

**ADOPTED REGULATION OF THE
STATE BOARD OF HEALTH**

LCB File No. R072-03

§§1 and 3 effective October 22, 2003
§2 effective July 1, 2004

EXPLANATION – Matter in *italics* is new; matter in brackets ~~omitted material~~ is material to be omitted.

AUTHORITY: §§1-3, NRS 439.150 and 440.120.

Section 1. NAC 440.210 is hereby amended to read as follows:

440.210 Each person who is legally responsible for registering the birth of a child shall submit a fee to the Health Division of the Department of Human Resources for each birth as follows:

1. If paid on or before the 30th day after the date of the birth of the child, the fee is ~~[\$28.]~~ *\$64.*
2. If paid more than 30 days after the date of the birth of the child, the fee is ~~[\$32.]~~ *\$66.*

Sec. 2. NAC 440.210 is hereby amended to read as follows:

440.210 Each person who is legally responsible for registering the birth of a child shall submit a fee to the Health Division of the Department of Human Resources for each birth as follows:

1. If paid on or before the 30th day after the date of the birth of the child, the fee is ~~[\$64.]~~ *\$60.*
2. If paid more than 30 days after the date of the birth of the child, the fee is ~~[\$66.]~~ *\$62.*

Sec. 3. 1. This section and section 1 of this regulation become effective on October 22, 2003.

2. Section 2 of this regulation becomes effective on July 1, 2004.

**NOTICE OF ADOPTION OF PROPOSED REGULATION
LCB File No. R072-03**

The State Board of Health adopted regulations assigned LCB File No. R072-03 which pertain to chapter 440 of the Nevada Administrative Code on September 12, 2003.

Notice date: 8/13/2003
Hearing date: 9/12/2003

Date of adoption by agency: 9/12/2003
Filing date: 10/22/2003

INFORMATIONAL STATEMENT

1. 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.

Pursuant to NRS 233B.0608(2)(a), BFHS requested input from operators of healthcare facilities that are licensed pursuant to NAC 449.0151, 449.0045, 449.038, 449.0305 and 449.249. At the public workshops, BFHS received no (0) responses from facilities that met the definition of a small business. At the Public Hearing by the State Board of Health, three (3) parents of children with inherited disorders, one (1) individual affected with Congenital Adrenal Hyperplasia, one (1) Pediatric Endocrinologist and one (1) representative of a national parent advocacy program testified in favor of adoption of the proposed fee increase. Two (2) individuals representing the Nevada Hospital Association testified against adoption of the proposed regulation.

The Bureau of Family Health Services sent written notices of workshops and the Public Hearing to interested providers. Public notice of workshops were published in the Reno-Gazette Journal on June 4 & 6, 2003 and the Las Vegas Review Journal on June 4 & 6, 2003. Public Workshops were held in Las Vegas on June 24, 2003 and in Reno on June 24, 2003. No providers of birthing services attended the workshops. Milea Spencer, a reporter from the Las Vegas Sun was in attendance and stated that she was attending as an observer. However, Ms. Spencer did ask a question as to who would be responsible for payment of this fee. Gloria Deyhle explained that the person or entity responsible for the registration of the birth is responsible for payment. In most instances, this is the hospital. Ms. Spencer asked if the hospitals charged the family. Ms. Deyhle stated that she thought the hospital included the charge in the bill, or at least included it as part of the cost centers used to develop hospital rates. Ms. Spencer then noted that since this fee is listed under "registration of birth" she did not think that insurance companies would pay for that. Ms. Deyhle noted that she had not heard of any instance where this had been an issue. Families have refused to have testing done for a variety of reasons, but she had never heard of an infant being refused testing due to a parent's inability or unwillingness to pay for the testing.

Notice of the Public Hearing was published in the Las Vegas Review Journal, the Las Vegas Sun and the Reno Gazette Journal on August 13, 2003. Representatives of the Nevada Hospital Association testified against adoption of the proposed regulation citing

the burden of increased costs and problems with the current lack of reimbursement for services. The parents, the individual affected by Congenital Adrenal Hyperplasia, the Pediatric Endocrinologist, and the representative from the parent advocacy group testified in favor of adopting the proposed fee increase and also requested immediate resumption of testing for Congenital Adrenal Hyperplasia (which had been suspended due to a funding shortfall).

Interested parties may obtain a copy of the summary by writing to:
Nevada State Board of Health
Nevada State Health Division
505 E. King Street - Room 201
Carson City, NV 89701
Attention: Yvonne Sylva, Secretary

2. THE NUMBER OF PERSONS WHO:

a. ATTENDED THE HEARING;

8

b. TESTIFIED AT EACH HEARING; AND

8

c. SUBMITTED TO THE AGENCY WRITTEN STATEMENTS.

3

3. 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 Bureau of Family Health Services sent written notices of workshops and the Public Hearing to interested providers. Public notice of workshops were published in the Reno-Gazette Journal on June 4 & 6, 2003 and the Las Vegas Review Journal on June 4 & 6, 2003. Public Workshops were held in Las Vegas on June 24, 2003 and in Reno on June 24, 2003.

Notice of the Public Hearing was published in the Las Vegas Review Journal, the Las Vegas Sun and the Reno Gazette Journal on August 13, 2003.

Copies of the proposed regulation were on display at the Health Administration office in Carson City, State Library, Clark County District Health Department, Washoe County District Health Department, Special Children's Clinic in Reno, special Children's Clinic in Las Vegas and at the main public libraries in Carson City, Churchill county, Clark County, Douglas County, Elko County, Esmeralda County, Eureka County, Humboldt County, Lander County, Lincoln County, Nye County, Pershing County, Storey County, and White Pine County.

Interested parties may obtain a copy of the summary by writing to:
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4. 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 proposed regulation was changed. The fee was changed from \$60 to \$64 if paid before 30 days after the birth of the child, and from \$62 to \$66, if paid more than 30 days after the birth of the child. This will be in effect until June 30, 2004.

Section 2 was added. This section decreases the fee to be collected from \$64 to \$60 if paid before 30 days after the birth of the child, and from \$66 to \$62 if paid more than 30 days after the birth of the child. This will take effect on July 1, 2004.

This was done for the following reasons:

The Board of Health determined that the cost breakdown submitted justifying the increase was fair and reasonable.

The Board of Health determined that the Health Division needed initial additional funding in order to be able to immediately resume testing for congenital adrenal hyperplasia.

5. 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:

Adverse economic effect:

The adverse economic effect identified as resulting from the proposed regulation changes is that the cost to the hospitals/birthing centers providing this testing to infants will increase. The proposed fee increase is expected to have both direct and indirect adverse economic effects on both hospitals and birthing centers. Testing for inborn errors of metabolism and hemoglobinopathies will now cost more than in previous years, and will most likely result in increased cost to families.

Beneficial economic effect:

The proposed fee increase is expected to have both direct and indirect beneficial economic effects on both hospitals and birthing facilities. Testing for inborn errors of metabolism, endocrine disorders and hemoglobinopathies are mandated by state law. Providing this testing in-house at these facilities would be far more costly than paying the state fee for the test battery to be completed. Thus, the facility is still able to comply with

the law at a lower cost. Families will benefit in that the cost will be less than that of a hospital laboratory performing the tests. Families will also benefit in that babies with a disorder will be detected earlier, initiate treatment earlier and avoid the devastating consequences of these disorders.

6. THE ESTIMATED COST TO THE AGENCY FOR ENFORCEMENT OF THE PROPOSED REGULATION.

There is minimal cost to the agency for enforcement of the proposed regulation. Hospitals and birthing centers voluntarily submit payment monthly, based on the number of births at each facility. Health Division-BFHS monitors the number of births at each facility throughout the state annually, checks the fees submitted, and then bill facilities for any discrepancies.

7. 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 REGULATING FEDERAL AGENCY.

No duplication or overlapping of regulations are either created or already in existence.

8. IF THE REGULATION INCLUDES PROVISIONS WHICH ARE MORE STRINGENT THAN A FEDERAL REGULATION WHICH REGULATES THE SAME ACTIVITY, A SUMMARY OF SUCH PROVISIONS.

There are no Federal regulations governing newborn screening or birth defects registry fees.

9. 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.

See attached projection of collection and expenditures.

The money will be utilized to fund the cost of laboratory testing, the program coordinator position, follow up services, two Registered Dietician positions, and a contract with a metabolic specialist for clinic services in Reno and Las Vegas.