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

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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

and via Teams

FRIDAY, AUGUST 14, 2026 – 2:30 p.m.

Subcommittee Members Present
Ms. Pamela J. Beal, *Chair*
Joseph Olivarez, P.A.-C
Jason B. Farnsworth, RRT, MBA
Hugh L. Bassewitz, M.D., FAAOS
Ms. Maggie Arias-Petrel
Ms. Kathleen A. Conaboy
Chowdhury H. Ahsan, M.D., FACC

Staff Present
Sarah A. Bradley, J.D., MBA, Deputy Executive Director
Mercedes Fuentes, Senior Legal Assistant
Kory Linn, Chief of Licensing
Lynna Pili-Eskeets, Investigations Administrative Assistant
Henna Rasul, Senior Deputy Attorney General

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Agenda Item 1
CALL TO ORDER AND INTRODUCTIONS

The meeting was called to order by Ms. Pamela J. Beal, at 2:30 p.m. Ms. Bradley took roll call and announced there was a quorum.

Agenda Item 2
PUBLIC COMMENT

Ms. Beal stated this was the time for members of the public to provide general public comments.

There was no public comment from the Board's Reno and Las Vegas offices or from the Teams attendees.

Agenda Item 3
JUNE 26, 2026 LEGISLATIVE SUBCOMMITTEE MEETING MINUTES

Ms. Beal presented the minutes from the Subcommittee's meeting held on June 26, 2026. Dr. Bassewitz asked why the Subcommittee was approving only the minutes from the June meeting and not the July meeting, as well. Ms. Bradley explained that Nevada's Open Meeting Law (OML) requires the Subcommittee to approve the minutes of a previous meeting not later than 45 days after the meeting or the next meeting meeting, whichever is later. Because the July 17, 2026, meeting took place less than 45 days after the June 26, 2026 meeting, the June minutes were not required to be presented for approval at the July meeting, and, for that same reason, the July meeting minutes are not required to be approved at this meeting.

Ms. Beal asked if it would be possible to get caught up in reviewing and approving meeting minutes, or if the Subcommittee would always be one meeting behind. Ms. Bradley stated that Board staff will make every effort to expedite the review and approval of the meeting minutes; however, due to the frequency of the Subcommittee meetings and with the legal division only having one legal assistant, it may be difficult to be more expeditious. The Board staff will always ensure, though, that the requirements of the OML are followed.

Dr. Bassewitz moved that the Subcommittee approve the minutes of the June 26, 2026 Legislative Subcommittee Meeting, Ms. Conaboy seconded the motion, and it passed, with all Subcommittee members voting in favor of the motion.

Agenda Item 4
PHYSICIAN ASSISTANT (PA) COMPACT

Ms. Bradley provided a handout to the Subcommittee that provides an overview of the Physician Assistant (PA) Licensure Compact, with links to its website and the language of the bill. She explained that, if the Board wanted to enact the Compact, it would need to adopt the Compact Model Language. Ms. Bradley compared the bill to the existing Interstate Medical Licensure Compact (IMLC), which became part of its own chapter of the Nevada Revised Statutes (NRS), NRS Chapter 629A, rather than part of Chapter 630 (M.D.s) or Chapter 633 (D.O.s). She further noted that a PA Compact would likely follow a similar structure in its own chapter of the NRS, given that both this Board and the Board of Osteopathic Medicine (D.O. Board) license PAs.

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Ms. Conaboy referenced the minutes from the June 26, 2026, meeting, noting that the Nevada Health Authority (NVHA) expressed interest in carrying the PA Compact bill and she asked whether this agenda item was about taking the bill over from them or supporting them in their effort. Ms. Bradley explained that this item was placed on the agenda to allow the Subcommittee an opportunity to deliberate on the matter and potentially take an official position. She clarified that this Board is uniquely positioned with its own lobbyist to support or oppose individual bills, rather than having to submit bill draft requests to the Governor's office ahead of elections and her intention was to gauge the Subcommittee's stance on the legislation and, if the Subcommittee approves, allow the Board to work with stakeholders to get the legislation passed.

The Subcommittee discussed the potential roles other organizations might play in this legislation, including the NVHA, the National Commission on Certification of Physician Assistants (NCCPA), the Nevada Academy of Physician Assistants (NAPA), and the D.O. Board.

Dr. Bassewitz expressed support for increasing practice accessibility in Nevada for PAs licensed in other states. Ms. Arias-Petrel commented that it was important for the Board to support the PA Compact, in conjunction with the D.O. Board, since PAs often hold licenses from both Boards. Mr. Olivarez reported that there is no opposition to the PA Compact from the Nevada PA community, explaining that the reason that the bill failed in the last legislative session was due to the inclusion of language that affected nurses on the same bill, which was opposed by the Nevada nursing community, rather than any opposition to the PA provisions. Ms. Bradley added that she has a meeting with the D.O. Board on August 27, 2026, in Las Vegas wherein she will be discussing this issue as well as possibly legislative changes related to anesthesiologist assistants.

Ms. Conaboy inquired about the Board's responsibilities in licensing with the PA Compact, potential fees charged by the NCCPA, as well as the database that the NCCPA has created, where that data is stored, and if the Board would have a separate database to check it in addition to its own database when licensing PAs. Ms. Bradley explained that, currently, all applicants for licensure with the Board must do a self-query with the National Practitioner Data Bank (NPDB) and send the results to the Board, which informs Board staff of insurance payouts or disciplinary history, and that licensure as a PA requires that applicants are certified by the NCCPA. Federal law mandates that any disciplinary actions taken by any state medical board against a PA are reported to the NPDB. Under the PA Compact, the Board would receive a letter from the Compact confirming that the applicant is licensed in good standing in a Compact member state prior to licensure. The Compact permits the Board to require that the applicant complete any Nevada-specific licensure requirements, as well. The Compact will automatically inform the Board of disciplinary actions taken against a Nevada PA licensed through the Compact by other member states.

Ms. Beal asked if the process would mirror the current process of licensing medical doctors under the IMLC. Ms. Bradley confirmed they would be very similar, though some terminology and administrative oversight would differ due to it being a separate Compact Commission and separate Compact regulations.

The Subcommittee discussed the meaning of the word "privilege" as it is used in the compact, and how it may or may not cause the process of licensing a PA under the compact to be different from licensing a medical doctor under the IMLC.

Following discussions on whether to take immediate action or await further external input, Ms. Beal noted her support for the PA Compact, however she does not believe that the Subcommittee is ready to sponsor or draft any legislation to join it. Mr. Olivarez suggested voting to officially support the

PA Compact in concept while investigating the plans of other organizations before sponsoring a bill, with which Ms. Conaboy and Ms. Arias-Petrel both agreed. Ms. Beal asked Ms. Bradley to maintain a separate tracking document for concepts supported by the Subcommittee, but for which the Subcommittee may not recommend that the Board bring the legislation.

The Subcommittee discussed the lack of certainty about the plans or stances of other interested parties, including the NVHA, other health care licensing boards, and the Governor's Office. Ms. Beal proposed voting to support the PA Compact now and adding it to a future agenda item once the Subcommittee and Board staff have more information about the legislative plans of other stakeholders.

Ms. Arias-Petrel moved to support the PA Compact; Mr. Olivarez seconded, and the motion passed unanimously, with all Subcommittee members voting in favor of the motion.

Agenda Item 5
MEDICAL SPA SAFETY AND REGULATION

Ms. Beal introduced the topic of regulating medical spas in Nevada and clarified that this agenda item was for discussion only and no action will be taken. The Subcommittee expressed growing concerns regarding the growing increase in problematic cases, consumer safety risks, and regulatory gaps surrounding not only medical spas, but IV hydration clinics across Nevada and nationwide.

Ms. Arias-Petrel expressed her deep concern over the issue and emphasized the dire need for government oversight of medical spas, especially in Las Vegas. She noted that the Board's fundamental charge to protect the safety of the public means that it must act as soon as possible, especially with frequency of problematic cases, misleading patient practices, and facilities operating without proper on-site supervision. Ms. Conaboy agreed.

Ms. Bradley provided several model legislation and reference materials for the Subcommittee's review, explaining that her intent was to provide the Subcommittee with information and give them the tools to evaluate potential bills expected in the upcoming legislative session. Her overview included a draft by the American Society of Dermatologists (ASD) that defines medical spas and clarifies the roles of supervising physicians and medical directors. She noted that the definition and role of a medical director may be potentially relevant to the duties and role of medical directors in other settings. Ms. Bradley also provided the Subcommittee with a copy of legislation from the State of Tennessee that created a mandatory state registry for medical spas, requiring payment of a registration fee, and that the medical spa provided a physical address and designated medical director or supervising physician to ensure medical spas can be tracked and located. She compared this structure with the Nevada State Board of Cosmetology (NSBC), which conducts regular inspections of all cosmetology establishments in the State of Nevada, as well as complaint-based inspections of establishments. Ms. Bradley then discussed the statutory provisions relating to the NSBC oversight of the practice of advanced esthetics in physician offices, noting concerns that physicians and other stakeholders have raised about this. She mentioned that she has a meeting on August 19, 2026, with the Executive Director of the NSBC to discuss this issue and other related issues.

Ms. Beal asked if this legislation would allow an Advanced Practice Registered Nurse (APRN) to be a medical director of a medical spa. Ms. Bradley answered that it depends on the state and noted that the model legislation specifically uses the term "physician" and indicated that she would look into this further. Ms. Beal and Mr. Olivarez voiced concerns regarding APRNs who maintain full practice independence, can act as their own medical directors, and may operate medical spas without Board

oversight. They further emphasized the necessity of collaborating with the Nevada State Board of Nursing (NSBN), the D.O. Board, the Nevada State Board of Pharmacy (NSBP) and NSBC on these issues to address overlapping jurisdictions and possible regulatory conflicts.

Ms. Bradley stated the NVHA's working group on medical spas, includes representatives from this Board, the NSBN, the D.O. Board, and the NSBP. However, it is her understanding that the NVHA is not planning on bringing legislation regarding medical spas until the 2029 session. She further mentioned that the City of Henderson and the City of Las Vegas both used their business licensing divisions and municipal codes to better regulate prostitution in the cities and successfully moved much of it outside of the cities. Ms. Bradley speculated that working directly with local governments, such as the cities and counties, could be a viable strategy for better regulation of medical spas.

Mr. Olivarez emphasized the importance of including the NSBN on any action taken against medical spas. He stated that, while it may be better to pursue this issue in the 2029 Legislative Session, it is important to start laying the groundwork for these changes now. Ms. Bradley agreed and added that the NSBC and the Nevada State Board of Dental Examiners should also be included in these discussions.

Ms. Bradley then presented potential legislative language that creates a joint medical spa registry maintained collaboratively by this Board, the D.O. Board, and the NSBN, which would grant all three boards inspection authority comparable to the inspections conducted by the NSBC.

Ms. Arias-Petrel commented that other cosmetology businesses are more regulated than medical spas, noting that beauty salons are inspected very thoroughly, and she believes that medical spas should face higher scrutiny because their procedures are far more invasive. She further recounted visiting a medical spa where the owner, an APRN, was absent and at her full-time job elsewhere.

Ms. Conaboy inquired about the requirement for malpractice insurance in the model legislation drafted by the ASD. Ms. Bradley explained that malpractice is included in the ASD draft of the model legislation and that could be removed in Nevada, if the Board chose to do so because Nevada law does not currently mandate malpractice insurance for the Board's licensees.

A member of the public, Dr. Joseph Adashek, M.D., F.A.C.O.G., an OB-GYN in Las Vegas, expressed interest in seeing regulation and oversight for IV hydration clinics due to high-risk patient complications, such as fluid overhydration and kidney damage. Ms. Arias-Petrel expressed concern about medical spas that offer IV hydration with no supervising physician or APRN on-site. The Subcommittee members agreed that defining the specific scope of services offered by medical spas versus standalone IV hydration clinics is necessary.

Ms. Beal concluded the discussion by directing Ms. Bradley to research medical spa legislation in other states, specifically regarding whether they permit APRNs to act as medical directors, and to research what other state stakeholders plan to introduce in the upcoming legislative session. The Subcommittee agreed to place this topic back on the agenda for the next meeting.

Agenda Item 6
LOBBYIST UPDATE

Mr. Sullivan was absent from the meeting and Ms. Bradley provided his update on his behalf. Mr. Sullivan's written report summarized the August 11, 2026 meeting of the Nevada Legislature's Joint Interim Standing Committee on Health and Human Services (JISC on HHS). The JISC on HHS focused

heavily on maternal and neonatal outcomes, birthing centers, non-hormonal menopause treatments, and a Maternal Health Center of Excellence, as well as the creation of a center for maternal health care inside of the Nevada System of Higher Education. While the proposals may impact licensees in certain areas, such as substance abuse and health insurance fraud, they do not directly require Board action or, for right now, affect the Board.

Mr. Olivarez excused himself from the meeting early due to work obligations, and the Subcommittee thanked him for his attendance.

Ms. Bradley also reported that approximately 400 bill drafts requests have been filed, with at least 30 of them relating to health care, and noted upcoming deadlines of 84 days until the general election and 67 days before early voting.

Ms. Beal asked if in the future when Mr. Sullivan is attending a Subcommittee meeting, if he could prepare and provide an informational summary, like the one provided today, in advance for future meetings to allow for more extended review and discussion. Ms. Bradley explained that she would be glad to provide the notes that Mr. Sullivan sent to her to the Subcommittee for review, if the Subcommittee would find that helpful. Ms. Beal stated that the Subcommittee would like to receive them.

Agenda Item 7
CURRENT APPROVED STATUTORY CHANGES TO PURSUE IN THE 2027 LEGISLATIVE SESSION

Ms. Bradley presented a list of all proposed statutory changes approved by the Subcommittee. She reported that she added the proposed changes to NRS 630.100 to allow meetings to be held fully virtually that the Subcommittee had approved in the previous meeting, but was still working on NRS 630.307, regarding changes hospital reporting requirements.

Mr. Farnsworth asked if Ms. Bradley had followed up with his contact at Renown Hospital about her thoughts on the hospital reporting. Ms. Bradley said she had not but would email her that day.

Ms. Beal asked for clarification on the difference between Agenda Items 7 and 8. Ms. Bradley clarified that Agenda Item 7 covers recapping proposed legislative changes already been approved by the Subcommittee, whereas Agenda Item 8 is reserved for discussing bills or changes to be placed on latter agendas.

Ms. Conaboy asked about the statutory definition of an administrative physician. Ms. Bradley explained that administrative physician is defined in NRS 630.007, noting that these are doctors who do not examine or treat patients in clinical settings. Currently, as the statute is written, the language states that limitation clearly only in subsection three (3). Because this limitation is intended to apply to all administrative physicians, the Subcommittee previously approved a proposal to move that language into the main body of the statute to ensure that it is clear that it applies to all three subsections. Ms. Bradley emphasized the importance of this change given that the legislature removed the optional clinical competency assessment for administrative physicians during the previous session, at the Board's request because administrative physicians do not practice clinically.

The Subcommittee began a discussion about the role of administrative physicians. Ms. Beal shared an anecdote from a recent Board meeting regarding a physician seeking an administrative license. Dr. Bassewitz recalled meeting physicians in the Governor's Cabinet and insurance executives

with administrative physician licenses. Ms. Conaboy asked whether administrative physicians establish standards of care for insurance companies or oversee prior authorizations. Dr. Bassewitz explained that high-ranking insurance executives who set policy guidelines generally hold administrative physician licenses, whereas the physicians he works with in his practice maintain full clinical physician licenses.

Dr. Ahsan questioned the necessity of licensure of administrative physicians. Ms. Linn, Chief of Licensing for the Board, explained that most applicants seek administrative licenses for roles where licensure is not strictly mandated by statute, but is required by their employers or insurers.

Ms. Bradley offered to research how other states define administrative physicians, whether Nevada should more precisely define prohibited clinical activities for administrative physicians, and whether utilization review should be explicitly listed as clinical or administrative.

Agenda Item 8
OTHER STATUTORY CHANGES NEEDED

Ms. Beal asked the Subcommittee if any members wanted to bring forward any additional changes they would like to see in the future.

Ms. Beal expressed concern about the use of AI in medicine, particularly when it comes to making decisions about patient care. She stressed the importance of Nevada and this Board leading the discussion and regulation of this issue by clearly defining and labeling AI as tools rather than treating them as licensable medical providers, and that they should not directly deliver patient care. Dr. Bassewitz inquired whether any states are actually considering licensing AI to practice medicine, to which Ms. Conaboy and Ms. Beal identified Utah as a state that was exploring AI-automated prescription refills.

Ms. Beal added that if there were any other changes the Subcommittee members wanted to include on a future agenda meeting, to email Ms. Bradley.

Agenda Item 9
STAFF COMMENTS

Ms. Conaboy expressed curiosity about the impact of AI on medical education, proposing that the Subcommittee invite either Dr. Paul Hauptman, Dean of the University of Nevada, Reno School of Medicine, or Dr. Alison Netski, Interim Dean of the Kirk Kerkorian School of Medicine at the University of Nevada, Las Vegas, to a future meeting.

Ms. Beal asked whether the upcoming September Board meeting and Board retreat would interfere with the Subcommittee's scheduled September meeting. Ms. Bradley answered that the next Subcommittee meeting would take place the week following the Board meeting. The Subcommittee discussed and agreed to cancel the scheduled September Legislative Subcommittee meeting.

Agenda Item 10
PUBLIC COMMENT

Ms. Beal stated this was the time for members of the public to provide general public comment.

There was no public comment from Teams attendees or at the Board's Reno and Las Vegas offices.

Agenda Item 11
ADJOURNMENT

Mr. Farnsworth moved to adjourn the meeting, Ms. Conaboy seconded the motion, and it passed with all Subcommittee members voting in favor. Ms. Beal thanked everyone for attending.

The meeting was adjourned at 4:04 p.m.

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