### SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

# Eighty-first Session April 22, 2021

The Senate Committee on Health and Human Services was called to order by Chair Julia Ratti at 3:35 p.m. on Thursday, April 22, 2021, Online and in Room 2134 of the Legislative Building, Carson City, Nevada. Exhibit A is the Agenda. All exhibits are available and on file in the Research Library of the Legislative Counsel Bureau.

# **COMMITTEE MEMBERS PRESENT:**

Senator Julia Ratti, Chair Senator Pat Spearman, Vice Chair Senator Dallas Harris Senator Joseph P. Hardy Senator Ben Kieckhefer

# **GUEST LEGISLATORS PRESENT:**

Assemblywoman Clara Thomas, Assembly District No. 17

# **STAFF MEMBERS PRESENT:**

Megan Comlossy, Policy Analyst Eric Robbins, Counsel Vickie Polzien, Committee Secretary

### OTHERS PRESENT:

Edina Flaathen

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

Katie Robbins, Planned Parenthood Votes Nevada

Arielle Edwards, City of North Las Vegas

Sarah Adler, Nevada Advanced Practice Nurses Association

DaShun Jackson, Children's Advocacy Alliance

Amber Falgout

Gabrielle Carr, Court Master, Sixth Judicial District Court

Buffy Okuma, Chief Deputy District Attorney, Washoe County

Alexis Tucey, Deputy Administrator, Community Services, Division of Child and Family Services, Department of Health and Human Services

Nancy Saitta Valerie Friskey

Kendra Bertschy, Public Defender's Office, Washoe County

### CHAIR RATTI:

I will open the hearing on Assembly Bill (A.B.) 119.

ASSEMBLY BILL 119 (1st Reprint): Revises provisions relating to the Maternal Mortality Review Committee. (BDR 40-740)

ASSEMBLYWOMAN CLARA THOMAS (Assembly District No. 17):

I will read from my written testimony (<u>Exhibit B</u>) which references the report on "Racial/Ethnic Disparities in Pregnancy-Related Deaths—United States, 2007-2016" (<u>Exhibit C</u>), and the presentation on Disparate Impacts of Severe Maternal Morbidity and Maternal Mortality on People of Color in Nevada from the Department of Health and Human Services (DHHS) (<u>Exhibit D</u>).

#### **EDINA FLAATHEN:**

In 2008, my husband and I were happy to find out we were expecting a baby girl. I went through much of my pregnancy with prenatal care, joyfully prepping for the arrival of our daughter. I had been ill for much of the pregnancy and attributed it to morning sickness. I began to notice swelling in my feet and ankles and asked my obstetrician if this was normal. He stated it was hereditary and that my mother may have also had swollen hands and feet when she was pregnant. As a new mother, I was reading any information I could on pregnancy and this did not sound normal to me, but took what she said as truth.

Two weeks before my due date, I saw a new nurse practitioner who was concerned about the swelling and ordered bloodwork and a 24-hour urine test. The next day, I received a call telling me I had preeclampsia and needed to deliver my baby. I went as long as possible attempting to deliver on my own, but ultimately, my blood pressure rose, and our baby was delivered via cesarean section. If not for the practitioner's care and quick thinking, I would have been in grave danger.

In 2010, I delivered a healthy baby with no complications and had what I thought was a perfect delivery until I became pregnant with my third child. I had

once again been sick throughout the pregnancy, but all seemed well until an ultrasound revealed I had placenta previa. As a precaution, I was monitored every 2 weeks and at 27 weeks experienced some concerning pain. My husband took me to the hospital where tests were taken to figure out the source of the pain. I started early labor which was controlled with medication.

My high-risk physician was concerned I had been bleeding internally and later found my uterus had ruptured due to a poor surgical procedure with my second child. The delivering physician said it was a miracle I lived. I lost over two liters of blood and needed several transfusions. Other than an early delivery, my son has grown into a spunky child with no developmental issues. Due to the work of the delivering physician, I was able to get pregnant a fourth time and delivered a healthy baby girl who is 11 months old.

I am thankful for the doctors who did not push my concerns aside and provided me with the appropriate care.

### **SENATOR SPEARMAN:**

Are there any specific areas or policies we should look at?

#### **ASSEMBLYWOMAN THOMAS:**

We are giving the Maternal Mortality Review Committee (MMRC) the mandate to assess the information for disparities among our Black and Indigenous women who will die or have complications from pregnancy-related issues. The DHHS can provide any detailed information you would need to assess this provision so MMRC can collect the data. If we do not have the data, we cannot access the tools required to submit or legislate policy.

### SENATOR SPEARMAN:

I continue to hear about cultural competency training while in medical school. There is cultural competency, and there is the culture of medicine. Sometimes the two do not agree. Would that policy help?

### ASSEMBLYWOMAN THOMAS:

Right now, that is one of the biggest issues we have in medicine. Many of our healthcare providers are not looking at women of color. They are putting us all in the same category which should not happen. We have different lifestyles, grew up differently, and have differences in the nature of our background and heritage, our living conditions and the food we eat. With Black and

Brown women, we have a tendency toward diabetes and high blood pressure. All of these should be taken into consideration when looking at and evaluating our health conditions.

Many of the maternal mortality committees I have spoken with have the biggest problem when it comes to providing information to healthcare providers and the community in general.

### SENATOR KIECKHEFER:

Based on the presentation from DHHS, <u>Exhibit D</u>, we now have a lot of this data. Would it be fair to look at the bill as including that data to contextualize what is already in statute—that the MMRC needs to develop recommendations for preventing maternal mortality and severe maternal morbidity? Will this bill drive the policy framing the debate to have policies more specific to these disparities?

### ASSEMBLYWOMAN THOMAS:

Yes. Because the MMRC exists, they would incorporate and extract data so the Legislature can enact policy going forward.

### SENATOR KIECKHEFER:

One data set not included in the report from DHHS is geographic-based data. Has that data been collected, or was it not included in this report?

KYRA MORGAN (Chief Biostatistician, Division of Public and Behavioral Health, Department of Health and Human Services):

We do have the available data; it was not included in the summary provided.

# KATIE ROBBINS (Planned Parenthood Votes Nevada):

Planned Parenthood Votes Nevada supports A.B. 119. The United States has the highest maternal mortality rate among similarly wealthy countries with Black women having a maternal mortality rate of double their White counterparts. This statistic is unacceptable.

We applaud the MMRC for taking steps to research and address these issues in Nevada so we can make childbirth a safer process for everyone, no matter your race or socio-economic status. Planned Parenthood Votes Nevada welcomes these changes to the MMRC and looks forward to working together to address the disparities in our healthcare system.

ARIELLE EDWARDS (City of North Las Vegas):

The City of North Las Vegas supports <u>A.B. 119</u>. The City knows the maternal mortality rate showcases significant and widening disparities in maternal mortality and morbidity, especially in the Black and Indigenous communities of color.

We believe the MMRC is essential in an important effort to ensure the maternal mortality rate trends downward in Nevada. We urge the support and passage of A.B. 119.

SARAH ADLER (Nevada Advanced Practice Nurses Association):

The Nevada Advanced Practice Nurses Association (NAPNA) extends its appreciation and support to the bill sponsor for bringing <u>A.B. 119</u> in its amended form. I would like to thank the bill's sponsor, and her daughter, for their compelling testimony that shines a spotlight on why this bill is so important.

There are members of NAPNA who specialize in maternal health and obstetrics providing care to Nevadans of all demographic groups. The work of the MMRC is important to advance practice registered nurses in their practice.

Moreover, NAPNA is highly focused on the health of Nevadans from a public health perspective; the research, analysis, and collaboration among healthcare providers, the MMRC, and the Advisory Committee of the Office of Minority Health and Equity that <u>A.B. 119</u> assures will occur. That collaboration will produce data on which priorities or public health policy, action and needed funding can be focused.

DaShun Jackson (Children's Advocacy Alliance):

The Children's Advocacy Alliance supports <u>A.B. 119</u>. The development of MMRC will ensure all mothers and youth are being taken care of.

# AMBER FALGOUT:

I am the northern Nevada manager for Battle Born Progress who is in support of A.B. 119. I am also a mother and have two biological children including a four-month old. During the pregnancy with my four-month old, I had complications and know what can happen. It is incredibly frightening and difficult to work through. We must find out everything we need to know pertaining to women of color going through any stage of pregnancy. We must

push for accurate data to change the outcomes we are seeing with those populations.

### CHAIR RATTI:

I will close the hearing on A.B. 119 and open the hearing on A.B. 426.

ASSEMBLY BILL 426: Makes various changes relating to the protection of children. (BDR 38-516)

GABRIELLE CARR (Court Master, Sixth Judicial District Court):

The Nevada Supreme Court Community Improvement Program is a Statewide program that coordinates with every district within the State to improve outcomes for families in child abuse and neglect situations. I have supplied a copy of the subcommittee member and participant list (Exhibit E) which contains approximately 45 stakeholders throughout the State. This list includes judicial officers, administrators, child welfare workers, attorneys and a large demographic of stakeholders who deal with child abuse and neglect cases. This subcommittee unanimously agreed to the proposed changes presented in A.B. 426.

In addition, you have a memorandum (Exhibit F) regarding the summary overview of A.B. 426. This is a brief summary of why we need the recommended changes to Nevada Revised Statutes (NRS) 432B. It was an opportunity to give a comprehensive overview to a Statewide approach with large and rural jurisdictions being heard and address those changes to the law needed to improve the way these cases are handled.

There is a new statutory provision related to warrants. A Ninth Circuit Court of Appeals case indicates Statewide that there is no law making it uniform for a child welfare agency to remove a child from a home where a warrant is necessary. The purpose of that case is to make it more uniform in how the courts implement that requirement.

### CHAIR RATTI:

There was an amendment referred to earlier, which the Committee is not aware of. Was this about the bill itself and the changes it is making, or is there an additional document with additional changes we should be looking at?

BUFFY OKUMA (Chief Deputy District Attorney, Washoe County):

Yesterday, we were provided with an amendment that has not yet been presented. This amendment is likely coming from Kendra Bertschy, which we do support.

The Clark County Juvenile Probation Office wanted us to clarify section 1, subsection 3, paragraph (d) which provides for a warrant to direct law enforcement and others, if necessary, to assist the child welfare agency to provide safety when executing a warrant. They were concerned that the juvenile probation officers in their area do not carry weapons and would not necessarily be in a position to assist with executing a warrant.

This section says "may" which gives the court the discretion over who it authorizes to execute the warrant. We want to leave the possibility there because it may be appropriate for juvenile probation to assist in some jurisdictions, and in other jurisdictions, it would not be appropriate. We feel the language would allow for that flexibility.

# SENATOR KIECKHEFER:

Section 1, subsection 1, at the top of page 3 states "but the threat is not imminent in the time it would take to obtain a warrant." I interpret that to mean we do not think the child is going to be harmed between now and the judge issuing a warrant. Is that correct?

# Ms. OKUMA:

In a variety of cases, you have to get a warrant unless there is an exigency and the child would be at risk of harm in the time it would take to get a warrant. We have left the language as is in that respect because in some jurisdictions a warrant can be obtained very quickly based on the technology they have. In other jurisdictions, it can take a bit longer to obtain a warrant. While the case law has been around, the process is still somewhat in its infancy as compared to warrants that are obtained in the criminal realm.

### SENATOR KIECKHEFER:

Would this language prohibit placing a child in protective custody if they are in immediate jeopardy?

#### Ms. Okuma:

Correct. We have many circumstances where an exigency exists and the child is in immediate danger and placed in protective custody.

# CHAIR RATTI:

In that circumstance, do they get the warrant after the child has been placed in protective custody, or is the warrant mute at that point?

#### Ms. Okuma:

If there is an exigency, and the child is immediately placed into protective custody, there is no subsequent warrant. Whether there is a warrant or not, a hearing must be held within 72 hours, usually in less time than that, and a hearing notice is sent to the parents. They are provided counsel, and in most cases, it is before the court with a notice hearing.

# **SENATOR SPEARMAN:**

We have a number of children who are in unsafe conditions because of sex trafficking. Would that fall under this, or is this only for children who are in familial situations?

### Ms. Okuma:

This would not apply to a child who is a victim of sex trafficking unless the person who is responsible for that child is a parent or other caregiver. There are circumstances under NRS 432B that come within that, but other circumstances that do not. Chapter 432B only deals with children at risk of abuse or neglect by a parent or other person responsible for their welfare that has a specific definition.

### SENATOR HARDY:

If there is a child or parent who knows the child is going to be removed from their home and placed in foster care, and knows they have three or four days before this happens, the child could run away or the entire family could disappear. How do you handle that situation?

#### Ms. Okuma:

Those circumstances do happen but are rare as it relates to the circumstance of a warrant. Jurisdictions are obtaining warrants and have been for several years; however, we did not have a mechanism within the statute. Once the warrant is obtained by the social worker, they attempt to execute it quickly. Sometimes,

between the time of obtaining a warrant and executing it, the family does disappear and they use all of their resources to try to locate the family to execute the warrant. In those cases, or the exigent circumstance, there is no notice given to the child before the social worker arrives. The same with the parents; the case social worker or law enforcement generally provides the warrant and places the child in protective custody at the time the warrant is served.

### Mr. Jackson:

The Children's Advocacy Alliance supports A.B. 426. This bill is essential to the protection of children.

ALEXIS TUCEY (Deputy Administrator, Community Services, Division of Child and Family Services, Department of Health and Human Services):
The Division of Child and Family Services is neutral on A.B. 426.

### NANCY SAITTA:

I support A.B. 426. This is a bill that comes with significant support. It is an omnibus bill that allows for clarification, updating and modernizing of our statutory scheme that will make the safety of children and families, and the efforts of our judicial officers and other stakeholders, more appropriate to serve the children who need our assistance. This is a bill for which great gratitude is required. This will allow children and families the protection of a warrant in the movement from and between multiple families and foster care placement in a way that protects their dignity.

This bill can and will change the latitude or trajectory of our NRS 432B children and families and will make a difference for Nevada.

### SENATOR HARDY:

Who will be proposing the amendment that was mentioned?

### CHAIR RATTI:

I will address that in the closing of the hearing. I would urge the sponsors to be in communication with the Committee between now and any scheduled work session on this bill. If there is an amendment, please let us know so it can be reviewed before the work session.

I will close the hearing on A.B. 426 and open it up for public testimony.

#### VALERIE FRISKEY:

I am a resident of Assembly District No. 39 and a retired teacher from Lyon County. I am active in the Nevada State Education Association and here to encourage you to consider the need for all education employees across the State to have access to quality affordable health care upon retirement. Our members are facing escalating costs of health care and prescriptions. Nevada is a Windfall Elimination Provision, Government Pension Offset State, and many of our retired members will not have access to affordable health care because they will not or do not qualify for Social Security and/or Medicare.

As my colleagues retire, they incur insurance costs from \$800 to \$1,000 or more per month after spending their entire careers as public school employees. We are aware of and understand the State is facing serious budgetary constraints this year. We are asking the Legislators to fund steady retiree health care for education employees.

### **SENATOR RATTI:**

I will reopen the hearing on A.B. 426 for further support testimony.

KENDRA BERTSCHY (Public Defender's Office, Washoe County):

The Public Defender's Office supports A.B. 426. The proposed amendment (Exhibit G), is to clarify language changes in section 4, subsection 1, paragraph (a) where it states "If the person responsible for the child's welfare," the individual allowed to consent for the child to be placed into protective custody, is changed to "the parent or legal guardian."

This amendment, <u>Exhibit G</u>, is necessary because it clarifies who can consent to protective custody and complies with the constitution. It is the agreed upon language the stakeholders discussed during the negotiations for this bill.

### CHAIR RATTI:

For clarification; section 4, subsection 1, paragraph (a) is the language change of "the parent or legal guardian," correct?

Ms. Bertschy:

Yes.

#### CHAIR RATTI:

Would the sponsors of the bill consider this a friendly amendment?

Ms. Carr:

The amendment is language that was originally proposed in <u>Bill Draft Request</u> (<u>BDR) 38-516</u>. There was an oversight in the transition from the BDR to the actual bill. Our team's unanimous consent still exists on that amendment.

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

April 22, 2021 Page 12	
CHAIR RATTI: I will close the hearing on A.B. 426. Seeing adjourned at 4:41 p.m.	g no public comment, the meeting is
	RESPECTFULLY SUBMITTED:
	Vickie Polzien, Committee Secretary
APPROVED BY:	
Senator Julia Ratti, Chair	
DATE:	

Senate Committee on Health and Human Services

EXHIBIT SUMMARY				
Bill	Exhibit Letter	Begins on Page	Witness / Entity	Description
	Α	1		Agenda
A.B. 119	В	1	Assemblywoman Clara Thomas	Written Remarks
A.B. 119	С	1	Assemblywoman Clara Thomas	Morbidity and Mortality Weekly Report
A.B. 119	D	1	Assemblywoman Clara Thomas	Maternal Morbidity Disparities Presentation
A.B. 426	Е	1	Gabrielle Carr / Sixth Judicial District Court	CIP Legislative Subcommittee Members and Participants List
A.B. 426	F	1	Gabrielle Carr / Sixth Judicial District Court	Summary Memorandum
A.B. 426	G	1	Kendra Bertschy / Washoe County Public Defender's Office	Proposed Amendment