

SENATE BILL NO. 60—COMMITTEE ON  
HEALTH AND HUMAN SERVICES

(ON BEHALF OF THE CITY OF LAS VEGAS)

PREFILED NOVEMBER 17, 2016

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions governing Medicaid payments for ground emergency medical transportation services. (BDR 38-411)

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

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

AN ACT relating to Medicaid; authorizing the Director of the Department of Health and Human Services to include in the State Plan for Medicaid voluntary programs through which certain governmental entities and Indian tribes may obtain supplemental payments for providing ground emergency medical transportation services to recipients of Medicaid; requiring a participating governmental entity or Indian tribe to reimburse the Department for the costs of implementing and administering any such program; and providing other matters properly relating thereto.

**Legislative Counsel's Digest:**

1 Federal law requires the Federal Government to pay to each state for which the  
2 Federal Government has approved a State Plan for Medicaid a certain percentage of  
3 the total amount expended as medical assistance under the State Plan. The states are  
4 responsible for the remaining share of such expenditures. (42 U.S.C. § 1396b(a))  
5 Federal law also allows certain governmental entities and federally recognized  
6 Indian tribes to receive supplemental reimbursements in addition to the federal  
7 payments discussed above for certain health care services, including ground  
8 emergency medical transportation services, pursuant to a State Plan for Medicaid.  
9 (42 U.S.C. §§ 1396a and 1396b; 42 C.F.R. §§ 433.50-433.74)  
10 **Section 10** of this bill authorizes the Director of the Department of Health and  
11 Human Services to include in the State Plan for Medicaid a voluntary program  
12 whereby such a governmental entity or Indian tribe may receive supplemental



13 reimbursements, in addition to the payments the governmental entity or Indian tribe  
14 would otherwise receive from Medicaid, for ground emergency medical  
15 transportation services which are provided to recipients of Medicaid. In order to  
16 receive such reimbursements, the governmental entity or Indian tribe must: (1) hold  
17 a permit to operate an ambulance or vehicle of a fire-fighting agency; (2)  
18 participate in the State Plan for Medicaid; (3) enter into an agreement with the  
19 Department to reimburse the Department for the costs of implementing and  
20 administering the program; (4) pay the nonfederal share of the expenditures arising  
21 from providing such services; (5) certify that the claimed expenditures are eligible  
22 for federal financial participation; (6) submit to the Department any required  
23 evidence of the claimed expenditures; and (7) maintain any records required by the  
24 Department.

25 **Section 11** of this bill authorizes the Director to include in the State Plan a  
26 voluntary program to provide increased "capitation" (per patient) payments to a  
27 governmental entity or Indian tribe for ground emergency medical transportation  
28 services which are rendered pursuant to a contract or other arrangement with a  
29 Medicaid managed care plan. In order to participate in such a program, a  
30 governmental entity, Indian tribe or managed care plan is required to enter into an  
31 agreement with the Department to: (1) comply with any request made by the  
32 Department to provide any information or data necessary to claim federal money or  
33 obtain federal approval; and (2) reimburse the Department for the administrative  
34 costs of the Department for implementing and administering the program. A  
35 program would require the governmental entity or Indian tribe to make  
36 intergovernmental transfers of money to the Department in an amount  
37 corresponding with the amount of money spent rendering ground emergency  
38 medical transportation services. The Department would then use that money and  
39 money from the Federal Government to make increased capitation payments. If a  
40 program to provide increased capitation payments is established, **section 11**  
41 requires the Department to collect from each intergovernmental transfer a fee of 20  
42 percent of the nonfederal share paid to the Department.

43 **Sections 10 and 11** also provide that supplemental reimbursements and  
44 increased capitation payments will be paid only to the extent approved by the  
45 Federal Government.

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

1 **Section 1.** Chapter 422 of NRS is hereby amended by adding  
2 thereto the provisions set forth as sections 2 to 11, inclusive, of this  
3 act.

4 **Sec. 2.** *As used in sections 2 to 11, inclusive, of this act,*  
5 *unless the context otherwise requires, the words and terms defined*  
6 *in sections 3 to 9, inclusive, of this act have the meanings ascribed*  
7 *to them in those sections.*

8 **Sec. 3.** *"Advanced emergency medical technician" has the*  
9 *meaning ascribed to it in NRS 450B.025.*

10 **Sec. 4.** *"Ambulance" has the meaning ascribed to it in*  
11 *NRS 450B.040.*

12 **Sec. 5.** *"Emergency medical technician" has the meaning*  
13 *ascribed to it in NRS 450B.065.*



1     **Sec. 6.** *“Fire-fighting agency” has the meaning ascribed to it*  
2 *in NRS 450B.072.*

3     **Sec. 7.** *“Governmental provider” means a provider of*  
4 *ground emergency medical transportation services that is owned*  
5 *or operated by a state or local governmental entity or federally*  
6 *recognized Indian tribe.*

7     **Sec. 8.** *“Ground emergency medical transportation services”*  
8 *means emergency medical transportation services provided by an*  
9 *ambulance or a vehicle of a fire-fighting agency, including,*  
10 *without limitation, services provided by emergency medical*  
11 *technicians, advanced emergency medical technicians and*  
12 *paramedics in prestabilizing patients and preparing patients for*  
13 *transport.*

14     **Sec. 9.** *“Paramedic” has the meaning ascribed to it in*  
15 *NRS 450B.095.*

16     **Sec. 10.** *1. The Director may include in the State Plan for*  
17 *Medicaid a voluntary program to provide supplemental*  
18 *reimbursements for ground emergency medical transportation*  
19 *services which are provided to recipients of Medicaid. If such a*  
20 *program is included in the State Plan for Medicaid, the program*  
21 *must:*

22     *(a) Provide that a governmental provider receive, in addition to*  
23 *the rate of payment that the governmental entity or Indian tribe*  
24 *would otherwise receive for ground emergency medical*  
25 *transportation services provided to recipients of Medicaid,*  
26 *supplemental reimbursements for such services if the*  
27 *governmental provider meets the requirements of subsection 2;*  
28 *and*

29     *(b) Be implemented without money from the State General*  
30 *Fund.*

31     *2. A governmental provider is not required to participate in a*  
32 *program established pursuant to this section. If a program is*  
33 *established pursuant to this section, a governmental provider that*  
34 *wishes to participate and receive the supplemental reimbursements*  
35 *described in subsection 1 must:*

36     *(a) Hold a permit to operate an ambulance or a permit to*  
37 *operate a vehicle of a fire-fighting agency at the scene of an*  
38 *emergency issued pursuant to NRS 450B.200;*

39     *(b) Participate as a provider in the State Plan for Medicaid;*

40     *(c) Enter into an agreement with the Department to reimburse*  
41 *the Department for the costs of implementing and administering*  
42 *the program;*

43     *(d) Submit to the Department documentation supporting the*  
44 *amount claimed as expenditures for ground emergency medical*  
45 *transportation services provided to recipients of Medicaid and*



1 *certifying that the claimed expenditures are eligible for federal*  
2 *financial participation in accordance with 42 C.F.R. § 433.51;*

3 *(e) Submit to the Department any evidence required by the*  
4 *Department to support the certification required by paragraph (d)*  
5 *and any data required by the Department to determine the*  
6 *appropriate amount to claim as expenditures that qualify for*  
7 *federal financial participation in accordance with the*  
8 *requirements of 42 C.F.R. § 433.51; and*

9 *(f) Prepare and maintain any records required by the*  
10 *Department in an easily accessible manner.*

11 *3. The nonfederal share of the amount claimed as*  
12 *expenditures pursuant to paragraph (d) of subsection 2 must be*  
13 *absorbed by the governmental provider.*

14 *4. If a program is established pursuant to this section, the*  
15 *Department shall:*

16 *(a) Evaluate the information submitted pursuant to subsection*  
17 *2 and submit claims for reimbursement to the Centers for*  
18 *Medicare and Medicaid Services of the United States Department*  
19 *of Health and Human Services for the expenditures that the*  
20 *Department determines qualify for federal financial participation*  
21 *in accordance with the requirements of 42 C.F.R. § 433.51.*

22 *(b) Obtain prior approval from the Centers for Medicare and*  
23 *Medicaid Services of the manner in which supplemental*  
24 *reimbursements will be calculated and distributed pursuant to this*  
25 *section.*

26 *(c) Calculate and distribute supplemental reimbursements in*  
27 *the manner approved by the Centers for Medicare and Medicaid*  
28 *Services.*

29 *(d) Cooperate with the Centers for Medicare and Medicaid*  
30 *Services in carrying out the program established pursuant to this*  
31 *section and comply with all requirements of the Centers for*  
32 *Medicare and Medicaid Services, including, without limitation,*  
33 *those prescribed by 42 C.F.R. § 433.74, and any other applicable*  
34 *federal law.*

35 *(e) Carry out the program established pursuant to this section*  
36 *only to the extent approved by the Centers for Medicare and*  
37 *Medicaid Services.*

38 *(f) Annually submit any necessary materials to the Centers for*  
39 *Medicare and Medicaid Services to ensure that claims for federal*  
40 *financial participation include only expenditures authorized under*  
41 *federal law.*

42 *5. Supplemental reimbursements for ground emergency*  
43 *medical transportation services paid to a governmental provider*  
44 *pursuant to this section:*



1 (a) Must not exceed the amount of federal financial  
2 participation received for claimed expenditures submitted  
3 pursuant to paragraph (d) of subsection 2; and

4 (b) Must not, when combined with all other payments received  
5 for the ground emergency medical transportation services  
6 pursuant to the State Plan for Medicaid, exceed the costs of the  
7 governmental provider for providing the ground emergency  
8 medical transportation services.

9 **Sec. 11.** 1. The Director may, in consultation with  
10 governmental providers and Medicaid managed care plans,  
11 develop and include in the State Plan for Medicaid a voluntary  
12 program to provide increased capitation payments to  
13 governmental providers and Medicaid managed care plans for  
14 ground emergency medical transportation services which are  
15 rendered pursuant to a contract or other arrangement between a  
16 governmental provider and a Medicaid managed care plan. Any  
17 such program must be implemented without money from the State  
18 General Fund.

19 2. If a program is established pursuant to this section, a  
20 governmental provider or Medicaid managed care plan that  
21 wishes to participate in the program must enter into an agreement  
22 with the Department to:

23 (a) Comply with any request by the Department for  
24 information or data necessary to claim federal money or obtain  
25 federal approval in connection with the program; and

26 (b) Reimburse the Department as provided in subsection 7 for  
27 the administrative costs incurred by the Department in  
28 implementing and administering the program.

29 3. A governmental provider is not required to participate in a  
30 program established pursuant to this section. In addition to  
31 complying with the requirements of subsection 2, a governmental  
32 provider that wishes to participate in a program established  
33 pursuant to this section must:

34 (a) Hold a permit to operate an ambulance or a permit to  
35 operate a vehicle of a fire-fighting agency at the scene of an  
36 emergency issued pursuant to NRS 450B.200; and

37 (b) Provide ground emergency medical services to recipients of  
38 Medicaid pursuant to a contract or other arrangement with a  
39 Medicaid managed care plan.

40 4. If a program is established pursuant to this section, a  
41 governmental provider that meets the requirements of subsections  
42 2 and 3 and wishes to receive increased capitation payments must  
43 make an intergovernmental transfer of money to the Department  
44 in an amount corresponding with the amount that the  
45 governmental provider has spent on ground emergency medical



1 *transportation services. To the extent that such intergovernmental*  
2 *transfers of money are made by and accepted from a governmental*  
3 *provider, the Department shall make increased capitation*  
4 *payments to the applicable Medicaid managed care plan. To the*  
5 *extent permissible under federal law, the increased capitation*  
6 *payments must be in amounts actuarially equivalent to or greater*  
7 *than the supplemental payments available under the program*  
8 *established pursuant to section 10 of this act for governmental*  
9 *providers who provide services on a fee-for-service basis.*

10 5. *Except as otherwise provided in subsection 6, all money*  
11 *associated with intergovernmental transfers made and accepted*  
12 *pursuant to subsection 4 must be used to make additional*  
13 *payments to governmental providers under the program*  
14 *established pursuant to this section. A Medicaid managed care*  
15 *plan shall pay all of any increased capitation payments made*  
16 *pursuant to subsection 4 to a governmental provider for ground*  
17 *emergency medical transportation services pursuant to a contract*  
18 *or other arrangement with the Medicaid managed care plan.*

19 6. *The Department may implement the program described in*  
20 *this section only to the extent that the program is approved by the*  
21 *Centers for Medicare and Medicaid Services and federal financial*  
22 *participation is available. To the extent authorized by federal law,*  
23 *the Department may implement the program for ground*  
24 *emergency medical transportation services provided before the*  
25 *effective date of this section.*

26 7. *If a program is established pursuant to this section, the*  
27 *Department shall collect from each intergovernmental transfer of*  
28 *money made under the provisions of this section an administrative*  
29 *fee of 20 percent of the nonfederal share paid to the Department.*  
30 *The payment of such a fee is an allowable cost for Medicaid*  
31 *reimbursement purposes.*

32 8. *If the Director determines that payments made under the*  
33 *provisions of this section do not comply with federal requirements*  
34 *relating to Medicaid, the Director may:*

35 (a) *Return or refuse to accept an intergovernmental transfer;*  
36 *or*

37 (b) *Adjust any payment made under the provisions of this*  
38 *section to comply with federal requirements relating to Medicaid.*

39 9. *As used in this section, "Medicaid managed care plan"*  
40 *means a health maintenance organization that provides health*  
41 *care services through managed care to recipients of Medicaid*  
42 *under the State Plan for Medicaid.*

43 **Sec. 12.** NRS 232.320 is hereby amended to read as follows:  
44 232.320 1. The Director:



1 (a) Shall appoint, with the consent of the Governor,  
2 administrators of the divisions of the Department, who are  
3 respectively designated as follows:

4 (1) The Administrator of the Aging and Disability Services  
5 Division;

6 (2) The Administrator of the Division of Welfare and  
7 Supportive Services;

8 (3) The Administrator of the Division of Child and Family  
9 Services;

10 (4) The Administrator of the Division of Health Care  
11 Financing and Policy; and

12 (5) The Administrator of the Division of Public and  
13 Behavioral Health.

14 (b) Shall administer, through the divisions of the Department,  
15 the provisions of chapters 63, 424, 425, 427A, 432A to 442,  
16 inclusive, 446 to 450, inclusive, 458A and 656A of NRS, NRS  
17 127.220 to 127.310, inclusive, 422.001 to 422.410, inclusive, *and*  
18 *sections 2 to 11, inclusive, of this act*, 422.580, 432.010 to 432.133,  
19 inclusive, 432B.621 to 432B.626, inclusive, 444.002 to 444.430,  
20 inclusive, and 445A.010 to 445A.055, inclusive, and all other  
21 provisions of law relating to the functions of the divisions of the  
22 Department, but is not responsible for the clinical activities of the  
23 Division of Public and Behavioral Health or the professional line  
24 activities of the other divisions.

25 (c) Shall administer any state program for persons with  
26 developmental disabilities established pursuant to the  
27 Developmental Disabilities Assistance and Bill of Rights Act of  
28 2000, 42 U.S.C. §§ 15001 et seq.

29 (d) Shall, after considering advice from agencies of local  
30 governments and nonprofit organizations which provide social  
31 services, adopt a master plan for the provision of human services in  
32 this State. The Director shall revise the plan biennially and deliver a  
33 copy of the plan to the Governor and the Legislature at the  
34 beginning of each regular session. The plan must:

35 (1) Identify and assess the plans and programs of the  
36 Department for the provision of human services, and any  
37 duplication of those services by federal, state and local agencies;

38 (2) Set forth priorities for the provision of those services;

39 (3) Provide for communication and the coordination of those  
40 services among nonprofit organizations, agencies of local  
41 government, the State and the Federal Government;

42 (4) Identify the sources of funding for services provided by  
43 the Department and the allocation of that funding;



1 (5) Set forth sufficient information to assist the Department  
2 in providing those services and in the planning and budgeting for the  
3 future provision of those services; and

4 (6) Contain any other information necessary for the  
5 Department to communicate effectively with the Federal  
6 Government concerning demographic trends, formulas for the  
7 distribution of federal money and any need for the modification of  
8 programs administered by the Department.

9 (e) May, by regulation, require nonprofit organizations and state  
10 and local governmental agencies to provide information regarding  
11 the programs of those organizations and agencies, excluding  
12 detailed information relating to their budgets and payrolls, which the  
13 Director deems necessary for the performance of the duties imposed  
14 upon him or her pursuant to this section.

15 (f) Has such other powers and duties as are provided by law.

16 2. Notwithstanding any other provision of law, the Director, or  
17 the Director's designee, is responsible for appointing and removing  
18 subordinate officers and employees of the Department, other than  
19 the State Public Defender of the Office of State Public Defender  
20 who is appointed pursuant to NRS 180.010.

21 **Sec. 13.** 1. This section becomes effective upon passage and  
22 approval.

23 2. Sections 1 to 12, inclusive, of this act become effective upon  
24 passage and approval for the purpose of performing any tasks  
25 necessary to obtain the approval of the Centers for Medicare and  
26 Medicaid Services for a program established pursuant to section 10  
27 or 11 of this act.

28 3. For all other purposes:

29 (a) Sections 1 to 9, inclusive, and 12 of this act become effective  
30 on the date:

31 (1) That a program to provide supplemental reimbursements  
32 for ground emergency medical transportation services established  
33 pursuant to section 10 of this act is approved by the Centers for  
34 Medicare and Medicaid Services; or

35 (2) On which a program to provide increased capitation  
36 payments to governmental providers for ground emergency medical  
37 transportation services established pursuant to section 11 of this act  
38 is approved by the Centers for Medicare and Medicaid Services,

39 ↪ whichever is earlier;

40 (b) Section 10 of this act becomes effective on the date that a  
41 program to provide supplemental reimbursements for ground  
42 emergency medical transportation services established pursuant to  
43 that section is approved by the Centers for Medicare and Medicaid  
44 Services; and





1 (c) Section 11 of this act becomes effective on the date that a  
2 program to provide increased capitation payments to governmental  
3 providers for ground emergency medical transportation services  
4 established pursuant to that section is approved by the Centers for  
5 Medicare and Medicaid Services.

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