MINUTES OF THE SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

Seventy-Seventh Session April 30, 2013

The Senate Committee on Health and Human Services was called to order by Chair Justin C. Jones at 3:45 p.m. on Tuesday, April 30, 2013, in Room 2149 of the Legislative Building, Carson City, Nevada. The meeting was videoconferenced to Room 4412 of the Grant Sawyer State Office Building, 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 Justin C. Jones, Chair Senator Debbie Smith, Vice Chair Senator Tick Segerblom Senator Joseph P. Hardy Senator Ben Kieckhefer

GUEST LEGISLATORS PRESENT:

Assemblyman Elliot T. Anderson Assembly District No. 15 Assemblyman David P. Bobzien, Assembly District No. 24 Assemblywoman Olivia Diaz, Assembly District No. 11 Assemblyman Wesley K. Duncan, Assembly District No. 37

STAFF MEMBERS PRESENT:

Todd Butterworth, Policy Analyst Risa Lang, Counsel Jackie Cheney, Committee Secretary

OTHERS PRESENT:

Lesley Pittman, United Way of Southern Nevada Denise Tanata Ashby, Children's Advocacy Alliance Marlene Lockard, Nevada Women's Lobby Gary Vause, Little School Academy

Marla McDade Williams, Deputy Administrator, Health Division, Department of Health and Human Services

Warren B. Hardy II, La Paloma Funeral Services

John Drew Lawton, Sierra Memorial Gardens, Inc.

Valerie Wiener

Christopher Roller, American Heart Association

Clara Andriola, Chief Executive Officer, Northern Nevada Chapter, American Red Cross

Julia Wulf, Regional CEO, American Red Cross

Cheryl Blomstrom, Nevada Nurses Association

Matt Long

Christine Michelle Ricca, Southern Nevada Medical Industry Coalition

Alex Ortiz, University Medical Center of Southern Nevada

Chair Jones:

We will open the hearing with Assembly Bill (A.B.) 109:

<u>ASSEMBLY BILL 109 (1st Reprint)</u>: Revises the qualifications and training required for certain persons who operate or are employed by a child care facility. (BDR 38-271)

Assemblyman David P. Bobzien (Assembly District No. 24):

Last Session, this Legislature passed a measure that dealt with strengthening professional development for the directors and employees of child care facilities, A.B. No. 546 of the 76th Session. Unfortunately, the Governor vetoed that bill. Since then, I have held a number of community forums around the State with parents, nonprofit organizations and two child care providers to discuss ideas for moving forward on this issue. <u>Assembly Bill 109</u> is the result of the compromise collaboration efforts of all the parties involved.

Childhood education is important to the future success of students. <u>Assembly Bill 109</u> is intended to ensure those who care for and work with our children have good training and professional development opportunities. My prepared remarks (<u>Exhibit C</u>) explain the contents of this bill and explain why the proposed changes are important.

Lesley Pittman (United Way of Southern Nevada):

United Way of Southern Nevada supports <u>A.B. 109</u>. Research shows 80 percent of a child's brain development occurs during the first 5 years of life. Armed with

that information, we believe it is incumbent upon us to ensure a quality educational experience occurs during those early years.

Training costs and availability were the primary concerns voiced by persons affected by the increased training requirement. Approving this training would continue to fall under the auspices of the existing Nevada Registry as provided in the bill, section 1, subsection 2, paragraphs (a) through (d). According to the Nevada Registry and their review of the training fees charged, 41 percent of all training in 2012 was offered at no cost. Of that total, 19 percent was open to the public. In 2012, the average cost of all training, public, in-house, free and fee-based combined, was \$5.22 per hour of training. In terms of availability, 5,380 registry-approved trainings were offered in 2012. Over 600 online, distance education and independent-study options are available and can be accessed any time from any region of the State.

We have worked hard to bring together all interested stakeholders, public and private, in the early childhood education industry to address the concerns that led to the Governor's veto of A.B. No. 546 of the 76th Session. In response to those concerns, <u>A.B. 109</u> limits the application of the increased training requirements and phases in the new requirements over 3 years.

It is in the State's best interest to ensure each child attending a licensed child care facility receive the same quality instruction designed to prepare him or her both socially and academically for entering elementary school. Passage of A.B. 109 will be one small step in that direction. I have provided the Committee with my written testimony (Exhibit D).

Senator Hardy:

Are there any provisions for grandfathering in the current child care providers?

Assemblyman David P. Bobzien:

Yes. Section 1 of the bill allows a phase-in period for completing the training requirements through January 1, 2016.

Ms. Pittman:

I want to add a couple of points of clarification. The training requirements for center directors in section 1 of $\underline{A.B. 109}$ already exist in regulations. This bill simply codifies the requirement. Additionally, section 1, subsection 1, paragraph (a), subparagraph (5), allows an exception if the administrator of the

Health Division, Department of Health and Human Services (DHHS), determines the child care provider has an equivalent combination of training, education and experience.

Senator Hardy:

Does this apply to persons taking care of six or less children in the home?

Ms. Pittman:

No, it does not.

Denise Tanata Ashby (Children's Advocacy Alliance):

I have provided the Committee my prepared testimony (Exhibit E).

Page 2 of Exhibit E summarizes the content of the various sections of A.B. 109. Regarding the availability of training, currently there are over 480 onsite trainings available, 579 Internet courses, 121 correspondence courses and 4 modules approved and posted on the Nevada Registry Website (Exhibit F). This Website shows the 2012 training approval statistics provided by the Nevada Registry. One college credit counts as 15 training hours. A single 3-credit class is equivalent to 45 training hours. Many of the colleges and universities provide distance education making these classes more accessible.

Resources exist to provide support for early childhood professionals who want to further his or her education. One such resource is T.E.A.C.H. Early Childhood Nevada, which provides scholarships for home care providers, center teachers and aides, center directors and early childhood facility owners. The scholarships provide 80 percent of tuition and books, a \$50 stipend per semester for travel and a \$100 to \$500 bonus. Additionally, the Nevada Office of Early Care and Education, Division of Welfare and Supportive Services, DHHS, in collaboration with the Children's Cabinet, offers scholarship opportunities for the Nevada Association for the Education of Young Children's Annual Conference, each of which yields approximately 10 to 15 credit hours. In 2012, \$19,000 in scholarships was awarded to 47 attendees. In 2013, 60 scholarships were awarded totaling \$24,000 in support.

<u>Exhibit F</u> summarizes the active registry members, and (<u>Exhibit G</u>) identifies the levels of their education.

Marlene Lockard (Nevada Women's Lobby):

The Nevada Women's Lobby supports A.B. 109.

Gary Vause (Little School Academy):

I have been involved in early child care programs since 1970. This includes infant, toddler, preschool, before-and-after school, school break and summer programs. I am a member of the Child Care Association of Nevada and a member of the Nevada Early Childhood Advisory Council. I am opposed to A.B. 109. This bill places an unfair burden on young people who want to become child care professionals. No training funds are provided. The training costs are borne by the individuals providing care.

I agree children should have good care and be prepared to enter elementary school. The children in our facilities reach all the goals required for the Clark County School District kindergarteners. The kindergarteners in our private kindergartens are reading sentences by the end of the year. We provide good services. There is no need to impose new laws and regulations.

Assembly Bill 109 treats child care facilities that care for more than 12 children differently than those caring for less than 12 children. Children all have the same needs. There should not be different rules or standards based upon the number of children cared for by the provider.

Regarding education and training required for child care directors, people who choose child care as a profession are usually young mothers and other people who have good dispositions and aptitudes for child care and teaching young children. These are the most effective providers. I see no need for these additional rules and regulations. We are doing well without them.

Chair Jones:

Section 2 of <u>A.B. 109</u> refers to a child care facility that provides care for more than 12 children. *Nevada Revised Statute* (NRS) 432A.024 refers to an establishment operated and maintained for purposes of furnishing care on a temporary or permanent basis to five or more children. Is there a conflict between these standards?

Marla McDade Williams (Deputy Administrator, Health Division, Department of Health and Human Services):

The Health Division administers the child care licensing program. The age designation was tied to the accommodation facilities that provide care for 12 or more children. The other two facility types fall outside the training requirements.

Chair Jones:

Some companies operate multiple facilities. If a company operates multiple facilities with some caring for fewer than 12 children, would they only be required to provide the increased education for the facilities caring for more than 12 children?

Assemblyman Bobzien:

That is a good question. My guess is this situation does not exist. It is not economically viable to operate a number of facilities with less than 12 children in each facility.

Chair Jones:

The hearing for $\underline{A.B. 109}$ is closed, and the hearing for $\underline{A.B. 79}$ is open.

ASSEMBLY BILL 79 (1st Reprint): Revises provisions relating to early childhood education programs. (BDR 38-199)

Assemblyman David P. Bobzien (Assembly District No. 24):

I have provided the Committee with my written testimony (Exhibit H).

Chair Jones:

Do I understand correctly that this bill codifies something that has been in existence for 4 years by Executive Order?

Assemblyman Bobzien:

That is correct.

Senator Kieckhefer:

Will the Governor let his Executive Order expire so there is no overlap with this new bill?

Assemblyman Bobzien:

That is my understanding.

Chair Jones:

Would the Governor be reappointing the existing members of the Nevada Early Childhood Advisory Council or start over with new members?

Assemblyman David P. Bobzien:

I defer to the Governor's staff and legal counsel to respond to this question.

Ms. Pittman:

United Way is in full support of <u>A.B. 79</u> and the greater emphasis it places on early childhood education in Nevada.

Ms. Tanata Ashby:

The Children's Advocacy Alliance is in full support of <u>A.B. 79</u> as an additional measure to improve the quality of early childhood education in Nevada.

Chair Jones:

The hearing for A.B. 79 is closed. The hearing is open for A.B. 69.

ASSEMBLY BILL 69 (1st Reprint): Revises provisions governing the location of a crematory for human remains. (BDR 40-25)

Assemblyman Elliot T. Anderson (Assembly District No. 15):

Assembly Bill 69 originated from a local issue in an older established neighborhood in my district where the residents have lived in their residences for 20 to 30 years. These residents rose up in opposition to a proposed crematory that would be operating in close proximity to their homes. This project did not go through, but A.B. 69 is presented as a measure to protect them and others from similar issues in the future. I have submitted my prepared testimony (Exhibit I) containing more detail about the genesis of this project.

In developing this bill, I met with crematory owners and homeowners in southern Nevada, as well as representatives of local governments, to ensure this bill would not create any unintended consequences.

Section 1 of A.B. 69 states the bill will only apply to incorporated cities with populations of 60,000 or more. This includes Henderson, Las Vegas, North Las Vegas, Reno and Sparks. Additionally, the bill applies to townships that are contiguous or bordering with these cities. Townships are only contiguous to the cities listed in Clark County. My intent is to have this bill

apply to urban areas where residents would welcome a buffer. Increased space in a locale reduces the need for a buffer.

Section 1, subsection 2, paragraph (b) states the crematorium must be at least 1,500 feet from the boundary line of any parcel zoned for residential use.

Section 2 makes the corresponding changes in NRS 451.645.

Section 3 makes clear this bill does not apply to crematories operating before the effective date of this bill, October 1, 2013.

Senator Kieckhefer:

Local governments traditionally handle land-use issues. Do the local governments have distancing requirements in their master plans related to crematoriums?

Assemblyman Anderson:

In fact, there is existing law in NRS 451.635 that indicates this has already been regulated by the State. However, the distance requirements have not previously been included.

Senator Kieckhefer:

Would A.B. 69 supersede any local land-use zoning? If a jurisdiction prohibited crematories in mixed-use zoning, would this law override any other laws?

Assemblyman Anderson:

This bill will require crematories be 1,500 feet from the boundary line of any parcel zoned for residential use. If the local setback were less than that, the 1,500 setback feet would apply.

Senator Kieckhefer:

Have you coordinated with Assemblywoman Marilyn Kirkpatrick on her proposed legislation regarding the Nevada State Funeral Board? Does <u>A.B. 69</u> give more jurisdiction to the Funeral Board?

Assemblyman Anderson:

I have talked to Assemblywoman Marilyn Kirkpatrick about <u>A.B. 69</u> because she was involved in 2004 with a crematory issue. Nothing came up in our discussions about the Funeral Board.

Senator Hardy:

Did the 1,500 foot setback stem from what is required between gaming establishments and residential areas?

Assemblyman Anderson:

No. I came up with the 1,500 feet by working with my constituents and what seemed reasonable for all concerned without creating unintended consequences.

Senator Hardy:

Is there a health issue?

Assemblyman Anderson:

This is more an emotional issue. There are no issues with the Environmental Protection Agency regarding the impact of crematories on air quality. The fear is there will be damage to the character of the neighborhood.

Senator Hardy:

If a crematory is built in the middle of nowhere and then new residences are built nearby, do the new residents have a basis for complaint?

Assemblyman Anderson:

Once a crematory is zoned, the zoning remains. If someone decides to build close to it, he or she must live with that decision. It is comparable to someone building near a highway after the highway was already there.

Chair Jones:

Am I correct in saying the proposed legislation in <u>A.B. 69</u> would not be a law of local or special law intended to affect residents in your own district, but rather would be a law of general application with uniform operation throughout the State?

Assemblyman Anderson:

Yes, that is correct. The genesis came from a local issue; however, this does apply in like-situated urban areas.

Senator Hardy:

Regarding the definition of the urban areas, the City of Las Vegas represents half of Clark County. Do I understand correctly that this legislation would not affect the County or any other subdivision thereof?

Assemblyman Anderson:

That is correct.

Senator Hardy:

Does this proposed legislation not apply to all the urban areas of Clark County below the population of 60,000?

Assemblyman Anderson:

That is correct. I have a map showing where the legislation would apply. I will provide that to you.

I understand there is an amendment forthcoming. I cannot classify it as a friendly amendment, but as long as it is germane and does not change the intention of my bill, I am neutral.

Warren B. Hardy II (La Paloma Funeral Services):

My client operates the funeral home proposing to place a funeral home with a crematory in the residential area to which Assemblyman Elliot Anderson refers as the genesis of this bill. Clark County approved that project. After it became public and the residents voiced concerns, La Paloma voluntarily withdrew the plan. However, the constituents still wanted to move forward with <u>A.B. 69</u>.

La Paloma Funeral Services supports <u>A.B. 69</u> as presented to you today. We view the opposition as an emotional issue. It is not a health issue. There are virtually zero emissions. You can stand right next to a crematorium and not realize when it is functioning. There is no odor, no visible smoke or anything else that creates a health hazard.

John Drew Lawton (Sierra Memorial Gardens, Inc.):

I have a proposed amendment to <u>A.B. 69</u>. I have discussed the proposal with the City of Reno which has indicated full support. I will read from my testimony (<u>Exhibit</u> J) that describes the background and intent of this amendment.

Senator Hardy:

I grew up walking through the Hillside Cemetery on my way to and from school. The cemetery was in disarray then, and I assume it remains so today. This cemetery has always been a blight in the neighborhood. This is a good plan to address a long-standing problem.

Chair Jones:

Ms. Lang, can you tell us if this amendment meets the germaneness rule?

Risa Lang (Counsel):

I am not sure. I will research this and get back to the Committee with the response.

Senator Smith:

This is a big issue. I worked on the relocation of burial sites located at the Northern Nevada Mental Health Services site. It was a difficult and painful process, much more so than anyone would expect. Families from all across the Country were involved. Why was this not a separate legislation rather than an amendment to this bill?

Mr. Lawton:

My family, as owners, has been working on Hillside Cemetery from the mid-1980s forward. My father worked with former Assemblywoman Vivian Freeman in the 2001 Session on the language in NRS 451, clarifying the proper means of disinterring a facility. The amendment I am proposing now is to correct an oversight that occurred during that time.

Hillside Cemetery contains individualized plots deeded to different persons as opposed to one master parcel where the persons buying into the cemetery have a right of interment. The Hillside Cemetery parcels are taxed until they are utilized. It is difficult to take back unused parcels that become tax delinquent when we cannot locate the owners. This is especially challenging when the parcels have been passed on to heirs.

In answer to your question, it was believed everything had been done in the 2001 Session to address what was needed to post this property properly and make the public aware of the issues. I have been working on this for a number of years. I am an open book to anyone who wishes to come forward and speak with me. We have done some disinterment for families who chose to have loved ones moved to a facility that is properly taken care of and has perpetual care.

Senator Kieckhefer:

Do I understand correctly that there is nothing in the proposal that changes the rules governing disinterment? Does this amendment relate only to what happens with the property post-disinterment?

Mr. Lawton:

Yes, that is correct. All I am doing is adding clarification to the existing law regarding the posting period. As we go through the disinterment process, family members and friends can come forward to voice their concerns and wishes. I am open to working with them to meet their desires. If they choose to have their loved one moved to another facility, we will work with them to do so.

Chair Jones:

The hearing is closed on A.B. 69. The hearing is now open for A.B. 158.

ASSEMBLY BILL 158 (1st Reprint): Revises provisions governing the Advisory Council on the State Program for Fitness and Wellness. (BDR 40-455)

Assemblywoman Olivia Diaz (Assembly District No. 11):

During the past 2011-2012 interim, I served on the Health Division's Advisory Council on the State Program for Fitness and Wellness. This Council has been instrumental in advocating for and improving the well-being of all Nevadans. It is extremely important to continue this work as we move toward the implementation of the Affordable Care Act (ACA). As an educator and Legislator of a district with many at-risk schools, I know education and public awareness campaigns can help Nevadans make informed choices for improving overall health. I am especially excited about the expansion to include chronic diseases such as asthma, cancer, diabetes and oral and cardiovascular disease.

The purpose of the Council is to advise and make recommendations to the Health Division concerning the program. I am presenting <u>A.B. 158</u> on behalf of the State Program for Fitness and Wellness Council. I will begin with an overview of the changes.

In section 3, lines 8 through 23, the name of the program is changed to the State Program for Wellness and the Prevention of Chronic Disease.

Section 4 makes the corresponding name change to the Council and increases the membership from 9 to 13 members. This bill adds three additional representatives of organizations committed to the prevention and treatment of chronic diseases, and will include one representative of a local health authority and one representative of the Nevada System of Higher Education.

Section 5 limits the years of service allowed for members. A member can only sit on the Council for two consecutive terms and no more than 4 years. Each term is 2 years.

Section 6 revises the duties of the Health Division in various ways. This includes requiring the Health Division, with the advice and recommendations of the Advisory Council, to prepare burden reports that quantify the impact of certain health problems and chronic diseases in Nevada.

Valerie Wiener:

This has been an evolving program and council. <u>Assembly Bill 158</u> addresses the updated needs. As the name change suggests, chronic disease needs a stronger voice. I support expanding the membership to have additional representatives for the prevention and treatment of chronic diseases. Bringing the Nevada System of Higher Education into this Council will improve the available research and educational components.

When this Council was initially created, it was one of the first of its kind protected statutorily. Previously, this work had been done under the Governor's auspices or as a special program created under the governorships that came and went with the changing of governors. Nevada gave it a longer life because there was a commitment to long-term oversight.

In the interim, the Sunset Subcommittee of the Legislative Commission reviewed this Council. It is one of the few advisory types of councils connected with State governments and agencies. The membership has continued to be adjusted to ensure the best expertise is available. The Council is extremely helpful to the Health Division in creating policy and programs. The burden report will provide an ongoing mechanism to provide recommendations for program development and ongoing improvements.

I am in full support of A.B. 158.

Christopher Roller (American Heart Association):

The American Heart Association supports <u>A.B. 158</u>. I have submitted my prepared testimony (Exhibit K).

Assemblywoman Diaz:

Valerie Wiener's dedication and perseverance has been instrumental in helping to push the Council to the next frontier, which will have a positive impact on Nevadans across the State. I am hopeful these changes will increase Nevada's opportunities for federal grants.

Senator Jones:

Written testimony was submitted by Nicole Bungum from the Southern Nevada Health District (Exhibit L) stating support of A.B. 158.

I will close the hearing on A.B. 158 and move to A.B. 183.

ASSEMBLY BILL 183: Allows a person who is 16 years of age to donate blood with the consent of his or her parent or guardian. (BDR 40-1015)

Assemblyman Wesley K. Duncan (Assembly District No. 37):

Assembly Bill 183 lowers the blood donation age in Nevada. The law states persons age 17 or older can donate blood. This bill would allow 16-year-olds with parental consent to donate blood. The intent is to encourage more young people to donate blood, increase the blood supply and join 41 other states that have enacted a similar measure.

Clara Andriola (Chief Executive Officer, Northern Nevada Chapter, American Red Cross):

The American Red Cross strongly supports the ability of 16-year-olds to donate blood with parental consent. I have submitted my written testimony (Exhibit M).

Julia Wulf (Regional CEO, American Red Cross):

American Red Cross collects about 5.8 million units of blood annually across the Country in 36 blood regions. Nevada is part of region 20 which covers Nevada, Utah, Idaho and Montana.

When doing blood collections, the American Red Cross is committed to providing safe blood products to patients in need. We are committed to providing a safe process for blood donors so that when they donate their blood they do not have any ill effects following their blood donations. We do that in a number of ways. We have standardized questions developed by the U.S. Food and Drug Administration that we ask each donor. These questions protect the donor by ensuring he or she is healthy enough to donate blood and protect the

patient receiving the blood donations. In addition to donor and patient safety, particularly for young donors, we do a few extra things. For donors under the age of 19, we consider their height and weight and do a mini-physical including a blood pressure test. This helps us know the blood volume of a blood donor. We do not want a low blood volume person to donate blood because he or she is at higher risk of having a donor reaction such as fainting.

The American Red Cross wants the blood donation experience to be positive so the donor will make blood donations a lifelong habit. If we are able to add 16-year-old donors in Nevada, we estimate the blood collections in high schools to increase approximately 25 percent. We are also seeking young donors because as our population ages, some of our donors are no longer eligible to donate due to health concerns.

Please support the passage of <u>A.B. 183</u>. Sixteen-year-old donors can help improve patient health in Nevada.

Cheryl Blomstrom (Nevada Nurses Association):

The Nevada Nurses Association supports A.B. 183.

Matt Long:

I am testifying in support of <u>A.B. 183</u>. This legislation will increase the available blood and save lives. I started donating blood when I was 18 years old. On my part, it was a simple act to help other people. I know several people saved by blood donations. These people would not be here today if they had not received a blood donation. Please pass A.B. 183 for the good of our State.

Christine Michelle Ricca (Southern Nevada Medical Industry Coalition):

The Southern Nevada Medical Industry Coalition supports A.B. 183. This bill will allow for an increase in the much-needed blood supply within Nevada communities. It will also allow for a venue for development of caring and community service for our young Nevadans. All medical groups are in support of A.B. 183, and these groups have further stated that there is no known medical reason for 16-year-olds not to donate blood.

Alex Ortiz (University Medical Center of Southern Nevada):

The University Medical Center of Southern Nevada (UMC) supports <u>A.B. 183</u>. The University Medical Center of Southern Nevada is the only Level 1 Trauma Center in Southern Nevada and serves approximately 12,000 patients annually,

or about 33 patients per day. The UMC also has a Level 2 Pediatric Trauma Center. Approximately 300 patients a year require blood and blood component transfusions. The trauma centers depend upon an instant supply of blood. Increased blood supply will definitely help. Younger blood donors generally have little to no blood contaminants.

Senator Kieckhefer:

I donated blood for the first time when I was in high school. This is a good way to encourage young people to begin helping others.

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Chair Jones: The hearing on A.B. 158 is closed.	
The Senate Committee on Health and Human S	Services is adjourned at 5:12 p.m.
	RESPECTFULLY SUBMITTED:
	Jackie Cheney, Committee Secretary
APPROVED BY:	
Senator Justin C. Jones, Chair	
DATE:	

Senate Committee on Health and Human Services

<u>EXHIBITS</u>				
Bill	Exhibit		Witness / Agency	Description
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	В	6		Attendance Roster
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A.B. 109	D	2	Lesley Pittman	Written Testimony
A.B. 109	Е	7	Denise Tanata Ashby	Written Testimony
A.B. 109	F	1	Denise Tanata Ashby	Nevada Registry 2012 Training Approval Statistics
A.B. 109	G	2	Denise Tanata Ashby	Nevada Registry Active Registry Members
A.B. 79	Н	4	Assemblyman David P. Bobzien	Written Testimony
A.B. 69	I	2	Assemblyman Elliot T. Anderson	Written Testimony
A.B. 69	J	2	John Drew Lawton	Written Testimony and Amendment
A.B. 158	K	1	Christopher Roller	Written Testimony
A.B. 158	L	1	Senator Justin C.Jones	Southern Nevada Health District Written Testimony
A.B. 183	M	5	Clara Andriola	Written Testimony and State Statistics and Youth Blood Donor Information