

Amendment No. 137

Senate Amendment to Senate Bill No. 113	(BDR 57-690)
Proposed by: Senate Committee on Commerce, Labor and Energy	
Amends: Summary: No Title: No Preamble: No Joint Sponsorship: No Digest: No	

ASSEMBLY ACTION			Initial and Date	SENATE ACTION			Initial and Date		
Adopted	<input type="checkbox"/>	Lost	<input type="checkbox"/>	_____	Adopted	<input type="checkbox"/>	Lost	<input type="checkbox"/>	_____
Concurred In	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____	Concurred In	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____
Receded	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____	Receded	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____

EXPLANATION: Matter in (1) *blue bold italics* is new language in the original bill; (2) variations of green bold underlining is language proposed to be added in this amendment; (3) ~~red strikethrough~~ is deleted language in the original bill; (4) ~~purple double strikethrough~~ is language proposed to be deleted in this amendment; (5) orange double underlining is deleted language in the original bill proposed to be retained in this amendment.



SENATE BILL NO. 113—COMMITTEE ON
HEALTH AND HUMAN SERVICES

PREFILED FEBRUARY 1, 2015

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions relating to insurance. (BDR 57-690)

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

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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 insurance; exempting health care sharing ministries from the provisions of the Nevada Insurance Code; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law sets forth the provisions of the Nevada Insurance Code, which regulates the conduct of the business of insurance in this State. (Title 57 of NRS) Under existing law, certain entities and programs are specifically exempted from the application of the Nevada Insurance Code. (NRS 679A.160)

This bill completely exempts health care sharing ministries from the provisions of the Nevada Insurance Code. Health care sharing ministries are organizations that facilitate the sharing of health care costs between individual members who share similar ethical or religious beliefs.

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

Section 1. Chapter 679A of NRS is hereby amended by adding thereto a new section to read as follows:

“Health care sharing ministry” means a nonprofit organization that:

1. ~~Is tax exempt pursuant to the Internal Revenue Code, 26 U.S.C. § 501(c)(6).~~ Has been in existence, together with any predecessor entity, at all times since December 31, 1999, and whose members have been sharing medical expenses continuously and without interruption since at least December 31, 1999;

2. Limits participation to those persons who share a similar set of ethical or religious beliefs;

3. Acts as a facilitator among participants who have financial or medical needs and matches those participants with other participants who have the ability to assist those with financial or medical needs in accordance with criteria established by the health care sharing ministry;

4. Provides for the financial or medical needs of a participant through contributions from one participant to another;

5. Provides a written monthly statement to all participants that lists the total dollar amount of qualified needs submitted to the health care sharing ministry, as well as the amount actually published or assigned to participants for their contribution; and

6. Provides a written disclaimer on or accompanying all applications, marketing materials and guideline materials distributed by or on behalf of the health care sharing ministry that states, in substance:

NOTICE

The organization facilitating the sharing of medical expenses is not an insurance company, and neither its guidelines nor plan of operation constitute an insurance policy. ~~Whether anyone chooses to assist you with your medical bills will be totally voluntary because no other participant will be compelled by law to contribute toward your medical bills. As such, participation in the organization or a subscription to any of its documents should never be considered to be insurance.~~ Without health care insurance, there is no guarantee that you, a fellow participant or any other person who was a party to the health care ministry agreement will be protected in the event of illness or emergency. Regardless of whether you receive any payment for medical expenses or whether this organization terminates, withdraws from the faith-based agreement or continues to operate, you are always personally responsible for the payment of your own medical bills. If your participation in such an organization ends, state law may subject you to a waiting period before providing coverage.

Sec. 2. NRS 679A.020 is hereby amended to read as follows:

679A.020 As used in this Code, unless the context otherwise requires, the words and terms defined in NRS 679A.030 to 679A.130, inclusive, *and section 1 of this act* have the meanings ascribed to them in those sections.

Sec. 3. NRS 679A.160 is hereby amended to read as follows:

679A.160 Except as otherwise provided by specific statute, no provision of this Code applies to:

1. Fraternal benefit societies, as identified in chapter 695A of NRS, except as stated in chapter 695A of NRS.

2. Hospital, medical or dental service corporations, as identified in chapter 695B of NRS, except as stated in chapter 695B of NRS.

3. Motor clubs, as identified in chapter 696A of NRS, except as stated in chapter 696A of NRS.

4. Bail agents, as identified in chapter 697 of NRS, except as stated in NRS 680B.025 to 680B.039, inclusive, and chapter 697 of NRS.

5. Risk retention groups, as identified in chapter 695E of NRS, except as stated in chapter 695E of NRS.

6. Captive insurers, as identified in chapter 694C of NRS, with respect to their activities as captive insurers, except as stated in chapter 694C of NRS.

7. Health and welfare plans arising out of collective bargaining under chapter 288 of NRS, except that the Commissioner may review the plan to ensure that the benefits are reasonable in relation to the premiums and that the fund is financially sound.

8. Programs established pursuant to subsection 1 of NRS 315.725 and the entities administering those programs, except as stated in NRS 315.725.

9. Health care sharing ministries, as identified in section 1 of this act.

Sec. 4. This act becomes effective on July 1, 2015.