

CHAPTER.....

AN ACT relating to public welfare; eliminating the requirement that the Director of the Department of Health and Human Services apply for a Medicaid waiver pursuant to the Health Insurance Flexibility and Accountability demonstration initiative; requiring the transfer of certain money that is set aside for the costs of carrying out the program established pursuant to the waiver; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

Under existing law, the Director of the Department of Health and Human Services is required to apply to the Federal Government for a Medicaid waiver pursuant to the Health Insurance Flexibility and Accountability demonstration initiative or any succeeding program. The waiver provides limited health care benefits through Medicaid and the Children’s Health Insurance Program to certain persons who are otherwise ineligible for Medicaid. (NRS 422.2726-422.2729) **Sections 1-4** of this bill eliminate the requirement for the waiver as of November 30, 2011, and revise appropriate statutory provisions to remove references to the waiver. **Section 5** of this bill provides a limitation on the period in which claims against the Health Insurance Flexibility and Accountability Holding Account may be submitted and provides for the transfer of money in the Account to the State General Fund and the Fund for Hospital Care for Indigent Persons in equal amounts.

EXPLANATION – Matter in ***bolded italics*** is new; matter between brackets ~~omitted material~~ is material to be omitted.

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

Section 1. NRS 422.240 is hereby amended to read as follows:
422.240 1. Money to carry out the provisions of this chapter, including, without limitation, any federal money allotted to the State of Nevada pursuant to the program to provide Temporary Assistance for Needy Families and the Program for Child Care and Development, must, except as otherwise provided in NRS ~~[422.2726 to 422.2729, inclusive,]~~ 422.3755 to 422.379, inclusive, and 439.630, be provided by appropriation by the Legislature from the State General Fund.

2. Disbursements for the purposes of this chapter must, except as otherwise provided in NRS ~~[422.2726 to 422.2729, inclusive,]~~ 422.3755 to 422.379, inclusive, and 439.630, be made upon claims duly filed and allowed in the same manner as other money in the State Treasury is disbursed.



Sec. 2. NRS 428.275 is hereby amended to read as follows:

428.275 1. The board of county commissioners of a county shall before July 1, 1985, by ordinance, create in the county treasury a fund to be designated as the fund for medical assistance to indigent persons.

2. The money in the fund must be used in the manner set forth in NRS 428.295 . ~~{and to fund, in part, the waiver obtained pursuant to NRS 422.2726 and any program established pursuant to NRS 422.2728.}~~

3. All money collected or recovered pursuant to this section and NRS 428.285, and the interest earned on the money in the fund must be deposited for credit to the fund. Claims against the fund must be paid on claims approved by the board of county commissioners. Any money remaining in the fund at the end of any fiscal year does not revert to the county general fund.

Sec. 3. NRS 428.305 is hereby amended to read as follows:

428.305 1. The Supplemental Account for Medical Assistance to Indigent Persons is created in the Fund for Hospital Care for Indigent Persons. The interest earned on the money in the Supplemental Account must be deposited for credit to the Supplemental Account.

2. ~~{Beginning with the fiscal year that begins on July 1, 2005, at the end of each quarter of a fiscal year, the balance in the Supplemental Account must be transferred to the Health Insurance Flexibility and Accountability Holding Account in the State General Fund in an amount not to exceed the amount of any appropriation provided by the Legislature to fund a program established pursuant to NRS 422.2728.~~

~~—3.}~~ Any money remaining in the ~~{Health Insurance Flexibility and Accountability Holding}~~ **Supplemental** Account at the end of each fiscal year reverts to the Fund for Hospital Care to Indigent Persons and to the State General Fund in equal amounts.

Sec. 4. NRS 422.2726, 422.2727, 422.2728 and 422.2729 are hereby repealed.

Sec. 5. 1. A person shall not provide services or care for reimbursement from a program carried out pursuant to a Medicaid waiver pursuant to the Health Insurance Flexibility and Accountability demonstration initiative on or after November 30, 2011.

2. Any claim against the Health Insurance Flexibility and Accountability Holding Account must be submitted to the Director of the Department of Health and Human Services or a designee of the Director on or before December 31, 2011.



3. Any money in the Health Insurance Flexibility and Accountability Holding Account on November 30, 2011, must not be committed for expenditure on or after January 31, 2012.

4. As soon as practicable on or after February 1, 2012, the State Controller shall transfer any money remaining in the Health Insurance Flexibility and Accountability Holding Account which is not committed for expenditure in equal amounts to the State General Fund and the Fund for Hospital Care for Indigent Persons.

Sec. 6. This act becomes effective on November 30, 2011.

