

Bill Tracking 83rd (2025) Session							
BILL #	Summary	Description	Sponsor	Tracking	Comments	Fiscal Note Requested	Fiscal Impact
AB22	Revises provisions relating to the Public Employees' Benefits Program	AN ACT relating to the Public Employees' Benefits Program; revising provisions governing the awarding of certain contracts of the Program; and providing other matters properly relating thereto.	PEBP	YES	2/21/25: Heard by Assembly Committee on Government Affairs	N/A	
AB52	Revises provisions relating to the payment of claims by providers of health care	AN ACT relating to insurance; requiring the Commissioner of Insurance to establish programs to inform providers of health care and insureds under health insurance policies of certain information relating to the payment of claims; revising provisions governing the payment of claims under policies of health insurance; establishing certain administrative penalties; requiring a health carrier to provide certain information to participating providers of health care and covered persons; requiring a health carrier to establish certain procedures for challenging the denial of a claim; and providing other matters properly relating thereto.	Commission on Minority Affairs	YES	3/5/25: Heard by Assembly Committee on Commerce and Labor Adds four new provisions to NRS 287.04335: (1) NRS 687B.730, which requires notification to all network providers of provider's responsibilities regarding applicable administrative policies (includes list); (2) NRS 687B.820, which requires establishment of procedures for resolution of disputes between carrier and providers; (3) NRS 689.0295(4), a new provision added by this bill, which sets forth requirements for denial of claims submitted by providers, including reasons for denial, criteria for determination, and summary of procedure to challenge denial; and (4) new provisions in section 16 regarding approving & paying or denying claim within 15 days if submitted electronically, requires payment of interest on late-paid claims, other timelines re: requesting further information and resolving claim after receipt, annual report to Commissioner of DOI re: compliance.	Yes	\$177,709 1 Year 1, \$370,736 in Year 2 \$790,073 in future biennia
AB74	Revises various provisions relating to insurance.	AN ACT relating to insurance; making various changes to the Nevada Insurance Code; revising provisions governing examinations of insurers and other persons subject to regulation under the Code; revising certain powers and duties of the Commissioner of Insurance; revising various requirements and restrictions imposed on insurers and other persons subject to regulation under the Code; revising provisions relating to service contracts, providers of service contracts and administrators of service contracts; repealing provisions governing insurance for home protection; revising provisions relating to administrators; standardizing the definitions of certain words and terms; revising provisions relating to adjustors; revising provisions relating to certain trade practices and frauds; removing certain obsolete and duplicative provisions; transferring certain duties from the Commissioner of Financial Institutions to the Commissioner of Mortgage Lending; revising provisions relating to certain accounts and funds relevant to the regulation of certain insurers and insurance administration; designating certain employees of the Division of Insurance of the Department of Business and Industry as category II peace officers; providing penalties; and providing other matters properly relating thereto.	Division of Insurance of the Department of Business and Industry	YES	2/5/25: Heard by Assembly Committee on Commerce and Labor Section 120 amends NRS 687B.409(5)(g), which applies to PEBP via NRS 287.04335, to change definition of "provider of health care" reference from 695G.070 to 629.031 (which NRS 287.04337(7)(c) already does).	Yes	No Impact
AB93	Revises provisions relating to public employees.	An act relating to public employees; revising the definition of "police officer" for the purposes of certain benefits and exemptions; specifying that the use of certain designations by the Department of Public Safety or a division or officer of the Department does not exclude certain persons employed by the Department from the definition of "police officer" for the purposes of certain benefits and exemptions; and providing other matters properly relating thereto.	Assemblymembers Hibbetts, Yurek & D'Silva	YES	2/28/25: Heard by Committee on Commerce and Labor Expands definition of "police officer" to include school police officers, juvenile probation officers, bailiffs/deputy marshals of municipal courts, and marshals/deputy marshals of cities or towns, thereby expanding survivor benefits of NRS 287.0477 to the survivors of such officers.	Yes	No Impact

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AB169	Revises provisions relating to insurance.	AN ACT relating to insurance; requiring that certain health insurance policies and health plans include coverage for certain forms of speech-language pathology as treatment for stuttering for persons who are less than 18 years of age; prohibiting certain limitations on such coverage; and providing other matters properly relating thereto.	Assemblymember Yeager	YES	2/28/25 Heard by Assembly Committee on Commerce and Labor Section 15 amends NRS 287.04335 to require coverage for habilitative and rehabilitative speech-language pathology as a treatment for stuttering for persons under 18; and to prohibit imposing a maximum annual limit on such coverage, limiting coverage based on cause of stuttering, or imposing medical management techniques on such coverage.	Yes	\$3.3 Million in 2027, \$8.1 Million future biennia
AB176	Revises provisions relating to health care.	AN ACT relating to health care; prohibiting a governmental entity from substantially burdening certain activity relating to reproductive health care under certain circumstances; authorizing a person whose engagement in such activity has been so burdened to assert the violation as a claim or defense in a judicial proceeding; authorizing a court to award damages against a governmental entity that substantially burdens such activity in certain circumstances; and providing other matters properly relating thereto.	Assemblywoman Torres	YES	2/4/25: To Committee on Health and Human Services	No	
AB186	Revises provisions relating to health care.	AN ACT relating to pharmacy; authorizing a registered pharmacist to prescribe drugs and devices to treat certain health conditions; authorizing a registered pharmacist to administer drugs; authorizing a registered pharmacist to engage in certain activity relating to laboratories and laboratory testing; and providing other matters properly relating thereto.	Assemblyman Orentlicher	YES	3/3/25: Heard by Assembly Committee on Commerce and Labor Amends NRS 695G.1705, which applies to PEBP via NRS 287.04335, re: insurance coverage for certain services performed by registered pharmacists.	Yes	Can Not Be Determined
AB188	Revises provisions relating to public employment.	AN ACT relating to the Public Employees' Benefits Program; requiring the Board of the Public Employees' Benefits Program to report certain information relating to the costs of health insurance for certain retirees; revising provisions relating to the subsidy paid for certain health and welfare benefits for certain state employees who have retired with state service; revising requirements for certain retired public officers and employees to reinstate insurance under the Program; and providing other matters properly relating thereto.	Assemblymember Carter	YES	2/6/25: To Assembly Committee on Ways and Means	Yes	\$179 million increase to OPEB liability, Additional Staff, Administrative Fees and Claims Costs \$2.5 million future biennia based on 3.55% inflation and only 73 new retirees initially enrolled.
AB202	Revises provisions relating to claims for dental care.	AN ACT relating to insurance; revising certain definitions for the purposes of certain coverage for health care services; revising provisions governing the circumstances under which a managed care organization is not required to authorize coverage of a health care service; revising the applicability of certain provisions requiring certain insurers to establish a system of procedures for resolving complaints of insured persons and providing for the external review of an adverse determination to include certain insurers that issue policies or certificates that provide only dental coverage; revising the information which a health carrier is required to provide in a notice of an adverse determination; authorizing a dentist of a covered person to submit to the Office for Consumer Health Assistance in the Department of Health and Human Services a request for an external review of an adverse determination; requiring an independent review organization to notify the dentist of a covered person and a health carrier of certain information and the determination and reasons of the independent review organization; requiring a decision of an independent review organization to be based, in part, on certain documentary evidence, including any recommendation of the dentist of the insured; and providing other matters properly relating thereto.	Assemblymember Brown-May		2/12/25: Heard by Assembly Committee on Commerce and Labor Requires appeals process/external review for dental-only plans; does not appear to affect current PEBP procedure.	No	

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AB247	Revised provisions relating to persons with disabilities.	AN ACT relating to persons with disabilities; revising provisions relating to the accommodation of persons with physical disabilities at certain public meetings; requiring that certain public buildings designed on or after July 1, 2025, include equipment and software for Communication Access Realtime Translation; including American Sign Language as a foreign or world language course of study; requiring the Department of Education to conduct an interim study on the need for a school for pupils who are deaf or hard of hearing; and providing other matters properly relating thereto.	Assemblymember Brown-May	YES	2/17/25: Referred to Assembly Committee on Government Affairs Requires public bodies to provide registered sign language interpreters and Communication Access Realtime Translation (live captioning by professional) at public meetings.	Yes	\$4,608 in Year 1, \$5,628 in Year 2, \$10,235 in future biennia
AB259	Revises provisions relating to health care.	AN ACT relating to health care; prohibiting certain actions related to pricing and reimbursement for certain drugs; creating a cause of action for violating such prohibitions; and providing other matters properly relating thereto.	Assemblywoman Considine	YES	3/12/25: Hearing Assembly Committee on Commerce and Labor Prohibits entities that purchase drugs subject to a maximum fair price (the price negotiated by the US Sec'y of Health & Human Svcs. for Medicare recipients) from paying more than that price or seeking reimbursement higher than that price.	Yes	\$921,024 each year without consideration for drug inflation or affect on rebates.
AB290	Revises provisions relating to health care.	AN ACT relating to insurance; imposing requirements governing prior authorization for medical or dental care; prohibiting an insurer from requiring prior authorization for covered emergency services or denying coverage for covered, medically necessary emergency services; requiring an insurer to publish certain information relating to requests for prior authorization on the Internet; requiring an insurer and the Commissioner of Insurance to compile certain reports; and providing other matters properly relating thereto.	Assemblymember Nguyen	YES	2/26/25: To Assembly Committee on Commerce and Labor Section 23 amends NRS 287.04335 to require that PEBP comply with NRS 687B.225(2)(b), (c); NRS 687B.225(1), (3), (5), (6), and (7); and sections 2 to 18 of the act, all of which provide requirements related to prior authorizations.	Yes	Can Not Be Determined
AB295	Revises provisions relating to health insurance.	AN ACT relating to insurance; imposing requirements relating to prior authorization; prescribing certain requirements relating to the use of artificial intelligence by health insurers; requiring the compilation and publication of certain reports relating to prior authorization; providing for the investigation and adjudication of certain violations; providing for the imposition of civil and administrative penalties for such violations; and providing other matters properly relating thereto.	Assemblymembers Yurek, Edgeworth, and Brown-May	YES	2/26/25: To Assembly Committee on Commerce and Labor Section 13 amends NRS 287.04335 to require PEBP to comply with: (1) NRS 678B.225(2)(b), requiring decisions on prior auth requests within 5 days for non-urgent care and 48 hours for urgent care; (2) NRS 678B.225(2)(c), requiring insurer requests for add'l info be made within 5 days for non-urgent care and 48 hours for urgent care, and decide on the request after receiving such additional info within 5 days/non-urgent care and 48 hours/urgent care; (3) NRS 687B.225(4), which sets forth requirements for adverse determinations of prior auths, i.e., specific description of reasons, specific clinical criteria/medical evidence, and describe how to appeal; (4) NRS 687B.225(5), provides that prior auth approvals for continuous treatment relating to chronic/long-term condition remain valid for 12 months; and (5) section 6 of the bill, which requires that any rebate money received from a PBM pursuant to provisions of the bill be used only for reducing premiums/eliminating or reducing cost-sharing for members.	Yes	\$242,745 in 2027 and \$485,491 in future biennia

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AB340	Requires health insurance to cover certain screenings and assessments.	AN ACT relating to insurance; requiring certain health insurance to include coverage for the screening, assessment and diagnosis of attention deficit hyperactivity disorder, fetal alcohol spectrum disorders, intellectual disabilities and specific learning disabilities for certain persons; establishing certain administrative sanctions for failure to provide such coverage; and providing other matters properly relating thereto.	Committee on Health and Human Services	YES	<p>3/12/25 @ 1:30 pm: Hearing Before Assembly Committee on Commerce and Labor</p> <p>2/28/25: Heard by Assembly Committee on Health and Human Services</p> <p>Section 14 amends NRS 287.04335 to comply with section 11 of the act, which requires coverage of screening for and the assessment and diagnosis of attention deficit hyperactivity disorder, fetal alcohol spectrum disorders, intellectual disabilities and specific learning disabilities for insureds under 18 years or, if enrolled in high school, until the age of 22.</p>	Yes	\$59,951 in 2027 and \$127,192 in future biennia
AB349	Revises provisions relating to health care.	AN ACT relating to health care; establishing maximum rates that hospitals, independent centers for emergency medical care and surgical centers for ambulatory patients may charge for certain goods and services provided to patients covered by certain insurance for public employees; requiring hospitals to publish certain information relating to pricing; authorizing the imposition of certain administrative penalties and sanctions; and providing other matters properly relating thereto.	Assemblyman Orentlicher	YES	<p>3/12/25: Hearing Before Assembly Committee on Health and Human Services</p>	Yes	Can Not Be Determined
AB360	Revises provisions relating to health care.	AN ACT relating to health care; requiring the use of a rapid test when testing certain pregnant women for syphilis in certain circumstances; authorizing the discipline of certain health care facilities that violate that requirement; and providing other matters properly relating thereto.	Assemblymember Goulding	YES	<p>3/12/25: Hearing Before Assembly Committee on Health and Human Services</p> <p>Requires medical facilities to test certain pregnant women for syphilis using a rapid point-of-contact test instead of a standard serological test (unless woman refuses). PEBP would be required to cover such tests pursuant to NRS 695G.1714(1)(b) (which requires testing for syphilis pursuant to NRS 442.010), which applies to PEBP via NRS 287.04335.</p>	Yes	No Impact
AB382	Makes revisions relating to health care.	AN ACT relating to insurance; expanding the scope of required insurance coverage for biomarker testing; and providing other matters properly relating thereto.	Assemblymember Flanagan	YES	<p>3/11/25: To Assembly Committee on Commerce and Labor</p> <p>Through amendment to NRS 695G.1703, which applies to PEBP via NRS 287.04335, requires PEBP to cover any biomarker testing for the diagnosis, treatment, appropriate management and ongoing management of a medical condition or disease (not just cancer) when such biomarker testing is supported by medical evidence, regardless of whether the biomarker testing is determined to be medically necessary.</p>	Yes	\$168,728 in 2027 and \$419,929 in future biennia

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AB399	Revises provisions related to insurance.	AN ACT relating to insurance; requiring that certain policies of health insurance include coverage for certain health care to treat and care for diseases and conditions caused by severe obesity; and providing other matters properly relating thereto.	Assemblymember Edgeworth	YES	3/12/25: To Assembly Committee on Commerce and Labor Section 14 amends NRS 287.04335 to require compliance with section 11 of the act, which requires coverage for medically necessary treatment and care for diseases and conditions caused by severe obesity, including bariatric surgery for insureds 18+ years old and related preoperative and postoperative services; act allows for certain conditions on providing such coverage, allows limitation to only one such surgery per lifetime, and does not require coverage for "any drug that is injected to lower glucose levels or any other drug prescribed for weight loss."	Yes	No Impact
SB32	Revises provisions relating to benefits for public employees	AN ACT relating to the Public Employees' Benefits Program; eliminating the duty of the Director of the Department of Administration to appoint and define the duties of a Quality Control Officer for the Program; and providing other matters properly relating thereto.	PEBP	YES	2/19/25: Heard by Senate Committee on Government Affairs	N/A	
SB47	Requires a study of mental and behavioral health care parity in Nevada	AN ACT relating to insurance; providing for a study of certain issues relating to coverage for behavioral health care; requiring the submission of certain information for the purposes of that study; providing for the confidentiality of such information; and providing other matters properly relating thereto.	Washoe Regional Behavioral Health Policy Board	YES	2/26/25: Heard by Senate Committee on Commerce and Labor Section 8 specifically includes PEBP among "health insurers" that must submit info to Insurance Commissioner for any study of the degree to which insurance plans in Nevada achieve parity between coverage for behavioral health care and coverage for other medical care.	Yes	No Impact
SB128	Revises provisions relating to health care.	AN ACT relating to health care; prescribing requirements governing the denial of requests for prior authorization; requiring, in certain circumstances, licensed physicians, physician assistants, advanced practice registered nurses and osteopathic physicians to discuss with patients certain information relating to stem cell treatment, storage and donation; and providing other matters properly relating thereto.	Senator Neal	YES	2/3/25: To Senate Committee on Commerce and Labor Adds section to Chapter 287 prohibiting the use of AI/automated decision tools to deny prior auth requests; requires properly licensed/educated/trained professional to review records before prior auth can be denied.	Yes	No Impact
SB149	Revises provisions relating to the use of pharmacy benefit managers by Medicaid	AN ACT relating to Medicaid; requiring the Department of Health and Human Services to select and contract with a state pharmacy benefit manager to manage pharmacy benefits for Medicaid and certain other health benefit plans; prescribing certain duties of the state pharmacy benefit manager; requiring that the Department approve certain contracts entered into by the state pharmacy benefit manager; prohibiting the state pharmacy benefit manager from engaging in certain activities; providing monetary penalties for certain violations; requiring a Medicaid managed care organization to contract with and utilize the state pharmacy benefit manager to manage pharmacy benefits; and providing other matters properly relating thereto.	Senator Stone	YES	2/3/25: To Senate Committee on Health and Human Services Requires DHHS to contract with one state PBM to manage coverage for prescription drugs for Medicaid "and certain other health benefit plans." In light of Health Authority legislation, this may eventually include PEBP.	No	

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SB165	Revises provisions relating to public health.	AN ACT relating to behavioral health; providing for the licensure and regulation of behavioral health and wellness practitioners; authorizing the establishment of a Behavioral Health and Wellness Practitioner Advisory Group; authorizing the Board of Psychological Examiners to investigate and impose discipline on a behavioral health and wellness practitioner; prohibiting the unlicensed practice of behavioral health promotion and prevention; establishing a privilege for certain confidential communications between a patient and a behavioral health and wellness practitioner; requiring certain insurers to cover behavioral health promotion and prevention services provided by a behavioral health and wellness practitioner; providing penalties; making appropriations; and providing other matters properly relating thereto.	Senator Nguyen	YES	2/26/25: Heard by Senate Committee on Commerce and Labor Requires PEBP to provide coverage for behavioral health promotion and prevention services and to include behavioral health and wellness practitioners in their networks by July 1, 2026.	Yes	Can Not Be Determined
SB192	Revises provisions relating to health care.	AN ACT relating to public health; imposing requirements relating to birth in a hospital or freestanding birthing center; requiring health insurance to include certain coverage; requiring the governing bodies of public schools to adopt policies to prevent sudden cardiac arrest during the participation of pupils in certain sports; requiring an independent psychiatric evaluation of certain children in the custody of a child welfare agency; prohibiting a health insurer or health insurance administrator from providing health care services; prohibiting a hospital from taking measures to restrict certain providers of healthcare; prohibiting the use of race-based health formulas and race-based care standards in certain circumstances; requiring patients to be provided information relating to stem cell treatment, storage and donation in certain circumstances; revising provisions governing the prescribing and dispensing of controlled substances; prohibiting a health insurer from engaging in certain discrimination against solo practitioners; providing for a study of certain disparities relating to health care; providing a penalty; and providing other matters properly relating thereto.	Senator Neal	YES	2/6/25: To Senate Committee on Health and Human Services Section 18 amends NRS 287.04335 to require coverage of doula services and include doulas in network. Section 42 amends NRS 687B.692, which applies to PEBP through NRS 287.04335, to prohibit denial of a request to include a provider in a network because provider is a solo practitioner. Section 64 amends NRS 695G.1717, which applies to PEBP through NRS 287.04335, to extend current coverage for hormone replacement therapy to include testosterone replacement therapy for menopausal women.	Yes	\$306,750 in Year 2, \$61,500 in future biennia
SB209	Revises provisions relating to pharmacy benefit managers.	AN ACT relating to pharmacy benefit managers; expanding the scope of certain provisions; prohibiting pharmacy benefit managers from engaging in certain practices; requiring pharmacy benefit managers to make certain disclosures; requiring pharmacy benefit managers to pass rebates along to certain insurers and insureds; requiring pharmacy benefit managers and the Commissioner of Insurance to prepare certain reports; providing a cause of action for certain pharmacies; requiring certain insurers to use passed-along rebate funds for certain purposes; providing penalties; and providing other matters properly relating thereto.	Senator Stone	YES	2/19/25: To Senate Committee on Commerce and Labor Section 37 amends NRS 287.04335 to require PEBP to comply with section 33, which requires that any rebate money received from a PBM pursuant to provisions of this bill to be used for the sole purpose of reducing premiums and eliminating or reducing cost-sharing for members.	Yes	\$21.5 million Year 1, \$21.5 million Year 2, \$43.1 million future biennia. This accounts for loss of revenue and an increase to expenditures
SB211	Revises provisions relating to collective bargaining for certain state employees.	AN ACT relating to public employees; authorizing, under certain circumstances, peace officers or firefighters in the Executive Department of State Government to collectively bargain for insurance benefits; and providing other matters properly relating thereto.	Senator Stone	YES	2/19/25: To Senate Committee on Government Affairs Allows certain peace officers and firefighters to negotiate to leave PEBP to obtain other life, accident, or health insurance.	Yes	Can Not Be Determined

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SB217	Revises provisions relating to women's health.	AN ACT relating to health care; prohibiting a governmental entity from substantially burdening certain activity relating to assisted reproduction under certain circumstances; authorizing a person whose engagement in such activity has been so burdened to assert the violation as a claim or defense in a judicial proceeding; authorizing a court to award damages against a governmental entity that substantially burdens such activity in certain circumstances; providing certain immunity from civil and criminal liability and administrative sanctions for certain persons and entities involved in the provision of assisted reproduction; providing that a fertilized egg or human embryo outside of a human uterus is not a person for legal purposes; requiring certain health insurers to authorize a pregnant person to enroll in a health plan during a specified period; requiring certain public and private health insurers to provide certain coverage for the treatment of infertility and fertility preservation; providing a penalty; and providing other matters properly relating thereto.	Senator Cannizzaro	YES	2/20/25: Referred to Senate Committee on Health and Human Services Section 13 amends NRS 287.04335 to comply with new provisions requiring coverage for: (1) treatment of infertility, and (2) preservation of fertility where insured had medical condition or requires medical treatment that may cause infertility under certain circumstances; and requiring special enrollment period to pregnant persons outside of open enrollment. Also prohibits imposition of conditions, including cost-sharing, prior auths, and waiting periods on infertility treatment/fertility preservation if such conditions are not required for similar benefits that are not related to fertility.	Yes	\$3.2 million in Year 1, \$3.7 million in Year 2 and \$9 million in future biennia.
SB246	Revises provisions relating to health care.	AN ACT relating to insurance; requiring certain health plans to authorize a woman covered by such a plan to obtain covered gynecological or obstetrical services without first receiving authorization or a referral from her primary care physician; and providing other matters properly relating thereto.	Senator Lange	YES	3/12/25: Heard Senate Committee on Commerce and Labor Section 8 amends NRS 287.04335 to require that PEBP include in its plan a provision authorizing members to obtain covered gynecological/obstetrical services without first receiving authorization or referral from a primary care physician.	Yes	No Impact
SB250	Revises provisions relating to health care.	AN ACT relating to health care; providing that the electronic health records of a patient are the property of the patient; requiring certain entities to allow a patient to take certain actions relating to access to his or her electronic health records; requiring the establishment of a statewide electronic health repository; imposing certain requirements relating to the statewide electronic health repository; providing a penalty; and providing other matters properly relating thereto.	Senator Lange	YES	2/28/25: To Senate Committee on Health and Human Services Section 13 amends NRS 287.04335 to require that PEBP comply with sections 2, 2, and 4 of the act, which provide that the electronic health care records (EHR) of a patient are the property of the patient and the patient must be allowed to access and forward his or her EHR without a fee or charge and request that his or her EHR be forwarded in accordance with state law.	Yes	Can Not Be Determined
SB257	Revises provisions relating to autism.	AN ACT relating to autism; revising requirements governing the statewide standard for measuring outcomes and assessing and evaluating certain persons with autism spectrum disorders; revising requirements governing early intervention services for persons with autism spectrum disorders; requiring an insurer to accept as dispositive certain diagnoses of persons with autism spectrum disorders for purposes related to required coverage for the diagnosis and treatment of such disorders; requiring insurers to cover such diagnosis and treatment provided by any provider of health care acting within his or her scope of practice; and providing other matters properly relating thereto.	Senator Dondero Loop	YES	2/28/25: To Senate Committee on Health and Human Services Amends NRS 695G.1645, which applies to PEBP via NRS 287.04335, to remove requirement of coverage only when diagnosed/treated by specific providers and instead require coverage when diagnosed/treated by any provider of health care acting within scope of practice; also requires insurer to accept as dispositive any diagnosis of an autism spectrum disorder rendered in accordance with statewide standard set forth in bill.	Yes	No Impact

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SB268	Revises provisions relating to dental care.	AN ACT relating to insurance; requiring certain health insurance to include coverage for certain dental services when provided by certain dental hygienists without the supervision of a dentist to the same extent as if provided by a dental hygienist under the supervision of a dentist; and providing other matters properly relating thereto.	Senator Flores	YES	3/5/25: To Senate Committee on Commerce and Labor Section 15 amends NRS 287.04335 to require PEBP to comply with section 12 of the act, which requires plans that cover services by dental hygienists with special endorsement when supervised by dentist to cover the same services when such hygienists are not supervised by dentist.	Yes	No Impact
SB292	Revises provisions relating to health care.	AN ACT relating to insurance; requiring certain insurers to allow certain persons who are less than 65 years of age to purchase a Medicare supplemental policy that the insurer makes available for purchase to new insureds who are 65 years of age or older; imposing certain restrictions on the limitations, terms and conditions such an insurer may impose and the premiums such an insurer may charge for such policies to persons who are less than 65 years of age; requiring such an insurer to establish certain open enrollment periods for the purchase of a Medicare supplemental policy; prohibiting an insurer from imposing an exclusion of certain benefits with respect to a Medicare supplemental policy issued during an open enrollment period; and providing other matters properly relating thereto.	Senator Lange	YES	3/7/25: To Senate Committee on Commerce and Labor Section 9 amends NRS 287.04335 to require compliance with section 4 of the act, which requires insurers that offer Medicare supplemental policies to allow persons less than 65 enrolled in Medicare on basis of disability or end-stage renal disease to purchase Medicare supplemental policy offered to new insureds 65+, with same premium/no add'l limitations, terms, or conditions, and to provide similar open enrollment.	Yes	No Impact
SB316	Revises provisions relating to health care.	AN ACT relating to insurance; requiring health insurers, pharmacy benefit managers and the Commissioner of Insurance to prepare certain reports; expanding the scope of certain provisions relating to pharmacy benefit managers; prohibiting pharmacy benefit managers from engaging in certain practices; requiring pharmacy benefit managers to make certain disclosures; requiring pharmacy benefit managers to pass rebates along to certain insurers and insureds; requiring certain insurers to use passed-along rebate funds for certain purposes; prohibiting insurers from assessing certain cost-sharing obligations in certain circumstances; providing causes of actions and civil and criminal penalties; and providing other matters properly relating thereto.	Senator Nguyen	YES	3/12/25: To Senate Committee on Commerce and Labor Section 40 amends NRS 287.04335 to: (1) prohibit imposing a cost-sharing obligation against insured for prescription drug that exceeds the net amount the plan pay for the drug, including an rebate; (2) require plan to use rebates received from PBM for the sole purpose of reducing premiums and offsetting or reducing insured's cost-sharing obligations.	Yes	\$23,134,816 in 2027 and \$46,269,632 in future biennia
SB337	Revises provisions relating to health care.	AN ACT relating to health care; requiring certain health care facilities and certain providers of health care to provide patients with a form for a non-opioid directive and offer patients treatments that do not utilize an opioid under certain circumstances; requiring the Division of Public and Behavioral Health of the Department of Health and Human Services to create a form for a non-opioid directive; requiring the Administrator of the Division to appoint an advisory board to monitor compliance with laws and regulations relating to the non-opioid directive; requiring certain policies of health insurance to include coverage for at least one drug that is an alternative to opioids; requiring certain insurers to provide the form for a non-opioid directive to new insureds; revising the manner by which money in the Fund for a Resilient Nevada allocates money to projects and grants; and providing other matters properly relating thereto.	Senator Lange	YES	3/13/25: To Senate Committee on Health and Human Services Section 28 amends NRS 287.04335 to require compliance with provisions of section 53 of the act, which requires the plan include coverage for at least one alternative to an opioid that is effective for the purpose for which an opioid is commonly used and is available; and prohibits requiring prior authorization or other requirement for such alternative if prior authorization or other requirement is not required for an opioid under the same circumstances.	Yes	\$97,333 in 2027 and \$207,702 in future biennia
SB344	Revises provisions governing health care.	AN ACT relating to insurance; requiring certain health insurance to cover certain screenings for genetic disorders in a fetus or the parents of a fetus; and providing other matters properly relating thereto.	Senator Cannizzaro	YES	3/13/25: To Senate Committee on Commerce and Labor Section 15 amends NRS 287.04335 to require coverage for noninvasive prenatal screening, i.e., drawing blood to test DNA for the purpose of detecting chromosomal abnormalities in the fetus, at any time during pregnancy without requiring prior authorization	Yes	Pending Feedback from Vendor Partners