Office of Regulatory Management

Economic Review Form

Agency name	State Board of Health
Virginia Administrative Code (VAC) Chapter citation(s)	12VAC5-371-10 et seq.
VAC Chapter title(s)	Regulations for the Licensure of Nursing Facilities
Action title	Amend Regulation after Enactment of Chapters 712 and 772 of the 2022 Acts of Assembly
Date this document prepared	December 12, 2022

Cost Benefit Analysis

Table 1a: Costs and Benefits of the Proposed Changes (Primary Option)

(1) Direct Costs & Benefits	 Creates a new process that is exempt from the requirement to obtain a nursing home license to allow nursing home to temporarily increase their bed inventory during disasters or other public health emergencies. Direct Costs: VDH is not aware of any quantifiable direct costs at this time. Direct Benefits: VDH is not aware of any quantifiable direct costs at this time. 			
(2) Quantitative				
Factors	Estimated Dollar Amount	Present Value		
Direct Costs	(a) \$0	(c) \$0		
Direct Benefits	(b) \$0	(d) \$0		
(3) Benefits-		(4) Net		
Costs Ratio	0.00	Benefit	0.00	
(5) Indirect Costs & Benefits	VDH is not aware of any quantifiable indirect costs or indirect benefits at this time.			
(6) Information Sources	VDH Division of Certificate of Public Need; VDH Division of Acute Care Services; VDH Division of Long-Term Care Services			

(7) Optional	VDH has numerous challenges and constraints that limit a cost benefit			
	analysis, including limited data availability and insufficient analytical models.			
	The qualitative benefit of this regulatory change is creation of an expeditious process by which nursing homes can request temporary beds during disasters or emergencies.			

Table 1b: Costs a	nd Benefits under the Status Q	uo (No chai	nge to the regulation)	
(1) Direct Costs & Benefits	 Nursing homes are exempt from the requirement to obtain a changed license to temporarily increase their bed inventory for a period of no more than 30 days during disasters that cause the evacuation of a hospital or nursing home. Direct Costs: VDH is not aware of any quantifiable direct costs at this time. Direct Benefits: VDH is not aware of any quantifiable direct costs at this time. 			
(2) Quantitative				
Factors	Estimated Dollar Amount	Estimated Dollar Amount		
Direct Costs	(a) \$0	(a) \$0		
Direct Benefits	(b) \$0	(b) \$0		
(3) Benefits- Costs Ratio	0.00	0.00	0.00	
(5) Indirect Costs & Benefits	VDH is not aware of any quantifiable indirect costs or indirect benefits at this time.			
(6) Information Sources	VDH Division of Certificate of Public Need; VDH Division of Acute Care Services; VDH Division of Long-Term Care Services			
(7) Optional	VDH has numerous challenges and constraints that limit a cost benefit analysis, including limited data availability and insufficient analytical models.			
	The qualitative benefit of this regulatory change is creation of an expeditious process by which nursing homes can request temporary beds during disasters or emergencies.			

Table 1c: Costs and Benefits under an Alternative Approach

(1) Direct Costs & Benefits	 Creates a new process that is exempt from the requirement to obtain a nursing home license to allow nursing homes to temporarily increase their bed inventory during disasters or other public health emergencies, but that requires less information to be disclosed initially. Direct Costs: VDH is not aware of any quantifiable direct costs at this time. Direct Benefits: VDH is not aware of any quantifiable direct costs at this time. 			
(2) Quantitative	Estimate 1 Dellan Amazzat	D	1	
Factors	Estimated Dollar Amount	Present Va	nue	
Direct Costs	(a) \$0	(c) \$0		
Direct Benefits	(b) \$0	(d) \$0		
(3) Benefits-		(4) Net		
Costs Ratio	0.00	Benefit	0.00	
(5) Indirect Costs & Benefits	VDH is not aware of any quantifiable indirect costs or indirect benefits at this time.			
(6) Information Sources	VDH Division of Certificate of Public Need; VDH Division of Acute Care Services; VDH Division of Long-Term Care Services			
(7) Optional	VDH has numerous challenges and constraints that limit a cost benefit analysis, including limited data availability and insufficient analytical models.			
	The qualitative benefit of this regulatory change is decreased by not requiring nursing homes to disclose all necessary information initially as that slows VDH's evaluation of their request and any subsequent approval and operationalized of temporary beds during disasters or emergencies.			

Impact on Local Partners

Table 2: Impact on Local Partners

(1) Direct Costs & Benefits	 Creates a new process that is exempt from the requirement to obtain a nursing home license to allow nursing homes to temporarily increase their bed inventory during disasters or other public health emergencies. Direct Costs: VDH is not aware of any quantifiable direct costs at this time. Direct Benefits: VDH is not aware of any quantifiable direct costs at this time.
(2) Quantitative	
Factors	Estimated Dollar Amount
Direct Costs	(a) \$0
Direct Benefits	(b) \$0
(3) Indirect	VDH is not aware of any quantifiable indirect costs or indirect benefits at
Costs &	this time.
Benefits	
(4) Information Sources	VDH Division of Certificate of Public Need; VDH Division of Acute Care Services; VDH Division of Long-Term Care Services
(5) Assistance	None.
(6) Optional	VDH has numerous challenges and constraints that limit a cost benefit analysis, including limited data availability and insufficient analytical models. The qualitative benefit of this regulatory change is creation of an expeditious
	The qualitative benefit of this regulatory change is creation of an expeditious process by which nursing homes can request temporary beds during disasters or emergencies.

Economic Impacts on Families

Table 3: Impact on Families

(1) Direct Costs	Families will not incur any direct costs or benefits of the regulatory change
& Benefits	as they are not subject to the mandates contained in 12VAC5-371.

(2) Quantitative	
Factors	Estimated Dollar Amount
Direct Costs	(a) \$0
Direct Benefits	(b) \$0
(3) Indirect	VDH is not aware of any quantifiable indirect costs or indirect benefits at
Costs &	this time.
Benefits	
(4) Information	VDH Division of Certificate of Public Need; VDH Division of Acute Care
Sources	Services; VDH Division of Long-Term Care Services
(5) Optional	VDH has numerous challenges and constraints that limit a cost benefit analysis, including limited data availability and insufficient analytical models.
	The qualitative benefit of this regulatory change is creation of an expeditious process by which nursing homes can request temporary beds during disasters or emergencies. Additionally, for families, the ability of nursing homes to ask for and be granted temporary beds during disasters or emergencies will have
	the qualitative benefit of keeping ill family members within their community, which may reduce the burden and stress on the family.

Impacts on Small Businesses

Table 4: Impact on Small Businesses

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(1) Direct Costs	VDH is not aware of any small business that would be affected by this			
& Benefits	regulatory change. To the extent there may be one, please see the analysis			
	below.			
	 Creates a new process that is exempt from the requirement to obtain a nursing home license to allow nursing homes to temporarily increase their bed inventory during disasters or other public health emergencies. Direct Costs: VDH is not aware of any quantifiable direct costs at this time. 			
	Direct Benefits: VDH is not aware of any quantifiable direct costs at this time.			

(2) Quantitative	
Factors	Estimated Dollar Amount
Direct Costs	(a) \$0
Direct Benefits	(b) \$0
(3) Indirect Costs & Benefits	VDH is not aware of any quantifiable indirect costs or indirect benefits at this time.
(4) Alternatives	The State Board of Health was not able to identify any alternatives for small businesses that would be more equitable while still protecting the health, safety, and welfare of the public, and has put forth thoughtful consideration about the burdens of the new regulatory requirements and has limited these amendments to those necessary to achieve that purpose. VDH cannot ensure compliance with the statutory minimum of safe staffing of nursing home temporary beds if in an disaster or emergency, it does not have knowledge of how many nursing homes are operating temporary beds, how many temporary beds there are, what temporary beds are being used for, how the temporary beds are staffed, where they are physically located (both generally in the Commonwealth and specifically within the facility), and whether that location is a fire risk to staff and patients.
(5) Information Sources	VDH Division of Certificate of Public Need; VDH Division of Acute Care Services; VDH Division of Long-Term Care Services
(6) Optional	VDH has numerous challenges and constraints that limit a cost benefit analysis, including limited data availability and insufficient analytical models.
	The qualitative benefit of this regulatory change is creation of an expeditious process by which nursing homes can request temporary beds during disasters or emergencies.

Changes to Number of Regulatory Requirements

Table 5: Total Number of Requirements

	Number of Requirements			
Chapter number	Initial Count	Additions	Subtractions	Net Change
371	1357	5	0	1362