

Assembly Bill No. 442–Committee
on Commerce and Labor

CHAPTER.....

AN ACT relating to health care; requiring certain providers of health care to complete training in the screening, brief intervention and referral to treatment approach to substance use disorder; authorizing such a provider of health care to use such training to complete certain continuing education requirements; authorizing a physician, physician assistant or advanced practice registered nurse to use a federal registration to dispense narcotic drugs for maintenance treatment or detoxification treatment to satisfy certain continuing education requirements; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

Existing law requires providers of health care who are authorized to prescribe controlled substances, including physicians, physician assistants, dentists, advanced practice registered nurses, podiatrists and optometrists, to complete training relating specifically to persons with substance use and other addictive disorders and the prescribing of opioids during each period of licensure. (NRS 630.2535, 631.344, 632.2375, 633.473, 635.116, 636.2881) **Sections 1, 16, 21, 26, 41 and 47** of this bill define the term “screening, brief intervention and referral to treatment approach” to mean an evidence-based method of delivering early intervention and treatment to persons who have or are at risk of developing a substance use disorder. **Sections 2, 17, 22, 27 and 48** of this bill make conforming changes to indicate the proper placement of **sections 1, 16, 21, 26 and 47** in the Nevada Revised Statutes.

Existing law requires physicians, physician assistants, dentists, advanced practice registered nurses, podiatrists and optometrists to complete certain continuing education as a condition to the renewal of a license. (NRS 630.253, 631.342, 632.343, 633.471, 635.115, 636.260) **Sections 7, 18.5, 24.5, 38, 44.5 and 51.5** of this bill require those providers to complete a certain number of hours of training in the screening, brief intervention and referral to treatment approach to substance use disorder within the first 2 years of licensure. **Section 53** of this bill requires a person who holds a license as a physician, physician assistant, dentist, advanced practice registered nurse, podiatrist or optometrist on January 1, 2024, to complete at least 2 hours of such training before renewing his or her license. **Sections 7, 8, 19, 24, 38, 39, 45, 52 and 53** of this bill authorize a physician, physician assistant, dentist, advanced practice registered nurse, podiatrist or optometrist to use training in the screening, brief intervention and referral to treatment approach to substance use disorder to satisfy certain continuing education requirements on or after the date on which this bill is approved by the Governor.

Existing federal law requires a practitioner who dispenses narcotic drugs to individuals for maintenance treatment or detoxification treatment to obtain annually a registration for that purpose. (21 U.S.C. § 823) **Sections 8, 24 and 39** of this bill: (1) exempt a physician, physician assistant or advanced practice registered nurse who obtains such a registration from requirements to complete continuing education relating specifically to substance use and other addictive disorders and the prescribing of opioids for one period of licensure; and (2) authorize such a



physician, physician assistant or advanced practice registered nurse to use the registration to satisfy 4 hours of any applicable continuing education requirement.

EXPLANATION – Matter in *bolded italics* is new; matter between brackets ~~omitted material~~ is material to be omitted.

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

Section 1. Chapter 630 of NRS is hereby amended by adding thereto a new section to read as follows:

“Screening, brief intervention and referral to treatment approach” means an evidence-based method of delivering early intervention and treatment to persons who have or are at risk of developing a substance use disorder that consists of:

- 1. Screening to assess the severity of substance use and identify the appropriate level of treatment;*
- 2. Brief intervention to increase awareness of the person’s substance use and motivation to change his or her behavior; and*
- 3. Referral to treatment for persons who need more extensive treatment and specialty care for substance use disorder.*

Sec. 2. NRS 630.005 is hereby amended to read as follows:

630.005 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 630.007 to 630.026, inclusive, *and section 1 of this act* have the meanings ascribed to them in those sections.

Secs. 3-6. (Deleted by amendment.)

Sec. 7. 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; or
- (b) 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 5.

(d) 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.

↳ The Board may thereafter determine whether to include in a program of continuing education additional courses of instruction relating to the medical consequences of an act of terrorism that involves the use of a weapon of mass destruction.

3. 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.

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.

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.

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.

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.

8. ~~[A]~~ *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, ~~[or]~~ 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.

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) "Radioactive agent" has the meaning ascribed to it in NRS 202.4437.



(e) “Weapon of mass destruction” has the meaning ascribed to it in NRS 202.4445.

Sec. 8. NRS 630.2535 is hereby amended to read as follows:

630.2535 **1.** The Board shall, by regulation, require each physician or physician assistant who is registered to dispense controlled substances pursuant to NRS 453.231 to complete at least 2 hours of training relating specifically to persons with substance use and other addictive disorders and the prescribing of opioids during each period of licensure. *Except as otherwise provided in subsection 2, such training may include, without limitation, training in the screening, brief intervention and referral to treatment approach to substance use disorder.* Any licensee may use ~~such~~ training *required by the regulations adopted pursuant to this section* to satisfy 2 hours of any continuing education requirement established by the Board.

2. A physician may not use continuing education in the screening, brief intervention and referral to treatment approach to substance use disorder to satisfy the requirements of subsection 1 for a licensure period during which the licensee also uses such continuing education to satisfy a requirement for continuing education in ethics pursuant to subsection 8 of NRS 630.253.

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

Secs. 9-15. (Deleted by amendment.)

Sec. 16. Chapter 631 of NRS is hereby amended by adding thereto a new section to read as follows:

“Screening, brief intervention and referral to treatment approach” means an evidence-based method of delivering early intervention and treatment to persons who have or are at risk of developing a substance use disorder that consists of:

- 1. Screening to assess the severity of substance use and identify the appropriate level of treatment;*
- 2. Brief intervention to increase awareness of the person’s substance use and motivation to change his or her behavior; and*
- 3. Referral to treatment for persons who need more extensive treatment and specialty care for substance use disorder.*



Sec. 17. NRS 631.005 is hereby amended to read as follows:
631.005 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 631.015 to 631.105, inclusive, *and section 16 of this act* have the meanings ascribed to them in those sections.

Sec. 18. (Deleted by amendment.)

Sec. 18.5. NRS 631.342 is hereby amended to read as follows:
631.342 1. The Board shall adopt regulations concerning continuing education in dentistry, dental hygiene and dental therapy. The regulations must include:

(a) Except as provided in NRS 631.3425, the number of hours of credit required annually;

(b) The criteria used to accredit each course; and

(c) The requirements for submission of proof of attendance at courses.

2. Except as otherwise provided in subsection 3, as part of continuing education, each licensee must complete 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:

(a) An overview of acts of terrorism and weapons of mass destruction;

(b) Personal protective equipment required for acts of terrorism;

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

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

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

3. Instead of the course described in subsection 2, a licensee may complete:

(a) A course in Basic Disaster Life Support or a course in Core Disaster Life Support if the course is offered by a provider of continuing education accredited by the National Disaster Life Support Foundation; or

(b) Any other course that the Board determines to be the equivalent of a course specified in paragraph (a).

4. Notwithstanding the provisions of subsections 2 and 3, the Board may determine whether to include in a program of continuing education additional courses of instruction relating to the medical



consequences of an act of terrorism that involves the use of a weapon of mass destruction.

5. *Each licensee must complete, as part of continuing education, 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.*

6. 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) "Radioactive agent" has the meaning ascribed to it in NRS 202.4437.

(e) "Weapon of mass destruction" has the meaning ascribed to it in NRS 202.4445.

Sec. 19. NRS 631.344 is hereby amended to read as follows:

631.344 The Board shall, by regulation, require each holder of a license to practice dentistry who is registered to dispense controlled substances pursuant to NRS 453.231 to complete at least 2 hours of training relating specifically to persons with substance use and other addictive disorders and the prescribing of opioids during each period of licensure. *Such training may include, without limitation, training in the screening, brief intervention and referral to treatment approach to substance use disorder.* Any such holder of a license may use ~~[such]~~ training *required by the regulations adopted pursuant to this section* to satisfy 2 hours of any continuing education requirement established by the Board.

Sec. 20. (Deleted by amendment.)

Sec. 21. Chapter 632 of NRS is hereby amended by adding thereto a new section to read as follows:

"Screening, brief intervention and referral to treatment approach" means an evidence-based method of delivering early intervention and treatment to persons who have or are at risk of developing a substance use disorder that consists of:

1. *Screening to assess the severity of substance use and identify the appropriate level of treatment;*

2. *Brief intervention to increase awareness of the person's substance use and motivation to change his or her behavior; and*

3. *Referral to treatment for persons who need more extensive treatment and specialty care for substance use disorder.*



Sec. 22. NRS 632.010 is hereby amended to read as follows:
632.010 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 632.011 to 632.0195, inclusive, *and section 21 of this act* have the meanings ascribed to them in those sections.

Sec. 23. (Deleted by amendment.)

Sec. 24. NRS 632.2375 is hereby amended to read as follows:

632.2375 **1.** The Board shall, by regulation, require each advanced practice registered nurse who is registered to dispense controlled substances pursuant to NRS 453.231 to complete at least 2 hours of training relating specifically to persons with substance use or other addictive disorders and the prescribing of opioids during each period of licensure. *Such training may include, without limitation, training in the screening, brief intervention and referral to treatment approach to substance use disorder.* An advanced practice registered nurse may use ~~[such]~~ training *required by the regulations adopted pursuant to this section* to satisfy 2 hours of any continuing education requirement established by the Board.

2. An advanced practice registered nurse who obtains a registration to treat opioid dependency with narcotic medications in accordance with the Drug Addiction Treatment Act of 2000, 21 U.S.C. §§ 823 et. seq., is exempt from the training required by subsection 1 for one period of licensure. An advanced practice registered nurse may use such registration to satisfy 4 hours of the total number of hours of continuing education required by NRS 632.343 during one period of licensure.

Sec. 24.5. NRS 632.343 is hereby amended to read as follows:

632.343 **1.** The Board shall not renew any license issued under this chapter until the licensee has submitted proof satisfactory to the Board of completion, during the 2-year period before renewal of the license, of 30 hours in a program of continuing education approved by the Board in accordance with regulations adopted by the Board. Except as otherwise provided in subsection 3, the licensee is exempt from this provision for the first biennial period after graduation from:

- (a) An accredited school of professional nursing;
- (b) An accredited school of practical nursing;
- (c) An approved school of professional nursing in the process of obtaining accreditation; or
- (d) An approved school of practical nursing in the process of obtaining accreditation.



2. The Board shall review all courses offered to nurses for the completion of the requirement set forth in subsection 1. The Board may approve nursing and other courses which are directly related to the practice of nursing as well as others which bear a reasonable relationship to current developments in the field of nursing or any special area of practice in which a licensee engages. These may include academic studies, workshops, extension studies, home study and other courses.

3. The program of continuing education required by subsection 1 must include:

(a) For a person licensed as an advanced practice registered nurse, a course of instruction to be completed within 2 years after initial licensure that provides at least 2 hours of instruction on suicide prevention and awareness as described in subsection 5.

(b) For each person licensed pursuant to this chapter, a course of instruction, to be completed 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.

↳ The Board may thereafter determine whether to include in a program of continuing education additional courses of instruction relating to the medical consequences of an act of terrorism that involves the use of a weapon of mass destruction.

(c) For a person licensed as an advanced practice registered nurse, at least 2 hours of training in the screening, brief intervention and referral to treatment approach to substance use disorder to be completed within 2 years after initial licensure.

4. The Board shall encourage each licensee 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. The Board shall require each person licensed as an advanced practice registered nurse 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 or another course of instruction on suicide prevention and awareness that is approved by the Board which the Board has determined to be effective and appropriate.

6. The Board shall encourage each person licensed as an advanced practice registered nurse 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. 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) "Radioactive agent" has the meaning ascribed to it in NRS 202.4437.

(e) "Weapon of mass destruction" has the meaning ascribed to it in NRS 202.4445.

Sec. 25. (Deleted by amendment.)

Sec. 26. Chapter 633 of NRS is hereby amended by adding thereto a new section to read as follows:

"Screening, brief intervention and referral to treatment approach" means an evidence-based method of delivering early intervention and treatment to persons who have or are at risk of developing a substance use disorder that consists of:

1. Screening to assess the severity of substance use and identify the appropriate level of treatment;



2. *Brief intervention to increase awareness of the person's substance use and motivation to change his or her behavior; and*
3. *Referral to treatment for persons who need more extensive treatment and specialty care for substance use disorder.*

Sec. 27. NRS 633.011 is hereby amended to read as follows:

633.011 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 633.021 to 633.131, inclusive, *and section 26 of this act* have the meanings ascribed to them in those sections.

Secs. 28-37. (Deleted by amendment.)

Sec. 38. NRS 633.471 is hereby amended to read as follows:

633.471 1. Except as otherwise provided in subsection ~~1~~ **II** and NRS 633.491, every holder of a license issued under this chapter, except a temporary or a special license, may renew the license on or before January 1 of each calendar year after its issuance by:

- (a) Applying for renewal on forms provided by the Board;
- (b) Paying the annual 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;
- (d) Submitting evidence to the Board that in the year 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 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 from no fewer than one-third of the applicants for renewal of a license to practice osteopathic medicine or a license to practice as a physician assistant. 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 shall submit verified evidence satisfactory to the Board that in the year 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 8.

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 , ~~or~~ care of persons with addictive disorders ~~or~~ *or the screening, brief intervention and referral to treatment approach to substance use disorder.*

8. 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.



9. 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.

10. *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.*

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

Sec. 39. NRS 633.473 is hereby amended to read as follows:

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

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

3. *An osteopathic physician or physician assistant who obtains a registration to treat opioid dependency with narcotic medications in accordance with the Drug Addiction Treatment Act of 2000, 21 U.S.C. §§ 823 et seq., is exempt from the training required by subsection 1 for one period of licensure. An osteopathic physician or physician assistant may use such registration to satisfy 4 hours of the total number of hours of continuing education required by the Board pursuant to NRS 633.470 during one period of licensure.*

Sec. 40. (Deleted by amendment.)



Sec. 41. NRS 635.010 is hereby amended to read as follows:
635.010 As used in this chapter, unless the context otherwise requires:

1. "Board" means the State Board of Podiatry.
2. "Podiatry" is the diagnosis, prevention and treatment of ailments of the human foot and leg.
3. "Podiatry hygienist" means a person engaged in assisting a podiatric physician.
4. *"Screening, brief intervention and referral to treatment approach" means an evidence-based method of delivering early intervention and treatment to persons who have or are at risk of developing a substance use disorder that consists of:*
 - (a) *Screening to assess the severity of substance use and identify the appropriate level of treatment;*
 - (b) *Brief intervention to increase awareness of the person's substance use and motivation to change his or her behavior; and*
 - (c) *Referral to treatment for persons who need more extensive treatment and specialty care for substance use disorder.*

Secs. 42-44. (Deleted by amendment.)

Sec. 44.5. NRS 635.115 is hereby amended to read as follows:
635.115 1. Every even-numbered year each podiatric physician must, at the time of paying the annual renewal fee, present to the Secretary of the Board satisfactory evidence that during the preceding 2 years the podiatric physician attended at least 50 hours of instruction in courses approved by the Board for purposes of continuing professional education and is currently certified in the techniques of administering cardiopulmonary resuscitation. The Board may waive all or part of the requirement of continuing education in a particular year if the podiatric physician was prevented from that attendance by circumstances beyond his or her control.

2. *The Board shall require each podiatric physician 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 as part of the continuing education required by subsection 1.*

3. If a podiatric physician fails to provide proof of his or her continuing education and does not obtain a waiver from the Board, the license must not be renewed.

Sec. 45. NRS 635.116 is hereby amended to read as follows:
635.116 The Board shall, by regulation, require each holder of a license to practice podiatry who is registered to dispense controlled substances pursuant to NRS 453.231 to complete at least



2 hours of training relating specifically to persons with substance use and other addictive disorders and the prescribing of opioids during each period of licensure. *Such training may include, without limitation, training in the screening, brief intervention and referral to treatment approach to substance use disorder.* Any such holder of a license may use ~~[such]~~ training *required by the regulations adopted pursuant to this section* to satisfy 2 hours of any continuing education requirement established by the Board.

Sec. 46. (Deleted by amendment.)

Sec. 47. Chapter 636 of NRS is hereby amended by adding thereto a new section to read as follows:

“Screening, brief intervention and referral to treatment approach” means an evidence-based method of delivering early intervention and treatment to persons who have or are at risk of developing a substance use disorder that consists of:

- 1. Screening to assess the severity of substance use and identify the appropriate level of treatment;*
- 2. Brief intervention to increase awareness of the person’s substance use and motivation to change his or her behavior; and*
- 3. Referral to treatment for persons who need more extensive treatment and specialty care for substance use disorder.*

Sec. 48. NRS 636.015 is hereby amended to read as follows:

636.015 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 636.016 to 636.023, inclusive, *and section 47 of this act* have the meanings ascribed to them in those sections.

Secs. 49-51. (Deleted by amendment.)

Sec. 51.5. NRS 636.260 is hereby amended to read as follows:

636.260 1. Before March 1 of each even-numbered year, each licensee shall pay a renewal fee to the Executive Director in the amount established pursuant to NRS 636.143. For the purposes of this subsection, the date of the postmark on any payment received by mail shall be deemed to be the date of receipt by the Executive Director.

2. The renewal fee must be accompanied by satisfactory evidence that the licensee has, within the immediately preceding 24-month period, completed the required number of hours in a course or courses of continuing education that have been approved by the Board. This evidence must be indicated on the form for proof of completion of continuing education that is furnished by the Board. The Board shall not require a licensee to complete more than 40 hours of continuing education during each period of renewal. The Board may waive the requirement that a licensee complete all or



part of the required number of hours of continuing education upon good cause shown by the licensee.

3. *The Board shall require each licensee 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 as part of the continuing education required by subsection 2.*

4. A licensee who is certified to administer and prescribe pharmaceutical agents pursuant to NRS 636.288 must, at the time of paying the renewal fee, present evidence satisfactory to the Executive Director that, during the 24 months immediately preceding the payment of the renewal fee, the licensee completed an educational or postgraduate program approved by the Board. The Board shall establish the number of hours for completion of the program which must be not less than 50 hours nor more than 100 hours.

Sec. 52. NRS 636.2881 is hereby amended to read as follows:

636.2881 The Board shall, by regulation, require each optometrist who is certified to administer and prescribe pharmaceutical agents pursuant to NRS 636.288 and who is registered to dispense controlled substances pursuant to NRS 453.231 to complete at least 2 hours of training relating specifically to persons with substance use and other addictive disorders and the prescribing of opioids during each period of licensure. *Such training may include, without limitation, training in the screening, brief intervention and referral to treatment approach to substance use disorder.* Any licensee may use ~~[such]~~ training *required by the regulations adopted pursuant to this section* to satisfy 2 hours of any continuing education requirement established by the Board.

Sec. 53. 1. Except as otherwise provided in subsection 5, the first application that an osteopathic physician, physician assistant licensed pursuant to chapter 630 or 633 of NRS, dentist, advanced practice registered nurse, podiatric physician or optometrist who is licensed on January 1, 2024, submits to renew his or her license on or after that date must include, without limitation, proof that the applicant has completed at least 2 hours of training in the screening, brief intervention and referral to treatment approach to substance use disorder.

2. Except as otherwise provided in subsection 5, the information that a physician who is licensed pursuant to chapter 630 of NRS on January 1, 2024, submits to complete the first biennial registration to be issued on or after that date or renew the license, as applicable, must include, without limitation, proof that the physician



has completed at least 2 hours of training in the screening, brief intervention and referral to treatment approach to substance use disorder.

3. A physician licensed pursuant to chapter 630 or 633 of NRS who completes training in the screening, brief intervention and referral to treatment approach to substance use disorder to satisfy the requirements of subsection 1 or 2 may use such training to satisfy 2 hours of:

(a) The applicable requirement to complete continuing education relating specifically to persons with substance use and other addictive disorders and the prescribing of opioids established pursuant to NRS 630.2535 or 633.473, as amended by sections 8 and 39, respectively, of this act; or

(b) Any applicable requirement to complete continuing education in ethics, pain management, care of persons with addictive disorders or the screening, brief intervention and referral to treatment approach to substance use disorder established pursuant to NRS 630.253 or 633.471, as amended by sections 7 and 38, respectively, of this act.

4. A physician assistant licensed pursuant to 630 or 633 of NRS or a dentist, advanced practice registered nurse, podiatric physician or optometrist who completes training in the screening, brief intervention and referral to treatment approach to substance use disorder to satisfy the requirements of subsection 1 may use such training to satisfy 2 hours of the applicable requirement to complete continuing education relating specifically to persons with substance use and other addictive disorders and the prescribing of opioids established pursuant to NRS 630.2535, 631.344, 632.2375, 633.473, 635.116 or 636.2881, as amended by sections 8, 19, 24, 39, 45 and 52, respectively, of this act.

5. A physician or physician assistant licensed pursuant to chapter 630 or 633 of NRS or an advanced practice registered nurse who holds a registration to treat opioid dependency with narcotic medications pursuant to the Drug Addiction Treatment Act of 2000, 21 U.S.C. §§ 823 et seq., on the date he or she submits the first application to renew his or her license after January 1, 2024, is exempt from the requirements of this section.

6. As used in this section, “screening, brief intervention and referral to treatment approach” has the meaning ascribed to it in section 1 of this act.

Sec. 54. This act becomes effective upon passage and approval.



