

**MINUTES OF THE MEETING
OF THE
ASSEMBLY COMMITTEE ON GOVERNMENT AFFAIRS**

**Eighty-First Session
April 27, 2021**

The Committee on Government Affairs was called to order by Chair Edgar Flores at 9:09 a.m. on Tuesday, April 27, 2021, Online and in Room 3143 of the Legislative Building, 401 South Carson Street, Carson City, Nevada. Copies of the minutes, including the Agenda ([Exhibit A](#)), the Attendance Roster ([Exhibit B](#)), and other substantive exhibits, are available and on file in the Research Library of the Legislative Counsel Bureau and on the Nevada Legislature's website at www.leg.state.nv.us/App/NELIS/REL/81st2021.

COMMITTEE MEMBERS PRESENT:

Assemblyman Edgar Flores, Chair
Assemblywoman Selena Torres, Vice Chair
Assemblywoman Natha C. Anderson
Assemblywoman Annie Black
Assemblywoman Tracy Brown-May
Assemblywoman Venicia Considine
Assemblywoman Jill Dickman
Assemblywoman Bea Duran
Assemblyman John Ellison
Assemblywoman Susie Martinez
Assemblyman Andy Matthews
Assemblyman Richard McArthur
Assemblywoman Clara Thomas

COMMITTEE MEMBERS ABSENT:

None

GUEST LEGISLATORS PRESENT:

Senator Pat Spearman, Senate District No. 1
Senator Melanie Scheible, Senate District No. 9

STAFF MEMBERS PRESENT:

Jered McDonald, Committee Policy Analyst
Erin Sturdivant, Committee Counsel



Judith Bishop, Committee Manager
Kyla Beecher, Committee Secretary
Cheryl Williams, Committee Assistant

OTHERS PRESENT:

André Wade, State Director, Silver State Equality
Kerith Conron, Research Director, Williams Institute on Sexual Orientation and Gender Identity Law and Public Policy, University of California, Los Angeles
Jeana Blackman Taylor, representing Women's Research Institute of Nevada, University of Nevada, Las Vegas
Shelly Cooley, representing Nevada Justice Association
Jason Flatt, Assistant Professor, University of Nevada, Las Vegas, School of Public Health
Maria-Teresa Liebermann-Parraga, Deputy Director, Battle Born Progress
Doralee Uchel-Martinez, Private Citizen, Reno, Nevada
Jay Cafferata, Private Citizen, Reno, Nevada
Tina Dortch, Program Manager, Office of Minority Health and Equity, Department of Health and Human Services
Kyra Morgan, Chief Biostatistician, Division of Public and Behavioral Health, Department of Health and Human Services
Calli Wilsey, Senior Management Analyst, Intergovernmental Relations, City of Reno
Sy Bernabei, Executive Director, Gender Justice Nevada
Julia Peek, M.H.A., C.P.M., Deputy Administrator, Community Health Services, Division of Public and Behavioral Health, Department of Health and Human Services
Erik Jimenez, Chair, Advisory Committee on Minority Health and Equity, Office of Minority Health and Equity, Department of Health and Human Services
Charina De Asis, Director, Office for New Americans, Office of the Governor

Chair Flores:

[Roll was called. Committee rules and video protocol were explained.] We will take the agenda in the order it appears. With that, I will go ahead and open the hearing on Senate Bill 109 (1st Reprint).

Senate Bill 109 (1st Reprint): Revises provisions relating to the collection of certain information by governmental agencies. (BDR 19-95)

Senator Pat Spearman, Senate District No. 1:

I am here to present Senate Bill 109 (1st Reprint), which would require state agencies to collect sexual orientation and gender identity (SOGI) data like other demographic information such as age, ethnicity, income, race, et cetera. The requirement includes an option for individuals to decline self-reporting SOGI information to a state agency. Let me say that again, the requirement includes an option. In other words, you do not have to give

that information if you do not want to. You do not have to relay that to any state agency. Overall, general data pertaining to the lesbian, gay, bisexual, transgender, and queer, plus community across the nation and in the state of Nevada is becoming more readily available. However, that information is often fragmented. We have learned from research the LGBTQ+ community suffers disproportionately from negative health outcomes such as depression, cancer, high rates of smoking, and comorbidities, to name a few. Just recently, the Williams Institute on Sexual Orientation and Gender Identity Law and Public Policy, a think tank at the University of California, Los Angeles (UCLA) School of Law released a study about the disproportionate impact of the COVID-19 pandemic on the LGBTQ+ community. Further research illustrated that individuals who dare to challenge traditional ideas of gender identity, including those who identify as transgender, also face employment and housing discrimination, assault, and sometimes even murder.

Let me say at the outset, this bill does not require anyone to change their religious ideology, social strata, or church affiliation. It does not require any of that. Often when a bill or an idea related to the LGBTQ+ is introduced, I hear statements reflecting personal canonical doctrines or belief. Let me just be clear again, this bill has nothing to do with religious ideology or philosophy. In Nevada, specific data that references the well-being of the LGBTQ+ community and strategies for scaling up interventions to address growing needs is not currently available. By collecting SOGI data, we can better know the number of LGBTQ+ Nevadans in the state, the outcomes of social determinants of health, and who the institutions that Nevadans expressing diverse sex and/or gender identities turn to for help and how they are able to support them by providing services and information.

For more than a decade, LGBTQ+ advocates in Nevada have been pushing health care providers, nonprofit organizations, schools, and state agencies to collect data on sexual orientation and gender identity. Last year, the state of Nevada's Department of Health and Human Services (DHHS) made it a practice to collect optional SOGI data during the contact tracing for COVID-19. In a memo to the Advisory Committee on Minority Health and Equity for the Office of Minority Health and Equity in the Department of Health and Human Services, Director Richard Whitley stated that "The Department is committed to greater data stratification across all vulnerabilities, abilities and demographics, including those reflecting Sexual Orientation and Gender Identity." Some other state agencies are already collecting SOGI data, but the effort is not consistent, and it is not standardized.

The most crucial components of Senate Bill 109 (1st Reprint) are found in sections 2 and 4. Section 2 of the bill defines a governmental agency as any state or local government office. Section 4 requires a governmental agency to collect SOGI data, maintain confidential records of the information, and use the data for certain authorized purposes. These purposes are limited to demographic analysis, coordination of care, improvement of care, improvement of services, conducting research, and fulfilling reporting requirements for federal or state law or informing policy or funding decisions. Section 4 also requires a governmental agency to submit an annual report with a summary of information to the director of the Legislative Counsel Bureau (LCB) on or before December 31. It is important to note that individuals

still have the option to self-report their sexual and gender identity. It is not mandatory. Let me say that again, it is not mandatory.

Some of you may remember Senate Concurrent Resolution 1 of the 32nd Special Session, which urged proactive efforts to stem the public health crisis resulting from systemic racism and magnified by the COVID-19 pandemic. Mr. Chair, I understand that when we start talking about systemic racism it makes some people uncomfortable. For those who have experienced it all of their life, trust me, it makes us uncomfortable as well, but we must have these courageous conversations. Senate Bill 109 (1st Reprint) is a continuation of that mounting effort to curb economic, health, and social disparities also experienced by Nevadans who identify as sex and gender diverse. Collection of demographic data is how data is made meaningful. Given the immense underreported, underacknowledged, and misunderstood suffering and the needs of the sex- and/or gender-diverse population, many have expressed favor with this proposed measure.

I do not believe that the bill has any fiscal impact. If it does, I have some information from a couple of people who do this sort of thing with computers and analytics. I will be glad to share that if the question is asked. Mr. Chair, many times members of the LGBTQ+ are ignored, dismissed, and sometimes spoken of in pejorative terms. The one thing that I want everyone who is listening, including those who are listening over the Internet, to understand is that when we collect this data it will inform policy in terms of health care, employment, housing, and everything else. It will inform how policy is developed.

I stressed at the beginning of my testimony that it has nothing whatsoever to do with someone's religious affiliation. I am not sure how many know this, but I am a graduate of the Seminary of the Southwest. I studied three years in all kinds of religions and spirituality. I checked all of that and this has nothing to do with that.

The other thing that I would like to say and set on the record is that members of the LGBTQ+ community in Nevada pay taxes. We have cars; we pay taxes on that. If we buy gas, we pay taxes on that. Those taxes go to keep the roads functioning, repair the roads, and expand the highways. We pay property taxes. Those taxes go to support our schools and school districts. The bottom line is this is a community that currently is underrepresented in the statistics that are reported. We have got to make sure we find out the exact number, or as close to that as we can, because there are many opportunities to apply for grants, not only from the federal government, but philanthropic grants. They will always ask for the demographic data to support your request and who it is you will be helping.

Again, I say, this bill has nothing whatsoever to do with anyone's ideology, philosophy, or church affiliation. If you want to look at it in concert with what we already do, we try to collect data on autism, Alzheimer's, kidney disease, the number of college students, and the number of senior citizens—those who are 55 and over. This is just another opportunity for us to make sure that the demographic information we have on Nevadans is whole and complete. With that, I would like to turn it over to Mr. André Wade.

André Wade, State Director, Silver State Equality:

Silver State Equality is a Nevada-based statewide LGBTQ+ civil rights organization. As Senator Spearman mentioned, overall, there is a lack of data about those who identify as lesbian, gay, bisexual, transgender, and queer in Nevada. Therefore, it is difficult to determine the number of Nevadans who identify as LGBTQ+, their health and well-being outcomes, and which interventions are successful to address social determinants of health. Moreover, because we do not know the number of LGBTQ+ Nevadans, we are unable to scale interventions appropriately and effectively. Often, the reason for the lack of data is simply because the questions are not being asked.

Sexual orientation and gender identity data is important because we know that when someone identifies as LGBTQ+, they have different social determinants of health and particular risk factors that are different from others. Even someone's actual and perceived treatment and care when accessing services play an unfortunate role. On almost any measurement of positive outcomes, those who identify as LGBTQ+ are at the bottom of those measurements. On almost any measurement of negative outcomes, those who identify as LGBTQ+ are at the top of the measurement. If you factor in race, then many individuals experience compounding negative health outcomes. Because we do not collect SOGI data, we are unable to address these health disparities we come to estimate based upon national studies. The national data gives us a sense of what is going on with the LGBTQ+ population, but we desperately need to know what is happening in Nevada. A recent report from the U.S. Census Bureau shows that Nevada is 1 of 11 states, plus the District of Columbia, which had a higher percentage of same-gender couple households than the national percentage in 2019. Unfortunately, with this data, we do not know the number of individuals who identify as LGBTQ+, but we are able to get a snapshot of what rates of unemployment and education attainment look like for same-gender households and how many are veterans. We are left, as we usually are, making inferences about the LGBTQ+ population as a whole in Nevada. We are still left in the dark about a population of individuals who makes up 8 percent of Nevada's total population.

Most recently, with HIV's criminalization, we try to find out the rates of disparities for arrests, convictions, and prosecutions for those convicted of HIV crimes. Because we do not collect the data on LGBTQ+ members of the community, we are unable to make those determinations. There was a point where someone checked the box for male and female, and we had to guess that maybe that someone was transgender because we simply do not know. Thankfully, the Office of Minority Health and Equity, of which I am member of the Advisory Committee on Minority Health and Equity, plans to release, for the first time, limited data gathered for its 2020 minority health report that will include data on the LGBTQ+ population. The data is not perfect, and there will be improvements done for 2021. However, this is a step in the right direction to not only collect information but to also report out on it. Moreover, the Department of Health and Human Services made the decision last year to start the collection of SOGI data when contact tracing was being done related to COVID-19. This makes Nevada one of just a few states taking leadership and ensuring SOGI data is collected so we have a better understanding of the rates of diagnoses and outcomes of Nevadans who have been diagnosed with COVID-19.

Referring to S.B. 109 (R1), there are a few key components that I would also like to hone in on. One is that it is optional for someone to respond with information about their identity when asked. That is very important to know. Another key component of the bill is that someone cannot be denied services for not responding to the questions. Everyone will be asking what demographic information is already being collected, and everyone can decide for themselves as to whether or not they will respond.

Not only will the SOGI data help the state to better coordinate services, scale interventions, and improve the health and well-being of LGBTQ+ Nevadans, the increased data can be used when applying for federal grants because when asked about the number of LGBTQ+ people served or the community's health outcomes, we will have more specific data. Increasing the number of federal grants within the state of Nevada is a longstanding and achievable goal. Sexual orientation and gender identity data will undoubtedly position the state of Nevada to be better prepared to report on the number of LGBTQ+ Nevadans and other data points when applying for federal grants.

Regarding cost to the system to collect SOGI Data, the Massachusetts Department of Mental Health reported that there was no fiscal cost to them to make changes to begin collecting SOGI data. They were able to change the application using Adobe Acrobat. Additionally, they were able to make changes to their mental health information systems module by configuring it in-house. They serve about 30,000 people per year. Thank you for your time and attention.

Kerith Conron, Research Director, Williams Institute on Sexual Orientation and Gender Identity Law and Public Policy, University of California, Los Angeles:

The Williams Institute on Sexual Orientation and Gender Identity Law and Public Policy conducts rigorous independent research to inform law and public policy. I have been studying SOGI and how to gather data about LGBTQ+ people for the last 20 years. I started at about age 12. That is a joke, but I have been doing this for quite some time. It is my pleasure to be here today to testify on behalf of Senate Bill 109 (1st Reprint) in support of SOGI data collection in local and state systems. There are three points that I would like to make today: we know how to ask questions about SOGI, people know how to answer questions about SOGI and are willing to do so including in the state of Nevada, and Nevada needs this data to effectively plan and implement programs and services.

On the point about asking about SOGI, questions about SOGI have been on federal surveys for the last two decades—surveys such as the National Survey of Family Growth, Behavioral Risk Factor Surveillance System, and the Youth Risk Behavior Survey (YRBS). They have been more commonly included on other publicly funded surveys to identify transgender people for the last seven years. We have published best practices at the Williams Institute for SOGI data collection focused on transgender and sexual minority populations. All of the research shows that SOGI can be measured accurately.

On point number two, Nevada youth and adults know how to answer SOGI questions and they are willing to do so. In 2019, almost 15 percent of Nevada youth self-identified as

LGBTQ+ on the Nevada Youth Risk Behavior Survey. Now, that was the only information available about LGBTQ+ youth in the state of Nevada. Looking at data from the YRBS from the state and the nation as a whole, I can tell you that 6 percent of straight youth attempt suicide in a one-year period, a quarter of LGBTQ+ youth attempt suicide in a one-year period, and over a third of transgender youth attempt suicide in a one-year period. Suicide disparities have been observed among youth along SOGI lines for decades. I am certain that if you look in your data in Nevada, you would find similar patterns because they persist everywhere. Suicidality is a significant issue for transgender folks. About 40 percent report a lifetime of suicide attempts. It is not because there is anything inherently wrong with people who are transgender or sexual minorities, but the evidence shows that it is discrimination, harassment, and violence that lead to elevated rates of mental health challenges and suicide attempts. Environments that are supportive and free of abuse, harassment, and rejection, people do just fine in, and these disparities disappear.

In terms of adults in the state, between 2015 and 2017, 5.5 percent of Nevada adults identified as LGBTQ+. How do I know this? The Gallup Daily Tracking poll collected anonymous telephone survey data from people all across the country, which allows me to say some things about people in the state of Nevada that have not really been accessible to folks in Nevada itself who are trying to plan programs and services. Unfortunately, Gallup is not collecting this data anymore, so it is really essential for the state to step up and make sure SOGI data is collected in all of your vehicles—your YRBS, Behavioral Risk Factor Surveillance System, and service delivery systems. You need these data in order to effectively implement programs and services. Having worked in the state of Massachusetts for two decades and in the City of Boston, I can tell you that Boston started collecting SOGI data about 20 years ago. The state of Massachusetts has been rolling this out for the last five to seven years. It does enable effective planning, as Mr. Wade and Senator Spearman said; it does position the city and state government to apply for block grants, which are so helpful given the elevated rates of suicidality, tobacco use, and HIV among some segments of the community. As I will share with you in a little bit, elevated rates of poverty, too, are a problem for LGBTQ+ people.

Given that I have access to data that most people do not, I can say that there are about 145,000 LGBTQ+ in the state of Nevada. More than half are people of color, including about a third who are Latino and 1 in 5 who are multiracial. More than 1 in 5 LGBTQ+ adults in the state of Nevada who are over the age of 25 are raising children. Analyses of data show that the state of Nevada collected data between 2014 and 2017 and then stopped collecting data on your state Behavioral Risk Factor Surveillance System. Remember, I am a researcher and I can access things that many people cannot. We analyzed these data and found that 1 out of 5 LGBTQ+ adults in the state of Nevada were living in poverty before the COVID-19 pandemic. Nearly 2 in 5 transgender adults and 1 in 3 LGBTQ+ people of color in the state of Nevada were living in poverty. This was before the pandemic. Work that we have conducted at the Williams Institute, as well as others, indicate that the economic vulnerabilities experienced by the LGBTQ+ people, particularly LGBTQ+ people of color, have been exacerbated by the pandemic. These LGBTQ+ adults in the United States are more likely to be laid off or furloughed from jobs and to report problems with affordable

basic household goods and paying rent or mortgages. For LGBTQ+ people of color, these economic challenges were heightened. At this point in time, we need LGBTQ+ and SOGI data collection now more than ever. As far as cost, I would say I would not let the perfect be the enemy of the good or progress. There are very good reasons to roll out SOGI data collection across the systems and to do upgrades. Upgrades are occurring naturally within the system and just consider including SOGI data collection as part of the usual sort of routine upgrades and maintenance.

Chair Flores:

Thank you for your presentation. I would get beat up by the Committee if I did not clarify the pronunciation of "Nevada." Your presentation included so many "Ne-vah-duhs." I even feel awkward saying it. We are just having a little bit of fun.

Kerith Conron:

I apologize. I am so sorry. I am a New Yorker who has lived in Boston and then California, so I am totally mixed up.

Chair Flores:

No worries. We know it happens. We are just having a little fun. Thank you for joining us this morning. Senator Spearman, do you have any other remarks or other speakers?

Senator Spearman:

I have a couple of people who will speak in neutral: Tina Dortch, who is the director of the Office of Minority Health and Equity, and Kyra Morgan from DHHS. She deals with analytics, and she will talk about how we can overcome the hump of what some people think will be a very costly effort. I also want to say that I did get a call from someone who asked if this included an encounter with law enforcement. Would they have to ask? No, they do not. We are really talking about when you fill out any type of application or driver's license. That is when this would come into play. It is not people on the street who would have to ask about it. We are really talking about agencies that help and provide services to others. With that, Mr. Chair, we will stand for questions.

Assemblyman Matthews:

I have a question regarding two sections. Section 4, subsection 4, talks about the requirement to report the summary of the data. Section 3, subsection 2, talks about the fact that "Various governmental agencies collect demographic information on race and ethnicity." This is designed to kind of bring other communities into line with that. Regarding section 4 and the summaries, do we have requirements or summaries of this data to currently be reported for information on race and ethnicity to LCB? If so, could you talk through some of the things that are then done with the data once it is reported?

Senator Spearman:

I think that Dr. Conron explained how the data is used, but let me see if I can simplify it. Right now, we collect data on gender, ethnicity, age, how many people are experiencing Alzheimer's, and how many children we have who are on the autism spectrum. We already

collect that data. That data is not connected to someone's name; they only want the numbers. The data will be used to make sure our policies and services are informed. I hear a lot around the building that we leave money on the table because we do not pull down federal grants. This information will also help us pull down whatever federal grants are available to provide services for this community. It will also give us an opportunity to apply for philanthropic grants, nonstate- and nongovernment-related, because they generally will ask what the population is who they are trying to serve. If I understand your question, the data will be used just like the data that is collected on gender and autism. We do not mention the children's names. Someone who is getting services for Alzheimer's, their name is not mentioned. There are no identifying marks. This data will simply fold in for the same purposes of the data that is already collected.

Assemblyman Matthews:

Section 3, subsection 3, states, "Compared to the broader community, lesbian, gay, bisexual, transgender and questioning persons experience disparities." That includes a number of different metrics, one of which is poverty. Could you let the Committee know what the source is for that claim? What might the respective poverty rate be?

Senator Spearman:

I will get Dr. Conron, who is a noted researcher from UCLA, to answer that question.

Kerith Conron:

We have analyzed data from the Nevada Behavioral Risk Factor Surveillance System to provide information about poverty rates by SOGI. I posted the SOGI data into the chat for everyone to see. I am also happy to send along a copy of our report, which does include information about poverty rates for straight and nontransgender folks in the state.

Senator Spearman:

If I might add for Nevada, just like in all research, there are several sources that academicians collect and combine to get the information that reflects the most accurate picture. The data that she is talking about is data that has been collected. The data that is mentioned in section 3 is really about the research that has been done that allowed us to make that statement. That is a collective research. I think the best answer is to look at Dr. Conron's research activities and what she has already quoted, for those who want to know and want to make sure that we are quoting accurately.

Chair Flores:

Senator Spearman, I know that it was referenced that the information was shared in the chat. Because we have this hybrid model, I do not believe anyone in the Committee room is on the actual chat. I think the easiest way to get that information would be to share it with Ms. Judi Bishop or Mr. Jered McDonald, and I could make sure that link is shared with all members in the room. I think it would be good to have that link shared with the committee policy analyst or our committee manager.

Assemblyman Matthews:

Thank you, Senator Spearman. I just want to make sure we know exactly what it is we are doing with this data.

Chair Flores:

Members, do we have any additional questions? [There were none.] Thank you, Senator Spearman for your presentation and thank you to your copresenters. At this time, we will go to those wishing to testify in support of Senate Bill 109 (1st Reprint).

Jeana Blackman Taylor, representing Women's Research Institute of Nevada, University of Nevada, Las Vegas:

I sit on the community advisory board of the Women's Research Institute of Nevada (WRIN). We are based out of the University of Nevada, Las Vegas (UNLV). I am here today to testify on behalf of WRIN in support of S.B. 109 (R1). I want you to know that in our research, when we use secondary data, we often find that items will be categorized by race or gender, but rarely by both. Lack of such data causes us to miss systemic trends that often disproportionately affect women of color. We support Senator Spearman's efforts to expand data collection so that we have better tools for addressing systemic issues. Thank you so much for your time.

Shelly Cooley, representing Nevada Justice Association:

I am also a family law attorney. We support S.B. 109 (R1). It is important for the state of Nevada to understand its residents and collecting SOGI data is going to best help Nevada represent its stakeholders.

Jason Flatt, Assistant Professor, University of Nevada, Las Vegas, School of Public Health:

My research specifically looks to understand the needs of LGBTQIA+ people. I wanted to just speak about how important it is to collect SOGI data so that we can understand the health concerns of our population living here in Nevada. We know that LGBTQIA+ people face unique health disparities compared to their cisgender, nontransgender, and heterosexual peers. We see this nationally. We see it with the data we have collected with the Behavioral Risk Factor Surveillance System data with the Centers for Disease Control and Prevention. Currently, we are unable to really understand the needs of Nevadans in terms of how their health is and how we can think about unique needs of our underserved communities. This includes those who may be racial/ethnic minorities who also identify as LGBTQIA+ or people who cannot access some of the services. For instance, here in southern Nevada we know that many of our homeless youth identify as LGBTQIA+. We know that they are not able to always access services that they need or get support. If we are going to really lead the nation in thinking about ways to improve the health of our diverse population here in Nevada, it is vital that we collect SOGI data.

I am really excited for the opportunity to speak. I have been here in Nevada for over a year. I am currently leading work thinking about LGBTQIA+ people who are living with dementia or may have Parkinson's disease. We are also thinking about the needs of people who may

be at greater risk for COVID-19. We have not been able to really know about the potential concerns because SOGI has not been collected across the state. I want to support this bill and let you know that we are doing unique work at the UNLV School of Public Health to advance work for people who are LGBTQIA+. I really hope that you will consider this bill and support it.

Maria-Teresa Liebermann-Parraga, Deputy Director, Battle Born Progress:

We are in full support of S.B. 109 (R1) and thank Senator Pat Spearman. I say ditto to what previous folks and the presenters have said. I hope you all support this bill so that we can better serve a community that has often been ignored for so long.

Doralee Uchel-Martinez, Private Citizen, Reno, Nevada:

Thank you so much for this bill. I do support this bill. Ditto to the prior callers. As we all know, people with disabilities also intersect with the LGBTQ+ population.

Jay Cafferata, Private Citizen, Reno, Nevada:

I would like to thank Chair Flores and the Committee for listening. I would like to thank Senator Spearman for bringing this legislation as well as all of the very hardworking and dedicated folks that have worked in the state of Nevada for the last two decades to change the laws in Nevada to protect all of us. I would like to draw our attention to the census numbers that came out yesterday because this is exactly why collection of this data is so important. There are a number of states that have lost congressional representation due to a lack of counting of bodies. I would like to really urge the Committee to support and pass this legislation because without representation, we have no voice in the government or the laws that govern or change our lives, especially when it comes to social services, health care, education, and all of these things. Thank you for the time and ability to testify in support of this bill. I look forward to seeing it move forward.

Chair Flores:

We will take the next caller in support of Senate Bill 109 (1st Reprint). [There were no more callers.] At this time, we will invite those wishing to testify in opposition to Senate Bill 109 (1st Reprint). [There were no callers.] At this time, we will go to those wishing to testify in the neutral position for Senate Bill 109 (1st Reprint).

Tina Dortch, Program Manager, Office of Minority Health and Equity, Department of Health and Human Services:

I will use my time to address how provisions of this bill support the Office of Minority Health and Equity's (NOMHE) mission, vision, and purpose. The late Assemblyman Tyrone Thompson reestablished the office by sponsoring Assembly Bill 141 of the 79th Session. His vision was reflected in the office's new name, the Office of Minority Health and Equity. Equity, when used in terms of health, means all people having the ability to obtain resources at levels unique to them in order to remain in their optimal and overall well-being. Per Amendment 163 to S.B. 109 (R1), acknowledging a person's preferred gender expression reinforces their self-identity, has a positive impact on a person's mental health and thus their optimal and overall well-being. As I mentioned, this is an objective shared by NOMHE.

With NOMHE's name change came the intentional expansion of its targeted communities with advocacy performed on behalf of all vulnerable communities including SOGI demographics, in addition to those identifying as Black and Indigenous people of color. Adopting Senate Bill 109 (1st Reprint) is, therefore, in keeping with the intent of the late Assemblyman Thompson's wishes as it recognizes SOGI demographics to be a part of racial and ethnic demographics.

Each April is National Minority Health Month. The Office of Minority Health and Equity identifies things that reflect our state's current health-related trends and equity-focused efforts for the next 12 months. One of the four topical areas high on NOMHE's radar, as attested to in the Governor's 2021 proclamation, is, in fact, promotion of increased data stratification to include things like ability status and SOGI-related demographics. By proposing the collecting of SOGI data, including data points capturing gender expression, Senate Bill 109 (1st Reprint) aligns Nevada with national trends in collecting data, making national comparisons possible. It also supports NOMHE's efforts to upstream equity, making it possible to use data-developed culturally sensitive approaches. Put quite plainly, behavior is what we do, but culture is how we do. Data collection, per Senate Bill 109 (1st Reprint), was served to document this statement.

**Kyra Morgan, Chief Biostatistician, Division of Public and Behavioral Health,
Department of Health and Human Services:**

I think Senator Spearman introduced this bill so well that I can almost just say ditto. I did just want to briefly give my perspective as a biostatistician who is often asked to quantify the impacts of either various diseases or even our social programs on subgroups of Nevada's population. We know that the characteristics of who we are and how we live determine a large part of our health. You have probably heard this as the social determinants of health: where you live, your socioeconomic status, in addition to your physical health, demographic characteristics such as race, ethnicity, sex, age, and ZIP Code, along with sexual orientation and gender identity. In order to best serve our clients regardless of the organization we represent, we need to be able to first identify and quantify any disparities that might exist through data so we can adapt the way we do business in order to have equal outcomes across our different groups. This bill would allow us to do that. We need to consider this variable for data collection as we would consider age or geographic region, for example, as a necessary descriptive demographic that is essential for us to collect in order to be able to deliver services to the best of our ability.

Adding a field to a database is typically an easy add. It might incur a one-time charge for a vendor-based solution. But in general, it is not difficult from a technology perspective to add a field to a database. We believe that we are able to make these adjustments, in the Department of Health and Human Services, with very minimal costs. I think Julia Peek is actually on the line to talk more about removal of a fiscal note from the Division of Public and Behavioral Health, Department of Health and Human Services. That is an organization which might even have the most disparate data sets that would be affected by this legislation.

Here in DHHS, we are able to utilize probabilistic data-matching across different disparate data sets to acquire information on our clients where we might know the information in one place but not the other. For example, if we collected SOGI data for our Medicaid population, then we would be able to, with pretty high certainty, use that data to better understand clients across the board because we know that people we serve in one place are often the same people we serve in a number of other places.

Regarding one of the questions from the Committee on how we use the data, COVID-19 vaccination distribution is a good example. We have identified that our Hispanic population is getting vaccinated at a disproportionately low rate. We have been able to host vaccination events in communities where we have large Hispanic populations in order to promote equity in those populations. This data would be able to be used similarly. Again, just consider it as a different demographic characteristic. In general, I just wanted to close by saying this bill is good public health policy because it is the logical first step in being able to quantify these disparities so that we can better serve Nevadans.

Calli Wilsey, Senior Management Analyst, Intergovernmental Relations, City of Reno:

We are here in neutral today to ensure clarification was on the record regarding whether this bill would apply to situations when law enforcement is collecting data on their forms used in investigative processes. We not only appreciate the bill sponsor talking to us in advance of the hearing, but greatly appreciate Senator Spearman stating, during today's presentation, that is not the intent. Our legal team interprets that the current bill language would mean that a police officer would need to ask a person about their sexual orientation and gender identity in situations such as a routine traffic stop or gathering information for a witness statement. We look forward to working with Senator Spearman and LCB on this clarification in the bill. We appreciate Senator Spearman's attention to our question and the opportunity to testify today.

Sy Bernabei, Executive Director, Gender Justice Nevada:

I am in support of this bill. I apologize; I was in the queue earlier. We need to collect accurate data about our LGBTQ+ community because it is critical in making sure our needs are better met. We need to be visible in the eyes of the clinical programs where we experience health disparities. When the government collects data, it impacts the decision-making from the top to the bottom. To have a better understanding of the diversity of our community will greatly strengthen the fight for equality and access to health care. People are always asking how they can be a better ally and it is this, taking action.

Julia Peek, M.H.A., C.P.M., Deputy Administrator, Community Health Services, Division of Public and Behavioral Health, Department of Health and Human Services:

I am here to testify in neutral and acknowledge Senator Spearman's efforts in this area. With Amendment 163, the Division of Public and Behavioral Health is able to remove our fiscal impact. As Ms. Morgan noted earlier, we do have to make modifications to many systems. We see great value in doing this. We just need extended time and the ability to apply for grants and incorporate these changes as we make normal changes to our information

technology system, specifically the vendor-based systems. I will acknowledge that we do not know if there is disparity until we collect the data. It is really important, as was noted earlier by Ms. Morgan and others, that if we do not ask the data, we do not know if disparity is present. We have done it with age, geographic, race, and ethnicity. This just really needs to be incorporated across the board. We support the efforts and are very happy that we can remove the fiscal note and provide updates on implementation in the future.

[Written testimony was also submitted, [Exhibit C.](#)]

Chair Flores:

We will continue with those wishing to testify in the neutral position for Senate Bill 109 (1st Reprint). [There were no more callers.] While we did not have anybody calling in opposition, we did have some folks signed in in opposition. If for whatever reason we were not able to get them on the phone, I will make the record clear that Eric Spratley, Executive Director, Nevada Sheriffs' and Chiefs' Association, John Jones, representing the Clark County District Attorney's Office, and Chuck Callaway, Police Director, Las Vegas Metropolitan Police Department were all in opposition to Senate Bill 109 (1st Reprint). Senator Spearman, do you have any closing remarks at this time?

Senator Spearman:

I have not heard from the people who have signed in for opposition, but I am willing to speak to them about whatever concerns they have, and I am sure that we can iron them out. I can be reached via Zoom or telephone. I would encourage them to contact me so we can iron it out. I am pretty sure once they understand exactly what the bill is designed to do and what it will not do, we can take care of whatever those concerns are.

The first thing I want to say is that the bill acknowledges that everybody might not be able to get this done at the same time. The amendment reflects that and says as you can do it, please do it. The second thing is I want to highlight something that Dr. Conron said. She said 125,000 members of the LGBTQ+ community is what the data currently shows: 125,000 is half the population of Henderson, Nevada, and is more than the 57,000 people who live in Carson City, Nevada. You can see how large the population is right now. I am pretty sure that once we collect the data, we will have more information.

I said in my opening remarks that one of the places where LGBTQ+ are discriminated against is in housing. That is very important because there are many in the homeless population who are members of the LGBTQ+ community, I think Dr. Conron mentioned that, too, in terms of teens. We also have those at the end of the spectrum, and those are our elders. We have to make sure that whatever we are doing policy-wise, in terms of homelessness, that we are including those considerations as well.

It struck me last night as I was thinking about this, next week will be the second anniversary of Assemblyman Tyrone Thompson's departure. I thought about it because I was thinking about the Office of Minority Health and Equity. He worked so hard to get that done and make sure it was funded. As I thought more about it and SOGI, I thought to myself, he has

got to be pleased that we are not only picking up where he left off, but we are also expanding the application of his efforts. Many more people may not know his name, but they will certainly know his impact. With that, Mr. Chair, I want to thank you and the Committee for hearing this bill.

Chair Flores:

Thank you, Senator Spearman. I am confident that you will have an opportunity to speak with those registered in opposition. I am sure we will be able to get to a place where we are all comfortable. Thank you for your presentation, and to your copresenters, thank you for joining us this morning. With that, we will go ahead and close out the hearing on Senate Bill 109 (1st Reprint). We will open the hearing on Senate Bill 222 (1st Reprint).

Senate Bill 222 (1st Reprint): Revises provisions relating to governmental administration. (BDR 18-245)

Senator Melanie Scheible, Senate District No. 9:

I am in the enviable position of getting to present to you Senate Bill 222 (1st Reprint) with a high-level overview. Then, I have somebody much smarter and more dedicated than me, Erik Jimenez, to present the sections of the bill and answer all the hard questions. Let me first just give you an overview of what S.B. 222 (R1) does. It establishes diversity liaisons within government agencies. It is, in large part, a permissive bill. It does not require that every single agency in the state hire somebody new. It does require agencies that have the capacity to either designate or hire a diversity liaison. This could be a newly hired person, or it could be somebody who is already working within that agency that is designated as the diversity liaison to coordinate with a couple of key offices in the state of Nevada to ensure that we are meeting the needs of every population of Nevadans. One of those is the Office of Minority Health and Equity in the Department of Health and Human Services (DHHS), which we just heard about from Senator Spearman in Senate Bill 109 (1st Reprint). As you all are well aware by now, it is an important part of the Nevada government that ensures that everybody in Nevada is receiving equal access to health care opportunities under the law, and is being treated with respect and dignity.

The point of S.B. 222 (R1) is to ensure, in every agency, there is a point of contact, a person who is responsible for ensuring that our government agencies are meeting the needs of every Nevadan. That could mean that somebody has a disability and needs access to a website or a meeting that is not currently accessible to them. It could mean that members of a minority group have recognized that there is terminology still being utilized in the state that is offensive or outdated. It could mean that there is a group of people who have been systemically excluded from a conversation and they want to be included. Senate Bill 222 (1st Reprint) says there will be a person in the Department of Education, in DHHS, and in the Legislature, who is the point person for that issue. That person will be tasked with communication with those groups. It might mean holding stakeholder meetings, reading a letter, or having a phone conversation.

I think one of the key elements of S.B. 222 (R1) is this yearly meeting that the Office of Minority Health and Equity, the Nevada Commission on Minority Affairs within the Department of Business and Industry, and the Office for New Americans within the Office of the Governor would convene to have all these diversity liaisons in the same place at the same time—whether that is physically or, in the future, via video—to allow them to converse with each other and say, here is what worked for us, here is what did not work for us, and here is something that we experienced that people in Nevada need and we were able to provide for them. We provide people who are looking for a better relationship with their government a path to establish that. I think that is the high-level overview. As I said, I am lucky to be joined by Mr. Jimenez, who can walk you through the sections of the bill and answer the hard questions.

Erik Jimenez, Chair, Advisory Committee on Minority Health and Equity, Office of Minority Health and Equity, Department of Health and Human Services:

Senate Bill 222 (1st Reprint) is a very simple bill, but I think it is critically important. Senator Pat Spearman and Governor Steve Sisolak both issued resolutions and proclamations outlining that racism was a public health crisis. Our office, the Office of Minority Health and Equity, was tasked with coming up with strategies to ensure that we could combat racism and make sure all members of the community were able to have their voices heard. In the midst of that, we were also seeing a global pandemic. I think it should come as no surprise to anyone here that members of the minority communities were getting absolutely decimated and were struggling to access services. From a government perspective, we have a responsibility to do the best that we can to meet people where they are. Sometimes, although well-intentioned, decisions are made in Carson City, Nevada, that affect minority communities, but the input of those minority communities is not taken into account.

This Committee may recall Assembly Bill 264 of the 80th Session from Assemblywoman Sarah Peters. That bill has been tremendously successful establishing tribal liaisons. This bill is attempting to take that one step further and say, how can we ensure that all of our minority communities are having their needs met? With that, I am happy to walk through the bill. It is a pretty short bill.

Sections 3 through 8 of the bill are purely definitional sections. I would note the definition of "minority groups" is based off an existing one in statute in that particular chapter.

Section 9 states that, "Each state agency shall make a reasonable effort to: 1. Collaborate with members of minority groups in the development and implementation of policies and programs of the state agency that directly affect minority groups." This particular piece is tremendously important. I know there might be a few folks from our blind community who are on the phone. You might not know this, but many of our websites, even state legislation, are inaccessible to the blind. I think it is important that we make sure that our services are accessible to everyone. Section 9, subsection 3, states that state agencies should "Communicate effectively with minority groups by making information about programs and services available in multiple languages whenever possible."

Section 10 has state agencies, when they can, designate a diversity and inclusion liaison, which would be that point person that Senator Scheible mentioned, to serve as the contact person for minority groups.

Section 11 is very simple. It just says that the agency should make the contact information of the liaison available and then provide that information to the three agencies who do this work every day in the community.

Finally, and I think this is the most critical piece of the bill, section 12 requires a joint and collaborative meeting among all of the agencies. I think, too often, we exist in silos between state agencies. Oftentimes, there is some very good work that is being done. When we think about what we are going to need to do to break down the barriers that minority communities face and how we work to address systemic racism, it is really going to be an all-hands-on-deck effort. This meeting that would be organized by these three agencies is critically important to making sure that happens. With that, I am happy to take any questions.

Assemblyman Ellison:

What do you do with these little bitty mom-and-pop outfits that have one employer and two employees? Number one, you cannot find employees right now, period. Say you have got such a small shop, how would this bill affect that?

Erik Jimenez:

It would not. This is affecting state agencies, not businesses. For the smaller agencies, and I think it reflects this in the revised copy of the bill, I believe there are no fiscal notes on the revised copy of the bill. It is just saying one person. If there were a smaller agency, and I would note that the agencies listed in the bill—the Office for New Americans, the Nevada Commission on Minority Affairs, and the Office of Minority Health and Equity—are some of the smallest agencies in the state or offices. They have all been super supportive and great to work with on this bill.

Assemblyman Matthews:

Just a point of clarification, when the bill refers to a "minority group," that is not intended to mean groups as a formal or incorporated organization necessarily, right? It could also mean using the word "groups" in sort of the informal sense as well, is that correct?

Erik Jimenez:

I believe that is correct.

Assemblyman Matthews:

I noticed that section 4, subsection 1, paragraph (c), spells out the definition of "minority group" as "A group of persons that share the same sexual orientation." Section 4, subsection 2, says that "'sexual orientation' means having or being perceived as having an orientation for heterosexuality, homosexuality or bisexuality." In a plain reading of this, I think you sort of touched on this, that would seem to suggest that it would include members

of the heterosexual community as part of that definition of minority group when you take section 4, subsection 1, paragraph (c), and section 4, subsection 2, together. It is entirely possible that I am missing something. With section 4, subsection 2, being very broadly encompassing, it just seems that, conceivably, this could make almost anyone a part of a minority group. I may be reading it wrong, so please correct me if I am.

Erik Jimenez:

I appreciate that. This definition of minority group is the same definition that is the statute in S.B. 222 (R1) for the Office of Minority Health and Equity, which I believe, and the Legislative Counsel Bureau can correct me if I am wrong, was a provision of Assemblyman Tyrone Thompson's bill in 2017 [Assembly Bill 141 of the 79th Session]. The intent of the bill is to make sure that racial and ethnic minorities, people with disabilities, and members of our LGBTQ+ are included in that. The way I read the section, I think it actually goes with that intent. However, if there is any clarifying language needed, we would be happy to do that.

Assemblyman Matthews:

I just want to make sure that something is not misconstrued or used for a purpose that is not consistent with the intent.

Chair Flores:

We will have our legal counsel jump in, and she can give some clarifying guidance here.

Erin Sturdivant, Committee Counsel:

The definition is found in existing law. It does seem to include people who would identify as heterosexual under the existing definition. It is certainly something we could clarify in the bill.

Erik Jimenez:

We look forward to bringing you a very minor amendment, Mr. Chair.

Assemblywoman Anderson:

I appreciate the work you all did with removing the fiscal notes. I realize this is not a committee that looks at that, but obviously there was some significant work if you take a look at that first set of fiscal notes to what it is now.

My largest question has to do with something that was touched upon by both Senator Scheible and Mr. Jimenez that has to do with the designation. I am concerned that we are going to be putting one more thing on somebody's plate when, as many of us know, our state employees are incredibly overworked. Would this be a voluntary decision to make? I do not want to have somebody be assigned this role because this is something that is very important. Is it somebody that is assigned to it as opposed to somebody who chooses to volunteer to be part of it? I am asking about that process and whether or not this is somebody that is going to be hired. Is it a designation of individuals that are currently employed in the different agencies?

Erik Jimenez:

When the bill was originally drafted, there were sections of the bill that said the individual who had been designated had to report to the director of that agency. In conversations with agencies, that may not have been feasible. The goal here is how we can continue on with the good work that some agencies are already doing, how we can expand that work to other agencies who should be doing this work. I do not want to speak out of turn, but I think from some of the members on this Committee, there should be a commitment to serving minority groups from state agencies. I think it is important work.

We understand there are a lot of resources and state agencies have been asked to make cuts. We love our state workers, and they are often asked to do more with less. That is why we put the language in there "to the extent possible." This is just a starting point, and I think this is a really good point to start this conversation. It is really important that we have a framework and a space for these conversations to happen at an agency level. Oftentimes, members of this Legislature will bring bills that are well-intentioned, but sometimes those agencies are not connected in the loop. Then, it puts a fiscal note on the bill and a really good idea that would move progress forward dies. I think, if we are able to utilize this right, we might be able to get some agencies buy-ins to help these communities.

Assemblywoman Anderson:

Thank you for that clarification. I think you understood where I was coming from with it, because you do not want to have somebody that is assigned this very important role and then goes to this yearly meeting and basically does not do anything to help move forward. I really appreciate that this is just the beginning to one of many steps. Would the directors be the ones that are in charge? Let us just say in one area, there are three people who really want to be this person. Would the director make that decision? Would that decision be made in a different area? Is it completely up to each separate agency?

Erik Jimenez:

I think that would be the agency head that would make the decision on who the person was because they know their agency and they know their budget. I think, just as someone who serves as his agency's tribal liaison, it varies from lower-level staff to higher-level staff. I think agencies should be making that decision based on the programs they have. There might be an individual who is really hitting the pavement on doing this work or an individual who recognizes that there are gaps and wants to do that work as well. I really think it should be made on an agency-by-agency basis. I think that this bill reflects that.

Assemblywoman Torres:

I am looking at the definition of "sexual orientation," and while I understand that the definition of sexual orientation here is what is in other parts of the statute, I think that this definition of sexual orientation is inherently exclusive. I am just wondering if there have been conversations about making some changes to this definition, which only includes heterosexual, homosexual, and bisexual.

Erik Jimenez:

Senator Scheible and I were actually just talking about this. I think the intent here, along with Assemblyman Matthews' point, would be to clarify and be a little more inclusive and modern in our definition. I think you will see that in an upcoming amendment. One thing that I would caveat, if we are thinking about changing the definition of minority group in this particular section and statute, we may want to look at, either now or down the road, changing the other definition in that same statute to reflect that as well.

Assemblywoman Torres:

I think it is about time that we make those changes to the Nevada statute.

Chair Flores:

Members, do we have any additional questions? [There were none.] Thank you both for your presentation. At this time, we will go to those wishing to testify in support of Senate Bill 222 (1st Reprint).

André Wade, State Director, Silver State Equality:

I am briefly testifying in support on behalf of Silver State Equality. We are in support because this will help build capacity for the office, which is really important given the small number of staff that support the office and the growing need to expand our diversity and inclusion efforts. With this, we will be able to weave in our diversity, inclusion, and equity efforts throughout the state, enshrining this work that we do to ensure that these minority groups are thought of. Again, it will also increase accessibility and inclusion across the board, which is severely important, especially to those who are differently abled. In short, we are in support and thank you all for your support in advance.

Chair Flores:

We will continue with those wishing to testify in support of Senate Bill 222 (1st Reprint). [There were no more callers.] At this time, we will go to those wishing to testify in opposition to Senate Bill 222 (1st Reprint). [There was no one.] At this time, we will go to those wishing to testify in the neutral position.

Tina Dortch, Program Manager, Office of Minority Health and Equity, Department of Health and Human Services:

I would like to thank the Committee for your attention and a special thank you to Mr. Jimenez who serves as chair of the Advisory Committee for the Office of Minority Health and Equity (NOMHE). I will use my time to address four provisions of Senate Bill 222 (1st Reprint).

First, the bill's proposal in section 10, "to the extent practicable, designate a diversity and inclusion liaison" within state agencies that, per section 10, "interacts . . . or offers programs and services that affect minority groups." This will serve to ensure equitable consideration related to impact on minority groups being applied at the earliest stages of agency level decision making, program development, and resource allocation.

The second is per Amendment 165, the bill's proposal that NOMHE, the Commission on Minority Affairs, and the Office for New Americans (ONA) collaborate as aids to these liaisons. This will serve to promote awareness and the existence of the role of these liaisons as a function required by section 10 of the bill. Furthermore, the amendment ensures that these liaisons are sufficiently supported so their respective agencies are able to "Collaborate with members of minority groups in the development and implementation of policies and programs of the state agency that directly affect minority groups," and "Ensure that programs and services offered by the state agency are accessible to and inclusive of minority groups," as read in section 9, subsections 1 and 2. In section 11, each of these three agencies, including my own, will be posting the liaison's contact information on our respective webpages, which will further ensure a broad and more diverse outreach.

Third, because a collaborative facilitation approach has been adopted through the amendment, participation in the annual meeting between the diversity liaisons and the minority advocate organizations will be highly stratified and inclusive. For example, by virtue of the assistance of the Commission, given its multifocal issue areas, advocacy groups across health determining sectors within housing, education, employment, and economic and workforce development would be identifiable. Likewise, because of the assistance of the Office for New Americans, advocacy groups representing immigrant, undocumented, as well as newly identified citizens, would be brought to the table. For NOMHE's roll in planning the annual meeting, in addition to identifying entities focusing on Black and Indigenous people of color community issues, would be issues of accessibility. Should the passage of Senate Bill 341 take place, which proposes the Office of Minority Health and Equity form joint public-private partnerships, NOMHE would then be able to identify additional strategic allies.

Fourth, as part of the jointly produced annual report summarizing the impact and effectiveness of these liaisons in conducting their duties, which are outlined in section 10, NOMHE, the Commission on Minority Affairs, and ONA's development of recommendations will present, on an annual basis, agency level opportunities to improve communication between agencies and minority populations, the availability of adaptable accommodations throughout agencies, and the use of ultimately competent methods for service delivery.

In closing, Senate Bill 222 (1st Reprint) reflects a commitment to embed internal and public-facing equity checkpoints throughout state government. By assigning the support, diversity, and inclusion liaisons across three agencies and commissions with relevant missions, a sustainable network would be, in effect, created.

Charina De Asis, Director, Office for New Americans, Office of the Governor:

We are testifying in neutral for S.B. 222 (R1). The Governor's Office for New Americans was created to ensure the civic and economic integration and inclusion of immigrants and refugees in the state of Nevada, which accounts for about 20 percent of the population of our state. As part of our job in making Nevada more welcoming to this population, we are actively working toward collaborating with agencies throughout state government to ensure

immigrants and refugees are being served adequately and that, as a state, we provide them the best opportunity to succeed civically, economically, and socially. The intent of S.B. 222 (R1) aligns with the mission and ambition of the Office for New Americans in making Nevada a more welcoming state for immigrants and refugees by requiring, with certain exceptions and to the extent practicable, a state agency to designate a diversity and inclusion liaison. It will facilitate an even more efficient process to address issues that our constituents sometimes encounter when interacting with state agencies. It also provides an opportunity for proactive collaboration to ensure that programs and services offered by state agencies are accessible and inclusive to immigrants and refugees, especially those who are limited English-proficient and help to identify gaps of services and duplication of efforts. Furthermore, an annual meeting in collaboration with the Office of Minority Health and Equity and the Commission on Minority Affairs, and the submission of a report to the Governor and the Legislative Counsel Bureau, will keep the state accountable to make attempts to serve all Nevadans, including the immigrant and refugee population in the state.

Chair Flores:

Before we get you off the phone, I believe we do have a question for you.

Assemblywoman Torres:

I have had a lot of conversations with the Office for New Americans about all of the different projects and work that you have done in our community. I understand that the office is rather extended and that we are having difficulty just keeping up with the workload that we have right now. I am trying to understand whether or not the Office for New Americans will be able to do this new additional task when we have been strained just to keep up with the responsibilities that the office has right now. How are we able to do that without having some type of fiscal note?

Charina De Asis:

This one will actually just solidify what we are doing. We are currently really working with agencies when some issues come up. Having a diversity and inclusion liaison, we will just have a specific person to pinpoint and not for my office to scramble around looking for who to contact for this or who to contact to change a language on a website, which we have been doing. It just makes our process a little more efficient. We are already doing some of this and S.B. 222 (R1) will help facilitate an easier collaboration with other agencies.

Chair Flores:

Members, do we have any additional questions? [There were none.] We will continue with those wishing to testify in the neutral position on Senate Bill 222 (1st Reprint).

Doralee Uchel-Martinez, Private Citizen, Reno, Nevada:

I was calling in support of S.B. 222 (R1), but I had some issues. May I proceed?

Chair Flores:

No worries, please proceed. We are in support.

Doralee Uchel-Martinez:

I do appreciate S.B. 222 (R1). This bill will allow people with disabilities, such as me—I am a blind parent—to not have a burden. As you all know, with distance learning with the Washoe County School District, some of the websites with the Washoe County School District are not accessible for people who are blind. The district does not have a grievance form. Having this, moving forward, will help them be educated on how to deal with their website. I know that not just Washoe County School District, but also health care services and some of the police departments are not fully accessible.

Thank you so much for moving this forward. Thank you to Senator Scheible, I really do appreciate this. Please, if you all need assistance, we are here. We are the experts. We might just go for a cup of coffee and that is enough payment for me. I am not speaking for anyone else, for the record, just for me. Mr. Jimenez, I cannot wait to see you and come up and say hello.

Chair Flores:

I know that some folk often have a difficult time trying to log on. At this time, we will go back to the neutral position for Senate Bill 222 (1st Reprint). [There were no more callers.] At this time, we will go ahead and come back to our Senator Scheible or Mr. Jimenez. Do you have any closing remarks?

Erik Jimenez:

I do not get the opportunity to embarrass my friend from Senate District 9 enough, but I just want to say thank you for her leadership and commitment to making sure that populations that do not often get heard, get heard and have a seat at the table.

Chair Flores:

Thank you, Senator Scheible and Mr. Jimenez. We look forward to those amendments and working alongside of you to get this bill exactly where we want it. With that, we will go ahead and close out the hearing on Senate Bill 222 (1st Reprint). At this time, we will invite those wishing to join us for public comment. [There were no callers.]

At this time, I would like to remind members that we will be meeting at 9:00 a.m. tomorrow, April 28, 2021. For tomorrow's agenda we have Senate Bill 127 (1st Reprint) and Senate Bill 237 (1st Reprint). Please give yourself an opportunity to review those ahead of time. With that, members, thank you for all your questions and today's dialogue. This meeting is adjourned [at 10:42 a.m.].

RESPECTFULLY SUBMITTED:

Kyla Beecher
Committee Secretary

APPROVED BY:

Assemblyman Edgar Flores, Chair

DATE: _____

EXHIBITS

[Exhibit A](#) is the Agenda.

[Exhibit B](#) is the Attendance Roster.

[Exhibit C](#) is written testimony dated April 26, 2021, submitted and signed by Julia Peek, Deputy Administrator, Division of Public and Behavioral Health, Department of Health and Human Services in neutral on Senate Bill 109 (1st Reprint).