ASSEMBLY BILL NO. 249—COMMITTEE ON GOVERNMENT AFFAIRS

(ON BEHALF OF THE PUBLIC EMPLOYEES' BENEFITS PROGRAM)

MARCH 6, 2003

Referred to Concurrent Committees on Government Affairs and Ways and Means

SUMMARY—Makes various changes concerning Public Employees' Benefits Program. (BDR 23-549)

FISCAL NOTE: Effect on Local Government: No. Effect on the State: No.

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

AN ACT relating to the Public Employees' Benefits Program; requiring certain agencies to use the amounts specified by the Public Employees' Benefits Program for coverage by the Program for payroll deductions from the salaries of participating officers and employees; requiring the Public Employees' Retirement System and each public employer that participates in the Program to provide information to the Program concerning the change in status of an active or retired officer or employee; eliminating the requirement that certain retired persons show evidence of good health as a condition of enrollment in the Program; limiting the subsidy paid by the State of Nevada for retired state officers and employees to years of state service; repealing the prospective expiration of two positions on the Board of the Program; repealing the period of open enrollment for certain retired persons to join the Program; and providing other matters properly relating thereto.

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



- **Section 1.** NRS 281.129 is hereby amended to read as follows: 281.129 *1.* Any officer of the State, except the Legislative Fiscal Officer, who disburses money in payment of salaries and wages of officers and employees of the State [may,]:
- (a) May, upon written requests of the officer or employee specifying amounts, withhold those amounts and pay them to:
 - [1.] (1) Charitable organizations;

- [2.] (2) Employee credit unions;
- [3. Insurers, if the Board of the Public Employees' Benefits Program has approved the request;
- 4.] (3) Except as otherwise provided in paragraph (b), insurers;
- (4) The United States for the purchase of savings bonds and similar obligations of the United States; and
 - [5.] (5) Employee organizations and labor organizations.
- (b) Shall, upon receipt of information from the Public Employees' Benefits Program specifying amounts of premiums or contributions for coverage by the Program, withhold those amounts from the salaries or wages of officers and employees who participate in the Program and pay those amounts to the Program.
- **2.** The State Controller may adopt regulations necessary to withhold money from the salaries or wages of officers and employees of the executive department.
- **Sec. 2.** Chapter 286 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. The System shall provide to the Public Employees' Benefits Program:
- (a) Written notice regarding a change in the status of a member or a dependent of a member that affects the eligibility of the member or dependent to participate in the Program. Such notice must be provided to the Program, on a form prescribed by the Program, within 15 calendar days after the System is notified or otherwise becomes aware of the change in status.
- (b) Upon request, any other information necessary for the Program to carry out the provisions of NRS 287.0402 to 287.049, inclusive.
- 2. The System shall reimburse the Public Employees' Benefits Program for any premium or contribution that was not paid to the Program as a result of the failure of the System to provide the notice required pursuant to subsection 1. The System shall not require any member or dependent of a member to reimburse the System for the amount of any premium or contribution for which the System is liable to the Program pursuant to this subsection.



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Sec. 3. NRS 286.615 is hereby amended to read as follows: 1. In addition to the options provided in NRS 287.023 and subject to the requirements of that section, any officer or employee of the governing body of any county, school district, municipal corporation, political subdivision, public corporation or other [public] local governmental agency of the State of Nevada, who retires under the conditions set forth in NRS 1A.350, 1A.480, 286.510 or 286.620 and, at the time of his retirement, was covered or had his dependents covered by any group insurance or medical and hospital service established pursuant to NRS 287.010 fand $\frac{287.020,1}{2}$, 287.020 or paragraph (b), (c) or (d) of subsection 1 of NRS 287.025, has the option of having the Executive Officer deduct and pay his premium or contribution for that group insurance or medical and hospital service coverage, as well as the amount due or to become due upon any obligation designated by the Board pursuant to subsection 2, from his monthly retirement allowance until:

- (a) He notifies the Executive Officer to discontinue the deduction; or
- (b) Any of his dependents elect to assume the premium or contribution applicable to the dependent's coverage before the death of such a retired person and continue coverage pursuant to NRS 287.023 after his death.
- 2. The Board may adopt regulations to carry out the provisions of subsection 1, including, but not limited to, regulations governing the number and types of obligations, amounts for the payment of which may be deducted and paid by the Board at the option of the officer or employee pursuant to this section.
- 3. The Executive Officer, Board and System are not liable for any damages resulting from errors or omissions concerning the deductions and payment of premiums or contributions authorized pursuant to this section unless willful neglect or gross negligence is proven.
- **Sec. 4.** Chapter 287 of NRS is hereby amended by adding thereto the provisions set forth as sections 5, 6 and 7 of this act.
- Sec. 5. "Participating local governmental agency" means a county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency that has an agreement in effect with the Program pursuant to paragraph (a) of subsection 1 of NRS 287.025 to obtain group insurance from the Program.
- Sec. 6. "Participating public agency" means any participating local governmental agency and participating state agency.



Sec. 7. "Participating state agency" means a department, commission, board, bureau or other agency of the Executive, Legislative and Judicial Branches of State Government, including, without limitation, the Public Employees' Retirement System and the University and Community College System of Nevada.

Sec. 8. NRS 287.010 is hereby amended to read as follows: 287.010 1. The governing body of any county, school district, municipal corporation, political subdivision, public corporation or other **[public]** *local governmental* agency of the State

of Nevada may:

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- (a) Adopt and carry into effect a system of group life, accident or health insurance, or any combination thereof, for the benefit of its officers and employees, and the dependents of officers and employees who elect to accept the insurance and who, where necessary, have authorized the governing body to make deductions from their compensation for the payment of premiums on the insurance
- (b) Purchase group policies of life, accident or health insurance, or any combination thereof, for the benefit of such officers and employees, and the dependents of such officers and employees, as have authorized the purchase, from insurance companies authorized to transact the business of such insurance in the State of Nevada, and, where necessary, deduct from the compensation of officers and employees the premiums upon insurance and pay the deductions upon the premiums.
- (c) Provide group life, accident or health coverage through a self-insurance reserve fund and, where necessary, deduct contributions to the maintenance of the fund from the compensation of officers and employees and pay the deductions into the fund. The money accumulated for this purpose through deductions from the compensation of officers and employees and contributions of the governing body must be maintained as an internal service fund as defined by NRS 354.543. The money must be deposited in a state or national bank or credit union authorized to transact business in the State of Nevada. Any independent administrator of a fund created under this section is subject to the licensing requirements of chapter 683A of NRS, and must be a resident of this state. Any contract with an independent administrator must be approved by the Commissioner of Insurance as to the reasonableness of administrative charges in relation to contributions collected and benefits provided. The provisions of NRS 689B.030 to 689B.050, inclusive, and 689B.575 apply to coverage provided pursuant to this paragraph, except that the provisions of NRS 689B.0359 do not apply to such coverage.



(d) Defray part or all of the cost of maintenance of a self-insurance fund or of the premiums upon insurance. The money for contributions must be budgeted for in accordance with the laws governing the county, school district, municipal corporation, political subdivision, public corporation or other **[public]** local governmental agency of the State of Nevada.

2. If a school district offers group insurance to its officers and employees pursuant to this section, members of the board of trustees of the school district must not be excluded from participating in the group insurance. If the amount of the deductions from compensation required to pay for the group insurance exceeds the compensation to which a trustee is entitled, the difference must be paid by the trustee.

Sec. 9. NRS 287.020 is hereby amended to read as follows: 287.020 1. The governing body of any county, school district, municipal corporation, political subdivision, public corporation or other [public] local governmental agency of the State of Nevada may adopt and carry into effect a system of medical or hospital service, or a combination thereof, through nonprofit membership corporations defraying the cost of medical service or hospital care, or both, open to participation by all licentiates of the particular class, [1] whether doctors of medicine, doctors of osteopathy or doctors of chiropractic, [1] offering services through such a nonprofit membership corporation, for the benefit of such of their officers and employees, and the dependents of such officers and employees, as may elect to accept membership in such nonprofit corporation and who have authorized the governing body to make deductions from their compensation for the payment of membership dues.

- 2. A part, not to exceed 50 percent, of the cost of such membership dues may be defrayed by such governing body by contribution. The money for such contributions must be budgeted for in accordance with the laws governing such county, school district, municipal corporation, political subdivision, public corporation or other [public] local governmental agency of the State of Nevada.
- 3. The power conferred in this section, with respect to the rendition of medical or hospital service, or a combination thereof, is coextensive with the power conferred in NRS 287.010 with respect to insurance companies.
- 4. If a school district offers coverage for medical service or hospital care, or both, to its officers and employees pursuant to this section, members of the board of trustees of the school district must not be excluded from participating in the coverage. If the amount of the deductions from compensation required to pay for the coverage



exceeds the compensation to which a trustee is entitled, the difference must be paid by the trustee.

- **Sec. 10.** NRS 287.021 is hereby amended to read as follows:
- 287.021 1. Except as otherwise provided in subsection 3, the surviving spouse and any surviving child of a police officer or fireman who was:
- (a) Employed by a public agency that had established group insurance or medical and hospital service pursuant to NRS 287.010, 287.020 or *paragraph* (b), (c) or (d) of subsection 1 of 287.025; and
- (b) Killed in the line of duty, may elect to accept or continue coverage under that group insurance or medical and hospital service if the police officer or fireman was a participant or would have been eligible to participate in the group insurance or medical and hospital service on the date of the death of the police officer or fireman. If the surviving spouse or child elects to accept coverage under the group insurance or medical and hospital service in which the police officer or fireman would have been eligible to participate or to discontinue coverage under the group insurance or medical and hospital service in which the police officer or fireman was a participant, the spouse, child or legal guardian of the child must notify in writing the public agency that employed the police officer or fireman within 60 days after the date of death of the police officer or fireman.
- 2. The public agency that employed the police officer or fireman shall pay the entire cost of the premiums or contributions for the group insurance or medical and hospital service for the surviving spouse or child who meets the requirements set forth in subsection 1.
- 3. A surviving spouse is eligible to receive coverage pursuant to this section for the duration of the life of the surviving spouse. A surviving child is eligible to receive coverage pursuant to this section until the child reaches:
 - (a) The age of 18 years; or

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- (b) The age of 23 years, if the child is enrolled as a full-time student in an accredited university, college or trade school.
- 4. As used in this section "police officer" has the meaning ascribed to it in NRS 617.135.
 - **Sec. 11.** NRS 287.023 is hereby amended to read as follows:
- 287.023 1. Whenever an officer or employee of the governing body of any county, school district, municipal corporation, political subdivision, public corporation or other **[public]** *local governmental* agency of the State of Nevada retires under the conditions set forth in NRS 1A.350 or 1A.480, or 286.510 or 286.620 and, at the time of his retirement, was covered or had his dependents covered by any group insurance or medical and hospital



service established pursuant to NRS 287.010 [and 287.020,], 287.020 or paragraph (b), (c) or (d) of subsection 1 of NRS 287.025, the officer or employee has the option upon retirement to cancel or continue any such group insurance or medical and hospital service coverage or join the Public Employees' Benefits Program to the extent that such coverage is not provided to him or a dependent by the Health Insurance for the Aged Act, 42 U.S.C. §§ 1395 et seq.

2. A retired person who continues coverage under the Public Employees' Benefits Program shall assume the portion of the premium or [membership] contribution costs for the coverage continued which the governing body does not pay on behalf of retired officers or employees. A person who joins the Public Employees' Benefits Program for the first time upon retirement shall assume all costs for the coverage. A dependent of such a retired person has the option, which may be exercised to the same extent and in the same manner as the retired person, to cancel or continue coverage in effect on the date the retired person dies. The dependent is not required to continue to receive retirement payments from the Public Employees' Retirement System to continue coverage.

3. [Except as otherwise provided in NRS 287.0235, notice] Notice of the selection of the option must be given in writing to the last public employer of the officer or employee within 60 days after the date of retirement or death, as the case may be. If no notice is given by that date, the retired officer or employee and his dependents shall be deemed to have selected the option to cancel the coverage for the group insurance or medical and hospital service established pursuant to NRS 287.010, 287.020 or paragraph (b), (c) or (d) of subsection 1 of NRS 287.025 or not to join the Public Employees' Benefits Program, as the case may be.

4. The governing body of any county, school district, municipal corporation, political subdivision, public corporation or other [public] local governmental agency of this state may pay the cost, or any part of the cost, of group insurance and medical and hospital service coverage provided pursuant to NRS 287.010, 287.020 or paragraph (b), (c) or (d) of subsection 1 of NRS 287.025 for persons eligible for that coverage pursuant to subsection 1, but it must not pay a greater portion than it does for its current officers and employees.

Sec. 12. NRS 287.0235 is hereby amended to read as follows: 287.0235 1. Notwithstanding the provisions of NRS 287.023 and 287.045, a person or the surviving spouse of a person who did not, at the time of his retirement pursuant to the conditions set forth in NRS 1A.350 or 1A.480, or 286.510 or 286.620, have the option to participate in the Public Employees' Benefits Program may join



the Public Employees' Benefits Program, to the extent that such coverage is not provided to him or a dependent by the Health Insurance for the Aged Act, 42 U.S.C. §§ 1395 et seq., by:

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- (a) Providing the Public Employees' Retirement Board with written notice of his intention to enroll in the Public Employees' Benefits Program during a period of open enrollment;
- (b) [Showing evidence of his good health as a condition of enrollment;
- (e)] Accepting the current plan of insurance of the Public Employees' Benefits Program and any subsequent changes to the plan; and
- [(d)] (c) Paying any portion of the premiums or contributions for the Program in the manner set forth in NRS 1A.470 or 286.615, which are due after the date of enrollment.
- The Public Employees' Retirement Board shall, beginning on September 1, 1997, have a biennial period of open enrollment between September 1 of each odd-numbered year and January 31 of each even-numbered year during which eligible retired persons may join the Public Employees' Benefits Program pursuant to this section.
- 2. The Public Employees' Retirement Board shall, on or before September 1, 1997, and every September 1 of each odd-numbered year thereafter, notify eligible retired persons described in subsection 1 of the period of open enrollment by:
- (a) Mailing a notice regarding the period of open enrollment to all retired persons who are, according to its records, eligible to join the Public Employees' Benefits Program;
- (b) Posting a notice of the period of open enrollment at its principal office and at least three other separate prominent places, such as a library, community center or courthouse; and
- (c) Publicizing the period of open enrollment in any other manner reasonably calculated to inform additional eligible retired persons.
- 3. The Public Employees' Retirement Board shall notify the Board of the Public Employees' Benefits Program of the enrollment of any person on or before March 1 immediately following the period of open enrollment. The Board of the Public Employees' Benefits Program shall approve or disapprove the request for enrollment within 90 days after receipt of the request. Enrollment shall be deemed to occur on the day the request is approved.
- 4. Enrollment in the Public Employees' Benefits Program pursuant to this section excludes claims for expenses for any condition for which medical advice, treatment or consultation was rendered within 12 months before enrollment unless :



— (a) The person has not received any medical advice, treatment or consultation for a period of 6 consecutive months after enrollment;

(b) The] *the* insurance coverage has been in effect more than 12 consecutive months.

Sec. 13. NRS 287.024 is hereby amended to read as follows:

287.024 1. If a member of the board of trustees of a school district who has served at least one full term of office does not seek reelection or is defeated for reelection and, upon the expiration of his term of office, was covered or had his dependents covered by any group insurance or medical and hospital service established pursuant to NRS 287.010 [and 287.020,], 287.020 or paragraph (b), (c) or (d) of subsection 1 of NRS 287.025, the board member has the option upon the expiration of his term of office to cancel or continue any such group insurance to the extent that such coverage is not provided to him or a dependent by the Health Insurance for the Aged Act, 42 U.S.C. §§ 1395 et seq. A board member who continues coverage under the program of group insurance shall assume all costs for the continued coverage. A dependent of such a board member has the option, which may be exercised to the same extent and in the same manner as the board member, to cancel or continue coverage in effect on the date the board member dies.

2. Notice of the selection of the option must be given in writing to the board of trustees of the school district within 30 days after the expiration of the board member's term of office or the date of his death, as the case may be. If no notice is given by that date, the board member and his dependents shall be deemed to have selected the option to cancel the coverage.

Sec. 14. NRS 287.025 is hereby amended to read as follows:

287.025 *1*. The governing body of any county, school district, municipal corporation, political subdivision, public corporation or other [public] local governmental agency of the State of Nevada may, in addition to the other powers granted in NRS 287.010 and 287.020:

[1.] (a) Negotiate and contract with [any other such agency or with] the Board of the Public Employees' Benefits Program to secure group insurance for its officers and employees and their dependents by participation in [any group insurance plan established or to be established or in] the Public Employees' Benefits Program. [Each such contract:

(a) Must be submitted to the Commissioner of Insurance not less than 30 days before the date on which the contract is to become effective for approval.

44 — (b) Does not become effective unless approved by the 45 Commissioner.



(c) Shall be deemed to be approved if not disapproved by the Commissioner of Insurance within 30 days after its submission.

- 2.] (b) Negotiate and contract with another county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada to secure group insurance for its officers and employees and their dependents by participation in any group insurance plan established or to be established by the other local governmental agency.
 - (c) To secure group health, life or workers' compensation insurance for its officers and employees and their dependents, participate as a member of a nonprofit cooperative association or nonprofit corporation that has been established in this state to secure such insurance for its members from an insurer licensed pursuant to the provisions of title 57 of NRS.
- [3.] (d) In addition to the provisions of [subsection 2,] paragraph (c), participate as a member of a nonprofit cooperative association or nonprofit corporation that has been established in this state to:
- [(a)] (1) Facilitate contractual arrangements for the provision of medical services to its members' officers and employees and their dependents and for related administrative services.
- [(b)] (2) Procure health-related information and disseminate that information to its members' officers and employees and their dependents.
- 2. Each contract negotiated pursuant to paragraph (a) or (b) of subsection 1:
- (a) Must be submitted to the Commissioner of Insurance for approval not less than 30 days before the date on which the contract is to become effective.
- (b) Does not become effective unless approved by the Commissioner of Insurance.
- (c) Shall be deemed to be approved if not disapproved by the Commissioner of Insurance within 30 days after its submission.
 - **Sec. 15.** NRS 287.030 is hereby amended to read as follows:
- 287.030 No provisions of law prohibiting, restricting or limiting the assignment of or order for wages or salary shall be deemed in any way to prohibit, restrict or limit the powers enumerated in NRS 287.010 [and 287.020,], 287.020 or 287.025 nor the right and power of officers or employees to authorize and approve payment of premiums or contributions by wage and salary deductions.



Sec. 16. NRS 287.040 is hereby amended to read as follows: 287.040 The provisions of NRS 287.010 to 287.040, inclusive, do not make it compulsory upon any governing body of any county, school district, municipal corporation, political subdivision, public corporation or other [public] local governmental agency of the State of Nevada to, except as otherwise provided in NRS 287.021, make any contributions for the payment of any premiums or other costs for group insurance or medical or hospital services, or upon any officer or employee of any county, school district, municipal corporation, political subdivision, public corporation or other [public agency] local governmental agency of this state to accept or join any plan of group insurance or to assign his wages or salary [or to authorize deductions from his wages or salary] in payment of premiums or contributions therefor.

Sec. 17. NRS 287.0402 is hereby amended to read as follows: 287.0402 As used in NRS 287.0402 to 287.049, inclusive, and sections 5, 6 and 7 of this act, unless the context otherwise requires, the words and terms defined in NRS 287.0404 and 287.0406 and sections 5, 6 and 7 of this act have the meanings ascribed to them in those sections.

Sec. 18. NRS 287.043 is hereby amended to read as follows: 287.043 1. The Board shall:

- (a) Establish and carry out a program to be known as the Public Employees' Benefits Program which:
- (1) Must include a program relating to group life, accident or health insurance, or any combination of these; and
- (2) May include a program to reduce taxable compensation or other forms of compensation other than deferred compensation,
- for the benefit of all state officers and employees and other persons who participate in the Program.
- (b) Ensure that the Program is funded on an actuarially sound basis and operated in accordance with sound insurance and business practices.
- 2. In establishing and carrying out the Program, the Board shall:
- (a) For the purpose of establishing actuarial data to determine rates and coverage for active and retired state officers and employees and their dependents, commingle the claims experience of such active and retired officers and employees and their dependents.
- (b) Except as otherwise provided in this paragraph, negotiate and contract *pursuant to paragraph* (a) of subsection 1 of NRS 287.025 with the governing body of any [public agency enumerated in NRS 287.010] county, school district, municipal corporation,



political subdivision, public corporation or other local governmental agency of the State of Nevada that wishes to obtain group insurance for its active and retired officers [, employees and retired] and employees and their dependents by participation in the Program. The Board shall establish separate rates and coverage for those active and retired officers [, employees and retired] and employees and their dependents based on actuarial reports.

- (c) Except as otherwise provided in paragraph (d), provide public notice in writing of any proposed changes in rates or coverage to each participating public [employer who] agency that may be affected by the changes. Notice must be provided at least 30 days before the effective date of the changes.
- (d) If a proposed change is a change in the premium *or contribution* charged for, or coverage of, health insurance, provide written notice of the proposed change to all [state officers, employees, retired employees and other persons who participate in the Program who may be affected by the proposed change.] *participating active and retired public officers and employees.* The notice must be provided at least 60 days before the date [a state officer, employee, retired employee or other person] *on which a participating active or retired public officer or employee* is required to select or change his policy of health insurance.
- (e) Purchase policies of life, accident or health insurance, or any combination of these, or, if applicable, a program to reduce the amount of taxable compensation pursuant to 26 U.S.C. § 125, from any company qualified to do business in this state or provide similar coverage through a plan of self-insurance established pursuant to NRS 287.0433 for the benefit of all eligible *active and retired* public officers [, employees and retired] *and* employees who participate in the Program.
- (f) Except as otherwise provided in this title, develop and establish other employee benefits as necessary.
- (g) Investigate and approve or disapprove any contract proposed pursuant to NRS 287.0479.
- (h) Adopt such regulations and perform such other duties as are necessary to carry out the provisions of NRS 287.0402 to 287.049, inclusive, *and sections 5*, *6 and 7 of this act*, including, without limitation, the establishment of:
- (1) Fees for applications for participation in the Program and for the late payment of premiums or contributions;
- (2) Conditions for entry and reentry into the Program by [public agencies enumerated in NRS 287.010;] local governmental agencies that wish to enter or reenter the Program pursuant to paragraph (a) of subsection 1 of NRS 287.025;



(3) The levels of participation in the Program required for *officers and* employees of participating public agencies;

- (4) Procedures by which a group of participants in the Program may leave the Program pursuant to NRS 287.0479 and conditions and procedures for reentry into the Program by those participants; and
- (5) Specific procedures for the determination of contested claims.
- (i) Appoint an independent certified public accountant. The accountant shall:
 - (1) Provide an annual audit of the Program; and
- (2) Report to the Board and the Interim Retirement and Benefits Committee of the Legislature created pursuant to NRS 218.5373.
- (j) Appoint an attorney who specializes in employee benefits. The attorney shall:
- (1) Perform a biennial review of the Program to determine whether the Program complies with federal and state laws relating to taxes and employee benefits; and
- (2) Report to the Board and the Interim Retirement and Benefits Committee of the Legislature created pursuant to NRS 218.5373.
- 3. The Board shall submit an annual report regarding the administration and operation of the Program to the Director of the Legislative Counsel Bureau not more than 6 months before the Board establishes rates and coverage for members for the following [calendar] plan year. The report must include, without limitation:
- (a) The amount paid by the Program in the preceding [calendar] plan year for the claims of active and retired state officers and employees [;] who participated in the Program; and
- (b) The amount paid by the Program in the preceding [calendar] plan year for the claims of retired members of the Program who were provided coverage for medical or hospital service, or both, by the Health Insurance for the Aged Act, 42 U.S.C. §§ 1395 et seq., or a plan that provides similar coverage.
- 4. The Board may use any services provided to state agencies and shall use the services of the Purchasing Division of the Department of Administration to establish and carry out the Program.
- 5. The Board may make recommendations to the Legislature concerning legislation that it deems necessary and appropriate regarding the Program.
- 6. [The State and any other public employers that participate in the Program are] A participating public agency is not liable for any obligation of the Program other than indemnification of the Board



and its employees against liability relating to the administration of the Program, subject to the limitations specified in NRS 41.0349.

- 7. As used in this section, "employee benefits" includes any form of compensation provided to a public employee except federal benefits, wages earned, legal holidays, deferred compensation and benefits available pursuant to chapter 286 of NRS.
 - **Sec. 19.** NRS 287.0434 is hereby amended to read as follows: 287.0434 The Board may:
- 1. Use its assets to pay the expenses of health care for its members and covered dependents, to pay its employees' salaries and to pay administrative and other expenses.
- 2. Enter into contracts relating to the administration of the Program, including, without limitation, contracts with licensed administrators and qualified actuaries. Each such contract with a licensed administrator:
- (a) Must be submitted to the Commissioner of Insurance not less than 30 days before the date on which the contract is to become effective for approval as to the reasonableness of administrative charges in relation to contributions collected and benefits provided.
- (b) Does not become effective unless approved by the Commissioner.
- (c) Shall be deemed to be approved if not disapproved by the Commissioner [of Insurance] within 30 days after its submission.
- 3. Enter into contracts with physicians, surgeons, hospitals, health maintenance organizations and rehabilitative facilities for medical, surgical and rehabilitative care and the evaluation, treatment and nursing care of members and covered dependents. The Board shall not enter into a contract pursuant to this subsection unless:
- (a) Provision is made by the Board to offer all the services specified in the request for proposals, either by a health maintenance organization or through separate action of the Board.
- (b) The rates set forth in the contract are based on the commingled claims experience of active and retired state officers and employees and their dependents.
- 4. Enter into contracts for the services of other experts and specialists as required by the Program.
- 5. Charge and collect from an insurer, health maintenance organization, organization for dental care or nonprofit medical service corporation, a fee for the actual expenses incurred by the Board [, the State] or a participating public [employer] agency in administering a plan of insurance offered by that insurer, organization or corporation.



Sec. 20. NRS 287.0439 is hereby amended to read as follows: 287.0439 1. A participating public [employer shall, on request,] agency shall furnish to the Board [any]:

(a) Written notice regarding a change in the status of an employee of the participating public agency or a dependent of such an employee that affects the eligibility of the employee or dependent to participate in the Program. Such notice must be provided to the Program, on a form prescribed by the Program, within 15 calendar days after the participating public agency is notified or otherwise becomes aware of the change in status.

(b) Upon request, any other information necessary to carry out the provisions of this chapter.

2. Members of the Board and its employees or agents may examine under oath any officer, agent or employee of a participating public [employer] agency concerning the information [. 2.] required pursuant to this section.

3. The books, records and payrolls of a participating public [employer] agency must be available for inspection by members of the Board and its employees and agents to obtain any information necessary for the administration of the Program, including, without limitation, the accuracy of the payroll and identity of employees.

4. A participating public agency shall reimburse the Program for any premium or contribution that was not paid to the Program as a result of the failure of the participating public agency to furnish the notice required pursuant to paragraph (a) of subsection 1. The participating public agency shall not require any employee or his dependent to reimburse the participating public agency for the amount of any premium or contribution for which the participating public agency is liable to the Program pursuant to this subsection.

Sec. 21. NRS 287.044 is hereby amended to read as follows: 287.044 1. A part of the cost of the premiums or contributions for [that] group insurance [] provided by the

Program, not to exceed the amount specified by law, applied to both group life and group accident or health coverage, for each [public] state officer, except a Senator or Assemblyman, or employee electing to participate in the Program, may be paid by the [department, agency, commission or public] participating state agency which employs the officer or employee in whose behalf that part is paid from money appropriated to or authorized for that [department, agency, commission or public] participating state agency for that purpose. Participation by the State in the cost of premiums or contributions must not exceed the amounts specified by law. If [an] a state officer or employee chooses to cover his dependents, whenever this option is made available by the Board,



except as otherwise provided in NRS 287.021 and 287.0477, he must pay the difference between the amount of the premium or contribution for the coverage for himself and his dependents and the amount paid by the [State.] participating state agency that employs the officer or employee.

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2. A [department, agency, commission or public] participating state agency shall not pay any part of those premiums or contributions if the group life insurance or group accident or health insurance is not approved by the Board.

Sec. 22. NRS 287.0445 is hereby amended to read as follows: 287.0445 The [department, agency, commission or public] participating state agency which employed [an] a state officer or employee who:

- 1. Was injured in the course of that employment;
- 2. Receives compensation for a temporary total disability pursuant to NRS 616C.475; and
- 3. Was a member of the Program at the time of the injury,

shall pay the State's share of the cost of the premiums or contributions for the Program for that officer or employee for not more than 9 months after the injury or until the officer or employee is able to return to work, whichever is less. If the previous injury recurs within 1 month after the employee returns to work and the employee again receives compensation pursuant to NRS 616C.475 as a result of the previous injury, the [department, agency, commission or public] participating state agency shall not, except as otherwise provided in this subsection, pay the state's share of the cost of the premiums or contributions for the period during which the employee is unable to work as a result of the recurring previous injury. If the initial period of disability was less than 9 months, the [department, agency, commission or public] participating state agency shall pay, during the recurrence, the State's share of the costs of the premiums or contributions for a period which, when added to the initial period, equals not more than 9 months.

Sec. 23. NRS 287.045 is hereby amended to read as follows:

287.045 1. Except as otherwise provided in this section, every *state* officer or employee [of the State] is eligible to participate in the Program on the first day of the month following the completion of 90 days of full-time employment.

- 2. Professional employees of the University and Community College System of Nevada who have annual employment contracts are eligible to participate in the Program on:
- (a) The effective dates of their respective employment contracts, if those dates are on the first day of a month; or



(b) The first day of the month following the effective dates of their respective employment contracts, if those dates are not on the first day of a month.

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- 3. Every officer or employee who is employed by a participating [public] local governmental agency on a permanent and full-time basis on the date on which the participating local governmental agency enters into an agreement to participate in the Program [,] pursuant to paragraph (a) of subsection 1 of NRS 287.025, and every officer or employee who commences his employment with that participating local governmental agency after that date is eligible to participate in the Program on the first day of the month following the completion of 90 days of full-time employment.
- 4. Every Senator and Assemblyman is eligible to participate in the Program on the first day of the month following the 90th day after his initial term of office begins.
- 5. An officer or employee of the governing body of any county, school district, municipal corporation, political subdivision, public corporation or other [public] local governmental agency of the State of Nevada who retires under the conditions set forth in NRS 1A.350 or 1A.480, or 286.510 or 286.620 and was not participating in the Program at the time of his retirement is eligible to participate in the Program 60 days after notice of the selection to participate is given pursuant to NRS 287.023. [or 287.0235.] The Board shall make a separate accounting for these retired persons. For the first year following enrollment, the rates charged must be the full actuarial costs determined by the actuary based upon the expected claims experience with these retired persons. The claims experience of these retired persons must not be commingled with the retired persons who were members of participated in the Program before their retirement, nor with active *state officers and* employees [of the State.] who participate in the Program. After the first year following enrollment, the rates charged must be the full actuarial costs determined by the actuary based upon the past claims experience of these retired persons since enrolling.
- 6. Notwithstanding the provisions of subsections 1, 3 and 4, if the Board does not, pursuant to NRS 689B.580, elect to exclude the Program from compliance with NRS 689B.340 to 689B.590, inclusive, and if the coverage under the Program is provided by a health maintenance organization authorized to transact insurance in this state pursuant to chapter 695C of NRS, any affiliation period imposed by the Program may not exceed the statutory limit for an affiliation period set forth in NRS 689B.500.



Sec. 24. NRS 287.046 is hereby amended to read as follows: 1. Except as otherwise provided in subsection 6, any 287.046 active state [or other participating] officer or employee who elects to participate in the Program may participate, and the [department, agency, commission or public] participating state agency that employs the officer or employee shall pay the State's share of the cost of the premiums or contributions for the program from money appropriated or authorized as provided in NRS 287.044. [Employees] State officers and employees who elect to participate in the Program must authorize deductions from their compensation for the payment of premiums or contributions for the Program. Any deduction from the compensation of [an] a state officer or employee for the payment of a premium *or contribution* for health insurance must be based on the actual cost of providing that health insurance after deducting any amount of the premium or contribution which is paid by the [department, agency, commission or public] participating state agency that employs the employee. As used in this subsection, "actual cost" includes any amount which has been approved by the Board and which is paid by any department, agency, commission or public agency of this state participating state agency for:

(a) A program of supplemental insurance;

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- (b) Subsidization of premiums *or contributions* for health insurance for dependents and retired participants;
- (c) Administrative costs relating to the provision of the health insurance; and
 - (d) Costs required to maintain adequate reserves.
- 2. The Department of Personnel shall pay a percentage of the base amount provided by law for that fiscal year toward the cost of the premiums or contributions for the Program for persons retired from [the service of the State who have continued] state service who elect to participate in the Program. Except as otherwise provided in subsection 3, the percentage to be paid must be calculated as follows:
- (a) For those persons who retire before January 1, 1994, 100 percent of the base amount provided by law for that fiscal year.
- (b) For those persons who retire on or after January 1, 1994, with at least 5 years of state service, 25 percent plus an additional 7.5 percent for each year of *state* service in excess of 5 years to a maximum of 137.5 percent, excluding service purchased pursuant to NRS 1A.310 or 286.300, of the base amount provided by law for that fiscal year.
- 3. If the amount calculated pursuant to subsection 2 exceeds the actual premium or contribution for the plan of the Program that the retired participant selects, the balance must be credited to the



Fund for the Public Employees' Benefits Program created pursuant to NRS 287.0435.

4. For the purposes of subsection 2:

- (a) Credit for service must be calculated in the manner provided by chapter 286 of NRS.
 - (b) No proration may be made for a partial year of *state* service.
- 5. The Department shall agree through the Board with the insurer for billing of remaining premiums or contributions for the retired participant and his dependents to the retired participant and to his dependents who elect to continue coverage under the Program after his death.
- 6. A Senator or Assemblyman who elects to participate in the Program shall pay the entire premium or contribution for his insurance.

Sec. 25. NRS 287.047 is hereby amended to read as follows:

- 287.047 If the retention is consistent with the terms of any agreement between the State and the insurance company which issued the policies pursuant to the Program or with the plan of self-insurance of the Program:
- 1. A participating state *officer or* employee who retires on or after July 1, 1985, may retain his membership in and his dependents' coverage by the Program.
- 2. A participating Legislator who retires from the service of the State or who completes 8 years of service as such may retain his membership in and his dependents' coverage by the Program.

Sec. 26. NRS 287.0475 is hereby amended to read as follows: 287.0475 1. A public *officer or* employee who has retired pursuant to NRS 1A.350 or 1A.480, or 286.510 or 286.620, or a retirement program provided pursuant to NRS 286.802, or the surviving spouse of such a retired public *officer or* employee who is deceased may, in any even-numbered year, reinstate any insurance, except life insurance, which was provided to him and his dependents at the time of his retirement pursuant to NRS 287.010, [or] 287.020 or 287.025 or the program as a public *officer or* employee by:

- (a) Giving written notice of his intent to reinstate the insurance to the **[employee's]** last public employer *of the public officer or employee* not later than January 31, of an even-numbered year;
- (b) Accepting the public employer's current program or plan of insurance and any subsequent changes thereto; and
- (c) Paying any portion of the premiums or contributions of the public employer's program or plan of insurance, in the manner set forth in NRS 1A.470 or 286.615, which are due from the date of reinstatement and not paid by the public employer.
- The last public employer shall give the insurer notice of the reinstatement no later than March 31 [] of the year in which the



public *officer or* employee or surviving spouse gives notice of his intent to reinstate the insurance. The insurer shall approve or disapprove the request for reinstatement within 90 days after the date of the request.

- 2. Reinstatement of insurance excludes claims for expenses for any condition for which medical advice, treatment or consultation was rendered within [6] 12 months before reinstatement unless [:
- (a) The person has not received any medical advice, treatment or consultation for a period of 6 consecutive months after the reinstatement; or
- (b) The the reinstated insurance has been in effect more than 12 consecutive months.

Sec. 27. NRS 287.0479 is hereby amended to read as follows: 287.0479 1. If approved by the Board pursuant to this section, a group of not less than 300 *active state* officers [,] *or* employees or retired *state officers or* employees, or any combination thereof, that participate in the Program may leave the Program and secure life, accident or health insurance, or any combination thereof, for the group from an:

- (a) Insurer that is authorized by the Commissioner of Insurance to provide such insurance; or
- (b) Employee benefit plan, as defined in 29 U.S.C. § 1002(3), that has been approved by the Board. The Board may approve an employee benefit plan unless the Board finds that the plan is not operated pursuant to such sound accounting and financial management practices as to ensure that the group will continue to receive adequate benefits.
- 2. Before entering into a contract with the insurer or approved employee benefit plan, the group shall submit the proposed contract to the Board for approval. The Board may approve the contract unless the departure of the group from the Program would cause an increase of more than 5 percent in the costs of premiums or contributions for the remaining participants in the Program. In determining whether to approve a proposed contract, the Board shall follow the criteria set forth in the regulations adopted by the Board pursuant to subsection 4 and may consider the cumulative impact of groups that have left or are proposing to leave the Program. Except as otherwise provided in this section, the Board has discretion in determining whether to approve a contract. If the Board approves a proposed contract pursuant to this subsection, the group that submitted the proposed contract is not authorized to leave the Program until 120 days after the date on which the Board approves the proposed contract.
- 3. The Board shall disburse periodically to the insurer or employee benefit plan with which a group contracts pursuant to this



section the total amount set forth in the contract for premiums or contributions for the members of the group for that period but not to exceed the amount appropriated to or authorized for the [department, agency, commission or public] participating state agency that employs the members of the group for premiums or contributions for the members of the group for that period, after deducting any administrative costs related to the group.

4. The Board shall adopt regulations establishing the criteria pursuant to which the Board will approve proposed contracts pursuant to subsection 2.

Sec. 28. NRS 287.048 is hereby amended to read as follows:

287.048 NRS 287.0402 to 287.047, inclusive, do not require any officer or employee of the State of Nevada to accept or join the Program, or to assign his wages or salary [to or authorize deductions from his wages or salary] in payment of premiums or contributions for the Program.

Sec. 29. NRS 1A.470 is hereby amended to read as follows:

1A.470 1. In addition to the options provided in NRS 287.023 and subject to the requirements of that section, any justice of the Supreme Court or district judge who retires under the conditions set forth in NRS 1A.350 and, at the time of his retirement, was covered or had his dependents covered by any group insurance or medical and hospital service established pursuant to NRS 287.010 [and 287.020,], 287.020 or paragraph (b), (c) or (d) of subsection 1 of NRS 287.025, has the option of having the Executive Officer of the Board deduct and pay his premium or contribution for that group insurance or medical and hospital service coverage, as well as the amount due or to become due upon any obligation designated by the Board pursuant to subsection 2, from his monthly retirement allowance until:

- (a) He notifies the Executive Officer of the Board to discontinue the deduction; or
- (b) Any of his dependents elect to assume the premium or contribution applicable to the dependent's coverage before the death of such a retired justice or judge and continue coverage pursuant to NRS 287.023 after his death.
- 2. The Board may adopt regulations to carry out the provisions of subsection 1, including, without limitation, regulations governing the number and types of obligations, amounts for the payment of which may be deducted and paid by the Board at the option of the retired justice or judge pursuant to this section.
- 3. The Executive Officer of the Board, the Board and the System are not liable for any damages resulting from errors or omissions concerning the deductions and payment of premiums or



contributions authorized pursuant to this section unless willful neglect or gross negligence is proven.

Sec. 30. NRS 218.6853 is hereby amended to read as follows:

- 218.6853 1. The Chief of the Administrative Division is ex officio Legislative Fiscal Officer. As such Officer, he shall keep a complete, accurate and adequate set of accounting records and reports for all legislative operations, including any records and reports required by the Federal Government for the administration of federal revenue and income tax laws.
- 2. The Chief shall withhold from the pay of each Legislator, employee of the Legislature and employee of the Legislative Counsel Bureau the amount of tax specified by the Federal Government and shall transmit the amount deducted to the Internal Revenue Service of the United States Department of the Treasury.
- 3. The Chief shall, upon receipt of information from the Public Employees' Benefits Program specifying amounts of premiums or contributions for coverage by the Program, withhold from the pay of each employee of the Legislature and employee of the Legislative Counsel Bureau who participates in the Public Employees' Benefits Program those amounts and pay those amounts to the Program.
- 4. The Chief may provide for the purchase of United States savings bonds or similar United States obligations by salary deduction for any Legislator, legislative employee or employee of the Legislative Counsel Bureau who submits a written request for these deductions and purchases. The Chief shall provide forms authorizing deductions for and purchases of these United States obligations.
- [4.] 5. The Chief may withhold from the pay of a Legislator, employee of the Legislature or employee of the Legislative Counsel Bureau such amount as the claimant specifies in writing for payment to his credit union. Any money which is withheld must be transmitted by the Chief in accordance with the claimant's written instructions. The Chief may adopt regulations necessary to carry out the provisions of this subsection.
- **Sec. 31.** Section 49 of chapter 573, Statutes of Nevada 1999, at page 3048, is hereby amended to read as follows:
 - Sec. 49. 1. This section and sections 41, 47 and 48 of this act become effective upon passage and approval.
 - 2. Sections 1 to 12, inclusive, 13 to 28, inclusive, 30 to 40, inclusive, 42, 42.7, 47.2, 48.5 and 50 of this act become effective on July 1, 1999.
 - 3. Section 29 of this act becomes effective at 12:01 a.m. on July 1, 1999.



- 4. Sections 12.5 and 47.3 of this act become effective on 1 2 July 1, 1999, for the purpose of adopting regulations, and on January 1, 2001, for all other purposes. 3 4 [5. Section 18 of this act expires by limitation on July 1, 5
 - Section 42.5 of this act becomes effective on July 1,
 - 2003.]
 - **Sec. 32.** 1. NRS 287.0235 is hereby repealed.

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- 9 Section 42.5 of chapter 573, Statutes of Nevada 1999, at 10 page 3043, is hereby repealed.
- **Sec. 33.** 1. This section and sections 1 to 10, inclusive, 12 to 11 22, inclusive, and 25 to 31, inclusive, of this act become effective on 12 13
- 2. Sections 11, 23, 24 and 32 of this act become effective on 14 July 1, 2004. 15

TEXT OF REPEALED SECTIONS

287.0235 Option of certain retired persons to join public employees' benefits program; notification of period of open enrollment; approval or disapproval of request for enrollment; exclusion of certain claims for expenses.

- 1. Notwithstanding the provisions of NRS 287.023 and 287.045, a person or the surviving spouse of a person who did not, at the time of his retirement pursuant to the conditions set forth in NRS 286.510 or 286.620, have the option to participate in the Public Employees' Benefits Program may join the Public Employees' Benefits Program, to the extent that such coverage is not provided to him or a dependent by the Health Insurance for the Aged Act, 42 U.S.C. §§ 1395 et seq., by:
- (a) Providing the Public Employees' Retirement Board with written notice of his intention to enroll in the Public Employees' Benefits Program during a period of open enrollment;
- (b) Accepting the current plan of insurance of the Public Employees' Benefits Program and any subsequent changes to the plan; and
- (c) Paying any portion of the premiums or contributions for the Program in the manner set forth in NRS 286.615, which are due after the date of enrollment.

The Public Employees' Retirement Board shall, beginning on September 1, 1997, have a biennial period of open enrollment between September 1 of each odd-numbered year and January 31 of



each even-numbered year during which eligible retired persons may join the Public Employees' Benefits Program pursuant to this section.

- 2. The Public Employees' Retirement Board shall, on or before September 1, 1997, and every September 1 of each odd-numbered year thereafter, notify eligible retired persons described in subsection 1 of the period of open enrollment by:
- (a) Mailing a notice regarding the period of open enrollment to all retired persons who are, according to its records, eligible to join the Public Employees' Benefits Program;
- (b) Posting a notice of the period of open enrollment at its principal office and at least three other separate prominent places, such as a library, community center or courthouse; and
- (c) Publicizing the period of open enrollment in any other manner reasonably calculated to inform additional eligible retired persons.
- 3. The Public Employees' Retirement Board shall notify the Board of the Public Employees' Benefits Program of the enrollment of any person on or before March 1 immediately following the period of open enrollment. The Board of the Public Employees' Benefits Program shall approve or disapprove the request for enrollment within 90 days after receipt of the request. Enrollment shall be deemed to occur on the day the request is approved.
- 4. Enrollment in the Public Employees' Benefits Program pursuant to this section excludes claims for expenses for any condition for which medical advice, treatment or consultation was rendered within 12 months before enrollment unless the insurance coverage has been in effect more than 12 consecutive months.

Section 42.5 of chapter 573, Statutes of Nevada 1999:

- Sec. 42.5. Section 18 of this act is hereby amended to read as follows:
 - Sec. 18. NRS 287.041 is hereby amended to read as follows:
 - 287.041 1. There is hereby created the board of the public employees' benefits program. The board consists of seven members appointed as follows:
 - (a) One member who is an employee of the University and Community College System of Nevada, appointed by the governor upon consideration of any recommendations of organizations that represent employees of the University and Community College System of Nevada.
 - (b) One member who is retired from public employment, appointed by the governor upon consideration of any recommendations of organizations that represent retired public employees.



- (c) Two members who are employees of the state, appointed by the governor upon consideration of any recommendations of organizations that represent state employees.
- (d) One member appointed by the governor upon consideration of any recommendations of organizations that represent employees of local governments that participate in the program.
- (e) One member who is employed by this state in a managerial capacity and has substantial and demonstrated experience in risk management, portfolio investment strategies or employee benefits programs appointed by the governor. The governor may appoint the executive officer of the public employees' retirement system to fill this position.
- (f) The director of the department of administration or his designee.
- 2. Of the six persons appointed to the board pursuant to paragraphs (a) to (e), inclusive, of subsection 1, at least one member must have an advanced degree in business administration, economics, accounting, insurance, risk management or health care administration, and at least two members must have education or proven experience in the management of employees' benefits, insurance, risk management, health care administration or business administration.
- 3. Each person appointed as a member of the board must:
- (a) Have been a participant in the program for at least 1 year before his appointment;
- (b) Be a current employee of the State of Nevada or another public employer that participates in the program or a retired public employee who is a participant in the program; and
- (c) Not be an elected officer of the State of Nevada or any of its political subdivisions.
- 4. Except as otherwise provided in this subsection, after the initial terms, the term of an appointed member of the board is 4 years and until his successor is appointed and takes office unless the member no longer possesses the qualifications for appointment set forth in this section or is removed by the governor. If a member loses the requisite qualifications within the last 12 months of his term, the member may serve the remainder of his term. Members are eligible for reappointment. A vacancy



occurring in the membership of the board must be filled in the same manner as the original appointment.

5. The appointed members of the board serve at the

5. The appointed members of the board serve at the pleasure of the governor. If the governor wishes to remove a member from the board for any reason other than malfeasance or misdemeanor, the governor shall provide the member with written notice which states the reason for and the effective date of the removal.



