

5 PPC BDR Proposals for 2023 Session- Summary

Subject 1: Improve Health Care Access

PPC Goal: Researching possible changes to state or local policy in this State that may improve the quality, accessibility or affordability of health care in this State - Increasing access to health care for uninsured populations in this State, including, without limitation, retirees and children - NRS 439.916.1(i)(7).

- **Topic 1** (*Leanne McAllister, Yarlyny Roa-Dugan, Tyler Winkler*):
 - Explore opportunities to provide basic health care coverage to infants, children and young adults up to age 26 who are ineligible for full Medicaid coverage under federal law due to their current residency or immigration status. This includes hiring an expert vendor to develop recommendations to the PPC on options to achieve this goal with non-federal, available revenue sources, including braiding local government, private grant, philanthropic, and/or state resources to support this effort. Among the options considered by the vendor shall include a limited, state-funded Medicaid benefit for this population, similar to California’s recent effort to cover this population that leverages limited federal Medicaid funds available to this population for emergency services as part of this benefit. The vendor shall also be asked to conduct a return-on-investment study of at least two options selected by the PPC to inform future proposals and budget requests as they relate to addressing the growth in health care costs related to the health status of this population. The PPC must procure a vendor to complete the analysis at no greater than \$200,000.

Subject 2: Increase Transparency and Address Patient Affordability

PPC Goal: Examining the cost of health care and the primary factors impacting those costs [NRS 439.916.1(c)].

- **Topic 1** (*Sandra Ruybalid, Bobbette Bond, Lilnetra Grady*):
 - Codify the Nevada Health Care Cost Growth Benchmark Program as set forth in Executive Order 2021-29, and include a requirement to measure and report on primary care spending.

PPC Goal: Researching possible changes to state or local policy in this State that may improve the quality, accessibility or affordability of health care in this State – Increasing transparency concerning the cost or provision of health care [NRS 439.916.1(i)(2)].

- **Topic 3** (*Bobbette Bond*):
 - Address the rising costs created by health care market consolidation by prohibiting hospitals and possibly some other facilities, such as freestanding ERs, from hiring physicians. Revise the exemptions now in law to ensure only community hospitals and academic institutions are exempted.
- **Topic 6** (*Tyler Winkler*):
 - Create a Prescription Drug Affordability Board. Expand on NRS 439B.630 and set “allowable rates” for certain high-cost drugs identified by the Board.
 - *Note: Commissioner Winkler has **withdrawn** the following language from this BDR topic (8/8/22): “Create a Health Plan Review Board, with similar function as above but for commercial health insurance plans.”*

Subject 3: Improve Health Care Quality

PPC Goal: Reviewing proposed and enacted legislation, regulations and other changes to state and local policy related to health care in this State [NRS 439.916.1(h)].

- **Topic 1** (*Mason Van Houweling, Bobbette Bond, Tyler Winkler*):
 - a. *Mandating that all providers of health care and custodians of healthcare records implement an interoperable electronic health care records system.*
 - i. NRS 629.051 states that healthcare records “may be retained, authenticated, and stored” in an electronic computer system. Mandating providers to maintain an electronic healthcare record to assist patients with access and sharing of their medical records.
 - ii. Support/consider mandating providers maintaining an electronic healthcare record or other tools to assist patients. Ensure categories of clinical information to be reported, including, claims data, diagnostic data, (demographics, clinical care documents, lab results, or radiology reports).
 - iii. Allow for a provision to permit a period of 5 years for compliance with mandate for rural providers or those lacking the resources.
 - b. *Expand immunity for provider compliance with providing and receiving electronic medical records:*
 - i. To encourage participation and alleviate concerns of risks, expand immunity under NRS 439.593 to health care providers for acts related to submitting, accessing, utilizing, disclosing, or relying upon information within the health information exchange.
 - c. *Revision of NRS 439.584 with relation to HIE and other areas identified:* Ensure this recommendation is compliant with current State and Federal law. Maintain language that supports exchange of patient medical records electronically.
 - d. *In addition, PPC supports exploring funding options:*
 - i. Provide funding for technical support and resources for providers to allow for integration of systems and ensure fully electronic record access and exchange of information.
 - ii. Provide funding for patient education with relation to access.
 - iii. PPC recommends maintaining current HIPAA rules expanded under the Emergency Waivers to allow for continued patient access to information.