PROPOSED REGULATION OF THE

COMMISSIONER OF INSURANCE

LCB File No. R025-08

March 3, 2008

EXPLANATION - Matter in *italics* is new; matter in brackets [omitted material] is material to be omitted.

AUTHORITY: §1, NRS 679B.130, 695C.130 and 695C.275.

A REGULATION relating to health maintenance organizations; revising certain requirements relating to the geographic area of service; and providing other matters properly relating thereto.

Section 1. NAC 695C.160 is hereby amended to read as follows:

An organization shall clearly define the geographic area it intends to serve \(\begin{align*} \, \\ \\ \end{align*} \) which:

- 1. In a county having a population of [30,000] 100,000 or more, must have a radius of not more than 25 miles between the subscriber or individual enrollee and a primary physician and the hospital used by the organization. *This subsection does not apply to services rendered pursuant to the Medicaid Program*.
- 2. In any other county, must be defined by the organization under a plan for the provision of health care services if the organization receives the written approval of the Division for such a geographic area by:
- (a) Demonstrating the availability and accessibility of services to its enrollees, including reasonable access to primary physicians, a hospital and to medically necessary services or services in an emergency; and

(b) Submitting a statement concerning the standards within that community regarding the
availability and accessibility of other health care services and demonstrating that the organization
will meet the community's standards for such services.