

BRIAN SANDOVAL
Governor

JULIE KOTCHEVAR, Ph.D.
Administrator



RICHARD WHITLEY, MS
Director

IHSAN AZZAM P.h.D., M.D.
Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
Bureau of Health Care Quality and Compliance
727 Fairview Drive Ste. E
Carson City, Nevada 89701
Telephone (775) 684-1030 • Fax (775) 684-1073
<http://dpbh.nv.gov>

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Governor Sandoval and Director of the Legislative Counsel Bureau,

This report is being prepared in accordance with NRS 439A.083 for the December 31, 2018 reporting requirement timeframe. The Division of Public and Behavioral Health’s, Bureau of Health Care Quality and Compliance (HCQC) has reviewed the following Nevada Revised Statutes (NRS) and Nevada Administrative Code (NAC) Chapters for which it has oversight, Chapter 433 (Administration of Mental Health and Intellectual and Developmental Disability Programs) specifically as it relates to Community-Based Living Arrangement Services, Chapter 449 (Medical Facilities and Other Related Entities), Chapter 442 (Maternal and Child Health; Abortion) specifically as it relates to the section, “Provision of Neonatal Care by Hospital”, and Chapter 652 (Medical Laboratories). Participation in the review included providers of health care, the general public and HCQC staff.

The following statutes and regulations were identified as adding to the cost of health care without providing a significant benefit and the action which has been taken or is required to eliminate any such statutes and regulations.

Chapter 433 – Community Based Living Arrangements (CBLA)

Regulatory Changes

NAC Chapter 433	Reasoning	Action Taken/Required to eliminate statutes
<p>NAC 433.336 requires the Division to establish a screening panel to interview a CBLA provisional certificate applicant and determine whether the applicant is qualified to participate in required training.</p>	<p>This requirement adds an unnecessary step in the CBLA provisional certification approval process which adds time and therefore delays CBLA certification approvals. Delays may result in costs to an applicant because they are not operating and collecting revenue while awaiting approval. The proposed regulations also allow an applicant to complete the required training after an application is submitted instead of having to wait for approval from the screening panel to take the training which should also speed up the CBLA certification approval process.</p>	<p>The Division is moving forward regulations which repeal the requirement to establish a screening panel before required training can be completed in accordance with NAC 433.336. The proposed regulations were adopted by the Board of Health December 7, 2018, passed the Legislative Commission and became effective on December 19, 2018.</p>

Chapter 449 - Medical Facilities and Other Related Entities

Statutory Changes

NRS Chapter 449	Reasoning	Action Taken/Required to eliminate statutes
<p>NRS 449.089 Expiration and renewal of license.</p> <p>1. Each license issued pursuant to NRS 449.029 to 449.2428, inclusive, expires on December 31 following its issuance and is renewable for 1 year upon reapplication and payment of all fees required pursuant to NRS 449.050 unless the Division finds, after an investigation, that the facility has not:...</p>	<p>NRS 449.089, as written, adds to the cost of health care without providing a significant benefit because a new health care facility applicant pays the full initial licensure amount and if licensed after January 1 will only get a partial year of operation before having to pay the renewal fee in the same year. For example, a health facility is approved for operation (issued a license in November) at which point the facility can begin operations, but the license is only good through December 31 of the same year, so to continue operations beyond the year a renewal fee must be submitted in the same year the initial application payment was received. The law does not allow for a prorated rate.</p>	<p>The Division or Legislature would need to introduce a bill draft to replace NRS 449.089 or revise it to allow for a license to expire 1 year after the date of issuance and which may be renewed annually on or before the expiration date.</p>

Regulatory Changes

NAC Chapter 449	Reasoning	Action Taken/Required to eliminate statutes
<p>NAC 449.39535 to NAC 449.39561 – Administrative Sanctions</p>	<p>A provider review included a concern regarding high penalties without any improvements.</p> <p>Although the Division will not be moving forward any actions to repeal the ability to impose monetary penalties, it is moving forward regulations (see Action Taken column) to help reduce the financial impact on facilities.</p>	<p>The Division is moving forward regulations which authorizes a facility to request to use all or a portion of an initial monetary penalty to correct the deficiency for which the penalty was imposed in lieu of paying the penalty and authorizes the Bureau of Health Care Quality and Compliance to approve such a request if the deficiency results from the facility's first violation of a particular provision of law or regulation.</p> <p>The proposed regulations were adopted by the Board of Health December 7, 2018 and are tentatively scheduled for hearing at the Legislative Commission meeting in January 2019.</p>
<p>NAC 449.126 Laundry requirements</p> <p>1. A facility must maintain:</p> <p>4. Clean linen to be dried, ironed, folded, transferred or</p>	<p>Depending on the size of the facility, having to iron a large volume of linen may result in significant employee costs to conduct the ironing.</p>	<p>The next time the Division opens NAC Chapter 449 for amendment it will eliminate the requirement to iron laundry.</p>

distributed must be handled in a sanitary manner, specified in writing.		
<p>NAC 449.15357 Laundry requirements. (NRS 449.0302)</p> <p>4. Clean linen to be dried, ironed, folded, transferred or distributed must be handled in a sanitary manner in accordance with a written plan maintained by the facility.</p>	Depending on the size of the facility, having to iron a large volume of linen may result in significant employee costs to conduct the ironing.	The next time the Division opens NAC Chapter 449 for amendment it will eliminate the requirement to iron laundry.
<p>NAC 449.2726 requires a residential facility for groups to not admit diabetics or permit diabetics to remain a resident of the facility unless the resident performs glucose testing on himself or herself without assistance or is performed by a medical laboratory licensed pursuant to NRS Chapter 652 and/or if a resident's medication is administered by the resident without assistance or by a medical professional or licensed practical nurse who is not employed by the residential facility.</p>	NAC 449.2726 may result in fewer options for people with diabetes by limiting diabetic residents from being admitted or retained in a facility, as applicable.	<p>The Division is moving forward regulations which will allow facilities to perform waived glucose testing on residents without a state laboratory license.</p> <p>The Division also removed the requirement that the medical professional or licensed practical nurse administering the resident's medication not be employed by the residential facility; allowing medical professionals, or licensed practical nurses, working at a residential facility for groups to administer a resident's medication.</p> <p>The proposed regulations were adopted by the Board of Health December 7, 2018 and are tentatively scheduled for hearing at the Legislative Commission meeting January 2019.</p>

Chapter 442 (Maternal and Child Health; Abortion) specifically as it relates to the provision of neonatal care by hospitals, NRS and NAC, Chapter 652 (Medical Laboratories), were reviewed and no statutes or regulations were identified as adding to the cost of health care without providing a significant benefit during this review cycle.

If you have any questions regarding this report please do not hesitate to contact, Leticia Metherell, RN, CPM, Health Program Manager III at 775-684-1045 or via email at: lmetherell@health.nv.gov.

Sincerely,



Leticia Metherell, RN, CPM, HPM III for
Paul Shubert, Bureau Chief