired~~ ~~[. The operator of the tow car: (1) must, if the owner or authorized agent of the owner who requested the tow provides the address of the owner of the vehicle, securely attach a notice to the door of the residence of the owner of the vehicle which provides certain information about the tow;]~~ for not less than 60 days; and (2) may not ~~[tow] have a vehicle ~~[solely because the vehicle is unregistered or the registration on the vehicle is expired.]~~ towed until 48 hours after affixing a notice to the vehicle which explains when the vehicle is to be towed, unless the tow is requested for an issue relating to the health and safety of the residents~~~~~~

of the residential complex. Existing law makes a violation of any of these provisions a misdemeanor. (NRS 706.756) ~~{Section 2 of this bill makes a conforming change.}~~

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 706.4477 is hereby amended to read as follows:

706.4477 1. If towing is requested by a person other than the owner, or an agent of the owner, of the motor vehicle or a law enforcement officer:

(a) The person requesting the towing must be the owner of the real property from which the vehicle is towed or an authorized agent of the owner of the real property and must sign a specific request for the towing. For the purposes of this section, the operator is not an authorized agent of the owner of the real property.

(b) The area from which the vehicle is to be towed must be appropriately posted in accordance with state or local requirements.

(c) Notice must be given to the appropriate law enforcement agency pursuant to state and local requirements.

(d) The operator may be directed to terminate the towing by a law enforcement officer.

2. *If, pursuant to subsection 1, the owner of the real property or authorized agent of the owner of the real property requests that a vehicle be towed from a residential complex at which the vehicle is located,*

~~(a) The, the owner of the real property or authorized agent of the owner:~~

~~+(1) (a) Must meet:~~

~~(1) Meet the requirements of subsection 1.~~

~~(2) Must be present when the vehicle is towed.~~

~~(3) Must notify the operator of the address of If the vehicle is being towed pursuant to subparagraph (1), (2) or (3) of paragraph (b), notify the owner or operator of the vehicle at the time the vehicle is towed, if that address is in the residential complex and is known to the owner or authorized agent of the owner.~~

~~(4) Except as otherwise provided in subparagraph (5), may only have a vehicle towed for:~~

~~(1) At of the tow not less than 48 hours before the tow by affixing to the vehicle a sticker which provides the date and time at which the vehicle will be towed.~~

~~(b) May only have a vehicle towed:~~

~~(1) Because of a parking violation; for~~

~~(II) An issue related to the health and safety of the residents of the residential complex that requires the vehicle be removed from the residential complex.~~

~~(5) May not have a vehicle towed solely because the:~~

~~(1) Vehicle (2) If the vehicle is not registered pursuant to chapter 482 or 706 of NRS or in any other state; for~~



~~(II) Registration.] (3) If the registration of the vehicle has been expired~~  
~~f~~

~~(b) The operator:~~

~~(1) Must, if the address of the owner of the vehicle is provided by the owner or agent of the owner pursuant to subparagraph (3) of paragraph (a), securely attach a notice to the door of the residence which informs the resident of the apartment, condominium or townhouse of:~~

~~(I) The location where the vehicle is being towed;~~

~~(II) The name of the owner or agent of the owner who requested the towing;~~

~~(III) The date and time the vehicle was towed;~~

~~(IV) The charge for the tow and the daily charge for storage at the location where the vehicle is being towed; and~~

~~(V) The actions that the registered owner of the vehicle may take to recover the vehicle while incurring the lowest possible liability in accrued assessments, fees, penalties or other charges.~~

~~(2) May not tow a vehicle solely because the:~~

~~(I) Vehicle is not registered pursuant to chapter 482 or 706 of NRS or in any other state; or~~

~~(II) Registration of the vehicle has expired.] for not less than 60 days;~~

~~or~~

~~(4) For any issue that is related to the health and safety of the residents of the residential complex that requires the removal of the vehicle from the residential complex, including, without limitation, a vehicle that is:~~

~~(I) Blocking egress or ingress to the residential complex;~~

~~(II) Blocking access to a fire hydrant;~~

~~(III) Preventing the movement of another vehicle; or~~

~~(IV) Emitting toxic substances.~~

3. If towing is requested by a county or city pursuant to NRS 244.3605 or 268.4122, as applicable:

(a) Notice must be given to the appropriate law enforcement agency pursuant to state and local requirements.

(b) The operator may be directed to terminate the towing by a law enforcement officer.

~~{3.}~~ 4. The registered owner of a motor vehicle towed pursuant to the provisions of subsection 1 ~~{or 2.}~~, 2 or 3:

(a) Is presumed to have left the motor vehicle on the real property from which the vehicle is towed; and

(b) Is responsible for the cost of removal and storage of the motor vehicle.

~~{4.}~~ 5. The registered owner may rebut the presumption in subsection ~~{3}~~ 4 by showing that:

(a) The registered owner transferred the registered owner's interest in the motor vehicle:

(1) Pursuant to the provisions set forth in NRS 482.399 to 482.420, inclusive; or

(2) As indicated by a bill of sale for the vehicle that is signed by the registered owner; or

(b) The vehicle is stolen, if the registered owner submits evidence that, before the discovery of the vehicle, the registered owner filed an affidavit with the Department or a written report with an appropriate law enforcement agency alleging the theft of the vehicle.

6. *As used in this section:*

(a) *"Parking violation" means a violation of any:*

(1) *State or local law or ordinance governing parking; or*

(2) *Parking rule promulgated by the owner or manager of the residential complex that applies to vehicles on the property of the residential complex.*

(b) *"Residential complex" means a group of apartments, condominiums or townhomes intended for use as residential units and for which a common parking area is provided, regardless of whether each resident or unit has been assigned a specific parking space in the common parking area.*

Sec. 2. ~~[NRS 706.4479 is hereby amended to read as follows:~~

~~706.4479 1. If a motor vehicle is towed at the request of someone other than the owner, or authorized agent of the owner, of the motor vehicle, the operator of the tow car shall, in addition to the requirements set forth in the provisions of chapter 108 of NRS [.] and subsection 2 of NRS 706.4477:~~

~~(a) Notify the registered and legal owner of the motor vehicle by certified mail not later than 21 days after placing the motor vehicle in storage if the motor vehicle was towed at the request of a law enforcement officer following a crash involving the motor vehicle or not later than 15 days after placing any other vehicle in storage:~~

~~(1) Of the location where the motor vehicle is being stored;~~

~~(2) Whether the storage is inside a locked building, in a secured, fenced area or in an unsecured, open area;~~

~~(3) Of the charge for towing and storage;~~

~~(4) Of the date and time the vehicle was placed in storage;~~

~~(5) Of the actions that the registered and legal owner of the vehicle may take to recover the vehicle while incurring the lowest possible liability in accrued assessments, fees, penalties or other charges; and~~

~~(6) Of the opportunity to rebut the presumptions set forth in NRS 487.220 and 706.4477.~~

~~(b) If the identity of the registered and legal owner is not known or readily available, make every reasonable attempt and use all resources reasonably necessary, as evidenced by written documentation, to obtain the identity of the owner and any other necessary information from the agency charged with the registration of the motor vehicle in this State or any other state within:~~

~~(1) Twenty one days after placing the motor vehicle in storage if the motor vehicle was towed at the request of a law enforcement officer following a crash involving the motor vehicle; or~~

~~(2) Fifteen days after placing any other motor vehicle in storage. The operator shall attempt to notify the owner of the vehicle by certified mail as~~

soon as possible, but in no case later than 15 days after identification of the owner is obtained for any motor vehicle.

~~2. If an operator includes in the operator's tariff a fee to be charged to the registered and legal owner of a vehicle for the towing and storage of the vehicle, the fee may not be charged:~~

~~(a) For more than 21 days after placing the motor vehicle in storage if the motor vehicle was towed at the request of a law enforcement officer following a crash involving the motor vehicle; or~~

~~(b) For more than 15 days after placing any other vehicle in storage, unless the operator complies with the requirements set forth in subsection 1.~~

~~3. If a motor vehicle that is placed in storage was towed at the request of a law enforcement officer following a crash involving the motor vehicle or after having been stolen and subsequently recovered, the operator shall not:~~

~~(a) Satisfy any lien or impose any administrative fee or processing fee with respect to the motor vehicle for the period ending 4 business days after the date on which the motor vehicle was placed in storage; or~~

~~(b) Impose any fee relating to the auction of the motor vehicle until after the operator complies with the notice requirements set forth in NRS 108.265 to 108.367, inclusive. (Deleted by amendment.)~~

Sec. 3. This act becomes effective on July 1, 2017.

Senator Manendo moved the adoption of the amendment.

Remarks by Senator Manendo.

Amendment No. 111 to Senate Bill No. 320 removes provisions requiring the owner of the real property or an authorized agent at a residential complex to be present at the time of a tow and for the tow car operator to securely attach a notice to the vehicle owner's residence door. Instead, the amendment provides that the owner of the real property or an authorized agent at a residential complex to notify the owner of the vehicle to be towed 48 hours prior to the vehicle being towed by placing a sticker on the vehicle.

Additionally, the amendment removes the provisions requiring the tow car operator to leave certain information about the tow with the owner of the vehicle. The amendment also adds language to specify that a vehicle may be towed for a registration violation only after the registration has been expired for 60 days. Finally, the amendment specifies that a delay in towing a vehicle is not required for an issue related to health and safety of the residents of the complex.

Amendment adopted.

Bill ordered reprinted, engrossed and to third reading.

Senate Bill No. 399.

Bill read second time and ordered to third reading.

Senate Bill No. 422.

Bill read second time and ordered to third reading.

Senate Bill No. 501.

Bill read second time and ordered to third reading.

Senator Ford announced that if there were no objections, the Senate would recess until 4:45 p.m.

Motion carried.

Senate in recess at 11:34 a.m.

SENATE IN SESSION

At 5:00 p.m.

President pro Tempore Denis presiding.

Quorum present.

MOTIONS, RESOLUTIONS AND NOTICES

The Sergeant at Arms announced that Assemblyman Flores and Assemblyman Pickard were at the bar of the Senate. Assemblyman Flores invited the Senate to meet in Joint Session with the Assembly to hear U.S. Representative Ruben Kihuen.

Mr. President pro Tempore announced that if there were no objections, the Senate would recess subject to the call of the Chair.

Senate in recess at 5:01 p.m.

IN JOINT SESSION

At 5:08 p.m.

President pro Tempore Denis presiding.

The Secretary of the Senate called the Senate roll.

All present.

The Chief Clerk of the Assembly called the Assembly roll.

All present except for Assemblyman Daly, who was excused.

Mr. President pro Tempore appointed a Committee on Escort consisting of Senator Goicoechea and Assemblyman Fumo to wait upon the Honorable U.S. Ruben Kihuen and escort him to the Assembly Chamber.

U.S. Representative Ruben Kihuen delivered his message as follows.

MESSAGE TO THE LEGISLATURE OF NEVADA  
SEVENTY-NINTH SESSION, 2017

Friends, it is great to be home.

Thank you, Governor Sandoval, for being here and for your leadership. I know this is your final legislative session, and I would be remiss if I did not thank you for your service to the State of Nevada and to the rest of our Country. It has always been a pleasure working with you, and I look forward to continuing the rest of the year-and-a-half working with you to make Nevada better. Thank you, Mr. Governor.

Thank you Senate President pro Tem Denis, constitutional officers, Speaker Frierson, Majority Leaders Benitez-Thompson and Ford, Minority Leaders Roberson and Anderson, and members of the Senate and Assembly, and the entire LCB [Legislative Counsel Bureau] staff, thank you so much. And to all the freshmen, congratulations.

As I look around this Chamber, I see friends; I see former colleagues, and I see many great Nevadans. But I also see the diversity of America—people of all colors, ages, gender, sexual orientation, political ideology and from all walks of life. I am proud of Nevada for having one of the most diverse—if not the most diverse—legislatures in the entire Country. Leadership in both houses are people of color. The first African-American Speaker of the Nevada Assembly, Jason Frierson, we are proud of you. Forty percent of the members of the Legislature are women.

All this in a State with a Latino Governor, a Latina U.S. Senator, two Congresswomen and myself in the House of Representatives. It is this diversity that makes Nevada and America strong. I ask you to join me in continuing to celebrate and preserve such diversity.

It feels like just yesterday that I was sitting right here in this Chamber, right there where my friend Assemblywoman Woodbury is sitting, as a freshman member of the Nevada Legislature almost ten years ago. I remember having Senator Atkinson look at me every day and say, hey, freshman, get to work. I had Assemblyman Carpenter to the left of me talking to me about his Suzi-Q boat and about rural Nevada. I had the opportunity in my time here to serve with and learn from several true Nevada statesmen and women, people who never hesitated to put their State before their party, including the legendary Senator Bill Raggio, who taught us all a thing or two about compromise, negotiating and how to master the rules to pass legislation; Speaker Barbara Buckley, whom I had the honor to vote for as the first female Speaker in our State's history; Assemblyman Bernie Anderson, who taught me to never lose my integrity and credibility because sometimes that is all we have, and he took me to the Woodshed a few times; Assemblyman John Carpenter, a champion for rural Nevada and the person responsible for my induction into the Assembly's Cowboy Hall of Fame; and many others. I have also made lifelong friends, many of you who are here today, including my brother from another mother and former roommate Senator Mo Denis, whom I had the honor to cofound the Nevada Hispanic Legislative Caucus with.

As many of you know, I am the proud son of a housekeeper and a former farmworker. My family came to America when I was eight years old. We came here in pursuit of the American Dream. We came to this Country because we knew that in America, if you worked hard, sacrificed and played by the rules, you could become anything and achieve anything you want. Today, that eight-year-old kid who came here with no money, with no connections, no friends, no job, is a member of the United States House of Representatives. That is the American Dream. Growing up in a working-class neighborhood in North Las Vegas, I never imagined serving in this body, in the State Legislature, let alone stand here as a United States Congressman. It is truly the greatest honor of my life to serve the people of Nevada. After three months in Congress, I have a much greater appreciation of the time that I spent here in the Legislature, not just because I miss the wings or bread pudding at Firkin & Fox or karaoke nights at Jimmy G's with Senator Ford—and if you all have not seen him sing, you all have to see him sing—but because we got things done here in the Legislature.

Rarely, a day goes by where I do not tell folks in Washington about the work done here in Carson; Washington could take some lessons from you all. The idea of Democrats and Republicans coming together to make as large an investment in education as we did last session is foreign in Washington, D.C. But here, we came together to do what is best for Nevada's children. We put our parties aside and put our children first.

I often talk about working with my friend Senator Kieckhefer to pass the first ever need-based grants for Nevada's college students. I am proud to see that this program has been a big success and that the Governor has requested more funding to grow the program, because making college more affordable is critical to the future of our State. We all know that we will not have a diversified economy without a well-trained and well-educated workforce.

The steps this body has taken to diversify our State's economy should serve as a model for the Country. Working together, you all are paving the way forward for Nevada. I am excited in my new role in Congress to share our State's success with the rest of the Nation.

Before I was elected, I promised that I would be available and accessible to all of my constituents, urban, rural, suburban. I kept that promise, setting off on a district-wide tour and listening to Nevada residents from Las Vegas to Yerington and Pahrump to Mesquite. Next week, I will embark on the second part of that district tour and visit Ely, Caliente and other eastern Nevada cities. Giving constituents in the 4th Congressional District a voice and protecting their rights is my number one priority in Congress. Since arriving in Congress, I have been committed to working on solutions to the challenges that our Nation and the District are facing. As you can imagine, Washington, D.C. is an interesting place to be right now.

Last month, when the American Health Care Act was introduced in Congress, I fought to protect health care for millions of Americans. The Affordable Care Act [ACA] may not be perfect, but we should not cast aside all the progress we have made these last eight years just to score political points. The American people are tired of political brinkmanship; they are tired of hyper

partisanship. What we need to do is look for ways to improve access and get health care while bringing down the rising costs of premiums. That is how you tackle this issue.

I thank Governor Sandoval, once again, for being a strong voice for protecting the expansion of Medicaid, which is so critical here in Nevada, to ensure low-income families and rural Nevadans have access to health care. Right here in Nevada, the uninsured rate went down from 22 percent to 12 percent since the ACA implementation. I introduced an amendment aimed at protecting funding for vulnerable Nevadans, particularly low-income children who rely on Medicaid for critical health care needs. My amendment would have prevented cuts for providers like pediatricians that help keep our kids healthy.

My work in Washington has not only focused on protecting our most vulnerable, but also working to pay back what we owe our veterans for the countless contributions they made to our Country. They have made tremendous sacrifices so that we can enjoy the safety and tranquility here at home. Working to ensure our military and veteran families have the support they need must be a top priority for Congress.

That is why earlier this year I introduced my first bill, the STEP [Service, Training, Education and Preparation] for Veterans Act, which would help community colleges train veterans to fill desperately needed jobs in our local economy. Community colleges should have the tools they need to best serve those who risked their lives for our Country. I cannot think of a better prepared group of people to help us fill the jobs of the future than our own veterans. I am also fighting to keep the Ely Community Clinic for veterans in my district open. It is a shame that our veterans fought for our country and now have to fight to keep their clinic open. Veterans should not be forced to travel hundreds of miles to get the care they rely on and deserve. We should not be putting our veterans' health care at risk just to save a few bucks. Our American heroes deserve better.

I am proud of the work I have done alongside my colleagues in the Nevada Delegation to protect our beautiful public lands for future generations. Protecting monuments such as Gold Butte can create jobs, increase property values and improve quality of life for local residents. Federal and State governments should work together to protect this for the benefit of Nevadans and tourists alike.

The Nevada Delegation was also united in sponsoring the Nuclear Waste Informed Consent Act earlier this year, demanding that states be consulted before nuclear waste repositories can be built by the federal government anywhere in the Country. Let me be clear: I will fight every single day tirelessly with all the energy I have to ensure this administration cannot and will not revive Yucca Mountain as storage for the Country's nuclear waste. Nevada is not a waste dump.

I came to Congress to get things done and to continue fighting to defend Social Security and Medicare. We want to strengthen our economy and get Nevadans back to work, continue the fight to make higher education more affordable and accessible and to fight for comprehensive immigration reform. We should not be building walls; we should be building bridges, roads and schools. I look forward to working with both Democrats and Republicans on a bill that will invest in our infrastructure and put people back to work.

While I am here, I want to voice my support for a few of the bills you all are working on. First of all, congratulations to my friend and now my State Senator, Pat Spearman, who has been fighting tirelessly for this for years on the ratification of the Equal Rights Amendment. This is an important step forward for Nevada in the fight for women's rights. This is not a victory for Senator Spearman or the Democrats; this is a victory for every girl and every woman in Nevada and our Country. Thank you Senator Spearman for your leadership.

I will continue to fight efforts to cut Medicaid funding, but I urge you to push forward and expand the program that helps 600,000 Nevadans obtain the health care they need. I support proposals ensuring paid sick leave to give economic security for families as they deal with illness and health care problems. No one—and I mean no one—should have to choose between a paycheck and their health.

I support legislation that will make it easier for small businesses to gain access to capital to grow and expand. Small businesses are the backbone of our economy, and we must continue to do everything possible to make it easier for people to start and expand their business. I urge you to continue growing Nevada's green energy economy and create thousands of good paying jobs by passing several of the renewable energy bills being proposed this Session. With so much land,

wind and sun, Nevada can be the leader in the world in clean and renewable energy. This will help with our State's economic diversification efforts as well.

On education, I strongly urge you not to send desperately needed public money to private schools. Vouchers are bad policy, and our children deserve the best. Let us keep public money in our public schools. Let us instead invest in programs that have produced positive results for all our children, such as full-day kindergarten, ZOOM schools, Victory schools and expand teacher training and STEM education.

Finally, I strongly support your efforts to pass a living wage in the State of Nevada. Our workers deserve a pay raise and an opportunity to provide for their families. We live in the greatest, most powerful and richest Country on the planet; no one who works full-time should live in poverty in America. America is better than that.

As you all continue your public service and taking care of our State's legislative matters, I want to give you a word of advice that somebody once gave me: Remember that being in elected office is not about you; it is about the people who elected you to represent them. Remember that public service is always about the people, because at the end of the day we are not Democrats or Republicans, we are not liberals or conservatives; we are Nevadans and Americans first.

Thank you everybody. God bless you and good luck with the rest of the Session. Thank you so much.

Senator Gustavson moved that the Senate and Assembly in Joint Session extend a vote of thanks to U.S. Representative Ruben Kihuen for his timely, able and constructive message.

Motion carried.

The Committee on Escort escorted U.S. Representative Ruben Kihuen to the bar of the Assembly.

Assemblywomen Bilbray and Axelrod moved that the Joint Session be dissolved.

Motion carried.

Joint Session dissolved at 5:30 p.m.

#### SENATE IN SESSION

At 5:36 p.m.

President pro Tempore Denis presiding.

Quorum present.

#### GUESTS EXTENDED PRIVILEGE OF SENATE FLOOR

On request of Mr. President pro Tempore Denis, the privilege of the floor of the Senate Chamber for this day was extended to former Senator Valerie Wiener.

On request of Senator Farley, the privilege of the floor of the Senate Chamber for this day was extended to David Thomas and Daniel Thielen.

On request of Senator Ford, the privilege of the floor of the Senate Chamber for this day was extended to Berna Rhodes-Ford.

On request of Senator Harris, the privilege of the floor of the Senate Chamber for this day was extended to Bradley Skyler, Brooklyn Darmody, Emily Espinosa, Katie Hardung, Scott Harrison, Sean Harrison, Spencer Ang,

Josie Rae Merritt, Nadia Ozone, Elisha Prusinski, Valerie Wiener and Olivia Yamamoto.

On request of Senator Ratti, the privilege of the floor of the Senate Chamber for this day was extended to Tina Cortdero, Sophia Cortright Rivera, Elizabeth Cortright Rivera, Hoa Dao, Julia Gilbert, Gabriella Ho, Izabella Ho, Veena Kittusamy, Katharine Namchek, Jill Rowe, Jacqueline Rowe, Kayla Sadler, Kailey Sakowski and Talia Schonfeld.

Senator Ford moved that the Senate adjourn until Wednesday, April 12, 2017, at 11:00 a.m.

Motion carried.

Senate adjourned at 5:36 p.m.

Approved:

MOISES DENIS

*President pro Tempore of the Senate*

Attest: CLAIRE J. CLIFT  
*Secretary of the Senate*