



NEVADA LEGISLATURE
LEGISLATIVE COMMITTEE ON HEALTH CARE
(Nevada Revised Statutes [NRS] 439B.200)

SUMMARY MINUTES AND ACTION REPORT

The fourth meeting of the Nevada Legislature’s Legislative Committee on Health Care was held on Tuesday, April 10, 2012, at 9 a.m. in Room 4412 of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. The meeting was videoconferenced to Room 3138 of the Legislative Building, 401 South Carson Street, Carson City, Nevada. A copy of this set of “Summary Minutes and Action Report,” including the “Meeting Notice and Agenda” ([Exhibit A](#)) and other substantive exhibits, is available on the Nevada Legislature’s website at <http://www.leg.state.nv.us/interim/76th2011/committee/>. In addition, copies of the audio record may be purchased through the Legislative Counsel Bureau’s Publications Office (e-mail: publications@lcb.state.nv.us; telephone: 775/684-6835).

COMMITTEE MEMBERS PRESENT IN LAS VEGAS:

Assemblywoman April Mastroluca, Chair
Senator Valerie Wiener, Vice Chair
Senator Shirley A. Breeden
Senator Joseph P. Hardy, M.D.
Assemblywoman Maggie Carlton
Assemblyman Crescent Hardy

LEGISLATIVE COUNSEL BUREAU STAFF PRESENT:

Marsheilah D. Lyons, Principal Research Analyst, Research Division
Risa B. Lang, Chief Deputy Legislative Counsel, Legal Division
Asher Killian, Senior Deputy Legislative Counsel, Legal Division
Anne Vorderbruggen, Senior Research Secretary, Research Division

OPENING REMARKS

- Assemblywoman April Mastroluca, Chair, welcomed members, presenters, and the public to the fourth meeting of the Legislative Committee on Health Care.

PUBLIC COMMENT

- Chair Mastroluca called for public comment; however, no testimony was presented.

APPROVAL OF MINUTES OF THE MEETING HELD ON TUESDAY, MARCH 13, 2012, IN LAS VEGAS, NEVADA

- The Committee **APPROVED THE FOLLOWING ACTION:**

ASSEMBLYWOMAN CARLTON MADE A MOTION TO APPROVE THE MINUTES OF THE MARCH 13, 2012, MEETING HELD IN LAS VEGAS, NEVADA. THE MOTION WAS SECONDED BY SENATOR WIENER AND PASSED UNANIMOUSLY.

UPDATE AND PRESENTATION OF RECOMMENDATIONS REGARDING LOCAL FARMS PREPARING AND SERVING FOODS TO THE PUBLIC, INCLUDING FARM TO FORK INITIATIVES

(As directed by Chair Mastroluca, this agenda item was taken out of order.)

- Jeff Rowes, Senior Attorney, Institute for Justice, reported that he and Laura and Monte Bledsoe, the proprietors of Quail Hollow Farm, met with representatives from Nevada's Department of Health and Human Services (DHHS), and the Legislative Committee on Health Care, and subsequently provided a draft of proposed legislation to the Southern Nevada Health District. (Please see [Exhibit B](#)). He stated that comments have just recently been received regarding the draft proposed legislation and he anticipates that a final draft of the proposed legislation would be provided to the Committee soon. Mr. Rowes commented that the representatives from the State have been working with the Bledsoes and him in good faith to attempt to come to a solution and draft legislation that would protect the public health and allow the Bledsoe family, and other similarly situated farms, to run their farm to fork initiative.
- Laura Bledsoe, Quail Hollow Farm Community Supported Agriculture, said she is encouraged about the communications with the Southern Nevada Health District and State officials, and the major issue at this time involves meat.
- Chair Mastroluca inquired if they have worked with farm groups in Nevada, or other groups such as Gina Gavin's Project Dinner Table.
- Mrs. Bledsoe responded that they have been in verbal contact with other groups, and commented on the nationwide outpouring of interest that has been received concerning the issue of farm to fork dinners.
- Chair Mastroluca asked if the proposal will be ready prior to the last meeting of the Committee scheduled for August 2012.

- Mr. Rowes responded that it would. He noted he could answer questions about the first draft of the proposed legislation at this time; however, the parties would be able to get something to the Committee for discussion well in advance of its next meeting. He commented that their ideas will also be reviewed by other stakeholders in Nevada to make sure that everybody agrees.

In response to a question by Senator Hardy if the proposal is being modeled after something that is working in other states, Mr. Rowes said the final version of the proposal will incorporate the best ideas from other states and the insights of the State officials in Nevada.

Responding to Chair Mastroluca, Mr. Rowes stated that a draft proposal would be provided to the Committee by May 1, 2012.

- Chair Mastroluca called for public comment on local farms preparing and serving foods to the public, including farm to fork initiatives (Agenda Item VII); however, no testimony was presented.

REPORT CONCERNING THE PROVISION OF CERTAIN SERVICES AND FUNDING FOR THOSE SERVICES TO THE COUNTIES BY THE DEPARTMENT OF HEALTH AND HUMAN SERVICES (DHHS) FOLLOWING THE ENACTMENT IN 2011 OF SENATE BILL 471, S.B. 476, S.B. 480, S.B. 485, S.B. 503, AND ASSEMBLY BILL 580

- Michael J. Willden, Director, DHHS, referred to a spreadsheet he had provided titled “Status of County Assessments.” (Please see [Exhibit C.](#)) He noted that the spreadsheet lists the various assessments approved in the 2011 Legislative Session that transfer the responsibility for funding of programs from the State to the counties.

Mr. Willden discussed the following areas highlighted on the spreadsheet as areas of concern or open issues:

1. The assessment for Medical Aid for the Aged, Blind, and Disabled (MAABD) institution and waiver costs was expected to generate \$6 million in General Fund savings. Mr. Willden noted this is a significant issue to the counties. The State is collecting substantially more than \$6 million from the counties and has committed to the counties that the amount will be capped at \$6 million. He noted that the counties will be notified of their overpayment very soon.
2. With regard to developmental services in the Division of Mental Health and Developmental Services, Nye County has made one payment but has since said that was a mistake and they are not making any more payments, as they are of the opinion the State does not have the authority to collect payments from them in that area.

Responding to an inquiry by Chair Mastroluca, Mr. Willden stated that Clark County is cooperating and making payments under MHDS but they have not signed a contract with the State. He noted that the State would prefer the counties enter into a contract that describes the services the State will provide on their behalf; however, that is not a requirement.

3. Mr. Willden stated that all the rural counties are paying for Child Protective Services, with the exception of Nye County who has issued a letter stating that they would not pay because the State did not provide notice the previous May.

In summary, Mr. Willden stated that the counties are being very cooperative and payments are coming in with the exception of Nye County in two areas: Developmental Services and Child Protective Services. He noted that, with the exception of the MAABD institution and waiver costs, the counties have the option to provide the services instead of the State. Mr. Willden noted that there is activity in two groups of northern counties to take over some of these services.

Mr. Willden stated that the second page of the spreadsheet is a list of the programs where the State stopped passing through money to the counties for certain activities, or is passing through less money.

In conclusion, Mr. Willden stated that the State will be issuing notices to the counties soon for the next year's assessments and obligations, and will be sending letters to the counties capping their obligation under the MAABD institution and waiver costs at \$6 million. He clarified that the capping is for the new programs picked up by the counties.

- Chair Mastroluca inquired if the counties will be given a credit on their next payment or if a portion of the overpayment will be returned to them.
- Mr. Willden replied that the county's overpayment will be applied to the regular county match payment, and if it is not needed for the match payment, it will be refunded to the county. He stated that the letters to the counties advising them of their overpayment and containing an estimate of the amount they will have to pay the State to the end of the fiscal year should be sent out within a week. .
- Jeffrey Fontaine, Executive Director, Nevada Association of Counties, commended Mr. Willden and his team at the DHHS for their efforts in making the implementation of the assessments as smooth as possible. He noted that while the counties opposed the cost assessments and pushed-down services, the counties worked in good faith to comply with the mandates.

Mr. Fontaine discussed the length of time it has taken to obtain signed contracts from the counties and noted that some counties decided they would rather just pay the bills that are sent by the State and not have a signed contract. However, he noted that all the counties understood the importance of having the Medicaid match program agreements signed, and they were all signed very quickly.

Continuing, Mr. Fontaine pointed out that the disagreement in Nye County is based on advice from their District Attorney, who was of the opinion that for some of the services the process set out in Assembly Bill 97 (Chapter 117, *Statutes of Nevada 2009*) that laid out various procedures and time frames for transferring functions between governments,

should have been followed and it was not. Further, the Nye County District Attorney advised that in a couple of the bills passed in 2011 there needed to be a notice of the amount of the assessments prior to the effective date of the bill and that notice was not provided, so at least for the first year of the biennium, the county should not pay those assessments.

Mr. Fontaine stated that a concern regarding the implementation is that the counties are being required to pay bills without adequate documentation, and they are paying bills for services over which the counties have no control.

Mr. Fontaine discussed the impact of the assessments on the counties. He noted that the option to raise their tax rate to pay for some of the “push downs,” is not available to many counties. He further noted that funds are no longer available from the Indigent Accident Fund and the Supplemental Care Fund. Mr. Fontaine cited Lyon County as an example, which made \$2.7 million in cuts to their budget this year, \$1 million of which was the result of the assessments enacted in 2011. He reported that Mineral County has indicated they no longer have the money to pay the assessments. It is hoped some sort of hardship waiver can be provided for Mineral and other counties that simply do not have the money to pay for the assessments.

Mr. Fontaine stated that continuing to shift these costs to the counties is not effective and it is not sustainable. He said there needs to be a partnership based on an understanding of where the needs and the resources are. He noted that the Medicaid program is a good example of where the counties are working well with the State. Mr. Fontaine stated that through the leadership of Mr. Willden and the DHHS, and the counties, they have been meeting to figure out a way to address the need for resources to pay for expanded Medicaid coverage under the Affordable Care Act. He stated they would like to see more of this kind of in-depth discussion about sharing responsibility for some of the other programs.

Discussion ensued among Chair Mastroluca, Mr. Fontaine, and Senator Wiener regarding the information the counties are requesting from the State with regard to the billings.

- Kevin Schiller, Director, Washoe County Department of Social Services, stated that the two primary areas that are impacting Washoe County are the charges for developmental services and the MAABD program. He also noted that the DHHS has reached out to Washoe County in their request for more documentation and client data and is working on the request.

In response to Chair Mastroluca’s inquiry regarding Washoe County taking any of the services in-house, Mr. Schiller stated that Washoe County has started evaluating the developmental services component; however, a final determination has not been made to move forward and Washoe County will probably continue to pay the assessments at this point.

- Timothy Burch, Director, Clark County Social Services Department, stated that the MAABD assessment estimated to have a \$3.9 million impact to Clark County is being

exceeded, and is a concern as it is a liability that is impacting their clients. He noted that at the beginning of 2008, the Clark County Social Services Department had a three- to five-day wait for service and they now have an 18 business day wait, with 4,700 people waiting to receive services in Clark County. He noted that 16 staff positions were left open in the current budget and over 7,000 issuances of housing assistance were cut. Mr. Burch pointed out the correlation between the cuts in services offered through Clark County and the increase in homelessness. He stressed that to be able to control health care costs, the people need to be housed and their access to services kept open.

- Assemblywoman Carlton asked that the Committee be provided with examples of the cost of providing services within a three- or four-day service model versus what is actually happening under the 18-day wait for services when people who are medically fragile end up in an emergency room.
- Mr. Burch responded that he would work with the University Medical Center to attempt to highlight some instances of individuals who have seen their health deteriorate because of the delay and/or their unstable housing situation. He noted that the length of time for which services can be provided has also dramatically decreased.
- Chair Mastroluca called for public comment on the provision of certain services and funding for those services to the counties by the DHHS (Agenda Item IV).
- Bill Welch, Nevada Hospital Association, commented on the increased utilization of hospital emergency rooms when services are reduced or eliminated, and provided a copy of a letter that Washoe County has sent to all Washoe County hospitals notifying them that, effective March 1, 2012, through June 30, 2012, Washoe County will no longer be able to reimburse hospitals from the Health Care Assistance Program. (Please see [Exhibit D.](#))

DISCUSSION REGARDING UNLICENSED HEALTH CARE IN NEVADA

Unlicensed Medical Personnel

- Tracey D. Green, M.D., State Health Officer and Acting Medical Director of Mental Health and Developmental Services, Health Division, DHHS, stated that Nevada has seen a sharp rise in services provided by unlicensed people. She cited examples of situations where people became ill or died as a result of procedures being performed by unlicensed people with no sterile practices and using equipment illegal in the United States. She reported that the Health Division, DHHS, and the Office of the Attorney General, with key stakeholders and community members, have created a task force to produce a strategic plan and an action plan to increase enforcement and awareness of the problem of unlicensed health care providers.
- Frankie Sue Del Papa, Task Force on Unlicensed Healthcare, stated that two formal meetings of the task force have been held, and the next meeting will be April 24, 2012. She noted that a draft action plan will be circulated for comment June 1, 2012, and the final report will be done by June 30, 2012. Ms. Del Papa described the progress of

the task force's research and awareness program, which includes outreach to a master health community list that consists of all health-related boards and entities and representatives of the faith community, a master Latino list that includes all known Latino organizations and interested individuals, and bilingual materials.

Discussion ensued among Senator Wiener, Ms. Del Papa, and Dr. Green regarding creating awareness, access to care, and cultural awareness. Dr. Green indicated that much of the Latino community is affected by the unlicensed practitioners, and, in addition to town hall meetings, faith-based communities and schools will be used as an entry point to provide information. She noted that a number of bilingual physicians are also available and providing services.

- Brett Kandt, Executive Director, Nevada's Advisory Council for Prosecuting Attorneys, Special Deputy Attorney General, Office of the Attorney General, stated that the criminal justice agencies are reviewing ways to improve the criminal justice system's response to unlicensed health care, including developing better lines of communication between the various State and local agencies that may have jurisdiction over unlicensed activity. He further noted that proposed legislation is being developed for consideration that would stiffen criminal penalties when unlicensed activity results in serious injury or death.

Responding to Chair Mastroluca's question regarding the possibilities for prosecution, Mr. Kandt stated that each of the licensing boards has a statute that addresses unlawful acts and provides a penalty. He noted that many of the penalties for unlicensed practice are a Category D felony, some are a gross misdemeanor, and some are only a misdemeanor; however, there is nothing in the criminal statutes that specifically addresses a situation that results from a botched procedure done by someone who is unlicensed. Mr. Kandt opined that consideration should be given to creating a new criminal statute with criminal penalties.

In response to Senator Wiener's inquiry regarding the issue of consent to treatment, Mr. Kandt stated that law enforcement has to work with the statutes that are in place, and that is why the Committee should look at creating a new statute that specifically addresses unlicensed medical personnel and provides specific criminal penalties that are stiffer than those that currently exist.

- Douglas C. Cooper, C.M.B.I., Executive Director, Board of Medical Examiners, stated that Lyn E. Beggs, General Counsel, Board of Medical Examiners, was present with him to answer any questions.
- Assemblywoman Carlton asked if the Board of Medical Examiners is of the opinion it has the authority to pursue someone who has been reported to them as operating or performing medical procedures without a license.

Discussion ensued between Assemblywoman Carlton and Mr. Cooper regarding the ability of the Board of Medical Examiners to investigate an unlicensed medical procedure and share the information with law enforcement. Mr. Cooper stated that the jurisdiction of the Board of Medical Examiners extends only over those persons who are licensed to practice medicine. Mr. Cooper noted that because of Senate Bill 37 (Chapter 223, *Statutes of Nevada 2011*) the

licensing boards are now working together on investigations. Assemblywoman Carlton stated it is important that the public understand what their remedies are when they have an issue of what they believe to be unlicensed medical care.

- Chair Mastroluca asked that Marsheilah Lyons, Principal Research Analyst, Research Division, LCB, and Risa Lang, Chief Deputy Legislative Counsel, Legal Division, LCB, provide the Committee with a spreadsheet detailing the different licensing boards, their authorities, and penalties.

Responding to Chair Mastroluca's question about the abilities of the Board of Medical Examiners, Ms. Lang stated that one provision of the *Nevada Revised Statutes* (NRS) does allow the Board to apply to a court for injunctive relief. She further noted that under NRS 630.400, it would be a Category D felony if someone was found to practice medicine illegally.

- Barbara Longo, Interim Executive Director/C.M.B.I., Chief of Enforcement, State Board of Osteopathic Medicine, stated that Louis Ling, Board Counsel, was present at the meeting. She said that the State Board of Osteopathic Medicine agrees this is a serious issue and wants to play a role in addressing it. She stated that most of their complaints are received from law enforcement agencies; however, if a member of the public contacted the Board with a concern about an unlicensed practitioner, the Board would pass the information on to law enforcement and the Office of the Attorney General.

In response to Senator Wiener, Ms. Longo stated that the State Board of Osteopathic Medicine does have the ability to seek injunctive relief.

- John A. Hunt, Esq., Board Legal Counsel, Board of Dental Examiners of Nevada, discussed the history of the Board of Dental Examiners of Nevada in protecting the citizens of Nevada from unlicensed medical personnel through the filing of injunctive relief. Mr. Hunt stated that, in his opinion, every board should be required to investigate the illegal practice in their given area and the enabling statute should also require the district attorneys in the counties in which the event occurs to, within a given period of time, either initiate criminal action or report back to the respective board with an explanation of why they are not proceeding.
- Senator Hardy noted that Nevada's boards have traditionally been funded by fees, and he asked Mr. Hunt about his experience in funding an investigation of someone who is not licensed and does not pay fees.
- Mr. Hunt responded that, as part of the injunctive relief, at the point of entering into a permanent injunction, the criminal aspects are waived and part of the stipulation requires the person to pay the Board for the cost of the investigation. In that way, the Board recoups its costs.

Discussion ensued regarding the waiver of criminal action in the injunctive relief process and the ability to communicate information about an individual's record across state lines.

- Chair Mastroluca requested that Mr. Hunt provide his recommendations to the Committee in writing.
- Debra Scott, M.S.N., R.N., F.R.E., Executive Director, State Board of Nursing, stated that when the State Board of Nursing gets information about unlicensed practice or any practice that may be misconduct or injurious to one of Nevada's citizens, the Board immediately conducts an investigation, and if it is found that the person has no license, a cease and desist letter is issued. She noted that NRS 632.495 allows the Board to cite and fine, but it is just a misdemeanor. She noted that the information is also reported to law enforcement and it would be helpful if there could be some kind of encouragement for followup by law enforcement. Ms. Scott further noted that there is a national data bank where information about an imposter nurse can be sent. She stated that the Board also has injunctive power but it has never been used during her tenure on that Board.

Ms. Scott provided the Committee with a document containing the NRS sections for each board pertaining to penalties. (Please see [Exhibit E.](#))

- Larry L. Pinson, Pharm.D., Executive Secretary, State Board of Pharmacy, stated that the State Board of Pharmacy is in full support of the efforts of Dr. Green and Ms. Del Papa, and is assisting in the distribution of information. Mr. Pinson described the investigation of the Board when a complaint is received, noting that the Board can seize the drugs, and the facility is then no longer a pharmacy. He noted that the Board also inspects the pharmacies every year.

There was a discussion among Chair Mastroluca, Senator Wiener, and Mr. Pinson regarding the drugs that are seized.

- Vincent D. Jimno, Executive Director, State Board of Cosmetology, noted that the State Board of Cosmetology works closely with a number of similar boards because the Board's staff routinely inspects medical spas and related establishments. He stated that the staff has been cross-trained by the Board of Pharmacy on what to look for since they are legally in the establishment. Mr. Jimno stated that he has provided the Committee with a full summary of the activities of the State Board of Cosmetology. (Please see [Exhibit F.](#))

Continuing, Mr. Jimno described the topic of unlicensed practices by aestheticians, who are trained for surface skin care but are employed by medical spas to perform treatments that are prohibited by their license.

In response to Chair Mastroluca's inquiry about the proximity of a physician to the medical spa, Mr. Jimno stated that his preference would be that the physician be on-site, but the statute indicates they must be within reasonable proximity. He said one of his recommendations is that the Committee re-examine this provision.

- Mr. Jimno said he would like the Committee to pay attention to the fact that the Board has no jurisdiction over unlicensed activities. He stated the only way to prosecute someone for unlicensed activity is to take it to the district attorney's office where it

would have a very low priority. Mr. Jimno said his biggest concern is the inappropriate use of aestheticians by physicians, and suggested that a second tier of license be established that would close the gap between medical care and the Board's license. He noted he is not really in favor of it, but there has been a movement nationally about two-tier licensing, and it would close a significant gap with people working out of scope.

- Chair Mastroluca asked that Mr. Jimno share with Committee staff any information he has about other states that have gone to a two-tier license and Mr. Jimno responded that he would.

Discussion ensued between Assemblywoman Carlton and Mr. Jimno regarding the Board's ability to cite someone who is operating without a license and the establishment where that person is working.

- Lawrence P. Matheis, Executive Director, Nevada State Medical Association, expressed his appreciation for Ms. Del Papa's service on the Task Force on Unlicensed Healthcare, and to Attorney General Catherine Cortez Masto, and the Health Division for supporting the task force. He stated there are three areas to look at with regard to the illegal practice of medicine: (1) the licensing issue; (2) access to care; and (3) educate the public about where they can get medical care that is licensed and regulated.

In response to Assemblywoman Carlton's inquiry if Nevada's licensing laws should be examined to make it easier for well-qualified professionals from other countries and cultural backgrounds to obtain a license, Mr. Matheis stated that Nevada's statutes have been changed over the last several sessions of the Legislation to make it easier for long-time licensed professionals, with a clear background, to obtain a license.

- Chris Ferrari, Nevada Dental Association, stated that the Nevada Dental Association has approximately 800 dentist members. He noted that their members participate in programs in the communities such as "Give Kids a Smile." Mr. Ferrari referred to newspaper headlines contained in his handout regarding the illegal practice of dentistry. (Please see [Exhibit G](#).)

Mr. Ferrari stated that the Nevada Dental Association is proposing the addition of the American Dental Association's definition of "dentistry" to Nevada's statutes. He said the Nevada Dental Association has reached out to the lobbyists for the Board of Dental Examiners of Nevada and the Nevada Dental Hygienists Association and are discussing how best to accomplish the addition of the definition, but also wanted to present it to the Committee.

- Chair Mastroluca asked how adding the definition of dentistry would have an impact on unlicensed medical personnel.
- Robert Talley, Executive Director, Nevada Dental Association, responded that it would better define who can do dentistry for the patient, rather than there just be a laundry list of duties, which is currently in statute.

- Mr. Ferrari added that, although numerous states have the same provisions as Nevada, several states have also added a definition. He stated that it would be an additional layer of patient protection that the Board of Dental Examiners of Nevada could refer to when enforcing the illegal practice of dentistry.
- Assemblywoman Carlton expressed her concern about fixing something that is not broken and noted that “scope of practice” is what the professions are founded on. She cautioned that many other groups could be impacted by this change, and stated that a large group of people would have to review the proposal.
- Mr. Ferrari stated that there is a definition for dental hygiene and for dental hygienists, but not for dentistry.

Licensed Health Care Professionals Acting Outside of Their Scope of Practice

- Larry L. Pinson, Pharm.D., Executive Secretary, State Board of Pharmacy, stated that he was speaking for the following people, who were all present and would be available for questions: Carolyn J. Cramer, General Counsel, State Board of Pharmacy; Debra Scott, M.S.N., R.N., F.R.E., Executive Director, and Fred Olmstead, General Counsel, State Board of Nursing; Douglas C. Cooper, C.M.B.I., Executive Director, and Lyn E. Beggs, General Counsel, Board of Medical Examiners; Barbara Longo, Interim Executive Director/C.M.B.I., Chief of Enforcement, and Louis Ling, Board Counsel, State Board of Osteopathic Medicine; and Vincent Jimno, Executive Director, State Board of Cosmetology.

Mr. Pinson described a consumer complaint received by the State Board of Pharmacy which, after investigation, turned out to be a facility essentially being run by a registered nurse administering and dispensing dangerous drugs and controlled substances through a physician who lived and practiced in Michigan and had no dispensing license with the State Board of Pharmacy. Mr. Pinson stated this situation led to the question of who oversees medical spas and other related clinics, and, as a result, the related boards have been working together to look at these clinics, but they are struggling as to what the next step should be.

- Debra Scott, previously identified, stated that the State Board of Pharmacy, State Board of Nursing, Board of Medical Examiners, State Board of Osteopathic Medicine, and State Board of Cosmetology have been meeting jointly to share information and cooperatively investigate complaints of people and businesses that have been reported to be improperly selling and administering dangerous drugs. She reported that this cooperation has been helped by the passage of S.B. 37 in the 2011 Legislative Session.

Ms. Scott described the results of their inspections resulting from these complaints, and the risks to the health and safety of the consumers. She stated the boards are working within the current laws and believe they are making an impact, but help is needed. Ms. Scott stated that, based on their work to date, they believe the following suggestions should be considered by the Committee:

1. Evaluate the current statutes to determine if the unlicensed practice of a particular health profession should be elevated from a misdemeanor to a gross misdemeanor or a felony.
2. Each licensing board needs the authority to inspect the locations where their licensees practice.
3. The State should consider licensing requirements for medispas and related businesses that offer to administer or dispense drugs, or perform medical procedures.

Discussion ensued regarding the prevalence of medical spas, the lack of proper medical supervision, the hiring of “medical aestheticians” by the medical spas, and medical spas that are owned and operated by unlicensed individuals.

- Chair Mastroluca requested that the boards bring a preliminary proposal to the Committee by June 5, 2012, for the June 12 meeting of the Committee, and Ms. Scott responded that they would.
- Senator Wiener offered to make herself available to work with the group as they progress on suggestions to bring to the Committee.
- Denise Selleck Davis, Nevada Osteopathic Medical Association, stated that the Nevada Osteopathic Medical Association would like to be involved in these efforts, and noted that transparency is the most important thing that can be offered to patients.
- John A. Hunt, previously identified, described a similar situation the Board of Dental Examiners of Nevada had with teeth whitening kiosks in malls, for which they sought an injunction and an injunction was issued. Mr. Hunt noted that if a person is injured in the State of Nevada by a person licensed in another jurisdiction, the injured party will not have a remedy for malpractice. Mr. Hunt reiterated his previous recommendation that boards should have the responsibility to investigate complaints and report to the district attorney of the county in which the situation is occurring and the district attorney be given a short window of time to either prosecute or write a letter to the respective boards explaining why they are not being prosecuted.
- Chair Mastroluca called for public comment on the discussion regarding unlicensed health care in Nevada (Agenda Item V); however, no testimony was provided.

CREATION AND APPOINTMENT OF MEMBERS TO THE TASK FORCE TO DEVELOP A STATE PLAN TO ADDRESS ALZHEIMER’S DISEASE PURSUANT TO ASSEMBLY CONCURRENT RESOLUTION NO. 10 (FILE NO. 42, STATUTES OF NEVADA 2011)

- Ruth Gay, M.S., Director, Public Policy and Advocacy, Alzheimer’s Association, Northern California and Northern Nevada, introduced Albert Chavez, EdS, CFLE, Regional Director, Southern Nevada, Desert Southwest Chapter, Alzheimer’s Association.

Ms. Gay stated that, following the passage of Assembly Concurrent Resolution No. 10, staff from the Alzheimer's Associations of Northern and Southern Nevada, the DHHS, lobbyists, and volunteers worked to shape the makeup of a task force to develop a State plan to address Alzheimer's disease. At that time, it was hoped grant funding would be received to support the movement; however, they were unable to receive grant funding. She stated that they hope to be able to move forward with a recommendation to develop the State plan without funding, and she referred to examples of two states (Kentucky and Missouri) that have moved forward without funding, which she had provided to the Committee. (Please see [Exhibit H.](#)) Ms. Gay commented that Alabama, Arizona, Oregon, South Carolina, and Virginia are other states that have moved forward with a state plan process without funding.

Continuing, Ms. Gay stated that a task force should be the first step in developing a State plan to address Alzheimer's disease, and the Committee has received a list of recommendations for the makeup of the task force. (Please see [Exhibit I.](#))

- Ms. Lyons, previously identified, stated that the task force and any subcommittees it creates will be required to meet the requirements of the *Open Meeting Law*. Further, pursuant to NRS 218E.205, subsection 5, the task force must be chaired by a legislator for the LCB to provide staff support, and an analyst and a secretary would be provided through the Research Division of the LCB to support the work of the task force. The task force will be allotted no more than four or five meetings and the membership should consist of no more than seven persons. Ms. Lyons noted that in order for the recommendations for legislation of the task force to be considered by the Legislative Committee on Health Care, they must be presented no later than July. She noted the task force may also have recommendations that do not require legislation.
- Chair Mastroluca stated that the Committee recognizes the importance of this issue, and that she would be willing to reserve one bill draft for the task force, which would allow them to have until October to provide the language. She also indicated that the task force could work with an individual legislator who may want to bring forth the legislation.

Chair Mastroluca stated that the names submitted for the makeup of the task force are excellent. She noted that, due to Senator Breeden's current circumstances, she will not be available to chair the task force; however, Senator Wiener has agreed to take on that responsibility.

- The Committee **APPROVED THE FOLLOWING ACTION:**

SENATOR BREEDEN MOVED TO APPOINT THE MEMBERS TO THE TASK FORCE TO DEVELOP A STATE PLAN TO ADDRESS ALZHEIMER'S DISEASE, AS OUTLINED IN THE PROPOSAL SUBMITTED BY THE ALZHEIMER'S ASSOCIATION, NORTHERN CALIFORNIA AND NORTHERN NEVADA AND DESERT SOUTHWEST CHAPTERS, WITH SENATOR WIENER AS CHAIR. THE MOTION WAS SECONDED BY ASSEMBLYMAN HARDY AND PASSED UNANIMOUSLY.

- Senator Breeden thanked Ms. Gay for considering her to serve on the task force and stated that if her circumstances were different, she would be honored to participate. She noted she would still like to volunteer and participate in addressing Alzheimer’s disease in the future, when the timing is better.
- Chair Mastroluca called for public comment on the creation and appointment of members to the task force to develop a State plan to address Alzheimer’s disease (Agenda Item VII); however, no testimony was provided.
- Ms. Lyons announced that presenters who have addressed issues in previous meetings of the Committee will be contacted by her, asking that they present any recommendations they would like the Committee to consider as early as possible, in an effort for the Committee to have more time to deliberate and make any suggestions for change, prior to the Committee’s work session in August.

PUBLIC COMMENT

- Chair Mastroluca called for public comment; however, no testimony was presented.

ADJOURNMENT

There being no further business to come before the Committee, the meeting was adjourned at 1:26 p.m.

Respectfully submitted,

Anne Vorderbruggen
Senior Research Secretary

Marsheilah D. Lyons
Principal Research Analyst

APPROVED BY:

Assemblywoman April Mastroluca, Chair

Date: _____

LIST OF EXHIBITS

[Exhibit A](#) is the “Meeting Notice and Agenda,” provided by Marsheilah D. Lyons, Principal Research Analyst, Research Division, Legislative Counsel Bureau.

[Exhibit B](#) is a letter dated April 3, 2012, to Assemblywoman April Mastroluca from Jeff Rowes, Senior Attorney, Institute for Justice, Arlington, Virginia, regarding “April 10, 2012 Committee Meeting on Bledsoe Family’s Farm-to-Fork Initiative, Including Proposed Legislation.”

[Exhibit C](#) is a spreadsheet dated April 3, 2012, titled “Status of County Assessments,” and charts, provided by Michael J. Willden, Director, Department of Health and Human Services.

[Exhibit D](#) is a letter dated April 4, 2012, to Director of Business Services Laura Naumann, Renown Regional Medical Center/South Meadows from Ken Retterath, Adult Services Director, Department of Social Services, Washoe County, regarding “Non-payment to Washoe County Hospitals.”

[Exhibit E](#) is a document containing excerpts from the *Nevada Revised Statutes* pertaining to various licensing boards, provided by Debra Scott, M.S.N., R.N., F.R.E., Executive Director, State Board of Nursing.

[Exhibit F](#) is a document dated April 10, 2012, titled “Comments Submitted by Vincent D. Jimno, Executive Director, Nevada State Board of Cosmetology,” provided by Vincent D. Jimno, Executive Director, State Board of Cosmetology.

[Exhibit G](#) is a Microsoft PowerPoint handout titled “Presentation to the Legislative Committee on Health Care, April 10, 2012,” submitted by Chris Ferrari, Nevada Dental Association.

[Exhibit H](#) is a document containing information about state plans to address Alzheimer’s disease for Kentucky and Missouri provided by Ruth Gay, M.S., Director, Public Policy and Advocacy, Alzheimer’s Association, Northern California and Northern Nevada.

[Exhibit I](#) is a document titled “State Plan Task Force,” provided by Ruth Gay, M.S., Director, Public Policy and Advocacy, Alzheimer’s Association, Northern California and Northern Nevada.

This set of “Summary Minutes and Action Report” is supplied as an informational service. Exhibits in electronic format may not be complete. Copies of the complete exhibits, other materials distributed at the meeting, and the audio record are on file in the Research Library of the Legislative Counsel Bureau, Carson City, Nevada. You may contact the Library online at www.leg.state.nv.us/lcb/research/library/feedbackmail.cfm or telephone: 775/684-6827.