

SENATE BILL NO. 435—COMMITTEE ON  
HEALTH AND HUMAN SERVICES

(ON BEHALF OF THE OFFICE OF FINANCE  
IN THE OFFICE OF THE GOVERNOR)

MARCH 27, 2023

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions relating to Medicaid.  
(BDR 38-1069)

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 Medicaid; authorizing certain expenditures of  
the revenue generated from an assessment authorized to  
be imposed on operators of certain agencies and facilities;  
and providing other matters properly relating thereto.

**Legislative Counsel’s Digest:**

Existing law authorizes the Division of Health Care Financing and Policy of the  
Department of Health and Human Services to impose an assessment on each  
operator of an agency to provide personal care services in the home and each  
operator of a medical facility that is required to obtain a license if at least 67  
percent of those operators vote in favor of the assessment. (NRS 422.3794)  
Existing law authorizes the expenditure of the money generated from such an  
assessment only to: (1) provide supplemental payments or enhanced rates of  
reimbursement under Medicaid to operators upon whom the assessment is imposed;  
and (2) administer provisions of law governing such assessments. (NRS 422.37945)  
This bill authorizes the money to also be used to provide supplemental payments or  
enhanced rates of reimbursement to operators that are not subject to the assessment  
if such expenditure was identified as a potential use of the assessment in the polling  
of operators which received an affirmative vote from at least 67 percent of the  
operators on whom the assessment was to be imposed.



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

**Section 1.** NRS 422.37945 is hereby amended to read as follows:

422.37945 1. The Account to Improve Health Care Quality and Access is hereby created in the State General Fund. The Division shall administer the Account. The revenue from assessments and penalties imposed on the operators in each operator group must be accounted for separately in the Account.

2. The interest and income on the money in the Account, after deducting any applicable charges, must be credited to the Account.

3. ~~[The]~~ *Subject to the provisions of subsection 4,* money in the Account must be expended to:

(a) Provide supplemental payments or enhanced rates of reimbursement to operators ~~[in the operator group upon whom an assessment was imposed]~~ pursuant to an upper payment limit program established under the provisions of 42 C.F.R. § 447.272 or 447.321;

(b) Provide supplemental payments to operators ~~[in the operator group upon whom an assessment was imposed]~~ who provide care to recipients of Medicaid in addition to the reimbursements those operators would otherwise receive for providing such care; and

(c) Administer the provisions of NRS 422.3791 to 422.3795, inclusive.

4. *Money in the Account that was generated by a specific assessment must not be expended to provide supplemental payments or enhanced rates of reimbursement pursuant to subsection 3 to operators in an operator group that is not subject to the assessment unless such expenditure was identified as a potential use of revenue when the assessment received an affirmative vote of at least 67 percent of the operators in the operator group subject to the assessment pursuant to subsection 1 of NRS 422.3794.*

5. Any money remaining in the Account at the end of a fiscal year does not revert to the State General Fund, and the balance of the Account must be carried forward to the next fiscal year.

**Sec. 2.** This act becomes effective upon passage and approval.

