

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

**Seventy-Eighth Session
March 13, 2015**

The Committee on Health and Human Services was called to order by Chair James Oscarson at 12:48 p.m. on Friday, March 13, 2015, 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 www.leg.state.nv.us/App/NELIS/REL/78th2015. In addition, copies of the audio or video of the meeting may be purchased, for personal use only, through the Legislative Counsel Bureau's Publications Office (email: publications@lcb.state.nv.us; telephone: 775-684-6835).

COMMITTEE MEMBERS PRESENT:

Assemblyman James Oscarson, Chair
Assemblywoman Robin L. Titus, Vice Chair
Assemblywoman Teresa Benitez-Thompson
Assemblywoman Jill Dickman
Assemblyman John Hambrick
Assemblywoman Amber Joiner
Assemblyman Brent A. Jones
Assemblyman John Moore
Assemblywoman Ellen B. Spiegel
Assemblyman Michael C. Sprinkle
Assemblyman Tyrone Thompson
Assemblyman Glenn E. Trowbridge

COMMITTEE MEMBERS ABSENT:

Assemblyman Nelson Araujo (excused)
Assemblyman David M. Gardner (excused)



GUEST LEGISLATORS PRESENT:

Assemblywoman Irene Bustamante Adams, Assembly District No. 42

STAFF MEMBERS PRESENT:

Carol M. Stonefield, Managing Principal Policy Analyst, Research Division,
Legislative Counsel Bureau
Kirsten Coulombe, Committee Policy Analyst
Nancy Weyhe, Committee Secretary
Jamie Tierney, Committee Assistant

OTHERS PRESENT:

Mary Woods, Public Information Officer, Department of Health and Human Services
Christine Mackie, Chief, Division of Public and Behavioral Health, Department of Health and Human Services
Laurie Squartsoff, Administrator, Division of Health Care Financing and Policy, Department of Health and Human Services
Coleen Lawrence, Chief Program Services, Division of Health Care Financing and Policy, Department of Health and Human Services
Bonnie McDaniel, Private Citizen, Las Vegas, Nevada

Chair Oscarson:

[Roll was taken. Committee rules and protocol were explained.]
Assemblywoman Irene Bustamante Adams will present Assembly Bill 199.
[Chair Oscarson read a description of the bill.]

Assembly Bill 199: Makes various changes to certain advisory committees and programs relating to health care. (BDR 38-552)

Assemblywoman Irene Bustamante Adams, Assembly District No. 42:

Last year I had the honor of being the Chair of the Sunset Subcommittee of the Legislative Commission, and I am here to introduce Assembly Bill 199. With me is Carol Stonefield who was the legislative staff person on the Subcommittee.

I believe that I have presented about the Sunset Subcommittee and its mission to most of my colleagues in other committees but to recap, the Committee was created in 2011 under Senate Bill No. 251 of the 76th Session and our mission is to review all boards and commissions created by this body and decide if they should be continued, modified, consolidated with another entity, or terminated. Last year we reviewed 31 entities. At the end of our deliberations, we make

recommendations to the Legislative Commission and they decide whether to bring forth our recommendations. That is why you have A.B. 199, which includes five different entities that were considered by the Subcommittee at different meetings. I will address them individually.

First is the Medical Care Advisory Group; sections 1, 2, and 3 of the bill relate to this group. Its purpose is to advise the Division of Health Care Financing and Policy in the Department of Health and Human Services regarding the provisions of services and the development of policies for welfare recipients. It was established in 1975; it has nine members including the Chief Medical Officer. Eight of the members are appointed by the Director of the Department of Health and Human Services (DHHS). We voted unanimously as a Subcommittee to continue this, but we do have the following changes: First, in existing statutes it provides that the members of the advisory group serve one-year terms. The Subcommittee learned that the terms of all the members expire on the same date each year and we were told that filling the positions has not been a problem; however, because they want to maintain some kind of continuity, it may become an issue at some point if the turnover is large in any given year. Thus, the Subcommittee is recommending that the terms of the appointees be extended to two years with half of the terms expiring each year; section 7 of the bill provides for that transition.

In addition, the advisory group requests that the name be changed from "group" to "committee." It seems that the members refer to themselves as a committee and since the entity is before the Legislature for review, the members indicated that they would like to see this statute changed to align the name with what they call themselves now. If the Legislature approves, this would become the Medical Care Advisory Committee.

The second recommendation is the repeal of certain advisory committees. As the Chair I decided in 2014 that we would review the boards and commissions that were considered inactive, and in total we found 15 of them. A number were advisory committees to DHHS, so in addition to changes to the Medical Advisory Group, A.B. 199 proposes to repeal the advisory health related committees and in some instances transfer their duties to another entity that does not meet regularly. You will note that section 8 of this bill lists a number of the sections of *Nevada Revised Statute* for repeal. These include the Advisory Committee on the Arthritis Prevention and Control Program, NRS 439.503; the Advisory Committee for the Prevention and Treatment of Stroke and Heart Disease, NRS 439.492; and the Advisory Committee Concerning Sickle Cell Anemia, NRS 442.118. The Subcommittee does not intend to ignore these serious health conditions. Obviously, previous legislators

cared enough about them to create these advisory committees, so the Sunset Subcommittee is recommending a transfer of the duties to other entities.

The recommendations were influenced by testimony from the representatives of DHHS. The Subcommittee was told that the department had so many advisory committees that it was difficult to find people willing to serve on them. Responsibilities for arthritis, stroke and heart disease can be transferred to the Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease which is called CWCD. It already has the responsibility for advising on various illnesses such as asthma, cancer, diabetes and cardiovascular disease. You will find this transfer in section 4 of the bill. Responsibility for making recommendations regarding awareness and screening for sickle cell anemia can be transferred to the State Board of Health, which has an advisory committee on newborn screening for disorders that are inherited or preventable. You will find this transfer in section 6 of the bill.

The Sunset Subcommittee is also recommending the repeal of the Advisory Committee to the Pharmacy and Therapeutics Committee and the Drug Use Review Board. This advisory committee has outlived its usefulness. It was created to ensure public participation in the Pharmacy and Therapeutics Committee and in the Drug Use Review Board; however, both of these entities comply with the Nevada's Open Meeting Law which provides opportunity for public comment. For that reason DHHS has informed the Sunset Committee that this advisory committee is no longer needed.

Lastly, the Subcommittee recommends repealing the Nevada Academy of Health. The Academy was created in 2007 and was a recommendation developed by Governor Guinn's Commission on Medical Education, Research and Training. It was intended to be a public/private partnership and perhaps eventually a not-for-profit medical think-tank. The initial legislation included an expiration date of 2009. Even though the Legislature repealed the expiration, the Academy never achieved its independent status, and it stopped meeting several years ago. Section 5 of the bill amends the power of the Legislative Committee on Health Care to delete a reference to prescribing duties of the Academy.

In conclusion, Mr. Chair, in an effort to make some entities more effective, to clean up the statutes and to get rid of entities that are inactive, the Sunset Subcommittee is recommending as a summary revision to the Medical Care Advisory Group repeal of four advisory committees and the Nevada Academy of Health, and lastly the transfer of certain responsibilities from these advisory committees to CWCD. I would be happy to answer any questions about the Subcommittee's work, but I also have in the audience

entities from the health care community that interact with these entities if you would like to ask them specific questions.

Carol M. Stonefield, Managing Principal Policy Analyst, Research Division, Legislative Counsel Bureau:

I am only here as a resource. I would be happy to answer any questions about the functions of the Sunset Subcommittee.

Assemblywoman Titus:

I would like to thank you for the time and effort put in on the Sunset Committee and bringing some common sense to this process and combining some of these committees. We have all served on different committees and sometimes you wonder what we are even doing on those committees. Thank you for that hard work and consolidation while recognizing the importance of what these committees did.

Assemblyman Thompson:

I want to echo what my colleague, Assemblywoman Titus, had to say. Thank you for the great work and, most importantly, I would like to point out that this was interim work. So this is work when we are not in Session that we did with a lot of our committees. However, before we strike out subsection 21, the Nevada Academy of Health, I am going to look over it within the next few days because it sounds very important. I may have some follow-up questions about it. Maybe we can find another place where it can live.

Chair Oscarson:

Any questions from the Committee? [There were none.] We will now take testimony in support of A.B. 199.

Mary Woods, Public Information Officer, Department of Health and Human Services:

I want to go on record as being in support of this bill.

Christine Mackie, Chief, Division of Public and Behavioral Health, Department of Health and Human Services:

For the record I am in support of A.B. 199, sections 4 and 6 of this bill.

Laurie Squartsoff, Administrator, Division of Health Care Financing and Policy, Department of Health and Human Services:

We are here to support A.B. 199 because it extends the terms of the Medical Care Advisory Committee members appointed on or after July 1, 2015, to two years, providing consistency with other committee members, and it abolishes the duplicative advisory committees to the Pharmacy and

Therapeutics Committee and the Drug Use Review Board ([Exhibit C](#)). The bill has no fiscal note.

Coleen Lawrence, Chief Program Services, Division of Health Care Financing and Policy, Department of Health and Human Services:

I have overseen the Advisory Committee to the Pharmacy and Therapeutics Committee and the Drug Use Review since its inception, so I would be happy to answer any questions that you may have of why we are abolishing the committee and why we are in agreement and support of it.

Chair Oscarson:

Any questions from the Committee? [There were none.] Any testimony in opposition to A.B. 199? [There was none.] We will close opposition. Any testimony on neutral? [There was none.] Seeing none on neutral, Assemblywoman Bustamante Adams, would you like to close for us?

Assemblywoman Bustamante Adams:

I appreciate the acknowledgement of the work during the Interim, and I appreciate your support of A.B. 199.

Chair Oscarson:

Seeing no further testimony, I will now close the hearing on A.B. 199. We will now start with our work session. We will start with Assembly Bill 42 and Ms. Coulombe will review A.B. 42 for us.

Assembly Bill 42: Revises provisions relating to mammography and the reporting of information on cancer. (BDR 40-331)

Kirsten Coulombe, Committee Policy Analyst:

Assembly Bill 42 was sponsored by the Division of Public and Behavioral Health. It was heard on February 23, 2015, and it removes the requirement that a radiation machine be used exclusively for mammography, thereby allowing the machine to be used for other purposes. [Continued to read from work session document ([Exhibit D](#)).]

Chair Oscarson:

Is there a motion on Assembly Bill 42?

ASSEMBLYMAN THOMPSON MOVED TO AMEND AND DO PASS
ASSEMBLY BILL 42.

ASSEMBLYMAN TROWBRIDGE SECONDED THE MOTION.

THE MOTION PASSED. (ASSEMBLYMEN ARAUJO AND GARDNER
WERE ABSENT FOR THE VOTE.)

Assemblyman Thompson will have the floor statement for Assembly Bill 42.

Chair Oscarson:

We will now move on to Assembly Bill 81. After Ms. Coulombe has finished reading Assembly Bill 81, I would like Assemblywoman Titus to convene the group to discuss this bill.

Assembly Bill 81: Revises provisions governing programs of treatment for the abuse of alcohol or drugs. (BDR 40-488)

Kirsten Coulombe, Committee Policy Analyst:

Assembly Bill 81 was brought forth by the Supreme Court of Nevada and was heard on February 13, 2015. [Continued to read from the work session document ([Exhibit E](#)).]

There was a working group on this with multiple parties that included representatives of the Division of Public and Behavioral Health, a public participant, the sponsor, as well as representatives from the Clark County and Washoe County District Attorney's Office. I will walk through the amendments that were worked through by the group.

There is a document attached to this work session document, and you will see the language as the bill was introduced is on the left-hand column and on the right is what was proposed. That was what the members of the working group went through. On the bill page is the summary of those amendments with the intent which I am going to walk through right now. [Read through the amendments on the work session document ([Exhibit E](#)).]

Assemblywoman Titus:

We held a working group on Friday, February 27, 2015, and it was a packed house. There were people from all sides of the aisle—which is quite impressive—not only from the courts but also from the public defender's office and the district attorney's office, both north and south. Clark County was represented, along with Washoe County, Elko, treatment providers, and a private citizen who represented the people most affected, the clients and the

patients. I felt that it was a fairly thorough representation and people were able to express their concerns on a line item.

We took this bill down from start to finish and made sure that everybody at the table really came to a consensus on what this bill was really about. It was really all about the patients and clients and making sure that their needs were met and that the courts allowed them another option. We are going in different places in this day and age trying to keep people out of our jails with our diversion programs, mental health issues, and alcohol and drug abuse issues. Our facilities and our jails are swamped with people; perhaps if we had another avenue these facilities would not be so full. I feel pretty confident and I was impressed with how this worked out and how all agencies really recognized why we were even there. I thought it was fairly successful. I know that it is cumbersome. I thank Kirsten Coulombe for the detailed line items. I think everything was done to the best of the intent of this bill.

Assemblyman Moore:

Could you clarify section 17, which amends NRS 458.175? It says, "If a peace officer arrests or takes into custody a person who is found in any public place unlawfully under the influence" Please explain to me what you mean by "unlawfully."

Assemblywoman Titus:

Section 17 is current law. We are not changing any law other than giving them an option. The sponsor of the bill can address that, but section 17 is current law. It was important that "under the influence" and "civil protective custody" did not go away.

Assemblyman Moore:

I will talk to you offline.

Chair Oscarson:

On Assembly Bill 81, I will take a motion to amend and do pass.

ASSEMBLYMAN TROWBRIDGE MOVED TO AMEND AND DO
PASS ASSEMBLY BILL 81.

ASSEMBLYWOMAN DICKMAN SECONDED THE MOTION.

THE MOTION PASSED. (ASSEMBLYMEN ARAUJO AND GARDNER
WERE ABSENT FOR THE VOTE.)

The floor statement is assigned to Assemblywoman Titus. We will now hear Assembly Bill 156.

Assembly Bill 156: Revises provisions governing family resource centers. (BDR 38-209)

Kirsten Coulombe, Committee Policy Analyst:

Assembly Bill 156 is sponsored by Assemblyman Tyrone Thompson, and it was heard on March 2, 2015. It requires the Director of the Department of Health and Human Services to analyze demographics and data when declaring a community an "at-risk community." [Continued to read the work session document ([Exhibit F](#)).]

Chair Oscarson:

Do I have a motion to amend and do pass Assembly Bill 156?

ASSEMBLYMAN MOORE MOVED TO AMEND AND DO PASS
ASSEMBLY BILL 156.

ASSEMBLYWOMAN JOINER SECONDED THE MOTION.

THE MOTION PASSED. (ASSEMBLYMEN ARAUJO AND GARDNER
WERE ABSENT FOR THE VOTE.)

Assemblyman Thompson will make the floor statement.

Chair Oscarson:

Lastly we will proceed to Assembly Bill 157.

Assembly Bill 157: Revises provisions governing service animals. (BDR 38-638)

Kirsten Coulombe, Committee Policy Analyst:

Assembly Bill 157 is sponsored by Chair Oscarson and was heard on March 4, 2015. It revised the definition of "service animal" and "service animal in training" to only include dogs and miniature horses with training to perform tasks that benefit a person with a disability. [Continued to read from work session document ([Exhibit G](#)).]

Chair Oscarson:

Is there a motion?

ASSEMBLYWOMAN DICKMAN MOVED TO AMEND AND DO PASS
ASSEMBLY BILL 157.

ASSEMBLYMAN SPRINKLE SECONDED THE MOTION.

THE MOTION PASSED. (ASSEMBLYMEN ARAUJO AND GARDNER
WERE ABSENT FOR THE VOTE.)

Assemblyman Sprinkle will do the floor statement. We will now open for public comment.

Bonnie McDaniel, Private Citizen, Las Vegas, Nevada:

I am a 55-year resident of Las Vegas. I have been a trauma nurse, open-heart nurse, and helicopter nurse for the last 40 years. I am and still continue to be opposed to portions of this bill. Most of it is fine. Starting with subsection 1, I am opposed to the deletion of the words "an animal." In section 2, "a dog or miniature horse" needs to be deleted. These are not the only animals that can be used as service animals. There are many, many people and many children with Attention Deficit Hyperactivity Disorder, Down syndrome, other birth defects, and children with cancer who have cats, rabbits, guinea pigs, et cetera. They are classified with the Americans with Disabilities Act of 1990 (ADA) as service animals because they are calming and make the person more manageable for their parents to take along with them when they go shopping or traveling. They are registered as service animals under the ADA rules and regulations. The only difference is that they must be carried in their carriers.

My neighbor is epileptic and has two cats: one cat will notify her family if their mother is asleep and she is about to go into a seizure because of chemical imbalances; the other cat will wake her up if necessary or, if she is awake, the cat will pat her on the cheek or whatever to remind her owner to take her medicine so she does not have a seizure—especially if she is alone.

I also know of several other people who are diabetics who have cats that do the same thing for the insulin levels and the sugar levels of the patients, reminding them that they better check their sugars before they go into a diabetic coma.

According to the federal ADA website people with service animals cannot be asked what their disability is and they do not have to show what the animal is trained to do. That is difficult to do when you are in a grocery store and the manager says, "Well show me what your cat or dog can do."

I do support the balance of the bill. I wish we would not limit it to dogs and miniature horses—I would really like to see a miniature horse on an airplane.

I have used therapy dogs and service dogs for the last 15 years and find that a lot of people have other animals that they use as service animals. They all have federal registrations from the federal ADA that they carry with them at all times. I would really like you to leave the "dog" and "miniature horse" part out. At least put in that other animals are and can be classified as service animals.

Chair Oscarson:

Thank you for your advocacy and your thoughts, we appreciate your sharing them with us. Any other public comment at this time? [There was none.] Seeing none, the meeting is adjourned [at 1:23 p.m.].

RESPECTFULLY SUBMITTED:

Nancy Weyhe
Committee Secretary

APPROVED BY:

Assemblyman James Oscarson, Chair

DATE: _____

EXHIBITS

Committee Name: Committee on Health and Human Services

Date: March 13, 2015

Time of Meeting: 12:48 p.m.

Bill	Exhibit	Witness / Agency	Description
	A		Agenda
	B		Attendance Roster
A.B. 199	C	Laurie Squartsoff, Division of Health Care Financing and Policy, Department of Health and Human Services	Written Testimony
A.B. 42	D	Kirsten Coulombe, Committee Policy Analyst	Work Session Document
A.B. 81	E	Kirsten Coulombe, Committee Policy Analyst	Work Session Documents
A.B. 156	F	Kirsten Coulombe, Committee Policy Analyst	Work Session Document
A.B. 157	G	Kirsten Coulombe, Committee Policy Analyst	Work Session Documents