

**LCB File No. T062-99**

**ADOPTED TEMPORARY REGULATION  
OF THE STATE BOARD OF HEALTH**

(Effective January 8, 1999)

**NAC 695.275 Certain information to be included in annual report.**

1. Each organization which receives a certificate of authority shall include information in its annual report to the commissioner pursuant to NRS 695C.210:

The Health Plan Employer Data and Information Set (HEDIS 1999) quality and performance indicators adopted by the State Board of Health. The specific measures to be reported are within the HEDIS reporting set measure domains.

2. The report shall include specific measures as defined by the Board of Health for each calendar year. This report is due no later than June 1 each year for the preceding calendar year.

**INFORMATIONAL STATEMENT  
NEVADA STATE HEALTH DIVISION  
Bureau of Health Planning and Statistics  
December 16, 1998**

**1. A description of how public comment was solicited, a summary of the public response, and an explanation of how other interested persons may obtain a copy of the summary.**

Public comment was solicited through a Notice of Public Hearing in the *Reno Gazette Journal* and the *Las Vegas Review Journal* on November 9, 1998. The notice described the purpose of the public hearing and stated that the public hearing would be held at the State Board of Health (BOH) meeting on December 11, 1998 at the Washoe County District Health Department in Reno.

Although there was no formal testimony at the public workshop, there were a number of questions, comments, and requests for clarification. No one spoke at the public hearing.

The public notices stated that persons wanting further information should contact Mark Hemmings at the Bureau of Health Planning in Carson City. The notices included the Bureau's phone number and address. The notices also stated that the proposed regulation would be available for public inspection at the Bureau of Health Planning, all county public libraries, and the State Library.

**2. The number of persons who:**

**(a) Attended the hearing.**

Approximately 85 persons were in attendance at the public hearing at the Board of Health meeting in Reno.

**(b) Testified at each hearing.**

No one formally testified at the public workshop.

No one testified at the BOH hearing regarding the regulation. There were however, a couple of questions by two Board members.

**(c) Submitted written statements to the agency.**

No written statements were submitted to the agency for either the public workshop or the public hearing.

**3. A description of how comment was solicited from affected businesses, a summary of their responses, and an explanation of how other interested individuals may obtain a copy of the summary.**

Public comment was solicited from affected businesses by the process described above in item 1, and in two other opportunities;

- 1) A planning session was held with the HMO industry on October 13, 1998 in Las Vegas. Eleven of the twelve HMOs and the Director of the Nevada Association of Health Plans participated in the planning session.
- 2) A public workshop was held on November 2, 1998, in Las Vegas. Public notice was published on October 18, 1998, in the Las Vegas Review journal and on October 19, 1998, in the Reno Gazette journal. The public workshop was attended by twelve persons, including representatives from six HMOs, the State Insurance Division, and the State Medical Association. There was no formal testimony nor were there any adverse comments. Most of the discussion involved comments that were reviewed at the October 13 planning group session. No changes to the proposed regulation resulted from the public workshop.

A summary of the minutes from the above-mentioned could be obtained by contacting at the Bureau of Health Planning and Statistics, 505 E. King St., Carson City, NV 89710, phone (775) 687-4720.

**4. If the regulation was adopted without changing any part of the proposed regulation, a summary of the reasons for adopting the regulation without change.**

The amendment will improve the data regarding quality and performance indicators by making the data elements uniform and reliable. The Division will receive comparable data from the HMOs. The specific elements may vary depending on issues of interest to consumers and the Board of Health.

**5. The estimated economic effect of the regulation of the business which it is to regulate and on the public. These must be stated separately and in each case must include:**

**(a) Both adverse and beneficial effects.**

For the well-managed HMO there should be little impact. The regulation incorporates standards that already exist and are accepted by the industry. If an HMO is already federally qualified or industry accredited, there will be nominal financial impact because the reporting requirements related to required federal or state survey or accreditation procedures. Most of the HMOs currently utilize the HEDIS system of reporting data elements for internal quality reviews and their own reporting needs.

It is anticipated that there will be no direct financial impact on the public because of the BOH regulation.

**(b) Both immediate and long-term effects.**

The effects of this regulation include increased quality assurance safeguards for consumers; the availability of comparable data elements to the state and the public; higher standards for the industry in terms of quality assurance systems, and increased data collection and reporting capacity.

**6. The estimated cost to the agency for enforcement of the proposed regulation.**

The agency already reviews annual HMO quality and performance indicator data. Existing agency staff working with HMOs already handle the duties imposed by the regulation.

**7. A description of any regulations of other state or government agencies which the proposed regulation duplicates or overlaps and a statement explaining why the duplication or overlapping is necessary. If the regulation duplicates or overlaps a federal regulation, the name of the regulating federal agency.**

There is no overlapping or duplications for the proposed regulation.

**8. If the regulation includes provisions which are more stringent than a federal regulation which regulates the same activity, a summary of such provisions.**

There are no federal regulations which duplicate the BOH regulation.

**9. If the regulation provides a new fee or increases an existing fee, the total annual amount the agency expects to collect and the manner in which the money will be used.**

The BOH regulation does not impose a fee and there is no existing fee charged by the agency.

**10. If the agency is required to adopt this regulation pursuant to a federal statute or regulation which exceeds the agency's specific statutory authority or sets forth requirements more stringent than state statute, include statement that adoption of the regulation is required by federal statute or regulation. The statement must include the specific federal statute or regulation requiring such adoption.**