MINUTES OF THE SENATE COMMITTEE ON COMMERCE AND LABOR

Eightieth Session April 24, 2019

The Senate Committee on Commerce and Labor was called to order by Chair Pat Spearman at 1:35 p.m. on Wednesday, April 24, 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 Joyce Woodhouse, Senatorial District No. 5 Assemblyman Alexander Assefa, Assembly District No. 42 Assemblywoman Shannon Bilbray-Axelrod, Assembly District No. 34 Assemblywoman Maggie Carlton, Assembly District No. 14

STAFF MEMBERS PRESENT:

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

OTHERS PRESENT:

Glen Fuchs, AARP Barry Gold, AARP Marlene Lockard, Nevada Women's Lobby

Bryan Wachter, Retail Association of Nevada

Katie Ryan, Director of Public Policy and Advocacy, Dignity Health St. Rose Dominion

Barbara Paulsen, Nevadans for the Common Good

Michael Hackett, Nevada Public Health Association

Mary Liveratti

Nick Tscheekar, Community Foundation of Western Nevada

Ann Silver, Reno and Sparks Chamber of Commerce

Randi Thompson, National Federation of Independent Business

Amber Stidham, Henderson Chamber of Commerce

Misty Grimmer, Nevada Resort Association

Homa Woodrum, Aging and Disabilities Services Division, Department of Health and Human Services

Greg Esposito, Nevada State Pipe Trades

Paul Moradkhan, Las Vegas Metro Chamber of Commerce

Mendy Elliott, Reno and Sparks Chamber of Commerce

Christine Saunders, Progressive Leadership Alliance of Nevada

Drake Ridge, Las Vegas City Employees Association

Shelley Berkley, Chief Executive Officer and Senior Provost, Touro University Nevada

Dan Musgrove, Valley Health Systems

Karen Oppenlander, LISW, Executive Director, Board of Examiners for Social Workers

Vikki Erickson, Board of Examiners for Social Workers

Allison Stersic

John Piro, Clark County Public Defender's Office

David Boire

Kate Taormina

Richard Wren

CHAIR SPEARMAN:

We will open the hearing on Assembly Bill (A.B.) 90.

ASSEMBLY BILL 90 (1st Reprint): Provides certain employees with the right to use sick leave to assist certain family members with medical needs. (BDR 53-169)

ASSEMBLYWOMAN SHANNON BILBRAY-AXELROD (Assembly District No. 34): I am here to present A.B. 90. Over the Interim, I was part of the Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs. This bill would require private employers that provide sick leave to allow employees to use sick leave to help immediate family members with certain medical needs.

This bill would allow a person to take time off to care for loved ones. They will be allowed to use their sick leave they accumulated for this purpose. The purpose would be to assist an immediate family member who has an illness, injury, medical appointment or authorized medical need.

The conditions that apply to an employee taking sick leave for themselves would apply to the employee taking sick leave for family members in need of care. An employer may limit the amount of sick leave that an employee may use to no less than what that employee would accrue in a six-month period of time.

The folks who would be included in this would be: children, spouses, domestic partners, siblings, parents, mothers-in-law, fathers-in-law, grandchildren, grandparents, step-parents and foster family members of an employee.

To ensure employee awareness, <u>A.B. 90</u> requires the Labor Commissioner to prepare a bulletin that explains the provisions of the program. That bulletin must be posted online and in the workplace so every employer will know the policy.

A report (Exhibit C) from the AARP states there are 350,000 unpaid caregivers in Nevada; 1 out of 4 workers who are age 25 or older provide some sort of unpaid caregiving. Sixty percent of family caregivers are employed full-time or part-time. Seven out of ten family caregivers report having to make work accommodations. This includes arriving late, leaving early, taking unpaid time off, reducing hours worked or quitting the job altogether. I have been a caregiver myself.

Another important impact of the measure is for our senior population. According to AARP and the National Conference of State Legislatures, 10,000 baby boomers turn 65 every day. These people have a 70 percent chance of needing some type of support or long-term care service in their remaining years. The bulk of the care is provided by unpaid family caregivers.

It has been found that family caregivers help seniors remain independent; therefore, in less need of money from State and federal programs.

GLEN FUCHS (AARP):

Bills like <u>A.B. 90</u> are trending in states that recognize and support the tremendous work of family caregivers. Since 2014, over 300 laws focused on family caregiving have been enacted in all 50 states.

Assemblywoman Bilbray-Axelrod has asked that I go through the provisions of A.B. 90 and give a summary of the bill. A dozen other states have similar laws on the books. New Mexico enacted a similar law earlier this month with bipartisan support.

Section 1 is broken down into 7 subsections. Subsection 1 requires a private employer, who provides employees with either paid or unpaid sick leave benefits, to allow employees to use that sick leave to care for the illness or the medical need of an immediate family member in addition to the employee's own illness.

This provision does not require employers to provide extra time off or extra benefits. This is expanding the acceptable usage for sick leave benefits that already exist. An employee's use of sick time to assist a family member would be subject to the same conditions as when the employee takes sick time for his or her own illness.

Subsection 2 allows an employer to limit the amount of the employee's sick leave that can be taken to assist a family member. It provides that the employee should be allowed to use at a minimum the amount of sick leave they accrue over six months for family medical purposes.

Subsection 3 allows the Labor Commissioner to prepare a bulletin of these requirements to be posted online and in a conspicuous spot at each workplace. My understanding is that this requirement is comparable to, or the same as, the requirements for posting information about other wage and hour laws in Nevada.

Subsection 4 provides that employees will still have access to other benefits, rights or remedies as may be provided by their employer or by law. This bill intends to be a floor and not a ceiling for employee sick leave rights. This part

mentions that this bill will not extend leave available under the Family and Medical Leave Act (FMLA). The manner in which employers provide and treat FMLA leave is not affected by this bill.

Subsection 5 prohibits an employer from retaliating against an employee for using existing leave as allowed by this bill.

Subsection 6 states that this bill does not apply to the extent that it is prohibited by federal law. For example, federal law exempts certain railway employees from certain state employment laws. Those employees would fall under the prohibition. Similar language was included in the Illinois and New Mexico bills that passed in recent years.

Subsection 7 defines the immediate family for whom an employee's sick leave may be taken: a child, foster child, spouse, domestic partner, sibling, parent, mother-in-law, father-in-law, grandchild, grandparent, step-parent or any person for whom the employee is the legal guardian.

Sections 2 and 3 of the bill outline the enforcement mechanism for this bill, including setting forth penalties for violation. It is my understanding that these sections put this bill on equal footing as other wage and employment laws in statute when it comes to enforcement.

BARRY GOLD (AARP):

Every day more than 350,000 Nevada residents care for parents, spouses or other loved ones and help them live independently at home and in their communities where they want to be. Being able to remain at home is often made possible by a family caregiver preventing premature institutionalization at a much higher cost to everyone.

These family caregivers take on responsibilities that can be overwhelming and challenging. The majority of caregivers struggle with full-time or part-time jobs. Older workers are a growing part of the workforce. Older women are most likely to have caregiving responsibilities. Women account for a significant portion of their family income. Their jobs and the stability of their income are more important than ever before.

Lost income and benefits amount to \$303,880 over an average caregiver's lifetime for family caregivers over the age of 50. This is the price for taking care of their family members.

This bill does not require, create or add any additional time off than what employers currently offer. This bill requires workers to use their earned accrued sick leave within company policy. This bill does not apply to employees who do not earn sick leave.

Opponents of the bill state that employees will abuse this. There will always be employees who abuse sick leave; however, we are talking about family caregivers who serve countless hours providing necessary and critical care to their loved ones. They are good people who may need help to keep their jobs in order to provide care. This bill enables family caregivers to be open and honest with their employers.

Caregivers, who have had this flexibility, state that these provisions make a difference to them in providing care and allowing them to be productive employees. Supervisors and employees state that sick leave is not abused by the people utilizing it.

Opponents of the bill state that the definition of the immediate family member is too broad. The language in this bill clearly limits this to: children, spouses, domestic partners, siblings, parents, mothers-in-law, fathers-in-law, grandchildren, grandparents, step-parents, legal guardians or foster family members of an employee. This is the reality of who immediate family members are.

Rosalynn Carter, who founded the Rosalynn Carter Institute for Caregiving has a famous quote, "There are only four kinds of people in the world, those who have been caregivers, those who are currently caregivers, those who will be caregivers and those who will need caregivers."

Caregiving is what defines humanity. It is who we are. We care for each other and our families.

Nevada caregivers deserve flexibility to care for their loved ones without sacrificing the financial security of their families. They should not worry about

losing their jobs because they have to take their mom to the doctor or to the hospital.

AARP supports this bill on behalf of our 348,000 AARP members across the State and for the 350,000 caregivers. We urge the Committee to consider this bill.

SENATOR HARDY:

Section 1, subsection 2 uses the word "accrues" in the phrase "accrues during a 6-month period". Normally sick leave is accrued with a "d". Section 1, subsection 5 uses accrued with a "d". Are you suggesting a prospective use of sick leave?

ASSEMBLYWOMAN BILBRAY-AXELROD:

No, we are not anticipating that sick leave can be taken before it has accrued. I am open to Committee Counsel explaining the reason the bill was drafted that way.

SENATOR HARDY:

Was it the intent to allow use of sick leave before it has accrued?

ASSEMBLYWOMAN BILBRAY-AXELROD:

No. That is not the intent of the bill.

SENATOR HARDY:

Section 1, subsection 7 lists immediate family members. Stepchildren are not included on the list of immediate family members. They should be added.

ASSEMBLYWOMAN BILBRAY-AXELROD:

That is an oversight.

SENATOR BROOKS:

There are other pieces of legislation that address these issues. A lot of sick leave policies from employers require proof or documentation for use of said sick leave. Does this bill prohibit the employer from requiring proof or documentation before paying an employee for sick leave used under the provisions of this bill? Have you thought through those mechanics? Are there examples from other states on how this issue is handled?

ASSEMBLYWOMAN BILBRAY-AXELROD:

We have considered those mechanics. The bill specifically states the policy the employer has in place extends to employees using sick leave for caregiving. As a result of FMLA, there are federal guidelines that facilitate employers regarding the Health Insurance Portability and Accountability Act (HIPAA). Employees providing caregiving can obtain a doctor's note under HIPAA.

SENATOR BROOKS:

If HIPAA prohibits sharing medical information of a family member for whom the employee is a caregiver, how does the employee prove to the employer who requires a reason for time off?

ASSEMBLYWOMAN BILBRAY-AXELROD:

There are federal guidelines under FMLA that specifically spell out to employers how to obtain that information. One guideline states that medical information needs to be kept separate from personnel information. These guidelines are easy and accessible to employers. A quick search on the internet can facilitate an employer on exactly what is allowed and what is not.

SENATOR SETTELMEYER:

I had the same discussion with Mr. Gold. I wish there was a way under section 1 to remove paid sick leave and replace it with paid time off. The concept of requiring a letter is ridiculous and employees cannot get around HIPAA restrictions.

If I take my 19-year-old daughter to the doctor, she would not release her medical information to me because she does not want other people to know what doctor she is visiting and why. How do I deal with that scenario? I think changing sick leave to paid time off addresses this problem.

ASSEMBLYWOMAN BILBRAY-AXELROD:

I agree. However, employers still provide and require the use of sick leave. At my last job, we used a payroll company that automatically pulled out vacation time and sick time separately.

There are federal guidelines under FMLA where an employee can get information on how to obtain proof for an employer for sick time requests. I spoke with Kathy England, an attorney in employment law, and she informed me that it is very easy to obtain that information for employers.

SENATOR SETTELMEYER:

Could you send that information to me? I am interested in how this bill affects small businesses. If an employee will be away from work for a month, does the employer have the right to let that employee go?

ASSEMBLYWOMAN BILBRAY-AXELROD:

If an employee was going to be gone for a month, the employee would need to utilize FMLA. This bill would allow that employee to use up to one week of accrued sick time.

SENATOR SETTELMEYER:

Section 1, subsection 1 states "if an employer provides paid or unpaid sick leave". Do the same rules apply here? If an employee takes one month of unpaid sick leave for himself or herself, the employer has the right to end his or her employment. If the employee takes one month of unpaid sick leave for caregiving reasons, the employer has the right to end his or her employment. Is that correct?

ASSEMBLYWOMAN BILBRAY-AXELROD:

That is correct. Allowing for a month of leave is a generous sick time policy.

SENATOR SETTELMEYER:

My employee can take off for a month and go wherever he wants.

Mr. Gold:

The bill limits the amount of paid or unpaid time an employee is allowed to take. An employee would not be able to take unlimited time off. I do not know of any employer who would approve unlimited time off. If an employee abuses the sick leave or takes too much, the employer has the right to terminate employment.

SENATOR CANNIZZARO:

This bill applies to any employer regardless of the size of the business. That includes businesses with fewer than 50 employees. Is that correct?

ASSEMBLYWOMAN BILBRAY-AXELROD:

That is correct. During this Session, there are other bills that specifically apply to businesses with 50 employees or more. <u>Assembly Bill 90</u> covers all businesses including those with fewer than 50 employees.

In previous testimony, we had a representative from the Reno and Sparks Chamber of Commerce who stated that 75 percent of businesses in Nevada have fewer than 50 employees. This bill would cover those businesses.

SENATOR CANNIZZARO:

From the perspective of this bill, this covers all employees. My concern is that there have been a lot of comparisons to FMLA, but FMLA only applies to employers that have 50 employees or more. How do you address the needs or restrictions applying to small businesses that fall under the minimum requirement for FMLA?

ASSEMBLYWOMAN BILBRAY-AXELROD:

I am going to refer this question to Mr. Fuchs.

Mr. Fuchs:

With respect to those employers who do not meet the minimum number of employees to abide by FMLA, as you mentioned 40 percent of workers are ineligible for coverage under federal FMLA. This bill opens the availability for employees of small businesses to use some of their paid or unpaid sick time to care for their loved one. Without this bill, that would not be the case. This bill takes FMLA protections and expands them to these smaller employers.

SENATOR CANNIZZARO:

In response to several questions from Committee members, the presenters answered that employers follow guidelines under FMLA. But if FMLA does not apply to these smaller businesses, how does that work?

There are no requirements in the language of this bill that address how employees provide documentation or how they get around HIPAA. How are employers supposed to keep track of that? How do those restrictions apply to those employers who are covered under this bill but are not covered under FMLA?

I understand that FMLA is not expanded by this bill.

Mr. Fuchs:

We used FMLA as an example to show that HIPAA by itself is not going to be an impediment because employers are already doing similar things under FMLA. Granted these are larger employers who have to follow the provisions under

FMLA, but they are finding ways through the proper authorization forms to comply with HIPAA. That is why FMLA was used as an example.

There is nothing in HIPAA that would prevent a family member for whom a sick day is taken from allowing a doctor's note to be provided to an employer to verify the employee's time off. It would be an extra step. An employer does not have to require this, but if they do, the employees will have to understand that this kind of documentation is going to be required.

If an employee takes FMLA leave to care for a family member, they need to submit a medical certification to the employer that includes health information for that family member. As part of that process, the ill family member authorizes their healthcare provider to release the necessary information.

The process would be similar here. You are correct; it would not be under the exact FMLA standards, but it would be a similar process where the ill family member authorizes their provider to allow that doctor's note or required proof to be given.

SENATOR CANNIZZARO:

My concern is over the lack of guidelines in this bill for those employers who do not fall under the FMLA requirements.

ASSEMBLYWOMAN BILBRAY-AXELROD:

I will follow up with the Committee if this aspect of the bill needs to be addressed. Our tendency when working on policy is to leave the language broad to make it easy for employers.

CHAIR SPEARMAN:

Section 1, subsection 3 states "The Labor Commissioner shall prepare a bulletin which clearly sets forth an explanation of the provisions of this section". Perhaps the language can be added here to address the concerns Senator Cannizzaro raised.

ASSEMBLYWOMAN BILBRAY-AXELROD:

Yes, that is a good idea.

CHAIR SPEARMAN:

There is a proposed amendment (<u>Exhibit D</u>) from the Las Vegas Metro Chamber of Commerce (LVMCC). Has this proposed amendment been discussed with you?

ASSEMBLYWOMAN BILBRAY-AXELROD:

Yes, we worked with the LVMCC. Throughout the bill the term "sick time" is used. There was one section where the term "paid time off" was used. This amendment strikes paid time off and replaces it with sick time. This was done to avoid confusion. The proposed amendment is agreeable.

MARLENE LOCKARD (Nevada Women's Lobby):

We support A.B. 90. This is an important bill to accommodate employees who work for businesses with fewer than 50 employees.

BRYAN WACHTER (Retail Association of Nevada):

We support <u>A.B. 90</u>. This Committee was helpful in making the grand bargaining agreement on <u>Senate Bill (S.B.) 312</u>. This legislation moves the State into a modern era of paid time off. The benefit of that system was illustrated in the conversations the Committee had regarding medical records.

<u>SENATE BILL 312 (1st Reprint)</u>: Requires an employer in private employment to provide paid leave to employees under certain circumstances. (BDR 53-888)

The intent of the bill is to provide flexibility to employees to utilize a benefit that is already offered to them. By doing this, <u>S.B. 312</u> is a stepping stone toward a Nevada where employees have the option to have paid time off going forward.

KATIE RYAN (Director of Public Policy and Advocacy, Dignity Health St. Rose Dominican):

We support A.B. 90. We had questions regarding short-term disability and types of long-term sick leave. We were able to address our concerns with the bill sponsor. We offer a generous paid time off benefit to our employees. Because the majority of our employees are paid professional caregivers, they are frequently asked by their family members to provide caregiving.

BARBARA PAULSEN (Nevadans for the Common Good):
We support A.B. 90. I will read from a prepared statement (Exhibit E).

MICHAEL HACKETT (Nevada Public Health Association): We support A.B. 90.

MARY LIVERATTI:

I support A.B. 90. I will read a prepared statement (Exhibit F).

NICK TSCHEEKAR (Community Foundation of Western Nevada):

We support $\underline{A.B. 90}$. I will read a prepared statement ($\underline{\text{Exhibit G}}$). With our initiative, we have examined the needs affecting the many family caregivers in our community.

We examined the impact of caregiving on the workforce and created the Caregiver Employee Toolkit and the Washoe Caregivers: Your Guidebook to the Basics of Beginning Care (Exhibit H and Exhibit I) that outline the reasons and practices that businesses and communities implemented to help caregivers. Our main idea is that supporting caregivers is good business. (Exhibit H and Exhibit I are copyrighted materials. Originals are available upon request of the Research Library.)

ANN SILVER (Reno and Sparks Chamber of Commerce): We oppose A.B. 90. I will read a prepared statement (Exhibit J).

RANDI THOMPSON (National Federation of Independent Business): We oppose A.B. 90.

AMBER STIDHAM (Henderson Chamber of Commerce): We oppose A.B. 90. I will read a prepared statement (Exhibit K).

MISTY GRIMMER (Nevada Resort Association):

We are neutral toward <u>A.B. 90</u>. We worked with the bill sponsor on this bill. Our members are large employers. They will be covered under the provisions in <u>S.B. 312</u>. Our concerns are with having sick leave in one portion of statute and paid time off in a different portion of statute. This will create confusion for employers and the Labor Commissioner. Since <u>S.B. 312</u> puts a paid time off policy in place, we feel that bill covers the issues A.B. 90 seeks to address.

HOMA WOODRUM (Aging and Disabilities Services Division, Department of Health and Human Services):

We are neutral toward A.B. 90. The importance of unpaid family caregiving to the people of Nevada cannot be overstated. The Department of Health and Human Services, Aging and Disabilities Services Division guiding principles include those that emphasize the agency and independence of individuals who have disabilities, as well as those who are seniors.

We all benefit when those who support them are in turn supported with the ability to use sick leave for caregiving needs.

CHAIR SPEARMAN:

There are several references to $\underline{S.B.\ 312}$. Would the sponsors of $\underline{A.B.\ 90}$ be open to working with the sponsors of S.B. 312?

ASSEMBLYWOMAN BILBRAY-AXELROD:

My concern is in regard to employees who work for businesses who are not covered under <u>S.B. 312</u>. I stated earlier that 75 percent of Nevada businesses have less than 50 employees. <u>Senate Bill 312</u> does not cover businesses with less than 50 employees.

Paid time off is gaining popularity. As a State, we are not there yet in regard to making all time off benefits paid time off.

Mr. Gold:

There is a misconception about who <u>S.B. 312</u> will cover. It has been stated that most large businesses will be covered by <u>S.B. 312</u>. This is not true, because the amended version of <u>S.B. 312</u> clearly states that the bill does not apply to any businesses with over 50 employees that already offer 40 hours of paid leave or more.

I do not have data on the issue; however, I would speculate that many businesses with over 50 employees already offer 40 hours of paid leave or more. Senate Bill 312 does not apply to them.

One member of the opposition stated that they thought <u>A.B. 90</u> would apply a mandate on businesses with fewer than 50 employees. There is no such mandate in <u>A.B. 90</u>. This bill does not require businesses to offer paid leave or sick leave. This bill applies to businesses that already offer those benefits.

ASSEMBLYWOMAN BILBRAY-AXELROD:

There is no mandate for employees to provide documentation when they use sick leave. It is up to employers to decide whether to require documentation from their employees.

CHAIR SPEARMAN:

We will close the hearing on A.B. 90. We will open the hearing on A.B. 181.

ASSEMBLY BILL 181 (1st Reprint): Revises provisions governing employment attendance practices. (BDR 53-833)

ASSEMBLYMAN ALEXANDER ASSEFA (Assembly District No. 42):

I am presenting <u>A.B. 181</u>. This bill revises provisions governing employment attendance practices. The intent of the bill is to increase the safety of employees and citizens. Requiring employees to report to work when they are sick places workers and the public in danger.

With today's technology, there are many ways to communicate. However, we still have employers who require employees to show up to work to demonstrate they are sick.

I proposed this bill in memory of Thomas who died in an accident after he was required to physically report to work to prove that he needed to stay home. After Thomas physically reported to work, he was granted the day off. On his way home, his medication took effect. He lost control of his vehicle and crossed into oncoming traffic and crashed. He suffered critical injuries and was transported to the University Medical Center of Southern Nevada.

Other people who were involved in that accident sustained serious injuries. It was a major accident that shook the entire community. The incident remains engraved in our memory. Thomas was in a coma for six months before he passed away. He left behind his family and his newlywed wife. He was 30 years old when he died.

I shared Thomas' story to demonstrate how problematic this issue is. This is not the only incident of its kind. If a person reports being sick or injured, they should not be physically required to appear before their employer to demonstrate their illness. Not every sickness, illness or injury is visible to a manager or supervisor acting like a doctor.

This bill prohibits an employer from requiring an employee to be physically present at his or her place of work in order to notify the employer of his or her sickness. The provisions of this bill allow an employer to require an employee to notify them of an illness or inability to report to work. However, that method of notification cannot include a physical appearance by the employee at the workplace.

The Labor Commissioner may impose a fine of no more than \$5,000 to any employer who violates the provisions of this bill. The Labor Commissioner may recover any cost related to the proceedings of such violations to include investigative costs and attorney fees.

GREG ESPOSITO (Nevada State Pipe Trades): We support A.B. 181.

PAUL MORADKHAN (Las Vegas Metro Chamber of Commerce):

We support A.B. 181. Employee safety is important. This bill is a good balance between employee health needs while preserving the right for employers to have certain documentation when an employee calls out sick.

MENDY ELLIOTT (Reno and Sparks Chamber of Commerce): We support A.B. 181. The impact of this bill will be mighty.

CHRISTINE SAUNDERS (Progressive Leadership Alliance of Nevada): We support A.B. 181.

DRAKE RIDGE (Las Vegas City Employees Association): We support A.B. 181.

Mr. Wachter:

We support A.B. 181.

Ms. Thompson:

We support A.B. 181.

ASSEMBLYMAN ASSEFA:

Please support A.B. 181.

CHAIR SPEARMAN:

We will close the hearing on A.B. 181 and open the hearing on A.B. 361.

ASSEMBLY BILL 361: Revises provisions relating to the practice of medicine. (BDR 54-839)

ASSEMBLYWOMAN MAGGIE CARLTON (Assembly District No. 14):

I am here to present A.B. 361. This bill places into statute the enforcement mechanism for S.B. No. 172 of the 77th Legislative Session. We have discussed access to health care in many of the conversations with the Committee.

Medical students stay in Nevada if they complete their residencies in our State. This increases our access to medical care. If those students could perform their rotations in the State for their third and fourth years, they are more likely to stay here for their residencies.

This bill addresses the third and fourth year rotations. In the original bill, S.B. No. 172 of the 77th Legislative Session, there are no means to implement penalties as a way to enforce the provisions. Some people can be motivated with a "carrot", some people need a "stick". This is the stick when it comes to enforcement.

SHELLEY BERKLEY (Chief Executive Officer and Senior Provost, Touro University Nevada):

I support <u>A.B. 361</u>. This bill adds teeth to legislation that was passed in 2015. The original bill was passed to ensure there would be an adequate number of rotations available for Nevada medical students in their third and fourth years of medical school.

The law prohibits doctors in Nevada from providing rotations to foreign students from unaccredited offshore medical schools. The State has a critical shortage of physicians. The Governor and the Legislature worked hard to remedy this situation by investing substantial resources into two medical schools in the State. This created a pipeline for future doctors who will train and practice in Nevada.

Touro University Nevada (TUN) has recently expanded our medical school program from 135 students to 181 students. Roseman University of Health

Sciences (RUHS) is preparing to open its medical school in the next few years. In addition to investing in medical schools, the Legislature created funding for graduate medical education (GME), which is a residency program to complete the medical education cycle.

Seventy percent of doctors set up their practice in the communities where they complete their residencies. Recognizing that, the Legislature has funded GME to train and keep future doctors in Nevada. Third and fourth year medical students are out in the field working with doctors to get the training they need to complete their studies.

If local doctors are training foreign students from unaccredited, offshore medical schools, they are not training Nevada medical students. After four years of monitoring this law, we have learned that some Nevada doctors are offering rotations to foreign students from unaccredited, offshore medical schools. We believe that most of those doctors do not know that there is a law that prohibits this.

Our intent with <u>A.B. 361</u> is to educate our doctors that they may not provide rotations to foreign students from unaccredited, offshore medical schools. This bill is not intended to punish doctors for engaging in these practices but to educate and encourage them to train third and fourth year medical students attending Nevada medical schools.

The University of Nevada, Reno (UNR) has over 60 medical students in each class. The University of Nevada, Las Vegas (UNLV) has 60 medical students. Touro University Nevada has 181 medical students and RUHS will have medical students in the near future. We have an ample number of medical students enrolled in Nevada medical schools. We must have the rotations necessary to train the third and fourth year students to prepare them for their residencies.

As Assemblywoman Carlton stated, we tried the carrot and now we will try the stick. We urge you to pass this bill to ensure that students attending medical schools in Nevada have an opportunity to train with Nevada doctors.

Submitted to the Committee are letters of support ($\underbrace{\text{Exhibit L}}$ and $\underbrace{\text{Exhibit M}}$) from RUHS and UNLV for the passage of this bill.

SENATOR HARDY:

I need to disclose that I have been appointed Associate Dean for Clinical Education at TUN.

SENATOR SEEVERS GANSERT:

Are the physicians who are allowing foreign students from unaccredited, offshore medical schools well-known? Have they been told they are not supposed to be doing that? Is there a warning or a process to make sure that they are aware? The penalty is pretty stiff.

Ms. Berkley:

No. We do not warn doctors. We do not learn about these physicians until they are reported to us. By that time, it is usually too late to do anything about it. The reason these doctors are taking foreign students is because they are making a lot of money.

SENATOR SEEVERS GANSERT:

They are being paid to take foreign medical students? Does UNR, UNLV or TUN pay physicians who participate in the school programs?

Ms. Berkely:

The Associate Vice President might be able to answer that. When Caribbean unaccredited, medical schools contact a doctor and offer to pay the doctor \$10,000 to accept this student from their medical schools, it is doing a disservice to our medical students. These foreign students have no accreditation, no ties to Nevada, no involvement with our State and the likelihood of them coming back to practice here is slim to none.

The State is investing a substantial amount of money in medical schools and GME. This is an important component of medical education, and we are underutilizing Nevada doctors if those doctors are taking foreign students.

SENATOR SEEVERS GANSERT:

Are foreign students taking slots away from Nevada students?

Ms. Berkley:

Yes.

SENATOR DONDERO LOOP:

Doctors obtain their certifications from the time they start medical school until the time they finish. Do we have a seamless way for doctors to obtain their certifications? Do we need to change anything? Do we need to have third year rotations?

We have processes in place that have been perceived to be more difficult. I personally think when somebody is working on me medically, they should have the most stringent training possible. In your opinion, do we need to keep those processes or do we need to change them?

Ms. Berkely:

In regard to medical school, Nevada has improved in the last few years by creating schools. Touro University Nevada went from accepting 135 students to 181 students in the last year. We had 5,100 applications for 135 student slots. For that reason, we went to our accrediting body and asked permission to increase the number of applicants. I do not think the number of medical students is the issue anymore.

The Legislature is essential to ensuring that doctors stay here. Seventy percent of medical students practice in the communities where they complete their residencies. The more residencies we have, the more doctors will reside in the State. The missing component is ensuring all of our third and fourth year medical students have enough doctors to mentor them as preceptors. Medical students at UNLV will begin their third year in 2019. This is an acute problem for them.

We are experiencing challenges at TUN. It is disconcerting when students come back to the school stating that their preceptor is also mentoring three other students from a no name Caribbean school. That is when we realized there are no teeth to enforce the law. There are no ways to educate doctors that they should not do that. We would like to see both those issues addressed in legislation.

SENATOR SETTELMEYER:

I want to make sure I see a trained professional when I see a doctor. If your school is having a problem finding places to send people, come out to the rural counties; we will take all the medical students. Some places will accept a warm body.

In regard to your statement about having enough students in medical school, I do not think we do. I think we need a lot more.

Ms. Berkley:

I agree. However, the State has come a long way. The Legislature recognized the medical shortage and did everything possible to have an adequate pipeline of future doctors to serve the people in Nevada.

CHAIR SPEARMAN:

Section 1, subsection 3 states "A physician who violates the provisions of this section is subject to a civil penalty of not more than \$10,000 for each violation". Is that each separate violation or, for example, when someone has violated it one time with four different individuals?

ASSEMBLYWOMAN CARLTON:

That question has not been brought up before. I would have to clarify that issue with Legal Counsel. We do not intend these penalties to be onerous. In 2013, we tried to address this issue by educating physicians. Now we believe there are people out there who have been educated and are making the choice to break the law because they can make more money that way.

We have to weigh the heft of the penalty versus the money that can be made. I do not want to over-penalize anyone. If they continually violate the law, they should be held accountable for their actions.

Ms. Berkley:

I interpret this language to mean it is for each violation. I will defer to the Legislative Counsel Bureau (LCB) to make the determination. The bill states each violation would be for each student they took. I do not envision that someone would be fined \$10,000 for a first violation. If a doctor continues to violate, the \$10,000 penalty would be appropriate.

ASSEMBLYWOMAN CARLTON:

Whether it is one violation or three violations for a doctor with three students, the Committee decides how we define a violation. That is something that warrants more discussion. We need to understand the definition of a violation. I interpret the bill the same way as Ms. Berkley. If the Committee would like more clarity as to defining a violation, we are willing to have that conversation.

SENATOR SETTELMEYER:

The bill states that an action brought under this section must be brought no later than two years from the date after the last event constituting an alleged violation. I wish this language was going forward. If the bill was signed and put in effect July 1, 2019, one could not fine violators for what they did in June 2019.

What is an occurrence? I suggest defining the violation per occurrence whether it is per year, per week or the duration of time the student works with the doctor. It should be viewed differently for someone who violated the law for three years. That is something for the sponsor of the bill to think about.

ASSEMBLYWOMAN CARLTON:

When a doctor takes someone from an unaccredited offshore medical school, they have violated the law. Whether they violated it on day 1, day 157 or into the second year, the first day they accept that student is the date in question. How long they continue to violate the law is what is considered when evaluating the severity of the penalty.

By educating doctors, they would rectify the issue. There is no requirement to penalize the doctors. There is no need to penalize doctors if there are means to instruct them on coherence.

SENATOR SETTELMEYER:

If a doctor makes \$10,000 per year to take this student and the student stays for three years, then you have given the doctors an incentive. If the language states per occurrence and every year is a new occurrence, then they can be fined \$30,000. That is my suggestion.

Ms. Berkley:

Let me share with you a story about the genesis of this legislation. In addition to being the Chief Executive Officer (CEO) and Senior Provost of TUN, I am also the CEO and Senior Provost of Touro University California (TUC) in northern California.

When I first got to TUC, we had a partnership with a local hospital that accepted our students over a number of years. The hospital loved our students; we had a relationship with them. A Caribbean medical school came in and offered the hospital \$10 million to take their students instead of ours.

We received a letter from the CEO of the hospital telling us how much they enjoyed our relationship and how outstanding our students were, but from then on they would no longer be taking our students for rotations at their facilities. When that occurred, it got my ire up. I recognized how destructive this ability to pay untold amounts of money was to creating homegrown future doctors in the state of California.

We started to experience similar rejections from facilities in Nevada. Rotations are exactly how they sound; students rotate. Six weeks they are in cardiac care, six weeks they are in nephrology and they continue to rotate throughout the facility. The rotations are not long. In rotations, students get their hands-on training.

If doctors and hospitals in the State are taking foreign students from unaccredited, offshore medical schools, they are hampering the State's ability to train a medical workforce and retain future doctors. We are training a lot of future doctors to go start practices in some other state.

CHAIR SPEARMAN:

The bill amends *Nevada Revised Statutes* (NRS) 630 but does not amend the provisions of NRS 633. Did you intend to exclude doctors of osteopathy (DO)?

ASSEMBLYWOMAN CARLTON:

We did not intend to exclude them. That was an oversight. Schools of osteopathic medicine are included in section 1, subsection 1, paragraph (b) where it refers to NRS 633.

BRYAN FERNLEY (Committee Counsel):

Currently under the bill, the penalties are for physicians under NRS 630 who allow a person to perform these activities under their supervision. There are no penalties for a DO who allow these people to participate in these activities. There is a similar provision in NRS 633. We would need to duplicate these provisions in NRS 633 to cover a DO.

Ms. Berkley:

We would be in favor of that change.

CHAIR SPEARMAN:

There seems to be a lack of congruency. We need people in Nevada. We need these questionable and illegal practices to end.

On the other end of the spectrum, those who are licensed and coming to the State appear to have a lot of barriers. We have students coming from unaccredited schools, and we have licensed doctors who have done what they needed to do and cannot get licensed in Nevada.

Ms. Berkley:

My husband is a nephrologist in Las Vegas. There are 33 nephrologists in his practice and patients wait 3 to 6 months to see any one of them. They are constantly recruiting. Once people relocate here, they cannot practice for months on end. That would be something I would recommend the Legislature look into in order to reduce those barriers. The State needs primary care physicians in addition to other specialties with the exception of cosmetic surgery.

ASSEMBLYWOMAN CARLTON:

I remember sitting in this room having these same conversations with our boards in 1999. This has been an issue that the State has dealt with for a long time. There is a fine line between access, allowing folks to come in and protecting the public. I believe we have made strides but there are more strides to be made. We will be able to address some of those issues.

We discussed solutions for the last 20 years. The best has been that we have to grow our own workforce. We need Nevadans to take these jobs. Our kids should be educated and trained for these jobs so they remain tied to the community. Our elementary schools, middle schools, high schools and colleges should provide our medical professionals. To me, that is how we solve the problem.

Ms. Berkley:

In regard to GME, it is not only the number of GME and residencies, it is also the type. If we want more nephrologists, we need to have nephrology residencies. We had 135 students at TUN. Valley Hospital Medical Center had 30 openings for our residency programs. If 30 students match the maximum number of residencies, 105 of my graduating future doctors have to leave town in order to complete their required residencies.

If 70 percent of students practice in the communities where they complete their residencies, those students are not coming back to Nevada. The number of residencies is important. Nevada is behind; we are 49th in the U.S. when it comes to offering residency programs.

In regard to the type of residency programs that we offer, our greatest shortage in this State is for primary care physicians and family physicians. If students want to be cardiologists or nephrologists, they have to go out of state to get their training because Nevada does not offer those residency programs. I am hoping that we will remedy that situation soon.

DAN MUSGROVE (Valley Health Systems):

We support A.B. 361. I spoke with a colleague who pointed out the issue of patient safety. There is no guarantee that the folks trained elsewhere have the same level of skill as our own medical students. We do not have a guarantee they are competent when they work with a physician. That is a great concern. This bill is important.

What if something happens to a patient treated by a foreign student? Who do we seek damages from after a loss? We do not have the ability to prosecute a foreign medical school.

CHAIR SPEARMAN:

If people continue to break the law regardless of the fine, what more can we do to make sure the patient is protected and that there are consequences aside from the fine?

ASSEMBLYWOMAN CARLTON:

I do not know what arrangements the doctor and the resident have. I presume that the foreign student works under the medical malpractice of the supervising physician. I do not know if that is true.

If we do not let them come into the Country, we will not have this problem. The goal is to make sure the doctors abide by the law we passed six years ago.

CHAIR SPEARMAN:

I suggest that the sponsor discuss the bill with the Legal Counsel to make sure all the remedies that would act as a disincentive for this type of activity are in

statute. We will close the hearing on $\underline{A.B.\ 361}$ and open the hearing on S.B. 502.

SENATE BILL 502: Revises certain licensing fees for social workers. (BDR 54-1162)

SENATOR JOYCE WOODHOUSE (Senatorial District No. 5):

I am presenting <u>S.B. 502</u>. The bill before you concerns the Board of Examiners for Social Workers (BESW). The BESW was established in 1987 to protect public health, safety and welfare by ensuring only competent people practice social work in Nevada.

The BESW is responsible for the administration, development and enactment of regulations and laws related to the practice of social work. The BESW regulates social workers, clinical social workers and independent social workers.

The total number of licensees have steadily increased in the State. In 2009, there were 2,311 licensed social workers, and in 2017, there were 2,900 licensees. The BESW is supported by applicant fees, licensee fees and renewal fees.

The budget for the BESW is based on annual fees. It does not receive funds from the State General Fund. The Legislature sets limits on the fees the BESW may charge and collect. Since 1995, the BESW has not received approval by the Legislature to increase the maximum fees it may charge applicants or licensees.

It has taken the BESW 30 years to reach the maximum fees allowed under NRS 641B.300. Historically, the BESW has not implemented the maximum fee amounts it was authorized to charge applicants or licensees. For example, changes in 1995 set the maximum fee to \$200 that the BESW could charge for restoring an expired license. In 1998, the BESW set this fee at \$150 and did not implement a change in the fee until 2014 when the fee increased to \$200. It took 19 years after the maximum was set in order for the maximum to be reached.

During the recent Interim, the Sunset Subcommittee of the Legislative Commission conducted a review of the BESW. During that hearing, the BESW noted that if its statutory application fee and initial licensure fee for licensed

clinical social workers were increased, the additional revenue would provide computer programming, improved office efficiencies and build its reserve funds.

KAREN OPPENLANDER, LISW (Executive Director, Board of Examiners for Social Workers):

I joined the organization on April 2, 2018 at a time when the BESW was improving and streamlining its processes. In 2018, we began accepting credit card payments in addition to the checks and money orders we accept.

Through negotiated agreements, our social workers could choose to begin their continuing education units online or attend classes in person.

In early 2019, we began to minimize the procedural burdens of licensing by implementing a 24/7 online renewal system with multiple features to assist licensees. In addition, the public is able to utilize real-time license verification. The new fee ceiling will help the BESW to meet current and future expectations, as well as to serve licensees and the public for many years to come.

We are a regulatory agency that continues to grow. On the back of our brochure (<u>Exhibit N</u>), you can see the trend lines for the past ten years. During 2018, we hit a milestone of 3,000 licensees. We reported 3,128 licensees by March 2019.

There are many things that go hand-in-hand with these upward trends in social work licenses. More potential licensees are asking us questions about the application process. We had more renewals. We had additional continuing education unit approvals. We had additional site approvals for the uptick in clinical social work interns; more interns means more supervisors who need specific supervisory training.

We issued more exam approvals. We verified more background checks. We performed additional public protection queries and allegations. We had additional compliance unit cases. We had ongoing legislative requests and more.

Due to our need to generate sustainable revenue to serve Nevadans, the BESW is here to work with you to update NRS 641B in order to raise fee ceilings. A fee ceiling is a government imposed limit on how high a price can be charged for a social work license. Raising the fee ceiling is different than raising fees.

Fee ceilings are set to protect licensees from conditions that can make licenses too expensive.

I have submitted to the Committee a document (<u>Exhibit O</u>) with a history of fee ceilings. The first section on the document shows fee ceilings legislated in NRS. The legislative fee ceilings were changed in 1987, 1993 and 1995. It took us several decades to incrementally utilize the established fee ceilings. The middle section of the document shows the incremental changes to the fees.

As we establish new fee ceilings, we want to involve as many people as possible to be part of the conversations and the processes. We reached out to other groups in order to come to an understanding about the distinction between fee caps and fee increases.

We reached out to other Nevada behavior boards and social work boards via the Association of Social Work Boards. We had meetings with the UNR School of Social Work and conversations with UNLV School of Social Work. There were meetings with student groups focused on social work policy, communications with licensees in 2018 and 2019 and responses to phone calls and emails. We made an attempt to reach the Nevada Association of Social Workers that chose not to discuss the specifics of this bill.

In general, there are positive responses to the changes and future changes the BESW is implementing. There are numerous questions and requests to participate in the decision-making process when the BESW has the ceilings approved and when it decides to raise fees.

The BESW intends to continue to follow the *Administrative Rulemaking Manual* (ARM) from the Office of the Attorney General after this Legislature establishes new fee ceilings. Many ideas have come forth that we think would be good to bring to the BESW for additional discussion. Some of the ideas are unsuitable to put into statute.

In this way, the BESW would continue to be inclusive and welcoming to everyone. Nevada's established regulatory process helps boards and the public to be able to work closely together by being open during board meetings, board retreats, public workshops, in person and by communicating with the BESW via letter, email, Youtube and other social media so that all voices can be heard and considered.

When the BESW makes a determination that it must raise license fees, the change process will involve soliciting feedback from our licensees several times in the process.

VIKKI ERICKSON (Board of Examiners for Social Workers):

We are here to ask for an increase in our fee ceilings, which last occurred over 25 years ago. Last summer, we were given specific guidelines and goals to complete within two years by the Sunset Subcommittee or face consequences.

After the BESW reviewed details of the guidelines and goals, we decided how we would implement these changes, as well as what initial costs, continuing expenses and fee ceiling increases we need to accomplish this.

SENATOR HARDY:

Will increasing these fees under a new ceiling be enough to get you to a point where you can have online applications and other online conveniences for everybody?

Ms. Oppenlander:

Yes.

SENATOR SETTELMEYER:

I sat on the Sunset Subcommittee. We discussed if raising the fee ceiling was commensurate with surrounding states. Do you know if California is subsidizing their equivalent of the BESW with its general fund? The fee in California is \$100, Oregon it is \$50 to \$100, Utah it is \$85 to \$120 and Arizona it is \$250. Are we pricing ourselves out? Are we encouraging social workers to go to other states?

Ms. Oppenlander:

California social workers are under a behavior health umbrella board. I do not know if they are pulling from a general fund. The umbrella board encompasses many behavior health professions.

SENATOR SETTELMEYER:

Are they self-supporting?

Ms. Opennlander:

No.

SENATOR SETTEL MEYER:

Do fees include fingerprinting? Some states require an ethics exam. What all is included with your fees and what is added on?

Ms. Oppenlander:

Background checks are paid directly to the Department of Public Safety (DPS) via check or money order for \$36.75. We accept money orders and send them to DPS at no additional charge.

This history of fee ceilings document shows an initial issuance of license and application fees which would not come up again. Renewal fees are annual. We subscribe to the Association of Social Work Boards for the initial exam. Any social worker in any state who has passed the aforementioned exam can come to Nevada without having to take that exam again.

SENATOR SETTELMEYER:

Our State does not include the exam with the fee. In looking at other states, I see California charges \$200. The first \$100 is for the license and the other \$100 for an ethics exam.

CHAIR SPEARMAN:

I am at your website. I see forms available for download. The bill references the words "up to". Does that mean that fees will not be increased immediately?

Ms. Oppenlander:

That is correct. Increases would be "up to". We have historically increased fees gradually since 1987. It is a board's decision to jump to the top number. However, that has not been the case for the BESW since it started in 1987. We have changed our fees in \$25 increments.

CHAIR SPEARMAN:

I have a proposed amendment (<u>Exhibit P</u>) that would cap the annual increase at 25 percent of the limit per fiscal year and states no increase would be allowed to exceed the limits of each category outlined in the bill. Are you aware of this proposed amendment? Where did this proposed amendment come from? Have you discussed this proposed amendment with the bill sponsors?

SENATOR WOODHOUSE:

The proposed amendment (<u>Exhibit Q</u>) we have discussed so far is from Capitol Partners on behalf of the BESW.

ALLISON STERSIC:

I submitted the proposed amendment that you read. We did not discuss the amendment with the bill sponsors.

CHAIR SPEARMAN:

If you have not discussed your amendments with the bill sponsors, you may speak with the bill sponsors while the Committee hears testimony in support. I do not allow amendments to be introduced when the amendments have not been discussed with the bill sponsors.

JOHN PIRO (Clark County Public Defender's Office):

We oppose <u>S.B. 502</u>. These are permissive fees. Some of the fee increases are alarming. Social workers are the unsung heroes in the helping profession. Often, when this legislative body passes legislation deemed to help citizens in our community, it is social workers who perform those duties.

In my office, we employ several social workers. I am not a good attorney without my social worker colleagues. These professionals work long hours with little pay. Starting wages for social workers is in the low \$30,000 range. If a social worker takes a position in a nonprofit, they earn less than that.

We are going to tack on these fees to people graduating college with significant debt. This is not a job where you graduate college and make a lot of money to cover student loans. Social workers take these jobs because they are committed to helping people. It is not a job where one receives recognition for the work they do. Because these jobs are emotionally and mentally taxing, social workers take the jobs that the rest of us appreciate but do not want to do ourselves.

This bill will hurt the people in the Department of Health and Human Services, Division of Child and Family Services (DCFS). It will hurt people in my office. Our office pays the renewal fees for our social workers; DCFS does not. Most other organizations throughout the State do not pay for renewal fees. These are the concerns we have.

SENATOR DONDERO LOOP:

In your opposition, you reference fees. Educators graduate college and are required to pay fees similar to social workers. Nobody pays these fees for educators. Educators do not get paid any more than social workers while paying the same type of fees. An application for a teacher is \$180 which does not include fingerprinting or other endorsements needed. I would suggest a compromise.

Mr. Piro:

I am in favor of a compromise.

Ms. Stersic:

I oppose <u>S.B. 502</u>. I am a Bachelor of Social Work (BSW) student at UNR. I am the President of the club, Fused, which is comprised of undergraduate social work students. My classmates and I have proposed <u>Exhibit P</u> that would cap the annual fee increases to not exceeding 25 percent of the current cost per year.

In preparation for this hearing, I wanted to learn more about the BESW. I reviewed their past meeting minutes. On February 8, 2019, Sandy Lowery, Deputy Director, stated the BESW approved increasing application fees from \$40 to \$100. The BESW has approved increasing the licensed clinical social worker initial application fee to \$150 to mirror the renewal fee. The minutes stated licensees were notified of those two changes and there was little adverse reaction.

My understanding regarding raising fees according to the ARM is that the BESW has to post a notice of intent after the agency receives the approved or revised text of the proposed regulations from the LCB. The manual specifically states that the agency solicit general comment from the public and from businesses that would be affected by the proposed regulation.

I have been majoring in social work for the last two years at UNR. My classmates and I who would be directly affected by the proposed regulations have not been notified or included in the discussion. Our conceptual amendment would allow the BESW to raise their fee ceiling while protecting the interested parties by ensuring incremental increases of the fees. I urge the Committee to support our proposed amendment or to oppose the bill entirely.

DAVID BOIRE:

I oppose <u>S.B. 502</u>. I am a social work student who will be graduating in a few weeks when I will be applying for licensure. This is an issue that affects me and my fellow social worker alumni. Many students who are recent graduates are burdened with college debt and need to spend money to obtain their licensure at a time in their careers when they have the least amount of disposable income possible. Many of us struggle to pay owed fees to our colleges to receive our diplomas.

I have concerns about the amount of the fee increases, as well as the rate at which these increases can be administered. This creates an unfair system on newer applicants, which disproportionately charges the newest and lowest paid members the most.

Social work is a profession where workers enter the field knowing the paid disparity of the job. These increases will be passed on to the very people who sacrifice so much in order to help others.

The State is requiring more social workers than ever. It is not the time to increase the price for those answering the call. This will encourage students to leave the State. This bill will make it harder for agencies to employ social workers to fill these vital roles. I support an increase in fees with a cap on the increase set at 25 percent.

KATE TAORMINA:

I oppose <u>S.B. 502</u>. I am a BSW student at UNR. Social workers are involved in everyone's lives. We hold your grandmother's hand as she transitions into a nursing home. We coach your children through suicidal thoughts and make sure your family needs are met. We do all this with heavy hearts and little financial reward.

As new graduates, we are financially burdened. Raising the initial application fee will increase the financial burden to becoming a licensed social worker. I ask the Committee to put yourselves in our shoes.

RICHARD WREN:

I oppose <u>S.B. 502</u>. I am a BSW student at UNR. I oppose the bill because there is a further need for the consideration of the additional licensing fees required

for licensure. The salaries are relatively low and raising the fees would increase financial burdens of social workers and aspiring social workers.

CHAIR SPEARMAN:

Proposed amendments need to be discussed with the sponsor of the bill prior to coming to the hearing. The increases are not automatic. Is that correct?

SENATOR WOODHOUSE:

That is correct. The increases are not automatic.

Ms. Erickson:

In my 15 years that I have been on the BESW, we have not had any fee increases. The increases are carefully considered against what we need to meet the needs that are necessary, as well as what was asked of us by the Sunset Subcommittee.

Ms. Oppenlander and Senator Woodhouse stated that we value the input of social workers in the community. We had other discussions in the past, including town hall meetings with the community where members of the public asked questions. I am a social worker. I am invested in the fee increase. It is not the plan to spike the fees to the ceiling.

CHAIR SPEARMAN:

When was the last time the BESW raised its fees?

Ms. Oppeni ander:

The history of fee ceiling form, <u>Exhibit O</u> shows the first fee increase and the caps. The last fee was increased in 2014 through a public process. The medium for communication is different today. We are open to hearing from the public via all forms of communications.

SENATOR WOODHOUSE:

I wanted to confirm the Committee received the proposed amendment from Capitol Partners on behalf of the BESW. Some of the numbers are the same as in the bill, but there are a number of fees where the maximum has been reduced.

The BESW reduced the fees from the original proposal. I ask interested parties to look at this proposed amendment to see that the fee caps are reasonable. It

is not our intent to increase fees immediately. The increases are carefully and consciously considered by the BESW. It is important for the BESW to have the means for online license applications and renewal fees.

CHAIR SPEARMAN:

We will close the hearing on $\underline{S.B.\ 502}$. With no public comment, we adjourn at 3:41 p.m.

	RESPECTFULLY SUBMITTED:
	Jennifer Richardson, Committee Secretary
APPROVED BY:	
Senator Pat Spearman, Chair	<u> </u>
DATE:	<u></u>

EXHIBIT SUMMARY							
Bill	Exhibit / # of pages		Witness / Entity	Description			
	Α	1		Agenda			
	В	6		Attendance Roster			
A.B. 90	С	1	Assemblywoman Shannon Bilbray-Axelrod	AARP Fact Sheet			
A.B. 90	D	1	Senator Pat Spearman	Proposed Amendment, Las Vegas Metro Chamber of Commerce			
A.B. 90	Е	1	Barbara Paulsen / Nevadans for the Common Good	Written Testimony			
A.B. 90	F	1	Mary Liveratti	Written Testimony			
A.B. 90	G	1	Nick Tscheekar / Community Foundation of Western Nevada	Written Testimony			
A.B. 90	Н	20	Nick Tscheekar / Community Foundation of Western Nevada	Caregiver Employee Toolkit			
A.B. 90	ı	36	Nick Tscheekar / Community Foundation of Western Nevada	Washoe Caregivers: Your Guidebook to the Basics of Beginning Care			
A.B. 90	J	2	Ann Silver / Reno and Sparks Chamber of Commerce	Written Testimony			
A.B. 90	K	1	Amber Stidham / Henderson Chamber of Commerce	Written Testimony			
A.B. 361	L	1	Shelley Berkley / Touro University Nevada	Letter of Support, Roseman University			
A.B. 361	М	1	Shelley Berkley / Touro University Nevada	Letter of Support, University of Nevada, Las Vegas, School of Medicine, Kate Martin			
S.B. 502	N	2	Karen Oppenlander / Board of Examiners for Social Workers	Brochure, State of Nevada Board of Social Work			

S.B. 502	0	1	Karen Oppenlander / Board of Examiners for Social Workers	History of Fee Ceilings
S.B. 502	Р	1	Senator Pat Spearman	Proposed Amendment, Allison Stersic
S.B. 502	Q	3	Senator Joyce Woodhouse	Proposed Amendment, Capitol Partners on Behalf of the Board of Examiners for Social Workers