

**MINUTES OF THE MEETING
OF THE
ASSEMBLY COMMITTEE ON COMMERCE AND LABOR**

**Eightieth Session
February 27, 2019**

The Committee on Commerce and Labor was called to order by Chair Ellen B. Spiegel at 1:35 p.m. on Wednesday, February 27, 2019, in Room 4100 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 www.leg.state.nv.us/App/NELIS/REL/80th2019.

COMMITTEE MEMBERS PRESENT:

Assemblywoman Ellen B. Spiegel, Chair
Assemblyman Jason Frierson, Vice Chair
Assemblywoman Maggie Carlton
Assemblyman Skip Daly
Assemblyman Chris Edwards
Assemblywoman Melissa Hardy
Assemblywoman Sandra Jauregui
Assemblyman Al Kramer
Assemblywoman Susie Martinez
Assemblyman William McCurdy II
Assemblywoman Dina Neal
Assemblywoman Jill Tolles

COMMITTEE MEMBERS ABSENT:

Assemblyman Steve Yeager (excused)

GUEST LEGISLATORS PRESENT:

Assemblywoman Robin L. Titus, Assembly District No. 38
Assemblyman Tom Roberts, Assembly District No. 13
Senator Joseph (Joe) P. Hardy, Senate District No. 12

STAFF MEMBERS PRESENT:

Patrick Ashton, Committee Policy Analyst
Wil Keane, Committee Counsel

Minutes ID: 335



Karen Easton, Committee Secretary
Olivia Lloyd, Committee Assistant

OTHERS PRESENT:

Joan Hall, President, Nevada Rural Hospital Partners
Barry Gold, Director, Government Relations, AARP Nevada
Michael Hackett, representing Nevada Academy of Physician Assistants
Catherine M. O'Mara, Executive Director, Nevada State Medical Association
Chelsie Capurro, representing Nevada Advanced Practice Nurses Association
Paige Barnes, representing Nevada Nurses Association
R. Garn Mabey, Jr., Private Citizen, Las Vegas, Nevada
Sean P. McDonald, Administrator, Central Services and Records Division,
Department of Motor Vehicles
Zoe Miller, Owner, Grassroots Books, Reno, Nevada
Chuck Callaway, Police Director, Office of Intergovernmental Services, Las Vegas
Metropolitan Police Department
Eric Spratley, Executive Director, Nevada Sheriffs' and Chiefs' Association
Randi Thompson, Nevada State Director, National Federation of Independent
Business
Andy Peterson, Vice President, Government Affairs, Retail Association of Nevada
Scott Weiss, representing Parkway Recovery Care Center, Henderson, Nevada
Basil Kostaras, representing Parkway Recovery Care Center, Henderson, Nevada

Chair Spiegel:

[Roll was called. Committee rules were explained.] I will now open the hearing on Assembly Bill 147.

Assembly Bill 147: Authorizes a physician assistant or advanced practice registered nurse to perform certain services. (BDR 40-85)

Assemblywoman Robin L. Titus, Assembly District No. 38:

Before I go into the details of Assembly Bill 147, I thought it would be appropriate to give an overview of the careers we will be discussing. Many of you have already heard the terms physician assistant (PA), nurse practitioner (NP), or advanced practice registered nurse (APRN); they are all medical professions and are considered medical providers. The difference between the professions is based upon their practice model and how they get into that particular profession. Nurse practitioners are licensed under the State Board of Nursing—PAs and APRNs are licensed under the Board of Medical Examiners or State Board of Osteopathic Medicine. Physician assistants are required to have a physician supervisor. Advanced practice registered nurses are no longer required to have a collaborating physician provided they meet certain criteria based on the Board of Nursing—they were granted independent practice in the 77th Session.

The reasoning for their independence was due to Nevada's lack of providers—especially in rural areas and in the area of primary care. Unfortunately, that problem was not solved. As Nevada's population has continued to grow, the ratio of medical providers to population has gotten worse. The projected nationwide physician shortage was 90,000 providers in 2025, increasing to approximately 105,000 by 2030. Primary care is one of the areas with the most significant shortfall—between 8,000 to 32,000 providers. The Legislature has done a tremendous job trying to lower those numbers by creating multiple medical schools, physician assistant schools, and nursing programs, but there are not enough of us.

As a family physician, I have trained and worked with both APRNs and PAs. I would not be able to be here today without the dedication and skills of my PA, Danny Villalobos. Although I am available 24/7 via phone, and in-house 3 days a week, there are times when patients need documents signed that must be signed by a doctor. Even though APRNs are independent practitioners and PAs can exercise autonomy in medical expertise in decision-making, these forms still require my signature.

Assembly Bill 147 attempts to solve some of these roadblocks. To make it clear, APRNs and PAs were not excluded from signing these forms; they were just not included. In 1864, when the *Nevada Constitution* and subsequent *Nevada Revised Statutes* were written, these practice models and professions did not exist. The bill before you today alleviates some of the barriers and updates the statutes to be consistent with today's health care world, at the same time protecting patients. It does not expand the scope of practice for either profession; it simply gives them signature authority for exams they are actually performing and allows them to practice to the full extent of their capabilities.

Section 1, subsection 4, paragraph (a) adds physician assistant as a "provider of health care" which allows that person to sign a statement for a patient to return to competitive sports after an injury. Sections 2 and 3 add physician assistant to the list of health care providers that can order medical devices which are exempt from sales tax. Section 4 allows a PA or APRN to clear patients for return to interscholastic sports. Sections 5, 6, and 7 add physician assistant and advanced practice registered nurse to pupil statements for self-administering medications. Sections 8, 9, 10, and 11 add physician assistant to authorize Department of Motor Vehicles (DMV) handicap placards or license plates. Currently a physician assistant can sign off for a commercial driver's license, but not handicap placards or license plates, even though they could make the medical diagnosis. Sections 12, 13, and 14 allow a PA to order home health care—there are still federal rules that control some of the regulations in who can do that. I may still have to countersign that form eventually, but at least they can get the home health care order started for patients.

Section 15 allows a PA to sign a form referring a patient to an audiologist, who may then order hearing testing on them. Section 16 authorizes a PA to perform physicals on professional drivers, such as taxicab drivers. In the 79th Session nurse practitioners were given their independent practice and much of their signature authority throughout the *Nevada Revised Statutes*. Then we discovered that the departments affected did not change their forms. Section 17 directs that the forms shall be changed on or before January 1, 2020.

There was some concern whether the departments could change their forms and what the cost might be to Nevada taxpayers. We reached out to the DMV and some other departments, and they assured us there was no cost to doing this because their forms were all in pdf formats. Most, if not all, forms are available for downloading on the Internet; therefore, they did not feel there was any unreasonable burden or additional cost.

This bill was brought forward at the request of the professional organizations that represent PAs and APRNs.

Chair Spiegel:

Are there any questions? [There were none.] Do we have anyone here in support of A.B. 147?

Joan Hall, President, Nevada Rural Hospital Partners:

There are 12 critical access hospitals in rural Nevada, and there are 16 affiliated rural health clinics. We have APRNs and PAs who can do the examinations, but the form itself says physician so they cannot sign those. It is really that simple. Senator Woodhouse has a similar bill that I testified to in the Senate, Senate Bill 134. The DMV was there and we asked them if it was hard to change these forms and will it cost a lot of money—they said, "No, they are computerized and it is pretty easy." I do not know about Nevada Interscholastic Activities Association or the schools, but having the PAs and the APRNs in very rural areas being able to perform the examination but unable to get the end result without a physician, just seems kind of silly.

Barry Gold, Director, Government Relations, AARP Nevada:

AARP is all about health care and access to health care. This bill helps provide increased access to health care, not just in the rural areas where we have such a shortage, but in the rest of our state, where a lot of people currently are seeing APRNs or PAs, and that is who their medical provider is. For the medical provider not to be able to sign a DMV form for a handicap placard or afterschool sports seems kind of ridiculous. We are attempting to assure these people can practice to the full extent of their training. We are not asking them to do anything they are not trained to do. AARP, on behalf of the 348,000 members across the state, urges you to pass this bill and increase access to health care for Nevada families.

Michael Hackett, representing Nevada Academy of Physician Assistants:

We are here in strong support of this legislation. We are very appreciative of your support of this legislation. We appreciate the provisions in the bill that affect PAs. I think it is very clear exactly what the intent of those provisions would accomplish. The Nevada Academy of Physician Assistants recognizes the challenges that health care faces in this state, including professional workforce issues. Our members are committed to the team-based delivery of health care. Assembly Bill 147 can help reduce the burden on physicians and allow for better use of their time, as well as allowing PAs to practice in a manner that is more consistent with their education, training, and experience.

Catherine M. O'Mara, Executive Director, Nevada State Medical Association:

We do support this bill. It is important to note that this bill does not expand the scope of practice. Physician assistants are being authorized to sign these forms, but it still has to be within their scope of practice. In other words, a dermatology PA should not be doing a concussion screening to allow a student to go back to sports activities if they have sustained an injury to the head. That is similar to what we deal with in the physician profession. Physicians work within their own training and education and do not deviate from what they are skilled and educated to do. This keeps the supervision intact, which is very important to patient protection, which requires that a physician is still supervising these PAs, there is still a physician available for consultation, overview, training, and things of that nature. We support this bill for both PAs and APRNs.

Chelsie Capurro, representing Nevada Advanced Practice Nurses Association:

I agree with everything already said. There was a similar bill passed in the 79th Session. However, there were some issues implementing the bill. For this reason, we specifically like section 17 as proposed.

Paige Barnes, representing Nevada Nurses Association:

I echo the comments of my colleagues. Expanding APRN signing authority within their scope of practice will provide for greater efficiencies in the health care system. This will allow them to provide critical services to their patients and is especially important in the rural areas.

Chair Spiegel:

Is there anyone who would like to testify in opposition?

R. Garn Mabey, Jr., Private Citizen, Las Vegas, Nevada:

The only concern I have is with section 1. Assemblywoman Titus brought up a point that she is here and her PA is at her office working. A concussion is a very serious thing, especially for a student whose brain has been injured. It is important that it takes time to heal and it is especially important that they do not have another concussion—it can be very dangerous or deadly to them. In my opinion, if it takes a little longer—a day, a week, or a few weeks—in order for a physician to appropriately evaluate the patient, make sure the patient is well enough to resume the sports activity, then I think that is fine. It is not important that the child gets back to sports immediately; it is more important that his or her brain be given time to heal. I appreciate there is a shortage of physicians. I do not have any problems with the rest of the bill. I am testifying about this bill because I have had personal experience in my family with concussions. I know how important it is to rest and how important it is for appropriate evaluations.

Chair Spiegel:

Do we have any testimony in the neutral position?

Sean P. McDonald, Administrator, Central Services and Records Division, Department of Motor Vehicles:

Today I have with me Yvonne Young-Brown, Services Manager 1, for our vehicle program section. I would like to echo what was said earlier—this is a very quick and easy fix for us to make the changes.

Assemblywoman Titus:

I just want to reassure everyone that the PAs are practicing within their scope and under the guidance of the physician they are working with. Any PA performing post-concussion physicals would be the same PA performing sports physicals in general. There are strict protocols for post-concussion physicals. I understand wanting to protect the youth and the youth brain, but those that would be doing the release would be within their scope to do that.

Chair Spiegel:

That will close the hearing on Assembly Bill 147. We will now open the hearing on Assembly Bill 154.

Assembly Bill 154: Revises certain requirements relating to secondhand dealers. (BDR 54-625)

Assemblyman Tom Roberts, Assembly District No. 13:

Existing law requires that a secondhand dealer furnish a daily transcript of the records of his or her transactions for the preceding day to the sheriff of the county or chief of police, whichever applies to where the dealer owns or is licensed to do business. Existing law exempts books, periodicals, sound recordings, and other items from this reporting requirement. Assembly Bill 154 would add video recordings to the list of exempted items. Under section 4 of the bill, "or video recordings" is added. In my past experience dealing with pawned or stolen items, we rarely came across any video recordings in any burglary investigation. A lot of these items are not identifiable or traceable; therefore, it is a lot of cumbersome work for the dealers to put together. I have with me today Zoe Miller, the owner of Grassroots Books in Reno. I would like to turn it over to Ms. Miller.

Zoe Miller, Owner, Grassroots Books, Reno, Nevada:

Things have changed a lot in the last 10 years. There used to be DVD stores, but now most people stream videos. Most pawnshops do not buy DVDs anymore; it is not worth it to them. Grassroots Books has found that people want to sell their books, vinyl records, DVDs, and comic books for cash. At the same time, we also have buyers who want to buy books and movies. We would like to continue to provide that service to our customers, so we are requesting that the law be changed to include video recordings.

Chair Spiegel:

Are there any questions?

Assemblywoman Neal:

It is a simple bill. I was reading the legislative history behind the original bill and why it came into existence. The original bill discussed dealing with potential stolen property and other things that could be part of a secondhand dealer. Right? You keep saying DVDs, but that is not the only thing that secondhand dealers sell. Is there no longer an issue with stolen property? Is there no longer an issue with somebody walking in with a first edition book and making sure that the transaction happened? For example, my son George stole my first edition book and then brought it to you. You purchased it, and I want to figure out what happened, what day, and how to recover it.

Zoe Miller:

We are happy to cooperate with the police. We have had very few instances of stolen books. One memorable case was when somebody brought in some books in the original box but had ripped off the UPS sticker. We called the police and those did get back to the person who ordered them. This change in law does not make any change with regard to first edition books. We do cooperate with police when we think there is something going on, they tell us something is going on, or we hear it from a third party. I understand that pawnshops do not really look at the DVDs if they buy them. We look at them and then we pay \$.25 to \$1—these are low-value items.

Assemblyman Daly:

Suppose somebody broke in and stole someone's comic book collection. If it were of value, law enforcement would send out a report of the stolen property. If they went into a secondhand shop and sold them the comic books or tried to sell them the comic books, the secondhand shop would then notify the police of same. Is it safe to assume there is a reverse angle on that from law enforcement back to the secondhand dealer?

Assemblyman Roberts:

It has been my experience that there are provisions in the statute already. If you suspect that anything is stolen or is suspicious, such as 20 movies that someone brings in that appear to be bootlegged or something else of significant value, that would be reported. They cooperate with the police on a regular basis. If you were to report it now, there will be nothing but the title and the numbers of it. These dealers already work with local police on suspicious items.

Assemblyman Daly:

If someone reported something of value stolen, which would not otherwise be in the report from the secondhand dealer, you would report to them that you are looking for these items. Is that correct?

Assemblyman Roberts:

We have a system where we send information to the pawnshops and different businesses on items that were stolen in a burglary. We do not send out the information as a matter of routine, but if it is significant, it will be done so that any stolen items are easily identifiable by business owners.

Chair Spiegel:

Is there anyone in support of A.B. 154?

Chuck Callaway, Police Director, Office of Intergovernmental Services, Las Vegas Metropolitan Police Department:

We are here in support of this bill. I do not recall any major burglary cases being solved through recovered DVDs. DVDs are becoming a thing of the past; most people use Netflix or streaming video. The whole purpose behind this reporting was to give law enforcement a mechanism to locate stolen items that are traceable. Law enforcement gets the report that someone had a television stolen and they try to get the serial number for that; the pawnshop is reporting what items are coming in. From that report they can see where the television was pawned off and track down who might have pawned it. DVDs do not really play a part in that process and are not helpful in solving crimes.

Eric Spratley, Executive Director, Nevada Sheriffs' and Chiefs' Association:

We are here in support of A.B. 154.

Randi Thompson, Nevada State Director, National Federation of Independent Business:

I would like to thank Zoe, who is a member of the National Federation of Independent Business; she brought this issue to us and it is nice to see a citizen here testifying. This is just a fix. Instead of holding a DVD for 30 days, they can actually sell the DVDs. This is just an outdated regulation that we thought might be time to update.

Andy Peterson, Vice President, Government Affairs, Retail Association of Nevada:

We do support this as well. We do work with some of the organized retail crime groups around the state—we have not run into this problem anywhere, and we do not anticipate it.

Chair Spiegel:

Is there anyone else testifying in support? [There was no one.] Do we have anyone who wishes to testify in opposition? [There was no one.] Do we have anyone who wishes to testify in neutral? [There was no one.]

Assemblyman Roberts:

I would just like to thank you and this Committee for considering this bill.

Chair Spiegel:

We will now close the hearing on A.B. 154. We will open the hearing on Assembly Bill 204.

[Assembly Bill 204](#): Revises provisions relating to health care. (BDR 54-932)

Assemblywoman Melissa Hardy, Assembly District No. 22:

I want to thank the State Board of Pharmacy for being gracious enough to look over Assembly Bill 204 and offer some recommendations. Providing quality and accessibility to health care has always been a priority of this body; A.B. 204 is in the spirit of that goal. I

would now like to turn the presentation over to my expert in Las Vegas, Scott Weiss, who will walk you through the details of the bill and help answer any questions.

Scott Weiss, representing Parkway Recovery Care Center, Henderson, Nevada:

In September 2017, the State Board of Health approved a new type of facility called a recovery care center. When the bill was passed through the Board of Health, we determined there were some statutes within the Board of Pharmacy that were inconsistent with allowing the facility to actually use the license that was approved by the State Board of Health. In working with the State Board of Pharmacy over the last year and a half, we brought this bill forward to do a couple of things. Section 1 is intended to amend NRS 639.004 to allow recovery centers to use chart orders.

In further conversation with the Board of Pharmacy, they recommended three amendments to the bill ([Exhibit C](#)). Amendment 1 allows the Board to write regulations that are necessary for the protection, health, and efficient acquisition, possession, storage, handling, and administration of controlled substances and dangerous drugs. The first amendment gives the Board the authority to write regulations for any kind of facility which is licensed by the State Board of Health under NRS 449.0303. The second amendment requests the facility type, a recovery care center, be added to the NRS to allow pharmacies to deliver drugs to the pharmacy at the recovery care center. This is currently allowed under our existing licensure, but recovery care centers were not specifically identified in that statute. The third amendment requires the recovery center to pay their fees just like all other facilities do.

Chair Spiegel:

Assemblywoman Hardy, are these friendly amendments?

Assemblywoman Hardy:

Yes.

Assemblywoman Jauregui:

Was there a reason recovery care centers were not included?

Scott Weiss:

When the statute was written, recovery care centers were not a facility type licensed by the Board of Health. That facility type was just added in September 2017.

Assemblywoman Jauregui:

Are there any type of privacy concerns with their having the ability to chart?

Scott Weiss:

No. The chart order gives the ability for a physician, physician assistant, or person that is credentialed at the facility to call an order into a nurse that can actually take the order. It has nothing to do with the privacy. It just allows that practitioner to call the facility and give an order, versus having to go into the facility and write the order themselves.

Chair Spiegel:

Is there any testimony in support of A.B. 204?

Senator Joseph (Joe) P. Hardy, Senate District No. 12:

I am very supportive of this bill. I have the same questions as Assemblywoman Jauregui on how this came about. Since this is a new entity, you start looking at what they can and cannot do. We probably need to allow someone at that facility to be able to pick up the phone and give an order.

Basil Kostaras, representing Parkway Recovery Care Center, Henderson, Nevada:

I just want to echo what Scott already said. These facilities are meant to be for patients who receive outpatient procedures but are not ready to go home. By utilizing chart orders, we can ensure that the medications—and more importantly narcotics—are done by a credentialed medical professional who understands what is going into that patient's care. These patients are healthy enough to undergo outpatient procedures and do not need to go to an inpatient facility. By adding chart orders to the recovery care center license, we can still make sure that these patients are getting the highest quality care that they deserve to receive.

Chair Spiegel:

Is there anyone who wishes to testify in opposition to A.B. 204? [There was no one.] Is there anyone to testify in neutral to A.B. 204? [There was no one.]

Assemblywoman Hardy:

That concludes my presentation and remarks.

Chair Spiegel:

We will close the hearing on A.B. 204. Is there any public comment? [There was none.] The meeting is adjourned [at 2:17 p.m.].

RESPECTFULLY SUBMITTED:

Karen Easton
Committee Secretary

APPROVED BY:

Assemblywoman Ellen B. Spiegel, Chair

DATE: _____

EXHIBITS

[Exhibit A](#) is the Agenda.

[Exhibit B](#) is the Attendance Roster.

[Exhibit C](#) is proposed amendments to Assembly Bill 204 presented by Scott Weiss, representing Parkway Recovery Care Center, Henderson, Nevada.