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Governor

**NEVADA HEALTH AUTHORITY**  
**HEALTH CARE PURCHASING AND COMPLIANCE DIVISION**

NVHA.NV.GOV



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**Notice of Hearing for the Amendment of Regulations of the Board of Health**

**NOTICE OF INTENT TO ACT UPON A REGULATION**

LCB File No. R036-26

Nevada Administrative Code (NAC) Chapter 449

NOTICE IS HEREBY GIVEN that the State Board of Health will hold a public hearing to consider amendments to Nevada Administrative Code (NAC) as a result of the passage of Senate Bill 260 of the 2023 legislative session. The amendments are proposed in accordance with NRS 449.0302 and NRS 439.150. This public hearing will be held in conjunction with the State Board of Health meeting on June 5, 2026.

The State Board of Health meeting will be conducted via video conference beginning at 9:00 a.m. on June 5, 2026, at the following locations:

**Physical Locations**

Division of Public and Behavioral Health  
Hearing Room 303  
4150 Technology Way  
Carson City, NV 89706

Southern Nevada Health District  
Red Rock Trail Rooms A & B  
208 S. Decatur Blvd.  
Las Vegas, NV 89107

**Virtual Information**

**Meeting Link**

**Microsoft Teams**

[https://teams.microsoft.com/l/meetup-join/19%3ameeting\\_OTUwY2Q2NGQtNjJiYS00NGU2LWI1NjltMjcyMGJjNWU3NDcx%40thread.v2/0?context=%7b%22id%22%3a%22e4a340e6-b89e-4e68-8eaa-1544d2703980%22%2c%22oid%22%3a%22768e443d-3be6-48f0-9bb0-7e72f1276b8d%22%7d](https://teams.microsoft.com/l/meetup-join/19%3ameeting_OTUwY2Q2NGQtNjJiYS00NGU2LWI1NjltMjcyMGJjNWU3NDcx%40thread.v2/0?context=%7b%22id%22%3a%22e4a340e6-b89e-4e68-8eaa-1544d2703980%22%2c%22oid%22%3a%22768e443d-3be6-48f0-9bb0-7e72f1276b8d%22%7d)

Please Note: If you are experiencing technical difficulties connecting online, please call into the meeting to participate by phone.

**Join By Phone**

775-321-6111

Conference ID: 239 762 069#

The proposed regulations provide provisions for the following:

- Establishes requirements for a new facility type: Rural Emergency Department, authorized by Assembly Bill 277 (2023)
- This new facility type parallels the requirements for a same-named, new federal facility type regulated by the Centers for Medicare & Medicaid Services (CMS) to ensure ready compliance to receive reimbursement from the Centers for Medicare & Medicaid Services.
- These regulations also ensure Nevada specific requirements will fall within the proposed regulations.
- The Centers for Medicare & Medicaid Services and these proposed Nevada regulations allow for atypical facility type features including:
  - Existing Critical Access Hospitals (CMS designation) and existing Rural Hospitals (Nevada designation) to convert to Rural Emergency Hospitals without acute inpatient hospital beds and operate as emergency departments 24 hours each calendar day.
  - Existing Critical Access Hospitals and existing Rural Hospitals that convert to Rural Emergency Hospitals may retain all or a portion of their skilled nursing beds or remove their skilled nursing beds.
  - New Rural Emergency Hospitals may choose to operate as freestanding emergency departments, with or without skilled nursing beds. Rural Emergency Hospitals that do not include skilled nursing beds, or that remove skilled nursing beds, may add skilled nursing beds later through the bed increase process.
  - All Rural Emergency Hospitals can provide certain additional medical, day services.

On March 23, 2026, the Health Care Purchasing and Compliance Division determined the impact on small business by distributing a small business impact questionnaire and the proposed regulations to applicable parties and to members of the public who have chosen to subscribe to the Division's health facility specific listserv. A public workshop has been scheduled for May 18, 2026, at 9:00am to hear further comments.

**1. Anticipated effects on the business regulated by the proposed regulations:**

When a Rural Hospital converts to a Rural Emergency Hospital, the following effects are likely:

- There would likely be an overall reduction in the regulatory licensing fee associated with the conversion, and the amount would be based on the following:
  - If the Rural Emergency Hospital would provide freestanding emergency services only.
  - If the Rural Emergency Hospital would include skilled nursing beds:
    - With the number of beds before the conversion; or
    - With the number of beds after the conversion.
  - The amount would vary due to the community's location, how far the hospital is from an urban center, the community's population, the hospital's fiscal situation, and the hospital's residual bed count and composition after the conversion (i.e., the number of acute beds removed and the number of skilled nursing beds retained).
- Those hospitals that do convert to a Rural Emergency Hospital would possibly find cost savings:
  - By not having to maintain staffing for the acute care hospital bed units; and
  - By reducing the struggle with recruitment without the acute care units.
- Hospitals that convert to a Rural Emergency Hospital may be able to generate additional revenue by increasing their skilled nursing bed count from 25 beds to up to 50 beds.

2. **Anticipated effects on the public:** When a Rural Hospital converts to a Rural Emergency Hospital the anticipated effects on the public are likely:

A. Adverse effects:

- Without available acute care beds, previous community patients/members of the public would possibly be inconvenienced to have to go to an urban hospital for acute care hospitalization.

B. Beneficial effects:

- Beneficial effects may be a more solvent hospital that can continue to stay open in the community to provide emergency services and possible skilled nursing resident housing and services.
- The hospital may be able to offer day services, such as outpatient surgery and outpatient rehabilitation services.

C. Immediate effects:

- The conversion processes could be initiated immediately with state licensing.
  - The conversion process for state licensing has many variables, and timelines vary depending on those variables.
- State licensing is dependent on how quickly the conversion license applicant can complete the license application.
- The cessation of the acute inpatient beds is determined by the hospital providing safe discharges or transfers to another licensed facility.
- Based on the hospital's current resources, a fully resourced Rural Emergency Hospital could theoretically initiate a day service program.
- Some hospitals that are not fully resourced must submit plans and do construction to make necessary physical changes for a day service program.

D. Long-term effects:

The intent of this new facility type is to provide an alternative for rural communities to continue to have hospital emergency services without acute hospital beds to staff and maintain. Cost savings could accrue, making the hospital more economically viable. Rural Emergency Hospitals could divert previous inpatient expenditures toward day service programs and/or toward adding or expanding the number of skilled nursing beds as revenue streams.

**3. Costs Associated with the Change**

- After adoption of the Rural Emergency Hospital regulations, a licensed Rural Hospital that seeks to convert to a Rural Emergency Hospital must submit a Rural Emergency Hospital license application and pay the applicable fees listed in the regulations. The fee amount is based on whether the Rural Emergency Hospital elects to provide either a freestanding emergency department only, or a freestanding emergency department with a selected number of skilled nursing beds, not to exceed 50 beds.
- The Rural Hospital that converts to, or plans to convert to, a Rural Emergency Hospital that requires physical changes to its building would have the same costs for the plan review process and inspection process as exist for all licensed hospitals in Nevada.

**4. Comparison of State Proposed Regulation to the Federal Regulations**

- The proposed state regulations for Rural Emergency Hospitals would adopt the federal regulations so that the requirements are similar, which helps ensure reimbursement through the Centers for Medicare & Medicaid Services.
- The proposed state regulations for Rural Emergency Hospitals reference pertinent state hospital regulations:
  - To correlate with the statutory requirements to be a hospital, which are similar to the federal regulations;
  - To correlate with certain day service programs if they were to be provided, which are similar to the federal regulations; and
  - To correlate with state specific and statutory requirements not found in the federal regulations (such as background checks), which are in addition to the federal regulations.
- The state regulations for Rural Emergency Hospitals reference the state skilled nursing regulations if the Rural Emergency Hospital elects to provide skilled nursing care and are similar to the federal 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, to be received no later than May 21, 2026, at the following address:

Secretary, State Board of Health  
Division of Public and Behavioral Health  
4150 Technology Way, Suite 300  
Carson City, NV 89706  
[stateBOH@health.nv.gov](mailto:stateBOH@health.nv.gov)

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:

- Nevada Division of Public and Behavioral Health – 4150 Technology Way, Suite #300, Carson City, NV 89706
- Nevada Health Authority – 4070 Silver Sage Dr. Carson City, NV 89701
- Nevada Health Authority – 9850 Double R Blvd., Suite 200, Reno, NV 89521
- Nevada Health Authority/Bureau of Health Care Quality and Compliance – 727 Fairview Dr., Suite E, Carson City, NV 89701
- Nevada Health Authority/Bureau of Health Care Quality and Compliance – 500 E Warm Springs Rd., Suite 200, Las Vegas, NV 89119
- Nevada State Library and Archives – 100 Stewart Street, Carson City, NV, 89701
- Southern Nevada Health District Red Rock Trail Rooms A & B – 208 S. Decatur Blvd., Las Vegas, NV 89107

A copy of the regulations and small business impact statement can be found on-line by going to:  
<https://www.hcqc.nv.gov/notices/>

A copy of the public hearing notice can also be found at Nevada Legislature's web page:  
<https://www.leg.state.nv.us/App/Notice/A/>

Copies may be obtained in person, by mail, or by calling the Bureau of Health Care Quality and Compliance at:

Bureau of Health Care Quality and Compliance 727 Fairview Drive, Suite E  
Carson City, NV 89701  
(775) 684-1030  
[PIO@nvha.nv.gov](mailto:PIO@nvha.nv.gov)

Copies may also be obtained from the Nevada State Library at the address listed below:

Nevada State Library & Archives  
100 N. Stewart Street  
Carson City, NV 89701

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.