

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

**Seventy-Sixth Session
April 18, 2011**

The Committee on Health and Human Services was called to order by Chair April Mastroluca at 2:38 p.m. on Monday, April 18, 2011, in Room 3138 of the Legislative Building, 401 South Carson Street, Carson City, Nevada. Copies of the minutes, including the Agenda ([Exhibit A](#)) and the Attendance Roster ([Exhibit B](#)) 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/76th2011/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; telephone: 775-684-6835).

COMMITTEE MEMBERS PRESENT:

Assemblywoman April Mastroluca, Chair
Assemblywoman Peggy Pierce, Vice Chair
Assemblyman Elliot T. Anderson
Assemblywoman Teresa Benitez-Thompson
Assemblyman Steven Brooks
Assemblywoman Lucy Flores
Assemblyman Pete Goicoechea
Assemblyman John Hambrick
Assemblyman Scott Hammond
Assemblyman Pete Livermore
Assemblywoman Debbie Smith

COMMITTEE MEMBERS ABSENT:

Assemblyman Richard Carrillo (excused)
Assemblyman Jason Frierson (excused)
Assemblyman Mark Sherwood (excused)

GUEST LEGISLATORS PRESENT:

Senator Ben Kieckhefer, Washoe Senatorial District No. 4

STAFF MEMBERS PRESENT:

Kirsten Coulombe, Committee Policy Analyst
Risa Lang, Committee Counsel
Mitzi Nelson, Committee Secretary
Olivia Lloyd, Committee Assistant

OTHERS PRESENT:

Rod Cooper, Private Citizen, Sparks, Nevada

Chair Mastroluca:

[Roll was called.] We are going to jump right into Senate Bill 337 which will be presented by Senator Ben Kieckhefer.

Senate Bill 337: Revises provisions governing persons who may receive an anatomical gift. (BDR 40-1055)

Senator Ben Kieckhefer, Washoe Senatorial District No. 4:

This bill stems from a suggestion made by a friend of mine, Rod Cooper, to increase the incidence of organ donation in Nevada. He will tell you his story illustrating why this is an important piece of legislation. Very simply, the bill amends the statute that outlines the process by which organs and tissues are distributed upon donation. There are various ways that this is done. For instance, a person can donate his organs or tissues for research purposes or direct them to an individual person. A process by which this is done is already spelled out in statute. Page 3, section 1, subsection 8, paragraphs (a) and (b) of the bill are added to stipulate that a family member, to the fourth degree of consanguinity, would have first right of refusal to organs from a family member donor. While the number of instances where this would be utilized is probably slim, the cosponsor of the bill, Senator Allison Copening, and I were looking for a vehicle to encourage Nevadans to become donors. We feel that the ability to market organ donation as an avenue to not only help a stranger, which should be motivation in and of itself, but to help your own family would be a substantive change in what the law specifies. It allows an extra arrow in the quiver of organ donation promotion. We had a little bit more robust testimony in the Senate on this bill. Ken Richardson, of Nevada Donor Network, Inc., and Cassandra Smith, R.N., of Nevada Organ and Tissue Donor Task Force, both spoke in favor of the bill. This bill does have the support of those organizations that deal with organ and tissue donation on a regular basis.

The only concern that I have heard about the bill is to ensure that the language used complies with federal rules. Ms. Lang, who is also counsel for

the Senate Committee on Health and Human Services, indicated at that committee hearing that due to the way the bill is written, any directed donation would be honored. If a donor decides to make a directed donation to an individual person, family member, or university that direction would take priority. With that, I would like to turn the presentation over to Rod Cooper, who is the true inspiration for this bill and let him tell you why he believes it is important. Thank you. I would be happy to answer any questions that you would like to address my way.

Chair Mastroluca:

We will hear from Mr. Cooper first, and then we will go to questions.

Rod Cooper, Private Citizen, Sparks, Nevada:

I will give you the *Reader's Digest* condensed version of my last year or so. Around Thanksgiving of 2009, about a year after obtaining a physical and receiving a clean bill of health from a local hospital in Reno, I started to develop some headaches. I went to my doctor, had blood work done, and found out I was in kidney failure. It took me a few minutes to get my head wrapped around the diagnosis. I first asked my doctor how to spell it, because it was the furthest thing from my mind. I never thought it would happen to me. As I share my story with you, I want you to understand that what happened to me could happen to any one of you. It could happen to any one of your family members. I was diagnosed with failure of both kidneys due to hypertension, which was also a surprise to me. Hypertension happens to be the second leading cause, behind diabetes, of kidney failure.

I was placed on a donation list and I began to learn very rapidly the average wait time to receive a kidney is five to seven years. I also learned from reading thousands of pages on the Internet that I would be very sick during my wait and might not survive until a kidney became available. I was on two different kidney donor lists, one at the University of California, Davis School of Medicine and one at California Pacific Medical Center in San Francisco. Early on, I saw a doctor in San Francisco for a checkup and my wife went with me. The nurse encouraged her to test and we found that she was a match. At that time I still felt healthy, so we waited until the end of October 2010 to have kidney transplant surgery in San Francisco. I was a very lucky person.

Along the way, I met a lot of people in need. There are some very heartbreaking stories of people from Nevada who have been on a list for five to seven years and have been unable to get a kidney. I was very fortunate and things have gone very well for me. However, it is kind of like when you want to buy a special car that you have never seen on the street. You go down to the dealership, buy the car, and now you see the same car on every corner.

That is what I learned about kidney failure. There are a lot of people with the disease. You may have already been impacted by a loved one that has the disease. It is very difficult. Hopefully, someone with the disease can find a living donor. I am very happy that Senator Kieckhefer was able to put this bill together and that it has made it this far. I hope you will consider and pass this bill.

Chair Mastroluca:

Thank you for sharing your story. It helps us better understand the problem when we hear from someone who has actually experienced the situation. Why does the bill stipulate to the fourth degree of consanguinity? The fourth degree of consanguinity would be great-great-grandparents. How did you choose that degree?

Senator Kieckhefer:

The fourth degree of consanguinity also includes first cousins, which was our intent.

Chair Mastroluca:

Does that exist in law in other states?

Senator Kieckhefer:

I cannot answer that; I do not know.

Assemblyman Hammond:

I have read about this often. There are other countries and perhaps other states that have done this. Correct me if I am wrong, but there was also a spike in the number of donors that occurred because of this type of legislation. Is that correct?

Senator Kieckhefer:

This is not what we found to be model legislation. This is an amendment to uniform law. The Nevada Donor Network and The Organ and Tissue Donor Task Force felt that this was another useful tool. I hope they had reason to believe so and it was not just a guess. They felt it would be helpful in terms of promotion and generating new donors for our state.

Assemblyman Hammond:

I am also certain this is being done somewhere else, if not in the United States, then somewhere around the world. I believe this did lead to an increase in the number of donors in the pool.

Chair Mastroluca:

Are there further questions? I do not see any. You are going to work with Ms. Lang on the amendment?

Senator Kieckhefer:

I have spoken with Ms. Lang and perhaps she can weigh in, as well. During the Senate committee hearing on this, there was a suggestion that we may need to add language to indicate that this provision takes precedence in the absence of any conflict with existing federal regulations. Those federal regulations are directly related to the process that is used in an instance of a directed donation. The way that the bill is written, the directed donation would take precedence. Organ donation to an individual person is outlined in section 1, subsection 1, paragraph (b), of the bill. This would still take precedence considering the language in section 1, subsection 8, paragraph (a). If it is Ms. Lang's opinion that this bill continues to be consistent with that intent, I am happy with the bill as written.

Chair Mastroluca:

Thank you. Did you have anyone else to testify?

Senator Kieckhefer:

That would conclude my effort today.

Chair Mastroluca:

Is there anyone else present who would like to testify on S.B. 337, either in support, against, or neutral. I do not see anyone. Thank you for bringing this forth; it sounds like a fairly simple solution. With that, I will close the hearing on S.B. 337. Is there any public comment? [There was none.] This meeting is adjourned [at 2:52 p.m.].

RESPECTFULLY SUBMITTED:

Mitzi Nelson
Committee Secretary

APPROVED BY:

Assemblywoman April Mastroluca, Chair

DATE: _____

EXHIBITS

Committee Name: Committee on Health and Human Services

Date: April 18, 2011

Time of Meeting: 2:38 p.m.

Bill	Exhibit	Witness / Agency	Description
	A		Agenda
	B		Attendance Roster