

Amendment No. 265

Assembly Amendment to Assembly Bill No. 7	(BDR 40-381)
<b>Proposed by:</b> Assembly Committee on Health and Human Services	
<b>Amends:</b> Summary: No Title: Yes Preamble: No Joint Sponsorship: No Digest: Yes	

Adoption of this amendment will: (1) MAINTAIN the unfunded mandate not requested by the affected local government to A.B. 7 (§§ 1.3, 2). (2) ADD an appropriation where one does not currently exist in A.B. 7.
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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/AAK



Date: 4/19/2023

A.B. No. 7—Revises provisions relating to electronic health records.  
(BDR 40-381)





ASSEMBLY BILL NO. 7—COMMITTEE ON  
HEALTH AND HUMAN SERVICES

(ON BEHALF OF THE PATIENT PROTECTION COMMISSION)

PREFILED NOVEMBER 16, 2022

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions relating to electronic health records.  
(BDR 40-381)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact.  
Effect on the State: Yes.

CONTAINS UNFUNDED MANDATE (§§ 1.3, 2)  
(NOT REQUESTED BY AFFECTED LOCAL GOVERNMENT)

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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 health care; authorizing the Director of the Department of Health and Human Services to contract with multiple health information exchanges to perform certain functions; requiring the Director to prescribe certain standards governing the maintenance and exchange of electronic health records; expanding immunity from certain liability for health care providers who use a health information exchange; requiring ~~certain health care records to be created, authenticated and stored on a computer system that meets certain requirements;~~ medical facilities and providers of health care to store, transmit and exchange health records electronically; making an appropriation; and providing other matters properly relating thereto.

Legislative Counsel’s Digest:

Existing law authorizes the Director of the Department of Health and Human Services to contract with not more than one health information exchange to be responsible for compiling statewide master indexes of patients, health care providers and payers. (NRS 439.587) Section 1 of this bill authorizes the Director to contract with multiple health information exchanges to perform those functions. Section 1 also removes a requirement that the Director encourage the use of health information exchanges and prohibits the Director from requiring any person to use a health information exchange.

Existing law provides that a health care provider who with reasonable care relies upon an apparently genuine electronic health record accessed from a health information exchange to make a decision concerning the provision of health care to a patient is immune from civil or criminal liability for the decision if: (1) the electronic health record is inaccurate; (2) the inaccuracy was not caused by the health care provider; (3) the inaccuracy resulted in an

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14 inappropriate health care decision; and (4) the health care decision was appropriate based  
 15 upon the information contained in the inaccurate electronic health record. (NRS 439.593)  
 16 **Section ~~H~~ 1.1** of this bill expands this immunity from liability to also apply to any health  
 17 care provider who ~~f~~ (1) submits an apparently genuine electronic health record to a health  
 18 information exchange; (2) accesses an apparently genuine electronic health record from a  
 19 health information exchange; or (3) utilizes or discloses an apparently genuine electronic  
 20 health record accessed from a health information exchange.  
 21 ~~Existing law authorizes the creation, authentication and storage of health care records on~~  
 22 ~~a computer system that is part of a health information exchange. (NRS 629.051) Beginning on~~  
 23 ~~January 1, 2028, sections 2 and 4 of this bill require, with certain exceptions, the creation,~~  
 24 ~~authentication and storage of health care records on a computer system that is part of a health~~  
 25 ~~information exchange and allows patients to access and forward their health care records~~  
 26 ~~electronically.) **transmits, accesses, utilizes, discloses, relies upon or provides to the**~~  
 27 ~~**patient any apparently genuine electronic health record in accordance with applicable**~~  
 28 ~~**law and regulations. Section 1.2 of this bill provides that transmitting, accessing,**~~  
 29 ~~**utilizing or disclosing an electronic health record is not an unfair trade practice.**~~  
 30 ~~Existing law: (1) provides for the regulation of medical facilities; and (2) establishes~~  
 31 ~~requirements governing the maintenance of the health records of providers of health~~  
 32 ~~care. (Chapter 449 of NRS; NRS 629.051-629.069) Beginning on January 1, 2028,~~  
 33 ~~sections 1.3 and 2 of this bill require such facilities and providers of health care to~~  
 34 ~~maintain, transmit and exchange health records electronically in a manner that: (1)~~  
 35 ~~allows patients to electronically access their health records directly from the facility or~~  
 36 ~~custodian of the records and forward such records electronically to other persons and~~  
 37 ~~entities; and (2) allows for the interoperability of health records with the electronic~~  
 38 ~~health records and systems of other facilities and providers of health care.~~  
 39 ~~Section 2.5 of this bill makes an appropriation to the Department to award grants to~~  
 40 ~~certain small facilities and providers of health care who work in small business settings~~  
 41 ~~to assist in compliance with the requirements of sections 1.3 and 2. Section 1 of this bill~~  
 42 ~~requires the Director to prescribe standards for the electronic maintenance and~~  
 43 ~~exchange of such records. Sections 1.4-1.9 of this bill make conforming changes to~~  
 44 ~~indicate the proper placement of and provide for the enforcement of section 1.3.~~

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

1 **Section 1. NRS 439.587 is hereby amended to read as follows:**  
 2 439.587 1. The Director is the state authority for health information  
 3 technology. The Director shall:  
 4 (a) Ensure that a health information exchange complies with the specifications  
 5 and protocols for exchanging electronic health records, health-related information  
 6 and related data prescribed pursuant to the provisions of the Health Information  
 7 Technology for Economic and Clinical Health Act of 2009, 42 U.S.C. §§ 300jj et  
 8 seq. and 17901 et seq., and other applicable federal and state law;  
 9 (b) ~~Encourage the use of a health information exchange by health care~~  
 10 ~~providers, payers and patients;~~  
 11 ~~(c)~~ **(c)** Prescribe by regulation standards for the electronic maintenance,  
 12 transmittal and exchange of electronic health records, prescriptions, health-related  
 13 information, electronic signatures and requirements for electronic equivalents of  
 14 written entries or written approvals in accordance with federal law;  
 15 ~~(d)~~ **(c)** Prescribe by regulation rules governing the ownership, management  
 16 and use of electronic health records, health-related information and related data  
 17 retained or shared by a health information exchange; and

1 ~~(c)~~ (d) Prescribe by regulation, in consultation with the State Board of  
2 Pharmacy, standards for the electronic transmission of prior authorizations for  
3 prescription medication using a health information exchange.

4 2. The Director may establish or contract with ~~[not more than] one~~ **or more**  
5 health information ~~[exchange to serve as the statewide health information~~  
6 ~~exchange]~~ **exchanges** to be responsible for compiling statewide master indexes of  
7 patients, health care providers and payers. The Director may by regulation prescribe  
8 the requirements for **such a [statewide]** health information exchange, including,  
9 without limitation, the procedure by which any patient, health care provider or  
10 payer master index created pursuant to any contract is transferred to the State upon  
11 termination of the contract.

12 3. The Director may enter into contracts, apply for and accept available gifts,  
13 grants and donations, and adopt such regulations as are necessary to carry out the  
14 provisions of NRS 439.581 to 439.595, inclusive.

15 **4. The regulations adopted pursuant to this section and NRS 439.589 must**  
16 **not require any person or entity, other than the Department, to use a health**  
17 **information exchange.**

18 ~~[Section 1.]~~ **Sec. 1.1.** NRS 439.593 is hereby amended to read as follows:

19 439.593 A health care provider who with reasonable care ~~submits an~~  
20 ~~apparently genuine electronic health record to a health information exchange,~~  
21 ~~accesses an apparently genuine electronic health record from a health~~  
22 ~~information exchange or]~~ **transmits, accesses, utilizes, discloses,** ~~for]~~  
23 **or provides to a patient** an apparently genuine electronic health record ~~accessed~~  
24 ~~from a health information exchange to make a decision concerning the provision of~~  
25 ~~health care to a patient], in accordance with NRS 439.581 to 439.595, inclusive,~~  
26 **and the regulations adopted pursuant thereto** is immune from civil or criminal  
27 liability for ~~the] any~~ **decision concerning the provision of health care to a patient**  
28 **and any civil or criminal liability resulting from the provision of an apparently**  
29 **genuine electronic health record to a patient** if:

- 30 1. The electronic health record is inaccurate;
- 31 2. The inaccuracy was not caused by the health care provider;
- 32 3. The inaccuracy resulted in an inappropriate health care decision; and
- 33 4. The health care decision was appropriate based upon the information  
34 contained in the inaccurate electronic health record.

35 **Sec. 1.2. NRS 439.595 is hereby amended to read as follows:**

36 439.595 Providing information to **transmitting, accessing, utilizing or**  
37 **disclosing** an electronic health record or participating in a health information  
38 exchange in accordance with NRS 439.581 to 439.595, inclusive, does not  
39 constitute an unfair trade practice pursuant to chapter 598A or 686A of NRS.

40 **Sec. 1.3. Chapter 449 of NRS is hereby amended by adding thereto a**  
41 **new section to read as follows:**

42 **Except as otherwise provided in NRS 439.538 and 439.591, a medical facility**  
43 **shall maintain, transmit and exchange health records electronically in**  
44 **accordance with paragraph (a) of subsection 1 of NRS 629.051.**

45 **Sec. 1.4. NRS 449.029 is hereby amended to read as follows:**

46 449.029 As used in NRS 449.029 to 449.240, inclusive, **and section 1.3 of**  
47 **this act,** unless the context otherwise requires, "medical facility" has the meaning  
48 ascribed to it in NRS 449.0151 and includes a program of hospice care described in  
49 NRS 449.196.

50 **Sec. 1.5. NRS 449.0301 is hereby amended to read as follows:**

51 449.0301 The provisions of NRS 449.029 to 449.2428, inclusive, **and section**  
52 **1.3 of this act** do not apply to:

1           1. Any facility conducted by and for the adherents of any church or religious  
2 denomination for the purpose of providing facilities for the care and treatment of  
3 the sick who depend solely upon spiritual means through prayer for healing in the  
4 practice of the religion of the church or denomination, except that such a facility  
5 shall comply with all regulations relative to sanitation and safety applicable to other  
6 facilities of a similar category.

7           2. Foster homes as defined in NRS 424.014.

8           3. Any medical facility, facility for the dependent or facility which is  
9 otherwise required by the regulations adopted by the Board pursuant to NRS  
10 449.0303 to be licensed that is operated and maintained by the United States  
11 Government or an agency thereof.

12           **Sec. 1.6. NRS 449.089 is hereby amended to read as follows:**

13           449.089 1. Each license issued pursuant to NRS 449.029 to 449.2428,  
14 inclusive, **and section 1.3 of this act** expires on December 31 following its issuance  
15 and is renewable for 1 year upon reapplication and payment of all fees required  
16 pursuant to subsection 4 and NRS 449.050, as applicable, unless the Division finds,  
17 after an investigation, that the facility has not:

18           (a) Satisfactorily complied with the provisions of NRS 449.029 to 449.2428,  
19 inclusive, **and section 1.3 of this act** or the standards and regulations adopted by  
20 the Board;

21           (b) Obtained the approval of the Director of the Department of Health and  
22 Human Services before undertaking a project, if such approval is required by NRS  
23 439A.100; or

24           (c) Conformed to all applicable local zoning regulations.

25           2. Each reapplication for an agency to provide personal care services in the  
26 home, an agency to provide nursing in the home, a community health worker pool,  
27 a facility for intermediate care, a facility for skilled nursing, a provider of  
28 community-based living arrangement services, a hospital described in 42 U.S.C. §  
29 1395ww(d)(1)(B)(iv), a psychiatric hospital that provides inpatient services to  
30 children, a psychiatric residential treatment facility, a residential facility for groups,  
31 a program of hospice care, a home for individual residential care, a facility for the  
32 care of adults during the day, a facility for hospice care, a nursing pool, the distinct  
33 part of a hospital which meets the requirements of a skilled nursing facility or  
34 nursing facility pursuant to 42 C.F.R. § 483.5, a hospital that provides swing-bed  
35 services as described in 42 C.F.R. § 482.58 or, if residential services are provided  
36 to children, a medical facility or facility for the treatment of alcohol or other  
37 substance use disorders must include, without limitation, a statement that the  
38 facility, hospital, agency, program, pool or home is in compliance with the  
39 provisions of NRS 449.115 to 449.125, inclusive, and 449.174.

40           3. Each reapplication for an agency to provide personal care services in the  
41 home, a community health worker pool, a facility for intermediate care, a facility  
42 for skilled nursing, a facility for the care of adults during the day, a residential  
43 facility for groups or a home for individual residential care must include, without  
44 limitation, a statement that the holder of the license to operate, and the  
45 administrator or other person in charge and employees of, the facility, agency, pool  
46 or home are in compliance with the provisions of NRS 449.093.

47           4. Each reapplication for a surgical center for ambulatory patients, facility for  
48 the treatment of irreversible renal disease, facility for hospice care, program of  
49 hospice care, hospital, facility for intermediate care, facility for skilled nursing,  
50 agency to provide personal care services in the home or rural clinic must be  
51 accompanied by the fee prescribed by the State Board of Health pursuant to NRS  
52 457.240, in addition to the fees imposed pursuant to NRS 449.050.

53           **Sec. 1.7. NRS 449.160 is hereby amended to read as follows:**

1 449.160 1. The Division may deny an application for a license or may  
2 suspend or revoke any license issued under the provisions of NRS 449.029 to  
3 449.2428, inclusive, and section 1.3 of this act upon any of the following grounds:

4 (a) Violation by the applicant or the licensee of any of the provisions of NRS  
5 439B.410 or 449.029 to 449.245, inclusive, and section 1.3 of this act or of any  
6 other law of this State or of the standards, rules and regulations adopted thereunder.

7 (b) Aiding, abetting or permitting the commission of any illegal act.

8 (c) Conduct inimical to the public health, morals, welfare and safety of the  
9 people of the State of Nevada in the maintenance and operation of the premises for  
10 which a license is issued.

11 (d) Conduct or practice detrimental to the health or safety of the occupants or  
12 employees of the facility.

13 (e) Failure of the applicant to obtain written approval from the Director of the  
14 Department of Health and Human Services as required by NRS 439A.100 or as  
15 provided in any regulation adopted pursuant to NRS 449.001 to 449.430, inclusive,  
16 and section 1.3 of this act and 449.435 to 449.531, inclusive, and chapter 449A of  
17 NRS if such approval is required.

18 (f) Failure to comply with the provisions of NRS 441A.315 and any  
19 regulations adopted pursuant thereto or NRS 449.2486.

20 (g) Violation of the provisions of NRS 458.112.

21 2. In addition to the provisions of subsection 1, the Division may revoke a  
22 license to operate a facility for the dependent if, with respect to that facility, the  
23 licensee that operates the facility, or an agent or employee of the licensee:

24 (a) Is convicted of violating any of the provisions of NRS 202.470;

25 (b) Is ordered to but fails to abate a nuisance pursuant to NRS 244.360,  
26 244.3603 or 268.4124; or

27 (c) Is ordered by the appropriate governmental agency to correct a violation of  
28 a building, safety or health code or regulation but fails to correct the violation.

29 3. The Division shall maintain a log of any complaints that it receives relating  
30 to activities for which the Division may revoke the license to operate a facility for  
31 the dependent pursuant to subsection 2. The Division shall provide to a facility for  
32 the care of adults during the day:

33 (a) A summary of a complaint against the facility if the investigation of the  
34 complaint by the Division either substantiates the complaint or is inconclusive;

35 (b) A report of any investigation conducted with respect to the complaint; and

36 (c) A report of any disciplinary action taken against the facility.

37 ↪ The facility shall make the information available to the public pursuant to NRS  
38 449.2486.

39 4. On or before February 1 of each odd-numbered year, the Division shall  
40 submit to the Director of the Legislative Counsel Bureau a written report setting  
41 forth, for the previous biennium:

42 (a) Any complaints included in the log maintained by the Division pursuant to  
43 subsection 3; and

44 (b) Any disciplinary actions taken by the Division pursuant to subsection 2.

45 **Sec. 1.75. NRS 449.163 is hereby amended to read as follows:**

46 449.163 1. In addition to the payment of the amount required by NRS  
47 449.0308, if a medical facility, facility for the dependent or facility which is  
48 required by the regulations adopted by the Board pursuant to NRS 449.0303 to be  
49 licensed violates any provision related to its licensure, including any provision of  
50 NRS 439B.410 or 449.029 to 449.2428, inclusive, and section 1.3 of this act or any  
51 condition, standard or regulation adopted by the Board, the Division, in accordance  
52 with the regulations adopted pursuant to NRS 449.165, may:

1 (a) Prohibit the facility from admitting any patient until it determines that the  
2 facility has corrected the violation;

3 (b) Limit the occupancy of the facility to the number of beds occupied when  
4 the violation occurred, until it determines that the facility has corrected the  
5 violation;

6 (c) If the license of the facility limits the occupancy of the facility and the  
7 facility has exceeded the approved occupancy, require the facility, at its own  
8 expense, to move patients to another facility that is licensed;

9 (d) Impose an administrative penalty of not more than \$5,000 per day for each  
10 violation, together with interest thereon at a rate not to exceed 10 percent per  
11 annum; and

12 (e) Appoint temporary management to oversee the operation of the facility and  
13 to ensure the health and safety of the patients of the facility, until:

14 (1) It determines that the facility has corrected the violation and has  
15 management which is capable of ensuring continued compliance with the  
16 applicable statutes, conditions, standards and regulations; or

17 (2) Improvements are made to correct the violation.

18 2. If the facility fails to pay any administrative penalty imposed pursuant to  
19 paragraph (d) of subsection 1, the Division may:

20 (a) Suspend the license of the facility until the administrative penalty is paid;  
21 and

22 (b) Collect court costs, reasonable attorney's fees and other costs incurred to  
23 collect the administrative penalty.

24 3. The Division may require any facility that violates any provision of NRS  
25 439B.410 or 449.029 to 449.2428, inclusive, and section 1.3 of this act or any  
26 condition, standard or regulation adopted by the Board to make any improvements  
27 necessary to correct the violation.

28 4. Any money collected as administrative penalties pursuant to paragraph (d)  
29 of subsection 1 must be accounted for separately and used to administer and carry  
30 out the provisions of NRS 449.001 to 449.430, inclusive, and section 1.3 of this  
31 act, 449.435 to 449.531, inclusive, and chapter 449A of NRS to protect the health,  
32 safety, well-being and property of the patients and residents of facilities in  
33 accordance with applicable state and federal standards or for any other purpose  
34 authorized by the Legislature.

35 **Sec. 1.8. NRS 449.220 is hereby amended to read as follows:**

36 449.220 1. The Division may bring an action in the name of the State to  
37 enjoin any person, state or local government unit or agency thereof from operating  
38 or maintaining any facility within the meaning of NRS 449.029 to 449.2428,  
39 inclusive §, and section 1.3 of this act;

40 (a) Without first obtaining a license therefor; or

41 (b) After his or her license has been revoked or suspended by the Division.

42 2. It is sufficient in such action to allege that the defendant did, on a certain  
43 date and in a certain place, operate and maintain such a facility without a license.

44 **Sec. 1.9. NRS 449.240 is hereby amended to read as follows:**

45 449.240 The district attorney of the county in which the facility is located  
46 shall, upon application by the Division, institute and conduct the prosecution of any  
47 action for violation of any provisions of NRS 449.029 to 449.245, inclusive §,  
48 and section 1.3 of this act.

49 **Sec. 2. NRS 629.051 is hereby amended to read as follows:**

50 629.051 1. Except as otherwise provided in this section and in regulations  
51 adopted by the State Board of Health pursuant to NRS 652.135 with regard to the  
52 records of a medical laboratory and unless a longer period is provided by federal  
53 law, each custodian of health care records shall retain the health care records of



1 patients as part of the regularly maintained records of the custodian for 5 years after  
2 their receipt or production. Health care records may be retained in written form, or  
3 by microfilm or any other recognized form of size reduction, including, without  
4 limitation, microfiche, computer disc, magnetic tape and optical disc, which does  
5 not adversely affect their use for the purposes of NRS 629.061. ~~Health~~ *Except as*  
6 *otherwise provided in NRS 439.538 and 439.591, health* care records ~~may must~~ :

7 *(a) Must be maintained, transmitted and exchanged electronically in a*  
8 *manner that:*

9 *(1) Allows patients to electronically access their health records directly*  
10 *from the custodian of health care records and forward such records*  
11 *electronically to other persons and entities;*

12 *(2) Allows for the interoperability of health records with the electronic*  
13 *health records and systems of health care facilities and other providers of health*  
14 *care; and*

15 *(3) Complies with the applicable provisions of NRS 439.581 to 439.595,*  
16 *inclusive, and any regulations adopted pursuant thereto.*

17 *(b) May* be created, authenticated and stored in a ~~computer system~~ health  
18 information exchange which ~~meets~~ is

19 ~~(a) Meets~~ the requirements of NRS 439.581 to 439.595, inclusive, and the  
20 regulations adopted pursuant thereto ~~is and~~

21 ~~(b) Allows patients to access their health care records electronically and~~  
22 ~~forward their health care records electronically to other persons.~~

23 2. A provider of health care shall post, in a conspicuous place in each location  
24 at which the provider of health care performs health care services, a sign which  
25 discloses to patients that their health care records may be destroyed after the period  
26 set forth in subsection 1.

27 3. When a provider of health care performs health care services for a patient  
28 for the first time, the provider of health care shall deliver to the patient a written  
29 statement which discloses to the patient that the health care records of the patient  
30 may be destroyed after the period set forth in subsection 1.

31 4. If a provider of health care fails to deliver the written statement to the  
32 patient pursuant to subsection 3, the provider of health care shall deliver to the  
33 patient the written statement described in subsection 3 when the provider of health  
34 care next performs health care services for the patient.

35 5. In addition to delivering a written statement pursuant to subsection 3 or 4, a  
36 provider of health care may deliver such a written statement to a patient at any  
37 other time.

38 6. A written statement delivered to a patient pursuant to this section may be  
39 included with other written information delivered to the patient by a provider of  
40 health care.

41 7. A custodian of health care records shall not destroy the health care records  
42 of a person who is less than 23 years of age on the date of the proposed destruction  
43 of the records. The health care records of a person who has attained the age of 23  
44 years may be destroyed in accordance with this section for those records which  
45 have been retained for at least 5 years or for any longer period provided by federal  
46 law.

47 8. The provisions of this section *, except for the provisions of paragraph (a)*  
48 *of subsection 1,* do not apply to a pharmacist.

49 9. The State Board of Health shall adopt:

50 (a) Regulations prescribing the form, size, contents and placement of the signs  
51 and written statements required pursuant to this section; and

52 (b) Any other regulations necessary to carry out the provisions of this section.

1        **Sec. 2.5. 1. There is hereby appropriated from the State General Fund**  
2 **to the Department of Health and Human Services the sum of \$3,000,000 for**  
3 **the purpose of awarding grants to providers of health care and medical**  
4 **facilities for the purposes of complying with the requirements of section 1.3 of**  
5 **this act and paragraph (a) of subsection 1 of NRS 629.051, as amended by**  
6 **section 2 of this act. To receive such a grant, a provider of health care or**  
7 **medical facility must have a staff of less than 50 persons or work for an entity**  
8 **that has a staff of less than 50 persons, as applicable.**

9        **2. Any remaining balance of the appropriation made by subsection 1**  
10 **must not be committed for expenditure after June 30, 2025, by the entity to**  
11 **which the appropriation is made or any entity to which money from the**  
12 **appropriation is granted or otherwise transferred in any manner, and any**  
13 **portion of the appropriated money remaining must not be spent for any**  
14 **purpose after September 19, 2025, by either the entity to which the money was**  
15 **appropriated or the entity to which the money was subsequently granted or**  
16 **transferred, and must be reverted to the State General Fund on or before**  
17 **September 19, 2025.**

18        **3. As used in this section:**

19        **(a) "Medical facility" has the meaning ascribed to it in NRS 449.0151.**

20        **(b) "Provider of health care" has the meaning ascribed to it in NRS**  
21 **629.031.**

22        **Sec. 3.** The provisions of NRS 354.599 do not apply to any additional  
23 expenses of a local government that are related to the provisions of this act.

24        **Sec. 4. 1. This section and sections 1** ~~and 3 of this act become effective~~  
25 ~~upon passage and approval.~~

26        ~~2. Section 2], 1.1, 1.2 and 2.5 of this act become effective on July 1, 2023.~~

27        **2. Sections 1.3 to 2, inclusive, and 3** of this act ~~becomes~~ **become** effective  
28 on January 1, 2028.