

Senate Bill No. 118—Committee on
Health and Human Services

CHAPTER.....

AN ACT relating to public health; authorizing the creation of a health district by certain counties which are not physically adjacent; making an appropriation; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law creates a health district in any county whose population is 700,000 or more (currently Clark County), which has jurisdiction over all public health matters in the health district. (NRS 439.361, 439.362, 439.366) Existing law authorizes the creation of a health district with similar jurisdiction in counties whose population is less than 700,000 (currently all counties other than Clark County), subject to approval by the State Board of Health, by affirmative vote of: (1) the boards of county commissioners of two or more adjacent counties; (2) the governing bodies of two or more cities or towns within any county; or (3) the board of county commissioners and the governing body or bodies of any incorporated city or cities, town or towns, in such a county. (NRS 439.370) **Sections 7 and 8** of this bill remove the requirement that two counties must be physically adjacent in order to create a health district.

Section 9.2 of this bill makes an appropriation to the Division of Public and Behavioral Health of the Department of Health and Human Services for allocation to specified entities for the improvement of public health. **Section 9.2** requires each such entity to submit a report to the Interim Finance Committee at the end of Fiscal Year 2024-2025 and Fiscal Year 2025-2026, respectively, concerning the use of the allocated money.

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

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

Sections 1-6. (Deleted by amendment.)

Sec. 7. NRS 439.370 is hereby amended to read as follows:

439.370 By affirmative vote of:

1. The boards of county commissioners of two or more ~~adjacent~~ counties;
2. The governing bodies of two or more cities or towns within any county; or
3. The board of county commissioners and the governing body or bodies of any incorporated city or cities, town or towns, in such county,

➔ and with the approval of the State Board of Health, there may be created a health district with a health department consisting of a district health officer and a district board of health.



Sec. 8. NRS 439.383 is hereby amended to read as follows:
439.383 When two or more [adjacent] counties establish a district board of health, all county boards of health in such district shall thereupon be abolished.

Secs. 8.5 and 9. (Deleted by amendment.)

Sec. 9.2. 1. There is hereby appropriated from the State General Fund to the Division of Public and Behavioral Health of the Department of Health and Human Services the sum of \$15,000,000 for allocation pursuant to subsection 2 for the improvement of the public health.

2. On or before August 1, 2024, the Division of Public and Behavioral Health shall allocate the money appropriated by subsection 1 to the following entities based on the following prescribed percentages of the total appropriated money:

- (a) The Central Nevada Health District, 1.3 percent;
- (b) The Washoe County Health District, 16 percent;
- (c) The Southern Nevada Health District, 73 percent; and
- (d) The Division of Public and Behavioral Health or a designee of the Division, 9.7 percent.

3. An entity to which money is allocated pursuant to subsection 2 shall:

- (a) Evaluate the public health needs of residents of the area under the jurisdiction of the entity;
- (b) Determine the level of priority of the public health needs identified pursuant to paragraph (a);
- (c) Expend the allocated money in accordance with the levels of priority identified pursuant to paragraph (b); and
- (d) Not later than 90 days after the end of Fiscal Year 2024-2025 and 2025-2026, respectively:

(1) Prepare a report which must include, without limitation:

(I) A description of the process used by the entity pursuant to paragraph (a) to evaluate the public health needs of residents of the area under the jurisdiction of the entity and the public health needs identified through that process;

(II) A description of the process used by the entity pursuant to paragraph (b) to determine the level of priority of the public health needs identified pursuant to paragraph (a) and the levels of priority assigned to those public health needs through that process;

(III) A description of each expenditure of the allocated money made by the entity pursuant to paragraph (c); and

(IV) The unexpended balance of the allocated money at the end of the fiscal year.



(2) Submit the report to the Director of the Legislative Counsel Bureau for transmittal to the Interim Finance Committee.

4. An entity to which money is allocated pursuant to subsection 2 shall not use the money to replace or supplant money available from other sources.

5. The portion of any money remaining at the end of Fiscal Year 2024-2025 from an allocation of the money appropriated by subsection 1 that is not committed for expenditure by June 30, 2025, must be carried forward to Fiscal Year 2025-2026 to be used for the same purpose. Any remaining balance of the allocated money carried forward to Fiscal Year 2025-2026 must not be committed for expenditure after June 30, 2026, and must be reverted to the State General Fund on or before September 18, 2026.

Sec. 9.5. (Deleted by amendment.)

Sec. 10. 1. This section and sections 1 to 9, inclusive, and 9.5 of this act become effective upon passage and approval.

2. Section 9.2 of this act becomes effective on July 1, 2024.

