



Nevada Chronic
Care Collaborative

State Advocates
Working Together
to Bridge the Gaps
in Chronic Care

April 23, 2025

Nevada Assembly Committee on Commerce and Labor
Submitted electronically via: AsmCL@asm.state.nv.us

Chair Marzola, Vice-Chair Jauregui, and Members of the Assembly Committee on Commerce and Labor,

In re: Letter of Support for SB 292

The Nevada Chronic Care Collaborative (NCCC) was pleased that SB 292 passed out of the Senate unanimously. NCCC supported the legislation in the Senate and shares continued support in the Assembly. SB 292 provides an answer to an important, unmet health insurance need for Nevadans.

Organs available for transplantation are scarce. Understandably, organ transplant centers want to be certain that a candidate for an organ will be financially capable of maintaining the post-surgery treatment necessary to keep the transplanted organ healthy. For that reason, most transplant centers will not place an End Stage Renal Disease (ESRD) patient on their active kidney 'waiting list' without that patient having secondary insurance coverage.

Nevadans under sixty-five years with disabilities or ESRD qualify for Medicare Part A (Hospitalization) and Part B (Outpatient Care). However, Nevada does not require insurance carriers to offer them Medicare Supplemental -- Medigap -- insurance. Traditional Medicare pays for 80% of costs with the 20% balance borne by the patient. The enrollee can choose to purchase a Medigap policy from private insurance carriers to deal with that patient cost share responsibility. However, if the patient is under sixty-five years on Medicare, they do not have that option in Nevada.

As our transplantation centers continue to evolve and with centers available in surrounding states, it is time to fill the GAP that currently denies Medigap policies to the under sixty-five Medicare community in Nevada. NCCC asks the Committee to send SB 292 to the full Assembly.

A handwritten signature in blue ink, appearing to read 'Tom McCoy'.

Tom McCoy, JD

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