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

Seventy-Seventh Session March 18, 2013

The Committee on Health and Human Services was called to order by Chair Marilyn Dondero Loop at 1:36 p.m. on Monday, March 18, 2013, in Room 3138 of the Legislative Building, 401 South Carson Street, Carson City, Nevada. The meeting was videoconferenced to Room 4401 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 Andrew Martin
Assemblyman James Oscarson
Assemblywoman Peggy Pierce
Assemblyman Michael Sprinkle

COMMITTEE MEMBERS ABSENT:

Assemblyman Steven Brooks (excused)



GUEST LEGISLATORS PRESENT:

Assemblywoman Olivia Diaz, Clark County Assembly District No. 11

STAFF MEMBERS PRESENT:

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

OTHERS PRESENT:

Valerie Wiener, Member, Advisory Council on the State Program for Fitness and Wellness

Christopher Roller, representing American Heart Association

Tracey Green, M.D., State Health Officer, Health Division, Department of Health and Human Services, and Medical Director, Division of Mental Health and Developmental Services, Department of Health and Human Services

Chair Dondero Loop:

[Roll was called. Rules and protocol were stated.] I will open the hearing on Assembly Bill 158. We welcome Assemblywoman Diaz to the table.

Assembly Bill 158: Revises provisions governing the Advisory Council on the State Program for Fitness and Wellness. (BDR 40-455)

Assemblywoman Olivia Diaz, Clark County Assembly District No. 11:

I had the privilege to serve on the Advisory Council on the State Program for Fitness and Wellness during the 2011-2012 Interim. I am pleased to be able to carry this bill on behalf of the Council.

There is a lot of important work that has been developed since 2005 when this initiative went through both the Senate and Assembly. Former Senator Wiener and Christopher Roller are in Las Vegas to testify. They are both a huge part of this endeavor. It is important to keep in perspective that preventative care and education we can do on the front end will always pay dividends. With the Affordable Care Act (ACA), we are seeking to move in a direction where people receive the care before it is too late.

I will walk through the bill and then ask Valerie Wiener and Christopher Roller to speak about why these changes are being sought.

Section 3 of the bill shows that we are changing the name of the Council from Advisory Council on the State Program for Fitness and Wellness to the State Program for Wellness and the Prevention of Chronic Disease. Section 4 discusses the desire to increase the membership of the Council by three members. That would bring the membership to 13; currently, we have 10 members. Section 5 limits the years of service. A member can only sit on the Council for two consecutive terms and no more than four years. Section 6 revises the duties of the Health Division. This is a huge part of the bill and something that everybody on the Council is excited about.

Valerie Wiener, Member, Advisory Council on the State Program for Fitness and Wellness:

As Assemblywoman Diaz stated, there is a history with this Council, and I was privileged to be the sponsor of the legislation that created it. I am very proud of the growth this bill has had. The piece expanding membership reflects the new name and the new expanded direction with a focus on chronic disease. That is a sign of the times. We were doing it before and this clarifies it; it makes very specific the focus, intention, and direction of the Council and I support that. Now is the right time to do this.

With the membership expansion, the voice for chronic disease will be present. Christopher Roller has been the solitary voice for many years for the chronic disease portion of the Fitness and Wellness Council, representing heart and strokes. The expansion also creates greater opportunities to do what we want to do and need to do to address health early on. This Advisory Council also needs to seek outside funding and resources. We cannot go to the General Fund to acquire money. With this broader scope of activity, membership, and mission, the Council can expand its opportunities for funding from outside sources.

I will turn the section related to burden reports over to Mr. Roller because I was not at the meeting that addressed that issue, but as I read the language, I am all for it. I think it is the right thing to do to increase the accountability, credibility, and mission of the Council. I am thrilled to be here in support of A.B. 158. This is a major shift in the work of this Council, as the years have changed the needs of the Council and its impact on Nevada. When we originally passed this, Nevada was one of very few states that took the leap to create something in statute so significant as a statewide program and an advisory council addressing fitness and wellness. We have been leaders in this arena for a long time and I am thrilled that this will continue to keep us at the top with this kind of effort with the people involved.

Christopher Roller, representing American Heart Association:

I wanted to talk about some history and how we came about making these changes within the bill. The Council is very unique, not only in terms of nationally, but in the state as it is a statutory advisory body. As an advisory council governed by statute, if we have to make changes and adjustments we have to go through the legislative process. We have been having these discussions for some time. As Chairman, I was involved in those discussions and privy to the developments that took place. It started with efforts on a state level to evaluate the current councils, committees, and boards that exist in the state and to allow for more efficient use of state resources. The Council had to make some adjustments in order to be a part of that effort and to be sustainable going forward.

These adjustments included absorbing the functions of other chronic disease related advisory bodies. An example would be the Preventive Health Services Block Grant. The changes are more inclusive of fully looking into chronic disease issues as a council and as a program. As a state, it became necessary to include new and additional members as well as to change the name to the Advisory Council on the State Program on Wellness and Prevention of Chronic Disease.

In working through the changes, we also found it a necessity to add some members for the new advisory duties of the Council and the new programs and services being taken on by the program for fitness and wellness for the state. We also had to make some changes within the duties of the Health Division because of taking on additional components of chronic disease prevention, as well as protocol pieces that needed to be changed within the language.

In the end, these changes are going to help improve the efficiency and effectiveness of the Council. It is going to improve the program for the state and allow for better collaboration between the organizations and the agencies that are working on wellness and chronic disease. Overall, it will be a better use of taxpayer dollars and resources. These are good, positive changes that I hope this Committee can be supportive of.

Assemblyman Eisen:

As I was looking at the bill, I noticed section 6, line 24 is the inclusion of the Nevada System of Higher Education (NSHE). The description of the members of the Council included a representative of the Superintendent of Public Instruction or a designee. Was it a consideration to include someone from the NSHE directly on the Council to facilitate that coordination?

Assemblywoman Diaz:

May I defer that question to Mr. Roller?

Chair Dondero Loop:

Yes.

Christopher Roller:

The answer to Assemblyman Eisen's question is yes. We looked at one of the additional members being a representative from the NSHE to include that state agency within the decision-making process for what we are going to be doing as we go forward. Originally, the Council was focused within three specific communities—schools for children, seniors, and in the workforce. We felt the necessity, especially if we were taking on additional duties, to go beyond nutrition, physical activity, and obesity prevention to a broader scope of work like chronic disease prevention. An entity such as NSHE needed to be a part of that work going forward so that we could be taking a more community-based approach to the work that the program is doing.

Tracey Green, M.D., State Health Officer, Health Division, Department of Health and Human Services and Medical Director, Division of Mental Health and Developmental Services, Department of Health and Human Services:

As a member of this Council, I would add that the person appointed by the Superintendent of Public Instruction is usually a representative who is a committee member actively involved with the schools. It is not usually an administrator. Darnell Barton has been the member appointed by the Superintendent of Public Instruction.

Assemblyman Eisen:

Thank you. My point was that there was already someone representing K-12 education. Was that a consideration when an NSHE representative was added to the Council? I guess the better question would be whether there is some reason if that was not included or it was not something that was thought of.

Christopher Roller:

I did not answer that part of the question. I apologize. There were discussions, not just specifically about adding a member from NSHE, but other sectors as well. Although there were certainly Council members who wanted to see some additional members added, we had to put a cap on the number of members that we were putting on the Council. We would have gotten to a point where it would have been difficult to get a quorum to be able to logistically carry on the meetings. We had to keep it at an odd number. At one point, there were thoughts to bring on additional members representing the local health authority and chronic disease.

Assemblywoman Diaz:

I have sometimes seen representatives from the cooperative extension services that usually work within the university systems. Adding these four representatives of organizations committed to the prevention and treatment of chronic diseases will lend itself well to having members from NSHE participate in this Council.

Assemblywoman Spiegel:

Section 6, subsection 8, talks about establishing and maintaining a chronic disease surveillance system. I am wondering what the vision is for that. When I hear the words "surveillance system," I automatically think of something that you are probably not intending. Can you clarify the intention?

Tracey Green:

We are hoping to link some of the chronic disease data that we are collecting into our statewide database system with the information being provided to the Fitness and Wellness Council. It would actually be with our Centers for Disease Control (CDC) grants exchanging information through our current database system. We will not be creating a new system.

Assemblyman Sprinkle:

Where exactly does the Council meet and how often? It looks like the Council meets quarterly or upon the discretion of the Chair. It also looks like the Council is getting ready to prepare a report, but it says, "periodically." It sounds like the Council does a lot of good work; I would hope this is an active group and they are not meeting just once a year.

Assemblywoman Diaz:

The Council meets quarterly, but subgroups are created on issues that the Council is working on. It is similar to how subcommittees are created within a council. Those subcommittees carry out the work whether they are looking at data or pursuing improving a website, et cetera. There are different projects that are ongoing, but the meetings happen quarterly or at the discretion of the Chair if something needs to be followed-up on immediately.

Valerie Wiener:

For about two years, we were meeting every other month, and there was a need to do that. Most of the members are in southern Nevada; however, it is interesting that during a videoconferenced meeting there will be substantial participation from a Reno location as well as a Carson City location. Although the composition is reflective and is moving in new directions, there is a second layer of engagement from people who have particular issues and interests related to the charge of the Council. We have people regularly attending

meetings from the Health District or University of Nevada, Las Vegas involved in research on physical activity. It has been a substantial living organism and the reach and impact of this Council has been extraordinary through the years.

Assemblyman Sprinkle:

Are there any guidelines for the periodic reporting?

Tracey Green:

I think that is one of the most exciting parts of what we are looking forward to with the current changes in the bill. By aligning this with our current chronic disease programs, we have the opportunity to focus on the four CDC priority areas so that we report back to the CDC in the four priority areas and we will be using those areas to create our report through the Council. Not to belabor the priority areas, but they cover surveillance and clinical health outcomes. Aligning with our grants, we will create the reports for the Council as well.

Chair Dondero Loop:

Section 6, subsection 12 talks about a chronic care model developed by the MacColl Center for Health Care Innovation. Could you tell me what the MacColl Center for Health Care Innovation is?

Tracey Green:

The chronic care model, in its simplest form, is a model that is similar to what you have heard about the patient-centered medical home. It looks at chronic disease and centers on the biopsychosocial aspects of chronic disease and integrates the education component, the medical component, and the clinical component using a single point of entry. This model is one that will allow for a single entry point for services and a measure of outcomes.

Chair Dondero Loop:

Thank you. Is there anyone in support of this bill? [Valerie Wiener acknowledged she and Christopher Roller are in support of $\underline{A.B.\ 158}$.] Is there anyone in opposition to $\underline{A.B.\ 158}$? [There was no one.] Is there anyone in the neutral position? [There was no one.] Assemblywoman Diaz, would you like to make any final comments?

Assemblywoman Diaz:

I would like to recognize Valerie Wiener as a pioneer in pushing this Council forward, and for all of her hard work and overseeing that we are making this Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease move forward, and really tailor it to where it will have a positive impact on Nevadans across the state. With the changes, we are hopeful that we will become competitive as a state for access to grant money to help put more legs underneath this program that will pay many dividends by ensuring that we are educating our Nevadans on how to be fit, how to be well, and how to better take care of themselves. I urge your support of <u>A.B. 158</u>.

Chair Dondero Loop:

I will close the hearing on $\underline{A.B. 158}$. Is there any public comment? [There was none.]

The meeting is adjourned [at 2:01 p.m.].

[The Chair requested on Wednesday, March 20, 2013, that testimony in support of A.B. 158 submitted by Nicole Williams Bungum (Exhibit C) be included into this meeting, Monday, March 18, 2013. It is available on NELIS.]

| | RESPECTFULLY SUBMITTED: | |
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| | Janel Davis Committee Secretary | |
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| APPROVED BY: | | |
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| Assembly was a Maril or Dandard Law Chair | _ | |
| Assemblywoman Marilyn Dondero Loop, Chair | | |
| DATE: | | |

EXHIBITS

Committee Name: Committee on Health and Human Services

Date: March 18, 2013 Time of Meeting: 1:36 p.m.

| Bill | Exhibit | Witness / Agency | Description |
|-------------|---------|------------------------|-------------------|
| | Α | | Agenda |
| | В | | Attendance Roster |
| A.B. 158 | С | Nicole Williams Bungum | Testimony |