

**MINUTES OF THE
SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES**

**Eightieth Session
May 30, 2019**

The Senate Committee on Health and Human Services was called to order by Chair Julia Ratti at 5:35 p.m. on Thursday, May 30, 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 Julia Ratti, Chair
Senator Pat Spearman, Vice Chair
Senator Joyce Woodhouse
Senator Joseph P. Hardy
Senator Scott Hammond

GUEST LEGISLATORS PRESENT:

Assemblywoman Dina Neal, Assembly District No. 7

STAFF MEMBERS PRESENT:

Megan Comlossy, Committee Policy Analyst
Eric Robbins, Committee Counsel
Michelle Hamilton, Committee Secretary

OTHERS PRESENT:

Antonina Capurro, State Dental Health Officer, Division of Public and Behavioral Health, Department of Health and Human Services
Cody L. Phinney, Deputy Administrator, Division of Health Care Financing and Policy, Department of Health and Human Services
Drake Ridge, Pyramid Lake Paiute Tribe
Michael Hackett, Nevada Primary Care Association
Peggy Lear Bowen
Jared Busker, Children's Advocacy Alliance

Ross Armstrong, Administrator, Division of Child and Family Services,
Department of Health and Human Services
Denise Tanata, Children's Advocacy Alliance
Bailey Bortolin, Legal Aid Center of Southern Nevada
Mari Nakashima, The Perkins Company; Family Focused Treatment Association
Brigid Duffy, Chief Deputy District Attorney, Juvenile Division, Clark County
District Attorney's Office

CHAIR RATTI:

I will open the hearing on Assembly Bill (A.B.) 223.

ASSEMBLY BILL 223 (2nd Reprint): Requires the Department of Health and Human Services to seek a federal waiver to provide certain dental care for persons with diabetes. (BDR 38-544)

ASSEMBLYWOMAN DINA NEAL (Assembly District No. 7):

This bill came about, because I decided to get involved in oral health. I wanted to narrow my scope and chose diabetes. Diabetes is the 7th leading cause of death in the United States, the 8th leading cause of death in Nevada and 14 percent of Nevada's Medicaid adult population has received a diagnoses of either type 1 or type 2 diabetes. There is a lot of research that links diabetes to periodontal disease. This bill creates a demonstration project within the State that will look at this issue. After the demonstration project is complete, we can include this in the State Plan if there is appropriate funding.

ANTONINA CAPURRO (State Dental Health Officer, Division of Public and Behavioral Health, Department of Health and Human Services):

This legislation will improve the health of Nevada's underserved and vulnerable population. Under the current Medicaid system in Nevada, dental services for non-pregnant adults are limited to dental extractions and removable prosthesis, which means partials and full dentures.

This system exists despite the fact there is well-documented research that recognizes oral health is essential and integral to overall health. Oral health is much more than just healthy teeth. Oral health is not only being free of tooth decay and gum disease, but it also means being free of chronic oral pain, oral cancers and other conditions that affect the mouth and throat.

Oral health is not only intimately related to the health of the rest of the body, but is considered a health disparity for low-income children and adults. Poor oral health can compound the devastating effects of chronic conditions and aggravate the already fragile socio-economic securities of this population.

In 2015, 1.7 million Nevadans, which is over half the State's population, had at least 1 chronic disease. The projected overall cost of chronic disease in Nevada continues to rise. Between the years 2016 to 2030, it is estimated to reach \$401 billion.

Unfortunately, many minority groups have higher prevalence rates for heart disease, cancer and diabetes. This leads to increased rates of disability and death. Assembly Bill 223 seeks to improve oral health by expanding Medicaid dental services for Medicaid adults, who are over 21 years of age and have been diagnosed with type 1 or type 2 diabetes.

The biological link between diabetes and periodontal disease, which is the loss of bone and tissue surrounding the teeth is so strong that periodontitis is called the sixth complication of diabetes. This is due to the chronic hyperglycemia that occurs in diabetics. This leads to an exaggerated immune inflammatory response to oral pathogens and results in rapid and severe destruction of the periodontal tissues. This leads to multiple extractions, associated infections and even complete tooth loss.

This is costly for our healthcare system. Poor oral health has far-reaching implications that can lead to deteriorating nutritional status, mental health, and chronic disease conditions resulting in a higher incidence of emergency room visits, hospitalization and medical expenses.

Section 1 of A.B. 223 will authorize the Department of Health and Human Services (DHHS) to apply for a demonstration waiver through the Centers for Medicare and Medicaid Services (CMS) to expand Medicaid dental services for individuals 21 years of age or older that have been diagnosed with diabetes.

Section 1, subsection 1, paragraph (a) would apply to patients with well controlled glycemic levels and good oral health. Section 1, subsection 1, paragraph (b) would apply to patients with longstanding diabetic conditions with poor glycemic control and compromised oral hygiene.

The hypotheses of the demonstration waiver is by expanding Medicaid dental services and specifically including dental prophylaxis dental cleaning, benefits for adults with diabetes; the oral and systemic health of this population will improve and medical expenses associated with their condition will decrease. There are also provisions to encourage and remind members who are diagnosed with diabetes to utilize this expanded Medicaid benefit.

Sections 3 and 4 require the health maintenance organization or the managed care organization that administer Medicaid services to provide written notices to newly diagnosed diabetics and to coordinate with any necessary entity to insure eligible Medicaid recipients receive their dental benefits.

Section 6 requires the Division of Health Care Financing and Policy of the DHHS and the Division of Public and Behavioral Health to submit to the 81st Legislature a report concerning the implementation of this waiver.

CODY PHINNEY (Deputy Administrator, Division of Health Care Financing and Policy, Department of Health and Human Services):

This is a demonstration waiver and the demonstration would cover a five-year period. The development of the waiver and approval process with the CMS could take up to 18 months. Also included in this bill is significant evaluation planning so we can demonstrate this budget is neutral over five years.

CHAIR RATTI:

Is there anyone in support for A.B. 223?

DRAKE RIDGE (Pyramid Lake Paiute Tribe):

We are in support of A.B. 223. Native American adults are the most at risk of being diagnosed with diabetes over any other race or ethnicity.

MICHAEL HACKETT (Nevada Primary Care Association):

We are here in support of A.B. 223. We are hopeful in the future this will apply to all adult dental services provided on behalf of Medicaid.

CHAIR RATTI:

Is there anyone to testify in neutral on A.B. 223?

Senate Committee on Health and Human Services
May 30, 2019
Page 5

PEGGY LEAR BOWEN:

I want to thank you for taking care of all the children. Thank you for your hard work to make Nevada the greatest State in the world. Go Nevada.

CHAIR RATTI:

I will accept a motion on A.B. 223.

SENATOR WOODHOUSE MOVED TO DO PASS A.B. 223.

SENATOR SPEARMAN SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

* * * * *

CHAIR RATTI:

I will open the hearing on A.B. 150.

ASSEMBLY BILL 150 (2nd Reprint): Directs the establishment of a plan to expand the program to allow certain persons over 18 years of age to remain under the jurisdiction of a court. (BDR S-453)

JARED BUSKER (Children's Advocacy Alliance):

I am here to present A.B. 150 on behalf of Assemblywoman Daniele Monroe-Moreno. I will be reading from my testimony ([Exhibit C](#)).

During the Interim, the Children's Advocacy Alliance met with the Committee on Child Welfare and Juvenile Justice and presented issues regarding foster children who age out of the child welfare system. We were able to demonstrate that these youth have worse outcomes than their peers across a variety of areas including employment, housing, early parenthood and education.

Currently, Nevada has three sources of support for youth transitioning out of foster care. These programs include: The John H. Chafee Foster Care Independence Program, the Financial Assistance to Former Foster Youth program; and The Voluntary Court Jurisdiction program, commonly referred to as AB350. The AB350 program was created in 2011, after A.B. No. 350 of the 76th Session passed and became law.

Senate Committee on Health and Human Services
May 30, 2019
Page 6

The purpose of A.B. 150 is to create a working group to review these existing programs as well as other options for providing independent living and transitional supports for youth. The working group will seek to improve outcomes and ensure that in addition to resources, youth are receiving the appropriate supports that they need to successfully transition into adulthood.

I will now read the proposed amendment ([Exhibit D](#)). The amendment outlines a General Fund request of \$35,553 for fiscal year (FY) 2019-2020 and \$11,345 for FY 2020-2021.

SENATOR HARDY:

It appears the original fiscal note of over \$10 million came down to approximately \$37,000. Why is that?

MR. BUSKER:

Yes, the fiscal note was reduced significantly to about \$40,000 over the biennium.

CHAIR RATTI:

The fiscal note covers a staffing requirement, is that correct?

ROSS ARMSTRONG (Administrator, Division of Child and Family Services, Department of Health and Human Services):

The fiscal note will fund a half-time contracted position to coordinate all the groups that deal with family programs within the Division of Child and Family Services (DCFS).

CHAIR RATTI:

The report would go to the Legislative Committee on Child Welfare and Juvenile Justice, is that correct?

MR. BUSKER:

Yes, that is correct.

SENATOR SPEARMAN:

We have Senate Bill (S.B.) 194 which is designed to give some financial stability to those coming out of foster care. I think S.B. 194 would complement this bill, is that correct?

SENATE BILL 194 (1st Reprint): Establishes programs for certain persons of low-income and persons in foster care. (BDR 38-780)

MR. ARMSTRONG:

Yes, the training for that population would be helpful. Another thing that could come out of this study would be a federal financial contribution through our partnership with the federal Children's Bureau. I believe the training would be one element to make sure the youth get the support they need to succeed and not remain in our various systems of assistance or criminal justice.

SENATOR HAMMOND:

Is the objective to get federal dollars and not rely on General Fund dollars? What kind of programs are we talking about?

MR. ARMSTRONG:

Regular foster care receives Title IV-E funding. The federal match is about 60 percent to cover foster youth to age 18. The DCFS submits a plan for Title IV-E funding. The plan outlines what services need to be covered and that plan currently stops for youth at age 18.

Federal law allows for a program designed for youth between 18 and 21 years of age. The DCFS would be able to apply for that money. Any plan would have to be approved by the federal Children's Bureau. It is important to note that it is not a matter of changing the age from 18 to 21 in foster care. The federal Children's Bureau allows quite a bit of flexibility on how states can operate that program. This would be part of the DCFS's official Title IV-E plan. We would use this funding with the appropriate General Fund match.

MR. BUSKER:

The intent of this working group is not to maximize the amount of federal funding as a State. The working group wants to look at the existing programs we have and evaluate what is best for Nevada's foster youth and provide recommendations.

DENISE TANATA (Children's Advocacy Alliance):

I am here to answer any questions, but I believe Mr. Busker and Mr. Armstrong covered everything in regard to A.B. 150.

BAILEY BORTOLIN (Legal Aid Center of Southern Nevada):

We are in support of A.B. 150 as amended. This bill has changed quite a bit, and we believe we can get some good data from the study. We want to make sure the intent is to have the best outcomes for youth that have aged out of foster care.

We currently have a program in our State laws that we refer to as the AB350 program which was the bill that created the program. We have yet to come up with another name for it. We believe the AB350 program is a great State model that no other states have offered. It focuses on the independence of a youth. The stipends go directly to the youth. If the youth wants to stay in the foster home, they can use part of the stipend as rent. The youth learns responsibility, but still has oversight and support services surrounding them. This helps them become successful young adults. We are protective of this model and believe it is working well for a lot of youth.

We had concerns when we talked about extended foster care. Are we just treating them like a foster child when they are 20 years old? Are we teaching them how to be financially successful? Under this bill, the federal funding would go directly to the foster parents. The foster child may not be taught financial responsibility and independence.

The language in the amendment allows for a study to look at independence models and see if that works for federal funding. We want to protect the program we have in Nevada. We do not want to lose the focus on independence.

MARI NAKASHIMA (The Perkins Company; Family Focused Treatment Association):

The Family Focused Treatment Association is a group of specialized foster care providers. Both organizations are in support of A.B. 150.

BRIGID DUFFY (Chief Deputy District Attorney, Juvenile Division, Clark County District Attorney's Office):

I am testifying on behalf of the Department of Family Services in Clark County in support of A.B. 150. We see a need to improve outcomes for youth aging out of the foster care system. The AB350 program was put into effect eight years ago. It was innovative, but unfortunately, over the past eight years, we have stories of successes and we have stories of failures. We have no data to show

if the program works. Clark County spends about \$2.5 million in general funds per year on this program. There is nothing to say if that money is actually being well spent.

The first day of testimony on A.B. 150, we heard children who took part in the AB350 program in both Clark County and Washoe County. They talked about the deficiencies in the program. They said the program did not make them successful.

The working group study should determine if it is best to hand a stipend to foster youth. If it were my child and I was giving him or her \$700 a month, and he or she were not doing well, maybe I would have to stop the payment them until I saw movement in a better direction. Every child needs an on and off ramp to succeed.

It is my understanding that young adults ages 18 to 25 do not make the best financial decisions all the time. They need older adult support. I look forward to looking at how other states and jurisdictions are drawing down their Title IV-E funding to extend foster care services.

CHAIR RATTI:

We do not have the bill sponsor, so we will hold off voting on A.B. 150. There could be further amendments or technical adjustments. I will close the hearing on A.B. 150.

MS. BOWEN:

We might want to consider half way houses for foster youth. They could work to help foster youth become independent. One such half way house is Ridge House. Ridge House can work with young people and mentor them for success. The goal is successful human beings. We need to give them a bridge to success in life. Go Nevada.

Senate Committee on Health and Human Services
May 30, 2019
Page 10

CHAIR RATTI:

Seeing no further business, we are adjourned at 6:07 p.m.

RESPECTFULLY SUBMITTED:

Michelle Hamilton,
Committee Secretary

APPROVED BY:

Senator Julia Ratti, Chair

DATE: _____

EXHIBIT SUMMARY				
Bill	Exhibit / # of pages		Witness / Entity	Description
	A	1		Agenda
	B	3		Attendance Roster
A.B. 150	C	1	Jared Busker / Children's Advocacy Alliance	Written Testimony
A.B. 150	D	4	Jared Busker / Children's Advocacy Alliance	Proposed Conceptual Amendment