

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH (DPBH)

September 12, 2014

LCB File # R024-14RP2

Information Statement per NRS 450B

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

The proposed regulations for NAC 450B Emergency Medical Services (EMS), is due to four bills that were passed during the 2013 legislative session, A.B. 286, A.B. 344, S.B. 100, and S.B. 285. These changes will allow the Nevada State EMS Program to be update with national definitions and national standards. The following is a summary of the changes made to NAC 450B.

- Update the name change to all EMS levels to reflect the national standard.
- Update NACs to match the national EMS standards set forth by the National Highway Traffic Safety Administration of the United States Department of Transportation, National Association of Emergency Medical Service Educators, Federal Aviation Administration, and the American Heart Association.
- Require that out-of-state air ambulances be permitted by the State of Nevada, and be staffed by an appropriate level of care such as RN or EMT if they are transporting patients to Nevada, within, or out of Nevada.
- Update the reportable trauma data to match the national standard set forth from the American College of Surgeons.
- POLST form will now be an additional type of advance directive. The POLST form will have the same NRS statutory language as other advance directives under NRS 449.

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

The Nevada State EMS Program conducted three informal workshops for feedback from the EMS community and also worked with state and local groups for feedback. The three informal workshops were conducted on July 19, 2013 in Minden; August 22, 2013 in Winnemucca; and September 3, 2013 in Elko, NV.

Comment was solicited from the regulated community, in that each permitted EMS agency under NAC 450B were mailed a copy of the proposed regulations, small business impact questionnaire and the notice of the public workshop.

The main county libraries were faxed the notice of the public workshop, proof of posting verification and the proposed regulations.

All interested parties on the EMS listserv were e-mailed a copy of the proposed regulations and the notice of the public workshop.

The public workshop was held March 25, 2014 in Carson City, Las Vegas, and Winnemucca. The results of the Public Workshop held were as follows: fourteen (14) people attended, nine (9) by phone, and six (6) people commented.

The following comments were made:

- (1) John Moller, Independent EMS Instructor and Care Flight, asked about Section 4, NAC 450B.360. John commented that the American Heart Association needs a certificate to provide international travel life support or equivalent. He stated he can live with the regulation naming specific entities such as the Heart Association and International Trauma Life Support. John asked if we have the opportunity can we drop the international and make it trauma life support certificate or approved by the Division.

Steve Tafoya, DPBH, mentioned that approval needs to be from the Division and that it is easier to not name specific courses. Steve stated the reason they kept the specific names in the regulation is while going through national standards, American College of Surgeons, and Attorney General Office preferred that language. It was suggested to reference the Heart Association in the regulations and have the equivalent rights after all statement that goes with international travel license board or American Heart Association.

This regulation was not revised.

- (2) John Moller, Independent EMS Instructor and Care Flight, mentioned that Section 13, NAC 450B.105 needs clarification and he asked if we still have the designation for basic/intermediate/ advanced medical care.

Steve Tafoya stated to clarify basic/intermediate/advanced care does not refer to new terms of EMT, AEMT and paramedic. It refers back to level of care more towards medical billing. Intermediate care still is the concept of advanced, how come it says medical care, not in so much regards to actual language of advanced. Every time its advanced specific portion it is referenced.

This regulation was not revised

- (3) Donna Miller, Life Guard International, asked about “Operating an Ambulance Service without a Permit.” She did not feel that the language would cover air ambulances especially those out-of-state. Donna proposed to set a penalty system i.e. 1st violation - letter of warning, 2nd violation -\$1,000, 3rd violation - \$5,000 per violation. This would be based on a complaint and investigation.

Erin Seward, DPBH, stated any service (agency) operating as a unit (ambulance, air ambulance) in the State of Nevada without a permit is not allowed. Having a permit

ensures that they are also inspected. If a service unit is caught without a permit, a fine would be implemented. Donna stated that we need to add a penalty system for ambulances that are based out-of-state. Erin responded that in Section 23, NAC 450B.260 the definition of a unit means ambulance and air ambulance. The definition does not separate in-state or out-of-state units. Steve Tafoya mentioned that there is also a fine for people not operating with a certificate. Donna stated that is correct. Mike Sullivan, Eureka County EMS, mentioned that the confusion comes from the title above the section: "Operating Ambulance service without a permit" and the language underneath states "any service operating a unit."

LCB was revised by LCB after the Public Workshop to read as "The Division may assess an administrative penalty in the amount of \$500 per day against a service which operates a unit without a permit issued by the Division."

- (4) Mike Heidemann, SOC Fire and Emergency Services, brought up the section on Section 26, NAC 450B.320, Item 1(d), the licensed physician, in regards to signing off on attendant's license to operate vehicle. There is an issue out in rural Nevada and we would like to reflect licensed physician or physician's assistant and further down same paragraph physician or physician's assistant on approval by Division. Donna Miller mentioned a proposal in that same section regarding licensed physician or nurse practitioner based on new bill or physician's assistant. Steve Tafoya stated that we have been working with the agencies and the Chief Medical Officer has asked to adjust that as well. We are looking to add nurse practitioner and physician assistant too.

This regulation was revised by adding Physician Assistant and Nurse Practitioner onto the list of authorized providers who can verify.

- (5) Donna Miller, Life Guard International, commented on Section 26, NAC 450B.320 regarding Class C driver's license. Donna believes that it should say Class C or better. Mike Sullivan stated that a Class A license is inclusive in Class C type vehicles. Class A can operate vehicles under Class C. Erin Seward suggested a better wording such as "a driver's license that includes a Class C." Mike stated that would eliminate people with Class M that do not have a motor vehicle license, only motorcycle. Erin suggested it read to have a minimum of Class C.

This regulation was revised to say "Holds a Class A, Class B, or Class C driver's license."

- (6) It was mentioned on Section 2, about the phrase "transport bodies" and to have it phrased "transport sick or injured." Steve Tafoya stated that they left the word "bodies" for agencies to get paid and it had to be incorporated for buyer recovery. Steve stated he would double check to make sure of the correct language. Yes this is the correct language.

This regulation was not revised.

- (7) It was mentioned on Section 6, Item 1, regarding paramedic and emergency medical services endorsements that expire on date of expiration appearing on certificate for paramedic and if these are two separate dates. A paramedic certificate and critical care certificate can have two different dates. Steve Tafoya responded that the endorsement portions has a new definition and has been approved by Attorney General Office. Having two different endorsements is up to the EMT to maintain on their own. If it has expired that means they have to renew.

This regulation was not revised.

- (8) It was mentioned on Section 26, NAC 450B.320, Item 2(2), that it state a registered nurse pursuant to chapter 632 NRS. Instead it should say Licensed EMS Registered Nurse pursuant to that chapter.

This regulation was revised to change from “registered nurse” to “emergency medical services registered nurse.”

- (9) Jared Oscarson, Humboldt General Hospital, suggested that on Section 40, NAC 450B.456, to have the requirements for dispatchers.

This regulation was revised to include language regarding “training pursuant to” the national standard.

- (10) Linda Bingaman, Carlin Volunteer Fire Department, questioned Section 66, NAC 450B.574 about units and non-transport units providing care without transporting. What does it mean in relationship to fire service vehicle with ambulance just to assist and not transporting? If a rescue unit is sent are they falling under regulations of having licensed attendants? Those rescue units are staffed by fire service people, are they falling under same regulations?

Non-transport units are not allowed to transport patients. This includes rescue units. All units (ground, air ambulance, non-transport) must be staffed by appropriately licensed EMTs and attendants.

This regulation was not revised.

- (11) Karla Jones, Carlin Volunteer Fire Department, questioned Section 69, NAC 450B.580, Item 2, regarding an ambulance should be equipped with communication that provided radio communication. Should it be “any appropriate” frequency instead of specifying UHF frequency? Steve Tafoya confirmed that it should say “any appropriate” frequency.

This regulation was revised to say “any frequency” rather than “ultra high frequencies.”

- (12) Donna Miller, Life Guard International, asked about clarification on Section 90, NAC 450B.766, Item 1, regarding services responding to a scene. Is every agency required

to give information to the state? Transporting or non-transporting, do they have to stay and wait?

Yes the agency at the scene providing emergency medical care must submit to the Division information concerning patients with traumas who are not transported to a receiving hospital or a trauma center.

This regulation was not revised.

- (13) It was asked about Section 46, NAC 450B.471, Item 2(a), regarding verification by witness with licensed attendant, transporting to hospital who shall sign statement indicating, signed statement, because they use electronic forms. Steve Tafoya stated that if all your information is digital then an electronic signature will suffice. You can also upload any paper documents into an electronic system.

Regulation was revised by LCB. Information regarding electronic signature stands, but was moved to Item 1(f).

- (14) It was mentioned in Section 48, NAC 450B.481 regarding controlled substance and if it required the signed initials of a paramedic or registered nurse. The commenter stated that it should be two persons verifying and not be specific to paramedic or registered nurse. However, the national standard only allows paramedics and registered nurses to administer narcotics. This would require a signature.

This regulation was not revised.

- (15) Karla Jones, Carlin Volunteer Fire Department, asked about Section 74, NAC 450B.640. The term "fire-fighting agency" was taken out of all the regulations, except for Item 3 of this regulation.

Regulation was revised to remove the term "fire-fighting agency" out of Item 3 of NAC 450B.640.

3. The number of persons who: 1) attended the hearing; 2) testified at each hearing; and 3) submitted to the agency written statements.

At the Board of Health on September 12, 2014, nineteen (19) people attended the hearing; one (1) person testified which was Steve Tafoya, Nevada State EMS Program Manager; and no written statements were submitted to the agency.

4. If provided, the name, telephone number, business address, business telephone number, electronic e-mail address and name of entity represented for individuals described above.

See attached Sign-In Sheets for Board of Health on September 12, 2014 from attendees in Las Vegas and Carson City, NV.

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.

The Small Business Impact statement along with a copy of the proposed regulation changes was sent to all permitted EMS agencies. Postings were sent to all main libraries for posting of the workshops to be held in Las Vegas, Winnemucca, and in Carson City for March 25, 2014.

There were two (2) responses received out of the fifty-six (56) Small Business Impact Questionnaires distributed. Out of the two (2) responses, only one (1) was a business that was under 150 employees.

One (1) of respondents stated that the regulation could have an adverse economic effect upon their business. This is due to the transition to the new EMS provider name change. 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. This class is 16 hours in length. To help offset any involved costs associated with this transition, the Nevada State EMS Program has training grant funds that are available that any agency can request if needed.

A summary of the Public Workshop, Chapter 450B can be obtained by contacting the Division of Public and Behavioral Health, 4150 Technology Way, Suite 100, Carson City, NV 89701.

6. If the regulation was adopted without changing any part of the proposed regulation, a summary of the reasons for adopting the regulation without change. The statement should also explain the reasons for making any changes to the regulation as proposed.

The proposed regulation has been revised to address public comment and it meets the NRS adoption.

7. The estimated economic effect of the regulation on the business which it is to regulate and on the public. These must be stated separately, and in each case must include:
 - > Both adverse and beneficial effects; and
 - > Both immediate and long-term effects.

The beneficial effects would ensure that Nevada meets the national standard. 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 immediate and long-term effects could be increased standard of patient care throughout the state. It could allow EMS providers in the state to respond to natural disasters outside of the state, if needed.

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

The agency cost for enforcement will not be impacted for the NAC 450B. No additional staff would be required for these inspections. There would be no additional expense incurred by the Division for the administrative assistant staff.

No additional fees would be necessitated, charged or incurred to the EMS agencies as this would be incorporated into the routine annual inspection.

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, name the regulatory federal agency.

This regulation does not affect other State agencies, overlap, or duplicate authority. Currently, there is no federal involvement or regulation.

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

At this time, the NAC 450B is at the national standard and doesn't exceed it.

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.

NAC 450B will have the following new and increased fees:

- \$50 per person per day administrative penalty against a service which allows a person to perform the duties of an attendant on an ambulance, air ambulance or agency's vehicle without a valid certificate issued by the Division.
- \$500 per day administrative penalty against a service which operates a unit (ground or air ambulance) without a permit issued by the Division.
- \$100 re-inspection fee to re-inspect a unit if needed.
- A investigation fee of any complaint will be based upon the hourly rate established for each investigator of the Division, as determined by the budget of the Division, and travel expenses. This is for all complaints that are determined to be substantiated and will be paid for by the service or person for whom the complaint was made against.
- Printed copies of documents will go up from \$.02 per copy to \$.10 per copy.

Type of Fee	SFY14 Audit	Potential Collections
\$50/day against a service that allows an unlicensed provider	12	\$600
\$500 a day for unpermitted agency	SFY14 = 0 SFY13 = 1	\$500

\$100 inspection fee	1	\$100
Substantiated Investigations	4	Estimated \$5,000 total with staff and administration hours along with travel
Copy Fee	Never charged in past	\$100

All fees collected stay within the program and are used for training opportunities that local EMS agencies can apply for; costs associated with Nevada State EMS Program staff providing trainings and proctoring evaluations.

Please see attachments that are included for the above questions.