

MINUTES OF THE
MEETING OF THE SENATE COMMITTEE
ON HUMAN RESOURCES AND FACILITIES

SIXTY-FIRST SESSION
NEVADA STATE LEGISLATURE
March 30, 1981

The Senate Committee on Human Resources and Facilities was called to order by Chairman Joe Neal at 9:00 a.m., Monday, March 30, 1981, in Room 323 of the Legislative Building, Carson City, Nevada. Exhibit A is the Meeting Agenda. Exhibit B is the Attendance Roster.

COMMITTEE MEMBERS PRESENT:

Senator Joe Neal, Chairman
Senator James N. Kosinski, Vice Chairman
Senator Richard E. Blakemore
Senator Wilbur Faiss
Senator Virgil Getto

COMMITTEE MEMBERS ABSENT:

Senator James H. Bilbray (Excused)

STAFF MEMBER PRESENT:

Joy-el McBride, Secretary

SENATE BILL NO. 412

Ms. Myrl Nygren from the office of Health Planning and Resources told the committee her office had amendments to Senate Bill No. 412. (Exhibit C)

Senator Blakemore move to "Amend" and re-refer to committee.

Senator Getto seconded the motion.

The motion was carried. (Senator Bilbray was not present for the vote.)

Being no further business, the meeting was adjourned at 9:04 a.m.

Respectfully submitted:

APPROVED BY:


Senator Joe Neal, Chairman


Joy-el McBride, Secretary

DATE: 4-7-81

SENATE AGENDA

EXHIBIT A

COMMITTEE MEETINGS

Committee on Human Resources and Facilities, Room 323
Day Monday, Date March 30, Time 9:00 a.m.

S. B. No. 412--Makes various changes to provisions on planning for health care.

Proposed Amendments to S.B. 412

EXHIBIT C

Amend Section 5, page 1, line 10 by deleting the period after "services"
[.] and adding:

; or ancillary personnel employed under the supervision of a physician.

Amend Section 9, page 2, line 10 by inserting after the word "or":

other clinically

Amend Section 9, page 2 line 11 by deleting the period after "health"

[.] and adding:

, and radiological diagnostic health services which are provided by
fixed or mobile computed tomographic (CT) scanning equipment. A CT head
scanner and a CT body scanner are considered to provide separate
services; A CT fixed scanner and a CT mobile scanner are considered
to provide separate services.

Add a new Section 11 following Section 10:

"Section 11. "Major medical equipment" means equipment which is used for
the provision of medical and other health services and which costs in
excess of \$150,000 minimum, except that such term does not include
medical equipment acquired by or on behalf of a clinical laboratory to
provide clinical laboratory services if the clinical laboratory is
independent of a physician's office and a hospital

Amend Section 12; page 2 line 19 by inserting after the word "policies":
or contracts

Amend Section 13, page 2 lines 36 through 41 by deleting the section.

Amend Section 19, page 4, line 43 by inserting after the word "of":

"this Act and"

Amend Section 19, page 5 lines 19 through 22 by removing the brackets.

Amend Section 20, page 5, line 26 by placing a period after the word

"director" and deleting:

[or his office of health planning and resources]

Amend Section 20, page 5, lines 32 and 33 by deleting:

[or his office of health planning and resources]

Amend Section 20, page 5, line 46 by deleting:

[change in] and inserting:

capital expenditure which changes

Amend Section 20, page 6, line 22 by:

deleting [if the service] and adding after the word "facility":

or health maintenance organization, if:

Amend Section 20, page 6 by deleting lines 23 through 30 and inserting a new subsection as follows:

(1) the proposed addition involves a capital expenditure for the addition of a service which was not offered in or through the facility or organization over the previous 12 months; or

952

Amend Section 20, page 6, line 31 by inserting after the word "an":
annual

Amend Section 20, page 6, line 31 by deleting [\$150,000], and inserting:
75,000

Amend Section 20, page 6, lines 32 and 33 by placing a period after
"regulation" and deleting:

[, which under generally accepted accounting principles applied is a
capital expenditure.]

Amend Section 20, page 6, line 36 by adding a new subsection after
subsection (c) as follows:

(d) The proposed capital expenditure, by or on behalf of a health
facility or health maintenance organization, for the termination of a
health service which was offered in or through the facility or organiza-
tion.

Amend Section 20, page 6, line 46 by inserting after the word "equipment":
or the department finds within 30 days after the date that it receives
such notice that the equipment will be used to provide services for
inpatients of hospitals on more than an occasional and irregular basis;

Amend 20, page 7, line 8 by deleting the colon after the word "regulation"
[:], deleting lines 9 through 12 and inserting:
require additional approval for a proposed change to a project which
has previously been approved if the proposed change would result in an

increase or decrease in beds, or categories of beds, as set forth under subsection 2 (b) of this section, a change in the health services which are to be offered or provided, a change in location of the project or a major cost overrun of the project.

3/27/81

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PROPOSED AMENDMENTS

CURRENT NRS 439A

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| <p>I. Definitions added:</p> <p>Section 4 Director DHR
Section 5 Direct Provider
Section 7 Health Facility
Section 8 Health Maintenance Org.
Section 9 Health Services
Section 11 OHPR
Section 12 Provider of Health Services</p> <p>II. Ex parte Communication</p> <p>Section 13 Prohibits ex parte communication between DHR and applicant
(Recommend deletion)</p> <p>III. Council Membership</p> <p>Section 14 Prohibits a member from voting where conflicts of interest occur</p> <p>IV. Adds requirements to SHCC Membership</p> <p>Section 15 (3)(b) Adds requirement that membership for the Council must include a representative(s) from medically underserved areas.</p> <p>Section 16, (4) revises membership to require at least 1/2 of the providers must be direct providers</p> <p>Section 16, (5) requires V.A. representative on SHCC to be a non-voting member</p> <p>Section 17 requires two nominees to be submitted to the Governor when a vacancy occurs</p> <p>V. Council Duties</p> <p>Section 18 Revises duties</p> <p>1. Prepare and review the SHP triennially and revise as necessary</p> | <p>I. Definitions (439A.010)</p> <p>Council
Department
Federal Act
Health Services</p> <p>II.</p> <p>No restriction on ex parte communication between DHR & applicant</p> <p>III. 439A.030</p> <p>Does not address conflict of interest</p> <p>IV. SHCC Membership 439A.030</p> <p>(1) Does not address medically underserved areas</p> <p>(1)(b) Not less than 1/3 of the providers on the Council must be direct providers</p> <p>(1)(b) requires that a designated V.A. representative be an ex-officio member of the Council</p> <p>V. Council Duties NRS 439A.060</p> <p>1. Prepare and review at least annually the SHP and make necessary revisions</p> |
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PROPOSED AMENDMENTS

CURRENT NRS 439A

2. Establish a uniform format for HSPs and review and coordinate biennially the HSPs and review annually

2. Annually review HSPs and AIPs

3. Review applications the HSA budgets and annual plans

3. Same

4. Review and make recommendations on applications for Federal funds

4. Same

VI. Department Duties

VI. Department Duties 439A.081

Section 19 adds that:

1. The Department shall carry out purposes of NRS 439A

1. Department shall carry out purposes of the Federal Act

2. Department may by regulation, fix and collect fees based on the departments costs of conducting CON reviews.

2. Not addressed

VII. Issuances of Licenses and Letters of Approval

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Section 20 (2) adds certain types of projects offered by a health facility or HMO to be reviewed:

NRS 439A.100

2(b) a proposed change in categories of beds (medical, surgical, obstetrical or psychiatric)

Not addressed

2(c) Addition of a new health service not previously offered in a 12 month period with a proposed annual operating cost of \$75,000

Not addressed

2(d) a capital expenditure for termination of a service

Not addressed

2(e) Acquisition of major medical equipment in excess of \$150,000 located in a health facility or by an owner not located in a facility if no notice of intent was given

Not addressed

PROPOSED AMENDMENTS

CURRENT NRS 439A

2(f) The acquisition of an existing health facility if no notice of intent is given

Not Addressed

Section 20 (4) Authorizes that the department may, by regulation, require additional approval for specific changes to a previously approved project for changes in bed number or categories, location, services to be offered, or a major cost overrun in the project

NRS 439A.100
Not addressed

Section 21 Deletes requirement that child care facilities undergo the CON process

Section 22 Exempts the department from the requirement of NRS 353.335