

Senate Bill No. 458—Committee on
Human Resources and Education

CHAPTER.....

AN ACT relating to health care; requiring a hospital to ensure that certain persons who are transported to the hospital are transferred to an appropriate place in the hospital to receive emergency services and care in a timely manner; requiring the Health Division of the Department of Human Resources to conduct a study concerning the cause of excessive waiting times for a person to receive emergency services and care from a hospital after being transported to the hospital by a provider of emergency medical services; and providing other matters properly relating thereto.

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

Section 1. Chapter 450B of NRS is hereby amended by adding thereto a new section to read as follows:

1. Each hospital in this State which receives a person in need of emergency services and care who has been transported to the hospital by an ambulance, air ambulance or vehicle of a fire-fighting agency that has a permit to operate pursuant to this chapter shall ensure that the person is transferred to a bed, chair, gurney or other appropriate place in the hospital to receive emergency services and care as soon as practicable, but not later than 30 minutes after the time at which the person arrives at the hospital.

2. The Health Division shall adopt regulations concerning the manner in which a hospital and an attendant responsible for the care of a person in need of emergency services and care during transport to the hospital shall determine and track the time at which a person arrives at a hospital and the time at which the person is transferred to an appropriate place in the hospital to receive emergency services and care for the purposes of this section. The regulations must provide that:

(a) The time at which a person arrives at a hospital is the time at which he is presented to the emergency room of the hospital; and

(b) The time at which the person is transferred to an appropriate place in the hospital to receive emergency services and care is the time at which the person is physically in that place and the staff of the emergency room of the hospital have received a report concerning the person.

3. This section does not create a duty of care and is not a ground for civil or criminal liability.

4. As used in this section:

(a) “Emergency services and care” has the meaning ascribed to it in NRS 439B.410.

(b) “Hospital” has the meaning ascribed to it in NRS 449.012.

Sec. 2. 1. The Health Division of the Department of Human Resources shall conduct a study to identify:

(a) The causes of excessive waiting time at hospitals for the provision of emergency services and care of persons in need of such services and care who have been transported to the hospital by an ambulance, air ambulance or vehicle of a fire-fighting agency which has a permit to operate pursuant to chapter 450B of NRS; and

(b) Any corrective actions that may eliminate such excessive waiting times.

2. Except as otherwise provided in subsection 7, each hospital, each operator of an ambulance or air ambulance and each fire-fighting agency which has a permit to operate pursuant to chapter 450B of NRS and which provides transportation for persons in need of emergency services and care to a hospital must:

(a) Participate in the study conducted by the Health Division pursuant to this section by collecting information concerning the waiting time for the provision of emergency services and care to each person who is transported to a hospital in accordance with the system of tracking such information that is developed by the Health Division pursuant to subsection 3; and

(b) Submit to the Health Division the information which is collected pursuant to paragraph (a).

3. For the purpose of collecting data for the study required pursuant to this section, the Health Division shall establish a system of tracking information concerning the waiting times of persons for the provision of emergency services and care at a hospital and the surrounding circumstances for such waiting times each time a person is transported to a hospital by an ambulance, air ambulance or vehicle of a fire-fighting agency. The system of tracking must include, without limitation, an electronic or manual method of tracking, in accordance with the regulations adopted by the Health Division pursuant to section 1 of this act:

(a) The time at which a person arrives at the hospital;

(b) The time at which the person is transferred to an appropriate place in the hospital to receive emergency services and care;

(c) Information relating to the circumstances surrounding the arrival of the person provided by the providers of emergency medical services who transport the person to the hospital and by the personnel of the hospital who are responsible for the care of the person after the person arrives at the hospital, including, without limitation, information concerning the volume of patients at the hospital at the time of arrival, the number of personnel at the

hospital available to treat the person and the medical condition of the person at the time of his arrival at the hospital;

(d) A unique identifier that is assigned to each transfer of a person to a hospital by an ambulance, air ambulance or vehicle of a fire-fighting agency which allows the transfer to be identified and reviewed; and

(e) The names and signatures of the providers of emergency medical services who transport the person to the hospital and of the personnel of the hospital who are responsible for the care of the person after the person arrives at the hospital.

4. The Health Division shall ensure that:

(a) The information collected pursuant to subsection 3 is available to any person or entity participating in the study; and

(b) The system of tracking established pursuant to subsection 3 and all other aspects of the study comply with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191.

5. The Health Division shall appoint for each county in which hospitals and providers of emergency medical services are participating in the study conducted by the Division pursuant to this section an advisory committee consisting of the health officer of the county, a representative of each hospital in the county and a representative of each operator of an ambulance or air ambulance and a representative of each fire-fighting agency which has a permit to operate pursuant to chapter 450B of NRS and which provides transportation for persons in need of emergency services and care to hospitals in the county. Each member of the advisory committee serves without compensation and is not entitled to receive a per diem allowance or travel expenses. The advisory committee shall:

(a) Review the data which has been collected and submitted to the Health Division concerning the waiting times for the provision of emergency services and care, the manner in which such data was collected and any circumstances surrounding such waiting times;

(b) Review each incident in which a person was transferred to an appropriate place in the hospital to receive emergency services and care more than 30 minutes after arriving at the hospital and determine all causes for such a delay; and

(c) Submit a report of its findings to the Health Division.

6. Each hospital and each operator of an ambulance or air ambulance and each fire-fighting agency which has a permit to operate pursuant to chapter 450B of NRS and which provides transportation for persons in need of emergency services and care to the hospitals in a county whose population is 400,000 or more must participate in the study required pursuant to this section.

7. Except as otherwise provided in subsection 8, the hospitals and the providers of emergency medical services which provide transportation for persons in need of emergency services and care to

the hospitals in a county whose population is less than 400,000 are not required to participate in the study required pursuant to this section unless the county health officer, each hospital and each operator of an ambulance or air ambulance and each fire-fighting agency which has a permit to operate pursuant to chapter 450B of NRS and which provides transportation for persons in need of emergency services and care to the hospitals in the county agree in writing that the county will participate in the study. The county must submit the written agreement to the Health Division.

8. If the State Board of Health determines that the waiting times for persons transported to a hospital to be transferred to an appropriate place in the hospital to receive emergency care and treatment are excessive in a county whose population is 100,000 or more but less than 400,000 which has not elected to participate in the study in accordance with the provisions set forth in subsection 7, the State Board of Health may require the county to implement a system of tracking data concerning the extent of waiting times and the circumstances surrounding such waiting times for review by the Health Division in the manner set forth in this section.

9. The Health Division shall submit a quarterly report to the Legislative Committee on Health Care concerning its findings pursuant to the study conducted pursuant to this section.

10. The Legislative Committee on Health Care shall submit a final report of the results of the study conducted pursuant to this section and any recommendations for legislation to the 74th Session of the Nevada Legislature.

11. If only one county participates in the study conducted pursuant to this section, the Health Division may delegate its duties set forth in this section to the county or district board of health of that county.

Sec. 3. 1. This act becomes effective upon passage and approval for the purpose of adopting regulations and on October 1, 2005, for all other purposes.

2. Section 2 of this act expires by limitation on December 31, 2006.