
ASSEMBLY BILL NO. 40—COMMITTEE ON COMMERCE AND LABOR
(ON BEHALF OF THE OFFICE FOR CONSUMER HEALTH ASSISTANCE)

PREFILED JANUARY 26, 2007

Referred to Committee on Commerce and Labor

SUMMARY—Establishes periods within which a provider of health care must provide a bill to a patient. (BDR 54-629)

FISCAL NOTE: Effect on Local Government: No.
Effect on the State: No.

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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 health care; requiring a provider of health care who files a claim on the health insurance of a patient to provide a bill to the patient within a certain period after the claim is approved or denied; requiring a provider of health care in all other cases to provide a bill to a patient within a certain period after providing the care; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

1 A provider of health care who charges a patient for services, equipment,
2 supplies or medicines is required to provide the patient with a bill that itemizes the
3 charges. Under existing law, the bill must be "timely provided" after the charge is
4 incurred. (NRS 629.071) This bill establishes periods within which a provider of
5 health care must provide a bill to a patient. If the patient is covered by a policy of
6 health insurance and the provider of health care files a claim with the insurer, this
7 bill requires the provider of health care to provide a bill to the patient within 60
8 days after the insurer approves or denies the claim. In all other cases, this bill
9 requires the provider of health care to provide a bill to the patient within 60 days
10 after providing the services, equipment, supplies or medicines for the patient.



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

- 1 **Section 1.** NRS 629.071 is hereby amended to read as follows:
2 629.071 **1.** Each provider of health care shall ~~[-on his bill to~~
3 ~~a patient, itemize]~~ *provide a patient with a bill that itemizes* all
4 charges for services, equipment, supplies and medicines provided
5 for the patient . ~~[-in]~~
6 **2. The bill must be:**
7 **(a) Written in** terms which the patient is able to understand ~~[-~~
8 ~~The bill must be timely provided after the charge is incurred]~~ ; and
9 **(b) Provided** at no additional cost to the patient.
10 **3. Except as otherwise provided in subsection 4, a provider of**
11 *health care shall provide a patient with a bill not later than 60*
12 *days after the date on which the services, equipment, supplies and*
13 *medicines are provided for the patient.*
14 **4. If a patient is covered by a policy of health insurance and**
15 *the provider of health care files a claim with the administrator of*
16 *the patient's health insurance for the services, equipment, supplies*
17 *and medicines provided for the patient, the provider of health care*
18 *shall provide the patient with a bill not later than 60 days after the*
19 *date on which the administrator, pursuant to NRS 683A.0879,*
20 *approves or denies the claim.*
21 **5. As used in this section, "health insurance" has the**
22 *meaning ascribed to it in NRS 681A.030.*

