

ASSEMBLY BILL NO. 56—COMMITTEE  
ON COMMERCE AND LABOR

(ON BEHALF OF THE BOARD OF MEDICAL EXAMINERS)

PREFILED NOVEMBER 20, 2024

Referred to Committee on Commerce and Labor

SUMMARY—Revises provisions relating to the licensing of certain providers of health care. (BDR 54-255)

FISCAL NOTE: Effect on Local Government: No.  
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 providers of health care; revising requirements for continuing education and training for certain providers of health care; requiring the Board of Medical Examiners to require a physician assistant on inactive status to pay a biennial registration fee; increasing the maximum amount of certain fees charged and collected by the Board; requiring the Board, if authorized by a licensee, to provide to an employer of the licensee or an entity credentialing the licensee certain documents and information; providing for the biennial renewal of certain licenses issued by the State Board of Osteopathic Medicine; establishing and revising certain fees charged by the Board; and providing other matters properly relating thereto.

**Legislative Counsel’s Digest:**

1 Existing law requires certain providers of health care licensed by the Board of  
2 Medical Examiners and the State Board of Osteopathic Medicine to complete  
3 certain continuing education as a condition to the renewal of the license. Existing  
4 law sets forth certain courses of instruction and training that each Board must  
5 require certain licensees to complete, including, among other courses and training,  
6 a course of instruction on evidence-based suicide prevention and awareness and  
7 training in the screening, brief intervention and referral to treatment approach to  
8 substance use disorder. (NRS 630.253, 633.471) Additionally, existing law requires  
9 each Board to require a physician, osteopathic physician and physician assistant



10 who is registered to dispense controlled substances to complete at least 2 hours of  
11 training relating specifically to persons with substance use and other addictive  
12 disorders and the prescribing of opioids during each period of licensure. (NRS  
13 630.2535, 633.473) **Sections 1, 12 and 21** of this bill eliminate provisions requiring  
14 each Board to require the completion of certain specified courses of instruction and  
15 training. **Sections 1 and 12** maintain the requirement for certain licensees to  
16 complete continuing education but, rather than requiring each Board to require the  
17 completion of certain specified courses and training, **sections 1 and 12** require each  
18 Board to encourage each licensee to complete courses of instruction in, among  
19 other subjects: (1) evidence-based suicide prevention and awareness; (2) the  
20 screening, brief intervention and referral to treatment approach to substance use  
21 disorder; (3) the prescribing of opioids; and (4) care for persons with an addictive  
22 disorder. **Sections 5 and 19** of this bill eliminate provisions making the failure of a  
23 licensee to complete training relating to persons with substance use and other  
24 addictive disorders and the prescribing of opioids grounds for initiating disciplinary  
25 action by the Board of Medical Examiners and the State Board of Osteopathic  
26 Medicine, respectively. **Section 12** additionally increases, from 35 to 40, the  
27 number of hours of continuing medical education certain providers of health care  
28 licensed by the State Board of Osteopathic Medicine are required to complete  
29 during each period of licensure.

30 Existing law requires the Board of Medical Examiners to adopt regulations  
31 regarding the licensure of a physician assistant. (NRS 630.275) Existing law  
32 establishes a biennial registration fee for a physician assistant licensed by the  
33 Board. (NRS 630.268) Under existing law, the Board is required to exempt a  
34 physician assistant on inactive status from paying the biennial registration fee.  
35 (NRS 630.255) **Section 2** of this bill eliminates that exception. **Section 4** of this bill  
36 instead requires the Board to require a physician assistant on inactive status to pay a  
37 fee for biennial registration. **Section 3** of this bill sets forth the maximum amount  
38 of that fee.

39 **Section 3** additionally increases the maximum amount of the fees for: (1)  
40 biennial registration for a physician from \$800 to \$1,200; and (2) biennial  
41 registration for a physician who is on inactive status from \$400 to \$600.

42 Existing law authorizes the Board to keep certain information confidential,  
43 including, among other information, any statement, evidence, credential or other  
44 proof submitted in support of or to verify the contents of an application for a  
45 license. (NRS 630.336) **Section 6** of this bill requires the Board, if authorized by a  
46 licensee, to provide to an employer of the licensee or an entity credentialing the  
47 licensee copies of any documents or other information obtained by the Board  
48 during the application process for the issuance of the license of the licensee,  
49 including, without limitation, copies of documents and other information verifying  
50 the completion by the licensee of any educational program related to licensure and  
51 verifying certain other matters concerning the licensee.

52 Existing law, with certain exceptions, provides for the annual renewal of a  
53 license to practice osteopathic medicine issued by the State Board of Osteopathic  
54 Medicine and sets forth a renewal date for such a license as January 1 of each  
55 calendar year. (NRS 633.471) **Section 12** instead provides, with certain exceptions,  
56 for the biennial renewal of such a license and establishes the renewal date for such  
57 a license as December 31 of each even-numbered year.

58 Existing regulations provide for the annual renewal of a license as a physician  
59 assistant issued by the Board. (NAC 633.285) **Sections 9 and 10** of this bill instead  
60 provide for the biennial renewal of such a license and establish the renewal date as  
61 December 31 of each odd-numbered year. Existing law provides for the biennial  
62 renewal of a license as an anesthesiologist assistant issued by the Board. (NRS  
63 633.4254) **Section 7** of this bill establishes a renewal date for such a license as  
64 December 31 of each odd-numbered year.



65 **Section 20** of this bill sets forth certain requirements for the renewal of certain  
66 licenses issued by the Board which are held by a licensee on December 31, 2025.

67 Existing law sets forth procedures by which a person may be simultaneously  
68 licensed as a physician assistant or anesthesiologist assistant by the Board of  
69 Medical Examiners and the State Board of Osteopathic Medicine. (NRS 630.2677,  
70 630.26835, 630.2684, 630.26845, 630.2735, 630.2755, 633.4256, 633.4258,  
71 633.426, 633.4332, 633.438, 633.4718) Under existing law, a person who is  
72 licensed as a physician assistant or anesthesiologist assistant by the State Board of  
73 Osteopathic Medicine and who wishes to be simultaneously licensed by both the  
74 Board of Medical Examiners and the State Board of Osteopathic Medicine is  
75 required to: (1) apply to the Board of Medical Examiners for a license to practice as  
76 a physician assistant or anesthesiologist assistant, as applicable; (2) pay all  
77 applicable fees, including, the fee payable to the Board of Medical Examiners for  
78 an application for and the issuance of a simultaneous license as a physician  
79 assistant or anesthesiologist assistant, as applicable, and the annual simultaneous  
80 registration fee for a physician assistant or biennial simultaneous registration fee for  
81 an anesthesiologist assistant, as applicable, payable to the State Board of  
82 Osteopathic Medicine; and (3) if the person is applying for simultaneous licensure  
83 while renewing his or her license, apply to renew his or her license and indicate in  
84 the application that he or she wishes to hold a simultaneous license. (NRS 633.426,  
85 633.438, 633.4718) **Sections 8, 11 and 15** of this bill instead require such a person to  
86 pay to the State Board of Osteopathic Medicine a biennial simultaneous license  
87 renewal fee, rather than an annual or biennial simultaneous license registration fee.  
88 **Section 14** of this bill similarly eliminates a reference to the biennial registration of  
89 a license.

90 Existing law requires the State Board of Osteopathic Medicine to: (1) maintain  
91 a list of each licensed osteopathic physician and physician assistant and certain  
92 training that each such licensee has received; and (2) update the list at least  
93 annually with information received from licensees who renewed their licenses  
94 during the preceding year. (NRS 633.4715) **Section 13** of this bill requires the  
95 Board to instead update the list at least biennially with such information from  
96 licensees who renewed their licenses during the preceding biennium. **Sections 16**  
97 **and 17** of this bill revise certain other procedures and requirements relating to  
98 licensure to account for the change from an annual to a biennial period of licensure  
99 for certain osteopathic physicians and physician assistants.

100 Existing law sets forth a list of maximum fees to be charged and collected by  
101 the Board. (NRS 633.501) **Section 18** of this bill: (1) revises the descriptions of  
102 certain fees; (2) increases the amount of certain fees to account for the change from  
103 an annual to a biennial period of licensure for certain osteopathic physicians and  
104 physician assistants; and (3) establishes a biennial license renewal fee and a  
105 biennial simultaneous license renewal fee for an anesthesiologist assistant.

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

1 **Section 1.** NRS 630.253 is hereby amended to read as follows:  
2 630.253 1. The Board shall, as a prerequisite for the:  
3 (a) Renewal of a license as a physician assistant;  
4 (b) Renewal of a license as an anesthesiologist assistant; or  
5 (c) Biennial registration of the holder of a license to practice  
6 medicine,



1 ↪ require each holder to submit evidence of compliance with the  
2 requirements for continuing education as set forth in regulations  
3 adopted by the Board.

4 2. ~~These requirements:~~

5 ~~— (a) May provide for the completion of one or more courses of~~  
6 ~~instruction relating to risk management in the performance of~~  
7 ~~medical services.~~

8 ~~— (b) Must provide for the completion of a course of instruction,~~  
9 ~~within 2 years after initial licensure, relating to the medical~~  
10 ~~consequences of an act of terrorism that involves the use of a~~  
11 ~~weapon of mass destruction. The course must provide at least 4~~  
12 ~~hours of instruction that includes instruction in the following~~  
13 ~~subjects:~~

14 ~~— (1) An overview of acts of terrorism and weapons of mass~~  
15 ~~destruction;~~

16 ~~— (2) Personal protective equipment required for acts of~~  
17 ~~terrorism;~~

18 ~~— (3) Common symptoms and methods of treatment associated~~  
19 ~~with exposure to, or injuries caused by, chemical, biological,~~  
20 ~~radioactive and nuclear agents;~~

21 ~~— (4) Syndromic surveillance and reporting procedures for acts~~  
22 ~~of terrorism that involve biological agents; and~~

23 ~~— (5) An overview of the information available on, and the use~~  
24 ~~of, the Health Alert Network.~~

25 ~~— (c) Must provide for the completion by a holder of a license to~~  
26 ~~practice medicine of a course of instruction within 2 years after~~  
27 ~~initial licensure that provides at least 2 hours] *The regulations*~~  
28 ~~adopted pursuant to subsection 1 must encourage each holder of a~~  
29 ~~license to take courses of instruction [on evidence-based] in:~~

30 *(a) Evidence-based* suicide prevention and awareness ~~as~~  
31 ~~described in subsection 6.~~

32 ~~— (d) Must provide for the completion of at least 2 hours of~~  
33 ~~training in the] *which may include, without limitation, instruction*~~  
34 ~~concerning:~~

35 *(1) The skills and knowledge that the licensee needs to*  
36 *detect behaviors that may lead to suicide, including, without*  
37 *limitation, post-traumatic stress disorder;*

38 *(2) Approaches to engaging other professionals in suicide*  
39 *intervention; and*

40 *(3) The detection of suicidal thoughts and ideations and the*  
41 *prevention of suicide.*

42 *(b) The screening, brief intervention and referral to treatment*  
43 *approach to substance use disorder . [within 2 years after initial*  
44 *licensure.*



1 ~~—(e) Must provide for the biennial completion by each~~  
2 ~~psychiatrist and each physician assistant practicing under the~~  
3 ~~supervision of a psychiatrist of one or more courses of instruction~~  
4 ~~that provide at least 2 hours of instruction relating to cultural~~  
5 ~~competency and diversity, equity and inclusion. Such instruction:-~~

6 ~~—(1) May include the training provided pursuant to NRS~~  
7 ~~449.103, where applicable.-~~

8 ~~—(2) Must be based upon a range of research from diverse~~  
9 ~~sources.-~~

10 ~~—(3) Must address persons of different cultural backgrounds,~~  
11 ~~including, without limitation:-~~

12 ~~—(I) Persons from various gender, racial and ethnic~~  
13 ~~backgrounds;-~~

14 ~~—(II) Persons from various religious backgrounds;-~~

15 ~~—(III) Lesbian, gay, bisexual, transgender and questioning~~  
16 ~~persons;-~~

17 ~~—(IV) Children and senior citizens;-~~

18 ~~—(V) Veterans;-~~

19 ~~—(VI) Persons with a mental illness;-~~

20 ~~—(VII) Persons with an intellectual disability,~~  
21 ~~developmental disability or physical disability; and-~~

22 ~~—(VIII) Persons who are part of any other population that a~~  
23 ~~psychiatrist or a physician assistant practicing under the supervision~~  
24 ~~of a psychiatrist may need to better understand, as determined by the~~  
25 ~~Board.-~~

26 ~~—(f) Must allow the holder of a license to receive credit toward~~  
27 ~~the total amount of continuing education required by the Board for~~  
28 ~~the completion of a course of instruction relating to genetic~~  
29 ~~counseling and genetic testing.-~~

30 ~~—(g) Must provide for the completion by a physician or physician~~  
31 ~~assistant who provides or supervises the provision of emergency~~  
32 ~~medical services in a hospital or primary care of at least 2 hours of~~  
33 ~~training in the stigma, discrimination and unrecognized bias toward~~  
34 ~~persons who have acquired or are at a high risk of acquiring human~~  
35 ~~immunodeficiency virus within 2 years after beginning to provide or~~  
36 ~~supervise the provision of such services or care.-~~

37 ~~—3. The Board may determine whether to include in a program~~  
38 ~~of continuing education courses of instruction relating to the~~  
39 ~~medical consequences of an act of terrorism that involves the use of~~  
40 ~~a weapon of mass destruction in addition to the course of instruction~~  
41 ~~required by paragraph (b) of subsection 2.-~~

42 ~~—4.] (c) *The prescribing of opioids.*~~

43 ~~(d) *Care for persons with an addictive disorder.*~~

44 3. The Board shall encourage each holder of a license who  
45 treats or cares for persons who are more than 60 years of age to



1 receive, as a portion of their continuing education, education in  
2 geriatrics and gerontology, including such topics as:

3 (a) The skills and knowledge that the licensee needs to address  
4 aging issues;

5 (b) Approaches to providing health care to older persons,  
6 including both didactic and clinical approaches;

7 (c) The biological, behavioral, social and emotional aspects of  
8 the aging process; and

9 (d) The importance of maintenance of function and  
10 independence for older persons.

11 ~~[5.]~~ 4. The Board shall encourage each holder of a license to  
12 practice medicine to receive, as a portion of his or her continuing  
13 education, training concerning methods for educating patients about  
14 how to effectively manage medications, including, without  
15 limitation, the ability of the patient to request to have the symptom  
16 or purpose for which a drug is prescribed included on the label  
17 attached to the container of the drug.

18 ~~[6.— The Board shall require each holder of a license to practice  
19 medicine to receive as a portion of his or her continuing education at  
20 least 2 hours of instruction every 4 years on evidence-based suicide  
21 prevention and awareness, which may include, without limitation,  
22 instruction concerning:~~

23 ~~—(a) The skills and knowledge that the licensee needs to detect  
24 behaviors that may lead to suicide, including, without limitation,  
25 post-traumatic stress disorder;~~

26 ~~—(b) Approaches to engaging other professionals in suicide  
27 intervention; and~~

28 ~~—(c) The detection of suicidal thoughts and ideations and the  
29 prevention of suicide.~~

30 ~~—7.]~~ 5. The Board shall encourage each holder of a license to  
31 practice medicine or as a physician assistant to receive, as a portion  
32 of his or her continuing education, training and education in the  
33 diagnosis of rare diseases, including, without limitation:

34 (a) Recognizing the symptoms of pediatric cancer; and

35 (b) Interpreting family history to determine whether such  
36 symptoms indicate a normal childhood illness or a condition that  
37 requires additional examination.

38 ~~[8.— A holder of a license to practice medicine may not  
39 substitute the continuing education credits relating to suicide  
40 prevention and awareness required by this section for the purposes  
41 of satisfying an equivalent requirement for continuing education in  
42 ethics.~~

43 ~~—9.— Except as otherwise provided in NRS 630.2535, a holder of  
44 a license to practice medicine may substitute not more than 2 hours  
45 of continuing education credits in pain management, care for~~



~~persons with an addictive disorder or the screening, brief intervention and referral to treatment approach to substance use disorder for the purposes of satisfying an equivalent requirement for continuing education in ethics.~~

~~— 10. As used in this section:~~

~~— (a) “Act of terrorism” has the meaning ascribed to it in NRS 202.4415.~~

~~— (b) “Biological agent” has the meaning ascribed to it in NRS 202.442.~~

~~— (c) “Chemical agent” has the meaning ascribed to it in NRS 202.4425.~~

~~— (d) “Primary care” means the practice of family medicine, pediatrics, internal medicine, obstetrics and gynecology and midwifery.~~

~~— (e) “Radioactive agent” has the meaning ascribed to it in NRS 202.4437.~~

~~— (f) “Weapon of mass destruction” has the meaning ascribed to it in NRS 202.4445.]~~

**Sec. 2.** NRS 630.255 is hereby amended to read as follows:

630.255 1. Any licensee who changes the location of his or her practice of medicine from this State to another state or country, has never engaged in the practice of medicine in this State after licensure or has ceased to engage in the practice of medicine in this State for 12 consecutive months may be placed on inactive status by order of the Board. Any physician assistant who notifies the Board of his or her desire to be placed on inactive status in writing on a form prescribed by the Board may be placed on inactive status by order of the Board.

2. Each inactive licensee shall maintain a permanent mailing address with the Board to which all communications from the Board to the licensee must be sent. An inactive licensee who changes his or her permanent mailing address shall notify the Board in writing of the new permanent mailing address within 30 days after the change. If an inactive licensee fails to notify the Board in writing of a change in his or her permanent mailing address within 30 days after the change, the Board may impose upon the licensee a fine not to exceed \$250.

3. In addition to the requirements of subsection 2, any licensee who changes the location of his or her practice of medicine from this State to another state or country shall maintain an electronic mail address with the Board to which all communications from the Board to him or her may be sent.

4. An inactive physician assistant shall not practice as a physician assistant. The Board shall consider an inactive physician assistant who practices as a physician assistant to be practicing



1 without a license. Such practice constitutes grounds for disciplinary  
2 action against the physician assistant in accordance with the  
3 regulations adopted by the Board pursuant to NRS 630.275.

4 5. ~~5. [The Board shall exempt an inactive physician assistant from  
5 paying the applicable fee for biennial registration prescribed by  
6 NRS 630.268.]~~

7 ~~6.]~~ Before resuming the practice of medicine or practice as a  
8 physician assistant in this State, the inactive licensee must:

9 (a) Notify the Board in writing of his or her intent to resume the  
10 practice of medicine or practice as a physician assistant, as  
11 applicable, in this State;

12 (b) File an affidavit with the Board describing the activities of  
13 the licensee during the period of inactive status;

14 (c) Complete the form for registration for active status;

15 (d) Pay the applicable fee for biennial registration; and

16 (e) Satisfy the Board of his or her competence to practice  
17 medicine or practice as a physician assistant, as applicable.

18 ~~7.]~~ 6. If the Board determines that the conduct or competence  
19 of the licensee during the period of inactive status would have  
20 warranted denial of an application for a license to practice medicine  
21 or practice as a physician assistant in this State, the Board may  
22 refuse to place the licensee on active status.

23 **Sec. 3.** NRS 630.268 is hereby amended to read as follows:

24 630.268 1. The Board shall charge and collect not more than  
25 the following fees:

26		
27	For application for and issuance of a license to	
28	practice as a physician, including a license by	
29	endorsement .....	\$600
30	For application for and issuance of a temporary,	
31	locum tenens, limited, restricted, authorized	
32	facility, special, special purpose or special event	
33	license.....	400
34	For renewal of a limited, restricted, authorized	
35	facility or special license .....	400
36	For application for and issuance of a license as a	
37	physician assistant, including a license by	
38	endorsement .....	400
39	For application for and issuance of a simultaneous	
40	license as a physician assistant.....	200
41	For biennial registration of a physician assistant.....	800
42	For biennial simultaneous registration of a	
43	physician assistant.....	400
44	For biennial registration of a physician .....	<del>800</del> 1,200





1 For application for and issuance of a license as a  
2 perfusionist or practitioner of respiratory care..... \$400  
3 For biennial renewal of a license as a perfusionist..... 600  
4 For application for and issuance of a license or  
5 temporary license to practice as an  
6 anesthesiologist assistant..... 400  
7 For application for and initial issuance of a  
8 simultaneous license as an anesthesiologist  
9 assistant ..... 200  
10 For biennial registration of an anesthesiologist  
11 assistant ..... 800  
12 For biennial simultaneous registration of an  
13 anesthesiologist assistant..... 400  
14 For biennial registration of a practitioner of  
15 respiratory care..... 600  
16 For biennial registration for a physician who is on  
17 inactive status ..... **600**  
18 ***For biennial registration for a physician assistant***  
19 ***who is on inactive status..... 400***  
20 For written verification of licensure ..... 50  
21 For a duplicate identification card..... 25  
22 For a duplicate license..... 50  
23 For computer printouts or labels..... 500  
24 For verification of a listing of physicians, per hour ..... 20  
25 For furnishing a list of new physicians..... 100

26  
27 2. Except as otherwise provided in subsections 4 and 5, in  
28 addition to the fees prescribed in subsection 1, the Board shall  
29 charge and collect necessary and reasonable fees for the expedited  
30 processing of a request or for any other incidental service the Board  
31 provides.

32 3. The cost of any special meeting called at the request of a  
33 licensee, an institution, an organization, a state agency or an  
34 applicant for licensure must be paid for by the person or entity  
35 requesting the special meeting. Such a special meeting must not be  
36 called until the person or entity requesting it has paid a cash deposit  
37 with the Board sufficient to defray all expenses of the meeting.

38 4. If an applicant submits an application for a license by  
39 endorsement pursuant to:

40 (a) NRS 630.1607, and the applicant is an active member of, or  
41 the spouse of an active member of, the Armed Forces of the United  
42 States, a veteran or the surviving spouse of a veteran, the Board  
43 shall collect not more than one-half of the fee set forth in subsection  
44 1 for the initial issuance of the license. As used in this paragraph,  
45 “veteran” has the meaning ascribed to it in NRS 417.005.



1 (b) NRS 630.2752, the Board shall collect not more than one-  
2 half of the fee set forth in subsection 1 for the initial issuance of the  
3 license.

4 5. If an applicant submits an application for a license by  
5 endorsement pursuant to NRS 630.1606 or 630.2751, as applicable,  
6 the Board shall charge and collect not more than the fee specified in  
7 subsection 1 for the application for and initial issuance of a license.

8 **6. *The amount of the fee specified in subsection 1 for the***  
9 ***biennial registration of a physician assistant who is on inactive***  
10 ***status must not exceed one-half of the amount of the fee for the***  
11 ***biennial registration of a physician assistant who is on active***  
12 ***status.***

13 **Sec. 4.** NRS 630.275 is hereby amended to read as follows:

14 630.275 The Board shall adopt regulations regarding the  
15 licensure of a physician assistant, including, but not limited to:

16 1. The educational and other qualifications of applicants.

17 2. The required academic program for applicants.

18 3. The procedures for applications for and the issuance of  
19 licenses.

20 4. The procedures deemed necessary by the Board for  
21 applications for and the initial issuance of licenses by endorsement  
22 pursuant to NRS 630.2751 or 630.2752.

23 5. The tests or examinations of applicants required by the  
24 Board.

25 6. The medical services which a physician assistant may  
26 perform, except that a physician assistant may not perform those  
27 specific functions and duties delegated or restricted by law to  
28 persons licensed as dentists, chiropractic physicians, naprapaths,  
29 podiatric physicians and optometrists under chapters 631, 634,  
30 634B, 635 and 636, respectively, of NRS, or as hearing aid  
31 specialists.

32 7. The duration, renewal and termination of licenses, including  
33 licenses by endorsement. The Board ~~shall~~ :

34 (a) **Shall** not require a physician assistant to receive or maintain  
35 certification by the National Commission on Certification of  
36 Physician Assistants, or its successor organization, or by any other  
37 nationally recognized organization for the accreditation of physician  
38 assistants to satisfy any continuing education requirements for the  
39 renewal of licenses.

40 (b) **Shall require a physician assistant who is on inactive status**  
41 **to pay a biennial fee for registration prescribed by NRS 630.268.**

42 8. The grounds and procedures respecting disciplinary actions  
43 against physician assistants.

44 9. The supervision of medical services of a physician assistant  
45 by a supervising physician.



1 10. A physician assistant's use of equipment that transfers  
2 information concerning the medical condition of a patient in this  
3 State electronically, telephonically or by fiber optics, including,  
4 without limitation, through telehealth, from within or outside this  
5 State or the United States.

6 **Sec. 5.** NRS 630.306 is hereby amended to read as follows:

7 630.306 1. The following acts, among others, constitute  
8 grounds for initiating disciplinary action or denying licensure:

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

12 (b) Engaging in any conduct:

13 (1) Which is intended to deceive;

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

16 (3) Which is in violation of a provision of chapter 639 of  
17 NRS, or a regulation adopted by the State Board of Pharmacy  
18 pursuant thereto, that is applicable to a licensee who is a  
19 practitioner, as defined in NRS 639.0125.

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

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

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

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

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

37 (h) Having an alcohol or other substance use disorder.

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

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

42 (k) Failure by a licensee or applicant to report in writing, within  
43 30 days, any disciplinary action taken against the licensee or  
44 applicant by another state, the Federal Government or a foreign  
45 country, including, without limitation, the revocation, suspension or



1 surrender of a license to practice medicine in another jurisdiction.  
2 The provisions of this paragraph do not apply to any disciplinary  
3 action taken by the Board or taken because of any disciplinary  
4 action taken by the Board.

5 (l) Failure by a licensee or applicant to report in writing, within  
6 30 days, any criminal action taken or conviction obtained against the  
7 licensee or applicant, other than a minor traffic violation, in this  
8 State or any other state or by the Federal Government, a branch of  
9 the Armed Forces of the United States or any local or federal  
10 jurisdiction of a foreign country.

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

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

15 (1) The license of the facility is suspended or revoked; or  
16 (2) An act or omission occurs which results in the suspension  
17 or revocation of the license pursuant to NRS 449.160.

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

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

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

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

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

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

34 (3) Is cannabis being used for medical purposes in  
35 accordance with chapter 678C of NRS; or

36 (4) Is an individualized investigational treatment or  
37 investigational drug or biological product prescribed to a patient  
38 pursuant to NRS 630.3735 or 633.6945.

39 (r) Failure to supervise adequately a medical assistant pursuant  
40 to the regulations of the Board.

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

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

44 ~~(u)~~ Failure to comply with the provisions of NRS 454.217 or  
45 629.086.



1 ~~[(w)]~~ (u) Failure to comply with the provisions of NRS  
2 441A.315 or any regulations adopted pursuant thereto.

3 ~~[(w)]~~ (v) Performing or supervising the performance of a pelvic  
4 examination in violation of NRS 629.085.

5 2. As used in this section:

6 (a) "Individualized investigational treatment" has the meaning  
7 ascribed to it in NRS 454.690.

8 (b) "Investigational drug or biological product" has the meaning  
9 ascribed to it in NRS 454.351.

10 **Sec. 6.** NRS 630.336 is hereby amended to read as follows:

11 630.336 1. Any deliberations conducted or vote taken by the  
12 Board or any investigative committee of the Board regarding its  
13 ordering of a physician, perfusionist, physician assistant,  
14 anesthesiologist assistant or practitioner of respiratory care to  
15 undergo a physical or mental examination or any other examination  
16 designated to assist the Board or committee in determining the  
17 fitness of a physician, perfusionist, physician assistant,  
18 anesthesiologist assistant or practitioner of respiratory care are not  
19 subject to the requirements of NRS 241.020.

20 2. Except as otherwise provided in subsection 3 or 4, all  
21 applications for a license to practice medicine, perfusion or  
22 respiratory care, any charges filed by the Board, financial records of  
23 the Board, formal hearings on any charges heard by the Board or a  
24 panel selected by the Board, records of such hearings and any order  
25 or decision of the Board or panel must be open to the public.

26 3. Except as otherwise provided in *subsection 7 and* NRS  
27 239.0115, the following may be kept confidential:

28 (a) Any statement, evidence, credential or other proof submitted  
29 in support of or to verify the contents of an application;

30 (b) Any report concerning the fitness of any person to receive or  
31 hold a license to practice medicine, perfusion or respiratory care;  
32 and

33 (c) Any communication between:

34 (1) The Board and any of its committees or panels; and

35 (2) The Board or its staff, investigators, experts, committees,  
36 panels, hearing officers, advisory members or consultants and  
37 counsel for the Board.

38 4. Except as otherwise provided in subsection 5 and NRS  
39 239.0115, a complaint filed with the Board pursuant to NRS  
40 630.307, all documents and other information filed with the  
41 complaint and all documents and other information compiled as a  
42 result of an investigation conducted to determine whether to initiate  
43 disciplinary action are confidential.

44 5. The formal complaint or other document filed by the Board  
45 to initiate disciplinary action and all documents and information



1 considered by the Board when determining whether to impose  
2 discipline are public records.

3 6. The Board shall, to the extent feasible, communicate or  
4 cooperate with or provide any documents or other information to  
5 any other licensing board or agency or any agency which is  
6 investigating a person, including a law enforcement agency. Such  
7 cooperation may include, without limitation, providing the board or  
8 agency with minutes of a closed meeting, transcripts of oral  
9 examinations and the results of oral examinations.

10 *7. If authorized by a licensee, the Board shall provide to an*  
11 *employer of the licensee or an entity credentialing the licensee*  
12 *copies of any documents and other information obtained by the*  
13 *Board during the application process for the issuance of the*  
14 *license of the licensee, including, without limitation, copies of any*  
15 *documents and other information verifying:*

16 (a) *The completion by the licensee of any educational program*  
17 *related to licensure, including, without limitation, academic*  
18 *transcripts.*

19 (b) *The completion by the licensee of any postgraduate*  
20 *training.*

21 (c) *Any malpractice insurance maintained by the licensee.*

22 (d) *Any privileges of the licensee to practice at a hospital,*  
23 *clinic or other medical facility.*

24 **Sec. 7.** NRS 633.4254 is hereby amended to read as follows:

25 633.4254 1. The Board may issue a license to practice as an  
26 anesthesiologist assistant to an applicant who:

27 (a) Graduated from an anesthesiologist assistant program  
28 accredited by the Commission on Accreditation of Allied Health  
29 Education Programs or its predecessor or successor organization;

30 (b) Has passed a certification examination administered by the  
31 National Commission for Certification of Anesthesiologist  
32 Assistants, its successor organization or other nationally recognized  
33 organization for the certification of anesthesiologist assistants that  
34 has been reviewed and approved by the Board;

35 (c) Is certified by the National Commission for Certification of  
36 Anesthesiologist Assistants, its successor organization or other  
37 nationally recognized organization for the certification of  
38 anesthesiologist assistants that has been reviewed and approved by  
39 the Board;

40 (d) Submits an application for a license as an anesthesiologist  
41 assistant in accordance with the regulations adopted by the Board  
42 pursuant to NRS 633.4252;

43 (e) Pays the application fee for the application for and issuance  
44 of a license as an anesthesiologist assistant required by NRS  
45 633.501; and



1 (f) Meets the qualifications prescribed by the regulations  
2 adopted by the Board pursuant to NRS 633.4252 to assist in the  
3 practice of medicine under the supervision of a supervising  
4 osteopathic anesthesiologist.

5 2. An applicant for a license to practice as an anesthesiologist  
6 assistant submitted pursuant to this section must include, without  
7 limitation, all the information required by the Board to complete the  
8 application.

9 3. A license issued by the Board pursuant to subsection 1 ~~is~~  
10 ~~valid for a period of 2 years and~~ may be renewed *on or before*  
11 *December 31 of each odd-numbered year* in a manner consistent  
12 with the regulations adopted by the Board pursuant to  
13 NRS 633.4252.

14 **Sec. 8.** NRS 633.426 is hereby amended to read as follows:

15 633.426 If a person licensed as an anesthesiologist assistant  
16 pursuant to the provisions of this chapter is not applying to renew  
17 his or her license and wishes to hold a simultaneous license as an  
18 anesthesiologist assistant pursuant to the provisions of chapter 630  
19 of NRS, the person must:

20 1. Apply for an anesthesiologist assistant license to the Board  
21 of Medical Examiners pursuant to chapter 630 of NRS; and

22 2. Pay all applicable fees, including, without limitation:

23 (a) The ~~fee for~~ biennial simultaneous ~~registration of~~ *license*  
24 *renewal fee for* an anesthesiologist assistant pursuant to NRS  
25 633.501; and

26 (b) The application and initial simultaneous license fee for an  
27 anesthesiologist assistant pursuant to NRS 630.268.

28 **Sec. 9.** NRS 633.433 is hereby amended to read as follows:

29 633.433 1. The Board may issue a license as a physician  
30 assistant to an applicant who is qualified under the regulations of the  
31 Board to perform medical services under the supervision of a  
32 supervising osteopathic physician. The application for a license as a  
33 physician assistant must include all information required to  
34 complete the application.

35 2. *A license as a physician assistant issued by the Board may*  
36 *be renewed on or before December 31 of each odd-numbered year*  
37 *in a manner consistent with the regulations adopted by the Board*  
38 *pursuant to NRS 633.434.*

39 **Sec. 10.** NRS 633.434 is hereby amended to read as follows:

40 633.434 The Board shall adopt regulations regarding the  
41 licensure of a physician assistant, including, without limitation:

42 1. The educational and other qualifications of applicants.

43 2. The required academic program for applicants.

44 3. The procedures for applications for and the issuance *and*  
45 *renewal* of licenses.



1 4. The procedures deemed necessary by the Board for  
2 applications for and the issuance of initial licenses by endorsement  
3 pursuant to NRS 633.4335 and 633.4336.

4 5. The tests or examinations of applicants by the Board.

5 6. The medical services which a physician assistant may  
6 perform, except that a physician assistant may not perform  
7 osteopathic manipulative therapy or those specific functions and  
8 duties delegated or restricted by law to persons licensed as dentists,  
9 chiropractic physicians, doctors of Oriental medicine, naprapaths,  
10 podiatric physicians, optometrists and hearing aid specialists under  
11 chapters 631, 634, 634A, 634B, 635, 636 and 637B, respectively, of  
12 NRS.

13 7. The grounds and procedures respecting disciplinary actions  
14 against physician assistants.

15 8. The supervision of medical services of a physician assistant  
16 by a supervising osteopathic physician.

17 **Sec. 11.** NRS 633.438 is hereby amended to read as follows:

18 633.438 If a person licensed to practice as a physician assistant  
19 pursuant to the provisions of this chapter is not applying to renew  
20 his or her license and wishes to hold a simultaneous license to  
21 practice as a physician assistant pursuant to the provisions of  
22 chapter 630 of NRS, the person must:

23 1. Apply for a license to practice as a physician assistant to the  
24 Board of Medical Examiners pursuant to chapter 630 of NRS; and

25 2. Pay all applicable fees, including, without limitation:

26 (a) The ~~annual~~ *biennial* simultaneous ~~registration~~ *license*  
27 *renewal* fee for a physician assistant pursuant to NRS 633.501; and

28 (b) The fee for application for and issuance of a simultaneous  
29 license as a physician assistant pursuant to NRS 630.268.

30 **Sec. 12.** NRS 633.471 is hereby amended to read as follows:

31 633.471 1. Except as otherwise provided in subsection ~~H5~~ *8*  
32 and NRS 633.491, every holder of a license, except a physician  
33 assistant or an anesthesiologist assistant, issued under this chapter,  
34 except a temporary, ~~for a~~ special *or authorized facility* license,  
35 may renew the license on or before ~~January 1~~ *December 31* of  
36 each ~~calendar~~ *even-numbered* year after its issuance by:

37 (a) Applying for renewal on forms provided by the Board;

38 (b) Paying the ~~annual~~ *biennial* license renewal fee specified in  
39 this chapter;

40 (c) Submitting a list of all actions filed or claims submitted to  
41 arbitration or mediation for malpractice or negligence against the  
42 holder during the previous ~~year~~ *biennium*;

43 (d) Subject to subsection ~~H4~~ *7*, submitting evidence to the  
44 Board that in the ~~year~~ *biennium* preceding the application for  
45 renewal the holder has attended courses or programs of continuing





1 education approved by the Board in accordance with regulations  
2 adopted by the Board totaling a number of hours established by the  
3 Board which must not be less than ~~[35]~~ 40 hours nor more than that  
4 set in the requirements for continuing medical education of the  
5 American Osteopathic Association; and

6 (e) Submitting all information required to complete the renewal.

7 2. The Secretary of the Board shall notify each licensee of the  
8 requirements for renewal not less than 30 days before the date of  
9 renewal.

10 3. The Board shall request submission of verified evidence of  
11 completion of the required number of hours of continuing medical  
12 education ~~[annually]~~ *biennially* from a percentage of the applicants  
13 for renewal of a license to practice osteopathic medicine or a license  
14 to practice as a physician assistant or anesthesiologist assistant  
15 determined by the Board. Subject to subsection ~~[4.]~~ 7, upon a  
16 request from the Board, an applicant for renewal of a license to  
17 practice osteopathic medicine or a license to practice as a physician  
18 assistant or anesthesiologist assistant shall submit verified evidence  
19 satisfactory to the Board that in the ~~[year]~~ *biennium* preceding the  
20 application for renewal the applicant attended courses or programs  
21 of continuing medical education approved by the Board totaling the  
22 number of hours established by the Board.

23 4. The Board shall ~~[require]~~ *encourage* each ~~[holder of a~~  
24 ~~license to practice osteopathic medicine]~~ *licensee* to complete ~~[a~~  
25 ~~course of instruction within 2 years after initial licensure that~~  
26 ~~provides at least 2 hours]~~ *courses* of instruction ~~[on evidence-based]~~  
27 *in:*

28 (a) *Evidence-based* suicide prevention and awareness ~~[as~~  
29 ~~described in subsection 9.]~~, *which may include:*

30 (1) *The skills and knowledge that the licensee needs to*  
31 *detect behaviors that may lead to suicide, including, without*  
32 *limitation, post-traumatic stress disorder;*

33 (2) *Approaches to engaging other professionals in suicide*  
34 *intervention; and*

35 (3) *The detection of suicidal thoughts and ideations and the*  
36 *prevention of suicide.*

37 (b) *The screening, brief intervention and referral to treatment*  
38 *approach to substance use disorder.*

39 (c) *The prescribing of opioids.*

40 (d) *Care for persons with an addictive disorder.*

41 5. The Board shall encourage each holder of a license to  
42 practice osteopathic medicine to receive, as a portion of his or her  
43 continuing education, training concerning methods for educating  
44 patients about how to effectively manage medications, including,  
45 without limitation, the ability of the patient to request to have the



1 symptom or purpose for which a drug is prescribed included on the  
2 label attached to the container of the drug.

3 6. The Board shall encourage each holder of a license to  
4 practice osteopathic medicine or as a physician assistant to receive,  
5 as a portion of his or her continuing education, training and  
6 education in the diagnosis of rare diseases, including, without  
7 limitation:

8 (a) Recognizing the symptoms of pediatric cancer; and

9 (b) Interpreting family history to determine whether such  
10 symptoms indicate a normal childhood illness or a condition that  
11 requires additional examination.

12 ~~7. The Board shall require, as part of the continuing education~~  
13 ~~requirements approved by the Board, the biennial completion by a~~  
14 ~~holder of a license to practice osteopathic medicine of at least 2~~  
15 ~~hours of continuing education credits in ethics, pain management,~~  
16 ~~care of persons with addictive disorders or the screening, brief~~  
17 ~~intervention and referral to treatment approach to substance use~~  
18 ~~disorder.~~

19 ~~—8. The continuing education requirements approved by the~~  
20 ~~Board must allow the holder of a license as an osteopathic~~  
21 ~~physician, physician assistant or anesthesiologist assistant to receive~~  
22 ~~credit toward the total amount of continuing education required by~~  
23 ~~the Board for the completion of a course of instruction relating to~~  
24 ~~genetic counseling and genetic testing.~~

25 ~~—9. The Board shall require each holder of a license to practice~~  
26 ~~osteopathic medicine to receive as a portion of his or her continuing~~  
27 ~~education at least 2 hours of instruction every 4 years on evidence-~~  
28 ~~based suicide prevention and awareness which may include, without~~  
29 ~~limitation, instruction concerning:~~

30 ~~—(a) The skills and knowledge that the licensee needs to detect~~  
31 ~~behaviors that may lead to suicide, including, without limitation,~~  
32 ~~post-traumatic stress disorder;~~

33 ~~—(b) Approaches to engaging other professionals in suicide~~  
34 ~~intervention; and~~

35 ~~—(c) The detection of suicidal thoughts and ideations and the~~  
36 ~~prevention of suicide.~~

37 ~~—10. A holder of a license to practice osteopathic medicine may~~  
38 ~~not substitute the continuing education credits relating to suicide~~  
39 ~~prevention and awareness required by this section for the purposes~~  
40 ~~of satisfying an equivalent requirement for continuing education in~~  
41 ~~ethics.~~

42 ~~—11. The Board shall require each holder of a license to practice~~  
43 ~~osteopathic medicine to complete at least 2 hours of training in the~~  
44 ~~screening, brief intervention and referral to treatment approach to~~  
45 ~~substance use disorder within 2 years after initial licensure.~~



1 ~~—12. The Board shall require each psychiatrist or a physician~~  
2 ~~assistant practicing under the supervision of a psychiatrist to~~  
3 ~~biennially complete one or more courses of instruction that provide~~  
4 ~~at least 2 hours of instruction relating to cultural competency and~~  
5 ~~diversity, equity and inclusion. Such instruction:-~~

6 ~~—(a) May include the training provided pursuant to NRS 449.103,~~  
7 ~~where applicable.-~~

8 ~~—(b) Must be based upon a range of research from diverse~~  
9 ~~sources.-~~

10 ~~—(c) Must address persons of different cultural backgrounds,~~  
11 ~~including, without limitation:-~~

12 ~~—(1) Persons from various gender, racial and ethnic~~  
13 ~~backgrounds;-~~

14 ~~—(2) Persons from various religious backgrounds;-~~

15 ~~—(3) Lesbian, gay, bisexual, transgender and questioning~~  
16 ~~persons;-~~

17 ~~—(4) Children and senior citizens;-~~

18 ~~—(5) Veterans;-~~

19 ~~—(6) Persons with a mental illness;-~~

20 ~~—(7) Persons with an intellectual disability, developmental~~  
21 ~~disability or physical disability; and-~~

22 ~~—(8) Persons who are part of any other population that a~~  
23 ~~psychiatrist or physician assistant practicing under the supervision~~  
24 ~~of a psychiatrist may need to better understand, as determined by the~~  
25 ~~Board.-~~

26 ~~—13. The Board shall require each holder of a license to practice~~  
27 ~~osteopathic medicine or as a physician assistant who provides or~~  
28 ~~supervises the provision of emergency medical services in a hospital~~  
29 ~~or primary care to complete at least 2 hours of training in the stigma,~~  
30 ~~discrimination and unrecognized bias toward persons who have~~  
31 ~~acquired or are at a high risk of acquiring human immunodeficiency~~  
32 ~~virus within 2 years after beginning to provide or supervise the~~  
33 ~~provision of such services or care.-~~

34 ~~—14.] The Board shall not require a physician assistant to receive~~  
35 ~~or maintain certification by the National Commission on~~  
36 ~~Certification of Physician Assistants, or its successor organization,~~  
37 ~~or by any other nationally recognized organization for the~~  
38 ~~accreditation of physician assistants to satisfy any continuing~~  
39 ~~education requirement pursuant to ~~{paragraph (d) of subsection 1~~~~  
40 ~~and} subsection 3.~~

41 ~~{15.]~~ 8. Members of the Armed Forces of the United States  
42 and the United States Public Health Service are exempt from  
43 payment of the ~~{annual}~~ *biennial* license renewal fee during their  
44 active duty status.



1 ~~[16. —As used in this section, “primary care” means the practice~~  
2 ~~of family medicine, pediatrics, internal medicine, obstetrics and~~  
3 ~~gynecology and midwifery.]~~

4 **Sec. 13.** NRS 633.4715 is hereby amended to read as follows:

5 633.4715 1. The Board shall:

6 (a) Require each applicant for the renewal of a license as an  
7 osteopathic physician or physician assistant to:

8 (1) Report whether he or she has received training in the  
9 treatment of mental and emotional trauma immediately following an  
10 emergency or disaster, training in the short-term treatment of mental  
11 and emotional trauma or training in the long-term treatment of  
12 mental and emotional trauma; and

13 (2) If the applicant has received training in the treatment of  
14 mental and emotional trauma immediately following an emergency  
15 or disaster, describe the training and indicate if he or she is willing  
16 to respond immediately should an emergency or disaster arise at any  
17 location in this State;

18 (b) Maintain a list of each licensed osteopathic physician and  
19 physician assistant and any training described in subparagraph (1) of  
20 paragraph (a) that the licensee has received and update the list at  
21 least ~~[annually]~~ *biennially* to include information reported pursuant  
22 to paragraph (a) by licensees who renewed their license during the  
23 immediately preceding ~~[year:]~~ *biennium*;

24 (c) Maintain a list of the names and contact information for  
25 osteopathic physicians or physician assistants who indicate that they  
26 are willing to respond immediately should an emergency or disaster  
27 arise at any location in this State and whom the Board has  
28 determined have appropriate training to respond following an  
29 emergency or disaster; and

30 (d) Provide the lists maintained pursuant to paragraphs (b) and  
31 (c) upon request to a governmental entity responding to a state of  
32 emergency or declaration of a disaster by the Governor or the  
33 Legislature pursuant to NRS 414.070.

34 2. The Board shall not deny the renewal of a license as an  
35 osteopathic physician or physician assistant solely because the  
36 applicant has failed to comply with the requirements of paragraph  
37 (a) of subsection 1.

38 3. Except as otherwise provided in paragraph (d) of subsection  
39 1, any information obtained or maintained by the Board pursuant to  
40 this section is confidential.

41 **Sec. 14.** NRS 633.4717 is hereby amended to read as follows:

42 633.4717 1. In addition to any other requirements set forth in  
43 this chapter and any regulations adopted pursuant thereto, each  
44 applicant for the renewal of any type of license as an osteopathic  
45 physician pursuant to this chapter shall complete the data request



1 developed by the Department of Health and Human Services  
2 pursuant to NRS 439A.124. The applicant shall provide to the  
3 Department all the information included in the request.

4 2. The Board shall make the data request described in  
5 subsection 1 available to applicants for the renewal of a license as  
6 an osteopathic physician on an electronic application for the renewal  
7 of a license or through a link included on the Internet website  
8 maintained by the Board.

9 3. An applicant for biennial ~~[registration or]~~ renewal of a  
10 license who refuses or fails to complete a data request pursuant to  
11 subsection 1 is not subject to disciplinary action, including, without  
12 limitation, refusal to ~~[issue the biennial registration or]~~ renew the  
13 license, for such refusal or failure.

14 4. The information contained in a completed data request is  
15 confidential and, except as required by NRS 439A.124, must not be  
16 disclosed to any person or entity.

17 **Sec. 15.** NRS 633.4718 is hereby amended to read as follows:

18 633.4718 A person applying to renew a license to practice as a  
19 physician assistant pursuant to the provisions of this chapter who  
20 wishes to hold a simultaneous license to practice as a physician  
21 assistant pursuant to the provisions of chapter 630 of NRS must:

22 1. Indicate in the application that he or she wishes to hold a  
23 simultaneous license to practice as a physician assistant pursuant to  
24 the provisions of chapter 630 of NRS;

25 2. Apply:

26 (a) To renew a license to practice as a physician assistant to the  
27 Board pursuant to this chapter; and

28 (b) For a license to practice as a physician assistant to the Board  
29 of Medical Examiners pursuant to chapter 630 of NRS; and

30 3. Pay all applicable fees, including, without limitation:

31 (a) The ~~[annual]~~ *biennial* simultaneous ~~[registration]~~ *license*  
32 *renewal* fee for a physician assistant pursuant to NRS 633.501; and

33 (b) The fee for application for and issuance of a simultaneous  
34 license as a physician assistant pursuant to NRS 630.268.

35 **Sec. 16.** NRS 633.481 is hereby amended to read as follows:

36 633.481 1. Except as otherwise provided in subsection 2, if a  
37 licensee fails to comply with the requirements of NRS 633.471  
38 within 10 days after the renewal date, the Board shall give 15 days'  
39 notice of the failure to renew the license and of the expiration of the  
40 license by certified mail to the licensee at the licensee's last known  
41 address that is registered with the Board. If the license is not  
42 renewed within 15 days after receiving notice, the license expires  
43 automatically without any further notice or a hearing and the Board  
44 shall file a copy of the notice with the Drug Enforcement



1 Administration of the United States Department of Justice or its  
2 successor agency.

3 2. A licensee who fails to meet the continuing education  
4 requirements for license renewal may apply to the Board for a  
5 waiver of the requirements. The Board may grant a waiver for that  
6 ~~[year]~~ *biennium* only if the Board finds that the failure is due to a  
7 disability, military service, absence from the United States, or  
8 circumstances beyond the control of the licensee which are deemed  
9 by the Board to excuse the failure.

10 3. A person whose license has expired under this section may  
11 apply to the Board for restoration of the license upon:

12 (a) Payment of all past due renewal fees and the late payment  
13 fee specified in NRS 633.501;

14 (b) Producing verified evidence satisfactory to the Board of  
15 completion of the total number of hours of continuing education  
16 required for the ~~[year]~~ *biennium* preceding the renewal date and for  
17 each ~~[year]~~ *biennium* succeeding the date of expiration;

18 (c) Stating under oath in writing that he or she has not withheld  
19 information from the Board which if disclosed would constitute  
20 grounds for disciplinary action under this chapter; and

21 (d) Submitting any other information that is required by the  
22 Board to restore the license.

23 **Sec. 17.** NRS 633.491 is hereby amended to read as follows:

24 633.491 1. A licensee who retires from practice is not  
25 required ~~[annually]~~ *biennially* to renew his or her license after filing  
26 with the Board an affidavit stating the date on which he or she  
27 retired from practice and any other evidence that the Board may  
28 require to verify the retirement.

29 2. An osteopathic physician or physician assistant who retires  
30 from practice and who desires to return to practice may apply to  
31 renew his or her license by paying all back ~~[annual]~~ *biennial* license  
32 renewal fees ~~[or annual registration fees]~~ from the date of retirement  
33 and submitting verified evidence satisfactory to the Board that the  
34 licensee has attended continuing education courses or programs  
35 approved by the Board which total:

36 (a) Twenty-five hours if the licensee has been retired 1 year or  
37 less.

38 (b) Fifty hours within 12 months of the date of the application if  
39 the licensee has been retired for more than 1 year.

40 3. A licensee who wishes to have a license placed on inactive  
41 status must provide the Board with an affidavit stating the date on  
42 which the licensee will cease the practice of osteopathic medicine or  
43 cease to practice as a physician assistant in Nevada and any other  
44 evidence that the Board may require. The Board shall place the  
45 license of the licensee on inactive status upon receipt of:



1 (a) The affidavit required pursuant to this subsection; and  
2 (b) Payment of the inactive license fee prescribed by  
3 NRS 633.501.

4 4. An osteopathic physician or physician assistant whose  
5 license has been placed on inactive status:

6 (a) Is not required to ~~annually~~ *biennially* renew the license.

7 (b) Except as otherwise provided in subsection 6, shall  
8 ~~annually~~ *biennially* pay the inactive license fee prescribed by  
9 NRS 633.501.

10 (c) Shall not practice osteopathic medicine or practice as a  
11 physician assistant in this State.

12 5. A physician assistant whose license has been placed on  
13 inactive status shall not practice as a physician assistant. The Board  
14 shall consider a physician assistant whose license has been placed  
15 on inactive status and who practices as a physician assistant to be  
16 practicing without a license. Such practice constitutes grounds for  
17 disciplinary action against the physician assistant in accordance with  
18 the regulations adopted by the Board pursuant to NRS 633.434.

19 6. The Board shall exempt a physician assistant whose license  
20 has been placed on inactive status from paying the inactive license  
21 fee prescribed by NRS 633.501.

22 7. An osteopathic physician or physician assistant whose  
23 license is on inactive status and who wishes to renew his or her  
24 license to practice osteopathic medicine or license to practice as a  
25 physician assistant must:

26 (a) Provide to the Board verified evidence satisfactory to the  
27 Board of completion of the total number of hours of continuing  
28 medical education required for:

29 (1) The ~~year~~ *biennium* preceding the date of the application  
30 for renewal of the license; and

31 (2) Each ~~year~~ *biennium* after the date the license was  
32 placed on inactive status.

33 (b) Provide to the Board an affidavit stating that the applicant  
34 has not withheld from the Board any information which would  
35 constitute grounds for disciplinary action pursuant to this chapter.

36 (c) Comply with all other requirements for renewal.

37 **Sec. 18.** NRS 633.501 is hereby amended to read as follows:

38 633.501 1. Except as otherwise provided in subsection 2, the  
39 Board shall charge and collect fees not to exceed the following  
40 amounts:

41 (a) Application and initial license fee for an  
42 osteopathic physician.....~~[\$800]~~ *\$1,600*

43 (b) ~~Annual~~ *Biennial* license renewal fee for an  
44 osteopathic physician.....~~[500]~~ *1,000*

45 (c) Temporary license fee ..... 500



1 (d) Special or authorized facility license fee ..... \$200  
2 (e) Special event license fee ..... 200  
3 (f) Special or authorized facility license  
4 renewal fee..... 200  
5 (g) Reexamination fee ..... 200  
6 (h) Late payment fee..... 300  
7 (i) Application and initial license fee for a  
8 physician assistant..... ~~[400]~~ 800  
9 (j) Application and initial simultaneous license  
10 fee for a physician assistant ..... ~~[200]~~ 400  
11 (k) ~~[Annual—registration]~~ *Biennial license*  
12 *renewal* fee for a physician assistant ..... ~~[400]~~ 800  
13 (l) ~~[Annual]~~ *Biennial* simultaneous ~~[registration]~~  
14 *license renewal* fee for a physician assistant ..... ~~[200]~~ 400  
15 (m) Inactive license fee..... ~~[200]~~ 400  
16 (n) Application and initial license fee for an  
17 anesthesiologist assistant ..... 400  
18 (o) Application and initial simultaneous license  
19 fee for an anesthesiologist assistant ..... 200  
20 (p) *Biennial license renewal fee for an*  
21 *anesthesiologist assistant*..... 400  
22 (q) *Biennial simultaneous license renewal fee*  
23 *for an anesthesiologist assistant*..... 200  
24 2. The Board may prorate the initial license fee for a new  
25 license issued pursuant to paragraph (a), ~~(i)~~ (i) *or* (n) of subsection  
26 1 which expires less than ~~[6]~~ 12 months after the date of issuance.  
27 3. The cost of any special meeting called at the request of a  
28 licensee, an institution, an organization, a state agency or an  
29 applicant for licensure must be paid by the person or entity  
30 requesting the special meeting. Such a special meeting must not be  
31 called until the person or entity requesting the meeting has paid a  
32 cash deposit with the Board sufficient to defray all expenses of the  
33 meeting.  
34 4. If an applicant submits an application for a license by  
35 endorsement pursuant to:  
36 (a) NRS 633.399 or 633.400 and is an active member of, or the  
37 spouse of an active member of, the Armed Forces of the United  
38 States, a veteran or the surviving spouse of a veteran, the Board  
39 shall collect not more than one-half of the fee set forth in subsection  
40 1 for the initial issuance of the license. As used in this paragraph,  
41 “veteran” has the meaning ascribed to it in NRS 417.005.  
42 (b) NRS 633.4336, the Board shall collect not more than one-  
43 half of the fee set forth in subsection 1 for the initial issuance of the  
44 license.





1       **Sec. 19.** NRS 633.511 is hereby amended to read as follows:  
2       633.511 1. The grounds for initiating disciplinary action  
3 pursuant to this chapter are:

4       (a) Unprofessional conduct.

5       (b) Conviction of:

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

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

11           (3) A violation of any of the provisions of NRS 616D.200,  
12 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive;

13           (4) Murder, voluntary manslaughter or mayhem;

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

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

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

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

22           (9) Any offense involving moral turpitude.

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

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

28       (e) Professional incompetence.

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

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

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

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

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

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

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

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

42       (k) Signing a blank prescription form.

43       (l) Knowingly or willfully procuring or administering a  
44 controlled substance or a dangerous drug as defined in chapter 454  
45 of NRS that is not approved by the United States Food and Drug



1 Administration, unless the unapproved controlled substance or  
2 dangerous drug:

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

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

9 (3) Is cannabis being used for medical purposes in  
10 accordance with chapter 678C of NRS; or

11 (4) Is an individualized investigational treatment or  
12 investigational drug or biological product prescribed to a patient  
13 pursuant to NRS 630.3735 or 633.6945.

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

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

20 (o) In addition to the provisions of subsection 3 of NRS  
21 633.524, making or filing a report which the licensee knows to be  
22 false, failing to file a record or report that is required by law or  
23 knowingly or willfully obstructing or inducing another to obstruct  
24 the making or filing of such a record or report.

25 (p) Failure to report any person the licensee knows, or has  
26 reason to know, is in violation of the provisions of this chapter,  
27 except for a violation of NRS 633.4717, or the regulations of the  
28 Board within 30 days after the date the licensee knows or has reason  
29 to know of the violation.

30 (q) Failure by a licensee or applicant to report in writing, within  
31 30 days, any criminal action taken or conviction obtained against the  
32 licensee or applicant, other than a minor traffic violation, in this  
33 State or any other state or by the Federal Government, a branch of  
34 the Armed Forces of the United States or any local or federal  
35 jurisdiction of a foreign country.

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

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

39 (t) Failure to supervise adequately a medical assistant pursuant  
40 to the regulations of the Board.

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

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

44 ~~{(w)}~~ (v) Failure to comply with the provisions of NRS  
45 453.163, 453.164, 453.226, 639.23507, 639.23535 and 639.2391 to



1 639.23916, inclusive, and any regulations adopted by the State  
2 Board of Pharmacy pursuant thereto.

3 ~~[(x)]~~ (w) Fraudulent, illegal, unauthorized or otherwise  
4 inappropriate prescribing, administering or dispensing of a  
5 controlled substance listed in schedule II, III or IV.

6 ~~[(y)]~~ (x) Failure to comply with the provisions of NRS 454.217  
7 or 629.086.

8 ~~[(z)]~~ (y) Failure to comply with the provisions of NRS  
9 441A.315 or any regulations adopted pursuant thereto.

10 ~~[(aa)]~~ (z) Performing or supervising the performance of a pelvic  
11 examination in violation of NRS 629.085.

12 2. As used in this section:

13 (a) "Individualized investigational treatment" has the meaning  
14 ascribed to it in NRS 454.690.

15 (b) "Investigational drug or biological product" has the meaning  
16 ascribed to it in NRS 454.351.

17 **Sec. 20.** Notwithstanding the amendatory provisions of this  
18 act:

19 1. The renewal date of a license issued by the State Board of  
20 Osteopathic Medicine pursuant to the provisions of chapter 633 of  
21 NRS, as those provisions existed before January 1, 2026, except a  
22 license as a physician assistant, a license as an anesthesiologist  
23 assistant, a temporary license or a special license, and which is held  
24 by a person on December 31, 2025, remains January 1, 2026. Such a  
25 license may be renewed in accordance with the applicable  
26 provisions of chapter 633 of NRS, as those provisions existed before  
27 January 1, 2026, and the regulations adopted pursuant thereto.  
28 Thereafter, a licensee who wishes to renew such a license must  
29 renew the license in accordance with the applicable provisions of  
30 chapter 633 of NRS, as amended by this act, and the regulations  
31 adopted pursuant thereto.

32 2. The renewal date of a license as a physician assistant or  
33 anesthesiologist assistant issued by the State Board of Osteopathic  
34 Medicine which is held by a licensee on December 31, 2025,  
35 remains the date set forth on the license. Such a license may be  
36 renewed in accordance with the applicable provisions of chapter 633  
37 of NRS, as amended by this act, and the regulations adopted  
38 pursuant thereto. The Board shall prorate the biennial fee to renew  
39 the license for such a renewal.

40 **Sec. 21.** NRS 630.2535 and 633.473 are hereby repealed.

41 **Sec. 22.** 1. This section becomes effective upon passage and  
42 approval.

43 2. Sections 1 to 21, inclusive, of this act become effective:



- 1 (a) Upon passage and approval for the purpose of adopting any
- 2 regulations and performing any other preparatory administrative
- 3 tasks that are necessary to carry out the provisions of this act; and
- 4 (b) On January 1, 2026, for all other purposes.

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**TEXT OF REPEALED SECTIONS**

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**630.2535 Training required for certain physicians and physician assistants relating to persons with substance use and other addictive disorders and prescribing of opioids; exemption for one licensure period for certain registration; regulations.**

1. The Board shall, by regulation, require each physician or physician assistant who is registered to dispense controlled substances pursuant to NRS 453.231 to complete at least 2 hours of training relating specifically to persons with substance use and other addictive disorders and the prescribing of opioids during each period of licensure. Except as otherwise provided in subsection 2, such training may include, without limitation, training in the screening, brief intervention and referral to treatment approach to substance use disorder. Any licensee may use training required by the regulations adopted pursuant to this section to satisfy 2 hours of any continuing education requirement established by the Board.

2. A physician may not use continuing education in the screening, brief intervention and referral to treatment approach to substance use disorder to satisfy the requirements of subsection 1 for a licensure period during which the licensee also uses such continuing education to satisfy a requirement for continuing education in ethics pursuant to subsection 9 of NRS 630.253.

3. A physician or physician assistant who obtains a registration to treat opioid dependency with narcotic medications in accordance with the Drug Addiction Treatment Act of 2000, 21 U.S.C. §§ 823 et seq., is exempt from the training required by subsection 1 for one period of licensure. A physician or physician assistant may use such registration to satisfy 4 hours of the total number of hours of continuing education required by the Board pursuant to NRS 630.253 during one period of licensure.

**633.473 Training relating to persons with substance use and other addictive disorders and prescribing of opioids; exemption for one licensure period for certain registration; regulations.**

1. The Board shall, by regulation, require each osteopathic physician or physician assistant who is registered to dispense



controlled substances pursuant to NRS 453.231 to complete at least 2 hours of training relating specifically to persons with substance use and other addictive disorders and the prescribing of opioids during each period of licensure. Except as otherwise provided by subsection 2, such training may include, without limitation, training in the screening, brief intervention and referral to treatment approach to substance use disorder. Any licensee may use training required by the regulations adopted pursuant to this section to satisfy 2 hours of any continuing education requirement established by the Board.

2. An osteopathic physician may not use continuing education in the screening, brief intervention and referral to treatment approach to substance use disorder to satisfy the requirements of subsection 1 for a licensure period during which the licensee also uses such continuing education for the purposes of satisfying the requirements of subsection 7 of NRS 633.471.

3. An osteopathic physician or physician assistant who obtains a registration to treat opioid dependency with narcotic medications in accordance with the Drug Addiction Treatment Act of 2000, 21 U.S.C. §§ 823 et seq., is exempt from the training required by subsection 1 for one period of licensure. An osteopathic physician or physician assistant may use such registration to satisfy 4 hours of the total number of hours of continuing education required by the Board pursuant to NRS 633.471 during one period of licensure.







