

2025 NEVADA LEGISLATIVE SESSION

PROPOSED AMENDMENT TO SB 337

INTENT OF THE PROPOSED AMENDMENT: REMOVE SECTIONS THAT REQUIRE LICENSING BOARDS TO REVIEW REQUIREMENTS PURSUANT TO THE BILL EACH EVEN-NUMBERED YEAR. **THIS IS SUBMITTED ON BEHALF OF THE STATE BOARDS OF NURSING, MEDICINE, OSTEOPATHIC MEDICINE AND OPTOMETRY.**

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COMMITTEE HEARING: Senate Committee on Finance
May 15, 2025

EXPLANATION: Matter in (1) *blue bold italics* is new language in the original bill; (2) variations of *green bold italic underlining* is language proposed to be added in this amendment; (3) ~~red strikethrough~~ is deleted language in the original bill; (4) ~~purple double strikethrough~~ is language proposed to be deleted in this amendment; (5) *orange double underlining* is deleted language in the original bill proposed to be retained in this amendment.

Sec. 33. Chapter 630 of NRS is hereby amended by adding thereto a new section to read as follows:

1. A physician or physician assistant who prescribes or administers opioids shall:

(a) Comply with the requirements of sections 8 to 23, inclusive, of this act, and any regulations adopted pursuant thereto; and

(b) Offer to a patient an alternative treatment that does not utilize an opioid before prescribing, administering or directing or supervising the administration of an opioid to the patient for the first time unless:

(1) In the opinion of the physician or physician assistant, there is no treatment that does not utilize an opioid that is suitable for treating the patient; or

(2) It is not practicable to offer such an alternative treatment to the patient.

2. Except as otherwise provided in subsection 1 and section 19 of this act, if a patient or his or her legal guardian has executed a non-opioid directive or states that the patient wishes to receive an alternative treatment that does not utilize an opioid, the physician or physician assistant shall provide such a treatment.

~~*3. During each even-numbered year, the Board shall review compliance with the requirements of this section by each physician and physician assistant who prescribes or administers opioids to patients.*~~

3. As used in this section, "non-opioid directive" has the meaning ascribed to it in section 9 of this act.

Sec. 35. Chapter 631 of NRS is hereby amended by adding

thereto a new section to read as follows:

1. A dentist who prescribes or administers opioids shall:

(a) Comply with the requirements of sections 8 to 23, inclusive, of this act, and any regulations adopted pursuant thereto; and

(b) Offer to a patient an alternative treatment that does not utilize an opioid before prescribing, administering or directing or supervising the administration of an opioid to the patient for the first time unless:

(1) In the opinion of the dentist, there is no treatment that does not utilize an opioid that is suitable for treating the patient; or

(2) It is not practicable to offer such an alternative treatment to the patient.

2. Except as otherwise provided in subsection 1 and section 19 of this act, if a patient or his or her legal guardian has executed a non-opioid directive or states that the patient wishes to receive an alternative treatment that does not utilize an opioid, the dentist shall provide such a treatment.

~~*3. During each even-numbered year, the Board shall review compliance with the requirements of this section by each dentist who prescribes or administers opioids to patients.*~~

~~*4.*~~ *3. As used in this section, "non-opioid directive" has the meaning ascribed to it in section 9 of this act.*

Sec. 36. Chapter 632 of NRS is hereby amended by adding thereto a new section to read as follows:

1. An advanced practice registered nurse or certified registered nurse anesthetist who prescribes or administers opioids shall:

(a) Comply with the requirements of sections 8 to 23, inclusive, of this act, and any regulations adopted pursuant thereto; and

(b) Offer to a patient an alternative treatment that does not utilize an opioid before prescribing, administering or directing or supervising the administration of an opioid to the patient for the first time unless:

(1) In the opinion of the advanced practice registered nurse or certified registered nurse anesthetist, there is no treatment that does not utilize an opioid that is suitable for treating the patient; or

(2) It is not practicable to offer such an alternative treatment to the patient.

2. Except as otherwise provided in subsection 1 and section 19 of this act, if a patient or his or her legal guardian has executed a non-opioid directive or states that the patient wishes to receive an alternative treatment that does not utilize an opioid, the advanced practice registered nurse or certified registered nurse anesthetist shall provide such a treatment.

~~*3. During each even-numbered year, the Board shall review compliance with the requirements of this section by each advanced practice registered nurse or certified registered nurse anesthetist who prescribes or administers opioids to patients.*~~

~~*4.*~~ *3. As used in this section, "non-opioid directive" has the meaning ascribed to it in section 9 of this act.*

Sec. 37. Chapter 633 of NRS is hereby amended by adding thereto a new section to read as follows:

1. An osteopathic physician or physician assistant who

prescribes or administers opioids shall:

(a) Comply with the requirements of sections 8 to 23, inclusive, of this act, and any regulations adopted pursuant thereto; and

(b) Offer to a patient an alternative treatment that does not utilize an opioid before prescribing, administering or directing or supervising the administration of an opioid to the patient for the first time unless:

(1) In the opinion of the osteopathic physician or physician assistant, there is no treatment that does not utilize an opioid that is suitable for treating the patient; or

(2) It is not practicable to offer such an alternative treatment to the patient.

2. Except as otherwise provided in subsection 1 and section 19 of this act, if a patient or his or her legal guardian has executed a non-opioid directive or states that the patient wishes to receive an alternative treatment that does not utilize an opioid, the osteopathic physician or physician assistant shall provide such a treatment.

~~*3. During each even-numbered year, the Board shall review compliance with the requirements of this section by each osteopathic physician or physician assistant who prescribes or administers opioids to patients.*~~

~~*4. 3. As used in this section, "non-opioid directive" has the meaning ascribed to it in section 9 of this act.*~~

Sec. 39. Chapter 635 of NRS is hereby amended by adding thereto a new section to read as follows:

1. A podiatric physician who prescribes or administers opioids shall:

(a) Comply with the requirements of sections 8 to 23, inclusive, of this act, and any regulations adopted pursuant thereto; and

(b) Offer to a patient an alternative treatment that does not utilize an opioid before prescribing, administering or directing or supervising the administration of an opioid to the patient for the first time unless:

(1) In the opinion of the podiatric physician, there is no treatment that does not utilize an opioid that is suitable for treating the patient; or

(2) It is not practicable to offer such an alternative treatment to the patient.

2. Except as otherwise provided in subsection 1 and section 19 of this act, if a patient or his or her legal guardian has executed a non-opioid directive or states that the patient wishes to receive an alternative treatment that does not utilize an opioid, the podiatric physician shall provide such a treatment.

~~*3. During each even-numbered year, the Board shall review compliance with the requirements of this section by each podiatric physician who prescribes or administers opioids to patients.*~~

~~*4. 3. As used in this section, "non-opioid directive" has the meaning ascribed to it in section 9 of this act.*~~

Sec. 40. NRS 636.2882 is hereby amended to read as follows:

636.2882 *1.* An optometrist who is certified to administer and prescribe a pharmaceutical agent pursuant to NRS 636.288 shall not prescribe a controlled substance unless the optometrist:

~~*(a)*~~ *(a)* Has completed an optometric examination of the patient for whom the controlled substance is prescribed;

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~~12-1~~ (b) Prescribes the controlled substance in an amount that does not exceed 90 morphine milligram equivalents per day and will not last more than 72 hours; and

~~13-1~~ (c) Sets forth in the prescription for the controlled substance that the prescription may not be refilled without a subsequent examination of the patient by the optometrist.

2. *An optometrist who prescribes or administers opioids shall:*

(a) *Comply with the requirements of sections 8 to 23, inclusive, of this act, and any regulations adopted pursuant thereto; and*

(b) *Offer to a patient an alternative treatment that does not utilize an opioid before prescribing, administering or directing or supervising the administration of an opioid to the patient for the first time unless:*

(1) *In the opinion of the optometrist, there is no treatment that does not utilize an opioid that is suitable for treating the patient; or*

(2) *It is not practicable to offer such an alternative treatment to the patient.*

3. *Except as otherwise provided in subsection 2 and section 19 of this act, if a patient or his or her legal guardian has executed a non-opioid directive or states that the patient wishes to receive an alternative treatment that does not utilize an opioid, the optometrist shall provide such a treatment.*

~~4. During each even-numbered year, the Board shall review compliance with the requirements of this section by each optometrist who prescribes or administers opioids to patients.~~

~~5-~~ 4. *As used in this section, "non-opioid directive" has the meaning ascribed to it in section 9 of this act.*