

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

**Eighty-First Session
February 16, 2021**

The Committee on Government Affairs was called to order by Chair Edgar Flores at 9:02 a.m. on Tuesday, February 16, 2021, Online. 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:

None

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:

Katherine Miller, U.S. Army Colonel (Ret.) Director, Department of Veterans Services
Andrew LePeilbet, Chair, United Veterans Legislative Council; representing Military Order of the Purple Heart; Disabled American Veterans
Tony Yarbrough, representing Veterans of Foreign Wars; United Veterans Legislative Council
Michael Kelly, Chairman, Nevada Democratic Veterans and Military Families Caucus
Amy Garland, Deputy Director, Healthcare Services, Department of Veterans Services
Matt Morris, Attorney, Regional Transportation Commission of Southern Nevada
Linda Dickinson, Private Citizen
Charlie Shepard, State President, AARP Nevada
Michael Musgrove, Vice Chairman, Nevada Veterans Service Commission; representing Veterans of Foreign Wars

Chair Flores:

[Roll was called. The Chair reminded Committee members, testifiers, and members of the audience of Committee rules and protocol.]

We are going to hear three bills that deal directly with veterans. There are a lot of folks from the community and stakeholders who wish to speak. I wanted to preemptively welcome you and thank you for wanting to participate. If we have technical difficulties, it is not intentional. We try to accommodate everybody so that they all have an opportunity to speak.

We are going to take the agenda in the order that it appears. We have Assembly Bill 22, Assembly Bill 76, and Assembly Bill 77.

I would like to open the hearing on Assembly Bill 22. Good morning and welcome, whenever you are ready.

Assembly Bill 22: Requires the establishment and maintenance of a transition assistance program for veterans and servicemen and servicewomen. (BDR 37-283)

Katherine Miller, U.S. Army Colonel (Ret.), Director, Department of Veterans Services:
[She read from Exhibit C.] Assembly Bill 22 would require the Department of Veterans Services (NDVS), with support from other state agencies, to develop a state of Nevada transition assistance program, or “NV-TAP,” to assist those being discharged or those already discharged from the Armed Forces of the United States. This would include members of the National Guard and Reserve. It would help them reintegrate into Nevada communities.

Some returning veterans have difficulty transitioning to civilian life. They experience higher rates of recorded disabilities and associated health care concerns than previous generations of veterans. And, in recent surveys, returning service members indicate that their greatest reintegration challenges are finding meaningful employment, affordable housing, and affordable health care.

There are many programs that can help returning service members reintegrate; unfortunately, service members are often unaware of these programs. The Department of Defense, in partnership with the U.S. Department of Veterans Affairs (VA), does offer a federal transition assistance program, or TAP, to service members preparing to leave the military; however, this program is not available to members of the National Guard and Reserve. Additionally, federal TAP focuses almost exclusively on federal benefits, providing very little information about state and local veteran programs and services. The limited state information that is offered in the federal TAP is specific to the state where a veteran is immediately ending his or her service, not the location of their intended permanent residence. For example, they might learn about the benefits that Texas offers if they are leaving Fort Hood, or that Oklahoma offers if leaving Tinker Air Force Base, but they will not learn about Nevada programs and services, services that are essential for a successful transition home to Nevada.

Here is a specific example. The Business and Industry manages a program called Hero to Home Mortgage Program. It offers a great rate on a mortgage. If you do not know about it, you move to Nevada, buy a home, and find out about it three months later, you have missed the boat. If possible, we need to get this information to our transitioning service members before they come to Nevada.

Many recent surveys show which state programs and services are the most valuable to transitioning service members. At the top of the list are employment, housing, health care, and K-12 enrollments for their children; all programs offered by the state and local governments, nonprofit organizations, and private businesses in Nevada.

The intent of this legislation is that Nevada offer an in-person state transition program in Clark, Washoe, and Churchill Counties, locations where our active duty bases are located, and that they are supported by specific state agencies using existing resources. The Department of Veterans Services would also create an online version so that service members on installations outside of Nevada could learn of these services before leaving service and returning to Nevada. The program would also be valuable to recently separated veterans relocating to Nevada. In-person participation would not be required by all these agencies; in some cases, they might simply be providing information in the form of existing brochures or online links. Participating agencies could include the Department of Employment, Training and Rehabilitation; the Department of Health and Human Services; the Department of Business and Industry; the Nevada System of Higher Education; and others. In my written comments [[Exhibit C](#)], I have submitted a complete list.

This concludes my presentation on A.B. 22.

Chair Flores:

Thank you for the presentation. Thank you for your work, consistently fighting for our veterans, and for your service.

Assemblywoman Thomas:

I appreciate your service for our country. As a service member, when I retired, I was one of those whom you are talking about in this bill. The military teaches us how to be military members, but they do not teach us how to reacclimate to be civilians. Thank you for A.B. 22.

One of the biggest issues is getting the information to our service members who are thinking of retiring or have retired and do not know which services are available to them. This would be good. Could you give us the information on the listings about how to get the information to our service members?

Kat Miller:

Thank you for your service. We will absolutely ensure that. Should this come to fruition, we will get the information to all members of the Legislature so that we can let Nevadans know about it and let service members preparing to come home know about it.

Assemblyman Matthews:

I love the concept of this bill. We need it. This bill does a tremendous job of outlining the various services that this program would provide. It does not touch on the scope. It does not get into the funding and costs. I know there is some intentional flexibility there. Do you have a sense of what kind of funding would be necessary to provide these services? Where do you anticipate that funding coming from?

Kat Miller:

The Department of Veterans Services has outreach officers and veteran officers who have been authorized through the Legislature in past sessions. With these resources, we are able to coordinate with the military installations, Nellis Air Force Base, Creech Air Force Base, and the Naval Air Station in Fallon, to ensure that we are offering that information. Initial coordination has already occurred. These would occur off post so that the participants offering the information would not have to go through post. Post is a bit of a problem. They could do it on weekends when they are not working. Family members could be there. We have given a great deal of thought on how we could offer the in-person services.

I have talked with our partners and agencies, and they already support us when we do outreach events. The Attorney General is supporting us, the Department of Health and Human Services, the Department of Employment, Training and Rehabilitation (DETR), the Department of Motor Vehicles, the county assessor's offices are all supporting us. We have the support to do in-person services.

We have been in development of an online program. We have the data. We have been populating it with the different departments. It is not complete yet, but there is a prototype in

place. I see no additional costs that would be coming from the Legislature at all. Some of the money has come from donations that we have received from the community. We have an incredibly generous community that supports our veterans. I am not worried about funding for this program.

Assemblywoman Anderson:

This is a great program. I am very excited. Thank you for the information on it.

This seems like a pretty large undertaking. Is there a report or update that is given to an elected or advisory governing body to celebrate successes or analyze the opportunities to make changes?

Kat Miller:

Yes, there is. Nevada has the Nevada Veterans Services Commission, which we report to quarterly. We give them written and verbal updates on the status. We have an annual report that will be published. It will be sent to all members of the Legislature on Veterans and Military Day at the Legislature, March 17, the third Wednesday in March. That will lay out many of our programs. Since we do not have TAP in place, that will not be laid out. It will be covered in detail in the quarterly reports and in next year's annual report. Does that answer your question?

Assemblywoman Anderson:

It does, thank you so much. I appreciate that information. The advisory committee may be able to say there might be some things listed in the bill that we are not looking at this all the way that we should in some other areas.

Kat Miller:

There are probably departments and agencies that would be helpful for transitioning members that we have not thought of. We are constantly looking for ideas of what would be helpful for them.

As the first couple of groups come through, we plan on doing surveys to find out what they would have liked to know. We are also doing surveys of veterans who have come back and we ask what they would like to know that they did not know. That has informed our initial list of what we have participating in the program.

Chair Flores:

Members, I do not think I see any more questions, but if you do have a question, feel free to unmute yourself at this time. [There were none.] At this time, I would like to invite those wishing to speak in support of Assembly Bill 22.

Andrew LePeilbet, Chair, United Veterans Legislative Council; representing Military Order of the Purple Heart; Disabled American Veterans:

We support A.B. 22. It is needed when we have had so many deployments by our veterans. They come back, and they do not know where to look. Assembly Bill 22 and the transition

assistance program is a dire need for our veterans and our current military. The United Veterans Legislative Council represents nearly 250,000 veterans, and when you include their families, 500,000 Nevadans. We are in support of this bill. We ditto everything Colonel Katherine Miller had to say.

Tony Yarbrough, representing Veterans of Foreign Wars; United Veterans Legislative Council:

I would like to ditto much of what Colonel Katherine Miller said. I think the director has got this very well captured. I want to add that we know there are many programs established to serve our returning veterans. We also know that initial programs are based on their note of discharge destination that they might write down when they are leaving. We are seeing a change in residence not always being where they initially indicated. Capturing this information and the outreach that is offered by NDVS is a critical action needed in today's veteran success story. They need to know the services that are available to them. They need to understand how we can provide the best possible road map for the families they are going to be establishing in our state.

I am sure many of you have veterans in your family history. I am sure many have direct experience of active duty or military service. As we move forward, please remember them, the family sacrifices, and the commitments to serve our country and how proudly we support them. All we really want is to do the very best for them.

Michael Kelly, Chairman, Nevada Democratic Veterans and Military Families Caucus:

I am testifying in support of this legislation. In 2019, then-DETR director, Dr. Tiffany Tyler-Garner, spoke with members of our caucus. She expressed that there was a dire need for a transition assistance program to connect many of the programs that DETR has for veterans to provide them with employment information and opportunities. We were excited by it; however, with COVID-19, this did not occur.

We are in support of this. There is a need for this. We do not see veterans getting connected to the support agencies and other entities in the state. We see a disconnect. This is important for veterans to be connected to these support agencies, as well as for them to see that the people of Nevada are fully committed to their success and in gratitude for their service. We support this piece of legislation.

Chair Flores:

At this time, I would like to go to those we have on video wishing to testify in support.

Amy Garland, Deputy Director, Healthcare Services, Department of Veterans Services:

I am here to support Director Miller.

Chair Flores:

I also see Matt Morris is registered in support. It is my understanding that you were not wishing to speak.

Matt Morris, Attorney, Regional Transportation Commission of Southern Nevada:

Yes, thank you. The Regional Transportation Commission's Chief Executive Officer, MJ Maynard, has a letter of support [[Exhibit D](#)] on the record for Assembly Bill 22.

Chair Flores:

At this time, I would like to invite those speaking in opposition to Assembly Bill 22. [There was no one.]

At this time, I would like to go to those wishing to speak in the neutral position for Assembly Bill 22. [There was no one.]

Director Miller, would you like to come back and close out with any final remarks on Assembly Bill 22?

Kat Miller:

Assembly Bill 22 would fill a great need for our veterans. There are often people who ask what more can we do for our veterans. Nevada has done a lot for our veterans, but they do not know about it. By Nevada, I mean the state, the counties, the cities, nonprofits, and locals. There are a lot of folks who support our veterans, but if our veterans and our returning military do not know about those benefits, they might as well not exist.

Chair Flores:

At this time, I would like to close out the hearing on Assembly Bill 22.

I would like to welcome Director Miller back and open the presentation on Assembly Bill 76.

Assembly Bill 76: Revises provisions relating to care for veterans. (BDR 37-284)

Katherine Miller, U.S. Army Colonel (Ret.), Director, Department of Veterans Services:

[She read from [Exhibit C](#).] Assembly Bill 76 would authorize the Department of Veterans Services (NDVS) to establish and operate adult day health care programs, and it would eliminate obsolete requirements concerning the location of veterans' homes in Nevada.

An adult day health care program is operated during the day in a safe, supervised environment that offers health care and social services tailored to individuals with physical disabilities or mental impairments. These programs can provide respite care for a family caregiver and can help veterans and their caregivers gain skills to manage care at home. They may also give the caregiver the opportunity to seek employment outside of the home, thereby improving the family's financial situation.

Services in an adult day health care program can include assistance with daily living activities; physical, occupational, and speech therapies; help with medical equipment; medication management; personal care services; and recreation.

A veterans' adult day health care program has two added benefits. First, culturally competent staff understand how a veteran's military history may shape their health practices and their susceptibility to mental and physical health risks. Second, these programs provide peer support among adults with a shared military culture, a culture that generally transcends ethnicity, race, religion, and gender.

Under *Nevada Revised Statutes* (NRS) Chapter 417, NDVS is not authorized to establish or operate veterans' adult day health care facilities; however, veterans and their families often request this service. The U.S. Department of Veterans Affairs (VA) pays a per diem, currently set at \$89.52 a day, for veteran adult day health care services. This per diem makes the operation of adult day health care facilities possible without reliance on state General Funds. The average cost of adult day health care in Nevada is \$80 a day. The reimbursement from the VA is more than needed. This proposal would give NDVS the authority to operate adult day health care facilities, a first step in seeking federal grant funding for construction, renovation, rental equipment, or other grant opportunities.

This bill is not asking for funds to build a facility or saying we are going to build a facility. It is just changing the language. The Department of Veterans Services has the authority to operate nursing homes. By adding health care, you can expand the programs in the nursing homes to include adult day health care in the same facility. You could get another facility in a location where it is needed. You could also construct a new facility. There are all kinds of options. Some of them are expensive. Some of them are not expensive if you are using existing facilities. By adding this language, I would feel more comfortable going forward seeking the federal grant funding needed to establish these programs.

This bill would also eliminate obsolete language in NRS Chapter 417 that discusses where a first and second veterans' homes will be built. As first and second homes have already been constructed, this language can be removed; it is obsolete.

Assemblywoman Brown-May:

I love to see that we are moving toward adult day health care services for our veterans. It is important that you have identified this as an area of need.

Have you been working with the Aging and Disability Services Division or the Department of Health and Human Services? They currently oversee adult day health care services for other populations. Have they been part of the conversation relevant to this? Are you seeking a single location, or would you have community locations so that veterans are able to develop closer relationships with the cohorts who are in their community?

Kat Miller:

My deputy director, Amy Garland, has spoken with the Aging and Disability Services Division. We wanted to make sure that there was need.

Amy Garland, Deputy Director, Healthcare Services, Department of Veterans Services:
We have worked with different agencies. We have worked with not only the Aging and Disability Services Division, but with the Office of Economic Development in the Office of the Governor for our initial needs assessment to look at where these are needed throughout the state. We have also formed a family connections task force. The Aging and Disability Services Division and our board members are members of that task force to help identify those needs. Those are biweekly meetings. We are in constant conversation about how we can help not only our veterans, but other Nevadans.

Kat Miller:

When we built the Northern Nevada State Veterans Home, we had a square set across for adult day health care. I was hoping to have enough funding to buy that, but the money would just not stretch. The need is probably greater in southern Nevada.

You can rent a facility and turn it into an adult day health care facility and get the VA grant funding to furnish, alter, expand, or remodel state buildings or rental facilities. There are many options and the needs are throughout the state. If we were able to get the grant, we would start where the need is greatest. This would have to be a discussion with state partners to figure out where the most need is.

Assemblywoman Brown-May:

A consideration relevant to the stigma of what we call "adult day health care services," in my experience adults who are at that level do not want to attend a day care. I understand it is the language that we are using in our NRS that designated what we are trying to accomplish. Perhaps finding a more inclusive name would be beneficial.

Kat Miller:

I could not agree more. The United States Department of Veterans Affairs calls it that in their grants. The term is adult day health care. I hate the term and our veterans will hate it. Rest assured, if I have anything to do with it, that will not be the name on the building.

Assemblywoman Anderson:

Section 1, subsection 3 has the phrase, "To the extent that federal funding is available," and that has me worried. When times are good, people are always getting that help. When times are bad, sometimes this is the first thing that gets cut.

You also stated that there is no need to depend on federal funding. Could you further explain the funding mechanism?

Kat Miller:

I have been doing this for about eight years, and we have not had the VA not provide the per diem; in fact, it has gone up every year. Will that happen forever? I do not know. The per diem that the VA offers for adult day health care exceeds the rate that it costs for a for-profit facility. Even if the VA money is not available and the per diem went away, there would still be a huge need for adult day health care in Nevada. Between Medicaid and private pay, if

the VA funding should not be available, there is a great need for adult day health care in Nevada.

Amy Garland:

If the VA funding is not there, there are donations. Our veterans community is very giving and would probably help with us. There is somebody with the American Association of Retired Persons (AARP) who can also speak to the need for these adult day health care services.

Kat Miller:

I am not cognizant of the impact of the language "to the extent of." I do not have strong feelings one way or the other. I would have to talk to the Legislative Counsel Bureau folks who helped craft it.

Assemblyman Ellison:

I was looking at section 1, subsection 3. Lines 24 through 42 on page 2 have been deleted. The deleted part says Clark County. Is this for the whole state?

The state has a lot of public buildings that can be looked at, purchased, or donated by the state. Since this is a statewide operation, are you going to look for outside private funding?

Kat Miller:

It depends on the VA grant process. If we get sufficient funding, it would not be necessary to have a public and private partnership. If the funding is not available, then we will need to look at other options. States are just starting to apply for these funds for adult day health care through the VA. It is an option to look at other sources of funding, but our primary goal is to apply for the VA grant.

Assemblyman Ellison:

This is a program that is well past needed. I think this is one of the most important programs we can get right now. We need to get these facilities up and running. I know there are some all over the state, but not to this magnitude.

Assemblywoman Thomas:

I appreciate your dedication to our veterans. I am confused about your explanation in reference to building. You said that there are existing buildings. Would you house our veterans together? If you could not have a stand-alone building, would you look into renting a building for veterans?

I am putting this forward because our veterans might not accept a multicomunity. It might hamper their going into the facility. Veterans usually like to be around veterans because of their understanding of the nature of their services and things they have gone through. I want to make sure we are not putting veterans and civilians together.

Kat Miller:

The grants will cover options from construction, remodels, expansion, and furnishings. There is a lot of variety. If it comes to that point, it is preferred to use existing state facilities or rent a facility where the need is greatest. There would only be veterans and spouses of veterans in order to get the per diem. We are envisioning these as places where there is a shared military culture, not a combination.

The Northern Nevada State Veterans Home has some property. If we were to build a building there, they could share the same physical plant, the dining facility, and the physical therapy. There are some efficiencies in cost in doing it. There are also other state buildings.

There is not a place near the Southern Nevada State Veterans Home, but maybe there is in Boulder City. There is nothing on the table saying this is where it would be. We know for sure that we want a place that is veteran only or veteran family members, so that we have that shared military culture. We can get that per diem and use it wisely so that we use existing resources. It would cost less money, and we can get them up faster. There is a great need. If there is an existing facility, we can remodel it or modify it to turn it into a veterans' adult day health care facility.

Assemblywoman Thomas:

Will the facility have wraparound services? I do not want our veterans to just play pool and cards. There are other things they may need.

Kat Miller:

To qualify for the VA per diem, you have to have wraparound services. Even if the VA said no, we would have those services. These services include everything from physical therapy and mental health service to barber shops.

This is for their caregiver. Their caregiver has an opportunity to have respite or get another job. You would have what you need to take care of mental health, physical health, social needs, recreational needs, and activities of living. All of those would be provided as wraparound services.

Assemblywoman Thomas:

I love your visions and our service members would love that, too, especially when you mentioned haircuts.

Kat Miller:

We have styling too. By 2035, 20 percent of veterans will be women. You need to have a culture that not only accommodates the shared military culture but accommodates gender requirements.

Assemblywoman Considine:

Section 1, subsection 1, paragraph (c) gives enabling language to federal grants and other sources of money available for establishing veterans' homes. Is that language sufficient for the day care? Does that allow for gifts or other sources of funding to be used for this?

Katherine Miller:

I believe it is, but I will go back and check it again. There are other parts of NRS Chapter 417 that allow us to use gifts and donations for the operation of nursing homes.

If I may, can I get back with the Legislative Counsel Bureau just to make sure that language is inclusive?

Chair Flores:

I am going to ask our legal counsel to jump in to provide some further insight.

Erin Sturdivant, Committee Counsel:

The language does not appear to be specific to these veterans' health care programs. I do have to confirm that in the chapter to the extent that the Committee wants to add language that references day care programs. We can make that change.

Chair Flores:

The Committee would work with you. The Committee members want to make sure they can maximize the number of sources of income that are available to you to ensure that this program works.

Members, do we have any additional questions? [There were none.]

I would like to invite those wishing to speak in support of Assembly Bill 76.

Andrew LePeilbet, Chair, United Veterans Legislative Council; representing Military Order of the Purple Heart; Disabled American Veterans:

We fully support this adult day health care for veterans. We have a unique personality and want to ensure we are being together and sharing visions with each other. A lot of older veterans, disabled veterans, and younger ones are being taken care of and helped by their families. It is difficult to work when you do not have somewhere. Some of them desperately need this adult day health care. I understand that there is a bigger need in southern Nevada; that is a bigger population for us. We ditto everything that Katherine Miller and her staff have said. We support this bill.

Michael Kelly, Chairman, Nevada Democratic Veterans and Military Families Caucus:

I testify on behalf of our caucus as well as the council in support of this legislation. However, we want to add a couple of comments. First and foremost, we want to make sure that this facility is not a privatized facility. We want the facility to be operated and staffed by Nevada state employees so that we can ensure that it is completely government operated. We absolutely oppose privatization.

I am echoing the words of our senior veteran in the Legislature, Senator Pat Spearman. We have seen certain aspects of racism within the VA facility. In 2020, there was a study by the American Psychological Association. Several of their trainees who trained in a West Coast VA facility had reported issues of sexism. Sixty-five percent of their trainees who were trained in a facility from 2012 to 2019 had experienced sexism; 54 percent had experienced racism; 50 percent had experienced anti-LGBTQ bias perpetuated by veterans and staff; and 45 percent feared repercussion for reporting those types of events.

We have seen a lot of this in different facilities across the country. If this facility is operated, we would like to ensure that there is an appropriate number of Black, indigenous, and people of color staff in the facility, as well as a commitment to stamp out any type of racism bias that exists.

We testify in support, and we wholeheartedly ask that you support and pass this.

Tony Yarbrough, representing Veterans of Foreign Wars; United Veterans Legislative Council:

I would like to speak in support of the veterans' adult day health care. I think it is an important program to provide a caregiver a real break to refresh and rebuild their ability to care for their loved one. Properly trained associates with wraparound services would place a lot of confidence in the caregiver. It exposes the caregiver to potential new information through on-site NDVS training, which could lead to an employment opportunity. We think the cleanup for NRS Chapter 417 is appropriate to clarify the status of veterans' homes.

Linda Dickinson, Private Citizen:

I speak to my experience as a nurse, veteran, caregiver, and advocate for veterans' services. Many veterans do not want to ask for help; they do not want to be a burden. A veterans' adult day health care program would help assist our elderly and homebound veterans in an environment where they can feel comfortable and receive care that would help them maintain their independence in their home and daily environment. Many of our veterans have caregivers who may be limited in their own physical capabilities or still work.

In addition to spouses and significant others, these may be children or grandchildren who are caring for the veteran. It may also be parents or other family members who provide care.

If we had a veteran adult day health care, it could provide and enable the veteran to receive care, giving the caregiver security that their veteran is being cared for while they are at work, or just needing a respite.

It would provide the care to help these veterans achieve a better improvement of their activities of daily living. Many veterans' benefits are specific to the military disabled veterans or those who have retired. A veteran's adult day health care program would benefit all veterans as well as their families.

Charlie Shepard, State President, AARP Nevada:

AARP strongly believes that everyone should have access to affordable quality health care. Adult day health care is an extraordinary example of a valuable health care service.

You have heard about what adult day health care provides and how this service provides necessary help to the client and their family. The respite it provides families is just as important as the socialization and health services for the clients. Having a veterans-specific facility will also help ensure that the veterans feel comfortable as they all share a common experience.

Currently veterans who seek adult day health care have to either pay out of pocket, which is expensive, or get the services via Medicaid. There is currently a waiting list for Medicaid home and community-based services, and having a veterans-specific adult day health care provider would allow the veterans to get the services more quickly. This could actually shorten the waiting list for those nonveterans for Medicaid-funded services. That is truly a win-win. The fact that veterans should be able to attend without requiring any state funding is another win because state funding will stretch further.

AARP Nevada, on behalf of our 345,000 members across the Silver State, supports A.B. 76 and encourages the Committee to pass it to take care of our veterans and their families who have served our country. Thank you for allowing me to speak in support of A.B. 76.

Chair Flores:

At this time, I would like to invite those wishing to speak in opposition to Assembly Bill 76. [There was no one.] I would like to invite those wishing to speak in the neutral position for Assembly Bill 76. [There was no one.]

Director Miller, could you come back for any closing remarks you may have.

Kat Miller:

I would like to address a comment that Mr. Kelly made. I want to reinforce how important we consider respect for others. Our patient bill of rights for our veterans' homes states that every one of our residents is required to receive treatment and care without discrimination as to race, color, religion, sex, national origin, disability, sexual orientation, source of payment, or age. This same bill of rights would be applied to any state of Nevada operation for adult day health care.

This is not a budget item. It is just the authority. It gives us the opportunity to go forward. There is nothing that says this must happen first and this must happen second. If there was an interest and need in a community for adult day health care, we could pursue multiple grants for different areas at the same time. I am very excited about the potential for this. This is something that our veterans ask for a lot, and more so our caregivers.

Chair Flores:

I am sure the members will help ensure that you can accept gifts and other forms of support for the program. I would like to close out the hearing on Assembly Bill 76. I would like to go to our final bill hearing and open the presentation on Assembly Bill 77.

Assembly Bill 77: Revises provisions concerning the Department of Veterans Services and certain advisory public bodies relating to veterans. (BDR 37-285)

Katherine Miller, U.S. Army Colonel (Ret.), Director, Department of Veterans Services: [She read from Exhibit C.] Assembly Bill 77 revises provisions concerning the Department of Veterans Services (NDVS) and certain advisory public bodies relating to veterans. Specifically, this bill would revise duties of the NDVS director in the significant and essential duties already being accomplished, and it would change the terms of members of four veterans advisory commissions and committees to standardize the number of years for which members are appointed.

I want to start with the director's duties. The Department of Veterans Services currently creates, coordinates, and supports suicide prevention and homelessness programs with existing staff and resources. These issues, suicide prevention and homelessness, have been top concerns for veterans and their families for the past decade. However, they are not listed in the department director duties section of *Nevada Revised Statutes* (NRS) Chapter 417, even though there is mention of other at-risk and special population veterans, such as women veterans, LGBTQ veterans, and veterans suffering from military sexual trauma.

Adding these duties to NRS Chapter 417 codifies what is already in practice. The duties already being accomplished but not captured in NRS Chapter 417 are connecting veterans experiencing homelessness to housing and to organizations that provide housing support to decrease homelessness among veterans; and creating, coordinating, and supporting programs and resources for the prevention of suicide among veterans, including, without limitation, programs and resources to increase knowledge of how to recognize the signs of a potentially suicidal veteran and resources to which veterans who are potentially suicidal may be referred.

The next proposal in A.B. 77 regards commissions' and committees' term lengths. There are the Nevada Veterans Services Commission (VSC), two cemetery advisory committees, and one Women Veterans Advisory Committee (WVAC); these are all established in NRS Chapter 417. The Veterans Services Commission and cemetery advisory committee members are appointed for two years and WVAC members are appointed for four years.

The Nevada Veterans Services Commission believes that two-year term lengths are too short for significant service and result in turnover disrupting continuity of operations. A longer three-year term would develop expertise and awareness among board members. Fifty percent of the VSC and cemetery boards' members turn over annually. According to BoardSource in their 2017 report on board practices, ideally boards should turn over no more than one-third of the board seats annually. Moving from a two-year to a three-year term length will keep turnover to that one-third goal.

With two-year term lengths, the Governor's staff must appoint or reappoint 10 to 11 members annually, creating significant workload and resultant appointment delays. Adopting a standard three-year term would reduce that workload and associated vacancies to seven appointments a year.

The Women Veterans Advisory Committee four-year term length does allow for continuity of operations and minimizes appointment process workload; however, the four-year term length is not optimal. It is important to bring in new members regularly to generate fresh ideas and to bring on members with different cultural viewpoints, skill sets, perspectives, and networks. Adopting a standard three-year term would support a culture of inclusion and innovation.

Finally, NRS Chapter 232A, Appointments by the Governor to Public Bodies, establishes a general requirement of appointments for three years until their successors have been appointed and have qualified. While NRS Chapter 232A does not limit additional requirements imposed on public bodies, after a review of the statutory responsibilities of veterans boards in NRS Chapter 417, I can determine no special circumstances that would suggest a need to deviate from the general term length requirement in NRS 232A.020.

Chair Flores, Vice Chair Torres, and members of the Assembly Committee on Government Affairs, this concludes my presentation on A.B. 77. I stand ready to answer any questions.

Assemblywoman Anderson:

Expanding the length of the terms makes total sense. Under section 2, subsection 2, paragraph (c), it states that one member has to be a student in an institution of higher education. Has that been an issue for the two- or three-year terms? Do you see that becoming a possible problem?

Kat Miller:

The student is required to be actively enrolled. Occasionally, we will have a student who graduates before the end of their term and they are no longer eligible. We let the boards and commissions know. In their quarterly meetings, the Veterans Services Commission chair reviews the status of the student. They make sure they are actively in school and when they plan on graduating. We can alert the Office of the Governor that an appointment will be necessary. That is the one position that has not only the term length, but they must be actively seated.

There are other requirements. For some of the positions, you have to be a member of a nationally recognized veterans service organization. Should you no longer be a member, you would no longer be eligible to be on the board. That would be an area that would trump the period of time in terms of years.

Assemblywoman Anderson:

Are there a variety of individuals from different conflicts and different time frames? The experiences that veterans have are vastly different based on conflicts. Are there a variety of

those individuals? Is there consideration for trying to make sure we have people from different conflicts?

Kat Miller:

By statute, there is not a requirement to look at the different eras of service. However, in practice, that is looked at. Anyone can apply to be on a board, but the chair of the Veterans Services Commission, the chairs of the cemetery committees, and the WVAC will send a letter in to the commission making their recommendation. The recommendation has always included different eras and diversity in terms of ethnicities and gender.

There are two positions that are members of the public. The committees have asked that they have a Blue Star or Gold Star family member. They represent the interest of the families. Every meeting that the boards have, an appointment is a standard item. They can talk about who is coming up and who might be the best person. It is the Governor's decision who is appointed. He does receive pretty significant feedback from these boards and committees on who they think should represent in order to have that diversity.

We have pretty good diversity on the boards in terms of age and different eras. The cemetery boards are only five-person boards: two members come from the Legislature and the rest tend to be retirees who spend a lot of time at the cemetery. The Women Veterans Advisory Committee has diversity in terms of era.

Assemblywoman Brown-May:

Are there term limits for the boards and commissions? Is there a specific number of terms an appointed member can serve as a maximum?

Kat Miller:

There is not a term limit for the board in NRS Chapter 417.

Chair Flores:

Members, do we have any additional questions? [There were none.]

At this time, I would like to invite those wishing to speak in support of Assembly Bill 77.

Andrew LePeilbet, Chair, United Veterans Legislative Council; representing Military Order of the Purple Heart; Disabled American Veterans:

We are in support of A.B. 77, specifically, the language in terms of suicide prevention. A lot is being done. I am member of the Governor's program for suicide prevention. It is led by Kim Donohue of NDVS. It is a critical element in our state with all ages of our veterans. The stabilizing and standardizing of the terms make it easier for everyone to understand who is sitting in which seat on the commissions and boards. We are in support of this bill.

Michael Kelly, Chairman, Nevada Democratic Veterans and Military Families Caucus:

I testify in support of this legislation. We have been concerned about talking to partner organizations. We ask that the board and commissions always reflect the diversity of the

veteran community. Oftentimes, younger veterans and veterans of color are ignored for membership on boards or commissions. I urge you to reach out to a wide variety of veterans and ensure that we are hearing opinions from all different types of veterans, from BIPOC [Black, indigenous, and people of color] to LGBTQ veterans. I testify in support of this legislation.

Tony Yarbrough, representing Veterans of Foreign Wars; United Veterans Legislative Council:

I would like to state that I am in favor of this bill. I think that these changes are very appropriate and modernize the responsibilities. It is timely considering our environment in today's world. I ditto what has already been said.

Michael Musgrove, Vice Chairman, Nevada Veterans Service Commission; representing Veterans of Foreign Wars:

We are in favor of A.B. 77 concerning the terms of appointment for VSC and cemetery boards. When we have a new member appointed to the board, there is always a learning curve, especially if the new member does not keep up daily with the issues concerning veterans in the state. During a two-year term, the new member is coming up to speed. A three-year term would allow this member to become well versed in the procedures and issues that the board reports. The appointment would still have the duty to ensure that there is a core that is familiar with the matters at hand and provide a training basis for the new appointees.

The business of advising the Director is important to the veterans of the state. Those who serve on these commissions and boards take the responsibilities seriously. The training and knowledge gained help us to provide the best advice we can to the Director to ensure that the state veterans have the best access to the services provided by the NDVS and the federal government.

Those of us whose appointment is due during the year the Legislature meets have delays due to the workload in the Office of the Governor during those times. With new appointees to boards and commissions during that time, the workload on the Office of the Governor would be reduced. I understand that NRS Chapter 232A allows three-year appointments. It would be appropriate for the veterans' boards and commissions. I stand in full support of A.B. 77.

Chair Flores:

At this time, I would like to invite those wishing to speak in opposition to Assembly Bill 77. [There was no one.] At this time, I would like to invite those wishing to speak in neutral for Assembly Bill 77. [There was no one.]

Director Miller, if you could come back for closing remarks.

Kat Miller:

I feel strongly that these duties need to be added to NRS Chapter 232A. Most service members who come back to Nevada integrate very well. There are a small percentage who struggle. These people give 3 to 30 years of their lives to protect our country and the people

of this country. The least we can do is make sure that we throw everything we have at the problem of suicide prevention and homelessness. Our veterans should not be suffering that.

We have these programs in place, but I think codifying them makes clear our commitment as a state to address those important issues. We could continue the boards and commissions the way we are, but it is not effective. It is not efficient. Standardizing it to three years would not only improve the efficiency and effectiveness, but it will also reduce the workload on the Office of the Governor.

Chair Flores:

I am sure members will reach out. Members, for those questions that were asked broadly that did not have an answer, I will make sure our committee manager will share that information as we get it.

I would like to close out the hearing on Assembly Bill 77.

I would like to invite those wishing to speak in public comment. [There was no one.]

I would like to adjourn in honor of Mental Health Awareness Day. I think it is a very proper and necessary conversation to have after having had this conversation about veterans. We have failed them when it comes to this conversation. Reach out to your family and friends; check in on each other. It is important. Thank you to our women and men who made the ultimate sacrifice to ensure we have the beautiful things we have in this country. We are adjourned [at 10:30 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 February 16, 2021, presented by Katherine Miller, U.S. Army Colonel (Ret.), Director, Department of Veterans Services, regarding Assembly Bill 22, Assembly Bill 76, and Assembly Bill 77.

[Exhibit D](#) is a letter to the Assembly Government Affairs Committee, dated February 15, 2021, submitted by MJ Maynard, Chief Executive Officer, Regional Transportation Commission of Southern Nevada, in support of Assembly Bill 22 and Assembly Bill 77.