

**PROPOSED REGULATION OF THE
DIVISION OF HEALTH CARE FINANCING AND POLICY OF
THE DEPARTMENT OF HEALTH AND HUMAN SERVICES**

LCB File No. R099-12

October 3, 2012

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

AUTHORITY: §1, NRS 439A.220 and 439A.230; §2, NRS 439A.270 and 439A.290.

A REGULATION relating to health care; revising provisions governing programs to increase public awareness of health care information concerning the hospitals and surgical centers for ambulatory patients in this State; and providing other matters properly relating thereto.

Section 1. NAC 439A.830 is hereby amended to read as follows:

439A.830 1. For purposes of paragraph (d) of subsection 2 of NRS 439A.220, the Department will:

- (a) Determine and make publicly available a list of the [~~50 most frequent~~] diagnosis-related groups for inpatients of hospitals that will be included in the program to increase public awareness of health care information concerning hospitals;
- (b) Determine and make publicly available a list of the 50 medical treatments for outpatients of hospitals that will be included in the program to increase public awareness of health care information concerning hospitals; and
- (c) Review each list once every 2 years and update the list as the Department determines necessary.

2. When selecting and updating the list of the ~~50 most frequent~~ diagnosis-related groups pursuant to paragraph (a) of subsection 1, the Department will use the information reported on the universal billing forms submitted pursuant to NAC 449.963.

3. When selecting and updating the list of the 50 medical treatments for outpatients of hospitals pursuant to paragraph (b) of subsection 1, the Department will consider, without limitation:

- (a) Recommendations of the State Board of Health;
- (b) Input received from the general public; and
- (c) The medical treatments for outpatients of hospitals that were most frequently performed by the hospitals in this State during the immediately preceding 2 years, as reported on the universal billing forms submitted pursuant to NAC 449.963.

4. As used in this section, “diagnosis-related group” has the meaning ascribed to it in NRS 439A.220.

Sec. 2. NAC 439A.835 is hereby amended to read as follows:

439A.835 The Department will:

1. Update the information contained on the Internet website established and maintained pursuant to NRS 439A.270 at least quarterly.
2. At least once every 2 years, review the information contained on the Internet website established and maintained pursuant to NRS 439A.270 to determine whether the information on the Internet website should be expanded, modified or otherwise altered. In making such determination, the Department will consider, without limitation, whether new measures of quality have been endorsed by the Agency for Healthcare Research and Quality, the National Quality Forum, *the* Centers for Medicare and Medicaid Services of the United States Department

of Health and Human Services, a quality improvement organization of the Centers for Medicare and Medicaid Services or The Joint Commission.

3. Before including any information on the Internet website established and maintained pursuant to NRS 439A.270, use nationally accepted standards to audit the health information to ensure the completeness and accuracy of the information.

4. Provide on the Internet website established and maintained pursuant to NRS 439A.270 a link to the Internet website of the Health Division of the Department which contains information on sentinel events reported pursuant to NRS 439.800 to 439.890, inclusive.

5. Provide on the Internet website established and maintained pursuant to NRS 439A.270 a report of potentially preventable readmissions of patients who received acute care hospital services from a hospital other than a critical access hospital, using the information reported on the universal billing forms submitted pursuant to NAC 449.963. The Department will annually update the report provided pursuant to this subsection.

6. To the extent that money is available for that purpose, provide on the Internet website established and maintained pursuant to NRS 439A.270 the name of each physician who performed a surgical procedure in a hospital or surgical center for ambulatory patients in this State and the total number of surgical procedures performed by the physician, reported by principal diagnosis and, if the information is available, by diagnosis-related group.

7. *As used in this section:*

(a) "Acute care hospital services" means services ordinarily furnished in a hospital for the care and treatment of an inpatient under the direction of a physician or dentist which are furnished in an institution that:

(1) Is maintained primarily for the care and treatment of patients with disorders other than mental illness;

(2) Is licensed as a hospital by the Health Division of the Department;

(3) Meets the requirements for participation as a provider for Medicare; and

(4) Has in effect a utilization review plan for any patient who is a recipient of Medicaid which complies with 42 C.F.R. § 482.30.

(b) “Critical access hospital” means a hospital which has been certified as a critical access hospital by the Secretary of Health and Human Services pursuant to 42 U.S.C. § 1395i-4(e).

(c) “Diagnosis-related group” has the meaning ascribed to it in NRS 439A.220.