

**UNSOLICITED**  
**EXECUTIVE AGENCY**  
**FISCAL NOTE**

AGENCY'S ESTIMATES

Date Prepared: May 1, 2023

Agency Submitting: Department of Health and Human Services, Public and Behavioral Health

<b>Items of Revenue or Expense, or Both</b>	<b>Fiscal Year 2022-23</b>	<b>Fiscal Year 2023-24</b>	<b>Fiscal Year 2024-25</b>	<b>Effect on Future Biennia</b>
Permit Fees (Revenue)			(\$22,512)	(\$22,512)
Legal Fees (Expense)		\$8,000		
Publications (Expense)		\$24,750		
Training (Expense)			(\$10,672)	(\$10,672)
Division Cost Allocation (Expense)			(\$2,260)	(\$2,260)
Total	0	\$32,750	(\$9,580)	(\$9,580)

Explanation

(Use Additional Sheets of Attachments, if required)

Currently, a permit to operate an ambulance service, ground or air expires June 30 of each year. Renewal applications are due to the EMS office 30 days before expiration to allow time for the EMS office to process the applications prior to July 1. This bill would move expiration dates to 2 years based on certain factors. This bill would remove the annual fees collected for the permit renewal as well as the fee charged for each permitted vehicle associated with the permit and move them to once every 2 years. Current permit renewal fee is \$120.00 per agency and \$23.00 per vehicle. At present, there are 68 agencies permitted through the EMS office with 624 vehicles associated with the 68 agencies for a revenue amount of \$22,512 per biennium. This is based on current numbers from a budget that is a general fund budget account. Decrease in revenue generated from the regulated agencies will have a negative effective on an already narrow budget requiring an increase in funding from public funds to enable operations to continue at current levels. These numbers do not account for permits and vehicles issued through the Southern Nevada Health District Office of EMS and Trauma Centers. The EMS Advisory board is currently conducting a survey to determine permit fees charged by other states with the goal of increasing annual permit fees to better support operations of the EMS office. The bill stipulates that the biennial renewal would begin July 1, 2024; therefore, any fiscal impact would affect the program in Year 2 of the biennium. It is projected that the agency would see a loss in revenue of \$22,512, a loss in training funds of \$10,672, and a reduction of \$2,260 for indirect paid to Budget Account 3223 in FY 2025 and every other year thereafter. It would also result in regulation and publication costs in Year 1 of \$32,750.

Name Kitty DeSocio

Title PH ASO IV

State of Nevada - Budget Division  
 NEBS210 - Line Item Detail & Summary

2023-2025 Biennium (FY24-25)

Budget Account: 3235 HHS-DPBH - EMERGENCY MEDICAL SERVICES

Section A1: Line Item Detail by GL

Item No	Description	2021-2022	2022-2023	2023-2024	2024-2025
<b>E127 ECONOMIC OPPORTUNITY &amp; SKILLED WORKFORCE</b>					
[See Attachment]					
<b>REVENUE</b>					
3601	LICENSES AND FEES	0	0	0	-22,512
	TOTAL REVENUES FOR DECISION UNIT E127	0	0	0	-22,512
<b>EXPENDITURE</b>					
<b>04 OPERATING EXPENSES</b>					
7080	LEGAL AND COURT	0	0	8,000	0
7370	PUBLICATIONS AND PERIODICALS	0	0	24,750	0
	TOTAL FOR CATEGORY 04	0	0	32,750	0
<b>10 TRAINING - EMS</b>					
8500	AID TO NEVADA GOVERNMENTAL UN	0	0	0	-10,672
	TOTAL FOR CATEGORY 10	0	0	0	-10,672
<b>82 DIVISION COST ALLOCATION</b>					
7398	DIVISION COST ALLOCATION	0	0	0	-2,260
	TOTAL FOR CATEGORY 82	0	0	0	-2,260
	TOTAL EXPENDITURES FOR DECISION UNIT E127	0	0	32,750	-12,932
	TOTAL REVENUES FOR BUDGET ACCOUNT 3235	0	0	0	-22,512
	TOTAL EXPENDITURES FOR BUDGET ACCOUNT 3235	0	0	32,750	-12,932



**Resources needed to carry out the action:**

Staff to program license management system with changes, increase in budget to offset anticipated revenue loss. The change would affect multiple administrative code and revised statutes.

Notification in change of ownership at least 90 days after the change presents obstacles to change and collection of data relevant to the permitted agency. This also affects the ability for the agency to have a valid permit after sale or transfer of ownership. It could affect billing insurance agencies for services, including, private, Medicare and Medicaid. Agencies struggle to update their personnel rosters which is key in billing for services. Consideration of increase in audits to verify vehicles in the agency fleet, any changes to protocols which are normally done during permit renewals. In addition, agencies are required to have an agreement including fees with the Nevada Department of Transportation (NDOT) for access into the Nevada Shared Radio System (NSRS). The NSRS is used by the emergency responders to communicate with the hospitals across the state, in the event of a large-scale event hospitals could talk to each other, responders can communicate with other agencies. Access to the system includes validation by the EMS office to NDOT the agency is authorized to operate. Permitting of an ambulance or fire service for EMS requires submission of fingerprints of corporate officers that are submitted to Department of Public Safety for a background check.

**Current Renewals on Annual Basis**

Renewal Fee	Agency	Vehicle
Amount	\$ 120.00	\$ 23.00
Amount	68	624
Total Cost	\$ 8,160.00	\$ 14,352.00
Combined Cost		\$ 22,512.00
4 years		\$ (45,024.00)

#### **NAC450B.540**

**Item to address** – the BDR allows for the new owner of an agency not more than 90 days before notifying the Division of change of ownership.

This NAC currently reads in part: . A permit is not transferable. For the purpose of this subsection, if a permit is issued to a corporation or other business entity, a transfer of 50 percent or more of the voting shares or equitable ownership of the corporation or business entity shall be deemed a transfer of the permit.

#### **NAC 450B.505**

**Item to address** - the BDR allows for the new owner of an agency not more than 90 days before notifying the Division of change of ownership

1. Each service providing emergency care must: (a) Apply for and receive a permit from the Division; and 9. The Division shall impose against a service that provides emergency care without a permit an administrative penalty of: (c) For services provided on or after July 1, 2019, \$500 per day.

#### **NAC 450B.580**

**Item to address** - the BDR allows for the new owner of an agency not more than 90 days before notifying the Division of change of ownership

2. Each ambulance, air ambulance or agency's vehicle must be equipped with equipment that provides two-way radio communications which provides an attendant with communication 24 hours a day for dispatch and medical information. At least one radio must operate on any frequency allocated by the Federal Communications Commission for transmission of medical communications and, if not using the Nevada Shared Radio System, must contain all of the features incorporated in the state radio system for emergency medical services. 7. The operator of a service providing ground response shall maintain at least one ambulance or agency's vehicle in a fully operational condition 24 hours per day, 7 days per week. If the operator of a service is unable to provide such service because of an inoperative ambulance or agency's vehicle, the operator shall notify the Division of that fact at the earliest possible time, but not later than 48 hours after the unit becomes inoperative.

#### **NAC 450B.578**

**Item to address** - the BDR allows for the new owner of an agency not more than 90 days before notifying the Division of change of ownership.

**Ambulance, air ambulance or agency's vehicle: Communication with and agreement by hospital. (NRS 450B.120, 450B.130)** An ambulance, air ambulance or agency's vehicle which is to be used to provide basic, intermediate or advanced emergency care must be equipped for 24-hour communication by radio with a hospital, and the hospital must agree to:

1. Have its emergency department supervised 24 hours a day by:
  - (a) A physician or advanced practice registered nurse; or
  - (b) A physician assistant or registered nurse supervised by a physician. The physician must be available in the hospital or be able to be present in the hospital within 30 minutes.
2. Record on a recordable telephone line, magnetic tape or digital disc all transmissions between the hospital and the ambulance or agency's vehicle regarding care of patients, and retain the recordings for at least 90 days, if the recordings are not retained at a regional dispatch center.
3. Make available to the medical director of the service or the Division the recordings concerning patients for the purposes of auditing performance and investigating any alleged violation of this chapter by

an ambulance or air ambulance service or one of its attendants or registered nurses if requested within 90 days after an event.

4. Provide the emergency medical technicians, advanced emergency medical technicians, paramedics and registered nurses with an opportunity for regular participation in continuing education.

5. Include the report of emergency care in the medical record of the hospital for each patient.

#### **NAC 450B.620**

**Item to address** – the BDR allows for the new owner of an agency not more than 90 days before notifying the Division of change of ownership

#### **Requirement to file list of ambulances, air ambulances or agency's vehicles; maintenance of record on report of emergency care; penalty for failure to comply. ([NRS 450B.120](#), [450B.130](#), [450B.900](#))**

1. Each holder of a permit to operate a service shall file with the Division a list of all ambulances, air ambulances or agency's vehicles operated pursuant to the permit. The list must contain the same information as is required to be submitted with an application for a permit.

2. The operator shall file an amended list of his or her ambulances or agency's vehicles with the Division before any such unit is placed in or removed from the service.

3. The operator of such a service shall maintain a record of each patient on the report of emergency care in a format approved by the Division. In addition to the information required in [NAC 450B.766](#), the record must include, without limitation, the information required by the National Emergency Medical Services Information System and any other information required by the Division.

4. The completed report of emergency care must contain accurate information and be available to the receiving facility within 24 hours after the patient's arrival.

5. Each service shall submit:

(a) The information required by subsection 3 and [NAC 450B.766](#) to the Division in a format approved by the Division. The information submitted may be used for compiling statistics.

(b) The information required by the National Emergency Medical Services Information System in a format approved by the Division.

6. The Division shall impose against a service that fails to comply with the requirements of this section an administrative penalty of:

(a) For a violation committed on or after January 27, 2017, and before July 1, 2018, \$100;

(b) For a violation committed on or after July 1, 2018, and before July 1, 2019, \$150; and

(c) For a violation committed on or after July 1, 2019, \$200,

Ê for each quarter in which a violation occurs.

[Bd. of Health, Ambulance Reg. §§ 11.002 & 12.001, eff. 12-3-73; A and renumbered as §§ 11.1-11.3.1, 2-28-80]—(NAC A 10-14-82; 8-22-86; 8-1-91; R045-97, 10-30-97; R182-01, 3-5-2002; R024-14, 10-24-2014; R068-16, 1-27-2017)