

**NEVADA STATE BOARD OF MEDICAL EXAMINERS**

**9600 Gateway Drive  
Reno, NV 89521**

**Nick M. Spirtos, M.D., F.A.C.O.G.**  
Board President

**Edward O. Cousineau, J.D.**  
Executive Director



**\* \* \* MINUTES \* \* \***

**LEGISLATIVE SUBCOMMITTEE MEETING**

Held in the Conference Room at the Offices of the  
Nevada State Board of Medical Examiners  
9600 Gateway Drive, Reno, Nevada 89521

and teleconferenced to

The Conference Room at the Offices of the  
Nevada State Board of Medical Examiners  
325 E. Warm Springs Road, Suite 225, Las Vegas, Nevada 89119

***FRIDAY, March 21, 2025– 12:00 p.m.***

***Subcommittee Members Present***

Ms. Maggie Arias-Petrel  
Ms. Pam Beal  
Jason Farnsworth, RRT, MBA  
Col. Eric D. Wade, USAF (Ret.)

***Staff/Others Present***

Sarah A. Bradley, J.D., MBA, *Deputy Executive Director*  
Mercedes Fuentes, *Legal Assistant*  
Mike Sullivan, *Lobbyist*  
Weldon Havins, M.D., *Public Attendee*

## Agenda Item 1

### CALL TO ORDER AND ANNOUNCEMENTS

#### - Roll Call/Quorum

The meeting was called to order by Ms. Bradley at 12:05 p.m.

Ms. Bradley took a roll call and announced there was a quorum.

## Agenda Item 2

### PUBLIC COMMENT

Ms. Bradley asked whether there was anyone in attendance who would like to present public comment. There was no public comment from either the Reno or Las Vegas locations.

## Agenda Item 3

### SENATE AND ASSEMBLY BILLS

Ms. Bradley stated that Dr. Spirtos requested all previous bills that have been reviewed and discussed by the Committee be placed on the Agenda and there were also six new bills for the Committee to discuss and move to take a position on.

#### a. Previously Agendized

##### 1. SB124

Ms. Bradley stated that she had an update regarding the amendments that had been made to this bill from the last time it was discussed by the Committee. She stated that there was a meeting that morning with Senator Doñate and he is very open to changes. Ms. Bradley stated she believes the updated proposed amendment looks very good, with some of the highlights of the new change being that the bill will not be limited to facilities where there is the ACGME residency programs; there is updated information regarding supervision stating that it will be an active license physician who is providing continuous monitoring, regular evaluations and reporting metrics; the Board can do competency evaluations similar to USMLE Step 2 Clinical Skills; requires the applicant to complete Step 3 of the USMLE; adds reporting requirement where the Board will report to the legislature annually of the amount of applications received for both limited and unrestricted licenses as well as the physician specialties and geographic distribution of placement of applicants. Ms. Bradley also stated there are further amendments to be added such as moving the effective date of the bill to July 1, 2026; to name the license type Associate Physician rather than Limited License to avoid confusion of limited licenses that currently go to residents; would also like to limit the specialties that the Associate Physician can practice in, such as non-surgical specialties; clarification that the supervision has to be done by a medical doctor in good standing with a supervision agreement approved by the Board on file and in same specialty and that the Board may, by regulation, establish requirements related to supervision of an Associate Physician; revising the bill to limit the controlled substances that an Associate Physician can prescribe where they could only be able to prescribe what their supervisor can prescribe; making sure that an Associate Physician identify themselves as such to the patient and provide the name of his or her supervising physician; the Associate Physician must wear a badge designating him or her as an Associate Physician in certain medical facilities; add language regarding if the

Associate Physician is out of practice for 24 months; setting the maximum application fee of \$400 and maximum biennium fee of \$800, similar to what is charges of Physician Assistants; Senator Doñate would like the Board to make regulations regarding English proficiency and clinical competency evaluations.

Mr. Farnsworth asked who worked to facilitate the changes, Ms. Bradley answered that it was Senator Doñate, Dr. Spirtos, Ms. Arias-Petrel and Mr. Sullivan. She further added that Senator Doñate would like the Board to be onboard with implementing this bill and therefore he is being flexible to changes that Borad thinks will make this bill work and be used while protecting the public.

Ms. Arias-Petrel state she believes that the amendments look a lot better than the original bill. Ms. Beal stated she likes the changes that were made to the bill and believes this is something that the Board can use.

Ms. Bradley asked the Committee if they would like to take a vote on the bill with the amendments and reflected changes since before it was previously tabled to await these amendments.

Ms. Arias-Petrel moved to support proposed bill SB124 with the proposed amendments, Ms. Beal seconded the motion, Mr. Farnsworth opposed it, and it passed with the majority of Subcommittee members voting in favor of the motion.

## 2. AB170

Ms. Bradley stated that she sent the Subcommittee members a conceptual amendment.

Ms. Beal stated she met with Assemblymember Nadeem and Dr. Spirtos where proposed changes were discussed. Ms. Bradley stated the conceptual amendment does not include the changes that were discussed in this meeting. Ms. Beal stated that there was a suggestion made to include a fee and to include language regarding collaborative physicians having to be physically present with the provider and to be limited to primary care.

Ms. Bradley stated she is still waiting for amendment reflecting all the changes and there was a meeting on Wednesday that was canceled and asked if the Committee would like to table discussion until the next meeting, on or about April 4, 2025.

The Committee members agreed to table decision on AB170.

The Committee agreed that there was nothing further to discuss regarding the remainder previously agendized bills (3-22).

## b. New Bills

### 1. SB186

Ms. Bradley stated that proposed bill SB183 allows registered pharmacists to prescribe drugs or devices that are used for the treatment of health conditions, other than opioid use disorder that are previously diagnosed, self-limiting health conditions, diagnosed after performing a CLIA waived test, or in the professional judgment of the pharmacist, are emergencies that

threaten the health of the patient. Must be an FDA approved treatment and the Pharmacy Board to make regulations that require liability insurance for pharmacists as determined by the Board, establishing the scope of the ability for a registered pharmacist to prescribe drugs and devices, and establishing a standard of care.

Ms. Beal asked who was sponsoring the bill, Ms. Bradley answered Assemblymember Orentlicher. Ms. Beal further stated that there is a lot to this bill and believes it could be potentially unsafe and has concerns.

Mr. Farnsworth stated that he has pharmacists that work with him, and he believes that pharmacists are some of the most clinically intelligent and capable people and personally believes that this bill makes sense in a variety of ways, especially in situations where pharmacists help with anti-vaping and smoking, so for them to have capabilities in the community would be very helpful.

Ms. Beal asked if there was any language that included consultation with the patient's provider. Ms. Bradley answered that she did not see any language regarding that in the bill, however the pharmacy board would have a lot of leeway to make regulations, and they could possibly make a requirement about it, but the current bill doesn't speak to that.

Col. Wade stated that he is not comfortable moving forward in discussions of the bill without the physician members of the Committee present and suggested to table discussions of this bill.

The Committee members agreed to table decision for SB186 until physician members of the Committee were present to discuss.

## 2. AB290

Ms. Bradley stated proposed bill AB290 prescribes requirements for insurance companies when making an adverse determination on a request for prior authorization. Ms. Bradley listed the several requirements to the Committee members.

Col. Wade stated that he believed the Committee was in need of input from the physician members of the Committee. Mr. Farnsworth agreed with Col. Wade.

The Committee members agreed to table decision for AB290 until physician members of the Committee were present to discuss.

## 3. AB295

Ms. Bradley asked the Committee if they wanted to table AB295 as well until there were physician members present since this bill involves insurance, to which the Committee agreed.

Discussion of AB295 was tabled until physician members of the Committee were present.

## 4. SB171

Ms. Bradley stated proposed bill SB171 adds to NRS 629 that a licensing board cannot disqualify a person from licensure or discipline the licensee if they provide or assist in the

provision of medically necessary gender-affirming care, or if care was provided to a minor, that the parent consented to.

Mr. Farnsworth asked if the Board could still initiate discipline if the physician performed an inappropriate surgery and wanted to clarify that the physician would not be disciplined or disqualified for licensure just for performing gender affirming care. Ms. Bradley confirmed that discipline would only be initiated for substandard care.

Mr. Farnsworth stated he supported the bill and believes the Committee should support it. Col. Wade agreed.

Mr. Farnsworth moved to support proposed bill SB171, Col. Wade seconded the motion, and Ms. Beal and Ms. Arias-Petrel abstained, and the motion failed.

#### 5. SB249

Ms. Bradley stated proposed bill SB249 removes restrictions for CRNAs to work only in critical access hospitals. Under this bill, CRNAs would be able to order, prescribe, possess, and administer controlled substances to patients under the care of a licensed physician. CRNAs will still require supervision of a physician licensed pursuant to NRS 630 or 633, but it removes the limitation of critical access hospitals.

Ms. Beal and Col. Wade suggested that the Committee table discussions of this bill until physician members of the Committee were present.

The Committee members agreed to table decision for SB249 until physician members of the Committee were present to discuss.

#### 6. SB262

Ms. Bradley stated proposed bill SB262 moves the Advisory Council currently on Graduate Medical Education grant program (GME) to the Department of Health and Human Services and adds that the current account for funds for GME must be used only to award grants to institutions in Nevada operating programs for residency training that are ACGME approved.

Ms. Beal asked where GME was located originally. Ms. Bradley answered that the GME is in the Office of Science Innovation and Technology in the Governor's Office and would now be in the Department of Health and Human Services.

Ms. Beal stated she believes the Committee should support the bill.

Ms. Beal moved to support proposed bill SB262, Mr. Farnsworth seconded the motion, and it passed with all Subcommittee members voting in favor of the motion.

#### 7. SB269

Ms. Bradley stated that proposed bill SB269 allows for any taxpayer who has to pay tax pursuant to NRS 363A.130 (2% payroll tax due to the State) may receive a credit against the tax otherwise due for any donation of money made by the taxpayer to the GME Grant Program established by NRS 223.637. There is a maximum of \$4 million dollars for this coming fiscal

year and goes up each year after that. The program is managed by the Office of Science, Innovation, and Technology (OSIT). Awards fund to any ACGME-accredited institution in Nevada.

Mr. Farnsworth stated his support for the bill.

Mr. Farnsworth moved to support proposed bill SB269, Ms. Arias-Petrel seconded the motion, and it passed with all Subcommittee members voting in favor of the motion.

#### 8. SB29

Ms. Bradley stated that proposed bill SB29 allows for the Department of Health and Human Services to develop and implement a system of reimbursement for services provided to Medicaid recipients through an accountable care organization that focuses on providing high-quality primary care. The system must include incentive payments and other value-based payment arrangements. Accountable care organization means a group of providers of health care, medical facilities and other persons providing health services who have entered into a partnership to coordinate care and utilize innovated approaches to deliver care to a specified population.

Ms. Beal asked who sponsored the bill. Ms. Bradley answered that it was on behalf of the Patient Protection Commission. Ms. Beal added that she believed that input from the physician members of the Committee would be beneficial and suggested to table discussion of the bill.

The Committee members agreed to table decision for SB29 until physician members of the Committee were present to discuss.

#### 9. SB9

Ms. Bradley stated proposed bill SB9 revises provisions related to Medicaid. Insurers have to respond within 60 days regarding claims for payments or for eligibility for Medicaid payments that have been assigned to a state agency. Insurers cannot deny claims based on the lack of prior authorization if the state agency authorized the medical item or service.

Mr. Farnsworth stated that this bill seems complex and is not sure if it would make sense for the Committee to take a position on it. Mr. Farnsworth further stated he believes it would be beneficial to table discussions.

The Committee members agreed to table decision for SB9 until physician members of the Committee were present to discuss.

#### Agenda Item 4

#### PUBLIC COMMENT

Ms. Bradley asked whether there was anyone in attendance who would like to present public comment. There was no public comment in the Reno or Las Vegas Offices.

Agenda Item 5  
ADJOURNMENT

The meeting was adjourned at 12:50 p.m.

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