

PUBLIC WORKSHOP NOTICE AND AGENDA (Issued September 7, 2000)

Name of Organization:

Place of Meeting:

Date & Time of Meeting:

Task Force on the Policy of the State of Nevada Concerning Access to Public Health Services

Public Forum, Consumer Input Subcommittee

Grant Sawyer State Office Building, Room 4412 ABC 555 E. Washington Avenue
Las Vegas, Nevada

Videoconferenced to: Legislative Building Room 1214
401 South Carson Street Carson City, Nevada

Wednesday, September 13, 2000 9:30 a.m.

AGENDA

A.

B.

c.

Opening remarks by the Chairman

Dr. Javid Anwar

Explanation of the purpose and procedures for the public workshop - Dr. John Yacenda

Public Comment on proposals and activities brought before the Task Force on the Policy of the State of Nevada Concerning Access to Public Health Services for recommendation to the

Governor and Director of the Legislature:

1 . Nevada Essential Plans (NEPs) - recommended health benefits that must be

2.

3.

included in basic plans of health insurance offered by Health Maintenance

Organizations, Indemnity Carriers, and Preferred Provider Organizations

Nevada Uninsurable Health Insurance Plan (NUHIP) - recommendation to create

a high risk health insurance pool for persons unable to obtain insurance

coverage due to high risk health conditions

Health Care Systems Commission - recommendation to create an

public works

1 member

body, with appropriate staff, that are charged to prepare a report by June 30, 2002, in which the Commission details up to 10 recommendations and plans for implementation to advance policies and practices that will improve the scope and funding of health care in Nevada;

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Office of Minority Health - recommendation to create a Nevada Office of Minority Health (NOMH) within the Office of the Governor

Health Care Fund for Uninsured Nevadans - recommendation to create a fund in the Primary Care Development Center of the Health Division in the Department of Human Resources that addresses the increased financial burden being managed by Nevada's safety-net providers who provide health care services on a **sliding fee** basis;

Commission on Health Care Licensing Parity - recommendation to create a body within the Office of the Governor to monitor consistency among regulatory boards that license health professions in the state of Nevada ensuring that access to care is a consideration of the licensing process

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D.

Public Comment

Adjournment.

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~ We are pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary, please call Dr. John Yacenda at 687-4176 (ext 320), or notify the Department of Human Resources in writing as soon as possible: Director's Office, 505 E. King St~ Room 600, Carson City, Nevada, 89701.

Supporting materials will be made available at the meeting locations

Notice of this meetin2 was Dosted in the following Carson Citv. Nevada. locations: Bladel Building, 209 E. Musser Street; Capitol Press Corps, Basement, Capitol Building; City Hall, 201 North Carson Street; Legislative Building, Room 1214, 401 South Carson Street; and Nevada State

Library, 100 Stewart Street. Notice of this meetin2 was faxed for costing to the followin2 Las Ve2as. Nevada. IQcations: Clark County Office, 500 South Grand Central Parkway; Capitol Police, Grant Sawyer State Office Building, 555 East Washington Avenue. Notice of this meetin2 was faxed for Dostin2 to the followin2 Rural Nevada. locations:

Battle Mountain General Hospital Kathy Ancho, Administtator
535 South Humboldt Street
Battle Mountain, NY 89820 (775) 635-2550
(775) 635-8844

Boulder City Hospital
Kim Crandell, Administtator 90 I Adams Boulevard Boulder City, NY 8900S (702)293-4111
(702) 293-0430

Humboldt General Hospital Byron Quinton, Administrator 118 East Haskell Street Winnemucca, NY 89445 (775) 623-5222
(775) 623-5904

Mt. Grant General Hospital Richard Munger, Administrator 111 and "A" Streets
Hawthorne, NY 89415
(775) 945-2461
(775) 945-2359

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,Carson-Tahoe Hospital
Steve Smith, Administrator 775 Fleischman Way
Carson City. NY 89702-2168 (775)885-4256 (775)885-4580

Churchill Community Hospital Jeffrey Feike, Administrator SOI East Williams Avenue Fallon, NY 89406
(775) 423-3151
(775) 423-3365

Grover C. Dils Medical Center Bill Watts, Administrator
Hwy 93 North
Caliente. NY 89008
(775) 726-3171
(775) 726-3286

Lyon County Clerk
31 S. Main
Yerington, NY 89447 (775) 463-6501
(775) 463-6533

Town offemley
595 Silver Lace Blvd. Fernley, NV 89408 (775) 575-5455
(775) 575-6737

Ely City Hall
50 I Mill Street Ely, NV 89301 (775) 289-2430 (775)289-1463

Gabbs City Hall Main Street
Gabbs, NY 89409 (775) 285-267I (775) 285-4250

West Wendover City Offices 80 I Alpine Street

public works

West Wendover, NY 89883 (775) 664-3081
(775) 664-3720

City of Elko Offices 1751 College Avenue Elko, NY 89801 (775) 777-7100
(775) 777-7129

Pershing General Hospital
Jon Smith, Interim Administrator 855 Sixth Street
Lovelock, NY 89419
(775) 273-2621
(775) 273-3215

South Lyon Medical Center Joan Hall, Administrator 213 S. Whitacer
Yerington, NY 89447
(775) 463-2301
(775) 463-5866

William Bee Ririe Hospital Robert Morasko. Administrator 1500 Avenue H
Ely, NY 89301
(775) 289-3001 ext 222
(775) 289-8244

Lincoln County Clerk IOO Depot Avenue Caliente, NY 89008 (775) 726-3132
(775) 726-3370

Elko County CourtHouse 569 Court Street
Elko. NV 89801
(775) 738-5398
(775) 753-8535

Fallon City Hall
55 West Williams Avenue Fallon. NY 89406
(775) 423-5104
(775) 423-8874

Lovelock City Clerk 400 14d1 Street Lovelock, NY 89419 (775) 273-2356
(775) 273-7979

Winnemucca City Clerk 90 West 4- Street Winnemucca, NY 89445 (775) 623-6338
(775) 623-6321

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Public w--shoo **Ag811d8** (9-13.00)

Nevada Essential Plans - Conceptual Approach

The Health Insurance Subcommittee of the "Task Force on the Policy of the State of Nevada Concerning Access to Public Health Services" was appointed to develop a proposal for public comment and adoption by the Task Force as a recommendation to the Nevada State Legislature, which would: "Establish the basic coverage that must be included in each policy of health insurance and health plan that is issued in the State of Nevada. To determine the basic coverage, the task force shall consider public policy and actuarial evidence, including, without limitation, an analysis of the cost of providing the coverage. The basic coverage must be established as the minimum coverage to be offered which may be augmented based upon the needs of insureds or employees and on economic considerations." (Senate Bill 556; Section 3.1.)

The Subcommittee has recommended the following conceptual approach to legislation to accomplish this requirement:

-The Subcommittee is recommending the Task Force propose that the Legislature adopt a "Nevada Essential Plan" which contains all currently mandated coverages and provider reimbursement categories. The "Nevada Essential Plan" would effect all health insurance policies and health plans sold in Nevada after July 1,2002. The Commissioner of Insurance should be empowered to adopt any regulations needed to implement the "Nevada Essential Plan."

-The Subcommittee is recommending that Task Force propose that the Legislature eliminate all individual "mandated benefits."

-The Subcommittee is recommending that Task Force propose that the Legislature create a nine member "Advisory Commission on the Nevada Essential Plan," with three members appointed by the Governor; three members appointed by the Speaker of the Assembly; and, three members appointed by the Senate Majority Leader. This Advisory Committee would advise the State Commissioner of Insurance regarding any revisions of the "Nevada Essential Plan." Any proposal from any interested party for the addition or the elimination of a benefit of coverage must be reviewed by the Advisory Committee and must be evaluated by them for its impact on the cost and quality of the "Nevada Essential Plan."

-The Subcommittee is recommending that Task Force propose that the Legislature require the State Commissioner of Insurance to report biennially to the Legislature on the impact of the Nevada Essential Plan on the State's insured population, the State's insurers and Nevada business, including an independent "cost-benefit" analysis. The Commissioner must report to the Legislature all proposed changes to the "Nevada Essential Plan" considered by the Advisory Commission and the Legislature must adopt a "Nevada Essential Plan" biennially based upon its review of this report.



C, Item 1

Nevada Uninsurable Health Insurance Plan (NUHIP)

Summary: The formation of a high risk health insurance pool for persons unable to obtain insurance coverage due to high risk health conditions will be created to provide coverage for these individuals at a cost that is capped at a level above average costs for comparable coverage.

Key Elements:

The following are essential considerations

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- Premiums to be paid by beneficiaries
- Not available to employers
- Eligibility standards apply
- Coverage provided by the Nevada Essential Plan available in three basic choices: HMO, PPO, Indemnity
- Waiting period for pre-existing conditions may apply
- Primary funding is provided by premium payments from beneficiaries Excess claim costs to be borne by state appropriations
- No income qualifications
- Services to stabilize individual insurance market
- High risk pool may have enrollment caps
- Premiums may increase on an annual basis

Conclusion: The NUHIP will serve to either reduce or stabilize general health insurance costs, and reduce the number of uninsured people in

Option D

A coordinated, responsive and accessible system of effective, efficient, and economically feasible health care opportunities to support and promote the health of Nevada citizens and communities.

Option E

The health of Nevada citizens and communities is supported and promoted through a coordinated, responsive and accessible system of effective, efficient and economically feasible health care services.

GOALS OF THE COMMISSION:

1

Increase the years of healthy life for Nevadans.

2. **Increase the prevalence of healthy behaviors among** Nevadans.

3. **Decrease the prevalence of health risking behaviors among** Nevadans.

4.

Assure access to quality, affordable health care services for Nevadans

5. **Promote optimal health protection in Nevada** communities.

6. Promote equitable health opportunities for all Nevadans.

Nevada Office of Minority **Health** (NOMH).

Location:

FTE within the Office of the Governor

Responsibilities :

Provide recommendations to the Governor and the Legislature regarding the health status of Nevada's minorities; increasing access to health care; increasing minority participation in the health professions' industry. The OMH will examine the impact of demographic factors, health behavior, financing of health care and other factors on minority health status, develop monitoring, tracking, and reporting mechanisms for programs and services with minority health goals and objectives; contact local health departments, community-based organizations, and others to learn about their services to minorities,

and their ideas for improving minority health; promoting communication among state agencies that provide services to minority populations; building coalitions with minority community leaders; encouraging recruitment and retention of minority health professionals; improving access to care for minority populations in underserved rural and urban areas; reducing communication barriers for non-English speaking residents; serve as a liaison to other states, the federal government, and national organizations, and coordinate the development and dissemination of culturally appropriate sensitive education material, public awareness messages, and health promotion programs for minorities.



C, Item 4

Great Basin Primary Care Association June 2000

The Health Care Fund for Uninsured Nevadans:

The Health Care Fund for Uninsured Nevadans (HCFUN) is designed to address the increased financial burden being managed by Nevada's Safety Net Providers, who provide health care services on a sliding fee basis to Nevada's growing underserved/uninsured population, regardless of their

ability to pay. The "fund" will be managed through the State of Nevada, Department of Human Resources, Primary Care Development Center (PCDC). The PCDC will receive \$100,000.00 per year to track expenditures, evaluate the project and report their findings on an annual basis.

The Nevada State Legislature will:

Allocate three million dollars annually for two consecutive years, for the HCFUN as a demonstration project, which can be accessed by Nevada's *Safety Net Providers*, for the purposes of program start-up and expansion of existing programs directed toward the delivery of health care services to Nevada's uninsured population. Two million dollars of the fund could be accessed for capital improvements, equipment purchases, and matching grant funds to support the development of new safety net provider sites. The remaining million dollars would be available to reimburse Nevada's *Safety-Net Providers*, health care providers who provide health care services to uninsured/underinsured patients, for uncollected monies tied to services provided on a sliding fee scale and not collected. A maximum of 50% of billed charges, per encounter, may be reimbursed through this fund.

Benefits of the HCFUND will include:

- . Increased programs/services to uninsured/underserved Nevadans
- . Purchase equipment for new/expanded dental clinics;
- . Create or expand pharmacy services to the uninsured/underinsured population through salary and support;
- . Remodel/renovate new or existing *Safety-Net Provider* sites for increased patient volume/services;
- . Purchase equipment for new/renovated sites;
- . Support new providers for a one-year period;
- . Recruitment and retention of existing providers;
- . Continued provider/staff education;
- . Business Office technology/staffing and equipment;
- . Provider technology;
- . Matching dollars for grants to build new community sites (example; Elko, Lyon, Churchill, and Mineral counties who currently do not have this type of service for their uninsured population);
- . Increased community education/intervention programs; and
- . Eligibility Workers/Benefits Coordinators for *Safety -Net Provider* sites

Any Safety-Net Provider, who provides health related services to the uninsured/underinsured could apply to the "fund" for reimbursement of 50% of the unpaid portion of the charges.

C, Item 5

Commission on **Health** Care Licensing Parity:

Access to health care providers by underserved populations remains a serious problem, particularly in rural Nevada. We believe that the licensure boards for health professions do an admirable job in maintaining the integrity of Nevada's health care system by constantly requiring the highest quality in all providers. However, there appears to be a lack of consistency among the boards in terms of what criteria might be applied that takes underserved populations into consideration during licensure determinations. For that reason we are proposing a commission with will review and make recommendations that might ensure such consistency and apply "access" criteria to board considerations. The Commission would be housed in the Office of the Governor.

Membership:

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## Glossary

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4. SAAOI
5. IP
6. OP
7. NF
8. OOP
9. DED
10. CLYR

**Non-Applicable**

**Generic Drug**

**Brand Name Drug**

**Same As Any Other Illness Inpatient**

**Outpatient**

**Non-Fom1ulary Drug Out-Or-Pocket**

**Deductible**

**Calendar Year**