



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

SUMMARY MINUTES AND ACTION REPORT

The seventh meeting of the Nevada Legislature's Legislative Committee on Health Care (LCHC) was held on Wednesday, May 26, 2010, at 9 a.m. in Room 4401 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/75th2009/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:

Senator Valerie Wiener, Chair
Assemblywoman Peggy Pierce, Vice Chair
Senator Allison Copening
Assemblyman Joseph (Joe) P. Hardy, M.D.
Assemblywoman Ellen B. Spiegel

COMMITTEE MEMBER PRESENT IN CARSON CITY:

Senator Maurice E. Washington

LEGISLATIVE COUNSEL BUREAU STAFF PRESENT:

Marsheilah D. Lyons, Principal Research Analyst, Research Division
Sara L. Partida, Principal Deputy Legislative Counsel, Legal Division
Sally Trotter, Senior Research Secretary, Research Division

OPENING REMARKS

- Senator Valerie Wiener, Chair, welcomed members, presenters, and the public to the seventh meeting of the Legislative Committee on Health Care (LCHC). Chair Wiener noted the procedures for Committee business and testimony.

APPROVAL OF MINUTES OF THE MEETINGS HELD ON FEBRUARY 17, 2010, AND MARCH 17, 2010, IN LAS VEGAS, NEVADA

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

ASSEMBLYWOMAN SPIEGEL MOVED TO APPROVE THE “SUMMARY MINUTES AND ACTION REPORT” OF THE FEBRUARY 17, 2010, AND MARCH 17, 2010, MEETINGS HELD IN LAS VEGAS. THE MOTION WAS SECONDED BY SENATOR COPENING AND PASSED UNANIMOUSLY.

PRESENTATION REGARDING VITAL STATISTICS REPORTING

- Keith R. Brill, M.D., provided a background on the standardized Model State Vital Statistics Act. He stated that the Act will improve the reporting and recording of information to provide strategies that will aid in reducing infant and maternal mortality and morbidity, and public health.

In response to Chair Wiener’s query, Dr. Brill stated that the Act is a model that has been implemented in a few other states. He commented that Nevada is in compliance with most of the Act and noted his aspiration for all provisions of the Act to be adopted into *Nevada Revised Statutes* (NRS).

Discussion ensued between Assemblyman Hardy and Dr. Brill regarding the adoption of international standards so that statistics can be gathered from other nations. Dr. Hardy asked what fiscal impact the adoption of the Act may have.

Responding to Assemblywoman Spiegel’s inquiry, Dr. Brill said currently the information is not collected in Nevada because the Act’s definitions are not included in NRS.

- Senator Copening requested that a copy of the language in the model Act be provided to the LCHC.
- Luana J. Ritch, Ph.D., Bureau Chief, Bureau of Health Statistics, Planning, and Emergency Response, Health Division, Department of Health and Human Services (DHHS), gave an overview of the process of updating the registry system used by the Bureau of Vital Statistics, Health Division, DHHS, to an electronic system. She commented that Nevada is using the most current national model certificates and worksheets for the collection of birth, fetal death, and death certificate data. Dr. Ritch reported that a work group will propose reforms to Chapter 440 (“Vital Statistics”) of

NRS in an effort to align the statutes with the current Model State Vital Statistics Act and to remove outdated language.

In response to Senator Wiener, Dr. Ritch stated that the Health Division will request an agency bill draft request regarding adoption of the Model State Vital Statistics Act into the NRS.

- The Committee approved sending a letter to endorse the efforts of the work group to update the NRS to align with the Model State Vital Statistics Act.

PRESENTATION OF RECOMMENDATIONS CONCERNING THE PROVISION OF PUBLIC HEALTH PURSUANT TO SENATE BILL 278 (CHAPTER 267, *STATUTES OF NEVADA 2009*)

The Feasibility of Establishing Health Districts in Counties with Populations Less Than 100,000

- Mary C. Walker, C.P.A., President, Walker & Associates, provided a letter and attachment outlining the S.B. 278 study team's recommendations ([Exhibit B](#)). She noted concerns with a lack of State funding and hardships that any local government tax increases would create. Ms. Walker stated that the study team requests the LCHC not proceed with any legislation until a future time when the State's budget and the economy are more stable.

In response to Vice Chair Pierce's query regarding funding, Ms. Walker responded that in other states the federal and state combined funding is approximately 40 percent to 60 percent, with local government resources of 25 percent. She stated that due to the current economy it is unknown how much funding would be available in Nevada.

- Mary E. Wherry, R.N., M.S., Community Health Nursing Manager, Health Division, DHHS, stated that there are 25 funding streams, federal grants, and collection of fees that provide revenue. She commented it is unknown how much funding from the State General Fund would be available to maintain a viable frontier health system. Ms. Wherry discussed different funding models in other states. She commented the Utah model addresses population base, poverty level, geographic land mass, and a weighted factor and it would be a viable model for Nevada to consider in future discussions of the establishment of rural health districts.

Responding to Chair Wiener, Ms. Wherry stated that other counties would be invited in future discussions on this issue once funding streams are stable and the State would act as a consultant to rural counties.

PRESENTATION OF RECOMMENDATIONS FROM THE ADVISORY COUNCIL ON THE STATE PROGRAM FOR FITNESS AND WELLNESS CONCERNING ISSUES RELATED TO THE HEIGHT AND WEIGHT OF CHILDREN PURSUANT TO ASSEMBLY BILL 191 (CHAPTER 285, *STATUTES OF NEVADA 2009*)

- Kandi Qualls, Ph.D., C.H.E.S., Wellness and Tobacco Program Manager, Health Division, DHHS, outlined data received from 14 Nevada counties regarding obesity rates for school-aged children. She noted that Nevada's obesity rate of 17 percent is slightly lower than the national average at 20 percent.
- Tracey D. Green, M.D., State Health Officer, Health Division, DHHS, outlined a 2005 School Wellness Policy that was established to assist school districts and private schools in developing nutritional and physical activity plans. Dr. Green stated the goal was for each school to develop and implement its own wellness program and noted that to date only 40 percent of the schools have provided a plan to the Department of Education. She provided the following recommendations: (1) implement a Statewide School Wellness Rating System; (2) develop educational modules on nutrition and physical activity for day care providers, school teachers, health care providers, and parents; (3) utilize the Quality Rating Improvement System to provide nutritional education to day care facilities; and (4) update the 2006 State Obesity Plan to create a new five-year statewide obesity program. (See [Exhibit C](#), [Exhibit C-1](#), [Exhibit C-2](#), [Exhibit C-3](#), [Exhibit C-4](#), and [Exhibit C-5](#).)

Responding to a question from Chair Wiener, Dr. Green stated that the Health Division is willing to support her recommendations with money from the Centers for Disease Control and Prevention (CDC), the Preventive Health and Health Services Block Grant, and other chronic disease funds.

- Assemblyman Hardy recognized Nevada's 2006 healthy eating and physical activity ranking of number two in the nation.
- Nicole Rourke, Director of Intergovernmental Relations, Government Affairs, Community and Government Relations, Clark County School District (CCSD), commented she was unsure how long it would take to implement a rating system due to the reduction of staff in the CCSD. She asked for the LCHC's consideration of the impact it would have on the schools to provide the information.
- Chair Wiener commented on the importance of the rating system and the positive effect it will have on children's health.
- Dr. Green stated a team would be created to assist the schools in information gathering and to develop a report to identify strengths and weaknesses. She advised that it would require minimal time by school personnel.

Discussion ensued regarding funding sources. Dr. Green noted support from fitness and wellness funds and grant money. She stated that no money would come from the State General Fund.

In response to Assemblywoman Spiegel's inquiry regarding virtual education students, Dr. Green explained that there is online access to the nutritional and physical education modules and she discussed the possibility of incorporating physical activities into virtual education programs.

- Senator Copening asked to have a report on the implementation and effect of each recommendation including the fiscal impact to stakeholders.
- Assemblywoman Spiegel requested that the report include the fiscal impact on Nevada's school districts.

PRESENTATION REGARDING THE SCHOOL-BASED IMMUNIZATIONS PILOT PROJECT

- Tracey D. Green, M.D., previously identified, presented an overview of the school-based immunization pilot project ([Exhibit D](#)). She noted examples of other states' successful school-based vaccination programs. Dr. Green detailed the goals of the pilot program that includes: (1) testing the efficiency of delivering immunizations to students at schools during the enrollment time (not during "seat time"); (2) preparing a team of school nurses for mass distribution of immunizations; (3) enhancing school nursing programs; (4) improving insurance companies' immunization coverage for adolescents; and (5) creating access for all children. She commented that the federal health care reform law provides for coverage of immunizations under the wellness benefit. Dr. Green also discussed: (1) the process for fee donations and consent forms; (2) vaccination purchase and storage; and (3) the billing and collection process for school-based immunizations.

In response to Assemblyman Hardy's concerns, Dr. Green stated that all children will be eligible to receive vaccinations. She commented that funding is available for appropriate refrigerators to store vaccines. Dr. Green noted the goal of school-based immunizations is to provide an alternate source to increase the number of children that are immunized.

Responding to Chair Wiener's request for clarification of the permission slip process for students, Dr. Green explained the form is the same as that used by medical offices.

In response to Vice Chair Pierce, Dr. Green stated that schools in five states provide influenza and hepatitis immunizations and two states have enacted laws addressing that provision.

Discussion ensued regarding parental notification, school selection for the pilot program, income-based qualifications for students, and reimbursement for costs incurred by schools.

Dr. Green stated that the immunization program is optional and all students are eligible. She explained that there would be no costs to the schools for the program and parental donations are used to cover administrative costs.

- Assemblyman Hardy stated and Dr. Green affirmed that autism is not caused by vaccines.
- Jack Kim, Nevada Association of Health Plans (NAHP), has the following concerns regarding the: (1) billing forms; (2) coverage by self-funded insurance organizations; (3) credentialing for nurses; (4) billing costs to insurance companies; and (5) prevention of duplicate immunizations. Mr. Kim noted the importance of addressing these issues to achieve a sustainable program.
- Chair Wiener opined that difficulties could be “ironed out” through the pilot program.

Discussion ensued regarding the locations for the pilot program. Assemblyman Hardy suggested that a pilot program be conducted in an urban setting.

- Dr. Green clarified that insurance companies would not be required to handle billing for the immunizations and that the standardized uniform billing form would be used.

DISCUSSION REGARDING REVISING THE DEFINITION OF ASSISTED LIVING FACILITIES IN NEVADA

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

- RoseMary Womack, Board Member, Coalition of Assisted Residential Environments, provided a chart with an overview of areas of care for independent living, assisted living, and skilled nursing. Her written testimony includes a proposed amendment to NRS, which defines “assisted living.” (See [Exhibit E](#), [Exhibit E-1](#), and [Exhibit E-2](#).)
- LynnAnn Homnick, R.F.A., Executive Director/Administrator, Silver Sky Assisted Living, provided a proposed revision to the current definition of “assisted living” in NRS 449.037 ([Exhibit F](#)). She stated that a proper definition of an “assisted living” facility including the services it provides should be defined in State law. She opined the current definition in NRS 449.037 deters facilities from applying for the assisted living endorsement.
- Ms. Womack stated that a definition of assisted living and an endorsement for specialty services should be included in the NRS.

Discussion ensued regarding the levels of care and clarification of an endorsement for assisted living licensure.

In response to Assemblyman Hardy, Marla McDade Williams, Deputy Administrator, Health Division, DHHS, stated that an endorsement would be revenue neutral because the same inspection process is used for each facility.

- Chair Wiener asked Ms. Williams for clarification of the State's role regarding statutory definition, levels of care, and endorsements for assisted living facilities.
- Ms. Williams discussed classification, levels of care, endorsements, and exclusions to the endorsements. She stated that the Health Division recognizes the problems with the current system.
- Chair Wiener commented on protecting the consumer and the importance of notifying residents regarding what services facilities can provide.
- Ms. Williams suggested to repealing the current regulation and adding new regulations that provide for a separate license for assisted living.

In response to a question from Chair Wiener, Ms. Williams said any licensing requirement change would have a neutral fiscal impact.

Responding to Assemblywoman Spiegel's inquiry regarding if a facility can have mixed levels of care, Ms. Womack stated that independent residents can be combined with assisted living residents. She said the facility would need to hold a separate license for assisted living care.

- Ms. Williams said that most residents in independent living facilities are not aware if their facility is licensed for varying levels of care. She added that independent living facilities do not have to be licensed as long since they are not responsible for any level of care. Ms. Williams opined that there should be multiple levels of care within a facility so residents do not have to move from one facility to another.

Discussion ensued regarding facilities that use "assisted living" in their titles but do not carry the endorsement to be licensed as an assisted living facility. Ms. Williams stated that these homes are licensed and regulated as residential facilities for groups. She noted that the Assisted Living Advisory Council is assisting to resolve this issue.

- Assemblyman Hardy asked how many group homes are licensed in Nevada and about training requirements for caretakers in residential facilities.
- Ms. Williams stated that the regulations are designed to ensure that caretakers in a residential facility for groups have a minimum level of training. She said in Nevada there are approximately 260 residential facilities for groups and 300 licensed homes for individual residential care that all provide assistance with activities for daily living. Ms. Williams noted that the distinction for a licensed assisted living facility is that it retains residents with medical needs. Ms. Williams commented that not every facility

is willing to keep residents with medical needs due to a different level of staffing to supply the care required for those residents.

- Chair Wiener commented on potential displacement of residents that has to be considered if the standards are raised.
- Barry Gold, Director of Government Relations, AARP Nevada, discussed concerns with residential facilities for groups that use the term “assisted living.” He said the definition of assisted living is provided to protect consumers and State law provides that residents are given a full written disclosure of what services are provided and their costs. Mr. Gold suggested amending the State law to differentiate between an assisted living facility and a group home for residential care.

Discussion ensued regarding licensing and changes to current regulations. Mr. Gold stated it is important to not replace qualifications that would exclude any other facilities.

In response to Vice Chair Pierce’s inquiry regarding penalties for facilities that advertise as assisted living facilities without the proper endorsement, Ms. Williams stated that due to an ambiguous definition the Health Division does not sanction any licensed facilities that are in compliance with current regulation.

- Chair Wiener reported that according to the Office of the Secretary of State, 109 businesses in Nevada use “assisted living” in their title.

Discussion ensued regarding the need for an enhancement of the definition of “assisted living” in State law without taking away from any existing language.

In response to a request for clarification by Marsheilah Lyons, Principal Research Analyst, Research Division, Legislative Counsel Bureau (LCB) request for clarification, Ms. Womack recommended that State law include a clear definition of the requirements that identify an assisted living facility and “assisted living” license.

Discussion ensued regarding recommendations to enrich the assisted living facility endorsement and change language so more facilities would apply for the endorsement. Ms. Womack commented that an assisted living facility has to be able to discharge patients who need skilled nursing care.

- Chair Wiener summarized the recommendation and asked Legal Counsel to prepare language for the Committee’s consideration.
- Assemblywoman Spiegel voiced her concerns with “hybrid” facilities that may fall into more than one category.

DISCUSSION REGARDING THE REGULATION OF MEDICAL ASSISTANTS IN NEVADA

- Marsheilah D. Lyons, previously identified, provided a summary of options for the regulation of medical assistants in Nevada that included responses received from a questionnaire sent to stakeholders ([Exhibit G](#)).
- Dianna Hegeduis, Executive Director-Board Counsel, State Board of Osteopathic Medicine, provided recommendations concerning the regulation of medical assistants ([Exhibit H](#)). She commented on the importance of proper training of medical assistants. Ms. Hegeduis pointed out the recommendation to revise NRS 454.213 to include medical assistants as authorized to administer injections under the direction and supervision of a licensed physician after completing appropriate training.

A discussion ensued following Assemblywoman Spiegel's inquiry regarding safeguards to notify physicians of any medical assistants who have had sanctions against them.

In response to Chair Wiener's query regarding supervision of a medical assistant in a group practice, Ms. Hegeduis suggested adding a designation of responsibility in State law.

- Assemblyman Hardy commented on the hiring of medical assistants, the differing experience required by individual physicians, and the responsibility of physicians to advise medical assistants of their procedural preferences.
- Vice Chair Pierce commented on the importance of certification requirements for medical assistants. She suggested adding "complete an approved training program" to NAC 630.230. (See [Exhibit G](#).)
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- Ms. Lyons stated that currently the Nevada System of Higher Education does not provide a training program for medical assistants.

VICE CHAIR PIERCE MOVED TO INTRODUCE A BILL DRAFT REQUEST TO ADD THE DEFINITION OF MEDICAL ASSISTANT TO *NEVADA ADMINISTRATIVE CODE* 630.230 AS NOTED IN [EXHIBIT G](#), "DEFINE MEDICAL ASSISTANTS," AND ADD "COMPLETE AN APPROVED TRAINING PROGRAM." THE MOTION WAS SECONDED BY ASSEMBLYWOMAN SPIEGEL.

Discussion ensued regarding clarification of supervision, certification, and training issues.

- Senator Copening suggested adding "must complete an approved training program verifiable by a certificate issued by a training institution or by a supervising physician indicating satisfactory completion of the required training." She reported that two private schools in southern Nevada train and graduate medical assistants.

- Assemblywoman Spiegel commented that the training of a medical assistant could vary by physician practice. She suggested requiring an approved training program relative to the tasks the medical assistant would be required to perform.
- Chair Wiener commented on the documenting of education received by medical assistants.
- Vice Chair Pierce stated that medical assistants should have a certification and training by a supervising physician. She opined that medical assistants should not administer injections or dangerous drugs.

Responding to a request by Vice Chair Pierce, Tracey D. Green, M.D., previously identified, commented that medical assistants can be trained to give immunization injections. Dr. Green stated that some practices such as providing Botox injections should require a more extensive certification.

- Chair Wiener suggested defining the category of drugs a medical assistant could inject.
- Dr. Green advised that the level of training should differ according to the core responsibilities of the medical assistant with the supervising physician held responsible for providing proper training.

Further discussion ensued regarding injections of dangerous drugs. Assemblyman Hardy commented on issues regarding requirements to train before employment.

- Ms. Lyons said that most states with mandatory training provisions for medical assistants require that such instruction be approved by a national organization (e.g. the American Association of Medical Assistants).

Discussion continued regarding the training of medical assistants according to the physicians' requirements and how physicians would provide proof of training.

- Robin Keith, President, Nevada Rural Hospital Partners, commented on the employment relationship for medical assistants in rural settings. She stated that rural hospitals are staffed with medical assistants who are employed by the hospital not a physician and asked that it be taken into consideration.
- Vice Chair Pierce withdrew the motion.

In response to Assemblywoman Spiegel's inquiry, Ms. Lyons stated that some states provide medical assistant training through the American Association of Medical Assistants. Senator Copenig asked Ms. Lyons for information on schools that train medical assistants in southern Nevada.

Discussion ensued regarding: (1) provisions for a grandfather clause for current medical assistants; (2) definitions of types of care and duties for medical assistants; and (3) statutory language to differentiate between administrative duties and medical assistance in a physician's office.

- Sara L. Partida, Principal Deputy Legislative Counsel, Legal Division, LCB, suggested determining which medical professionals and what category of physicians could supervise medical assistants.
- Douglas C. Cooper, C.M.B.I., Executive Director, Board of Medical Examiners, submitted information regarding recommendations for the certification of medical assistants for the record ([Exhibit I](#)).

PRESENTATION REGARDING CERTAIN CHILDHOOD OBESITY PREVENTION PROGRAMS IN NEVADA

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

- William N. Evans, M.D., F.A.C.C., F.M.A.P. and Gary A. Mayman, M.D., F.A.C.C., Children's Heart Center Nevada, provided a Microsoft PowerPoint presentation outlining the Healthy Hearts Program, which provides treatment to obese children. Dr. Evans commented that children are treated regardless of insurance status. The presentation summarized: (1) the team approach to treatment; (2) counseling and evaluation services; (3) dietary and physical guidelines; (4) educational and community outreach; (5) statistics and history; and (6) prevention efforts. (See [Exhibit J](#).)

Discussion ensued regarding ideas for funding for the Healthy Hearts Program. Tracey D. Green, M.D., previously identified, commented that funding through State fitness and wellness grants may be available.

- Nicole Bungum, Supervisor, Office of Chronic Disease Prevention and Health Promotion, Southern Nevada Health District, provided a Microsoft PowerPoint presentation ([Exhibit K](#)) that outlines: (1) BMI statistics; (2) the health and fiscal consequences of obesity; (3) strategies to reduce obesity; (4) efforts to build on existing programs and partnerships to address obesity; and (5) local efforts to educate children about the importance of healthy eating and physical education.

PRESENTATION OF RECOMMENDATIONS RESULTING FROM THE STUDY OF THE ABUSE OF PRESCRIPTION NARCOTIC DRUGS AND THE MANNER OF MONITORING AND ADDRESSING THE ABUSE OF PRESCRIPTION NARCOTIC DRUGS IN NEVADA PURSUANT TO ASSEMBLY BILL 326 (CHAPTER 301, *STATUTES OF NEVADA 2009*)

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

- Carolyn Cramer, General Counsel, State Board of Pharmacy, submitted the final report and proposed recommendations ([Exhibit L](#)) of the work group responsible for addressing the abuse of prescription narcotic drugs in Nevada. The work group recommends that NRS be amended to (1) provide for a written acknowledgment signed by a patient receiving a prescription for a controlled substance that a patient utilization report will be obtained; and (2) allow for the Controlled Substance Abuse Prevention Task Force to share information with other prescription monitoring programs. She discussed an immunity provision for law enforcement or other entities that would have lawful use of the information and a “safe harbor” for pharmacists and other persons who use the Task Force’s information.

Discussion ensued regarding the “safe harbor” provision. Dr. Hardy asked about law enforcement access to the Task Force’s information and if the immunity language will provide for protection against access by unauthorized persons.

- Dianna Hegeduis, previously identified, opined the immunity language is too broad.
- Elizabeth MacMenamin, Vice President, Retail Association of Nevada (RAN), Retail Chain Drug Council, provided a background on RAN and its interest in the prescription drug monitoring program. She commented that many states that use a prescription drug monitoring program provide immunity to persons who have access to that information. Ms. MacMenamin provided a copy of legislation from Minnesota that addresses the issue of liability ([Exhibit M](#)).
- Mark E. Amodei, Legal Counsel, RAN, discussed the potential consequences of using a third party administrator for a prescription drug monitoring program. He provided information regarding privacy requirements of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and information received from other states. Senator Amodei commented on the legal ramifications of providing information to a database and the importance of immunity. (Please see [Exhibit N](#) and [Exhibit N-1](#).)

Discussion ensued regarding situations where a person may misuse the Task Force database and the liability of persons entering information in compliance with the statute. Senator Amodei stated that immunity would protect persons who input information in the database from being sued.

- Assemblyman Mo Denis, Clark County Assembly District No. 28, the sponsor of A.B. 326, commented on the discussions held by the work group. He opined that the recommendations made will help to reduce prescription drug abuse.
- Chair Wiener advised that the two recommendations proposed by the work group and the immunity issue will be considered by the Committee.

In response to a question by Senator Copening, Assemblyman Denis stated that the work group would meet again and provide a proposal on the immunity issue.

DISCUSSION REGARDING METHODS FOR ESTABLISHING A FAIR AND EQUITABLE SYSTEM FOR THE PAYMENT OF MEDICAL SERVICES PURSUANT TO SENATE CONCURRENT RESOLUTION NO. 39 (FILE NO. 101, *STATUTES OF NEVADA 2009*)

- Marsheilah D. Lyons, previously identified, provided an overview of the recommendations received from the Health Services Coalition, the Nevada Hospital Association, and the Nevada State Medical Association, regarding establishing a fair and equitable system for the payment of medical services ([Exhibit O](#)). She also provided a revised document from the Health Services Coalition ([Exhibit O-1](#)).
- Chair Wiener asked about the provision regarding services provided only to residents of Nevada.
- Senator Copening suggested receiving a response from the three stakeholders based on the recommendations made to the proposals.
- Lawrence P. Matheis, Executive Director, Nevada State Medical Association, commented on new issues that include: (1) a lawsuit and settlement that will provide a new Usual and Customary Rate formula; (2) a ruling by the Office of the Attorney General regarding the corporate practice of medicine ([Exhibit P](#)); and (3) existing federal regulations that limit self-funded insurance plans.

Discussion ensued regarding the final meeting and work session and a timeline for the receipt of information by the LCHC.

DISCUSSION REGARDING THE CONSOLIDATION OF ADMINISTRATIVE SERVICES FOR HEALTH PROFESSIONAL AND OCCUPATIONAL LICENSING BOARDS

- Marsheilah D. Lyons, previously identified, discussed the proposals to consolidate the administrative services for health professional and occupational licensing boards provided by Lawrence P. Matheis, previously identified. (See [Exhibit Q](#) and [Exhibit Q-1](#).)
- Mr. Matheis stated that the intent of his proposal is to reduce costs and increase efficiency. He commented on problems with the boards' current administrative support and opined that combining administrative functions under one office would increase efficiency and lower costs.

Responding to Chair Wiener's query, Mr. Matheis stated that the most important part of his proposal is the audit and budget oversight recommendation (see page 5 of [Exhibit Q-1](#)).

- Assemblyman Hardy asked for clarification of the effect of combining the administrative services for the licensing boards.
- Mr. Matheis stated that deliberations and decisions would remain with the individual boards and the administrative services would be combined under one office.

Discussion ensued between Assemblyman Hardy and Mr. Matheis regarding funding and fee collection. Mr. Matheis stated that Nevada has some of the highest fees in the nation and he opined the creation of one administrative office would decrease the boards' costs and provide sufficient funding for operation.

In response to Assemblywoman Spiegel's inquiry, Mr. Matheis stated that the boards will continue to function as they currently do. He used the relation between the State Board of Health and the Health Division as an example of how medical boards would function under his proposal.

- Vice Chair Pierce voiced her support of the recommendation proposed by Mr. Matheis.
- Assemblyman Hardy requested this item and additional information provided by Mr. Matheis be considered during the Committee's work session.

CONSIDERATION OF REGULATIONS PROPOSED OR ADOPTED BY CERTAIN LICENSING BOARDS PURSUANT TO *NEVADA REVISED STATUTES 439B.225*

LCB File No. R154-09, State Board of Osteopathic Medicine

LCB File No. R179-09, State Board of Health

LCB File No. R201-09, Board of Dental Examiners of Nevada

LCB File No. R043-10, Board of Dispensing Opticians

LCB File No. R048-10, Board of Medical Examiners

LCB File No. R049-10, Board of Medical Examiners

LCB File No. R051-10, Board of Medical Examiners

LCB File No. R052-10, Board of Medical Examiners

- Sara L. Partida, previously identified, provided a synopsis of the regulations proposed or adopted by certain licensing boards in Nevada, which the LCHC is required to review pursuant to NRS 439B.225 ([Exhibit R](#)).

Discussion ensued regarding LCB File No. 154-09 and the intent of the State Board of Osteopathic Medicine. Dianna Hegeduis, previously identified, stated that the Board is required to provide a meaning of gross negligence to adhere to statute.

In response to Assemblyman Hardy's query regarding the reporting process for the loss of a license, Ms. Hegeduis explained that these are "special licenses" and the offenses are not reportable to the national database.

- Ms. Partida explained the process for the adoption of the regulations.

Discussion ensued regarding: (1) adding a definition of “gross medical malpractice”; (2) the collection of fees; (3) a definition of “authorized facility license”; (4) penalties for unethical conduct; (5) amendments to NRS 633.291; (6) references to medical assistants; and (7) the proposed repeal of NAC 633.140.

- Ms. Partida identified other areas in statute that reference gross medical negligence. She commented that gross negligence is defined by the Board of Medical Examiners in Chapter 630 of NAC.

In response to Chair Wiener’s inquiry about adequate instruction of employees referenced in LCB File No. R201-09, Kathleen Kelly, Executive Director, Board of Dental Examiners of Nevada, explained this item was added to require licensed dentists to certify that an assistant under their supervision has been trained in infection control procedures in adherence to the CDC’s guidelines.

Further discussion ensued between the LCHC and Ms. Kelly regarding timelines for opening new offices, notices of deficiency, and authority for random audits.

- Chair Wiener asked Marla McDade Williams, previously identified, to provide background information on the State Board of Health’s regulation, LCB File No. R179-09.

Ms. Williams stated that the regulation was provided as a result of legislation passed in Assembly Bill 123 (Chapter 149, *Statutes of Nevada* 2009) to address the requirements for the operation of an outpatient facility.

In response to Vice Chair Pierce’s inquiry, Ms. Williams said that recommendations from the CDC and stakeholders were used for the proposal.

Discussion continued regarding: (1) permit and inspection fees; (2) permit timelines; (3) accreditation of facilities; (4) penalties for delayed notification; (5) sterilization definitions; (6) scope of deficiency and severity scale; and (7) the deposit and use of sanction funds.

- Vice Chair Pierce opined a conflict in LCB File No. R043-10 regarding license renewal for an apprentice dispensing optician. Ms. Partida stated she would discuss Vice Chair Pierce’s concern with the Board of Dispensing Opticians.
- Chair Wiener asked Ms. Partida to inquire with the Board of Medical Examiners about what prompted the revision in LCB File No. R048-10 regarding the provisions governing the suspension and reinstatement of a license.

In response to Chair Wiener, Ms. Partida clarified the proposed regulations submitted by the Board of Medical Examiners LCB File No. R051-10 and LCB File No. R052-10.

PUBLIC COMMENT

- Dan Musgrove, United Health Services (UHS), addressed the merger between UHS and Psychiatric Solutions, Inc. (PSI) at the request of Chair Wiener. He commented that due to the continuing merger process, he could only provide limited information. Mr. Musgrove reported that the merger will provide expanded services and that dedication to patient services and safety will continue. He stated there will be no change in the business model or the day-to-day operations. Mr. Musgrove reported that the merger will provide services to approximately 304 beds in the State.

Discussion ensued regarding the State and federal government's role in the acquisition; overlap of insurance providers between the two companies; and any risk of health insurance companies dropping coverage.

ADJOURNMENT

There being no further business to come before the Committee, the meeting was adjourned at 4:59 p.m.

Respectfully submitted,

Sally Trotter
Senior Research Secretary

Marsheilah D. Lyons
Principal Research Analyst

APPROVED BY:

Senator Valerie Wiener, 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 (LCB).

[Exhibit B](#) is a letter dated May 18, 2010, to Senator Valerie Wiener, Chairperson, Legislative Committee on Health Care, from Mary C. Walker, CPA, Walker & Associates, regarding “SB 278 Rural Health District Study.” Attached to this letter is a document titled “Rural Health District Study Findings of Key Decision Points.”

[Exhibit C](#) is a document titled “Nevada BMI Summary Report and Recommendations,” provided by Tracey D. Green, M.D., State Health Officer, Health Division Department of Health and Human Services (DHHS).

[Exhibit C-1](#) is a rating system table regarding school wellness programs provided by Tracey D. Green, M.D., State Health Officer, Health Division, DHHS.

[Exhibit C-2](#) is a report titled “Strategic Plan for the Prevention of Obesity in Nevada,” dated September 2006, submitted by Tracey D. Green, M.D., State Health Officer, Health Division, DHHS.

[Exhibit C-3](#) is a report titled “Strategic Plan for the Prevention of Obesity in Nevada, Nevada State Health Division, Bureau of Community Health,” dated September 2006, offered by Tracey D. Green, M.D., State Health Officer, Health Division, DHHS.

[Exhibit C-4](#) is a document titled “Nevada Department of Education, Statewide School Wellness Policy (Draft for Public Review),” provided by Tracey D. Green, M.D., State Health Officer, Health Division, DHHS.

[Exhibit C-5](#) is a document titled “Preventing Obesity In The Child Care Setting: Evaluating State Regulations,” submitted by Tracey D. Green, M.D., State Health Officer, Health Division, D

[Exhibit D](#) is a document titled “Proposal, Pilot Project: Immunizations in Schools,” dated May 2010, submitted by Tracey D. Green, M.D., State Health Officer, Health Division, DHHS.

[Exhibit E](#) is a chart displaying an overview of areas of care which was presented by RoseMary Womack, Board Member, Coalition of Assisted Residential Environments (CARE), Las Vegas.

[Exhibit E-1](#) is the testimony of RoseMary Womack, Board Member, CARE, Las Vegas.

[Exhibit E-2](#) is a document containing a proposed amendment to the *Nevada Revised Statutes* (NRS) that defines “assisted living,” submitted by RoseMary Womack, Board Member, CARE, Las Vegas.

[Exhibit F](#) is a document containing a proposed amendment to NRS 449.037 regarding assisted living facilities provided by LynnAnn Homnick, R.F.A., Administrator-Executive Director, Silver Sky Assisted Living, Las Vegas.

[Exhibit G](#) is a table titled “Summary of Options for Regulating Medical Assistants in Nevada as Presented to the Legislative Committee on Health Care,” provided by Marsheilah D. Lyons, Principal Research Analyst, Research Division, LCB.

[Exhibit H](#) is a letter dated May 5, 2010, to Senator Valerie Wiener, from Dianna Hegeduis, Executive Director-Board Counsel, State Board of Osteopathic Medicine, regarding “Medical Assistants.”

[Exhibit I](#) is a document titled “Answer to Legislative Committee on Health Care, Honorable Senator Valerie Wiener, Chairperson, Regarding Possible Methods to Address Certain Issues Related to Medical Assistants,” dated May 6, 2010, submitted by Douglas C. Cooper, C.M.B.I., Executive Director, State Board of Medical Examiners.

[Exhibit J](#) is a Microsoft PowerPoint presentation titled “Children’s Heart Center Nevada, Healthy Hearts Program,” offered by William N. Evans, M.D., F.A.C.C., F.M.A.P., and Gary A. Mayman, M.D., F.A.C.C., Children’s Heart Center Nevada, Las Vegas.

[Exhibit K](#) is a Microsoft Power Point presentation titled “Childhood Obesity, Legislative Committee on Health Care,” dated May 26, 2010, provided by Nicole Bungum, Supervisor, Office of Chronic Disease Prevention and Health Promotion, Southern Nevada Health District, Las Vegas.

[Exhibit L](#) is a memorandum dated May 26, 2010, to Senator Valerie Wiener, Chair, Legislative Committee on Health Care (LCHC), and Assemblywoman Peggy Pierce, Vice Chair, LCHC, from Carolyn J. Cramer, General Counsel, State Board of Pharmacy, Reno, Nevada, regarding “AB 326.”

[Exhibit M](#) is a document containing legislation from Minnesota that addresses the issue of liability as it relates to the state’s prescription drug monitoring program, submitted by Elizabeth MacMenamin, Vice President, Retail Association of Nevada (RAN).

[Exhibit N](#) is a document titled “State Prescription Drug Monitoring Program and HIPAA Privacy Requirements,” offered by Mark E. Amodei, Legal Counsel, RAN.

[Exhibit N-1](#) is a document containing laws regarding immunity in other states that use a prescription drug monitoring program, submitted by Mark E. Amodei, Legal Counsel, RAN.

[Exhibit O](#) is a table titled “Senate Concurrent Resolution No. 39,” provided by Marsheilah D. Lyons, Principal Research Analyst, Research Division, LCB.

[Exhibit O-1](#) is a document titled “Revised final recommendations to interim health for the revision of SB 157 to fulfill the SCR 39,” offered by the Health Services Coalition, Las Vegas.

[Exhibit P](#) is a letter dated March 5, 2010, to Richard Whitley, Administrator, Health Division, DHHS, from James T. Spencer, Chief of Staff, Office of the Attorney General, submitted by Lawrence P. Matheis, Executive Director, State Medical Association.

[Exhibit Q](#) is a memorandum dated October 15, 2009, to Senator Valerie Wiener, Chair, LCHC, and Assemblywoman Peggy Pierce, Vice Chair, LCHC, from Larry Matheis, Executive Director, Nevada State Medical Association, regarding “Department of Professions.”

[Exhibit Q-1](#) is a document titled “Presentation to Legislative Committee on Health Care Regarding Consolidating Administrative Services for Health Professional and Occupational Licensing Boards,” by Lawrence P. Matheis, Executive Director, Nevada State Medical Association, dated February 17, 2010.

[Exhibit R](#) is a document titled “Consideration of Proposed or Adopted by Certain Licensing Boards Pursuant to NRS 439B.225,” provided by Sara L. Partida, Principal Deputy Legislative Counsel, Legal Division, LCB.

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.