

**MNUTES OF THE MEETING
OF THE
ASSEMBLY COMMITTEE ON HEALTH AND HUMAN SERVICES**

**Eightieth Session
May 6, 2019**

The Committee on Health and Human Services was called to order by Chairwoman Lesley E. Cohen at 12:52 p.m. on Monday, May 6, 2019, 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/80th2019.

COMMITTEE MEMBERS PRESENT:

Assemblywoman Lesley E. Cohen, Chairwoman
Assemblyman Richard Carrillo, Vice Chairman
Assemblyman Alex Assefa
Assemblywoman Bea Duran
Assemblywoman Michelle Gorelow
Assemblyman Gregory T. Hafen II
Assemblywoman Lisa Krasner
Assemblywoman Connie Munk
Assemblywoman Rochelle T. Nguyen
Assemblywoman Robin L. Titus

COMMITTEE MEMBERS ABSENT:

Assemblyman John Hambrick (excused)

GUEST LEGISLATORS PRESENT:

Senator James Ohrenschall, Senate District No. 21
Senator Moises (Mo) Denis, Senate District No. 2

STAFF MEMBERS PRESENT:

Marsheilah Lyons, Committee Policy Analyst
Karly O'Krent, Committee Counsel
Terry Horgan, Committee Secretary
Alejandra Medina, Committee Assistant



OTHERS PRESENT:

Kelly Venci Gonzalez, Staff Attorney, Legal Aid Center of Southern Nevada
DuAne L. Young, Deputy Administrator, Division of Health Care Financing and
Policy, Department of Health and Human Services
Susan L. Fisher, representing Challenger School
Hugh Gourgeon, Chief Executive Officer, Challenger School
David Walton, Executive Region Director, Challenger School
Margot Chappel, Deputy Administrator, Regulatory and Planning Services, Division
of Public and Behavioral Health, Department of Health and Human Services

Chairwoman Cohen:

[Roll was taken. Committee rules and protocol were explained.] We all know we had a shock this weekend. We have suffered such a loss; we are missing our very good colleague and friend. We are just going to continue and do what he would want. Assemblyman Thompson wanted the work done, so we are going to work together and get the work done.

We will now begin with our work session. We are doing this as a consent work session and Ms. Lyons will lead us through the explanations.

Marsheilah Lyons, Committee Policy Analyst:

Committee members should have before them a copy of the Consent Calendar for the work session ([Exhibit C](#)). I will read through all of the bill numbers and summaries on the Consent Calendar, and then the Chairwoman will take a motion for them all together.

Senate Bill 17: Makes various changes relating to enforcement of child support obligations. (BDR 38-200)

[Marsheilah Lyons read a description of the bill ([Exhibit D](#))]. Senate Bill 17 revises provisions relating to the enforcement of child support obligations. The bill requires, under certain circumstances, the district attorney or other public agency collecting child support to report to the Department of Wildlife the name of a person who, after receiving notice, fails to comply with a subpoena or warrant related to paternity or child support proceedings or who is in arrears in child support payments. Upon receipt of such a report, the Department must suspend a person's license or permit to hunt, fish, or trap unless he or she provides certain proof of compliance with the subpoena or warrant or satisfaction of the arrearage. Finally, the bill removes the exception to suspend licenses or permits that expire less than six months after issuance, making any license or permit to hunt, fish, or trap subject to suspension for failure to comply with a subpoena or warrant related to paternity or child support proceedings or due to arrearage in child support payments. There were no amendments for this measure.

Senate Bill 18 (1st Reprint): Revises provisions relating to jobs and day training services. (BDR 39-198)

[Marsheilah Lyons read a description of the bill ([Exhibit E](#)).] Senate Bill 18 (1st Reprint) removes existing requirements that an entity certified by the Aging and Disability Services Division of the Department of Health and Human Services to provide jobs and day training services to people with intellectual or developmental disabilities must submit an annual financial audit. Instead, the bill requires such entities to submit any financial documents and statements requested by the Division to evaluate the entity's financial solvency. There were no amendments for this measure.

Senate Bill 77: Revises provisions governing purchasing by a county hospital and a hospital in a county hospital district. (BDR 40-488)

[Marsheilah Lyons read a description of the bill ([Exhibit F](#)).] Senate Bill 77 includes services in the types of purchases that a county hospital or a hospital in a county hospital district may make through the purchasing contracts of the company that manages the hospital or through a purchasing group without complying with the competitive bidding requirements in the Local Government Purchasing Act or for public works. If such services are for work on a project that qualifies as a public work, prevailing wages must be paid. There were no amendments for this measure.

Senate Bill 92: Revises provisions concerning certain group housing. (BDR 40-526)

[Marsheilah Lyons read a description of the bill ([Exhibit G](#)).] Senate Bill 92 does two things. First, it expands the requirement for who must obtain a license to operate a business that provides referrals to certain group housing to apply to those who provide referrals not only to residential facilities for groups, but also to any other group housing arrangement that provides assistance, food, shelter, or limited supervision to a person with a mental illness, intellectual disability, developmental disability, or physical disability, or who is aged or infirm.

Second, the bill requires the Division of Public and Behavioral Health of the Department of Health and Human Services to renew unlicensed group housing arrangements that provide assistance, food, shelter, or limited supervision to such individuals to determine whether regulating unlicensed group housing arrangements is advisable to protect the health and safety of their occupants. There were no amendments for this measure.

Senate Bill 184 (2nd Reprint): Revises provisions relating to the protection of children. (BDR 34-668)

[Marsheilah Lyons read a description of the bill ([Exhibit H](#)).] Senate Bill 184 (2nd Reprint) expands the list of potential witnesses to an allegation of child abuse, neglect, or corporal punishment that may be interviewed by a child welfare service agency to include any child who is identified as a witness to the allegations contained in a report of such abuse or neglect.

The bill requires the consent of the parent or guardian of any such child witness who is to be interviewed and provides for the protection of the identity of the child.

A child welfare service agency with a substantiated report of certain child abuse, neglect, or corporal punishment must provide the parent or guardian of the child a summary of the outcome of the investigation and any disciplinary action taken against the person who allegedly committed the abuse or neglect. The parent or guardian may disclose certain information related to the report to an attorney for the child or the parent or guardian. There were no amendments for this measure.

Senate Bill 284 (1st Reprint): Creates the Advisory Task Force on HIV Exposure Modernization. (BDR S-742)

[Marsheilah Lyons read a description of the bill ([Exhibit I](#)).] Senate Bill 284 (1st Reprint) creates the Advisory Task Force on HIV Exposure Modernization. The Task Force must identify, review, and evaluate existing statutes and regulations in Nevada that criminalize exposure to human immunodeficiency virus (HIV); research the implementation and impact of such statutes and regulations; identify disparities in arrests, prosecutions, or convictions under such statutes and regulations; evaluate current research with respect to HIV implicated by these statutes and regulations; identify court decisions enforcing or challenging these statutes and regulations; assess developments occurring in other states and nationally with respect to modernizing HIV criminalization laws; and make recommendations and report to the Governor and the Legislature on or before September 1, 2020. There were no amendments for this measure.

Chairwoman Cohen:

Thank you, and with that I will take a motion to do pass.

ASSEMBLYWOMAN NGUYEN MADE A MOTION TO DO PASS SENATE BILL 17, SENATE BILL 18 (1ST REPRINT), SENATE BILL 77, SENATE BILL 92, SENATE BILL 184 (2ND REPRINT), AND SENATE BILL 284 (1ST REPRINT).

ASSEMBLYWOMAN MUNK SECONDED THE MOTION.

Does anyone have any questions or do any bills need to be pulled off the Consent Calendar?
[There was no reply.]

THE MOTION PASSED. (ASSEMBLYMAN HAMBRICK WAS ABSENT FOR THE VOTE.)

Thank you. Assemblywoman Munk will do the floor statement on Senate Bill 17 and Assemblywoman Titus would like to take Senate Bill 284 (1st Reprint). Unless someone is passionate about any of the other bills, we will send out an email asking Committee members to take floor statements for the other bills.

I do not see any presenters for the remaining bills on today's agenda, so at this time we will be in recess [at 12:57 p.m.].

We will come back to order [at 1:10 p.m.] and open up the hearing on Senate Bill 370 (2nd Reprint).

Senate Bill 370 (2nd Reprint): Revises the State Plan for Medicaid and the Children's Health Insurance Program. (BDR 38-966)

Senator James Ohrenschall, Senate District No. 21:

With me in southern Nevada is Kelly Venci Gonzalez, who practices law at the Legal Aid Center of Southern Nevada and represents children who are going through very difficult things in their lives. I have been privileged to co-counsel for some of those children and work with Ms. Venci Gonzalez. Senate Bill 370 (2nd Reprint) comes out of a lot of the work she and the Legal Aid Center do in southern Nevada.

For children on the autism spectrum, there has been a lot of evidence that applied behavior analysis (ABA) therapy has been very, very helpful to those kids having successful outcomes, especially when they receive ABA therapy when they are younger. In the last couple of years, I have found that for children with fetal alcohol syndrome (FAS)—children who have been exposed to alcohol in the womb—ABA therapy can also be very effective in helping them have successful outcomes and successful lives. If a child is diagnosed to be on the autism spectrum, Medicaid will cover ABA therapy. However, it seems as though the providers are hitting roadblocks for children with FAS who are not on the autism spectrum but who could still benefit from ABA therapy. Senate Bill 370 (2nd Reprint) is an attempt to make sure those children and young adults, because this bill covers up to the age of 21 if they are still in high school, would be able to get applied behavior analysis therapy, and potentially other therapies too. [Senator Ohrenschall submitted ([Exhibit J](#)).]

Kelly Venci Gonzalez, Staff Attorney, Legal Aid Center of Southern Nevada:

I am the team chief for the education advocacy unit at the Legal Aid Center of Southern Nevada and I also represent kids in foster care. About 70 percent of kids in care have been exposed to drugs or alcohol in utero. Many of those children show symptoms consistent with fetal alcohol syndrome disorders (FASDs). It is very hard for these kids to get treatment. The standard care of treatment is usually individual therapy—psychosocial/psychiatric rehabilitation and brief strategic therapy. Some of the higher-level needs kids get shuffled around from home to home. They might end up in a higher level of care but never receive the appropriate treatment for their condition.

I have one such child who has been at Child Haven for about six months, but he spent a couple of years in a residential treatment center. He was diagnosed about six or seven months ago with FASD and they still have not found placement. There is only one provider who will treat FAS in Clark County, and that provider has a wait list. We have run into barrier after barrier for this child. I fear for him because he is very tall and he can be very aggressive. When he becomes an adult in about a year, I fear he is going to have encounters

with the police. He is about 6'4" and African American and he has never received the correct form of treatment. Had we intervened earlier with the correct form of treatment, he would not be in the position he is in today. I wish he was the only child, but as we represent kids in foster care, there are always a couple on a case load whom we do not know what to do with.

Having this treatment available would be really helpful, and I think it would actually end up saving money. The children would not be shuffled from home to home or end up in a residential treatment center that costs upwards of \$100,000 a year. Applied behavior analysis treatment has been very successful for kids with autism. Some of the symptoms kids with autism display are the same as kids with FASD display, and the literature suggests that ABA treatment is actually very effective in treating FASD.

I am very thankful to Senator Ohrenschall for introducing this bill. I think it is needed and I am really hopeful that you will support it, that it will pass, and that we can start getting good treatment for our kids. Our kids in foster care are some of our most vulnerable, and they do not have anyone advocating for them.

Chairwoman Cohen:

Thank you, Ms. Venci Gonzalez, and thank you for the work you do. As you said, these are some of the most vulnerable Nevadans, and we appreciate the work you do for them.

Senator Ohrenschall:

I am happy to answer any questions and I also wanted to thank the folks from the state—Suzanne Bierman [Administrator, Division of Health Care Financing and Policy (DHCFP), Department of Health and Human Services (DHHS)] and Cody Phinney [Deputy Administrator, DHCFP, DHHS]. We had lots of conversations as to whether this treatment was covered, but I would feel better if it was put into statute that this treatment would be covered, and that is why I am supporting the bill.

Chairwoman Cohen:

Are there any questions?

Assemblywoman Titus:

Thank you for bringing this bill forward. It is a problem throughout the world—not just in our state—and it is important that we recognize fetal alcohol syndrome as a disease. That child did not ask for it; that is for sure. My question relates to the reimbursement and what you are asking Medicaid to do for reimbursement. The definition of "medically necessary" in section 1, subsection 6, paragraph (j), says it "means health care services." Then it lists different health care services. Physicians can bill for services when we see patients, but it is just that one coding diagnosis that we cannot get reimbursed for. Would we be allowed to use the code for FASD to get reimbursed? Is that what you are asking the state to do—include that code for reimbursement?

Senator Ohrenschall:

The "medically necessary" language is currently in statute at *Nevada Revised Statutes* 695G.055. That came out of an amendment to the original bill. There was a concern that the number of visits not be open-ended and be "medically necessary." In conversations I had with Administrator Bierman and Deputy Administrator Phinney, their feeling was that this should already be covered.

Assemblywoman Titus:

That was my point.

Senator Ohrenschall:

For some reason it is not being covered. Every provider I have had interactions with tells me it is not being covered. We would like to make sure it is covered and that these kids get the help they need.

Assemblywoman Titus:

That was my question. We already see these patients, even in primary care settings. Certainly I have patients with fetal alcohol syndrome and we see them and treat them for whatever their needs are. I am wondering what will change with this bill.

**DuAne L. Young, Deputy Administrator, Division of Health Care Financing and Policy,
Department of Health and Human Services:**

These codes are currently for fetal alcohol syndrome and are not currently mapped to allow for ABA services as they would for autism spectrum disorder. What this bill would allow us to do is have the authority to amend them within the State Plan [for Medicaid] to allow ABA providers to treat those with fetal alcohol syndrome as they would treat those with autism spectrum disorder.

Assemblywoman Titus:

It would affect my profession and other professionals who deal with those patients with that diagnosis. I do all the individual education programs (IEPs) for Lyon County schools. I review them as a physician and I often question why the schools cannot get reimbursed. Some of the students with fetal alcohol syndrome are referred for treatment. They get reimbursed for speech therapy, they get reimbursed for physical therapy and occupational therapy, but they cannot get reimbursed for some of these psychological things. Hopefully, this will allow the school district that refers a student to a behavior analyst for treatment to be reimbursed. Is that correct?

DuAne Young:

This would allow those services to be placed in an IEP, which would be reimbursed. Currently, our State Plan only allows those services contained within the IEP to actually be reimbursed, so it would allow them to be reimbursable.

Assemblywoman Titus:

Thank you for that clarification.

Senator Ohrenschall:

Thank you to Deputy Administrator Young. I worked with him in the Senate on an amendment to work out a few kinks in the bill, and I appreciate his help.

Chairwoman Cohen:

Ms. Venci Gonzalez mentioned her concern for a client as he is aging out of the system. I know the bill specifically looks to assist people who are 19 to 21 if they are still in high school. What symptoms do you see in someone with fetal alcohol syndrome as they are getting to be 18, 19, or 20 years old?

Kelly Venci Gonzalez:

What I see are impulsive behaviors, aggression, and emotional dysregulation. When kids in school hear the word "no," 80 percent of them can take it, but some just cannot. They do not have the regulation, that ability. Applied behavior analysis-type treatment is very focused. It starts small and gets bigger. They work on very tangible targets that a child can attain. Those are the behaviors I have seen in clients with FAS. As they get older, those behaviors oftentimes cause the clients to interface with our criminal justice system or have school discipline issues because they have not learned the tools to deal with some behaviors in a more productive way.

Chairwoman Cohen:

Thank you. Seeing no other questions, I will ask anyone in support in Carson City or in Las Vegas to please come forward. [There was no response.] Seeing no one, is there anyone in opposition in Carson City or Las Vegas? [There was no response.] Seeing no one, is there anyone in neutral? [There was no response.]

Mr. Young, I have a question. Can you tell us what treatments are currently covered for young people with fetal alcohol syndrome?

DuAne Young:

Currently those are medically necessary services; however, applied behavior analysis has been used in other states to treat those with fetal alcohol syndrome but it has never been authorized through our State Plan, so it was never available. This is taking the research from other states to allow these treatments, but most of them are regular, normal, behavioral health outpatient counseling treatments that are being applied to this population but not to this specific sets of therapies. For clarification, we would cover these services up to age 21 regardless of their school enrollment as we currently do with other applied behavior analysis treatments.

Chairwoman Cohen:

Do we have any other questions? Senator, would you like to make any closing remarks?

Senator Ohrenschall:

Thank you for hearing S.B. 370 (R2). When practicing in juvenile court, I see many kids who the judge, the attorneys, and the social workers may feel are exhibiting signs of FASD

but it is very difficult to actually obtain that diagnosis. Once we do get the diagnosis, getting the treatment is also a big obstacle. If this bill passes, it will help those kids overcome those obstacles and have better outcomes and less contact with either the delinquency system or with the adult criminal justice system. I think this will be money well spent if these kids can get that treatment. I hope you will consider it.

Chairwoman Cohen:

With that, I will close the hearing on S.B. 370 (R2) and open the hearing on Senate Bill 468 (1st Reprint). We have an amendment that is on the Nevada Electronic Legislative Information System ([Exhibit E](#)), and we will be working from that amendment.

Senate Bill 468 (1st Reprint): Exempts certain private schools from requirements relating to certain child care facilities. (BDR 38-815)

Senator Moises (Mo) Denis, Senate District No. 2:

I am introducing Senate Bill 468 (1st Reprint) which exempts certain private schools that provide a prekindergarten program from requirements relating to certain child care facilities. Under Nevada law, preschools are governed by child care facilities statutes and are subject to regulations by the Division of Welfare and Supportive Services within the Department of Health and Human Services (DHHS) and by other local government requirements.

In some cases, this type of government structure has created unintentional barriers. For example, at the Challenger School, which currently has four campuses in southern Nevada, a teacher who may have been licensed to teach other grades for decades would be required to obtain an additional license from the Division to teach preschool as they shadow a licensed preschool instructor. We have heard time and again about the grave shortage of teachers. This type of scenario is another example of current practices that only hinders our efforts to streamline licensing processes and ultimately afford more of our schools—public and private—with quality teachers. In addition, a preschool is subject to certain inspection requirements that can be duplicative. These inefficiencies consume both time and money and do not enhance the educational experience. This bill seeks to eliminate some of these inefficiencies including the dual licensing requirement for private educational facilities. When I mention duplicative requirements, consider, as an example, the Challenger School which has a K-12 program governed by the Department of Education. Their preschool, however, is governed by DHHS. Both agencies require that the facilities be checked even though it is all one facility.

Senate Bill 468 (1st Reprint) exempts a private school that provides a prekindergarten program and does not receive any public money from the requirements that such a school be licensed as a child care facility, and any other requirements for such a facility. So if the school is offering academics as opposed to child care, this bill would allow them to extend what they are doing in the K-12 part of the school to that pre-K part of the school.

Susan L. Fisher, representing Challenger School:

We thank Senator Denis for bringing this bill forward for us. He and a number of other legislators have toured the schools in southern Nevada and, as he explained, this will help with a barrier we have encountered. We want to get teachers working faster, better, and smarter. We have a very amazing program that is not child care; it is a sort of pre-preschool. We start them quite young; right now, it is at about 2 years, 6 months of age. We have proposed an amendment ([Exhibit K](#)), and we would limit enrollment to children no younger than 3 years of age.

The exemption from the child care provision, inspections, et cetera, would only apply to private schools that receive no state or federal funding whatsoever. That really narrows this down to just a handful of schools. There are a number of private schools in Nevada, and some of those receive funding through grants, but Challenger School does not receive any public funds.

Hugh Gourgeon, Chief Executive Officer, Challenger School:

Thank you, Madam Chair, for having us today and thank you, Senator Denis, for helping with this. Challenger School is a nonprofit foundation started in 1963 that operates in five states and has students enrolled from ages 2 years and 9 months through middle school. The current situation in Nevada is that the regulation of child care has made it extremely difficult for us to train our elementary teachers. Even when elementary teachers come and are able to work, we are not able to train them in preschool because within the same school, there is one classroom—because the children are not 5 years of age yet—that is regulated by DHHS and the classroom next door—kindergarten—is regulated by the Nevada Department of Education (NDE). We are not able to train our elementary teachers in preschool because of the licensing requirement. The way Challenger works, because our curriculum is completely integrated from 3 years of age and up, it is necessary for us to train our elementary teachers in preschool curriculum that includes phonics and place value. We do it through games and other various methods, but at the end of the day, it is instruction. Today, we are asking to be licensed exclusively through NDE so that we can train our teachers correctly.

Assemblywoman Nguyen:

You mentioned Challenger School has children as young as 2 years 6 months. With this amendment, is it your intention not to accept any kids under 3?

Hugh Gourgeon:

We are doing this in order to help the process between DHHS and NDE. Currently we accept students as young as 2 years 9 months. In order to delineate a clear line and make the regulatory process clearer, we are willing to change our practices and push the age to 3 years of age.

Assemblywoman Nguyen:

I have some concerns. When you are talking about kids this young, you are walking a fine line between kids who are in need of child care services as opposed to being in an educational setting. You may have kids who are not potty-trained at that age. Is there any

difference in inspections or safety compliance with these two different things you are trying to streamline?

Hugh Gourgeon:

Yes, this is why we accept students at 2 years 9 months once they are out of diapers. That is the only requirement. By the age of 3, a lot of children are no longer in diapers; those who are not will just have to wait to be enrolled. I completely understand that NDE is not expecting to license nursery schools or children with those kinds of needs. That is why those policies are in place.

Assemblywoman Nguyen:

Are there different inspection requirements for younger kids as opposed to requirements for an educational setting?

Susan Fisher:

We have representatives from both NDE and DHHS here who could answer questions about the inspection process. In the school facilities, bathrooms are geared to the sizes of the children. The younger ones have more meals—lots of snacks throughout the day—but the educational process is very similar all the way through, and the children adapt very well.

Assemblywoman Titus:

I appreciate that all children learn differently and that what works for one may not work for another. My question relates to the inspections. If you go to just the educational certification, what would they be looking for and would it change how often inspections would take place and what the minimum requirements would be? It is not just around whether the children are potty-trained—there are issues such as play time, attendance, and perhaps background checks. I would need some clarification that you are not going to lessen the requirements regarding standard of care and standard of education and those kinds of things for the safety of the children. If there really would not be fewer inspections, would they still be held accountable for the education, recognizing that the child is 3 years old and not 7 years old? I would need reassurance about that.

Another issue is the cost of licensure. If you have to have a license from both the Department of Education as well as from child services, what is the cost? Is there going to be a cost to the state because of not getting that second licensure fee, although I realize there are not very many of these schools. What would be the charge for the single license for the education process?

Hugh Gourgeon:

Your first question involves understanding the children who are very young and have different needs than do the older students, and Challenger agrees with this. Our curriculum takes into account NAEYC [National Association for the Education of Young Children] standards and early childhood and the individual development of the children. This is why we accept students at 3 years of age, but we do not have a cookie-cutter approach as to what

program they go into because some children are able to move on and others have to be held back for a variety of reasons.

We have been doing this since 1963. We have 26 campuses in 5 states. In Utah we have operated for the last 12 years in a manner consistent with what we are trying to do today, and we have not had any problems whatsoever. In terms of regulation, we are currently under the supervision of Melissa Schroeder who works in the Nevada Department of Education; she inspects the schools. Clearly, this is a statute that will allow us to be licensed under one entity, but then the actual regulations and licensing requirements and the inspection schedule will be defined by the Department of Education. Of course, Challenger School will act in a manner consistent with whatever that is.

Assemblywoman Titus:

Now you have to pay two fees because you have two licenses. Do you know those costs, and do you have to pay per school or per your company—Challenger School?

Hugh Gourgeon:

Challenger currently absorbs that cost because we do not want our teachers to pay for it out of pocket. The biggest challenge is one of time commitment. Challenger's approach for our 17 teachers in training is that we pay them like regular teachers. Teachers stay in that program anywhere from a few months to a full year until they are ready. We start them with the 3-year-olds. Currently we are not able to assign them to 3-year-old students because of the regulatory environment, so they have to go through a time commitment. We can pay for it, but we cannot do the work, and for them it is a very long time commitment to acquire both credentials.

Assemblywoman Titus:

Obviously, the instructors, or the teachers, are now currently mandated to have dual licensure, but is your facility also mandated to have dual credentials or dual licensure? Are we changing both and not just for your instructors?

Hugh Gourgeon:

Yes. Currently each school—we have four schools in the state of Nevada—is licensed by DHHS and licensed by the Department of Education. We have inspections from both. The challenge is changing the requirement that prevents teachers working from one program to the other—there is an impasse where we cannot cross-train.

Assemblywoman Titus:

Do other states require dual licensure? Is it standard practice because of the age requirements?

Hugh Gourgeon:

We have three schools in Austin, Texas, and we are building one in Plano, Texas. There is one licensure for 3-year-olds all the way through middle school. In Utah, where we have six schools, there is one license from 2 years 9 months through middle school.

Assemblywoman Titus:

Is that licensing through the education department and not through child services?

Hugh Gourgeon:

Utah is licensed only through their education department. In Austin, Texas, we are licensed only through child care.

Assemblywoman Nguyen:

A lot of schools provide before- and after-school care. Are there any after- and before-school care programs available for Challenger students?

Hugh Gourgeon:

It depends on the program. In preschool, if a parent chooses, the program is all-inclusive from 7 a.m. to 6 p.m. and there are no additional costs for any extended program, snacks, or anything else because that is what they are buying for 11 hours a day. If you are a middle school child, you have the tuition for the regular day and then you have extended class time at the school for music, sports, and other various activities.

Assemblywoman Nguyen:

You are considering the education you are providing and the program you are providing for the 3-year-olds to be pre-K. I thought pre-K was traditionally considered to be the year before kindergarten—age 4?

Hugh Gourgeon:

That depends on the jurisdiction. For instance, in California where we have ten schools and about 5,000 students, it depends on their age. Prekindergarten is part of elementary after June 1 in Nevada. Every child who is not 5 years old by September 30 is what we use as a rule of thumb to let into preschool education. Because of our preschool, our kindergarteners—and we have about 1,300 of them—average in the 96th percentile on the Iowa Test of Basic Skills, and that is the top 4 percent in the country without any of them excluded from the count. That is only made possible because of what we do at ages 3 and 4. Currently, our inability to train our teachers with students aged 3 and 4 is affecting our ability to develop our kindergarten program and on up.

Assemblywoman Nguyen:

I just have concerns about kids who are so young and who may have different needs that the child care licenses cover as opposed to being licensed by the Department of Education. I appreciate that this may be the right fit for some children. With the success rate you are claiming to have, I can see that people would aspire to put their kids in your program, but those children may not be well suited for that high-rigor education at such a young age.

Senator Denis:

Because this is a private school, they have the ability to pick and choose their students. If it does not fit that student's need, then that student does not meet the criteria to be accepted into the school.

Chairwoman Cohen:

Seeing no other questions, do you have anyone else who is part of the presentation?

Susan Fisher:

We have David Walton, regional director for Challenger School, in the audience. He has also served on the Child Care Advisory Council for the state of Nevada for the last five years, and he is here to answer questions as well.

Senator Denis:

This bill only has an impact on a very small number of schools—probably only four or five schools that have different methods.

David Walton, Executive Region Director, Challenger School:

I am also a member of the Child Care Advisory Council. In my experience, the professionals within the Nevada Department of Education are incredible. Working with them through workshops and the regulatory discovery process—which I have had experience doing—we can address those standards-of-care concerns that have been brought up here in the Committee. I have every confidence that those standards of care are going to be met because of the nature of the program that Challenger offers and schools like Challenger offer that have integrated curriculums from preschool all the way through 8th grade or high school.

Chairwoman Cohen:

Is there anyone in Las Vegas or in Carson City in support? [There was no reply.] Seeing no one, is there anyone in opposition in Las Vegas or in Carson City? [There was no reply.] Seeing no one, we will move to neutral. Is there anyone neutral?

Margot Chappel, Deputy Administrator, Regulatory and Planning Services, Division of Public and Behavioral Health, Department of Health and Human Services:

We are neutral on this and we are working with the sponsors to address some of our concerns. To answer Assemblywoman Titus's question, right now private schools are inspected every other year and child care facilities are inspected every six months. That is something we are working to address with the sponsor and with the Department of Education.

Chairwoman Cohen:

You mentioned some concerns DHHS has. Can you tell us what those are?

Margot Chappel:

The main one is the frequency of inspection and the youth of the children. I spoke to the Department of Education earlier today, and there is one person who does all the licensure for the private schools for the whole state. Because of her workload, she visits the schools every other year, and that is the main issue.

Assemblywoman Nguyen:

Other than the frequency of inspections, are there any other differences between the inspections for child care licensure versus the Department of Education's licensure?

Margot Chappel:

Yes, there are. There are no early childhood requirements in the regulations for private schools and there are no child care safety requirements either, so those would need to be developed in the rulemaking process as was previously mentioned.

Chairwoman Cohen:

Seeing no other questions, do you have any closing remarks?

Senator Denis:

I see that you understand the problem and what we are proposing as a solution. We think some of the details can be addressed in the regulatory process as we go through it. I appreciate your consideration of the bill.

Susan Fisher:

Thank you for your time and consideration. We hope you see fit to move this bill.

Hugh Gourgeon:

Thank you for the opportunity to let us speak from our perspective and come here for our students, our parents, and our teachers. Thank you for your time.

Chairwoman Cohen:

I will close the hearing on S.B. 468 (R1) and open for public comment. Do we have anyone for public comment in Las Vegas or Carson City? [There was no reply.] Seeing no one, our next hearing will be on Wednesday and we will be in hearing room 1214 on the first floor. We are adjourned [at 1:53 p.m.].

RESPECTFULLY SUBMITTED:

Terry Horgan
Committee Secretary

APPROVED BY:

Assemblywoman Lesley E. Cohen, Chairwoman

DATE: _____

EXHIBITS

[Exhibit A](#) is the Agenda.

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

[Exhibit C](#) is a copy of the Consent Calendar for the Work Session, dated May 6, 2019, presented by Marsheilah Lyons, Committee Policy Analyst, Research Division, Legislative Counsel Bureau.

[Exhibit D](#) is the Work Session Document, dated May 6, 2019, for [Senate Bill 17](#), presented by Marsheilah Lyons, Committee Policy Analyst, Research Division, Legislative Counsel Bureau.

[Exhibit E](#) is the Work Session Document, dated May 6, 2019, for [Senate Bill 18 \(1st Reprint\)](#), presented by Marsheilah Lyons, Committee Policy Analyst, Research Division, Legislative Counsel Bureau.

[Exhibit F](#) is the Work Session Document, dated May 6, 2019, for [Senate Bill 77](#), presented by Marsheilah Lyons, Committee Policy Analyst, Research Division, Legislative Counsel Bureau.

[Exhibit G](#) is the Work Session Document, dated May 6, 2019, for [Senate Bill 92](#), presented by Marsheilah Lyons, Committee Policy Analyst, Research Division, Legislative Counsel Bureau.

[Exhibit H](#) is the Work Session Document, dated May 6, 2019, for [Senate Bill 184 \(2nd Reprint\)](#), presented by Marsheilah Lyons, Committee Policy Analyst, Research Division, Legislative Counsel Bureau.

[Exhibit I](#) is the Work Session Document, dated May 6, 2019, for [Senate Bill 284 \(1st Reprint\)](#), presented by Marsheilah Lyons, Committee Policy Analyst, Research Division, Legislative Counsel Bureau.

[Exhibit J](#) is written testimony submitted by Senator James Ohrenschall, Senate District No. 21, dated April 1, 2019, in support of [Senate Bill 370 \(2nd Reprint\)](#).

[Exhibit K](#) is a proposed amendment to [Senate Bill 468 \(1st Reprint\)](#), presented by Susan L. Fisher, representing Challenger School.