CHAPTER.....

AN ACT relating to health care; transferring the Patient Protection Commission from the Office of the Governor to the Office of the Director of the Department of Health and Human Services; revising the membership and duties of the Commission; requiring the Commission to coordinate and administer certain assistance; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law creates the Patient Protection Commission in the Office of the Governor, which is made up of certain stakeholders in the delivery of health care. (NRS 439.908, 439.914) Existing law requires the Commission to systematically review issues related to the health care needs of residents of this State and the quality, accessibility and affordability of health care. (NRS 439.916) Section 2 of this bill transfers the Commission from the Office of the Governor to the Office of the Director of the Department of Health and Human Services and revises the membership of the Commission. Section 2 also requires the members of the Commission to comply with certain requirements regarding disclosure of conflicts of this bill requires the Commission to adopt bylaws that govern the operation of the Commission. Section 3 of this bill requires the Commission to: (1) establish a plan to increase access by patients to their medical records and provide for the interoperability of medical records between providers of health care; and (2) make certain requirementations to the Director and the Legislature concerning the use and availability of data relating to health care.

On March 9, 2021, the Milbank Memorial Fund announced that this State has been selected to participate in the Peterson-Milbank Program for Sustainable Health Care Costs. The Program: (1) provides technical assistance to participating states in developing targets for the reduction of per-capita spending on healthcare; and (2) helps participating states analyze and collaboratively address the underlying drivers of growth in the cost of health care. **Section 24** of this bill designates the Patient Protection Commission as the sole state agency responsible for administering and coordinating matters relating to the participation of this State in the Program.

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

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

Section 1. (Deleted by amendment.)

Sec. 2. NRS 439.908 is hereby amended to read as follows: 439.908 1. The Patient Protection Commission is hereby created [...] within the Office of the Director. The Commission consists of:



81st Session (2021)

(a) The following [11] 12 voting members appointed by the Governor:

(1) Two *members who are* persons [who have] with expertise and experience in advocating on behalf of patients.

(2) [Two representatives of providers] One member who is a provider of health care [.] who operates a for-profit business to provide health care.

(3) [Two representatives of hospitals.

(4) Two representatives of health insurers.

(5) One person who engages in the academic study of health care policy or public health.

(6) One representative of the prescription drug industry.]

One member who is a registered nurse who practices primarily at a nonprofit hospital.

(4) One member who is a physician or registered nurse who practices primarily at a federally-qualified health center, as defined in 42 U.S.C. § 1396d(l)(2)(B).

(5) One member who is a pharmacist at a pharmacy not affiliated with any chain of pharmacies or a person who has expertise and experience in advocating on behalf of patients.

(6) One member who represents a nonprofit public hospital that is located in the county of this State that spends the largest amount of money on hospital care for indigent persons pursuant to chapter 428 of NRS.

(7) One member who represents the private nonprofit health insurer with the highest percentage of insureds in this State who are adversely impacted by social determinants of health.

(8) One member who has expertise and experience in advocating for persons who are not covered by a policy of health insurance.

(9) One member who has expertise and experience in advocating for persons with special health care needs and has education and experience in health care.

(10) One member who is an employee or a consultant of the Department with expertise in health information technology and patient access to medical records.

(11) One *member who is a* representative of the general public.

(b) The Director of the Department, the Commissioner of Insurance, [and] the Executive Director of the Silver State Health Insurance Exchange and the Executive Officer of the Public Employees' Benefits Program or his or her designee as ex officio, nonvoting members.



2. The Governor shall:

(a) Appoint two of the voting members of the Commission described in paragraph (a) of subsection 1 from a list of persons nominated by the Majority Leader of the Senate;

(b) Appoint two of the voting members of the Commission described in paragraph (a) of subsection 1 from a list of persons nominated by the Speaker of the Assembly; and

(c) Ensure that the members appointed by the Governor to the Commission reflect the geographic diversity of this State.

3. Members of the Commission serve [without] :

(a) At the pleasure of the Governor; and

(b) Without compensation or per diem but are entitled to receive reimbursement for travel expenses in the same amount provided for state officers and employees generally.

4. After the initial terms, the term of each voting member is 2 years, except that the Governor may remove a voting member at any time and for any reason. A member may be reappointed.

5. If a vacancy occurs during the term of a voting member, the Governor shall appoint a person similarly qualified to replace that member for the remainder of the unexpired term.

6. The Governor shall annually designate a voting member to serve as the Chair of the Commission.

7. A majority of the voting members of the Commission constitutes a quorum for the transaction of business, and a majority of the members of a quorum present at any meeting is sufficient for any official action taken by the Commission.

8. The members of the Commission shall comply with the requirements of NRS 281A.420 applicable to public officers generally.

Sec. 2.5. NRS 439.912 is hereby amended to read as follows:

439.912 1. The Commission shall : [meet]

(a) *Meet* at the call of the Chair.

(b) Adopt bylaws that govern the operation of the Commission.

2. The Commission may:

(a) Establish subcommittees *and working groups* consisting of members of the Commission or other persons to assist the Commission in the performance of its duties. Each subcommittee expires 6 months after it is created but may be continued with approval of the Commission. Not more than six subcommittees may exist at any time.

(b) To the extent that money is available for this purpose, enter into contracts with consultants to assist the Commission in the performance of its duties.



3. Within the limits of available resources, state agencies, boards and commissions shall, upon the request of the Executive Director of the Commission, provide advice and technical assistance to the Commission.

Sec. 3. NRS 439.918 is hereby amended to read as follows:

439.918 1. In addition to conducting the review described in NRS 439.916, the Commission shall : [attempt to:]

(a) **[Identify]** *Attempt to identify* and facilitate collaboration between existing state governmental entities that study or address issues relating to the quality, accessibility and affordability of health care in this State, including, without limitation, the regional behavioral health policy boards created by NRS 433.429; **[and]**

(b) [Coordinate] Attempt to coordinate with such entities to reduce any duplication of efforts among and between those entities and the Commission; [:]

(c) Establish, submit to the Director and annually update a plan to increase access by patients to their medical records and provide for the interoperability of medical records between providers of health care in accordance with the requirements of the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, and any other applicable federal law or regulations; and

(d) Make recommendations to the Director and the Legislature concerning:

(1) The analysis and use of data to improve access to and the quality of health care in this State, including, without limitation, using data to establish priorities for addressing health care needs; and

(2) Ensuring that data concerning health care in this State is publicly available and transparent.

2. On or before January 1 and July 1 of each year, the Commission shall:

(a) Compile a report describing the meetings of the Commission and the activities of the Commission during the immediately preceding 6 months. The report must include, without limitation, a description of any issues identified as negatively impacting the quality, accessibility or affordability of health care in this State and any recommendations for legislation, regulations or other changes to policy or budgets to address those issues.

(b) Submit the report to the Governor and the Director of the Legislative Counsel Bureau for transmittal to:

(1) In January of odd-numbered years, the next regular session of the Legislature.



(2) In all other cases, to the Legislative Committee on Health Care.

3. Upon receiving a report pursuant to subsection 2, the Governor shall post the report on an Internet website maintained by the Governor.

4. The Commission may prepare and publish additional reports on specific topics at the direction of the Chair.

Secs. 4-21. (Deleted by amendment.)

Sec. 22. As used in sections 22, 23 and 24 of this act, "Patient Protection Commission" means the Patient Protection Commission created by NRS 439.908.

Sec. 23. 1. The terms of the members of the Patient Protection Commission appointed pursuant to NRS 439.908 who are incumbent on June 30, 2021, expire on that date.

2. On or before July 1, 2021, the Governor shall:

(a) Appoint to the Patient Protection Commission to serve initial terms that expire on July 1, 2022:

(1) One member described in subparagraph (1) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

(2) The member described in subparagraph (2) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

(3) The member described in subparagraph (3) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

(4) The member described in subparagraph (4) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

(5) The member described in subparagraph (5) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

(6) The member described in subparagraph (6) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

(b) Appoint to the Patient Protection Commission to serve initial terms that expire on July 1, 2023:

(1) One member described in subparagraph (1) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

(2) The member described in subparagraph (7) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.



(3) The member described in subparagraph (8) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

-6-

(4) The member described in subparagraph (9) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

(5) The member described in subparagraph (10) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

(6) The member described in subparagraph (11) of paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

3. The Governor may reappoint a member of the Patient Protection Commission whose term expires on June 30, 2021, if that member meets any of the qualifications for membership prescribed by paragraph (a) of subsection 1 of NRS 439.908, as amended by section 2 of this act.

Sec. 24. To the extent authorized by the terms of the Program, the Patient Protection Commission is hereby designated as the sole state agency responsible for administering and coordinating matters relating to the participation of this State in the Peterson-Milbank Program for Sustainable Health Care Costs. The Commission shall:

1. Collaborate with the Milbank Memorial Fund, the Peterson Center on Healthcare, Bailit Health and any other persons and entities as necessary to administer and coordinate matters relating to the participation of this State in the Program; and

2. To the extent authorized by the terms of the Program, make decisions concerning the allocation of financial and technical assistance provided by the Program.

Secs. 25 and 26. (Deleted by amendment.)

Sec. 27. The provisions of subsection 1 of NRS 218D.380 do not apply to any provision of this act which adds or revises a requirement to submit a report to the Legislature.

Sec. 28. (Deleted by amendment.)

Sec. 29. 1. This section and section 24 of this act becomes effective upon passage and approval.

2. Sections 1 to 23, inclusive, and 25 to 28, inclusive, of this act become effective:

(a) Upon passage and approval for the purpose of performing any preparatory administrative tasks that are necessary to carry out the provisions of this act; and

(b) On July 1, 2021, for all other purposes.