MINUTES OF THE SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

Seventy-sixth Session April 28, 2011

The Senate Committee on Health and Human Services was called to order by Chair Allison Copening at 3:10 p.m. on Thursday, April 28, 2011, in Room 2149 of the Legislative Building, Carson City, Nevada. The meeting was videoconferenced to the Grant Sawyer State Office Building, Room 4412E, 555 East Washington Avenue, Las Vegas, Nevada. Exhibit A is the Agenda. Exhibit B is the Attendance Roster. All exhibits are available and on file in the Research Library of the Legislative Counsel Bureau.

COMMITTEE MEMBERS PRESENT:

Senator Allison Copening, Chair Senator Valerie Wiener, Vice Chair Senator Ruben J. Kihuen Senator Joseph (Joe) P. Hardy Senator Ben Kieckhefer Senator Greg Brower

COMMITTEE MEMBERS ABSENT:

Senator Sheila Leslie (Excused)

GUEST LEGISLATORS PRESENT:

Assemblyman David P. Bobzien, Assembly District No. 24 Assemblywoman Olivia Diaz, Assembly District No. 11

STAFF MEMBERS PRESENT:

Marsheilah Lyons, Policy Analyst Risa Lang, Counsel Shauna Kirk, Committee Secretary

OTHERS PRESENT:

Tom McCoy, J.D., Nevada Government Relations, Director, American Cancer Society, Cancer Action Network

Leslie Katich, Northern Nevada Children's Cancer Foundation

P. Michael Murphy, Coroner, Office of the Coroner/Medical Examiner, Clark County; Clark County Government Affairs

Laurie Crehan, Ed.D., Quality of Life Regional Liaison, Office of the Deputy Undersecretary of Defense, Military Community & Family Policy, U.S. Department of Defense

Jeffrey Fontaine, Executive Director, Nevada Association of Counties Bill M. Welch, Nevada Hospital Association

CHAIR COPENING:

We will open the meeting with a presentation from the American Cancer Society.

Tom McCoy, J.D. (Nevada Government Relations Director, American Cancer Society, Cancer Action Network):

You have been provided a copy of Cancer in Nevada Presentation (Exhibit C).

LESLIE KATICH (Northern Nevada Children's Cancer Foundation):

The Northern Nevada Children's Cancer Foundation (NNCCF) is dedicated to assisting families with have children who have been diagnosed with cancer. I am the mother of a child who has been diagnosed with cancer. My daughter was 17 years of age when she was diagnosed with acute lymphoblastic leukemia (ALL). It is one of the most common childhood cancers. The standard-risk cure rate for ALL with children is high. There are many different subtypes of leukemia. My daughter had one of the unpleasant types. She was given a 20 percent chance of survival in her first year. As of today, she is living cancer-free. The doctor said she would be starting chemotherapy right away. When I asked when, he said "today." This treatment was in Oakland, California. Families living in Nevada travel a minimum of 225 miles one way for treatment. This takes them away from other family members and the people upon whom the family depends for emotional support. The parent usually has to quit a job to be able to care for the child. This is where the NNCCF is able to help. When a child is critically ill and going through chemotherapy, the child is "immune compromised." A fever of 99.9 degrees is emergent. In our area, we do not have a resident pediatric oncologist. Emergencies can come at any time. The child is usually transported by Life Flight. We have had to use Life Flight at a cost of \$17,000. The NNCCF anticipates servicing 40 new families this year. That is in addition to the 321 families we already assist. Of the 321 families, 174 families are eligible for services. Since January 1, 2011, we have taken in

13 new families. Our budget was for half that amount. Of the 40 new families, 100 percent of them will leave the area for treatment. Our funds come from generous donations from community partners, endless fund-raisers and grants such as the one received from the Nevada Cancer Coalition. As a foundation, we work with other collaborative groups within the community. However, we see more and more of those groups closing. Cancer does not know an economic downturn, but our commitment to relieve the suffering is irrevocable. As long as we have resources, we will reach out and take care of those children and their families.

CHAIR COPENING:

We will open the meeting on Assembly Bill (A.B.) 319.

ASSEMBLY BILL 319 (1st Reprint): Revises provisions governing the final disposition of human remains. (BDR 40-775)

ASSEMBLYWOMAN OLIVIA DIAZ (Assembly District No. 11):

The intent of this bill is to allow a person 18 years of age or older to assume the responsibility for cremating or burying a deceased person if no other family member can be found. Recently, a colleague of my husband passed away having no surviving family members. There was nothing in statute allowing someone else to do anything.

In section 1, we added subsection 2. This allows someone 18 years or older to bury a deceased person. This is only if there is no one to provide the service in section 1, subsection 1, paragraphs (a) through (h). Because the person is taking on the responsibility to bury or cremate the deceased does not mean the person has a claim to the deceased's estate. The Clark County Coroner's Office has said in 2007 to 2008 there were 843 cremations and 46 burials performed by the coroner. In 2008 to 2009, there were 979 cremations and 42 burials. In 2009 to 2010, there were 1,016 cremation and 46 burials. Each cremation cost Clark County \$425. A burial is approximately \$1,800. There was \$400,000 allocated for indigents who cannot afford cremation. As of March 10, 2011, \$335,000 of that allocation has been spent.

SENATOR WIENER:

What has changed in this version of the bill?

ASSEMBLYWOMAN DIAZ:

The first draft was vague. We added requirements that would make the coroner's job easier. We added the affidavit a person needs to fill out, the 30-day time limit and the requirement that the person is unaware of anyone else who could come forward.

SENATOR WIENER:

How many states have something comparable?

ASSEMBLYWOMAN DIAZ:

There are several; however, they are all different in their approaches. Some give the ability to stepchildren, and others give it to friends. There are approximately a dozen states with something similar in statute.

SENATOR KIHUEN:

What happened to the body you talked about?

ASSEMBLYWOMAN DIAZ:

They searched for family members, and after approximately 90 days of retaining the cremated person, they disposed of it.

SENATOR KIECKHEFER:

Why did you choose 30 days?

P. MICHAEL MURPHY (Coroner, Office of the Coroner/Medical Examiner, Clark County; Clark County Government Affairs):

If we are not able to locate a legal next of kin after a 30-day period, the file is forwarded to Clark County Social Services. Social Services will check for a legal next of kin again. It may take up to 90 days, but the process starts at 30 days. I wanted to keep it statutorily in line with what we do at the county level.

SENATOR KIECKHEFER:

Why are you asking for how long a person has known the deceased person? There is no requirement for knowing the deceased for any length of time.

Mr. Murphy:

We will identify a deceased by fingerprints, dental records, Xrays and DNA. We ask friends and family to fill out an affidavit of identification. If the deceased is

facially recognizable on the scene to our investigator, we will not ask that family member to view the body but rather a picture or a driver's license. If the deceased is not facially recognizable, we will use other means. The reason we have asked for the affidavit is to keep the process in line with what we do in our office to identify the deceased.

CHAIR COPENING:

Are you saying that without this law, someone without a legal next-of-kin relationship cannot arrange cremation or for a burial?

Mr. Murphy:

They could not have participated in this process.

I wanted to make sure that someone could not search the newspapers or county records to find individuals who have died, claim that person's friendship, pay for the burial and attach the deceased's estate.

CHAIR COPENING:

How often does someone come forward for a deceased after 90 days?

Mr. Murphy:

I do not have that data today. If there is a burial and someone claims the body, the person has a choice to have it moved to the cemetery of that person's choice. The person can have the grave appropriately marked. We have a county crypt for cremains.

SENATOR WIENER:

Who makes the decision about a burial?

Mr. Murphy:

Clark County Social Services makes that decision. If we know nothing about the individual and there is no religious reason of which we are aware, we opt for cremation.

SENATOR WIENER:

Are the ones who were buried in the past buried based on an investigation?

Mr. Murphy:

The ones in 2010 would have been, because a family member indicated it to us.

SENATOR KIHUEN:

Does the county pay the bill to bury or cremate a deceased person?

Mr. Murphy:

Yes. We will bury or cremate any individual if there are no funds available from the family.

SENATOR KIHUEN:

What is the approximate cost for cremation or burial?

Mr. Murphy:

Cremation is approximately \$425 per case, and burial is approximately \$1,800.

SENATOR KIHUEN:

Is this bill giving the financial responsibility to someone who will pay for the burial?

Mr. Murphy:

Yes.

SENATOR KIHUEN:

How much will the county save?

MR. MURPHY:

That is not known. This is an excellent first step.

SENATOR HARDY:

Is there legal immunity for the person who signs an affidavit that extends sovereign immunity for helping the coroner's office?

MR. MURPHY:

The good-faith effort of the individual should be enough to stand up in court. However, we do not believe it is creating any liability.

SENATOR HARDY:

In reality, a person can have a funeral or service without the body of the deceased being present.

MR. MURPHY:

That is correct.

SENATOR KIHUEN MOVED TO DO PASS A.B. 319.

SENATOR KIECKHEFER SECONDED THE MOTION.

THE MOTION CARRIED. (SENATOR BROWER WAS ABSENT FOR THE VOTE.)

CHAIR COPENING:

We will now open the meeting on A.B. 295.

ASSEMBLY BILL 295 (1st Reprint): Revises provisions governing the disposition of the human remains of certain deceased military personnel. (BDR 40-1073)

ASSEMBLYMAN DAVID P. BOBZIEN (Assembly District No. 24):

This bill keeps our statutes aligned with the practice of the United States Department of Defense. When a service member deploys, the member completes a form indicating how their remains are to be disposed of should the member be killed when serving our Country. This bill did have an amendment in the Assembly.

LAURIE CREHAN, Ed.D. (Quality of Life Regional Liaison, Office of the Deputy Undersecretary of Defense, Military Community & Family Policy, U.S. Department of Defense):

I have written testimony I will read (Exhibit D).

SENATOR KIECKHEFER:

Does this form not fall into a legally valid document as defined in section 1, subsection 1, paragraph (a) of the bill?

Ms. Crehan:

It will be stronger if it is named in statute.

ASSEMBLYMAN BOBZIEN:

The idea is to elevate it. If there are several competing documents, precedence is given to the form.

SENATOR WIENER:

What are the two references of NRS 451.024 and 451.650?

RISA LANG (Counsel):

The first one is for burial, and the second is for cremation.

ASSEMBLYMAN BOBZIEN:

It is for the decedent who had been on active duty at the time of death. It is to prevent a situation of a veteran who has been discharged but has this form on file.

CHAIR COPENING:

Do we have the amendment?

ASSEMBLYMAN BOBZIEN:

Yes. The bill you have is the current reprint of A.B. 295.

SENATOR KIECKHEFER:

Do all United States National Guard members complete this form?

Ms. Crehan:

Yes. This form applies when members are activated under Title 10 of the United States Code section 1482.

ASSEMBLYMAN BOBZIEN:

The original language in section 2, subsection 1, paragraph (b) was "If the decedent was a member of the Armed Forces" We changed it to read "If the decedent was, at the time of death, on active duty as ... "

SENATOR HARDY MOVED TO DO PASS A.B. 295.

SENATOR WIENER SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

CHAIR COPENING:

We will now open the meeting on A.B. 36.

ASSEMBLY BILL 36 (1st Reprint): Makes various changes concerning the Fund for Hospital Care to Indigent Persons. (BDR 38-282)

JEFFREY FONTAINE (Executive Director, Nevada Association of Counties):

This bill makes various changes to the Fund for Hospital Care for Indigent Persons, also known as the indigent accident fund. It generates between \$20 million and \$25 million a year. The Nevada Association of Counties has been under contract with the State for over 25 years to administer this fund. The fund helps counties meet their obligations to pay for the medical expenses of indigent persons. For the rural counties, it is a stop loss. Prior to this fund, counties were sued by hospitals for payment of indigent expenses. It is important for rural counties. If someone has an automobile accident on the interstate, the county in which the accident occurs has to pay for the medical expenses. We would also like the ability to document the cost of uncompensated care in the State. In 2010, we had approximately \$123 million in claims. This bill seeks to change the fund in two ways. The first one is a \$3,000 deductible per claim a county will pay. When those claims are paid, the county will submit a \$3,000 check to the State. We would like those funds to be pooled and sent out to the hospitals to offset part of the costs. This would be set aside in a special account.

The second change in this bill regards the board of the Fund for Hospital Care for Indigent Persons. It changes the composition from five county commissioners appointed by the Governor to four county commissioners and a social service director. It increases the term of each of the board members from one year to two years. It also specifies the number of nominees for each of the appointments. We have a proposed amendment which changes the effective date from July 1, 2011, to upon passage and approval. We would like to have the board seated as soon as possible.

SENATOR KIECKHEFER:

Is the \$3,000 being paid by a county before the rest is paid for by the fund?

Mr. Fontaine:

The county issues a \$3,000 check to the State once the claim is approved and then payment is made to the hospital.

SENATOR KIECKHEFER:

Does the money from the county go to the State instead of the hospital?

Mr. Fontaine:

That is correct.

SENATOR KIECKHEFER:

For what would the State utilize the pooled payments?

Mr. Fontaine:

It will go back to the hospitals. When a claim is approved and a payment is made by the State to the hospital, the county is billed for \$3,000. The county pays that \$3,000 to the State which goes back into the fund. Because the fund has been swept the past three years, that \$3,000 per claim is subject to being swept. In this bill, we would like to segregate that \$3,000 deductible per claim into a special account that can go out to the hospitals.

SENATOR KIECKHEFER:

Is that \$3,000 a flat deductible regardless of the size of the claim?

Mr. Fontaine:

It is \$3,000 per claim, regardless of the size of the claim. Last year, we processed and approved approximately 80 claims.

SENATOR KIECKHEFER:

Was it swept last year?

Mr. Fontaine:

It was not.

CHAIR COPENING:

When the money is swept, what happens to claims that have been approved?

Mr. Fontaine:

In the last few years, there has been some money above and beyond what was swept. In 2009, we were able pay approximately \$4 million. We prorate those payments based on the claims.

CHAIR COPENING:

Are the hospitals being shorted funds as a result of not having enough in the account?

Mr. Fontaine:

Yes. When we process the claims, we look at what is authorized and use the Medicaid billing rates. Once we pay it out, the claim is closed.

SENATOR KIECKHEFER:

What is the need for a social service representative on the board?

Mr. Fontaine:

It is difficult to get five county commissioners to serve on the board. Certifying an individual as indigent and the actual program involves the social service director at the county level.

BILL M. WELCH (Nevada Hospital Association):

The Nevada Hospital Association is in support of this bill. Once we receive payment, whether it is one cent on the dollar or twenty cents on the dollar, it closes the claim. The \$3,000 is a way counties can group their funds to create an insurance plan to protect them from liability beyond what they raise through this assessment. The hospitals have agreed to accept it.

SENATOR WIENER MOVED TO AMEND AND DO PASS AS AMENDED A.B. 36 WITH THE EFFECTIVE DATE BEING UPON PASSAGE AND APPROVAL.

SENATOR HARDY SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

CHAIR COPENING:

We will reschedule the hearing on $\underline{A.B.\ 280}$ as the sponsor is unable to attend today.

ASSEMBLY BILL 280 (1st Reprint): Requires the adoption of patient safety checklists and patient safety policies at certain medical facilities. (BDR 40-517)

CHAIR COPENING:

With no further business to come before this Committee, I will adjourn the meeting at 4:37 p.m.

	RESPECTFULLY SUBMITTED:
	Shauna Kirk,
	Committee Secretary
APPROVED BY:	
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Senator Allison Copening, Chair	
DATE:	_

<u>EXHIBITS</u>			
Bill	Exhibit	Witness / Agency	Description
	Α	Agenda	Agenda
	В	Attendance Roster	Attendance Roster
	С	Tom McCoy	Cancer In Nevada
		-	Presentation
A.B. 295	D	Laurie Crehan	Written Testimony