

Minutes of Meeting - HEALTH AND WELFARE COMMITTEE - 56th
ASSEMBLY SESSION - April 13, 1971

Present: Wilson, Glaser, Homer, Prince, White, Poggione,
and Swallow

Absent: Valentine and Smalley

Guests: Assemblymen Frazzini, Lauri, and Ashworth; Senators
Wilson and Dodge; A.L. Hutchings, Chairman for NIC;
Mr. Haley, NIC; John Morman, Commissioner for NIC;
Henry Berrum, Commissioner for NIC; Maynard Yasmer,
Rehabilitation Division; Frank Holzhaun, Rehabili-
tation Division; David E. Williams, Anesthesiologist
of Reno; Richard Grundy, General Practitioner;
Robert Broadbent, Washoe Medical Society; and Nel-
son Neff, Executive Secretary of the Medical Society.

Meeting was convened by Chairman Wilson at 10:40 A.M.

A.B. 805: Provides for disciplinary action against physicians
for commercial exploitation of practice of medicine.

A sub-committee was selected to study this problem.

Assemblyman Ashworth gave a report of the study performed by
this sub-committee. (Attachment 1) He stated some of the
doctors have stopped treating NIC patients. The sub-committee
felt there should be a continued study on this problem.

A.L. Hutchings, Chairman for NIC, gave a prepared statement.
He stated NIC would agree on a fee schedule basis with the
understanding that they would notify people what they would
require for payment. (Attachment 2)

Maynard Yasmer, Rehabilitation Division, stated they supported
this bill because they are supported by NIC. It will affect
their program because they are small and the cost in the budget
and the affects of the costs would be directly related to them.

Nelson Neff, Executive Secretary of the Medical Society, stated
he was greatly opposed to this bill. NIC has never been up-to-
date with fee schedules.

Assemblyman Ashworth stated the medical profession has had
conversations trying to alleviate the problem. They are will-
ing to call a moratorium on fee schedules for 90 days.

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Assemblyman Lauri, member of the sub-committee, stated evidence proved there was just a small group of doctors involved in this. However, none of the doctors could come to an agreement so this is why this bill was introduced.

Richard Grundy, General Practitioner, concurred that problems do exist but felt this bill could not solve it. It would only make matters worse. He stated ~~there is~~ a small number of doctors in Las Vegas that have refused to take care of NIC patients, because they don't pay equal fees. He didn't feel any of these doctors would refuse an emergency case. He stated he is opposed to legislation that puts a restriction on the vast majority of people that do not need restrictions. He felt this bill would be an insult to the medical profession. All the costs of living are going up and so are expenses for doctors. He gave hospitals as an example. In one place the rates may be \$40 per day while in another area they may be \$60 per day. He felt this bill would be dangerous. NIC could say they would only pay a doctor \$1.00 for his services. If he did not accept this, and wanted more, it would be cause for him to have his license revoked. To work in his profession, he would have to leave the state. He felt there are not enough qualified doctors in the state now and this would create more of a problem of getting doctors into the state. He felt both the medical profession and NIC are under pressure now and within two or three months they will come to an agreement to this problem.

Robert Broadbent, Medical Doctor representing the Washoe Medical Society, stated he thought if he had known he could not chose who he wanted to treat, he would not have gone to medical school. Doctors in Las Vegas have so many patients they don't want to treat NIC patients. The Reno area accepts them because of competitive reasons. He felt NIC should make a more attractive offer to the doctors in the Las Vegas area so more would treat the patients. There are some 100,000 people in the Reno area with 210 doctors to treat them. There are twice that many people in the Las Vegas area with only a hand full of of doctors to treat them.

Mr. Glaser realized the problem is a shortage of doctors in Las Vegas. He wanted to know how many applied for certification last year, how many were accepted and how many refused.

Mr. Neff stated there were 60 that were accepted and none that he knew of that were refused.

Assemblyman Ashworth felt there should be a continued study of the problem. Doctors should report to some agency what they classify as a customary fee so a fee could be arrived at.

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Senator Dodge stated he did not know if this legislation could do anything to keep the service flowing. He did feel, however, that the study would be of value. NIC has agreed to pay for the study so there would be no cost to the state. He didn't feel the 90 day moratorium would be realistic. What is an equal or customary fee today, might not be equal or customary tomorrow.

David E. Williams, Anesthesiologist, stated he has been taking care of NIC patients and has accepted what NIC would pay. He felt he is a victim of inflation. He felt a lot of the problem is because NIC is still using fees from back in 1964. He stated when he first went into practice his insurance was \$225 per year. Three years later it was \$800 per year. One year ago it was \$1500 per year. He is now paying almost \$4000 per year, yet he is still getting the same pay from NIC. He was sure that if he went to his insurance company and told them he was treating NIC patients and wanted a reduced rate that he would not get it. He felt he is paid 1/3 the fee for what he gets for his other patients yet the NIC patients still get 100% care. He felt this bill would just create bad feelings.

Meeting adjourned at 11:45 A.M.

REPORT OF THE SELECT COMMITTEE ON ACR-30
DOCTORS FEES AS THEY RELATE TO THE NEVADA INDUSTRIAL COMMISSION

April 5, 1971

MEMBERS: Assemblyman Ashworth, Assemblyman Frazzini, Assemblyman Lauri, Senator Dodge, Senator Wilson, and Senator Foley.

CONCLUSIONS OF THE COMMITTEE

(1) The Committee recognizes the disparity in doctors' fees to Nevada Industrial Commission between northern Nevada and southern Nevada, particularly the anesthesiologists and orthopedic surgeons. The rates of these two groups are 35% and 37% higher in the Las Vegas area than in the Reno area. The overall variance between the two areas is 4%.

(2) Nevada Industrial Commission needs a year's study of statistics to determine if they can convert to a usual and customary fee basis. In order for the study to be valid, doctors must bill according to instructions.

(3) The Committee has determined that there is no breach of trust concerning the trust funds.

(4) The Committee determined if the rates continue at the present level and at the present rate of increase, it could seriously jeopardize the fund and cause the premium rates to rise considerably.

(5) The orthopedic surgeons and anesthesiologists in Las Vegas have acted in concert in refusing to treat NIC patients unless NIC agreed to pay their usual and customary fee rate. The NIC found it necessary, in the face of this situation, to transfer patients to distant hospitals, far removed from the patients own area.

(6) The Committee finds there has been a breakdown in communication between NIC and the medical profession that has aggravated the

the problem. There are many areas of lack of understanding between the two groups.

(7) The Committee has determined that there seems to be a more cooperative attitude among the orthopedic surgeons and anesthesiologists in the Reno area in their relationship with the NIC.

(8) The testimony indicated that some doctors were willing to accept less than usual and customary fees from various insurance carriers but were not willing to accept less than usual and customary fees from NIC.

RECOMMENDATIONS OF COMMITTEE

(1) (a) Mandate a Legislative Commission Study into the organization, the qualifications for appointment, and methods of operation of the Nevada Industrial Commission

(b) Mandate a Legislative Commission Study into the question of what fee structure the Nevada Industrial Commission should adopt; namely, a fixed schedule; or in the alternative, the usual and customary fee, and what safeguards are necessary to implement the rates.

(2) That the proposed bill (BDR 40-2139) be introduced in the Assembly by the Legislative Functions Committee and referred to the Committee on Health and Welfare.

(3) Obtain moratorium on fee schedules for one year.

WE BELIEVE THAT THE COMMITTEE SHOULD CONSIDER THESE BASIC POINTS WHEN IT EVALUATES AB 805.

1. PHYSICIANS HAVE CHALLENGED THE AUTHORITY CONFERRED UPON THE COMMISSION BY NRS 616.410.3 TO REGULATE FEES AND CHARGES FOR ACCIDENT BENEFITS. (A COPY OF NRS 616.410.3 APPEARS AS THE FIRST PAGE OF THE HAND OUT MATERIAL.
2. PHYSICIANS DEMAND THAT NIC PAY THEIR "USUAL AND CUSTOMARY" FEES. THEY REFUSE TO RECOGNIZE A FEE SCHEDULE, EVEN ONE BASED ON A STUDY BY THEIR PEERS, THE CALIFORNIA RELATIVE VALUE STUDIES OF 1964.
3. ALL WESTERN STATES USE A MEDICAL FEE SCHEDULE TO REGULATE AND CONTROL FEES FOR THE CARE OF THE INDUSTRIALLY INJURED WORKMAN. THE FEE SCHEDULES APPLY TO REIMBURSEMENT BY PRIVATE WORKMEN'S COMPENSATION CARRIERS AS WELL AS STATE FUNDS.
4. NIC'S FEE SCHEDULE FAR EXCEEDS THE FEE LEVELS PAID IN ANY SURROUNDING STATE FOR CARE OF THE INDUSTRIALLY INJURED. (SEE SHEET NUMBER 2 OF THE HAND OUT MATERIAL FOR COMPARISONS.)
5. POINT 4 IN THE REPORT OF THE JOINT LEGISLATIVE COMMITTEE'S REPORT STATED "THE COMMITTEE DETERMINED THAT IF THE RATES CONTINUE AT THE PRESENT LEVEL AND AT THE PRESENT RATE OF INCREASE, IT COULD SERIOUSLY JEAPORDIZE THE FUND AND CAUSE PREMIUM RATES TO RISE CONSIDERABLY. (SHEET NUMBER 3 IN THE HAND OUT SUMMARIZES THE FEE REVISIONS WHICH HAVE BEEN MADE SINCE FEBRUARY 1969). MARCH 1971 DISBURSEMENTS BY NIC SUBSTANTIATE THE COMMITTEE'S FINDING. NIC DISBURSED \$103,000 MORE DURING MARCH 1971 THAN DURING MARCH 1970 FOR ACCIDENT BENEFITS - A 30 PER CENT INCREASE IN DISBURSEMENTS ON 4 PER CENT FEWER CLAIMS.
6. PHYSICIANS HAVE DENIED CARE TO INJURED WORKMEN AS A MEANS OF APPLYING PRESSURE ON NIC TO ACCEDE TO THEIR DEMANDS. THE DEMANDS WOULD FORCE THE COMMISSION TO ABROGATE ITS RESPONSIBILITY UNDER THE LAW TO REGULATE FEES AND TO SAFEGUARD THE TRUST FUNDS.

PAGE NUMBER 4 OF THE HAND OUT IS AN ILLUSTRATION OF THIS TACTIC.

7. INDIVIDUAL PHYSICIANS REFUSE TO BE BOUND BY OR TO RECOGNIZE AGREEMENTS WORKED OUT BETWEEN THE NIC AND THE STATE MEDICAL ASSOCIATION REGARDING FEES. NIC AND THE STATE MEDICAL ASSOCIATION HAD AGREED TO A FEE SCHEDULE ON AUGUST 1, 1970, AND HAD FURTHER AGREED TO CARRY ON A STUDY OF THE FEASIBILITY OF AN ARRANGEMENT BASED ON USUAL AND CUSTOMARY FEES DURING THE ENSUING 12 MONTHS. IN LESS THAN 7 MONTHS, THE COMMISSION RECEIVED A NUMBER OF NOTICES, THAT PHYSICIANS WOULD DENY CARE TO THE INDUSTRIALLY INJURED IF NIC DID NOT ACCEPT THE INDIVIDUAL PHYSICIAN FEE SCHEDULES IMMEDIATELY.

PAGES 5 AND 6 OF THE HAND OUT MATERIAL ARE EXAMPLES OF THIS TYPE ULTIMATUM.

8. ANESTHESIOLOGISTS INSIST THAT NIC ACCEPT THE AMERICAN SOCIETY OF ANESTHESIOLOGISTS RELATIVE VALUE SCHEDULE AS THE BASIS FOR THEIR FEES AND THEN MAKE THEIR OWN MODIFICATIONS TO THE SCHEDULE. PAGE NUMBER 7 OF THE HAND OUT IS AN EXAMPLE. THE LETTER SETS A MINIMUM FEE OF \$72.00 EVEN THOUGH IT WOULD BE POSSIBLE TO ARRIVE AT A FEE OF \$60.00 UNDER THE SCHEDULE.

IN SUMMARY THE PHYSICIANS HAVE MADE DEMANDS AND ULTIMATUMS WHICH THE COMMISSION IS UNABLE TO MEET UNDER THE LAW. THE COMMISSION'S REFUSAL TO ACCEPT THE ULTIMATUMS HAVE RESULTED IN THE DENIAL OF CARE TO INJURED WORKMEN.

THE COMMISSION HAS NOT REFUSED TO WORK WITH THE DOCTORS THROUGH THE STATE MEDICAL ASSOCIATION. THE COMMISSION HAS ISSUED ^{NO} ULTIMATUMS. THE ULTIMATUMS HAS BEEN DELIVERED TO NIC. WE HAVE ASKED FOR HELP BECAUSE WE CANNOT REGULATE FEES, SAFEGUARD OUR TRUST, AND DELIVER MEDICAL CARE TO THE INDUSTRIALLY INJURED WITHOUT SOME POSITIVE MEANS OF CONTROL OVER FEE LEVELS.

WORKMEN'S COMPENSATION INSURANCE IS A LEGISLATED PROGRAM AIMED AT SOCIAL WELFARE OF THE WORKMEN OF THE STATE.

BOTH THE EMPLOYER AND THE EMPLOYEE SACRIFICED COMMON LAW RIGHTS WHEN WORKMEN'S COMPENSATION LEGISLATION WAS ENACTED.

IF PHYSICIANS REFUSE TO ACKNOWLEDGE A SOCIAL OR A MORAL OBLIGATION IN THE CASE OF THE INDUSTRIALLY INJURED, PARTICULARLY WHEN AGREEMENTS HAVE BEEN CONCLUDED BETWEEN NIC AND A COMMITTEE OF THEIR PEERS REGARDING FEES, IT WOULD APPEAR THAT LEGAL SANCTIONS ARE REQUIRED TO PROTECT THE WELFARE OF THE CITIZENS OF THE STATE. THERE ARE OVER 200,000 POTENTIAL NIC CLAIMANTS IN NEVADA - LAST YEAR 28,000 WERE INJURED ON THE JOB.

NIC AUTHORITY FOR MEDICAL FEE REGULATION

NRS 616.410 (3) PROVIDES "ALL FEES AND CHARGES FOR ACCIDENT BENEFITS SHALL BE SUBJECT TO REGULATION BY THE COMMISSION AND SHALL NOT BE IN EXCESS OF SUCH FEES AND CHARGES AS PREVAIL IN THE SAME COMMUNITY FOR SIMILAR TREATMENT OF INJURED PERSONS OF LIKE STANDARD OF LIVING."

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COMPARISON OF NIC MAXIMUM MEDICAL FEES WITH THOSE OF
WORKMAN'S COMPENSATION CARRIERS IN SURROUNDING STATES

	Nevada	California	Arizona	Oregon	Colorado	Utah	Idaho
CRVS 1964	Yes	Yes	Yes	No	No	No	No
ASA	No	No	Yes	No	No	No	No
Effective Date	8/1/70	10/1/69	12/1/70	10/1/70	1/1/70	1/1/68	1/1/68
Medicine	\$7.00	\$6.00	\$7.00	\$6.00	\$5.00-7.00	\$5.00	\$5.50 a.
Surgery	\$8.00	\$6.00	\$6.50	\$6.00 NPO	\$5.00-6.00 NPO	\$5.00	\$3.50-5.00 NPO
Radiology	\$7.30	\$6.00	\$6.50	\$5.00 a.	\$4.50-6.50	\$5.00	\$4.50 a.
Laboratory	\$7.30	\$6.00	\$6.00	\$5.00-6.00	?	\$5.00	\$5.00 a.
Anesthesia	\$10.00	\$6.00	\$7.00	\$8.00-8.50	\$6.00 a.	\$5.00- 6.00	\$6.00-6.50

Ratio of NIC
Fees to Above

100%

116.7-166.7%

100-142.8%

116.7-146%

116-166.6%

140-200%

127-160%

NPO = No post operative care covered by surgical fee
A = Approximate

NIC MEDICAL FEE REVISIONS 1966-1970

	<u>Effective Jan. 1, 1966</u>	<u>Effective Feb. 1, 1969</u>	<u>Effective Aug. 1, 1970</u>	<u>Ratio of Current Fees to 1966 Fees (1966 Fees = 100%)</u>
Medicine				
Initial Office Visit	\$ 7.50	\$ 10.00	\$14.00-42.00	187%-560%
Follow-up Office Visit	4.00	6.00	5.60-21.00	140%-525%
Admission to Hospital	17.50	21.00	21.00-42.00	120%-240%
Follow-up Hospital-Visit	4.00	6.00	7.00-21.00	175%-525%
Consultations Limited	15.00	21.00	21.00-35.00	140%-233%
Consultations, Complete	35.00	49.00	49.00	140%
Remainder of Medicine Section	6.00 per unit	7.00 per unit	7.00	116.7%
Surgery	5.00 unit	6.50 unit	8.00 unit	160%
Radiology	6.00 unit	7.00 unit	7.30 unit	122%
Pathology	6.00 unit	7.00 unit	7.30 unit	122%
Anesthesia	6.00 unit	7.00 unit	10.00 unit	167%

NIC has raised physician's fees 70 per cent since 1960. Nationwide physician fees have increased 57.7 per cent in the same time span.



20 May 1970

Nevada Industrial Commission
515 East Musser Street
Carson City, Nevada 89701

Gentlemen

A meeting was recently held of all the active, board eligible or board qualified orthopaedic surgeons in the Las Vegas area who are in private practice. Because of the negative response on your part for payment of the usual and customary fees, it was unanimously felt that as of June 5, 1970 all the elective orthopaedic practice for the Nevada Industrial Commission would be discontinued. Further problems that exist are excessive paper work, increasing risk of malpractice and irregularity and inconsistency of payments.

We will continue to follow our present Nevada Industrial Commission patients under our care through their current problems and will, of course, give appropriate care to any true emergency. When the general policy has been changed, then we shall re-evaluate future professional relationship with the Commission.

Sincerely,

Chester W. Eskey, M.D.
Chester W. Eskey, M.D.

Armand J. Scully, M.D.
Armand J. Scully, M.D.

Jürgens H. Bauer, M.D.
Jürgens H. Bauer, M.D.

Gerald L. Higgins, M.D.
Gerald L. Higgins, M.D.

Ralph J. Litton, M.D.
Ralph J. Litton, M.D.

William B. Harris, M.D.
William B. Harris, M.D.

John H. Payne, M.D.
John H. Payne, M.D.

Aaron Zivot, M.D.
Aaron Zivot, M.D.

cc: NIC Office
2601 East Sahara Avenue
Las Vegas, Nevada

RECEIVED
MAY 22 1970
NEVADA INDUSTRIAL COMMISSION
④

William G. Findorff, M.D.—Peter J. Fennel, M.D.

PRACTICE LIMITED TO ANESTHESIOLOGY

SAHARA RANCHO MEDICAL CENTER

2300 Rancho Drive • Suite 108A
Las Vegas, Nevada 89102

February 12, 1971

Telephone 385-3437
Ans. Service 735-5198

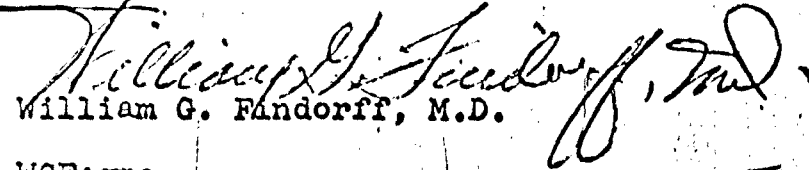
Nevada Industrial Commission
2601- East Sahara Avenue
Las Vegas, Nevada 89105

Dear Sirs:

I believe that you were properly informed as to our fee schedule which has been in affect for a considerable time. All "Insurances Agencies" and private uninsured persons are billed \$11.00 per units using the American Society of Anesthesiologists Relative Value Guide.

If you do not intend to follow this fee schedule, please properly inform us before March 15th, 1971, and we will no longer accept Nevada Industrial Commission cases.

Sincerely,


William G. Findorff, M.D.

WGF:gme

RECEIVED

FEB 17 1971

NEVADA INDUSTRIAL COMM.
LAS VEGAS, NEVADA

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ANESTHESIOLOGY CONSULTANTS, Inc.

WILLIAM C. PRESCOTT, M.D.
LEONARD H. RAIZIN, M.D.
LESLIE E. SOPER, M.D.
REIICHI IIZUKA, M.D.

270
SUNRISE MEDICAL BUILDING
3198 MARYLAND PARKWAY
SUITE 104 — PH. 735-1515
LAS VEGAS, NEVADA 89109

February 15, 1971

Nevada Industrial Commission
2601 E. Sahara Ave.
Las Vegas, Nevada

Gentlemen:

As regards the agreement between Clark County physicians and the N.I.C. last summer, wherein the Commission agreed to evaluate the fee profile of participating physicians and upon determination thereof would honor the usual and customary fee principle, I now understand that the fee profile is capable of being established. It would seem to me that the usual and customary fee should be met effective 1 March 1971. If N.I.C. fails to honor their committment of last summer, i.e., reimbursing physicians for their usual and customary fee of this community, I feel that once more I will have to withdraw my services to the N.I.C. patient, effective 15 March, 1971.

Although that profile must certainly be well established by now, the method of fee determination by me is via the American Society of Anesthesiologists Relative Value Guide based on \$11.00 per unit figure.

I certainly wish to continue supporting the N.I.C. patient to the fullest extent I may and I see no reason for which my usual and customary fee may not be paid me as per our understanding of last year.

Sincerely yours,

ANESTHESIOLOGY CONSULTANTS, INC.



WILLIAM C. PRESCOTT, M.D.

WCP:nw

RECEIVED
FEB 17 1971

NEVADA INDUSTRIAL COMM.
122 STATE NEVADA

deBruin, Kemp, Plehn, Sprague
CLARK COUNTY ANESTHESIA ASSOCIATES, Chartered
2031 Paradise Road
Las Vegas, Nevada 89105

Clayton H. deBruin, M.D.
William E. Kemp, M.D.
Robert V. Plehn, M.D.
Gerald T. Sprague, M.D.
Neil Swissman, M.D.

Phone 735-0141

March 22, 1971

TO WHOM IT MAY CONCERN:

Dear Sir:

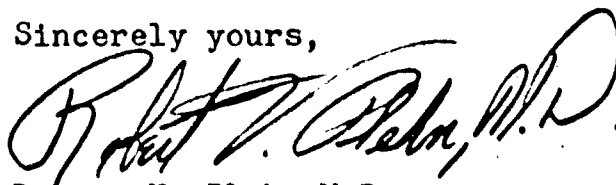
This is to advise you that deBruin, Kemp, Plehn, Sprague, Clark County Anesthesia Associates Chartered sets the fee's to be charged by C. H. deBruin, M.D., William E. Kemp, M.D., Robert V. Plehn, M.D., G. T. Sprague, Jr., M.D. and Neil Swissman, M.D..

The Corporation follows the A.S.A. Relative Value Schedule, which is prepared by the American Society of Anesthesiologists for use by anesthesiologists across the country. The minimum basic point value for the above named employee Physicians of C.C.A.A. Chartered will be (\$12.00) twelve dollars. Our minimum fee is \$72.00.

A copy of this letter is being sent to all major insurance carries and state and federal agencies in order that they become familiar with our system of billing as well as our unit charge. By having this information available, you will be in a better position to explain our charges to your subscribers.

Copies of the A.S.A. fee schedule may be obtained by writing to The American Society of Anesthesiologists, 515 Busse Highway, Park Ridge, Illinois 60068.

Sincerely yours,



Robert V. Plehn, M.D.
President

RVP/gg

7

WILLIAM C. PRESCOTT, M.D.
LEONARD H. RAIZIN, M.D.
LESLIE E. SOPER, M.D.
REICHI HIZUKA, M.D.

SUNRISE MEDICAL BUILD
3165 MARYLAND PARKW
SUITE 104 — PH. 733-
LAS VEGAS, NEVADA 89

August 11, 1970

Blue Shield
3660 Baker Lane
Reno, Nevada 89502

Dear Sir:

This is to inform you that as of August 1, 1970, the members of Anesthesiology Consultants, Inc., (listed in the letterhead), will base the charges for their anesthesia services on the following schedule.

Basic procedure values and procedure numbers will be taken from the American Society of Anesthesiologists Relative Value Guide, (second edition), including allowed modifying units and one unit for every fifteen minutes of time or portion thereof. The conversion value will be \$11.00 per unit.

The principle reason for this increase from \$10.00 per unit to \$11.00 is the astounding rise in mal-practice insurance premiums paid by anesthesiologists in Las Vegas.

Thanking you for your attention to this, I am,

Yours sincerely,

Leslie E. Soper

LESLIE E. SOPER, M.D.
Vice President
In Charge of Accounts, A.C.I.

LES/em

SURGERY

H. S. COLLETT, M.D., F.A.C.S.
T. A. THOMPSON, M.D., F.A.C.S.
H. K. MATERN, M.D.

INTERNAL MEDICINE

D. A. HUNTER, M.D.
J. D. MCCARTHY, M.D.
J. H. REAM, M.D.

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GENERAL PRACTICE

G. T. MANILLA, M.D.
L. A. MOREN, M.D.

ELKO CLINIC

762 FOURTEENH STREET
ELKO, NEVADA 89601

CARL H. SHUCK,
BUSINESS MANAGER

PHONE (703) 738-3111

April 12, 1971

John 4/13/71
JDM

Gentlemen:

Re: AB 805

When a socialized insurance scheme (Nevada Industrial Commission) becomes so incapable of managing its affairs that it is necessary for it to consider conscription of suppliers of services into involuntary servitude in conflict with the Constitution of the United States and other elementary rights, then it would appear that this scheme has outlived its usefulness to the people of Nevada and that it should be replaced by private insurers.

A separate, less strong expression of opposition to AB 805 will follow signed by all, or most, of the physicians practicing in Elko County.

Sincerely yours,

John D. MacCarthy, M.D.
John D. MacCarthy, M. D.
Douglas A. Hunter, M. D.

Douglas A. Hunter

JDM:jj

- cc: Assemblyman Norman Glaser
- Assemblyman Roy Young
- Senator Warren Monro
- Chairman Assembly Committee on Legislative Funds
- Chairman Assembly Committee on Health and Welfare
- Governor Mike O'Callahan
- Nevada Industrial Commission
- Nevada State Medical Society
- Clark County Medical Society
- Washoe County Medical Society
- Nevada State Board of Medical Examiners

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APR 13 1971

NEVADA INDUSTRIAL
COMMISSION