

Amendment No. 365

Assembly Amendment to Assembly Bill No. 387	(BDR 54-225)
Proposed by: Assembly Committee on Commerce and Labor	
Amends: Summary: No Title: Yes Preamble: No Joint Sponsorship: No Digest: Yes	

Adoption of this amendment will MAINTAIN the 2/3s majority vote requirement for final passage of A.B. 387 (§§ 19-21, 29).

ASSEMBLY ACTION			Initial and Date	SENATE ACTION			Initial and Date		
Adopted	<input type="checkbox"/>	Lost	<input type="checkbox"/>	_____	Adopted	<input type="checkbox"/>	Lost	<input type="checkbox"/>	_____
Concurred In	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____	Concurred In	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____
Receded	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____	Receded	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____

EXPLANATION: Matter in (1) *blue bold italics* is new language in the original bill; (2) variations of green bold underlining is language proposed to be added in this amendment; (3) ~~red strikethrough~~ is deleted language in the original bill; (4) ~~purple double strikethrough~~ is language proposed to be deleted in this amendment; (5) orange double underlining is deleted language in the original bill proposed to be retained in this amendment.



ASSEMBLY BILL NO. 387—ASSEMBLYMEN MONROE-MORENO, PETERS, GORELOW, SUMMERS-ARMSTRONG, CARLTON; ANDERSON, BILBRAY-AXELROD, BROWN-MAY, DURAN, FRIERSON, GONZÁLEZ, NGUYEN AND TORRES

MARCH 23, 2021

Referred to Committee on Commerce and Labor

SUMMARY—Revises provisions relating to midwives. (BDR 54-225)

FISCAL NOTE: Effect on Local Government: Increases or Newly Provides for Term of Imprisonment in County or City Jail or Detention Facility.
Effect on the State: Yes.

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

AN ACT relating to midwives; establishing the Board of Licensed Certified Professional Midwives and requiring the Board to adopt certain regulations; requiring the Division of Public and Behavioral Health of the Department of Health and Human Services to perform certain tasks relating to the regulation of licensed certified professional midwives; providing for the licensure of licensed certified professional midwives and the issuance of permits to ***certified professional midwife*** student midwives; authorizing a licensed certified professional midwife to utilize a ***certified professional midwife*** birth assistant under certain circumstances; prescribing requirements relating to the practice of ***certified professional*** midwifery; ***requiring all types of midwives practicing in this State to provide to clients a Community Birth Disclosure***; authorizing a licensed certified professional midwife to possess, administer and order certain drugs, devices, chemicals and solutions; exempting a licensed certified professional midwife and other providers of health care from certain liability; requiring Medicaid to cover the services of a licensed certified professional midwife; providing a penalty; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

1 Existing law requires a midwife to perform certain duties relating to reporting births and
2 deaths and testing newborn babies for certain diseases. (NRS 440.100, 440.740, 442.008-
3 442.110, 442.600-442.680) **Sections 2-32** of this bill provide for: (1) the licensure of licensed
4 certified professional midwives by the Division of Public and Behavioral Health of the
5 Department of Health and Human Services; and (2) the regulation of licensed certified
6 professional midwives by the Division and the Board of Licensed Certified Professional
7 Midwives created by **section 16** of this bill. **Sections 2-14, 45, 69 and 73** of this bill define

8 certain terms related to the practice of certified professional midwifery. **Section 15** of this
9 bill exempts other providers of health care from requirements governing the licensure and
10 regulation of licensed certified professional midwives. ~~[Section 15 also authorizes an~~
11 ~~unlicensed person to engage in the practice of midwifery if that person obtains from each~~
12 ~~client a statement acknowledging that the person is not regulated by the State.]~~ **Sections 36,**
13 **38, 39 and 42-44** of this bill similarly exempt licensed certified professional midwives and
14 certified professional midwife student midwives from provisions governing certain other
15 providers of health care. Licensed certified professional midwives and certified professional
16 midwife student midwives would also be exempt from provisions governing allopathic
17 physicians. (NRS 630.047)

18 **Section 16** creates the Board of Licensed Certified Professional Midwives. **Sections 34,**
19 **55 and 58-62** of this bill make various changes to ensure that the Board is treated similarly to
20 other boards that regulate health-related professions. Specifically, section 34 provides that a
21 person may obtain a license as a licensed certified professional midwife through
22 reciprocity if the person has been in practice for at least the 3 years immediately
23 preceding the date on which the person submits an application. **Section 17** of this bill
24 prescribes certain requirements concerning the operations and duties of the Board. **Section 18**
25 of this bill requires the Board to adopt regulations governing the practice of certified
26 professional midwifery, including requirements governing: (1) programs of training for
27 licensed certified professional midwives; (2) qualifications for licensure as a licensed certified
28 professional midwife; (3) investigation of misconduct and discipline; (4) management of a
29 client who is at a moderate or high risk of an adverse outcome; and (5) certain other aspects of
30 the practice of certified professional midwifery.

31 **Sections 19, 20 and 21** of this bill prescribe the requirements for the issuance of a license
32 as a licensed certified professional midwife, a license by endorsement as a licensed certified
33 professional midwife and a permit as a certified professional midwife student midwife,
34 respectively. **Section 101** of this bill revises the requirements for the issuance of a license as
35 a licensed certified professional midwife on January 1, ~~[2024.]~~ **2025**, and **section 100** of this bill
36 removes a reference to a provision removed by **section 101**. **Section 22** of this bill: (1)
37 authorizes a licensed certified professional midwife to utilize a certified professional
38 midwife birth assistant to perform certain simple, routine medical tasks; and (2) prescribes the
39 required training for a certified professional midwife birth assistant.

40 Existing federal law requires each state to adopt procedures to ensure that applicants for
41 certain licenses and certificates comply with child support obligations. (42 U.S.C. § 666)
42 **Sections 23 and 29** of this bill enact such procedures as applicable to an applicant for a
43 license as a licensed certified professional midwife or a permit as a certified professional
44 midwife student midwife in order to comply with federal law. **Sections 102 and 107** of this
45 bill remove a requirement that an application for a license as a licensed certified professional
46 midwife or a permit as a certified professional midwife student midwife include the social
47 security number of the applicant on the date that those federal requirements are repealed,
48 while leaving in place the other requirements of **sections 23 and 29** until 2 years after that
49 date. **Section 33** of this bill makes a conforming change to address applicants for licensure
50 who do not have a social security number.

51 **Section 24** of this bill prescribes the authorized activities of a certified professional
52 midwife student midwife and requirements governing the supervision of a certified
53 professional midwife student midwife by a preceptor. **Section 25** of this bill requires any
54 midwife who provides birthing services in this State to provide to a client a Community
55 Birth Disclosure that contains certain information. Section 25 additionally requires the
56 Board to create this Community Birth Disclosure in collaboration with all types of
57 midwives who provide birthing services in this State. Section 25 further requires a
58 licensed certified professional midwife to obtain informed consent from each client before
59 providing services.

60 Existing law authorizes only certain practitioners who are licensed in this State and
61 registered with the State Board of Pharmacy to prescribe drugs and devices. (NRS 639.235,
62 639.23505) **Sections 26, 40, 41 and 76** of this bill authorize a licensed certified professional
63 midwife to: (1) order, possess and administer certain drugs, devices, chemicals and solutions;
64 and (2) order certain devices and vaccines for a client. **Sections 22, 24 and 77** of this bill
65 authorize a certified professional midwife birth assistant or certified professional midwife

66 student midwife to administer certain drugs, devices, chemicals and solutions under the direct
67 supervision of a licensed certified professional midwife.

68 **Section 27** of this bill imposes specific requirements concerning the management of a
69 client who is at a moderate or high risk of an adverse outcome, and **section 103** of this bill
70 ~~[removes]~~ **revises** some of those requirements on the effective date of regulations adopted by
71 the Board of Licensed Certified Professional Midwives to replace those requirements. **Section**
72 **105** of this bill creates the **Collaboration and Transfer Guidelines [Working Group]**
73 **Workgroup** to make recommendations to the Board for regulations governing the transfer of
74 such a client to a medical facility. **Section 27** also exempts: (1) a licensed certified
75 professional midwife from liability resulting from the informed refusal of such a client to
76 consent to consultation, co-management with or referral to another provider of health care or
77 transfer to a medical facility or the inability of the licensed certified professional midwife to
78 arrange for such consultation or carry out such co-management, referral or transfer; and (2)
79 other providers of health care from liability for the actions or omissions of a licensed certified
80 professional midwife.

81 **Section 28** of this bill requires a licensed certified professional midwife to annually report
82 certain information concerning his or her practice to the Division.

83 **Section 30** of this bill: (1) requires the Division to maintain certain records of
84 proceedings relating to licensing, disciplinary actions and investigations; and (2) declares
85 certain records to be confidential and certain other records to be public. **Section 57** of this bill
86 makes a conforming change to clarify that confidential records of the Division are not public
87 records. **Section 31** of this bill makes it a misdemeanor for a person who does not hold a
88 license as a licensed certified professional midwife or a permit as a **certified professional**
89 **midwife** student midwife to ~~[- (1) engage in the practice of midwifery without taking the~~
90 ~~actions required by section 15; or (2)]~~ represent that he or she is licensed to engage in the
91 practice of **certified professional** midwifery. **Section 31 allows a person to represent that**
92 **he or she is licensed or permitted to engage in the practice of certified professional**
93 **midwifery if the person is licensed or permitted in another district, state or territory of**
94 **the United States and the person discloses that license or permit to the public.** **Section 31**
95 also makes it a misdemeanor for a **certified professional midwife** student midwife to
96 represent that he or she is qualified to engage in the practice of **certified professional**
97 midwifery without supervision. **Section 31 authorizes the Division to, when it has reason to**
98 **believe or has received complaints that a person has repeatedly violated section 31,**
99 **certify the facts to the Attorney General or other appropriate law enforcement officer**
100 **who may, in his or her discretion, cause appropriate proceedings to be brought.** **Section**
101 **32** of this bill authorizes the Division or the Attorney General to seek an injunction against
102 any person violating any provision of **sections 2-32.**

103 Existing law defines the term “provider of health care” as a person who practices any of
104 certain professions related to the provision of health care. (NRS 629.031) Existing law
105 imposes certain requirements upon providers of health care, including requirements for
106 billing, standards for advertisements and criminal penalties for acquiring certain debts. (NRS
107 629.071, 629.076, 629.078) **Section 35** of this bill includes licensed certified professional
108 midwives in the definition of “provider of health care,” thereby subjecting licensed certified
109 professional midwives to those requirements. **Section 75** of this bill makes a conforming
110 change to clarify that licensed certified professional midwives are providers of health care.
111 **Section 37** of this bill requires a licensed certified professional midwife to report misconduct
112 by a person licensed or certified by the State Board of Nursing to the Executive Director of
113 the Board.

114 **Sections 48 and 49** of this bill provide that a licensed certified professional midwife is
115 not liable for civil damages resulting from providing emergency care or gratuitous care to an
116 indigent person under certain circumstances. **Section 70** of this bill requires a licensed
117 certified professional midwife who attends a birth that occurs outside a hospital which is not
118 also attended by a physician or advanced practice registered nurse to prepare a birth
119 certificate. **Section 71** of this bill provides for the imposition of a fine upon a person who
120 furnishes false information to a licensed certified professional midwife for the purpose of
121 making incorrect certification of births or deaths.

122 Existing law provides that, in any civil action concerning any unwelcome or
123 nonconsensual sexual conduct, there is a rebuttable presumption that the sexual conduct was
124 unwelcome or nonconsensual if the alleged perpetrator was a person in a position of authority

125 over the alleged victim. (NRS 41.138) **Section 47** of this bill provides that a licensed certified
 126 professional midwife, certified professional midwife student midwife or certified
 127 professional midwife birth assistant is a person of authority for that purpose.

128 **Sections 46, 50-54, 63, 64, 66-75 and 78-99** of this bill make revisions to treat licensed
 129 certified professional midwives similarly to other providers of health care in certain respects.
 130 **Section 65** of this bill requires Medicaid to cover the services of a licensed certified
 131 professional midwife and provide reimbursement for such services at comparable rates to
 132 other providers of health care who provide similar services. **Section 56** of this bill makes a
 133 conforming change to indicate the placement of **section 65** in the Nevada Revised Statutes.

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

1 **Section 1.** Title 54 of NRS is hereby amended by adding thereto a new
 2 chapter to consist of the provisions set forth as sections 2 to 32, inclusive, of this
 3 act.

4 **Sec. 2.** *As used in this chapter, unless the context otherwise requires, the*
 5 *words and terms defined in sections ~~3~~ 4 to 14, inclusive, of this act have the*
 6 *meanings ascribed to them in those sections.*

7 **Sec. 3.** ~~“Birth assistant” means a person who performs routine medical~~
 8 ~~tasks and procedures under the direct supervision of a licensed certified~~
 9 ~~professional midwife.] (Deleted by amendment.)~~

10 **Sec. 4.** *“Board” means the Board of Licensed Certified Professional*
 11 *Midwives created by section 16 of this act.*

12 **Sec. 5.** *“Certified nurse-midwife” means a person who is:*

13 1. *Certified as a nurse-midwife by the American Midwifery Certification*
 14 *Board, or its successor organization; and*

15 2. *Licensed as an advanced practice registered nurse pursuant to NRS*
 16 *632.237.*

17 **Sec. 5.3.** *“Certified professional midwife birth assistant” means a person*
 18 *who performs routine medical tasks and procedures under the direct supervision*
 19 *of a licensed certified professional midwife.*

20 **Sec. 5.7.** *“Certified professional midwife student midwife” means a person*
 21 *who holds a permit as a certified professional midwife student midwife issued*
 22 *pursuant to section 21 of this act.*

23 **Sec. 6.** *“Co-manage” means a licensed certified professional midwife*
 24 *jointly managing the care of a client with another provider of health care.*

25 **Sec. 7.** *“Consult” means a client receiving an opinion concerning the*
 26 *management of a particular condition or symptom from an appropriate provider*
 27 *of health care at the direction of a licensed certified professional midwife.*

28 **Sec. 8.** *“Division” means the Division of Public and Behavioral Health of*
 29 *the Department of Health and Human Services.*

30 **Sec. 9.** *“Licensed certified professional midwife” means a person licensed*
 31 *as a licensed certified professional midwife pursuant to section 19 or 20 of this*
 32 *act.*

33 **Sec. 10.** *“Medical facility” has the meaning ascribed to it in NRS 449.0151.*

34 **Sec. 11.** *“Practice of certified professional midwifery” means the provision*
 35 *of autonomous care to healthy clients who are at low risk of developing*
 36 *complications before conception, while pregnant and during the postpartum*
 37 *period and to newborn infants for up to 6 weeks after childbirth. The term*
 38 *includes, without limitation, co-management of the care of a client with a*
 39 *qualified provider of health care.*

1 Sec. 12. "Provider of health care" has the meaning ascribed to it in NRS
2 629.031.

3 Sec. 13. "Refer" means a licensed certified professional midwife arranging
4 for another provider of health care to assume primary responsibility for
5 managing a condition or symptom.

6 Sec. 14. ~~["Student midwife" means a person who holds a permit as a
7 student midwife issued pursuant to section 21 of this act.]~~ (Deleted by
8 amendment.)

9 Sec. 15. 1. Except as otherwise provided in this section and sections 22
10 and 27 of this act, the provisions of this chapter do not apply to a person who
11 holds a license, certificate or other credential issued pursuant to chapters 630 to
12 641C, inclusive, of NRS and is practicing within the scope of authority authorized
13 by that license, certificate or other credential. For the purposes of this subsection,
14 a certified nurse-midwife shall be deemed to be practicing within the scope of
15 authority authorized by his or her license as an advanced practice registered
16 nurse.

17 2. ~~[A person who is not licensed pursuant to this chapter and engages in the
18 practice of midwifery must:~~

19 ~~— (a) Obtain from each client of the person a statement in the form prescribed
20 by the Division signed by the person and the client stating that:~~

21 ~~— (1) The person is not a licensed certified professional midwife and has
22 not had his or her credentials reviewed by any governmental entity; and~~

23 ~~— (2) There is no state agency that oversees the services provided by the
24 person with which the client may file a complaint concerning those services; and~~

25 ~~— (b) Maintain the statement in the records of the person for at least 5 years
26 after the person ceases providing services to the client.~~

27 ~~— 3. This chapter does not prohibit:~~

28 (a) Gratuitous services of a person in an emergency; or

29 (b) Gratuitous care by friends or by members of the family.

30 Sec. 16. 1. The Board of Licensed Certified Professional Midwives is
31 hereby created.

32 2. The Administrator of the Division shall appoint to the Board:

33 (a) Four voting members who are licensed certified professional midwives
34 currently practicing in this State;

35 (b) One voting member who is ~~an~~ an advanced practice registered nurse,
36 certified nurse-midwife or physician currently practicing in the area of
37 ~~pediatrics,~~ obstetrics in this State ~~and~~ and who has experience working in a home
38 setting;

39 (c) One voting member who is a provider of health care, other than a
40 ~~licensed certified professional midwife or a physician practicing in the area of~~
41 ~~pediatrics,~~ provider of health care described in paragraph (a) or (b), who is
42 currently providing neonatal care in this State;

43 (d) ~~One~~ Two voting ~~member~~ members who ~~is a representative~~ are
44 representatives of the general public ~~and~~ and who have received care from a
45 certified nurse-midwife; and

46 (e) One nonvoting member to serve as a liaison with the Division.

47 3. Each member of the Board must be a resident of this State.

48 4. The Administrator of the Division:

49 (a) May solicit nominations for appointment to the Board from interested
50 persons and entities.

51 (b) Shall give preference when appointing the members of the Board to
52 candidates who have experience collaborating with licensed certified professional
53 midwives or providing or utilizing midwifery services outside of a hospital.

1 5. *The Board shall adopt regulations prescribing the terms of its members.*
2 *Such terms must not exceed 4 years. The Administrator of the Division may:*

- 3 (a) *Reappoint a member at the expiration of his or her term; or*
- 4 (b) *Terminate a member before the expiration of his or her term for cause.*

5 6. *A vacancy on the Board must be filled in the same manner as the initial*
6 *appointment.*

7 7. *Except as otherwise provided in this subsection, members of the Board*
8 *serve without compensation. The State Board of Health may, by regulation,*
9 *provide for compensation of the members of the Board.*

10 **Sec. 17.** *1. A majority of the voting members of the Board constitutes a*
11 *quorum for the transaction of business, and a majority of a quorum present at*
12 *any meeting is sufficient for any official action taken by the Board.*

13 2. *The Board shall:*

14 (a) *At its first meeting and annually thereafter, elect a Chair from among its*
15 *members;*

16 (b) *Meet regularly at the call of the Chair; and*

17 (c) *Recommend to the Legislature any statutory changes to improve the*
18 *practice of certified professional midwifery in this State.*

19 3. *To the extent practicable, any advice or recommendations made by the*
20 *Board concerning the practice of certified professional midwifery must be guided*
21 *by current, peer-reviewed scientific research.*

22 **Sec. 18.** *1. The Board shall adopt any regulations necessary or*
23 *convenient for carrying out the provisions of this chapter. Those regulations must*
24 *include, without limitation:*

25 (a) *Requirements concerning the approval by the Division of programs of*
26 *training for licensed certified professional midwives and certified professional*
27 *midwife birth assistants, including, without limitation, the required training and*
28 *instruction that must be provided by such a program and the procedure for*
29 *obtaining such approval. ~~[Those regulations must require that a program for the~~*
30 *~~training of licensed certified professional midwives be accredited by the~~*
31 *~~Midwifery Education Accreditation Council, or its successor organization.]~~*

32 (b) *Requirements governing the issuance and renewal of a license as a*
33 *licensed certified professional midwife, including, without limitation:*

34 (1) *The educational qualifications that, except as otherwise provided in*
35 *section 19 of this act and in addition to the qualifications prescribed by that*
36 *section, are necessary to obtain a license pursuant to that section.*

37 (2) *The period for which a license is valid.*

38 (3) *A requirement that an applicant for the renewal of a license must*
39 *have completed continuing education in cultural humility or the elimination of*
40 *racism or bias.*

41 (c) *The procedure for filing a complaint with the Division concerning a*
42 *licensed certified professional midwife or certified professional midwife student*
43 *midwife.*

44 (d) *Grounds for the Division to impose disciplinary action against a licensed*
45 *certified professional midwife or certified professional midwife student midwife*
46 *and the procedure by which the Division will impose such disciplinary action.*

47 (e) *Requirements governing the reinstatement of a license that has been*
48 *revoked, including, without limitation, the procedure to apply for reinstatement.*

49 (f) *Regulations governing the ordering, usage and administration of drugs,*
50 *vaccines, chemicals, solutions and devices pursuant to section 26 of this act.*

51 (g) *Regulations concerning the management by a licensed certified*
52 *professional midwife of a client who may have a condition that puts the client at a*
53 *moderate or high risk of an adverse outcome for the client or the fetus or*

1 *newborn infant of the client. The regulations must, to the extent practicable, be*
 2 *guided by current, peer-reviewed scientific research and must include, without*
 3 *limitation:*

4 *(1) A list of conditions or symptoms associated with a risk of serious*
 5 *permanent harm or death to a client or the fetus or newborn infant of a client;*

6 *(2) A list of conditions or symptoms associated with a risk of greater than*
 7 *minimal harm to a client or the fetus or newborn infant of a client that do not*
 8 *pose a risk of serious permanent harm or death; and*

9 *(3) Specific requirements for each condition or symptom listed pursuant*
 10 *to subparagraphs (1) and (2) governing:*

11 *(I) The circumstances under which a licensed certified professional*
 12 *midwife must arrange for the client to consult with another provider of health*
 13 *care, co-manage the care of the client with another provider of health care, refer*
 14 *primary responsibility for the care of a client to another provider of health care*
 15 *or transfer the care of the client to a medical facility, procedures for such*
 16 *consultation, co-management, referral or transfer and requirements to ensure*
 17 *that a provider of health care who is consulted, with whom a client's condition or*
 18 *symptom is co-managed or to whom primary responsibility for the care of a client*
 19 *is referred is appropriately qualified; and*

20 *(II) The information that must be included on the form for providing*
 21 *informed refusal to consent to consultation, co-management, referral or transfer*
 22 *pursuant to section 27 of this act and the management of a client who provides*
 23 *such informed refusal to consent.*

24 *(h) Requirements governing the screening of clients in accordance with*
 25 *chapter 442 of NRS and necessary measures for the prevention of communicable*
 26 *diseases.*

27 *(i) Requirements concerning the records of treatment and outcomes that*
 28 *must be kept by a licensed certified professional midwife.*

29 *(j) Any other requirements necessary to optimize obstetrical and neonatal*
 30 *outcomes for clients of licensed certified professional midwives.*

31 *2. The Board may, by regulation, require an applicant for a license as a*
 32 *licensed certified professional midwife, including, without limitation, an*
 33 *applicant for a license by endorsement pursuant to section 20 of this act, to*
 34 *submit to the Division a complete set of his or her fingerprints and written*
 35 *permission authorizing the Division to forward the fingerprints to the Central*
 36 *Repository for Nevada Records of Criminal History for submission to the Federal*
 37 *Bureau of Investigation for its report.*

38 **Sec. 19.** *1. An applicant for a license as a licensed certified professional*
 39 *midwife, other than a license by endorsement pursuant to section 20 of this act,*
 40 *must submit to the Division an application pursuant to this section in the form*
 41 *prescribed by the Division. The application must be accompanied by a fee in the*
 42 *amount prescribed by regulation of the State Board of Health pursuant to NRS*
 43 *439.150, which must not exceed \$1,000. The application must include, without*
 44 *limitation, proof that the applicant ~~is~~*

45 ~~*(a) Is*~~ *is certified as a ~~certified professional~~ midwife by the North*
 46 *American Registry of Midwives, or its successor organization, ~~and~~ ;*

47 ~~*(b)*~~ *(a) Has completed ~~any~~ an educational ~~requirements prescribed by~~*
 48 *the Board pursuant to section 18 of this act or holds* program accredited by the
 49 Midwifery Education Accreditation Council, or its successor organization; or

50 (b) Holds a Midwifery Bridge Certificate issued by the North American
 51 Registry of Midwives, or its successor organization, and has completed the
 52 Portfolio Evaluation Process prescribed by that organization.

1 2. A license as a licensed certified professional midwife may be renewed
2 upon submission to the Division of a renewal application in the form prescribed
3 by the Division. The renewal application must:

4 (a) Be accompanied by a renewal fee in the amount prescribed by regulation
5 of the State Board of Health pursuant to NRS 439.150, which must not exceed
6 \$1,000; and

7 (b) Include any information required by the regulations adopted by the
8 Board pursuant to section 18 of this act.

9 3. The State Board of Health shall establish by regulation a procedure
10 through which:

11 (a) An applicant may petition the State Board to reduce the fees imposed
12 pursuant to this section. An applicant may qualify for such a reduction if the
13 applicant demonstrates, to the satisfaction of the State Board, that the fees
14 imposed pursuant to this section are an economic hardship on the applicant.

15 (b) The State Board allocates a portion of the fees imposed and collected
16 pursuant to this section to programs that promote applicants from marginalized
17 identities through increasing the numbers of such applicants and reducing
18 barriers that such applicants face.

19 4. As used in this section, "marginalized identity" means an identity or
20 expression that causes or has historically caused a person of such identity or
21 expression to be disproportionately discriminated against, harassed or otherwise
22 negatively treated or affected as a result of the identity or expression.

23 Sec. 20. 1. The Division shall issue a license by endorsement as a
24 licensed certified professional midwife to an applicant who meets the
25 requirements set forth in this section. An applicant may submit to the Division an
26 application for such a license if the applicant holds a corresponding valid and
27 unrestricted license as a licensed certified professional midwife in the District of
28 Columbia or any state or territory of the United States.

29 2. An applicant for a license by endorsement pursuant to this section must
30 submit to the Division with his or her application:

31 (a) Proof satisfactory to the Board that the applicant:

32 (1) Satisfies the requirements of subsection 1;

33 (2) Has not been disciplined or investigated by the corresponding
34 regulatory authority of the District of Columbia or any state or territory in which
35 the applicant currently holds or has held a license as a licensed certified
36 professional midwife or any other type of midwife;

37 (3) Has not been held civilly or criminally liable for malpractice in the
38 District of Columbia or any state or territory of the United States;

39 (4) Is certified as a certified professional midwife by the North American
40 Registry of Midwives, or its successor organization; and

41 (5) Holds a Midwifery Bridge Certificate issued by the North American
42 Registry of Midwives, or its successor organization, and has completed the
43 Portfolio Evaluation Process prescribed by that organization or meets the
44 educational requirements prescribed by the Board pursuant to section 18 of this
45 act;

46 (b) An affidavit stating that the information contained in the application and
47 any accompanying material is true and correct;

48 (c) The fee prescribed by the State Board of Health pursuant to NRS
49 439.150, which must not exceed \$1,000; and

50 (d) Any other information required by the Division.

51 3. Not later than 15 business days after receiving an application for a
52 license by endorsement as a licensed certified professional midwife pursuant to
53 this section, the Division shall provide written notice to the applicant of any

1 additional information required by the Division to consider the application.
2 Unless the Division denies the application for good cause, the Division shall
3 approve the application and issue a license by endorsement as a licensed certified
4 professional midwife to the applicant not later than:

5 (a) Forty-five days after receiving the application; or

6 (b) If the Board requires the applicant to submit his or her fingerprints
7 pursuant to section 18 of this act, 10 days after the Board receives a report on the
8 applicant's background based on the submission of the applicant's fingerprints,
9 ↪ whichever occurs later.

10 **Sec. 21. 1.** An applicant for a permit as a certified professional midwife
11 student midwife must submit to the Division an application in the form prescribed
12 by the Division. The application must be accompanied by a fee of \$100 and must
13 include, without limitation:

14 (a) A copy of an agreement with at least one preceptor to supervise the
15 applicant and proof that each preceptor meets the requirements of section 24 of
16 this act; and

17 (b) Proof that the applicant is enrolled in a program of training for licensed
18 certified professional midwives approved by the Division.

19 2. A permit as a certified professional midwife student midwife is valid for 2
20 years after the date of issuance and may be renewed upon submission to the
21 Division of:

22 (a) A renewal application in the form prescribed by the Division; and

23 (b) A renewal fee of \$100.

24 3. Upon approving an application for the issuance or renewal of a permit as
25 a certified professional midwife student midwife, the Division shall provide to the
26 applicant a written copy of the provisions of section 24 of this act and any
27 regulations adopted pursuant to section 18 of this act that apply to certified
28 professional midwife student midwives.

29 **Sec. 22. 1.** A licensed certified professional midwife may utilize a certified
30 professional midwife birth assistant to perform the tasks and procedures
31 authorized by subsection 3. Except as otherwise provided in subsection 2, a
32 certified professional midwife birth assistant, including, without limitation, a
33 provider of health care serving as a certified professional midwife birth assistant,
34 must:

35 (a) Be at least 18 years of age;

36 (b) Have completed the training for certified professional midwife birth
37 assistants approved by the Division;

38 (c) Have completed training in cultural humility or the elimination of racism
39 or bias;

40 (d) Hold current certification in the techniques of administering neonatal
41 resuscitation issued by an instructor certified by the American Academy of
42 Pediatrics, or its successor organization; and

43 (e) Hold current certification in the techniques of administering
44 cardiopulmonary resuscitation.

45 2. A certified professional midwife birth assistant who is a licensed certified
46 professional midwife or who is a certified nurse-midwife is not required to
47 possess the qualifications set forth in subsection 1.

48 3. A certified professional midwife birth assistant may perform routine
49 clinical tasks and procedures under the direct supervision of a licensed certified
50 professional midwife who is present on the premises and able to intervene if
51 necessary. Such tasks include, without limitation:

52 (a) Administering medications, including, without limitation and to the
53 extent applicable, any medication described in subsection 2 of section 26 of this

1 *act, intradermally, subcutaneously and intramuscularly and performing skin*
2 *tests;*

3 *(b) Providing medication, including, without limitation and to the extent*
4 *applicable, any medication described in subsection 2 of section 26 of this act, to a*
5 *patient to self-administer orally, sublingually, topically or rectally;*

6 *(c) Administering oxygen;*

7 *(d) Assisting in the care of a newborn infant immediately after birth;*

8 *(e) Placing a device used for auscultation of fetal heart tones;*

9 *(f) Assisting a client with activities of daily living and assisting the client in*
10 *moving between the bed and bathroom;*

11 *(g) Performing cardiopulmonary or neonatal resuscitation; and*

12 *(h) Checking vital signs.*

13 *4. A certified professional midwife birth assistant shall not assess clinical*
14 *information or make clinical decisions.*

15 **Sec. 23. 1.** *In addition to any other requirements set forth in this chapter:*

16 *(a) An applicant for the issuance of a license as a licensed certified*
17 *professional midwife or a permit as a certified professional midwife student*
18 *midwife in this State shall include the social security number of the applicant in*
19 *the application submitted to the Division.*

20 *(b) An applicant for the issuance of a license as a licensed certified*
21 *professional midwife or a permit as a certified professional midwife student*
22 *midwife in this State shall submit to the Division of Public and Behavioral Health*
23 *of the Department of Health and Human Services the statement prescribed by the*
24 *Division of Welfare and Supportive Services of the Department of Health and*
25 *Human Services pursuant to NRS 425.520. The statement must be completed and*
26 *signed by the applicant.*

27 *2. The Division of Public and Behavioral Health of the Department of*
28 *Health and Human Services shall include the statement required pursuant to*
29 *subsection 1 in:*

30 *(a) The application or any other forms that must be submitted for the*
31 *issuance or renewal of the license or permit; or*

32 *(b) A separate form prescribed by the Division.*

33 *3. A license as a licensed certified professional midwife or a permit as a*
34 *certified professional midwife student midwife may not be issued or renewed by*
35 *the Division if the applicant:*

36 *(a) Fails to submit the statement required pursuant to subsection 1; or*

37 *(b) Indicates on the statement submitted pursuant to subsection 1 that the*
38 *applicant is subject to a court order for the support of a child and is not in*
39 *compliance with the order or a plan approved by the district attorney or other*
40 *public agency enforcing the order for the repayment of the amount owed*
41 *pursuant to the order.*

42 *4. If an applicant indicates on the statement submitted pursuant to*
43 *subsection 1 that the applicant is subject to a court order for the support of a*
44 *child and is not in compliance with the order or a plan approved by the district*
45 *attorney or other public agency enforcing the order for the repayment of the*
46 *amount owed pursuant to the order, the Division shall advise the applicant to*
47 *contact the district attorney or other public agency enforcing the order to*
48 *determine the actions that the applicant may take to satisfy the arrearage.*

49 **Sec. 24. 1.** *A certified professional midwife student midwife may engage*
50 *in the practice of certified professional midwifery, including, without limitation,*
51 *by using or administering any drug, vaccine, device, chemical or solution*
52 *described in subsection 1, 2 or 3 of section 26 of this act, under the direct*
53 *supervision of a preceptor who is present on the premises and able to intervene if*

1 *necessary. The preceptor is responsible for each client to whom the certified*
 2 *professional midwife student midwife provides midwifery services.*

3 *2. A preceptor must be a person engaged in the practice of certified*
 4 *professional midwifery who is approved by the North American Registry of*
 5 *Midwives, or its successor organization, to serve as a preceptor.*

6 *3. A preceptor shall:*

7 *(a) Provide to each client in the form prescribed by the Division notice that a*
 8 *certified professional midwife student midwife may be involved in the care of the*
 9 *client;*

10 *(b) Explain the scope of the activities that the certified professional midwife*
 11 *student midwife may perform under the supervision of the preceptor; and*

12 *(c) Review and evaluate all care provided by a certified professional midwife*
 13 *student midwife under his or her supervision and attend every encounter between*
 14 *the certified professional midwife student midwife and a client.*

15 *4. Not later than 10 days after the preceptor of a certified professional*
 16 *midwife student midwife ceases to serve as his or her preceptor, the certified*
 17 *professional midwife student midwife shall notify the Division. If the certified*
 18 *professional midwife student midwife has no additional preceptor, the certified*
 19 *professional midwife student midwife must cease engaging in the practice of*
 20 *certified professional midwifery until he or she submits to the Division a written*
 21 *agreement with a new preceptor who meets the requirements of this section.*

22 *Sec. 25. Upon accepting a client ~~1-1~~:*

23 *1. A midwife, including, without limitation, a licensed certified professional*
 24 *midwife and a certified nurse-midwife, shall provide the client with a Community*
 25 *Birth Disclosure. The Community Birth Disclosure must inform the client*
 26 *regarding:*

27 *(a) The type of midwife that the midwife is;*

28 *(b) The level of education that the midwife has received; and*

29 *(c) The care to be provided by the midwife.*

30 *↳ The Board shall create the Community Birth Disclosure in collaboration with*
 31 *all types of midwives practicing in this State.*

32 *2. A midwife must sign and date, and obtain the signature of the client with*
 33 *a notation of the date of the signature upon, the Community Birth Disclosure*
 34 *provided pursuant to subsection 1. The midwife shall retain a copy of the*
 35 *Community Birth Disclosure for 5 years.*

36 *3. In addition to providing the Community Birth Disclosure pursuant to*
 37 *subsection 1, a licensed certified professional midwife shall obtain from the client*
 38 *informed written consent regarding the care to be provided by the licensed*
 39 *certified professional midwife. Informed written consent requires that the*
 40 *licensed certified professional midwife provide to the client:*

41 ~~1-1~~ *(a) A description of the educational background and credentials of the*
 42 *licensed certified professional midwife;*

43 ~~1-1~~ *(b) A description of the practice of certified professional midwifery as*
 44 *set forth in section 11 of this act and the limitations on the practice of a licensed*
 45 *certified professional midwife;*

46 ~~1-1~~ *(c) Instructions for obtaining a copy of the provisions of sections 2 to 32,*
 47 *inclusive, of this act and the regulations adopted pursuant to section 18 of this*
 48 *act;*

49 ~~1-1~~ *(d) Instructions for filing a complaint with the Division in accordance*
 50 *with the regulations adopted pursuant to section 18 of this act;*

51 ~~1-1~~ *(e) A description of the actions that the licensed certified professional*
 52 *midwife will take in an emergency, including, without limitation, the conditions*
 53 *under which the licensed certified professional midwife will recommend the*

1 transfer of the client to a medical facility and the procedure that the licensed
2 certified professional midwife will follow when making such a transfer;

3 ~~16-~~ (f) A description of the procedures that will be used during the birth in
4 the client's chosen setting, the risks and benefits of birth in that setting and the
5 conditions that may arise during delivery;

6 ~~17-~~ (g) A disclosure of whether the licensed certified professional midwife
7 holds liability insurance; ~~and, if so, the amount for which the licensed certified~~
8 ~~professional midwife is insured;~~

9 ~~18-~~ (h) A summary of the provisions of section 27 of this act and the
10 regulations adopted pursuant to section 18 of this act governing consultation, co-
11 management, referral and transfer and a description of the procedures
12 established by the licensed certified professional midwife for consultation, co-
13 management, referral and transfer; and

14 ~~19-~~ (i) Any other information required by regulation of the Board.

15 **Sec. 26.** 1. A licensed certified professional midwife may use the
16 following devices:

17 (a) Dopplers, syringes, needles, phlebotomy equipment, sutures, urinary
18 catheters, intravenous equipment, amnihooks, airway suction devices, electronic
19 fetal monitors, tocodynamometer monitors, equipment for administering oxygen,
20 glucose monitoring systems and testing strips, neonatal and adult oximetry
21 equipment, centrifuges and equipment for conducting screenings of hearing
22 ability;

23 (b) Equipment for administering nitrous oxide, including, without limitation,
24 scavenging systems ~~+~~, only in the setting where the birth is taking place;

25 (c) Neonatal and adult resuscitation equipment, including, without
26 limitation, airway devices; and

27 (d) Any other device authorized by regulation of the Board.

28 2. A licensed certified professional midwife may possess and administer:

29 (a) Oxytocin, misoprostol, methylergonovine, tranexamic acid, lidocaine,
30 penicillin, ampicillin, cefazolin, clindamycin, epinephrine, diphenhydramine,
31 ondansetron, phylloquinone, erythromycin ointment and nitrous oxide;

32 (b) Influenza vaccine, hepatitis B vaccine and diphtheria, tetanus and
33 pertussis vaccine;

34 (c) Rho (D) immune globulin and hepatitis B immune globulin; ~~and~~

35 (d) Terbutaline only in the setting where the birth is taking place; and

36 (e) Any other drugs or vaccines authorized by regulation of the Board.

37 3. A licensed certified professional midwife may possess and administer:

38 (a) Oxygen, lactated Ringers solution, 5 percent dextrose in lactated Ringers
39 solution, 0.9 percent sodium chloride solution and sterile water; and

40 (b) Any other chemicals or solutions authorized by regulation of the Board.

41 4. A licensed certified professional midwife may order for a client:

42 (a) Breast pumps, compression stockings and belts, maternity belts,
43 diaphragms, cervical caps, glucometers, glucose testing strips, iron supplements
44 and prenatal vitamins; and

45 (b) Any vaccine described in paragraph (b) of subsection 2.

46 **Sec. 27.** 1. Except as otherwise provided in subsections 4 and 5, a
47 licensed certified professional midwife must recommend and, with the consent of
48 the client, arrange for consultation or co-management with or referral to a
49 qualified provider of health care or transfer to an appropriate medical facility if
50 the licensed certified professional midwife determines that any of the following
51 conditions or symptoms exist:

52 (a) Complete placenta previa;

53 (b) Partial placenta previa after the 27th week of gestation;

- 1 (c) *Infection with the human immunodeficiency virus;*
2 (d) *Cardiovascular disease;*
3 (e) *Severe mental illness that may cause the client to cause harm to*
4 *themselves or others;*
5 (f) *Pre-eclampsia or eclampsia;*
6 (g) *Fetal growth restriction, oligohydramnios or moderate or severe*
7 *polyhydramnios in the pregnancy;*
8 (h) *Potentially serious anatomic fetal abnormalities;*
9 (i) *Diabetes that requires insulin or other medication for management;*
10 (j) *Gestational age of greater than 43 weeks; or*
11 (k) *Any other condition or symptom which, in the judgment of the licensed*
12 *certified professional midwife, could threaten the life of the client or the fetus or*
13 *newborn infant of the client.*

14 2. *Except as otherwise provided in subsections 4 and 5, a licensed certified*
15 *professional midwife must recommend and, with the consent of the client,*
16 *arrange for consultation or co-management with or referral to a qualified*
17 *provider of health care if the licensed certified professional midwife determines*
18 *that any of the following conditions or symptoms exist:*

- 19 (a) *Prior cesarean section or other surgery resulting in a uterine scar;*
20 (b) *Multifetal gestation; or*
21 (c) *Non-cephalic presentation after 36 weeks of gestation.*

22 3. *A licensed certified professional midwife who recommends to a client*
23 *consultation, co-management, referral or transfer shall document in the record*
24 *of the client:*

- 25 (a) *The contents of the recommendation;*
26 (b) *The condition or symptom for which the recommendation was made;*
27 (c) *Whether the client consented to the consultation, co-management,*
28 *referral or transfer; and*

29 (d) *If the client provides consent, the name, profession and specialty of the*
30 *provider of health care with whom the licensed certified professional midwife*
31 *consulted or co-managed or to whom the client was referred or the medical*
32 *facility to which the client was transferred.*

33 4. *A client may provide informed refusal to consent to consultation, co-*
34 *management, referral or transfer in writing on a form prescribed by the Division.*
35 *If a client provides informed refusal to consent to:*

36 (a) *Consultation, co-management, referral or transfer after the licensed*
37 *certified professional midwife has determined that a condition or symptom*
38 *described in subsection 1 exists, the licensed certified professional midwife must*
39 *attempt to locate a qualified provider of health care for which the client consents*
40 *to consultation, co-management or referral or an appropriate medical facility for*
41 *which the client consents to transfer. If the licensed certified professional*
42 *midwife is unable to locate such a provider of health care who is willing to*
43 *consult, co-manage or accept the referral or such a medical facility which is*
44 *willing to accept the transfer, the licensed certified professional midwife is not*
45 *liable for any damages resulting from the failure to consult, co-manage, refer or*
46 *transfer. If the condition or symptom threatens the life or health of the client or*
47 *the fetus or the newborn infant of the client during labor or delivery, the licensed*
48 *certified professional midwife must call 911 and provide care until relieved by a*
49 *qualified provider of health care.*

50 (b) *Consultation, co-management or referral after the licensed certified*
51 *professional midwife has determined that a condition or symptom described in*
52 *subsection 2 exists, the licensed certified professional midwife:*

1 (1) *May continue to serve as the primary provider of health care for the*
2 *client until the client provides such consent; and*

3 (2) *Is not liable for any damages resulting from the failure to consult, co-*
4 *manage or refer.*

5 5. *If, after determining that a condition or symptom described in:*

6 (a) *Subsection 1 exists and making a reasonable effort to arrange for*
7 *consultation with, co-management of the condition or symptom with or referral*
8 *of the client to a qualified provider of health care or the transfer of the client to*
9 *an appropriate medical facility, a licensed certified professional midwife is*
10 *unable to locate a qualified provider of health care who is willing to consult, co-*
11 *manage or accept the referral or an appropriate medical facility willing to accept*
12 *the transfer, the licensed certified professional midwife shall be deemed to be in*
13 *compliance with the requirements of this section and is not liable for any*
14 *damages resulting from the inability of the licensed certified professional midwife*
15 *to consult, co-manage, refer or transfer. If the condition or symptom threatens*
16 *the life or health of the client or the fetus or newborn infant of the client during*
17 *labor or delivery, the licensed certified professional midwife must call 911 and*
18 *provide care until relieved by a qualified provider of health care.*

19 (b) *Subsection 2 exists and making a reasonable effort to arrange for*
20 *consultation with, co-management of the condition or symptom with or referral*
21 *of the client to a qualified provider of health care, a licensed certified*
22 *professional midwife is unable to locate a qualified provider of health care who is*
23 *willing to consult, co-manage or accept the referral, the licensed certified*
24 *professional midwife shall be deemed to be in compliance with the requirements*
25 *of this section and is not liable for any damages resulting from the inability of the*
26 *licensed certified professional midwife to arrange for consultation, co-manage or*
27 *refer.*

28 6. *A provider of health care who is not a licensed certified professional*
29 *midwife is not liable for any damages resulting from any act or omission of a*
30 *licensed certified professional midwife and is not required to adhere to any*
31 *standards of care governing the practice of certified professional midwifery. Such*
32 *a provider of health care is only liable for the damages resulting from his or her*
33 *own acts or omissions in accordance with the standards of care governing his or*
34 *her profession.*

35 **Sec. 28. 1.** *On or before January 31 of each year, a licensed certified*
36 *professional midwife shall submit to the Division a report that includes, for the*
37 *immediately preceding calendar year:*

38 (a) *The total number of clients who, when accepted by the licensed certified*
39 *professional midwife as clients, intended to deliver their babies outside of a*
40 *hospital;*

41 (b) *The number of live births attended by the licensed certified professional*
42 *midwife outside of a hospital;*

43 (c) *The number of cases of fetal demise, deaths of newborns and maternal*
44 *deaths attended by the licensed certified professional midwife;*

45 (d) *The number of clients transferred to a medical facility during the*
46 *antepartum, intrapartum or immediate postpartum periods and the reason for*
47 *and outcome of each such transfer;*

48 (e) *A brief description of any complications resulting in maternal or infant*
49 *morbidity or mortality;*

50 (f) *The planned location and actual location of each delivery; and*

51 (g) *Any other information required by regulation of the Board.*

1 2. Not later than 30 days after attending a maternal or newborn infant
2 death, a licensed certified professional midwife shall report the death to the
3 Division and the Board.

4 **Sec. 29.** 1. If the Division receives a copy of a court order issued pursuant
5 to NRS 425.540 that provides for the suspension of all professional, occupational
6 and recreational licenses, certificates and permits issued to a person who is the
7 holder of a license or permit issued pursuant to this chapter, the Division shall
8 deem the license or permit issued to that person to be suspended at the end of the
9 30th day after the date on which the court order was issued unless the Division
10 receives a letter issued to the holder of the license by the district attorney or other
11 public agency pursuant to NRS 425.550 stating that the holder of the license has
12 complied with the subpoena or warrant or has satisfied the arrearage pursuant to
13 NRS 425.560.

14 2. The Division shall reinstate a license or permit issued pursuant to this
15 chapter that has been suspended by a district court pursuant to NRS 425.540 if:

16 (a) The Division receives a letter issued by the district attorney or other
17 public agency pursuant to NRS 425.550 to the person whose license or permit
18 was suspended stating that the person whose license or permit was suspended has
19 complied with the subpoena or warrant or has satisfied the arrearage pursuant to
20 NRS 425.560; and

21 (b) The person whose license or permit was suspended pays the appropriate
22 fee required pursuant to this chapter.

23 **Sec. 30.** 1. The Division shall keep a record of its proceedings relating to
24 licensing, disciplinary actions and investigations. Except as otherwise provided in
25 this chapter, the record must be open to public inspection at all reasonable times.

26 2. Except as otherwise provided in this section and NRS 239.0115, a
27 complaint filed with the Division, all documents and other information filed with
28 the complaint and all documents and other information compiled as a result of
29 an investigation conducted to determine whether to initiate disciplinary action
30 against a person are confidential and privileged, unless the person submits a
31 written statement to the Division requesting that such documents and information
32 be made public records.

33 3. A complaint or other document filed by the Division to initiate
34 disciplinary action, any written opinion rendered by the Division and all
35 documents and information considered by the Division when determining
36 whether to impose discipline are public records.

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

39 5. The provisions of this section do not prohibit the Division from
40 communicating or cooperating with or providing any documents or other
41 information to any other licensing board or any other agency that is investigating
42 a person, including, without limitation, a law enforcement agency.

43 **Sec. 31.** 1. ~~[(A)]~~ Except as otherwise provided in subsection 2, a person
44 who is not licensed as a licensed certified professional midwife or does not hold a
45 permit as a certified professional midwife student midwife or a person whose
46 license as a licensed certified professional midwife or permit as a certified
47 professional midwife student midwife has been suspended or revoked by the
48 Division shall not:

49 (a) ~~Engage in the practice of midwifery without complying with the~~
50 ~~requirements of subsection 2 of section 15 of this act;~~

51 ~~(b) Use in connection with his or her name the words "licensed certified~~
52 ~~professional midwife," "certified professional midwife," "licensed midwife" or~~
53 ~~["student"] "certified professional midwife student midwife" or any other letters,~~

1 words or insignia indicating or implying that he or she is licensed or holds a
2 permit to engage in the practice of certified professional midwifery, or in any
3 other way, orally, or in writing or print, or by sign, directly or by implication,
4 represent himself or herself as licensed or holding a permit engage in the practice
5 of certified professional midwifery in this State; or

6 ~~(c)~~ (b) List or cause to have listed in any directory, including, without
7 limitation, a telephone directory, his or her name or the name of his or her
8 company under the heading “licensed certified professional midwife,” “certified
9 professional midwife,” “licensed midwife” or any other term that indicates or
10 implies that he or she is licensed or holds a permit to engage in the practice of
11 certified professional midwifery in this State.

12 2. A person who is not licensed as a licensed certified professional midwife
13 or does not hold a permit as a certified professional midwife student midwife or a
14 person whose license as a licensed certified professional midwife or permit as a
15 certified professional midwife student midwife has been suspended or revoked by
16 the Division may use or list the words or headings described in paragraph (a) or
17 (b) of subsection 1 if the person is licensed or holds a permit in the District of
18 Columbia or any state or territory of the United States. If the person uses or lists
19 the words or headings pursuant to this section, the person shall disclose the
20 district, state or territory, as applicable, in which he or she is licensed or
21 permitted.

22 3. A person who is licensed as a licensed certified professional midwife or
23 holds a permit as a certified professional midwife student midwife and who is also
24 licensed or holds a permit in the District of Columbia or any state or territory of
25 the United States shall disclose each additional district, state or territory, as
26 applicable, in which he or she is licensed or permitted in all circumstances
27 described in paragraphs (a) and (b) of subsection 1.

28 4. A certified professional midwife student midwife shall not use in
29 connection with his or her name the words “licensed certified professional
30 midwife,” “certified professional midwife,” “licensed midwife” or any other
31 letters, words or insignia indicating or implying that he or she is licensed to
32 engage in the practice of certified professional midwifery without supervision, or
33 in any other way, orally, or in writing or print, or by sign, directly or by
34 implication, represent himself or herself as licensed to engage in the practice of
35 certified professional midwifery without supervision in this State.

36 ~~(3)~~ 5. A person or entity shall not operate a program of training for
37 licensed certified professional midwives or certified professional midwife birth
38 assistants or advertise or otherwise represent that the person or entity is
39 authorized to operate such a program unless the person or entity has been
40 approved to offer such a program by the Division.

41 6. If the Division has reason to believe that a person has repeatedly violated
42 any provision of this section or the Division has received complaints that a person
43 has repeatedly violated any provision of this section, the Division may certify the
44 facts to the Attorney General, or other appropriate enforcement officer, who may,
45 in his or her discretion, cause appropriate proceedings to be brought.

46 ~~(4)~~ 7. A person who violates any provision of this section is guilty of a
47 misdemeanor.

48 Sec. 32. 1. The Division or the Attorney General may maintain in any
49 court of competent jurisdiction a suit to enjoin any person from violating a
50 provision of this chapter or any regulations adopted pursuant thereto.

51 2. Such an injunction:

52 (a) May be issued without proof of actual damage sustained by any person as
53 a preventive or punitive measure.

1 ***(b) Does not relieve any person or business entity from any other legal***
2 ***action.***

3 **Sec. 33.** NRS 622.238 is hereby amended to read as follows:

4 622.238 1. The Legislature hereby finds and declares that:

5 (a) It is in the best interests of this State to make full use of the skills and
6 talents of every resident of this State.

7 (b) It is the public policy of this State that each resident of this State, regardless
8 of his or her immigration or citizenship status, is eligible to receive the benefit of
9 applying for a license, certificate or permit pursuant to 8 U.S.C. § 1621(d).

10 2. Notwithstanding any other provision of this title, a regulatory body shall
11 not deny the application of a person for the issuance of a license pursuant to this
12 title based solely on his or her immigration or citizenship status.

13 3. Notwithstanding the provisions of NRS 623.225, 623A.185, 624.268,
14 625.387, 625A.105, 628.0345, 628B.320, 630.197, 630A.246, 631.225, 632.3446,
15 633.307, 634.095, 634A.115, 635.056, 636.159, 637.113, 637B.166, 638.103,
16 639.129, 640.095, 640A.145, 640B.340, 640C.430, 640D.120, 640E.200, 641.175,
17 641A.215, 641B.206, 641C.280, 642.0195, 643.095, 644A.485, 645.358,
18 645A.025, 645B.023, 645B.420, 645C.295, 645C.655, 645D.195, 645E.210,
19 645G.110, 645H.550, 648.085, 649.233, 652.075, 653.550, 654.145, 655.075 and
20 656.155, ***and section 23 of this act***, an applicant for a license who does not have a
21 social security number must provide an alternative personally identifying number,
22 including, without limitation, his or her individual taxpayer identification number,
23 when completing an application for a license.

24 4. A regulatory body shall not disclose to any person who is not employed by
25 the regulatory body the social security number or alternative personally identifying
26 number, including, without limitation, an individual taxpayer identification number,
27 of an applicant for a license for any purpose except:

28 (a) Tax purposes;

29 (b) Licensing purposes; and

30 (c) Enforcement of an order for the payment of child support.

31 5. A social security number or alternative personally identifying number,
32 including, without limitation, an individual taxpayer identification number,
33 provided to a regulatory body is confidential and is not a public record for the
34 purposes of chapter 239 of NRS.

35 **Sec. 34.** NRS 622.520 is hereby amended to read as follows:

36 622.520 1. A regulatory body that regulates a profession pursuant to
37 chapters 630, 630A, 632 to 641C, inclusive, ***and sections 2 to 32, inclusive, of this***
38 ***act***, 644A or 653 of NRS in this State may enter into a reciprocal agreement with
39 the corresponding regulatory authority of the District of Columbia or any other state
40 or territory of the United States for the purposes of:

41 (a) Authorizing a qualified person licensed in the profession in that state or
42 territory to practice concurrently in this State and one or more other states or
43 territories of the United States; and

44 (b) Regulating the practice of such a person.

45 2. A regulatory body may enter into a reciprocal agreement pursuant to
46 subsection 1 only if the regulatory body determines that:

47 (a) The corresponding regulatory authority is authorized by law to enter into
48 such an agreement with the regulatory body; and

49 (b) The applicable provisions of law governing the practice of the respective
50 profession in the state or territory on whose behalf the corresponding regulatory
51 authority would execute the reciprocal agreement are substantially similar to the
52 corresponding provisions of law in this State.

1 3. A reciprocal agreement entered into pursuant to subsection 1 must not
2 authorize a person to practice his or her profession concurrently in this State unless
3 the person:

4 (a) Has an active license to practice his or her profession in another state or
5 territory of the United States.

6 (b) ~~Has~~ *Except as otherwise provided in this paragraph, has* been in practice
7 for at least the 5 years immediately preceding the date on which the person submits
8 an application for the issuance of a license pursuant to a reciprocal agreement
9 entered into pursuant to subsection 1. *If the person seeks to practice as a licensed*
10 *certified professional midwife in this State pursuant to sections 2 to 32, inclusive,*
11 *of this act, the person must have been in practice for at least the 3 years*
12 *immediately preceding the date on which the person submits an application for*
13 *the issuance of a license pursuant to a reciprocal agreement entered into*
14 *pursuant to subsection 1.*

15 (c) Has not had his or her license suspended or revoked in any state or territory
16 of the United States.

17 (d) Has not been refused a license to practice in any state or territory of the
18 United States for any reason.

19 (e) Is not involved in and does not have pending any disciplinary action
20 concerning his or her license or practice in any state or territory of the United
21 States.

22 (f) Pays any applicable fees for the issuance of a license that are otherwise
23 required for a person to obtain a license in this State.

24 (g) Submits to the applicable regulatory body the statement required by NRS
25 425.520.

26 4. If the regulatory body enters into a reciprocal agreement pursuant to
27 subsection 1, the regulatory body must prepare an annual report before January 31
28 of each year outlining the progress of the regulatory body as it relates to the
29 reciprocal agreement and submit the report to the Director of the Legislative
30 Counsel Bureau for transmittal to the next session of the Legislature in odd-
31 numbered years or to the Legislative Committee on Health Care in even-numbered
32 years.

33 **Sec. 35.** NRS 629.031 is hereby amended to read as follows:

34 629.031 Except as otherwise provided by a specific statute:

35 1. "Provider of health care" means:

36 (a) A physician licensed pursuant to chapter 630, 630A or 633 of NRS;

37 (b) A physician assistant;

38 (c) A dentist;

39 (d) A licensed nurse;

40 (e) A person who holds a license as an attendant or who is certified as an
41 emergency medical technician, advanced emergency medical technician or
42 paramedic pursuant to chapter 450B of NRS;

43 (f) A dispensing optician;

44 (g) An optometrist;

45 (h) A speech-language pathologist;

46 (i) An audiologist;

47 (j) A practitioner of respiratory care;

48 (k) A licensed physical therapist;

49 (l) An occupational therapist;

50 (m) A podiatric physician;

51 (n) A licensed psychologist;

52 (o) A licensed marriage and family therapist;

53 (p) A licensed clinical professional counselor;

- 1 (q) A music therapist;
2 (r) A chiropractor;
3 (s) An athletic trainer;
4 (t) A perfusionist;
5 (u) A doctor of Oriental medicine in any form;
6 (v) A medical laboratory director or technician;
7 (w) A pharmacist;
8 (x) A licensed dietitian;
9 (y) An associate in social work, a social worker, an independent social worker
10 or a clinical social worker licensed pursuant to chapter 641B of NRS;
11 (z) An alcohol and drug counselor or a problem gambling counselor who is
12 certified pursuant to chapter 641C of NRS;

13 (aa) An alcohol and drug counselor or a clinical alcohol and drug counselor
14 who is licensed pursuant to chapter 641C of NRS; ~~for~~

15 (bb) *A licensed certified professional midwife; or*

16 (cc) A medical facility as the employer of any person specified in this
17 subsection.

18 2. For the purposes of NRS 629.400 to 629.490, inclusive, the term includes:

19 (a) A person who holds a license or certificate issued pursuant to chapter 631
20 of NRS; and

21 (b) A person who holds a current license or certificate to practice his or her
22 respective discipline pursuant to the applicable provisions of law of another state or
23 territory of the United States.

24 **Sec. 36.** NRS 630A.090 is hereby amended to read as follows:

25 630A.090 1. This chapter does not apply to:

26 (a) The practice of dentistry, chiropractic, Oriental medicine, podiatry,
27 optometry, perfusion, respiratory care, faith or Christian Science healing, nursing,
28 *certified professional midwifery*, veterinary medicine or fitting hearing aids.

29 (b) A medical officer of the Armed Forces or a medical officer of any division
30 or department of the United States in the discharge of his or her official duties,
31 including, without limitation, providing medical care in a hospital in accordance
32 with an agreement entered into pursuant to NRS 449.2455.

33 (c) Licensed or certified nurses in the discharge of their duties as nurses.

34 (d) Homeopathic physicians who are called into this State, other than on a
35 regular basis, for consultation or assistance to any physician licensed in this State,
36 and who are legally qualified to practice in the state or country where they reside.

37 2. This chapter does not repeal or affect any statute of Nevada regulating or
38 affecting any other healing art.

39 3. This chapter does not prohibit:

40 (a) Gratuitous services of a person in case of emergency.

41 (b) The domestic administration of family remedies.

42 4. This chapter does not authorize a homeopathic physician to practice
43 medicine, including allopathic medicine, except as otherwise provided in NRS
44 630A.040.

45 **Sec. 37.** NRS 632.472 is hereby amended to read as follows:

46 632.472 1. The following persons shall report in writing to the Executive
47 Director of the Board any conduct of a licensee or holder of a certificate which
48 constitutes a violation of the provisions of this chapter:

49 (a) Any physician, dentist, dental hygienist, *licensed certified professional*
50 *midwife*, chiropractor, optometrist, podiatric physician, medical examiner, resident,
51 intern, professional or practical nurse, nursing assistant, medication aide - certified,
52 perfusionist, physician assistant licensed pursuant to chapter 630 or 633 of NRS,
53 psychiatrist, psychologist, marriage and family therapist, clinical professional

1 counselor, alcohol or drug counselor, music therapist, holder of a license or limited
2 license issued pursuant to chapter 653 of NRS, driver of an ambulance, paramedic
3 or other person providing medical services licensed or certified to practice in this
4 State.

5 (b) Any personnel of a medical facility or facility for the dependent engaged in
6 the admission, examination, care or treatment of persons or an administrator,
7 manager or other person in charge of a medical facility or facility for the dependent
8 upon notification by a member of the staff of the facility.

9 (c) A coroner.

10 (d) Any person who maintains or is employed by an agency to provide
11 personal care services in the home.

12 (e) Any person who operates, who is employed by or who contracts to provide
13 services for an intermediary service organization as defined in NRS 449.4304.

14 (f) Any person who maintains or is employed by an agency to provide nursing
15 in the home.

16 (g) Any employee of the Department of Health and Human Services.

17 (h) Any employee of a law enforcement agency or a county's office for
18 protective services or an adult or juvenile probation officer.

19 (i) Any person who maintains or is employed by a facility or establishment that
20 provides care for older persons.

21 (j) Any person who maintains, is employed by or serves as a volunteer for an
22 agency or service which advises persons regarding the abuse, neglect or
23 exploitation of an older person and refers them to persons and agencies where their
24 requests and needs can be met.

25 (k) Any social worker.

26 (l) Any person who operates or is employed by a community health worker
27 pool or with whom a community health worker pool contracts to provide the
28 services of a community health worker, as defined in NRS 449.0027.

29 (m) Any person who operates or is employed by a peer support recovery
30 organization.

31 2. Every physician who, as a member of the staff of a medical facility or
32 facility for the dependent, has reason to believe that a nursing assistant or
33 medication aide - certified has engaged in conduct which constitutes grounds for
34 the denial, suspension or revocation of a certificate shall notify the superintendent,
35 manager or other person in charge of the facility. The superintendent, manager or
36 other person in charge shall make a report as required in subsection 1.

37 3. A report may be filed by any other person.

38 4. Any person who in good faith reports any violation of the provisions of this
39 chapter to the Executive Director of the Board pursuant to this section is immune
40 from civil liability for reporting the violation.

41 5. As used in this section:

42 (a) "Agency to provide personal care services in the home" has the meaning
43 ascribed to it in NRS 449.0021.

44 (b) "Community health worker pool" has the meaning ascribed to it in NRS
45 449.0028.

46 (c) "Peer support recovery organization" has the meaning ascribed to it in NRS
47 449.01563.

48 **Sec. 38.** NRS 633.171 is hereby amended to read as follows:

49 633.171 1. This chapter does not apply to:

50 (a) The practice of medicine or perfusion pursuant to chapter 630 of NRS,
51 dentistry, chiropractic, podiatry, optometry, respiratory care, faith or Christian
52 Science healing, nursing, certified professional midwifery, veterinary medicine or
53 fitting hearing aids.

1 (b) A medical officer of the Armed Forces or a medical officer of any division
2 or department of the United States in the discharge of his or her official duties,
3 including, without limitation, providing medical care in a hospital in accordance
4 with an agreement entered into pursuant to NRS 449.2455.

5 (c) Osteopathic physicians who are called into this State, other than on a
6 regular basis, for consultation or assistance to a physician licensed in this State, and
7 who are legally qualified to practice in the state where they reside.

8 (d) Osteopathic physicians who are temporarily exempt from licensure
9 pursuant to NRS 633.420 and are practicing osteopathic medicine within the scope
10 of the exemption.

11 2. This chapter does not repeal or affect any law of this State regulating or
12 affecting any other healing art.

13 3. This chapter does not prohibit:

14 (a) Gratuitous services of a person in cases of emergency.

15 (b) The domestic administration of family remedies.

16 **Sec. 39.** NRS 637B.080 is hereby amended to read as follows:

17 637B.080 The provisions of this chapter do not apply to any person who:

18 1. Holds a current credential issued by the Department of Education pursuant
19 to chapter 391 of NRS and any regulations adopted pursuant thereto and engages in
20 the practice of audiology or speech-language pathology within the scope of that
21 credential;

22 2. Is employed by the Federal Government and engages in the practice of
23 audiology or speech-language pathology within the scope of that employment;

24 3. Is a student enrolled in a program or school approved by the Board, is
25 pursuing a degree in audiology or speech-language pathology and is clearly
26 designated to the public as a student; or

27 4. Holds a current license issued pursuant to chapters 630 to 637, inclusive,
28 640 to 641C, inclusive, or 653 of NRS ~~§~~ *or sections 2 to 32, inclusive, of this act,*
29 and who does not engage in the private practice of audiology or speech-language
30 pathology in this State.

31 **Sec. 40.** NRS 639.0125 is hereby amended to read as follows:

32 639.0125 "Practitioner" means:

33 1. A physician, dentist, veterinarian or podiatric physician who holds a license
34 to practice his or her profession in this State;

35 2. A hospital, pharmacy or other institution licensed, registered or otherwise
36 permitted to distribute, dispense, conduct research with respect to or administer
37 drugs in the course of professional practice or research in this State;

38 3. An advanced practice registered nurse who has been authorized to
39 prescribe controlled substances, poisons, dangerous drugs and devices;

40 4. A physician assistant who:

41 (a) Holds a license issued by the Board of Medical Examiners; and

42 (b) Is authorized by the Board to possess, administer, prescribe or dispense
43 controlled substances, poisons, dangerous drugs or devices under the supervision of
44 a physician as required by chapter 630 of NRS;

45 5. A physician assistant who:

46 (a) Holds a license issued by the State Board of Osteopathic Medicine; and

47 (b) Is authorized by the Board to possess, administer, prescribe or dispense
48 controlled substances, poisons, dangerous drugs or devices under the supervision of
49 an osteopathic physician as required by chapter 633 of NRS; ~~§~~

50 6. An optometrist who is certified by the Nevada State Board of Optometry to
51 prescribe and administer pharmaceutical agents pursuant to NRS 636.288, when the
52 optometrist prescribes or administers pharmaceutical agents within the scope of his
53 or her certification ~~§~~; *or*

1 **7. A licensed certified professional midwife, for the purpose of ordering:**
2 **(a) Any device or drug described in subsection 1 or 2 of section 26 of this act**
3 **for use in his or her practice in accordance with the provisions of that section**
4 **and any regulations adopted pursuant to section 18 of this act; and**
5 **(b) Any device or vaccine described in subsection 4 of section 26 of this act**
6 **for a client.**

7 **Sec. 41.** NRS 639.23505 is hereby amended to read as follows:

8 639.23505 ~~(A)~~

9 **1. Except as otherwise provided in subsection 2, a** practitioner shall not
10 dispense for human consumption any controlled substance or dangerous drug if the
11 practitioner charges a patient for that substance or drug, either separately or
12 together with charges for other professional services:

13 ~~(A)~~ **(a)** Unless the practitioner first applies for and obtains a certificate from
14 the Board and pays the required fee; and

15 ~~(B)~~ **(b)** Issues a written prescription.

16 **2. A licensed certified professional midwife may administer drugs and**
17 **devices ordered pursuant to section 26 of this act in accordance with the**
18 **provisions of that section and any regulations adopted pursuant to section 18 of**
19 **this act without obtaining a certificate from the Board.**

20 **Sec. 42.** NRS 640A.070 is hereby amended to read as follows:

21 640A.070 This chapter does not apply to a person:

22 1. Holding a current license or certificate issued pursuant to chapter 391, 630
23 to 637B, inclusive, 640 or 640B to 641B, inclusive, of NRS, **or sections 2 to 32,**
24 **inclusive, of this act** who practices within the scope of that license or certificate.

25 2. Employed by the Federal Government who practices occupational therapy
26 within the scope of that employment.

27 3. Enrolled in an educational program approved by the Board which is
28 designed to lead to a certificate or degree in occupational therapy, if the person is
29 designated by a title which clearly indicates that he or she is a student.

30 4. Obtaining the supervised fieldwork experience necessary to satisfy the
31 requirements of subsection 3 of NRS 640A.120.

32 **Sec. 43.** NRS 640B.145 is hereby amended to read as follows:

33 640B.145 The provisions of this chapter do not apply to:

34 1. A person who is licensed pursuant to chapters 630 to 637, inclusive, or
35 chapter 640 or 640A of NRS, **or sections 2 to 32, inclusive, of this act** when acting
36 within the scope of that license.

37 2. A person who is employed by the Federal Government and engages in the
38 practice of athletic training within the scope of that employment.

39 3. A person who is temporarily exempt from licensure pursuant to NRS
40 640B.335 and is practicing athletic training within the scope of the exemption.

41 **Sec. 44.** NRS 640C.100 is hereby amended to read as follows:

42 640C.100 1. The provisions of this chapter do not apply to:

43 (a) A person licensed pursuant to chapter 630, 630A, 631, 632, 633, 634,
44 634A, 635, 640, 640A or 640B of NRS **or sections 2 to 32, inclusive, of this act** if
45 the massage therapy, reflexology or structural integration is performed in the course
46 of the practice for which the person is licensed.

47 (b) A person licensed as a barber or apprentice pursuant to chapter 643 of NRS
48 if the person is massaging, cleansing or stimulating the scalp, face, neck or skin
49 within the permissible scope of practice for a barber or apprentice pursuant to that
50 chapter.

51 (c) A person licensed or registered as an esthetician, esthetician's apprentice,
52 hair designer, hair designer's apprentice, hair braider, shampoo technologist,
53 cosmetologist or cosmetologist's apprentice pursuant to chapter 644A of NRS if the

1 person is massaging, cleansing or stimulating the scalp, face, neck or skin within
2 the permissible scope of practice for an esthetician, esthetician's apprentice, hair
3 designer, hair designer's apprentice, hair braider, shampoo technologist,
4 cosmetologist or cosmetologist's apprentice pursuant to that chapter.

5 (d) A person licensed or registered as a nail technologist or nail technologist's
6 apprentice pursuant to chapter 644A of NRS if the person is massaging, cleansing
7 or stimulating the hands, forearms, feet or lower legs within the permissible scope
8 of practice for a nail technologist or nail technologist's apprentice.

9 (e) A person who is an employee of an athletic department of any high school,
10 college or university in this State and who, within the scope of that employment,
11 practices massage therapy, reflexology or structural integration on athletes.

12 (f) Students enrolled in a school of massage therapy, reflexology or structural
13 integration recognized by the Board.

14 (g) A person who practices massage therapy, reflexology or structural
15 integration solely on members of his or her immediate family.

16 (h) A person who performs any activity in a licensed brothel.

17 2. Except as otherwise provided in subsection 3 and NRS 640C.330, the
18 provisions of this chapter preempt the licensure and regulation of a massage
19 therapist, reflexologist or structural integration practitioner by a county, city or
20 town, including, without limitation, conducting a criminal background investigation
21 and examination of a massage therapist, reflexologist or structural integration
22 practitioner or applicant for a license to practice massage therapy, reflexology or
23 structural integration.

24 3. The provisions of this chapter do not prohibit a county, city or town from
25 requiring a massage therapist, reflexologist or structural integration practitioner to
26 obtain a license or permit to transact business within the jurisdiction of the county,
27 city or town, if the license or permit is required of other persons, regardless of
28 occupation or profession, who transact business within the jurisdiction of the
29 county, city or town.

30 4. As used in this section, "immediate family" means persons who are related
31 by blood, adoption or marriage, within the second degree of consanguinity or
32 affinity.

33 **Sec. 45.** The preliminary chapter of NRS is hereby amended by adding
34 thereto a new section to read as follows:

35 *Except as otherwise expressly provided in a particular statute or required by*
36 *the context, "licensed certified professional midwife" means a person licensed as*
37 *a licensed certified professional midwife pursuant to section 19 or 20 of this act.*

38 **Sec. 46.** NRS 7.095 is hereby amended to read as follows:

39 7.095 1. An attorney shall not contract for or collect a fee contingent on the
40 amount of recovery for representing a person seeking damages in connection with
41 an action for injury or death against a provider of health care based upon
42 professional negligence in excess of:

- 43 (a) Forty percent of the first \$50,000 recovered;
- 44 (b) Thirty-three and one-third percent of the next \$50,000 recovered;
- 45 (c) Twenty-five percent of the next \$500,000 recovered; and
- 46 (d) Fifteen percent of the amount of recovery that exceeds \$600,000.

47 2. The limitations set forth in subsection 1 apply to all forms of recovery,
48 including, without limitation, settlement, arbitration and judgment.

49 3. For the purposes of this section, "recovered" means the net sum recovered
50 by the plaintiff after deducting any disbursements or costs incurred in connection
51 with the prosecution or settlement of the claim. Costs of medical care incurred by
52 the plaintiff and general and administrative expenses incurred by the office of the
53 attorney are not deductible disbursements or costs.

1 4. As used in this section:

2 (a) "Professional negligence" means a negligent act or omission to act by a
3 provider of health care in the rendering of professional services, which act or
4 omission is the proximate cause of a personal injury or wrongful death. The term
5 does not include services that are outside the scope of services for which the
6 provider of health care is licensed or services for which any restriction has been
7 imposed by the applicable regulatory board or health care facility.

8 (b) "Provider of health care" means a physician licensed under chapter 630 or
9 633 of NRS, dentist, registered nurse, *licensed certified professional midwife*,
10 dispensing optician, optometrist, registered physical therapist, podiatric physician,
11 licensed psychologist, chiropractor, doctor of Oriental medicine, holder of a license
12 or a limited license issued under the provisions of chapter 653 of NRS, medical
13 laboratory director or technician, licensed dietitian or a licensed hospital and its
14 employees.

15 **Sec. 47.** NRS 41.138 is hereby amended to read as follows:

16 41.138 1. In any civil action concerning any unwelcome or nonconsensual
17 sexual conduct, including, without limitation, sexual harassment, there is a
18 rebuttable presumption that the sexual conduct was unwelcome or nonconsensual if
19 the alleged perpetrator was a person in a position of authority over the alleged
20 victim.

21 2. As used in this section:

22 (a) "Person in a position of authority" means a parent, relative, household
23 member, employer, supervisor, youth leader, scout leader, coach, mentor in a
24 mentoring program, teacher, professor, counselor, school administrator, religious
25 leader, doctor, nurse, *licensed certified professional midwife, certified professional*
26 *midwife student midwife, certified professional midwife birth assistant,*
27 psychologist, other health care provider, guardian ad litem, guardian, babysitter,
28 police officer or other law enforcement officer or any other person who, by reason
29 of his or her position, is able to exercise significant or undue influence over the
30 victim.

31 (b) "Sexual harassment" has the meaning ascribed to it in NRS 176A.280.

32 **Sec. 48.** NRS 41.505 is hereby amended to read as follows:

33 41.505 1. Any person licensed under the provisions of chapter 630, 632 or
34 633 of NRS *or sections 2 to 32, inclusive, of this act* and any person who holds an
35 equivalent license issued by another state, who renders emergency care or
36 assistance, including, without limitation, emergency obstetrical care or assistance,
37 in an emergency, gratuitously and in good faith, is not liable for any civil damages
38 as a result of any act or omission, not amounting to gross negligence, by that person
39 in rendering the emergency care or assistance or as a result of any failure to act, not
40 amounting to gross negligence, to provide or arrange for further medical treatment
41 for the injured or ill person. This section does not excuse a physician, physician
42 assistant, ~~for~~ nurse *or licensed certified professional midwife* from liability for
43 damages resulting from that person's acts or omissions which occur in a licensed
44 medical facility relative to any person with whom there is a preexisting relationship
45 as a patient.

46 2. Any person licensed under the provisions of chapter 630, 632 or 633 of
47 NRS *or sections 2 to 32, inclusive, of this act* and any person who holds an
48 equivalent license issued by another state who:

49 (a) Is retired or otherwise does not practice on a full-time basis; and

50 (b) Gratuitously and in good faith, renders medical care within the scope of
51 that person's license to an indigent person,

1 ↳ is not liable for any civil damages as a result of any act or omission by that
2 person, not amounting to gross negligence or reckless, willful or wanton conduct, in
3 rendering that care.

4 3. Any person licensed to practice medicine under the provisions of chapter
5 630 or 633 of NRS or licensed to practice dentistry under the provisions of chapter
6 631 of NRS who renders care or assistance to a patient for a governmental entity or
7 a nonprofit organization is not liable for any civil damages as a result of any act or
8 omission by that person in rendering that care or assistance if the care or assistance
9 is rendered gratuitously, in good faith and in a manner not amounting to gross
10 negligence or reckless, willful or wanton conduct.

11 4. As used in this section, “gratuitously” has the meaning ascribed to it in
12 NRS 41.500.

13 **Sec. 49.** NRS 41.506 is hereby amended to read as follows:

14 41.506 1. Any person licensed under the provisions of chapter 630, 632 or
15 633 of NRS *or sections 2 to 32, inclusive, of this act* and any person who holds an
16 equivalent license issued by another state who renders emergency obstetrical care
17 or assistance to a pregnant woman during labor or the delivery of the child is not
18 liable for any civil damages as a result of any act or omission by that person in
19 rendering that care or assistance if:

20 (a) The care or assistance is rendered in good faith and in a manner not
21 amounting to gross negligence or reckless, willful or wanton conduct;

22 (b) The person has not previously provided prenatal or obstetrical care to the
23 woman; and

24 (c) The damages are reasonably related to or primarily caused by a lack of
25 prenatal care received by the woman.

26 2. A licensed medical facility in which such care or assistance is rendered is
27 not liable for any civil damages as a result of any act or omission by the person in
28 rendering that care or assistance if that person is not liable for any civil damages
29 pursuant to subsection 1 and the actions of the medical facility relating to the
30 rendering of that care or assistance do not amount to gross negligence or reckless,
31 willful or wanton conduct.

32 **Sec. 50.** NRS 41A.017 is hereby amended to read as follows:

33 41A.017 “Provider of health care” means a physician licensed pursuant to
34 chapter 630 or 633 of NRS, physician assistant, dentist, licensed nurse, *licensed*
35 *certified professional midwife*, dispensing optician, optometrist, registered physical
36 therapist, podiatric physician, licensed psychologist, chiropractor, doctor of
37 Oriental medicine, holder of a license or a limited license issued under the
38 provisions of chapter 653 of NRS, medical laboratory director or technician,
39 licensed dietitian or a licensed hospital, clinic, surgery center, physicians’
40 professional corporation or group practice that employs any such person and its
41 employees.

42 **Sec. 51.** NRS 42.021 is hereby amended to read as follows:

43 42.021 1. In an action for injury or death against a provider of health care
44 based upon professional negligence, if the defendant so elects, the defendant may
45 introduce evidence of any amount payable as a benefit to the plaintiff as a result of
46 the injury or death pursuant to the United States Social Security Act, any state or
47 federal income disability or worker’s compensation act, any health, sickness or
48 income-disability insurance, accident insurance that provides health benefits or
49 income-disability coverage, and any contract or agreement of any group,
50 organization, partnership or corporation to provide, pay for or reimburse the cost of
51 medical, hospital, dental or other health care services. If the defendant elects to
52 introduce such evidence, the plaintiff may introduce evidence of any amount that

1 the plaintiff has paid or contributed to secure the plaintiff's right to any insurance
2 benefits concerning which the defendant has introduced evidence.

3 2. A source of collateral benefits introduced pursuant to subsection 1 may not:

4 (a) Recover any amount against the plaintiff; or

5 (b) Be subrogated to the rights of the plaintiff against a defendant.

6 3. In an action for injury or death against a provider of health care based upon
7 professional negligence, a district court shall, at the request of either party, enter a
8 judgment ordering that money damages or its equivalent for future damages of the
9 judgment creditor be paid in whole or in part by periodic payments rather than by a
10 lump-sum payment if the award equals or exceeds \$50,000 in future damages.

11 4. In entering a judgment ordering the payment of future damages by periodic
12 payments pursuant to subsection 3, the court shall make a specific finding as to the
13 dollar amount of periodic payments that will compensate the judgment creditor for
14 such future damages. As a condition to authorizing periodic payments of future
15 damages, the court shall require a judgment debtor who is not adequately insured to
16 post security adequate to assure full payment of such damages awarded by the
17 judgment. Upon termination of periodic payments of future damages, the court
18 shall order the return of this security, or so much as remains, to the judgment
19 debtor.

20 5. A judgment ordering the payment of future damages by periodic payments
21 entered pursuant to subsection 3 must specify the recipient or recipients of the
22 payments, the dollar amount of the payments, the interval between payments, and
23 the number of payments or the period of time over which payments will be made.
24 Such payments must only be subject to modification in the event of the death of the
25 judgment creditor. Money damages awarded for loss of future earnings must not be
26 reduced or payments terminated by reason of the death of the judgment creditor, but
27 must be paid to persons to whom the judgment creditor owed a duty of support, as
28 provided by law, immediately before the judgment creditor's death. In such cases,
29 the court that rendered the original judgment may, upon petition of any party in
30 interest, modify the judgment to award and apportion the unpaid future damages in
31 accordance with this subsection.

32 6. If the court finds that the judgment debtor has exhibited a continuing
33 pattern of failing to make the periodic payments as specified pursuant to subsection
34 5, the court shall find the judgment debtor in contempt of court and, in addition to
35 the required periodic payments, shall order the judgment debtor to pay the
36 judgment creditor all damages caused by the failure to make such periodic
37 payments, including, but not limited to, court costs and attorney's fees.

38 7. Following the occurrence or expiration of all obligations specified in the
39 periodic payment judgment, any obligation of the judgment debtor to make further
40 payments ceases and any security given pursuant to subsection 4 reverts to the
41 judgment debtor.

42 8. As used in this section:

43 (a) "Future damages" includes damages for future medical treatment, care or
44 custody, loss of future earnings, loss of bodily function, or future pain and suffering
45 of the judgment creditor.

46 (b) "Periodic payments" means the payment of money or delivery of other
47 property to the judgment creditor at regular intervals.

48 (c) "Professional negligence" means a negligent act or omission to act by a
49 provider of health care in the rendering of professional services, which act or
50 omission is the proximate cause of a personal injury or wrongful death. The term
51 does not include services that are outside the scope of services for which the
52 provider of health care is licensed or services for which any restriction has been
53 imposed by the applicable regulatory board or health care facility.

1 (d) "Provider of health care" means a physician licensed under chapter 630 or
2 633 of NRS, dentist, licensed nurse, *licensed certified professional midwife*,
3 dispensing optician, optometrist, registered physical therapist, podiatric physician,
4 licensed psychologist, chiropractor, doctor of Oriental medicine, holder of a license
5 or a limited license issued under the provisions of chapter 653 of NRS, medical
6 laboratory director or technician, licensed dietitian or a licensed hospital and its
7 employees.

8 **Sec. 52.** NRS 52.320 is hereby amended to read as follows:

9 52.320 As used in NRS 52.320 to 52.375, inclusive, unless the context
10 otherwise requires:

11 1. "Custodian of medical records" means a chiropractor, physician, registered
12 physical therapist, ~~for~~ licensed nurse *or licensed certified professional midwife*
13 who prepares and maintains medical records, or any employee or agent of such a
14 person or a facility for convalescent care, medical laboratory or hospital who has
15 care, custody and control of medical records for such a person or institution.

16 2. "Medical records" includes bills, ledgers, statements and other accounts
17 which show the cost of medical services or care provided to a patient.

18 **Sec. 53.** NRS 200.5093 is hereby amended to read as follows:

19 200.5093 1. Any person who is described in subsection 4 and who, in a
20 professional or occupational capacity, knows or has reasonable cause to believe that
21 an older person or vulnerable person has been abused, neglected, exploited, isolated
22 or abandoned shall:

23 (a) Except as otherwise provided in subsection 2, report the abuse, neglect,
24 exploitation, isolation or abandonment of the older person or vulnerable person to:

25 (1) The local office of the Aging and Disability Services Division of the
26 Department of Health and Human Services;

27 (2) A police department or sheriff's office; or

28 (3) A toll-free telephone service designated by the Aging and Disability
29 Services Division of the Department of Health and Human Services; and

30 (b) Make such a report as soon as reasonably practicable but not later than 24
31 hours after the person knows or has reasonable cause to believe that the older
32 person or vulnerable person has been abused, neglected, exploited, isolated or
33 abandoned.

34 2. If a person who is required to make a report pursuant to subsection 1 knows
35 or has reasonable cause to believe that the abuse, neglect, exploitation, isolation or
36 abandonment of the older person or vulnerable person involves an act or omission
37 of the Aging and Disability Services Division, another division of the Department
38 of Health and Human Services or a law enforcement agency, the person shall make
39 the report to an agency other than the one alleged to have committed the act or
40 omission.

41 3. Each agency, after reducing a report to writing, shall forward a copy of the
42 report to the Aging and Disability Services Division of the Department of Health
43 and Human Services and the Unit for the Investigation and Prosecution of Crimes.

44 4. A report must be made pursuant to subsection 1 by the following persons:

45 (a) Every physician, dentist, dental hygienist, chiropractor, optometrist,
46 podiatric physician, medical examiner, resident, intern, professional or practical
47 nurse, physician assistant licensed pursuant to chapter 630 or 633 of NRS, *licensed*
48 *certified professional midwife*, perfusionist, psychiatrist, psychologist, marriage
49 and family therapist, clinical professional counselor, clinical alcohol and drug
50 counselor, alcohol and drug counselor, music therapist, athletic trainer, driver of an
51 ambulance, paramedic, licensed dietitian, holder of a license or a limited license
52 issued under the provisions of chapter 653 of NRS or other person providing
53 medical services licensed or certified to practice in this State, who examines,

1 attends or treats an older person or vulnerable person who appears to have been
2 abused, neglected, exploited, isolated or abandoned.

3 (b) Any personnel of a hospital or similar institution engaged in the admission,
4 examination, care or treatment of persons or an administrator, manager or other
5 person in charge of a hospital or similar institution upon notification of the
6 suspected abuse, neglect, exploitation, isolation or abandonment of an older person
7 or vulnerable person by a member of the staff of the hospital.

8 (c) A coroner.

9 (d) Every person who maintains or is employed by an agency to provide
10 personal care services in the home.

11 (e) Every person who maintains or is employed by an agency to provide
12 nursing in the home.

13 (f) Every person who operates, who is employed by or who contracts to
14 provide services for an intermediary service organization as defined in NRS
15 449.4304.

16 (g) Any employee of the Department of Health and Human Services, except
17 the State Long-Term Care Ombudsman appointed pursuant to NRS 427A.125 and
18 any of his or her advocates or volunteers where prohibited from making such a
19 report pursuant to 45 C.F.R. § 1321.11.

20 (h) Any employee of a law enforcement agency or a county's office for
21 protective services or an adult or juvenile probation officer.

22 (i) Any person who maintains or is employed by a facility or establishment that
23 provides care for older persons or vulnerable persons.

24 (j) Any person who maintains, is employed by or serves as a volunteer for an
25 agency or service which advises persons regarding the abuse, neglect, exploitation,
26 isolation or abandonment of an older person or vulnerable person and refers them to
27 persons and agencies where their requests and needs can be met.

28 (k) Every social worker.

29 (l) Any person who owns or is employed by a funeral home or mortuary.

30 (m) Every person who operates or is employed by a peer support recovery
31 organization, as defined in NRS 449.01563.

32 (n) Every person who operates or is employed by a community health worker
33 pool, as defined in NRS 449.0028, or with whom a community health worker pool
34 contracts to provide the services of a community health worker, as defined in NRS
35 449.0027.

36 5. A report may be made by any other person.

37 6. If a person who is required to make a report pursuant to subsection 1 knows
38 or has reasonable cause to believe that an older person or vulnerable person has
39 died as a result of abuse, neglect, isolation or abandonment, the person shall, as
40 soon as reasonably practicable, report this belief to the appropriate medical
41 examiner or coroner, who shall investigate the cause of death of the older person or
42 vulnerable person and submit to the appropriate local law enforcement agencies, the
43 appropriate prosecuting attorney, the Aging and Disability Services Division of the
44 Department of Health and Human Services and the Unit for the Investigation and
45 Prosecution of Crimes his or her written findings. The written findings must include
46 the information required pursuant to the provisions of NRS 200.5094, when
47 possible.

48 7. A division, office or department which receives a report pursuant to this
49 section shall cause the investigation of the report to commence within 3 working
50 days. A copy of the final report of the investigation conducted by a division, office
51 or department, other than the Aging and Disability Services Division of the
52 Department of Health and Human Services, must be forwarded within 30 days after
53 the completion of the report to the:

1 (a) Aging and Disability Services Division;

2 (b) Repository for Information Concerning Crimes Against Older Persons or
3 Vulnerable Persons created by NRS 179A.450; and

4 (c) Unit for the Investigation and Prosecution of Crimes.

5 8. If the investigation of a report results in the belief that an older person or
6 vulnerable person is abused, neglected, exploited, isolated or abandoned, the Aging
7 and Disability Services Division of the Department of Health and Human Services
8 or the county's office for protective services may provide protective services to the
9 older person or vulnerable person if the older person or vulnerable person is able
10 and willing to accept them.

11 9. A person who knowingly and willfully violates any of the provisions of
12 this section is guilty of a misdemeanor.

13 10. As used in this section, "Unit for the Investigation and Prosecution of
14 Crimes" means the Unit for the Investigation and Prosecution of Crimes Against
15 Older Persons or Vulnerable Persons in the Office of the Attorney General created
16 pursuant to NRS 228.265.

17 **Sec. 54.** NRS 200.5095 is hereby amended to read as follows:

18 200.5095 1. Reports made pursuant to NRS 200.5093 and 200.5094, and
19 records and investigations relating to those reports, are confidential.

20 2. A person, law enforcement agency or public or private agency, institution
21 or facility who willfully releases data or information concerning the reports and
22 investigation of the abuse, neglect, exploitation, isolation or abandonment of older
23 persons or vulnerable persons, except:

24 (a) Pursuant to a criminal prosecution;

25 (b) Pursuant to NRS 200.50982; or

26 (c) To persons or agencies enumerated in subsection 3,
27 is guilty of a misdemeanor.

28 3. Except as otherwise provided in subsection 2 and NRS 200.50982, data or
29 information concerning the reports and investigations of the abuse, neglect,
30 exploitation, isolation or abandonment of an older person or a vulnerable person is
31 available only to:

32 (a) A physician who is providing care to an older person or a vulnerable person
33 who may have been abused, neglected, exploited, isolated or abandoned;

34 (b) An agency responsible for or authorized to undertake the care, treatment
35 and supervision of the older person or vulnerable person;

36 (c) A district attorney or other law enforcement official who requires the
37 information in connection with an investigation of the abuse, neglect, exploitation,
38 isolation or abandonment of the older person or vulnerable person;

39 (d) A court which has determined, in camera, that public disclosure of such
40 information is necessary for the determination of an issue before it;

41 (e) A person engaged in bona fide research, but the identity of the subjects of
42 the report must remain confidential;

43 (f) A grand jury upon its determination that access to such records is necessary
44 in the conduct of its official business;

45 (g) Any comparable authorized person or agency in another jurisdiction;

46 (h) A legal guardian of the older person or vulnerable person, if the identity of
47 the person who was responsible for reporting the alleged abuse, neglect,
48 exploitation, isolation or abandonment of the older person or vulnerable person to
49 the public agency is protected, and the legal guardian of the older person or
50 vulnerable person is not the person suspected of such abuse, neglect, exploitation,
51 isolation or abandonment;

52 (i) If the older person or vulnerable person is deceased, the executor or
53 administrator of his or her estate, if the identity of the person who was responsible

1 for reporting the alleged abuse, neglect, exploitation, isolation or abandonment of
2 the older person or vulnerable person to the public agency is protected, and the
3 executor or administrator is not the person suspected of such abuse, neglect,
4 exploitation, isolation or abandonment;

5 (j) The older person or vulnerable person named in the report as allegedly
6 being abused, neglected, exploited, isolated or abandoned, if that person is not
7 legally incapacitated;

8 (k) An attorney appointed by a court to represent a protected person in a
9 guardianship proceeding pursuant to NRS 159.0485, if:

10 (1) The protected person is an older person or vulnerable person;

11 (2) The identity of the person who was responsible for reporting the
12 alleged abuse, neglect, exploitation, isolation or abandonment of the older person or
13 vulnerable person to the public agency is protected; and

14 (3) The attorney of the protected person is not the person suspected of such
15 abuse, neglect, exploitation, isolation or abandonment; or

16 (l) The State Guardianship Compliance Office created by NRS 159.341.

17 4. If the person who is reported to have abused, neglected, exploited, isolated
18 or abandoned an older person or a vulnerable person is the holder of a license, ~~for~~
19 certificate *or permit* issued pursuant to chapters 449, 630 to 641B, inclusive, 653 or
20 654 of NRS ~~§~~ *or sections 2 to 32, inclusive, of this act*, the information contained
21 in the report must be submitted to the board that issued the license.

22 5. If data or information concerning the reports and investigations of the
23 abuse, neglect, exploitation, isolation or abandonment of an older person or a
24 vulnerable person is made available pursuant to paragraph (b) or (j) of subsection 3
25 or subsection 4, the name and any other identifying information of the person who
26 made the report must be redacted before the data or information is made available.

27 **Sec. 55.** NRS 218G.400 is hereby amended to read as follows:

28 218G.400 1. Except as otherwise provided in subsection 2, each board
29 created by the provisions of NRS 590.485 and chapters 623 to 625A, inclusive,
30 628, 630 to 644A, inclusive, *and sections 2 to 32, inclusive, of this act*, 648, 654
31 and 656 of NRS shall:

32 (a) If the revenue of the board from all sources is less than \$200,000 for any
33 fiscal year and, if the board is a regulatory body pursuant to NRS 622.060, the
34 board has submitted to the Director of the Legislative Counsel Bureau for each
35 quarter of that fiscal year the information required by NRS 622.100, prepare a
36 balance sheet for that fiscal year on the form provided by the Legislative Auditor
37 and file the balance sheet with the Legislative Auditor and the Chief of the Budget
38 Division of the Office of Finance on or before December 1 following the end of
39 that fiscal year. The Legislative Auditor shall prepare and make available a form
40 that must be used by a board to prepare such a balance sheet.

41 (b) If the revenue of the board from all sources is \$200,000 or more for any
42 fiscal year, or if the board is a regulatory body pursuant to NRS 622.060 and has
43 failed to submit to the Director of the Legislative Counsel Bureau for each quarter
44 of that fiscal year the information required by NRS 622.100, engage the services of
45 a certified public accountant or public accountant, or firm of either of such
46 accountants, to audit all its fiscal records for that fiscal year and file a report of the
47 audit with the Legislative Auditor and the Chief of the Budget Division of the
48 Office of Finance on or before December 1 following the end of that fiscal year.

49 2. In lieu of preparing a balance sheet or having an audit conducted for a
50 single fiscal year, a board may engage the services of a certified public accountant
51 or public accountant, or firm of either of such accountants, to audit all its fiscal
52 records for a period covering two successive fiscal years. If such an audit is
53 conducted, the board shall file the report of the audit with the Legislative Auditor

1 and the Chief of the Budget Division of the Office of Finance on or before
2 December 1 following the end of the second fiscal year.

3 3. The cost of each audit conducted pursuant to subsection 1 or 2 must be paid
4 by the board that is audited. Each such audit must be conducted in accordance with
5 generally accepted auditing standards, and all financial statements must be prepared
6 in accordance with generally accepted principles of accounting for special revenue
7 funds.

8 4. Whether or not a board is required to have its fiscal records audited
9 pursuant to subsection 1 or 2, the Legislative Auditor shall audit the fiscal records
10 of any such board whenever directed to do so by the Legislative Commission.
11 When the Legislative Commission directs such an audit, the Legislative
12 Commission shall also determine who is to pay the cost of the audit.

13 5. A person who is a state officer or employee of a board is guilty of
14 nonfeasance if the person:

15 (a) Is responsible for preparing a balance sheet or having an audit conducted
16 pursuant to this section or is responsible for preparing or maintaining the fiscal
17 records that are necessary to prepare a balance sheet or have an audit conducted
18 pursuant to this section; and

19 (b) Knowingly fails to prepare the balance sheet or have the audit conducted
20 pursuant to this section or knowingly fails to prepare or maintain the fiscal records
21 that are necessary to prepare a balance sheet or have an audit conducted pursuant to
22 this section.

23 6. In addition to any other remedy or penalty, a person who is guilty of
24 nonfeasance pursuant to this section forfeits the person's state office or
25 employment and may not be appointed to a state office or position of state
26 employment for a period of 2 years following the forfeiture. The provisions of this
27 subsection do not apply to a state officer who may be removed from office only by
28 impeachment pursuant to Article 7 of the Nevada Constitution.

29 **Sec. 56.** NRS 232.320 is hereby amended to read as follows:

30 232.320 1. The Director:

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

33 (1) The Administrator of the Aging and Disability Services Division;

34 (2) The Administrator of the Division of Welfare and Supportive Services;

35 (3) The Administrator of the Division of Child and Family Services;

36 (4) The Administrator of the Division of Health Care Financing and
37 Policy; and

38 (5) The Administrator of the Division of Public and Behavioral Health.

39 (b) Shall administer, through the divisions of the Department, the provisions of
40 chapters 63, 424, 425, 427A, 432A to 442, inclusive, 446 to 450, inclusive, 458A
41 and 656A of NRS, NRS 127.220 to 127.310, inclusive, 422.001 to 422.410,
42 inclusive, *and section 65 of this act*, 422.580, 432.010 to 432.133, inclusive,
43 432B.6201 to 432B.626, inclusive, 444.002 to 444.430, inclusive, and 445A.010 to
44 445A.055, inclusive, and all other provisions of law relating to the functions of the
45 divisions of the Department, but is not responsible for the clinical activities of the
46 Division of Public and Behavioral Health or the professional line activities of the
47 other divisions.

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

51 (d) Shall, after considering advice from agencies of local governments and
52 nonprofit organizations which provide social services, adopt a master plan for the
53 provision of human services in this State. The Director shall revise the plan

1 biennially and deliver a copy of the plan to the Governor and the Legislature at the
2 beginning of each regular session. The plan must:

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

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

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

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

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

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

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

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

25 2. Notwithstanding any other provision of law, the Director, or the Director's
26 designee, is responsible for appointing and removing subordinate officers and
27 employees of the Department.

28 **Sec. 57.** NRS 239.010 is hereby amended to read as follows:

29 239.010 1. Except as otherwise provided in this section and NRS 1.4683,
30 1.4687, 1A.110, 3.2203, 41.071, 49.095, 49.293, 62D.420, 62D.440, 62E.516,
31 62E.620, 62H.025, 62H.030, 62H.170, 62H.220, 62H.320, 75A.100, 75A.150,
32 76.160, 78.152, 80.113, 81.850, 82.183, 86.246, 86.54615, 87.515, 87.5413,
33 87A.200, 87A.580, 87A.640, 88.3355, 88.5927, 88.6067, 88A.345, 88A.7345,
34 89.045, 89.251, 90.730, 91.160, 116.757, 116A.270, 116B.880, 118B.026, 119.260,
35 119.265, 119.267, 119.280, 119A.280, 119A.653, 119A.677, 119B.370, 119B.382,
36 120A.690, 125.130, 125B.140, 126.141, 126.161, 126.163, 126.730, 127.007,
37 127.057, 127.130, 127.140, 127.2817, 128.090, 130.312, 130.712, 136.050,
38 159.044, 159A.044, 172.075, 172.245, 176.01249, 176.015, 176.0625, 176.09129,
39 176.156, 176A.630, 178.39801, 178.4715, 178.5691, 179.495, 179A.070,
40 179A.165, 179D.160, 200.3771, 200.3772, 200.5095, 200.604, 202.3662,
41 205.4651, 209.392, 209.3923, 209.3925, 209.419, 209.429, 209.521, 211A.140,
42 213.010, 213.040, 213.095, 213.131, 217.105, 217.110, 217.464, 217.475,
43 218A.350, 218E.625, 218F.150, 218G.130, 218G.240, 218G.350, 226.300,
44 228.270, 228.450, 228.495, 228.570, 231.069, 231.1473, 233.190, 237.300,
45 239.0105, 239.0113, 239.014, 239B.030, 239B.040, 239B.050, 239C.140,
46 239C.210, 239C.230, 239C.250, 239C.270, 239C.420, 240.007, 241.020, 241.030,
47 241.039, 242.105, 244.264, 244.335, 247.540, 247.550, 247.560, 250.087, 250.130,
48 250.140, 250.150, 268.095, 268.0978, 268.490, 268.910, 269.174, 271A.105,
49 281.195, 281.805, 281A.350, 281A.680, 281A.685, 281A.750, 281A.755,
50 281A.780, 284.4068, 286.110, 286.118, 287.0438, 289.025, 289.080, 289.387,
51 289.830, 293.4855, 293.5002, 293.503, 293.504, 293.558, 293.5757, 293.870,
52 293.906, 293.908, 293.910, 293B.135, 293D.510, 331.110, 332.061, 332.351,
53 333.333, 333.335, 338.070, 338.1379, 338.1593, 338.1725, 338.1727, 348.420,

1 349.597, 349.775, 353.205, 353A.049, 353A.085, 353A.100, 353C.240, 360.240,
2 360.247, 360.255, 360.755, 361.044, 361.2242, 361.610, 365.138, 366.160,
3 368A.180, 370.257, 370.327, 372A.080, 378.290, 378.300, 379.0075, 379.008,
4 379.1495, 385A.830, 385B.100, 387.626, 387.631, 388.1455, 388.259, 388.501,
5 388.503, 388.513, 388.750, 388A.247, 388A.249, 391.033, 391.035, 391.0365,
6 391.120, 391.925, 392.029, 392.147, 392.264, 392.271, 392.315, 392.317, 392.325,
7 392.327, 392.335, 392.850, 393.045, 394.167, 394.16975, 394.1698, 394.447,
8 394.460, 394.465, 396.3295, 396.405, 396.525, 396.535, 396.9685, 398A.115,
9 408.3885, 408.3886, 408.3888, 408.5484, 412.153, 414.280, 416.070, 422.2749,
10 422.305, 422A.342, 422A.350, 425.400, 427A.1236, 427A.872, 432.028, 432.205,
11 432B.175, 432B.280, 432B.290, 432B.407, 432B.430, 432B.560, 432B.5902,
12 432C.140, 432C.150, 433.534, 433A.360, 437.145, 437.207, 439.4941, 439.840,
13 439.914, 439B.420, 439B.754, 439B.760, 440.170, 441A.195, 441A.220,
14 441A.230, 442.330, 442.395, 442.735, 442.774, 445A.665, 445B.570, 445B.7773,
15 447.345, 449.209, 449.245, 449.4315, 449A.112, 450.140, 450B.188, 453.164,
16 453.720, 453A.610, 453A.700, 458.055, 458.280, 459.050, 459.3866, 459.555,
17 459.7056, 459.846, 463.120, 463.15993, 463.240, 463.3403, 463.3407, 463.790,
18 467.1005, 480.535, 480.545, 480.935, 480.940, 481.063, 481.091, 481.093,
19 482.170, 482.5536, 483.340, 483.363, 483.575, 483.659, 483.800, 484A.469,
20 484E.070, 485.316, 501.344, 503.452, 522.040, 534A.031, 561.285, 571.160,
21 584.655, 587.877, 598.0964, 598.098, 598A.110, 599B.090, 603A.070, 603A.220,
22 604A.303, 604A.710, 612.265, 616B.012, 616B.015, 616B.315, 616B.350,
23 618.341, 618.425, 622.238, 622.310, 623.131, 623A.137, 624.110, 624.265,
24 624.327, 625.425, 625A.185, 628.418, 628B.230, 628B.760, 629.047, 629.069,
25 630.133, 630.2673, 630.30665, 630.336, 630A.555, 631.363, 632.121, 632.125,
26 632.3415, 632.405, 633.283, 633.301, 633.4715, 633.524, 634.055, 634.214,
27 634A.185, 635.158, 636.107, 637.085, 637B.288, 638.087, 638.089, 639.2485,
28 639.570, 640.075, 640A.220, 640B.730, 640C.580, 640C.600, 640C.620,
29 640C.745, 640C.760, 640D.190, 640E.340, 641.090, 641.221, 641.325, 641A.191,
30 641A.262, 641A.289, 641B.170, 641B.282, 641B.460, 641C.760, 641C.800,
31 642.524, 643.189, 644A.870, 645.180, 645.625, 645A.050, 645A.082, 645B.060,
32 645B.092, 645C.220, 645C.225, 645D.130, 645D.135, 645G.510, 645H.320,
33 645H.330, 647.0945, 647.0947, 648.033, 648.197, 649.065, 649.067, 652.228,
34 653.900, 654.110, 656.105, 657A.510, 661.115, 665.130, 665.133, 669.275,
35 669.285, 669A.310, 671.170, 673.450, 673.480, 675.380, 676A.340, 676A.370,
36 677.243, 678A.470, 678C.710, 678C.800, 679B.122, 679B.124, 679B.152,
37 679B.159, 679B.190, 679B.285, 679B.690, 680A.270, 681A.440, 681B.260,
38 681B.410, 681B.540, 683A.0873, 685A.077, 686A.289, 686B.170, 686C.306,
39 687A.110, 687A.115, 687C.010, 688C.230, 688C.480, 688C.490, 689A.696,
40 692A.117, 692C.190, 692C.3507, 692C.3536, 692C.3538, 692C.354, 692C.420,
41 693A.480, 693A.615, 696B.550, 696C.120, 703.196, 704B.325, 706.1725,
42 706A.230, 710.159, 711.600, **and section 30 of this act**, sections 35, 38 and 41 of
43 chapter 478, Statutes of Nevada 2011 and section 2 of chapter 391, Statutes of
44 Nevada 2013 and unless otherwise declared by law to be confidential, all public
45 books and public records of a governmental entity must be open at all times during
46 office hours to inspection by any person, and may be fully copied or an abstract or
47 memorandum may be prepared from those public books and public records. Any
48 such copies, abstracts or memoranda may be used to supply the general public with
49 copies, abstracts or memoranda of the records or may be used in any other way to
50 the advantage of the governmental entity or of the general public. This section does
51 not supersede or in any manner affect the federal laws governing copyrights or
52 enlarge, diminish or affect in any other manner the rights of a person in any written
53 book or record which is copyrighted pursuant to federal law.

1 2. A governmental entity may not reject a book or record which is
2 copyrighted solely because it is copyrighted.

3 3. A governmental entity that has legal custody or control of a public book or
4 record shall not deny a request made pursuant to subsection 1 to inspect or copy or
5 receive a copy of a public book or record on the basis that the requested public
6 book or record contains information that is confidential if the governmental entity
7 can redact, delete, conceal or separate, including, without limitation, electronically,
8 the confidential information from the information included in the public book or
9 record that is not otherwise confidential.

10 4. If requested, a governmental entity shall provide a copy of a public record
11 in an electronic format by means of an electronic medium. Nothing in this
12 subsection requires a governmental entity to provide a copy of a public record in an
13 electronic format or by means of an electronic medium if:

14 (a) The public record:

15 (1) Was not created or prepared in an electronic format; and

16 (2) Is not available in an electronic format; or

17 (b) Providing the public record in an electronic format or by means of an
18 electronic medium would:

19 (1) Give access to proprietary software; or

20 (2) Require the production of information that is confidential and that
21 cannot be redacted, deleted, concealed or separated from information that is not
22 otherwise confidential.

23 5. An officer, employee or agent of a governmental entity who has legal
24 custody or control of a public record:

25 (a) Shall not refuse to provide a copy of that public record in the medium that
26 is requested because the officer, employee or agent has already prepared or would
27 prefer to provide the copy in a different medium.

28 (b) Except as otherwise provided in NRS 239.030, shall, upon request, prepare
29 the copy of the public record and shall not require the person who has requested the
30 copy to prepare the copy himself or herself.

31 **Sec. 58.** NRS 284.013 is hereby amended to read as follows:

32 284.013 1. Except as otherwise provided in subsection 4, this chapter does
33 not apply to:

34 (a) Agencies, bureaus, commissions, officers or personnel in the Legislative
35 Department or the Judicial Department of State Government, including the
36 Commission on Judicial Discipline;

37 (b) Any person who is employed by a board, commission, committee or
38 council created in chapters 445C, 590, 623 to 625A, inclusive, 628, 630 to 644A,
39 inclusive, *and sections 2 to 32, inclusive, of this act*, 648, 652, 654 and 656 of
40 NRS; or

41 (c) Officers or employees of any agency of the Executive Department of the
42 State Government who are exempted by specific statute.

43 2. Except as otherwise provided in subsection 3, the terms and conditions of
44 employment of all persons referred to in subsection 1, including salaries not
45 prescribed by law and leaves of absence, including, without limitation, annual leave
46 and sick and disability leave, must be fixed by the appointing or employing
47 authority within the limits of legislative appropriations or authorizations.

48 3. Except as otherwise provided in this subsection, leaves of absence
49 prescribed pursuant to subsection 2 must not be of lesser duration than those
50 provided for other state officers and employees pursuant to the provisions of this
51 chapter. The provisions of this subsection do not govern the Legislative
52 Commission with respect to the personnel of the Legislative Counsel Bureau.

1 4. Any board, commission, committee or council created in chapters 445C,
2 590, 623 to 625A, inclusive, 628, 630 to 644A, inclusive, 648, 652, 654 and 656 of
3 NRS which contracts for the services of a person, shall require the contract for
4 those services to be in writing. The contract must be approved by the State Board of
5 Examiners before those services may be provided.

6 5. To the extent that they are inconsistent or otherwise in conflict, the
7 provisions of this chapter do not apply to any terms and conditions of employment
8 that are properly within the scope of and subject to the provisions of a collective
9 bargaining agreement or a supplemental bargaining agreement that is enforceable
10 pursuant to the provisions of NRS 288.400 to 288.630, inclusive.

11 **Sec. 59.** NRS 353.005 is hereby amended to read as follows:

12 353.005 Except as otherwise provided in NRS 353.007, the provisions of this
13 chapter do not apply to boards created by the provisions of NRS 590.485 and
14 chapters 623 to 625A, inclusive, 628, 630 to 644A, inclusive, *and sections 2 to 32,*
15 *inclusive, of this act,* 648, 654 and 656 of NRS and the officers and employees of
16 those boards.

17 **Sec. 60.** NRS 353A.020 is hereby amended to read as follows:

18 353A.020 1. The Director, in consultation with the Committee and
19 Legislative Auditor, shall adopt a uniform system of internal accounting and
20 administrative control for agencies. The elements of the system must include,
21 without limitation:

22 (a) A plan of organization which provides for a segregation of duties
23 appropriate to safeguard the assets of the agency;

24 (b) A plan which limits access to assets of the agency to persons who need the
25 assets to perform their assigned duties;

26 (c) Procedures for authorizations and recordkeeping which effectively control
27 accounting of assets, liabilities, revenues and expenses;

28 (d) A system of practices to be followed in the performance of the duties and
29 functions of each agency; and

30 (e) An effective system of internal review.

31 2. The Director, in consultation with the Committee and Legislative Auditor,
32 may modify the system whenever the Director considers it necessary.

33 3. Each agency shall develop written procedures to carry out the system of
34 internal accounting and administrative control adopted pursuant to this section.

35 4. For the purposes of this section, "agency" does not include:

36 (a) A board created by the provisions of NRS 590.485 and chapters 623 to
37 625A, inclusive, 628, 630 to 644A, inclusive, *and sections 2 to 32, inclusive, of*
38 *this act,* 648, 654 and 656 of NRS.

39 (b) The Nevada System of Higher Education.

40 (c) The Public Employees' Retirement System.

41 (d) The Housing Division of the Department of Business and Industry.

42 (e) The Colorado River Commission of Nevada.

43 **Sec. 61.** NRS 353A.025 is hereby amended to read as follows:

44 353A.025 1. The head of each agency shall periodically review the agency's
45 system of internal accounting and administrative control to determine whether it is
46 in compliance with the uniform system of internal accounting and administrative
47 control for agencies adopted pursuant to subsection 1 of NRS 353A.020.

48 2. On or before July 1 of each even-numbered year, the head of each agency
49 shall report to the Director whether the agency's system of internal accounting and
50 administrative control is in compliance with the uniform system adopted pursuant
51 to subsection 1 of NRS 353A.020. The reports must be made available for
52 inspection by the members of the Legislature.

53 3. For the purposes of this section, "agency" does not include:

1 (a) A board created by the provisions of NRS 590.485 and chapters 623 to
2 625A, inclusive, 628, 630 to 644A, inclusive, *and sections 2 to 32, inclusive, of*
3 *this act*, 648, 654 and 656 of NRS.

4 (b) The Nevada System of Higher Education.

5 (c) The Public Employees' Retirement System.

6 (d) The Housing Division of the Department of Business and Industry.

7 (e) The Colorado River Commission of Nevada.

8 4. The Director shall, on or before the first Monday in February of each odd-
9 numbered year, submit a report on the status of internal accounting and
10 administrative controls in agencies to the:

11 (a) Director of the Legislative Counsel Bureau for transmittal to the:

12 (1) Senate Standing Committee on Finance; and

13 (2) Assembly Standing Committee on Ways and Means;

14 (b) Governor; and

15 (c) Legislative Auditor.

16 5. The report submitted by the Director pursuant to subsection 4 must include,
17 without limitation:

18 (a) The identification of each agency that has not complied with the
19 requirements of subsections 1 and 2;

20 (b) The identification of each agency that does not have an effective method
21 for reviewing its system of internal accounting and administrative control; and

22 (c) The identification of each agency that has weaknesses in its system of
23 internal accounting and administrative control, and the extent and types of such
24 weaknesses.

25 **Sec. 62.** NRS 353A.045 is hereby amended to read as follows:

26 353A.045 The Administrator shall:

27 1. Report to the Director.

28 2. Develop long-term and annual work plans to be based on the results of
29 periodic documented risk assessments. The annual work plan must list the agencies to
30 which the Division will provide training and assistance and be submitted to the
31 Director for approval. Such agencies must not include:

32 (a) A board created by the provisions of NRS 590.485 and chapters 623 to
33 625A, inclusive, 628, 630 to 644A, inclusive, *and sections 2 to 32, inclusive, of*
34 *this act*, 648, 654 and 656 of NRS.

35 (b) The Nevada System of Higher Education.

36 (c) The Public Employees' Retirement System.

37 (d) The Housing Division of the Department of Business and Industry.

38 (e) The Colorado River Commission of Nevada.

39 3. Provide a copy of the approved annual work plan to the Legislative
40 Auditor.

41 4. In consultation with the Director, prepare a plan for auditing executive
42 branch agencies for each fiscal year and present the plan to the Committee for its
43 review and approval. Each plan for auditing must:

44 (a) State the agencies which will be audited, the proposed scope and
45 assignment of those audits and the related resources which will be used for those
46 audits; and

47 (b) Ensure that the internal accounting, administrative controls and financial
48 management of each agency are reviewed periodically.

49 5. Perform the audits of the programs and activities of the agencies in
50 accordance with the plan approved pursuant to subsection 5 of NRS 353A.038 and
51 prepare audit reports of his or her findings.

1 6. Review each agency that is audited pursuant to subsection 5 and advise
2 those agencies concerning internal accounting, administrative controls and financial
3 management.

4 7. Submit to each agency that is audited pursuant to subsection 5 analyses,
5 appraisals and recommendations concerning:

6 (a) The adequacy of the internal accounting and administrative controls of the
7 agency; and

8 (b) The efficiency and effectiveness of the management of the agency.

9 8. Report any possible abuses, illegal actions, errors, omissions and conflicts
10 of interest of which the Division becomes aware during the performance of an
11 audit.

12 9. Adopt the standards of The Institute of Internal Auditors for conducting
13 and reporting on internal audits.

14 10. Consult with the Legislative Auditor concerning the plan for auditing and
15 the scope of audits to avoid duplication of effort and undue disruption of the
16 functions of agencies that are audited pursuant to subsection 5.

17 **Sec. 63.** NRS 372.7285 is hereby amended to read as follows:

18 372.7285 1. In administering the provisions of NRS 372.325, the
19 Department shall apply the exemption to the sale of a medical device to a
20 governmental entity that is exempt pursuant to that section without regard to
21 whether the person using the medical device or the governmental entity that
22 purchased the device is deemed to be the holder of title to the device if:

23 (a) The medical device was ordered or prescribed by a provider of health care,
24 within his or her scope of practice, for use by the person to whom it is provided;

25 (b) The medical device is covered by Medicaid or Medicare; and

26 (c) The purchase of the medical device is made pursuant to a contract between
27 the governmental entity that purchases the medical device and the person who sells
28 the medical device to the governmental entity.

29 2. As used in this section:

30 (a) "Medicaid" means the program established pursuant to Title XIX of the
31 Social Security Act, 42 U.S.C. §§ 1396 et seq., to provide assistance for part or all
32 of the cost of medical care rendered on behalf of indigent persons.

33 (b) "Medicare" means the program of health insurance for aged persons and
34 persons with disabilities established pursuant to Title XVIII of the Social Security
35 Act, 42 U.S.C. §§ 1395 et seq.

36 (c) "Provider of health care" means a physician or physician assistant licensed
37 pursuant to chapter 630, 630A or 633 of NRS, perfusionist, dentist, licensed nurse,
38 *licensed certified professional midwife*, dispensing optician, optometrist,
39 practitioner of respiratory care, registered physical therapist, podiatric physician,
40 licensed psychologist, licensed audiologist, licensed speech-language pathologist,
41 licensed hearing aid specialist, licensed marriage and family therapist, licensed
42 clinical professional counselor, chiropractor, licensed dietitian or doctor of Oriental
43 medicine in any form.

44 **Sec. 64.** NRS 374.731 is hereby amended to read as follows:

45 374.731 1. In administering the provisions of NRS 374.330, the Department
46 shall apply the exemption to the sale of a medical device to a governmental entity
47 that is exempt pursuant to that section without regard to whether the person using
48 the medical device or the governmental entity that purchased the device is deemed
49 to be the holder of title to the device if:

50 (a) The medical device was ordered or prescribed by a provider of health care,
51 within his or her scope of practice, for use by the person to whom it is provided;

52 (b) The medical device is covered by Medicaid or Medicare; and

1 (c) The purchase of the medical device is made pursuant to a contract between
2 the governmental entity that purchases the medical device and the person who sells
3 the medical device to the governmental entity.

4 2. As used in this section:

5 (a) "Medicaid" means the program established pursuant to Title XIX of the
6 Social Security Act, 42 U.S.C. §§ 1396 et seq., to provide assistance for part or all
7 of the cost of medical care rendered on behalf of indigent persons.

8 (b) "Medicare" means the program of health insurance for aged persons and
9 persons with disabilities established pursuant to Title XVIII of the Social Security
10 Act, 42 U.S.C. §§ 1395 et seq.

11 (c) "Provider of health care" means a physician or physician assistant licensed
12 pursuant to chapter 630, 630A or 633 of NRS, perfusionist, dentist, licensed nurse,
13 *licensed certified professional midwife*, dispensing optician, optometrist,
14 practitioner of respiratory care, registered physical therapist, podiatric physician,
15 licensed psychologist, licensed audiologist, licensed speech-language pathologist,
16 licensed hearing aid specialist, licensed marriage and family therapist, licensed
17 clinical professional counselor, chiropractor, licensed dietitian or doctor of Oriental
18 medicine in any form.

19 **Sec. 65.** Chapter 422 of NRS is hereby amended by adding thereto a new
20 section to read as follows:

21 *1. To the extent authorized by federal law, the Director shall include a*
22 *requirement in the State Plan for Medicaid a requirement that, except as*
23 *otherwise provided in subsection 2, the State pay the nonfederal share of*
24 *expenditures incurred for services rendered by a licensed certified professional*
25 *midwife. Such services must be reimbursed at a comparable rate to similar*
26 *services provided by other providers of health care, including, without limitation,*
27 *physicians, physician assistants and advanced practice registered nurses,*
28 *regardless of the location at which the services are provided.*

29 *2. The Department or a managed care organization, including, without*
30 *limitation, a health maintenance organization, that provides health care services*
31 *to recipients of Medicaid under the State Plan for Medicaid may charge a*
32 *copayment or coinsurance or apply a deductible for the services described in*
33 *subsection 1. The amount of such a copayment, coinsurance or deductible must*
34 *not exceed the amount of the copayment, coinsurance or deductible charged for*
35 *the same services provided by another provider of health care.*

36 *3. As used in this section, "provider of health care" has the meaning*
37 *ascribed to it in NRS 629.031.*

38 **Sec. 66.** NRS 432B.220 is hereby amended to read as follows:

39 432B.220 1. Any person who is described in subsection 4 and who, in his or
40 her professional or occupational capacity, knows or has reasonable cause to believe
41 that a child has been abused or neglected shall:

42 (a) Except as otherwise provided in subsection 2, report the abuse or neglect of
43 the child to an agency which provides child welfare services or to a law
44 enforcement agency; and

45 (b) Make such a report as soon as reasonably practicable but not later than 24
46 hours after the person knows or has reasonable cause to believe that the child has
47 been abused or neglected.

48 2. If a person who is required to make a report pursuant to subsection 1 knows
49 or has reasonable cause to believe that the abuse or neglect of the child involves an
50 act or omission of:

51 (a) A person directly responsible or serving as a volunteer for or an employee
52 of a public or private home, institution or facility where the child is receiving child

1 care outside of the home for a portion of the day, the person shall make the report to
2 a law enforcement agency.

3 (b) An agency which provides child welfare services or a law enforcement
4 agency, the person shall make the report to an agency other than the one alleged to
5 have committed the act or omission, and the investigation of the abuse or neglect of
6 the child must be made by an agency other than the one alleged to have committed
7 the act or omission.

8 3. Any person who is described in paragraph (a) of subsection 4 who delivers
9 or provides medical services to a newborn infant and who, in his or her professional
10 or occupational capacity, knows or has reasonable cause to believe that the
11 newborn infant has been affected by a fetal alcohol spectrum disorder or prenatal
12 substance use disorder or has withdrawal symptoms resulting from prenatal
13 substance exposure shall, as soon as reasonably practicable but not later than 24
14 hours after the person knows or has reasonable cause to believe that the newborn
15 infant is so affected or has such symptoms, notify an agency which provides child
16 welfare services of the condition of the infant and refer each person who is
17 responsible for the welfare of the infant to an agency which provides child welfare
18 services for appropriate counseling, training or other services. A notification and
19 referral to an agency which provides child welfare services pursuant to this
20 subsection shall not be construed to require prosecution for any illegal action.

21 4. A report must be made pursuant to subsection 1 by the following persons:

22 (a) A person providing services licensed or certified in this State pursuant to,
23 without limitation, chapter 450B, 630, 630A, 631, 632, 633, 634, 634A, 635, 636,
24 637, 637B, 639, 640, 640A, 640B, 640C, 640D, 640E, 641, 641A, 641B, 641C or
25 653 of NRS ~~or~~ **or sections 2 to 32, inclusive, of this act.**

26 (b) Any personnel of a medical facility licensed pursuant to chapter 449 of
27 NRS who are engaged in the admission, examination, care or treatment of persons
28 or an administrator, manager or other person in charge of such a medical facility
29 upon notification of suspected abuse or neglect of a child by a member of the staff
30 of the medical facility.

31 (c) A coroner.

32 (d) A member of the clergy, practitioner of Christian Science or religious
33 healer, unless the person has acquired the knowledge of the abuse or neglect from
34 the offender during a confession.

35 (e) A person employed by a public school or private school and any person
36 who serves as a volunteer at such a school.

37 (f) Any person who maintains or is employed by a facility or establishment that
38 provides care for children, children's camp or other public or private facility,
39 institution or agency furnishing care to a child.

40 (g) Any person licensed pursuant to chapter 424 of NRS to conduct a foster
41 home.

42 (h) Any officer or employee of a law enforcement agency or an adult or
43 juvenile probation officer.

44 (i) Except as otherwise provided in NRS 432B.225, an attorney.

45 (j) Any person who maintains, is employed by or serves as a volunteer for an
46 agency or service which advises persons regarding abuse or neglect of a child and
47 refers them to persons and agencies where their requests and needs can be met.

48 (k) Any person who is employed by or serves as a volunteer for a youth shelter.
49 As used in this paragraph, "youth shelter" has the meaning ascribed to it in NRS
50 244.427.

51 (l) Any adult person who is employed by an entity that provides organized
52 activities for children, including, without limitation, a person who is employed by a
53 school district or public school.

1 5. A report may be made by any other person.

2 6. If a person who is required to make a report pursuant to subsection 1 knows
3 or has reasonable cause to believe that a child has died as a result of abuse or
4 neglect, the person shall, as soon as reasonably practicable, report this belief to an
5 agency which provides child welfare services or a law enforcement agency. If such
6 a report is made to a law enforcement agency, the law enforcement agency shall
7 notify an agency which provides child welfare services and the appropriate medical
8 examiner or coroner of the report. If such a report is made to an agency which
9 provides child welfare services, the agency which provides child welfare services
10 shall notify the appropriate medical examiner or coroner of the report. The medical
11 examiner or coroner who is notified of a report pursuant to this subsection shall
12 investigate the report and submit his or her written findings to the appropriate
13 agency which provides child welfare services, the appropriate district attorney and a
14 law enforcement agency. The written findings must include, if obtainable, the
15 information required pursuant to the provisions of subsection 2 of NRS 432B.230.

16 7. The agency, board, bureau, commission, department, division or political
17 subdivision of the State responsible for the licensure, certification or endorsement
18 of a person who is described in subsection 4 and who is required in his or her
19 professional or occupational capacity to be licensed, certified or endorsed in this
20 State shall, at the time of initial licensure, certification or endorsement:

21 (a) Inform the person, in writing or by electronic communication, of his or her
22 duty as a mandatory reporter pursuant to this section;

23 (b) Obtain a written acknowledgment or electronic record from the person that
24 he or she has been informed of his or her duty pursuant to this section; and

25 (c) Maintain a copy of the written acknowledgment or electronic record for as
26 long as the person is licensed, certified or endorsed in this State.

27 8. The employer of a person who is described in subsection 4 and who is not
28 required in his or her professional or occupational capacity to be licensed, certified
29 or endorsed in this State must, upon initial employment of the person:

30 (a) Inform the person, in writing or by electronic communication, of his or her
31 duty as a mandatory reporter pursuant to this section;

32 (b) Obtain a written acknowledgment or electronic record from the person that
33 he or she has been informed of his or her duty pursuant to this section; and

34 (c) Maintain a copy of the written acknowledgment or electronic record for as
35 long as the person is employed by the employer.

36 9. Before a person may serve as a volunteer at a public school or private
37 school, the school must:

38 (a) Inform the person, in writing or by electronic communication, of his or her
39 duty as a mandatory reporter pursuant to this section and NRS 392.303;

40 (b) Obtain a written acknowledgment or electronic record from the person that
41 he or she has been informed of his or her duty pursuant to this section and NRS
42 392.303; and

43 (c) Maintain a copy of the written acknowledgment or electronic record for as
44 long as the person serves as a volunteer at the school.

45 10. As used in this section:

46 (a) "Private school" has the meaning ascribed to it in NRS 394.103.

47 (b) "Public school" has the meaning ascribed to it in NRS 385.007.

48 **Sec. 67.** NRS 439A.0195 is hereby amended to read as follows:

49 439A.0195 "Practitioner" means a physician licensed under chapter 630,
50 630A or 633 of NRS, dentist, licensed nurse, *licensed certified professional*
51 *midwife*, dispensing optician, optometrist, registered physical therapist, podiatric
52 physician, licensed psychologist, chiropractor, doctor of Oriental medicine in any

1 form, medical laboratory director or technician, pharmacist or other person whose
2 principal occupation is the provision of services for health.

3 **Sec. 68.** NRS 439B.225 is hereby amended to read as follows:

4 439B.225 1. As used in this section, “licensing board” means any division
5 or board empowered to adopt standards for the issuance or renewal of licenses,
6 permits or certificates of registration pursuant to NRS 435.3305 to 435.339,
7 inclusive, chapter 449, 625A, 630, 630A, 631, 632, 633, 634, 634A, 635, 636, 637,
8 637B, 639, 640, 640A, 640D, 641, 641A, 641B, 641C, 652, 653 or 654 of NRS ~~(c)~~
9 *and sections 2 to 32, inclusive, of this act.*

10 2. The Committee shall review each regulation that a licensing board
11 proposes or adopts that relates to standards for the issuance or renewal of licenses,
12 permits or certificates of registration issued to a person or facility regulated by the
13 board, giving consideration to:

14 (a) Any oral or written comment made or submitted to it by members of the
15 public or by persons or facilities affected by the regulation;

16 (b) The effect of the regulation on the cost of health care in this State;

17 (c) The effect of the regulation on the number of licensed, permitted or
18 registered persons and facilities available to provide services in this State; and

19 (d) Any other related factor the Committee deems appropriate.

20 3. After reviewing a proposed regulation, the Committee shall notify the
21 agency of the opinion of the Committee regarding the advisability of adopting or
22 revising the proposed regulation.

23 4. The Committee shall recommend to the Legislature as a result of its review
24 of regulations pursuant to this section any appropriate legislation.

25 **Sec. 69.** Chapter 440 of NRS is hereby amended by adding thereto a new
26 section to read as follows:

27 *As used in this chapter, “midwife” means*~~(c)~~

28 ~~1. *Any type of midwife, including, without limitation, a licensed certified*~~
29 ~~*professional midwife (c) or*~~

30 ~~2. *Any person who engages in the practice of certified professional*~~
31 ~~*midwifery (pursuant to subsection 2 of section 15 of this act.)*~~

32 **Sec. 70.** NRS 440.280 is hereby amended to read as follows:

33 440.280 1. If a birth occurs in a hospital or the mother and child are
34 immediately transported to a hospital, the person in charge of the hospital or his or
35 her designated representative shall obtain the necessary information, prepare a birth
36 certificate, secure the signatures required by the certificate and file it within 10 days
37 with the health officer of the registration district where the birth occurred. The
38 physician in attendance shall provide the medical information required by the
39 certificate and certify to the fact of birth within 72 hours after the birth. If the
40 physician does not certify to the fact of birth within the required 72 hours, the
41 person in charge of the hospital or the designated representative shall complete and
42 sign the certification.

43 2. If a birth occurs outside a hospital and the mother and child are not
44 immediately transported to a hospital, the birth certificate must be prepared and
45 filed by one of the following persons in the following order of priority:

46 (a) The physician *or advanced practice registered nurse* in attendance at or
47 immediately after the birth.

48 (b) *The licensed certified professional midwife in attendance at or*
49 *immediately after the birth.*

50 (c) Any other person in attendance at or immediately after the birth.

51 ~~(c)~~ (d) The father, mother or, if the father is absent and the mother is
52 incapacitated, the person in charge of the premises where the birth occurred.

1 3. If a birth occurs in a moving conveyance, the place of birth is the place
2 where the child is removed from the conveyance.

3 4. In cities, the certificate of birth must be filed sooner than 10 days after the
4 birth if so required by municipal ordinance or regulation.

5 5. If the mother was:

6 (a) Married at the time of birth, the name of her spouse must be entered on the
7 certificate as the other parent of the child unless:

8 (1) A court has issued an order establishing that a person other than the
9 mother's spouse is the other parent of the child; or

10 (2) The mother and a person other than the mother's spouse have signed a
11 declaration for the voluntary acknowledgment of paternity developed by the Board
12 pursuant to NRS 440.283 or a declaration for the voluntary acknowledgment of
13 parentage developed by the Board pursuant to NRS 440.285.

14 (b) Widowed at the time of birth but married at the time of conception, the
15 name of her spouse at the time of conception must be entered on the certificate as
16 the other parent of the child unless:

17 (1) A court has issued an order establishing that a person other than the
18 mother's spouse at the time of conception is the other parent of the child; or

19 (2) The mother and a person other than the mother's spouse at the time of
20 conception have signed a declaration for the voluntary acknowledgment of
21 parentage developed by the Board pursuant to NRS 440.283 or a declaration for the
22 voluntary acknowledgment of parentage developed by the Board pursuant to NRS
23 440.285.

24 6. If the mother was unmarried at the time of birth, the name of the other
25 parent may be entered on the original certificate of birth only if:

26 (a) The provisions of paragraph (b) of subsection 5 are applicable;

27 (b) A court has issued an order establishing that the person is the other parent
28 of the child; or

29 (c) The parents of the child have signed a declaration for the voluntary
30 acknowledgment of paternity developed by the Board pursuant to NRS 440.283 or
31 a declaration for the voluntary acknowledgment of parentage developed by the
32 Board pursuant to NRS 440.285. If both parents execute a declaration consenting to
33 the use of the surname of one parent as the surname of the child, the name of that
34 parent must be entered on the original certificate of birth and the surname of that
35 parent must be entered thereon as the surname of the child.

36 7. An order entered or a declaration executed pursuant to subsection 6 must
37 be submitted to the local health officer, the local health officer's authorized
38 representative, or the attending physician or midwife before a proper certificate of
39 birth is forwarded to the State Registrar. The order or declaration must then be
40 delivered to the State Registrar for filing. The State Registrar's file of orders and
41 declarations must be sealed and the contents of the file may be examined only upon
42 order of a court of competent jurisdiction or at the request of either parent or the
43 Division of Welfare and Supportive Services of the Department of Health and
44 Human Services as necessary to carry out the provisions of 42 U.S.C. § 654a. The
45 local health officer shall complete the original certificate of birth in accordance
46 with subsection 6 and other provisions of this chapter.

47 8. As used in this section, "court" has the meaning ascribed to it in NRS
48 125B.004.

49 **Sec. 71.** NRS 440.770 is hereby amended to read as follows:

50 440.770 Any person who furnishes false information to a physician, advanced
51 practice registered nurse, *licensed certified professional midwife*, funeral director,
52 midwife or informant for the purpose of making incorrect certification of births or
53 deaths shall be punished by a fine of not more than \$250.

1 **Sec. 72.** NRS 441A.110 is hereby amended to read as follows:

2 441A.110 “Provider of health care” means a physician, nurse , *licensed*
3 *certified professional midwife* or veterinarian licensed in accordance with state law
4 or a physician assistant licensed pursuant to chapter 630 or 633 of NRS.

5 **Sec. 73.** NRS 442.003 is hereby amended to read as follows:

6 442.003 As used in this chapter, unless the context requires otherwise:

7 1. “Advisory Board” means the Advisory Board on Maternal and Child
8 Health.

9 2. “Department” means the Department of Health and Human Services.

10 3. “Director” means the Director of the Department.

11 4. “Division” means the Division of Public and Behavioral Health of the
12 Department.

13 5. “Fetal alcohol syndrome” includes fetal alcohol effects.

14 6. “Laboratory” has the meaning ascribed to it in NRS 652.040.

15 7. ~~“Midwife” means \neq~~

16 ~~“(a) \neq any type of midwife, including, without limitation, a licensed certified~~
17 ~~professional midwife \neq or~~

18 ~~“(b) Any \neq any person who engages in the practice of certified professional~~
19 ~~midwifery \neq pursuant to subsection 2 of section 15 of this act.”~~

20 8. “Obstetric center” has the meaning ascribed to it in NRS 449.0155.

21 ~~“(8) 9.~~ “Provider of health care or other services” means:

22 (a) A clinical alcohol and drug counselor who is licensed, or an alcohol and
23 drug counselor who is licensed or certified, pursuant to chapter 641C of NRS;

24 (b) A physician or a physician assistant who is licensed pursuant to chapter 630
25 or 633 of NRS and who practices in the area of obstetrics and gynecology, family
26 practice, internal medicine, pediatrics or psychiatry;

27 (c) A licensed nurse;

28 (d) A licensed psychologist;

29 (e) A licensed marriage and family therapist;

30 (f) A licensed clinical professional counselor;

31 (g) A licensed social worker;

32 (h) A licensed dietitian; ~~“(h) 9.~~

33 (i) *A licensed certified professional midwife; or*

34 (j) The holder of a certificate of registration as a pharmacist.

35 **Sec. 74.** NRS 442.119 is hereby amended to read as follows:

36 442.119 As used in NRS 442.119 to 442.1198, inclusive, unless the context
37 otherwise requires:

38 1. “Health officer” includes a local health officer, a city health officer, a
39 county health officer and a district health officer.

40 2. “Medicaid” has the meaning ascribed to it in NRS 439B.120.

41 3. “Medicare” has the meaning ascribed to it in NRS 439B.130.

42 4. “Provider of prenatal care” means:

43 (a) A physician who is licensed in this State and certified in obstetrics and
44 gynecology, family practice, general practice or general surgery.

45 (b) A certified nurse midwife who is licensed by the State Board of Nursing.

46 (c) An advanced practice registered nurse who is licensed by the State Board of
47 Nursing pursuant to NRS 632.237 and who has specialized skills and training in
48 obstetrics or family nursing.

49 (d) A physician assistant licensed pursuant to chapter 630 or 633 of NRS who
50 has specialized skills and training in obstetrics or family practice.

51 (e) *A licensed certified professional midwife.*

52 **Sec. 75.** NRS 442.610 is hereby amended to read as follows:

53 442.610 “Provider of health care” means:

1 1. A provider of health care as defined in NRS 629.031 ~~H~~, *including,*
2 *without limitation, a licensed certified professional midwife; and*

3 2. ~~A. Any other type of midwife; and~~

4 ~~3.~~ An obstetric center licensed pursuant to chapter 449 of NRS.

5 **Sec. 76.** NRS 454.00958 is hereby amended to read as follows:
6 454.00958 “Practitioner” means:

7 1. A physician, dentist, veterinarian or podiatric physician who holds a valid
8 license to practice his or her profession in this State.

9 2. A pharmacy, hospital or other institution licensed or registered to
10 distribute, dispense, conduct research with respect to or to administer a dangerous
11 drug in the course of professional practice in this State.

12 3. When relating to the prescription of poisons, dangerous drugs and devices:

13 (a) An advanced practice registered nurse who holds a certificate from the
14 State Board of Pharmacy permitting him or her so to prescribe; or

15 (b) A physician assistant who holds a license from the Board of Medical
16 Examiners and a certificate from the State Board of Pharmacy permitting him or
17 her so to prescribe.

18 4. An optometrist who is certified to prescribe and administer pharmaceutical
19 agents pursuant to NRS 636.288 when the optometrist prescribes or administers
20 dangerous drugs which are within the scope of his or her certification.

21 *5. A licensed certified professional midwife, for the purpose of ordering:*

22 *(a) Any device or drug described in subsection 1 or 2 of section 26 of this act*
23 *for use in his or her practice; or*

24 *(b) Any device or vaccine described in subsection 4 of section 26 of this act*
25 *for a client.*

26 **Sec. 77.** NRS 454.213 is hereby amended to read as follows:

27 454.213 1. Except as otherwise provided in NRS 454.217, a drug or
28 medicine referred to in NRS 454.181 to 454.371, inclusive, may be possessed and
29 administered by:

30 (a) A practitioner.

31 (b) A physician assistant licensed pursuant to chapter 630 or 633 of NRS, at
32 the direction of his or her supervising physician or a licensed dental hygienist
33 acting in the office of and under the supervision of a dentist.

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

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

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

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

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

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

1 (1) The State Board of Health in a county whose population is less than
2 100,000;

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

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

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

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

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

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

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

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

22 (k) A medical student or student nurse may administer a dangerous drug in the
23 presence or under the supervision of a registered nurse alone only if the
24 circumstances are such that the registered nurse would be authorized to administer
25 it personally.

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

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

29 (n) A holder of a license to engage in radiation therapy and radiologic imaging
30 issued pursuant to chapter 653 of NRS, at the direction of a physician and in
31 accordance with any conditions established by regulation of the Board.

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

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

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

38 (2) Prescribed by a licensed physician for:

39 (I) Iontophoresis; or

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

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

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

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

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

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

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

4 (s) A registered pharmacist pursuant to written guidelines and protocols
5 developed and approved pursuant to NRS 639.2629 or a collaborative practice
6 agreement, as defined in NRS 639.0052.

7 (t) A person who is enrolled in a training program to become a physician
8 assistant licensed pursuant to chapter 630 or 633 of NRS, dental hygienist,
9 advanced emergency medical technician, paramedic, respiratory therapist, dialysis
10 technician, physical therapist or veterinary technician or to obtain a license to
11 engage in radiation therapy and radiologic imaging pursuant to chapter 653 of NRS
12 if the person possesses and administers the drug or medicine in the same manner
13 and under the same conditions that apply, respectively, to a physician assistant
14 licensed pursuant to chapter 630 or 633 of NRS, dental hygienist, advanced
15 emergency medical technician, paramedic, respiratory therapist, dialysis technician,
16 physical therapist, veterinary technician or person licensed to engage in radiation
17 therapy and radiologic imaging who may possess and administer the drug or
18 medicine, and under the direct supervision of a person licensed or registered to
19 perform the respective medical art or a supervisor of such a person.

20 (u) A medical assistant, in accordance with applicable regulations of the:

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

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

25 *(v) A **certified professional midwife student midwife or certified professional***
26 ***midwife birth assistant who is administering the medicine or drug under the***
27 ***direct supervision of a licensed certified professional midwife as authorized by***
28 ***sections 2 to 32, inclusive, of this act and any regulations adopted pursuant***
29 ***thereto.***

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

32 **Sec. 78.** NRS 454.361 is hereby amended to read as follows:

33 454.361 A conviction of the violation of any of the provisions of NRS
34 454.181 to 454.371, inclusive, constitutes grounds for the suspension or revocation
35 of any license issued to such person pursuant to the provisions of chapters 630, 631,
36 633, 635, 636, 638, 639 or 653 of NRS ~~§~~ **or sections 2 to 32, inclusive, of this act.**

37 **Sec. 79.** NRS 608.0116 is hereby amended to read as follows:

38 608.0116 “Professional” means pertaining to:

39 1. An employee who is licensed or certified by the State of Nevada for and
40 engaged in the practice of law or any of the professions regulated by chapters 623
41 to 645, inclusive, 645G and 656A of NRS ~~§~~ **and sections 2 to 32, inclusive, of this**
42 **act.**

43 2. A creative professional as described in 29 C.F.R. § 541.302 who is not an
44 employee of a contractor as that term is defined in NRS 624.020.

45 **Sec. 80.** NRS 679B.440 is hereby amended to read as follows:

46 679B.440 1. The Commissioner may require that reports submitted pursuant
47 to NRS 679B.430 include, without limitation, information regarding:

48 (a) Liability insurance provided to:

49 (1) Governmental agencies and political subdivisions of this State, reported
50 separately for:

- 51 (I) Cities and towns;
52 (II) School districts; and
53 (III) Other political subdivisions;

- 1 (2) Public officers;
 2 (3) Establishments where alcoholic beverages are sold;
 3 (4) Facilities for the care of children;
 4 (5) Labor, fraternal or religious organizations; and
 5 (6) Officers or directors of organizations formed pursuant to title 7 of NRS,
 6 reported separately for nonprofit entities and entities organized for profit;
 7 (b) Liability insurance for:
 8 (1) Defective products;
 9 (2) Medical or dental malpractice of:
 10 (I) A practitioner licensed pursuant to chapter 630, 630A, 631, 632,
 11 633, 634, 634A, 635, 636, 637, 637B, 639 or 640 of NRS *or sections 2 to 32,*
 12 *inclusive, of this act* or who holds a license or limited license issued pursuant to
 13 chapter 653 of NRS;
 14 (II) A hospital or other health care facility; or
 15 (III) Any related corporate entity;
 16 (3) Malpractice of attorneys;
 17 (4) Malpractice of architects and engineers; and
 18 (5) Errors and omissions by other professionally qualified persons;
 19 (c) Vehicle insurance, reported separately for:
 20 (1) Private vehicles;
 21 (2) Commercial vehicles;
 22 (3) Liability insurance; and
 23 (4) Insurance for property damage; and
 24 (d) Workers' compensation insurance.
 25 2. The Commissioner may require that the report include, without limitation,
 26 information specifically pertaining to this State or to an insurer in its entirety, in the
 27 aggregate or by type of insurance, and for a previous or current year, regarding:
 28 (a) Premiums directly written;
 29 (b) Premiums directly earned;
 30 (c) Number of policies issued;
 31 (d) Net investment income, using appropriate estimates when necessary;
 32 (e) Losses paid;
 33 (f) Losses incurred;
 34 (g) Loss reserves, including:
 35 (1) Losses unpaid on reported claims; and
 36 (2) Losses unpaid on incurred but not reported claims;
 37 (h) Number of claims, including:
 38 (1) Claims paid; and
 39 (2) Claims that have arisen but are unpaid;
 40 (i) Expenses for adjustment of losses, including allocated and unallocated
 41 losses;
 42 (j) Net underwriting gain or loss;
 43 (k) Net operation gain or loss, including net investment income; and
 44 (l) Any other information requested by the Commissioner.
 45 3. The Commissioner may also obtain, based upon an insurer in its entirety,
 46 information regarding:
 47 (a) Recoverable federal income tax;
 48 (b) Net unrealized capital gain or loss; and
 49 (c) All other expenses not included in subsection 2.
 50 **Sec. 81.** NRS 686A.2825 is hereby amended to read as follows:
 51 686A.2825 "Practitioner" means:
 52 1. A physician, dentist, nurse, *licensed certified professional midwife,*
 53 dispensing optician, optometrist, physical therapist, podiatric physician,

1 psychologist, chiropractor, doctor of Oriental medicine in any form, director or
2 technician of a medical laboratory, pharmacist, person who holds a license to
3 engage in radiation therapy and radiologic imaging or a limited license to engage in
4 radiologic imaging pursuant to chapter 653 of NRS or other provider of health
5 services who is authorized to engage in his or her occupation by the laws of this
6 state or another state; and

7 2. An attorney admitted to practice law in this state or any other state.

8 **Sec. 82.** NRS 686B.030 is hereby amended to read as follows:

9 686B.030 1. Except as otherwise provided in subsection 2 and NRS
10 686B.125, the provisions of NRS 686B.010 to 686B.1799, inclusive, apply to all
11 kinds and lines of direct insurance written on risks or operations in this State by any
12 insurer authorized to do business in this State, except:

13 (a) Ocean marine insurance;

14 (b) Contracts issued by fraternal benefit societies;

15 (c) Life insurance and credit life insurance;

16 (d) Variable and fixed annuities;

17 (e) Credit accident and health insurance;

18 (f) Property insurance for business and commercial risks;

19 (g) Casualty insurance for business and commercial risks other than insurance
20 covering the liability of a practitioner licensed pursuant to chapters 630 to 640,
21 inclusive, of NRS *and sections 2 to 32, inclusive, of this act* or who holds a license
22 or limited license issued pursuant to chapter 653 of NRS;

23 (h) Surety insurance;

24 (i) Health insurance offered through a group health plan maintained by a large
25 employer; and

26 (j) Credit involuntary unemployment insurance.

27 2. The exclusions set forth in paragraphs (f) and (g) of subsection 1 extend
28 only to issues related to the determination or approval of premium rates.

29 **Sec. 83.** NRS 686B.040 is hereby amended to read as follows:

30 686B.040 1. Except as otherwise provided in subsection 2, the
31 Commissioner may by rule exempt any person or class of persons or any market
32 segment from any or all of the provisions of NRS 686B.010 to 686B.1799,
33 inclusive, if and to the extent that the Commissioner finds their application
34 unnecessary to achieve the purposes of those sections.

35 2. The Commissioner may not, by rule or otherwise, exempt an insurer from
36 the provisions of NRS 686B.010 to 686B.1799, inclusive, with regard to insurance
37 covering the liability of a practitioner licensed pursuant to chapter 630, 631, 632 or
38 633 of NRS *or sections 2 to 32, inclusive, of this act* for a breach of the
39 practitioner's professional duty toward a patient.

40 **Sec. 84.** NRS 686B.115 is hereby amended to read as follows:

41 686B.115 1. Any hearing held by the Commissioner to determine whether
42 rates comply with the provisions of NRS 686B.010 to 686B.1799, inclusive, must
43 be open to members of the public.

44 2. All costs for transcripts prepared pursuant to such a hearing must be paid
45 by the insurer requesting the hearing.

46 3. At any hearing which is held by the Commissioner to determine whether
47 rates comply with the provisions of NRS 686B.010 to 686B.1799, inclusive, and
48 which involves rates for insurance covering the liability of a practitioner licensed
49 pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 32, inclusive, of*
50 *this act* for a breach of the practitioner's professional duty toward a patient, if a
51 person is not otherwise authorized pursuant to this title to become a party to the
52 hearing by intervention, the person is entitled to provide testimony at the hearing if,

1 not later than 2 days before the date set for the hearing, the person files with the
2 Commissioner a written statement which states:

- 3 (a) The name and title of the person;
- 4 (b) The interest of the person in the hearing; and
- 5 (c) A brief summary describing the purpose of the testimony the person will
6 offer at the hearing.

7 4. If a person provides testimony at a hearing in accordance with subsection
8 3:

9 (a) The Commissioner may, if the Commissioner finds it necessary to preserve
10 order, prevent inordinate delay or protect the rights of the parties at the hearing,
11 place reasonable limitations on the duration of the testimony and prohibit the
12 person from providing testimony that is not relevant to the issues raised at the
13 hearing.

14 (b) The Commissioner shall consider all relevant testimony provided by the
15 person at the hearing in determining whether the rates comply with the provisions
16 of NRS 686B.010 to 686B.1799, inclusive.

17 **Sec. 85.** NRS 689A.035 is hereby amended to read as follows:

18 689A.035 1. An insurer shall not charge a provider of health care a fee to
19 include the name of the provider on a list of providers of health care given by the
20 insurer to its insureds.

21 2. An insurer shall not contract with a provider of health care to provide
22 health care to an insured unless the insurer uses the form prescribed by the
23 Commissioner pursuant to NRS 629.095 to obtain any information related to the
24 credentials of the provider of health care.

25 3. A contract between an insurer and a provider of health care may be
26 modified:

27 (a) At any time pursuant to a written agreement executed by both parties.

28 (b) Except as otherwise provided in this paragraph, by the insurer upon giving
29 to the provider 45 days' written notice of the modification of the insurer's schedule
30 of payments, including any changes to the fee schedule applicable to the provider's
31 practice. If the provider fails to object in writing to the modification within the 45-
32 day period, the modification becomes effective at the end of that period. If the
33 provider objects in writing to the modification within the 45-day period, the
34 modification must not become effective unless agreed to by both parties as
35 described in paragraph (a).

36 4. If an insurer contracts with a provider of health care to provide health care
37 to an insured, the insurer shall:

38 (a) If requested by the provider of health care at the time the contract is made,
39 submit to the provider of health care the schedule of payments applicable to the
40 provider of health care; or

41 (b) If requested by the provider of health care at any other time, submit to the
42 provider of health care the schedule of payments, including any changes to the fee
43 schedule applicable to the provider's practice, specified in paragraph (a) within 7
44 days after receiving the request.

45 5. As used in this section, "provider of health care" means a provider of
46 health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS ~~or~~
47 **sections 2 to 32, inclusive, of this act.**

48 **Sec. 86.** NRS 689B.015 is hereby amended to read as follows:

49 689B.015 1. An insurer that issues a policy of group health insurance shall
50 not charge a provider of health care a fee to include the name of the provider on a
51 list of providers of health care given by the insurer to its insureds.

52 2. An insurer specified in subsection 1 shall not contract with a provider of
53 health care to provide health care to an insured unless the insurer uses the form

1 prescribed by the Commissioner pursuant to NRS 629.095 to obtain any
2 information related to the credentials of the provider of health care.

3 3. A contract between an insurer specified in subsection 1 and a provider of
4 health care may be modified:

5 (a) At any time pursuant to a written agreement executed by both parties.

6 (b) Except as otherwise provided in this paragraph, by the insurer upon giving
7 to the provider 45 days' written notice of the modification of the insurer's schedule
8 of payments, including any changes to the fee schedule applicable to the provider's
9 practice. If the provider fails to object in writing to the modification within the 45-
10 day period, the modification becomes effective at the end of that period. If the
11 provider objects in writing to the modification within the 45-day period, the
12 modification must not become effective unless agreed to by both parties as
13 described in paragraph (a).

14 4. If an insurer specified in subsection 1 contracts with a provider of health
15 care to provide health care to an insured, the insurer shall:

16 (a) If requested by the provider of health care at the time the contract is made,
17 submit to the provider of health care the schedule of payments applicable to the
18 provider of health care; or

19 (b) If requested by the provider of health care at any other time, submit to the
20 provider of health care the schedule of payments, including any changes to the fee
21 schedule applicable to the provider's practice, specified in paragraph (a) within 7
22 days after receiving the request.

23 5. As used in this section, "provider of health care" means a provider of
24 health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS ~~or~~
25 *sections 2 to 32, inclusive, of this act.*

26 **Sec. 87.** NRS 689C.435 is hereby amended to read as follows:

27 689C.435 1. A carrier serving small employers and a carrier that offers a
28 contract to a voluntary purchasing group shall not charge a provider of health care a
29 fee to include the name of the provider on a list of providers of health care given by
30 the carrier to its insureds.

31 2. A carrier specified in subsection 1 shall not contract with a provider of
32 health care to provide health care to an insured unless the carrier uses the form
33 prescribed by the Commissioner pursuant to NRS 629.095 to obtain any
34 information related to the credentials of the provider of health care.

35 3. A contract between a carrier specified in subsection 1 and a provider of
36 health care may be modified:

37 (a) At any time pursuant to a written agreement executed by both parties.

38 (b) Except as otherwise provided in this paragraph, by the carrier upon giving
39 to the provider 45 days' written notice of the modification of the carrier's schedule
40 of payments, including any changes to the fee schedule applicable to the provider's
41 practice. If the provider fails to object in writing to the modification within the 45
42 day period, the modification becomes effective at the end of that period. If the
43 provider objects in writing to the modification within the 45 day period, the
44 modification must not become effective unless agreed to by both parties as
45 described in paragraph (a).

46 4. If a carrier specified in subsection 1 contracts with a provider of health care
47 to provide health care to an insured, the carrier shall:

48 (a) If requested by the provider of health care at the time the contract is made,
49 submit to the provider of health care the schedule of payments applicable to the
50 provider of health care; or

51 (b) If requested by the provider of health care at any other time, submit to the
52 provider of health care the schedule of payments, including any changes to the fee

1 schedule applicable to the provider's practice, specified in paragraph (a) within 7
2 days after receiving the request.

3 5. As used in this section, "provider of health care" means a provider of
4 health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS ~~or~~
5 *sections 2 to 32, inclusive, of this act.*

6 **Sec. 88.** NRS 690B.250 is hereby amended to read as follows:

7 690B.250 Except as more is required in NRS 630.3067 and 633.526:

8 1. Each insurer which issues a policy of insurance covering the liability of a
9 practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS *or sections*
10 *2 to 32, inclusive, of this act* or who holds a license or limited license issued
11 pursuant to chapter 653 of NRS for a breach of his or her professional duty toward
12 a patient shall report to the board which licensed the practitioner within 45 days
13 each settlement or award made or judgment rendered by reason of a claim, if the
14 settlement, award or judgment is for more than \$5,000, giving the name of the
15 claimant and the practitioner and the circumstances of the case.

16 2. A practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS
17 *or sections 2 to 32, inclusive, of this act* or who holds a license or limited license
18 issued pursuant to chapter 653 of NRS who does not have insurance covering
19 liability for a breach of his or her professional duty toward a patient shall report to
20 the board which issued the practitioner's license within 45 days of each settlement
21 or award made or judgment rendered by reason of a claim, if the settlement, award
22 or judgment is for more than \$5,000, giving the practitioner's name, the name of
23 the claimant and the circumstances of the case.

24 3. These reports are public records and must be made available for public
25 inspection within a reasonable time after they are received by the licensing board.

26 **Sec. 89.** NRS 690B.270 is hereby amended to read as follows:

27 690B.270 If an insurer declines to issue to a practitioner licensed pursuant to
28 chapter 630, 631, 632 or 633 of NRS *or sections 2 to 32, inclusive, of this act* a
29 policy of professional liability insurance, the insurer shall, upon the request of the
30 practitioner, disclose to the practitioner the reasons the insurer declined to issue the
31 policy.

32 **Sec. 90.** NRS 690B.280 is hereby amended to read as follows:

33 690B.280 If an insurer, for a policy of professional liability insurance for a
34 practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS ~~or~~
35 *sections 2 to 32, inclusive, of this act*, sets the premium for the policy for the
36 practitioner at a rate that is higher than the standard rate of the insurer for the
37 applicable type of policy and specialty of the practitioner, the insurer shall, upon
38 the request of the practitioner, disclose the reasons the insurer set the premium for
39 the policy at the higher rate.

40 **Sec. 91.** NRS 690B.290 is hereby amended to read as follows:

41 690B.290 If an insurer offers to issue a claims-made policy to a practitioner
42 licensed pursuant to chapter 630, 631, 632 or 633 of NRS ~~or~~ *sections 2 to 32,*
43 *inclusive, of this act*, the insurer shall:

44 1. Offer to issue an extended reporting endorsement to the practitioner; and
45 2. Disclose to the practitioner the cost formula that the insurer uses to
46 determine the premium for the extended reporting endorsement. The cost formula
47 must be based on:

48 (a) An amount that is not more than twice the amount of the premium for the
49 claims-made policy at the time of the termination of that policy; and

50 (b) The rates filed by the insurer and approved by the Commissioner.

51 **Sec. 92.** NRS 690B.300 is hereby amended to read as follows:

52 690B.300 1. Except as otherwise provided in this section, if an insurer
53 issues a policy of professional liability insurance to a practitioner licensed pursuant

1 to chapter 630, 632 or 633 of NRS *or sections 2 to 32, inclusive, of this act* who
2 delivers one or more babies per year, the insurer shall not set the premium for the
3 policy at a rate that is different from the rate set for such a policy issued by the
4 insurer to any other practitioner licensed pursuant to chapter 630, 632 or 633 of
5 NRS *or sections 2 to 32, inclusive, of this act* who delivers one or more babies per
6 year if the difference in rates is based in whole or in part upon the number of babies
7 delivered per year by the practitioner.

8 2. If an insurer issues a policy of professional liability insurance to a
9 practitioner licensed pursuant to chapter 630, 632 or 633 of NRS *or sections 2 to*
10 *32, inclusive, of this act* who delivers one or more babies per year, the insurer may
11 set the premium for the policy at a rate that is different, based in whole or in part
12 upon the number of babies delivered per year by the practitioner, from the rate set
13 for such a policy issued by the insurer to any other practitioner licensed pursuant to
14 chapter 630, 632 or 633 of NRS *or sections 2 to 32, inclusive, of this act* who
15 delivers one or more babies per year if the insurer:

16 (a) Bases the difference upon actuarial and loss experience data available to the
17 insurer; and

18 (b) Obtains the approval of the Commissioner for the difference in rates.

19 3. The provisions of this section do not prohibit an insurer from setting the
20 premium for a policy of professional liability insurance issued to a practitioner
21 licensed pursuant to chapter 630, 632 or 633 of NRS *or sections 2 to 32, inclusive,*
22 *of this act* who delivers one or more babies per year at a rate that is different from
23 the rate set for such a policy issued by the insurer to any other practitioner licensed
24 pursuant to chapter 630, 632 or 633 of NRS *or sections 2 to 32, inclusive, of this*
25 *act* who delivers one or more babies per year if the difference in rates is based
26 solely upon factors other than the number of babies delivered per year by the
27 practitioner.

28 **Sec. 93.** NRS 690B.310 is hereby amended to read as follows:

29 690B.310 1. If an agreement settles a claim or action against a practitioner
30 licensed pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 32,*
31 *inclusive, of this act* for a breach of his or her professional duty toward a patient,
32 the following terms of the agreement must not be made confidential:

33 (a) The names of the parties;

34 (b) The date of the incidents or events giving rise to the claim or action;

35 (c) The nature of the claim or action as set forth in the complaint and the
36 answer that is filed with the district court; and

37 (d) The effective date of the agreement.

38 2. Any provision of an agreement to settle a claim or action that conflicts with
39 this section is void.

40 **Sec. 94.** NRS 690B.320 is hereby amended to read as follows:

41 690B.320 1. If an insurer offers to issue a claims-made policy to a
42 practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS *or sections*
43 *2 to 32, inclusive, of this act* or who holds a license or limited license issued
44 pursuant to chapter 653 of NRS, the insurer shall:

45 (a) Offer to issue to the practitioner an extended reporting endorsement without
46 a time limitation for reporting a claim.

47 (b) Disclose to the practitioner the premium for the extended reporting
48 endorsement and the cost formula that the insurer uses to determine the premium
49 for the extended reporting endorsement.

50 (c) Disclose to the practitioner the portion of the premium attributable to
51 funding the extended reporting endorsement offered at no additional cost to the
52 practitioner in the event of the practitioner's death, disability or retirement, if such a
53 benefit is offered.

1 (d) Disclose to the practitioner the vesting requirements for the extended
2 reporting endorsement offered at no additional cost to the practitioner in the event
3 of the practitioner's death or retirement, if such a benefit is offered. If such a
4 benefit is not offered, the absence of such a benefit must be disclosed.

5 (e) Include, as part of the insurance contract, language which must be approved
6 by the Commissioner and which must be substantially similar to the following:
7

8 If we adopt any revision that would broaden the coverage under this policy
9 without any additional premium either within the policy period or within 60
10 days before the policy period, the broadened coverage will immediately
11 apply to this policy.
12

13 2. The disclosures required by subsection 1 must be made as part of the offer
14 and acceptance at the inception of the policy and again at each renewal in the form
15 of an endorsement attached to the insurance contract and approved by the
16 Commissioner.

17 3. The requirements set forth in this section are in addition to the
18 requirements set forth in NRS 690B.290.

19 **Sec. 95.** NRS 690B.360 is hereby amended to read as follows:

20 690B.360 1. The Commissioner may collect all information which is
21 pertinent to monitoring whether an insurer that issues professional liability
22 insurance for a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of
23 NRS *or sections 2 to 32, inclusive, of this act* is complying with the applicable
24 standards for rates established in NRS 686B.010 to 686B.1799, inclusive. Such
25 information may include, without limitation:

26 (a) The amount of gross premiums collected with regard to each medical
27 specialty;

28 (b) Information relating to loss ratios; and

29 (c) Information reported pursuant to NRS 679B.430 and 679B.440.

30 2. In addition to the information collected pursuant to subsection 1, the
31 Commissioner may request any additional information from an insurer:

32 (a) Whose rates and credit utilization are materially different from other
33 insurers in the market for professional liability insurance for a practitioner licensed
34 pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 32, inclusive, of*
35 *this act* in this State;

36 (b) Whose credit utilization shows a substantial change from the previous year;
37 or

38 (c) Whose information collected pursuant to subsection 1 indicates a
39 potentially adverse trend.

40 3. If the Commissioner requests additional information from an insurer
41 pursuant to subsection 2, the Commissioner may:

42 (a) Determine whether the additional information offers a reasonable
43 explanation for the results described in paragraph (a), (b) or (c) of subsection 2; and

44 (b) Take any steps permitted by law that are necessary and appropriate to
45 assure the ongoing stability of the market for professional liability insurance for a
46 practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2*
47 *to 32, inclusive, of this act* in this State.

48 4. On an ongoing basis, the Commissioner may analyze and evaluate the
49 information collected pursuant to this section to determine trends in and measure
50 the health of the market for professional liability insurance for a practitioner
51 licensed pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 32,*
52 *inclusive, of this act* in this State.

1 5. If the Commissioner convenes a hearing pursuant to subsection 1 of NRS
2 690B.350 and determines that the market for professional liability insurance issued
3 to any class, type or specialty of practitioner licensed pursuant to chapter 630, 631
4 or 633 of NRS *or sections 2 to 32, inclusive, of this act* is not competitive and that
5 such insurance is unavailable or unaffordable for a substantial number of such
6 practitioners, the Commissioner shall prepare and submit a report of the
7 Commissioner's findings and recommendations to the Director of the Legislative
8 Counsel Bureau for transmittal to members of the Legislature.

9 **Sec. 96.** NRS 695A.095 is hereby amended to read as follows:

10 695A.095 1. A society shall not charge a provider of health care a fee to
11 include the name of the provider on a list of providers of health care given by the
12 society to its insureds.

13 2. A society shall not contract with a provider of health care to provide health
14 care to an insured unless the society uses the form prescribed by the Commissioner
15 pursuant to NRS 629.095 to obtain any information related to the credentials of the
16 provider of health care.

17 3. A contract between a society and a provider of health care may be
18 modified:

19 (a) At any time pursuant to a written agreement executed by both parties.

20 (b) Except as otherwise provided in this paragraph, by the society upon giving
21 to the provider 45 days' written notice of the modification of the society's schedule
22 of payments, including any changes to the fee schedule applicable to the provider's
23 practice. If the provider fails to object in writing to the modification within the 45-
24 day period, the modification becomes effective at the end of that period. If the
25 provider objects in writing to the modification within the 45-day period, the
26 modification must not become effective unless agreed to by both parties as
27 described in paragraph (a).

28 4. If a society contracts with a provider of health care to provide health care to
29 an insured, the society shall:

30 (a) If requested by the provider of health care at the time the contract is made,
31 submit to the provider of health care the schedule of payments applicable to the
32 provider of health care; or

33 (b) If requested by the provider of health care at any other time, submit to the
34 provider of health care the schedule of payments, including any changes to the fee
35 schedule applicable to the provider's practice, specified in paragraph (a) within 7
36 days after receiving the request.

37 5. As used in this section, "provider of health care" means a provider of
38 health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS ~~or~~ *or*
39 *sections 2 to 32, inclusive, of this act.*

40 **Sec. 97.** NRS 695B.035 is hereby amended to read as follows:

41 695B.035 1. A corporation subject to the provisions of this chapter shall not
42 charge a provider of health care a fee to include the name of the provider on a list of
43 providers of health care given by the corporation to its insureds.

44 2. A corporation specified in subsection 1 shall not contract with a provider of
45 health care to provide health care to an insured unless the corporation uses the form
46 prescribed by the Commissioner pursuant to NRS 629.095 to obtain any
47 information related to the credentials of the provider of health care.

48 3. A contract between a corporation specified in subsection 1 and a provider
49 of health care may be modified:

50 (a) At any time pursuant to a written agreement executed by both parties.

51 (b) Except as otherwise provided in this paragraph, by the corporation upon
52 giving to the provider 45 days' written notice of the modification of the
53 corporation's schedule of payments, including any changes to the fee schedule

1 applicable to the provider's practice. If the provider fails to object in writing to the
2 modification within the 45-day period, the modification becomes effective at the
3 end of that period. If the provider objects in writing to the modification within the
4 45-day period, the modification must not become effective unless agreed to by both
5 parties as described in paragraph (a).

6 4. If a corporation specified in subsection 1 contracts with a provider of health
7 care to provide health care to an insured, the corporation shall:

8 (a) If requested by the provider of health care at the time the contract is made,
9 submit to the provider of health care the schedule of payments applicable to the
10 provider of health care; or

11 (b) If requested by the provider of health care at any other time, submit to the
12 provider of health care the schedule of payments, including any changes to the fee
13 schedule applicable to the provider's practice, specified in paragraph (a) within 7
14 days after receiving the request.

15 5. As used in this section, "provider of health care" means a provider of
16 health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS ~~or~~
17 *sections 2 to 32, inclusive, of this act.*

18 **Sec. 98.** NRS 695C.125 is hereby amended to read as follows:

19 695C.125 1. A health maintenance organization shall not contract with a
20 provider of health care to provide health care to an insured unless the health
21 maintenance organization uses the form prescribed by the Commissioner pursuant
22 to NRS 629.095 to obtain any information related to the credentials of the provider
23 of health care.

24 2. A contract between a health maintenance organization and a provider of
25 health care may be modified:

26 (a) At any time pursuant to a written agreement executed by both parties.

27 (b) Except as otherwise provided in this paragraph, by the health maintenance
28 organization upon giving to the provider 45 days' written notice of the modification
29 of the health maintenance organization's schedule of payments, including any
30 changes to the fee schedule applicable to the provider's practice. If the provider
31 fails to object in writing to the modification within the 45-day period, the
32 modification becomes effective at the end of that period. If the provider objects
33 in writing to the modification within the 45-day period, the modification must not
34 become effective unless agreed to by both parties as described in paragraph (a).

35 3. If a health maintenance organization contracts with a provider of health
36 care to provide health care to an enrollee, the health maintenance organization
37 shall:

38 (a) If requested by the provider of health care at the time the contract is made,
39 submit to the provider of health care the schedule of payments applicable to the
40 provider of health care; or

41 (b) If requested by the provider of health care at any other time, submit to the
42 provider of health care the schedule of payments, including any changes to the fee
43 schedule applicable to the provider's practice, specified in paragraph (a) within 7
44 days after receiving the request.

45 4. As used in this section, "provider of health care" means a provider of
46 health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS ~~or~~
47 *sections 2 to 32, inclusive, of this act.*

48 **Sec. 99.** NRS 695G.430 is hereby amended to read as follows:

49 695G.430 1. A managed care organization shall not contract with a provider
50 of health care to provide health care to an insured unless the managed care
51 organization uses the form prescribed by the Commissioner pursuant to NRS
52 629.095 to obtain any information related to the credentials of the provider of
53 health care.

1 2. A contract between a managed care organization and a provider of health
2 care may be modified:

3 (a) At any time pursuant to a written agreement executed by both parties.

4 (b) Except as otherwise provided in this paragraph, by the managed care
5 organization upon giving to the provider 45 days' written notice of the modification
6 of the managed care organization's schedule of payments, including any changes to
7 the fee schedule applicable to the provider's practice. If the provider fails to object
8 in writing to the modification within the 45-day period, the modification becomes
9 effective at the end of that period. If the provider objects in writing to the
10 modification within the 45-day period, the modification must not become effective
11 unless agreed to by both parties as described in paragraph (a).

12 3. If a managed care organization contracts with a provider of health care to
13 provide health care services pursuant to chapter 689A, 689B, 689C, 695A, 695B or
14 695C of NRS, the managed care organization shall:

15 (a) If requested by the provider of health care at the time the contract is made,
16 submit to the provider of health care the schedule of payments applicable to the
17 provider of health care; or

18 (b) If requested by the provider of health care at any other time, submit to the
19 provider of health care the schedule of payments, including any changes to the fee
20 schedule applicable to the provider's practice, specified in paragraph (a) within 7
21 days after receiving the request.

22 4. As used in this section, "provider of health care" means a provider of
23 health care who is licensed pursuant to chapter 630, 631, 632 or 633 of NRS ~~+~~ *or*
24 *sections 2 to 32, inclusive, of this act.*

25 **Sec. 100.** Section 18 of this act is hereby amended to read as follows:

26 Sec. 18. 1. The Board shall adopt any regulations necessary or
27 convenient for carrying out the provisions of this chapter. Those regulations
28 must include, without limitation:

29 (a) Requirements concerning the approval by the Division of programs
30 of training for licensed certified professional midwives and certified
31 professional midwife birth assistants, including, without limitation, the
32 required training and instruction that must be provided by such a program
33 and the procedure for obtaining such approval.

34 (b) Requirements governing the issuance and renewal of a license as a
35 licensed certified professional midwife, including, without limitation:

36 (1) The educational qualifications that, ~~except as otherwise~~
37 ~~provided in section 19 of this act and]~~ in addition to the qualifications
38 prescribed by ~~that~~ section ~~+~~ *19 of this act*, are necessary to obtain a
39 license pursuant to that section.

40 (2) The period for which a license is valid.

41 (3) A requirement that an applicant for the renewal of a license
42 must have completed continuing education in cultural humility or the
43 elimination of racism or bias.

44 (c) The procedure for filing a complaint with the Division concerning a
45 licensed certified professional midwife or certified professional midwife
46 student midwife.

47 (d) Grounds for the Division to impose disciplinary action against a
48 licensed certified professional midwife or certified professional midwife
49 student midwife and the procedure by which the Division will impose such
50 disciplinary action.

51 (e) Requirements governing the reinstatement of a license that has been
52 revoked, including, without limitation, the procedure to apply for
53 reinstatement.

1 (f) Regulations governing the ordering, usage and administration of
2 drugs, vaccines, chemicals, solutions and devices pursuant to section 26 of
3 this act;

4 (g) Regulations concerning the management by a licensed certified
5 professional midwife of a client who may have a condition that puts the
6 client at a moderate or high risk of an adverse outcome for the client or the
7 fetus or newborn infant of the client. The regulations must, to the extent
8 practicable, be guided by current, peer-reviewed scientific research and
9 must include, without limitation:

10 (1) A list of conditions or symptoms associated with a risk of
11 serious permanent harm or death to a client or the fetus or newborn infant
12 of a client;

13 (2) A list of conditions or symptoms associated with a risk of
14 greater than minimal harm to a client or the fetus or newborn infant of a
15 client that do not pose a risk of serious permanent harm or death; and

16 (3) Specific requirements for each condition or symptom listed
17 pursuant to subparagraphs (1) and (2) governing:

18 (I) The circumstances under which a licensed certified
19 professional midwife must arrange for the client to consult with another
20 provider of health care, co-manage the care of the client with another
21 provider of health care, refer primary responsibility for the care of a client
22 to another provider of health care or transfer the care of the client to a
23 medical facility, procedures for such consultation, co-management, referral
24 or transfer and requirements to ensure that a provider of health care who is
25 consulted, with whom a client's condition or symptom is co-managed or to
26 whom primary responsibility for the care of a client is referred is
27 appropriately qualified; and

28 (II) The information that must be included on the form for
29 providing informed refusal to consent to consultation, co-management,
30 referral or transfer pursuant to section 27 of this act and the management of
31 a client who provides such informed refusal to consent.

32 (h) Requirements governing the screening of clients in accordance with
33 chapter 442 of NRS and necessary measures for the prevention of
34 communicable diseases.

35 (i) Requirements concerning the records of treatment and outcomes
36 that must be kept by a licensed certified professional midwife.

37 (j) Any other requirements necessary to optimize obstetrical and
38 neonatal outcomes for clients of licensed certified professional midwives.

39 2. The Board may, by regulation, require an applicant for a license as
40 a licensed certified professional midwife, including, without limitation, an
41 applicant for a license by endorsement pursuant to section 20 of this act, to
42 submit to the Division a complete set of his or her fingerprints and written
43 permission authorizing the Division to forward the fingerprints to the
44 Central Repository for Nevada Records of Criminal History for submission
45 to the Federal Bureau of Investigation for its report.

46 **Sec. 101.** Section 19 of this act is hereby amended to read as follows:

47 Sec. 19. 1. An applicant for a license as a licensed certified
48 professional midwife, other than a license by endorsement pursuant to
49 section 20 of this act, must submit to the Division an application pursuant
50 to this section in the form prescribed by the Division. The application must
51 be accompanied by a fee in the amount prescribed by regulation of the State
52 Board of Health pursuant to NRS 439.150, which must not exceed \$1,000.
53 The application must include, without limitation, proof that the applicant is

certified as a midwife by the North American Registry of Midwives, or its successor organization, and:

(a) ~~Has~~ Except as otherwise provided in subsection 2, has completed an educational program accredited by the Midwifery Education Accreditation Council, or its successor organization; or

(b) Holds a Midwifery Bridge Certificate issued by the North American Registry of Midwives, or its successor organization, and has completed the Portfolio Evaluation Process prescribed by that organization.

2. If the Division determines it to be necessary to address shortages in the number of midwives practicing in rural or underserved areas in this State, the Division may, on a case-by-case basis, exempt an applicant from complying with paragraph (a) of subsection 1 if the applicant complies with paragraph (b) of subsection 1.

3. A license as a licensed certified professional midwife may be renewed upon submission to the Division of a renewal application in the form prescribed by the Division. The renewal application must:

(a) Be accompanied by a renewal fee in the amount prescribed by regulation of the State Board of Health pursuant to NRS 439.150, which must not exceed \$1,000; and

(b) Include any information required by the regulations adopted by the Board pursuant to section 18 of this act.

~~3.~~ 4. The State Board of Health shall establish by regulation a procedure through which:

(a) An applicant may petition the State Board to reduce the fees imposed pursuant to this section. An applicant may qualify for such a reduction if the applicant demonstrates, to the satisfaction of the State Board, that the fees imposed pursuant to this section are an economic hardship on the applicant.

(b) The State Board allocates a portion of the fees imposed and collected pursuant to this section to programs that promote applicants from marginalized identities through increasing the numbers of such applicants and reducing barriers that such applicants face.

~~4.~~ 5. As used in this section, “marginalized identity” means an identity or expression that causes or has historically caused a person of such identity or expression to be disproportionately discriminated against, harassed or otherwise negatively treated or affected as a result of the identity or expression.

Sec. 102. Section 23 of this act is hereby amended to read as follows:

Sec. 23. 1. In addition to any other requirements set forth in this chapter ~~f~~

~~—(a) An applicant for the issuance of a license as a licensed certified professional midwife or a permit as a student midwife in this State shall include the social security number of the applicant in the application submitted to the Division.~~

~~—(b) An~~ , *an* applicant for the issuance of a license as a licensed certified professional midwife or a permit as a certified professional midwife student midwife in this State shall submit to the Division of Public and Behavioral Health of the Department of Health and Human Services the statement prescribed by the Division of Welfare and Supportive Services of the Department of Health and Human Services pursuant to NRS 425.520. The statement must be completed and signed by the applicant.

1 2. The Division of Public and Behavioral Health of the Department of
2 Health and Human Services shall include the statement required pursuant to
3 subsection 1 in:

4 (a) The application or any other forms that must be submitted for the
5 issuance or renewal of the license or permit; or

6 (b) A separate form prescribed by the Division.

7 3. A license as a licensed certified professional midwife or a permit as
8 a certified professional midwife student midwife may not be issued or
9 renewed by the Division if the applicant:

10 (a) Fails to submit the statement required pursuant to subsection 1; or

11 (b) Indicates on the statement submitted pursuant to subsection 1 that
12 the applicant is subject to a court order for the support of a child and is not
13 in compliance with the order or a plan approved by the district attorney or
14 other public agency enforcing the order for the repayment of the amount
15 owed pursuant to the order.

16 4. If an applicant indicates on the statement submitted pursuant to
17 subsection 1 that the applicant is subject to a court order for the support of a
18 child and is not in compliance with the order or a plan approved by the
19 district attorney or other public agency enforcing the order for the
20 repayment of the amount owed pursuant to the order, the Division shall
21 advise the applicant to contact the district attorney or other public agency
22 enforcing the order to determine the actions that the applicant may take to
23 satisfy the arrearage.

24 **Sec. 103.** Section 27 of this act is hereby amended to read as follows:

25 Sec. 27. 1. Except as otherwise provided in subsections 4 and 5, a
26 licensed certified professional midwife must recommend and, with the
27 consent of the client, arrange for consultation or co-management with or
28 referral to a qualified provider of health care or transfer to an appropriate
29 medical facility if the licensed certified professional midwife determines
30 that any of the following conditions or symptoms exist:

31 (a) Complete placenta previa;

32 (b) Partial placenta previa after the 27th week of gestation;

33 (c) Infection with the human immunodeficiency virus;

34 (d) Cardiovascular disease;

35 (e) Severe mental illness that may cause the client to cause harm to
36 themselves or others;

37 (f) Pre-eclampsia or eclampsia;

38 (g) Fetal growth restriction, oligohydramnios or moderate or severe
39 polyhydramnios in the pregnancy;

40 (h) Potentially serious anatomic fetal abnormalities;

41 (i) Diabetes that requires insulin or other medication for management;

42 (j) Gestational age of greater than 43 weeks; or

43 (k) Any other condition or symptom which, in the judgment of the
44 licensed certified professional midwife, could threaten the life of the client
45 or the fetus or newborn infant of the client.

46 2. Except as otherwise provided in subsections 4 and 5, a licensed
47 certified professional midwife must recommend and, with the consent of
48 the client, arrange for consultation or co-management with or referral to a
49 qualified provider of health care if the licensed certified professional
50 midwife determines that any of the following conditions or symptoms exist:

51 (a) Prior cesarean section or other surgery resulting in a uterine scar;

52 (b) Multifetal gestation; or

53 (c) Non-cephalic presentation after 36 weeks of gestation.

1 3. A licensed certified professional midwife who recommends to a
2 client consultation, co-management, referral or transfer shall document in
3 the record of the client:

4 (a) The contents of the recommendation;

5 (b) The condition or symptom for which the recommendation was
6 made;

7 (c) Whether the client consented to the consultation, co-management,
8 referral or transfer; and

9 (d) If the client provides consent, the name, profession and specialty of
10 the provider of health care with whom the licensed certified professional
11 midwife consulted or co-managed or to whom the client was referred or the
12 medical facility to which the client was transferred.

13 4. A client may provide informed refusal to consent to consultation,
14 co-management, referral or transfer in writing on a form prescribed by the
15 Division. If a client provides informed refusal to consent to ~~§~~

16 ~~—(a) Consultation,]~~ **consultation**, co-management, referral or transfer
17 after the licensed certified professional midwife has determined that a
18 condition or symptom ~~[described in subsection 1]~~ exists ~~[, the]~~ **for which**
19 **consultation, co-management, referral or transfer is required by the**
20 **regulations adopted pursuant to section 18 of this act:**

21 (a) ~~The licensed certified professional midwife must [attempt to locate~~
22 ~~a qualified provider of health care for which the client consents to~~
23 ~~consultation, co management or referral or an appropriate medical facility~~
24 ~~for which the client consents to transfer. If the licensed certified~~
25 ~~professional midwife is unable to locate such a provider of health care who~~
26 ~~is willing to consult, co manage or accept the referral or such a medical~~
27 ~~facility which is willing to accept the transfer, the licensed certified~~
28 ~~professional midwife is]~~ **take any action required by those regulations;**

29 (b) **If the condition or symptom threatens the life or health of the**
30 **client, the fetus or the newborn child during labor or delivery, the**
31 **licensed certified professional midwife must call 911 and provide care**
32 **until relieved by a qualified provider of health care; and**

33 (c) **If the licensed certified professional midwife complies with**
34 **paragraphs (a) and (b), he or she is** not liable for any damages resulting
35 from the failure to consult, co-manage, refer or transfer. ~~[If the condition or~~
36 ~~symptom threatens the life or health of the client or the fetus or the~~
37 ~~newborn infant of the client during labor or delivery, the licensed certified~~
38 ~~professional midwife must call 911 and provide care until relieved by a~~
39 ~~qualified provider of health care.~~

40 ~~—(b) Consultation, co management or referral after the licensed certified~~
41 ~~professional midwife has determined that a condition or symptom described~~
42 ~~in subsection 2 exists, the licensed certified professional midwife:~~

43 ~~—(1) May continue to serve as the primary provider of health care~~
44 ~~for the client until the client provides such consent; and~~

45 ~~—(2) Is not liable for any damages resulting from the failure to~~
46 ~~consult, co manage or refer.]~~

47 5. If, after determining that a condition or symptom ~~[described in:~~

48 ~~—(a) Subsection 1]~~ exists **for which consultation, co-management,**
49 **referral or transfer is required by the regulations adopted pursuant to**
50 **section 18 of this act** and making a reasonable effort to ~~[arrange for~~
51 ~~consultation with, co management of the condition or symptom with or~~
52 ~~referral of the client to a qualified provider of health care or the transfer of~~
53 ~~the client to an appropriate medical facility,]~~ **comply with those**

1 *regulations*, a licensed certified professional midwife is unable to locate a
2 qualified provider of health care who is willing to consult, co-manage or
3 accept the referral or an appropriate medical facility willing to accept the
4 transfer, the licensed certified professional midwife shall be deemed to be
5 in compliance with the requirements of ~~[this section]~~ *those regulations* and
6 is not liable for any damages resulting from the inability of the licensed
7 certified professional midwife to consult, co-manage, refer or transfer. If
8 the condition or symptom threatens the life or health of the client or the
9 fetus or newborn infant of the client during labor or delivery, the licensed
10 certified professional midwife must call 911 and provide care until relieved
11 by a qualified provider of health care.

12 ~~[(b) Subsection 2 exists and making a reasonable effort to arrange for~~
13 ~~consultation with, co-management of the condition or symptom with or~~
14 ~~referral of the client to a qualified provider of health care, a licensed~~
15 ~~certified professional midwife is unable to locate a qualified provider of~~
16 ~~health care who is willing to consult, co-manage or accept the referral, the~~
17 ~~licensed certified professional midwife shall be deemed to be in compliance~~
18 ~~with the requirements of this section and is not liable for any damages~~
19 ~~resulting from the inability of the licensed certified professional midwife to~~
20 ~~arrange for consultation, co-manage or refer.]~~

21 6. A provider of health care who is not a licensed certified
22 professional midwife is not liable for any damages resulting from any act or
23 omission of a licensed certified professional midwife and is not required to
24 adhere to any standards of care governing the practice of certified
25 professional midwifery. Such a provider of health care is only liable for the
26 damages resulting from his or her own acts or omissions in accordance with
27 the standards of care governing his or her profession.

28 **Sec. 104.** As soon as practicable on or after the effective date of this section,
29 but not later than 6 months after receiving the recommendations of the
30 Collaboration and Transfer Guidelines ~~[Working Group]~~ Workgroup created
31 pursuant to section 105 of this act, the Board of Licensed Certified Professional
32 Midwives created by section 16 of this act shall adopt the regulations required by
33 paragraph (g) of subsection 1 of section 18 of this act. In adopting the regulations,
34 the Board shall consider the measures necessary to minimize the likelihood of
35 serious harm to the client and the fetus or newborn infant of the client.

36 **Sec. 105.** 1. The Collaboration and Transfer Guidelines ~~[Working Group]~~
37 Workgroup is hereby created.

38 2. The Administrator of the Division of Public and Behavioral Health of the
39 Department of Health and Human Services shall appoint to the ~~[Working Group:]~~
40 Workgroup:

41 (a) One voting member who is a physician who practices in the area of
42 obstetrics or a certified nurse-midwife in Northern Nevada;

43 (b) One voting member who is a physician who practices in the area of
44 obstetrics or a certified nurse-midwife in Southern Nevada;

45 (c) One voting member who is a nurse manager of a labor and delivery ward or
46 a registered nurse with similar duties who is responsible for coordinating transfers
47 of pregnant women from a home or birth center to a hospital and who practices in
48 Northern Nevada;

49 (d) One voting member who is a nurse manager of a labor and delivery ward or
50 a registered nurse with similar duties who is responsible for coordinating transfers
51 of pregnant women from a home or birth center to a hospital and who practices in
52 Southern Nevada;

1 (e) One voting member who represents a provider of emergency medical
2 services in Northern Nevada;

3 (f) One voting member who represents a provider of emergency medical
4 services in Southern Nevada; and

5 (g) One nonvoting member to serve as a liaison with the State Board of Health.

6 3. The Nevada Chapter of the National Association of Certified Professional
7 Midwives, or its successor organization, shall appoint to the ~~{Working Group}~~
8 Workgroup four voting members who are midwives who practice in Nevada. To
9 the extent practicable, two of those members must practice in Northern Nevada and
10 two of those members must practice in Southern Nevada.

11 4. The Nevada Hospital Association, or its successor organization, may
12 appoint to the ~~{Working Group}~~ Workgroup one member who is a representative
13 of that organization.

14 5. A vacancy on the ~~{Working Group}~~ Workgroup must be filled in the same
15 manner as the initial appointment.

16 6. Members of the ~~{Working Group}~~ Workgroup serve without
17 compensation and are not entitled to receive the per diem allowance and travel
18 expenses provided for state officers and employees generally.

19 7. A member of the ~~{Working Group}~~ Workgroup who is an officer or
20 employee of this State or a political subdivision of this State must be relieved from
21 his or her duties without loss of regular compensation to prepare for and attend
22 meetings of the ~~{Working Group}~~ Workgroup and perform any work necessary to
23 carry out the duties of the ~~{Working Group}~~ Workgroup in the most timely manner
24 practicable. A state agency or political subdivision of this State shall not require an
25 officer or employee who is a member of the ~~{Working Group}~~ Workgroup to:

26 (a) Make up the time he or she is absent from work to carry out his or her
27 duties as a member of the ~~{Working Group}~~ Workgroup; or

28 (b) Take annual leave or compensatory time for the absence.

29 8. The ~~{Working Group}~~ Workgroup may divide into one subcommittee of
30 members from Northern Nevada and one subcommittee of members from Southern
31 Nevada.

32 9. A majority of the voting members of the ~~{Working Group}~~ Workgroup or
33 a subcommittee thereof constitutes a quorum for the transaction of business, and a
34 majority of a quorum present at any meeting is sufficient for any official action
35 taken by the ~~{Working Group}~~ Workgroup or a subcommittee thereof.

36 10. The ~~{Working Group}~~ Workgroup and each subcommittee thereof shall:

37 (a) At its first meeting and annually thereafter, elect a Chair from among its
38 members; and

39 (b) Meet at the call of the Chair.

40 11. Not later than July 1, 2022, the ~~{Working Group}~~ Workgroup or, if the
41 ~~{Working Group}~~ Workgroup divides into subcommittees pursuant to subsection
42 8, each subcommittee of the ~~{Working Group}~~ Workgroup, shall make
43 recommendations to the Board of Licensed Certified Professional Midwives created
44 by section 16 of this act concerning the regulations required by paragraph (g) of
45 subsection 1 of section 18 of this act governing the transfer of the client of a
46 licensed certified professional midwife to a medical facility. Those
47 recommendations must, to the extent practicable, be guided upon peer-reviewed
48 scientific evidence and widely accepted best practices and include, without
49 limitation, provisions for the transmission of all information necessary for the care
50 of the client from the licensed certified professional midwife to the medical facility.
51 The ~~{Working Group}~~ Workgroup ceases to exist upon submission of those
52 recommendations unless the Board requests that the ~~{Working Group}~~ Workgroup
53 continue to meet.

12. As used in this section:

(a) "Certified nurse-midwife" means an advanced practice registered nurse who is certified as a nurse-midwife by the American Midwifery Certification Board, or its successor organization.

(b) "Licensed certified professional midwife" means a person who is certified as a certified professional midwife by the North American Registry of Midwives.

(c) "Medical facility" has the meaning ascribed to it in NRS 449.0151.

~~(c) "Midwife" means a person who is certified as a certified professional midwife by the North American Registry of Midwives.~~

(d) "Northern Nevada" means Carson City and the counties of Churchill, Elko, Eureka, Douglas, Humboldt, Lander, Lyon, Pershing, Storey, Washoe and White Pine.

(e) "Southern Nevada" means the counties of Clark, Esmeralda, Lincoln, Mineral and Nye.

Sec. 106. ~~[1. Notwithstanding any provision of this act to the contrary, any person who is engaging in the practice of midwifery as:~~

~~(a) A midwife on or before January 1, 2022, may continue to do so until July 1, 2022, without complying with the requirements of subsection 2 of section 15 of this act or obtaining a license as a licensed certified professional midwife.~~

~~(b) A student midwife under the supervision of a preceptor described in paragraph (a) on or before January 1, 2022, may continue to do so until July 1, 2022, without complying with the requirements of subsection 2 of section 15 of this act or obtaining a permit as a student midwife pursuant to section 21 of this act.~~

~~2.]~~ Notwithstanding the provisions of section 16 of this act, on or before July 1, 2022, the Administrator of the Division of Public and Behavioral Health of the Department of Health and Human Services may appoint to the Board of Licensed Certified Professional Midwives created by that section four members pursuant to paragraph (a) of subsection 2 of that section who are not licensed pursuant to section 19 or 20 of this act and are certified as midwives by the North American Registry of Midwives, or its successor organization. If such a member is not licensed as a licensed certified professional midwife pursuant to section 19 or 20 of this act on July 1, 2022:

~~(a)]~~ 1. His or her term ends on that date; and

~~(b)]~~ 2. The Administrator shall appoint a person who is so licensed to fill the vacancy.

Sec. 107. 1. This section and sections 104 and 105 of this act become effective upon passage and approval.

2. Sections 1 to 99, inclusive, and 106 of this act become effective:

(a) Upon passage and approval for the purpose of appointing the members of the Board of Licensed Certified Professional Midwives, adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and

(b) On January 1, 2022, for all other purposes.

3. Sections 100 and 101 of this act become effective on January 1, ~~2024.]~~ 2025.

4. Section 102 of this act becomes effective on the date on which the provisions of 42 U.S.C. § 666 requiring each state to establish procedures under which the state has authority to withhold or suspend, or to restrict the use of professional, occupational and recreational licenses of persons who:

(a) Have failed to comply with a subpoena or warrant relating to a proceeding to determine the paternity of a child or to establish or enforce an obligation for the support of a child; or

1 (b) Are in arrears in the payment for the support of one or more children,
2 ➤ are repealed by the Congress of the United States.

3 5. Section 103 of this act becomes effective on the date on which the
4 regulations described in section 104 of this act become effective.

5 6. Section 33 of this act expires by limitation on the date on which the
6 provisions of 42 U.S.C. § 666 requiring each state to establish procedures under
7 which the state has authority to withhold or suspend, or to restrict the use of
8 professional, occupational and recreational licenses of persons who:

9 (a) Have failed to comply with a subpoena or warrant relating to a proceeding
10 to determine the paternity of a child or to establish or enforce an obligation for the
11 support of a child; or

12 (b) Are in arrears in the payment for the support of one or more children,
13 ➤ are repealed by the Congress of the United States.

14 7. Sections 23, 29 and 102 of this act expire by limitation on the date 2 years
15 after the date on which the provisions of 42 U.S.C. § 666 requiring each state to
16 establish procedures under which the state has authority to withhold or suspend, or
17 to restrict the use of professional, occupational and recreational licenses of persons
18 who:

19 (a) Have failed to comply with a subpoena or warrant relating to a proceeding
20 to determine the paternity of a child or to establish or enforce an obligation for the
21 support of a child; or

22 (b) Are in arrears in the payment for the support of one or more children,
23 ➤ are repealed by the Congress of the United States.