MINUTES OF THE SENATE COMMITTEE ON COMMERCE AND LABOR

Eightieth Session February 18, 2019

The Senate Committee on Commerce and Labor was called to order by Chair Pat Spearman at 1:34 p.m. on Monday, February 18, 2019, in Room 2135 of the Legislative Building, Carson City, Nevada. The meeting was videoconferenced to Room 4412E 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 Pat Spearman, Chair Senator Kelvin Atkinson, Vice Chair Senator Nicole J. Cannizzaro Senator James Ohrenschall Senator Chris Brooks Senator Joseph P. Hardy Senator James A. Settelmeyer Senator Heidi Seevers Gansert

GUEST LEGISLATORS PRESENT:

Senator Joyce Woodhouse, Senatorial District No. 5

STAFF MEMBERS PRESENT:

Cesar Melgarejo, Policy Analyst Marjorie Paslov Thomas, Policy Analyst Bryan Fernley, Committee Counsel Jennifer Richardson, Committee Secretary

OTHERS PRESENT:

Jeanette Belz, American Registry of Radiologic Technologists Chad Hensley, Nevada Society of Radiologic Technologists Lesley Pittman, Reno Diagnostic Centers Susan Fisher, State Board of Osteopathic Medicine

Dan Musgrove, Chiropractic Physicians' Board of Nevada
Marlene Lockard, Nevada Chiropractic Association
Michael Hillerby, Renown Health
Joan Hall, Nevada Rural Hospital Partners
Catherine O'Mara, Nevada State Medical Association
Heather Lunsford, State Board of Podiatry
Carolyn Cramer, Executive Director, State Board of Podiatry
Sharath Chandra, Administrator, Real Estate Division, Department of Business
and Industry

CHAIR SPEARMAN:

We will begin the hearing with Senate Bill (S.B.) 130.

SENATE BILL 130: Provides for the licensing and regulation of certain persons who administer radiation. (BDR 40-61)

SENATOR JOYCE WOODHOUSE (Senatorial District No. 5):

I am presenting <u>S.B. 130</u>. The goal of this bill is to raise the standard of patient care and to ensure the safety of Nevadans by establishing a licensee program for those who perform radiation therapy or radiologic imaging.

Nevada does not require licensing for those who perform radiation therapy or radiologic imaging although the majority of other states do. Aside from those performing mammography, Nevada does not require any certification or specific education for people performing these services to ensure they understand the potential hazards of radiation and how to minimize exposure. Radiation is dangerous.

To bring Nevada in line with the majority of other states, <u>S.B. 130</u> will require individuals to obtain a license before performing radiation therapy or radiologic imaging and will provide for the regulation of those licenses. This ensures that people operating scanners, X-ray machines or providing radiation therapy are properly trained in order to protect themselves and their patients. The bill establishes the Radiation Therapy and Radiologic Imaging Advisory Committee (RTRIAC) to review the regulations concerning radiation therapy and radiological imaging under the Division of Public and Behavioral Health (DPBH) of the Department of Health and Human Services and to advise the Legislature on these issues. Finally, the bill authorizes radiologic assistants in our State. I will provide the Committee an overview on the substantive sections.

Section 32 provides that physicians, dentists, chiropractors, podiatrists and persons who administer radiation only to animals are exempt from the licensing and regulation requirements of the bill.

Section 33 creates the RTRIAC to advise the State Board of Health (SBH), DPBH and the Legislature concerning radiation therapy and radiologic imaging.

Section 34 requires the SBH to adopt regulations relating to radiation therapy and radiologic imaging, including regulations that define the scope of practice for radiologic assistants and the holders of licenses and limited licenses.

Section 35 of the bill requires a person to obtain a license or a limited license from the DPBH prior to engaging in radiation therapy or radiologic imaging.

Sections 36 and 37 set forth the qualifications for obtaining a license or limited license.

Section 41 authorizes the holder of certain licenses to practice as a radiologist assistant.

Section 42 authorizes an unlicensed person who does not receive compensation to engage in radiation therapy or radiologic imaging under the direct supervision of a physician, dentist, chiropractor, podiatrist or certain other licensees. A licensee may also practice outside the scope of his or her practice under direct supervision in order to qualify for certain certifications. The DPBH may issue a temporary student license authorizing an unlicensed person to engage in radiation therapy or radiologic imaging for compensation in order to qualify for a certification that is a prerequisite for licensure.

Section 43 authorizes individuals currently performing computed tomography fluoroscopy, as well as radiation therapy and radiologic imaging, to do so without meeting the bill's licensure requirements as long as they register with the DPBH and meet certain other requirements.

Sections 44 and 45 set forth the qualifications to perform computed tomography or fluoroscopy.

Sections 47 through 51 authorize the DPBH to enforce the provisions of the bill and to inspect buildings, investigate complaints against licensees, impose disciplinary action and seek an injunction to prevent violations when necessary.

During the 79th Legislative Session, I sponsored a similar piece of legislation, but the content became so complex we were not able to pass it. During the Interim, Ms. Jeanette Belz worked with stakeholders to draft a bill that met most of the concerns regarding the previous bill. Ms. Belz will be testifying on this measure and will bring forth proposed amendments that have been worked on since the bill draft was introduced.

JEANETTE BELZ (American Registry of Radiologic Technologists):

We have provided the Committee with a section by section summary (<u>Exhibit C</u>) of the bill. I will go through the proposed amendments (<u>Exhibit D</u>) we drafted and will address the concerns from the other groups who will testify later.

In Proposed Amendment 1, we suggest deleting sections 4, 5, 6, 7, 24, 46 and 76 in their entirety. At the request of the Radiation Control Program (RCP), the body that would regulate radiologic technicians, we propose all sections dealing with *Nevada Revised Statutes* (NRS) 457 be left in current statute. Mammographers are licensed under the existing statute. The RCP felt it was cleaner with the overlay of federal regulations if those statutes were handled separately.

Proposed Amendment 2 amends section 8 for veterinarians. Radiography done on animals is exempt. Veterinarians asked us to make that change.

Proposed Amendment 3 was done at the recommendation of the RCP. We are keeping mammography in NRS 457.

Proposed Amendment 4 has to do with the RTRIAC. In section 33, subsection 2, paragraph (g), the definition of "one member" and the qualifications of "one member" are narrow, making it difficult to find a person with those qualifications. That person should be certified to provide clinical professional services in the field of medical physics, but they would not have to be licensed as a radiologic technologist.

Proposed Amendment 5 was included at the suggestion of the RCP, because we are keeping mammography in the mammography section of the NRS. The RCP

would not have to establish regulations in the new sections having to do with mammography. The change in section 34, subsection 4 would be to remove the word "fees." Penalties would go to the General Fund for the care of disposal sites for radioactive waste. Fees stay with the RCP to administer the new chapter.

Proposed Amendment 6 changes section 41 to strike the word "direct" from the phrase "direct supervision." Radiologic technologists do their work without the direct supervision of a radiologist. By correcting the wording in this section, the bill matches the way these professionals work.

Proposed Amendment 7 clarifies the grandfathering clause in section 43. This section places an undue burden on radiologic technologists. The proposed amendment allows DPBH to license those currently practicing who may not have a certification through the American Registry of Radiologic Technologists (ARRT) or a similar certification. The requirement is also referenced in sections 36 and 37 of the bill.

Proposed Amendment 8 deletes sections 53 and 59 in their entirety. The bill originally included a physician assistant as being required to have a radiologic technologist license. That was not the original intent. We proposed to eliminate the reference to physician assistants as they are required to work under a supervising physician in NRS 630, the medical doctor statute, and NRS 633, the osteopathic physician statute.

Proposed Amendment 9 is to correct a spelling error in section 60, subsection 3. It changes "competed" to "completed" as it relates to training.

Proposed Amendment 10 would add Senator Pete Goicoechea, Senatorial District No. 19, as a co-sponsor.

In addition to our proposed amendments, we spoke with other groups testifying today about their proposed amendments. Renown Health requested a change from physicists in their group regarding fluoroscopy. They provided the language to us late in the morning today.

We spoke with Joan Hall from the Nevada Rural Hospital Partners (NRHP) in regard to exemptions for rural health clinics. We are close to agreeing on language that allows folks who are currently doing radiologic imaging within the

rural health centers to be able to continue doing so, as long as they complete training as part of their job and also are required to take some continuing education.

We have a proposed amendment (<u>Exhibit E</u>) from the Chiropractic Physicians' Board of Nevada (CPBN). The proposed amendment moves reference of chiropractic assistants who can perform radiologic imaging from the heart of the bill to the exceptions/exemptions. Regarding physician assistants, we explained that they were going to be removed from the bill because of references in NRS 630 and 633. They requested an additional change that would include exempting physicians working under a supervising physician.

The last proposed amendment (Exhibit F) is from the State Board of Podiatry. The original proposed amendment they submitted to us was not acceptable. However, before the hearing we had a conversation with them, and I am confident that we can work out something. We provided Senator Hardy a chart (Exhibit G) of various paths for podiatry. That covers the bill with our proposed amendments and the work we have done this morning.

CHAIR SPEARMAN:

We do not have all the amendments. Can you provide them?

Ms. Belz:

We received a proposal from Renown Health. We did not submit it. We are working on a proposal with NRHP that is not ready.

CHAIR SPEARMAN:

When will you have the other amendments?

Ms. Belz:

We will work on them as expeditiously as possible, but they will not be ready before the end of this meeting.

CHAD HENSLEY (Nevada Society of Radiologic Technologists):

With the exception of mammography, Nevada does not require those performing X-ray, fluoroscopy, computer tomography, nuclear medicine or radiation therapy to have any education prior to exposing patients to ionizing radiation. Those educated in proper patient positioning and the concept of "As Low As Reasonably Achievable" (ALARA) should be operating these devices.

We would like to establish a licensure program in Nevada that sets educational standards based on the level of need for all personnel who perform medical imagining examinations using ionizing radiation. Full certification allows those who are nationally certified in radiography, nuclear medicine, radiation therapy or as a radiologist's assistant to perform the duties provided by the professional scope of practice. Limited certifications allow for body specific radiographic imaging, such as spine, extremity, thorax, podiatric, skull and bone densitometry. There is recognition of chiropractic assistants, dental assistants and podiatric hygienists to continue radiographic imaging without additional licensing beyond their own statutes.

Those moving to Nevada who are already nationally certified may work without delay as their applications for Nevada certification are being processed. Those currently working in radiography would be allowed to continue under the grandfather clause as it would require continuing education to maintain their license.

The standards in place for mammography would be transferred into this program to provide continuity for all medical imaging procedures. An advisory committee comprised of imaging experts and communities of interest would be established to provide advice for regulations in this field.

This bill would set standards similar to those set in 47 other states that have either established or are in the process of establishing licensing programs. We do not want Nevada to be left behind as one of the few states that does not prioritize radiation safety. By processing and approving <u>S.B. 130</u>, you will be increasing the standard of quality and care for our patients in all of Nevada. All Nevada patients should have the assurance that those performing their medical imaging examinations have had an education prior to exposure.

LESLEY PITTMAN (Reno Diagnostic Centers):

We are in support of <u>S.B. 130</u> and the amendments brought forward by Ms. Belz. Reno Diagnostic Centers has three diagnostic imagining facilities in northern Nevada. We follow the ALARA model for patients. This bill is about improving patient safety. Sometimes our radiologists receive two to three images that are unreadable. From our perspective, better training, licensing and certification standards at the State level will help improve our ability to prevent our patients from receiving additional radiation when it is not necessary.

SUSAN FISHER (State Board of Osteopathic Medicine):

We are in support of <u>S.B. 130</u> with the proposed amendments from Ms. Belz. We were at one of the late morning meetings with her. We do not have recommendations in writing. We will get those to her. Ms. Belz did agree to incorporate them on behalf of the State Board of Osteopathic Medicine (SBOM). We would like physician assistants explicitly excluded from the bill because they are covered under NRS 633.107, which defines the licensing for physician assistants. The proposed amendment will assure that all the SBOM licensees are exempt, because they are trained and tested on interpretation of radiographic images. Physician assistants need to be exempt, not double licensed.

DAN MUSGROVE (Chiropractic Physicians' Board of Nevada):

We are in support of <u>S.B. 130</u>. <u>Exhibit E</u> was submitted by Ms. Belz. We have been working with Mr. Hensley since the Interim. The Nevada Society of Radiologic Technologists recognizes that the CPBN does a lot when it comes to training and competency of our chiropractors, chiropractic assistants and students enrolled in apprenticeship programs. They do not want to see double licensure. <u>Exhibit E</u> has been approved by both the sponsor of the bill and by Ms. Belz.

MARLENE LOCKARD (Nevada Chiropractic Association):

We are in support of <u>S.B. 130</u> with the proposed amendments that have been presented to date.

MICHAEL HILLERBY (Renown Health):

We are in support of <u>S.B. 130</u>. We will work with Ms. Belz to include language in regard to fluoroscopy required certification by the ARRT in section 45.

JOAN HALL (Nevada Rural Hospital Partners):

We are neutral toward <u>S.B. 130</u>. We appreciate section 43 that allows for grandfathering. In our rural healthcare centers, we have three radiologic technologists who are licensed for plain film, but who have on-the-job training for computerized axial tomography. Grandfathering them will allow them to continue to provide that service.

Our concern is over rural health clinics. Our hospitals operate 16 different rural health clinics in remote Nevada. Kingston, Eureka, Topaz, Alamo and Fernley are some of those affected. They use medical assistants to do their back office work. A doctor or an assistant in the clinic orders the tests. The medical

assistants work directly under the physician's license and can perform tasks that the physician feels they are competent and educated to perform.

Performing X-rays, especially in Kingston, Eureka and Topaz, becomes an issue if medical assistants cannot perform those duties. Medical assistants can be grandfathered under section 43; however, they are a transient kind of professional in rural clinics. They do not stay long. They might be tipping their toe into health care to determine if they want to go to nursing school or medical school.

We worry about access to care by mandating they be licensed. If you mandate a license for X-ray technologists in the rural areas, they would not stay. The rural clinics perform three to four X-rays each month. We want an amendment for medically under-served areas to give rural clinics the ability to continue to provide services as long as they are checked on a periodic basis. Hospitals believe in quality.

It is prudent for medical assistants to continue with the education credits to prove their competency. The discussions we have had about safety over radiation and proper positioning are really important. Realistically, this bill will limit access to X-rays in the remote areas of Nevada. We are working with the sponsor to propose an amendment. When we have a proposed amendment, we will be in support of this bill.

CATHERINE O'MARA (Nevada State Medical Association):

We are neutral toward <u>S.B. 130</u>. We shared our concerns with the sponsor of the bill and the proponents of the bill. We met with Mr. Hensley this morning, and most of our concerns have been addressed. I would like to state those concerns for the record.

First, if a radiologic technologist is not available during surgery, but the surgeons need to take an image so they can proceed, another medical professional will do it. We want to make sure that we are not interrupting patient care. We met with Mr. Hensley this morning and we will be able to come to an agreement. As long as a physician is administering the radiation, he or she can gauge the amount of radiation that is going to the patient. The nurse or other medical professional can set up the machine.

Second, outpatient pain management and oncology settings are using their mid-level professionals to perform scans. The medical assistant or registered nurse will set up the machine and the doctor will administer the radiation.

SENATOR HARDY:

Will the physician assistant rule apply to NRS 630 and 633?

Ms. O'Mara:

Yes, physician assistants would be exempted in the proposed amendment. We have not seen the language, but that is the intent.

HEATHER LUNSFORD (State Board of Podiatry):

We are in opposition to <u>S.B. 130</u>. I am with Carolyn Cramer and she will address some of the concerns we have with the bill.

CAROLYN CRAMER (Executive Director, State Board of Podiatry):

We are in opposition to <u>S.B. 130</u>. I will be reading from a prepared statement (Exhibit H).

Before today's proceedings, we were able to meet with Ms. Belz and Mr. Hensley, and I think we will be able to come to an agreement. It is unfortunate we could not work together during the Interim.

SENATOR HARDY:

It is my understanding that there are two options; we can do a licensure or we can regulate. The graph shows we do not have regulations on the Board of Podiatry (BOP). Will the BOP be able create regulations?

Ms. Cramer:

Yes, I think we will be able to come up with a reasonable set of regulations.

SENATOR HARDY:

Will the set of regulations be done in time to meet the deadlines for the bill?

Ms. Cramer:

It will be tight. Anything we work on now would be part of the Interim Session. It may not happen.

SENATOR HARDY:

Can you address the deadline with the Legislative Counsel Bureau, Legal Division?

Ms. Cramer:

We would hope to meet the deadline for the regulations. I cannot say if the BOP will be prioritized ahead of other agencies.

CHAIR SPEARMAN:

Can you work with the other groups and get your proposed amendments done by February 22, 2019?

Ms. Cramer:

I can work with them to put together a draft. I can put something in front of the BOP on March 4, 2019. We do not have a board meeting until then.

CHAIR SPEARMAN:

Work with them as much as you can. March 4, 2019 is 2 weeks away. Make this a priority for the board meeting.

We will close the hearing on S.B. 130. We will open the hearing on S.B. 39.

SENATE BILL 39: Revises provisions governing appraisers and appraisal management companies. (BDR 54-224)

SHARATH CHANDRA (Administrator, Real Estate Division, Department of Business and Industry):

I am here to present <u>S.B. 39</u>. I have submitted a document (<u>Exhibit I</u>) that gives an overview of the Real Estate Division (RED) and a quick summary of the bill.

The RED licenses builders, developers, time shares, appraisers, energy auditors, real estate licensees and inspectors of structures. There are approximately 40,000 licensees. The RED oversees the Real Estate Commission, the Commission of Appraisers of Real Estate and the Office of the Ombudsman for Owners in Common-Interest Communities and Condominium Hotels. The Ombudsman Office oversees the Commission for Common-Interest Communities, homeowners association registrations, compliance, alternative dispute resolutions, mediation, education and training.

Nevada Revised Statues 645C.600 establishes conditions and requirements for registration of appraisal management companies (AMC). As a result of the Dodd-Frank Act, states are required to implement minimum requirements for supervision of AMC. To be in compliance with federal law, Nevada needs to make changes to the existing statute.

Because of Nevada's biennium Legislature, the RED asked the federal government for an extension on compliance. We were afforded the extension. Once this bill is passed, the RED will be ready for our 2020 federal audit.

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CHAIR SPEARMAN: We will close the hearing on <u>S.B. 39</u> . We adju- 2:25 p.m.	ourn this Committee meeting at
	RESPECTFULLY SUBMITTED:
	Jennifer Richardson,
	Committee Secretary
APPROVED BY:	
	_
Senator Pat Spearman, Chair	
DATE:	<u>.</u>

EXHIBIT SUMMARY				
Bill	Exhibit / # of pages		Witness / Entity	Description
	Α	1		Agenda
	В	4		Attendance Roster
S.B. 130	С	4	Jeanette Belz / American Registry of Radiologic Technologists	Section by Section Summary
S.B. 130	D	8	Jeanette Belz / American Registry of Radiologic Technologists	Nevada Society of Radiological Technologies, Proposed Amendments
S.B. 130	Е	1	Jeanette Belz / American Registry of Radiologic Technologists	Chiropractic Physicians' Board of Nevada, Proposed Amendment
S.B. 130	F	1	Jeanette Belz / American Registry of Radiologic Technologists	State Board of Podiatry, Proposed Amendment
S.B. 130	G	1	Jeanette Belz / American Registry of Radiologic Technologists	Podiatry Radiologic Imaging Pathway
S.B. 130	Н	3	Carolyn Cramer / Nevada State Board of Podiatry	Written Testimony
S.B. 39	I	3	Sharath Chandra / Nevada Real Estate Division, Department of Business and Industry	Presentation Materials