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FIRST REPRINT

A.B. 317

ASSEMBLY BILL NO. 317—ASSEMBLYWOMAN CARLTON

MARCH 18, 2019

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions governing the licensing and operation of certain medical facilities. (BDR 40-1034)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact.
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 health care; requiring an off-campus location of a hospital to obtain a distinct national provider identifier; revising provisions governing approval to operate a center for the treatment of trauma; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

1 Existing federal regulations require each provider of health care, including a
2 hospital, to obtain a national provider identifier from the National Provider System.
3 (45 C.F.R. § 162.410) **Section 1.2** of this bill requires each off-campus location of a
4 hospital to obtain a national provider identifier that is distinct from the national
5 provider identifier used by the main location and any other off-campus locations of
6 the hospital. **Sections 1.4-6.5 and 8.5** of this bill make conforming changes.
7 Existing law requires a person to obtain the approval of the Administrator of
8 the Division of Public and Behavioral Health of the Department of Health and
9 Human Services and, if the hospital is located in a county whose population is
10 700,000 or more, the district board of health, before operating a center for the
11 treatment of trauma. (NRS 450B.236, 450B.237) **Section 8** of this bill requires a
12 proposal to establish a center for the treatment of trauma to be approved by the
13 Administrator before the district board of health may approve the proposal. **Section**
14 **8** also prescribes criteria for such approval related to ensuring that the proposed
15 center will not negatively impact existing capacity to treat trauma in the county.



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

1 **Section 1.** (Deleted by amendment.)

2 **Sec. 1.2.** Chapter 449 of NRS is hereby amended by adding
3 thereto a new section to read as follows:

4 *1. Each off-campus location of a hospital must obtain and*
5 *use on all claims for reimbursement or payment for health care*
6 *services provided at the location a national provider identifier that*
7 *is distinct from the national provider identifier used by the main*
8 *campus and any other off-campus location of the hospital.*

9 *2. As used in this section:*

10 *(a) "National provider identifier" means the standard, unique*
11 *health identifier for health care providers that is issued by the*
12 *national provider system in accordance with 45 C.F.R. Part 162.*

13 *(b) "Off-campus location" means a facility:*

14 *(1) With operations that are directly or indirectly owned or*
15 *controlled by, in whole or in part, a hospital or which is affiliated*
16 *with a hospital, regardless of whether it is operated by the same*
17 *governing body as the hospital;*

18 *(2) That is located more than 250 yards from the main*
19 *campus of the hospital;*

20 *(3) That provides services which are organizationally and*
21 *functionally integrated with the hospital; and*

22 *(4) That is an outpatient facility providing preventive,*
23 *diagnostic, treatment or emergency services.*

24 **Sec. 1.4.** NRS 449.029 is hereby amended to read as follows:

25 449.029 As used in NRS 449.029 to 449.240, inclusive, *and*
26 *section 1.2 of this act*, unless the context otherwise requires,
27 "medical facility" has the meaning ascribed to it in NRS 449.0151
28 and includes a program of hospice care described in NRS 449.196.

29 **Sec. 1.6.** NRS 449.0301 is hereby amended to read as follows:

30 449.0301 The provisions of NRS 449.029 to 449.2428,
31 inclusive, *and section 1.2 of this act* do not apply to:

32 1. Any facility conducted by and for the adherents of any
33 church or religious denomination for the purpose of providing
34 facilities for the care and treatment of the sick who depend solely
35 upon spiritual means through prayer for healing in the practice of
36 the religion of the church or denomination, except that such a
37 facility shall comply with all regulations relative to sanitation and
38 safety applicable to other facilities of a similar category.

39 2. Foster homes as defined in NRS 424.014.

40 3. Any medical facility, facility for the dependent or facility
41 which is otherwise required by the regulations adopted by the Board



1 pursuant to NRS 449.0303 to be licensed that is operated and
2 maintained by the United States Government or an agency thereof.

3 **Sec. 1.8.** NRS 449.0302 is hereby amended to read as follows:
4 449.0302 1. The Board shall adopt:

5 (a) Licensing standards for each class of medical facility or
6 facility for the dependent covered by NRS 449.029 to 449.2428,
7 inclusive, *and section 1.2 of this act* and for programs of hospice
8 care.

9 (b) Regulations governing the licensing of such facilities and
10 programs.

11 (c) Regulations governing the procedure and standards for
12 granting an extension of the time for which a natural person may
13 provide certain care in his or her home without being considered a
14 residential facility for groups pursuant to NRS 449.017. The
15 regulations must require that such grants are effective only if made
16 in writing.

17 (d) Regulations establishing a procedure for the indemnification
18 by the Division, from the amount of any surety bond or other
19 obligation filed or deposited by a facility for refractive surgery
20 pursuant to NRS 449.068 or 449.069, of a patient of the facility who
21 has sustained any damages as a result of the bankruptcy of or any
22 breach of contract by the facility.

23 (e) Any other regulations as it deems necessary or convenient to
24 carry out the provisions of NRS 449.029 to 449.2428, inclusive ~~§~~,
25 *and section 1.2 of this act*.

26 2. The Board shall adopt separate regulations governing the
27 licensing and operation of:

28 (a) Facilities for the care of adults during the day; and

29 (b) Residential facilities for groups,

30 ↪ which provide care to persons with Alzheimer's disease.

31 3. The Board shall adopt separate regulations for:

32 (a) The licensure of rural hospitals which take into consideration
33 the unique problems of operating such a facility in a rural area.

34 (b) The licensure of facilities for refractive surgery which take
35 into consideration the unique factors of operating such a facility.

36 (c) The licensure of mobile units which take into consideration
37 the unique factors of operating a facility that is not in a fixed
38 location.

39 4. The Board shall require that the practices and policies of
40 each medical facility or facility for the dependent provide
41 adequately for the protection of the health, safety and physical,
42 moral and mental well-being of each person accommodated in the
43 facility.

44 5. In addition to the training requirements prescribed pursuant
45 to NRS 449.093, the Board shall establish minimum qualifications



1 for administrators and employees of residential facilities for groups.
2 In establishing the qualifications, the Board shall consider the
3 related standards set by nationally recognized organizations which
4 accredit such facilities.

5 6. The Board shall adopt separate regulations regarding the
6 assistance which may be given pursuant to NRS 453.375 and
7 454.213 to an ultimate user of controlled substances or dangerous
8 drugs by employees of residential facilities for groups. The
9 regulations must require at least the following conditions before
10 such assistance may be given:

11 (a) The ultimate user's physical and mental condition is stable
12 and is following a predictable course.

13 (b) The amount of the medication prescribed is at a maintenance
14 level and does not require a daily assessment.

15 (c) A written plan of care by a physician or registered nurse has
16 been established that:

17 (1) Addresses possession and assistance in the administration
18 of the medication; and

19 (2) Includes a plan, which has been prepared under the
20 supervision of a registered nurse or licensed pharmacist, for
21 emergency intervention if an adverse condition results.

22 (d) Except as otherwise authorized by the regulations adopted
23 pursuant to NRS 449.0304, the prescribed medication is not
24 administered by injection or intravenously.

25 (e) The employee has successfully completed training and
26 examination approved by the Division regarding the authorized
27 manner of assistance.

28 7. The Board shall adopt separate regulations governing the
29 licensing and operation of residential facilities for groups which
30 provide assisted living services. The Board shall not allow the
31 licensing of a facility as a residential facility for groups which
32 provides assisted living services and a residential facility for groups
33 shall not claim that it provides "assisted living services" unless:

34 (a) Before authorizing a person to move into the facility, the
35 facility makes a full written disclosure to the person regarding what
36 services of personalized care will be available to the person and the
37 amount that will be charged for those services throughout the
38 resident's stay at the facility.

39 (b) The residents of the facility reside in their own living units
40 which:

41 (1) Except as otherwise provided in subsection 8, contain
42 toilet facilities;

43 (2) Contain a sleeping area or bedroom; and

44 (3) Are shared with another occupant only upon consent of
45 both occupants.



1 (c) The facility provides personalized care to the residents of the
2 facility and the general approach to operating the facility
3 incorporates these core principles:

4 (1) The facility is designed to create a residential
5 environment that actively supports and promotes each resident's
6 quality of life and right to privacy;

7 (2) The facility is committed to offering high-quality
8 supportive services that are developed by the facility in
9 collaboration with the resident to meet the resident's individual
10 needs;

11 (3) The facility provides a variety of creative and innovative
12 services that emphasize the particular needs of each individual
13 resident and the resident's personal choice of lifestyle;

14 (4) The operation of the facility and its interaction with its
15 residents supports, to the maximum extent possible, each resident's
16 need for autonomy and the right to make decisions regarding his or
17 her own life;

18 (5) The operation of the facility is designed to foster a social
19 climate that allows the resident to develop and maintain personal
20 relationships with fellow residents and with persons in the general
21 community;

22 (6) The facility is designed to minimize and is operated in a
23 manner which minimizes the need for its residents to move out of
24 the facility as their respective physical and mental conditions change
25 over time; and

26 (7) The facility is operated in such a manner as to foster a
27 culture that provides a high-quality environment for the residents,
28 their families, the staff, any volunteers and the community at large.

29 8. The Division may grant an exception from the requirement
30 of subparagraph (1) of paragraph (b) of subsection 7 to a facility
31 which is licensed as a residential facility for groups on or before
32 July 1, 2005, and which is authorized to have 10 or fewer beds and
33 was originally constructed as a single-family dwelling if the
34 Division finds that:

35 (a) Strict application of that requirement would result in
36 economic hardship to the facility requesting the exception; and

37 (b) The exception, if granted, would not:

38 (1) Cause substantial detriment to the health or welfare of
39 any resident of the facility;

40 (2) Result in more than two residents sharing a toilet facility;
41 or

42 (3) Otherwise impair substantially the purpose of that
43 requirement.

44 9. The Board shall, if it determines necessary, adopt
45 regulations and requirements to ensure that each residential facility



1 for groups and its staff are prepared to respond to an emergency,
2 including, without limitation:

3 (a) The adoption of plans to respond to a natural disaster and
4 other types of emergency situations, including, without limitation,
5 an emergency involving fire;

6 (b) The adoption of plans to provide for the evacuation of a
7 residential facility for groups in an emergency, including, without
8 limitation, plans to ensure that nonambulatory patients may be
9 evacuated;

10 (c) Educating the residents of residential facilities for groups
11 concerning the plans adopted pursuant to paragraphs (a) and (b); and

12 (d) Posting the plans or a summary of the plans adopted
13 pursuant to paragraphs (a) and (b) in a conspicuous place in each
14 residential facility for groups.

15 10. The regulations governing the licensing and operation of
16 facilities for transitional living for released offenders must provide
17 for the licensure of at least three different types of facilities,
18 including, without limitation:

19 (a) Facilities that only provide a housing and living
20 environment;

21 (b) Facilities that provide or arrange for the provision of
22 supportive services for residents of the facility to assist the residents
23 with reintegration into the community, in addition to providing a
24 housing and living environment; and

25 (c) Facilities that provide or arrange for the provision of alcohol
26 and drug abuse programs, in addition to providing a housing and
27 living environment and providing or arranging for the provision of
28 other supportive services.

29 ➤ The regulations must provide that if a facility was originally
30 constructed as a single-family dwelling, the facility must not be
31 authorized for more than eight beds.

32 11. As used in this section, "living unit" means an individual
33 private accommodation designated for a resident within the facility.

34 **Sec. 2.** (Deleted by amendment.)

35 **Sec. 3.** (Deleted by amendment.)

36 **Sec. 4.** (Deleted by amendment.)

37 **Sec. 4.3.** NRS 449.160 is hereby amended to read as follows:

38 449.160 1. The Division may deny an application for a
39 license or may suspend or revoke any license issued under the
40 provisions of NRS 449.029 to 449.2428, inclusive, *and section 1.2*
41 *of this act* upon any of the following grounds:

42 (a) Violation by the applicant or the licensee of any of the
43 provisions of NRS 439B.410 or 449.029 to 449.245, inclusive, *and*
44 *section 1.2 of this act* or of any other law of this State or of the
45 standards, rules and regulations adopted thereunder.



1 (b) Aiding, abetting or permitting the commission of any illegal
2 act.

3 (c) Conduct inimical to the public health, morals, welfare and
4 safety of the people of the State of Nevada in the maintenance and
5 operation of the premises for which a license is issued.

6 (d) Conduct or practice detrimental to the health or safety of the
7 occupants or employees of the facility.

8 (e) Failure of the applicant to obtain written approval from the
9 Director of the Department of Health and Human Services as
10 required by NRS 439A.100 or as provided in any regulation adopted
11 pursuant to NRS 449.001 to 449.430, inclusive, *and section 1.2 of*
12 *this act* and 449.435 to 449.531, inclusive, and chapter 449A of
13 NRS if such approval is required.

14 (f) Failure to comply with the provisions of NRS 449.2486.

15 2. In addition to the provisions of subsection 1, the Division
16 may revoke a license to operate a facility for the dependent if, with
17 respect to that facility, the licensee that operates the facility, or an
18 agent or employee of the licensee:

19 (a) Is convicted of violating any of the provisions of
20 NRS 202.470;

21 (b) Is ordered to but fails to abate a nuisance pursuant to NRS
22 244.360, 244.3603 or 268.4124; or

23 (c) Is ordered by the appropriate governmental agency to correct
24 a violation of a building, safety or health code or regulation but fails
25 to correct the violation.

26 3. The Division shall maintain a log of any complaints that it
27 receives relating to activities for which the Division may revoke the
28 license to operate a facility for the dependent pursuant to subsection
29 2. The Division shall provide to a facility for the care of adults
30 during the day:

31 (a) A summary of a complaint against the facility if the
32 investigation of the complaint by the Division either substantiates
33 the complaint or is inconclusive;

34 (b) A report of any investigation conducted with respect to the
35 complaint; and

36 (c) A report of any disciplinary action taken against the facility.

37 ➤ The facility shall make the information available to the public
38 pursuant to NRS 449.2486.

39 4. On or before February 1 of each odd-numbered year, the
40 Division shall submit to the Director of the Legislative Counsel
41 Bureau a written report setting forth, for the previous biennium:

42 (a) Any complaints included in the log maintained by the
43 Division pursuant to subsection 3; and

44 (b) Any disciplinary actions taken by the Division pursuant to
45 subsection 2.



1 **Sec. 4.6.** NRS 449.163 is hereby amended to read as follows:
2 449.163 1. In addition to the payment of the amount required
3 by NRS 449.0308, if a medical facility, facility for the dependent or
4 facility which is required by the regulations adopted by the Board
5 pursuant to NRS 449.0303 to be licensed violates any provision
6 related to its licensure, including any provision of NRS 439B.410 or
7 449.029 to 449.2428, inclusive, *and section 1.2 of this act*, or any
8 condition, standard or regulation adopted by the Board, the
9 Division, in accordance with the regulations adopted pursuant to
10 NRS 449.165, may:

11 (a) Prohibit the facility from admitting any patient until it
12 determines that the facility has corrected the violation;

13 (b) Limit the occupancy of the facility to the number of beds
14 occupied when the violation occurred, until it determines that the
15 facility has corrected the violation;

16 (c) If the license of the facility limits the occupancy of the
17 facility and the facility has exceeded the approved occupancy,
18 require the facility, at its own expense, to move patients to another
19 facility that is licensed;

20 (d) Impose an administrative penalty of not more than \$5,000
21 per day for each violation, together with interest thereon at a rate not
22 to exceed 10 percent per annum; and

23 (e) Appoint temporary management to oversee the operation of
24 the facility and to ensure the health and safety of the patients of the
25 facility, until:

26 (1) It determines that the facility has corrected the violation
27 and has management which is capable of ensuring continued
28 compliance with the applicable statutes, conditions, standards and
29 regulations; or

30 (2) Improvements are made to correct the violation.

31 2. If the facility fails to pay any administrative penalty imposed
32 pursuant to paragraph (d) of subsection 1, the Division may:

33 (a) Suspend the license of the facility until the administrative
34 penalty is paid; and

35 (b) Collect court costs, reasonable attorney's fees and other
36 costs incurred to collect the administrative penalty.

37 3. The Division may require any facility that violates any
38 provision of NRS 439B.410 or 449.029 to 449.2428, inclusive, *and*
39 *section 1.2 of this act* or any condition, standard or regulation
40 adopted by the Board to make any improvements necessary to
41 correct the violation.

42 4. Any money collected as administrative penalties pursuant to
43 paragraph (d) of subsection 1 must be accounted for separately and
44 used to administer and carry out the provisions of NRS 449.001 to
45 449.430, inclusive, *and section 1.2 of this act*, 449.435 to 449.530,



1 inclusive, and 449.760 and chapter 449A of NRS to protect the
2 health, safety, well-being and property of the patients and residents
3 of facilities in accordance with applicable state and federal standards
4 or for any other purpose authorized by the Legislature.

5 **Sec. 5.** (Deleted by amendment.)

6 **Sec. 6.** (Deleted by amendment.)

7 **Sec. 6.5.** NRS 449.240 is hereby amended to read as follows:

8 449.240 The district attorney of the county in which the facility
9 is located shall, upon application by the Division, institute and
10 conduct the prosecution of any action for violation of any provisions
11 of NRS 449.029 to 449.245, inclusive ~~[]~~, *and section 1.2 of this*
12 *act.*

13 **Sec. 7.** (Deleted by amendment.)

14 **Sec. 8.** NRS 450B.237 is hereby amended to read as follows:

15 450B.237 1. The board shall establish a program for treating
16 persons who require treatment for trauma and for transporting and
17 admitting such persons to centers for the treatment of trauma. The
18 program must provide for the development, operation and
19 maintenance of a system of communication to be used in
20 transporting such persons to the appropriate centers.

21 2. The State Board of Health shall adopt regulations which
22 establish the standards for the designation of hospitals as centers for
23 the treatment of trauma. The State Board of Health shall consider
24 the standards adopted by the American College of Surgeons for a
25 center for the treatment of trauma as a guide for such regulations.
26 The Administrator of the Division shall not approve a proposal to
27 designate a hospital as a center for the treatment of trauma unless
28 ~~[the]~~:

29 (a) *The hospital meets the standards established pursuant to this*
30 *subsection ~~[]~~; and*

31 (b) *The Administrator determines, after conducting a*
32 *comprehensive assessment of needs, that the proposed center for*
33 *the treatment of trauma will operate in an area that is*
34 *experiencing a shortage of trauma care. Such an assessment of*
35 *needs must include, without limitation, consideration of:*

36 (1) *The impact of the proposed center for the treatment of*
37 *trauma on the capacity of existing hospitals to provide for the*
38 *treatment of trauma;*

39 (2) *The number and locations of cases of trauma that have*
40 *occurred during the previous calendar year in the county in which*
41 *the proposed center for the treatment of trauma will be located*
42 *and the level of treatment that was required for those cases;*

43 (3) *Any identified need for an additional center for the*
44 *treatment of trauma in the county in which the proposed center*
45 *for the treatment of trauma will be located; and*



1 (4) *Any additional criteria recommended by the American*
2 *College of Surgeons or its successor organization, other than*
3 *criteria related to community support for the proposed trauma*
4 *center.*

5 3. Each district board of health in a county whose population is
6 700,000 or more shall adopt ~~[regulations]~~ :

7 (a) *Regulations* which establish the standards for the
8 designation of hospitals in the county as centers for the treatment of
9 trauma which are consistent with the regulations adopted by the
10 State Board of Health pursuant to subsection 2 ~~[]~~; and

11 (b) *A plan for a comprehensive trauma system concerning the*
12 *treatment of trauma in the county, which includes, without*
13 *limitation, consideration of the future trauma needs of the county,*
14 *consideration of and plans for the development and designation of*
15 *new centers for the treatment of trauma in the county based on the*
16 *demographics of the county and the manner in which the county*
17 *may most effectively provide trauma services to persons in the*
18 *county.*

19 4. A district board of health *in a county whose population is*
20 *700,000 or more* shall not approve a proposal to designate a hospital
21 as a center for the treatment of trauma unless ~~[the]~~ :

22 (a) *The* hospital meets the standards established pursuant to
23 ~~[this]~~ subsection ~~[]~~.

24 ~~— 4. — A proposal to designate a hospital located in a county whose~~
25 ~~population is 700,000 or more as a center for the treatment of~~
26 ~~trauma:~~

27 ~~— (a) — Must be approved by the Administrator of the Division and~~
28 ~~by the district board of health of the county in which the hospital is~~
29 ~~located; and~~

30 ~~— (b) — May not be approved unless the district board of health of~~
31 ~~the county in which the hospital is located has established and~~
32 ~~adopted a comprehensive trauma system plan concerning the~~
33 ~~treatment of trauma in the county, which includes, without~~
34 ~~limitation, consideration of the future trauma needs of the county,~~
35 ~~consideration of and plans for the development and designation of~~
36 ~~new centers for the treatment of trauma in the county based on the~~
37 ~~demographics of the county and the manner in which the county~~
38 ~~may most effectively provide trauma services to persons in the~~
39 ~~county.] 3;~~

40 (b) *The proposal has been approved by the Administrator of*
41 *the Division pursuant to subsection 2; and*

42 (c) *The district board of health concludes, based on the plan*
43 *adopted pursuant to paragraph (b) of subsection 3, that the*
44 *proposed center for the treatment of trauma will not negatively*



1 *impact the capacity of existing centers for the treatment of trauma*
2 *in the county.*

3 5. Upon approval by the Administrator of the Division and, if
4 the hospital is located in a county whose population is 700,000 or
5 more, the district board of health of the county in which the hospital
6 is located, of a proposal to designate a hospital as a center for the
7 treatment of trauma, the Administrator of the Division shall issue
8 written approval which designates the hospital as such a center. As a
9 condition of continuing designation *of* the hospital as a center for
10 the treatment of trauma, the hospital must comply with the
11 following requirements:

12 (a) The hospital must admit any injured person who requires
13 medical care.

14 (b) Any physician who provides treatment for trauma must be
15 qualified to provide that treatment.

16 (c) The hospital must maintain the standards specified in the
17 regulations adopted pursuant to subsections 2 and 3.

18 **Sec. 8.5.** NRS 654.190 is hereby amended to read as follows:

19 654.190 1. The Board may, after notice and an opportunity
20 for a hearing as required by law, impose an administrative fine of
21 not more than \$10,000 for each violation on, recover reasonable
22 investigative fees and costs incurred from, suspend, revoke, deny
23 the issuance or renewal of or place conditions on the license of, and
24 place on probation or impose any combination of the foregoing on
25 any licensee who:

26 (a) Is convicted of a felony relating to the practice of
27 administering a nursing facility or residential facility or of any
28 offense involving moral turpitude.

29 (b) Has obtained his or her license by the use of fraud or deceit.

30 (c) Violates any of the provisions of this chapter.

31 (d) Aids or abets any person in the violation of any of the
32 provisions of NRS 449.029 to 449.2428, inclusive, *and section 1.2*
33 *of this act* as those provisions pertain to a facility for skilled
34 nursing, facility for intermediate care or residential facility for
35 groups.

36 (e) Violates any regulation of the Board prescribing additional
37 standards of conduct for licensees, including, without limitation, a
38 code of ethics.

39 (f) Engages in conduct that violates the trust of a patient or
40 resident or exploits the relationship between the licensee and the
41 patient or resident for the financial or other gain of the licensee.

42 2. If a licensee requests a hearing pursuant to subsection 1, the
43 Board shall give the licensee written notice of a hearing pursuant to
44 NRS 233B.121 and 241.034. A licensee may waive, in writing, his
45 or her right to attend the hearing.



1 3. The Board may compel the attendance of witnesses or the
2 production of documents or objects by subpoena. The Board may
3 adopt regulations that set forth a procedure pursuant to which the
4 Chair of the Board may issue subpoenas on behalf of the Board.
5 Any person who is subpoenaed pursuant to this subsection may
6 request the Board to modify the terms of the subpoena or grant
7 additional time for compliance.

8 4. An order that imposes discipline and the findings of fact and
9 conclusions of law supporting that order are public records.

10 5. The expiration of a license by operation of law or by order
11 or decision of the Board or a court, or the voluntary surrender of a
12 license, does not deprive the Board of jurisdiction to proceed with
13 any investigation of, or action or disciplinary proceeding against, the
14 licensee or to render a decision suspending or revoking the license.

15 **Sec. 9.** This act becomes effective on July 1, 2019.

