

SENATE BILL NO. 314—SENATOR ROBERSON

MARCH 16, 2015

JOINT SPONSOR: ASSEMBLYMAN THOMPSON

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions governing certain health districts.
(BDR 40-957)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact.
Effect on the State: No.

CONTAINS UNFUNDED MANDATE (§1)
(NOT REQUESTED BY AFFECTED LOCAL GOVERNMENT)

~

EXPLANATION – Matter in ***bolded italics*** is new; matter between brackets ~~omitted material~~ is material to be omitted.

AN ACT relating to public health; revising the composition and duties of health districts in certain larger counties; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law creates a health district in a county whose population is 700,000 or more (currently Clark County). The health district consists of a district health officer and a district board of health, which consists of representatives selected by various governmental entities and additional members selected by those representatives. (NRS 439.362) **Section 3** of this bill revises the composition of such a health district to include a chief medical officer and a public health advisory board. **Section 3** provides that certain members selected by the representatives of various governmental entities under current law no longer serve as voting members of the district board of health and instead comprise the public health advisory board, the members of which serve as nonvoting members of the district board of health. **Section 3** additionally includes one resident of each city in the county, as selected by the governing body of the city, on the public health advisory board. **Section 3** also prohibits any member of the district board of health from designating another person to vote, participate in a discussion or otherwise serve on his or her behalf. **Section 4** of this bill provides for the conversion of the currently serving members of a district board of health whose positions would become part of a public health advisory board pursuant to **section 3**. **Section 1** of this bill provides for the appointment, job description, qualifications and compensation of a chief medical officer. **Section 3.5** of this bill revises provisions relating to the duties,



20 selection, job description, qualifications and compensation of a district health
21 officer.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 **Section 1.** Chapter 439 of NRS is hereby amended by adding
2 thereto a new section to read as follows:

3 ***1. The district health officer shall, with the approval of the***
4 ***district board of health:***

5 ***(a) Approve a job description, qualifications and compensation***
6 ***for a chief medical officer; and***

7 ***(b) Oversee the recruitment and selection process for and***
8 ***appoint a chief medical officer, who serves under the direction of***
9 ***the district health officer.***

10 ***2. The chief medical officer is entitled to receive the***
11 ***compensation approved by the district health officer and serves at***
12 ***the pleasure of the district board of health.***

13 **Sec. 2.** NRS 439.361 is hereby amended to read as follows:

14 439.361 The provisions of NRS 439.361 to 439.368, inclusive,
15 ***and section 1 of this act*** apply to a county whose population is
16 700,000 or more.

17 **Sec. 3.** NRS 439.362 is hereby amended to read as follows:

18 439.362 1. A health district with a health department
19 consisting of a district health officer ***, a chief medical officer, a***
20 ***public health advisory board*** and a district board of health is hereby
21 created.

22 2. The district board of health consists of:

23 (a) Representatives selected by the following entities from
24 among their elected members:

25 (1) Two representatives of the board of county
26 commissioners;

27 (2) Two representatives of the governing body of the largest
28 incorporated city in the county; and

29 (3) One representative of the governing body of each other
30 city in the county; and

31 (b) The following representatives, selected by the elected
32 representatives of the district board of health selected pursuant to
33 paragraph (a), who shall represent the health district at large and
34 who must be selected based on their qualifications without regard to
35 the location within the health district of their residence or their place
36 of employment:

37 (1) ~~Two representatives~~ ***One representative*** who ~~are~~
38 ~~physicians~~ ***is a physician*** licensed to practice medicine in this State
39 ~~; one of whom is selected on the basis of his or her education,~~



~~training, experience or demonstrated abilities in the provision of health care services to members of minority groups and other medically underserved populations;]~~

~~(2) [One representative who is a nurse licensed to practice nursing in this State;~~

~~— (3) One representative who has a background or expertise in environmental health or environmental health services;~~

~~— (4)] One representative of a nongaming business or from an industry that is subject to regulation by the health district; and~~

~~[(5)] (3) One representative of the association of gaming establishments whose membership in the county collectively paid the most gross revenue fees to the State pursuant to NRS 463.370 in the preceding year, who must be selected from a list of nominees submitted by the association. If no such association exists, the representative selected pursuant to this subparagraph must represent the gaming industry.~~

3. *The public health advisory board consists of:*

(a) One resident of each city in the county selected by the governing body of each such city; and

(b) The following representatives, selected by the district board of health, who shall advise the health district on matters relating to public health and who must be selected based on their qualifications without regard to the location within the health district of their residence or their place of employment:

(1) One representative who is a physician licensed to practice medicine in this State, selected on the basis of his or her education, training, experience or demonstrated abilities in the provision of health care services to members of minority groups and other medically underserved populations;

(2) One representative who is a nurse licensed to practice nursing in this State; and

(3) One representative who has a background or expertise in environmental health or environmental health services.

4. *Members of the public health advisory board serve as nonvoting members of the district board of health. A member of the district board of health may not designate another person to vote, participate in a discussion or otherwise serve on his or her behalf.*

5. *Members of the district board of health and the public health advisory board serve terms of 2 years. Vacancies must be filled in the same manner as the original selection for the remainder of the unexpired term. Members serve without additional compensation for their services, but are entitled to reimbursement for necessary expenses for attending meetings or otherwise engaging in the business of ~~the~~ their respective board.*



~~14.1~~ 6. The district board of health shall meet in July of each year to organize and elect one of its **voting** members **selected pursuant to subsection 2** as chair of the board.

~~15.1~~ 7. The county treasurer is the treasurer of the district board of health. The treasurer shall:

(a) Keep permanent accounts of all money received by, disbursed for and on behalf of the district board of health; and

(b) Administer the health district fund created by the board of county commissioners pursuant to NRS 439.363.

~~16.1~~ 8. The district board of health shall maintain records of all of its proceedings and minutes of all meetings, which must be open to inspection.

~~17.1~~ 9. No county, city or town board of health may be created in the county. Any county, city or town board of health in existence when the district board of health is created must be abolished.

Sec. 3.5. NRS 439.368 is hereby amended to read as follows:

439.368 1. The district board of health shall appoint a district health officer for the health district who shall have full authority as a county health officer in the health district.

2. The district health officer ~~must:~~

~~—(a) Be licensed to practice medicine or osteopathic medicine in this State or be eligible for such a license and obtain such a license within 12 months after being appointed as district health officer;~~

~~—(b) Have at least 5 years of management experience in a local, state or national public health department, program, organization or agency; and~~

~~—(c) Have:~~

~~——(1) At least a master's degree in public health, health care administration, public administration, business administration or a related field;~~

~~——(2) Work experience which is deemed to be equivalent to a degree described in subparagraph (1), which may include, without limitation, relevant work experience with a national organization which conducts research on issues concerning public health; or~~

~~——(3) Obtained certification from or be eligible to be certified by the American Board of Preventive Medicine, the American Osteopathic Board of Preventive Medicine, a successor organization or, if there is no successor organization, by a similar organization designated by the district board of health.] shall direct the work of the health district, administer the health district and perform any other duties specified by the district board of health.~~

3. **The district board of health shall:**

(a) Approve a job description, qualifications and compensation for a district health officer; and



(b) Oversee the recruitment and selection process for a district health officer.

4. The district health officer is entitled to receive ~~fa salary fixed~~ *the compensation approved* by the district board of health and serves at the pleasure of the board.

~~[4.]~~ 5. Any clinical program of a district board of health which requires medical assessment must be carried out under the direction of a physician.

Sec. 4. 1. The term of each member serving on a district board of health created pursuant to NRS 439.362 who is selected pursuant to subparagraph (2) or (3) of paragraph (b) of subsection 2 of NRS 439.362, and the term of one member, chosen by the district board of health, who is selected pursuant to subparagraph (1) of that paragraph, expire on June 30, 2015.

2. A person whose term as a member of a district board of health expires pursuant to subsection 1 shall be deemed to be a member of the public health advisory board created by NRS 439.362, as amended by section 3 of this act, on and after July 1, 2015. The term of office of a person deemed to be a member of a public health advisory board pursuant to this subsection expires on the date that the person's term as a member of the district board of health would have expired notwithstanding the provisions of subsection 1.

3. The governing body of each city specified in paragraph (a) of subsection 3 of NRS 439.362, as amended by section 3 of this act, shall, on or before July 1, 2015, select one resident of the city to serve as a member of the public health advisory board pursuant to that paragraph.

4. The district board of health shall, on or before July 1, 2015, appoint a district administrative officer pursuant to section 1 of this act.

Sec. 5. The provisions of NRS 354.599 do not apply to any additional expenses of a local government that are related to the provisions of this act.

Sec. 6. 1. This section and sections 4 and 5 of this act become effective upon passage and approval.

2. Sections 1 to 3.5, inclusive, of this act become effective on July 1, 2015.

