

Committee Action:
Do Pass _____
Amend & Do Pass _____
Other _____

Assembly Committee on Commerce and Labor

This measure may be considered for action during today's work session.

SENATE BILL 330 (R1)

Revises provisions related to health care. (BDR 57-161)

Sponsored By: Senator Lange
Date Heard: May 5, 2023
Fiscal Notes: Effect on Local Government: No.
Effect on the State: Yes.

Senate Bill 330 requires certain private health insurance policies covering mammograms to provide coverage for breast cancer screening and diagnostic imaging tests for eligible persons without requiring any deductible, copayment, coinsurance, or any other form of cost-sharing. The bill maintains existing requirements concerning coverage for mammograms for the Public Employees' Benefits Program and plans of self-insurance for employees of local government. A health insurance policy issued or renewed on or after January 1, 2024, must include the required coverage imposed by this measure, and any provisions of the policy that conflict are void.

Amendments: Paige Barnes, Public Affairs Manager, The Ferrato Company, proposes the following amendments (attached):

1. Amend the bill to include language exempting health savings accounts from the requirements of the bill if complying with such requirements places the health savings account out of compliance with the applicable requirements of the *Internal Revenue Code*.
2. Amend subsection 5 of Section 5 of the bill to provide that the requirements set forth in Section 6 of the bill, generally applicable to a health care plan of a health maintenance organization, do not apply to a health maintenance organization that provides health care services to a local government.

SB330 Proposed Amendments

[SB330](#) – Revises provisions related to health care. (BDR 57-161)

Sponsor: Roberta Lange

1. Proposed amendment from American Bankers Association: Exclude health savings accounts from the requirements of the bill. Placed in applicable sections throughout the bill. Example language from passed Georgia legislation regarding breast cancer screenings.

If under federal law, the application of section XX would result in Health Savings Account ineligibility under Section 223 of the Internal Revenue Code, such cost-sharing requirement shall apply only for Health Savings Account qualified High Deductible Health Plans with respect to the deductible of such plan after the enrollee has satisfied the minimum deductible under Section 223 of the Internal Revenue Code, except with respect to items or services that are preventive care pursuant to Section 223(c)(2)(C) of the Internal Revenue Code, in which case the requirements of section XX shall apply regardless of whether the minimum deductible under Section 223 of the Internal Revenue Code has been satisfied.

Explanation: HSAs are regulated by the IRS. The amendment excludes health savings accounts (HSA) from the requirement of the bill if places them out of compliance with International Revenue Code (IRS regulation).

2. Proposed amendment from Washoe County: To exclude HMO plans offered by local governments in the exclusion established in Section 5.5 for HMO plan(s) of the Public Employees' Benefits Program (PEBP).

6. The provisions of NRS 695C.1735 do not apply to a health maintenance organization that provides health care services to members of any county, school district, municipal corporation, political subdivision, public corporation, other local government agency of the State of Nevada, or the Public Employees' Benefits Program. This subsection does not exempt a health maintenance organization from any provision of this chapter for services provided pursuant to any other contract.

Explanation: The amendment excludes public employee plans that are HMOs. Local government public employee plans are intended to be excluded from the bill, via [amendment 504](#). This request is a clean-up change to address an oversight in drafting.