

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

LCB File No. R138-07

Effective January 30, 2008

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

AUTHORITY: §1, NRS 449.037; §§2-8, NRS 450B.795.

A REGULATION relating to emergency medical services; providing for the delegation of certain duties of the State Board of Health to a county or district board of health; requiring hospitals and providers of emergency medical services in certain counties to participate in the collection of data relating to waiting times at hospitals; and providing other matters properly relating thereto.

Section 1. NAC 449.331 is hereby amended to read as follows:

449.331 1. A hospital shall develop and carry out policies and procedures to ensure that emergency services and medical care are provided in accordance with NRS 439B.410 *and 450B.790* and 42 C.F.R. § 489.24 ~~[]~~ *and to ensure compliance with the provisions of NRS 450B.795.*

2. All general hospitals not having their own long-term facility shall have transfer agreements with long-term care facilities. Transfer agreements between facilities must be in writing and on file at each facility concerned. The agreements must provide for:

(a) The transfer of patients between facilities whenever the need for transfer is medically determined; and

(b) The exchange of appropriate medical and administrative information between facilities.

Sec. 2. Chapter 450B of NAC is hereby amended by adding thereto the provisions set forth as sections 3 to 8, inclusive, of this regulation.

Sec. 3. As used in sections 3 to 8, inclusive, of this regulation, unless the context otherwise requires, the words and terms defined in sections 4 and 5 of this regulation have the meanings ascribed to them in those sections.

Sec. 4. "Hospital" has the meaning ascribed to it in NRS 449.012.

Sec. 5. "Provider of emergency medical services" has the meaning ascribed to it in NRS 450B.795.

Sec. 6. 1. A county or district board of health may submit to the Health Division a request for the State Board of Health to delegate its duties set forth in NRS 450B.795. The Health Division shall forward a request submitted pursuant to this subsection to the State Board.

2. A request submitted pursuant to subsection 1 must be in writing and must include, without limitation, a:

(a) Statement which indicates that the county or district board of health has the ability to carry out the duties set forth in NRS 450B.795;

(b) Statement which indicates that each hospital and each provider of emergency medical services located in the county will participate in the collection of data;

(c) Description of the system that will be used to collect data in the county;

(d) List of the persons appointed to the advisory committee required pursuant to subsection 7 of NRS 450B.795;

(e) Description of the process that will be used to review the circumstances of waiting times for the provision of emergency services and care which exceed 30 minutes; and

(f) Statement which indicates whether the county or district board of health will require each hospital and provider of emergency medical services located in the county to contribute

to the cost of carrying out the collection of data pursuant to NRS 450B.795 and how those costs will be allocated, if applicable.

3. Upon receiving a written request pursuant to subsection 1, the State Board of Health will determine at its next regularly scheduled meeting whether to delegate to the county or district board of health its duties set forth in NRS 450B.795. The State Board will provide written notice to the county or district board of health of its decision to approve or deny the request.

4. Upon receiving notification of the approval of a request submitted pursuant to subsection 1, the county or district board of health shall carry out the duties of the State Board of Health set forth in NRS 450B.795.

5. A county or district board of health that carries out the duties set forth in NRS 450B.795 shall submit to the State Board of Health a quarterly report in the form prescribed by the State Board. Each quarterly report must include, without limitation:

(a) The dates of the meetings of the advisory committee required pursuant to subsection 7 of NRS 450B.795;

(b) A summary of each incident in which the waiting time for the provision of emergency services and care exceeds 30 minutes; and

(c) A summary of the circumstances surrounding waiting times for the provision of emergency services and care that exceed 30 minutes.

Sec. 7. 1. *A hospital located in a county that participates in the collection of data pursuant to NRS 450B.795 shall report the information required pursuant to subsection 5 of that section to:*

(a) The State Board of Health; or

(b) If the State Board has delegated its duties to the county or district board of health in the county in which the hospital is located, the county or district board of health.

2. A provider of emergency medical services located in a county whose population is less than 400,000 that participates in the collection of data pursuant to NRS 450B.795 shall report the information required pursuant to subsection 5 of that section to:

(a) The State Board of Health; or

(b) If the State Board has delegated its duties to the county or district board of health in the county in which the provider of emergency medical services is located, the county or district board of health.

Sec. 8. *Each hospital and each provider of emergency medical services located in a county that participates in the collection of data pursuant to NRS 450B.795 in which the State Board of Health has not delegated its duties to the county or district board of health in the county must contribute equally to the cost of purchasing hardware, software, equipment and other resources necessary to carry out the collection of data pursuant to NRS 450B.795.*

**NOTICE OF ADOPTION OF PROPOSED REGULATION
LCB File No. R138-07**

The State Board of Health adopted regulations assigned LCB File No. R138-07 which pertain to chapter 449 of the Nevada Administrative Code.

INFORMATIONAL STATEMENT

1. DESCRIPTION OF HOW PUBLIC COMMENT WAS SOLICITED, SUMMARY OF PUBLIC RESPONSE, AND AN EXPLANATION OF HOW OTHER INTERESTED PERSONS MAY OBTAIN A COPY OF THE SUMMARY.

A Small Business Impact Questionnaire was mailed to Permitted Ambulance and Fire-Fighting Agencies and Hospitals on September 17, 2007. Attached are the Small Business Impact Statement Questionnaire and the Small Business Impact Summary.

Notice of public workshops held on October 8, 2007, in Carson City and on October 9, 2007, in Las Vegas, was published in the Las Vegas Review Journal and Reno Gazette Journal on or before September 21, 2007. Notices of public workshops, and proposed regulations were mailed to all county libraries in Nevada, Permitted Ambulance and Fire-Fighting Agencies and Hospitals, and interested parties on September 17, 2007. The Small Business Impact Summary was available at both workshops.

Copies of the workshop minutes may be obtained by calling the Bureau of Licensure and Certification at (775) 687-4475.

There were no public comments at the Carson City or Las Vegas workshops.

Notice of public hearing regarding the Board's intent to adopt amendments was published in the Las Vegas Review Journal and Reno Gazette Journal on or before November 7, 2007. Notices of public workshops, and proposed regulations were mailed to all county libraries in Nevada, Permitted Ambulance and Fire-Fighting Agencies and Hospitals, and interested parties on November 2, 2007. The notice of public hearing was mailed to Southern Nevada Health District and Washoe County District Health Department on November 2, 2007.

Copies of the Board of Health hearing minutes may be obtained by calling the Nevada State Health Division (775) 684-4200.

2. THE NUMBER OF PERSONS WHO:

(A) ATTENDED EACH HEARING;

Approximately 50 people attended the December 7, 2007 Board of Health hearing.

(B) TESTIFIED AT EACH HEARING;

December 7, 2007 – 1.

(C) SUBMITTED TO THE AGENCY WRITTEN COMMENTS:

No written statements were submitted.

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

Comment was solicited from affected or potentially affected businesses by mailing appropriate facilities and all interested parties the proposed regulations, a small business impact questionnaire, a copy of the small business impact summary, and the notices for the workshops and Board of Health hearings.

There were no public comments at the Carson City or Las Vegas workshops

Copies of the Board of Health hearing minutes may be obtained by calling the Nevada State Health Division at (775) 684-4200.

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 State Board of Health adopted the proposed amendments to NAC 450B, “Emergency Medical Services Transfer of Patient Care” LCB File No. R138-07 with the following change:

Section 6

(f) Statement ~~[that]~~ *whether* the county or district board of health will require each hospital and provider of emergency medical services located in the county to contribute equally to the cost of carrying out the collection of data pursuant to NRS 450B.795.

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:

(A) BOTH ADVERSE AND BENEFICIAL EFFECTS; AND

Anticipated effects on the business which NAC 449 and 450B regulates:

Adverse: Additional workload and associated costs of implementing an electronic data tracking system for the waiting time between a patient’s arrival at the hospital by providers of emergency medical services and the time hospitals receive the patient for emergency treatment.

Beneficial: May assist hospitals and providers of emergency medical services in determining the causes for extended hospital waiting times.

Anticipated effects on the public:

Adverse: None

Beneficial: The beneficial impact for the general public is for hospitals to track and monitor patients arriving by providers of emergency medical service, and report on patient waiting times in excess of 30 minutes from the time of arrival at a hospital an emergency medical service to the time the hospital receives the patient for emergency treatment.

(B) BOTH IMMEDIATE AND LONG TERM EFFECTS.

Anticipated effects on the business which NAC 449 and 450B regulates:

Immediate: None

Long-term: Requires certain hospitals and providers of emergency medical services to participate in a system for the collection of hospital waiting times.

Anticipated effects on the public:

Immediate: None

Long-term: None.

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

There is no anticipated additional cost to the agency for enforcement of the proposed regulations.

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.

There is no duplication or overlap of other state or local government agency's regulations.

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

These proposed regulations do not overlap or duplicate federal regulations. The regulations do not have a counterpart in the code of federal regulations.

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.

These proposed regulations do not establish any new fees and do not increase existing.

10. 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?

These proposed regulations do not represent an economic burden for a small business, and will not restrict the formation operation or expansion of a small business.

A Small Business Impact Questionnaire was mailed to Permitted Ambulance and Fire-Fighting Agencies and Hospitals on September 17, 2007. Attached are the Small Business Impact Statement Questionnaire and the Small Business Impact Summary.