

Medical Debt Collection
Small Business Impact Questionnaire
(Response Requested by September 10, 2021)

The Nevada Financial Institutions Division (NFID) is planning to promulgate regulations in support of S.B.248 governing Medical Debt Collection under NRS Chapter 649-Collection Agencies and will hold a workshop(s) in the near future in order to begin the process of drafting regulations to comply with S.B.248 that passed in the 2021 Legislative session.

The subjects for the proposed regulatory language are as follows:

1. Define “action to collect a debt”.
2. Provide for the timing of when the 60-day notification letter shall be sent.
3. Provide for the content in the 60-day notification letter.
4. Provide other matters properly relating to the regulation of S.B.248.

The following questions pertain to how the new language to the Nevada Administrative Code regarding medical debt collection will affect your business. If it is determined that the proposed regulatory language is likely to impose a direct and significant economic burden upon a small business, or directly restrict the formation, operation or expansion of a small business, the Financial Institutions Division can take any of the following actions:

1. Insofar as practicable, consult with owners and officers of affected small businesses;
2. Consider methods to reduce the impact of the proposed regulations; and
3. Prepare a small impact statement and make copies of the statement available to the public at the workshop conducted and the public hearing held pursuant to Nevada Revised Statutes (NRS) 233B.061.

Please answer each of the questions that apply and add any qualifying remarks that may help us to understand your position. Please mail, fax, or email your completed form by September 10, 2021.

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Financial Institutions Division
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Collection Agency- Medical Debt Collections
Small Business Impact Questionnaire

Name _____

Organization _____

Date _____

NRS 233B.0382- Small Business is defined as a business conducted for profit, which employs fewer than 150 full-time or part-time employees.

1. How many employees are currently employed by your business? _____

If more than 150, you will not need to answer the rest of the questions. **Please return the questionnaire to 3300 W. Sahara Ave., Suite 250 89102, or Email to FIDmaster@fid.state.nv.us, or Fax to (702) 486-4563.**

If your business has less than 150 employees, please continue and answer the remaining questions.

2. Will any of the above proposed regulatory language have an adverse economic effect upon your business?

Yes _____

No _____

Explain: Please list which of the above will negatively impact your business and explain the impact.

3. Will any of the above proposed regulatory language have a beneficial economic effect on your business?

Yes _____

No _____

Explain: Please list which of the above will have a beneficial impact your business and explain the impact.

4. Do you anticipate any indirect adverse effects on your business?

Yes _____

No _____

Explain: Please list which of the above will have indirect adverse effects on your business and explain the impact.

5. Do you anticipate any indirect beneficial effects on your business?

Yes _____

No _____

Explain: Please list which of the above will have indirect beneficial effects on your business and explain the impact.

6. Please list any suggestions pertaining to the proposed regulatory changes.