

SENATE BILL NO. 418—COMMITTEE ON
HEALTH AND HUMAN SERVICES

MARCH 28, 2011

Referred to Committee on Legislative Operations and Elections

SUMMARY—Creates a subcommittee of the Legislative Committee on Health Care to oversee the implementation of federal health care reform in this State. (BDR 40-695)

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 care; creating a subcommittee of the Legislative Committee on Health Care to oversee the implementation of federal health care reform in this State; prescribing the composition, powers and duties of the subcommittee; requiring state agencies to cooperate with and provide periodic reports to the subcommittee; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

In 2010, Congress passed and President Obama signed into law the Patient Protection and Affordable Care Act. (Pub. L. No. 111-148) The bill was modified shortly thereafter by the Health Care and Education Reconciliation Act of 2010. (Pub. L. No. 111-152) Collectively, the Patient Protection and Affordable Care Act and its modifications in the Health Care and Education Reconciliation Act constitute a major federal reform of the health care system.

This bill requires the creation of a subcommittee of the Legislative Committee on Health Care to oversee the implementation of federal health care reform. The Subcommittee on Health Care Reform must consist of three members, including at least one from each House of the Legislature and one from the minority political party, appointed by the Chair of the Legislative Committee on Health Care. The Subcommittee is required to review the implementation of federal health care reform and is authorized to make recommendations concerning its effective implementation. State agencies responsible for the administration of federal health care reform are required to cooperate with the Subcommittee and to provide periodic reports to the Subcommittee concerning the implementation of federal health care reform.



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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. The Chair of the Committee shall appoint a Subcommittee
4 on Health Care Reform to oversee the implementation of federal
5 health care reform in this State. The Subcommittee must consist of
6 three members, including at least one representative of each
7 House of the Legislature and one member of the minority political
8 party.*

9 *2. The Subcommittee shall review the implementation of
10 federal health care reform in this State, including, without
11 limitation:*

12 *(a) The expansion of the Medicaid program;
13 (b) Changes to the Children's Health Insurance Program;
14 (c) The creation of an American Health Benefit Exchange and
15 a Small Business Health Options Program Exchange;
16 (d) High-risk pools established to provide health care coverage
17 to persons with preexisting medical conditions;*

18 *(e) Optional elements of federal health care reform, including
19 the option to create a Basic Health Plan for certain uninsured
20 persons; and*

21 *(f) Any other issues relating to the implementation of federal
22 health care reform and its effect on the State of Nevada, including
23 its agencies and local governments.*

24 *3. Each state agency responsible for the administration of
25 any portion of federal health care reform shall cooperate with the
26 Subcommittee and provide periodic reports to the Subcommittee
27 concerning the implementation of federal health care reform in
28 this State.*

29 *4. The Subcommittee may make recommendations to the
30 Committee, state agencies, local governments, health care
31 providers and insurers concerning the effective implementation of
32 federal health care reform in this State. The Committee shall
33 review the recommendations of the Subcommittee and shall
34 include the recommendations of the Subcommittee or any
35 revisions approved by the Committee in its annual report pursuant
36 to NRS 439B.200.*

37 *5. Except as otherwise ordered by the Legislative
38 Commission, the members of the Subcommittee shall meet not
39 earlier than November 1 of each odd-numbered year and not later
40 than August 31 of the following even-numbered year at the times
41 and places specified by a call of the Chair of the Subcommittee or
42 a majority of the Subcommittee. Two members of the*



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1 *Subcommittee constitute a quorum, and a quorum may exercise*
2 *all the powers conferred on the Subcommittee.*

3 *6. Members of the Subcommittee are entitled to receive the*
4 *compensation provided for a majority of the members of the*
5 *Legislature during the first 60 days of the preceding regular*
6 *session for each day or portion of a day during which the member*
7 *attends a meeting of the Subcommittee or is otherwise engaged in*
8 *the business of the Subcommittee plus the per diem allowance*
9 *provided for state officers and employees generally and the travel*
10 *expenses provided pursuant to NRS 218A.655. The salaries and*
11 *expenses of the Subcommittee must be paid from the Legislative*
12 *Fund.*

13 *7. As used in this section, “federal health care reform” means*
14 *the provisions of the Patient Protection and Affordable Care Act,*
15 *Public Law 111-148, its modifications and related provisions in*
16 *the Health Care and Education Reconciliation Act of 2010, Public*
17 *Law 111-152, and any subsequent federal legislation modifying*
18 *those provisions.*

19 Sec. 2. This act becomes effective on July 1, 2011.

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