## Amendment No. 357

Senate Amendment to Senate Bill No. 419	(BDR 40-748)							
Proposed by: Senate Committee on Health and Human Services								
Amends: Summary: No Title: Yes Preamble: No Joint Sponsorship: No	Digest: Yes							

Adoption of this amendment will MAINTAIN the unfunded mandate not requested by the affected local government to S.B. 419 (§§ 6, 28, 29, 45).

ASSEMBLY	AC	ΓΙΟΝ	Initial and Date	SENATE ACTION	ON Initial and Date
Adopted		Lost	1	Adopted	Lost
Concurred In		Not		Concurred In	Not
Receded		Not		Receded	Not

EXPLANATION: Matter in (1) *blue bold italics* is new language in the original bill; (2) variations of <u>green bold underlining</u> is language proposed to be added in this amendment; (3) <u>red strikethrough</u> is deleted language in the original bill; (4) <u>purple double strikethrough</u> is language proposed to be deleted in this amendment; (5) <u>orange double underlining</u> is deleted language in the original bill proposed to be retained in this amendment.

EWR/AAK Date: 4/24/2023

S.B. No. 419—Makes revisions relating to public health. (BDR 40-748)

## SENATE BILL NO. 419–COMMITTEE ON HEALTH AND HUMAN SERVICES

## MARCH 27, 2023

Referred to Committee on Health and Human Services

SUMMARY—Makes revisions relating to public health. (BDR 40-748)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact.

Effect on the State: Yes.

CONTAINS UNFUNDED MANDATE (§§ 6, 28, 29, 45) (NOT REQUESTED BY AFFECTED LOCAL GOVERNMENT)

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EXPLANATION – Matter in **bolded italics** is new; matter between brackets formitted materiall is material to be omitted.

AN ACT relating to public health; requiring the adoption of a framework for the electronic transmittal, maintenance and exchange of certain health information; requiring governmental entities, health care providers, insurers and insurance administrators to maintain, transmit and exchange health information electronically; <del>[requiring the suspension</del> of the license, certificate, registration or similar credential of] authorizing the imposition of certain discipline against a health care provider, insurer or insurance administrator that fails to comply with that requirement; removing authorization to establish a statewide health information exchange; clarifying that certain persons are immune from certain criminal and civil liability for transmitting, accessing, utilizing or disclosing electronic health records in accordance with existing law; establishing and prescribing the duties of the Chief Data Officer of the Nevada Innovation Hub, the Nevada Innovation Hub and the Medicaid Outreach Advisory Committee; authorizing a business to receive a partial abatement of certain taxes under certain conditions; <del>[authorizing certain persons to enroll in</del> Medicaid: requiring the establishment of certain programs to make health coverage more accessible to certain persons; requiring the Joint Interim Standing Committee on Health and Human Services to [study the feasibility of providing certain coverage under Medicaid;] conduct certain studies; requiring the Department of Health and Human Services to evaluate certain issues and take certain actions relating to its workforce; making an appropriation; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires the Director of the Department of Health and Human Services to adopt regulations governing health information exchanges and the transmittal, ownership, management, use and confidentiality of electronic health records. (NRS 439.587, 439.589) Section 6 of this bill requires the Director to prescribe by regulation a framework for the electronic maintenance, transmittal and exchange of electronic health records, prescriptions and health-related information. Section 6 requires that framework to establish standards for networks and technologies to be used to maintain, transmit and exchange health information, including standards that require: (1) the ability for patients to access and forward their records; and (2) the interoperability of such networks and technologies. Section 60 of this bill requires the Director to convene an advisory group to advise the Director in the adoption of those standards. With certain exceptions, sections 6, 28, 29, 45 and 63 of this bill require all governmental entities, health care providers, insurers, pharmacy benefit managers and other insurance administrators to maintain, transmit and exchange health information electronically in accordance with those standards and other provisions governing electronic health records, beginning on: (1) July 1, 2024, for hospitals and physician group practices; and (2) July 1, 2025, for governmental entities, other health care providers, insurers, pharmacy benefit managers and other insurance administrators. Section 57 of this bill appropriates money to award grants to certain providers of health care and health care facilities for the purposes of complying with that requirement. Sections 2 and 6 of this bill provide that a health care provider, insurer, pharmacy benefit manager or other insurance administrator that fails to comply with that requirement is not guilty of a misdemeanor. Instead, section 1 of this bill requires the Department [, after notice and the opportunity for a hearing.] to notify any regulatory body that has issued a license, certificate, registration, permit or similar credential to a health care provider, insurer, pharmacy benefit manager or other insurance administrator if the holder of the credential fails to comply with that requirement. [Sections] After receiving such notice, sections 9, 17, 45, 47, 50 and 53 of this bill [require] authorize a regulatory body to fimmediately suspend a credential issued to such a provider, insurerpharmacy benefit manager or other insurance administrator upon receiving such notice. Sections 15, 49 and 54 of this bill provide that such a suspension is not subject to certain procedure that ordinarily applies to the suspension of the license of a health care facility or the suspension of the certificate of authority of an insurer. Sections 1, 9, 17, 45, 47, 50 and 53 prescribe a similar process to reinstate a suspended credential if the Department determines that the holder has come into compliance with the requirement to maintain, transmit and exchange health information electronically.] impose corrective action or an administrative penalty on the health care provider, insurer, pharmacy benefit manager or other insurance administrator. Section 1 requires the Department to notify the relevant regulatory body if a health care provider, insurer, pharmacy benefit manager or other insurance administrator that was previously out of compliance with the requirement to maintain, transmit and exchange health information electronically comes into compliance with that requirement. Section 4 of this bill removes [: (1)] duplicative requirements concerning the adoption of regulations governing electronic health records. and (2)] Section 4.5 of this bill removes authorization for the Director to establish a statewide health information exchange [...], beginning on July 1, 2025. Sections [2-5,] 2-4, 5, 8, 10-14, 16, 44, 46, 48, 51, 52, 55 and 56 of this bill make conforming changes to indicate the proper placement of sections 1, 9, 47 and 50 in the Nevada Revised Statutes.

Existing law provides that a health care provider who with reasonable care relies upon an apparently genuine electronic health record accessed from a health information exchange to make a decision concerning the provision of health care to a patient is immune from civil or criminal liability for the decision if: (1) the electronic health record is inaccurate; (2) the inaccuracy was not caused by the health care provider; (3) the inaccuracy resulted in an inappropriate health care decision; and (4) the health care decision was appropriate based upon the information contained in the inaccurate electronic health record. (NRS 439.593) Section 7 of this bill expands this immunity from liability to also apply to any health care provider who transmits, accesses, utilizes or discloses an apparently genuine electronic health record or provides such an electronic health record to a patient.

Existing law provides that providing information to an electronic health record in accordance with existing law is not an unfair trade practice. (NRS 439.595) **Section 8** of this

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bill additionally provides that transmitting, accessing, utilizing or disclosing an electronic health record in accordance with existing law is not an unfair trade practice.

Sections 22-24 of this bill establish the Nevada Innovation Hub within the Department of Health and Human Services. Section 23 of this bill creates the position of Chief Data Officer to: (1) serve as the executive head of the Hub; (2) advise public health agencies regarding best practices for creating and maintaining data; and (3) coordinate planning concerning data analytics and transparency for the Department. Section 24 of this bill requires the Hub to: (1) obtain information relating to public health from public health agencies and other persons and entities; and (2) establish and maintain a program to collect, analyze, exchange and make available such information. Sections 24 and 27 of this bill provide for the confidentiality of personally identifiable information maintained by the Hub and information maintained by the Hub for which disclosure is prohibited by state or federal law. Section 25 of this bill makes a conforming change to indicate the proper placement of sections 22-24 in the Nevada Revised Statutes. [Section 61 of this bill requires the Chief Data Officer to submit a report to the Joint Interim Standing Committee on Health and Human Services concerning the policies and procedures of the Hub.]

Existing law authorizes the Office of Economic Development to approve an abatement or partial abatement of certain property taxes, business taxes and sales and use taxes in certain circumstances. (NRS 274.310-274.330, 360.750-360.754) Section 31 of this bill authorizes a person who intends to locate or expand a business [in an academic medical district] in the health care industry in this State to apply to the Office for a partial abatement of: (1) local sales and use taxes imposed on the purchase of tangible personal property used to provide health care or conduct scientific research; (2) certain property taxes imposed on the business; and (3) the excise tax on wages paid to employees performing services directly related to addressing critical medical and scientific needs, as defined by regulations adopted by the Office. Section 31 requires the Office to grant such an application if: (1) the applicant enters into an agreement authorizing the Office to conduct audits of the applicant and to remain in business in this State for a certain period of time; and (2) the Office finds that the business meets certain requirements relating to wages and benefits for employees and economic activity in this State. Additionally, if the applicant is requesting a partial abatement of certain taxes imposed for the benefit of public schools, section 31 requires the applicant to obtain the approval of a supermajority of the Board of Economic Development. Section 31 requires the Office, when authorizing abatements, to prioritize businesses that will serve certain underserved populations. Sections [35, 36 and 37] 35-37 of this bill establish the duration and amount of the abatements. Sections 18-20, 30 and 32-34 of this bill make various changes so that a partial abatement granted pursuant to section 31 is treated in the same manner as other similar abatements authorized by law.

Existing law authorizes a person who maintains or intends to locate a business in this State to apply to the Office for an abatement on certain taxes imposed on eligible machinery or equipment used by the business. (NRS 374.357) Section 38 of this bill provides that equipment used for medical treatment is not eligible machinery or equipment for that purpose, thereby authorizing a business to obtain an abatement for certain taxes imposed on such equipment pursuant to sections 31 and 35-37.

With certain exceptions, existing federal and state law prohibits a person or governmental entity from providing a public benefit to an alien who is not legally present in the United States, except where a state law affirmatively provides for such eligibility. (8 U.S.C. § 1621; NRS 422.065, 422A.085) Section 39 of this bill [affirmatively] requires the Director to [include in the State Plan for Medicaid authorization for any person who otherwise qualifies for Medicaid to enroll in Medicaid, regardless of his or her immigration or citizenship status.] provide coverage under Medicaid for persons who qualify for the federal Deferred Action for Childhood Arrivals Program and meet all requirements to be eligible for Medicaid, except for the requirements governing immigration status. Section 39 also requires the Director to establish programs to provide coverage for: (1) persons under 27 years of age who are not eligible for Medicaid because of their immigration status; and (2) prenatal, labor and delivery and postpartum care for mothers who are not eligible for Medicaid because of their immigration status. Section 43 of this bill removes the requirement that a person who is not a citizen or national of the United States must be a qualified alien under federal law to receive Medicaid. Section 26 of this bill makes a

conforming change to indicate the proper placement of section 39 in the Nevada Revised Statutes.

Under existing law, the Division of Welfare and Supportive Services of the Department administers provisions concerning applications for Medicaid and the Children's Health Insurance Program. (NRS 422A.3351, 422A.336) **Section 41** of this bill creates the Medicaid Outreach Advisory Committee within the Division. **Section 42** of this bill requires the Advisory Committee to: (1) advise the Department, the Division of Health Care Financing and Policy of the Department and the Division of Welfare and Supportive Services concerning outreach to, and maximizing enrollment in Medicaid and the Children's Health Insurance Program of, members of marginalized or underserved communities; and (2) annually post a report of the activities of the Advisory Committee on the Internet.

Existing law establishes the Silver State Health Insurance Exchange to facilitate the purchase of subsidized health plans by certain small employers and natural persons who are citizens of the United States or otherwise lawfully present in the United States. (Chapter 6951 of NRS) Section 54.3 of this bill requires Executive Director of the Exchange, in collaboration with the Director of the Department of Health and Human Services, to apply for a federal waiver to authorize any natural person to purchase a qualified health plan on the Exchange, regardless of his or her immigration status, if the natural person otherwise qualifies to purchase such a plan on the Exchange. Section 54.6 of this bill makes a conforming change to indicate that the waiver authorizes natural persons who are not lawfully present in the United States to purchase such qualified health plans.

Section 58 of this bill requires the Joint Interim Standing Committee on Health and Human Services to study, during the 2023-2024 interim, the feasibility of including in the State Plan for Medicaid coverage of digital health products and the procedures for and costs of providing such coverage. Section 58.5 of this bill requires the Joint Interim Standing Committee to study, during the 2023-2024 interim: (1) the feasibility of and necessary steps for creating a natural persons index for this State; and (2) procedures governing data registries and ways to streamline the collection of data and reduce the burden of reporting requirements applicable to providers of health care. Section 59 of this bill requires the Department of Health and Human Services, during the 2023-2024 interim, to: (1) evaluate the workforce of the Department to determine whether adding, eliminating or revising the salary for any position within the Department would increase the effectiveness or efficiency of the operations of the Department; and (2) take any action recommended by the evaluation which does not require legislation unless the Director determines that the action is not feasible or advisable. Section 59 also requires the Department to submit to the Legislature a report concerning the evaluation and actions resulting from the evaluation.

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

**Section 1.** Chapter 439 of NRS is hereby amended by adding thereto a new section to read as follows:

- 1. The Department shall, <del>[after notice and the opportunity for a hearing,]</del> notify each regulatory body of this State that has issued a current, valid license to a licensed provider or insurer if:
- (a) The Department determines that the licensed provider or insurer is not in compliance with the requirements of subsection 4 of NRS 439.589; and
  - (b) The licensed provider or insurer:
- (1) Is not exempt from those requirements pursuant to subsection 5 of NRS 439.589; and
- (2) Has not received a waiver of those requirements pursuant to subsection 6 of NRS 439.589.
- 2. If the Department determines that a fholder of a license which has been suspended pursuant to NRS 629.051 or section 9, 17, 47, 50 or 53 of this act]

licensed provider or insurer for which notice was previously provided pursuant to subsection 1 has come into compliance with the requirements of subsection 4 of NRS 439.589, the Department shall immediately notify the regulatory body that issued the license.

- 3. [The Director shall adopt regulations to earry out the provisions of this section. Those regulations must prescribe:
- (a) The required contents of any notice provided to subsection 1 to a licensed provider or insurer:
- (b) The amount of time after the provision of such a notice within which a licensed provider or insurer must come into compliance with the requirements of subsection 4 of NRS 439.589 or request a hearing before the Department will notify any regulatory body of this State that issued a license to the licensed provider or insurer: and
- ' (e) The process for verifying compliance with requirements of subsection 4 of NRS 439.589 for the purposes of paragraph (b) or subsection 2.

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- 4.] As used in this section:
  (a) "License" means any license, certificate, registration, permit or similar type of authorization to practice an occupation or profession or engage in a business in this State issued to a licensed provider or insurer.
  - (b) "Licensed provider or insurer" means:
    - (1) A medical facility licensed pursuant to chapter 449 of NRS:
- (2) The holder of a permit to operate an ambulance, an air ambulance or a vehicle of a fire-fighting agency pursuant to chapter 450B of NRS;
- (3) A provider of health care, as defined in NRS 629.031, who is licensed pursuant to title 54 of NRS; or
  - (4) Any person licensed pursuant to title 57 of NRS.
  - (c) "Regulatory body" means any governmental entity that issues a license.
  - **Sec. 2.** NRS 439.580 is hereby amended to read as follows:
- 439.580 1. Any local health officer or a deputy of a local health officer who neglects or fails to enforce the provisions of this chapter in his or her jurisdiction, or neglects or refuses to perform any of the duties imposed upon him or her by this chapter or by the instructions and directions of the Division shall be punished by a fine of not more than \$250.
- 2. [Each] Except as otherwise provided in NRS 439.589, each person who violates any of the provisions of this chapter or refuses or neglects to obey any lawful order, rule or regulation of the:
- (a) State Board of Health or violates any rule or regulation approved by the State Board of Health pursuant to NRS 439.350, 439.366, 439.410 and 439.460; or
- (b) Director adopted pursuant to NRS 439.538 or 439.581 to 439.595, inclusive, and section 1 of this act,
- → is guilty of a misdemeanor.
  - **Sec. 3.** NRS 439.581 is hereby amended to read as follows:
- 439.581 As used in NRS 439.581 to 439.595, inclusive, *and section 1 of this* act, unless the context otherwise requires, the words and terms defined in NRS 439.582 to 439.585, inclusive, have the meanings ascribed to them in those sections.
  - **Sec. 4.** NRS 439.587 is hereby amended to read as follows:
- 439.587 1. The Director is the state authority for health information technology. [The Director shall:
- (a) Ensure that a health information exchange complies with the specifications and protocols for exchanging electronic health records, health related information and related data prescribed pursuant to the provisions of the Health Information

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Technology for Economic and Clinical Health Act of 2009, 42 U.S.C. §§ 300ii et seg, and 17901 et seg,, and other applicable federal and state law:

- (b) Encourage the use of a health information exchange by health care providers, payers and patients;
- (c) Prescribe by regulation standards for the electronic transmittal of electronic health records, prescriptions, health related information, electronic signatures and requirements for electronic equivalents of written entries or written approvals in accordance with federal law;
- (d) Prescribe by regulation rules governing the ownership, management and use of electronic health records, health related information and related data retained or shared by a health information exchange; and
- (e) Prescribe by regulation, in consultation with the State Board of Pharmacy, standards for the electronic transmission of prior authorizations for prescription medication using a health information exchange.]
- 2. The Director may establish or contract with not more than one health information exchange to serve as the statewide health information exchange to be responsible for compiling statewide master indexes of patients, health care providers and payers. The Director may by regulation prescribe the requirements for a statewide health information exchange, including, without limitation, the procedure by which any patient, health care provider or payer master index created pursuant to any contract is transferred to the State upon termination of the contract.
- The Director may enter into contracts, apply for and accept available gifts, grants and donations, and adopt such regulations as are necessary to carry out the provisions of NRS 439.581 to 439.595, inclusive , and section 1 of this act.
  - Sec. 4.5. NRS 439.587 is hereby amended to read as follows:
- 439.587 1. The Director is the state authority for health information technology.
- 2. The Director may establish or contract with not more than one health information exchange to serve as the statewide health information exchange to be responsible for compiling statewide master indexes of patients, health care providers and payers. The Director may by regulation prescribe the requirements for a statewide health information exchange, including, without limitation, the procedure by which any patient, health care provider or payer master index created pursuant to any contract is transferred to the State upon termination of the contract.
- 3.1 The Director may enter into contracts, apply for and accept available gifts, grants and donations, and adopt such regulations as are necessary to carry out the provisions of NRS 439.581 to 439.595, inclusive, and section 1 of this act.
  - **Sec. 5.** NRS 439.588 is hereby amended to read as follows:
- 439.588 1. A health information exchange shall not operate in this State without first obtaining certification as provided in subsection 2.
- The Director shall by regulation establish the manner in which a health information exchange may apply for certification and the requirements for granting such certification, which must include, without limitation, that the health information exchange demonstrate its financial and operational sustainability, adherence to the privacy, security and patient consent standards adopted pursuant to NRS 439.589 and capacity for interoperability with any other health information exchange certified pursuant to this section.
- 3. The Director may deny an application for certification or may suspend or revoke any certification issued pursuant to subsection 2 for failure to comply with the provisions of NRS 439.581 to 439.595, inclusive, and section 1 of this act or the regulations adopted pursuant thereto or any applicable federal or state law.
- 4. When the Director intends to deny, suspend or revoke a certification, he or she shall give reasonable notice to all parties by certified mail. The notice must

contain the legal authority, jurisdiction and reasons for the action to be taken. A health information exchange that wishes to contest the action of the Director must file an appeal with the Director.

- 5. The Director shall adopt regulations establishing the manner in which a person may file a complaint with the Director regarding a violation of the provisions of this section.
- 6. The Director may impose an administrative fine against a health information exchange which operates in this State without holding a certification in an amount established by the Director by regulation. The Director shall afford a health information exchange so fined an opportunity for a hearing pursuant to the provisions of NRS 233B.121.
- 7. The Director may adopt such regulations as he or she determines are necessary to carry out the provisions of this section.
  - **Sec. 6.** NRS 439.589 is hereby amended to read as follows:
- 439.589 1. The Director, in consultation with health care providers, third parties and other interested persons and entities, shall by regulation prescribe a framework for the electronic maintenance, transmittal and exchange of electronic health records, prescriptions, health-related information and electronic signatures and requirements for electronic equivalents of written entries or written approvals in accordance with federal law. The regulations must:
  - (a) Establish standards [:
- (a)] for networks and technologies to be used to maintain, transmit and exchange health information, including, without limitation, standards:
  - (1) That require:
- (I) The use of networks and technologies that allow patients to access electronic health records directly from the health care provider of the patient and forward such electronic health records electronically to other persons and entities; and
- (II) The interoperability of such networks and technologies in accordance with the applicable standards for the interoperability of Qualified Health Information Networks prescribed by the Office of the National Coordinator for Health Information Technology of the United States Department of Health and Human Services;
- (2) To ensure that electronic health records retained or shared [by any health information exchange] are secure;
- [(b)] (3) To maintain the confidentiality of electronic health records and health-related information, including, without limitation, standards to maintain the confidentiality of electronic health records relating to a child who has received health care services without the consent of a parent or guardian and which ensure that a child's right to access such health care services is not impaired;
- **((e))** (4) To ensure the privacy of individually identifiable health information, including, without limitation, standards to ensure the privacy of information relating to a child who has received health care services without the consent of a parent or guardian;
- [(d)] (5) For obtaining consent from a patient before retrieving the patient's health records from a health information exchange, including, without limitation, standards for obtaining such consent from a child who has received health care services without the consent of a parent or guardian;
- [(e)] (6) For making any necessary corrections to information or records [retained or shared by a health information exchange; and
- (7) For notifying a patient if the confidentiality of information contained in an electronic health record of the patient is breached [];

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- (8) Governing the ownership, management and use of electronic health records, health-related information and related data; and
- (9) For the electronic transmission of prior authorizations for prescription medication:
- (b) Ensure compliance with the specifications and protocols for exchanging electronic health records, health-related information and related data prescribed pursuant to the provisions of the Health Information Technology for Economic and Clinical Health Act, 42 U.S.C. §§ 300jj et seq. and 17901 et seq., and other applicable federal and state law; and
- (c) Be based on nationally recognized best practices for maintaining, transmitting and exchanging health information electronically.
- 2. The standards prescribed pursuant to this section must include, without limitation:
- (a) Requirements for the creation, maintenance and transmittal of electronic health records:
- (b) Requirements for protecting confidentiality, including control over, access to and the collection, organization and maintenance of electronic health records, health-related information and individually identifiable health information:
- (c) Requirements for the manner in which a patient may, through a health care provider who participates in the sharing of health records using a health information exchange, revoke his or her consent for a health care provider to retrieve the patient's health records from the health information exchange;
- (d) A secure and traceable electronic audit system for identifying access points and trails to electronic health records and health information exchanges; and
- (e) Any other requirements necessary to comply with all applicable federal laws relating to electronic health records, health-related information, health information exchanges and the security and confidentiality of such records and exchanges.
- 3. The regulations adopted pursuant to this section must not require any person or entity to use a health information exchange.
- 4. Except as otherwise provided in subsections 5 and 6, the Department and the divisions thereof, other state and local governmental entities, health care providers, third parties, pharmacy benefit managers and other entities licensed or certified pursuant to title 57 of NRS shall maintain, transmit and exchange health information in accordance with the regulations adopted pursuant to this section, the provisions of NRS 439.581 to 439.595, inclusive, and section 1 of this act, and any other regulations adopted pursuant thereto.
- The Federal Government and employees thereof, a provider of health coverage for federal employees, a provider of health coverage that is subject to the Employee Retirement Income Security Act of 1974, 29 U.S.C. §§ 1001 et seq., or a Taft-Hartley trust formed pursuant to 29 U.S.C. § 186(c)(5) is not required to but may maintain, transmit and exchange electronic information in accordance with the regulations adopted pursuant to this section.
- 6. A health care provider may apply to the Department for a waiver from the provisions of subsection 4 on the basis that the health care provider does not have the infrastructure necessary to comply with those provisions, including, without limitation, because the health care provider does not have access to the Internet. The Department shall grant a waiver if it determines that:
- (a) The health care provider does not currently have the infrastructure necessary to comply with the provisions of subsection 4; and
- (b) Obtaining such infrastructure is not reasonably practicable, including, without limitation, because the cost of such infrastructure would make it difficult for the health care provider to continue to operate.

- 7. A violation of the provisions of this section or any regulations adopted 2 pursuant thereto is not a misdemeanor.
  - 8. As used in this section:

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- (a) "Pharmacy benefit manager" has the meaning ascribed to it in NRS 683A.174.
- (b) "Third party" means any insurer, governmental entity or other organization providing health coverage or benefits in accordance with state or federal law.
  - **Sec. 7.** NRS 439.593 is hereby amended to read as follows:
- 439.593 A health care provider who with reasonable care *transmits*, *accesses*, utilizes, discloses, relies upon or provides to a patient an apparently genuine electronic health record accessed [from a health information exchange to make a decision concerning the provision of health care to a patient] in accordance with NRS 439.581 to 439.595, inclusive, and section 1 of this act, and the regulations adopted pursuant thereto is immune from civil or criminal liability for [the] any decision concerning the provision of health care to the patient and any civil or criminal liability resulting from the provision of the record to a patient if:
  - The electronic health record is inaccurate:
  - The inaccuracy was not caused by the health care provider; 2.
  - 3. The inaccuracy resulted in an inappropriate health care decision; and
- 4. The health care decision was appropriate based upon the information contained in the inaccurate electronic health record.
  - **Sec. 8.** NRS 439.595 is hereby amended to read as follows:
- 439.595 Providing information to , transmitting, accessing, utilizing or disclosing an electronic health record or participating in a health information exchange in accordance with NRS 439.581 to 439.595, inclusive, and section 1 of this act does not constitute an unfair trade practice pursuant to chapter 598A or 686A of NRS.
- **Sec. 9.** Chapter 449 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. If the Division receives notification from the Department of Health and Human Services pursuant to section 1 of this act that \[ \in \]
- 1. A] a medical facility licensed pursuant to this chapter is not in compliance with the requirements of subsection 4 of NRS 439.589, the Division [shall immediately suspend the license of the facility until the license is reinstated pursuant to subsection 2.
- 2. A facility whose license has been suspended pursuant to subsection 1 has come into compliance with the requirements of subsection 4 of NRS 439.589, the Division shall immediately reinstate the license of the facility.] may, after notice and the opportunity for a hearing in accordance with the provisions of this chapter, require corrective action or impose an administrative penalty in the amount prescribed by NRS 449.163.
- 2. The Division shall not suspend or revoke a license for failure to comply with the requirements of subsection 4 of NRS 439.589.
- Sec. 10. NRS 449.029 is hereby amended to read as follows: 449.029 As used in NRS 449.029 to 449.240, inclusive, *and section 9 of this* act, unless the context otherwise requires, "medical facility" has the meaning ascribed to it in NRS 449.0151 and includes a program of hospice care described in NRS 449.196.
  - **Sec. 11.** NRS 449.0301 is hereby amended to read as follows:
- 449.0301 The provisions of NRS 449.029 to 449.2428, inclusive, *and section* **9** of this act do not apply to:

- 1. Any facility conducted by and for the adherents of any church or religious denomination for the purpose of providing facilities for the care and treatment of the sick who depend solely upon spiritual means through prayer for healing in the practice of the religion of the church or denomination, except that such a facility shall comply with all regulations relative to sanitation and safety applicable to other facilities of a similar category.
  - 2. Foster homes as defined in NRS 424.014.
- 3. Any medical facility, facility for the dependent or facility which is otherwise required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed that is operated and maintained by the United States Government or an agency thereof.
  - **Sec. 12.** NRS 449.0302 is hereby amended to read as follows:
  - 449.0302 1. The Board shall adopt:
- (a) Licensing standards for each class of medical facility or facility for the dependent covered by NRS 449.029 to 449.2428, inclusive, *and section 9 of this act* and for programs of hospice care.
  - (b) Regulations governing the licensing of such facilities and programs.
- (c) Regulations governing the procedure and standards for granting an extension of the time for which a natural person may provide certain care in his or her home without being considered a residential facility for groups pursuant to NRS 449.017. The regulations must require that such grants are effective only if made in writing.
- (d) Regulations establishing a procedure for the indemnification by the Division, from the amount of any surety bond or other obligation filed or deposited by a facility for refractive surgery pursuant to NRS 449.068 or 449.069, of a patient of the facility who has sustained any damages as a result of the bankruptcy of or any breach of contract by the facility.
- (e) Regulations that prescribe the specific types of discrimination prohibited by NRS 449.101.
- (f) Regulations requiring a hospital or independent center for emergency medical care to provide training to each employee who provides care to victims of sexual assault or attempted sexual assault concerning appropriate care for such persons, including, without limitation, training concerning the requirements of NRS 449.1885.
- (g) Any other regulations as it deems necessary or convenient to carry out the provisions of NRS 449.029 to 449.2428, inclusive [4], and section 9 of this act.
- 2. The Board shall adopt separate regulations governing the licensing and operation of:
  - (a) Facilities for the care of adults during the day; and
  - (b) Residential facilities for groups,
- → which provide care to persons with Alzheimer's disease or other severe dementia, as described in paragraph (a) of subsection 2 of NRS 449.1845.
  - 3. The Board shall adopt separate regulations for:
- (a) The licensure of rural hospitals which take into consideration the unique problems of operating such a facility in a rural area.
- (b) The licensure of facilities for refractive surgery which take into consideration the unique factors of operating such a facility.
- (c) The licensure of mobile units which take into consideration the unique factors of operating a facility that is not in a fixed location.
- 4. The Board shall require that the practices and policies of each medical facility or facility for the dependent provide adequately for the protection of the health, safety and physical, moral and mental well-being of each person accommodated in the facility.

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- 5. In addition to the training requirements prescribed pursuant to NRS 449.093, the Board shall establish minimum qualifications for administrators and employees of residential facilities for groups. In establishing the qualifications, the Board shall consider the related standards set by nationally recognized organizations which accredit such facilities.
- 6. The Board shall adopt separate regulations regarding the assistance which may be given pursuant to NRS 453.375 and 454.213 to an ultimate user of controlled substances or dangerous drugs by employees of residential facilities for groups. The regulations must require at least the following conditions before such assistance may be given:
- (a) The ultimate user's physical and mental condition is stable and is following a predictable course.
- (b) The amount of the medication prescribed is at a maintenance level and does not require a daily assessment.
- (c) A written plan of care by a physician or registered nurse has been established that:
- (1) Addresses possession and assistance in the administration of the medication; and
- (2) Includes a plan, which has been prepared under the supervision of a registered nurse or licensed pharmacist, for emergency intervention if an adverse condition results.
- (d) Except as otherwise authorized by the regulations adopted pursuant to NRS 449.0304, the prescribed medication is not administered by injection or intravenously.
- (e) The employee has successfully completed training and examination approved by the Division regarding the authorized manner of assistance.
- 7. The Board shall adopt separate regulations governing the licensing and operation of residential facilities for groups which provide assisted living services. The Board shall not allow the licensing of a facility as a residential facility for groups which provides assisted living services and a residential facility for groups shall not claim that it provides "assisted living services" unless:
- (a) Before authorizing a person to move into the facility, the facility makes a full written disclosure to the person regarding what services of personalized care will be available to the person and the amount that will be charged for those services throughout the resident's stay at the facility.
  - (b) The residents of the facility reside in their own living units which:
    - (1) Except as otherwise provided in subsection 8, contain toilet facilities;
    - (2) Contain a sleeping area or bedroom; and
    - (3) Are shared with another occupant only upon consent of both occupants.
- (c) The facility provides personalized care to the residents of the facility and the general approach to operating the facility incorporates these core principles:
- (1) The facility is designed to create a residential environment that actively supports and promotes each resident's quality of life and right to privacy;
- (2) The facility is committed to offering high-quality supportive services that are developed by the facility in collaboration with the resident to meet the resident's individual needs;
- (3) The facility provides a variety of creative and innovative services that emphasize the particular needs of each individual resident and the resident's personal choice of lifestyle;
- (4) The operation of the facility and its interaction with its residents supports, to the maximum extent possible, each resident's need for autonomy and the right to make decisions regarding his or her own life;

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- (5) The operation of the facility is designed to foster a social climate that allows the resident to develop and maintain personal relationships with fellow residents and with persons in the general community;
- (6) The facility is designed to minimize and is operated in a manner which minimizes the need for its residents to move out of the facility as their respective physical and mental conditions change over time; and
- (7) The facility is operated in such a manner as to foster a culture that provides a high-quality environment for the residents, their families, the staff, any volunteers and the community at large.
- The Division may grant an exception from the requirement of subparagraph (1) of paragraph (b) of subsection 7 to a facility which is licensed as a residential facility for groups on or before July 1, 2005, and which is authorized to have 10 or fewer beds and was originally constructed as a single-family dwelling if the Division finds that:
- (a) Strict application of that requirement would result in economic hardship to the facility requesting the exception; and
  - (b) The exception, if granted, would not:
- (1) Cause substantial detriment to the health or welfare of any resident of the facility:
  - (2) Result in more than two residents sharing a toilet facility; or
  - (3) Otherwise impair substantially the purpose of that requirement.
- The Board shall, if it determines necessary, adopt regulations and requirements to ensure that each residential facility for groups and its staff are prepared to respond to an emergency, including, without limitation:
- (a) The adoption of plans to respond to a natural disaster and other types of emergency situations, including, without limitation, an emergency involving fire;
- (b) The adoption of plans to provide for the evacuation of a residential facility for groups in an emergency, including, without limitation, plans to ensure that nonambulatory patients may be evacuated;
- (c) Educating the residents of residential facilities for groups concerning the plans adopted pursuant to paragraphs (a) and (b); and
- (d) Posting the plans or a summary of the plans adopted pursuant to paragraphs (a) and (b) in a conspicuous place in each residential facility for groups.
- The regulations governing the licensing and operation of facilities for transitional living for released offenders must provide for the licensure of at least three different types of facilities, including, without limitation:
  - (a) Facilities that only provide a housing and living environment;
- (b) Facilities that provide or arrange for the provision of supportive services for residents of the facility to assist the residents with reintegration into the community, in addition to providing a housing and living environment; and
- (c) Facilities that provide or arrange for the provision of programs for alcohol and other substance use disorders, in addition to providing a housing and living environment and providing or arranging for the provision of other supportive services.
- → The regulations must provide that if a facility was originally constructed as a single-family dwelling, the facility must not be authorized for more than eight beds.
- The Board shall adopt regulations applicable to providers of communitybased living arrangement services which:
- (a) Except as otherwise provided in paragraph (b), require a natural person responsible for the operation of a provider of community-based living arrangement services and each employee of a provider of community-based living arrangement services who supervises or provides support to recipients of community-based living arrangement services to complete training concerning the provision of

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community-based living arrangement services to persons with mental illness and continuing education concerning the particular population served by the provider;

(b) Exempt a person licensed or certified pursuant to title 54 of NRS from the requirements prescribed pursuant to paragraph (a) if the Board determines that the person is required to receive training and continuing education substantially equivalent to that prescribed pursuant to that paragraph;

(c) Require a natural person responsible for the operation of a provider of community-based living arrangement services to receive training concerning the provisions of title 53 of NRS applicable to the provision of community-based living

arrangement services; and

- (d) Require an applicant for a license to provide community-based living arrangement services to post a surety bond in an amount equal to the operating expenses of the applicant for 2 months, place that amount in escrow or take another action prescribed by the Division to ensure that, if the applicant becomes insolvent, recipients of community-based living arrangement services from the applicant may continue to receive community-based living arrangement services for 2 months at the expense of the applicant.
- The Board shall adopt separate regulations governing the licensing and operation of freestanding birthing centers. Such regulations must:
- (a) Align with the standards established by the American Association of Birth Centers, or its successor organization, the accrediting body of the Commission for the Accreditation of Birth Centers, or its successor organization, or another nationally recognized organization for accrediting freestanding birthing centers; and
- (b) Allow the provision of supervised training to providers of health care, as appropriate, at a freestanding birthing center.
- 13. As used in this section, "living unit" means an individual private accommodation designated for a resident within the facility.
  - **Sec. 13.** NRS 449.160 is hereby amended to read as follows:
- 449.160 1. The Division may deny an application for a license or may suspend or revoke any license issued under the provisions of NRS 449.029 to 449.2428, inclusive, *and section 9 of this act* upon any of the following grounds:
- (a) Violation by the applicant or the licensee of any of the provisions of NRS 439B.410 or 449.029 to 449.245, inclusive, and section 9 of this act, or of any other law of this State or of the standards, rules and regulations adopted thereunder.
  - (b) Aiding, abetting or permitting the commission of any illegal act.
- (c) Conduct inimical to the public health, morals, welfare and safety of the people of the State of Nevada in the maintenance and operation of the premises for which a license is issued.
- (d) Conduct or practice detrimental to the health or safety of the occupants or employees of the facility.
- (e) Failure of the applicant to obtain written approval from the Director of the Department of Health and Human Services as required by NRS 439A.100 or as provided in any regulation adopted pursuant to NRS 449.001 to 449.430, inclusive, and section 9 of this act, and 449.435 to 449.531, inclusive, and chapter 449A of NRS if such approval is required.
- (f) Failure to comply with the provisions of NRS 441A.315 and any regulations adopted pursuant thereto or NRS 449.2486.
  - (g) Violation of the provisions of NRS 458.112.
- 2. In addition to the provisions of subsection 1, the Division may revoke a license to operate a facility for the dependent if, with respect to that facility, the licensee that operates the facility, or an agent or employee of the licensee:
  - (a) Is convicted of violating any of the provisions of NRS 202.470;

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- (b) Is ordered to but fails to abate a nuisance pursuant to NRS 244.360, 244.3603 or 268.4124; or
- (c) Is ordered by the appropriate governmental agency to correct a violation of a building, safety or health code or regulation but fails to correct the violation.
- The Division shall maintain a log of any complaints that it receives relating to activities for which the Division may revoke the license to operate a facility for the dependent pursuant to subsection 2. The Division shall provide to a facility for the care of adults during the day:
- (a) A summary of a complaint against the facility if the investigation of the complaint by the Division either substantiates the complaint or is inconclusive:
  - (b) A report of any investigation conducted with respect to the complaint; and
  - (c) A report of any disciplinary action taken against the facility.
- → The facility shall make the information available to the public pursuant to NRS 449.2486.
- 4. On or before February 1 of each odd-numbered year, the Division shall submit to the Director of the Legislative Counsel Bureau a written report setting forth, for the previous biennium:
- (a) Any complaints included in the log maintained by the Division pursuant to subsection 3: and
  - (b) Any disciplinary actions taken by the Division pursuant to subsection 2.
- Sec. 14. NRS 449.163 is hereby amended to read as follows: 449.163

  1. In addition to the payment of the amount required by NRS 449.0308, if a medical facility, facility for the dependent or facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed violates any provision related to its licensure, including any provision of NRS 439B.410 or 449.029 to 449.2428, inclusive, and section 9 of this act or any condition, standard or regulation adopted by the Board, the Division, in accordance with the regulations adopted pursuant to NRS 449.165, may:
- (a) Prohibit the facility from admitting any patient until it determines that the facility has corrected the violation:
- (b) Limit the occupancy of the facility to the number of beds occupied when the violation occurred, until it determines that the facility has corrected the violation:
- (c) If the license of the facility limits the occupancy of the facility and the facility has exceeded the approved occupancy, require the facility, at its own expense, to move patients to another facility that is licensed;
- (d) Impose an administrative penalty of not more than \$5,000 per day for each violation, together with interest thereon at a rate not to exceed 10 percent per annum: and
- (e) Appoint temporary management to oversee the operation of the facility and to ensure the health and safety of the patients of the facility, until:
- (1) It determines that the facility has corrected the violation and has management which is capable of ensuring continued compliance with the applicable statutes, conditions, standards and regulations; or
  - (2) Improvements are made to correct the violation.
- If the facility fails to pay any administrative penalty imposed pursuant to paragraph (d) of subsection 1, the Division may:
- (a) Suspend the license of the facility until the administrative penalty is paid;
- (b) Collect court costs, reasonable attorney's fees and other costs incurred to collect the administrative penalty.
- 3. The Division may require any facility that violates any provision of NRS 439B.410 or 449.029 to 449.2428, inclusive, and section 9 of this act or any

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condition, standard or regulation adopted by the Board to make any improvements necessary to correct the violation.

4. Any money collected as administrative penalties pursuant to paragraph (d) of subsection 1 must be accounted for separately and used to administer and carry out the provisions of NRS 449.001 to 449.430, inclusive, *and section 9 of this act*, 449.435 to 449.531, inclusive, and chapter 449A of NRS to protect the health, safety, well-being and property of the patients and residents of facilities in accordance with applicable state and federal standards or for any other purpose authorized by the Legislature.

Sec. 15. [NRS 449.170 is hereby amended to read as follows:

449.170 I. [When] Except where immediate suspension is required by section 9 of this act, when the Division intends to deny, suspend or revoke a license, or impose any sanction prescribed by NRS 449.163, it shall give reasonable notice to all parties by certified mail. The notice must contain the legal authority, jurisdiction and reasons for the action to be taken. Notice is not required if the Division finds that the public health requires immediate action. In that case, it may order a summary suspension of a license pursuant to this section and NRS 233B.127 or impose any sanction prescribed by NRS 449.163, pending proceedings for revocation or other action.

- 2. If a person wants to contest the action of the Division, the person must file an appeal pursuant to regulations adopted by the Board.
- 3. Upon receiving notice of an appeal, the Division shall hold a hearing pursuant to regulations adopted by the Board.
- 4. The Board shall adopt such regulations as are necessary to carry out the provisions of this section.] (Deleted by amendment.)
  - **Sec. 16.** NRS 449.240 is hereby amended to read as follows:
- 449.240 The district attorney of the county in which the facility is located shall, upon application by the Division, institute and conduct the prosecution of any action for violation of any provisions of NRS 449.029 to 449.245, inclusive [...], and section 9 of this act.
- **Sec. 17.** Chapter 450B of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. If the health authority receives notification from the Department of Health and Human Services pursuant to section 1 of this act that !-
- 1. The the holder of a permit to operate an ambulance, air ambulance or vehicle of a fire-fighting agency is not in compliance with the requirements of subsection 4 of NRS 439.589, the health authority [shall immediately suspend the permit until the permit is reinstated pursuant to subsection 2.
- 2. The holder of a permit to operate an ambulance, air ambulance or vehicle of a fire fighting agency which has been suspended pursuant to subsection 1 has come into compliance with the requirements of subsection 4 of NRS 439.589, the health authority shall immediately reinstate the permit.] may, after notice and the opportunity for a hearing in accordance with the provisions of this chapter, require corrective action or impose an administrative penalty in an amount established by regulation of the board.
- 2. The health authority shall not suspend or revoke a permit for failure to comply with the requirements of subsection 4 of NRS 439.589.
  - **Sec. 18.** NRS 218D.355 is hereby amended to read as follows:
- 218D.355 1. Except as otherwise provided in NRS 360.753, 360.754, 360.893 and 360.965 [...] and section 31 of this act, any state legislation enacted on or after July 1, 2012, which authorizes or requires the Office of Economic Development to approve any abatement of taxes or increases the amount of any abatement of taxes which the Office is authorized or required to approve:

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- (a) Expires by limitation 10 years after the effective date of that legislation.
- (b) Does not apply to:
- (1) Any taxes imposed pursuant to NRS 374.110 and 374.111 or 374.190 and 374.191; or
  - (2) Any entity that receives:
- (I) Any funding from a governmental entity, other than any private activity bonds as defined in 26 U.S.C. § 141; or
- (II) Any real or personal property from a governmental entity at no cost or at a reduced cost.
- (c) Requires each recipient of the abatement to submit to the Department of Taxation, on or before the last day of each even-numbered year, a report on whether the recipient is in compliance with the terms of the abatement. The Department of Taxation shall establish a form for the report and may adopt such regulations as it determines to be appropriate to carry out this paragraph. The report must include, without limitation:
  - (1) The date the recipient commenced operation in this State:
- (2) The number of employees actually employed by the recipient and the average hourly wage of those employees:
- (3) An accounting of any fees paid by the recipient to the State and to local governmental entities;
- (4) An accounting of the property taxes paid by the recipient and the amount of those taxes that would have been due if not for the abatement;
- (5) An accounting of the sales and use taxes paid by the recipient and the amount of those taxes that would have been due if not for the abatement:
- (6) An accounting of the total capital investment made in connection with the project to which the abatement applies; and
- (7) An accounting of the total investment in personal property made in connection with the project to which the abatement applies.
- 2. On or before January 15 of each odd-numbered year, the Department of Taxation shall:
- (a) Based upon the information submitted to the Department of Taxation pursuant to paragraph (c) of subsection 1, prepare a written report of its findings regarding whether the costs of the abatement exceed the benefits of the abatement; and
  - (b) Submit the report to the Director for transmittal to the Legislature.
  - **Sec. 19.** NRS 231.0685 is hereby amended to read as follows:
- 231.0685 The Office shall, on or before January 15 of each odd-numbered year, prepare and submit to the Director of the Legislative Counsel Bureau for transmission to the Legislature a report concerning the abatements from taxation that the Office approved pursuant to NRS 274.310, 274.320, 274.330, 360.750, 360.752, 360.753 or 360.754 : or section 31 of this act. The report must set forth, for each abatement from taxation that the Office approved during the fiscal years which are 3 fiscal years and 6 fiscal years immediately preceding the submission of the report:
  - 1. The dollar amount of the abatement:
  - The location of the business for which the abatement was approved;
  - The value of infrastructure included as an incentive for the business;
- If applicable, the number of employees that the business for which the abatement was approved employs or will employ;
- Whether the business for which the abatement was approved is a new business or an existing business;

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- 6. The economic sector in which the business operates, the number of primary jobs related to the business, the average wage paid to employees of the business and the assessed values of personal property and real property of the business;
- 7. Any information concerning whether the business for which the abatement was approved participates or has participated in a program of workforce development, as defined in NRS 231.146, implemented by the Executive Director;
  - 8. Any other information that the Office determines to be useful.
  - **Sec. 20.** NRS 231A.170 is hereby amended to read as follows:
- 231A.170 1. For the purpose of NRS 231A.110, a qualified active lowincome community business is limited to those businesses meeting the Small Business Administration size eligibility standards established in 13 C.F.R. §§ 121.101 to 201, inclusive, at the time the qualified low-income community investment is made. A business must be considered a qualified active low-income community business for the duration of the qualified community development entity's investment in, or loan to, the business if the entity reasonably expects, at the time it makes the investment or loan, that the business will continue to satisfy the requirements for being a qualified active low-income community business, other than the Small Business Administration size standards, throughout the entire period of the investment or loan.
- 2. Except as otherwise provided in this subsection, the businesses limited by this section do not include any business that derives or projects to derive 15 percent or more of its annual revenue from the rental or sale of real estate. This exclusion does not apply to a business that is controlled by, or under common control with, another business if the second business:
- (a) Does not derive or project to derive 15 percent or more of its annual revenue from the rental or sale of real estate; and
  - (b) Is the primary tenant of the real estate leased from the first business.
- Except as otherwise provided in subsection 4, the following businesses are not qualified active low-income community businesses:
- (a) A business that has received an abatement from taxation pursuant to NRS 274.310, 274.320, 274.330, 360.750, 360.753 or 360.754 : or section 31 of this
- (b) An entity that has liability for insurance premium tax on a premium tax report filed pursuant to NRS 680B.030.
  - (c) A business engaged in banking or lending.
  - (d) A massage parlor.
  - (e) A bath house.
  - (f) A tanning salon.
  - (g) A country club.
- (h) A business operating under a nonrestricted license for gaming issued pursuant to NRS 463.170.
  - (i) A liquor store.
  - (i) A golf course.
- 4. A business that has received an abatement from taxation pursuant to NRS 274.310, 274.320, 274.330, 360.750, 360.753 or 360.754 or section 31 of this act is a qualified active low-income community business if the business elects to waive the abatement and provides written notice of the waiver of the abatement to the Office of Economic Development not later than the due date of the first payment of any tax which would be abated if the abatement became effective. If the business provides the written notice to the Office of Economic Development:
  - (a) Within the period required by this subsection:

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- (1) Any agreement entered into by the business and the Office of Economic Development pursuant to NRS 274.310, 274.320, 274.330, 360.750, 360.753 or 360.754 *or section 31 of this act* is void; and
- (2) The Office of Economic Development must forward a copy of the written notice to the Department and each governmental entity or official to whom a copy of the certificate of eligibility for the abatement was forwarded.
- (b) After the period required by this subsection has expired, the Office of Economic Development must provide written notice to the Department and the business that the abatement has not been waived and the business is not a qualified active low-income community business.
- **Sec. 21.** Chapter 232 of NRS is hereby amended by adding thereto the provisions set forth as sections 22, 23 and 24 of this act.
- Sec. 22. As used in this section and sections 23 and 24 of this act, unless the context otherwise requires, "Hub" means the Nevada Innovation Hub established by section 23 of this act.
- Sec. 23. 1. The Nevada Innovation Hub is hereby established within the Department.
- 2. The Director shall appoint the Chief Data Officer to serve as the executive head of the Hub. The Chief Data Officer is in the unclassified service of the State and serves at the pleasure of the Director.
  - 3. The Chief Data Officer shall:
  - (a) Oversee the operations of the Hub;
- (b) Advise the Department, the divisions of the Department and county, city and district boards of health and health departments regarding best practices concerning the creation and maintenance of data; and
- (c) Coordinate planning concerning data analytics and transparency for the Department.
- 4. The Department shall provide any additional personnel, facilities, equipment and supplies required by the Hub to carry out the provisions of this section and section 24 of this act.
  - Sec. 24. 1. The Hub shall:
  - (a) Obtain information relating to public health from:
    - (1) The Department and its divisions;
- (2) County, city and district boards of health and health departments; and
- (3) Persons and entities who provide such information pursuant to subsection 2.
  - (b) Establish and maintain a program to:
- (1) Collect, analyze and exchange the information described in paragraph (a); and
- (2) Make the information described in paragraph (a) available to state agencies, political subdivisions of this State, educational institutions, researchers, nongovernmental organizations and the general public in accordance with the regulations adopted pursuant to paragraph (c).
  - (c) Adopt regulations prescribing:
- (1) The information that must be submitted to the Hub by the Department, its divisions and county, city and district boards of health and health departments;
  - (2) The procedure for submitting information to the Hub; and
- (3) Procedures by which state agencies, political subdivisions of this State, educational institutions, researchers, nongovernmental organizations and the general public may request the information described in paragraph (a).

- (d) Establish policies to protect the privacy of the information described in paragraph (a) in accordance with all applicable state and federal law.
  - (e) Maintain the security of the information described in paragraph (a).
- (f) Conduct operational and procedural audits of the Department and its divisions.
- (g) Perform financial planning for and design and implement projects to improve the efficiency of the Department and its divisions.
- (h) Advise and assist the Department and its divisions to identify and implement procedures to continuously improve processes.
- (i) Perform any other duties assigned by the Director or the Chief Data Officer appointed pursuant to section 23 of this act.
- 2. The Hub may accept information relating to public health from any person or entity.
- 3. Except as otherwise provided in this subsection, the Department, a division thereof and a county, city or district board of health or health department shall submit to the Hub any information required by the regulations adopted pursuant to paragraph (c) of subsection I using the procedures prescribed by those regulations and provide any technical assistance necessary to facilitate the sharing of such information. The Department, a division thereof, or a county, city or district board of health or health department is not required to submit such information if the submission of the information may compromise an ongoing criminal or civil investigation.
  - 4. The Hub shall not:
  - (a) Make information available where prohibited by federal or state law; or
- (b) Make personally identifiable information available to an educational institution, researcher, nongovernmental organization or the general public. Such information in the possession of the Hub is confidential and is not a public record.
- 5. The Hub shall be deemed the agent of any person or entity when sharing information submitted to the Hub in accordance with this section.
- 6. The sharing of information by the Hub with any agency or political subdivision of this State does not constitute a disclosure of the information for any purpose.
  - Sec. 25. NRS 232.290 is hereby amended to read as follows:
- 232.290 As used in NRS 232.290 to 232.4983, inclusive, *and sections 22, 23 and 24 of this act*, unless the context requires otherwise:
  - 1. "Department" means the Department of Health and Human Services.
  - 2. "Director" means the Director of the Department.
  - **Sec. 26.** NRS 232.320 is hereby amended to read as follows:
  - 232.320 1. The Director:
- (a) Shall appoint, with the consent of the Governor, administrators of the divisions of the Department, who are respectively designated as follows:
  - (1) The Administrator of the Aging and Disability Services Division;
  - (2) The Administrator of the Division of Welfare and Supportive Services;(3) The Administrator of the Division of Child and Family Services;
- (4) The Administrator of the Division of Health Care Financing and Policy; and
  - (5) The Administrator of the Division of Public and Behavioral Health.
- (b) Shall administer, through the divisions of the Department, the provisions of chapters 63, 424, 425, 427A, 432A to 442, inclusive, 446 to 450, inclusive, 458A and 656A of NRS, NRS 127.220 to 127.310, inclusive, 422.001 to 422.410, inclusive, *and section 39 of this act*, 422.580, 432.010 to 432.133, inclusive, 432B.6201 to 432B.626, inclusive, 444.002 to 444.430, inclusive, and 445A.010 to

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445A.055, inclusive, and all other provisions of law relating to the functions of the divisions of the Department, but is not responsible for the clinical activities of the Division of Public and Behavioral Health or the professional line activities of the other divisions.

- (c) Shall administer any state program for persons with developmental disabilities established pursuant to the Developmental Disabilities Assistance and Bill of Rights Act of 2000, 42 U.S.C. §§ 15001 et seq.
- (d) Shall, after considering advice from agencies of local governments and nonprofit organizations which provide social services, adopt a master plan for the provision of human services in this State. The Director shall revise the plan biennially and deliver a copy of the plan to the Governor and the Legislature at the beginning of each regular session. The plan must:
- (1) Identify and assess the plans and programs of the Department for the provision of human services, and any duplication of those services by federal, state and local agencies;
  - (2) Set forth priorities for the provision of those services:
- (3) Provide for communication and the coordination of those services among nonprofit organizations, agencies of local government, the State and the Federal Government:
- (4) Identify the sources of funding for services provided by the Department and the allocation of that funding:
- (5) Set forth sufficient information to assist the Department in providing those services and in the planning and budgeting for the future provision of those services: and
- (6) Contain any other information necessary for the Department to communicate effectively with the Federal Government concerning demographic trends, formulas for the distribution of federal money and any need for the modification of programs administered by the Department.
- (e) May, by regulation, require nonprofit organizations and state and local governmental agencies to provide information regarding the programs of those organizations and agencies, excluding detailed information relating to their budgets and payrolls, which the Director deems necessary for the performance of the duties imposed upon him or her pursuant to this section.
  - (f) Has such other powers and duties as are provided by law.
- Notwithstanding any other provision of law, the Director, or the Director's designee, is responsible for appointing and removing subordinate officers and employees of the Department.

**Sec. 27.** NRS 239.010 is hereby amended to read as follows:

239.010 1. Except as otherwise provided in this section and NRS 1.4683, 1.4687, 1A.110, 3.2203, 41.0397, 41.071, 49.095, 49.293, 62D.420, 62D.440, 62E.516, 62E.620, 62H.025, 62H.030, 62H.170, 62H.220, 62H.320, 75A.100, 75A.150, 76.160, 78.152, 80.113, 81.850, 82.183, 86.246, 86.54615, 87.515, 87.5413, 87A.200, 87A.580, 87A.640, 88.3355, 88.5927, 88.6067, 88A.345, 88A.7345, 89.045, 89.251, 90.730, 91.160, 116.757, 116A.270, 116B.880, 118B.026, 119.260, 119.265, 119.267, 119.280, 119A.280, 119A.653, 119A.677, 119B.370, 119B.382, 120A.640, 120A.690, 125.130, 125B.140, 126.141, 126.161, 126.163, 126.730, 127.007, 127.057, 127.130, 127.140, 127.2817, 128.090, 130.312, 130.712, 136.050, 159.044, 159A.044, 172.075, 172.245, 176.015. 176.0625, 176.09129, 176.156, 176A.630, 178.39801, 178.4715, 178.5691, 179.495, 179A.070, 179A.165, 179D.160, 200.3771, 200.3772, 200.5095, 200.604, 202.3662, 205.4651, 209.392, 209.3923, 209.3925, 209.419, 209.429, 209.521, 211A.140, 213.010, 213.040, 213.095, 213.131, 217.105, 217.110, 217.464, 217.475, 218A.350, 218E.625, 218F.150, 218G.130, 218G.240, 218G.350,

224.240, 226.300, 228.270, 228.450, 228.495, 228.570, 231.069, 231.1473, 2 232,1369, 233,190, 237,300, 239,0105, 239,0113, 239,014, 239B,026, 239B,030, 239B.040, 239B.050, 239C.140, 239C.210, 239C.320, 239C.250, 239C.270, 239C.420, 240.007, 241.020, 241.030, 241.039, 242.105, 244.264, 244.335, 247.540, 247.550, 247.560, 250.087, 250.130, 250.140, 250.150, 268.095, 268.0978, 268.490, 268.910, 269.174, 271A.105, 281.195, 281.805, 281A.350, 4 5 6 7 281A.680, 281A.685, 281A.750, 281A.755, 281A.780, 284.4068, 284.4086, 8 286.110, 286.118, 287.0438, 289.025, 289.080, 289.387, 289.830, 293.4855, 293.5002, 293.503, 293.504, 293.558, 293.5757, 293.870, 293.906, 293.908, 293.910, 293B.135, 293D.510, 331.110, 332.061, 332.351, 333.333, 333.335, 338.070, 338.1379, 338.1593, 338.1725, 338.1727, 348.420, 349.597, 349.775, 353.205, 353A.049, 353A.085, 353A.100, 353C.240, 360.240, 360.247, 360.255, 9 10 11 12 360.755, 361.044, 361.2242, 361.610, 365.138, 366.160, 368A.180, 370.257, 370.327, 372A.080, 378.290, 378.300, 379.0075, 379.008, 379.1495, 385A.830, 13 14 385B.100, 387.626, 387.631, 388.1455, 388.259, 388.501, 388.503, 388.513, 388.750, 388A.247, 388A.249, 391.033, 391.035, 391.0365, 391.120, 391.925, 15 16 17 392.029, 392.147, 392.264, 392.271, 392.315, 392.317, 392.325, 392.327, 392.335, 392.850, 393.045, 394.167, 394.16975, 394.1698, 394.447, 394.460, 394.465, 18 19 396.1415, 396.1425, 396.143, 396.159, 396.3295, 396.405, 396.525, 396.535, 20 396.9685, 398A.115, 408.3885, 408.3886, 408.3888, 408.5484, 412.153, 414.280, 416.070, 422.2749, 422.305, 422A.342, 422A.350, 425.400, 427A.1236, 427A.872, 21 432.028, 432.205, 432B.175, 432B.280, 432B.290, 432B.4018, 432B.407, 22 23 432B.430, 432B.560, 432B.5902, 432C.140, 432C.150, 433.534, 433A.360, 24 439,4941, 439,4988, 439,840, 439,914, 439A,116, 439A,124, 439B,420, 439B,754, 25 439B.760, 439B.845, 440.170, 441A.195, 441A.220, 441A.230, 442.330, 442.395, 26 442.735, 442.774, 445A.665, 445B.570, 445B.7773, 447.345, 449.209, 449.245, 27 449.4315, 449A.112, 450.140, 450B.188, 450B.805, 453.164, 453.720, 458.055, 28 458.280, 459.050, 459.3866, 459.555, 459.7056, 459.846, 463.120, 463.15993, 29 463.240, 463.3403, 463.3407, 463.790, 467.1005, 480.535, 480.545, 480.935, 30 480.940, 481.063, 481.091, 481.093, 482.170, 482.368, 482.5536, 483.340, 31 483.363, 483.575, 483.659, 483.800, 484A.469, 484B.830, 484B.833, 484E.070, 485.316, 501.344, 503.452, 522.040, 534A.031, 561.285, 571.160, 584.655, 587.877, 598.0964, 598.098, 598A.110, 598A.420, 599B.090, 603.070, 603A.210, 32 33 604A.303, 604A.710, 612.265, 616B.012, 616B.015, 616B.315, 616B.350, 34 35 618.341, 618.425, 622.238, 622.310, 623.131, 623A.137, 624.110, 624.265, 624.327, 625.425, 625A.185, 628.418, 628B.230, 628B.760, 629.047, 629.069, 36 37 630.133. 630.2671. 630.2672, 630.2673, 630.30665, 630.336, 630A.327, 630A.555, 631.332, 631.368, 632.121, 632.125, 632.3415, 632.3423, 632.405, 38 633.283, 633.301, 633.4715, 633.4716, 633.4717, 633.524, 634.055, 634.1303, 39 40 634.214, 634A.169, 634A.185, 635.111, 635.158, 636.262, 636.342, 637.085, 41 637.145, 637B.192, 637B.288, 638.087, 638.089, 639.183, 639.2485, 639.570, 42 640.152, 640A.185, 640A.220, 640B.405, 640B.730, 640C.580, 640C.600, 640C.620, 640C.745, 640C.760, 640D.135, 640D.190, 640E.225, 43 44 640E.340, 641.090, 641.221, 641.2215, 641.325, 641A.191, 641A.217, 641A.262, 641B.170, 641B.281, 641B.282, 641C.455, 641C.760, 641D.260, 641D.320, 45 46 642.524, 643.189, 644A.870, 645.180, 645.625, 645A.050, 645A.082, 645B.060, 645B.092, 645C.220, 645C.225, 645D.130, 645D.135, 645G.510, 645H.320, 47 48 645H.330, 647.0945, 647.0947, 648.033, 648.197, 649.065, 649.067, 652.126, 49 652.228, 653.900, 654.110, 656.105, 657A.510, 661.115, 665.130, 665.133, 669.275, 669.285, 669A.310, 671.170, 673.450, 673.480, 675.380, 676A.340, 676A.370, 677.243, 678A.470, 678C.710, 678C.800, 679B.122, 679B.124, 50 51 679B.152, 679B.159, 679B.190, 679B.285, 679B.690, 680A.270, 681A.440, 52 53 681B.260, 681B.410, 681B.540, 683A.0873, 685A.077, 686A.289, 686B.170,

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 686C.306, 687A.060, 687A.115, 687B.404, 687C.010, 688C.230, 688C.480, 688C.490, 689A.696, 692A.117, 692C.190, 692C.3507, 692C.3536, 692C.3538, 692C.354, 692C.420, 693A.480, 693A.615, 696B.550, 696C.120, 703.196, 704B.325, 706.1725, 706A.230, 710.159, 711.600, and section 24 of this act, sections 35, 38 and 41 of chapter 478, Statutes of Nevada 2011 and section 2 of chapter 391, Statutes of Nevada 2013 and unless otherwise declared by law to be confidential, all public books and public records of a governmental entity must be open at all times during office hours to inspection by any person, and may be fully copied or an abstract or memorandum may be prepared from those public books and public records. Any such copies, abstracts or memoranda may be used to supply the general public with copies, abstracts or memoranda of the records or may be used in any other way to the advantage of the governmental entity or of the general public. This section does not supersede or in any manner affect the federal laws governing copyrights or enlarge, diminish or affect in any other manner the rights of a person in any written book or record which is copyrighted pursuant to federal law.

2. A governmental entity may not reject a book or record which is copyrighted solely because it is copyrighted.

- 3. A governmental entity that has legal custody or control of a public book or record shall not deny a request made pursuant to subsection 1 to inspect or copy or receive a copy of a public book or record on the basis that the requested public book or record contains information that is confidential if the governmental entity can redact, delete, conceal or separate, including, without limitation, electronically, the confidential information from the information included in the public book or record that is not otherwise confidential.
- 4. If requested, a governmental entity shall provide a copy of a public record in an electronic format by means of an electronic medium. Nothing in this subsection requires a governmental entity to provide a copy of a public record in an electronic format or by means of an electronic medium if:
  - (a) The public record:
    - (1) Was not created or prepared in an electronic format; and
    - (2) Is not available in an electronic format; or
- (b) Providing the public record in an electronic format or by means of an electronic medium would:
  - (1) Give access to proprietary software; or
- (2) Require the production of information that is confidential and that cannot be redacted, deleted, concealed or separated from information that is not otherwise confidential.
- 5. An officer, employee or agent of a governmental entity who has legal custody or control of a public record:
- (a) Shall not refuse to provide a copy of that public record in the medium that is requested because the officer, employee or agent has already prepared or would prefer to provide the copy in a different medium.
- (b) Except as otherwise provided in NRS 239.030, shall, upon request, prepare the copy of the public record and shall not require the person who has requested the copy to prepare the copy himself or herself.
  - **Sec. 28.** 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 local governmental agency of the State of Nevada may:
- (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

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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 439.581 to 439.595, inclusive, and section 1 of this act, 686A.135, 687B.352, 687B.408, 687B.723, 687B.725, 689B.030 to 689B.050, inclusive, 689B.265, 689B.287 and 689B.500 apply to coverage provided pursuant to this paragraph, except that the provisions of NRS 689B.0378, 689B.03785 and 689B.500 only apply to coverage for active officers and employees of the governing body, or the dependents of such officers and employees.
- (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 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.
- 3. In any county in which a legal services organization exists, the governing body of the county, or of any school district, municipal corporation, political subdivision, public corporation or other local governmental agency of the State of Nevada in the county, may enter into a contract with the legal services organization pursuant to which the officers and employees of the legal services organization, and the dependents of those officers and employees, are eligible for any life, accident or health insurance provided pursuant to this section to the officers and employees, and the dependents of the officers and employees, of the county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency.
- 4. If a contract is entered into pursuant to subsection 3, the officers and employees of the legal services organization:
- (a) Shall be deemed, solely for the purposes of this section, to be officers and employees of the county, school district, municipal corporation, political

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subdivision, public corporation or other local governmental agency with which the legal services organization has contracted; and

- (b) Must be required by the contract to pay the premiums or contributions for all insurance which they elect to accept or of which they authorize the purchase.
  - 5. A contract that is entered into pursuant to subsection 3:
- (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.
- (c) Shall be deemed to be approved if not disapproved by the Commissioner within 30 days after its submission.
- 6. As used in this section, "legal services organization" means an organization that operates a program for legal aid and receives money pursuant to NRS 19.031.

**Sec. 29.** NRS 287.04335 is hereby amended to read as follows:

287.04335 If the Board provides health insurance through a plan of selfinsurance, it shall comply with the provisions of NRS 439.581 to 439.595, inclusive, and section 1 of this act, 686A.135, 687B.352, 687B.409, 687B.723, 687B.725, 689B.0353, 689B.255, 695C.1723, 695G.150, 695G.155, 695G.160, 695G.162, 695G.1635, 695G.164, 695G.1645, 695G.1665, 695G.167, 695G.1675, 695G.170 to 695G.174, inclusive, 695G.176, 695G.177, 695G.200 to 695G.230, inclusive, 695G.241 to 695G.310, inclusive, and 695G.405, in the same manner as an insurer that is licensed pursuant to title 57 of NRS is required to comply with those provisions.

**Sec. 30.** NRS 353.207 is hereby amended to read as follows:

353.207 The Chief shall: 1.

- (a) Require the Office of Economic Development and the Office of Energy each periodically to conduct an analysis of the relative costs and benefits of each incentive for economic development previously approved by the respective office and in effect during the immediately preceding 2 fiscal years, including, without limitation, any abatement of taxes approved by the Office of Economic Development pursuant to NRS 274.310, 274.320, 274.330, 360.750, 360.752, 360.753, 360.754, 360.890, 360.950, 361.0687, 374.357 or 701A.210, or section 31 of this act, to assist the Governor and the Legislature in determining whether the economic benefits of the incentive have accomplished the purposes of the statute pursuant to which the incentive was approved and warrant additional incentives of that kind:
- (b) Require each office to report in writing to the Chief the results of the analysis conducted by the office pursuant to paragraph (a); and
- (c) Establish a schedule for performing and reporting the results of the analysis required by paragraph (a) which ensures that the results of the analysis reported by each office are included in the proposed budget prepared pursuant to NRS 353.205, as required by that section.
- Each report prepared for the Chief pursuant to this section is a public record and is open to inspection pursuant to the provisions of NRS 239.010.
- **Sec. 31.** Chapter 360 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. A person who intends to locate or expand a business in [an academic medical district the industry of health care in this State may apply to the Office of Economic Development pursuant to this section for a partial abatement of one or more of:
- (a) The local sales and use taxes imposed on the purchase of eligible machinery, equipment and supplies, as defined in section 37 of this act.
  - (b) The taxes imposed on the business pursuant to chapter 361 of NRS.

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- (c) The taxes imposed pursuant to chapter 363B of NRS on the wages paid by the business to employees of the business who perform services directly related to addressing a critical medical or scientific need, as defined by regulation of the Office of Economic Development.
- 2. Notwithstanding the provisions of any law to the contrary and except as otherwise provided in subsection 3, the Office of Economic Development shall approve an application for a partial abatement if the Office makes the following determinations:
- (a) Not later than 1 year after the date on which the application was received by the Office, the applicant has executed an agreement with the Office which:
  - (1) Complies with the requirements of NRS 360.755;
- (2) States the date on which the abatement becomes effective, as agreed to by the applicant and the Office, which must not be earlier than the date on which the Office received the application and not later than 1 year after the date on which the Office approves the application;
- (3) States that the business will, after the date on which a certificate of eligibility for the partial abatement is issued pursuant to subsection 4, continue in operation in this State for a period specified by the Office, which must be not less than 5 years, and will continue to meet the eligibility requirements set forth in this subsection; and
- (4) Binds any successor in interest of the applicant for the specified neriod:
- (b) The business is registered pursuant to the laws of this State or the applicant commits to obtaining a valid business license and all other permits required by the county, city or town in which the business operates;
- (c) The average hourly wage that will be paid by the business to its employees in this State during the period of partial abatement is not less than 100 percent of the average statewide hourly wage as established by the Employment Security Division of the Department of Employment, Training and Rehabilitation on July 1 of each fiscal year;
- (d) The business will, by the eighth calendar quarter following the calendar quarter in which the abatement becomes effective, offer a health insurance plan for all employees that includes an option for health insurance coverage for dependents of the employees, and the health care benefits the business offers to its employees in this State will meet the minimum requirements for health care benefits established by the Office;
- (e) The business offers all employees at least 10 days of paid leave each calendar year, which may be used by employees of the business in accordance with a policy adopted by the business;
- (f) The business will make a new capital investment of at least \$3,000,000 in this State within 1 year after receiving a certificate of eligibility for a partial abatement:
- (g) The business engages in qualified research in the field of health care fat a location within an academic medical district! or provides health care services in this State: and
- (h) If the application is for the partial abatement of the taxes imposed by the Local School Support Tax Law, the application has been approved by a vote of at least two-thirds of the members of the Board of Economic Development created by NRS 231.033.
  - The Office of Economic Development: 3.
- (a) In considering applications submitted pursuant to this section, shall prioritize applications which propose to serve rural areas, areas with a high ratio

of patients to physicians and areas otherwise underserved by providers of health
 care;
 (b) Shall approve or deny an application submitted pursuant to this section

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(b) Shall approve or deny an application submitted pursuant to this section and notify the applicant of its decision not later than 45 days after receiving the application.

 $\frac{\{(b)\}}{\{(c)\}}$  (c) Must not:

- (1) Consider an application for a partial abatement unless the Office has requested a letter of acknowledgment of the request for the partial abatement from any affected county, school district, city or town and has complied with the requirements of NRS 360.757: or
- (2) Approve a partial abatement for any applicant for a period of more than 10 years.
- 4. If the Office of Economic Development approves an application for a partial abatement pursuant to this section, the Office shall immediately forward a certificate of eligibility for the partial abatement to:
  - (a) The Department;
  - (b) The Nevada Tax Commission; and
- (c) If the partial abatement is from personal property taxes, the appropriate county treasurer.
- 5. An applicant for a partial abatement pursuant to this section or an existing business whose partial abatement is in effect shall, upon the request of the Executive Director of the Office of Economic Development, furnish the Executive Director with copies of all records necessary to verify that the applicant meets the requirements of subsection 2.
- 6. If an applicant for a partial abatement pursuant to this section fails to execute the agreement described in paragraph (a) of subsection 2 within 1 year after the date on which the application was received by the Office, the applicant must not be approved for a partial abatement pursuant to this section unless the applicant submits a new application.
- 7. If a business whose partial abatement has been approved pursuant to this section and whose partial abatement is in effect ceases:
  - (a) To meet the requirements set forth in subsection 2; or
- (b) Operation before the time specified in the agreement described in
- paragraph (a) of subsection 2,
  - the business shall repay to the Department the amount of the partial abatement that was allowed pursuant to this section before the failure of the business to comply, unless the Nevada Tax Commission determines that the business has substantially complied with the requirements of this section. Except as otherwise provided in NRS 360.232 and 360.320, the business shall, in addition to the amount of the partial abatement required to be repaid pursuant to this subsection, pay interest on the amount due at the rate most recently established pursuant to NRS 99.040 for each month, or portion thereof, from the last day of the month following the period for which the payment would have been made had the partial abatement not been approved until the date of payment of the tax.
  - 8. The Office of Economic Development may adopt such regulations as the Office determines to be necessary to carry out the provisions of this section.
  - 9. The Nevada Tax Commission may adopt such regulations as the Commission determines are necessary to carry out the provisions of this section.
- 10. An applicant for a partial abatement who is aggrieved by a final decision of the Office of Economic Development may petition a court of competent jurisdiction to review the decision in the manner provided in chapter 233B of NRS.

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52. 53 11. As used in this section:

(a) I"Academic medical district" means an area defined by an ordinance enacted by a county or incorporated city that contains within its boundaries an educational institution that:

(1) Includes an allopathic medical school that is accredited by the Liaison Committee on Medical Education of the American Medical Association and the Association of American Medical Colleges or their respective successor organizations, or a school of osteopathic medicine that is accredited by the Commission on Osteopathic College Accreditation;

(2) Includes at least one allied health professional school; and

(3) Either owns or is affiliated with a teaching hospital or health care system.

<del>(b)]</del> "Local sales and use taxes" means any taxes imposed on the gross receipts of any retailer from the sale of tangible personal property sold at retail, or stored, used or otherwise consumed, in any political subdivision of this State, except the taxes imposed by the Sales and Use Tax Act.

<del>[(e)]</del> (b) "Qualified research" has the meaning ascribed to it in 26 U.S.C. § 41(d).

**Sec. 32.** NRS 360.755 is hereby amended to read as follows:

360.755 1. If the Office of Economic Development approves an application by a business for an abatement of taxes pursuant to NRS 360.950 or a partial abatement pursuant to NRS 360.750, 360.752, 360.753, 360.754 or 360.890, *or* section 31 of this act, the agreement with the Office must provide that the business:

(a) Agrees to allow the Department to conduct audits of the business to determine whether the business is in full compliance with the requirements for the abatement or partial abatement; and

(b) Consents to the disclosure of the audit reports in the manner set forth in this section.

- 2. If the Department conducts an audit of the business to determine whether the business is in full compliance with the requirements for the abatement or partial abatement, the Department shall, upon request, provide the audit report to the Office of Economic Development.
- 3. Until the business has exhausted all appeals to the Department and the Nevada Tax Commission relating to the audit, the information contained in the audit report provided to the Office of Economic Development:
  - (a) Is confidential proprietary information of the business;
  - (b) Is not a public record; and
- (c) Must not be disclosed to any person who is not an officer or employee of the Office of Economic Development unless the business consents to the disclosure.
- 4. After the business has exhausted all appeals to the Department and the Nevada Tax Commission relating to the audit:
- (a) The audit report provided to the Office of Economic Development is a public record; and
- (b) Upon request by any person, the Executive Director of the Office of Economic Development shall disclose the audit report to the person who made the request, except for any information in the audit report that is protected from disclosure pursuant to subsection 5.
- 5. Before the Executive Director of the Office of Economic Development discloses the audit report to the public, the business may submit a request to the Executive Director to protect from disclosure any information in the audit report which, under generally accepted business practices, would be considered a trade secret or other confidential proprietary information of the business. After consulting with the business, the Executive Director shall determine whether to protect the

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information from disclosure. The decision of the Executive Director is final and is not subject to judicial review. If the Executive Director determines to protect the information from disclosure, the protected information:

(a) Is confidential proprietary information of the business;

(b) Is not a public record;

- (c) Must be redacted by the Executive Director from any audit report that is disclosed to the public; and
- (d) Must not be disclosed to any person who is not an officer or employee of the Office of Economic Development unless the business consents to the disclosure.
- Sec. 33. NRS 360.757 is hereby amended to read as follows: 360.757 1. The Office of Economic Development shall not take any action on an application for any abatement of taxes pursuant to NRS 274.310, 274.320, 274.330, 360.750, 360.753 or 360.754 or section 31 of this act or any other specific statute unless the Office:
  - (a) Takes that action at a public meeting conducted for that purpose; and
- (b) At least 30 days before the meeting, provides notice of the application to:
  (1) The governing body of the county, the board of trustees of the school district and the governing body of the city or town, if any, in which the pertinent business is or will be located;
- (2) The governing body of any other political subdivision that could be affected by the abatement; and
  - (3) The general public.
- 2. The notice required by this section must set forth the date, time and location of the meeting at which the Office of Economic Development will consider the application.
- 3. The Office of Economic Development shall adopt regulations relating to the notice required by this section.
  - **Sec. 34.** NRS 360.7575 is hereby amended to read as follows:
- 360.7575 1. If the Office of Economic Development approves an application for an abatement of sales and use taxes pursuant to NRS 360.950 or a partial abatement of any sales and use taxes pursuant to NRS 274.310, 274.320, 274.330, 360.750, 360.753, 360.754 or 360.890, or section 31 of this act, the Department shall issue to the business a document certifying the abatement or partial abatement which can be presented to retailers at the time of purchase. The document must clearly state that the business is not required to pay sales and use taxes or the rate of sales and use tax that the business is required to pay.
- 2. If the Department has issued to a business a document pursuant to subsection 1 and the business pays an amount of sales and use taxes for which the business was entitled to an abatement because the business fails to present the document, the business may apply to the Department for a refund of the amount of sales and use tax paid for which the business was entitled to an abatement. If the Department has issued to a business a document pursuant to subsection 1 and the failure of the business to present the document results in the business paying the full amount of sales and use tax on 50 percent or more of the purchases for which the business was eligible for the abatement, the Department shall impose on the business a penalty equal to 10 percent of the total amount of the abatement. The Department shall distribute the proceeds of any penalty imposed pursuant to this subsection to each local government affected by a refund issued pursuant to this subsection in proportion to the amount of the refunds for which the affected local government is responsible.
- 3. If, after submitting an application for an abatement of sales and use taxes pursuant to NRS 360.950 or a partial abatement of any sales and use taxes pursuant to NRS 360.750, 360.753, 360.754 or 360.890 *or section 31 of this act* and before

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receiving the document issued pursuant to subsection 1, a business pays an amount of sales and use tax for which the business is entitled to an abatement, the business may apply to the Department for a refund of the amount of sales and use tax which the applicant paid for which the business is entitled to an abatement.

4. Notwithstanding any other provision of law, no interest is allowed on a

refund made pursuant to subsection 2 or 3.

Sec. 35. Chapter 361 of NRS is hereby amended by adding thereto a new section to read as follows:

- 1. A person who intends to locate or expand a business in the industry of health care in this State may, pursuant to section 31 of this act, apply to the Office of Economic Development for a partial abatement from the taxes imposed by this chapter.
- If a partial abatement from the taxes imposed by this chapter on personal property located at the business is approved by the Office of Economic Development pursuant to section 31 of this act:
  - (a) The partial abatement must:
    - (1) Be for a duration of 10 years but not more than 20 years; and
- (2) Equal 50 percent of the taxes imposed on the real property of the business each year pursuant to this chapter and 50 percent of the taxes imposed on the personal property of the business that is eligible machinery, equipment and supplies; and
- (3) Be administered and carried out in the manner set forth in section 31 of this act.
- (b) The Executive Director of the Office of Economic Development shall notify the county assessor of each county in which the business is located of the approval of the partial abatement, including, without limitation, the duration and percentage of the partial abatement that the Office granted. The Executive Director shall, on or before April 15 of each year, advise the county assessor of each county in which a business qualifies for a partial abatement during the current fiscal year as to whether the business is still eligible for the partial abatement in the next succeeding fiscal year.
  - 3. As used in this section:
- (a) "Eligible machinery, equipment and supplies" means machinery, equipment and supplies necessary to and specifically related to qualified research. The term does not include vehicles, buildings or the structural components of buildings.
  - (b) "Qualified research" has the meaning ascribed to it in 26 U.S.C. § 41(d). Sec. 36. Chapter 363B of NRS is hereby amended by adding thereto a new
- section to read as follows: 1. An employer that qualifies pursuant to the provisions of section 31 of this
- act is entitled to an abatement of the amount of tax otherwise due pursuant to NRS 363B.110.
  - 2. The abatement must:
  - (a) Be for a duration of 10 years; and
- (b) Equal the amount of tax otherwise due pursuant to NRS 363B.110 on the wages of employees of the business who perform services directly related to addressing a critical medical or scientific need, as defined by regulations adopted by the Office of Economic Development pursuant to section 31 of this act.
- 3. If a partial abatement from the taxes otherwise due pursuant to NRS 363B.110 is approved by the Office of Economic Development pursuant to NRS 360.750, the partial abatement must be administered and carried out in the manner set forth in NRS 360.750.

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- section to read as follows: business which has been approved for a partial abatement pursuant to section 31
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- 1. A person who intends to locate or expand a business in the industry of
- health care in this State may, pursuant to section 31 of this act, apply to the Office of Economic Development for a partial abatement from the taxes imposed by this chapter on the gross receipts from the sale, and the storage, use or other consumption, of eligible machinery, equipment and supplies for use at the
- of this act. 2. If an application for a partial abatement is approved: (a) The business is eligible for an abatement from the tax imposed by this
- chapter for a period of 10 years. (b) The abatement must be administered and carried out in the manner set forth in section 31 of this act.
  - 3. As used in this section:
- (a) "Eligible machinery, equipment and supplies" means machinery, equipment and supplies necessary to and specifically related to qualified research. The term does not include vehicles, buildings or the structural components of buildings.

Sec. 37. Chapter 374 of NRS is hereby amended by adding thereto a new

- (b) "Qualified research" has the meaning ascribed to it in 26 U.S.C. § 41(d). Sec. 38. NRS 374.357 is hereby amended to read as follows: 374.357 1. A person who maintains a business or intends to locate a business in this State may, pursuant to NRS 360.750, apply to the Office of Economic Development for an abatement from the taxes imposed by this chapter on the gross receipts from the sale, and the storage, use or other consumption, of eligible machinery or equipment for use by a business which has been approved for an abatement pursuant to NRS 360.750.
  - 2. If an application for an abatement is approved pursuant to NRS 360.750:
- (a) The taxpayer is eligible for an abatement from the tax imposed by this chapter for not more than 2 years.
- (b) The abatement must be administered and carried out in the manner set forth in NRS 360.750.
- 3. As used in this section, unless the context otherwise requires, "eligible machinery or equipment" means machinery or equipment for which a deduction is authorized pursuant to 26 U.S.C. § 179. The term does not include:
  - (a) Buildings or the structural components of buildings;
  - (b) Equipment used by a public utility;
  - (c) Equipment used for medical treatment;
  - (d) Machinery or equipment used in mining; or **(d)** Machinery or equipment used in gaming.
- Sec. 39. Chapter 422 of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. The Legislature hereby finds and declares that it is the public policy of this State that each resident of this State who otherwise qualifies for enrollment in Medicaid, regardless of his or her immigration or citizenship status, is eligible to receive the benefits for enrolling in Medicaid pursuant to 8 U.S.C. § 1621(d).] provided for by subsection 2.
- 2. The Director shall finelude in the State Plan for Medicaid authorization for any person who otherwise qualifies for Medicaid to enroll in Medicaid, regardless of his or her immigration or citizenship status. Such authorization must be included regardless of whether federal financial participation is available to pay the costs of covering the persons authorized by this subsection to enroll in Medicaid.

- 3. To the extent that federal financial participation is available to pay the 2 costs of covering the persons authorized by subsection 2 to enroll in Medicaid, the Director shall apply for any federal waivers or take any other action necessary to obtain such federal financial participation.]: 4 5 (a) Establish a program to provide coverage, to the same extent as coverage 6
  - provided under Medicaid, to persons who:

(1) Are less than 27 years of age;

(2) Are not eligible for coverage under the State Plan for Medicaid because of their immigration status; and

(3) Would otherwise be eligible for Medicaid.

- (b) Apply to the Secretary of Health and Human Services for any waiver, amendment of the State Plan for Medicaid or other federal authority necessary to provide coverage under Medicaid for persons who:
- (1) Qualify for the federal Deferred Action for Childhood Arrivals Program established by the memorandum of the Secretary of Homeland Security issued on June 15, 2012; and

(2) Meet the requirements to be eligible for Medicaid, except for requirements concerning immigration status.

- (c) Apply to the Secretary of Health and Human Services for any federal authority necessary to provide coverage under the Children's Health Insurance Program for the costs of prenatal care and labor and delivery for persons who:
- (1) Are not eligible for coverage under the State Plan for Medicaid because of their immigration status; and

(2) Would otherwise be eligible for Medicaid.

- (d) Establish a program to provide coverage, to the same extent as coverage provided under Medicaid, for postpartum care for persons who:
- (1) Are not eligible for coverage under the State Plan for Medicaid because of their immigration status; and
  - (2) Would otherwise be eligible for Medicaid.

30 The Department shall:

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- (a) Cooperate with the Federal Government in obtaining any federal authority pursuant to paragraph (b) or (c) of subsection 2;
  (b) If the Federal Government provides the authority necessary to provide
- the coverage described in paragraphs (b) and (c) of subsection 2, take any measures necessary to provide such coverage; and
- (c) Implement the provisions of paragraphs (b) and (c) of subsection 2 only to the extent authorized by the Federal Government.
- Sec. 40. Chapter 422A of NRS is hereby amended by adding thereto the provisions set forth as sections 41 and 42 of this act.
- Sec. 41. 1. The Medicaid Outreach Advisory Committee is hereby established within the Division of Welfare and Supportive Services.
- The Advisory Committee consists of such members as are appointed by the Administrator. The members appointed by the Administrator must be persons with experience conducting outreach to persons described in subsection 1 of section 42 of this act.
- 3. Except as otherwise provided in this section, the members of the Advisory Committee must be appointed to terms of 4 years. The terms must be staggered in such a manner that, to the extent possible, the terms of one-half of the members will expire every 2 years. The initial members of the Advisory Committee shall, at the first meeting of the board after their appointment, draw lots to determine which members will initially serve terms of 2 years and which will serve terms of 4 years. A member of the Advisory Committee may be reappointed.

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- 4. A vacancy in the membership of the Advisory Committee must be filled in the same manner as the initial appointment.
- 5. The members of the Advisory Committee serve without compensation and are not entitled to the per diem and travel expenses provided for state officers and employees generally.
- 6. Each member of the Advisory Committee who is an officer or employee of this State or a political subdivision of this State must be relieved from his or her duties without loss of regular compensation so that the officer or employee may prepare for and attend meetings of the Advisory Committee and perform any work necessary to carry out the duties of the Advisory Committee in the most timely manner practicable. A state agency or political subdivision of this State shall not require an officer or employee who is a member of the Advisory Committee to make up the time the officer or employee is absent from work to carry out duties as a member of the Advisory Committee or use annual leave or compensatory time for the absence.
- 7. The Division shall provide such administrative support to the Advisory Committee as is necessary to carry out the duties of the Advisory Committee.
  - 8. The Advisory Committee shall:
  - (a) Annually elect a Chair from among its members; and
- (b) Meet at least once every 3 months at the times and places specified by a call of the Chair and may meet at such further times as deemed necessary by the Chair.
- 9. A majority of the voting members of the Advisory Committee constitutes a quorum for the transaction of business, and the affirmative vote of a majority of the members of the Advisory Committee is required to take action.
- Sec. 42. 1. The Medicaid Outreach Advisory Committee created by section 41 of this act shall advise the Department, the Division of Health Care Financing and Policy and the Division of Welfare and Supportive Services concerning outreach to, and maximizing enrollment in Medicaid and the Children's Health Insurance Program of, members of marginalized or underserved communities, including, without limitation:
  - (a) Racial and ethnic minorities;
  - (b) Persons who reside in rural areas;
  - (c) Persons with disabilities;
  - (d) Persons with mental illness;
  - (e) Persons with substance use disorders;
  - (f) Persons experiencing homelessness; and
- (g) Parents or guardians of children who are persons described in paragraphs (a) to (f), inclusive.
- 2. The Advisory Committee shall annually compile a report of its activities and post the report on an Internet website maintained by the Division.
  - **Sec. 43.** NRS 422A.372 is hereby amended to read as follows:
  - 422A.372 1. The Department shall provide public assistance pursuant to:
- (a) The program established to provide Temporary Assistance for Needy Families: *or* 
  - (b) [Medicaid; or
- (e)] Any program for which a grant has been provided to this State pursuant to 42 U.S.C. §§ 1397 et seq.,
- to a qualified person who is not a citizen or national of the United States who complies with the requirements established by the Department pursuant to federal law and this chapter for the receipt of benefits pursuant to that program.

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2. A person who is not a citizen or national of the United States is considered "qualified" for the purposes of subsection 1 if the person meets the requirements of 8 U.S.C. § 1641(b).

**Sec. 44.** NRS 603A.100 is hereby amended to read as follows:

- 603A.100 1. The provisions of NRS 603A.010 to 603A.290, inclusive, do not apply to the maintenance or transmittal of information in accordance with NRS 439.581 to 439.595, inclusive, and section 1 of this act and the regulations adopted pursuant thereto.
- 2. A data collector who is also an operator, as defined in NRS 603A.330, shall comply with the provisions of NRS 603A.300 to 603A.360, inclusive.
- 3. Any waiver of the provisions of NRS 603A.010 to 603A.290, inclusive, is contrary to public policy, void and unenforceable.
  - Sec. 45. NRS 629.051 is hereby amended to read as follows:
- 629.051 1. Except as otherwise provided in this section and in regulations adopted by the State Board of Health pursuant to NRS 652.135 with regard to the records of a medical laboratory and unless a longer period is provided by federal law, each custodian of health care records shall retain the health care records of patients as part of the regularly maintained records of the custodian for 5 years after their receipt or production. Health care records may be retained in written form, or by microfilm or any other recognized form of size reduction, including, without limitation, microfiche, computer disc, magnetic tape and optical disc, which does not adversely affect their use for the purposes of NRS 629.061. Health care records
- (a) Must, except as otherwise provided in subsections 5 and 6 of NRS 439.589, be created, maintained, transmitted and exchanged electronically as required by subsection 4 of NRS 439.589; and
- (b) May be created, authenticated and stored in a [computer system] health information exchange which meets the requirements of NRS 439.581 to 439.595, inclusive, and section 1 of this act, and the regulations adopted pursuant thereto.
- 2. A provider of health care shall post, in a conspicuous place in each location at which the provider of health care performs health care services, a sign which discloses to patients that their health care records may be destroyed after the period set forth in subsection 1.
- 3. When a provider of health care performs health care services for a patient for the first time, the provider of health care shall deliver to the patient a written statement which discloses to the patient that the health care records of the patient may be destroyed after the period set forth in subsection 1.
- 4. If a provider of health care fails to deliver the written statement to the patient pursuant to subsection 3, the provider of health care shall deliver to the patient the written statement described in subsection 3 when the provider of health care next performs health care services for the patient.
- 5. In addition to delivering a written statement pursuant to subsection 3 or 4, a provider of health care may deliver such a written statement to a patient at any other time.
- 6. A written statement delivered to a patient pursuant to this section may be included with other written information delivered to the patient by a provider of
- 7. A custodian of health care records shall not destroy the health care records of a person who is less than 23 years of age on the date of the proposed destruction of the records. The health care records of a person who has attained the age of 23 years may be destroyed in accordance with this section for those records which have been retained for at least 5 years or for any longer period provided by federal law.

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8. If a health care licensing board receives notification from the Department of Health and Human Services pursuant to section 1 of this act that

 $\frac{(a) - A}{A}$  a provider of health care to which the health care licensing board has issued a license is not in compliance with the requirements of subsection 4 of NRS 439.589, the health care licensing board [shall immediately suspend the license until the license is reinstated pursuant to paragraph (b).

- (b) A provider of health care whose license has been suspended pursuant to paragraph (a) has come into compliance with the requirements of subsection 4 of NRS 439.589, the Division shall immediately reinstate the license.] may, after notice and the opportunity for a hearing in accordance with the provisions of this title, require corrective action or impose an administrative penalty in an amount not to exceed the maximum penalty that the health care licensing board is authorized to impose for other violations. The health care licensing board shall not suspend or revoke a license for failure to comply with the requirements of subsection 4 of NRS 439.589.
- The provisions of this section, except for the provisions of paragraph (a) of subsection 1 and subsection 8, do not apply to a pharmacist.
  - [9.] 10. The State Board of Health shall adopt:
- (a) Regulations prescribing the form, size, contents and placement of the signs and written statements required pursuant to this section; and
  - (b) Any other regulations necessary to carry out the provisions of this section.
  - 11. As used in this section:
  - (a) "Health care licensing board" means:
- (1) A board created pursuant to chapter 630, 630A, 631, 632, 633, 634, 634A, 635, 636, 637, 637B, 639, 640, 640A, 640B, 640C, 641, 641A, 641B, 641C
- or 64ID of NRS.
  (2) The Division of Public and Behavioral Health of the Department of Health and Human Services.
- (3) The State Board of Health with respect to licenses issued pursuant to chapter 640D or 640E of NRS.
  - (b) "License" has the meaning ascribed to it in section 1 of this act.
- Sec. 46. NRS 654.190 is hereby amended to read as follows: 654.190

  1. The Board may, after notice and an opportunity for a hearing as required by law, impose an administrative fine of not more than \$10,000 for each violation on, recover reasonable investigative fees and costs incurred from, suspend, revoke, deny the issuance or renewal of or place conditions on the license of, and place on probation or impose any combination of the foregoing on any licensee who:
- (a) Is convicted of a felony relating to the practice of administering a nursing facility or residential facility or of any offense involving moral turpitude.
  - (b) Has obtained his or her license by the use of fraud or deceit.
  - (c) Violates any of the provisions of this chapter.
- (d) Aids or abets any person in the violation of any of the provisions of NRS 449.029 to 449.2428, inclusive, and section 9 of this act, as those provisions pertain to a facility for skilled nursing, facility for intermediate care or residential facility for groups.
- (e) Violates any regulation of the Board prescribing additional standards of conduct for licensees, including, without limitation, a code of ethics.
- (f) Engages in conduct that violates the trust of a patient or resident or exploits the relationship between the licensee and the patient or resident for the financial or other gain of the licensee.

- 2. If a licensee requests a hearing pursuant to subsection 1, the Board shall give the licensee written notice of a hearing pursuant to NRS 233B.121 and 241.034. A licensee may waive, in writing, his or her right to attend the hearing.
- 3. The Board may compel the attendance of witnesses or the production of documents or objects by subpoena. The Board may adopt regulations that set forth a procedure pursuant to which the Chair of the Board may issue subpoenas on behalf of the Board. Any person who is subpoenaed pursuant to this subsection may request the Board to modify the terms of the subpoena or grant additional time for compliance.
- 4. An order that imposes discipline and the findings of fact and conclusions of law supporting that order are public records.
- 5. The expiration of a license by operation of law or by order or decision of the Board or a court, or the voluntary surrender of a license, does not deprive the Board of jurisdiction to proceed with any investigation of, or action or disciplinary proceeding against, the licensee or to render a decision suspending or revoking the license.
- **Sec. 47.** Chapter 680A of NRS is hereby amended by adding thereto a new section to read as follows:
- <u>I.</u> If the Commissioner receives notification from the Department of Health and Human Services pursuant to section 1 of this act that \( \operatorname{+} \)
- 1. And an insurer is not in compliance with the requirements of subsection 4 of NRS 439.589, the Commissioner fishall immediately suspend the insurer's certificate of authority until the certificate of authority is reinstated pursuant to subsection 2.
- 2. An insurer whose certificate of authority has been suspended pursuant to subsection 1 has come into compliance with the requirements of subsection 4 of NRS 439.589, the Commissioner shall immediately reinstate the certificate of authority.] may, after notice and the opportunity for a hearing in accordance with the provisions of this title, require corrective action or impose an administrative fine in the amount prescribed by NRS 680A.200.
- 2. The Commissioner shall not suspend or revoke the certificate of authority of an insurer for failure to comply with the requirements of subsection 4 of NRS 439.589.
  - **Sec. 48.** NRS 680A.095 is hereby amended to read as follows:
- 680A.095 1. Except as otherwise provided in subsection 3, an insurer which is not authorized to transact insurance in this State may not transact reinsurance with a domestic insurer in this State, by mail or otherwise, unless the insurer holds a certificate of authority as a reinsurer in accordance with the provisions of NRS 680A.010 to 680A.150, inclusive, 680A.160 to 680A.280, inclusive, *and section 47 of this act*, 680A.320 and 680A.330.
- 2. To qualify for authority only to transact reinsurance, an insurer must meet the same requirements for capital and surplus as are imposed on an insurer which is authorized to transact insurance in this State.
- 3. This section does not apply to the joint reinsurance of title insurance risks or to reciprocal insurance authorized pursuant to chapter 694B of NRS.
  - Sec. 49. [NRS 680A.220 is hereby amended to read as follows:
- 680A.220 1. [Suspension] Except as otherwise provided in section 47 of this act, suspension of an insurer's certificate of authority must be for such period as the Commissioner specifies in the order of suspension, but not to exceed 1 year. During the suspension period the Commissioner may rescind or shorten the suspension by further order.
- 2. During the suspension period the insurer shall not solicit or write any new business in this state, but must file its annual statement, pay fees, licenses and taxes

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as required under this Code, and may service its business already in force in this state, as if the certificate of authority had continued in full force.

- 3. Upon expiration of the suspension period, if within such period the certificate of authority has not terminated, the insurer's certificate of authority is automatically reinstated unless the Commissioner finds that the causes of the suspension, being other than a past event, are continuing, or that the insurer is otherwise not in compliance with the requirements of this Code, and of which the Commissioner shall give the insurer notice not less than 30 days in advance of expiration of the suspension period.
- 4. Upon reinstatement of the insurer's certificate of authority, the authority of its agents in this state to represent the insurer is also reinstated. The Commissioner shall promptly notify the insurer and its agents in this state, of record in the Division, of such reinstatement.] (Deleted by amendment.)
- Sec. 50. Chapter 683A of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. If the Commissioner receives notification from the Department of Health and Human Services pursuant to section 1 of this act that \
- 1. And an administrator is not in compliance with the requirements of subsection 4 of NRS 439.589, the Commissioner <del>[shall immediately suspend the</del> registration of the administrator until the registration is reinstated pursuant to subsection 2.
- 2. An administrator whose registration has been suspended pursuant to subsection 1 has come into compliance with the requirements of subsection 4 of NRS 139.589, the Commissioner shall immediately reinstate the registration.] may, after notice and the opportunity for a hearing in accordance with the provisions of this chapter, require corrective action or impose an administrative fine in the amount prescribed by NRS 683A.461.
- 2. The Commissioner shall not suspend or revoke the certificate of registration of an administrator for failure to comply with the requirements of subsection 4 of NRS 439.589.
  - **Sec. 51.** NRS 683A.3683 is hereby amended to read as follows:
- 683A.3683 A producer of limited lines travel insurance and each travel retailer, or employee or authorized representative of a travel retailer, who offers or disseminates travel insurance under the license of a producer of limited lines travel insurance shall be subject to the provisions of NRS 683A.451 to 683A.520, inclusive, and section 50 of this act and chapter 686A of NRS.
  - **Sec. 52.** NRS 692A.270 is hereby amended to read as follows:
- 692A.270 The provisions of NRS 683A.321, 683A.331, 683A.341, 683A.400, 683A.451 to 683A.490, inclusive, *and section 50 of this act* and 683A.520 apply to title insurers, title agents and escrow officers.
- Sec. 53. Chapter 695C of NRS is hereby amended by adding thereto a new section to read as follows:
- 1. If the Commissioner receives notification from the Department of Health and Human Services pursuant to section 1 of this act that \[ \infty \]
- 1. A] a health maintenance organization is not in compliance with the requirements of subsection 4 of NRS 439.589, the Commissioner [shall immediately suspend the health maintenance organization's certificate of authority until the certificate of authority is reinstated pursuant to subsection 2.
- 2. A health maintenance organization whose certificate of authority has been suspended pursuant to subsection I has come into compliance with the requirements of subsection 4 of NRS 439.589, the Commissioner shall immediately reinstate the certificate of authority.] may, after notice and the opportunity for a hearing in accordance with the provisions of this chapter,

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- require corrective action or impose an administrative fine in the amount prescribed by NRS 695C.350.
- 2. The Commissioner shall not suspend or revoke the certificate of authority of a health maintenance organization for failure to comply with the requirements of subsection 4 of NRS 439.589.
  - Sec. 54. [NRS 695C.330 is hereby amended to read as follows:
- 695C.330 1. The Commissioner may suspend or revoke any certificate of authority issued to a health maintenance organization pursuant to the provisions of this chapter if the Commissioner finds that any of the following conditions exist:
- (a) The health maintenance organization is operating significantly in contravention of its basic organizational document, its health care plan or in a manner contrary to that described in and reasonably inferred from any other information submitted pursuant to NRS 695C.060, 695C.070 and 695C.140, unless any amendments to those submissions have been filed with and approved by the Commissioner;
- (b) The health maintenance organization issues evidence of coverage or uses a schedule of charges for health care services which do not comply with the requirements of NRS 695C.1691 to 695C.200, inclusive, or 695C.207:
- (c) The health care plan does not furnish comprehensive health care services as provided for in NRS 695C.060;
  - (d) The Commissioner certifies that the health maintenance organization:
    - (1) Does not meet the requirements of subsection 1 of NRS 695C.080; or
- (2) Is unable to fulfill its obligations to furnish health care services required under its health care plan:
- (e) The health maintenance organization is no longer financially responsible and may reasonably be expected to be unable to meet its obligations to enrollees or prospective enrollees;
- (f) The health maintenance organization has failed to put into effect a mechanism affording the enrollees an opportunity to participate in matters relating to the content of programs pursuant to NRS 695C.110;
- (g) The health maintenance organization has failed to put into effect the system required by NRS 695C.260 for:
- (1) Resolving complaints in a manner reasonably to dispose of valid complaints; and
- (2) Conducting external reviews of adverse determinations that comply with the provisions of NRS 605G.241 to 605G.310, inclusive:
- (h) The health maintenance organization or any person on its behalf has advertised or merchandised its services in an untrue, misrepresentative, misleading, deceptive or unfair manner;
- (i) The continued operation of the health maintenance organization would be hazardous to its enrollees or creditors or to the general public;
- (i) The health maintenance organization fails to provide the coverage required by NRS 695C.1691; or
- (k) The health maintenance organization has otherwise failed to comply substantially with the provisions of this chapter.
- [A] Except as otherwise provided in section 53 of this act, a certificate of authority must be suspended or revoked only after compliance with the requirements of NRS 695C.340.
- 3. If the certificate of authority of a health maintenance organization is suspended, the health maintenance organization shall not, during the period of that suspension, enroll any additional groups or new individual contracts, unless those groups or persons were contracted for before the date of suspension.

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If the certificate of authority of a health maintenance organization revoked, the organization shall proceed, immediately following the effective date of the order of revocation, to wind up its affairs and shall conduct no further business except as may be essential to the orderly conclusion of the affairs of the organization. It shall engage in no further advertising or solicitation of any kind-The Commissioner may, by written order, permit such further operation of the organization as the Commissioner may find to be in the best interest of enrollees to the end that enrollees are afforded the greatest practical opportunity to obtain continuing coverage for health care.] (Deleted by amendment.)

Sec. 54.3. Chapter 695I of NRS is hereby amended by adding thereto a new section to read as follows:

1. The Legislature hereby finds and declares that it is the public policy of this State that each natural person who otherwise qualifies to purchase a qualified health plan on the Exchange, regardless of his or her immigration or citizenship status, is eligible to receive the benefits of purchasing a qualified health plan on the Exchange.

2. The Executive Director, in collaboration with the Director of the Department of Health and Human Services, shall apply to the Secretary of Health and Human Services for a waiver pursuant to 42 U.S.C. § 18052 to authorize any natural person to purchase a qualified health plan on the Exchange, regardless of his or her immigration status, if the natural person would otherwise be a qualified individual.

Sec. 54.6. NRS 695I.210 is hereby amended to read as follows:

695I.210 1. The Exchange shall:

- (a) Create and administer a health insurance exchange;
- (b) Facilitate the purchase and sale of qualified health plans consistent with established patterns of care within the State:
- (c) Provide for the establishment of a program to assist qualified small employers in Nevada in facilitating the enrollment of their employees in qualified health plans offered in the small group market;
- (d) Except as otherwise authorized by a waiver obtained pursuant to NRS 695I.505 for section 54.3 of this act, make only qualified health plans available to qualified individuals and qualified small employers; and
- (e) Unless the Federal Act is repealed or is held to be unconstitutional or otherwise invalid or unlawful, perform all duties that are required of the Exchange to implement the requirements of the Federal Act.
  - 2. The Exchange may:
- (a) Enter into contracts with any person, including, without limitation, a local government, a political subdivision of a local government and a governmental agency, to assist in carrying out the duties and powers of the Exchange or the Board: and
- (b) Apply for and accept any gift, donation, bequest, grant or other source of money to carry out the duties and powers of the Exchange or the Board.
  - 3. The Exchange is subject to the provisions of chapter 333 of NRS.
  - **Sec. 55.** NRS 719.200 is hereby amended to read as follows:
- 719.200 1. Except as otherwise provided in subsection 2, the provisions of this chapter apply to electronic records and electronic signatures relating to a transaction.
- 2. The provisions of this chapter do not apply to a transaction to the extent it is governed by:
- (a) Except as otherwise specifically provided by law, a law governing the creation and execution of wills, codicils or testamentary trusts;

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- (b) The Uniform Commercial Code other than NRS 104.1306, 104.2101 to 104.2725, inclusive, and 104A.2101 to 104A.2532, inclusive; or
- (c) The provisions of NRS 439.581 to 439.595, inclusive, and section 1 of this act and the regulations adopted pursuant thereto.
- 3. The provisions of this chapter apply to an electronic record or electronic signature otherwise excluded from the application of this chapter under subsection 2 to the extent it is governed by a law other than those specified in subsection 2.
- 4. A transaction subject to the provisions of this chapter is also subject to other applicable substantive law.
  - Sec. 56. NRS 720.140 is hereby amended to read as follows:
- 720.140 1. Except as otherwise provided in this subsection, the provisions of this chapter apply to any transaction for which a digital signature is used to sign an electronic record. The provisions of this chapter do not apply to a digital signature that is used to sign an electronic health record in accordance with NRS 439.581 to 439.595, inclusive, and section 1 of this act and the regulations adopted pursuant thereto.
- 2. As used in this section, "electronic record" has the meaning ascribed to it in NRS 719.090.
- Sec. 57. There is hereby appropriated from the State General Fund to the Department of Health and Human Services the sum of \$3,000,000 for the purpose of awarding grants to providers of health care and facilities licensed pursuant to chapter 449 of NRS for the purposes of complying with the requirements of subsection 4 of NRS 439.589, as amended by section 6 of this act, and paragraph (a) of subsection 1 of NRS 629.051, as amended by section 45 of this act. To receive such a grant, a provider of health care or facility must:
- (a) Have a staff of less than 50 persons or work for an entity that has a staff of less than 50 persons, as applicable; or
- (b) Be located in a county whose population is less than 100,000, a health professional shortage area or an area with a medically underserved population in this State, or work in such a county or area, as applicable.
- Any remaining balance of the appropriation made by subsection 1 must not be committed for expenditure after June 30, 2025, by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 19, 2025, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 19, 2025.
  - 3. As used in this section:
- (a) "Area with a medically underserved population" means an area designated as such by the United States Secretary of Health and Human Services pursuant to 42 U.S.C. § 254c; and
- (b) "Health professional shortage area" means a geographic area designated as such by the United States Secretary of Health and Human Services pursuant to 42 U.S.C. § 254e; and
  - (c) "Provider of health care" has the meaning ascribe to it in NRS 629.031.
- 1. During the 2023-2024 interim, the Joint Interim Standing Committee on Health and Human Services shall study:
- (a) The feasibility of including in the State Plan for Medicaid coverage of digital health products, including, without limitation:
  - (1) Remote patient monitoring;
  - (2) Health products that use artificial intelligence;
  - (3) Digital therapeutics; and

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(4) Health information technology:

(b) Procedures for providing the coverage described in paragraph (a), including, without limitation, procedures and criteria for determining whether a digital health product is suitable for coverage;

(c) Any waivers of federal law necessary to obtain federal financial participation in the provision of the coverage described in paragraph (a); and

(d) The estimated potential costs of providing the coverage described in paragraph (a).

- 2. On or before February 1, 2025, the Joint Interim Standing Committee on Health and Human Services shall submit a report of its findings and any recommendations for legislation to the Director of the Legislative Counsel Bureau for transmittal to the 83rd Session of the Legislature.
- 3. As used in this section, "digital therapeutic" means a product, device, Internet application or other technology that uses software primarily to prevent, manage or treat a medical condition, disease or disorder.

Sec. 58.5. 1. During the 2023-2024 interim, the Joint Interim Standing Committee on Health and Human Services shall study:

(a) The feasibility of creating a natural persons index for this State and the steps necessary to create such an index. The study must include, without limitation, an analysis of the capabilities of providers of health care in this State concerning the exchange of health information.

(b) Procedures governing data registries and ways to streamline the collection of data and reduce the burden of reporting requirements applicable to providers of health care to improve collaboration between providers of health care and public health agencies in this State.

2. On or before February 1, 2025, the Joint Interim Standing Committee on Health and Human Services shall submit a report of its findings and any recommendations for legislation to the Director of the Legislative Counsel Bureau for transmittal to the 83rd Session of the Legislature.

3. As used in this section:

(a) "Data registry" includes, without limitation:

(1) The system for the reporting of information on sickle cell disease and its variants established pursuant to NRS 439.4976.

(2) The system for the reporting of information on lupus and its

variants established pursuant to NRS 439.4929.

(3) The system for the reporting of information on cancer and other neoplasms established pursuant to NRS 457.230.

(b) "Natural persons index" means a database of health information concerning natural persons who reside in this State to be used by providers of health care and public health agencies in this State to maintain and access accurate health information concerning such natural persons.

(c) "Provider of health care" means:

(1) A medical facility licensed pursuant to chapter 449 of NRS;

(2) The holder of a permit to operate an ambulance, an air ambulance or a vehicle of a fire-fighting agency pursuant to chapter 450B of NRS; or

(3) A provider of health care, as defined in NRS 629.031, who is licensed pursuant to title 54 of NRS.

Sec. 59. 1. During the 2023-2024 Interim, the Department of Health and Human Services shall:

(a) Evaluate the workforce of the Department, including, without limitation, each division thereof, and determine, for each position, whether adding, eliminating, reclassifying or revising the salary for any position within the

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- Department would increase the effectiveness or efficiency of the operations of the Department and its divisions; and

  (b) Take any action recommended by the evaluation conducted pursuant to
- (b) Take any action recommended by the evaluation conducted pursuant to paragraph (a) that does not require legislation unless the Director of the Department determines that such action is not feasible or advisable.
- 2. On or before February 1, 2025, the Department of Health and Human Services shall submit to the Director of the Legislative Counsel Bureau for transmittal to the 83rd Session of the Legislature a report of:
- (a) The results of the evaluation conducted pursuant to paragraph (a) of subsection 1:
  - (b) Any action taken pursuant to paragraph (b) of subsection 1;
- (c) Any action recommended by the evaluation conducted pursuant to paragraph (a) of subsection 1 which requires legislation and the legislation that would be required to carry out the recommendation; and
- (d) Any action recommended by the evaluation conducted pursuant to paragraph (a) of subsection 1 which the Director of the Department determined pursuant to paragraph (b) of subsection 1 to be infeasible or inadvisable, and the reasons for that determination.
- **Sec. 60.** 1. On or before July 1, 2023, the Director of the Department shall convene an advisory group to advise the Director of the Department in the adoption of regulations pursuant to NRS 439.589, as amended by section 6 of this act. The advisory group shall consist of:
  - (a) The following ex officio members:
    - (1) The Director of the Department;
- (2) The Administrator of the Division of Public and Behavioral Health of the Department;
- (3) The Administrator of the Division of Health Care Financing and Policy of the Department;
- (4) The Administrator of the Division of Welfare and Supportive Services of the Department;
  - (5) The Commissioner of Insurance;
- (6) Each district health officer appointed pursuant to NRS 439.368 or 439.400;
  - (7) The Executive Officer of the Public Employees' Benefits Program; and
  - (8) The Executive Director of the Silver State Health Insurance Exchange;
  - (b) The following members appointed by the Director:
- (1) Representatives of third parties, as defined in NRS 439.589, as amended by section 6 of this act, that provide health coverage in this State;
- (2) Representatives of hospitals, as defined in NRS 449.012, other medical facilities, as defined in NRS 449.0151, and facilities for the dependent, as defined in NRS 449.0045:
  - (3) Representatives of consumers of health care;
  - (4) Representatives of labor organizations;
  - (5) Professionals in the field of information privacy and security;
  - (6) Professionals in the field of health information technology;
- (7) Representatives of community-based organizations whose work relates to health information:
  - (8) Representatives of county and city health departments;
  - (9) Representatives of social services agencies; and
- (10) Representatives of community-based organizations whose work relates to social services.

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- Members appointed to the advisory group pursuant to paragraph (b) of subsection 1 serve at the pleasure of the Director of the Department. If a vacancy occurs, the Director shall appoint a person similarly qualified to replace that member.
- 3. Members of the advisory group serve without compensation or per diem but are entitled to receive reimbursement for travel expenses in the same amount provided for state officers and employees generally.
- 4. The Director of the Department shall serve as the Chair of the advisory group.
- A majority of the voting members of the advisory group constitutes a quorum for the transaction of business, and a majority of the members of a quorum present at any meeting is sufficient for any official action taken by the advisory group.
- Each member of the advisory group who is an officer or employee of this 6. State or a political subdivision of this State must be relieved from his or her duties without loss of regular compensation so that the officer or employee may prepare for and attend meetings of the advisory group and perform any work necessary to carry out the duties of the advisory group in the most timely manner practicable. A state agency or political subdivision of this State shall not require an officer or employee who is a member of the advisory group to make up the time the officer or employee is absent from work to carry out duties as a member of the advisory group or use annual leave or compensatory time for the absence.
- 7. The advisory group may establish subcommittees and working groups consisting of members of the advisory group or other persons to assist the advisory group in the performance of its duties.
- 8. The advisory group shall advise the Department on the development and implementation of the regulations adopted pursuant to NRS 439.589, as amended by section 6 of this act.
  - The Department shall:
- (a) On or before August 1, 2024, present at a meeting of the Joint Interim Standing Committee on Health and Human Services concerning the progress of the Department in developing and implementing the regulations adopted pursuant to NRS 439.589, as amended by section 6 of this act; and
- (b) On or before December 31, 2024, submit to the Director of the Legislative Counsel Bureau for transmittal to the 83rd Regular Session of the Legislature a report concerning the progress of the Department in developing and implementing the regulations adopted pursuant to NRS 439.589, as amended by section 6 of this
- As used in this section, "Department" means the Department of Health and Human Services.
- Sec. 61. [1. On or before April 1, 2024, the Chief Data Officer of the Hub
  - (a) Compile a report concerning:
- (1) Policies and practices to ensure the privacy, security, quality confidentiality of the information collected, analyzed and maintained by the Hub, including, without limitation, policies and practices to protect identifiable information and other sensitive information;
  - (2) Organizational structures, policies and practices for:
- (I) Making information collected, analyzed and maintained by the Hub available to state agencies, political subdivisions of this State, educational institutions, researchers, nongovernmental organizations and the general public; and

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and maintained by the Hub; and

(3) Policies and procedures to ensure that information collected, analyzed and maintained by the Hub is relevant and readily available to educational institutions, researchers, nongovernmental organizations and the general public.

and governmental and nongovernmental users of information collected, analyzed

(II) Ensuring ongoing and continuous communication between the Hub

- (b) Submit the report to the Director of the Legislative Counsel Bureau for transmittal to the Joint Interim Standing Committee on Health and Human Services.
   2. The Chief Data Officer of the Hub appointed pursuant to section 23 of this act shall appoint and serve as the Chair of an advisory group to assist in developing the report described in subsection 1. The advisory group must consist of:
  - (a) The Director of the Department of Health and Human Services;
  - (b) The Chief Data Officer of the Hub:
- (c) At least two representatives of nonprofit entities engaged in research relating to public health, the provision of health care, social determinants of health or similar topics; and
- (d) At least two representatives of organizations that, in the regular course of business, use information relating to public health, the provision of health eare, social determinants of health or similar topics.
- 3. Members of the advisory group appointed pursuant to subsection 2 serve without compensation and are not entitled to the per diem and travel expenses provided for state officers and employees generally.
- 4. A member of the advisory group appointed pursuant to subsection 2 who is an officer or employee of this State or a political subdivision of this State must be relieved from his or her duties without loss of regular compensation so that the person may prepare for and attend meetings of the advisory group and perform any work necessary to carry out the duties of the advisory group in the most timely manner practicable. A state agency or political subdivision of this State shall not require an officer or employee who is a member of the advisory group to make up the time he or she is absent from work to carry out his or her duties as a member of the advisory group or use annual vacation or compensatory time for the absence.
- 5. As used in this section, "Hub" means the Nevada Innovation Hub established by section 23 of this act.] (Deleted by amendment.)
- Sec. 62. 1. [Notwithstanding the provisions of subsection 2 of NRS 439.587, as that section exists on the effective date of this section, the Director of the Department of Health and Human Services shall not enter into a contract pursuant to that subsection with a health information exchange to serve as the statewide health information exchange on or after the effective date of this section.
- 2.1 Notwithstanding the amendatory provisions of section [4] 4.5 of this act, if the Director of the Department of Health and Human Services has contracted with a health information exchange to serve as the statewide health information exchange pursuant to subsection 2 of NRS 439.587, as that section exists on [the effective date of this section.] June 30, 2025, and that contract is effective on July 1, [2024,] 2025, the contract remains valid until the expiration of the contract but may not be renewed.
- [3.] 2. As used in this section, "health information exchange" has the meaning ascribed to it in NRS 439.584.
- **Sec. 63.** 1. Notwithstanding the amendatory provisions of sections 1, 6, 9 and 45 of this act, persons and entities subject to the provisions of subsection 4 of NRS 439.589, as amended by section 6 of this act, other than hospitals and physician group practices, are not required to comply with those provisions until July 1, 2025.
  - 2. As used in this section:

- (a) "Hospital" has the meaning ascribed to it in NRS 449.012.
- (b) "Physician group practice" means any business entity organized for the purpose of the practice of medicine or osteopathic medicine by more than one physician.
- **Sec. 64.** The provisions of subsection 1 of NRS 218D.380 do not apply to any provision of this act which adds or revises a requirement to submit a report to the Legislature.
- **Sec. 65.** The provisions of NRS 354.599 do not apply to any additional expenses of a local government that are related to the provisions of this act.
- **Sec. 66.** The Legislature hereby finds that each abatement provided by this act from any ad valorem tax on property or excise tax on the sale, storage, use or other consumption of tangible personal property sold at retail:
- 1. Will achieve a bona fide social or economic purpose and the benefits of the abatement are expected to exceed any adverse effect of the abatement on the provision of services to the public by the State or a local government that would otherwise receive revenue from the tax from which the abatement would be granted; and
- 2. Will not impair adversely the ability of the State or a local government to pay, when due, all interest and principal on any outstanding bonds or any other obligations for which revenue from the tax from which the abatement would be granted was pledged.
- **Sec. 67.** 1. This section and sections 7 [1] and 8 [and 62] of this act become effective upon passage and approval.
- 2. Sections 18, 19, 20, 30 to 38, inclusive, 40, 41, 42, 57 to 60, inclusive, 64 and 66 of this act become effective on July 1, 2023.
- 3. Sections 21 to 27, inclusive, 39, 43 , 54.3, 54.6 and 61 of this act become effective:
- (a) Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
  - (b) On January 1, 2024, for all other purposes.
- 4. Sections 1 to <u>4, [6,]</u> inclusive, <u>5, 6,</u> 9 to 16, inclusive, 44, 45, 46, 55, 56 and 63 of this act become effective:
- (a) Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
  - (b) On July 1, 2024, for all other purposes.
  - 5. Sections 17, 28, 29, 47 to 54, inclusive, and 65 of this act become effective:
- (a) Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and
  - (b) On July 1, 2025, for all other purposes.
  - 6. Sections 4.5 and 62 of this act becomes effective on July 1, 2025.
  - 7. Sections 31 to 38, inclusive, of this act expire by limitation on July 1, 2053.
  - 8. Section 60 of this act expires by limitation on January 1, 2025.