MINUTES OF MEETING - HEALTH AND WELFARE COMMITTEE, 55TH ASSEMBLY SESSION, April 2, 1969

Present: Wilson, Hafen, Frazzini, Brookman, Foote, Homer, Swallow, Espinoza

Absent: May

Guests: John H. Carr, M.D., Acting State Health Officer; Mrs. David Vhay, Member State Board of health; Karl R. Harris, Department of Health Welfare & Rehab.

Chairman Wilson called the meeting to order at 3:30 pm.

AB-739 - Establishes state comprehensive health planning agency.

Harris: The comprehensive health planning was created by executive order in December,1967. Federal funding became available on April 1, 1968 and we have been operating under the plan since this time. All of the funding came from Federal sources. Beginning July 1, 1969, it will require 25% matching of state funds. We had assumed that we were going to have to match all Federal funds; there is a carryover of $35,000 that will not have to be matched. In the first year we will not need the $25,000 of state funds but will need the $25,000 in the second year. This agency presently is in my office and the governor of each state designates the planning agency. There was much discussion prior to and after the agency was created that possibly this agency should belong in the health division. That is still a pertinent point. Dr. Guisto and Mrs. Vhay have some comments, but specifically on the second page of the bill, it has something to do with the Board of Health and changes the wording of their responsibility. We felt that this bill should be put in the sectionof the organization of the Department of Health, Welfare and Rehabilitation. We argued with the Legislative Councel and they said they would not put in that section of the Statutes but in the health section of the Statutes. It must be clarifed as to what role the Board of Health and Health Division has.

Dr. Guisto: In the matter of jurisdiction, this is probably in an area that needs more than the health planning. I've gone back over the Statutes through the years which creates a board of health supreme since 1911; it has survived many changes in the Statutes. There is a need of a nonpartisan board that people can go to with health problems. I think this determination about the State Board of Health at this time would be poor lawmaking. There are many problems that come within the Board of Health. For example, the hearing for the Fallon Water situation and their appeal to the Board of Health for some fair ruling. Hospitals with _____ funds have approached us for appeal for a just opinion. They would no longer have this avenue for appeal. I think it is a real bad time to destroy the Board of Health.

Question was asked about how necessary the State Comprehensive Health Planning Agency is. Dr. Guisto: I think you're spending this amount of money for this amount of results and I think that there may be something that would come out of this if a different approach were used. The agency should be in the Health Division. The way it has been to this point is that they are working in limbo; they don't have the facilities and the Health Division at their side for helping them make decisions. More professional help is needed in the Health Division. The health planner should be appointed by the health officer rather than the director. Mr. Harris already has too many agencies to take care of. The question was asked again as to how necessary this agency is. Dr. Guisto: For this much effort and may have this little results. I don't think we need their money; what we're going to find out is what we already know anyway.

Harris: In the past the Health Division received in the state funds from the federal grants designated for particular programs; moneys available to the state for TB, etc. The states were critical of this method of distributing funds to the states because if you didn't use all of the money for a particular category could not be transferred over to any other program. There is now a block grant formula. The state is sure of a certain amount of money from the Federal government and the state determines where the money is to go. We not only receive these funds in the Health Division but some in mental health. In addition there are other grants which are available not only to the Health Division and the State Hospital, whoever wants to apply for them. The intent of comprehensive planning would be an advisory board in the state that would look at private and public agencies to see what they are doing. This would include physicial health, mental health and enviromental health. We would include in our plan the training of manpower, the programs in the health sciences at the university; we would be looking at hospitals and what they would be providing, and in conclusion with the Health Division. As far as putting this in the Health Division, I have no quarrel with this except the Federal government does not feel that an agency can be judge and jury of their programs.

It was pointed out that in these programs they are set up with no matching funds by the state and once they are established, the state is left with the entire cost. Mr. Harris stated that he had asked for an opinion from legislative councel to see if it was necessary to have a comprehensive health planning agency but they couldn't state what effect this would have in the moneys coming to the state of Nevada. It would affect the areawide planning. With the block grant to the state, if you don't have a planning agency, the funds would be jeopordized. Dr. Guisto stated that he thought if the agency was created in the Health Division, sufficient personnel and manpower could be maintained without additional funds. If it becomes a more important agency, it will be there and will be activated.

Dr. Carr pointed out that Nevada was not the only state to question the idea of comprehensive health planning. Other states have taken a look at the results. The idea of having the manpower within the division is no problem. If there is a legal problem at the Federal level, this is the difficulty. Comprehensive health planning initially is largely federal funding; next year it goes to 75%/25%; and then 50%/50%, so it is just a matter of time.

AB-750 - Changes composition of state board of health.

Mrs. Vhay: I don't think that this is a very sound bill. My feeling is that by designating each single person is from a certain group, I think you will have a board consisting of vested interests. We have the board of health which is non-partisan and not a political board. We are vitally interested in the health of the entire state and we are chosen from different parts of the state and we do not represent any particular interest.

It was asked if two years ago when a veterinarian was on the board if this created any problems; "No, it didn't; there are very rarely any veterinarian problems that come up."

It was determined that this bill was requested from people who were interested throughout the state. It was determined that if this bill did not pass out of committee, that the health board would stand as it is. It was determined that there was a doctor serving on the board as a lay member at the present time. Mrs. Vhay stated that the State Board of Health was interested in the health of the state; my contention is that if you have a person that was interested in hospitals and nursing homes and other professions, I think that they would tend to fight for their own profession moneywise. Dr. Guisto stated that they had a very dedicated board at the present time; to me healing sciences do not really add to the broad concepts of the board of health. Discussion followed on the makeup of the Health and Welfare Committee etc. Dr. Guisto stated that he didn't mean to imply that there were'nt other dedicated people; any problem that anybody has can be taken before the Board of Health and they get a very fair hearing of whatever the problem is; to add more people is to add more confusion.

It was asked if they didn't think as the state grows and the number of nursing homes grows that the problems are going to change into a much broader scope than what you have now. Mrs. Vhay stated that she didn't mean to imply that the board had all knowledge in the different fields, but that they did have staff and personnel in the Health Division to call on for knowledge and for hearings and people in the different areas come to us with their knowledge; I do think a large group is much more difficult to run the situation.

It was questioned whether they would like the board to stay as it is or if there was any change wanted. Psychiatrists were mentioned and Mrs. Vhay stated that she would suggest that another lay person be on the board.

It was pointed out that this bill only changed the number of persons on the board to nine which is the same number that is on the Health and Welfare Committee.

SB-414 - Abolishes health advisory council and permits health division to collaborate in hospital inspection.

Dr. Guisto felt that the wording in this bill was not clear. The committee will ask for legal counsel and will have the wording and meaning checked.

AB-739 - Establishes state comprehensive health planning agency.

Foote moved "definite postponement"; Homer seconded; motion carried unanimously.

AB-750 - Changes composition of state board of health.

Brookman moved to amend to add another lay person and a pharmacist; Espinoza seconded; motion carried unanimously.

Espinoza moved a do pass as amended; Homer seconded; motion carried unanimously.

AB-745 - Requires hospitals and nursing homes to make annual reports of ownership and payments made to doctors.

Foote moved do pass; Homer seconded; motion carried unanimously.

Espinoza brought out that AB-476 was questioned on the floor regarding the transfer of funds. Espinoza is to work out an amendment with Mr. Daykin.

Meeting adjourned.