[Nev. Rev. Stat. §§ 422.001 through 422.065.]

§§ 422.001 through 422.065: Health Care Financing and Policy-- General Provisions

§ 422.001. Definitions.

As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 422.003 to 422.054, inclusive, have the meanings ascribed to them in those sections.

§ 422.003. "Administrator" defined.

"Administrator" means the Administrator of the Division.

§ 422.021. "Children's Health Insurance Program" defined.

"Children's Health Insurance Program" means the program established pursuant to 42 U.S.C. §§ 1397aa to 1397jj, inclusive, to provide health insurance for uninsured children from low-income families in this state.

§ 422.030. "Department" defined.

"Department" means the Department of Health and Human Services.

§ 422.040. "Director" defined.

"Director" means the Director of the Department.

§ 422.041. "Division" defined.

"Division" means the Division of Health Care Financing and Policy of the Department.

§ 422.046. "Medicaid" defined.

"Medicaid" has the meaning ascribed to it in NRS 439B.120.

§ 422.050. "Public assistance" defined.

"Public assistance" has the meaning ascribed to it in NRS 422A.065.

§ 422.054. "Undivided estate" defined.

"Undivided estate" means all real and personal property and other assets included in the estate of a deceased recipient of Medicaid and any other real and personal property and other assets in or to which the deceased recipient had an interest or legal title immediately before or at the time of his or her death, to the extent of

that interest or title. The term includes, without limitation, assets conveyed to a survivor, heir or assign of the deceased recipient through or as the result of any joint tenancy, tenancy in common, survivorship, life estate, living trust, annuity, declaration of homestead or other arrangement.

§ 422.061. Purposes of Division.

The purposes of the Division are:

- 1. To ensure that the Medicaid provided by this State and the insurance provided pursuant to the Children's Health Insurance Program in this State are provided in the manner that is most efficient to this State.
- 2. To evaluate alternative methods of providing Medicaid and providing insurance pursuant to the Children's Health Insurance Program.
- 3. To review Medicaid, the Children's Health Insurance Program and other health programs of this State to determine the maximum amount of money that is available from the Federal Government for such programs.
- 4. To promote access to quality health care for all residents of this State.
- 5. To restrain the growth of the cost of health care in this State.

§ 422.063. State plans for certain programs: Development, adoption and revision by Director; Division required to comply.

- 1. The Director shall adopt each state plan required by the Federal Government, either directly or as a condition to the receipt of federal money, for the administration of any public assistance or other program for which the Division is responsible. Such a plan must set forth, regarding the particular program to which the plan applies:
- (a) The requirements for eligibility;
- (b) The nature and amounts of grants and other assistance which may be provided;
- (c) The conditions imposed; and
- (d) Such other provisions relating to the development and administration of the program as the Director deems necessary.
- 2. In developing and revising such a plan, the Director shall consider, among other things:
- (a) The amount of money available from the Federal Government;
- (b) The conditions attached to the acceptance of that money; and

(c) The limitations of legislative appropriations and authorizations,

for the particular program to which the plan applies.

3. The Division shall comply with each state plan adopted pursuant to this section.

§ 422.064. State plans for certain programs: Priority access to treatment and services for certain parents.

- 1. The Director shall, to the extent authorized by federal law, include in any state plan adopted pursuant to NRS 422.063 priority for a parent who is referred by an agency which provides child welfare services and who is qualified for public assistance to receive treatment for mental health issues, treatment for substance abuse and any other treatment or services that may assist with preserving or reunifying the family.
- 2. As used in this section, "agency which provides child welfare services" has the meaning ascribed to it in NRS 432B.030.

§ 422.065. Eligibility of persons who are not citizens or nationals of United States for state or local public benefits.

- 1. Notwithstanding any other provision of state or local law, a person or governmental entity that provides a state or local public benefit:
- (a) Shall comply with the provisions of 8 U.S.C. § 1621 regarding the eligibility of a person who is not a citizen or national of the United States for such a benefit.
- (b) Is not required to pay any costs or other expenses relating to the provision of such a benefit after July 1, 1997, to a person who is not a citizen or national of the United States who, pursuant to 8 U.S.C. § 1621, is not eligible for the benefit.
- 2. Compliance with the provisions of 8 U.S.C. § 1621 must not be construed to constitute any form of discrimination, distinction or restriction made, or any other action taken, on the basis of national origin.
- 3. As used in this section, "state or local public benefit" has the meaning ascribed to it in 8 U.S.C. § 1621.