### Amendment No. 67

Senate Amendment to Senate Bill No. 162 (BDR 57-99)									
Proposed by: Senate Committee on Judiciary									
Amends:	Summary: No	Title: Yes Preamble: No	Joint Sponsorship: No	Digest: Yes					

ASSEMBLY ACTION			Initial and Date	SENATE ACTIO	TION Initial and Date	
Adopted		Lost	1	Adopted	Lost	
Concurred In		Not		Concurred In	Not	
Receded		Not		Receded	Not	

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

DP/DY : Date: 3/27/2015

S.B. No. 162—Revises provisions relating to insurance. (BDR 57-950)

# SENATE BILL NO. 162-SENATOR ROBERSON

# FEBRUARY 16, 2015

# Referred to Committee on Judiciary

SUMMARY—Revises provisions relating to insurance. (BDR 57-950)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Yes.

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

AN ACT relating to insurance; <a href="freeling-provisions">freeling-provisions</a> governing the provision of medical records by a personal injury claimant or a claimant's attorney upon the request of an insurer or other party against whom a claim is asserted under a policy of insurance covering certain motor vehicles; and providing other matters properly relating thereto.

### **Legislative Counsel's Digest:**

Under existing law, a party against whom a claim is asserted for personal injury under a policy of motor vehicle insurance covering a passenger car may require any attorney representing the claimant to provide to the party and his or her insurer or attorney, not more than once every 90 days, all medical reports, records and bills concerning the claim. In lieu of providing such reports, records and bills, the claimant or any attorney representing the claimant may provide a written authorization to receive the reports, records and bills from the provider of health care. Upon receipt of any photocopies of such reports, records and bills, the insurer who issued the policy must, upon request, immediately disclose to the insured or the claimant all pertinent facts or provisions of the policy relating to any coverage at issue. (NRS 690B.042)

This bill fprovides that any written authorization provided by the claimant or any attorney representing the claimant must include the names and addresses of all relevant providers of health care to the claimant regarding the claim. This bill further provides that the medical reports, records and bills provided by any attorney representing the claimant or obtained pursuant to a written authorization provided by the claimant or any attorney representing the claimant must include all such reports, records and bills prepared by any provider of health care for the claimant concerning any injuries of the claimant or treatment provided to the claimant which is related to the incident which is the subject of the claim.

This bill further provides that, upon receipt of the medical reports, records and bills concerning the claim, the insurer has 30 days after a request in which to disclose to the insured or the claimant the pertinent facts and provisions of the policy.

Finally, this bill provides that if the party or the insurer or attorney of the party against whom the claim is asserted does not receive all medical reports, records and bills concerning the claim, the party or the insurer or attorney of the party may, upon petition, obtain an order from a court of competent jurisdiction requiring the provision of such reports, records and bills. In lieu of or in addition to any other sanction, a judge issuing such an order may require the claimant or any attorney representing the claimant to pay any reasonable expenses or attorney's fees incurred by the party or the insurer or attorney of the party due to the failure of the claimant or any attorney representing the claimant to comply with: (1) the requirements to

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the court. repeals those provisions.

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

Section 1. INRS 690B.042 is hereby amended to read as follows:

600B.042 1. Except as otherwise provided in subsection 2, any party against whom a claim is asserted for compensation or damages for personal injury under a policy of motor vehicle insurance covering a passenger car may require any attorney representing the claimant to provide to the party and the insurer or attorney of the party, not more than once every 90 days, all medical reports, records and bills concerning the claim.

2. In lieu of providing all medical reports, records and bills concerning the claim pursuant to subsection 1, the claimant or any attorney representing the claimant may provide to the party or the insurer or attorney of the party a written authorization to receive the reports, records and bills from all of the [provider] providers of health care [.] involved in the claim, which must include, without limitation, the names and addresses of all such providers of health care. At the written request of the claimant or the attorney of the claimant, copies of all medical reports, records and bills concerning the claim obtained pursuant to the authorization must be provided to the claimant or the attorney of the claimant within 30 days after the date they are received. If the claimant or the attorney of the claimant makes a written request for the reports, records and bills, the claimant or the attorney of the claimant shall pay for the reasonable costs of copying the reports, records and bills.

3. Upon receipt of [any] photocopies of all medical reports, records and bills concerning the claim received pursuant to subsection 1 or a written authorization provided pursuant to subsection 2, the insurer who issued the policy specified in subsection 1 shall, upon request, [immediately] disclose to the insured or the elaimant all pertinent facts or provisions of the policy relating to any coverage at issue [.] not later than 30 days after the request is received by the insurer.

4. If the party or the insurer or attorney of the party does not receive all medical reports, records and bills concerning the claim as provided in this section, the party or the insurer or attorney of the party may, upon petition, obtain an order from a court of competent jurisdiction requiring the claimant or any attorney representing the claimant to meet the requirements of this section. In lieu of or in addition to any other sanction, a judge may require the claimant or any attorney representing the claimant to pay any reasonable expenses or attorney's fees incurred by the party or the insurer or attorney of the party because of the failure of the claimant or any attorney representing the claimant to comply with the provisions of this section or any order issued pursuant to this section.

5. As used in this section [, "passenger] :
(a) "All medical reports, records and bills concerning the claim" means all medical reports, records, bills and related documents prepared by any provider of health care for the claimant concerning any injuries of the claimant or treatment provided to the claimant which is related to the incident which is the subject of <del>the claim.</del>

(b) "Passenger ear" has the meaning ascribed to it in NRS 482.087.] (Deleted by amendment.)

Sec. 2. This act becomes effective:

1. Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks necessary to carry out the provisions of this aet; and

2. On January 1, 2016, for all other purposes.] (Deleted by amendment.)

Sec. 3. NRS 690B.042 is hereby repealed.

Sec. 4. This act becomes effective upon passage and approval.

#### TEXT OF REPEALED SECTION

690B.042 Claimant for damages for personal injury to provide medical reports, records and bills or authorization to receive reports, records and bills to opposing party upon request; insurer to disclose pertinent facts or provisions of policy relating to coverage at issue to insured or claimant upon request.

- 1. Except as otherwise provided in subsection 2, any party against whom a claim is asserted for compensation or damages for personal injury under a policy of motor vehicle insurance covering a passenger car may require any attorney representing the claimant to provide to the party and the insurer or attorney of the party, not more than once every 90 days, all medical reports, records and bills concerning the claim.
- 2. In lieu of providing medical reports, records and bills pursuant to subsection 1, the claimant or any attorney representing the claimant may provide to the party or the insurer or attorney of the party a written authorization to receive the reports, records and bills from the provider of health care. At the written request of the claimant or the attorney of the claimant, copies of all reports, records and bills obtained pursuant to the authorization must be provided to the claimant or the attorney of the claimant within 30 days after the date they are received. If the claimant or the attorney of the claimant makes a written request for the reports, records and bills, the claimant or the attorney of the claimant shall pay for the reasonable costs of copying the reports, records and bills.
- 3. Upon receipt of any photocopies of medical reports, records and bills, or a written authorization pursuant to subsection 2, the insurer who issued the policy specified in subsection 1 shall, upon request, immediately disclose to the insured or the claimant all pertinent facts or provisions of the policy relating to any coverage at issue.
- 4. As used in this section, "passenger car" has the meaning ascribed to it in NRS 482.087.