

**MINUTES OF THE MEETING
OF THE
ASSEMBLY COMMITTEE ON HEALTH AND HUMAN SERVICES**

**Eighty-First Session
April 21, 2021**

The Committee on Health and Human Services was called to order by Chair Rochelle T. Nguyen at 1:39 p.m. on Wednesday, April 21, 2021, Online and in Room 3138 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:

Assemblywoman Rochelle T. Nguyen, Chair
Assemblywoman Teresa Benitez-Thompson
Assemblywoman Annie Black
Assemblywoman Michelle Gorelow
Assemblyman Gregory T. Hafen II
Assemblywoman Lisa Krasner
Assemblyman Andy Matthews
Assemblyman David Orentlicher
Assemblywoman Shondra Summers-Armstrong
Assemblywoman Clara Thomas
Assemblywoman Robin L. Titus

COMMITTEE MEMBERS ABSENT:

Assemblywoman Sarah Peters, Vice Chair (excused)

GUEST LEGISLATORS PRESENT:

Senator Melanie Scheible, Senate District No. 9
Senator Pat Spearman, Senate District No. 1
Senator James Ohrenschall, Senate District No. 21



STAFF MEMBERS PRESENT:

Patrick Ashton, Committee Policy Analyst
Karly O'Krent, Committee Counsel
Nick Christie, Committee Manager
Terry Horgan, Committee Secretary
Trinity Thom, Committee Assistant

OTHERS PRESENT:

Tess Opferman, representing Nevada Women's Lobby
Caroline Mello Roberson, State Director, NARAL Pro-Choice Nevada; Southwest
Regional Director, NARAL Pro-Choice America
Serena Evans, Public Policy Specialist, Nevada Coalition to End Domestic and
Sexual Violence
Ross Armstrong, Administrator, Division of Child and Family Services, Department
of Health and Human Services
DaShun Jackson, Director of Children's Safety and Welfare Policy, Children's
Advocacy Alliance

Chair Nguyen:

[Roll was taken. Committee rules and protocol were explained.] Now I will open the hearing on Senate Bill 364.

Senate Bill 364: Revises provisions relating to emergency medical care for a victim of sexual assault or attempted sexual assault. (BDR 40-1004)

Senator Melanie Scheible, Senate District No. 9:

Throughout the nation, many emergency medical care facilities do not offer victims of sexual assault the treatment necessary to prevent pregnancy, and some fail to inform the victim that it is an option even though the emergency contraceptives are readily available. Emergency contraception can prevent pregnancy if taken shortly after unprotected sex or sexual assault. Of the four United States Food and Drug Administration (FDA)-approved products on the market, three are approved to prevent pregnancy if taken within 72 hours, and one has been available over the counter since 2013.

Medical facilities' failure to offer or provide emergency contraception means victims of sexual assault are at risk of becoming pregnant through no fault of their own. Senate Bill 364 aims to ensure that victims of sexual assault here in Nevada are informed about and have access to this necessary treatment. It requires the State Board of Health to adopt regulations requiring hospitals and independent centers for emergency medical care to provide training to individuals who provide care to victims of sexual assault and attempted sexual assault. In addition, hospitals and independent emergency medical centers that treat victims of sexual assault or attempted sexual assault must inform those victims of their right to receive emergency contraceptive and provide all doses of such contraception upon request.

At least 19 states and the District of Columbia have similar laws, and the American College of Obstetricians and Gynecologists and the American Public Health Association recommend that victims of sexual assault be informed about and offered emergency contraceptive.

I am happy to report that all the hospitals in Nevada that I talked to are supportive of this bill and are already engaging in this practice. The reason to bring the bill forward is not to point fingers at bad actors or to suggest that there are Nevada hospitals or medical providers who are not adequately caring for victims or survivors of sexual assault, but we know sexual assault is an incredibly personal and sensitive subject, and there are women in Nevada who report not having access to emergency contraceptives at the time of their assault. Whether that is because they did not go to a Nevada hospital or because they went to a Nevada hospital five or ten years ago before the policies changed, I just do not see any reason why we should not be putting into law this kind of provision that is supported by the hospital associations and all the medical providers who I spoke with, to ensure that today, and every day in the future, anyone who reports to a Nevada facility—be it a hospital, emergency room, or other place where emergency care is provided—be offered and provided with the emergency contraception that they need and are entitled to receive if that person is the victim of a sexual assault. I am happy to answer any questions you might have about S.B. 364, and I urge your support.

Chair Nguyen:

Are there any questions from Committee members?

Assemblywoman Titus:

Thank you, Senator Scheible, for bringing this bill forward and championing it on both sides. I have a question regarding your statement that this requirement affects all facilities that offer emergency medical care. Having had a clinic 30 miles from any other medical care, I did not have an emergency room. I did not advertise it as an emergency room, it was simply a family practice office; however, occasionally we would have a walk-in emergency or an emergency would be carried in to my office. I would like a clarification: Would this affect every private office that someone might walk into with an emergency, or does it have to have that designation of being a freestanding urgent care? Are you talking about urgent care centers and emergency centers, or are you talking about anyone who might see someone on an emergency basis?

Senator Scheible:

By law, this would be limited to just emergency care providers. As I conversed with the Legislative Counsel Bureau's Legal Division, any place where a sexual assault nurse examiner (SANE) exam might be conducted is the kind of place that provides emergency care to someone who is a victim of sexual assault. Sometimes we see that the problem derives from someone going first to an emergency room and then transferring to a different center for a sexual assault exam. I also think it is important to point out that the hope here is that medical providers would all want to be doing this and to be providing people with that kind of care. It applies specifically to emergency rooms and emergency care centers.

Chair Nguyen:

Are there any other questions from Committee members?

Assemblywoman Thomas:

Thank you, Senator, for bringing this bill forward. I think it really is necessary. I was a volunteer advocate at a rape crisis center. We have a rape hotline, and generally we are told to send victims to University Medical Center (UMC). I thought it was a standard practice when they went through UMC to be able to offer this. Could you explain that and how this bill would ensure that those victims could be helped if they are not sent to UMC but to other emergency rooms?

Senator Scheible:

You are correct. This is UMC's standard practice and also standard practice throughout the Las Vegas Valley and in other parts of Nevada. The purpose of putting this into law is to make that uniform across the state now and into the future. One of the ways we might see this law affecting people in real life is that people on the crisis call hotline would now be able to tell victims that whatever hospital you go to, you are entitled to receive an emergency contraceptive, so if it is not offered to you, ask. If they do not offer it to you, they are in violation of the law. You have the right to ask for it and are able to point to the statutes. Every person who wants and needs emergency contraception has the power of the law to request it and be entitled to it.

Chair Nguyen:

As clarification for Assemblywoman Titus, the terms "hospital" and "independent center for emergency medical care" are specifically defined in *Nevada Revised Statutes* Chapter 449.

Assemblywoman Summers-Armstrong:

At the top of the bill it says that there could be a fiscal note. Could you please explain to us what that might be? How would these facilities be reimbursed? Would that be through Medicaid or Medicare?

Senator Scheible:

I am happy to report that the fiscal note is zero across the board. I think it was completely appropriate that when the bill was drafted it was flagged for a possible fiscal note if this was something our state-run hospitals were not already doing or something Medicaid was not already covering. It would have the effect of causing an increased cost to the state; however, since all the facilities in Nevada are already up to par with this policy, there is no additional cost involved in ensuring it is uniform across the state.

Assemblywoman Summers-Armstrong:

You mentioned public facilities. We have private hospitals, so could you elaborate about how this would affect them? Are they on board? Are they expecting this to change their bottom line at all? It requires SANE.

Senator Scheible:

Yes, this would also affect private hospitals. They would also have to provide survivors of sexual assault with the choice to get emergency contraception and then that emergency contraceptive if so requested. All the hospitals I talked to are on board—the Dignity Health family of hospitals—St. Rose Dominican—Southern Hills—are all on board. I have not received any opposition; although if there is, I am happy to talk to those people and work through this with them. One hospital reached out to me saying, "Oh, no. I hope this was not our facility. Was this us?" They all want to comply with this standard, and I think they already do.

Chair Nguyen:

Do we have any other questions? Seeing none, is there anyone to testify in support of S.B. 364?

Tess Opferman, representing Nevada Women's Lobby:

This is an incredibly important bill which makes it easier and more accessible for victims of sexual assault to access emergency contraception. Emergency contraception is not an abortion; emergency contraception prevents a pregnancy from taking place and is most effective when taken within 24 hours of the unplanned sexual encounter. Victims of sexual assault have faced an intense trauma, and there are a number of things they must do after the encounter, which could include the filing of police reports, taking drugs to prevent STDs [sexually transmitted diseases], and taking emergency contraception or Plan B to prevent pregnancy. The Nevada Women's Lobby supports any measure that can be taken to help make this process easier. Senate Bill 364 requires hospitals and emergency medical centers to have emergency contraception available so women dealing with an assault can get necessary medicine quickly and easily without needing to go to a second location. This is an important measure that will help alleviate, ever so slightly, an awful situation. Thank you so much, Senator Scheible, for your work on this legislation. We thank you for your time on this bill, and we urge your support today.

Caroline Mello Roberson, State Director, NARAL Pro-Choice Nevada; Southwest Regional Director, NARAL Pro-Choice America:

[Caroline Mello Roberson submitted written testimony in support, [Exhibit C](#).] I am proud to testify in support of S.B. 364, Senator Scheible's legislation to require Nevada emergency rooms to make emergency contraception available to survivors of sexual assault. NARAL is a nonprofit advocacy organization dedicated to advancing reproductive freedom for everybody through policy, political and community organizing. NARAL organizes across the state through things like virtual meetups, phone banks, online actions, and community events. We have more than 44,000 battle-born, feminist-strong members and we are growing every day.

Senate Bill 364 is a continuation of the successful 2019 effort led by former-Assemblywoman Connie Munk to require Nevada hospitals to provide survivors with information on where they can access emergency contraception. Emergency contraception is a safe and effective way to prevent pregnancy. It does not end a pregnancy. There are a few

types of FDA-approved emergency contraceptives, including the copper IUD [intrauterine device] and two types of pills that are commonly referred to as "morning after" pills. Depending on the pill, it can be effective if taken within three to five days of unprotected sex. Emergency rooms often serve as an entry point into the health care system for people who have been sexually assaulted. It is essential that emergency rooms provide access to time-sensitive emergency contraception for survivors of sexual assault. Survivors should not need to delay their care while they seek this care from other providers. There are many who may not be able to see their primary care doctor for the care they need, and timing is really important.

According to mergerwatch.org, an estimated 25,000 women in the United States become pregnant as a result of sexual assault each year, and statistics suggest that 22,000 of those pregnancies could have been prevented if the sexual assault victim had had timely access to emergency contraception. Women must be able to decide for themselves if, when, how, and with whom to have a child, which is why NARAL is advocating this session to ensure survivors are able to access this time-sensitive care as soon as possible.

Senate Bill 364 is a critical step toward breaking barriers down and ensuring we can all live in a freer Nevada that works for everybody. Nevadans are proud to live in a state with a long history of trusting women to make their own personal health care decisions. With this bill, the Silver State can continue to live out our values. We urge the members of this Committee to vote in favor of S.B. 364.

Serena Evans, Public Policy Specialist, Nevada Coalition to End Domestic and Sexual Violence:

During the 2019 Legislative Session, the Nevada Coalition to End Domestic and Sexual Violence worked with Assemblywoman Connie Munk on her legislation which, among other things, established the provisions that are in this bill. Unfortunately, the piece around emergency contraception was eventually amended out of the bill, so we are grateful for Caroline Roberson with NARAL Pro-Choice Nevada and Senator Scheible for bringing this important matter back this session.

This is the context of why this bill is so important. I want to share some information with you. Outside of my capacity at the Coalition, I also volunteer as a sexual assault advocate here in Washoe County. The Washoe County SANE medical facility is not at the hospital and is in a different location altogether. This facility conducts SANE exams for all of Washoe County and many of the northern Nevada rural communities. For a majority of the victim survivors I see and work with, their first response after being sexually assaulted is to go straight to the emergency room to seek medical care. They do not want to report to law enforcement. What they want most is care and emergency contraception. Choosing to undergo the SANE exam, engagement with law enforcement, and receiving emergency contraception are, and should be, separate decisions. It is so important that victim survivors are treated with compassion and given access to emergency contraception, whether or not they choose to submit themselves to a SANE exam or engage with law enforcement. Especially for our rural communities, having to travel hours to a SANE location when all

they really wanted was emergency contraception is not a victim-centered approach. All hospitals should have emergency contraception on hand and should dispense the medication when requested by the victim survivors. This bill is a great step in reducing the barriers that many victim survivors face throughout Nevada.

Chair Nguyen:

Do we have any other callers on the line in support? [There were none.] Do we have any callers in opposition on the line? [There were none.] Do we have any callers in neutral? [There were none.] With that, I will turn this back over to Senator Scheible for any closing remarks.

Senator Scheible:

I want to thank the Committee for your time. If you have any further questions, please do not hesitate to contact me.

Chair Nguyen:

I will close the hearing on S.B. 364 and open the hearing on Senate Bill 123 (1st Reprint).

Senate Bill 123 (1st Reprint): Revises provisions relating to the Nevada Silver Haired Legislative Forum. (BDR 38-6)

Senator Pat Spearman, Senate District No. 1:

This is a really simple bill which came about a couple of years ago when I appointed a very prominent member of our community and in my district to the Silver Haired Legislative Forum. At that time, I was told she was ineligible because she had not lived in Nevada for five years. This was someone who had retired from a major corporation and had a lot of insight into some of the things I know we are trying to do for seniors. That is why I brought this bill forward.

The 1997 Legislature created the Nevada Silver Haired Legislative Forum to identify and act upon issues of importance to aging persons. Its membership, hours, and duties are codified in *Nevada Revised Statutes* (NRS) 427A.320 through 427A.400. The Forum is composed of members equal to the number of State Senators—21—who, among other qualifications, must have been a registered voter for three years preceding their appointment in the senatorial district of the Senator who nominates them for an appointment. In addition, members must have been a resident of the state of Nevada for five years. Members of the national Silver Haired Congress from Nevada serve as ex officio members of the Forum. Nevada currently has two Silver Senators and three Silver Representatives.

Section 1 of the bill revises the qualifications for appointment to the Forum by reducing the requirement for state residency from five years to one year, or six months if the nominee is a member of the military, and reducing the requirement for residency in the senatorial district from three years to 30 days. Section 2 revises qualifications for a member of the Congress who is an ex officio member of the Forum to vote by reducing the requirement for residency

in this state from five years to one year, or six months if the ex officio member is a member of the military.

The changes proposed in this measure will expand the number of individuals who may be nominated by an appointing Senator to serve on the Forum. It will also give greater flexibility to appoint individuals who may be members of the military. Finally, the measure will expand participation by members of the Silver Haired Congress.

The five-year requirement for someone who is going to serve with no pay—basically a volunteer—to help us try and solve some of the issues facing our seasoned citizens did not make sense to me. When we limit the qualifications people must have—five years or ten years—well, we have things that need to be solved this year. We have things that need to be solved in the next six months. This bill affords an opportunity for those who are otherwise qualified to serve to be appointed to the Nevada Silver Haired Legislative Forum.

Chair Nguyen:

Do we have any questions?

Assemblywoman Titus:

Actually, this is a comment. Senator Spearman, thank you for bringing this forward. I have been in a position to appoint people to different boards, and it is almost impossible to find people willing to serve. When you have someone who is qualified and wants to do the job, that five-year restriction does not make sense, so thank you for bringing some commonsense legislation forward.

Chair Nguyen:

Do we have any other questions from Committee members? Seeing none, we will go to testimony in support. [There was none.] Do we have any callers in opposition to S.B. 123 (R1)? [There were none.] Neutral? [There were none.] Senator Spearman, do you have any closing remarks?

Senator Spearman:

This is commonsense legislation. When we have people who want to serve, it is ridiculous that they have to expand the number of years they have lived here. As a matter of fact, I think one of the greatest strengths of our state is the fact that you have people who are coming in from other places who can give us a fresh eye about how to solve some of our problems. It is commonsense legislation, and I hope you all will support this.

Chair Nguyen:

With that, I will close the hearing on S.B. 123 (R1). At this time, I will open the hearing on Senate Bill 398.

Senate Bill 398: Revises provisions relating to the Legislative Committee on Child Welfare and Juvenile Justice. (BDR S-507)

Senator James Ohrenschall, Senate District No. 21:

Senate Bill 398 comes out of the work of the last Interim Legislative Committee on Child Welfare and Juvenile Justice [[Exhibit D](#)]. I had the distinct honor of chairing the interim committee, ably assisted by Assemblywoman Monroe-Moreno who was vice chair, with a tremendous Legislative Counsel Bureau staff helping us, including Patrick Guinan and Julianne King from the Research Division and Eileen O'Grady and Karly O'Krent from the Legal Division. We were able to have two in-person meetings before the pandemic hit and four additional virtual meetings and come up with recommendations. One recommendation was Senate Bill 398. Senate Bill 398 recognizes how closely the interim Legislative Committee on Child Welfare and Juvenile Justice needs to work with the statewide Juvenile Justice Oversight Commission (JJOC). The statewide Juvenile Justice Oversight Commission was formed out of Assembly Bill 472 of the 79th Legislative Session. This was legislation during the 2017 Session, spearheaded by former first lady Kathleen Sandoval and former Justice of the Nevada Supreme Court Nancy Saitta, to try to unify efforts at improving the juvenile justice system in Nevada.

There are a lot of parallels in the work we can do together in terms of trying to help each other and work on legislation to reduce the number of children who end up in the juvenile justice system. We want to try and make sure that if children end up in the juvenile justice system, they get the treatment and help they need and try to prevent them from getting back into the juvenile justice system or ending up in the adult court system.

Administrator Ross Armstrong was a tremendous help during the interim in terms of information he gave the Committee and trying to answer all our questions. I know he cares passionately about the same goals of helping children either not get into the juvenile justice system or trying to get treatment and therapy that will help them get out and not come back.

Senate Bill 398 asks for more information from the statewide JJOC and asks them to let us know what their legislative priorities are. I would like to go now to Administrator Armstrong and anyone else who would like to speak in support and defer questions until after that.

Chair Nguyen:

Would you like them to be able to testify in support or be a part of your overall presentation?

Senator Ohrenschall:

With your permission, I would like them to be part of the overall presentation.

Chair Nguyen:

That is fine.

Ross Armstrong, Administrator, Division of Child and Family Services, Department of Health and Human Services:

In 2017, the Legislature passed a sweeping juvenile justice reform act. One of the key parts of that was the establishment of the Juvenile Justice Oversight Commission. They had to develop a five-year strategic plan [[Exhibit E](#)]. The current strategic plan focuses on the following four main goals: evidence-based practices and programs used by our service providers and our government entities; allowing a risk and needs assessment and mental health screenings to help inform court and other actor decisions; collaboration across different child-serving systems to meet its needs; and family engagement plans, understanding that an engaged family is the best way to increase success for a young person.

The JJOC has made big progress toward those goals. It has implemented an evidence-based risk assessment which is giving us so much information about our juvenile justice system and the kids we are serving—more so than ever before. We have adopted and are working toward concrete and uniform data-reporting measures so we can have even more information. This bill helps us set up the second five-year strategic plan for success. The first strategic plan is set to expire in 2023. Before we get to the 2023 Session, we would like to know what has gone well in the first five-year strategic plan and what legislative changes we might need to be even more successful in those second five years. It helps smooth out the awkward timing of where the legislative session lands and where the five-year strategic plan runs.

This bill requires the JJOC to provide an update on the five-year strategic plan and provide any specific legislative recommendations related to improvement for the next five-year strategic plan. Addressing the disparities in the juvenile justice system related to race and ethnicity is a federal requirement that we have now put into state law to help us make sure we continue to move the needle on that. Concerning compliance with any federal juvenile justice acts, sometimes Congress will pass a bill and we find ourselves out of alignment, so are there any legislative changes we need to make to be sure we are in compliance with all those federal requirements?

With that, I will hand it back over to the Senator.

Senator Ohrenschall:

When the JJOC was first formed, I had the honor to serve on the advisory committee. At one of the meetings, we had presentations from children who had finished some of the programs at the Caliente Youth Center or at the Nevada Youth Training Center in Elko. The children told us what they thought was working, what they thought needed improvement, and it was very important in terms of trying to shape some of the legislation that, hopefully, you will be seeing in some committees this session.

Ross Armstrong:

Leslie Bittleston and Kathryn Roose are here to answer any questions, but I wanted to note that there is a letter of support from the current co-chairs of the JJOC and they are willing, ready, and excited about the opportunity to participate in the bill if it is passed [[Exhibit F](#)].

Chair Nguyen:

Do we have any questions regarding S.B. 398? [There were none.] We will now go to testimony in support of S.B. 398.

DaShun Jackson, Director of Children's Safety and Welfare Policy, Children's Advocacy Alliance:

The Children's Advocacy Alliance is in support of S.B. 398. We believe it is essential for the reform of the juvenile justice system.

Chair Nguyen:

Do we have any other callers on the line in support? [There were none.] Do we have any callers in opposition? [There were none.] Do we have any callers in neutral? [There were none.] I will turn this over to you, Senator Ohrenschall, for any closing remarks.

Senator Ohrenschall:

Thank you, members of the Committee, for hearing S.B. 398. The more children we can divert from ending up at either local or state correctional facilities, the better. It will be a success if they can stay at home or stay in the community and receive therapy and treatment. I believe S.B. 398 will go a long way toward achieving that.

I want to thank Judge Egan Walker of the Second Judicial District, who serves as one of the co-chairs of the JJOC since its formation, as well as Joey Orduna-Hastings for their tireless work trying to improve outcomes for children caught up in the court system. I want to thank Administrator Ross Armstrong who has worked so diligently trying to make sure that if children do end up in a state correctional facility, they try to get them therapy and treatment that will help them land on their feet once they go home and also trying to help find homes for these children because that is often a struggle he and his division face. Thank you for hearing the bill, and I hope you will consider moving it forward.

Chair Nguyen:

Thank you and thank you for your unwavering support for children in our state. With that, I will close the hearing on S.B. 398. At this time, I will open the line for public comment because there is no one in the room. [There were no callers.] That concludes our meeting for today. Our next meeting will be on Friday, April 23, 2021, at the call of the Chair. We will be hearing some bills that came from the Senate and have been referred to our Committee. The meeting is adjourned [at 2:21 p.m.].

RESPECTFULLY SUBMITTED:

Terry Horgan
Committee Secretary

APPROVED BY:

Assemblywoman Rochelle T. Nguyen, Chair

DATE: _____

EXHIBITS

[Exhibit A](#) is the Agenda.

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

[Exhibit C](#) is written testimony dated April 21, 2021, submitted by Caroline Mello Roberson, State Director, NARAL Pro-Choice Nevada; Southwest Regional Director, NARAL Pro-Choice America, in support of Senate Bill 364.

[Exhibit D](#) is a draft document titled "Nevada Legislature Legislative Committee on Child Welfare and Juvenile Justice," dated October 23, 2020, submitted by Senator James Ohrenschall, Senate District No. 21, regarding Senate Bill 398.

[Exhibit E](#) is a document titled "FY 19-23 Strategic Plan," dated June 21, 2018, prepared by the Juvenile Justice Oversight Commission and submitted by Senator James Ohrenschall, Senate District No. 21, regarding Senate Bill 398.

[Exhibit F](#) is a letter dated April 5, 2021, submitted by The Honorable Egan Walker and Joey Orduna-Hastings, co-chairs, Juvenile Justice Oversight Commission, Division of Child and Family Services, Department of Health and Human Services, in support of Senate Bill 398.