

REQUIRES TWO-THIRDS MAJORITY VOTE

(§§ 2-4, 18)

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FIRST REPRINT

A.B. 56

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; revising the provisions relating to 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; setting forth certain grounds for the State Board of Osteopathic Medicine to initiate disciplinary action against a licensee or deny licensure to an applicant; revising requirements for the issuance by the Board of a license to practice osteopathic medicine; providing for the biennial renewal of certain licenses issued by the Board; 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. (NRS
- 4 630.253, 633.471) **Section 1** of this bill eliminates provisions requiring the Board
- 5 of Medical Examiners to require the completion of a course of instruction relating



to the medical consequences of an act of terrorism that involves the use of a weapon of mass destruction. **Section 12** of this bill increases, from 35 to 40, the number of hours of continuing medical education certain providers of health care licensed by the State Board of Osteopathic Medicine are required to complete during each period of licensure.

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

Section 3 revises provisions setting forth the maximum amount of various fees charged by the Board. **Section 3** increases the maximum amount of certain fees, removes certain fees and establishes the maximum amount of a fee the Board is required to charge for certain services provided by the Board.

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

Existing law sets forth the requirements for the issuance by the State Board of Osteopathic Medicine of a license to practice osteopathic medicine, including, among other requirements, the requirement that an applicant must: (1) have graduated from a school of osteopathic medicine before 1995 and completed a hospital internship or certain postgraduate training; (2) have completed 3 years, or such other length of time as required by certain programs of postgraduate medical education as a resident in the United States or Canada; or (3) be a resident who is enrolled in a postgraduate training program in this State, have completed 24 months of the program and have committed, in writing, that he or she will complete the program. (NRS 633.311) **Section 6.7** of this bill revises the requirements for a person who is a resident enrolled in a postgraduate training program to obtain a license to allow a license to be issued to a resident who is enrolled in a postgraduate training program in the United States or Canada that is approved by the Board or certain other organizations who has completed 24 months of the program and who has committed, in writing, that he or she will complete the program. **Section 6.7** also provides that if, after issuing a license to practice osteopathic medicine, the Board obtains information that differs from the information provided by the applicant or otherwise received by the Board, the Board may take certain action against the applicant.

Section 6.3 of this bill provides that obtaining, maintaining or renewing or attempting to obtain, maintain or renew a license to practice osteopathic medicine by bribery, fraud or misrepresentation or by any false, misleading, inaccurate or incomplete statement constitutes grounds for the Board to initiate disciplinary action against a licensee and to deny licensure to an applicant.

Existing law, with certain exceptions, provides for the annual renewal of a license to practice osteopathic medicine issued by the State Board of Osteopathic Medicine and sets forth a renewal date for such a license as January 1 of each



calendar year. (NRS 633.471) **Section 12** instead provides, with certain exceptions, for the biennial renewal of such a license and establishes the renewal date for such a license as December 31 of each even-numbered year.

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

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

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

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

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



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

Section 1. NRS 630.253 is hereby amended to read as follows:

630.253 1. The Board shall, as a prerequisite for the:

- (a) Renewal of a license as a physician assistant;
- (b) Renewal of a license as an anesthesiologist assistant; or
- (c) Biennial registration of the holder of a license to practice medicine,

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

2. These requirements:

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

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

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

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

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

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

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

~~(c)}~~ Must provide for the completion by a holder of a license to practice medicine of a course of instruction within 2 years after initial licensure that provides at least 2 hours of instruction on evidence-based suicide prevention and awareness as described in subsection ~~[6.]~~ 5.

~~{(d)}~~ (c) Must provide for the completion of at least 2 hours of training in the screening, brief intervention and referral to treatment approach to substance use disorder within 2 years after initial licensure.

~~{(e)}~~ (d) Must provide for the biennial completion by each psychiatrist and each physician assistant practicing under the supervision of a psychiatrist of one or more courses of instruction



that provide at least 2 hours of instruction relating to cultural competency and diversity, equity and inclusion. Such instruction:

(1) May include the training provided pursuant to NRS 449.103, where applicable.

(2) Must be based upon a range of research from diverse sources.

(3) Must address persons of different cultural backgrounds, including, without limitation:

(I) Persons from various gender, racial and ethnic backgrounds;

(II) Persons from various religious backgrounds;

(III) Lesbian, gay, bisexual, transgender and questioning persons;

(IV) Children and senior citizens;

(V) Veterans;

(VI) Persons with a mental illness;

(VII) Persons with an intellectual disability, developmental disability or physical disability; and

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

~~[(e)]~~ (e) Must allow the holder of a license to receive credit toward the total amount of continuing education required by the Board for the completion of a course of instruction relating to genetic counseling and genetic testing.

~~[(e)]~~ (f) Must provide for the completion by a physician or physician assistant who provides or supervises the provision of emergency medical services in a hospital or primary care of at least 2 hours of training in the stigma, discrimination and unrecognized bias toward persons who have acquired or are at a high risk of acquiring human immunodeficiency virus within 2 years after beginning to provide or supervise the provision of such services or care.

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

~~—4.]~~ The Board shall encourage each holder of a license who treats or cares for persons who are more than 60 years of age to receive, as a portion of their continuing education, education in geriatrics and gerontology, including such topics as:

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



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

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

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

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

~~[6.]~~ 5. The Board shall require each holder of a license to practice medicine to receive as a portion of his or her continuing education at least 2 hours of instruction every 4 years on evidence-based suicide prevention and awareness, which may include, without limitation, instruction concerning:

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

(b) Approaches to engaging other professionals in suicide intervention; and

(c) The detection of suicidal thoughts and ideations and the prevention of suicide.

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

(a) Recognizing the symptoms of pediatric cancer; and

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

~~[8.]~~ 7. A holder of a license to practice medicine may not substitute the continuing education credits relating to suicide prevention and awareness required by this section for the purposes of satisfying an equivalent requirement for continuing education in ethics.

~~[9.]~~ 8. Except as otherwise provided in NRS 630.2535, a holder of a license to practice medicine may substitute not more than 2 hours 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.] 9. 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] , "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
without a license. Such practice constitutes grounds for disciplinary
action against the physician assistant in accordance with the
regulations adopted by the Board pursuant to NRS 630.275.



1 5. ~~{The Board shall exempt an inactive physician assistant from~~
2 ~~paying the applicable fee for biennial registration prescribed by~~
3 ~~NRS 630.268.~~

4 ~~—6.}~~ Before resuming the practice of medicine or practice as a
5 physician assistant in this State, the inactive licensee must:

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

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

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

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

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

15 ~~{7.}~~ 6. If the Board determines that the conduct or competence
16 of the licensee during the period of inactive status would have
17 warranted denial of an application for a license to practice medicine
18 or practice as a physician assistant in this State, the Board may
19 refuse to place the licensee on active status.

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

21 630.268 1. The Board shall charge and collect not more than
22 the following fees:

23	
24	For application for and issuance of a license to
25	practice as a physician, including <i>a license as an</i>
26	<i>administrative physician or</i> a license by
27	endorsement [\$600] \$800
28	For application for and issuance of a temporary,
29	locum tenens, limited, restricted, authorized
30	facility, special, special purpose or special event
31	license..... [400] 600
32	For renewal of a limited, restricted, authorized
33	facility or special license..... [400] 600
34	For application for and issuance of a license as a
35	physician assistant, including a license by
36	endorsement <i>and any temporary license</i> [400] 600
37	For application for and issuance of a simultaneous
38	license as a physician assistant..... 200
39	For biennial registration of a physician assistant..... 800
40	For biennial simultaneous registration of a
41	physician assistant..... 400
42	For biennial registration of a physician [800] 1,000



For application for and issuance of a license as a perfusionist or practitioner of respiratory care <i>including any temporary license to practice perfusion and any temporary license to provide respiratory care as an intern</i>	[\$400] \$600
For biennial renewal of a license as a perfusionist	600
For application for and issuance of a license or temporary license to practice as an anesthesiologist assistant.....	[400] 600
For application for and initial issuance of a simultaneous license as an anesthesiologist assistant	[200] 400
For biennial registration of an anesthesiologist assistant	800
For biennial simultaneous registration of an anesthesiologist assistant.....	400
For biennial registration of a practitioner of respiratory care.....	600
For biennial registration for a physician who is on inactive status	600
<i>For biennial registration for a physician assistant who is on inactive status.....</i>	400
For written verification of licensure	[50] 100
[For a duplicate identification card.....]	25]
For a duplicate [license] wall certificate	[50] 100
[For computer printouts or labels	500]
For verification of a listing of physicians, per hour	20]
For furnishing a <i>custom</i> list of [new physicians] <i>licensees or a list of newly licensed licensees</i>	100

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

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

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

(a) NRS 630.1607, and the applicant is an active member of, or the spouse of an active member of, the Armed Forces of the United



States, a veteran or the surviving spouse of a veteran, the Board shall collect not more than one-half of the fee set forth in subsection 1 for the initial issuance of the license. As used in this paragraph, “veteran” has the meaning ascribed to it in NRS 417.005.

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

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

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

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

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

1. The educational and other qualifications of applicants.
2. The required academic program for applicants.
3. The procedures for applications for and the issuance of licenses.

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

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

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

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

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

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



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

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

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

Sec. 5. (Deleted by amendment.)

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

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

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

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

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

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

(c) Any communication between:

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

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

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



5. The formal complaint or other document filed by the Board to initiate disciplinary action and all documents and information considered by the Board when determining whether to impose discipline are public records.

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

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

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

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

(c) Any malpractice insurance maintained by the licensee.

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

Sec. 6.3. Chapter 633 of NRS is hereby amended by adding thereto a new section to read as follows:

Obtaining, maintaining or renewing or attempting to obtain, maintain or renew a license to practice osteopathic medicine by bribery, fraud or misrepresentation or by any false, misleading, inaccurate or incomplete statement constitutes grounds for the Board to initiate disciplinary action against a licensee pursuant to NRS 633.511 and to deny licensure to an applicant.

Sec. 6.7. NRS 633.311 is hereby amended to read as follows:

633.311 1. Except as otherwise provided in NRS 633.315 and 633.381 to 633.419, inclusive, an applicant for a license to practice osteopathic medicine may be issued a license by the Board if:

(a) The applicant is 21 years of age or older;

(b) The applicant is a graduate of a school of osteopathic medicine;

(c) The applicant:

(1) Has graduated from a school of osteopathic medicine before 1995 and has completed:

(I) A hospital internship; or



(II) One year of postgraduate training that complies with the standards of intern training established by the American Osteopathic Association;

(2) Has completed 3 years, or such other length of time as required by a specific program, of postgraduate medical education as a resident in the United States or Canada in a program approved by the Board, the Bureau of Professional Education of the American Osteopathic Association or the Accreditation Council for Graduate Medical Education; or

(3) Is a resident who is enrolled in a postgraduate training program in ~~this State;~~ *the United States or Canada that is approved by the Board, the Bureau of Professional Education of the American Osteopathic Association, the Accreditation Council for Graduate Medical Education or, as applicable, their successor organizations,* has completed 24 months of the program and has committed, in writing, that he or she will complete the program;

(d) The applicant applies for the license as provided by law;

(e) The applicant passes:

(1) All parts of the licensing examination of the National Board of Osteopathic Medical Examiners;

(2) All parts of the licensing examination of the Federation of State Medical Boards;

(3) All parts of the licensing examination of the Board, a state, territory or possession of the United States, or the District of Columbia, and is certified by a specialty board of the American Osteopathic Association or by the American Board of Medical Specialties; or

(4) A combination of the parts of the licensing examinations specified in subparagraphs (1), (2) and (3) that is approved by the Board;

(f) The applicant pays the fees provided for in this chapter; and

(g) The applicant submits all information required to complete an application for a license.

2. An applicant for a license to practice osteopathic medicine may satisfy the requirements for postgraduate education or training prescribed by paragraph (c) of subsection 1:

(a) In one or more approved postgraduate programs, which may be conducted at one or more facilities in this State or, except for a resident who is enrolled in a postgraduate training program in this State pursuant to subparagraph (3) of paragraph (c) of subsection 1, in the District of Columbia or another state or territory of the United States;

(b) In one or more approved specialties or disciplines;

(c) In nonconsecutive months; and

(d) At any time before receiving his or her license.



3. Notwithstanding any provision of this chapter to the contrary, if, after issuing a license to practice osteopathic medicine, the Board obtains information from a primary or other source of information and that information differs from the information provided by the applicant or otherwise received by the Board, the Board may:

(a) Temporarily suspend the license;

(b) Promptly review the differing information with the Board as a whole or in a committee appointed by the Board;

(c) Declare the license void if the Board or a committee appointed by the Board determines that the information submitted by the applicant was false, fraudulent or intended to deceive the Board;

(d) Refer the applicant to the Attorney General for possible criminal prosecution pursuant to NRS 633.741; or

(e) If the Board temporarily suspends the license, allow the license to return to active status subject to any terms and conditions specified by the Board, including:

(1) Placing the licensee on probation for a specified period with specified conditions;

(2) Administering a public reprimand;

(3) Limiting the practice of the licensee;

(4) Suspending the license for a specified period or until further order of the Board;

(5) Requiring the licensee to participate in a program to correct an alcohol or other substance use disorder;

(6) Requiring supervision of the practice of the licensee;

(7) Imposing an administrative fine not to exceed \$5,000;

(8) Requiring the licensee to perform community service without compensation;

(9) Requiring the licensee to take a physical or mental examination or an examination testing his or her competence to practice osteopathic medicine;

(10) Requiring the licensee to complete any training or educational requirements specified by the Board; and

(11) Requiring the licensee to submit a corrected application, including the payment of all appropriate fees and costs incident to submitting an application.

4. If the Board determines after reviewing the differing information to allow the licensee to remain in active status, the action of the Board is not a disciplinary action and must not be reported to any national database. If the Board determines after reviewing the differing information to declare the license void, its action shall be deemed a disciplinary action and shall be reportable to national databases.



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

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

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

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

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

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

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

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

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

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

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

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

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

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



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

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

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

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

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

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

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

1. The educational and other qualifications of applicants.
2. The required academic program for applicants.
3. The procedures for applications for and the issuance *and renewal* of licenses.

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

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

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

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

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

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

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



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

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

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

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

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

633.471 1. Except as otherwise provided in subsection 15 and NRS 633.491, every holder of a license, except a physician assistant or an anesthesiologist assistant, issued under this chapter, except a temporary, ~~{or a}~~ special *or authorized facility* license, may renew the license on or before ~~{January 1}~~ *December 31* of each ~~{calendar}~~ *even-numbered* year after its issuance by:

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

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

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

(d) Subject to subsection 14, submitting evidence to the Board that in the ~~{year}~~ *biennium* preceding the application for renewal the holder has attended courses or programs of continuing education approved by the Board in accordance with regulations adopted by the Board totaling a number of hours established by the Board which must not be less than ~~{35}~~ *40* hours nor more than that set in the requirements for continuing medical education of the American Osteopathic Association; and

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

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

3. The Board shall request submission of verified evidence of completion of the required number of hours of continuing medical education ~~{annually}~~ *biennially* from a percentage of the applicants for renewal of a license to practice osteopathic medicine or a license to practice as a physician assistant or anesthesiologist assistant determined by the Board. Subject to subsection 14, upon a request from the Board, an applicant for renewal of a license to practice osteopathic medicine or a license to practice as a physician assistant or anesthesiologist assistant shall submit verified evidence satisfactory to the Board that in the ~~{year}~~ *biennium* preceding the application for renewal the applicant attended courses or programs of continuing medical education approved by the Board totaling the number of hours established by the Board.



4. The Board shall require each holder of a license to practice osteopathic medicine to complete a course of instruction within 2 years after initial licensure that provides at least 2 hours of instruction on evidence-based suicide prevention and awareness as described in subsection 9.

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

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

(a) Recognizing the symptoms of pediatric cancer; and

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

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

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

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

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

(b) Approaches to engaging other professionals in suicide intervention; and



(c) The detection of suicidal thoughts and ideations and the prevention of suicide.

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

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

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

(a) May include the training provided pursuant to NRS 449.103, where applicable.

(b) Must be based upon a range of research from diverse sources.

(c) Must address persons of different cultural backgrounds, including, without limitation:

(1) Persons from various gender, racial and ethnic backgrounds;

(2) Persons from various religious backgrounds;

(3) Lesbian, gay, bisexual, transgender and questioning persons;

(4) Children and senior citizens;

(5) Veterans;

(6) Persons with a mental illness;

(7) Persons with an intellectual disability, developmental disability or physical disability; and

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

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



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

15. Members of the Armed Forces of the United States and the United States Public Health Service are exempt from payment of the ~~annual~~ *biennial* license renewal fee during their active duty status.

16. As used in this section, "primary care" means the practice of family medicine, pediatrics, internal medicine, obstetrics and gynecology and midwifery.

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

633.4715 1. The Board shall:

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

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

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

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

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

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

2. The Board shall not deny the renewal of a license as an osteopathic physician or physician assistant solely because the



applicant has failed to comply with the requirements of paragraph (a) of subsection 1.

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

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

633.4717 1. In addition to any other requirements set forth in this chapter and any regulations adopted pursuant thereto, each applicant for the renewal of any type of license as an osteopathic physician pursuant to this chapter shall complete the data request developed by the Department of Health and Human Services pursuant to NRS 439A.124. The applicant shall provide to the Department all the information included in the request.

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

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

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

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

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

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

2. Apply:

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

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

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

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

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



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

633.481 1. Except as otherwise provided in subsection 2, if a licensee fails to comply with the requirements of NRS 633.471 within 10 days after the renewal date, the Board shall give 15 days' notice of the failure to renew the license and of the expiration of the license by certified mail to the licensee at the licensee's last known address that is registered with the Board. If the license is not renewed within 15 days after receiving notice, the license expires automatically without any further notice or a hearing and the Board shall file a copy of the notice with the Drug Enforcement Administration of the United States Department of Justice or its successor agency.

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

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

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

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

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

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

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

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

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



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

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

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

(a) The affidavit required pursuant to this subsection; and

(b) Payment of the inactive license fee prescribed by NRS 633.501.

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

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

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

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

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

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

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

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

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

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

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



(c) Comply with all other requirements for renewal.

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

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

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

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

(c) Temporary license fee 500

(d) Special or authorized facility license fee \$200

(e) Special event license fee 200

(f) Special or authorized facility license renewal fee..... 200

(g) Reexamination fee 200

(h) Late payment fee..... 300

(i) Application and initial license fee for a physician assistant.....~~[400]~~ **800**

(j) Application and initial simultaneous license fee for a physician assistant~~[200]~~ **400**

(k) ~~[Annual—registration]~~ **Biennial license renewal** fee for a physician assistant~~[400]~~ **800**

(l) ~~[Annual]~~ **Biennial** simultaneous ~~[registration]~~ **license renewal** fee for a physician assistant.....~~[200]~~ **400**

(m) Inactive license fee.....~~[200]~~ **400**

(n) Application and initial license fee for an anesthesiologist assistant 400

(o) Application and initial simultaneous license fee for an anesthesiologist assistant 200

(p) Biennial license renewal fee for an anesthesiologist assistant..... 400

(q) Biennial simultaneous license renewal fee for an anesthesiologist assistant..... 200

2. The Board may prorate the initial license fee for a new license issued pursuant to paragraph (a), ~~[or]~~ (i) **or (n)** of subsection 1 which expires less than ~~[6]~~ **12** months after the date of issuance.

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

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



(a) NRS 633.399 or 633.400 and is an active member of, or the spouse of an active member of, the Armed Forces of the United States, a veteran or the surviving spouse of a veteran, the Board shall collect not more than one-half of the fee set forth in subsection 1 for the initial issuance of the license. As used in this paragraph, “veteran” has the meaning ascribed to it in NRS 417.005.

(b) NRS 633.4336, the Board shall collect not more than one-half of the fee set forth in subsection 1 for the initial issuance of the license.

Sec. 19. (Deleted by amendment.)

Sec. 20. Notwithstanding the amendatory provisions of this act:

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

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

Sec. 21. (Deleted by amendment.)

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

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

(a) Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and

(b) On January 1, 2026, for all other purposes.



