

SMALL BUSINESS IMPACT STATEMENT 2014

PROPOSED AMENDMENTS TO NAC 450B

The Division of Public and Behavioral Health (DPBH) has determined that the proposed amendments should not impose an economic burden upon a small business or have a negative impact on the formation, operation or expansion of a small business in Nevada.

A small business is defined in Nevada Revised Statutes (NRS) 233B as a "business conducted for profit which employs fewer than 150 full-time or part-time employees."

This small business impact statement complies with the requirements of NRS 233B.0609.

1) A description of the manner in which comment was solicited from affected small businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary.

Background:

During the 2013 Legislature, four bills were passed which included Assembly Bills (AB) 286 and 344; and Senate Bills (SB) 100 and 285. These bills were heard in the 2013 legislative session and public input was elicited and taken into consideration by the legislators. They were passed and signed into statute by Governor Sandoval. Below is a description of each:

- AB 286 – This bill focused on requiring a host organization to provide emergency medical services at special events in counties whose population was 100,000 people or more. A specific level of emergency medical services is required but dependent upon the size of the event.
- AB 344 – This bill focused on enacting provisions to authorize the use of Physician Orders for Life-Sustaining Treatment (POLST) in Nevada; allowing the deposit of any POLST form or other advance directive in the statewide health information exchange system and the Registry of Advance Directives for Health Care.
- SB 100 – This bill focused on changing the name of emergency medical technicians (EMT's), the certification of technicians, and educational standards of technicians to meet national standards.
- SB 285 – This bill focused on revising provisions governing the exemption of out-of-state air ambulances and attendants from the provisions governing emergency medical services. Additionally, these air ambulances will only be regulated on their medical aspects only. Each out-of-state air ambulance agency or owner will also file their schedule of rates and any change in that schedule before the change become effective.

Regulations number R024-14 includes all edits from the above four bills, along with updating regulations to meet national standards.

Pursuant to NRS 233B.0608 (2) (a), the Division of Public and Behavioral Health has requested input from EMS agencies.

A Small Business Impact Questionnaire was sent to emergency medical services agencies along with a copy of the proposed regulation changes, on February 25, 2014. The questions on the questionnaire were:

- 1) How many employees are currently employed by your business?
- 2) Will a specific regulation have an adverse economic effect upon your business?
- 3) Will the regulation(s) have any beneficial effect upon your business?
- 4) Do you anticipate any indirect adverse effects upon your business?
- 5) Do you anticipate any indirect beneficial effects upon your business?

Summary of Response:

Summary of Comments Received (2 responses were received out of the 56 small business impact questionnaires distributed)			
Will a specific regulation have an adverse economic effect upon your business?	Will the regulation(s) have any beneficial effect upon your business?	Do you anticipate any indirect effects upon your business?	Do you anticipate any indirect beneficial effects upon your business?
2-YES 0-NO	1-YES 1-NO	2-YES 0-NO	1-YES 1-NO
*Additional training to move staff from EMT-Intermediate to Advanced EMT will have an increase cost. *Administrative costs to train staff to new EMS levels. * Placing a nurse on the ambulance will increase costs. * Increased required instructor hours could decrease instructors in rural agencies. This would also increase costs to attend courses.	*Increased level of service delivery and accountability.	*Increased training requirements could impact volunteers. *Placing nurse on ambulance would decrease agency response.	*Increased service levels should have a positive appearance to the general public.

Any other persons interested in obtaining a copy of the summary may e-mail, call, or mail in a request to Steve Tafoya at the Division of Public and Behavioral Health at:

Division of Public and Behavioral Health
4150 Technology Way, Suite 101
Carson City, NV 89706
Steve Tafoya, Manager, EMS Program
Phone: 775-687-7597
Email: stafoya@health.nv.gov

2) The manner in which analysis was conducted.

Steve Tafoya, Manager, Emergency Medical Systems (EMS) Program, in consultation with Erin Seward, Program Manager of Public Health Preparedness and EMS conducted the analysis of the impact on business. The analysis considered the questionnaire answers and comments as well as past business practices of the regulated industry. Based upon this consideration the agency is following the directive of the legislature and is relying on their expertise in limiting the impact on small business.

3) A description of the methods that DPBH considered to reduce the impact of the proposed regulation on small businesses and statement regarding whether the agency actually used those methods.

The Division of Public and Behavioral Health has held several opportunities for the public and the regulated community to provide comments regarding AB 286, 344 and SB 100 and 285, including the economic impact the proposed regulations may have. In consideration of the responses received from the questionnaire the program has concluded a need for some amendments and further explanation of purpose and method in efforts to be all inclusive and transparent throughout this process.

- EMS Program acknowledges that NAC 450B.450 needs to be amended to reflect that nurses are only required on air-transport not ground transport.
- The increase in EMS instructor hours from 8 bi-annual hours to 10 bi-annual hours has been noted as a minor change, which is increase of 1 instructor hour per year. It is also important to note that the increase trainings due to the new EMS titles. These extra hours should not have a large impact to instructors.
- The transition from EMT-Intermediate to Advanced EMT and from EMT-Advanced to Paramedic will have an impact to the agencies. This is a one-time certification transition course. This is a national standard requirement and will align our EMT's to the national guidelines. These classes are 16 hours in length.
 - 871 current EMT-Intermediate's that need training to obtain Advanced EMT
 - 589 current EMT-Advanced that need training to obtain Paramedic

4) The estimated cost to the agency for enforcement of the proposed regulation.

At this time, there is no estimated cost to the agency of the proposed regulations.

5) Total amount DPBH expects to collect from any fees and the manner in which the money will be used.

There is no projection as to fee collection as fees are based on certification and licensure, we do not expect to see an increase. There could be an increase in penalties and fines due to agencies allowing EMT's to operate without a certification, agencies operating without a permit, and agencies operating units/vehicles with Category A or B violations. An estimated projection has not been calculated due to this regulation being new.

6) An explanation of why any duplicative or more stringent provisions than federal, state or local standards regulating the same activity are necessary.

At this time there are no duplicative provisions. We are following national guidelines in the name change of EMT's.

7) The reasons for the conclusions of the agency regarding the impact of a regulation on small businesses.

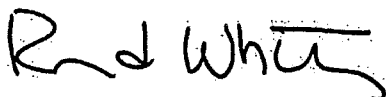
AB 286 and 344, SB 100 and 285, and the proposed regulations require that the EMS Program maintains the health, safety and well-being of patients through certification, trainings, and licensing.

With respect to EMS small businesses, the short term will have an increase of costs for training. This is a one-time training, and from that point on, the overall pre-hospital healthcare will be improved. This transition will allow the State of Nevada to follow national guidelines.

The commonality in all being proposed through this agency and within the responses is to improve EMS in Nevada by having it meet national standards and improve the safety of Nevadan's at special events and with Physician Orders for Life-Sustaining Treatment, as provided through NRS, NAC, and corresponding amendments.

The EMS Program will ensure that any concerns raised with the Small Business Impact Questionnaire and public workshop will be addressed in the regulations to lessen the impact on small businesses.

I, Richard Whitley, Administrator of the Division of Public and Behavioral Health, certify to the best of my knowledge or belief that the information contained in this statement was prepared properly and is accurate.



Richard Whitley, M.S., Administrator
Division of Public and Behavioral Health
Department of Health and Human Services

STATEMENT PURSUANT TO NRS 233B.0608(3)

PROPOSED AMENDMENTS TO NAC 450B

Regulation Number 024-14RP2

The Division of Public and Behavioral Health (DPBH) has determined that the proposed amendments should not impose an economic burden upon a small business or have a negative impact on the formation, operation or expansion of a small business in Nevada in regards to Regulation Number 024-14RP2.

The Division used the methods as described in Sections 1, 2, 3 of the attached Small Business Impact Statement to determine the impact of the proposed regulation on small business. The reasons for the conclusions are also fully described in Section 7 of the attached Small Business Impact Statement.

I, Richard Whitley, Administrator of the Division of Public and Behavioral Health, certify to the best of my knowledge or belief, a concerted effort was made to determine the impact of the proposed regulation and that the information contained in this statement and the attached Small Business Impact Statement is accurate.



Richard Whitley, M.S., Administrator
Division of Public and Behavioral Health
Department of Health and Human Services