

SUMMARY OF STATE-SPECIFIC GOVERNMENT RESPONSE TO COVID-19 IN THE US 2020/2021

NEVADA

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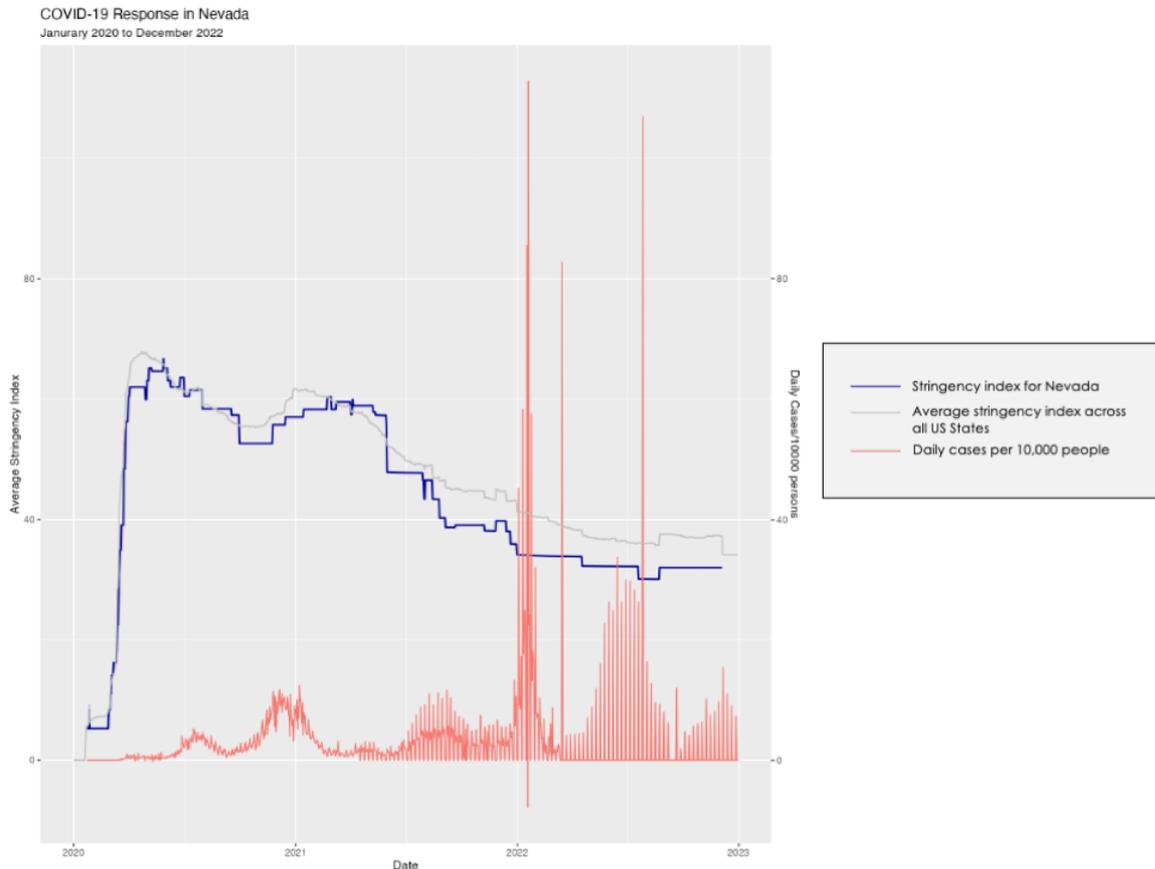
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Nevada

Summary of Government Response to COVID-19



COVID-19 Response in Nevada: Using the OxCGRT Stringency Index for Nevada (blue) and the average OxCGRT Stringency Index across all US states, the above shows the overall government response to COVID-19 in Nevada in comparison to the average US state response from January 2020 to December 2022. This also displays the number of daily cases per 10,000 people in Nevada (red).

Summary

Governor Sisolak first responded to the COVID-19 pandemic on February 20th, 2020 urging caution to citizens of Nevada regarding the virus and opening testing sites preceding the states' first case on March 5th, 2020 and death on March 16th, 2020. These policies are represented as H1 and H2 indicators in OxCGRT data.

Closure and Containment

The indicators for closure and containment are measured on an ordinal scale and encompass government responses that required or recommended temporary closures of institutions, limitations on travel, and restrictions of gatherings or events. The measurement of these indicators included a binary flag that indicated the geographic scope of the government responses coded. Differentiated policies, or policies that were specifically directed at those vaccinated or unvaccinated, are indicated when flagged as 'Vaccinated' or 'Non-Vaccinated'.

C1: School closures

C1 records closings of schools and universities and is measured as 0 (no measures), 1 (recommend closing or all schools open with alterations resulting in significant differences compared to non-Covid-19 operations), 2 (require closing only some levels or categories, e.g., just high school, or just public schools), or 3 (require closing all levels).

First school closure policies became active on March 16, 2020, when the Governor of Nevada, Steve Sisolak ordered a COVID-19 Declaration of Emergency Directive detailing that all kindergarten through 12th grade schools would close to students. School closures escalated from 2G to 3G on March 18, 2020, at which time Chancellor of Nevada System of Higher Education (NSHE) Thom Reilly issued guidance requiring all NSHE institutions to close. At this time, all students living on campus were asked to return home, if possible. This remained as such until Governor Sisolak signed a directive on June 9, permitting local school districts, charter schools and private schools to immediately reopen for summer learning and activities. At this time, coding changed from 3G to 3T, since Clark County School District, the largest county in Nevada, opted to remain closed until March 1, 2021. Clark County reintroduced in-person learning by staggering grade levels returning to campus. By April 6, 2021, all grade levels across the state were attending school in-person or with hybrid learning models.

The Nevada State Board of Health unanimously approved COVID-19 vaccine requirements for the spring semester for Nevada System of Higher Education (NSHE) students at an emergency meeting held August 20th, 2021. However, on December 21, 2021, the Legislative Commission, failed to pass item R069-21, and eliminated the legal basis to require student vaccines as a requirement to register for classes at NSHE institutions. Students in Nevada never had a vaccine mandate in effect. At the close of the fall semester of 2021, there was no further evidence of restrictions, other than masking which is coded in H6. OxCGRT coding reflected a code of 0 at the conclusion of 2021.

C2: Workplace closures

C2 records closings of workplaces and is measured as 0 (no measures), 1 (recommend closing or recommend work from home or all businesses open with alterations resulting in significant differences compared to non-Covid-19 operations), 2 (require closing or work from home for some sectors or categories of workers), or 3 (require closing or work from home for all-but-essential workplaces, e.g., grocery stores, doctors).

On March 15, 2020, Governor Sisolak issued a directive instructing any employee that has the option to work from home to do so. This was followed on March 17, with the first business closures for some state workforces, as well as voluntary closures of buffets on the Las Vegas strip. Non-essential businesses were ordered to close a few days later, on March 20, with little exceptions. A coding of 3G reflects these measures until April 28, 2020, when the coding changed to 2G as non-essential business closures began to relax. First businesses in Nevada to re-open were non-essential medical procedures, followed by retail businesses with curbside commerce and outdoor activities. By June 4, all businesses including casinos were permitted to re-open, and OxCGRT coding changed to 1G to reflect this. Health and safety policies enforced by the state for all businesses reopening were still in effect.

On July 10, 2020, the Declaration of Emergency 027 was issued, closing certain sectors selling alcohol in counties that have higher uptick in COVID-19 cases. OxCGRT coding changed to a 2T at this time to reflect differences among counties, until September 17, 2020, when all counties were permitted to re-open bars. On November 24, 2020, Governor Sisolak announced additional restrictions to help slow the spread of COVID-19 in Nevada, including reduced capacities for businesses. Restaurants, bars, gaming operations, gyms, fitness facilities and other businesses and activities were limited to 25 percent of applicable fire code capacity. All businesses except a very select few (brothels, nightclubs) were open. Those select few that were not open had not been open since March 24, 2020. These changes remained in effect until June 1, 2021, at which time Governor Sisolak declared Nevada 100% open across the state with pandemic guidelines no longer implemented. From June 1st, 2021, onwards, C2 is coded as a 0 until the end of December 2021.

C3: Cancel public events

C3 records cancelling public events and is measured as 0 (no measures), 1 (recommend cancelling), or 2 (require cancelling).

On March 15, 2020, Governor Sisolak asked local governments to enforce a new provision limiting public gatherings to 50 percent or less capacity. Faith leaders were also asked to postpone services if they could not provide social distancing protocols. OxCGRT coding is 1G from March 15 until March 24,

2020, when stricter policies requiring venues or spaces that often held events (e.g., libraries, social clubs, parks, sports) were to close for public events. Coded as a 2G from March 24 until September 30, at which point coding changed to 1G. On September 30, 2020, a new executive order permitted public gatherings if attendance did not exceed 250 people or 50% venue capacity, whichever was lower. Policies became stricter on November 24, 2020, when Governor Sisolak announced new limits, with large events or groups larger than 50 people no longer permitted.

On February 15, 2021, gathering restrictions expanded from up to 50 individuals or 25% capacity to up to 100 individuals or 35% capacity. At this time, Nevada also began to allow “Large Gathering Plans” to be submitted by local governments for approval by the state. On March 15, 2021, State Directive 41 went into effect, which allowed public events of more than 250 people (but less than 50% building capacity) as long as plans were submitted and approved by the state. Public events of less than 250 people were allowed, no approval necessary. With Las Vegas as a commerce industry, the constantly changing policies reflected the difficulties the state faced, being forced to balancing the economic needs of the state with mitigating the risks of the pandemic. On June 1, 2021, Nevada was declared fully open with no restrictions.

C4: Restrictions on gatherings

C4 records limits on gathering and is measured as 0 (no restrictions), 1 (restrictions on very large gatherings where the limit is above 1000 people), 2 (restrictions on gatherings between 101-1000 people), 3 (restrictions on gatherings between 11-100 people), or 4 (restrictions on gatherings of 10 people or less).

The initial restrictions for gatherings in the state of Nevada came into effect on March 24, 2020, when Governor Sisolak signed a directive that restricted gatherings to 10 people or fewer. This policy continued until May 29, 2020 and was coded as a 4G. On May 29, 2020, the state relaxed gathering limitations and public and private gatherings were permitted with up to 50 people, so long as social distancing protocols were followed. Coding changed to 3G until October 1, 2020, at which time Directive 033 allowed for gatherings of less than 250 individuals or 50% of fire code capacity, whichever one is less. The capacity limit applied to both indoor and outdoor gatherings with social distancing and other hygiene requirements required to be maintained. At this time, C4 was coded as a 2G.

On November 24, 2020, increased restrictions were implemented in order to slow the spread of COVID-19. Gatherings were now limited to 10 individuals and below with no more than two households mixing and face masks must be worn. OxCGRT coding changed to 4G at this time to reflect stricter policies. On December 28, 2020, large gatherings in Nevada were permitted with up to 50 people or 25% capacity. Private gatherings

continued to have limitations of 10 people or fewer from no more than two households, whether indoors or outdoors. On February 15, 2021, large gatherings in Nevada increased to 100 individuals or 35 percent capacity, but private social gatherings remained restricted to 10 people indoors and 25 people outdoors. On May 31, 2021, restrictions loosened as gatherings of 50 people or less were permitted, resulting in a 3G code. The next day, June 1, 2021, Nevada was declared officially 100 percent reopened with no restrictions reflected with a 0 OxCGRT code.

C5: Public transport closures

C5 records the closing of public transport and is measured as 0 (no measures), 1 (recommend closing or significantly reduce volume/route/means of transport available), or 2 (require closing or prohibit most citizens from using it).

No public transport closure policies were implemented in the state of Nevada from January 2020 to December 2021.

C6: Stay-at-home requirements

C6 records orders to "shelter-in-place" and otherwise confine to the home and is measured as 0 (no measures), 1 (recommend not leaving house), 2 (require not leaving house with exceptions for daily exercise, grocery shopping, and 'essential' trips), or 3 (require not leaving house with minimal exceptions, e.g., allowed to leave once a week, or only one person can leave at a time, etc).

A stay-at-home advisory was cautioned on 20 March, 2020 by Governor Sisolak, reflected with a 1G OxCGRT code. The advisory was followed by the first stay-at-home order on April 1, 2020, requiring non-essential workers to stay-at-home, Coding was updated to 4G at this time. On May 9, 2020, the order was replaced with an advisory complementing Phase 1 of reopening that encouraged the public to stay home as much as possible. These advisories ended gradually and naturally as restrictions on businesses were eased and the state reopened. As of September 30, 2020, the state of Nevada no longer indicates any kind of stay-at-home restrictions.

C7: Restrictions on internal movement

C7 records restrictions on internal movement between states and is measured as 0 (no measures), 1 (recommend not to travel between states), or 2 (internal movement restrictions in place).

The first date domestic travel restrictions were indicated was on March 31, 2020, when Governor Sisolak urged people entering the state to self-quarantine, asking travel agencies and transport companies to distribute

material to travellers educating them to do so upon arrival. Coded as 1G at this time until November 10, 2020, when visiting Nevada was encouraged. Despite stay-at-home orders still in place for Nevada residents, on November 10, 2020, in a press release, Governor Sisolak encouraged out of state visitors to travel to Nevada. With Las Vegas historically known as a tourist destination, the state of Nevada had difficulty restricting tourism during the pandemic due to the economic impacts. These conflicting policies for residents as compared to visitors reflected the tension in lawmakers in Nevada at the time.

C8: International travel controls

C8 records restrictions on international travel for foreign travellers (not citizens) and is measured as 0 (no restrictions), 1 (screening arrivals), 2 (quarantine arrivals from some or all regions), 3 (ban arrivals from some regions), or 4 (ban on all regions or total border closure).

Nevada has no further policies restricting international travel beyond that of the federal level.

Federal regulations dictated that starting on February 2, 2020, travellers from Hubei province in China were required to quarantine after arrival in the United States. This was quickly replaced with bans on individuals entering from multiple countries beginning on March 2, 2020. Policies changed in November 2021, where vaccinated non-citizens were permitted to enter the United States. Unvaccinated individuals were not permitted to enter. However, on November 27, 2021, the United States began banning travellers from certain countries regardless of vaccination status. President Biden and his administration lifted these bans on December 31st, 2021, implementing a differential policy for vaccinated and unvaccinated persons entering the country internationally.

Economic Response

The indicators for economic policies measured the policies that provided economic support from the state government in response to the COVID-19 pandemic. The economic indicators recorded at the subnational level in the US were E1 and E2, which are measured on an ordinal scale without a flag indicating the geographic scope.

E1: Income support

E1 records if the government is providing direct cash payments to people who lose their jobs or cannot work and is measured as 0 (no income support), 1 (government is replacing less than 50% of lost salary or if a flat sum, that is less than 50% median salary),

or 2 (government is replacing 50% or more of lost salary or if a flat sum, that is greater than 50% median salary).

On May 19, 2020, eligibility requirements for unemployment assistance were changed to include individuals whose jobs were impacted by the COVID-19 pandemic and persons who were forced to quarantine for a maximum of \$469/week for up to 26 weeks, unless extended by law. Coded 1F until July 19, 2020, the date the policy expired. No further assistance was offered beyond this date until the end of 2021.

E2: Debt/contract relief

E2 records if the government is freezing financial obligations for households (e.g., stopping loan repayments, preventing services like water from stopping, or banning evictions) and is measured as 0 (no debt/contract relief), 1 (narrow relief, specific to one kind of contract), or 2 (broad debt/contract relief).

On the March 29, 2020, the state government introduced a moratorium on all evictions that occurred during the state of emergency for COVID-19. In addition to a moratorium on all evictions in the state of Nevada, additional COVID-19-related relief measures, including a 90-day grace period on mortgage payments and \$2 million in settlement funds to United Way of Southern Nevada and United Way of Northern Nevada for their Emergency Food and Shelter Programs was provided. Coded a 1 on the OxCGRT framework until May 1, 2020, when coverage broadened. In addition to previously announced eviction moratorium, Governor Sisolak signed a directive to freeze some garnishment actions and judgements against bank accounts, not applying to judgements for child support, spousal support, or restitution to victims of crimes.

On July 1, 2020, Governor Sisolak signed a directive to slowly lift the moratorium on evictions and foreclosures over the coming months. According to this new directive, for commercial tenancies and mortgages, landlords and lenders were able to charge late fees, initiate lock outs, or state eviction actions starting July 1. Evictions and foreclosures were able to resume in full by September 1, 2020. On October 15, the state of Nevada's moratorium on evictions expired and citizens were reminded of the federal restrictions in place by the CDC regarding evictions.

Public Health Responses

The public health response indicators recorded health system responses to the COVID-19 pandemic. The indicators recorded at the subnational level in the US were H1, H2, H3, H6, H7, and H8. The geographic scope of these policies was marked by an ordinal flag for indicators H1, H6, and H8. Differentiated policies, or policies that were specifically directed at those vaccinated or unvaccinated, are indicated when flagged as 'Vaccinated' or 'Non-Vaccinated' for indicators H6 and H8.

H1: Public information campaigns

H1 records the presence of public info campaigns and is measured as 0 (no Covid-19 public information campaign), 1 (public officials urging caution about Covid-19), or 2 (coordinated public information campaign, e.g., across traditional and social media).

The first public information regarding the COVID-19 pandemic was dispersed on February 28, 2020, in the form of a press conference providing advice regarding effective hygiene practices and potential risk factors of viral spread. No other platforms were launched at this time, indicating a 1G coding. Less than one week later, beginning on March 4, 2020, the state government implemented regular weekly briefings and updates regarding COVID-19, coordinating a large-scale public information campaign. Coding changed from 1G to 2G at this time. Public service announcements were expanded into six different languages, providing key updates regarding the response to COVID-19. On January 2, 2021, the Nevada Department of Health announced the launch of their COVID website and dashboard. The website remained active and updated for the remainder of 2021.

H2: Testing policy

H2 records government policy on who has access to testing and is measured as 0 (no testing policy), 1 (only those who both have symptoms AND meet specific criteria, e.g., key workers, admitted to hospital, encountered a known case, returned from overseas), 2 (testing of anyone showing Covid-19 symptoms), or 3 (open public testing, e.g., "drive through" testing available to asymptomatic people).

The first individual to be tested for COVID-19 in Nevada was on January 29, 2020. The federal government controlled testing for January and February of 2020, indicating a 0 coding on the OxCRGT for state level testing. The coding changed to a 1 when the state began testing for symptomatic and eligible individuals on March 7, 2020, when two state-run sites began processing COVID-19 testing. Federal authorities later expanded the state of Nevada's scope to produce its own testing kits on March 23, 2020, impacting the states' abilities to not only perform testing, but develop tests to aid with

supply issues. On March 24, University of Nevada Las Vegas opened drive-through testing for eligible symptomatic individuals via appointment. Tests became generally available to the public regardless of symptoms, and without appointments on May 28, 2020, at which time the OxCRGT coding was changed to a 3. The University Medical Center in Nevada began testing all admitted patients, indicating a higher test supply in the state. At what time, testing was available to all individuals with several drive-thru testing centres throughout the state. Testing stayed widely available to the general public through the end of 2021.

H3: Contact tracing

H3 records government policy on contact tracing after a positive diagnosis and is measured as 0 (no contact tracing), 1 (limited contact tracing; not done for all cases), or 2 (comprehensive contact tracing; done for all identified cases).

Evidence of limited contact tracing became first available on March 31, 2020. On this date, two doctoral and five public health students from the Southern Nevada Health District completed training and set up a call centre. With such a small group, the demand of cases became overwhelming, proving difficult to perform contact tracing for all cases. This ultimately set the tone for contact tracing in Nevada throughout the pandemic. On April 20, reports showed that the Nevada Guard was brought in to aid with the high demand of sample collection and contact tracing. A statement from the governor on May 26, 2020, indicated the state was struggling with the high volume of cases and current levels of contact tracing were not comprehensive.

On June 1, 2020, the state of Nevada utilised workforce agencies in attempts to establish comprehensive contact tracing centres. By August 24, 2020, the state of Nevada launched a digital contact tracing app, "COVID Trace", which became the primary tactic to perform contact tracing. Manual contact tracing remained limited. On September 20, the University of Nevada Las Vegas reported it will be expanding its COVID-19 contact tracing program, with the endorsement of a \$3.4 million grant from the State of Nevada. The effort, in partnership with the Southern Nevada Health District (SNHD), employed more than 200 university students to assist in identifying and reaching out to individuals who may have been exposed to those testing positive for COVID-19. On October 16, the Nevada Department of Health and Human Services published a report indicating only 25.5 percent of COVID-19 cases in Nevada were reported through extensive contact tracing efforts. Contact tracing levels in Nevada remained limited, with most cases only identified through the app and no evidence of comprehensive tracing at any point throughout the pandemic.

H6: Facial Coverings

H6 records policies on the use of facial coverings outside the home and is measured as 0 (no policy), 1 (recommended mask wearing), 2 (required in some specified shared/public spaces outside the home with other people present, or some situations when social distancing not possible), 3 (required in all shared/public spaces outside the home with other people present or all situations when social distancing not possible), or 4 (required outside the home at all times regardless of location or presence of other people).

On April, 3, 2020, the Nevada Department of Health recommended face coverings for the public in order to decrease transmission of the COVID-19 virus, resulting in a 1G coding. Following this, the first masking policy became active on May 9, 2020, when the state implemented reopening policies. At this time, masks were required by employees who interacted with the public, warranting a 2G coding. On June 24, 2020, the Governor of Nevada ordered masks to be worn in public with some exceptions such as restaurants/bars. Policies became slightly stricter, with state-wide mask mandates lasting until July 30th, when Directive 047, came into effect. Directive 047 required all counties experiencing high levels of Covid-19 cases to impose an indoor mask mandate for both vaccinated and unvaccinated individuals. Coding was 3G from June 24, 2020 until May 13, 2021.

On May 13, 2021, a differential policy regarding vaccinated and unvaccinated individuals was implemented by the state. The Nevada Governor released an emergency directive in alignment with new Center for Disease and Control (CDC) guidelines for easing masking on vaccinated individuals. The new recommendations from the federal agency still call for masks in crowded indoor settings like buses, planes, hospitals, prisons and homeless shelters for all individuals regardless of vaccination status. Code changed to 3G/2G at this time to reflect the differential policy between unvaccinated and vaccinated individuals. For the period from September 21, 2021 - October 7, 2021, the transmission for all counties in Nevada was classified as high, triggering a mask mandate across the state. All counties, except Esmeralda County which was released from the mandate on November 23, were required to wear masks indoors. Case numbers remained high until the end of December 2021, and the mask mandate, Directive 047, continued throughout the state until the end of 2021.

H7: Vaccination policy

H7 records policies for vaccine delivery for different groups 0 (no availability), 1 (availability for ONE of following: key workers/clinically vulnerable groups that are non elderly/ elderly groups), 2 (availability for TWO of following: key workers/clinically vulnerable groups that are non elderly/elderly groups), 3 (availability for ALL of following: key workers/clinically vulnerable groups that are non-elderly/elderly groups), 4 (availability for all three plus partial additional availability for select broad groups/ages), or 5 (universal availability).

On December 15, 2020, the Nevada Department of Health announced that doses of the Pfizer vaccine had been distributed in order to vaccinate frontline healthcare workers. Following this, on December 21, the Moderna vaccine became available in Nevada. On January 14, 2021, the vaccine eligibility expanded to individuals 70+ who first received vaccines in the Las Vegas area. By February 2, 2021, vaccines were generally available (depending on county) to senior citizens, healthcare workers, educators, and police/first responders. On March 9, 2021, Johnson and Johnson vaccines along with Moderna and Pfizer were administered with some counties beginning to offer vaccines to people aged 16-64 who had underlying health conditions. On April 5, 2021, vaccines became available to all individuals aged 16 or older. Vaccination expanded to children older than 12 on May 13, 2021 and by November 21, 2021, all individuals aged 5 and older were eligible for vaccination. Booster shots became available on October 6, 2021, to special groups of Pfizer-BioNTech vaccine recipients who had completed their initial vaccine series at least 6 months prior. These groups included individuals 65 and older, individuals who were 18 and older with an underlying condition, individuals 18 and older who worked and/or lived in high-risk settings. Boosters were available to these groups until end of December 2021.

H8: Protection of elderly people

H8 records policies for protecting elderly people (as defined locally) in Long Term Care Facilities and/or the community and home setting. This is measured as 0 (no measures), 1 (recommended isolation, hygiene, and visitor restriction measures in LTCFs and/or elderly people to stay-at-home), 2 (narrow restrictions for isolation, hygiene in LTCFs, some limitations on external visitors and/or restrictions protecting elderly people at home), or 3 (extensive restrictions for isolation and hygiene in LTCFs, all non-essential external visitors prohibited, and/or all elderly people required to stay-at-home and not leave the home with minimal exceptions, and receive no external visitors).

On March 30, 2020, the Nevada Department of Health and Human Services released guidelines advising long term care facilities to prohibit visitors and increased restrictions on internal movement within these facilities. Further guidance was released on March 31, when the Department of Health of Nevada released guidelines for long term care facilities including limiting movements, no communal dining and separation of the ill (specifically from the older residents with co-morbidities). On April 2, the Department of Health of Nevada required facilities to cancel elective procedures, use telemedicine, when possible, limit points of entry, manage visitors, screen patients for respiratory symptoms, and encourage patient respiratory hygiene using alternatives to facemasks (e.g., tissues to cover cough). As well as these guidelines, nursing homes were required to isolate symptomatic patients as soon as possible, protect healthcare personnel, emphasise hand

hygiene, install barriers to limit contact with patients at triage, cohort COVID-19 patients, limit the numbers of staff providing their care, prioritise respirators and AllRs for aerosol-generating procedures and implement PPE optimization strategies to extend supplies. These protective guidelines remained in effect until the end of December 2021 with minimal changes, resulting in OxCGRT coding of 2G from April 2nd, 2020, until December 31, 2021.

Vaccine Policies

The vaccine indicators record vaccination policies regarding the distribution of vaccines and vaccine mandates. This is recorded as V1-V4 and includes a state's prioritisation list, eligible groups, cost of vaccination to the individual, and the presence of a vaccine mandate. These indicators do not include a flag for geographic scope.

V1: Vaccine Prioritisation

V1 records the ranked position for different groups within a state's prioritisation plan when vaccines resources were too scarce for universal availability. Groups are ranked on an ordinal scale, the number represents the rank of prioritisation, and equal-ranked categories share the same number.

On October 26, 2020, Nevada's first plan for vaccine distribution indicated there would be priority for those who are critical to the COVID-19 pandemic response, providing direct care, and maintaining societal function, as well as those at highest risk for developing severe illness. Nevada released an updated vaccine prioritisation plan on January 11, 2021, that provided further details on its vaccination rollout. The state shifted from its previous system of vaccination "tiers" to a new dual "lane" strategy, allowing workforce vaccination to occur at the same time as mass vaccination of the general population. Each of these lanes were divided into priority groups — with public safety workers at the top of the workforce sector and elderly Nevadans at the top of the general population group. On April 5, 2021, vaccines became universally available in Nevada to all individuals aged 16 and older.

V2: Vaccine Availability

V2 records when categories of people – regardless of their position in a prioritised rollout plan – receive vaccines. This is measured as 0 (vaccines are not being made available to this category) or 1 (vaccines are being made available to this category).

On December 15, 2020, the Nevada Department of Health and Human Services announced that doses of the Pfizer vaccine had been distributed to vaccinate frontline healthcare workers. On 21 December 2020, first vaccinations were administered in nursing homes in Nevada. On January 14, 2021, vaccine availability shifted to include individuals 70 and older in the Las Vegas area. On March 1, 2021, Clark County Health District continued to distribute vaccines to key workers and the elderly (65+). State-wide, according to American Associations of Retired People (AARP), vaccinations were administered to individuals 70 years or older across the state, and in some counties individuals aged 65 and older. All counties are vaccinating front line workers and the elderly. Some counties, including at least Elko and Lander counties, were vaccinating individuals 16-64 years of age with underlying health conditions. On April 5, 2021, vaccination became universally available in Nevada to all individuals 16 and older. On 13 May 2021, individuals aged 12-15 were eligible for vaccination.

V3: Vaccine Financial Support

All vaccines were government-funded at the federal-level across the US.

V4: Mandatory Vaccination

V4 measures the existence of a requirement to be vaccinated and is measured as 0 (no requirement to be vaccinated) or 1 (requirement to be vaccinated).

There were no state-wide vaccination mandates in place in Nevada. Federal-level vaccine mandates, such as vaccinations for healthcare workers that receive Medicaid and Medicare reimbursement were required at certain state facilities. These federal mandates are not captured in the state level coding.