

SENATE BILL NO. 340—SENATORS BREEDEN AND WIENER

MARCH 21, 2011

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions relating to programs to increase public awareness of health care information. (BDR 40-663)

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 public health; requiring hospitals and surgical centers for ambulatory patients to report certain information relating to physicians who perform surgical procedures; requiring the Department of Health and Human Services to post on an Internet website certain information relating to physicians who perform surgical procedures; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

1 **Sections 1 and 2** of this bill require hospitals and surgical centers for
2 ambulatory patients to report certain data concerning the names of physicians who
3 perform surgical procedures and other data relating to those surgical procedures to
4 the programs to increase public awareness of health care information. **Section 3** of
5 this bill requires the Department of Health and Human Services to post that
6 information on an Internet website. Existing law authorizes the Department to seek
7 injunctive relief or civil penalties against facilities that violate the reporting
8 requirements. (NRS 439A.300, 439A.310)

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

1 **Section 1.** NRS 439A.220 is hereby amended to read as
2 follows:
3 439A.220 1. The Department shall establish and maintain a
4 program to increase public awareness of health care information



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1 concerning the hospitals in this State. The program must be
2 designed to assist consumers with comparing the quality of care
3 provided by the hospitals in this State and the charges for that care.

4 2. The program must include, without limitation, the collection,
5 maintenance and provision of information concerning:

6 (a) Inpatients and outpatients of each hospital in this State as
7 reported in the forms submitted pursuant to NRS 449.485;

8 (b) The quality of care provided by each hospital in this State as
9 determined by applying uniform measures of quality prescribed by
10 the Department pursuant to NRS 439A.230;

11 (c) How consistently each hospital follows recognized practices
12 to prevent the infection of patients, to speed the recovery of patients
13 and to avoid medical complications of patients;

14 (d) For each hospital, the total number of patients discharged,
15 the average length of stay and the average billed charges, reported
16 for the 50 most frequent diagnosis-related groups for inpatients and
17 50 medical treatments for outpatients that the Department
18 determines are most useful for consumers; ~~and~~

19 (e) *For each hospital, the name of each physician who*
20 *performed a surgical procedure in the hospital and the total*
21 *number of surgical procedures performed by the physician,*
22 *reported by diagnosis-related group, principal diagnosis, principal*
23 *surgical procedure and secondary surgical procedure; and*

24 (f) Any other information relating to the charges imposed and
25 the quality of the services provided by the hospitals in this State
26 which the Department determines is:

27 (1) Useful to consumers;

28 (2) Nationally recognized; and

29 (3) Reported in a standard and reliable manner.

30 3. As used in this section, "diagnosis-related group" means
31 groupings of medical diagnostic categories used as a basis for
32 hospital payment schedules by Medicare and other third-party health
33 care plans.

34 **Sec. 2.** NRS 439A.240 is hereby amended to read as follows:

35 439A.240 1. The Department shall establish and maintain a
36 program to increase public awareness of health care information
37 concerning the surgical centers for ambulatory patients in this State.
38 The program must be designed to assist consumers with comparing
39 the quality of care provided by the surgical centers for ambulatory
40 patients in this State and the charges for that care.

41 2. The program must include, without limitation, the collection,
42 maintenance and provision of information concerning:

43 (a) The charges imposed on outpatients by each surgical center
44 for ambulatory patients in this State as reported in the forms
45 submitted pursuant to NRS 439A.250;



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(b) The quality of care provided by each surgical center for ambulatory patients in this State as determined by applying uniform measures of quality prescribed by the Department pursuant to NRS 439A.250;

(c) How consistently each surgical center for ambulatory patients follows recognized practices to prevent the infection of patients, to speed the recovery of patients and to avoid medical complications of patients;

(d) For each surgical center for ambulatory patients, the total number of patients discharged and the average billed charges, reported for 50 medical treatments for outpatients that the Department determines are most useful for consumers; ~~and~~

(e) For each surgical center for ambulatory patients, the name of each physician who performed a surgical procedure in the surgical center for ambulatory patients and the total number of surgical procedures performed by the physician, reported by type of medical treatment, principal diagnosis, principal surgical procedure and secondary surgical procedure; and

(f) Any other information relating to the charges imposed and the quality of the services provided by the surgical centers for ambulatory patients in this State which the Department determines is:

(1) Useful to consumers;

(2) Nationally recognized; and

(3) Reported in a standard and reliable manner.

Sec. 3. NRS 439A.270 is hereby amended to read as follows:

439A.270 1. The Department shall establish and maintain an Internet website that includes the information concerning the charges imposed and the quality of the services provided by the hospitals and surgical centers for ambulatory patients in this State as required by the programs established pursuant to NRS 439A.220 and 439A.240. The information must:

(a) Include, for each hospital in this State, the ~~total~~ :

(1) Total number of patients discharged, the average length of stay and the average billed charges, reported for the 50 most frequent diagnosis-related groups for inpatients and 50 medical treatments for outpatients that the Department determines are most useful for consumers; *and*

(2) Name of each physician who performed a surgical procedure in the hospital and the total number of surgical procedures performed by each physician in the hospital, reported for the most frequent surgical procedures that the Department determines are most useful for consumers;

(b) Include, for each surgical center for ambulatory patients in this State, the ~~total~~ :



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(1) *Total* number of patients discharged and the average billed charges, reported for 50 medical treatments for outpatients that the Department determines are most useful for consumers; *and*

(2) *Name of each physician who performed a surgical procedure in the surgical center for ambulatory patients and the total number of surgical procedures performed by each physician in the surgical center for ambulatory patients, reported for the most frequent surgical procedures that the Department determines are most useful for consumers;*

(c) Be presented in a manner that allows a person to view and compare the information for the hospitals by:

(1) Geographic location of each hospital;

(2) Type of medical diagnosis; and

(3) Type of medical treatment;

(d) Be presented in a manner that allows a person to view and compare the information for the surgical centers for ambulatory patients by:

(1) Geographic location of each surgical center for ambulatory patients;

(2) Type of medical diagnosis; and

(3) Type of medical treatment;

(e) Be presented in a manner that allows a person to view and compare the information separately for:

(1) The inpatients and outpatients of each hospital; and

(2) The outpatients of each surgical center for ambulatory patients;

(f) Be readily accessible and understandable by a member of the general public;

(g) Include the annual summary of reports of sentinel events prepared pursuant to paragraph (d) of subsection 1 of NRS 439.840; and

(h) Provide any other information relating to the charges imposed and the quality of the services provided by the hospitals and surgical centers for ambulatory patients in this State which the Department determines is:

(1) Useful to consumers;

(2) Nationally recognized; and

(3) Reported in a standard and reliable manner.

2. The Department shall:

(a) Publicize the availability of the Internet website;

(b) Update the information contained on the Internet website at least quarterly;

(c) Ensure that the information contained on the Internet website is accurate and reliable;



1 (d) Ensure that the information contained on the Internet website
2 is aggregated so as not to reveal the identity of a specific inpatient or
3 outpatient of a hospital;

4 (e) Post a disclaimer on the Internet website indicating that the
5 information contained on the website is provided to assist with the
6 comparison of hospitals and is not a guarantee by the Department or
7 its employees as to the charges imposed by the hospitals in this State
8 or the quality of the services provided by the hospitals in this State,
9 including, without limitation, an explanation that the actual amount
10 charged to a person by a particular hospital may not be the same
11 charge as posted on the website for that hospital;

12 (f) Provide on the Internet website established pursuant to this
13 section a link to the Internet website of the Centers for Medicare and
14 Medicaid Services of the United States Department of Health and
15 Human Services; and

16 (g) Upon request, make the information that is contained on the
17 Internet website available in printed form.

18 3. As used in this section, “diagnosis-related group” means
19 groupings of medical diagnostic categories used as a basis for
20 hospital payment schedules by Medicare and other third-party health
21 care plans.

