

Amendment No. 219

Assembly Amendment to Assembly Bill No. 223	(BDR 38-544)
<b>Proposed by:</b> Assembly Committee on Health and Human Services	
<b>Amends:</b> Summary: Yes Title: Yes Preamble: No Joint Sponsorship: No Digest: Yes	

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.

EWR/RBL



Date: 4/22/2019

A.B. No. 223—Requires the Department of Health and Human Services to seek a federal waiver to allow certain dental care for persons with diabetes to be included in the State Plan for Medicaid.  
(BDR 38-544)





## ASSEMBLY BILL NO. 223—ASSEMBLYWOMAN NEAL

FEBRUARY 21, 2019

Referred to Committee on Health and Human Services

SUMMARY—Requires the Department of Health and Human Services to seek a federal waiver to ~~allow~~ **provide** certain dental care for persons with diabetes. ~~[to be included in the State Plan for Medicaid.]~~ (BDR 38-544)

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 welfare; requiring the Department of Health and Human Services to seek a federal waiver to ~~allow~~ **provide** certain dental care for persons with diabetes. ~~;~~ ~~[to be included in the State Plan for Medicaid.];~~ making an appropriation to pay for the provision of such care; and providing other matters properly relating thereto.

**Legislative Counsel's Digest:**

Existing federal law authorizes a state to apply for and obtain a waiver of certain requirements concerning the Medicaid program for an experimental, pilot or demonstration project that is likely to assist in promoting the goals of that program. (42 U.S.C. § 1315) **Section 1** of this bill requires the Department of Health and Human Services to apply for such a waiver to ~~[include in the State Plan for Medicaid coverage for]~~ **provide** certain dental care for persons with diabetes who are at least 21 years of age. **Section 2** of this bill makes a conforming change. **Sections 3 and 4** of this bill require a health maintenance organization or managed care organization that provides health care services through managed care to recipients of Medicaid to provide to such a recipient who is eligible to receive dental coverage pursuant to **section 2** of his or her eligibility for such care. **Section 5** of this bill appropriates money to the Department to carry out the waiver. **Section 6** of this bill requires the Department to: (1) use effective purchasing methods, including collaborating with other public and nonprofit entities that provide health coverage to negotiate lower prices for services, when implementing the waiver; and (2) submit to the 81st Session of the Legislature a report concerning the implementation of the waiver.

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

**Section 1.** Chapter 422 of NRS is hereby amended by adding thereto a new section to read as follows:

*1. The Department shall apply to the Secretary of Health and Human Services for a waiver granted pursuant to 42 U.S.C. § 1315 to authorize the Department to ~~include in the State Plan for Medicaid coverage for~~ provide the dental care described in this section for persons with diabetes who are at least 21 years of age. To the extent authorized by the waiver, such dental care must consist of an initial oral evaluation and, if that evaluation determines, in accordance with the criteria for periodontal disease prescribed by the American Academy of Periodontology or its successor organization, that:*

*(a) The person does not have periodontal disease:*

*(1) Dental prophylaxis for adults, an oral evaluation ~~and~~, the tracking and monitoring of glycosylated hemoglobin ~~testing~~ and notification of the person and his or her primary care provider, if any, concerning abnormal results once every 180 days;*

*(2) A comprehensive periodontal evaluation annually; and*

*(3) Filling of cavities, as necessary.*

*(b) The person has periodontal disease:*

*(1) Up to four quadrants of periodontal scaling and root planing every 36 months or, if periodontal scaling and root planing are determined to be unnecessary in accordance with the guidelines prescribed by the American Dental Association or its successor organization, dental prophylaxis for adults every 180 days;*

*(2) One periodontal maintenance procedure every 91 days;*

*(3) ~~Glycosylated~~ Tracking and monitoring of glycosylated hemoglobin ~~testing~~ and notification of the person and his or her primary care provider, if any, concerning abnormal results every 90 days; and*

*(4) Filling of cavities, as necessary.*

*2. The Director shall collaborate with the Division of Public and Behavioral Health of the Department when carrying out the provisions of this section.*

*3. As used in this section, "dental prophylaxis" means the use of dental tools and polishing procedures to remove plaque, tartar and stains from the portion of the tooth that extends above the gum line.*

**Sec. 2.** NRS 232.320 is hereby amended to read as follows:

232.320 1. The Director:

(a) Shall appoint, with the consent of the Governor, administrators of the divisions of the Department, who are respectively designated as follows:

(1) The Administrator of the Aging and Disability Services Division;

(2) The Administrator of the Division of Welfare and Supportive Services;

(3) The Administrator of the Division of Child and Family Services;

(4) The Administrator of the Division of Health Care Financing and Policy; and

(5) The Administrator of the Division of Public and Behavioral Health.

(b) Shall administer, through the divisions of the Department, the provisions of chapters 63, 424, 425, 427A, 432A to 442, inclusive, 446 to 450, inclusive, 458A and 656A of NRS, NRS 127.220 to 127.310, inclusive, 422.001 to 422.410, inclusive, *and section 1 of this act*, 422.580, 432.010 to 432.133, inclusive, 432B.621 to 432B.626, inclusive, 444.002 to 444.430, inclusive, and 445A.010 to 445A.055, inclusive, and all other provisions of law relating to the functions of the

divisions of the Department, but is not responsible for the clinical activities of the Division of Public and Behavioral Health or the professional line activities of the other divisions.

(c) Shall administer any state program for persons with developmental disabilities established pursuant to the Developmental Disabilities Assistance and Bill of Rights Act of 2000, 42 U.S.C. §§ 15001 et seq.

(d) Shall, after considering advice from agencies of local governments and nonprofit organizations which provide social services, adopt a master plan for the provision of human services in this State. The Director shall revise the plan biennially and deliver a copy of the plan to the Governor and the Legislature at the beginning of each regular session. The plan must:

(1) Identify and assess the plans and programs of the Department for the provision of human services, and any duplication of those services by federal, state and local agencies;

(2) Set forth priorities for the provision of those services;

(3) Provide for communication and the coordination of those services among nonprofit organizations, agencies of local government, the State and the Federal Government;

(4) Identify the sources of funding for services provided by the Department and the allocation of that funding;

(5) Set forth sufficient information to assist the Department in providing those services and in the planning and budgeting for the future provision of those services; and

(6) Contain any other information necessary for the Department to communicate effectively with the Federal Government concerning demographic trends, formulas for the distribution of federal money and any need for the modification of programs administered by the Department.

(e) May, by regulation, require nonprofit organizations and state and local governmental agencies to provide information regarding the programs of those organizations and agencies, excluding detailed information relating to their budgets and payrolls, which the Director deems necessary for the performance of the duties imposed upon him or her pursuant to this section.

(f) Has such other powers and duties as are provided by law.

2. Notwithstanding any other provision of law, the Director, or the Director's designee, is responsible for appointing and removing subordinate officers and employees of the Department, other than the State Public Defender of the Office of State Public Defender who is appointed pursuant to NRS 180.010.

**Sec. 3.** Chapter 695C of NRS is hereby amended by adding thereto a new section to read as follows:

*If the Department of Health and Human Services obtains a waiver to provide the dental care described in section 1 of this act, a health maintenance organization that provides health care services through managed care to recipients of Medicaid must:*

*1. Provide written notice to each such recipient who is diagnosed with diabetes and is eligible to receive dental care pursuant to section 1 of this act of his or her eligibility to receive such care; and*

*2. Coordinate with any entity necessary to ensure that eligible recipients of Medicaid receive the benefits prescribed by that section.*

**Sec. 4.** Chapter 695G of NRS is hereby amended by adding thereto a new section to read as follows:

*If the Department of Health and Human Services obtains a waiver to provide the dental care described in section 1 of this act, a managed care organization*

1 *that provides health care services through managed care to recipients of*  
2 *Medicaid must:*

3 *1. Provide written notice to each such recipient who is diagnosed with*  
4 *diabetes and is eligible to receive dental care pursuant to section 1 of this act of*  
5 *his or her eligibility to receive such care; and*

6 *2. Coordinate with any entity necessary to ensure that eligible recipients of*  
7 *Medicaid receive the benefits prescribed by that section.*

8 **Sec. 5.** 1. There is hereby appropriated from the State General Fund to the  
9 Department of Health and Human Services for the purpose of carrying out the  
10 provisions of section 1 of this act the following sums:

11 For the Fiscal Year 2019-2020.....\$7,000,000

12 For the Fiscal Year 2020-2021.....\$7,000,000

13 2. The sums appropriated by this section are available for either fiscal year.  
14 Any remaining balance of those sums must not be committed for expenditure after  
15 June 30, 2021, by the entity to which the appropriation is made or any entity to  
16 which money from the appropriation is granted or otherwise transferred in any  
17 manner, and any portion of the appropriated money remaining must not be spent for  
18 any purpose after September 17, 2021, by either the entity to which the money was  
19 appropriated or the entity to which the money was subsequently granted or  
20 transferred, and must be reverted to the State General Fund on or before September  
21 17, 2021.

22 **Sec. 6.** 1. The Department of Health and Human Services shall use  
23 effective purchasing methods when carrying out the provisions of section 1 of this  
24 act. Such methods must include, without limitation and to the extent practicable,  
25 collaborating with the Department of Administration to negotiate prices for the  
26 purchase of the services described in section 1 of this act for recipients of Medicaid  
27 and other coverage funded by the State.

28 2. On or before January 1, 2021, the Division of Health Care Financing and  
29 Policy of the Department of Health and Human Services and the Division of Public  
30 and Behavioral Health of the Department shall submit to the Director of the  
31 Legislative Counsel Bureau for transmittal to the next regular session of the  
32 Legislature a report concerning the implementation of section 1 of this act.

33 **Sec. 7.** This act becomes effective on July 1, 2019.