SENATE BILL NO. 96-COMMITTEE ON HEALTH AND HUMAN SERVICES

(ON BEHALF OF THE SUBCOMMITTEE TO CONDUCT A STUDY OF POSTACUTE CARE)

Prefiled January 30, 2017

Referred to Committee on Health and Human Services

SUMMARY—Requires a comparative analysis of the rates of reimbursement paid by Medicaid for certain services. (BDR S-369)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Yes.

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

AN ACT relating to Medicaid; requiring the Division of Health Care Financing and Policy of the Department of Health and Human Services to conduct a comparative analysis of Medicaid reimbursement rates for certain services; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Federal law establishes the Medicaid program to provide assistance for part or all of the cost of medical and certain related care rendered on behalf of indigent persons. Providers of health care and certain related services to recipients of Medicaid are authorized to receive reimbursements from the Federal and State Government for part or all of the cost of that care or those services. (42 U.S.C. §§ 1396 et seq.) This bill requires the Division of Health Care Financing and Policy of the Department of Health and Human Services to conduct a comparative analysis of the Medicaid reimbursement rates for personal care services, home-based services and community-based services provided by certain different types of providers.

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

Section 1. 1. The Division of Health Care Financing and Policy of the Department of Health and Human Services shall conduct a comparative analysis of the rates of reimbursement paid





under the State Plan for Medicaid for personal care services, homebased services and community-based services. The analysis must identify any disparities in the rates of reimbursement for equivalent services provided by:

(a) Residential facilities for groups;

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- (b) Providers of supported living arrangement services;
- (c) Providers of community-based services for persons with physical disabilities;
- (d) Providers of community-based services for frail elderly persons; and
- (e) Providers of community-based services for persons with intellectual disabilities and persons with related conditions.
- 2. On or before March 1, 2018, the Division shall submit a report of its findings to the Director of the Legislative Counsel Bureau for transmittal to the Legislative Committee on Health Care and the Interim Finance Committee.
 - 3. As used in this section:
- (a) "Frail elderly person" has the meaning ascribed to it in NRS 427A.029.
- (b) "Intellectual disability" has the meaning ascribed to it in NRS 433.099.
- (c) "Person with a physical disability" has the meaning ascribed to it in 427A.791.
 - (d) "Personal care services" means:
- (1) Any medical services authorized pursuant to NRS 629.091; and
- (2) Nonmedical services related to personal care provided to elderly persons or persons with disabilities to assist those persons with activities of daily living, including, without limitation:
 - (I) The elimination of wastes from the body;
 - (II) Dressing and undressing;
 - (III) Bathing;
 - (IV) Grooming;
 - (V) The preparation and eating of meals;
 - (VI) Laundry;
 - (VII) Shopping;
 - (VIII) Cleaning;
 - (IX) Transportation; and
- (X) Any other minor needs related to the maintenance of personal hygiene.
- (e) "Persons with related conditions" has the meaning ascribed to it in NRS 433.211.
- (f) "Residential facility for groups" has the meaning ascribed to it in NRS 449.017.





- 1 (g) "Supported living arrangement services" has the meaning 2 ascribed to it in NRS 435.3315.
- 3 **Sec. 2.** This act becomes effective on July 1, 2017.





