
SENATE BILL NO. 95—COMMITTEE ON HUMAN
RESOURCES AND FACILITIES

(ON BEHALF OF THE LEGISLATIVE COMMITTEE ON
HEALTH CARE (NRS 439B.200))

FEBRUARY 12, 2003

Referred to Committee on Human Resources and Facilities

SUMMARY—Requires certain hospitals to accept certain payments for providing inpatient services to insureds admitted upon diversion from another hospital.
(BDR 40-679)

FISCAL NOTE: Effect on Local Government: Yes.
Effect on the State: Yes.

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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 the cost of health care; requiring certain hospitals to accept certain payments for providing inpatient services to insureds admitted upon diversion from another hospital; and providing other matters properly relating thereto.

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

- 1 **Section 1.** Chapter 439B of NRS is hereby amended by adding
2 thereto a new section to read as follows:
3 ***1. If a major hospital provides inpatient services to an***
4 ***insured who is admitted to the major hospital and:***
5 ***(a) The insured was admitted to the major hospital upon***
6 ***diversion from another hospital in this state because the other***
7 ***hospital lacked sufficient resources to provide the emergency***
8 ***services and care needed by the insured;***
9 ***(b) The insurer of the insured did not have a current***
10 ***agreement, contract or other arrangement with the major hospital***



1 *for payment for the inpatient services at the time the patient was*
2 *diverted;*
3 *(c) The insurer of the insured had a current agreement,*
4 *contract or other arrangement with the hospital from which the*
5 *insured was diverted for payment for the inpatient services at the*
6 *time the patient was diverted; and*
7 *(d) All other hospitals with whom the insurer had a current*
8 *agreement, contract or other arrangement for the provision of*
9 *emergency services and care at the time the patient was diverted*
10 *that were located within a reasonable distance from the insured*
11 *also lacked sufficient resources to provide the emergency services*
12 *and care needed by the insured at the time that the insured was*
13 *diverted,*
14 *the major hospital shall accept as payment in full for the inpatient*
15 *services provided to the insured that resulted from that admission,*
16 *and the insurer of the insured shall pay to the major hospital, a*
17 *rate negotiated between the hospital and the insurer, but the*
18 *insurer or insured is not liable to the major hospital for the*
19 *inpatient services for more than 150 percent of the amount that*
20 *Medicare would pay for the inpatient services.*
21 **2.** *A major hospital that is subject to the provisions of*
22 *subsection 1 may collect the same copayment and deductible from*
23 *the insured that a hospital with whom the insurer of the insured*
24 *had a current agreement, contract or other arrangement for the*
25 *inpatient services at the time that the services were provided would*
26 *be authorized to collect from the insured.*
27 **3.** *The Director shall adopt regulations concerning the*
28 *manner of documenting whether a hospital was on divert when a*
29 *patient was diverted from that hospital.*
30 **4.** *As used in this section:*
31 *(a) "Emergency services and care" has the meaning ascribed*
32 *to it in NRS 439B.410.*
33 *(b) "Insured" means a person covered by a policy of health*
34 *insurance issued by an insurer.*
35 *(c) "Insurer" has the meaning ascribed to it in NRS 232.550.*
36 *(d) "Major hospital" includes a major hospital that is operated*
37 *by a state or local governmental agency.*
38 **Sec. 2.** This act becomes effective upon passage and approval
39 for the purpose of adopting regulations and on July 1, 2003, for all
40 other purposes.

