The Senate Committee on Commerce, Labor and Energy was called to order by Chair James A. Settelmeyer at 8:02 a.m. on Friday, February 6, 2015, in Room 2135 of the Legislative Building, Carson City, Nevada. The meeting was videoconferenced to Room 4412 of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. Exhibit A is the Agenda. Exhibit B is the Attendance Roster. All exhibits are available and on file in the Research Library of the Legislative Counsel Bureau.

COMMITTEE MEMBERS PRESENT:

Senator James A. Settelmeyer, Chair
Senator Patricia Farley, Vice Chair
Senator Joe P. Hardy
Senator Becky Harris
Senator Mark A. Manendo
Senator Pat Spearman

COMMITTEE MEMBERS ABSENT:

Senator Kelvin Atkinson (Excused)

STAFF MEMBERS PRESENT:

Marji Paslov Thomas, Policy Analyst
Dan Yu, Counsel
Christine Miner, Committee Secretary

OTHERS PRESENT:

Misty Grimmer, State Contractors’ Board
Margi Grein, Executive Officer, State Contractors’ Board
Vance Farrow, Office of Economic Development, Office of the Governor
Kelly Martinez, City of Las Vegas
Joan Hall, President, Nevada Rural Hospital Partners
Paul Moradkhan, Las Vegas Metro Chamber of Commerce
Douglas Geinzer, CEO, Las Vegas HEALS
Chair Settelmeyer:
We will open the hearing on Senate Bill (S.B.) 50.

**SENATE BILL 50**: Makes various changes to the regulation of contractors by the State Contractors' Board. (BDR 54-387)

Misty Grimmer (State Contractors’ Board):
I have submitted an overview of the functions of the Nevada State Contractors’ Board (NSCB) and how it relates to the State constituents, “Nevada State Contractors’ Board Constituent Services” (Exhibit C).

Margi Grein (Executive Officer, State Contractors’ Board):
Senate Bill 50 addresses a number of housekeeping items for the State Contractors’ Board. I have submitted a paper, “Senate Bill 50 Overview Nevada State Contractors’ Board” (Exhibit D). Section 1 of the bill seeks to remove language establishing an insulation advisory committee. This committee has served its purpose. Section 2 amends Nevada Revised Statute (NRS) 624.260. It adds language to provide more appropriate licensing for corporations of public benefit such as Habitat for Humanity. Section 3 adds clarity for persons who may be required to demonstrate financial responsibility as a licensed applicant under NRS 624.263. Section 4 of the bill incorporates current criteria under NRS 624.260, subsection 1, detailing how a licensee or applicant may qualify based on the person’s knowledge and experience. Section 5 makes technical changes to codes that workmanship standards must conform to in the absence of a local authority adopting its own codes. This section replaces the term “Uniform Building Code” with “International Building Code.” Section 6 addresses the injured person’s eligibility to recover damages. It removes reference to the injured person being “the spouse of,” and replaces it with “related by blood or marriage to.” Circumstances with claims to the Residential Recovery Fund have prompted the changes to statute.
Senator Hardy:
In section 6, is there a degree of consanguinity in the “blood or marriage” terminology?

Ms. Grein:
It is meant to refer to the spouse. It needs clarification.

Chair Settelmeyer:
In the amendment, it is necessary to clarify that, or the Committee will make its own clarification on the term.

Senator Farley:
Section 3 indicates that financial responsibility be extended to a qualified employee (QE) acting on the contractor’s license. When a contractor hires someone to supervise a trade, the hired person acts as the QE. This bill would place a financial burden on that person. That may prevent a person, who is not the owner of the company, from taking on that responsibility and eliminate this person as a QE.

Ms. Grein:
We have had trouble with some QEs as the qualifier on a new license. This person may have had a revoked license or serious problems qualifying for that license. I will research your concerns.

Senator Farley:
A person who has had a license and financial problems in the last 10 years is not financially responsible for the company, but is a qualified manager overseeing a trade. That is the standard needed to be met to be a QE on a license. Otherwise, the contractor must hire partners to start new trades to grow the business. As a contractor, I do not want to do this.

Chair Settelmeyer:
In changing the name of an entity, will this create a universal code change or will the local purview remain in place?

Ms. Grein:
The local purview will remain the standard.
Chair Settelmeyer:
With no further testimony, I will close the hearing on S.B. 50 and open the hearing on Senate Bill 68.

SENATE BILL 68: Revises provisions governing professions. (BDR 54-290)

Vance Farrow (Office of Economic Development, Office of the Governor):
Senate Bill 68 came about as a result of 2 years of conversations. I thank Senator Hardy for his guidance and leadership. Several boards have been involved in the development of the language for sustainability and fairness. I have submitted a PowerPoint presentation, “Expedited Health & Medical Professional License Endorsement for Nevada” (Exhibit E).

Senate Bill 68 authorizes the Board of Medical Examiners and the State Board of Osteopathic Medicine to expedite medical professional licensure. It implements a 60-day timeline, and the requirements for medical professionals in allopathic and osteopathic medicine and several other professions in health care. Nevada has a significant shortage of medical professionals in various health and medical care fields. The ranking comparison of Nevada to the national per capita average is reported in a 2013 study by Dr. John Packham. The update of this study will soon be published and this will show the current shortcomings in Nevada. The in-state educational system in Nevada does not meet these needs. It will take 10 years to satisfy the health care needs of the current population. The population is growing, and we need to outpace that growth. The recruitment of health and medical professionals to Nevada requires focus, given proposed expansions to the medical schools throughout the State.

The Affordable Care Act has impacted the number of Nevadans enrolled in medical plans. The Medicare population will steadily increase over the next 20 years. Expedited licensure will help address these growing needs. There are several diagrams in Exhibit E which show the population and medical sector growth trends, and the provider and medical job comparisons of Nevada to the United States. These comparisons demonstrate the need for growth in the medical professions. Recruiting efforts for qualified medical professional instructors will help achieve the goals of producing the licensees needed to fill the gaps in this profession.
Senate Bill 68 would create new provisions for granting Nevada health and medical professional licensure with expedited 60-day timelines among all Nevada health and medical licensing boards.

Chair Settelmeyer:
Do NRS 630 through 641C and NRS 644 of this bill affect only the physicians and podiatrists, not all professions?

Mr. Farrow:
It would include all professions stated in those chapters of the NRS, including veterinarians and athletic trainers.

Senator Hardy:
Are NRS 630 and 633 the same thing, or will they be, if the bill passes?

Mr. Farrow:
Once we identify the appropriate accrediting body providing the governance, then it would be the same. The Board of Medical Examiners and the State Board of Osteopathic Medicine provided the guidance to improve that language.

Chair Settelmeyer:
Are veterinarians affected? The legal division should clarify this.

Dan Yu (Counsel):
The way the bill is drafted, it only affects three boards—NRS 630 regulates physicians, NRS 633 regulates practitioners of osteopathic medicine and NRS 635 regulates podiatry. Not all boards in those chapters between the ranges NRS 630 to 641C and NRS 644 are affected. According to testimony, those would include other chapters regulating professions such as nursing, veterinarian, occupational therapy, and so on. Those boards are not affected by the provisions of this bill.

Chair Settelmeyer:
If that is not your intent, you may want to draft an amendment.

Senator Hardy:
I would like to see the regulations expanded to include the boards not named in the bill.
Senator Spearman:
Does this include spouses of veterans or military personnel who are stationed in Nevada?

Mr. Farrow:
The proposed Assembly Bill 89 addresses this issue for the military and their spouses.

Assembly Bill 89: Makes various changes to provisions relating to certain professions. (BDR 53-295)

Kelly Martinez (City of Las Vegas):
The City of Las Vegas supports S.B. 68. The reciprocal licensing privileges for medical professionals will attract skilled physicians from across the Country to the Las Vegas Valley. This will positively impact the medical district located in downtown Las Vegas. The medical corridor is an important part of the City’s economic development strategy and S.B. 68 will help the continued revitalization efforts of the downtown area.

Joan Hall (President, Nevada Rural Hospital Partners):
The Nevada Rural Hospital Partners (NRHP) support S.B. 68. The proposed 60-day timeline to expedite licensing is very important for rural Nevada to attract out-of-state providers. In some communities, losing one doctor is a 50 percent loss of the available medical providers.

Paul Moradkhan (Las Vegas Metro Chamber of Commerce):
The Chamber supports S.B. 68, which will help Nevada attract additional physicians. A stronger, robust health care system is important to our statewide business community as it impacts our members and their employees. This bill will help strengthen the State’s health care sector, and support economic development efforts related to medicine. Nevada’s doctor-to-patient-ratio shortfall is a statewide issue. It impacts north and south rural regions of our State. This legislation would be another resource for Nevada to help address the need for more physicians. Other states are facing shortfalls in this area and Nevada needs to be competitive in attracting quality medical personnel. This bill will help support the City of Las Vegas in its efforts to improve its medical district. The Chamber supports this effort.
Douglas Geinzer (CEO, Las Vegas HEALS):
Las Vegas HEALS represents health care organizations that employ over 24,000 health care professionals. We support S.B. 68. Current physician licensing is a barrier in attracting talented physicians to Nevada. To facilitate four medical schools by 2017, it is imperative to attract faculty physicians to teach and to establish medical practices.

Bryan Gresh (State Board of Osteopathic Medicine):
The Osteopathic Board appreciates the efforts of Mr. Farrow and Senator Hardy for working on this bill. We offer an amendment that Mr. Farrow supports, “Amendment to SB 68 Proposed by Nevada State Board of Osteopathic Medicine” (Exhibit F). We have been granting license by endorsement since 2007. This amendment seeks to avoid disruption of our existing process by acknowledging its existence and by adding one improvement. We will commit to timely finalization of an endorsement application once we have been supplied with a completed fingerprint report.

Keith Lee (Board of Medical Examiners):
We have been working more than 2 years with Senator Hardy and Mr. Farrow on this bill. It is important to attract qualified physicians and other health care practitioners to Nevada. The Medical Examiners Board balances several factors when considering an applicant for licensure in Nevada. It has strict standards to ensure the applicant meets the highest qualifications possible. Mr. Farrow has approved the amendment before you, “Proposed Amendment to SB 68 Submitted by Nevada State Board of Medical Examiners” (Exhibit G). This amendment is to ensure the provisions in NRS 630.1605 stay in place. The Medical Examiners Board has been granting license by endorsement since 2003. In 2007, it was changed and this change made it more difficult to do this. It was changed again in 2009 to rectify the license-by-endorsement issue. The purpose of the amendment is to continue to recognize that NRS 630.1605 be an avenue for licensure. The second part of the amendment is to correct the language of the accrediting bodies in Canada.

The Medical Examiners Board has been working with Senator Hardy on an interstate licensing compact. The Federation of State Medical Boards has been working for several years in developing a scheme that will lower the time frames and some of the procedural barriers for licensure. Twenty states, including Nevada, have introduced or will introduce legislation this year on that
compact. This will add another element to attract qualified and quality health care providers to our State.

Barbara Longo (Executive Director, State Board of Osteopathic Medicine):
The Osteopathic Board has been licensing by endorsement since 2007. Twenty percent of our annual applicants are licensed through endorsement.

Senator Hardy:
Should the fingerprint issue be included in the State Board of Medical Examiners amendment as well?

Mr. Lee:
The State Board of Medical Examiners has the same fingerprinting issue. There are two barriers to rapid licensure: first is an incomplete application; the second is the requirement for fingerprint cards. We have no control over the fingerprint process.

Senator Hardy:
Physical fingerprinting cards are obsolete. The process is now instantaneous and extracted electronically.

Mr. Lee:
That is correct. The fingerprint processing by the law enforcement agency, and the returning of the results, is the time-consuming element.

Chair Settelmeyer:
Mr. Lee, please review your amendment to explore if it could be updated to include the portion from the State Board of Osteopathic Medicine. Resubmit it to our work session for consideration.

Mr. Farrow, as the sponsor of the bill, have you had adequate time to review the amendments, and do you agree with them?

Mr. Farrow:
The information I received from the boards is acceptable.

Senator Hardy:
Would you like to see one amendment that accomplishes both issues, signed by both boards?
Mr. Farrow:
That would be acceptable.

Chair Settelmeyer:
Senator Hardy, would you like the other amendment to expand the scope of the bill?

Senator Hardy:
Yes.

Chair Settelmeyer:
I have written testimony from the Guinn Center for Policy Priorities on S.B. 68, “Legislative Testimony Senate Bill 68: Provisions Governing Professions” (Exhibit H). We will close the hearing S.B. 68 and schedule it for work session and open the hearing on S.B. 84.

SENATE BILL 84: Includes certain alcohol and drug abuse counselors and problem gambling counselors in the definition of “provider of health care” for purposes of various provisions relating to healing arts and certain other provisions. (BDR 54-389)

Steven Burt (Secretary Treasurer, Board of Examiners for Alcohol, Drug and Gambling Counselors):
The Board of Examiners for Alcohol, Drug and Gambling Counselors is presenting S.B. 84 today. Fifteen months ago, the Division of Health Care Financing and Policy was reorganizing the Substance Abuse Prevention and Treatment Agency (SAPTA) funded agencies to ensure services in alcohol, drug and gambling be acceptable to Medicaid. With the shift of this business mode to move away from grant funding, the Division of Health Care Financing and Policy was looking for authority to bill for services of alcohol, drug and gambling clients. They discovered these services were not defined as health care in NRS 629.031. An exception has since been made and we are being reimbursed at the agency level. I am also the executive director of The Ridge House in Reno for our alcohol and drug services. The Alcohol, Drug and Gambling Board moved forward with this bill to define it, and to benefit other health insurance entities wanting reimbursement for substance abuse services under federal parity laws. This bill defines alcohol, drug and gambling services as behavioral health care in the State.
Senator Hardy:
Do the training, credentialing, continuing medical education and licensing exist in statute?

Mr. Burt:
Pursuant to NRS 641C, all the licensing certification requirements for the realm of alcohol, drug and gambling counselors are contained in the regulations of the Board.

Senator Hardy:
Is continuing medical education included?

Mr. Burt:
Yes.

Senator Hardy:
Do you have renewal requirements that simulate those for a health care provider?

Mr. Burt:
Yes, in NRS 641 we have the full continuing educational yearly renewal requirements. These include compliant requirements, scopes of practice and scopes of confidence.

Senator Farley:
Do you have sufficient licensed social workers, or is this going to create delays while individuals are licensed?

Mr. Burt:
The Alcohol, Drug and Gambling Board is fully staffed at the agency level and the nonprofit agency level.

Senator Farley:
Does this impact the privately owned drug centers that deal with people in recovery?

Mr. Burt:
It will affect them in a positive way. Health insurance companies will be looking for authority to allow those professionals to bill for their services.
Senator Hardy:
Where do we stand with endorsement, and do we need to include that in NRS 630 through 641 and get more counselors in the State?

Mr. Burt:
We have a component in our regulations called a provisional license for a new person in the State who meets our requirements for education. We give them time to pass our oral and written application standards.

Agata Gawronski (Executive Director, Board of Examiners for Alcohol, Drug and Gambling Counselors):
The provisional license is given for 1 year. We are proposing to change it to 6 months. There is adequate time for these individuals to meet the requirements of the State.

Senator Hardy:
Do you want to be included in S.B. 68?

Chair Settelmeyer:
In previous discussions, it has been found that in this particular field, there are many differences from state to state. It may be problematic to include the counselors in the other bill.

Mr. Burt:
The State requires a person have a bachelor’s degree for this certification. The state of California does not. This would be a significant difference.

Kim Frakes (Executive Director, Board of Examiners for Social Workers):
The Board of Examiners for Social Workers requests an amendment to S.B. 84 to include licensed social workers under NRS 641B, (Exhibit I). A list of licensees and their employers, “NV Social Work Board List of Licensees and Corresponding Employers” (Exhibit J), demonstrates that well over 50 percent and up to 70 percent of our licensees provide invaluable services in the field of health care. These include mental health therapy, in-home and foster care, Veterans’ Administration services and client-patient case management.

Senator Spearman:
I am pleased these services include a liaison with the Veterans’ Administration.
Senator Farley:
Would social workers be reimbursed under Medicaid?

Ms. Frakes:
Clinical social workers receive funds, and I assume some funding comes from Medicaid.

Senator Hardy:
Would all social workers be health care workers under this amendment?

Ms. Frakes:
Licensed clinical social workers (LCSW) provide mental health services. Licensed associate social workers (LASW) provide valuable case management for individuals in agency settings that provide health care or in hospitals. Licensed independent social workers (LISW) are individual practitioners that liaison with other social workers and are members of multidisciplinary teams. We want all social workers defined as health care professionals.

Senator Hardy:
What are their continuing education requirements for health care?

Ms. Frakes:
Licensed Social Workers (LSW) and LASW are required to complete 30 hours of continuing education. Our LCSW and LISW are required to complete 36 hours every 2 years and must pursue continuing education in their areas of practice.

Joan Hall (Nevada Rural Hospital Partners):
Nevada Rural Hospital Partners (NRHP) supports S.B. 84. There is a mental health crisis in rural Nevada. The NRHP has recently received a Health Resources and Services Administration (HRSA) grant to integrate mental health into primary care in rural areas. Drug and alcohol counselors have not been reimbursed for their services. This bill will rectify that. We agree with the amendment that LSW be included.

Senator Harris:
How would making the social workers health care providers affect telemedicine in Nevada?
Ms. Hall:
Centers for Medicare and Medicaid Services (CMS) allow telemedicine at rural originating sites. The NRHP mental health care clients and long-term care clients would benefit from telemedicine. This would provide social work assessments when these are unavailable locally.

Ms. Frakes:
Licensed individuals should be covered under the telemedicine format.

Senator Settelmeyer:
Mr. Burt, have you had the opportunity to review the amendment and do you agree?

Mr. Burt:
The Board of Examiners for Alcohol, Drug and Gambling support the amendment.

Senator Spearman:
Does your organization provide liaison or “bridge effect” services for soldiers or service members who need additional counseling once released from the military? Post-Traumatic Stress Disorder (PTSD) self-medication is a concern.

Mr. Burt:
The Ridge House has a reintegration program for veterans released from prison, in which we integrate them into the community using the Veterans’ Administration mental health units as a liaison for wraparound services.

Senator Spearman:
That is for veterans released from prison. How do you counsel those who do not have a prison record?

Mr. Burt:
We refer them to the Northern Nevada Veterans Resource Center in Reno.

Dr. Hardy:
Can the Veterans Resource Center use your facility as a resource center?
Mr. Burt:
The Ridge House is using the Veterans Resource Center to help cover the housing transition costs.

Chair Settelmeyer:
With no further comment, I close the hearing on S.B. 84 and adjourn this meeting at 8:53 a.m.
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