

**PEBP Legislative Tracking
80th Legislative Session**

Bill Number & Description	Impact to PEBP	Bill Status	
<p>AB70 (BDR 19-421) Revises provisions governing the Open Meeting Law. This bill proposes the following changes:</p> <ul style="list-style-type: none"> • The chair of the public body must ensure members of the body and public can hear and observe via teleconference or videoconference. • Any action taken by a public body arising out of any such gathering must be taken in a meeting held in compliance with the law. • An agenda must include an item on which action may be taken by the public body to approve the agenda before proceeding. • Requires draft minutes of a meeting be available for inspection within 30 working days after adjournment until the body approved the minutes. • Each member of the public body who (1) attends the meeting where any violation of the law occurs; and (2) has knowledge of the violation is guilty of a misdemeanor and subject to an administrative fine, which is graduated for multiple offenses. • An exception may be granted where the member violated the law based on legal advice provided by an attorney employed or retained by the public body. <p>Effective Date: Not specified yet.</p>	Adding small requirements to PEBP Board meetings to adhere to a revised Open Meeting Law.	11/20/18: Prefiled. 2/4/19: Read first time. To committee.	
	Board Position		
	Fiscal Note		
	No fiscal impact.		

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Bill Number & Description	Impact to PEBP	Bill Status
<p><u>AB170 (BDR 57-278)</u> Revises provisions relating to health insurance coverage. This bill proposes the following changes:</p> <ul style="list-style-type: none"> • A MCO (and PEBP) shall offer and issue a health care plan regardless of health status of a person (due to preexisting conditions, claims history, genetic information, increased health risks) • Individual and Small Group Marketplace Plans must charge and honor the same plan coverage out of network as in network if a member cannot get an appointment within 30 days or 25 miles from their home. <p>Effective Date: January 1, 2020.</p>	<p>Impact to all PEBP plans requiring PEBP to offer health coverage without restrictions on health status, claims, etc. This bill provides protections if the ACA were to ever go away.</p> <p>Board Position</p> <p>Fiscal Note</p> <p>No fiscal impact. PEBP does this today.</p>	<p>2/18/19: Read first time. Referred to Committee on Commerce and labor. To Printer</p> <p>2/19/19: From printer. To committee.</p>

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>AB185 (BDR 57-277)</u> Revises provisions relating to insurance coverage of prescription drugs. This bill proposes the following changes:</p> <ul style="list-style-type: none"> • Requires an insurer or health benefit plan which provides prescription coverage to allow an insured to credit toward any applicable deductible the amount paid by the insured for a covered prescription drug for which the insured paid the cash price instead of using the coverage and paying the deductible, copayment, or coinsurance required for the prescription drug. <p>Effective Date: January 1, 2020.</p>	<p>Requires PEBP to honor cash payments that are less than plan design limits. There is no language addressing in-network versus out-of-network and PEBP does not provide prescription coverage out-of-network.</p> <p>Board Position</p>	<p>2/18/19: Read first time. Referred to Committee on Commerce and labor. To Printer</p> <p>2/19/19: From printer. To committee.</p>

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	Fiscal Note	
	Cannot be determined. PEBP cannot track medical/RX accumulators for out-of-network pharmacies.	

Bill Number & Description	Impact to PEBP	Bill Status			
<p><u>AB225 (BDR 57-937)</u> Revises provisions relating to health insurance. This bill proposes the following changes:</p> <ul style="list-style-type: none"> • A health carrier which issues a network plan must treat any deductible, copayment or coinsurance paid by a covered person to an out-of-network provider of health care for medically necessary emergency services as if the deductible, copayment or coinsurance were paid to a participating provider of health care for the purposes of determining the annual maximum deductible, copayment or coinsurance that the covered person must pay pursuant to the network plan. • This bill prohibits a health carrier from retroactively denying a claim for payment for health care services because of the ineligibility of the covered person if the health carrier provided prior authorization for the health care services and an authorization number authorizing the health care services. <p>Effective Date: January 1, 2020.</p>	<p>PEBP allows out-of-network emergency services to be treated as in-network for accumulators, however the member could still be balance billed (which this bill is silent on).</p> <p>PEBP only retroactively terminates members for ACA approved circumstances (nonpayment and fraud).</p> <tr> <td data-bbox="1094 992 1535 1032">Board Position</td> <td data-bbox="1094 1032 1535 1105"></td> </tr> <tr> <td data-bbox="1094 1105 1535 1146">Fiscal Note</td> <td data-bbox="1094 1146 1535 1247">No fiscal impact.</td> </tr>	Board Position		Fiscal Note	No fiscal impact.
Board Position					
Fiscal Note	No fiscal impact.				

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<u>SB14 (BDR 18-186)</u> Provides for the removal of certain gubernatorial appointees under certain circumstances. This bill proposes the following changes: <ul style="list-style-type: none"> • Any gubernatorial appointee to any board, commission or similar body to be a civil officer of this State. • Authorizes the Governor to remove such an appointee for misconduct in office, incompetence or neglect of duty unless a specific statute requires other removal procedures. Effective Date: Upon passage and approval.	PEBP Board members could be removed by the Governor for neglect of duty/misconduct/etc.	11/15/18: Prefiled. 2/4/19: Read first time. To committee.	
	Board Position		
	Fiscal Note		
			No fiscal impact.

Bill Number & Description	Impact to PEBP	Bill Status	
<u>SB90 (BDR 57-448)</u> Making various changes relating to the health of children. <ul style="list-style-type: none"> • Requires all health insurers including Medicaid, CHIP, and state and local governments to include in each plan coverage for a hearing aid for any insured who is under 18 years of age. • Requires public or private schools to allow the school to obtain and maintain medication to treat asthma and prescribes requirements for the maintenance, administration, and distribution of such medication. • Revises conditions related to lead tests in children. • Appropriates money to award vouchers to participants of the special supplement nutrition program for women, infants, and children. Effective Date: 7/1/19	PEBP's CDHP and HMO plans already comply with this bill. PEBP recommends aligning the EPO plan in PY20 with the CDHP/HMO plans.	1/24/19: Prefiled 2/4/19: Read first time. To committee. 2/25/19: Notice of eligibility for exemption.	
	Board Position		
	Fiscal Note		
			No Fiscal Impact.

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Bill Number & Description	Impact to PEBP	Bill Status
<p><u>SB200 (BDR 57-43)</u> Requires health insurers to provide coverage for certain services and equipment.</p> <ul style="list-style-type: none"> Requires health insurers to provide coverage for various hearing screening tests, examinations, and devices. Requires plan to replace hearing aid devices that are reported lost/broken every 12 months. <p>Effective Date: January 1, 2020.</p>	<p>PEBP's CDHP and HMO plans Provide hearing aid devices. PEBP will recommend the EPO plan align as well. The current replacement schedule is 3 years. This bill reduces it to 1 increasing costs (see fiscal note below).</p>	<p>2/18/19: Read first time. Referred to Committee on Commerce and labor. To Printer</p> <p>2/19/19: From printer. To committee.</p>
	<p>Board Position</p>	
	<p>Fiscal Note</p>	
	<p>FY 2020 – \$283,950 FY 2021 – \$351,450 FY 2022 – \$418,950 FY 2023 – \$486,450</p>	

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>SB226 (BDR 38-549)</u> Makes various changes relating to health insurance. This bill proposes the following changes:</p> <ul style="list-style-type: none"> Requires an insurer or health benefit plan which provides prescription coverage to use the formulary developed by HHS and provide for prescription drugs to be obtained through the purchasing agreements negotiated by the Department Allow an insured to credit any amount saved by using a coupon for prescription drugs toward any copay or 	<p>Requires the formulary developed by HHS to be followed and RX coupons to apply to copay and coinsurance.</p>	<p>2/18/19: Read first time. Referred to Committee on Commerce and labor. To Printer</p> <p>2/19/19: From printer. To committee.</p>
	<p>Board Position</p>	
	<p>Fiscal Note</p>	
	<p>FY18-19: \$2,000,000 FY 19-20: \$2,200,000 FY 20-21: \$2,400,000</p>	

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<p>coinsurance that the insured is required to pay for the prescription drug.</p> <ul style="list-style-type: none"> Allows opt in to participate in a purchasing agreement negotiated by or pursuant to a contract with the Department. <p>Effective Date: January 1, 2020.</p>	<p>Future Biennia: \$5,400,000</p>	
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Bill Number & Description	Impact to PEBP	Bill Status				
<p><u>SB235 (BDR 57-734)</u> Revises provisions relating to health insurance coverage. This bill proposes the following changes:</p> <ul style="list-style-type: none"> A managed care organization shall offer and issue a health care plan to any person regardless of the health status of the person or any dependent of the person. Align Nevada law with federal law and require all insurers to offer health insurance coverage regardless of the health status of a person. Prohibit an insurer from denying, limiting or excluding a benefit or requiring an insured to pay a higher premium, deductible, coinsurance or copay based on the health status of the insured or the covered spouse or dependent of the insured. <p>Effective Date: January 1, 2020.</p>	<p>Impact to all PEBP plans requiring PEBP to offer health coverage without restrictions on health status, claims, etc. This bill provides protections if the ACA were to ever go away.</p> <table border="1" data-bbox="1094 808 1549 1036"> <tr> <th data-bbox="1094 808 1549 847">Board Position</th> </tr> <tr> <td data-bbox="1094 847 1549 922"></td> </tr> <tr> <th data-bbox="1094 922 1549 961">Fiscal Note</th> </tr> <tr> <td data-bbox="1094 961 1549 1036">No fiscal impact. PEBP does this today.</td> </tr> </table>	Board Position		Fiscal Note	No fiscal impact. PEBP does this today.	<p>2/25/19: Read first time. Referred to Committee on Health and Human Services.</p>
Board Position						
Fiscal Note						
No fiscal impact. PEBP does this today.						

Bill Number & Description	Impact to PEBP	Bill Status
<p>BDR 57-966</p>	<p>Covering screening and treatment of fetal alcohol spectrum disorder. CDHP/EPO</p>	<p>Currently only in BDR status.</p>

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<p>Requires certain policies of health insurance and health care plans to provide coverage for screening for and treatment of fetal alcohol spectrum disorder.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • A health benefit plan must provide coverage for screening for and diagnosis of fetal alcohol spectrum disorders and for treatment of fetal alcohol spectrum disorders to persons covered by the policy of group health insurance under the age of 18 years or, if enrolled in high school, until the person reaches the age of 22 years. • Requires certain health care plans and policies of insurance to also provide an option or a requirement, as applicable, of coverage for screening for, diagnosis of and treatment of fetal alcohol spectrum disorders in certain circumstances. • A maximum benefit of the actuarial equivalent of \$72,000 per year for applied behavior analysis treatment; and Copayment, deductible and coinsurance provisions and any other general exclusion or limitation of a policy of group health insurance to the same extent as other medical services or prescription drugs covered by the policy. <p>Effective Date: January 1, 2020.</p>	plans currently provide this coverage.	
	Board Position	
	Fiscal Note	
	No fiscal impact.	

Bill Number & Description	Impact to PEBP	Bill Status
<p>*AB408 (BDR 38-957) (Previous Session Bill)</p> <p>Revises provisions relating to Medicaid and health insurance.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • Aligns Nevada law with federal law and require all insurers to offer health insurance coverage regardless of the health status of a person and prohibits an insurer from denying, limiting or 	<p>This bill in effect ensures the State of Nevada has the same provisions of the Affordable Care Act (ACA) if the ACA is repealed in part or in full.</p>	<p>2/4/19: Returned from Secretary of State.</p> <p>2/6/19: Bill read with Governor's veto message. Placed on Chief Clerk's desk.</p>

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<p>excluding a benefit or requiring an insured to pay a higher premium, deductible, coinsurance or copay based on the health status of the insured or the covered spouse or dependent of the insured.</p> <ul style="list-style-type: none"> • Requires all insurers to extend coverage for the covered adult child of an insured until such child reaches 26 years of age to align Nevada law with federal law. • Requires all health insurance plans to include coverage for maternity and newborn care aligning Nevada law with federal law. • Requires all health insurance plans to include coverage, without any higher deductible or any copay or coinsurance, for certain preventive health care services for women, adults and children, including, without limitation, screenings and tests for certain diseases, counseling, contraceptive drugs, devices and services as well as vaccinations aligning Nevada law with federal law. • Requires the Director of the Department of Health and Human Services to adopt regulations specifying the preventive health care services which are required to be covered by insurers and that these requirements must include, without limitation, the preventive health care services currently required by federal law. • Insurers cannot discriminate on various protections. <p>Effective Date: Upon passage and approval for the purpose of adopting any regulations and performing any preparatory administrative tasks necessary to carry out the provisions of this act; and January 1, 2018, for all other purposes. (Dates have not been amended in bill yet)</p>	Board Position	
	Fiscal Note	No Fiscal Impact.