

Amendment No. 513

Senate Amendment to Senate Bill No. 348	(BDR 40-51)
Proposed by: Senator Donate	
Amends: Summary: No Title: Yes Preamble: No Joint Sponsorship: No Digest: Yes	

ASSEMBLY ACTION			Initial and Date	SENATE ACTION			Initial and Date		
Adopted	<input type="checkbox"/>	Lost	<input type="checkbox"/>	_____	Adopted	<input type="checkbox"/>	Lost	<input type="checkbox"/>	_____
Concurred In	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____	Concurred In	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____
Receded	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____	Receded	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____

EXPLANATION: Matter in (1) *blue bold italics* is new language in the original bill; (2) variations of green bold underlining is language proposed to be added in this amendment; (3) ~~red strikethrough~~ is deleted language in the original bill; (4) ~~purple double strikethrough~~ is language proposed to be deleted in this amendment; (5) orange double underlining is deleted language in the original bill proposed to be retained in this amendment.



SENATE BILL NO. 348—SENATORS DONATE AND OHRENSCHALL

MARCH 21, 2023

JOINT SPONSORS: ASSEMBLYMEN GONZÁLEZ; CARTER, DURAN, MOSCA, PETERS AND WATTS

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions relating to health facilities. (BDR 40-51)

FISCAL NOTE: Effect on Local Government: No.
Effect on the State: Yes.

~

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

AN ACT relating to health care; requiring written approval to close certain hospitals or convert ~~[a hospital]~~ such a hospital into a different type of health facility; requiring ~~[written approval to establish an independent center for emergency medical care in a certain location; requiring an independent center for emergency medical care to be licensed separately from certain other facilities;]~~ certain facilities that provide emergency medical services to provide certain notice to patients; establishing certain civil penalties; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

1 Existing law requires a person to obtain the written approval of the: (1) Director of the
2 Department of Health and Human Services before making certain capital expenditures for
3 construction of a new health facility under certain circumstances; or (2) the Chief Medical
4 Officer before operating or undertaking any expenditure for the operation of a new medical
5 helicopter within 15 miles from the base of an existing medical helicopter. (NRS 439A.100,
6 439A.104) **Section 2** of this bill similarly requires a person to obtain the written approval of
7 the Director before closing a hospital in a county whose population is 100,000 or more
8 (currently Clark and Washoe Counties) or converting such a hospital into a different type
9 of health facility. ~~[Section 3 of this bill additionally requires a person to obtain the written~~
10 ~~approval of the Director before establishing an independent center for emergency medical care~~
11 ~~located within 15 miles of another independent center for emergency medical care or a~~
12 ~~hospital.]~~ **Sections 2** ~~[3]~~ **and 7-9** of this bill provide that such approval is a condition to: (1)
13 the issuance or renewal of a license for certain health facilities converted from a hospital; ~~for~~
14 ~~a newly established independent center for emergency medical care;]~~ and (2) certain
15 amendments to such a license. **Sections 5 and 10** of this bill authorize the Department and the
16 Division of Public and Behavioral Health of the Department to impose certain civil penalties
17 and take certain other disciplinary action against a person who ~~[(1)]~~ closes a hospital in a
18 county whose population is 100,000 or more or converts a hospital in such a county to a
19 different type of health facility without written approval in violation of **section 2**. ~~[or (2)~~
20 ~~establishes an independent center for emergency medical care within 15 miles of another~~

~~independent center for emergency medical care or a hospital without written approval in violation of section 3.]~~

Existing law requires: (1) a hospital to notify the Department of any merger, acquisition or similar transaction involving the hospital; and (2) a physician group practice or a person who owns all or substantially all of a physician group practice to notify the Department of certain similar transactions under certain circumstances. (NRS 439A.126) **Section 4** of this bill authorizes the Department to impose an administrative penalty against a hospital, physician group practice or person who owns all or substantially all of a physician group practice that fails to provide timely notice of the information required by existing law.

Existing law ~~requires the operator of a medical facility, including an independent center for emergency medical care, or a facility for the dependent to obtain a license from the Division. (NRS 449.030) Section 6 of this bill requires an independent center for emergency medical care to be licensed separately from any other licensed facility.]~~ **provides every patient of a medical facility, including an independent center for emergency medical care or hospital, with the right to receive certain information about the condition and care of the patient and the cost of such care. (NRS 449A.106) Section 10.5 of this bill requires an independent center for emergency medical care to post conspicuous notice that the independent center for emergency care is an emergency medical facility and will charge patients for an emergency room visit. If an off-campus location of a hospital provides emergency medical services, section 10.5 requires the off-campus location to provide each patient with: (1) certain notice concerning the rights of the patient upon registration; and (2) a more detailed notice concerning billing and payment after the patient is found not to have an emergency medical condition or after the emergency medical condition of the patient has been stabilized, as applicable.**

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 439A of NRS is hereby amended by adding thereto the provisions set forth as sections 2 and 3 of this act.

Sec. 2. 1. *Except as otherwise provided in this section, no person may close a hospital in a county whose population is 100,000 or more or convert a hospital in such a county into a different type of health facility without first applying for and obtaining the written approval of the Director or the designee of the Director. The Division of Public and Behavioral Health of the Department shall not issue a new license or alter an existing license for conversion to a different type of health facility unless the Director or the designee of the Director has issued such an approval.*

2. The Director may adopt regulations which prescribe the process to apply for written approval pursuant to this section.

3. An applicant must provide any information requested by the Director or the designee of the Director for consideration of an application, which must include, without limitation, information related to:

(a) The location of the hospital;

(b) The ownership structure of the hospital;

(c) Whether the closure or conversion is likely to benefit any other health facility in the same geographic area as the hospital in which any person with an ownership interest in the hospital also has an ownership interest;

(d) An explanation of the need for the closure or conversion;

(e) Data regarding the population served by the hospital in the 24 months immediately preceding the application; and

(f) The manner in which and the locations where the population served by the hospital will be able to obtain the health services that were provided by the hospital during the 24 months following the closure or conversion of the hospital.

1 4. The Director or the designee of the Director shall not approve an
2 application submitted pursuant to subsection 1 without considering the
3 information required to be submitted pursuant to subsection 3.

4 5. The decision of the Director or the designee of the Director pursuant to
5 this section is a final decision for the purposes of judicial review.

6 6. The provisions of this section do not apply to any person who ceases to
7 operate hospitals in this State.

8 Sec. 3. ~~1. No person may establish an independent center for emergency
9 medical care located within 15 miles of another independent center for
10 emergency medical care or within 15 miles of a hospital without first applying for
11 and obtaining the written approval of the Director or the designee of the Director.
12 The Division of Public and Behavioral Health of the Department shall not issue a
13 new license or alter an existing license for such an independent center for
14 emergency medical care unless the Director or the designee of the Director has
15 issued such an approval.~~

16 ~~2. An applicant must provide any information requested by the Director or
17 the designee of the Director for consideration of an application, including
18 without limitation, information related to:~~

19 ~~(a) The financial stability and ownership structure of the proposed
20 independent center for emergency medical care and any other health facility
21 relevant to the application; and~~

22 ~~(b) The potential effect of the proposed independent center for emergency
23 medical care on the costs of health services.~~

24 ~~3. The Director or the designee of the Director may approve an application
25 submitted pursuant to subsection 1 only if the applicant demonstrates that:~~

26 ~~(a) Based on the needs of the specific population to be served by the proposed
27 independent center for emergency medical care and on the projected number of
28 persons who need or will need the services offered by the proposed independent
29 center for emergency medical care, there is a demonstrated need for the proposed
30 independent center for emergency medical care;~~

31 ~~(b) The existing independent centers for emergency medical care, existing
32 urgent care facilities and existing hospitals in the geographic area to be served by
33 the proposed independent center for emergency medical care are not willing to
34 meet or are not capable of meeting the projected needs of the population to be
35 served by the proposed independent center for emergency medical care;~~

36 ~~(c) The applicant has the financial stability to provide emergency medical
37 services to the population to be served by the proposed independent center for
38 emergency medical care for a significant period of time;~~

39 ~~(d) The proposed independent center for emergency medical care is likely to
40 result in significantly reduced health care costs for the population to be served by
41 the proposed independent center for emergency medical care and payors who
42 cover that population;~~

43 ~~(e) The proposed independent center for emergency medical care is unlikely
44 to have an adverse effect on the quality of care provided to the population served
45 by the proposed independent center for emergency medical care; and~~

46 ~~(f) The approval of the application will not adversely affect an existing
47 provider of emergency medical services.~~

48 ~~4. In determining whether to approve an application submitted pursuant to
49 subsection 1, the Director or the designee of the Director shall:~~

50 ~~(a) Contact existing providers of emergency medical services and payors who
51 cover the population to be served by the proposed independent center for
52 emergency medical care;~~

~~1 (b) Ensure that such providers and payors have the opportunity to participate
2 in any public hearing concerning the application; and~~

~~3 (c) Otherwise seek the input of such providers and payors.~~

~~4 5. The Department may by regulation require additional approval for a
5 proposed change to a project which has previously been approved if the proposal
6 would result in a change in the location of the project.~~

~~7 6. The decision of the Director or the designee of the Director pursuant to
8 this section is a final decision for the purposes of judicial review.~~

~~9 7. As used in this section, "independent center for emergency medical care"
10 has the meaning ascribed to it in NRS 449.013.7 (Deleted by amendment.)~~

11 **Sec. 4.** NRS 439A.126 is hereby amended to read as follows:

12 439A.126 1. A hospital shall notify the Department of any merger,
13 acquisition or joint venture with any entity, including, without limitation, a
14 physician group practice, to which the hospital is a party or any contract for the
15 management of the hospital not later than 60 days after the finalization of the
16 transaction or execution of the contract for management, as applicable.

17 2. A physician group practice or a person who owns all or substantially all of
18 a physician group practice shall notify the Department of a transaction described in
19 subsection 3 to which the physician group practice or person, as applicable, is a
20 party or any contract for the management of the physician group practice not later
21 than 60 days after the finalization of the transaction or execution of the contract for
22 management, as applicable, if:

23 (a) The physician group practices that are parties to the transaction or contract
24 for management or that are owned by those parties represent at least 20 percent of
25 the physicians who practice any specialty in a primary service area; and

26 (b) The physician group practice represents the largest number of physicians of
27 any physician group practice that is a party to or owned by a party to the transaction
28 or contract for management.

29 3. Notice must be provided pursuant to subsection 2 for any:

30 (a) Merger of, consolidation of or other affiliation between physician group
31 practices, persons who own physician group practices or any combination thereof;

32 (b) The acquisition of all or substantially all of the properties and assets of a
33 physician group practice;

34 (c) The acquisition of all or substantially all of the capital stock, membership
35 interests or other equity interests of a physician group practice;

36 (d) The employment of all or substantially all of the physicians in a physician
37 group practice; or

38 (e) The acquisition of an insolvent physician group practice.

39 4. Notice pursuant to subsection 1 or 2 must be provided in the form
40 prescribed by the Department and must include, without limitation:

41 (a) The name of each party to the transaction or contract for management, as
42 applicable;

43 (b) A description of the nature of the proposed relationship of the parties to the
44 transaction or contract for management, as applicable;

45 (c) The names and any specialties of each physician who is a party or
46 employed by or affiliated with a physician group practice that is a party to or is
47 owned by a party to the transaction or contract for management, as applicable;

48 (d) The name and address of each business entity that will provide health
49 services after the transaction or contract for management, as applicable;

50 (e) A description of the health services to be provided at each location of a
51 business entity described in paragraph (d); and

52 (f) The primary service area to be served by each location of a business entity
53 described in paragraph (d).

1 5. The Department shall:

2 (a) Post the information contained in the notices provided pursuant to
3 subsections 1 and 2 on an Internet website maintained by the Department; and

4 (b) Annually prepare a report regarding market transactions and concentration
5 in health care based on the information in the notices and post the report on an
6 Internet website maintained by the Department.

7 6. *If a hospital, a physician group practice or a person who owns all or*
8 *substantially all of a physician group practice fails to provide timely notice to the*
9 *Department pursuant to subsection 1 or 2, as applicable, and the failure was not*
10 *caused by excusable neglect, technical problems or other extenuating*
11 *circumstances, the Department may impose against the hospital, physician group*
12 *practice or person who owns all or substantially all of a physician group practice*
13 *an administrative penalty of not more than \$5,000 for each day of such failure.*

14 7. *Any money collected as administrative penalties pursuant to this section*
15 *must be accounted for separately and used by the Department to carry out the*
16 *provisions of NRS 439A.111 to 439A.126, inclusive, or for any other purpose*
17 *authorized by the Legislature.*

18 8. As used in this section:

19 (a) "Physician group practice" means any business entity organized for the
20 purpose of the practice of medicine or osteopathic medicine by more than one
21 physician.

22 (b) "Primary service area" means an area comprising the smallest number of
23 zip codes from which the hospital or physician group practice draws at least 75
24 percent of patients.

25 **Sec. 5.** NRS 439A.310 is hereby amended to read as follows:

26 439A.310 1. Except as otherwise provided in subsection 2, any person who
27 violates any of the provisions of this chapter is liable to the State for a civil penalty
28 of:

29 (a) Where the provision violated governs the licensing of a project which is
30 required to be approved pursuant to NRS 439A.100 ~~or section 2~~ *or section 2* ~~of this~~
31 *act*, not more than 10 percent of the proposed expenditure for the project.

32 (b) Where any other provision is violated, not more than \$20,000 for each
33 violation.

34 2. The Department shall not impose a penalty under this section if it applies
35 for injunctive relief to prevent the same violation.

36 **Sec. 6.** ~~NRS 449.030 is hereby amended to read as follows:~~

37 ~~449.030 1. Except as otherwise provided in NRS 449.03013 and 449.03017,~~
38 ~~no person, state or local government or agency thereof may operate or maintain in~~
39 ~~this State any medical facility or facility for the dependent without first obtaining a~~
40 ~~license therefor as provided in NRS 449.029 to 449.2428, inclusive.~~

41 ~~2. Each independent center for emergency medical care must be licensed~~
42 ~~separately from any other independent center for emergency medical care, any~~
43 ~~other medical facility and any facility for the dependent.] (Deleted by~~
44 ~~amendment.)~~

45 **Sec. 7.** NRS 449.080 is hereby amended to read as follows:

46 449.080 1. If, after investigation, the Division finds that the:

47 (a) Applicant is in full compliance with the provisions of NRS 449.029 to
48 449.2428, inclusive;

49 (b) Applicant is in substantial compliance with the standards and regulations
50 adopted by the Board;

51 (c) Applicant, if he or she has undertaken a project for which approval is
52 required pursuant to NRS 439A.100 ~~or section 2~~ *or section 2* ~~of this~~
53 *act*, has obtained the approval of the Director of the Department of Health and Human Services; and

1 (d) Facility conforms to the applicable zoning regulations,
 2 ➔ the Division shall issue the license to the applicant.

3 2. Any investigation of an applicant for a license to provide community-based
 4 living arrangement services conducted pursuant to subsection 1 must include,
 5 without limitation, an inspection of any building operated by the applicant in which
 6 the applicant proposes to provide community-based living arrangement services.

7 3. A license applies only to the person to whom it is issued, is valid only for
 8 the premises described in the license and is not transferable.

9 **Sec. 8.** NRS 449.087 is hereby amended to read as follows:

10 449.087 1. A licensee must obtain the approval of the Division to amend his
 11 or her license to operate a facility before the addition of any of the following
 12 services:

- 13 (a) The intensive care of newborn babies.
- 14 (b) The treatment of burns.
- 15 (c) The transplant of organs.
- 16 (d) The performance of open-heart surgery.
- 17 (e) A center for the treatment of trauma.

18 2. The Division shall approve an application to amend a license to allow a
 19 facility to provide any of the services described in subsection 1 if:

- 20 (a) The applicant satisfies the requirements contained in NRS 449.080;
- 21 (b) The Division determines on the basis of the standards adopted by the Board
 22 pursuant to subsection 4 that there are an adequate number of cases in the
 23 community to be served to support amending the license to add the service; and
- 24 (c) The Division determines that the applicant satisfies any other standards
 25 adopted by the Board pursuant to subsection 4.

26 3. The Division may revoke its approval if the licensee fails to maintain
 27 substantial compliance with the standards adopted by the Board pursuant to
 28 subsection 4 for the provision of such services, or with any conditions included in
 29 the written approval of the Director issued pursuant to the provisions of NRS
 30 439A.100 ~~§ or section 2~~ *or section 2* of this act.

31 4. The Board shall:

- 32 (a) Adopt standards which have been adopted by appropriate national
 33 organizations to be used by the Division in determining whether there are an
 34 adequate number of cases in the community to be served to support amending the
 35 license of a licensee to add a service pursuant to this section; and
- 36 (b) Adopt such other standards as it deems necessary for determining whether
 37 to approve the provision of services pursuant to this section.

38 **Sec. 9.** NRS 449.089 is hereby amended to read as follows:

39 449.089 1. Each license issued pursuant to NRS 449.029 to 449.2428,
 40 inclusive, expires on December 31 following its issuance and is renewable for 1
 41 year upon reapplication and payment of all fees required pursuant to subsection 4
 42 and NRS 449.050, as applicable, unless the Division finds, after an investigation,
 43 that the facility has not:

- 44 (a) Satisfactorily complied with the provisions of NRS 449.029 to 449.2428,
 45 inclusive, or the standards and regulations adopted by the Board;
- 46 (b) Obtained the approval of the Director of the Department of Health and
 47 Human Services before undertaking a project, if such approval is required by NRS
 48 439A.100 ~~§ or section 2~~ *or section 2* of this act; or
- 49 (c) Conformed to all applicable local zoning regulations.

50 2. Each reapplication for an agency to provide personal care services in the
 51 home, an agency to provide nursing in the home, a community health worker pool,
 52 a facility for intermediate care, a facility for skilled nursing, a provider of
 53 community-based living arrangement services, a hospital described in 42 U.S.C. §

1 1395ww(d)(1)(B)(iv), a psychiatric hospital that provides inpatient services to
2 children, a psychiatric residential treatment facility, a residential facility for groups,
3 a program of hospice care, a home for individual residential care, a facility for the
4 care of adults during the day, a facility for hospice care, a nursing pool, the distinct
5 part of a hospital which meets the requirements of a skilled nursing facility or
6 nursing facility pursuant to 42 C.F.R. § 483.5, a hospital that provides swing-bed
7 services as described in 42 C.F.R. § 482.58 or, if residential services are provided
8 to children, a medical facility or facility for the treatment of alcohol or other
9 substance use disorders must include, without limitation, a statement that the
10 facility, hospital, agency, program, pool or home is in compliance with the
11 provisions of NRS 449.115 to 449.125, inclusive, and 449.174.

12 3. Each reapplication for an agency to provide personal care services in the
13 home, a community health worker pool, a facility for intermediate care, a facility
14 for skilled nursing, a facility for the care of adults during the day, a residential
15 facility for groups or a home for individual residential care must include, without
16 limitation, a statement that the holder of the license to operate, and the
17 administrator or other person in charge and employees of, the facility, agency, pool
18 or home are in compliance with the provisions of NRS 449.093.

19 4. Each reapplication for a surgical center for ambulatory patients, facility for
20 the treatment of irreversible renal disease, facility for hospice care, program of
21 hospice care, hospital, facility for intermediate care, facility for skilled nursing,
22 agency to provide personal care services in the home or rural clinic must be
23 accompanied by the fee prescribed by the State Board of Health pursuant to NRS
24 457.240, in addition to the fees imposed pursuant to NRS 449.050.

25 **Sec. 10.** NRS 449.160 is hereby amended to read as follows:

26 449.160 1. The Division may deny an application for a license or may
27 suspend or revoke any license issued under the provisions of NRS 449.029 to
28 449.2428, inclusive, upon any of the following grounds:

29 (a) Violation by the applicant or the licensee of any of the provisions of NRS
30 439B.410 or 449.029 to 449.245, inclusive, or of any other law of this State or of
31 the standards, rules and regulations adopted thereunder.

32 (b) Aiding, abetting or permitting the commission of any illegal act.

33 (c) Conduct inimical to the public health, morals, welfare and safety of the
34 people of the State of Nevada in the maintenance and operation of the premises for
35 which a license is issued.

36 (d) Conduct or practice detrimental to the health or safety of the occupants or
37 employees of the facility.

38 (e) Failure of the applicant to obtain written approval from the Director of the
39 Department of Health and Human Services as required by NRS 439A.100 *or*
40 *section 2 ~~for 31~~ of this act* or as provided in any regulation adopted pursuant to
41 NRS 449.001 to 449.430, inclusive, and 449.435 to 449.531, inclusive, and chapter
42 449A of NRS if such approval is required **H**, *including, without limitation, the*
43 *closure or conversion of any hospital in a county whose population is 100,000 or*
44 *more that is owned by the licensee without approval pursuant to section 2 of this*
45 *act.*

46 (f) Failure to comply with the provisions of NRS 441A.315 and any
47 regulations adopted pursuant thereto or NRS 449.2486.

48 (g) Violation of the provisions of NRS 458.112.

49 2. In addition to the provisions of subsection 1, the Division may revoke a
50 license to operate a facility for the dependent if, with respect to that facility, the
51 licensee that operates the facility, or an agent or employee of the licensee:

52 (a) Is convicted of violating any of the provisions of NRS 202.470;

1 (b) Is ordered to but fails to abate a nuisance pursuant to NRS 244.360,
2 244.3603 or 268.4124; or

3 (c) Is ordered by the appropriate governmental agency to correct a violation of
4 a building, safety or health code or regulation but fails to correct the violation.

5 3. The Division shall maintain a log of any complaints that it receives relating
6 to activities for which the Division may revoke the license to operate a facility for
7 the dependent pursuant to subsection 2. The Division shall provide to a facility for
8 the care of adults during the day:

9 (a) A summary of a complaint against the facility if the investigation of the
10 complaint by the Division either substantiates the complaint or is inconclusive;

11 (b) A report of any investigation conducted with respect to the complaint; and

12 (c) A report of any disciplinary action taken against the facility.

13 ↘ The facility shall make the information available to the public pursuant to NRS
14 449.2486.

15 4. On or before February 1 of each odd-numbered year, the Division shall
16 submit to the Director of the Legislative Counsel Bureau a written report setting
17 forth, for the previous biennium:

18 (a) Any complaints included in the log maintained by the Division pursuant to
19 subsection 3; and

20 (b) Any disciplinary actions taken by the Division pursuant to subsection 2.

21 **Sec. 10.5. Chapter 449A of NRS is hereby amended by adding thereto a**
22 **new section to read as follows:**

23 **1. An independent center for emergency medical care shall post**
24 **conspicuously in each location where patients are admitted and registered a sign,**
25 **in not less than 24 point boldface type, which states in English and Spanish:**

26
27 **NOTICE**

28
29 **This is an emergency medical facility that treats emergency medical**
30 **conditions. You will be charged for a visit to an emergency room and not**
31 **for a visit to an urgent care center.**

32
33 **2. An off-campus location shall provide to each patient of the emergency**
34 **department of the off-campus location and any adult accompanying such a**
35 **patient who is less than 18 years of age immediately upon registration a written**
36 **statement in the following form:**

37
38 **PATIENT INFORMATION**

39
40 **This is an emergency medical facility that treats emergency medical**
41 **conditions.**

42
43 **We will screen and treat you regardless of your ability to pay.**

44
45 **You have the right to ask questions regarding your treatment options and**
46 **costs.**

47
48 **You have the right to receive prompt and reasonable responses to such**
49 **questions and requests.**

50
51 **You have the right to reject treatment.**

However, we encourage you to defer your questions until after we screen you for an emergency medical condition.

This is not a complete statement of patient information or rights. You will receive a more comprehensive statement after the completion of a medical screening examination that does not reveal an emergency medical condition or after your emergency medical condition has been stabilized.

3. After the completion of an appropriate medical screening examination of a patient of the emergency department of the off-campus location that does not reveal an emergency medical condition or after stabilizing the emergency medical condition of such a patient, an off-campus location shall provide the patient and, if the patient, is less than 18 years of age, any adult accompanying the patient, with written notice of:

(a) The policies of the off-campus location concerning the acceptance of patients enrolled in Medicaid and Medicare;

(b) The networks of third parties in which the off-campus location participates;

(c) The possibility that the patient may be billed separately by providers of health care at the off-campus location;

(d) The maximum price for emergency medical services that the off-campus location commonly provides; and

(e) Any additional fees that the off-campus location charges.

4. As used in this section:

(a) "Independent center for emergency medical care" has the meaning ascribed to it in NRS 449.013.

(b) "Network" means a defined set of providers of health care who are under contract with a third party to provide health care services to persons covered by the third party.

(c) "Off-campus location" means a facility:

(1) With operations that are directly or indirectly owned or controlled by, in whole or in part, a hospital or which is affiliated with a hospital, regardless of whether it is operated by the same governing body as the hospital;

(2) That is located more than 250 yards from the main campus of the hospital;

(3) That provides services which are organizationally and functionally integrated with the hospital; and

(4) That is an outpatient facility providing emergency room services.

(d) "Third party" means any insurer, governmental entity or other organization providing health coverage or benefits in accordance with state or federal law.

~~Sec. 11. 1. Notwithstanding the provisions of section 3 of this act, a person who has commenced a project before January 1, 2024, for the establishment of an independent center for emergency medical care is not required to obtain the written approval of the Director of the Department of Health and Human Services to continue that project.~~

~~2. Notwithstanding the amendatory provisions of section 6 of this act, an independent center for emergency medical care which is owned by the same owner as another medical facility or facility for the dependent and operating under the same license as that medical facility or facility for the dependent may continue to operate without a separate license until July 1, 2024. Such an independent center for emergency medical care is not required to obtain the written approval of the~~

1 ~~Director of the Department of Health and Human Services pursuant to section 3 of~~
2 ~~this act to obtain a separate license.~~

3 ~~2. As used in this section:~~

4 ~~(a) "Independent center for emergency medical care" has the meaning ascribed~~
5 ~~to it in NRS 449.012.~~

6 ~~(b) "Medical facility" has the meaning ascribed to it in NRS 449.0151.~~

7 **(Deleted by amendment.)**

8 **Sec. 12.** 1. This section becomes effective upon passage and approval.

9 2. Sections 1 to 11, inclusive, of this act become effective:

10 (a) Upon passage and approval for the purpose of adopting any regulations and
11 performing any other preparatory administrative tasks that are necessary to carry
12 out the provisions of this act; and

13 (b) On January 1, 2024, for all other purposes.