

STATE OF NEVADA

JOE LOMBARDO
Governor



DR. KRISTOPHER SANCHEZ
Director

PERRY FAIGIN
NIKKI HAAG
MARCEL F. SCHAEERER
Deputy Directors

ADAM SCHNEIDER
Executive Director

DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF NEVADA BOARDS, COMMISSIONS AND COUNCILS STANDARDS
NEVADA STATE BOARD OF OPTOMETRY

MINUTES OF
WORKSHOP MEETING
September 25, 2025

1. **Roll Call, Call to Order,** Director Schneider opened the live workshop at 12:39p.m.¹
2. **Workshop.** Director Schneider reiterated the Board's Notice of Workshop is the process for regulations in NAC 636, and not statutes in NRS 636. Open for discussion are amendments or eliminations of any portion of R066-19 and R101-24, R49-025, and new regulations to correspond to AB183; AB183 being the statutes that got passed in the 2025 legislative session into NRS 636 and will come into effect on October 1, 2025. The first item for workshop will be R49-25, and potentially the need for another workshop if need be.
3. **Public Comment.** Director Schneider noted despite a Newsletter and website posting for any written comments to be received on or by September 18 to allow the Board time to assess in advance, no written comments were received. Director Schneider invited public comments. No comments provided.
4. **Action Item.**

As to R066-19(7)

Director Schneider directed the Board and participants to the meeting materials specific to R049-25 and R066-19(7), noting that NRS 636.143 is the Board's statute on fees and R066-19(7) is the Board's fee schedule regulation and that R066-19(7) necessarily has to be amended in order for the Board to balance its budget and stay solvent into 2027 and 2028.

NRS 636.143(g) puts a maximum on a veteran's initial issuance of a license at \$600.

Colloquy as to new licenses being prorated yet License by Endorsement (LBE) being a non-prorated \$450 and whether it was coincidence that \$450 is exactly 60% of \$750 biennial license renewal fee which if \$900 is the new biennial license renewal fee then \$540 is 60% of \$900. This percentage is irrelevant if the Board wants to keep LBE as a non-prorated amount.

¹ This occurred immediately after the conclusion of the Board's Notice of Intent to Take Action on Regulation R008-25 on the same day, whose Zoom information and physical location are identical.

Director Schneider inquired if the Board wants to prorate a LBE, where if so, it would be \$67.50 per quarter remaining of the 8-quarter year license cycle if the amount is increased to \$540. Dr. Smith acknowledged it would require additional I.T. work in order for the website forms to change every three months but that proration of LBE makes sense to be consistent with the initial license fees being prorated. Dr. Austin stated to keep LBE at a flat rate, but increase the amount to \$540. Director Schneider received confirmation that it would include a nonrefundable fee of \$75 notwithstanding credit card merchant fees incurred by the Board as stated in the meeting materials. Dr. Austin confirmed. Dr. Smith agreed with Dr. Austin. Colloquy as to what happens if a veteran applies for LBE bearing in mind veteran's initial license is capped at \$600. A non-veteran LBE, depending on when the application occurs, provides a discount to the applicant towards the beginning of even numbered years but that non-veteran new license applications provides the discount towards the end of odd numbered years. Agreement that there should be no difference in LBE for veterans compared to initial licenses for veterans, given under either path the amount is less than the statutory maximum of \$600. Director Schneider confirmed with the Board that per previous meetings, the other numbers in R049-25 and in the right-hand column of the materials track to the amounts discussed in prior meetings, i.e., active license renewals will be \$900, inactive license renewals will be \$550, and inactive license changed to an active license will be \$350.

Therefore of the below proposed regulation column,

EXISTING REGULATION	PROPOSED REGULATION
R066-19(7) The Board will charge and collect: 1. For an initial application for a license, a nonrefundable fee in the amount of \$75 plus \$93.75 for each calendar quarter or portion thereof remaining in the biennial licensing period until the renewal date prescribed by NRS 636.265, not to exceed a total of \$825. ... 3. The following nonrefundable fees: (a) Initial application for a license by endorsement.....\$450 ... (e) Biennial renewal of active license with one practice\$750 (f) Biennial renewal of inactive license...\$500 ... (i) Activation of inactive license.....\$250 ...	R049-25 The Board will charge and collect: 1. For an initial application for a license by an applicant who is not a veteran: (a) A nonrefundable fee in the amount of \$75; and (b) A fee in the amount of \$93.75 for each calendar quarter or portion thereof remaining in the biennial licensing period until the renewal date prescribed by NRS 636.265. not to exceed a total of \$825. The Board, less any credit card merchant services fees incurred by the Board, will refund the fee paid by an applicant pursuant to this paragraph if the Board does not issue a license to the applicant. 2. For an initial application for a license by an applicant who is a veteran: (a) A nonrefundable fee in the amount of \$75; and (b) A fee in the amount of \$62.50 for each calendar quarter or portion thereof remaining in the biennial licensing period until the renewal date prescribed by NRS 636.265. The Board, less any credit card

	<p>merchant services fees incurred by the Board, will refund the fee paid by an applicant pursuant to this paragraph if the Board does not issue a license to the applicant.</p> <p>3. For an initial application for a license by any applicant: (a) A nonrefundable fee in the amount of \$75; and (b) A fee in the amount of \$465.00 remaining in the biennial licensing period until the renewal date prescribed by NRS 636.265. The Board, less any credit card merchant services fees incurred by the Board will refund the fee paid by an applicant pursuant to this paragraph if the Board does not issue a license to the applicant.</p> <p>5. For a certificate to own or operate a mobile optometry clinic: (a) A nonrefundable fee in the amount of \$75; and (b) A fee in the amount of \$93.75 for each calendar quarter or portion thereof remaining in the biennial licensing period until the renewal date prescribed by NRS 636.2899. The Board, less any credit card merchant services fees incurred by the Board, will refund the fee paid by an applicant pursuant to this paragraph if the Board does not issue a certificate to the applicant.</p> <p>3. The following nonrefundable fees: (a) Initial application for a license by endorsement.....\$540 . . . (e) Biennial renewal of active license with one practice\$900 (f) Biennial renewal of inactive license....\$550 . . . (i) Activation of inactive license.....\$350</p>
--	--

//

As to AB183

Director Schneider directed the Board to the meeting materials specific to AB183 and prefaced some is necessary to make the regulation consistent with the statute whereas some would be beneficial to the Board but potentially unnecessary.

As to AB183(3), Director Schneider discussed due process owed to the licensees in the event of a summary suspension and that AB183(3) was derived from NRS 633's Board of Osteopathic Medicine and the below proposed regulation is derived from NAC 633.

As to AB183(9), Director Schneider referred back to the regular meeting conducted earlier in the hour and the elimination of the OMD 40 hour preceptorship requirement. The proposed regulation in the meeting materials tracks to that new change.

As to AB183(10), Director Schneider reminded the Board that the new statute expands the statute so that any OMD licensed in Nevada or other State or U.S. territory, and not just a Nevada-licensed OMD, can be the attesting OMD for glaucoma certification. The proposed regulation in the meeting materials tracks to that new change. Agreement as to the below right-side column be made into regulation.

STATUTE	PROPOSED REGULATION
AB183(3) 1. If, after an investigation by the Board or an investigative committee convened by the Board, the Board reasonably determines that the health, safety or welfare of the public or any patient served by a licensee is at risk of imminent or continued harm because of the manner in which the licensee practices optometry, including, without limitation, optometric telemedicine, the Board may summarily suspend the license of the licensee pending a determination upon the conclusion of a hearing to consider a formal complaint against the licensee. An order of summary suspension may be issued only by the Board, the President of the Board, the presiding officer of an investigative committee convened by the Board to conduct the investigation or the member of the Board who conducted the investigation. 2. If an order to summarily suspend the license of a licensee is issued pursuant to subsection 1 by the President of the Board, the presiding officer of an investigative committee of the Board or a member of the Board, that person shall not participate in any further proceedings of the Board relating to the order.	Summary suspension of license by Board. 1. If the Board summarily suspends the license of the licensee pursuant to AB183(3), the Board will issue such an order if it determines that: (a) The licensee has violated a provision of this chapter or chapter 636 of NRS; (b) The summary suspension of the license is necessary to prevent a further violation of this chapter or chapter 636 of NRS; and (c) The public health, safety or general welfare imperatively requires the summary suspension of the license. 3. An order summarily suspending a license: (a) Must: (1) Comply with the applicable provisions of NRS 233B.127 ; and (2) Set forth the grounds upon which the order is issued, including a statement of facts; (b) Is effective upon service on the licensee of the order and complaint; and (c) Notwithstanding the time frames stated in AB183(3)(3), remains in effect until the Board: (1) Modifies or rescinds the order; or

<p>3. If the Board, the President of the Board, the presiding officer of an investigative committee of the Board or a member of the Board issues an order summarily suspending the license of a licensee, the Board shall hold a hearing not later than 60 days after the date on which the order is issued, unless the Board and the licensee mutually agree to a longer period, to determine whether a reasonable basis exists to continue the suspension of the license pending the conclusion of a hearing to consider a formal complaint against the licensee. If no formal complaint against the licensee is pending before the Board on the date on which a hearing is held pursuant to this section, the Board must reinstate the license of the licensee.</p>	<p>(2) Issues its final order or decision on the underlying complaint.</p>
<p>AB183(9)</p> <p>NRS 636.287 is hereby amended to read as follows:</p> <p>636.287 The Board shall adopt regulations which prescribe the requirements for certification to administer and prescribe pharmaceutical agents pursuant to NRS 636.288. The requirements must include:</p> <ol style="list-style-type: none"> 1. A license to practice optometry in this State; and 2. The successful completion of the "Treatment and Management of Ocular Disease Examination" administered by the National Board of Examiners in Optometry or an equivalent examination approved by the Board and; and 3. The successful completion of not fewer than 40 hours of clinical training in administering and prescribing pharmaceutical agents in a training program which is conducted by an ophthalmologist and approved by the Board. 	<p>NAC 636.730 Certification to administer and prescribe therapeutic pharmaceutical agents. (NRS 636.125, 636.287)</p> <ol style="list-style-type: none"> 1. The Board shall provide a certificate to administer and prescribe pharmaceutical agents to each optometrist who: <ol style="list-style-type: none"> (a) Is licensed to practice optometry in the State of Nevada and is in good standing. (b) Has successfully completed the Treatment and Management of Ocular Disease Examination administered by the National Board of Examiners in Optometry, or its successor organization. The Board must receive verification that the person successfully completed the examination from the testing agency. (c) Submits a form which meets the requirements set forth in subsection 2 and which states that the optometrist successfully completed a training program of not less than 40 hours of clinical training in administering and prescribing pharmaceutical agents which was: <ol style="list-style-type: none"> (1) Conducted by an ophthalmologist who is licensed and in good standing in any state, territory or possession of the United States; and (2) Comprehensive in nature and covered the use of all classes of pharmaceutical agents which may be administered or prescribed pursuant to chapter 636 of NRS. 2. Upon completion by an optometrist of

	<p>a training program which meets the requirements of paragraph (c) of subsection 1, the ophthalmologist who conducted the program shall, on a form provided by the Executive Director of the Board, certify under penalty of perjury that the optometrist named on the form satisfactorily completed the training program. On a separate form provided by the Executive Director, the named optometrist shall certify under penalty of perjury that he or she completed the training program and satisfies all of the other requirements for certification to administer and prescribe pharmaceutical agents. The certifying signatures of the ophthalmologist and optometrist must be notarized.</p> <p>3. The forms provided by the Executive Director of the Board pursuant to subsection 2 must:</p> <p>(a) Set forth the requirements for the training program described in this section;</p> <p>(b) Contain the certifications for the ophthalmologist or optometrist, as applicable, which are required by this section; and</p> <p>(c) Provide space and appropriate designations for the notarization of the signatures of the ophthalmologist or optometrist, as applicable.</p>
<p>AB183(10)</p> <p>NRS 636.2893 is hereby amended to read as follows:</p> <p>636.2893 The Board shall adopt regulations that prescribe the requirements for the issuance of a certificate to treat persons diagnosed with glaucoma pursuant to NRS 636.2895. The requirements must include, without limitation:</p> <p>...</p> <p>3. Proof that each optometrist who applies for a certificate has treated at least 15 persons who were:</p> <p>(a) Diagnosed with glaucoma by an ophthalmologist licensed in this State, <i>the District of Columbia or any other state or territory of the United States</i>; and</p> <p>(b) Treated by the optometrist, in consultation with that ophthalmologist, for at least 12</p>	<p>NAC 636.280 Requirements for certification.</p> <p>...</p> <p>4. Shall submit proof on a written form provided by the Executive Director of the Board that the optometrist has treated at least 15 persons described in subsection 3 of NRS 636.2893. The form must include:</p> <p>...</p> <p>(c) A statement that the optometrist has, in consultation with an ophthalmologist licensed in the State of Nevada, <i>the District of Columbia or any other state or territory of the United States</i>, treated the patients in accordance with the provisions of this chapter and chapter 636 of NRS.</p>

consecutive months; and 4. A certificate to administer and prescribe pharmaceutical agents issued pursuant to NRS 636.288.	
---	--

As to existing NRS 636

Director Schneider directed the Board to the meeting materials specific to already-existing statutes codified within NRS 636.

As to NRS 636.300, Director Schneider discussed a proposed regulation as an extension of the HMO exception to NRS 636.347. The Board's regulations (post hoc identified as NAC 636.210(1)(c)) has been amended to allow for licensees to practice for a mobile optometry clinic certified by the Board (post identified as R066-19(29)). The clinic can be OD-operated or a non-profit entity or governmental agency. Under either ownership model, that clinic/owner necessarily has to attest that it will limit its activities to "medically underserved populations" (post hoc identified as defined in R066-19(2)). Regardless if OD-operated or not, the licensee then submits a quarterly log for those days providing mobile clinic services. Moreover, R066-19(6)(2) recognizes the distinction between OD-operated versus non-OD-operated relative to patient records (post hoc stated here as "If a licensee provides services for a mobile optometry clinic that is not operated by the licensee, the records of the patients whom the licensee treats shall be deemed to be the records of the licensee and are not the records of the mobile optometry clinic.") NRS 636.300(2) says it is unprofessional for a licensee to accept employment directly or indirectly from a person not licensed to practice optometry in Nevada unless for an HMO (post hoc identified as defined in NRS 695C.030) per NRS 636.347. And yet licensees are allowed to practice for a non-OD-operated mobile clinics providing services to the medically underserved. Dr. Austin commented that expanding the scope of this regulation could be fraught with problems, that the Board loses jurisdiction when it is the entity dictating to the licensee what to do, and no need to create this regulation. Dr. Smith agreed.

As to NRS 636.325, Director Schneider discussed a potential need for a regulation for how the Board imposes disciplinary action or sanctions upon a licensee and that the proposed regulation provides the Board with considerations including mitigating factors and are based upon the Nevada Supreme Court Rules for attorney discipline which lend credibility to acceptable by the Legislative Counsel Bureau. The rationale is that incorporation into NAC 636 would help make the Board's decision-making stronger on appeal and avoid any arbitrary and capricious arguments that potentially were or could have been made in the last Petition for Judicial Review that the Board had to defend. Dr. Austin agreed it is worthwhile, especially that the factors include potential mitigating factors. Dr. Smith stated trust in Director Schneider's analysis given his professional background and agreed with Dr. Austin.

NRS 636.300 Unethical or unprofessional conduct: Improper association or use of prescription blanks. The following acts, among others, constitute unethical or unprofessional conduct: 1. Association as an optometrist with any person, firm or corporation violating this chapter.	NAC 636.XXX Nothing in this section shall be construed to be unethical or unprofessional conduct for a licensee to comply with NRS 636.2899 inclusive of any mobile optometry clinic owned by any non-licensee.
--	---

<p>2. Accepting employment, directly or indirectly, from a person not licensed to practice optometry in this State to assist the person in such practice or enabling the person to engage therein, except as authorized in NRS 636.347.</p>	
<p>NRS 636.325 Authorized disciplinary action; private reprimands prohibited; orders imposing discipline deemed public records.</p> <p>1. If the Board finds by a preponderance of the evidence that a person has engaged in one or more grounds for disciplinary action set forth in NRS 636.295, it may take any one or more of the following actions:</p> <p>...</p> <p>3. An order that imposes discipline and the findings of fact and conclusions of law supporting that order are public records.</p>	<p>Factors to be considered in imposing disciplinary action or sanctions.</p> <p>1. In imposing disciplinary action or sanctions, the Board shall consider the following factors:</p> <ul style="list-style-type: none"> (a) Whether the licensee has violated a duty owed to a patient, to the public, to the legal system, or to the profession; (b) Whether the licensee acted intentionally, knowingly, or negligently; (c) The amount of the actual or potential injury caused by the licensee's misconduct; and (d) The existence of any aggravating or mitigating factors. <p>2. Using the first three factors in section 1(a)-(c), the Board shall determine a baseline or presumptive sanction. The Board may then consider any aggravating or mitigating factors to increase or decrease the sanction.</p> <p>3. Aggravating circumstances are any considerations or factors that may justify an increase in the degree of discipline to be imposed. The following list of examples is illustrative and is not exclusive:</p> <ul style="list-style-type: none"> (a) Prior disciplinary offenses; (b) Dishonest or selfish motive; (c) A pattern of misconduct; (d) Multiple offenses; (e) Bad faith obstruction of the disciplinary proceeding by intentionally failing to comply with rules or orders; (f) Submission of false evidence, false statements, or other deceptive practices during the disciplinary hearing; (g) Refusal to acknowledge the wrongful nature of conduct; (h) Vulnerability of victim; (i) Substantial experience in the practice of optometry;

	<p>(j) Indifference to making restitution;</p> <p>(k) Illegal conduct, including that involving the use of controlled substances.</p> <p>4. Mitigating circumstances are any considerations or factors that may justify a reduction in the degree of discipline to be imposed. The following list of examples is illustrative and is not exclusive:</p> <p>(a) Absence of a prior disciplinary record;</p> <p>(b) Absence of a dishonest or selfish motive;</p> <p>(c) Personal or emotional problems;</p> <p>(d) Timely good faith effort to make restitution or to rectify consequences of misconduct;</p> <p>(e) Full and free disclosure to disciplinary authority or cooperative attitude toward proceeding;</p> <p>(f) Inexperience in the practice of optometry;</p> <p>(g) Character or reputation;</p> <p>(h) Physical disability;</p> <p>(i) Mental disability or chemical dependency including alcoholism or drug abuse when:</p> <p>(1) There is medical evidence that the licensee is affected by chemical dependency or a mental disability;</p> <p>(2) The chemical dependency or mental disability caused the misconduct;</p> <p>(3) The licensee's recovery from the chemical dependency or mental disability is demonstrated by a meaningful and sustained period of successful rehabilitation; and</p> <p>(4) The recovery arrested the misconduct and recurrence of that misconduct is unlikely;</p> <p>(j) Delay in disciplinary proceedings;</p> <p>(k) Interim rehabilitation;</p> <p>(l) Imposition of other penalties or sanctions;</p> <p>(m) Remorse;</p> <p>(n) Remoteness of prior offenses.</p> <p>5. Factors that should not be considered as either aggravating or mitigating include:</p> <p>(a) Forced or compelled restitution;</p> <p>(b) Agreeing to a client's demand for improper behavior;</p> <p>(c) Withdrawal of public complaint against the licensee;</p>
--	--

	<p>(d) Resignation prior to completion of disciplinary proceedings;</p> <p>(e) Complainant's or aggrieved patient's recommendation as to sanction;</p> <p>(f) Failure of complainant or aggrieved patient to complain.</p>
--	--

5. Public Comment. Director Schneider invited public comments. Dr. Ken Kopolow noted he did not attend all of the regular meeting and perhaps his question was already addressed as to quorum requirements when Dr. Alamo was not present and he did not hear the public member participate, but that he appreciated Drs. Smith and Austin's insight as always. Public Member Balecha commented she has been in attendance since the beginning of the regular meeting on Zoom. Director Schneider let the record reflect that Public Member Balecha's name, screen, and phone number were shown as active on Zoom for the entirety of all the meetings.

6. Action Item. Dr. Smith moved to adjourn the meeting. Public Member Balecha seconded. Motion passed 3-0. Meeting adjourned at 1:02p.m.

8 persons attended, inclusive of three Board members. 1 person attended in-person, inclusive of the Executive Director. No role call conducted or sign-in sheets provided.

These minutes were considered and approved by majority vote of the Nevada State Board of Optometry at its meeting on October 30, 2025.

/s/ Adam Schneider

Adam Schneider, Executive Director