

**MINUTES OF THE MEETING  
OF THE  
ASSEMBLY COMMITTEE ON HEALTH AND HUMAN SERVICES**

**Seventy-Fourth Session  
February 12, 2007**

The Committee on Health and Human Services was called to order by Chair Sheila Leslie at 1:34 p.m., on Monday, February 12, 2007, in Room 3138 of the Legislative Building, 401 South Carson Street, Carson City, Nevada. Copies of the minutes, including the Agenda ([Exhibit A](#)), the Attendance Roster ([Exhibit B](#)), and other substantive exhibits are available and on file in the Research Library of the Legislative Counsel Bureau and on the Nevada Legislature's website at [www.leg.state.nv.us/74th/committees/](http://www.leg.state.nv.us/74th/committees/). In addition, copies of the audio record may be purchased through the Legislative Counsel Bureau's Publications Office (email: [publications@lcb.state.nv.us](mailto:publications@lcb.state.nv.us); telephone: 775-684-6835).

**COMMITTEE MEMBERS PRESENT:**

Ms. Sheila Leslie, Chair  
Ms. Susan I. Gerhardt, Vice Chair  
Mr. Bob L. Beers  
Dr. Joseph P. (Joe) Hardy  
Mrs. Ellen Koivisto  
Ms. Kathy A. McClain  
Ms. Bonnie Parnell  
Ms. Peggy Pierce  
Mr. Lynn D. Stewart  
Ms. Valerie E. Weber  
Ms. RoseMary Womack

**STAFF MEMBERS PRESENT:**

Sarah J. Lutter, Committee Policy Analyst  
Bonnie Borda Hoffecker, Committee Manager  
Patricia Evans, Committee Secretary  
Olivia Lloyd, Committee Assistant



**Chair Leslie:**

[Meeting called to order.] I would like to begin with two Committee introductions.

**BDR 40-857**—Revises provisions governing the operation of certain medical and care facilities and agencies. (Later introduced as [Assembly Bill 97](#).)

ASSEMBLYWOMAN McCLAIN MOVED FOR COMMITTEE  
INTRODUCTION OF BDR 40-857.

ASSEMBLYWOMAN PARNELL SECONDED THE MOTION.

MOTION PASSED UNANIMOUSLY.

\* \* \* \* \*

**BDR 18-1037**—Revises various provisions relating to the Office for Consumer Health Assistance. ([Assembly Bill 98](#).)

ASSEMBLYWOMAN McCLAIN MOVED FOR COMMITTEE

INTRODUCTION OF BDR 18-1037.

ASSEMBLYWOMAN KOIVISTO SECONDED THE MOTION.

MOTION PASSED UNANIMOUSLY.

**Chair Leslie:**

Our first item of business is to take care of our Committee Brief and overview of our Session deadlines. Sarah Lutter is our Committee Policy Analyst from the Research Division.

**Sarah J. Lutter, Senior Research Analyst, Research Division, Legislative Counsel Bureau (LCB):**

I have my nursing degree from Saint Louis University and practiced as a surgical nurse for a few years prior to attending law school at the University of Denver.

As the Committee Policy Analyst, I am available to provide any information you might need. As a member and as an employee of the LCB, I am prohibited from supporting or opposing any legislative measure. I am presenting an overview of the Committee Policy Brief, Assembly Committee on Health and Human Services [[Exhibit C](#)] and a review of the 120-day Session deadlines. The Committee Brief provides general background information and summarizes selected issues pertaining to the Assembly Committee on Health and Human Services. The Assembly Committee on Health and Human Services considers bills affecting several of the Nevada Revised Statutes (NRS) titles and chapters. During the 2005 Legislative Session, roughly 63 percent of the total measures approved by the Committee on Health and Human Services became law. LCB Bulletin Number 07-5 titled, "Legislative Commission's Subcommittee to Oversee the Consultant to Study the Health, Safety, Welfare, and Civil and Other Rights of Children in the Care of Certain Governmental Entities or Private Facilities", should be available soon. On page 15 of the brief is a copy of the 120-day calendar. This deadline is imposed by the Constitution of the State of Nevada, NRS, and the Joint Standing Rules.

**Assemblyman Hardy:**

We would like to have the 07-5 Bulletin when it is available.

**Chair Leslie:**

We will open the hearing on **Assembly Bill 68**. The chief proponent of the bill is the Office of the Attorney General.

**Assembly Bill 68**: Revises provisions governing the operation of certain medical and care facilities and agencies. (BDR 40-505)

**M. Norman Kemberling, Senior Deputy Attorney General, Office of the Attorney General:**

[Prepared testimony and a letter of support were submitted ([Exhibit D](#)).] Mr. Kemberling also submitted a package of proposed changes and amendments.

**Chair Leslie:**

All amendments submitted to the Committee should be in writing.

**Mark Kemberling:**

*Nevada Revised Statute* 449.188 has a listing of offenses that would preclude a licensed applicant or an individual employee from being able to be employed or

maintain employment in a certain style of health care facility or home care provider. The purpose of this bill is to lengthen the list in two areas. One area is to further expand upon financial fraud in the area of Medicaid fraud. The other area is to bring similar statutes from other states into the list. It prohibits an individual or licensee from being able to provide services in those facilities. The Medicaid Fraud Control Unit investigates and prosecutes Medicaid provider fraud. This unit also investigates and prosecutes the abuse, neglect, and exploitation of the elderly. A person convicted of one of these offenses has already been shown to be an impediment to maintaining a high degree of integrity and trust in the health care field. The federal government routinely excludes these individuals from working in federal health care programs and federal, state, or local facilities associated with federal programs. Efforts should be made to make non-government associated facilities aware of these convicted individuals and provide a mechanism for restricting their employment.

**Assemblywoman McClain:**

Currently, there is no way of tracking the crimes perpetrated by personal care assistants. If background checks are done and the agencies have to spend weeks to get information back, there is no way to track these personal care assistants. They go from agency to agency until their record catches up with them. Until regulations are put together and some way is found to track these individuals, this is a moot point. Rather than wait for the health district to establish regulations, put the qualifications in statute to track the individuals while they are fraudulently billing Medicaid.

**Mark Kemberling:**

Regulations are covered by the Administrative Code, the service manual, or the promulgations of regulations. If and when regulations are finalized, which is something that will never come in front of this Committee, all the appropriate statutes, or this expanded list, will already be in place. What this does is: number one, at the present time, new employees coming into the health care field for any of these entities must have a fingerprint check. The results are provided by the central repository to the employer. If there is prohibitive information, that employee is let go. There is no regulation to track someone walking into a new employer's door. The purpose of this bill is to strengthen the existing laws to have the ability to work with the agencies.

**Assemblywoman McClain:**

This amendment could be a good conduit for solving some of these problems. If the Chair would permit, I would like some time to work on an amendment on this issue.

**Chair Leslie:**

It was suggested the item be brought forward during a work session for consideration.

**Mark Kemberling:**

There are four proposed changes. The first amendment is to Section 1, subsection 1(a)(6). As A.B. 68 was originally drafted, there was a series of Statutes referenced in the area of abuse, neglect, exploitation, and isolation of older or vulnerable persons. The first proposed change is to restrict that series of statutes containing only instructional definitions, not restrictions to violations of law. Instead of causing confusion at the central repository, most of the criminal statutes in that series of offenses are listed in NRS 200.5095 and NRS 200.5099. ([Exhibit D](#))

**Chair Leslie:**

Are you suggesting replacing Section 1, subsection 1(a)(6) with the language that you presented to us today?

**Mark Kemberling:**

Yes, Madam Chair.

**Chair Leslie:**

The result is changing the NRS citations to be more consistent.

**Assemblyman Hardy:**

If I am reading this right, we are going back to the original NRS which was stricken.

**Mark Kemberling:**

Correct.

**Chair Leslie:**

The end result is not changing anything from existing law?

**Mark Kemberling:**

Correct. We are not correcting anything from the existing statutes provided. We are leaving in the language to include laws similar to other jurisdictions.

**Assemblywoman Parnell:**

I do not understand why we would not leave the language in rather than someone reading it just to be referred to another NRS statute number.

**Mark Kemberling:**

NRS 200.5091 through 200.5099 contains numerous non criminal statutes. Some of the statutes that could cause some confusion will be filtered out.

**Chair Leslie:**

Only some of the NRS citations will be changed.

**Mark Kemberling:**

The second amendment is to add a seven-year limitation to what will be the new paragraph in Section 1, subsection 1(a)(7). Currently, the federal government routinely excludes people with violations of Medicaid fraud from being an employee or practicing in the federal health care program. We would like the same thing for non-federal government-related facilities and programs. We are putting a seven-year limit on this because all of the other financial crimes listed in this statute also have a seven-year limit. We are dovetailing to stay in conformance with the statute.

The third proposed amendment is to restrict Section 1, subsection 1(a)(8) to criminal convictions related to Medicaid or Medicare and also to provide a seven-year limit. This amendment also clarifies any job that the criminal records repository may have as far as what type of unauthorized acts they have to look at. This restricts the language to criminal violations or criminal convictions.

The fourth amendment is to change the definition listed in section three. These definitions will now be referred to as Section 3, subsection (a), Medicaid, as the meaning defined in NRS 439B.120 and subsection (b), Medicare, as the meaning described in NRS 439B.130. The purpose is to maintain some conformity with what is meant by Medicaid and Medicare.

**Assemblywoman Gerhardt:**

There is another bill draft along the same lines. Maybe Ms. McClain and I can suggest one piece of legislation that would simplify the process.

**Chair Leslie:**

I would encourage you to do that. We will hold this until you have the opportunity to take a look at it. We will have Ms. Lutter run this by our Legal Division. What I ask the two Committee members to do is advise you of the status and give you the opportunity to work with them outside the Committee.

When they formally present their amendments or if we hear a separate bill from Ms. Gerhardt, we would welcome your participation at that time.

Meeting adjourned at 2:05 p.m.

RESPECTFULLY SUBMITTED:

---

Patricia Evans  
Committee Secretary

APPROVED BY:

---

Assemblywoman Sheila Leslie, Chair

DATE:

**EXHIBITS**

**Committee Name:** Committee on Health and Human Services

**Date:** February 12, 2007

**Time of Meeting:** 1:30 p.m.

<b>Bill</b>	<b>Exhibit</b>	<b>Witness / Agency</b>	<b>Description</b>
***	A	*****	Agenda
***	B	*****	Sign-In Sheet
***	C	Sarah J. Lutter, Research Division	Committee Policy Brief
AB 68	D	Mark Kemberling, Senior Deputy Attorney General	Memorandum