

55th NEVADA LEGISLATIVE ASSEMBLY - COMMITTEE ON HEALTH AND WELFARE,
CHAIRMAN WOODROW WILSON PRESIDING February 26, 1969

Members Present: Wilson, Frazzini, May, Homer, Foote, Swallow, Hafen, Brookman.

Absent: Espinoza.

Chairman Woodrow Wilson called the meeting to order at 3:20 P.M.

He said, "We have an amendment that was suggested to us by Assemblyman Prince. He has a few words with regard to this bill". He said he had also heard from Mr. Luce in Southern Nevada who has some suggestions for A.B. 91, but he could not make it to the meeting today. He said he thought everyone had had enough time to be heard on this bill, and that the committee should start making recommendations and try to push this out of committee.

Mr. Prince: "Thank you, Mr. Chairman. The reason I was quite concerned about this bill is that in White Pine County we do not have a place where the aged can be looked after and see that their meals are cooked and they are bathed, their medicines given to them, etc. If we do anything to close up our nursing home in Ely, our old people would have no place to go, and would probably have to go back to the hospital. I am therefore requesting that you amend Sec. 4, Page 1 to delete lines 17 and 18."

Foote: "Mr. Chairman, when this Title 19 came into being, there were certain facilities and classifications set up for people. This amendment would make this nursing home a group care facility. This is a facility, as you described it, where old people have a place to stay, are kept clean, and their meals are cooked for them".

May: "Is this facility specified as an adult group care facility?"

Prince: "They pay for their own care there. It is just known as an old people's home." Several people have defined it as a rest home."

May: "As defined in BDR 38-784* - a group care facility means an establishment maintained for the purpose of furnishing food and shelter, in single or multiple facilities, to four or more aged, infirm or handicapped adult persons unrelated to the proprietor."

Foote: "Group care is one thing. Nursing home is something else. Group care is licensed by the Welfare Division. Nursing Homes are licensed by the Health & Welfare Department."

Swallow: "Without something like this, these people in White Pine would be sunk."

Wilson: "This is the only way nursing homes can qualify under the Title 19 program".

Assembly

Page 2 - Committee on Health & Welfare

Feb. 26, 1969

Hafen: "I would assume that under A.B. 91, we have a situation in Nye County where there is a hospital and nursing home both in one facility. I would assume that the administrator who administers both of these facilities would come under this Chapter also, and probably he would wear another hat also?"

Homer: "He would be licensed under this for the nursing home part. They get so much a room under Title 19".

Foote: "There are certain things that are done in nursing homes that cannot be done in Group Care facilities".

Chairman Wilson introduced Mrs. Velma Hall, Group Care facility owner, Clark County, Nevada, and Mr. Russell Rorobaugh, Representative of an Adult Group Care facility operators of Clark County, Nevada, who wish to be heard on this proposal BDR 38-784, which provides methods for making assistance payments to residents of group care facilities. Mr. Rorobaugh:

"This bill defines, under Section 1, what an adult group care facility is. Par. 3 of Sec. 1 defines "rest home" as a group care facility maintained for the purpose of furnishing food, shelter and personal care or services, in single or multiple facilities, to four or more aged, infirm or handicapped adult persons who are unrelated to the proprietor.

There are nursing homes, intermediate care homes, and adult group care facilities. We administer no medications except perhaps an aspirin for a headache. Our patients are strictly ambulatory. Rest home is synonymous with adult group care facility.

In other words, it does not limit to age 65 or older. The County gives you any age. However, they are standardizing and attempting to make it uniform.

Sec. 3. Par. 1. The licensee is paid by the Welfare Division for each patient. However, a check is made payable to each patient for his personal needs such as toilet articles, etc. The Welfare Division transports the patient to the facility and picks them up if they are transferred. This is the case worker's responsibility."

Mrs. Frazzini: Re Sec. 3, Par. 4 -- Any assistance payments made by the welfare division for the personal needs of a resident of a group care facility shall be made directly to the resident or to his authorized agent or representative" Why can't the belongings referred to in Sec. 4, Par. 2, be turned over to his authorized agent or representative." (Mrs. Frazzini referred to "If the welfare division does not remove such belongings within 30 days, the licensee may sell or otherwise dispose of such belongings.") She said, "I think there should be another step in there."

Hafen: "You could either keep the belongings, sell them, etc. and any receipts could go to the licensee?"

Rorobaugh: "They may be put in a nursing home or transferred to a hospital. Their belongings sometimes amount to quite a bit, and the fire department has definite restrictions on the storage of these things".

Sec. 5 - The Welfare Division shall maintain an emergency telephone number where an agent of the division can be reached at all times. Their office hours are from 8 to 5, 5 days a week. If you can't contact the case worker, if a resident of the facility becomes physically or mentally ill on Saturday evening, the hospital will not admit them, the Police Department will not take them, and there is no one authorized to commit them.

Mr. Wilson asked if they sent a welfare recipient from their facility to the hospital with no case worker to sign for him, there would be no way for you to receive compensation? Mr. Rorobaugh answered no, and at the same time, the hospital would not be authorized to receive them. Mrs. Hall said they had a patient at their place that was a pugilist. He became violent, and the police would not even come out.

Mr. May stated that Mr. Rorobaugh and Mrs. Hall had principally come up to speak to the Ways and Means Committee regarding the money aspect of this bill, however, he said he would like to have it introduced before the Health & Welfare Committee.

Swallow: "In checking with Dennis Wright, I feel if this bill is put into law, this would clarify and add to the existing statutes. We don't make conclusions while our people are here, but I would like to say that I would like to go with these people on this. I think it would serve their purpose, and they do have a legitimate cause."

Homer: "I think it would be in order to introduce this as a committee measure. We cannot vote on it at this time, but when the guests are gone".

A.C.R. 17 - Proposes study and plan regarding total health manpower and services. - May: If they are going ahead with the new Health Science school, I would move that ACR 17 be held until final disposition is made of the Science Health program pending in the Senate. Seconded by Frazzini. Unanimously carried.

A.B. 224 - Increases fee for physical examinations for food handlers. - Chairman Wilson: "This bill was requested by the Clark County Health Department. It increases the fee for food handlers for physical examination from \$2 to \$4. The thought being that the cost incurred was closer to the \$4 figure than the \$2 figure. Mr. Young of the Clark County Health Department has offered to provide proof, which I have not as yet received. I have asked for this information repeatedly. The people in Clark County are objecting strenuously to this raise."

Assembly

Page 4 - Health & Welfare Committee

Feb. 26, 1969

Homer: "Isn't a mobile unit accepted as proper and sufficient? This is free, and only required once a year. Why should they have to pay even the \$2?"

Brookman: "The mobile chest x-ray isn't available the year around in Clark County".

Wilson: "One of the charitable programs finance the mobile unit in Clark County; one of the funds such as the United Fund are subsidized."

Swallow: "Aren't you entitled to the use of the mobile unit?"

Frazzini: "I'm apparently the only one here who has had this test. Let me tell you what happens. You walk in, fill out a small card and name for whom you are going to work--"

Foote: Do you remember when I was talking about tests for hyperglycemia? Dr. Ravenholt said the hospital charges \$15 if they take the x-ray, and if the county gives it, it costs \$2."

Frazzini moved to indefinitely postpone A.B. 224. Seconded by May. Unanimously carried.

Chairman Wilson dismissed the guests, thanked them for coming and told them they would be hearing something about the disposition the committee had made of their proposed bill, BDR 38-784 at a later date.

A.B. 228 -Adds labeling requirements for containers filled pursuant to prescriptions.

This is a proposed amendment by the introducer amending Sec. 1, Page 1, Line 4, to insert after label, the generic name of the medicine--".

Mr. Swallow said he did not see clearly what they were trying to accomplish. Which do you want, the brand name, or the generic name? This is a very confusing thing. I would just like to mention one or two things Mr. Harris said about this. If you put the generic names on a label, all drugs do not react the same. With the generic name on the label, the druggist can fill it with the cheapest brand he can get. You might be substituting quality. All drugs do not react the same on an individual patient. This sometimes is due to the compounds used in a particular medication. Acromycin, for instance, this is a trade name made by Lederle. You can use them as long as you say "U.S.P.", but this doesn't mean that the base is the same. You can buy a foreign brand for maybe \$2.60 per hundred."

Wilson: "I move we indefinitely postpone A.B. 228."

Dr. Soll said he agreed with Mr. Swallow, that if you tried to use the generic label, you would have a label too long to wrap around the bottle.

Feb. 26, 1969

He continued, "however, if a child picks up a bottle and takes the wrong kind of medicine, the mother can call the poison center and get help immediately for that child, (if the brand name is on the bottle). With the generic name, it could mean the child's life before you could get help".

Mr. Swallow said that approximately 75% of the Doctors put the brand name on the bottle. However, there are a lot of reasons why the other 25% are not put on the labels, such as sleeping pills. If a Doctor wants to give the patient something else, that is his prerogative.

Foote: "The Dr. may not want the patient to know, if it is a terminal patient. He may be suicidal or something".

Swallow: "It would be committing a terrific injustice to put the name on the bottle in all cases. Dr. Soll said put the name on the bottle, and I think his point is good. It would preclude the innocent child who takes the bottle from the medicine cabinet --- However, there is a universal antedote, unless it is a caustic poison, or something like this, it will keep it from absorbing into the system. I think every physician carries this universal antedote. This thing gets so complicated. I don't care how intelligent the M.D., in case of poisoning, he hasn't time to look up a generic symbol (he showed the committee how one little symbol can change the meaning of a generic symbol)."

Foote moved to indefinitely postpone A.B. 228. Seconded by Frazzini. Unanimously carried.

A.B. 292 - Provides procedure for entering name of natural father on birth certificate of illegitimate child.

Brookman handed each member of the committee a blank birth certificate registration form. She said this bill would let the attorney collect payments for the illegitimate child from the father. My proposal, she said, is to get the word "illegitimate" erased from the birth certificate. Now, I believe, there is still a place for it on this form".

Wilson: "Are you saying you are against the bill?"

Brookman: "Yes". She said if later on in life he should need a security clearance to get a job or go into the Armed Services, this would case a stigma on him.

Frazzini moved A.B. 292 be indefinitely postponed. Seconded by Brookman. Unanimously carried.

Foote moved DO PASS A.B. 91. Seconded by Frazzini. Unanimously carried.

Mrs. Frazzini said she would like to discuss Sec. 7, Page 2, Line No. 1 (A.B. 91) "The director of the department of health, welfare and rehabilitation or, if he so designates as his representative, the state health officer; and " We are going to be without a state health officer".

Foote: "This is one of the things suggested as an amendment, 'director or his designee'."

Frazzini: "I amend my motion to include the amendment in Sec. 7, Line 1, Page 2, A.B. 91 'director or his designee'."

BDR 38-784 - providing methods for making assistance payments to residents of group care facilities.

Frazzini moved it be introduced as a committee introduction. Seconded by Dr. Homer. Unanimously carried.

Chairman Wilson announced that Friday, February 28th, there would be a hearing on SB 96, and asked the committee to look it over ahead of time. He said people will be coming up from Southern Nevada, and that it had been introduced by a delegation from Clark County.

Foote: "It will effect other counties eventually. They need a \$40,000 bond issue."

Homer: "What's behind it?"

Foote: "Money. They don't have any."

Homer: "I have someone who wants to speak on that. Friday afternoon at 2:30"?

Frazzini moved for adjournment. Seconded by Brookman. Unanimously carried.

SUMMARY OF MINUTES - HEALTH & WELFARE

Feb. 26 - 69

A.C.R. 17 - Hold until final disposition is made of the
Science-Health Program pending in the Senate.

A.B. 224 - Indefinitely postponed.

A.B. 228 - Indefinitely postponed.

A.B. 292 - Indefinitely postponed.

A.B. 91 - DO PASS with amendments.

BDR 38-784 -Moved to introduce by the committee on the Assembly
Floor.