

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

**Seventy-Eighth Session  
March 4, 2015**

The Senate Committee on Health and Human Services was called to order by Chair Joe P. Hardy at 3:32 p.m. on Wednesday, March 4, 2015, 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 Joe P. Hardy, Chair  
Senator Ben Kieckhefer, Vice Chair  
Senator Mark Lipparelli  
Senator Joyce Woodhouse  
Senator Pat Spearman

**STAFF MEMBERS PRESENT:**

Marsheilah Lyons, Policy Analyst  
Eric Robbins, Counsel  
Debra Carmichael, Committee Secretary

**OTHERS PRESENT:**

Benjamin Schmauss, American Heart Association  
Kim Dokken, RN, Director, Trauma and Stroke Programs, Dignity Health-St. Rose Dominican  
Deborah Williams, MPA, MPH, CHES, Manager, Office of Chronic Disease Prevention and Health Promotion, Southern Nevada Health District  
Rebecca Scherr, MD, Assistant Professor of Pediatrics, University of Nevada School of Medicine  
Derek Cox, Training Officer, Las Vegas Fire & Rescue  
Steve Schauer  
Lori Wright  
Dave DeValk, Vice President, Saint Mary's Regional Medical Center

Heather Schofield, RN, BSN, Stroke Program Coordinator, Saint Mary's Regional Medical Center

Kathy McCormick

Stacy Woodbury, MPA, Executive Director, Nevada State Medical Association

Rick Casazza, Chairman of the Board, Northern Nevada Division, American Heart Association; American Stroke Association

Joan Hall, President, Nevada Rural Hospital Partners

Brian Brannman, Senior Vice President, Nevada Operations, Dignity Health-St. Rose Dominican

Mary Wherry, RN, MS, Deputy Administrator, Community Services, Division of Public and Behavioral Health, Department of Health and Human Services

Bill Welch, President, CEO, Nevada Hospital Association

**Chair Hardy:**

I will open the hearing on Senate Bill (S.B.) 196. Senate Bill 196 establishes a Stroke Registry. Section 10 is germane due to definition. It allows a provider of health care to use credit earned for continuing education relating to Alzheimer's disease in place of not more than 2 hours each year of the continuing education that the provider of health care is required to complete unless a specific statute or regulation requires or authorizes a greater number of hours.

**SENATE BILL 196**: Makes various changes concerning health care. (BDR 40-84)

**Benjamin Schmauss (American Heart Association):**

The American Heart Association supports S.B. 196. I have provided my written testimony ([Exhibit C](#)). Page 2 illustrates hospitals are gathering data individually, which if put together in a single registry could improve the system of care drastically in Nevada. It would allow collaboration across many partners. The Stroke Registry data draws together providers, which increases collaboration, improves system care and provides data-driven decisions as shown on page 3.

**Kim Dokken, RN (Director, Trauma and Stroke Programs, Dignity Health-St. Rose Dominican):**

Dignity Health-St. Rose Dominican supports S.B. 196. I have provided written testimony ([Exhibit D](#)). Based on negotiations between the Nevada Hospital Association, the American Heart Association and the American Stroke Association yesterday, we support the friendly amendment they will be submitting.

**Deborah Williams, MPA, MPH, CHES (Manager, Office of Chronic Disease Prevention and Health Promotion, Southern Nevada Health District):**

The Southern Nevada Health District (SNHD) supports S.B. 196. The Health District replicated a national analysis and found 40 percent or more of stroke deaths in Clark County could have been prevented through improved treatment and prevention strategies as outlined in my written testimony ([Exhibit E](#)). The SNHD Office of Chronic Disease Prevention and Health Promotion works with community partners to advance strategies to prevent strokes by promoting aspirin use, controlling blood pressure and cholesterol, and promoting smoking cessation. The SNHD will continue to work with stakeholders to support efforts designed to better treat and prevent strokes and will rely on data developed through a stroke registry to monitor the impact.

**Rebecca Scherr, MD (Assistant Professor of Pediatrics, University of Nevada School of Medicine):**

I have submitted a letter of support for S.B. 196 ([Exhibit F](#)).

**Derek Cox (Training Officer, Las Vegas Fire & Rescue):**

Las Vegas Fire & Rescue supports S.B. 196. I have submitted my written testimony ([Exhibit G](#)).

Dr. Dave Slattery, Medical Director and Deputy Chief, Las Vegas Fire & Rescue supports S.B. 196. He is unable to attend today's hearing. I have submitted his written testimony ([Exhibit H](#)).

**Steve Schauer:**

I am a sudden cardiac arrest survivor and I support S.B. 196. Data drives effective decision-making, and data from the Stroke Registry will improve collaboration and provide insight into areas of greatest need. This bill is more than a registry bill; it strengthens Nevada's system of care and will improve collaboration.

**Lori Wright:**

I am a stroke survivor and volunteer at several hospitals in Las Vegas. It is important to have all the hospitals on board and working together. I support S.B. 196.

**Dave DeValk (Vice President, Saint Mary's Regional Medical Center):**

Saint Mary's Regional Medical Center (SMRMC) is certified by the Joint Commission as a primary stroke center. The hospital uses data to aid the physicians in the fight to save lives. In preparation for SMRMC's accreditation survey, the hospital has been learning the guidelines for the stroke registry. We are proud of the improvements made in the care processes for patients. This bill can improve the system of care in Nevada and enable increased collaboration with other hospitals and community partners.

**Heather Schofield, RN, BSN (Stroke Program Coordinator, Saint Mary's Regional Medical Center):**

Behind SMRMC's certification as a primary stroke center are years of hard work. That would not have been possible without the data obtained from the registry. It enabled us to see shortcomings, where we excelled and where resources could be focused to improve the care provided to stroke patients. Using statewide data, we are able to benchmark against other organizations in the State. We are able to reach out to people who excel in certain areas and gain input as to how SMRMC can improve stroke care. Any bill that helps to strengthen collaboration between different providers is a good thing and I am in support of S.B. 196.

**Kathy McCormick:**

I support S.B. 196 and have provided written testimony ([Exhibit I](#)).

**Stacy Woodbury, MPA (Executive Director, Nevada State Medical Association):**

The Nevada State Medical Association supports S.B. 196.

**Rick Casazza (Chairman of the Board, Northern Nevada Division, American Heart Association; American Stroke Association):**

I have been volunteering with the American Heart Association and the American Stroke Association for 35 years and I have seen strokes go from the third leading cause of death to the fifth leading cause of death. Programs like "Get With the Guidelines" that collect data and the proposed registry will help improve the system of care. This will save lives. This will improve lives. The Associations support S.B. 196.

**Joan Hall (President, Nevada Rural Hospital Partners):**

As a member of the heart and stroke task force, I recognize the importance of data to improve the delivery of care. As president of the Nevada Rural Hospital

Partners (NRHP), I recognize the difficulty our members have in abstracting data from various registries. The NRHP is committed to participate in the registry. With the advent of online stroke programs, rural Nevada will be able to participate and show better results. The NRHP is pleased to see in section 6, subsection 1, paragraph (d) the wording "Encourage the reporting of data," instead of mandating the reporting of data. We look forward to the increase of data. The Nevada Rural Hospital Partners support S.B. 196.

**Senator Spearman:**

What would the obstacles be if the reporting were mandated?

**Ms. Hall:**

For the smaller hospitals, any mandated reporting becomes a burden. The smaller hospitals do not have full-time people who can coordinate between the different registries. They do not have the funds to pay for the software and the updates. The Nevada Rural Hospital Partners is determining if our organization could be the collector of the information. Someone on staff could input the information into the various registries. That has met with opposition because the data has to come directly from the hospitals.

**Chair Hardy:**

Could the Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease or the Nevada Chronic Disease Prevention and Health Promotion State Plan be a receptacle for this data? Would it minimize the impact on the rural hospitals?

**Ms. Hall:**

Yes, one of the goals of the task force is getting combined information.

**Brian Brannman (Senior Vice President, Nevada Operations, Dignity Health-St. Rose Dominican):**

On behalf of our three hospitals in Nevada, Dignity Health-St. Rose Dominican supports S.B. 196. I have submitted my written testimony ([Exhibit J](#)). Health care has become evidence-based and it is all about the data. The more we know, the more we are able to improve the care. We have made tremendous progress in managing hemorrhagic and ischemic strokes because of the data. The way we help people get back to normal lives is to look at the data, improve our care and better serve the people who come to us and depend on us.

**Chair Hardy:**

Ischemic strokes are frequently caused by blood clots that lodge in arteries and block the flow of blood to parts of the brain. Hemorrhagic strokes occur when blood vessels rupture within the brain.

**Mary Wherry, RN, MS (Deputy Administrator, Community Services, Division of Public and Behavioral Health, Department of Health and Human Services):**

Since section 6 of S.B. 196 expects the Division to establish and maintain the Stroke Registry, there is a \$21,200 fiscal note. If the Division was not expected to adopt regulations, as proposed in section 6, subsection 1, paragraph (e), the fiscal note could be reduced by \$8,500. It will cost \$2,000 a year to purchase a State license for Qualtrics, the data collection software hospitals use. The Division staff is discussing ways to eliminate the fiscal note and may be able to absorb the \$2,000 within other budget accounts. However, if section 6 stays "as is" there would be the \$8,500 cost.

**Senator Kieckhefer:**

Does the Division have a position on the policy part of the bill?

**Ms. Wherry:**

The Division does support S.B. 196. We stand behind the importance of data-driven decision-making and would champion the work covered in section 8 regarding publishing an annual report and using the data. This presents a great opportunity for staff to partner with hospitals and emergency medical service providers to identify potential solutions for improving the treatment of patients. The Division cannot do this because it is not a treatment provider. From a public health perspective it can monitor with the Centers for Disease Control and Prevention best practices and would welcome working with the health care delivery system on how to improve the treatment of clients and health outcomes overall.

**Senator Kieckhefer:**

Since there are amendments coming for this bill, could you work with the Chair to address the fiscal note?

**Ms. Wherry:**

Yes, I will work with the Chair.

**Bill Welch (President, CEO, Nevada Hospital Association):**

The Nevada Hospital Association supports S.B. 196 as it is going to be amended. We worked with Ben Schmauss and the American Heart Association to clarify our questions. We have 14 primary care stroke centers designated in Nevada. All of them are accredited and are in compliance concerning the reporting of data. This bill will bring all the data together into a central location for analysis so policy decisions can be proposed.

**Senator Kieckhefer:**

The Committee received a letter from Kevin Dick, District Health Officer with the Washoe County Health District supporting S.B. 196 ([Exhibit K](#)). I will close the hearing on S.B. 196.

**Chair Hardy:**

I will open the work session and start with S.B. 31.

**SENATE BILL 31**: Revises provisions relating to detoxification technicians, facilities and programs. (BDR 40-329)

**Marsheilah Lyons (Policy Analyst):**

There are no amendments and the supporting document has been distributed ([Exhibit L](#)).

**Chair Hardy:**

I will close the work session on S.B. 31.

SENATOR KIECKHEFER MOVED TO DO PASS S.B. 31.

SENATOR WOODHOUSE SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

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**Chair Hardy:**

We will open the work session on S.B. 107.

Senate Committee on Health and Human Services  
March 4, 2015  
Page 8

**SENATE BILL 107**: Provides for the award of a categorical grant to agencies which provide child welfare services for providing certain services. (BDR 38-194)

**Ms. Lyons:**

There are no amendments and the supporting document has been distributed ([Exhibit M](#)).

**Chair Hardy:**

I will close the work session on S.B. 107.

SENATOR LIPPARELLI MOVED TO DO PASS S.B. 107.

SENATOR KIECKHEFER SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

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**Chair Hardy:**

We will open the work session on S.B. 148.

**SENATE BILL 148**: Revises requirements governing certain child welfare proceedings. (BDR 38-195)

**Ms. Lyons:**

There are no amendments and the supporting document has been handed out ([Exhibit N](#)).

**Chair Hardy:**

I will close the work session on S.B. 148.

SENATOR LIPPARELLI MOVED TO DO PASS S.B. 148.

SENATOR WOODHOUSE SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

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**Chair Hardy:**

We will open the work session on S.B. 189.

**SENATE BILL 189**: Makes various changes concerning the collection of information relating to the treatment of trauma. (BDR 40-95)

**Ms. Lyons:**

The supporting documents have been distributed ([Exhibit O](#)). There is one proposed amendment that deletes the provisions instituting a fee on insurance policies to support the Trauma Registry.

SENATOR WOODHOUSE MOVED TO AMEND AND DO PASS AS AMENDED AND REREFER TO THE SENATE COMMITTEE ON FINANCE S.B. 189.

SENATOR SPEARMAN SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

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**Senator Woodhouse:**

I am sure everyone is surprised by the amendment and that I moved to amend and do pass. Most of what I wanted to do with this bill is gone. Even with the amendment, we can make a small step forward. It is paramount that Nevada steps forward regarding the needs of trauma, particularly with a system to capture the data and a registry that works. Nevada needs a standardized system that incorporates the planning, development and evaluation in order to take care of patients. The first step is to make sure Nevada has computer systems with updated versions that can talk to each other.

Senate Committee on Health and Human Services  
March 4, 2015  
Page 10

**Chair Hardy:**

I will close the work session. There being no further business before the Committee, this hearing is closed at 4:18 p.m.

RESPECTFULLY SUBMITTED:

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Debra Carmichael,  
Committee Secretary

APPROVED BY:

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Senator Joe P. Hardy, Chair

DATE: \_\_\_\_\_

<b>EXHIBIT SUMMARY</b>				
<b>Bill</b>	<b>Exhibit</b>		<b>Witness or Agency</b>	<b>Description</b>
	A	1		Agenda
	B	7		Attendance Roster
S.B. 196	C	3	Benjamin Schmauss	Written testimony and diagrams
S.B. 196	D	2	Kim Dokken	Written testimony
S.B. 196	E	2	Deborah Williams	Written testimony
S.B. 196	F	1	Rebecca Scherr	Letter of support
S.B. 196	G	1	Derek Cox	Written testimony
S.B. 196	H	1	Derek Cox	Letter of support
S.B. 196	I	1	Kathy McCormick	Written testimony
S.B. 196	J	1	Brian Brannman	Written testimony
S.B. 196	K	1	Senator Kieckhefer	Letter of support
S.B. 31	L	1	Marsheilah Lyons	Work session document
S.B. 107	M	1	Marsheilah Lyons	Work session document
S.B. 148	N	1	Marsheilah Lyons	Work session document
S.B. 189	O	3	Marsheilah Lyons	Work session document and proposed amendment 9736