

Joe Lombardo
Governor



Richard Whitley
Director

Nevada Health Authority Overview

Stacie Weeks, Administrator, Division of Health Care Financing and Policy

March 4, 2025

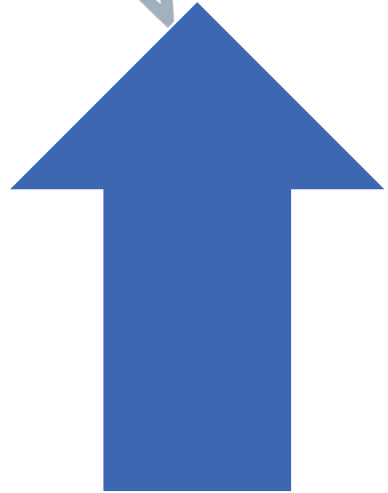


Department of Health and Human Services

Helping people. It's who we are and what we do.



The Premise Behind Nevada Health Authority

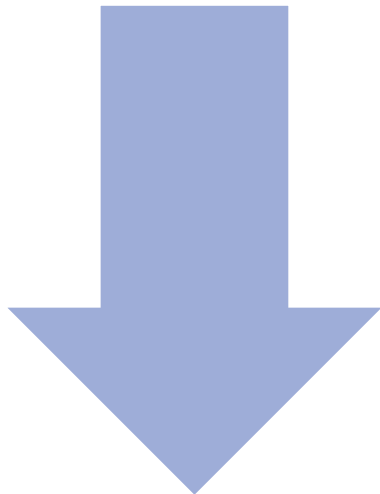


8.9% annual growth rate in health care expenditures (highest in country)

Largest spend for state general fund (**\$2.7 billion**) is on Medicaid

State covers **one in three** Nevadans across programs (largest payer and purchaser)

State employee health care **costs**



Every county is a health care professional **shortage area**

Limited **provider networks** for state employees

Nevada ranks in **bottom 10** in most health care rankings nationally

Lack of competition and leverage with vendors in **PEBP**

MISSION

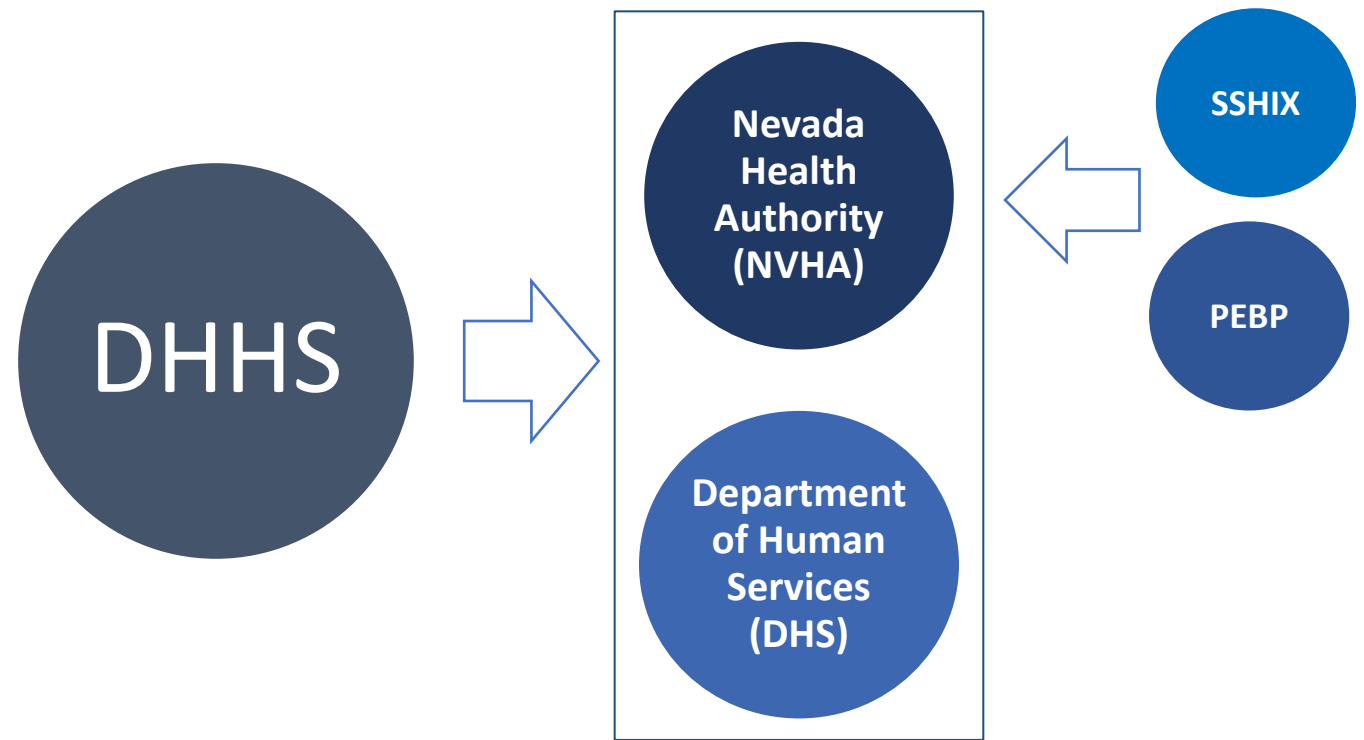
- To promote access to safe, quality, affordable health care by:
 - Developing a sufficient provider workforce;
 - Securing affordable coverage; and
 - Supporting more effective, efficient, and responsive health care systems through new value-based strategies.
- To ensure long-term sustainability of state programs by minimizing financial burden of health care on state budget, Nevadans, and public employees, through:
 - Aligned across-market cost containment measures;
 - Federal resource maximization; and
 - Innovative state purchasing and contracting strategies.



Agency Reorganization

The Goal: To better align priorities, increase efficiencies and enhance purchasing power through agency reorganization.

Governor proposes a reorganization of the Department functions to better align efforts in human services and health care





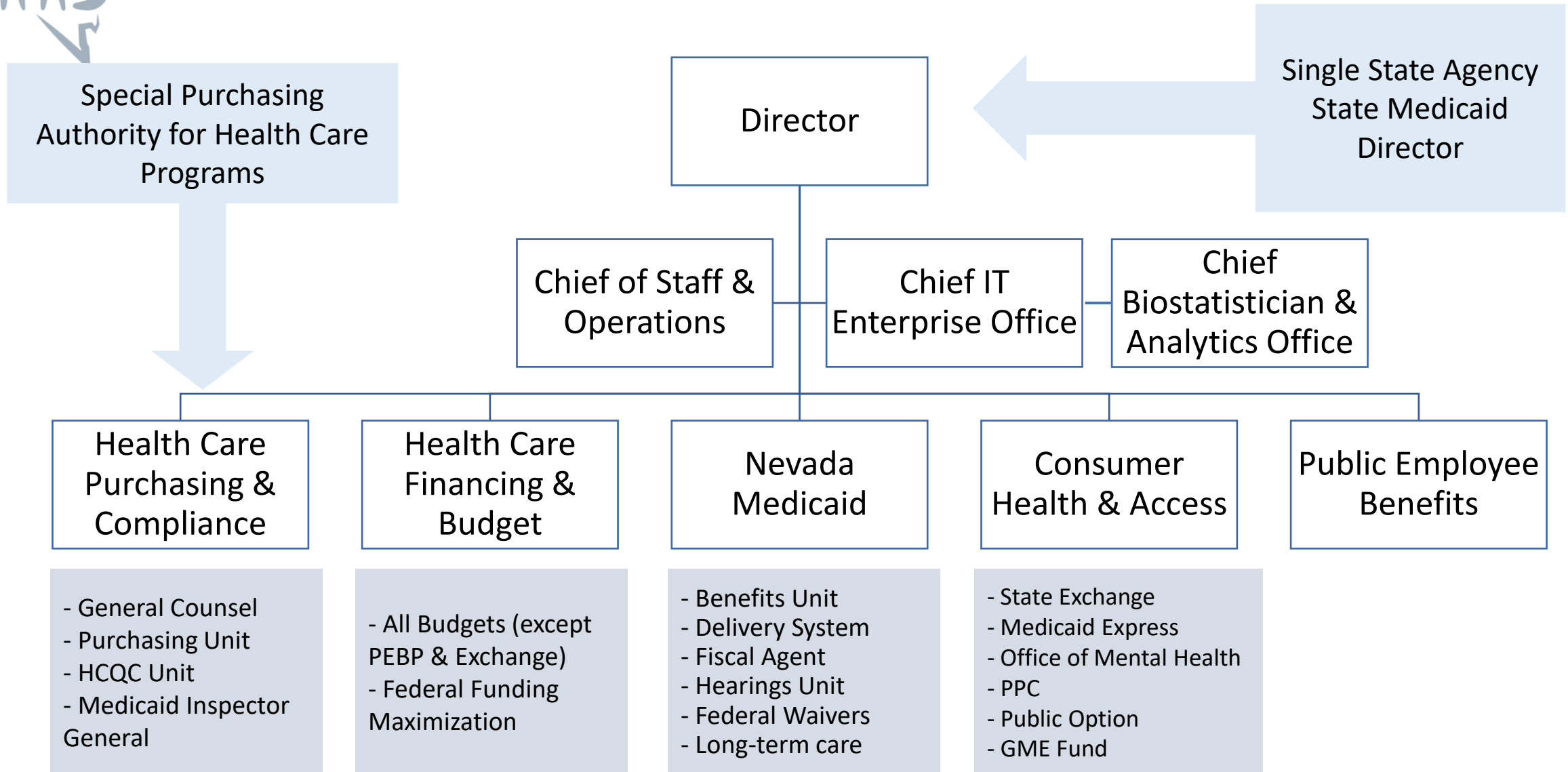
Nevada Health Authority

In addition to Exchange and PEBP moving to align state health care purchasing efforts, **other programs within DHHS** are proposed to move to the new agency:

- Patient Protection Commission
- Office of Analytics + All Payers Claims Database
- Indigent Hospital Care Fund
- DPBH Health Care Quality and Compliance (HCQC)
- ADSD Medicaid Provider Oversight and Audits
- Governor's Council on Developmental Disabilities

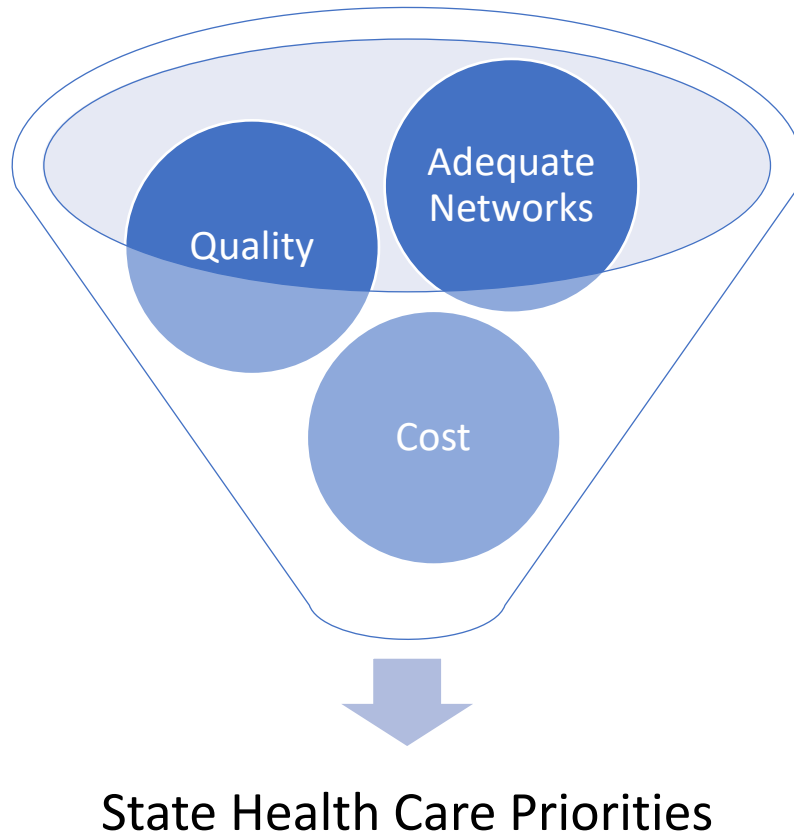


Proposed NVHA Organizational Chart





Aligning State Priorities in Health Care



- PEBP, Medicaid, and Exchange all seek to improve health care coverage for Nevadans eligible for state program
- HCQC – Facility licensure also
- This includes improving quality of care, increasing provider network adequacy, and lowering health care costs
- Bringing these programs together helps align these efforts, reduce duplication, and maximize resources and forces



NVHA: Examples of Gains & Efficiencies

- Removes unintended conflicts in current system (provider v. regulator)
- Supports greater leverage of federal resources for improving quality of care and provider access and workforce issues in Medicaid which support all coverage programs
- Combining payors of health care at state level to increase the state's buying power with carriers when purchasing products to support coverage programs
- Simplifies access to coverage programs for consumers under one umbrella with streamlined messaging and marketing about coverage options
- Leverages Medicaid's health care purchasing and coverage expertise and clinical/pharmacy practitioner support across all coverage programs
- Opportunity to align actuarial and other vendor supports across all coverage programs instead of having multiple vendors for each program
- Allows state to more efficiently leverage data and resources to better manage population health in Nevada



Next Steps

- Budget hearings on account changes – ongoing
- Budget BDR for NVHA & PEBP Updates (Yet to be released by LCB)
 - PEBP Board maintained, new term limits to align with other board initiatives
 - PEBP does not hire Director but makes recommendations to Director and Governor for hire
 - Changes to align with PEBP Policy BDRs
 - Allows PEBP to leverage vendors and resources of NVHA/Medicaid to support PEBP activities (save and streamline)
 - Funding for national actuarial and policy firm to model options for new health coverage model for PEPB (at or better in benefits but sustainable for employees and state)
 - Report to Board on findings and feedback
 - Report to lawmakers next session on findings and any statutory changes needed to effectuate improvements in coverage/program



Questions