

SENATE BILL NO. 171—SENATORS HECK, TOWNSEND,
WASHINGTON, NOLAN, HARDY, BEERS, CEGAVSKE,
RAGGIO AND RHOADS

FEBRUARY 28, 2007

JOINT SPONSORS: ASSEMBLYMEN GANSERT, HARDY, MARVEL,
BEERS, HORNE, MABEY, MANENDO, SETTELMAYER AND
STEWART

Referred to Committee on Human Resources and Education

SUMMARY—Creates the Nevada Academy of Health.
(BDR 40-952)

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

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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; creating the Nevada Academy of
Health; and providing other matters properly relating
thereto.

Legislative Counsel's Digest:

- 1 This bill creates the Nevada Academy of Health and authorizes the Legislative
- 2 Committee on Health Care, which is established pursuant to NRS 439B.200, to
- 3 prescribe certain duties and make various requests of the Academy. This bill
- 4 expires by limitation on June 30, 2009.

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

- 1 **Section 1.** Chapter 439B of NRS is hereby amended by adding
- 2 thereto a new section to read as follows:
- 3 ***1. There is hereby established the Nevada Academy of Health***
- 4 ***consisting of 14 members as follows:***
- 5 ***(a) The Director or his designee;***



(b) One member who represents the Nevada System of Higher Education appointed by the Board of Regents of the University of Nevada;

(c) Six members appointed by the Governor;

(d) Two members appointed by the Majority Leader of the Senate;

(e) Two members appointed by the Speaker of the Assembly;

(f) One member appointed by the Minority Leader of the Senate; and

(g) One member appointed by the Minority Leader of the Assembly.

2. The members appointed to the Academy pursuant to subsection 1 must not be legislators and, to the extent practicable, must:

(a) Represent agencies and organizations that provide education or training for providers of health care;

(b) Be advocates for the rights of patients;

(c) Be recognized academic scholars; or

(d) Be members of the general public who have specialized knowledge and experience that are beneficial to the Academy.

3. The Chairman of the Academy must be elected from among the members of the Academy.

4. Each member of the Academy who is not an officer or employee of the State serves without compensation and is not entitled to receive a per diem allowance or travel expenses.

5. Each member of the Academy who is an officer or employee of the State must be relieved from his duties without loss of his regular compensation so that he may attend meetings of the Committee or the Academy and is entitled to receive the per diem allowance and travel expenses provided for state officers and employees generally, which must be paid by the state agency that employs him.

6. A vacancy occurring in the membership of the Academy must be filled in the same manner as the original appointment. A member of the Academy may be reappointed.

7. The Academy shall:

(a) Perform any duties prescribed by, and comply with all requests from, the Committee;

(b) Study issues relating to health care in this State, including, without limitation, medical and clinical research and the education and training of providers of health care;

(c) Establish standards and goals concerning the provision of health care which are measurable and regularly evaluated;



(d) Analyze and evaluate data relating to health care that is created, collected or reviewed by the Committee and the Department;

(e) Promote cooperation between the public and private sectors, including the transfer of technology used to provide health care and the establishment of business partnerships that promote economic development in this State;

(f) Provide recommendations to the Governor and the Legislature concerning the establishment of a statewide biomedical and health research program;

(g) Provide to the Committee:

(1) Such assistance and technical expertise on matters relating to health care as the Committee may request; and

(2) Advice and recommendations from consumers of health care; and

(h) Provide to the Department, at the direction of the Committee:

(1) Technical expertise in matters relating to health care; and

(2) Advice and recommendations from consumers of health care.

8. The Academy may appoint advisory committees if necessary or appropriate to assist the Academy in carrying out the provisions of this section.

9. The Academy may accept gifts, grants and donations of money from any source to carry out the provisions of this section.

Sec. 2. NRS 439B.220 is hereby amended to read as follows:

439B.220 The Committee may:

1. Review and evaluate the quality and effectiveness of programs for the prevention of illness.

2. Review and compare the costs of medical care among communities in Nevada with similar communities in other states.

3. Analyze the overall system of medical care in the State to determine ways to coordinate the providing of services to all members of society, avoid the duplication of services and achieve the most efficient use of all available resources.

4. Examine the business of providing insurance, including the development of cooperation with health maintenance organizations and organizations which restrict the performance of medical services to certain physicians and hospitals, and procedures to contain the costs of these services.

5. Examine hospitals to:

(a) Increase cooperation among hospitals;

(b) Increase the use of regional medical centers; and



(c) Encourage hospitals to use medical procedures which do not require the patient to be admitted to the hospital and to use the resulting extra space in alternative ways.

6. Examine medical malpractice.

7. Examine the system of education to coordinate:

(a) Programs in health education, including those for the prevention of illness and those which teach the best use of available medical services; and

(b) The education of those who provide medical care.

8. Review competitive mechanisms to aid in the reduction of the costs of medical care.

9. Examine the problem of providing and paying for medical care for indigent and medically indigent persons, including medical care provided by physicians.

10. Examine the effectiveness of any legislation enacted to accomplish the purpose of restraining the costs of health care while ensuring the quality of services, and its effect on the subjects listed in subsections 1 to 9, inclusive.

11. Determine whether regulation by the State will be necessary in the future by examining hospitals for evidence of:

(a) Degradation or discontinuation of services previously offered, including without limitation, neonatal care, pulmonary services and pathology services; or

(b) A change in the policy of the hospital concerning contracts, as a result of any legislation enacted to accomplish the purpose of restraining the costs of health care while ensuring the quality of services.

12. Study the effect of the acuity of the care provided by a hospital upon the revenues of the hospital and upon limitations upon that revenue.

13. Review the actions of the Director in administering the provisions of this chapter and adopting regulations pursuant to those provisions. The Director shall report to the Committee concerning any regulations proposed or adopted pursuant to this chapter.

14. Identify and evaluate, with the assistance of an advisory group, the alternatives to institutionalization for providing long-term care, including, without limitation:

(a) An analysis of the costs of the alternatives to institutionalization and the costs of institutionalization for persons receiving long-term care in this State;

(b) A determination of the effects of the various methods of providing long-term care services on the quality of life of persons receiving those services in this State;

(c) A determination of the personnel required for each method of providing long-term care services in this State; and



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(d) A determination of the methods for funding the long-term care services provided to all persons who are receiving or who are eligible to receive those services in this State.

15. Evaluate, with the assistance of an advisory group, the feasibility of obtaining a waiver from the Federal Government to integrate and coordinate acute care services provided through Medicare and long-term care services provided through Medicaid in this State.

16. Evaluate, with the assistance of an advisory group, the feasibility of obtaining a waiver from the Federal Government to eliminate the requirement that elderly persons in this State impoverish themselves as a condition of receiving assistance for long-term care.

17. Conduct investigations and hold hearings in connection with its review and analysis.

18. Apply for any available grants and accept any gifts, grants or donations to aid the Committee in carrying out its duties pursuant to this chapter.

19. Direct the Legislative Counsel Bureau to assist in its research, investigations, review and analysis.

20. Recommend to the Legislature as a result of its review any appropriate legislation.

21. Prescribe duties and make requests, in addition to those set forth in section 1 of this act, of the Nevada Academy of Health established pursuant to that section.

Sec. 3. 1. The members of the Nevada Academy of Health must be appointed to terms that end on June 30, 2009.

2. It is the intent of the members of the 74th Session of the Legislature that if the expiration of this act on June 30, 2009, does not occur because of subsequent revisions by the 75th Session of the Legislature, that the terms of the members of the Nevada Academy of Health be established as 3-year terms.

Sec. 4. This act becomes effective on July 1, 2007, and expires by limitation on June 30, 2009.

