

**PROPOSED REGULATION OF THE
STATE BOARD OF HEALTH**

LCB File No. R145-11

NAC 439.500 Fees and donations for provision of services and medications. (NRS 439.150, 439.200)

1. For a client ~~[who is able to pay and]~~ who does not qualify pursuant to 42 U.S.C. §§ 300 et seq. for services and ~~[medications]~~ *supplies* concerning family planning, the *fee to be charged and collected by the [Bureau of] Community Health Nursing Clinics* of the Health Division of the Department of Health and Human Services ~~[shall charge and collect the following fees for the]~~ *for such* services and ~~[medications]~~ *supplies* provided by a nurse of the ~~[Bureau]~~ *Division is the fee listed in the sliding fee scale[-]. The fee varies according to the annual gross income of the household of the client in comparison to the level of poverty designated for a household of that size by the United States Department of Health and Human Services. The sliding fee schedule is established by a cost analysis and will be updated no less than required by Federal Generally Accepted Accounting Principles (GAAP) or completed every 2 years on the even year, or as needed to cover modifications to the nursing program. Notice of fee changes will be submitted for approval to the State Board of Health at the time nearest to completion of the cost analysis. The fee schedule or any information on fees will be given to anyone who requests such information.*

~~[-~~

	Annual Gross Income of Household (As Percentage of Federal Poverty Level)	
Services and medications	Category I	Category II
	<250%	≥250%
Administering a vaccine against influenza, other than hemophilus B influenza, in addition to the cost of the vaccine.....	—————\$15	—————\$20
Administering a vaccine against pneumonia using a vaccine other than Pneumococcal Conjugate Vaccine 7-Valent (PCV7), in addition to the cost of the vaccine.....	—————15	—————20
Administering a vaccine against both influenza, other than hemophilus B influenza, and pneumonia using a vaccine other than Pneumococcal Conjugate Vaccine 7-Valent (PCV7), in addition to the cost of the vaccine....	—————15	—————20
Administering an injection prescribed by a physician and provided by a client.....	—————15	—————20

Services and medications	Annual Gross Income of Household (As Percentage of Federal Poverty Level)	
	Category I <250%	Category II ≥250%
Providing and administering an immunization for a child who is less than 20 years of age against one or more diseases that may be prevented with a vaccine, such as diphtheria, polio, measles, mumps, rubella, pertussis, tetanus, hemophilus B influenza, chicken pox (varicella), Pneumococcal Conjugate Vaccine 7 Valent (PCV7) for pneumonia and others as may be available.....	15	20
Providing and administering an immunization for a person who is 20 years of age or older against one or more diseases that may be prevented with a vaccine, such as diphtheria, polio, measles, mumps, rubella, tetanus, hemophilus B influenza, chicken pox (varicella) and others as may be available.....	15	20
Providing and administering a hepatitis A vaccine or hepatitis B vaccine, or a combination thereof, to a person who is eligible to receive the vaccine free of charge pursuant to any program of the State or Federal Government.....	15	20
Administering a hepatitis A vaccine or hepatitis B vaccine, or a combination thereof, to a person who is not otherwise eligible to receive the vaccine free of charge pursuant to any program of the State or Federal Government, in addition to the cost of the vaccine.....	\$15	\$20
Providing a duplicate immunization record after providing an initial record.....	10	10
Administering immune globulin or hepatitis B immune globulin, when ordered by a physician as prophylaxis following exposure to an infectious disease, in addition to the cost of the vaccine.....	15	20
Performing a physical examination of one system..	26	39
Performing a physical examination of an adult, including, but not limited to, an examination of height, weight, heart, lungs, vision, hearing and reflexes, and completing any form.....	40	60

Services and medications	Annual Gross Income of Household (As Percentage of Federal Poverty Level)	
	Category I <250%	Category II ≥250%
Performing a physical examination of a child, including screening of developmental status, height, weight, hemoglobin, counseling concerning diet, sleep, elimination, growth and development, and completing any report to a child care facility or school.....	40	60
Performing a physical examination of an infant, including a physical and developmental evaluation of the infant and parental counseling and education, per year.....	40	60
Performing a physical examination to screen for cancer, including a pap smear and examination of the breasts, screening for testicular cancer and screening for colorectal cancer.....	60	90
Performing a colposcopy examination to screen for cancer.....	90	120
Performing an endometrial biopsy to screen for cancer.....	85	100
Performing a cervical biopsy and endocervical curettage to screen for cancer.....	44	66
Performing cryosurgery procedures for dysplasia...	\$63	\$126
Performing ongoing screening of an adult, including necessary surveillance and counseling, checking blood pressure and screening for, without limitation, chronic illness, diabetes, hypertension, obesity, complications of pregnancy, lung disease and heart disease, per year.....	45	60
Testing the skin of a person for tuberculosis using a Purified Protein Derivative (PPD).....	20	25
Testing and counseling for Human Immunodeficiency Virus.....	30	45
Testing and counseling for a sexually transmitted disease other than Human Immunodeficiency Virus, in addition to the cost for the laboratory analysis.....	27	44
Testing, other than pregnancy testing, or collection of specimen not specified in this table, in addition to the cost for the laboratory analysis...	7	10

Services and medications	Annual Gross Income of Household (As Percentage of Federal Poverty Level)	
	Category I <250%	Category II ≥250%
Dispensing and providing instruction in the use of medication, in addition to the cost of the medicine provided, per medication.....	15	20
Direct professional nursing service by community health nurse:		
Registered Nurse (CHN II), per hour.....	45	85
Advanced Practitioner of Nursing (CHN III), per hour.....	50	90
Administering medication or providing instruction in the use of antibiotic medication for sexually transmitted diseases, in addition to the cost of the medicine provided.....	20	30
Providing instruction for the control of parasites, in addition to the cost of the medicine provided.....	15	20
Processing a check returned for insufficient funds..	25	25
Completing a form or record upon the request of a person relating to the health of that person, when a physical examination is not required.....	15	20
Vaccines:		
Hepatitis A, per dose.....	20	25
Hepatitis B, per dose.....	30	35
Hepatitis A and B combination.....	50	60
Influenza, other than vaccine for hemophilus B influenza.....	\$10	\$20
Pneumonia, other than Pneumococcal Conjugate Vaccine 7 Valent (PCV7).....	15	20
Laboratory Tests:		
Chlamydia screening: Gen Probe.....	12	24
Chlamydia screening: Urine test Nucleic Acid Amplification Tests (NAATS).....	24	48
Gonorrhea cocci: Gen Probe.....	12	24
Gonorrhea cocci: Urine test Nucleic Acid Amplification Tests (NAATS).....	24	48
Blood test for syphilis Reactive Plasma Reagent (RPR).....	12	24
Test for Human Immunodeficiency Virus (HIV) antibody.....	15	30
Hepatitis A, B or C analysis.....	18	28

Services and medications	Annual Gross Income of Household (As Percentage of Federal Poverty Level)	
	Category I <250%	Category II ≥250%
Hematocrit or hemoglobin.....	8	12
Pertussis.....	65	85
Fecal occult blood.....	8	12
Urinalysis (reagent strip).....	8	12
Drawing fee for venipuncture.....	8	14
Laboratory tests, other than those listed above or performed in conjunction with an annual or initial examination.....	8	12]

2. For a client described in subsection 1 who ~~is not able to pay a fee listed in subsection 1, the Bureau of Community Health;~~ *has a household income of less than 100 percent of the federal poverty level, the Community Health Nursing Clinics*

~~[(a) May]~~ may not deny the services or ~~[medications]~~ *supplies* provided by a nurse of the ~~[Bureau]~~ *Division* to the client. ~~;~~ *and*

~~—(b) Shall ask the client to make a donation to help cover the cost of the service or medication.]~~

3. For the purposes of this section, except as otherwise provided in subsection 2, the ~~[Bureau]~~ *Clinic* shall charge a client described in subsection 1 the fees listed in ~~[-:]~~ *the sliding fee scale.*

~~[(a) Category I if]~~ *If* the annual gross income of the household of the client *described in subsection 1* is ~~[less]~~ *greater* than ~~[250]~~ *100* percent of the poverty level designated *for a household of that size* by the United States Department of Health and Human Services, ~~the Community Health Nursing Clinics may deny services or supplies for continued nonpayment of the fee.~~

~~[(b) Category II if the annual gross income of the household of the client is at least 250 percent of the poverty level designated by the United States Department of Health and Human Services.]~~

4. For the purposes of this section, a teenager is considered a household of one.

~~[4.]~~ *5.* As used in this section, “household” means an association of persons who live together as a single economic unit, regardless of whether they are related.

(Added to NAC by Bd. of Health, eff. 10-14-82; A 7-16-85, eff. 8-1-85; 1-31-90; 9-6-91; 9-1-93; R038-97, 10-30-97; R118-03, 12-4-2003)

NAC 442.222 Fees and donations for certain services and supplies concerning family planning. (NRS 439.150, 439.200)

1. For a client who qualifies pursuant to 42 U.S.C. §§ 300 et seq. for services and supplies concerning family planning, the fee ~~[-, if any,]~~ to be charged and collected by the ~~[Bureau of]~~ Community Health *Nursing Clinics* of the Health Division of the Department of Health and Human Services for such services and supplies provided by a nurse of the ~~[Bureau]~~ *Division* is the fee listed in the ~~[table below]~~ *sliding fee scale*. The fee varies according to the annual gross income of the household of the client in comparison to the level of poverty designated for a household of that size by the United States Department of Health and Human Services. *The*

sliding fee schedule is established by a cost analysis and will be updated no less than required by Federal Generally Accepted Accounting Principles (GAAP) or completed every 2 years on the even year, or as needed to cover modifications to the nursing program. Notice of fee changes will be submitted for approval to the State Board of Health at the time nearest to completion of the cost analysis. The fee schedule or any information on fees will be given to anyone who requests such information.

Service or Supply	Annual Gross Income of Household (As Percentage of Federal Poverty Level)			
	101% to 125%	>125% to 150%	>150% to 250%	>250%
Visits to clinic:	-	-	-	-
— Initial or annual visit, with pap smear	\$45	\$55	\$75	\$102
— Problem return visit, repeat pap smear, in addition to cost of laboratory analysis	25	35	45	55
— Problem return visit, colposcopy, in addition to cost of cervical biopsy	30	60	90	120
— Problem return visit, cervical biopsy (each)	50	55	60	65
— Problem return visit, pelvic examination only	25	35	45	55
— Problem return visit, no testing	25	35	45	55
— Mini-exam (physical exam and pap smear done by private medical doctor), in addition to cost of laboratory analysis	25	35	45	55

Service or Supply	Annual Gross Income of Household (As Percentage of Federal Poverty Level)			
	101% to 125%	>125% to 150%	>150% to 250%	>250%
-	-	-	-	-
-	-	-	-	-
-	101% to 125%	>125% to 150%	>150% to 250%	>250%
-	-	-	-	-
— Check for infection and pelvic examination, in addition to cost of laboratory analysis	27	54	81	107
-	-	-	-	-
— Physician consultation	30	35	40	45
-	-	-	-	-
— Pregnancy testing and counseling	10	20	30	40
-	-	-	-	-
— Direct professional nursing service:				
— Community health nurse (per hour)	25	45	45	85
— Nurse practitioner (per hour)	30	50	50	90
-	-	-	-	-
— Administrative surcharge for billing if fees are not collected at time of service	5	7	9	11
-	-	-	-	-
— Counseling and education	15	20	25	30
-	-	-	-	-
— Brief office visit	10	16	22	28
-	-	-	-	-
— Returned check charge	25	25	25	25
-	-	-	-	-
— Transfer of records	5	5	5	5
-	-	-	-	-
— Fitting of diaphragm	26	34	42	50
-	-	-	-	-
— Fitting of cervical cap	26	34	42	50
-	-	-	-	-
— Surgical procedure for insertion of birth control implant, including cost of device	121	242	363	485
-	-	-	-	-
— Surgical removal of birth control implant	121	242	363	485

Service or Supply	Annual Gross Income of Household (As Percentage of Federal Poverty Level)			
	101% to 125%	>125% to 150%	>150% to 250%	>250%
-	-	-	-	-
-	-	-	-	-
-	101% to 125%	>125% to 150%	>150% to 250%	>250%
-	-	-	-	-
-	-	-	-	-
— Insertion of intrauterine device, in addition to cost of device	40	50	60	75
-	-	-	-	-
— Removal of intrauterine device not with insertion	40	50	60	70
-	-	-	-	-
— Treatment of condylomata (genital warts), in addition to cost of medication	25	50	75	100
-	-	-	-	-
— Treatment of dysplasia with cryosurgery	63	84	105	126
-	-	-	-	-
— Pelvic examination for pregnancy	15	30	45	60
-	-	-	-	-
— Vasectomy assessment, counseling and referral	50	55	60	65
-	-	-	-	-
Laboratory tests, other than those performed in conjunction with annual/initial exam:-				
-	-	-	-	-
— Hematocrit/Hemoglobin	6	8	10	12
-	-	-	-	-
— Gonorrhea cocci: Gen-Probe	12	16	20	24
-	-	-	-	-
— Gonorrhea cocci: Urine test —Nucleic Acid Amplification Test (NAAT)	24	36	48	60
-	-	-	-	-
— Gonorrhea pharyngeal swab	46	51	56	61
-	-	-	-	-
— Gonorrhea rectal culture	78	83	88	93

Service or Supply	Annual Gross Income of Household (As Percentage of Federal Poverty Level)			
	101% to 125%	>125% to 150%	>150% to 250%	>250%
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
—Wet smear	6	12	18	24
-	-	-	-	-
—Pap smear:	-	-	-	-
—Single slide	22	24	26	28
—Double slide	44	48	52	56
—Thin prep	30	35	40	45
-	-	-	-	-
—Urinalysis (reagent strip)	6	12	18	24
-	-	-	-	-
—Blood test for syphilis, in addition to cost of venipuncture	6	12	18	24
-	-	-	-	-
—Test for human immunodeficiency virus antibody, in addition to cost of venipuncture	8	16	24	32
-	-	-	-	-
—Chlamydia screening: Gen-Probe	12	16	20	24
-	-	-	-	-
—Chlamydia screening: Urine test—Nucleic Acid Amplification Tests (NAATS)	24	36	48	60
-	-	-	-	-
—Human Papilloma Virus (HPV) typing	85	90	95	100
-	-	-	-	-
—Testing or collection of specimen for other sexually transmitted diseases	12	22	33	44
-	-	-	-	-
—Drawing fee for venipuncture	8	10	12	14
-	-	-	-	-
—Endometrial biopsies and other biopsies	85	90	95	100
-	-	-	-	-

Service or Supply	Annual Gross Income of Household (As Percentage of Federal Poverty Level)			
	101% to 125%	>125% to 150%	>150% to 250%	>250%
-	-	-	-	-
-	-	-	-	-
-	101% to 125%	>125% to 150%	>150% to 250%	>250%
-	-	-	-	-
Contraceptive supplies:	-	-	-	-
-	-	-	-	-
— Intrauterine devices:				
Mirena	355	365	380	407
Paraguard	175	195	215	235
-	-	-	-	-
— Birth control pills, per cycle	7	9	11	13
-	-	-	-	-
— Emergency contraception kit	7	9	11	13
-	-	-	-	-
— Contraceptive injection of Depo-Provera or Lunelle, in addition to cost of visit to office	26	31	36	41
-	-	-	-	-
— Condoms (per package of 12)	6	7	8	9
-	-	-	-	-
— Diaphragm	20	25	30	35
-	-	-	-	-
— Contraceptive foam or jelly for diaphragm	6	7	8	9
-	-	-	-	-
— Contraceptive sponge (per package of 4)	12	14	16	18
-	-	-	-	-
— Contraceptive film (per box of 12)	9	10	11	12
-	-	-	-	-
— Contraceptive vaginal suppositories	10	12	14	16
-	-	-	-	-
— Cervical cap	18	22	33	45
-	-	-	-	-
— Contraceptive NuvaRing (each)	28	32	36	40
-	-	-	-	-
— Contraceptive patch, Ortho Evra (each)	15	19	23	27

Service or Supply	Annual Gross Income of Household (As Percentage of Federal Poverty Level)			
	<101% to 125%	>125% to 150%	>150% to 250%	>250%
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
- Basal thermometer	7	10	13	16
-	-	-	-	-
- Other nonprescriptive supplies	2	3	4	5
-	-	-	-	-
- Book on natural family planning	4	7	10	15
-	-	-	-	-
Other medications and services:	-	-	-	-
-	-	-	-	-
- Medicine for gonorrhea infection	21	25	29	33
-	-	-	-	-
- Medicine for chlamydia infection	15	19	23	27
-	-	-	-	-
- Vaginal medication	20	22	24	26
-	-	-	-	-
- Medicine for parasites	6	7	8	9
-	-	-	-	-
- Medicine for other infections	10	13	17	20

2. *For a client described in subsection 1 who* ~~[If the annual gross income of the household of a client described in subsection 1 is]~~ *has a household income of* less than ~~[101]~~ **100** percent of the ~~[level of]~~ **federal** poverty **level**, ~~[designated for a household of that size by the United States Department of Health and Human Services,]~~ the ~~[Bureau]~~ **Community Health Nursing Clinics** may not charge a fee to the client for services or supplies provided by a nurse of the ~~[Bureau]~~ **Division** for matters related to family planning. ~~[The Bureau shall ask such a client to make a donation to help defray the cost of the services or supplies that the client has received.]~~ A client who is required to pay a fee pursuant to this section may *not* be denied services or supplies for continued nonpayment of the fee.

3. For the purposes of this section, a teenager is considered a household of one.

4. As used in this section, “household” means an association of persons who live together as a single economic unit, regardless of whether they are related.

(Added to NAC by Bd. of Health, eff. 10-14-82; A 7-16-85, eff. 8-1-85; 2-18-88; 12-15-88; 1-31-90; 5-19-92; 9-1-93; 10-30-97; R119-03, 12-3-2003)

Small Business Impact Statement
Proposed Permanent Regulations – NAC 439.500 and NAC 442.222
(Prepared Pursuant to Nevada Revised Statutes 233B.0608)

Pertaining to

Proposal to Adopt (Permanent/Temporary) Regulations Under Nevada Administrative Code NAC 439.500 & 442.222; Petitions pertaining to Administration of Public Health and Maternal and Child Health; Abortion

Background

1. A description of the manner in which comment was solicited from affected small businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary.

In November 2011, the Nevada State Health Division (NSHD), Public Health and Clinical Services (PHCS), mailed Small Business Impact Questionnaires to all providers in the rural communities. The providers were also provided the proposed changes to NAC 439.500 and 442.222, and the Notice of Public Workshop.

The notices were sent to 209 providers, and one was returned. There will be no adverse effects on that small business.

To assure community members and providers were aware of the requested changes in NAC and allowing for their opportunity to respond to the questionnaire, notices were placed in community libraries, the Nevada State Library, county health offices, and the Nevada State Health Division's website. The Nevada State Health Division's website also states how interested persons may obtain a copy of the summary.

2. The estimated economic effect of the proposed regulation on the small business which it is to regulate including without limitation both adverse and beneficial effects and both direct and indirect effects.

In the initial review and consideration of the estimated economic effect of the proposed regulations on small businesses, it was determined there would be no or very little impact for adverse – beneficial or direct – indirect effects.

The Small Business Impact Questionnaire supported this presumption. Out of the one (1) Small Business Impact Questionnaires received, it showed no impact at all. Please refer to the response in Question #3 which illuminates why there is no impact.

3. A description of the methods that Nevada State Health Division considered to reduce the impact of the proposed regulation on small businesses and statement regarding whether the agency actually used those methods.

While drafting the proposed changes to NAC 439.500 and NAC 442.222 there did not appear to be a concern of impact on small business. The NSHD Community Health Nursing (CHN) Program tends to serve those individuals with lower incomes, no economic resources and no insurance. Community small businesses that provide family planning, OB/GYN and other related medical services charge a fee; for those patients who have limited resources and are unable to pay, referrals are made to the NSHD CHN Program for services. In as much as the private provider small business rarely provides a free service to patients, there was not a need to create a method to reduce impact.

4. The estimated cost to the agency for enforcement of proposed regulations.

It is anticipated there will be little cost to the agency for the enforcement of these proposed regulations. It is actually anticipated there will be a savings if the proposed changes to NAC are approved. Title X (a Family Planning Grant) requires a cost analysis to be performed every two to three years to reflect the cost of providing services to community patients. This is an essential federal requirement to maintain grant funding. As NAC is currently written, the CHN Program would be required to go through the costly procedure (estimated at \$8,500) every two to three years to be in compliance with and maintain grant funding from Title X. The proposed changes in NAC will allow CHN staff to perform the cost analysis every two to three years to determine the true costs of providing services in the rural communities without going through the Legislative Counsel Bureau. Changes to fees for services provided would be updated and sent to the NSHD Administrator for review, then would have to be approved by the Nevada State Board of Health for the public hearing.

5. Total amount the Health Division expects to collect from any fees and the manner in which the money will be used.

It is not anticipated that NSHD will collect substantially increased fees. Any funds that may be collected will be used to defray expenses of the CHN Program in providing services to low income families in the rural areas of the state.

6. An explanation of why any duplicative or more stringent provisions than federal, state or local standards regulating the same activity are necessary.

The provisions suggested in NAC 439.500 and NAC 442.222 are to meet the specified regulatory requirements of the Federal standards. Not meeting these standards jeopardizes the CHN Program's ability to sustain its largest monetary grant and impedes the program's ability to provide needed public health services to the underserved rural population of Nevada.