MINUTES OF THE SENATE COMMITTEE ON COMMERCE AND LABOR

Eightieth Session April 8, 2019

The Senate Committee on Commerce and Labor was called to order by Chair Pat Spearman at 1:43 p.m. on Monday, April 8, 2019, in Room 2135 of the Legislative Building, Carson City, Nevada. The meeting was videoconferenced to Room 4404B 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 Marilyn Dondero Loop, Vice Chair Senator Nicole J. Cannizzaro Senator Chris Brooks Senator Joseph P. Hardy Senator James A. Settelmeyer Senator Heidi Seevers Gansert

GUEST LEGISLATORS PRESENT:

Senator Dallas Harris, Senatorial District No. 11 Senator David R. Parks, Senatorial District No. 7

STAFF MEMBERS PRESENT:

Cesar Melgarejo, Committee Policy Analyst Bryan Fernley, Committee Counsel Kim Cadra-Nixon, Committee Secretary

OTHERS PRESENT:

Susan Fisher, Nevada State Board of Oriental Medicine Maggie Tracey, OMD, President, Nevada State Board of Oriental Medicine Katania Taylor, OMD Kristie Jones, OMD David Edge, OMD

Loretta Bellanger

Lisa Grant, OMD, Nevada State Board of Oriental Medicine

Cristina Klingenberg

Rhonda Freih

Anita Lanier, OMD

K. Neena Laxalt, Nevada State Board of Physical Therapy

Sherise Smith, Chairman, Nevada State Board of Physical Therapy

R.J. Williams, President, Nevada Physical Therapy Association

Tom Clark

Jennifer Nash

Sabrina Summers

Kirk Sachtler

Felicia Saunders

Sandy Anderson, Executive Director, Nevada State Board of Massage Therapy

Sherrie Scaffidi, Director & Advocate, Transgender Allies Group

Briana Escamilla, Nevada State Director, Human Rights Campaign

Stephan Page, Northern Nevada Organizing Lead, Human Rights Campaign

Shane Piccinini, Human Services Network; Food Bank of Northern Nevada

Jennifer Jeans, Washoe Legal Services; Legal Aid Center of Southern Nevada;

Southern Nevada Senior Law Program; Volunteer Attorneys of Rural Nevada

Elisa Cafferata, Planned Parenthood Votes Nevada

Craig Stevens, Cox Communications

Helen Foley, T-Mobile

George Ross, Nevada Bankers Association; Hospital Corporation of America

Hawah Ahmad

Michael Hillerby, Google LLC; MasterCard Worldwide

Don Galmore

Mike Eifert, Executive Director, Nevada Telecommunications Association

Randy Robinson, CenturyLink

Herb Santos, Jr., Nevada Justice Association

Jason Mills, Nevada Justice Association

Chas Nort, President, Nevada Alternative Solutions, Inc.

Dalton Hooks, Jr., Nevada Self Insurers Association

Gary Milliken, Nevada Contractors Association

Joseph Heck, State Osteopathic Medical Association

Marlene Lockard, Service Employees International Union Local 1107 Nevada; Las Vegas Police Protective Association Civilian Employees Inc.; Nevada Chiropractic Association; Retired Public Employees of Nevada

Tommy Ferraro, Nevada Resort Association

Todd Ingalsbee, Professional Firefighters of Nevada

Jeanette Belz, American Property Casualty Insurance Association

Ray Fierro, Administrator, Division of Industrial Relations, Department of Business and Industry

Alisa Nave-Worth, Brownstein Hyatt Farber Schreck

Jeanne Parrett, Park Manager, Senior Parks

Marolyn Mann, Executive Director, Manufactured Home Community Owners
Association

Rick LaMay, Manufactured Home Community Owners Association

Sophia Romero, Staff Attorney, Legal Aid Center of Southern Nevada

Patricia McHugh

Reba Burton

Janet Nelson, Nevada Association of Manufactured Homes

CHAIR SPEARMAN:

I will open the hearing on Senate Bill (S.B.) 355 with Senator Parks.

SENATE BILL 355: Revises provisions relating to certain regulatory bodies which administer occupational licensing. (BDR 54-856)

SENATOR DAVID R. PARKS (Senatorial District No. 7):

This bill relates to regulations governing the duties and powers of the Nevada State Board of Oriental Medicine. The bill also revises the provisions governing the licensing of doctors of Oriental medicine.

This bill was originally intended to streamline the processes for licensing in our efforts to attract more medical personnel to the State. During the process of drafting the bill, I received a legal opinion from the Legislative Counsel Bureau (LCB), (Exhibit C) with regard to the scope and practice of physical therapists and chiropractors.

Existing law defines the scope of practice of physical therapy and restricts persons licensed to practice physical therapy from practicing other forms of healing.

The scope and practice of physical therapy does not include dry needling. This is clarified in sections 12 and 13 of this bill.

Joining me today is the President of the Nevada State Board of Oriental Medicine, Dr. Maggie Tracey, and also representing the Nevada State Board of Oriental Medicine is Susan Fisher.

SUSAN FISHER (Nevada State Board of Oriental Medicine):

This bill was originally intended to streamline the processes for licensing. We were contacted by the Chiropractic Physicians' Board of Nevada and asked to remove the practice of cupping from the prohibitions in the bill as it is not an invasive procedure. The State Board of Oriental Medicine presents this amendment at the request of the Chiropractic Board (Exhibit D). This will expand the practice of cupping and not limit this practice to oriental medicine.

We have met with the Nevada State Board of Physical Therapy and are not in consensus with all provisions of their amendments.

I will have Dr. Tracey review the components of the bill.

MAGGIE TRACEY, OMD (President, Nevada State Board of Oriental Medicine): As Senator Parks has explained, we are here in support of <u>S.B. 355</u>. I have submitted written testimony (<u>Exhibit E</u>) and also wish to highlight the following points.

In consultation with the Nevada State Board of Physical Therapy, we agreed to reinsert the deleted words "the flow and balance of energy in the body and to" in section 3, subsection 1.

The current procedural terminology (CPT) code set is a medical code set maintained by the American Medical Association. The medical code set is used to report medical, surgical, and diagnostic procedures and services by entities such as physicians, health insurance companies and accreditation organizations. The CPT Editorial Panel is tasked with ensuring that CPT codes remain up to date and reflect the latest medical care provided to patients.

In September 2018, a new code for needle insertion without injection was added. This procedure is deemed identical to both trigger point, acupuncture and dry needling. It underscores that if there is needle retention, leaving the needle in the body, acupuncture is being practiced. This alone should be in the definition of dry needling. There is no specific dry needling code.

SENATOR HARDY:

I hear somewhat of a mixed message in that the State Board of Oriental Medicine and the Physical Therapy Board came to an agreement; but we do not agree.

Some of the states have made dry needling legal procedures for physical therapists. So in this respect, is it the Board of Oriental Medicines' position to make dry needling legal, if the State makes it legal?

DR. TRACEY:

The Board of Oriental Medicine would agree to make this practice legal for physical therapists if standards are in place. Those standards would include the current definition of "not leaving the needle in the body" and proper training and education. This legislative body and the Physical Therapy Board would need to be responsible for the regulation of the physical therapy profession.

Our concern is the use of an acupuncture needle by untrained professionals. An acupuncture needle is classified as a Class II medical device by the Federal Food and Drug Administration. It is only to be used by licensed acupuncturists and medical doctors.

SENATOR HARDY:

Physical therapists are extensively trained in muscle anatomy and physiology. If they were also trained in dry needling, could they perform this practice?

DR. TRACEY:

Yes, if they were properly trained.

SENATOR SETTELMEYER:

Even though they have been performing this practice since 2012, the LCB has indicated dry needling is outside the practice of physical therapy. I am concerned there are no specific requirements in place to perform this practice.

Dr. Tracey, what is your recommendation for required training to perform dry needling? What is the course requirement in other states that have legalized this practice for physical therapists?

DR. TRACEY:

Many states that allow dry needling by physical therapists have strict standards for training. These standards range from 200 hours to 300 hours. Most states require physical therapists to practice for two years prior to training in dry needling. Most states also require clinical supervision in the needling practice.

For the Committee, I would be happy to provide national educational requirements for dry needling.

SENATOR HARDY:

What has been the result in the states that require less than 200 hours of training?

DR. TRACEY:

Most states require much more than 22 training hours, or a weekend course, to perform an invasive procedure.

As Oriental medicine doctors we are trained extensively in muscle anatomy and physiology as are physical therapists. I am a strong believer in physical therapy and personally see a physical therapist on a regular basis.

There are a known 406 acupuncture points, as well as a few hundred Ashi points in the body. Ashi points are similar to trigger points. A doctor of Oriental medicine must know both the exact angle and the exact depth of the insertion of the needle for every single point. This knowledge is to ensure we do not harm the patient.

I would not expect the physical therapists to have the training of an acupuncturist if they are performing dry needling trigger point therapy and not leaving the needle in the body. However, for public health and safety there should be much more than 22 hours of training to perform the practice of dry needling. I have examined the curriculum of weekend schools. Many only include five hours of hands-on practice in dry needling.

VICE CHAIR DONDERO LOOP:

Why should highly educated physical therapists not have the level of expertise to perform dry needling?

Ms. FISHER:

The Board of Oriental Medicine is in agreement physical therapists should practice dry needling if they have adequate training and if dry needling is written into their scope of practice. At this time, neither required training nor scope of practice is defined for physical therapists.

VICE CHAIR DONDERO LOOP:

Please clarify your concern with the training of physical therapists as it relates to the practice of dry needling.

DR. TRACEY:

There is no set standard or minimum number of training hours required for the practice of dry needling by physical therapists. Additionally, Nevada has not established a certification process.

In 1973, Nevada was the first state to legalize acupuncture. The State established strict standards for this profession. Nevada was the standard bearer for acupuncture and Oriental medicine across the Nation. I want to ensure the State stays at the forefront of high standards in acupuncture.

To protect the health and safety of the public, practitioners must be well trained in using an acupuncture technique.

VICE CHAIR DONDERO LOOP:

As an acupuncturist, are there any other specialties practiced within the field of Oriental medicine?

DR. TRACEY:

Yes, in Oriental medicine there are eight branches of medicine. A huge part of our practice is herbal medicine and acupuncture. As one example, certification to become a Feng Shui practitioner requires an additional 150 hours of class time and 150 hours of homework. This requirement is just to become an apprentice.

VICE CHAIR DONDERO LOOP:

I understand, thank you.

SENATOR HARDY:

Are there any cases in which patients have been harmed?

DR. TRACEY:

I have seen patients harmed from dry needling by physical therapists. One of these patients has submitted a complaint to the Physical Therapy Board. Since this is a small community, some do not want to file a formal complaint. I am not aware of the total number of complaints filed with the Physical Therapy Board.

KATANIA TAYLOR, OMD:

I am testifying today to protect the citizens of Nevada.

In 2012, the Physical Therapy Board allowed physical therapists (PTs) to begin the practice of dry needling without any minimum training requirement other than his or her confidence in performing this practice. I believe this is an egregious breach of public trust and safety. Backed by the Human Resources Research Organization report, PTs would have you believe they are sufficiently trained. We have tried to work with PTs on this issue; however, they refuse to add any minimum training requirements.

Physical therapists are trained exclusively in noninvasive techniques. In Nevada, upon graduation, PTs are allowed to insert needles, up to four inches long, into a patient's body. Medical doctors are required to have 300 hours of training in needle insertion and acupuncturists have a minimum of 2,000 hours in needle insertion.

Currently Nevada is not holding PTs to the same standard as they hold other practitioners who perform invasive techniques. While one professional group is required to demonstrate excellence and prove ongoing competency in the field, the other group can effectively do whatever they choose.

Physical therapists have attempted to circumvent acupuncture training, standards, licensing and regulatory laws by administratively retitling acupuncture as dry needling. This is confusing to the public and also misleading. Performing dry needling without proper training creates a significant danger to public welfare.

For the sole reason of public safety, I ask this Committee to support S.B. 355.

Kristie Jones, OMD:

I co-own the Healing Point in Reno and have been in practice as a doctor of Oriental medicine for seven years.

In the practice of dry needling, safety is the primary concern. At this time there is no credentialing board for practitioners of dry needling. There is no regulatory agency that oversees training, licensure or supervision of this practice by PTs. The Physical Therapy Board only requires that the PT feels competent to perform the practice of dry needling.

The practice of dry needling by physical therapists was declared invalid in Florida in February 2019 due to non-existent standards and lax regulations.

In this ruling, a policy statement from the American Medical Association was referenced. It stated dry needling is "an invasive procedure and should only be performed by practitioners with standard training and familiarity with routine use of needles in their practice, such as licensed medical physicians and licensed acupuncturists."

It is far too risky to continue to allow the practice of dry needling in our State as the code stands. We need to uphold the integrity, education and practice of licensed healthcare professionals in Nevada.

Let Nevada set an example for the rest of the Country by establishing standard requirements for dry needling by healthcare practitioners.

DAVID EDGE, OMD:

I am an Oriental medicine doctor practicing for 14 years in Gardnerville.

First and foremost, I support <u>S.B. 355</u>. I do not believe PTs should be inserting needles of any type due to the minimal amount of training they receive in dry needling. As mentioned earlier, medical doctors are required to have 300 hours of training in needle insertion.

Physical therapists can take a 16-hour weekend course in dry needling and start working with the public the very next day. This is not only unacceptable, it presents a danger to the public.

Physical therapists claim they are not working within the theory of a meridian system, only within the theory of muscle trigger points. Physical therapists claim this belief is the cornerstone differentiating acupuncture from dry needling.

Trigger points date back hundreds of years and are clearly mapped out in reputable acupuncture textbooks. Even if PTs are only treating trigger points, a weekend course is still not adequate training. There are at least 400 trigger points in the body, each with a very specific location. Skeletal muscle, nerves, blood vessels or organs could be damaged with poor dry needling techniques. A weekend course cannot cover this depth of material nor the ability to practice these techniques efficiently and safely.

I have several clients who have received dry needling and complained of the pain as compared to an acupuncture treatment. Inserting needles in people is both an art and a science and takes hundreds of hours of practice to truly become proficient.

The amount of training PTs undergo before practicing on their clients is unacceptable. This is an issue of public safety.

LORETTA BELLANGER:

I am a victim of dry needling by a PT. I have received acupuncture treatments for ten years. This treatment has helped with chronic pain caused by a multiple level fusion.

In December 2018, after undergoing surgery, I received dry needling by a PT. The needles were left in for six minutes with stimulation attached. I left the treatment in severe pain, unable to move for three days. My acupuncturist made a house call and required two more home visits before I could fully function.

In my opinion, the PT did not have adequate training in this type of medicine. How is the Legislature allowing them to practice this type of medicine without proper training?

I testify in support of S.B. 355.

LISA GRANT, OMD (Nevada State Board of Oriental Medicine):

I am in support of <u>S.B. 355</u> and have submitted written testimony (<u>Exhibit F</u>). In addition to my testimony, and in answer to Senator Hardy's question, two of my patients were harmed from dry needling by a PT.

CRISTINA KLINGENBERG:

I am suffering from a disabling neuropathy caused by a dry needling injury at the hands of a physical therapist in Nevada on September 12, 2018. My condition is not only unbearable and untreatable but may lead to a permanent disability. I have submitted written testimony and my conclusions as a patient on the practice of dry needling by PTs (Exhibit G).

RHONDA FREIH:

I am a certified coach in alternative medicine and have been a patient of Oriental medicine for many years.

We regulate so many different industries in this State and sometimes even overregulate. After reading this bill, I cannot comprehend why we would not require PT practitioners to have the same level of education as other medical practitioners in this practice.

I agree with much of the testimony that has been presented. I ask that you consider participating in the legislative acupuncture workshop and experience the benefits of acupuncture performed by qualified practitioners. Then, if you dare, have a dry needling treatment by a PT before you vote on this bill.

ANITA LANIER, OMD:

I am an Oriental medicine doctor practicing in Henderson, Nevada. I support S.B. 355 and also agree with the testimony that has been presented in support of this bill.

I also want more qualified Oriental medicine doctors to be licensed in Nevada. Restricting trade is not a motivating factor in supporting this bill; patient safety is the motivating factor. Residents of Nevada deserve safe, clean, quality acupuncture from qualified practitioners.

Passage of this bill will improve accountability for practicing clean needle techniques. Hopefully, the passage of this bill will also include adoption of an examination which tests knowledge of needle depths and angles. An examination of this type will prevent accidents such as organ puncture.

I am proud of the high standards held by Oriental Medical Doctors in Nevada. I support S.B. 355.

VICE CHAIR DONDERO LOOP:

Will those in favor of S.B. 355 please stand?

VICE CHAIR DONDERO LOOP:

Will those opposed to S.B. 355 please stand?

K. Neena Laxalt (Nevada State Board of Physical Therapy):

The Nevada State Board of Physical Therapy is directly affected by <u>S.B. 355</u> and we will present our view of this bill.

SHERISE SMITH (Chairman, Nevada State Board of Physical Therapy):

I am Chairman of the Nevada State Board of Physical Therapy and am here to voice our concern regarding <u>S.B. 355</u>. I have submitted written testimony (<u>Exhibit H</u>) and an attachment which we believe is an accurate reading of our statute which allows physical therapists to perform dry needling (<u>Exhibit I</u>).

R.J. WILLIAMS (President, Nevada Physical Therapy Association):

I am the President of the Nevada Physical Therapy Association and also a physical therapist and dry needling practitioner. I am testifying in opposition to <u>SB. 355</u> and have submitted written testimony (<u>Exhibit J</u>).

Ms. Laxalt:

The Physical Therapy Board has been in conversation with the Board of Oriental Medicine and we have submitted a proposed amendment (<u>Exhibit K</u>). In this amendment, we have requested three changes.

Essentially, the Physical Therapy Board would like their own language and definitions in the bill as it relates to dry needling by physical therapists.

Our legal services have unofficially reviewed the LCB opinion on dry needling. Our legal services found the LCB has misinterpreted the scope of practice of licensed physical therapists. The Physical Therapy Board has submitted a response to the LCB opinion on the practice of dry needling by physical therapists (Exhibit L).

SENATOR SETTELMEYER:

The Committee will refer to the opinion of the LCB, rather than advice from the legal services of the Physical Therapy Board.

When the Physical Therapy Board put dry needling into their scope of practice, was this regulation submitted to the Legislative Commission for adoption?

Ms. Smith:

The advisory committee met four times in 2018 and by a majority vote passed on the regulation to the LCB. We have submitted for reference two documents regarding our research (Exhibit M and Exhibit N).

SENATOR SETTELMEYER:

The Physical Therapy Board granted itself authority to perform the practice of dry needling. Did the Physical Therapy Board come to the Legislative Commission to expand the practice of dry needling by physical therapists?

Ms. Smith:

On the basis that dry needling was under the category of a mechanical device, the Physical Therapy Board granted an opinion that dry needling was in the scope of practice for physical therapists

SENATOR SETTELMEYER:

Since dry needling is an invasive practice, what is the Board's requirement for sanitation, hygiene and sterilization? Do you have a class requirement for these sanitation standards?

Ms. Smith:

Yes, this class is part of the entry level requirement for physical therapists.

SENATOR SETTELMEYER:

What would you agree on for training for the invasive procedure of dry needling?

Ms. Smith:

We do not have a specific number of hours to recommend; however, we do want all needed qualifications included. Three credentialing agencies are involved in this fluid and upcoming profession.

SENATOR SEEVERS GANSERT:

What are the names of the credentialing boards?

Ms. Smith:

The three credentialing agencies are the American Physical Therapy Association, the Federation of State Boards of Physical Therapy and the State Board of Physical Therapy. Each of these have stringent standards.

SENATOR SEEVERS GANSERT:

One of the credentialing boards you mentioned is yourself, the State Board of Physical Therapy.

Ms. Smith:

The Advisory Committee on Continuing Competency is not actually the Board of Physical Therapy, but a Committee that reviews competencies.

SENATOR SEEVERS GANSERT:

Has the Advisory Committee established standards for dry needling or is this to happen in the future?

Ms. Smith:

Currently, there is a list of courses approved for credentialing. These courses include a review of sterile techniques and the skills for needle placement.

Mr. WILLIAMS:

I attended one of the courses approved for credentialing. It included ten hours of pre-course work covering the core competencies of clean needle technique, relevant anatomy, physiology and demonstrations. The time spent at the live courses can be centered on the motor skills required to place the needles.

In the course I attended, 20 students were in attendance with 13 instructors. Since physical therapists have a strong background in anatomy, the entire weekend course focused on live technique.

SENATOR SEEVERS GANSERT:

In summary, the Physical Therapy Board approved itself to authorize the practice of dry needling by physical therapists. Now the Board is working through specific regulations for this practice. Since the practice was approved in 2012, these regulations appear to be delayed.

Ms. Smith:

Yes, that is correct. The Board of Physical Therapy has been delayed in adopting regulations due to the popularity of this practice and the importance of public safety.

VICE CHAIR DONDERO LOOP:

Medical doctors are trained in piercing the skin. Is a physical therapist with a doctorate trained in this practice?

SENATOR HARDY:

Which document lists the core competencies?

Ms. Smith:

The competencies are listed in Exhibit I.

CHAIR SPEARMAN:

Those in opposition of <u>S.B. 355</u> please stand. I see there are a number of you in Las Vegas and in Carson City.

Those in opposition, please be brief and you may also submit your written testimony if unable to present.

TOM CLARK:

I represent myself today to tell you my personal story as it relates to the practice of dry needling. This practice helped to cure my condition of adhesive capsulitis, commonly referred to as frozen shoulder. After 5 sessions, I had 85 percent improvement and could return to traditional physical therapy to continue recovery.

JENNIFER NASH:

I am here today to speak against $\underline{S.B.~355}$ and have submitted written testimony ($\underline{\text{Exhibit O}}$).

SABRINA SUMMERS:

I have a doctorate in physical therapy and have been in practice for 38 years. I speak as both a provider and a patient advocate. Physical therapists are trained in advanced sterile procedures such as debridement and wound healing. We are in the profession of healing, which is to do no harm.

As a patient advocate, my 60-year-old husband Alex, a veteran, has been diagnosed with brain and lung cancer and has numerous tumors along his spinal cord. He was injured from radiation and due to spasms, lost the ability to raise his arms or walk. I have treated him with dry needling to improve his motor ability.

Many of my patients have multiple sclerosis and Parkinson's disease and I treat the trigger points with dry needling to keep them out of wheelchairs.

The purpose of our profession is to keep patients independent and mobile. As an adjunct, we use neuromuscular re-education, dry needling and manual therapy.

KIRK SACHTLER:

I am a physical therapist in practice for over 30 years and began dry needling in 2012. I have studied acupuncture for 15 years. My education also includes a doctorate in physical therapy, board certification in orthopedics, manual therapy strength and conditioning and dry needling. I have seen many great results with dry needling.

I am testifying in opposition to <u>S.B. 355</u> and agree with other testifiers in opposition to this bill. The bill would stymie the practice of dry needling and the benefit it brings to the citizens of Nevada.

FELICIA SAUNDERS:

I am a patient receiving dry needling therapy from a physical therapist. This treatment has improved my mobility. In contrast, I am a former patient of failed acupuncture treatments. Dry needling and acupuncture are different types of therapy.

As you review this bill, give the patients their right to choose the most appropriate treatment for their needs. I ask you to vote against <u>S.B. 355</u>.

Along with other physical therapy patients in the hearing room, I ask the Committee to vote against S.B. 355.

CHAIR SPEARMAN:

For those unable to testify due to time constraints, submit your written testimony to the Committee Secretary (Exhibit P and Exhibit Q).

SANDY ANDERSON (Executive Director, Nevada State Board of Massage Therapy): We thank Sentor Parks for removing the practice of cupping out of <u>S.B. 355</u>. This practice is performed by physical therapists, massage therapists, chiropractors and other practitioners. We are testifying neutral on this bill.

SENATOR SETTELMEYER:

I have two questions that may be answered by email. I would like to know more about the specific training required to perform dry needling. If this bill is enacted, how will the practice of physical therapy be affected?

SENATOR PARKS:

This bill was brought forward in the interest of public safety. At this time, there is no set standard or certification process in place for dry needling performed by physical therapists.

We were informed by the Chair of the Physical Therapy Board that 44 states, including Nevada, allow dry needling. The legal opinion provided by LCB indicates this statement is not accurate.

The revisions, specific to the licensing process for Oriental medicine doctors, are an important aspect of this bill. Additionally, we have seen an increase in popularity of dry needling by physical therapists, massage therapists and chiropractors.

It is important that we pass this bill and establish a form of regulation for the practice of dry needling.

CHAIR SPEARMAN:

We understand the Physical Therapy Board expanded the practice of physical therapy without approval of the Legislative Commission. Mr. Fernley, will you provide an opinion on this?

BRYAN FERNLEY (Committee Counsel):

Nevada Revised Statutes (NRS) 640.024 lays out the statutory definition of what falls within the scope of the practice of physical therapy.

My understanding of the Physical Therapy Board testimony was that they believe NRS 640.024 encompasses dry needling. The LCB conclusion is that dry needling is not included in this statute.

A board cannot expand the scope of practice beyond what is in statute. They can adopt regulations that might interpret the statute to apply to a new type of treatment. My understanding of the testimony is that the Board believes it is not expanding the scope of practice, it is interpreting the statute to include the practice of dry needling.

The conclusions by LCB are defined in Exhibit C.

CHAIR SPEARMAN:

We will now close the hearing on S.B. 355 and open the hearing on S.B. 311.

SENATE BILL 311: Prohibits certain discriminatory practices against a person seeking credit. (BDR 52-1048)

SENATOR PARKS:

This bill relates to credit regulations prohibiting discrimination against persons seeking credit. Senator Harris will present the objectives of S.B. 311.

SENATOR DALLAS HARRIS (Senatorial District No. 11):

The bill is intended to amend NRS 598B.020 by adding the following terms to section 1: race, color, creed, religion, disability, national origin or ancestry, sexual orientation, gender identity or expression. This revision will ensure creditworthiness is evaluated without discrimination.

SENATOR PARKS:

Last Session, we had S.B. No 188 of the 79th Session, which had language similar to this in 30 different sections of statute. We missed the section regarding credit regulations and this bill will rectify this oversight.

SHERRIE SCAFFIDI (Director & Advocate, Transgender Allies Group):

I appreciate the opportunity to testify in support of <u>S.B. 311</u> and have submitted written testimony (<u>Exhibit R</u>).

BRIANA ESCAMILLA (Nevada State Director, Human Rights Campaign):

We support this bill. The Human Rights Campaign releases a quality index each year rating states based on their inclusion policy for lesbian, gay, bisexual and transgender populations. This year Nevada was in the highest ranking group. There are 13 other states working toward innovative equality. This was an area

where there was an opportunity for improvement in Nevada. I hope we live up to this standard.

STEPHAN PAGE (Northern Nevada Organizing Lead, Human Rights Campaign): This is a very simple bill that covers a very important issue. While credit discrimination is often overlooked, it can be impactful. Discrimination of this type must be prevented.

Discrimination in credit truly keeps marginalized communities in poverty. Imagine if you were prevented from receiving credit solely on the basis of your identity.

Credit can help further one's education, provide safe transportation and ultimately help improve lives. Credit discrimination prevents people from furthering themselves and their families.

I hope you will support this bill to ensure all Nevadans are protected from discrimination.

Shane Piccinini (Human Services Network; Food Bank of Northern Nevada): We are here in support of <u>S.B. 311</u>.

JENNIFER JEANS (Washoe Legal Services; Legal Aid Center of Southern Nevada): We are here in support of <u>S.B. 311</u>.

ELISA CAFFERATA (Planned Parenthood Votes Nevada): We are here in support of S.B. 311.

CHAIR SPEARMAN:

We will now close the hearing on S.B. 311 and open the hearing on S.B. 220.

SENATE BILL 220: Revises provisions relating to Internet privacy. (BDR 52-920)

SENATOR NICOLE J. CANNIZZARO (Senatorial District No. 6):

I am here today to present <u>S.B. 220</u> which makes various changes relating to data privacy.

My constituents have expressed frustration over an increased number of robocalls, pop-up ads and emails offering services or products related to internet

searches. These situations are not unique or singular. While giving out personal identifying information requires a certain amount of risk, it is incumbent on the business to keep safe the information of the consumers they serve.

While S.B. 220 will not solve all of these issues, it is an important issue to discuss today.

In 2017, an estimated 1.6 million data breaches occurred throughout the United States. This left 178 million records vulnerable to attack. Over 2.5 quintillion bytes of data are created each day. Most of this data is made up of personal identifying information.

To give you an idea of what that number represents, that is 2.5 followed by 17 zeros. A quintillion words would make around 11 trillion books. Measured in gallons of water, a quintillion words would take 210,000 years for that amount of water to flow down Niagara Falls. In short, this is a lot of data.

There are over 2 billion active Facebook users. Every minute 500,000 Snapchat photos and 50,000 Instagram photos are uploaded. Every minute 500,000 tweets are sent.

As we can see from these statistics, the prevalence in volume of data presents challenges regarding the security of that data. Our obligation as lawmakers is to ensure we are tackling those challenges in a meaningful way.

In response to concerns about data privacy and security, a number of states and other countries have taken action to implement laws designed to protect consumer data. The European Union (EU) recently implemented the General Data Protection Regulation (GDPR) in 2018.

The law applies to businesses that use information of EU residents and includes provisions to allow consumers to have their personal data erased, to move data from one place to another and the right to be free from automated decision-making functions. The GDPR requires mandatory reporting of data breaches within 72 hours, as well as data collection disclosures. There are significant penalties for any violations.

Certainly, <u>S.B 220</u> is not as comprehensive as the GDPR; however, a number of states have also enacted various forms of data protection. Delaware has

enacted a child online privacy statute. Arizona and Delaware have enacted e-reader privacy provisions. California has enacted consumer data privacy policies. California, Connecticut, Nevada, Oregon, Delaware and Minnesota have passed laws regarding privacy policies for websites. Utah has enacted laws governing the disclosure of personal information.

As we can see there is a trend in states taking on the issue of data privacy. Until this issue is addressed at the federal level, it is incumbent on our State to ensure our residents are protected.

<u>Senate Bill 220</u> will ensure consumers have the capability to protect as well as prevent the sale of their personal identifying information.

Section 2 allows the consumer to submit a notice to an operator not to sell any covered personal identifying information that has or will be collected. An operator is prohibited from selling that same information.

Section 3 provides a private right of action to enforce a breach of the agreement.

Section 6 makes clear that an operator who would be covered by these provisions includes businesses engaged in activities connected to the State.

Section 7 allows the Attorney General to enforce the provisions in this bill.

I plan to adopt the friendly amendment submitted by the State Privacy and Security Coalition (<u>Exhibit S</u>). The State Privacy and Security Coalition is made up of a number of entities interested in data privacy.

Section 2 would address definitions and provide the process consumers would use to exercises their rights set forth in the section.

This proposed amendment would allow the consumer to opt out by either a toll-free number, email or online form. It would also clarify the definition of "sale" to include any transaction involving the exchange of covered information for monetary consideration to a third party for purposes of licensing or selling the information. It makes clear it would not include other permitted uses.

The amendment provides time frames and guidelines for operators to respond to consumers, including extensions of time necessary to comply with requests.

The amendment also deletes the private right of action and gives the right of enforcement to the Attorney General. I have met with privacy advocates who have offered amendments that are still under consideration. Certain exemptions are being considered for healthcare organizations, public utilities, non-profits and small businesses.

A number of federal statutes mandate that private information cannot be sold. I will be proposing an amendment that <u>S.B. 220</u> would not apply to data covered by federal legislation.

This bill is targeted to businesses that are selling information.

This bill would not apply to healthcare providers where data falls directly within The Health Insurance Portability and Accountability Act of 1996 (HIPAA). That information is not subject to sale and would be governed by federal statutes.

The Gramm-Leach-Bliley Act (GLBA), Title V of the Financial Services Modernization Act of 1999, would apply to certain financial institutions; therefore, federal statute would be the prevailing law.

Data in regard to vehicle manufacturers, service providers and operations are also covered by federal legislation.

CRAIG STEVENS (Cox Communications):

We thank the Senator for bringing this bill forward and I am here in support. I am testifying today to discuss the amendment presented by the State Privacy and Security Coalition.

We believe the amendment protects consumers and is fair to businesses that handle consumer data. We do look forward to a time when we have a federal policy on this issue, but until then we believe <u>S.B. 220</u> is a smart way forward.

HELEN FOLEY (T-Mobile):

I echo and share the comments voiced by Cox Communications.

The State Privacy and Security Coalition is made up of 23 major technology, media, communications, payment card, online security and retail companies. We wish to see consistency throughout all 50 states, but until that happens, the State Privacy and Security Coalition has drafted an amendment Exhibit S and submitted a letter of explanation of the proposed amendment (Exhibit T).

George Ross (Nevada Bankers Association, Hospital Corporation of America): We are in support of this bill. We also appreciate that potential conflicts of law between State and federal regulations have been taken into consideration. These conflicts include our concerns about GLBA and HIPAA.

HAWAH AHMAD:

As a Nevadan and privacy enthusiast, I am testifying in support of <u>S.B. 220</u>. To ensure information privacy, consumers must be given data ownership. This bill authorizes consumers in Nevada to give verifiable notice to an internet and website operator who collects and sells personal and identifiable information. The bill will also allow the consumer to cease the sale of their data.

This bill will create a more transparent Nevada and will also help advance privacy and cyber security for Nevadan companies. This bill is a wonderful first step to further the fair information practices of which most companies should be aware. Businesses will be able to comply with this law. This bill will ensure Nevada companies are at the forefront of privacy issues for consumers across the Country.

This bill will help establish compliance with international data privacy laws and the California Consumer Privacy Act of 2018.

Our education system will be encouraged to train the children of Nevada about cyber security and information privacy.

This bill will ensure Nevada companies are at the forefront of privacy laws for consumers. It is in the interest of Nevadans to ensure transparency and data ownership exists for consumers across the Country.

MICHAEL HILLERBY (Google LLC; MasterCard Worldwide):

I represent two members of the State Privacy and Security Coalition and wish to echo the comments of other presenters in support of <u>S.B. 220</u>. We appreciate

Senator Cannizzaro working with us to create a workable bill that models bills in other states.

DON GALMORE:

I echo the comments of earlier presenters in support of S.B. 220.

MIKE EIFERT (Executive Director, Nevada Telecommunications Association): I echo the comments of earlier presenters and the Nevada Telecommunications Association is in support of <u>S.B. 220</u>. We thank the Senator for accepting the amendment proposed by the State Privacy and Security Coalition.

RANDY ROBINSON (CenturyLink):

CenturyLink is a member of the State Privacy and Security Coalition and wishes to echo the comments of other presenters in support of S.B. 220.

CHAIR SPEARMAN:

We will now close the hearing on S.B. 220 and open the hearing on S.B. 381.

SENATE BILL 381: Revises provisions relating to workers' compensation. (BDR 53-1157)

SENATOR CANNIZZARO:

I am here to introduce <u>S.B. 381</u> and a substantive amendment by interested parties. With me today, I have Herb Santos, Jr. and Jason Mills to present the bill and the amendments.

HERB SANTOS, JR. (Nevada Justice Association):

I am here to present <u>S.B. 381</u>. This bill will accomplish one of the most important goals of the workers' compensation system. It will ensure the injured worker receives adequate treatment, healthcare choices and quality care.

The adequacy of medical care choices are covered in NRS 616B.5273. The statute requires the organizations' provider list accomplishes three things. First, it must ensure accessibility and availability of adequate treatment. It must provide an adequate choice of healthcare providers. Last, quality care must not be compromised.

The statute that went into effect in 2003 also empowered the Nevada Department of Business and Industry, Division of Industrial Relations (DIR) to

establish regulations to address the adequacies of these lists. To date, this has not been accomplished.

Sadly, NRS 616B.5273 has been manipulated and exploited by some insurers. In many of the cases, all three requirements of care are not met for injured workers in Nevada.

Many lists are inadequate and do not meet the statutory requirements. The adequate choice requirement has been interpreted to mean two doctors. Some insurers list only two doctors and a specialty doctor.

We have worked diligently with the stakeholders to ensure the injured workers will receive adequate treatment, choice and quality care. We also present this bill so the insurers have the ability to negotiate fees with the providers.

When inadequate lists are allowed to continue, the quality of care provided to injured employees is compromised. By providing more choice, the patient-doctor relationships will improve. The patient's health improves more quickly when the patient-doctor relationship is positive.

Many insurers and self-insured employers have joined in support of this bill. This supports the premise that this bill will not result in unreasonable increases in premium rates, unreasonable costs nor an inability to contract with providers.

Nevada is ranked as the forty-fourth lowest in insurance premiums in the United States. Providing injured workers with a reasonable choice of doctors will not raise costs.

Oregon's annual study of national workplace premiums concludes the true way to decrease costs is through accident prevention, safety training and helping injured workers quickly return to work. Timely medical care helps the worker return to work.

This bill will also address concurrent wages. It will prevent our armed forces personnel from being neglected by an inadequacy in the law when determining their average monthly wages.

I wish to address a letter of opposition submitted by the American Association of Payers, Administrators and Networks (AAPAN) (Exhibit U). They state they

are the leading national association of preferred provider organizations, networks and administrators in workers' compensation.

In their letter of opposition, the Executive Director, Julian Roberts, states AAPAN works with injured workers in Nevada. Members of their Board do not work in the field with injured workers, nor are they part of any injured workers union or organization advocating for injured workers rights.

We have worked with all stakeholders expressing concerns with the original bill and have addressed their concerns. We have reached a consensus on a bill which will be supported by both workers and employers. AAPAN has not contacted us directly to discuss their concerns. We feel this out-of-state company is attempting to interfere with Nevada law without a clear understanding of the process employers take in this State.

This law requires employers to include healthcare providers that have been established and maintained by the DIR. If employers wish to expand their list to other physicians they may submit an application to the DIR.

In their letter, AAPAN also states this bill will increase fraudulent claims. To the contrary, this bill will result in the opposite. Healthcare providers will still be contracted with the insured employer. Oversight of the overall healthcare provider base will continue. Injured workers will continue to be required to use the approved provider panel of their employer.

Under Nevada law, physicians not on the required lists are rarely contracted to treat an injured worker. Specific circumstances are outlined for these rare cases.

American Association of Payers, Administrators and Networks believes this law will increase costs and reduce coordination and innovation. We disagree, as all providers will be contracted and subject to the same billing requirements. Coordination of trends among providers will continue under <u>S.B. 381</u>.

Additionally, AAPAN's network vs. non-network argument is a nonissue in Nevada. It is a nonissue because NRS 616C.090 specifically requires an injured worker to select physicians from the managed care list of the insured or self-insured employer.

American Association of Payers, Administrators and Networks also believes there will a disincentive for providers to register for access through the DIR and that quality of care for injured workers will be reduced. In response, we want injured workers to receive care from physicians demonstrating special competencies and an interest in industrial health.

Finally, AAPAN argues that a requirement to feature registered providers will disincentivize providers to accept negotiations for lower rates. We have negotiated this issue with the stakeholders and we have reached a consensus.

American Association of Payers, Administrators and Networks has not contacted us regarding this bill and their opposition letter was submitted days before this hearing. This is not consistent with Nevada legislative process.

JASON MILLS (Nevada Justice Association):

The amendment (Exhibit V) addresses section 2, section 8 and section 36. The amendment also addresses section 26 in the original draft. These four sections are the substantive sections of this bill. All references to healthcare provider should be reverted to physician or chiropractor as set forth in existing statutes.

Section 2 defines adequate choice, regarding the number of physicians to be included in the insurers' list. The remedy to remove physicians from the insurers' list is defined.

Section 8 defines the requirements of the DIR list of physicians.

Section 26 of the original bill allows the injured worker to have a rating on request.

Section 36 covers the issue of concurrent wage.

SENATOR SETTELMEYER:

Physicians and chiropractors required in section 2 of the amendment may not exist in all areas of the State.

I have questions regarding concurrent wages. Would the cost of child care be added to the wage for workers receiving child care?

MR. MILLS:

The cost of provided child care is a benefit. If the employment benefit can be calculated to a fair money value, possibly it can be included in wage calculation.

SENATOR SETTELMEYER:

To clarify, can benefits such as gym memberships, child care and paid healthcare benefits be included in wage calculation?

Mr. Santos, Jr.:

The Nevada Administrative Code (NAC) lists those benefits that can be included in wages.

SENATOR SETTELMEYER:

Would you provide the list of the benefits included in NAC? We may need to change this in the bill as it is unclear.

MR. MILLS:

Much of the language we used in the statute was from current regulations.

Mr. Santos, Jr.:

Items allowed in calculating monthly wages for the purpose of compensation to injured workers is covered in NAC 616C.423.

SENATOR SEEVERS GANSERT:

The language regarding concurrent wages in the amendment, section 36, subsection 1, is very broad.

I agree with Senator Settelmeyer, physicians and chiropractors required in section 2 of the amendment may not exist in all areas of the State. For instance, we have very few neurosurgeons in northern Nevada. What happens if a provider does not wish to participate in a panel?

MR. MILLS:

In order to be on the DIR panel or list, the physician must indicate their willingness to do so.

The list includes the physician specialties most needed in industrial insurance. If the list managed by the DIR does not contain that specialist or the requested number of specialists, the insurer is required to utilize the number available.

CHAS NORT (President, Nevada Alternative Solutions, Inc.):

We are a third party administrator for self-insured employers and are in support of S.B. 381 as amended.

DALTON HOOKS, JR. (Nevada Self Insurers Association):

We are in support of $\underline{S.B.~381}$ as amended. In respect to the question from Senator Seevers Gansert regarding the number of physicians required by the DIR panel, we will have to see how that unfolds. However, we do support the amendment as currently written.

GARY MILLIKEN (Nevada Contractors Association):

In the construction industry, workers' compensation is one of our largest expenses. We are in support of S.B. 381 as amended.

JOSEPH HECK (State Osteopathic Medical Association):

On behalf of the State Osteopathic Medical Association, we are in support of <u>S.B. 381</u> as amended. The amendment includes general and family medicine physicians in the list of required providers. We thank the sponsor for this inclusion.

MARLENE LOCKARD (Service Employees International Union Local 1107 Nevada; Las Vegas Police Protective Association Civilian Employees Inc.; Nevada Chiropractic Association; Retired Public Employees of Nevada):

The Service Employees International Union Local 1107 Nevada; Las Vegas Police Protective Association Civilian Employees; Nevada Chiropractic Association and Retired Public Employees of Nevada are in support of S.B. 381.

TOMMY FERRARO (Nevada Resort Association):

The Nevada Resort Association supports S.B. 381 as amended.

TODD INGALSBEE (Professional Firefighters of Nevada):

The Professional Firefighters of Nevada support <u>S.B. 381</u>. We think it is very important to define adequate choice for injured workers. We agree with earlier testimony in support of this bill.

JEANETTE BELZ (American Property Casualty Insurance Association):

This bill is currently effective on passage and approval. It would require companies to pay benefits that have not been built into their premium rates. We

respectively request the date be moved to January 1, 2020. We have submitted a letter of opposition (Exhibit W).

RAY FIERRO (Administrator, Division of Industrial Relations, Department of Business and Industry):

On behalf of the DIR, we testify neutral on this bill. The language in NRS 616C.420, NAC 616C.420 and NAC 616C.423 may need revisions.

SENATOR SEEVERS GANSERT:

Will the fiscal note change to reflect the amendment?

Mr. Fierro:

We have not fully reviewed the amendment and will need additional time to identify any changes to the fiscal note.

CHAIR SPEARMAN:

We will now close the hearing on $\underline{S.B.~381}$ and open the work session on S.B.~177.

SENATE BILL 177: Revises provisions relating to employment practices. (BDR 53-723)

CESAR MELGAREJO (Committee Policy Analyst):

I have a work session document (<u>Exhibit X</u>) which explains <u>S.B. 177</u> and several amendments.

SENATOR CANNIZZARO MOVED TO AMEND AND DO PASS AS AMENDED S.B. 177.

SENATOR DONDERO LOOP SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

* * * * *

Mr. Melgarejo:

The next bill on work session is a bill we heard earlier today.

SENATE BILL 311: Prohibits certain discriminatory practices against a person seeking credit. (BDR 52-1048)

SENATOR DONDERO LOOP MOVED TO DO PASS S.B.311.

SENATOR HARDY SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

* * * * *

CHAIR SPEARMAN:

We will now close the work session on $\underline{S.B.311}$ and open the hearing on S.B. 148.

SENATE BILL 148: Revises provisions governing manufactured home parks. (BDR 10-503)

ALISA NAVE-WORTH (Brownstein Hyatt Farber Schreck):

I am here today with Marolyn Mann, Executive Director of the Manufactured Home Community Owners Association; Jeanne Parrett, Park Manager, Senior Parks; and Rick LaMay, Manufactured Home Community Owners Association.

We are here today to present <u>S.B. 148</u> and have submitted written testimony (Exhibit Y) and a timeline of changes in statute (Exhibit Z).

JEANNE PARRETT (Park Manager, Senior Parks):

I have been managing mobile home parks for seniors since 1999. I have prepared a presentation regarding the history of vacancies at El Dorado Estates in Las Vegas (Exhibit AA).

We urge the passage of this legislation.

MAROLYN MANN (Executive Director, Manufactured Home Community Owners Association):

I am the Executive Director of the Manufactured Home Community Owners Association. We are a nonprofit trade association representing owners and managers of manufactured home communities for the last 35 years.

The conversion of an age-restricted mobile home park to an all-age community will take time. Additionally, not all 55+ parks would want to convert, but for those that need to do so, home values will improve.

Our neighboring states do not have laws mandating payment when there is a change in age restriction in home parks.

I also have written testimony included in Exhibit Y.

SENATOR SETTELMEYER:

How are the miles calculated in NRS 118B.130?

Ms. NAVE-WORTH:

I believe the miles are calculated as miles driven.

RICK LAMAY (Manufactured Home Community Owners Association): I echo the testimony presented in support of this bill.

SENATOR SETTELMEYER:

I suggest the language in the amendment referring to distances should be clarified from "miles" to "road miles".

SOPHIA ROMERO (Staff Attorney, Legal Aid Center of Southern Nevada): I am here in opposition of <u>S.B. 148</u> and have submitted written testimony (Exhibit BB).

In addition to my written testimony, I am concerned with section 1, subsection 7. We must also make sure the landlords continue to pay fair market value to any tenant if the home cannot be moved. This is currently Nevada law and subsection 7 attempts to change it.

We strongly discourage passage of this bill in its current form.

SENATOR HARDY:

Ms. Romero, the wording in section 1, subsection 7, states "if the tenant elects to move". They would not be forced to move. Is this your understanding of the section?

Ms. Romero:

Seniors specifically chose the park due to the rules of the community. Now the community is changing the rules; therefore, it is not a real choice for the senior tenants.

The landlord has previously been responsible to cover the costs of the move if seniors want to move to a 55 + community. This bill strips the landlord of this responsibly to senior tenants. Essentially, the landlords are trying to push the seniors out of the community.

PATRICIA McHugh:

I speak on behalf of the many seniors who are in opposition to <u>S.B. 148</u>. I have lived in an age-qualified community for over 20 years.

Seniors want to be in a community with other seniors. This bill does not provide an adequate payment to move to an age-restricted community. The bill allows for \$2,500 to move a single-section home; however, the cost is actually \$10,000 to \$20,000.

Please consider the plight of many seniors who live on a fixed income and cannot afford or do not wish to live in an all-age community.

Ms. Jeans (Washoe Legal Services; Southern Nevada Senior Law Program; Volunteer Attorneys of Rural Nevada; Legal Aid Center of Southern Nevada):

We represent seniors in a range of civil and legal issues including landlord and tenant disputes in mobile home parks.

In the cases we represent, seniors own their home but they rent space in the parks. Typically the seniors have invested tens of thousands of dollars on their homes and have carefully chosen the location. These decisions are based on the cost of rent, environment and type of park.

For almost 40 years, Nevada law has protected these homeowners and their investments by requiring parks to pay homeowners when they choose to change the designation of the park. I do not think this is an unintended consequence.

Under current law, the decision to convert a mobile home park to different use is within the discretion of the park. In these circumstances, conversion requires paying homeowners fair market value for their home when the home cannot be moved. Many older mobile homes cannot be moved. After seniors have relied on these protections for three decades, the park owners are attempting to change the rules.

The parks have determined it is in their financial interest to convert age-restricted parks to all ages. The Mobile Home Owners Association has informed us senior parks have started renting to families and raising rents. Increasing these rents and opening the parks to all ages benefits the parks. The seniors who have invested in their homes are the ones who will lose out.

This bill will create a windfall for parks. In short, the bill proponents have failed to demonstrate a need that would justify reducing protections for seniors. I have submitted written testimony (Exhibit CC) in opposition of S.B. 148.

REBA BURTON:

I have worked every session since 1982 on provisions to protect seniors. A major concern of seniors is the lack of places to move older manufactured homes. Additionally, the cost to move the home is much greater than this bill allows. I am opposed to S.B. 148.

Ms. Lockard (Retired Public Employees of Nevada):

I am representing the Retired Public Employees of Nevada and we are in opposition to S.B. 148.

Our members who are residents of senior parks have invested in their mobile homes and have made the decision to spend their retirement years in an age-restricted community. Their personal investment goes beyond the mobile home itself. Our residents invest in landscaping and gardens to make their surroundings one in which they are proud.

This bill creates uncertainty for seniors affected by this legislation.

Mr. Piccinini:

I represent the Food Bank of Northern Nevada and also the Human Services Network.

Once the conversion of age-restricted parks to all-age parks occurs, there will not be an affordable place for seniors to live. This bill has the potential to make the senior homeless population increase. We are currently facing this problem in Washoe County.

We ask you to oppose S.B. 148.

JANET NELSON (Nevada Association of Manufactured Homes):

I am a board member with the Nevada Association of Manufactured Homes and have been living in my 55 + community for 7 years.

As a retired nurse, I feel it is unsafe for many seniors to live in an environment surrounded by children's activities.

I am opposed to S.B. 148.

Ms. Nave-Worth:

We pledge to continue to work with those opposed to this legislation.

This bill is not an action to raise rents, it is a move to save communities that are not going to be viable because of economically sanctioned issues in Nevada law. Nevada is going to be forced to deal with this economic issue.

No other states surrounding Nevada, including California, have this sort of restriction on a conversion from a senior park to an all-inclusive family park.

The tenants in senior parks are important to us; therefore, we wrote a law that was reasonable and based on an Arizona statute.

We do agree there is a lapse in the bill as currently drafted regarding the fair market value of homes that must be abandoned. We wish to work on this issue with stakeholders.

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|--|---|--|--|--|
| CHAIR SPEARMAN: We will close the hearing on S.B. 148 and adjourn at 4:35 p.m. | | | | |
| | RESPECTFULLY SUBMITTED: | | | |
| | | | | |
| | Kim Cadra-Nixon, Committee Secretary | | | |
| APPROVED BY: | | | | |
| | _ | | | |
| Senator Pat Spearman, Chair | | | | |
| DATE: | _ | | | |

| EXHIBIT SUMMARY | | | | | | |
|-----------------|----------------------|----|---|--|--|--|
| Bill | Exhibit / # of pages | | Witness / Entity | Description | | |
| | Α | 2 | | Agenda | | |
| | В | 18 | | Attendance Roster | | |
| S.B. 355 | С | 32 | Senator David R. Parks | Explanation from LCB Legal Division | | |
| S.B. 355 | D | 1 | Susan Fisher / Nevada State Board of Oriental Medicine | Proposed Amendment | | |
| S.B. 355 | Е | 4 | Maggie Tracey / Nevada State Board of Oriental Medicine | Written Testimony | | |
| S.B. 355 | F | 2 | Lisa Grant / Nevada State Board of Oriental Medicine | Written Testimony | | |
| S.B. 355 | G | 5 | Cristina Klingenberg | Written Testimony | | |
| S.B. 355 | Н | 1 | Sherise Smith / Nevada State Board of Physical Therapy | Written Testimony | | |
| S.B. 355 | I | 8 | Sherise Smith / State Board of Physical Therapy | Dry Needling Information Packet | | |
| S.B. 355 | J | 1 | R.J. Williams / Nevada Physical Therapy Association | Written Testimony | | |
| S.B. 355 | K | 1 | K. Neena Laxalt / State Board of Physical Therapy | Proposed Amendment | | |
| S.B. 355 | L | 4 | K. Neena Laxalt / State Board of Physical Therapy | Nevada Physical Therapy Response to LCB Opinion | | |
| S.B. 355 | М | 52 | Sherise Smith / State Board of Physical Therapy | Dry Needling Resource Paper | | |
| S.B. 355 | N | 47 | Sherise Smith / State Board of Physical Therapy | Dry Needling Competencies Report | | |
| S.B. 355 | 0 | 1 | Jennifer Nash | Written Testimony | | |
| S.B. 355 | Р | 1 | Chair Pat Spearman | Letter of Support –Megan Clowers | | |
| S.B. 355 | Q | 6 | Chair Pat Spearman | Letters of Opposition | | |

| S.B. 311 | R | 1 | Sherrie Scaffidi / Transgender Allies Group | Written Testimony |
|----------|----|----|---|--|
| S.B. 220 | S | 2 | Senator Nicole J. Cannizzaro | Proposed Amendment from State Privacy and Security Coalition |
| S.B. 220 | Т | 2 | Helen Foley / T-Mobile | Letter of Explanation of Proposed Amendment from State Privacy and Security Coalition |
| S.B. 381 | U | 3 | American Association of Payers, Administrators and Networks | Opposition Letter |
| S.B. 381 | V | 9 | Jason Mills / Nevada Justice Association | Proposed Amendment |
| S.B. 381 | W | 2 | Jeanette Belz / American Property Casualty Insurance Association | Opposition Letter |
| S.B. 177 | Х | 3 | Cesar Melgarejo | Work Session Document |
| S.B. 148 | Υ | 5 | Alisa Nave-Worth / Brownstein Hyatt Farber Schreck | Written Testimony |
| S.B. 148 | Z | 4 | Alisa Nave-Worth / Brownstein Hyatt Farber Schreck | Timeline of Statute |
| S.B. 148 | АА | 16 | Jeanne Parrett / Senior Parks | Vacancies Presentation |
| S.B. 148 | ВВ | 1 | Sophia Romero / Legal Aid Center of Southern Nevada | Written Testimony |
| S.B. 148 | СС | 2 | Jennifer Jeans / Washoe Legal Services; Legal Aid Center of Southern Nevada; Volunteer Attorneys of Rural Nevada; Southern Nevada Senior Law Program | Written Testimony |