

Final Legislative Update – June 19th

Tying Up Legislative Loose Ends

At the time of the last update, there were three bills the NVPCA was tracking that had been delivered to the Governor but had not been acted upon. Last Friday, the final day on which the Governor could take action, otherwise bills become law if not signed or vetoed, two of those bills were vetoed while the third was signed into law.

Assembly Bill 249, which allows for the 12-month prescribing and dispensing of birth control through Medicaid and private insurers, was signed into law. While a significant accomplishment, the exact language from this bill was already in Senate Bill 233, a far more encompassing bill that also put into state law women’s preventive health care provisions from the Affordable Care Act. SB233 was signed into law June 3rd. If there was a bill to be vetoed that wouldn’t hurt, this was one.

Assembly Bill 374, which would create the Nevada Care Plan and allow for this Medicaid-like coverage to be sold to Nevadans not currently eligible for Medicaid, was vetoed. The Governor’s veto message has not been posted as this is written, but according to reports, it was vetoed because he felt the issue needed more comprehensive study, which is what will happen by means of Senate Bill 394. SB394 directs the interim Legislative Committee on Health Care to study the issue, including how such coverage can be offered through the state’s health insurance exchange.

Earlier in the session it appeared AB374 was deemed not ready for prime time and wouldn’t go anywhere. However, in collaboration with the state, efforts to revive it gave it new life, albeit knowing it would be an ongoing work-in-progress. Now, that work will be through the interim study and not by legislating “Medicaid for all” at this time.

Assembly Bill 408, which would align state law with key provisions of the Affordable Care Act, was also vetoed. As with AB374, the veto message has not been posted as this is written, but according to reports, the Governor concerns were about potential unintended consequences.

AB408 proposed to: prohibit insurers from discriminating based on pre-existing conditions; ensure minors could stay on a parent’s insurance until age 26; require that plans include coverage for maternity and newborn care; require coverage for the same women’s preventive health care as the provisions in SB233; require the same 12-month prescribing and dispensing of birth control as in SB233 and AB249; and include other non-discriminatory provisions.

In all, the Governor signed more than 600 bills into law and vetoed 41.

Please see the last bill tracking update for the final result of bills the NVPCA was involved in this past session.

With An Eye To The Future . . . Whenever That May Be

With the 2017 session in the books, all eyes are (or remain) focused on what may happen at the federal level as the U.S. Senate considers the American Health Care Act. Its potential impact on Nevada will demand continued attention be paid by legislators, the state and other stakeholders and interested parties.

According to a fact sheet issued U.S. Senator Catherine Cortez Masto's office, the health of more than 400,000 Nevadans is at risk, including thousands of children and those with pre-existing conditions. Premiums and costs would skyrocket and, combined with annual and lifetime caps, could force many off insurance altogether. Nevada could also lose as many as 3,000 health care jobs. And, as the state with the 4th highest drug mortality rate in the nation, Nevada's efforts to fight prescription drug and opioid abuse would also be jeopardized if access to substance abuse treatment were lost or curtailed.

If, what and when Congress and the White House do something with the ACHA could very well determine when the Legislature convenes again. Rumors were rampant even before the last session began that a special session on health care would be needed at some point. If not in a special session before then, health care will be front and center again in 2019.