

SENATE BILL NO. 221—COMMITTEE ON
HUMAN RESOURCES AND EDUCATION

(ON BEHALF OF THE LEGISLATIVE COMMITTEE ON HEALTH CARE)

MARCH 6, 2007

Referred to Committee on Human Resources and Education

SUMMARY—Revises provisions relating to the development and implementation of health care policy in this State. (BDR 40-307)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Contains Appropriation not included in Executive Budget.

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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; creating the Office of Health Planning, Analysis and Policy Support in the Department of Health and Human Services and establishing its duties; creating an Advisory Committee to the Office and establishing its duties; requiring the Office to conduct certain research concerning health care; creating the Steering Committee for e-Health and establishing its duties; creating the Advisory Committee on the Regulation of Providers of Health Care in Nevada; making appropriations; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Section 2 of this bill creates the Office of Health Planning, Analysis and Policy Support in the Department of Health and Human Services. The Office is responsible for coordinating the development of health policy for this State by: (1) conducting policy analysis on health care issues; (2) collecting and disseminating information concerning the quality and cost of health care; and (3) conducting community needs analyses. **Section 3** of this bill creates an Advisory Committee to provide technical expertise and consumer advice and recommendations to the Office.

Section 5 of this bill makes an appropriation of \$3,230,000 to the Department of Health and Human Services to support the activities of the Office and the Advisory Committee.



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Section 6 of this bill makes an appropriation of \$3,400,000 to the Nevada System of Higher Education to support activities to enhance the development of the health care workforce and to provide incentives to attract and retain health care professionals.

Section 7 of this bill requires the Office of Health Planning, Analysis and Policy Support to conduct investigations concerning certain health care issues and to report the results to the Legislative Committee on Health Care.

Section 8 of this bill creates a Steering Committee for e-Health which is required to establish a plan for the development of health information technology and health information exchange in this State.

Section 9 of this bill creates an Advisory Committee on the Regulation of Providers of Health Care in Nevada to conduct: (1) a review of the laws of this State that establish the scope of practice authorized for providers of health care; and (2) a study concerning the operation of the professional licensing boards for providers of health care with respect to barriers to licensing.

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

Section 1. Chapter 439A of NRS is hereby amended by adding thereto the provisions set forth as sections 2 and 3 of this act.

Sec. 2. *The Office of Health Planning, Analysis and Policy Support is hereby created in the Department. The Office shall:*

1. Coordinate the development of health care policy for this State by:

(a) Conducting policy analysis on issues relating to health care; and

(b) Preparing, at least biennially, a state health plan.

2. Collect and disseminate information concerning the quality and cost of health care.

3. Conduct analyses of community health care needs to assess the general health of specific populations in communities throughout this State and develop benchmarks for community health care to measure changes in the health care system in those communities.

Sec. 3. *1. The Advisory Committee for the Office of Health Planning, Analysis and Policy Support is hereby created. The Advisory Committee consists of seven members who are appointed as follows:*

(a) Three members appointed by the Governor;

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

(c) Two members appointed by the Speaker of the Assembly.

2. Members appointed to the Advisory Committee must, to the extent practicable, reflect the ethnic, racial and geographical diversity of this State and include at least two members who represent the interests of medically underserved populations.



1 3. One member of the Advisory Committee must be a provider
2 of health care who has knowledge or expertise in one or more of
3 the following:

- 4 (a) The planning and analysis of health care policy;
5 (b) Planning relating to public health;
6 (c) Medical quality assurance;
7 (d) The analysis of issues concerning disparities in the delivery
8 of health care to specific populations; or
9 (e) The analysis of issues relating to the health care workforce.

10 4. After the initial terms, the term of a member of the
11 Advisory Committee is 2 years. A member may be reappointed. A
12 vacancy on the Advisory Committee must be filled for the
13 remainder of the unexpired term in the same manner as the
14 original appointment.

15 5. A majority of the members of the Advisory Committee
16 constitutes a quorum for the transaction of business, and a
17 majority of the members of a quorum present at any meeting is
18 sufficient for any official action taken by the Advisory Committee.

19 6. The Advisory Committee shall:

20 (a) At its first meeting and annually thereafter, elect one of its
21 members to serve as Chairman; and

22 (b) Meet four times a year at the call of the Chairman.

23 7. The members of the Advisory Committee serve without
24 compensation, but while engaged in the business of the Advisory
25 Committee are entitled to receive the per diem allowance and
26 travel expenses provided for state officers and employees
27 generally.

28 8. A member of the Advisory Committee who is an officer or
29 employee of this State or a political subdivision of this State must
30 be relieved from his duties without loss of his regular
31 compensation so that he may prepare for and attend meetings of
32 the Advisory Committee and perform any work necessary to carry
33 out the duties of the Advisory Committee in the most timely
34 manner practicable. A state agency or political subdivision of this
35 State shall not require an officer or employee who is a member of
36 the Advisory Committee to make up the time he is absent from
37 work to carry out his duties as a member of the Advisory
38 Committee or use annual vacation or compensatory time for the
39 absence.

40 9. The Advisory Committee shall provide to the Office of
41 Health Planning, Analysis and Policy Support:

- 42 (a) Technical expertise in matters relating to health care; and
43 (b) Advice and recommendations from consumers of health
44 care.



Sec. 4. NRS 439A.081 is hereby amended to read as follows:

439A.081 1. The Department is the agency of the State of Nevada for health planning and development, and shall carry out the state administrative program and perform the functions of health planning and development for the State in accordance with the following priorities:

(a) Providing for the effective use of methods for controlling increases in the cost of health care;

(b) Providing for the adequate supply and distribution of health resources;

(c) Providing for equal access to health care of good quality at a reasonable cost; and

(d) Providing education to the public regarding proper personal health care and methods for the effective use of available health services.

2. In order to carry out the provisions of this chapter, the Director may:

(a) Delegate the duties of the Director and the Department pursuant to this chapter to any of the divisions of the Department ~~or~~ *or the Office of Health Planning, Analysis and Policy Support;*

(b) Hire employees in the classified service;

(c) Adopt such regulations as are necessary; and

(d) Apply for, accept and disburse money granted by the Federal Government for the purposes of health planning and development.

3. The Department may, by regulation, fix fees to be collected from applicants seeking approval of proposed health facilities or services. The amounts of such fees must be based upon the Department's costs of examining and acting upon the applications.

4. In developing and revising any state plan for health planning and development, the Department shall consider, among other things, the amount of money available from the Federal Government for health planning and development and the conditions attached to the acceptance of that money, and the limitations of legislative appropriations for health planning and development.

Sec. 5. 1. There is hereby appropriated from the State General Fund to the Department of Health and Human Services the sum of \$3,230,000 to be allocated as follows:

(a) For the support of the Office of Health Planning, Analysis and Policy Support created pursuant to section 2 of this act:

For the Fiscal Year 2007-2008..... \$1,040,000

For the Fiscal Year 2008-2009..... \$1,040,000

(b) To carry out the duties of the Office of Health Planning, Analysis and Policy Support set forth in section 7 of this act, the sum of \$800,000.



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(c) For the support of the Steering Committee for e-Health created pursuant to section 8 of this act, the sum of \$350,000.

2. Any balance of the sums appropriated by paragraph (a) of subsection 1 remaining at the end of the respective fiscal years must not be committed for expenditure after June 30 of the respective fiscal years by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 19, 2008, and September 18, 2009, respectively, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 19, 2008, and September 18, 2009, respectively.

3. Any remaining balance of the appropriations made by paragraphs (b) and (c) of subsection 1 must not be committed for expenditure after June 30, 2009, by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 18, 2009, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 18, 2009.

Sec. 6. 1. There is hereby appropriated from the State General Fund to the Nevada System of Higher Education, the sum of \$3,400,000 to be allocated as follows:

(a) To support activities to enhance the development of the health care workforce:

For the Fiscal Year 2007-2008..... \$1,200,000

For the Fiscal Year 2008-2009..... \$1,200,000

(b) To conduct activities concerning incentives to attract and retain health care professionals:

For the Fiscal Year 2007-2008..... \$500,000

For the Fiscal Year 2008-2009..... \$500,000

2. Any balance of the sums appropriated by subsection 1 remaining at the end of the respective fiscal years must not be committed for expenditure after June 30 of the respective fiscal years by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 19, 2008, and September 18, 2009, respectively, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred,



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1 and must be reverted to the State General Fund on or before
2 September 19, 2008, and September 18, 2009, respectively.

3 **Sec. 7.** The Office of Health Planning, Analysis and Policy
4 Support created pursuant to section 2 of this act shall:

5 1. Conduct an examination of the federal Deficit Reduction Act
6 of 2005, Public Law 109-171, to identify opportunities to improve
7 the delivery of health care to:

- 8 (a) Persons who require long-term care;
- 9 (b) Persons with serious mental illness; and
- 10 (c) Children with serious emotional disturbances.

11 2. Create a task force to study issues relating to the redesign of
12 the system for providing long-term health care. The task force must,
13 not later than May 1, 2008, submit a report of the results of its study
14 and any recommendations for legislation to the Office of Health
15 Planning, Analysis and Policy Support.

16 3. Conduct an examination of the available methods for
17 restructuring the system for providing appropriate health care to
18 persons with mental, emotional or behavioral disorders.

19 4. Not later than June 30, 2008, submit to the Legislative
20 Committee on Health Care the report of the task force, the results of
21 the examinations conducted pursuant to this section and any
22 recommendations for legislation.

23 **Sec. 8.** 1. The Steering Committee for e-Health is hereby
24 created.

25 2. The Governor shall establish the membership of the Steering
26 Committee and, as soon as practicable after July 1, 2007, appoint its
27 members. The members of the Steering Committee must, to the
28 extent practicable, represent the interests of:

- 29 (a) Physicians, nurses and other providers of health care;
- 30 (b) Hospitals and other health care facilities;
- 31 (c) The pharmaceutical industry;
- 32 (d) Consumers of health care;
- 33 (e) Employers and unions;
- 34 (f) The scientific and academic community; and
- 35 (g) The State of Nevada, its political subdivisions and agencies,
36 including, without limitation, the Office of Health Planning,
37 Analysis and Policy Support created pursuant to section 2 of this act
38 and the Department of Information Technology.

39 3. The members of the Steering Committee serve without
40 compensation, but while engaged in the business of the Steering
41 Committee are entitled to receive the per diem allowance and travel
42 expenses provided for state officers and employees generally.

43 4. A member of the Steering Committee who is an officer or
44 employee of this State or a political subdivision of this State must be
45 relieved from his duties without loss of his regular compensation so



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1 that he may prepare for and attend meetings of the Steering
2 Committee and perform any work necessary to carry out the duties
3 of the Steering Committee in the most timely manner practicable. A
4 state agency or political subdivision of this State shall not require an
5 officer or employee who is a member of the Steering Committee to
6 make up the time he is absent from work to carry out his duties as a
7 member of the Steering Committee or use annual vacation or
8 compensatory time for the absence.

9 5. The Steering Committee shall establish a plan for the
10 development of health information technology and health
11 information exchange. The plan must include, without limitation:

12 (a) Recommendations for a permanent governing body to
13 supervise the development of health information technology and
14 health information exchange in this State, and the implementation of
15 the plan;

16 (b) Priorities for health information technology and health
17 information exchange;

18 (c) The identification of financial barriers and other barriers that
19 may prevent the implementation of the plan and any
20 recommendations for overcoming those barriers;

21 (d) Recommendations for legislation to protect the privacy of
22 persons and the security of health information;

23 (e) Methods for including existing initiatives for health
24 information technology and health information exchange in the
25 plan; and

26 (f) A preliminary program for implementing the plan that
27 establishes goals and timetables and identifies the persons, agencies
28 and organizations that are responsible for achieving those goals.

29 6. The Office of Health Planning, Analysis and Policy Support
30 shall provide such staff and other support as is necessary for the
31 Steering Committee to carry out the provisions of this section.

32 7. The Steering Committee shall, not later than May 1, 2008,
33 submit its plan and any recommendations for legislation to the
34 Office of Health Planning, Analysis and Policy Support.

35 **Sec. 9.** 1. There is hereby created the Advisory Committee
36 on the Regulation of Providers of Health Care in Nevada. The
37 Advisory Committee consists of:

38 (a) Two members of the Legislative Committee on Health Care
39 appointed by the Chairman of that Committee;

40 (b) The Chairman of the Senate Standing Committee on Human
41 Resources and Education;

42 (c) A member of the Senate Standing Committee on Commerce
43 and Labor who served during the 74th Session of the Nevada
44 Legislature appointed by the Chairman of that Committee;



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(d) The Chairman of the Assembly Standing Committee on Health and Human Services; and

(e) A member of the Assembly Standing Committee on Commerce and Labor during the 74th Session of the Nevada Legislature appointed by the Chairman of that Committee.

2. The Chairman of the Legislative Committee on Health Care shall designate a member of the Advisory Committee to serve as Chairman.

3. Except during a regular or special session of the Legislature, for each day or portion of a day during which a member of the Advisory Committee attends a meeting of the Advisory Committee or is otherwise engaged in the work of the Advisory Committee, he is entitled to receive the:

(a) Compensation provided for a majority of the members of the Legislature during the first 60 days of the preceding session;

(b) Per diem allowance provided for state officers and employees generally; and

(c) Travel expenses provided pursuant to NRS 218.2207.

4. The compensation, per diem allowances and travel expenses of the members of the Advisory Committee must be paid from the Legislative Fund.

5. The Advisory Committee shall:

(a) Conduct:

(1) A review of the laws of this State relating to the scope of practice authorized for providers of health care.

(2) A study concerning the operation of the professional licensing boards for providers of health care with respect to barriers to licensing.

(b) Not later than June 30, 2008, submit a report of the results of its review and study and any recommendations for legislation to the Legislative Committee on Health Care.

6. The Advisory Committee may contract with such experts, researchers and consultants as may be necessary for the Advisory Committee to carry out its duties.

Sec. 10. As soon as practicable after July 1, 2007, the members of the Advisory Committee for the Office of Health Planning, Analysis and Policy Support created pursuant to section 3 of this act must be appointed as follows:

1. The Governor shall appoint:

(a) One member to serve an initial term that expires on June 30, 2008.

(b) Two members to serve initial terms that expire on June 30, 2009.

2. The Majority Leader of the Senate shall appoint:



- 1 (a) One member to serve an initial term that expires on June 30,
2 2008.
3 (b) One member to serve an initial term that expires on June 30,
4 2009.
5 3. The Speaker of the Assembly shall appoint:
6 (a) One member to serve an initial term that expires on June 30,
7 2008.
8 (b) One member to serve an initial term that expires on June 30,
9 2009.
10 **Sec. 11.** 1. This act becomes effective on July 1, 2007.
11 2. Sections 8 and 9 of this act expire by limitation on June 30,
12 2008.

