

**PEBP Legislative Tracking
81st Legislative Session**

Bill Number & Description	Impact to PEBP	Bill Status
<p>AB2 (BDR 18-437) Revises provisions relating to appointments to public bodies. This bill proposes the following changes removing the below:</p> <ul style="list-style-type: none"> The provision of subsection 6 of NRS 232A.020 do not apply to the appointment by the Governor of the members of the Council. Except as otherwise provided in NRS 232.162, the Governor shall not appoint a person to a board, commission, or similar body if the person is a member of any other board, commission, or similar body. The provisions of subsection 6 of NRS 232A.020 do not apply to member of the Advisory Council who also serve as county commissioners, and the Governor may appoint any such member of the Advisory Council to one other board, commission, or similar body. <p>Effective Date: Upon passage and approval.</p> <p>Proposed Amendment: Limits the number of allowed simultaneous gubernatorial appointments to three boards and deletes the conforming changes relating to the Sagebrush Ecosystem Council and the Land Use Planning Advisory Council such that each council is not subject to the three board gubernatorial appointment limitation.</p>	<p>Removes the prohibition against the Governor appointing a person to more than one board, commission, or similar body at the same time.</p>	<p>11/18/20: Read first time. Referred to Committee on Government Affairs. To Printer 12/22/20: From Printer</p>
	<p>Board Position</p>	
	<p>03/11/21 Neutral</p>	<p>02/01/21: Read first time, Assembly: Journal Senate: Not discussed</p>
	<p>Fiscal Note</p>	
<p>No Fiscal Note Requested or Submitted.</p>	<p>02/04/2: To Committee. Assembly: Not discussed Senate: Not discussed</p> <p>02/11/21: Bill presented to Assembly Government Affairs, Mentioned not agendized.</p> <p>2/15/21: Bill presented to Assembly Committee Government Affairs & Senate Government Affairs.</p> <p>03/23/21: Bill presented to Assembly Government Affairs, mentioned not agendized.</p> <p>03/24/21: Work Session Bill presented to Assembly Government Affairs, Amend, and do pass as amended.</p>	

**PEBP Legislative Tracking
81st Legislative Session**

AB2 Bill Sponsors

Assembly Committee on Government Affairs

Bill Number & Description	Impact to PEBP	Bill Status
<p>AB39 (BDR 19-333) Revises provisions relating to public records.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • “Public book or record” or “public record”: Means all recorded information, regardless of form or characteristics, made or received by a governmental entity under law or in connection with the transaction of public business and preserved or appropriate for preservation by the governmental entity or its successor as evidence of the organization, functions, policies, decisions, procedures, operations or other activities of the governmental entity or because of the information value of data in the recorded information. • Does not include, without limitation: A record that reflects the internal predecisional deliberations of a governmental entity or its officers or employees or predecisional deliberations between officers and employees of one governmental entity and another governmental entity, including, without limitation, any research, memoranda or other documents used in predecisional deliberations. • Notes and working papers prepared by or for a public officer or employee used solely for that officers of employee’s own personal use and other materials that do not have an official purpose, including, without limitation, text and electronic mail messages sent or received for personal purposes. 	<p>Changes the definition of public record and may expand the scope of records requests received.</p>	<p>11/18/20: Prefiled. Referred to Committee on Government Affairs. To Printer</p>
	<p>Board Position</p>	<p>12/22/20: from Printer</p>
	<p>3/11/2021: Neutral</p>	<p>02/01/21: Read first time.</p>
	<p>Fiscal Note No Fiscal Note Requested or Submitted.</p>	<p>Assembly: Journal Senate: Not discussed</p> <p>02/04/21: To Committee Assembly: Not discussed Senate: Not discussed</p>

**PEBP Legislative Tracking
81st Legislative Session**

Effective Date: Upon passage and approval.		
<u>AB39 Bill Sponsors</u> Assembly Committee on Government Affairs		

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>AB48 (BDR 23-321)</u> Authorizes certain retired public officers and employees to reinstate insurance under the Public Employees' Benefit Program (PEBP) This bill proposes the following changes:</p> <ul style="list-style-type: none"> Pursuant to NRS 1A.350 or 1A.480, or 286.510 or 286.620, from employment with a county, school district, municipal corporation, political subdivision, public corporation or other local governmental agency at the time of the request for reinstatement and: Was enrolled in the Program as a retired public officer or employee on November 30, 2008; and is enrolled in Medicare A provided pursuant to Part A of Title XVIII of Social Security Act, 42 U.S.C. 1395c et seq., and Medicare Part B provided pursuant to Part B of Title XVIII of the Social Security Act, 42 U.S.C 1395j et seq., at the time of the request for reinstatement. <p>Effective Date: This act becomes effective on July 1, 2021.</p>	Will allow Non-State Retirees a one time comeback for reinstatement like State retirees currently have.	11/18/20: Prefiled. Referred to Committee on Government Affairs. To Printer
	Board Position	12/22/20: from Printer
	3/11/2021: Support	02/01/21: Read first time Assembly: Journal Senate: Not discussed
	Fiscal Note	No Fiscal Note Requested or Submitted.
		02/26/21: Bill presented to Committee on Government Affairs
		03/10/21: Work Session Assembly Committee on Government Affairs Recommendation: Do pass
		03/11/21: Read Second time

**PEBP Legislative Tracking
81st Legislative Session**

		<p>Assembly: Journal Senate: No Floor Session</p> <p>03/12/21: Read third time. Passed (Yeas: 39, Nays: 3. To Senate Assembly: Journal Senate: No Floor Session</p> <p>03/15/21: In Senate. Read first time. Referred to Committee on Government Affairs. To committee Assembly: Not discussed Senate: Journal</p>
<p><u>AB48 Bill Sponsors</u> Assembly Committee on Government Affairs</p>		

Bill Number & Description	Impact to PEBP	Bill Status			
<p>AB 164 (BDR 40-239)</p> <ul style="list-style-type: none"> Requires the Chief Medical Officer to issue a standing order authorizing a pharmacist to dispense a self-administered hormonal contraceptive to any patient Prohibits certain providers of health care from requiring a screening for cervical cancer more frequently than recommended to receive a prescription for a self-administered hormonal contraceptive. 	<p>The ACA already requires contraceptive coverage at 100% so PEBP does not expect an impact to the program.</p> <table border="1" data-bbox="1026 1247 1451 1393"> <tr> <th data-bbox="1026 1247 1451 1286">Board Position</th> </tr> <tr> <td data-bbox="1026 1286 1451 1360"></td> </tr> <tr> <th data-bbox="1026 1360 1451 1393">Fiscal Note</th> </tr> </table>	Board Position		Fiscal Note	<p>2/22/21: Read first time. Referred to Committee on Health and Human Services To Printer Assembly: Journal Senate: Not discussed</p> <p>02/23/21: From printer. To Committee Assembly: Not discussed</p>
Board Position					
Fiscal Note					

**PEBP Legislative Tracking
81st Legislative Session**

<ul style="list-style-type: none"> • Authorizes a pharmacist to dispense a self-administered hormonal contraceptive to any patient. <p>Effective Date: This act becomes effective on July 1, 2021</p>	<p>PEBP has reviewed the bill and has determined there will be no impact.</p>	<p>Senate: No Floor Session</p>
<p><u>AB164 Bill Primary Sponsor</u></p> <ul style="list-style-type: none"> • Assemblyman Flores 		

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>AB178 (BDR 57-71)</u> Requires an insurer to take certain actions relating to the acquisition of prescription drugs for an insured who resides in an area for which a declared disaster or state of emergency is in effect.</p> <ul style="list-style-type: none"> • Authorizes a pharmacist to dispense a prescription drug to a patient who resides in such an area in an amount greater than is authorized by the prescribing practitioner under certain conditions. • Waives any restrictions on the time period within which a prescription may be refilled for an insured who resides in the area to which a state of emergency or declaration of disaster applies if the insured requests the refill within a certain time. • Authorizes payment for a supply of a covered prescription drug for up to 30 days. <p>Effective Date: This act becomes effective on July 1, 2021</p>	<p>Requires PEBP to waive restrictions on the time period which a prescription may be refilled during a state of emergency.</p> <p>Board Position</p> <p>3/11/2021: Neutral</p> <p>Fiscal Note</p> <p>PEBP has reviewed the bill and has determined there will be no impact.</p>	<p>2/25/21: Read first time. Referred to Committee on Commerce and Labor To Printer Assembly: Journal Senate: Not discussed</p> <p>02/26/21: From printer. To Committee Assembly: Not discussed Senate: No Floor Session</p> <p>03/10/21: Bill presented to Assembly Commerce and Labor</p>
<p><u>AB178 Bill Sponsors</u></p> <p><u>Primary Sponsors</u></p> <ul style="list-style-type: none"> • Assemblywoman Melissa Hardy 		

**PEBP Legislative Tracking
81st Legislative Session**

<ul style="list-style-type: none"> • Assemblywoman Robin Titus • Senator Joseph Hardy <p><u>Co-Sponsors</u></p> <ul style="list-style-type: none"> • Assemblywoman Jill Tolles • Senator Carrie Buck • Senator Scott Hammond

Bill Number & Description	Impact to PEBP	Bill Status	
<p>AB181 (BDR 40-522) Revises provisions relating to mental health. This bill proposes the following changes:</p> <ul style="list-style-type: none"> • The State Board of Health shall adopt regulations requiring medical facilities, facilities for the dependent and facilities which are required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed to report information relating to suicide to the Chief Medical Officer or his or her designee. • The regulations must prescribe: • The facilities that are required to make reports; • The information that must be reported; and • The time within which such a report must be made. <p>Effective Date: 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 on January 1, 2022, for all other purposes</p> <p>Proposed Amendment:</p>	<p>On or before July 1 of each year, a report shall be submitted to the Commissioner of Insurance which includes information relating to mental health treatments for each health benefit plan that provides coverage to residents of Nevada.</p>	<p>02/26/21: Read first time. Referred to Committee on Health and Human Services. To printer. Assembly: Journal Senate: No Floor Session</p> <p>03/01/21: From Printer. To Committee. Assembly: No Floor Session Senate: Not discussed</p> <p>03/08/21: Bill Presented to Assembly Health and Human Services</p> <p>03/11/21: Notice of eligibility for exemption.</p> <p>03/17/21: Work Session Assembly Health and Human Services</p>	
	<p>Board Position</p>	<p>3/11/2021: Neutral</p>	
	<p>Fiscal Note</p>	<p>PEBP has reviewed the bill and has determined there will be no impact.</p>	

**PEBP Legislative Tracking
81st Legislative Session**

<ul style="list-style-type: none"> • Changes reporting requirements language from facilities to providers of health care • Adds reporting requirement of CMO to report certain information annually to the Patient Protection Commission and Governor’s Office. 		03/24/21: Work Session Assembly Health and Human Services, amend and do pass
<p><u>AB181 Bill Sponsors</u> Assemblywoman Sarah Peters</p>		

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>AB244 (BDR 57-654)</u> Revises provisions relating to insurance which provides for the payment of expenses not covered by Medicare.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • An insurer that issues a policy of insurance which provides for the payment of expenses which are not covered by Medicare shall offer to a person currently insured under any such policy an annual open enrollment period commencing with the first day of the birthday month of the person and remaining open for at least 60 days thereafter, during which the person may enroll in any policy of insurance which provides for the payment of expenses which are not covered by Medicare made available by the insurer in this State. • During the open enrollment period offered pursuant to subsection 1, an insurer shall not deny or condition the issuance of effectiveness, or discriminate in the price of coverage, of a policy of insurance which provides for the payment of expenses which are not covered by Medicare based on the health status, claims experience, receipt of 	<p>None to PEBP. However, this could be a benefit for Medicare Exchange members.</p> <p>Board Position</p> <p>Fiscal Note PEBP has reviewed the bill and determined there is not fiscal impact.</p>	<p>03/12/21: Read first time. Referred to Committee on Commerce and Labor To printer Assembly: Journal Senate: No Floor Session</p> <p>03/15/21: From Printer. To Committee Assembly: Not discussed Senate: Not discussed</p>

**PEBP Legislative Tracking
81st Legislative Session**

<p>health care or medical condition of a person described in subsection 1.</p> <ul style="list-style-type: none">• At least 30 days before the beginning of the open enrollment period offered pursuant to subsection 1 but not more than 60 days before the beginning of that period, an insurer that issues a policy of insurance which provides for the payment of expenses which are not covered by Medicare shall notify each person to whom the open enrollment period applies of:• The dates on which the open enrollment period begins and ends, and the rights of the person established by the provisions of this section.• Any modification to the benefits provided by the policy under which the person is currently insured or adjustment to the premiums charged for that policy. <p>Effective Date: This act becomes effective on July 1, 2021.</p>		
<p><u>AB244 Bill Sponsors</u> Assemblywoman Melissa Hardy Senator Keith Pickard Senator Joseph Hardy</p>		

**PEBP Legislative Tracking
81st Legislative Session**

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>AB250 (BDR 57-142)</u> Revises provisions relating to insurance which provides for the payment of expenses not covered by Medicare. This bill proposes the following changes:</p> <ul style="list-style-type: none"> • An insurer that issues a policy of insurance which provides for the payment of expenses which are not covered by Medicare shall offer to a person currently insured under any such policy an annual open enrollment period commencing with the first day of the birthday month of the person and remaining open for at least 60 days thereafter, during which the person may enroll in any policy of insurance which provides for the payment of expenses which are not covered by Medicare made available by the insurer in this State. • During the open enrollment period offered pursuant to subsection 1, an insurer shall not deny or condition the issuance of effectiveness, or discriminate in the price of coverage, of a policy of insurance which provides for the payment of expenses which are not covered by Medicare based on the health status, claims experience, receipt of health care or medical condition of a person described in subsection 1. • At least 30 days before the beginning of the open enrollment period offered pursuant to subsection 1 but not more than 60 days before the beginning of that period, an insurer that issues a policy of insurance which provides for the payment of expenses which are not covered by Medicare shall notify each person to whom the open enrollment period applies of: 	<p>This has no impact to PEBP, however could be a benefit to Medicare Exchange members.</p>	<p>03/12/21: Read first time. Referred to Committee on Commerce and Labor. To printer Assembly: Journal Senate: No Floor Session</p> <p>03/15/21: From Printer. To Committee Assembly: Not discussed Senate: Not discussed</p> <p>03/24/21: Bill presented to Assembly Commerce and Labor</p> <p>03/31/21: Work Session Assembly Commerce and Labor, amended, do pass</p>
	<p>Board Position</p>	
	<p>Fiscal Note</p>	
	<p>PEBP has reviewed the bill and determined there is not fiscal impact.</p>	

**PEBP Legislative Tracking
81st Legislative Session**

<ul style="list-style-type: none">• The dates on which the open enrollment period begins and ends, and the rights of the person established by the provisions of this section.• Any modification to the benefits provided by the policy under which the person is currently insured or adjustment to the premiums charged for that policy. <p>Effective Date: This act becomes effective on July 1, 2021.</p> <p>Proposed Amendment:</p> <ul style="list-style-type: none">• Specifies “Medicare Supplemental Policy”• Specifies that a person may purchase a Medicare supplemental policy made available by any insurer with the same or lesser benefits during OE.• Changes the effective date to January 1, 2022		
<p><u>AB250 Bill Sponsors</u> Assemblywoman Sandra Jauregui</p>		

**PEBP Legislative Tracking
81st Legislative Session**

Bill Number & Description	Impact to PEBP	Bill Status
<p>AB274 (BDR 57-482) Requires certain health plans to cover fertility preservation services.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • An insurer that issues a policy of health insurance shall include in the policy coverage for standard services for fertility preservation that are medically necessary to preserve fertility because the insured: • Has been diagnosed with a medical or genetic condition that may directly or indirectly cause infertility, as determined pursuant to paragraph (a) of subsection 2. • “Network plan” means a policy of health insurance offered by an insurer under which the financing and delivery of medical care, including items and services paid for as medical care, are provided, in whole or in part, though a defined set of providers under contract with the insurer. The term does not include an arrangement for the financing of premiums. • An insurer that issues a policy of group health insurance shall include in the policy coverage for standard services for fertility preservation that are medically necessary to preserve fertility because the insured: <p>Effective Date: This act becomes effective on July 1, 2021.</p> <p>Conceptual Amendment:</p> <ul style="list-style-type: none"> • Changes the effective date to January 1, 2022 	<p>Mandates certain fertility services currently not covered under the plan.</p> <p>Board Position</p> <p>TBD</p> <p>Fiscal Note Impact: \$71,040 PEBP has reviewed this bill and believes there is a potential impact due to mandated coverage for services that are not currently covered on the plan today. Although utilization of fertility benefits in the PEBP plan has been relatively low, actual utilization moving forward will vary and it is likely to have an impact on the overall utilization of these types of benefits. Healthscope Benefits and Aon Consulting, Inc. have provided an estimated cost based on the current rate of utilization and the expected member count at an annualized rate.</p> <p>*conceptual amendment will remove fiscal note.</p>	<p>03/15/21: Read first time. Referred to Committee on Commerce and Labor. To Printer. Assembly: Journal Senate: Not discussed</p> <p>03/16/21: From printer. To committee. Assembly: No Floor Session Senate: No Floor Session</p> <p>03/24/21: Bill presented to Assembly Commerce and Labor, heard</p>

**PEBP Legislative Tracking
81st Legislative Session**

<ul style="list-style-type: none"> Allows self-funded plans to opt in. 		
<u>AB274 Bill Sponsors</u> Assembly Michelle Gorelow		

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>AB337 (BDR 23-710)</u> Requires the Board of the Public Employees' Benefits Program to create a certain pilot program in certain circumstances.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> To the extent that the PEBP Board determines money is available. The Board shall create a pilot program to establish one or more clinics to provide primary care services to person who participate in the Program. The Board shall solicit feedback regarding the pilot program from persons who use the services provided at such a clinic. Within one year after the creation of the pilot program, and annually thereafter, the Board shall submit to the Director of the Legislative Council Bureau for transmittal to the Legislature, if the Legislature is in session, or to the Interim Finance Committee, if the Legislature is not in session, a report concerning the pilot program. The report must include, without limitation: <ul style="list-style-type: none"> A description of the status and results of the pilot program. The costs of carrying out the pilot program. A summary of the feedback provided pursuant to subsection 2. Recommendations for legislation to improve or expand the pilot program. 	<p>If the board determines funding is available, PEBP will need to take steps to implement a pilot program for a near-site clinic.</p> <p>Board Position</p> <p>Fiscal Note <u>Impact: \$7,540,000</u> PEBP has determined this bill will likely have a fiscal impact on the program. In 2017, PEBP conducted a solicitation for a near-site clinic, similar to the one being proposed in this bill. Of the three responses PEBP received, only one of the proposals was able to agree to PEBP's requirement of return on investments (ROI). The associated cost proposal submitted by the winning vendor included \$1.3M in</p>	<p>03/18/21: Read first time. Referred to Committee on Government Affairs. To printer.</p> <p>03/19/21: From printer. To Committee. Assembly: Not discussed Senate: No Floor Session</p> <p>03/26/21: Bill presented to Assembly Government Affairs, mentioned not agendized.</p> <p>03/29//21: Bill presented to Assembly on Government Affairs, heard</p>

**PEBP Legislative Tracking
81st Legislative Session**

<p>Effective Date: This act becomes effective upon passage and approval.</p>	<p>implementation start up costs (physical space, furnishings, fixtures, staffing, etc.) and on-going operating expenses of \$3.56M in year 1, \$3.67M un year 2, \$3.78M in year 3 and \$3.98M in year 4. The solicitation was canceled after unsuccessful negotiations stemming from PEBP’s inability to identify savings from the project due to high start up costs and unreliable guarantees. In addition to the costs described above, PEBP will likely require at least 1 additional staff of a grade 37 or above to oversee a project of this magnitude.</p>	
<p><u>AB337 Bill Sponsors</u> Assemblywoman Michelle Gorelow</p>		

Bill Number & Description	Impact to PEBP	Bill Status		
<p>AB348 (BDR 140-497) Revises provisions relating to the Patient Protection Commission. This bill proposes the following changes:</p> <ul style="list-style-type: none"> • Transfers the Patient Protection Commission from the Office of the Governor to the Office of the Director of the Department of Health and Human Services • Revises the membership and duties of the Commission 	<p>PEBP will be required to submit claims data. The PEBP EO is added to the Commission as a non-voting ex officio member.</p> <table border="1" data-bbox="1094 1284 1549 1391"> <tr> <th data-bbox="1094 1284 1549 1321">Board Position</th> </tr> <tr> <td data-bbox="1094 1321 1549 1391">TBD</td> </tr> </table>	Board Position	TBD	<p>03/22/21: Read first time. Referred to Committee on Health and Human Services. To printer. Assembly: Journal Senate: Not discussed</p> <p>03/23/21: From printer. To committee</p>
Board Position				
TBD				

**PEBP Legislative Tracking
81st Legislative Session**

<ul style="list-style-type: none"> • Requiring the Commission to establish an all-payer claims database • Requires certain insurers to submit data to the database • Provides for the release of data in the database under certain circumstances; • Requires the Commission to compile certain reports relating to the database <p>Effective Date: This act becomes effective upon passage and approval.</p>	Fiscal Note	Assembly: Not discussed Senate: Not discussed
	PEBP has reviewed the bill and determined there is not fiscal impact.	
<p><u>AB348 Bill Sponsors</u> Assemblywoman Maggie Carlton</p>		

Bill Number & Description	Impact to PEBP	Bill Status
<p>AB436 (BDR 57-808) Revises provisions relating to vision insurance.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • An insurer shall not enter into a contract with a provider of vision care that: • Authorizes the insurer to set or limit the amount that the provider of vision care may charge for vision care that is not reimbursed under the contract; • Requires the provider of vision care to participate in the network of providers of vision care of the insurer or any other insurer as a condition of including that provider of vision care in the network of providers of medical services of the insurer; • Requires the provider of vision care to use a specific laboratory as the manufacturer of ophthalmic devices or materials provided to covered persons; 	None.	03/26/21: Read first time. Referred to Committee on Commerce and Labor. To printer. Assembly: Journal Senate: Not discussed 03/26/21: Assembly Commerce and Labor. Floor meetings do not have agendas. Discussed as BDR. 03/29/21: From printer. To committee. Assembly: Not discussed
	Board Position	
	Fiscal Note	
	PEBP has reviewed the bill and determined there is not fiscal impact.	

**PEBP Legislative Tracking
81st Legislative Session**

<ul style="list-style-type: none"> • Conditions any rate of reimbursement for vision care on the provider of vision care prescribing ophthalmic devices or materials in which the insurer has an ownership or other pecuniary interest or increases the rate of reimbursement if the provider of vision care prescribes such ophthalmic devices or materials; or • Provides for unreasonably low or nominal rates of reimbursement for vision care. • An insurer shall disclose in any policy of insurance that covers vision care or any description of benefits covered by such a policy, whether written or electronic, any ownership or other pecuniary interest of the insurer in a supplier of ophthalmic devices or materials or a provider of vision care. <p>Effective Date: Does not become effective unless approved by the Commissioner.</p>		Senate: Not discussed
<p><u>AB436 Bill Sponsors</u> Senate Committee on Commerce and Labor</p>		

Bill Number & Description	Impact to PEBP	Bill Status				
<p><u>SB40 (BDR 40-415)</u> Provides for the collection of certain data relating to health care. This bill proposes the following changes:</p> <ul style="list-style-type: none"> • DHHS shall establish an all-payer claims database of information relating to health insurance claims resulting from medical, dental or pharmacy benefits provided in this State that will integrate with other state agencies. <p>Effective Date: Upon passage and approval for the purpose of adopting any regulations and performing any other preparatory</p>	<p>Requires PEBP to provide claims data.</p> <table border="1"> <tr> <th data-bbox="1094 1065 1549 1105">Board Position</th> </tr> <tr> <td data-bbox="1094 1105 1549 1211">3/11/2021: Neutral</td> </tr> <tr> <th data-bbox="1094 1211 1549 1252">Fiscal Note</th> </tr> <tr> <td data-bbox="1094 1252 1549 1427">Impact: Cannot Be Determined PEBP has reviewed this bill and believes there is a potential fiscal impact. PEBP reached out to our</td> </tr> </table>	Board Position	3/11/2021: Neutral	Fiscal Note	Impact: Cannot Be Determined PEBP has reviewed this bill and believes there is a potential fiscal impact. PEBP reached out to our	<p>11/18/20: Prefiled. Referred to Committee on Health and Human Services. To Printer</p> <p>12/15/20: From Printer</p> <p>02/01/21: Read first time. To Committee Assembly: Not discussed Senate: Journal</p>
Board Position						
3/11/2021: Neutral						
Fiscal Note						
Impact: Cannot Be Determined PEBP has reviewed this bill and believes there is a potential fiscal impact. PEBP reached out to our						

**PEBP Legislative Tracking
81st Legislative Session**

<p>administrative tasks that are necessary to carry out the provisions of this act; and on January 1, 2022, for all other purposes.</p> <p>Proposed Amendment: There are several proposed amendments related to confidentiality, data usage, privacy and further defining language.</p>	<p>TPA and PBM vendors to determine a cost to submit data to an all-payer claims database on behalf of PEBP. Because the formatting requirements for the claims database is unknown and this is not currently a requirement of PEBP’s current contract, the total estimated cost between both vendors to develop a process to submit data to this required database is \$100,000. PEBP will be soliciting for TPA and PBM vendors in the next year and would be able to include a requirement to submit data to an all-payer claims database in the solicitation. This requirement would likely only come at no additional cost if an industry standard format for submitting data could be guaranteed. Because it is unknown what vendors PEBP will be contracted with and if there will be an industry standard format, PEBP cannot determine a fiscal impact.</p>	<p>02/17/21: Bill presented to Assembly Health and Human Services</p> <p>03/05/21: Bill presented to Senate on Finance.</p> <p>03/09/21: Bill presented to Senate Health and Human Services</p> <p>04/06/21: Work Session Senate Health and Human Services</p>
<p><u>SB40 Bill Sponsors</u> Senate Committee on Health and Human Services Julia Ratti – Chair Pat Spearman – Vice Chair Dallas Harris</p>		

**PEBP Legislative Tracking
81st Legislative Session**

Joseph P. Hardy
Ben Kieckhefer

Bill Number & Description	Impact to PEBP	Bill Status
<p>SB139 (BDR 57-54) Requires certain health insurance to cover treatment of certain conditions relating to gender dysphoria.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • An insurer that issues a policy of health insurance shall include in the policy coverage for the medically necessary treatment of conditions relating to gender dysphoria, gender incongruence and other disorders of sexual development. • “Network plan” means a policy of health insurance offered by an insurance offered by an insurer under which the financing and delivery of medical care, including items and services paid for a medical care, are provided, in whole or in part, through a defined set of providers under contract with the insurer. • The term does not include an arrangement for the financing of premiums. <p>Effective Date: This act becomes effective on July 1, 2021.</p> <p>Proposed Amendment: Senator Schieble proposes elimination of voice therapy, adds requirements for individuals under 17, and requires insurers to make reasonable efforts to secure in-network providers.</p>	<p>Requires coverage for the following services not covered under PEBP today:</p> <ul style="list-style-type: none"> • Voice Therapy • Gender reassignment benefits for members under 18 <p>Board Position</p> <p>3/11/2021: Neutral</p> <p>Fiscal Note Impact: \$1,000,000 The Public Employees' Benefits Program (PEBP) has reviewed this bill and believes there is a fiscal impact. This bill would require medically necessary services/procedures relating to gender dysphoria, gender incongruence, etc. While PEBP currently provides coverage for most services identified in the bill, there are some noticeable gaps in coverage including providing coverage for those under 18 and voice therapy</p>	<p>02/22/21: Read first time. Referred to Committee on Commerce and Labor To printer. Assembly: Not discussed Senate: Journal</p> <p>02/23/21: From printer. To committee. Assembly: Not discussed Senate: Not discussed</p> <p>03/12/21: Bill presented to Senate Commerce and Labor</p> <p>04/02/21: Work Sessions, Senate Commerce and Labor</p>

**PEBP Legislative Tracking
81st Legislative Session**

	services. PEBP's Actuary and TPA are estimating an annual cost of up to \$500,000 to meet the requirements in this bill.	
<p><u>SB139 Bill Sponsors</u> Senator Melanie Scheible Senator Dallas Harris</p>		

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>SB171 (BDR 57-848)</u> Prohibits a pharmacy benefit manager from requiring a covered person to obtain a drug by mail. This bill proposes the following changes:</p> <ul style="list-style-type: none"> • Requires a covered person to obtain any drug by mail. <p>Effective Date: This act becomes effective on July 1, 2021</p> <p>Conceptual Amendment: This proposed conceptual amendment submitted by Senator Hardy would provide that, for medications for which there is no generic alternative, pharmacy benefit managers and insurers may not implement programs commonly known as copayment accumulator programs. A copayment accumulator program is a program which prevents a payment made using a drug manufacturer's copay assistance coupon from counting toward the covered person's deductible or the covered person's maximum out-of-pocket spending.</p> <p>*The conceptual amendment will significantly increase the fiscal note. The elimination of the Saveon program would cause the plan to lose out on approximately \$2.5M per year and patients would lose out on \$1.6M of patient assistance.</p>	<p>The program could see reduced rebates and discounts for specialty drugs.</p> <p>Board Position</p> <p></p> <p>Fiscal Note Impact: \$637,006* PEBP has reviewed bill and has identified a potential fiscal impact PEBP's Pharmacy Benefit Manager (PBM) vendor, Express Scripts has determined that the elimination of the mail order requirement, which at this time only affects specialty medications, would result in reduced discounts and rebates to the plan since drug pricing and rebates are not as favorable through retail pharmacies. The potential shift to retail fills</p>	<p>03/04/21: Read first time. Referred to Committee on Commerce and Labor. To printer. Assembly: No Floor Session Senate: Journal</p> <p>3/5/21: From printer. To committee.</p> <p>03/26/21: Bill presented to Senate Commerce and Labor</p>

**PEBP Legislative Tracking
81st Legislative Session**

	<p>modeled by ESI, estimates a \$318,503 annual cost impact to PEBP. As the effective date of this bill is July 1, 2021, PEBP will already have established rates and employer subsidies on March 25, 2021. PEBP may be underfunded by the estimate \$318,503 the first year with no mechanism to offset the additional unexpected costs.</p>	
<p><u>SB171 Bill Sponsors</u> Senator Joseph Hardy Assemblywoman Melissa Hardy</p>		

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>SB190 (BDR 54-3)</u> Provides for the dispensing of self-administered hormonal contraceptives.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> Requires the Chief Medical Officer to issue a standing order authorizing a pharmacist to dispense self-administered hormonal contraceptives to any patient. <p>Effective Date: Upon passage and approval for the purposes of adopting any regulations and performing any other preparatory administrative tasks that are necessary to carry out the provisions of this act; and on January 1, 2022, for all other purposes.</p>	<p>No impact as contraceptives are covered at 100% regardless of the prescriber.</p> <p>Board Position</p> <p></p> <p>Fiscal Note</p> <p>PEBP has reviewed the bill and determined there is not fiscal impact</p>	<p>03/08/21: Read first time. Referred to Committee on Commerce and Labor. To printer. Assembly: Not discussed Senate: Journal</p> <p>3/09/21: From printer. To committee. Assembly: Not discussed Senate: Not discussed</p> <p>03/24/21: Bill presented to Senate Commerce and Labor, heard, no action</p>

**PEBP Legislative Tracking
81st Legislative Session**

		04/02/21 Work Session Senate Commerce and Labor, do pass
<p><u>SB190 Bill Sponsors</u></p> <p><u>Primary Sponsors</u></p> <ul style="list-style-type: none"> • Senator Nicole Cannizzaro • Senator Julia Ratti • Senator Roberta Lange • Senator Marilyn Dondero Loop • Senator Melanie Scheible • Assemblywoman Selena Torres • Assemblywoman Rochelle Nguyen • Assemblywoman Michelle Gorelow • Assemblywoman Elaine Marzola • Assemblyman Edgar Flores <p><u>Co-Sponsors</u></p> <ul style="list-style-type: none"> • Senator Chris Brooks • Senator Fabian Donate • Senator Dallas Harris • Senator James Ohrenschall • Assemblywoman Shannon Bilbray-Axelrod • Assemblywoman Cecelia Gonzalez 		

Bill Number & Description	Impact to PEBP	Bill Status
<p>SB206 (BDR 57-556) Revises provisions relating to insurance which provides for the payment of not covered by Medicare.</p> <p>This bill proposes the following changes:</p>	<p>None to PEBP, however this may benefit some Medicare Exchange Members</p> <p>Board Position</p>	<p>03/11/21: Read first time. Referred to Committee on Commerce and Labor. To printer.</p> <p>Assembly: Not discussed Senate: Journal</p>

**PEBP Legislative Tracking
81st Legislative Session**

<ul style="list-style-type: none"> • An insurer that issues a policy of insurance which provides for the payment of expenses which are not covered by Medicare shall offer to a person currently insured under any such policy an annual open enrollment period commencing with the first day of the birthday month of that person and remaining open for at least 30 days thereafter, during which the person may enroll in any policy of insurance which provides for the payment of expenses which are not covered by Medicare made available by the insurer in this State. • During the open enrollment period offered pursuant to subsection 1, an insurer shall not deny or condition the issuance of effectiveness, or discriminate in the price of coverage, of a policy of insurance which provides for the payment of expenses which are not covered by Medicare based on the health status, claims experience, receipt of health care or medical condition of a person described in subsection 1. • At least 30 days before the beginning of the open enrollment period offered pursuant to subsection 1 but not more than 60 days before the beginning of that period, an insurer that issues a policy of insurance which provides for the payment of expenses which are not covered by Medicare shall notify each person to whom the open enrollment period applies of: <ul style="list-style-type: none"> • The dates on which the open enrollment period begins and ends, and the rights of the person established by the provisions of this section; and • Any modification to the benefits provided by the policy under which the person is currently insured or adjustment to the premiums charged for that policy. <p>Effective Date: This act becomes effective on July 1, 2021.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr style="background-color: #e0e0e0;"> <th style="padding: 5px;">Fiscal Note</th> </tr> <tr> <td style="padding: 5px;">PEBP has reviewed the bill and determined there is not fiscal impact</td> </tr> </table>	Fiscal Note	PEBP has reviewed the bill and determined there is not fiscal impact	<p>03/12/21: From printer. To Committee Assembly: Not discussed Senate: No Floor Session</p>
	Fiscal Note			
PEBP has reviewed the bill and determined there is not fiscal impact				

**PEBP Legislative Tracking
81st Legislative Session**

SB206 Bill Sponsors

Primary Sponsors

- Senator Keith Pickard
- Senator Joseph Hardy
- Senator James Settelmeyer
- Assemblywoman Melissa Hardy
- Assemblyman Jim Wheeler

Co-Sponsors

- Senator Pete Goicoechea
- Senator Scott Hammond
- Senator Ira Hansen
- Senator Ben Kieckhefer
- Senator Heidi Seevers Gansert

Bill Number & Description	Impact to PEBP	Bill Status	
<p><u>SB221 (BDR 23-629)</u> Revises provisions relating to public employment. Requiring certain public employers to provide training to employees regarding Public Employees' Retirement System.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • Except as otherwise provided in subsection 2, each public employer participating in the System shall provide the training required by this section to each of its employees who is a member of the System before the completion of the employee's first year of employment with the public employer. The training: • Must be structured to ensure that the employee obtains an understanding of the System and provides an explanation of: • The retirement benefits that the employee is anticipated to receive from the System, including, without limitation, and 	None	<p>03/11/2021: Read first time. Referred to Committee Affairs. To printer. Assembly: Not discussed Senate: Journal</p> <p>03/12/21: From printer. To committee. Assembly: Not discussed Senate: No Floor Session</p>	
	Board Position		
	Fiscal Note		PEBP has reviewed the bill and determined there is not fiscal impact.

**PEBP Legislative Tracking
81st Legislative Session**

<p>explanation of how to calculate the employee’s projected monthly service retirement allowance and any projected increases in postretirement benefits.</p> <p>Effective Date: Upon passage and approval for the purpose of performing any preparatory administrative tasks that are necessary to carry out the provisions of this act; and on July 1, 2022, for all other purposes.</p>		
<p><u>SB221 Bill Sponsors</u> Primary Sponsors</p> <ul style="list-style-type: none"> • Senator Carrie Buck • Senator Joseph Hardy • Assemblywoman Jill Dickman • Assemblyman Philip P.K. O’Neil <p>Co-Sponsors</p> <ul style="list-style-type: none"> • Senator Pete Goicoechea • Senator Ira Hansen • Senator Ben Kieckhefer • Senator Keith Pickard • Senator Heidi Seevers Gansert 		

Bill Number & Description	Impact to PEBP	Bill Status			
<p><u>SB251 (BDR 40-478)</u> Revises provisions relating to genetic counseling and testing.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • A primary care provider shall screen each adult woman to whom he or she provides care to determine whether the family history of the woman indicates an increased risk for a harmful mutation in the BRCA gene. 	<p>PEBP plans provide such coverage, however the noticing requirement in this bill may lead to increased utilization.</p> <table border="1" data-bbox="1094 1279 1549 1427"> <tr> <th data-bbox="1094 1279 1549 1320">Board Position</th> </tr> <tr> <td data-bbox="1094 1320 1549 1393"></td> </tr> <tr> <th data-bbox="1094 1393 1549 1427">Fiscal Note</th> </tr> </table>	Board Position		Fiscal Note	<p>03/15/21: Read first time. Referred to committee on Health and Human Services. To printer Assembly: Not discussed Senate: Journal</p> <p>03/16/21: From printer. To Committee.</p>
Board Position					
Fiscal Note					

**PEBP Legislative Tracking
81st Legislative Session**

<ul style="list-style-type: none"> • If such a screening indicates that a woman is at risk of a harmful mutation in the BRCA gene, the primary care provider must: • Provide the woman with written notice of the need to discuss genetic counseling and testing with the provider; • Administer a genetic test for harmful mutation in the BRCA gene to the woman or refer the woman for such testing. <p>Effective Date: This act becomes effective on July 1, 2021.</p> <p>Conceptual Amendment: Senator Seevers Gansert proposes amendments to the bill as follows:</p> <ul style="list-style-type: none"> • Adds assessment requirements on providers Attempt to • Requires Medicaid, other public insurance plans, and private insurance plans to cover screening, genetic counseling, and genetic testing under the specific conditions described above in item 1. 	<p>PEBP has reviewed the bill and determined there is not fiscal impact.</p>	<p>Assembly: Not discussed Senate: Not discussed</p> <p>03/18/21: Bill presented to Senate Health and Human Services, heard, no action.</p> <p>04/06/21: Work Session Senate Health and Human Services</p>
<p><u>SB251 Bill Sponsors</u></p> <p>Primary Sponsors</p> <ul style="list-style-type: none"> • Senator Heidi Seevers Gansert <p>Co-Sponsors</p> <ul style="list-style-type: none"> • Senator Carrie Buck • Senator Nicole Cannizzaro • Senator Marilyn Dondero Loop • Senator Dallas Harris • Senator Roberta Lange • Senator Dina Neal • Senator Pat Spearman • Assemblywoman Jill Tolles 		

**PEBP Legislative Tracking
81st Legislative Session**

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>SB269 (BDR 57-817)</u> Revises provisions relating to dental insurance.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • Imposes requirements governing the recovery of overpayments under a plan that provides dental coverage; • Prohibits a dental insurer or the administrator of a plan that provides dental coverage from denying a claim for which prior authorization has been granted except in certain circumstances; <p>Effective Date: This act becomes effective on July 1, 2021.</p> <p>Conceptual Amendment:</p> <p>A dental insurer or an administrator who recovers overpayments under an insurance plan that includes dental coverage may not:</p> <ul style="list-style-type: none"> • Reduce an insured’s benefit payment amount as a result of an error relating to any other insured’s benefits or transaction by the health insurer or their contracted vendor. • Deduct the amount of an overpayment of a claim from a payment or reimbursement for a service received by a patient other than the patient who received the actual service. 	<p>Although PEBP is exempt in this bill, PEBP current overpayment process does already comply.</p> <p>Board Position</p> <p>TBD</p> <p>Fiscal Note</p> <p>PEBP has reviewed the bill and determined there is not fiscal impact.</p>	<p>03/17/21: Read first time. Referred to Committee on Commerce and Labor. To printer. Assembly: Not discussed Senate: Journal</p> <p>03/18/21: From printer. To committee. Assembly: Not discussed Senate: Not discussed</p> <p>04/02/21: Work Session, Senate Commerce and Labor</p>
<p><u>SB269 Bill Sponsors</u></p> <p><u>Primary Sponsor</u></p> <ul style="list-style-type: none"> • Senator Ben Kieckhefer <p><u>Co-Sponsor</u></p> <ul style="list-style-type: none"> • Senator Heidi Seevers Gansert 		

**PEBP Legislative Tracking
81st Legislative Session**

Bill Number & Description	Impact to PEBP	Bill Status	
<p>SB290 (BDR 57-973) Enacts provisions relating to prescription drugs for the treatment of cancer.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> An insurer that offers or issues a policy of health insurance which provides coverage of a prescription drug for the treatment of cancer or any symptom of cancer that is part of a step therapy protocol shall allow an insured who has been diagnosed with stage 3 or 4 cancer or the attending practitioner of the insured to apply for an exemption from the step therapy protocol. <p>Effective Date: This act becomes effective on October 1, 2021.</p>	Removes the step therapy requirement which could lead to increased utilization of more costly drugs.	<p>03/22/21: Read first time. Referred to Committee on Commerce and Labor. To printer. Assembly: Not discussed Senate: Journal</p> <p>03/23/21: From printer. To committee Assembly: Not discussed Senate: Not discussed</p> <p>04/01/21: Bill presented to Senate Commerce and Labor.</p>	
	Board Position		
	Fiscal Note		
	<p><u>Impact: \$1,426,000</u> PEBP has reviewed this bill and believes there is a fiscal impact. Because it is not possible for PEBP to determine how many PEBP members are currently in stage 3/4, or how many will be in the future, there is no mechanism to calculate the true fiscal impact, however, PEBP's Pharmacy Benefit Manager was able to use existing data on the approval rate and utilization of cancer drugs to approximate an annual fiscal impact of \$713K per plan year. PEBP currently uses step therapy rules to ensure less costly drugs are utilized first before member move to expensive alternatives. This assures that costs to the plan are managed, while continuing to</p>		

**PEBP Legislative Tracking
81st Legislative Session**

	make the drugs available to patients.	
<u>SB290 Bill Sponsors</u> Senator Roberta Lange		

Bill Number & Description	Impact to PEBP	Bill Status	
<p><u>SB305 (BDR 40-40)</u> Makes various changes to relating to access to organ transplant for persons with disabilities.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • A managed care organization that offers or issued a health care plan that includes coverage for anatomical gifts, organ transplants or treatments or services related to an organ transplant shall not: • Deny, limit or seek reimbursement from an insured for care related to an organ transplant because the insured is a person with a disability; • Deny a person with a disability eligibility or continued eligibility to enroll or renew coverage to avoid providing coverage in accordance with this section. • A provider of medical or related services shall not, solely based on a person’s disability: • Determine that the person is ineligible to receive an anatomical gift; • Refuse to perform any medical service or other service related to an organ transplant, including, without limitation: • Referral to an organ transplant center; • Diagnostic tests; • Evaluation of eligibility for an organ transplant; • Surgery; and 	None.	<p>03/22/21: Read first time. Referred to Committee on Health and Human Services. To printer.</p> <p>Assembly: Not discussed Senate: Journal</p> <p>03/24/21: From printer. To Committee Assembly: Not discussed Senate: Not discussed</p> <p>03/30/21: Bill presented to Senate Health and Human Services.</p>	
	Board Position		
	Fiscal Note		PEBP has reviewed the bill and determined there is not fiscal impact.

**PEBP Legislative Tracking
81st Legislative Session**

<ul style="list-style-type: none"> • Other services required for the care of a transplant patient. <p>Effective Date: This act becomes effective on July 1, 2021.</p> <p><u>SB305 Bill Sponsors</u> Senator Scott Hammond</p>		
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Bill Number & Description	Impact to PEBP	Bill Status
<p>SB321 (BDR 34-905) Creates the Nevada System of Community College.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • The State Board of Community College shall establish for the student governments within the Nevada System of Community College requirements equivalent to those of this chapter and shall provide for their enforcement. • As used in this chapter, unless the context otherwise requires, the words and terms defined in sections 3 to 6, inclusive, of this act have the meaning ascribed to them in those sections. <p>Effective Date: Upon passage and approval for the purposes of adopting regulations and performing any other preparatory administrative tasks necessary to carry out the provisions of this act; and on July 1, 2022, for all other purposes.</p>	<p>PEBP will need to make significant changes within the Eligibility and Enrollment System.</p> <p>Board Position</p> <p>Fiscal Note <u>Impact: Approximately \$235,000</u> PEBP has reviewed this bill and believes there is a fiscal impact. As a participating PEBP employer, PEBP has established enrollment and payroll integrations with NSHE through its enrollment and eligibility system vendor. Assuming the Community College System would operate under separate payroll, Human Resources, and fiscal systems, this would require PEBP to establish the</p>	<p>03/22/21: Read first time. Referred to Committee on Education. To printer. Assembly: Not discussed Senate: Journal</p> <p>03/24/21: From printer. To Committee. Assembly: No Floor Session Senate: No Floor Session</p>

**PEBP Legislative Tracking
81st Legislative Session**

	community college system as a separate employer and require system integrations with the PEBP Enrollment and Eligibility System. This change request, including data conversion, outbound file development and testing, and payroll integrations.	
<p><u>SB321 Bill Sponsors</u> Senator James Settelmeyer Senator Scott Hammond Senator Ira Hansen</p>		

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>SB325 (BDR 54-632)</u> Establishes provisions relating to preventing the acquisition of human immunodeficiency virus.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • The State Board of Pharmacy shall adopt regulations requiring a pharmacist who takes the actions authorized by this section to be covered by adequate liability insurance, as determined by the State Board of Pharmacy. • Allows a Pharmacist to dispense of drugs for preventing the acquisition of human immunodeficiency virus and order/conduct laboratory tests necessary for therapy that uses such drugs pursuant to the standing order issued pursuant to section 10 of this act. 	<p>PEBP does not anticipate an impact to the plan. PrEP drugs are considered preventive under the ACA. Additionally, associated lab costs would not change whether ordered by a physician or pharmacist.</p> <p>Board Position</p> <p>Fiscal Note PEBP has reviewed the bill and determined there is not fiscal impact.</p>	<p>03/22/2021: Read first time. Referred to Committee on Health and Human Services. To printer. Assembly: Not discussed Senate: Journal</p> <p>03/24/21: From printer. To committee. Assembly: Not discussed Senate: Not discussed</p>

**PEBP Legislative Tracking
81st Legislative Session**

Effective Date: This act becomes effective on July 1, 2021.		
<u>SB325 Bill Sponsors</u> Senator James Settelmeyer		

Bill Number & Description	Impact to PEBP	Bill Status
<p>SB360 (BDR 23-1011) Revises appointment to the Public Employees' Benefits Program and Public Employees' Retirement System Boards.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • Adds appointment requirements for the two Board members who are employees in the classified service of the State to be appointed by the Governor from a list of nominations made up of 10 classified state employees submitted by the labor organization representing the largest number of classified state employees participating in the Public Employees' Benefits Program. <p>Effective Date: This act becomes effective on July 1, 2021</p>	<p>Will impact the two classified employee positions on the PEBP Board currently occupied by Tim Lindley and April Caughron.</p> <p>Board Position</p> <p>Fiscal Note No Fiscal Impact</p>	<p>03/26/2021: Read first time. Referred to Committee on Government Affairs. To printer. Assembly: Not discussed Senate: Journal</p> <p>03/29/21: From printer. To committee. Assembly: Not discussed Senate: Not discussed</p>
<u>SB360 Bill Sponsors</u> Senate Committee on Government Affairs		

Bill Number & Description	Impact to PEBP	Bill Status
<p>SB373 (BDR 23-675) Provides for collective bargaining by certain state employees.</p>	<p>PEBP has identified several impacts, including increased vendor fees, increased</p>	<p>03/26/2021: Read first time. Referred to Committee on Government Affairs. To printer.</p>

**PEBP Legislative Tracking
81st Legislative Session**

<p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> Section 32, Collective bargaining entails a mutual obligation between a state professional employer and an exclusive representative to meet at reasonable times and to bargain in good faith with respect to: subsection (g) insurance and healthcare benefits provided by the state professional employer. <p>Effective Date: This act becomes effective on July 1, 2021</p>	<p>staffing needs and potential conflicts with NRS 287.043.</p>	<p>Assembly: Not discussed Senate: Journal</p>
	<p>Board Position</p>	<p>03/29/21: From printer. To committee.</p>
	<p>Fiscal Note</p>	<p>Assembly: Not discussed Senate: Not discussed</p>
	<p>PEBP is in the process of developing a fiscal note.</p>	
<p><u>SB373 Bill Sponsors</u> Senate Committee on Government Affairs</p>		

Bill Number & Description	Impact to PEBP	Bill Status
<p>SB378 (BDR 57-442) Imposes certain requirements relating to insurance coverage of prescription drugs. Requiring certain insurers that provide coverage for prescription drugs to include in half of the plans that provide such coverage certain limitation on costs to an insured for prescription drugs.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> At least half of the policies of insurance offered by an insurer for sale in this State that provide coverage for prescription drugs; Must not require the insured to pay a deductible for coverage of prescription drugs, beginning on the day on which the insured is first enrolled in the policy; Must establish a copayment for each prescription drug covered by the policy in a fixed dollar amount 	<p>This would require PEBP to revamp plan design completely. Additionally, there would be significant increased costs associated with specialty medication spend.</p>	<p>03/26/2021: Read first time. Referred to Committee on Health and Human Services. To printer. Assembly: Not discussed Senate: Journal</p> <p>03/29/21: From printer. To committee.</p>
	<p>Board Position</p>	<p>Assembly: Not discussed Senate: Not discussed</p>
	<p>Fiscal Note</p>	
	<p>PEBP is in the process of developing a fiscal note.</p>	

**PEBP Legislative Tracking
81st Legislative Session**

<p>that is not based on a percentage of the total cost of the prescription drug;</p> <ul style="list-style-type: none"> • Must limit the total amount of the copayments that an insured pays for prescription drugs in a year to not more than one twelfth of the maximum total amount that the insured may be required to pay for services covered under the policy during that year. • At least half of the policies of group health insurance offered by and insurer for sale in this State that provide coverage for prescription drugs: <p>Effective Date: This act becomes effective on July 1, 2021</p>		
<p><u>SB378 Bill Sponsors</u> Senate Committee on Health and Human Services</p>		

Bill Number & Description	Impact to PEBP	Bill Status
<p><u>SB380 (BDR 40-445)</u> Revises provisions governing the reporting of data concerning the prices of prescription drugs. Relating to prescription drugs; requiring certain entities that report information under the program for tracking and reporting of information concerning the pricing of prescription drugs to register with the Department of Health and Human Services and pay a registration fee.</p> <p>This bill proposes the following changes:</p> <ul style="list-style-type: none"> • A health benefit plan, as that term is defined in NRS 687B.470, for employees which provides coverage for prescription drugs; • The Public Employees' Benefits Program established pursuant to subsection 1 of NRS 287.043; 	<p>PEBP would be required to report information on prescription drug claims.</p> <hr/> <p>Board Position</p> <hr/> <p>Fiscal Note No fiscal impact.</p>	<p>03/26/2021: Read first time. Referred to Committee on Health and Human Services. To printer. Assembly: Not discussed Senate: Journal</p> <p>03/29/21: From printer. To committee. Assembly: Not discussed Senate: Not discussed</p> <p>04/06/21: Bill presented to Senate Health and Human Services</p>

**PEBP Legislative Tracking
81st Legislative Session**

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| <ul style="list-style-type: none">• A governing body of a county, school district, municipal corporation, political agency that provides health coverage to employees through a self-insurance reserve fund pursuant to NRS 287.010;• Except as otherwise provided in subsection 2, on or before February 1 of each year, each manufacturer or wholesaler that sells prescription drugs for distribution in this State, each pharmacy benefit manager that manages prescription drug coverage for covered persons in this State and each third party that provides coverage of prescription drugs to persons in this State shall register with the Department. | | |
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Effective Date: This act becomes effective on July 1, 2021

SB380 Bill Sponsors

Senate Committee on Health and Human Services