

NEVADA LEGISLATURE LEGISLATIVE COMMITTEE ON HEALTH CARE

(Nevada Revised Statutes [NRS] 439B.200)

SUMMARY MINUTES

The third meeting of the Legislative Committee on Health Care for the 2017–2018 Interim was held on Monday, March 19, 2018, at 9 a.m. in Room 4412, Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. The meeting was videoconferenced to Room 3137, Legislative Building, 401 South Carson Street, Carson City, Nevada.

The agenda, minutes, meeting materials, and video or audio recording of the meeting are available on the Committee's <u>meeting page</u>. In addition, copies of the audio or video record are available through the Legislative Counsel Bureau's Publications Office (e-mail: <u>publications@lcb.state.nv.us</u>; telephone: 775/684-6835) and may also be available at http://www.leg.state.nv.us/Granicus/.

COMMITTEE MEMBERS PRESENT IN LAS VEGAS:

Senator Patricia (Pat) Spearman, Chair Assemblyman Michael C. Sprinkle, Vice Chair Senator Joseph (Joe) P. Hardy, M.D. Assemblyman James Oscarson Assemblywoman Ellen B. Spiegel

COMMITTEE MEMBER ABSENT:

Senator Julia Ratti (Excused)

LEGISLATIVE COUNSEL BUREAU STAFF PRESENT:

Marsheilah D. Lyons, Chief Principal Policy Analyst, Research Division Eric Robbins, Principal Deputy Legislative Counsel, Legal Division Janet Coons, Manager of Secretarial Services, Research Division Jan Brase, Research Secretary, Research Division Items taken out of sequence during the meeting have been placed in agenda order.

AGENDA ITEM I—OPENING REMARKS

Chair Spearman welcomed Committee members, staff, and the public to the third meeting of the Legislative Committee on Health Care. She reviewed meeting protocol.

AGENDA ITEM II—PUBLIC COMMENT

Chair Spearman called for public comment.

Autumn Snyder, resident of Las Vegas, discussed her ten-year old son's battle with mental illness and the challenges and financial difficulties her family has endured trying to manage his health care. She suggested the system is broken and there needs to be a program in place for younger children because most outpatient services will not take a child under 12 years of age.

Vicki McVeigh, a community-based living arrangement (CBLA) provider, presented testimony regarding the oversight of CBLAs and unregulated residential facilities. She informed the Committee that she and other CBLA providers in the community are fully cooperating with and are under the guidance of the Northern Nevada Adult Mental Health Services. Ms. McVeigh submitted statistics regarding the budget estimate for a single home (Agenda Item II).

Devin Brooks, Owner, Brooks Behavioral Health Center and Brooks Family Clinic, LLC, North Las Vegas, Nevada, shared the challenges he faces as a small health care provider trying to become credentialed with the managed care organizations in the state. He explained Health Plan of Nevada (HPN) will not credential his business, which means he is not be able to help a large percentage of the underserved population in his community. Mr. Brooks testified that few, if any, minority-owned businesses in North Las Vegas participate with HPN. He suggested the state must better regulate the managed care organizations.

AGENDA ITEM III—APPROVAL OF MINUTES OF THE MEETING HELD ON FEBRUARY 20, 2018

MOTION: Senator Hardy moved to approve the minutes of the meeting held on February 20, 2018. The motion was seconded by Vice Chair Sprinkle and passed unanimously.

AGENDA ITEM IV—UPDATE CONCERNING THE IMPLEMENTATION OF PROVISIONS OF ASSEMBLY BILL 457 (CHAPTER 363, STATUTES OF NEVADA 2017) RELATED TO THE PERFORMANCE OF THE DUTIES OF THE BOARD OF PSYCHOLOGICAL EXAMINERS; BOARD OF EXAMINERS FOR MARRIAGE AND FAMILY THERAPISTS AND CLINICAL PROFESSIONAL COUNSELORS; BOARD OF EXAMINERS FOR SOCIAL WORKERS; AND BOARD OF EXAMINERS FOR ALCOHOL, DRUG AND GAMBLING COUNSELORS

Senator Hardy questioned how many people are credentialed and how long it takes for a veteran, the spouse of a veteran, or a licensee from another state to be credentialed in Nevada.

Michelle G. Paul, Ph.D., President, Board of Psychological Examiners, shared an update regarding the implementation of AB 457. She mentioned: (1) the establishment of a subcommittee charged with evaluating the equivalency of licensing requirements of other states; and (2) recommendations for the 2019 Legislative Session (Agenda Item IV A).

Discussion ensued among Committee members and Dr. Paul regarding:

- The Board's expedited licensure process for individuals from other states, including veterans and those who have board certification or a certificate of professional qualification;
- Whether applicants will have to take a state exam;
- Whether bringing more practitioners into Nevada is providing more access for patients;
- Nevada's psychological trainee and internship program;
- What can be done to reach out to psychologists who have left the state;
- Outreach to Nellis Air Force Base and the veterans program at the University of Nevada, Las Vegas (UNLV), to identify spouses that may qualify for licensure;
- Pediatric psychology help for families; and
- Difficulties of psychologists to be credentialed or empaneled by an insurance company or payer agency.

Dr. Paul offered to see whether any state models exist regarding how to empanel more people.

Jake Wiskerchen, President, Board of Examiners for Marriage and Family Therapists and Clinical Professional Counselors, submitted written testimony regarding the status of the Board (Agenda Item IV B). He cited the many challenges facing the Board due to the current vacancy of the executive director and the administrative neglect it has experienced for the past 25 years. Mr. Wiskerchen discussed various steps the Board has taken to improve its operations and performance. He anticipates the Board will fully comply with the provisions of AB 457 after it launches its new website, which will begin construction this week. Mr. Wiskerchen noted that reciprocity was passed in 2015, but it did not take effect until August 2016; he said he did not have the accurate data with him, including that of veterans.

Committee members and Mr. Wiskerchen discussed:

- The construction of the website and what it will provide;
- The possibility of partnering with another board to eliminate some of the challenges faced by the Board; and
- An apparent disconnect between funding and revenue structure and those who need services.

Mr. Wiskerchen stressed that continued funding for the regional behavioral health boards is imperative.

Sandy Lowery, L.C.S.W., L.A.D.C., Interim Executive Director, Board of Examiners for Social Workers, presented an update on the Board's implementation of AB 457 (<u>Agenda Item IV C</u>). She shared: (1) licensing statistics from 2015 through 2017; (2) reasons why the state loses approximately 10 percent of licensees each year; (3) the Board's success with granting licensure by endorsement; (4) budget and fiscal responsibilities; (5) vendor presentations for online renewals; (6) a request of fee increases for the 2019 Legislative Session; and (7) the Board's accomplishments for 2017.

Vice Chair Sprinkle and Ms. Lowery further discussed how communication between the Board and licensees has improved; a new Listserv allows for frequent and immediate communication with licensees. She stated the Board hopes to have a new vendor identified in April for online renewals and estimated full automation by the end of the year, after which time, the Board will be ready to look at initial applications online.

Additional discussion among Committee members and Ms. Lowery focused on the:

- Recruitment with rural clinics and agencies to support licensure and postgraduate clinical internship sites;
- Benefits of having social workers and clinical internships in the schools;
- Challenges of credentialing, in general, and what can be done to fix the process;
- Difficulties of the billing and reimbursement processes associated with Medicaid;
- Mental health response to the October 1, 2017, tragedy and long-term services provided to the survivors; and
- Access to available resources and funds.

Agata Gawronski, M.S.W., L.A.D.C., Executive Director, Board of Examiners for Alcohol, Drug and Gambling Counselors, shared a Board update regarding: (1) types of licenses; (2) monthly costs; (3) licensure by endorsement; (4) revised regulations needed to implement AB 425 (Chapter 144, *Statutes of Nevada 2017*); and (5) efforts to comply with the implementation of AB 457 (Agenda Item IV D).

AGENDA ITEM V—UPDATE CONCERNING REGIONAL BEHAVIORAL HEALTH POLICY BOARDS CREATED PURSUANT TO AB 366 (CHAPTER 479, *STATUTES OF NEVADA 2017*)

Jessica Flood, Behavioral Health Coordinator (BHC), Northern Regional Behavioral Health Policy Board (RBHPB); Joelle Gutman, BHC, Rural RBHPB; Sheila Leslie, BHC, Washoe RBHPB; and Ariana Saunders, BHC, Southern RBHPB, shared a presentation that

addressed the membership of the boards, the number of times they have met, and their current priorities (Agenda Item V).

Discussion ensued regarding:

- Workforce development and the lack of providers, especially in the rural counties;
- Service gaps caused by a lack of credentialed professionals;
- Solutions to transportation issues, mainly in the rural counties;
- An unappointed position to the Rural RBHPB for the member representing private or public insurers; and
- Loan forgiveness and increased reimbursement rates for insurance and Medicaid to grow the number of providers in rural counties.

David Fogerson, Deputy Chief, Operations Division, East Fork Fire Protection District, Douglas County, Nevada, and Chair, Northern RBHPB, stated the Board's priorities are workforce development, community-based programs, providing access in rural areas to keep people in their homes, and working with various health partners.

Brooke O'Byrne, Director of Court Services, Sixth Judicial District Court, Humboldt County, Nevada, and Chair, Rural RBHPB, reported the Board has met only once and has begun reviewing preliminary data.

Wade Clark, Sergeant, Reno Police Department, and Member, Washoe RBHPB and Mobile Outreach Safety Team (MOST), stated the Board has met twice and is exploring the education and data behind Legal 2000—Nevada's process of civil commitment—to determine how it wants to move forward to help the regions of Washoe County.

AGENDA ITEM VI—UPDATE REGARDING THE MOBILE OUTREACH SAFETY TEAMS AND THE INTERVENTION SERVICES PROVIDED TO PERSONS WITH MENTAL ILLNESS

Sheila Leslie, Behavioral Health Program Coordinator, Washoe County Human Services Agency, provided an update on MOST in Washoe County (<u>Agenda Item VI A</u>). She mentioned that MOST expanded to a team of six mental health professionals after the 2017 Legislature approved funding for coverage seven days a week. Ms. Leslie said 73 percent of MOST clients currently receive no mental health services.

Christy Butler, Supervisor, MOST, explained how following up with MOST clients is critical to building trust and encouraging clients to get the treatment they need.

Ms. Leslie added that many of the clients do not know what kind of managed care insurance they have; MOST will help them find the appropriate place for treatment.

Assemblywoman Spiegel asked whether Washoe County's MOST program is working with Clark County.

Julie Kotchevar, Ph.D., Administrator, Division of Public and Behavioral Health (DPBH), Department of Health and Human Services (DHHS), and Deputy Director, DHHS, explained the subgrant for the MOST program in Clark County is with Las Vegas Fire and Rescue (LVFR) for signature. She said the program will begin as soon as the subgrant is signed, and it expires in June 2019. Dr. Kotchevar stated the subgrant requires LVFR to respond to any 911 call classified as a mental health condition in Clark County; the subgrant does not limit location.

Discussion ensued among Committee members, Ms. Leslie, Dr. Kotchevar, and Wade Clark, previously identified, regarding:

- Whether MOST has engaged with victims of the October 1, 2017, tragedy in Las Vegas;
- Whether MOST uses the state's Victims of Crime Program as part of its follow-up services;
- Crisis intervention training (CIT) and having MOST experts in the field to support officers during a critical situation;
- The lack of formal protocol between Washoe County's MOST program and the Department of Corrections (DOC) if treatment is required when prisoners are released back into the community; and
- DHHS initiatives between the DOC and local county jails to determine eligibility for services prior to a prisoner's release.

Jessica Flood, previously identified, and Ken Furlong, Sheriff, Carson City, provided a joint presentation regarding MOST programs in northern Nevada (<u>Agenda Item VI B</u>).

Sheriff Furlong shared that as he sat in the audience waiting to speak, two suicides occurred in Carson City—one resulting from mental anguish and the other from physical anguish. He stressed this is a constant challenge faced by all. Sheriff Furlong reported that Carson City responds to approximately 2,000 calls for service a month; of those calls, an estimated 60 percent have some mental health crisis at their core.

The joint presentation highlighted the following:

- Collaboration between officers and clinicians is key to providing services;
- MOST programs adapt to community needs;
- Gaps in services;
- Lack of workforce; and

• Limitations in financial support and a lack of dedicated funding from the Nevada Legislature.

Ms. Flood emphasized the MOST programs in northern Nevada are run as pilot programs. She asked the Committee to consider finding strategies for sustainable funding of the programs.

Assemblyman Oscarson expressed his desire to have MOST programs in Lincoln and Nye Counties. He suggested presenting this program as a cost-saving measure.

Brian Burriss, Rural Clinics, DPBH, stated he has reached out to other rural counties, but their small law enforcement workforce makes it difficult to free up staff for CIT, which is critical to the MOST program. He mentioned that Lyon County is proposing to use telehealth as a creative, alternative approach.

Ms. Flood stressed that CIT is the bedrock of MOST and all jail diversion and crisis stabilization programs. She stated it costs rural counties \$3,000 per officer for 40 hours of CIT training, and it is difficult to find funding for such training.

Chair Spearman encouraged Ms. Flood to contact DHHS regarding the use of success contracts as provided in Senate Bill 400 (Chapter 498, *Statutes of Nevada 2017*).

Ms. Flood responded that contracting with private agencies would be a way to build community capacity, and she would be interested in pursuing such a strategy.

AGENDA ITEM VII—UPDATE REGARDING THE OVERSIGHT OF COMMUNITY-BASED LIVING ARRANGEMENTS AND UNREGULATED RESIDENTIAL FACILITIES

Julie Kotchevar, previously identified, provided an update on the oversight of CBLAs and unregulated residential facilities (Agenda Item VII). She reported the following: (1) 13 homes have been closed in southern Nevada and 5 in northern Nevada; (2) all displaced clients have been placed in licensed and regulated facilities; (3) vacant positions were transferred to the Bureau of Health Care Quality and Compliance (HCQC), DPBH, DHHS; (4) over 200 applications were received for health facility inspectors; and (5) new inspection forms have been created based on HCQC processes and standards.

Dr. Kotchevar discussed the next steps DHHS will take regarding the level of care assessment, culture change and training, and reconfiguration of housing and support contracts. She explained the different types of regulated and unregulated facilities and the challenges they present. Dr. Kotchevar identified the following options to improve the oversight of CBLAs and unregulated residential facilities:

- Monitor business licenses that may be operating unlicensed homes;
- Increase public education;
- Change NRS to broaden the definition of a referral agency; and

• Change NRS regarding hospital discharge processes to require referral or additional supports for vulnerable persons (<u>Agenda Item VII</u>).

Committee members and Dr. Kotchevar discussed the following:

- How unregulated facilities can be considered a business in the sense they are a landlord but cannot provide licensed facility services;
- The requirement of regulated facilities to post their licenses;
- Medicare and Medicaid do not pay for housing; and
- The possible recoupment of funds from those facilities that provided substandard housing.

AGENDA ITEM VIII—OVERVIEW OF THE STATUS OF CHILDREN'S HEALTH IN NEVADA

Amanda Haboush-Deloye, Ph.D., Associate Director, Nevada Institute for Children's Research and Policy, School of Community Health Sciences, UNLV, shared statistics and trends in children's health (<u>Agenda Item VIII A</u>). She stated children's health should be viewed in a broad context, including physical and social well-being and mental and behavioral health, and it should be addressed in partnership with other systems, such as education, workforce development, and economic stability, as they all relate to the health of our children and communities.

Discussion took place regarding the following:

- Peanut allergies were not included in the statistics;
- Behaviors that contribute to obesity rates;
- Strategies for combating obesity in children; and
- Steps taken and programs offered for suicide prevention.

Jared Busker, Manager of Government Affairs, Childrens Advocacy Alliance, provided a presentation identifying: (1) the results of its 2016 Nevada Children's Report Card, of which the state received an overall grade of D; (2) the goals and recommendations of the Nevada Early Childhood Obesity Workgroup and state plan; (3) a summary of legislation passed during the 2017 Session related to children's health; and (4) priorities for the 2019 Session (Agenda Item VIII B).

He noted the Alliance works closely with the Nevada Institute for Children's Research and Policy to produce the *Children's Legislative Briefing Book*, which is a detailed report of suggested policies to improve the outcomes of children and families. Mr. Busker said the 2019 edition will be released in October, and a copy will be sent to all legislators. He reported

the state does not mandate insurance companies to pay for or reimburse families for hearing aids for children

Assemblywoman Spiegel and Mr. Busker discussed the low grades Nevada received in the children's report card and whether there are best practices of states receiving a grade of A that Nevada could adopt or model. He stated the upcoming report from the Nevada Early Childhood Obesity Workgroup provides recommendations, which will be provided to the Committee in the coming weeks, and the Alliance's priorities for the upcoming session contain additional recommendations to improve children's health and well-being.

AGENDA ITEM IX—UPDATE REGARDING NEVADA CHECK UP CHILDREN'S HEALTH INSURANCE PROGRAM

(This agenda item was taken out of order.)

Cody L. Phinney, M.P.H., Deputy Administrator, Compliance, Division of Health Care Financing and Policy (DHCFP), DHHS, provided an update on Nevada Check Up, which is the children's health insurance program for the state (<u>Agenda Item IX</u>). She reported that in January, the President signed the budget, which provided a ten-year reauthorization of the program. Ms. Phinney noted that the Federal Medical Assistance Percentage (FMAP), which is enhanced by 23 percent, will decrease in the next three years to a more typical Medicaid FMAP, and DHCFP will prepare for this adjustment in its next budget.

AGENDA ITEM X—IMPLICATION OF FEDERAL CHANGES TO THE AFFORDABLE CARE ACT ON HOSPITALS AND OTHER HEALTH CARE FACILITIES IN NEVADA

Bill Welch, President and Chief Executive Officer (CEO), Nevada Hospital Association, shared a presentation regarding how the Affordable Care Act (ACA) has affected Nevada's hospitals and other health care facilities. He pointed out the data from 2013 reflects pre-ACA and the data from 2016 reflects post-ACA. Mr. Welch noted that with the repeal of the mandate, which takes effect on January 1, 2019, nearly 112,000 Nevadans are expected to lose coverage by 2025. He said if the entire ACA is repealed, it will be challenging to meet the needs of chronic conditions that have been identified under the ACA (Agenda Item X A).

Committee members and Mr. Welch discussed the following implications of federal changes to the ACA:

- Minimal ability of hospitals to recoup reimbursement for uncompensated care for the uninsured versus those with Medicaid:
- A significant increase of the uninsured population;
- Impact of health care delivery to the rural areas, which would affect approximately 8,000 lives if there is no alternative health plan;

- Impact to hospital operations;
- Challenges with Medicaid and the fee structure of ambulatory outpatient providers; and
- The need for more primary care doctors and better contracting rates.

Responding to questions from Committee members, Mr. Welch offered to provide: (1) how many of the 112,000 expected to lose coverage by 2025 are children; and (2) the amount of money the federal government received in penalties.

Denise Selleck, Executive Director and CEO, Nevada Health Care Association (NHCA), shared written comments (Agenda Item X B) regarding skilled nursing facilities (SNFs) in Nevada. She discussed: (1) the number of SNFs in Nevada; (2) the number of patients served; (3) the types of patients who use them; and (4) the cost of SNFs.

Ms. Selleck concluded her testimony by stating the ACA was designed to address issues in primary care, and while it did affect some sectors of health care and did expand Medicaid coverage in Nevada, it did not directly affect patients in long-term care nor was it designed to do so. She added that long-term care is often overlooked in legislative discussions about fixing health care in the United States.

AGENDA ITEM XI—PUBLIC COMMENT

Laura Hale, Director, Accountable Health Communities Program, Nevada Primary Care Association, shared a flyer recruiting hospitals and primary care and behavioral health clinics to participate in a national model test for social determinants of health (Agenda item XI).

Sara Hunt, Ph.D., Director, UNLV Mental and Behavioral Health Coalition, Assistant Dean of Behavioral Health Sciences, School of Medicine, UNLV, testified the coalition is a multidisciplinary faculty workgroup that focuses on helping Nevada's workforce development in mental health. She shared the following information:

- A survey of graduating students in social work, psychology, marriage and family therapy, and mental health counseling indicates 60 percent of the respondents probably or definitely plan to stay in Nevada;
- Nevada ranked 51st in the prevalence of behavioral and mental health issues compared to the access of care;
- A main reason providers do not come to Nevada is the difficulty becoming empaneled with insurance companies;
- The coalition is considering increasing its training in integrated models of health care and other states' models of workforce development; and

• UNLV is still providing free services to patients requesting follow-up treatment after the October 1 tragedy.

Amanda Haboush-Deloye, Ph.D., previously identified, said that Nevada has made great improvements in children's health care, but the positive results are not always be reflected in a letter grade. She noted the state's diverse population means more inequity; therefore, Nevada needs to make changes in its communities to provide daily support for families and pull together as a state by making hard choices and sacrifices.

AGENDA ITEM XII—ADJOURNMENT

There being no further business to come before the Committee, the meeting was adjourned at $2:41~\mathrm{p.m.}$

	Respectfully submitted,	
	Janet Coons Manager of Secretarial Services	
	Marsheilah D. Lyons Chief Principal Policy Analyst	
APPROVED BY:		
Senator Patricia (Pat) Spearman, Chair		
Date:		

MEETING MATERIALS

AGENDA ITEM	WITNESS/ENTITY	DESCRIPTION
Agenda Item II	Vicki McVeigh, community-based	Budget estimate for a single
	living arrangement (CBLA) provider	family home
Agenda Item IV A	Michelle G. Paul, Ph.D., President,	Update regarding Assembly Bill
	Board of Psychological Examiners	457 (Chapter 363, Statutes of
		Nevada 2017)
Agenda Item IV B	Jake Wiskerchen, President, Board of	Written comments regarding the
	Examiners for Marriage and Family	Board
	Therapists and Clinical Professional	
	Counselors	
Agenda Item IV C	Sandy Lowery, L.C.S.W., L.A.D.C.,	Update regarding AB 457
	Interim Executive Director, Board of	
	Examiners for Social Workers	
Agenda Item IV D	Agata Gawronski, M.S.W., L.A.D.C.,	Update regarding AB 457
	Executive Director, Board of	
	Examiners for Alcohol, Drug and	
	Gambling Counselors	
Agenda Item V	Jessica Flood, Behavioral Health	Presentation on RBHPBs
	Coordinator (BHC), Northern	
	Regional Behavioral Health Policy	
	Board (RBHPB); Joelle Gutman,	
	BHC, Rural RBHPB; Sheila Leslie,	
	BHC, Washoe RBHPB; and Ariana	
4 1 T TT TT 4	Saunders, BHC, Southern RBHPB	
Agenda Item VI A	Sheila Leslie, Behavioral Health	Presentation on
	Program Coordinator, Washoe County	Washoe County's Mobile
A 1 T/ T/I D	Human Services Agency	Outreach Safety Team (MOST)
Agenda Item VI B	Jessica Flood, Behavioral Health	Presentation on northern
	Coordinator, Northern Regional	Nevada MOST programs
	Behavioral Health Policy Board, and	
A con do Itam VIII	Ken Furlong, Sheriff, Carson City	Dragantation on CDL As and
Agenda Item VII	Julie Kotchevar, Ph.D., Administrator, Division of Public and Behavioral	Presentation on CBLAs and
	Health, Department of Health and	unregulated residential facilities
	Human Services (DHHS), and Deputy	
	Director, DHHS	
Agenda Item VIII A	Amanda Haboush-Deloye, Ph.D.,	Statistics and trends in
rigenda item viii it	Associate Director, Nevada Institute	children's health in Nevada
	for Children's Research and Policy,	children 5 nearth in 100 and
	School of Community Health	
	Sciences, University of Nevada,	
	Las Vegas	
Agenda Item VIII B	Jared Busker, Manager of Government	Presentation on children's
<u></u>		health in Nevada
	Affairs, Childrens Advocacy Alliance	health in Nevada

Agenda Item IX	Cody L. Phinney, M.P.H., Deputy	Presentation on Nevada
	Administrator, Compliance, Division	Check Up
	of Health Care Financing and Policy,	-
	DHHS,	
Agenda Item X A	Bill Welch, President and Chief	Presentation on implications of
	Executive Officer, Nevada Hospital	changes of the Affordable Care
	Association	Act on Nevada hospitals
Agenda Item X B	Denise Selleck, Executive Director	Written comments regarding
	and CEO, Nevada Health Care	skilled nursing facilities
	Association	
Agenda Item XI	Laura Hale, Director, Accountable	Flyer to participate in a model
	Health Communities Program, Nevada	test for social determinants of
	Primary Care Association	health

The Summary Minutes are supplied as an informational service. Copies of all meeting materials are on file in the Research Library of the Legislative Counsel Bureau, Carson City, Nevada. You may contact the Library at www.leg.state.nv.us/lcb/research/library/feedbackmail.cfm or (775) 684-6827.