

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

Section 1. Chapter 422 of NRS is hereby amended by adding thereto the provisions set forth as sections 2 to 9, inclusive, of this act.

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

Sec. 3. “Account” means the Account to Improve Emergency Medical Transportation Quality and Access created by section 7 of this act.

Sec. 4. “Emergency ambulance service”:

1. ~~Means~~Has the ~~transportation by same meaning as the term “emergency ambulance services” in 42 C.F.R. § 433.56(a)(18), or air ambulance of a person who is experiencing a medical emergency to a medical facility~~any successor regulation;
2. Includes the rendering of medical care by a paramedic, as defined in NRS 450B.095, emergency medical technician, as defined in NRS 450B.065, or advanced emergency medical technician, as defined in NRS 450B.025, in connection with the transportation of the person; and
3. ~~Does not include~~Includes the transportation ~~provided under non of a person experiencing a medical emergency circumstances~~by an ambulance, as defined in NRS 450B.040.

Sec. 5. “Private emergency medical transport provider” means a person or entity that:

1. Provides or renders emergency ambulance services in this State;
2. Holds a permit to own or operate an ambulance issued pursuant to the provisions of chapter 450B of NRS; and
3. Is not owned or operated by a federal, state or local governmental entity or a federally recognized tribe.

Sec. 6. 1. Except as otherwise provided in subsection 4 and sections 7 and 9 of this act, the Division shall impose by regulation against each private emergency medical transport provider an assessment in an amount equal to a percentage of the net revenue earned by a private emergency medical transport provider from providing emergency ambulance services in this State during a calendar or fiscal year. The Division shall adopt:

- (a) Regulations prescribing the percentage that must be used to calculate the amount of the assessment, the date on which the assessment is due and the manner in which the assessment must be paid; and
 - (b) Any other regulations necessary or convenient to carry out the provisions of this section.
2. The amount of the assessment imposed pursuant to subsection 1:
 - (a) Except as otherwise provided in paragraph (b), must be equal to the maximum

percentage authorized under federal law; and

(b) Except where necessary pursuant to subsection 1 of section 9 of this act, must not exceed 5.5 percent of the net revenue earned by a private emergency medical transport provider from providing emergency ambulance services in this State during a calendar or fiscal year.

3. The revenue from an assessment imposed pursuant to subsection 1 must be deposited into the Account.

4. An assessment imposed pursuant to subsection 1 must comply with the provisions of 42 C.F.R. § 433.68. An assessment must not be imposed pursuant to subsection 1 if federal law or regulations prohibit using the revenue generated by the assessment for the purposes described in section 7 of this act. If new federal law or regulations imposing such a prohibition are enacted or adopted, as applicable:

(a) An assessment must not be collected after the effective date of the new federal law or regulations; and

(b) Any money collected during the calendar or fiscal year, as applicable, in which the new federal law or regulations become effective must be returned to the private emergency medical transport providers from whom it was collected.

5. A private emergency medical transport provider shall submit to the Division any information requested by the Division at such times as are determined by the Division for the purposes of carrying out the provisions of this section. Such information may include, without limitation:

(a) The number of emergency ambulance service trips provided in this State by the private emergency medical transport provider; and

(b) The total net revenue earned by the private emergency medical transport provider for the emergency ambulance services described in paragraph (a).

6. A private emergency medical transport provider shall keep and maintain accurate records as necessary to support the accuracy of information requested by Division pursuant to this section.

7. As used in this section:

(a) “Cash basis” means the system of accounting under which revenues are recorded only when received and expenditures or expenses are recorded only when paid.

(b) “Net revenue” means net patient revenue collected by a private emergency medical transport provider that is attributable to the rendering of emergency ambulance services, determined on a cash basis of accounting.

Sec. 7. 1. The Account to Improve Emergency Medical Transportation Quality and Access is hereby created in the State General Fund. The Division shall administer the Account. The revenue from assessments and penalties imposed on private emergency medical transport providers pursuant to sections 6 and 8, respectively, of this act must be accounted for separately in the Account.

2. The interest and income earned on the money in the Account, after deducting any applicable charges, must be credited to the Account.

3. The money in the Account must only be expended to:

(a) Provide enhanced rates of reimbursement to private emergency medical transport providers that provide emergency ambulance services to recipients of Medicaid pursuant to subsection 4;

(b) Provide funding to allow the Department to:

(1) Modernize processes and infrastructure relating to the collection and maintenance of data that is useful for purposes relating to public health;

- (2) Provide education to the public relating to emergency medical services; and
- (3) Conduct community outreach to improve public health; and
- (c) Carry out the provisions of sections 2 to 9, inclusive, of this act.

4. Except as otherwise provided in section 9 of this act, all monies available in the Account, less than the amount necessary for the purposes described in paragraphs (b) and (c) of subsection 3 of section 7 of this act during the current fiscal quarter, inclusive of federal matching funds, shall be used exclusively to fund the rate increases required by paragraph (a) of subsection 3 pursuant to this subsection. Any enhanced rates of reimbursement established pursuant to paragraph (a) of subsection 3 may be provided through any or all of the following means:

(a) Increases to rates of reimbursement paid to private emergency medical transport providers who receive such reimbursement from the Medicaid on a fee-for-service basis~~delivery system~~.

(b) The establishment of minimum fee schedule to be paid to private emergency medical transport providers who provide services to recipients of Medicaid under the Medicaid managed care program established pursuant to NRS 422.273.

(c) Directed payments to network and non-network private emergency medical transport providers who provide services to recipients of Medicaid under the Medicaid managed care program established pursuant to NRS 422.273.

5. Not more than 10 percent of the total amount of money generated each year by the assessment imposed pursuant to section 6 of this act may be expended for the purposes described in paragraphs (b) and (c) of subsection 3. Money allocated for such expenditures must be used first for the purpose described in paragraph (c) of subsection 3. If money allocated for such expenditures remains after all necessary expenditures are made for that purpose, the Division shall expend the remaining money for the purposes described in paragraph (b) of subsection 3.

6. Any money remaining in the Account at the end of a fiscal year does not revert to the State General Fund, and the balance in the Account must be carried forward to the next fiscal year.

7. Money in the Account must not be expended to replace money that would otherwise be used to provide reimbursement under Medicaid to private emergency medical transport providers.

8. The Director shall seek any necessary federal authority to capture all available financial federal participation to carry out the purposes described in paragraph ~~(b)~~ of subsection 3.

9. If the Legislature authorizes money in the Account to be used for any purpose other than those authorized by subsection 3:

(a) The Division shall cease imposing the assessment provided by section 6 of this act; and

(b) The regulations adopted to impose the assessment pursuant to section 6 of this act are void.

Sec. 8. 1. The Division shall adopt regulations that establish administrative penalties for the failure to timely pay any assessment imposed pursuant to section 6 of this act. Any money collected from administrative penalties imposed pursuant to this subsection must be deposited into the Account.

2. If a private emergency medical transport provider fails to remit to the Division any penalty imposed pursuant to subsection 1 or any assessment imposed pursuant to section 6 of this act within 30 days after the date on which the penalty or assessment is due, as applicable, the Division:

(a) May deduct the amount of the penalty or assessment, as applicable, from any future payment owed to the private emergency medical transport provider under Medicaid; and

(b) Shall notify each health authority of this State that has issued the private emergency

medical transport provider a permit to operate an ambulance or air ambulance, as applicable, that the private emergency medical transport provider has failed to pay a penalty or assessment, as applicable.

3. Before taking any action described in subsection 2, the Division:

(a) Shall notify the private emergency medical transport provider of the action that the Division intends to take, the specific reason for the action and, where applicable, the amount of the penalty or assessment that will be deducted; and

(b) May negotiate a payment plan with the private emergency medical transport provider.

4. As used in this section, “health authority” has the meaning ascribed to it in NRS 450B.077.

Sec. 9. 1. The Division may modify the percentage of the assessment imposed on private emergency medical transport providers pursuant to section 6 of this act, the amount of any enhanced rate of reimbursement described in paragraph (a) of subsection 3 of section 7 of this act or any other requirement or formula established pursuant to sections 2 to 9, inclusive, of this act to the extent necessary to obtain federal financial participation for the enhanced rates of reimbursement described in paragraph (a) of subsection 3 of section 7 of this act. Such modifications must not result in the collection of assessments in an amount greater than is required for the purposes prescribed by subsection 3 of section 7 of this act.

2. The Division shall take the actions described in subsection 3 after determining that:

(a) The amount of funding available for the reimbursement of private emergency medical transport providers has decreased below the level of funding that was available for that purpose during the fiscal year ending on June 30, 2025;

(b) The rate of reimbursement under Medicaid for emergency ambulance services has decreased below the rate of reimbursement established under Medicaid for emergency ambulance services as of June 30, 2022;

(c) Federal financial participation is not available for the payment of enhanced rates of reimbursement described in paragraph (a) of subsection 3 of section 7 of this act; or

(d) The revenue collected from assessments imposed pursuant to section 6 of this act will be insufficient for the purposes described in paragraphs (a) and (c) of subsection 3 of section 7 of this act.

3. If the Division makes a determination described in subsection 2, the Division shall:

(a) Immediately cease collecting the assessment otherwise required to be imposed pursuant to section 6 of this act;

(b) Immediately cease using the money generated through that assessment for the purposes described in subsection 3 of section 7 of this act; and

(c) Return any money collected through the assessment imposed pursuant to section 6 of this act that the Division is prohibited by paragraph (b) from using for the purposes described in subsection 3 of section 7 of this act to the private emergency medical transport provider from whom it was collected.

4. If the Division, after suspending the collection of assessments and the payment of enhanced rates of reimbursement pursuant to subsection 3, determines that the provisions of subsection 2 no longer apply, the Division shall:

(a) Resume collecting assessments pursuant to section 6 of this act;

(b) Resume payment of the enhanced rates of reimbursement described in paragraph (a) of subsection 3 of section 7 of this act; and

(c) Establish, for the period of time during which such assessments and payments

were suspended pursuant to subsection 3, a schedule for the retroactive:

- (1) Collection of assessments pursuant to section 6 of this act; and
- (2) Payment of enhanced rates of reimbursement pursuant to paragraph (a) of subsection 3 of section 7 of this act.

Sec. 10. NRS 232.320 is hereby amended to read as follows:

232.320 1. The Director:

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

- (1) The Administrator of the Aging and Disability Services Division;
- (2) The Administrator of the Division of Welfare and Supportive Services;
- (3) The Administrator of the Division of Child and Family Services;
- (4) The Administrator of the Division of Health Care Financing and Policy; and
- (5) The Administrator of the Division of Public and Behavioral Health.

(b) Shall administer, through the divisions of the Department, the provisions of chapters 63, 424, 425, 427A, 432A to 442, inclusive, 446 to 450, inclusive, 458A and 656A of NRS, NRS 127.220 to 127.310, inclusive, 422.001 to 422.410, inclusive, *and sections 2 to 9, inclusive, of this act*, 422.580, 432.010 to 432.133, inclusive, 432B.6201 to 432B.626, inclusive, 444.002 to 444.430, inclusive, and 445A.010 to 445A.055, inclusive, and all other provisions of law relating to the functions of the divisions of the Department, but is not responsible for the clinical activities of the Division of Public and Behavioral Health or the professional line activities of the other divisions.

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

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

- (1) Identify and assess the plans and programs of the Department for the provision of human services, and any duplication of those services by federal, state and local agencies;
- (2) Set forth priorities for the provision of those services;
- (3) Provide for communication and the coordination of those services among nonprofit organizations, agencies of local government, the State and the Federal Government;
- (4) Identify the sources of funding for services provided by the Department and the allocation of that funding;
- (5) Set forth sufficient information to assist the Department in providing those services and in the planning and budgeting for the future provision of those services; and
- (6) Contain any other information necessary for the Department to communicate effectively with the Federal Government concerning demographic trends, formulas for the distribution of federal money and any need for the modification of programs administered by the Department.

(e) May, by regulation, require nonprofit organizations and state and local governmental

agencies to provide information regarding the programs of those organizations and agencies, excluding detailed information relating to their budgets and payrolls, which the Director deems necessary for the performance of the duties imposed upon him or her pursuant to this section.

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

2. Notwithstanding any other provision of law, the Director, or the Director's designee, is responsible for appointing and removing subordinate officers and employees of the Department.

Sec. 11. NRS 450B.215 is hereby amended to read as follows:

450B.215 1. If the health authority receives notification from the Department of Health and Human Services pursuant to NRS 439.5895 that the holder of a permit to operate an ambulance, air ambulance or vehicle of a fire-fighting agency is not in compliance with the requirements of subsection 4 of NRS 439.589, the health authority may, after notice and the opportunity for a hearing in accordance with the provisions of this chapter, require corrective action or impose an administrative penalty in an amount established by regulation of the board.

2. The health authority shall not suspend or revoke a permit for failure to comply with the requirements of subsection 4 of NRS 439.589.

3. If the health authority receives a notification from the Division of Health Care Financing and Policy of the Department of Health and Human Services pursuant to section 8 of this act that the holder of a permit to operate an ambulance or air ambulance, as applicable, has failed to pay an assessment imposed pursuant to section 6 of this act or an administrative penalty imposed pursuant to section 8 of this act, the health authority may, after notice and the opportunity for a hearing in accordance with the provisions of this chapter:

(a) Require corrective action;

(b) Impose an administrative penalty in an amount established by regulation of the board;
or

(c) Revoke or suspend the permit of the holder.

Sec. 12. The provisions of subsections 3 and 4 of section 9 of this act apply to any period described in subsection 2 of section 9 of this act that occurs on or after July 1, 2025, including, without limitation, a period where federal financial participation is not available for the payment of enhanced rates of reimbursement described in paragraph (a) of subsection 3 of section 7 of this act because the Department of Health and Human Services has not yet obtained approval from the United States Secretary of Health and Human Services to pay such enhanced rates of reimbursement.

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

2. Sections 1 to 12, inclusive, of this act become effective:

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

(b) On July 1, 2025, for all other purposes.