

**Legislative Review of Adopted Regulations as Required by NRS 233B.066
Nevada Regulation Amendment R086-13**

The following statement is submitted for adopted amendments to Nevada Administrative Code (NAC) Chapter 422, Nevada Regulation Amendment R086-13.

1. A clear and concise explanation of the need for the adopted regulation.

This NAC describes the program limits, eligibility and distribution of the Disproportionate Share Hospital (DSH) program. The methodology currently includes guaranteed dollar amounts. With the projected Federal annual allotment decrease due to ACA, the annual DSH allotments might be lower than the guaranteed dollar amounts, which might make the State out of compliance with the NAC. The amendment will update several elements of the calculation methodology to ensure compliance.

2. A description of how public comment was solicited, a summary of public response, and an explanation how other interested persons may obtain a copy of the summary.

Copies of the proposed regulations, notices of workshop, Notices of Intent to Act Upon the Regulation were emailed to all persons on the agency's mailing list for administrative regulations and made available at the DHCFP Carson City central office, 1100 E. Williams Street, Suite 101, Carson City, NV 89701; Las Vegas DHCFP, 1210 E. Valley View Blvd. Suite 104, Las Vegas, NV 89416 and the DHCFP Web site www.dhcfp.nv.us. Copies were posted to all county libraries in Nevada and the Nevada State Library. The Notice of Public Hearing and the regulation to be amended were on file at the State Library and Public Library in addition the text of the proposed regulation were available in the State of Nevada Register of Administrative Regulations which is prepared and published monthly by the Legislative Counsel Bureau pursuant to NRS 233B.0653 and on the Internet at <http://www.leg.state.nv.us> and <http://notice.nv.gov>, at 100 Stewart Street, Carson City, Nevada, for inspection by members of the public

On March 31, 2014 a Public Workshop was conducted via teleconference, in both Carson City and Las Vegas, at the Division of Health Care Financial and Policy (DHCFP) conference room. There was no testimony at the Workshop. The Public Workshop Minutes contain a summary of the discussion held regarding the proposed regulation and are attached.

On September 22nd, 2014 a Public Hearing was held, via teleconference, in Carson City at the State of Nevada Legislative Building and in Las Vegas at the Grant Sawyer Building. 3 people attended in Carson City, and 0 people in Las Vegas, in addition to DHCFP staff and Senior DAG Darrell Faircloth.

Additional information and minutes from the Public Workshop is available by contacting Silvia Giancontieri at silvia.giancontieri@dhcfp.nv.gov.

Interested persons may obtain a copy of the Public Hearing minutes on the web at www.dhcfp.nv.gov, Public Notices, Past Meeting Minutes, 2014, Nevada Administrative

Code, and then click on [NAC PH Minutes 9-22-14.pdf](#) or contact Rita Mackie at rmackie@dhcfp.nv.gov or 775/684-3681.

3. The Number persons who:

- (a) Attended each hearing:** March 31, 2014 - 4, September 22nd, 2014 - 9
- (b) Testified at each hearing:** March 31, 2014 - 0, September 22nd, 2014 - 0
- (c) Submitted to the agency written comments:**

None

4. For each person identified in paragraphs (b) and (c) of number 3 above, the following information if provided to the agency conducting hearing:

- (a) Name;**
- (b) Telephone number;**
- (c) Business address;**
- (d) Business telephone number;**
- (e) Electronic mail address; and**
- (f) Name of entity or organization represented.**

None

5. A description of how comment was solicited from affected businesses, a summary of their response, and an explanation how other interested persons may obtain a copy of the summary.

Comments were solicited from affected businesses in the same manner as they were solicited from the public.

The summary may be obtained as instructed in the response to question #2.

6. If the regulations was adopted without changing any part of the proposed regulation, a summary of the reasons for adopting the regulation without change.

As there was no opposition expressed to the proposed legislation it was adopted without change.

7. The estimated economic effect of the adopted regulation on the businesses which it is to regulate and on the public. These must be stated separately, and each case must include:

The economic effect of the regulation on the business which it is to regulate:

- (a) Both adverse and beneficial effects; and**
DSH funding is based on an allotment set by the Federal Government.

Due to the anticipated decrease in DSH federal allotment, DHCFP expects a reduction in DSH supplemental payments to eligible hospitals.

(b) Both immediate and long-term effects.

DSH funding is based on an allotment set by the Federal Government.

Due to the anticipated decrease in DSH federal allotment, DHCFP expects a reduction in DSH supplemental payments to eligible hospitals.

The economic effect of the regulation on the public:

(a) Both adverse and beneficial effects; and

There are no adverse or beneficial effects to the public.

(b) Both immediate and long-term effects.

There are no adverse or beneficial effects to the public.

8. The estimated cost to the agency for enforcement of the adopted regulation.

There is no cost anticipated for the implementation of these changes.

9. A description of any regulations of other state or government agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the regulation overlaps or duplicates a federal regulation, the name of the regulating federal agency.

There is no other state or federal regulations that overlap or duplicate the proposed regulation.

10. If the regulation includes provisions that are more stringent than a federal regulation which regulates the same activity, a summary of such provisions.

N/A

11. If the regulation provides a new fee or increases an existing fee, the total annual amount the agency expects to collect and the manner in which the money will be used.

N/A

12. Is the proposed regulation likely to impose a direct and significant economic burden upon a small business or directly restrict the formation, operation or expansion of a small business? What methods did the agency use in determining the impact of the regulation on a small business?

No. The Disproportionate Share Hospital (DSH) program is intended to compensate hospitals serving low-income patients. The projected DSH program federal allocation will be progressively decreasing, requiring revisions to the current methodology.

An analysis of the number of employees of the hospitals that are currently participating in the program was conducted. Only one of the current DSH eligible hospitals, Mt. Grant General Hospital meets the statutory definition of a small business.

The new methodology results in a very slight increase in DSH payments for what this hospital would have received. The increase is negligible and based on a projected allotment.