

Amendment No. 894

Senate Amendment to Assembly Bill No. 296 First Reprint	(BDR 40-790)
Proposed by: Committee on Human Resources and Education	
Amendment Box:	
Resolves Conflicts with: N/A	
Amends: Summary: No Title: No Preamble: No Joint Sponsorship: No Digest: No	

ASSEMBLY ACTION	Initial and Date	SENATE ACTION	Initial and Date
Adopted <input type="checkbox"/> Lost <input type="checkbox"/>	_____	Adopted <input type="checkbox"/> Lost <input type="checkbox"/>	_____
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Amend section 1, page 1, line 5, by deleting:

“subsections 2 and 3” and inserting *“subsection 2”*.

Amend section 1, page 1, line 7, by deleting *“care by”* and inserting:

“care:

(1) By”.

Amend section 1, page 1, line 9, after *“NRS;”* by inserting *“and”*.

Amend section 1, page 1, by deleting line 10 and inserting:

“(2) Pursuant to:

(1) A policy or protocol followed by the operator of the ambulance or air ambulance or the fire-fighting agency that was issued by the county or district board of health and which

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A.B. No. 296—Requires certain major hospitals to accept certain payments for provision of emergency services and care to certain patients as payment in full.



required the patient to be transported to that major hospital, regardless of whether the patient was admitted to the hospital; or

(II) The request of the patient to be transported to the nearest hospital, if the patient was admitted to the hospital; and”.

Amend section 1, page 1, by deleting line 11 and inserting:

“(b) Has a policy of health insurance or other contractual provision”.

Amend section 1, page 2, by deleting lines 2 through 8 and inserting:

“through a contract between the entity that issues the policy of health insurance and at least 50 percent of the hospital systems in the county or through a contract between the third party and at least 50 percent of the hospital systems in the county;

(2) That does not provide coverage for emergency services and care provided by the major hospital to which the patient was transported through a contract between the entity that issues the policy of health insurance and the major hospital or through a contract between the third party and the major hospital; and

(3) That provided coverage for emergency services and care provided by the major hospital to which the patient was transported through a contract between the entity that issues the policy of health insurance and the major hospital which terminated within 18 months before the patient was transported or through a contract between the third party and the major hospital which terminated within 18 months before the patient was transported.”.

Amend section 1, page 2, by deleting lines 11 through 13 and inserting:

“(a) Shall accept as payment in full for such services and care that are provided to the patient before the patient’s condition has been stabilized to a degree that allows the transfer of the patient

to another hospital without an additional risk to the patient a rate of 175 percent of the amount the entity that issued the policy of health insurance of the patient or the third party that provides coverage for the patient would have paid for such services and care pursuant to the most recent contract between the entity that issued the policy of health insurance of the patient and the major hospital or pursuant to the contract between the third party that provides coverage for the patient and the major hospital; and”.

Amend section 1, page 2, by deleting lines 24 and 25 and inserting:

“(c) “Emergency services and care” means medical screening, examination and evaluation by a physician or, to the extent permitted by a specific statute, by a person under the supervision of a physician to determine if an emergency medical condition or active labor exists and, if it does, the care, treatment and surgery by a physician necessary to relieve or eliminate the emergency medical condition or active labor, within the capability of the hospital, regardless of the area of the hospital in which the services and care are provided. As used in this paragraph:

(1) “Active labor” means, in relation to childbirth, labor that occurs when:

(I) There is inadequate time before delivery to transfer the patient safely to another hospital; or

(II) A transfer may pose a threat to the health and safety of the patient or the unborn child.

(2) “Emergency medical condition” means the presence of acute symptoms of sufficient severity, including severe pain, such that the absence of immediate medical attention could reasonably be expected to result in:

(I) Placing the health of the patient in serious jeopardy;

(II) Serious impairment of bodily functions; or

(III) Serious dysfunction of any bodily organ or part.”.

Amend section 1, page 2, after “(e)” by inserting:

““Health insurance” means insurance offered pursuant to chapter 689A, 689B, 689C, 695A, 695B, 695C or 695G of NRS.

(f) “Hospital system” means a business entity or governmental entity that owns or operates one or more hospitals in a county, at least one of which has 100 or more beds.

(g)”.

Amend section 1, page 2, by deleting lines 32 and 33 and inserting:

“the Department pursuant to NRS 450B.237.”.

Amend section 1, page 2, line 34, by deleting “(f)” and inserting “(h)”.

Amend section 1, page 2, by deleting line 35 and inserting:

“(1) An entity that offers policies of health insurance;”.

Amend section 1, page 2, by deleting line 43 and inserting:

“(4) Any other health insurer or organization providing comprehensive health”.

Amend section 1, page 2, after line 44, by inserting:

↪ “The term “third party” does not include an insurer or organization that provides coverage for emergency services and care only incidentally to providing other coverage, including, without limitation, coverage issued as a supplement to liability insurance and automobile medical payment insurance.”.

Amend the bill as a whole by renumbering sec. 2 as sec. 3 and adding a new section designated sec. 2, following section 1, to read as follows:

“Sec. 2. 1. The Legislative Committee on Health Care shall:

(a) Include in any comprehensive plan concerning the provision of health care in this State that it develops during the interim a review of the coverage of and payment for emergency services and care provided in this State; and

(b) Determine whether any legislation is needed to address issues concerning the coverage of and payment for emergency services and care provided in this State and submit any recommendations for such legislation to the 74th Session of the Nevada Legislature.

2. As used in this section, “emergency services and care” has the meaning ascribed to it in paragraph (c) of subsection 3 of section 1 of this act.”.