

Amendment No. 841

Senate Amendment to Assembly Bill No. 387 Second Reprint (BDR 54-225)
Proposed by: Senate Committee on Finance
Amends: Summary: No Title: No Preamble: No Joint Sponsorship: No Digest: No

Adoption of this amendment will MAINTAIN the 2/3s majority vote requirement for final passage of A.B. 387 R2 (§§ 19, 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.

EWR/BJF



Date: 5/30/2021

A.B. No. 387—Revises provisions relating to midwives. (BDR 54-225)



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; 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 bill
9 exempts other providers of health care from requirements governing the licensure and

10 regulation of licensed certified professional midwives. **Sections 36, 38, 39 and 42-44** of this
11 bill similarly exempt licensed certified professional midwives and certified professional
12 midwife student midwives from provisions governing certain other providers of health care.
13 Licensed certified professional midwives and certified professional midwife student midwives
14 would also be exempt from provisions governing allopathic physicians. (NRS 630.047)
15 **Section 15.5** of this bill authorizes the Division to accept gifts, grants and donations to pay the
16 costs of performing its duties under the provisions of this bill.

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

31 **Section 19** of this bill prescribes the requirements for the issuance of a license as a
32 licensed certified professional midwife. **Section 101** of this bill revises the requirements for
33 the issuance of a license as a licensed certified professional midwife on January 1, 2025.
34 **Section 22** of this bill: (1) authorizes a licensed certified professional midwife to utilize a
35 certified professional midwife birth assistant to perform certain simple, routine medical tasks;
36 and (2) prescribes the required training for a certified professional midwife birth assistant.

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

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

55 Existing law authorizes only certain practitioners who are licensed in this State and
56 registered with the State Board of Pharmacy to prescribe drugs and devices. (NRS 639.235,
57 639.23505) **Sections 26, 40, 41 and 76** of this bill authorize a licensed certified professional
58 midwife to: (1) order, possess and administer certain drugs, devices, chemicals and solutions;
59 and (2) order certain devices and vaccines for a client. **Sections 22, 24 and 77** of this bill
60 authorize a certified professional midwife birth assistant or certified professional midwife
61 student midwife to administer certain drugs, devices, chemicals and solutions under the direct
62 supervision of a licensed certified professional midwife or in certain emergency situations.

63 **Section 27** of this bill imposes specific requirements concerning the management of a
64 client who is at a moderate or high risk of an adverse outcome, and **section 103** of this bill
65 revises some of those requirements on the effective date of regulations adopted by the Board
66 of Licensed Certified Professional Midwives to replace those requirements. **Section 105** of
67 this bill creates the Collaboration and Transfer Guidelines Workgroup to make
68 recommendations to the Board for regulations governing the transfer of such a client to a

69 medical facility. **Section 27** also exempts: (1) a licensed certified professional midwife from
70 liability resulting from the informed refusal of such a client to consent to consultation, co-
71 management with or referral to another provider of health care or transfer to a medical facility
72 or the inability of the licensed certified professional midwife to arrange for such consultation
73 or carry out such co-management, referral or transfer; and (2) other providers of health care
74 from liability for the actions or omissions of a licensed certified professional midwife.

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

77 **Section 30** of this bill: (1) requires the Division to maintain certain records of
78 proceedings relating to licensing, disciplinary actions and investigations; and (2) declares
79 certain records to be confidential and certain other records to be public. **Section 57** of this bill
80 makes a conforming change to clarify that confidential records of the Division are not public
81 records. **Section 31** of this bill prohibits a person who does not hold a license as a licensed
82 certified professional midwife from representing that he or she is licensed to engage in the
83 practice of certified professional midwifery. **Section 31** allows a person to represent that he or
84 she is licensed to engage in the practice of certified professional midwifery if the person is
85 licensed in another district, state or territory of the United States and the person discloses that
86 license to the public. **Section 31** also prohibits a certified professional midwife student
87 midwife from: (1) engaging in midwifery in circumstances other than those authorized by this
88 bill; or (2) representing that he or she is qualified to engage in the practice of certified
89 professional midwifery without supervision. **Section 31** authorizes the Division to, when it
90 has reason to believe or has received complaints that a person has repeatedly violated the
91 provisions of **section 31**, certify the facts to the Attorney General, or other appropriate law
92 enforcement officer, who may, in his or her discretion, cause appropriate proceedings to be
93 brought. **Section 32** of this bill authorizes the Division or the Attorney General to seek an
94 injunction against any person violating any provision of **sections 2-32**.

95 Existing law defines the term "provider of health care" as a person who practices any of
96 certain professions related to the provision of health care. (NRS 629.031) Existing law
97 imposes certain requirements upon providers of health care, including requirements for
98 billing, standards for advertisements and criminal penalties for acquiring certain debts. (NRS
99 629.071, 629.076, 629.078) **Section 35** of this bill includes licensed certified professional
100 midwives in the definition of "provider of health care," thereby subjecting licensed certified
101 professional midwives to those requirements. **Section 75** of this bill makes a conforming
102 change to clarify that licensed certified professional midwives are providers of health care.
103 **Section 37** of this bill requires a licensed certified professional midwife to report misconduct
104 by a person licensed or certified by the State Board of Nursing to the Executive Director of
105 the Board.

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

114 Existing law provides that, in any civil action concerning any unwelcome or
115 nonconsensual sexual conduct, there is a rebuttable presumption that the sexual conduct was
116 unwelcome or nonconsensual if the alleged perpetrator was a person in a position of authority
117 over the alleged victim. (NRS 41.138) **Section 47** of this bill provides that a licensed certified
118 professional midwife, certified professional midwife student midwife or certified professional
119 midwife birth assistant is a person of authority for that purpose.

120 **Sections 46, 50-54, 63, 64, 66-75 and 78-99** of this bill make revisions to treat licensed
121 certified professional midwives similarly to other providers of health care in certain respects.
122 **Section 65** of this bill requires Medicaid to cover the services of a licensed certified
123 professional midwife and provide reimbursement for such services at comparable rates to
124 other providers of health care who provide similar services. **Section 56** of this bill makes a
125 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 4 to 14, inclusive, of this act have the*
6 *meanings ascribed to them in those sections.*

7 **Sec. 3.** (Deleted by amendment.)

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

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

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

13 2. *Licensed as an advanced practice registered nurse pursuant to NRS*
14 *632.237.*

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

18 **Sec. 5.7.** *“Certified professional midwife student midwife” means a person*
19 *who performs midwifery under the direct supervision of a preceptor pursuant to*
20 *section 24 of this act.*

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

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

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

28 **Sec. 9.** *“Licensed certified professional midwife” means a person licensed*
29 *as a licensed certified professional midwife pursuant to section 19 of this act.*

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

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

37 **Sec. 12.** *“Provider of health care” has the meaning ascribed to it in NRS*
38 *629.031.*

39 **Sec. 13.** *“Refer” means a licensed certified professional midwife arranging*
40 *for another provider of health care to assume primary responsibility for*
41 *managing a condition or symptom.*

42 **Sec. 14.** (Deleted by amendment.)

43 **Sec. 15.** 1. *Except as otherwise provided in this section and sections 22*
44 *and 27 of this act, the provisions of this chapter do not apply to a person who*
45 *holds a license, certificate or other credential issued pursuant to chapters 630 to*
46 *641C, inclusive, of NRS and is practicing within the scope of authority authorized*
47 *by that license, certificate or other credential. For the purposes of this subsection,*
48 *a certified nurse-midwife shall be deemed to be practicing within the scope of*

1 *authority authorized by his or her license as an advanced practice registered*
2 *nurse.*

3 *2. This chapter does not prohibit:*

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

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

6 **Sec. 15.5.** *The Division may accept gifts, grants and donations to pay the*
7 *costs of performing its duties under the provisions of this chapter.*

8 **Sec. 16.** *1. The Board of Licensed Certified Professional Midwives is*
9 *hereby created.*

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

11 *(a) Four voting members who are licensed certified professional midwives*
12 *currently practicing in this State;*

13 *(b) One voting member who is an advanced practice registered nurse,*
14 *certified nurse-midwife or physician currently practicing in the area of obstetrics*
15 *in this State;*

16 *(c) One voting member who is a provider of health care, other than a*
17 *provider of health care described in paragraph (a) or (b), who is currently*
18 *providing neonatal or pediatric care in this State;*

19 *(d) Two voting members who are representatives of the general public and*
20 *who have received care from a licensed certified professional midwife; and*

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

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

23 *4. The Administrator of the Division:*

24 *(a) May solicit nominations for appointment to the Board from interested*
25 *persons and entities.*

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

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

31 *(a) Reappoint a member at the expiration of his or her term; or*

32 *(b) Terminate a member before the expiration of his or her term for cause.*

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

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

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

41 *2. The Board shall:*

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

44 *(b) Meet annually at the call of the Chair; and*

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

47 *3. To the extent that money is available, the Board may meet more*
48 *frequently than required by paragraph (b) of subsection 2.*

49 *4. To the extent practicable, any advice or recommendations made by the*
50 *Board concerning the practice of certified professional midwifery must be guided*
51 *by current, peer-reviewed scientific research.*

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

4 **(a) A list of programs of training for certified professional midwife birth**
5 **assistants approved by the Board. The Division shall post the list on an Internet**
6 **website maintained by the Division.**

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

9 **(1) The period for which a license is valid, which must not exceed 2**
10 **years.**

11 **(2) A requirement that an applicant for the renewal of a license must**
12 **have completed continuing education in cultural humility or the elimination of**
13 **racism or bias.**

14 **(c) The procedure for filing a complaint with the Division concerning a**
15 **licensed certified professional midwife or certified professional midwife student**
16 **midwife.**

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

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

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

24 **(g) Regulations concerning the management by a licensed certified**
25 **professional midwife of a client who may have a condition that puts the client at a**
26 **moderate or high risk of an adverse outcome for the client or the fetus or**
27 **newborn infant of the client. The regulations must, to the extent practicable, be**
28 **guided by current, peer-reviewed scientific research and must include, without**
29 **limitation:**

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

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

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

37 **(I) The circumstances under which a licensed certified professional**
38 **midwife must arrange for the client to consult with another provider of health**
39 **care, co-manage the care of the client with another provider of health care, refer**
40 **primary responsibility for the care of a client to another provider of health care**
41 **or transfer the care of the client to a medical facility, procedures for such**
42 **consultation, co-management, referral or transfer and requirements to ensure**
43 **that a provider of health care who is consulted, with whom a client's condition or**
44 **symptom is co-managed or to whom primary responsibility for the care of a client**
45 **is referred is appropriately qualified; and**

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

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

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

3 (j) *Administrative penalties that the Division may impose upon a certified*
4 *professional midwife student midwife who engages in the practice of certified*
5 *professional midwifery without a preceptor.*

6 (k) *Any other requirements necessary to optimize obstetrical and neonatal*
7 *outcomes for clients of licensed certified professional midwives.*

8 2. *The Board may, by regulation, require an applicant for a license as a*
9 *licensed certified professional midwife to submit to the Division a complete set of*
10 *his or her fingerprints and written permission authorizing the Division to forward*
11 *the fingerprints to the Central Repository for Nevada Records of Criminal*
12 *History for submission to the Federal Bureau of Investigation for its report.*

13 **Sec. 19.** *1. An applicant for a license as a licensed certified professional*
14 *midwife must submit to the Division an application pursuant to this section in the*
15 *form prescribed by the Division. The application must be accompanied by a fee in*
16 *the amount prescribed by regulation of the State Board of Health pursuant to*
17 *NRS 439.150, which must not exceed \$1,000. The application must include,*
18 *without limitation, proof that the applicant is certified as a midwife by the North*
19 *American Registry of Midwives, or its successor organization, and:*

20 (a) *Has completed an educational program accredited by the Midwifery*
21 *Education Accreditation Council, or its successor organization; or*

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

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

28 (a) *Be accompanied by a renewal fee in the amount prescribed by regulation*
29 *of the State Board of Health pursuant to NRS 439.150, which must not exceed*
30 *\$1,000; and*

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

33 3. *To the extent that the implementation of such provisions will leave the*
34 *Division with sufficient money to carry out its duties under this chapter, the State*
35 *Board of Health shall establish by regulation a procedure through which:*

36 (a) *An applicant may petition the Division to reduce the fees imposed*
37 *pursuant to this section. An applicant may qualify for such a reduction if the*
38 *applicant demonstrates, to the satisfaction of the Division, that the fees imposed*
39 *pursuant to this section are an economic hardship on the applicant.*

40 (b) *The Division allocates a portion of the fees imposed and collected*
41 *pursuant to this section to programs that promote applicants from marginalized*
42 *identities through increasing the numbers of such applicants and reducing*
43 *barriers that such applicants face.*

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

48 **Sec. 20.** (Deleted by amendment.)

49 **Sec. 21.** (Deleted by amendment.)

50 **Sec. 22.** *1. A licensed certified professional midwife may utilize a certified*
51 *professional midwife birth assistant to perform the tasks and procedures*
52 *authorized by subsection 3. Except as otherwise provided in subsection 2, a*
53 *certified professional midwife birth assistant, including, without limitation, a*

1 *provider of health care serving as a certified professional midwife birth assistant,*
2 *must:*

3 (a) *Be at least 18 years of age;*

4 (b) *Have completed a program of training for certified professional midwife*
5 *birth assistants on the list of programs approved by the Board pursuant to*
6 *paragraph (a) of subsection 1 of section 18 of this act;*

7 (c) *Have completed training in cultural humility or the elimination of racism*
8 *or bias;*

9 (d) *Have completed training in the techniques of administering neonatal*
10 *resuscitation provided through the Neonatal Resuscitation Program of the*
11 *American Academy of Pediatrics, or any successor to that program; and*

12 (e) *Hold current certification in the techniques of administering*
13 *cardiopulmonary resuscitation.*

14 2. *A certified professional midwife birth assistant who is a licensed certified*
15 *professional midwife or who is a certified nurse-midwife is not required to*
16 *possess the qualifications set forth in subsection 1.*

17 3. *Except as otherwise provided in subsection 4, a certified professional*
18 *midwife birth assistant may perform routine clinical tasks and procedures only*
19 *under the direct supervision of a licensed certified professional midwife who is*
20 *present on the premises and able to intervene if necessary. Such tasks include,*
21 *without limitation:*

22 (a) *Administering medications, including, without limitation and to the*
23 *extent applicable, any medication described in subsection 2 of section 26 of this*
24 *act, intradermally, subcutaneously and intramuscularly and performing skin*
25 *tests;*

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

29 (c) *Administering oxygen;*

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

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

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

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

35 (h) *Checking vital signs.*

36 4. *A certified professional midwife birth assistant may provide any*
37 *necessary assistance in an emergency or when birth is imminent if his or her*
38 *supervising licensed certified professional midwife is not present. If a certified*
39 *professional midwife birth assistant provides such assistance without supervision,*
40 *the certified professional midwife birth assistant must contact a provider of*
41 *emergency medical services to provide further assistance.*

42 5. *A certified professional midwife birth assistant shall not assess clinical*
43 *information or make clinical decisions.*

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

45 (a) *An applicant for the issuance of a license as a licensed certified*
46 *professional midwife in this State shall include the social security number of the*
47 *applicant in the application submitted to the Division.*

48 (b) *An applicant for the issuance of a license as a licensed certified*
49 *professional midwife in this State shall submit to the Division of Public and*
50 *Behavioral Health of the Department of Health and Human Services the*
51 *statement prescribed by the Division of Welfare and Supportive Services of the*
52 *Department of Health and Human Services pursuant to NRS 425.520. The*
53 *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*

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

7 3. *A license as a licensed certified professional midwife may not be issued*
8 *or renewed by the Division if the applicant:*

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

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

15 4. *If an applicant indicates on the statement submitted pursuant to*
16 *subsection 1 that the applicant is subject to a court order for the support of a*
17 *child and is not in compliance with the order or a plan approved by the district*
18 *attorney or other public agency enforcing the order for the repayment of the*
19 *amount owed pursuant to the order, the Division shall advise the applicant to*
20 *contact the district attorney or other public agency enforcing the order to*
21 *determine the actions that the applicant may take to satisfy the arrearage.*

22 **Sec. 24.** *1. Except as otherwise provided in subsection 5, a certified*
23 *professional midwife student midwife may engage in the practice of certified*
24 *professional midwifery, including, without limitation, by using or administering*
25 *any drug, vaccine, device, chemical or solution described in subsection 1, 2 or 3*
26 *of section 26 of this act, only under the direct supervision of a preceptor who is*
27 *present on the premises and able to intervene if necessary. The preceptor is*
28 *responsible for each client to whom the certified professional midwife student*
29 *midwife provides midwifery services.*

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

33 3. *A preceptor shall:*

34 (a) *Notify each client that a certified professional midwife student midwife*
35 *may be involved in the care of the client;*

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

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

41 4. *If the preceptor of a certified professional midwife student midwife*
42 *ceases to serve as his or her preceptor and the certified professional midwife*
43 *student midwife has no additional preceptor, the certified professional midwife*
44 *student midwife must cease engaging in the practice of certified professional*
45 *midwifery.*

46 5. *A certified professional midwife student midwife may provide any*
47 *necessary assistance in an emergency or when birth is imminent if his or her*
48 *preceptor is not present. If a certified professional midwife student midwife needs*
49 *to provide such assistance and his or her preceptor is not present, the certified*
50 *professional midwife student midwife must contact a provider of emergency*
51 *medical services to provide further assistance.*

52 **Sec. 25.** *Upon accepting a client:*

1 1. Any midwife, including, without limitation, a licensed certified
2 professional midwife and a certified nurse-midwife, shall provide the client with a
3 Community Birth Disclosure. The Community Birth Disclosure must inform the
4 client regarding:

- 5 (a) The type of midwife that the midwife is;
6 (b) The level of education that the midwife has received; and
7 (c) The care to be provided by the midwife.

8 ↪ The Board shall create the Community Birth Disclosure in collaboration with
9 all types of midwives practicing in this State.

10 2. A midwife must sign and date, and obtain the signature of the client with
11 a notation of the date of the signature upon, the Community Birth Disclosure
12 provided pursuant to subsection 1. The midwife shall retain a copy of the
13 Community Birth Disclosure for 5 years.

14 3. In addition to providing the Community Birth Disclosure pursuant to
15 subsection 1, a licensed certified professional midwife shall obtain from the client
16 informed written consent regarding the care to be provided by the licensed
17 certified professional midwife. Informed written consent requires that the
18 licensed certified professional midwife provide to the client:

19 (a) A description of the educational background and credentials of the
20 licensed certified professional midwife;

21 (b) A description of the practice of certified professional midwifery as set
22 forth in section 11 of this act and the limitations on the practice of a licensed
23 certified professional midwife;

24 (c) Instructions for obtaining a copy of the provisions of sections 2 to 32,
25 inclusive, of this act and the regulations adopted pursuant to section 18 of this
26 act;

27 (d) Instructions for filing a complaint with the Division in accordance with
28 the regulations adopted pursuant to section 18 of this act;

29 (e) A description of the actions that the licensed certified professional
30 midwife will take in an emergency, including, without limitation, the conditions
31 under which the licensed certified professional midwife will recommend the
32 transfer of the client to a medical facility and the procedure that the licensed
33 certified professional midwife will follow when making such a transfer;

34 (f) A description of the procedures that will be used during the birth in the
35 client's chosen setting, the risks and benefits of birth in that setting and the
36 conditions that may arise during delivery;

37 (g) A disclosure of whether the licensed certified professional midwife holds
38 liability insurance;

39 (h) A summary of the provisions of section 27 of this act and the regulations
40 adopted pursuant to section 18 of this act governing consultation, co-
41 management, referral and transfer and a description of the procedures
42 established by the licensed certified professional midwife for consultation, co-
43 management, referral and transfer; and

44 (i) Any other information required by regulation of the Board.

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

47 (a) Dopplers, syringes, needles, phlebotomy equipment, sutures, urinary
48 catheters, intravenous equipment, amnihooks, airway suction devices, electronic
49 fetal monitors, tocodynamometer monitors, equipment for administering oxygen,
50 glucose monitoring systems and testing strips, neonatal and adult oximetry
51 equipment, centrifuges and equipment for conducting screenings of hearing
52 ability;

1 (b) *Equipment for administering nitrous oxide, including, without limitation,*
2 *scavenging systems, only in an obstetric center licensed pursuant to chapter 449*
3 *of NRS;*

4 (c) *Neonatal and adult resuscitation equipment, including, without*
5 *limitation, airway devices; and*

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

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

8 (a) *Oxytocin, misoprostol, methylergonovine, tranexamic acid, lidocaine,*
9 *penicillin, ampicillin, cefazolin, clindamycin, epinephrine, diphenhydramine,*
10 *ondansetron, phylloquinone, erythromycin ointment, terbutaline and nitrous*
11 *oxide;*

12 (b) *Influenza vaccine, hepatitis B vaccine, COVID-19 vaccine and*
13 *diphtheria, tetanus and pertussis vaccine;*

14 (c) *Rho (D) immune globulin and hepatitis B immune globulin; and*

15 (d) *Any other drugs or vaccines authorized by regulation of the Board.*

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

17 (a) *Oxygen, lactated Ringers solution, 5 percent dextrose in lactated Ringers*
18 *solution, 0.9 percent sodium chloride solution and sterile water; and*

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

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

21 (a) *Breast pumps, compression stockings and belts, maternity belts,*
22 *diaphragms, cervical caps, glucometers, glucose testing strips, iron supplements*
23 *and prenatal vitamins; and*

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

25 **Sec. 27. 1.** *Except as otherwise provided in subsections 4 and 5, a*
26 *licensed certified professional midwife must recommend and, with the consent of*
27 *the client, arrange for consultation or co-management with or referral to a*
28 *qualified provider of health care or transfer to an appropriate medical facility if*
29 *the licensed certified professional midwife determines that any of the following*
30 *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 licensed*
44 *certified professional midwife, could threaten the life of the client or the fetus or*
45 *newborn infant of the client.*

46 2. *Except as otherwise provided in subsections 4 and 5, a licensed certified*
47 *professional midwife must recommend and, with the consent of the client,*
48 *arrange for consultation or co-management with or referral to a qualified*
49 *provider of health care if the licensed certified professional midwife determines*
50 *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 client
2 consultation, co-management, referral or transfer shall document in the record
3 of the client:

4 (a) The contents of the recommendation;

5 (b) The condition or symptom for which the recommendation was made;

6 (c) Whether the client consented to the consultation, co-management,
7 referral or transfer; and

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

12 4. A client may provide informed refusal to consent to consultation, co-
13 management, referral or transfer in writing on a form prescribed by the Board. If
14 a client provides informed refusal to consent to:

15 (a) Consultation, co-management, referral or transfer after the licensed
16 certified professional midwife has determined that a condition or symptom
17 described in subsection 1 exists, the licensed certified professional midwife must
18 attempt to locate a qualified provider of health care for which the client consents
19 to consultation, co-management or referral or an appropriate medical facility for
20 which the client consents to transfer. If the licensed certified professional
21 midwife is unable to locate such a provider of health care who is willing to
22 consult, co-manage or accept the referral or such a medical facility which is
23 willing to accept the transfer, the licensed certified professional midwife is not
24 liable for any damages resulting from the failure to consult, co-manage, refer or
25 transfer. If the condition or symptom threatens the life or health of the client or
26 the fetus or the newborn infant of the client during labor or delivery, the licensed
27 certified professional midwife must call 911 and provide care until relieved by a
28 qualified provider of health care.

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

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

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

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

37 (a) Subsection 1 exists and making a reasonable effort to arrange for
38 consultation with, co-management of the condition or symptom with or referral
39 of the client to a qualified provider of health care or the transfer of the client to
40 an appropriate medical facility, a licensed certified professional midwife is
41 unable to locate a qualified provider of health care who is willing to consult, co-
42 manage or accept the referral or an appropriate medical facility willing to accept
43 the transfer, the licensed certified professional midwife shall be deemed to be in
44 compliance with the requirements of this section and is not liable for any
45 damages resulting from the inability of the licensed certified professional midwife
46 to consult, co-manage, refer or transfer. If the condition or symptom threatens
47 the life or health of the client or the fetus or newborn infant of the client during
48 labor or delivery, the licensed certified professional midwife must call 911 and
49 provide care until relieved by a qualified provider of health care.

50 (b) Subsection 2 exists and making a reasonable effort to arrange for
51 consultation with, co-management of the condition or symptom with or referral
52 of the client to a qualified provider of health care, a licensed certified
53 professional midwife is unable to locate a qualified provider of health care who is

1 willing to consult, co-manage or accept the referral, the licensed certified
2 professional midwife shall be deemed to be in compliance with the requirements
3 of this section and is not liable for any damages resulting from the inability of the
4 licensed certified professional midwife to arrange for consultation, co-manage or
5 refer.

6 6. A provider of health care who is not a licensed certified professional
7 midwife is not liable for any damages resulting from any act or omission of a
8 licensed certified professional midwife and is not required to adhere to any
9 standards of care governing the practice of certified professional midwifery. Such
10 a provider of health care is only liable for the damages resulting from his or her
11 own acts or omissions in accordance with the standards of care governing his or
12 her profession.

13 **Sec. 28. 1.** With each application for the renewal of his or her license, a
14 licensed certified professional midwife shall submit to the Division a report that
15 includes, for the immediately preceding licensure period:

16 (a) The total number of clients who, when accepted by the licensed certified
17 professional midwife as clients, intended to deliver their babies outside of a
18 hospital;

19 (b) The number of live births attended by the licensed certified professional
20 midwife outside of a hospital;

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

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

26 (e) A brief description of any complications resulting in maternal or infant
27 morbidity or mortality;

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

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

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

33 **Sec. 29. 1.** If the Division receives a copy of a court order issued pursuant
34 to NRS 425.540 that provides for the suspension of all professional, occupational
35 and recreational licenses, certificates and permits issued to a person who is the
36 holder of a license issued pursuant to this chapter, the Division shall deem the
37 license issued to that person to be suspended at the end of the 30th day after the
38 date on which the court order was issued unless the Division receives a letter
39 issued to the holder of the license by the district attorney or other public agency
40 pursuant to NRS 425.550 stating that the holder of the license has complied with
41 the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560.

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

44 (a) The Division receives a letter issued by the district attorney or other
45 public agency pursuant to NRS 425.550 to the person whose license was
46 suspended stating that the person whose license was suspended has complied with
47 the subpoena or warrant or has satisfied the arrearage pursuant to NRS 425.560;
48 and

49 (b) The person whose license was suspended pays the appropriate fee
50 required pursuant to this chapter.

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

1 2. *Except as otherwise provided in this section and NRS 239.0115, a*
2 *complaint filed with the Division, all documents and other information filed with*
3 *the complaint and all documents and other information compiled as a result of*
4 *an investigation conducted to determine whether to initiate disciplinary action*
5 *against a person are confidential and privileged.*

6 3. *A complaint or other document filed by the Division to initiate*
7 *disciplinary action, any written opinion rendered by the Division and all*
8 *documents and information considered by the Division when determining*
9 *whether to impose discipline are public records.*

10 4. *An order that imposes discipline and the findings of fact and conclusions*
11 *of law supporting that order are public records.*

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

16 **Sec. 31.** 1. *Except as otherwise provided in subsection 2, a person who is*
17 *not licensed as a licensed certified professional midwife or a person whose license*
18 *as a licensed certified professional midwife has been suspended or revoked by the*
19 *Division shall not:*

20 (a) *Use in connection with his or her name the words “licensed certified*
21 *professional midwife,” “licensed midwife” or any other letters, words or insignia*
22 *indicating or implying that he or she is licensed to engage in the practice of*
23 *certified professional midwifery, or in any other way, orally, or in writing or*
24 *print, or by sign, directly or by implication, represent himself or herself as*
25 *licensed to engage in the practice of certified professional midwifery in this State;*
26 *or*

27 (b) *List or cause to have listed in any directory, including, without limitation,*
28 *a telephone directory, his or her name or the name of his or her company under*
29 *the heading “licensed certified professional midwife,” “licensed midwife” or any*
30 *other term that indicates or implies that he or she is licensed to engage in the*
31 *practice of certified professional midwifery in this State.*

32 2. *A person who is not licensed as a licensed certified professional midwife*
33 *or a person whose license as a licensed certified professional midwife has been*
34 *suspended or revoked by the Division may use or list the words or headings*
35 *described in paragraph (a) or (b) of subsection 1 if the person is licensed in the*
36 *District of Columbia or any state or territory of the United States. If the person*
37 *uses or lists the words or headings pursuant to this section, the person shall*
38 *disclose the district, state or territory, as applicable, in which he or she is*
39 *licensed.*

40 3. *A person who is licensed as a licensed certified professional midwife and*
41 *who is also licensed in the District of Columbia or any state or territory of the*
42 *United States shall disclose each additional district, state or territory, as*
43 *applicable, in which he or she is currently licensed or has ever been licensed in*
44 *all circumstances described in paragraphs (a) and (b) of subsection 1.*

45 4. *A certified professional midwife student midwife shall not:*

46 (a) *Engage in midwifery except in circumstances authorized by this chapter;*
47 *or*

48 (b) *Use in connection with his or her name the words “licensed certified*
49 *professional midwife,” “certified professional midwife,” “licensed midwife” or*
50 *any other letters, words or insignia indicating or implying that he or she is*
51 *licensed to engage in the practice of certified professional midwifery without*
52 *supervision, or in any other way, orally, or in writing or print, or by sign, directly*

1 *or by implication, represent himself or herself as licensed to engage in the*
2 *practice of certified professional midwifery without supervision in this State.*

3 *5. A person or entity shall not operate a program of training for certified*
4 *professional midwife birth assistants or advertise or otherwise represent that the*
5 *person or entity is authorized to operate such a program unless the program is*
6 *included on the list of programs approved by the Board pursuant to paragraph*
7 *(a) of subsection 1 of section 18 of this act.*

8 *6. If the Division has reason to believe that a person has repeatedly violated*
9 *any provision of this section or the Division has received complaints that a person*
10 *has repeatedly violated any provision of this section, the Division may certify the*
11 *facts to the Attorney General, or other appropriate enforcement officer, who may,*
12 *in his or her discretion, cause appropriate proceedings to be brought.*

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

16 *2. Such an injunction:*

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

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

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

22 622.238 1. The Legislature hereby finds and declares that:

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

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

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

31 3. Notwithstanding the provisions of NRS 623.225, 623A.185, 624.268,
32 625.387, 625A.105, 628.0345, 628B.320, 630.197, 630A.246, 631.225, 632.3446,
33 633.307, 634.095, 634A.115, 635.056, 636.159, 637.113, 637B.166, 638.103,
34 639.129, 640.095, 640A.145, 640B.340, 640C.430, 640D.120, 640E.200, 641.175,
35 641A.215, 641B.206, 641C.280, 642.0195, 643.095, 644A.485, 645.358,
36 645A.025, 645B.023, 645B.420, 645C.295, 645C.655, 645D.195, 645E.210,
37 645G.110, 645H.550, 648.085, 649.233, 652.075, 653.550, 654.145, 655.075 and
38 656.155, **and section 23 of this act**, an applicant for a license who does not have a
39 social security number must provide an alternative personally identifying number,
40 including, without limitation, his or her individual taxpayer identification number,
41 when completing an application for a license.

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

46 (a) Tax purposes;

47 (b) Licensing purposes; and

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

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

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

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

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

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

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

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

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

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

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

24 (b) ~~Has~~ *Except as otherwise provided in this paragraph, has* been in practice
25 for at least the 5 years immediately preceding the date on which the person submits
26 an application for the issuance of a license pursuant to a reciprocal agreement
27 entered into pursuant to subsection 1. *If the person seeks to practice as a licensed*
28 *certified professional midwife in this State pursuant to sections 2 to 32, inclusive,*
29 *of this act, the person must have been in practice for at least the 3 years*
30 *immediately preceding the date on which the person submits an application for*
31 *the issuance of a license pursuant to a reciprocal agreement entered into*
32 *pursuant to subsection 1.*

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

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

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

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

42 (g) Submits to the applicable regulatory body the statement required by NRS
43 425.520.

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

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

52 629.031 Except as otherwise provided by a specific statute:

53 1. "Provider of health care" means:

- 1 (a) A physician licensed pursuant to chapter 630, 630A or 633 of NRS;
- 2 (b) A physician assistant;
- 3 (c) A dentist;
- 4 (d) A licensed nurse;
- 5 (e) A person who holds a license as an attendant or who is certified as an
- 6 emergency medical technician, advanced emergency medical technician or
- 7 paramedic pursuant to chapter 450B of NRS;
- 8 (f) A dispensing optician;
- 9 (g) An optometrist;
- 10 (h) A speech-language pathologist;
- 11 (i) An audiologist;
- 12 (j) A practitioner of respiratory care;
- 13 (k) A licensed physical therapist;
- 14 (l) An occupational therapist;
- 15 (m) A podiatric physician;
- 16 (n) A licensed psychologist;
- 17 (o) A licensed marriage and family therapist;
- 18 (p) A licensed clinical professional counselor;
- 19 (q) A music therapist;
- 20 (r) A chiropractor;
- 21 (s) An athletic trainer;
- 22 (t) A perfusionist;
- 23 (u) A doctor of Oriental medicine in any form;
- 24 (v) A medical laboratory director or technician;
- 25 (w) A pharmacist;
- 26 (x) A licensed dietitian;
- 27 (y) An associate in social work, a social worker, an independent social worker
- 28 or a clinical social worker licensed pursuant to chapter 641B of NRS;
- 29 (z) An alcohol and drug counselor or a problem gambling counselor who is
- 30 certified pursuant to chapter 641C of NRS;
- 31 (aa) An alcohol and drug counselor or a clinical alcohol and drug counselor
- 32 who is licensed pursuant to chapter 641C of NRS; ~~or~~
- 33 (bb) *A licensed certified professional midwife; or*
- 34 (cc) A medical facility as the employer of any person specified in this
- 35 subsection.

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

- 37 (a) A person who holds a license or certificate issued pursuant to chapter 631
- 38 of NRS; and
- 39 (b) A person who holds a current license or certificate to practice his or her
- 40 respective discipline pursuant to the applicable provisions of law of another state or
- 41 territory of the United States.

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

43 630A.090 1. This chapter does not apply to:

- 44 (a) The practice of dentistry, chiropractic, Oriental medicine, podiatry,
- 45 optometry, perfusion, respiratory care, faith or Christian Science healing, nursing,
- 46 *certified professional midwifery*, veterinary medicine or fitting hearing aids.
- 47 (b) A medical officer of the Armed Forces or a medical officer of any division
- 48 or department of the United States in the discharge of his or her official duties,
- 49 including, without limitation, providing medical care in a hospital in accordance
- 50 with an agreement entered into pursuant to NRS 449.2455.
- 51 (c) Licensed or certified nurses in the discharge of their duties as nurses.

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

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

6 3. This chapter does not prohibit:

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

8 (b) The domestic administration of family remedies.

9 4. This chapter does not authorize a homeopathic physician to practice
10 medicine, including allopathic medicine, except as otherwise provided in NRS
11 630A.040.

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

13 632.472 1. The following persons shall report in writing to the Executive
14 Director of the Board any conduct of a licensee or holder of a certificate which
15 constitutes a violation of the provisions of this chapter:

16 (a) Any physician, dentist, dental hygienist, *licensed certified professional*
17 *midwife*, chiropractor, optometrist, podiatric physician, medical examiner, resident,
18 intern, professional or practical nurse, nursing assistant, medication aide - certified,
19 perfusionist, physician assistant licensed pursuant to chapter 630 or 633 of NRS,
20 psychiatrist, psychologist, marriage and family therapist, clinical professional
21 counselor, alcohol or drug counselor, music therapist, holder of a license or limited
22 license issued pursuant to chapter 653 of NRS, driver of an ambulance, paramedic
23 or other person providing medical services licensed or certified to practice in this
24 State.

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

29 (c) A coroner.

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

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

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

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

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

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

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

45 (k) Any social worker.

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

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

51 2. Every physician who, as a member of the staff of a medical facility or
52 facility for the dependent, has reason to believe that a nursing assistant or
53 medication aide - certified has engaged in conduct which constitutes grounds for

1 the denial, suspension or revocation of a certificate shall notify the superintendent,
2 manager or other person in charge of the facility. The superintendent, manager or
3 other person in charge shall make a report as required in subsection 1.

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

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

8 5. As used in this section:

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

11 (b) "Community health worker pool" has the meaning ascribed to it in NRS
12 449.0028.

13 (c) "Peer support recovery organization" has the meaning ascribed to it in NRS
14 449.01563.

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

16 633.171 1. This chapter does not apply to:

17 (a) The practice of medicine or perfusion pursuant to chapter 630 of NRS,
18 dentistry, chiropractic, podiatry, optometry, respiratory care, faith or Christian
19 Science healing, nursing, *certified professional midwifery*, veterinary medicine or
20 fitting hearing aids.

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

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

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

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

33 3. This chapter does not prohibit:

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

35 (b) The domestic administration of family remedies.

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

37 637B.080 The provisions of this chapter do not apply to any person who:

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

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

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

47 4. Holds a current license issued pursuant to chapters 630 to 637, inclusive,
48 640 to 641C, inclusive, or 653 of NRS ~~§~~ *or sections 2 to 32, inclusive, of this act,*
49 and who does not engage in the private practice of audiology or speech-language
50 pathology in this State.

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

52 639.0125 "Practitioner" means:

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

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

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

8 4. A physician assistant who:

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

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

13 5. A physician assistant who:

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

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

18 6. An optometrist who is certified by the Nevada State Board of Optometry to
19 prescribe and administer pharmaceutical agents pursuant to NRS 636.288, when the
20 optometrist prescribes or administers pharmaceutical agents within the scope of his
21 or her certification ~~for~~; or

22 7. *A licensed certified professional midwife, for the purpose of ordering:*

23 (a) *Any device or drug described in subsection 1 or 2 of section 26 of this act*
24 *for use in his or her practice in accordance with the provisions of that section*
25 *and any regulations adopted pursuant to section 18 of this act; and*

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

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

29 639.23505 ~~for~~

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

34 ~~for~~ (a) Unless the practitioner first applies for and obtains a certificate from
35 the Board and pays the required fee; and

36 ~~for~~ (b) Issues a written prescription.

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

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

42 640A.070 This chapter does not apply to a person:

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

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

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

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

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

2 640B.145 The provisions of this chapter do not apply to:

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

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

8 3. A person who is temporarily exempt from licensure pursuant to NRS
9 640B.335 and is practicing athletic training within the scope of the exemption.

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

11 640C.100 1. The provisions of this chapter do not apply to:

12 (a) A person licensed pursuant to chapter 630, 630A, 631, 632, 633, 634,
13 634A, 635, 640, 640A or 640B of NRS *or sections 2 to 32, inclusive, of this act* if
14 the massage therapy, reflexology or structural integration is performed in the course
15 of the practice for which the person is licensed.

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

20 (c) A person licensed or registered as an esthetician, esthetician's apprentice,
21 hair designer, hair designer's apprentice, hair braider, shampoo technologist,
22 cosmetologist or cosmetologist's apprentice pursuant to chapter 644A of NRS if the
23 person is massaging, cleansing or stimulating the scalp, face, neck or skin within
24 the permissible scope of practice for an esthetician, esthetician's apprentice, hair
25 designer, hair designer's apprentice, hair braider, shampoo technologist,
26 cosmetologist or cosmetologist's apprentice pursuant to that chapter.

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

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

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

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

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

39 2. Except as otherwise provided in subsection 3 and NRS 640C.330, the
40 provisions of this chapter preempt the licensure and regulation of a massage
41 therapist, reflexologist or structural integration practitioner by a county, city or
42 town, including, without limitation, conducting a criminal background investigation
43 and examination of a massage therapist, reflexologist or structural integration
44 practitioner or applicant for a license to practice massage therapy, reflexology or
45 structural integration.

46 3. The provisions of this chapter do not prohibit a county, city or town from
47 requiring a massage therapist, reflexologist or structural integration practitioner to
48 obtain a license or permit to transact business within the jurisdiction of the county,
49 city or town, if the license or permit is required of other persons, regardless of
50 occupation or profession, who transact business within the jurisdiction of the
51 county, city or town.

1 4. As used in this section, “immediate family” means persons who are related
2 by blood, adoption or marriage, within the second degree of consanguinity or
3 affinity.

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

6 *Except as otherwise expressly provided in a particular statute or required by*
7 *the context, “licensed certified professional midwife” means a person licensed as*
8 *a licensed certified professional midwife pursuant to section 19 of this act.*

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

10 7.095 1. An attorney shall not contract for or collect a fee contingent on the
11 amount of recovery for representing a person seeking damages in connection with
12 an action for injury or death against a provider of health care based upon
13 professional negligence in excess of:

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

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

20 3. For the purposes of this section, “recovered” means the net sum recovered
21 by the plaintiff after deducting any disbursements or costs incurred in connection
22 with the prosecution or settlement of the claim. Costs of medical care incurred by
23 the plaintiff and general and administrative expenses incurred by the office of the
24 attorney are not deductible disbursements or costs.

25 4. As used in this section:

26 (a) “Professional negligence” means a negligent act or omission to act by a
27 provider of health care in the rendering of professional services, which act or
28 omission is the proximate cause of a personal injury or wrongful death. The term
29 does not include services that are outside the scope of services for which the
30 provider of health care is licensed or services for which any restriction has been
31 imposed by the applicable regulatory board or health care facility.

32 (b) “Provider of health care” means a physician licensed under chapter 630 or
33 633 of NRS, dentist, registered nurse, *licensed certified professional midwife*,
34 dispensing optician, optometrist, registered physical therapist, podiatric physician,
35 licensed psychologist, chiropractor, doctor of Oriental medicine, holder of a license
36 or a limited license issued under the provisions of chapter 653 of NRS, medical
37 laboratory director or technician, licensed dietitian or a licensed hospital and its
38 employees.

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

40 41.138 1. In any civil action concerning any unwelcome or nonconsensual
41 sexual conduct, including, without limitation, sexual harassment, there is a
42 rebuttable presumption that the sexual conduct was unwelcome or nonconsensual if
43 the alleged perpetrator was a person in a position of authority over the alleged
44 victim.

45 2. As used in this section:

46 (a) “Person in a position of authority” means a parent, relative, household
47 member, employer, supervisor, youth leader, scout leader, coach, mentor in a
48 mentoring program, teacher, professor, counselor, school administrator, religious
49 leader, doctor, nurse, *licensed certified professional midwife, certified professional*
50 *midwife student midwife, certified professional midwife birth assistant*,
51 psychologist, other health care provider, guardian ad litem, guardian, babysitter,
52 police officer or other law enforcement officer or any other person who, by reason

1 of his or her position, is able to exercise significant or undue influence over the
2 victim.

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

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

5 41.505 1. Any person licensed under the provisions of chapter 630, 632 or
6 633 of NRS *or sections 2 to 32, inclusive, of this act* and any person who holds an
7 equivalent license issued by another state, who renders emergency care or
8 assistance, including, without limitation, emergency obstetrical care or assistance,
9 in an emergency, gratuitously and in good faith, is not liable for any civil damages
10 as a result of any act or omission, not amounting to gross negligence, by that person
11 in rendering the emergency care or assistance or as a result of any failure to act, not
12 amounting to gross negligence, to provide or arrange for further medical treatment
13 for the injured or ill person. This section does not excuse a physician, physician
14 assistant, ~~or~~ nurse *or licensed certified professional midwife* from liability for
15 damages resulting from that person's acts or omissions which occur in a licensed
16 medical facility relative to any person with whom there is a preexisting relationship
17 as a patient.

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

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

22 (b) Gratuitously and in good faith, renders medical care within the scope of
23 that person's license to an indigent person,
24 is not liable for any civil damages as a result of any act or omission by that
25 person, not amounting to gross negligence or reckless, willful or wanton conduct, in
26 rendering that care.

27 3. Any person licensed to practice medicine under the provisions of chapter
28 630 or 633 of NRS or licensed to practice dentistry under the provisions of chapter
29 631 of NRS who renders care or assistance to a patient for a governmental entity or
30 a nonprofit organization is not liable for any civil damages as a result of any act or
31 omission by that person in rendering that care or assistance if the care or assistance
32 is rendered gratuitously, in good faith and in a manner not amounting to gross
33 negligence or reckless, willful or wanton conduct.

34 4. As used in this section, "gratuitously" has the meaning ascribed to it in
35 NRS 41.500.

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

37 41.506 1. Any person licensed under the provisions of chapter 630, 632 or
38 633 of NRS *or sections 2 to 32, inclusive, of this act* and any person who holds an
39 equivalent license issued by another state who renders emergency obstetrical care
40 or assistance to a pregnant woman during labor or the delivery of the child is not
41 liable for any civil damages as a result of any act or omission by that person in
42 rendering that care or assistance if:

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

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

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

49 2. A licensed medical facility in which such care or assistance is rendered is
50 not liable for any civil damages as a result of any act or omission by the person in
51 rendering that care or assistance if that person is not liable for any civil damages
52 pursuant to subsection 1 and the actions of the medical facility relating to the

1 rendering of that care or assistance do not amount to gross negligence or reckless,
2 willful or wanton conduct.

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

4 41A.017 "Provider of health care" means a physician licensed pursuant to
5 chapter 630 or 633 of NRS, physician assistant, dentist, licensed nurse, *licensed*
6 *certified professional midwife*, dispensing optician, optometrist, registered physical
7 therapist, podiatric physician, licensed psychologist, chiropractor, doctor of
8 Oriental medicine, holder of a license or a limited license issued under the
9 provisions of chapter 653 of NRS, medical laboratory director or technician,
10 licensed dietitian or a licensed hospital, clinic, surgery center, physicians'
11 professional corporation or group practice that employs any such person and its
12 employees.

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

14 42.021 1. In an action for injury or death against a provider of health care
15 based upon professional negligence, if the defendant so elects, the defendant may
16 introduce evidence of any amount payable as a benefit to the plaintiff as a result of
17 the injury or death pursuant to the United States Social Security Act, any state or
18 federal income disability or worker's compensation act, any health, sickness or
19 income-disability insurance, accident insurance that provides health benefits or
20 income-disability coverage, and any contract or agreement of any group,
21 organization, partnership or corporation to provide, pay for or reimburse the cost of
22 medical, hospital, dental or other health care services. If the defendant elects to
23 introduce such evidence, the plaintiff may introduce evidence of any amount that
24 the plaintiff has paid or contributed to secure the plaintiff's right to any insurance
25 benefits concerning which the defendant has introduced evidence.

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

- 27 (a) Recover any amount against the plaintiff; or
28 (b) Be subrogated to the rights of the plaintiff against a defendant.

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

34 4. In entering a judgment ordering the payment of future damages by periodic
35 payments pursuant to subsection 3, the court shall make a specific finding as to the
36 dollar amount of periodic payments that will compensate the judgment creditor for
37 such future damages. As a condition to authorizing periodic payments of future
38 damages, the court shall require a judgment debtor who is not adequately insured to
39 post security adequate to assure full payment of such damages awarded by the
40 judgment. Upon termination of periodic payments of future damages, the court
41 shall order the return of this security, or so much as remains, to the judgment
42 debtor.

43 5. A judgment ordering the payment of future damages by periodic payments
44 entered pursuant to subsection 3 must specify the recipient or recipients of the
45 payments, the dollar amount of the payments, the interval between payments, and
46 the number of payments or the period of time over which payments will be made.
47 Such payments must only be subject to modification in the event of the death of the
48 judgment creditor. Money damages awarded for loss of future earnings must not be
49 reduced or payments terminated by reason of the death of the judgment creditor, but
50 must be paid to persons to whom the judgment creditor owed a duty of support, as
51 provided by law, immediately before the judgment creditor's death. In such cases,
52 the court that rendered the original judgment may, upon petition of any party in

1 interest, modify the judgment to award and apportion the unpaid future damages in
2 accordance with this subsection.

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

9 7. Following the occurrence or expiration of all obligations specified in the
10 periodic payment judgment, any obligation of the judgment debtor to make further
11 payments ceases and any security given pursuant to subsection 4 reverts to the
12 judgment debtor.

13 8. As used in this section:

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

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

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

25 (d) "Provider of health care" means a physician licensed under chapter 630 or
26 633 of NRS, dentist, licensed nurse, *licensed certified professional midwife*,
27 dispensing optician, optometrist, registered physical therapist, podiatric physician,
28 licensed psychologist, chiropractor, doctor of Oriental medicine, holder of a license
29 or a limited license issued under the provisions of chapter 653 of NRS, medical
30 laboratory director or technician, licensed dietitian or a licensed hospital and its
31 employees.

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

33 52.320 As used in NRS 52.320 to 52.375, inclusive, unless the context
34 otherwise requires:

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

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

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

43 200.5093 1. Any person who is described in subsection 4 and who, in a
44 professional or occupational capacity, knows or has reasonable cause to believe that
45 an older person or vulnerable person has been abused, neglected, exploited, isolated
46 or abandoned shall:

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

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

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

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

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

5 2. If a person who is required to make a report pursuant to subsection 1 knows
6 or has reasonable cause to believe that the abuse, neglect, exploitation, isolation or
7 abandonment of the older person or vulnerable person involves an act or omission
8 of the Aging and Disability Services Division, another division of the Department
9 of Health and Human Services or a law enforcement agency, the person shall make
10 the report to an agency other than the one alleged to have committed the act or
11 omission.

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

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

16 (a) Every physician, dentist, dental hygienist, chiropractor, optometrist,
17 podiatric physician, medical examiner, resident, intern, professional or practical
18 nurse, physician assistant licensed pursuant to chapter 630 or 633 of NRS, *licensed*
19 *certified professional midwife*, perfusionist, psychiatrist, psychologist, marriage
20 and family therapist, clinical professional counselor, clinical alcohol and drug
21 counselor, alcohol and drug counselor, music therapist, athletic trainer, driver of an
22 ambulance, paramedic, licensed dietitian, holder of a license or a limited license
23 issued under the provisions of chapter 653 of NRS or other person providing
24 medical services licensed or certified to practice in this State, who examines,
25 attends or treats an older person or vulnerable person who appears to have been
26 abused, neglected, exploited, isolated or abandoned.

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

32 (c) A coroner.

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

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

37 (f) Every person who operates, who is employed by or who contracts to
38 provide services for an intermediary service organization as defined in NRS
39 449.4304.

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

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

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

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

52 (k) Every social worker.

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

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

3 (n) Every person who operates or is employed by a community health worker
4 pool, as defined in NRS 449.0028, or with whom a community health worker pool
5 contracts to provide the services of a community health worker, as defined in NRS
6 449.0027.

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

8 6. If a person who is required to make a report pursuant to subsection 1 knows
9 or has reasonable cause to believe that an older person or vulnerable person has
10 died as a result of abuse, neglect, isolation or abandonment, the person shall, as
11 soon as reasonably practicable, report this belief to the appropriate medical
12 examiner or coroner, who shall investigate the cause of death of the older person or
13 vulnerable person and submit to the appropriate local law enforcement agencies, the
14 appropriate prosecuting attorney, the Aging and Disability Services Division of the
15 Department of Health and Human Services and the Unit for the Investigation and
16 Prosecution of Crimes his or her written findings. The written findings must include
17 the information required pursuant to the provisions of NRS 200.5094, when
18 possible.

19 7. A division, office or department which receives a report pursuant to this
20 section shall cause the investigation of the report to commence within 3 working
21 days. A copy of the final report of the investigation conducted by a division, office
22 or department, other than the Aging and Disability Services Division of the
23 Department of Health and Human Services, must be forwarded within 30 days after
24 the completion of the report to the:

25 (a) Aging and Disability Services Division;

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

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

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

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

37 10. As used in this section, "Unit for the Investigation and Prosecution of
38 Crimes" means the Unit for the Investigation and Prosecution of Crimes Against
39 Older Persons or Vulnerable Persons in the Office of the Attorney General created
40 pursuant to NRS 228.265.

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

42 200.5095 1. Reports made pursuant to NRS 200.5093 and 200.5094, and
43 records and investigations relating to those reports, are confidential.

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

48 (a) Pursuant to a criminal prosecution;

49 (b) Pursuant to NRS 200.50982; or

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

52 3. Except as otherwise provided in subsection 2 and NRS 200.50982, data or
53 information concerning the reports and investigations of the abuse, neglect,

1 exploitation, isolation or abandonment of an older person or a vulnerable person is
2 available only to:

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

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

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

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

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

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

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

17 (h) A legal guardian of the older person or vulnerable person, if the identity of
18 the person who was responsible for reporting the alleged abuse, neglect,
19 exploitation, isolation or abandonment of the older person or vulnerable person to
20 the public agency is protected, and the legal guardian of the older person or
21 vulnerable person is not the person suspected of such abuse, neglect, exploitation,
22 isolation or abandonment;

23 (i) If the older person or vulnerable person is deceased, the executor or
24 administrator of his or her estate, if the identity of the person who was responsible
25 for reporting the alleged abuse, neglect, exploitation, isolation or abandonment of
26 the older person or vulnerable person to the public agency is protected, and the
27 executor or administrator is not the person suspected of such abuse, neglect,
28 exploitation, isolation or abandonment;

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

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

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

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

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

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

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

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

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

52 218G.400 1. Except as otherwise provided in subsection 2, each board
53 created by the provisions of NRS 590.485 and chapters 623 to 625A, inclusive,

1 628, 630 to 644A, inclusive, *and sections 2 to 32, inclusive, of this act*, 648, 654
2 and 656 of NRS shall:

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

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

20 2. In lieu of preparing a balance sheet or having an audit conducted for a
21 single fiscal year, a board may engage the services of a certified public accountant
22 or public accountant, or firm of either of such accountants, to audit all its fiscal
23 records for a period covering two successive fiscal years. If such an audit is
24 conducted, the board shall file the report of the audit with the Legislative Auditor
25 and the Chief of the Budget Division of the Office of Finance on or before
26 December 1 following the end of the second fiscal year.

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

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

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

39 (a) Is responsible for preparing a balance sheet or having an audit conducted
40 pursuant to this section or is responsible for preparing or maintaining the fiscal
41 records that are necessary to prepare a balance sheet or have an audit conducted
42 pursuant to this section; and

43 (b) Knowingly fails to prepare the balance sheet or have the audit conducted
44 pursuant to this section or knowingly fails to prepare or maintain the fiscal records
45 that are necessary to prepare a balance sheet or have an audit conducted pursuant to
46 this section.

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

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

2 232.320 1. The Director:

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

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

11 (b) Shall administer, through the divisions of the Department, the provisions of
12 chapters 63, 424, 425, 427A, 432A to 442, inclusive, 446 to 450, inclusive, 458A
13 and 656A of NRS, NRS 127.220 to 127.310, inclusive, 422.001 to 422.410,
14 inclusive, *and section 65 of this act*, 422.580, 432.010 to 432.133, inclusive,
15 432B.6201 to 432B.626, inclusive, 444.002 to 444.430, inclusive, and 445A.010 to
16 445A.055, inclusive, and all other provisions of law relating to the functions of the
17 divisions of the Department, but is not responsible for the clinical activities of the
18 Division of Public and Behavioral Health or the professional line activities of the
19 other divisions.

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

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

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

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

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

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

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

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

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

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

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

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

239.010 1. Except as otherwise provided in this section and NRS 1.4683, 1.4687, 1A.110, 3.2203, 41.071, 49.095, 49.293, 62D.420, 62D.440, 62E.516, 62E.620, 62H.025, 62H.030, 62H.170, 62H.220, 62H.320, 75A.100, 75A.150, 76.160, 78.152, 80.113, 81.850, 82.183, 86.246, 86.54615, 87.515, 87.5413, 87A.200, 87A.580, 87A.640, 88.3355, 88.5927, 88.6067, 88A.345, 88A.7345, 89.045, 89.251, 90.730, 91.160, 116.757, 116A.270, 116B.880, 118B.026, 119.260, 119.265, 119.267, 119.280, 119A.280, 119A.653, 119A.677, 119B.370, 119B.382, 120A.690, 125.130, 125B.140, 126.141, 126.161, 126.163, 126.730, 127.007, 127.057, 127.130, 127.140, 127.2817, 128.090, 130.312, 130.712, 136.050, 159.044, 159A.044, 172.075, 172.245, 176.01249, 176.015, 176.0625, 176.09129, 176.156, 176A.630, 178.39801, 178.4715, 178.5691, 179.495, 179A.070, 179A.165, 179D.160, 200.3771, 200.3772, 200.5095, 200.604, 202.3662, 205.4651, 209.392, 209.3923, 209.3925, 209.419, 209.429, 209.521, 211A.140, 213.010, 213.040, 213.095, 213.131, 217.105, 217.110, 217.464, 217.475, 218A.350, 218E.625, 218F.150, 218G.130, 218G.240, 218G.350, 226.300, 228.270, 228.450, 228.495, 228.570, 231.069, 231.1473, 233.190, 232.300, 239.0105, 239.0113, 239.014, 239B.030, 239B.040, 239B.050, 239C.140, 239C.210, 239C.230, 239C.250, 239C.270, 239C.420, 240.007, 241.020, 241.030, 241.039, 242.105, 244.264, 244.335, 247.540, 247.550, 247.560, 250.087, 250.130, 250.140, 250.150, 268.095, 268.0978, 268.490, 268.910, 269.174, 271A.105, 281.195, 281.805, 281A.350, 281A.680, 281A.685, 281A.750, 281A.755, 281A.780, 284.4068, 286.110, 286.118, 287.0438, 289.025, 289.080, 289.387, 289.830, 293.4855, 293.5002, 293.503, 293.504, 293.558, 293.5757, 293.870, 293.906, 293.908, 293.910, 293B.135, 293D.510, 331.110, 332.061, 332.351, 333.333, 333.335, 338.070, 338.1379, 338.1593, 338.1725, 338.1727, 348.420, 349.597, 349.775, 353.205, 353A.049, 353A.085, 353A.100, 353C.240, 360.240, 360.247, 360.255, 360.755, 361.044, 361.2242, 361.610, 365.138, 366.160, 368A.180, 370.257, 370.327, 372A.080, 378.290, 378.300, 379.0075, 379.008, 379.1495, 385A.830, 385B.100, 387.626, 387.631, 388.1455, 388.259, 388.501, 388.503, 388.513, 388.750, 388A.247, 388A.249, 391.033, 391.035, 391.0365, 391.120, 391.925, 392.029, 392.147, 392.264, 392.271, 392.315, 392.317, 392.325, 392.327, 392.335, 392.850, 393.045, 394.167, 394.16975, 394.1698, 394.447, 394.460, 394.465, 396.3295, 396.405, 396.525, 396.535, 396.9685, 398A.115, 408.3885, 408.3886, 408.3888, 408.5484, 412.153, 414.280, 416.070, 422.2749, 422.305, 422A.342, 422A.350, 425.400, 427A.1236, 427A.872, 432.028, 432.205, 432B.175, 432B.280, 432B.290, 432B.407, 432B.430, 432B.560, 432B.5902, 432C.140, 432C.150, 433.534, 433A.360, 437.145, 437.207, 439.4941, 439.840, 439.914, 439B.420, 439B.754, 439B.760, 440.170, 441A.195, 441A.220, 441A.230, 442.330, 442.395, 442.735, 442.774, 445A.665, 445B.570, 445B.7773, 447.345, 449.209, 449.245, 449.4315, 449A.112, 450.140, 450B.188, 453.164, 453.720, 453A.610, 453A.700, 458.055, 458.280, 459.050, 459.3866, 459.555, 459.7056, 459.846, 463.120, 463.15993, 463.240, 463.3403, 463.3407, 463.790, 467.1005, 480.535, 480.545, 480.935, 480.940, 481.063, 481.091, 481.093, 482.170, 482.5536, 483.340, 483.363, 483.575, 483.659, 483.800, 484A.469, 484E.070, 485.316, 501.344, 503.452, 522.040, 534A.031, 561.285, 571.160, 584.655, 587.877, 598.0964, 598.098, 598A.110, 599B.090, 603.070, 603A.210, 604A.303, 604A.710, 612.265, 616B.012, 616B.015, 616B.315, 616B.350, 618.341, 618.425, 622.238, 622.310, 623.131, 623A.137, 624.110, 624.265, 624.327, 625.425, 625A.185, 628.418, 628B.230, 628B.760, 629.047, 629.069, 630.133, 630.2673, 630.30665, 630.336, 630A.555, 631.368, 632.121, 632.125, 632.3415, 632.405, 633.283, 633.301, 633.4715, 633.524, 634.055, 634.214, 634A.185, 635.158, 636.107, 637.085, 637B.288, 638.087, 638.089, 639.2485,

1 639.570, 640.075, 640A.220, 640B.730, 640C.580, 640C.600, 640C.620,
2 640C.745, 640C.760, 640D.190, 640E.340, 641.090, 641.221, 641.325, 641A.191,
3 641A.262, 641A.289, 641B.170, 641B.282, 641B.460, 641C.760, 641C.800,
4 642.524, 643.189, 644A.870, 645.180, 645.625, 645A.050, 645A.082, 645B.060,
5 645B.092, 645C.220, 645C.225, 645D.130, 645D.135, 645G.510, 645H.320,
6 645H.330, 647.0945, 647.0947, 648.033, 648.197, 649.065, 649.067, 652.228,
7 653.900, 654.110, 656.105, 657A.510, 661.115, 665.130, 665.133, 669.275,
8 669.285, 669A.310, 671.170, 673.450, 673.480, 675.380, 676A.340, 676A.370,
9 677.243, 678A.470, 678C.710, 678C.800, 679B.122, 679B.124, 679B.152,
10 679B.159, 679B.190, 679B.285, 679B.690, 680A.270, 681A.440, 681B.260,
11 681B.410, 681B.540, 683A.0873, 685A.077, 686A.289, 686B.170, 686C.306,
12 687A.110, 687A.115, 687C.010, 688C.230, 688C.480, 688C.490, 689A.696,
13 692A.117, 692C.190, 692C.3507, 692C.3536, 692C.3538, 692C.354, 692C.420,
14 693A.480, 693A.615, 696B.550, 696C.120, 703.196, 704B.325, 706.1725,
15 706A.230, 710.159, 711.600, **and section 30 of this act**, sections 35, 38 and 41 of
16 chapter 478, Statutes of Nevada 2011 and section 2 of chapter 391, Statutes of
17 Nevada 2013 and unless otherwise declared by law to be confidential, all public
18 books and public records of a governmental entity must be open at all times during
19 office hours to inspection by any person, and may be fully copied or an abstract or
20 memorandum may be prepared from those public books and public records. Any
21 such copies, abstracts or memoranda may be used to supply the general public with
22 copies, abstracts or memoranda of the records or may be used in any other way to
23 the advantage of the governmental entity or of the general public. This section does
24 not supersede or in any manner affect the federal laws governing copyrights or
25 enlarge, diminish or affect in any other manner the rights of a person in any written
26 book or record which is copyrighted pursuant to federal law.

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

29 3. A governmental entity that has legal custody or control of a public book or
30 record shall not deny a request made pursuant to subsection 1 to inspect or copy or
31 receive a copy of a public book or record on the basis that the requested public
32 book or record contains information that is confidential if the governmental entity
33 can redact, delete, conceal or separate, including, without limitation, electronically,
34 the confidential information from the information included in the public book or
35 record that is not otherwise confidential.

36 4. If requested, a governmental entity shall provide a copy of a public record
37 in an electronic format by means of an electronic medium. Nothing in this
38 subsection requires a governmental entity to provide a copy of a public record in an
39 electronic format or by means of an electronic medium if:

- 40 (a) The public record:
 - 41 (1) Was not created or prepared in an electronic format; and
 - 42 (2) Is not available in an electronic format; or
- 43 (b) Providing the public record in an electronic format or by means of an
44 electronic medium would:
 - 45 (1) Give access to proprietary software; or
 - 46 (2) Require the production of information that is confidential and that
47 cannot be redacted, deleted, concealed or separated from information that is not
48 otherwise confidential.

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

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

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

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

5 284.013 1. Except as otherwise provided in subsection 4, this chapter does
6 not apply to:

7 (a) Agencies, bureaus, commissions, officers or personnel in the Legislative
8 Department or the Judicial Department of State Government, including the
9 Commission on Judicial Discipline;

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

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

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

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

26 4. Any board, commission, committee or council created in chapters 445C,
27 590, 623 to 625A, inclusive, 628, 630 to 644A, inclusive, 648, 652, 654 and 656 of
28 NRS which contracts for the services of a person, shall require the contract for
29 those services to be in writing. The contract must be approved by the State Board of
30 Examiners before those services may be provided.

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

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

37 353.005 Except as otherwise provided in NRS 353.007, the provisions of this
38 chapter do not apply to boards created by the provisions of NRS 590.485 and
39 chapters 623 to 625A, inclusive, 628, 630 to 644A, inclusive, *and sections 2 to 32,*
40 *inclusive, of this act*, 648, 654 and 656 of NRS and the officers and employees of
41 those boards.

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

43 353A.020 1. The Director, in consultation with the Committee and
44 Legislative Auditor, shall adopt a uniform system of internal accounting and
45 administrative control for agencies. The elements of the system must include,
46 without limitation:

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

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

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

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

3 (e) An effective system of internal review.

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

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

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

9 (a) A board created by the provisions of NRS 590.485 and chapters 623 to
10 625A, inclusive, 628, 630 to 644A, inclusive, *and sections 2 to 32, inclusive, of*
11 *this act*, 648, 654 and 656 of NRS.

12 (b) The Nevada System of Higher Education.

13 (c) The Public Employees' Retirement System.

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

15 (e) The Colorado River Commission of Nevada.

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

17 353A.025 1. The head of each agency shall periodically review the agency's
18 system of internal accounting and administrative control to determine whether it is
19 in compliance with the uniform system of internal accounting and administrative
20 control for agencies adopted pursuant to subsection 1 of NRS 353A.020.

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

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

27 (a) A board created by the provisions of NRS 590.485 and chapters 623 to
28 625A, inclusive, 628, 630 to 644A, inclusive, *and sections 2 to 32, inclusive, of*
29 *this act*, 648, 654 and 656 of NRS.

30 (b) The Nevada System of Higher Education.

31 (c) The Public Employees' Retirement System.

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

33 (e) The Colorado River Commission of Nevada.

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

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

38 (1) Senate Standing Committee on Finance; and

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

40 (b) Governor; and

41 (c) Legislative Auditor.

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

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

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

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

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

52 353A.045 The Administrator shall:

53 1. Report to the Director.

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

5 (a) A board created by the provisions of NRS 590.485 and chapters 623 to
6 625A, inclusive, 628, 630 to 644A, inclusive, *and sections 2 to 32, inclusive, of*
7 *this act*, 648, 654 and 656 of NRS.

8 (b) The Nevada System of Higher Education.

9 (c) The Public Employees' Retirement System.

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

11 (e) The Colorado River Commission of Nevada.

12 3. Provide a copy of the approved annual work plan to the Legislative
13 Auditor.

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

17 (a) State the agencies which will be audited, the proposed scope and
18 assignment of those audits and the related resources which will be used for those
19 audits; and

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

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

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

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

30 (a) The adequacy of the internal accounting and administrative controls of the
31 agency; and

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

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

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

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

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

42 372.7285 1. In administering the provisions of NRS 372.325, the
43 Department shall apply the exemption to the sale of a medical device to a
44 governmental entity that is exempt pursuant to that section without regard to
45 whether the person using the medical device or the governmental entity that
46 purchased the device is deemed to be the holder of title to the device if:

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

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

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

53 2. As used in this section:

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

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

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

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

16 374.731 1. In administering the provisions of NRS 374.330, the Department
17 shall apply the exemption to the sale of a medical device to a governmental entity
18 that is exempt pursuant to that section without regard to whether the person using
19 the medical device or the governmental entity that purchased the device is deemed
20 to be the holder of title to the device if:

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

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

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

27 2. As used in this section:

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

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

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

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

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

52 2. *The Department or a managed care organization, including, without*
53 *limitation, a health maintenance organization, that provides health care services*

1 *to recipients of Medicaid under the State Plan for Medicaid may charge a*
2 *copayment or coinsurance or apply a deductible for the services described in*
3 *subsection 1. The amount of such a copayment, coinsurance or deductible must*
4 *not exceed the amount of the copayment, coinsurance or deductible charged for*
5 *the same services provided by another provider of health care.*

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

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

9 432B.220 1. Any person who is described in subsection 4 and who, in his or
10 her professional or occupational capacity, knows or has reasonable cause to believe
11 that a child has been abused or neglected shall:

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

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

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

21 (a) A person directly responsible or serving as a volunteer for or an employee
22 of a public or private home, institution or facility where the child is receiving child
23 care outside of the home for a portion of the day, the person shall make the report to
24 a law enforcement agency.

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

30 3. Any person who is described in paragraph (a) of subsection 4 who delivers
31 or provides medical services to a newborn infant and who, in his or her professional
32 or occupational capacity, knows or has reasonable cause to believe that the
33 newborn infant has been affected by a fetal alcohol spectrum disorder or prenatal
34 substance use disorder or has withdrawal symptoms resulting from prenatal
35 substance exposure shall, as soon as reasonably practicable but not later than 24
36 hours after the person knows or has reasonable cause to believe that the newborn
37 infant is so affected or has such symptoms, notify an agency which provides child
38 welfare services of the condition of the infant and refer each person who is
39 responsible for the welfare of the infant to an agency which provides child welfare
40 services for appropriate counseling, training or other services. A notification and
41 referral to an agency which provides child welfare services pursuant to this
42 subsection shall not be construed to require prosecution for any illegal action.

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

44 (a) A person providing services licensed or certified in this State pursuant to,
45 without limitation, chapter 450B, 630, 630A, 631, 632, 633, 634, 634A, 635, 636,
46 637, 637B, 639, 640, 640A, 640B, 640C, 640D, 640E, 641, 641A, 641B, 641C or
47 653 of NRS ~~§~~ *or sections 2 to 32, inclusive, of this act.*

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

53 (c) A coroner.

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

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

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

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

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

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

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

17 (k) Any person who is employed by or serves as a volunteer for a youth shelter.
18 As used in this paragraph, "youth shelter" has the meaning ascribed to it in NRS
19 244.427.

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

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

24 6. If a person who is required to make a report pursuant to subsection 1 knows
25 or has reasonable cause to believe that a child has died as a result of abuse or
26 neglect, the person shall, as soon as reasonably practicable, report this belief to an
27 agency which provides child welfare services or a law enforcement agency. If such
28 a report is made to a law enforcement agency, the law enforcement agency shall
29 notify an agency which provides child welfare services and the appropriate medical
30 examiner or coroner of the report. If such a report is made to an agency which
31 provides child welfare services, the agency which provides child welfare services
32 shall notify the appropriate medical examiner or coroner of the report. The medical
33 examiner or coroner who is notified of a report pursuant to this subsection shall
34 investigate the report and submit his or her written findings to the appropriate
35 agency which provides child welfare services, the appropriate district attorney and a
36 law enforcement agency. The written findings must include, if obtainable, the
37 information required pursuant to the provisions of subsection 2 of NRS 432B.230.

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

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

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

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

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

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

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

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

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

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

9 (b) Obtain a written acknowledgment or electronic record from the person that
10 he or she has been informed of his or her duty pursuant to this section and NRS
11 392.303; and

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

14 10. As used in this section:

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

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

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

18 439A.0195 "Practitioner" means a physician licensed under chapter 630,
19 630A or 633 of NRS, dentist, licensed nurse, *licensed certified professional*
20 *midwife*, dispensing optician, optometrist, registered physical therapist, podiatric
21 physician, licensed psychologist, chiropractor, doctor of Oriental medicine in any
22 form, medical laboratory director or technician, pharmacist or other person whose
23 principal occupation is the provision of services for health.

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

25 439B.225 1. As used in this section, "licensing board" means any division
26 or board empowered to adopt standards for the issuance or renewal of licenses,
27 permits or certificates of registration pursuant to NRS 435.3305 to 435.339,
28 inclusive, chapter 449, 625A, 630, 630A, 631, 632, 633, 634, 634A, 635, 636, 637,
29 637B, 639, 640, 640A, 640D, 641, 641A, 641B, 641C, 652, 653 or 654 of NRS ~~and~~
30 *and sections 2 to 32, inclusive, of this act.*

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

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

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

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

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

41 3. After reviewing a proposed regulation, the Committee shall notify the
42 agency of the opinion of the Committee regarding the advisability of adopting or
43 revising the proposed regulation.

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

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

48 *As used in this chapter, "midwife" means any type of midwife, including,*
49 *without limitation, a licensed certified professional midwife, a certified nurse-*
50 *midwife or any person who engages in the practice of certified professional*
51 *midwifery.*

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

2 440.280 1. If a birth occurs in a hospital or the mother and child are
3 immediately transported to a hospital, the person in charge of the hospital or his or
4 her designated representative shall obtain the necessary information, prepare a birth
5 certificate, secure the signatures required by the certificate and file it within 10 days
6 with the health officer of the registration district where the birth occurred. The
7 physician in attendance shall provide the medical information required by the
8 certificate and certify to the fact of birth within 72 hours after the birth. If the
9 physician does not certify to the fact of birth within the required 72 hours, the
10 person in charge of the hospital or the designated representative shall complete and
11 sign the certification.

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

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

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

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

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

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

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

26 5. If the mother was:

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

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

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

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

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

40 (2) The mother and a person other than the mother's spouse at the time of
41 conception have signed a declaration for the voluntary acknowledgment of
42 paternity developed by the Board pursuant to NRS 440.283 or a declaration for the
43 voluntary acknowledgment of parentage developed by the Board pursuant to NRS
44 440.285.

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

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

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

50 (c) The parents of the child have signed a declaration for the voluntary
51 acknowledgment of paternity developed by the Board pursuant to NRS 440.283 or
52 a declaration for the voluntary acknowledgment of parentage developed by the
53 Board pursuant to NRS 440.285. If both parents execute a declaration consenting to

1 the use of the surname of one parent as the surname of the child, the name of that
2 parent must be entered on the original certificate of birth and the surname of that
3 parent must be entered thereon as the surname of the child.

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

15 8. As used in this section, "court" has the meaning ascribed to it in NRS
16 125B.004.

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

18 440.770 Any person who furnishes false information to a physician, advanced
19 practice registered nurse, *licensed certified professional midwife*, funeral director,
20 midwife or informant for the purpose of making incorrect certification of births or
21 deaths shall be punished by a fine of not more than \$250.

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

23 441A.110 "Provider of health care" means a physician, nurse, *licensed*
24 *certified professional midwife* or veterinarian licensed in accordance with state law
25 or a physician assistant licensed pursuant to chapter 630 or 633 of NRS.

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

27 442.003 As used in this chapter, unless the context requires otherwise:

28 1. "Advisory Board" means the Advisory Board on Maternal and Child
29 Health.

30 2. "Department" means the Department of Health and Human Services.

31 3. "Director" means the Director of the Department.

32 4. "Division" means the Division of Public and Behavioral Health of the
33 Department.

34 5. "Fetal alcohol syndrome" includes fetal alcohol effects.

35 6. "Laboratory" has the meaning ascribed to it in NRS 652.040.

36 7. *"Midwife" means any type of midwife, including, without limitation, a*
37 *licensed certified professional midwife, a certified nurse-midwife or any person*
38 *who engages in the practice of certified professional midwifery.*

39 8. "Obstetric center" has the meaning ascribed to it in NRS 449.0155.

40 ~~8.9.~~ 9. "Provider of health care or other services" means:

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

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

46 (c) A licensed nurse;

47 (d) A licensed psychologist;

48 (e) A licensed marriage and family therapist;

49 (f) A licensed clinical professional counselor;

50 (g) A licensed social worker;

51 (h) A licensed dietitian; ~~9.~~

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

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

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

2 442.119 As used in NRS 442.119 to 442.1198, inclusive, unless the context
3 otherwise requires:

4 1. “Health officer” includes a local health officer, a city health officer, a
5 county health officer and a district health officer.

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

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

8 4. “Provider of prenatal care” means:

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

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

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

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

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

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

19 442.610 “Provider of health care” means:

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

22 2. ~~A midwife; and~~

23 ~~—3—~~ An obstetric center licensed pursuant to chapter 449 of NRS.

24 **Sec. 76.** NRS 454.00958 is hereby amended to read as follows:

25 454.00958 “Practitioner” means:

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

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

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

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

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

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

40 5. *A licensed certified professional midwife, for the purpose of ordering;*

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

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

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

46 454.213 1. Except as otherwise provided in NRS 454.217, a drug or
47 medicine referred to in NRS 454.181 to 454.371, inclusive, may be possessed and
48 administered by:

49 (a) A practitioner.

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

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

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

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

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

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

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

20 (1) The State Board of Health in a county whose population is less than
21 100,000;

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

5 (2) Prescribed by a licensed physician for:

6 (I) Iontophoresis; or

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

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

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

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

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

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

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

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

25 (t) A person who is enrolled in a training program to become a physician
26 assistant licensed pursuant to chapter 630 or 633 of NRS, dental hygienist,
27 advanced emergency medical technician, paramedic, respiratory therapist, dialysis
28 technician, physical therapist or veterinary technician or to obtain a license to
29 engage in radiation therapy and radiologic imaging pursuant to chapter 653 of NRS
30 if the person possesses and administers the drug or medicine in the same manner
31 and under the same conditions that apply, respectively, to a physician assistant
32 licensed pursuant to chapter 630 or 633 of NRS, dental hygienist, advanced
33 emergency medical technician, paramedic, respiratory therapist, dialysis technician,
34 physical therapist, veterinary technician or person licensed to engage in radiation
35 therapy and radiologic imaging who may possess and administer the drug or
36 medicine, and under the direct supervision of a person licensed or registered to
37 perform the respective medical art or a supervisor of such a person.

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

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

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

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

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

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

51 454.361 A conviction of the violation of any of the provisions of NRS
52 454.181 to 454.371, inclusive, constitutes grounds for the suspension or revocation

1 of any license issued to such person pursuant to the provisions of chapters 630, 631,
2 633, 635, 636, 638, 639 or 653 of NRS ~~§~~ **or sections 2 to 32, inclusive, of this act.**

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

4 608.0116 “Professional” means pertaining to:

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

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

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

12 679B.440 1. The Commissioner may require that reports submitted pursuant
13 to NRS 679B.430 include, without limitation, information regarding:

14 (a) Liability insurance provided to:

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

- 17 (I) Cities and towns;
- 18 (II) School districts; and
- 19 (III) Other political subdivisions;

20 (2) Public officers;

21 (3) Establishments where alcoholic beverages are sold;

22 (4) Facilities for the care of children;

23 (5) Labor, fraternal or religious organizations; and

24 (6) Officers or directors of organizations formed pursuant to title 7 of NRS,
25 reported separately for nonprofit entities and entities organized for profit;

26 (b) Liability insurance for:

27 (1) Defective products;

28 (2) Medical or dental malpractice of:

29 (I) A practitioner licensed pursuant to chapter 630, 630A, 631, 632,
30 633, 634, 634A, 635, 636, 637, 637B, 639 or 640 of NRS **or sections 2 to 32,**
31 **inclusive, of this act** or who holds a license or limited license issued pursuant to
32 chapter 653 of NRS;

33 (II) A hospital or other health care facility; or

34 (III) Any related corporate entity;

35 (3) Malpractice of attorneys;

36 (4) Malpractice of architects and engineers; and

37 (5) Errors and omissions by other professionally qualified persons;

38 (c) Vehicle insurance, reported separately for:

39 (1) Private vehicles;

40 (2) Commercial vehicles;

41 (3) Liability insurance; and

42 (4) Insurance for property damage; and

43 (d) Workers’ compensation insurance.

44 2. The Commissioner may require that the report include, without limitation,
45 information specifically pertaining to this State or to an insurer in its entirety, in the
46 aggregate or by type of insurance, and for a previous or current year, regarding:

47 (a) Premiums directly written;

48 (b) Premiums directly earned;

49 (c) Number of policies issued;

50 (d) Net investment income, using appropriate estimates when necessary;

51 (e) Losses paid;

52 (f) Losses incurred;

53 (g) Loss reserves, including:

- 1 (1) Losses unpaid on reported claims; and
- 2 (2) Losses unpaid on incurred but not reported claims;
- 3 (h) Number of claims, including:
 - 4 (1) Claims paid; and
 - 5 (2) Claims that have arisen but are unpaid;
- 6 (i) Expenses for adjustment of losses, including allocated and unallocated
- 7 losses;
- 8 (j) Net underwriting gain or loss;
- 9 (k) Net operation gain or loss, including net investment income; and
- 10 (l) Any other information requested by the Commissioner.
- 11 3. The Commissioner may also obtain, based upon an insurer in its entirety,
- 12 information regarding:

- 13 (a) Recoverable federal income tax;
- 14 (b) Net unrealized capital gain or loss; and
- 15 (c) All other expenses not included in subsection 2.

16 **Sec. 81.** NRS 686A.2825 is hereby amended to read as follows:
17 686A.2825 "Practitioner" means:

18 1. A physician, dentist, nurse, *licensed certified professional midwife*,
19 dispensing optician, optometrist, physical therapist, podiatric physician,
20 psychologist, chiropractor, doctor of Oriental medicine in any form, director or
21 technician of a medical laboratory, pharmacist, person who holds a license to
22 engage in radiation therapy and radiologic imaging or a limited license to engage in
23 radiologic imaging pursuant to chapter 653 of NRS or other provider of health
24 services who is authorized to engage in his or her occupation by the laws of this
25 state or another state; and

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

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

28 686B.030 1. Except as otherwise provided in subsection 2 and NRS
29 686B.125, the provisions of NRS 686B.010 to 686B.1799, inclusive, apply to all
30 kinds and lines of direct insurance written on risks or operations in this State by any
31 insurer authorized to do business in this State, except:

- 32 (a) Ocean marine insurance;
- 33 (b) Contracts issued by fraternal benefit societies;
- 34 (c) Life insurance and credit life insurance;
- 35 (d) Variable and fixed annuities;
- 36 (e) Credit accident and health insurance;
- 37 (f) Property insurance for business and commercial risks;
- 38 (g) Casualty insurance for business and commercial risks other than insurance

39 covering the liability of a practitioner licensed pursuant to chapters 630 to 640,
40 inclusive, of NRS *and sections 2 to 32, inclusive, of this act* or who holds a license
41 or limited license issued pursuant to chapter 653 of NRS;

- 42 (h) Surety insurance;
- 43 (i) Health insurance offered through a group health plan maintained by a large
44 employer; and
- 45 (j) Credit involuntary unemployment insurance.

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

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

49 686B.040 1. Except as otherwise provided in subsection 2, the
50 Commissioner may by rule exempt any person or class of persons or any market
51 segment from any or all of the provisions of NRS 686B.010 to 686B.1799,
52 inclusive, if and to the extent that the Commissioner finds their application
53 unnecessary to achieve the purposes of those sections.

1 2. The Commissioner may not, by rule or otherwise, exempt an insurer from
2 the provisions of NRS 686B.010 to 686B.1799, inclusive, with regard to insurance
3 covering the liability of a practitioner licensed pursuant to chapter 630, 631, 632 or
4 633 of NRS *or sections 2 to 32, inclusive, of this act* for a breach of the
5 practitioner's professional duty toward a patient.

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

7 686B.115 1. Any hearing held by the Commissioner to determine whether
8 rates comply with the provisions of NRS 686B.010 to 686B.1799, inclusive, must
9 be open to members of the public.

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

12 3. At any hearing which is held by the Commissioner to determine whether
13 rates comply with the provisions of NRS 686B.010 to 686B.1799, inclusive, and
14 which involves rates for insurance covering the liability of a practitioner licensed
15 pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 32, inclusive, of*
16 *this act* for a breach of the practitioner's professional duty toward a patient, if a
17 person is not otherwise authorized pursuant to this title to become a party to the
18 hearing by intervention, the person is entitled to provide testimony at the hearing if,
19 not later than 2 days before the date set for the hearing, the person files with the
20 Commissioner a written statement which states:

21 (a) The name and title of the person;

22 (b) The interest of the person in the hearing; and

23 (c) A brief summary describing the purpose of the testimony the person will
24 offer at the hearing.

25 4. If a person provides testimony at a hearing in accordance with subsection
26 3:

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

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

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

36 689A.035 1. An insurer shall not charge a provider of health care a fee to
37 include the name of the provider on a list of providers of health care given by the
38 insurer to its insureds.

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

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

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

46 (b) Except as otherwise provided in this paragraph, by the insurer upon giving
47 to the provider 45 days' written notice of the modification of the insurer's schedule
48 of payments, including any changes to the fee schedule applicable to the provider's
49 practice. If the provider fails to object in writing to the modification within the 45-
50 day period, the modification becomes effective at the end of that period. If the
51 provider objects in writing to the modification within the 45-day period, the
52 modification must not become effective unless agreed to by both parties as
53 described in paragraph (a).

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

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

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

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

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

14 689B.015 1. An insurer that issues a policy of group health insurance shall
15 not charge a provider of health care a fee to include the name of the provider on a
16 list of providers of health care given by the insurer to its insureds.

17 2. An insurer specified in subsection 1 shall not contract with a provider of
18 health care to provide health care to an insured unless the insurer uses the form
19 prescribed by the Commissioner pursuant to NRS 629.095 to obtain any
20 information related to the credentials of the provider of health care.

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

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

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

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

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

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

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

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

45 689C.435 1. A carrier serving small employers and a carrier that offers a
46 contract to a voluntary purchasing group shall not charge a provider of health care a
47 fee to include the name of the provider on a list of providers of health care given by
48 the carrier to its insureds.

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

1 3. A contract between a carrier specified in subsection 1 and a provider of
2 health 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 carrier upon giving
5 to the provider 45 days' written notice of the modification of the carrier's schedule
6 of payments, including any changes to the fee schedule applicable to the provider's
7 practice. If the provider fails to object in writing to the modification within the 45
8 day period, the modification becomes effective at the end of that period. If the
9 provider objects in writing to the modification within the 45 day period, the
10 modification must not become effective unless agreed to by both parties as
11 described in paragraph (a).

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

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

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

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

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

25 690B.250 Except as more is required in NRS 630.3067 and 633.526:

26 1. Each insurer which issues a policy of insurance covering the liability of a
27 practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS *or sections*
28 *2 to 32, inclusive, of this act* or who holds a license or limited license issued
29 pursuant to chapter 653 of NRS for a breach of his or her professional duty toward
30 a patient shall report to the board which licensed the practitioner within 45 days
31 each settlement or award made or judgment rendered by reason of a claim, if the
32 settlement, award or judgment is for more than \$5,000, giving the name of the
33 claimant and the practitioner and the circumstances of the case.

34 2. A practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS
35 *or sections 2 to 32, inclusive, of this act* or who holds a license or limited license
36 issued pursuant to chapter 653 of NRS who does not have insurance covering
37 liability for a breach of his or her professional duty toward a patient shall report to
38 the board which issued the practitioner's license within 45 days of each settlement
39 or award made or judgment rendered by reason of a claim, if the settlement, award
40 or judgment is for more than \$5,000, giving the practitioner's name, the name of
41 the claimant and the circumstances of the case.

42 3. These reports are public records and must be made available for public
43 inspection within a reasonable time after they are received by the licensing board.

44 **Sec. 89.** NRS 690B.270 is hereby amended to read as follows:

45 690B.270 If an insurer declines to issue to a practitioner licensed pursuant to
46 chapter 630, 631, 632 or 633 of NRS *or sections 2 to 32, inclusive, of this act* a
47 policy of professional liability insurance, the insurer shall, upon the request of the
48 practitioner, disclose to the practitioner the reasons the insurer declined to issue the
49 policy.

50 **Sec. 90.** NRS 690B.280 is hereby amended to read as follows:

51 690B.280 If an insurer, for a policy of professional liability insurance for a
52 practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS ~~or~~
53 *sections 2 to 32, inclusive, of this act*, sets the premium for the policy for the

1 practitioner at a rate that is higher than the standard rate of the insurer for the
2 applicable type of policy and specialty of the practitioner, the insurer shall, upon
3 the request of the practitioner, disclose the reasons the insurer set the premium for
4 the policy at the higher rate.

5 **Sec. 91.** NRS 690B.290 is hereby amended to read as follows:

6 690B.290 If an insurer offers to issue a claims-made policy to a practitioner
7 licensed pursuant to chapter 630, 631, 632 or 633 of NRS ~~§~~ **or sections 2 to 32,**
8 **inclusive, of this act,** the insurer shall:

9 1. Offer to issue an extended reporting endorsement to the practitioner; and

10 2. Disclose to the practitioner the cost formula that the insurer uses to
11 determine the premium for the extended reporting endorsement. The cost formula
12 must be based on:

13 (a) An amount that is not more than twice the amount of the premium for the
14 claims-made policy at the time of the termination of that policy; and

15 (b) The rates filed by the insurer and approved by the Commissioner.

16 **Sec. 92.** NRS 690B.300 is hereby amended to read as follows:

17 690B.300 1. Except as otherwise provided in this section, if an insurer
18 issues a policy of professional liability insurance to a practitioner licensed pursuant
19 to chapter 630, 632 or 633 of NRS **or sections 2 to 32, inclusive, of this act** who
20 delivers one or more babies per year, the insurer shall not set the premium for the
21 policy at a rate that is different from the rate set for such a policy issued by the
22 insurer to any other practitioner licensed pursuant to chapter 630, 632 or 633 of
23 NRS **or sections 2 to 32, inclusive, of this act** who delivers one or more babies per
24 year if the difference in rates is based in whole or in part upon the number of babies
25 delivered per year by the practitioner.

26 2. If an insurer issues a policy of professional liability insurance to a
27 practitioner licensed pursuant to chapter 630, 632 or 633 of NRS **or sections 2 to**
28 **32, inclusive, of this act** who delivers one or more babies per year, the insurer may
29 set the premium for the policy at a rate that is different, based in whole or in part
30 upon the number of babies delivered per year by the practitioner, from the rate set
31 for such a policy issued by the insurer to any other practitioner licensed pursuant to
32 chapter 630, 632 or 633 of NRS **or sections 2 to 32, inclusive, of this act** who
33 delivers one or more babies per year if the insurer:

34 (a) Bases the difference upon actuarial and loss experience data available to the
35 insurer; and

36 (b) Obtains the approval of the Commissioner for the difference in rates.

37 3. The provisions of this section do not prohibit an insurer from setting the
38 premium for a policy of professional liability insurance issued to a practitioner
39 licensed pursuant to chapter 630, 632 or 633 of NRS **or sections 2 to 32, inclusive,**
40 **of this act** who delivers one or more babies per year at a rate that is different from
41 the rate set for such a policy issued by the insurer to any other practitioner licensed
42 pursuant to chapter 630, 632 or 633 of NRS **or sections 2 to 32, inclusive, of this**
43 **act** who delivers one or more babies per year if the difference in rates is based
44 solely upon factors other than the number of babies delivered per year by the
45 practitioner.

46 **Sec. 93.** NRS 690B.310 is hereby amended to read as follows:

47 690B.310 1. If an agreement settles a claim or action against a practitioner
48 licensed pursuant to chapter 630, 631, 632 or 633 of NRS **or sections 2 to 32,**
49 **inclusive, of this act** for a breach of his or her professional duty toward a patient,
50 the following terms of the agreement must not be made confidential:

51 (a) The names of the parties;

52 (b) The date of the incidents or events giving rise to the claim or action;

1 (c) The nature of the claim or action as set forth in the complaint and the
2 answer that is filed with the district court; and

3 (d) The effective date of the agreement.

4 2. Any provision of an agreement to settle a claim or action that conflicts with
5 this section is void.

6 **Sec. 94.** NRS 690B.320 is hereby amended to read as follows:

7 690B.320 1. If an insurer offers to issue a claims-made policy to a
8 practitioner licensed pursuant to chapters 630 to 640, inclusive, of NRS *or sections*
9 *2 to 32, inclusive, of this act* or who holds a license or limited license issued
10 pursuant to chapter 653 of NRS, the insurer shall:

11 (a) Offer to issue to the practitioner an extended reporting endorsement without
12 a time limitation for reporting a claim.

13 (b) Disclose to the practitioner the premium for the extended reporting
14 endorsement and the cost formula that the insurer uses to determine the premium
15 for the extended reporting endorsement.

16 (c) Disclose to the practitioner the portion of the premium attributable to
17 funding the extended reporting endorsement offered at no additional cost to the
18 practitioner in the event of the practitioner's death, disability or retirement, if such a
19 benefit is offered.

20 (d) Disclose to the practitioner the vesting requirements for the extended
21 reporting endorsement offered at no additional cost to the practitioner in the event
22 of the practitioner's death or retirement, if such a benefit is offered. If such a
23 benefit is not offered, the absence of such a benefit must be disclosed.

24 (e) Include, as part of the insurance contract, language which must be approved
25 by the Commissioner and which must be substantially similar to the following:

26
27 If we adopt any revision that would broaden the coverage under this policy
28 without any additional premium either within the policy period or within 60
29 days before the policy period, the broadened coverage will immediately
30 apply to this policy.
31

32 2. The disclosures required by subsection 1 must be made as part of the offer
33 and acceptance at the inception of the policy and again at each renewal in the form
34 of an endorsement attached to the insurance contract and approved by the
35 Commissioner.

36 3. The requirements set forth in this section are in addition to the
37 requirements set forth in NRS 690B.290.

38 **Sec. 95.** NRS 690B.360 is hereby amended to read as follows:

39 690B.360 1. The Commissioner may collect all information which is
40 pertinent to monitoring whether an insurer that issues professional liability
41 insurance for a practitioner licensed pursuant to chapter 630, 631, 632 or 633 of
42 NRS *or sections 2 to 32, inclusive, of this act* is complying with the applicable
43 standards for rates established in NRS 686B.010 to 686B.1799, inclusive. Such
44 information may include, without limitation:

45 (a) The amount of gross premiums collected with regard to each medical
46 specialty;

47 (b) Information relating to loss ratios; and

48 (c) Information reported pursuant to NRS 679B.430 and 679B.440.

49 2. In addition to the information collected pursuant to subsection 1, the
50 Commissioner may request any additional information from an insurer:

51 (a) Whose rates and credit utilization are materially different from other
52 insurers in the market for professional liability insurance for a practitioner licensed

1 pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 32, inclusive, of*
2 *this act* in this State;

3 (b) Whose credit utilization shows a substantial change from the previous year;
4 or

5 (c) Whose information collected pursuant to subsection 1 indicates a
6 potentially adverse trend.

7 3. If the Commissioner requests additional information from an insurer
8 pursuant to subsection 2, the Commissioner may:

9 (a) Determine whether the additional information offers a reasonable
10 explanation for the results described in paragraph (a), (b) or (c) of subsection 2; and

11 (b) Take any steps permitted by law that are necessary and appropriate to
12 assure the ongoing stability of the market for professional liability insurance for a
13 practitioner licensed pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2*
14 *to 32, inclusive, of this act* in this State.

15 4. On an ongoing basis, the Commissioner may analyze and evaluate the
16 information collected pursuant to this section to determine trends in and measure
17 the health of the market for professional liability insurance for a practitioner
18 licensed pursuant to chapter 630, 631, 632 or 633 of NRS *or sections 2 to 32,*
19 *inclusive, of this act* in this State.

20 5. If the Commissioner convenes a hearing pursuant to subsection 1 of NRS
21 690B.350 and determines that the market for professional liability insurance issued
22 to any class, type or specialty of practitioner licensed pursuant to chapter 630, 631
23 or 633 of NRS *or sections 2 to 32, inclusive, of this act* is not competitive and that
24 such insurance is unavailable or unaffordable for a substantial number of such
25 practitioners, the Commissioner shall prepare and submit a report of the
26 Commissioner's findings and recommendations to the Director of the Legislative
27 Counsel Bureau for transmittal to members of the Legislature.

28 **Sec. 96.** NRS 695A.095 is hereby amended to read as follows:

29 695A.095 1. A society shall not charge a provider of health care a fee to
30 include the name of the provider on a list of providers of health care given by the
31 society to its insureds.

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

36 3. A contract between a society and a provider of health care may be
37 modified:

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

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

47 4. If a society contracts with a provider of health care to provide health care to
48 an insured, the society shall:

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

52 (b) If requested by the provider of health care at any other time, submit to the
53 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. 97.** NRS 695B.035 is hereby amended to read as follows:

7 695B.035 1. A corporation subject to the provisions of this chapter shall not
8 charge a provider of health care a fee to include the name of the provider on a list of
9 providers of health care given by the corporation to its insureds.

10 2. A corporation specified in subsection 1 shall not contract with a provider of
11 health care to provide health care to an insured unless the corporation uses the form
12 prescribed by the Commissioner pursuant to NRS 629.095 to obtain any
13 information related to the credentials of the provider of health care.

14 3. A contract between a corporation specified in subsection 1 and a provider
15 of health care may be modified:

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

17 (b) Except as otherwise provided in this paragraph, by the corporation upon
18 giving to the provider 45 days’ written notice of the modification of the
19 corporation’s schedule of payments, including any changes to the fee schedule
20 applicable to the provider’s practice. If the provider fails to object in writing to the
21 modification within the 45-day period, the modification becomes effective at the
22 end of that period. If the provider objects in writing to the modification within the
23 45-day period, the modification must not become effective unless agreed to by both
24 parties as described in paragraph (a).

25 4. If a corporation specified in subsection 1 contracts with a provider of health
26 care to provide health care to an insured, the corporation shall:

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

30 (b) If requested by the provider of health care at any other time, submit to the
31 provider of health care the schedule of payments, including any changes to the fee
32 schedule applicable to the provider’s practice, specified in paragraph (a) within 7
33 days after receiving the request.

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

37 **Sec. 98.** NRS 695C.125 is hereby amended to read as follows:

38 695C.125 1. A health maintenance organization shall not contract with a
39 provider of health care to provide health care to an insured unless the health
40 maintenance organization uses the form prescribed by the Commissioner pursuant
41 to NRS 629.095 to obtain any information related to the credentials of the provider
42 of health care.

43 2. A contract between a health maintenance organization and a provider of
44 health care may be modified:

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

46 (b) Except as otherwise provided in this paragraph, by the health maintenance
47 organization upon giving to the provider 45 days’ written notice of the modification
48 of the health maintenance organization’s schedule of payments, including any
49 changes to the fee schedule applicable to the provider’s practice. If the provider
50 fails to object in writing to the modification within the 45-day period, the
51 modification becomes effective at the end of that period. If the provider objects in
52 writing to the modification within the 45-day period, the modification must not
53 become effective unless agreed to by both parties as described in paragraph (a).

1 3. If a health maintenance organization contracts with a provider of health
2 care to provide health care to an enrollee, the health maintenance organization
3 shall:

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

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

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

14 **Sec. 99.** NRS 695G.430 is hereby amended to read as follows:

15 695G.430 1. A managed care organization shall not contract with a provider
16 of health care to provide health care to an insured unless the managed care
17 organization uses the form prescribed by the Commissioner pursuant to NRS
18 629.095 to obtain any information related to the credentials of the provider of
19 health care.

20 2. A contract between a managed care organization and a provider of health
21 care may be modified:

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

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

31 3. If a managed care organization contracts with a provider of health care to
32 provide health care services pursuant to chapter 689A, 689B, 689C, 695A, 695B or
33 695C of NRS, the managed care organization shall:

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

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

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

44 **Sec. 100.** (Deleted by amendment.)

45 **Sec. 101.** Section 19 of this act is hereby amended to read as follows:

46 Sec. 19. 1. An applicant for a license as a licensed certified
47 professional midwife must submit to the Division an application pursuant to
48 this section in the form prescribed by the Division. The application must be
49 accompanied by a fee in the amount prescribed by regulation of the State
50 Board of Health pursuant to NRS 439.150, which must not exceed \$1,000.
51 The application must include, without limitation, proof that the applicant

52 ~~is~~:

1 (a) Is certified as a midwife by the North American Registry of
2 Midwives, or its successor organization ; ~~f~~ and ~~f~~

3 ~~—(a) Has~~

4 (b) *Except as otherwise provided in subsection 2, has* completed an
5 educational program accredited by the Midwifery Education Accreditation
6 Council, or its successor organization . ~~f~~ ~~or~~

7 ~~—(b) Holds a Midwifery Bridge Certificate issued by the North~~
8 ~~American Registry of Midwives, or its successor organization, and has~~
9 ~~completed the Portfolio Evaluation Process prescribed by that~~
10 ~~organization.]~~

11 2. *If the Division determines it to be necessary to address shortages*
12 *in the number of midwives practicing in rural or underserved areas in*
13 *this State or barriers for applicants from marginalized identities, the*
14 *Division may, on a case-by-case basis, exempt an applicant from*
15 *complying with paragraph (b) of subsection 1 if the applicant holds a*
16 *Midwifery Bridge certificate issued by the North American Registry of*
17 *Midwives, or its successor organization, and has completed the Portfolio*
18 *Evaluation Process prescribed by that organization.*

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

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

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

27 ~~f~~ 4. To the extent that the implementation of such provisions will
28 leave the Division with sufficient money to carry out its duties under this
29 chapter, the State Board of Health shall establish by regulation a procedure
30 through which:

31 (a) An applicant may petition the Division to reduce the fees imposed
32 pursuant to this section. An applicant may qualify for such a reduction if
33 the applicant demonstrates, to the satisfaction of the Division, that the fees
34 imposed pursuant to this section are an economic hardship on the applicant.

35 (b) The Division allocates a portion of the fees imposed and collected
36 pursuant to this section to programs that promote applicants from
37 marginalized identities through increasing the numbers of such applicants
38 and reducing barriers that such applicants face.

39 ~~f~~ 5. As used in this section, “marginalized identity” means an
40 identity or expression that causes or has historically caused a person of such
41 identity or expression to be disproportionately discriminated against,
42 harassed or otherwise negatively treated or affected as a result of the
43 identity or expression.

44 **Sec. 102.** Section 23 of this act is hereby amended to read as follows:

45 Sec. 23. 1. In addition to any other requirements set forth in this
46 chapter ~~f~~

47 ~~—(a) An applicant for the issuance of a license as a licensed certified~~
48 ~~professional midwife in this State shall include the social security number~~
49 ~~of the applicant in the application submitted to the Division.~~

50 ~~—(b) An~~ , *an* applicant for the issuance of a license as a licensed
51 certified professional midwife in this State shall submit to the Division of
52 Public and Behavioral Health of the Department of Health and Human
53 Services the statement prescribed by the Division of Welfare and

1 Supportive Services of the Department of Health and Human Services
2 pursuant to NRS 425.520. The statement must be completed and signed by
3 the applicant.

4 2. The Division of Public and Behavioral Health of the Department of
5 Health and Human Services shall include the statement required pursuant to
6 subsection 1 in:

7 (a) The application or any other forms that must be submitted for the
8 issuance or renewal of the license; or

9 (b) A separate form prescribed by the Division.

10 3. A license as a licensed certified professional midwife may not be
11 issued or renewed by the Division if the applicant:

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

13 (b) Indicates on the statement submitted pursuant to subsection 1 that
14 the applicant is subject to a court order for the support of a child and is not
15 in compliance with the order or a plan approved by the district attorney or
16 other public agency enforcing the order for the repayment of the amount
17 owed pursuant to the order.

18 4. If an applicant indicates on the statement submitted pursuant to
19 subsection 1 that the applicant is subject to a court order for the support of a
20 child and is not in compliance with the order or a plan approved by the
21 district attorney or other public agency enforcing the order for the
22 repayment of the amount owed pursuant to the order, the Division shall
23 advise the applicant to contact the district attorney or other public agency
24 enforcing the order to determine the actions that the applicant may take to
25 satisfy the arrearage.

26 **Sec. 103.** Section 27 of this act is hereby amended to read as follows:

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

33 (a) Complete placenta previa;

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

35 (c) Infection with the human immunodeficiency virus;

36 (d) Cardiovascular disease;

37 (e) Severe mental illness that may cause the client to cause harm to
38 themselves or others;

39 (f) Pre-eclampsia or eclampsia;

40 (g) Fetal growth restriction, oligohydramnios or moderate or severe
41 polyhydramnios in the pregnancy;

42 (h) Potentially serious anatomic fetal abnormalities;

43 (i) Diabetes that requires insulin or other medication for management;

44 (j) Gestational age of greater than 43 weeks; or

45 (k) Any other condition or symptom which, in the judgment of the
46 licensed certified professional midwife, could threaten the life of the client
47 or the fetus or newborn infant of the client.

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

53 (a) Prior cesarean section or other surgery resulting in a uterine scar;

- (b) Multifetal gestation; or
- (c) Non-cephalic presentation after 36 weeks of gestation.

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

- (a) The contents of the recommendation;
- (b) The condition or symptom for which the recommendation was made;
- (c) Whether the client consented to the consultation, co-management, referral or transfer; and
- (d) If the client provides consent, the name, profession and specialty of the provider of health care with whom the licensed certified professional midwife consulted or co-managed or to whom the client was referred or the medical facility to which the client was transferred.

4. A client may provide informed refusal to consent to consultation, co-management, referral or transfer in writing on a form prescribed by the Board. If a client provides informed refusal to consent to ~~;~~

~~— (a) Consultation,]~~ **consultation**, co-management, referral or transfer after the licensed certified professional midwife has determined that a condition or symptom ~~[described in subsection 1]~~ exists ~~[, the]~~ **for which consultation, co-management, referral or transfer is required by the regulations adopted pursuant to section 18 of this act:**

~~(a) The licensed certified professional midwife must attempt to locate a qualified provider of health care for which the client consents to consultation, co-management or referral or an appropriate medical facility for which the client consents to transfer. If the licensed certified professional midwife is unable to locate such a provider of health care who is willing to consult, co manage or accept the referral or such a medical facility which is willing to accept the transfer, the licensed certified professional midwife is]~~ **take any action required by those regulations;**

~~(b) If the condition or symptom threatens the life or health of the client, the fetus or the newborn child during labor or delivery, the licensed certified professional midwife must call 911 and provide care until relieved by a qualified provider of health care; and~~

~~(c) If the licensed certified professional midwife complies with paragraphs (a) and (b), he or she is not liable for any damages resulting from the failure to consult, co-manage, refer or transfer. [If the condition or symptom threatens the life or health of the client or the fetus or the newborn infant of the client during labor or delivery, the licensed certified professional midwife must call 911 and provide care until relieved by a qualified provider of health care.~~

~~— (b) Consultation, co management or referral after the licensed certified professional midwife has determined that a condition or symptom described in subsection 2 exists, the licensed certified professional midwife:~~

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

~~— (2) Is not liable for any damages resulting from the failure to consult, co manage or refer.]~~

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

~~— (a) Subsection 1]~~ exists **for which consultation, co-management, referral or transfer is required by the regulations adopted pursuant to section 18 of this act** and making a reasonable effort to ~~[arrange for consultation with, co-management of the condition or symptom with or~~

1 ~~referral of the client to a qualified provider of health care or the transfer of~~
2 ~~the client to an appropriate medical facility,] **comply with those**~~
3 ~~**regulations,**~~ a licensed certified professional midwife is unable to locate a
4 qualified provider of health care who is willing to consult, co-manage or
5 accept the referral or an appropriate medical facility willing to accept the
6 transfer, the licensed certified professional midwife shall be deemed to be
7 in compliance with the requirements of ~~[this section]~~ **those regulations** and
8 is not liable for any damages resulting from the inability of the licensed
9 certified professional midwife to consult, co-manage, refer or transfer. If
10 the condition or symptom threatens the life or health of the client or the
11 fetus or newborn infant of the client during labor or delivery, the licensed
12 certified professional midwife must call 911 and provide care until relieved
13 by a qualified provider of health care.

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

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

30 **Sec. 103.5. Section 3 of Assembly Bill No. 287 of this session is hereby**
31 **amended to read as follows:**

32 Sec. 3. NRS 442.003 is hereby amended to read as follows:

33 442.003 As used in this chapter, unless the context requires
34 otherwise:

35 1. "Advisory Board" means the Advisory Board on Maternal and
36 Child Health.

37 2. "Department" means the Department of Health and Human
38 Services.

39 3. "Director" means the Director of the Department.

40 4. "Division" means the Division of Public and Behavioral Health of
41 the Department.

42 5. "Fetal alcohol syndrome" includes fetal alcohol effects.

43 6. "Freestanding birthing center" has the meaning ascribed to it in
44 section 11 of Assembly Bill No. 287 of this session.

45 7. "Laboratory" has the meaning ascribed to it in NRS 652.040.

46 8. ~~["Midwife" means:~~

47 ~~(a) A person certified as:~~

48 ~~(1) A Certified Professional Midwife by the North American~~
49 ~~Registry of Midwives, or its successor organization; or~~

50 ~~(2) A Certified Nurse Midwife by the American Midwifery~~
51 ~~Certification Board, or its successor organization; or~~

52 ~~(b) Any other type of midwife.~~

53 ~~9.] "Provider of health care or other services" means:~~

- (a) A clinical alcohol and drug counselor who is licensed, or an alcohol and drug counselor who is licensed or certified, pursuant to chapter 641C of NRS;
- (b) A physician or a physician assistant who is licensed pursuant to chapter 630 or 633 of NRS and who practices in the area of obstetrics and gynecology, family practice, internal medicine, pediatrics or psychiatry;
- (c) A licensed nurse;
- (d) A licensed psychologist;
- (e) A licensed marriage and family therapist;
- (f) A licensed clinical professional counselor;
- (g) A licensed social worker;
- (h) A licensed dietitian; or
- (i) The holder of a certificate of registration as a pharmacist.

Sec. 104. As soon as practicable on or after the effective date of this section, but not later than 6 months after receiving the recommendations of the Collaboration and Transfer Guidelines Workgroup created pursuant to section 105 of this act, the Board of Licensed Certified Professional Midwives created by section 16 of this act shall adopt the regulations required by paragraph (g) of subsection 1 of section 18 of this act. In adopting the regulations, the Board shall consider the measures necessary to minimize the likelihood of serious harm to the client and the fetus or newborn infant of the client.

Sec. 105. 1. The Collaboration and Transfer Guidelines Workgroup is hereby created.

2. The Administrator of the Division of Public and Behavioral Health of the Department of Health and Human Services shall appoint to the Workgroup:

- (a) One voting member who is a physician who practices in the area of obstetrics or a certified nurse-midwife in Northern Nevada;
- (b) One voting member who is a physician who practices in the area of obstetrics or a certified nurse-midwife in Southern Nevada;
- (c) One voting member who is a nurse manager of a labor and delivery ward or a registered nurse with similar duties who is responsible for coordinating transfers of pregnant women from a home or birth center to a hospital and who practices in Northern Nevada;
- (d) One voting member who is a nurse manager of a labor and delivery ward or a registered nurse with similar duties who is responsible for coordinating transfers of pregnant women from a home or birth center to a hospital and who practices in Southern Nevada;
- (e) One voting member who represents a provider of emergency medical services in Northern Nevada;
- (f) One voting member who represents a provider of emergency medical services in Southern Nevada; and
- (g) One nonvoting member to serve as a liaison with the State Board of Health.

3. The Nevada Chapter of the National Association of Certified Professional Midwives, or its successor organization, in consultation with the Nevada Association of Professional Midwives, or its successor organization, shall appoint to the Workgroup four voting members who are midwives who reside and practice in Nevada. To the extent practicable, two of those members must reside and practice in Northern Nevada and two of those members must practice in Southern Nevada.

4. The Nevada Hospital Association, or its successor organization, may appoint to the Workgroup one member who is a representative of that organization.

5. A vacancy on the Workgroup must be filled in the same manner as the initial appointment.

1 6. Members of the Workgroup serve without compensation and are not
2 entitled to receive the per diem allowance and travel expenses provided for state
3 officers and employees generally.

4 7. A member of the Workgroup who is an officer or employee of this State or
5 a political subdivision of this State must be relieved from his or her duties without
6 loss of regular compensation to prepare for and attend meetings of the Workgroup
7 and perform any work necessary to carry out the duties of the Workgroup in the
8 most timely manner practicable. A state agency or political subdivision of this State
9 shall not require an officer or employee who is a member of the Workgroup to:

10 (a) Make up the time he or she is absent from work to carry out his or her
11 duties as a member of the Workgroup; or

12 (b) Take annual leave or compensatory time for the absence.

13 8. The Workgroup may divide into one subcommittee of members from
14 Northern Nevada and one subcommittee of members from Southern Nevada.

15 9. A majority of the voting members of the Workgroup or a subcommittee
16 thereof constitutes a quorum for the transaction of business, and a majority of a
17 quorum present at any meeting is sufficient for any official action taken by the
18 Workgroup or a subcommittee thereof.

19 10. The Workgroup and each subcommittee thereof shall:

20 (a) At its first meeting and annually thereafter, elect a Chair from among its
21 members; and

22 (b) Meet at the call of the Chair.

23 11. Not later than July 1, 2022, the Workgroup or, if the Workgroup divides
24 into subcommittees pursuant to subsection 8, each subcommittee of the Workgroup,
25 shall make recommendations to the Board of Licensed Certified Professional
26 Midwives created by section 16 of this act concerning the regulations required by
27 paragraph (g) of subsection 1 of section 18 of this act governing the transfer of the
28 client of a licensed certified professional midwife to a medical facility. Those
29 recommendations must, to the extent practicable, be guided upon peer-reviewed
30 scientific evidence and widely accepted best practices and include, without
31 limitation, provisions for the transmission of all information necessary for the care
32 of the client from the licensed certified professional midwife to the medical facility.
33 The Workgroup ceases to exist upon submission of those recommendations unless
34 the Board requests that the Workgroup continue to meet.

35 12. As used in this section:

36 (a) "Certified nurse-midwife" means an advanced practice registered nurse
37 who is certified as a nurse-midwife by the American Midwifery Certification
38 Board, or its successor organization.

39 (b) "Licensed certified professional midwife" means a person who is certified
40 as a certified professional midwife by the North American Registry of Midwives.

41 (c) "Medical facility" has the meaning ascribed to it in NRS 449.0151.

42 (d) "Northern Nevada" means Carson City and the counties of Churchill, Elko,
43 Eureka, Douglas, Humboldt, Lander, Lyon, Pershing, Storey, Washoe and White
44 Pine.

45 (e) "Southern Nevada" means the counties of Clark, Esmeralda, Lincoln,
46 Mineral and Nye.

47 **Sec. 106.** Notwithstanding the provisions of section 16 of this act, on or
48 before July 1, 2022, the Administrator of the Division of Public and Behavioral
49 Health of the Department of Health and Human Services may appoint to the Board
50 of Licensed Certified Professional Midwives created by that section:

51 1. Four members pursuant to paragraph (a) of subsection 2 of that section who
52 are not licensed pursuant to section 19 of this act and are certified as midwives by
53 the North American Registry of Midwives, or its successor organization. If such a

1 member is not licensed as a licensed certified professional midwife pursuant to
2 section 19 of this act on July 1, 2022:

3 (a) His or her term ends on that date; and

4 (b) The Administrator shall appoint a person who is so licensed to fill the
5 vacancy.

6 2. Two members pursuant to paragraph (d) of subsection 2 of section 16 of
7 this act who have not received care from a licensed certified professional midwife
8 licensed pursuant to section 19 of this act but who have received care from a
9 midwife certified by the North American Registry of Midwives, or its successor
10 organization. Those members may serve until the expiration of the terms prescribed
11 pursuant to subsection 5 of section 16 of this act.

12 **Sec. 106.5.** Section 1.1 of Assembly Bill No. 287 of the current Legislative
13 Session is hereby repealed.

14 **Sec. 107.** 1. This section and sections 103.5, 104, ~~and~~ 105 and 106.5 of
15 this act become effective upon passage and approval.

16 2. Sections 1 to 99, inclusive, and 106 of this act become effective:

17 (a) Upon passage and approval for the purpose of appointing the members of
18 the Board of Licensed Certified Professional Midwives, adopting any regulations
19 and performing any other preparatory administrative tasks that are necessary to
20 carry out the provisions of this act; and

21 (b) On January 1, 2022, for all other purposes.

22 3. Sections 100 and 101 of this act become effective on January 1, 2025.

23 4. Section 102 of this act becomes effective on the date on which the
24 provisions of 42 U.S.C. § 666 requiring each state to establish procedures under
25 which the state has authority to withhold or suspend, or to restrict the use of
26 professional, occupational and recreational licenses of persons who:

27 (a) Have failed to comply with a subpoena or warrant relating to a proceeding
28 to determine the paternity of a child or to establish or enforce an obligation for the
29 support of a child; or

30 (b) Are in arrears in the payment for the support of one or more children,

31 \hookrightarrow are repealed by the Congress of the United States.

32 5. Section 103 of this act becomes effective on the date on which the
33 regulations described in section 104 of this act become effective.

34 6. Section 33 of this act expires by limitation on the date on which the
35 provisions of 42 U.S.C. § 666 requiring each state to establish procedures under
36 which the state has authority to withhold or suspend, or to restrict the use of
37 professional, occupational and recreational licenses of persons who:

38 (a) Have failed to comply with a subpoena or warrant relating to a proceeding
39 to determine the paternity of a child or to establish or enforce an obligation for the
40 support of a child; or

41 (b) Are in arrears in the payment for the support of one or more children,

42 \hookrightarrow are repealed by the Congress of the United States.

43 7. Sections 23, 29 and 102 of this act expire by limitation on the date 2 years
44 after the date on which the provisions of 42 U.S.C. § 666 requiring each state to
45 establish procedures under which the state has authority to withhold or suspend, or
46 to restrict the use of professional, occupational and recreational licenses of persons
47 who:

48 (a) Have failed to comply with a subpoena or warrant relating to a proceeding
49 to determine the paternity of a child or to establish or enforce an obligation for the
50 support of a child; or

51 (b) Are in arrears in the payment for the support of one or more children,

52 \hookrightarrow are repealed by the Congress of the United States.

TEXT OF REPEALED SECTION

Section 1.1 of Assembly Bill No. 287 of the current Legislative Session:

Sec. 1.1. Chapter 440 of NRS is hereby amended by adding thereto a new section to read as follows:

As used in this chapter, "midwife" means:

1. A person certified as:
 - (a) A Certified Professional Midwife by the North American Registry of Midwives, or its successor organization; or
 - (b) A Certified Nurse-Midwife by the American Midwifery Certification Board, or its successor organization; or
2. Any other type of midwife.