



Pacific Law Journal Review of Selected Nevada Legislative

Volume 1989 | Issue 1

Article 108

1-1-1989

Insurance; reimbursement for health care services

The University of the Pacific, McGeorge School of Law

Follow this and additional works at: <https://scholarlycommons.pacific.edu/nlr>



Part of the [Legislation Commons](#)

Recommended Citation

The University of the Pacific, McGeorge School of Law, *Insurance; reimbursement for health care services*, 1989 U. PAC. L. REV. (2019).

Available at: <https://scholarlycommons.pacific.edu/nlr/vol1989/iss1/108>

This Legislative Review is brought to you for free and open access by the Journals and Law Reviews at Scholarly Commons. It has been accepted for inclusion in Pacific Law Journal Review of Selected Nevada Legislative by an authorized editor of Scholarly Commons. For more information, please contact mgibney@pacific.edu.

comply with Chapter 575 or the Commissioner's orders.⁵ Reporting insurers must pay a fee to the Insurance Division of the Department of Commerce in order to cover the administration and enforcement costs of Chapter 575.⁶

PHB

5. *Id.* secs. 4, 5, 8, at ___ (enacting NEV. REV. STAT. § 679B.____). Insurers who willfully and repeatedly violate the provisions and orders arising from Chapter 575 are subject to administrative fines subsequent to notice and a hearing. *Id.* Failure of an insurer to comply with an order of the Commissioner relative to Chapter 575 can result in a suspension or revocation of an insurer's certificate of authority to transact insurance, subsequent to notice and a hearing. *Id.*

6. *Id.* sec. 7, at ___ (enacting NEV. REV. STAT. § 679B.____). The fee due from reporting insurers will not be greater than \$500. *Id.* The costs of furnishing insurers' reports must be paid by the party requesting the report, except for the legislature. *Id.*

Insurance; reimbursement for health care services

NEV. REV. STAT. §§ 689A.____, 689B.____, 695B.____, 695C.____ (new);
§§ 287.010, 689A.330, 695C.190 (amended).

AB 814 (Committee on Commerce); 1989 STAT. Ch. 597

Existing law regulates the health insurance¹ industry by codifying requirements for health insurance policies,² group and blanket health insurance,³ non-profit health service corporations,⁴ and health maintenance organizations.⁵ Under Chapter 597, insurers that provide for medical transportation coverage must provide direct reimbursement

1. See NEV. REV. STAT. § 681A.030 (1987) (defining health insurance as insurance against bodily injury, disablement, or death, by accident or illness).

2. See NEV. ADMIN. CODE ch. 689A § 060 (1972) (defining policy as a certificate, contract, coverage statement, rider, endorsement, or plan providing accident or sickness expense benefits). See also NEV. REV. STAT. § 689A.030 (1971) (establishing general terms and form required for health insurance contract formation).

3. See NEV. REV. STAT. §§ 689B.020 (1987) (defining group health insurance as insurance coverage for a group of two or more people, formed for purposes other than securing insurance); 689B.070 (1971) (defining blanket insurance as insurance covering specified groups such as passengers of common carriers, or employees and students of a school district).

4. See *id.* § 695B.010 (1987) (regulations for hospital, medical and dental non-profit service corporations).

5. *Id.* § 679A.140 1(d) (1987) (the purpose of the code is to improve and preserve state regulation of insurance). A health maintenance organization is any person which provides or arranges to provide medical service to its enrollees. *Id.* § 695C.030 7 (1987). See *id.* § 0.039

to medical transportation service providers for covered services, if the provider is not reimbursed by any other source.⁶ Under Chapter 597, insurance policies delivered in another state by a domestic insurer are subject to the above provisions.⁷

PHB

(1987) (defining person as a natural person, any form of business or social organization and any other nongovernmental legal entity). Enrollees make periodic standardized payments without regard to the actual services they receive. *Id.* § 695C.030 7 (1987). Health maintenance organizations' actions do not constitute practicing medicine and, therefore, any health maintenance organization corporation is not functioning illegally. 219 Op. Att'y Gen. 45 (1977). Health maintenance organizations provide or arrange health care services. *Id.*

6. 1989 Nev. Stat. ch. 597, secs. 1, 3, 4, 5 at ___ (enacting NEV. REV. STAT. § 689A.____, 689B.____, 695B.____, 695C.____). The insured, enrollee, subscriber, or provider may submit the claim for reimbursement. *Id.* The provider may not demand payment from the insured, enrollee or subscriber before the claim has been granted or denied. *Id.* The required provision for direct reimbursement to a medical transportation provider is not applicable to any agreement between the insurance and medical transportation providers. *Id.* These provisions apply to health insurance contracts, group and blanket health insurance, nonprofit health service corporations and health maintenance organizations. *Id.* See *id.* sec. 7, at ___ (amending NEV. REV. STAT. § 287.010) (provisions of Chapter 597 also apply to group health insurance policies for employees or officers of public corporations, political subdivisions or any public agency of the State of Nevada).

7. *Id.* sec. 2, at ___ (amending NEV. REV. STAT. § 689A.330) (requiring Nevada Insurance Commissioner to enforce the provisions of Chapter 597, if the corresponding public official of the state in which the policy was received has informed the Nevada Insurance Commissioner that the policy is not subject to control by the officials at that locale). See *id.* sec. 6, at ___ (amending NEV. REV. STAT. § 695C.190) (establishing that the Nevada Insurance Commissioner may require the submission of any relevant information when deciding whether to approve a filing made for the direct reimbursement of medical transportation).

Insurance; taxicab operators

NEV. REV. STAT. § 706.____ (new); §§ 706.011, 706.126, 706.221, 706.8825, 706.8831 (amended).

SB 286 (Committee on Transportation); 1989 STAT. Ch. 755.

Existing law requires holders of certificates authorizing taxicab operation¹ to maintain liability insurance.² Chapter 755 requires the

1. See NEV. REV. STAT. § 706.8827 1(a) (1987) (defining a certificate holder as a person who holds a current Certificate of Public Convenience and Necessity issued for the operation of a taxicab business by the Public Service Commission of Nevada before July 1, 1981, or a Certificate of Public Convenience and Necessity issued by the Taxicab Authority).

2. *Id.* § 706.8828 1-4 (1987). A certificate holder is required to maintain an insurance policy that provides the following minimum coverage: (1) \$100,000 for injury to one person