

**MINUTES OF THE  
SENATE COMMITTEE ON COMMERCE AND LABOR**

**Eighty-second Session  
February 22, 2023**

The Senate Committee on Commerce and Labor was called to order by Chair Pat Spearman at 8:02 a.m. on Wednesday, February 22, 2023, in Room 2134 of the Legislative Building, Carson City, Nevada. The meeting was videoconferenced to Room 4412E of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. [Exhibit A](#) is the Agenda. [Exhibit B](#) is the Attendance Roster. All exhibits are available and on file in the Research Library of the Legislative Counsel Bureau.

**COMMITTEE MEMBERS PRESENT:**

Senator Pat Spearman, Chair  
Senator Roberta Lange, Vice Chair  
Senator Melanie Scheible  
Senator Skip Daly  
Senator Julie Pazina  
Senator Scott Hammond  
Senator Carrie A. Buck  
Senator Jeff Stone

**STAFF MEMBERS PRESENT:**

Cesar Melgarejo, Policy Analyst  
Bryan Fernley, Counsel  
Veda Wooley, Counsel  
Lynn Hendricks, Committee Secretary

**OTHERS PRESENT:**

Nick Stosic, Interim Insurance Commissioner, Division of Insurance, Nevada  
Department of Business and Industry  
Alexia Emmermann, Chief Counsel, Division of Insurance, Nevada Department of  
Business and Industry  
Michael Hillerby, American Council of Life Insurers  
Matthew Sharp, Nevada Justice Association  
John Carlo  
Helen Foley, Nevada Association of Health Plans

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Elliot Malin

Dan Musgrove, Nevada Donor Network

Paige Barnes, Fresenius Medical Care North America

Nick Shepack, Fines and Fees Justice Center

Jessica Ferrato

Rick McCann, Nevada Association of Public Safety Officers; Nevada Law  
Enforcement Coalition

Nick Vander Poel

Cyrus Hojjaty

Barry Cole, M.D.

Maya Holmes, Health Policy Director, Culinary Health Fund

Randy Soltero, International Alliance of Theatrical Stage Employees

Phil Jaynes, International Alliance of Theatrical Stage Employees

Vincent Saavedra, Executive Secretary Treasurer, Southern Nevada Building  
Trades Union

Greg Esposito, Nevada State Pipe Trades Association

Susie Martinez, Executive Secretary Treasurer, Nevada AFL-CIO

Fran Almarez, International Brotherhood of Teamsters

Edward Goodrich, Political Director, International Alliance of Theatrical Stage  
Employees, Local 363

Misty Grimmer, Nevada Resort Association

CHAIR SPEARMAN:

I will open the work session on Senate Bill (S.B.) 91.

**SENATE BILL 91**: Authorizes a licensed clinical alcohol and drug counselor to  
supervise a certified problem gambling counselor intern. (BDR 54-57)

CESAR MELGAREJO (Policy Analyst):

I have a work session document ([Exhibit C](#)) giving a summary of this bill. No  
amendments were offered.

SENATOR SCHEIBLE MOVED TO DO PASS S.B. 91.

SENATOR DALY SECONDED THE MOTION.

THE MOTION PASSED UNANIMOUSLY.

\* \* \* \* \*

CHAIR SPEARMAN:

I will open the hearing on S.B. 57.

**SENATE BILL 57**: Revises provisions relating to insurance. (BDR 57-272)

NICK STOSIC (Interim Insurance Commissioner, Division of Insurance, Nevada Department of Business and Industry):

It is my honor to present S.B. 57, which is the omnibus bill for the Division of Insurance (DOI).

Due to the unique nature of risks and hazards in different parts of the Country, the U.S. Congress has left the regulation and ability to tax insurance up to each state. The insurance industry in Nevada has grown from 11 billion written premiums in 2012 to over 22 billion in 2021. The Insurance Premium Tax is the fourth largest contributor to Nevada's General Fund, contributing \$1.2 billion in this upcoming biennium, according to the Economic Forum. The DOI is first and foremost a consumer protection agency, with our mission being to protect consumers in their insurance experiences and maintain a stable and competitive market.

Insurance is a heavily regulated industry because of the potential financial risks and the impact on both consumers and businesses. The staff of DOI has specialized knowledge of risk, finance, insurance, contracts, fraud and customer service. For the purposes of regulating insurance alone, the DOI is responsible for regulating 59 individual chapters within the *Nevada Revised Statutes* (NRS), Title 57, and we share four additional chapters regulating workers' compensation insurance with the Division of Industrial Relations, Nevada Department of Business and Industry.

The DOI regulates approximately 1,700 insurers who are authorized to write policies in Nevada, along with just under 150 captive insurers who are domiciled in Nevada. The number of licensed producers in Nevada has grown by roughly 100,000 over a 2-year period, from approximately 150,000 licensed producers in 2020 to roughly 250,000 today. In fiscal year (FY) 2020-2021 and FY 2021-2022, the DOI's Consumer Services Section responded to approximately 25,000 consumer inquiries and investigated roughly 5,000 consumer complaints regarding the activities of insurance companies, insurance agents, bail agents, title agents, service contract providers and other

regulated entities. Through its efforts, the Consumer Services Section recovered close to \$8.9 million for Nevada consumers during this period.

I will now provide you with a brief review of the changes proposed in S.B. 57. Since the bill addresses numerous chapters in Title 57, we have provided you with a summary of the changes being made in this bill ([Exhibit D](#)), along with a listing of the individual chapters within Title 57 ([Exhibit E](#)).

Section 1 of S.B. 57 changes the current requirement for health carriers to submit a copy of every provider denial letter to the Commissioner. Instead, they will submit a report that summarizes the provider network denials, while making a copy of every denial letter available to the Commissioner upon request. This change will allow for a more efficient collection of provider denial data and will foster efficiencies to both carriers and the DOI.

As we address section 2, I want to mention to Committee members that we met yesterday with Matt Sharp and Victoria Coolbaugh of the Nevada Justice Association to discuss sections 2 and 21 of the bill. They later provided us with language for potential amendments to both sections. We greatly appreciate the opportunity to hear their thoughts and to continue to work with them on these sections.

ALEXIA EMMERMANN (Chief Counsel, Division of Insurance, Nevada Department of Business and Industry):

In section 2 of S.B. 57, the DOI seeks to make confidential certain information related to matters investigated by the Commissioner that ended up in a warning, nonaction or other informal disposition. It also authorizes the Commissioner to classify as confidential certain records and information relating to deliberations and makes the deliberative records not subject to subpoena, except that the Commissioner can release information if it does not affect an investigation or if a court orders the release.

From our perspective, open and honest communication is imperative to effectuate the purpose of the insurance code. It sometimes takes considerable evaluation, collaboration and hypotheticals to understand how agency decisions would impact the insurance market, the industry, the licenses, consumers and the public. Often, there is no one person at the DOI who can provide the analysis needed. It has to be a team approach with a lot of "what-ifs." Investigations include these internal discussions to fully understand the laws,

the evidence involved, and the potential results or consequences of the proposed action.

To properly regulate, the DOI needs a devil's advocate to avoid unintended consequences. If staff are concerned about unfiltered thoughts becoming public, they do not freely share these honest thoughts. The ability to have these honest thoughts and unique ideas makes the DOI more able to protect consumers, competition and Nevadans. Some of these discussions are captured in our records, but some are not. The DOI's concern with our deliberative records is that releasing this information and hypotheticals could harm people in the industry. We have seen the inferences made from this information, and they do not serve transparency, justice or fairness.

MR. STOSIC:

Section 3 of the bill removes the phrase "threatened act" and adds language related to the business of insurance. This section also moves the deadline for holding a hearing from 30 days to 60 days. It also provides that the Commissioner shall issue a final order in a contested case within 45 days after the close of the hearing. These changes are necessary to simplify important deadlines, which will ensure the DOI can efficiently manage cases and limit the misuse of the provisions to request hearings. The current language is vague and often allows hearings to be requested for essentially any reason.

Section 4 of S.B. 57 makes additional records confidential, including information related to investigations for the prosecution of insurance fraud, with exceptions. It also requires such records and information to remain confidential after the conclusion of the investigation. The new requirements are necessary because criminal investigations are sensitive and disclosing investigation information could undermine case prosecution.

Section 5 revises the terminology used to describe fees in NRS 680B.010 to match the language used in the statutes. The amount of such fees remains unchanged. This section also removes duplicative fees. The change will allow users of the insurance code to better understand and interpret the requirements for these license types.

Section 7 requires a managing general agent to file and maintain a surety bond of \$50,000 with the Commissioner. This is intended to match the licensing requirement of similar applicants in NRS 683A.

Section 8 requires an administrator to notify the Commissioner of changes to members, owners, directors or officers within 30 days. They must also report changes to their physical locations, mailing addresses, electronic mail addresses and legal or fictitious names.

Section 9 revises NRS 683A.025 to clarify that any person who administers a program of pharmacy benefits for an employer, insurer, internal service fund or trust must be licensed as a third-party administrator. Many pharmacy benefits managers (PBMs) are already obtaining Nevada administrator's licenses. However, we have been receiving pushback from some PBMs. This clarity will be helpful to properly enforce the statutes.

Sections 11 and 12 revise requirements for out-of-state applicants for administrator certificates of registration to include in their applications the authorization documents issued by their home states. These sections also require applicants to comply with all applicable provisions of Title 57 and related regulations to renew their authorization. These revisions enable the DOI to verify out-of-state licenses and ensure compliance with Nevada law.

Section 13 clarifies that subcontracting is not permitted between two third-party administrators and that liability may not be transferred under such agreements, even between contracting parties. The prohibitions are necessary to ensure that contractual duties are performed and to ensure adequate recovery for wronged parties.

Section 14 adds language to allow the Commissioner to require an applicant for a license as a managing general agent to submit a copy of any contract between the applicant and each insurer the applicant will represent as a managing general agent, in addition to meeting the bond requirements contained in section 7.

Sections 15, 19 and 36 authorize the Commissioner to renew a temporary license as a producer of insurance, independent adjuster and exchange enrollment facilitator for an additional 180 days under certain circumstances, such as concluding a State matter or completing tours of duty in the military.

Sections 16 to 18, 20, and 40 through 42 revise provisions concerning the licensure of insurance consultants, business entities, adjusters, insurance agents and firms of corporations. These revisions both clarify and standardize the

circumstances in which an agent of an insurer is required to designate a natural person to represent the agency or to be responsible for the agency's compliance with the laws and regulations governing insurance. The term "appointment" is also removed from the statutes in favor of the term "sponsorship" because the Division views these terms as distinct. This will also allow users of the insurance code to better understand and interpret the requirement for each license type.

Section 21 clarifies that NRS 687B.420 applies to policy cancellations of certain life and health insurance policies issued under NRS chapters 688B, 689A through 689C, and 695A through 695F. Policies issued under these chapters require that cancellation cannot be effective until at least 60 days after the policyholder is provided with notice of cancellation, rather than the 30 days' notice that is allowed for property and casualty policies.

Section 22 prohibits individual and small group health benefit plan insurers who have removed a prescription drug from a formulary from adding that same prescription drug back into the formulary at a higher cost tier in the same plan year in which it was removed, except at the times and under the circumstances provided under existing law. Current statutory language has provided a loophole that enables the carrier to remove a drug from its formulary and then add that same drug back at a higher cost during the same plan year, thereby circumventing the statutory intent of NRS 687B.4095.

Section 23 reduces the minimum allowed rate for determining annuity nonforfeiture benefits from 1 percent to 0.15 percent to both help ensure insurer solvency and to bring Nevada annuity nonforfeiture rules in line with the National Association of Insurance Commissioners Model Law updates.

Section 24 allows for the sale of contingent deferred annuities in Nevada. It clarifies that this type of annuity, which is designed to provide guaranteed lifetime income payments if an investment account is exhausted during the lifetime of an annuitant, is not subject to nonforfeiture rules because contingent deferred annuities are not designed to accumulate value.

Sections 25 and 27 relate to prepaid contracts for funeral and cemetery services. They also clarify that the requirements of NRS 683A.301 apply to an applicant for a certificate of authority. The intent behind this change is to ensure that the names of funeral and cemetery sellers are not deceptively like

existing entities, which provides a layer of protection to consumers and businesses that are currently licensed in Nevada.

Section 26 requires a person to have a good business and personal reputation to qualify for an agent license to sell prepaid contracts for burial services on behalf of the seller. Most licensees under Title 57, including a funeral agent, are required to have a good business and personal reputation to be licensed. This language necessarily standardizes the requirements for sellers of burial contracts with other Title 57 licensees.

Section 28 replaces the definition of the term "health benefit plan" in NRS 689C.075 with the definitions used in NRS 687B.470 to help promote statutory consistency and reduce potential confusion of having multiple definitions of the same term.

Section 29 clarifies that the provisions regarding confidentiality and disclosure of certain records and information that currently apply to traditional insurers would also apply to captive insurers domiciled in Nevada.

Sections 30 through 32 move the annual filing deadline of the statement of financial condition for various types of captive insurers from March 1 to June 30. This change will allow captive insurers to provide annual report filings using audited financial information. In addition, because traditional insurers' filings are due on March 1, this change will allow for better use of the DOI analysts' availability regarding financial report reviews.

Sections 33 through 35 make conforming changes necessitated by the renumbering of the fees table included in section 5.

Section 37 provides that Nevada Rules of Civil Procedure do not apply at delinquency proceedings against an insurer, which is necessary because receivership petitions are extremely time sensitive. Discovery is neither appropriate nor necessary to protect policyholders and other creditors in an insolvency, and discovery could also result in a waste of the State's assets.

Section 38 eliminates duplicative statutory language regarding the powers of the Commissioner as a receiver, rehabilitator or liquidator of an insurer. The intent is to remove potential confusion regarding language of authority and compensation of those hired in receiverships and to ensure the NRS is



consistent with the Uniform Insurers Liquidation Act and the Insurer Receivership Model Act.

Section 39 adds language to clarify that when a receiver is to be appointed in delinquency proceedings for an insurer, certain persons that may be appointed serve at the pleasure of the Commissioner. The added language ensures that the NRS is consistent with the Uniform Insurers Liquidation Act and the Insurer Receivership Model Act.

Sections 43 and 46 establishes that only a bail enforcement agent (BEA) is authorized to take certain actions with respect to the apprehension and surrender of a defendant.

Section 43 also removes the term "dwelling" in favor of the term "structure." This is necessary because a defendant might be in a structure that is not necessarily a dwelling.

These changes are necessary because BEAs and bail agents continue to use unlicensed persons to locate and apprehend defendants. Bail enforcement agents must meet specific qualifications to engage in locating, apprehending and surrendering defendants who have failed to appear in court. These qualifications, which include rigorous training, distinguish the BEA from the bail agent. Some statutes state that bail agents can locate, apprehend and surrender defendants, which clearly contradicts the definitions, qualifications and training of the two licenses. Changes are also needed to ensure the safety of the BEAs because Nevada allows persons to defend their homes with deadly force and to require BEAs to use reasonable locating and apprehending tactics. This is an important issue in Nevada, as we have experienced several bail apprehension-related shootings as recently as 2021.

Section 44 provides that a bail agent who improperly causes the surrender of a defendant to custody is not entitled to collect fees related to the surrender.

Section 45 prohibits a bail agent, general agent, BEA or bail solicitor from allowing any person other than a licensed BEA to participate in the functions of a BEA.

Section 47 removes the phrase "threatened act" from NRS 315.725, section 9. This revision is necessary to conform with section 3 of the bill, which simplifies

hearings regarding whether an insurer or an employee of an insurer has engaged in unsuitable conduct and for any other purpose when within the scope of the insurance code.

SENATOR DALY:

I have a number of questions, but in the interest of not taking up too much of the Committee's time, I have asked the DOI to meet with me later. My questions are in regard to sections 2, 4, 7, 13, 23, 37 and 43.

SENATOR STONE:

In section 26 regarding prepaid funeral expenses, you say an entity must have a good business and personal reputation to qualify to sell prepaid contracts for burial services on behalf of the seller. That is good and well, but what happens if you prepay for funeral expenses at ABC Funeral Home and it goes out of business? Is a bond required that will protect the consumer so that they will in fact have those services delivered?

MS. EMMERMANN:

Funeral and cemetery licensees are required to get a bond to protect consumers. Licensees are also required to deposit the funds they receive into a trust so the funds are there until needed, and they submit that information to us for the solvency component.

SENATOR STONE:

I assume funeral homes would need to communicate that information to the Insurance Commissioner.

MS. EMMERMANN:

Yes. Funeral homes do need to keep in communication with us, and they are subject to solvency oversight.

MICHAEL HILLERBY (American Council of Life Insurers):

We are in support of S.B. 57. Having a uniform set of regulations, such as provided by the National Association of Insurance Commissioners, provides consumers and the industry with predictability. We appreciate the Association's hard work and are happy to support the bill.

MATTHEW SHARP (Nevada Justice Association):

We are in support for certain sections and have limited opposition to others.

We support section 21, subsection 3, which is needed to ensure that cancellation of insurance policies in health insurance conforms to two competing statutes. We are working with the DOI on specific language to accomplish that.

With regard to section 2, subsection 3, we feel the breadth of this confidentiality is too broad and restricts courts from ordering relevant documentation in civil or criminal litigation. We are working with Mr. Stosic on the language.

CHAIR SPEARMAN:

Can you give me an example of a situation where you would consider this definition in section 2, subsection 3, too broad?

MR. SHARP:

The idea has always been that when somebody is under investigation, the materials relating to that investigation are confidential. For example, if you have a car accident and the police investigate that accident, there is a level of confidentiality while the accident is being investigated. Once the police make a decision, however, the content of that investigation is a public record. That is basically the same situation that exists currently under Title 57. In certain instances, deliberations and the contents of communications between insurance companies and the Commissioner can be relevant in a civil lawsuit. For example, insurance companies may take different positions with the Commissioner versus what they say in the courtroom. From a policy perspective, the public should have a level of transparency to know who they are dealing with. Does that answer your question?

CHAIR SPEARMAN:

I think you addressed my question, but please come see me after the meeting.

JOHN CARLO:

I am sort of in opposition and sort of in favor of this bill. The way insurance claims are investigated needs to be looked at.

I have tried to contact the Commissioner about Tesla vehicles and how they are causing property damage and raising our insurance rates. We have some of the highest insurance rates. We also need to discuss tetrahydrocannabinol (THC) being allowed in the workplace. The numbers for THC are ten times the

numbers for marijuana. Alcohol has caused many deaths, but compared to THC, it is almost nothing.

We need to be talking about high insurance rates and bringing down the price of Tesla vehicles. I hope when Tesla builds semitrailers, they do not make them self-driving. That is an accident just waiting to happen. The DOI staff needs to pick up their phones because I can never get on the phone with them. I was given a very bad attitude from everyone when I was trying to find statistics on the number of Tesla vehicles that are being wrecked in Nevada. I would like the Insurance Commissioner's office to make that information available.

HELEN FOLEY (Nevada Association of Health Plans):

The Nevada Association of Health Plans includes ten organizations in Nevada that provide commercial health insurance.

While we concur with almost everything in S.B. 57, we would like clarification on sections 8 and 9. In section 8, we feel it is overly broad for an organization to be required to notify the Commissioner of every change in the organization within 30 days. We feel it is more appropriate to confine it to those who are handling business within the state of Nevada.

SENATOR STONE:

I appreciate the language that protects the consumer from PBMs taking a drug off the formulary and then later putting it back on the formula at a higher tier. Some PBMs will pit one drug against another to raise the price. That is, they will take one drug off the formulary and replace it with another in the same pharmacological class but in a higher tier. Would it be possible to amend this section of the bill to stop that practice as well? I would be happy to meet with you on this topic.

MR. STOSIC:

I would be pleased to meet with you to get your ideas on how to modify that section of statute.

SENATOR STONE:

My second question refers to the bail industry. The protections you are talking about are important, especially when people can use force to defend their domiciles, whether it is cars or structures. But a bail agent will sometimes include a clause in the contract stating that if the defendant does not show up

in court, the bail agent has a right to enter the home, whether by knocking on the door or breaking it down. That is a unique practice of bail bondsmen or BEAs, in contrast to law enforcement. I also like the fact that you have to call law enforcement to accompany you for an apprehension. Would this bill make this type of contract invalid?

MR. STOSIC:

The intent here is not to change that type of contract. Currently, bail agents do not have the training or the authority to apprehend, and BEAs go through specific training to train them for the type of situations they are going to experience. Bail agents are similar to insurance agents; they are trained solely in the process of selling bail bonds. The two have distinct functions. The challenge is that even though the law says you must use a BEA to apprehend, we have had numerous cases where a bail agent or someone who is completely unlicensed tries to apprehend. They run a great risk if they encounter force. All we are trying to do is make sure the protections are there.

SENATOR STONE:

Are BEAs licensed separately from bail bondsmen?

MR. STOSIC:

They are totally separate licenses.

MS. EMMERMANN:

That is correct. A BEA and a bail agent are two totally separate licenses. They can exist concurrently, in that a bail agent can also have a BEA license as long as the agent meets all the qualifications and goes through the training. A bail agent has to be 18 years old, has to be a resident and has to take 6 hours of training in surety law. A BEA has to do 80 hours of training, including tactical, surveillance techniques, constitutional law, due process and field training. A BEA has to know a lot more than a bail agent.

With regard to your question about the bail contract, a BEA has to have a reasonable belief that the person the agent is looking for is in that structure. Our concern is that we have had bail agents, BEAs and unlicensed people breaking into indemnitors' homes when it might not be part of the contract that they can go in at any time. They have also gone into businesses and workplaces. We want to make sure they really believe that person is in there, and that going in there to apprehend the person does not pose a threat to the public.

SENATOR STONE:

I support your efforts for more transparency and delineation to make sure that we are not storming homes when we are not sure a defendant is inside. I have seen some of the morbidity and mortality associated with people who are not licensed agents breaking in, and it is like the Wild West.

CHAIR SPEARMAN:

Regarding the court order, Mr. Sharp mentioned that it might infringe upon transparency. Can you explain that?

Ms. EMMERMANN:

While we are investigating, we have internal discussions in which we talk through what we are seeing, the evidence we have and what the law says, and we pose hypotheticals. The cases can be simple, such as an individual licensee who was terminated for cause by an insurance company, or they can be very complex, such as something to do with solvency or how an insurer responded to a claim on a contract. We want to be able to have these internal discussions without the possibility of disclosure posing a threat to the honesty of the conversation. We are not trying to evade the information. We want to make sure our internal discussions do not inadvertently become public. Sometimes we are wrong, and we do not want that wrong information to go out. That is not going to help anybody.

The Commissioner can still release the information if the Commissioner feels releasing that information is not going to harm the investigation. The court can also order the release of the information.

CHAIR SPEARMAN:

I will close the hearing on S.B. 57 and open the hearing on S.B. 132.

**SENATE BILL 132**: Revises provisions relating to insurance coverage for living organ donors. (BDR 57-551)

SENATOR JULIE PAZINA (Senatorial District No. 12):

Thank you for the opportunity to present S.B. 132, which seeks to prohibit discrimination against a living organ donor with regards to any policy or contract of life insurance, life annuity or health insurance.

Organ transplantation is a life-saving procedure that helps patients suffering from various illnesses. However, organ transplantation is only possible if there are organ donors who are willing to donate. According to the Nevada Donor Network, there are 627 Nevadans and more than 104,000 Americans nationwide waiting for a transplant. Regrettably and heartbreakingly, an average of 20 people die each day on the waitlist. Living organ donors are individuals who volunteered to donate an organ, part of an organ or tissue to a person in need of transplant. Living donation reduces the wait time for a recipient and decreases the chances of a possible recipient passing away while on the waitlist. Living donors are quite simply giving the gift of life.

ELLIOT MALIN:

Today I have the honor and privilege of being here not as a lobbyist on behalf of any client but as a Nevadan who has the privilege of working with all of you to make Nevada a better place.

On February 28, 2021, I received an email stating that my cousin needed a kidney. Without any hesitation, I filled out the paperwork and the donor application form to hopefully be a donor. On March 25, while I was downstairs in this building, I received a phone call from a hospital in Texas notifying me that I was a potential match. We started the process of the preliminary testing immediately. Before I came to the Legislature every week, I would have blood drawn, and it was sent to the medical team in Fort Worth, Texas, to confirm that I was a potential match, which is a complicated process.

By June 12, 2021, just days after we adjourned sine die, I was in Texas going through extensive testing to see if I was healthy enough and that my kidney would be a perfect match. On June 25, 2021, I received a phone call from the hospital informing me that I was a confirmed match and approved to donate my left kidney. And finally, on July 21, 2021, I gave my cousin my kidney.

Since then, I have gone through a lot just to be here. After the surgery, I received bills from the anesthesiologist. The only reason those bills went away is that a reporter from Reno wrote a story about the situation, and that story went viral. It was one of the top five medical stories of last year.

Throughout the entire process, the donor team at Baylor Scott and White in Fort Worth repeatedly informed me that Nevada has no laws to protect living organ donors. They told me I would be unable to obtain life insurance and my

rates for health insurance could potentially increase. They reminded me for the last time the morning of the surgery and offered me the opportunity to back out. In fact, 42 other states have enacted some form of protection for living organ donors. Nevada is not one of them. Nevada, Montana, Wyoming, South Dakota, Michigan, Vermont, New Hampshire and Tennessee are the last eight states that have not enacted any laws protecting living organ donors.

When I brought this up to Senator Pazina, she was enthusiastic about the chance to change this and make Nevada the forty-third state to enact some form of living donor protection. This will help not just me, but plenty of other Nevadans, both donors and recipients, by promising that living donors will be treated as every other normal healthy individual within the insurance system. The less a donor has to worry about, the more likely they will be to make the gift of life to someone in need.

There is little to no evidence that being a living organ donor creates a higher mortality rate or the development of end-stage renal failure. There should be no actuarial risk for a living organ donor within the insurance process. I would also like to highlight that not all insurance companies assess a higher premium for living organ donors, but it is possible.

The language in S.B. 132 is taken directly from the laws of Virginia, one of the last states to pass Living Donor Protection Act legislation in 2022. The Virginia law followed Pennsylvania's enactment of the law on June 26, 2021. Federal legislation was introduced in 2021 that would prohibit insurance companies from denying or limiting life, disability and long-term care insurance for living donors and prohibiting companies from charging higher premiums. Our intent is to mirror those laws.

Often, it is the lack of insurance protections and the potential for higher premiums that create doubt and stop roughly one-third of all potential donors from following through on donations. Peace of mind on this topic can make all the difference in saving another life.

This bill aims to prevent medical and life insurance companies from denying coverage or causing a living donor to have a higher premium rate for coverage, mirroring the language from other state and federal legislation.



I look forward to seeing S.B. 132 pass out of this Committee as we get another step closer to offering protections to Nevadans impacted by organ donation. Because of this bill, we will offer more opportunities for Nevadans to save lives by reducing the stresses associated with living organ donation.

The most important section of this bill is section 1, which states:

With regard to any policy or contract of life insurance, life annuity or health insurance, no person shall discriminate against the living organ donor by: (a) refusing to insure the living organ donor; (b) refusing to continue to insure the living organ donor; (c) limiting the amount, extent or kind of coverage available to living organ donor; or (d) charging a living organ donor a different rate, premium, deductible, copay or coinsurance than that charged to a similarly situated insured who is not a living organ donor for the same coverage, based solely, and without any additional actuarial risk, upon his or her status as a living organ donor.

As used in this section, "living organ donor" means a living person who donates one or more of his or her organs, including, without limitation, bone marrow, to be medically transplanted into the body of another person.

SENATOR DALY:

Why do we specifically call out bone marrow? It is not an organ, I know, but there are other things that are not organs that might be covered under the definition of tissues, such as corneas. Perhaps we should expand the definition to cover organs and other nonorgan donations as well. If we list only organs and bone marrow, it might be argued that we intended to cover just those two things and leave out everything else. Maybe we can get a clarification that would allow us to make our law better than the other states.

CHAIR SPEARMAN:

Mr. Fernley, can you comment on that? Does "tissue" include organs?

BRYAN FERNLEY (Counsel):

I will need to look up the definitions of tissue and organ, and I will let the Committee know.

MR. MALIN:

"Living organ donation" typically applies to kidney, pancreas or liver donation. I believe tissue is usually considered to come from a deceased donor and can include corneas, skin and other material.

SENATOR DALY:

This may just be a technical question, but I would not want to leave anybody out or leave doubt in the case of a living donor who donated some other type of material. We do not want to create an insurance question that we have to come back and fix.

SENATOR PAZINA:

We will wait to hear back from counsel and then get back with you.

SENATOR STONE:

I have a limited medical background, and I believe there are other organs and tissues that are transplanted. We might want to include language that covers any organs or tissues that can be transplanted without causing the loss of life of the donor.

SENATOR PAZINA:

Again, we will wait to hear from counsel regarding the definition of tissue.

SENATOR SCHEIBLE:

Thank you for bringing this bill. This is a fantastic idea, and I am happy to see that we are moving forward with it.

I want to make sure I understand this. If I donate an organ and there are some complications with that procedure, I might need further medical treatment as a result of having had what would be considered an elective procedure. This bill is saying that the insurance company cannot limit my coverage, and it cannot refuse to cover my antibiotics because the surgery was elective. It would be the same as if I had to have my kidney removed, in that they would have to cover the antibiotics for the infection that I got afterwards. Is that right?

MR. MALIN:

In that scenario, the recipient's insurance would cover that cost because it would be as a direct result of that surgery. After I donated my kidney and returned home, my incision reopened, and I could not get it taken care of here in

Nevada. I would have had to go to an emergency room, and it would have cost me an arm and a leg. Instead, the recipient's insurance covered me to return to Fort Worth and have the incision reclosed.

MR. FERNLEY:

In the NRS, organs and tissues are defined as separate things. In this case, the definition of "organs" would not include tissues. If the desire of the Committee was to have this provision apply to tissue donation, the word "tissue" would need to be added to the definition.

CHAIR SPEARMAN:

This bill has a personal meaning for me. I have a sister who has been on dialysis for five years, and one of the reasons she cannot get a kidney is that she is here in Nevada. Thank you for bringing this bill forward.

DAN MUSGROVE (Nevada Donor Network):

The Nevada Donor Network is 1 of 57 organ procurement organizations licensed in the U.S. and the only one based in Nevada.

We are in support of S.B. 132. You heard an incredible story of the magnanimous gift Mr. Malin was willing to give. We do not want to have someone who is willing to do that be dissuaded from giving because of an insurance issue. It is important that we remove those barriers to the life-saving gift of organ donation.

PAIGE BARNES (Fresenius Medical Care North America):

I am here to express support and gratitude for S.B. 132, which requires health and life insurance policies to provide insurance coverage for living donors and generally prohibits denial or conditioning of coverage based on the status of being a living donor.

Fresenius Medical Care provides care for thousands of Nevadans who rely on lifesaving dialysis treatment at one of our outpatient dialysis clinics for patients with end-stage renal disease. When patients' kidneys fail, they either need regular dialysis treatment or a kidney transplant to survive. While dialysis is a life-saving treatment that continues to improve and advance, kidney transplant is the treatment of choice for patients with end-stage renal disease. Unfortunately, access to transplants is limited for a variety of reasons. Nearly 90,000 people in the U.S. are waiting for kidney transplants, and only

17,000 people per year actually receive one. Fresenius Medical Care supports this effort to encourage and increase the number of organ donations. This bill will help reduce barriers for living organ donation.

NICK SHEPACK (Fines and Fees Justice Center):

I am here today as a citizen of Nevada, as a friend of a living organ donor and as someone who has lost family members to organ failure. I want to thank the Committee for making sure we are taking a good bill and pushing it as far as we can. It is one of my favorite things to see in this building.

We talk a lot about bravery and heroism, and we often speak about it as decisions made in a moment or in a split second. But being a living organ donor is something that takes a long time, as we have heard. You have to think about what is going to happen to you and jump through hoops to do this, and then just as you are about to go under the knife, you are told that you might not be able to get life insurance or affordable health insurance. To go through all of that and still make the choice to save a life, that is true heroism; that is true bravery. Whatever Nevada can do to support it, that is something we can collectively get behind. I urge your support of S.B. 132.

MR. HILLERBY:

I am pleased to be here today in support of this bill. We want to thank the sponsor of the bill for using the language we have worked on over the years with the National Kidney Foundation.

JESSICA FERRATO:

I am here today in my personal capacity. To make a long story short, I am a living kidney donor and a living kidney recipient. My sister is the recipient of two living kidney donations. My dad is a living kidney donor, and my stepmom is a living kidney donor.

I want to thank Senator Pazina for bringing this bill forward. This bill provides support for those who make the incredible choice to give the gift of life. To give you a few statistics about kidneys, someone is added to the kidney transplant waitlist every 14 minutes. Every day, 13 people die waiting for a kidney transplant. We do not want to create barriers for those willing to donate. I urge your support of S.B. 132.

RICK McCANN (Nevada Association of Public Safety Officers; Nevada Law Enforcement Coalition):

We are in support of this bill. Living organ donors save lives, and discriminating against those people for pecuniary gain is deplorable.

I have a chance to work with law enforcement each and every day. They are my heroes. Today, I can add some additional people to my list of heroes: Mr. Malin, Ms. Ferrato and other people who have done this. They are heroes, and we want to make sure that people do not go out of their way to hurt our heroes. For that reason, we support S.B. 132 and encourage this Committee to do the same.

NICK VANDER POEL:

I am here this morning representing myself as a bone marrow donor and the grandson of the person who received the eighth heart transplant done at Stanford and the eighty-seventh in the world. This issue is important to our family. We appreciate Senator Pazina for bringing this legislation forward, and we urge your support.

CYRUS HOJJATY:

I support this bill, which has a lot of good ideas.

BARRY COLE, M.D.:

I have no relevant affiliation, but I support anything that increases the pool of living donors. We have a constant shortage of organ donors, not just in Nevada but in the United States. Anything that gives equity to our donors is critical.

MAYA HOLMES (Health Policy Director, Culinary Health Fund):

We are neutral on this bill. We understand this is an important issue, but we wanted to hear the testimony and understand the intent of the bill. We are working through an understanding of how it would impact our plans and other members of the Health Services Coalition, which represents 25 employer and labor groups. We do not believe any of our plans charge living donors higher premiums or copays and coinsurance, but we are checking on that. It is an issue because some of the plans are smaller plans; they are nonprofits, self-funded or subject to collective bargaining agreements where the rates are set for five years. This means it can be difficult to absorb major adjustments in the plan. We are weighing that, and we will get back to the sponsors as soon as possible.

SENATOR BUCK:

Do Nevadans have to go out of state to get other organ transplants as well, or is it just kidneys?

MR. MUSGROVE:

The only transplant program in Nevada is at University Medical Center of Southern Nevada (UMCSN), and it covers only kidney transplants. For any other organ, you have to go out of state. The Nevada Donor Network is working on a transplant institute and received some funding from the Interim Finance Committee in the last biennium to create more transplant opportunities in Nevada. We are working with existing hospitals to expand UMCSN's kidney program. At this time, however, Nevadans have to go out of state to receive their life-saving operations. This is hard on the families.

SENATOR PAZINA:

With regard to the definitions of organ and tissue, in general a living donor cannot donate tissue except for reproductive tissue, which would be sperm, eggs or placenta.

Living organ donation is a selfless act that saves lives. It is important to recognize the insurance issues and concerns that living organ donors face. Insurance companies and policymakers must work together to ensure that living organ donors have access to affordable health insurance coverage and life insurance. Only then can we truly support and recognize the valuable lifesaving contribution of our living organ donors.

MR. MALIN:

I do not consider myself to be a hero. I love my cousin; we grew up together and are close. There was never a moment when I considered refusing to donate my kidney to him. It was an interesting experience and a good one, and it is not something I have ever regretted. To be honest, I am a little ashamed that I did not even know this was a problem until it affected me.

Dialysis is hard. It is hard on families, and it is hard on the body. This bill can make a real difference, and we can help a lot of Nevadans.

SENATOR LANGE MOVED TO DO PASS S.B. 132.

SENATOR STONE SECONDED THE MOTION.

THE MOTION PASSED UNANIMOUSLY.

\* \* \* \* \*

CHAIR SPEARMAN:

I will open the hearing on S.B. 147.

**SENATE BILL 147**: Makes changes relating to employment. (BDR 53-463)

SENATOR ROBERTA LANGE (Senatorial District No. 7):

Thank you for the opportunity to present S.B. 147, which requires payment of certain wages and compensation to an employee who has been laid off. We passed a bill similar to this in the last Legislative Session, S.B. No. 245 of the 81st Legislative Session, and the Labor Commissioner wanted us to strengthen it to give it more teeth.

According to a survey conducted by Mental Health America, 58 percent of those surveyed worry about the ability to pay for day-to-day living expenses, while a further 20 percent are very concerned. Additionally, 25 percent of those with anxiety and depression said that financial problems were the main contributing factor to their mental health problems. Unfortunately, many employees live in financial insecurity and live paycheck to paycheck to cover their expenses, pay bills and support their families. When an employee is terminated or laid off, it can be a difficult and stressful time. Not receiving their final paycheck on time can exacerbate an already stressful situation, leaving the employees struggling to make ends meet. This is especially true for employees who may have been counting on that final paycheck to help them transition into a new job or to cover their expenses until they find a new source of income.

For these reasons and more, under current Nevada law, employers are required to pay employees their final wages in full immediately following the termination of employment. If the employer fails to pay the wages or compensation within three days after the wages become due, the wages of the employee continue at the same rate for each day. They go until their final paycheck is paid in full for up to 30 days, whichever is less.

Senate Bill 147 builds upon this work to provide that when an employer lays off an employee, the wages and compensation earned and unpaid at the time of such layoff also become due and payable immediately. In addition, if the

employer fails to pay the wages or compensation of a laid-off employee within three days, the wages of the employee also continue at the same rate until paid in full or up to 30 days, whichever is less. Finally, the bill provides that the term "wages" includes the amounts owed to the laid-off employee.

RANDY SOLTERO (International Alliance of Theatrical Stage Employees):  
Here we go again. In 2021, we passed S.B. No. 245 of the 81st Legislative Session to help workers get their last paycheck when they leave employment. We are here again today to talk about a situation in which one organization found a way to circumvent that law.

The main action of S.B. 147 is to add the phrase "laid off" in several places to the language of last Session's bill. For example, in section 1, subsection 3 of the bill, the language would read, "Amounts due to a discharged or laid off employee." We need to do this because some employers decided that since the statute did not specify that it applied to people who had been laid off, they did not have to immediately pay any workers who were laid off.

As Senator Lange said, people need their paychecks. They need to pay their rent, feed their families, pay their bills and put gasoline in their cars. People need to go to work, and they need to get paid for going to work.

PHIL JAYNES (International Alliance of Theatrical Stage Employees):  
In 2019, one of our large employers on The Strip had a problem with onboarding new employees. As a result, over 200 stagehands were not paid for almost a year for work that they had performed.

We wrote S.B. No. 245 of the 81st Session to create a mechanism to allow workers who were not paid for work they had performed to go to the Labor Commission, and the Labor Commissioner would open an investigation to get them paid. That bill was signed into law in June 2021.

In fall 2021, work was picking back up at a rapid pace, but we started hearing complaints about one of the largest employers in Las Vegas. People were getting paid incorrectly or not at all. We reached out to the employer and were told that the pay issues were happening because they were in the middle of a merger and were short staffed. Since then, there have been 465 pay issues with this employer. That includes missing hours, wrong rates of pay and 117 workers who did not even receive a check.



Local 720 of the International Alliance of Theatrical Stage Employees has written almost 200 grievances and had to hire 2 payroll specialists to do the work that the employer cannot figure out. During the grievance process, the employer was made aware of S.B. No. 245 of the 81st Session. After the employer met with its attorneys, we were informed that this law only applies to terminated employees. They took the argument to the Labor Commission, and the Labor Commissioner ultimately sided with the employer. As of last week, there are 121 open payroll issues equating to over \$50,000 of unpaid wages from this one employer.

The vast majority of stagehands are not employees in the sense that they have a guaranteed work week or progressive discipline. They are guaranteed to have a four-hour minimum for the work they are dispatched to do. Essentially, they are terminated at the end of every job. This bill would close that loophole.

CHAIR SPEARMAN:

How much money is involved, and how long have the workers been waiting?

MR. JAYNES:

There were 465 originally, and some of them got paid in about a month. There are some grievances that have been going on since fall 2021.

SENATOR DALY:

I fully support the bill and hope it solves the problem. Unfortunately, we will probably see ourselves back here dealing with this problem in the future. In the construction industry, we have employers who will claim their workers are not discharged or laid off; rather, they say, "We just don't have any work today." They will do that for a week until it is a normal pay day and then pay them.

When it comes to paying the person at the regular rate for 30 days, how has that been interpreted? Is it for a regular 8-hour shift, or is it for a 24-hour period for 30 days? How has it been enforced?

MR. SOLTERO:

The legislative intent was to pay people at the normal schedule they would have worked if they had continued to work. In the case Mr. Jaynes referred to, normally they are on a four-hour guaranteed dispatch, so they would be paid as if they had continued to work four-hour days.

SENATOR DALY:

In most collective bargaining agreements, there is no three-day waiting period. It starts the next day. Most of the agreements in the construction business say that the person gets paid for 8 hours a day at time and a half until he gets paid, and there is no 30-day limit. We may have to stiffen these penalties if this continues to be a problem.

MR. SOLTERO:

That is true in a lot of collective bargaining agreements. This bill is intended to cover everyone in Nevada, not just those who are part of a collective bargaining agreement. The intent of S.B. No. 245 of the 81st Session and of S.B. 147 is to close the loopholes for all employees.

SENATOR DALY:

I was not suggesting it would only apply to people in collective bargaining agreements. I was just thinking maybe we should use their standard for all the people in Nevada.

SENATOR STONE:

I support the spirit of the bill. I would like to clarify something. An employer can tell someone who has historically worked 40 hours a week, "We are just going to pay you for four hours of work, and that way we are not terminating you." The employee then has to figure out how to pay the bills. How do we get around the fact that the workers are still technically employed, when in practical terms they have been laid off and should be paid their wages?

Also, this bill becomes effective July 1, 2023. Is there any retroactivity to help the 121 people Mr. Jaynes referred to who are owed more than \$50,000 in wages?

MR. JAYNES:

It would be great if there was retroactivity. We did not address that in the bill, though.

In the stagehand world, you can make a good living bouncing from one short-term job to the next, but ultimately it all comes down to your relationships with the employers. If the employer who always hires you retires or moves on, there is a good chance your income will take a hit. For stagehands

who work on the bounce, it is feast or famine, and you have to plan your life accordingly.

The problem we are trying to address with this bill is the employers who say, "Well, you weren't terminated, so we're not paying you. File a grievance and we'll see what happens." Hopefully, this will fix that problem and speed the process up. It all depends on an assumption that has been around as long as civilization: if I do work for you, you pay me for it.

CHAIR SPEARMAN:

I am still concerned about those people who are still waiting for their wages from months back. We are talking about people trying to come back from COVID-19 and families experiencing catastrophic financial distress. How much are those 121 people owed, and how long have they been waiting for it?

MR. JAYNES:

For those 121 people who are still active grievances in our system, the amount owed is over \$50,000, an average of \$458 per person. There is one person on that list who is owed \$3,600 for work he completed. The original list was 465 people, and all but 121 of those have been resolved. Even so, the process was incredibly slow.

CHAIR SPEARMAN:

Would this bill apply to those people whose positions were eliminated?

MR. JAYNES:

When positions are eliminated, we still expect people who did work to get paid for their work.

CHAIR SPEARMAN:

What happens if they do not get paid?

MR. JAYNES:

The conditions of S.B. 147 would apply, yes.

CHAIR SPEARMAN:

Do we need to put that language in the bill?

MR. FERNLEY:

No, I do not think so. Current law requires the payment of unpaid wages on discharge. When there is a separation from service by downsizing or elimination of a position, that would be a discharge. We would not need to amend the bill to capture that situation.

CHAIR SPEARMAN:

I ask the question because I would have thought the original language of S.B. No. 45 of the 81st Session covered layoffs. I just want to make sure there is no legal room to say, "You weren't discharged; we just eliminated your position, so we don't owe you anything."

SENATOR BUCK:

Can you tell us why this situation came up? Usually, you work and you get paid. What reason are employers giving?

MR. JAYNES:

This situation is all down to one employer who was going through a merger and laid off a lot of people during the COVID-19 pandemic. At the same time, the company brought on a lot of new people in management, including office staff and payroll staff, and integrated a new payroll system. We understand all those sorts of problems, but there has to be a time limit, and it stretched on for a very long time.

We talked to the chief executive officers and the head of their human resources departments. They wanted to pay, but they could not get their systems operating and catch up. When they started hiring people again, it just exacerbated the issue. It was a perfect storm, except the storm is still going on. There are still 121 people out there waiting for a check.

SENATOR BUCK:

Is this an isolated incident, or do you see it in many employers? What happens if there is a bankruptcy? Are the workers just out of luck?

MR. SOLTERO:

I believe you will hear from some folks here testifying in support of this bill of other industries that have had similar situations. If not, we will gather that information for you.

VINCENT SAAVEDRA (Executive Secretary Treasurer, Southern Nevada Building Trades Union):

We are in support of this bill for many reasons. In the construction industry, we pride ourselves in working ourselves out of a job. The faster we get it done, the faster we get laid off. That means we did a great job. Unfortunately, sometimes when the job is finished, employers do not want to lay off great employees even though they have no work for them. Instead, they string them along, saying, "Call in next week," when in fact the job is not ready due to inclement weather or some other reason. The result is that the workers do not get their layoff checks, and that is unfair to the workers.

Being union members, we pride ourselves in building and buying American. The American way has always been an honest day's work for an honest day's pay, and we believe in that. Every Nevadan deserves to get paid.

GREG ESPOSITO (Nevada State Pipe Trades Association):

We are fully in support of this bill. In response to Senator Buck's question, the why behind this situation is a complete disregard for wage earners.

A friend of mine who is on the autism spectrum was working for a fast food establishment. When you are earning pretty much the lowest wages possible, employers know they can take advantage of you. Most people who are low wage earners do not know the rules that govern how they get paid. Fortunately, when my friend had a problem, she came to me. That fast food restaurant owed her hundreds of dollars in back wages. They had falsified her hours and not paid her for overtime that she had worked. We took it to the Labor Commissioner, and the final amount they owed my friend was around \$500. They thought they could get away with not paying their workers, but she finally got the money she was owed plus a penalty. It made a huge difference in her life.

Imagine that story happening across the State. As Mr. Soltero said, this bill is not just for any one group of people; it is for the entire State. People are getting cheated every day out of wages they are owed. If we do not fix this problem now, it will cause bigger problems down the road as people decide they are not going to take it anymore.

SUSIE MARTINEZ (Executive Secretary Treasurer, AFL-CIO):

We are in full support of S.B. 147.

FRAN ALMAREZ (International Brotherhood of Teamsters):  
We are in support of this bill.

Teamsters work the convention industry. When a convention comes into town, there are many small companies who bring their booths and hire Teamsters to help. When the convention ends, many of these people leave town and do not pay their workers. We have to go to the Labor Commission and track these people down. Sometimes they come from outside of the U.S., and it is very difficult to get the workers paid. Workers need to be paid, and they need to be paid on time. We hope that adding the words "lay off" and "laid off" to this statute will make employers understand: you must pay these workers.

EDWARD GOODRICH (Political Director, International Alliance of Theatrical Stage Employees, Local 363):

We have had employers miss hours, and it makes us wonder why they cannot add one plus one. Why do they not understand that wage times hours worked equals pay? The situation is really frustrating, and I echo Mr. Jaynes' frustration with the whole process. This bill would help solve it.

I would like to amend the penalty to be time and a half or even double time until the employee is paid. That might encourage these employers to at least learn a little math.

MR. MCCANN:

I want to thank Senator Lange and her cosponsors for this bill. We support S.B. 147 and encourage this Committee to do the same.

Why am I here? I represent cops, who do not have these problems. But the cops are part of the community, and it is not right when it happens to other people. Protecting discharged employees and guaranteeing their wages is important; protecting laid-off employees by protecting their wages is equally important.

MISTY GRIMMER (Nevada Resort Association):  
We are in opposition to S.B. 147.

We appreciate the intentions of the sponsor to get at bad actors who use the term "layoff" as a way to avoid paying employees what they are owed. Our concern with the bill comes from the possible unintended consequences that

could result for some of our employees in the gaming industry. The need for employees may ebb and flow quite a bit depending on the season, the demand and show schedules. Temporary layoffs are not uncommon, but employees usually understand that they will be of short duration and that most likely they will be coming back. To a great extent, there are rules in our contracts tied to the seniority of the employee that govern how we manage these layoffs.

We have no issues with the portion of the bill that requires the payment of wages. Our concern with the bill is focused on the other compensation that may be due to the person at the time of being laid off. As the bill is drafted, we are worried that a person could lose benefits they have accrued, such as personal time off or vacation time, and have to start from scratch again when they return to work.

We appreciate the opportunity to work with the bill sponsor on a possible distinction between short-term and long-term layoffs with respect to the benefits portion of the bill.

CHAIR SPEARMAN:

I would encourage you to talk to the sponsor about those concerns.

SENATOR LANGE:

In this time of financial insecurity, it is important that people get paid in a timely manner. We need to go after the bad actors, and if they are not paying on time, we make penalties for them to pay on time. Many people live from paycheck to paycheck. That is an unfortunate reality, and we need to pass S.B. 147 to make those penalties happen and make sure workers get the pay that is owed to them.

CHAIR SPEARMAN:

I will close the hearing on S.B. 147. Is there any public comment?

MR. CARLO:

I want to be your friend. I will go on record to say that we need to raise the pay for the Legislators in Carson City. But I also want to be a friend to the unborn. Proverbs 31:8 says, "Open thy mouth for the dumb in the case of all such as are appointed to destruction." I would like to remind the Legislators that our Country was built on Judeo-Christian values. There is the story of Moses. When the local government, the pharaoh, feared that the slaves would outnumber the

Egyptians, he wanted to exterminate the Hebrew race. I have heard other Legislators on this board talk about the butterfly effect and the multiplying effect. I would like for you to think about when one child is murdered in his mother's womb, many more children are being exterminated. Also, the Roman Emperor Nero wanted to kill the Davidic bloodline, so he ordered that the children of Bethlehem be murdered.

In the year 2023, the local government in like manner entices the spilling of blood. God says these things that the Lord hates are an abomination unto him: a proud look, a lying tongue and hands that shed innocent blood. I would like to warn you because I have heard about family tragedy. God can bring anything. I prayed for an earthquake last April, and God sent an earthquake to northwest Las Vegas. I do not want the wrath of God to be upon Nevada, but we need to walk in the fear of God. We need to obey the Lord. We need to protect human life.

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CHAIR SPEARMAN:

Is there any further public comment? Hearing none, we are adjourned at 10:03 a.m.

RESPECTFULLY SUBMITTED:

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Lynn Hendricks,  
Committee Secretary

APPROVED BY:

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Senator Pat Spearman, Chair

DATE: \_\_\_\_\_

<b>EXHIBIT SUMMARY</b>				
<b>Bill</b>	<b>Exhibit Letter</b>	<b>Introduced on Minute Report Page No.</b>	<b>Witness / Entity</b>	<b>Description</b>
	A	1		Agenda
	B	1		Attendance Roster
S.B. 91	C	2	Cesar Melgarejo	Work Session Document
S.B. 57	D	4	Nick Stosic / Division of Insurance	Explanation Table for Bill
S.B. 57	E	4	Nick Stosic / Division of Insurance	NRS Title 57