

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

SUMMARY MINUTES AND ACTION REPORT

The first meeting of the Nevada Legislature's Legislative Committee on Health Care was held on Wednesday, November 4, 2009, at 9 a.m. in Room 4412 of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. The meeting was videoconferenced to Room 3137 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 www.leg.state.nv.us/Interim/75th2009. 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) Hardy, M.D.
Assemblywoman Ellen B. Spiegel

COMMITTEE MEMBER PRESENT IN CARSON CITY:

Senator Maurice E. Washington

OTHER LEGISLATORS PRESENT:

Senator Steven A. Horsford
Senator David R. Parks
Assemblyman Moises (Mo) Denis

LEGISLATIVE COUNSEL BUREAU STAFF PRESENT:

Marsheilah D. Lyons, Principal Research Analyst, Research Division
Marji Paslov Thomas, Principal Research Analyst, Research Division
Jennifer Chisel, Senior Research Analyst, Research Division
Melinda Martini, Senior Research Analyst, Research Division
Sara L. Partida, Principal Deputy Legislative Counsel, Legal Division
Sally Trotter, Senior Research Secretary, Research Division

INTRODUCTION, OPENING REMARKS, AND COMMITTEE SCHEDULE

- Senator Valerie Wiener, Chair, welcomed members, presenters, and the public to the first meeting of the Legislative Committee on Health Care (LCHC). Chair Wiener noted the general expectations of the Committee, how Committee business will be conducted, and procedures for testimony. She introduced new and returning members and primary Committee staff. Chair Wiener noted that a calendar had been set and the next four meetings had been scheduled for December 9, 2009, January 13, 2010, February 17, 2010, and March 17, 2010 (see [Exhibit B](#)).
- Assemblywoman Ellen B. Spiegel stated it was her pleasure to serve on the Committee and noted her willingness to work with the members and interested parties in an effort to solve the issues coming before the LCHC.
- Senator Allison Copening communicated her readiness to serve on work groups and stated she would be an active participant on the LCHC.
- Assemblyman Joe Hardy, M.D., disclosed that he is a doctor and planned on discussing and voting on all issues.

PRESENTATION CONCERNING THE ACTIVITIES AND RESPONSIBILITIES OF THE LEGISLATIVE COMMITTEE ON HEALTH CARE (LCHC)

- Marsheilah D. Lyons, Principal Research Analyst, Research Division, Legislative Counsel Bureau (LCB), discussed a memorandum ([Exhibit C](#)) that provided a brief overview of the history and responsibilities of the LCHC, as well as an outline of the mandated reports that certain entities are required to submit to the LCHC.
- Sara L. Partida, Principal Deputy Legislative Counsel, Legal Division, LCB, offered a memorandum ([Exhibit D](#)) outlining the regulatory process and responsibilities of the LCHC to review certain regulations pursuant to *Nevada Revised Statutes* (NRS) 439B.225. In addition, she provided an attachment listing the licensing boards whose regulations are subject to review by the LCHC ([Exhibit E](#)).
- Marsheilah Lyons, previously identified, outlined the five studies that the LCHC will address and the staff from the Research Division that will work with the LCHC on those studies. She indicated that the outline would coordinate with Agenda Item V through Agenda Item IX. (See [Exhibit F](#).)

PRESENTATION CONCERNING H1N1 FLU VIRUS IN NEVADA

- Chair Wiener explained that the LCHC would be receiving updates on various health care issues and commented she had requested the presentation on H1N1 to keep the LCHC updated on the H1N1 and the activities by State and local agencies regarding this issue.

- Tracey D. Green, M.D., State Health Officer, Health Division, Department of Health and Human Services (DHHS), provided a report on the H1N1 Program ([Exhibit G](#)). She directed the LCHC to the “Executive Summary.” Dr. Green’s testimony highlighted:

1. Background and history on H1N1 in Nevada;
2. Implementation and goals of an Incident Guidance Plan;
3. Availability and usage of antiviral medication;
4. Definition and usage of personal protective equipment;
5. Testing and surveillance tracking and monitoring;
6. Vaccine goals, dosing, allocation, clinics, distribution, and safety monitoring;
7. Community mitigation actions, infection control, community education, isolation, and school dismissal procedures;
8. Safety and communication activities; and
9. Proclamation by President Barack Obama declaring the H1N1 pandemic a national emergency.

In response to Chair Wiener’s inquiry about the cuts in doses of the H1N1 vaccine and clarification of private sector providers, Dr. Green stated that the dosage cuts occurred nationwide with each state affected similarly. She noted the private sector providers included primary health care providers, pharmacies, specialty care providers, and hospitals.

- Luana J. Ritch, Ph.D., Chief, Bureau of Health Statistics, Planning, and Emergency Response (HSPER), Health Division, DHHS, addressed Chair Wiener’s question regarding medical staffing. She explained the challenges the State faces due to medical/professional shortages. Dr. Ritch reported there are active medical reserve corps consisting of retired health care professionals who are available, as well as federal resources that can be utilized at such time all other State resources are exhausted.

Responding to Vice Chair Pierce’s question regarding when the flu season would end and the possibility of it returning next year, Dr. Green commented the flu season (including H1N1) could continue through May and confirmed the probability it would return next year. She added next year’s seasonal flu vaccine would probably include the variation of the H1N1 virus.

- Chair Wiener stated that this subject would be on future agendas for updates.

UPDATE CONCERNING HEPATITIS C EXPOSURE AND RELATED PUBLIC HEALTH MATTERS

- Lawrence K. Sands, D.O., M.P.H., Chief Health Officer, Southern Nevada Health District (SNHD), provided written testimony ([Exhibit H](#)). His discussion centered on legislation passed during the 2009 Legislative Session that related to inspection and reporting procedures; the definition of sentinel events; the expansion of the SNHD's authority to inspect suspected cases of infectious disease; and the authority to issue cease and desist orders relating to those investigations. Dr. Sands stated the investigation of the hepatitis C outbreak had been completed. He noted a final report was in review; and when finalized it would be available as a public document. Dr. Sands reported on additional activities of the SNHD including its work with national partners to promote education and awareness to the public; ongoing training to health care workers; meetings held with State Health Division staff and representatives from other state health departments to promote safe injection practices; and a grant that was awarded by the Centers for Disease Control and Prevention to pilot and evaluate a safe injection practices campaign in Nevada.

Senator Copening requested a timeline for the completion of the hepatitis C outbreak report to which Dr. Sands responded the goal was to have the report released before the end of 2009.

- Marla McDade Williams, Chief, Bureau of Health Care Quality and Compliance (Bureau), Health Division, DHHS, offered a table summarizing the items the Bureau is working on to implement legislation from the 2009 Session, along with target dates for completion and changes in policy and procedures ([Exhibit I](#)). She reported on infection control activities that include preparation of a State plan on infection prevention and control; development of an online infection prevention and control training program; and strengthening the infection prevention and control programs of skilled nursing facilities in Nevada.

In response, to Senator Wiener's question regarding inspection requirements, Ms. Williams explained that inspections are currently statutorily required every year and beginning January 1, 2010, all licensed facilities will be inspected every 18 months due to budgetary mandates. She noted that the Bureau is proactively inspecting facilities as well.

DISCUSSION AND ADOPTION OF A WORK PLAN TO GUIDE THE LCHC IN REVIEWING 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*)

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

- Senator Steven A. Horsford provided a brief history on S.C.R. 39, which included the changes in the system for the payment of medical services and health care cost

increases. He asked to hear more testimony from consumers and requested that stakeholders negotiate a reasonable solution to rising health care costs. Senator Horsford requested that the LCHC consider all of the history of this issue and focus on the needs of the consumer. He suggested the work plan should include reduced costs; improved quality of care; a fair and equitable system for payment of medical expenses to the consumer; and if necessary, a regulated system for containing costs.

- Chair Wiener stated that future agendas would include this issue and further discussions with stakeholders would be held in an effort to provide possible legislation for the upcoming legislative session.
- Marsheilah D. Lyons, previously identified, explained the responsibilities of the LCHC as outlined in S.C.R. 39. (See [Exhibit F.](#))
- Chair Wiener explained that the presentations would assist the LCHC to determine its scope of responsibility and the opportunity to better understand the studies.
- Bobbette Bond, Legislative Liaison, Health Services Coalition (Coalition), introduced Jeff Ellis, Vice President and Chief Executive Officer of Corporate Benefits for MGM Corporation and a member of the Coalition. She provided a Microsoft PowerPoint presentation ([Exhibit J](#)) and a newspaper article from *Kaiser Health News* on out-of-network costs ([Exhibit J-1](#)). Ms. Bond discussed situations in which the system does not work; billed charges that are not regulated; increases in noncontracted care; increases in billed charges versus increases in the consumer price increase; and the increases in billed charges per patient since 2000. She also noted the difference between Washoe County and Clark County health care costs. Ms. Bond stated that solutions should include reasonable efforts to contract for care; a reasonable payment structure; and prompt payment to providers. Concluding, she discussed transparency in actual hospital costs.
- Jeff Ellis, previously identified, commented that as health care reforms occur it may not be sustainable to contract with every provider. He stated that the Coalition was attempting to form a payment method in which reasonable efforts would be made to include a cap on charges if a patient was transported to a noncontracted provider. Mr. Ellis added that billed charges need to be fair and reasonable.
- Assemblywoman Spiegel asked about billed charges in 2001, 2005, and 2007 and questioned why the charges were so much less. Ms. Bond responded it would be necessary to research this issue with the hospitals.

In response to Vice Chair Pierce's questions about the old system of billed charges, Ms. Bond explained regulations that were set in 1988 sunset in 1997 and since then charges have been increasing.

- Valerie M. Rosalin, R.N., Director, Governors Office for Consumer Health Assistance (GovCHA), provided written testimony with information on the role of GovCHA ([Exhibit K](#)). She reported that GovCHA has taken in about 3,700 cases since January 2009, and of those cases, 25 percent were billing issues, and 11 percent were noted to be out-of-network cases. Ms. Rosalin stated there are no real monitors for provider billing and though GovCHA has been successful in negotiating discounts for some consumers, some providers will not agree to settle for less than full billed charges. Concluding, she detailed GovCHA's year-to-date savings to consumers which amounted to over \$2 million.
- Bill M. Welch, President and Chief Executive Officer, Nevada Hospital Association (NHA), presented written testimony ([Exhibit L](#)) and a handout ([Exhibit L-1](#)) that provided detailed costs and issues attributed to rising hospital costs. He agreed with Senator Horsford's remarks on issues of costs, access, and affordability to ensure equitable payments for medical care to patients. Mr. Welch testified regarding the issues of shifting of costs, problems with nonpayment by patients, Medicaid payment reductions, and the uninsured. He commented that increasing hospital costs are driven by reductions in reimbursement of services, unfunded mandates, reductions in services due to the economic crisis, health care profession shortages, and medical supply costs. Using a Microsoft PowerPoint presentation ([Exhibit L-2](#)), Mr. Welch provided information regarding the problems and issues faced by the NHA and proposed study element items to be included in the LCHC review of S.C.R. 39.

Discussion ensued between Vice Chair Pierce and Mr. Welch regarding the NHA and coalitions. Vice Chair Pierce requested information on the University Medical Center of Southern Nevada (UMC) that Mr. Welch agreed to provide.

Further discussion ensued in response to inquiries from Assemblywoman Spiegel regarding recovery rates and payments by the uninsured and out-of-plan provider payments, and Senator Copening's questions regarding operating margins of the UMC. Mr. Welch stated that the NHA's quarterly reports are available for review and validated for accuracy. He added that over one-half of the hospitals in Nevada are operating at a negative margin. Mr. Welch reported that the State ensures that hospitals are not allocating unreasonable costs to in-state or out-of-state corporate offices.

- Karen Massey, M.H.A., F.A.C.M.P.E., C.P.M.S.M., Chief Administrative Officer, Northern Nevada Emergency Physicians, (NNEP) provided written testimony. She introduced Dr. Curtis Brown, practicing Emergency Room Physician, and President-elect of the Nevada Chapter of the American College of Emergency Physicians. Ms. Massey provided information on NNEP, problems encountered in emergency care departments, and objectives for solutions to those problems. (See [Exhibit M](#).)

DISCUSSION AND ADOPTION OF A WORK PLAN TO GUIDE THE LCHC IN STUDYING ISSUES CONCERNING THE PROVISION OF PUBLIC HEALTH PURSUANT TO SENATE BILL 278 (CHAPTER 267, STATUTES OF NEVADA 2009)

- Marsheilah D. Lyons, previously identified, reviewed a handout regarding the scope of the study on S.B. 278 ([Exhibit F](#)). She clarified the three distinct areas within the study and the LCB staff assistance.

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

- Mary Walker, President, Walker and Associates, provided a letter to the LCHC and a draft of the “Conceptual Mechanics of the Rural Public Health District Study” (see [Exhibit N](#) and [Exhibit N-1](#)). She stated that the focus of the study is on public health services and expressed appreciation to the LCHC for the opportunity to study ways to improve the public health care system in rural counties. Ms. Walker stressed the importance of obtaining facts from other states regarding how they provide health services to their rural areas including: governance structure; funding structure; bonding authority; types of services provided; division of responsibility between the state and counties for funding and providing services; and the population base of health districts. She recommended a list of states to study and noted the county and State staff that would be assigned to perform the research. Ms. Walker commented that once the information was received it would be taken to other interested stakeholders.
- Senator Wiener clarified the intent of the Senate Committee on Health and Education in its recommendation that the LCHC further consider S.B. 278.

In response to Senator Wiener’s inquiry about including a financing mechanism in the study, Ms. Walker reported that this issue was a primary concern and would be addressed in meetings with other stakeholders. Senator Wiener asked if public health services would be expanded to include other rural counties or if there would be a consolidation of counties. Ms. Walker stated that the other counties would have to make the determination if they would join in a collaborative effort. She suggested that the end result could provide legislation which would enable the other counties to provide the services if they chose to do so. Ms. Walker said that currently Carson City and Douglas County have taken the lead in the study.

- Mary E. Wherry, R.N., M.S., Deputy Administrator, Health Division, DHHS, noted the importance of pooling resources across counties and the negative impact on funding if that is not accomplished. She said that pooling would allow for larger dollar amounts of funding and provide a better complement of services which would help all of the counties. Ms. Wherry expressed support of the study demonstrating why it would benefit rural counties to pool resources.

- Luana J. Ritch, previously identified, noted the Health Division's support of this study. She elaborated on what the Health Division is doing to pilot concepts and delegate some responsibilities to Carson City, such as disease control. She also discussed related activities that could be funded with federal funds. Dr. Ritch stated that core public health services, disease investigation, food sanitation and food permitting, and emergency health responses are gaining interest in rural counties.

The Feasibility of Consolidating or Integrating Certain Health and Social Services in Counties With Populations of 400,000 or More

- Senator David R. Parks, Clark County Senatorial District No. 7, provided introductory remarks and a brief summary of Senate Bill 322, which he sponsored in the 2007 Legislative Session. (This bill died pursuant to Joint Standing Rule 14.3.1 and certain provisions of the bill were incorporated in S.B. 278 which directs the LCHC to study the issue of consolidating or integrating certain health and social services in counties with populations of 400,000 or more.)
- Chris Giunchigliani, Clark County Commissioner, provided the LCHC with an amended copy of Senate Bill 322, which included an expansion on suggested amendments to language and background information on the creation of the study of integrating health care services ([Exhibit O](#)). She listed some of the benefits and challenges that might be expected in the integration and consolidation of Nevada's health services. Ms. Giunchigliani stressed the importance of focusing on resource sharing and integration of services between the county and State health services. She provided information on the delivery of services for H1N1 and the air quality program by Clark County ([Exhibit O-1](#)). Ms. Giunchigliani expressed her support for community-based programs.
- Senator Wiener commented on the need for greater efficiency at the local level. She stated that stakeholders should have detailed discussions on the issues.
- Lawrence K. Sands, previously identified, offered testimony and explained the SNHD's opposition to the bill; described the public health mission of the SNHD; the public health role of the SNHD which is to focus on the population as a whole rather than individual patients; and offered support for consolidating services to streamline resources and provide enhanced services to the public ([Exhibit P](#)). Dr. Sands pointed out some challenges that can prevent effective collaborations. Concluding, he offered the SNHD's assistance to the LCHC.

Discussion ensued regarding the purpose of the work plan to study the feasibility of consolidating or integrating certain health and social services in counties with populations of 400,000 or more. Chair Wiener explained that this issue was folded into S.B. 278 along with the work plan to study the feasibility of consolidation or integrating certain health and social services in counties with populations less than 100,000 and the feasibility of establishing regional centers for the prevention and treatment of alcohol and substance

abuse and they were all related in dealing with consolidating or dividing responsibilities. She voiced her support of the SNHD's involvement in providing concrete proposals and suggestions to the plan.

The Feasibility of Establishing Regional Centers for the Prevention and Treatment of Alcohol and Substance Abuse

- Belinda Thompson, Director, Goshen Community Development Coalition, provided an overview which included a narrative of community coalitions; potential legal ramifications of the original language offered in S.B. 278; comments regarding the Nevada State Incentive Grant Final Evaluation Report; historical and key developmental components of the coalition process; and questions and answers received from the Partnership for Success Grant Application ([Exhibit Q](#)).
- Deborah A. McBride, M.B.A., Agency Director, Substance Abuse Prevention and Treatment Agency (SAPTA), Division of Mental Health and Developmental Services, DHHS, testified on the prevention activities of SAPTA, the practices of coalition support of the redistribution of prevention funding that ensures equal access to funding, and the Statewide Native American Coalition's focus on policy development which would provide consistency and continuity among tribes ([Exhibit R](#)). She discussed SAPTA's role in assisting and training treatment providers. Ms. McBride noted SAPTA's support of the coalition structure. She stated that SAPTA did not support the amendment to S.B. 278 which added the feasibility study for establishing regional centers. She stated the current structure the coalitions and SAPTA have established are cost effective and efficient. Ms. McBride stated that regional centers would not be conducive to the current structure. She commented that the adoption of regional centers could add another level of oversight to the process and stated that funding may have to be redirected to pay the costs of that additional level.
- Marsheilah D. Lyons, previously identified, provided a brief history on the amendment mentioned by Ms. McBride at the request of Chair Wiener. She stated that Senator Washington drafted language for the Senate Committee on Health and Education's consideration; however, the matter came before the Committee late in the session and the Committee did not have sufficient time to debate the proposal.

DISCUSSION AND ADOPTION OF A WORK PLAN TO GUIDE THE LCHC IN STUDYING THE ESTABLISHMENT OF A HEALTH INSURANCE EXCHANGE IN NEVADA PURSUANT TO SENATE BILL 316 (CHAPTER 496, STATUTES OF NEVADA 2009)

- Senator Allison Copenig, Clark County Senatorial District No. 6, presented her views on the benefits of a health insurance exchange to the State. She listed the following advantages:
 1. Insurance Portability;

2. Increased diversity of plans;
3. Premiums paid with pre-tax dollars; and
4. Decreased administrative burden.

Concluding, Senator Copening commented that President Barack Obama has proposed including a health insurance exchange in *America's Healthy Future Act of 2009* (S. 1796).

- Marji Paslov Thomas, Principal Research Analyst, Research Division, LCB, provided an overview of S.B. 316 and the definition of a health insurance exchange. She offered issues that could be addressed by the LCHC as directed by S.B. 316 ([Exhibit S](#)).
- Lynn O'Mara, M.B.A., Project Manager, Health Information Technology, DHHS, discussed the possibility of the health information exchange serving in a support role on the implementation of the health insurance exchange. She stated that through the exchange of available information the system could also support portability and transferability of plans and may be able to verify eligibility criteria.
- Scott J. Kipper, Commissioner of Insurance, Division of Insurance, Department of Business and Industry, presented considerations for creating an exchange that included: size; organization governance and budget; public or private partnerships; use of subsidies for low-income individuals; and the marketplace for small and large employers. He advised obtaining research from other states on these issues. Mr. Kipper offered the Division's resources for assistance in the discussion and development of a health insurance exchange.
- Chair Wiener thanked the presenters for their offers of assistance. She stated this issue would be added to the agenda at a future date, and she encouraged interested parties to provide the LCHC with proposals for policy consideration.

DISCUSSION AND ADOPTION OF A WORK PLAN TO GUIDE THE LCHC IN EXAMINING ISSUES RELATED TO THE HEIGHT AND WEIGHT OF CHILDREN PURSUANT TO ASSEMBLY BILL 191 (CHAPTER 285, *STATUTES OF NEVADA 2009*)

- Mindy Martini, Senior Research Analyst, Research Division, LCB, provided background information on A.B. 191. She explained the bill extended the date for the LCHC study on the height and weight of pupils to June 30, 2015, and authorized the LCHC to identify any programs, practices, and studies that would address the needs of children in Nevada to maintain a healthy weight ([Exhibit T](#)).
- Alicia Chancellor Hansen, M.S., Chief Biostatistician, Office of Health Statistics and Surveillance, HSPER, Health Division, DHHS, provided background information on Assembly Bill 354 (Chapter 414, *Statutes of Nevada 2007*). She reported on the

outcome of a meeting held with chief nurses from all 17 school districts. Ms. Hansen summarized the timeline for collection of the height and weight pupil data and the sampling methodology. Her testimony included charts representing the 2007-2008 statewide analysis of height and weight data by body mass index percentile groups, gender, and grade. Ms. Hansen reported on the importance of data collection and provided a list of ongoing considerations (see [Exhibit U](#)).

Responding to Chair Wiener's inquiry regarding the "not research quality data" listed in the ongoing considerations, Ms. Hansen stated that the data is considered "not research quality" due to schools not having access to calibrated scales and other equipment used for obtaining students' height and weight information.

- Jennifer Hadayia, M.P.A, Public Health Program Manager, Washoe County District Health, provided a Microsoft PowerPoint presentation ([Exhibit V](#)) and a copy of the Washoe County District Health Department's *EPI-News* report on "Childhood Overweight and Obesity in Washoe County-2009" ([Exhibit V-1](#)). She reviewed data results obtained from Washoe County school children in 2007-2008 and 2008-2009, reported on how the data has been used in the community, and discussed opportunities for expanded data collection.
- Assemblyman Mo Denis, Clark County Assembly District No. 28, testified on the importance of A.B.191. As sponsor of A.B. 191, he stated that the bill extended the sunset date for legislation passed in 2007. Mr. Denis noted a special interest in the study due to the higher rate of diabetes and childhood obesity in the Hispanic community.
- Lawrence K. Sands, previously identified, provided written testimony ([Exhibit W](#)) and noted the prevalence of obesity in children had doubled in the past 20 years. Dr. Sands reported on the SNHD and the Clark County School District's foundation for a collaborative data sharing process. He discussed some of the sampling results and the fact that they were slightly higher than the 2006 national rates. Concluding, Dr. Sands stated that data would be used to monitor trends, guide local planning activities, and compete for grant funding to support and implement interventions to improve health in Clark County's youth.

Discussion ensued between Chair Wiener and Dr. Sands regarding the statics provided and possible access to funding for interventions and education. Discussion also focused on the continuity of surveillance between different age groups to determine trends, along with the need to have a community level of surveillance.

- Donnell Barton, Director of Child Nutrition Services, Department of Education, testified regarding a May 28, 2009, letter sent to district superintendents from Assemblywoman Debbie Smith, Washoe County, District No. 30 and Chair Wiener, which requested four policy changes and a performance measure for school districts ([Exhibit X](#)). The requested policy changes included: (1) increased participation in

school breakfast; (2) elimination of the reduced-price meal category; (3) use of Provision II whenever practical; and (4) partnerships with community-based organizations for the Summer Food Service Program. Ms. Barton provided a summary of the performance measure which included requests for:

1. Comparing the number of children participating in the free or reduced meals over the last five years;
2. The amount of funds left in Washington D.C. due to qualified students not participating;
3. Actual dollars sent to Nevada to provide school meals;
4. A list of schools where breakfast programs were implemented compared to the previous year;
5. A brief description of school district activities in previous years leading to an increase or decrease in school breakfast participation; and
6. A report on the Summer Food Service Program that tracks the number of children served by district; efforts that resulted in success; and any obstacles that hindered success.

Continuing, Ms. Barton presented a summary of the information provided by Carson City, Clark, Nye, and Washoe County School Districts. She reported that there were 466,137 meals provided and \$1.3 million in funds received for the Summer Food Service Program this year.

- Chair Wiener inquired about the increase in Clark County schools that receive fresh fruit and vegetables and the total number of schools that qualified. She also asked about the “Three Square” backpack program.
- Ms. Donnell responded that the schools receiving fresh fruit and vegetables had increased from four to six and that a total of 100 schools in Clark County qualified for the program. She stated that Three Square was a backpack program but was not federally funded.

DISCUSSION AND ADOPTION OF A WORK PLAN TO GUIDE THE LCHC IN COOPERATING WITH THE STATE BOARD OF PHARMACY, THE STATE BOARD OF MEDICAL EXAMINERS, AND THE STATE BOARD OF OSTEOPATHIC MEDICINE TO CONDUCT A 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*)

- Assemblyman Mo Denis, previously identified, provided brief introductory remarks on the issue of prescription narcotic drug abuse and the scope of the problem. He introduced A.B. 326 because of some of his constituents’ experiences with prescription drug addiction. Assemblyman Denis reported on his efforts along with the State Board of Pharmacy to create training for doctors and pharmacists on the use of the prescription database and to review enforcement issues.

- Jennifer Chisel, Senior Research Analyst, Research Division, LCB, offered her assistance as the assigned primary staff and provided an overview of the study on the abuse of prescription drugs ([Exhibit F](#)).
- Douglas C. Cooper, CMBI, Interim Executive Director and Chief of Investigations, State Board of Medical Examiners, reported on statistics regarding over-prescribing between 2005 and 2009 ([Exhibit Y](#)). He explained his office is complaint-driven and does not seek out physicians who are over-prescribing narcotic drugs.
- Larry L. Pinson, Executive Secretary, State Board of Pharmacy, provided national and State numbers on the use of prescription narcotic drugs ([Exhibit Z](#)). He expressed his concern with the public misconception that prescription drugs are safe. Mr. Pinson reported on the Controlled Substance Prescription Abuse Prevention Task Force (Task Force), which is a database that shares prescription information among doctors and pharmacists. He noted the Task Force is funded by federal grants and the State Board of Pharmacy. Mr. Pinson explained the Task Force receives controlled substance prescription records weekly from pharmacists and dispensing practitioners. Staff then filters the data and if a patient sets off enough “red flags,” the Task Force sends a letter to each practitioner and pharmacy the patient has visited. He added that the professionals determine how to handle the patient; the information is not provided to law enforcement agencies. Mr. Pinson indicated there is one intervention officer who assists in referring treatment when appropriate. Concluding, he stated that Carolyn J. Cramer, General Counsel, State Board of Pharmacy, would present items that would be useful to the Task Force.
- Carolyn J. Cramer, General Counsel, State Board of Pharmacy, cited federal law that provides basic rules for prescribing physicians and pharmacists dispensing controlled substances. She provided suggestions that would strengthen the Task Force and assist in future discussions with the LCHC regarding a solution to monitoring and addressing the abuse of prescription drugs ([Exhibit AA](#)). Her suggestions included:
 1. Implementing regulations that would mandate all pharmacies have Internet access;
 2. Drafting legislation to amend NRS 639.23507 to require doctors to review patient profiles before issuing controlled substance prescriptions;
 3. Providing legislative support of Board of Pharmacy regulation changes regarding the requirements to remove controlled substances from dispensing practitioners who do not report to the Task Force; and
 4. Continuing education requirements for all controlled substance registrants.
- Dianna Hegeduis, Esq., Executive Director-Board Counsel, State Board of Osteopathic Medicine (Board), reported the Board planned a proactive approach and would be more aggressive in this area.

REVIEW OF THE LAWS AND PRACTICES RELATING TO THE ADMINISTRATION OF DANGEROUS DRUGS BY MEDICAL ASSISTANTS

- Sara L. Partida, previously identified, presented a synopsis of the role and supervision of medical assistants in Nevada. Her testimony included a definition of “medical assistant” and she reported that Nevada law does not require certification or licensure of medical assistants. Ms. Partida noted that some organizations offer voluntary certification of medical assistants but such certification is not required for employment in Nevada. She cited *Nevada Administrative Code* (NAC) 630.230, which provides that a physician or physician assistant shall not allow any person to act as a medical assistant in the treatment of a patient unless the medical assistant has sufficient training and that the physician or physician’s assistant must provide adequate supervision of a medical assistant who is employed or supervised by the physician or physician assistant. Ms. Partida commented that Nevada law does not contain any further references to the scope of services that may be provided by medical assistants or the supervision of medical assistants. She provided a history on the provisions of Chapter 454 of NRS relating to the possession, administration, and dispensing of dangerous drugs. Ms. Partida stated that the State Board of Medical Examiners had held workshops relating to the adoption of permanent regulations governing medical assistants and an initial draft was submitted to the Legal Division of the LCB. She advised that the Legal Division had several concerns and will continue to work with the Board in revising the regulation.
- Marsheilah D. Lyons, previously identified, presented examples of other states’ regulation of medical assistants ([Exhibit BB](#)). Ms. Lyons commented that the information received from Arizona, California, Florida, Maryland, New Jersey, Ohio, and South Dakota, mainly addressed the delegation of responsibilities by physicians rather than outlining a medical assistant’s duties. She provided two handouts ([Exhibit BB-1](#) and [Exhibit BB-2](#)) that describe an occupational analysis of a certified medical assistant and standards and guidelines for the accreditation of educational programs for medical assistants.

Responding to Chair Wiener’s inquiry about the number of medical assistants who work in Nevada and where they work, Ms. Lyons stated that presently the majority of medical assistants work in physicians’ offices.

- Larry L. Pinson, previously identified, testified that this issue is more closely aligned with the medical and nursing boards. He opined that the duties, training, and education of medical assistants need to be defined in statute.
- Tracey D. Green, previously identified, stated that medical assistants are most often working in private physician offices and in ancillary offices, outside of hospital facilities.

- Douglas C. Cooper, previously identified, responding to Chair Wiener's question regarding other unregulated paraprofessionals, scope of practice, and level of standards for medical assistants, stated that the medical assistants were the only paraprofessionals that he was aware of that were not regulated. He offered the possibility of physician responsibility for the medical assistant's scope of duties, which could include the issue of administering medicine and injections. Mr. Cooper noted that the final draft of regulations forwarded to the LCB included medical assistants administering medicine and stated there were conflicts involving this issue. He reported other states that regulated and certified medical assistants allowed them to administer medicine.
- Dianna Hegeduis, previously identified, reported the Board has submitted regulations to the Legal Division of LCB that defined physician's delegating the services of medical assistants and called for specific training for medical assistants. She reiterated that the statute did not give medical assistants the ability to administer injections and said it would have to be addressed in the next legislative session. Ms. Hegeduis commented that in drafting their regulations they looked to Florida as an example. She noted a workshop on the regulation had been scheduled for November 30, 2009.
- Debra Scott, M.S.N., R.N., F.R.E., A.P.N., Executive Director, State Board of Nursing, provided a brief explanation of how medical assistants interface and impact nurses. She stated that nurses may be required to supervise medical assistants and other unlicensed assistive personnel, which include emergency room technicians, x-ray technicians, and nuclear medical technicians. Ms. Scott provided suggestions to assist nurses in their interaction with supervised unlicensed assistive personnel. She requested a defined scope of practice supported by formal training and national certification to allow nurses to adequately supervise medical assistants in appropriate settings. Ms. Scott commented there are problems in Nevada where medical assistants are identifying themselves as nurses which violates State law.

CONSIDERATION OF REGULATIONS PROPOSED OR ADOPTED BY CERTAIN LICENSING BOARDS PURSUANT TO NRS 439B.225

LCB File No. 016-09, State Board of Pharmacy

LCB File No. 038-09, Board of Medical Examiners

LCB File No. 119-09, State Board of Pharmacy

LCB File No. 120-09, State Board of Pharmacy

LCB File No. 122-09, State Board of Pharmacy

LCB File No. 131-09, Board of Psychological 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. The full text of her presentation is available as [Exhibit CC](#).

- Chair Wiener asked Ms. Partida to review the LCHC duties regarding consideration of regulations on behalf of the new LCHC members.

At the request of Chair Wiener, Carolyn Cramer, previously identified, explained regulations submitted by the State Board of Pharmacy. She stated that LCB File No. 016-09, provides for 12 hours of in-service training which includes one hour of Nevada law and noted that the program had already been implemented. Ms. Cramer explained that LCB File No. 119-09 made changes to allow for the increase of fees in anticipation that grant funding would not be available in the future for the Task Force. Concluding, she noted that LCB File Nos. 120-09 and 122-09 would remove the requirement that a consulting pharmacist be provided for nurse practitioners and physician's assistants.

- Assemblywoman Spiegel asked how long it had been since a fee increase had been implemented and if there had been any discussion with the pharmacists about the increase.
- Larry Pinson, previously identified, stated he was sure the fee had not increased in the last 30 years and commented that no one had objected to the increase.

In response to Vice Chair Pierce's question regarding other practitioners who could prescribe medication, Mr. Pinson stated that physician's assistants, nurse practitioners, dentists, and podiatrists could prescribe medication.

Discussion ensued between Chair Wiener and Douglas Cooper, previously identified, regarding LCB File No. 038-09. Mr. Cooper clarified that the regulation would change the requirements for Physician's Assistants to renew their licenses.

Further discussion ensued between Ms. Partida and Chair Wiener regarding the process for the review of the regulations.

- Chair Wiener requested that LCB File No. 131-09 be presented at the next meeting of the LCHC for review.

PUBLIC COMMENT

- Stuart L. Posselt, private citizen, commented on the formation of health districts for counties less than 400,000 (see Agenda Item VI). He stated that Douglas County had reviewed the draft of S.B. 278 and opined that the county voted to support the legislation with little discussion of funding. Mr. Posselt stated that his purpose in testifying was to request that funding sources be included in the discussion of the study, and noted his reservations about the burden that would be put on taxpayers for funding. Mr. Posselt requested that public meetings on this issue be held in Douglas County.

- Jeanette K. Belz, M.B.A., J. K. Belz and Associates, asked for clarification on the interim meeting notification process and the hearings on the five studies. She wondered if there would be any subcommittee hearings and the process for discussion by interested parties.

Discussion ensued between Ms. Belz and the Chair regarding the LCHC meeting process. Chair Wiener stated that today's presenters would constitute the core group who would work closely with the Committee. She explained that interested parties should contact the core groups who would return with proposals to the LCHC. Chair Wiener assured Ms. Belz there would be at least one more extensive consideration and substantial deliberation by the LCHC on the issues heard today.

ADJOURNMENT

There being no further business to come before the Committee, the meeting was adjourned at 5:01 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 document titled “List of Future Meeting Dates for the Legislative Committee on Health 2009-2010 Interim” provided by Marshielah D. Lyons, Principal Research Analyst, Research Division, LCB.

[Exhibit C](#) is a memorandum dated November 4, 2009, to Chairwoman Valerie Wiener and Members of the Legislative Committee on Health Care (LCHC), from Marsheilah D. Lyons, Principal Research Analyst, Research Division, LCB, titled “Activities and Responsibilities of the Legislative Committee on Health Care.”

[Exhibit D](#) is a memorandum dated November 4, 2009, to Chairwoman Wiener and Members of the LCHC, from Sara L. Partida, Principal Deputy Legislative Counsel, Legal Division, LCB, titled, “Information Concerning the Review of Regulations Proposed or Adopted by Certain Licensing Boards Pursuant to NRS 439B.225.”

[Exhibit E](#) is a document titled “Licensing Boards Whose Regulations are Subject to the Review of the Legislative Committee on Health Care,” provided by Sara L. Partida, Principal Deputy Legislative Counsel, Legal Division, LCB.

[Exhibit F](#) is a document provided by Marsheilah D. Lyons, Principal Research Analyst, Research Division, LCB, which outlines the studies and staff assignments for the 2009-2010 Interim.

[Exhibit G](#) is report titled *Department of Health and Human Services, Nevada State Health Division, H1N1 Program Overview*, offered by Tracey D. Green, M.D., State Health Officer, Health Division, Department of Health and Human Services (DHHS).

[Exhibit H](#) is the written testimony of Lawrence K. Sands, D.O., M.P.H., Chief Health Officer, Southern Nevada Health District (SNHD), dated November 4, 2009.

[Exhibit I](#) is a table titled “State of Nevada Health Division, Recommendations to the Hepatitis C Outbreak, Policy and Procedures, Regulations and Statutes,” updated November 2, 2009, provided by Marla McDade Williams, Chief, Bureau of Health Care Quality and Compliance, Health Division, DHHS.

[Exhibit J](#) is a Microsoft PowerPoint presentation titled “Billed Charges and Patient Impact, Legislative Health Committee” dated November 4, 2009, presented by Bobbette Bond, Legislative Liaison, and Jeff Ellis, Member, Nevada Health Care Policy Group, Health Services Coalition.

[Exhibit J-1](#) is a document titled “Out-of-network costs cripple many patients financially,” by Paul Raeburn, *Kaiser Health News*, posted on the McClatchy Washington Bureau web page, Thursday, August 20, 2009, provided by Bobbette Bond, Legislative Liaison, Health Services Coalition.

[Exhibit K](#) is the written testimony of Valerie M. Rosalin, R.N., Director, Consumer Health Assistance, Governor’s Office, dated November 4, 2009.

Bill M. Welch, President and Chief Executive Officer, Nevada Hospital Association, submitted the following exhibits:

[Exhibit L](#) is written testimony titled “Nevada Hospital Association, S.C.R. 39.”

[Exhibit L-1](#) is a document titled “Decreasing Access to Health Care Services in Nevada.”

[Exhibit L-2](#) is a Microsoft PowerPoint presentation titled “Work Plan Discussion–S.C.R. 39,” dated November 4, 2009.

[Exhibit M](#) is the written testimony of Karen Massey, M.H.A., F.A.C.M.P.E., C.P.M.S.M., Chief Administrative Officer, Northern Nevada Emergency Physicians, dated November 4, 2009.

[Exhibit N](#) is a letter dated October 27, 2009, to Senator Valerie Wiener, from Mary Walker, C.P.A., President, Walker and Associates.

[Exhibit N-1](#) is a document titled “Rural Public Health District Study Conceptual Mechanics of the Study, Interim Legislative Session 09-10,” provided by Mary Walker, C.P.A., President, Walker and Associates.

[Exhibit O](#) is suggested revisions to Senate Bill 322, titled “S.B. 322” provided by Chris Giunchigliani, Clark County Commissioner, dated March 16, 2009.

[Exhibit O-1](#) is a two-page handout titled “HIV/AIDs Programs and Outreach” and “Air Quality Management,” offered by Chris Giunchigliani, Clark County Commissioner.

[Exhibit P](#) is the written testimony of Lawrence K. Sands, D.O., M.P.H., Chief Health Officer, SNHD, dated November 4, 2009.

[Exhibit Q](#) is a report titled *Sustaining the Community Coalition System for Prevention in Nevada Through Legislative Action*, dated November 4, 2009, presented by Belinda Thompson, Director, Goshen Community Development Coalition.

[Exhibit R](#) is the written testimony of Deborah A. McBride, M.B.A., Agency Director, Substance Abuse Prevention and Treatment Agency, Division of Mental Health and Developmental Services, DHHS, dated November 4, 2009.

[Exhibit S](#) is the written comments of Marji Paslov Thomas, Principal Research Analyst, Research Division, LCB.

[Exhibit T](#) is the written testimony of Mindy Martini, Senior Research Analyst, Research Division, LCB, titled “Comments for A.B. 191,” dated November 4, 2009.

[Exhibit U](#) is a Microsoft PowerPoint presentation titled *Height and Weight of Nevada Students*, provided by Alicia Chancellor Hansen, M.S., Chief Biostatistician, Office of Health Statistics and Surveillance, Bureau of Health Statistics, Planning and Emergency Response, Health Division, DHHS.

[Exhibit V](#) is a Microsoft PowerPoint presentation titled “Washoe County School Age BMI,” dated November 4, 2009, presented by Jennifer Hadayia, M.P.A., Public Health Program Manager, Washoe County District Health Department.

[Exhibit V-1](#) is an article from the *EPI-News*, Vol. 29, No. 11, Washoe County District Health Department titled “Childhood Overweight and Obesity in Washoe County–2009,” dated September 4, 2009, provided by Jennifer Hadayia, M.P.A, Public Health Program Manager, Washoe County District Health.

[Exhibit W](#) is the written testimony of Lawrence K. Sands, D.O., M.P.H., Chief Health Officer, SNHD, dated November 4, 2009.

[Exhibit X](#) is the written remarks of Donnell Barton, Director of Child Nutrition Services, Department of Education.

[Exhibit Y](#) is a chart titled “Prescribing Cases Opened 2005-2009,” provided by Douglas C. Cooper, CMBI, Interim Executive Director and Chief of Investigations, State Board of Medical Examiners.

[Exhibit Z](#) is a document titled “Prescription Drug Abuse in Nevada,” submitted by Larry L. Pinson, Executive Secretary, State Board of Pharmacy.

[Exhibit AA](#) is the written testimony of Carolyn J. Cramer, General Counsel, Nevada Board of Pharmacy, dated November 4, 2009.

[Exhibit BB](#) is a memorandum dated November 2, 2009, to Senator Valerie Wiener, Chairperson and Members of the Legislative Committee on Health Care, from Marsheilah D. Lyons, Principal Research Analyst, Research Division, LCB, titled “Regulating Medical Assistants in Other States.”

[Exhibit BB-1](#) is a document titled “Occupational Analysis of the CMA (AAMA)” from the American Association of Medical Assistants (www.aama-ntl.org), provided by Marsheilah D. Lyons, Principal Research Analyst, Research Division, LCB.

[Exhibit BB-2](#) is a report titled *Standards and Guidelines for the Accreditation of Educational Programs in Medical Assisting*, by the Commission on Accreditation of Allied Health Education Programs, submitted by Marsheilah D. Lyons, Principal Research Analyst, Research Division, LCB.

[Exhibit CC](#) is a document provided by Sara L. Partida, Principal Deputy Legislative Counsel, Legal Division, LCB, titled “Agenda Item XI: Consideration of Regulations Proposed or Adopted by Certain Licensing Boards Pursuant to NRS 439B.225,” dated November 4, 2009.