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

Seventy-Seventh Session
May 10, 2013

The Committee on Health and Human Services was called to order by Chair Marilyn Dondero Loop at 12:42 p.m. on Friday, May 10, 2013, in Room 3138 of the Legislative Building, 401 South Carson Street, Carson City, Nevada. The meeting was videoconferenced to Room 4406 of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, 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 nelis.leg.state.nv.us/77th2013. 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 Marilyn Dondero Loop, Chair
Assemblywoman Ellen B. Spiegel, Vice Chair
Assemblywoman Teresa Benitez-Thompson
Assemblyman Wesley Duncan
Assemblyman Andy Eisen
Assemblywoman Michele Fiore
Assemblyman John Hambrick
Assemblyman Pat Hickey
Assemblyman Joseph M. Hogan
Assemblyman James Oscarson
Assemblyman Michael Sprinkle

COMMITTEE MEMBERS ABSENT:

Assemblyman Andrew Martin (excused)
Assemblywoman Peggy Pierce (excused)
Assemblyman Tyrone Thompson (excused)

GUEST LEGISLATORS PRESENT:

Senator Barbara K. Cegavske, Clark County Senatorial District No. 8
Senator Greg Brower, Washoe County Senatorial District No. 15
Senator Justin C. Jones, Clark County Senatorial District No. 9

STAFF MEMBERS PRESENT:

Kirsten Bugenig, Committee Policy Analyst
Risa Lang, Committee Counsel
Janel Davis, Committee Secretary
Macy Young, Committee Assistant

OTHERS PRESENT:

Valerie Wiener, Chair, Legislative Committee on Health Care's Task Force to Develop a State Plan to Address Alzheimer's Disease
Maria Mazurowski, Private Citizen, Reno, Nevada
Lauren Mazurowski, Private Citizen, Reno, Nevada
Angie Pratt, Regional Director, Northern Nevada Alzheimer's Association
Jane Gruner, Administrator, Aging and Disabilities Services Division, Department of Health and Human Services
Karen Taycher, Executive Director, Nevada Parents Encouraging Parents; Member, Nevada Commission on Services for Persons with Disabilities
Sam Lieberman, representing Easter Seals Nevada; Chair, Nevada Parents Encouraging Parents
Daniel Stewart, Executive Director, Southern Nevada Association of Providers
Robin Renshaw, Private Citizen, Las Vegas, Nevada
Ed Guthrie, Executive Director, Opportunity Village
Kenneth Taycher, Private Citizen, Las Vegas, Nevada
John T. Jones Jr., representing the Nevada District Attorneys' Association
Lindsay Anderson, representing Washoe County School District
Jill Marano, Deputy Administrator, Division of Child and Family Services, Department of Health and Human Services

Chair Dondero Loop:
[Roll was called. Rules and protocol were explained.] We are going to start with our work session today. I would like to ask our policy analyst to take us through the bills. We will start with Senate Bill 4 (1st Reprint).

Senate Bill 4 (1st Reprint): Revises provisions governing the testing of a person or decedent who may have exposed certain public employers, employees or volunteers to a contagious disease. (BDR 40-265)

Kirsten Bugenig, Committee Policy Analyst:
[Mrs. Bugenig read a description of the bill and proposed amendment from the work session document (Exhibit C).]

Chair Dondero Loop:
Thank you. Is there a motion?

> ASSEMBLYMAN HAMBRICK MOVED TO AMEND AND DO PASS SENATE BILL 4 (1ST REPRINT).
>
> ASSEMBLYMAN HOGAN SECONDED THE MOTION.
>
> THE MOTION PASSED. (ASSEMBLYMEN MARTIN, PIERCE, AND THOMPSON WERE ABSENT FOR THE VOTE.)

Mrs. Benitez-Thompson will do the floor statement. Mr. Hickey will be her backup.

Mrs. Bugenig, please continue with Senate Bill 51 (1st Reprint).

Senate Bill 51 (1st Reprint): Makes various changes relating to the regulation of certain nonmedical and medical services provided to persons with disabilities. (BDR 40-309)

Kirsten Bugenig, Committee Policy Analyst:
[Mrs. Bugenig read a description of the bill from the work session document (Exhibit D).] There are no amendments proposed to this bill.

Chair Dondero Loop:
Thank you. Is there a motion?

> ASSEMBLYMAN SPRINKLE MOVED TO DO PASS SENATE BILL 51 (1ST REPRINT).
>
> ASSEMBLYMAN OSCARSON SECONDED THE MOTION.
>
> THE MOTION PASSED. (ASSEMBLYMEN MARTIN, PIERCE, AND THOMPSON WERE ABSENT FOR THE VOTE.)

Mr. Sprinkle, would you like to do the floor statement?

Assemblyman Sprinkle:
I would be happy to.

Chair Dondero Loop:
Thank you. Mrs. Bugenig, please continue.

Senate Bill 53: Revises various provisions relating to vital statistics. (BDR 40-312)

Kirsten Bugenig, Committee Policy Analyst:
[Mrs. Bugenig read a description of the bill from the work session document (Exhibit E).] There are no amendments proposed for this bill.

Chair Dondero Loop:
Is there a motion?

> ASSEMBLYMAN EISEN MOVED TO DO PASS SENATE BILL 53.
>
> ASSEMBLYWOMAN SPIEGEL SECONDED THE MOTION.
>
> THE MOTION PASSED. (ASSEMBLYMEN MARTIN, PIERCE, AND THOMPSON WERE ABSENT FOR THE VOTE.)

Mrs. Spiegel will do the floor statement. Let us move on to Senate Bill 81.

Senate Bill 81: Allows certain physicians to dispense cancer drugs donated for use in the Cancer Drug Donation Program. (BDR 40-500)

Kirsten Bugenig, Committee Policy Analyst:
[Mrs. Bugenig read a description of the bill from the work session document (Exhibit F).] There are no amendments proposed for this bill.

Chair Dondero Loop:
Thank you. Is there a motion?

> ASSEMBLYMAN HAMBRICK MOVED TO DO PASS SENATE BILL 81.
>
> ASSEMBLYWOMAN BENITEZ-THOMPSON SECONDED THE MOTION.

THE MOTION PASSED. (ASSEMBLYMEN MARTIN, PIERCE, AND THOMPSON WERE ABSENT FOR THE VOTE.)

Mr. Hambrick will do the floor statement.

Senate Bill 117: **Revises provisions governing the powers of the Department of Taxation. (BDR 32-536)**

Kirsten Bugenig, Committee Policy Analyst;
[Mrs. Bugenig read a description of the bill from the work session document (Exhibit G).] There are no proposed amendments for this bill.

Chair Dondero Loop:
Is there a motion?

ASSEMBLYMAN SPRINKLE MOVED TO DO PASS SENATE BILL 117.

ASSEMBLYMAN EISEN SECONDED THE MOTION.

MOTION PASSED. (ASSEMBLYMEN MARTIN, PIERCE, AND THOMPSON WERE ABSENT FOR THE VOTE.)

I will do the floor statement, and Dr. Eisen will be my backup.

We will now move on to our bill hearing. I will open the hearing on Senate Bill 86 (1st Reprint).

Senate Bill 86 (1st Reprint): **Requires the Department of Health and Human Services to allocate money for certain programs relating to persons with Alzheimer's disease and other related dementia. (BDR 40-550)**

Valerie Wiener, Chair, Legislative Committee on Health Care's Task Force to Develop a State Plan to Address Alzheimer's Disease:
In my capacity as the Chair of the Legislative Committee on Health Care's Task Force to Develop a State Plan to Address Alzheimer's Disease during the interim, we had five meetings and extraordinary testimony. We had amazing input from the public, as well as the members who were experts in pieces, if not entire concepts, in regard to this very difficult health condition.

Our task force was charged, based on Senator Smith's resolution, to do a state plan; however, we went above and beyond.

We are fortunate to bring three bills to this session. Senate Bill 86 (1st Reprint) is one of those measures. You have already heard Assembly Bill 80, which is now processing out of the Ways and Means Committee and, hopefully, coming over to the other house.

This particular measure is the product of very compelling testimony of families who have been affected by Alzheimer's and the toll it takes on them, the caregivers, and the families who are closest to the problems and challenges. One of the concerns that we addressed in this bill were those families of younger-onset Alzheimer's patients. Current law does not allow provision of respite services and other care to patients who are under 60 years old. At this time, approximately 5 percent of the cases are younger-onset Alzheimer's cases. These take substantial tolls on families who need the care also.

This bill would allow the younger-onset families to have access to respite services. I say Alzheimer's families because Alzheimer's is a disease unlike many others, of not just one person, but entire families. I believe you will be hearing from witnesses who have experienced this and the toll it has taken on their families because they do not have access to services due to the early onset of this disease in their families.

You will see that this is a first reprint. The only change that was made was a floor amendment at my request that the effective date be upon passage and approval. That is at the very end of the bill. We believe that the sooner we can get assistance to these families, the better served they will be.

Chair Dondero Loop:
Thank you. We will ask those who are in support and wish to testify to come forward.

Maria Mazurowski, Private Citizen, Reno, Nevada:
Two years ago, my husband was diagnosed with frontotemporal dementia. Nobody knew what it was. It is a very rare disease and a form of dementia. At the time of diagnosis, my husband was managing three hotels. For the last two years, he had been acting very strange. We did not know what was going on. We first thought it was a nervous breakdown or a midlife crisis. He finally got fired from his job. We lost health insurance and an income. We almost lost our home. We lost everything. We did not know what to do until he was finally diagnosed.

We did not get any help because Paul, my husband, was only 52 years old. My youngest daughter was in grade 8 and we had two other teenagers. My son dropped out of college. I had not worked for 22 years of my life. I was a homemaker raising three children. I was now confronted with no income, three children, and an ill husband. The last two years have been very difficult. There has been an effort from all of us.

My son has now returned to college and will graduate in December. My second son is graduating from high school. We are making it, but it has been difficult. I encourage you to pass this bill. I have met other families who have younger children in the household and they are not receiving any help. After two years of waiting, we are finally going to get Medicare. It is extremely hard to care for someone who has dementia with younger children in the house. It requires an effort from all of us in the family. We have to rotate shifts to take care of Paul. My children do not have any freedom. The only thing we have not lost is a sense of family and compassion. We are trying to do the best that we can. It is important for people to get to know this disease and how it affects and destroys families, especially the impact it has on children.

Lauren Mazurowski, Private Citizen, Reno, Nevada:
My father was diagnosed with frontotemporal dementia when I was in eighth grade. He had been showing signs since I was in fifth grade. I cannot tell you how hard it has been. The biggest thing I remember is feeling helpless and alone. There were no programs available to us. There was nothing anyone could do to help us. A lot of people do not understand when someone like my father was diagnosed; not only are we losing our father, but we are losing everything. He was the breadwinner. In turn, my mother and both of my brothers had to work full time. When they work, I have to take care of my dad.

When my mother was working late hours, my brother and I would pick up my father from the daycare he was at and go home to babysit. I would not even go to my own room until my mother got home around 9 o'clock at night. From there, we would try and do our homework the best we could. We tried to get scholarships so we could go to college. It has been an extreme struggle for our family. We lost all of our insurance. I cannot even remember the last time I went to the dentist. I want everyone to know that this happens to younger people; it is not something meant for the elderly. My dad was diagnosed at 52 years of age.

I am sure most of you have children or nieces and nephews. What would they do if one of you got diagnosed? How hard would it be for them? When you are voting, please think about these questions. For these reasons, I urge your support of this bill for our family and many other families out there.

Chair Dondero Loop:
Your mother must be very proud of you. You have done an amazing job.

Angie Pratt, Regional Director, Northern Nevada Alzheimer's Association:
I have had the privilege of working with the Mazurowski family. I was not going to speak today, but I wanted to tell you something that happened in my office yesterday.

Our staff has clinical supervision once a month. We were on a clinical supervision call yesterday and a young woman, age 27, came into the office. I got off the clinical supervision call and began to see what her needs were. She announced to me that she had been involved with the Alzheimer's Association. Her sister had come to some of our classes and to our annual walk to end Alzheimer's. She wanted me to know that her father had passed away yesterday morning from Alzheimer's disease at the age of 59. She heard about this bill. She decided after the 14 years her family had been caring for him, that they wanted to become involved to help families who are caring for persons with Alzheimer's disease at a younger age.

She continued to tell me her story. Her father began to have some difficult behaviors when he was 45 years old. It was not until age 51 when he was diagnosed. She is the oldest of four children. Her siblings are ages 25, 23, and 21. They had spent the last 14 years caring for their father. The two oldest children graduated from high school, but they did not go on to college because they felt they had to get jobs to support their father. Unfortunately, the mother and father were divorced. The mother lives in another state. The four children, who were in the custody of their father after the divorce, have been taking care of their father at home. He passed away at Renown Medical Center.

I wanted you to know that story because it is one of many families who are so noble and do everything to care for their loved ones. These children gave up their schooling and many other things in order to see that their parent was cared for when he got the disease at a young age.

Chair Dondero Loop:
Can you tell us what percentage of people are diagnosed with Alzheimer's at a younger age?

Angie Pratt:
There are two types of young-onset Alzheimer's. One is a genetic mutation. The family I was working with yesterday is one of those families where there are many cases of Alzheimer's in the family and young-onset Alzheimer's is present.

For example, the young woman who came to me yesterday, her dad had the disease, his twin had the disease, his dad had the disease, and now his brother has the disease. When you have many cases like this one, it is called a genetic mutation. It is something that our government and the government of Colombia are working on, to see if people can be treated at a young age so they will not develop it in their 40s, which is usually the onset of the disease.

As Valerie Wiener mentioned, about 5 percent of people just develop the disease young. It appears to have some genetic component, but not the genetic mutation where many members in the family have the disease. Does that answer your question?

Chair Dondero Loop:
Yes, it does. Thank you. Are there any questions from the Committee?

Assemblyman Hogan:
I am very interested in this issue. I think it would be helpful to hear from an expert on this issue to give us a quick notion of what the main purposes of the bill are.

Since I have your attention, I might add that one of the reasons for my intense interest in this is because I have also experienced an extraordinarily early onset diagnosis of this disease. I am a young 75-year-old. I am not suffering yet, but I anticipate there will be problems down the road. I want to be supportive of this bill in every possible way. I think the best start for me and my colleagues might be to get a review of exactly what the bill will do for us. There are so many important things to be done for such an increasing number of people, I think that would be valuable. If we have time, it might help us to have a quick rundown on exactly what the bill will do so we support it as strongly as we all should.

Chair Dondero Loop:
You are right. This is a very important issue. Valerie Wiener, are you able to do that for us?

Valerie Wiener:
As I stated in my opening remarks, but probably too briefly, the intention is—and as you heard from passionate testimony—the need for respite services to families and caregivers of those with early-onset Alzheimer's. Currently, services are available for those patients who are over 60 years old and their families. The early-onset Alzheimer's cases have no access to services. In this particular measure, we are dealing with providing respite services for families. When a child is watching over a parent until 9 o'clock at night and then gets to be a child again to do homework, there needs to be a break. There needs to be an opportunity for mom and children to take a breath and regenerate. With this

measure, we provide opportunities for respite for family and caregivers of younger onset. Anybody under 60 years of age who is a patient or has been diagnosed with Alzheimer's, those caregivers have no access to services.

Chair Dondero Loop:
Thank you. Does that answer your question, Mr. Hogan?

Assemblyman Hogan:
That is the beginning. I hope the bill does a few more things than that. Maybe we will learn about those things as we go along.

Chair Dondero Loop:
Is there anyone else in support of S.B. 86 (R1)?

Jane Gruner, Administrator, Aging and Disabilities Services Division, Department of Health and Human Services:
I am here in support of this bill and to let you know that we are ready to provide respite as soon as you approve this bill.

Chair Dondero Loop:
Would you tell us what kinds of things respite includes?

Jane Gruner:
It provides for a caregiver to come into the home and give the family time to do other things or stay with their loved one while they participate in other family duties and meetings. Really, it is whatever the family needs; they can use the respite for anything.

Chair Dondero Loop:
Are there any questions?

Assemblyman Sprinkle:
I am looking at the bill and no fiscal note is attached. I am assuming this was not heard in Senate Finance and will not be heard in Assembly Ways and Means. Is there any fiscal impact on the state?

Jane Gruner:
It fits into another program and expands it so that younger age people can use it. We feel that we can fit it into our current budget.

Chair Dondero Loop:
Is there anyone in opposition? [There was no response.] Is there anyone in the neutral position? [There was no one.] Valerie Wiener, would you like to give us any closing remarks?

Valerie Wiener:
It was an extraordinary privilege to chair the Task Force. It came very late in the interim, but the passion people brought, whether they were Task Force members or came before us as witnesses, and the joy of having this kind of task force to discuss a very difficult subject that many people would rather not talk about and to bring it into the light, is extraordinary.

One person called me after one of our meetings and left me a message. She had been listening to committee meetings for possibly 20 to 30 years and said, "That was the most depressing thing I ever heard." I left a voicemail in response and said that I had a different take on it. I am so excited about being a part of this because we are having these conversations. We are having open dialogue about a health condition to create awareness and activity around addressing this issue. We have done it with other health issues for which we felt discomfort, and we have reversed trends.

I am eager for all of us to work together to reverse the trend on Alzheimer's so that we can find those answers and create healthier lives for people who are afflicted with it, as we have done with so many other chronic diseases; and see the turn in this so that we have amazing changes in health care for the people afflicted and their families.

Chair Dondero Loop:
I will close the hearing on S.B. 86 (R1) and open the hearing on Senate Bill 338 (1st Reprint). We welcome Senator Cegavske.

Senate Bill 338 (1st Reprint): **Changes the term "mental retardation" to "intellectual disability" in NRS. (BDR 39-52)**

Senator Barbara K. Cegavske, Clark County Senatorial District No. 8:
I am here to present Senate Bill 338 (1st Reprint). With me today is Karen Taycher. This bill is one that was brought up last session. What happened is it did not get put into all of the correct *Nevada Revised Statutes* (NRS). We are back again to make sure that it is put in correctly in every NRS that it belongs in. I want to thank Karen Taycher because she actually sat with staff and made sure it was in every NRS it needed to be in. This bill mirrors the federal law commonly cited as Rose's Law. The measure replaces the term "mental retardation" with "intellectual disability" and replaces the term

"mentally retarded" with "intellectually disabled." The measure also revises other similar words or terms in a comparable manner.

Finally, clarifying language is added to declare that amendatory provisions of the bill are nonsubstantiated and that it is not the intent of the Nevada Legislature to modify any existing application, construction, or interpretation of any statute that has been amended. The term "mental retardation" was originally a clinical term and introduced with good intentions; however, the term in its pejorative form "retarded" has been widely used to degrade and insult people with intellectual disabilities. In using the terms "intellectual disability" and "intellectually disabled" in state law, Nevada sends a strong message that language is important and that every person deserves to be treated with respect.

To conclude, S.B. 338 (R1) is a simple measure that accomplishes a lot. It validates that Nevada, and everyone, deserves respect. Thank you for your time and attention. I hope that you will vote in favor of this bill. I would like to turn it over to Karen Taycher.

Karen Taycher, Executive Director, Nevada Parents Encouraging Parents; Member, Nevada Commission on Services for Persons with Disabilities:
We are in support of this bill the second time around. We would like to thank Senator Cegavske for its complete implementation. When this became federal law, Rose's brother became a champion at the age of 14 when he testified in Congress. He said words are important and said what you call people is how you treat them. It is for this reason that we ask for your support on S.B. 338 (R1). It is the next step in gaining respect, inclusion, and acceptance for Nevadans with disabilities.

I would also like to urge that the intent of the passage of this bill makes it clear that we want to change the *Nevada Revised Statutes*, the *Nevada Administrative Code*, the internal policies and procedures, and the forms. I do not want to see the terminology "mentally retarded" on any of our state or county paperwork.

Your actions today will improve the way people with disabilities are treated in Nevada. I have cut my remarks down because we have important presenters in Las Vegas who wish to share their stories with you.

Chair Dondero Loop:
Thank you. We will hear those stories in support.

Sam Lieberman, representing Easter Seals Nevada; Chair, Nevada Parents Encouraging Parents:
I am very proud of this bill as it stands. It is very fitting and appropriate. Many decades ago, in another land, my parents fought to change the Minnesota Society for Crippled Children and Adults, to Courage Center, an organization that serves families in Minnesota and throughout the Midwest. I think this legislation is long overdue and very appropriate. I thank you for your consideration.

As a personal point of privilege, I have been very involved with the Alzheimer's Association in southern Nevada. I commend Valerie Wiener and the Task Force for their work and your consideration of her bill today.

Daniel Stewart, Executive Director, Southern Nevada Association of Providers:
The Southern Nevada Association of Providers is also known as SNAP. I believe it is the state's largest organization of private providers of services for adults and children with developmental disabilities. We would like to thank Senator Cegavske. She has worked with us on a number of bills this session and, although this was not one that we specifically put into a bill draft request, because we saw it was already coming, we want to support it.

Anybody who thinks that this is just a minor change to the law, and that all we are doing is changing some terms—which might be technically true—needs to be aware the bill is hundreds of pages long. That is how much work they had to go through in the statutes to change these terms. It is a pretty significant change that needs to filter down through all of our documents.

Robin Renshaw, Private Citizen, Las Vegas, Nevada:
To me, S.B. 338 (R1) will provide dignity and equality to people with intellectual disabilities. [Mr. Renshaw read from prepared testimony (Exhibit H).]

Chair Dondero Loop:
Thank you for joining us today. Mr. Guthrie, are you there at the table to present or assist?

Ed Guthrie, Executive Director, Opportunity Village:
I am here to present. Opportunity Village is a community rehabilitation program that serves over 800 adults with intellectual disabilities every day. We also serve another 100 to 150 youths every day through a school-to-work transition program. Those youths also have intellectual disabilities.

When I was driving here, somebody cut me off and the first thing I yelled at him, among other things, was, "you idiot." It made me remember that both the terms "idiot" and "moron" used to be diagnoses of individuals with intellectual disabilities. Those terms went into the slang of the American language as derogatory insults for people. Now, the word "retard" has followed suit. The term "mental retardation" would be no more appropriate now than the terms "moron" or "idiot" would be in terms of describing people who have an intellectual disability. For that reason, I strongly support this bill and hope that we can remove the term "mental retardation" from any communications of the state of Nevada or any of its political subdivisions.

Chair Dondero Loop:
Is there anyone else who would like to speak in support?

Kenneth Taycher, Private Citizen, Las Vegas, Nevada:
This bill will provide an equal playing field that people deserve. People with developmental disabilities deserve dignity like everyone else. [Read from prepared testimony (Exhibit I).]

Chair Dondero Loop:
Thank you. I think we have another proud mother sitting here. Mr. Taycher, you did a wonderful job saying Ms. Cegavske's name.

Kenneth Taycher:
Thank you.

Chair Dondero Loop:
Are there any questions from the Committee? [There were none.] Is there anyone in opposition? [There was no one.] Is there anyone in the neutral position? [There was no one.] Senator Cegavske, closing remarks?

Senator Cegavske:
I would be remiss if I did not thank Risa Lang and Brenda Erdoes for helping us. They were great and very tolerant of us calling this back and making sure everything was right. We really appreciate their assistance. I want to thank the Committee for letting us present this today.

Chair Dondero Loop:
I will close the hearing on S.B. 338 (R1). I will now open the hearing on Senate Bill 233.

Senate Bill 233: Revises certain provisions pertaining to zoning. (BDR 40-890)

Senator Barbara K. Cegavske, Clark County Senatorial District No. 8:
Senate Bill 233 repeals each section of the *Nevada Revised Statutes* (NRS) which the federal district court held in *Nevada Fair Housing Center, Inc. v. Clark County*, 565 F. Supp. 2d.1178 (D. Nev. 2008) to be federally preempted, including the provision which directs certain governing bodies to establish a minimum distance between residential establishments.

A "residential establishment" is currently defined in NRS and includes certain homes for individual residential care, halfway houses for recovering alcohol and drug abusers, and residential facilities for groups. Existing state law provides that in a county whose population is 100,000 or more, which is currently Clark and Washoe Counties, the governing body of the county, and of each city in such a county, is required to establish by ordinance a minimum distance between residential establishments that is at least 1,500 feet, but not more than 2,500 feet. Current law also establishes a registry of group homes to ensure observance of any mandatory minimum distance.

However, federal law, with respect to persons with disabilities, specifically preempts conflicting state laws that discriminate in housing based on disability or failure to give persons with a disability the reasonable accommodations required to use and enjoy a dwelling. The United States District Court for the District of Nevada held that the provisions of the Nevada Fair Housing Amendment Act preempted NRS 278.0238 to NRS 278.02388 inclusive. Therefore, these changes are necessary to bring Nevada in compliance.

Chair Dondero Loop:
Are there any questions from the Committee?

Assemblyman Eisen:
It sounds to me from the digest here that it is pretty much obligatory under this federal district court ruling that we pass this. Am I missing something, or is that the whole motivation behind this?

Senator Cegavske:
You are correct. I think Daniel Stewart can go into more detail.

Daniel Stewart, Executive Director, Southern Nevada Association of Providers:
We are in support of S.B. 233. Senator Cegavske has been great in helping us prepare this. Going back to the original question proposed, the Legislative Counsel Bureau has been excellent in their legal analysis in making sure that they get this properly applied and put what this court decision said into effect in Nevada law.

It is obligatory. The difference is that when you normally bring a case, the judge is the only one who has authority of the parties immediately in the case. If this were to happen again, somebody could bring the case and most likely win under this precedent, but it is much easier to handle it this way, statutorily.

Most of the providers who do work for our group do not fall under some of these definitions; for example, "residential establishment" or "group home." Most of the providers in our group are in supported living arrangement services. Basically, you have three or four individuals who rent a home just like any other individuals who would want to be roommates in a neighborhood. We provide services to them, but we do not run it. The term "group home" is pretty broad in common usage. It could mean anything from what I just discussed to drug and alcohol treatment centers. That is part of the reason why we support this law. It is sometimes tough for local governments with a lot of applications going through to understand the meaningful differences that are there.

We also support this because we firmly believe in an extremely robust interpretation of the Fair Housing Act. It has been history, not only here, but in other parts of the country, that the individuals we serve make good neighbors, but sometimes neighborhoods are somewhat resistant.

The law provides good protections. We support this because even if there may be homes covered under this bill that are not a part of our group, we are fully in support of any help for any individuals with disabilities. Often, integrating within a community is the very best way to do that.

Chair Dondero Loop:
Are there any questions? [There were none.]

Ed Guthrie, Executive Director, Opportunity Village:
Opportunity Village supports any bill that increases opportunities for people with disabilities and reduces the restrictions from being able to live, work, and play in our community. For that reason, we strongly support this bill.

Chair Dondero Loop:
Is there anyone in opposition? Neutral? [There was no one.] Senator, closing remarks?

Senator Cegavske:
I thank you for the privilege of being before you with two bills.

Chair Dondero Loop:
I will close the hearing on S.B. 233. I will now open the hearing on Senate Bill 258 (1st Reprint) and would like to welcome Senator Brower and Senator Jones.

Senate Bill 258 (1st Reprint): **Creates the Task Force on the Prevention of Sexual Abuse of Children. (BDR 38-192)**

Senator Greg Brower, Washoe County Senatorial District No. 15:
I would like to briefly mention Senate Bill 86 (1st Reprint). I happen to know firsthand the challenges faced by the Mazurowski family. My daughter is friends and classmates with Lauren. I did not know they were going to be here today, but they did a fantastic job in supporting an outstanding bill. I urge your support.

Senate Bill 258 (1st Reprint), otherwise known as Erin's Law, is a bill that is a privilege to be able to present to this Committee today. I am also proud to present with Senator Jones who will have some words to say about the bill as well.

Erin's Law is named for a young woman by the name of Erin Merryn. She is from Chicago, Illinois. She testified on the Senate side, but was not able to make it here today. We have a brief video from her testimony on the Senate side which we will play in a minute. She has been instrumental in getting various versions of Erin's Law passed in various states in the country. I believe it is up to five states as of today's date. The point of the law is simple. It is to help combat the problem of childhood sexual abuse in our country.

The Nevada version of Erin's Law would create a 15-member, multidisciplinary task force which would be charged with studying this problem and making recommendations to the next Legislature. These recommendations would focus on how our schools, social service network, and our law enforcement agencies can work together more effectively and efficiently to prevent, investigate, and prosecute these horrible crimes.

As to the seriousness of this problem, let me share a couple of statistics with you. Studies reveal that 1 in 4 girls and as many as 1 in 6 boys in our country are exposed to some form of sexual abuse by the age of 18. This is a problem that most people simply do not want to acknowledge or talk about and that is understandable. But in our view, unless we are willing as a society to talk about it, we are not going to succeed in solving this problem.

When I first joined the Department of Justice (DOJ) in Washington, D.C., I was exposed to the DOJ's efforts at the federal level to investigate and prosecute child pornography crimes. I was both shocked and impressed with what I saw. I was shocked because of the sheer volume of cases that are investigated and prosecuted by the DOJ each year. Many such cases involved literally thousands of images of real children. I was impressed by the Department's unprecedented efforts through initiatives such as Project Safe Childhood to bring these predators to justice.

A few years later, as United States Attorney for the District of Nevada, I supervised dozens of prosecutions of child predators which furthered my understanding, for better or worse, of just how big this problem really is. At the time, I resolved to continue to work and do something about it.

While this bill does not specifically address the issue of child pornography, the two issues are obviously connected. I will suggest to the Committee that the problem of child sexual abuse is much bigger and more prevalent than the more narrow issue of child pornography.

When Erin Merryn contacted me about a year ago and asked me if I would consider introducing Erin's Law in Nevada, it was a very easy sale for two reasons. First of all, I understand the scope of the problem. As for me, public service is all about solving problems. Even though this particular problem is difficult to acknowledge and talk about, the depth and breadth of the problem is such that we must talk about it, study it, and work to solve it. Second, as you will see when you watch Ms. Merryn's testimony, Erin Merryn is an amazing young woman whose eloquence, poise, charm, and steadfast determination all make anyone who meets her want to join her in her quest to bring this problem to light.

Erin has transformed her experience as a victim into a commitment to help others. She has made it her mission to convince each of our 50 states to enact some version of Erin's Law. Along the way, she has become a media sensation. She has been interviewed by Oprah Winfrey, Katie Couric, Montel Williams, and others. Glamour Magazine named her 2012 Woman of the Year. I could go on. I wish she was here today, but we will show her video.

Before we do that, I would like to acknowledge my friend and colleague, Senator Jones. He is the primary cosponsor of this bill. I know that some of you on this Committee also signed on as cosponsors. We appreciate that and we appreciate your time today. This is an issue I think all of us would agree is of the utmost importance. This bill would simply create a task force for further study.

Senator Justin C. Jones, Clark County Senatorial District No. 9:
I would like to thank Senator Brower for first approaching me about this law early in the session. I went to Erin Merryn's website and learned more about her and was very impressed with the courage of someone standing up and doing something that I am sure was very difficult. To share her experiences of not just being sexually abused once in her life, but multiple times by multiple offenders is very hard.

Last year, there were more than 350 reported cases of sexual abuse in Clark County alone. That only tells a small part of the story. By most accounts, the studies show that 9 in 10 cases of child sexual abuse go unreported every year. I have had the opportunity to represent child victims of domestic abuse and violence in our court system in Clark County over the past few years. I have seen the physical and emotional scars that sexual abuse leaves on our children. These scars can last a lifetime, particularly when the abuse is perpetrated by family members or religious leaders.

I have an 8-year-old daughter. She was up here a couple of weeks ago; I think some of you met her. I would be mortified if that ever happened to my daughter. I do not know if I would be able to contain myself if I ever found out that someone I knew or she knew had perpetrated such violence on her.

I hope that we all keep that in mind as we move forward with step one of Erin's Law, and we come back next session to sink teeth into our laws to ensure that we educate our students, parents, and our teachers about child sexual abuse. I strongly support S.B. 258 (R1) and encourage your consideration.

Senator Brower:
With your indulgence, I will play the video of Erin's testimony.

Chair Dondero Loop:
Go ahead please.

[Senator Brower played the video of Erin Merryn's testimony from when it was heard in the Senate Committee on Health and Human Services, available at <http://nvleg.granicus.com/MediaPlayer.php?view_id=2&clip_id=1118&meta_id=42145>. Transcription of the video is (Exhibit J).]

Senator Brower:
Thank you for allowing us to play that video. I think that says it all. We would be happy to answer questions.

Chair Dondero Loop:
Thank you for providing that testimony. I am sure it was very powerful with Erin in person. We will go to Committee questions.

Assemblyman Eisen:
I cannot describe how important I think this is. I teach my medical students on a regular basis about child abuse and child sexual abuse. One of the numbers Erin quoted, and Senator Brower mentioned, was that 25 percent of women are survivors of child sexual abuse. In describing that statistic in the past, I had said to my students, given the number of you in the class, it is not just likely, it is a guarantee that you know someone in your class who is a survivor of child sexual abuse. I used to say that to my class as a theoretical until after that lecture, one of my students came up to me and shared that she was a survivor of child sexual abuse.

It is important that we recognize it is a problem that touches all socioeconomic levels of education; no one is immune. In Erin's testimony, I think she emphasized the image we used to have that this is not the stranger who is the risk. There is some risk in that, but the reality is that the overwhelming majority of the time, these perpetrators are people whom these children know and often trust. They betray that trust in this terrible way.

It is also important that we recognize that this is not about sexual desire or sexual satisfaction; this is about control and power. This is a violent act and should not be equated with healthy sex in any way. It is essential that we make sure all of our children are adequately prepared to protect themselves so that they know themselves, their bodies, and they know what is appropriate and what is not and how to respond. I appreciate this coming forward and all the points that Erin made are incredibly important for us to consider.

Senator Brower:
We appreciate your unique perspective amongst this group.

Assemblyman Sprinkle:
I am extremely proud to be one of your joint sponsors on this bill. I echo the comments of Assemblyman Eisen. I have one specific question. The bill talks about the Task Force submitting a report on June 4, 2014. Am I reading it correctly that the Task Force will cease to exist after that? Is this only for next year, or will this be an ongoing endeavor?

Senator Brower:
Yes. The intent of the bill is to create a task force that would meet through the upcoming interim, then make recommendations to the 2015 Legislature and will cease to exist at that time.

Assemblyman Sprinkle:
Was there any thought given to the fact that this might need to be an ongoing task force?

Senator Brower:
Yes. That issue received some discussion in the Senate. I do not see our colleagues from the Executive Branch who were here to provide some clarity as to how this task force might be staffed during the interim, but we never reached a consensus as to whether the task force should continue beyond the interim. It is an interesting idea. I think the idea we brought forward was to start with one interim study, make recommendations, then see what happens from there. I would defer to Senator Jones on that discussion, however.

Senator Jones:
There was a discussion in the Senate Committee on Health and Human Services during the hearing about funding. There was a question from Senator Smith as to how it would be funded. I think there was representation on behalf of the Department of Health and Human Services that they could adequately cover any costs. I think those of us who are elected officials volunteered to be on the task force for free to make sure that there was no fiscal impact.

I think what you are saying may be of some circumstance. We can probably address it next time around if there is a need to continue the task force or interim committee to monitor whether school districts are implementing whatever we come up with as a task force over the interim, and then we can certainly include that in the legislation in the next session.

Assemblyman Oscarson:
I am proud to be on this bill as well. It is important to recognize that we have seen a lot of bills come through on disclosure of child abuse to people in hospitals and those kinds of things. Hopefully those will become law. I have to tell you that my thoughts are that this is probably one of the most important bills we will see. If this were the only thing my name were on and the bill passed, I would consider it a successful session. I appreciate the work you have done and the opportunity to be a part of it.

Assemblyman Hambrick:
Ditto.

Assemblyman Hogan:
This was very powerful testimony we have experienced. I am a father of one daughter and a grandfather of four granddaughters. I am very interested in this bill. As a Nevadan, I am also interested to what extent, if any, our school system has formally taken action to include this in the instruction made available to our children. It seems to me that we ought to be working on that track as well if it is not being adequately taken care of and it ought to be done soon.

Chair Dondero Loop:
Thank you, Mr. Hogan. I believe that may be Assembly Bill 230. We might include that in the bill and we will hope that passes as well.

Senator Brower:
I would like to address that. Assemblyman Hogan, the first thing I did when I was contacted by Ms. Merryn is check in with those who I knew to be the experts in this area—the school districts and state government. My question was, "Are we doing this?" This bill simply would create a task force and not do any kind of curriculum mandates. I was curious as to what we were doing. The response was two-fold. First, we are not exactly doing this, whatever "this" is, which is to be determined after a study by the task force. The other response was, "We like this idea." The folks I was talking to were familiar with Erin's Law and what was being passed around the country. They liked the idea of creating this task force to study the issue in an in-depth, comprehensive, holistic manner. Hopefully this will help the Legislature make some decisions as to what we are not doing and what we should be doing. The short answer is, no. We are not quite doing this in the comprehensive way that I think we should be.

Senator Jones:
In reference to the Chair's comments with regard to Assembly Bill 230, I have been doing research on that bill over the last few days. Looking at Clark County's curriculum and comparing that with what was proposed in Assembly Bill 230, it was interesting to see that one of the areas that was not already covered in the Clark County curriculum was this area. So, we have work to do.

Assemblywoman Fiore:
I am a freshman and this could totally be out of line. I suddenly hear a bill that I want to do pass right now. Can we do that?

Chair Dondero Loop:
No. That would be the Chair's call. We have a rule that we let things sit for 24 hours. Is there any additional support?

John T. Jones Jr., representing the Nevada District Attorneys' Association:
We would like to go on record in support of this measure.

Lindsay Anderson, representing Washoe County School District:
Senator Brower had reached out to us during the interim when this idea came up. In terms of Assemblyman Hogan's question, in Washoe County School District, we are doing some of this, but not in the comprehensive manner that this task force could recommend as far as curriculum, timing, and age appropriateness. We are in support of this bill.

Chair Dondero Loop:
Are there any questions? [There were none.]

Jill Marano, Deputy Administrator, Division of Child and Family Services, Department of Health and Human Services:
The Division wanted to go on record and say that we will also happily support this bill. We feel that we can facilitate it in-house with resources that we currently have.

Chair Dondero Loop:
We will now hear those in opposition. [There was no one.] Is there anyone in the neutral position? [There was no one.] Senator Brower, closing remarks.

Senator Brower:
As much as none of us want to spend a Friday afternoon on issues such as this, I think we can all agree that this is a very important issue. I think the bill presents a modest step forward with respect to trying to combat this problem. I urge your support.

Chair Dondero Loop:
I will close the hearing on S.B. 258 (R1). Is there any public comment? [There was none.]

I would like to thank our state workers and the teachers. Happy Mother's Day. This meeting is adjourned [at 2:07 p.m.].

RESPECTFULLY SUBMITTED:

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Janel Davis
Committee Secretary

APPROVED BY:

____
Assemblywoman Marilyn Dondero Loop, Chair

DATE: _________________________

EXHIBITS

Committee Name: Committee on Health and Human Services

Date: May 10, 2013 **Time of Meeting: 12:42 p.m.**

Bill	Exhibit	Witness / Agency	Description
	A		Agenda
	B		Attendance Roster
S.B. 4 (R1)	C	Kirsten Bugenig	Work session doc. bill description and amendment.
S.B. 51 (R1)	D	Kirsten Bugenig	Work session doc. bill description.
S.B. 53	E	Kirsten Bugenig	Work session doc. bill description.
S.B. 81	F	Kirsten Bugenig	Work session doc. bill description.
S.B. 117	G	Kirsten Bugenig	Work session doc. bill description
S.B. 338 (R1)	H	Robin Renshaw	Written Testimony
S.B. 338 (R1)	I	Kenneth Taycher	Written Testimony
S.B. 258 (R1)	J	Senator Brower	Video excerpt/transcription of Senate Committee on HHS from 4/1/13