



DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF INSURANCE

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Prohibition of Denial, Exclusion, or Limitation of Medically Necessary Health Care Services on the Basis of Gender Identity or Expression

The purpose and intent of this bulletin is to communicate the position of the Division of Insurance (“Division”) to insurance carriers regarding a prohibition of the denial, exclusion or limitation of medically necessary health care services to covered persons on the basis of discrimination because of the covered persons’ gender identity or expression.

Nevada Revised Statute (“NRS”) 651.070 identifies and prohibits discrimination in any place of public accommodation in Nevada, which includes insurance offices, office of a providers of health care, hospitals or other service establishments, based on race, color, religion, national origin, disability, sexual orientation, sex, *gender identity or expression*. NRS 651.050(2) defines gender identity or expression as “a gender-related identity, appearance, expression or behavior of a person, regardless of the person’s assigned sex at birth.”

Nevada Administrative Code (“NAC”) 686A.110 through 686A.160, provides for a prohibition against the denial of benefits relating to coverage of medically necessary health care services on the basis of sex. Specifically, NAC 686A.140 provides in relevant part:

NAC 686A.140 Prohibited practices. (NRS 679B.130, 686A.015)
Practices prohibited ... include, but are not limited to:

...

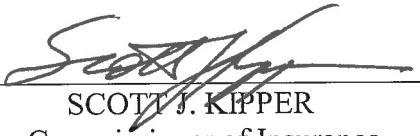
7. Restricting, reducing, modifying or excluding benefits relating to coverage involving the genital organs of only one sex when the restriction, reduction, modification or exclusion is not required for both sexes.

...

NRS 651.070 and NAC 686A.140(7) prohibit the denial, exclusion, or limitation of benefits relating to coverage of medically necessary health care services on the basis of sex as it relates to gender identity or expression. Accordingly, a carrier may not deny, exclude or limit benefits for medically necessary health care services if the medically necessary health care services would be provided at current standards of care to another covered person without regard to their gender identity or expression. In short, medically necessary health care services that are provided to some covered persons cannot be excluded for other covered persons on the basis of gender identity or expression.

Accordingly, the Division will not approve exclusionary language in violation of NAC 686A.140 related to the denial, exclusion or limitation of medically necessary health care services, including benefits or coverage, under the contract of insurance on the basis of gender identity or expression.

Should you have any questions regarding this bulletin, please email the Division of Insurance at insinfo@doi.nv.gov.


SCOTT J. KIPPER
Commissioner of Insurance