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December 29, 2020

Mr. Joseph Filippì
Executive Assistant
Division of Public and Behavioral Health
4150 Technology Way
Carson City, Nevada 89706

Re: LCB File No. R046-20

Dear Mr. Filippi,

A regulation adopted by the State Board of Health has been filed today with the Secretary of State pursuant to NRS 233B.067 or 233B.0675 as appropriate. As provided in NRS 233B.070, this regulation becomes effective upon filing, unless otherwise indicated.

Enclosed are two copies of the regulation bearing the stamp of the Secretary of State which indicates that it has been filed. One copy is for your records and the other is for delivery to the State Library and Archives Administrator pursuant to subsection 6 of NRS 233B.070.

Sincerely,

A handwritten signature in blue ink, appearing to read "Bryan J. Fernley".

Bryan J. Fernley
Legislative Counsel
Amanda M. Marincic
Deputy Legislative Counsel

Asher A. Killian
Chief Deputy Legislative Counsel

BJF/slj
Enclosure

RECEIVED
DEC 31 2020
by _____

Steve Sisolak
Governor

Richard Whitley, MS
Director



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Division of Public and Behavioral Health
Helping people. It's who we are and what we do.



Lisa Sherych
Administrator

Ihsan Azzam, Ph.D., M.D.
Chief Medical Officer

SECRETARY OF STATE
FILING DATA

FILED.NV.SOS
2020 DEC 29 AM 9:25

For Filing Administrative
Regulations

LCB File No. R046-20

Agency...State Board of Health.

FOR EMERGENCY
REGULATIONS ONLY

Effective date.....

Expiration date.....

.....

Governor's Signature

Classification:

- PROPOSED ADOPTED BY AGENCY EMERGENCY Brief description of action.....

The State Board of Health adopted the proposed regulation amendment(s) to NAC 392, 394, 432A and 441A at a public hearing held _____

On: December 10, 2020

Authority citation other than 233B NRS 439.200 and 441A.120

Notice date November 9, 2020

Date of Adoption by Agency

Hearing date December 10, 2020

December 10, 2020

**APPROVED REGULATION OF THE
STATE BOARD OF HEALTH**

LCB File No. R046-20

Filed December 29, 2020

AUTHORITY: §§1-17, NRS 439.200 and 441A.120.

A REGULATION relating to public health; revising provisions concerning the submission of certain forms relating to immunization exemptions; authorizing an audit of medical exemptions from immunization in certain circumstances; requiring a child to receive certain immunizations to enroll in public or private school; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law provides broad authority to the State Board of Health to adopt regulations relating to public health, including to control communicable diseases. (NRS 439.200, 441A.120) Existing law requires children and students to receive various immunizations in order to enroll in school or child care facilities or to be admitted to accommodation facilities. (NRS 392.435, 394.192, 432A.230, 432A.235; NAC 441A.755) Existing law provides an exemption to immunization requirements for religious beliefs and medical conditions if a written statement provided to the school or child care facility indicates such religious beliefs or medical conditions. (NRS 392.437, 392.439, 394.193, 394.194, 432A.240, 432A.250; NAC 441A.755)

Section 2 of this regulation requires that a written statement indicating that the religious beliefs of the parents or guardian of a child prohibit immunization be submitted to the board of trustees of a school district or governing body of a charter school: (1) annually, according to the enrollment schedule of the school; and (2) on a form provided by the Division of Public and Behavioral Health of the Department of Health and Human Services. **Sections 7, 13 and 16** of this regulation impose similar requirements for children enrolled in private schools, children admitted to child care facilities and accommodation facilities and students admitted to attend a university, respectively. **Section 3** of this regulation requires that a written statement indicating that the medical condition of a child prohibits immunization be submitted to the board of trustees of the school district or governing body of the charter school, as applicable, on a form provided by the Division. **Sections 8, 14 and 16** of this regulation impose similar requirements for children enrolled in private schools, children admitted to child care facilities and accommodation facilities and students admitted to attend a university, respectively.

Section 4, 9 and 15 of this regulation authorizes a local health officer to audit medical exemptions granted by a public school, private school or child care facility or accommodation facility, respectively, in certain circumstances.

Existing regulations list the communicable diseases which a child must be immunized against before attending a public or private school. (NAC 392.105, 394.250) **Sections 5 and 11** of this regulation prohibit a child from enrolling in grade 12 in a public or private school, respectively, after June 30, 2022, unless the child has received a dose of vaccine for *Neisseria meningitidis* after reaching 16 years of age. **Section 17** of this regulation makes all other provisions of this regulation effective on July 1, 2021.

Section 1. Chapter 392 of NAC is hereby amended by adding thereto the provisions set forth as sections 2, 3 and 4 of this regulation.

Sec. 2. *The written statement required pursuant to NRS 392.437 must be submitted to the board of trustees of a school district or the governing body of a charter school in which a child who has not been immunized pursuant to NRS 392.435 has been accepted for enrollment:*

1. Annually, according to the annual enrollment schedule of the school district or charter school; and

2. On a form provided by the Division of Public and Behavioral Health of the Department of Health and Human Services.

Sec. 3. *The written statement required pursuant to NRS 392.439 must be submitted to the board of trustees of a school district or governing body of a charter school in which a child who has a medical condition that will not permit the child to be immunized to the extent required by NRS 392.435 has been accepted for enrollment on a form provided by the Division of Public and Behavioral Health of the Department of Health and Human Services.*

Sec. 4. *A local health officer may conduct an audit of medical exemptions granted pursuant to NRS 392.439 in the jurisdiction of the local health officer if:*

1. *The reported immunization rate of a school falls below 95 percent;*
2. *A school district fails to report immunization data annually pursuant to NRS 392.435;*
3. *The rate of medical exemptions granted by a school is higher than the average rate of medical exemptions granted by public schools in this State, as determined by the Division of Public and Behavioral Health of the Department of Health and Human Services or from data available from the National Immunization Surveys conducted by the Centers for Disease Control and Prevention, or if such a survey or organization ceases to exist, an equivalent federal source; or*
4. *The local health officer determines such an audit is necessary to protect public health on a case-by-case basis.*

Sec. 5. NAC 392.105 is hereby amended to read as follows:

392.105 1. The State Board of Health hereby declares the diseases of:

- (a) Mumps;
- (b) Hepatitis A;
- (c) Hepatitis B;
- (d) Varicella;
- (e) Bordetella pertussis if a child is 6 years of age or older; and
- (f) *Neisseria meningitidis*,

↳ to be communicable diseases.

2. Unless excused because of religious belief or medical condition, a child may not be enrolled in a public school in this State unless the child has been immunized against the mumps.

3. Except as otherwise provided in subsection ~~6.1~~ 7, unless excused because of religious belief or medical condition, a child may not be enrolled in a public school in this State:

(a) After June 30, 2002, unless the child has been immunized against hepatitis A and hepatitis B; and

(b) After June 30, 2003, unless the child has been immunized against varicella.

4. Unless excused because of religious belief or medical condition, a child may not be enrolled in grade 7 in a public school in this State after June 30, 2008, unless the child has been immunized against *Bordetella pertussis*. To satisfy the requirements of this subsection, a child must receive at least one dose of a vaccine against *Bordetella pertussis* after he or she obtained 10 years of age.

5. Except as otherwise provided in subsection ~~6.1~~ 7, unless excused because of religious belief or medical condition, a child may not be enrolled in grade 7 in a public school in this State after June 30, 2017, unless the child has been immunized against *Neisseria meningitidis* after he or she obtained 10 years of age.

6. *Unless excused because of religious belief or medical condition, a child may not be enrolled in grade 12 in a public school in this State after June 30, 2022, unless the child has received at least one dose of a vaccine protecting against Neisseria meningitidis after he or she obtained 16 years of age.*

7. The provisions of:

(a) Paragraph (a) of subsection 3 do not apply to a child who is enrolled in a public school in this State before July 1, 2002.

(b) Paragraph (b) of subsection 3 do not apply to a child who is enrolled in a public school in this State before July 1, 2003.

(c) Subsection 5 do not apply to a child who is enrolled in a public school in this State before July 1, 2009.

Sec. 6. Chapter 394 of NAC is hereby amended by adding thereto the provisions set forth as sections 7, 8 and 9 of this regulation.

Sec. 7. *The written statement required pursuant to NRS 394.193 must be submitted to the governing body of a private school in which a child who has not been immunized pursuant to NRS 394.192 has been accepted for enrollment:*

- 1. Annually, according to the annual enrollment schedule of the private school; and*
- 2. On a form provided by the Division of Public and Behavioral Health of the Department of Health and Human Services.*

Sec. 8. *The written statement required pursuant to NRS 394.194 must be submitted to the governing body of a private school in which a child who has a medical condition that will not permit the child to be immunized to the extent required by NRS 394.192 has been accepted for enrollment on a form provided by the Division of Public and Behavioral Health of the Department of Health and Human Services.*

Sec. 9. *A local health officer may conduct an audit of medical exemptions granted pursuant to NRS 394.194 in the jurisdiction of the local health officer if:*

- 1. The reported immunization rate of a private school falls below 95 percent;*
- 2. A private school fails to report immunization data annually pursuant to NRS 394.192;*

3. The rate of medical exemptions granted by a private school is higher than the average rate of medical exemptions granted by public schools in this State, as determined by the Division of Public and Behavioral Health of the Department of Health and Human Services or from data available from the National Immunization Surveys conducted by the Centers for Disease Control and Prevention, or if such a survey or organization ceases to exist, an equivalent federal source; or

4. The local health officer determines such an audit is necessary to protect public health on a case-by-case basis.

Sec. 10. NAC 394.025 is hereby amended to read as follows:

394.025 1. An applicant that is not accredited by AdvancED or its successor organization, or any affiliate thereof, shall comply with the provisions of NAC 394.020, 394.030 to 394.180, inclusive, and 394.250 ~~and~~ *and sections 7, 8 and 9 of this regulation.*

2. An applicant that is accredited by AdvancED or its successor organization, or any affiliate thereof, shall comply with the provisions of NAC 394.020 and 394.200 to 394.250, inclusive ~~and~~ *, and sections 7, 8 and 9 of this regulation.*

Sec. 11. NAC 394.250 is hereby amended to read as follows:

394.250 1. The State Board of Health hereby declares the diseases of:

- (a) Mumps;
- (b) Hepatitis A;
- (c) Hepatitis B;
- (d) Varicella;
- (e) Bordetella pertussis if a child is 6 years of age or older; and

(f) *Neisseria meningitidis*,

↳ to be communicable diseases.

2. Unless excused because of religious belief or medical condition, a child may not be enrolled in a private school in this State unless the child has been immunized against the mumps.

3. Except as otherwise provided in subsection ~~6.1~~ 7, unless excused because of religious belief or medical condition, a child may not be enrolled in a private school in this State:

(a) After June 30, 2002, unless the child has been immunized against hepatitis A and hepatitis B; and

(b) After June 30, 2003, unless the child has been immunized against varicella.

4. Unless excused because of religious belief or medical condition, a child may not be enrolled in grade 7 in a private school in this State after June 30, 2008, unless the child has been immunized against *Bordetella pertussis*. To satisfy the requirements of this subsection, a child must receive at least one dose of a vaccine against *Bordetella pertussis* after he or she obtained 10 years of age.

5. Except as otherwise provided in subsection ~~6.1~~ 7, unless excused because of religious belief or medical condition, a child may not be enrolled in grade 7 in a private school in this State after June 30, 2017, unless the child has been immunized against *Neisseria meningitidis* after he or she obtained 10 years of age.

6. ***Unless excused because of religious belief or medical condition, a child may not be enrolled in grade 12 in a private school in this State after June 30, 2022, unless the child has received at least one dose of a vaccine protecting against Neisseria meningitidis after he or she obtained 16 years of age.***

7. The provisions of:

(a) Paragraph (a) of subsection 3 do not apply to a child who is enrolled in a private school in this State before July 1, 2002.

(b) Paragraph (b) of subsection 3 do not apply to a child who is enrolled in a private school in this State before July 1, 2003.

(c) Subsection 5 do not apply to a child who is enrolled in a private school in this State before July 1, 2009.

Sec. 12. Chapter 432A of NAC is hereby amended by adding thereto the provisions set forth as sections 13, 14 and 15 of this regulation.

Sec. 13. *The written statement required pursuant to NRS 432A.240 must be submitted to the operator of a child care facility or accommodation facility in which a child who has not been immunized pursuant to NRS 432A.230 or 432A.235, respectively, has been admitted:*

- 1. According to the renewal schedule of the child care facility or accommodation facility, as applicable, or at least annually, whichever is more frequent; and*
- 2. On a form provided by the Division.*

Sec. 14. *The written statement required pursuant to NRS 432A.250 must be submitted to the operator of a child care facility or accommodation facility in which a child who has a medical condition that will not permit the child to be immunized to the extent required by NRS 432A.230 or 432A.235, respectively, has been admitted on a form provided by the Division.*

Sec. 15. *A local health officer may conduct an audit of medical exemptions granted pursuant to NRS 432A.250 in the jurisdiction of the local health officer if:*

- 1. The reported immunization rate of a child care facility or an accommodation facility falls below 95 percent;*
- 2. A child care facility or an accommodation facility fails to report immunization data annually as required by NRS 432A.230 or 432A.235, respectively;*
- 3. The rate of medical exemptions granted by a child care facility or accommodation facility is higher than the average rate of medical exemptions granted by the child care facilities or accommodation facilities in this State, as applicable, as determined by the Division or from data available from the National Immunization Surveys conducted by the Centers for Disease Control and Prevention, or if such a survey or organization ceases to exist, an equivalent federal source; or*
- 4. The local health officer determines such an audit is necessary to protect public health on a case-by-case basis.*

Sec. 16. NAC 441A.755 is hereby amended to read as follows:

441A.755 1. Except as otherwise provided in subsection 10 or unless excused because of religious belief or medical condition, a person shall not attend a university until he or she submits to the university proof of immunity to tetanus, diphtheria, measles, mumps, rubella and any other disease specified by the State Board of Health. The Division shall establish the immunization schedule required for admission of the student.

2. Except as otherwise provided in subsection 10 or unless excused because of religious belief or medical condition, a person who:

- (a) Is less than 23 years of age; and
- (b) Is enrolled as a freshman ,{}

↳ shall not attend a university until he or she submits to the university proof of immunity to *Neisseria meningitidis*. The Division shall establish the immunization schedule required for admission of the student.

3. A student may enroll in the university conditionally if the student, or if the student is a minor, the parent or legal guardian of the student, submits a record of immunization stating that the student is in the process of obtaining the required immunizations, and that record shows that the student has made satisfactory progress toward obtaining those immunizations.

4. The university shall retain the proof of immunity on a computerized record or on a form provided by the Division.

5. The university shall not refuse to enroll a student because he or she has not been immunized if the student, or if the student is a minor, the parent or legal guardian of the student, has submitted to the university a written statement indicating that his or her religious belief prohibits immunizations. The university shall keep the statement on file. ***A statement submitted pursuant to this subsection must be submitted to the university:***

(a) Annually, according to the registration schedule of the university for the duration of the enrollment of the student at the university; and

(b) On a form provided by the Division.

6. If the medical condition of a student does not permit him or her to be immunized to the extent required, the student, or if the student is a minor, the parent or legal guardian of the student, must submit to the university a statement of that fact written by a licensed physician. The university shall keep the statement on file. ***A statement submitted pursuant to this subsection must be submitted to the university on a form provided by the Division.***

7. If additional requirements of immunity are imposed by law after a student has been enrolled in the university, the student, or if the student is a minor, the parent or legal guardian of the student, shall submit an additional proof of immunity to the university stating that the student has met the new requirements of immunity.

8. If the health authority determines that, at the university, there is a case having a communicable disease against which immunity is required for admission to the university, and a student who has not submitted proof of immunity to that disease is attending that university, the president of the university shall require that:

(a) The student be immunized; or

(b) The student be excluded from the university until allowed to return by the health authority.

9. A student shall not attend a university from which he or she is excluded until allowed to return by the health authority. The parent or legal guardian of a student, if the student is a minor, shall not allow the student to attend a university from which he or she is excluded until allowed to return by the health authority.

10. Any student who is enrolled in a program of distance education and who does not attend a class on campus is exempt from the requirements of this section.

11. As used in this section:

(a) "Postsecondary educational institution" has the meaning ascribed to it in NRS 394.099.

(b) "University" means any university within the Nevada System of Higher Education or any private postsecondary educational institution.

Sec. 17. 1. This section and sections 5 and 11 of this regulation become effective upon filing with the Secretary of State.

2. Sections 1 to 4, inclusive, 6 to 10, inclusive, and 12 to 16, inclusive, of this regulation become effective on July 1, 2021.



DIVISION OF PUBLIC & BEHAVIORAL HEALTH

Child, Family, and Community Wellness

Nevada State Immunization Program

LCB File No. R046-20

Informational Statement per NRS 233B.066

1. A clear and concise explanation of the need for the adopted regulation;

Children who are not properly vaccinated are at risk for disease and can spread vaccine-preventable disease to others, including the medically vulnerable who are unable to receive the appropriate immunizations. Improving the process by which exemptions are filed, by developing and requiring a standardized form to be used statewide, can help ensure schools, licensed child care facilities, and universities in Nevada to quickly identify which students are exempt; this knowledge is extremely important for school staff during a vaccine-preventable disease outbreak, as good immunization record-keeping helps protect all students, faculty, and staff at the facility. An opportunity for improvement exists to incorporate the standardized forms into the electronic registry systems used by academic institutions.

Additionally, a standardized process with more robust record-keeping system will generally lead to decreased exemption rates and concurrent increased immunization coverage, as schools can help families track student immunization compliance. Schools and licensed child care facilities have reported to the Nevada State Immunization Program that the use of standardized forms to track and file exemptions would help reduce some of the administrative burden related to registering/enrolling student(s) each year, as well as help during a potential outbreak situation. In general, the cost of controlling large outbreaks due to a vaccine-preventable disease can be substantial. Any method of prevention should be explored and appropriately utilized.

To provide parity with the annual renewal requirement related to religious and temporary medical exemptions, it is recommended that authority be added to monitor the use of permanent medical exemptions which have been signed by a medical doctor, doctor of osteopathic medicine, or an advanced practice registered nurse. As experienced by other states strengthening the exemption process for non-medical exemptions, when a process/procedure adds a burden to the requestor, the risk of exploitation increases. Therefore, granting the local health officer, under the direction and supervision of the State's Chief Medical Officer, the ability to audit medical exemptions at their discretion for proper use becomes imperative to maintain the integrity of the medical exemption process and Nevada's public health laws.

Lastly, these regulations will add the second dose of immunization against *Neisseria meningitides* (e.g., meningococcal disease or meningitis) as a requirement for 12th grade public and private school enrollment in Nevada. As meningitis is a serious communicable disease among adolescents, it is important Nevada students receive age-appropriate protection through vaccination prior to entering school. A 12th grade entry requirement is consistent with Centers for Disease Control and Prevention (CDC) dosing recommendations at 16 years if the student received the first dose upon 7th grade entry.

2. A description of how public comment was solicited, a summary of public response, and an explanation how other interested persons may obtain a copy of the summary;

The Division of Public and Behavioral Health presented several opportunities for the public, regulated community, licensees, registrants and stakeholders to provide input and comments regarding the proposed regulations, including the economic impact the proposed regulations may have on small business and the public. A Small Business Impact Questionnaire was emailed to childcare facilities and private and charter schools, and other registrants on July 9, 2020. Of approximately 985 Small Business Impact Questionnaires distributed, 19 responses were received. One respondent indicated that there was a general adverse economic impact on business and four respondents indicated that there was a general indirect adverse effect on business. One respondent was concerned about the challenges of immunizing students who are ≥ 17 years old and no longer living with their parents; if those students were unable to attend school, the school would experience a profit loss. Another was concerned about how different facilities would implement the law driving parents to prefer one facility over another.

A Public Workshop was conducted on October 2, 2020 by means of teleconference and virtual platform to allow for further input by the public and regulated community regarding the proposed regulations and how they will impact small businesses. There were 29 participants in attendance. There were 6 participants who made public comment. Written comment was received from the public. A summary of comments follows:

- Public comment relating to support of the proposed regulations because all children have the right to be safe in school, childcare, and in the community.
- Public comment relating to ensuring we can do all we are able to ensure overall public health of Nevadans.
- Public comment in support of the regulations.
- Public comment relating to the lifesaving, evidence-based science of immunizations.
- Public comment relating to ensuring schools have the flexibility to set their own exemption renewal dates.
- Public comment relating to the belief that parents should have the ability to submit the form once and not every year.

All comments were taken into consideration.

The proposed regulations in LCB File No. R043-20 were posted on the Division's website with a link provided in the questionnaire. Interested persons can obtain a copy of the Small Business Impact Statement by contacting the Nevada State Immunization Program (NSIP) at (775) 684-5900 in Carson City or by utilizing the link below to our website. http://dpbh.nv.gov/Programs/SIP/dta/Statutes/IZ_Regulations/

3. A statement indicating the number of persons who attended each hearing, testified at each hearing, and submitted written statements regarding the proposed regulation. This statement should include for each person identified pursuant to this section that testified and/or provided written statements at each hearing regarding the proposed regulation, the following information, if provided to the agency conducting the hearing:

Public Workshop – October 2, 2020

A total of twenty-nine (29) individuals attended the public workshop via teleconference. Of those, no individuals were opposed, and six stated they were in support. The remaining individuals did not indicate whether they were in support or opposed to the proposed regulations.

Please see attached public workshop attendance sheet for name, entity or organization represented, and electronic mail address.

Public Hearing – December 10, 2020

Fifty-three (53) participants joined the call but as there were other agenda items on the State Board of Health meeting it is unknown if all participants called in for LCB File No. R046-20.

No one testified in opposition to the adopted regulations.

4. A description of how comment was solicited (i.e., notices) from affected businesses, a summary of their response, and an explanation how other interested persons may obtain a copy of the summary.

Public Workshop:

Nevada Division of Public and Behavioral Health (DPBH) Immunization Program held a Public Workshop on October 2, 2020 to allow for further input by the public and regulated community regarding the proposed regulations prescribed in LCB File No R046-20. The workshop was held via teleconference only pursuant to Governor Sisolak's March 22, 2020, Declaration of Emergency Directive 006, suspending the requirement contained in NRS 241.023(1)(b) that there be a physical location, in order to mitigate the possible exposure or transmission of COVID-19 (Coronavirus). There were 29 participants. Written comment was received from the public. Verbal comment was received from six members of the public listed below.

1. Heidi Parker
(775) 624-7117
heidi@immunizenevada.org
Immunize Nevada
2. Jimmy Lau
(702) 927-3742
jimmy@ferraripa.com
Ferrari Public Affairs
3. Jody Daniels
(503)-951-0693
Jody.Daniels@gsk.com
GlaxoSmith Kline
4. Joelle Gutman-Dodson
JGutman@washoecounty.us
Washoe County Health District
5. Sheri McPartlin
Clark County School District

- 6. Lara Allen
Member of the public

Board of Health Public Hearing:

NOTICE IS HEREBY GIVEN that the State Board of Health will hold a public hearing at 9:00 a.m. on December 10, 2020, via videoconference. The purpose of the hearing is to receive comments from all interested persons regarding to the amendment of regulations that pertain to Chapters 392, 394, 432A, and 441A of Nevada Administrative Code (NAC), LCB File Number R046-20. This public hearing is to be held in conjunction with the State Board of Health meeting on December 10, 2020, via videoconference only pursuant to Governor Sisolak’s March 22, 2020, Declaration of Emergency Directive 006, suspending the requirement contained in NRS 241.023(1)(b) that there be a physical location, in order to mitigate the possible exposure or transmission of COVID-19 (Coronavirus).

Pursuant to NRS 233B.0608(2)(a), the Division of Public and Behavioral Health requested input from stakeholders, small businesses, registrants and licensees that are likely to be affected by the proposed regulations. A Small Business Impact Questionnaire utilizing Survey Monkey was emailed to approximately 3146 licensees and registrants of the Radiation Control Program along with a website link to the proposed regulation changes, on March 23, 2020. 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			
There were 19 responses received out of 985 small business impact questionnaires distributed			
(Q#1) Will a specific regulation have an adverse economic effect upon your business?	(Q#2) Will the regulation(s) have any beneficial effect upon your business?	(Q#3) Do you anticipate any indirect adverse effects upon your business?	(Q#4) Do you anticipate any indirect beneficial effects upon your business?
1- "Yes" Responses	2- "Yes" Responses	4- "Yes" Responses	1- "Yes" Responses
18- "No" Responses	17- "No" Responses	15- "No" Responses	18- "No" Responses

Comments (Q#1):

- High school dropouts would be hard to be vaccinated and could result in revenue loss.
- Hard to know impact in a small town.

Comments (Q#2):

- Hard to know impact in a small town.

Comments (Q#3):

- Regulation unfair for at-risk youth, has potential to lead to higher number of students who drop out of high school
- Hard to know impact in a small town.
- Time spent with auditor.
- Annual medical exemptions could be hard for medical providers to handle.

Comments (Q#4):

5. If, after consideration of public comment, the regulation was adopted without changing any part of the proposed regulation, a summary of the reasons for adopting the regulation without change. The statement should also explain the reasons for making any changes to the regulation as proposed.
 - a. The Immunization Program did not revise regulations because the comments received didn't directly apply to the regulations as proposed.
6. The estimated economic effect of the regulation on the business which it is to regulate and on the public. These must be stated separately, and in each case must include:
 - (a) Both adverse effects: None
 - (b) Beneficial effects: Increased public health and safety.
 - (c) Both immediate and long-term effects: Increased public health and safety.
7. The estimated cost to the agency for enforcement of the proposed regulation.

There is no estimated cost to the Division of Public and Behavioral Health for enforcement of the proposed regulations. Enforcement of the proposed regulations will be incorporated into current administrative, registration, licensing and inspection processes.
8. A description of any regulations of other state or government agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the regulation overlaps or duplicates a federal regulation, name the regulating federal agency.

None
9. If the regulation includes provisions which are more stringent than a federal regulation which regulates the same activity, a summary of such provisions; and

None

10. If the regulation establishes a new fee or increases an existing fee, a statement indicating the total annual amount the agency expects to collect and the manner in which the money will be used.

Not applicable

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

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