

Community Paramedicine Compliance Agreement

May 31, 2016

This Community Paramedicine Compliance Agreement is agreed upon by the Nevada State EMS Program, Nevada Division of Public and Behavioral Health (DPBH), and the State Board of Health.

The goal is to allow Nevada permitted ambulance, air ambulance, and fire-fighting services and their employed or volunteer emergency medical providers to conduct community paramedicine services. This compliance agreement will allow permitted services to apply through an application process to the Nevada State EMS Program to receive a community paramedicine endorsement on their service permit and for emergency medical providers to apply through an application process to receive a community paramedicine endorsement on their certificate.

Assembly Bill (AB) 305, allows for Nevada permitted services to conduct community paramedicine services.

“Community paramedicine services” means services provided by an emergency medical technician, advanced emergency medical technician or paramedic to patients who do not require emergency medical transportation and provided in a manner that is integrated with the health care and social services resources available in the community.

Section 22 of LCB file No. R024-14A 2015. NAC 450B.230 is hereby amended to read as follows: 450B.230 “Service” means an organization which provides ambulance or air ambulance service or which provides units upon request or to provide coverage for a special event, including, without limitation, a fire-fighting agency issued a permit by the Division or a volunteer service, whether or not the service is conducted pursuant to a business license issued by a local government.

“Emergency medical provider” means an emergency medical technician, advanced emergency medical technician or paramedic. Also known as an attendant.

Community Paramedicine: Authorized Activities.

- 1) A Nevada permitted service or attendant who holds an endorsement to provide community paramedicine services may perform activities as approved by the medical director of the permitted service and as outlined in the current community paramedicine procedures and protocols.
 - a) The current community paramedicine procedures and protocols of the permitted service shall be kept on file with the Division.
 - b) An attendant with an endorsement to provide community paramedicine must not exceed their current certified scope of practice.
- 2) The scope of the community paramedicine services that may be provided by an emergency medical provider who is employed by or serves as a volunteer for the holder of the permit must not include any services that are outside the scope of practice of the emergency medical provider. The scope may include, but is not limited to, episodic assessment, care, intervention, care based on care plans developed by practitioners and/or physicians, helping a recently discharged hospital patient reestablish themselves at home, and medication reconciliation.

Through this compliance agreement, each attendant who is applying to conduct community paramedicine services shall currently be certified as a Nevada emergency medical technician, advanced emergency medical technician, or paramedic; and be affiliated with a permitted service that is permitted to provide community paramedicine services.

This compliance agreement is in effect until regulations have been adopted into Nevada Administrative Code (NAC) 450B.

An endorsement on a service permit to provide community paramedicine services will expire on the same date as the permit and is renewable annually thereafter through the prescribed renewal process.

An endorsement on an attendant certificate to provide community paramedicine services will expire on the same data as the certificate and is renewable thereafter through the prescribed renewal process.

VIOLATIONS

AB 305 prohibits a person or governmental entity from providing community paramedicine services without a currently valid permit with an endorsement which authorizes the provision of such services and make a violation a misdemeanor (NRS 450B. 900).

AB 305 prohibits an emergency medical technician, advanced emergency medical technician, or paramedic from providing community paramedicine services unless the person meets certain requirement and make a violation a misdemeanor (NRS 450B.900).

APPLICATION PROCESS

Through this compliance agreement, each Nevada permitted service who is applying to conduct community paramedicine services must provide the following before a community paramedicine endorsement on a permit will be provided:

- Completed Community Paramedicine Permit Endorsement Application.

The Community Paramedicine Permit Endorsement Application will include the following:

- A community paramedicine permit application shall include a statement of intent which will encompass the following:
 - 1) Level of care provided by community paramedicine providers;
 - 2) Services provided within the community paramedicine program;
 - 3) The scope of the community paramedicine services that may be provided by an emergency medical provider who is employed by or serves as a volunteer for the holder of the permit. The scope must not include any services that are outside the scope of practice of the emergency medical provider. The scope may include, but is not limited to, episodic assessment, care, intervention, care based on care plans developed by practitioners and/or physicians, helping a recently discharged hospital patient reestablish themselves at home, and medication reconciliation.
 - 4) Letter of support from the agency medical director;
 - 5) Evidence of a patient charting system;
 - 6) List of community paramedicine vehicles;
 - 7) Evidence that this program will not negatively impact emergency response capabilities;
 - 8) Approved community paramedicine protocols by the agency medical director; and

9) A statement agreeing to provide quarterly reports to the Division.

- Quarterly Reports shall include the following:
 - 1) Number of patients served by community emergency medical services.
 - 2) A continuous quality improvement program, and maintains a fraud, waste and abuse prevention program.
 - 3) Number of avoided ambulance transports, avoided emergency department visits and avoided hospital admissions/readmissions due to community emergency medical services.

The following shall be completed before a community paramedicine endorsement on a certificate will be provided:

- Completed Community Paramedicine Provider Endorsement Application;
- Record of completion of a community paramedicine training course in accordance with the Division.

This compliance agreement extends until 90 days after the effective date of regulations adopted by the Board of Health.

Name of Nevada Permitted Service: _____

Name of Service Authorized Representative: _____

Title of Service Authorized Representative: _____

Signature of Service Authorized Representative: _____ Date: _____

Signed: _____
Cody L. Phinney, MPH, Administrator, DPBH

Date: _____

Signed: _____
Brian Saeman, Vice-Chairman, State Board of Health

Date: _____

We confirmed the following entities are interested in Compliance Agreement Community Paramedicine for the June Board of Health:

- Carson City Fire Dept.
- City of Elko Fire Dept.
- Air Care One
- Tahoe Douglas Fire Protection District
- Reno Fire Department
- Life Guard International / Flying ICU
- Lovelock Volunteer Ambulance
- American Medical Response (AMR)
- MedicWest Ambulance (MWA)
- North Lyon County Fire Protection District
- REMSA
- North Lake Tahoe Fire Dept.
- East Fork Fire Protection District
- Humboldt General Hospital
- Storey County Fire Dept.
- Pahrump Fire & Rescue

Clark County Fire Department also responded but we do not permit them. SNHD does, so we cannot issue a CP endorsement.

Chad Warren Westom, Bureau Chief

Bureau of Preparedness, Assurance, Inspections and Statistics (PAIS)
Nevada Division of Public and Behavioral Health
4150 Technology Way, Suite 200, Carson City, NV 89706

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

LCB File No. R151-15

January 25, 2016

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

AUTHORITY: §1, NRS 439.200; §§2-6, NRS 439A.170, as amended by section 1 of Assembly Bill No. 39, chapter 94, Statutes of Nevada 2015, at page 360.

A REGULATION relating to the State Board of Health; revising provisions relating to taking action on certain petitions filed with the Board; revising application fees for the Physician Visa Waiver Program; revising provisions relating to the refund of those application fees in certain circumstances; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law provides that any interested person who desires the adoption, filing, amendment or repeal of any regulation of the State Board of Health may petition the Board, and the Secretary of the Board must either deny the petition or initiate procedures to carry out the request of the petition within 45 days after receipt of the petition. (NAC 439.010, 439.030) **Section 1** of this regulation changes that requirement to 30 days.

Existing law requires the State Board of Health to adopt regulations providing for the administration of the Physician Visa Waiver Program, which is established in the Division of Public and Behavioral Health of the Department of Health and Human Services. The Board is also required to establish an application fee for a physician or an employer seeking a letter of support from the Program. (NRS 439A.170, as amended by section 1 of Assembly Bill No. 39, chapter 94, Statutes of Nevada 2015, at page 360) The maximum amount of the application fee was increased from \$500 to \$2,000 by section 1 of Assembly Bill No. 39, chapter 94, Statutes of Nevada 2015, at page 360. **Section 2** of this regulation provides a schedule of application fees based on whether the: (1) physician is a primary care provider or a specialist; (2) employer of the physician is a health facility or a third-party contractor; and (3) area in which the physician will work is a designated health professional shortage area.

Section 3 of this regulation provides that a member of the Primary Care Advisory Council, which is authorized to review applications submitted for the Physician Visa Waiver

Program, may designate a person to attend a meeting of the Council in place of the member. (NAC 439A.710, 439A.725) **Section 3** also requires the Council to meet annually and to select a Chair from among its members biennially.

Section 4 of this regulation authorizes the Administrator of the Division of Public and Behavioral Health to refund one-half of the application fee submitted to the Physician Visa Waiver Program if the application is withdrawn before the Administrator has made a determination about issuing a letter of support and to refund all of the application fee if all the available spots for enrollment in the Program have been filled for that fiscal year. (NAC 439A.720)

Sections 4-6 of this regulation revise the citation to the Internet website where a person may obtain an application for a letter of support for the Physician Visa Waiver Program. (NAC 439A.720, 439A.725 and 439A.745)

Section 1. NAC 439.030 is hereby amended to read as follows:

439.030 1. The Secretary of the State Board of Health shall, within ~~45~~ 30 days after receipt of the letter submitted pursuant to NAC 439.010, either deny the petition in writing, stating the reasons, or initiate the procedure for the adoption, amendment or repeal of regulations.

2. If the petition is denied, a copy of the letter of denial must be sent to each member of the Board.

Sec. 2. Chapter 439A of NAC is hereby amended by adding thereto a new section to read as follows:

1. Except as otherwise provided in this section and NAC 439A.720, the application fees for a letter of support from the Division of Public and Behavioral Health are as follows:

(a) For a primary care provider employed by a health facility in a designated health professional shortage area.....\$500

(b) For a primary care provider employed by a health facility in a flex slot.....800

- (c) For a primary care provider employed by a third-party contractor in a designated health professional shortage area.....1,100
- (d) For a primary care provider employed by a third-party contractor in a flex slot.....1,400
- (e) For a specialist employed by a health facility in a designated health professional shortage area.....800
- (f) For a specialist employed by a health facility in a flex slot.....1,100
- (g) For a specialist employed by a third-party contractor in a designated health professional shortage area.....1,100
- (h) For a specialist employed by a third-party contractor in a flex slot.....1,400

2. If the actual cost to the Division of processing an application exceeds the amount listed in subsection 1, the Division shall impose an additional amount equal to that cost, except the total fee may not exceed \$2,000.

3. As used in this section:

(a) "Designated health professional shortage area" means an area designated by the Secretary of Health and Human Services pursuant to 42 U.S.C. § 254e.

(b) "Flex slot" means an area which is not a designated health professional shortage area or a medically underserved area but which contains health facilities that are utilized by persons who reside in neighboring areas which are designated health professional shortage areas or medically underserved areas.

(c) "Medically underserved area" means an area designated by the Secretary of Health and Human Services pursuant to 42 U.S.C. § 254b as containing a medically underserved population.

(d) "Primary care provider" means a physician or osteopathic physician who practices in the area of family practice, general practice, geriatrics, internal medicine, obstetrics and gynecology, pediatrics or psychiatry.

(e) "Specialist" means a physician or osteopathic physician who practices in any area other than an area specified for a primary care provider.

(f) "Third-party contractor" means the employer of a physician or an osteopathic physician who is not a health facility.

Sec. 3. NAC 439A.710 is hereby amended to read as follows:

439A.710 1. The Primary Care Advisory Council is hereby created within the Division of Public and Behavioral Health. The Advisory Council consists of members appointed by the Administrator as follows:

(a) One member who represents the ~~{Great Basin}~~ Nevada Primary Care Association, or a successor organization;

(b) One member who represents a federally qualified health center in this State;

(c) One member who represents the Nevada Office of Rural Health within the University of Nevada School of Medicine;

(d) One member who is a physician licensed in good standing pursuant to chapter 630 of NRS and who has successfully completed an employment contract under the Program;

(e) One member who represents the Nevada State Medical Association, or its successor organization;

(f) Members who are health care professionals; and

(g) Representatives from the communities being served by the Program.

2. In addition to the members appointed pursuant to subsection 1, the Administrator may appoint nonvoting members from the Division of Public and Behavioral Health or other governmental agencies who have knowledge of and experience in health care and the Program.

3. Each member of the Advisory Council serves for a term of 2 years. A member may be reappointed.

4. *Each member of the Advisory Council may designate a person to attend a meeting in place of the member. Such a designation must be made in accordance with NRS 241.025, as amended by section 5 of Senate Bill No. 70, chapter 226, Statutes of Nevada 2015, at page 1059.*

5. If a vacancy occurs during the term of a member, the Administrator shall appoint a person similarly qualified to replace that member for the remainder of the unexpired term.

~~{5.}~~ 6. The Advisory Council shall meet at least ~~{once each calendar quarter}~~ *annually* and at such other times as specified by a call of the Chair.

~~{6.}~~ 7. At the first meeting, and ~~{annually}~~ *biennially* thereafter, the Advisory Council shall select a Chair from among its members.

~~{7.}~~ 8. The Chair of the Advisory Council may appoint a subcommittee to review applications, complaints and policies and procedures of the Program and make recommendations to the Advisory Council.

~~{8.}~~ 9. As used in this section, "federally qualified health center" has the meaning ascribed to it in 42 U.S.C. § 1396d(l)(2)(B).

Sec. 4. NAC 439A.720 is hereby amended to read as follows:

439A.720 1. An application for a letter of support must:

- (a) Be complete.
- (b) Include the materials required by subsection 1 of NRS 439A.175.
- (c) Be on the form prescribed by the Division of Public and Behavioral Health.
- (d) Contain the notarized signatures of the employer and the J-1 visa physician.
- (e) Except as otherwise provided in subsection 2, be accompanied by an application fee ~~of~~ *\$500 which} pursuant to section 2 of this regulation. The fee* must be paid in equal amounts by the employer and the J-1 visa physician.

2. The Administrator may waive the portion of the application fee which must be paid by the J-1 visa physician or require the J-1 visa physician to pay that portion of the application fee pursuant to a payment plan if the J-1 visa physician is experiencing an economic hardship and the J-1 visa physician submits with the application documentation sufficient to demonstrate that the economic hardship exists.

3. *The application fee will not be refunded if the Administrator does not issue a letter of support for the applicant. The Administrator may refund:*

(a) One-half of the application fee paid by the J-1 visa physician and one-half of the application fee paid by the employer if the application is withdrawn before the Administrator has made a determination whether to issue a letter of support; or

(b) All of the application fee paid by the J-1 visa physician and the employer if, at the time the application is received by the Division, all the available spots for enrollment of J-1 visa physicians in the Program have been filled for that fiscal year.

4. An employer or a J-1 visa physician may obtain an application for a letter of support from the Division of Public and Behavioral Health on the Internet website maintained by the Division

of Public and Behavioral Health at ~~{<http://health.nv.gov/PrimaryCare.htm>}~~

<http://dphh.nv.gov/Programs/Conrad30/Conrad30-Home/> or by submitting a written request for an application to the Division of Public and Behavioral Health, Primary Care Office, 4150 Technology Way, Carson City, Nevada 89706.

Sec. 5. NAC 439A.725 is hereby amended to read as follows:

439A.725 1. An application for a letter of support must be filed with the Administrator by personal delivery, commercial carrier or mail.

2. The Advisory Council may review an application submitted pursuant to this section for completeness and compliance with the provisions of NRS 439A.130 to 439A.185, inclusive, ~~{and}~~ NAC 439A.700 to 439A.755, inclusive ~~{}~~ *and section 2 of this regulation.*

3. Applications must be reviewed in the order in which they were received.

4. The Administrator is responsible for the review and the approval or denial of all applications. The Administrator shall provide notice of the approval or denial of an application to the applicant. If an application is incomplete, the Administrator shall provide notice to the applicant within 14 days after receipt of the application and provide a written explanation of the missing information or documentation. An application may be resubmitted with the additional required information or documentation.

5. The Administrator shall accept applications pursuant to this section until all available spots for enrollment of J-1 visa physicians in the Program have been filled. The Administrator shall post the status of the number of available spots for enrollment on the Internet website maintained by the Division of Public and Behavioral Health at

~~{<http://health.nv.gov/PrimaryCare.htm>}~~ <http://dpbh.nv.gov/Programs/Conrad30/Conrad30-Home/>

6. The Administrator shall not issue a letter of support to:

(a) An employer who was penalized for a violation of NRS 439A.130 to 439A.185, inclusive, or NAC 439A.700 to 439A.755, inclusive, *and section 2 of this regulation* or convicted of a violation of a federal statute or regulation relating to immigration within the immediately preceding 2 years.

(b) A J-1 visa physician who was determined by the Administrator to have violated a provision of NRS 439A.130 to 439A.185, inclusive, or NAC 439A.700 to 439A.755, inclusive, *and section 2 of this regulation* or convicted of a violation of a federal statute or regulation relating to immigration within the immediately preceding 2 years.

Sec. 6. NAC 439A.745 is hereby amended to read as follows:

439A.745 1. A complaint about an employer or a J-1 visa physician may be submitted to the Program on the Internet website maintained by the Division of Public and Behavioral Health at ~~{http://health.nv.gov/PrimaryCare_J-1.htm}~~

<http://dpbh.nv.gov/Programs/Conrad30/Conrad30-Home/> or by submitting a written complaint to the Division of Public and Behavioral Health, Primary Care Office, 4150 Technology Way, Carson City, Nevada 89706.

2. The Administrator shall investigate or require the Advisory Council to investigate each complaint submitted pursuant to this section. The investigation must commence within 45 days after receipt of the complaint, except that if the complaint alleges that the safety of a patient was

threatened, the investigation must commence as soon as practicable. The Administrator is responsible for the investigation of complaints submitted pursuant to this section.

3. If the Administrator determines that a violation of NRS 439A.130 to 439A.185, inclusive, or NAC 439A.700 to 439A.755, inclusive, *and section 2 of this regulation* has occurred, the Administrator:

(a) Shall, if the violation affected the health and safety of a patient, submit a report to the Board of Medical Examiners; or

(b) May, if the violation did not affect the health or safety of a patient, submit a report to the Board of Medical Examiners or to the Bureau of Health Care Quality and Compliance of the Division of Public and Behavioral Health.

SMALL BUSINESS IMPACT STATEMENT 2016

PROPOSED AMENDMENTS TO NAC 439 and 439A

The Division of Public and Behavioral Health (DPBH) has determined that the proposed amendments should not impose an economic burden upon a small business or have a negative impact on the formation, operation or expansion of a small business in Nevada.

A small business is defined in Nevada Revised Statutes (NRS) 233B as a "business conducted for profit which employs fewer than 150 full-time or part-time employees."

This small business impact statement is made pursuant to NRS 233B.0608 (3) and complies with the requirements of NRS 233B.0609. As required by NRS 233B.0608(3), this statement identifies the methods used by the agency in determining the impact of the proposed regulation on a small business in sections 1, 2, 3, and 4 below and provides the reasons for the conclusions of the agency in section 8 below followed by the certification by the person responsible for the agency.

Background

The proposed amendment to NAC 439.030 updates the required response time from 45 days to 30 days, for petitions submitted to the Secretary of the State Board of Health. This is consistent with NRS 233B.100 which requires a 30-day response time.

Assembly Bill 39 was approved in 2015 updating NRS 439A.170 to increase the cap on the amount of the application fee that the State Board of Health may establish from \$500 to \$2,000, for a letter of support from the Nevada Conrad/J-1 Physician Visa Waiver Program

Proposed amendments to Nevada Administrative Code (NAC) 439A update the following areas:

- Update the name of the Nevada Primary Care Association, formerly Great Basin Primary Care Association;
- Update meeting requirements for the Advisory Council from at least once each calendar quarter to at least annually;
- Update selection of Advisory Council chair from annually to biennially;
- Allow members to assign representatives to serve as their proxy for the purpose of obtaining a meeting quorum and voting on action items;
- Increase application fees consistent with NRS 439A.170 as amended by Assembly Bill No. 39, chapter 94, Statutes of Nevada 2015; and
- Remove references to obsolete website.

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

Pursuant to NRS 233B.0608 (2)(a), the Division of Public and Behavioral Health has requested input from all known stakeholders.

A Small Business Impact Questionnaire was distributed to Nevada Hospital Association, Nevada Rural Hospital Partners, medical facilities licensed through the state, the State Office of Rural Health, National Health Service Corps sites, 3RNet Referral List, J-1 Law Firms and J-1 Participants, along with a copy of the proposed regulation changes, on November 11 and November 17, 2015. The questions on the questionnaire were:

- 1) How many employees are currently employed by your business?
- 2) Will a specific regulation have an adverse economic effect upon your business?
- 3) Will the regulation(s) have any beneficial effect upon your business?
- 4) Do you anticipate any indirect adverse effects upon your business?
- 5) Do you anticipate any indirect beneficial effects upon your business?

Summary of Response

Summary Of Comments Received (5 responses were received out of 778 contacts invited to complete the small business impact questionnaire)			
Will a specific regulation have an adverse economic effect upon your business?	Will the regulation (s) have any beneficial effect upon your business?	Do you anticipate any indirect adverse effects upon your business?	Do you anticipate any indirect beneficial effects upon your business?
No	<i>1 respondent noted Improves physician recruitment efforts and care delivery; reduces recruitment costs for each candidate</i>	No	<i>1 respondent noted Reputation as a company for hiring of VISA physicians attracts other similar candidates</i>

2) Describe the manner in which the analysis was conducted.

The Small Business Impact Questionnaire was embedded in an online survey with a link to the proposed amendments to regulation, and distributed to the stakeholders identified above. Responses were reviewed individually and collectively to determine potential impacts of the

proposed amendments. Staff have reviewed the regulations to ensure there is not a negative impact on small business.

- 3) 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.**

The proposed changes include modest application fee increases for specialists and third-party contractors to cover increased costs for program administration and monitoring. The cap was increased from \$500 to \$2,000 under NRS 439A.170. The fee schedule in the proposed regulation starts at \$500 for primary care providers in a designated Health Professional Shortage Area, with \$300 increments for specialists, "flex slots," and third-party contractors, with the highest potential rate at \$1,400, to better reflect actual costs, and to help sustain the program.

- 4) Provide a description of the methods that the agency considered to reduce the impact of the proposed regulation on small businesses and a statement regarding whether the agency actually used any of those methods.**

The regulation will retain an exemption to the fee requirement for a demonstrated hardship.

- 5) The estimated cost to the agency for enforcement of the proposed regulation.**

No new costs are anticipated for enforcement of the proposed regulation.

- 6) If the proposed regulation provides a new fee or increases an existing fee, the total annual amount DPBH expects to collect and the manner in which the money will be used.**

The average number of applications received, per year, over the last five years is three. If all three applications per year were subject to an increase of \$900, this would total \$2,700 per year. These funds would be used to administer and monitor the program, including technical assistance, application review, public hearing, data collection, site visits and monitoring.

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

The proposed regulation does not include more stringent provisions than the Nevada Revised Statutes.

- 8) Provide a summary of the reasons for the conclusions of the agency regarding the impact of a regulation on small businesses.**

The response rate to the small business impact questionnaire was relatively low which may be a reflection that stakeholders do not anticipate significant impact from the proposed regulation. The majority of respondents indicated no impact, with one respondent noting positive impact of the regulation, in general, because it supports physician recruitment.

Any other persons interested in obtaining a copy of the summary may e-mail, call, or mail in a request to Laura Hale at the Division of Public and Behavioral Health at:

Division of Public and Behavioral Health
4126 Technology Way, 2nd Floor NE
Carson City, NV 89701
Laura Hale
Phone: (775) 684-4041
Email: ljhalc@health.nv.gov

Certification by Person Responsible for the Agency

I, Cody L. Phinney, Administrator of the Division of Public and Behavioral Health certify to the best of my knowledge or belief, a concerted effort was made to determine the impact of the proposed regulation on small businesses and the information contained in this statement was prepared properly and is accurate.

Signature

Cody L. Phinney

Date:

4/22/10

NOTICE OF PUBLIC HEARING

Intent to Adopt Regulations

(LCB File No. R151-15)

NOTICE IS HEREBY GIVEN that the State Board of Health will hold a public hearing to consider adoption of regulations revising provisions relating to taking action on certain petitions filed with the Board; revising application fees for the Physician Visa Waiver Program; revising provisions relating to the refund of those application fees in certain circumstances; and providing other matters properly relating thereto. This public hearing is to be held in conjunction with the State Board of Health meeting on June 10, 2016. The proposed adoption of the regulations will be heard in the order placed on the State Board of Health agenda.

The State Board of Health will be conducted via videoconference beginning at 9:00 a.m. on Friday, June 10, 2016 at the following locations:

Division of Public and Behavioral Health 4150 Technology Way Room #303 Carson City, NV	Division of Public and Behavioral Health 1650 Community College Drive Las Vegas, NV	Division of Aging and Disability Services Early Intervention Services 1020 Ruby Vista Drive, Suite 102 Elko, NV
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The proposed adoption of regulations include the following:

- Update NAC 439.030 to reflect the required response time from 45 days to 30 days, for petitions submitted to the Secretary of the State Board of Health, consistent with NRS 233B.100;
- Update NAC 439A.720 to increase application fees consistent with NRS 439A.170 as amended by Assembly Bill No. 39, chapter 94, Statutes of Nevada 2015;
- Update NAC 439A.710
 - to the new name of the Nevada Primary Care Association, formerly Great Basin Primary Care Association;
 - to allow members to designate representatives to serve as their proxy for the purpose of obtaining a meeting quorum and voting on action items;
 - to change meeting requirements for the Advisory Council from at least once each calendar quarter to at least annually;
 - to change selection of Advisory Council chair from annually to biennially;and
- Update NAC 439A.720-745 to remove references to obsolete website.

1. Anticipated effects on the businesses which these regulations will affect:

- A. *Adverse effects:* The proposed changes include modest application fee increases for specialists and third-party contractors to cover increased costs for program administration and monitoring. The cap was increased from \$500 to \$2,000 under NRS 439A.170. The fee schedule in the proposed regulation starts at \$500 for primary care providers in a designated Health Professional Shortage Area, with \$300 increments for specialists, "flex slots," and third-party contractors, with the highest potential rate at \$1,400.
- B. *Beneficial:* Increasing the fees to better reflect program costs will help sustain this program that is a good tool for recruiting physicians in hard to serve areas, including monitoring activity to ensure physicians are treated fairly and programs are in compliance with state and federal requirements.
- C. *Immediate:* The stated adverse and beneficial effects would begin with the first application received following approval of the proposed regulation.
- D. *Long-term:* The long term impacts would be the same as the immediate impacts as applications are received over time.

2. Anticipated effects on the public:

- A. *Adverse:* None anticipated.
- B. *Beneficial:* A sustainable program to recruit providers to underserved areas improves access to health care, and thereby improves health outcomes; these providers also benefit the local economy.
- C. *Immediate:* No immediate impact is anticipated.
- D. *Long-term:* Long-term sustainability is the reason for the fee increase.

3. The estimated cost to the Division of Public and Behavioral Health for enforcement of the proposed regulations is estimated to be \$0, as no increased enforcement activity is anticipated.

The proposed regulations do not overlap or duplicate any other Nevada regulations.

Members of the public may make oral comments at this meeting. Persons wishing to submit written testimony or documentary evidence in excess of two typed, 8-1/2" x 11" pages must submit the material to the Board's Secretary, Cody Phinney, to be received no later than May 31, 2016 at the following address:

Secretary, State Board of Health
Division of Public and Behavioral Health
4150 Technology Way, Suite 300
Carson City, NV 89706

Written comments, testimony, or documentary evidence in excess of two typed pages will not be accepted at the time of the hearing. The purpose of this requirement is to allow Board members adequate time to review the documents.

A copy of the notice and proposed regulations are on file for inspection and/or may be copied at the following locations during normal business hours:

NV Division of Public and Behavioral Health 4126 Technology Way, 2nd Floor NE Carson City, NV 89706	Nevada State Library 100 Stewart Street Carson City, NV 89701
Churchill County Library 553 South Maine Street Fallon, NV 89406 Churchill County Phone: 775-423-7581	Douglas County Public Library 1625 Library Lane Minden, NV 89423 Douglas County Phone: 775-782-9841
Battle Mountain Branch Library 625 South Broad Street Battle Mountain, NV 89820 Lander County Phone: 775-635-2534	Elko County Library 720 Court Street Elko, NV 89801 Elko County Phone: 775-738-3066
Eureka Branch Library 210 South Monroe Eureka, NV 89316 Eureka County Phone: 775-237-5307	Goldfield Valley Library Corner Crook & Fourth Goldfield, NV 89013 Esmeralda County Phone: 775-485-3236
Humboldt County Library 85 East 5th Street Winnemucca, NV 89445 Humboldt County Phone: 775-623-6388	Clark County Library 1401 E. Flamingo Rd. Las Vegas, NV 89119 Clark County Phone: 702-507-3400
Lincoln County Library 63 Main Street Pioche, NV 89043 Lincoln County Phone: 775-962-5244	Central Library 20 Nevin Way Yerington, NV 89447 Lyon County Phone: 775-463-6645
Mineral County Library 110 First St	Pahrump Community Library 701 East Street

Hawthorne, NV 89415 Mineral County Phone: 775-945-2778	Pahrump, NV 89041 Nye County Phone: 775-727-5930
Pershing County Library 1125 Central Ave Lovelock, NV 89419 Pershing County Phone: 775-273-2216	Storey County Library 175 E. Carson St. Virginia City, NV 89440 Storey County Phone: 775-847-0541
Downtown Reno Library 301 S. Center St. Reno, NV 89501 Washoe County Phone: 775-327-8300	White Pine County Public Library 950 Campton Street Ely, NV 89301 White Pine County Phone: 775-293-6900

A copy of the regulations and small business impact statement can be found on-line at the following links:

- <http://dpbh.nv.gov/Programs/Conrad30/Conrad30-Home/>
- [http://dpbh.nv.gov/Boards/BOH/Board_of_Health_\(BOH\)_-home/](http://dpbh.nv.gov/Boards/BOH/Board_of_Health_(BOH)_-home/)
- <https://www.leg.state.nv.us/App/Notice/A/>

Copies may be obtained in person, by mail, or by calling the Division of Public and Behavioral Health, Primary Care Office at (775) 684-4041 in Carson City.

Per NRS 233B.064(2), upon adoption of any regulation, the agency, if requested to do so by an interested person, either prior to adoption or within 30 days thereafter, shall issue a concise statement of the principal reasons for and against its adoption, and incorporate therein its reason for overruling the consideration urged against its adoption.

NOTICE OF PUBLIC WORKSHOP

NOTICE IS HEREBY GIVEN, the Nevada Division of Public and Behavioral Health will hold a public workshop to consider amendments to Nevada Administrative Code (NAC) Chapter 439A. The workshop will be conducted on site, with teleconference, beginning at **9:00AM on January 28, 2016**, at the following location:

**Division of Public and Behavioral Health
4126 Technology Way
2nd Floor Conference Room
Carson City, NV 89706**

Call in # (888) 557-8511 Access Code: 5776793

This workshop will be conducted in accordance with NRS 241.020, Nevada's Open Meeting Law. The proposed change of regulations include provisions to:

- Update the name of the Nevada Primary Care Association, formerly Great Basin Primary Care Association;
- Update meeting requirements for the Advisory Council from at least once each calendar quarter to at least annually;
- Update selection of Advisory Council chairperson from annually to biennially;
- Allow members to assign representatives to serve as their proxy for the purpose of obtaining a meeting quorum and voting on action items;
- Establish an annual application fee schedule within the new statutory limitations; and
- Remove references to obsolete website.

AGENDA

1. Introduction of workshop process
2. Public comment on proposed amendments to revise Chapter 439A of the Nevada Administrative Code.
3. Public Comment

A copy of this notice has been posted at the following locations:

1. Division of Public and Behavioral Health, 4126 Technology Way, First Floor Lobby, Carson City
2. Nevada State Library and Archives, 100 Stewart Street, Carson City
3. Health Care Quality and Compliance, 4220 S. Maryland Parkway, Las Vegas
4. Early Intervention Services, 1020 Ruby Vista Drive, Elko, NV 89801
5. Nevada Rural Hospital Partners, 4600 Kietzke Ln, Reno, NV 89502
Legislative Counsel Bureau website <https://leg.state.nv.us/App/Notice/A/File> File Number R151-15, and
6. Nevada Division of Public and Behavioral Health web page:

http://dpbh.nv.gov/Programs/Certificate_of_Need/Certificate_of_Need_-_Home/

Members of the public who require special accommodations or assistance at the workshop are requested to notify Laura Hale, Primary Care Office Manager, in writing at the Division of Public and Behavioral Health, 4126 Technology Way, 2nd Floor NE, Carson City, NV 89706 or by calling (775) 684-4041 no later than January 21, 2016.

Members of the public may make oral comments at this meeting. Persons wishing to submit written testimony or documentary evidence may submit the material to Laura Hale, Primary Care Office Manager, at the following address:

Division of Public and Behavioral Health
Primary Care Office
4126 Technology Way, 2nd Floor NE
Carson City, NV 89706
FAX (775) 684-5951

A copy of the notice and the proposed regulations are on file for inspection and/or may be copied at the following locations during normal business hours:

Division of Public and Behavioral Health
4150 Technology Way, 2nd floor
Carson City, NV 89706

Nevada State Library and Archives
100 Stewart Street
Carson City, NV 89701

A copy of the regulations and workshop information can also be found on-line by going to:
<http://dpbh.nv.gov/Programs/Conrad30/Conrad30-Home/> or to
<https://leg.state.nv.us/App/Notice/A/>

Copies may be obtained in person, by mail, or by calling (775) 684-4041.

Per NRS 233B.064(2), upon adoption of any regulations, the agency, if requested to do so by an interested person, either prior to adoption or within 30 days thereafter, shall issue a concise statement of the principal reasons for and against its adoption, and incorporate therein its reason for overruling the consideration urged against its adoption.

#678

Received via
ENTERED
JAN 29 RECD

NEVADA STATE BOARD OF HEALTH
NEVADA STATE HEALTH DIVISION
4150 Technology Way, Suite 300
CARSON CITY, NV 89706

APPLICATION FOR VARIANCE

Please check the appropriate box that pertains to the NAC for which you are requesting a variance.

Division Administration
(NAC 439, 441A, 452, 453A, & 629)

Health Care Quality & Compliance
(NAC 449, 457, 459 & 652)

Child, Family & Community Wellness
(NAC 392, 394, 432A, 439, 441A, & 442)

Health Statistics, Planning,
Epidemiology and Response
(NAC 440, 450B, 452, 453, 453A, & 695C)

Public Health & Clinical Services
(NAC 211, 444, 446, 447, 583, & 585) (EMS staff: Barrett Evans)

Date: 1/25/16

Name of Applicant: Dan Conner Phone: 775 437-1367

Mailing Address: 3580 Hillsboro Blvd.

City: Fallon State: NV Zip: 89406

We do hereby apply for a variance to chapter/section NAC 444.790 Section 1 of the Nevada Administrative Code (NAC). (For example: NAC 449.204)

Title of section in question: Lot size

Statement of existing or proposed conditions in violation of the NAC:
Lot size is .83 acres

Date of initial operation (if existing): TBD

ATTENTION: Please read this section closely. Your request for variance will be examined against these criteria:

Any person who, because of unique circumstances, is unduly burdened by a regulation of the State Board of Health and thereby suffers a hardship and the abridgement of a substantial property right may apply for a variance from a regulation. (NAC 439.200(1))

1. The State Board of Health will grant a variance from a regulation only if it finds from the evidence presented at the hearing that:

(a) There are circumstances or conditions which:

- (1) Are unique to the applicant;
- (2) Do not generally affect other persons subject to the regulation;
- (3) Make compliance with the regulation unduly burdensome; and
- (4) Cause a hardship to and abridge a substantial property right of the applicant; and

(b) Granting the variance:

- (1) Is necessary to render substantial justice to the applicant and enable him to preserve and enjoy his property; and
- (2) Will not be detrimental or pose a danger to public health and safety.

2. Whenever an applicant for a variance alleges that he suffers or will suffer economic hardship by complying with the regulation, he must submit evidence demonstrating the costs of his compliance with the regulation. The Board will consider the evidence and determine whether those costs are unreasonable. (NAC 439.240)

Therefore, it is important for your variance request to be as complete as possible. It is your responsibility to attach documentation supportive of your variance request.

Statement of degree of risk of health Limited Septic System in
area and well drilling.
3415 Dwayne Dr. is the
Neighbor to the back of Property his well is 40'
deep, water at 27'. Neighbor to Right has no well log.
at 3420 York Ln.

Please state in detail the circumstances or conditions which demonstrate that:

1. An exceptional and undue hardship results from a strict application of the Regulation:

If strict application of the regulation takes place,
owner will be unable to develop the property

2. The variance, if granted, would not:

A. Cause substantial detriment to the public welfare.

Low density of septic system and no
ground water.

New system will have plans approved by variance.

B. Impair substantially the purpose of the regulation from which the application seeks a variance.

3420 York Ln, developed property
with variance on .77 Acre with well.

Property is next to our property to the
East.

The bureau may require the following supporting documents to be submitted with and as a part of this application:

- 1. Legal description of property concerned See exhibit "A"
- 2. General area identification map
- 3. Plat map showing locations of all pertinent items and appurtenances
- 4. Well log (if applicable) Not applicable
- 5. Applicable lab reports
- 6. Applicable engineering or construction/remodeling information
- 7. Other items (see following pages)

This application must be accompanied by evidence demonstrating the costs of your compliance with regulations or specific statutory standards. Your request will be placed on the Board of Health agenda 40 days or more after receipt in this office if accompanied by the required fee (NAC 439.210). The application

and supporting documentation will form the basis for the Health Division staff report and recommendation to the Board. Failure to respond to the above statements may cause the Board to deny consideration of the application at the requested Board meeting.

Please schedule this hearing as:



The next regularly scheduled Board of Health meeting, regardless of location.



The next scheduled meeting in Carson City.



The next scheduled meeting in Las Vegas.

Signature: D. Conner
 Printed Name: Dan Conner
 Title: owner
 Date: 1/28/16

**PLEASE MAKE YOUR CHECK OR MONEY ORDER PAYABLE TO:
NEVADA STATE HEALTH DIVISION AND RETURN THIS APPLICATION,
ALONG WITH THE REQUIRED FEE PURSUANT TO NAC 439.210, TO:**

Richard Whitley, MS, Administrator
Nevada State Health Division
4150 Technology Way, Suite 300
Carson City, NV 89706

(See the attached table to determine the appropriate fee)

DLC CONSTRUCTION LLC
775-427-1967
3580 HILLSBORO BLVD
FALLON, NV 89406

4419
91-5981221
2333

1/29/16

Date

\$ 135.00

Dollars



PAY to the order of NDPVH
one hundred thirty five and 00/100

FIRST INDEPENDENT BANK
PO Box 11100
Reno, NV 89510
Ph: 775-228-2000
www.firstindependentbank.com

For Churchill County variance

Daniel O. Conner

⑆1222605980⑆

⑆3001999⑆4419



450007 : 01/05/2016
002 of 4

GRANT, BARGAIN AND SALE DEED

THIS INDENTURE WITNESSETH: That

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

Helen A. Simms, surviving joint tenant,

do(es) hereby GRANT(s) BARGAIN SELL and CONVEY to

Daniel Olen Conner, II and Linda Ann Conner, husband and wife as joint tenants with right of survivorship,

and to the heirs and assigns of such Grantee forever, all the following real property situated in the City of Fallon, County of Churchill State of Nevada bounded and described as follows:

See attached Exhibit A

Conner Variance

40 day deadline: 1/29/16

-missed

DOH March 11th

-> next June 10

Churchill Fee \$135.00

0.2 Acre w/ well / needs SDS

NAC 444.790(1)

- need plan & perc

- well logs / water depth

- area density

- total assessed acreage

- info on neighbor w/ variance

TOGETHER with all tenement appertaining, and any reversio

Dated: 12/18/2015

1 100110 10000 0011 101110 10111 0011 1001 1001

450907

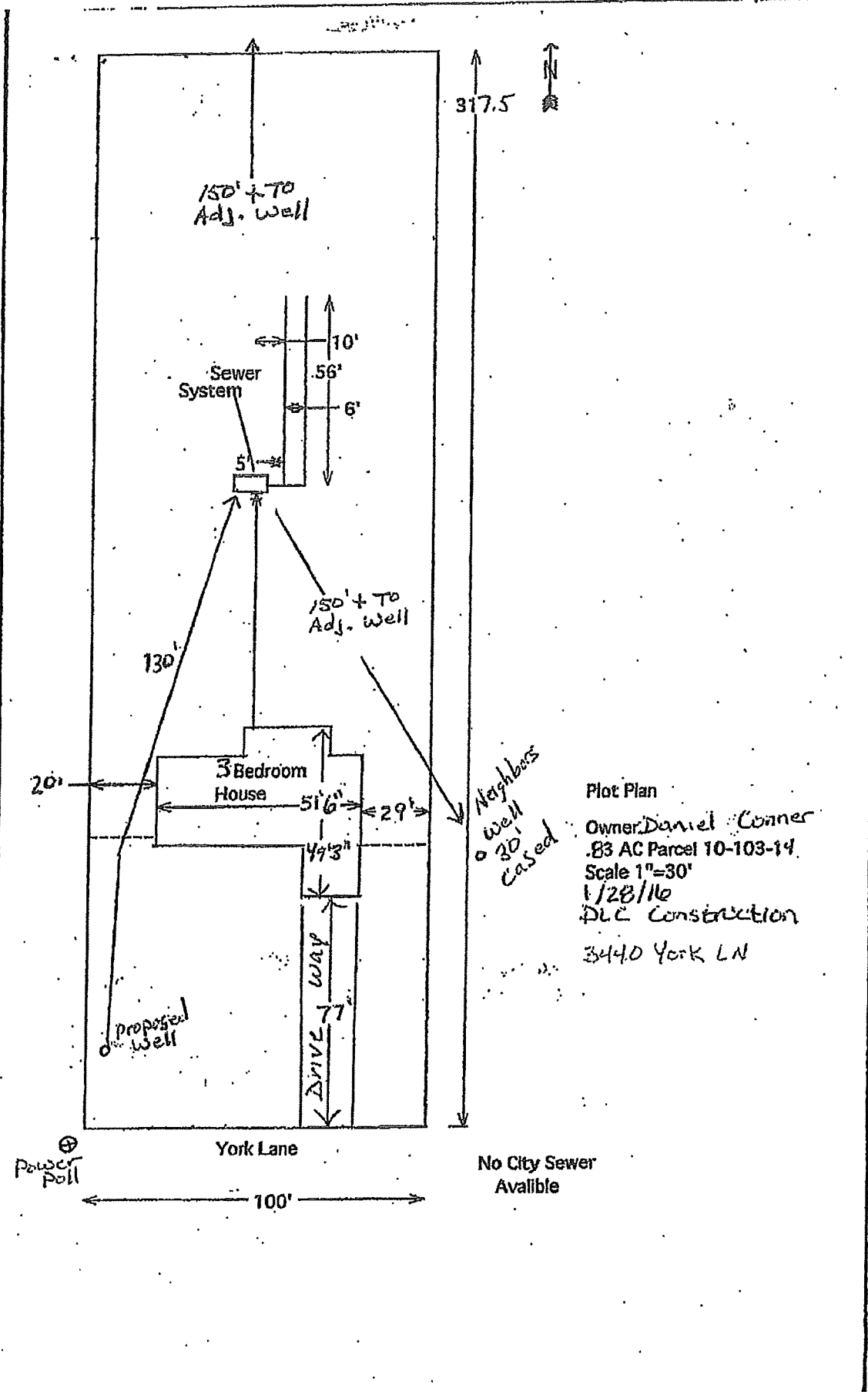
01/05/2016
004 of 4

EXHIBIT "A"

Lot 3 of Marvel Vista Acres Subdivision according to the map and plat on file in the office of the County Recorder of Churchill County, Nevada, under File No. 88143.

**Assessor's Parcel Number(s):
010-103-14**





Plot Plan

Owner: Daniel Conner
 .83 AC Parcel 10-103-14
 Scale 1"=30'
 1/28/16
 DLC Construction
 3440 York LN

NOTICE OF PUBLIC HEARING

DAN CONNER OF FALLON, NEVADA IS REQUESTING A VARIANCE #678 FROM THE STATE BOARD OF HEALTH REGULATIONS

NOTICE IS HEREBY GIVEN that Dan Conner of Fallon, Nevada, has requested a variance from Nevada Administrative Code (NAC) 444.790, "Lot Size." A public hearing will be conducted on June 10, 2016 at 9:00 am, by the Nevada State Board of Health to consider this request as follows:

Division of Public and Behavioral Health
4150 Technology Way, Suite 303
Carson City, Nevada

Division of Public and Behavioral Health
Rawson Neal Training Room
1650 Community College Drive
Las Vegas, Nevada

Division of Aging and Disability Services
Early Intervention Services
1020 Ruby Vista Drive, Suite 102
Elko, Nevada

NAC 444.790 (1) states: "A minimum area of 1 acre (43,560 square feet), including public streets and alleys or other public rights-of-way, lands or any portion thereof abutting on, running through or within a building site is required for the installation of an individual sewage disposal system on a lot served by a well."

Mr. Conner is requesting to install a new septic system.

Persons wishing to comment upon the proposed variance may appear at the scheduled public hearing or may submit written testimony at least five days before the scheduled hearing to:

Secretary, State Board of Health
Division of Public and Behavioral Health
4150 Technology Way, Suite 300
Carson City, NV 89706

Anyone wishing to testify for more than five minutes on the proposed variance must petition the Board of Health at the above address. Petitions shall contain the following: 1) a concise statement of the subject(s) on which the petitioner will present testimony; 2) the estimated time for the petitioner's presentation.

This notice has also been posted at the following locations:

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH, 4150 TECHNOLOGY WAY LOBBY, CARSON CITY
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH WEBSITE: dph.nv.gov

#679

NEVADA STATE BOARD OF HEALTH
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
4150 Technology Way, Suite 300
CARSON CITY, NV 89706

APPLICATION FOR VARIANCE

Please check the appropriate box that pertains to the NAC for which you are requesting a variance.

Division Administration
(NAC 439, 441A, 452, 453A, & 629)

Health Care Quality & Compliance
(NAC 449, 457, 459 & 652)

Child, Family & Community Wellness
(NAC 392, 394, 432A, 439, 441A, & 442)

Health Statistics, Planning,
Epidemiology and Response
(NAC 440, 450B, 452, 453, 453A, & 695C)

Public Health & Clinical Services
(NAC 211, 444, 446, 447, 583, & 585)

Date: 03.16.16

Name of Applicant: Seven Hills Hospital Phone: 702.696.3154

Mailing Address: 3021 Horizon Ridge Parkway

City: Henderson State: Nevada Zip: 89052

We do hereby apply for a variance to chapter/section NAC 449.3154 of the Nevada Administrative Code (NAC). (For example: NAC 449.204)

Title of section in question: Construction, remodeling, maintenance and change of use: General requirements; prerequisites to approval of licensure.

Statement of existing or proposed conditions in violation of the NAC:

Section "2.3-2.7.4.3 - Consult Rooms" of the AIA Guidelines for Design and Construction of Hospital and Healthcare Facilities requires 100 SF of floor area for Consult Rooms. Per attached Exhibit 'A' - Consult Rooms A-127, A-128, B-127 and B-128 of the newly constructed Inpatient Psychiatric Facility for Seven Hills Hospital in Henderson, Nevada have 96.64 SF of floor area each. A variance is hereby requested for the 3.36 SF area deficiency for each of these 4 Rooms.

Date of initial operation (if existing): Not Applicable - New Facility.

ATTENTION: Please read this section closely. Your request for variance will be examined against these criteria:

Any person who, because of unique circumstances, is unduly burdened by a regulation of the State Board of Health and thereby suffers a hardship and the abridgement of a substantial property right may apply for a variance from a regulation. (NAC 439.200(1))

1. The State Board of Health will grant a variance from a regulation only if it finds from the evidence presented at the hearing that:
 - (a) There are circumstances or conditions which:
 - (1) Are unique to the applicant;
 - (2) Do not generally affect other persons subject to the regulation;
 - (3) Make compliance with the regulation unduly burdensome; and
 - (4) Cause a hardship to and abridge a substantial property right of the applicant; and
 - (b) Granting the variance:
 - (1) Is necessary to render substantial justice to the applicant and enable him to preserve and enjoy his property; and
 - (2) Will not be detrimental or pose a danger to public health and safety.
2. Whenever an applicant for a variance alleges that he suffers or will suffer economic hardship by complying with the regulation, he must submit evidence demonstrating the costs of his compliance with the regulation. The Board will consider the evidence and determine whether those costs are unreasonable. (NAC 439.240)

Therefore, it is important for your variance request to be as complete as possible. It is your responsibility to attach documentation supportive of your variance request.

Statement of degree of risk of health

The 3.36 SF of area deficiency in the four affected Consult Rooms does not present any degree of risk of health.
The Rooms as currently constructed provide sufficient area for the furniture and staff required for patient consultation sessions.

Please state in detail the circumstances or conditions which demonstrate that:

1. An exceptional and undue hardship results from a strict application of the Regulation:

The Contractor has provided a cost of \$39,157 to relocate the rear walls of Consult/Visitation Rooms A-127, A-128, B-127, and B-128 five inches west towards the adjacent Offices to provide the required 100 SF of floor area (see attached Exhibit 'B' for Proposal from ALPA Construction for Wall Relocation). While moving the walls five inches will provide the rooms with the required 3.36 SF of additional floor area, it will require a significant expenditure and delay in provision of needed services without a noticeable improvement in the environment of care.

2. The variance, if granted, would not:
 - A. Cause substantial detriment to the public welfare.

The public welfare would not be impacted if this variance were granted.

B. Impair substantially the purpose of the regulation from which the application seeks a variance.

The rooms in question still meet all applicable accessibility and occupancy requirements. Adding 3.36 SF of floor area in each Room will not result in a noticeable improvement in the environment of care. The purpose of the Regulation is to provide adequate space for family/patient consultation. The Rooms as currently constructed provide sufficient area for the furniture and staff required for patient consultation sessions.

The bureau may require the following supporting documents to be submitted with and as a part of this application:

- _____ 1. Legal description of property concerned _____

- _____ 2. General area identification map
- _____ 3. Plat map showing locations of all pertinent items and appurtenances
- _____ 4. Well log (if applicable)
- _____ 5. Applicable lab reports
- _____ 6. Applicable engineering or construction/remodeling information
7. Other items (see following pages)

Exhibit 'A' - Reference Floor Plan of Affected Area.
Exhibit 'B' - Contractor's Construction Proposal

This application must be accompanied by evidence demonstrating the costs of your compliance with regulations or specific statutory standards. Your request will be placed on the Board of Health agenda 40 days or more after receipt in this office if accompanied by the required fee (NAC 439.210). The application


and supporting documentation will form the basis for the Health Division staff report and recommendation to the Board. Failure to respond to the above statements may cause the Board to deny consideration of the application at the requested Board meeting.

Please schedule this hearing as:

The next regularly scheduled Board of Health meeting, regardless of location.

The next scheduled meeting in Carson City.

The next scheduled meeting in Las Vegas.

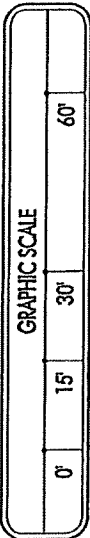
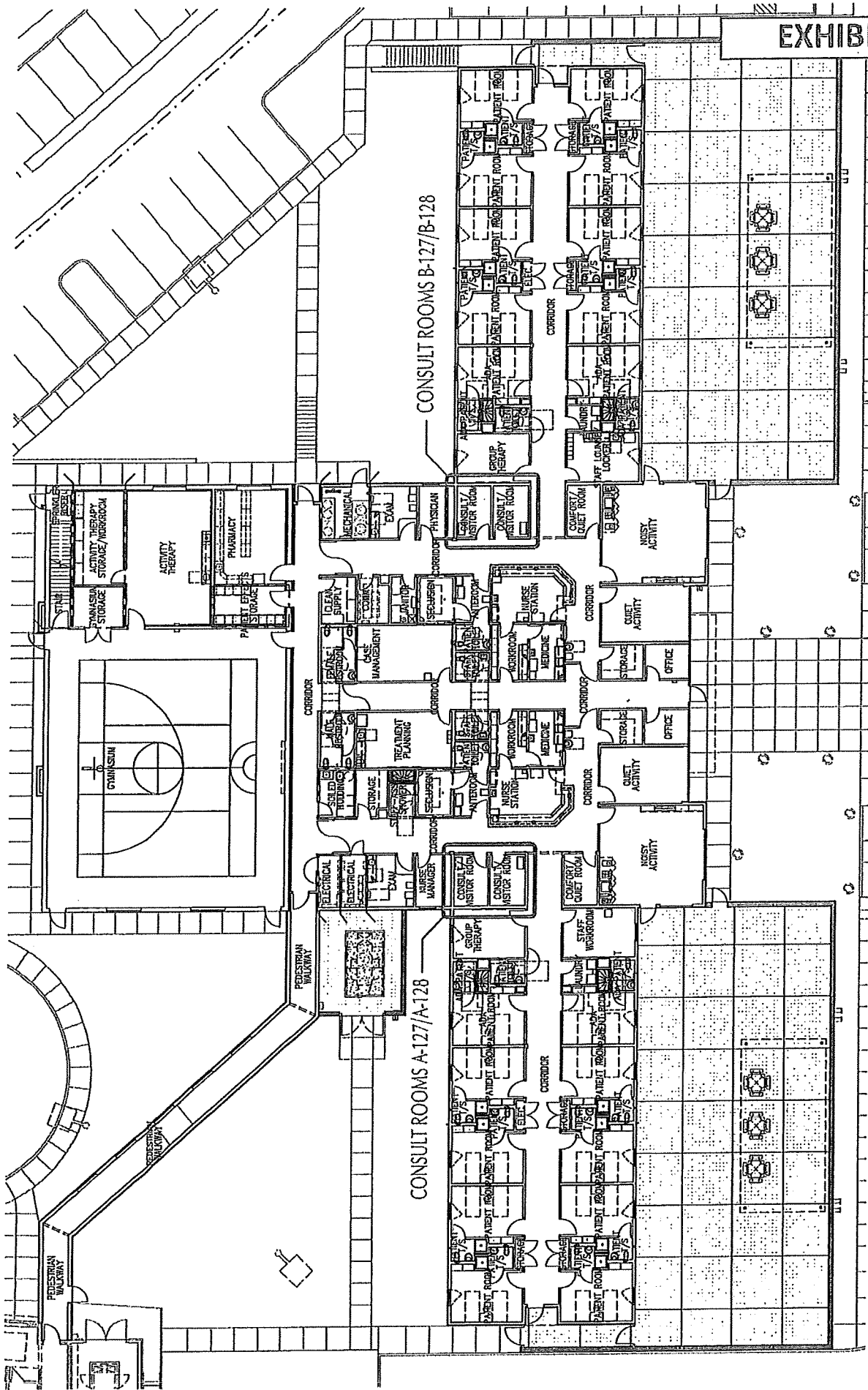
Signature: 
Printed Name: Robert L. Turner
Title: Chief Executive Officer / Seven Hills Hospital
Date: March 16, 2016

**PLEASE MAKE YOUR CHECK OR MONEY ORDER PAYABLE TO:
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH AND RETURN THIS
APPLICATION, ALONG WITH THE REQUIRED FEE PURSUANT TO NAC
439.210, TO:**

Cody L. Phinney, MPH, Administrator
Division of Public and Behavioral Health
4150 Technology Way, Suite 300
Carson City, NV 89706

(See the attached table to determine the appropriate fee)

EXHIBIT 'A'



EXECUTIVE SUMMARY

Project	Seven Hills Hospital - Consult Room Renovations 3021 West Horizon Ridge Parkway Henderson, Nevada 89052	Date 3/16/2016
Project #	14-239	Revised -
		Estimated .S.F. 600.00

PROJECT SUMMARY

This proposal is to remove and reinstall 2 shear walls and 2 STC 50 interior partition walls at each of the (4) Consult/Visitor rooms at the Seven Hills Inpatient Building. This cost includes all necessary rework to the ceilings, flooring, doors, frames and paint. The furniture and artwork will be removed and reinstalled as part of this scope of work.

PROJECT DOCUMENTS

This proposal is based on the walk-thru with Al Arzola of Seven Hills Hospital and a review of the wall partition types listed on the construction documents created by Stengel-Hill Architecture.

PROJECT SCHEDULE

The timeline of this renovation is 2 weeks.

PROJECT BUDGET

TOTAL	\$	39,157
--------------	-----------	---------------

PROJECT TEAM

- | | |
|--------------|--------------------------|
| Tom Iwainec | CEO |
| Rob Jezyk | COO |
| Kevin Kasten | Director of Construction |
| Brian Shunk | Project Manager |
| Bob Allen | Senior Superintendent |

#620

NEVADA STATE BOARD OF HEALTH
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
4150 Technology Way, Suite 300
CARSON CITY, NV 89706

APPLICATION FOR VARIANCE

Please check the appropriate box that pertains to the NAC for which you are requesting a variance.

Division Administration
(NAC 439, 441A, 452, 453A, & 629)

Health Care Quality & Compliance
(NAC 449, 457, 459 & 652)

Child, Family & Community Wellness
(NAC 392, 394, 432A, 439, 441A, & 442)

Health Statistics, Planning,
Epidemiology and Response
(NAC 440, 450B, 452, 453, 453A, & 695C)

Public Health & Clinical Services
(NAC 211, 444, 446, 447, 583, & 585)

Date: March 21, 2016

Name of Applicant: Southern Nevada Adult Mental Health Svcs. Phone: 702-486-8894

Mailing Address: 6161 W. Charleston Blvd.

City: Las Vegas State: NV Zip: 89146

We do hereby apply for a variance to NAC 449.3154 of the Nevada
chapter/section _____
Administrative Code (NAC). (For example: NAC 449.204)

Title of section in question: Construction Standards

Statement of existing or proposed conditions in violation of the NAC:
Separate consultation room(s), with minimum floor space of 100 square feet each, shall be provided.

The consultation rooms located on each unit currently measure 90 square feet.

Date of initial operation (if existing): 1988

ATTENTION: Please read this section closely. Your request for variance will be examined against these criteria:

Any person who, because of unique circumstances, is unduly burdened by a regulation of the State Board of Health and thereby suffers a hardship and the abridgement of a substantial property right may apply for a variance from a regulation. (NAC 439.200(1))

1. The State Board of Health will grant a variance from a regulation only if it finds from the evidence presented at the hearing that:
 - (a) There are circumstances or conditions which:
 - (1) Are unique to the applicant;
 - (2) Do not generally affect other persons subject to the regulation;
 - (3) Make compliance with the regulation unduly burdensome; and
 - (4) Cause a hardship to and abridge a substantial property right of the applicant; and
 - (b) Granting the variance:
 - (1) Is necessary to render substantial justice to the applicant and enable him to preserve and enjoy his property; and
 - (2) Will not be detrimental or pose a danger to public health and safety.

2. Whenever an applicant for a variance alleges that he suffers or will suffer economic hardship by complying with the regulation, he must submit evidence demonstrating the costs of his compliance with the regulation. The Board will consider the evidence and determine whether those costs are unreasonable. (NAC 439.240)

Therefore, it is important for your variance request to be as complete as possible. It is your responsibility to attach documentation supportive of your variance request.

Statement of degree of risk of health

Southern Nevada Adult Mental Health Services, Division of Public and Behavioral Health, is requesting a variance from the State Board of Health for NAC. 449.3154: Construction, remodeling, maintenance and change of use: General requirements; prerequisites to approval of licensure.

This variance is necessary to perform confidential consultation to clients within the secure psychiatric unit in Southern Nevada Adult Mental Health Services (SNAMHS), Stein building. Consultation between a psychiatrist and a client or a psychologist and a client is completed in order to assess, evaluate and provide care to the client who is admitted for restoration to competency.

Please state in detail the circumstances or conditions which demonstrate that:

An exceptional and undue hardship results from a strict application of the Regulation:

Defendants are committed to a forensic facility for detention and treatment to competency per NRS 178.425 when they are accused of a felony and the defendant is found to be a danger to self or others. In order to provide the type of care needed for this population, competency evaluations and assessments of mental status are completed between provider and client in a safe psychiatric environment.

Our current wait list for defendants awaiting admission to our hospital for psychiatric services is zero. This means each week we must have beds available for any defendants who are court ordered to receive restoration services to our forensic facility must be admitted within 7 days of court order and have the right to evaluation within 90 days. Timely evaluations and submissions of reports to the courts are needed and access to consultation rooms provides the solution.

Consultation rooms are located on each unit within the Stein building, this access provides close proximity and improved safety to the unit and personnel, due to less transport across locked and monitored doors, and up and down floors. Consultation rooms allow for interaction on the unit and does not pull staff for escort should consultation rooms not be allowed.

1. The variance, if granted, would not:

Cause substantial detriment to the public welfare.

Original construction of the building was in 1988 and the building has been surveyed and licensed since that time with no changes in the room's current size. With the new renovation the 90 square foot consultation rooms, per American Institute of Architects "Guidelines for the Design and Construction of Health Care Facilities" 2006 edition Section 2.3-2.7.3.4, must be 100 square feet each. The consultation wall systems are 8" concrete masonry units filled with grout and have a STC rating of 50 (2015 Masonry Advisory Council). STC ratings for pre-engineered architectural materials have commonly known values/ratings. To maximize the footprint of floor space we have only one small desk and two chairs in each room, these accommodations meet the International Code Council, International Building Code Section 1004.1 Design occupant load, requirements for a minimum of 15 square feet per occupant.

A. Impair substantially the purpose of the regulation from which the application seeks a variance.

The agency does not use the consultation rooms for extended periods of time, the length of time the building has been occupied and the materials used all meet standard, the purpose of the regulation should not be impaired with this variance. Patients will be receive treatment and adjudication shall be served in a timely manner.

The bureau may require the following supporting documents to be submitted with and as a part of this application:

- _____ 1. Legal description of property concerned _____
- _____ 2. General area identification map
- _____ 3. Plat map showing locations of all pertinent items and appurtenances
- _____ 4. Well log (if applicable)
- _____ 5. Applicable lab reports
- _____ 6. Applicable engineering or construction/remodeling information
- _____ 7. Other items (see following pages)

This application must be accompanied by evidence demonstrating the costs of your compliance with regulations or specific statutory standards. Your request will be placed on the Board of Health agenda 40 days

or more after receipt in this office if accompanied by the required fee (NAC 439.210). The application and supporting documentation will form the basis for the Health Division staff report and recommendation to the Board. Failure to respond to the above statements may cause the Board to deny consideration of the application at the requested Board meeting.

Please schedule this hearing as:

The next regularly scheduled Board of Health meeting, regardless of location.

The next scheduled meeting in Carson City.

The next scheduled meeting in Las Vegas.

Signature: _____

Printed Name: _____

Title: _____

Date: _____

**PLEASE MAKE YOUR CHECK OR MONEY ORDER PAYABLE TO:
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH AND RETURN THIS
APPLICATION, ALONG WITH THE REQUIRED FEE PURSUANT TO NAC
439.210, TO:**

Cody L. Phinney, MPH, Administrator
Division of Public and Behavioral Health
4150 Technology Way, Suite 300
Carson City, NV 89706

(See the attached table to determine the appropriate fee)

To calculate the appropriate fee to apply for a variance from the State Board of Health, please see the following table:

<p>As of September 25, 2015, if the requested variance affects:</p> <ul style="list-style-type: none"> ▪ A property, facility or other entity or person in Carson City ▪ A property, facility or other entity or person in Lyon County ▪ A property, facility or other entity or person in Storey County <p>The fee to apply, based on the cost to publish the notice of the request for a variance in the Nevada Appeal, is:</p>	\$232.00
<p>As of September 25, 2015, if the requested variance affects:</p> <ul style="list-style-type: none"> ▪ A property, facility or other entity or person in Churchill County <p>The fee to apply, based on the cost to publish the notice of the request for a variance in the Lahontan Valley News, is:</p>	\$135.00
<p>As of September 25, 2015, if the requested variance affects:</p> <ul style="list-style-type: none"> ▪ A property, facility or other entity or person in Douglas County <p>The fee to apply, based on the cost to publish the notice of the request for a variance in the Record Courier, is:</p>	\$142.00
<p>As of September 25, 2015, if the requested variance affects:</p> <ul style="list-style-type: none"> ▪ A property, facility or other entity or person in Clark County ▪ A property, facility or other entity or person in Esmeralda County ▪ A property, facility or other entity or person in Lincoln County <p>The fee to apply, based on the cost to publish the notice of the request for a variance in the Las Vegas Review Journal/Las Vegas Sun, is:</p>	\$224.00
<p>As of September 25, 2015, if the requested variance affects:</p> <ul style="list-style-type: none"> ▪ A property, facility or other entity or person in Mineral County <p>The fee to apply, based on the cost to publish the notice of the request for a variance in the Mineral County Independent News, is:</p>	\$165.00
<p>As of September 25, 2015, if the requested variance affects:</p>	

<ul style="list-style-type: none"> ▪ A property, facility or other entity or person in Nye County <p>The fee to apply, based on the cost to publish the notice of the request for a variance in the Pahrump Valley Times, is:</p>	\$ 98.00
<p>As of September 25, 2015, if the requested variance affects:</p> <ul style="list-style-type: none"> ▪ A property, facility or other entity or person in Washoe County <p>The fee to apply, based on the cost to publish the notice of the request for a variance in the Reno Gazette Journal, is:</p>	\$137.00
<p>As of September 25, 2015, if the requested variance affects:</p> <ul style="list-style-type: none"> ▪ A property, facility or other entity or person in Elko County <p>The fee to apply, based on the cost to publish the notice of the request for a variance in the Elko Daily Free Press, is:</p>	\$107.00
<p>As of September 25, 2015, if the requested variance affects:</p> <ul style="list-style-type: none"> ▪ A property, facility or other entity or person in Eureka County <p>The fee to apply, based on the cost to publish the notice of the request for a variance in the Eureka Sentinel, is:</p>	\$137.00
<p>As of September 25, 2015, if the requested variance affects:</p> <ul style="list-style-type: none"> ▪ A property, facility or other entity or person in White Pine County <p>The fee to apply, based on the cost to publish the notice of the request for a variance in the Ely Times, is:</p>	\$171.00
<p>As of September 25, 2015, if the requested variance affects:</p> <ul style="list-style-type: none"> ▪ A property, facility or other entity or person in Humboldt County ▪ A property, facility or other entity or person in Lander County ▪ A property, facility or other entity or person in Pershing County <p>The fee to apply, based on the cost to publish the notice of the request for a variance in the Reno Gazette Journal is:</p>	\$137.00
<p>As of September 25, 2015, if the requested variance affects:</p> <ul style="list-style-type: none"> ▪ A property, facility or other entity or person in more than one County 	

The fee to apply is based on the total cost to publish the notice of the request for a variance in the newspaper(s) of the area(s) affected.	\$224.00
Example: If a variance is being requested in Carson City that will also affect Washoe County, the fee is calculated as follows:	
Nevada Appeal \$232.00	Calculate based on instructions to the left
Reno Gazette Journal <u>\$137.00</u>	
Total Fee= \$369.00	

***Note: If the appropriate fee is not submitted with your variance application, you will be contacted by staff in order to collect the correct fee prior to proceeding with review of the variance request.**

Summary of Newspaper Variance Request Publishing Costs:

Elko Daily Free Press	\$107.00
Ely Times	\$171.00
Eureka Sentinel	\$137.00
Lahontan Valley News	\$135.00
Las Vegas Review-Journal/Las Vegas Sun	\$224.00
Mineral County Independent News	\$165.00
Nevada Appeal	\$232.00
Pahrump Valley Times	\$ 98.00
Record Courier	\$142.00
Reno Gazette Journal	\$137.00

NEVADA STATE BOARD OF HEALTH
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
4150 Technology Way, Suite 300
CARSON CITY, NV 89706

APPLICATION FOR VARIANCE

Please check the appropriate box that pertains to the NAC for which you are requesting a variance.

Division Administration
(NAC 439, 441A, 452, 453A, & 629)

Health Care Quality & Compliance
(NAC 449, 457, 459 & 652)

Child, Family & Community Wellness
(NAC 392, 394, 432A, 439, 441A, & 442)

Health Statistics, Planning,
Epidemiology and Response
(NAC 440, 450B, 452, 453, 453A, & 695C)

Public Health & Clinical Services
(NAC 211, 444, 446, 447, 583, & 585)

Date: 04.20.16

Name of Applicant: Dennis Panars Phone: 702.341.2285

Mailing Address: 7250 Peak Drive Suite 216

City: Las Vegas State: Nevada Zip: 89128

We do hereby apply for a variance to _____ of the Nevada
chapter/section 449.0105 - 1(c)
Administrative Code (NAC). (For example: NAC 449.204)

Title of section in question: Adoption of certain publications by reference; revision of publication after adoption

Statement of existing or proposed conditions in violation of the NAC:
The construction of a (2) bay Fast Track with each bay containing (2) stations seeks a variance from the Guidelines for Design and Construction of Health Care Facilities Chapter 3.5 Section 2.1.1. Each of the (2) proposed Bays will be an Exam Room and will include 80sf and (2) exam chairs for patients in place of the required 120sf clear and (1) bed in each exam room. As the proposed exam room will be within the Emergency Department; toilets will be located within the Emergency Department Suite, not within

footage due the existing Emergency Department Suite Building Envelope. The size of each exam space (a total of (2) bays of 80sf each, servicing up to (4) total patients) is based on the similar program located within the UMC facility in Las Vegas. To provide similar amenities as the UMC facility, Medical Gases (Oxygen, Vacuum, and Medical Air) will be provided in each bay, providing (1) connection of each gas for every (2) patients. Standard and Emergency Power receptacles have been included for each patient. Each patient has a nurse call. There is a dedicated nurse station within the new suite, providing direct supervision.

2. The variance, if granted, would not:

A. Cause substantial detriment to the public welfare.


No detriment would occur to the public. The department is being included to assist a growing need in the neighborhood and to ensure that adequate ED Beds are available for Critical need Patients.

B. Impair substantially the purpose of the regulation from which the application seeks a variance.

No impairment will occur. The facilities (patient bays) needed to provide urgent care per the Fast Track Guidelines are sufficient to provide the required care for triaged patients as outlined in the attached Functional Program.

The bureau may require the following supporting documents to be submitted with and as a part of this application:

1. Legal description of property concerned
2. General area identification map
3. Plat map showing locations of all pertinent items and appurtenances
4. Well log (if applicable)
5. Applicable lab reports
6. Applicable engineering or construction/remodeling information
7. Other items (see following pages) – *Functional Program*

 North Vista Hospital DEPARTMENTAL POLICIES AND PROCEDURES		Page(s):	5
		Saved As:	Emergency Room Fast Track Guidelines
Subject:	Emergency Room Fast Track Guidelines	Formulated:	
Manual:	EMERGENCY DEPARTMENT	Reviewed:	
Governing Board Approval	Date:	Revised:	

PURPOSE:

To establish selection criteria for safe, efficient care in the Emergency Department.

POLICY:

Each patient will be assessed by the triage nurse and evaluated to see if they need to be seen in the main department or in Fast Track by using the guidelines below

SCOPE:

North Vista Hospital and all personnel related thereto.

DEFINITIONS:

If applicable

PROCEDURE/INTERVENTIONS:

1. When in doubt, the triage nurse should consult with the Fast Track and/or Emergency Department Provider with regard to where a patient should be seen.
2. If the Fast Track Provider feels that a patient needs to be seen in the main department, then that patient will be transferred as soon as a bed becomes available.
3. The fast Track Provider may see a patient in the main department to manage patients upon Emergency Department Physician request.
4. Patients that have been triaged for Fast Track should, in general, wait for a Fast Track bed to open. If the main department use becomes necessary, this should be discussed between the Fast Track Provider, the Emergency Department Physician and Nurse in charge at the time.
5. Those patients requiring lengthier work-ups should go to the main department. If the main department is backed up, those patients who are considered stable may initially be evaluated in the Fast Track by a Physician as volume and staffing allow.
6. For patients returning within 24 hours:
 - In general, should be considered for the main department.
 - Those instructed to return within a specific time to follow-up, do so for that reason and are stable, may be seen in he Fast Track.

Pain	GERD, Gastritis)	
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GENITOURINARY	GUIDELINES	CONTRAINDICATIONS
Male	Dysuria, urethral discharges, STD complaints/History of exposure, prostatitis, returning for positive culture treatment	
Female	UTI symptoms, vaginitis complaints (itching / burning), history of exposure to STD, returning for positive culture treatment. Patients requiring pelvics for simple, incidental and/or uncomplicated complaints may be seen in the Fast Track	High fever, severe pelvic / abdominal pain

MUSCULOSKELETAL/ NEUROLOGICAL	GUIDELINES	CONTRAINDICATIONS
MVA/MVC	Ambulatory with general soreness, neck/low back pain, etc. Head trauma, with/without LOC. With stable vitals and normal neurological exam.	
Extremities	Sprains, strains, contusions, abrasions, etc.	Injury with compromise of Neurovascular supply.

SKIN	GUIDELINES	CONTRAINDICATIONS
Lacerations	Includes trunk, extremities and face.	Major nerve, vessel, bone injury
Burns	1 st / 2 nd degree	More than 5% of TBSA
Other	Abscesses (including those requiring I & D), superficial wound infections/cellulites. Contact/allergic dermatitis or similar rashes. Minor foreign body removal. Puncture wounds, extremities only. Suture removal. Wound checks without complaint of worsening condition. Tetanus prophylaxis.	

PEDIATRICS	GUIDELINES	CONTRAINDICATIONS
Fever	In general, the following parameters: Under 3 months: <ul style="list-style-type: none"> - less than 99.5F° - with no sudden change in neuro status - with no sudden change in eating habits - with no episodes of apnea - mild URI complains with no wheezing/use of secondary muscles. 3 – 6 months:	

