

**MINUTES OF THE MEETING OF THE  
SENATE COMMITTEE ON FINANCE  
AND  
ASSEMBLY COMMITTEE ON WAYS AND MEANS  
SUBCOMMITTEES ON HUMAN SERVICES**

**Eightieth Session  
May 3, 2019**

The joint meeting of the Subcommittees on Human Services of the Senate Committee on Finance and the Assembly Committee on Ways and Means was called to order by Chair Moises Denis at 8:14 a.m. on Friday, May 3, 2019, in Room 3137 of the Legislative Building, Carson City, 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.

**SENATE SUBCOMMITTEE MEMBERS PRESENT:**

Senator Moises Denis, Chair  
Senator Joyce Woodhouse  
Senator Chris Brooks  
Senator James A. Settelmeyer  
Senator Ben Kieckhefer

**ASSEMBLY SUBCOMMITTEE MEMBERS PRESENT:**

Assemblywoman Teresa Benitez-Thompson, Chair  
Assemblywoman Maggie Carlton, Vice Chair  
Assemblyman Jason Frierson  
Assemblywoman Dina Neal  
Assemblywoman Ellen B. Spiegel  
Assemblywoman Robin L. Titus

**COMMITTEE MEMBERS ABSENT:**

Assemblyman John Hambrick (Excused)  
Assemblyman Tyrone Thompson (Excused)

**STAFF MEMBERS PRESENT:**

Alex Haartz, Principal Deputy Fiscal Analyst  
Cindy Jones, Assembly Fiscal Analyst

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Karen Hoppe, Senior Program Analyst  
Michael Keever, Committee Secretary  
Vicki Kemp, Committee Secretary

**OTHERS PRESENT:**

Richard Whitley, Director, Nevada Department of Health and Human Services

Julia Peek, Deputy Director, Programs, Department of Health and Human Services

CHAIR DENIS:

We will hear budget closings for the Department of Health and Human Services (DHHS) Director's Office.

KAREN HOPPE (Senior Program Analyst, Legislative Counsel Bureau, Fiscal Analyst Division):

There are nine budgets on the agenda for the DHHS Director's Office. During the February 8, 2019, hearing, 5 of the budgets were heard. Fiscal Division staff recommend to close the other four budgets.

The Grief Support Trust Account budget account (B/A) 101-3199 is described on page 3 of the Human Services Joint Subcommittee Closing List #6 ([Exhibit C](#)).

HEALTH AND HUMAN SERVICES

DHHS DIRECTOR'S OFFICE

HHS-DO - Grief Support Trust Account — Budget Page DHHS-DIRECTOR-11  
(Volume II)  
Budget Account 101-3199

Fiscal staff is responsible for developing closing recommendations for B/A 101-3199 budget. The Subcommittees have not previously reviewed this budget. There are no major closing issues.

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Fiscal staff recommends B/A 101-3199 be closed as recommended by the Governor with authority for Staff to make technical adjustments as necessary.

SENATOR KIECKHEFER:

Was this program approved two years ago? What is happening with the reserve?

MS. HOPPE:

The Grief Support Trust Account was approved in the 2017 Session. There has been no activity with the reserve. I am not aware if there is a reserve level.

SENATOR KIECKHEFER:

Bringing in revenue from the dedicated funding source of about \$60,000 a year with \$22,000 in expenditures results in \$140,000 reserve at the end of the biennium.

ASSEMBLYWOMAN CARLTON:

It can take time to develop and implement a program. Accountability and transparency must be ensured when developing a program and issuing grant funds. I would suggest we provide DHHS time to get the program up and running.

ASSEMBLYWOMAN BENITEZ-THOMPSON MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE B/A 101-3199 AS RECOMMENDED BY THE GOVERNOR WITH AUTHORITY FOR FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS AS NECESSARY.

SENATOR WOODHOUSE SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE.)

SENATE: THE MOTION CARRIED UNANIMOUSLY.

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MS. HOPPE:

The DHHS Administration B/A 101-3150 is described on page 5 of [Exhibit C](#). There is one major closing issue for Administration B/A 101-3150 discussed on page 6 of [Exhibit C](#). The issue is to reclassify an administrative assistant (AA) position to a management analyst (MA) position.

HHS-DO - Administration — Budget Page DHHS-DIRECTOR-12 (Volume II)  
Budget Account 101-3150

In response to recent audit findings in the grants management area, the Governor recommends reclassifying an AA position to a MA. The reclassification would increase the position's cost by \$49,646 over the 2019-2021 biennium.

Recent audit findings in the grants management area identified a need for additional program and fiscal monitoring of federal grants. The Legislative Auditor's May 2018 Performance Audit report found that the DHHS Director's Office needed to improve controls over grant awards and payments, coordinate awarding or fiscal monitoring activities with its various divisions and ensure grant award applications are consistently and properly completed.

The Director's Office currently has Fiscal staff who monitor the budget accounts but does not have a program fiscal position to maintain program grant reconciliations and ensure compliance with federal requirements. This reclassified position would be responsible for federal grant and corresponding State authority reconciliation functions for the DHHS Director's Office.

Additional duties would include participating in the preparation, monitoring and maintenance of the work units program and biennial budgets by estimating future expenditure levels based on historical data, making projections for future costs and providing justification for those projections. The position would be the primary liaison between the Director's Office programs, Grants Management Unit (GMU) and the Director's Office Fiscal Unit.

During the February 8, 2019, budget hearing, the Subcommittees inquired whether the position changes would address the concerns and issues raised by the Legislative auditor and whether the Division of Human Resources

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Management (DHRM) had approved the position reclassification. The Division testified that the budget as recommended by the Governor would address the audit findings and confirmed that the DHRM has approved the reclassification.

Do the Subcommittees wish to approve the Governor's recommendation to reclassify an existing AA position to a MA position to provide additional program and fiscal monitoring of federal grants within the Director's Office?

ASSEMBLYWOMAN BENITEZ-THOMPSON MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE B/A 101-3150 AS RECOMMENDED BY THE GOVERNOR TO RECLASSIFY AN EXISTING AA POSITION TO A MA POSITION TO PROVIDE ADDITIONAL PROGRAM AND FISCAL MONITORING OF FEDERAL GRANTS WITHIN THE DHHS DIRECTOR'S OFFICE.

SENATOR KIECKHEFER SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE.)

SENATE: THE MOTION CARRIED UNANIMOUSLY.

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MS. HOPPE:

The 5 other closing items described on pages 6 and 7 of [Exhibit C](#) appear reasonable. Fiscal staff recommends the other closing items be closed as recommended by the Governor and requests authority for Fiscal staff to make other technical adjustments as necessary

ASSEMBLYWOMAN BENITEZ-THOMPSON MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE OTHER CLOSING ITEMS IN B/A 101-3150 AS RECOMMENDED BY THE GOVERNOR WITH AUTHORITY FOR FISCAL STAFF TO MAKE OTHER TECHNICAL ADJUSTMENTS AS NECESSARY.

SENATOR WOODHOUSE SECONDED THE MOTION.

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ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE.)

SENATE: THE MOTION CARRIED UNANIMOUSLY.

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MS. HOPPE:

The DHHS Development Disabilities B/A 101-3154 begins on page 9 of [Exhibit C](#). Staff is responsible for developing closing recommendations for this budget. The Subcommittees have not previously reviewed this budget.

HHS-DO - Developmental Disabilities — Budget Page DHHS-DIRECTOR-22  
(Volume II)

Budget Account 101-3154

There are no major closing issues. There are two other closing items discussed on page 10 of [Exhibit C](#). Both other closing items appear reasonable to Staff.

Fiscal staff recommends B/A 101-3154 be closed as recommended by the Governor with authority for Staff to make technical adjustments as needed.

SENATOR WOODHOUSE MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE B/A 101-3154 AS RECOMMENDED BY THE GOVERNOR WITH AUTHORITY FOR FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS AS NEEDED.

ASSEMBLYWOMAN BENITEZ-THOMPSON SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE.)

SENATE: THE MOTION CARRIED UNANIMOUSLY.

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MS. HOPPE:

The DHHS GMU B/A 101-3195 begins on page 11 of [Exhibit C](#). Two major closing issues are discussed on page 12. The first major closing issue is the 2019-2021 biennium spending plan for the GMU. Detailed discussions regarding tobacco master settlement agreement funds allocated to individual DHHS budgets will occur when those individual budgets are heard before the Subcommittees. The table in the middle of page 12 of [Exhibit C](#) outlines the tobacco settlement allocations for the GMU.

HHS-DO - Grants Management Unit — Budget Page DHHS-DIRECTOR-27  
(Volume II)  
Budget Account 101-3195

The Executive Budget recommends \$15 million over the 2019-2021 biennium in tobacco settlement fund transfers to the DHHS Director's Office for allocations to subgrantees through the GMU. A new health center incubator project is to be considered. The 2017 Legislature approved tobacco settlement funds of \$500,000 in each year of the 2017-2019 biennium for a new Federally Qualified Health Center (FQHC) incubator project.

As discussed on page 13 of [Exhibit C](#), the proposed 2019-2021 biennial spending plan recommends a new FQHC incubator project with an annual allocation of \$700,000 in each year of the 2019-2021 biennium. The Division noted in the February 8, 2019, budget hearing that the 2017-2019 incubator project was focused on adults getting out of jail. The upcoming 2019-2021 incubator project would be focused on access to primary care for children and adolescents in an alternative setting such as school and after-school recreational settings. Children do not often receive full primary care and assessment. Other states have demonstrated positive outcomes with placing satellite clinics in settings where at-risk youth and families pass through.

In Nevada, behavioral health is a focus for children in these settings. The scope of services would ensure behavioral health is included in addition to primary care. The GMU issued a request for application (RFA) in January 2019. The RFA process is almost complete. Grant awards are expected to be issued in June 2019 pending Legislative approval. According to the RFA, the target population is school age children and their families from medically underserved

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areas. According to the RFA, services could be provided through an onsite clinic, mobile clinic, telehealth system or another method which is accessible at a school related setting.

The second allocation for discussion is a new wellness program for family services funding. Funding is allocated at \$1 million in each year of the 2019-2021 biennium. The focus of these funds would be on preventive and early intervention services and would be expended through subgrants following the Grants Management Committee process. During the February 8, 2019, budget hearing, the Division testified that while preventive health services were covered under the Affordable Care Act and Medicaid, other areas that contributed to overall health were not covered such as nutrition and physical activity. This recommendation would provide funding for reimbursable prevention and intervention services which were two identified gaps in coverage.

Do the Subcommittees wish to approve the tobacco settlement allocations for the GMU of \$15 million over the 2019-2021 biennium as recommended by the Governor?

ASSEMBLYWOMAN CARLTON:

The RFA must be provided at a school-related setting. It can be challenging to get programs into schools. I would like clarification on what a school setting is for this purpose. Could it be the Boys and Girls Club, after school program or preschool care? It would be concerning to have the RFA too restrictive.

RICHARD WHITLEY (Director, Nevada Department of Health and Human Services):  
We have identified the agencies to be awarded grant funding. One is a Boys and Girls Club in Reno. There is a FQHC in Clark County. Memorandum of agreements have been completed with health nurses in 12 Clark County schools. We have completed agreements with the Carson City and Elko school districts. Telemedicine will be utilized.

Nevada Health Centers in Clark County, Carson City and Elko will provide clinical services remotely. This is an evidence-based model that other states have used. We are interested in the Boys and Girls Club's alternative model which we have not utilized in Nevada. We will be meeting with the Boys and



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Girls Club and the Community Health Alliance to formalize the clinical services and delivery of services.

ASSEMBLYWOMAN CARLTON:

If the Boys and Girls Club program in northern Nevada is successful, I would suggest extending it to the Boys and Girls Club in Clark County. I understand starting slow and ensuring success before expanding.

ASSEMBLYWOMAN TITUS:

Adults getting out of jail was a focus of the 2017-2019 biennium incubator project. The focus will change to primary care for children and adolescents. Was the first project successful, and what is happening with that project?

MR. WHITLEY:

I borrowed the term incubator from business models. As used for business models, it means to stand them up. The sustainability of the first project is continuing with the jails and FQHCs. The Northern Nevada HOPES clinic developed a formal relationship with the Washoe County Detention Center. The FirstMed Health and Wellness Centers in Las Vegas developed a formal relationship with the Clark County Detention Center.

Clark County has narrowed their scope of services to focus on women with children. In northern Nevada, the focus is on individuals with chronic health conditions including serious mental illness. Both projects are continuing. The FQHCs receive an enhanced reimbursement rate. The majority of individuals will be eligible for Medicaid upon release from jail. An FQHC is not allowed to deny services. The intent will be the same with the school-based and related sites.

ASSEMBLYWOMAN TITUS:

It is valuable to document successful programs. It would be helpful to receive more information on the school nurse and telemedicine clinics. How will the process work? What is the parental involvement when a school nurse works with a student and determines their health-care needs?

CHAIR DENIS:

Do you want to focus on behavioral health in some of the school sites?

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MR. WHITLEY:

We know behavioral health is an underserved health service. An emphasis was placed on behavioral health. We must be adaptive to the school district's needs to cultivate a relationship. Both the school nurse and telemedicine FQHCs will include behavioral health.

CHAIR DENIS:

How did you go through the selection process? I am aware of an organization which provides mental health services in eight Clark County schools.

MR. WHITLEY:

We reached out with the RFA to all FQHCs in the State.

ASSEMBLYWOMAN NEAL:

How do you identify at-risk youth? How do you obtain parental permission for a program at a satellite facility?

MR. WHITLEY:

I can provide the write-up of the program. The school-based program is evidence based. It takes into account the need for parental permission.

ASSEMBLYWOMAN BENITEZ-THOMPSON MOVED TO RECOMMEND TO THE FULL COMMITTEES IN B/A 101-3195 TO APPROVE THE TOBACCO SETTLEMENT ALLOCATIONS FOR THE GMU OF \$15 MILLION OVER THE 2019-2021 BIENNIUM AS RECOMMENDED BY THE GOVERNOR.

SENATOR WOODHOUSE SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE.)

SENATE: THE MOTION CARRIED UNANIMOUSLY.

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MS. HOPPE:

The second major closing item in the GMU B/A 101-3195 is the transfer of existing programs to the DHHS divisions as discussed on page 14 of [Exhibit C](#). The existing program funding and associated positions would transfer from the DHHS Director's Office to the different DHHS divisions.

In B/A 101-3195 decision unit E-900, tobacco settlement funds totaling \$4.2 million over the 2019-2021 biennium transfer to the Chronic Disease Prevention and Health Promotion program in the DHHS's Division of Public and Behavioral Health's (DPBH) Chronic Disease B/A 101-3220. The transfer includes one social services program specialist position which serves as the food security and wellness manager.

E-900 Transfer From Grants Mgmt To DPBH Chronic Disease — Page DHHS-DIRECTOR-32

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HHS-DPBH - Chronic Disease — Budget Page DHHS-DPBH-94 (Volume II)  
Budget Account 101-3220

On April 3, 2019, the Subcommittees closed B/A 101-3220 and recommended approval of the transfer.

A second transfer is in B/A 101-3195 decision unit E-901.

E-901 Transfer From Grants Mgmt To DCFS Admin — Page DHHS-DIRECTOR-33

Decision unit E-901 transfers the Children's Trust Fund and the Community Based Child Abuse Prevention grant funding of \$1.4 million and \$438,656, respectively, over the 2019-2021 biennium to the DHHS Division of Child and Family Services (DCFS) Children, Youth & Family Administration B/A 101-3145. This transfer includes one social services program specialist position and associated costs. On May 1, 2019, the Subcommittees closed B/A 101-3145 and recommended approval of the transfer.

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E-901 Transfer From Grants Management To DCFS Admin — Page DHHS-DCFS-11

The third transfer is in B/A 101-3195 decision unit E-902.

HHS-DO - Grants Management Unit — Budget Page DHHS-DIRECTOR-27  
(Volume II)  
Budget Account 101-3195

E-902 Transfer From Grants Management To DCFS Admin — Page DHHS-DIRECTOR-33

Tobacco settlement funds totaling \$2.7 million over the 2019-2021 biennium transfer from B/A 101-3195 to the DCFS Children, Youth & Family Administration B/A 101-3145.

E-902 Transfer From Grants Management To DCFS Admin — Page DHHS-DCFS-12

The differential response is a stable program that is firmly embedded in the child welfare system. On May 1, 2019, the Subcommittees closed B/A 101-3145 and recommended approval of the transfer.

The fourth transfer is of \$211,060 over the 2019-2021 biennium and one social services specialist in decision unit E-909 which transfers the problem gambling prevention and treatment funding from the GMU B/A 101-3195 to the DPBH Behavioral Health Prevention and Treatment (BHPT) B/A 101-3170. The Division indicates that transferring this program to B/A 101-3170 would align like services reimbursable by Medicaid.

E-909 Trnsf From Grnts Mgmt To DPBH Behvr Hlth Prev Trtm — Page DHHS-DIRECTOR-35

HHS-DPBH - Behavioral Health Prev & Treatment — Budget Page DHHS-DPBH-140 (Volume II)

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Budget Account 101-3170

Fiscal staff would note the Executive Budget also recommends transferring the Problem Gambling B/A 101-3200 to DPBH Prevention and Treatment B/A 101-3170. On April 26, 2019, the Subcommittees closed the DPBH's BHPT B/A 101-3170, including the transfer, with the transfer contingent upon the Subcommittees' approval of the transfer from B/A 101-3195.

HHS-DPBH - Problem Gambling — Budget Page DHHS-DPBH-136 (Volume II)  
Budget Account 101-3200

Do the Subcommittees wish to approve transferring existing program funding and associated positions from the Director's Office to the DHHS Divisions?

ASSEMBLYWOMAN TITUS:

Are gambling issues being treated? Where does the funding go for treatment of gambling issues?

Ms. HOPPE:

Under the proposal, funding would go to DPBH. We will discuss problem gambling in the next budget. The funds are typically subgranted out to entities to address gambling issues. Services are provided through Medicaid reimbursement.

ASSEMBLYWOMAN BENITEZ-THOMPSON MOVED TO RECOMMEND TO THE FULL COMMITTEES IN B/A 101-3195 TO APPROVE TRANSFERRING EXISTING PROGRAM FUNDING AND ASSOCIATED POSITIONS FROM THE DIRECTOR'S OFFICE TO DHHS DIVISIONS AS RECOMMENDED BY THE GOVERNOR AND AS SHOWN ON PAGE 14 OF [EXHIBIT C](#).

SENATOR WOODHOUSE SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE.)

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SENATE: THE MOTION CARRIED UNANIMOUSLY.

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Ms. HOPPE:

There are four other closing items for B/A 101-3195 as discussed on page 15 of [Exhibit C](#). All other closing items appear reasonable to Fiscal staff. Fiscal staff recommends the other closing items be closed as recommended by the Governor and requests authority for Fiscal staff to make technical adjustments as necessary.

ASSEMBLYWOMAN BENITEZ-THOMPSON MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE B/A 101-3195 OTHER CLOSING ITEMS AS RECOMMENDED BY THE GOVERNOR WITH AUTHORITY FOR FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS AS NECESSARY.

SENATOR WOODHOUSE SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE.)

SENATE: THE MOTION CARRIED UNANIMOUSLY.

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Ms. HOPPE:

Problem Gambling B/A 101-3200 is described on page 19 of [Exhibit C](#). One major issue begins on page 20 of [Exhibit C](#).

Because of declining revenues supporting the problem gambling budget as well as a recent needs assessment that identified a funding gap for prevention and treatment of problem gambling, the Executive Budget recommends replacing the current quarterly slot tax funding this budget receives with an allocation of gaming percentage fees and increasing expenditure authority by \$6.8 million over the 2019-2021 biennium.

On December 4, 2018, the DHHS published the DHHS Problem Gambling Services Fiscal Year (FY) 2020 and FY 2021 Strategic Plan endorsed by the DHHS Advisory Committee on Problem Gambling (ACPG). The strategic plan summarizes what has been learned from consumers, treatment and prevention providers, gaming industry collaborators, program evaluation research and a review of state and federal policy and identified best practices.

The B/A 101-3200 was created in FY 2005-2006 by the 2005 Legislature. The program is funded through a quarterly \$2 per machine slot tax. The number of slot machines has declined 20 percent since 2005. Replacing the current quarterly slot tax funding with gaming percentage fees would provide greater funding stability. Fiscal staff notes the information on the chart on page 20 of [Exhibit C](#). Revenues have declined from a high point in FY 2006-2007 to FY 2017-2018 by 18.5 percent.

The Office of Finance in the Office of the Governor submitted Bill Draft Request (BDR) 41-1200.

**BILL DRAFT REQUEST 41-1200**: Revises provisions governing the financial support for programs for the prevention and treatment of problem gambling (later introduced as [Senate Bill 535](#).)

The BDR 41-1200 would revise *Nevada Revised Statutes* (NRS) 463.320 to remove slot tax funding for B/A 101-3200 and replace it with a 0.6 percent portion of gaming percentage fees. The enhancement unit E-225 estimates this funding change would generate \$9.4 million in revenues over the 2019-2021 biennium for B/A 101-3200. This would be an increase of \$6.8 million over the \$2.6 million projection for the current quarterly slot tax funding. The Senate Finance and Assembly Ways and Means Committees will have the opportunity to review this budgetary policy change when the expected bill is heard in the Committees.

E-225 Efficient and Responsive State Government — Page DHHS-DPBH-16

As discussed on page 21 of [Exhibit C](#), enhancement unit E-225 would increase expenditure authority to the problem gambling grants category by \$6.8 million to a total of \$9.4 million over the 2019-2021 biennium. This is a 330.4 percent

increase over the \$2.2 million approved by the 2017 Legislature. A needs assessment was conducted in 2018 and resulted in an estimated annual budget need of \$5.7 million for the next 5 years. The Executive Budget recommends expenditure authority in the problem gambling grants category of \$4.7 million in FY 2019-2020 and \$4.8 million in FY 2020-2021.

The additional expenditure authority would be utilized to purchase services in each of the six components of the problem gambling service system. The table in the middle of page 21 on [Exhibit C](#) reflects the service components. The columns in the table show the FY 2018-2019 budget amounts, the estimated annual needs assessment projection and the total amounts recommended in the Executive Budget.

According to the Strategic Plan, the problem gambling services need estimates were based on a combination of ACPG discussions, DHHS budget data and spending information from other U.S. state problem gambling service systems. During the February 8, 2019, budget hearing, the DPBH testified that with increased funding, prevention of gambling addiction would be a primary outcome goal.

The focus is now on treatment for gambling addiction funded through Medicaid. Research and prevention are the services needed for this program. The table at the top of page 22 on [Exhibit C](#) lists Medicaid payment data for the pathological gambling diagnosis spending for the past 5 fiscal years.

During the budget hearing, the Subcommittees had concerns about the dollar amounts requested and indicated more data would be required to evaluate those dollar amounts. In follow-up responses to the budget hearing, the Division indicated the advisory Committee engaged in an extended process to develop the requested budget by taking both macro and micro levels of analysis. The macro level analysis included gathering data on what other states were investing in problem gambling services. The chart on page 22 of [Exhibit C](#) lists the data gathered in the macro level analysis.

Although Nevada is a leader in the gaming industry, the State's investment in problem gambling services is less than other states. The \$4.7 million annual budget recommended by the Governor would enable Nevada to develop its



problem gambling services to meet or exceed the services provided by those states with effective programs as appropriate for Nevada's size and gambling profile. The advisory Committee's micro-level analysis was a needs analysis for each of the six program components. The analysis included surveying current grantees to gather data. Increased expenditure authority would require a sufficient number of qualified providers as discussed on page 23 of [Exhibit C](#).

During the February 8, 2019, budget hearing, the Subcommittee expressed concerns that a sufficient number of qualified providers may not be available. The lack of investment in workforce development funding has hampered the ability to obtain and retain qualified gambling treatment providers.

With increased funding, DHHS plans to make additional investments in developing the gambling treatment workforce and believes this measure would motivate existing qualified gambling treatment providers to apply for grant funding. A significant portion of the increased program funds would be allocated toward infrastructure development including conducting a problem gambling prevalence study and implementing a public awareness campaign. These two activities are not reliant on having a robust workforce of qualified treatment providers.

Do the Subcommittees wish to approve the Governor's recommendation to change the primary funding source for B/A 101-3200 from quarterly slot tax revenue to gaming percentage fee revenues contingent upon passage and approval of enabling legislation?

Do the Subcommittees wish to approve total expenditure authority in the problem gambling grants category of \$4.7 million in FY 2019-2020 and \$4.8 million in FY 2020-2021 as recommended by the Governor which is an increase from the \$1.4 million approved for FY 2019 and is contingent upon passage and approval of enabling legislation?

ASSEMBLYWOMAN SPIEGEL:

Is there data which determines the public funds invested by problem gambling services by states through a per capita basis? California's population is much larger than Nevada's. California's investment in problem gambling is at least

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four times more than Nevada's. On a per capita basis, California's investment would be smaller.

MS. HOPPE:

The Division has not provided the information to Fiscal staff.

JULIA PEEK (Deputy Director, Programs, Department of Health and Human Services):

I can provide the information.

SENATOR KIECKHEFER:

It would be interesting to look at Nevada resident gamblers. The majority of gamblers are not Nevadans. It would be helpful to review per capita data.

MS. PEEK:

It has been awhile since there has been a thorough data analysis of problem gambling. At the previous hearing, I provided information regarding treatment paid through Medicaid. We are seeing treatment increase. The budget request includes collecting data and performing analysis of problem gamblers. Gambling and resident questions are included on the behavioral risk-surveillance survey. The Division will provide the additional data as requested.

ASSEMBLYWOMAN NEAL:

I would like to see a homelessness nexus in the data collection. Gambling treatment should be associated with homelessness. There would be different treatment for someone who is a resident of the State, has a gambling addiction and becomes homeless. There should be coordination in the current system to track and identify if treatment or the funding expenditures for treatment can be associated with practices which may come forward. This could be another layer part of the services to assist in resolving homelessness.

ASSEMBLYWOMAN BENITEZ-THOMPSON:

The proposed uses of funding is for prevention, research, workforce development, treatment and administration. It appears \$950,000 was spent on treatment in 2019. The proposed increase is up to \$1.6 million. This is between a \$600,000 and \$700,000 increase. This appears to be on the lower end of the other increases requested. There should be more of a focus on treatment.

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ASSEMBLYWOMAN CARLTON:

I remember when Senator Barbara Cegavske first brought this issue to the Senate. There was a lot of discussion. It was determined something needed to be done, as problem gambling is an important issue. As the entertainment capital of the world, we should step up and do something. The conversation was around how to fund a program. The nexus of the \$2 per machine slot tax appeared to be the way to go about it.

Good work has been completed. I believe this is an evolution point. I have concerns about an earmark of General Fund money going to a program. To value this program and move it forward, we should fund it through the General Fund. It is our duty to decide how the General Fund is distributed. We should see the ongoing accountability and the benchmarks.

I would be apprehensive to switch to a basic earmark of General Fund appropriations. Other programs are not funded in this manner. There are more dollars needed for research to address the data management needs. There is a provision for a University Nevada, Las Vegas research assistant to address the data management needs.

I would be in favor of a gradual funding increase. I would not want to allow for a precedence to a policy of allowing a set amount of General Fund appropriations to go directly to a program. Other divisions would come in next Session asking for the same.

ASSEMBLYWOMAN BENITEZ-THOMPSON:

Would the idea be to let the \$2 per machine slot tax flow into the General Fund? The nexus of the slot tax straight to the program would not continue. Would we make an appropriation from the General Fund for the problem gambling program? We will still capture the slot tax dollars. I am in favor of doing this. I believe an increase is necessary. If the present budget is about \$1.4 million in each year, it would make sense for an increase to \$2 million per year. Referring back to the chart on page 22 of [Exhibit C](#), this would bring Nevada more into alignment with several other states.

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SENATOR KIECKHEFER:

I agree with the appropriations process. We are obligated to prioritize the State's budget. Dedicating a specific piece of General Fund revenue to a specific program is not good policy. We would need another piece of legislation to redirect the \$2 slot tax. In terms of the annual needs assessment and in reviewing the chart on page 21 of [Exhibit C](#), we should start on the research piece. We need to determine how many people are targeted for intervention services. Investing in a problem gambling prevalence study to better understand how best to target intervention efforts is the next logical step.

ASSEMBLYWOMAN BENITEZ-THOMPSON MOVED TO RECOMMEND TO THE FULL COMMITTEES TO CHANGE THE PRIMARY FUNDING SOURCE OF B/A 101-3200 FROM A QUARTERLY SLOT TAX REVENUE TO A GENERAL FUND APPROPRIATION CONTINGENT UPON PASSAGE AND APPROVAL OF ENABLING LEGISLATION.

SENATOR KIECKHEFER SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE.)

SENATE: THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

ASSEMBLYWOMAN BENITEZ-THOMPSON:

I would also move to approve a total expenditure authority for problem gaming grants category of \$2 million in each year of the 2019-2021 biennium which is an increase from \$1.4 million and contingent upon passage and approval of enabling legislation. The Subcommittees have varying thoughts on where the dollars should be directed.

CINDY JONES (Assembly Fiscal Analyst, Legislative Counsel Bureau, Fiscal Analysis Division):

All the funds for problem gambling go into one budget and one category. The Division has flexibility of how the funds are expended. To parcel out the

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funding on specific items, Staff would recommend putting funding into separate categories in order to target the funds.

MS. HOPPE:

Putting funding into different categories would control direction of the funding. The Subcommittees could express their intent through this budget hearing without setting up a category.

MS. JONES:

Intent is not binding. The Division has the flexibility to use the funds however they feel is necessary within the permissible uses of the funds. The funds are in a single category.

CHAIR DENIS:

We have varying thoughts on how the funds should be expended. Do we want to be specific? I agree research is important. I would not want to limit funding to just treatment.

ASSEMBLYWOMAN CARLTON:

I believe the Division receives monies from other sources. The Division may not be able to do something necessary if we prescribe the use of funding over the next two years. We could allow the Division to balance forward the monies after the first year. After the second year, unspent funds would be reverted back to the General Fund. The Division should be able to use the monies within the two-year period as they determine necessary.

ASSEMBLYWOMAN BENITEZ-THOMPSON:

We are indicating the monies could be spent on research, treatment and administration. Can we categorize the funding in this manner? If the Division comes to the Interim Finance Committee to ask for an appropriation of dollars or an enhancement, we could look back to see how the dollars were used.

CHAR DENIS:

Are you indicating the program should not include prevention?

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ASSEMBLYWOMAN BENITEZ-THOMPSON:

No. When the Division is spending funding they essentially are doing one of the three items mentioned. Instead of directing where the dollars go, we would like to be able to see how the funds are expended within the three categories.

ASSEMBLYWOMAN TITUS:

Is B/A 101-3195 enhancement unit E-909 only for the administration of problem gambling?

MS. HOPPE:

Funding in B/A 101-3195 enhancement unit E-909 is the administrative costs for the Director's Office that would transfer to B/A 101-3200.

ASSEMBLYWOMAN TITUS:

The administration of problem gambling is in B/A 101-3195. The funds in B/A 101-3200 are used for the prevention and treatment of problem gambling.

CHAIR DENIS:

Are we moving the administrative costs from B/A 101-3195 to B/A 101-3200?

MS. HOPPE:

There is funding transferred from B/A 101-3200 to B/A 101-3195 to cover administrative staff costs. This would be transferred back to B/A 101-3200.

ASSEMBLYWOMAN BENITEZ-THOMPSON:

What is the amount of administrative funds?

MS. HOPPE:

The amount is \$211,060 over the biennium as described on page 14 of [Exhibit C](#).

ALEX HAARTZ (Principal Deputy Fiscal Analyst, Legislative Counsel Bureau, Fiscal Analysis Division):

The Division has determined the per capita amounts as discussed earlier.

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Ms. PEEK:

The per capita of California is approximately 21 cents per capita for California. Nevada is 43 cents per capita. I can provide the per capita amounts for the other states.

ASSEMBLYWOMAN BENITEZ-THOMPSON:

I recommend determining how the monies would be spent be a technical adjustment by Staff.

CHAIR DENIS:

Do we track how the monies are spent currently? Is there a report on expenditures?

Ms. HOPPE:

The information is reported regularly.

Ms. JONES:

I would suggest the ACPG reports be forwarded to the Subcommittees. Members would be apprised of activities and expenditures. The Subcommittees could allow the flexibility of leaving the funding allocation in one category.

ASSEMBLYWOMAN BENITEZ-THOMPSON MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE TOTAL EXPENDITURE AUTHORITY IN B/A 101-3200 OF \$2 MILLION IN EACH YEAR OF THE 2019-2021 BIENNIUM ALLOWING FOR THE FUNDS TO BE AVAILABLE IN BOTH YEARS OF THE BIENNIUM CONTINGENT UPON PASSAGE AND APPROVAL OF ENABLING LEGISLATION.

SENATOR KIECKHEFER SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE.)

SENATE: THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

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Ms. HOPPE:

There is one other closing item as described on page 23 of [Exhibit C](#). The recommendation is to transfer B/A 101-3200 from the Director's Office to the DPBH Bureau of Behavioral Health Wellness and Prevention B/A 101-3170.

Fiscal staff recommends the other closing item be closed as recommended by the Governor and requests authority for Staff to make other technical adjustments as necessary.

SENATOR KIECKHEFER MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE THE OTHER CLOSING ITEM IN B/A 101-3200 AS RECOMMENDED BY THE GOVERNOR WITH AUTHORITY FOR FISCAL STAFF TO MAKE OTHER TECHNICAL ADJUSTMENTS AS NECESSARY.

ASSEMBLYWOMAN BENITEZ-THOMPSON SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE.)

SENATE: THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

Ms. HOPPE:

The DHHS DCFS Children's Trust Account B/A 101-3201 is described on page 25 of [Exhibit C](#). The Subcommittees have not previously reviewed this account.

HHS-DCFS - Children's Trust Account — Budget Page DHHS-DCFS-40  
(Volume II)  
Budget Account 101-3201

There are no major closing issues. There is one other closing item described on page 26 of [Exhibit C](#). The Governor recommends transferring B/A 101-3201 to the DCFS B/A 101-3145. Fiscal staff requests authority to close B/A 101-3201



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in accordance with the closing actions taken by the Subcommittees regarding enhancement unit E-901 in the GMU B/A 101-3195.

Staff recommends B/A 101-3201 be closed as recommended by the Governor with authority for Staff to close this budget in accordance with the closing actions taken by the Subcommittees regarding the GMU B/A 101-3195 and requests authority for Staff to make other technical adjustments as needed.

ASSEMBLYWOMAN BENITEZ-THOMPSON:

I recommend discussion regarding the balance forward of funding appropriations. What is the amount of dollars being granted out? Are we granting out as much as possible?

MS. PEEK:

The funds are encumbered through grant awards. We are waiting for the expense information. We can provide copies of the subgrant awards which will show the funding amounts and services.

ASSEMBLYWOMAN BENITEZ-THOMPSON:

Are we waiting for receipts to be provided?

SENATOR KIECKHEFER:

Is the reserve projected to increase over the next couple of years? Is it always a tail-end billing cycle?

MS. PEEK:

We can improve the promoting. We can go out for a request for proposal, or depending upon community need there are other options to increase providers.

SENATOR KIECKHEFER:

It is projected the DHHS DCFS will end the biennium with more reserve than expenditures.

MS. PEEK:

We will provide the information.

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ASSEMBLYWOMAN BENITEZ-THOMPSON MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE B/A 101-3201 AS RECOMMENDED BY THE GOVERNOR WITH AUTHORITY FOR FISCAL STAFF TO CLOSE THIS BUDGET IN ACCORDANCE WITH THE CLOSING ACTIONS TAKEN BY THE SUBCOMMITTEE REGARDING THE GMU B/A 101-3195 AND REQUESTS AUTHORITY FOR FISCAL STAFF TO MAKE OTHER TECHNICAL ADJUSTMENTS AS NEEDED.

SENATOR KIECKHEFER SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE.)

SENATE: THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

MS. HOPPE:

The Consumer Health Assistance B/A 101-3204 begins on page 27 of [Exhibit C](#).

HHS-DO - Consumer Health Assistance — Budget Page DHHS-DIRECTOR-37  
(Volume II)  
Budget Account 101-3204

There is one major closing issue for B/A 101-3204 on page 28 of [Exhibit C](#) regarding the new Consumer Health Protection Bureau. To provide mediation services to consumers for disputed billings for out-of-network services, the Governor recommends General Fund appropriations of \$510,411 over the 2019-2021 biennium to establish the new Bureau. The recommendation includes two new positions and associated costs as well as a new database to track and maintain data on charges for medical procedures.

The envisioned purpose of the new bureau would be on a specific area of disputed billing. Balance or surprise billing refers to the practice of billing consumers the difference between the bill charged by the provider and whatever their insurance pays. The difference between the two amounts is sent to the consumer for payment even after they have paid their copayment or

coinsurance. Surprise or balance billing often occurs when an individual has little control over their provider or service they receive, such as seeking services in an Emergency Room (ER).

Decision unit E-225 creates a bureau to provide the dispute resolution process between the health plan and the provider. The process protects the patient by leaving them out of the process.

#### E-225 Efficient and Responsive State Government — Page DHHS-DIRECTOR-40

The Executive Budget recommends two new positions for the new Bureau: an unclassified elder rights chief position and a classified MA position. The elder rights chief position would be responsible to advocate, mediate, arbitrate or resolve by alternate means of dispute resolution disputes between health care plans and health care providers on behalf of patients. The Agency indicates a potential responsibility to conduct binding arbitration which is generally conducted by a licensed Nevada attorney. According to the Agency, these activities most closely align with the unclassified elder rights chief position. The position's duties are outlined in NRS 427A.1232.

The MA position would be responsible for managing a database of charges for medical services. They will provide cost analysis for particular procedures to be used in arbitration. The decision unit E-225 includes expenditure authority of approximately \$51,000 for a data base in each year of the biennium. The database would be an independent record of charges for medical procedures. The rates would be available for provider and health plans to use in determining a fair rate in the case of unexpected out-of-network services.

The Office of Consumer Health Assistance (OCHA) provides assistance and medication services. With the experience and infrastructure the OCHA has in assisting other disputes, this is the ideal location to address surprise billing.

The table in the middle of page 29 of [Exhibit C](#) outlines the expenditures by category for the new bureau.

Do the Subcommittees wish to approve the Governor's recommendation for General Fund appropriations of \$234,243 in FY 2019-2020 and \$276,168 in

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FY 2020-2021 to fund a new Consumer Health Protection Bureau consisting of 1 new unclassified position and 1 new classified position to provide mediation services to consumers for disputed billings for out-of-network services?

ASSEMBLYWOMAN SPIEGEL:

Is the \$51,351 per year be used to create a database from scratch? Will the funds be used for licensing fees or for an independent database?

Ms. HOPPE:

Many of the costs are for storage of the database. The Nevada Enterprise Information Technology Services (EITS) may help setup the database.

Ms. PEEK:

The Fair Health database is a free National resource. We are not recommending to use the Fair Health database due to stakeholders reporting frustration in utilizing it. The funds would be used to create a new database with the associated EITS expenses.

ASSEMBLYWOMAN SPIEGEL:

Will the insurance companies supply data for the database?

Ms. PEEK:

Yes. We would need both the bill and pay charges from the insurance providers.

ASSEMBLYWOMAN TITUS:

I understand the thought process of the potential need. I am concerned this could become an extensive cost which would not benefit or protect the consumer. There are processes in place. I am not in support of a new bureau.

SENATOR KIECKHEFER:

Have the insurance companies informed you if they are willing to turn over their contracted provider rates?

Ms. PEEK:

We have been working with insurance companies due to Assembly Bill (A.B.) 469 which Senator Spearman put forward.

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**ASSEMBLY BILL 469**: Revises provisions governing billing for certain medically necessary emergency services. (BDR 40-704)

Assembly Bill 469 is regarding an all-payer claims database. This would only be for ER services, not the full scope of services. The insurance companies have expressed their desire to share the information. Proprietary data would not be released.

SENATOR KIECKHEFER:

Is the patient tracked from when they are transferred from an ER to a hospital admission? Are all the ancillary services tracked?

MS. PEEK:

We will need to determine what the scope of billing will include. There are expenses related to the ER from the ER to the inpatient visit. We could collect the entire bill on the visit.

SENATOR KIECKHEFER:

A bill draft is not necessary to create a bureau to help people mediate. I would think legislation would be needed to create a binding arbitration process between two private entities. Does the Agency have authority for binding arbitration under existing statutory authority?

MS. PEEK:

No. It would not be binding unless A.B. 469 moves forward.

ASSEMBLYWOMAN CARLTON:

For many years we have looked at surprise billing by anecdote. I support having somewhere to house the surprise billing data, providing OCHA with the resources needed to address the problems and create the database. The OCHA is where people call when they have a problem. We will need the support systems if A.B. 469 passes and is signed by the Governor. We have indicated on numerous occasions there is a need to remove the patient from surprise billing. It will be the Bureau's responsibility to get the patient out of the middle of surprise billing. There is discussion if A.B. 469 impacts this or this impacts A.B. 469. It is important to put all of surprise billing in one area so, we can stop talking anecdotally. We need to focus on real patients who are in the middle of

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the surprise billing. I do support the new Bureau. This is a start to addressing the issues of surprise billing.

ASSEMBLYWOMAN SPIEGEL:

I was part of the Interim Committee and support decision unit E-225 for a new Bureau. Having an elder rights chief would be beneficial for the State as our population continues to age.

ASSEMBLYWOMAN SPIEGEL MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE THE GOVERNOR'S RECOMMENDATION FOR GENERAL FUND APPROPRIATIONS OF \$234,243 IN FY 2019-2020 AND \$276,168 IN FY 2020-2021 TO FUND A NEW CONSUMER HEALTH PROTECTION BUREAU IN B/A 101-3204 CONSISTING OF 1 NEW UNCLASSIFIED POSITION AND 1 NEW CLASSIFIED POSITION TO PROVIDE MEDIATION SERVICES TO CONSUMERS FOR DISPUTED BILLINGS FOR OUT-OF-NETWORK SERVICES.

SENATOR KIECKHEFER:

I have read A.B. 469 which will provide authority which is tied into this. Provide the binding arbitration authority through legislation will require more funding for fact finding and the hiring of outside counsel. I am unsure if we will be able to get the needed data to create the database without additional legislation. I do not support the new bureau. I would like to review the issues with a holistic approach based on the proposed legislation. I will be a "no" vote for now.

SENATOR SETTELMAYER:

I share Senator Kieckhefer's concern.

ASSEMBLYWOMAN TITUS:

I will not support this. Assembly Bill 469 which passed out of the Assembly did not mention this Bureau.

ASSEMBLYWOMAN SPIEGEL:

I have concerns about the database. Knowing the fair database is available for free provides a comfort level to move forward even if the insurance companies choose not to participate and provide the data to OCHA.

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ASSEMBLYWOMAN NEAL:

I agree with Senator Settelmeyer and Senator Kieckhefer. I would like to see the policy.

ASSEMBLYWOMAN CARLTON:

The bill draft request has been drafted. I believe it has been sent to the Governor's Office for review. It has not been sent back to us. This budget item is not contingent upon that bill. They will all work together as pieces of the puzzle and are meant to complement each other. The new Bureau sets up the budget framework. This is the first piece of putting the puzzle together and is why I am in support.

CHAIR DENIS:

We have a motion before us.

SENATOR WOODHOUSE SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYMAN FRIERSON WAS ABSENT FOR THE VOTE. ASSEMBLYWOMAN NEAL AND TITUS VOTED NO.)

SENATE: THE MOTION CARRIED. (SENATORS KIECKHEFER AND SETTELMAYER VOTED NO.)

\* \* \* \* \*

ASSEMBLYWOMAN NEAL MOVED TO RECONSIDER THE VOTE.

SENATOR SETTELMAYER SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED UNANIMOUSLY.

SENATE: THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

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CHAIR DENIS:

We will go back to the motion. We will have a short recess. We will move on and come back to B/A 101-3204.

Ms. HOPPE:

The Office of the State Public Defender B/A 101-1499 begins on page 31 of [Exhibit C](#). There is one major closing issue beginning on page 32. The Governor recommends reclassifying an existing AA position to a legal secretary due to changes in the position's job duties. The reclassification would increase the position's cost by \$23,430 over the 2019-2021 biennium.

HHS-DO - Public Defender — Budget Page DHHS-DIRECTOR-46 (Volume II)  
Budget Account 101-1499

The Office indicates the position's duties have changed significantly in recent years from receptionist and general office duties to the main intake of discovery for the Office. The position currently evaluates documentation and discovery received from courts and attorneys. They must determine what case the legal documents apply to and ensure time-sensitive legal documents are addressed.

Beginning in July 2018, videos from police officer body cameras are being downloaded to the Office. This position determines what the video contains and directs the download to the appropriate client file. The AA qualifications do not allow for this discovery determination or review of videos without legal background or education. Supporting documentation for decision unit E-806 reflects that the reclassified position would spend 50 percent of time with the new discovery duties and 50 percent with receptionist and general office duties.

E-806 Classified Position Changes — Page DHHS-DIRECTOR-50

During the February 8, 2019, budget hearing, the Subcommittee inquired whether the Office would require an additional AA position to perform receptionist duties, if the reclassification is approved. The Office testified that the legal secretary class specification includes administrative secretarial duties. The existing single position has sufficient time to perform both types of duties.



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In follow-up responses to the budget hearing, the Agency confirmed the DHRM has conditionally approved the reclassification.

Do the Subcommittees wish to approve the Governor's recommendation to reclassify an existing AA position to a legal secretary?

ASSEMBLYWOMAN BENITEZ-THOMPSON MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE THE GOVERNOR'S RECOMMENDATION IN B/A 101-1499 TO RECLASSIFY AN EXISTING AA POSITION TO A LEGAL SECRETARY.

SENATOR WOODHOUSE SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED UNANIMOUSLY.

SENATE: THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

Ms. HOPPE:

There are three other closing items beginning on page 32 of [Exhibit C](#). Other closing item 2 is for office furniture replacement. The Office indicated to Fiscal staff that decision unit E-710 does not contain sufficient funding to replace office furniture for all staff.

#### E-710 Equipment Replacement — Page DHHS-DIRECTOR-48

The Office provided Fiscal staff with vendor quotes to support the costs of replacing furniture for 13 of the 14 authorized positions. The remaining position uses the reception counter and does not require furniture replacement. Fiscal staff has included a technical adjustment to increase expenditure authority by \$17,088 in FY 2019-2020. Decision unit E-710 appears reasonable.

Fiscal staff recommends the other closing items be closed as recommended by the Governor with the technical adjustment noted in other closing item 2 and requests authority for Staff to make other technical adjustments as necessary.

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ASSEMBLYWOMAN BENITEZ-THOMPSON MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE OTHER CLOSING ITEMS IN B/A 101-1499 AS RECOMMENDED BY THE GOVERNOR WITH THE TECHNICAL ADJUSTMENT NOTED IN OTHER CLOSING ITEM 2 AND WITH AUTHORITY FOR FISCAL STAFF TO MAKE OTHER TECHNICAL ADJUSTMENTS AS NECESSARY.

SENATOR WOODHOUSE SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED UNANIMOUSLY.

SENATE: THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

CHAIR DENIS:

We will go back to B/A 101-3204. We have heard the budget information.

ASSEMBLYWOMAN SPIEGEL MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE THE GOVERNOR'S RECOMMENDATION FOR GENERAL FUND APPROPRIATIONS OF \$234,243 IN FY 2019-2020 AND \$276,168 IN FY 2020-2021 TO FUND A NEW CONSUMER HEALTH PROTECTION BUREAU IN B/A 101-3204 CONSISTING OF 1 NEW UNCLASSIFIED POSITION AND 1 NEW CLASSIFIED POSITION TO PROVIDE MEDIATION SERVICES TO CONSUMERS FOR DISPUTED BILLINGS FOR OUT-OF-NETWORK SERVICES.

SENATOR WOODHOUSE SECONDED THE MOTION.

ASSEMBLYMAN FRIERSON:

I was meeting with the Governor this morning on expanding patient protections in Nevada. This combined with A.B. 469 and the progress being made makes me comfortable in moving forward with the new Bureau. We will make sure we have this position in place to facilitate having patient protections done correctly. We have hospitals, doctors, other providers and insurers working together with advocates for patients. This is the link to put it all together.

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ASSEMBLY: THE MOTION CARRIED. (ASSEMBLYWOMAN TITUS VOTED NO.)

SENATE: THE MOTION CARRIED. (SENATORS KIECKHEFER AND SETTELMAYER VOTED NO.)

\* \* \* \* \*

Ms. HOPPE:

Two other closing items for B/A 101-3204 are described on the bottom of page 29 of [Exhibit C](#). Both closing items appear reasonable.

Fiscal staff recommends the other closing items be closed as recommended by the Governor and requests authority for Staff to make other technical adjustments as necessary.

SENATOR WOODHOUSE MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE B/A 101-3204 OTHER CLOSING ITEMS AS RECOMMENDED BY THE GOVERNOR WITH AUTHORITY FOR FISCAL STAFF TO MAKE OTHER TECHNICAL ADJUSTMENTS AS NECESSARY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED UNANIMOUSLY.

SENATE: THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

CHAIR DENIS:

We will now discuss B/A 101-3276 beginning on page 35 of [Exhibit C](#).

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MS. HOPPE:

Fiscal staff is responsible for developing closing recommendations for B/A 101-3276. The Subcommittees have not previously reviewed this budget. There are no major closing items. There are 3 other closing items described on page 36 of [Exhibit C](#).

On April 16, 2019, the Governor's Finance Office submitted Budget Amendment No. A193653276 ([Exhibit D](#)) to transfer funding of \$185,000 in each year of the 2019-2021 biennium from the IDEA Part C Admin category to the Early Intervention Services category. This funding supports the Nevada Early Intervention Services data system and would be transferred to the Aging and Disability Services Division's Early Intervention Services budget which operates the data system. Fiscal staff notes that the budget amendment is revenue neutral. The recommendation appears reasonable.

Staff recommends all other closing items be closed as recommended by the Governor, including Budget Amendment No. A193653276 and requests authority for staff to make other technical adjustments as needed.

SENATOR WOODHOUSE MOVED TO RECOMMEND TO THE FULL COMMITTEES TO APPROVE ALL OTHER CLOSING ITEMS IN B/A 101-3276 AS RECOMMENDED BY THE GOVERNOR, INCLUDING BUDGET AMENDMENT NO. A193653276 WITH AUTHORITY FOR FISCAL STAFF TO MAKE OTHER TECHNICAL ADJUSTMENTS AS NEEDED.

ASSEMBLYWOMAN BENITEZ-THOMPSON SECONDED THE MOTION.

ASSEMBLY: THE MOTION CARRIED UNANIMOUSLY.

SENATE: THE MOTION CARRIED UNANIMOUSLY.

\* \* \* \* \*

Remainder of page intentionally left blank; signature page to follow.

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CHAIR DENIS:

There being no further business, this meeting is adjourned a 9:48 a.m.

RESPECTFULLY SUBMITTED:

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Vicki Kemp,  
Committee Secretary

APPROVED BY:

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Senator Moises Denis, Chair

DATE: \_\_\_\_\_

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Assemblywoman Teresa Benitez-Thompson, Chair

DATE: \_\_\_\_\_

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| <b>EXHIBIT SUMMARY</b> |                                 |    |                         |                             |
|------------------------|---------------------------------|----|-------------------------|-----------------------------|
| <b>Bill</b>            | <b>Exhibit /<br/># of pages</b> |    | <b>Witness / Entity</b> | <b>Description</b>          |
|                        | A                               | 1  |                         | Agenda                      |
|                        | B                               | 1  |                         | Attendance Roster           |
|                        | C                               | 36 | Karen Hoppe/LCB         | Closing List #6             |
|                        | D                               | 4  | Karen Hoppe/LCB         | Amendment No.<br>A193653276 |