

**DIVISION OF PUBLIC & BEHAVIORAL HEALTH**  
**(Office of Public Health Informatics and Epidemiology)**  
**LCB File No. R187-18**

**Informational Statement per NRS 233B.066**

1. A clear and concise explanation of the need for the adopted regulation; Nevada Administrative Code (NAC) Chapter 441A (Infectious Diseases; Toxic Agents) provides authorities and requirements related to the investigation, reporting, prevention, and control of communicable diseases. The proposed amendments will: 1) re-align Nevada's regulations with updated national guidelines and recommendations for notifiable and reportable diseases by adding and removing reporting requirements, and 2) provide clarity by removing and cleaning up ambiguous wording and providing clear guidelines for reporting and follow-up for reportable diseases. The proposed changes to NAC 441A include the following:

- Amends to require certain public entities to provide to the health authority certain information regarding infectious diseases and exposures to certain potentially dangerous agents, and require Amends to add diseases (Chikungunya virus disease, Dengue, Carbapenem-resistant, Enterobacteriaceae, St Louis Encephalitis virus, Shiga toxin-producing Escherichia coli, Varicella, and Zika virus disease) to the list of diseases considered communicable diseases in this State and: (1) require the health authority to investigate each report of those diseases; and (2) determine certain measures to contain such infections.
- Adopts by reference certain guidelines relating to communicable diseases. Also provides that, if an Internet website on which a recommendation, guideline or publication adopted by reference ceases to exist, the recommendation, guideline or publication will be available from the Division of Public and Behavioral Health of the Department of Health and Human Services.
- Revises the period for reporting cases or suspected cases of certain communicable diseases.
- Amends this regulation to authorize a person in charge of a medical laboratory to submit culture-independent diagnostic tests to the State Public Health Laboratory or other laboratory designated by the health authority under certain circumstances.
- Amends the testing and treatment information of a TB case having or suspected of having active tuberculosis who have shown a positive reaction to a diagnostic test or completed a course of treatment for tuberculosis requires a health care provider to notify the health authority within 24 hours of discovery.
- Revises provisions concerning control of tuberculosis.
- Amends this regulation by removing requirements that a dog, cat or ferret which: (1) has not been vaccinated for rabies and has been in close contact with a rabid animal must be euthanized; and (2) has been vaccinated for rabies and has been in close contact with a rabid animal must be revaccinated. Instead requires a dog, cat or ferret that has been in close contact with a rabid animal to be managed according to certain guidelines, regardless of whether the dog, cat or ferret has been vaccinated for rabies.

- Amends regulations to prohibit certain persons who suffer from campylobacteriosis, cryptosporidiosis, Shiga toxin-producing *Escherichia coli*, giardiasis or yersiniosis and certain contacts of such persons from working in sensitive occupations for a prescribed time period. As well as authorizes the health authority to order any additional exclusion, testing or treatment of any person that the health authority determines is necessary to prevent further transmission of the infection.
  - Revises the regulation for the health authority to obtain sufficient information of only to certain cases having influenza for surveillance and reporting purposes.
  - Changes to the requirements for a case or suspected case considered to have measles to be excluded from any occupation involving frequent contact with the public.
  - Revises the period that a child who has not been immunized to measles because of a medical or religious exemption is excluded from a school or child care in which a case or suspected case considered to have measles is reported.
  - Amends the existing regulations for a health authority to also investigate each report suspected pertussis cases reported.
  - Revises the regulations purposes for which the health authority is required to investigate each report of a case having rotavirus infection.
  - Amends regulations to remove the requirement that the health authority investigates each report of a case having a severe reaction to immunization and instead requires a person who administers a vaccine to which the patient has an adverse reaction to report the adverse reaction in accordance with federal law. Also authorizes the health authority and the Division to take any action necessary to ensure compliance with this reporting requirement.
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;

Pursuant to NRS 233B.0609, the Division of Public and Behavioral Health has requested public comment during the Public Workshop which was held on September 24, 2018, at 1:00 pm in Las Vegas and Carson City through a videoconference. There were seventeen people who attended the workshop (six in Las Vegas and eleven in Carson City), eight indicated on the sign in sheet to support the proposed regulations, zero opposed and nine did not indicate a stance.

At this workshop a total of two people provided public comment, both were received from the Carson City location. One person spoke in support of the regulations only requesting modifications to the proposed regulations for clean up or clarifying language suggestions which were addressed and is reflected in the proposed R187-18. Another spoke on clarification to and impact for Varicella, Influenza and Tuberculosis changes for health facilities and reporting requirements, however no opposition to the proposed regulation was expressed during the public workshop.

How other interested persons may obtain a copy of the summary:

Any other persons interested in obtaining a copy of the summary may email, call, or mail in a request to Melissa Peek-Bullock, State Epidemiologist, at the Division of Public and Behavioral Health at:

Division of Public and Behavioral Health  
Office of Public Health Investigation & Epidemiology  
500 Damonte Ranch Parkway, Suite 657  
Reno, NV 89521  
Phone: 775-684-5285  
Email: mpeekbullock@health.nv.gov

3. A statement indicating the number of persons who attended each meeting or workshop, testified at each hearing, and submitted written statements regarding the proposed regulation. This statement should include for each person identified pursuant to this section that testified at each hearing and/or submitted written statements regarding the proposed regulation, the following information, if provided to the agency conducting the hearing or workshop:
  - a) Randal Todd
  - b) Business Address: 1001 E. 9<sup>th</sup> Street, Reno, NV 89520
  - c) Business Telephone: 775.328.2443
  - d) Electronic Mail Address: rtodd@washoecounty.us
  - e) Entity or Organization represented: Washoe County Health District
  
  - f) Susan Jacobson
  - g) Business Address: 1155 Mill St, Reno, NV 89502
  - h) Business Telephone: 775.982.5662
  - i) Electronic Mail Address: sjacobson@renown.org
  - j) Entity or Organization represented: Renown
  
3. A description of how comment was solicited (i.e., notices) from affected businesses, a summary of their response, and an explanation how other interested persons may obtain a copy of the summary.

Small business questionnaires were mailed to all licensed laboratories, hospitals, and public health authorities in Nevada on July 12, 2018. There were a total of 25 responses via electronic survey with only eighteen (18) whose organization is under 155 employees. Six (6) reported that the changes would have an adverse economic effect on their business and two (2) reported an indirect adverse effect.

### **Summary of Response**

<b>Summary Of Comments Received</b>
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<b>(25 responses were received out of 2,590 small business impact questionnaires distributed, 18 met the criteria for Small Business of less than 150 employees)</b>			
<b>Will a specific regulation have an adverse economic effect upon your business?</b>	<b>Will the regulation (s) have any beneficial effect upon your business?</b>	<b>Do you anticipate any indirect adverse effects upon your business?</b>	<b>Do you anticipate any indirect beneficial effects upon your business?</b>
Yes=6	Yes=4	Yes=2	Yes=2
No=10 No response=2	No=8 No response=6	No=9 No response=7	No=9 No response=7

<b>Number of Respondents out</b>	<b>Adverse economic effect?</b>	<b>Beneficial effect?</b>	<b>Indirect adverse effects?</b>	<b>Indirect beneficial effects?</b>
2,590	6	4	3	2

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Division of Public and Behavioral Health  
 Office of Public Health Investigation & Epidemiology  
 500 Damonte Ranch Parkway, Suite 657  
 Reno, NV 89521  
 Phone: 775-684-5285  
 Email: [mpeekbullock@health.nv.gov](mailto:mpeekbullock@health.nv.gov)

- If, after consideration of public comment, 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 regulations were modified after the public workshop processes and workgroup meetings. Most changes were related to grammar or clean up language to improve consistency. Additional changes were made as a result of recommendations from public comment and were also friendly recommendations from public, these included:

- NAC 441A.040: added Virus Disease to read *Chikungunya Virus Disease*

- NAC 441A.040- added (Chickenpox) to Varicella
  - NAC 441.350 #3- added suspected to tuberculosis infection
  - NAC 441a.375#3- added “Must receive one initial chest radiograph result, or produce documentation of baseline chest radiograph result, to exclude tuberculosis disease, upon hire.”
  - Removed new sections completely for *Pseudomonas aeruginosa*, carbapenem-resistant (CRPA) and *Acinetobacter baumannii*, carbapenem-resistant (CRAB)
  - Added new section to clarify CRE authority requirements: The health authority shall investigate within the constraints of available resources each report of a case having carbapenemase-producing Enterobacteriaceae, (CPE) in accordance with the most current CDC case definition ( (<https://wwwn.cdc.gov/nndss/conditions/carbapenemase-producing-carbapenem-resistant-enterobacteriaceae/case-definition/2018/>))\*
6. 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
  - (b) Both immediate and long term effects.

Anticipated effects on the businesses which NAC 441a regulates:

- a) The major adverse effects based which may result from the proposed changes include a potential staffing burden as relates to testing and reporting. The beneficial effects these changes include overall improvement in protecting the public of communicable diseases by improved testing and treatment policies, case identification and reduce the potential expose to diseases for business, agencies, and the community.
- b) Immediate effects of the proposed changes will include increased identification of infectious diseases within the community while the long-term benefits include being able to identify infectious disease earlier or before infectious periods to protect the public.

Anticipated effects on the public:

- a) No anticipated adverse effects on the public is anticipated. The beneficial effects on the public is early detection of communicable diseases, which results in prompt intervention, control and prevention efforts. This will help to reduce transmission and the overall health impacts on the public.
  - b) Immediate effects of the proposed changes will include increased identification of infectious diseases among the public. The long-term benefits include the ability for early detection of disease to reduce transmission.
7. The estimated cost to the agency for enforcement of the proposed regulation.  
There is no cost is expected to enforce this regulation to the agency.
8. 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.

The proposed regulations do not overlap or duplicate other government or federal agencies.

9. If the regulation includes provisions which are more stringent than a federal regulation which regulates the same activity, a summary of such provisions; and  
The proposed regulations are not more stringent than federal regulations.
10. If the regulation establishes a new fee or increases an existing fee, a statement indicating the total annual amount the agency expects to collect and the manner in which the money will be used.  
The proposed regulations will not create a new fee or an existing fee.

**NOTE: The Informational statement is essential. If this statement is not included with the final regulations or is incomplete or inaccurate, LCB will return the regulation to the agency. Unless a statement is supplied, the LCB will not submit the regulation to the Legislative Commission, and the regulation never becomes effective (NRS 233B.0665).**